THE MOBILE COUNTY HEALTH DEPARTMENT

Major General William C. Gorgas Clinic

ANNUAL REPORT
1983

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MOBILE COUNTY HEALTH DEPARTMENT

251 N. Bayou Street
Mobile, Alabama 36652

Mobile County Health Department

Major General William C. Gorgas Clinic

Alfred R. Stumpe, M.D., M.P.H.
Health Officer

L. Gerald Lightsey, Dr. P.H.
Assistant Health Officer

BOARD OF HEALTH
M. Preston Daugherty, Jr., M.D., Chairman
C. Ivey Williamson, M.D.
Francis W. Sullivan, M.D.
L. Steven Weinstein, M.D.
Knut E. Mueller, M.D.
Dan Wiley, Pres., County Commission

The completion of the restoration project of the Frank S. Keeler Building brought to fruition a long-awaited and much needed move to consolidate all activities at one site. After several years of providing service in separate facilities, we are now able to serve the citizens more conveniently at one location. The consolidation enabled the centralization of various support services enhancing clinic efficacy and cost efficiency.

It is our goal to continue with the provision of high quality medical care and services for Mobile Countians. We extend our appreciation to our contributors and citizenry of Mobile for their continued support and cooperation, and in helping us carry out our mission.

We take pride in our accomplishments and would like to share these with you through our annual report.

Alfred R. Stumpe, M.D.

Alfred R. Stumpe, M.D., M.P.H.
Health Officer

Robert S Harlin, MD

Robert S. Harlin, M.D.
Chairman, 1983

BOARD OF HEALTH

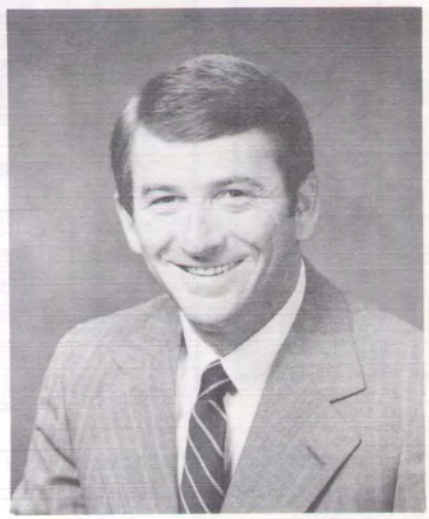
Robert S. Harlin, M.D.
Chairman

M. Preston Daugherty, Jr., M.D.

C. Ivey Williamson, M.D.

Francis W. Sullivan, M.D.

L. Steven Weinstein, M.D.

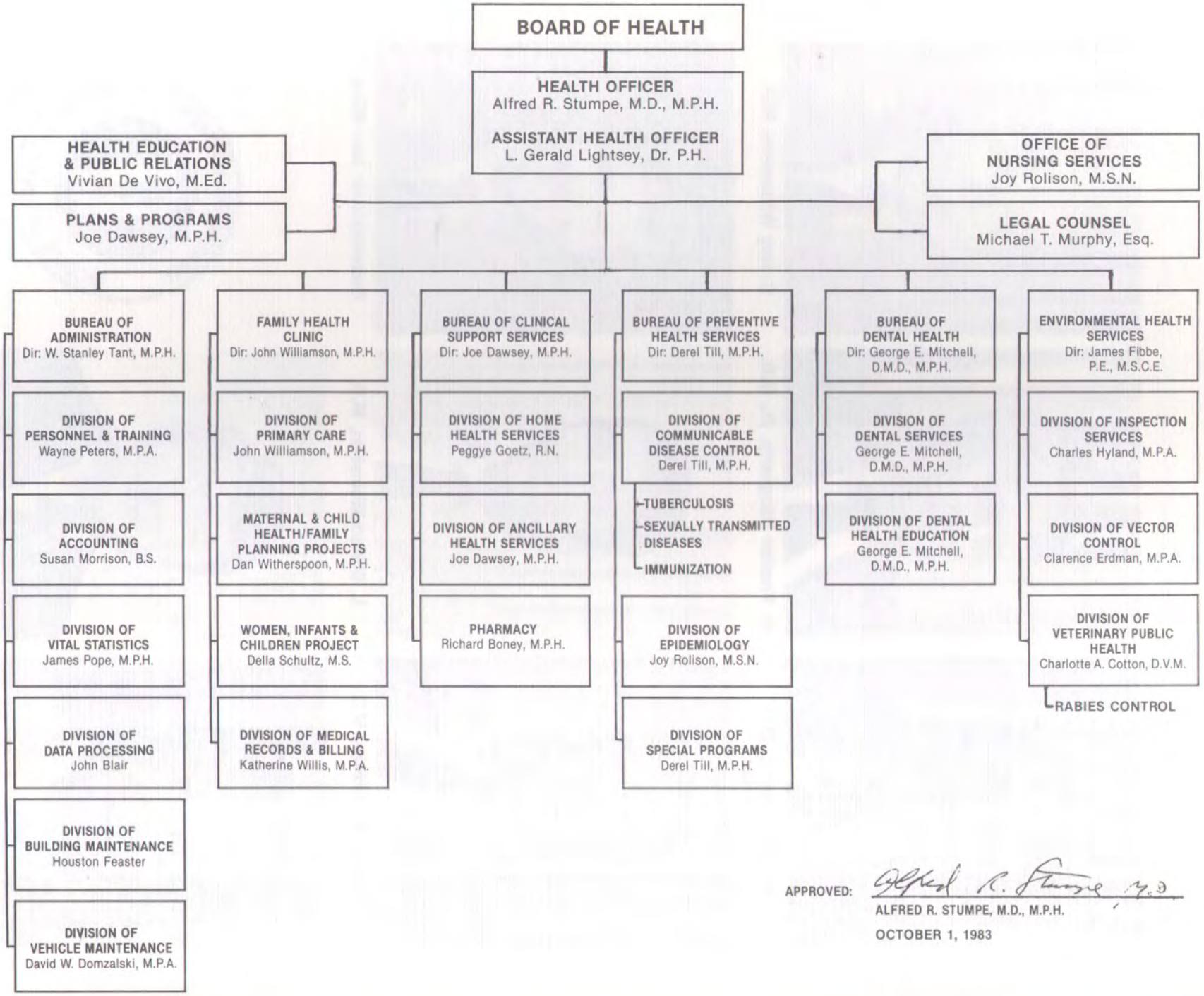


Commissioner Dan Wiley

Alfred R. Stumpe, M.D., M.P.H.
Health Officer

L. Gerald Lightsey, Dr. P.H.
Assistant Health Officer

HEALTH DEPARTMENT
MOBILE COUNTY, ALABAMA



APPROVED: Alfred R. Stumpe M.D.

ALFRED R. STUMPE, M.D., M.P.H.

OCTOBER 1, 1983

1983 HIGHLIGHTS

- Full restoration of the historic Frank S. Keeler Building was completed.
- Consolidation of all Health Department activities at the Keeler Complex at 251 North Bayou Street.
- Centralization of clinical medical records enabling the use of one record per patient regardless of the number of clinics utilized.
- Centralization of patient registration for all clinics.
- Centralization of laboratory services allowing increased workload.
- Construction of new parking areas on Bayou and Congress Streets for employee and patient parking.
- Board of Health approval to purchase software and hardware to establish our own computer system.
- Establishment of car seat loaner program.
- Lease/purchase agreement was signed by the Mobile County Department of Pensions and Security for the 248 Cox Street building previously occupied by the Health Department.

MOBILE COUNTY BOARD OF HEALTH

Robert S. Harlin, M.D.	December 1983
M. Preston Daugherty, Jr., M.D.	December 1984
C. Ivey Williamson, M.D.	December 1985
Francis W. Sullivan, M.D.	December 1986
L. Steven Weinstein, M.D.	December 1987
Honorable Dan Wiley	President, Mobile County Commission

LIAISON MEMBERS

Joseph W. Gunter, Jr., D.M.D.
Glenn M. Yelverton, D.D.S.
Clarke Yarbrough, D.V.M.
David de Gruy, R.Ph.
John Finley, R.Ph.

STAFF

Alfred R. Stumpe, M.D., M.P.H.	Health Officer
L. Gerald Lightsey, Dr. P.H.	Assistant Health Officer
W. Stanley Tant, M.P.H.	Bureau of Administration
John R. Williamson, M.P.H.	Family Health Clinic
Joe M. Dawsey, M.P.H.	Bureau of Clinical Support Services
Derel G. Till, M.P.H.	Bureau of Preventive Health Services
George E. Mitchell, D.M.D., M.P.H.	Bureau of Dental Health
James E. Fibbe, P.E., M.S.C.E.	Environmental Health Services

BUREAU OF ADMINISTRATION

W. Stanley Tant, M.P.H.
Director

The Bureau of Administration encompasses the Divisions of Personnel and Training, Accounting, Vital Statistics, Data Processing, Building Maintenance, and Vehicle Maintenance.

Since the acquisition of the Frank S. Keeler Building in 1975, renovations have been made to the building to accomodate clinics and administrative offices for the Health Department. In the first renovation phase completed in 1977, the first two floors were restored for clinic use. During 1983, major renovations were made completing the entire restoration of the 1842 facility. The third and fourth floors were renovated for office use; a new addition on the first floor provided spacious areas for registration, pharmacy, and vital statistics; and the Marine Hospital's old laundry room was converted to the Auditorium on the second floor. The consolidation of all Health Department activities into one location is the realization of a long-awaited and much needed move.

During the past two years, property east of Bayou Street has been procured for parking. Two new parking areas were opened on Bayou Street for employee and patient parking. Additional fenced parking space was provided on Congress Street. Entrance to the Health Department clinics is now through the new registration area on Bayou Street.

Through a lease/purchase agreement with the Mobile County Department of Pensions and Security (DPS), the building on Cox Street will be turned over to that agency in 1984. The asbestos abatement and some other minor renovations will be completed in March 1984. At that time DPS will move out of the six residence buildings at the Keeler Complex making those buildings available for Health Department use.

Division of Personnel and Training

The 1982-1983 fiscal year ended September 30, 1983, with 210 employees and an annual payroll, including fringe benefits, of $3,499,929. The number of employees represents a slight increase from the 205 employees on the payroll one year ago. A total of 83 persons terminated their employment for various reasons (40 were part-time seasonal employees who worked in the Division of Vector Control). The annual turnover rate for the year was 13.9%. This is a significant reduction when compared to the 1982 rate of 20.1%, and is the lowest turnover rate in nine years.

During the summer months, 10 high school and college students were assigned to the Health Department as part of the CETA Summer Youth Employment Program. They assisted with clerical functions in various divisions where their performance was rated as satisfactory.

During the fiscal year, three employees received financial assistance to attend education and training programs to enhance their job knowledge and performance. Other employees attended various courses offered through the Training Office of the Personnel Board for Mobile County at no additional expense to the Health Department.

The Employer-Employee Relations Committee held five meetings in 1983. This committee is comprised of three bureau directors and three employee representatives who occupy positions below the management level. The committee discusses matters necessary to improve and maintain a harmonious employer-employee relationship and make appropriate recommendations to the Health Officer.

Division of Accounting

Annual revenue for fiscal year ending September 30, 1983, for local funds amounted to a total of $2,854,250, a reduction of $343,495 from local funds received during the previous fiscal year. Revenue reductions were experienced in state funds as well as Medicare and Early Periodic Screening, Diagnosis and Treatment reimbursements. Table I summarizes sources of funds and their application during the fiscal year.

The Alabama Oil and Gas Severance Board was paid $447,115.80 as reimbursement for overpayments received in Fiscal Year 1981 and Fiscal Year 1982. Total repayment should be made by March, 1984.

Legislation was passed during the year allowing the transfer of up to 20 percent of the ad valorem tax receipts to the general fund. The Mobile County Board of Health authorized a $200,000 transfer from ad valorem monies to the general fund to balance that fund.

Three audits were conducted during the year as required by state and federal authorities. The

TABLE I
SOURCE AND APPLICATION OF FUNDS
FISCAL YEAR 1982-1983
ENDING SEPTEMBER 30, 1983

SOURCE OF FUNDS:

Appropriations:

Local Governments		
County of Mobile	$ 364,379	
City of Mobile	400,000	
Other Municipalities	31,177	
State of Alabama	437,024	
Other Appropriations	23,729	
TOTAL APPROPRIATIONS:		**$1,256,309**

Grants:

*Family Planning (7/1-6/30)	$ 252,000	
*Family Health Clinic (6/1-5/31)	470,502	
Maternity and Infant Care (MIC)	529,643	
Special Dental	37,500	
Women, Infants & Children (WIC)	262,525	
Rodent Control	82,969	
Tuberculosis (Study 21)	6,608	
TOTAL GRANTS:		**$1,641,747**
AD VALOREM TAXES:		**1,025,102**

Other Funds Received:

Reimbursements (Federal, State, & Other Projects)	$ 620,793	
Oil & Gas Severance Taxes	255,911	
Local Fees, Permits, Miscellaneous	398,207	
Medicaid/Medicare	44,087	
School Health	16,827	
Local Rentals	82,011	
Local Refunds and Interest	17,905	
Ad Valorem Refunds and Interest	31,167	
Transfer In	162,200	
Family Health Clinic Earned Income	135,132	
TOTAL OTHER FUNDS:		**$1,764,240**
TOTAL REVENUE FOR YEAR:		**5,687,398**

APPLICATION OF FUNDS:

	LOCAL	AD VALOREM	FEDERAL	TOTAL
Personnel Costs	$2,229,262	$ 259,688	$1,034,049	$3,522,999
Contractual Services	207,296	31,245	227,700	466,241
Travel	39,225	429	13,018	52,672
Equipment	18,158	103,127	17,910	139,195
Supplies & Other	484,538	223,781	277,597	985,916
Indirect Cost	-0-	83,591	218,153	301,744
Capital Expense	10,302	-0-	-0-	10,302
Transfers Out	-0-	162,200	-0-	162,200
TOTALS	**$2,988,781**	**$ 864,061**	**$1,788,427**	**$5,641,269**

*Grant Year Ending in Local Fiscal Year.

State Examiners of Public Accounts audited the entire fiscal operation of the Health Department for Fiscal Year 1981 and Fiscal Year 1982. The primary care grant was audited for Fiscal Year 1982 and Fiscal Year 1983 as requested by federal grant officials. The Maternity and Infant Care Project, the Family Planning Project and the Special Children's Dental Project were audited by the State Health Department as well. The audits revealed sound fiscal operations with minor adjustments to be made.

Division of Vital Statistics

During 1983, the Division of Vital Statistics moved into spacious new offices in the Keeler Building allowing for the safe storage of valuable records dating back to 1820. The Mobile County Health Department houses the original records of births and deaths which occurred in Mobile County prior to 1908 in addition to birth and death records since 1952.

The major responsibilities for the division include the collection of vital records (births, deaths, and fetal deaths) in Mobile County; the issuance, upon request, of certified copies of vital records; the collection of miscellaneous fees for clinical services provided by the Health Department; and the compilation of a monthly report indicating types of Health Department services provided to each municipality in Mobile County.

The division recorded 10,745 vital events in Mobile County (for residents and non-residents) in 1983: 7,295 live births; 3,370 deaths; and 80 fetal deaths. Provisional data for resident births (Table II) show that there were 6,440 births in 1983 for an annual birth rate of 16.8 per 1,000 population, a 7 percent reduction from the 18.0 rate in 1982. Of these births, 1,218 (18.9%) were to adolescent mothers compared to 1,487 (22%) in 1978 (5 years ago). The downward trend in the number of births and percentage of births to teenage mothers continued.

Provisional data also show that there were 2,896 resident deaths in 1983 for an annual death rate of 7.6 per 1,000 population (Table II). Infant deaths in 1983 totalled 67 for an infant mortality rate of 10.4 per 1,000 live births. This rate is 26.5 percent lower than the infant death rate for 1982 (15.5 per 1,000 live births) and represents the lowest infant death rate ever recorded in Mobile County. No maternal deaths were reported in Mobile County in 1983 for the second consecutive year.

Death rates for Mobile County, the State of Alabama, and the United States for the period 1978-1983 are presented in Table III. The downward trend of the death rate in Mobile should be noted and also that the rate for Mobile County continues to be lower than that for the State as a whole, as well as for the United States.

As in 1982, heart disease continued to be the number one cause of death in Mobile County accounting for 1,138 (32.4%) of total resident deaths; cancer accounted for 573 deaths (19.8%); stroke, 217 deaths (7.5%); and accidents, 130 deaths (4.5%) as shown in Table IV. Especially interesting is the rather sharp drop in the number of deaths in 1983 due to homicides.

The issuance of certified copies of vital records, upon request, totalled 18,953 birth records and 15,683 death records for 1983. A total of 1,738 verification cards were issued in 1983 to those whose birth occurred between 1908 and 1952 since the Health Department does not have on file birth certificates for that time period.

Division of Data Processing

The field of data processing has expanded the horizons of many areas in recent years and its applications in the field of public health is no exception. It has increasingly become an integral part of all Health Department activities since "time-sharing" for computer services with the University of South Alabama began in 1972.

All data processing functions at the Health Department which include data entry, computing, programming and systems analysis are the responsibility of the Division of Data Processing. An increasing demand on the division for computer applications in the area of patient care and centralization of medical records prompted the appointmnent of an in-house committee to study the feasibility and cost-effectiveness of purchasing our own hardware and software to establish our own computer system. As a result of the study a decision was made and approved by the Mobile County Board of Health at its September 20, 1983 meeting to purchase an IBM System 38 which would be installed in August 1984 and be operational by October 1984, and to terminate the "time-sharing" agreement with the University of South Alabama. The new interactive computer system will consist of one 5381 central processing unit; two 3370 direct access disk drives; one 3262 printer; one 3411 magnetic tape drive; and ten 5291 display stations.

Time frames for the conversion of existing computer applications to System 38 software compatability have been developed to insure an orderly conversion and start-up of the new system. Division personnel attended several IBM sponsored courses for the System 38 during the year and with additional seminars scheduled in 1984, will be fully trained by the time of the new system's installation.

Division of Building Maintenance

The Division of Building Maintenance has responsibility for all the buildings owned or occupied by the Health Department. Last year four separate facilities were maintained which included the Newburn Building, the Keeler Building, the STD Clinic building, and the motor pool complex with a total of 125,819 square feet. In addition to daily

cleaning and housekeeping of these buildings, physical maintenance and repairs are also done. Groundskeeping of 20 acres of land including parking lots was likewise performed.

The 15 member staff assumed responsibilities for the Health Department move from the Newburn Building to the newly restored Keeler Building. The construction work at the Keeler Building was overseen by the division during a ten month period.

Division of Vehicle Maintenance

The division has responsibility for maintaining the Health Department's complete fleet of vehicles comprised of 16 adulticiding trucks, 2 jeeps, 17 passenger cars, 17 pick-up trucks, and 2 vans for a total of 52 vehicles. The staff of two auto mechanics and one clerk under the direction of the division director are responsible for emergency repairs as well as a preventive maintenance program for all vehicles. The garage facility has the capability of handling all but major repair work.

TABLE II
Summary of Vital Events
Residents of
Mobile County; Alabama; United States
1982-1983

EVENT	Mobile County				Alabama		United States	
	1983*		1982		1982		1982*	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Births	6,440	16.8	6,777	18.0	60,296	15.1	3,704,000	16.0
Deaths	2,896	7.6	2,980	7.9	34,957	8.8	1,986,000	8.6
Infant Deaths	67	10.4	105	15.5	831	13.8	41,700	11.2
Neonatal Deaths	48	7.5	80	11.8	556	9.2	28,240	7.6
Perinatal Deaths	76	11.7	119	17.4	856	14.1	N/A	N/A
Fetal Deaths	63	9.8	87	12.8	675	11.2	N/A	N/A
Maternal Deaths	0	0.0	0	0.0	12	2.0	330	0.9

* Provisional data as of March 26, 1984.

Rates: Births and deaths per 1,000 population.
Infant, neonatal and fetal deaths per 1,000 live births.
Maternal deaths per 10,000 live births.
Perinatal deaths per 1,000 deliveries.

Definitions: Infant Deaths-Deaths to children under 1 year of age.
Neonatal Deaths-Deaths to children under 28 days of age.
Perinatal Deaths-Deaths to fetuses over 28 weeks gestation and infants under 7 days of age.
Fetal Deaths-Deaths to fetuses after 20 weeks or more of gestation.

TABLE III
Death Rates
Mobile County; Alabama; United States
1978-1983

MOBILE COUNTY

EVENT	1978	1979	1980	1981	1982	1983*
Deaths	9.0	7.6	8.5	8.3	7.9	7.6
Infant Deaths	17.2	11.1	15.4	10.8	15.5	10.4
Neonatal Deaths	12.4	8.0	9.1	7.0	11.8	7.5
Perinatal Deaths	19.2	16.1	15.6	14.5	17.4	11.7
Fetal Deaths	8.4	8.9	9.9	13.8	12.8	9.8
Maternal Deaths	3.1	0.0	0.0	1.4	0.0	0.0

* Provisional data as of March 26, 1984.

ALABAMA

EVENT	1978	1979	1980	1981	1982	1983
Deaths	9.1	8.8	9.0	9.0	8.8	NA
Infant Deaths	16.4	14.3	15.1	12.9	13.8	NA
Neonatal Deaths	10.9	9.3	9.8	8.3	9.2	NA
Perinatal Deaths	17.3	14.3	15.5	14.4	14.1	NA
Fetal Deaths	12.2	10.5	11.4	12.3	11.2	NA
Maternal Deaths	2.2	1.4	1.3	1.1	2.0	NA

UNITED STATES

EVENT	1978	1979	1980	1981	1982*	1983
Deaths	8.8	8.7	8.9	8.7	8.6	NA
Infant Deaths	13.8	13.0	12.5	11.7	11.2	NA
Neonatal Deaths	9.5	8.7	8.5	7.8	7.6	NA
Perinatal Deaths	NA	NA	NA	NA	NA	NA
Fetal Deaths	NA	NA	NA	NA	NA	NA
Maternal Deaths	1.0	0.8	0.7	0.8	0.9	NA

* Provisional data as of March 26, 1984.

TABLE IV
Leading Causes of Death
Residents of
Mobile County; Alabama; United States
1982-1983

CAUSE OF DEATH	Mobile County				Alabama		United States	
	1983*		1982		1982		1982*	
	Number	Rate**	Number	Rate**	Number	Rate**	Number	Rate**
Diseases of the Heart (390-398) (402) (404-429)	1,138	297.9	1,017	270.7	12,901	302.7	759,050	327.8
Malignant Neoplasms (140-208)	573	150.0	687	182.9	7,343	183.8	435,550	188.1
Cerebrovascular Diseases (430-438)	217	56.8	263	70.0	3,365	84.2	159,630	68.9
Accidents (E800-E949)	130	34.0	154	41.0	1,907	47.7	95,680	41.3
Diabetes Mellitus (250)	58	15.2	56	14.9	637	15.9	33,220	14.3
Diseases of Arteries (440-448)	53	13.9	60	16.0	663	16.6	47,100	20.4
Influenza and Pneumonia (480-487)	52	13.6	29	7.7	613	15.4	50,460	21.8
Homicide (E960-E978)	50	13.1	85	22.6	517	12.9	22,320	9.6
Suicide (E950-E959)	41	10.7	38	10.1	427	10.7	27,860	12.0
Cirrhosis of Liver (571)	36	9.4	38	10.1	362	9.1	27,250	11.8
Certain Causes in Early Infancy (760-779)	33	8.6	63	16.8	408	10.2	20,760	9.0
Bronchitis, Emphysema and Asthma (490-493)	20	5.2	27	7.2	297	7.5	19,320	8.3
All Other Causes	495	129.6	463	120.0	6,327	163.3	287,800	124.3
TOTAL	2,896	757.7	2,980	790.0	34,957	880.0	1,986,000	857.6

* Provisional data as of March 26, 1984
** Rate per 100,000 population

FAMILY HEALTH CLINIC

John R. Williamson, M.P.H.
Director

Within the Family Health Clinic are clinical programs linked together by both services offered and patient usage. Most Family Health Clinic patients used most, if not all, of the various clinical and nutritional services. Programs administered within the Family Health Clinic are the Primary Care Clinic for pediatric and adult patients; the Maternity and Infant Care (MIC) Project; the Family Planning Project; and the Women, Infants and Children Supplemental Food (WIC) Project. The Division of Medical Records and Billing supports all clinics.

During 1983, the long range objective of the consolidation of all medical clinic records was accomplished. As a result, patients receiving Family Health Clinic services now only have one medical record on file in the new centrally located medical records office. Not only has clinic registration been centralized but also centralized was the social service function of the Family Health Clinic where the pay status is determined for all patients. Clinic services are paid for by the patient based on their income and family size.

Another centralization effort was accomplished in 1983 when all clinics were included in the Family Health Clinic's computerized billing system. During 1983, the MIC and Family Planning Clinics were added to the computerized billing system which previously included only the Primary Care Clinic and the Dental Clinic.

With these centralization activities complete, the varied services of the Family Health Clinic have now become more closely integrated and concurrently more efficient.

Division of Primary Care

The Division of Primary Care provided acute and preventive medical care to children and adults in Mobile County. The division's federally funded programs included primary care (acute care, preventive health examinations, and nutrition counseling); the family health education program in public schools; and dental health promotion activities. Other clinical activities of this division included Early Periodic Screening Diagnosis, and Treatment of Medicaid eligible children (EPSDT), refugee screening, and hypertension screening. The clinic primarily served patients with limited incomes as well as Medicaid and Medicare patients.

During 1983, the Primary Care Clinic served 6,185 patients with a total of 13,662 clinic visits; of these 8,724 were pediatric visits and 4,938 were adult visits.

The pediatric clinic mainly served children who were well and were seen on a regular basis according to an established preventive health schedule. Most of the 2,236 adult patients suffered from chronic illnesses such as diabetes and/or hypertension. With an increased physician staff, services for adults were expanded to accommodate the increased need for services.

Health promotion activities provided for a five day health education unit entitled, "Family Health Education", to be offered on a voluntary basis to all eighth grade students in the Mobile County Public School System. (This program is also discussed by the Office of Health Education.)

The EPSDT program completed its eleventh year providing Medicaid eligible children with initial and periodic examinations. Referrals to medical and dental specialists were also part of this ongoing program. There were 2,489 EPSDT visits in 1983 compared to 3,939 in 1982, thereby continuing the decline seen in the utilization of this service during the past several years.

Hypertension screening continued to be offered in the Primary Care Clinic. Patients found to have elevated blood pressure readings were referred to the clinic physicians or to a private physician, as preferred by the patient. During 1983, 1,732 persons were screened by clinic nurses for hypertension and 73 referrals were made.

The refugee screening program continued to function in 1983. Most of the refugees were from Laos, Cambodia, and Vietnam. The majority of these patients had never had complete physical examinations prior to coming to the clinic. Interpreters were provided by Catholic Social Services and the State Health Department's Indochinese Refugee Program. (Additional information on this program is discussed under Special Programs, Bureau of Preventive Health Services.)

Maternity and Infant Care Project

The Maternity and Infant Care (MIC) Project maintained its primary objective of improved pregnancy outcomes for indigent patients from

Mobile County through prenatal care, post-partum examinations, well baby care, and family planning services. The project provided outpatient and some inpatient care for those considered to be medically or socially high risk patients.

Patient care protocols for routine care followed the recommendations of the American College of Obstetricians and Gynecologists. Contractual arrangements with the University of South Alabama Health Services Foundation (OB/GYN Department) provided resident physician coverage for all maternity clinics. Patients considered to be at high risk by resident physicians were referred to the University of South Alabama's high risk clinic for their prenatal care.

Medical records for patients were integrated into the new centralized medical records system in 1983. Patients were referred to the Women, Infant, and Children (WIC) Project for nutrition counseling and for vouchers for food supplementation. Adolescent maternity patients were referred to the Dental Clinic for dental screening and care.

In 1983, there were 1,569 births to MIC patients at the University of South Alabama Medical Center (USAMC). This figure represents an 18 percent increase over the 1,282 births in 1982. During 1983, there were 23 MIC infant deaths; the MIC infant death rate dropped slightly from 15.6 per 1,000 live births in 1982 to 14.7 per 1,000 live births in 1983.

Vital events for 1983:

MIC births at USA Medical Center:		1,569
Birth Weights		
0-2000 grams	54	
2001-2500 grams	89	
Over 2500 grams	1,425	
Stillborn	1	
MIC maternal deaths		0
MIC infant deaths		23
MIC infant death rate		14.7
Deliveries by race:		
White		463
Black		1,106

The SIDS (Sudden Infant Death Syndrome) program was staffed by a part-time public health nurse who provided counseling to parents of SIDS victims. SIDS cases in 1983 confirmed by autopsy numbered six. In-service training on SIDS for police academy trainees was conducted three times during the year.

Family Planning Project

The primary objective of the Family Planning Project is to provide women of childbearing age with the freedom to determine the number and spacing of their children. Dedication to that purpose has developed an undisputed linkage with the MIC Project. Patients who delivered through the MIC Project are encouraged to participate in the family planning program after their post-partum visit.

The Family Planning Project provided contraceptive information, medical services, and contraceptive supplies to residents of Mobile County desiring family planning services. Fees for family planning services were based upon the patient's income and family size.

Various contraceptive methods were made available to family planning patients which included: oral contraceptives; intrauterine devices (IUD's); diaphragms; contraceptive foam; cream and jellies; and condoms. The project discussed natural family planning as a method of birth control and made referrals for those interested. Patients were encouraged to select the method which best suited their needs. Services for abortion or referrals for abortions were not offered through the maternity or family planning clinics of the Mobile County Health Department.

The family planning clinics were staffed by resident physicians from the University of South Alabama's Health Services Foundation, and by one private physician under contract. One full-time and one part-time OB/GYN nurse practitioner provided additional medical clinic coverage.

During 1983, 2,426 new patients were admitted to the Project. Patients made 16,920 visits to the clinic which represented a 6 percent increase over 15,983 visits for 1982.

The BCRR Annual Report submitted to both the Alabama Department of Public Health and to the Department of Health and Human Services verified that the Project saw more patients with less staff thereby reducing the cost-per-patient visit below the national expected norm. The cost per-patient-visit was computed at a figure of less than $14.00 per visit in 1983.

Women, Infants and Children Project

The Special Supplemental Food Program for Women, Infants and Children (WIC) was continued in 1983. The WIC Project in Alabama received additional federal funds which permitted an increased caseload throughout the State, including Mobile. The Mobile County caseload increased from 2,884 participants in January, 1983, to 3,828 in December, 1983. The annual participant caseload was 27% women (pregnant, breastfeeding, or post-partum), 44% infants and 29% children. The participants made a total of 41,206 visits.

Certification and voucher issuance were made in the clinic and, in addition, on a monthly basis at satellite issuance sites in Mt. Vernon, Citronelle, and Bayou La Batre. Thirty-six grocery stores in Mobile County contracted with the WIC Project to accept vouchers. The authorized foods for 1983 were milk, cheese, juice, eggs, and cereal for women and children, and iron-fortified formula, juice and cereal

TABLE IX
Selected Communicable Diseases Reported
Mobile County
1979-1983

DISEASES	1979	1980	1981	1982	1983
AIDS	*	*	*	*	2
Diphtheria	0	0	0	0	0
Encephalitis					
Primary	0	3	3	3	1
Secondary	0	0	0	0	0
Giardiasis	*	*	*	180	190
Gonorrhea	3865	3750	3932	4394	3970
Hepatitis					
A	77	46	49	17	7
B	36	64	85	103	102
Other	13	30	20	40	35
Legionellosis	*	*	*	3	2
Malaria	1	7	0	2	0
Measles					
Rubella	1	0	0	0	0
Rubeola	44	0	0	2	1
Meningitis					
Meningococcal	8	5	3	7	8
Tubercular	0	0	1	0	0
Other	42	71	99	80	74
Mumps	7	11	4	2	0
Poliomyelitis	0	0	0	0	0
Salmonella, Shigella and E. Coli infections	60	66	67	86	170
Syphilis	215	299	263	158	258
Tetanus	0	1	0	2	0
Typhoid Fever	0	1	3	0	0
Tuberculosis	74	76	65	93	50
Whooping Cough (Pertussis)	0	5	0	3	0

* Not a reportable disease in those years.

for infants. Federal guidelines established maximum amounts allowable for each category; nutritionists planned the food package for each individual participant at time of certification.

Program guidelines required that nutrition education be provided at the certification assessment in addition to a planned secondary encounter. Three WIC nutritionists provided 2,158 encounters to women; 2,330 to infants; and 2,286 to children. Secondary encounters totalled 2,547. Nutrition education encounters are listed below:

WIC Nutrition Education Encounters		
	Basic Encounter	Secondary Encounter
Women	2,158	952
Infants	2,330	765
Children	2,286	830
Total	**6,774**	**2,547**

The WIC Project certification process was included in the new central registration and medical record system implemented in 1983. This new system reduced duplicate visits to the Health Department for income determination interviews and laboratory testing. Refinement of this centralized system will continue in 1984.

The Division of Medical Records and Billing

The Division of Medical Records and Billing was expanded during 1983 to include services for the Primary Care Clinic, Family Planning Project, Materinity and Infant Care (MIC) Project, Women, Infants and Children (WIC) Project, and Tuberculosis Clinic. Services provided by this division include: maintenance of the clinical computer system which provides patient billing and clinical statistics; storage and maintenance of patient records; registration of clinic patients; social services and income verification for participating clinics. By providing these services in a centralized manner for all clinics, fragmentation of services has been eliminated and overall efficiency of the Family Health Clinic improved.

Central to the successful operation of this division was the use of a data entry encounter from which all patient billing and clinical statistics are complied, and the centralization of medical records. The encounter system produced a computer generated bill for each patient visit, maintained the accounts receivable records, and made statistics available which were used to improve clinical effectiveness as well as for federal, state, and local reporting purposes.

Central registration gathered demographic information for each patient, registered patients for each clinic visit, and sent the updated record to the appropriate clinic. Approximately 400 patients were registered for clinics each day.

The centralized medical record enabled us to use one record for each patient regardless of the number of clinics the patient attended. This reduced the duplication of services by providing each clinic with results of tests ordered by other clinics, as well as providing an organized format for storage of patient information. The central record room currently houses more than 50,000 active patient records.

The social service staff provided several vital functions for the clinics. They determined eligibility for programs which were available only to patients who met certain criteria and verified income for self-pay patients of clinics using a sliding fee scale. The social workers also provided counseling and referral services to Health Department clients who required services available through other agencies and assisted patients in locating funds for treatments not available through the Health Department. In addition, these employees administered the car seat loaner program. To date, 90 infant car seats have been donated or purchased for the use of clients who cannot afford to purchase this item.

BUREAU OF PREVENTIVE HEALTH SERVICES

Derel G. Till, M.P.H.
Director

The Bureau of Preventive Health Services consists of the Division of Communicable Disease Control encompassing Tuberculosis, Sexually Transmitted Diseases and Immunization; the Division of Epidemiology; and the Division of Special Programs, which includes refugee screening and foodhandlers' classes and examinations.

Division of Communicable Disease Control

Tuberculosis

The Tuberculosis Program continued its efforts to find, bring to treatment, and to follow-up patients with tuberculosis in Mobile County. There were 50 new cases of tuberculosis reported in Mobile County in 1983 for a case rate of 13.2 per 100,000 population. This represents a sharp decline from the 78 new cases reported in 1982 and a case rate of 20.9 per 100,000 population. In addition, 38 patients who were tuberculosis suspects were provided with medical care in 1983. Tuberculosis contacts and reactors who received preventive therapy totalled 333. A total of 10 patients with atypical tuberculosis were diagnosed last year. The open case register in December 1983 contained 43 cases as compared to 78 in December 1982.

The Tuberculosis Program conducted clinics 5 days each week. On Tuesday and Friday of each week, special clinics were conducted to handle special medical problems, including patients with atypical tuberculosis. These clinics were staffed by contract physicians and Fellows in Pulmonary Disease from the University of South Alabama Medical Center. The Tuberculosis Program continued to participate with the Centers for Disease Control in Study 21 which is a study of short term chemotherapy regimens in selected patients with pulmonary tuberculosis. A total of 9 patients were entered into Study 21 in 1983 which was fewer than the 25 patients we expected to be eligible for this study each year.

There were 6,132 tuberculin skin tests given in 1983 through the Tuberculosis Program and an additional 13,442 skin tests given through the Foodhandler's Program.

TABLE V
New Tuberculosis Cases
Mobile County
1977-1983

Year	New Cases	Case Rate per 100,000 Population	Deaths
1977	51	19.7	9
1978	80	25.0	5
1979	74	23.1	5
1980	76	23.7	4
1981	65	17.4	5
1982	78	20.9	6
1983	50	13.2	3

TABLE VI
New Tuberculosis Cases By Location In Mobile County
1977-1983

Location	1977	1978	1979	1980	1981	1982	1983
Bayou La Batre	0	2	0	1	0	1	0
Chickasaw	0	1	1	1	0	1	1
Citronelle	1	4	0	1	2	0	0
Creola	0	0	0	0	0	1	0
Mobile	33	49	53	46	47	40	33
Mt. Vernon	1	4	0	1	1	1	0
Prichard	12	12	12	14	12	19	7
Saraland	2	1	1	2	0	0	0
Satsuma	0	3	1	1	0	0	0
Wilmer	0	0	0	1	0	1	2
Unincorporated	2	4	6	8	3	14	7
TOTAL	51	80	74	76	65	78	50

Sexually Transmitted Diseases

Primary and secondary syphilis morbidity increased by approximately 76 percent in 1983 with 172 cases reported compared to 98 reported cases in 1982. Early latent syphilis increased from 60 cases reported in 1982 to 84 reported cases in 1983, an increase of 40 percent. In addition, 2 cases of congenital syphilis were reported. Gonorrhea morbidity decreased by 10 percent in 1983 with 3,970 cases reported compared to 4,394 reported cases in 1982.

Mobile County experienced an upward trend in cases reported in penicillinase-producing Neisseria gonorrhoeae (PPNG) infections in 1983. A total of 57 cases were reported compared to 38 cases reported in 1983, only nine were reported during the first six months of the year while 48 cases were reported in the last six months of the year (35 of these 48 cases were actually reported in the last three months of the year).

The epidemiological staff continued to interview, investigate and perform follow-up on all priority Sexually Transmitted Disease patients. A summary of new cases of gonorrhea and primary and secondary syphilis reported for the past seven years is given in Table VII.

TABLE VII
Sexually Transmitted Diseases
1977-1983

Year	Gonorrhea	Primary and Secondary Syphilis
1977	3,713	12
1978	3,094	64
1979	3,865	144
1980	3,750	208
1981	3,932	172
1982	4,394	98
1983	*3,970	172

* An additional 70 cases were reported directly to the State Health Department by private physicians making the total cases reported to the State 4,040.

Immunization

During 1983, a total of 35,494 immunizations were administered to 19,027 patients through Health Department clinics (Table VIII). This represents an eight percent increase over 1982 in the number of immunizations given and a three present increase in the number of patients.

The annual school entrance immunization survey of kindergarten and first grades again, as in 1982, showed that 98.6 percent of all Mobile County children entering school were fully immunized (3 DTP, 3 OPV, MMR).

A new immunization survey form for use by

day care centers was developed. The new form will provide the Health Department with more accurate information on the immunization status of children under the age of five who attend licensed day care centers.

TABLE VIII
Immunizations Administered
1983

Type of Vaccine	
Diphtheria, tetanus, pertussis (DTP)	12,783
Diphtheria, tetanus-pediatric (DT)	125
Tetanus, diphtheria (Td)	2,723
Poliomyelitis, oral (OPV)	13,386
Measles, mumps, rubella (MMR)	4,086
Measles, rubella (MR)	225
Mumps	154
Rubella (German Measles)	363
Cholera	142
Yellow Fever	51
Pneumococcal pneumonia	116
Influenza	1,159
Gamma globulin	181
Total	**35,494**

Division of Epidemiology

During the year there were 4,958 cases of reportable diseases in Mobile County. An additional 114 presumptive cases were reported but later ruled out (Table IX). The staff made 5,072 epidemiological investigations and 3,779 follow-up visits for these reportable diseases.

Two cases of Acquired Immune Deficiency Syndrome (AIDS) were reported and both patients died. Both cases involved males who had travelled and/or resided out-of-state with onset of terminal illness occuring shortly after arriving in Mobile.

One case of rubeola was reported in a child who had been properly immunized for measles; he had travelled out-of-state 10 days prior to onset of symptoms. This was the only childhood immunizable disease reported.

The number of hepatitis B cases remained almost the same as last year. Illicit use of intravenous drugs accounted for 31 percent of the cases reported. The incidence of hepatitis A and hepatitis non-A, non-B decreased.

Reported cases of salmonellosis and shigellosis increased 97 percent. Four of the cases of salmonellosis had rare serotypes (S. d'juga).

Two patients with Vibrio infections were reported. The first, Vibrio fluvialis, was associated with the consumption of raw oysters and the second, Vibrio vulnificus, was associated with a wound received while peeling raw shrimp. In the latter instance the patient expired.

There were 190 reported cases of Giardiasis, a 5.5 percent increase from 1982. Of these cases, 16 were identified as a result of hospitalization; the infection was also found in four local day care centers. The predominate mode of transmission was the fecal-oral route.

Other reportable diseases included: one case each of Kawasaki Syndrome, Reye's Syndrome, and Rocky Mountain Spotted Fever, and two cases of Toxic Shock Syndrome. It should be noted that the one case of encephalitis reported in 1983 was not an arboviral disease.

Division of Special Programs

Refugee Screening Program

This is the third year that the Mobile County Health Department has conducted medical screenings for Indochinese refugees. The screenings consist of a history, general physical assessment, and testing for tuberculosis, intestinal parasites, hepatitis, and other communicable diseases.

During 1983, 161 refugees who were recent immigrants from Laos, Cambodia, Vietnam, Romania, Ethiopia and Poland were screened. This compares with 276 refugees screened in 1982.

The refugees examined were generally found to be in good health although some abnormalities were documented as follows:

71 patients positive for ova and parasites
1 Cambodian was found to have heart disease, pulmonary hypertension and syphilis
2 patients with active tuberculosis
1 patient with hepatitis A; 6 carriers of hepatitis B
1 Romanian was found to have lung cancer
All 25 Ethiopians screened had a history of malaria.

Foodhandlers Program

Foodhandlers' permits are required for all employees of food service establishments who handle unpackaged foods. Requirements for new applicants consist of a serological test for syphilis (VDRL), a tuberculin skin test, and attendance at a training session where proper methods of foodhandling and sanitation techniques are demonstrated. Foodhandlers also receive instruction on using the Heimlich maneuver as a first aid measure for patrons who might be choking.

BUREAU OF CLINICAL SUPPORT SERVICES

Joe Dawsey, M.P.H.
Director

The Bureau of Clinical Support Services includes the Division of Home Health Services; Division of Ancillary Health Services; and Pharmacy.

Division of Home Health Services

The Division of Home Health Services provided skilled nursing care, nurse aide, and homemaker services to residents of Mobile County. The staff of nurses and aides, on orders from a physician, served Medicare and Medicaid patients as well as the medically indigent.

Expansion of the Homemaker/Home Health aide services was made possible through new funding. Through a contract with the Mobile County Department of Pensions and Security, two parenting aides were employed to provide parenting skills to parents of abused or neglected children as well as oversee their children's acitivites. With supplemental federal funds, two additional homemakers were employed. One provided service to patients from the Family Health Clinic of the Mobile County Health Department and the other provided service on a contractual basis to patients from the Franklin Memorial Clinic. Table X shows services provided.

Division of Ancillary Health Services

The Division of Ancillary Health Services consisted of the central laboratory and x-ray services. During October 1983, all medical laboratory services were organized into one central laboratory. Prior to October 1983, laboratory services were separate functions within each clinic, oftentimes resulting in fragmentation of services. In addition, the centralization brought about better use of personnel allowing for more in-house work to be performed. A total of 45,996 lab tests were performed in the central laboratory while 12,777 sophisticated procedures were referred to community laboratories. The central laboratory is connected via computer with one of the community laboratories which allows for more rapid reporting of results for procedures done off premises.

Laboratory personnel continued to participate in the College of American Pathologists (CAP) clinical laboratory proficiency testing program.

X-ray services continued with an increase in the type of x-ray procedures performed. The x-ray procedures, which were originally limited to chest x-rays, now include spine, skull, long bone, and all other bone films. A total of 1,700 chest and 136 long bone x-rays were taken during the year. Special x-ray procedures are referred to other community medical facilities.

Pharmacy

The pharmacy provided prescription services for all Health Department clinics. During 1983, the pharmacy filled 7,594 new prescriptions. In an effort to contain and reduce costs, the pharmacy offered more generic drugs during the past year and this practice is expected to continue.

TABLE X
Home Health Services
1983

	R.N.	AIDE	CONTRACT
Acute & Chronic Illness			
Medicare	977	249	
Medicaid	301	127	
Disease & Disability	2,856	499	
Other			
Child Health	452		
Family Planning	12		
Maternity	124		
Homemaker Aide		946	
Parenting Aide		386	
Physical Therapy			132

BUREAU OF DENTAL HEALTH

George E. Mitchell, D.M.D., M.P.H.
Director

Dental diseases attack 98 percent of the population. Tooth decay is the largest dental problem among school age children, while periodontal disease afflicts all age groups. By the time the average child reaches middle school, he/she has nearly six permanent teeth affected by dental decay. Over half the children in this age group have mild gingival disease, a precusor of periodontal disease.

The main goal of the Bureau of Dental Health is to lessen the impact of dental diseases on Mobile County citizens. All of the Bureau's programs are directed toward preventing and treating dental problems through a variety of mechanisms.

Division of Dental Services

A full range of dental treatment services was provided to both children and adults. These services included oral prophylaxes, x-rays and other diagnostic procedures, fillings, extractions, and periodontal treatments. During the last half of the year, treatments, other than extractions for relief of pain and infection in adults, had to be limited due to the large demand for service among Mobile County citizens who could not otherwise afford care. Primary emphasis was on the provision of as complete care as possible to persons under 21 years of age. Treatment services were provided by contract dentists, dentists assigned by the National Health Service Corps, dental hygientists, and dental assistants. The clinical treatment facilities were enlarged during the renovation of the building and two new fully equipped dental operatories were added. In addition, a new dental prosthetic lab was opened where preparation of initial work for dentures, crowns, and bridges for adults is done.

Division of Dental Health Education

Teaching children and adults to recognize and correct poor oral health practices, to develop good dietary habits, and to value early and continued diagnostic and treatment services constitutes the major program of this division.

Fluoride mouthrinse programs were continued in nearly all Mobile County public elementary schools reaching 16,724 children. This program, in which each child rinses with a fluoride solution for 60 seconds once a week, reduces new dental decay by almost 50 percent.

A fluoride brush-in program was started in all 19 public middle schools. Approximately 15,000 children participated in this program for the first of two annual toothbrushing sessions using a concentrated fluoride toothpaste. This program effects a 30-35 percent reduction in the occurrence of new dental decay.

A workshop for 100 third grade teachers was held to prepare teachers to provide a more complete range of dental health education for their students. In addition, dental health education was provided as an integral part of the fluoride mouthrinse and brush-in programs. Dental health educational classes and seminars were also held at several schools not participating in the preventive programs.

Screening for dental defects was conducted in all public elementary and middle schools participating in the free lunch program. Children

were examined and referred to their own dentists or given appointments in the dental clinic of the Mobile County Health Department. The Bureau of Dental Health also participated in dental screenings in cooperation with the First District Dental Society during Children's Dental Health Month in February 1983.

TABLE XI
Dental Services
1982-1983

	1982	1983
Number of Patient Visits	11,031	12,091
Preventive Services		
Prophylaxes	1,760	2,356
X-rays	8,033	8,794
Oral hygiene instruction	747	3,466
Treatment Service		
Examinations and treatment plans	3,258	3,466
Fillings	4,106	3,518
Extractions	4,455	5,286
Dental Health Education		
Lectures and other presentations		
Persons in attendance	11,788	31,853
Screening and school dental inspections	8,280	25,472
Dental health educational materials distributed	21,683	152,412
Children in fluoride mouthrinse program	15,000	16,724
Children in fluoride brush-in program		15,000

ENVIRONMENTAL HEALTH SERVICES

James E. Fibbe, P.E., M.S.C.E.
Director

Environmental Health Services includes the Divisions of Inspection Services, Vector Control, and Veterinary Public Health. Impact on the population of Mobile County through the environmental programs is immeasurable in that all segments of the community are in some way affected by Health Department actions. Our society today is one of trusting people and takes for granted such things as a safe water supply, wholesome food, safe environment, adequate sewage disposal and proper plumbing, and protection from dreaded illnesses such as rabies. It is our objective to provide this protection by maintaining high standards. The best measure of performance is the reduction of illness and disease associated with poor environmental conditions. Due to the high degree of success of past environmental programs, staff members are constantly reminded not to become complacent which would detract from past accomplishments.

Division of Inspection Services

The Division of Inspection Services is responsible for maintaining adequate levels of food, milk and general sanitation for Mobile County. This responsibility is fulfilled by periodic inspections of food service establishments, milk production facilities, dairy farms, hotel/motels, detention facilities, schools, day care centers, and swimming pools. In addition to these routine activities, this division is responsible for inspection of septic tank and plumbing installations in Mobile County. Table XII depicts a summary of activities for the past two years.

In September 1983, the division played an active role in the recall of suspected contaminated ground beef from the public and parochial schools in Mobile County. The week-long search in 96 schools identified 118 cases of suspect ground beef. The Food and Drug Administration was also assisted in other nationwide food recalls throughout the year.

TABLE XII
Environmental Services
1982-1983

	1982	1983
Food and milk sanitation services provided:		
Food establishment inspections	12,800	10,080
School cafeteria inspections	1,497	1,007
Milk & frozen dessert samples collected	2,507	1,753
Milk plant inspections	89	32
Producer dairy inspections	196	128
Foodhandler classes conducted	144	119
Facility sanitation services provided:		
Hotel and motel inspections	115	191
Detention facility inspections	80	81
Swimming pool inspections	79	181
Public health nuisance investigations	1,605	959
Plumbing and sewage inspection services provided:		
Plumbing permits issued	737	997
Plumbing inspections	1,355	2,583
Septic tank permits issued	740	1,013
Septic tank inspections	664	1,044

The division continued its practice of providing education and training through courses for food establishment and day care center employees and operators. The Food Manager Certification Program was co-sponsored with the Alabama Department of Public Health to provide additional training for food service managers.

The plumbing regulations for Mobile County were updated during 1983. The adopted regulations were patterned after the Southern Standard Plumbing Code. With these revisions, uniformity was achieved between the City of Mobile's plumbing code and the regulations enforced elsewhere in Mobile County.

Division personnel assisted the Alabama Department of Public Health in the development of revised food and milk regulations. The new regulations will go into effect in 1984.

With the improvement in the national and local economy, and more favorable interest rates, new housing in Mobile County showed a

considerable increase in 1983. Subdivision applications received totalled 85 which contained 1,164 lots. This compared with 47 applications in 1982 for 326 lots. Individual lots needing review for onsite sewage disposal systems totalled 940 requiring 1,523 site visits as compared to 530 applications and 1127 inspections in 1982. Preconstructed housing, including mobile homes, continued to gain in popularity. This type of housing presents unique challenges to the Health Department as a result of the minimal amount of time for construction and installation.

To coincide with the Governor's statewide proclamation of October 2-8, 1983, as Environmental Health Week, the City of Mobile likewise issued a proclamation upon request. Several presentations were made to civic organizations during the week increasing environmental health awareness in the area.

The Alabama Environmental Health Association (AEHA) recognized a Mobile County Health Department environmentalist of 20 years as the "Sanitarian of the Year" for 1983 at their annual convention in March.

Division of Vector Control

Comprehensive control programs for both mosquitoes and rodents are provided to the residents of Mobile County through the activities of the Division of Vector Control.

Mosquito Control activities to reduce the physical annoyance and minimize related health problems were conducted with data collected from a surveillance system which monitors immature and adult mosquito populations. A network of 14 light traps was established in early spring and was operated semi-weekly to collect information on adult mosquito populations. Surveillance of *Aedes aegypti* populations in cooperation with the Centers for Disease Control continued in Mobile's historic district as in previous years and was expanded during 1983 to include several suburban neighborhoods. Collection of larvae and adult mosquitoes during the year resulted in the identification of six additional species. This brings the total number of mosquito species identified in the county to 38.

The arboviral surveillance program initiated in the Fall of 1982 was expanded during the year through diagnostic services provided by the Alabama Department of Public Health and the Veterinary Diagnostic Laboratory at Auburn University. Feeding stations established at 12 locations in the county netted 563 birds with blood samples collected and birds released unharmed. Laboratory analyses of blood samples obtained from the birds indicated that 28 were positive for either Eastern Equine Encephalitis or St. Louis Encephalitis. The value of information collected through this program proved useful in directing control activities throughout the county. Plans were finalized to establish a diagnostic laboratory within the division in 1984 to perform the necessary blood analyses in-house.

Control of immature mosquitoes in the larval stages remained important in reducing adult mosquito populations throughout the county. A greater emphasis was placed on the evaluation and utilization of biological control methods for mosquito larvae in lieu of the petroleum products used in pervious years. These biological control methods were often found to be equally effective and more compatible with the aquatic environment. Distribution of mosquito fish to the public for control of larvae in ornamental pools and ponds also proved effective in the urban areas of the county. Application of general use herbicides was evaluated as a means of increasing the effectiveness of the various larviciding material. Vector Control personnel drove 59,423 miles in completing necessary inspection and application procedures.

The aerosol application of insecticides for control of adult mosquitoes was expanded during the year to include all incorporated areas of the county. Equipment previously loaned to municipalities was recalled so as to permit its use county-wide. Modernization of existing spray equipment coupled with additional vehicles used in this activity allowed the Division to increase its scope of operations. These vehicles drove a total of 79,182 miles while applying 5,273 gallons of insecticide. Aerial application of insecticides as a means of controlling adult mosquitoes in areas inaccessible by ground vehicles was also undertaken in the Health Department's airplane; 29 flights over Federal Avaiation Administration approved routes allowed the application of 426 gallons of insecticides. Evaluation of new insecticides during the year resulted in two additional formulations being approved by the Alabama Board of Agriculture and Industries for aerial and ground application. Integration of these insecticides into the adulticiding program should provide increased control at lower application costs in the future.

Rodent Control services were continued on a county-wide basis during the year by the investigation of complaints and the completion of premise inspections. Partial funding for these activities was derived from a State Block Grant for Preventive Health Services.

Since effective rodent control is largely dependent upon proper sanitation, complaint procedures were revised to require citizen participation in curtailing rodent activity. Correction of sanitation problems noted during premise inspections was a prerequisite to the placement of rodenticides. A total of 4,053 complaints concerning rodent activity was received during the year which resulted in the

placement of 1,272 pounds of rodenticides.

Areas of the county noted as having extensive problems with rodents were targeted for community surveys which resulted in the inspection of an additional 916 premises. Special emphasis was given to working with the local housing boards and school systems to inform and involve their personnel in rodent control procedures within their respective facilities. Interaction with these agencies included presentations to employees and tenant groups as well as actual inspection of various facilities.

The consolidation of mosquito and rodent control functions into one divisioin required cross-training of staff to better utilize existing manpower. Additional training in the proper use and application of pesticides during the year resulted in the certification of several employees by the State of Alabama Department of Agriculture and Industries.

Ongoing acitivities to increase public awareness of vector control programs included contacts with 22 local schools and civic organizations. These presentations included the use of the three-panel rodent and mosquito control display units and the mosquito study kits. The display units were also utilized in conjunction with local health fairs sponsored by the Gulf Coast Health Fair.

Division of Veterinary Public Health

The control of zoonoses, including rabies, in Mobile County was the concern of the Division of Veterinary Public Health. To assist in this control, human diploid cell rabies vaccine was made available for the first time in the Immunization Clinic to veterinarians, veterinary technicians, animal handlers, and animal control officers for pre-exposure vaccination purposes.

Other rabies control activities were as follows for the calendar years 1982 and 1983:

	1982	1983
Bite investigations	156	637
Other investigations	73	79
Enforcement actions taken	45	42
Consultations	163	312

The Mobile Branch Laboratory of the Alabama Department of Public Health detected two cases of rabies in insectivorous bats in 1983.

The Division of Veterinary Public Health established a rabies certificate file of all rabies vaccinations given in Mobile County. This file is used to verify the vaccination status of an animal which has bitten an individual as well as assisting in the identification of lost animals. A total of 44,111 dogs received rabies vaccinations in Mobile County in 1983; of this number 16,611 were administered by the Rabies Inspector and the remainder by practicing veterinarians.

OFFICE OF NURSING SERVICES

Joy Rolison, M.S.N.
Director

The Office of Nursing Services continued in its responsibility of updating the standing orders and preventive health schedules used in each of the clinical programs; revision of medical forms; recruitment of nurses; orientation of staff and nursing students; continuing education activities; auditing medical and dental records; and supervision of the epidemiology program.

A one-day workshop for day care center directors and employees was conducted in July, 1983, with 92 persons in attendance. The purpose of the seminar was to provide day care center workers with information on public health measures concerning communicable diseases, basic sanitation practices for the kitchen and the nursery, environmental safety and foodhandling techniques. A second workshop has been planned for 1984.

An immunization schedule for use by day care centers was developed and implemented providing quarterly immunization status of all children enrolled in licensed day care centers.

OFFICE OF HEALTH EDUCATION AND PUBLIC RELATIONS

Vivian DeVivo, M.Ed.
Director

The Office of Health Education and Public Relations provided publicity, information and resource referral for all bureaus and divisions. A total of 42 news releases appeared in print; conducted 31 radio interviews; and coordinated 36 staff appearances on television.

Professional and lay presentations were conducted for private and public schools, community agencies, colleges and universities, church groups, civic clubs and organizations. Health educators and other professional staff made 164 presentations to the various groups. Pamphlets distributed through the Office totalled 11,895.

Through federal monies earmarked for health promotion, the Family Health Education program continued this year for eighth graders in the Mobile County Public Schools. A total of 23 public schools participated reaching 3,613 students. The five-day program covered a wide range of topics including maturation and hygiene; anatomy and physiology of the reproductive system; pregnancy and childbirth; sexually transmitted diseases; and alcohol and smoking. The same program was made available to adolescent residential programs in the community.

Following the federal initiative of health promotion/disease prevention activities, an infant car seat loaner program was established. In March 1983 the program was established with ten infant restraints which were rented to low-income parents in need of a car seat. Through donations from the Mobile County Medical Auxiliary and other groups, the program was able to increase to 90 infant restraints in December 1983.

The Office has been actively involved in the planning of the 1984 Alabama Hypertension Conference to be held in Mobile. The conference for professional health workers will bring attention to the need of patient/provider communication to promote regimen compliance.

The graphic art section of the Office of Health Education designed and produced all color-coded office identification and directional signs for the newly restored facility. In addition, in-house art and graphic work was done as requested by bureaus and divisions.

The Mobile County Health Department is operated in accordance with Title VI of the Civil Rights Act of 1964 and the Rehabilitation Act of 1973. All facilities and services of this agency are available to all patients without regard to race, creed, color, national origin, age, sex, religion or political affiliation. In addition, no person shall, solely by reason of his/her physical handicap, be denied the benefits of or be subjected to discrimination under any program or activity of this agency.

Report Prepared By:
The Office of Health Education and Public Relations