2002 ANNUAL REPORT

MOBILE COUNTY HEALTH DEPARTMENT
Major General William C. Gorgas Clinic

Our Mission

"The Mission of the Mobile County Health Department is to promote, improve, and protect the health of Mobile County."

Our Vision

"The Vision of the Mobile County Health Department is a healthy community."

Cover Photo - *1979.*

Shown is the first aircraft owned by the Mobile County Health Department. This DeHavilland Beaver was equipped with an ultra-low-volume spray system and was used to combat the increased mosquito activity following Hurricane Frederic. The Beaver logged 6.5 hours of flight time and sprayed 7,168 acres that year.

In contrast, in 2002, Mosquito Control fought saltmarsh mosquitoes, potential carriers of Eastern equine encephalitis and West Nile virus, using a Cessna Skymaster 336 that flew 21 flights treating over 73,497 acres of coastal marshland.

2002
ANNUAL REPORT

MOBILE COUNTY
HEALTH DEPARTMENT
251 N. Bayou Street
Mobile, Alabama 36603

www.mobilecountyhealth.org

Mobile County Health Department

Major General William C. Gorgas Clinic

Bernard H. Eichold II, M.D., Dr. P.H.,
Health Officer

Michael L. Granberry, M.D., Chairman
Philip S. Travis, M.D.
Patrick E. Nolan, M.D.
William B. Harris, M.D., FACS, FSSO
Jack A. DiPalma, M.D.
Thomas C. McGee, M.D.
Freeman E. Jockisch, President, County Commission

I am pleased to present to you the 2002 edition of the Annual Report for the Mobile County Health Department. As in previous years, we have continued to expand and enhance our services to better meet the needs of our patients and the citizens of Mobile County. In this report, each department has provided a summary of the services provided and the impact made not only on individuals but the community as a whole. Public Health is about improving the health and well-being of all whether served directly or indirectly.

The Mobile County Health Department staff has worked diligently through the year to prepare to be surveyed by the Joint Commission on Accreditation of Healthcare Organizations early in 2003. To achieve this gold standard of health care delivery, the Health Department has adopted new Performance Improvement methodology, policy and procedural initiatives, and in-service and continuing education programs agency-wide.

As you read through this annual report you will learn more about our continued delivery of existing healthcare services and community outreach efforts as well as our plans for the future. It is only through the dedication of our professionals and staff here at the Mobile County Health Department that we are able to continue and grow. We hope this report will provide you with a better understanding of the people and programs that make up your public health department.

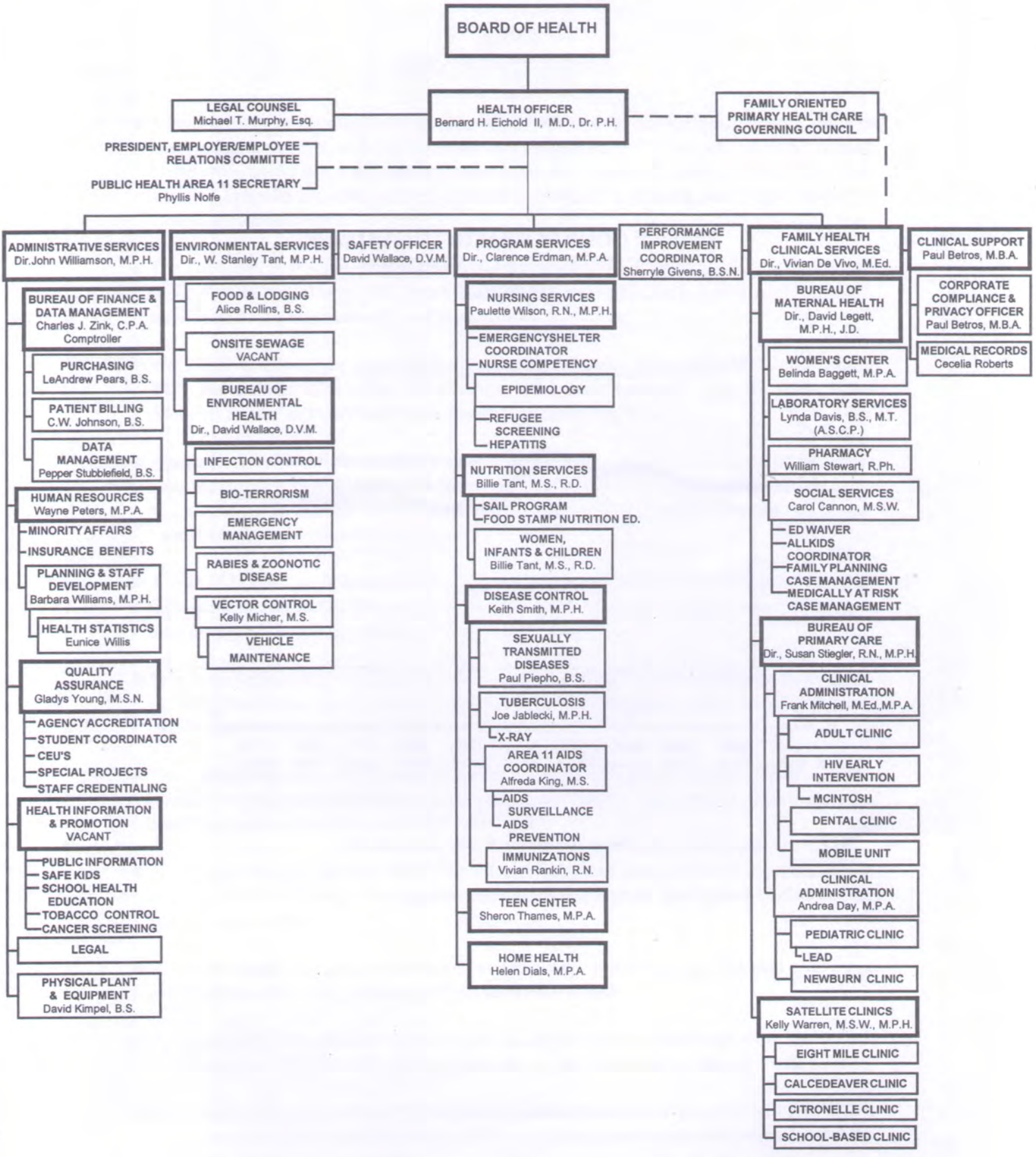
Michael L. Granberry, M.D.
Chairman, Board of Health

Bernard H. Eichold II, M.D., Dr. P.H.
Health Officer

251 N. BAYOU STREET • P.O. BOX 2867 • MOBILE, ALABAMA 36652-2867 • (251) 690-8158 • FAX (251) 432-7443

2002
Mobile County Board of Health

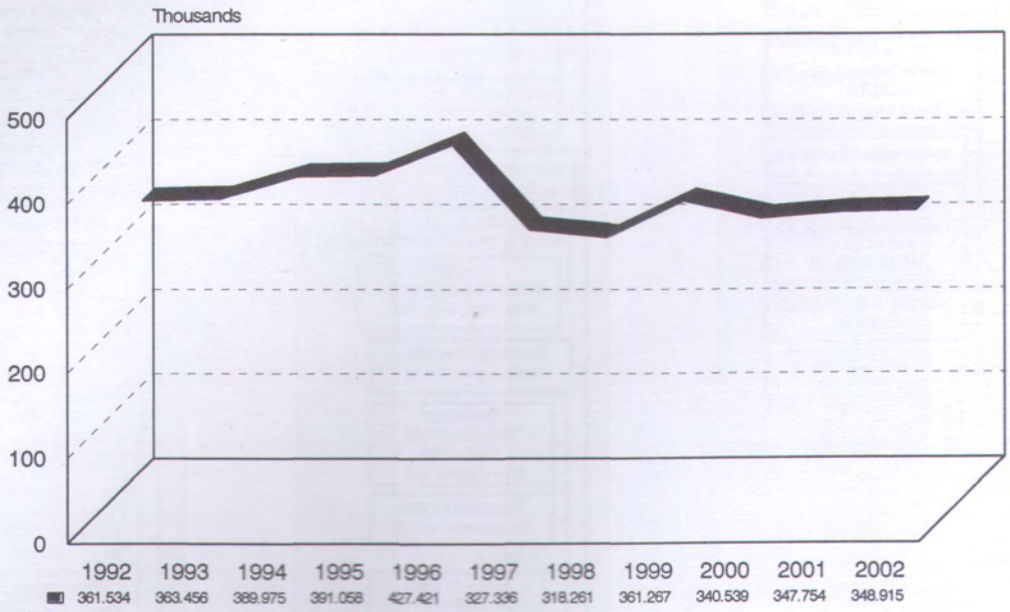
Phillip S. Travis, M.D.	**Chairman**
Mark S. Gottlieb, M.D.	**Member**
Michael L. Granberry, M.D.	**Member**
Jack A. DiPalma, M.D.	**Member**
Patrick E. Nolan, M.D.	**Member**
William B. Harris, M.D., FACS, FSSO	**Member**
Samuel L. Jones, *President,*	**Member**
Mobile County Commission	



Approved:

Bernard H. Eichold II, M.D., Dr. P.H.
Health Officer
October 1, 2002

MOBILE COUNTY HEALTH DEPARTMENT
COMMUNITY CONTACTS*
1992-2002



* Totals exclude school health contacts and fluoride dental treatments.

2002
HIGHLIGHTS

- A comprehensive data base was developed to track all training received by employees in order to maintain high performance competency standards. All employees received training in the seven safety plans and performance improvement plus all health professionals were certified in health provider cardiopulmonary resuscitation. Nursing staff began extensive competency evaluations.

- The Tobacco Control program over saw the implementation of a new "Life Skills Training" curriculum in several target middle schools. Students were educated in health-related tobacco issues and in the mechanics of peer leadership.

- More than 4,000 women were screened for breast and cervical cancer in Mobile County in 2002 representing 17% of the total number of women screened statewide through the Alabama Breast and Cervical Cancer Early Detection Program.

- A shigellosis outbreak that started in 2001 continued through 2002 with a total of 479 cases reported. Epidemiology and Food and Lodging staff worked diligently with area day cares and schools in an attempt to slow the spread of the infection through education on proper handwashing and sanitation techniques.

- A total of 131,592 participants in the Women, Infants and Children (WIC) Program received food instruments during the year at eight sites throughout the County. Participation case load averaged 10,996 per month.

- Four large scale tuberculosis (TB) outbreaks were investigated by the Tuberculosis Program in 2002. More than 3,100 patients were seen in over 250 clinics. There was, however, a 34.5% decrease in confirmed TB cases for the year.

- The Rabies and Zoonotic Disease Program experienced a seven percent decrease in the number of potential rabies exposures investigated with a total of 863. There were no confirmed cases of rabies in the County in 2002.

- From June through October, West Nile virus activity was documented in 28 of the 37 zip codes in Mobile County. Five human cases with one human fatality and twelve equine cases were reported.

- Family planning visits at the Women's Center increased by five percent. This was an average of 70 additional family planning patients seen each month.

- A total of 435 HIV infected persons received direct primary health care from the Health Department in 2002. All HIV related medications were provided at no cost to the patient.

- The Dental Clinic achieved a 77% increase in patient encounters for a total of 11,429. One full-time dentist, one part-time dentist and two full-time dental assistants were added to the staff during the year.

- The Performance Improvement/Leadership Committed was formed in 2002 with the ultimate responsibility to monitor the agency's overall performance using data from multiple sources including satisfaction surveys, health record audits, incident reports and community health concerns.

Administrative Services

Administrative Services was responsible for ensuring the availability of administrative support for all programs and activities offered by the Health Department. The support was provided by the divisions that comprise Administrative Services as outlined in this section of the Annual Report. In addition, Administrative Services was responsible for central mailing and printing, space allocation, updating all policies and procedures, the employee handbook, telephone systems, and special projects.

Bureau of Finance & Data Management

Comptroller

Revenues for the fiscal year ending September 30, 2002, increased 6.9% from the previous fiscal year and expenditures increased 5.4% for the same period. The increase in revenues occurred in clinic revenue and a new federal FUTURES Learning grant. Capital improvement expenditures consisted mainly of the purchase of some adjoining property for future expansion, continued updating of the telephone system, and improvements to the Women's Center facility.

Purchasing and Contracting

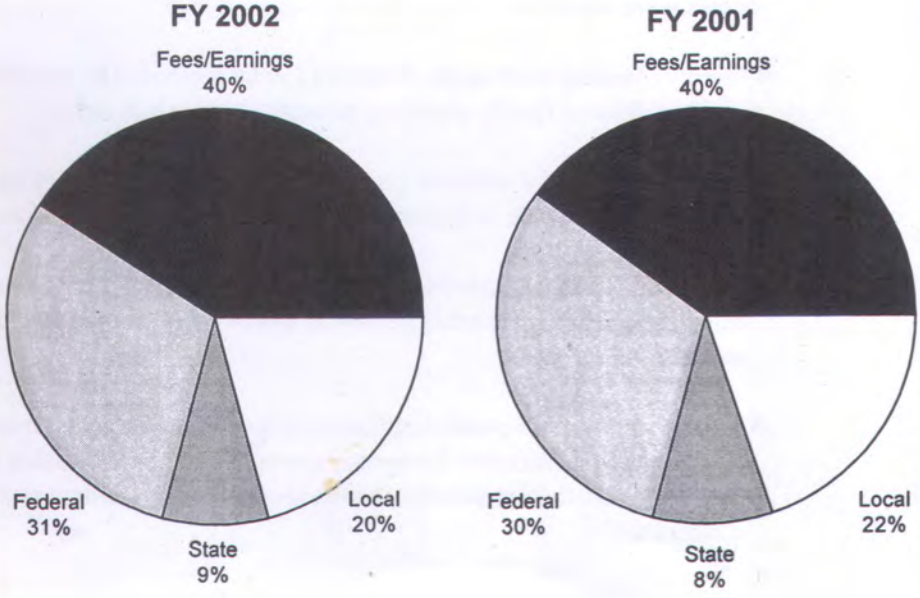
The Purchasing Department operated with a department manager, a buyer, and an office assistant. The department functioned in its role of procuring and issuing supplies and equipment to all areas of the Health Department.

Ten purchases of services and equipment were opened for bid as required by State bid laws. An annual inventory of Mobile County Health Department furniture/equipment and Alabama Department of Public Health property assigned to the Health Department was conducted and all exceptions were corrected.

SOURCES OF REVENUE
FY 2002 AND FY 2001

SOURCE	FY 2002	FY 2001
LOCAL	$ 4,660,202	$ 4,936,216
STATE	2,074,366	1,772,223
FEDERAL	7,359,830	6,691,612
FEES/EARNINGS	9,496,618	8,663,053
TOTALS	23,591,016	22,063,104

SOURCES OF REVENUE
FY 2002 AND FY 2001



STATEMENT OF REVENUES AND EXPENDITURES
FISCAL YEAR ENDING SEPTEMBER 30, 2002 AND SEPTEMBER 30, 2001

		FY 2002		FY 2001	
REVENUES					
Appropriations					
Local Government					
County of Mobile	$	799,6914		$ 757,284	
City of Mobile		738,618		773,273	
Other Municipalities		194,944		137,025	
State of Alabama		636,246		636,246	
Other Appropriations		27,494		24,827	
TOTAL APPROPRIATIONS			$ 2,396,993		$ 2,328,655
Grants					
Eliminating Disparities	$	1,540,909		$ 409,091	
Reaching & Helping Youth		63,338		29,476	
Alabama Safe Kids		13,400		12,000	
Diabetic State Funding		10,936		18,198	
Incarcerated Youth- AIDS Ed.		24,040		19,367	
USA Telemedicine		10,000		20,000	
Food Stamp Nutrition Education		104,386		113,349	
Tobacco Control		59,137		33,017	
Primary Care		1,896,959		1,882,505	
Family Planning		381,453		381,453	
Maternity		460,303		506,303	
Women, Infants & Children(WIC)		1,205,397		1,328,984	
HIV/AIDS		695,752		679,539	
Healthy Start		0		1,103,448	
School-based Clinic		209,118		207,915	
Children's Trust Fund		110,513		70,785	
Healthy Families		0		50,000	
Cancer Screening		54,823		45,510	
Fetal Infant Mortality Review		17,527		23,371	
Unwed Pregnancy Prevention		56,550		59,741	
Even Start		20,602		29,025	
FUTURES Grant		844,951		0	
Boys & Girls Club		35,443		0	
Tobacco Control		59,137		0	
Tobacco-Free		30,000		0	
TOTAL GRANTS			$ 7,904,694		$ 7,023,077
Other					
Ad Valorem Taxes	$	2,617,614		$ 2,651,695	
Oil & Gas Severance Tax		305,785		553,631	
DHR Homemaker		50,478		60,949	
Medicaid/Medicare		6,329,510		6,011,103	
Reimbursement (Fed., State, Other)		815,304		779,685	
Clinic Fees (Private Pay, Other Ins.)		1,678,449		1,001,324	
Local Fees, Permits, Misc.		1,062,521		1,135,834	
Refunds and Interest		266,162		307,141	
Sale of Fixed Assets		11,785		5,316	
Rent		148,171		141,396	
Donations		3,550		63,308	
TOTAL OTHER			$ 13,289,329		$ 12,711,382
TOTAL REVENUES			$ 23,591,016		$ 22,063,114
EXPENDITURES					
Personnel Costs	$	15,491,177		$ 14,390,410	
Contract Services		2,826,462		2,725,654	
Travel		209,571		182,598	
Equipment		407,655		478,716	
Supplies and Other		3,387,883		3,333,345	
Land and Buildings		454,075		508,886	
TOTAL EXPENDITURES			$ 22,776,823		$ 21,619,609

Patient Billing

The Patient Billing department functioned with seven full-time employees. The department's primary function was to bill claims and collect revenue for the medical clinics. The billing operations were accomplished by submitting electronic and hard-copy claims to Medicaid, Medicare, and a variety of private insurers. Approximately 83,000 claims were filed during 2002.

Data Management

Data Management expanded and upgraded Health Department computer systems during 2002 with the main focus on expansion of the Local Area and Wide Area Networks and client services such as LAN connections, E-mail, and internet and intranet availability.

New software was implemented at the Women's Center for handling and tracking patient encounters. The appointment system was modified and improved to provide faster and more accurate appointment scheduling and the pharmacy's software was upgraded to the latest PDX version.

The Data Management staff provided hardware, software, data entry, and communications support for all the Health Department's computer users.

Human Resources

The calendar year ended with a total of 438 employees, an 8% increase in personnel from the previous year. The annual payroll, including fringe benefits, was $15,214,814, an increase of 5.5% from the previous year. There were 69 new employees who began working during the year. During the year, 22 employees were promoted to a higher classification and 37 received an increase due to salary range revisions. Additionally, there were 31 resignations, 3 terminations, 1 voluntary demotion and 8 employees retired.

Again this year, each full-time Merit System employee employed prior to July 1 received a bonus payment in December. Effective in November, the employer's matching contributions were increased from 2% to 3% for those employees participating in the supplimental retirement programs.

A large number of employees were recognized at the annual awards program. Six employees were honored with a Seth Thomas clock for 20 years service and 26 employees received 10-year service pins. Sherry McCrory, Secretary I, was named Employee-of-the-Year for 2002 and received the David Previto Award.

Insurance and Benefits

Insurance and Benefits continued to access the various insurance markets in an effort to provide economical insurance protection and quality employee benefits. In March, 2002, a vision care benefit was added to the agency's insurance program. Additional preventive care services were added at the annual contract renewal date and included: a routine cholesterol test, a routine sigmoidoscopy, a routine hemocult stool check, routine lab tests (CBC, TB, uninalysis), and a Chem 20 test.

Staff Development

This new department provided orientation and training for all new Health Department employees. In 2002, 53 employees participated in a day long orientation covering policies and procedures, safety training, overview and history of programs and services, customer service, information management, performance improvement, infection control and included a tour of the Keeler complex.

A training data base was developed to document and track all training programs, continuing education classes, and inservice training that employees attended. Included in the data base were more than 200 programs in which employees participated. A competency assessment program was also instituted during the year. All employees were assessed on the performance expectations and competencies stated in their job descriptions or contracts.

A training needs assessment was conducted with 137 completed questionnaires returned. Training in stress management was the most frequent need identified, followed by computer classes and emergency preparedness.

Employees were required to attend several in-service continuing education programs. Each employee participated in training on the agency's seven safety plans and performance improvement. All health professionals (physicians, nurses, LPNs, nurse practitioners, laboratory technicians, home health aides, and physical therapists) were required to be certified in health provider cardiopulmonary resuscitation (CPR). A trainer was brought on staff to conduct CPR classes to ensure all professionals were certified.

All employees attended a customer service training program called HUGS (Help you, Greeting, and Smile). The HUGS campaign included a video tape presentation, pins, and posters to remind employees to always be courteous, respectful, and helpful to our customers. In conjunction with the HUGS campaign, the health department joined with the Mobile Public Library to evaluate our customer service. Five "secret shoppers" from the Library made visits and telephone calls to health department clinics to rate the service received in exchange for similar calls and visits from health department staff.

Health Statistics

Health Statitistics was responsible for the collection of death records in Mobile County; the issuance of certified copies of birth, death, marriage and divorce documents for the State of Alabama; the collection of miscellaneous fees for clinical and pharmacy services; and the compilation of a monthly vital events report.

Heart disease continued to be the number one cause of death in Mobile County, followed by cancer, stroke, accidents, and chronic obstructive pulmonary disease and allied conditions.

The issuance of certified copies of vital records for 2002 totaled 24,072 births, 24,418 deaths (3,900 of those deaths were processed through the Department of Health Statistics), 398 marriages and 125 divorces. A total of 49,013 certified copies were issued for 2002.

Quality Assurance

The Quality Assurance program activities monitored and evaluated the quality and appropriateness of patient care by periodic chart review audits of the clinical programs.

Self analysis audits were performed monthly by each program director/designee and appropriate medical staff. This involved the selection of 10 to 12 records by the Quality Assurance staff based on the six lifecycles, where applicable. The aggregate data for tracking and trending was presented to the directors and to the Performance Improvement and Leadership Committee. The chart audit process involved the auditing of three charts monthly by the provider. The compiled data was forwarded to the Health Officer or designee for plans of correction.

Health Information and Promotion

The Office of Health Information and Promotion provided the information connection between agency services and consumers. The department managed health education programs and provided support for services related to preventive health care.

The Health Information and Promotion (HIP) staff included a public information officer, a health administrator, a SAFE Kids coordinator, tobacco prevention and control coordinator, breast and cervical cancer early detection program coordinator, health educators, a graphic arts specialist, clerical and program support personnel. The HIP administrator also provided oversight for the mailroom and duplication services at the agency.

More than 160 news releases were disseminated to media outlets on a variety of public health issues; assisted with media campaigns for various departments; and produced the agency annual report and 5 issues of the employee newsletter, *The Pulse*. Special events promotion and public relations support were also provided to other Health Department programs. The program maintained the agency website, www.mobilecountyhealth.org which provided the public with valuable information concerning their health, news releases and advisories, health checks, restaurant ratings and upcoming events. Local, state and national media responded by requesting more than 180 interviews from the Health Officer, the Public Information Officer and program managers on various public health concerns.

The Health Information staff organized two American Red Cross blood drives with more than 173 participants. As a function of health education and community outreach, the staff represented the agency at many community health fairs, meetings and functions such as Operation 40 Proof, Leadership Mobile Health Services Task Force, Alabama Baby Coalition, Health Partnership Coalition, and the Coalition for a Tobacco Free Mobile County. The HIP staff coordinated guest speakers and provided displays and literature for over 40 health fair events.

Safe Kids

The Mobile County Health Department has served as the local lead agency for the National Safe Kids Campaign since 1995. Mobile Safe Kids Coalition is made up of local agencies, businesses and individuals that share a concern for unintentional injuries of children. A staff member of the lead agency served as the coalition coordinator. The Safe Kids Coalition provided the community with training and education on a variety of safety and injury prevention areas with a strong emphasis on child passenger safety. During National Safe Kids Week (the first week in May) the Coalition spotlighted unintentional injury issues with local and national events.

Tobacco Control

Throughout the year tobacco presentations were conducted to provide awareness and prevention education at several local Mobile County public and private schools, churches, and community businesses reaching hundreds of youth and adults. Tobacco Prevention and Control also attended many community health fairs to distribute literature and resources educating the public about the dangers of tobacco and second-hand smoke, youth initiation and cessation.

Health Information and Promotion was awarded a thirty thousand dollar grant from Alabama Department of Public Health to implement an educational initiative to prevent youth tobacco use in three Mobile County public school seventh grades and two middle schools. Tobacco Control oversaw the implementation of an eighteen week classroom curriculum entitled "Life Skills Training" in five target middle schools and the development of S.W.A.T. (Students Working Against Tobacco) at Murphy High School. These students were trained in health related tobacco issues, anti-tobacco advocacy issues, and in the mechanics of peer leadership. The S.W.A.T. teams offered presentations to all Mobile County Schools.

The Coalition for a Tobacco Free Mobile County met throughout the year providing tobacco awareness programs. The Mobile Area Smoke-Free Dining Guides were revised and distributed throughout the county. A partnership was formed with Mobile Municipal Park, Mobile Bay Bears, Dr. Fisbein (local dentist), Alabama Public Television and the Mobile City Council to sponsor "Tobacco Free Parks"--a campaign to discourage mixing atheletics and sports.

Over 3,000 people attended Tobacco Free Parks campaign events supporting a tobacco free community. Approximately 2,000 educational materials on tobacco prevention and incentives were distributed. Media coverage of the campaign included tobacco free messages displayed on the Bay Bear scoreboard during 29 weekend home games, 4 press releases, 3 letters to the editor, 7 articles in Mobile Press, 7 spots on local news and 2 public service announcements developed by Mobile Municipal Park baseball players.

Cancer Screening

Since 1997, the Alabama Breast and Cervical Cancer Early Detection Program (ABCCEDP) has provided free pelvic exams, pap smears, clinical breast exams, mammograms, and additional screening tests to qualifying women. In 2002, Mobile County screened 4,253 women. This represents 17% of the total number of women screened statewide through ABCCEDP.

Outreach included health fairs and educational programs at schools, churches, businesses and civic groups. Special community breast cancer screenings were offered. An early detection clinic was held at Colonial Bel Air Mall and utilized the services of the mobile unit, *Wellness*

Express, to offer breast screening in an effort to raise public awareness of breast cancer.

Legal

The Legal Department continued to file suits in District Court to secure compliance from owners of failing/illegal septic systems.

The Legal Department worked on a variety of other cases initiated against the Health Department or its employees by third parties. All cases were resolved favorably.

Physical Plant and Equipment

The Physical Plant and Equipment Department was staffed by security, custodial, maintenance and grounds-keeping personnel. Department staff maintained 19 Health Department buildings containing approximately 225,000 sq. ft. with 23 acres of grounds and parking facilities.

Groundskeeping staff completed minor landscaping projects at five sites. Security services were provided buildings, grounds, and parking facilities.

Physical Plant and Equipment refurbished the Citronelle Clinic upgrading emergency power sources to meet vaccine storage quality standards. Additional minor renovations to the Women's Center, Keeler Building and Newburn Building were accomplished.

Environmental Services

Environmental Health Services continued to promote community sanitation standards and enforce applicable public health rules and laws. These initiatives were carried out through the activities of the Onsite Sewage, Food and Lodging, Vector Control, and Zoonotic Disease programs. Public Health's response to the threat of Bioterrorism was expanded under Environmental Services.

Food and Lodging

The Food and Lodging Division of Environmental Health Services conducted business throughout the year with a commitment to maintaining sanitation levels in food service establishments, retail food stores, lodging facilities, and schools.

Weekly foodhandler classes were offered at the Main Health Department site and at three satellite locations in the evenings. Classes were also offered onsite at individual establishments or at central locations for groups of workers for special events reaching more food service workers with broader teaching programs.

A shigella outbreak in several day care centers prompted the formation of a task force to train day care workers in proper sanitation measures to stop the spread of this highly contagious disease. In response to complaints concerning mold, two environmentalists received specialized training in assessing mold problems in public buildings and remediation techniques. During the year, two senior Food and Lodging environmentalists assisted the Alabama Department of Public Health in conducting a survey of local restaurants to assess risk factors for foodborne illness.

The Food and Lodging department began a study of handwashing in restaurants as a Performance Improvement project. The survey of 280 restaurants indicated serious problems existed with food service employee performance. The plan of action to educate all restaurant managers in proper handwashing techniques will continue into 2003.

In cooperation with the Mobile Area Water and Sewer Service (MAWSS), development began on a brochure on the proper disposal of grease in restaurants in an effort to alleviate some of the city's problems with clogged sewer lines. Plans were made for MAWSS to add a short 5-minute loop at the end of the Foodhandler Class video addressing the problem.

The Food and Lodging database was removed from the "mainframe" and installed on a personal computer network utilizing Access software. This brought software capabilities more in line with the Alabama Department of Public Health and allowed for more freedom to generate reports and retrieve data.

To publicize the functions of the department, information on Food and Lodging was disseminated through television, radio and print. The department continued to cooperate with the Mobile Register in publishing restaurant ratings which also appeared on the Mobile County Health Department's web page.

ENVIRONMENTAL SERVICES

FOOD AND LODGING	
Permitted or Permits Pending	2,015
Inspections	9,635
Plan Reviews	79
MILK AND FROZEN DESSERTS	
Milk Plants Permitted	1
Dairies Permitted	5
Inspections	30
Samples	975
Water Samples	11
SANITATION COURSES	
Trainees	16,071
Off Premises Courses	649
SPECIAL EVENTS	
Events	67
Inspections	760
GENERAL SANITATION INSPECTIONS	
Hotels/Motels	85
Schools	194
Detention Centers	25
Child Day Care	398
COMPLAINTS	
Foodborne Illness	88
General	266
WATER SAMPLES	41
TATTOO PARLORS	
Inspections	13

Onsite Sewage

The Onsite Division of Environmental Health Services maintained its dedication to the improvement of environmental health conditions for the citizens of Mobile County. This was achieved through enforcement of the Alabama Department of Public Health Rules pertaining to subdivision and lot development, onsite sewage disposal, plumbing installation, and environmental health complaint investigation.

Extensive time was spent with local engineers to improve the certification process for alternative design septic

systems. Additionally, work was completed to enhance the Onsite facility's working environment according to recommendations from the Mobile County Health Department Safety Committee.

A total of 11,083 inspections were made by the Onsite Division for 2002.

Bureau of Environmental Protection

Infection Control

The Infection Control Department had two major functional areas of operation: clinical infection control and employee health. Under clinical infection control the department evaluated all new clinical equipment including syringes, IV catheters, and scalpels, for safety. Risk and surveillance inspections of all facilities began in July and continued every other month. As part of the employee health component, approximately 90 new employees were screened for TB, Varicella, MMR and Hepatitis B. Current employees were screened as appropriate. Plans were finalized for the vaccination of employee volunteers against smallpox early in 2003.

Emergency Management and Bioterrorism

As part of the Mobile County Weapons of Mass Destruction (WMD) Task Force, the Emergency Management and Bioterrorism programs, along with the Mobile County Emergency Management Association, continued work on the Metropolitan Medical Response System (MMRS) Plan. Completion of the project is expected early in 2003 when sustainment and testing phases of the plan will begin and continue for one to two years.

In addition to MMRS funding received in 2001, the Mobile County Health Department received $400,000 for the development and/or improvement of the public health infrastructure at the local level. A portion of the funds were used to hire critical personnel needed in the event of a terrorist incident. The new personnel were assigned to the Bureau of Environmental Health and worked in conjunction with epidemiology, immunizations, pharmacy and other divisions to improve disease surveillance, recognition, treatment and prevention. A Public Health Disaster Training Specialist was hired to manage a training program in Mobile and surrounding counties as a part of the MMRS Program.

The Emergency Management and Bioterrorism departments began searching in 2002 for an electronic disease surveillance system to tie all local hospitals with the Health Department for the collection of real-time disease data.

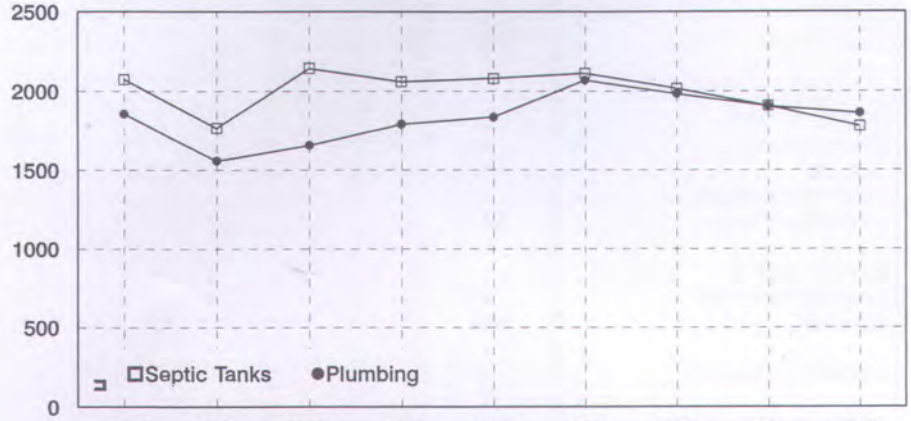
Rabies & Zoonotic Disease

The Mobile County Rabies Control Program was managed by the Mobile County Health Department during 2002. The Public Health Veterinarian for the Health Department served as the Mobile County Rabies Officer. Local veterinarians manned public rabies vaccination clinics during the year. The Health Department's Rabies Office directed the animal bite investigation and quarantine program.

Dog and cat bites remained the most common cause of potential rabies exposures. Bites and scratches from wild animals were managed with the highest priority. Ninety percent of all reported bites were followed to completion. (Completion meaning that the animal was quarantined for the required period, tested for rabies, observed by the Health Department, observed by the victim of the bite, the victim treated for possible exposure to rabies, or a determination made that the victim was not actually exposed.) There was a 7% decrease in the number of rabies exposures investigated with a total of 863 reported incidents for 2002. Twenty-one people were treated for rabies exposure, or 3% of all exposures investigated, requiring treatment at a total cost of nearly $40,000.

There were no confirmed cases of

ONSITE PERMITS



	1994	1995	1996	1997	1998	1999	2000	2001	2002
Septic Tank	2074	1764	2144	2058	2080	2113	2017	1905	1776
Plumbing	1854	1556	1655	1789	1834	2069	1983	1903	1859

ONSITE SERVICES

SUBDIVISIONS	
Approved	67
Subdivision Lot Inspections	2,145
Individual Lot Inspections	1,653
PLUMBING	
Permits Issued	1,859
Inspections	4,568
SEPTIC TANK	
Permits Issued	1,776
Inspections	1,688
System Verifications/Certifications	28
Complaint Investigations	1,029

rabies in Mobile County in 2002. Approximately 55% of the cases in Alabama were in bats, 25% in raccoons, 10% in foxes, and the remaining 10% in cats, skunks, a dog and a bobcat. Ninety percent of all human rabies deaths are from the bat strain of rabies. While the percentage of rabid bats was high in Alabama, the actual number of rabid bats remained stable.

The estimated pet population in Mobile County (dogs and cats) in 2002 was 165,000. 36% of these animals were vaccinated against rabies resulting in a three percent decrease from 2001.

RABIES VACCINATIONS

Vaccinations in Mobile County	60,203
Potential Exposures Investigated	863
Animals Confined	420
Animals Tested	132
Human Treatments	21

Vector Control

Mosquito Control

Comprehensive mosquito and rodent control services were provided to the citizens of Mobile County through the Vector Control Program. Vector Control employees combined surveillance and inspection activities with the judicious use of pesticides and public education to minimize the impact of rodent and insect pests.

Aerosol applications of insecticides for the control of adult mosquitoes were used throughout the year with truck and aircraft mounted equipment applying ultra low volumes of insecticide in areas targeted by surveillance programs. Aerial spray operations were conducted over FAA approved flight routes in areas that were inaccessible to ground vehicles. Malathion, resmethrin, permethrin, and sumithrin which are approved for mosquito control by the Environmental Protection Agency, were the chemicals used in the adulticiding program. Updating the *Bee and Allergy* list and deleting such locations from the assigned spray routes minimized citizen annoyance due to adulticiding.

West Nile virus activity was noted in Mobile County late in June of 2002. From June through October, West Nile virus activity was documented in 28 of the 37 zip codes in Mobile County. Mobile County reported five human cases with one fatality and Twelve horse cases. Because of the threat of West Nile virus and other mosquito-borne diseases additional spray runs were conducted on weeknights, weekends, and weekday mornings and holidays in addition to the regular nightly runs.

Approximately 1,000 known mosquito-breeding sites including ditches, swamps, spoils sites, storm drains, and low areas, etc. were regularly checked and treated. Inspectors also investigated service requests called in by the public and treated additional breeding sites as needed. Duplex, a mixture of an insect growth regulator and a bacterial pathogen, was the primary larviciding agent used.

Mosquito populations in the County were monitored using twenty-five permanent light traps, several portable mini light traps, analysis of citizen complaints, door-to-door surveys, larval dip counts, and mosquito landing rates. Information from the surveillance was used to more efficiently allocate available resources.

Fourteen sentinel chicken flocks of four each were used to monitor mosquito-borne encephalitis activity in the County. Sera-samples were collected weekly and tested for the presence of antibodies to St. Louis encephalitis (SLE), Eastern equine encephalitis (EEE), and West Nile virus (WNV). A positive sera-conversion would indicate virus transmission from mosquitoes. To supplement ongoing disease surveillance activities, adult mosquitoes were collected, identified and pooled. The pooled specimens were tested in-house for the presence of WNV, SLE, EEE, and LaCrosse encephalitis using the vec-test dipstick. Twelve positive sera-conversions for West Nile virus were noted in sentinels from 6 different sites and three positive sera-conversions for Eastern equine encephalitis from one site were recorded. One WNV positive pool of mosquitoes (*Culex quinquefasciatus*, the Southern house mosquito) was identified in the County. This was the first positive pool documented from Mobile County since testing began in 2000.

Vector Control collaborated with the Alabama Department of Public Health, the USDA Wildlife Services, the Auburn Diagnostic Laboratory and the Center for Disease Control and Prevention with the arboviral dead bird surveillance project again in 2002. Dead crows, blue jays, and raptors (species considered most susceptible to West Nile virus) of suitable condition wee collected and submitted for treating from all areas of Mobile County. Over 950 dead bird reports were recorded and 83 submitted for West Nile virus testing with 65 positive results. Once multiple positive reports from individual zip codes were noted, the zip code was closed out. With activity confirmed, birds were no longer submitted from that area.

News releases were issued during the summer and fall to warn of the possibility of WNV transmission and give information on personal protection from mosquito bites and source reduction to limit mosquito

MOSQUITO CONTROL ACTIVITIES

Mosquito Services Requests Investigated/Treated	2,725
Mosquito Species Identified	33
Adult Mosquitoes Identified	10,066
Adult Mosquitoes Tested	2,463
Mosquito Pools Identified +	86
Larval Samples Identified	3,423
Sentinel Sera-samples Tested	786
Positive Samples (titers >40)	
WNV	12
EEE	3
Number WNV+ Birds	65
Total WNV Birds Tested	84
LARVICIDING	
Larviciding Applications	4,865
Miles Driven	93,090
Gallons of Liquid and Diluents	6,715
Pounds of Granular Larvicide	2,001
Number of Briquets	17,394
GROUND ADULTICIDING	
Adulticiding Runs	119
Gal. of Adulticide & Diluents	7,057
Miles Driven	73,371
AERIAL ADULTICIDING	
Number of Flights	21
Gallons of Adulticide	356

RODENT CONTROL ACTIVITIES

Service Requests Received	1,848
Residential Inspections	8,118
Pounds of Rodenticide Used	1,601
Miles Driven	35,226

breeding. The Mobile County Health Department website carried up-to-date West Nile virus information.

Rodent Control

Rodent control services were provided in response to complaints from the public. Inspectors frequently placed rodenticides to aid in the abatement of exterior rodent infestations and instructed residents concerning sanitation measures that they must take to discourage rodent activity. Communities identified as having extensive rodent infestations were inspected on a door-to-door basis. Premises noted as having interior rodent activity were not baited, but residents were informed of possible corrective actions through health education materials. Inspectors worked with Food and Lodging environmental health specialists when rodent infestations were noted in food establishments to assure that rodent related health nuisances were abated.

Door-to-door surveys were conducted during the winter to encourage homeowners to clean up potential rodent food sources and harborage. Pamphlets on rodent control as well as mosquito breeding site abatement were distributed to more than 3,500 addresses and over 700 homes were inspected for potential breeding sites.

Vehicle Maintenance

The vehicle maintenance staff provided routine and specialized maintenance necessary to keep 75 vehicles used in Health Department activities operational. Health Department vehicles were driven nearly 629,260 miles to provide services to Mobile County residents.

Safety Officer

During 2002, a Safety Officer was named to establish a Safety Committee. Plans were developed including Life Safety, Hazardous Materials, Biomedical Equipment, Utilities, Infection Control, Emergency, and Security. The committee, consisting of representatives of each Health Department facility and plan chairpersons, conducted emergency fire drills, trained all employees on all facets of the plans and made safety modifications to all facilities. The Safety Committee will be a permanent function of the agency.

Program Services

The departments under the direction of Program Services provided the essential preventive health and ancillary programs necessary to operate a public health system. Program Services was composed of Nursing Services, Nutrition Services, Disease Control, Home Health and the TEEN Center.

Nursing Services

Nursing Services began age specific competency evaluations for all nurses in 2002. A competency fair initiated the activities with competency evaluations in childhood growth and development, administration of vaccines, venipunctures, TB skin testing, Health Insurance Portability and Accountability Act of 1996 (HIPAA), vision and hearing evaluations, vital signs, safety codes and infection control. In addition, nurses that performed specific tasks were evaluated for competency in the use of equipment specific for their clinical areas.

A new Infection Control manual for the Mobile County Health Department was written in compliance with the Joint Commission for Accreditation of Healthcare Organizations and to improve the quality of care for our patients.

Epidemiology

Under the direction of Nursing Services, the Epidemiology Program reported communicable diseases as required by law and provided education and testing as necessary in the prevention of the spread of communicable diseases in the community. The shigellosis outbreak that started in late 2001 continued through 2002. A total of 478 cases of shigellosis were reported for 2002. The Epidemiology staff worked with 69 day cares and 22 schools in an attempt to prevent the spread of this highly communicable diarrheal infection.

Hepatitis

The Epidemiology Program followed 42 pregnant women who were found to be hepatitis B carriers. Household and sexual contacts were offered free testing and hepatitis B immunizations but priority was given to the newborn infant to make sure that the infant was properly immunized within 12 hours of birth.

During the year, one infant failed to respond to the vaccines and became a carrier of the hepatitis B virus. Infants who are infected with the hepatitis B virus at birth have an 80 - 90% chance of being chronic hepatitis B carriers, thus the extreme importance of the hepatitis B maternity prevention program.

SELECTED COMMUNICABLE DISEASES REPORTED
1997-2002

DISEASES	1997	1998	1999	2000	2001	2002
AIDS	25	30	85	76	76	66
Campylobacter	44	31	19	21	29	39
Encephalitis (Primary)	5	0	0	0	1	8
Giardiasis	78	65	44	33	33	20
Gonorrhea	1,467	1,609	1,515	1,542	1,225	983
H. Influenzae, invasive disease	2	6	4	0	3	4
Hepatitis						
A	45	6	11	14	3	0
B	15	10	17	11	16	16
Non A/Non B	3	1	0	1	2	3
HIV Infections	89	77	65	82	96	76
Lead Poisoning	85	66	51	96	58	58
Legionellosis	0	0	1	0	0	0
Lyme	2	12	7	2	7	6
Malaria	1	1	0	2	0	0
Measles						
Rubella	0	0	0	0	0	0
Rubeola	0	0	0	0	0	0
Meningitis						
Meningococcal	5	12	7	7	2	2
Other	37	61	1	1	0	0
Salmonella	60	101	98	104	102	109
Shigella	31	248	20	7	17	478
Syphilis	81	45	13	14	12	4
Tetanus	0	0	0	0	0	0
Tuberculosis	35	38	32	26	29	19
Vibriosis	5	2	4	4	9	4
Whooping Cough (Pertussis)	3	4	0	1	4	1

Refugee Screening

The Refugee Program screened 38 persons who were from Vietnam, Bosnia, Cuba, Iraq and several African countries. These persons were offered preventive health care including immunizations, primary care services, dental care and eye exams. With the strengthening of antiterrorism immigration laws, the number of new arrivals continued to be low for 2002.

Nutrition Services

The Office of Nutrition Services provided nutrition assessments, counseling, and education to patients enrolled in the Women's Clinic, the Adult and Pediatric Clinics, and the Citronelle and the Calcedeaver Clinics. With the renewal of the Alabama Cooperative Extension Services grant, the nutritionists and dietitians were able to provide nutrition education to food stamp recipients and eligible individuals. This Office was staffed by the director, one full-time and three part-time dietitians, and a secretary.

In addition to the clients served through the Health Department clinics, the nutritionists provided nutritional assessments and counseling to the patients of the Franklin Memorial Primary Health Center and to referrals from Medicaid providers. A total of 751 patients received individualized dietary counseling. These sessions included diabetic instructions, hypertensive care plans, weight management, and HIV nutrition assessments and follow-up. Nutritional supplements, as ordered by the physicians, were given to the HIV patients.

Dietitians with the Food Stamp Education Program worked in partnership with the Community Action-Head Start and Summer Program of Boys and Girls Clubs of Greater Mobile and conducted nutritional community outreach in areas of increased food stamp participation. Nutritional programs utilized were: "Healthy Snacking" and "10 Tips for Teens."

Special classes were offered to diabetic patients at the Keeler Building, the Citronelle Clinic, and the Franklin Memorial Clinics as well as monthly classes for the Senior Activities for Independent Living (SAIL) sites. These classes were made available to other groups upon request and versions of the classes were adapted for middle and high school teens. In addition to these scheduled classes, the Office of Nutrition Services reached 4,668 individuals through health fairs and presentations for agencies and conferences.

During National Nutrition Month, a display for the employees was provided. Low-fat recipes and pamphlets on making healthy selections were available. Two dietitians working with a project sponsored by the Mobile District Dietetic Association, participated in a National Nutrition Month Poster Contest for 4th Grade students in Mobile County. In September, the staff participated in the 5-A-Day Campaign and offered pamphlets to the employees on how to include five daily servings of fruits and vegetables in their lifestyle.

The Director of Nutrition Services served as a clinical instructor for the dietetic internship for the University of Alabama at Birmingham. Four interns were assigned to the Mobile program to complete a six-week, hands-on experience in Nutrition Services.

Sail Program

Participants in the Senior Activities for Independent Living Program (SAIL) received monthly hypertension screening and education at 26 sites in Mobile, Baldwin, and Escambia Counties during the year. The grant was renewed by the Alabama Regional Planning Commission for the Aging and one new site was added in Tillman's Corner. Approximately 620 attendees were served each month with a total of 7,440 patient contacts for the year.

Women, Infants, & Children (WIC) Program

The Women, Infants, and Children (WIC) Program, under the direction of Nutrition Services, established certification

SPECIAL NUTRITION CLASSES

Type of Class	Number of Participants
Community Classes	315
Diabetic	131
Head Start	2,539
Health Fairs	4,668
Healthy Lifestyle	93
SAIL	4,035
Schools	2,219
TOTAL	14,000

WIC VOUCHER DOLLARS SPENT IN MOBILE COUNTY

Category	Amount	Cost for Patient per month
WOMEN	$ 1,577,760	$ 48.48
INFANTS	5,258,761	128.10
CHILDREN	2,580,822	44.50
TOTAL	$ 9,417,343	

WIC PARTICIPANT CASELOAD

Category	Monthly Average	Annual Visits	Percentage
WOMEN	2,712	32,544	24.7%
INFANTS	3,421	41,054	31.2%
CHILDREN	4,833	57,994	44.1%
TOTAL	10,966	131,592	100%

and issued food instruments at the main Health Department and other sites throughout the County including Bayou La Batre, Mt. Vernon, Citronelle, Eight Mile, the Franklin Clinic, the Women's Center, and an outstation clinic at the University of South Alabama Women and Children's Hospital. Over 1,150 infants were enrolled through the outstation clinic. Saturday morning clinics were held at the main facility downtown to accommodate working mothers.

A total of 131,592 participants received food instruments during the year. The participation case load was composed of three categories: women (pregnant, breast-feeding or postpartum), infants (birth to one year), and children (one to five years). Participation case load averaged 10,966 per month out of an enrollment of 13,017.

WIC participants were provided nutritional education, certification and recertification for the WIC Program. They were also scheduled for follow-up nutrition education sessions according to their needs. The nutritionists/nurses provided an average of 3,360 nutrition encounters monthly.

Breastfeeding education remained a major focus of the WIC Program. In addition to individual breastfeeding counseling, two weekly classes on breastfeeding were made available monthly to prospective breastfeeding mothers. The program had an inventory of 30 electronic breast pumps that were loaned to breastfeeding mothers. Manual pumps and shields were also supplied.

The WIC staff responsible for certifying participants included one licensed registered dietitian, one licensed nutritionist, two nutrition associates, one part-time certified lactation consultant, four licensed practical nurses, three full-time registered nurses and two part-time registered nurses. The WIC Program also employed two laboratory technicians and seventeen clerical staff.

SEXUALLY TRANSMITTED DISEASES
1996-2002

YEAR	Primary & Secondary Syphilis	Early Latent	Gonorrhea	PPNG* & TRNG**	Chlamydia
1996	41	35	1,978	18	1,025
1997	29	52	1,668	1	1,059
1998	22	23	1,608	1	1,836
1999	5	8	1,568	0	1,060
2000	11	3	1,541	0	1,347
2001	4	7	1,672	0	1,825
2002	2	2	983	0	1,359

*Penicillinase-producing Neisseria gonorrheae
**Tetracycline-resistant Neisseria gonorrheae

AIDS CASES

Number of AIDS Cases		Deceased	Percent	No. HIV Positive
1995	98	9		96
1996	70	77		81
1997	88	41		75
1998	89	40		77
1999	85	9		69
2000	76	17		63
2001	76	24		86
2002	65	21		74
Total	647	238	36.7%	621

HIV ANTIBODY TESTING

CLINIC	NO. TESTED	NO. POSITIVE
TB	178	0
Women's Center	3,569	5
STD	4,637	32
TOTAL	8,384	37

Disease Control

Sexually Transmitted Diseases

The Sexually Transmitted Disease (STD) Clinic recorded 9,612 patient visits during the calendar year 2002 representing an increase of 767 visits over 2001. Overall reported cases of both early syphilis and gonorrhea declined significantly.

AIDS Surveillance and Prevention

AIDS Intervention received funding for the sixth consecutive year ensuring the continuation of a peer-led HIV risk reduction program for incarcerated, at-risk teens at the J.T. Strickland Youth Center. This program was developed and implemented to offer confined juveniles an ongoing comprehensive and credible program of interactive HIV prevention education to include skills building, HIV testing, counseling, reference materials and prevention resources.

Through a partnership with drug treatment centers of Mobile County, homeless and substance abuse clients were offered HIV education and testing and syphilis and tuberculosis screening. Participating agencies included the Salvation Army, Dauphin Way Lodge, Wings of Life, The Shoulder, Mission of Hope and Emma's Harvest Home.

Other community intervention activities conducted by this department included HIV/AIDS education at health fairs, elementary and secondary schools, and various community organizations. Over 4,200 people were reached by these activities.

Each year at the World AIDS Day Banquet, awards are given recognizing the outstanding contributions of area organizations and individuals. This year's recipient of the Michael O. Hunt Award was Marietta Andry, retired Mobile County Health Department public health nurse. Local World AIDS Day events were a collaborative effort by the Mobile County Health Department, Mobile AIDS Coalition and other organizations to educate the community on HIV/AIDS.

Tuberculosis

There was a 34.5% decrease in confirmed Tuberculosis (TB) cases in 2002. This is the lowest number of verified cases for a year ever. However, Mobile also reported it's first death due to tuberculosis since 1996. Twenty-two cases remained in the open case register as of December 31, 2002.

The Directly Observed Therapy (DOT) program enrolled 384 new patients for therapy. Six HIV seropositive individuals were classified as reactors, exactly the same number as the previous year.

There were 255 TB clinics conducted with 3,106 patients being seen. This represents a 220% increase over 2001. There were four large scale TB outbreak investigations conducted in the community Of the 1,713 exposed individuals screened for TB infection, 262 tested positive.

NEW TUBERCULOSIS CASES AND DEATHS
1992-2002

YEAR	NEW CASES	CASE RATE*	DEATHS
1992	41	10.8	1
1993	50	13.0	0
1994	51	13.2	1
1995	42	10.9	1
1996	40	10.4	1
1997	35	9.1	0
1998	38	9.8	0
1999	32	9.0	0
2000	26	7.1	0
2001	29	8.0	0
2002	19	5.4	1

*Per 100,000 population

Immunizations

The Immunization program provided over 42,500 immunizations in 2002. The number of vaccines given declined this year because free vaccines provided by the Vaccines for Children Program were available through public and private clinics.

Additional immunization services were provided to county residents including monthly clinics offered for patients located in rural areas. To accommodate those patients who were unable to take advantage of services during regular hours, an extended hour clinic was offered from 4:00 p.m. until 6:00 p.m. Saturday clinics continued as a convenience for working parents who required blue cards to register their children for school.

Community flu shot clinics were held at 71 sites throughout Mobile County as well as Health Department clinic locations. As a new initiative to promote greater public access to influenza vaccine, a drive-through flu clinic was offered at Hank Aaron Stadium. Over 500 immunizations were administered at this site during the half-day clinic.

The Immunization program continued monitoring schools and day care centers for up-to-date immunization records. Records were checked at approximately 34 schools and 45 day care centers.

IMMUNIZATION PROGRAM
PEDIATRIC AND ADULT VACCINES ADMINISTERED
2002 & 2000

VACCINE	AMOUNT			
	2002		2001	
	PED	ADULT	PED	ADULT
Diphtheria/Tetanus/Pertussis (DTP)	8			
Diphtheria/Tetanus/Pertussis - Heamophilus b Conjugate (DTP/Hib)	15		78	
Diphtheria/Tetanus/acellular Pertussis (DTaP)	5,357	1	5,324	
Diphtheria/Tetanus/acellular Pertussis - Heamophilus b Conjugate (DTaP/Hib)	141		348	
Diphtheria/Tetanus (DT)	19	2	78	
Haemophilus b Conjugate (Hibor HbOC)	3,149	6	3,237	
Encephalitis		6		8
Hepatitis A - Ped.	121		138	
Hepatitis A - Adult		490		706
Hepatitis B - Ped.	5,681		7,681	
Hepatitis B - Adult	2	719		871
Hepatitis A B Combo		248		
Hepatitis-B/Haemophilus b Conjugate (HepB-Hib)	127	2	64	
Immune Serum Globulin (ISG A)	8	16	15	56
Influenza	608	7,155	299	6,136
Lyme		1		7
Measles, Mumps, Rubella (MMR)	3,320	477	3,557	386
Meningococcal Polycaccharide	26	216	18	152
Prevnar (PCV)	1,730		5,091	
Pneumococcal Polysaccharide	2	307	7	299
Polio Vaccine,Injectable (IPV))	5,034	251	5,399	195
Rabies	2	10	1	16
Tetanus/Diphtheria (Td)	2,592	1,122	1,235	840
Typhoid, Injectable	49	393	55	436
Varicella	2,742	178	2,967	89
Yellow Fever	28	199	11	248
SUBTOTAL	30,759	11,801	35,539	10,445
TOTAL	42,560		45,984	

TEEN Center

In 2002, the TEEN (Teens Empowered through Education and Nurturing) Center expanded its services to help teenagers in Mobile County. The Healthy Start project continued to connect many social service, educational and juvenile justice agencies in an effort to provide more comprehensive and accessible services to the youth in our community. The project's goal was to help eliminate racial disparities in perinatal care as well as to reduce the incidence of child abuse and neglect and infant mortality.

The Center's services included: case management, educational and career assistance, mentoring, home visitation for pregnant and parenting teens, counseling, wellness outreach, child development, youth development, and individual and group counseling. Pediatric and adolescent health care (pediatrics, family planning and immunizations) was provided at Newburn Medical Clinic located within the TEEN Center.

During 2002, TEEN Center Case Management completed 391 intake referrals from the Women's Center, public schools, DHR, churches, parents, friends, self-referrals, and collaborating agencies. The Family Support Program experienced tremendous growth as it actively expanded its parenting education program to families throughout Mobile County. Components of the education program were individual sessions, workshops, group sessions and teen forums. The program's year-end goal was to provide support services and parenting education to 300 teens and their babies. Family Support Workers surpassed this goal with 2,039 educational parenting sessions to 353 teens. Clients were engaged in over 66 group meetings with topics such as domestic violence, smoking cessation, childbirth, nutrition and fitness, HIV/AIDS, STDs, substance abuse, and child safety. Also offered were a number of activities through the Counseling Program targeting maternal depression and hopelessness.

Wellness Outreach collaborated with the University of South Alabama, Franklin Memorial Health Center, Mobile County School Board, and Mostellar Clinic to create and distribute educational literature for teenage females. Beginning in July, over 2,774 brochures, flyers and booklets were distributed to collaborating health agencies, churches, schools and other community agencies. The demand for health education in the pubic school system was high. The Career Center, which provided educational assessment and enhancement, tutoring, and an after school program, had 4,842 student contacts with an increase in elementary and middle school student participation. The Youth Development Program provided life skills and academic preparation for students waiting to enter the GED component of the program. Community service activities were added to encourage students to give back to the community.

Alabama Baby Coalition's (Fetal and Infant Mortality Review Task Force) goal for 2002 was to increase public awareness of fetal and infant mortality. During the year, media coverage was accomplished through proclamations from the mayor and city council and two television spots. Technical assistance was provided statewide to other coalitions who wanted to implement fetal and infant mortality programs. CLEAN START, a partnership with Alabama Baby Coalition, screened over 1,263 women for substance abuse which resulted in a new implementation plan for targeting substance abusing pregnant teens.

The FUTURES Program, a Department of Education, 21st Century Community Learning Center after-school program, provided academic and enrichment opportunities for students at Florence Howard and Leinkauf Elementary and Calloway-Smith Middle schools. According to teacher survey information, 72% of all FUTURES students improved in turning in homework on time, and 73% improved in getting along with other students. The TEEN Center STOP (Staying Thoughtful of Prevention) Program served over 100 participants in the Mt. Vernon area. Participants received academic tutoring and life skills in the after-school program and life skills and recreation during the summer session.

Home Health

Mobile Home Health Services staff provided over 13,000 home health visits to approximately 114 unduplicated Mobile and Baldwin County patients during calendar year 2002. Health care was provided through the services of skilled nurses; certified home health aides; medical social workers; nutritionists; and physical, speech, and occupational therapists.

Another service provided by this department was the Options Program. This program provided personal care and homemaker services to Medicaid recipients as referred from the Department of Human Resources as well as individuals or families on a private pay basis. A total of 4 individuals were provided approximately 385 visits.

Emphasis was placed on community outreach again this year. Mobile Home Health collaborated with Franklin Memorial Healthcare in a health fair at Boykin Towers Senior Citizens Center regarding women's health. Topics covered included self-esteem and self worth, osteoporosis, high calcium foods, and the importance of regular checkups and breast and cervical exams.

HOME HEALTH SERVICES

PROGRAM	TOTAL PATIENTS (unduplicated)	TOTAL VISITS	SKILLED NURSING	HOME HEALTH AIDE	MEDICAL SOCIAL WORKER	PHYSICAL THERAPISTS	SPEECH THERAPIST	NURSING NO CHARGE VISITS
Medicare	64	2,553	874	1,482	26	99	0	120
Medicaid	106	9,623	982	7,941	23	0	0	677
Indigent Care	20	297	37	241	1	0	0	18
Private Insurance	3	155	18	91	0	27	0	19
Options	5	385	3	378	1	0	0	3
TOTAL	198	13,013	1,914	10,133	51	126	0	837

Family Health Clinical Services

Supported by federal, state and local sources of funding, Family Health Clinical Services was able to provide medical, dental, and support services to county residents.

Primary health services were offered at seven sites located in medically underserved areas in Mobile County.

Also under the auspices of Family Health Clinical Services were the Corporate Compliance and Provacy Officer and the Performance Improvement Coordinator.

Bureau of Maternal Health

Women's Center

The Women's Center located at 1557 Springhill Avenue, is the agency's primary site for women's health services including maternity, family planning and gynecology. In addition, the Women's Center provided ancillary services including WIC benefits and access to SOBRA Medicaid Out-Station workers. One of the most popular services offered by the Women's Center continued to be its weekly evening clinic which provided working women and teenagers after-hour access to maternity and family planning services.

A primary goal of the Center in 2002 was to improve patient access and service satisfaction. Managers employed a Continuous Quality Improvement (CQI) model and assembled process improvement teams to evaluate every aspect of patient access including: staffing ratios, appointment templates, environment of care, marketing, no-show rates, patient satisfaction, and billing practices. The result of these CQI efforts was a comprehensive overhaul of the healthcare delivery model used at the Women's Center which significantly improved patient access to the clinic.

Maternity

The Maternity program continued to pursue its primary goal of improving the pregnancy outcomes of women. All patients received a comprehensive medical and behavioral screening, and those women determined clinically at risk were referred to a weekly high-risk prenatal clinic. Contractual arrangements with the University of South Alabama Department of Obstetrics and Gynecology provided needed perinatologist and resident physician coverage. These services complemented the Women's Center staff of four certified/registered nurse practitioners (CRNP) and one part-time board certified Family Practice physician.

The Women's Center began participation in the statewide Medicaid Maternity Care Program in October, 2002. MOM Care (Maternity Care of Mobile County) was administered locally by the University of South Alabama, the program's prime contractor. The Women's Center provided prenatal care and case management as a MOM Care subcontractor. Women eligible for the program are provided a choice of care options at enrollment with prenatal care tracked and monitored by care coordinators.

The Women's Center, in conjunction with other Mobile area agencies, continued to utilize the Clean Start program. This program screened patients for possible substance abuse and provided appropriate follow-up care. The goal of the program was to reduce mother and child morbidity and mortality associated with perinatal substance abuse. In December, the program narrowed its focus to the teen population, who were screened by Healthy Start evaluators.

Family Planning

The Family Planning program offered pregnancy planning and prevention services to the residents of Mobile County. These services included medical examinations, contraceptives, and reproductive education and counseling. Family planning visits at the Women's Center for calendar year 2002 were up five percent over 2001. When compared to 2001, an average of 70 additional family planning patients were seen each month in 2002.

The centerpiece of the family planning efforts was the Medicaid Plan First program. Plan First is designed to extend family planning and birth control services to an expanded group of women in Alabama who, if pregnant, would qualify for prenatal coverage through Medicaid's SOBRA program. To qualify for the Plan First program, a woman has to be between the ages of 19 and 44 with an income not exceeding 133% of the federal poverty level. The program was limited to birth control services and supplies only.

Another key component of the efforts to reduce unintended pregnancy was the postpartum home visit program. A dedicated group of nurses conducted home visits to Medicaid-eligible mothers following delivery. The emphasis of these visits was family planning counseling and services including the administration of Depo-Provera. Visits were performed within the first week of delivery at which time patients were encouraged to initiate some form of birth control. The primary factor leading to successful expansion of

FAMILY PLANNING

Total number of family planning visits	15,537
Total number of new patients	1,210
Total number of unduplicated patients	9,636

MATERNITY PROGRAM UTILIZATION

Total number of maternity visits	9,636
Total number of unduplicated patients	1,658
Patients with income above poverty level	190
Patients with income below poverty level	1,468

the home visit program was close coordination with other community healthcare providers to increase their awareness of the availability of these services. In 2002, the number of home visits per month averaged 138 visits as compared to 100 visits per month in 2001.

The Newburn Clinic, located at the Mobile TEEN Center, was the delivery site for a new extended hours family planning refill clinic. Through a Special Initiative a Title X grant awarded in 2002, the Women's Center was able to staff a weekly evening clinic for young women. A registered nurse answered questions and provided teens with education and needed birth control supplies.

This extended hours clinic made available eight additional family planning appointments per week for TEEN Center clients and local youth. From the months of August to December 2002, 62 appointments were kept for this special service. By offering these services on-site, complete integration with support service was achieved. At the TEEN Center location youth can connect with Medicaid services, Care Coordination and Family Support services.

Laboratory Services

Laboratory services were provided for patients of the Health Department by the Central Laboratory, Women's Center laboratory, STD laboratory and satellite laboratories. The staff of seven professionals performed more than 100,000 in-house tests consisting of routine hematology and chemistry profiles, as well as urinalysis and blood sugars. They also provided phlebotomy services for tests sent to a reference laboratory and to the Alabama Department of Public Health laboratories.

Pharmacy

The pharmacy supplied prescription medicines to all clinical sites as well as the main facility downtown. Patients were counseled on their prescriptions to ensure they were administered and stored properly.

A total of 59,332 prescriptions were filled in 2002 of which 26,884 were refills.

Social Services

The office of Social Services coordinated social service case management activities throughout the Health Department in order to reduce the barriers and increase access to health care.

The Maternity Care Coordination program provided support and follow-up to 1784 maternity patients at the Women's Center. Patients were assisted in keeping appointments, arranging transportation and any other needs that allowed the patient to focus on good health care during pregnancy.

The Family Planning Care Coordination program assessed 808 "Plan First" patients for risk factors for unintended pregnancy. Over 1,020 patients were assisted in applying for Plan First Medicaid and services were provided to more than 620 patients who were determined to be high risk for an unintended pregnancy. They were assisted in compliance with their chosen birth control method through reminders of appointments, assisting with transportation, and other psychosocial issues that were interfering with their ability to avoid an unplanned pregnancy.

The Medically at Risk Case Management program provided services to 616 patients who were referred by their primary medical physician for missed appointments, immunizations, EPSDT visits and other assistance relating to psychosocial issues. Patients were assessed and monitored to assist them in focusing on their health care and in reducing barriers to their care.

The Teen Family Planning Care Coordination Program is a collaboration between Alabama Department of Public Health and the Alabama Department of Human Resources, to provide intensive case management services to teenagers 18 years and younger to reduce the unintended pregnancy rate and abortion rates among Alabama's youth. The teens were assessed and followed to enhance education and support on appropriate use of chosen birth control methods, and to address any social and psychosocial risk factors that may interfere with their goals. The program served 1,104 teens.

The Elderly and Disabled Waiver Program is a community-based program, which offers assistance to patients who meet nursing home criteria but prefer to remain in the home. The services include case management, personal care, homemaker, skilled and unskilled respite companion services and adult day health services. Through this program 254 patients were served. Social Services maintained a part-time social worker in the Home Health Program to complete home evaluations, assist with medical equipment, and other needs as required. A full-time social worker provided assistance with transportation, referrals for diagnostic tests, and medication for indigent and uninsured patients in the Adult and Pediatric Clinics.

Bureau of Primary Care

Adult Clinic

During 2002, the Adult Clinic achieved a 8% growth in patient visits over the previous year. A total of 13,029 encounters were recorded. The staff treated acute and chronic illnesses among the adult and elderly residents of Mobile County. Most patients presenting for services were uninsured or under-insured. The staff included two full-time internists, one part-time diabetic specialist physician, one full-time family practice nurse practitioner, contract HIV specialist physicians from the University of South Alabama Internal Medicine Division of Infectious Diseases, one part-time volunteer physician, two

part-time nurse practitioners, three registered nurses and three licensed practical nurses as well as clerical support personnel.

HIV Early Intervention Services

The Health Department provided state-of-the-art patient care via a contract with USA Infectious Disease physicians to HIV/AIDS patients in Southwest Alabama. A total of 435 HIV infected persons received direct primary health care through the Adult Clinic in 2002. All HIV related medications were provided at no cost to patients. Additional collaborative support was provided to the program through contracts with Mobile AIDS Support Services, Catholic Social Services and Mobile Mental Health Center.

Dental Clinic

The Dental Clinic achieved a 77% increase in patient encounters in 2002 with a total of 11,429 patient encounters. The growth was attributed to a proactive approach to the appointment system and the use of other proven clinical methods as well as increased dental staff. The clinic provided a full range of dental services on a sliding-scale payment system. The services provided included examinations, radiographs, prophylaxis, fluoride treatments, sealants, fillings, extractions, and referrals to specialists when needed. Dental health education, the key to good oral health, was offered through individual patient oral hygiene instruction.

The clinic staff included two full-time dentists, four part-time dentists, three hygienists, four dental assistants and clerical support staff.

Mobile Unit

The Mobile Unit, *The Wellness Express*, provided mobile healthcare services to rural as well as inner city urban residents with emphasis on women and children. Children's services offered included immunizations, health screenings, lead screenings and referrals to community resources. Services offered to women were medical exams, family planning services, counseling and education, and referrals to community resources.

The mobile unit partnered with other clinical areas such as Immunizations, Cancer Screening, and HIV/AIDS to offer flu and pneumonia shots, HIV/AIDS testing, and mammogram referrals as part of health promotion efforts.

Pediatric Clinic

There were approximately 2,850 Early & Periodic Screening, Diagnosis & Treatment (EPSDT) visits recorded for the downtown Pediatric Clinic during 2002, with services provided for 8,371 pediatric patients. The Pediatric Clinic scheduled a nurse screener to emphasize well-child visits. The clinic had on staff one full-time pediatrician and one part-time family practice physician.

Lead Program

The Childhood Lead Poisoning Prevention Program screened 2,056 children for lead poisoning in 2002. Fifty-eight were identified as having lead poisoning with levels above 10 mcg/dl.

The lead program environmentalist performed 33 inspections on homes associated with children with elevated blood lead levels. Additionally, the environmentalist conducted 29 inspections for the Mobile Housing Board on homes built before 1978.

As part of the Lead and Environmental Coalition, the lead program coordinated with local agencies in lead poisoning prevention educational efforts.

Newburn Clinic

The Newburn Clinic, located in the TEEN Center, provided care to 3,611 patients during the year. Clinic services consisted of gynecology services, pediatric services including acute illness treatment, preventive care, immunizations, and physicals. The clinic staff consisted of one full-time nurse practitioner, a registered nurse and clerical support personnel. The clinic worked closely with the various programs of the TEEN Center supporting its integrated approach to reducing infant mortality.

Saturday Clinic

The Saturday Clinic provided services to approximately 738 patients. The service hours were from 8 a.m. to noon. A full range of services were offered including internal medicine, pediatrics, immunizations, WIC, family planning, dental and lab.

Satellite Clinics

Eight Mile Clinic

The Eight Mile Clinic provided acute and preventive pediatric health services, immunizations, WIC, EPSDT, and family planning services to the Eight Mile and Prichard communities. Services were provided by a full-time pediatrician and a part-time family practice nurse practitioner. The clinic recorded 4,520 patient visits.

Calcedeaver Clinic

Located on the MOWA Indian Reservation, the Calcedeaver Clinic provided comprehensive health care to citizens in North Mobile County. Primary health care services were provided by a full-time physician, a full-time family practice nurse practitioner and complemented by ancillary staff. Services offered were preventive health services, diagnosis and treatment of acute and chronic conditions, family planning services, EPSDT and care coordination. A total of 6,087 clinic visits were recorded.

Citronelle Clinic

The Citronelle Clinic provided medical care for a broad community base in Mobile County. Medical services included pediatric and adult services, family planning, immunizations, EPSDT, WIC and care coordination. A full-time physician, a part-time physician, a full-time family nurse practitioner and ancillary staff provided medical care. The clinic recorded 4,253 patient visits for the year.

School-Based Clinic

The School-based Clinic provided year around acute and preventive health services, EPSDT, health education, case management and mental health services to Mobile County Training School students. A part-time physician and a full-time family practice nurse practitioner and support staff provided medical services. A total of 1,745 medical visits were recorded at the School-based Clinic.

Performance Improvement Coordinator

Performance Improvement is defined as "an ongoing effort to find new and better ways to do things using a systematic approach." The Performance Improvement program was created in 2002 to prepare the Health Department for a Joint Commission

for Accreditation of Healthcare Organizations survey scheduled for early in 2003.

One of the first tasks of the new program was to write a Performance Improvement policy outlining the structure and methodology of performance improvement for the agency. The Performance Improvement/Leadership Committee was formed and began meeting monthly. This committee had the ultimate responsibility to monitor the agency's overall performance using data from multiple sources including satisfaction surveys, health record audits, incident reports and community health concerns. From this data problems and/or opportunities for improvement were identified, then work teams were chartered to improve or resolve them.

All work teams utilized the same methodology or "systematic approach", PDSA or "Plan, Do, Study, Act." Of the ten problems identified, three were assigned to teams in 2002. A Medications Dispensing Team reviewed safety and security issues related to medications dispensing from our facility. A Referral Tracking and Follow-up Team developed a process for logging and tracking abnormal test results and referrals to outside physicians or facilities. A Medical Records Management Team identified problems within the medical records system.

In addition to organization-wide performance improvement initiatives, individual clinics and work sites identified areas with improvement potential and applied the PDSA model to find new and better ways to improve quality performance.

Clinical Support

Corporate Compliance & Privacy Officer

The Corporate Compliance Program spent much of its efforts in 2002 working to develop policies and procedures in Information Management to assist the agency in meeting Joint Commission for Accreditation of Healthcare Organizations standards. Additionally, the program began developing patient privacy policies and procedures required to meet a Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule implementation deadline of Spring 2003.

Medical Records and Registration

All active patient health records for the Adult, Pediatric, HIV, TB and WIC clinics were housed in Medical Records. Inactive patient records from all clinics were stored on microfilm in this department. Patients were registered on-line for the Adult, HIV and WIC clinics and assistance was given with registration of Pediatric and Dental Clinic patients. A representative from Confidential Medical Records Copying Service was housed in Medical Records and assisted, under a confidentiality contract, with the release of patient health records.

The Mobile County Health Department is operated in accordance with Title VI of the Civil Rights 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.

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