

Epidemiology

The communicable disease pattern for Dade County during 1959 has shown little deviation from the preceding year. One epidemic of food poisoning occurred in December. Many food-handling employees were found infected with Salmonella. All cases occurred from a common source within the hotel involved. Seventeen guests were ill. Positive Salmonella isolation was made in five cases where stool specimens were obtained. In all, thirty positive isolations were made in this outbreak of Salmonella infantis, including those made from food-handling employees.

More cases of paralytic poliomyelitis occurred here in 1959 than in 1958. It is of interest to note the age and racial groups where paralytic polio seldom occurred. In Negroes there was only one case over the age of four during the past two years. In both races, only one case occurred in the 15 through 19 year age group. In the over 40 age group there was only one case in the past two years. Of equal interest are the paralytic cases that have occurred in immunized individuals. The following table illustrates the immunization status of each case by age, race and sex:

SALK VACCINE STATUS OF PARALYTIC POLIO CASES								
1958					1959			
AGE GROUP	WHITE		NON-WHITE		WHITE		NON-WHITE	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
0-4	20200	000	00020	000	4022113	(3)03320	0201	0
5-9	(0)3	0	30		(0)313	(3)3		
10-14		00			24	3		
15-19				0				
20-39	0001				3303000	401		
40+					0			

() INDICATES POLIO DEATH. 0 INDICATES NO IMMUNIZATION. 1 INDICATES 1 SALK SHOT, 2 INDICATES 2 SALK SHOTS, ETC. EACH DIGIT REPRESENTS IMMUNIZATION STATUS OF 1 CASE.

Of a total of 28 cases of paralytic polio in 1958 there were only two cases where the patients had received complete Salk vaccine immunization. One death occurred in an unimmunized person. In 1959 this picture was markedly changed. Of a total of 38 paralytic cases there were 15 that had received three or more doses of Salk vaccine. Two of a total of three deaths occurred in persons who had received three doses of Salk vaccine. These figures are difficult to interpret accurately since there is no

precise data that shows the number of unimmunized and the number of immunized individuals in our population. However, the occurrence of paralytic polio in a number of persons who have been completely immunized casts some doubt on the effectiveness of the immunizing material in current use. Perhaps live attenuated polio virus vaccine now under study will offer a better solution to the problem of paralytic poliomyelitis.

FIVE-YEAR SUMMARY OF REPORTABLE DISEASES

	1959	1958	1957	1956	1955
Cancer	1,353	1,291	1,428	1,691	1,304
Chancroid	44	37	56	91	111
Chickenpox	300	1,226	305	739	976
Conjunctivitis (Pink Eye)	0	1	8	3	15
Diarrhea, Infantile	142	48	189	260	168
Diphtheria	4	3	3	2	1
Dysentery, Amebic	9	5	8	13	22
Dysentery, Bacillary	40	14	21	19	13
Encephalitis, Epidemic	0	1	1	1	4
Gonorrhea	1,551	1,536	1,362	1,545	1,693
Granuloma Inguinale	13	16	27	7	2
Hepatitis, Infectious	47	55	39	30	98
Hookworm	4	9	6	6	10
Influenza	227	1,342	1,056	62	28
Leprosy	0	0	0	3	0
Lymphopathia Venereum	24	20	22	18	7
Malaria	0	0	2	1	0
Measles (including German Measles)	711	3,194	1,696	1,763	369
Meningitis, Epidemic	5	12	12	13	9
Mononucleosis, Infectious	80	25	22	28	19
Mumps	226	326	804	822	567
Ophthalmia Neonatorum	0	0	0	5	2
Paratyphoid Fever	0	1	0	1	2
Pneumonia, all forms	769	727	348	482	453
Poliomyelitis *	38	28	6	26	57
Aseptic Meningitis	65	113	0	0	0
Rabies, Animal	0	0	1	1	0
Scarlet Fever (including Septic Sore Throat).....	168	174	218	112	84
Syphilis	392	330	393	364	675
Tetanus	11	6	15	15	16
Tuberculosis, Pulmonary	330	568	588	453	463
Tuberculosis, other forms	22	34	6	27	17
Typhoid Fever	5	4	3	5	8
Typhus Fever	0	0	3	0	0
Undulant Fever	0	0	1	1	0
Vincent's Angina	1	1	3	5	10
Whooping Cough	58	44	43	62	335

* Includes only paralytic and bulbar cases.
Excludes non-paralytic poliomyelitis.

Research and Program Development

During 1959 the Division of Research and Program Development made progress in several fields. A great deal of time was spent in completing a major project entitled, "A Study of Residents of Institutions for the Aged in Dade County, Florida." This study was undertaken in an effort to obtain some basic epidemiological information concerning residents of these institutions. A companion study of retirement hotel residents will be brought to a close in 1960. It is hoped that some very interesting information will be obtained, both from this

study and by comparing the results of these studies to one another.

During the early part of 1959, a new program was initiated in conjunction with the Division of Ophthalmology of the University of Miami School of Medicine. This was the Glaucoma Screening and Follow-Up Program which has two main objectives. (1) To teach routine tonometry to all senior medical students, so they can become familiar with the use of this procedure which is so important in the early detection of glaucoma. (2) To demonstrate the

effectiveness of glaucoma screening and follow-up. Since the inception of this program 2,697 patients have been screened for glaucoma. There were 190 patients referred to the eye clinic for further studies. Of these, 39 were found to have definite glaucoma and 23 are still suspect.

As in diabetes, glaucoma requires close supervision and treatment for the rest of the patient's life. It is hoped that the problem of adequate patient follow-up can be solved by active public health participation. As an outgrowth of this program, it is anticipated that at a later date this Department will be able to undertake an intensive epidemiological study of this disease. Particular information is needed regarding possible significant statistical association between glaucoma and other chronic diseases. That this occurs is frequently stated but poorly documented in the literature. Further information is required concerning geographic, seasonal, age and sex distribution, ethnic or racial predilection and social and environmen-

tal factors which may be related to this serious disease.

In addition to the aforementioned studies, two others are now well under way. One of these deals with accidents among the aged. Although detailed information is available concerning accidents, in general, little has been done to obtain data relating to this problem in the older segment of our population. On the basis of the findings of this study, it is hoped that we will be able to establish a satisfactory preventive program. With an aging population and with continuing urbanization, it can be anticipated that accidents will increase in number and severity unless effective measures of prevention are undertaken.

The other study mentioned involves an intensive survey of the neurotropic virus disease problem in this area. This program is being carried out in conjunction with the University of Miami School of Medicine, the National Institutes of Health and the Dade County Department of Public Health.

Tuberculosis

DECLINE IN MORBIDITY: In 1953 for the first time in Dade County, tuberculosis dropped off the list of the ten leading causes of death. In 1959, for the first time, the number of cases reported showed a significant drop below the number reported during the previous year. New cases discovered during 1959 numbered 332. With the addition of 70 referred cases which had previously been reported in other localities and were added to the local register, a total of 402 cases were reported in Dade County compared to the 548 reported in 1958. The case rate reached a new low with 38.9 cases per 100,000 population. In 1950 the case rate was 85.2 per 100,000 and tuberculosis occupied seventh place in the ten leading causes of death. In that year the death rate was 17.6; in 1959 the death rate was 6.5 per 100,000.

Because of a suspected decline in the disease cases reported during the year were closely scrutinized, and cases added to the register but previously reported in other places were counted separately. More intensive investigation was done before reporting. The studies of atypical organisms which are being conducted by the State Board of Health Laboratories enabled us to differentiate more clearly between disease caused by the tubercle bacillus and the pulmonary diseases caused by other organisms. As knowledge of the disease increases through research, and with fa-

cilities such as the State Laboratories and the Chest Unit at Jackson Memorial Hospital for the observation and isolation of patients, diagnosis can become more exact.

CASE FINDING ACTIVITIES: Case findings were considerably augmented during 1959. The year began with a survey in the south end of the County, with every effort being made to provide X-rays for every migrant worker. The response of the workers was much improved and more were willing to accept this service than in previous years, and residents in the area also took good advantage of the units. Follow-up X-rays were made at the Department of Public Health clinic in Homestead with a portable 14x17 unit from the State, saving time and money for those who needed a large X-ray. Among the 1,700 people X-rayed in this survey two new active cases were found and hospitalized, and two were given diagnostic studies before a diagnosis of inactive disease was made.

The Christmas Seal Mobile Unit, which is owned and operated by the Dade County Tuberculosis Association, was given added range and effectiveness with the addition of a portable power generator. The unit is no longer "tied" to the power lines, but can move easily into areas not reached before, taking the X-rays to the people. On this unit 80,239

X-rays were made in 1959. Of this number 2,473 were made at the City of Miami Stockade where the unit was scheduled one day a month from February through December. In this prison group 12 new cases of tuberculosis were found and admitted to the hospital along with seven old cases who were found to be again active.

Another mobile unit which belongs to the State Board of Health began working here in August, and has been scheduled in the community by the Tuberculosis Association. For part of the year an additional State unit was stationed at Jackson Memorial Hospital, and patients admitted to the Hospital or the Emergency Room were given X-rays. The breakdown of this unit, which is almost obsolete, suspended this program which, in the short time it was in operation, resulted in the discovery of five new cases.

During 1959 there were 123,347 small X-rays made in Dade County. The Health Department clinic contributed 23,526 films to the total. Many of these were for food handlers, and many teachers in the Dade County schools have obtained their pre-employment and employment X-rays at the clinic. The City of Miami requires pre-employment X-rays and some business firms are beginning to require yearly X-rays of their employees.

The 70mm X-ray units placed in the hospitals by the Tuberculosis Association have been used to X-ray personnel and patients. At Mt. Sinai Hospital 4,644 X-rays were made, at St. Francis 2,746, and at Jackson Memorial Hospital 9,678.

Follow-up for tuberculosis for all the 70mm units including those in the hospitals, is a responsibility of the Department of Public Health. Large films may be made by hospitals or private physicians, but a report is made for every 70mm X-ray which is read as suspicious of tuberculosis. During the past year follow-up was done on 1,944 suspicious small films. For the two mobile units operating in the community there were 1,147 suspicious X-rays; at the clinic, 499; on the State unit at Jackson Memorial, 153; at Mt. Sinai, 55; at St. Francis, 27 and at the Jackson Memorial Hospital, 63.

CENTRAL CASE REGISTER: Activity during 1959 is summarized as follows:

Cases added to register	465
New cases reported	339
Referrals—previously reported in other places	70

Old cases re-opened—includes return to county, reactivated, or closed because not located.... 56

Cases closed	611
Moved out of County—notification to new location	130
Not located by letters and home visits—inactive cases only	157
Expired—all causes	139
Non-TB—includes 7 reported in 1959	22
Inactive over 5 years	163

DIAGNOSTIC CLINICS: The diagnostic clinics were relieved of considerable crowding by conducting an extra clinic each week since April. Attendance at the diagnostic clinics was 10,327, an increase of 2,240 over the previous year. These clinics provide X-rays and other tests for the supervision of patients and their contacts, and those with doubtful findings are kept under observation until a diagnosis is established. Large films are provided for those who have had suspicious small films at the clinic, the mobile units, or the hospitals.

RESEARCH: In cooperation with the U.S. Public Health Service, the University of Miami School of Medicine, and Jackson Memorial Hospital, the Tuberculosis Control Division continued the Contact Prophylaxis Trials Program through 1959. New contacts will not be added to the study in 1960, but follow-up on those previously admitted will continue for several years. The Pediatric Tuberculosis Clinic, which began as a research project, has now become an integral part of the Division's control program.

THE HOSPITAL CENSUS: Although there were only 194 Dade County patients in the State Hospitals on December 31, there were 281 admissions during the year. With the 329 patients in the hospitals on January 1, 1959 and the 281 admitted, a total of 610 Dade County people spent at least part of 1959 in the State hospitals. The shortened period of hospitalization has provided a more economical use of hospital beds, and the State Tuberculosis Hospital at Orlando was converted to a State hospital for mentally retarded children.

The reduction of time spent in the hospitals has greatly increased the patient load under supervision of the Dade County Department of Public Health. The anti-tuberculosis drugs are dispensed to patients at the treatment clinics which are held three times weekly. There were 5,822 visits made to the treatment clinics during the year, and 495 patients were obtaining

their drugs through the Department of Public Health at the close of 1959. Effective treatment of tuberculosis usually requires the use of drugs for a prolonged period. Surgery is necessary much less frequently since the development of chemotherapy.

LABORATORY SERVICES: These services are provided by the local branch of the State Board of Health Laboratory which processed 1,315 sputum specimens for Department of Public Health patients during the year. Specimens that show atypical characteristics are forwarded to the branch laboratory at Tampa for further study. The effectiveness of the various medications used in the treatment of tuberculosis is also determined and reported by the laboratory so that the most effective treatment may be provided for our patients.

EDUCATIONAL ACTIVITIES: Educational activities continue to be part of the work of the Tuberculosis Control Division. The Director contributes to the teaching program of the University of Miami School of Medicine and takes part in the bi-monthly conferences of the specialists in the treatment of chest diseases. Orientation and education is also provided for the public health nursing staff. Conferences and meetings are attended in order to inform community groups or to obtain new information about tuberculosis.

PROGRESS IN CONTROL: Throughout the country there are signs that the control of tuberculosis may be closer than it has previously been thought possible. In Dade County definite progress has been made. The smaller number of cases found during the year compared to the increased effort made in case finding and to the increase in the population, has indicated a decline in the amount of disease in the community. Isoniazid, used in the treatment of tuberculosis, is effective in preventing complications of primary tuberculosis in young children in the age group where the disease is most devastating. Studies now being conducted may show that the drug may also protect the contacts in the family where there is the highest risk of developing the disease.

At the recent meeting of national tuberculosis control authorities at Arden House in Harriman, New York, the elimination of tuberculosis as a public health problem was estab-

lished as the new goal in control programs, and appropriate recommendations were made. Recommendations such as those concerning research must be implemented on a national scale, but those advocated for local use are procedures which have been routine in Dade County. As new measures became possible they have been applied in this community. Hospitalization is available for every person who needs it and will accept it. The Dade County Department of Public Health is exceptionally well equipped to provide out-patient supervision and treatment. Clinics are held four times a week for X-rays and medical consultation, and there is sufficient nursing staff so that patients may have the attention and the help they need. The anti-tuberculosis drugs are provided without charge, and three treatment clinics are held each week at morning and afternoon hours so that patients may obtain their drugs conveniently.

The major recommendation made by the conference was for adequate treatment of every case, and this is a goal which we have been unable to reach. Patients leave the hospital against medical advice; people become tired of taking pills every day when they feel well; too many people are irresponsible and neglectful of themselves and careless of others. Our population is highly mobile, and much effort is spent in locating patients who have become lost to supervision. The Arden House Conference pointed out that present opportunities may not last indefinitely. Patients not adequately treated can develop drug resistant organisms and pass on infection which will not yield to the drugs now available. All the resources of the community must be mobilized to find the infectious cases and treat them effectively to prevent new infections in contacts and relapses in patients.

In the many years of tuberculosis control effort successive goals have been set, based on the discovery of new tools and the development of new techniques. Although none of these goals has been completely met, each has made its contribution. The target is getting smaller and more difficult to hit; more work and more selective effort will be necessary to show progress towards the new and higher goal of eliminating tuberculosis as a possible health problem.

Veneral Disease Control

Progress was made in the control of venereal diseases in Dade County during 1959, but there are national as well as local indications that syphilis and gonorrhea are still formidable

diseases.

GONORRHEA: Gonorrhea has been a major public health problem since the first epidemic of this disease infected the mass of the

population in the sixteenth century. In the past forty years the least number of cases recorded in the United States was 131,193 in 1919. The greatest number, 400,639 cases was reported in 1947. The advent of antibiotics and chemotherapy in recent years has altered the course of the disease and greatly reduced the many complications and distressing sequelae of gonorrhea. Yet, even with the evolution of specific treatment, 237,318 cases of gonorrhea were reported in the United States during 1959.

There was a decline in the total number of gonorrhea cases diagnosed and treated in the venereal disease clinics of the Dade County Department of Public Health in 1959. Compared with 1,967 cases in 1958, there were 1,917 treated in 1959. Considering the population increase, this reduction is significant, and it is most encouraging to note that the number of male cases dropped from 1,024 in 1958 to 867 in 1959. This progress is being maintained by the Department's epidemiological investigations wherein all infected males are carefully interviewed and their female contacts are brought to treatment. Attention must be directed to the fact that over three hundred cases involved teen-agers and nearly six hundred cases were reported in young adults between the ages of 20 to 24. Every effort must be made to educate these groups concerning the method

of spread and control of venereal diseases.

SYPHILIS: Recent national and local trends present a serious warning against complacency in the fight to control syphilis. The curve of the incidence of syphilis in the United States for the past forty years rises and falls like the crest of a wave. The highest point was reached in 1943 when over half a million cases were reported. The wave subsided to a low level of 116,630 cases in 1958. Since that time syphilis rates have been rising despite the fact that treatment is simple, effective, and readily available.

As the following summary indicates, the venereal disease clinics of this Department have also experienced a marked increase. The number of infectious cases, primary and secondary syphilis, have doubled each year since 1957. A total of 108 such cases were treated in 1959. Since syphilis is a more formidable disease than gonorrhea, greater importance is given to finding the infected contacts by the Department's epidemiological investigators. Through these intensive efforts, 44 cases of primary and secondary syphilis and 35 cases of early latent syphilis were found and brought to treatment in 1959. The oldest patient in the infectious syphilis group was 76 years old and the youngest was 12 years old.

	1959	1958	1957	1956	1955
Total syphilis treated	339	374	347	319	362
Primary and secondary	108	58	30	23	11
Early latent	112	92	115	91	73
Late and late latent	114	106	177	187	247
Total gonorrhea	1,394	1,498	1,367	1,424	1,634
Other venereal diseases	80	75	103	113	121

The following table summarizes and compares the activity totals of the venereal disease clinics for the past five years.

	1959	1958	1957	1956	1955
Clinic visits	27,803	6,785	7,173	8,972	22,064
New cases—medical service	1,857	1,853	1,807	2,377	2,434
Field visits	4,080	5,320	8,399	9,327	15,776
Patient interviews	900	1,233	1,266	1,351	2,108
Treatment given	2,370	2,191	2,991	2,975	5,054
Blood tests	24,045	22,945	22,150	16,672	15,605
Smears for gonorrhea	3,859	3,910	3,990	3,827	3,867
Cultures for gonorrhea	2,790	2,811	2,816	2,468	2,860
Darkfield examinations	318	131	113	151	125
Darkfield positives	72	27	18	13	6
Police warrants	49	126	103	119	241
Health cards issued	16,533	15,349	14,370	9,011	5,864
Premarital Kahns	1,177	879	759	689	623

OTHER VENEREAL DISEASES: The 80 cases of other venereal diseases treated in 1959 include 46 cases of chancroid, 16 granuloma inguinale, and 18 lympho-granuloma venereum. Prompt cures with antibiotics and chemotherapy and improved standards of living have gradually reduced the incidence of these infections.

OTHER SERVICES: There were 16,533

health cards issued to food handlers in 1959. This ancillary service continues to be an effective case-finding method. Sixty-four persons were found with positive blood tests for syphilis, compared with 39 individuals in 1958. Ninety-three females were treated for gonorrhea, also an increase over the preceding year. In addition, five cases of active tuberculosis were found and therapy instituted.

Maternal and Child Health

In 1959 the Maternal and Child Health Division continued to offer a wide variety of services, and these services were rendered through the coordinated efforts of all Department of Public Health personnel, school administrators and teachers, Welfare workers, private physicians and dentists, and many other individuals, agencies and groups. The health of pregnant women, infants, and children, with special emphasis on the preventive aspects of obstetrics and pediatrics, is the major concern of this division. By definition health includes more than the absence of disease, so many other things that can indirectly interfere with the physical and mental well-being of mother and children receive health department attention. The Sanitarian, as he inspects a dairy farm or tests a water supply, contributes to maternal and child health. The Epidemiologist, as he investigates a diphtheria report, is helping to protect the health of mothers and children. The Statistician, as she tabulates and analyzes mortality and morbidity data, plays an important role in demonstrating our unmet needs. These are just a few examples of the ways in which many professional skills strengthen the program of the Division of Maternal and Child Health which, in turn, is an inseparable part of the community's total health, education, and welfare effort on behalf of mothers and children.

The Director of the Division of Maternal and Child Health resigned to accept a position with the International Cooperation Administration in Indonesia in December of 1959. Under his guidance for the past six years, most maternal and child health services increased in quantity and continued to improve in quality.

MATERNITY SERVICES: Expectant mothers who are not under private care receive health supervision through five health centers operated by the Department of Public Health. Services offered at the maternity clinics include physical examinations, planning for delivery, nutrition advice, medical and nursing consultation, and laboratory tests such as; serology, Rh factor and hemoglobin determination, X-rays, cancer screening and urinalysis. The public health nurse also visits the home of each patient. The expectant mothers are invited to return to clinic every two to four weeks during their pregnancy.

After delivery, additional services are rendered. Postpartum medical examinations and nursing home visits are made. In addition to the physical health of the infant and the mother, the emotional adjustment of the entire family receives attention. When other sources of help are needed, appropriate referrals are made. Child spacing service is offered if the patient desires this information, providing such aid is recommended by the clinic physician.

FIVE-YEAR SUMMARY OF MATERNITY SERVICES

	1959	1958	1957	1956	1955
Admissions to antepartum medical service.....	3,033	3,494	3,447	3,603	3,403
Antepartum visits to medical conferences.....	9,993	11,260	12,074	12,222	12,488
Average number of visits per patient	3.3	3.2	3.5	3.4	3.7
Cases given postpartum medical examination..	953	915	955	957	1,161
Total visits to postpartum clinics	1,152	1,172	1,148	1,172	1,510
Percent prenatal patients seen as postpartums..	31.4	26.2	27.7	26.5	34.1
Average attendance per clinic session	22.4	22.7	25.5	27.4	29.3
Number clinic sessions conducted	498	547	517	489	477

MIDWIFERY: The activities of the midwives licensed in Dade County have continued to decrease. Public awareness of the advantages of hospital delivery and medical services

is largely responsible for this trend. The remaining midwives are supervised by the Department of Public Health, and they receive regular training.

FIVE-YEAR SUMMARY OF MIDWIFE SERVICE

	1959	1958	1957	1956	1955
Number of licensed midwives	7	8	10	13	14
Number of live deliveries	68	91	104	174	216
Number of stillbirths	0	1	0	1	2

CHILD HEALTH SERVICES: As indicated in the report of the Nursing Division, children receive many clinic services, and a large number of home visits are made on their behalf. At the clinic centers child health conferences provide continuous health supervision for well infants and preschool children who are not un-

der private medical care. The principal services offered are health appraisal, including history taking and physical examination, immunizations, and discussions with the parents about all aspects of child health, diet, and special problems.

FIVE-YEAR SUMMARY OF CHILD HEALTH SERVICES

	1959	1958	1957	1956	1955
Admissions to medical service—infants	4,395	4,131	3,698	4,923	3,743
Infant visits to medical conferences	9,849	10,424	9,020	9,171	9,217
Average number of visits per infant	2.24	2.52	2.43	1.85	2.46
Adm. to medical service—preschool	5,987	4,290	2,569	2,453	3,643
Preschool visits to medical conferences	12,648	16,534	10,772	9,480	6,507
Average number of visits per preschool	2.11	3.85	4.19	3.86	1.79
Infant-preschool clinic sessions conducted	427	433	364	353	356
Average attendance at each conference	55.3	62.3	54.3	52.8	44.1

SCHOOL HEALTH SERVICES: Public school enrollment in 1959 reached a peak of approximately 150,000 pupils. The Department of Public Health offers certain basic services to these children, including visual screening, auditory testing, nursing service, and physical examinations. The number of physical examinations performed by doctors employed by this Division has decreased in recent years because parents have been encouraged to have these examinations done by private physicians. During 1958-59, we examined 20,968 school children compared to 23,121 in 1957-58.

AUDIOMETRIC TESTING: Working in close cooperation with the Special Education Division of the Dade County Board of Public Instruction, audiometric technicians employed by the Department of Public Health conduct hearing tests in the schools. As the following summary indicates, hundreds of children with hearing problems are found every year, and appropriate arrangements are made to help them. The statistics do not include parochial schools although this service is offered to these schools on request.

FIVE-YEAR SUMMARY OF AUDIOMETRIC SWEEP TESTING

	1959	1958	1957	1956	1955
Total number of pupils tested	27,082	21,679	24,285	24,193	12,759
Percent pupils referred for further testing.....	2.72	3.13	1.90	2.35	2.42
Percent of screened pupils referred for further testing	12.9	14.0	12.1	11.5	12.5
Percent pupils tested who showed a loss of hearing	2.04	2.02	1.17	1.11	1.13
Percent screened pupils tested who showed a loss of hearing	18.1	10.9	7.93	8.46	9.16
Pupils referred as having hearing loss who had completed follow-up *	641	684	468	609	463
Percent of pupils with complete follow-up.....	74.3	80.1	61.2	70.7	74.9
Number of pupils with hearing loss who require further follow-up	222	170	292	228	126
Percent of pupils with incomplete follow-up.....	25.7	19.1	38.8	29.3	25.1

* Complete follow-up represents the third audiometer test, parents notification, and doctor's advice and recommendation as to treatment and special education when indicated.

PREMATURE SERVICE: Premature babies have a much higher death rate than full-term babies, and special care is required to save their lives and to prevent them from developing serious health problems. For this reason, the Florida State Board of Health, the United States Children's Bureau, Jackson Memorial Hospital, and the Department of Public Health jointly established a Premature Demonstration Center at Jackson Memorial Hospital in 1950. The Center is staffed with doctors and nurses who have had special training and experience with prematures.

During 1959, the Center served 240 babies; 78 white and 162 colored. In addition to helping these infants to survive, the Center offered training courses to professional personnel from other Florida hospitals.

POISON CONTROL CENTER: In recent years a group of strategically located Poison Control Centers were established in 16 Florida cities to provide "around-the-clock" emergency

information and treatment for poisoning. The Poison Control Center at Jackson Memorial Hospital reported 571 such emergencies in 1959. Nurses from the Department of Public Health visited the homes of victims of accidental poisoning to help prevent the repetition of these accidents. The majority of the accidental poisonings occurred in children under three years of age, and most of these accidents could have been prevented by keeping all drugs, poisonous substances, and household chemicals out of the reach of toddlers.

ANTI-CONVULSIVE CLINIC: Medically indigent patients who have had seizures receive diagnosis and treatment at the Anti-Convulsive Clinic. During 1959 there were 1,332 visits to this clinic. The joint efforts of the Department of Public Health, the University of Miami School of Medicine, and Jackson Memorial Hospital have contributed to the success of this program. The following summary reflects the activities of the Anti-Convulsive Clinic for the past five years:

	1959	1958	1957	1956	1955
New patients — white.....	191	262	197	171	108
colored.....	41	76	57	47	43
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	232	338	254	218	151
Visits — white.....	1,054	1,045	720	522	362
colored.....	278	265	206	129	124
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	1,332	1,310	926	651	486

HOSPITAL SERVICE FOR THE INDIGENT: Since it was established in 1955, this program has provided funds for the hospitalization of thousands of acutely ill or injured persons who could not afford private care. State funds have not been adequate, but the situation improved in 1959 with the development of a new State-Federal program for the hospitalization of indigent persons on Public Assistance. Like the original County-State program, the Department of Public Health and the Department of Public Welfare work hand in hand in the administration of this program.

The summary which follows indicates the

activity of the Hospital Service for the Indigent in 1959:

Hospital	No. of Claims Approved	Total Amt. Paid to Hospital
Jackson Memorial	2,230	\$656,391.37
Kendall	73	15,408.03
Mercy	24	4,857.74
Mount Sinai	266	113,306.47
St. Francis	75	15,683.05
Variety Children's	202	61,228.50
All Others	26	6,266.77
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Totals.....	2,896	\$873,141.93

Developmental Evaluation Clinic

The Developmental Evaluation Clinic is a service concerned with the comprehensive evaluation of the pre-school child whose development reflects some degree of retardation. In addition, it functions to counsel the parents of the retarded child. The total number of children under care in 1959 was 134. During the year 72

new applications were accepted, and of this number 59 were admitted to service.

The clinic was made possible by a special grant from the U.S. Children's Bureau to the Bureau of Maternal and Child Health of the Florida State Board of Health. Administration of the clinic is under the Dade County Depart-

ment of Public Health. The general philosophy under which the clinic operates is well stated in the grant; that the clinic conduct its activities in an inquiring and exploratory fashion in order to determine exactly what goes into the evaluation process for it to be more than just a simple and routine diagnostic procedure.

CLINIC: The clinic staff consists of a pediatrician who serves as director, a psychologist, a psychiatric social worker, and a public health nurse. The evaluation process includes a complete medical work-up followed by indicated laboratory procedures, a thorough psycho-social study of the child and his family by the social worker and psychologist. Special examinations are obtained through our consulting staff.

Once the child's work-up is completed, the clinic staff meets as a group to evaluate the clinical data. During the meeting, the clinical data relating to the child are discussed and the total problem is reviewed. This includes consideration of the family structure as well as the availability of local community services. Ideas are exchanged about the patient's problem, as seen by the individual members of the clinic team. This discussion gives us a comprehensive knowledge of the problem. Decisions reached during this meeting are then discussed at another group meeting with both parents present. A program is set up for the child based on the clinic's findings and the parents' needs and wishes. When a home training program is recommended, the public health nurse makes periodic visits to the home and submits progress reports to the clinic. During her home visit, the nurse offers suggestions and gives guidance to the family about the developmental training of the child. When it is thought that for any reason the home training program is not appropriate, the parents are helped to make other constructive plans through local and state facilities. Re-evaluation is carried out at regular intervals or when indicated by the child's progress.

AIMS: The purpose of the clinic, in addition to its diagnostic service, is to counsel parents and to determine what services are necessary and available for the proper training and guidance of the mentally retarded child. At the present time local training facilities are limited both in number and in scope. It is the opinion of some authorities working with retarded children that a large portion of these children could be trained on a local basis if proper facilities and personnel were available. Some of the data accumulated at our clinic, so far, would substantiate this fact. Many of the families seen here want to keep the retarded child with-

in the family unit, but think that they need guidance to do so. Parents are apprehensive about the future of the child when no constructive program is offered.

Our approach to the question of guidance is not that of telling parents what should be done with their retarded child with regards to institutionalization or local care. These decisions are highly personalized and the sole responsibility of the parents. When it is possible, we try to prognosticate the child's future development and explain what services are available on a local basis for training. The information that is gathered about a particular patient and his family is presented to the parents in such a manner as to help them evaluate their own needs and desires. This information is sent back to the referring physician or agency.

EXPLORATORY ACTIVITIES: The approach to mental retardation is a complex one and involves various talents. To be sure, making a definitive diagnosis as to the cause of retardation does not solve the patient's or the family's problem, but merely initiates the next logical step, which is, what can be done to help the retarded child. The retarded child's problem is intimately mingled, in certain instances, with psychologic overtones, inner family conflict, some of society's archaic beliefs, and lack of training facilities and trained personnel to meet their needs.

From our diagnostic findings we hope to show where basic research is needed and will be most fruitful. Through the social worker we hope to explore the needs of the family unit, what conflicts are present or predictable in the future, and how these problems may be solved. The psychologist is evaluating the factors which enter into the test situation and influence the final test numeral (I.Q.) and how this numeral is related to performance at later age levels. In general, we are evaluating very young children (ages 0 through 6 years) where testing is more difficult and standards established for the older retarded child do not completely apply. In addition, the clinic must continue to raise questions, for example, how might information best be communicated about these retarded children to responsible persons such as parents, the family physician, and the various agencies in the community.

One of the immediate problems facing us is that of training for the young retarded child. What positive steps, such as home training and special services, are feasible in the light of the particular family situation? What progress can

be made by severely as well as moderately retarded children, while at home, which might better equip them to attend school when they reach school age? What type of home training will be most beneficial in preparation for institutionalization if and when placement is necessary?

As already recognized in a few communities, it has become apparent to us that a network of services is necessary to provide a positive approach for the training and care of the young retarded child. Among these services there should be local day care centers and specialized kindergartens supervised by personnel with special training in the field of teaching retarded children. By such a community program, one would hope to reduce significantly the need for institutionalization, or to shorten the period, if indicated. Associated with the day nursery, a "short stay" residential home might be established for a limited number of children. It is believed that this service would help the patient or the family over a temporary crisis and thus avoid permanent institutionalization.

REFERRAL PROCEDURE: Patients are refer-

red to the clinic by private physicians, health and welfare agencies and direct requests from parents. Appointments to the clinic from counties other than Dade must be made through the Health Department in the respective county. The Department must be willing to send a social worker or a public health nurse to attend the disposition conference which is held on the last of the three days required for the clinic's evaluation. The clinic staff works in close relationship with the family physician or clinic directly responsible for the medical care of the child.

TEACHING: The Developmental Evaluation Clinic is closely allied with the teaching services of the University of Miami School of Medicine. The clinic makes use of the advanced diagnostic and research techniques offered by the University Medical Center. In addition, clinic facilities are available for the training of medical students, nurses and other personnel so that they will be aware of the latest techniques used in diagnosis and care of mentally retarded children.

Mental Health

The year 1959 has been a very eventful one for the Child Guidance Clinic. The most significant changes within this period were the establishment and active function of the new Board of Directors, and the continued striving for expansion of services so sorely needed in the community. With this aim in mind there has been a newly created Planning Committee which contains members both of the Board and the staff, whose function it will be to develop extended services for children so that we may more effectively deal with the long and troublesome waiting lists.

During the year there were a number of important changes in personnel. A part-time psychologist resigned and was replaced by a full-time psychologist. Two social workers also resigned, and the student social work unit was discontinued at least for the time being. This move was largely prompted because of staff shortages at Florida State University. In certain ways the elimination of the training unit has facilitated the general operation of the clinic.

The training affiliation with the University of Miami's Department of Psychiatry has continued, and during this past year seven resi-

dents received training at the clinic. The present arrangement is that two residents are placed on a half-time basis rather than one resident on a full-time basis. In this way the physician can remain in the clinic for six months as compared with the previous three month period. It is felt that there are distinctive advantages to this type of assignment, particularly in the better opportunities for individual psychotherapy. There was also one resident who was serving a field placement at the Dade County Department of Public Health from the U.S. Public Health Service and who showed particular interest and aptitude in psychiatry. As a part of this service he spent approximately four months half time in the Child Guidance Clinic. The medical students in Psychiatry and Pediatrics have continued to attend our staff conferences and have expressed considerable interest at the conferences.

The present staff consists of the psychiatrist-director, full time; a half-time staff psychiatrist; one chief psychologist who is also Director of Research; two staff psychologists; one chief social worker, three staff social workers (with one vacancy); one office manager and two secretaries. The staff activities have been revamped so as to expand the group therapy

program. It is still necessary to have a considerable amount of doubling up of staff members during the group therapy sessions for purposes of instruction, but it is hoped within another year that the members of the staff doing therapy will be thoroughly versed in group as well as individual methods. This will be of particular

advantage in the expanded program which we hope will become a reality within the next year or two.

The following statistical analysis is presented which compares a number of clinic functions in 1959 with those of 1958:

	1959	1958
Interviews with parents about children	3,247	3,827
Interviews with children	1,897	1,506
Total interviews with or about children	5,144	5,333
Person-interviews in group therapy	692	62
Group therapy sessions	111	32
Follow-up interviews	21	30
New admissions	277	297
Re-admissions	30	49
Patients terminated	344	209
Current census	240	277
Mental health education and consultation (hours)	547	218
Patients awaiting service	56	146
Patients awaiting evaluation	105	60
Patients awaiting treatment	50	78

	Individual	Group	Totals
Children in treatment	37	19	56
Parents in treatment	37	23	60
Totals	74	42	116

An examination of the statistics demonstrates a number of interesting changes. It will be noted that the interviews with parents about children decreased correspondingly. This indicates considerably more direct therapy services with children. There was also a great increase in the category entitled "person interviews in group therapy," which illustrates the rather large expansion in the group therapy program, a trend that will continue throughout the present year. The sections "patients awaiting treatment" and "patients awaiting evaluation," reveal that a shift in the direction of fewer patients on the "awaiting therapy" list has taken place. This represents a deliberate attempt to shorten the list of patients awaiting therapy so that the flexibility of clinic procedures may be improved. Moreover, there has been evidence that if a patient is evaluated and not placed into therapy within a reasonable period of time, this is taken by the patient as a rejection of them by the clinic. It is possible for the clinic to evaluate more patients than it can treat because of the long period of time involved in therapy. With the development of new therapy units which

are anticipated for the future, it is hoped that the balance between patients evaluated and those going into therapy may be improved.

The group therapy program of the clinic has undergone a great deal of expansion since its inception a year ago. This began as a pilot project with one mothers' and one children's group. Each group utilized one therapist who had previous experience in group therapy, and an observer from the staff to assist the group leader and at the same time to learn the group method. There are seven groups now functioning in the clinic; three children's groups and four mothers' groups. It is anticipated that within another six months two of the observers in these groups will be ready to conduct groups of their own. With the present staff and space, about eight groups would be the maximum number possible in the clinic. With this growing activity in group therapy, it is felt necessary to have some additional supervision, and it seems possible that such a consultancy may be created through the State Board of Health.

RESEARCH: With the assignment of a med-

ical student to the clinic last summer and a borrowed calculator, we were able to collect data, and have now written the first draft of a research project dealing with personality characteristics in parents as they relate to the types of problems seen in children. With numerous pleas to our Board and through them to other organizations of the community, we continued to struggle with the research program on a shoestring basis. The Junior League of Miami recently granted us a sum of money for research over a three-year period. This bequest will now make possible the funds to secure a calculator, to pay for the time-consuming statistical activities required, and now it will be possible for the first time to begin to expand a number of research projects which have been conceptualized and awaiting further developments. All research activities will be of the self-evaluative type, and it is anticipated that not only can clinic procedure thus be improved and streamlined, but also that a contribution in the general fields of psychology and psychiatry may be made thereby.

TEACHING: The teaching activities of the clinic for the year of 1959 have been outlined in the paragraphs above. This has been a rewarding and satisfying experience both to the clinic and to the trainees.

Dr. Harris Peck of New York and Dr. Haim Ginott of Jacksonville conducted in-training workshops to the staff and guests. Both were enthusiastically received.

The mental health education and consultation activities have continued at an increasing pace throughout the past year. This has been true of both our Board and staff. The Board has been active in trying to promote the United Fund activities. There have been a number of important newspaper articles about the clinic in which favorable publicity was gained. Mental health education and consultation activities by the staff have more than doubled throughout the year. Almost every member of our entire staff has been active in working with various organizations of the community in this regard. The clinic director served on the Welfare Plan-

ning Council's Ad Hoc Committee for Mental Health, and in these activities corroborated the need of a permanent Mental Health Committee of this type for the Council. Our chief psychologist is presently functioning on the Welfare Planning Council's committee on research. He has also been appointed to the "Committee on Psychotherapy in Orthopsychiatric Settings" of the American Orthopsychiatric Association. Members of the staff attended meetings of the American Orthopsychiatric Association, the American Association of Psychiatric Clinics for Children, the American Psychological Association and the American Psychiatric Association, and have participated in various committees at national, state and local levels. Our chief psychiatric social worker served as Florida's official representative of the National Association of Social Workers meeting. The director also served as the head of the Mental Health Section of the Florida Public Health Association, and with the clinic staff created an interesting mental health program during the recent meeting in Tampa. Education and consultation services were furnished to the Parent Teacher Association, State Welfare Conference, and a number of other agencies. These consultation services which were inaugurated in 1958 were somewhat curtailed because of temporary staff shortages but are now being resumed.

UNMET NEEDS: There are a number of unmet needs implicit in the above discussion. Most important of these is the ever increasing demand for additional services. As noted on the above statistical survey, there are now 56 patients awaiting intake, 105 patients awaiting evaluation, and 50 patients awaiting therapy. When our staff vacancies are filled, the awaiting therapy list can probably be reduced by an additional 15-20 patients. The staff at present is functioning at a full capacity and the patients in need of all types of services cannot be taken care of for many months. The Planning Committee of the Board will be considering ways and means of expanding clinic services so as to more satisfactorily meet the community needs.

Dental Health

The major function of the Division of Dental Health is to provide corrective and preventive dental care for the medically indigent preschool and school age child.

Many people do not realize that tooth decay affects more children and young adults

than any other disease or health problem. Dental examinations in Dade County Schools have revealed that over half of the children have cavities in one or more teeth. In fact, many school children have already lost some of their permanent teeth because of decay. This is

particularly true in areas where the drinking water is not fluoridated. In 1959, as in recent years, our clinic was staffed with one full-time white dentist and one half-time colored dentist, each treating his own individual patients. We felt fortunate last summer in being able to offer dental treatment to colored children, which in previous years had not been available to them except during school sessions. The clinic continued to operate on a strict appointment basis which is somewhat different than the operation of various other Department of Public Health clinics. This is necessary since most dental procedures are relatively time-consuming.

Dental decay can be greatly reduced by following several important principles. Teeth should be brushed immediately after eating. When this is not possible, rinsing the mouth is of some benefit. Sugars in the diet should be controlled. In addition, people should plan regular visits to their dentists. It is appalling to note that most of the children seen at the Department of Public Health Dental Clinic have never been in a dental office before. This applies to the older children as well as the younger children.

Thanks to the cooperation of schools and public health nurses, the small staff of the Division of Dental Health operated efficiently during the past year. On an average day, between sixteen and twenty patients received treatment at the clinic. These patients came not only from the public and parochial schools but also from the Children's Service Bureau, American Children's Home, Kendall, and various other welfare agencies. The usual dental procedures were employed, using amalgam and synthetics as restorative materials or utilizing surgical, periodontal and prophylactic procedures as the

individual case required. As indicated in the statistics for the clinic, practically every child also received some chairside instruction including tooth brushing demonstrations and other information to promote dental health.

Where more extensive procedures were deemed necessary, the patient was referred either to the Dade County Dental Research Clinic or to the Oral Surgery Clinic of Jackson Memorial Hospital, depending of course on the type of treatment needed. These two clinics serve as a valuable adjunct to our own in providing all phases of dental care for indigent children in this area.

The following tables are a summary of the activities of this Division for 1959:

PATIENT SUMMARY

	White	Colored
New patients—ages 1-4	15	2
New Patients—ages 5-15	630	492
Repeat patients—ages 1-4	9	0
Repeat patients—ages 5-15	1,407	542
Total number of clinic visits.....	2,061	1,036
Total number of patients completed	195	44

PROCEDURE SUMMARY

	White	Colored
Amalgam fillings—deciduous	671	260
Amalgam fillings—permanent	1,697	353
Cement fillings—deciduous	368	189
Cement fillings—permanent	1,163	192
Silicate fillings	198	73
Extractions — deciduous	619	410
Extractions — permanent	354	237
Patients receiving prophylaxis.....	125	34
Number of radiographs taken	671	605
Treatments	2,883	1,011
Chair instruction	2,016	1,033

Health Education

Health education is an extremely important function of the Department of Public Health. No health program can succeed unless the people know about it and understand it.

In 1959 many of our staff members participated in health education activities, but certain activities were limited due to the resignation of the Health Educator in August. Nevertheless, over a thousand lectures and motion picture showings were conducted, and nearly fifty thousand people attended these meetings. In addition ten radio and television programs were presented, and a number of news articles were published.

The Teachers Project in Health Education deserves special mention. This project was jointly sponsored by the State Board of Health, the State Department of Education, the Dade County Department of Public Health and the Dade County Board of Education in cooperation with the University of Miami. Fifteen teachers had the opportunity to observe the health agencies of their community in action. At the health department this included visits to all clinics and field experience with the nurses and sanitarians. The course broadened the health knowledge of the participating teachers and thus extended and improved classroom instruction in health education.

Nursing

Public health nursing is a field of specialization within both professional nursing and the broad area of organized public health practice. It utilizes the philosophy, content, and methods of public health and the knowledges and skills of professional nursing. It is responsible for the provision of nursing service on a family centered basis for individuals and groups, at home, at work, at school, and in public health centers. Public health nursing interweaves its services with those of other health and allied workers, and participates in the planning and implementation of community health programs.

NURSING PERSONNEL: Four new County positions and two new special positions were filled in 1959, increasing the staff to 101 nurses. Six clerical workers, one nursing aide and two clinic maids are also employed. The nurses have the following classifications:

	1959	1958
Nursing Director	1	1
Educational Director	1	1
Generalized Supervisors	3	3
Specialized Supervisors	1	1
Assistant Supervisors	4	3
Generalized Nurses	76	82
Specialized Nurses	15	4
Totals	101	95

Personnel changes appear to continue at the same pace. There were 18 resignations in 1959, as well as 18 in 1958. Twelve of the nurses resigned for the usual reasons: marriage, transfer of husbands, and pregnancy. Retirement was not one of the reasons this year. Three nurses resigned to acquire further education, and three resigned for salary and other reasons. Twenty-six new nurses were employed in 1959. These included nurses for two 1958 vacancies, for 17 of the 18 resignations, and for the six new positions. These 26 nurses have varying educational backgrounds and come from many States. Four have Master's degrees, 16 B.S. degrees, and one an "approved year" in Public Health Nursing.

The education with experience background of our staff continued its progress. We now have six nurses with Master's degrees, 33 nurses with Bachelor's degrees, and 20 nurses with an "approved year" in Public Health. In addition we have 11 nurses who have acquired approximately 16 semester hours of college credit. Combined with satisfactory service, it can be said that they have the equivalent of an ap-

proved year in public health nursing education. We also have a few outstanding nurses without further education but their innate abilities, drives and personal growth permit them to function capably and comparably.

SCHOOL HEALTH AND CLINIC SERVICES: Public Health nurses provided services to 177 public schools and 23 private schools, including parochial schools. There were 57,504 office nursing visits and 8,214 home visits made in connection with school children. There were 21,652 teacher-nurse conferences held. Most of the 874 lectures and motion picture showings involved meetings with school faculties and Parent-Teacher Association groups. A maximum of 53 clinic sessions every week was reached during the summer. This included child health conferences, general immunization, maternity, TB, VD, and anti-convulsive clinics. A supervisor and two staff nurses assisted in the organization and development of the new glaucoma research clinic at Jackson Memorial Hospital sponsored by the University of Miami and the Department of Public Health. A special Salk vaccine program in the Negro schools required much nursing time but resulted in a considerable increase in immunizations. Nursing services at pre-admission clinics for children who went to Lend-A-Hand Camp accounted for the time of one nurse for 24 work days.

VOLUNTEER SERVICES: Volunteers deserve a great deal of credit, not only because of the tremendous increase in the time donated, but also because of the increase in community groups providing volunteer services. Individual volunteers and volunteers from the American Red Cross, the B'nai B'rith Women of Coral Gables, and the South Miami Woman's Club gave 1,785 hours or 224 days of service. This is the time equivalent of one nurse or one clerical worker for a full year. The PTA volunteer time is not included in the above figures.

HOME VISITS: Home visits increased by 4,277 to a total of 47,886 with the majority coded as follows:

Preschool children	10,378
Infants	9,933
Maternity visits	9,618
School children	8,214
Tuberculosis visits	5,239
Cardiovascular disease visits.....	1,409
Mental health visits	1,377
Cancer visits	701

The majority of the visits to cancer patients

and visits to patients with heart disease were accredited to our nurse assigned to the Visiting Nurse Association. Home visits for all other services totaled 1,017.

SERVICE TO MIGRANTS: Supervisory concentration, the addition of another nurse, and the effective organization of a Department committee to coordinate our various responsibilities and activities resulted in increased services to migrants. Several Spanish-speaking nurses did much to improve communications. Home visits to migrants during the last three months of 1959 totaled 794, including 167 maternity, 209 infant, 217 preschool, 121 school, 11 tuberculosis, 21 communicable disease and 28 morbidity visits. Clinic visits by migrants were not tabulated separately until December, when these visits totaled 97.

TUBERCULOSIS: The coordination of the tuberculosis clinic services with the generalized nursing program is reflected in several places in this report and in other reports. The large number of home visits made in connection with the Contact Prophylaxis Study and in the Mobile Unit Migrant Service are two examples of the comprehensive Tuberculosis Control Program.

VENEREAL DISEASE: The coordination of the Venereal Disease Control Program with the generalized nursing program progressed in 1959. Three venereal disease clinic nurses and several generalized public health nurses worked side by side in the various clinics. Their functions included taking bloods, giving treatments, and some times assisting with interviews. Public health nurses are especially responsible for venereal disease control services in the Maternal and Child Health Program.

NURSING HOMES AND HOSPITALS: There were 512 visits made to nursing homes; most of these with a sanitarian and many with a health officer. A specialized nurse was assigned to this program in September, and, although there is much to say in favor of our previous generalized program, there are great expectations that there will be improved coordination of services to nursing homes in 1960. Public health nurses visited hospitals for the first time in 1959. These visits were made only with and at the request of representatives from the Florida State Board of Health. The decrease of 51 visits to nursing homes is compensated by the time spent in visits to hospitals and subsequent conferences. One nurse was a member of a state nursing committee to develop a manual for nursing home operators.

OTHER IMPORTANT SERVICES: Many nurses represented the Department generally or the Nursing Division on other agency boards and committees and at various committee meetings. Among these were the various Welfare Planning Council Division meetings, the Board of the Dade County Tuberculosis Association, the Nursing Committee of the American Red Cross, Civil Defense, the Practical Nurse Advisory Committee, the State Board of Health Nursing Committee on Records, the Nursing Home Manual Committee, and the State Board of Health Supervisors' Conference Committee.

Our supervisors and staff nurses participated in several special meetings including two Premature Center Seminars. Seventy-two hospital nurses and ten physicians attended these Premature Center Seminars at Jackson Memorial Hospital.

One supervisor who participated stated that it was gratifying to observe the interest shown in the public health aspects, including a case presentation by a public health nurse and home visits with public health nurses. Our staff and supervisors developed scripts and slides depicting most public health nursing functions including the care of the premature infant and his parents. The Department's advisory board member assigned to nursing gave much time and encouragement to this.

EDUCATION, INSERVICE TRAINING, AND ORIENTATION: Comprehensive and constructive orientation of new staff and inservice education programs continued. These were clearly described in previous reports therefore only general statements will be made this year. There were three rather than two formal orientation series with 24 Department of Public Health and seven Visiting Nurse orientees. Seventeen Department of Public Health and Visiting Nurse Association personnel assisted in this work. These included the Director and two of his medical assistants, the Sanitation Director, the Director of Sanitary Engineering, nutrition and mental health consultants, and a U.S. Public Health Service consultant as well as nursing staff.

There were 32 monthly inservice educational meetings at the three Centers as well as four general nursing educational meetings for the entire nursing staff. The highlight speaker of the year was Miss Eli Magnussen, Chief of Nursing Section, National Health Service of Denmark. Many other seminars, conferences, and other meetings were attended.

SCHOLARSHIPS: Title I Federal Scholarships made it possible for two of our nurses to

take educational leave in September to attend Teachers College, Columbia University and the University of North Carolina.

One of our nurses took a B.S. degree and another a Master's degree in Public Health Nursing during 1959.

STUDENT EDUCATION: Eight-week to twelve-week student field experiences were provided for 26 nursing students and two students in allied professions. The latter included a University of North Carolina graduate student in Nutrition from the Philippines and a University of Michigan graduate student in Health Education.

The 26 nursing students were all undergraduate students, ten basic collegiate Barry College students; twelve basic collegiate and four R.N. University of Miami students. The increase in University of Miami students reflected a trend which demands immediate cognizance in order to provide acceptable field experience for an expected increase to approximately forty students in a few years.

The resignations of both the Barry College and the University of Miami public health nursing field instructors resulted in increased responsibilities and activities for our educational director, supervisors and staff. Barry College employed a field instructor. This increased our responsibilities in terms of her orientation. In September 1959, at the request of the University of Miami and with the addition of a public health nurse, whose salary was provided by the University of Miami, one of our supervisors accepted the responsibility of formal public health nursing instruction. This resulted in pronounced changes in methods of providing and developing field experiences for five of the University of Miami students; an increase in the families selected to be visited by students and the inclusion of field supervision by staff field teachers and the supervisor. The supervisor concerned stated, "There has been a great increase in interest on the part of the staff, especially the senior advisors. A much closer relationship between staff and students is apparent; they are constantly sharing experiences. This also resulted in an improvement in the continuity of patient care."

The Department of Public Health also profits. Ten of the 73 University of Miami and Barry College students for whom we provided field experience in the past four years have been employed by us. Three other Barry College graduates who had their field experience elsewhere in the State also were employed.

VISITING NURSE ASSOCIATION OF DADE COUNTY: When this agency was organized in 1945 it had a staff of three registered nurses, and an executive director shared with the Department of Public Health. In 1959 the staff had increased to 24 including an assistant director, a supervisor, a Department staff nurse and a licensed practical nurse.

During 1959 this number was decreased to 22 because funds from the United Better Health Foundation were discontinued. This curtailment of the anticipated growth of services made it necessary to discontinue the recently developed licensed practical nursing program.

Progress can be reported, however, in another area of service. After two years of planning a Physical Therapy Program was started in October with the employment of a registered physical therapist. Funds for her salary were contributed by the Miami Beach Women's unit of the United Cerebral Palsy Association. This group of dedicated women is to be commended for pioneering in a unique effort to coordinate the community services to the family as well as to the child or adult with cerebral palsy.

The Dade County Medical Association and Board of Directors of the Visiting Nurse Association were instrumental in making another progressive step. The size of the Medical Advisory Committee was increased and its representation broadened.

In 1959 there were 2,812 admissions to the Visiting Nurse Association service, and 35,359 home visits were made. Approximately 80 per cent of these visits served patients with chronic illness. Fees from patients paid for over 25 per cent of the cost of the services, and the United Fund contributed nearly 75 percent of the cost of the services. The types of visits made were as follows:

Visits to patients with heart disease.....	7,686
Visits to patients with deficiency anemias	7,544
Visits to patients with cancer.....	3,571
Visits for other chronic illnesses.....	9,310
Visits to infants, maternity & acute illness	7,248

MENTAL HEALTH: The mental health worker functioned chiefly as a mental health nurse consultant. Consultation, service, education, and coordination were the major areas of performance. There was a continued effort to cooperate with other agencies serving directly or indirectly in the mental health field.

Consultation or guidance was given to the Department staff and the Visiting Nurse Association. Approximately 300 new cases were re-

ferred to the Dade County Department of Public Health for follow-up services. While the majority of these were from the South Florida State Hospital a number were from the other State Hospitals. Guidance was also given to the nurses on problems encountered in their every day work, such as those involving emotionally disturbed children in their homes or in the school setting. Direct service on a limited basis continued as in the past. This involved guidance to ex-mental patients and their families and to troubled people who were referred by health department or other agency personnel. Other divisions besides Nursing took advantage of this service. The kind of help given included emotional support, evaluation and direction to the appropriate resource.

The mental health worker and the nursing education director continued to work closely to integrate mental health concepts in the total in-service education program. This included planning and participation in the orientation of new staff nurses. Twelve nurses made a two-day observation visit to the South Florida State Hospital. The mental health worker participated with the staff of the South Florida State Hospital in the orientation of these observation groups. This gave an unusual opportunity to acquaint the psychiatric nurses of the Hospital with the activities of the Dade County Department of Public Health in relation to the rehabilitation of the mentally ill in the community.

At the request of the Florida State Board of Health, the mental health worker assisted with the orientation of a new mental health worker from another county. Visits were made to the University of Miami and Barry College Departments of Nursing at the request of the instructors of Public Health Nursing. Late in 1959 a Mental Health Bulletin was initiated in an attempt to keep the staff better informed of recent developments in the field of mental health and in changes of program policy. Periodic consultation was received by the mental health worker from the psychiatric nursing consultant of

the Bureau of Mental Health, Florida State Board of Health.

Professional activities included an observation period with the mental health nurse consultant of the Westchester County Health Department of New York. There was participation in two leadership workshops sponsored by the Bureau of Mental Health and the U.S. Public Health Service and in an orientation to the Sunland Training Center at Gainesville. The annual meetings of the Bureau of Mental Health and the Mental Health workers were attended. The regional nutritionist and the mental health worker participated in a television program sponsored by the Heart Association of Greater Miami. Being a member of several committees of other agencies gave the mental health worker an opportunity to interpret roles and coordinate efforts with these agencies. These committees were of the Welfare Planning Council and the Mental Health Society of Greater Miami. Activities included planning for and participation in the community's annual Mental Health Fair, and planning for a social club for former mental patients. As a result of the latter the Phoenix Club was initiated which added another much needed resource to our community.

Mental illness because of its scope and chronicity is most certainly a public health problem. The hazard is both qualitative in terms of disability and quantitative in terms of population affected. Public health personnel are in a unique position because of their sustained relationship to the public to educate and counsel for prevention. While there is much to be done in helping the mentally ill and their families, there exists an even more heroic task and that is in extending the special public health function and skill of prevention. With an ever increasing population to serve, it would be wise to consider additional specialized personnel in the field of mental health. A consultant psychiatrist could be charged with advisory and teaching responsibilities that derive from his special knowledge of medicine and psychiatry.

Nutrition

The State Regional Nutritionist was granted educational leave in September, 1959, but the following paragraphs describe some of her activities prior to that time.

HEALTH DEPARTMENT ACTIVITIES: Working with the staff members of the Dade County Department of Public Health, both in groups

and as individuals, involved the greatest proportion of time. This work included orientation of new staff members, staff in-service training program, nutrition instruction in maternity clinics and well child conferences, evaluation of nutrition literature, consultation with nursing and boarding home inspection teams, nutrition

advisor to the Developmental Evaluation Clinic and assistance in planning demonstrations and exhibits for clinic use.

SCHOOLS AND UNIVERSITIES: Within the public schools, work was done with faculties rather than with individual teachers. This was gratifying from the standpoint of conservation of time, and it was felt that a school-wide approach to nutrition problems and education was more effective than an effort on the part of one or two classes. Help was also given in planning and presenting nutrition programs for student school health councils and parent-teacher groups. Conferences were held with the basic collegiate nursing students of the University of Miami and Barry College Schools of Nursing during their clinical experience in public health nursing. Materials were furnished and individual assistance given with families having nutrition problems. In addition six weeks field ex-

perience in public health nutrition was offered to a graduate student from the University of Puerto Rico.

COMMUNITY AGENCIES AND ORGANIZATIONS: Cooperation with various community agencies and organizations continued on much the same basis as previous years resulting in the following activities; consultation services to the State Department of Public Welfare area office in evaluation of nutritive content and cost of therapeutic diets, membership in the Welfare Planning Council, service as nutrition coordinator for Dade County Civil Defense program, monthly participation in case conference discussions of the Geriatric Clinic, University of Miami School of Medicine, and consultation services to institutions; including small hospitals, nursing homes, nurseries, or day care centers where group feeding is practiced.

Sanitation

The program of sanitation safeguarding public health in Dade County was again expanded in 1959. Several new categories were added to the Special Services section of the Division to cover sanitation problems arising in these fields. This required reassignment of some personnel to new duties. In 1959 there were 48 employees in the Division, compared to 47 in 1958, and they are distributed as follows:

Director	1
Assistant Director	1
Food and Environmental Sanitation	
Supervisors	4
Sanitarians	25
Milk	
Supervisor	1
Sanitarians	2
Special Services	
Labor Camp Sanitarians	2
Food Processing Sanitarians	2
Airport Sanitarian	1
Hospital and Nursing Home Sanitarian..	1
Industrial Sanitarian	1
Rodent Control	
Supervisor	1
Sanitarians	3
Educational Leave	
Sanitarian	1
Office	
Secretaries	2

Environmental sanitation was the largest Division operation. A staff of 25 sanitarians and four supervisors assigned throughout the County were responsible for this work. A new State law on migrant labor camps strengthened the authority of the two sanitarians assigned to this work resulting in much improvement in camp facilities. A steady growth in the food processing industry was recorded in 1959. The sanitarians in charge of these activities report excellent results. A new field of sanitation was entered by the Division in 1959, with the activation of the County's new airport. This installation, one of the world's largest, required the assignment of one sanitarian, full time, to the Port Authority and the airlines. Industrial operations of the area have been on the rise for some time creating many sanitary problems. To meet these conditions the Division specially trained a sanitarian in the Special Services Section. A sanitarian was also made a full-time member of the Department's inspection team supervising hospitals and nursing homes.

EDUCATION AND TRAINING: The School of Public Health at Tulane University again accepted a sanitarian from this Division for post-graduate training. He will re-join the Division in 1960 with a Master's degree in Public Health. Three sanitarians completed the Sanitarians Training Course of the State Board of Health during the year. Many other training courses including those conducted by the Communicable Disease Center and the Occupational Health Field Headquarters of the U.S. Public

Health Service, the annual Florida Association of Sanitarians Short Course and regular in-service training conferences were attended by members of the Division during the year.

Staff members continued to be in demand by schools and civic bodies as lecturers on the sanitation program serving Dade County. The Division was again used as a field training center to supplement the Florida State Board of Health training course for sanitarians. There were ten trainees in 1959. The Division's training course for food handlers was in session for the first six months of the year. It was suspended during the latter half of the year for revision of the course. A total of 2,102 food handlers certificates were issued during the period the school was in session.

FOOD AND DRINK: An increase of 230 new establishments engaged in all types of food and drink service was recorded for the year. This was approximately 4 percent more than in 1958. The inspection program governing this industry continued to stress operational sanitation. Other phases were the repair or replacement of defective equipment, and correction of structural defects.

All food and drink service to interstate common carriers of this area was inspected and certified by this Division to the U.S. Public Health Service at their request. The following summary chart records the supervision extended to the food and drink establishments of Dade County during 1959:

Type	No. Registered	Visits
Restaurants	2,426	17,768
Bars	1,299	7,020
Grocery	704	4,671
Meat	387	2,064
Bakery	206	1,239
Food Processing	145	973
Other	597	2,027
Total	5,764	35,762

Several suspected food poisoning cases were investigated during 1959. Food preparation storage and service facilities were inspected and swab tests and food samples were submitted for laboratory examination. Results obtained were inconclusive as the time factor between onset, report and investigation was too great.

Food condemned as unfit for human consumption and ordered destroyed in 1959:

Type	Pounds
Flour and cereals	114,495
Canned foods	6,876

Meat products	191,342
Nuts and seeds	1,431
Produce	2,180
Sugar and confections	855
Frozen foods	9,600
Macaroni products	21,930
Dairy products	3,570
Seafood	150
Miscellaneous	6,663
Total	359,092

This is 134,440 pounds more than in 1958. The cause for this great increase was the admittance of 138,923 pounds of Mexican beef by Customs to be transported to Miami for export to South America. On arrival here it was refused by consignee as unfit for export. It then became necessary for us to seize and condemn this meat to prevent its sale in Dade County.

ENVIRONMENTAL SANITATION: Problems involving private and public premises required 39,848 visits by sanitarians. They consisted of calls to day nurseries, child care homes, places of employment, public buildings, bottled water plants, recreational areas, trailer parks and private homes. Registered complaints received in this office for 1959 were 9,016. It is usually necessary to make several return visits to secure correction. Collected and submitted to the laboratory for analysis were 4,779 water samples, a reduction of approximately 7 percent over the previous year. It is felt that this was the result of expanded public water facilities extending into suburban areas with home service. Wayside dumping of garbage and debris continued to plague the Division. Much time and effort was expended to eliminate potential public health hazards caused by such activities.

SCHOOLS: Sanitation program yielded excellent results in 1959 through the combined efforts of the faculties and student bodies. Their health coordinators accompanied the sanitarians on school inspections and reviewed the completed inspection forms in regard to the aid they could give in the correction of general sanitation problems. All structural defects were forwarded on to the School Board for action.

CHILD CARE CENTERS: All new installations for child care were required to submit plans of their proposed facilities to this office for clearance. Routine inspections were made by field sanitarians in cooperation with all interested agencies. This supervision on the part of sanitation has greatly aided the strengthening of the overall child care program.

TRAILER PARKS: Supervision of trailer

parks in the form of regular inspections by sanitarians was carried out during 1959. Complete sewerage of all lots and better sanitation of parks in general was stressed during these inspections.

SEPECIAL SERVICES

LABOR CAMPS: The supervision of labor camps under the direction of two sanitarians assigned to this duty in 1958 was continued by the same personnel during 1959. The sanitation program which all labor camps have been subject to was intensified this year. A State statute was enacted charging the Florida State Board of Health with the promulgation and enforcement of rules and regulations governing all camps housing 15 or more laborers. These regulations set much higher housing requirements than had been in effect. A conformance period of six months was extended to enable the operators to meet certain features of these new standards such as adequate hot water under pressure to all family living quarters and other buildings where bathing, laundering, or dish-washing is done, sufficient heating facilities for all living quarters, adequate toilet, washroom and laundry facilities, improved kitchen and dining facilities for families and groups, and camp supervision based on responsibility of operator.

There were 2,650 visits and inspections to the camps in Dade County made by sanitarians this year in guiding the sanitation program designated under the new law. Acceptance of responsibility by the migrant workers in maintaining better individual living conditions was sought by presenting to them an educational program on personal hygiene and environmental sanitation. It is necessary that both tenants and operators meet their full obligations if camps are to qualify under the law for the coming season.

FOOD PROCESSING, WHOLESALE STORAGE AND DISTRIBUTION: This industry's continued growth during 1959 was accelerated by the increasing population of the area which resulted in an expanded market. To meet the demands of this market additional production and storage facilities were created. Several million dollars were spent in the construction of new plants and a like sum was used to renew and modernize facilities already in operation. The specialized program of sanitation governing food processing, storage and catering activities in Dade County is under the supervision of two sanitation specialists. They have been well accepted by the industry on the consultant level in helping to solve problems essential to

the business, such as food loss, better production, storage and transportation. The combined efforts of industry and the Sanitation Division has raised the capacity of the food processing field in Dade County to a major producing center in the United States.

AIRPORT SANITATION: A new phase of public health security was established this year by the Division. A sanitation specialist was assigned to full-time duty at the new multi-million dollar County airport. The extent of his responsibility is vast in conducting the program devised to solve the many problems of sanitation created by public air travel. Supervision of food service to the public at retail outlets on the air terminal grounds and to air passengers is a major part of the program; it is correlated with U.S. Public Health Service certification of satisfactory performance standards. Safe water supply, sewage and waste disposal, prevention of and the spread of communicable disease, control of insects and rodents, and general area sanitation are other essential factors of this specialized plan of public health safety through sanitation.

HOSPITAL AND NURSING HOMES: Inspection service relative to sanitation was made a team function in 1959. Prior to this there were several units of nurses and sanitarians who in addition to their other duties, made all hospital and nursing home inspections. In organizing a permanent team a sanitation specialist was assigned to full time service. He works in cooperation with other members of the team in making routine inspections and investigation of complaints. His surveys of compliance with sanitation standards become a part of the team report used in the licensing of these facilities. All food service as well as sanitation in the 24 hospitals and 49 nursing homes in this area is the general responsibility of the sanitarian. He made 384 field visits and inspections during the year to supplement this program.

INDUSTRIAL SANITATION: As the size and scope of the manufacturing industry in Dade County increased bringing with it new sanitation problems, a specialist was assigned to full time duty in industrial sanitation effective July 1, 1959. The first step was a detailed sanitation survey of all manufacturing industries in the County. During the first six months of this program a total of 305 industries employing 25,172 personnel were surveyed. Special emphasis was placed on the plating and anodizing industry, as the result of numerous and serious violations found in the first few surveyed. Other areas given special attention

were the fiber-glass industry and the aluminum industry. These comprise about one-half of all the establishments surveyed. This program is continuing along these general lines with the intention of placing the exceptionally diversified occupations in the County into categories of relative importance in relation to their public health significance.

RABIES CONTROL: The number of animal bites in 1959 was 2,938 with 10,164 field visits made to investigate, locate, quarantine and observe the animals involved. This was about 14 percent less cases than in 1958. Credit for this reduction in animal bites is given to the added effectiveness of the Metropolitan dog control ordinance which has now been in force for over a year. Dade County again had no reported cases of rabies in either domestic or wild animals for 1959.

MILK: Three men are assigned to milk control to supervise the local milk shed which is the largest in Florida. With a continued increase in population, so must milk production increase. Our local dairy farms continue to sell their nearby farms and move to other counties where farm land can be obtained in larger tracts and taxes are not so high. In every new movement a larger barn was built and herd additions made.

Six new producers were added to our shed in 1959. These additions were of a smaller type operation of 200 cows or less. Our local shed now includes 11 counties: Dade, Broward, Palm Beach, Glades, Highlands, Hendry, Martin, Okeechobee, Indian River, Polk and St. Lucie. Some of the dairies are located 200 miles away from the Miami area and are on every other day plant delivery. Several plants increased their raw storage facilities in order to receive increased milk production.

NEW EQUIPMENT

5,000 gallon raw storage tank	1
7,000 gallon cold wall vacuum tank.....	1
5,000 gallon cold wall vacuum tanks	8
6,000 gallon cold wall vacuum tank	1
3,000 gallon cold wall vacuum tanks	5
4,000 gallon cold wall vacuum tanks	4
2,000 gallon cold wall vacuum tank	1
1,500 gallon cold wall vacuum tank	1
1,000 gallon cold wall vacuum tank	1
1,000 gallon cold wall farm tanks	2
5,500 gallon transport tank	1
5,000 gallon transport tank	1
New automatic can filler	1

MILK SHED

Dairy farms	100
Cows milked daily	44,000

Pipe line milkers	98
Tank trucks—3,000 gal. or less	29
Tank trucks—3,000 to 5,000	24
Milk plants	11
Ice cream plants	16
Counter freezers	79

MILK CONTROL ACTIVITIES

Miles traveled	56,436
Dairy farms inspections	1,230
Milk plant inspections	2,173
Ice Cream plant inspections	294
Counter freezer inspections	996
Dairy products samples collected	3,746
Water systems inspected	77
Water samples collected	77
Permits suspended	1

MILK PRODUCTION (IN GALLONS)

Milk produced	43,649,780
Grade A milk sold	39,151,733
Ice cream manufactured	11,890,949
Eggnog manufactured	103,693
Florida milk imported (out of local shed)	242,302
Out-of-state milk imported	131,407
Out-of-state cream imported	820,800
Local milk condemned	3,859

RODENT CONTROL: Many programs based to eliminate rats were planned and executed in 1959. The key programs were as follows: North Bay Island, Miami Beach waterways and Miami River area, County dump, Orange Bowl, City of Miami offices at Dinner Key, Mt. Sinai Hospital, 171st Street Shopping Center, Miami International Airport, Coconut Grove colored area, and Boys Country Day School. These projects were completed by personnel attached exclusively to the control section. Much other rodent control work was done by all sanitarians on their individual assignments. The importance of sanitation and rat-proofing buildings in the control of rodents was stressed throughout the year. Public cooperation was good and again helped to hold typhus in check with no cases reported for the year. An additional function of this section is the inspection of tent fumigations in structural pest control work. The combined services rendered by rodent control in 1959 are reflected by the following activity report:

Man hours (rodent crew)	8,480
Number visits	16,998
Number premises treated	11,329
Red Squill torpedoes	220,950
1080 water (pints)	280
Warfarin (pounds)	2,670
Buildings rat-proofed	84
Fumigation inspections	1,829

Sanitary Engineering

Dade County has an area of 2,054 square miles, but the usable land area is severely limited by the great expanses of the Everglades. It is estimated that the total area available for development amounts to only 703 square miles. The County has been experiencing a rapid population growth and there is every indication that this growth will accelerate. Health problems in the field of Sanitary Engineering have been greatly increased by the expansion into marginal lands, and controls have been necessary to guide the builders in the development of these areas. While most of the work done by this Division increases with the expanding population, the emphasis has been placed on adequate sewerage systems and treatment plants for the County. The results of this effort are indicated by the 13 percent increase in the number of plans for sewerage systems and a 15.7 percent in the population served by sewerage systems.

The detailed activities and accomplishments of the Sanitary Engineering Division are set forth in the following paragraphs. To briefly summarize, the Sanitary Engineering program includes public health control as well as supervision over the following: sewerage systems and sewage treatment plants, water supply and distribution, subdivision development, industrial waste treatment facilities, public swimming pools, bottled water plants, and common carrier watering points. Also, an increased portion of our activities are now concerned with two other fields: education programs and participation in county-wide planning. The number of personnel in this Division remained constant for the past two and a half years, however, due to the increased work load, an additional sanitarian was added at the end of 1959. The staff now consists of three engineers, four sanitarians, and one secretary.

BOTTLED WATER PLANTS: The general supervision and inspection of bottled drinking water establishments was assigned to the Sanitation Division in August 1959. This supervision includes the collection of water samples for bacteriological analysis and the inspection and recommendation for issuance of annual permits. The Engineering Division will continue to review plans for new bottled water plants and act in an advisory capacity on this subject.

COMMON CARRIER WATERING POINTS: One of the many programs of the U.S. Public Health Service is the control of potable and cul-

inary water on common carriers. Through a cooperative agreement with that agency, this Division has the responsibility of accomplishing the inspection and submission of recommendations as to the classification of the various watering points. There were four (4) railroad watering points and six (6) vessel watering points recommended for approval. This report does not include the watering points serving the airlines as that is a function of the Sanitation Division.

DRAINAGE WELLS: A drainage well is any cavity, drilled or natural, which taps the underground water and into which is placed surface waters, waste waters, industrial wastes, or sewage. Before entering into a contract for the use of a drainage well, it is the responsibility of the well driller to obtain a written permit. The permits approved through this Division indicate a substantial decrease during the past year. However, this decrease is due principally to the transfer of the inspection of drainage wells used for air conditioning purposes to the Sanitation Division. The Engineering Division retained drainage wells used for all purposes other than air conditioning and acts in an advisory capacity, if needed, on wells reviewed by the Sanitation Division.

EDUCATIONAL AND PROFESSIONAL ACTIVITIES: These activities reflect the emphasis placed on the training of individuals concerning the public health reasons for establishing standards in their line of work. A short course for swimming pool operators was started in 1953 and has continued on an annual basis since that date. In September 1958, the County Commission adopted an ordinance requiring the compulsory certification of swimming pool operators and this certification to be based on attending a short course and passing an examination prepared by this office. Thus, it was necessary to hold four short courses in this field during the year in order to handle the operators of our 575 public swimming pools. There are now 755 pool operators that have completed the short course and successfully passed the terminal examination.

The regular annual short course for water and sewage plant operators was held in October 1959. There were 150 operators registered for this short course consisting of four evenings of discussions and lectures. This course terminates with an examination for the voluntary certification of operators as compared to the

compulsory certification of swimming pool operators.

Outside activities of personnel in the Engineering Division include representation on the Dade County Water Resources Committee, Dade County Standardization and Variance Committee, and Civil Defense. As chairman of the sub-committee dealing with private swimming pools, this office co-authored a local code governing the construction of private pools which was adopted by the Variance Committee. Personnel in this office were honored to be co-chairman of the American Public Health Association Southern Branch convention held in Miami and vice-chairman of the Sanitary Engineering Section of the Florida Public Health Association.

INDUSTRIAL WASTE: The number of plans reviewed for the treatment of industrial waste water showed the largest percentage increase of any action in this Division. The greatest proportion of these projects continues to be plans for the treatment of waste water from self-service laundries. The method of treatment of waste water has become fairly standardized, using screens and diatomaceous earth type filters with the final effluent being discharged to soakage pits, or, in some cases, to canals when they are available. Although this method of treatment requires more operation than the trickling filter method, it is apparently preferred by the owners due to the fact it requires much less area for the treatment units. Tests made on the effectiveness of these units indicate the treatment to be satisfactory with proper operation.

SEWERAGE AND SEWAGE TREATMENT: The number of plans reviewed for sewerage facilities continued to increase with 86 projects being approved for a 13 percent increase over 1958. The majority of the plans were for the extension of collection systems served by existing plants. However, plans for the following new sewage treatment plants were approved: Riverdale Estates, Southern Estates and Palm Springs Shopping Center. Plans for the expansion of existing sewage treatment plants were noted for: Eastern Shores, Bel Aire Subdivision and 163rd Street Shopping Center. A summary of sewage treatment plants in Dade County shows that there are 35 sewage treatment plants serving an estimated 369,000 persons. Although the number of sewage treatment plants remained the same as last year, it is to be noted that an additional 50,000 persons are being served by sewerage systems. This amounts to a 15.7 percent increase in the num-

ber of persons served by sewerage systems in 1958.

A pollution survey of the Biscayne Bay area was made to determine the extent the Bay had cleared bacteriologically in the two year period after the sewage outfalls were eliminated by pumping the sewage to the City of Miami plant at Virginia Key. This survey included a total of 162 samples collected from 18 stations ranging from Rickenbacker Causeway north to Little River and east to Miami Beach including Government Cut. The results indicated a very decisive reduction in pollution when compared with previous surveys made in 1949 and 1956.

SCHOOLS: There were 23 plans reviewed and approved for sanitary facilities and sewage disposal for school construction. This figure compares with 47 plans reviewed in 1958 or a decrease of 51 percent. Of the plans reviewed, there were 12 plans for new schools and 11 plans for additions to existing schools.

SUBDIVISIONS: Through the cooperation of the Dade County Zoning Department, all tentative subdivisions are submitted through this Division for recommendations as to water and sewer requirements. There were 572 tentative subdivision sites inspected during the past year. There has been a steady annual increase in the number of plats reviewed by this office. The number of subdivision plats has more than doubled compared to five years ago with the largest increase (37.9%) during the past year. It is our belief that a large proportion of this increase is due to the Metro requirement that all subdivision plats, including those in municipalities, be processed through the County offices.

SWIMMING POOLS: It is a requirement of the Florida State Sanitary Code that plans for public pools be reviewed by the Health Department, and, by agreement with the State Board of Health, this Division reviews all plans for public swimming pools to be constructed within the County. In addition to the review of plans, this Division is responsible for the inspection of public pools during construction, and, upon completion, files an application for a permit to operate the swimming pool with the State Board of Health. The number of new public pools has remained fairly uniform over the past five years, with 50 to 60 pools being constructed annually. There were 54 plans and specifications reviewed during the past year and a total of 575 public swimming pools that have been permitted and are in operation at the present time. This is the largest number of pools in any county within the State of Florida and requires the

DO NOT CIRCULATE

services of three sanitarians to maintain supervision over the operation of the pools. A fourth sanitarian supervises the swimming pool program, reviews plans, and inspects new pools during construction.

WATER SUPPLY: There were 79 sets of plans for water systems reviewed during the year. This is an increase of approximately 5 percent compared to the number of plans approved in 1958. The majority of plans approved were for the extension of existing water distribution systems, however, plans were approved for new water treatment plants to serve Fairway Heights Subdivision, Tanglewood Gardens Subdivision, Riverdale Estates, Bailes Road Estates, and Tropico Estates. One new

water treatment plant was completed to serve Palmetto Country Club Estates, and the water plant to serve Riverdale Estates is nearly completed. It is gratifying to note that seven privately owned water systems have been eliminated by connecting their distribution systems to the City of Miami supply, and their 7,000 customers are now being served softened, treated water. There are a total of 47 water plants serving 100 persons or more, and, of these, there are eleven water plants serving an approximate 727,000 persons with softened, filtered water. A summary of water supply and distribution systems shows that approximately 781,000 persons in Dade County are being served by an approved public water system.

SUMMARY

	1958	1959	% Change
Bottled Water Plants	3	4	+33.3
Common Carrier Watering Points	10	10	0
Drainage Wells—Permits	261	157	-39.9
Industrial Waste Plans	18	38	+111.1
Sewage Disposal Plans	76	86	+13.2
School Plans	47	23	-51.1
Subdivisions—for County	415	572	+37.9
Swimming Pool Plans	65	54	-17.0
Swimming Pools—New Permits	57	49	-14.0
Swimming Pools—Total	526	575	+9.3
Swimming Pools—Field Visits	5,173	4,272	-46.6
Water Supply Plans	75	79	+5.3

Laboratory

Requests for various types of laboratory examinations submitted to the Miami Regional State Board of Health Laboratory during 1959 appeared to reflect a period of leveling off as well as a shifting of emphasis in certain public health programs.

As can be seen in the accompanying table, there were relatively few significant changes in the number of requests for services performed in the various divisions of the Laboratory as compared with the previous year. Notable exceptions were observed in the food and water categories and in general chemistry. The latter increases to a large extent reflect the expanding program of the Southeastern Office of the State Bureau of Narcotics. Demand for these services continues to increase each year as the South Florida area population grows and additional responsibilities are placed upon the County Health Departments and other regulatory agencies submitting samples to the Laboratory.

Variable increases were also noted in requests for agglutination tests, rabies and various bacteriological examinations, while there was a slight decline in examinations for syphilis and gonorrhoea which was probably due to more selective testing and fewer mass survey programs.

The apparent drop in the number of enteric cultures is misleading because there had been an unusual demand for this type of examination during the previous year as part of the epidemiological follow-up of several diarrheal disease outbreaks. Similarly, the drop in the number of dairy product examinations reflects the fact that only one-tenth as many out-of-state milk tanker samples were submitted as compared to the 1958 total. Also, it should be mentioned that although it is not recorded as such, all raw milk samples and all pasteurized and homogenized white milk samples are routinely examined for the presence of added water.

The State Laboratory again participated in

special research projects in the fields of tuberculosis bacteriology and enteric virology. Thus, a total of 2,964 additional TB examinations were performed as part of a Dade County Department of Public Health—University of Miami School of Medicine cooperative study designed to test the effectiveness of sputum, gastric, and tracheal lavage specimens for the detection of tubercle bacilli.

Additional research funds were provided by the Armed Forces Epidemiological Board Commission on Enteric Infections for an extension of a study into the possible role of enteroviruses in diarrheal disease in Guatemalan children. This project is indirectly providing the opportunity for organizing a virology section in the Laboratory in anticipation of the establishment of routine viral diagnostic services needed in this area.

EXAMINATIONS PERFORMED

	1958	1959
Syphilis	365,277	359,384
Agglutinations and related tests	1,388	1,943
Blood typing (RH)	3,757	3,682
Diphtheria and associated infections	357	522
Tuberculosis	7,941	8,085
Tuberculosis (research)	6,204	2,964
Gonococcus smears	27,960	27,154
Gonococcus cultures	3,686	3,370
Enteric cultures	11,260	9,560
Blood cultures	24	80
Miscellaneous bacteriology	2,586	3,096
Dairy products	37,194	34,188
Foods — sanitary quality tests	413	1,064
Food poisoning	436	528
Utensils	3	20
Water — drinking and pools	26,106	26,818
Water — pollution surveys	6,470	8,030
Water — chemical	145	165
Blood — chemical	982	1,103
Other — chemical	4,238	6,949
Urine	15	23
Toxicology	400	330
Spinal fluid	111	126
Intestinal parasites	7,279	7,138
Malaria	18	20
Mycology	39	66
Rabies — microscopic	420	522
Sensitivity studies	75
Virology research	6,451
Totals	514,784	513,869