

## YOUR HEALTH DEPARTMENT

It gives me a great deal of pleasure to be able to talk to you here in this audience and to those who are listening over the air, that I may tell you of your Health Department, its organization, its functions and its aims. Since Public Health is old in years, altho a part of any municipal or county government, yet I feel safe in saying that it is probably the least known and understood of any of the various branches or activities of a City or County. Therefore, it does give me a great deal of pleasure to bring this discussion to you tonight and, I hope, to answer any important questions you may ask of me and as many as you wish.

The Yakima City-County Health Department is the oldest full time, joint health department ever to be so organized in the United States, having had its birth following the typhoid epidemic in 1911. Therefore, I know it only as a joint City-County unit and of necessity I will have to deal with it as such.

Hardly a week goes by but what we are met with the question, what is a Health Department, what does it do and why should we have one, These are some of the questions that I hope to answer for you.

The County of City, in this case the County-City Health Department is the basic unit thru which Public Health work or preventive medicine is administered within the State. Public Health has been defined as "The Art and Science of Preventing Disease, prolonging life and the promotion of physical and mental efficiency thru organized Community effort." In other words, it is the object of the Health Department to prevent "catching" or communicable diseases, to control or ward off communicable diseases when they do appear so that they will infect as few people as possible and through teaching of proper methods and

through dissemination of knowledge of the advances of medical science, to raise the general health standards of the community.

In most instances it is not the purpose of the Health Department to treat people for ailments. This is only sometimes done in those communicable diseases which, if allowed to remain untreated, only aid in the spread of that communicable disease. The physician in private practice is better equipped to administer the first type of service than is any public agency, and treatment is his function in the community's health program. Nothing can successfully supplant the private physician in this field, therefore, I would like to leave with you this one basic principle, Public Health is not, nor is its organization and function, the forerunner of any hand of socialized medicine.

I have used the terms full time Health Department and joint Health Department. Let's look into the legal aspects of your department for a moment for a definition of those terms. By laws of the State of Washington, every County and every City of the first class must appoint a Health Officer to carry out the duties of that office as prescribed by the governing bodies of his jurisdiction and the State Board of Health. Said Officer shall be appointed by the County Commissioners sitting as A County Board of Health or the City Commissioners likewise sitting as a City Board of Health. It is these Boards of Health who shall determine whether or not said official shall serve full time or only part time. By mutual agreement it has been possible for those two or more governing bodies to jointly appoint one man to serve as Health Officer, however, it was not until this past state legislative session that such an act was made legal. Thus we have a joint City-County Health Department legalized and the full time requirements being left to this local



governing body. The Health Officer is the only appointive position in the department, the other members are employed, as would other members of any City or County department be. The size of the County or District, its problems, its interest in those problems and its financial ability will determine the size of the Health Department staff.

Ideally, a typical full time unit contains; a Health Officer, a doctor of medicine trained especially in the techniques and philosophy of public health, one or more Public Health Nurses, a Sanitary Inspector and a Clerk, all employed on a full time basis. Thus, we have the rudiments of a full time local health department.

As to the duties of these workers we can but briefly touch upon each, for each would, if completed, occupy the time allotted to this paper, But first let us deal with the rest of this work and how this cost is met.

In my definition of Public Health I stated it met its objectives thru organized community effort. From the inceptions of public health, as such, that has meant primarily taxation. To what extent the taxpayer paid for public health, in most instances, depended entirely upon what the governing body, or bodies, of that department thought of public health. There is still no law within the State of Washington which states how much a city of the first class must set aside for Public Health but the State Legislation did, a few years ago, pass a law which states in part "that each County shall annually set aside four tenths a mil of their assessed valuation for Public Health." Beyond that it is strictly left to the governing body and the people, as to how much shall be spent within the separate jurisdictions for Public Health. However, contributions from non-official agencies and private

individuals may be accepted and this also within the past few years has been legalized by the State legislation under the pooling-fund act, permitting such monies to become official in carrying out Public Health activities within that jurisdiction.

At present we are fortunate in having one, or I should say, two other sources of official funds. With the advent of Social Security, a few years ago certain sums of federal money were allocated to each state to be distributed by the State Department of Health to carry on local public health work. Also the State Legislation is biannually setting aside certain sums of money for such purposes. These funds are distributed primarily on a matching basis and from the standpoint of need. Altho this is, as it would seem, "Manna from Heaven" we cannot hope to have it continue forever.

Let us now look into the scope of activity of a health department before looking into our local picture of which you are most interested. Permit me, please, to outline only the duties of each office.

The Health Officer:

1. To administer the policies and activities of the department.
2. The responsibility of communicable disease control.
3. The administration of therapeutic techniques whenever necessary in such control.
4. The administration and supervision of all programs relative to the reduction of maternal and infant mortality.
5. The administration and supervision of all programs relative to the health of the pre-school and school child.
6. The administration of nutritional programs.



#### The Health Officer

7. The administration of mental hygiene programs
8. The administration of dental hygiene programs
9. The administration of all programs designed for the purpose of public health education.
10. Lastly there is that group of services that could be listed under communicable disease control but because of their magnitude are usually considered alone, namely;
  - a. Venereal Disease Control
  - b. Tuberculosis Control
  - c. Crippled Children's cure
11. Vital Statistics - the bookkeeping of Public Health, the recording of all vital statistics relative to births and deaths.

#### The Public Health Nurse

Primarily she is the assistant to the Health Officer, whether in the field or in the office. Hers is primarily a task of education. She teaches the family in the control of communicable diseases, teaches the family, under the private physicians orders, the care of afflicted members. She organizes study groups and gives talks to groups and clubs. She assists in carrying out the pre-school and school health programs of the community.

In the maternity and infant hygiene field she organizes study classes and under orders of the private physicians carries out his policies to the good of the expectant mother and the infant.

Tuberculosis, Venereal Disease, Crippled Children, all alike, utilize much of the time of the Public Health Nurse. As stated before she is

fundamentally a teaching nurse. It is not her job to help people by direct nursing service to them, but rather to teach them to care for themselves.

#### The Sanitarian:

His duty, basically, is again that of an assistant to the Health Officer in the execution of his control of communicable disease and the abatement of nuisances, the latter, altho not having been mentioned before, is one of the two early reasons for a Health Department. The latter, however, is now almost entirely a problem of the Police Department, for it has little public health significance.

So many communicable diseases are spread thru those vehicles, that what we eat and drink. Therefore, the Sanitarian is interested primarily in the supervision of what we eat and drink and of those persons who handle the same. Therefore, his problems are:

1. Supervision of all food handlers
2. Supervision of all milk products, processing and distribution.
3. The quality of meat, its processing, storage and distribution.
4. Our private and public water supplies.
5. Our sewage disposal systems, that they may not contaminate our water supplies.
6. Industrial hygiene, one that is but in its infancy.

I would like to add that in this field there should be a Sanitary Engineer who would supervise this vast field and also be a consultant on all problems of sanitary installations for water supplies, industrial hygiene and sewage disposal.

#### The Clerk and Statistician:

These persons receive little credit yet do a vast amount of work in taking care of all stenographic and bookkeeping work, altho records of necessity are kept to a minimum. The Statistician takes care of the registration of all births and deaths and all other records as required by State and Federal Law.

#### The Laboratory:

A part of the Health Department so far not mentioned because it is not so recognized as a part of the absolute requirements of a full time organized health department. Yet it is most invaluable in the diagnosis and control of communicable disease, for largely such diseases are now recognized as to their etiology and the laboratory is not only an aid to the local department and the private physicians but almost a necessity.

These, my friends, are the duties of the basic units of any full time health department regardless of its size.

Altho lengthy, it has been necessary to give you this so that you might better understand what is to follow, for, as I have stated before, you no doubt know less about the organization, the purposes, the aims and the functions of your health department than you do of any other official agency, or department, of which you are a part.

It is a simple problem for me to tell you what Yakima City and County should have relative to personnel, its justifiable activities, the need and source of funds and what is needed to carry out the programs I might desire, but that is not enough.

I know full well what Yakima City and County should have from a Public Health standpoint, but I would hesitate to give you my personal opinion for I am only one person and I might be prejudiced. Let me rather tell you what we now have to carry on the program that I have far too briefly outlined, understanding that we are attempting to administer Public Health to approximately 130,000 people.

I am proud of our staff and of its size and the qualified people that I have on my staff. Yet, here is the picture: We have as of this evening;

- 1 Health Officer
- 1 Milk Inspector
- 1 Meat Inspector
- 2 General Sanitarians
- 5 Public Health Nurses
- 1 Office Nurse
- 1 Clerk - - Stenographer
- 1 Registrar of Vital Statistics (part time)
- 1 Bacteriologist

To this I will add that we have positions for a Public Health Nursing Supervisor, one General Sanitarian and two Public Health Nurses that are, at present, vacant, due to a lack of personnel available.

Now then let us look into what we should have. Far be it from me, as Health Officer, to tell you what you should have, for as I have told you before, I might be biased in my opinions. Rather let me refer to a survey made by the Federated Women's Club of Yakima, back as far as 1944, when our population was 100,000. They recommend and have official data to qualify their recommendations.



Health Officers: One full time Health Officer

One full time Assistant Health Officer

Six part time clinical assistants

Public Health Nurses: Twenty Public Health Nurses - One for each  
5,000 population

Sanitary Engineers: One

Sanitarians, trained: Eight

Bacteriologists: Two and one assistant

Health Educator: One

Clerks: Seven

These, my friends, are the people which a group of you, a lay groups, have told me we should have to properly and efficiently operate the Yakima City-County Health Department.

Now then, let us consider costs - First, what we have at the present time and then what we should have. The combined budget for the Yakima City-County Health Department for the year 1946 was \$59,375.00. Of this amount \$17,920.00 was allocated from State and Federal Funds. \$18,910.00 from County, \$16,725.00 from the City of Yakima and \$5,820.00 from the Public Schools in payment of Public Health Services. Those of you who are rapid mathematicians and who recall my statement that a County must set aside .4 of a mil for Public Health work, will tell me that Yakima County has budgeted in excess of .4 of a mil, I will answer that by stating the difference is in the rebudgeting of unexpended County funds of 1945.

Another question you might ask and I shall answer in advance: Why is it that Yakima City contributes almost as much money as does the entire County, when it has only a little less than one-fourth of the population. In reality the City should be budgeting in excess of the County from a service standpoint. Three of the Sanitary Inspectors, of the five, and three and one-half of the seven listed Public Health Nurses, devote their entire time to the City of Yakima and from the time factor all other employees devote at least half their time to the City.

Is the amount of money now budgeted adequate? Yes it is for the present and for the work that is being done. However, it is definitely not enough to adequately do a good Public Health job. A minimum standard has been set up by the United States Public Health Service which requires that at least one dollar per capita should be spent annually for Public Health. You will readily see, therefore, that we are expending less than half of the standard if our estimated population is 130,000 persons.

If the standard of our dollar per capita was budgeted would the amount be adequate? No, it would not. There are units in this State that are expending far more, some double that amount, on Public Health. True the doubling of our present budget would greatly expedite the picture but it would not be adequate to maintain the list of personnel as previously outlined as the recommended staff for a unit of this size.

At this point I should like to give Yakima City credit in respect to the amount of money they budget for Public Health, for they provide the quarters for the Health Department and, for which, up until two years ago they received no compensation. They now, at my suggestion, do receive an annual rental of \$480.00 annually. The matter of housing of your Health Department is definitely a matter which, if you wish to



do a good public health job in this community, give some consideration. If we are falling down then in our Public Health work what phases of the work should be increased. Let us briefly examine some statistics recently prepared by the State Department of Health. The first of these are on field nursing visits locally, as compared to a State over-all picture, the latter of which is not a standard but a factual figure. I will state with percentages only those activities where Yakima is falling down. In Tuberculosis Control the State average is 14%, we make only 7%. Maternity Services, State 5.1%, Yakima 0.1%, Infant Hygiene, State average 5.7%, Yakima 2.4%, Pre-school services, State 3.7%, Yakima 2.5%. Such fields as Dental Hygiene, Mental Hygiene and Nutrition are being left untouched. I am pleased to say, however, that from the standpoint of Venereal Disease Control, Communicable Disease Control, School Hygiene and Crippled Children's work we are equal to or above the state wide average.

A similar report has been prepared for Sanitation Services; both of these reports being based upon the first six months of 1946 and here again we have fallen well below the State average, the figures are available but I will not take the time to list them tonight.

It is not that we are not cognizant of the need in this area nor that our staff is not qualified, nor is not fulfilling their duties. It is merely the fact that we are definitely understaffed. We must, therefore, either just touch upon each activity or concentrate upon those which we feel most important at the moment and we have elected to do the latter.

It is not a rosy picture that I have given you, I did not come here for that purpose, but out of respect to my staff I feel I should give them credit for what they have done.

During the year 1945, the Sanitariums made at least 5,520 individual calls, the Nurses made a total of 9,327 calls, this, of course, does not in any way represent the work done within the schools or the office. There were 5,417 clinic visits for the purpose of Venereal Disease Control, 1,372 school children received physical examinations, 238 pre-school physical examinations were done, 1,045 food handlers were examined. I will not enumerate any further but these are just a part of the work done; you may refer to the annual report if you desire further factual information.

I presented a dark picture relative to Tuberculosis Control and it is a dark picture. Tuberculosis in Yakima County, as compared to the rest of the State, is a dark picture, yet this paper would not be complete were not more said of the program as it exists. We have one non-official agency and one semi-official agency that is doing wonderful work in this field. The Yakima County Tuberculosis League, a non-official agency is assisting us greatly in our T B Control program, yet, it is not a part of our department as such. The funds set aside by the late Mr. A E Larson and Mr. Alex Miller are contributing about \$8,000.00 annually for T B Control Work. This fund operates an office, a miniature X-ray equipment and T B clinic facilities but because of the character of the bequests those funds are not a part of the Health Department budget and, therefore, I have not listed that in the above budget figures. It should, however, be considered in our per-capita expenditure for