A publication of the Alabama Department of Public Health

Birth Certificates Go Paperless, Thanks to CHS CSC Project

Sof Dec. 22, 2006, all Alabama birth certificates and fetal death reports are filed electronically over the Internet eliminating the need to submit paper to the Center for Health Statistics (CHS). All Alabama birthing hospitals now use EVERS (Electronic Vital Events Registration System) to file birth certificates and fetal death reports. EVERS was developed in-house and replaces the DOS-based system birthing hospitals had been using since 1994.

Cathy Molchan, director of the Quality Assurance and Registration Division, Center for Health Statistics, said, "In the summer of 2005 we began holding weekly meetings with Computer Systems Center (CSC) staff who developed the system for us. During these meetings, we would review different aspects of the system and discuss workflow issues in both the hospitals and in the Center. CSC staff were very responsive to our needs and great to work with." The system was piloted in July 2006 in the three hospitals in Montgomery, and in September CHS staff began installing the system in the remaining 56 birthing hospitals in the state. By Dec. 22, all of the birthing hospitals were using the system and the old DOS program had been removed.

Prior to the new Internet-based system, birth certificate software had to be physically updated by CHS staff in each of the hospitals every time there was a change in the DOS software program. With the Internet-based system changes are posted only once at the Center. Then, when hospital staff log on to the system, they are automatically accessing the updated software.

"The older system required CHS staff to manually review every birth certificate for errors and to manually stamp the file date, state file number, and state registrar's signature on the paper birth certificate." Ms. Molchan said. "Now certificates are filed automatically. Every 30 minutes, the EVERS system retrieves birth records the hospital has electronically finalized. At that time the file date and state file number are assigned to the record as it is moved to the vital records database. If a hospital submits a birth record in the morning, Mom or Dad could go to the county health department in the afternoon to obtain a certified copy of the birth certificate."

At first, hospital staff were hesitant about moving to the new system because it is so different from the old DOS system they had used for years. Once the hospital birth clerks used the new system for a few weeks, the Center began getting many positive comments about EVERS. Hospital staff are also pleased with EVERS because they can download information about births in their facility into an Excel

continued on page 6 April 2007

Volume 40 Number 5

SID Training Conference Focuses on Intervention Challenges and Teamwork

he city of Mobile hosted the STD training conference, The Many Challenges of STD Intervention: Teamwork is Essential, March 5 – 7. More than 80 participants attended the conference, including at least 20 nurses who received continuing education credits for the training. All 11 of the state's public health areas were represented by disease intervention staff.

The conference planning committee developed a jam-packed agenda for the program which was held at the Ashbury Hotel Conference Center. In addition to a welcoming letter from the mayor that was included in the conference packet, Dr. Bert Eichold, health officer for Mobile County, greeted the group and invited them to tour the historic county health department. During the following two days, speakers from the Centers for Disease Control and Prevention, the Alabama Department of Corrections, the STD Regional Training Center, and the health department reviewed issues ranging from hepatitis C to emergency preparedness. When a presenter from the Dallas, Texas, STD Training Center cancelled on short notice because of illness, Nursing Director John Hankins and Disease Intervention Specialists Charlie Tolliver and Shawn Ousley did an outstanding job of developing and presenting a workshop on safety in the field and clinic.

At the closing session, Charlene Abrams, STD program manager for Public Health Area 8 and member of the conference planning committee, presented years of service pins to employees: 5 years: Fred Coley, Cassandra Foster, Letetia Hatchett, Patricia Johnson-Smith 10 years: Sharon Bradford, Beverly Frank, Agnes Oberkor, Rodriko Sankey, Tonya Snider

15 years: Dorothy Easterly, Wanda Mc-Crimon, Thomas Lee 20 years: Gracie Davis 25 years: Arthur Rene Wright



Arthur Rene Wright

Retirees

The following employees have retired recently **February** -Rosetta Howard - Health Statistics **March** -

Kevin Humphreys – Madison County Health Department Doris Stubblefield - St. Clair County Health Department

Gene Hamrick – Bureau of Family Health Services Jean Hester – Franklin County Health Department Avonia Ragland – Etowah County Health Department Priscilla Trawick – Henry County Health Department

Alabama Department of Public Health Misson

To serve the people of Alabama by assuring conditions in which they can be healthy.

Value Statement

The purpose of the Alabama Department of Public Health is to provide caring, high quality and professional services for the improvement and protection of the public's health through disease prevention and the assurance of public health services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

The Department of Public Health works closely with the community to preserve and protect the public's health and to provide caring quality services.

Fast Facts for Marriages Oldest Groom: 95 Oldest Bride: 89 Youngest Groom: 16 Youngest Bride: 15 Day on Which Most Marriages Occurred: Feb. 14 (529 Marriages) Day on Which Fewest Marriages Occurred: Jan. 17 (5 Marriages)

Marriage with Greatest Age Difference Between Bride and Groom: 50 Years

From Vital Statistics at a Glance, Alabama 2005 For further information call (334) 206-5429.

Alabama's Health

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April 2007

Public Health Meets Needs of the People After Devastating Tornado in Enterprise

Then the PHA X's mobile unit rolled into Enterprise after the Enterprise tornado, we thought it was more than a coincidence that we were parked on "FAITH" street. Faith has kept this community together. Faith is what will help many of our citizens make it through these difficult times.

We quickly reverted to public health of years past. Providing basic needs such as shelter, food, water and medications. Public health did what it does best, meet the needs of the people and came together for a common good.

We would like to thank the State Health Department for their assistance, especially John Hankins and Andy Mullins who worked tirelessly to make sure we had what we needed to respond. We would also like to thank the Area teams that came down and their Administrators who allowed them to come. Teams from Area 6, 7, 8 and 9 responded. Public health responded with nurses in shelters and recovery centers, social workers worked the shelters and walked on foot through town to conduct needs assessments on a community that had not received assistance yet. Environmentalists made inspections for food and water safety. We provided tetanus shots, first aid, mask, goggles, hand sanitizers and field vouchers for medical supplies. Citizens were driven to Walgreens to get their supplies, a local doctor donated insulin and we worked with Walgreens so that they could provide insulin to those who needed it. John Hankins worked with the State Health Department and Walgreens to enable us to use field vouchers to obtain medical supplies to those in need. This is just a sampling of what transpired since the day of the tornado.

Our Incident Command Team Peggy Blakeney, Acting Area Administrator; Joe Ellington, EP Coordinator and Disease Intervention Director, and Eileen Rogers, Area Nursing Director; showed leadership in a time of crisis. They quickly stood up a partial EOC /ICS at the Houston County Health Department.



Shown from left to right: Renae Carpenter, LCSW, Social Work Director Area 9; Kimberly Strickland, LBSW, Houston County Health Department; Meg May, LCSW, Social Work Director, Area 10; Lori Bass, LBSW, Houston County Health Department; Suzanne Terrell, LBSW, Clarke County Health Department, Stacey Luck, LBSW, Etowah County Health Department; Audra Wilson, RN, BSN, Monroe County Health Department. Not shown are Sara Tatom, LCSW, Social Work Manager, Area 10; Fran Hovet, LBSW, Social Worker, Coffee County Health Department; and Misty Hubbard, LBSW, Coffee County Health Department who also assisted at the shelter Thursday night and Friday until the Area 9 Response Team arrived.

Area response teams were put on alert and by 4:30 p.m. teams were in the Enterprise and Abbeville shelters. They coordinated with the State Health Department and local officials regarding public health response and recovery efforts. We were kept abreast of any changes and they made sure that employees that were impacted were taken care of.

Last but not least we have faith that if such a disaster should occur again, our system, the Alabama Department of Public Health will be there for the good of the people.

Now faith is the substance of things hoped for, the evidence of things not seen. Hebrews 11:1 By Lesa Smith

Thanks to staff from other areas

Area 10 nursing director Eileen Rogers thanked Area 6 staff for spending a week assisting the Coffee County clinic staff in providing services for clients who needed to replace WIC vouchers, family planning supplies, update immunizations and so that local staff could attend to their personal devastation. She said, "I am sure staff in their area also worked extra hard while they helped us in Coffee County."

Area 6 staff who deployed included Debbie Thompson, RN, Clinic Supervisor, Tallapoosa County; Jane Wishum, Clinic Clerical Supervisor, Tallapoosa County; Carrie Johnson, RN, Calhoun County; and Rachel Brannock, ASA, Clay County.

Social Worker Stacy Luck of Area 5 also assisted.

Taking the night shift were members of the Area 8 Response Team: Carol Wilson, Area 8 Nursing Director; Mary Conway, RN, Lee County; Nickie Eddins, RN, Lee County; Nickie Turner, RN, Lee County; Gilly Windham, Social Worker, Lee County.



Assisting from Area 9 were (left to right) Dnene Johnson, RN, Baldwin County; Debbie Thomasson, Area 9 Nursing Director; and Kaye Dunn, RN, Baldwin County Health Department.





utstanding community programs of the department's Bureau of Clinical Laboratories and Bureau of Family Health Services each were honored with awards March 19 at the 40th anniversary celebration of the Civitan-Sparks Clinic in Birmingham.

The Alabama Newborn Screening Program provides laboratory screening and followup activities to prevent or minimize the effect of disorders that can lead to death, mental retardation and life-compromising conditions in newborns.

Although the Alabama Newborn Hearing Screening Program and the Newborn Screening Lab have been in existence for many years, the programs have recently been combined into a single Division. Bob Hinds, Director of the newly created Alabama Newborn Screening Division within the Bureau of Family Health Services, said, "Both awards were recognition for two programs for their outstanding support of the Sparks Clinics and for the outstanding nature of their programs in general. Both programs have been partners with the Sparks Clinics for many years. Melissa Tucker, Newborn Hearing Screening Branch Manager, and Danita Rollin, NBS Lab Branch Manager, and their staffs continue to do great jobs and should be very proud of these awards."

The Sparks Center is dedicated to the wellbeing of families and individuals with or at risk for developmental disabilities. The awards were presented at the annual Simpson-Ramsey Lectureship held in the Children's Harbor Bradley Conference Center.

In addition to a historical overview of the clinics, several addresses were given on the theme of newborn screening and metabolic disorders. Distinguished speakers for the lectureship were Dr. Stephen Cederbaum of the University of California at Los Angeles, Dr. Darryl De Vivo of Columbia University and Dr. Lane Rutledge of the University of Alabama at Birmingham.

All of Alabama's newborns are screened for PKU, Congenital Hypothyroidism, Galactosemia, Congenital Adrenal Hyperplasia, Biotinidase Deficiency, and certain hemoglobinopathies (including Sickle Cell Disease). An expanded screening panel is also performed using tandem mass spectrometry, testing for amino acid disorders, fatty acid disorders, and organic acid disorders. Disorders that can be detected using this procedure are Maple Syrup Urine Disease, Homocystinuria, Tyrosinemia, Citrullinemia, MCAD, Propionic Acidemia, Methylmalonic Acidemia, Carnitine Transport Defect, Glutaric Acidemia, and Isovaleric Acidemia.

Infants identified with these disorders typically appear normal at birth. The testing and follow-up services allow diagnosis before significant, irreversible damage occurs.



Left to right on front row: Russ Majors, Perry Snider, Tim Stevens, Benita Ware, Lynn Green, Dr. Jerry Callan, Danita Rollin, Martha Duke, Shirley Mapp, Sandy Hager. Back row, left to right: Mona Sasser, Shelly McGrady, Phyllis Randolph, Elizabeth Fontaine, Kitty Simpson, Paula Lyman, JoAnne Roten.



Pictured left to right are Rachael Montgomery; Cindy Ashley; Dr. Thomas Miller; Melissa Tucker, NBS Follow-Up Branch Manager; and Leigh Smith.



Scale Back Alabama Participants Celebrate Lifestyle Changes

labamians from throughout the state gathered at the Embassy Suites in Montgomery April 2 to celebrate their eight-week long efforts to get healthy and lose weight. The expectant participants represented the top 100 teams in a statewide weight-loss competition called Scale Back Alabama. Sponsored by Alabama's hospitals, the Alabama Department of Public Health and Barber Dairies, the contest encouraged teams of three to five people to lose weight and exercise with the incentive of grand prizes of \$1,000 for each team member. The Nutrition and Physical Activity Division of the Bureau of Professional and Support Services was highly involved in the campaign from start to finish, including developing the curriculum, planning and holding news media events, conducting numerous weigh-ins at the start and conclusion of the program, conducting weekly educational classes broadcast by satellite and coordinating the final celebration event that culminated with a balloon release.

The winning team named itself "Alabama Clam Chowder," and it consisted of two recently married couples in their twenties who were determined to lose weight. The four team members were each presented checks for \$1,000 from Barber Dairies, a program sponsor. Team captain Ryan Turner, a fourth-year medical school student at the University of Alabama at Birmingham, said his team members reduced their caloric intake to 1,000 calories a day, ate plenty of lean proteins, vegetables and fruit, and exercised four times a week before their Wednesday night Bible study met. Turner's starting weight was 185 pounds and his ending weight was 150 pounds; his height is 5 feet, 10 inches. "Alabama Clam Chowder" lost a total of 110 pounds and 16.4 percent of its members' weight in the two-month period of the competition.

In asking Miriam Gaines, director of the Nutrition and Physical Activity Division, about the method of weight loss followed by the winners, she was very pleased that the couples were able to include more fruits and vegetables, ate less high fat and fried foods, stayed away from empty calories, and worked physical activity into their daily schedule. She was concerned, however, that a limit of 1,000 calories per day was too restrictive for most people, but felt that the team could incorporate the positive aspects into a daily lifestyle. "This program was designed to be an awareness campaign that would lead people into making changes for a healthy lifestyle. Choices will be made every day; it is our hope those lifestyle choices taught through the lessons will make a difference in the long run." The lessons can be read on the Scalebackalabama.com Web site or viewed on the Alabama Department of Public Health's nutrition Web site pages (adph.org/nutrition).



Teams who were recognized for being in the top 10 in percentage weight loss were as follows: "Rehab Rebels," "Amight Peckish," "Get R Done Ton," "Middleweights," "Ben and the Beefcakes," "Norfolk Southern," "The Chili Bakers," "Belchers-Dropping It Like It's Hot," and "Dream Team #1."

More than 5,000 teams participated in the contest, representing most of the state's 67 counties. In the end, 2,100 teams participated in the final weigh in, losing a grand total of 78,000 pounds or 9,800 pounds per week.

State Health Officer Dr. Donald Williamson said, "The Scale Back Alabama program has drawn our attention to the fact that at least two-thirds of Alabamians are overweight or obese, and we must take action to address this growing problem. Weight issues today will drive up premature death rates for decades to come."

Alabama adults rank as second most obese in the nation, and extra weight can be a factor in increasing the risk of heart disease, diabetes and other life-altering conditions.

"We were overwhelmed with the number of teams participating and the tremendous feedback we've received," said Mike Horsley, president of the Alabama Hospital

continued on page 7







Birth Certificates, continued from page 1....

file and can generate reports for internal use.

The Center for Health Statistics also worked with the Department of Human Resources to incorporate their "Affidavit of Paternity" form in EVERS. The Affidavit of Paternity allows the father to be listed on the birth certificate when the mother is not married. Prior to EVERS, the Affidavit of Paternity was completed by hand by hospital staff. Sometimes the information on the Affidavit of Paternity was unreadable or it did not match the information on the birth certificate which would cause problems with the filing of the birth certificate. Incorporating this form into EVERS was a huge plus with the hospital birth clerks.

In addition to working with the Department of Human Resources, staff also worked with Newborn Screening staff and Immunization staff to incorporate the collection of information for these programs. This project would not have been such a success without the hard work of CSC staff. "Project manager Bill Myers along with Jane McMunn, David Long, Nace Taylor, and Frieda Addison did an excellent job of developing a system that meets our needs and is user friendly for hospital staff." said Dorothy Harshbarger, Director of the Center for Health Statistics. "They worked closely with Brenda Brugh and LaTarsha Shine of our staff who trained hospital users on the new system."

CSC and CHS staff are now working on the next phase of EVERS which is electronic death registration. This project is much more challenging, but one the staff is excited about working on.

For more information contact Cathy Molchan, director, Quality Assurance and Registration Division, Center for Health Statistics, the RSA Tower, Suite 1168, P.O. Box 303017, Montgomery, Ala. 36130-3017, (334) 206-2714, e-mail cmolchan@adph. state.al.us.

Wellness Check Changes the Life of Lawrence County Employee



School system employee Shree McCullough sent the following e-mail to Becky Gibson, R.N., Wellness Nurse, Public Health Area 2 on March 29.

Mrs. Becky Gibson,

Thank you for doing the wellness checks. I changed my life about four years ago. I was going yearly to my OB/GYN but other than that I didn't need a general doctor. I was healthy or so I thought. I wasn't overweight, I didn't smoke or anything else. I walked some for exercise and played with my small children. With my family history I should have known but in my mid-thirties I really wasn't worried yet.

Four years ago, I was at school and my sister-in-law talked me in to going to the wellness check. (She is the nurse over all the school nurses in our county.) I gave many excuses not to go... like I have already had breakfast, nobody to watch my class, and too many others to list. She watched my class and I went to the room where everything was set up. It was like being 5 and having to go to the lab at the doctor's office. They stuck my finger and ran the little test. I thought it was not too bad. That was until the results came in. My cholesterol was really bad. The bad was high and the good was way low.

I went to my OB/GYN and told him about the results, he ran the blood work. It was worse. He said I needed a general family doctor. I was lucky. Now my family doctor is also the doctor of my mom, dad and was my grandmother's until her death. He also knows about her family history as well. I am the fourth generation with a cholesterol problem. I exercise more, I eat better and try really hard to watch out for my family as well.

Did you ever wonder what could be found if more tests could be done in the screening? Thank you for the ones you do and for adding years to my life by helping me find this early. I am afraid of the damage that could have been done to my body, had this gone unchecked.

Mrs. Gibson, please share this with those that provide this service to the school system. I would like them to know how it has changed my life.

Scale Back, cont'd from page 5....

Association. "Many contestants have told us this has been a life-changing event and that they are dedicated to continuing the course toward a healthier lifestyle. It's just what we had envisioned."

After the campaign was announced on Jan. 4 at an event featuring former American Idol Ruben Studdard, teams formed and stepped on the scales at one of the official weigh-in sites located at 61 hospitals and many county health departments. Studdard's associate, Alvin Garrett, also spoke about healthy weight loss.

Scale Back classes were offered weekly to provide beneficial information and support. The weekly on demand webcasts dealt

with topics including the following:

- calorie awareness and portion control
- limiting fat by using seasonings
- physical activity and hydration
- fast supper meals
- emotional influences
- setbacks
- lifestyles for maintenance

"We asked participants to set a behavior goal, a food goal such as drinking skim milk or watching portion sizes, and a realistic physical activity goal that works for them," said Miriam Gaines, director of the Nutrition and Physical Activity Division, Alabama Department of Public Health "We wanted each person to set a realistic goal of getting healthier."

Some took up walking as individuals or

in groups, began taking the stairs instead of the elevator, and modified their eating habits to eat only when hungry. Many found a positive support group to provide encouragement on a long-term basis. Some experienced weight loss as a byproduct of their healthier lifestyles.

Scale Back Alabama did not endorse any specific type of diet or exercise program and did not promote rapid weight loss. The program advised anyone considering starting a weight-loss or exercise program to check with his or her health care provider first.

More information about the program is available at www.Scalebackalabama.com. A evaluation is available for participants on the site.



ROP Distribution explains the funds that make up your DROP account. A future article will explain how to apply for your DROP account funds and how they will be distributed. No distribution of DROP account funds will be made until you withdraw from service.

If you complete your contractual obligation in DROP, i.e., participate in DROP between three to five years, you may elect to receive the following funds in either a lump-sum payment or make a direct rollover to an eligible plan:

1. The monthly retirement allowance contributions plus interest (currently four percent). These contributions are based on the retirement option elected upon entering DROP.

2. Member contributions made to the ERS during the DROP participation period plus applicable interest.

The monthly retirement allowance you will receive after withdrawal from service may be recalculated to include accrued sick leave. However, the number of days converted cannot exceed the number of days you had on the date you entered DROP. You are not allowed to change the option for the monthly retirement allowance chosen at the beginning of the DROP participation period.

If you did not fulfill your contractual obligation due to involuntary termination, disability, or involuntary transfer of your spouse in the first three years of the DROP participation period, you are entitled to receive the same benefits as a member who has completed the contractual obligation. However, you will have fewer funds accumulated because the DROP participation period is shorter.

If you withdraw from service voluntarily

within the first three years of DROP, you will forfeit the DROP funds based on the monthly retirement benefits paid to your account. You may elect to receive the following in either a lump-sum payment or make a direct rollover to an eligible plan:

1. Member contributions made to the ERS during the DROP participation period plus applicable interest.

2. Interest attributable to the monthly retirement allowance contributions made to the DROP account during the DROP participation period.

The monthly retirement allowance you will receive after withdrawal from service may be recalculated to include accrued sick leave. However, the number of days converted cannot exceed the number of

continued on page 10

ADPH Webcast Technology: Live and On-Demand

Gince 1992, the Video Communications and Distance Learning Division has successfully utilized satellite technology to broadcast conferences to department employees and health partners throughout Alabama and across the country. And since 2004, the division has been incorporating a new and emerging distance learning technology: webcasting. This technology provides video and audio files to be delivered over the Internet. Department employees know that they can now actively participate in ADPH distance learning programs via satellite conference or webcast. These live and on-demand webcast programs are available on Real Player and Windows Media Player.

The integration of the webcast technology has been a partnership for the division working closely with the Computer Systems Center staff, both in networking the specialized video Helix servers and with the actual encoding of the live programs. Dawarris Johnson, a CSC employee works with the Video Communications staff to encode the satellite conferences for simultaneous webcast broadcast via the Internet.

"We have successfully piloted live webcasts with both common media players. This has been a great addition to the department's use of distance learning technologies because it increases our capacity to reach people who either don't have access to a satellite downlink or because they prefer participating in these programs at their desk and on their computer." Michael Smith, division director, explained. "It doesn't get much more convenient than that."

Division employee Robbin Fuqua works directly with the television production specialists to take the audio and video files and convert them to an on-demand webcast format. The division has the capacity to offer public programs for anyone, and also the capability to present programs only for people within the department. For example, Ms. Fuqua produced a series of highly specialized home health coding videos for the Bureau of Home and Community Services, and 10 short videos of Spanish words and phrases in order to help telephone receptionists in Health Statistics better assist Spanish speaking clients. These are available to health department employees through the Lotus Notes Document Library which can be accessed by employees at their convenience, any time, 24 hours a day, seven days a week.

As with all distance learning technology, webcasting allows for efficiency and economy in training. A complete listing of upcoming satellite and webcast conferences, as well as on-demand programs, are listed on the division's Web site at www.adph.org/alphtn.

Healthy Child Care Alabama CPR Training Enables Worker to Save Child's Life

ov. 22, 2006, the day before Thanksgiving, proved to be a frightening time at Kids R Kids Child Care Center in Selma. That is because a child's life hung in the balance, and a worker who had received cardiopulmonary resuscitation training tipped the scales to help save her life.

A 2-year-old began having a seizure and stopped breathing. At first there was a feeling of panic, but the child care providers sprung into action and immediately called 911, and then worker LaTorsha Johnson started administering CPR. The child's mother was also notified.

But there was a problem. Although the ambulance was less than 10 yards from the center, the paramedics' arrival was held up because of a train. Ms. Johnson continued CPR for 15 to 20 minutes as they waited for the train to pass and the ambulance to cross the tracks.

The child's mother arrived at the center at about the same time as emergency medical

services. The paramedics took over with positive results. The child is now fine and still attends the day care center.

Tracey England of the Bureau of Family Health Services heard the exciting story, which meant a lot to her since she was the CPR instructor who taught Ms. Johnson.

Felecia Jackson of Kids R Kids commented, "It was real scary, and we are so glad we learned CPR."





Flabama's hospitals and physicians joined the Alabama Department of Public Health and state legislators in calling for a statewide trauma system.

"The establishment of a statewide trauma system will move us toward our goal of ensuring that seriously injured people in any part of the state will be promptly transported to and treated at facilities with resources to care for their injuries," said Dr. Donald Williamson, state health officer. "While 90 percent of all injuries will continue to be appropriately treated in local community hospitals, creating a statewide system will ensure the severely injured 10 percent get the specialized care they need."

Dr. Williamson and other speakers stressed the importance of getting severely injured patients to appropriate care within one hour of the injury in order to save lives and ensure the best long-term quality of life for the patient. Officials added that trauma is the leading cause of death for Americans under 45 years of age and accounts for 73 percent of deaths for ages 15 to 24.

State Sen. Parker Griffith of Huntsville and Rep. Ron Johnson of Sylacauga are proposing legislation that would establish a statewide system to coordinate trauma care, with oversight for this system falling to the Alabama Department of Public Health. The bill also creates a statewide council that will work with regional councils to operate the system.

A trauma system is a coordinated system of care that includes emergency medical technicians, a trauma communications system, hospital emergency department staff, trauma surgeons and other physicians who provide the needed surgical and other care. In a trauma system, these providers would work together to determine the best possible course of action for the injured who are reported through the 911 system. Dr. Williamson cited the Birmingham trauma system as an example of how a coordinated effort can save lives. "The Birmingham Region started a trauma system in 1996, and in the next nine years more than 23,000 patients were treated for trauma," said Dr. Williamson. "During this time the Birmingham Region showed a 12 percent decrease in the death rate, while the rest of the state showed no improvement."

Health officials provided the following statistics as further evidence of the need for statewide coordination:

• Alabama has the fourth highest highway trauma death rate in the United States, according to statistics from the Centers for Disease Control and Prevention. Almost 80 percent of trauma results from motor vehicle crashes, with the death rate twice as high in rural versus urban areas of the state. In fact, in 2005 28 percent

continued on page 11

Motivational Interviewing Discussed at WIC Mutritional Education/Breastfeeding Promotion Workshop

The 2007 WIC Nutrition Education and Breastfeeding Promotion Workshop was held Jan. 25-26 in Montgomery. This workshop is offered annually to provide ongoing training in nutrition and breastfeeding to nurses and nutritionists who work in WIC.

The topics this year focused on motivational interviewing, breastfeeding, infant nutrition and feeding problems. Ninety-six nurses and nutritionists from throughout the state attended, and continuing education hours were provided for both groups.

For more information contact Michell Grainger, MSN, RNC, IBCLC, State Lactation Coordinator, WIC Division, Bureau of Family Health Services, (334) 206-5673.

Public Health Employee Walks for a Cure

his month Public Health employee Pauline Mallard will challenge herself by participating in the Country Music Marathon and Half Marathon on April 28 in Nashville, Tenn. But unlike many who walk for exercise or to lose weight, Mallard will be walking for a different reason. She will be taking part in the walk as a member of the Leukemia & Lymphoma Society's Team In Training in honor of some very special people who have been a part of her life.

On Mallard's Web site she states, "I'm completing this event in remembrance of my sister Ruth Thornton who succumbed from cancer in 1997 and Ceroy Bell in 2006. Also in memory of fellow state co-worker Mr. Samuel Moore. I am also completing this event to honor all individuals who are battling blood cancers. These people are the real heroes on our team, and we need your support to cross the ultimate finish line - a cure!"

Mallard's team is walking to raise funds to help stop leukemia, lymphoma, Hodgkin's disease and myeloma. The overall cure rate for leukemia has more than doubled in the past 30 years due to extensive research, but Mallard feels that until a cure is found, people must continue to support the efforts of researchers. The Leukemia & Lymphoma Society's Team In Training is the world's largest endurance sports training program. The program provides training to run or walk marathons and half marathons or participate in triathlons and century (100-mile) bike rides. Since 1988, more than 295,000 volunteer participants have helped raise more than \$660 million for leukemia, lymphoma and myeloma research and patient services.

The Country Music Marathon and Half Marathon is a marathon featuring more than 50 live bands along the course and a concert highlighting a major country music headliner. This year the headliner will be country music star Sara Evans. In addition, local high school cheerleading squads will cheer along the route to encourage walkers.

If you would like to make a contribution to support Mallard's walk, please visit http://www.active.com/donate/tntagc/ PMallard.

By TAKENYA TAYLOR

DROP, cont'd from page 7....

days you had on the date you entered DROP. You are not allowed to change the option for the monthly retirement allowance chosen at the beginning of the DROP participation period.

If a member dies anytime during the DROP participation period and the beneficiary is the spouse, the spouse may elect to receive the following funds in either a lump-sum payment or make a direct rollover to an eligible plan. Non-spouse beneficiary(s) may receive the following funds in a lump-sum payment or make a direct rollover to an IRA:

1. The monthly retirement allowance contributions plus interest (currently four percent). These contributions are based

on the retirement option elected upon entering DROP.

2. Member contributions made to the ERS during the DROP participation period plus applicable interest.

Any retirement benefit based on the retirement option selected by the member at the beginning of the DROP participation period will be paid to the beneficiary(s). The monthly retirement allowance may be recalculated to include accrued sick leave. However, the number of days converted cannot exceed the number of days the participant had on the date he or she entered DROP. The beneficiary is not allowed to change the option for the monthly retirement allowance chosen at the beginning of the DROP participation period. No death before retirement benefit will be paid to the estate or beneficiary.

If you do not withdraw from service after completing your DROP participation, you will resume active contributing membership in the ERS for the purpose of earning creditable service. No time spent participating in DROP will be counted as creditable service.

Prepared by the Communications staff of the Retirement Systems of Alabama. To have your questions answered in "Preparing for Retirement," please address them to:

Mike Pegues, Communications Retirement Systems of Alabama P.O. Box 302150 Montgomery, Ala. 36130-2150



Trauma System, continued from page 9....

of Alabama's motor vehicle crashes occurred in rural areas, yet they accounted for 69 percent of fatalities.

• The time between serious injury and receiving surgical care is the most important predictor of survival. This is called the "golden hour." Among the many challenges in rural trauma care are the limited resources available for that 10 percent of those whose injuries are severe. Real stabilization occurs in the operating room where bleeding is stopped and blood volume is restored.

• A trauma system will get the patients to the right hospital to take care of their injuries in the shortest possible time. Patients who are taken to a local hospital for initial stabilization can be transferred to the best hospital to care for their injuries with a single phone call. The system will coordinate all prehospital transports, such as air or ground, and uses computerization and around-the-clock staffing.

• Sixty million Americans are injured annually. Of these injured patients, 150,000 die, 9 million are disabled, and 300,000 are permanently disabled. As trauma is more commonly a disease of the young, it has a far greater impact and its cost (more than \$400 billion annually) is twice that of heart disease, stroke and cancer combined.

• The cost of trauma in Alabama for 2006 was estimated to be \$6.5 billion. This includes medical care, loss of wages, property damage, and other costs.



Delois Baxter Health Finance from Chuck Lail Montgomery, Ala.

Jackie Esty Center for Health Statistics from Emmitt Terrell Red Bank, N.J.

Public Health Area 1 Management Team

Northwest Subunit from Grover T. Wedgeworth Montgomery, Ala. Marguerite Coan Area 1 Home Health Director from Grover T. Wedgeworth Montgomery, Ala.

Arthur Rene Wright STD Division from Brenda Bridges, R.N. Tuscaloosa, Ala.

Kathie Peters Center for Health Statistics from Lizzie Cook Thomas Birmingham, Ala. Debra Tucker Falkville, Ala.

Area Nursing Directors Save a Life by Using CPR

wo area nursing directors were enjoying lunch at a nice restaurant in Tuscaloosa on March 5 when their presence and assistance proved to make the difference between life and death for a fellow diner.

The restaurant staff notified them that a woman was in distress. Fortunately, Pamela Moody, Public Health Area 3 nursing director, and Lori Bell, Public Health Area 6 nursing director, went over and quickly determined that the woman needed help, so they began performing cardiopulmonary resuscitation. They continued CPR until paramedics arrived on the scene.

Linda C. Robertson, Public Health Area 3 administrator, said, "No doubt they saved her life. They are both excellent role models for the nurses they supervise in their respective counties. While they were unnerved by the events, happily there was a good outcome from their efforts."

They were pleased to later learn that the woman had survived cardiac/respiratory failure.

ealth department employees who are listed here have received letters of commendation recently. To recognize other employees, please send letters through your supervisors or the state health officer to *Alabama's Health*.

Pam Barrett Tubeculosis Control from Tommy Hicks Anniston, Ala.

Veronica Moore-Whitfield Center for Health Statistics from Mary Brown

Átlanta, Ga.

Carissa Adams Robert Brantley Health Finance from Carol Mysinger Montgomery, Ala.



