Legislation passed in the Regular Session of the Alabama Legislature and signed by Gov. Bob Riley provides specific criteria for car seat and seat belt use by children in motor vehicles in Alabama.

The amended law, effective July 1, requires children up to age 15 to be in an appropriate restraint while riding in a vehicle. Specifically, children birth to 1 year of age or weighing 20 pounds or less must be restrained in a rear-facing infant or convertible child restraint (in the rear-facing position). Children between the ages of 1 year and 5 years old or children weighing between 20 and 40 pounds must be restrained in a convertible child restraint (in the forward-facing position) or a forward-facing-only child restraint. Children at least 5 years of age or 40 pounds to 6 years of age must be restrained in a booster seat. A safety belt is required from 6 years of age until 15 years of age.

“Motor vehicles” are considered to include passenger cars, pickup trucks, vans (with a seating capacity of 10 or less), minivans and sports utility vehicles.

According to Nancy Wright, assistant director of the Injury Prevention Division, Alabama Department of Public Health, “Parents want to ensure the safety of their children in motor vehicles. Under the old Alabama law, children could legally use seat belts. The amended law is closer to national guidelines and will aid in helping parents transport their children safely.”

Guidelines from the National Highway Traffic Safety Administration (NHTSA) state that seat belts do not properly fit young children, which can cause serious injury in the event of a motor vehicle crash. Children should be restrained in child safety seats or booster seats until the vehicle’s lap and shoulder belt fit correctly -- the lap portion of the belt rides low over the hips and the shoulder portion crosses the shoulder and chest. Children are usually ready for the adult seat belt when they can sit with their back against the seat with knees bent over the seat edge and their feet on the floor. Children 12 and under should sit in the vehicle’s back seat.

continued on page 8
Alabama’s Health

Mission
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.

Alabama’s Health is an official monthly publication of the Alabama Department of Public Health, Bureau of Health Promotion and Chronic Disease. If you would like to receive the publication or wish to submit information for future articles, please telephone requests to (334) 206-5300. Articles may be reprinted provided credit is given to the Alabama Department of Public Health. The department’s Web site is http://www.adph.org.

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July-August 2006

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Calendar of Events
By Marty Roney,
Montgomery Advertiser

The Montgomery Advertiser featured Marie Carastro, surveyor with the Bureau of Health Provider Standards, in an article published July 3. Marie F. Carastro, M.S., R.D., L.D., was recognized in 2002 for her 50 years’ membership in the American Dietetic Association and the Alabama Dietetic Association. Ms. Carastro has been employed with the department for the past 17 years.

For Marie and Susan Carastro, the family that flies together spends a lot of quality time together.

The mother-daughter duo recently completed the Air Race Classic, a 2,500-mile cross-country air race. The all-woman field involved contestants in 35 airplanes.

This is the fourth year the two have flown the race.

“We had a great time,” said Susan Carastro, 41, veterinarian from West Palm Beach, Fla., who specializes in ophthalmology. She earned her pilot’s license when she was 16.

“We didn’t do as well this year as we have in the past. We came in 25th out of 35. We had a new airplane, a Cessna 182. There was a lot of mountain flying on this route, and you don’t have much of that in Florida and central Alabama. There were some teams with more experience mountain flying. But I wouldn’t have traded the race for anything.”

Marie Carastro of Montgomery earned her pilot’s license in 1957. She works at the Alabama Department of Public Health, where she inspects nursing homes and hospitals. During the race, the two swapped pilot and navigating duties.

“My brother went into the Air Force and I was working at the VA hospital,” Marie Carastro said of her early interest in flying. “There was a pharmacist there who got me interested in flying. I took lessons and bought an airplane.”

The four-day race took the fliers east from Phoenix, Ariz., to Louisiana then north to Menominee, Mich.

The Carastro clan is comfortable in the cockpit.

Bob and Marie Carastro taught Susan and her brother, Michael James, to fly at an early age. Bob is a former Air Force pilot. Michael James had his pilot’s license before his driver’s license. A commercial pilot, he has flown with Lufthansa and now works with Montgomery Jet. The elder Carastro flew for the state game department and was the director of Air Transportation and transferred to the Bureau of Aeronautics where he inspects helicopter pads. He has flown every governor from George Wallace to Don Siegelman.

“Flying has just always been something we have been interested in,” said Marie Carastro. “The boys seem to talk about it more. Susan and I love flying together. We’ve never had a cross word. We noticed some of the other teams didn’t seem to get along that well. She’s a very special daughter. Otherwise, she would ask someone else to fly with her.”

Susan Carastro wouldn’t have it any other way. Once a month she flies to Prattville to consult at Cobbs Ford Pet Health Center. She’s single- and multi-engine rated, and has put in some “fun time” in jets, compliments of her dad and brother.

“Mom is my hero,” Susan Carastro said. “I’ve learned so much from her. In a cockpit it’s just you and the other person. It makes the trip much more pleasant when you get along.”
For almost two years Richard Peterson has worked as a special investigator with the Bureau of Health Provider Standards, checking into complaints ranging from abuse and neglect to misappropriation of funds at nursing homes and other licensed facilities. But in September 2004, he played a pivotal role in the arrest and subsequent conviction of the so-called “Schoolgirl Rapist” in Rochester, N.Y.

At the time, Peterson worked as the chief investigator with the Clayton Police Department in Barbour County. A young woman was raped in the Clayton-Eufaula area. Fortunately, the victim reported the rape, and all the necessary follow-up was conducted, which included collecting DNA samples. The victim could give a good description of her attacker, so Peterson ran several follow-up leads over a seven-day period.

Peterson brought in a suspect for questioning and a lineup. Oddly enough, Peterson had known the suspect when both were children in Eufaula, but their lives had taken different turns in adolescence. At the lineup, the victim immediately identified the suspect as her attacker.

Believing that rapists seldom rape only once, Peterson believed that the suspect might have been involved in some unsolved rapes in Montgomery. Peterson personally collected and delivered DNA samples from the alleged perpetrator to the Department of Forensic Science in Montgomery.

After Forensic Sciences ran the DNA test on a nationwide search, it was found that this suspect’s DNA matched evidence which had been collected from five young girls who had been raped in Rochester, N.Y., 12 years earlier. The Rochester district attorney had used a “John Doe indictment” to give law enforcement officials the time they needed to track down the rapist before the statute of limitations expired.

Thanks to Peterson’s work, the cases were connected. As a result of their efforts, the rapist was prosecuted and sentenced to 85 years in prison.

On April 9 the crew from Cold Case Files spent seven hours interviewing and filming Peterson for the program which aired on July 8 on the Arts and Entertainment Network. On the hour-long program several victims expressed their gratitude that their attacker had been found and prosecuted.

Colleagues from the Complaint Division congratulated Peterson “for having his diligent police work recognized nationally.” Peterson has more than 20 years of law enforcement experience which he applies in health department investigations.

Last year the bureau’s Complaint Division investigated 922 abuse and neglect and general complaints from the public concerning health care facilities.
Vanessa Forest and Valencia Pernell of the Bureau of Family Health Services came up with a way to have fun and boost morale within the bureau. With the support and participation of bureau leadership, they pulled together a collage in which employees could bring in baby and childhood photos of themselves to post on the “When I was Younger” bulletin board outside their work stations on the 13th floor of the RSA Tower.

A special feature of the bulletin board is that excerpts from the students’ report cards were attached to the display, giving additional clues to the young lasses’ and lads’ identities. Employees then made their guesses of the names of the cherubs and youngsters featured. To the delight and surprise of the staff, they then revealed the names of the employees along with the photos.

Mrs. Pernell said, “This has been a fulfilling accomplishment that wouldn’t have been successful without your help. A special thanks to Chris Haag and Dr. Miller for supporting this quest for unity! Their approval played a major role in this endeavor. Kudos!”

Tobacco Prevention Grants Serve Communities

The Alabama Department of Public Health has awarded 17 agencies with Youth Tobacco Prevention and Control grants. The grants are to raise awareness of the dangers of environmental tobacco smoke and the availability of tobacco to under-aged youth thereby reducing youth tobacco use and consumption.

Grantees for 2006 are as follows:

- Acts of Kindness, Inc.
- Circle of Care Center for Families
- Concern for Children
- DeKalb County Board of Education
- East Alabama Mental Health Center
- Family Connection, Inc.
- FIRST Family Service Center
- Franklin County Board of Education
- Gadsden City Schools
- Gateway
- Geneva County Children’s Policy Council
- Lauderdale County Board of Education
- Mobile County Health Department Teen Center
- Partnership for a Drug-Free Community
- PRIDE of Tuscaloosa
- SpectraCare
- Walker County Children’s Policy Council
Alabama was among just five states in the nation to score a B plus in its policy efforts to improve school nutrition in a study conducted by the Center for Science in the Public Interest in Washington, D.C.

The study looked at school policies for foods and drinks sold in vending machines, school stores and fundraisers. All 50 states and the District of Columbia were studied. The ranking gave 23 other states failing grades.

The state fared well because in the upcoming school year students cannot buy food from vending machines or fundraisers during lunch periods. Carbonated drinks are not allowed at elementary schools, while middle schools can only include carbonated drinks as 30 percent of a machine’s selections. High schools can offer up to 50 percent.

Miriam Gaines, director of the Nutrition and Physical Activity Division, Bureau of Professional and Support Services, served as a member of that committee. She said, “Schools are very important in our efforts to address children. We know that schools cannot be expected to address this issue by themselves. It will definitely take all of us working together. That includes parents and grandparents as well as schools, churches, community programs, and the community in general.”

Students buying snacks from school vending machines will find healthy selections in Alabama this school year which will restrict choices of “junk food” and sugared, carbonated drinks.

“The committee was very pleased that the school environment will support what is being taught in the classroom,” Ms. Gaines added. “If the student learns about good nutrition in the class, but goes out in the hall to purchase unhealthy foods, we have to wonder what message the student receives.”

continued on page 7

Commendations

Health 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.

Linda Bolding
Center for Health Statistics
from Rodney J. Thomas
Montgomery, Ala.

Jane Cheeks
HIV/AIDS
from U.S. Sen. Jeff Sessions
Washington, D.C.

Jessica Hardy, R.N., M.P.H.
Professional and Support Services
from Dalton Paxman, Ph.D.

Ted Johnson
Center for Health Statistics
from Johnnie Pollard
Carrollton, Ga.

Nicole Henderson and the Staff of Vital Records
Center for Health Statistics
from John Wilson
Sharonville, Ohio

Wayne Dubose
Health Provider Standards
from Patti Wallace
Montgomery, Ala.

Kalai Mugilan
Center for Health Statistics
from Amber Paulk
Auburn, Ala.

Theresa Mulkey
Center for Health Statistics
from Valarie N Hutchinson
Anniston, Ala.

LaShunda Tellis
Center for Health Statistics
from Dorothy Porter
Catron, Mo.

Charlese Wright
Center for Health Statistics
from Watkins Johnson
Montgomery, Ala.
Alabama’s teen pregnancy rate declined in all age groups, especially among those women under age 18, between 1994 and 2004. The department’s Center for Health Statistics provided the following numbers and rates:

**Number of teen pregnancies**

<table>
<thead>
<tr>
<th></th>
<th>10-14</th>
<th>15-17</th>
<th>18-19</th>
<th>all teens</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>641</td>
<td>6807</td>
<td>9795</td>
<td>17,243</td>
</tr>
<tr>
<td>2004</td>
<td>302</td>
<td>3893</td>
<td>7800</td>
<td>11,995</td>
</tr>
</tbody>
</table>

**Rates per 1,000 females**

<table>
<thead>
<tr>
<th></th>
<th>10-14</th>
<th>15-17</th>
<th>18-19</th>
<th>all teens</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>4.5</td>
<td>75.7</td>
<td>163.3</td>
<td>58.7</td>
</tr>
<tr>
<td>2004</td>
<td>2.0</td>
<td>41.9</td>
<td>125.8</td>
<td>49.4</td>
</tr>
</tbody>
</table>

Susan Stewart, R.N., M.S.N., director, Alabama Abstinence–Until-Marriage Education Program, said, “Through combined efforts, significant progress has been made in reducing Alabama’s teen pregnancy rate. Therefore, it is important to intensify our efforts and continue to work together to address the enormous problems faced by the state’s citizens as a result of out-of-wedlock sexual activity among adolescents (i.e., sexually transmitted disease, teen births, teen abortions).”

**A Public Health Success Story: Reducing Teen Pregnancy**

Annie Conn, Public Health Area 9
Barbara Dennis, Autauga County Health Department
Claire DiLaura, Computer Systems Center
Maxie Fleming, STD Division
Lucy Gallman, Sumter County Health Department
Pauline Lowery, Conecuh County Health Department
Catherine Shelton, Lawrence County Health Department
Lucille Steele, Autauga County Health Department
Phyllis Free, Cherokee County Health Department
Jewell Hall, DeKalb County Health Department
Tammi Hood, Lawrence County Health Department
Anita Sanford, Professional and Support Services
Charles Stewart, Family Health Services
Jettie White, Clarke County Health Department
Phillip Wright, Franklin County Health Department

The following employees of the department have retired recently:

**Retirees**

June
Annie Conn,
Public Health Area 9
Barbara Dennis,
Autauga County Health Department
Claire DiLaura,
Computer Systems Center
Maxie Fleming,
STD Division
Lucy Gallman,
Sumter County Health Department
Pauline Lowery,
Conecuh County Health Department
Catherine Shelton,
Lawrence County Health Department
Lucille Steele,
Autauga County Health Department

July
Phyllis Free,
Cherokee County Health Department
Jewell Hall,
DeKalb County Health Department
Tammi Hood,
Lawrence County Health Department
Anita Sanford,
Professional and Support Services
Charles Stewart,
Family Health Services
Jettie White,
Clarke County Health Department
Phillip Wright,
Franklin County Health Department

Vending machines, continued from page 6....

Alabama consistently has a high rate of child and adult obesity. Both obesity and overweight are strongly related to heart disease, stroke, diabetes and other chronic diseases.

Alabama’s policies grew from a 2004 committee created by the State Board of Education in response to a series of studies that pointed to serious obesity-related health problems across the state. Ron Sparks, commissioner of the Department of Agriculture and Industries, served as chairman of the Nutrition Sub-Committee of the State Obesity Task Force.

In a news release Sparks recently commended State Superintendent of Education, Dr. Joseph Morton, the State Board of Education and fellow committee members for taking the necessary steps to assure children’s health. He also commended industry and vendors for taking a positive role in helping children by providing healthy alternatives in school vending machines.

**Vending machines, continued from page 6....**
Under the amended law, the fine imposed on violators is $25. A portion of the fine will be used to distribute vouchers for size-appropriate child passenger restraint systems to families of limited income. To identify habitually negligent drivers, the Alabama Department of Public Safety will assess a 1 point penalty for the first offense and 2 points for the second or subsequent offenses.

For more information on appropriate use of seat belts and child restraints, or to find a trained car seat technician in your area, please visit the Alabama Department of Public Health’s Web site at www.adph.org/injuryprevention.
Breastfeeding Can Reduce Infant Infections and Health Care Costs

During August, Breastfeeding Awareness Month, a variety of stakeholders in Alabama and the nation are coming out in support of breastfeeding which offers natural health benefits to both mother and child.

Breastfeeding is important because research has shown that it supports optimal growth and it provides lifelong advantages to infants and their mothers. Infants who are not breastfed are more likely to experience more frequent infections and other health problems such as an increased risk for childhood-onset diabetes and obesity. Breastfeeding mothers have a lower incidence of osteoporosis, breast cancer and other health-related risks.

The Medical Association of the State of Alabama has adopted a resolution in support of breastfeeding. Along with colleagues in the American Academy of Pediatrics, Alabama Chapter, and the Alabama Section of the American College of Obstetricians and Gynecologists. These physician groups have established a State Breastfeeding Committee.

The committee’s objectives are to institute measures to improve the breastfeeding rate, especially for Medicaid infants, through provider and public education activities. Promotion and support must be addressed aggressively by all providers to ensure that infants and mothers receive the many benefits of breastfeeding.

Dr. Donald Williamson, state health officer, said, “We are pleased that the percentage of mothers in Alabama who initiate breastfeeding has increased to 58 percent, up from 43 percent 10 years ago. Although the initiation rate has increased, Alabama continues to rank near the bottom in comparison to other states.”

“The Alabama Legislature recently affirmed mothers’ rights to breastfeed in public places with the passage of a law sponsored by State Rep. Laura Hall of Huntsville. Regional breastfeeding committees and a combination of other grassroots organizations have worked to ensure a mother can breastfeed in public without fear of retribution.

“We encourage Alabama employers to allow breastfeeding in their workplace,” Williamson stated. “Benefits include lower health care costs amounting to $400 per baby over the first year as well as reduced absenteeism and higher morale. A lack of support in breaking barriers to breastfeeding also affects breastfeeding duration rates.”

The Alabama Department of Public Health is celebrating Breastfeeding Awareness Month with the placement of billboards thanking mothers who breastfed their babies. The Supplemental Nutrition Program for Women, Infants and Children (WIC) has led the department in the support of breastfeeding mothers for more than 25 years.

WIC provides prenatal counseling on the benefits of breastfeeding, breastfeeding supplies and pumps, and allows breastfeeding mothers to continue to receive benefits for up to one year after the baby’s birth if the mother continues to breastfeed.

Last year, WIC began a breastfeeding peer counseling program in three pilot counties. In less than one year, these counties have seen significant increases in breastfeeding rates in their WIC population.

The peer counseling program employs present or former WIC participants who have breastfed their babies. After extensive training, these counselors can provide continued on page 11
Health department employees should take the lead

All Alabama Department of Public Health staff provide a vital role in public health emergencies and are considered “essential” employees who are to report to duty in emergencies including hurricanes, ice storms, epidemics, pandemics and manmade disasters. Now that hurricane season is underway, each of us needs to take time now to make sure our own families are ready should an emergency occur.

The department has made plans for 22 county teams, 5 state medical needs teams and 5 RSA Tower administrative teams who are ready to deploy to shelters and for other duties. The department has identified 16 permanent medical needs shelter sites that are situated in safe, secure and structurally sound buildings which have generators. These medical needs shelters can be opened quickly, and have adequate heat during winter and air conditioning during summer. Nursing, clerical and social work kits are assembled and ready to go when called.

“Be prepared for anything you can be prepared for, and hope for the best,” advised John Hankins, director of the Nursing Division. “We want everyone to work with compassion and empathy and to let each person affected know they are cared about. We especially want employees to know that we will not place them or anyone else in harm’s way.”

To help ensure that we are all prepared and comfortable about our response in emergencies and not to panic in these times, there are some preparations all employees should be making if they haven’t done so already. To help others, we must first be prepared ourselves, without, for example, having to wait in the inevitable long lines for batteries, gasoline, bottled water and other supplies when word of an approaching crisis reaches us.

Acknowledging that a real need for preparedness exists, a May satellite conference discussed the multiple issues surrounding preparations and expectations for all employees during emergencies. The satellite training pointed out that operating medical needs shelters is a new responsibility for the department under a recently enacted Alabama law, passed in the wake of hurricanes Ivan and Katrina. Employees who missed this conference may view it at www.adph.org.

Checking your lists?

One important step in preparedness is to take steps to ensure that your family and home environment are ready for emergencies. Have you purchased the supplies for and assembled your kit yet? A checklist of the necessary items you should have is available under the LotusNotes Document Library under Emergency Preparedness (and printed in the box at right). Another good practical resource is the department’s Family Readiness Guide, found at www.adph.org/emergencypreparedness. Some excerpts from the guide are printed here.

Evaluate what your family needs. Water is essential for life, and each person should have set aside one liter for drinking water and one liter of water for hygiene each day. Other steps should be taken immediately before the storm, such as filling bathtubs and washing machines with water.

Thresa Dix reminds public health employees and the public to have items on hand for their own homes, such as heavy duty Duct tape, heavy plastic wrap and several pieces of plywood in case you need to make minor repairs to your home after the storm.

Hankins concluded, “We care deeply about our employees and realize that fear of the unknown is to be expected. We have a common purpose and we want to recognize any fears we have. We are hopeful that our training will build confidence in the event that we need to mobilize.”

Create a family emergency preparedness plan

Many types of emergencies happen quickly and with little or no warning. You might have to leave your neighborhood or be confined to your home. By being prepared you can help prevent or reduce harm to your family, yourself and others.

Creating an emergency preparedness plan in advance can help your family respond quickly and more effectively. All family members should help prepare the plan and assist in assembling a basic emergency response kit so that all required individual items will be included.

In creating your plan and kit, take time to consider those with special needs. These can include elderly family members,
infants and children, family members with physical and mental disabilities, and pets.

Reviewing and maintaining your plan is just as important as creating one. Review your plan each year or during peak disaster seasons, such as hurricane season. Be sure to review your needs and update your emergency kit as family needs change. Review and update all contact information and documentation.

Families should meet to discuss why you need to prepare for emergency situations and plan to share responsibilities and work together as a team. Pick two places to meet; one just outside your home in case of fire or other sudden emergency and the other outside your neighborhood in case you cannot return home. Everyone should know where this meeting place is located and a phone number there. Make sure everyone has a copy of the plan that is easy to find.

If you are planning to evacuate during an emergency, decide on transportation, allow plenty of time to evacuate, have your basic emergency kit ready to travel, and secure your home. This means locking up your home and unplugging small appliances.

Contact your utility companies to learn how to turn off utilities properly, and ask what is required to have them turned on again. This is good information to know in advance.

Those people planning to go to a designated emergency shelter should remember:

- Decide beforehand where you will seek shelter and have a designated meeting place
- Take your emergency supply kit with you so that your family will have the supplies that they will need at the shelter
- Be considerate and helpful to others in the shelter. Practice the basic principles of disease control and follow any specific shelter instructions.
- Register upon arrival at the shelter and establish a designated meeting place within the shelter site for your family
- Remain at the shelter until authorities say it is safe to leave.

Other useful information about emergency preparedness and other health concerns is available by visiting the Alabama Department of Public Health Web site at www.adph.org/cep.

These are items you should bring to a shelter:
- ADPH name badge
- Appropriate license
- Cell phone and charger
- Back-up phone number if towers go out
- One gallon of water per day
- High protein/emergency snacks (diet appropriate snacks)
- Comfort foods, plastic utensils
- Clothing items such as Jeans
  T-shirts
  Scrubs,
- Light jacket (place in zippered bags, enough for 7 days)
- Extra pair of shoes
- Hand wipes in zippered plastic bags
- Sleeping bag/air mattress/pillow
- Soap/spray deodorant (not roll on)
- Towels/washcloths
- Personal care items
- Medications (prescribed and over-the-counter)
- Flashlight with extra batteries
- Earplugs
- Clip board or box to hold papers and pens
- Photo of family/journal for writing

Breastfeeding, continued from page 6....

support to pregnant and postpartum mothers regarding breastfeeding. Plans to expand the program to other counties are underway.

The State Perinatal Program provides breastfeeding continuing education workshops to private physicians and their office staffs and to maternity hospitals statewide.

The Healthy People 2010 objectives of the U.S. Department of Health and Human Services are as follows:
- To have at least 75 percent of mothers breastfeed their infants in the early postpartum period.
- To have 50 percent continue breastfeeding through 6 months of age.
- For 25 percent to continue breastfeeding at 1 year of age.

For more information contact Michell Grainger, M.S.N., R.N.C., I.B.C.L.C., State Lactation Coordinator, WIC Program, Bureau of Family Health Services, at (334) 206-5673, mgrainger@adph.state.al.us.
**August 10**  
Satellite Conf & Web Cast  
Applications of North Carolina’s GIS for Agriculture Emergencies  
12-1:30 p.m.  
For more information contact Video Communications, (334) 206-5618.

**August 29**  
Satellite Conf & Web Cast  
Staffing for Emergency Response and Recovery  
12-1:30 p.m.  
For more information contact Video Communications, (334) 206-5618.

**September 6**  
Satellite Conf & Web Cast  
Flu Mist  
For more information contact Video Communications, (334) 206-5618.

**September 7**  
Satellite Conf & Web Cast  
Home Delivered Meals, 10 a.m.-12 noon  
For more information contact Video Communications, (334) 206-5618.

**September 27**  
Satellite Conf & Web Cast  
Home Health Aides/Attendants, 2-4 p.m.  
For more information contact Brenda Elliott, (334) 347-2664, ext. 402.

**October 5**  
Satellite Conf & Web Cast  
ADPH Statewide Staff Meeting, 3-4 p.m.  
For more information contact Video Communications, (334) 206-5618.

**October 20**  
Satellite Conf & Web Cast  
Collaboration and Conflict Resolution for Success in Public Health  
For more information contact Video Communications, (334) 206-5618.

**October 25**  
Satellite Conf & Web Cast  
Title X Family Planning Training  
For more information contact Video Communications, (334) 206-5618.

**October 26**  
Satellite Conf & Web Cast  
Ensuring Quality in the Collaborative Practice Agreement, 10 a.m.-12 noon  
For more information contact Diane Oetting (334) 954-2500.

**November 1**  
Satellite Conf & Web Cast  
Home Health Aides/Attendants, 2-4 p.m.  
For more information contact Brenda Elliott, (334) 347-2664 ext. 402.