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Charlton Prather: Well, Mr. Jeff Ragan, let me say thank you for your willingness to come this morning.

Jeff Ragan: My pleasure.

CP: And for our viewers, we have with us Mr. Jeff D. Ragan, a long-time Director of Environmental Health for Sarasota County and a long-time advocate of the matters of the public's health and its environment. As an employee and fellow worker in Florida's public health system, has spent essentially his entire professional life in environmental health and has seen a lot of the evolving history of Florida's public health through his work there and his involvement with the statewide program. Mr. Ragan, it's a pleasure to welcome you, and I thank you for your willingness to come.

JR: Thank you.

CP: What in the world got you interested in public health?

JR: Well, when I got out of college—I didn't get out of college—when I got out of high school, I wanted to get into some type of work that I felt would be important and something that I could make a difference. And also, I guess, I was a little bit selfish, that I wanted to find some kind of work that would be a retirement system and had some benefits, although I knew that getting into state work was very underpaid at that time. I think the salary was about 175 dollars a month.

CP: Oops, oops, oops.

JR: I could have done better, but I tried getting into the post office, and they had so many applicants there, and they were taking the higher ones, and there just weren't that many jobs. Plus, the fact is, as you probably know, my father, John L. Ragan Sr., was with the Manatee County Health Department.

He was the director there for a while until they had a health officer; he was a pharmacist so they did call him doctor, by the fact that he was a pharmacist. He had been in that many years, and my brother John—oldest brother John, who is deceased now—worked for the Lake County Health Department in Tavares.

CP: Yes.

JR: And he worked there 25 years and retired. And then my brother Walt, who was in the service, and he went through the GI Bill¹, he got a degree in sanitary engineering. And he then worked for the state board of health before he went with the federal government, in which, as you know, David B. Lee² and Bert Wish was up there at that particular time.

CP: Yes.

JR: So, basically, I had a background in environmental health or a health department.

CP: You surely did, a whole family worth of it.

JR: Yes, Walt's wife was a schoolteacher, and my mother's a schoolteacher, and John's wife was a schoolteacher. Although, my wife, Juanita, was a nurse, so that had a background in public health as well. At that particular time, as you know, you had to write up, put your application in to the state board of health, which was then in Jacksonville, and then you had to go up for an interview.

¹The GI Bill is a law instituted in 1944 that assisted returning World War II vets in getting various benefits, including payments to attend university, vocational school, or high school.

²David B. Lee served as Chief Engineer of the Bureau of Sanitary Engineering with the state board of health; since 1964, the Florida Water and Pollution Control Operators Association has annually presented an award in Mr. Lee's name to a public plant operator who excels in several criteria.

When I went up for an interview, naturally, I was only 20 years old and scared. And Dr. Sowder³, naturally—was more or less chairman of the panel in all of his department or bureau chief—was there to ask you questions, and what you wanted to do, why you wanted to do this, why you wanted to be in public health.

And so, fortunately, I got a letter back, saying I was approved to go to school. And at that time, they had a three-month environmental health course in Gainesville with the Alachua County Health Department in cooperation with the University of Florida and then the state board of health in Jacksonville where the laboratory facility is, which I think Hugh Butner⁴ and Mrs. Jefferies headed that.

So that was quite a course and quite an experience there with Dr. Hall. And a lot of the consultants from the state board of health came down and helped in. And at that time, they built the privies⁵ in the health unit and sold them, or gave them to people that couldn't afford a septic tank system.⁶ So we had that as part of our project. And I think it was about ten in our class, and most of them in the training class, or study, were already in the county health unit or county health departments.

CP: They were already employed and were working.

JR: And they sent them to school to, I guess, better their training, and they were paid full salary, whereas I only had a stipend of 150 dollars, and then they paid for the travel back and forth. But when I got out, there wasn't that many jobs because jobs weren't that plentiful. And most of them, as I said, were already employed; the other few we had, they went to different places.

So mine was—I started school in April of '49 and got out in January of '49. And then they had an opening up in Live Oak, halfway between Lake City and Tallahassee. And that was a very rural area, to say the least. And at that time, the county public health units, some had, or health departments, had one county, some had two counties, and some had three counties in their jurisdiction.

³Dr. Wilson T. Sowder was a prominent figure in Florida's public health system for over 30 years. His dedication to Florida's health began in the 1940s, when he served as a venereal disease control officer with the US Public Health Service. Under his tenure as a Florida state health officer, he developed health departments in each of Florida's counties. Dr. Sowder was interviewed as part of the Florida Public Health Oral History Project on June 24, 1997.

⁴Hugh F. Butner was a Sanitary Microbiologist with the state board of health.

⁵A privy is a synonym for an outhouse.

⁶Septic systems are small-scale sewage treatment systems in areas that lack direct access to main sewage pipes provided by the local governments or private corporations.

Suwannee County was Dixie and Lafayette and the Suwannee; and I think Dr. Johns was the health director there. And I worked there for three or four months, broadening my education and training. And that was—

CP: Was there another sanitarian⁷ there?

JR: There was. Uh, Mr. Young was sanitarian in the Suwannee, and I think he had one in each of the other counties, so there were three total. And budgets then were very, I guess, minimum, and they didn't have that much equipment. Enforcement was somewhat difficult or impossible; most of the people were local, and they tried to work with people.

I had some experience along that line; somebody had complained about one of the county commissioners up there, about a trailer park, and I was going to investigate it, and then they thought, maybe, that they should talk to the person first. So you learn, I guess, that you don't go charging out to the situation, although I was trying to do a good job and do it the right way, the way I was trained.

And also, I wanted to benefit myself, and I had filled an application for registered sanitarian, the national association⁸ over in Denver, and I sent in that, became a registered sanitarian, which a lot of the individuals didn't do. I think that Fred Safay was the consultant in that area, and I think that he was a retired general that was up in that area, who was the regional consultant in environmental health matters.

But I didn't stay there that long, and from there I, naturally, wanted to get back closer to Manatee County and Bradenton. So there was an opening in Pinellas County, one of the men that was in the—two of the men that was in the training course—one of them was Bert Williams; he was supervisor of the food program, and Lyle Chaffee was supervisor of the milk program.

So I knew Mr. Williams. And when something came up, I applied down there; then they asked me to come down for an interview. And Alan Henry then was the sanitarian engineer in charge of the department; it was in an old schoolhouse building downtown, by the City Hall, which needed a lot of repairs.

CP: (laughs) I remember that building.

⁷Sanitarians, or environmental health officers, are public health workers that specialize in the inspection and enforcement of laws pertaining to food services, water/air pollution, and sewage control.

⁸Mr. Ragan is referring to the credentialing process offered to sanitarians by the National Environmental Health Association. For sanitarians/environmental health specialists, the credential is known as REHS/RS.

JR: Yeah. And so, when I got there, they said, “Well, we really have an opening for somebody.” They had passed the city ordinance for beauty parlors and barbershops, and they thought maybe I might want to do that. And I said, “Well, I’ll be happy to do whatever you tell me to do, but I prefer not to get into barber shops and beauty parlors,” especially beauty parlors, being I was only 20 going on 21, that I thought they’d need somebody with a little bit more maturity to work with the cosmetologists.

And one of the gentlemen there, Mr. Pritchard, said he’d be happy to do that. He wasn’t that old, I would say he was probably 35, 36, but he had coal grey hair, very distinguished person, and he said he’d do that. So I got into the food program there and worked in that for about six or seven years; worked my way up as the assistant supervisor for the food program. And naturally, I still wanted to get down closer to home, be it Manatee or Sarasota County.

And unfortunately, when the time comes, Mr. Williams retired. I assumed—and you should never assume; that’s what my wife tells me anyway—when the time comes to make a promotion, that time Mr. Henry left to go over to the city to get a better job there with the public works⁹. And they brought in a Mr. Dunn, who was the engineer, to be over environmental health, and he in turn brought one of his friends down, where he was from, to be the food supervisor, and nobody told me.

CP: Oh boy.

JR: So when he came in, and I introduced myself, he said he was the new food supervisor. And I said, “Oh, is that right?” And he said, “Yeah.” And, naturally, I asked what kind of qualifications do you have and this, that, and the other. And so I went to Dr. Ballard, who was the health director there and told him my problem and told him that I was very disappointed, and I didn’t think it was very fair.

And he said he agreed with me, but he said, “I don’t interfere with my department head, and Mr. Dunn had made a decision, and, therefore, there’s not very little I can do.” He said, “I can give you—we can give you a raise, give you a little bit more money.” And I said, “No, it’s the principle of the thing with me. A raise would be nice, but why would it take something like this to give me a raise? Why wouldn’t I get it on my merit?”

And at that time, they did have, as you know, a state merit system, different from they have now from personnel; where you had to take examinations, and they had different levels and different qualifications.

⁹Public works is a general department found in many states that specialize in a broad category of infrastructure projects that are financed by the state.

CP: Yes, I remember them.

JR: In the beginning, they didn't require any education to get in environmental health with the health department.

CP: College education that is, yeah.

JR: And then later on they required that you had to have a degree, but unfortunately—I guess as a step in the right direction—they didn't say what the degree had to be in, so you could have a degree in forestry; you could have a degree in public relations; you could have a degree in just about anything, and it had nothing to do with public health.

And then, later on, they required a college degree or training or training plus a college degree. If you had three or four years of experience, would substitutes so many years for the college degree—or college work and what have you. And now, naturally, it is more strict than what it should be, and they have more certification.

And I think that is very, very excellent. In St. Pete, as I said, I specialized in food. I worked most all of the districts, and we had some food handlers' training programs then started. And then I was in the area for Gulf Coast Conferences, and I got elected as chairman of that in environmental health.

And I had written to Manatee County to see if I could transfer down in there, and that was Dr. Neil was there then. Although, Dr. Wright was the first health director there in Manatee County, and he split his time between that and Sarasota. So when Dr. Neil was there, Dr. Wright was in Sarasota County. So I wrote—

CP: Which Neil was this? John?

JR: I think it was John Neil. He went up north somewhere to a job, and his administrator went with him.

CP: Yes, and I'm having some trouble, but he did—from Manatee, yeah.

JR: Right, I think he, from Manatee, came to Hillsborough County, Dr. Neil did, as health director at that time. But anyway, he and my father didn't get along that well, and when I wrote to apply—because I guess my father had been there so long when he came in. And I guess maybe there was a little bit of friction there, so naturally, he didn't want me working there. But, however, when I work for somebody, I work for them.

I will give them the benefit of my experience from my comments, but whatever the last word is, that's the way it's going to be. I've certainly never been insubordinate with anybody. And in all the years I worked for the health department, I don't think there's anything in my personnel file that has any reprimand or anything derogatory, even though I got, I think, about three or four files, about that thick—

CP: Of personnel papers?

JR: —right down in the district office. So then I wrote to Dr. Wright in Sarasota County, and he was expanding there. They had some extra work that they wanted to do, mainly in subdivisions where they were doing test holes, percolation tests¹⁰ about septic tanks, and whether or not the soil was suitable. So he said that he would like for me to come down and work for him as a field supervisor—

CP: Oh good.

JR: —because he had met me through the conferences.

CP: So let me interrupt, what's the Gulf Coast Conference that you—

JR: Gulf Coast Health Conference, it covers ten counties, and it covers the health directors and nurses, environmental specialists, clerks, and all; and every quarter they would meet and exchange information and ideas and just have a one-day seminar, and they would meet at different places. And so through that is what, I guess, maybe caught Dr. Wright's eye when I was chairman of that; we got to know each other.

CP: Very good, very good. All right, thanks for that little pearl.

JR: Right, so before I came down to—I went down to interview with Dr. Wright; that's W.L. Wright, as you know, he went up to be—

¹⁰Percolation tests are used to determine if the soil in an area is suitable for the building of a septic system.

CP: Local.

JR: —local, director of local health services of, bureau of local health services. It doesn't exist now, more or less.

CP: Doesn't exist at all; no remnant of it at all.

JR: That's true. And so he wanted me to get some experience because I did food and dairy work and pasteurization plants and subdivisions and septic tanks and some of the other programs. Since in bigger counties, as you know, you specialize, and you become very highly qualified. And then when you get into a small county, where you do just about everything, there's a lacking there, and sometimes on the test that was difficult; if you specialize on something, and they give you a general test, you didn't do as well as someone else.

CP: Yes.

JR: We had that. So I told him that I would get that experience before I came down, and then he indicated that I could only transfer so much sick leave and so much vacation leave because I guess they didn't like for you to accumulate that or have that much time to be off. So then he—I said, "Well, it's October."

And I said, "That's when they normally give raises." And he said, "Well, how much raise do you normally get over there?" Well, they were only giving, shall I say, the lower echelon, myself, 10 dollars a month, whereas supervisors got 25 dollars a month. So I hedged a little bit, and I just said to Dr. Wright, I said, "Well, some of the employees get 25 dollars." That wasn't a lie now.

CP: No, that's not a lie.

JR: So he said, "Okay, I'll give you 25 dollars," so—

CP: (laughs) Very good.

JR: So when I started, evidently, he forgot and made a mistake, and he gave me 35 dollars. And I thought, Boy that was really something. Then I took the exam when I got to Sarasota County and

passed that and got promoted to the next level, and I got a raise in that. So I thought, Boy, I was really making the money. I think I made about 270-280 dollars a month.

CP: My gracious life.

JR: And that time if I could ever make 1,000 dollars a month, that that would be the top dollar; I thought that I was really doing it.

JR: The person I had worked for in the summer, in the clothing business, wanted me to come back and, you know, and go in partnership with him and that I could make more money, but I was still looking at the benefits of the retirement system and other benefits that it had. And at that time, probably 10 or 15 percent benefits, whereas the benefits now, with your salary, is about plus 35 percent; it's a lot higher than it was before.

CP: Yes, it is.

JR: And in Sarasota, we had to do everything there, and as I said—

CP: You mean each sanitarian was a generalist?

JR: Was a generalist in their district. We had three district, three district field supervisors, which I was one, and everybody did everything in that particular area, which covered everything. And, as you know, fortunately or unfortunately, we've lost so many programs over the years. The legislature in their wisdom didn't want to give us the money to do the job.

But they would create another agency and fund them with any kind of money and any kind of positions that they needed, but they wouldn't give us the money. And we had regional laboratories, ours was up in Tampa, where we had to take milk samples, and water samples, at that time, and animal specimens up there to check for rabies¹¹.

And we had to drive those up and back, and then later, we had our own individual water treatment—water-testing equipment there in our own laboratory, we saved a lot of time and effort, and that was a big improvement. But I'd like to go over some of the programs that we had at that particular time that we were responsible for—

¹¹Rabies is a viral disease that is spread via contact with an infected animal, usually dogs or bats.

CP: Good.

JR: —and also indicate those programs that are no longer with us because they've transferred them over to some other state agency, which certainly is their prerogative, but there, again, it seems as though public health or environmental health will always seem to be a step-child of everybody else.

Everybody else got the money, but for some reason, they didn't provide the money with the local health departments. Unless there was an epidemic, or food poisoning outbreak, or something, you usually didn't get the attention. And I really enjoyed, in the old days, working for the state board of health. It wasn't work because I enjoyed it, I was happy with it.

But then they changed from one agency name, to another agency name, to another agency name. And it seemed to have less and less autonomy and gave more control back to the state or to the districts, when they had regional districts. And it just seemed they weren't the same when they split all of that up and started changing it and—

CP: Was it for the worst yet, or for the better?

JR: Well, in my opinion, I think it was for the worst, and I think that the legislature may have felt, after awhile, that it wasn't working, but I guess they didn't want to indicate that it wasn't working, that they hoped it would straighten itself out; but in my opinion, it never did straighten itself out, it just got worse. As far as—

CP: It's hard to say that I made a mistake.

JR: Well, yes, that's putting it mildly, but I can see both sides of it. The state at that time, or the districts, wanted to get more control of the county public health units, which was a real working relationship as being a joint venture with the Board of County Commissioners, in which the county commissioners put up a certain percent of the money, and the state put up a certain percent.

And at times, the county commissioners put up more money than what the state put up. But yet the state also said, or had to approve, who the health officer was when they hired, and I guess when they fired, they had to concur because that was a joint venture and because that was a good joint relationship. And it still exists in most counties.

CP: Yes, it still operates that way.

JR: Although, in the beginning, there weren't that many counties in—had a health department. Some had city health departments. And reversing back to St. Pete, they had a city health department. And then as you know, all of them merged with the state under a county health department. And those that would work so long were transferred over with full seniority, and then they went in to social security, if they didn't have it.

So therefore, if they had a lot of time, they were probably making more money to—would get more money retired than they would be to continue to work. Unfortunately, some of them, as you know, working with the city and political system and that type of thing, had some of them didn't always have the best of interest or habits.

It is hard to break habits that you have, existed that may not then comply with what you needed to do at that particular time. But on the exams, we now—they don't have the exam, they have the experience, and that you have in your degrees.

But it is ironic that, I guess, I have taken so many exams, especially in Tampa, but I'll just diverse for a minute before I go into the programs and that—as you know, the merit system was in Jacksonville, where the state board of health was at that time, and I got a notice to go up there for an examination.

And I was quite young then, in the 20s. So I went up the night before because the exam was the next morning and, as you know, you can leave like the center part of the state and maybe it would be 90 [degrees] and get up to Jacksonville, and the next morning it could be 40; if you're in a lightweight suit, it's pretty cold.

And that was—I stayed there at the George Washington, which no longer exists, so I went up there, and I had my little card with me that they say, you know, You're eligible to take this exam. And I went in there and they looked at me, you know, and I looked at them, and I said, "I'm here to take an examination for sanitarian two or three," whatever the position was. And they said, Well, we don't give an examination today.

CP: Whoops.

JR: I said, "What do you mean you don't give an examination?" She said, "No, we don't give an examination. You must have the wrong date, the wrong time. You're in error." And I said, "No ma'am, I'm not in error."

I wasn't bashful at all. I figured that sometimes you had to speak up. And working with people, you had to be positive but extremely nice because you, at that time, you didn't get very far; there was very little regulations, and people didn't like inspectors, so you had to sell yourself before you could sell the department.

So I said, "Well, here's my card; now, what are we going to do? Am I going to get the examination or not? I've come all the way up here at my time and my expense, and I want to take the exam. Now, are you going to give me the exam?" So then they didn't know what to do.

CP: Uh-oh.

JR: So they went back, and huddled, and came back. And they said, Well, we'll be in touch with you, Mr. Ragan. And I said, "Well, you're not going to give me an exam?" Well, no we don't have an exam set up to give you. I said, "Okay." So about a month later, I got a letter back saying I passed.

CP: Oh, really? (laughs)

JR: So I didn't argue with that, you know. I thought that was pretty good. But diversing back, over in St. Pete, when I did inspection work, they had a—it's ironic—they had a city ordinance but—on food—where you had to have a permit, and I think permits were a big dollar.

CP: Yes.

JR: But unfortunately, whoever wrote it didn't write that there was anything in there for administrative action or for punitive action. But anyway, I was in one place in there inspecting and—not inspecting, I went in there to eat. This was a good diner, and they had a good pie; it was banana pie, I liked that.

And so I went in to eat lunch and this girl came out to waiter—waitress—and she didn't know me, which that's fine. And so I sat down, and I think I got a glass of milk and ordered; I drank that and noticed in there that they hadn't done—the glass had lipstick on there.

CP: This is the glass you're drinking from?

JR: Yes, so I said, “Could you get me another glass of milk, you’ve got lipstick on it.” No, she rumbled something and went back and got me something. And then I asked for a piece of pie, and she gave me a piece of pie with a fork. And the fork had lipstick all over it.

CP: (laughs)

JR: So I said, “You got lipstick on your fork. Do you have anything here that doesn’t have lipstick on it?” And she said, “Well, I’ll have you know, we put this in a dishwasher, and it goes through it at 180 degrees temperature, and kills all the bacteria, and everything.” And I said, “Well, that may be fine. You could sterilize a bed pan, but I don’t want to eat out of it.”

So with that, she pulled off to get the manager now. And they had a porthole there where the swinging door was, and he came up there. And he looked in there and saw me and knew who I was. And he went back, and she came up and gave me—another girl came up and gave me the check, and I left, but I thought that was ironic.

But it wasn’t that glamorous in the early days because, as I said, you had very little control and very little regulations. They had the regulations, but you didn’t have any enforcement teeth in it, and I guess sailing a ship is better a part of valid than others. But as that did come along in Sarasota County, you had to file charges with individuals through the state attorney’s office.

You had to file a probable cause affidavit¹² and get all the data and all the stuff and then—it’s just the only system you had at that time. And maybe it’d get to court late, and then, if it had been complied with, then the judge would just dismiss the charge. You know, the judge sometimes would ask, “Well, what’s up with judging on the fine? I won’t adjudicate him guilty.”

Well, you know, most judges wouldn’t adjudicate you guilty; they’d maybe fine you and then withhold adjudication¹³. And that was, unfortunately, very frustrating to do that. And there weren’t many local ordinances, which we had a lot of local ordinances set up and initiated because of that to work it. But I had to figure out a system of how we could do better. And I said, “There’s got to be a better way of doing that.”

And all the counties were having the same—some was better with their permit system, some was using television, was coming in, or they would get reports, and then they would apprehend those.

¹²A probable cause affidavit is a sworn statement by a law enforcement officer that describes, in writing, the factual justification for why a judge should consent to an arrest or search warrant.

¹³Adjudication is the legal process by which a judge reviews the evidence and arguments set forth by opposing parties or litigants to come to a decision between the two groups.

So I decided I'd take a law enforcement course on my own. So I knew the sheriff fairly well, and he sponsored me to go to a law enforcement course, and this was a course of, at that time, 120 hours and every Thursday night and all day Saturday and all day Sunday.

And I said, "Well, if that's going to help, this is what I want to do. So I did take the course and finished at an auxiliary course and became a bonded¹⁴ special deputy sheriff¹⁵, which really doesn't mean that much, but it does open the doors to law enforcement.

CP: Oh yes.

JR: So then I talked to a lot of them in there and said, you know, "Can you help me with some of these cases? And I would like to use law enforcement people." And they said—naturally, the sheriff said, "Well, our people have to witness it." And I said, "Yes, I realize that from taking the course."

And so when I got a bad problem that was difficult to handle because the other lengthy time it took to go through the courts, I would get the deputy sheriff to meet me—because then, at that time, I had a sheriff radio in my car and a walkie-talkie, and when I went in bad areas, I would turn that thing on, and maybe it might have saved my life; I don't know.

And so it'd come out, and most of the deputies didn't know much about public health laws and all, and I'd tell them that I want a citation issued to this individual for so and so. And they'd say, Well, I'm not sure. And they'd call back and say, Yes, if Mr. Ragan is there, you issue it. So he said, "Well, will you help me write it?"

So I'd help write it up there, and it would get in court in probably two to three weeks instead of two to three months, and I'd always get a conviction, which was excellent, and a lot of counties couldn't understand how we could do that. And I remember one case, because a whole lot of them was garbage, and some of them was overflowing septic tanks and others.

And that's after we'd given them notice by certified mail to comply with it, inspections and all of that. We did all the requirements. Had one down in a bad area and called the deputy sheriff out there, and said, "I want you to issue a citation, public health citation, against this grocery store owner for having rats." And he said, "Go over that again, Mr. Ragan."

¹⁴Sheriffs in the state of Florida are required to give bond upon taking up service to the county, which is returned after the faithful discharge of his or her office.

¹⁵Special deputy sheriffs in the state of Florida are appointed positions by sheriffs that may or may not have full powers of arrest, depending on the needs of the individual appointment.

And I said, “Well, for having rats.” He said, “Well, I have to see them.” And I said, “Well, come on in.” He said, “What?” So we went in the backroom and they were running all over the rafters and the ceiling back there. And oh my god, he jumped and went back out; he wrote him up.

CP: (laughs)

JR: And we had another one where they cut off the water, the city did, and the man that was there, he was from somewhere in Europe, and he had shot the water meter¹⁶. He had a body guard there, so with no water you couldn’t operate. So I went in and told him, “Well, no, you got to close down.”

CP: This was a restaurant?

JR: This was a grocery store, deli meat market. And I said, “You’re going to have to close up because you haven’t paid your bill, and you don’t have any water. You can’t operate; it’s not sanitary.” And so I called for a deputy and four came. You know, it was a bad area, and we had him stand away from the counter because he had guns back there, and he had a bodyguard.

And he closed down, but sometimes it’s, you know, a little bit hazardous. They say it’s not hazardous work, but I guess, in certain areas, it’s hazardous. But that was very effective and very rewarding to get things done.

CP: Oh, yes.

JR: So the word got around pretty quick that when they asked you to do something, if you didn’t do it, there were consequences. Beforehand, I’d always tell the people working under me, don’t ever so-call threaten anybody, but don’t tell people that you’re able to do something if you can’t do it because then you’ve lost all control. But a lot of times an individual would say—I’d say, “Now, if it’s not taken care of, then we’ll be back, and we’ll have to do something about it.”

And the individual would say, “Well, what do you mean?” And I said, “Well, I’ll bring a deputy sheriff out here, and if you don’t correct it, if it’s not corrected, then he’ll issue you a citation. You’ll have to go to court.” And, “Don’t threaten me.” I said, “You’re the one that asked me what was going to happen. I’m not threatening you, I’m just telling you what’s going to happen.”

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Water metering is the process of controlling water usage by residential and commercial properties.

But no matter what you do sometimes, it was wrong. Another case, we had an overflowing septic tank in a restaurant, and the jeweler behind it was always complaining about it overflowing, and we told him to pump it out more often. And as you know, a grease trap¹⁷ can smell worse than sewage.

CP: Oh, boy.

JR: And so I—we mentioned to him and wrote him letters, and he still had problems. So I called for city police officers in the city then, and I got to know the chief real well. And so he came out and I said, “He’s going to issue a citation.” He was out front and customers were going in and out, and here is the officer writing him up. And I said, “Now, if this thing happens again, this officer is going to come out and issue another citation.” And the officer said, “No, I’m not going to issue him another citation, Mr. Ragan.”

And that kind of took me back. And I said, “Why wouldn’t you issue him another citation?” He said, “Because that would be probable cause, I’m going to give him one chance. If I have to come back out here again, I’m going to arrest him, handcuff him,” —he told that guy that— “put you in that car. And you’re going down to the county jail, and you’re going to have to post bond.” Well, to say the least, it never did overflow again. So I think he got his attention in there.

CP: (laughs) That’s great.

JR: But I wanted to go over some of the programs that we had in environmental health that we don’t have today, as you’re well aware of that.

CP: Give me a time frame in which you’re speaking.

JR: I would say these programs that we had when I went into Sarasota County, and well, I would say all the way, probably—I went there in about ’56 to Sarasota County. And I would say we started losing programs after the reorganization with the districts¹⁸ and all, and I think that was after sometime, ’76 right around there.

¹⁷A grease trap is a receptacle that wastewater flows through to separate grease, oils, and sludge from the water before entering sanitary sewer lines.

¹⁸In 1975 the Florida legislature passed the HRS [Health and Rehabilitative Services] Reorganization Act to both decentralize and unify health, rehabilitation and social services in the state. As a result, all state public health bureaus, sections, and units were restructured and re-distributed to be governed by one of 11 HRS state offices or 3 central administrative units in Tallahassee.

CP: Yeah, the major reorg.

JR: Reorganization.

CP: That's when you got districts, '76.

JR: I would say, possibly, probably within the past 10 or 15 years we've lost maybe six or eight major programs to other state agencies for incorporation, consolidation, or whatever you want to call it; the most serious one, as you know, being food, went to the Hotel and Restaurant Commission. We didn't do grocery stores and nursing homes and some of the others. But then they were located in Fort Myers from Sarasota.

So if you had a complaint, you had to wait over the weekend, whereas if you had a complaint in Sarasota, all you had to do was call the sheriff's office or the police department, and they immediately call me, and we were down there inspecting it even over a weekend or if somebody got sick. We had an excellent food handlers' training program in our permit system, which if it didn't comply we could rebuild the permit, and that was real unconstitutional.

When our invalid, when Hotel and Restaurant Commission took over, and then the Department of Agriculture took over the grocery stores and food outlets and kind of completely caused that program to be at a standstill, which I don't agree with it. But then, I don't make those kinds of decisions, and they don't ask you for your opinion on them anyway.

CP: So often. Well, yeah, catalog for us those things. I think that'd be very useful for the record.

JR: Okay. In public water supplies, as you know, that related to when we worked with the state board of health; they would issue permits on public supplies to private supplies. We later passed a local ordinance in Sarasota County to have better quality water and to try to keep us off water intrusion from those areas on the islands.

And the state would assess this and that, and they'd issue the permits, and we would check them out. And we also inspected the public water plants to make sure and take water samples; and they had to take water samples themselves, although we would collect them. And those, as you know, was taken over some time after that, to the Department of Environmental Regulations. And that also related to sewage treatment plants.

We did sewage treatment plants, the public ones where they have their own units housing at, be it the city or municipalities or what have you, but individuals who had their own systems—there were a lot of them that we had to regulate to make sure that they were properly treating the effluent¹⁹.

There were different methods, different treatments, and plans had to be approved, and that went over to the Department of Environmental Regulations. At that time, we had our own water laboratories, Millipore filter system²⁰, and I thought it was kind of ironic that here they took over the program, the Department of Environmental Regulations, and then they transferred the water program back over to us to do on a contract basis. But—

CP: What was the dividend, Jeff? There was none, was there?

JR: Well, I guess control. I guess they wanted the control to go back to the Department of Environmental Regulations. But sometimes I wonder the wisdom in it, but then again, we just rolled with the punches and did the best we could and provided the best service we could to the community.

And unfortunately, when you're dealing, a lot of times, with state agencies, you don't get the instant service that you're used to. And I think, today, there's no such a thing as instant service. We used to—somebody would go out and talk to them that same day, but then the old added proverb, you know, "It's a good thing that you don't get all that you paid for, because you probably couldn't stand it."

CP: Yes.

JR: And swimming pools, as you know, is—we still have that program. But then, if you're over so many units you don't really come under the program, and that was an important program. We passed a swimming pool ordinance in Sarasota County we had drafted, and it didn't pass the first time or two, so I was determined to get it pass through.

And I—we finally got it through; we wanted one that county commissioners knew about swimming pool programs and all. And we were charging so much money for them to pick up the water samples and bring them in, which I never cared too much for that because you didn't know where they got samples from. They could have gotten them out of the city tap.

¹⁹Effluent is an outflow of waste material (smoke, liquid industrial refuse, or sewage) discharged into the environment especially serving as a pollutant.

²⁰A Millipore filtration system uses a unique type of porous membrane.

CP: That's so true.

JR: So we said, If you will go along with the permit system with the fee, we will pick up the water samples whenever we inspect your pool; you don't have to bring them in anymore. So that sold the program, and it did pass through the Board of County Commissioners.

And besides the public sewage system, we also had problems with, you know, with lift stations²¹ overflowing. It was a problem that we finally got worked out over the city of Sarasota because, in a lot of cases and others, the pumps in the lift stations, some of them had dual lifts—dual pumps, some didn't.

But when one went down, they didn't have the same type of pump, so they needed to regulate all of the pumps and upgrade them, so that when they needed one, they could put that pump in, and they didn't have to order it. And, as you know, the effluent would run out and bypass into some kind of canal or stream or river until it was fixed. Now, they have lights on them and all this.

The individual sewage disposal system, which is the septic tanks in drain fields, we still inspect those with the chemical collates on sight. And they don't have sand filters now, although they did have sand filters²². Those did the job it's supposed to do, unless you put a post hole digger²³ through it, and then it didn't get treatment. And that was sometimes a problem with it. So there was always somebody trying to out-figure the system.

I know in some of them we inspected, they had drain fields; they run them way, all the way out. They put a bell footer on it with a flat valve. When it rained, it just run up there and discharge, and then the flat valve would go down, and you wouldn't be able to see it unless you checked it.

I remember you talking about septic tanks and the sewage that had this Mennonite out in the Pine Craft, which were very good people, very honest people; I really enjoyed working with them. He had a small trailer park because we tried to get all of them approved before the zoning went in. And I think it was three or more constituted, or five or more [trailers] constituted, a trailer park.

So he had a beautiful garden back there, green. I had never seen one that good before, and I said—you know, I was just trying to be nice, I said, "Well, how does this stay so green and lush and big? I've never seen a garden like that before." He said, "Well, my drain field runs down at the end there.

21A lift station is a critical part of septic systems that are located below the drain field.

22A sand filter is used for water purification without chemical processing.

23A post hole digger is used to dig narrow holes to install posts or poles.

“And I have a pitcher pump it in the line, and when the tank fills up, I just pump out enough effluent there, where the tank won’t overflow, and that really takes care of the vegetables.” (CP laughs) I said, “Well no, you can’t do that. There’s no way you can do that.” And so he thought he was doing a good job. Another case, I always try to work with them—the lots out there were 40 by 40, 40 by 40.

CP: Oh, really?

JR: And at that time, way back, they didn’t have a building department. They didn’t put in no plumbing, electric billing, and some of the lots were like 40 by 80.

CP: My gracious.

JR: Or 80 by 40. And when they’d have—the water was contaminated, maybe it’d be within ten feet of the drain field. And the code then said that it had to be 50 feet. But I couldn’t see how we could meet it, so they would say, Well, now, how are we going to get around this, Jeff? And I’d say, “Well, it’s not a matter of getting around it, it was an improvement.”

So when the water was contaminated, it was 10 feet, and we could get it 40 feet away, and I said, “Well, drill it 40 feet.” And he said, “Well, it doesn’t meet the code.” I said, “Well, put down there. All we can get is 40 feet because the lot’s 40 by 40 or whatever it is, and this is an improvement from 20 feet to 40 feet.”

And we issued them that way, right or wrong. We made a decision for an improvement. No sense in continuing drinking the water, and this way, the well was caged, and the other well was just a driven well in the ground. So I thought that that was an improvement.

CP: Yeah, that’s shocking that you were expected to put down a well and a septic tank on a 40 by 40 lot.

JR: Well, as I said, at that particular time there was no building department and people just—

CP: That blows my mind. Yeah, it blows my mind. Go ahead, I’m sorry.

JR: And in another trailer park, they had a laboratory that ran out on the ground. And I said, “Well no, you’ve got to put a septic tank in there.” You couldn’t put a distribution box or something—although, I don’t see why you couldn’t, but that’s what the code called for.

So trying to help the gentlemen and the Mennonite there in Pine Craft, I said, “Dig around here, and look around, and see if you see an old barrel, or you see a tank or a distribution box or something where this ran into. If you can find it, and it’s there, you can use that; you don’t have to put in a septic tank.”

So I was kind of leading him. And so I came back Monday morning, and they had dug up that whole yard. He said, “Mr. Ragan, I’ve dug up that whole yard, and I can’t find a tank out there.” I said, “Well, I guess you going to have to put in a septic tank then.” But I thought he would get the message because I couldn’t see putting in a septic tank for a—

CP: (laughs) He was being so wise.

JR: Yeah, that’s how honesty works. And we used to get into public building inspections when they had complaints for restrooms, especially service stations. In the summer time, I had our staff go out and inspect all of the service stations where the tourists were coming in, and we found some interesting things. But I don’t think most people; most county health units did that. But I always noticed the restrooms when I go on a trip, and most of them weren’t that clean.

CP: So do I. They’re characteristically not.

JR: And how we got the thing done if they didn’t comply, we’d just send a letter up to the home office where they had their franchise, and this always took care of it. On child daycare centers and foster homes, we passed a county ordinance on that, regulating them, licensing them. As you know, most of the counties, or many of the counties, did not, when the state wanted to take over, did not want to do this.

We continued to want to do this because it was our program, and we had started it and had an excellent working relationship with the school out there, where you could get the training, that they had vo-tech²⁴. And so we maintained ours, where a lot of counties didn’t.

And therefore, when they didn’t, and the state districts took over, and then some of them that couldn’t do them, then said that the counties would have to do them under their supervision,

²⁴“Vo-tech” us a term often used to refer to vocational-technical schools.

whereas we still maintained a program, and it would come over in monitoring. And this was a program that grew and grew and grew, as you know.

CP: It surely did.

JR: There was a lot of places. And then the subdivision platting²⁵, which is kind of rare now. I mean, with our participation in most all the subdivisions there, most of them didn't have central water and central sewers because they wasn't that progressive then. So we would go out and dig test holes and look at soil content, do percolation tests to see how much of the soil or water would absorb and determine whether or not we felt the septic tank would work.

And then we worked with the city engineer and the county engineer for when they put them in, that we would prefer to have a ditch in the front drainage of 21 inches, and then that lot grade, finish grade, would have to be 39 inches, so we'd get a 39-inch water table. And that worked out real good when the soil was good.

And if it had a hardpan or anything, that had to be removed and replaced. But then, over the years, it didn't work out in some areas because the people, evidently, got a little bit more money. They went out, and put in culverts²⁶ out in the front of the yard, and covered those up.

CP: Uh oh.

JR: And that just raised the water table up 21 inches.

CP: Yes, it did.

JR: So then we had to get the engineer to get them to poke holes in them and to put rock in them, so that they would have some type of drainage, and then some of them had to curb in gutters. Since water and central sewer was late coming, Manatee County put theirs in early. It was always, as you know, a political decision with the Board of County Commissioners because they didn't work.

²⁵A subdivision is a parcel of land or a lot that has been divided into a plat for the purpose of sale or building development.

²⁶A culvert is a structure such as a tunnel or channel that allows water to flow underneath a road or sidewalk in order to prevent roadway floods.

But at one point, they could have put it in because the federal government was matching almost dollar for dollar and through the county commissioner's it was going out, but I guess they didn't want to make the decision that they made a mistake, which I thought was a mistake in not making. And the new ones coming in, actually, didn't want to make that decision because they wanted to be reelected, so time just marched on, and that created problems.

But that was a big program, and you know, some of them down in Venice would have had big developments in there. General development had hundreds and hundreds and hundreds of acres down there, where they put in the streets and the sidewalk. But there weren't septic tanks, and the drainage was something else.

And some of them had the landfills back in there, and that was a problem. And the landfill's down under the Department of Environmental Regulation, they're not under the health department; we used to inspect all those and check them and see what they were doing. And they got more engineers, more, I guess, qualified individuals, more studies and tests and all this, so we lost the landfills, as well, that we did.

And the milk—milk products, ice cream, and frozen dessert, we inspected all of those; we took samples; we sent them up to the state lab in Tampa. And that was a big program with the dairies, where we had to go out early in the morning and pick up samples from their holding tanks—what was being agitated—and take samples in there to see what the butter fat content was, the bacteria and this type of thing; see if they were cleaning their equipment properly, their milking equipment.

CP: Did you do the heavy on that?

JR: No, that also had to go to Tampa.

CP: Okay.

JR: They did that up there. And it wasn't that good in the early days because they would put the milk in these old five-gallon cans and set them by the road, and come back to pick them up from the truck. And the biggest innovation they had was the electrical milking devices and stainless steel truck that they could pump it out of the tank into the truck, and the pasteurization plant where they could sterilize them because the time then, way back, you could have raw milk.

Our people could drink raw milk, but it wasn't ideal. So that was a big improvement that we had, but then, as you know, the Department of Agriculture took over the dairy plants, inspection

farms, and all the pasteurization plants, and the ice cream plants; they got into taking the samples from that and all, and so we lost that major program that we innovated.

I think Sam Noll was a consultant, a milk consultant, that he went all over the state and came down for uniformity, which that worked out real nice from the district office, the state office, rather than in the district office. And nursing homes, we used to do about 95 percent of the nursing home inspections in Sarasota County, and the state would only do about 5 percent.

They'd approve the plans, and we'd do all the inspections with the nursing and get into that. And as it projected around, and the state got engineers, and they got specialists, and they got consultants, and they got into Medicare, and they got into this, and so it turned around to where they were doing like 98 percent control, and we only was looking at a few complaints that they would give us and do the food work.

And so the state Health Department, they changed that name too—they're in another agency in healthcare that's looking at nursing homes, adult congregate living facilities²⁷, and those have really sprung up. But in the nursing home program that we worked very closely with, the state had an excellent program.

Every now and then, always, there's something innovative out there like, you know, you should do something maybe different even if it was wrong, and I believed in doing that. And so about maybe every six months, I'd get the director of nurses and she and I—I'd pick her up about one o'clock in the morning, and we'd go out and inspect all the nursing homes.

Just a spot visit, to see if the help was awake, if the narcotics was locked up, if the doors was locked or what have you. And we'd go in and look at those, and we'd get through about four o'clock in the morning. And then I'd go home, and then I would go back to work at eight o'clock, and they'd say, "Well, why did you come in at eight o'clock?"

And I said, "Well, because every one of the administrators is going to be calling, wanting to know what in the world's going on." Because, you know, we never got to see that shift from eleven to seven. And that was interesting—

CP: I'll bet you it was.

JR: —we got to walking around, and people weren't there, and some of the exit doors was locked, and you couldn't get in. And one time we went into one of them, and I didn't have a

²⁷Adult congregate living facilities are another term for an assisted living facility.

problem with it, you know, at two o'clock in the morning, ringing the door bell, and they'd come there and look out the peep hole, and say, "What do you want?"

And I said, "I'm with the state and county health department, and we're here to make an inspection." I told her who I was, and who the director of nurses was, and she said, "You've got to be kidding. I'm calling the police." I said, "Lady, that's the thing to do. I'll wait right here, and you call the police."

So she called the police, and he come riding up, it was a sergeant, and he said, "Jeff, what are you doing out this time of night?" And I said, "Well, they won't let me in. I want to look at the—I want to inspect the nursing home." He said, "Open the door." So I thought, you know, you get into funny things that way, but that's the only way you could find out sometimes, and that made a good relationship.

And then when the state started coming in, I tried to—they would let us know when they were coming in on the day they were coming because they said they would let me know ahead of time. I said, "No, I don't want to know ahead of time, I don't want anybody to know ahead of time. You're going to call me that morning, and tell me that you are going to be at such and such a place, at such and such a time, and I'll meet you there and send somebody there because I'd like the local health department to be there to walk through with them."

CP: Yes, yes, yes.

JR: Because they felt better; otherwise, they got nervous. And then, now—in the beginning, I always thought it was strange, and maybe you probably knew this too, was that they would look more at the facility compliance and not the patient. And, as you know, employees at the state, our local health department, cannot touch a patient; they have to get the nurse or somebody to turn them over to see if they've got any sores or anything of that nature.

And I can appreciate that. And we got into labor camps and campsites, recreational and state parks, which we had a lot of; not a lot, but we had three or four labor camps there, and you know how those are always a problem. It's just something on which you almost have to inspect off of every week to get something done because, with all the laws and all, there was very little that you could regulate with individuals.

But you can only hold the individual responsible there. And I had a problem with one of them, and I had to take the individual to court; couldn't find another way. They wanted to know, would I drop the case? And I told them no. And they said, "Well, the man's sick." And I said, "Well, I'm sorry to hear about that."

And they said, “Well, could we change the charge to the company, rather than the individual?” And I said, “I don’t have any, any objection to that.” So then we went on through, and it was fine and all. But I always tried to—I’d call Tallahassee, and I would find out who was the registered agent of any facility, and that was usually an attorney if it wasn’t the owner, in some of these restaurants and all.

And that way you could write to that individual, and you’d know who they were, which would work out, but a lot of people didn’t do that. Fumigation²⁸ notices, as you know, we had pretty good control of that with the licensing from the state board of health. And at one time, as you know, they required a guard to be posted on the fumigation notices on the tents, and we would check them to see if any tears or what have you.

And then they did away with the guards saying, you know, they didn’t think it was that necessary. And then we would get so many of them, we would check about, maybe, 10 or 15 percent of the ones coming in. And now I think that is under the Department of Agriculture, that they regulate those. And I noticed that, as you know, that a lot of people will try to get gas masks and go in these homes when they tent them, and they die because they want to rip them off or rob them, and that’s unfortunate.

CP: It surely is. But it happens, you know.

JR: Yeah, I don’t know, but it isn’t ideal. We also got into the laundry plants—individuals where you did your laundry, commercial, and incinerators. And, you know, incinerators now, I guess, is under the Department of Environmental Regulations. I’m not sure which one has that now, but I assume they would.

But we had that problem to get into, when we had our own air pollution control section within the county, not with the health department, but the county had that and regulated that. And we got in that and worked with them in the laundry plants; we would check those and check their plants, if they had their own laundry plant for treatment waste and check the general sanitation part in there. That was interesting, but we didn’t get into that that much because there wasn’t that much to do with them.

CP: Yes, yes.

²⁸Fumigation is a method of pest control that fills an area with poisonous fumigants to eliminate pests within a building or parcel of land.

JR: But we no longer have that. As I said, we had 20—I mean, 35, 38 programs, and now they don't hardly have, probably, less than 20 programs. And some of the programs, you know, they did away with; they did away with rabies program; the complaint program, they didn't do away—well, they did away with them in the fact that they didn't fund them.

CP: Didn't fund them.

JR: And then the local county health units picked that up because we felt that was a service—

CP: An old desirable to be done.

JR: And the county commissioners felt that way too, so we continued to do it. But coding-wise, I guess we didn't get credit for it because the state didn't—they weren't coding; it didn't exist, even though you were doing it. And I mentioned about the sanitary landfills, we lost those.

We worked closely with the mosquito control director called Ulysses Mosten, the mosquito control director over the landfills for the Board of the County Commissioners. And abattoirs²⁹, we had one abattoir slaughtering house there in the county that we worked with the state inspector on that, and they got into, then, state inspections for the meats and all.

And we had an ordinance passed that they had to have—all the state meat had to be state inspected in the county. And I'm going way back with the ordinances, and I'll try to get into some of the ordinances; I didn't cover all of them that we had, that we had passed by the Board of County Commissioners that they had. I think—I thought I had another page here, but I guess I didn't copy page four. I think we had about 34-36 different programs that we had.

CP: That's a nice inventory though, Jeff.

JR: Well, this goes back—this was typed up on the job description on one of my job descriptions as environmental health director in '65.

CP: Really?

JR: And I was an environmental health director there for about 25 years. It's ironic, as you said, with the experience and all, I kept applying every year; every year I would send in my

²⁹An abattoir is a slaughterhouse for animals that are killed for the consumption.

application for environmental health director status for—to be eligible, in case it came up, and you had to do that every year.

And they kept, you know, adding points for your experience and all. And so when I got to the top of it there, that didn't mean that you would be one, it just only meant you were qualified. My grade in there was 105.25 with a disabled veterans' preference, so every year it grew. So eventually, I made it, though. I'm trying to see some of the other—

CP: That is 105 out of a possible 100?

JR: Yeah, I don't know how—I guess I got 105, maybe, because of the disabled veteran [preference], I guess. I was looking at some of the other programs that we might have had in there that I didn't see. Oh, public schools, we got into public schools, and, as you know, we inspect those once a year.

We worked very closely with the superintendent of the schools. And when we'd make all of our inspections, both there and on the food cafeterias, we would get together with the superintendent of schools and the manager of all of the cafeterias, or the one in charge of them. And we'd go over the report, and discuss them, and see what we were going to do, what the problem was, what they could get on.

And then based on that, we would write the report and send it to them, and then they had all summer to take care of them. And we always had an excellent working relationship, although legally, I'm not quite sure the status of our enforcement on that, but I didn't have a problem.

CP: Well, you use what's right and reasonable, and prudent people understand that.

JR: And the superintendent of the schools was very supportive and said, "I don't care whether it's a regulation or a law. The health department says that you will do it; they recommend it; you're going to do it. You put it in your budget."

CP: I like that.

JR: And we never had any problems because we worked with them very, very closely. And the school was a big program; it took a lot of time to go through all the schools and check every room and every deficiency, which a lot of them, actually, were minor, maybe painting or this type of thing. And it helped them with their budget.

CP: Yes, say something about rabies. Did you all get involved with rabies?

JR: We had a big program there on rabies we got into, we had to get into, and we worked closely with animal control. And then, that—we started putting on the county map different places where rabies was coming from, and at that particular time, most of our cases of rabies were from foxes and bats.

CP: Really?

JR: And then, I guess, later on, a lot of the rabies was coming from cats since they wander off so much. But we had an epidemic down there in the '60s on Longboat Key in which they had, I imagine, 60 or 70 cases of rabies, probably more than that, where I think it eliminated most of the raccoons on Longboat Key because they all got rabies and died.

CP: Oh, the 70 cases you speak to is in raccoons, not in humans?

JR: Yes, and animals. I'm sorry.

CP: Okay, okay.

JR: Related to animals themselves. And so we had to get quarantine measures on the individuals, which was already on the books of quarantining them for ten days. And then at the end of the ten days, if they didn't die of rabies at that time, they didn't have rabies at the time because normally they would die within the ten-day period, if they were rabid. And those that were bitten, that weren't immunized, they had to quarantine those for several months or have them destroyed.

And the biggest problem we had was people that would adopt or pick up baby raccoons and keep them. And the only way that you could tell if it bit somebody, if it had rabies, is have it sacrificed and send the specimen to the Tampa lab to see if it had rabies, and that created a lot of problems. And as you know, in raccoons, they can live up to two years with the virus and not die from it or show any ill signs of any ill effect from it.

CP: Real public health problem.

JR: So one woman had a raccoon almost two years, and it bit her. And we said we'd have to have it sacrificed. And she said, no. She wasn't going to do that. And I said we'd get a court order," which I didn't know if we could a court order or not, but I said, "We'll get a court order." And she finally agreed, and so she sacrificed and sent it off, and it did come back positive, and she had to take treatment.

CP: Oh, it did.

JR: And a lot of times, you get them when they pick them up sometimes for, you know, pets for this or that, and all of these people handle them, and then all of them have to take the treatment. And as you know, way back, they used serum from horses³⁰, and they give a shot, 21 shots right across the abdomen, and after about the eighth or ninth one they start lightening up, understand; you could see where it would, and if you were allergic to that particular serum, it wasn't good. And then they got into the live kill virus from the duck embryo³¹.

CP: Yes.

JR: And if that—you were allergic to that type, that would make a difference, and now, I think, that they have the human—

CP: Human origin.

JR: —that they can have, and they give shots now in the arm, like they would any other shot. If the bite is real serious or deep, they would give you a shot then. And then it'd consist of (inaudible) five shots and over a period of time.

And now I think the charge for the rabies treatment is 600, 700 dollars, if you have insurance, it would pay for it, but I don't know of anybody in the health department that would deny the treatment of it, whether they could pay for it or not.

CP: Yeah, I would hope not.

³⁰Horse serum is used to produce Equine Anti-rabies Immunoglobulin (ERIG), which is used as a vaccine against rabies in humans.

³¹Purified duck embryo vaccine (PDEV) was the first vaccine developed for treating pre- and post-exposure to the rabies virus for humans.

JR: And some people didn't believe it or didn't want to take the treatment and all this and that, and some of them refused to take the treatment. And I would go back to the office and type up some official thing, indicating this relieves the health department of any responsibilities, should you should die, and would you sign this.

Well, they came and got treatment, (CP laughs) but sometimes you had to use innovative means to get people who just didn't take things that seriously. I don't think I was ever bitten on the job, although I was bitten many times when I had a paper route. But that, yeah, that was a long time ago. But rabies was a big program.

And we put ads in the paper, and sometimes we would have to quarantine an area in the county in which the owners couldn't let their pets out, and if they did, they were picked up, then they couldn't get them back until they got them inoculated. And this was a good program, and maybe some of it, to a certain extent, is scare tactics but maybe it takes that for people to immunize animals.

And we had a policy that if your animal was immunized, and it bit somebody, you could keep it home. If your animal wasn't immunized against rabies, and it bit somebody, you had to put it down in a private veterinary hospital for ten days and pay the bill, and they couldn't release it until they inoculated it.

So that was very effective. But a lot of it, as you know, Dr. Prather, is strictly education with people and trying to let them know what is the seriousness of it, and most of the time they will respond. And as I said—

CP: Yes, and that's true in all of your environmental health, I think.

JR: You get more, I guess, cooperation from people by asking for their cooperation, rather than nobody that doesn't like to be told what to do, and I can understand that, that's human nature. I've always prided myself on salesmanship; to try to sell yourself in trying to get something done is the same way as inspecting on the complaint on property, when the individual says, "No, you're not going to get on my property."

"You can get out there on the road, and don't you come back." And I said, "Well, ma'am, you know, if you don't have anything to hide, why is it you won't let me on your property? I just want to see if there's a complaint. If you've got a problem with your neighbor, that's fine; if there's nothing there, we'll say there's nothing there. But you know, I would hate to go through all the trouble to go to the state's attorney's office, get our attorney, get a search warrant, and all this stuff, probable cause, and all this."

And I said, "You know, that isn't necessary." In most cases, probably, we couldn't get one because there wasn't a real need to get a search warrant to go on somebody's property because what they might be having, either an animal, chickens, hogs, or garbage or overflowing septic tanks or something you couldn't see from the front, that you'd have a problem.

Or maybe they were operating, or alleged to be operating a child daycare center and this type of thing, and they just didn't want you on their property. But normally, you can always, usually, if you go about it right, explain to them, you know, if you have nothing to hide, then, you know, we're just here to find out, and if there's nothing there, then we'll apologize for bothering you. And then usually it works, but not everybody felt that way.

Some people, as they say, you give them a little bit of authority or a little bit of knowledge, and sometimes it is dangerous, and that's true in any type of work. But I always tried to provide a service and took pride in what I did. And some people would come into the office complaining and then—"I can't get this, and I can't get that, and nobody will come out and look at this and look at that."

And so I'd go out, and I'd say, "What seems to be the trouble?" And he said, "Well, I need somebody to come out here and look at something out here or look at the neighbor's property and all, and I called down here." And I say, "Well, maybe they might have been busy, but—" And he said, "Nobody will do anything." And I said, "Well, what are you doing right now?" And the man said, "Well, what do you mean?"

And I said, "Well, I'll meet you out there in ten minutes." And he kind of looked at like, you know, he doesn't believe that. And I said, "Well, you go on out there. Now, don't you bother with me when I go out there because I'm not going to come over here because I don't tell people where complaints come from, and I don't want to get in the middle of a neighborhood argument or anything of that nature. I'll go out there, and if there's a problem, we'll take care of it."

And I'll do it. And I'll do it on weekends. I've had veterinarians call me and say, "There's a dead dog out here at the house, and they won't bury it." And I go out there and tell the woman, "You're going to have to bury the animal or have it picked up. And since it's the weekend, if you want to bury it, dig it down and put at least two feet of dirt over it so animals and whatever won't dig it up." And they said, "Well, I don't have time."

And I said, "Well, if you don't have time, I guess I'll just have to call somebody from the sheriff's office." And usually, they would go ahead and bury the animal. But you get people who are unreasonable, and to me that's the challenge to workload. It doesn't take any effort to work

with people that are nice, but when people are difficult then you have to try to handle them in a special way.

And there are some people I have hung up on because of cussing and raising cane, I said, "Now, you know, I'll treat you like a gentlemen, I expect to be treated like one. But now, I don't have to listen to all of this." "Well, I pay your salary." And I said, "Yes sir, and I appreciate it too." You know, and I'll smile or something, and that really shakes them up, you know, to be nice to them.

But then I have hung up a couple of times, and I have had them file complaints, but you know, that goes with the territory. But in working in public health, I was also interested in serving on some of the state boards, as you're well aware. And the Barber Board³² had got into some problems and indictments, I think, on individuals.

They only had three members, and I guess that was part of the reason, and Senator Ed Christ from Bradenton, there, changed the law from three members to seven, with one of them, that I knew him, had to be a registered sanitarian to serve on the board at large. So he appointed me to that board, and, uh, that was called the Florida Sanitary Commission, so I was a commissioner.

There were seven of us, and we met in Tallahassee once a month. I would drive all the way up, early Monday morning, all the way up to Tallahassee, stay all day and drive all the way back and go to work the next day.

CP: You didn't have [Interstate] 75 then either, did you?

JR: No, I'm afraid not. I had the old 41, didn't have that much. And after awhile, that got real bad, and I just said to Senator Christ, "I think I'm going to resign. I only got a one-year appointment." It was one, two, three, and four because they reorganized it, years.

And he said, "No, I don't want you to resign." And I said, "Well, I think I'm going to." And he said, "Just think, if you weren't there, how much worse it would be." I said, "Okay." So I stayed that year, and then I got another four-year appointment.

CP: These are gubernatorial appointments?

JR: They're appointed by the governor.

³²Florida's Barbers' Board is responsible for licensure and regulation of operating barbers in the state.

CP: Yes, okay.

JR: And later they had to be confirmed by the Senate. And I was secretary to the board, and then I served another four years. I served nine years as a Barber Sanitary Commission, state at large; I was the first and only registered sanitarian to serve. And all of them were barbers except myself, and I thought sometimes I was the outsider, but that was all right and—

CP: But you were the outsider.

JR: It was interesting sometimes, and I got a lot of information from Dr. Sowder about demi-sterilization methods and all this. And I had tried to train some of the inspectors and all on different stuff. But it was interesting sometimes because not all the members did their homework, and I always did mine and made notes.

And a couple of times they'd say, "Well, you know, I move that we take this man's license." And I'd say, "No, you can't do that." He'd say, "What do you mean, you can't do that?" On every board I got on, I got in with the attorney, so I had my facts right—

CP: You read the law, I hope.

JR: —ahead of time. And I said, "Well, you can't do that." "Well, we can do whatever we want to do." I said, "No, you can't revoke the man's license." "Well, just tell me why not?" I said, "Because his license has expired, and you can't revoke an expired license. Now, you can ask him to come back before the board before you renew it, but you can't revoke something he doesn't have." And all of them were red-faced because they didn't study what was in their packets.

CP: They didn't read what was sent them.

JR: And then after that, you can't serve more than two consecutive times on the board without a lapse of four years gone by, so then I got on the—I was appointed to the Sanitarian Registration Board. And as you know, every, I think, five years they sunset all the boards, and then they react them. If they want them back on, and then they pass the law back and revise them and what have you.

I had one sunset, and I guess one sunrise. And so, they did sunset the Sanitarian Registration Board. They didn't see that it was doing that much good, so it more or less died by the wayside

from the state. Although, all the local associations still maintained a registration status, if you wanted to voluntarily, and that wasn't mandatory. Now, I think that was part of the reason why they didn't keep it as, it wasn't mandatory, that you had to be.

And then after that I got appointed to the state Board of Nursing as a consumer member. I found that very, very enlightening. And all the cases, sometimes we would have a lot of books to study with a lot of cases on administrative hearings. And I had a four year appointment on that, but then the board came up for sunset after a year, and after they sunset it and put it back in, then they could make all the appointments over again because the board didn't exist.

And now it was a new board, and I didn't get appointed; I didn't get my paper, and I didn't get a part. I called up there to one of his aids that I know and say, "Well, you know, I don't understand why I didn't get reappointed from a different governor." And she said, "Well, I'll look into it, and I'll call you back, Jeff."

I said, "All right." So she said, "Well, the governor felt that because your wife was a nurse that he didn't think you should serve on the board." And I said, "Well, all of the nurses that are appointed are nurses." And I'm not a nurse. I didn't go to nursing school, and I don't see how that had anything to do with it. But I said, "That's the governor's prerogative."

CP: Bad excuse. He just wanted somebody else.

JR: So then I got on the cosmetology board³³. I got appointed to that for four years, and then I got reappointed. And then the last three years, I was—well, the sixth and seventh year, I was chairman of the board, and the reason for that—the chairman, who was very knowledgeable, had a doctorate degree and had two schools, was murdered over there in his shop, and I was the vice chairman, and all the rest of them were women. And so, they wanted me to be chairman.

So I was chairman for two years, and they were going to put me as chairman in that last year. And I said, "No, the vice chairman should be chairman," because she had been there for four years, and it was more or less an honor for some of them to be there. So I said, "I don't think that I should do that." But that was interesting. We had books to study on administrative hearings; maybe they would be over 12, 15 inches high. Sometimes we'd have as many as—

CP: Oh, my. That's a lot of homework.

³³The Board of Cosmetology in the state of Florida is responsible for licensure and regulating all businesses and individuals who fall under the profession of cosmetology.

JR: —300 administrative cases, and sometimes they would go from morning to midnight and then the next day on the hearings. And after, about 25 years, I grew a little bored, I decided—and that was in addition to regular work because I usually did that on one day; I would fly up and fly back, but I tried to do most of those, of the hearings that they had.

I made a lot of contacts, and I think it was very beneficial to the department and as well as some of the organizations that I belonged to, and the Kiwanis³⁴ and others, that I paid my own way. Most of the businesses, they paid their own because when they saw me, they saw the health department; they didn't see me as an individual, but a lot of people didn't think that. But I think the community involvement with the citizens, I think, is very excellent.

CP: Which is so valuable to the public health missions.

JR: Some people don't, I don't think, see it that way, which, I guess, everybody has a right to their opinion, but I think if you're going to do an outstanding job, you've got to know the people and know the people that can be the so-called shakers and movers within the community.

CP: It takes a little more effort on our part.

JR: But it pays off in dividends in the long run.

CP: And it detracts, if you don't.

JR: Well, that's true.

CP: Not only does it pay off, if you do, but if you don't, it detracts from the success of your mission. Yes, it does. That's good.

JR: It makes a big difference in there. I had some information that I will leave with you, that is on Florida Medical Journal, and some of these in here are from Dr. Sowder. And another one I have in here is from Russell Jackson, and I won't read this article in here because it's somewhat in here, this is a military in the Florida, first state health officer, by E. Russell Jackson Jr., who knew my father, who was in the food handlers' trading business.

³⁴Kiwanis International was founded in Michigan in 1915. It's an international, volunteer-led service club that raises more than \$100 million a year to strengthen communities and serve children.

I happened to see that in a medical journal with my wife worked for Dr. Wensel in Bradenton for 41 years, and two brothers took his practice. And she stayed on about another seven years. So she has about 48 years in nursing, which is more seniority than I have over the Public Health Department.

But I did want to read some informational background on public health in Florida and give them some kind of information on the development of local health services and health departments, and the relationship between the state and the county, and how some of the laws were enacted and why.

And basically, we all know that the state board of health was formed in the late 1800s and that was because of an outbreak in epidemic of the yellow fever³⁵ in Jacksonville, in which they formed it. And they had a very limited budget; I think the budget was probably 40,000 dollars or so when it started there, and that was the only reason it was formed at that particular time.

So the public health in Florida, [reading] Florida suffered from epidemics and communicable disease similar to those in other parts of the United States and no less severe. Yellow fever was a terrifying and reoccurring plague. Smallpox³⁶ and cholera³⁷ was next on the list in the dreaded diseases.

These were many victims of tuberculosis³⁸, malaria³⁹, dengue fever⁴⁰, and as well as diphtheria⁴¹, measles⁴², whooping cough⁴³, and other diseases. And then the yellow fever was the first feared of all the diseases. And in late 1800s in Jacksonville and the epidemic in 1888, there were approximately 5,000 reported cases with over 400 deaths.

35Yellow fever is a viral infection spread by mosquitos and typically causes fever, muscle pain, backache, headache, nausea and in serious cases, jaundice and death. The specific epidemic that is talked about here is the Jacksonville yellow fever epidemic in 1888. This prompted state leaders to create the Florida state board of health on Feb. 20, 1889, which was forerunner to the Florida Department of Health.

36Smallpox is an eradicated virus for which there is no treatment or cure; it causes a rash that spreads from the extremities to other areas of the body and can lead to disfigurement and death in severe cases.

37Cholera is a bacterial disease that causes severe diarrhea and dehydration; it is usually spread in water and can become fatal if not treated early.

38Tuberculosis, commonly called TB, is an infection caused by *Mycobacterium tuberculosis* and is typically symptomized by respiratory inflammation and tussis.

39Malaria is a mosquito-borne infectious disease caused by parasitic protozoans belonging to the genus *Plasmodium*.

40Dengue fever is a mosquito-borne infectious disease caused by the dengue virus.

41Diphtheria is an infection caused by the bacterium *Corynebacterium diphtheria*.

42Measles is a highly contagious infection caused by the measles virus.

43Whooping cough, also known as pertussis, is a highly contagious bacterial disease caused by the bacterium *Bordetella pertussis*.

There would have been more death had there not been the good care provided with the limited resources available, much to the credit, for the care given to the patients must be attributed to the Key West physician, Dr. Joseph H. Porter⁴⁴, who was invited to Jacksonville and assigned the responsibility of coordinating, as part of the government, release service and the medical and nursing care. [end reading]

And I think Dr. Porter was the first state health officer in the state, at that time that they appointed him. And local health services, [reading] the state constitution adopted in 1885 provided, not only for a state board of health, but also authorized county boards of health. This showed and recognized, even at the time, that local government had a responsibility for this important function.

However, the initial experience with local public health in Florida was not good. Each county board of health, in its desire to commutative disease, adopted different regulations, including quarantine. This frequently interrupted movement of individuals or merchandise from one county to another and created an intolerable situation, according to Dr. Porter, who recommended the abolishment of county boards of health, and the legislature acted to do this.

Nevertheless, Dr. Porter saw the need for local public health entities and designated practicing physicians of various counties to serve as county agents. They were chiefly responsible for reporting communicable disease⁴⁵ and were required to provide annual reports to the state health officer. Subsequently, Dr. Porter appointed district health officers to cover areas of the state, providing supervision and services, as required.

The number reached a maximum of eight. [end reading] And they go on to indicate others that served in that capacity. [reading] In 1921, a bureau of communicable disease and health unit was established. Dr. George Dame, which was well known and well respected, and was in public health for a long time, as well as his son, who had been a district officer for four years, was appointed director after a meeting between, then, the state health officer, Dr. Farrell of the Rockefeller Foundation⁴⁶.

And it goes into basis of survey; a plan for county health units in Florida was prepared and submitted to the state board of health. The plan included program organization, staffing, financial support. The minimum personnel specified were a full time physician health officer, a nurse, a

⁴⁴Joseph Yates Porter (1847-1927) was Florida's first public health officer serving from 1889-1917 and the 13th president of the Florida Medical Association. He was instrumental in eradicating Yellow Fever, identifying the mosquito as its source of transmission.

⁴⁵Communicable diseases are diseases that are infectious.

⁴⁶The Rockefeller Foundation is an influential philanthropic organization that promotes the well being of humanity throughout the world.

sanitarian inspector, and an office assistant; that consisted of a minimum of four employees. The basic budget for such a staff was 10,000 dollars.

At least half the funds would be provided by the county, but the direct authority would be retained by the state health officer. The development of a county health unit efforts to initiate development of county health units in 1921 was stalled by a drastic cut in the funding of the state board of health.

Plans to establish unit in Palm Beach, Polk County's had to be shelved for many years. It was not until 1930 that Taylor County, which had already experienced the benefit results of a malaria and hookworm control program, organized the first county health department. Leon County followed in 1931 and then Escambia in '32. [end reading]

So it goes to show that it started early, but it took awhile to catch on with the finances and funding. And as you said, each county had different regulations, and you needed some central form to have a standard policy, or rule, or regulation was enacted because most of the rules were rules formulated by the state board of health under a law that they had enacted, and that would govern what was going on within the 67 county health departments.

As they used to say, Well, if you're just a mediocre employee, you can always transfer to another health unit if you didn't work out where you were. And you would cover all of them by the time you were retired—I say that in jest.

CP: (Laughs) I hope so.

JR: There were six or seven counties, and at that time, they issued tags by the county, if you were like county, whatever, five, with a designated county. And they had a tag with "68", and "68" didn't denote a county; normally, it was in Tallahassee. So because I worked for the state, I would get a "68" tag, and that way people wondered what county you are from because they didn't denote any county other than the 67.

But I think that would be interesting, as you couldn't cover all of it. I did work one time in DeSoto County, as they didn't have an environmental health director, and they assigned different health departments over there to work it. Although, I became more serious in providing a service, some of them only sent one person. I would send two or three and go with them and set up radio communications; I got radios into all our cars through Civil Defense⁴⁷.

⁴⁷Florida's Civil Defense Program was established in 1941 as a way to respond to emergency situations by authorizing local law enforcement the right to act across jurisdictional lines.

And after I got them all working and up, the county administrator took all the radios from us, and we had to find other sources on our own, which we did. And that worked out well in DeSoto County. And we found some irregularities in permitting and not permitting, and this type of thing there because they didn't have the staff. And—

CP: Did they have an organized health department?

JR: They had an organized health department. The health officer didn't stay that long, and I got to know the county administrator and the chairman of the county commissioners. And when he would come down to the health department, he'd come down and see me; he wouldn't even talk to the health director.

CP: They knew you.

JR: They changed quite a bit, and it was interesting over there. As I said, unless you were born and raised there, you were an outsider. So I knew it's a cow country, so I had the sheriff there call or write over to the sheriff there and say that I was going to be in the county working. And then I got a beverage agent to go on in and inspect all the alcoholic beverage places in the county because he carried a gun, and he had the authority with the alcoholic beverage license.

We found a few cases where they had cigarettes that didn't have the state stamp on them. And one tavern that we couldn't find was on one corner and they moved it down to another corner—well, we couldn't find it, but they never got any approval or told anybody, they just moved it, but I say, that was quite an experience.

And I'm used to writing letters and sending copies to all the people concerned, and when I started writing letters and sending garbage to the county administrator and different people, he called me in and says, "You know, we don't do that here." And I said, "Well, I'm sorry, but I don't work for you. I work for the health director in Sarasota County, and they have assigned me here.

And you know, if you have a problem with that, I think you should take it up with him. I understand your position, but, at the same time, I do it so everybody knows what I am doing, and they can be aware of it, rather than not knowing, I think is even worse." So they kind of implied that, I don't know how you're going to get enforcement here.

And I said, “Well, I’ll get enforcement because I’ll file the charges in Sarasota County for DeSoto County.” Because the state attorney’s office had the three counties, so if I had to file anything, I could file there; I didn’t have to go through them. But it was interesting, somewhat frustrating sometimes, but we were there just about everyday with our staff—

CP: Oh boy.

JR: —and we accomplished a lot in the three or four months that we were there. I was glad when we no longer had to go over there.

CP: (CP laughs) I am sure of that.

JR: They did get an environmental health director, and I assume they did get a health director there.

CP: For curiosity did you have any track with the hospital? With the mental health hospital there?

JR: No, we checked the food facility there, but we didn’t get into that aspect of it because—

CP: Just curious.

JR: —usually the hospital’s consultants that did hospitals went into those. And so, they didn’t ask us in. And I thought that maybe we were probably in enough trouble as it is being over there, without stirring—

CP: Asking for some more.

JR: —stirring something else up there. But it has been rewarding to me, and I thoroughly enjoyed it. I’m glad I’m retired; I miss the people, but I don’t miss the work, with all the new computers, and all the new equipment, and all the state agencies, and the rules and regulations. There’s no such thing as, in my opinion, as instant service.

And I would imagine it’s somewhat frustrating because even sometimes I’ll call the health department in Sarasota and ask for something, and it doesn’t get done as fast as what I would like

to do it. And I always took a personal interest in doing things, and any complaint that was filed with any law enforcement agency, I would personally handle myself and write a letter to that individual to let them know what we'd done and that we did it right away because I thought that was a good working relationship.

CP: That is good PR.

JR: And that any major problem within the city, whether it be an overflowing septic tank, or a grease trap, or something of that nature, I would personally take somebody with me and go out and call the city because I had connections that I could call on and get things done, where other people would get frustrated over even where to start.

I could get them to pick up stuff that they normally would not pick up because I asked them to. And I would go out and have lunch with the supervisors of the city and the county and different things so that if something unusual came up—

CP: You were in good relationships.

JR: That's right. And if they needed a favor and wanted us to look into something, we did the same way too. But, a lot of times, they'd cut off the water on Friday and then call us into the city. And I thought, Well, you know, here's an apartment complex, and they can't go down and pay the bill. And I would say, Couldn't you wait until Monday?

Wait until Monday, and then call them, and then you give them a chance. So I would go out and give them notice that come Monday, I'd be back out there, maybe five o'clock in the afternoon, and if you didn't have it done then we would have to ask you to discontinue then.

And most of the time they would go down and pay, but I thought it was ironic that in a lot of cases they would let the individuals on commercial build up a big bill. I didn't understand that, why they'd let them get by so far and then call me, and says, They don't have any water. As if it's all my fault.

(CP laughs) And I had one case, there was no water in the building, and it was hard to catch this man because he came and was gone much of the time, and then the HRS office there, I think I understood, paid his bill. They didn't call me.

CP: What?

JR: And then it happened again, and I just said, “It’s happened again. You didn’t pay your bill; they cut off your water. You get it fixed, and you get it paid, or else I am going to bring a deputy sheriff out there.” So I took a deputy sheriff out there, and he issued him a citation. And he was very unconcerned; he said he had to go to a ball practice or something, so he issued it to him. And I said, “Now, if you don’t take care of it, we’re going to be back.”

And then the HRS local district office there in Sarasota was a little unhappy with me because I filed charges against him because they were working with him. But they didn’t tell me this, and there was no communications. And I felt like I was doing my job, and I didn’t, you know—but anyway, some of those things happen, and we finally got it worked out. But I always had a good relationship with everybody.

CP: You sure did, Jeff.

JR: Ms. Rye was always an excellent individual who worked herself up the hard way to become a district administrator down there and, you know, she passed away.

CP: No, I didn’t know that.

JR: I think she died of a heart attack. She got elected to the city council after she retired.

CP: Yes, I was aware of that, but I didn’t know she had died.

JR: Yeah, she was a very involved community worker. I always respected her. And I guess you make enemies no matter what you do right or wrong, you have to do what the right thing is. I think she would have done real well.

CP: Let me ask you, Jeff, you know, of all this very, very exciting history you have had, what was the most satisfying piece of your career?

JR: I think the local ordinances was excellent that we had adopted because either the state could not regulate it state wide and some of the cities didn’t want to, so some of it only applied, I guess, in the counties instead of the cities. And we had many, as I indicated to you before, that we had the various ones in county ordinances because there was a lack of it in the regulations.

And as I said, some of those were the swimming pool local ordinances, one was in child day care that we had in there. One of them that we regulated was animals, dogs. The reason for that though, we'd have odors, and what is odors? What is harmful or maybe objectionable or obnoxious to one, may not be to another; and how do you define odors; and is it a degree of odors?

So I had a law ordinance passed in the county, whereby if they had excessive animal waste where they kept dogs, and this came up because of hunting dogs, and odors, and they wouldn't keep the pen clean. So they had excessive amounts, so we would go out and tell them that they needed to clean up the pens, and we would be back the next day, and then we'd write them a letter and put them on notice.

And sometimes they wouldn't clean them up, and so when they didn't and as, there again, I would call the deputy; and he'd come out, and observe the waste, and he would write them up. And then the guy said, "Well, I'm not going to sign the citation." And I said, "Hey, it makes no difference to me whether you sign it or not."

I said, "Either you're going to sign it, or this deputy sheriff here is going to arrest you, handcuff you, put him in the car, take you down to jail, and you're going to have to post bond, and you're going to miss supper. Now, it's up to you. Now, do you want to sign it, or do you want to go to jail? Because I don't care, this is a man that's going to tell you what's going to happen. But I'm just explaining it to you."

Well, I never did get any of them that didn't refuse to sign the citation. And normally, they would give them a fine and put them on notice. That was an excellent tool that they had never had before.

CP: Yeah, you were tough.

JR: Well, I was fair, but whatever I said, I could back up; if I didn't, I wouldn't say it. And we had a good well-drilling program there in Sarasota County, which is still there now, tried to have better quality water and to prevent saltwater intrusion⁴⁸ where they had a three-inch well, I mean a four-inch well to a two-inch well and then they grouted⁴⁹ that. And that was one of our big programs that we had within the county.

⁴⁸Saltwater intrusion occurs in coastal freshwater aquifers when the different densities of both the saltwater and freshwater allow the ocean water to intrude into the freshwater aquifer.

⁴⁹Grout is a liquid form of concrete used to fill gaps.

And we had other local ordinances that we passed, food handler's permit ordinance, and others. As I said, we needed stronger ordinances locally, and we were able to get them, and they did a good job. And that was, I think, a big accomplishment. I guess the biggest improvement was, I guess, in refrigeration, especially in cherry plants, and on obtaining central water and central sewer facilities, and doing away with septic tanks, and outlawing privies that they had. That was always a problem in the rural community.

CP: So that's your most satisfying, what's the most disappointing piece of your whole career?

JR: I guess the most disappointing was the state legislature enacting laws, eliminating programs from the health department to, I guess, fragment what we were doing. They wouldn't give us the staff or the money, but they would create new departments and give them all the money that they wanted and all the positions that they wanted.

And we had a hard time keeping staff because when we would train somebody for two years, we had a lot invested, and they would go to another state agency for maybe 10, 15 percent more money to give them a state car, and that was an enticement for them, so sometimes I thought we were training grounds for other state agencies. And, as you know, in the past, it used to be merit.

You got raises based on merit that was anywhere from zero to ten percent and that was up to management. And then union came in, and then they changed all of that to where you, basically, all you got was a five percent raise, that's across the board. If you were a—I don't care what you did—you did five hundred percent more than this other person, just mediocre and just borderline, they all got five percent. Now, I think they only give about three percent, whatever the state—

CP: That's still across the board though?

JR: That's across the board to everybody, that it is hard to get any different. And it's ironic; it's my understanding that in a legislature you had to be there ten years to get a retirement, and they changed the law from ten years to eight because they are four year terms. So if you got two terms, you got a retirement just like they said in the dairy farm.

I don't know what it was, it was just a hypothetical number, they said, Ten cows made a dairy farm. And I was wondering, well, who in the legislature came up with ten cows to make a dairy farm. And I said, Well, I guess it's probably because his mother maybe had nine cows so they made it ten. I don't know, that's just an observation; I come up with some crazy ones sometimes.

But that's—and I think the legislature also put in, they didn't usually get any raises. I think they put in on one bill, it's my understanding, I may be wrong, that they put in there that whenever the state employees got a raise, then they would get a raise so it'd be automatic.

CP: Well, this year they got raises when the state employees didn't, though.

JR: Oh, that's right. They got them in advance, but it—on retirement system, when I retired, I don't think I got all of the information, you know, that we should get sometimes when you do retire because if you retire—you can retire after 30 years of service regardless of age, or at age 65, and they used to take your best ten years, now they take your best five.

But if you retire less than 65 and you're married, your insurance will be about 450 dollars a month, and that makes a difference if you want to know upfront what you're going to have in there. But one thing they did do with the union, which I was never in the union because I was exempt from the union, I was management, is that they did give the retirees a three percent raise every July.

And sometimes the retirees got three percent raise and the legislature didn't fund any for the employees that were working; they didn't get any that year. And sometimes they didn't give any raises, or they gave a five percent raise for two years. And if you're at the top of your bracket—I think one time I remember everybody got a raise but myself because I was at the top of my bracket for the range that they had because they had ranges.

So here I was, in charge of 35 employees, responsible for them, and everybody got a, I think, five percent raise and I didn't get any, but that was the system. It did concern me, but it didn't bother me.

CP: Jeff, let me ask you, 75 years from now, a young person watching this tape, what would you want them to know? A young person interested in public health, what would you have to tell them?

JR: Well, I think in getting in public health is going to be something that you have to be committed to, and when you take on the responsibilities to do the very best you can, be honest, and forthright, and to be courteous to individuals because everybody deserves courtesy. But I think the main thing is that the knowledge that they have, and the computers, and everything they have now is sophisticated, it gets complicated.

And sometimes you deal with things everyday, and everyday you assume the public knows what you're doing or assume they know the regulations. And you should take a little bit of time to be humble and explain it and help them through the system, and I don't think sometimes that's the case. They sometimes handicap the system, rather than to help the system.

But if you don't like your work then get out, because you're going to make everybody else miserable. I liked my work; it wasn't work. But then towards the end, they got too many complications, and you did the best you could. But I didn't really like it that much, and that's when I retired, when I was 65, because with social security, I was really—I could make more money retired than I could working.

But that wasn't the issue, if it was still back the way it was, I think I probably would still be working. I was, I think, what they call, when you're senile, I guess. The good old days, that there were such good old days, they were to me with the state board of health when the people you could call on, and depend on, and get down, and you were communicating, and talking, and you had a dialogue and relationship; and now, it's just a lot of confusion and a lot of paperwork.

So if you want to get into something rewarding, try to find something that has a retirement system, no matter what you do, because you're certainly not going to live on social security. If you think social security is a cure-all in your retirement plan, and it's never been that. And people assuming that it is, it isn't going to be that way.

Also in retirement, if you stop work and you think you're going to work again, you ought to freeze your benefits because I know an individual who didn't freeze his benefits, and then he went back to work two and a half years later, and then he quit, and they only gave him three years of the last five and that's all he got paid on. So he really didn't get what he really paid into.

And in the beginning, you didn't have to pay social security when I started with the health department in '49, it was optional, and not paying it, we got 2 percent retirement instead of 1.6. And then later, when I got married, I thought I should have it for my wife, so then I took it out and then they later made it mandatory, but there for about eight or nine years, I got 2 percent.

Law enforcement now gets 3 percent, and we get I think 1.6, but then I certainly think they deserve it. And they only have to put in 25 years and retire, and they have a lot of fringe benefits. But I'd definitely get into something that had fringe benefits and look at it that way.

And that's about 35 percent of your salary, so people want to see what's in their hand when they get paid, but you don't look at that, you look down the road because if I thought working at 175

dollars a month I'd have never taken the job, but I knew it would pay off in the long run if you stuck with anything.

And you're going to have to—that's the only job I really ever had. They say now, Oh, most people change jobs seven, eight, nine times in their lifetime. Well, this is the only—I had part time jobs in school and all, but this is the first real job I had, and I thoroughly enjoyed it. But it's whatever you put into it. If you don't put anything into it, you're not going to get anything out of it.

CP: Mr. Jeff Ragan, let us thank you sincerely, and on behalf of the library system of the University of South Florida and the School of Public Health, we thank you greatly for coming by and sharing with us your very long and just beautiful career in public health, and you've put some mile posts. We got to switch, we can do some measuring the future historians are looking at. And I thoroughly enjoyed it. And Jeff, we thank you sincerely.

JR: I appreciate the opportunity to come here, and I appreciate your friendship, and Dr. Sowder's, and all the other people that I highly respected and still do.

CP: You've still got it all.

JR: Well, I hope so.

CP: Good, and I'm Skeeter Prather.

End of Interview