

[Report of the Medical Officer of Health for Hammersmith Borough].

Contributors

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LONDON BOROUGH OF HAMMERSMITH



**ANNUAL REPORT OF THE
MEDICAL OFFICER OF HEALTH
AND DIRECTOR OF COMMUNITY SERVICES
AND PRINCIPAL SCHOOL MEDICAL OFFICER
(INNER LONDON EDUCATION AUTHORITY)
FOR THE YEAR
1970**

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MEDICAL OFFICER OF HEALTH

AND DIRECTOR OF COMMUNITY SERVICES

AND PRINCIPAL SCHOOL MEDICAL OFFICER

(INNER LONDON EDUCATION AUTHORITY)

FOR THE YEAR

1970

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The Mayor Aldermen and Councillors of
the London Borough of

Ex-Officio: The Worshipful the Mayor:
Councillor Gordon Field

Mr. Mayor, Ladies and Gentlemen,

MEDICAL OFFICER OF HEALTH ANNUAL REPORT 1970
INTRODUCTORY LETTER

I have the honour to present the Annual Report of the Medical Officer of Health and Director of Public Health for the London Borough of Hammersmith.

Chairman:
Councillor R.P. Ground

INTRODUCTION:

With the agreement of the Inner London Education Authority, a report on the School Health Service in the Borough during 1970, which has been submitted to the Education Authority, is included in this Annual Report. Similarly, as your Medical Officer of Health in his capacity as Director of Community Services had, during 1970, responsibility for the Welfare and Children's Services, reports on these services are also set out.

Vice-Chairman:
Councillor Dr. J.H. Rose, M.B. Ch.B

VITAL STATISTICS:

Councillors:

The Registrar-General's estimate of the population of Hammersmith, as at mid-1970, was 4,830 less than that for 1969. In 1970, as compared with 1969, as did the percentage of total deaths which were due to bronchitis, the figure for the previous year being 10.7. In recent years one of the main causes of death has been tuberculosis which numbered nine and seven respectively in 1969 and 1970. There has been a substantial reduction in the number of deaths from specific causes to substantially reduced levels. The following table shows the number of deaths from the principal causes available for 1969 and 1970.

Mrs. J.J. Godwin-Austen	S.A. Matthews
Mrs. C. Ground	P.C. Perry, F.I.L.
E.C. Ibbot	Mrs. M.E. Porter
Mrs. M. James	S.H. de Voghelaere
Mrs. D.M.L. Joseph	W.H. Wearmouth
Mrs. C.J. Liardet	S.F. Lilley, A.C.A.

Co-opted Member:
Dr. O. Moses
(Representing Inner London Local Medical Committee)

Ex-Officio: The Worshipful the Mayor
Councillor Gordon Field

Chairman:
Councillor Mrs. D.M.L. Joseph

Vice-Chairman:
Councillor Mrs. M. James

Alderman Mrs. E. Finn, M.B.E.

Councillors:

- | | |
|--------------------|---------------------------|
| Mrs. G.M. Falkiner | D.R.P. Murray, M.A., Ph.D |
| Mrs. C. Ground | P.C. Perry, F.I.L. |
| R.P. Ground | Mrs. M.E. Porter |
| A.W. Simpson | |

Old Town Hall,
Fulham Broadway,
London, S.W.6.

Tel No. 01 385 1212

The Mayor Aldermen and Councillors of
the London Borough of Hammersmith.

Mr. Mayor, Ladies and Gentlemen,

MEDICAL OFFICER OF HEALTH ANNUAL REPORT 1970
INTRODUCTORY LETTER

I have the honour to present the Annual Report of the Medical Officer of Health and Director of Community Services of the London Borough of Hammersmith.

INTRODUCTION:

With the agreement of the Inner London Education Authority, a report on the School Health Service in the Borough during 1970, which has been submitted to the Education Authority by your Medical Officer of Health in his capacity as Principal School Medical Officer, is included in this Annual Report. Similarly, as your Medical Officer of Health in his capacity as Director of Community Services had, during 1970, responsibility for the Welfare and Children's Services, reports on these services are also set out.

VITAL STATISTICS:

The Registrar-General's estimate of the population of Hammersmith, as at mid-1970, was at 187,980, some 4,830 less than the estimate for 1969, a year in which there was an estimated reduction in population of the same order. Both the live and still birth rates showed a slight reduction in 1970, as compared with 1969, as did the percentage of total births which were illegitimate. 185 of Hammersmith residents died during 1970 from bronchial carcinoma, the figure for the previous year being 189. In recent years one has compared these figures with the deaths from pulmonary tuberculosis which numbered nine and seven respectively. The number of deaths from tuberculosis has been substantially reduced since the advent of specific therapy. The means to substantially reduce the number of deaths from bronchial carcinoma are also available. Why then are preventive measures not adopted?

INFECTIOUS DISEASE:

Since the inception of the London Borough of Hammersmith, the number of cases of measles notified each year has been as follows:-

1965 - 1907; 1966 - 1233; 1967 - 1075; 1968 - 496; 1969 - 410; 1970 - 624.

Immunisation against measles was brought into general use in Hammersmith during 1968, and there has been a reduction in the incidence of the disease as notified since that time. The latest figure is disappointing because the occurrence of measles, which causes significant morbidity particularly in younger children, could be reduced even further if more children were given advantage of this vaccine which is freely available. The incidence of food poisoning also remains too high and this fact underlines how essential the activities of the Chief Public Health Inspector, the Food Inspectors and the Public Health Inspectorate continue to be in relation

to food hygiene. Everyone concerned with the handling, processing, cooking or sale of food carries a heavy responsibility in ensuring that their products are safe from the health point of view.

The three cases of typhoid which occurred during 1970, were all infected when on holiday abroad. This is now-a-days the usual pattern.

Last year the Consultant Chest Physicians at both the Hammersmith and Fulham Chest Clinic drew attention to an increase in the number of new notifications of tuberculosis. During 1970, this trend was reversed at Hammersmith while at Fulham there was a slight increase in the female notifications only. Having regard to the population of Hammersmith it would be wrong to draw too many conclusions from the number of notifications received in a particular year. The remarks contained in the reports of both Chest Physicians, however, as to the age, sex and place of origin distribution, of the new notifications, indicate that the position is being kept under close scrutiny.

ENVIRONMENTAL HEALTH:

During 1970, the Public Health Inspectors continued to be most active in the housing field. Their work was orientated to repair and rehabilitation under the provisions of the Housing Act, 1969, rather than to the slum clearance powers contained in previous Housing Acts. Since approximately 70% of the dwelling units in the Borough were constructed during the period 1875 to 1919, it will be appreciated that many of these properties are sub-standard and a lesser number are unfit. A programme of extensive repair and rehabilitation, or demolition and redevelopment, which should be based on detailed survey and assessment of the most appropriate procedure in different parts of the Borough is, therefore, required.

PERSONAL HEALTH SERVICES:

The efforts to improve liaison and co-operation between this Authority's medical and nursing staff and the general practitioners and hospitals in the Borough, which were referred to last year, continued during 1970. This process, so essential to an efficient Health Service, will be continued to 1974. The Authority's Medical Officers, Health Visitors, Home Nurses and Midwives are in a position to be of great assistance to both the general practitioners and hospital consultants over a wide clinical field.

Once again, the Personal Health Services in Hammersmith proved of interest to a large number of visitors both from this country and overseas.

HEALTH EDUCATION:

In addition to the constant programme of Health Education which is conducted very largely on a person to person basis by Medical Officers, Health Visitors, Public Health Inspectors and other officers in the Health Department the Council's Health Education Exhibition continued to provide information on the Council's Health and Social Services as well as being a valuable demonstration of Health Education generally.

The Chief Dental Officer and his staff once again were enthusiastic in organising a valuable programme of Dental Health Education.

CONCLUSION:

The Chairmen and Members of the various Committees of the Council once more took a very great interest in the Community Services and sincere thanks is expressed to them for this. A feature of the London Borough of Hammersmith has been clear recognition of the close inter-relationship of the Council's services. It is a pleasure, therefore, to thank the Town Clerk and Chief

Executive as well as the other Directors, and their respective staffs, for all for all their co-operation and help during 1970.

Dr. A.B. Stewart, Medical Adviser to the Greater London Council and Inner London Education Authority and his colleagues at County Hall, were as usual available to provide understanding and advice during the year and one was most grateful for this.

I should like to thank also the Public Analyst, the Consultant Chest Physicians, and the Consultant Venereologist, for their co-operation and advice and, in particular, for their contributions to this Report. Similarly, the medical profession generally in the Borough have earned the gratitude of the Council's medical and nursing staff and myself for their helpful and co-operative attitude to the Department.

Reference is made in this Report to the substantial re-organisation of the Social Services and of the administrative structure of the Community Services which took place during 1970. This placed an exceedingly heavy burden on professional and administrative staff alike, and my sincere thanks are due to all of them for the manner in which they overcame the consequential difficulties.

I have the honour to be, Mr. Mayor, Ladies and Gentlemen,
Your obedient Servant,

A.D.C.S. CAMERON,

Medical Officer of Health and Director of Community Services

Headquarters Staff:

Medical Officer of Health,
Director of Community Services
& Principal School Medical Officer

Dr. A.D.C.S. Cameron,
M.B., Ch.B., D.P.H.

Chief Health Services Officer

Dr. C.C. Jansz,
M.B.B.S., D.C.H., D.P.H.

Chief Social Services Officer

J.L. Davidge, F.I.S.W.

Chief Public Health Inspector

G.W. Herrick,
M.B.E., D.P.A., Stat. Cert.,
M.F. Cert. (Retired Sept. 1970)

Chief Dental Officer

J. Collier,
Stat. Cert., M.F. Cert. (Appointed
Sept. 1970)

Chief Nursing Officer

P.T. Fuller, L.D.S., B.D.S.

Miss J. Surr,
S.R.N., S.C.M., H.V.

Administrative Officer

J.E. Burton, D.F.M.

Children's Officer

Mrs. M.J. Willans,
C.T.C. Letter of Recognition.

Principal Mental Health Social
Worker

Miss M.P. Docherty,
Dip. Soc. Studies.

Principal Social Worker (Health)

Miss F.B. Greig,
Cert. Soc. Science.

Chief Chiropodist

A.H. Carter,
F.Ch.S., S.R.Ch.

Consultant Staff:

The following are consulted in their professional capacities and their Reports appear later in this Report:

T. McLachlan, D.C.M., A.C.G.F.C.,
F.R.I.C., F.I.F.S.T., M.I.Biol.,
(Public Analyst).

Dr. J.L. Fluker, M.D., F.R.C.P.,
Director, Special Clinic,
West London Hospital.

Dr. H. Price, M.R.C.S. L.R.C.P.,
D.P.H., Consultant Physician,
Fulham Chest Clinic.

Dr. P. Stradling, M.D., F.R.C.P.,
Consultant Physician,
Hammersmith Chest Clinic.

28,288
14,104
22,600

FOR HAMMERSMITH

1970

2,384

337

182

1

1,011

1

1

MATERNAL MORTALITY
(1) ABORTION
(2) Other Causes
Deaths from Circulatory Diseases (all ages)
(under 4 years of age)
Deaths from Enteritis and other Diarrhoeal Diseases
Deaths from Measles (all ages)
Deaths from Cancer (all ages) (Lungs & Bronchus)
Deaths from Cancer (all ages)
Deaths from Whooping Cough (all ages)
Number of deaths

STATISTICS AND TABLES

The following statistical information relating to the Borough has been compiled from the Local and National Statistics issued by the Registrar-General in connection with population, live births, stillbirths and deaths.

The "area comparability" factors for use with crude births and death rates contain adjustments for boundary changes and make allowances for the way in which the sex and age distribution of the local population differs from that for England and Wales as a whole. In addition, the death rate "area comparability" factors have been adjusted specifically to take account of the presence of any residential institutions in each area. When local crude birth and death rates are multiplied by the appropriate "area comparability" factor, they are comparable with the crude rate for England and Wales, or with the corresponding adjusted rate for any other area.

Area (Acres)		3,995
Population:-		
Census 1961		222,124
Registrar - General's estimate mid - 1970		187,980
Rating:-		
Number of habitable dwellings		56,596
Rateable Value		£ 14,104,034
Product of a penny rate		£ 55,600
Mortality:-		
Number of deaths		2,364
Deaths from Whooping Cough (all ages)		-
Deaths from Cancer (all ages)		537
Deaths from Cancer (all ages) (Lungs & Bronchus)		185
Deaths from Measles (all ages)		-
Deaths from Enteritis and other Diarrhoeal Diseases (under 4 years of age)		1
Deaths from Circulatory Diseases (all ages)		1,011
MATERNAL MORTALITY		
(1) ABORTION		1
(2) Other Causes		1

Principal Social Worker (Health)

Miss F.B.Greig,
Cert. Soc. Science.

Chief Chiropodist

A.H.Carter,
F.Ch.S., S.R.Ch.

STATISTICS AND TABLES	HAMMERSMITH			England and Wales (Total)
	Males	Females	Total	
Estimated mid-year home population.	-	-	187,980	48,987,700
Live births				
Total	1,640	1,507	3,147	784,482
Legitimate	1,357	1,265	2,622	719,738
Illegitimate	283	242	525	64,744
Stillbirths				
Total	20	15	35	10,341
Legitimate	16	12	28	9,297
Illegitimate	4	3	7	1,044
Total live and still births				
Total	1,660	1,522	3,182	794,823
Legitimate	1,373	1,277	2,650	729,035
Illegitimate	287	245	532	65,788
Deaths of infants under 1 year of age				
Total	40	18	58	14,269
Legitimate	30	13	43	12,592
Illegitimate	11	5	16	1,677
Deaths under 4 weeks of age				
Total	33	14	47	9,663
Legitimate	27	11	38	8,548
Illegitimate	7	3	10	1,115
Deaths under 1 week of age				
Total	31	14	45	8,328
Legitimate	26	11	37	7,343
Illegitimate	5	3	8	985
Deaths - all ages	1,262	1,102	2,364	575,208

	Hammersmith	England and Wales
Live birth rates		
Livebirths per 1,000 home population (crude rate)	16.7	16.0
Area comparability factor	.86	1.00
Local adjusted rate	14.4	16.0
Ratio of local adjusted rate to national rate	.90	1.00
Illegitimate live births as percentage of all live births	17	8.3
Stillbirth rate		
Stillbirths per 1,000 total live and still births	11	13
Infant mortality rates		
Deaths under 1 year per 1,000 live births	19	18
Deaths of legitimate infants under 1 year per 1,000 legitimate live births	16	17
Deaths of illegitimate infants under 1 year per 1,000 illegitimate live births	30	26
Neonatal mortality rate		
Deaths under 4 weeks per 1,000 live births	15	12
Early neonatal mortality rate		
Deaths under 1 week per 1,000 total live births	14	11
Perinatal mortality rate		
Stillbirths and deaths under 1 week combined, per 1,000 total live and still births	25	23
Deaths rates, all ages etc.		
Deaths per 1,000 home population (crude rate)	12.6	11.7
Area comparability factor	1.06	1.00
Local adjusted rate	13.4	11.7
Ratio of local adjusted rate to national rate	1.14	1.00

VITAL STATISTICS OF WHOLE DISTRICT

1965 - 1970

Year	Population to middle of each year Registrar General's Estimate	Live Births		Total Deaths Registered in the District		Transferable Deaths		Net Deaths belonging to the District			
		Number	Rate per 1,000 Pop.	Number	Rate per 1,000 Pop.	Of Non-Residents registered in the District	Of Residents not registered in the District	Under 1 year of age		At all ages	
								Number	Rate per 1,000 Live births	Number	Rate per 1000 Pop.
1	2	3	4	5	6	7	8	9	10	11	12
1965	215,240	4,433	20.16	2,251	10.5	788	995	86	19.4	2,458	11.4
1966	213,770	4,155	19.4	2,316	10.8	774	973	82	19.7	2,515	11.8
1967	211,720	3,992	18.9	2,244	10.6	783	915	65	16.3	2,376	11.2
1968	197,590	3,550	18.0	2,389	12.1	866	882	68	19.2	2,405	12.2
1969	192,810	3,414	17.7	2,438	12.6	890	857	61	18.0	2,405	12.5
1970	187,980	3,147	16.7	2,436	12.6	891	819	58	19.0	2,364	12.6

(a) Population:

Once again the Registrar-General's estimate of our population shows a decrease, the figures for 1970 of 187,980 being 4,830 less than the previous year. The estimated population of children aged under 15 years is given as 36,000 made up as follows:-

Under 1 year	3,240
1 - 4 years	11,460
5 -14 years	21,300

The estimated figure for persons aged 65 years and over is given as

25,700

NATURAL INCREASE OR DECREASE OF THE POPULATION DURING THE PAST 16 YEARS

Year	Population	Excess of Births over Deaths
1955	233,300	852
1956	230,400	940
1957	227,900	1,162
1958	224,900	1,219
1959	222,200	1,200
1960	221,250	1,615
1961	219,510	1,611
1962	218,690	1,618
1963	217,360	1,887
1964	216,940	2,100
1965	215,240	1,975
1966	213,770	1,640
1967	211,720	1,616
1968	197,590	1,145
1969	192,810	1,009
1970	187,980	781

(b) Births:

The corrected number of births was 1,640 males, 1,507 females giving a total of 3,147 compared with 3,414 in 1969. This gives an annual rate of 16.7 per thousand of the population. The actual decrease in number of 267 comprised a decrease of 162 legitimate births and 105 illegitimate births. This decrease in illegitimate births, amounting to 20% over the previous year, is most pleasing. The rate, however, even now is double that for England and Wales as a whole.

(c) Deaths:

Deaths registered during the year numbered 2,436. From this figure must be deducted 891 for non-residents transferred to their home towns. To counter balance this must be added a total of 819 residents of the

Borough who died in other parts of England. This gives the corrected figure of deaths as 2,364 comprising 1,262 males and 1,102 females. Of the outward transferable deaths, 883 occurred in hospitals within the Borough.

DEATHS FROM CANCER DURING THE PAST SIXTEEN YEARS

Year	Population	Deaths	Rate per 1,000 pop.
1955	233,300	544	2.3
1956	230,400	498	2.2
1957	227,900	520	2.3
1958	224,900	528	2.3
1959	222,200	552	2.5
1960	221,250	562	2.5
1961	219,510	576	2.6
1962	218,690	569	2.6
1963	217,360	562	2.6
1964	216,940	602	2.8
1965	215,240	572	2.6
1966	213,770	610	2.8
1967	211,720	575	2.7
1968	197,590	581	2.9
1969	192,810	571	3.0
1970	187,980	537	2.9

(d) Infant Mortality

The number of deaths of infants under one year of age during the year was 58, giving a mortality rate per 1,000 live births of 19.

INFANT MORTALITY - 1970 and previous 15 years.

Year	Live Births	Deaths of Infants	Deaths of Infants per 1,000 live births
1955	3,408	97	28.4
1956	3,545	84	23.7
1957	3,674	95	25.8
1958	3,792	81	21.4
1959	3,821	94	24.6
1960	4,075	91	22.3
1961	4,119	74	18.0
1962	4,280	101	23.6
1963	4,564	97	21.2
1964	4,467	102	22.8
1965	4,433	86	19.4
1966	4,155	82	19.7
1967	3,992	65	16.3
1968	3,550	68	19.2
1969	3,414	61	18.0
1970	3,147	58	19.0

(e) Maternal Mortality

There was 1 maternal death during the year due to abortion and 1 from other causes.

MATERNAL MORTALITY - 1970 and previous years

Year	Number of Deaths		Number of live births	Maternal death rate for 1,000 live births
	Pregnancy, Child Birth, Abortion			
1955	4		3,408	1.17
1956	-		3,545	-
1957	3		3,674	0.82
1958	3		3,792	0.79
1959	2		3,821	0.52
1960	1		4,075	0.25
1961	1		4,119	0.24
1962	3		4,280	0.7
1963	-		4,564	-
1964	-		4,467	-
1965	2		4,433	0.45
1966	1		4,155	0.24
1967	4		3,992	1.0
1968	3		3,550	0.8
1969	1		3,414	0.29
1970	2		3,147	0.63

INFANT MORTALITY RATES - ENGLAND AND WALES & VARIOUS OTHER COUNTRIES

Deaths under 1 year per 1,000 live births

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
England and Wales	25	24	23	23	22	22	22	22	21	20	19	19	18	18	18
Scotland	30	29	29	28	28	27	26	27	26	24	23	23	21	21	21
Northern Ireland	32	29	29	28	28	27	27	27	27	26	25	26	23	24	24
Irish Republic	37	36	33	35	32	30	30	29	27	27	25	25	25	21	21
Australia	22	22	21	20	22	20	19	20	20	19	18	18	18	18	18
Canada	31	32	31	30	28	27	27	27	26	25	24	23	22	21	19
Chile	121	113	117	127	120	127	116	121	111	114	107	108	100	-	-
Denmark	25	25	23	22	22	22	22	20	19	19	19	17	16	16	15
France	39	36	34	32	30	27	26	26	26	23	22	22	17	17	16
Italy	49	48	50	48	45	44	40	41	40	36	36	34	33	32	30
Netherlands	20	19	17	17	17	17	16	15	14	15	14	14	13	13	-
New Zealand	22	19	20	19	20	20	19	20	20	19	20	18	19	20	17
Sweden	17	17	17	16	16	16	16	15	15	14	13	12	13	-	-
U.S.A.	27	26	26	26	26	26	25	26	25	24	25	23	22	22	-

N.B. - Figures not available

THE CAUSES OF DEATH AT DIFFERENT PERIODS
OF LIFE IN HAMMERSMITH DURING 1970

Cause of death	Sex	All Ages	Under 4 Weeks	4 Weeks & under 1 year	1 - 4
B4 Enteritis and other Diarrhoeal Diseases	M	1	-	-	1
	F	-	-	-	-
B5 Tuberculosis of Respiratory System	M	5	-	-	-
	F	4	-	-	-
B6 (1) Late effects of Respiratory T.B.	M	4	-	-	-
	F	-	-	-	-
B6 (2) Other Tuberculosis	M	-	-	-	-
	F	2	-	-	-
B11 Meningococcal Infection	M	-	-	-	-
	F	1	-	-	1
B18 Other infective and Parasitic Diseases	M	7	2	-	-
	F	1	-	-	-
B19 (1) Malignant Neoplasm, Buccal Cavity etc.	M	5	-	-	-
	F	5	-	-	-
B19 (2) Malignant Neoplasm, Oesophagus	M	7	-	-	-
	F	6	-	-	-
B19 (3) Malignant Neoplasm, Stomach	M	29	-	-	-
	F	25	-	-	-
B19 (4) Malignant Neoplasm, Intestine	M	34	-	-	-
	F	33	-	-	-
B19 (5) Malignant Neoplasm, Larynx	M	2	-	-	-
	F	-	-	-	-
B19 (6) Malignant Neoplasm, Lung, Bronchus	M	140	-	-	-
	F	45	-	-	-
B19 (7) Malignant Neoplasm, Breast	M	-	-	-	-
	F	37	-	-	-
B19 (8) Malignant Uterus	F	12	-	-	-
B19 (9) Malignant Neoplasm, Prostate	M	25	-	-	-
B19 (10) Leukaemia	M	2	-	-	-
	F	4	-	-	-
B19 (11) Other Malignant Neoplasms	M	66	-	-	-
	F	60	-	-	-
B20 Benign and Unspecified Neoplasms	M	3	-	-	1
	F	2	-	-	-
B21 Diabetes Mellitus	M	8	-	-	-
	F	11	-	-	-
B22 Avitaminoses, Etc.	M	-	-	-	-
	F	1	-	-	-
B46 (1) Other Endocrine Etc. Diseases	M	3	-	-	-
	F	3	-	-	-
B23 Anaemias	M	2	-	-	-
	F	5	-	-	-
B46 (2) Other Diseases of Blood, Etc.	M	-	-	-	-
	F	1	-	-	-

Cause of Death	Sex	All Ages	Under 4 Weeks	4 Weeks & under 1 year	1 - 4
B46 (3) Mental Disorders	M	2	-	-	-
	F	4	-	-	-
B24 Meningitis	M	-	-	-	-
	F	1	-	-	-
B46 (4) Multiple Sclerosis	M	2	-	-	-
	F	3	-	-	-
B46 (5) Other Diseases of Nervous System	M	16	-	-	-
	F	14	-	-	-
B26 Chronic Rheumatic Heart Disease	M	18	-	-	-
	F	24	-	-	-
B27 Hypertensive Disease	M	18	-	-	-
	F	20	-	-	-
B28 Ischaemic Heart Disease	M	322	-	-	-
	F	197	-	-	-
B29 Other Forms of Heart Disease	M	38	-	1	-
	F	70	-	-	-
B30 Cerebrovascular Disease	M	65	-	-	-
	F	124	-	-	-
B46 Other Diseases of Circulatory System	M	42	-	-	-
	F	73	-	-	-
B31 Influenza	M	4	-	-	1
	F	6	-	-	-
B32 Pneumonia	M	100	1	5	1
	F	111	-	1	-
B33 (1) Bronchitis and Emphysema	M	126	-	-	-
	F	50	-	-	-
B33 (2) Asthma	M	5	-	-	-
	F	6	-	-	-
B46 (7) Other Diseases of Respiratory System	M	13	-	-	-
	F	11	-	1	-
B34 Peptic Ulcer	M	12	-	-	-
	F	5	-	-	-
B35 Appendicitis	M	-	-	-	-
	F	1	-	-	-
B36 Intestinal Obstruction and Hernia	M	8	2	-	-
	F	10	1	-	-
B37 Cirrhosis of Liver	M	4	-	-	-
	F	3	-	-	-
B46 (8) Other Diseases of Digestive System	M	10	-	-	-
	F	14	-	-	1
B38 Nephritis and Nephrosis	M	5	-	-	-
	F	7	-	-	-
B39 Hyperplasia of Prostate	M	5	-	-	-

Age in years							
5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 & over
-	-	2	-	-	-	-	-
-	-	-	-	-	1	-	3
-	-	-	-	-	-	-	-
-	-	-	-	-	-	1	-
-	-	-	1	-	1	-	-
-	-	-	-	2	-	1	-
1	2	2	1	2	3	3	2
-	-	-	-	-	1	4	9
-	-	2	3	2	2	4	5
-	-	1	-	1	5	7	10
-	-	-	1	-	4	4	9
-	-	-	1	-	1	6	12
-	-	-	7	25	102	91	97
-	-	-	2	1	21	44	129
1	1	-	-	1	10	10	15
-	-	-	-	-	5	15	49
-	-	-	2	3	9	26	25
-	-	-	3	6	14	28	73
-	-	-	-	3	6	18	15
-	-	-	-	2	4	14	53
-	-	-	-	-	-	2	1
-	-	-	-	-	3	2	1
2	-	-	-	8	4	25	54
-	1	-	-	2	1	16	90
-	-	-	-	5	24	47	50
-	-	-	-	-	4	14	32
-	1	-	1	-	2	-	1
-	1	-	-	-	1	4	-
-	-	-	-	-	3	6	4
-	-	1	-	1	1	3	4
-	-	-	-	2	-	4	6
-	-	-	-	1	1	1	2
-	-	-	-	-	-	-	-
-	-	-	-	-	1	-	-
-	-	-	-	-	4	1	1
-	-	-	-	1	-	3	5
-	-	-	-	-	1	1	-
-	-	-	-	1	2	1	1
-	-	-	-	-	1	1	1
-	-	-	-	2	3	2	3
-	-	-	-	-	1	5	7
-	-	-	-	1	2	1	1
-	-	-	-	1	3	1	2
-	-	-	-	-	1	-	4

Cause of Death	Sex	All Ages	Under 4 Weeks	4 Weeks & under 1 year			
					1	-	4
B46 (9) Other Diseases, Genito - Urinary System	M	5	-	-	-	-	-
	F	9	-	-	-	-	-
B40 Abortion	F	1	-	-	-	-	-
B41 Other Complications of Pregnancy, Etc.	F	1	-	-	-	-	-
B46 (10) Diseases of Skin, Sub - cutaneous Tissue	M	-	-	-	-	-	-
	F	1	-	-	-	-	-
B46 (11) Diseases of Musculo - Skeletal System	M	5	-	-	-	-	-
	F	12	-	-	-	-	-
B42 Congenital Abnormalities	M	7	2	1	-	1	-
	F	5	-	2	-	-	-
B43 Birth Injury, Difficult Labour, Etc.	M	18	18	-	-	-	-
	F	5	5	-	-	-	-
B44 Other causes of Perinatal Mortality	M	8	8	-	-	-	-
	F	8	8	-	-	-	-
B45 Symptoms and Ill Defined Conditions	M	-	-	-	-	-	-
	F	7	-	-	-	-	-
BE47 Motor Vehicle Accidents	M	13	-	-	-	-	-
	F	7	-	-	-	-	-
BE48 All Other Accidents	M	21	-	-	-	-	-
	F	19	-	-	-	-	-
BE49 Suicide and Self-Inflicted Injuries	M	16	-	-	-	-	-
	F	11	-	-	-	-	-
BE50 All Other External Causes	M	11	-	-	-	2	-
	F	4	-	-	-	-	-
<u>TOTAL ALL CAUSES</u>	M	1,262	33	7	-	7	-
	F	1,102	14	4	-	2	-
		2,364	47	11	-	9	-

Age in Years							
5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 & over
-	-	-	-	-	2	2	1
-	-	-	1	-	-	4	4
-	1	-	-	-	-	-	-
-	1	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	1
-	-	-	1	-	3	-	1
-	-	-	-	2	2	1	7
1	1	-	1	-	-	-	-
1	1	-	-	1	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-
-	-	-	-	1	-	-	6
-	3	3	-	2	2	1	2
-	2	-	-	-	-	2	3
1	2	3	3	3	3	2	4
-	2	1	3	2	2	2	7
-	2	3	5	4	-	1	1
-	2	3	1	-	3	2	-
-	4	2	1	-	1	-	1
-	2	-	-	-	-	1	1
8	17	18	34	95	296	372	375
3	15	8	16	47	136	261	596
11	32	26	50	142	432	633	971

PHYSICAL AND SOCIAL CONDITIONS

The London Borough of Hammersmith covers an area of 3,995 acres, bounded on the South by the Thames, on the North by Brent, to the East by Kensington and Chelsea, and to the West by Ealing and Hounslow.

The subsoil in the Northern section of the Borough is mainly clay, whilst in the South there is a layer of some twenty feet of gravel over blue clay. There is a variation of approximately 120 feet in elevation from the river to the Northern boundary whilst the lowest point is 13 feet above sea level.

There are more than 900 factories of varied nature within the Borough and most trades are represented. This development is undoubtedly due to the excellent water, road, and rail transport facilities available. Of equal importance to the industrialist and the resident alike are the comprehensive passenger transport services of the area which, for eighteen hours a day, provide train and bus schedules to most parts of London and to surrounding districts. The Borough is easily accessible to London Airport.

Hammersmith has all the usual amenities for recreation and relaxation. There are swimming baths at Lime Grove and North End Road, whilst Bloemfontein Road has an open-air swimming pool measuring 150 feet by 75 feet.

For the onlooker there is a very wide choice indeed as, at most week-ends, the river is a spectacle with racing eights, sailing boats and skiffs from the various rowing and sailing clubs. The highlights of such activities are undoubtedly the Oxford and Cambridge Boat Race and the Head of the River Race, both held in the Spring.

The White City Stadium stages national and international athletics, and greyhound racing, whilst the Royal International Horse Show, (Patron - H.M. The Queen), and organised by the British Horse Society, is also held there. Olympia attracts thousands to its well-known exhibitions and shows; whilst the B.B.C. Television Centre in Wood Lane and Lime Grove Studios, which provide entertainment for millions, are household names.

The Borough enjoys many sporting facilities, and includes the Association Football grounds of Chelsea, Fulham and Queen's Park Rangers in its area.

EPIDEMIOLOGY

Notification of Infectious Disease

A total of 1057 cases of infectious disease were notified during the year and of these 147 were removed to hospital.

Incidence of Infectious Disease

MEASLES

There was a small increase in the number of cases of measles notified.

DYSENTERY

There was a decrease in the number of cases notified. No outbreaks were involved.

FOOD POISONING

There was also a decrease in the number of food poisoning cases notified.

HEALTH SERVICES

A. EPIDEMIOLOGY

Of interest are the different phage typings identified as shown:

Salmonella	Anatum	1
	Angona	10
	Brandenburg	1
	Bradford	1
	Enteritidis	8
	Infantis	1
	Muenchen	1
	Montevideo	1
	Newport	2
	Ohio	1
	Panama	7
	Reading	2
	St. Paul	2
	Tennessee	2
	Thompson	1
	Typhimurium	19

Other infections were due to unknown causes.

TYPHOID

There were three notified cases of typhoid concerning residents of the Borough. The patients were removed to hospital and all contacts proved to be clear.

SMALLPOX

No case of smallpox was notified during the year.

Notifications were received from Health Authorities at Ports and Airports concerning 11 persons who had arrived in this country from abroad without valid certificates of vaccination. Of these 11 were from areas where smallpox is endemic, 2 from newly infected areas. All, with the exception of two persons, who were under 15, were placed under surveillance for 14 days from the date of their arrival.

1917

1917

1917

EPIDEMIOLOGY

Notification of Infectious Disease

A total of 1057 cases of infectious disease were notified during the year and of these 147 were removed to hospital.

Incidence of Infectious Disease

MEASLES.

There was a small increase in the number of cases of measles notified.

DYSENTERY.

There was a decrease in the number of cases notified. No outbreaks were involved.

FOOD POISONING.

There was also a decrease in the number of food poisoning cases notified.

Of interest are the different phase typings identified as shown:

Salmonella	Auatum	1
	Angona	10
	Brandenburg	1
	Bredeney	3
	Enteritidis	8
	Infantis	1
	Muenchen	1
	Montevideo	1
	Newport	2
	Ohio	1
	Panama	7
	Reading	2
	St. Paul	2
	Tennessee	2
	Thompson	1
	Typhi-Murium	19

Other infections were due to unknown causes.

TYPHOID.

There were three notified cases of typhoid concerning residents of the Borough. The patients were removed to hospital and all contacts proved to be clear.

SMALLPOX.

No case of smallpox was notified during the year.

Notifications were received from Health Authorities at Ports and Airports concerning 53 persons who had arrived in this country from abroad without valid certificates of vaccination. Of these 48 were from areas where smallpox is endemic, 5 from locally infected areas. All, with the exception of two persons, who were untraceable, were placed under surveillance for 14 days from the dates of their arrival.

CHOLERA.

One notification was received from the Airport Health Authorities concerning a person without a valid certificate of vaccination who had arrived in the country from a locally-infected area. The case was placed under surveillance for 5 days from the date of arrival.

International Certificates of Vaccination and Inoculation

Arrangements continued for the authentication by the Medical Officer of Health of the signatures of doctors on certificates of vaccination and inoculation for travellers from this country going abroad, as required by the International Sanitary Regulations.

NOTIFICATIONS OF INFECTIOUS DISEASE
1st. JANUARY, 1970 - 31st. DECEMBER, 1970

DISEASE	0-1	1	2-4	5-14	15-24	25-44	45-64	65+	Total	Cases Removed to Hospital	Deaths
Measles	34	81	279	223	2	5	-	-	624	7	-
Dysentery	1	3	15	39	5	15	-	-	78	10	-
Scarlet Fever	0	1	5	16	1	1	-	-	24	1	-
Whooping Cough	14	5	24	16	1	-	-	-	60	7	-
Infective Jaundice	0	0	1	20	23	26	8	2	80	40	1
T.B. Respiratory	1	1	0	5	11	27	18	13	76	35	2
Non-respiratory	0	0	0	1	2	8	4	2	17	5	-
Acute Meningitis	2	0	0	1	3	0	0	1	7	7	1
Typhoid	0	0	0	0	1	1	0	1	3	3	-
Food Poisoning	10	4	4	11	17	28	9	3	86	20	-
Malaria	0	0	0	0	1	1	0	0	2	2	-
TOTAL:	62	95	328	332	67	112	39	22	1057	147	4

TABLE OF NOTIFICATIONS OF INFECTIOUS DISEASES SINCE 1965

DISEASE	TOTALS NOTIFIED IN:									
	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974
ANTHRAX	-	-	-	-	-	-	-	-	-	-
CHOLERA	-	-	-	-	-	-	-	-	-	-
DIPHTHERIA	-	-	-	-	-	-	-	-	-	-
DYSENTERY	94	258	75	62	130	74	-	-	-	-
ENCEPHALITIS, ACUTE INFECTIVE	1	-	-	1	-	-	-	-	-	-
" " POST-INFECTIVE	-	-	1	-	1	-	-	-	-	-
ERYSIPELAS	6	10	9	-	-	-	-	-	-	-
FOOD POISONING	25	29	34	35	107	86	-	-	-	-
INFECTIVE JAUNDICE	-	-	-	35	57	80	-	-	-	-
LEPROSY	-	-	-	-	-	-	-	-	-	-
LEPTOSPIROSIS	-	-	-	-	-	-	-	-	-	-
MALARIA	1	-	4	1	-	2	-	-	-	-
MEASLES	1,907	1,233	1,075	496	410	624	-	-	-	-
MENINGITIS, ACUTE	7	3	3	7	9	7	-	-	-	-
OPHTHALMIA NEONATORUM	2	5	-	6	-	-	-	-	-	-
PARATYPHOID FEVER	-	-	1	6	-	-	-	-	-	-
PLAGUE	-	-	-	-	-	-	-	-	-	-
PNEUMONIA	24	8	7	7	-	-	-	-	-	-
POLIOMYELITIS, ACUTE PARALYTIC	-	-	-	1	-	-	-	-	-	-
" " NON-PARALYTIC	-	-	1	-	-	-	-	-	-	-
PUERPERAL PYREXIA	65	50	24	23	-	-	-	-	-	-
RELAPSING FEVER	-	-	-	-	-	-	-	-	-	-
SCABIES	8	-	-	-	-	-	-	-	-	-
SCARLET FEVER	43	29	38	77	31	24	-	-	-	-
SMALLPOX	-	-	-	-	-	-	-	-	-	-
TETANUS	-	-	-	-	-	-	-	-	-	-
TUBERCULOSIS, PULMONARY	116	89	91	90	92	76	-	-	-	-
" " NON-PULMONARY	33	19	12	16	29	17	-	-	-	-
TYPHOID FEVER	-	1	3	4	1	3	-	-	-	-
TYPHUS	-	-	-	-	-	-	-	-	-	-
WHOOPING COUGH	49	122	126	87	15	60	-	-	-	-
YELLOW FEVER	-	-	-	-	-	-	-	-	-	-
TOTALS	2,381	1,856	1,504	954	882	1,057	-	-	-	-

PART ONE

HEALTH SERVICES

B. ENVIRONMENTAL HEALTH

1911

1912

Staff - Inspectorate

The establishment of inspectors consists of a chief public health inspector, principal public health inspector; nine senior inspectors, 16 district inspectors, 8 student inspectors and 4 technical assistants. For the greater part of the year the establishment was up to the required strength.

Housing

Preferential rehousing on medical grounds

During the year 1213 applications for rehousing on medical grounds were referred to the Housing Manager for assessment, but 13 persons only were actually rehoused. This means that not even all the Special Category cases are being dealt with as speedily as one would hope.

Applications were graded as under:-

(a) Special Category	-	45
(b) 25 points	-	244
(c) 15 points	-	609
(d) 10 points	-	286
(e) No priority on medical grounds	-	29
		<hr/>
	Total No.	1,213
		<hr/>

House to House Survey

House to house surveys were continued throughout the year to deal with general housing defects, nuisances, the encouragement of Improvement Grant Applications and the enforcement of adequate facilities and means of escape in case of fire in houses in multiple occupation. These visits can be divided for convenience of presentation between Houses in Multiple Occupation and initial visits in Study Areas. A further 401 houses in multiple occupation were surveyed during the year, of which 304 called for action under the Housing Acts, 202 initial visits were made in Study Areas (i.e. Areas which were subsequently declared to be General Improvement Areas) and 86 Improvement Grants were recommended by the Housing Section for these areas.

It will be seen from these figures that the Housing Act, 1969, has had a considerable impact in this year. Special Grants, however, have not been specifically encouraged in Improvement Areas because it was felt that such Areas should demonstrate improvements to a higher standard, i.e. each letting should possess the full range of standard amenities and, if possible, should be self-contained.

During the coming year, it is anticipated that the Housing Section will be involved to an increasing extent in surveys associated with possible General Improvement Areas. The introduction of amenities can, in most cases, only be enforced by a belated use of compulsory acquisition powers when persuasion has failed. However, repairs can be required and some repair may be eligible for a Grant. It is hoped, therefore, that owners will take advantage of this benefit and carry out both aspects of the work at the same time.

Houses in Multiple Occupation:

	1962	1963	1964	1965	1966	1967	1968	1969	1970
<u>Premises:-</u>	20	129	46	36	253	309	913	718	401
Inspected	(143 lett- ings)	(464 lett- ings)	(277 lett- ings)	(224 lett- ings)	(412 lett- ings)	(804 lett- ings)	(3150 lett- ings)	(1868 lett- ings)	(1423 lett- ings)
Where informal action taken	18	36	46	10	253	215	768	494	304
Where no further action taken	2	93	Nil	5	Nil	94	145	224	97
Where formal action taken	2	18	19	13	17	85	43	192	223
TOTAL INSPECTIONS	132	577	929	314	991	1815	3722	3530	4115

It will be noticed from the above table that, although the figure for initial inspections in 1970 has dropped (largely as a result of increasing Improvement Area Work), nevertheless, the figure for total inspections, which includes reinspections, has risen. The visible effect of this has been to provide a higher compliance rate in 1970 for notices relating to facilities and means of escape:-

Year 1	Works completed Section 15 H.A. 1961	Works completed Section 16 H.A. 1961
1969	128	145
1970	154	174

Slum Clearance

During 1970, only 5 inspections were made during the year in one clearance area and these were in connection with claims for well-maintained payments. No clearance areas were represented during the year nor were any Compulsory Purchase Orders made.

Partly as a result of clearance area legislation and partly due to acquisition by agreement, 45 houses, which had formed part of current or previous slum clearance programmes, were demolished during the year.

Improvement Areas

As shown under the "House-to-House Survey" heading, initial inspections of houses in Improvement Areas continued throughout the year and the number of such visits totalled 202. The assessment of Improvement Grant Applications in Improvement Areas involved 127 visits.

These figures relate to Masbro Road and Moore Park Road Areas. The latter was declared to be a General Improvement Area in February 1970, and a survey of the Masbro Road Area was started with a view to the declaration of a General Improvement Area in 1971.

Rent Act 1957

Applications under the above Act during the past six years have been received as follows:-

	1965	1966	1967	1968	1969	1970
For Certificate of Disrepair						
Number received	12	7	1	4	3	3
Number granted	7	4	1	2	1	1
For revocation of Certificates						
Number received	9	-	4	2	2	1
Number granted	6	-	2	1	2	1
Undertakings given by Landlord						
Number accepted	2	3	1	-	1	2

Housing Act 1957 - Closing Orders

No closing Orders were made during the year. In one case an Order previously made was determined.

Housing List

The Housing Manager has kindly supplied the following details:-

Number of persons rehoused on medical grounds	13
Details of numbers of all new Council dwellings erected during the year and the appropriate figures for the following table.	689
1) Number of families rehoused by the Borough in new flats and houses since the War	5,750
2) Number of families rehoused by the Borough in rebuilt houses since the War	28
3) Families still living in prefabricated dwellings at the end of the year	74
4) Number of families on waiting list at the end of the year	4,881

Sanitary Inspection

The sanitary conditions of the Borough were subject to routine inspection and investigations were made into the 2,296 complaints received.

Particulars of the visits made by the public health inspectors, together with the number of preliminary and statutory notices and the number of proceedings instituted, are set out overleaf.

Public Health Inspectors' totals of weekly summary sheets 1970

	Total Inspection-	Total Re- visits	Total Notices Served	Total Notices complied with
HOUSING				
Housing Act 1957	455	202	3	-
House to house	836	12	-	-
Housing defects	2086	5759	1102	1012
H.M.O.	401	3714	218	160
Overcrowding	49	3	-	-
Re-housing applications	2	-	-	-
Rent Act	1	-	-	-
Moveable dwellings	-	-	-	-
Drainage	4279	124	-	-
Housing Act 1969	-	-	-	-
Refuse accommodation	3504	26	-	-
FOOD PREMISES				
Bakers	66	15	4	6
Bakehouses	25	-	-	-
Butchers	224	5	17	4
Chemist	24	1	3	-
Confectioners	91	8	1	1
F.Fish	71	9	4	-
Wet Fish	24	5	1	-
Grocers	634	12	18	6
Greengrocers	82	1	9	3
Ice-cream	66	-	-	-
Milk Vendor	76	-	-	-
Provisions	64	3	2	-
Caterers	656	66	46	6
Markets	101	-	-	-
Licensed Premises	150	5	17	4
Sampling	353	-	-	-
Food Inspection	20	-	-	-
Milk Processing Depots	13	-	-	-
LICENCES				
Hairdressers & Barbers	51	12	3	3
Club Licensing	-	-	-	-
Pharmacy & Poisons	27	-	-	-
Pet Animals	18	-	-	-
Animal Boarding	-	-	-	-
Rag & Flock	5	-	-	-
Factory (M)	89	12	4	4
Factory (non M)	13	-	-	-
Outworkers	7	-	-	-
Offices O.S.R.	1568	792	235	104
Factory (Food)	72	-	-	-
Noise	273	-	-	-
Public Urinals	5	-	-	-
Fireguard Regulations	8	-	-	-
Infectious Disease	185	-	-	-
Rats & Mice	298	2	-	-
Pigeons	80	-	-	-
Clean Air	391	39	-	1
Miscellaneous	4921	48	16	22
TOTALS	21365	10875	1703	1336

In addition 6,870 abortive visits were made where access was not obtained, 959 Statutory Notices were served and 842 were complied with during the year.

These figures do not include 385 Statutory Notices served and 176 complied with under Sec. 15 and 16 in respect of houses in multiple occupation.

Offices, Shops and Railway Premises Act, 1963

(1) Registration and Inspections

During 1970, the programme of routing street by street inspections continued as in previous years. This gave a total figure of 1,695 inspections of all kinds, of which 903 were general inspections.

Other inspections included revisits to premises to ensure that work requested by the Department had been completed in a satisfactory manner or was in progress. The majority of the newly registered premises consisted of changes in occupation, discovered during the routine reinspections.

A considerable number of visits were made to premises regarding reported accidents, and to give advice under the Hoists and Lifts Regulations, 1968.

Satisfactory results were obtained in many instances of minor contraventions of the Act by verbal warnings, and more time is now being spent on advice to and consultation with employers of staff and owners of premises regarding many aspects of the Act and relevant Regulations, including the Hoists and Lifts Regulations.

It was found that more owners and occupiers of premises, who were either making alterations or opening new businesses, were calling on us for advice and assistance before commencing work on the premises. It is hoped that this aspect of our duties will continue to increase. It was noted during the year that the numbers of employment agencies, accommodation agencies and antique shops had considerably increased in the Borough.

(2) Operation of the General Provisions of the Act

Cleanliness

There was a general increase in the number of contraventions under this heading which were mainly related to passages, stairs, storerooms and staffrooms of premises. This is the "hardy annual" of all the contraventions which re-occurs again and again, unlike a structural defect, which, once remedied, normally does not re-appear. It is generally the smaller firm which offends most regarding lack of cleanliness, particularly with reference to staffrooms, where the larger concern appears to take more care and of course, can probably afford to spend more on the welfare of staff.

A total of 267 contraventions were found during the year and letters sent in all cases. This was an increase of 122 from last year.

Overcrowding

One particularly bad case of overcrowding was discovered this year and negotiations are still in progress with the firm concerned to improve the situation. Compliance with the section is expected in the very near future.

Temperature and Ventilation

These sections bring a considerable number of complaints from employees and involved visits to premises where verbal advice and written notification invariably brings about improvement.

In many cases, the cause of complaint in winter can be shop doors kept open to attract custom and in warehouse premises, the continuous van loading or unloading operations in progress. During the summer months, the lack of an effective ventilation system in retail shops can lead to staff complaints, 166 letters were sent regarding contraventions.

Lighting

In the majority of cases this was found to be adequate, but 36 contraventions were found to exist during the year. Improvements were effected in the premises concerned after notification from the department.

Sanitary Conveniences

There was a reduction in the number of contraventions of this section of the Act in 1970, when a total of 37 owners or occupiers were written to regarding various matters mainly concerned with cleanliness and maintenance.

Washing Facilities

Systematic inspection procedure showed that the improvement of last year was continued in 1970 as regards washing facilities in premises coming within the scope of the Act. Even so, letters were sent out in 45 instances when some contravention of this section was found.

Although the facilities may be provided, in that wash hand basin and water supply are present, it was quite often noted that it had been omitted to provide soap and towels for use by the employees.

Clothing Accommodation

Considerable improvements were found in the accommodation provided for employees' clothing in most premises. Only 5 contraventions were noted during 1970.

Floors, Passages and Stairs

Almost twice the number of contraventions under this heading were dealt with this year compared to 1969. A total of 116 owners or occupiers were written to regarding defects on their premises, the majority of which concerned the maintenance and construction of staircases and handrails. Obstruction of stairs by various articles was also a cause for our intervention, as was defective and worn floor coverings.

First Aid

The lack of maintenance of a proper first aid kit formed the subject of 158 letters to employers during the year. This was more than twice the number of contraventions for the previous year.

Other Matters

A total of 235 contraventions of other aspects of the Act were dealt with in 1970. Many of these included defects in Lifts and Hoists, dealt with under the Lifts and Hoists Regulations 1968. In most cases under these Regulations the owners of lifts are co-operative with regard to defects detailed in the reports made by the authorised persons, who are usually the Engineer Surveyors of Insurance Companies. On receipt of their reports, we write to the persons owning or operating the lifts detailing the defects which require attention and follow up by inspection of the apparatus. Success in the implementation of the Regulations may be largely due to the need for insurance cover, which usually convinces the firms concerned to rapidly put the necessary work in hand.

(3) Accidents

The total number of accidents reported during 1970 was 41, which is an increase of 10 over last year. Again, it was fortunate that there was

no report of a fatal accident.

It is felt that there are many accidents which are not being reported, as the majority of reports come from the same firms over the years. These are generally the larger concerns and it may be that many of the smaller firms are just not notifying the Local Authority when accidents occur on their premises. Accordingly, we have made arrangements to circularise all firms in the area in the near future reminding them of their obligations under this section of the Act.

It should be of interest to see if there is an increase in reports during the next year.

Twenty-two of the reported accidents were investigated. No prosecution was deemed necessary, eleven firms were given informal advice and one formal warning was given.

The following table shows the primary cause and the type of premises in which the accidents occurred:-

Analysis of Reported Accidents.

<u>Primary Cause</u>	<u>Class of Workplace</u>					<u>Total</u>	<u>Inves- tigated</u>
	<u>Offices</u>	<u>Shops</u>	<u>Wholesale/ warehouses</u>	<u>Catering establish- ments</u>			
Machinery	-	-	-	-	-	-	-
Transport	-	-	5	1	6	5	
Falls	7	6	1	3	17	12	
Stepping on or striking against object or person	-	1	-	1	2	-	
Handling goods	-	3	-	2	5	1	
Struck by falling object	1	2	-	-	3	2	
Fires	-	-	-	-	-	-	
Electricity	-	-	-	-	-	-	
Hand tools	-	5	-	-	5	2	
Not otherwise specified	-	3	-	-	3	-	
					<u>41</u>	<u>22</u>	

Summary of Accidents Investigated

Falls of all kinds, including from steps or staircases

These formed the largest group of accident reports again during 1970 as last year. A total of seventeen were notified and of these it was felt necessary to investigate twelve. As previously mentioned, one formal warning was given and this concerned a trap-door in the floor of an "off-licence" shop,

which had been left open and unguarded and resulted in an employee falling through the opening to the cellar below. Shortly after receiving our letter, the firm concerned made adequate arrangements to guard the trap-door.

Transport

This primary cause was the next largest group during the year, due to several accident reports of particular interest concerning a warehouse, where the unskilled use of fork-lift trucks resulted in a series of accidents to employees' feet, which had been run over by the trucks. On advice from us, the drivers were sent for tuition and the staff issued with 'safety' shoes.

Hand Tools

These accidents occurred mainly through the use of knives or choppers in the preparation of meat. Such accidents still happen, even when the persons involved are skilled in the use of their implements.

Handling Goods

These involved strained backs whilst carrying rolls of carpet and other similar cases.

(4) Prosecutions

No prosecutions were instituted during the year.

THE OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

Annual report under Section 60 to the Minister of Labour for the year ended 31st December, 1970

LONDON BOROUGH OF HAMMERSMITH

TABLE A

REGISTRATIONS AND GENERAL INSPECTIONS

Class of premises (1)	Number of premises newly registered during the year (2)	Total number of registered premises at end of year (3)	Number of registered premises receiving one or more general inspections during the year (4)
Offices	44	618	249
Retail shops	38	1,047	506
Wholesale shops, warehouses	4	48	16
Catering establishments open to the public, canteens	4	263	132
Fuel storage depots	-	-	-
TOTALS	90	1,976	903

TABLE C

ANALYSIS OF WORKPLACE OF PERSONS EMPLOYED IN REGISTERED PREMISES AT END OF YEAR

Class or workplace (1)	Number of persons employed (2)
Offices	9,876
Retail shops	5,200
Wholesale departments, warehouses	799
Catering establishments open to the public	2,401
Canteens	249
Fuel storage depots	-
TOTAL	18,525
TOTAL MALES	9,453
TOTAL FEMALES	9,072

TABLE B

NUMBER OF VISITS OF ALL KINDS (INCLUDING GENERAL INSPECTIONS) TO REGISTERED PREMISES

1,695

TABLE D - EXEMPTIONS

TABLE E - PROSECUTIONS

Class of premises (1)	No. of exemptions current at end of year (2)	DURING THE YEAR							M/c Line No.	Prosecutions instituted of which the hearing was completed in the year			
		No. of exemptions			No. of applications		Appeals to Court against refusal to grant or extend an exemption or against the withdrawal of an exemption			Section of Act or title of Regulations or Order (1)	No. of information laid (2)	No. of informations leading to a conviction (3)	
		newly granted (3)	extended (4)	expired or withdrawn (5)	refused (6)	opposed by employees (7)	No. made (8)	No. allowed (9)					
PART I - Space (sec 5(2))													
Offices										1	NIL	NIL	NIL
Retail shops										2			
Wholesale shops, warehouses			N	I	L					3			
Catering establishment open to public, canteens										4			
Fuel storage depots										5			
PART II - Temperature (sec 6)													
Offices										11	No. of persons or companies prosecuted NIL	No. of complaints (or summary applications) made under section 22 NIL	No. of Interim orders granted NIL
Retail shops										12			
Wholesale shops, warehouses			N	I	L					13			
Catering establishments open to public, canteens										14			
Fuel storage depots										15			
PART III - Sanitary Convenience (sec 9)													
Offices										21	TABLE F - STAFF 2 whole-time and 14 public health inspectors devoting part of their time No. of inspectors appointed under section 52 (1) or (5) of the Act No. of other staff employed for most of their time on work in connection with the Act 1		
Retail shops										22			
Wholesale shops, warehouses			N	I	L					23			
Catering establishments open to public, canteens										24			
Fuel storage depots										25			
PART IV - Washing Facilities (sec 10(1))													
Offices										31			
Retail shops										32			
Wholesale shops, warehouses			N	I	L					33			
Catering establishments open to public, canteens										34			
Fuel storage depots										35			

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Drainage

During the year 473 plans were submitted to the Health Department and a total of 4,403 inspections were made in connection with supervision of drainage works.

Factories Act 1961

The following is a table in the form prescribed by the Secretary of State for Employment & Productivity on the administration of the Factories Act 1961 dealing with factories, both mechanical and non-mechanical and out-work.

1. Inspections

	Number on Register	Inspections	Number of written notices	Occupiers prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by local authorities	163	13	-	-
(ii) Factories not included in (1) in which Section 7 is enforced by the local authority	877	89	4	-
(iii) Other premises in which Section 7 is enforced by the local authority (excluding outworkers' premises)	-	-	-	-
	1,040	102	4	-

2. Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness(S.1)	2	2	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	1	1	-	-	-
Inadequate ventilation (S.4)	2	2	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary conveniences (S.7)	-	-	-	-	-
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	4	6	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
	9	11	-	-	-

3. Outwork

	Section 110			Section 111		
	No. of Outworkers in August list required by Section 110/1(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel:						
Making etc.	108	-	-	-	-	-
Cleaning and washing Household Linen	-	-	-	-	-	-
Curtains	3	-	-	-	-	-
Furniture and upholstery	3	-	-	-	-	-
Jewellery	20	-	-	-	-	-
Artificial flowers	14	-	-	-	-	-
Paper bags	8	-	-	-	-	-
Paper boxes	4	-	-	-	-	-
Carding etc., of buttons etc.	5	-	-	-	-	-
Chocolates and sweetmeats	2	-	-	-	-	-
Lampshades	4	-	-	-	-	-
	171	-	-	-	-	-

Rodent Control

Treatment of sewers with sodium fluoracetamide for which the Borough Engineer is responsible has continued. This method of treatment assists in controlling rat population, as many surface infestations are directly due to rats coming from defective and disused drain connections to the sewers. Mice infestations have again increased. For many years it has been the policy of the Council to carry out treatment in domestic premises free of charge, fostering the idea to many that their responsibility in the matter is completed by reporting the presence of mice. Very few make any effort themselves to get rid of their pests and ignore the basic fact that many mice infestations originate from lack of care in the protection of foodstuffs.

Once again the important question of the sealing-off of disused drain connections to sewers and the proper sealing-off of abandoned sewers must be repeated. The owner of a demolished property has a statutory duty to notify the Local Authority of a disused drain, so that it can be sealed off to their satisfaction. In too many cases this responsibility is ignored.

The following table summarises the work of the Rodent Control Staff during 1970:

	Type of Property
	Non-agricultural
1. Number of properties in district	65,836
2. a) Total number of properties (including nearby premises) inspected following notification	2,388
b) Number infested by (i) rats	559
(ii)mice	1,816
3. a) Total number of properties inspected for rats and/or mice for reasons other than notifications	338
b) Number infested by (i) rats	2
(ii)mice	4

Pigeons

Numerous complaints about these birds are received from residents covering noise and nuisance from fouling of buildings, washing, clothing. Concentrations in any particular area are invariably caused by residents feeding the birds. A by-product of this indiscriminate scattering of bread in the vicinity of houses is that rats and mice, always searching for easy food, are fed also.

To provide food for a starving bird in severe wintry conditions is an understandably humane act, but to scatter feed all the year round in a residential area is foolish and irresponsible.

A contractor is employed by the Council to deal with concentrations of pigeons, within the Borough, which are the subject of residents' complaints. He performs his work both efficiently and as unobtrusively as is possible, either shooting or trapping the birds in the early morning, thus avoiding to some extent the abuse and threats from the fanatical minority who consider it their duty to protect the pests.

Under existing conditions all our efforts merely succeed in controlling the number. Complete clearance from residential areas can only be achieved by 100% co-operation from householders, and this is not forthcoming.

Diseases of Animals Act, 1950

Action under this Act is undertaken for the Council by the Veterinary Officer of the City of London.

The following are details from his report for the year under review:

Details of visits

Shepherds Bush Market	4 visits
North End Road Market	5 visits
Fox's Pet Stores (Railway Approach)	8 visits
Fox's Pet Store (Cinema Extension)	4 visits
Ellis Pet Shop	4 visits
Royal Dairy Show	1 visit

26 visits

Several of the above visits were made regarding the fowl pest outbreak which occurred during the year, particularly concerning the disposal of waste foods and viscera which can be a factor in the spread of the disease if not disposed of in an acceptable manner. It was discovered that all viscera and waste from the above premises was burnt in the market incinerator.

Orders - Ministry of Agriculture, Fisheries and Food
Animals (Miscellaneous Provisions) Order 1957

Under the terms of the above, the following orders were published in the "Daily Telegraph":-

The Export of Horses (Excepted Cases) Order 1969
The Export of Horses (Protection) Order 1969

Live Poultry (Restrictions) Order, 1957

A licence was issued, under the terms of this Order, to enable the holding of a poultry exhibition at the International Poultry Show, Olympia on the 8th, 9th and 10th December 1970.

Performing Animals (Regulations), Act 1925

A number of visits were made to the B.B.C. Television Studios, Shepherds Bush, concerning the use of animal acts in television productions. The animals were examined, performances witnessed and performing animals certificates checked. All was found to be in order.

Rabies Order, 1938

Under the terms of this Order, Form A1 was served on a resident of the Borough, imposing restrictions on her Dachshund dog. This was later withdrawn. These notices were served by the Ministry of Agriculture, Fisheries and Food.

Licences and Registration

Pharmacy and Poisons Act, 1933
Pharmacy and Medicines Act, 1941

The names and addresses of 96 retailers were entered on the Council's list of persons entitled to sell poisons under Part II of the above Acts. Many of these persons are food retailers and in some instances the poisons sold are only household disinfectants, but a careful watch is kept on commodities sold under proprietary names containing other poisons mentioned on the list.

No action was necessary for any offences under the Acts.

Pet Animals Act, 1951

18 applications for licences were received and granted during the year. All premises were kept under observation.

Animal Boarding Establishments Act, 1963

1 application for a licence was received and granted during the year. The premises were kept under observation.

London County Council (General Powers) Act, 1959

Section 22 of the above Act forbids the use of land within the Borough as sites for moveable dwellings unless licensed by the Council.

The Council may also attach to any licence granted under this Section such conditions as they think fit on the number and class of caravans kept on the site, the space between such dwellings, fire protection, prevention of nuisance from noise, and for securing adequate water supplies and sanitary conditions.

Two sites for which licences are issued to private individuals house six caravans.

Hairdressers and Barbers

Under Section 21 of the Greater London Council (General Powers Act 1967) as from the appointed day no person shall carry on the business of a hairdresser or barber on any premises in the Borough, unless he/she is registered for those premises by the Borough Council. (The appointed day for the London Borough of Hammersmith was 1st April 1968).

By the end of the year 172 premises were registered.

All new applicants are asked to display on their premises, in addition to the statutory requirements of certificate of registration and byelaws, a copy of their price lists.

Summonses - Proceedings instituted during the year

Public Health Acts	109
Food & Drugs Act, 1955 and regulations made thereunder	113
Housing Act	7
Offices, Shops and Railway Premises	-

SEWERAGE

The main sewers and the sewerage disposal system in London are the responsibility of the G.L.C. Rainwater and soil sewage are carried in the same sewers, but the arrangements for Hammersmith are not yet adequate inasmuch as some basements in the Borough are liable to flooding from time to time when heavy storms cause the sewers to be surcharged.

Water Supply

I am indebted to Dr. E. Windle Taylor, Director of Water Examination for the Metropolitan Water Board, who kindly supplied the following reports:-

"The supply was satisfactory both as to quality and quantity throughout 1970.

All new and repaired mains are disinfected with chlorine; after a predetermined period of contact the pipes are flushed out and refilled; samples of water are then collected from these treated mains; and the mains are returned to service only after results are found to be satisfactory.

The quality control from these laboratories is carried out by means of daily sampling from sources of supply, from the treatment works or well stations, from the distribution system, and through to the consumer. Any sign of contamination or other abnormality is immediately investigated.

No houses were permanently supplied by standpipe. No artificial fluoride is being added, and where the fluoride content is indicated in the analysis it represents the naturally occurring fluoride in the water.

The supply was derived from the following works and pumping stations:

River Thames - derived water from Surbiton, Hampton and from Ashford Common Pumping Stations.

No new sources of supply were instituted and there were no changes in the general scheme of supply in your area.

The number of samples collected and the bacteriological and chemical analyses of the supply from the above sources after treatment are shown on the attached sheets.

On account of their hardness content and alkaline reaction the Board's river and well supplies are shown to be not plumbsolvent. It should, however, be appreciated that all types of water pick up varying amounts of metal from the materials of water piping particularly when it is newly installed; this applies to copper, zinc, iron and also to lead."

METROPOLITAN WATER BOARD - WATER EXAMINATION DEPARTMENT

Average RESULTS OF THE CHEMICAL EXAMINATION OF THE WATER TO THE LONDON BOROUGH OF HAMMERSMITH

Milligrammes per Litre (unless otherwise stated)

Description of the Samples	Number of Samples Day of the Month	Ammoniacal Nitrogen	Albuminoid Nitrogen	Nitrate Nitrogen	Oxygen abs. from $KMnO_4$ 4 hrs at $27^\circ C$	B.O.D. 5 days at $65^\circ C$	Hardness (total) $CaCO_3$	Hardness (non-carbonate) $CaCO_3$	Magnesium as Mg	Sodium as Na	Potassium as K	Chloride as Cl	Phosphate as PO_4	Silicate as SiO_2	Sulphate as SO_4	Natural Fluoride as F	Surface-active material as Manoxal O.T		Turbidity units	Colour (Burgess units)	pH value
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)
River Thames - Derived	363	0.026	0.063	4.8	1.02	-	274	79	5	27.7	5.6	40	2.7	9	70	0.20	0.03		0.1	11	7.9

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METROPOLITAN WATER BOARD - WATER EXAMINATION DEPARTMENT

BACTERIOLOGICAL RESULTS - YEARLY AVERAGES, 1970
OF THE WATER SUPPLIED TO THE LONDON BOROUGH OF HAMMERSMITH

Source of Supply	BEFORE TREATMENT							AFTER TREATMENT				
	Number of samples	Agar plate count per ml.		Coliform count		Escherichia coli count		Number of samples	Agar plate count per ml.		Coliform count	E. coli count
		20 - 24 hours at 37° C.	3 days at 22° C.	Per cent. samples negative in 100 ml.	Count per 100 ml.	Per cent. samples negative in 100 ml.	Count per 100 ml.		20 - 24 hours at 37° C.	3 days at 22° C.	Per cent. samples negative in 100 ml.	Per cent. samples negative in 100 ml.
River Thames - Derived	8,259	31.9	—	37.91	17.3	53.58	4.7	3,710	8.0		99.92	99.97

Smoke Control Areas

Hammersmith completed its phased Smoke Control Programme on the 1st June 1967 having achieved the distinction of being the first London Borough to do so. The programme covered 3,995 acres involving some 72,593 premises. Final costs have not been compiled but up to the 31st December 1970 the total costs of implementing smoke control was in the region of £357,000. With an estimated population of 185,000 persons this expenditure works out at about £1.93 per head since 1958 when the smoke control programme began. With rising costs and in the present trend of inflation this is an extremely small price to pay for such obvious benefits to personal and environmental health especially when so much interest is shown these days in the ecological aspect of man's environment.

Supplies of Smokeless Fuels

Last year (1969) concern was expressed over the likelihood of a shortage of solid smokeless fuels affecting the existing smoke control orders. Towards the end of August 1970 it became apparent that a national shortage would arise owing to the closure of gas works resulting from the change-over to natural gas. In the Greater London area alone it was estimated that this shortage would amount to 250,000 tons of gas coke, equivalent to 17% of anticipated requirements. In October a pilot survey was made of those premises in the Borough that had been first converted in the smoke control programme to burn smokeless fuels, and it was estimated that a deficiency of only 5,000 tons would be realistic appraisal of the shortage in the Borough because of the dramatic swing over to gas and electric heating.

A Working Party of the London Boroughs Association recommended as an emergency measure a 40% suspension of smoke control orders to meet any shortage of solid smokeless fuel. However this Council decided that notwithstanding any national shortage the conditions prevailing in the Borough did not warrant undoing all the good work of the previous 12 years. In November it was agreed not to suspend any of the smoke control orders unless a severe shortage become so apparent that emergency measures were necessary.

To meet any emergency that might arise, 20 tons of an approved smokeless fuel prepacked in 14lbs. polythene bags were purchased for sale to anyone who might suffer hardship. This fuel was primarily intended for elderly persons whose sole means of heating was solid fuel.

Fortunately the weather in October, November and December proved mild, and it is hoped that these temperate conditions will prevail throughout the coming Winter months which are traditionally the coldest.

Hammersmith Smoke Control (No.9) Variation Order

Properties Nos. 13 - 75 odd Waldo Road, N.W.10 were originally exempt from the provisions of the Hammersmith No.9 Smoke Control Order which came into operation on the 1st June 1967, being at that time in the slum clearance programme. The Council decided to retain these properties and deal with them under Part II of the Housing Act 1957, and with this in mind made a Smoke Control Variation Order on the 9th July 1969. This was subsequently confirmed by the Minister of Housing and Local Government and came into effect on the 1st September 1970. Some 32 properties are affected and it is estimated that the overall cost will be £3,200.

Emission of Smoke

On the domestic front notwithstanding local shortages of certain solid smokeless fuels the use of bituminous coal in smoke control areas was very limited no doubt due to the new powers under Section 9 of the Clean Air Act 1968 which made the acquisition and sale by retail of unauthorised fuel in a smoke control area an offence from the 1st April 1970. Another mitigating factor was the swing over to gas and electric heating even in those properties which had previously been converted to burn solid smokeless fuel.

Non-domestic premises occasionally give rise to smoke emissions but these are usually of a temporary nature owing to mechanical trouble or inefficient operation. Again informal action sufficed to minimise these emissions.

Fulham Hospital

The redevelopment of Fulham Hospital made good progress and in December the new boiler house was commissioned. This has removed a source of smoke pollution from the old boiler house which in the past often gave rise to many complaints from the nearby residential properties.

Fulham Power Station

The change-over from coal to oil firing continued. No.2 boilerhouse is nearly converted and should be finished early in 1971 and plans are being drawn up similarly to convert No.1 boilerhouse by the end of 1971. This boilerhouse change-over when completed should remove a source of smoke pollution in the south of the Borough. An oil fuel with a low sulphur content is being used to ensure low emissions of sulphur dioxide. No doubt there will be a settling-in period to allow the staff to familiarise themselves with the new plant and the different firing technique and it is hoped that any teething troubles will be reduced to a minimum. However it should be realised that until the change-over is complete some coal fired boilers are still in use alongside the newly converted oil fired boilers and some smoke emissions may still occur from time to time.

Atmospheric Pollution

Four recording stations for the measurement of smoke and sulphur dioxide are in the North, Centre and South of the Borough. Records show that the trend towards the reduction of pollution is being maintained. Solid pollutants (Smoke and Grit) have been reduced to 1/5th of the pre-1956 level, and sulphur dioxide is down by 1/3rd.

Exhaust fumes from petrol diesel driven vehicles still remain a source of low level pollution. Legislation has been introduced by the Government under the Road Traffic Acts to deal with diesel driven vehicles, but no legislation has yet been confirmed to reduce the pollution from the exhausts of petroleum vehicles. 1970 is European Conservation Year and in America and on the Continent legislation has been passed affecting petrol driven vehicles. Notwithstanding that there is no direct conclusive medical evidence that the emission of pollutants are dangerous to health on amenity grounds alone a strong case can be made for similar legislation to be enacted in the United Kingdom. It is hoped that the Government will take action as soon as possible.

Clean Air Act 1968 - Height of Chimneys

Under Section 6 the Council is empowered to approve the chimney height to the following furnaces with effect from 1st April 1969:-

- (a) Any furnace served by a chimney other than a chimney the construction of which was begun or the plans for which were passed before the commencement of this section;
- (b) Any furnace the combustion space of which has been increased since the commencement of this section; and
- (c) Any furnace the installation of which was begun after the commencement of the section and which replaces a furnace which had a smaller combustion space.

The class of furnaces referred to are as follows:-

- (a) Burn pulverised fuel;
- (b) Burn at a rate of 100 lbs. or more an hour any other solid matter; or
- (c) Burn at a rate equivalent to 1½ million or more British Thermal Units an hour, any liquid or gaseous matter.

However, there are many furnaces which do not come within the categories as described that serve existing chimneys which are too low. It is hoped that the legislation will be amended to include the replacement of these furnaces so as not to perpetuate the discharge of flue gases at comparatively low levels.

Many new gas-fired furnaces are now being installed. The existing Government Memorandum on chimney heights is only applicable to plant burning oil or solid fuel which contain small but appreciable amounts of sulphur. Gas contains negligible amounts of sulphur and the criteria for calculating chimney heights based on the sulphur content of fuel in the present Memorandum are not applicable.

It is hoped therefore that the Working Party set up by the Minister of Technology will soon be in a position to make recommendations on the heights of chimneys serving gas-fired furnaces.

Clean Air Act 1956 - Section 3 Sub-Section (2)
Notification to install new furnaces

Oil fired furnaces	5
Gas fired furnaces	15

Clean Air Act 1956 - Section 3 (3)
Application for prior approval to the installation of new furnaces

Applications received	4
Applications approved	4

Clean Air Act 1968 - Section 6
Application for the approval of chimney height

Applications received	2
Applications approved	2

Inspections and Supervision of Food

Premises

During the year 2,942 inspections were made at food premises, stalls and markets and at 122 of these, conditions contravening the Food Hygiene (General) Regulations were found.

No exemption certificates were granted by the Council in connection with the Regulations during the year.

A list showing the number and type of premises in the Borough where food is sold, stored and prepared, is given below:-

	<u>No. of premises fitted to comply with Reg. 16</u>	<u>No. of premises fitted to comply with Reg. 19.</u>
Bakehouses (level)	23	23
Bakehouses (basement)	1	1
Bakers' retail shops	49	49
Biscuit manufacturers	1	1
Butchers	112	112
Cafes & Restaurants	266	266
Canteens and Clubs	216	216
Chemists	64	64
Chocolate manufacturers	1	1
Confectioners (sweetshops)	324	324
Fishmongers (wet and fried)	58	58
Fruiterers & greengrocers	130	130
Fruit drinks (bottling)	2	2
Grocers and provisions	353	353
Honey refiner	1	1
Ice cream manufacturers	3	3
Jellied eels and pies (manufacture and sale)	6	6
Milk processing depots	2	2
Off licences	109	6
Public houses	157	157
Sweet manufacturers	3	3
Wine bottling	2	2
Wholesale food stores	44	44
	<hr/>	<hr/>
	1927	1824
	<hr/>	<hr/>

There are no poultry processing premises within the Borough.

Food & Drugs Act 1955

A large quantity of food which, although unsound, did not call for action under Section 9 was voluntarily surrendered. A list of the commodities and the amount involved is shown below:-

	<u>Tons.</u>	<u>Cwts.</u>	<u>Lbs.</u>
Bacon			25
Biscuits		5	45
Cereal (tinned)		2	19
Cheese		6	6
Confectionery		8	9
Fats		2	27
Fish (fresh)		2	98
Fish (tinned)			63
Flour			56
Fruit (fresh)	8	5	102
Fruit (tinned)		16	20
Fruit Juice		2	60
Ham (cooked)			22
Ham (tinned)		1	68
Meat (fresh)	1	5	70
Meat (tinned)	1	15	0

	<u>Tons.</u>	<u>Cwts.</u>	<u>Lbs.</u>
Meat pies			12
Nuts		7	14
Offal		19	2
Pastry			7
Poultry		9	107
Preserves			73
Sausages		3	32
Soft drinks			60
Soup stock		2	56
Tomatoes (tinned)			6
Vegetables (fresh)	6	7	99
Vegetables (tinned)			98
	<hr/>		
TOTAL	22	7	24
	<hr/> <hr/>		

Frozen Foods

Beefburgers		1	19
Chicken pies			45
Chips			82
Cream cakes			97
Fish		7	10
Fish cakes			62
Fish fingers		2	11
Fruit			4
Fruit juice			15
Ice cream		2	76
Meat		5	90
Meat pies			56
Mousse		1	12
Offal		17	106
Pastry			81
Poultry			39
Rissoles			41
Sausages			21
Sausage rolls			32
Steakburgers			67
Vegetables		14	51
	<hr/>		
TOTAL	2	18	9
	<hr/> <hr/>		

Food Complaints - 1970

During the year 86 complaints were received from members of the general public in connection with food purchased in the Borough. The following summary shows the action taken after full investigation in each case:-

1. Fruit bun contained foreign matter - Legal proceedings.
2. Use of dirty $\frac{1}{3}$ rd. pint milk bottle - No action.
3. Contamination of mussels - No action after letter sent.
4. Mouldy condition of steak & kidney pie - Legal proceedings.
5. Salad contained foreign matter - Legal proceedings.
6. Foreign body in tin of stewed steak with vegetables and gravy. - No action after letter sent.

7. Peanut butter tasting of petrol/oil - No action after letter sent.
8. Sale of mouldy rye rounds - Letter sent.
9. Sale of allegedly mouldy sausage - No action.
10. Worm alleged to have been in milk bottle - No action.
11. Foreign object in Chinese pancake roll - Letter sent.
12. Tin of creamed rice milk pudding had disinfectant taste - Letter sent.
13. Foreign matter in Cornish pasty - Letter sent.
14. Mouldy condition of pork luncheon meat - Legal proceedings.
15. Foreign body in croissant - Legal proceedings not instituted - complainant unable to be traced.
16. Foreign matter in butter - Legal proceedings.
17. Foreign matter (glass) in rice - Letter sent.
18. Unlabelled tins of fish - Legal proceedings.
19. Mouldy condition of potato salad - Legal proceedings.
20. Sale of mouldy beef and mushroom pie. - Letter sent.
21. Piece of metal in beefsteak and kidney pie. - Warning letter sent.
22. Foreign matter in wholemeal loaf - Letter sent.
23. Foreign matter in frozen chicken pie - No action.
24. Foreign matter in loaf - Warning letter sent.
25. Chocolate sponge cake had funny taste - Warning letter sent.
26. Foreign matter in corned beef sandwich - Legal proceedings.
27. Foreign matter in orange drink - Legal proceedings.
28. Foreign matter in orange drink - Warning letter sent
29. Mouldy condition of beef pie - Legal proceedings.
30. Foreign matter in sausage - Warning letter sent.
31. Sale of mouldy loaf - Legal proceedings.
32. Mouldy condition of tin of spaghetti - Letter sent.
33. Sale of mouldy meat pies (party pies) - Legal proceedings.
34. Sale of mouldy loaf - Legal proceedings not instituted - complainant unsure of facts.

35.	Pork luncheon meat alleged to contain glass	-	No action.
36.	Mouldy condition of brown wrapped loaf	-	No action.
37.	Packet of pork and beef chips with fly larvae	-	Legal proceedings.
38.	Minced meat containing pieces of metal	-	Legal proceedings.
39.	Apple pie mouldy	-	Warning letter sent.
40.	Mouldy condition of pork pie	-	Legal proceedings.
41.	Mouldy condition of beef steak pie with kidney	-	Legal proceedings.
42.	Mouldy condition of sausages	-	Legal proceedings.
43.	Mouldy condition of brown loaf	-	Warning letter sent.
44.	Unusual condition of drum of salt	-	Letter sent..
45.	Mould growth on soda water syphon	-	Letter sent.
46.	Mouldy condition of pork pie	-	Legal proceedings.
47.	Button in apple strudle	-	No action.
48.	Foreign matter in bottle of milk	-	Warning letter sent.
49.	Mouldy condition of beefsteak pie	-	Legal proceedings.
50.	Mouldy condition of doughnut rings	-	Legal proceedings.
51.	Metallic flavour of beefburger	-	No action.
52.	Sale of mouldy loaf	-	Legal proceedings.
53.	Sale of mouldy butter	-	Legal proceedings.
54.	Baby food contained insect	-	Letter sent.
55.	Bread loaf contained foreign matter	-	Warning letter.
56.	Sliced loaf contained foreign matter	-	Legal proceedings.
57.	Loaf had hole in it	-	No action.
58.	Sour condition of orange juice	-	Warning letter.
59.	Mouldy condition of two part-baked loaves	-	Legal proceedings.
60.	Foreign matter in iced bun round	-	Legal proceedings.
61.	Foreign matter in bottle of milk	-	No action.
62.	Sale of mouldy gâteau	-	Legal proceedings.
63.	Sale of mouldy gateau	-	Legal proceedings.

64.	Foreign matter in milk	-	No action.
65.	Sour condition of pork pie	-	Letter sent.
66.	Mouldy condition of part-baked loaf, brown	-	Legal proceedings not instituted - complainant did not wish to give evidence.
67.	Sale of loaf attacked by rodent	-	No action.
68.	Presence of insect in meat pie	-	Legal proceedings.
69.	Lemon and lime barley water - possible chemical deterioration	-	No action.
70.	Dirty pint milk bottle	-	No action.
71.	Bacon and lamb cutlet "off"	-	No action.
72.	Nail in crusty loaf	-	Legal proceedings.
73.	Gritty substance in sausage meat	-	No action.
74.	Rock salmon tasted of ammonia	-	No action.
75.	Composition of rye load queried	-	No action.
76.	Sale of chicken containing maggots	-	Legal proceedings.
77.	Sale of steak & kidney pie in unsatisfactory condition.	-	No action.
78.	Bread loaf contained possible foreign matter	-	Warning letter sent.
79.	Discoloured marks in pastry of luncheon sweet	-	Letter sent.
80.	Maggot in tin of peach halves	-	Letter sent to Ministry of Agriculture, Fisheries and Food.
81.	Steak and Kidney pie containing insufficient meat	-	No action.
82.	First aid dressing in tin of rhubarb	-	Awaiting further investigation.
83.	Mouldy condition of pork and beef chipolatas	-	No action as complainant unable to be traced.
84.	Unsatisfactory condition of lemon barley drink	-	No action.
85.	Dirty 1 pt. milk bottle	-	Letter sent.
86.	Wheatmeal loaf contained screw	-	Legal proceedings.

Ice Cream

Ice cream is manufactured at two premises in the Borough.

During the year 25 samples were taken for bacteriological examination and the Methylene Blue test by the Public Health Laboratory Service. The

Methylene Blue test is recommended by the Ministry of Health as a guide for ascertaining the bacteriological cleanliness of ice cream. The time taken to decolourise Methylene Blue is recorded and the samples graded as follows:-

<u>Provisional Grade</u>	<u>Time taken to decolourise Methylene Blue</u>
1	4½ hours or more
2	2½ hours or more
3	½ to 2 hours
4	Less than ½ hour

The 25 samples were placed in the following grades:-

- 2 were within Grade 1
- 10 were within Grade 2
- 5 were within Grade 3
- 8 were within Grade 4

Premises Registered under Section 16 Food and Drugs Act, 1955

Ice Cream Manufacturers	2
Ice Cream sales only	3
Confectioners (sweetshops) selling ice cream	212
Restaurants (selling ice cream for consumption off the premises)	22
Grocers selling ice cream	122
Fruiterers and Greengrocers selling ice cream	11
Off Licence premises selling ice cream	12
Bakers selling ice cream	2
Hairdressers selling ice cream	2
Fried Fish Shop selling ice cream	1
Butchers preserving meat and/or manufacturing sausages	59
Grocers and Provision dealers preserving meat	33
Caterers preserving meat	3
Fishmongers curing fish	20
Food factories manufacturing sausages and preserved food	4
TOTAL	<u>508</u>

Milk Supplies

There are two milk processing depots in the Borough (each with its own private railways sidings), which receive milk daily from the country in tankers. Milk is collected from the farms and bulked at creamery centres in the dairying areas and after preliminary tests it is despatched to the processing depots.

As mentioned last year, one of the depots went over to the production of milk products, notably yogurt, and this aspect of production was intensified during the year. In the latter part of the year rationalisation of the Company resulted in a decision to convert to the production of cream, part of the depot used in connection with milk products. This alteration was

going on at the end of the year.

In the depot where milk is treated there are four "High Temperature - Short Time" pasteurising plants in which the milk is heated to, and retained at, a temperature of 161°F for 15 seconds and then cooled to below 50°F in accordance with the requirements of the Milk (Special Designation) Regulations. All milk thus pasteurised is distributed either in bottles or churns, the filling of cartons having been taken away from this particular depot.

At regular intervals the Senior Food Inspector checks the efficiency and temperature of the working plants and takes samples to make sure that they comply with the requirements of the Milk (Special Designation) Regulations.

All milk samples taken from the plant were reported to be satisfactory. Generally the premises were found to be satisfactory, although building works in operation sometimes created problems.

Numbers of licences under the Milk (Special Designation) Regulations in force at the year end were:

Pasteurised	303
Sterilised	260
Untreated	67
Ultra-heat treated	51

67 samples of designated milk were taken from milk processing plants and distributors and automatic vending machines. These samples were submitted to the Phosphatase, Methylene Blue and Turbidity tests, the results of which are set out below:-

Class of Milk	No. Tested	Phosphatase Tests		Methylene Blue Tests		Turbidity Tests	
		Passed	Failed	Passed	Failed	Passed	Failed
Pasteurised	63	63	Nil	59	4	Nil	Nil
Sterilised	4	-	-	-	-	4	Nil

Markets

There are seven markets in the Borough, five of which are street trading sites. In two of the street trading sites the number of stalls is one only. The street trader seems to be a source of attraction with only slightly diminishing interest shown by members of the public. The relevant legislation is the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966. The preparation of alternative temporary accommodation in Coomber Mews for those traders whose storage accommodation was demolished to make way for the West Kensington Housing Development was completed during the year.

Licensing Act, 1964

Part 11 of this Act deals with the sale of intoxicating liquor in club premises which must be registered with the Clerk to the Justices for the Sessions Area in which the clubs are situated. The local authority or police may object to the registration, or renewal of registration, of any premises considered to be not suitable or convenient and the Department is able to comment on the public health and food hygiene aspects of such club premises. In particular, where new applications are being made for registration, it is usually possible to have incorporated in the provisions suggestions made by the Department, thereby making any objections to registration unnecessary.

This arrangement again worked satisfactorily during the year and in no case was any objection recommended.

Fertilisers & Feeding Stuffs Act, 1926

Fertilisers & Feeding Stuffs Regulations, 1960 to 1964

No samples were taken during the year.

Rag Flock and other Filling Materials Act, 1951

Rag Flock and other Filling Materials Regulations, 1961 and 1965

The above Act and Regulations deal with the licensing and registration of premises where filling materials for use in upholstered articles are made or used with a view to securing the use of clean fillings. There are five premises in the Borough so registered and although no samples of filling materials were taken during the year, the premises were satisfactory. There was some little difficulty in that the testing laboratory notified the Council that because of a dispute over fees, further work under the Regulations would not be undertaken until a satisfactory solution was reached.

Consumer Protection Act, 1961

Nightdresses (Safety) Regulations, 1967

The manufacture of nightdresses made from natural fibre seems now to be on a very small scale and it becomes increasingly difficult to find any nightdresses on sale in the retail shops which are not manufactured from man-made fibres.

During the year five nightdresses were purchased under the Regulations and all were reported as satisfactory by the Official Analyst.

The Toys (Safety) Regulations, 1967

These Regulations prohibit the use of celluloid in toys other than ping pong balls and impose restrictions in relation to the paint which may be used on toys, laying a maximum content in respect of lead, arsenic, soluble antimony, beryllium, cadmium and chromium.

During the year six samples of toys were purchased and all complied with the Regulations.

Oil Heaters Regulations, 1966

These Regulations relate to warning notices and the standard performance of oil heaters and although it is found that new heaters generally are in good condition, a watch is kept for second-hand heaters which may be exposed for sale.

During the year none were found for submission to the appropriate tests.

Laboratory Facilities

The Public Analyst for the Borough is Mr. Thomas Mc Lachlan of Messrs. Thomas Mc Lachlan & Partners, 4 Hanway Place, London, W.1. whose report follows.

Bacteriological examination of food is carried out by the Public Health Laboratory Service, County Hall, S.E.1. and occasionally by the Institute of Public Health. The Public Health Laboratory Service is also available to doctors for bacteriological examination - throat swabs and intestinal specimens. The necessary swabs and outfits for the laboratory

can be obtained from the Environmental Health Service, which provides a Monday to Friday daily service to County Hall, with collection points in various parts of the Borough.

I am indebted to the Public Analyst, Mr. T. McLachlan, for the following report:-

Annual Report of the Public Analyst, 1970.

During the year 1970, 1,329 items of food and drugs were examined. Of these 42 samples were taken formally, and 1,229 informally, while the remaining 58 articles were submitted as the result of complaints showing again how complaint-conscious the public is becoming. The lack of understanding between suppliers and consumers is to be regretted, though suppliers ought to realise that it is in their own interests to obtain and to keep satisfied customers.

The number of adulterated items, or samples about which adverse comment was made, was 118. The incidence of criticisms may be classified as follows:-

	<u>Number examined</u>	<u>Number adulterated</u>
Milk	103	Nil
Milk Bottles	3	3
Other food	1,202	115
Drugs	21	Nil.

A milk bottle with foreign matter at the bottom contained hardened cement which could only be removed by chipping away, or by treatment with acid. The dirt would, however, have been sterilised during the bottle-washing process and the milk would not have harmed the consumer. Another milk bottle contained a milk bottle top, a match, and some plastic material; but as there was no sign whatever of any alkali attack on the aluminium cap or the match, and the milk had curdled naturally, it could not be said that these articles had been through the washing machine. A third milk bottle contained an ice pop sachet, but tests with the washing fluid used by the dairy indicated that it had not been through the bottle-washing machine. Had it done so, some of the printing on the sachet would have been removed, but it was not.

Some reputed bread and butter was spread with margarine, and a roll and butter contained a mixture of margarine and butter.

An increasing number of complaints are received about extraneous matter in bread and, unfortunately, most of these are justified. A cut granary loaf contained an iron wood screw $1\frac{1}{4}$ " long; and another loaf a thin 1" nail; in both cases these had been baked in the bread.

A fruit fly was present in a portion of rye loaf, and part of a fly was found in a croissant roll.

A piece of orange-coloured paper was found in a portion of wholemeal bread, and the foreign matter in a white loaf, shaped like a portion of a washer, was found to consist of carbonised dough. A brown loaf contained a small piece of hard dough with dirt and fat, whilst another brown loaf contained what at first appeared to be mouse excrement, but which was really dirty bread material probably mixed with broken poppy seeds. Pieces of fibre about 3" long, which had been cooked in the roll, were found in a pancake roll; and a piece of cotton approximately 1'-0" in length in an

iced bun round, probably derived from stitching from the top of a sack of flour.

A retired cook complained that a rye loaf had been made from wheat flour with added caramel, and the loaf together with a sample of rye flour used were examined. The flour was satisfactory, but the loaf contained an appreciable quantity of wheat flour with added colouring.

A hole in a loaf had been made by a mouse or a rat but, from the condition of the wrapper and the size of the hole, it was considered impossible for this to have occurred before the loaf was wrapped. As two-thirds of the loaf had been used before the hole was discovered it was thought probably that this had happened in the consumer's house.

A packet of butter contained a piece of hemp fibre, probably from waste employed to clean down a bench; and another was mouldy when submitted to the laboratory.

Several pieces of wire found in minced meat and vegetable were identical with the wire employed for price tags; and a portion of metal found in a steak and kidney pie was identical with the wire attached to a tag on the meat when received at the factory. A corned beef and pickle sandwich contained a piece of glass $\frac{3}{4}$ " long and $\frac{1}{4}$ " wide tapering at the end, probably derived from a broken bottle; and another piece of glass, alleged to have been found in a tin of pork luncheon meat, appeared to have come from a small dish or similar article. A portion of meat pie contained a cockroach which appeared to have been cooked in the pie. A Cornish pasty contained a white hair, which had probably come from a long-haired dog; and a cocktail stick found in a meat pudding had also been cooked in the pudding.

Foreign matter in a tin of stewed steak with vegetables, and thought to be a wood-louse, was found to be the head of a flower and may have been present in the vegetables. Frozen products of roast beef slices in gravy, striploin steaks, minute steaks, picnic sausage and braised ham showed high bacterial counts with an excessive number of faecal coliform organisms present, indicating contamination during preparation. Whilst there were no pathogenic bacteria, except in the braised ham, it is inadvisable to have too many bacteria present. Some sliced pork luncheon meat was mouldy, and a liver pate was also mouldy when the can was opened. This product was also given a proprietary name without stating it was a registered trade mark and thus contravened the Labelling of Food Order, 1953, Regulation 4 2(b).

Some Scotch eggs were unfit for consumption due to the high bacteriological count, and cans of Irish stew together with some of the peeled potatoes used in the stew were submitted. The cans of stew were blown or springy due to excessive growth of putrefactive organisms, and the potatoes were badly contaminated with bacteria and unfit to be used in the stew.

A pork pie was stated to possess an unusual or sour taste but no rancidity or other decomposition could be detected, the strong flavour being due to the spice mixture use in manufacture not being properly mixed. The purchaser of a steak and kidney pie complained that it contained insufficient meat; but when the pie was examined in parallel with another purchased as a control it was found that the complaint pie contained 26.7% total meat which complied with requirements, but that the control pie contained only 20.2% meat. It was also noticed that the complaint pie weighed less than the control, indicating that more care should have been exercised in manufacture.

White spots on the remains of a kipper were due to the growth of micro-organisms owing to the fish not being kept under ideal conditions during hot weather; and a complaint was received regarding tinned fish purchased from a stallholder. The labels printed on the cans had been painted over and showed no name of product or packer, thus contravening the Labelling of Food Order. Although the opened complaint can was bad on receipt, the contents of an unopened can were sterile. The complainant also stated the fish had been sold as pilchards, whereas they were in fact herrings.

A portion of apple strudel with a pearl button were examined, and the condition of the button proved that it had been in the apple strudel when cooked. Some so-called parboiled brown rice of which complaint was made, and a sample from a further delivery were submitted. The rice possessed a very unpleasant odour but, if washed several times, most of the odour disappeared although it was still unpleasant to eat. It required boiling for 45 minutes to soften it, and it was thought it might have remained damp for some time before being heated under pressure to burst the starch grains which, however, had not allowed the rice to swell and resulted in the rice requiring a longer, and not a shorter, cooking time.

The purchaser of a chocolate sponge cake complained that it tasted of disinfectant, but the cake was old stock and the taste and odour were due to the fat being extremely rancid. On the other hand, a canned cream rice pudding possessed a definite flavour of disinfectant.

Some jam tart and custard served by the Council's Meals on Wheels service showed unusual discolouration marks resulting from the use of a coarse baking powder and improper mixing of the pastry, so that the slightly acid portions of the pastry attacked the metal of the baking tin. Those parts of the pie in contact with the metal were dark and the remainder a normal colour.

A tin containing some decomposing peaches and mouldy syrup with a larva were submitted, the complainant stating she had found the maggot in the tin. The larva did not appear to belong to the fauna of Great Britain and appeared to have been cooked so that there was little doubt that it had been in the tin when the fruit was processed. A fruit fly was also found in a plate of junior mashed peach mix, but owing to its small size it was impossible to state whether it had been originally cooked in the mix, although probably it had been.

A cook at a school complained that a plaster had been found in a can of rhubarb, and the empty can and the plaster were submitted. The plaster was discoloured and possessed an odour of rhubarb, but traces of sugar were detected, indicating that the plaster had been in some sweetened fruit, whereas the label on the tin declared the ingredients as rhubarb and water only. It was probable the plaster had come into contact with rhubarb to which sugar had been added and was not present in the original can. Spots on dried apricots appeared to consist of congealed sap and probably resulted from insect attack which had punctured the surface of the apricots during growth.

A salad contained the end of a homemade cigarette which, from its appearance, had gained access during preparation. Another purchaser complained that a potato salad was mouldy, and this was not surprising as it had been manufactured on 26th March and not purchased until the 2nd May.

The contents of a can of spaghetti with tomato and cheese sauce were stated by the complainant to have been mouldy on opening. They were covered with mould when received at the laboratory but after emptying and cleaning the can it was seen that the lid and surface of the tinplate

above the mould were not badly corroded, indicating that the contents had only become mouldy after the can was opened, and were not due to faulty manufacture.

A complaint was received owing to the unpleasant flavour of a peanut butter, and examination of this and a control sample showed that both possessed a flavour of petrol, so that they must have been contaminated during manufacture.

An orange drink contained a jagged piece of curved glass $\frac{3}{4}$ " x $\frac{3}{8}$ " probably derived from an electric lamp shade; whilst another orange drink contained a piece of plastic material $1\frac{1}{2}$ " long and $\frac{3}{4}$ " high, which looked similar to a portion from the neck of a container like that in which the drink was sold. A complaint was received because of a black deposit in the spout of a soda syphon. This was a mould, due to the top of the syphon not having been properly screwed down and allowing moisture to keep the mould damp.

Three unsweetened orange juices were submitted, in view of the complaint that they were fizzy and tasted sour. They were badly contaminated with bacteria and unfit for consumption, but the caps could easily be unscrewed by a potential purchaser wishing to smell the contents before buying, thereby contaminating the contents for another customer. It was suggested that a more satisfactory cap should be used.

Transfers sold with chewing gum were thought to have caused a rash on girls, but this could not be confirmed when tested on members of the laboratory staff. Most of the dyes used were American food colours, and it was possible that girls of a certain age might have been susceptible to them.

A drum of salt was submitted as it was claimed to have been the cause of stomach pains and, although nothing appeared to have been added to it intentionally, oil from machinery had probably dropped on it, causing an unpleasant appearance when added to water for cooking.

Failure to comply with standards laid down by Regulations still continues to be responsible for the bulk of analyses in a food laboratory. A sample of pork kidneys in gravy contained only 47.4% of meat instead of 75%, a chicken spread contained 64% of meat, and two samples of meat paste each contained 60% of total meat and were therefore 8.5% deficient in meat.

A product described as "Pork'n Cheese Loaf" was incorrectly labelled, the apparent meat (including cheese) content being only 66% and the type of cheese not being stated. Chopped chicken in jelly contained only 65.8% of meat being 18% deficient in chickens. Some boneless chicken in jelly contained only 77% of meat instead of 80%, and canned hot dogs in brine contained 54.5% of meat and were therefore reported as inferior.

The peroxide value of a sample of lard was 33.3 indicating slight rancidity and the sample was reported as inferior.

Some mussels cooked in their shells contained an excessive quantity of dirt and sand, and had not been properly purified before being sold for cooking; and some canned shrimps were found to be a soggy mass, whereas they should be individually whole and separate; with a little surrounding liquid.

A cheese spread contained only 18.68% of fat, being 6.6% deficient according to the requirements of the Cheese Regulations.

A fruit pie filling contained 90 parts per million of tin and 29 parts per million of iron, due to corrosion of the can. The label showed illustrations of various dishes of fruit quite inconsistent with the puree contained in the can. A guava jelly was stated on the label to contain sodium benzoate and 200 parts per million were detected. Benzoic acid is a prohibited preservative in jams in this county, but not in America.

The soluble solids of an apple jelly were only 63.1% instead of the required 65% for jelly jams in a hermetically sealed jar. It was, however, doubtful whether the jar was really hermetically sealed as the closure was incapable of holding a partial vacuum and, in that case, the soluble solids ought to have been not less than 68.5%. It was also 25% deficient in apple and the name and address of the seller were not on the label.

A home-made plum jam contained only 60% of soluble solids instead of 65%.

There was too much variation in the types of fruit present in two cans of fruit examined.

A Hymettus honey contained eucalyptus pollen grains which should not have been present in genuine Hymettus honey; and thyme pollen grains, which should have been present, were absent, showing that the honey was not Hymettus honey.

Three samples of Soy sauce contained 82, 12, and 5 parts per million respectively of parahydroxybenzoic acid which, in the opinion of your analyst, is a prohibited preservative and must, in any case, be declared in a separate panel on the label. The Preservatives in Food Regulations unfortunately provide for the use of preservatives in "Sauce", but do not define a sauce; and the only legal definition of sauce at the present time is for a gravy sauce in a meat product.

A "Cassareep flavouring" possessed an objectionable metallic flavour due to excessive iron. It was also incorrectly labelled as it did not state that it was foreign produce. The importers stated the flavouring came in 45-gallon second-hand metal barrels which they heated to melt the flavouring into liquid form in order to fill the bottles.

A mixed spice contained 50 parts per million of copper, whereas the maximum proposed by the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food is 30 parts per million; and a sample of sage was contaminated with the leaves of the cistus shrub.

A lemon and lime juice drink contained 9.63 grains of cyclamic acid per 10 gallons of drink, and a ginger beer 9.65% of cyclamic acid per 10 gallons of drink. In view of the small quantities this may have been present in a concentrate used by the manufacturers, but cyclamates are no longer permitted for food purposes in this country.

The label of some concentrated apple juice claimed that it was 7 times concentrated, but analysis showed that the concentration was not greater than 4 times. Another apple juice contained not more than 80% of apple juice and was reported as inferior; and a tamarind nectar contained not more than 9% of tamarind juice, and was not considered to be a fruit nectar as such.

Some chocolate buttons were made with skimmed milk powder, and practically all the fat was palm-kernel fat. As the fat of chocolate must be cocoa-butter, this confectionery could not be described as chocolate.

Four samples described as "Full Cream Buttermilk Powder" were considered to be misdescribed, as most of the fat is removed from buttermilk in making butter, and the powder must therefore be described as "Buttermilk Powder". An instant porridge was a satisfactory preparation but the word "Instant" should have been in the same-sized print as "Porridge" since the product in the pack was not a ready-made porridge. Another product, labelled "Gari", appeared to be a kind of cassava semolina, so that it should have been labelled as such.

Chicken stock cubes were incorrectly labelled. They consisted chiefly of salt, monosodium glutamate, and hydrolysed protein with no chicken or other meat, and should have been described as "Chicken-Flavour Stock Cubes".

Objection was taken to the name "Patum Pepericum" given to a paste and it was suggested that a proper description should have appeared underneath. The manufacturers claimed, however, that the product had been on the market for 100 years and therefore no exception could be taken to the name. The new Labelling Regulations protect a name used for over 30 years; but it will be impossible, especially with foreign products, to check the accuracy of claims.

A canned tuna salad was stated to contain artichokes which were not present, whilst cauliflower and gherkins were present but were not declared. The tuna was declared first although, again, it was not present in the greatest quantity. A prawn cocktail contained no lettuce in spite of the illustration and the label should have stated "Lettuce required"; and an apple and lemon stuffing mix showed an illustration of pork and apples not in the pack. A lemon curd and a blackcurrent jam were unlabelled and therefore contravened the Labelling of Food Regulations as they showed neither the weight, nor the name and address of the packer. The so-called blackcurrent jam was a jelly jam.

The name "Gardeneggs" was considered incorrect for the canned fruit of the egg plant, which in England is now normally called aubergine. Some pickled beetroot was merely labelled as beetroot without reference to the fact that it was a pickle.

A vegetable concentrate was considered to have a misleading label as it contained 18.1% of salt not declared as such, though salt was stated to be present in its protein base. The statement that only about 0.5% of salt was present in a cup of drink made as directed was considered misleading for a person who must not take salt; and the description "Rice Crackers" was considered incorrect for a product made primarily from rice and peanuts, which was primarily of a peanut flavour.

Medicinal Baths and Treatment Centre

General

Concentration of all transport and services at Scotts Road was achieved during the early part of the year. However, the beneficial effects of the move were not immediately apparent. Considerable difficulty was experienced during the year in obtaining driver/handyman of the required ability and stability. With an establishment of four there were 7 changes during the year so that the driver with the longest service at the end of the year started work on the 17th March 1970. Scrutiny of the various heads in this section gives some idea of the range and diversity of the work of these men and perhaps in some measure conveys the difficulties the supervisory staff experienced in maintaining a service with untrained personnel most of the time.

The strike in the Autumn added to our difficulties. We lost a driver who obtained employment outside local government and were reduced to two men as we were already one under establishment. With these two men who were given exemption by the strike committee our efforts were concentrated on duties of an essential nature.

Co-operation with the various local hospitals in the training of medical students and nurses continued and the groups who visited our Centre received an insight into the work of the different sections.

Neighbouring authorities continued to make use of the facilities provided in this section - 523 persons receiving 840 treatments, the largest user being Ealing - 320 residents receiving 525 treatments. The income received in this connection enables staff and equipment to be more economically employed to the ultimate benefit of our Authority.

Cleansing and Treatment of Persons

It is disappointing to have to record that over the past five years there has been an increase each year in the number of persons treated for scabies. In 1966 there were 354 and in 1970 there were 527 cases.

Treatments for pediculosis which dropped each year from 357 in 1966 to 267 in 1969 showed an increase this year of 69. The decrease would have continued if it had not been for an inexplicable increase of 83 individuals treated for body lice, making the total 171 for 1970. Of this number 87 were for males from lodging houses and 33 of no fixed abodes. In all, only 6 females were treated and of these three were of no fixed abodes. These statistics do not reflect favourably on the males and even the figures relating to head lice indicate that the long-haired males are rapidly gaining ground in a field that was once dominated by the ladies, 49 males and 74 females receiving attention for this condition during the year under review. Of the 49 males treated, 46 were under 30 years of age. As a matter of interest, the first recorded treatment solely for head lice in Hammersmith for adult males was in 1958 when 2 men requested cleansing.

In connection with these treatments, the personal clothing of 317 patients was sterilised, and the autoclave was used for this purpose on 215 occasions.

	<u>PED .CAPITIS</u>				<u>PED .PUBIS</u>				<u>PED .CORPORIS</u>			
	<u>Males</u>		<u>Females</u>		<u>Males</u>		<u>Females</u>		<u>Males</u>		<u>Females</u>	
	<u>Ind</u>	<u>Tre</u>	<u>Ind</u>	<u>Tre</u>	<u>Ind</u>	<u>Tre</u>	<u>Ind</u>	<u>Tre</u>	<u>Ind</u>	<u>Tre</u>	<u>Ind</u>	<u>Tre</u>
Adults	15	15	37	42	30	55	12	18	43	47	2	2
School Aged	19	24	18	27					2	2		
Under 5 years	14	14	19	25							1	1
From lodging houses	1	1							87	123		
Of no fixed address									33	35	3	3
	49	54	74	94	30	55	12	18	165	207	6	6

Steam and Chemical Sterilisation

With the closure of the Townmead Road establishment the number of sterilisers was reduced from 3 to 1. The Council have agreed to the purchase of a modern, small-capacity autoclave for installation at Scotts Road and when this is operating a speedier and more economical service will be provided for the sterilisation of personal clothing, leaving the large-capacity machine to deal with bedding.

Demand for this service is mainly from our own establishments and Fulham Hospital, as the following tables indicate:

Steam sterilisation of bedding, clothing and soft furnishings:

	<u>Number of collections</u>	<u>Number of articles</u>
Fulham Hospital	67	3149
West London Hospital	32	125
Hurlingham Lodge	59	5782
Stamford House	97	1106
Olympia	1	185
Private Dwellings	18	42
Business Premises	2	7
TOTALS	<u>276</u>	<u>10396</u>

Formaldehyde sterilisation of clothing and accessories:

Stamford House	78	897
Private Dwellings	4	11
TOTALS	<u>82</u>	<u>908</u>
GRAND TOTALS	<u>358</u>	<u>11304</u>

Steam sterilisation of clothing for verminous persons and for certain cases of scabies:

	Number of persons	Number of stovings
Living in Hammersmith or of no fixed abode	317	215

In addition 467 articles from the neighbouring Boroughs of Ealing, Hounslow, and Richmond-upon-Thames were treated.

Disinfestation

There was a slight increase of treatments in this section, 1,532 rooms in 637 premises receiving attention, compared with 1,391 and 543 in the previous year.

In the following table no figures of spraying for flies are included for the months of October, November and December, as work under this heading was almost continuous as a result of the strike. For all October and the first week of November, normal refuse collection was at a standstill. The resulting piles of rubbish which littered the streets, together with the "Official" tips, provided ideal breeding conditions for all species of flies. The mild Autumn assisted the plague and despite our efforts the nuisance was never really abated until the onset of cold weather in early December.

There is no doubt that conditions would have been much worse throughout the Borough had not the strike committee permitted our two drivers to continue work on duties of an essential nature. During the strike period, 110 sites were treated, 30 gallons of concentrated tip dressing, 25 gallons of disinfectant and 1 cwt. of pest control powder were used. Once the strike was over, the accumulations were quickly cleared but the sites

continued to give trouble and chutes in the large blocks of flats were left in a foul condition encouraging breeding. Spraying kept the nuisance in check until cleansing was effected. During this period, a further 10 gallons of concentrated tip dressing, 5 gallons of concentrated insecticide, and 28lbs. of powder were used.

Our work in the control of the large tips was materially assisted by the use of a mobile unit provided by the Borough Engineer. This consisted of an 80-gallon tank and a motor pump with two hoses of generous length, mounted on a lorry. Without this unit, our normal 1 and 2 gallon hand-operated sprays would never have coped.

DISINFESTATION AND DISINFECTION OF PROPERTY

<u>Nuisance</u>	<u>Premises</u>	<u>Rooms</u>
Disinfestation:		
Bed bugs	202	448
Fleas	158	565
Various insects	86	162
Ants	53	92
Beetles	45	106
Dirty conditions	39	63
Cockroaches	35	64
Flies	14	26
Lice	5	6
	<hr style="width: 50%; margin: 0 auto;"/>	<hr style="width: 50%; margin: 0 auto;"/>
	637	1532
	<hr style="width: 50%; margin: 0 auto;"/>	<hr style="width: 50%; margin: 0 auto;"/>

In addition assistance was rendered in 110 complaints of wasps, received from July to November.

Disinfection

Work under this heading continued to decline and was mostly confined to requests following terminal illness usually of a non-infectious nature. Spraying is carried out to re-assure what is generally a distressed relative, formaldehyde being used for 31 rooms in 16 premises.

Assisted Bathing

This service, instituted by the Metropolitan Borough of Hammersmith in 1961, assists mainly the aged, infirm person. Requests are received mostly from General Practitioners and Social Workers. The patients are collected and returned to their homes by Council transport. It is a strictly limited service as it is very time consuming but is greatly appreciated by the few who benefit. During the past year 15 persons varying in age from 52 to 93 received 241 baths. The infirmities included Psoriasis, Hemiplegia, Arthritis and Epilepsy. The station Superintendent, who is a State Registered Nurse, keeps a strict watch on these patients during bathing.

Health Laundry

Work on the reorganised laundry was completed on 9th March, 1970, after many delays. Unfortunately, it was quickly apparent that a satisfactory work flow was impossible to achieve with the limited space available after the installation of the larger and additional equipment. Accordingly, the receipt and marking section was transferred to the Cleansing Station where it has operated very well albeit with some disruption of the cleansing work. A further source of trouble was the Mariner Ironer which was moved from Townmead Road, and reconditioned. It never operated satisfactorily

and was under constant repair until the end of September when it was finally ascertained that the trouble was caused through incorrect installation. Lack of this machine for such a long period caused considerable dislocation in the work flow, and output fell considerably.

With all machines operating smoothly it was anticipated that normal work could be resumed but the strike, initially of drivers, which increased over the next month made it necessary to curtail the service even more. Only 7,372 incontinent articles were dealt with in October compared with 11,392 the previous year. Output for the year was down by 10%.

Throughout this difficult period priority was always given to the incontinent side, and even during the few days in November when all transport was brought to a standstill and no steam was available for the laundry, voluntary workers came to the rescue. The laundry that had been dealt with was delivered, and supplies of disposable material distributed. The help rendered by these voluntary organisations was greatly appreciated. Output rose during November, and December was back to normal with almost 10,000 articles processed.

LAUNDRY SERVICE FOR THE VARIOUS DEPARTMENTS AND SECTIONS OF THE BOROUGH, THE GREATER LONDON COUNCIL AND VOLUNTARY ORGANISATIONS.

(NOT NECESSARILY FOULED AND INFECTED)

Finance and Supplies	36624
Social Services	4611
Personal Health	2216
Nazareth House	1898
Greater London Council	1613
Environmental Health	1228
Mental Health	1104
Voluntary Organisations	537
Borough Engineers Dept.	474
Children's Department	273
	<hr/>
TOTAL	50578

Approximately 6,500 towels and items of protective clothing used in the course of duties at Scotts Road were laundered on the premises.

This represents a flow of just under eleven hundred articles a week other than those items collected under the fouled laundry service.

INCONTINENT SECTION

Yearly Statistical Summaries

	<u>1966</u>	<u>1967</u>	<u>1968</u>	<u>1969</u>	<u>1970</u>
Number of cases on 1st January	180	198	218	211	199
New cases during the year	226	191	171	153	149
Request not covered by the Act	26	16	11	33	10
Cases removed for the register	208	171	178	270	197
Cases continuing at the 31st December	198	218	211	199	151
Number of collections	11229	11508	11692	10693	9547
Number of articles laundered	134564	133857	140303	130578	117186

STATISTICAL SUMMARY

	1967	1968	1969	1970
<u>FOR HAMMERSMITH</u>				
HEALTH LAUNDRIES:				
Incontinent Section	133,857	140,303	130,578	117,186
Departmental Section	56,512	42,431	53,458	57,078
Total of all articles laundered	190,369	182,734	184,036	174,264
BATHING OF AGED AND INFIRM:				
Number of persons assisted	18	18	17	15
Number of cleansings	291	308	261	241
PERSONAL CLEANSING AND TREATMENT:				
Pediculosis				
Individuals	305	291	267	336
Treatments	439	391	343	434
Scabies				
Individuals	463	468	519	527
Treatments	907	795	787	882
Other dermatological conditions				
Individuals	20	-	19	7
Treatments	41	-	21	12
SPRAYING OF PROPERTY:				
Number of premises	386	446	543	654
Number of rooms	763	973	1,391	1,565
STEAM & CHEMICAL STERILISATION OF BEDDING, CLOTHING, ETC:				
Number of collections	272	385	364	358
Number of articles	8,029	9,736	10,914	11,304
<u>FOR OTHER LOCAL AUTHORITIES</u>				
PERSONAL CLEANSING:				
Individuals	394	361	350	523
Treatments	584	604	588	840

CORONER'S COURT AND PUBLIC MORTUARY

These buildings, which are situated in a central part of the Borough within easy reach of the excellent travel facilities in Hammersmith Broadway, are the property of the Council.

The Coroner's Court and ancilliary offices are leased to the Greater London Council who are responsible for this aspect of the service.

The Court Room is well equipped with adequate accommodation for Jury, Press, and public in addition to Counsel and Officials. Microphones are provided for the Coroner and Witnesses with an amplifier to ensure that all speech is clearly audible throughout the Court. Linked to this system is a tape recorder for use by the Coroner. Offices are provided for the Coroner and his officers with adequate waiting rooms and toilet facilities.

The public mortuary and post-mortem room are provided by the local authority under Section 198 of the P.H.A., 1936. There are two purpose-built refrigerators providing accommodation for 18 bodies, which are more than adequate to cover normal needs in the mortuary. A viewing room is also provided where relatives through a specially-designed glass screen can view the deceased. This room is furnished with flowering plants by the Parks Department.

The Post-Mortem room is equipped with four tables of special design incorporating elbow-operating taps and foot-operated sluicing mechanism with drainage ducts that can readily be cleared. An independent gas boiler provides very hot water to meet all requirements and an electrically-operated air conditioning unit ensures a satisfactory temperature both Summer and Winter. Offices are provided for both the Pathologist and Mortuary Superintendent, with toilet facilities.

A reciprocal agreement operates with the neighbouring borough of Ealing during the absence of either Superintendent due to leave or sickness. Bodies are routed to the Acton mortuary, or vice-versa, and a nominal fee of £2 per body is either received or paid.

During the year 775 bodies were received at the mortuary, an increase of 82 over the previous year.

The following is a summary for the year:-

Bodies for Hammersmith

By order of Coroner	682
Routed to Ealing	77
<u>Total</u>	<u>759</u>

Bodies for Ealing

	93
<u>Total</u>	<u>852</u>

No. of Post-Morten examinations

Hammersmith cases	682
Ealing cases (at Hammersmith)	93
Hammersmith cases (at Ealing)	77
<u>Total</u>	<u>852</u>

No. of Inquests held at Coroner's Court

Hammersmith cases	84
Acton cases	50
Hounslow cases	73
<u>Total</u>	<u>207</u>

National Assistance Act, 1948

National Assistance (Amendment) Act, 1951

Removal to Hospital of Persons in need of Care and Attention

Under the provisions of the above Acts, application may be made to a Court of Summary Jurisdiction for an Order for the compulsory removal to hospital of persons in need of proper care and attention.

It was not found necessary to take action under these Acts for any person in the Borough during the year. In all cases it was possible to find a solution in other ways, usually by co-operation with the family doctor and by providing ancilliary services.

National Assistance Act 1948 - Section 50 Burial or Cremation of the Dead

During the year approx. 40 burials were carried out by the Council.

Public Baths and Wash-houses

The Metropolitan Water Board supply is utilised for both baths and pool. The water is subjected to chlorination, alkali treatment and filtration with continuous circulation. Samples of water were taken for analysis and all were reported satisfactory. In addition frequent checks are made by the staff at the baths, particularly during heavy bathing loads. The public baths and wash-houses in Lime Grove; Shepherds Bush; and North End Road, Fulham, provide facilities for bathing, swimming and laundry work. For bathing there are private hot baths or shower cubicles; and towels, soap, bath cubes, and shampoos are supplied at a small cost. There are concession rates for children and for old-age pensioners free baths on certain days. In the public wash-houses fully automatic machinery is provided for washing and spin drying. There are also facilities for ironing.

There are two swimming baths at Lime Grove and three at North End Road, only the smaller ones being open all the year round. The larger ones are available during the Summer months only, as, during the Winter season there are converted into public halls which may be hired for meetings, concerts, wrestling, or dancing, and certain periods are set aside for badminton and indoor bowls.

Bloemfontein Road

There is an open-air pool at Bloemfontein Road, Shepherds Bush, which during the Summer months provides facilities for swimming and sunbathing.

During the Summer months checks are also made on the various paddling pools provided in the parks.

Staff Medical Examinations

The new system inaugurated in October 1969 is working satisfactorily. All applicants for employment with the Council are required to complete a detailed questionnaire which is considered by the Principal Medical Officer who then decides whether a medical examination is necessary.

Medical examinations however are still carried out in the following cases:

1. Personnel in contact with children
2. Cases in prolonged sickness
3. Personnel for extension of service.
4. All food handlers

All personnel are still required to have an X-ray

Tribute must once again be paid to the medical practitioners and hospital specialists who supply essential information in so many cases.

With their specialised knowledge, which is so readily afforded, doubtful cases are properly assessed to the mutual benefit of both Council and employee.

Statistical information is given as follows:

STAFF MEDICAL QUESTIONNAIRES & EXAMINATIONS-1st JANUARY until 31st DECEMBER 1970

		<u>TOTAL</u>
<u>New Applicants</u>		
Questionnaires received	741	
" satisfactory	541	
Applicants withdrawn or not offered posts	32	573
<u>Medically examined</u>		
Satisfactory	133	
Not satisfactory	10	
Suitable for employment subject to review	25	168
<hr/>		
<u>Medical Examinations for:-</u>		
<u>Extended service</u>		
Examined and recommended for extension of service	53	
Examined and not recommended for extended service	2	55
<hr/>		
<u>Retirement on medical grounds</u>		
Examined and recommended for retirement (including two domiciliary visits)	45	45
<hr/>		
<u>Special requests</u>		
Recommended as fit to return to work	8	
Recommended as fit for light duties for limited period	6	
Recommended as fit for alternative employment	2	
Recommended as fit for transfer to alternative employment	5	
Recommended as fit for the work in which they are employed	8	
Recommended as fit for re-employment	4	
Referred to general practitioner	2	35
<hr/>		
<u>Reviews</u>		
Examined and now satisfactory	18	
Examined a further review recommended	25	
Examined and recommended to retire	5	
Examined new review recommended	17	65
<hr/>		
Examined at Hammersmith for other boroughs	1	
Examined elsewhere for Hammersmith	1	
Examined at Annesley for Annesley House, Southsea	3	
Examined at Hammersmith for Annesley House (1 one not satisfactory)	12	18
<hr/>		
TOTAL MEDICAL EXAMINATIONS		386

Chest X-ray examinations at Hammersmith Hospital	373	<u>TOTAL</u>
Chest X-ray examinations at Hammersmith Hospital (repeats)	20	
Chest X-ray examinations S.W.L.Mass Radiography Unit	210	
Chest X-ray examinations Other hospitals and Mass X-ray units	175	778

Special and general practitioner letters	67
Stool examinations	9

Staff Medical Examinations - 1970

Retired on grounds of permanent ill-health

(47)

Psychiatric Grounds	8
Hypertension	5
Heart Disease	1
Other Diseases Of Circulatory System	12
Bronchitis & Emphysema	6
Epilepsy	1
Cancer	2
Arthritis	4
Post Operative Condition	2
Diabetes	1
Miscellaneous	5

Failed medical examination for employment with Council

(12)

Psychiatric Grounds	3
Heart Disease	2
Other Diseases Of Circulatory System	2
Bronchitis & Emphysema	3
Epilepsy	1
Cancer	1

PART ONE

HEALTH SERVICES

C. PERSONAL HEALTH

THE YEAR

OF THE YEAR

OF THE YEAR

Personal Health Service

In England and Wales the Personal Health Services of the Local Health Authorities (i.e. the Councils of Counties and County Boroughs) are provided under Sections 21-29 of the National Health Service Act 1946, as amended by the Health Services and Public Health Act 1968. A similar position obtains in the case of the London Borough Councils with the exception that Section 27, which deals with the provision of an ambulance service, is administered as one service throughout Greater London by the Greater London Council.

Co-Ordination and Co-operation of Services

Co-ordination and co-operation of the Local Health Authority's services with the hospital and family doctor services were continued during the year. There was consultation between the three services at Maternity Liaison Committees and during the year many visits of observation were made to personal health establishments. Visitors included students of nursing, medicine, dietetics, nutrition, home economics, social and hospital administration and student tutors. Nursing Officers continued to teach student nurses at Fulham/Charing Cross, West London, Royal Masonic and Hammersmith Hospitals.

The ways in which domiciliary staff co-operated with the other two branches of the Health Service are described in the following paragraphs on particular services.

Health Centres (National Health Service Act 1946, Section 21)

The National Health Service Act 1946 made it a duty (which for various reasons has not been insisted upon) for every Local Health Authority to provide, equip and maintain, to the satisfaction of the Minister, premises which shall be called "Health Centres" at which facilities shall be available for all or any of the following purposes:-

General medical, dental or pharmaceutical services, services of the Local Health Authority, services of specialists and health education, and "a Local Health Authority shall to the satisfaction of the Minister provide staff for any Health Centre provided by them".

In July 1965 the Minister of Health asked for information on the Council's long-term plans for the development of the Health and Welfare Services. The period for which information was required was the 10 years from 1st of April 1966 - 31st March 1976; and in addition, information in the year 1965/66 was requested. It was, therefore, essential to forecast the demands and needs of the various services to decide how they could best be met for the future.

It was felt that the needs of the Borough could best be served by Group Health Centres for the practice of preventive medicine and for the promotion of the mental and physical health of the family. These Centres would provide all or most of the following:-

Accommodation for General Practitioners
Maternity and Child Health facilities
School Treatment Centre
Information/Advice Centre
Additional Special Clinics as necessary
(for example, geriatric/chiropractic)

There are obvious advantages to both the public and staff in having these services in one building. A full description was given in my Annual Report for 1968 of the first Health Centre opened in the London Borough of Hammersmith. This Centre provides accommodation for four General Practitioners and a number of local authority clinics. Co-operation between the two branches of the services remains excellent.

Care of Mothers and Young Children (National Health Service Act 1946 Section 22)

Under Section 22 of the National Health Service Act 1946 it is the duty of every local authority to make arrangements for the care (including in particular dental care) of expectant and nursing mothers and of children who have not attained the age of five years and are not attending primary schools maintained by a local education authority.

Child Health Centres

There are eight Maternity and Child Health Centres in the Borough, together with a purpose-built Health Centre as shown below:-

Becklow Gardens,
Becklow Road, W.12.

Burne Jones,
North End Road, W.14.

Glenthorne Road,
48 Glenthorne Road, W.6.

Greyhound Road,
90-92 Greyhound Road, W.6.

Milson Road,
1-3 Milson Road, W.14.

Parsons Green,
5/7 Parsons Green, S.W.6.

Wandsworth Bridge Road,
170 Wandsworth Bridge Road, S.W.6.

Westway,
The Curve, W.12.

Health Centre

The Grove Health Centre,
95 Goldhawk Road, W.12.

These Centres provide between them the following services:

Ante-natal
Cytology
Creches
Dental care for expectant and nursing mothers
and children under 5
Family Planning
Child Health

Mothers' Groups
Mothercraft
Parentcraft
Relaxation
Toddlers
Vaccination and Immunisation

In 1970 attendances at the Child Health Centres (including attendance at the Grove Health Centre) of children up to 5 years of age totalled 30,271 (34,572).

Well-Baby Clinics Held at General Practitioners' Surgeries

In addition to the child health sessions at the Council's Maternity and Child Health Centres four health visitors attended well-baby sessions held in general practitioners' surgeries. The general practitioner also conducts a well-baby clinic for his own patients in one of the Council's Maternity and Child Health Centres.

Family Planning

From the 1st January 1969 the Family Planning Association has undertaken responsibility for this service on an agency basis, the current arrangements providing for free consultation and advice in all cases. Medical and Social cases receive free supplies and the Domiciliary service is free to all recipients. The cost to the Council for this service in the year under review was approximately £10,000.

Family Planning Clinics are held as follows:-

Hammersmith, Glenthorne Road, FPA Clinic,
Glenthorne Road Child Health Centre,
48 Glenthorne Road, W.6.

Fulham, Greyhound Road FPA Clinic,
Greyhound Road Child Health Centre,
90/92 Greyhound Road, W.6.

Fulham, Parsons Green FPA Clinic,
Parsons Green Child Health Centre,
5/7 Parsons Green, S.W.6.

Hammersmith, Westway FPA Clinic,
Westway Child Health Centre, The Curve, W.12.

Hammersmith, The Grove FPA Clinic,
The Grove Health Centre, 95 Goldhawk Road, W.12.

Hammersmith Becklow Gardens FPA Clinic,
Becklow Gardens Child Health Centre, W.12.

West London Hospital FPA Clinic,
Outpatients' Department, Hammersmith Road, W.6.

CLINIC STATISTICS 1970 - HAMMERSMITH

	New Patients	FPA Transfers	Total Visits	Cytology	N.H.S. Act 1967 Free Advice	Free Supplies
Becklow Gardens	151	7	638	97	180	24
Glenthorne Road	157	38	880	170	234	19
Greyhound Road	204	31	1,008	105	355	32
The Grove	134	19	597	109	114	60
Parsons Green	422	114	2,372	543	707	80
West London Hospital	509	97	3,124	295	457	10
Westway	79	14	425	87	132	36
	<u>1,656</u>	<u>320</u>	<u>9,044</u>	<u>1,406</u>	<u>2,179</u>	<u>261</u>

Day Nurseries

There continues to be a demand for places for children in the highest priority groups and each of the Council's seven day nurseries has a waiting list.

Plans have been approved for a new day nursery in the White City Estate area, which will provide a further thirty-five places; and a replacement for Mulgrave Road Day Nursery is to be built, providing an extra thirty places.

The total attendances made during the year were 88,793.

Nurseries & Child Minders Regulations Act, 1948, as amended by the Health Services & Public Health Act, 1968

Although the work of registration of child minders has continued steadily, the total number of minders has not greatly increased. This is because many mothers stop minding when their own children reach school age. Consequently, the demand for child minders exceeds the supply. At the end of the year there were 255 registered minders in the Borough, caring for 523 children under the age of five.

Occasional Creches

Sessions have continued at Glenthorne Road and Greyhound Road Child Health Centres.

The total attendances at the Council creches were 6,806.

Play Groups

The play group movement has continued to expand; some premises are now used for both morning and afternoon groups. The number of children benefiting from this activity has therefore increased. Parents take a lively interest in the groups and mothers give a great deal of practical help in the everyday organisation. The nursing officers and health visitors have continued to give encouragement and advice and have also participated in courses of training for play group leaders. Two-hundred-and-thirty-seven children were members of 14 groups at the end of the year and consideration is being given to the registration of another 4 groups.

Observation and Handicap Register

Babies are considered to be at risk of developing a handicap by reason of adverse factors occurring during pregnancy, labour, or the lying-in period, and the names of such children are entered in the Observation Register. This Register is scrutinised at regular periods by a Medical Officer so that the child's progress and development may be kept under review. Should a handicap become evident the child's name is transferred to the Handicap Register.

Observation Register

623 (669) cases in 1970 were notified of whom 2(4) had been transferred to the Handicap Register by the 31st December 1970.

Handicap Register

The table below is an analysis of notifications in 1970 and relates to 45 children born in that year. 116 (109) cases were placed on the Register, of whom 2(4) had been transferred from the Observation Register. 28 (12) had been notified through the scheme for reporting malformations at birth. 13(9) were subsequently removed from the Register due to change of address or death:

Mongol	3 (4)
Educationally/Severely Sub-Normal	2 (23)
Spina Bifida	2 (4)
Congenital Heart Disease	5 (10)
Hare Lip - Cleft Palate	2 (4)
Talipes	7 (3)
Abnormalities of Genito-Urinary Tract	4 (10)
Limb Abnormalities	6 (4)
Delayed Speech	1 (3)
Disease of Blood	- (4)
Disease of Nervous System	1 (9)
Cretin	- (-)
Coeliac Disease	- (1)
Deaf & Partial Hearing	2 (3)
Eye Defects	- (5)
Cystic Fibrosis	- (1)
Spastic	2 (4)
Epilepsy	2 (6)
Skin Diseases	- (1)
Cerebral Palsy	- (2)
Asthma	- (4)
Multiple Defects	2 (4)
Other	4 (-)

The total number on the Handicap Register at the end of 1970 was 272.

Scheme for Reporting Congenital Malformations

The Scheme rests on information being sent to the Medical Officer of Health by the doctor or midwife notifying a birth (as required by Section 203 of the Public Health Act 1936) of any malformation of the child observable at birth. The Medical Officer of Health is required to return to the Director and Registrar General a standard form for every child

living in his area in whose case he has received information of a malformation observed at birth.

In 1970 44(40) cases were notified. Notification was made as follows:-

Central Nervous System	8
Eye and Ear	2
Alimentary System	5
Heart and Circulatory System	0
Respiratory System	0
Urino-genital System	6
Limbs	20
Other parts of musculo-skeletal system	0
Other systems	0
Other malformations	3

These children are all under the care of hospitals and their names are on the Borough's Register of Handicapped Children.

Maternity and Child Health Services - Dental

Every effort has been made during the past year to give maximum priority to pre-school children. Frequently, children do not receive any dental treatment until they start school and often at that stage require a number of extractions. The earlier dental treatment can be started, the easier it is likely to be. It is essential for the future attitude of the child to the dentist that the first visit should be as calm as possible.

Parents often think that baby teeth do not matter as they will be replaced eventually by the permanent teeth. Unfortunately, neglected baby teeth frequently result in pain and the extraction of one or more teeth. An essential part of the M.C.H. Dental Service is to encourage mothers and children to accept the need for regular dental treatment from as early an age as possible.

The filling of baby teeth, far from being a waste of time, is an important part of preventing pain and infection, of maintaining proper function, of allowing normal jaw development and of educating the child to a healthy attitude towards the dentist and towards good oral hygiene.

During the year all day nurseries were dentally inspected as were the Training Centres and Special Care Units. There was a big increase in the number of children inspected and treated. It is planned to extend dental inspections to play groups in future years.

A survey conducted during the year in Hammersmith has shown that at the age of 4 years 57% of children have some decay, but only 19% have received any dental treatment. These figures are roughly in line with the National Statistics and show the enormous amount of untreated dental decay that exists in the pre-school population.

MATERNITY AND CHILD HEALTH DENTAL STATISTICS

<u>Inspections</u>	<u>Children aged 0 - 4 years</u>			<u>Expectant and Nursing Mothers</u>		
	1970	1969	1968	1970	1969	1968
1st Inspections	914	150	159	27	55	45
No. requiring treatment	344	104	119	21	51	40
<u>Visits</u>						
1st Visit	179	106	152	21	58	49
Subsequent Visits	345	223	196	40	72	68
Total Visits	524	329	348	61	130	117
<u>Treatment</u>						
Fillings	489	285	252	46	68	108
Teeth filled	449	247	214	40	62	78
Extractions	38	12	18	2	38	7
Patients X-rayed	1	-	1	3	2	3
Prophylaxis	98	21	23	13	20	26
Teeth otherwise conserved	36	27	115	-	-	-
Courses of treatment completed	137	48	73	13	32	27
	1970	1969	1968			
No. of sessions for M.C.W.	108.9	82.7	63.2			

Domiciliary Midwifery (National Health Service Act, 1946, Section 23; & Health Services and Public Health Act, 1968, Section 10)

In the exercise of their duty under Section 10(1) of the Health Services and Public Health Act, 1968, Local Authorities must ensure that Midwives are enabled to render all services reasonably necessary for the proper care of the women upon whom they attend.

Subsection (2) confers on a Local Authority a power to provide or make arrangements for the provision of Midwives for attendance on women elsewhere than in their own homes, or in hospitals vested in the Minister.

The provision of radio-telephone communication for the six Domiciliary Midwives employed by the Council has proved to be of great benefit in emergencies, especially in areas where telephones are subject to vandalism; and has greatly improved flexibility in the deployment of staff.

The number of cases delivered in hospitals, but discharged and attended by Domiciliary Midwives before the 10th day, was 364.

Twenty-three General-Practitioner-Obstetricians have the assistance of Domiciliary Midwives at Ante-Natal Clinics held at their Surgeries. This has ensured continuity of patient care, especially for those patients booked for planned early discharge; and those whose confinements are to be conducted by Domiciliary Midwives and General Practitioners in General Practitioner Units in Maternity Hospitals.

General Practitioner beds are available at St. Mary Abbot's Hospital.

and at Queen Charlotte's Hospital. One hundred and nineteen patients were delivered in these units during 1970 by General-Practitioner-Obstetricians and Domiciliary Midwives, who also provided ante-natal and post-natal care. Arrangements were finalised for patients to be delivered in Hammersmith Hospital under the care of their General-Practitioner-Obstetricians and Domiciliary Midwives, with the first patient being delivered in December 1970, under this scheme.

Midwifery Training

Co-operation with Queen Charlotte's Hospital in providing training for Pupil Midwives has continued despite the difficulty arising from the decrease in domiciliary confinements. Sixteen students have received training during the year as part of the course, involving a single period of integrated training.

The Non-Medical Supervisor of Midwives gives regular instruction to staff of the London Ambulance Service on emergency midwifery procedures, and serves on the local Maternity Liaison Committees.

Health Visiting (National Health Service Act, 1946, Section 24; & Health Services and Public Health Act, 1968, Section II, Subsection 1)

Section II of the Health Services and Public Health Act, 1968, extends the powers of the Local Health Authority to provide Health Visitors and Nurses in a similar way to the provision of Section 10(2) for the Midwifery Service.

As with Section 10(2) the aim is to promote the more effective deployment of staff and to facilitate co-operation between general practice and Local Health Authority services. It enables Local Health Authorities to make provision for the visiting by Health Visitors of persons elsewhere than in their own homes, and for the attendance of Nurses on persons who require nursing elsewhere than in their own homes.

The National Health Service Act, 1946, (Section 24), made strong recommendations for a closer relationship between General Practitioners and services provided by the Local Authority. Further, in relation to health visiting, the Act stated, "It shall be the duty of every local authority to make provision in their area for the visiting of persons in their homes by visitors, to be called 'Health Visitors', for the purpose of giving advice as to the care of young children, persons suffering from illness, and expectant or nursing mothers, and as to the measures necessary to prevent the spread of infection". Thus the Health Visitor was given a position in the front line of preventive medicine.

It seems logical that the Health Visitor and General Practitioner, in their common aim for the promotion of community health, should become a team so that they might practice their skills in the most efficient way.

In the early 1950's experiments in "Liaison Schemes" between Health Visitors and General Practitioners were started.

Within the limits of staff availability, any approach made by General Practitioners in the Borough for the attachment of Health Visitors has been met. The formal arrangements by which Local Authority Health Visitors collaborate with Family Doctors are achieved by two methods:-

- (1) Attachment schemes are those in which a Health Visitor is

responsible for providing Local Health Authority services to all patients on the list of specified Family Doctors.

(2) Liaison Schemes where the Health Visitor is responsible for a geographical district and, at the same time, there is a formal arrangement for a regular contact between the Health Visitor and specified General Practitioners.

If the patients referred by General Practitioners are not within her district she refers them to the appropriate Health Visitor covering the area in which the family lives. Due to the extent of the area covered by some practices, patients may be residing in other Boroughs.

Within these schemes there are at present nine Health Visitors allocated to 28 Family Doctors. The improved communication between Family Doctors and Local Health Authority staff has provided the family with a team for the promotion of health.

Co-operation between Health Visitors and Hospitals

In addition to the Local Authority Health Visitor attached to the Paediatric Department at the new Charing Cross Fulham Hospital, a further link between hospital and community has been established by the part-time attachment of a Health Visitor to the Radiotherapy Department. The scheme was initiated by Dr. Norman Howard, Consultant Radiotherapist, at the new Charing Cross Fulham Hospital, who felt that a link between home and hospital would be of benefit to many patients. It was thought that this role would best be filled by a Health Visitor whose nursing background would be useful in the assessment of the patient's general health, the recognition of side effects of radiotherapy, and to advise the patient on his diet and medicines, and help in the period of adjustment after treatment.

This is the first scheme to link home and hospital for patients having radiotherapy and is proving successful in providing closer liaison between hospital and the community.

The Health Visiting and Nursing Sections have provided training experience for 687 student nurses, and have continued to act as lecturers in the Schools of Nursing.

The Health Visitor continues to act as "A common point of reference and source of standard information, a common adviser in health teaching, and a "common factor" in family welfare". The total number of visits paid during the year by Health Visitors was 65,311.

Home Nursing Service (National Health Service Act, 1946, Section 25; & Health Service & Public Health Act 1968, Section 11, Subsection 2)

Section 11 of the Health Services and Public Health Act, 1968, extends the powers of Local Health Authorities to make provision in their areas for securing the attendance of nurses on persons who require nursing elsewhere than in their own homes.

The work of the District Nursing Sister is well known to most Family Doctors, but attachment and liaison schemes have provided the means whereby both benefit from regular consultation concerning the patient's progress. Ten Family Doctors have District Nursing Sisters in full attachment.

Regular attendances are made by the Senior District Nurses at the weekly conferences held at the Geriatric Department at the new

Charing Cross Fulham Hospital; and arrangements were made for the Sisters of the Geriatric Department to visit with the District Nursing Sisters.

Three Student Nurses from Hammersmith Hospital work with the District Nursing Sisters for three days in each week. Six medical students attend for visits of observation from the Middlesex Hospital.

Arrangements have been made for State-Enrolled Nurses to receive post-basic training in district nursing and they, together with the Home Bathers now redesignated "Nursing Aides," have greatly assisted in meeting the needs of the elderly and infirm patients.

It is proposed to extend the existing "Home Nursing Service" by the introduction of a late night and early morning service for those patients requiring additional care.

A total of 3,600 patients were visited at home during the year, of whom 2,457 were aged 65 or over.

Home Help Service (National Health Service Act 1946, Section 29, as amended by the Health Services and Public Health Act 1968)

Section 13 of the 1968 Act imposes on Local Health Authorities a duty to provide, or arrange to provide, a Home Help Service adequate for the needs of their area. It replaces the existing permissive power to provide this service in Section 29 of the National Health Service Act 1946. The Section specifically includes persons handicapped by past injury or congenital deformity amongst those who may qualify for assistance from the Home Help Service. In addition, the Section confers on Local Health Authorities a new general power to provide, or arrange for the provision of, laundry facilities for households where home help is being, or may be provided. In the light of the previous economic situation it was decided to defer the bringing of this Section into force; during the period of deferment Section 29 of the 1946 Act remains in force. Authorities will be notified of the date of implementation of this Section in due course.

The demands upon this Service, without which many of the other Nursing and Welfare Services would be unable to provide a supportive service, continue to increase. There is still difficulty in recruiting applicants whose home commitments make it possible for their services to be available in the early morning and evening. The difficult circumstances in which some of the Home Helps have to work make recruitment problematical specially in an area where more congenial employment is freely available.

During the year, 2,717 (2,761) persons were provided with domestic help.

Vaccination and Immunisation (National Health Service Act 1946, Section 26)

The following tables show details of the numbers of persons protected against Diphtheria, Tetanus, Whooping Cough, Smallpox, Poliomyelitis and Measles during 1970.

TABLE 1

Completed Primary Courses - Number of Persons under age 16

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963-1966		
1. Quadruple DTPP	-	-	-	-	-	-	-
2. Triple DTP	753	1172	77	23	11	6	2042
3. Diphtheria/Pertussis	-	4	2	-	5	2	13
4. Diphtheria/Tetanus	66	100	16	16	185	78	461
5. Diphtheria	-	35	2	-	1	-	38
6. Pertussis	-	9	1	-	1	-	11
7. Tetanus	-	-	1	-	4	10	15
8. Salk	-	-	-	-	-	-	-
9. Sabin	774	1260	114	37	216	145	2546
10. Measles	15	719	485	163	216	27	1625
11. Rubella	-	-	-	-	-	417	417
12. Lines 1+2+3+4+5(Diphtheria)	819	1311	97	39	202	86	2554
13. Lines 1+2+3+6(Whooping cough)	753	1185	80	23	17	8	2066
14. Lines 1+2+4+7 (Tetanus)	819	1272	94	39	200	94	2518
15. Lines 1+8+9 (Polio)	774	1260	114	37	216	145	2546

Given by Borough Medical Officers: 5,124

General Practitioners: 2,044

TABLE 2 - REINFORCING DOSES - NUMBER OF PERSONS UNDER AGE 16

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963-1966		
1. Quadruple DTPP	-	-	-	-	-	-	-
2. Triple DTP	1	539	760	57	132	8	1497
3. Diphtheria/Pertussis	-	7	3	-	21	-	31
4. Diphtheria/Tetanus	-	94	80	33	1469	315	1991
5. Diphtheria	-	-	-	1	10	4	15
6. Pertussis	-	-	-	-	-	-	-
7. Tetanus	-	1	-	1	16	27	45
8. Salk	-	-	-	-	-	-	-
9. Sabin	2	562	541	64	1473	535	3177
10. Lines 1+2+3+4+5 (Diphtheria)	1	640	843	91	1632	327	3534
11. Lines 1+2+3+6 (Whooping cough)	1	546	763	57	153	8	1528
12. Lines 1+2+4+7 (Tetanus)	1	634	840	91	1617	350	3533
13. Lines 1+8+9 (Polio)	2	562	541	64	1473	535	3177

Given by Borough Medical Officers: 5,340

General Practitioners: 1,416

C.12

TABLE 3

Smallpox

Age at date of vaccination	Number of persons vaccinated (or revaccinated during period)	
	Number vaccinated	Number revaccinated
0 - 3 months	18	-
3 - 6 months	20	-
6 - 9 months	12	-
9 - 12 months	14	-
1 year	867	1
Total under 2 years	931	1
2 - 4 years	470	27
5 - 15 years	70	181
Total (persons)	1471	209

Given by Borough Medical Officers: 962

General Practitioners: 718

Screening for Cervical Cytology

During 1970 111(82) sessions were held at which 962 (560) attendances were made. Facilities were offered to all women regardless of their age group to take advantage of this test. Doctors who referred patients receive reports on the finding of the hospital pathologist.

Examination of Blind and Partially-Sighted Persons

Arrangements were made for the domiciliary examination and re-examination of persons with a view to their inclusion on the Register of Blind and Partially Sighted kept by the Borough's Welfare Services. Inclusion on the Register entitles a person to extra benefits from the Department of Health and Social Security, and to the full range of services provided by the Welfare Services. During 1970 the examinations continued to be carried out by the Consultant Ophthalmologist, Miss J.M.Dollar, F.R.C.S.

In addition, certificates are accepted from other Local Authorities, Hospitals, and private ophthalmologists, and fees paid where appropriate.

The following are details of work carried out during the year:

Number of domiciliary examinations during the year	36 (60)
Number of domiciliary re-examinations during the year	49 (80)
Number of certificates accepted from other local authorities, hospitals, and private ophthalmologists	64 (72)

Medical Arrangements for Long-Term Stay Immigrants

Advice of arrival of long-stay immigrants is received from ports and airports. Health Visitors then get in touch with them, give them information about the Health Services, persuade them to register themselves and their dependents with general medical practitioners, and have chest X-rays where these are appropriate.

The following figures relate to the year 1970

Country where Passport issued	Immigrants Notified	Visits		Total
		Successful	Unsuccessful	
Commonwealth Countries	541 (549)	266(333)	395(309)	661(642)
Non-Commonwealth	44 (54)	25(35)	30(30)	55(65)
TOTALS	585 (603)	291(368)	425(339)	716(707)

Tuberculosis

Hammersmith Chest Clinic 1970.

Patient attendances remained similar to those of recent years: total 23,236, new patients 843.

There has been a marked fall in the tuberculosis notifications (see graph), largely accounted for by the lower incidence of disease in the immigrant population during the year. Whilst extremely encouraging, great caution should be exercised in the interpretation of these figures: with such small numbers involved, a continued trend cannot be assumed. The origins of the patients involved were as follows:-

Great Britain	21
Asia	7
West Indies	7
Ireland	4
Europe	4
China	2
South Africa	1
	<hr/>
	46
	<hr/>

Thus immigrants still provide 54% of the notifications in the Borough. Happily the results of carefully supervised outpatient treatment are excellent, in spite of the disease often being more florid and extensive in such patients.

The diseases due to cigarette smoking have, naturally, not shown the same gratifying fall: new lung cancer diagnoses remained similar at 67 and the bronchitis figure rose from 159 in 1969 to 175 this year. The great tragedy of the lung cancer patients is not only that the diagnosis usually means death within two years, but that the disease is largely avoidable.

Sincere thanks are due to the Clinic staff for their continued loyal and cheerful work during the year.

T.B. Register (31.12.70)

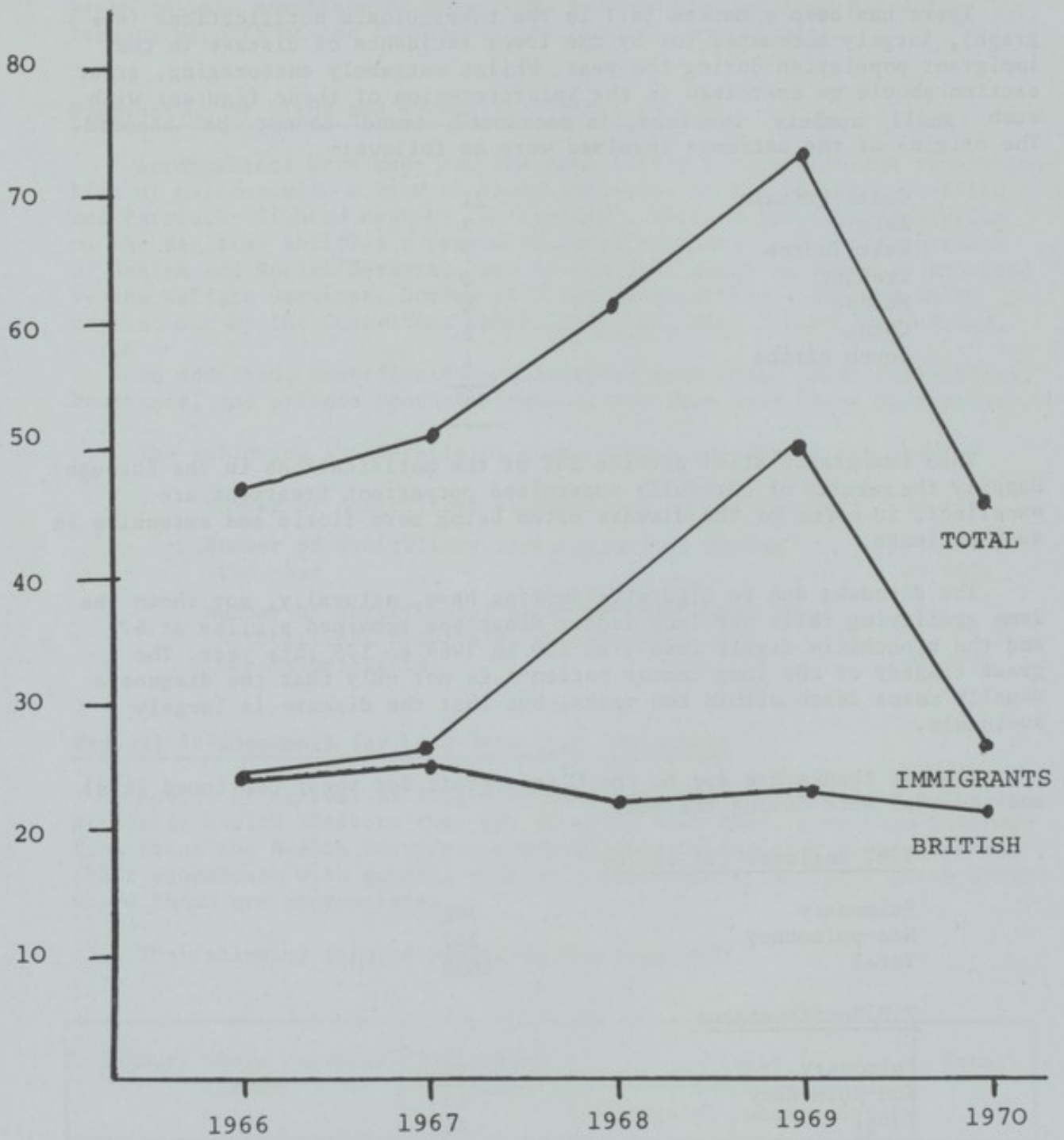
Pulmonary	792
Non-pulmonary	247
Total	1039

T.B. Notifications

Pulmonary	33
Non-pulmonary	13
Total	46
T.B. Deaths	1

NOTIFICATIONS OF TUBERCULOSIS

Hammersmith: 1966 - 1970.



REPORT OF FULHAM CHEST CLINIC FOR THE YEAR
ENDING DECEMBER 31st 1970

The pattern of tuberculous disease in Fulham has not altered overall during the year under review with 30(29) new male notifications and 21(15) female. (Figures for 1969 in brackets). The slight rise in the total notifications 51(44) was occasioned by a slight increase in the number of females notified 21(15).

There has been no change in the notifications by age groups in the female, whereas there has been some change in pattern with the male notifications being spread over all age groups with a marginal increase in the 26-35 age group 7(4), and a fall in the 56-65 age group 2(9); the overall total for males is unchanged at 30(29).

There is no significant change in the pattern of death by age; male deaths have fallen 11(16) and female remained unchanged 6(5), but the figures are from too small a sample to be significant.

The routine work of the Chest Unit has continued and plans are afoot to amalgamate the outpatients with the South West London Mass X-Ray Unit.

SUMMARY OF STATISTICS

No. of New Patients Attending

Non-tuberculous chest cases	...	...	...	62	(78)
New contacts of notified cases	...	...	...	61	(66)
New notifications transferred in	...	...	...	21	(48)

No. of Clinic Attendances

Notified cases of tuberculosis	...	...	...	573	(557)
Contacts of " " "	...	...	...	152	(164)
Other Chest Diseases	...	...	...	1110	(1085)

No. of New Notifications of Tuberculosis in Fulham Chest Clinic Area, excluding those transferred in

Pulmonary Tuberculosis	...	...	...	44	(32)
Non-pulmonary Tuberculosis	...	...	...	7	(12)

No. of Patients Removed from T.B. Register as DECEASED

Pulmonary Tuberculosis	...	...	...	16	(21)
Non-pulmonary	...	...	...	1	(Nil)

No. of Visits by Health Visitor 803 (673)

No. of Patients X-rayed... .. 1179 (1270)

No. of B.C.G. Vaccinations 111 (119)

No. of Notified Cases of Tuberculosis on the Register at 31st December 1970 534 (542)

No. of Clinic Sessions - 123

TABLE 2

NEW NOTIFICATIONS IN AGE GROUPS

<u>AGE</u>	<u>MALES</u>	<u>FEMALES</u>
Up to 5 years	1 (Nil)	1 (Nil)
6 - 15	1 (2)	1 (Nil)
16-25	5 (2)	6 (3)
26-35	7 (4)	1 (4)
36-45	1 (2)	1 (1)
46-55	6 (4)	2 (2)
56-65	2 (9)	3 (3)
Over 65	7 (6)	6 (2)
	<hr/>	<hr/>
	30 (29)	21 (15)
	<hr/>	<hr/>

TABLE 3

DEATHS IN AGE GROUPS

	<u>MALES</u>	<u>FEMALES</u>
36-45 years	Nil (1)	Nil (Nil)
46-55	1 (1)	2 (Nil)
56-65	3 (7)	Nil (Nil)
Over 65	7 (7)	4 (5)
	<hr/>	<hr/>
	11 (16)	6 (5)
	<hr/>	<hr/>

SUMMARY OF TUBERCULOSIS NOTIFICATIONS FOR 1970

NUMBER OF PRIMARY NOTIFICATIONS OF NEW CASES OF TUBERCULOSIS

<u>Age</u>	0	1	2-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65-74	75+
Respiratory													
Males:	1	1	-	1	1	-	7	10	9	8	8	4	5
Females:	-	-	-	-	3	-	4	4	4	1	1	1	3
Non-respiratory													
Males:	-	-	-	-	1	-	-	5	1	1	2	1	1
Females:	-	-	-	-	-	-	2	1	1	-	1	-	-

CASES OF TUBERCULOSIS NOTIFIED AND DEATHS - PAST TEN YEARS

<u>Year</u>	<u>Number of cases notified</u>			<u>Number of deaths</u>	<u>Number of cases on Register of Notifications</u>
	<u>Pulmonary</u>	<u>Non-pulmonary</u>	<u>Total</u>		
1961	149	21	170	9	2,662
1962	142	19	161	15	2,664
1963	117	27	144	22	2,584
1964	121	14	135	11	2,570
1965	116	33	149	3	2,282
1966	89	19	108	15	2,007
1967	91	12	103	15	1,833
1968	90	16	106	56	1,810
1969	92	29	121	10	1,623
1970	76	17	93	8	1,574

Average number of cases notified for the 10 years 1961/70 (Inclusive) - 129.3
 Average number of deaths for the 10 years 1961/70 (Inclusive) - 16.4

Hurlingham Lodge Hostel

Hurlingham Lodge is a hostel for ambulant, infective, tuberculous men, one of three similar establishments in the former County of London; the others being in the London Boroughs of Islington and Lambeth.

In common with the other two hostels, Hurlingham Lodge provides accommodation for those who do not require nursing. The intention is to give the residents a sense of security in having a home with regular good meals, laundry, and sympathetic companionship. The community derives advantages from segregating, as far as practicable, these infective tuberculous persons from the dangers of close and frequent contact with susceptible individuals.

Residents who are fit to work are encouraged to find employment through the Disablement Resettlement Officer of the local office of the Department of Employment. Residents are also encouraged to be on the list of a local general practitioner, who visits the hostel regularly and, in addition, maintains health surveillance of the staff. A Senior Medical Officer from the Director of Health Services' staff also visits the hostel regularly.

Recommendations for admission are received from Chest Physicians at chest clinics in the London Boroughs and from hospitals in and outside London. The Medical Officer of Health of the Borough in which the patient was formerly resident is asked to accept financial responsibility, and residents are asked to contribute towards their maintenance, according to their means. Admissions are arranged as and when vacancies occur.

The condition of residents is reviewed periodically to establish the need for continued residence.

There is accommodation for 28 residents at the Hostel. At the end of 1970 there was no-one on the waiting list for admission.

Health Education Service

Our Borough Health Education Service has established an international reputation for its many pioneering health projects and campaigns, as well as for the success of the permanent "Design for Living" Health Education Exhibition at 2-6 Fulham Broadway, S.W.6. Extensive study visits are made by holders of World Health Organisation Fellowships, and the Service now maintains liaison with medical and community services in over 30 countries.

The Borough was honoured by an official delegation from the Board of Health in Malmo, Sweden, to study audio-visual aid techniques and programmed learning at the Exhibition. As a sequel Sweden's first permanent Health Education Centre is being established, with Hammersmith's "Design for Living" as the model.

Following research into young people's attitudes to alcoholism, the Health Education Officer's publication "Social Drinking and You" received favourable Television, Radio and Press recognition. Likewise, a booklet "Community Services for the Incontinent Adult" developed from a Conference addressed by the Director of Health Services. Wide publicity has resulted from the fact that the booklet includes diagrams of practical aids for sufferers.

Another major development has been the introduction of the Health Education Newsletter, published four times a year and supplied free to teachers, health educators in general, and to interested local organisations. The Newsletter gives information on Borough Campaigns, and lists available

audio-visual aids for display and project work. Circulation trebled immediately following Issue No.1, in October, 1970.

Research is an important and essential aspect of Health Education. In this, the Borough Service has contributed to testing of the latest plastic medicine and pill containers as well as comparing these with tests on medicine bottles. The aim has been to help production of containers that are "Safe" and cannot be easily opened by children, yet are also practical for elderly people with arthritic hands or other handicaps.

Another interesting feature has been research into the effects of sound and light presentations, now popular in discobars and discotheques. Studies are continuing into the mental and physical aspects of kinetic experiences.

Major campaigns have required the production of mobile teaching units which are made available on loan to educational establishments, or professional organisations. The feature on "Epilepsy", which also highlights the work of the British Epilepsy Association, has been "On tour" - from Garnett Teacher Training College, Wandsworth, to Plymouth's Mayflower Celebrations! In co-operation with the Borough Dietician, the "Food for Thought" campaign has included comprehensive information on nutrition, dietetics, safe slimming, and home economics; plus a range of helpful advice for loan "Bed-Sit" students, young mothers, and elderly persons living alone often with physical handicaps. A "Home Safety Campaign" combined the display of a specially-designed bathroom unit with details of the Borough's Home Modernisation Schemes for which a variety of grants are now available. Full support has been given to the RoSPA Home Safety Year.

Increased attendances have been noted at the "Design for Living" Exhibition, especially in the 14+ group; with special assistance provided for individual and group project work.

The Exhibition has extended its Programmed Learning facilities which now include the Classmaster, Synchrofax, Stillitron, Bingley Tutor, and Bell and Howell (Language Master) Systems. What is unique is that the Service offers Borough-produced programmes on a wide range of Health Education themes, and most are the first of their type in Britain.

Renal Dialysis (Artificial Kidney Machines)

Patients with diseased or non-functioning kidneys can now be kept alive by a process of renal dialysis, using a kidney machine. These patients have to attend hospital two or three times a week and stay overnight while the dialysis process is being carried out. Apart from the inconvenience and disruption of their normal life, these patients also occupy a valuable hospital bed during the process of treatment.

Local authorities can carry out adaptations to premises to enable such patients to dialyse themselves at home.

During the year, a young woman who had been under treatment in hospital with a kidney machine was thought to be fit for home dialysis. She was rehoused in a flat, specially adapted for renal dialysis so that she could carry out this procedure herself at home.

Another patient was referred for home dialysis. Arrangements for adaptation of his house were commenced but had to be stopped when his hospital reported that medical complications had rendered him an unsuitable subject for home dialysis.

It would be surprising if this Clinic failed to report a large increase in the number of patients attending from year to year, and this was so in 1970. The total number of cases rose from 11,583 to 14,947.

The number of males rose from 7,645 to 9,635. Females rose from 3,938 to 5,312.

As can be imagined, this threw a very considerable strain upon both the staff as well as the premises of the department which was originally designed to deal with a total of 6,000 new cases per annum. During the year a small extension was authorised to the premises in the front of the department and a somewhat larger one at the back to come into operation in about July 1971.

The incidence of early syphilis remained low during the year, rising from 108 to 134 cases. There were 117 males and 17 females. Of the males 95 had acquired infection homosexually, a total of 81.2%. This is the only satisfactory epidemiological feature. In this country early syphilis has been kept to a remarkably low level compared to the epidemic proportions in the U.S.A. and this is probably due largely to the great attention paid to every known case that occurs in this country.

Gonorrhoea rose from 2,998 cases in 1969 to 3,432 in 1970. In the latter year the respective totals were 2,309 males and 1,123 females. Of the male cases 722 (31.3%) were homosexually acquired. If this is subtracted from the male total the resulting ratio of male and female infection becomes 1.4 to 1, which is a relatively satisfactory ratio, and over the past 10 years constitutes a revolution.

Other conditions showed a sharp rise. The number of cases of non-gonococcal urethritis in males was 2,833 which considerably exceeds the number of cases of gonorrhoea. There were 1,300 cases of trichomonas dealt with.

Every other category and condition seen rose comparatively during the course of the year. All male cases attending during the year symptomless as reported in 1969, continued throughout 1970, and a further remarkably large increase may well occur in 1971. On the other hand, the growing readiness of patients to come up with all kinds of problems, is no doubt due to the long term low keyed propaganda that has gone on both from the clinic and the Borough of Hammersmith and apart from over-straining our valuable resources is much to be welcomed from the public health point of view.

Finally, the number of cases coming from Hammersmith were 5,759. There were 32 cases of early syphilis; 23 late and latent syphilis, making a total of 55. There were 1,345 cases of gonorrhoea and 4,359 other conditions.

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER,
INNER LONDON EDUCATION AUTHORITY (HAMMERSMITH), ON THE
SCHOOL HEALTH SERVICES FOR THE YEAR 1970

The School Health Service in the London Borough of Hammersmith is conducted in accordance with the scheme for the joint use of staff provided for under Section 32 of the London Government Act, 1963; and the smooth running of the Service has continued during the year.

Pupils on Day School Rolls

In December, 1970, there was a total of 26,749 on the day school roll attending 46 primary schools (including full and part-time nursery classes), 15 secondary schools; 3 nursery schools and 8 special schools. There were also 2 units for partially-hearing children, one in a primary and one in a secondary school.

Medical Inspections

Details of medical inspections during 1970 are summarised, and throughout the report the figures in brackets show the work carried out during 1969.

The table below is an analysis of routine and non-routine medical inspections, (excluding Dental and Health Surveys):-

<u>School Roll</u>	May, 1970	26,641	(26,829)
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<u>Routine Inspections</u>		9,935	(10,334)
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Percentage of Numbers inspected where

Parent present	59.9	(59.6)
Care Committee present	64.8	(71.3)
Physical condition unsatisfactory	0.7	(0.8)
Referred for treatment of defects	21.2	(17.2)
Referred for treatment of defects other than vision.	12.3	(11.7)

Non-Routine Inspections

(1) Specials	4,094	(3,955)
(2) Re-Inspections	8,292	(7,528)
	<u>TOTAL -(1) & (2)</u>	<u>(11,483)</u>
	12,386	(11,483)

Analysis of Non-Routine Medical Inspections

Re-Inspections	8,292	(7,528)
Bathing Centre inspections - scabies	2	(3)
" " " - other	10	(6)
Employment certificates	313	(264)
Theatre children	105	(14)
School journeys	1,722	(1,271)
Recuperative holidays - pre-departure	159	(155)

Analysis of Non-Routine Medical Inspections (Cont'd)

Secondary School Annual Surveys	28	(-)
Candidates for higher awards	23	(24)
Boarding Schools for the delicate - pre-departure	17	(10)
Boarding Schools for the delicate - on return	-	(6)
Outward-Bound courses	33	(17)
Handicapped pupils - statutory examination	123	(176)
Handicapped pupils - periodic special defect examination	178	(486)
Research investigations and enquiries	26	(-)
	Sub-Total <u>2,739</u>	<u>(2,432)</u>

Special Inspections made at request of -

Head teacher - child's name entered in special book	103	(128)
Head teacher - others	436	(443)
School nurse - following health survey	43	(74)
School nurse - others	98	(227)
Divisional (Education) Officer	74	(97)
District Care Organiser or Care Committee	42	(67)
Parent	183	(193)
School Medical Officer	365	(279)
	Sub-Total <u>1,344</u>	<u>(1,508)</u>

Others -

Accident on school premises	2	(3)
Miscellaneous	9	(12)
	<u>11</u>	<u>(15)</u>

TOTAL of all Non-Routine Medical
Inspections

12,386 (11,483)

Analysis of defects found at Routine
Medical Inspections

(Number of children noted for treatment or observation expressed as a rate per 1,000 inspected).

Number inspected		9,935	(10,334)
Defects - Skin	T	14.70	(19.74)
	O	17.11	(20.42)
Eyes (a) Vision	T	101.86	(65.61)
	O	67.44	(79.35)
(b) Squint	T	13.99	(11.81)
	O	7.25	(6.87)
(c) Other	T	1.51	(2.32)
	O	2.01	(2.23)

Ears (a) Hearing	T	7.05	(6.68)
	O	7.45	(8.71)
(b) Otitis Media	T	3.82	(1.74)
	O	5.64	(7.25)
(c) Other	T	1.41	(0.87)
	O	1.51	(1.65)
Nose and Throat	T	12.88	(14.90)
	O	54.76	(57.09)
Speech	T	7.15	(5.32)
	O	11.68	(11.23)
Lymphatic Glands	T	1.01	(0.97)
	O	24.76	(21.68)
Heart	T	3.62	(1.84)
	O	12.08	(18.10)
Lungs	T	7.24	(7.26)
	O	14.70	(21.39)
Developmental (a) Hernia	T	2.11	(0.39)
	O	4.13	(4.84)
(b) Other	T	1.91	(0.77)
	O	7.55	(10.16)
Orthopaedic (a) Posture	T	1.61	(0.58)
	O	8.86	(8.61)
(b) Feet	T	5.23	(5.32)
	O	23.05	(18.29)
(c) Other	T	3.62	(3.39)
	O	6.74	(11.03)
Nervous System (a) Epilepsy	T	2.82	(2.32)
	O	2.01	(2.61)
(b) Other	T	2.11	(0.68)
	O	1.41	(1.65)
Psychological (a) Development	T	3.02	(2.03)
	O	8.05	(6.39)
(b) Stability	T	7.95	(3.00)
	O	23.75	(21.39)
Obesity	T	9.26	(10.16)
	O	21.34	(15.77)
Abdomen	T	1.31	(1.16)
	O	1.91	(2.32)
Other Debility	T	2.01	(2.32)
	O	4.83	(5.32)

Enuresis	T	15.40	(13.16)
	O	37.34	(37.16)
Other	T	7.95	(35.22)
	O	6.14	(73.93)

T = Treatment O = Observation

(N.B. A child can be noted for more than one defect).

Vision.

The following table is a statement of the visual acuity of pupils whose vision was tested at routine medical inspections divided into those not wearing and wearing glasses, together with the proportion noted for treatment or observation.

	<u>6/6</u>		<u>6/9</u>		<u>6/12</u> <u>or worse</u>		<u>Noted</u> <u>for Treatment</u>	
<u>A. Not</u> <u>Wearing</u> <u>Glasses</u>	<u>Boys</u>	<u>Girls</u>	<u>Boys</u>	<u>Girls</u>	<u>Boys</u>	<u>Girls</u>	<u>Boys</u>	<u>Girls</u>
	79.8(81.1)	76.4(76.5)	7.8(8.1)	8.2(8.8)	5.5(5.2)	6.6(6.0)	5.7(4.5)	7.2(5.6)
<u>B. Wearing</u> <u>Glasses</u>	3.3(1.8)	3.2(3.5)	1.6(2.0)	2.8(2.9)	2.0(1.8)	2.8(2.3)	4.8(1.2)	6.0(4.5)
	<u>Number Tested</u>		Boys	3,976	(3,860)			
	<u>Wearing Spectacles</u>		Girls	4,436	(4,538)			

Personal Hygiene

An annual comprehensive survey of each pupil is carried out together with such additional health surveys as are thought necessary or desirable at selected individual schools or departments. Details of the work done under the cleansing scheme are shown below. The emphasis of the cleansing scheme is on the children being cleansed by the parent at home where other verminous members of the family may, in the privacy that the home affords, also use the Lorexane No. 3 shampoo distributed by the school nursing department. This may eradicate a possible source of recurring infestation to the child.

It is the practice for the school nurse, prior to the beginning of school term, to visit families with a record of infestation to ensure that the children are clean and fit to return to school. This practice has continued to be of considerable value.

Findings at Health Survey

<u>School Roll</u> - May 1970	26,641	(26,829)
<u>1. Comprehensive Surveys</u>		
(a) Number examined	23,250	(24,474)
(b) Number (occasions) found verminous	205	(181)
(c) Percentage found verminous	0.88	(0.74)
<u>2. Selective Surveys</u>		
(a) Number examined	11,543	(13,211)
(b) Number (occasions) found verminous	365	(364)
(c) Percentage found verminous	3.16	(2.75)

3. (a) Total times vermin found (1(b) + 2(b))	570	(545)
(b) Total % found verminous (3(a) as % of 1(a) + 2(a))	1.64	(1.49)
(c) Number of individual pupils found verminous	328	(314)
(d) % of individual pupils found verminous (of school roll)	1.23	(1.13)
4. <u>Action taken with verminous cases-</u>		
(a) Advice and/or Lorexane	501	(465)
(b) Further action	69	(80)
(c) 4(b) expressed as a % of 4(a)	13.77	(17.20)

Analysis of 4(b) cases - referrals of
hardcore cases to bathing centres.

Voluntary attendance at bathing centres-

Number of pupils	69	(80)
Number of statutory notices issued.	-	(-)

5. Communicable Disease Surveys

Number examined for - Athlete's Foot	-	(218)
Plantar Warts	-	(393)
Dysentery	101	(7)
Other communicable diseases	2,258	(2,136)
Total of 5	<u>2,359</u>	<u>(2,754)</u>

Infectious Diseases in Schools

When a pupil is absent from school and the cause is either known or suspected to be due to infectious disease, the Head of the School notifies the Principal School Medical Officer. These notifications are uncorrected for diagnosis, but form the best available index of the trends of the infectious disease in the school community; they are the only figures available for diseases which are not statutorily notifiable. The following is a table of the infectious diseases notified by Heads of schools in 1970:

<u>Disease</u>		<u>Disease</u>	
Cerebro-Spinal Meningitis	2 (-)	Pulmonary Tuberculosis (Primary)	- (2)
Chicken Pox	246 (331)	Ringworm (Scalp)	15 (13)
Dysentery, Diarrhoea or Enteritis	128 (173)	Ringworm (Body)	6 (16)
German Measles	114 (68)	Scabies	49 (41)
Influenza	12 (46)	Scarlet Fever	34 (32)
Impetigo	23 (18)	Sore Throat	1 (5)
Jaundice	19 (19)	Tonsilitis	16 (49)

	<u>Disease</u>		<u>Disease</u>	
Measles	217	(191)	Typhoid Fever and Paratyphoid Fever	4 (1)
Mumps	274	(473)	Whooping Cough	27 (11)
Ophthalmia & Conjunctivitis	10	(6)	Other Sickness	63 (2)

Prophylaxis

The following table shows the percentage of school children of all ages inspected who were reported to have been immunised against :

(a) Smallpox	68.5	(70.4)
(b) Diphtheria	89.7	(87.9)
(c) Whooping Cough	76.4	(76.9)
(d) Poliomyelitis	90.5	(88.4)

Vaccination against Rubella

In accordance with Circular 11/70 from the Department of Health and Social Security, arrangements were made for vaccination of girls attending Hammersmith schools who were in their fourteenth year of life. The object was to ensure that as many girls as possible were offered protection against rubella by vaccination before reaching child-bearing age, because of the known association of certain foetal abnormalities with rubella infection in pregnancy.

The scheme began during the Autumn term and, despite difficulties due to delay in the supply of vaccine, 417 girls were vaccinated by the end of the year out of an estimated potential total of 1,000.

The exercise continued immediately on resumption of school in the Spring term of 1971. Ultimately vaccination will be offered to all girls between their 11th and 14th birthdays.

The B.C.G. Scheme

Vaccination was offered to school-children in the 13 years + age group, as a protection against tuberculosis. The following table is an analysis of the year's work in this connection:

1. No. of children tuberculin-tested	*824	(1,192)
2. No. of children found positive to test	170	(72)
3. No. of children positive to test who were X-rayed	76	(37)
4. No. of children found negative to test	649	(1,151)
5. No. of children vaccinated	649	(1,081)

* The programme for vaccinating girls was delayed through the inception of the Rubella scheme during the Autumn term. The B.C.G. scheme was completed early in 1971.

Handicapped Pupils

At the end of 1970 special educational treatment was being provided for 1,036 children. The following table shows the categories of handicaps and number

of pupils receiving special education in day schools in the London Borough of Hammersmith. These schools serve much of the West of London and accordingly many of the pupils are not residents of Hammersmith.

<u>Type of Handicap</u>	<u>School</u>	<u>No. of Pupils</u>
Delicate	Wood Lane School	169
Partially - Sighted	John Aird School	131
Deaf	Ackmar Road School	63
Partially - Hearing	Units in - (1) Holman Hunt School	28
	(2) Hammersmith County School and Christopher Wren	4
Physically-Handicapped	Queensmill School	47
Educationally - Subnormal	Elizabeth Burgwin School	180
" "	Wedgwood School	166
" "	St. Roberts School	177
Maladjusted (including unit for 5 autistic children)	Northcroft School	71

(30 pupils are accommodated at Palingswick Hostel for diabetic children and attend day schools in the neighbourhood).

Educationally - Subnormal Children

Under Section 34 of the Education Act, 1944, it is the duty of a local education authority to discover which children over the age of two years require special educational treatment as handicapped pupils. Of the various categories of handicapped pupils, the educationally-subnormal is the largest.

165 (175) pupils were examined under this Section on account of a disability of mind or any other condition which might necessitate special educational treatment. 140 (151) children were examined for suspected disability of the mind and of these 52 were recommended as fit to continue to attend ordinary school, 78 were recommended for placement in a school for educationally-subnormal pupils and 10 were recommended for community care.

The remaining 25 (24) were examined because of their physical handicaps. 12 were recommended for boarding open-air school, 6 for day open-air school, 2 for day school for the physically-handicapped and 5 for home tuition.

Children unsuitable for Education at School

Section 57 of the Education Act, 1944 (as amended by the Mental Health Act 1959) deals with the examination and reporting to the local education authority of children considered unsuitable for education at school. 16 (24) children were examined under this Section. Of these, 7 children were recommended to attend a mental health training centre, 3 were recommended for a special care unit, and 6 were recommended for community care only.

Recuperative Holidays

Arrangements are made under the Education Act 1944, for recuperative holidays, without charge to the parents, for school children in need of rest, fresh air and good food.

The total number of children from Hammersmith schools who went on recuperative holidays during 1970 was 156, (183).

Vision Clinics

There are three vision clinics in the Borough, at Fulham Treatment Centre, Bagleys Lane, S.W.6.; at St. Dunstan's Treatment Centre, W.6.; and at Milson Road Treatment Centre, W.14. The ophthalmologists are officers of the South-West Metropolitan Regional Hospital Board and, by arrangements made through the I.L.E.A., undertake a total of 9 sessions a week. Referrals to the clinic arise mainly from school medical inspections, and an optician is in attendance to deal with prescriptions for glasses at the parent's discretion.

The following summarises the work carried out at the Clinics during the year:-

Number of sessions	348 (322)
Number of new cases	939 (1,085)
Total attendances	3,881 (3,911)
Errors of refraction and squints	2,534 (2,473)
Other eye defects	- (2)
Spectacles ordered	731 (717)

Weekly orthoptic sessions are also held at the Fulham and St. Dunstan's Treatment Centres and the following work was carried out at the Clinics during the year:-

Number of sessions	96 (89)
Number of new cases	72 (62)
Total attendances	191 (189)

Minor Ailments Centres

Minor ailments of school children are treated at five treatment centres in the Borough. The following is a statement for the year under report:-

Sessions: Medical Officer	33 (48)
Nursing Sister	1,328 (1,240)
Total attendances	22,444(23,207)
Defects treated	
Athlete's Foot	374 (612)
Verrucae	931 (1,188)
Ringworm-body	7 (3)
Impetigo	43 (40)
Other skin diseases	478 (475)
Eye diseases	163 (161)
Ear diseases	40 (62)
Miscellaneous: bruises and similar	2,428 (3,066)

Special Investigation Clinics

204 (385) new patients attended the five Special Investigation Clinics, total attendances of 1,674 (2,841) were made and 60 (86) children were discharged.

Audiology

110 (136) new cases attended the Audiology Clinic, 228 (257) total attendances were made, and 47 (50) children were discharged.

Hospital Appointments

553 (473) children were referred from school medical examinations for specialist opinion. The general practitioners were consulted on all these and, with their approval, 502 (442) were referred through the School Health Service. The general practitioners preferred to make their own arrangements for the treatment of 31 (31) children.

Health Education in Schools

At the request of head teachers, health visitors continue to provide health education in schools on the following topics:

Godolphin and Latymer School

First-Aid

Fulham County School

First-Aid, Parentcraft and Social Services

Gilliatt School

Nursery Nursing

Burlington School

Social Services

Hammersmith County School

Social Services

Hurlingham School

First-Aid, Parentcraft, Health Hygiene, "Careers Convention"

STUDENT HEALTH SERVICE

The Student Health Service began in October, 1966, for students of the West London College and was extended in 1968 to include students at the Hammersmith College for Further Education.

Dr. Margaret Capra, a full-time Medical Officer on the staff, who conducts the Service, has continued to receive great co-operation and help throughout the year from the Principals of the Colleges and their staffs.

A summary of the arrangements has been given in my previous Annual Report.

The following is a statistical summary of the work carried out during 1970; the figures in brackets relate to the work carried out in 1969:

	<u>West London College</u>		<u>Hammersmith College</u>	
Total No. of sessions:	27	(31)	19	(26)
Clerical sessions	6	(7)	3	(1)
Consultation sessions	21	(24)	16	(25)
No. of students medically examined	2	(1)	-	(2)

West London CollegeHammersmith College

No. of students advised	35	(67)	71	(79)
Referred to Chest X-ray	-	(-)	1	(1)
Referred to Hospital	1	(7)	1	(4)
Referred to General Practitioner	9	(12)	18	(18)
Referred to Dentist	-	(-)	-	(1)
Referred to Optician	-	(1)	-	(-)
Referred to Psychiatrist	1	(-)	-	(1)
Referred to Social Worker	-	(-)	1	(-)

SCHOOL DENTAL SERVICE

Annual Report of the Principal School Dental Officer, 1970

An important advance in Public Dental Health was the publication in 1970 of the results of the survey of adult dental health in England and Wales. Since the introduction of the National Health Service in 1948 considerable statistical information has become available on the amount of dental treatment given annually. In 1949 8.2 million courses of treatment were given under the General Dental Service. By 1969 this had risen to 18.6 million courses of treatment.

Until the publication of the survey of adult dental health little was known of the level of dental health of the community. In the age group 16-34 years only 45.3% of the population (excluding those with full dentures), visited their dentist regularly for examination and treatment if necessary. In the age group 16-34 years an average of 17.1 teeth per person had been affected by decay and 7.8% wore full dentures.

A recent survey of primary school children in Hammersmith has shown that at the age of 5 years 74% have had some dental decay but only 34% have received any dental treatment. At the age of 10 years 90% have had some decay but only 68% have had any dental treatment.

The primary purpose of the School Dental Service must be to educate children to accept the need for regular dental treatment and to promote their interest in maintaining a good level of dental health.

Dental Inspections

A total of 11,782 children were inspected at schools and clinics during the year and 56% were found to need dental treatment. It is regretted that only 44.4% of the school population was inspected in 1970 but it is hoped with improved staffing that it will be possible to increase considerably the number of children inspected next year. Since school dental inspections were recommenced in 1966 priority has been given to inspecting Primary School Children. One secondary school was inspected in 1970 and it is intended to inspect many more next year.

It is probable that less than half of all school children attend a dentist regularly for treatment. The aim of school dental inspections is to determine which children need dental treatment and to encourage them to attend either a General Dental Practitioner or a School Dental Clinic.

Staff

The dental staff on 31st December, 1970 (1969 in brackets) was:-

Chief Dental Officer	1	(Vacancy)
Senior " "	1	(1)
Full-time Dental Officers	4	(2)
Part-time " "	0	(2)
Orthodontist (Sessional)	1	(1)
Dental Auxiliary	Vacancy	(1)
Dental Surgery Assistants	6	(6)

Mr. Patrick Fuller joined the Borough on 1st January as the Principal School Dental Officer. During the year two full-time Dental Officers, Mr. Brian Jackson and Mr. Richard Taylor, were appointed to replace Mr. Ebrahim, who went back into general practice and Mr. Hutchison who retired after many years service.

The Orthodontist, Mr. Bernard, left to take a full-time appointment with another London Borough and was replaced by Miss Nagasinghe. Mrs. Lewis, the Dental Auxiliary, moved to Windsor and her place will be taken by Miss Burnett early in 1971.

Mrs Curtis, a Dental Surgery Assistant, left to have a baby and is to be congratulated on its arrival. Her place was taken by Miss Brown, who is to be congratulated on becoming Mrs Hickey.

Following a review of the clerical work involved in the dental service it was felt desirable to regrade the post of Dental Clerk to Clerk/Dental Surgery Assistant to make available a D.S.A. at times of sickness and other absences. As a result of this regrading Mrs. Ashby transferred to another department and Miss Knowles who was previously a D.S.A. became the Clerk/D.S.A. Miss Knowles was replaced by Mrs. Roberts.

It is obvious that considerable staff changes have occurred during the year, but possibly for the first time ever all dental clinics are fully staffed. It is hoped to maintain this position in the future.

Postgraduate Studies

It is an essential part of any profession that staff should be encouraged to attend postgraduate studies to enable them to keep abreast of new ideas and techniques.

During the year Dental Officers attended courses on the treatment of handicapped children, preventive dentistry, and children's dentistry. The Principal School Dental Officer attended the British Dental Association Conference at Manchester, and Mrs. Lewis attended the annual meeting of Dental Auxiliaries. In addition, all dental staff attended a demonstration of resuscitation methods and treatment of emergencies.

Most of the dental staff attend a number of meetings during the year in their own time, arranged by the various professional organisations.

Dental Health Education

In January, the Mayor of Hammersmith accepted the very handsome silver cup, known as the Ronson Dental Health Trophy, on behalf of the Borough. This Trophy was awarded for the school year 1969 - 70 to Wormholt Park Primary School for having the highest percentage of children rendered dentally fit in the Dental Badge Scheme.

Ronson Products Ltd., are thanked for their very generous gesture and their keen interest in the dental health programme.

During the year the Mobile Dental Health Unit continued to visit primary schools and has now visited every Primary School in the Borough. Early in the year dental health packs consisting of a plastic beaker, toothbrush and toothpaste were distributed to children in their first year at Primary School.

An experimental system of project dental health work, based on the "Discovery" method of learning, was started in some Junior Schools and it is intended to extend this to other schools in the next year. Insofar as this method involves the children much more than traditional methods it is likely that this type of learning will prove more effective than past methods.

Premises and Equipment

A review of the standards of hygiene at all dental surgeries was undertaken during the year and as a result certain improvements have been implemented. As a matter of policy all surgeries are to be washed down annually and to be re-decorated every third year. Improved methods of sterilisation are being introduced and by next year all surgeries should have the use of autoclaves. Priority is being given to replacing old sinks by modern stainless steel sink units. Every effort is being made to create good working environments and all surgeries have been equipped with fans, and additional heating where necessary. At the North Hammersmith School Treatment Centre, traffic noise became an increasing problem after the opening of the Westway Motorway. To reduce noise levels in the Surgery double glazing is being installed.

Consideration is being given to providing additional surgeries as quickly as possible. In the meantime, the full-time use of a dental caravan is being made available for next year. For several years a dental caravan has been used in the Borough for up to two months a year. This has proved to be very successful, particularly in providing treatment for handicapped children and those children with both parents working who would not otherwise receive dental treatment.

Statistics

The full school dental statistics will be found in the Appendix. It will be seen that there was an increase in the numbers of children treated and in the number of fillings, and courses of treatment completed.

A figure causing very real concern is the number of failed appointments. This shows an improvement on recent years but is still at the high level of 2.4% patients per session. Further consideration is being given to ways of reducing the time wasted by failed appointments.

Conclusion

This is my first report as the Principal School Dental Officer for Hammersmith. Any Dental Service depends upon a team effort and I am most grateful to all the Dental Officers, Dental Surgery Assistants, Dental Auxilliary and Dental Clerks for their loyalty and co-operation during the year. I wish to thank Dr. Cameron, Dr. Jansz and the Administrative Staff for their co-operation and help during the year.

Finally, I wish to record my thanks to the Dental Adviser and his staff of the Inner London Education Authority for their help and encouragement. The efficient running of the School Dental Service depends very much upon good liaison between the Borough and the I.L.E.A. I am happy to say that there has been a very high level of co-operation and understanding.

<u>Sessions</u>	<u>1970</u>	<u>1969</u>	<u>1968</u>
Sessions devoted to treatment	2,130.8	1,687.0	2,043.8
" " " dental inspections	108.8	66.4	101.7
" " " dental health educt'n	129.0	256.7	120.0
Total Sessions	<u>2,368.6</u>	<u>2,010.1</u>	<u>2,265.5</u>

Inspections

Pupils inspected at schools.	9,584	9,057	13,143
" " " clinics.	2,197	1,929	1,761
" " % inspected	44.4%	41.1%	55.8%
Percentage requiring treatment	56.1%	54.2%	59.9%
Pupils re-inspected	758	611	540
Percentage accepting treatment	51%	56%	48.5%

Visits for Treatment.

First visit.	3,133	3,031	4,070
Subsequent visits	7,886	6,007	7,584
Total visits.	11,019	9,038	11,654
Failed appointments	5,201	5,143	6,130

Treatment

Fillings in permanent teeth	6,789	5,528	6,398
Fillings in deciduous teeth	4,252	2,932	3,460
Permanent teeth extracted	376	296	379
Deciduous teeth extracted	1,263	847	1,081
General Anaesthetics administered	149	203	417
Pupils X-rayed	383	224	221
Prophylaxis	1,255	958	903
Teeth otherwise conserved.	211	391	1,226
Teeth root filled	5	6	15
Crowns	41	4	4
Courses of treatment completed	2,825	2,245	2,892

Orthodontics

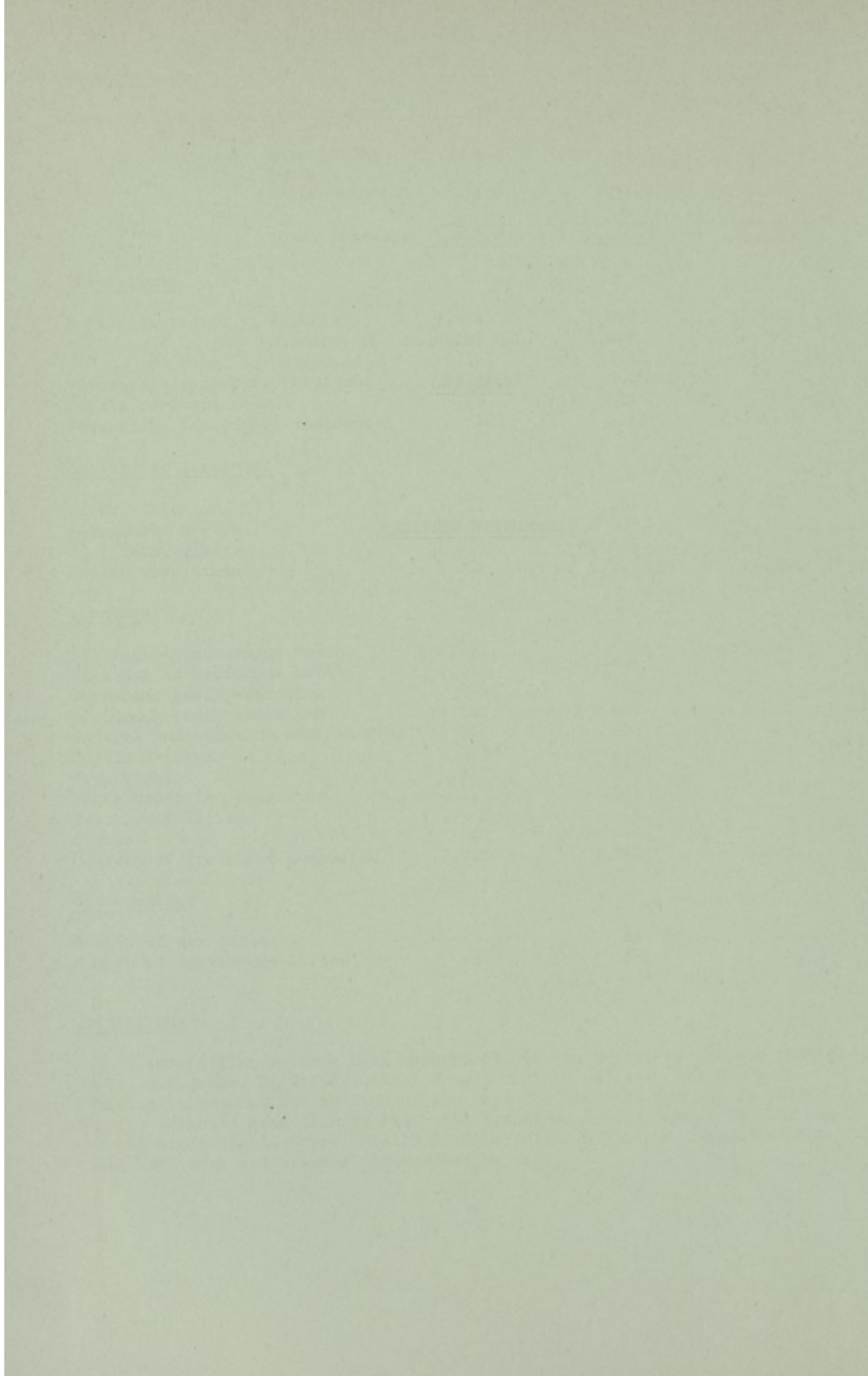
Number of new cases	54	56	51
Number of appliances fitted	84	63	74

Conclusion

I should like to take this opportunity of expressing my sincere thanks to Dr. C.C.Jansz, Deputy Principal School Medical Officer, who has been immediately responsible throughout the year for the work set out in this Report. I should also like to thank the Principal School Dental Officer and all the staff of the School Health Service in their various capacities for their hard work and support throughout the year.

PART TWO

COMMUNITY SERVICES



AREA SOCIAL WORK TEAMS

In March and April, 1970 a large-scale re-organisation of the Community Services took place, one of the principal features of which was the creation of 4 Area Social Work Teams. Each Team, under its Area Team Leader, became responsible for an Area of the Borough and, to cover all aspects of the work, each team was composed of Health, Social, Administrative, Clerical and Typing staff. Each team, therefore, has Child Care, Disabled, Mental Health, School Health, and Welfare Social Workers; with Administrative, Clerical and Secretarial staff supporting their field-work colleagues. Each Area Team has its Headquarters in its own Area, and these are:

Area Team No.1.

Serves College Park & Old Oak;
Coningham; St Stephen's; White City;
and Wormholt Wards.

Headquarters

160/162 Coningham Road,
London, W.12.
Tel: 749-3331.

Area Team No.2.

Serves Addison; Broadway; Brook Green;
Grove; and Starch Green Wards.

101/103 Shepherds Bush
Road,
London, W.6.
Tel: 602-5311.

Area Team No.3.

Serves Avonmore; Colehill; Crabtree;
Gibbs Green; Margravine; and
Sherbrooke Wards.

Cobbs Hall,
Fulham Palace Road,
London, S.W.6.
Tel: 385-7971.

Area Team No.4.

Serves Halford; Parsons Green;
Sandford; Sullivan; and
Town Wards.

2/6 Fulham Broadway,
London, S.W.6.
Tel: 385-1212.



AREA TEAM No.1 AREA & BOUNDARY

No. Key to Map of Area Team No.1. Area

1. Training Centre (Adult) - College Park,
Letchford Gardens, N.W.10.
2. Luncheon Club - 200 Old Oak Common Lane, W.3.
3. Maternity & Child Health Centre - The Curve,
Westway, W.12.
4. Home Nurses - 18 Old Oak Road, W.3.
5. Day Nursery - 466 Uxbridge Road, W.12.
6. Maternity & Child Health Centre - Becklow
Gardens, Becklow Road, W.12.
7. Homeless Families Accommodation -
193 Askew Road, W.12.
8. Luncheon Club - Westville Road, W.12.
9. Stamford House - Goldhawk Road, W.12.
10. Residential Home for Elderly - Southway Close,
Scotts Road, W.12.
11. Health Laundry - Scotts Road, W.12.
12. Homeless Families Accommodation -
112 Coningham Road, W.12.
13. Area Team No.1. Office - 160 Coningham Road, W.12.
14. Day Nursery - 182 Latimer Road, W.10.
15. Residential Home for Elderly - Westway Park,
190 Westway, W.12.
16. School Treatment Centre - 207 Westway, W.12.
17. Foot Clinic - 207 Westway, W.12.

(The above list gives only the principal services in the Area).



AREA TEAM No.2 AREA & BOUNDARY

No. Key to Map of Area Team No.2.Area.

1. Luncheon Club - St. Saviour's Church, Cobbold Road, W.12.
2. Emlyn Gardens Day Centre - Emlyn Road, W.12.
3. Homeless Families Accommodation - 280 Goldhawk Road, W.12
4. Maternity & Child Health Centre - Queen Charlotte's Hospital, Goldhawk Road, W.12.
5. Day Nursery - Dalling Road, W.6.
6. Home Help Organiser - 48 Glenthorne Road, W.6.
7. Maternity & Child Health Centre - 48 Glenthorne Road, W.6.
8. Foot Clinic - 48 Glenthorne Road, W.6.
9. Residential Home for Elderly - St. Vincent's, Queen Caroline Street, W.6.
10. Day Centre for the Elderly - St. Vincent's, Queen Caroline Street, W.6.
11. Luncheon Club - St. Vincent's, Queen Caroline Street, W.6.
12. Luncheon Club - Guinness Trust Buildings, 75 Fulham Palace Road, W.6.
13. Coroner's Court & Mortuary - Fulham Palace Road, W.6.
14. Foot Clinic - 219 Hammersmith Road, W.6.
15. Luncheon Club - Holy Trinity Church Hall, Brook Green, W.6.
16. Day Nursery - Brook Green, W.6.
17. Area Team No.2. Office - 101/103, Shepherds Bush Road, W.6.
18. Day Centre for the Handicapped - Blythe Hall, Blythe Road, W.14.
19. Luncheon Club - Blythe Hall, Blythe Road, W.14.
20. Maternity & Child Health Centre - 1 Milson Road, W.14.
21. Central Services Kitchen - Milson/Masbro' Road, W.14.
22. School Treatment Centre - 1 Milson Road, W.14.
23. Homeless Families Accommodation - Minford Gardens, W.14.
24. Luncheon Club - Shepherds Bush Baptist Church, 1 Shepherds Bush Road, W.6.
25. The Grove Health Centre - Goldhawk Road, W.12.
26. Luncheon Club - Underwood House, Sycamore Gardens, W.6.
- Town Hall - King Street, Hammersmith, W.6; Duty Officer for Emergency Services; & Information Centre. 233 Hammersmith Road, W.6.
- ⊙ Annexe, Granville Sharp School - Inner London Education Authority, Brook Green, W.6. (Formerly Special Care Unit for Severely Subnormal Children)
- ⊙ Education Welfare Office - Inner London Education Authority, Fulham Palace Road, W.6. (To move in 1971).
- ⊙ Palingswick Hostel or House, - for Diabetic School-Children, Inner London Education Authority, King Street, W.6.

(The above list gives only the principal services in the Area.)



AREA TEAM No.3 AREA & BOUNDARY

No. Key to Map of Area Team No.3. Area.

1. Luncheon Club - Burne Jones House,
North End Road, W.14.
2. Maternity & Child Health Centre -
Burne Jones House, North End Road, W.14.
3. School Treatment Centre-
St. Dunstan's Road, W.6.
4. Foot Clinic - School Treatment Centre -
St. Dunstan's Road, W.6.
5. Day Nursery - Bramber Road, W.14.
6. Maternity & Child Health Centre -
90 Greyhound Road, W.6.
7. Social Centre & Club for the Blind -
Bishop Creighton House, 378 Lillie Road, S.W.6.
8. Foot Clinic - Bishop Creighton House,
378 Lillie Road, S.W.6.
9. Club for the Mentally Ill -
Bishop Creighton House, 378 Lillie Road, S.W.6.
10. Area Team No.3 Office - Cobbs Hall,
Fulham Palace Road, S.W.6; & Citizens' Advice Bureau
11. Luncheon Club - 155 Munster Road, S.W.6.

(The above list gives only the principal services in the Area)



AREA TEAM No.4 AREA & BOUNDARY

No. Key to Map of Area Team No.4 Area.

1. School Treatment Centre - 44 Seddlescombe Road, S.W.6.
2. Luncheon Club - Haldane Road, S.W.6.
3. Home Nurses - Old Town Hall, Fulham Broadway, S.W.6.
4. Home Help Organiser - 2/6 Fulham Broadway, S.W.6.
5. Homeless Families Accommodation -
529/531 Fulham Road, S.W.6.
6. Foot Clinic - 2/6 Fulham Broadway, S.W.6.
7. Area Team No.4. Office - 2/6 Fulham Broadway, S.W.6.
8. School Treatment Centre - 18 Bagley's Lane, S.W.6.
9. Foot Clinic - 18 Bagley's Lane, S.W.6.
10. Day Nursery - Bagley's Lane, S.W.6. (There is also
a Day Nursery for Subnormal Infants at this address).
11. Luncheon Club - St. Matthew's Church Hall,
Rosebury Road, S.W.6.
12. Maternity & Child Health Centre -
170 Wandsworth Bridge Road, S.W.6.
13. Homeless Families Accommodation -
23 Broomhouse Road, S.W.6.
14. Maternity & Child Health Centre -
5/7 Parsons Green, S.W.6.
15. School Treatment Centre - 5/7 Parsons Green, S.W.6.
16. Foot Clinic - 52 New King's Road, S.W.6.
17. Hurlingham Lodge Hostel -
Hurlingham Road, S.W.6.
18. Day Nursery - Fulham Park Road, S.W.6.
19. Foot Clinic - 706 Fulham Road, S.W.6.
20. Luncheon Club - 726 Fulham Road, S.W.6.
- Granville Sharp School - Inner London Education
Authority, 84 Fulham High Street, S.W.6.
(Formerly Junior Training Centre for Mentally -
Handicapped Children).
- ☒ Old Town Hall, Fulham Broadway, S.W.6;
& Information Centre.

(The above list gives only the principal services in the Area)

Residential Services

(1) Homes for the Aged (Local Authority)

The eight homes accommodate approximately 400 residents with an additional 75 beds available at 'Kings Mead' and 'Brockle Bank' run by the adjoining boroughs of Kensington & Chelsea and Wandsworth respectively. During 1970, residents in both Homes were increasingly transferred to alternative accommodation, and it is hoped to close both these Homes in the near future.

The demand for vacancies has continued to be heavy and, therefore, selection has been made on priority grounds. Although one hopes that applicants will in the future be admitted soon after applying it is still the case that often this is delayed until crises arise.

The limitation of admission to very frail and infirm people either living alone or with hard-pressed relatives has meant a heavy burden for the staffs of the Homes, particularly at the four purpose-built establishments (Westway Park, Southway Close, Stewarts Lodge and Oak Tree House) which are all, in effect, ground floor accommodation.

The four short-stay beds available at Oak Tree House accommodated 65 people during 1970, and were of great value in allowing many, who normally care for their relatives in their own homes, to take a holiday. Doubtless these periods of relaxation for such relations helped to prevent serious family breakdown.

A tribute must be paid to the Matrons, their Assistants and all the staffs in the Homes for the way in which they have carried out their work, often under trying and difficult circumstances; but always endeavouring to remember that their first duty is to the residents and ensure they have adequate care.

(2) Homes for the Aged & Disabled (Voluntary Associations)

The Council continues to maintain approximately 190 people in Homes run by voluntary associations with religious, professional or special disability backgrounds, e.g. Methodist Homes, Homes for Aged Jews, Homes for Aged Seamen, Homes for Spastics, Arthritics, for the Deaf & Dumb, or the Blind. Distinct from those in the Local Authority Homes who are almost all in the over 75 age group, those in voluntary homes include a number of young disabled aged 16 years plus.

Discussions are still in progress with neighbouring Boroughs with regard to the provision of a Home for the young disabled, who, although are few in number often go to Homes run by voluntary bodies sometimes far away from family and friends.

Temporary Accommodation (Homeless Families)

The Welfare Department opened a modern Reception Centre at 280 Goldhawk Road, W.12., in January, 1970. It has 8 units, (one of which is for emergencies such as fire), as compared with 4 units in the previous Reception Centre at 141 Uxbridge Road, W.12.

Apart from pre-eviction work and intensive case-work with families in temporary accommodation, the social work team continued their close liaison with various Voluntary and Statutory Agencies. The social workers also undertook after-care work with families rehoused by the Borough and those families rehoused outside the Borough were referred to the appropriate Local Authorities.

In early 1970, despite staffing difficulties, both social work and residential teams carried on their responsibilities for the families undauntedly. The Homeless Families Service interviewed 257 families of whom 69 were admitted, 73 were discharged, including 40 nominated for rehousing.

Mother and Baby Units

The Council accepted financial responsibility for 41 unmarried girls before confinement; and after confinement, 11 with their babies, by arrangement with Welcare and with the Crusade of Rescue.

Domiciliary Services

It is estimated that there are about 30,000 people over pensionable age living in the Borough and at any one time approximately 10% will be receiving one or more of the local authority domiciliary services.

The main services include:

(i) Meals

About 1,350 meals were provided daily, of which 850 went to old people in their own homes and about 450 to those who attended the 13 luncheon clubs situated in different parts of the Borough. These clubs vary in attendance from 15 to 70 persons. Roughly 100 meals were provided each day for the City of Westminster under an agency arrangement for persons residing in the western end of that particular Borough. Approximately 120 invalid meals were also delivered and were provided under health powers.

This large daily operation involved 19 vehicles and 36 staff mainly driving and serving and much depended upon the speed and efficiency with which they carried out their duties in all weathers. Delay at any stage of the preparation of the meal or its delivery to the old people can effect them considerably because of their reliance upon it. This is a most valuable service and ensures that many of the aged, the majority of whom have only a basic state pension and allowances, receive a good hot meal each day.

In addition, those who attend the luncheon clubs can find companionship which might otherwise be lacking. It is hoped that when financial considerations permit, there will be an expansion of both the domiciliary meals and luncheon club provision.

(ii) Weekend Meals Service

This service continues to help the very small group of house-bound elderly and disabled who are unable to make any other arrangements at the weekend or on public holidays. Roughly 60 people are so assisted.

(iii) Social Clubs

The social club at Fulham Road still gives pleasure and interest to a number of elderly residents. It is open 5 days each week from 10 a.m. to 4 p.m. Additionally, the 28 clubs organised by voluntary associations and those for the blind at St. Simon's Church Hall and at Bishop Creighton House maintain their good work.

There is, however, still room for expansion in this area and it is hoped that one day there will be clubs for the elderly in all parts of the Borough. Loneliness is often one of the most pressing problems of old age but much can be done to ameliorate and reduce its effects.

(iv) Visiting and Advice

Social Workers have continued their periodic visits to the aged to try and help with particular problems. Housing and Rent Act difficulties and the complexities of every day life trouble many, apart from the large number of crises calling for immediate attention. The social workers endeavour to give practical help and advice on a wide range of problems.

(v) The Voluntary Help Service

This service was created initially to work with the old Welfare Services Department, and much of its work is still with the elderly, blind and handicapped. Since the major re-organisation in April, this year, it has been drawn into other areas of work in which volunteers are competent to help.

Very many of the volunteers come from the schools in the Borough, and many of the remainder are young people in their twenties who are at work and given of their time in the evenings and at weekends. The service also receives valuable help from interested Church groups, and from other voluntary organisations.

A large amount of help given is in the form of visiting those who are isolated and lonely. A great variety of practical work is undertaken. Examples include shopping, escorting, gardening, wheelchair outings, window-cleaning, decorating and hairdressing.

(vi) Holidays, Outings & Entertainments for the Elderly

As usual, over 400 old people enjoyed a holiday during 1970 arranged by the Welfare Services, and in addition, a number of outings and theatre trips were held. Many parties were held at Christmas time in Fulham Old Town Hall and at Hammersmith Town Hall when about 1,600 elderly enjoyed themselves and also greatly appreciated the concerts provided by the Borough.

(vii) Services for the Blind & Physically Disabled

The register increased still further and now numbers nearly 1,850, of these 762 were registered blind or partially-sighted. Although the services are largely integrated there are certain special provisions for the blind, e.g. the teaching of Braille and Moon.

The blind continued to use the Talking Book Service and it is pleasing that the service also benefits the house-bound disabled allowing those with such severe handicaps to get more enjoyment out of life.

'Ulverscroft' large print books were made available to the blind and partially-sighted in Residential Homes and others were able to borrow them through the library service. A number of blind people were employed in the Sheltered Workshops and some went to training or rehabilitation courses run by the Royal National Institute for the Blind.

(viii) Holidays for the Blind & Disabled

As in previous years, holidays were arranged for a large number of blind and disabled people and these provided a great deal of pleasure and interest for those who went.

(ix) Some Work Support

This helped many of those with domestic or financial problems and advice is freely sought. Periodic visits are made to all on our registers.

(x) Exhibition of Handicrafts

A permanent exhibition of handicrafts made by the disabled at the Centres continued to be displayed at the shop, 551 Fulham Road; adjoining the Town Hall where they are on sale to the public.

(xi) Transport

This vital service to the disabled and blind relies heavily upon the kindness and understanding of the drivers who get to know their 'charges' well and often give that little extra attention which means so much.

The special transport includes vehicles with hydraulic tail lifts which enable wheelchairs and the severely disabled to be handled more easily.

The vehicles have also been used to provide transport for a number of voluntary bodies in the Borough, and thanks have been received from these organisations.

The main centre at Blythe Hall is very fully committed and it is necessary to ration attendance to one day a week. An alternative centre is urgently required and has been planned for 1972-3 possibly in the South of the Borough.

(xii) The Deaf

There were 59 deaf people registered in the Borough at the end of 1970, and they received some services through the Royal Association for the Deaf and Dumb who act as agents for local authorities in the London Area. There is an excellent social centre and church in the Old Oak Road and many of our deaf attended the various activities.

(xiii) The Deaf-Blind

The deaf-blind continue to meet on Wednesday afternoons in the Hall at St. Vincents. Several volunteers assist with this very essential service to those doubly-disabled persons.

Although there are fortunately only 10 deaf-blind people in the Borough, it is a most worthwhile service and enables them to live a fuller life.

**PERSONS IN RESIDENTIAL ACCOMMODATION
ON 31ST DECEMBER 1970**

TABLE 1 - Number of Persons admitted during 1970

		Number of admissions (other than for short stay) of persons aged:-							Number of short stay admissions (8)
		Under 30 (1)	30-49 (2)	50-64 (3)	65-74 (4)	75-84 (5)	85 and over (6)	Total (7)	
1.	Male	1	4	5	18	15	10	53	19
2.	Female	-	2	3	10	35	59	109	46
3.	Total	1	6	8	28	50	69	162	65

TABLE 2 - Analysis of persons in residential accommodation on 31st December 1970, by age, sex and size and type of home

Age	Sex	Persons (exclusive of staff) residing in								Total (9)	
		Homes in the possession of the Council whose normal bed complement for residential accommodation is					Joint user premises shared with hospitals		Accommodation provided on behalf of the Council in voluntary or private homes (8)		
		Under 31 (1)	31-50 (2)	51-70 (3)	71-150 (4)	Over 150 (5)	In possession of a local authority (6)	In possession of hospitals (7)			
1.	M	-	-	-	-	-	-	-	4	4	
2.	F	-	-	-	-	-	-	-	-	-	
3.	M	-	-	-	-	-	-	-	5	5	
4.	F	-	-	-	1	-	-	-	4	5	
5.	M	-	2	1	2	-	-	-	5	10	
6.	F	-	8	1	1	-	-	-	9	19	
7.	Total Under 65	-	10	2	4	-	-	-	27	43	
8.	M	-	9	3	13	-	-	-	17	42	
9.	F	6	19	5	12	-	-	-	21	63	
10.	M	-	22	8	20	-	-	-	19	69	
11.	F	6	42	16	38	-	-	-	33	135	
12.	M	-	4	8	10	-	-	-	11	33	
13.	F	7	43	14	63	-	-	-	59	186	
14.	Total 65 & over	19	139	54	156	-	-	-	160	528	
15.	Total all ages	19	149	56	160	-	-	-	187	571	
16.	No. of homes in which persons reside	1	4	1	2						
No. of persons accommodated:-			Under 30	30-49	50-64	Total under 65	65-74	75-84	85 and over	Total 65 and over	Total All Ages
17.	On behalf of other local authorities (included above)	M	-	-	-	-	1	1	-	2	2
	F	-	-	1	1	2	4	4	10	11	
18.	By other local authorities on behalf of the Council. (not included above)	M	-	-	2	2	8	6	5	19	21
	F	-	-	-	-	-	5	34	28	67	67

TABLE 3 - Analysis of persons aged under 65 in residential accommodation in 1970 by major disability and size and type of home

Major Disability	Persons (exclusive of staff) residing in								Total (9)
	Homes in the possession of the Council whose normal bed complement for residential accommodation is					Joint user premises shared with hospitals		Accommodation provided on behalf of the Council in voluntary or private homes (8)	
	under 31 (1)	31-50 (2)	51-70 (3)	71-150 (4)	over 150 (5)	In possession of a local authority (6)	In possession of a hospital (7)		
1. Blind	-	2	-	2	-	-	-	3	7
2. Deaf	-	-	-	1	-	-	-	-	1
3. Epileptic	-	-	-	-	-	-	-	3	3
4. Physically handicapped	-	2	-	1	-	-	-	20	23
5. Mentally handicapped	-	1	1	-	-	-	-	1	3
6. Mentally ill	-	4	1	-	-	-	-	-	5
7. Other persons	-	1	-	-	-	-	-	-	1
8. Total	-	10	2	4	-	-	-	27	43
9. The number of persons under the age of 65 included in line 8 above who appear to be persons to whom Section 29 of the National Assistance Act 1948 applies and who are accommodated in homes in which persons aged 65 or over also reside									31

TABLE 4 - Analysis of persons aged 65 and over in residential accommodation on 31st December 1970 by major disability and size and type of home

Major Disability	Persons (exclusive of staff) residing in								Total (9)
	Homes in the possession of the Council whose normal bed complement for residential accommodation is					Joint user premises shared with hospitals		Accommodation provided on behalf of the Council in voluntary or private homes (8)	
	under 31 (1)	31-50 (2)	51-70 (3)	71-150 (4)	over 150 (5)	In possession of a local authority (6)	In possession of a hospital (7)		
1. Blind	1	25	4	11	-	-	-	15	56
2. Deaf	1	7	1	8	-	-	-	7	24
3. Epileptic	-	1	-	2	-	-	-	2	5
4. Mentally disordered	11	32	19	33	-	-	-	13	108
5. Other persons	6	74	30	102	-	-	-	123	335
6. Total	19	139	54	156	-	-	-	160	528

REGISTRATION OF PRIVATE AND VOLUNTARY HOMES
12 MONTHS ENDED 31 December 1970

TABLE 5 - Registration of Old Persons Homes and Homes for Disabled Persons

	Number of Homes						
	Voluntary Homes			Private Homes			TOTAL (7)
	under 31 beds (1)	31-50 beds (2)	over 50 beds (3)	under 31 beds (4)	31-50 beds (5)	over 50 beds (6)	
1. New registrations during 1970							NIL
2. Registration cancelled during 1970							NIL
3. Registrations at 31.12.1970							1
4. Total number of registered places in homes at 31.12.1970							104
				Voluntary Homes		Private Homes	Total
5. Number of persons resident within the terms of the registration in above homes at 31.12.1970				a. Under age 65	4	-	4
				b. Aged 65 and over	107	-	107
				c. Total	111	-	111

REGISTERS OF HANDICAPPED PERSONS ON 31st DECEMBER 1970

TABLE 6

Age	Sex	Number of persons on register at 31st December 1970					Number of persons whose names were added to the register during the year ended 31st December 1970				
		Deaf with speech	Deaf without speech	Hard of hearing	General classes	Total	Deaf with speech	Deaf without speech	Hard of hearing	General classes	Total
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Under 16	M	-	-	-	8	8	-	-	-	2	2
	F	-	-	-	7	7	-	-	-	-	-
16-29	M	3	2	1	33	39	-	-	-	2	2
	F	2	2	-	23	27	-	-	-	3	3
30-49	M	1	2	-	55	58	-	-	-	15	15
	F	1	1	1	64	67	-	-	-	11	11
50-64	M	2	1	3	165	171	-	1	1	44	46
	F	2	4	-	189	195	-	-	-	37	37
65 or over	M	6	2	-	164	172	1	1	-	28	30
	F	9	7	7	321	344	1	1	-	37	39
Total		26	21	12	1029	1088	2	3	1	179	185

TABLE 7 - Analysis of persons on the general classes register according to age and handicap

Major handicaps		Age Under 16	Age 16-29	Age 30-49	Age 50-64	Age 65 or over	Total
		(1)	(2)	(3)	(4)	(5)	(6)
1.	Amputation	1	-	10	25	52	88
2.	Arthritis or rheumatism	-	2	4	72	211	289
3.	Congenital malformations or deformities	3	2	4	4	2	15
4.	Diseases of the digestive and genito-urinary systems, of the heart or circulatory system, of the respiratory system (other than tuberculosis) or of the skin	1	1	8	56	63	129
5.	Injuries of the head, face, neck, thorax, abdomen, pelvis, or trunk. Injuries or diseases (other than tuberculosis) of the upper and lower limbs and of the spine	4	7	13	40	39	103
6.	Organic nervous diseases - epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc.	5	34	66	128	95	328
7.	Neuroses, psychoses, and other nervous and mental disorders not included in line 6	-	1	1	2	4	8
8.	Tuberculosis (respiratory)	-	-	-	2	2	4
9.	Tuberculosis (non-respiratory)	-	-	2	7	2	11
10.	Diseases and injuries not specified above	1	5	7	21	20	54
Total		15	52	115	357	490	1029

TABLE 8

Organisation	Number of main meals served at recipients' homes	Number of main meals served elsewhere (i.e. at clubs, centres including centres at residential homes) etc.	Total
1. Local Authority	195,533	111,680	307,213
2. Women's Royal Voluntary Service			
3. Old Persons Welfare Committee			
4. Joint W.R.V.S. and O.P.W.C.			
5. British Red Cross Society			
6. Salvation Army			
7. Others (including joint schemes not mentioned above)	19,978		19,978
8. Total	215,511	111,680	327,191

ANNUAL REPORT ON CO-ORDINATING COMMITTEE AND CASE CONFERENCES FOR 1970:

Meetings of Co-ordinating Committee	2
Meetings of Sub-Committee on Early Notification of Arrears of Rent	1
Meetings of Allocation Sub-Committee (Rehousing on Social Grounds)	0
Meetings of Intermediate Case Conferences, first quarter only	30
Meetings of Overcrowding Sub-Committee	6

Number of families discussed:

At Co-ordinating Committee: (Reported briefly)	0
At Special Meetings on arrears: (Families, of whom 34 had cleared)	159
At Intermediate Case Conferences: (Families)	20
Families discussed twice: (10)	10
At Overcrowding Sub-Committee:	44

Analysis of sources of referral of families discussed at Case Conferences, (first quarter only).

Borough Services:

Principal Nursing Officer	3
Children's Officer	2
School Medical Officer	1
<u>Total</u>	<u>6</u>

Other Authorities:

I.L.E.A. Divisional School Care Organiser	3
G.L.C. Housing Manager	6
<u>Total</u>	<u>15</u>

Miscellaneous:

N.S.P.C.C.	2
Medical Social Worker	1
General Practitioner	1
Family Welfare Association	1
<u>Total</u>	<u>20</u>

Families referred to New Workers from Case Conferences: 1st. Quarter
1970

Six Families

Family Case Workers	2
Invalid Children's Aid Association	1
Family Welfare Association	2
School Health Social Workers	1
<u>Total</u>	<u>6</u>

Existing workers to continue

Fourteen Families

Total 14

Health Service

Six Families

Health Visitors	3
Family Case Workers	1
Mental Health Social Workers	1
School Health Social Workers	1

Children's Service 6

Education Service 3

N.S.P.C.C. 3

Family Welfare Association 1

Family Service Unit 1

Medical Social Workers 1

Mental Welfare 1

Total: 22

Subject considered at the two meetings of the
Co-ordinating Committee included:

- Re-organisation of the London Borough of Hammersmith Community Services.
- Re-organisation of the I.L.E.A. Education Welfare Service.
- New arrangements for the convening of Case Conferences.
- New arrangements for dealing with Early Notification of Rent Arrears.
- Reports from the Re-housing on Social Grounds Sub-Committee.
- Reports from the Overcrowding Sub-Committee.
- Implications of the L.E.B. policy on slot meters.
- Arrangements between the Supplementary Benefits Commission and the Municipal Boroughs' Association on a "Fair rent".
- Local arrangements to prevent hypothermia - especially in view of the possible shortage of smokeless fuel.

Co-operation with General Practitioners

533 children were referred from School Medical Examinations for specialist opinion. The General Practitioners were consulted on all these and preferred to make their own arrangements for 31 children. The rest were referred to the appropriate School Health Clinic or Hospital Department.

Report of Family Casework for the year 1970

Families already receiving casework help on 31.12.69	31
Families taken on during year	1
Families still receiving casework help on 31.12.70	10

Cases closed during 1970

Satisfactory - no further need for casework help	7
Left district	2
Evicted	1
Transferred to other services	11*

* 1 full-time and 1 part-time caseworker
seconded for professional training

(Transferred to Area Team) 7

(Transferred to School Health Social Workers) 4

Casework help available during year

1 full-time caseworker for 8 months

2 part-time caseworkers

1 for 8 months (A)

1 for 12 months (B)

(A) giving approximately $\frac{1}{4}$ of time

(B) giving approximately $\frac{1}{2}$ of time
equivalent of $1\frac{1}{4}$ full-time

N.B.

A further 59 families have received help during 1970, from the Social Workers (Health Services) as part of their work for the I.L.E.A. These are all families with a child attending a Special School or a Special Investigation Clinic.

TRAINING OFFICER'S REPORT, (SOCIAL SERVICES)

As a result of the far-reaching re-organisation of April, 1970, it was found essential to follow up with a formidable training and development programme aimed at preparing staff for the many changing and developing roles of a new structure.

1. Prior to April, when the setting-up and moves into Area Teams took place, Area Team Leaders and their Assistants were experienced in only one social work discipline or, at the most, two. They had, therefore, to be given opportunities for observing the work of other Departments or Sections, e.g. Mental Health, (which was to be transferred to Social Services, i.e. Area Teams), but of which they had no experience. The majority of this training was arranged internally, but one placement was obtained in another Authority so that an Area Team Leader could gain relevant experience. The move into Area Teams and the consequent involvement of senior staff prevented this project from being completed, but a considerable amount of work preparatory to further learning had been accomplished.
2. Seminars were held for staff assuming new responsibilities as senior social workers. These social workers were enlarging their supervisory responsibilities to include staff from three social work disciplines. It was as essential that they should know of the legislation and practice involved as learn something of the special techniques of staff supervision. The senior social workers meet regularly at fortnightly intervals as part of our continuing staff development programme.
3. Seminars which enabled social workers trained or experienced in a specific discipline to discuss the legislation, policy, and techniques of the complementary social work groups in the Area Teams were conducted by the Training Officer and by other experienced staff members. These enabled each social worker to look at the practice of the other two social work disciplines in the Team, and were useful in extending their knowledge of the work undertaken. This was an extremely useful stage in our programme, and continues to bear results.
4. The Children & Young Persons Act, 1969, required a training programme to deal with its many implications. Lectures were held at fortnightly intervals throughout the Autumn when outside speakers included the Chairman of a Magistrate's Panel, the Chief Clerk of a Juvenile Court, a Senior Probation Officer, a Chief Officer from the Juvenile Bureau at Scotland Yard, and a team of workers from an Approved School. In conjunction with these sessions we had valuable co-operation from the local Juvenile Bureau when the police arranged two exercises dealing with police procedure prior to court appearance, and they also took part in a mock court training session.
5. In working towards integrated social work functions in Area Teams, new training needs have to be met as practice changes, e.g. regular weekly talks on mental health legislation, and simple descriptive lectures on clinical conditions, are given to welfare and child-care staff about to undertake mental health rota duty.
6. Because of the necessity to take on untrained social workers in child-care, two intensive 3-day sessions dealing with relevant legislation were held. They have since joined in fortnightly

sessions dealing with specific aspects of child-care work, i.e. fostering, residential care, and adoption procedures. Newly-appointed staff have also had the opportunity of attending weekly small group discussions dealing with the casework aspect of child-care practice.

7. Newly appointed welfare social workers attended talks and discussions on welfare practice conducted by one of the Area Team Leaders. It is planned to re-convene these, as additional legislation will require procedures and techniques to be under constant review.* The Training Officer is exploring the possibility of developing a new project in co-operation with the Medical-Social Work Department of a local hospital responsible for work with many handicapped persons.
* Groups were also held for newly-appointed mental welfare officers.
8. Two study mornings were held when newly-appointed staff from all disciplines met to discuss their work with Headquarter's staff holding positions with special responsibilities, i.e. the Senior Social Worker from the Homeless Families Section; the Social Worker Adviser for the Blind and Disabled; and the Manager of the Local Office of the Department of Health and Social Security.
9. The trainee welfare officers continued their training by attending talks on "Human Growth and Development", and attended other seminars on casework concepts, and paid visits of observation to welfare and other establishments directly concerned with the Team's work. As a result of this, the trainees have now moved into groups composed of more experienced social workers.
10. In residential child care work a series of films on various aspects of deprivation are being shown to the Langley Housemothers. These films are followed by discussions, led by Miss Leared of the Tavistock Institute. These monthly sessions have aroused considerable interest.
11. The Training Officer is joining in special training sessions for our nursery nurses on the Nursery Nurses Examination Board Course at Annesley House. These sessions take the form of a film followed by discussions, and this project is to be repeated.
12. Stamford House has organised a training programme including visits of observation to other establishments associated with their work, e.g. Ashford Remand Centre. Many of the newly-appointed Child Care Officers have benefited from these sessions and visits. This programme is to be extended during the year with a view to obtaining formal Home Office recognition.
13. The Acting Children's Officer has convened regular meetings of staff representatives from all residential establishments to discuss a Home Office Survey of residential care development and practice. After each session the representatives discuss the topic at their own staff meetings, and feed back observations at the next joint meeting. This is not exactly training but is extremely useful from the training point of view as we identify gaps in knowledge or special training needs.
14. The Training Officer is grateful for the help of the Nursing Service in arranging a training course for Attendants in homes for the elderly. In order to cover all staff, these sessions have to be repeated four times, but it is considered to be time well

spent as we hope these brief training sessions will make a significant contribution to the standard of care of the aged. Topics covered include lifting of patients, general hygiene, and dealing with confused states in the elderly. Visual aids have been used extensively and add interest to these sessions.

The Superintendents of our Homeless Families Units have attended a Day Release Course at the London Boroughs' Training Committee which dealt with many aspects of their work.

15. Day Centre staffs in the Welfare and Mental Health Services were able to attend Study Courses arranged by the London Boroughs' Training Committee, and they have been generally well received.
16. The London Boroughs' Training Committee have continued to offer a wide range of Day-Release Courses as well as short Residential Training Courses. These have been used as effectively and as economically as possible to meet individual needs and to develop special interests and skills in selected staff members. 52 attended L.B.T.C. courses during this year; these include Day Centre staff, Superintendents of Homeless Families Units, as well as residential and social work staff. The Training Officer has joined in L.B.T.C. courses of various kinds by offering lecturing time. Home Office Courses have been selected for short 3 to 5-day refreshers for trained child care staff. Five members have attended these, including residential staff.

The National Institute for Social Work Training has sponsored a number of training sessions and we have sent 12 staff members to relevant training groups.

The Southern Regional Association for the Blind has organised Refresher Courses for social workers and administrators dealing with aspects of blind welfare. We have sent staff to some of these.

Brunel University is to develop Short Courses in Management appropriate for social workers at Area Team Leader level. One of our Area Team Leaders is to attend the pilot course.

Principal Officers have attended National Conferences as appropriate.

17. One residential staff member is on a day-release course with a view to obtaining a Home Office Certificate of Attendance. The possibility of this type of training being extended to welfare residential work is being explored, and a course to meet these welfare needs will be arranged this year. The Training Officer has been involved in preparatory discussions, and we shall be recommending Matrons to attend, as the first courses are to be for senior supervisory staff.

We have co-operated with local hospitals in arranging visits of observation for nursing staff, and short one-day working sessions in our homes for the elderly.

18. Six social work staff have returned from secondment having successfully obtained relevant Certificates; 3 social workers have been seconded to full-time courses, whilst 2 have begun part-time courses; 2 residential staff have returned having successfully completed training; 3 residential staff have been seconded during the year, one on an advanced course; 2 staff members were granted

short periods of paid leave to meet Home Office training requirements before gaining certificates; and 1 staff member has been granted two months paid leave to complete the practical part of her Social Science Certificate.

We did not take part in the Emergency Child Care Course last year, but it has been agreed that we accept a trainee to begin in September next year, and candidates are about to be interviewed. The one staff member who joined us under this scheme two years ago is successfully completing his training.

Secondment is the subject of an additional report to be presented to the Administrative Services Group Committee.

19. Student practical training placement in conjunction with Universities and Polytechnics is an important part of our training programme, and this has been much reduced during the year because of the needs of our own staff.

Senior and experienced staff members have attended sessions preparing themselves to make an effective contribution as soon as possible. Apart from anything else, this is a useful way of attracting trained staff, both field and residential, to the service. Meanwhile, working relationships have been maintained with Universities and Polytechnics with a view to increasing our contribution when we are able to offer training experience of a high order.

20. The Training Officer has taken part in career conventions, in talks to voluntary groups, and has helped with a youth service residential course on aspects of local government.
21. The Staff Section has continued to offer administrative support to the Training Officer in co-ordinating training and in maintaining records, as well as handling applications for grants from the Local Government Training Board. The Training Officer is engaged in the L.G.T.B. Course for Training Officers who need to be registered with the Board. A joint library service is co-ordinated through the Secretariat and the Training Officer has oversight of books purchased for this purpose, as well as those purchased by staff on training courses.

Referrals and Community Care

Staffing of the Mental Health Service was a problem. There were a great many changes and this put a great deal of pressure upon those members of staff who were left who had to maintain the services to the community, and train new staff.

Six members of staff left, three for promotion to other Boroughs, and one left social work to take up other employment. One temporary who had completed her agreed 3 months placement left at the end of it, as did another who took employment in another field of social work after working for Hammersmith for 4 months.

Two members of staff were still on secondment but by the end of the year the situation had much improved, 5 new members of staff having been appointed, 3 with professional training.

There was a fairly substantial drop in the number of cases referred, but this could have been in part due to the formation of Area Teams, with initial difficulties in communication.

Of those referred, the number accepted for Community Care was considerably less than in other years, due to the very poor staffing situation for a considerable part of the year.

Training

The Universities and College of Technology are still requiring Mental Health placements. Three students from Croydon Technical College were accepted for long-term placements and several students from Universities had short-term observation placements.

Fulham Training Centre has 60 places for boys and girls aged between 5 and 16 years. Until the end of the year two children, one from Wandsworth and one from Kensington, were attending the Centre but these have now left and all the trainees are from the London Borough of Hammersmith. Five Hammersmith children attend Kensington Training Centre. There were 60 trainees on the register and the average daily attendance was 45.

The syllabus included social training, music and movement, and simple instruction using the Montessori method of teaching. The weekly swimming lesson continues to be very popular with the children, two children received certificates for completing 50 yards, and one of them received a second certificate as a physically-handicapped swimmer.

A most popular new venture was in the attendance, on one morning a week, of 15 trainees at the Adventure Playground in Chelsea. This has a marked effect on the children's co-ordination and confidence.

This year the coach outing was to Woldingham Abbey, where the nuns of the Convent of the Sacred Heart entertained them for the day.

Two excursions were made to the Commonwealth Institute, and three excursions for the 13-16 year olds to the Changing of the Guard, and other places of interest. Walks along the towpath were taken by all age groups.

The Rev. D.F. Andrews, Vicar of All Saints, again kindly allowed the use of the Vicarage Gardens for the Centre Sports Day. The weather was most favourable, and the competitors went through their paces with great

gusto and enjoyment. The usual high standard of Christmas entertainment was reached with a nativity play mimed by the children, after which they sang carols. A Christmas Party was held at which Father Christmas presented each child with a toy. Gifts of money were received from the Hammersmith Branch of the National Society for Mentally-Handicapped Children, and a local publican gave his usual most generous gifts.

Visits were made to the Centre by students from the Froebel Institute, the Avery Hill College of Education, University of London Institute of Education, Maria Grey College, St. Nicholas College and others. There were two long-term placements from Chiswick Polytechnic, and visits from nurses in local hospitals. In addition, 2 girls from Hammersmith High School and 1 from Fulham High School, all 6th formers, spent weekly visits as part of their studies. The London Boroughs' Training Committee sent a student one day a week for a six weeks' course.

Day Centre Until October, 1970, the Day Centre shared the premises at Emlyn Gardens with an Old Peoples' Luncheon Club, and catered for 25 patients. After that date, the Luncheon Club was rehoused and the Day Centre had the full use of the two rooms, kitchen, and toilet accommodation comprising the building. An additional store room was built, also a rest room, and it is anticipated that the number of patients able to attend will increase to 35, depending on the staffing situation.

The usual social training has continued as well as the contract work with two local firms. Four outings were paid to the West End, including two shows. The patients were given the money, paid their own fares and bought their own theatre tickets, but went as a party. Two outings were made to Hastings, and these were greatly enjoyed, as for many of them it was their only holiday in years.

A Hallowe'en Party was held and was attended by many ex-members who are now in employment.

The members of the Bishop Creighton Social Club also attended, and it proved to be a most successful evening. The Christmas Party was also well attended and enjoyed by all.

The number of patients who return to work remains at a high level, and credit must be taken for one patient who was successfully repatriated to Tanzania, where he is in regular employment and maintains contact with the staff and with other patients. Another patient was helped to return to Ireland.

Students from Hammersmith Hospital, Fulham Hospital, the Royal Masonic, and Banstead Hospitals, visited the Centre as well as social workers and social work trainees.

College Park Training Centre has 35 places and this year, for the first time, we accepted young male adults from Fulham Training Centre who had reached the age of 16 years, to fill 6 of the vacancies. The integration has been a great success, but cannot be extended further in the present premises until we have a male member of staff, and more suitable accommodation. The average daily attendance during the year ended 31st December, 1970, was 27. All trainees are from the London Borough of Hammersmith, with the exception of one girl from Camden.

One member of staff left in September to take up a post in another Borough, but was fortunately replaced after a short interval.

The trainees continue to do industrial work for the same local firms. Sewing gas mantles, assembling cheese boxes, and packing sandpaper,

sanding discs, and masking tape. They also continued with the laundry work for themselves, for two training centres, and for a local school. The formal education and art classes continue to be popular and the trainees are all making progress. As part of their social training they visit the local library in groups of four, paying their own fares. They also answer the telephone and take messages. During the Summer, the trainees had a very enjoyable coach outing to Westcliff, and at Christmas they again held their party in the evening. Even more parents than formerly attended, and it was voted a great success by all.

The Hammersmith and North London Branches of the National Society for Mentally-Handicapped Children again very generously gave gifts of money to the Centre. One of the firms which sends work to the Centre gave a bottle of soft drink to each trainee, and a four pound box of chocolates to be shared by staff and trainees at their Christmas lunch.

For the third year running the trainees entered the competition organised by the Flower Lovers' League, and this year they again won a silver-gilt medal for their daffodils in the Spring Competition; and for the first time they competed in the Summer Competition and won a silver gilt medal for their nasturtiums and candytufts, each trainee receiving an individual certificate, as well as the trophies. All plants are tended at home by the trainees until the day of the Competition, so this was a most commendable effort.

Groups of medical students, student nurses, trainee health visitors, and social work students again visited the Centre.

Training Centre Organised Holiday

Officers of the Council's Community Services again undertook the arrangements for the annual holiday for trainees of the Inner London area and Bromley, at St. Mary's Bay School Journey Centre, Dymchurch, from 1-15 May.

27 Hammersmith residents were included in the party of 235. This year, as previously, Mr. Potter, Supervisor of North Kensington Training Centre, led the party assisted by Mrs. Lee, Supervisor of College Park Training Centre.

There were 29 staff mainly from other Centres, but they included 3 mental health social workers and two voluntary workers. Thirteen of these came for 1 week only but the staffing ratio was good and, with the addition of 6 weekend volunteers, it was possible for staff to have sufficient time off.

The weather was dry and warm with only one wet morning, and this ensured that the barbecue was a great success. Coach outings were arranged to Folkestone, Rye, Canterbury, Hastings, and one to Lydd Airport where the trainees had trips in a Hovercraft which proved a most exciting experience. This year for the first time a Nature Hunt was introduced. It created great interest amongst trainees and staff, and the winning dormitory were given an evening meal in a local restaurant. The other dormitories were given ice creams as consolation prizes. There were no major casualties, only one minor sprain. Visits to the camp were paid by the Officers of the Inner London Boroughs which were sharing in the holiday. These visits are always appreciated by both staff and trainees.

Social Clubs A weekly social club continued to be held for patients attending Emlyn Gardens Day Centre and is run by the Day Centre staff. It is well supported by the patients and nearby residents.

A social club for former psychiatric patients was held weekly at Bishop Creighton House, run by Mental Health Social Workers and helped by volunteers from Bishop Creighton House. Patients are encouraged to arrange their own programme of activities, and on occasion the clubs have a joint entertainment.

Special Care Unit This Unit, which opened last year, has fulfilled a very great need, and the 15 places have all been taken up. There was a waiting list but this was absorbed due to varying factors, i.e. long-term placement of 2 children, one death, and two removals from the London Borough of Hammersmith.

At one point there was a rather rapid turnover of staff, but these were replaced with temporary staff until it was possible to recruit permanent staff. This was accomplished without too much delay and, by the end of the year, there was a full complement of staff.

The Unit caters for children with severe physical and mental handicaps and a few children with behavioural problems or emotional disturbance, who it is hoped will eventually be suitable for transfer to the Junior Training Centre.

Gifts of money and toys were received from the Hammersmith Society for the Mentally-Handicapped.

The Hammersmith Round Table were most generous with gifts of toys and play equipment - paddling pool, climbing frame, sand pit, swing, and trampoline.

At Christmas, the staff of Mecca Ltd. gave a party for the children, their parents, brothers and sisters and, at the end of a very enjoyable afternoon, the organisers presented the Supervisor with a cheque for £50 to be used for the benefit of the children.

Expansion of the Mental Health Services (Hostel for the Mentally Ill)

Approval has been given for suitable premises to be converted into a hostel for 8-10 residents and this work is now going ahead. This will be the first Hostel for the Mentally Ill in the London Borough of Hammersmith and, when completed, will fill a very great need.

Training Centre

Plans for an 80-place mixed Adult Training Centre have been approved for a site in Goldhawk Road, and the first stages of clearing the site are under way. The Centre will replace that at College Park, which is now quite inadequate; and will enable us to provide accommodation for our older boys who are at present attending a Training Centre outside the Borough.

STATISTICS FOR YEAR ENDING DECEMBER, 1970

Number of Referrals

Mentally Ill,	531
Subnormal/Severely Subnormal	57
	—
TOTAL	588

Number Initially Admitted to Hospital

Informally	77
Compulsorily	138
	—
TOTAL	215

Final Arrangements Made

No further action	226
Hospital Care	215
Community Care	147
	—
TOTAL	588

CHILDREN'S SERVICE

General

The Children's Service came into being as a result of the Children Act, 1948, which made it the duty of County and County Borough Councils, (and subsequently the London Borough Councils), to receive into their care any child in their areas under the age of 17 years whose parents or guardians were temporarily or permanently prevented from providing properly for him. The Act went on to require that an Authority having received a child into its care, had to exercise its powers so as to further his best interests and afford him opportunity for the proper development of his character. Other legislation provided that children could be committed to the care of the Authority by the Courts, either where children had been found guilty of offences, or where offences had been committed against them.

On 31st December, 1970, 689 children were in the care of the London Borough of Hammersmith. During the year some 2,000 applications had been made to the Children's Officer for children to be received into care; and the fact that a relatively small proportion had been received into care was a tribute to the quality and quantity of the work of the staff of the Children's Service. It also highlights the preventive work done by the staff of the Department under Section 1 of the Children & Young Persons Act, 1963. This Section makes it mandatory for Local Authorities to provide such advice, guidance, and assistance as may promote the welfare of children by diminishing the need for them to come into, or remain in, care; or to appear before a Juvenile Court; and the work done under this Section has provided a steadily increasing part of the work of the Children's Service.

The Borough Children's Service during 1970 suffered considerably from the loss of qualified and experienced staff and, for a considerable period in the middle of the year, the situation was such that the amount of preventive work which could be done was minimal. However, it was possible to obtain new staff, and although the proportion of qualified staff was lower at the end of the year than at the beginning, qualified recruits were by then coming forward and, with their colleagues, taking part in the reorganisation of the Social Work Services of the Council.

Under the Local Authority Social Services Act, 1970, the Council was required to set up by 1st April, 1971, a Social Services Department, which would undertake the work of the former Children's, Welfare, and Mental Health Services. In Hammersmith, Area Social Work Teams, (incorporating the social work staff of these disciplines), were in being early in 1970. The Children's Service functions were being carried out not only by Child Care Officers but increasingly as the year progressed by Social Workers from other disciplines, who were gradually broadening their horizons. In the same way, the Child Care Officers were, as case loads permitted and their own experience and knowledge allowed, expanding their work into the Welfare and Mental Health spheres. The growth of team spirit within the Area Teams, and the breakdown of the former barriers between the disciplines, has been one of the most encouraging aspects of the year 1970.

Medical Arrangements

(a) Before a child is boarded-out a full medical examination is undertaken, and the report is submitted to the Medical Officer of Health for approval that the child is fit to be boarded-out under the Regulations.

(b) During the boarding out, a child must be examined by a duly-qualified medical practitioner:

- (i) Within one month after being boarded-out, unless the child has attained the age of 2 years, and had been medically examined three months before being boarded-out; and
- (ii) At least once in every six months if he has not attained the age of 2 years, or at least once a year if he has attained that age.

The reports of subsequent medical examinations are not seen by a Medical Officer in the normal course of events, and would only be referred to the Medical Officer of Health if the Senior Child Care Officer and Child Care Officer who received the report were concerned about the child.

(c) Apart from these statutory requirements for medical examination and report, it is the duty of the Local Authority to ensure that adequate arrangements are made for a child boarded-out to receive medical and dental attention as required. This is dealt with by the Child Care Officer who, on her visit, would comment on the child's health, and be assured that in fact adequate arrangements had been made. This generally means that the child is registered with the same doctor as the foster parents, and there is usually no difficulty.

Child Protection - Children Act, 1958.

The purpose of this Act was to provide that children cared for, (for reward under private arrangements), were visited by child care staff to ensure their wellbeing. This Act was amended by the Children and Young Persons Act, 1969, to broaden the categories of children concerned, (e.g. children placed privately without a reward element now came within the scope of the Act); but the relevant part of the Act did not come into effect until 1st January 1970. Any person who undertakes the care of a child not a close relative is advised to give notice under this Act to the Director of Social Services as, in most cases, there is a legal requirement to do so.

There is no statutory requirement that a child should be medically examined on being placed with a private foster parent, but again it would be the responsibility of the visiting Child Care Officer to be assured, so far as was reasonable, that the child was being well-treated; and to advise if any medical attention appeared necessary.

There is the additional medical supervision given to all children under five by the Health Visitor under the Public Health Act, and this is followed by medical surveillance provided by the School Health Service.

Hammersmith Homes

The Borough maintains a number of Children's Homes including a Training Nursery and a Boys' Remand Home; but a large number of children in residential care are still cared for by arrangement in private homes, and in Homes provided by other local authorities and voluntary bodies. In most of these Homes considerable difficulty has been experienced in maintaining adequate staffing. However, a gradual review of the staffing of the Homes is being undertaken. In the Remand Home, the first establishment so reviewed, this led to an increase of staff with, hopefully, a reduction in the total hours of work. With other improvements in conditions, it is hoped that, in future, it will be more easy to maintain proper levels of staffing.

During the year approval was obtained for the construction of two new Children's Homes in the Borough, and also for the adaptation of some existing Council-owned premises. These three new establishments will provide for a total of 59 children in care.

Adoption

Hammersmith's Children's Service Adoption Agency began to function in January, 1966, with the appointment of an Adoptions Officer; and a part-time Child Care Officer, working mainly with the unmarried mothers, was subsequently added to the staff.

As private Adoption Agencies are free to choose the kind of child they will accept for placement and usually consider only babies with uncomplicated backgrounds, the Hammersmith Adoption Agency has tried to place children with more difficult backgrounds who would otherwise have had to be received into the Authority's care. The children placed often have poor medical, psychiatric, or social histories. A large proportion have parents of mixed races.

Because we have "difficult" children to place, we need to consider each prospective couple of likely adopters on their own merits. Hence we have no set rules regarding the eligibility of the adopters. We feel that the couple who comply with the legal requirements, have a stable and happy marriage which can expand to include adopted children, and offer love, and good care, make the most suitable adopters. In the past, adoption agencies tended to lay down stringent qualifications on the age, religious background, and the number of children already in a family. This does not mean we do not consider these factors; but we have widened our approach, so that our main consideration is the welfare and happiness of the child.

Adoption Agencies throughout the country have found that the number of children available for adoption has decreased as a result both of the wider availability of contraceptive measures, (specifically "the pill"), and the working of the Abortion Act. An additional factor in Hammersmith was that both our full-time and part-time officers left during 1970, so that the Agency was not functioning at all for a period. Excellent new staff were, however, appointed; but it seemed for a time as though the reasons mentioned above would result in there being insufficient adoption work fully to occupy them. However, they rapidly became known to the other social services in the area, and particularly to the medical-social workers in the local hospitals, and by the end of 1970, the volume of adoption work had gone back to its former level.

Reasons why children came into care

Death of mother)	
Deserted by mother)	124
Father not living with family or unable to cope)	
No parent or guardian)	1
Abandoned, deserted or lost)	17
Long-term illness of parent or guardian)	33
Temporary illness of parent or guardian)	66
Separation of married parents)	19
Separation of unmarried parents)	6
Homeless (not evicted))	13
Homeless (evicted from ordinary accommodation))	16
Homeless (evicted from Part III accommodation))	12
Child Illegitimate, mother unable to provide)	74
Unsatisfactory home conditions not included under other headings)	48
Other reasons under Children Act 1948)	96
Fit Person Orders (Offenders))	39
Fit Person Orders (Non-Offenders))	122
Section 6(4) Children Act 1948)	3
Total at 31st December 1970	<u>689</u>

Type of Placement:

At 31st December 1970	In Boro. Owned Estabs.	In Other Inner London Author. Owned Estabs.	In Inner London Educ. Author. Owned Estabs.	In Other Local Author. Owned Estabs.	In Private Estabs.	In Volun. Estabs.	Total
Reception Homes	3	5					8
Residential Nurseries	15	8		2	56	18	99
Small Family Homes	32	11				1	44
Other Children's Homes	41	36		4	47	110	238
Boarding Special Schools			22		1	2	25
Boarding Schools					10	8	18
Hostels		4		1	5	12	22
Home or Hostel for Handicapped Children					6		6
Mother and Baby Homes						1	1
PARTIAL TOTAL	91	64	22	7	125	152	461
Boarded-out in Hammersmith							44
Boarded-out outside Hammersmith							87
Residential Employment							3
Lodgings							18
C.Y.P.A. at Home							61
Others							15
TOTAL at 31.12.70							689

Central Registry

Central Registry is concerned with facts and figures; but only rarely do these facts and figures reflect a contact between members of the public and the staff of Central Registry itself. For the principle responsibility is to collect and collate details of work done by other officers; and then to present these details as either reports or statistics. So, if asked where Mary X lives, or if she is a child in care, or if the Council has any sort of responsibility for her, Central Registry will supply the answer; and, what is more, will tell you the number of Marys who are being helped or have been helped by the Health or Social Service Departments, and how they have been helped. Information about vacancies in residential homes or in day care centres is available for Social Workers, and many of the statistical returns for Government Departments are prepared in Central Registry.

Assessments

Following the re-organisation of the Health and Social Services in April, 1970, assessments are now controlled centrally.

Assessments for all services are being dealt with at the rate of approximately 5,500 per annum.

Protection of Property

Responsibility was accepted for protecting the moveable property of persons admitted to hospital or Residential Homes who were unable to act for themselves through age or infirmity, and who had no relative or friend able to act on their behalf. This duty involves the taking of inventories, notifying police and other interested persons, removal and storage, and disposal by sale or otherwise. Attention is given to correspondence and periodic visits made to the residence to ensure safe custody. Over 400 cases have been dealt with since 1965 of which 92 were dealt with in the past 12 months, 50% being on behalf of patients admitted to mental hospitals.

Receiverships

Under the direction of the Court of Protection a number of cases are dealt with where the persons have been declared incapable of managing their affairs. The number of cases during the past twelve months, dealt with by this Council is 15.

Liaison with Voluntary Bodies

Close liaison has been maintained with the many voluntary bodies in the Borough who have particular interest in those people who are also the main concern of the Community Services. There has been great goodwill and help which has achieved so much and thanks are due to the British Red Cross Society, the W.R.V.S., Bishop Creighton House, Family Welfare Association, and many others interested in the needs of the aged, blind, disabled and deaf.

Liaison with Government Departments

Close links have continued with the government departments whose work affects the social services. Special thanks are given to the local managers of the Department of Health & Social Security who have given every possible assistance.

Day Centres for the Elderly & Handicapped

The Centre at St. Vincent's caters for the elderly in need of constant care and their attendance provides families with a break once or twice a week. Facilities for hairdressing and bathing are provided and in the summer small groups are taken for short drives in the parks or country.

The Centre at Blythe Hall was also open daily to the handicapped who are able to learn handicrafts under the guidance of an Inner London Education Authority Instructress.

Luncheons and teas are served at both Centres.

Aids and Gadgets

As with the blind, the disabled were lent a large number of aids and gadgets e.g. pick-up sticks, toilet aids, walking trolleys, bath mats and many other safety devices. All these are loaned free of charge for as long as they are required.

Adaptations

A number of structural alterations and adaptations have continued to be made in the homes of disabled people to help them overcome their disabilities. These included the provision of ramps, sliding doors, special grab rails in kitchens, toilets and bathrooms. Hand rails in passageways and on staircases, and many other useful items have allowed the disabled to be as independent as possible.

Recuperative Holidays

Recuperative holidays in which the emphasis is on rest, good food and fresh air, are provided for adults including expectant mothers and children.

Arrangements for such holidays for school children are normally made by the Medical Adviser to the Inner London Education Authority, usually at one of the Authority's holiday homes. The holidays are provided on medical recommendations which are subject to the approval of the Medical Officer of Health.

The following table summarises arrangements made during the year (figures for 1969 are in brackets).

over...

TYPE OF CASE	ADMITTED TO THE HOMES in 1970	
Expectant Mothers	2	(3)
* Other Adults	111	(59)
School Children (unaccompanied)	293	(185)
Children under school age (accompanied)	10	(21)
TOTAL FOR THE YEAR:	416	(327)

* There were no tuberculous or psychiatric patients admitted for recuperative holidays in 1970.

LOAN OF HOME NURSING EQUIPMENT - 1970

Figures for 1969 are in brackets:

Commodes	286	(300)
Wheelchairs	81	(180)
Tripod Sticks	19	(10)
Fracture Boards	11	(16)
Penryn Hoists	15	(20)
Hydraulic Hoists	8	(6)
Walking Aids	85	(50)
Incontinence Pads		
& Parts -		
Deliveries	2,000	(1800)

Chiropody Services Annual Report, 1970.

The Council staff consists of a chief chiropodist responsible for the organisation of the service, a principal, six full-time, eleven sessional, and four domiciliary contractual chiropodists. It has a maximum establishment of fourteen full-time staff.

Statistical Summary

<u>Persons Treated</u>	<u>1970</u>	<u>1969</u>	<u>1968</u>
A. Aged 60 and over	5,458	4,197	4,462
B. Expectant Mothers	2	5	14
C. Others (Non-Priority)	524	917	1,033
	<u>5,984</u>	<u>5,119</u>	<u>5,509</u>
1. Total treatments	28,012	29,051	31,047
2. Domiciliary incl. in 1	3,607	3,795	3,067
3. " new cases	341	375	NOT KNOWN

Transport Strike

Although this was most distressing for the priority patients brought by Council car to the clinics, those considered a medical risk were transferred to the Domiciliary Service. Fortunately the weather remained mild and therefore less of a hazard to those suffering from circulatory disturbances, whose tissues are less able to withstand local trauma and resist general infection, and they are generally more prone to infection during the Winter months.

Additional Treatments

An urgent request for chiropody treatments was received from the extreme North of the Borough by the College Park Darby & Joan Club, N.W.10, and a service was arranged.

A number of patients during the year were transferred from St. Stephen's Hospital to our care and the closing of Princess Beatrice Hospital's Chiropody Department made additional calls on our service.

Charges

The only alteration in treatment charges took place on 1st December, 1970, when treatment fees for non-priority cases were increased from eight shillings to twelve shillings.

Appliance Laboratory

The provision of an Appliance Laboratory at the rear of the Chiropody Clinic, 706 Fulham Road, S.W.6., was completed early in the year.

It has already shown great advantages in the long-term management of foot disabilities by maintaining comfort and mobility for the patients.

The frequency of clinical attendance has been reduced, with a consequent saving of clinical time, thus enabling more persons to receive treatment.

Staff Meetings

Quarterly In-Service Training Chiropody Staff Meetings were introduced which proved an unqualified success, and were invaluable in fostering and maintaining the team spirit without which no successful service can be run.

Equipment

The introduction of an electrically-operated hydraulic chair at the Chiropody Clinic, 2-6 Fulham Broadway, S.W.6. has proved of great benefit to the physically-handicapped attending for treatment.

Conclusion

The Chiropodist has an enormous part to play in the Health Service. Firstly, he has to convince the chronically sick, physically-handicapped, and elderly patients that they are not a "Bother" to society, and by his treatments see that permanent relief and cures are obtained.

It is hoped, in the near future, to concentrate on the subject of Foot Health Education. So far the London Boroughs seem to have lost sight of this important factor, and lagged behind the medical and dental professions in this subject. Fortunately, chiropodists have the determination and ability to meet the demands of this necessity.

Future Projects

Work has begun on a new 60-bed Residential Home for the Elderly at Farm Lane, Fulham, and it is hoped to start work on a similar 40-bed Residential Home at Goldhawk Road, Hammersmith, early next year. Both these will lead to the closure of Kings Mead, a former Public Assistance Institution.

Plans have been agreed with the Housing Committee for a development of flats for the severely-disabled; and for 160 units of Sheltered Housing for the Elderly.

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