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BOROUGH OF BEXLEY

Annual Report
of the
Medical Officer of Health
and
Report on the
School Health Service
For the Year 1951

JOHN LANDON, M.R.C.S., L.R.C.P., D.P.H.

Medical Officer of Health







BOROUGH OF BEXLEY

Annual Report
of the

Medical Officer of Health

For the Year 1951

JOHN LONDON, M.R.C.S., L.R.C.P., D.P.H.

Medical Officer of Health

Borough of Bexley.

Mayor: Councillor J. D. Vergette, J.P.

Deputy Mayor: Councillor P. R. Relph.

HEALTH COMMITTEE.

Chairman: Alderman R. G. Broomfield.

Vice-Chairman: Alderman H. P. Tanner, C.C.

Alderman J. C. McLean, J.P.	Councillor H. C. Crawford.
Alderman Mrs. A. Welch.	Councillor J. D. Vergette, J.P.
Councillor M. J. Corr.	Councillor Mrs. H. F. Piggott.
Councillor E. S. Newton.	Councillor Miss R. A. F. Taylor.

PUBLIC HEALTH STAFF, 1951.

Medical Officer of Health ... John Landon, M.R.C.S.,
L.R.C.P., D.P.H.

(Joint appointment with Borough of Erith and
U.D. Crayford).

Chief Sanitary Inspector, Public *† G. Hind, M.S.I.A.
Cleansing Officer and Shops
Acts Inspector.

Deputy Chief Sanitary Inspector *† J. T. Boocock.

District Sanitary Inspectors ... *† F. W. Willington.
*† G. F. Lovegrove.
*† W. E. Moses

Chief Clerk ... G. A. Pearson.

Senior Clerk ... R. V. Hoad.

Clerks ... E. M. Pearmine (Miss).
M. E. Smith (Miss) (Shorthand
Typist).
E. Patten (Miss) (temporary
Shorthand Typist, Jan-Sept.
1951).

Public Analyst ... M. E. Monk, B.Sc., F.R.I.C.

* Certificate for Inspection of Meat and other Foods.

† Certificate of Royal Sanitary Institute and Sanitary Inspectors'
Joint Board.

ANNUAL REPORT of the MEDICAL OFFICER OF HEALTH

*To the Mayor, Aldermen and Councillors
of the Borough of Bexley.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1951.

The vital statistics of the Borough are, broadly, satisfactory and present a number of interesting features. The birth rate during 1951 was 12.79 per thousand of the home population compared with 13.13 per thousand in 1950, 14.02 in 1949, 15.36 in 1948, 18.72 in 1947, 19.75 in 1946, 18.81 in 1945 and 21.06 in 1944. Between 1931 and 1944 the lowest birth rate recorded was 15.88 (1941) and so it will be seen that the increase in the birth rate towards the end of the war has not been maintained and the birth rate in fact shows an accelerated rate of decline which, in general, follows the trend in the birth rate for the country as a whole, although the birth rate for Bexley is appreciably lower than the national rate (15.5). There is a number of possible explanations. Firstly, the housing position is a major deterrent to young married people to start a family. Added to this there is the high cost of living, including the high cost of setting up a home.

The birth rate for the Borough corrected by the use of the Registrar General's comparability factor (0.94) was 12.02. Between the two wars the birth rate of Bexley was higher than that for the country as a whole, the reason no doubt being that the rapid development of the town attracted a young type of resident. The Borough has now practically reached saturation point in regard to the building of houses and it would appear that young people are tending to seek accommodation in other districts or deferring the date of starting a family.

Bearing in mind the low death rate which we enjoy, nowadays, and the fact that the level of the population is being maintained only by the fertility of the past, two things are obvious; firstly that the number of old people must increase and secondly (seeing that we are all mortal) the death rate must be expected to rise and the population stabilised at a lower level based on present day fertility factors.

The death rate for the Borough, during 1951, was 9.6 compared with 8.56 for 1950, or, after correction by means of the comparability factor for deaths (1.18), 11.33 compared with an uncorrect death rate for the country as a whole of 12.5.

The infant mortality rate for 1951, at 24.76 per thousand live births, was considerably higher than the record low rate for 1950, namely, 14.48. The number of babies who died in the first year of life per thousand live births, during 1951, was 28 compared with 17 in 1950. The percentage of children dying during the first month of life (neo-natal deaths) was, roughly, the same as in 1950 but there was a marked increase, in 1951, in the number of deaths from bronchitis and pneumonia, namely, 10 compared with 3 in 1950. These diseases are, *prima facie*, preventable and demonstrate, notwithstanding the record low rate for 1950, the need for further improvement in environmental conditions and standards of maternal care. Nevertheless the rate for 1951 compares favourably with a rate of 29.6 for the country as a whole. It is necessary to point out that the trend of infant mortality in a district such as this, based as it is on a relatively small number of deaths, must not be judged by small annual fluctuations which may be due to fortuitous circumstances, but over a period of years and by this criterion our figures are very satisfactory.

There were no maternal deaths during the year which reflects credit on the local midwifery services, bearing in mind the fact that there were 1,131 live births during the year, in addition to 21 still births.

The incidence of infectious disease within the Borough continued to be very low. No case of diphtheria was notified for the second year in succession. Although this is eminently satisfactory, there is an implied danger in the freedom from this disease in that the young mothers of to-day have never seen a child with diphtheria or heard of a child recently dying from this cause. There is a noticeable tendency for diphtheria immunisation to be neglected in many cases. It cannot be too strongly stressed, however, that our present freedom from this disease is dependent on a continued high level of immunisation of young children as a group and parents should realise that they have both a public and a private duty to perform in this matter.

Although there were 2,209 cases of measles there was only one death from this cause. 440 cases of whooping cough were notified without a single death. These two

diseases, with the exception of tuberculosis, are the two most important infectious diseases experienced at the present time, leaving out for the moment the unpredictable incidence of poliomyelitis.

Constant vigilance has to be exercised in regard to the prevention of smallpox. As a result of the Brighton epidemic in 1950/51, 22 contacts were traced to this area and vaccination was carried out by the Health Department in most cases and intensive supervision exercised during the danger period. On two other occasions ships arrived in nearby ports carrying a case of smallpox and contacts were traced to this area. Vaccination was carried out wherever necessary and the appropriate surveillance exercised.

During 1951, 37 cases of paratyphoid fever occurred in an area covering adjacent London boroughs and districts in Kent and Sussex. The cause of the outbreak was judged to be synthetic cream supplied from a food establishment in a neighbouring district. Some of the cases occurred in the Borough of Bexley, an extensive investigation developed and it is likely that the control measures which were instituted prevented a more widespread epidemic. In addition to these cases, 7 cases of food poisoning were notified during the year.

Generally speaking the infectious diseases which took such a heavy toll of life and health in the past have diminished in importance but continued vigilance is needed as some change in the natural history of the organisms or some lowering of individual resistance in peace or in war may precipitate a return to former conditions.

Tuberculosis remains the most important of the infectious diseases which are encountered. It is a tragedy that this disease which is preventable is not being prevented. It presents a medico-social problem of great complexity, a description of which is outside the scope of this foreword. I would emphasise one aspect, however, which demands immediate attention, namely, the discharge from sanatorium to their own homes of open, i.e. infectious, cases when their continued stay in hospital can no longer be of benefit to them. These frequently chronic cases are responsible for a good deal of mischief and our powers under the Public Health Act to control this source of infection are inadequate in that such patients may only be compulsorily removed to hospital provided suitable accommodation is available for them.

The report of the Central Health Services Council for the year ended December 31st, 1950, recognises that "this is a potent source of infection" and recommends "that for chronic infectious patients who are ambulant it is desirable to provide hostels affording domiciliary care and medical supervision."

In my view an anomalous position has arisen in regard to the domiciliary tuberculous patient. The presence of a tuberculous person in a household is often regarded by the Housing Committee, and rightly so, as grounds for the rehousing of the patient or of a second family, especially if it includes young children, who are occupying the same premises. It would, perhaps, be more efficacious and less costly to remove the source of infection to suitable hospital or other accommodation.

The care of old people living alone is becoming more and more the responsibility of the Health Department. Under Section 47 of the National Assistance Act, 1948, as amended by the National Assistance (Amendment) Act, 1951, it is the responsibility of the local authority to take appropriate action in the cases of persons "who are suffering from grave chronic disease or being aged and infirm or physically handicapped are living in insanitary conditions and are unable to devote to themselves, and are not receiving from other persons, proper care and attention." The effects of the ageing of the population are now being felt in the increase of such cases. Old people are often discovered to be living in conditions grotesque from the point of view of loneliness and the absence of even the lowest standards of comfort, care and cleanliness. These old people are nearly always infirm to a greater or lesser extent and I would like to express my appreciation of the help which is so readily forthcoming from the officers of the Woolwich Group Hospital Management Committee who do their best under difficult circumstances to find accommodation for these urgent cases.

The affiliation of the local Elderly People's Welfare Committee to the North West Kent Old People's Welfare Committee, operating under the North West Kent Council of Social Service, has now taken place and the experiment is being tried of appointing district liaison officers somewhat on the lines of the Tuberculosis After-Care Committee. The work of the new Committee will be, firstly, to ascertain on a Ward basis the old people needing additional care, to co-ordinate the work of all agencies providing for the care of old people and to

afford to the latter a wide range of good neighbourly services. One of the added functions will be the raising of funds from various charitable sources and the assistance of old people, in suitable cases, by small monetary grants or their equivalent in food and other requirements needed for their comfort. Although the state is now responsible for a wide range of statutory services for old people, it is considered essential that each local community should interest itself in the deprived old people who are living in their midst.

The joint Clean Food Campaign with Erith and Crayford goes forward slowly but steadily and good progress has been made in what is essentially a long term health education project. In May, 1951 a clean food exhibition was held and was reasonably well supported by the general public. Organised parties of school children from the three areas visited the exhibition and lectures and film shows were given. Codes of Practice have now been formulated for all the main food trades and applications for membership have been received from 98 food traders, of which 19 have been approved to date. There is still a great deal of work to be done in this sphere during the next few years to bring into membership the majority of the food traders in the area. An attractive plaque has now been prepared which, we hope, will become more and more familiar to the public as it appears in increasing numbers in the windows and on the premises of food establishments of the Borough.

The prevention of accidents in the home is being recognised more and more as coming within the realm of preventive medicine and therefore a legitimate field of endeavour for the public health authorities. This matter can best be dealt with by a partnership of local health authority, local authority and the local Road Safety Committees, whose functions could be enlarged to cover by means of a sub-committee this important part of the work of accident prevention in general. Preliminary steps to achieve this end have been taken locally and it is hoped that further developments will take place during 1952.

The research into the epidemiology of health which has been carried out by the Kent Paediatric Society, through the Bexley Health Department, in connection with Bexley school children, during the past three years, is progressing well and is now entering its final stages. It is hoped that a report will be published about the end of 1952.

During 1951 the public mortuary was enlarged and equipped with refrigeration for six bodies. It will also be used by Erith and Crayford Authorities by arrangement with the Bexley Borough Council.

I wish to thank the members of the Health Committee for their support and encouragement and the Chief Sanitary Inspector, the Chief Clerk and all members of the Health Department for their devotion to duty at all times during the year.

I am,

Your obedient servant,

JOHN LANDON,

Medical Officer of Health.

SECTION A.—STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH.

Area.

4,869 acres.

Population.

Registrar General's
Estimate mid-
year, 1951 ... 88,420

New Dwellings Erected.

Houses 319

Relative figures for previous years.

Population—Mid-Year.

New Houses Erected.

1931 (Census)	...	33,150	1,165
1939	...	80,110	1,002
1940	...	77,670	113
1941	...	72,080	Nil
1942	...	77,020	5
1943	...	76,740	5
1944	...	71,130	Nil
1945	...	75,040	2
1946	...	85,820	82 + 64 rebuilt.
1947	...	87,670	199 + 216 rebuilt.
1948	...	88,920	334 + 286 rebuilt.
1949	...	89,270	138 + 73 rebuilt.
1950	...	89,410	102 + 15 rebuilt.

Number of inhabited houses at end of 1951
(according to Rate Books) approximately 26,038

Rateable Value £652,783

Sum represented by a penny rate £2,611

Unemployment.

	Men	Women	Boys	Girls	Total
December 31st, 1950	275	76	6	18	375
December 31st, 1951	191	100	22	18	331

Social Conditions and Amenities.

The Borough of Bexley continues to be a healthy residential district and is specially favoured in that it has ample open spaces and recreational facilities for its inhabitants. Like other districts, however, that suffered severe bombing during the war, and whose population is tending all the time to increase, housing shortages, at present, constitute the main barrier to health for a relatively large number of its citizens. The housing programme is being accelerated as much as possible and it can only be hoped that, as the momentum increases, the housing position of the Borough will gradually reach the optimum standards for which the Council are striving.

The Corporation supplied the district with electricity until the date of transfer of this service to the London Electricity Board, and the South Eastern Gas Board supplies gas.

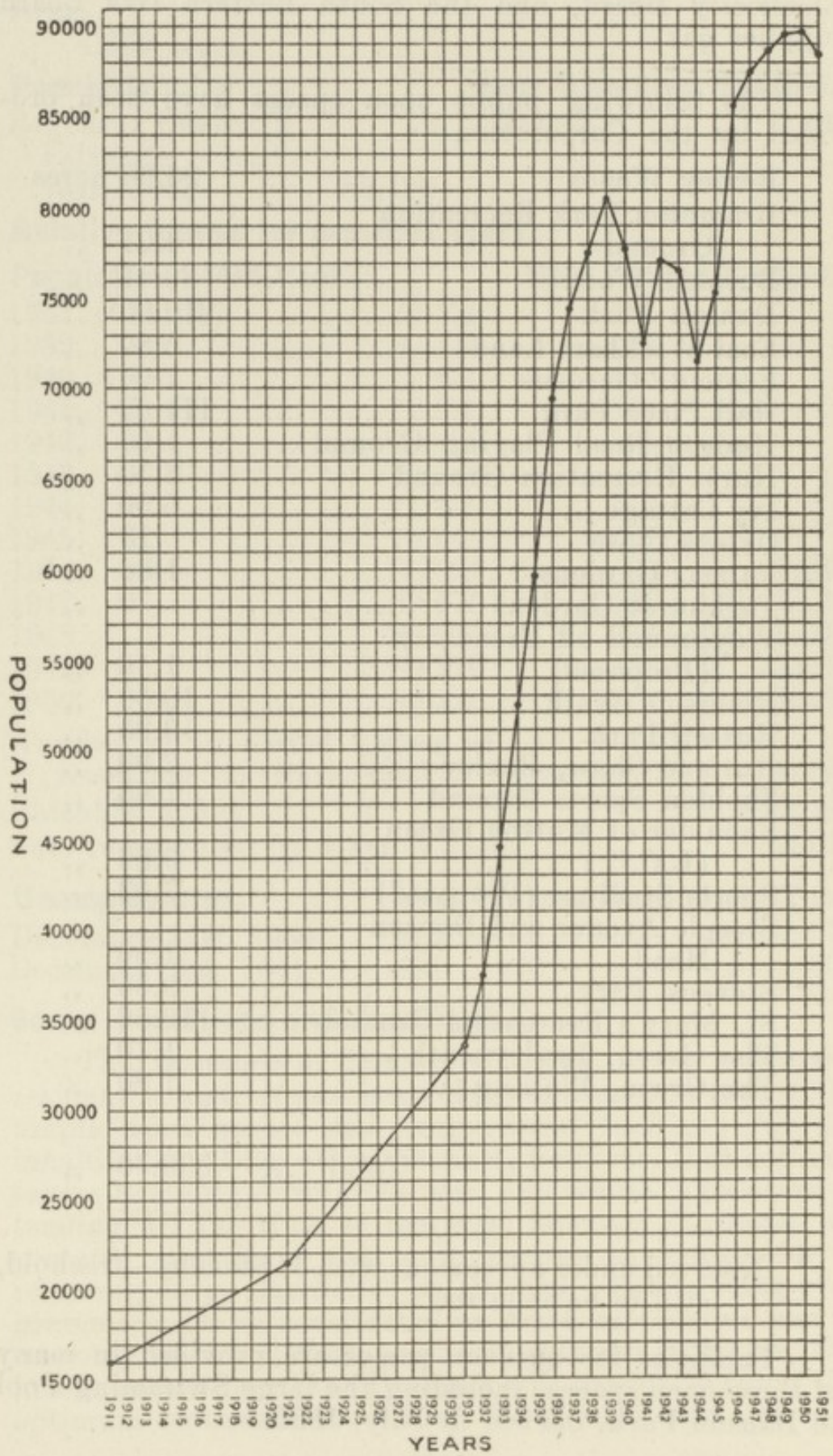
The following public open spaces have been provided by the Corporation:—

Bexley Woods	...	...	26.00	acres
Brampton Park Recreation				
Ground	...	...	4.21	„
Bursted Wood	...	...	30.47	„
Danson Park	...	...	210.00	„
East Wickham Land	...	...	6.80	„
Eastcote Gardens	...	...	1.00	„
Hall Place Park	...	...	171.32	„
Hudson Road Playing Ground	...	...	1.60	„
Hurst Recreation Ground	...	...	3.50	„
Ivy Cottage	...	...	6.50	„
Oxleas Close	...	...	.13	„
Palmar Gardens	...	...	1.30	„
Parkhurst Gardens	...	...	.70	„
Playground off Broadway				
(Proposed)	...	...	1.16	„
Riverside Walk	...	...	10.50	„
Russell Park	...	...	13.25	„
Rutland Shaw, Bexley	...	...	2.90	„
Sheldon Sports Ground	...	...	7.66	„
Shoulder of Mutton Green				
(L.C.C.)	...	...	3.86	„
Sports Stadium (Proposed)	...	...	7.03	„
Steeple Avenue and Danson				
Mead	...	...	1.50	„
* Stevens Park	...	...	9.55	„
St. Mary's Recreation Ground	...	...	12.86	„
The Green, Bexleyheath	...	...	1.10	„
The Green, Welling	...	...	1.80	„
Total			536.70	„

* Reserved under agreement with J. Stevens—freehold, still to be acquired.

Facilities for outdoor games are provided in many of these open spaces, including the large Swimming Pool in Danson Park, opened in July, 1936.

GRAPH SHOWING RISE IN POPULATION
SINCE 1911



SUMMARY OF VITAL STATISTICS

	England and Wales.	126 County Boro's and Great Towns including London.	148 Smaller Towns Resident Populations 25,000 to 50,000 at 1931 Census.	London Adminis- trative County.	Borough of Bexley.
Births—	Rates per 1,000 Home Population.				
Live	15.5	17.3	16.7	17.8	12.79
Still	0.36	0.45	0.38	0.37	0.24
Deaths—					
All Causes... ..	12.5	13.4	12.5	13.1	9.6
Typhoid and Para- typhoid	0.00	0.00	0.00	—	—
Whooping Cough... ..	0.01	0.01	0.01	0.01	—
Diphtheria	0.00	0.00	0.00	0.00	—
Tuberculosis	0.31	0.37	0.31	0.38	0.28
Influenza	0.38	0.36	0.38	0.23	0.09
Smallpox	0.00	0.00	0.00	—	—
Acute Poliomyelitis (including Polio- encephalitis	0.00	0.01	0.01	0.00	—
Pneumonia	0.61	0.65	0.63	0.61	0.42
Notifications(corrected)					
Typhoid Fever	0.00	0.00	0.00	0.01	—
Paratyphoid Fever	0.02	0.03	0.02	0.01	0.02
Meningococcal Infection	0.03	0.04	0.03	0.03	—
Scarlet Fever	1.11	1.20	1.20	1.10	1.14
Whooping Cough... ..	3.87	3.62	4.00	3.11	4.98
Diphtheria	0.02	0.02	0.03	0.01	—
Erysipelas... ..	0.14	0.15	0.12	0.15	0.19
Smallpox	0.00	0.00	0.00	—	—
Measles	14.07	13.93	14.82	14.64	24.98
Pneumonia	0.99	1.04	0.96	0.72	0.41
Acute Poliomyelitis (Including Polioen- cephalitis)					
Paralytic	0.03	0.03	0.03	0.02	0.02
Non-Paralytic	0.02	0.02	0.03	0.02	—
Food Poisoning	0.13	0.15	0.08	0.23	0.08
Deaths	Rates per 1,000 Live Births.				
All causes under one year of age	29.6(a)	33.9	27.6	26.4	24.76
Enteritis and Diar- rhœa under two years of age	1.4	1.6	1.0	0.7	—
Notifications(corrected)	Rates per 1,000 Total (Live and Still) Births.				
Puerperal fever and Pyrexia	10.66	13.77	8.08	14.90	6.08

(a) Per 1,000 related live births.

A dash (—) signifies that there were no deaths.

Maternal Mortality in England and Wales.

Intermediate List No. and cause	Number of Deaths	Rates per 1,000 Total (Live and Still) Births	Rates per million women aged 15-44
A115 Sepsis of pregnancy, childbirth and the puerperium	70	0.10	—
A116 { Abortion with toxæmia	3	0.00	0
Other toxæmias of preg- nancy and the puerperium	167	0.24	—
A117 Hæmorrhage of pregnancy and childbirth	91	0.13	—
A118 Abortion without mention of sepsis or toxæmia ...	37	0.05	4
A119 Abortion with Sepsis ...	66	0.09	7
A120 Other complications of pregnancy, childbirth and the puerperium ...	125	0.18	—

EXTRACTS FROM VITAL STATISTICS FOR THE Year 1951.

The Registrar General's Estimate of home population for the mid-year is 88,420 and this figure is assigned for the purpose of calculation of all rates.

Births.	Males	Females	Total
Live Births—Total	573	558	1,131
Legitimate	549	532	1,081
Illegitimate	24	26	50

Birth Rate.

Rate per 1,000 estimated home
population 12.79

The following relates to the Birth Rate during the
past ten years:—

1941	Birth Rate	15.88	per thousand
1942	„ „	19.07	„ „
1943	„ „	18.03	„ „
1944	„ „	21.06	„ „
1945	„ „	18.81	„ „
1946	„ „	19.75	„ „
1947	„ „	18.72	„ „
1948	„ „	15.36	„ „
1949	„ „	14.02	„ „
1950	„ „	13.13	„ „

Rate per 1,000 for	England and Wales, 1951	15.5
„ „ „ „	County Boroughs and Great Towns, including London	17.3
„ „ „ „	Smaller Towns (estimated population 25,000 to 50,00 at Census, 1931)	16.7
„ „ „ „	London Administrative County	17.8

50 illegitimate live births were registered against 54 in 1950.

The Registrar-General has supplied a comparability factor for 1951. The standardised birth rate which allows for comparison with other parts of the country is 12.02.

Stillbirths.	Males	Females	Total
Total	8	13	21
Rate per 1,000 total (live and still) births		18.23	

The following relates to the Stillbirth Rate during the past ten years:—

Year	Rate per Thousand	
	Total Live and Still Births	Population
1941	29.6	0.48
1942	25.2	0.49
1943	20.5	0.37
1944	19.0	0.42
1945	21.4	0.41
1946	23.6	0.48
1947	21.5	0.41
1948	21.5	0.34
1949	31.01	0.45
1950	11.78	0.16

21 Stillbirths were registered during the year. This represents a rate of 0.24 per 1,000 population against 0.16 per 1,000 population in 1950.

Rate per 1,000 for England and Wales, 1951	0.36
„ „ „ „ County Boroughs and Great Towns, including London	0.45
„ „ „ „ Smaller Towns (estimated population 25,000 to 50,000 at Census, 1931)	0.38
„ „ „ „ London Administrative County	0.37

There was 2 stillbirths registered as illegitimate.

Deaths.	Males	Females	Total
All causes	457	392	849
Death rate per 1,000 of estimated home population		9.6	
Number of women dying in, or in consequence of, childbirth:			
From Puerperal and Post Abortive Sepsis		—	
From other Puerperal Causes		—	
Death rate per 1,000 total (live and still) births		—	
Deaths of Infants under one year			
of age	10	18	28
Legitimate	9	17	26
Illegitimate	1	1	2
Death rate of Infants under one year of age:			
Total per 1,000 live births ...		24.76	
Legitimate per 1,000 legitimate live births		24.05	
Illegitimate per 1,000 illegitimate live births		40.0	
Deaths from Measles (all ages)	1	—	1
„ „ Whooping Cough (all ages) ...	—	—	—
„ „ Diarrhoea (under 2 years of age) ...	—	—	—
„ „ Cancer (all ages)	89	70	159

Death Rate of Country :—

Rate per 1,000 for England and Wales, 1951	12.5
„ „ „ „ County Boroughs and Great Towns, including London	13.4
„ „ „ „ Smaller Towns (estimated population 25,000 to 50,000 at Census, 1931)	12.5
„ „ „ „ London Administrative County	13.1

Death Rate of Area during last ten years :—

1941	... ..	9.68 per thousand.
1942	... ..	8.73 „ „
1943	... ..	9.21 „ „
1944	... ..	10.20 „ „
1945	... ..	9.28 „ „
1946	... ..	8.55 „ „
1947	... ..	9.17 „ „
1948	... ..	7.53 „ „
1949	... ..	8.15 „ „
1950	... ..	8.56 „ „

The rate for Bexley compares favourably with that for other parts of the country. The Registrar-General has supplied a comparability factor for 1951. The standardised death rate which allows for comparison with other parts of the country is 11.33.

**CAUSES OF DEATH IN THE BOROUGH.
REGISTERED DURING THE YEAR 1951.**

Causes of Death.				M.	F.	Total
	All Causes	...	...	457	392	849
1	Tuberculosis, respiratory	...	...	16	5	21
2	Tuberculosis, other	...	...	3	1	4
3	Syphilitic disease	...	...	1	—	1
4	Diphtheria	...	...	—	—	—
5	Whooping Cough	...	...	—	—	—
6	Meningococcal infections	...	...	—	—	—
7	Acute poliomyelitis	...	...	—	—	—
8	Measles	...	...	1	—	1
9	Other infective and parasitic diseases	...	...	—	1	1
10	Malignant neoplasm, stomach...	...	...	16	8	24
11	Malignant neoplasm, lung, bronchus	...	...	32	8	40
12	Malignant neoplasm, breast	...	...	—	20	20
13	Malignant neoplasm, uterus	...	...	—	5	5
14	Other malignant and lymphatic neoplasm	...	...	41	29	70
15	Leukaemia, aleukaemia	...	...	—	3	3
16	Diabetes	...	...	1	4	5
17	Vascular lesions of nervous system	...	...	49	61	110
18	Coronary disease, angina	...	...	69	33	102
19	Hypertension with heart disease	...	...	12	19	31
20	Other heart disease	...	...	58	73	131
21	Other circulatory disease	...	...	15	17	32
22	Influenza	...	...	3	5	8
23	Pneumonia	...	...	23	14	37
24	Bronchitis	...	...	46	22	68
25	Other diseases of the respiratory system	...	...	8	2	10
26	Ulcer of stomach and duodenum	...	...	8	3	11
27	Gastritis enteritis and diarrhoea	...	...	—	—	—
28	Nephritis and nephrosis	...	...	6	3	9
29	Hyperplasia of prostate	...	...	6	—	6
30	Pregnancy, childbirth, abortion	...	...	—	—	—
31	Congenital malformations	...	...	1	6	7
32	Other defined and ill-defined diseases	...	...	29	44	73
33	Motor vehicle accidents	...	...	5	—	5
34	All other accidents	...	...	6	6	12
35	Suicide	...	...	2	—	2
36	Homicide and operations of war	...	...	—	—	—

INFANT MORTALITY, 1951

DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER 1 YEAR OF AGE.

These relate to deaths occurring in 1951 but not necessarily registered in that year.

CAUSES OF DEATH AS CERTIFIED.	DAYS												MONTHS											
	0	1	2	3	4	5	6	7	14	21	28	2	3	4	5	6	7	8	9	10	11	12		
Congenital Malformation, Premature Birth, Birth Injury, etc. ...	2	3	1				1	2	2															
Anencephaly ...	1																							
Asphyxia from inhalation of internal fluid	1																							
Asphyxia ...			1																					
Pneumonia ...								1				2	2	1				1						
Erythroblastosis Foetalis ...	2	1																						
Anoxia ...	1																							
Heart Failure and Bronchitis ...									1															
T.B. Meningitis ...																		1						
Acute Laryngo Tracheo Bronchitis... ..												1												
Totals ...	7	4	2	—	—	—	1	3	3	—	—	3	2	1	—	—	—	2	—	—	—	—		

The number of infants under one year of age who died during the year 1951 as shown by the table is 28. 20 of these deaths, that is 71.43 per cent., occurred in the neonatal period (within one month of birth). In 1950 the corresponding figure was 76.47 per cent.

28 were registered during the year giving an infantile mortality rate per 1,000 live births of 24.76.

Rates over previous years have been:—

1941	...	...	35.4	per 1,000 live births			
1942	...	...	32.7	„	„	„	„
1943	...	...	26.01	„	„	„	„
1944	...	...	31.37	„	„	„	„
1945	...	...	33.9	„	„	„	„
1946	...	...	29.5	„	„	„	„
1947	...	...	28.6	„	„	„	„
1948	...	...	19.03	„	„	„	„
1949	...	...	24.0	„	„	„	„
1950	...	...	14.48	„	„	„	„

Maternal Deaths.

There were no maternal deaths during the year.

Rates over previous years have been:—

1941	...	...	2.77	per 1,000 live and stillbirths			
1942	...	...	1.32	„	„	„	„
1943	...	...	1.44	„	„	„	„
1944	...	...	1.30	„	„	„	„
1945	...	...	nil	„	„	„	„
1946	...	...	1.73	„	„	„	„
1947	...	...	1.19	„	„	„	„
1948	...	...	Nil	„	„	„	„
1949	...	...	0.78	„	„	„	„
1950	...	...	0.84	„	„	„	„

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH.

Isolation Hospital Accommodation.

This had been available in the past at the Bow Arrow Hospital of the Dartford Joint Hospital Committee of which the Council was the largest contributing member. With the transfer of the Hospital to the Regional Hospital Board on 5th July, 1948, the Joint Hospital Committee became redundant and there is now no control of this Hospital by the Local Authority. Patients suffering from infectious disease are now admitted to hospitals controlled by the Woolwich and Dartford Hospital Management Committees.

General Hospitals.

Provisions made by S.E. Metropolitan Regional Hospital Board.

AMBULANCE FACILITIES.

The provision of these facilities now rest with the Kent County Council as Local Health Authority.

NATIONAL ASSISTANCE ACT, 1948.

Action taken under Section 47.

It was not necessary during the year under review to take statutory action under this Section owing to the removal of patients by voluntary co-operation.

PUBLIC MORTUARY.

The Public Mortuary which is maintained by the Corporation, is situated on land at the south side of the Council Offices.

During the year it was used on 137 occasions and 132 post-mortem examinations were made. 16 inquests were held.

LABORATORY FACILITIES.

Pathological and bacteriological work for the area is carried out at the County Hall, Maidstone, through the Public Health Laboratory Service.

Registration of Nursing Homes, Public Health Act, 1936.

(Authority of Registration transferred from Kent County Council to the Bexley Borough Council—17.4.39).

No. of Homes on the Register at beginning of year	5
No. of patients provided for:—	
Maternity	5
Others	63
	<hr/>
Total ...	68
No. of Homes first registered during year	—
No. of patients provided for:—	
Maternity	—
Others	—
	<hr/>
Total ...	—
No. of Homes on the Register at end of year	5
No. of patients provided for:—	
Maternity	5
Others	63
	<hr/>
Total ...	68
No. of inspections made during year	12

SECTION C.

SANITARY CIRCUMSTANCES OF THE BOROUGH.

List of Adoptive Acts, etc., in force.

Acts.	Date Adopted.
Public Health Acts (Amendment) Act, 1890	
Parts 1, 2, 3 and 5	Apr. 1891
Infectious Diseases (Prevention) Act, 1890	Apr. 1891
Public Libraries Act, 1892-1919	Oct 1893
Private Street Works Act, 1892	Jan. 1899
Public Health Acts Amendment Act, 1907,	
Parts 8 and 9	Apr. 1909
Part 2—the whole	May 1909
„ 4—Secs. 53 and 54	
„ 6—the whole	
„ 10—Sec. 95	
Public Health Act, 1925, Part 2	Jan. 1926
Slaughter of Animals Act, 1933	Jan. 1934

Byelaws.

Wireless Loudspeakers, Gramophones, etc.	Mar. 1939
Fouling by Dogs of Footways	July 1938
Baths, Wash-houses, Swimming Baths and	
Bathing Places	Aug. 1938
Parks and Pleasure Grounds	May 1939
Building	June 1939
Defacing of Pavements	Nov. 1939
Deposit of Litter to the Detriment of Public	
amenities	„
Deposit of Dangerous Substances	„
Organs	„
Loitering at Church Doors	„
Indecent Language, etc.	„
Noisy Hawking	„
Touting	„
Noisy Animals	„
Violent Behaviour, etc. on School Premises	„
Nursing Homes	June 1940
Sale of Contraceptives in Slot Machines ...	Dec. 1949
Handling, Wrapping and Delivery of Food	
and Sale of Food in the Open Air ...	May 1950

The Byelaws relating to: Cleansing of Earth Closets and Cesspools; Common Lodging Houses; Hop Pickers' and Fruit Pickers' Lodgings; Cleansing of Privies; Removal of Offensive and Noxious Matters; Nuisances; Offensive Trades (Fish Frying); Tents, Vans, Sheds, and Similar Structures; Lodging (Housing Act, 1925) Sec. 6; New Streets and Buildings adopted 1927; New Streets and Buildings adopted 1931 and Slaughterhouses; lapsed in 1940 as under the Borough Charter of 1937 all Byelaws then in existence had to be re-made within three years of October, 1937. Application was made to the Ministry of Health for renewal of certain of the lapsing Byelaws which it was deemed necessary to have in effect, but in view of the war the Minister refused to sanction the proposed Byelaws put forward.

No recent application has been made for renewal, but it may be necessary in the near future to endeavour to obtain the Ministry's approval to Byelaws with regard to nuisances.

1. (i) **Water Supply.**

The supply to Bexley district is derived from several sources, namely, Wilmington, Darenth, Wansunt, Crayford, Bexley and Deptford wells, and Thames-derived filtered water. All the water is chlorinated as it leaves the works.

Bacteriological analyses are made five times per week of all supplies and, as in 1950 completely satisfactory results have been obtained. In the case of the well supplies the water is sampled both before and after chlorination. Water derived from the River Thames is sampled at each stage of the purification process. Tanks to provide an adequate period of contact of the chlorine with the water are now in operation at Wilmington, Crayford, Bexley and Deptford.

All new and repaired mains are chlorinated before being restored to use and samples of water from them are tested bacteriologically.

The examination of samples of water from piped supplies to houses at least monthly has given the following results:—

Bacteriological.

(Minimum and maximum numbers of organisms.)		
No. of organisms per c.c. capable of		B. coli
growth on Agar at:		presumptive
37° C.	22° C.	Absent in 100 c.c
0-3	0-25	in all samples

(ii) **Drainage and Sewerage.**

The following foul and surface water sewers were laid during the year:—

Hurst Place Estate—

1046 lin yards Foul Sewer.

1112 lin yards S.W. Sewer.

2. Rivers and Streams.

No serious case of pollution of rivers or streams was found during the year. Two samples of water were taken from the stream at East Wickham Tip. The Analyst's report stated that the water was of fair quality and that there was no evidence of any serious pollution of excretal origin.

CHIEF SANITARY INSPECTOR'S REPORT.

Health Department,
14, Brompton Road,
Bexleyheath.

To the Mayor, Aldermen and Councillors of the Borough of Bexley.

MR. MAYOR, LADIES AND GENTLEMEN,

I have pleasure in submitting my Annual Report as Chief Sanitary Inspector and Public Cleansing Officer to your Council for the year 1951.

The report consists mainly of a tabulated record of work carried out by the Sanitary Inspectors.

TABLE No. 1.

Details of Inspection Work Carried Out.

	Inspection tions	Re-inspection s
Houses inspected (all particulars recorded)	2	2
Houses inspected (defects only recorded)	281	959
Houses inspected (Housing Act, 1936, Overcrowding)	73	6
Houses inspected <i>re</i> Infectious Disease (including Scabies)	318	50
Factories with mechanical power	256	22
Factories without mechanical power	37	3
Schools	3	—
Refuse Tips	358	—
Bakehouses	130	38
Outworkers	56	—
Food shops and premises where food is prepared	1819	47
Visits <i>re</i> Unsound Food	553	29
Dairies and Milkshops	89	3
Ice Cream Premises	206	—
Fried Fish Premises	221	5
Offensive Accumulations	71	16
Keeping of Animals	116	18
Rats	224	176
Verminous Premises	107	93
Insufficient Ashplace Accommodation	39	29
Drains Inspected	1185	995
Drains Tested (water, smoke or colour)	82	6
Visits <i>re</i> Refuse Removal and Salvage	564	—
Public Conveniences	251	—
Food and Drugs Act <i>re</i> Samples	231	—
Water Samples	21	—
Shops Act, 1950	1166	—
Miscellaneous Inspections	1149	109

TABLE No. 2.**Improvements effected and defective sanitary conditions remedied.**

Houses—	No.
Provided with sufficient w.c. accommodation	27
Provided with sufficient ashplace accommodation	68
Provided with sufficient water supply ...	13
Houses Improved Internally—	
Dirty rooms cleansed	147
Walls and ceilings repaired	393
Dampness in rooms remedied	193
Defective floors repaired	37
Ventilation of rooms improved	28
Windows repaired	99
Coppers repaired	—
Stoves, fireplaces, etc., provided or repaired	18
Houses Improved Externally—	
Roofs repaired	89
Eaves, gutters and down spouts fixed or repaired	85
Yards paved or repaired	—
Chimney stacks repaired	43
Walls repointed or repaired	72
Miscellaneous repairs	67
Drainage—	
Drains cleansed or repaired	834
New drains constructed	1
New Gullies provided	1
Ventilation of drainage system improved ...	5
Inspection chambers built or improved ...	13
Waste pipes provided or improved	4
New sinks provided	3
Offensive accumulation removed	15
Nuisances from animals abated	5
Other nuisances abated	11

TABLE No. 3.**Infectious Diseases.**

Cases removed to Isolation Hospitals	69
Houses visited including revisits	368
Rooms disinfected	33
Notices delivered to Education Authorities, etc.	337
Houses at which defective sanitary conditions were found	—

TABLE No. 4.**Food Inspection.**

The following is a summary of unsound food surrendered.

Beef	...	...	...	...	...	lbs.	1,333
Ox Heads	...	...	...	...	...	,,	1,227
Sweetbreads	...	...	...	...	...	,,	19
Mutton and Lamb	...	...	...	...	...	,,	14½
Pork	...	...	...	...	...	,,	38
Rabbits	...	...	...	...	...	,,	220
Poultry	...	...	...	...	...	,,	43½
Corned Beef	...	...	...	...	...	,,	246¼
Corned Mutton	...	...	...	...	...	,,	14¼
Tinned Ham	...	...	...	...	...	,,	4,973
Brawn	...	...	...	...	...	,,	10
Suet	...	...	...	...	...	,,	2
Bacon	...	...	...	...	...	,,	2½
Fats	...	...	...	...	...	,,	19½
Vegetable Sausage	...	...	...	...	...	,,	43½
Puddings	...	...	...	...	...	,,	16
Prunes	...	...	...	...	...	,,	30
Confectionery	...	...	...	...	...	,,	72
Tea	...	...	...	...	...	,,	2½
Flour and Biscuits	...	...	...	...	...	,,	109
Dessicated Coconut	...	...	...	...	...	,,	7
Cereals	...	...	...	...	...	,,	48
Fish Roes	...	...	...	...	...	,,	56
Fish	...	...	...	...	...	,,	868
Fish	...	...	...	...	...	Tins	279
Milk	...	...	...	...	...	,,	393
Vegetables	...	...	...	...	...	,,	806
Meat	...	...	...	...	...	,,	567
Fruit and Fruit Juices	...	...	...	...	...	,,	1,021
Soups	...	...	...	...	...	,,	141
Puddings	...	...	...	...	...	,,	2
Preserves	...	...	...	...	...	,,	243

Preserves	...	...	...	...	Jars	8
Fish and Meat Pastes	...	...	...	...	,,	5
Cereals	...	...	...	...	Packets	13
Pastry Mixtures	...	...	...	...	,,	18
Beef Cubes	...	...	...	...	,,	40
Soup Powders	...	...	...	...	,,	6
Cakes and Pudding Mixtures	...	...	...	...	,,	636
Figs	...	...	...	...	,,	128
Figs	...	...	...	...	lbs.	37
Cheese	...	...	...	...	,,	193 $\frac{1}{2}$
Cheese	...	...	...	...	Packets	384
Vinegar	...	...	...	...	Bottles	19
Sauces and Pickles etc.	...	...	...	...	Bottles and Jars	121
Miscellaneous Items	...	...	...	...		84

TABLE No. 5.
Factories Act, 1937.

**1. Inspections for Purposes of Provisions as to Health.
Including Inspections made by Sanitary Inspectors.**

Premises. 1	Number of :—		
	Inspec- tions. 2	Written Notices. 3	Prose- cutions. 4
Factories with mechanical power	446	4	—
Factories without mechanical power	96	1	—
*Other Premises under the Act (including works of building and engineering construction but not including outworkers' premises)	—	—	—
*Electrical Stations should be reckoned as factories.			
Total	542	5	—

2. Defects Found.

Particulars. 1	Number of Defects.			Number of Prose- cutions. 5
	Found. 2	Reme- died. 3	Referred to H.M. Inspector. 4	
Want of cleanliness (S.1)	4	4	—	—
Overcrowding (S.2)				
Unreasonable temperature (S.3) ...				
Inadequate ventilation (S.4) ...				
Ineffective drainage of floors (S.6)				
Sanitary Conveniences (S.7)—				
Insufficient	1	1	—	—
Unsuitable or defective	3	4	—	—
Not separate for sexes	—	—	—	—
Other Offences	3	3	—	—
(Not including offences relating to Home Work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937.)				
Total	11	12	—	—

During the year 1 Certificate was issued to factories under Section 34 of the Factories Act, 1937, with regard to adequate means of escape in case of fire.

Closet Accommodation.

With the exception of a few houses, all the closet accommodation in the Borough is on the water carriage system.

PUBLIC CLEANSING SERVICE.

The Health Committee is responsible for the collection and disposal of house and trade refuse, the collection and sale of salvageable materials, and the maintenance of Public Conveniences.

Refuse Collection and Disposal.

During the year a weekly collection of refuse was maintained except at Bank Holiday periods, when some delay occurred, but at all holidays the arrears were quickly cleared, and there was no unduly long period between collections.

Two new S. & D. Dust Carts were delivered in April, and the whole of the fleet of vehicles used for refuse collection has now been renewed since 1947.

All refuse is disposed of by controlled tipping at East Wickham, and once again I have to record that no complaints were received about the tip during the year. In order to conserve the available tipping space as much as possible, the practice of accepting covering material from outside sources has been discontinued, and practically all covering is now excavated from the site.

Salvage.

The income received from the sale of salvage materials was a record, and this was due to the great increase of the price paid for waste paper. The increased price resulted in a number of private collectors setting up in business, and a large amount of waste paper was cleared by them, particularly from the shopping areas. In spite of this, the tonnage collected by the Council was approximately the same as the previous year.

Details of salvage sales for the year ended 31st March, 1952, are set out below.

		Tons	cwts.	qrs.	£	s.	d.
Waste paper ...	...	420	13	3	7,441	3	11
Textiles ...	...	28	18	3	749	18	8
Bones ...	...		16	3	6	0	7
Kitchen Waste ...	...	636	16	2	1,880	1	1
Ferrous Metals ...	...	64	14	2	214	8	1
Non-Ferrous Metals ...	...	2	2	1	181	15	3
Bottles and Jars ...	...	7	0	1	33	4	10
Miscellaneous ...	...	3	14	1	37	16	4
		1,164	17	0	10,544	8	9

Kitchen waste is collected twice weekly from some 425 communal bins placed in the streets and sent to the Woolwich Borough Council's Concentrator Plant at White Hart Lane, Plumstead.

Public Conveniences.

The public conveniences in the Borough are situated at the following sites:—

Market Place, Bexleyheath.

Townley Road, Bexleyheath.

Danson Park, Welling.

Library Building, Bellegrave Road, Welling.

High Street, Bexley.

St. Mary's Recreation Ground, Bexley.

Provision was made in the estimates for the erection of additional conveniences in the Brampton Ward, and these were completed in April, 1952.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

One full time Rodent Operative is employed by the Department for the treatment of surface infestations, and the test baiting and maintenance treatment of sewers is carried out by men under the control of the Borough Engineer.

No charge is made for treatment carried out at private dwelling houses, but the occupiers of business premises are charged for disinfection work.

Most of the infestations found are of minor character, and a large proportion of the cases dealt with at private dwelling houses are connected with the keeping of fowls and other animals.

Details of infestations dealt with during the year are set out below.

Number of Properties Inspected	...	...	1,473
Number of Inspections	...	...	3,546
Number of Infestations Found—	Major	...	1
	Minor	...	245
	Mice	...	59
Number of Treatments carried out		Rats	Mice
Local Authority's premises	...	8	1
Dwelling Houses	...	208	40
Business Premises	...	30	18

SHOPS ACT, 1950.

The following Closing Orders are in operation in the area:—

Bexley Urban District (Butchers) No. 6 Order, 1920.

Bexley Urban District (Grocers and Provisions Merchants) No. 7 Order, 1923.

Bexley Urban District (Miscellaneous Trades) No. 8 Order, 1923.

The Bexley Hairdressers and Barbers Shops Closing Order, 1946.

There were approximately 740 shops on the Council's Register at the end of the year.

During the year 1,166 inspections were made under the Shops Act, 1950, and no legal proceedings were instituted.

I am, Ladies and Gentlemen,

Yours obediently,

G. HIND,

Chief Sanitary Inspector.

Swimming Pool.

The only swimming pool in the Borough open to the public is in Danson Park and is owned by the Council. The layout includes three open-air pools, one large for adults and two small pools for children. Showers and foot baths are provided for the pre-cleansing of bathers. The water is kept pure by continuous filtration and sterilisation with chlorine and ammonia gases.

Samples of water have been taken by this department from time to time and the results of bacteriological examinations have been satisfactory on each occasion.

Results.

(Minimum and maximum numbers of organisms.)

No. of organisms per c.c. capable of growth on Agar at:			B. coli presumptive
	37° C.	22° C.	
Deep end	0 - 2	0 - 15	Absent
Shallow end	0 - 1	0 - 2	Absent

Verminous Premises.

18 houses found to be infested with bugs were treated by spraying with satisfactory results. 4 other houses were treated for flea infestation.

The furniture and effects from one house infested with bugs was treated with hydrogen cyanide prior to removal to a Council House.

Infestation by cockroaches at a bakehouse, a fried fish shop and a hotel were successfully treated by the Department.

Camping Sites.

A camping site used by Rover Scouts and Woodcraft Folk in Hall Place was not used over such a period as to come within the operation of Section 269 of the Public Health Act, 1936.

Schools.

There are 26 County Modern and County Primary Schools, six non-provided schools and a Day Technical School for Girls in the Borough. Improvements were carried out to the sanitary conveniences at one school during the year.

SECTION D.—HOUSING.

The following particulars relate to the houses built by the Council on the various Estates and still occupiable:—

			Houses	Flats
Welling—				
Welling Estate	...	...	428	—
Westwood Lane Estate	...	...	126	—
Carlton Road	...	...	16	—
Dovedale Close	...	...	14	—
John Newton Court	...	...	—	48
East Wickham—				
Glenmore Road No. 1	...	...	116	—
Glenmore Road No. 2	...	...	88	—
Bexleyheath—				
Highland Road Estate and Pickford Road Estate (including bungalows)	...	...	306	—
Cannon Road	...	...	—	28
Alers Road	...	...	84	—
Halcot Estate No. 1	...	...	200	—
Halcot Estate No. 2	...	...	112	—
Bexley—				
Hartford Road Estate and Victoria Road Estate	...	...	54	—
Royal Park Estate No. 1	...	...	58	—
Royal Park Estate No. 2	...	...	40	—
Midhurst Hill	...	...	20	—
Newick Close	...	...	16	—
Henfield Close	...	...	8	—
Rye Close and Extension	...	...	38	—
Glenhurst Avenue	...	...	34	—
Merlin Road	...	...	1	—
S.D.A. Houses	...	...	9	—
			1,768	76

1. Inspection of Dwelling Houses during the year.

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) ...	283
---	-----

(b) Number of inspections made for the purpose (including re-inspection) ...	1,244
(2) (a) Number of dwelling houses (included under subhead (1) above) which were inspected and recorded under the Housing Consolidated Regulations 1925 to 1932 ...	2
(b) Number of inspections made for the purpose (including re-inspections)...	4
(3) Number of dwelling houses to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	1
(4) Number of dwelling houses (exclusive of those referred to under the preceding subhead) found not to be in all respects reasonably fit for human habitation ...	225
2. Remedy of Defects during the year without service of Formal Notice.	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers ...	231
3. Action under Statutory Powers during the year.	
A. Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936—	
(1) Number of dwelling houses in respect of which notices were served requiring repairs ...	—
(2) Number of dwelling houses which were rendered fit after service of formal notices:	
(a) By owners ...	—
(b) By local authority in default of owners ...	—
B. Proceedings under Public Health Acts—	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ...	25

(2) Number of dwelling houses in which defects were remedied after service of formal notices—	
(a) By owners	19
(b) By local authority in default of owners	—
C. Proceedings under Sections 11 and 13 of Housing Act, 1936—	
(1) Number of dwelling houses in respect of which Demolition Orders were made	1
(2) Number of dwelling houses demolished in pursuance of Demolition Orders	—
(3) Houses demolished as a result of informal procedure	—
D. Proceedings under Section 12 of the Housing Act, 1936—	
Number of Closing Orders made	—

Public Health Act, 1936. Section 75. Provision of Dustbins.

Notices served requiring provision of bins	2
Number complied with—	
(a) by Owners	1
(b) by Local Authority in default of Owners	1
Bins provided in consequence of informal action	66

SECTION E.—INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.

The milk retailed for consumption in the area is all pasteurised and bottled, with the exception of a small quantity produced by a producer retailer.

Licences granted by the Council under the Milk (Special Designation) (Raw Milk) Regulations, 1949, and the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949:—

Dealers' Licences:—

Pasteurised Milk	...	...	...	17
Tuberculin Tested Milk	...	...	...	16
Sterilised Milk	...	...	...	21

Supplementary Licences:—

Pasteurised Milk	...	...	...	5
Tuberculin Tested Milk	...	...	...	4
Sterilised Milk	...	...	...	3

(b) Meat Inspection.

The slaughterhouses in the area remained closed during the year.

(c) Adulteration of Food. Food and Drugs Act, 1938.

The following table summarises the 202 samples taken during the year.

	Formal	Informal
Milk	13	—
Soups, Meat Extracts, etc.	4	12
Pastes	—	9
Pudding or Cake mixture, Flour, etc.	6	4
Jellies, Custard Powders, etc.	2	6
Patent Medicines, etc.	1	4
Sausages, Sausage Meat, etc.	15	3
Fruit, Fruit Juice and Fruit Puree	2	2
Lemon Sweet Spread	—	1
Cereals	4	1
Sweets	2	6
Cake	3	1
Ice Cream	25	—
Pepper and Pepper Flavoured Compound	—	3
Soft Icing	—	1

	Formal	Informal
Meat Pies	2	1
Minerals, etc.	3	1
Gelatine and Jelly Crystals	1	1
Condensed Milk	—	1
Beer, Wines and Spirits	3	—
Baking Powder	—	1
Condiments, Sauces, Pickles, Spices, etc.	7	12
Processed Cheese	—	1
Peas	1	2
Ground Ginger	1	1
Pure Coffee, Coffee Extract and Coffee and Chicory	2	3
Flavouring Essence	—	4
Vegetable Salad	2	—
Preserves	1	1
Luncheon Meat	1	1
Mussels	—	1
Salted Nuts	—	1
Sweetened Ground Almonds	1	2
Synthetic Cream	2	3
Margarine	—	1
Oysters	—	1
New Potatoes	—	1
Bread	—	2
Mixed Fruit	2	—
Tea	—	1

Legal Proceedings.

The following legal proceedings were instituted during the year:—

- (1) Beef Adulterated 24% deficient Fined £2 plus
Sausages in meat £1 1s. 0d. costs
- (2) Ice Adulterated 1.4% deficient Fined £5 plus
Cream in fat content £1 1s. 0d. costs

(d) Food Preparation Premises.

During the year 1,866 visits were made to restaurants, food shops and premises where food is manufactured for sale. The following is a summary of various improvements carried out at these premises.

Hot water supply provided or improved	6
Sinks provided	1
Floors, walls, ceilings, etc., repaired	10

Rooms cleansed	...	...	...	...	...	13
Water closets cleansed or repaired	...	...	...	...	...	2
Drains cleansed or repaired	...	...	...	...	...	3
Dirty Yards cleansed or repaired	...	...	...	...	...	2
Accumulation of refuse removed	...	...	...	...	...	8
Accommodation for storage of refuse improved	...	...	...	...	...	4
New fish frying range provided	...	...	...	...	...	1

Registration of Premises under Food and Drugs Act, 1938.

No. of premises registered for:—

Sale or Manufacture of Ice Cream	...	...	...	...	1
Sale of Ice Cream	...	...	...	...	144
Preparation of Sausages, etc.	...	...	...	...	42

24 samples of Ice Cream were submitted for examination under the Ice Cream (Heat Treatment) Regulations, 1947.

SECTION F.—PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE AND OTHER DISEASES.

Scarlet Fever.

During the year 101 cases were notified as compared with 150 the previous year. Of these 21 were isolated in hospital and 80 were isolated at home.

No. of deaths	...	...	...	...	Nil
Return cases from Hospital cases	...	...	...	...	Nil
Return cases from home nursed cases	...	...	...	...	6

During the past 15 years the character of this disease has changed from one of considerable severity to one characterised by its extreme mildness. The acute stage is, nowadays, in most cases, short and unaccompanied by high pyrexia and complications are in most cases mild or completely absent. Scarlet fever can now be disregarded as an important cause of acute endocarditis and acute nephritis which, in the past, were frequently encountered.

Diphtheria.

No cases were notified during the year.

The following figures on Immunisation and Vaccination have been supplied by the County Medical Officer:—

Immunisation against Diphtheria and Vaccination against Smallpox, 1951.

The following is a return of (A) the number of children resident in the Borough of Bexley who were immunised against diphtheria and (B) the number of persons who were vaccinated against smallpox, during the year ended 31st December, 1951:—

(A) Diphtheria Immunisation.

Year of Birth	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938	1937	Total
Primary Inoculations	148	879	168	23	14	28	15	2	2	3	3	3	7	11	11	1317
Reinforcing Inoculations	—	—	—	—	78	562	192	42	136	80	17	193	347	392	394	2433

(B) Vaccination.

Age at 31st December, 1951	Under 1	1 to 4	5 to 14	15 or over	Total
Number Vaccinated	505	322	43	93	963
Number Re-Vaccinated	—	18	58	250	326

Immunisation against Diphtheria, 1951.

The following is a return of the number of children resident in the Borough of Bexley under the age of 15 years on 31st December, 1951, who had completed a course of immunisation at any time before that date (i.e., at any time since 1st January, 1937).

Year of Birth	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	Total
	1102	1200	1137	1028	1010	1110	1214	1433	1496	1148	1331	1254	1125	971	148	16,707

Enteric Fever.

There were no cases notified during the year.

Puerperal Pyrexia.

7 cases were notified during the year, of which 3 were from Bexleyheath Maternity Hospital, where they were isolated and treated. 3 cases were removed to other hospitals and one case was isolated at home.

Ophthalmia Neonatorum.

There were no cases notified during the year.

Measles.

2,209 cases were notified. 13 cases were treated in hospital. There was 1 death.

Whooping Cough (Pertussis).

440 cases were notified, 7 of which were treated in hospital.

Acute Anterior Poliomyelitis.

2 Paralytic cases were notified and were treated in hospital. There were no deaths.

Scabies.

There were no cases notified during the year.

Food Poisoning.

7 cases were notified.

The following table gives the particulars concerning the cases of Infectious Disease (other than Tuberculosis) notified in the area during the year.

NOTIFIABLE DISEASES (Other than Tuberculosis) DURING THE YEAR 1951.

DISEASE.	Total cases notified	Under 1	1 to 2	3 to 4	5 to 9	10 to 14	15 to 24	25 & over	Age unknown	Cases admitted to Hospital	Total Deaths
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	101	—	4	21	66	6	4	—	—	21	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	7	—	—	—	—	—	1	6	—	6	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	36	—	1	2	2	—	1	30	—	11	2
Acute Paralytic Poliomyelitis	2	—	—	—	1	—	—	1	—	2	—
Acute Non-Paralytic Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	17	—	—	—	—	—	—	17	—	2	—
Food Poisoning	7	—	1	—	1	—	—	5	—	1	—
Dysentery	5	1	1	1	1	—	—	1	—	4	—
Typhoid Fever... ..	—	—	—	—	—	—	—	—	—	—	—
Para-Typhoid Fever	2	—	—	—	1	—	—	1	—	2	—
Meningococcal Infection	—	—	—	—	—	—	—	—	—	—	—
Measles	2209	52	402	625	1089	22	14	5	—	13	1
Whooping Cough	440	28	110	139	145	5	2	11	—	7	—
Scabies	—	—	—	—	—	—	—	—	—	—	—
Totals	2826	81	519	788	1306	33	22	77	—	69	3

TUBERCULOSIS.

During the year 123 new cases were notified.

Particulars relating to the same, and also to the deaths which occurred during 1951 are contained in the following table:—

Age Period	New Cases				Deaths			
	Respiratory		Non Respiratory		Respiratory		Non Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 ...	—	2	—	—	—	1	—	—
1—5 ...	1	1	—	—	—	—	—	—
5—10 ...	1	1	—	—	—	—	—	—
10—15 ...	—	3	1	—	—	—	—	—
15—20 ...	14	11	1	1	—	—	—	—
20—25 ...	6	8	1	1	1	2	—	—
25—35 ...	12	10	—	1	1	—	—	—
35—45 ...	15	3	1	—	1	1	—	—
45—55 ...	9	2	1	1	6	—	—	—
55—65 ...	8	3	—	—	4	1	1	—
65 and upwards	3	1	—	—	4	—	—	—
Totals ...	69	45	5	4	17	5	1	—

The number of non-notified Tuberculosis deaths was 6.

	Pulmonary.		Non-Pulmonary.		Total
	M	F	M	F	
No. on Register at commencement of year	511	362	70	73	1,016
No. on Register at end of year ...	560	401	73	76	1,110

Rehousing.

5 cases were referred to me by the Chest Physician for rehousing and during the year five cases were rehoused by the Housing Committee from these and previous cases.



BOROUGH OF BEXLEY

COMMITTEE FOR EDUCATION

Annual Report

on the

School Health Services

For the Year 1951

JOHN LANDON, M.R.C.S., L.R.C.P., D.P.H.

Medical Officer of Health

EXCEPTED DISTRICT OF BEXLEY WELFARE AND SCHOOL ATTENDANCE SUB-COMMITTEE

Chairman: Alderman R. G. Broomfield.

Vice-Chairman: Miss M. Woodward.

Alderman J. Cronin	Councillor M. J. Corr
Alderman Mrs. A. Welch	Councillor T. M. Gauge
Councillor A. S. Masey	Councillor Mrs. H. F. Piggott
Councillor Mrs. E. Boswell	

Co-opted Members:

Miss D. C. Collins	Revd. H. Charleston
Borough Education Officer ...	W. E. D. Stephens, M.A.
Deputy Borough Education Officer ...	R. R. Sutton.

SCHOOL HEALTH SERVICE

Medical Officer of Health ...	John Landon, M.R.C.S., L.R.C.P., D.P.H.
Assistant Medical Officers ...	Nora Walter, M.B., B.Ch., B.A.O., D.C.H. (Part-time). Robert Bruce Killoh, M.B., Ch.B., D.P.H., (Part-time) Resigned 31.12.50. Irene D. M. Hastilow, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H., D.O., R.C.O.G., D.C.H. (Whole-time) Resigned 10.3.51. Lucy M. Boyd, M.B., Ch.B. (Part-time). Helen D. Fox, M.B., B.S., (Whole-time) Appointed 12.3.51
Ophthalmic Surgeon ...	Roland M. Chambers, M.B.B.S., D.O.M.S.
Aural Surgeon ...	W. MacGregor, O.B.E., V.D., M.B.
Orthopaedic Surgeons ...	K. F. Hulbert, F.R.C.S. B. Lawson, F.R.C.S.

Dental Officers ...	...	...	H. Wade, L.D.S. Elizabeth Francis, B.D.S., L.D.S. (Part-time).
Orthodontist ...	...	...	Gordon Charles Dickson, L.D.S., B.Ch.D., F.D.S., R.C.S. England.
Health Visitors ..	...	...	Miss K. P. Hart, S.R.N., S.C.M., and Health Visitor's Certificate. (Whole time). Mrs. A. E. Matthews, S.R.N. (Temporary) Whole-time Miss P. D. Martin, S.R.N., and Health Visitor's Certificate. (Part-time). Miss C. T. Heymann, S.R.N., and Health Visitor's Certificate. (Part-time) Resigned 31.7.51. Miss L. G. Exley, S.R.N., and Health Visitor's Certificate. (Part-time). Miss D. Stanley, S.R.N., and Health Visitor's Certificate. (Part-time) transferred full time M. & C.W. 1.11.51. Mrs. C. A. Tucker, S.R.N., and Health Visitor's Certificate. (Part-time). Mrs. M. T. Leyton, S.R.N., and Health Visitor's Certificate. (Part-time). Miss M. Beer, S.R.N., and Health Visitor's Certificate. (Part-time). Miss Golding, S.R.N., and Health Visitor's Certificate (Part-time) as from August, 1951.
Physiotherapist ...	...	...	Miss R. Cheeseman, M.C.S.P., M.S.R.
Speech Therapist ...	...	...	Mrs. D. Rant, L.C.S.T.
Dental Attendants ...	...	...	Mrs. Ivy Birtchnell (Whole-time). Miss K. M. Dunkley (Whole- time).
School Health Service Clerk ...			Miss M. C. A. Smith.
General Clerks ...	...	...	Miss C. E. Anderson. Mrs. A. L. A. Baldry (Resigned 3.11.51). Miss O. G. Turnbull (Appointed 5.11.51). Mrs. Catherine Judd (Appointed 15.1.51).

REPORT ON THE SCHOOL HEALTH SERVICE DURING THE YEAR 1951.

To the Chairman and Members of the Welfare and School Attendance Sub-Committee.

LADIES AND GENTLEMEN,

I have the honour to present my annual report for the year 1951.

The continued shortage of dental staff has continued to militate against the maintenance of the high standard of dental care of our school children to which we had become accustomed in past years. The old method of routine dental inspection followed by treatment has been disturbed and the dental surgeons are more and more concerned in trying to catch up with arrears of work and in treating cases of acute toothache. There is at present, therefore, no real systematic supervision of the dental health of the school children as a priority class. At the time of writing there does seem to be a slight tendency for dentists to return to the local authority dental service as a result of the diminishing demand from the adult population and the new charges for dental treatment imposed under recent health legislation. The plans for an additional dental clinic at Murchison Avenue have not been included in the County estimates for 1952/53 on the grounds of economy but the matter is still being pursued and it is hoped that this addition to the school dental service in the Borough may come to fruition in the following year or that, alternatively, a suitable clinic will be provided in adapted premises, as an interim measure.

During the year, the Ear, Nose and Throat Clinic at Little Danson Clinic was closed down and provision for treatment was made at the West Hill Hospital by arrangement with the Dartford Group Hospital Management Committee. This resulted, in the first place, in considerable delay in the treatment of school children as well as some difficulty in their follow-up treatment. The position has now been improved by the provision of additional out-patient facilities for school children at this hospital and it may be taken that, generally speaking, the facilities for ear nose and throat treatment are reasonably satisfactory.

Owing to the opening of Hillsgrove School in 1950 an additional minor ailment clinic was established at the Wrotham Road Clinic to cater for the children attending this school and for those children attending the East

Wickham Junior and Welling County Secondary Schools who had some difficulty of access to Little Danson Clinic including the crossing of a busy main road.

Another result of the general economy campaign of the Kent Education Committee has been a review, during the year, of the extent to which vitamins and various medicaments should be supplied to school children by medical officers at minor ailment clinics. The view-point has been taken that, as the medical functions of the school health service are mainly inspectorial and advisory, children requiring drugs and other medicaments should be referred to their own doctors for treatment under the National Health Services Acts. Care must be taken that this tendency, which is justifiable up to a point and in accord with the general trend that the general practitioner should be brought more and more into collaboration with the School Health Service, or vice versa, should not deprive the assistant medical officers working in the clinics of certain basic treatments for common disorders. On the whole a "modus vivendi" has been reached and it is hoped that a state of equilibrium will result in the light of further experience. The most important factor is, of course, that the school child shall not be deprived of essential treatment and it is possible to give an assurance that this is the case in practice.

There were no serious epidemics during the year and the health of the school children has, on the whole, been satisfactory. Only two cases of poliomyelitis occurred during the year as against 19 during 1950.

The special needs of the many categories of handicapped children continues to be a major preoccupation of the staff and reference to the statistical reports will give some indication of the extent and scope of this work.

Once again, I have to record the excellent team work of all members of the staff on which the success of the School Health Service so largely depends and, finally, I wish to express my appreciation of the help and encouragement which I have received during the year from the Chairman and Members of the Committee, from the County Medical Officer and his staff and from Miss Smith, the Senior Clerk, and all members of the staff, whose help and co-operation during the year have been a very valuable asset.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

John Landon,

Medical Officer of Health.

KENT EDUCATION COMMITTEE EXCEPTED DISTRICT OF BEXLEY.

Schools.

Bexley County Technical School for Girls'.

Average number on Roll at 31st December, 1951,

Bexley	750
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Wilmington Annex	230
-------------------------	-----

Six County Secondary Schools.

Average number on Roll	2,944
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Twenty County Primary Schools.

Average number on Roll	6,140
-------------------------------	-------

One Nursery Class attached to Uplands Primary School.

Average number on Roll	52
-------------------------------	----

Voluntary Schools.

Two Primary Schools.

Average number on Roll	258
-------------------------------	-----

Voluntary Aided Schools.

One Secondary School.

Average number on Roll	311
-------------------------------	-----

Two Primary Schools.

Average number on Roll	728
-------------------------------	-----

	Total 11,413
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Clinics.

Minor Ailments.

Welling—Little Danson, Dansington Road.

Tuesday and Wednesday, 2-4 p.m.

Monday and Saturday, 9.30-11 a.m. (Monday discontinued as from 1.11.51).

Doctor in attendance — Wednesday and Saturday.

Welling—Wrotham Road.

Tuesday and Thursday, 9.30-11 a.m. (Commencing 1.11.51).

Doctor in attendance—Thursday.

Bexleyheath—315, Broadway.

Tuesday, 2-4 p.m.

Monday, Wednesday, Friday and Saturday, 9.30-11 a.m.

Doctor in attendance—Tuesday and Saturday.

Bexley—Murchison Avenue.

Tuesday, Thursday and Friday, 9.30-11 a.m.
(Thursday discontinued as from 24.10.51).

Doctor in attendance—Friday.

Dental.

Welling—Little Danson, Dansington Road.

Each morning, except Saturday, 9.30-11 a.m.
Tuesday and Thursday, 2-4 p.m.

Bexleyheath—315, Broadway.

Thursday and Friday, 9.30-11 a.m., 2-4 p.m.

Saturday, 9.30-11 a.m.

Extraction Session—Friday morning.

Crayford—Woodside Road.

Monday, Tuesday and Wednesday, 9.30-11 a.m.,
2-4 p.m.

Sunlight Clinic.

Bexleyheath—315, Broadway.

Tuesday and Thursday, 10-12 noon.

Specialist's Clinics.

Ophthalmic.

Welling—Little Danson, Dansington Road.

Monday, 2-4 p.m.

Thursday and Friday, 9.30-11 a.m., 2-4 p.m.

Appointments made from Office.

Orthopædic.

Welling—Station Approach.

Wednesday, 9.30-11 a.m., 2-4 p.m.

Thursday and Saturday, 9.30-11 a.m.

Specialist in attendance 1st and 3rd Wednesday
at 10 a.m.

Bexleyheath—315, Broadway.

Monday, 2-5 p.m.

Specialist in attendance 1st and 3rd Monday,
10 a.m.-12.30 p.m.

Appointments made through County Medical
Officer.

Aural.

Welling—Little Danson, Dansington Road.

Tuesday morning, 9.30-11 a.m.

Appointments made from Office.

(Discontinued 16.4.51.)

Speech.

Welling—Wrotham Road.

Friday, 9.30-12 noon, 2-4 p.m.

Appointments made through County Medical Officer.

Child Guidance.

Crayford—Woodside Road.

Clinics held daily.

Appointments made through County Medical Officer.

CO-ORDINATION.

In spite of the transfer of the Maternity and Child Welfare Services from the local Council to the Kent County Council, a satisfactory degree of co-ordination of effort between the School Health Service and the Infant Welfare Services has been maintained as a result of the co-operative attitude of all members of the Staff concerned.

Periodic Medical Inspections. See Table 1.

The successful carrying out of routine medical inspections was made possible by the excellent co-operation of Head Teachers and their staffs and it is true to say that this is now regarded as an integral part of the school curriculum. It is at these inspections that the greatest number of defects are discovered and where a great deal of information is obtained in regard to the school children by discussions with the parents.

Generally speaking, it was found that entrants, 8-year-olds and 11-year-olds showed a uniformly high standard of personal hygiene. Clothing was good and clean and the incidence of skin diseases very low. In only a few cases was it necessary to record a defect in clothing or of footwear.

The attendance of parents at routine medical inspections was good, being practically 100 per cent. in the case of entrants, but as might be expected there was a falling off in the case of senior children.

Reference to the Statistical Table on Page 65 emphasizes the number of defects discovered. Bearing in mind that these defects are nearly always diagnosed in the early stages and observation or treatment instituted at once, periodic inspections will be seen to represent the truly preventative aspect of School Health Work.

School Meals—1951.

Average number of pupils on Roll:—

Primary Schools	.....	...	...	...	6,913
Secondary Schools	...	...	...	...	3,877
					<hr/>
					10,790

Average number of pupils taking meals daily:—

					<i>Primary</i>	<i>Secondary</i>
Free	...	...	...	...	103	146
Payment	...	...	...	...	3,377	2,580
Total					3,480	2,726

This shows an increase of almost 500 meals daily since 1950.

Milk.

Average number of pupils taking milk daily:—

Primary	...	...	...	...	...	6,553
Secondary	...	...	...	...	...	2,465
Total						9,018

Work of the Ophthalmic Clinic.

I am indebted to Mr. R. M. Chambers, M.B., B.S., D.O.M.S., for the following report:—

The attendances during 1951 have been well maintained.

A total of 2,163 children were seen (previous year 1,799) and in all 2,596 attendances were made. 460 new patients were seen.

The number of cases requiring correction of a refractive error amounted to 50% of those attending, of these 8% needed orthoptic and or surgical treatment.

A small number (15) suffering from Amblyopia failed to respond to any treatment and were hereditarily determined.

The incidence of symptoms caused by convergence deficiency rose significantly during the pre-examinational periods. Treatment of these cases, usually girls, rather conscientious and over anxious, sitting for scholarships or other competitive examinations, is somewhat ineffective since the condition is brought about by the unavoidable stresses of school life, and when these are overcome or the examination is passed (or failed) the symptoms abate, though the exophoria may persist. A few however (6) required further orthoptic treatment. It was noteworthy that only one case was a boy out of total of 21.

The provision of a Giles Archer Colour Testing Unit has enabled a number of children to be examined for colour defect and so has prevented in a number of cases, preparations being made for entry into obviously unsuitable occupations.

The incidence of colour defect corresponded closely with that of the average population.

An attempt has been made to avoid delays in seeing patients by a more even spacing of appointments and the postponements of all possible clerical work to the end of the session. This has proved satisfactory in that the average waiting period before being seen is 15 minutes.

The prompt provision of glasses has materially helped this clinic to provide an effective service for those in need of it.

The analysis of cases other than refractive errors is attached:—

Infective.

Squamous Blepharitis ...	...	...	...	15
Blepharo-Conjunctivitis ...	...	...	...	5
Conjunctivitis ...	...	...	...	6
Conjunctivitis Phlyctenula ...	...	...	...	3
Styes ...	...	...	...	16
Meibomian Cyst ...	...	...	...	7

Non-Infective.

Cornea—Abrasion ...	...	...	...	2
Opacity ...	...	...	...	3
Iris—Heterochromia ...	...	...	...	7
Iridodialysis (Traumatic) ...	...	...	...	1
Lens—Fine Opacities ...	...	...	...	4
Cataract (Aphakic) ...	...	...	...	3
Retina—Mild macular pigmentation (other than myopia) ...	...	...	...	5
Toxoplasmosis (not confirmed serologically) ...	...	...	...	2
Old Detachment (in situ) ...	...	...	...	1

Neurological.

Nerve Palsy ...	...	...	...	9
Nystagmus ...	...	...	...	3
Ptosis ...	...	...	...	4
Migraine ...	...	...	...	18

Consitutional.

Albinism	1
Colour Blindness	55
Incomplete	43
Complete	12
,, Red Blind	8
,, Green Blind	4

Orthopaedic Clinic.

I am indebted to Mr. K. F. Hulbert, F.R.C.S., for the following report on the orthopaedic Clinic:—

The Orthopaedic Clinic has continued for the past year at the Welling Clinic on the first and third Wednesdays of every month.

There has been a dropping off in the number of attendances to a certain extent, but the type of case remains the same.

We are still very handicapped for treatment on account of the poor accommodation in the present building, but Miss Cheeseman, the Physiotherapist has carried on very well in spite of all difficulties.

Dental Treatment.

I am indebted to Mr. Wade, L.D.S., Dental Surgeon, for the following report:—

Maternity and Child Welfare. As you are aware we are still treating these patients for the County and this still means that treatment for the school population is behind-hand.

Education. It is with regret that I note that lectures on Dental Hygiene have not yet been arranged as suggested in my previous reports. The appalling ignorance on this subject in the district is most marked.

Orthodontic Treatment. Much headway has been made in this branch and many treatments have been completed entirely satisfactorily. Parents and patients have co-operated well.

Cases of interest. Several cases of apisectomy have been treated at the Eastman Dental Hospital followed by the fitting of jacket crowns. Our thanks is due to the hospital for its readiness to help in these complicated and difficult cases.

Hurst Road. There are indications that the Mobile Unit should visit this school again as it appears the new Dental Clinic there will not be built for an indefinite time.

General. Private Practitioners are not now so busy on account of payments having to be made over 21 years of age and also for prosthetic work, and it may be expected, therefore, that more school age patients will be accepted for treatment by Private Practitioners than in recent times. This, to some extent, is an advantage to the patient as they will be treated out of school hours. Already signs of this have been noticed; and Private Practitioners are sending their orthodontic patients for treatment to school clinics after completing conservative operations and extractions. This procedure is being experienced throughout the country.

I have received co-operation by all members of the medical staff, and to you, personally, I again express my thanks for the help and interest you have given to the clinics.

I am indebted to Mrs. Elizabeth Francis for the following report:—

Before Autumn 1950, there had been no Dental Surgeon for nearly three years at this clinic; therefore, there is now a very long waiting list of those who, during that time, filled in forms requesting treatment. At the same time, the condition of the teeth generally is so poor that we are dealing with a continual stream of children with toothache.

To do inspections at the 21 schools in this area is obviously a waste of time at the moment, as I shall not be able to start systematic treatment for some time.

The dental hygienist, who has been working here one day a week, has been most helpful both in teaching the children the rudiments of oral hygiene and in scaling and cleaning their teeth. She left the County last month and one hopes that she will be replaced soon as her work is most necessary.

Speech Therapy.

I am indebted to Miss Joan Pollitt, Chief Speech Therapist to the Kent Education Committee for the Statistics relating to the work carried out during the year:—

Analysis of the work carried out:—

A. Total number of patients ...	...	46
Cases closed during 1951 ...	23	
Patients attending clinics at the end of 1951 and, therefore, carried forward into 1952 ...	23	
	—	
		46

B. Number of patients awaiting appointments at the end of 1951 and therefore, carried forward into 1952	86
	<hr/> 132 <hr/>

Discharges during the year:—

(a) Improved so that no abnormality existed or condition became such that little residual defect remained	8 (Including one of poor mental calibre)
(b) Treatment incomplete owing to parent and patient being satisfied with the condition, or owing to parent and patient being unwilling to continue further, or owing to patient leaving district, etc.	4
(c) Little if any change following Treatment	1
(d) Transferred to School for the Deaf	1
(e) Treatment arranged elsewhere ...	1
(f) Reported by the Medical Officer, parent and/or school to have improved and, therefore, investigatory appointments at Speech Therapy clinic cancelled	4
(g) Started work or left district prior to appointment being made ...	4
	<hr/> 22 <hr/>

Patients, whose cases were closed during the year, suffered from stammer, dysarthria, hyper-rhinophonia (not due to Cleft palate) defect associated with severe hearing loss, dysphonia + dyslalia, retarded speech development associated with mental retardation.

Cleanliness Inspections.

(See Table V.)

During the year the School Nurses carried out 11,094 examinations of children in Schools and 130 were found to have some infestation with vermin. In nearly all cases, the condition was cleared up by parents who

were assisted, where necessary, by the School Nurses. The infestation rate is commendably low and speaks well for the standard of child care in the Borough.

Physical Education.

Schemes of work have proceeded steadily and teachers are reducing the spate of post-war ideas to workable limits in their varying circumstances. This is particularly true in the Infant and Junior Schools, where most experiment has been made in recent years.

It was noticable that in the Infant and Junior Schools, children showed greater self-assurance in their work. It is thought that this is largely due to three factors:—

- (1) a greater use of small apparatus, which allows the individual child to advance in skill at a rate commensurate with his ability;
- (2) the introduction of agility apparatus upon which the child can satisfy his need for climbing, hanging and swinging;
- (3) the use of teaching methods which demand more thought on the part of the individual child, rather than the drill system which tended to produce automatic, unthinking response.

The work in Secondary Schools proceeded on traditional lines and existing standards were maintained. Recent research into the curriculum for the Secondary School has resulted in a shift of emphasis, rather than the introduction of new activities, and more attention has been paid to the English games and sports, at the expense, necessarily (in view of restrictions of time) of Swedish gymnastics. Distinct progress has been made in Modern and National Dancing in the Girls' Secondary Schools, and further development is expected in view of the great interest shown in these activities in the Primary Schools.

Swimming.

Swimming, mainly in the Summer Season, was enjoyed by 584 Secondary pupils and 614 Junior pupils at the following swimming baths;—

- (i) Danson Pool
- (ii) Plumstead
- (iii) Eltham indoor
- (iv) Eltham open air
- (v) Charlton Park

Each child attended, on the average, 10 times, and as a result of the training the following certificates were awarded:—

(a)	Learners'	380
(b)	More advanced	60 (including 14 Bronze Medals of the Royal Life Saving Society)

Refresher courses for teachers in National Dancing, Basketball and Secondary Boys' Physical Education were held locally, and a week-end course in Remedials was held at Broadstairs.

SCHOOL HEALTH SERVICES.

Statistical Tables.

Table I — Medical Inspection of Pupils attending Maintained Primary and Secondary Schools.

- A. Periodic Medical Inspections.
- B. Other Inspections.
- C. Pupils found to require Treatment.

Table II —

- A. Return of Defects found by Medical Inspection.
- B. Classification of the General Condition of Pupils Inspected during the year in the Age Groups.

Table III —

- Group I. Minor Ailments.
- Group II. Defective Vision and Squint.
- Group III. Treatment of Defects of Nose and Throat.
- Group IV. Orthopædic and Postural Defects.
- Group V. Other treatment given.

Table IV — Dental Inspection and Treatment including Orthodontics.

Table V — Infestation with Vermin.

Table VI — Handicapped Children.

TABLE I.**Medical Inspection of Pupils Attending Maintained
Primary and Secondary Schools.****A. — Periodic Medical Inspections.**

Number of Inspections in the prescribed Groups :

Entrants	...	...	...	...	1,533
Second Age Group	...	...	...	...	930
Third Age Group	...	...	...	...	951
Total					3,414

Number of other Periodic Inspections 1,595

Grand Total ... 5,009

B. — Other Inspections.

Number of Special Inspections	...	...	5,412
Number of Re-Inspections	...	...	3,670
Total			9,082

**C. — Pupils Found to Require Treatment at Periodic
Medical Inspections.**

Group (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total individual pupils (4)
Entrants	36	469	441
Second Age Group	74	193	218
Third Age Group	68	375	350
Total (prescribed groups) ...	178	1,037	1,009
Other Periodic Inspections ...	138	402	426
Grand Total	316	1,439	1,435

TABLE II.

A. — Return of Defects Found by Medical Inspection in the Year ended the 31st December, 1951.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of defects		No. of defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
1		2	3	4	5
4.	Skin ...	356	108	221	17
5.	Eyes—				
	a. Vision ...	316	260	36	7
	b. Squint ...	32	84	14	4
	c. Other ...	93	44	87	4
6.	Ears—				
	a. Hearing ...	50	77	21	5
	b. Otitis Media ...	21	57	34	4
	c. Other ...	38	18	58	5
7.	Nose or Throat ...	290	477	286	48
8.	Speech ...	9	47	15	6
9.	Cervical Glands	11	106	8	7
10.	Heart and Circulation ...	108	90	80	9
11.	Lungs ...	50	268	131	34
12.	Developmental —				
	a. Hernia ...	3	19	4	—
	b. Other ...	24	146	13	6
13.	Orthopædic—				
	a. Posture ...	118	151	21	7
	b. Flat-foot ...	188	160	15	5
	c. Other ...	121	262	66	11
14.	Nervous system—				
	a. Epilepsy ...	2	14	1	3
	b. Other ...	19	100	38	15
15.	Psychological—				
	a. Development ...	—	29	5	5
	b. Stability ...	19	177	45	18
16.	Other ...	143	157	231	32

B. — Classification of the General Condition of Pupils Inspected during the Year in the Age Groups.

Age Groups (1)	No. of Pupils Inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No. (3)	% of col. 2 (4)	No. (5)	% of col. 2 (6)	No. (7)	% of col. 2 (8)
Entrants	1533	470	30.65	937	61.12	126	8.21
Second Age Group ...	930	334	35.91	563	65.37	33	35.48
Third Age Group ...	951	460	48.37	452	47.52	39	28.90
Other Periodic Inspections ...	1595	571	35.79	931	58.36	93	5.83
Total ...	5009	1835	36.63	2883	57.55	291	5.80

TABLE III.—Treatment Tables.

Group 1—Diseases of the Skin (excluding uncleanness, for which see Table V).

				Number of cases treated or under treatment during the year by the authority otherwise	
Ringworm—(i) Scalp ... ..	...	...	...	—	1 X-Ray
(ii) Body ... ..	...	...	...	109	—
Scabies ... ..	...	...	...	—	—
Impetigo ... ..	...	...	...	7	—
Other skin diseases ... ..	...	...	...	479	1
Total				595	2

Group 2—Eye Diseases, Defective Vision and Squint.

				No. of cases dealt with by the authority otherwise	
External and other, excluding errors of refraction and squint	...	...	...	237	—
Errors of refraction (including squint) ... ..	...	...	...	1,926	—
Total				2,163	—

Number of pupils for whom spectacles were (a) Prescribed	431	—
(b) Obtained	394	—
	<hr/> 825	<hr/> —

Group 3—Diseases and Defects of Ear, Nose and Throat.

	No. of cases treated by the authority otherwise	
Received operative treatment		
(a) for diseases of the ear ...	—	2
(b) for adenoids and chronic tonsillitis ...	—	98
(c) for other nose and throat conditions ...	—	—
Received other forms of treatment	155	19
	<hr/> 155	<hr/> 119

Group 4—Othopædic and Postural Defects.

(a) Number treated as in-patients in hospitals	9	
	by the authority	otherwise
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments	433	16

Group 5—Other Treatment Given.

	No. of cases treated by the authority otherwise	
(a) Miscellaneous minor ailments ...	1,628	—
(b) Other (specify)		
1 Minor Injuries ...	42	—
2 Minor Ear Defects ...	115	—
3 Minor Eye Defects ...	140	—
	<hr/>	<hr/>
Total	1,925	—
	<hr/>	<hr/>

TABLE IV.

Dental Inspection and Treatment.

(1) Number of pupils inspected by the Authority's Dental Officers—			
(a) Periodic age groups	...	...	2,442
(b) Specials	...	...	1,524
Total			3,966
<hr/>			
(2) Number found to require treatment	...		2,761
(3) Number referred for treatment	...		2,761
(4) Number actually treated	...		2,138
(5) Attendances made by pupils for treatment			5,315
(6) Half-days devoted to:	Inspection	...	13
	Treatment	...	660
Total			673
<hr/>			
(7) Fillings:	Permanent Teeth	...	1,061
	Temporary Teeth	...	326
Total			1,371
<hr/>			
(8) Number of teeth filled:	Permanent Teeth		1,048
	Temporary Teeth		312
Total			1,345
<hr/>			
(9) Extractions:	Permanent Teeth	...	687
	Temporary Teeth	...	3,132
Total			3,742
<hr/>			
(10) Administration of general anaesthetics for extraction	...	...	1,455
(11) Other operations:	Permanent Teeth	...	676
	Temporary Teeth	...	387
Total			1,059
<hr/>			

Orthodontic.

Attendances	...	...	...	...	...	...	1,107
Referred for mechanical appliances	...	...	...	...	...	...	80
Impressions							
Upper	...	...	...	...	...	...	126
Lower	...	...	...	...	...	...	114
Try-ins	...	...	...	...	...	...	13
Dentures Fitted							
Upper	...	...	...	...	...	...	16
Lower	...	...	...	...	...	...	1
Dentures Repaired	...	...	...	...	...	...	1
Easing of dentures	...	...	...	...	...	...	10
Appliances Fitted							
Upper	...	...	...	...	...	...	108
Lower	...	...	...	...	...	...	2
Re-made Upper	...	...	...	...	...	...	1
Repair	...	...	...	...	...	...	1
Adjustments	...	...	...	...	...	...	215
Examinations and Advice	...	...	...	...	...	...	592

TABLE V.**Infestation with Vermin.**

- | | | | | | |
|--|-----|-----|-----|-----|--------|
| (i) Total number of examinations in the schools by the school nurses or other authorised persons | ... | ... | ... | ... | 11,094 |
| (ii) Total number of individual pupils found to be infested | ... | ... | ... | ... | 130 |
| (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) | ... | ... | ... | ... | — |
| (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) | ... | ... | ... | ... | — |

TABLE VI.
**Handicapped Pupils requiring Education at special
Schools or boarding in Boarding Homes.**

	(1) Blind (2) Partially sighted		(3) Deaf (4) Partially Deaf		(5) Delicate (6) Physically Handicapped		(7) Educa- tionally sub-normal (8) Mal- adjusted		(9) Epi- leptic	TOTAL (1) to (9)
In the calendar year ended 31st December, 1951 :—	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
A. Handicapped Pupils newly placed in Special Schools or homes ...	—	1	1	1	—	1	6	—	—	10
B. Handicapped Pupils newly ascertained as requiring education at Special Schools or boarding in Homes ...	—	—	—	—	67	7	9	—	1	84
On or about December 1st, 1951 :—										
C. Number of Handi- capped Pupils from the area :—										
(i) attending Special Schools as										
(a) Day Pupils	—	6	4	—	—	11	12	—	—	33
(b) Boarding Pupils ...	—	—	—	—	—	—	—	—	—	—
(ii) Boarded in Homes	—	—	—	—	—	—	—	—	—	—
(iii) Attending inde- pendent schools under arrange- ments made by the Authority ...	—	—	—	—	—	—	—	—	—	—
Total (C) ...	—	6	4	—	—	11	12	—	—	33
D. Number of Handi- capped Pupils being educated under arrange- ments made under Section 56 of the Education Act, 1944 :—										
(i) In hospitals ...	—	—	—	—	—	—	—	—	—	—
(ii) Elsewhere ...	1	—	—	—	2	8	—	—	—	11
E. Number of Handi- capped Pupils from the area requiring places in Special Schools (includ- ing any such unplaced children who are tem- porarily receiving home tuition) ...	—	1	—	—	—	5	2	—	—	8

Number of children reported during the year :—

(a) Under Section 57(3) (excluding any returned under (b))	...	2
(b) " " " relying on Section 57(4)	...	—
(c) " " " 57(5)	...	1
of the Education Act, 1944,		

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