

[Report of the Medical Officer of Health for Croydon].

Contributors

Croydon (London, England). London Borough.

Publication/Creation

[1973?]

Persistent URL

<https://wellcomecollection.org/works/dp8w8smk>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

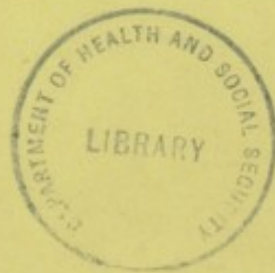
LB
I

CRO 74

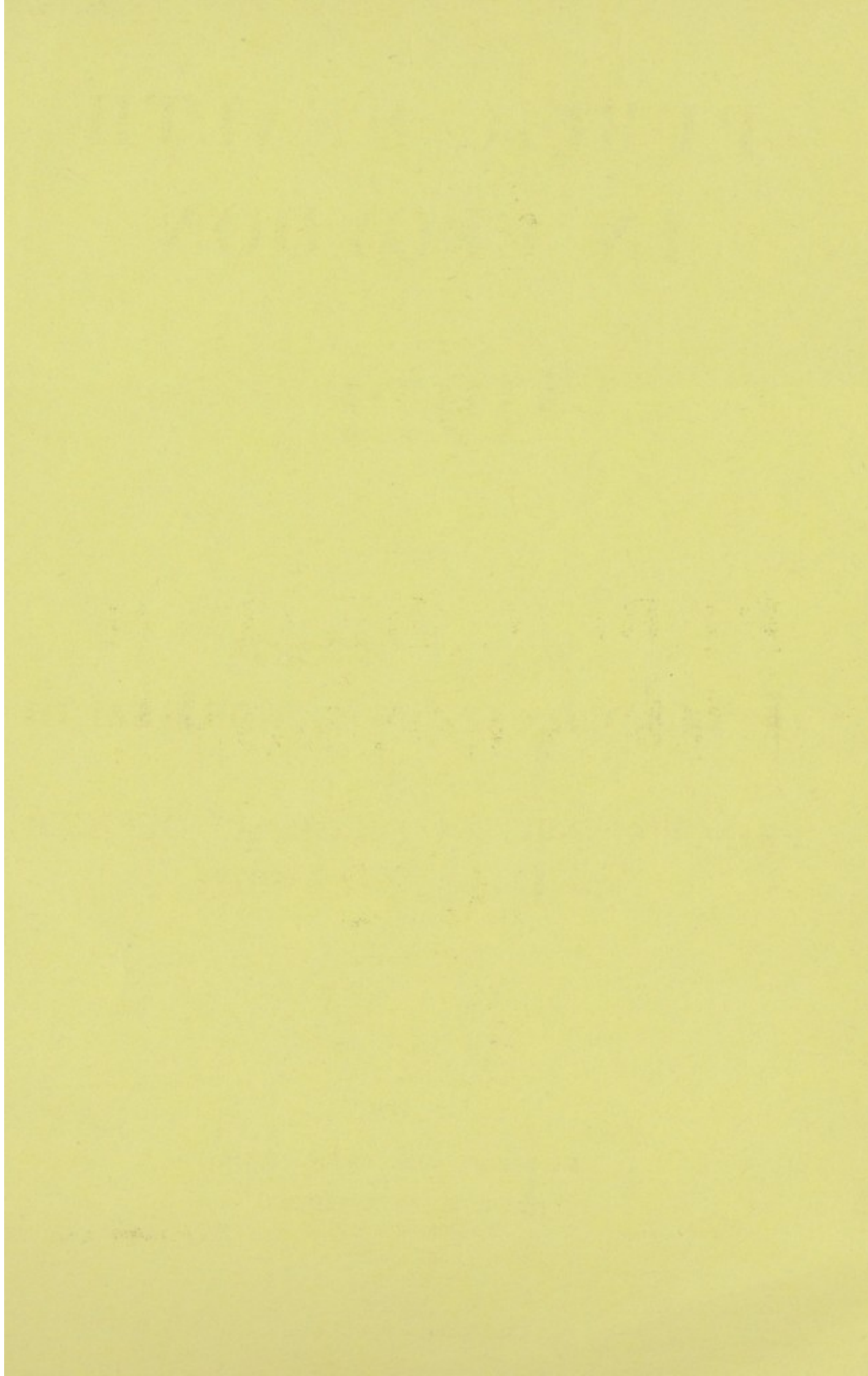


PUBLIC HEALTH IN CROYDON

1972



VOL. 10. PART 2. NO. 1



PUBLIC HEALTH IN CROYDON

1972

ANNUAL REPORT
OF THE MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1972



S.L. WRIGHT, M.D., F.R.C.P., D.P.H.
PUBLIC HEALTH DEPARTMENT,
TABERNER HOUSE,
PARK LANE,
CROYDON.
CR9 3BT
Telephone:— 01-686 4433

RESEARCH REPORT

IN CHEMISTRY

1972

THE UNIVERSITY OF CHICAGO
DEPARTMENT OF CHEMISTRY
5708 SOUTH CAMPUS DRIVE
CHICAGO, ILLINOIS 60637

HEALTH AND PUBLIC SERVICES CONTROL COMMITTEE

LONDON BOROUGH OF CROYDON

1972

| | |
|---|--------------------------------------|
| Alderman B.C. Sparrowe (<i>Chairman</i>); | Councillor Mrs. P.A.M. Little; |
| Councillor Mrs. N.B. Booth | Councillor Mrs. S.E. Lord, S.R.N.; |
| <i>(Vice-Chairman)</i> ; | Councillor K.M.B. Munro; |
| Councillor Mrs. J.M.C. Baker; | Councillor B.H. Rawling; |
| Councillor V.W.H. Bendall; | Councillor N.A. Tully; |
| Councillor R.T. Bishop; | * Councillor Anne Usher; |
| Councillor A.E. Buddle | * Councillor Mrs. A.M. Watson, J.P. |
| Councillor V. Burgos; | * Councillor H.G. Whitwell; |
| Councillor P. Byrne; | Doctor Maureen Adams, M.B., B.S., |
| Councillor S.L. Eaton; | M.R.C.S., M.R.C.P., |
| * Councillor A.W. Elliott; | P.S. Boffa, Esq., M.D. |
| * Councillor Mrs. W.M. Holt, J.P. | J.F. Boyle, Esq., M.B., B.Chir., |
| Councillor Mrs. M.M.H. F'orden; | D. Obst., R.C.O.G. |
| Councillor C.E. Kelly | A. Tickner, Esq., B.Sc., M.B., B.S., |
| | F.C. Path. |

* Councillor H.G. Whitwell resigned from the Council and Councillor A.W. Elliott was appointed to the Committee in his place on 24th July, 1972.

Councillor Mrs. W.M. Holt was appointed in place of Councillor Mrs. A.M. Watson on 9th October, 1972

Councillor Anne Usher was appointed in place of Councillor Mrs. W.M. Holt on 13th November, 1972.

LONDON BOROUGH OF CROYDON

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1972

To the Chairman and Members of the Health and Public Services Control Committee

LADIES AND GENTLEMEN

This statutory report for the year 1972 follows the usual pattern and provides a mainly statistical record for the year under review.

Statistics

In comparison with the previous year the number of births fell by 8.6%, in line with the national trend. This reflects the change in public opinion and the greater availability of Family Planning services. The percentage of illegitimate births (10) was the same as last year. There were two deaths associated with childbirth, and the routine reports made to the Department of Health indicated that neither could have been anticipated or prevented. The general death rate was raised by a winter outbreak of influenza, increasing fatalities amongst the elderly and debilitated members of the community. It partly explains a considerable rise in deaths from lung cancer, which amongst men reached the highest level of recent years.

Health Centres

The planning of the South Norwood Health Centre reached the stage of acceptance of a tender, and it was hoped that the building would be completed by mid-1973. This project has unfortunately progressed very slowly, but there have been advantages that delays have allowed the new guide lines of the Department of Health to be used. Experience at the Parkway Health Centre has shown that previous standards did not allow sufficient accommodation for certain essential functions, to the discomfort of both patients and staff using the building. Plans for South Norwood were re-drawn to correct this defect.

Community Nursing Care

The Director of Nursing details the important changes due to national and international events, which influenced the administration of these services during the year under review. They were not allowed to disturb the advice and care given by the staff to members of the public, nor significant developments to improve the facilities which could be offered. Despite a vigorous training programme the recruitment and retention of Health Visitors remained an unsolved problem, and the target of complete integration with general medical practice could not be achieved.

Care of Pre-School Children

The early detection and correction of inborn defects has of recent years been an increasing responsibility of the Child Health Service. Departmental Medical Officers have been seconded to attend special courses in developmental paediatrics, which included for one member of the staff whole-time attendance for an academic year at the Institute of Child Health in London. The Paediatric Department at Mayday Hospital received a special grant from the Regional Hospital Board to build an Assessment Unit for early diagnosis, observation and treatment of handicapped children. The Health Department have co-operated in its design, and a joint appointment agreed for the Departmental Medical Officer with special training in this subject.

Health Education

There was some easing of the difficulties to recruit Health Education Officers, which has continuously curtailed the full development of this service, but this did not extend to the supporting ancillary and clerical staff. Nevertheless the Principal Health Education Officer is able to report on a year of further progress.

Family Planning

The Corporation agreed to increase their reimbursement of charges to the Family Planning Association as from April 1st 1972 to include free

advice to all as well as free supplies to medical and social cases. This applies to residents of the borough wherever they attend a Family Planning Association clinic. The Corporation also agreed to pay similar reimbursement to the Brook Advisory Clinics, and to introduce a limited vasectomy service. The domiciliary family planning service which is provided directly by Corporation staff, was also extended. More clinics were opened by the Family Planning Association, and additional sessions provided to cope with increasing demands.

Health Service Reorganisation

The anticipated decision not to co-ordinate health services under local authority control was received with regret, and every effort made to ensure that the new Area Health Board for Croydon would be based on the area of the London Borough. Since 1948 the Croydon Health Department has accepted the primary duty to strive for integrated local services to minimise the disadvantages of separate administrative systems. With continued goodwill and effort the success of these efforts should not be lost under the new system to be imposed. If this is the case an improved service to the public should be forthcoming.

Against this background of doubts and uncertainty my thanks are due to the staff of the Department who have not been distracted from their duties, and to the Chairman and Members of the Committee, unchanged in their wish to do all that is possible to improve services available to the residents of the borough.

I am

Yours faithfully,

S.L. WRIGHT,

*Medical Officer of Health
and Principal School Medical Officer.*

SUMMARY OF STATISTICS FOR 1972

Area, 21,395 acres
 Population (Census 1971) 232,870 Total population (estimate of Registrar General) 234,000 (Midsummer, 1972)
 Number of Domestic Dwellings, 109,561
 Residual Value of Borough 1972 as from 1.4.72 £23,504,807
 Product of a Penny Rate for Local Authorities of Council purposes, £739,000
 Mixed Rate in the E. B. for the year from 1.4.72

| Live Births | Males | Females | Total |
|--------------|-------|---------|-------------|
| Legitimate | 2,271 | 2,423 | 4,694 |
| Illegitimate | 259 | 322 | 581 |
| | | | <hr/> 4,952 |

Illegitimate Live Births 1972 581
 Live Birth Rate per 1,000 of the population (England and Wales) 14.6

STATISTICS

Stillbirths 61
 Stillbirth rate per 1,000 total live and still births (England and Wales) 1.2

Total Deaths (Live and still) 4,952

Infant Deaths 89

Infant Mortality rate per 1,000 live births 14

(England and Wales) 17

Infant Mortality rate per 1,000 live births that survive infant deaths 13

Infant Mortality rate per 1,000 live and still births 20

Maternal mortality rate (including abortions)

per 1,000 total live and still births 10

(England and Wales) 12

England-wide Maternity rate (live and still)

per 1,000 total live births 8

(England and Wales) 10

Perinatal Mortality rate (stillbirths + deaths during the first

week) per 1,000 total live and still births 21

(England and Wales) 23

Maternal Deaths (excluding abortions) 2

Maternal Mortality rate (including abortions)

per 1,000 total live and still births 0.85

Deaths, 3,820 Death-rate per 1,000 of the estimated population 11.5

(England and Wales) 12.1

Death-rate (as adjusted by age-standardized factor 0.85) 9.6

SUMMARY OF STATISTICS FOR 1972

Area, 21,395 acres

Population (Census 1971) 333,870 Total population (estimate of Registrar General) 334,000 (Midsummer, 1972)

Number of Domestic Dwellings; 109,561

Rateable Value of Borough 1972 as from 1.4.72 £23,504,607

Product of a Penny Rate, for London Borough of Croydon purposes, £239,000

Mixed Rate in the £. 81.5p (for the year from 1.4.72)

| Live Births | Males | Females | Total |
|---|-------|---------|--------------|
| Legitimate | 2,271 | 2,123 | 4,394 |
| Illegitimate | 250 | 222 | 472 |
| | | | <u>4,866</u> |
| Illegitimate Live Births per cent. of total live births | | | 10 |
| Live Birth Rate (as adjusted by comparability factor 0.97) | | | 14.6 |
| (England and Wales) | | | 14.8 |
| Stillbirths | | | 61 |
| Stillbirth rate per 1,000 total (live and still) births | | | 12 |
| (England and Wales) | | | 12 |
| Total Births (Live and Still) | | | 4,927 |
| Infant Deaths | | | 69 |
| Infant Mortality rate per 1,000 live births | | | 14 |
| (England and Wales) | | | 17 |
| Infant Mortality rate per 1,000 legitimate live births | | | 13 |
| Infant Mortality rate per 1,000 illegitimate live births | | | 30 |
| Neo-natal Mortality rate (First four weeks) | | | |
| per 1,000 total live births | | | 10 |
| (England and Wales) | | | 12 |
| Early neo-natal Mortality rate (First week) | | | |
| per 1,000 total live births | | | 9 |
| (England and Wales) | | | 10 |
| Perinatal Mortality rate (stillbirths + deaths during the first week) per 1,000 total live and still births | | | 21 |
| (England and Wales) | | | 22 |
| Maternal Deaths (excluding abortion) | | | 2 |
| Maternal Mortality rate (including abortion) | | | |
| per 1,000 total live and still births | | | 0.41 |
| Deaths, 3,828 Death-rate per 1,000 of the estimated population | | | 11.5 |
| (England and Wales) | | | 12.1 |
| Death-rate (as adjusted by comparability factor 0.99) | | | 11.4 |

Marriages

The number of marriages solemnised in 1972 in the Croydon Registration District was as follows:—

| | |
|---|-------|
| Church of England | 918 |
| Non-conformist places of worship | 596 |
| The Register Office | 1,496 |

When supplying these figures Mr. Davies, the Croydon Superintendent Registrar, kindly analysed recent trends and commented:—

“During the year the percentage of minors under the age of 18 years giving notice remained fairly consistent at 5.4% compared with 6.01% for 1971.

By comparison with last year's figures there has been a continued increase in the number of marriages taking place at the Register Office.

Notification of Births

Notifications were received in respect of confinements conducted by:—

| | <i>Live Births</i> | <i>Still Births</i> | <i>Total</i> |
|-----------------|--------------------|---------------------|--------------|
| Midwives | 3,280 | 34 | 3,314 |
| Doctors | 817 | 20 | 837 |
| | <u>4,097</u> | <u>54</u> | <u>4,151</u> |

Accommodation for Confinements

The following table shows where babies were born in the Borough of Croydon during the whole of 1972. 763 residents had babies outside Croydon and 66 non-residents were confined in Croydon.

| | <i>Number</i> | <i>Percentage</i> |
|--------------------------------------|---------------|-------------------|
| In Private Houses | 692 | 16.7 |
| In Public Institutions | 3,452 | 83.1 |
| In registered Maternity Homes | <u>7</u> | .2 |
| <i>Total</i> | <u>4,151</u> | |

THE PREVENTION AND CONTROL OF TUBERCULOSIS

Dr. R. H. J. Fanshawe, M.D., F.R.C.P.
Chest Physician

Measures for the prevention and treatment of Tuberculosis are directed from the Chest Clinic and the results during 1972 may be regarded as satisfactory.

Incidence

86 cases of Respiratory Tuberculosis and 21 cases of Non-Respiratory Tuberculosis were notified on Form A during 1972 (Table 1 - Formal Notifications). Of these 52 males and 19 females were Respiratory cases and 9 males and 12 females were Non-Respiratory. In addition 19 Respiratory cases and 9 Non-Respiratory cases came to our notice as new cases otherwise than by notification.

COMMUNICABLE DISEASES

The total number of new cases of Tuberculosis coming to our attention at the Federal Office of Health during the year 1972 by notification or otherwise was 130.

84 of these were cases of Respiratory Tuberculosis, 69 in males and 25 in females.

There were two cases of Non-Respiratory Tuberculosis among children under 15 years. The number of cases in adults was 24.

The incidence rate of Tuberculosis, all forms, was 0.32 per 1,000 of the population, for Respiratory Tuberculosis 0.25 and for Non-Respiratory Tuberculosis 0.07 per 1,000 population. The notification rate was 0.26 per 1,000.

Notification Register

Number of cases of Tuberculosis remaining on the Notification Register on 31st December, 1972

| Sexes | Respiratory | | Non-Respiratory | | | Total Cases |
|-------|-------------|---------|-----------------|---------|-------|-------------|
| | Males | Females | Males | Females | Total | |
| 822 | 268 | 220 | 71 | 50 | 169 | 1,091 |

In 1972 the death-rate from all forms of Tuberculosis was 0.04 per 1,000 population.

The rate from Respiratory Tuberculosis was 0.04 and the rate for Non-Respiratory 0.00.

In 1972 the total number of deaths was 14. All of the deaths occurred in the age groups 45 years and over. There was no death in children or young adults.

For Notifications, See Appendix, page 123.

THE PREVENTION AND CONTROL OF TUBERCULOSIS

Dr. R.H.J. Fanthorpe, M.D., F.R.C.P.
Chest Physician

Measures for the prevention and treatment of Tuberculosis are directed from the Chest Clinic and the results during 1972 may be regarded as satisfactory.

Incidence

68 cases of Respiratory Tuberculosis and 21 cases of Non-Respiratory Tuberculosis were notified on Form A during 1972 (Table 1 - Formal Notifications). Of these 52 males and 16 females were Respiratory cases and 9 males and 12 females were Non-Respiratory. In addition 16 Respiratory cases and 5 Non-Respiratory cases came to our notice as new cases otherwise than by notification.

The total number of new cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the year 1972 by notification or otherwise was 110.

84 of these were cases of Respiratory Tuberculosis; 60 in males and 24 in females.

There were two cases of Non-Respiratory Tuberculosis among children under 15 years. The number of cases in adults was 24.

The incidence rate of Tuberculosis, all forms, was 0.32 per 1,000 of the population, for Respiratory Tuberculosis 0.25 and for Non-Respiratory Tuberculosis 0.07 per 1,000 population. The notification rate was 0.26 per 1,000.

Notification Register

Number of cases of Tuberculosis remaining on the Notification Register on 31st December, 1972

| RESPIRATORY | | | NON-RESPIRATORY | | | Total Cases |
|-------------|---------|-------|-----------------|---------|-------|-------------|
| Males | Females | Total | Males | Females | Total | |
| 522 | 398 | 920 | 71 | 96 | 167 | 1,087 |

In 1972 the death-rate from all forms of Tuberculosis was 0.04 per 1,000 population.

The rate from Respiratory Tuberculosis was 0.04 and the rate for Non-Respiratory 0.00

In 1972 the total number of deaths was 14. All of the deaths occurred in the age groups 45 years and over. There was no death in children of school age.

For Notifications, See Appendix, page 123.

Deaths from Non-Respiratory Tuberculosis

During 1972 no death was certified to be due to Non-Respiratory Tuberculosis.

Co-ordination with the Health Department

During the year 22 children were referred by the School Health Service of the Public Health Department.

Extra Nourishment

Provision of special nourishment in the form of milk was granted to 32 selected cases for varying periods during the year and 27 cases were in receipt of extra nourishment at the end of the year.

The Chest Clinic and Home Visiting

1,517 new cases were examined during the year. 70 were found to be definitely tuberculous.

The total number of attendances for examination at the Chest Clinic was 14,600

The Clinic doctors paid 176 home visits and the Tuberculosis Visitors 3,786 visits for Clinic purposes. In addition the Tuberculosis Visitors made 98 primary visits for the purposes of the Notification Register. There were also 1,004 ineffective visits.

The General Practitioner Miniature X-Ray Service continues to function in a satisfactory way and is well used by local practitioners.

The results of this service are summarised below:—

| | | | | | | |
|--|-----|-----|-----|-----|-----|-------|
| Number of miniature films taken | ... | ... | ... | ... | ... | 4,489 |
| Number of patients recalled for examination and large film | ... | ... | ... | ... | ... | 425 |
| Number of active cases of Pulmonary Tuberculosis found | | | | | | 19 |
| Number of cases of lung cancer found | ... | ... | ... | ... | ... | 50 |

Contact Examination

During 1972, 527 persons were examined for the first time as contacts of notified cases of Tuberculosis.

Of these contacts, 7 were found to be tuberculous. This is equal to a Tuberculosis rate per 1,000 contacts of 13 compared with 0.32 per 1,000 of the general population. In addition two were found to be tuberculous who had been under observation from previous years.

B.C.G. Vaccination

The use of B.C.G. vaccination for contacts has been continued during 1972 and regular sessions were held at the Clinic for this purpose. 559

contacts were successfully vaccinated during the year. In addition 22 nurses and domestics were successfully vaccinated, and 43 babies of tuberculous parents were vaccinated in hospital during the neonatal period.

B.C.G. Vaccination for School Leavers

| | | | | | | |
|--------------------------------------|-----|-----|-----|-----|-----|-------|
| Total number of children skin tested | ... | ... | ... | ... | ... | 3,971 |
| Number found to be negative | ... | ... | ... | ... | ... | 3,342 |
| Number vaccinated with B.C.G. | ... | ... | ... | ... | ... | 3,326 |

PUBLIC HEALTH LABORATORY SERVICE

Very considerable use has been made of the facilities for bacteriological and other laboratory examinations of public health nature. I take this opportunity to thank Dr. W.R.G. Thomas, Consultant Bacteriologist at Mayday Hospital for his ready assistance and most helpful advice which have been available at all times.

For detailed figures, see Appendix, page 120-

COMMUNICABLE DISEASES

No special problems arose. The two cases of enteric fever were both due to infection acquired abroad. Notifications of measles were half as numerous as in 1971. This was due not to vaccination, but to the 2 year cycle of this infection. Meningococcal meningitis which responds readily to treatment still causes deaths in very young children who succumb too rapidly for intervention to be possible. It is a risk of infants born into large families with barely adequate accommodation, of which one or more members are healthy temporary carriers of the germ. No feasible measures are known to prevent the two fatal cases recorded in 1972.

Immunisation

Acceptance rates for protection of children against poliomyelitis and diphtheria were maintained at over 75%. Measles vaccination was less popular than in 1971. Efforts to achieve a 90% acceptance which is suggested as essential to eliminate this illness seemed unjustifiable and unlikely to succeed even with an unfair diversion of scarce resources. Vaccination against rubella proceeded without difficulties, in the schools. In addition

Dr Thomas operated a service of offering female staff of child bearing age in such schools, blood tests to detect immunity to rubella. Results were also sent to the family doctor so that a woman found susceptible could be offered vaccination with appropriate safeguards if this was deemed advisable.

Sexually Transmitted Diseases

Additional treatment facilities were provided at the Special Clinic at the Croydon General Hospital. Efforts to promote preventive publicity are detailed by the Principal Health Education Officer, but no rapid improvements can be anticipated.

Undoubtedly these diseases cause discomfort or chronic ill health to those infected, and economic loss to the community, but the only deaths directly attributable in 1972 were 8 due to "Syphilis and its sequelae". Since 3 of the individuals involved were over 55 and the remainder over 75 years of age, they could not have had the benefits of antibiotic treatment. Readiness to accept advice to attend the special clinics, as indicated by mounting numbers, does give hope that serious sequelae will be prevented, even if prevalence is not reduced.

ANTE AND POST NATAL CLINICS

The united service of hospital and local authority clinics continued. The fall in attendance based on only the provision of accommodation at the Lough Road Clinic. Nevertheless plans for possible expansion were considered.

The only hospital's extension would be at the garden of St. Mary's Hospital and subject the bar around of property being donated was not deemed a practicable proposal at the present time. The further action was taken.

Attendance during the year was -

| | |
|------------------------------------|-------|
| Antenatal | 2,073 |
| Post natal | 400 |
| Patients seen for first blood test | 4,000 |
| Patients found to have anaemia | 27 |

PERSONAL HEALTH SERVICES UNDER THE NATIONAL HEALTH SERVICE ACT

Midwives Act 1952 - 53

The number of midwives who notified their intention to practise as midwives within the Borough (including those in hospitals) and who were practising at the end of the year was 147. All held the certificate of the Central Midwives' Board. The Medical Supervisor of Midwives visits midwives in private practice and nursing homes, and the superintendent Municipal Midwife carries out these duties for the auxiliary midwives.

Congenital Deafness

The scheme introduced in 1952 continued unchanged, regular returns being made to the Registrar General. A total of 134 babies with congenital deafness was notified in 1953.

For details see Appendix, page 37.

PAEDIATRIC ASSESSMENTS

A senior medical officer of the Corporation who holds a joint appointment with the Hospital Management Committee continued to act as a member of the paediatric team at Heyday Hospital, and examines regularly weekly born infants in the Maternity unit. She dealt with 1,290 babies during 1953.

ANTE AND POST NATAL CLINICS

The unified service of hospital and local authority clinics continued.

The fall in attendance eased slightly the pressure on accommodation at the Lodge Road Clinic. Nevertheless plans for possible adaptation were considered.

The only feasible extension would bisect the garden of St. Mary's Hospital and against the background of possibly falling demand was not deemed a practicable proposal at the present time. No further action was taken.

Attendances during the year were:—

| | |
|------------------------------------|-------|
| Ante-Natal | 5,073 |
| Post-Natal | 893 |
| Patients seen for first blood test | 4,010 |
| Patients found to have antibodies | 27 |
| Patients sent to Special Clinic | 7 |

The numbers attending the Relaxation and Mothercraft classes increased again in 1972 - Midwives, Health Visitors and Physiotherapists continue to work together and combine to provide this service. In all 1,792 mothers attended these classes and made 6,907 attendances.

Midwives Acts 1902 - 51

The number of midwives who notified their intention to practice as midwives within the Borough (including those in hospitals) and who were practising at the end of the year was 147. All held the certificate of the Central Midwives' Board. The Medical Supervisor of Midwives visits midwives in private practice and nursing homes, and the superintendent Municipal Midwife carries out these duties for the domiciliary midwives.

Congenital Malformation

The scheme introduced in 1963 continued unchanged, regular returns being made to the Registrar General. A total of 134 babies with congenital conditions was notified in 1972.

For details see Appendix, page 97.

PAEDIATRIC ASSESSMENTS

A senior medical officer of the Corporation who holds a joint appointment with the Hospital Management Committee continued to act as a member of the paediatric team at Mayday Hospital, and examine routinely newly born infants in the Maternity unit. She dealt with 1,390 babies during 1972.

The Hospital with a special grant from the Regional Board built an Assessment Unit to be under the charge of the Consultant Paediatrician. Dr. Burkinshaw kindly sought our help to make this a combined Hospital and local authority service and agreed to support an application for a further joint appointment of a Corporation medical officer with special training in the subject of developmental assessment. It was anticipated that the Unit would open early in 1973.

Child Health Centres

The demand for this service which combines the education of parents, developmental assessment and immunisation of children has again fallen this year overall, although the numbers of attendances at well-baby clinics run by general practitioners and health visitors has increased. The overall fall in attendances is no doubt due to the falling birth rate.

For detailed figures see Appendix page 102.

Welfare Foods and Medicaments

The price of National Dried Milk was maintained at 20p per carton of 20 ozs. during 1972, but a steady decline in sales was recorded.

The supply of Orange Juice was officially discontinued by the Department of Health and Social Security as a welfare food item on 31st December 1971, and all stock was sold by April 1972. Vitamin C was included with the Vitamin A & D tablets at a cost of 6p per container.

HEALTH CENTRES

The Centre at New Addington has functioned reasonably well but there have been difficulties in recruiting and retaining reception and clerical staff. The pressures on these sections have been recognised by the Department of Health, and a new building guide allows much more generous accommodation for these officers.

The South Norwood Health Centre plans were altered to include these improvements and a tender was accepted in December for its construction.

Doctors in the South Croydon area of the borough expressed an interest in a Health Centre and the Health Committee agreed to an official approach to the Executive Council.

THE WORK OF THE COMMUNITY NURSING SERVICE

Miss A. Hayward, A.R.R.C., T.D., S.R.N., S.C.M., H.V. Cert.,
Director of Nursing Services

During 1972, preparations were being made nationally and internationally to improve and safeguard professional standards of nurses. In Brussels a watching brief was kept as Britain moved nearer to joining the European Economic Community; at home, interest was building up as re-organisation of the National Health Service came closer, and in October the Committee on Nursing, under the chairmanship of Professor Asa Briggs, published their report. All three events must have long term effects on nursing, but the Asa Briggs' proposals and National Health Service re-organisation will affect the service sooner. Staff morale has remained high in spite of the original interpretation that Health Visitor training was to leave the main stream of adult education and join Nursing and Midwifery training in Colleges of Nursing. Anxiety has also been expressed by all grades of nurses about the number of levels of Management proposed for the unified service.

Discussions between the Council and the Department of Health and Social Security about an appropriate management structure for the nursing service took place in the early part of the year. Final agreement was reached in July, when approval was given for functional management. (See chart on page 100). Croydon has had a Chief Nursing Officer since 1965 and the new structure required few alterations in the existing pattern. The transition was complete and all personnel were in post by the end of the year.

In preparation for unification of the National Health Service at local level, the Establishment Committee agreed that:—

- (a) A Nursing Officer (Home Nursing) should be allocated to each of the main hospitals in the group to act as Liaison Officer,
- (b) the existing Health Visitor Liaison Scheme with the Paediatric Department should be extended,
- (c) one week's community experience should be offered to all line managers in the hospital service,
- (d) and one to two days community experience should be offered to ward sisters.

The Hospital Establishment Committee welcomed these proposals and agreed that Nurse Managers in the Community Nursing Service should spend one week with their opposite number in the Hospital Service. Considerable progress had been made on the first two proposals by the end of the year and in November the first exchange of Nursing Officers took place. This proved to be well worthwhile. All community staff and most of the hospital staff will have participated by April 1st 1974.

Miss Friend, O.B.E. the Chief Nursing Officer at the Department of Health and Social Security, spent a day with the staff during July. They were pleased to welcome her to Croydon and discuss their work with her.

Domiciliary Midwifery Service

The falling birth rate has been reflected in the number of patients delivered at home and in the number of patients discharged early from hospital. Two midwives who resigned during the year have not been replaced. All the remaining midwives have been equipped with radio telephones. When "blind spots" have been eradicated, a more efficient service should ensue. No doubt the midwives will feel under greater pressure as they will be more readily available and a different style of management may be needed.

One of the Hospital Maternity Units had to close due to infection and with the help of the Home Nurses and Health Visitors, mothers and babies were discharged for home nursing. This enabled the Unit to be re-opened in a shorter space of time.

Health Visiting Service

The Health Visiting Service has worked under considerable pressure this year due to the shortage of staff. The six sponsored students who successfully completed their training were insufficient in number to fill the vacancies. It is especially regrettable that it was only possible to recruit five full time and one part-time student for current training.

It becomes increasingly clear that with the rising cost of living in the London area, and loss to the profession of young Health Visitors due to early marriage and pregnancy, that recruitment and retention of staff will continue to be difficult. It is, therefore, essential that work which does not require the special skills of highly trained Health Visitors is delegated to less well qualified staff. To determine more precisely how the Health Visitors are spending their time, a detailed survey of their work and that of the School/Clinic Nurse was undertaken for two weeks in September/October. The results of this survey will not be analysed until later in 1973.

The attachment and alignment of Health Visitors to General Practitioners continued slowly as staffing numbers allowed. The wider range of work thus undertaken by the Health Visitors is reflected in this year's statistics.

At the suggestion of one of the General Practitioners, two Health Visitors started a Slimming Club at the Parkway Health Centre one evening a week. It has proved a very successful venture.

Home Nursing Service

Established posts were increased during the year but this barely kept pace with the increasing work load. Considerable difficulty has been experienced in recruiting male nurses. Housing accommodation has not compensated for the higher salaries which can be earned in the Hospital

Service, particularly in psychiatric hospitals. More patients were nursed at home than last year, but the significant increase is in those who require the greatest care and nursing skill, the terminally ill. Increasing involvement in surgery sessions (excluding the Health Centre) is reflected in the number of treatments which increased by nearly 100%.

At the Health Centre, the number of patients treated increased by 100% compared with last year. This was due to the fact that the Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

The Health Centre was opened in 1977 and the number of patients treated in the Health Centre was 100% of the number treated in the Health Centre in 1977.

HEALTH EDUCATION AND HOME SAFETY

Miss D.S. Elliott, S.R.N., H.V.Cert., Dip., H.E.,
Principal Health Education Officer.

"Nature and Nature's Laws lay hid in night;
God said, Let Newton be! - and all was light".

Alexander Pope.

If "Health Education" were substituted for "Newton" one would be voicing the opinions of those who expect changes in behaviour and reduction in man-made ill-health to occur as a direct result of educational effort. It is, however, only a part, but an essential part of the accumulation of environmental and personal experiences which continue to mould attitudes and behaviour throughout life. Offered at appropriate times Health Education can have either a catalytic or reinforcing effect.

The increasing scope of the Health Education Section and the demands made upon it since tentative beginnings in 1957 bear witness to public and professional interest in health information and in opportunities for discussion with skilled staff.

During the year routine work and in-service training continued as usual with the close co-operation of Health Education staff, Doctors and Health Visitors, District Nurses, Midwives, Public Health Inspectors, Social Workers, Pharmacists and Teachers. There was constant monitoring and renewal of teaching equipment, programmes and background information for staff.

The first edition of "Health Education News" with a foreword written by Dr. S.L. Wright, was published and circulated to 1,000 General Practitioners, School and Education staffs, Public Health and Social Services' staffs, Hospital and Occupational Health staffs and many others. It included a description of the Health Education team and short items of practical interest for the different disciplines.

Other new ventures during the year included:—

(a) Health Education in General Practice

In November, following enquiries and several visits to the Health Education Section to view educational materials, a General Practitioner in South Croydon began Health Education sessions in surgery premises. With the help of the Health Visitor attached to the Group Practice and a member of the Health Education staff, weekly sessions were held between 12 p.m. and 1 p.m. Topics included "home nursing", "heart disease" and "nutrition". The first audiences were small but the topics proved to be relevant. At the end of the year plans were being made to publicise sessions more effectively. It was clear that a need existed for this type of informal education.

(b) *The Tuesday Club*

The Tuesday Club originated from a suggestion from the Committee of the Local Association for the Blind. It was felt that there was a need for group meetings at which partially sighted and blind elderly housebound people could participate in simple physical exercise. The aim was to encourage more confidence in their movements and to offer some mental stimulation.

After discussion with a variety of interested people and a Health Education Officer, it was decided that a weekly physical exercise session to music should be tried on Tuesday mornings - hence the name "Tuesday Club".

The first meeting was held in June and 15 members were transported to Bedford Hall by minibus driven by a volunteer. The ages ranged from 70 to 96 years. The group was delighted to meet and so willing to enter into the spirit of the meeting that the Health Education Officer's slight anxiety about the suitability of the activity was soon dispelled. Sessions have been held weekly ever since. They began with simple exercises for neck, hands, feet and ankles which were practised to music with the group sitting down, and have now progressed from gentle to fairly strenuous exercises involving the use of the whole body. The Health Education Officer now knows the members well and has informal discussions with them about many health problems. On their part the members of the group enjoy coming out to the sessions and look forward to them as social occasions. They have remarked that the exercises relieve muscle cramp, "pins and needles" in the neck, make them feel fitter and brighter and that the music makes the whole meeting enjoyable. The Health Education Officer on her part learnt a great deal about guiding and handling the blind, the importance of making one's speech clear and descriptive and received lessons in how the blind are taught to count, handle money and read Braille. She was most grateful throughout for the constant and vital support of the Chairman of the Local Association for the Blind, Mr. Thornton, and his wife; Mr. H. Steward a Committee member who initiated the scheme, and also his wife.

(c) *"Don't Hoard Medicines" Campaign - 3rd to 24th March*

Mrs. E.B.E. Hughes, M.P.S., P.H.C., Chairman of the Campaign Committee (of 6 Pharmacists), worked with the co-operation of the Principal Health Education Officer on a campaign to persuade the public to turn out their old unwanted medicines and take them to their Chemist for destruction. The following is an extract from Mrs. Hughes' report on the campaign:-

"Drugs Brought In:- It was possible to examine each bottle as it was emptied (at Mayday Hospital Pharmacy). Many unfinished antibiotic treatments were returned. Different kinds of tablets were frequently found in one bottle. Many drugs were extremely old (some pre-War) and in a terrible condition. Some preparations had self diagnosis on the label e.g. "Bob's tummy

pills", "itch pills", "shock", "nerves", "Dad's tablets". In some cases large quantities of tablets were returned, but this could have been due to the death of the patient. Drugs had often been removed from their original containers to something less suitable, such as an envelope.

Assessment

38% of returned medicines were Central Nervous System drugs. 19% were over-the-counter remedies. Only 3% remained unidentified.

Final Results

The public returned ½ ton of medicines (gross weight). Approximately ¼ million tablets and capsules were handed in weighing 247 lbs. and also 12½ gallons of liquid preparations. It is obviously necessary to encourage the public to destroy their unwanted medicines.

Conclusion

The weight of drugs brought in for disposal increased each week and illustrated the time required by the public firstly to become aware of the campaign and then to take action. If the campaign were to be repeated it might well be extended for another week". For detailed figures of the campaign see appendix pages 110-112.

(d) Sexually Transmitted Diseases

Publicity campaigns built round posters and leaflets on this topic were unsatisfactory and difficult to mount especially in large residential areas. The protection afforded by the Indecent Advertisements (Amendment) Act, 1970 as yet makes little difference to the willingness of local people to allow this sort of material to be displayed in public.

Attractive circular, adhesive, non-defaceable notices, some in blue and some in pink, giving a simple reassuring message about free, confidential advice and treatment were designed in the Health Education Section. They were offered for display to the local Chamber of Commerce, Shops, Offices, Factories, Pharmacists, Railway Stations, Public Health and Cleansing Departments. The take-up of notices and other publicity material was patchy and reinforced the need for the topic to be an integral part of general health education of the public and especially of school children, when opportunities are contrived for discussion and/or counselling. Some 80% of High Schools in the Croydon area now include Health Education courses in their curriculum. These deal firstly with the normal sequence of growth, development and behaviour and continue with some of the health hazards of today including the sexually transmitted diseases.

A pamphlet "The Health Services and You" is issued annually by the Health Department to all school leavers and includes information about sexually transmitted diseases and where to go for help.

In-service training courses for teachers are now held annually and include one session on sexually transmitted diseases given by Dr. J. Barrow, M.R.C.S., L.R.C.P., Consultant Venereologist, Croydon General Hospital.

The Health Education Section has a good selection of reference books on sexually transmitted diseases in the Library and samples of current pamphlets used in connection with talks are also available. The Department also owns copies of the film "A 1/2 Million Teenagers" which is suitable for young people and other relevant material from different sources.

The Principal Health Education Officer is also in regular contact with the Croydon Occupational Health Nurses Group of the Royal College of Nursing and is encouraging them to undertake as much health education as possible in the 16 - 25 year age group.

(e) Smoking and Health

No anti-smoking clinics are in operation at present. Education about smoking and health is included in all health education programmes and wide publicity of the Health Education Council's material has been given throughout the town.

DENTAL SERVICE (MATERNITY AND CHILD WELFARE)

B.J. West, Esq., L.D.S., B.C.S.(Eng.) - Chief Dental Officer

The treatment of the priority classes is an integral part of the Public Health Service in Croydon and must be viewed together with the report on the School Dental Service; thus the adverse factors prevailing will apply equally to both. The shortage of staff has had a very limiting effect upon the child welfare service in particular. The much needed expansion in this field, which is essential to the general improvement of dental health in Croydon, cannot take place until the number of dental officers employed not only reaches the present establishment figure, but exceeds it.

At present the only centre which sends appointments for 3 year old children on a routine basis is the Sanderstead Clinic, though Waddon Clinic do have a scheme for inviting 3 year old children to a Christmas Party with the offer of dental inspections at a later date. The routine examination of 3 year olds and their continued attendance afterwards must be extended to other centres in the Borough as soon as possible, but a large increase in staff will be required before we are able to do so. Although only two centres have schemes for sending routine examination appointments for 3 year olds, all the remaining centres will and do treat pre-school children on request.

In spite of the shortage of staff the number of pre-school children receiving at least one course of treatment again increased from 952 in 1971 to 984 in 1972, though the total number of visits and additional courses of treatment fell. There was also a reduction in all forms of treatment and in the number of sessions devoted to the priority services.

A similar situation exists with the treatment of expectant and nursing mothers, though this is in line with the trend which has been prevailing for a number of years. For example:—

| | | | | | | | | | |
|---------|------|---------|------|---------|-----|-------|-----|------------|----------|
| In 1952 | 64.9 | mothers | were | treated | for | every | 100 | pre-school | children |
| 1962 | 91 | " | " | " | " | " | " | " | " |
| 1970 | 19.8 | " | " | " | " | " | " | " | " |
| 1971 | 15.2 | " | " | " | " | " | " | " | " |
| 1972 | 10.1 | " | " | " | " | " | " | " | " |

This is an indication that whilst more pre-school children, whose treatment can be followed through for a number of years, are being brought to the Borough's clinics for treatment, mothers are attending the General Dental Practitioners. This trend should be encouraged for the benefit of both groups of patient. Much more, however, needs to be done to provide an adequate cover for pre-school children. There are still too many children entering school with grossly decayed teeth.

DEAFNESS

All infants are screened for deafness during the first year of life either in the Child Health Centres or at home

For detailed figures see Appendix, page 99.

CHIROPODY

The system of using the services of approved chiropodists working in their own surgeries was continued and attendances rose steadily. Satisfactory reports on the premises and mode of practice of all chiropodists in the scheme were received from the Corporation's visiting specialist. Domiciliary treatment was also included, but the fees came out of the financial allocation allowed to each practitioner. It was thus left to individual chiropodists to decide how they allocated services within their global budgets.

The scheme covers elderly persons, expectant mothers and the permanently handicapped.

It has proved a successful and popular service, and requests for increases were limited only by financial consideration. For the past five years in New Addington, the complete absence of any private chiropodist's surgery within the scheme has necessitated the provision of a Corporation clinic, and the engagement of a part-time chiropodist for 3 sessions a week. Similar facilities were provided at the "Waylands" Training Centre where up to 100 physically handicapped persons may attend each day and many need chiropody.

Additional chiropody services were provided at the Sanderstead Clinic where 653 treatments were provided and a further surgery commenced at the Bensham Day Centre where 145 treatments were given.

On December 31st 1972, 30 chiropodists were operating this scheme. During the period January 1st to December 31st 1972 they gave 24,841 treatments at their surgeries and 9,346 by domiciliary visits. 739 treatments were given at Parkway Clinic, New Addington and 636 at "Waylands".

DEAFNESS

EARLY CHILDHOOD DEAFNESS

All infants are screened for deafness during the first year of life either in the Child Health Centre or at home.

Appendix page 22

The treatment of deafness is a long and difficult task. It is essential that the child should be brought to the attention of the Child Health Centre as early as possible. The Child Health Centre will refer the child to the appropriate specialist.

CHIROPODY

It is essential that the child should be brought to the attention of the Child Health Centre as early as possible. The Child Health Centre will refer the child to the appropriate specialist.

The system of referral for deafness is as follows: All infants are screened for deafness during the first year of life either in the Child Health Centre or at home.

to be referred to the appropriate specialist. The Child Health Centre will refer the child to the appropriate specialist.

in New Addington, the complete absence of any private chiro-podist's surgery within the area has necessitated the provision of a Chiropractic Clinic, and

in the assessment of a patient who is referred for 5 sessions a week. Similar facilities were provided at the Chiropractic Training Centre where up to 100

Additional chiro-podist services were provided at the Chiropractic Clinic. The Chiropractic Clinic was provided and a further surgery commenced at the

On December 31st 1972, 30 chiro-podists were working the scheme. During the period January 1st to December 31st 1972, they gave 24,841 treat-

ments at their surgeries and 2,286 by domiciliary visits. 139 treatments were given at Parkway Clinic, New Addington and 638 at 1/21, 1/22, 1/23, 1/24, 1/25, 1/26, 1/27, 1/28, 1/29, 1/30, 1/31, 1/32, 1/33, 1/34, 1/35, 1/36, 1/37, 1/38, 1/39, 1/40, 1/41, 1/42, 1/43, 1/44, 1/45, 1/46, 1/47, 1/48, 1/49, 1/50, 1/51, 1/52, 1/53, 1/54, 1/55, 1/56, 1/57, 1/58, 1/59, 1/60, 1/61, 1/62, 1/63, 1/64, 1/65, 1/66, 1/67, 1/68, 1/69, 1/70, 1/71, 1/72, 1/73, 1/74, 1/75, 1/76, 1/77, 1/78, 1/79, 1/80, 1/81, 1/82, 1/83, 1/84, 1/85, 1/86, 1/87, 1/88, 1/89, 1/90, 1/91, 1/92, 1/93, 1/94, 1/95, 1/96, 1/97, 1/98, 1/99, 1/100.

These figures show that the demand for chiro-podist services is increasing. It is essential that the child should be brought to the attention of the Child Health Centre as early as possible. The Child Health Centre will refer the child to the appropriate specialist.

WORK OF THE PUBLIC HEALTH INSPECTORS

W. Hayward, F.A.P.H.I., Chief Public Health Inspector

I have the honour to submit a report on the work of the Public Health Inspectors for the year 1972.

It is appropriate to state in introducing this report that environmental hygiene and protection has taken on a new importance in recent years in the light of higher standards of living, technological advances in industry, increasing road and air transport and traffic noise, from the noise complaints problem associated with the domestic environment the subject has broadened to take in the general problem of noise generation, disposal of toxic waste, air pollution in its broadest sense and so on.

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Notwithstanding this development the time of the Inspectors has been taken up with basic and essential housing work, such as the discharge of the duties of the Public Health Inspector in the premises that are brought to his attention as an effort to achieve speedy relief from conditions that are thought to constitute a nuisance or health hazard.

The biggest single factor against progress in the housing repair sector is the shortage of building labour. The restrictions of new work coupled with the sheer amount of work available in the building industry results in a lack of interest in less-attractive repair work in occupied houses. This is the experience of many private owners and certainly the Council's Building Maintenance Manager who undertakes works of default on behalf of the Department.

During the year 14 British Rail cottages situated on an island site in the centre of the main line railway track at Selhurst were dealt with informally. The houses were sub-standard in character and it was found impractical to provide proper drainage. In view of the isolated nature of the site coupled with the noisy environment, the only satisfactory solution was demolition and this was carried out by the Board with some assistance from the Council in re-routing six of the residents concerned.

Two houses in Sydenham Road were made the subject of a clearance area and subsequently demolished.

Demolition or Closing Orders were made in respect of seven houses and ten basements or other parts of houses were closed.

In response to a Circular from the Department of the Environment requiring information about the condition of the housing stock of individual local authorities a 1% sample survey of the housing stock in the Borough was carried out during the year. The result of the survey could be considered reassuring and indicated that the condition of the housing stock in Croydon compares favourably with that in other London Boroughs.

WORK OF THE PUBLIC HEALTH INSPECTORS

W. Haworth, F.A.P.H.I., Chief Public Health Inspector

I have the honour to submit a report on the work of the Public Health Inspectors for the year 1972.

It is appropriate to state in introducing this report that environmental hygiene and protection has taken on a new importance in recent years in the light of higher standards of living, technological advances in industry, increasing road and air transport and traffic noise. From the more commonplace problems associated with the domestic environment the subject has broadened to take in the general problem of noise generation, disposal of toxic waste, air pollution in its broadest sense and sophistication of foods.

Notwithstanding this development the bulk of the time of the Inspectorate has been taken up with basic problems associated with housing, food control, offices and other work places and general sanitation including infectious disease control. The year past has been no exception in the pressures that are brought to bear in an effort to achieve speedy relief from conditions that are thought to constitute a nuisance or health hazard.

The biggest single factor against progress in the housing repair sector is the shortage of building labour. The attractions of new work coupled with the sheer amount of work available in the building industry results in a lack of interest in less-attractive repair work in occupied houses. This is the experience of many private owners and certainly the Council's Building Maintenance Manager who undertakes works of default on behalf of the Department.

During the year 14 British Rail cottages situated on an island site in the centre of the main line railway track at Selhurst were dealt with informally. The houses were sub-standard in character and it was found impractical to provide proper drainage. In view of the isolated nature of the site coupled with the noisy environment, the only satisfactory solution was demolition and this was carried out by the Board with some assistance from the Council in re-housing six of the families concerned.

Two houses in Sydenham Road were made the subject of a clearance area and subsequently demolished.

Demolition or Closing Orders were made in respect of seven houses and ten basements or other parts of houses were closed.

In response to a Circular from the Department of the Environment requiring information about the condition of the housing stock of individual local authorities a 1% sample survey of the housing stock in the Borough was carried out during the year. The result of the survey could be considered reassuring and indicated that the condition of the housing stock in Croydon compares favourably with that in other London Boroughs.

The appointment of a Specialist Technical Assistant to carry out duties in connection with hoists and lifts in offices and shops has given an added impetus to this work and good progress has been made.

The Borough's Smoke Control programme was continued with the making of Smoke Control Order number 15, this being the last within the old County Borough area. The programme will now be extended to the former Coulsdon and Purley U.D.C. area.

The difficulties associated with obtaining and retaining qualified Inspectors continue to be acute. Three recently-qualified Inspectors were lost to the Department during the year and at the time of writing this report there are four vacancies from an establishment of 17 District Inspectors. This will be aggravated in 1973 by the retirement of two Inspectors and it is only by maintaining a full complement of Trainee Public Health Inspectors and thus obtaining the services of newly-qualified Inspectors for at least some time afterwards that the Department can function reasonably well. This however inevitably results in added strain on the senior inspectorate.

In concluding my introduction to this my last report, I should like to express my appreciation for the support and encouragement of the Chairman, Vice-Chairman and the members of the Health and Public Services Control Committee, the guidance and confidence of Dr. S.L. Wright, Medical Officer of Health, and the very willing help and loyalty of the whole of my staff.

* * * * *

HOUSING

The following is a summary of work carried out in respect of the sanitary condition of dwelling houses during the year:—

| | | |
|---|---|-------|
| 1. Inspection of Dwelling Houses | | |
| (i) Total number of houses inspected for housing defects (under Public Health or Housing Acts) | - | 6,214 |
| (ii) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | | |
| (a) In Clearance Areas | - | 2 |
| (b) Other than in Clearance Areas | - | 7 |
| 2. Remedy of Defects during the year without service of Formal Notices - | | |
| Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers | | 435 |
| 3. Action under Statutory Powers during the year | | |
| (a) Proceedings under Sections 9 (1), 10, 12, and 170 of the Housing Act, 1957:— | | |
| (i) Requisitions for information as to ownership | - | 755 |
| (ii) Number of dwelling houses in respect of which notices were served requiring repairs | - | 395 |
| (iii) Number of dwelling houses which were rendered fit after service of formal notices | | |
| (a) By owners | | 249 |
| (b) By Local Authority in default of owners | | 55 |
| (b) Proceedings under Section 9 (1A) of the Housing Act, 1957:— | | |
| (i) Number of dwelling houses in respect of which Notices were served requiring repairs | - | 128 |
| (ii) Number of dwelling houses brought up to a reasonable standard after service of formal Notices | | |
| (a) By owners | - | 70 |
| (b) By Local Authority in default of owners | - | 13 |
| (c) Proceedings under the Public Health Acts - | | |
| (i) Requisitions for information as to ownership | - | 685 |
| (ii) Number of dwelling houses in respect of which notices were served requiring defects to be remedied | - | 823 |

| | | |
|---|---|-----|
| (iii) Number of dwelling houses in which defects were remedied after service of formal notices | | |
| (a) by owners | - | 679 |
| (b) By Local Authority in default of owners | - | 260 |
| (d) Proceedings under Sections 17 and 23 of the Housing Act 1957 - | | |
| (i) Number of dwelling houses in respect of which Demolition Orders were made | - | 3 |
| (ii) Number of dwelling houses demolished in pursuance of Demolition Orders | - | 3 |
| (iii) Number of dwelling houses demolished following informal action | - | 14 |
| (iv) Number of dwelling houses in respect of which Closing Orders were made | - | 4 |
| (v) Number of houses in respect of which Closing Orders were determined following repairs and renovations | - | 1 |
| (e) Proceedings under Section 18 of the Housing Act, 1957 | | |
| (i) Number of separate tenements or underground rooms in respect of which Closing Orders were made | - | 10 |
| (ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | - | 3 |
| 4. Houses in Multiple Occupation - | | |
| (i) Number of houses in multiple occupation inspected during the year | - | 242 |
| (ii) Number of houses in which defects were remedied following service of formal or informal notice under Sections 9(i) and 9(iA) Housing Act 1957 | - | 181 |
| (iii) Number of houses in which additional amenities were provided following service of formal or informal notices under Section 15 of the Housing Act 1961 | - | 156 |
| (iv) Number of houses in which fire prevention works were completed following service of formal or informal notices under Section 16, Housing Act 1961 - | - | 227 |

5. Housing Act, 1969

During the year 641 applications for Improvement Grants were referred to the Department by the Borough Valuer, and 732 visits of inspection were made to the Houses concerned.

6. Housing Act, 1969 and Housing Finance Act, 1972.

On 1st October, 1971 the Chief Public Health Inspector was delegated to deal with applications for Qualification Certificates and more than 600 outstanding applications were transferred from the Borough Valuer. By the end of this year 507 of these applications had been resolved whereby 146 Qualification Certificates were formally Issued and 117 Refused. New applications received during the year were also dealt with as follows:—

| | | |
|---|---|-----|
| Applications received | - | 432 |
| Qualification Certificates Issued | - | 171 |
| Qualification Certificates Refused | - | 182 |
| Applications withdrawn | - | 19 |
| Applications awaiting expiry of appeal period | - | 22 |
| Applications still under consideration | - | 38 |

7. Rent Act, 1957 - Certificate of Disrepair -

| | | |
|--|---|---|
| (i) Number of applications for certificates | - | - |
| (ii) Number of certificates issued | - | - |
| (iii) Number of applications by landlords for cancellation of certificates | - | 1 |
| (iv) Certificates cancelled | - | - |

COMMON LODGING HOUSES

Under the provisions of the Public Health Act, 1936, Common Lodging Houses are registered by the Council providing the premises are managed by competent persons and conform with the standards prescribed.

Surveys are carried out in areas where such premises are likely to exist but at the present time there is only one registered Common Lodging House within the Borough and this establishment, which is regularly inspected, is well maintained and conducted and, in providing casual accommodation for up to 20 men, is supplying a local need.

DRAINAGE

1,562 visits of inspection were made to premises where underground drains were in course of repair.

There are now 22 cesspools serving premises without main drainage.

POLLUTION OF RIVERS AND STREAMS

Inspection of the water courses within the Borough is carried out to ascertain if any obstructions or pollution exists and, when necessary, samples of the waters are taken for analysis.

The Scientific Adviser to the Greater London Council refers, in his Annual Report for 1971, to the very great improvement in the quality of the River Wandle water which is due mainly to the higher quality of the sewage effluent now discharged into the River.

PEST CONTROL

The Prevention of Damage by Pests Act requires that the occupier of any premises notifies the Local Authority if such premises are infested by rats or mice and it is gratifying to note that there has been some reduction in the number of rodent infestations reported since the previous year. The control of infestations in domestic premises is carried out, free of charge, by three full-time Rodent Operators who, during the year, dealt with 2,737 notifications involving 2,050 infestations and they made 13,177 visits to premises to carry out treatment. The occupiers of infested business premises are required to employ private contractors to carry out this work. Mice infestations have become a matter of concern in many areas throughout the country owing to the degree of resistance which this rodent has developed against the poison "Warfarin" and during the year the Ministry of Agriculture, Fisheries and Food instituted a survey to establish the extent of this problem and the introduction of remedial measures.

Regular inspections are made of premises where food is prepared or sold and particular attention is given to methods of prevention of rodent infestation. Corporation owned premises, including depots, school kitchens and serveries, etc, are periodically inspected for the presence of rodents and appropriate action is taken if the premises are infested.

Periodical testing and treatment of the sewer system is undertaken especially where a persistent surface infestation might be associated with the presence of rats in local sewers. No serious infestation of the sewer system has been detected.

Measures to control the increasing number of foxes in the Borough have continued and 189 complaints were received with the result that some 310 foxes were destroyed by shooting or gassing. Activities have also continued to reduce the number of feral pigeons which became a nuisance in some districts and, following more than 70 complaints, 903 visits were made by the Pest Control Staff and 4,750 birds were destroyed by shooting or trapping.

NOISE ABATEMENT

The prevention and reduction of noise, sometimes defined as "unwanted sound", is an essential element in the campaign against the pollution of the environment, for noise, as an unfortunate bi-product is increasing with the growth of population, industry and road and air traffic. The problems are complex since although it is possible to define a noise nuisance by specialist knowledge and the use of instruments, reaction to noise is an individual characteristic and therefore infinitely variable, whereby, the roar of a sports car engine may exhilarate some persons and infuriate others.

The Inspectorate are concerned not only with the resolution of current noise problems but with the prevention of potential noise, and, in this connection, special attention is given to all planning applications relating to industrial and commercial premises and the degree of noise which may emanate from such premises and, where appropriate, safeguards are prescribed to minimise noise levels and excessive vibration.

Complaints received from the public largely concerned mechanical noise from factories, demolition and construction work, ventilation and refrigeration plants and domestic noise, usually amplified music. Of the 159 complaints received during the year, 99 were resolved by action resulting in the reduction or abatement of the noise complained of, in 19 cases no action was warranted and the remainder are still under investigation. The statutory powers contained in the Noise Abatement Act, 1960 are limited and complaints concerning domestic noise, such as slamming of house and car doors, must be resolved by persuading the individuals responsible to have consideration for other residents.

It is understandable that many of the complaints received relate to noise nuisances which occur at night and a large proportion of the 535 visits made by Inspectors were during evenings and weekends.

CLEAN AIR ACT, 1956

The Council has implemented the relevant provisions of this Act in making Smoke Control Orders covering the South, West and Northern areas of the Borough and it is the intention that one Smoke Control Order shall be made each year. The progress of these Orders is shown below:—

| <i>Smoke Control Order</i> | <i>No. of premises (incl. Factories and Commercial)</i> | <i>No. of dwellings</i> | <i>Acreage</i> | <i>Date of Order</i> | <i>Date of Operation</i> |
|----------------------------|---|-------------------------|----------------|----------------------|--------------------------|
| No. 1 | 2,076 | 1,916 | 620 | 22.12.58 | 1. 4.61 |
| No. 2 | 3,042 | 2,686 | 265 | 26. 2.60 | 1. 10.61 |
| No. 3 | 4,501 | 3,915 | 332 | 22.11.60 | 1. 10.62 |
| No. 4 | 5,547 | 4,112 | 710 | 24.11.61 | 1. 7.63 |
| No. 5 | 7,042 | 6,651 | 570 | 17.12.62 | 1. 7.64 |
| No. 6 | 6,220 | 5,885 | 470 | 18.11.63 | 1. 7.65 |
| No. 7 | 8,198 | 7,788 | 1,060 | 21.12.64 | 1. 7.66 |
| No. 8 | 7,198 | 6,777 | 460 | 20.12.65 | 1. 7.67 |
| No. 9 | 6,158 | 5,605 | 554 | 19.12.66 | 1. 7.68 |
| No. 10 | 6,670 | 6,351 | 596 | 18.12.67 | 1. 7.69 |
| No. 11 | 7,099 | 6,573 | 588 | 27. 1.69 | 1. 7.70 |
| No. 12 | 6,007 | 5,865 | 439 | 15.12.69 | 1. 7.71 |
| No. 13 | 10,859 | 9,596 | 2,000 | 26. 3.71 | 1. 7.72 |
| No. 14 | 7,042 | 6,905 | 2,200 | 10. 3.72 | 1. 7.73 |
| No. 15 | 11,387 | 11,115 | 2,300 | 21.12.72 | 1. 7.74 |

The District Inspectors keep observation on the various factory chimneys within their districta with a view to observing any contravention of the Clean Air Act in respect of smoke and grit emissions. During the year 96 plans showing the construction and heights of new chimneys were examined and in 36 cases additional height was requested and agreed. 45 notices of the installation of new furnaces were received. 24 of these being oil fired plants.

LOCAL LAND CHARGES

During the year 14,791 Local Land Charge enquiries have been referred to the Department by the Town Clerk and, in each case, a detailed investigation is carried out to ensure that the prospective purchaser of any property is made aware of whatever legal requirements may have been imposed by the Department currently, or which may apply to the property at some future date.

PLANNING APPLICATIONS

Planning applications relating to new developments or the alteration of existing buildings are subjected to detailed scrutiny by the appropriate technical staff to ensure that the extensive and varied legislation administered by the Department is applied to the proposed development. Applicants are advised of the legal requirements applicable to the development and, during the year, the staff concerned have spent a considerable time examining and reporting upon the 4,571 plans submitted for approval.

DISINFECTION

The Borough Disinfecting Station is situated at Factory Lane. Two steam disinfectors are in use supplied with steam from a gas fired boiler within the Station.

The following articles were disinfected during the year:—

| | | |
|----------------|--------------|----------------|
| By Steam | ... .. | 8,699 articles |
| By Fomalin Gas | ... .. | 179 articles |
| | <i>Total</i> | 8,878 articles |

Disinfection of bedding and upholstered articles is carried out for traders, who deliver them to, and collect them from, the station. For this service a charge is made.

Disinfection was carried out after infectious or contagious diseases as follows:—

73 rooms, hospital wards, clinics etc.

On request disinfection was also carried out for conditions other than notifiable infectious diseases and for which a charge is made. During the year £34.50 was paid for such services.

1,700 items of home nursing equipment were disinfected.

DISINFESTATION OF PREMISES

Modern insecticides provide a ready and easily applied remedy for vermin and pest infestation of premises, etc. and occupiers are advised and instructed in their use by the Inspectors. The department assisted in the more difficult cases numbering 106, either by spraying or fumigation.

CLEANSING OF VERMINOUS, ETC., PERSONS

A cleansing station consisting of a reception room, two bathrooms and a discharge room is attached to the Disinfecting Station and is used for dealing with verminous, etc. conditions in adults and children. A woman attendant deals with children and women. During the year one adult and 8 children were cleansed of verminous conditions and 8 adults and 20 children were treated for scabies.

DISEASES OF ANIMALS ACT

Cases, or suspected cases, of contagious animal disease are dealt with in conjunction with Veterinary Officers of the Ministry of Agriculture, Fisheries and Food and appropriate action is taken to prevent the spread of the disease. Although no cases were reported within the Borough during the year visits to premises where animals are kept were intensified to ensure that precautionary measures were maintained against, in particular, swine vesicular disease. This disease, which was unknown in this country until the latter part of 1972, is a virulent disease of pigs and the stringent Animal Disease Orders relating to foot and mouth disease have been extended to apply to this disease. It is known that untreated swill is implicated in the spread of the disease and local pig keepers were warned that swill intended for pig food must be boiled in accordance with the provisions of the Diseases of Animals (Waste Foods) Order, 1957 and that a high standard of hygiene is essential in swill processing plants.

LECTURES

During the year 72 lectures were given by qualified members of the staff to local community associations, schools and commercial and industrial organisations. These lectures provide an opportunity to stimulate public interest in food hygiene, smoke abatement and the other varied aspects of the work of the public health inspector and are valuable contributions to both public relations and health education.

CARAVAN SITES

The Caravan Sites and Control of Development Act, 1960, confers on Local Authorities powers for the control of caravan sites and apart from improved planning powers it provides for a system of site licencing to be administered by District Councils.

Two site licences were in force during the year.

Site licence conditions require a water carriage system of drainage, main water supply and fire precautions.

The Caravan Sites Act, 1968 imposes a duty upon local authorities to provide caravan sites for gipsies residing in or resorting to their areas and a site, to accommodate 15 caravans, is now under construction.

MINES AND QUARRIES ACT, 1954

This Act requires compliance with provisions designed to prevent accidents arising through lack of proper fencing or too easy access.

Routine visits are made to quarries in the district as necessary.

| Year | Number of Quarries | Number of Accidents | Number of Injuries | Number of Fatalities |
|------|--------------------|---------------------|--------------------|----------------------|
| 1960 | 1 | 0 | 0 | 0 |
| 1961 | 1 | 0 | 0 | 0 |
| 1962 | 1 | 0 | 0 | 0 |
| 1963 | 1 | 0 | 0 | 0 |
| 1964 | 1 | 0 | 0 | 0 |
| 1965 | 1 | 0 | 0 | 0 |
| 1966 | 1 | 0 | 0 | 0 |
| 1967 | 1 | 0 | 0 | 0 |
| 1968 | 1 | 0 | 0 | 0 |
| 1969 | 1 | 0 | 0 | 0 |
| 1970 | 1 | 0 | 0 | 0 |
| 1971 | 1 | 0 | 0 | 0 |
| 1972 | 1 | 0 | 0 | 0 |
| 1973 | 1 | 0 | 0 | 0 |
| 1974 | 1 | 0 | 0 | 0 |
| 1975 | 1 | 0 | 0 | 0 |
| 1976 | 1 | 0 | 0 | 0 |
| 1977 | 1 | 0 | 0 | 0 |
| 1978 | 1 | 0 | 0 | 0 |
| 1979 | 1 | 0 | 0 | 0 |
| 1980 | 1 | 0 | 0 | 0 |
| 1981 | 1 | 0 | 0 | 0 |
| 1982 | 1 | 0 | 0 | 0 |
| 1983 | 1 | 0 | 0 | 0 |
| 1984 | 1 | 0 | 0 | 0 |
| 1985 | 1 | 0 | 0 | 0 |
| 1986 | 1 | 0 | 0 | 0 |
| 1987 | 1 | 0 | 0 | 0 |
| 1988 | 1 | 0 | 0 | 0 |
| 1989 | 1 | 0 | 0 | 0 |
| 1990 | 1 | 0 | 0 | 0 |
| 1991 | 1 | 0 | 0 | 0 |
| 1992 | 1 | 0 | 0 | 0 |
| 1993 | 1 | 0 | 0 | 0 |
| 1994 | 1 | 0 | 0 | 0 |
| 1995 | 1 | 0 | 0 | 0 |
| 1996 | 1 | 0 | 0 | 0 |
| 1997 | 1 | 0 | 0 | 0 |
| 1998 | 1 | 0 | 0 | 0 |
| 1999 | 1 | 0 | 0 | 0 |
| 2000 | 1 | 0 | 0 | 0 |
| 2001 | 1 | 0 | 0 | 0 |
| 2002 | 1 | 0 | 0 | 0 |
| 2003 | 1 | 0 | 0 | 0 |
| 2004 | 1 | 0 | 0 | 0 |
| 2005 | 1 | 0 | 0 | 0 |
| 2006 | 1 | 0 | 0 | 0 |
| 2007 | 1 | 0 | 0 | 0 |
| 2008 | 1 | 0 | 0 | 0 |
| 2009 | 1 | 0 | 0 | 0 |
| 2010 | 1 | 0 | 0 | 0 |
| 2011 | 1 | 0 | 0 | 0 |
| 2012 | 1 | 0 | 0 | 0 |
| 2013 | 1 | 0 | 0 | 0 |
| 2014 | 1 | 0 | 0 | 0 |
| 2015 | 1 | 0 | 0 | 0 |
| 2016 | 1 | 0 | 0 | 0 |
| 2017 | 1 | 0 | 0 | 0 |
| 2018 | 1 | 0 | 0 | 0 |
| 2019 | 1 | 0 | 0 | 0 |
| 2020 | 1 | 0 | 0 | 0 |
| 2021 | 1 | 0 | 0 | 0 |
| 2022 | 1 | 0 | 0 | 0 |

**SUMMARY OF HOUSING AND MISCELLANEOUS INSPECTIONS MADE
BY THE PUBLIC HEALTH INSPECTORS, AND OTHER DEPARTMENTAL WORK**

| | |
|---|--------|
| Total number of houses inspected for housing defects under Public Health or Housing Acts | 6,214 |
| Houses Inspected following applications for Qualification Certificates | 2,675 |
| Houses Inspected following applications for certificates of disrepair | 3 |
| Inspections of underground rooms | 235 |
| Special inspections in connection with the Housing Survey ... | 2,136 |
| Houses inspected for overcrowding conditions | 84 |
| Re-inspections of work outstanding on housing notices | 13,383 |
| Number of visits regarding infectious diseases | 734 |
| Number of visits regarding food poisoning | 157 |
| Inspections of drainage work during repair | 1,562 |
| Drainage systems inspected, surveyed or traced | 4,362 |
| Drains tested | 163 |
| Inspections of cesspools and earth closets | 61 |
| " schools and school sanitary conveniences | 16 |
| " public conveniences | 52 |
| " verminous premises | 99 |
| " ponds and ditches | 24 |
| " premises in course of destruction | 789 |
| " tents, vans and similar structures | 142 |
| " premises in connection with improvement grants ... | 112 |
| Inspection and re-inspection of houses in multiple occupation ... | 6,671 |
| Inspection and re-inspection in connection with Smoke Control Orders | 18,096 |
| Smoke observations | 82 |
| Visits regarding exhumation | 3 |
| Visits in connection with miscellaneous public health nuisances | 2,870 |
| Visits to immigrants | 146 |
| Unsuccessful calls | 7,014 |
| Appointments kept with owners, builders, etc. | 6,746 |
| Investigations of complaints other than housing matters | 854 |
| Inspections under Noise Abatement Act | 535 |
| Visits regarding rats and mice infestation by rodent operators ... | 13,177 |
| Visits regarding rats and mice infestation by district inspectors ... | 954 |
| Visits in connection with destruction of foxes | 881 |
| Visits in connection with destruction of pigeons | 903 |
| Informal Notices served | 756 |
| Informal Notices complied with | 435 |
| Statutory Notices outstanding 31.12.71 | 1,839 |
| Statutory Notices served | 3,159 |
| Statutory Notices complied with | 3,242 |
| Statutory Notices outstanding 31.12.72 | 1,756 |
| Total number of callers at the office | 3,064 |
| Total number of letters received at the office | 17,168 |
| Total number of complaints received | 5,485 |
| Attendances at Court | 29 |

FACTORIES ACT, 1961

During the year the under-mentioned inspections have been made and defects were found as set out below.

PART 1 OF THE ACT

INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

| PREMISES (1) | Number on Register (2) | Number of | | |
|---|---------------------------------|-------------------|---------------------------|--------------------------------|
| | | Inspection (3) | Written notices (4) | Occupiers prosecuted (5) |
| (i) Factories in which Sections 1, 1, 3, 4 and 6 are to be enforced by Local Authorities | 61 | 16 | 3 | - |
| (ii) Factories not included in (i) in which Section 7 is enforced by Local Authority | 1,425 | 205 | 10 | - |
| (iii) Other Premises in which Section 7 is enforced by Local Authority (excluding out-workers premises) | 84 | 43 | - | - |
| TOTAL | 1,570 | 264 | 13 | - |

Cases in which DEFECTS were found

| PARTICULARS (1) | Number of cases in which defects were found | | | | Number of cases in which prosecutions were instituted (6) |
|---|--|-----------------|-----------------------------|-----------------------------|---|
| | Found (2) | Remedied (3) | Referred | | |
| | | | To H.M. Inspector (4) | By H.M. Inspector (5) | |
| Want of cleanliness (S.1) ... | 2 | 2 | - | - | - |
| Overcrowding (S.2) ... | - | - | - | - | - |
| Unreasonable temperature (S.3) ... | - | - | - | - | - |
| Inadequate ventilation (S.4) ... | 1 | 1 | - | - | - |
| Ineffective drainage of floors (S.6) ... | - | - | - | - | - |
| Sanitary conveniences (S.7):- | | | | | |
| (a) Insufficient ... | 1 | 1 | - | - | - |
| (b) Unsuitable or defective ... | 2 | 2 | - | - | - |
| (c) Not separate for sexes ... | - | - | - | - | - |
| (d) Not labelled ... | 2 | 2 | - | - | - |
| Other offences against the Act (not including offences relating to Outwork) ... | 16 | 16 | - | - | - |
| TOTAL ... | 24 | 24 | - | - | - |

PART VIII OF THE ACT

Outwork

| Nature of Work (1) | Section 110 | | | Section 111 | | |
|---|--|--|--|---|-----------------------|---------------------|
| | No. of Outworkers in August list required by Sect. 10 (1) (c) (2) | No. of cases of default in sending lists to the Council (3) | No. of prosecutions for failure to supply lists (4) | No. of instances of work in unwholesome premises (5) | Notices served (6) | Prosecutions (7) |
| Lampshades | 27 | - | - | - | - | - |
| Paper bags and Cardboard boxes | 11 | - | - | - | - | - |
| Christmas cards, Christmas crackers and stockings | 31 | - | - | - | - | - |
| Tool assembly | 12 | - | - | - | - | - |
| Wearing apparel | 76 | - | - | - | - | - |
| Perfumery, Toiletries, etc. | 25 | - | - | - | - | - |
| Curtain and furniture hangings | 7 | - | - | - | - | - |
| Making up of Cotton Articles | 8 | - | - | - | - | - |
| TOTAL | 197 | - | - | - | - | - |

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The majority of inspections carried out under the Act are undertaken by a Specialist Public Health Inspector assisted by three Technical Assistants. In addition, the district public health inspectorate (establishment - 20) carry out inspections at food premises to avoid duplication of visits.

Four members of the clerical staff are employed part time on work in connection with the Act.

TABLE A - Registrations and General Inspections

| <i>Class of Premises</i> | <i>Number of Premises Registered during the year</i> | <i>Total Number of Registered Premises at end of year</i> | <i>Number of Registered Premises receiving a general inspection during the year</i> |
|--|--|---|---|
| <i>(1)</i> | <i>(2)</i> | <i>(3)</i> | <i>(4)</i> |
| Offices | 295 | 1,601 | 492 |
| Retail Shops | 129 | 1,842 | 496 |
| Wholesale Shops | | | |
| Warehouses | 10 | 104 | 25 |
| Catering Establishments open to the public, Canteens | 22 | 233 | 73 |
| Fuel Storage Depot | 1 | 5 | 2 |
| TOTALS | 457 | 3,785 | 1,088 |

TABLE B - Number of visits of all kinds by Inspectors to Registered Premises

4,354

TABLE C - Analysis of Persons Employed in Registered Premises by Workplace

| <i>Class of Workplace</i> | <i>Number of Persons Employed</i> |
|--|-----------------------------------|
| <i>(1)</i> | <i>(2)</i> |
| Offices | 40,933 |
| Retail Shops | 12,810 |
| Wholesale Departments, Warehouses | 2,379 |
| Catering Establishments open to the public | 3,041 |
| Canteens | 658 |
| Fuel Storage Depots | 37 |
| TOTAL | 59,858 |
| <i>Total Males</i> | 29,931 |
| <i>Total Females</i> | 29,927 |

TABLE D - Exemptions

No exemptions were granted under the Act during the year.

TABLE E - Prosecutions

There were no prosecutions under the Act during the year.

REMEDIAL WORKS ETC. CARRIED OUT

| | |
|--|-----|
| Accident Prevention Measures | 11 |
| Abstract of Act Provided | 285 |
| Clothing Accommodation Provided | 15 |
| Drainage Defects Repaired | - |
| Lack of Cleanliness Remedied | 2 |
| Drinking Water/Vessels Provided | 6 |
| Eating Facilities Provided | - |
| First Aid Equipment Provided | 177 |
| Floors, Stairs, Passages Repaired etc. | 63 |
| Heating Provided | 2 |
| Lighting Provided | 36 |
| Machines Guarded | 28 |
| Overcrowding abated | 12 |
| Premises registered | 518 |
| Sanitary Accommodation Provided | 9 |
| Intervening Ventilated Space Provided | 54 |
| Defective Sanitary Accommodation Repaired | 9 |
| Labelling of Sanitary Accommodation | 9 |
| Staff seating facilities Provided | 4 |
| Thermometers Provided | 151 |
| Ventilation Provided | 96 |
| Walls, Ceilings etc. Repaired | 109 |
| Washing Facilities - Wash Basins Renewed/Provided ... | 28 |
| " " - Hot Water Provided | 44 |
| " " - Nail Brushes, Soap and Towels Provided | 12 |
| Provision of Disposal for Sanitary Dressings | 3 |
| Defective Electrical Wiring Remedied | 16 |
| Accumulations of Rubbish Removed | 17 |
| Hoists and Lifts Repaired | 15 |

More detailed comment in relation to Offices, Shops and Railway Premises is contained in the Appendix to this Report.

EMPLOYMENT AGENCIES

These Agencies, which include "au-pair" agencies are licenced annually and inspection of the records kept by these firms is carried out to ensure that the provisions of the Act are complied, in most cases the premises concerned are also subject to the provisions of the Offices, Shops and Railway Premises Act, 1963.

There are 85 agencies registered and regularly inspected in the Borough.

SHOPS ACTS, 1950-65

The Shops Acts include provisions relating to the health, comfort and the working hours of persons employed in shops and also control the hours during which shops may remain open for business. During the year 487 inspections were made under the Acts and the following infringements were remedied:—

| | | | | | | | | | |
|------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|----|
| Hours of Closing | ... | ... | ... | ... | ... | ... | ... | ... | 46 |
| Notices to be exhibited or amended | ... | ... | ... | ... | ... | ... | ... | ... | 73 |

A number of complaints and enquiries were received from shop assistants concerning their hours and conditions of employment and these persons and, where appropriate, their employers were advised of the relevant provisions of the Acts.

As the result of complaints, and information contained in Press advertisements, 14 cases of alleged trading outside the permitted hours, or on Sundays, were investigated and, following the necessary observations, the traders concerned were warned or, as in the cases referred to below, prosecuted under the Acts.

PROSECUTIONS

Both Directors of a firm retailing decorating materials were summoned following the sale of goods on Sundays and the Court imposed a fine of £15.50 and £5 costs, in respect of each summons.

The proprietors of a shop selling pet animals were prosecuted for trading on Sundays and it is interesting to note that the firm pleaded that, since they were selling goods only to members of a Club they had organised, they were not invoking the Sunday trading laws. The Court set aside this plea and imposed a fine of £6 with £5 costs.

HAIRDRESSING ESTABLISHMENTS

Legislation calls for the registration of hairdressers' and barbers' premises. During the year 224 inspections were made of registered premises to check that the Byelaws in force were being observed. Generally little cause for complaint was found. 33 new Registration Certificates were issued.

CONSUMER PROTECTION ACTS, 1961 & 1971

The Secretary of State is empowered by the Consumer Protection Acts to make Regulations, in respect of any goods which he may prescribe and imposing such requirements as he may consider expedient, to prevent or reduce risk of death or personal injury. The following Regulations are in operation and shops trading in the articles concerned are visited to ensure that the Regulations are complied with:—

The Heating Appliances (Fireguards) Regulations prescribe that all domestic heating appliances shall be fitted with fireguards which conform to specified standards of construction. During the year an electric fire with inadequate guard was found on sale in a second-hand shop. This article was surrendered and destroyed.

The Children's Nightdresses Regulations, 1964 require all nightdresses coming within the scope of the Regulations to be made of a fabric which conforms to the low flammability requirements of a British Standard.

The Nightdresses (Safety) Regulations, 1967 also impose conditions on the sale of nightdresses which are described as being of low flammability.

The Stands for Carry-Cots (Safety) Regulations, 1966 prescribe certain safety features which must be incorporated in the construction of such stands.

The Oil Heaters Regulations, 1962 and 1966 impose requirements as to the construction, design and performance of domestic oil space heaters. Modern oil heaters generally comply with the Regulations but older type heaters are sometimes offered for sale in second-hand shops and at jumble sales and during the year six unsatisfactory heaters found on retailers' premises were surrendered and destroyed. Heaters which are "suspect" are submitted to the British Standards Institute for examination and testing.

The Electrical Appliances (Colour Code) Regulations, 1969 specify the colours to be used in electric cables designed for domestic use in order to conform with the international colour code already in force in the Common Market countries.

The Electric Blankets (Safety) Regulations, 1971 require that all electric blankets comply with the technical and constructional requirements of a British Standard Specification and that warnings as to their correct and safe use be given on the container or package when the article is offered for sale.

The Toys (Safety) Regulations, 1972 govern the use of certain materials in the manufacture of toys. In particular, the use of celluloid, other than for table tennis balls, is prohibited and restrictions are imposed upon the chemical content of paint applied to toys.

During the year twelve samples of toys, mostly of foreign manufacture, were purchased from local retailers and submitted to the Public Analyst for examination of the paint film and, of these, two proved to be unsatisfactory. In one case the paint on two items of a set of small wooden toy animals contained 13,000 and 21,500 parts per million respectively of lead whereas the Regulations prescribe that the proportion of lead shall not exceed 5,000 parts per million in the dry paint film. These toys were imported from Germany but manufactured in Italy and following consultation with the Town Clerk warnings were sent to the German importer and the vendor and the Italian authorities were reminded of the British legal requirements relating to such toys. It was established that the vendor was the only one in this country supplied with the toys and the remaining stock was duly returned to Germany.

The second unsatisfactory sample consisted of a toy tomohawk painted in various colours including a yellow paint film containing 71,000 parts per million of lead and 4,800 parts per million of soluble chromium and a red paint film containing 20,000 parts per million of lead and 2,400 parts per million of soluble chromium. In addition to the limitations on lead, the Regulations prescribe a limit of 250 parts per million of soluble chromium. This toy, which was manufactured in the Republic of China, was the only one in stock in the shop although six were originally supplied by a wholesaler. Extensive investigations failed to reveal the actual importer of these goods and the Town Clerk advised that, owing to legal complications, a prosecution was not appropriate and a warning was therefore issued to the vendor concerned.

THE FABRICS (MISDESCRIPTION) ACT, 1913

THE FABRICS (MISDESCRIPTION) REGULATIONS, 1959

The above mentioned Regulations prescribe standards of non-flammability for textile fabrics which claim to be non-flammable

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

The above Act, prohibits the keeping of a boarding establishment for animals (defined by the Act as cats and dogs) except under licence granted by the local authority.

Licences are granted subject to conditions attached thereto. During the year five such licences were issued.

THE SCRAP METAL DEALERS ACT, 1964

This Act requires dealers in scrap metal to be licenced by the local authority. Dealers are required to maintain, in a prescribed manner, records of their business transactions. Special provision is made for "itinerant" dealers who may be exempted from the keeping of full records of their transactions and this and other provisions of the Act are administered in co-operation with the local police.

THE RIDING ESTABLISHMENTS ACTS 1964 and 1970

These Acts provide for the licencing and inspection of riding establishments by the local authority. Licences are granted subject to conditions attached thereto and inspections are carried out at six-monthly intervals by authorised veterinary surgeons. Two licences have been granted to local establishments.

PHARMACY AND POISONS ACT, 1933

The object is to regulate the sale of certain poisonous substances.

During the year the number of applications granted for entry of names on the list of persons entitled to sell poisons under Part 2 of the Act was 9. In addition, 150 applications were made for the retention of names on the list for a further 12 months. No infringement of the Act was found.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

The Act regulates the manufacture and sale of materials used as fillings for upholstery, bedding, toys, etc., with the object of compelling the use of clean fillings.

PET ANIMALS ACT, 1951

This Act governs the sale of pet animals and during the year 17 licences were renewed and 4 new licences issued. During the year 62 inspections were made and little cause for complaint relating to conditions specified in the licences was found.

FOOD SUPPLY

The supervision and inspection of food supplies is carried out by the Public Health Inspectors who are all qualified in food inspection.

Of the premises in the Borough where food is stored, manufactured or sold, 823 are registered under Section 16 of the Food and Drugs Act, as follows:—

| | |
|---|-----|
| Retail sale of ice-cream | 571 |
| Manufacture of ice-cream | 1 |
| Preparation or manufacture for sale of sausages, or potted, pressed, pickled or preserved food | 251 |

During the year 6,903 inspections and re-inspections were made of food businesses.

FOOD HYGIENE (GENERAL) REGULATIONS, 1960

The following table shows the premises in the Borough at which food is sold, manufactured or stored. These premises are subject to the above Regulations and special reference is made to the provision of wash hand basins (Section 16) and sinks (Section 19) at premises where unwrapped food is handled.

| <i>Description</i> | <i>No. of premises</i> | <i>Wash hand basins provided during 1972</i> | <i>No. to which Sec. 19 applies</i> | <i>No. of sinks fitted to comply with Sec. 19 during 1972</i> |
|--|------------------------|--|-------------------------------------|---|
| Bakehouses and Bakers | | | | |
| Shops | 118 | 3 | 118 | 2 |
| Sugar Confectioners | 422 | 2 | 402 | 1 |
| Cafes, Restaurants, Snack Bars, etc. | 310 | 10 | 310 | 6 |
| Works & Club Canteens | 528 | 9 | 528 | 7 |
| Licensed Premises | 166 | 6 | 166 | 2 |
| Off Licences | 115 | - | 24 | - |
| Grocers & General Shops | 312 | 2 | 298 | 1 |
| Butchers | 179 | 3 | 179 | 1 |
| Wholesale Meat Markets | 11 | - | 11 | - |
| Chemists | 85 | - | 85 | - |
| Greengrocers | 203 | 8 | 203 | 2 |
| Fishmongers | 33 | 1 | 33 | 1 |
| Fried Fish Shops | 47 | 1 | 47 | 1 |
| Milk Distributors and Dairies | 317 | 6 | 281 | - |
| Premises from which Roundsmen & Mobile Shops operate | 127 | - | 127 | - |
| Food Manufacturers | 23 | 2 | 23 | - |
| Supermarkets | 62 | 2 | 62 | 2 |

**FOOD AND DRUGS ACT, 1955, FOOD HYGIENE (GENERAL)
REGULATIONS, 1960, AS AMENDED, AND FOOD HYGIENE
(MARKETS, STALLS AND DELIVERY VEHICLES) REGULATIONS, 1966,
AS AMENDED**

Food Premises

| | |
|---|-----|
| Structural defects in shops and stores remedied | 4 |
| Defective condition of walls, ceilings, doors and window glazing | 244 |
| Defective condition of floors, utensils, fixtures, etc. remedied | 76 |
| Defective or insufficient drainage repaired | 6 |
| Lighting, heating or ventilation provided | 37 |
| W.C. accommodation - repair or cleansing | 43 |
| " " - artificial lighting provided | - |
| " " - intervening ventilated space provided | 3 |
| Food - now stored 18 ins. off floor | 11 |
| " - means to prevent risk of contamination provided | 33 |
| " - store provided or repaired | 5 |
| Accumulations in yard or stores removed | 40 |
| Offal and refuse bins provided | 18 |
| Yard paving repaired | - |
| Hand washing notices exhibited | 52 |
| Ablutions - Wash basins provided | 55 |
| " - Hot water supplies provided | 46 |
| " - Nail brushes, soap and towels provided | 60 |
| Clothing accommodation provided | 10 |
| Sinks installed | 26 |
| Smoking offences abated | 9 |
| Defective or unsuitable table tops replaced | 76 |
| First Aid kits provided | 44 |
| Cleanliness - advice given | 18 |
| Rats/Mice Infestation abated | 17 |
| Repair/Cleansing of Machinery/Refrigerators | 26 |
| Leaflets on Food Hygiene supplied | 101 |

Stalls and Delivery Vehicles

| | |
|---|----|
| Wash hand basins/Sinks with hot water provided | 16 |
| Nail brushes, soap, towels provided | 8 |
| First Aid kits provided | 20 |
| Washable overclothing provided | 28 |
| Name and address boards supplied | 33 |
| Food now stored 18 ins. off floor | 2 |
| Accumulation of refuse etc. | 5 |
| Receptacles for waste food provided | 18 |
| Screening for stalls provided | 11 |
| Cleanliness of stalls and vehicles remedied | 46 |

Condemned Foodstuffs

Summary of meat and other articles of food found to be unfit and condemned by inspectors during the year:—

| <i>Articles</i> | <i>Weight in lbs.</i> |
|--------------------------------------|-----------------------|
| Carcase Meat | 13,287 |
| Offal | 1,878 |
| Sundry Foodstuffs | 4,858 |
| Canned, Bottled and Packet Foods ... | 42,632 |
| <i>Total</i> ... | <u>62,655</u> |

Disposal of Condemned Foodstuffs

Meat, and other condemned foodstuffs are destroyed by incineration.

SCHOOLS

The kitchens and serveries, washing facilities and sanitary accommodation are inspected and any defects or amendments requiring attention are referred to the Chief Education Officer.

During the year 161 such inspections were made.

MEAT INSPECTION

District inspectors examine home killed and imported carcass meat and offal at the 11 wholesale meat depots in the Borough. Meat exposed for sale is inspected in butchers' shops.

The Diseases of Animals (Waste Foods) Order, 1957

The Order provides that, in general, all waste foods must be boiled before feeding to animals to minimise the spread of animal diseases. Licences to operate boiling plants and equipment are issued after inspection of the premises and plants.

MILK SUPPLY

During the year 49 inspections were made of dairies.

The Milk (Special Designation) Regulations 1963

The following licences have been granted to dealers distributing milk from premises in Croydon.

Licences to use the designation "Pasteurised" –

(a) Dealer's (Pre-packed Milk) Licences 234

Licences to use the designation "Sterilised" –

(a) Dealer's (Pre-packed Milk) Licences 89

Licences to use the designation "Untreated" –

(a) Dealer's (Pre-packed Milk) Licences 14

Licences to use the Designation "Ultra Heat Treated" –

(a) Dealer's (Pre-packed Milk) Licences 66

Pasteurisers Licences Renewed 2

Inspections of dairies and other premises where milk is sold are carried out to ensure that the conditions of the licences are observed.

Bacteriological Examination of Milk

During the year the following samples of milk were examined:—

| | | |
|--------------------|--------|-----|
| Pasteurised Milk | ... .. | 114 |
| Sterilised Milk | ... .. | 27 |
| Ultra Heat Treated | ... .. | 5 |

The following tables summarise the results of bacteriological examinations of pasteurised, sterilised and untreated milk samples during the year:—

| <i>Pasteurised Milk</i> | | |
|-------------------------|----------------------------|-----------|
| No. Samples Taken | <i>Methylene Blue Test</i> | |
| | Not Satisfied | Satisfied |
| 114 | - | 114 |

| <i>Sterilised Milk</i> | | |
|------------------------|-----------------------|-----------|
| No. Samples Taken | <i>Turbidity Test</i> | |
| | Not Satisfied | Satisfied |
| 27 | - | 27 |

| <i>Article</i> | <i>Nature of adulteration or Deficiency</i> | <i>Remarks</i> |
|---|--|--|
| Raspberry Flavouring | Label did not bear the statement required by the colouring matters in Food Regulations, 1966 | The manufacturer has now amended the label to incorporate the statement. |
| Two samples of Brazil nuts and one sample of chestnuts. | Contained 21%, 16% and 43% of mouldy nuts respectively. | Retailers warned |
| Samotea. | The label stated no "tannin" but tannin was present. | The label has been amended. |
| Chicken soup. | The sample was deficient in fat content. | The recipe has been altered and a further sample has proved to be satisfactory. |
| Drinking Chocolate. | The sample was deficient in cocoa butter content. | A repeat sample has proved satisfactory. |
| Three samples of Wholemeal Bread | The samples were deficient in fibre content due to the use of other flour. | All the recipes have now been altered to comply with the Bread and Flour Regulations 1963. |
| Milk Loaf. | The sample contained skimmed milk solids. | Retailer warned. |
| Four samples of Sausages. | The samples all contained an added preservative without declaration. | The retailers are now displaying notices to comply with the preservatives in Food Regulations, 1962. |
| Bread. | The sample contained solid lumps of dough in which dry flour was visible. | Further samples have proved satisfactory. |
| Brazil Nuts. | The sample contained a high proportion of unfit nuts. | Legal proceeding are being considered. |

Result of Analysis of Milk Samples

The samples of milk were obtained as follows:—

| | | |
|----------------------|--------|-----|
| Taken on Milk Rounds | ... .. | 33 |
| Taken at Dairies | ... .. | 108 |
| <i>Total</i> | ... .. | 141 |

Average composition of samples:—

Milk (excluding South Devon and Channel Islands Milks)

Solids not Fat 8.57
(Legal standard is 8.5%)

Milk Fat 3.82
(Legal standard is 3%)

South Devon and Channel Island Milk

Solids not fat 8.83
(Legal standard is 8.5%)

Milk Fat 4.75
(Legal standard is 4%)

ANALYSIS OF PROSECUTIONS UNDER:—

Food and Drugs Act, 1955

Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966

Milk and Dairy (General) Regulations, 1959

Shops Act, 1950.

| <i>OFFENCE</i> | <i>RESULT</i> |
|---|---------------------------------------|
| Chocolate éclair containing a dead fly | Fined £25 |
| Apricot pastry containing a dead wasp | Fined £25 |
| Mouldy cheese and pickle sandwich unfit for human consumption | Fined £15 |
| Bath bun containing a nail | Fined £25 |
| Coffee Swiss roll containing mould | Fined £25 |
| Skinless sausages unfit for human consumption | Fined £25 |
| Skinless sausages containing mould | Fined £25 |
| Loaf of sliced wrapped bread containing a piece of metal | Fined £25 |
| Custard tart containing a screw | Fined £25 |
| Loaf of bread containing a piece of metal | Fined £40 |
| Loaf of bread containing a first aid dressing | Fined £40 |
| A packet of pork and ham containing pieces of metal | Fined £25 |
| Tray of trifles and cream cakes containing cockroaches on the tray | Case dismissed |
| Chopped ham and pork containing a part of a safety pin | Fined £10 |
| Bar of chocolate containing a piece of metal | Fined £20 |
| Five offences contrary to the Markets, Stalls and Delivery Vehicles Regulations | Defendant acquitted on all 5 accounts |
| Pizza not of the nature, substance or quality demanded | Fined £25 |
| A chocolate éclair containing a screw | Fined £50 |
| Portion of wrapped cheese containing mould | Fined £20 |
| A loaf of bread containing a piece of a needle | Fined £15 |

| <i>OFFENCE</i> | <i>RESULT</i> |
|--|-----------------|
| A doughnut containing a washer | Fined £30 |
| A bottle of Gee's Linctus containing a piece of glass | Fined £100 |
| Sausages containing mould | Fined £30 |
| A bottle of milk containing a biro refill | Fined £30 |
| A bottle of milk containing a piece of glass | Fined £40 |
| A bottle of milk containing a piece of paper | Fined £15 |
| Four contraventions relating to staleness and insect infestation in chocolate wheatmeal biscuits | Total Fine £140 |
| Paint inside bottle of milk | Fined £25 |
| Bottle of milk containing a conker | Fined £25 |
| Bottle of milk containing glass | Fined £75 |
| Bottle of milk containing glass | Fined £75 |
| Piece of bread pudding containing plastic | Fined £25 |
| Bottle of milk containing glass | Fined £100 |
| Stale cake with fermenting jam filling | Fined £25 |
| Loaf of bread containing plastic material | Fined £50 |
| Liquorice cuttings containing a piece of wire | Fined £25 |
| Bacon containing maggots | Fined £15 |
| Biscuit containing a dead fly | Fined £20 |
| Loaf of bread containing a piece of wire | Fined £50 |

FOOD COMPLAINTS

During the year 427 food complaints of various types were received, fully investigated and appropriate action taken where necessary. 38 prosecutions were taken against firms concerned as reported above.

SUMMARY OF INSPECTIONS OF FOOD AND OTHER BUSINESS PREMISES MADE BY THE PUBLIC HEALTH INSPECTORS, AND OTHER DEPARTMENTAL WORK

| | |
|--|-----|
| Inspections of theatres, cinemas, halls, etc. | 18 |
| Visits to premises for food condemnation | 788 |
| Inspections of wells and gathering grounds of water supply | 56 |
| do scrap metal dealer's premises | 7 |
| do rivers and streams for pollutions | 3 |
| do hairdressers | 229 |
| Food and Drugs Acts; Food and Drugs samples taken | 300 |
| Food and Drugs Acts; Milk samples taken (special designation) | 141 |
| Ice Cream samples taken (bacteriological) | 144 |

APPENDIX

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

This is the eighth report in the series since the Act came into operation, and, in retrospect, it is fair to say that in that time a lot of good work has been done, many problems met and solved, and in so doing conditions improved for many workers in shops and offices coming within the scope of the Act.

The practice of inspecting plans relating to offices and shops etc. continues. Detailed examination is required to ensure, inter alia, that so far as is reasonably practicable, premises when occupied will conform to the requirements of the Act, and thus avoid the necessity for alterations after construction. Ventilation of premises and partitioned office areas present problems. Plans of proposed hoists and lifts can be inspected to ensure satisfactory and safe approach. During the year no fewer than 1,315 plans were received in the Department and reported upon. This is the highest figure since the Act came into force.

The number of accidents in offices, shops and warehouses reported to the Department during the year was 143 and all were investigated. This compares with 148 accidents in 1971. Of the accidents investigated the following action was taken. Prosecutions nil. Formal warnings 15. Informal advice 49.

No action was found necessary in 79 cases but the information supplied by the employer in each case was checked and in a large number of cases found inaccurate or insufficient.

Too many accidents are arising from use of hand tools particularly in the food trade. There seems to be far too little supervision of young persons who are not trained in the elementary method of handling knives used in cutting foods. Accidents by untrained personnel in boning out and jointing meat have been reported.

Week-end students are often employed as shop assistants. They are rarely trained, and totally unaware of the dangers and hazards which can arise in an unaccustomed environment and through lack of experience.

Young persons in the 18 - 20 age group are often employed as Assistant or Trainee Managers in large food premises. This early age of responsibility has its drawbacks in achieving a high standard of supervision and discipline particularly with older staff.

Numbers of accidents are due to falling on wet, slippery or greasy floors, causing fractures to limbs. Canteen and shop kitchens come under criticism in this respect where spilled fluids are not always cleansed immediately. The peak period for accidents occurs during the time the meals are being served, when the staff is under pressure of work.

Load lifting causes sprains and strains mainly through monotonous continuity of lifting and carrying work, few rest periods combined with a lack of physical ability of the person employed. The booklet "Lifting and Carrying" has been recommended for display in warehouses, shops and stores for the guidance of persons employed in such work.

Several accidents have been reported of staff walking through clear glass doors or through collisions when meeting on each side of a solid door. In the former case demarcation colouring or bars have been fitted to the doors and in the latter small observation windows (with the approval of the Fire Authority) have been inserted.

Horseplay is responsible for a few accidents. A young girl fractured her wrist as a result of falling off the balustrade of a staircase down which she had been sliding.

An Inspector whilst carrying out an inspection of an office, found a youth with long hair operating a printing machine with the guards removed. Immediate representation to the management resulted in censure of the employee and the immediate reinstatement of the guard.

A typist sustained a cracked vertebra through falling when the chair she was about to sit on slipped away on castors. The chair was replaced by one without castors. Defective chairs are found from time to time and removed or repaired on representation by notice.

In a Supermarket a young person (under 16) sustained a cut finger whilst operating a mechanically operated gravity feed slicing machine. A Notice was clearly exhibited on the machine, that no person under 18 was permitted to use the machine, or to clean it. Investigation revealed that the boy had acted on his own free will. He had not been trained in the use of the machine and was not under supervision. An assurance was received that no person would be employed at the counter in question unless he had full operational knowledge of the machine.

An accident occurred in connection with a similar machine in a Supermarket whereby a woman employee cut her finger whilst wiping the blade of the machine. Statements taken under caution revealed a conflict of evidence in respect of the adequacy of training, but the Company was warned, in writing, of the need for such training. As a result, the Managers of all branches of the Company were reminded of their duty to ensure that the requirements as to training were observed.

A woman employee in an office suffered injury to her kneecap due to colliding with the opened drawer of a filing cabinet. The filing cabinet was subsequently re-sited.

Loading bays need constant supervision. An employee, wheeling a pallet containing reams of paper from a van parked close to the loading bay, slipped on the polished steel edge of the deck and fell some 30 inches from the loading bay deck to the ground. He sustained a crushed kneecap and laceration of the

lower left leg and was absent from duty for 11 months. The floors of the loading bay and the steel edge of the deck have since been treated.

Congestion and lack of proper cleanliness and order, present problems in many offices. Water closet compartments have been found containing shelves for storing paint tins, builders tools, ladders and even legal documents.

The staircase walls of a builder's office were lined with shelves reducing the width of the staircase to 1' 6".

Apart from the defects found in the course of routine inspections, 31 complaints were received during the year compared with 32 in 1971. The complaints included inadequate ventilation of offices, low temperatures, insufficient and defective sanitary accommodation, overcrowding, insufficient means for accommodating outdoor clothing, lack of hot water supply to wash hand basins, etc.

Certificates of Exemption from the requirements to provide the stipulated number of first aid outfits were granted to three Companies who produced satisfactory evidence that first aid facilities in their premises, including full time nursing personnel and qualified first aiders, were provided.

Since the appointment of an additional Technical Assistant primarily to enforce the provisions of the Offices, Shops and Railway Premises (Hoists and Lifts) Regulations, more progress is being made, not only in dealing with adverse reports from Insurance Company Inspectors, but also in bringing under control by regular inspections all such apparatus in all premises to which the Act applies.

During the year all adverse reports on hoists and lifts have been investigated, resulting in Notices being served for these and any additional defects found at the time of investigation.

In all, as can be seen by the following table, 89 Notices were served and on re-inspection 62 Notices have been abated.

Delays have occurred in carrying out remedial measures as a result of pressure of work on servicing companies.

**OFFICES, SHOPS AND RAILWAY PREMISES
(HOISTS, AND LIFTS) REGULATIONS, 1968**

| <i>Class of Premises</i> | <i>Number of adverse reports received</i> | <i>Number of Lifts inspected</i> | | <i>Number of Notices served & abated</i> | | <i>Total Number of Inspections & Re-inspections</i> |
|---|---|----------------------------------|----------------|--|---------------|---|
| | | <i>Non-powered</i> | <i>Powered</i> | <i>Served</i> | <i>Abated</i> | |
| Offices | 17 | | 66 | 27 | 20 | |
| Retail Shops | 7 | | 23 | 7 | 5 | |
| Wholesale Shops and Warehouses | 4 | | 4 | 4 | 4 | |
| Catering Establishments open to the public. Canteens. | 26 | 76 | 4 | 51 | 33 | |
| <i>TOTAL</i> | 54 | 76 | 97 | 89 | 62 | 223 |

Almost without exception lift motor rooms inspected fell short of the requirements of the Act and Regulations in some degree.

Examples of the contraventions found are as follows.

Insufficient lighting and ventilation, socket outlets, steps and hand-rails, insufficient guarding of motor platforms, trip wires, chain drives and other machinery, together with lack of proper accessibility. Light switches so placed that no light is afforded until access is gained to the room, and obstructions in trap-doors and hatchways. The depositing of re-usable equipment and rubbish, machine and switch covers not replaced, keys to motor rooms not easily accessible and motor room doors not locked.

It has been observed that some lift shafts are used for depositing rubbish and several shafts were found to have large accumulations of waste paper and cardboard stored therein.

The only access to one lift motor room situated on a roof was by using a pair of steps of which the bottom rungs were broken and dilapidated. Whilst standing on such steps the trap door, which was large and of considerable weight, was, when pushed upwards to afford access to the roof, likely to fall about 50 ft. on to the roof of an adjoining property.

Two lifts were found in such an unsatisfactory condition as to demand immediate cessation of use and after informal representation, this was done.

Although lift reports by competent persons are rarely available at the time of the Local Authority Inspectors visit, there appears to be no delay in dealing with the Notices served except as previously mentioned.

There were no prosecutions during the year.

| Category | Number of lifts | Number of lifts in satisfactory condition | Number of lifts in unsatisfactory condition | Number of lifts in dangerous condition |
|--|-----------------|---|---|--|
| Offices | 17 | 16 | 1 | 0 |
| Retail Shops | 7 | 7 | 0 | 0 |
| Wholesale Shops and warehouses | 4 | 4 | 0 | 0 |
| Catering Establishments open to the public | 38 | 37 | 1 | 0 |
| TOTAL | 66 | 64 | 2 | 0 |

Almost without exception lift motor rooms respected fall short of the requirements of the Act and Regulations in some degree.

Examples of the deficiencies found are as follows:

Insufficient lighting and ventilation, access to motor rooms and machinery, together with lack of proper accessibility. Light switches are placed in such a position that no light is afforded until access is gained to the room, and obstructions in the door and passageway. The absence of adequate equipment and rubbish, machine and electric covers not locked, keys to motor rooms not easily accessible and motor room doors not locked.

It has been observed that some lift shafts are used for depositing rubbish and several shafts were found to have large accumulations of waste paper and cardboard stored therein.

The only access to one lift motor room situated on a roof was by using a pair of steps of which the bottom rungs were broken and dislodged. Whilst standing on such steps the trap door, which was large and of considerable weight, was pushed towards to afford access to the roof, likely to fall about 50 ft. on to the roof of an adjoining property.

WATER SUPPLY

The London Borough is served by four statutory supply authorities, as undermentioned—

| Supply Authority | Square Miles | Estimated Population for 1971 |
|--|--------------|-------------------------------|
| Croydon Corporation (Central and northern part of the Borough) | 12.0 | 214,700 |
| Metropolitan Water Board (Spring Park Estate and New Addington) | 2.8 | 42,400 |
| East Surrey Water Company (Sanderstead, Salwood, Kenley, Purley and Coulsdon East) | 11.7 | 67,300 |
| Sutton District Water Company (Woodcote and Coulsdon West) | 1.8 | 18,300 |
| | <u>28.3</u> | <u>342,700</u> |

The water supply is of good organic quality and moderately hard in character. It has no chlorine-alkali characteristics and the fluoride content is low. In the Croydon Corporation's area 94 chemical and 650 bacteriological samples of raw water were tested, also 126 chemical and 1,547 bacteriological samples of water going into supply. For results of consumer samples of water sent by the Health Department to the Public Health Laboratory Service, see Appendix F 10.

PUBLIC HEALTH SERVICES

SEWAGE DISPOSAL

This is now a function of the Greater London Council. It is understood that the building of new sludge digestion tanks and other improvements at the Beedington works to deal with problems which arose in previous years are proceeding satisfactorily.

WATER SUPPLY

The London Borough is served by four statutory supply authorities, as undermentioned:—

| <i>Supply Authority</i> | <i>Square Miles</i> | <i>Estimated Population for 1971</i> |
|--|-------------------------|--|
| Croydon Corporation (Central and northern part of the Borough) | 17.0 | 218,780 |
| Metropolitan Water Board (Spring Park Estate and New Addington) | 2.8 | 42,000 |
| East Surrey Water Company (Sanderstead, Selsdon, Kenley, Purley and Coulsdon East) | 11.7 | 57,700 |
| Sutton District Water Company (Woodcote and Coulsdon West) | 1.9 | 15,360 |
| | <u>33.4</u> | <u>333,840</u> |

The waters in supply are of good organic quality and moderately hard in character. They have no plumbo-solvent characteristics and the fluoride content averages about one-sixth of a part per million. All houses are supplied from mains and there are no standpipes for this purpose. In the Croydon Undertaking's area 94 chemical and 603 bacteriological samples of raw water were tested, also 125 chemical and 1,547 bacteriological samples of water going into supply. For results of consumer samples of water sent by the Health Department to the Public Health Laboratory Service, see Appendix P 69.

SEWAGE DISPOSAL

This is now a function of the Greater London Council. It is understood that the building of new sludge digestion tanks and other improvements at the Beddington works to deal with problems which arose in previous years are proceeding satisfactorily.

FAMILY PLANNING

The assistance given to the Crofton Family Planning Association of a financial grant and free facilities at Corporation clinics was extended this year to include free advice to all and free supplies to medical special cases.

Domestic Family Planning by Scientific Methods

Two part-time specialist midwives are now employed in this service. Although the number of new cases with the scientific method in 1947, the midwives have been able to answer their questions as to the nature of scientific following the birth of their babies.

| | | |
|--------------------------------|-------|-------|
| | 1947 | 1946 |
| New patients seen | 172 | 157 |
| Number of visits | 1,407 | 1,300 |
| Patients prescribed the "pill" | 40 | 35 |

OTHER SERVICES

| | | |
|---|----|----|
| Using other methods | 10 | 20 |
| where no method was advised | 5 | 10 |
| Visitors | 12 | 15 |
| No. teaching sessions in hospital and elsewhere | 10 | 12 |

FAMILY PLANNING

The assistance given to the Croydon Family Planning Association of a financial grant and free facilities at Corporation clinics was extended this year to include free advice to all and free supplies to medical/social cases.

Domiciliary Family Planning by Specialist Midwife

Two part-time specialist midwives are now employed in this service.

Although the numbers of new cases seen are smaller than in 1971, the midwives have been able to extend their teaching skills to mothers in hospital following the birth of their babies.

| | 1972 | 1971 |
|---|-------|-------|
| New patients seen | 155 | 177 |
| Number of visits | 1,461 | 1,065 |
| Patients prescribed the 'pill' | 48 | 42 |
| " fitted with I.U.D. | 67 | 50 |
| " " " cap | 4 | 10 |
| " using other methods | 80 | 43 |
| " where no method was advised | 8 | 35 |
| Vasectomy | 12 | 15 |
| No. teaching sessions in hospital and elsewhere | 68 | |

NATIONAL ASSISTANCE ACT, 1948, SECTION 47
NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951

3 Orders for compulsory removal were made during 1972.

HOME DIALYSIS

3 patients commenced home dialysis during 1972. 1 further case was under consideration during the year.

LONGSTAY IMMIGRANTS

Initial visits to longstay immigrants were made to families with children and single women by Mrs. Glucksmann, the Specialist Health Visitor and to single men by the Public Health Inspector. This work which is concerned with giving information about health and social facilities in Croydon was intensified with the arrival of the Ugandan Asian families.

Most of the Ugandan families went to relatives and friends and most had some resources and spoke some English. Offers of help with clothing and temporary accommodation were received from some local residents but the families were helped mainly by their own community efforts.

Medical problems were dealt with immediately under the National Health Service.

For details of arrivals in 1972, see Appendix, page 107.

REHOUSING ON MEDICAL GROUNDS

Dr. C.G. Nicol, Principal Medical Officer enquired into 712 new applications and 148 re-applications for rehousing on medical grounds in 1972. He made 13 personal visits, usually jointly with a Public Health Inspector, Health Visitor or Welfare Officer. A further 23 applicants were interviewed at this office.

Sub-division of applications recommended to the Housing and Lettings Sub-Committee showed the following approximate frequencies:—

| | (a) <i>Rehoused from Non-Council property</i> | (b) <i>Transferred from one Council property to another</i> | (a) and (b) <i>Total Moved</i> |
|--------------------------|--|--|---------------------------------------|
| Heart disease | 26% | 19% | 23% |
| Lung disease | 11% | 14% | 12% |
| Strokes | 1% | 2% | 1% |
| Crippling conditions | 15% | 20% | 17% |
| Illnesses of children | 7% | 3% | 5% |
| Cancer | 7% | 1% | 4% |
| Tuberculosis | 2% | 3% | 3% |
| Mental disorders | 23% | 28% | 26% |
| Other conditions | 8% | 10% | 9% |

MEDICAL EXAMINATION OF CHILDREN FOR THE CHILDREN'S DEPARTMENT

During the year 340 children were medically examined prior to admission to a children's home or private foster home.

OCCUPATIONAL HEALTH SERVICE

The medical supervision of all Corporation staff provided by the health department includes:—

Scrutiny of health statements made by successful applicants for employment and any follow-up or medical examination deemed necessary.

Medical examination of prospective student teachers.

Examination for freedom from intestinal infection:—

- (i) All employees of the water undertaking.
- (ii) All school meal service and canteen personnel.

Arrangements for re-checks.

Vision tests on all Corporation drivers and again at specified intervals over the age of 50.

Scrutiny of records of all staff who have been absent for an aggregate of more than 8 weeks during the preceding 12 months or who are exhausting entitlement to sick pay. Follow-up for cause and anticipated date of return to duty. Report on domestic and financial circumstances by a welfare officer for extension of sick-pay.

Arrangements for radiological examination of staff who work in contact with children.

Advice for staff exposed to occupational risks.

Special examination of any member of staff referred by the Department concerned.

Enquiries into excessive sickness in any section of the Corporation staff.

Control of First Aid services for the central offices.

Health Statements

| | |
|--|--------------|
| Number of Health Statements received from Officers | 1,451 |
| Number of Health Statements received from Manual employees | 1,290 |
| Total | <u>2,741</u> |

Medical Examinations

983 examinations were made during the year by the medical staff of the department including 138 vision tests for drivers. Of these 218 were in respect of manual workers, who were classified as follows:-

| | |
|---|------------|
| Fit for employment and sick pay scheme | 131 |
| Deferred for review | 75 |
| Unfit for sick pay scheme | 10 |
| Fit for light employment only (Not fit for sick pay scheme) | - |
| Unfit for employment | 2 |
| | <u>218</u> |

DRUG DEPENDENCY

The informal advisory Committee established in 1967 of representatives of statutory and voluntary organisations concerned with this problem met on two occasions.

The general position in Croydon was deemed unchanged, with no special prevalence but with the continued danger common to all urban areas.

An in-service training session for professional staff was held at the Denning Hall under the Chairmanship of the Chief Education Officer, when Dr. Dale-Beckett and Dr. Rosenberg covered the theory and practice of drug taking as seen by a Consultant Psychiatrist and a General Practitioner. Information about books, leaflets and films was provided by Miss Elliott.

A pamphlet for all school leavers covering services available for adolescents was issued at Easter and was well received. With minor alterations it will be given to school leavers in 1973.

A meeting for parents was held in the southern part of the Borough, covering 3 senior schools, when Dr. A.J. Wood of the Health Education Council spoke on "The problems of adolescence".

The Social Services Department continued their Drug Advisory Centre at Rees House, where a senior social worker is available by appointment or at "walk in" sessions on Tuesday evenings. She reported that the number of enquiries was tending to diminish as those concerned with the groups mainly involved - the under 20 years of age - were becoming more skilled in handling soft drug takers and were not asking for help from other agencies. No cases of hard drug addiction had come forward. Nevertheless it was thought that the Centre was providing a needed service and should be continued.

APPENDIX TABLES

VITAL STATISTICS 1968 - 1977

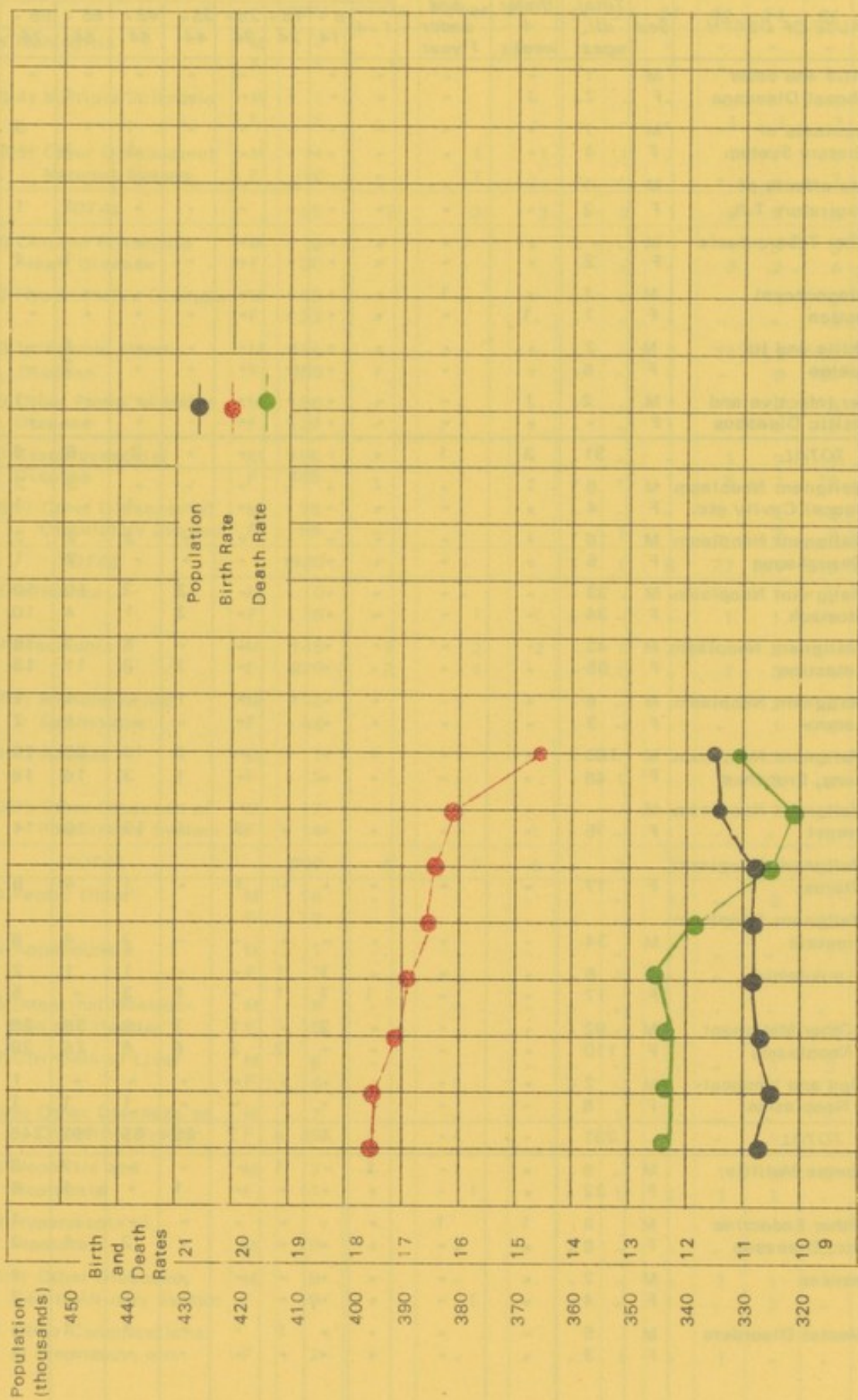
APPENDIX TABLES



PERCENTAGE OF THE TOTAL POPULATION

1968 1969 1970 1971 1972 1973 1974 1975 1976 1977

VITAL STATISTICS 1965 - 1972



1965 1966 1967 1968 1969 1970 1971 1972

REGISTRAR GENERAL'S TABLE OF DEATHS ACCORDING TO CAUSE, AGE AND SEX

| CAUSE OF DEATH | Sex | Total all ages | Under 4 weeks | 4 weeks and under 1 year | AGE IN YEARS | | | | | | | | |
|---|-----|----------------------|---------------------|-----------------------------------|--------------|----------|----------|----------|-----------|-----------|------------|------------|------------|
| | | | | | 1-4 | 5-14 | 15-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | 75 & over |
| B4 Enteritis and other Diarrhoeal Diseases | M | 1 | - | - | - | - | - | - | - | - | - | - | 1 |
| | F | 2 | 1 | - | - | - | - | - | - | - | 1 | - | - |
| B5 Tuberculosis of Respiratory System | M | 7 | - | - | - | - | - | - | 1 | - | 3 | 3 | |
| | F | 4 | - | - | - | - | - | - | 1 | 2 | - | 1 | |
| B6(1) Late effects of Respiratory T.B. | M | 1 | - | - | - | - | - | - | - | - | - | - | 1 |
| | F | 2 | - | - | - | - | - | - | - | 1 | 1 | - | |
| B6(2) Other Tuberculosis | M | - | - | - | - | - | - | - | - | - | - | - | - |
| | F | 2 | - | - | - | - | - | - | - | 1 | 1 | - | |
| B11 Meningococcal Infection | M | 1 | - | 1 | - | - | - | - | - | - | - | - | - |
| | F | 1 | 1 | - | - | - | - | - | - | - | - | - | - |
| B17 Syphilis and its Sequelae | M | 2 | - | - | - | - | - | - | - | 1 | - | - | 1 |
| | F | 6 | - | - | - | - | - | - | - | 2 | - | - | 4 |
| B18 Other Infective and Parasitic Diseases | M | 2 | 1 | - | - | - | - | - | - | - | - | 1 | - |
| | F | - | - | - | - | - | - | - | - | - | - | - | - |
| TOTAL | | 31 | 3 | 1 | - | - | - | - | - | 2 | 8 | 6 | 11 |
| B19(1) Malignant Neoplasm Buccal Cavity etc. | M | 6 | - | - | - | - | - | - | - | 3 | 2 | 1 | |
| | F | 4 | - | - | - | - | - | - | 1 | - | 1 | 2 | |
| B19(2) Malignant Neoplasm Oesophagus | M | 16 | - | - | - | - | - | - | 2 | 2 | 7 | 5 | |
| | F | 5 | - | - | - | - | - | - | - | 2 | 1 | 2 | |
| B19(3) Malignant Neoplasm Stomach | M | 33 | - | - | - | - | - | 3 | 2 | 10 | 10 | 8 | |
| | F | 34 | - | - | - | - | - | 3 | 1 | 4 | 10 | 16 | |
| B19(4) Malignant Neoplasm Intestine | M | 42 | - | - | - | - | - | 5 | 7 | 18 | 12 | | |
| | F | 55 | - | - | - | - | - | 2 | 3 | 11 | 13 | 26 | |
| B19(5) Malignant Neoplasm Larynx | M | 6 | - | - | - | - | - | 1 | - | 1 | 2 | 2 | |
| | F | 3 | - | - | - | - | - | - | - | 1 | 2 | - | |
| B19(6) Malignant Neoplasm Lung, Bronchus | M | 180 | - | - | - | - | - | 2 | 13 | 53 | 73 | 39 | |
| | F | 46 | - | - | - | - | - | 1 | 3 | 16 | 16 | 10 | |
| B19(7) Malignant Neoplasm Breast | M | - | - | - | - | - | - | - | - | - | - | - | |
| | F | 75 | - | - | - | - | 3 | 1 | 12 | 18 | 14 | 27 | |
| B19(8) Malignant Neoplasm Uterus | F | 17 | - | - | - | - | 1 | - | 1 | 4 | 5 | 6 | |
| B19(9) Malignant Neoplasm Prostate | M | 34 | - | - | - | - | - | - | 2 | 4 | 8 | 20 | |
| B19(10) Leukaemia | M | 8 | - | - | - | 1 | 1 | - | 1 | 1 | 2 | 2 | |
| | F | 17 | - | - | 1 | 1 | 1 | - | 1 | 3 | 5 | 5 | |
| B19(11) Other Malignant Neoplasms | M | 92 | - | - | - | 2 | 1 | 3 | 9 | 28 | 26 | 23 | |
| | F | 110 | - | - | - | 2 | 2 | 6 | 6 | 26 | 29 | 39 | |
| B20 Benign and Unspeci- fied Neoplasms | M | 2 | - | - | - | - | - | - | - | - | 1 | 1 | |
| | F | 6 | - | - | - | - | - | - | 1 | 1 | 1 | 3 | |
| TOTAL | | 791 | - | - | 1 | 4 | 4 | 7 | 23 | 65 | 192 | 246 | 249 |
| B21 Diabetes Mellitis | M | 9 | - | - | 1 | - | 1 | - | - | 2 | 3 | 2 | |
| | F | 22 | - | - | - | - | - | 1 | - | 1 | 6 | 14 | |
| B46(1) Other Endocrine etc. Diseases | M | 3 | 1 | 1 | - | - | - | - | - | - | 1 | - | |
| | F | 8 | - | - | - | - | - | - | 2 | 1 | 2 | 3 | |
| B23 Anaemias | M | 2 | - | - | - | - | - | - | - | - | 1 | 1 | |
| | F | 4 | - | - | - | - | - | - | - | - | 1 | 3 | |
| B46(3) Mental Disorders | M | 5 | - | - | - | - | 1 | - | 1 | 1 | 1 | 1 | |
| | F | 3 | - | - | - | - | - | - | - | - | 1 | 2 | |

CANCER

| CAUSE OF DEATH | Sex | Total all ages | Under 4 weeks | 4 weeks and under 1 year | AGE IN YEARS | | | | | | | | |
|---|-----|----------------------|---------------------|-----------------------------------|--------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|--------------|
| | | | | | 1-4 | 5- 14 | 15- 24 | 25- 34 | 35- 44 | 45- 54 | 55- 64 | 65- 74 | 75 & over |
| B24 Meningitis | M | - | - | - | - | - | - | - | - | - | - | - | - |
| | F | 1 | 1 | - | - | - | - | - | - | - | - | - | - |
| B46(4) Multiple Sclerosis | M | 1 | - | - | - | - | - | - | - | - | 1 | - | - |
| | F | 5 | - | - | - | - | - | 1 | 1 | 2 | 1 | - | - |
| B46(5) Other Diseases of Nervous System | M | 14 | - | 1 | 1 | 1 | - | 1 | - | 4 | 3 | 2 | - |
| | F | 18 | - | 1 | - | - | 1 | - | - | 3 | 4 | 9 | - |
| <i>TOTAL</i> | | 95 | 2 | 3 | 2 | 1 | 3 | 1 | 3 | 4 | 15 | 24 | 37 |
| B26 Chronic Rheumatic Heart Disease | M | 15 | - | - | - | - | - | 1 | 1 | 3 | 5 | 2 | 3 |
| | F | 30 | - | - | - | - | - | - | 3 | 2 | 4 | 3 | 18 |
| B27 Hypertensive Disease | M | 22 | - | - | - | - | - | - | - | 4 | 9 | 5 | 4 |
| | F | 23 | - | - | - | - | - | - | - | - | 2 | 7 | 14 |
| B28 Ischaemic Heart Disease | M | 458 | - | - | - | - | 1 | 11 | 59 | 102 | 147 | 138 | - |
| | F | 365 | - | - | - | - | - | - | 9 | 35 | 85 | 236 | - |
| B29 Other Forms of Heart Disease | M | 66 | - | - | - | - | 1 | 1 | 2 | 8 | 8 | 46 | - |
| | F | 127 | - | - | - | - | 1 | - | 1 | 1 | 17 | 107 | - |
| B30 Cerebrovascular Disease | M | 195 | - | - | - | - | - | 1 | 9 | 14 | 58 | 113 | - |
| | F | 445 | - | - | - | - | 1 | 5 | 7 | 19 | 74 | 339 | - |
| B46(6) Other Diseases of Circulatory System | M | 78 | - | - | - | - | - | - | 2 | 12 | 19 | 45 | - |
| | F | 96 | - | - | - | 1 | 1 | - | 3 | 7 | 16 | 68 | - |
| <i>TOTAL</i> | | 1920 | - | - | - | - | 1 | 6 | 22 | 101 | 216 | 441 | 1133 |
| B31 Influenza | M | 10 | - | - | - | - | - | - | 1 | 1 | 2 | 3 | 3 |
| | F | 16 | - | 1 | 1 | - | - | - | 1 | 1 | 1 | 4 | 7 |
| B32 Pneumonia | M | 145 | 2 | 2 | 2 | - | 1 | 2 | - | 2 | 11 | 29 | 94 |
| | F | 220 | 2 | 4 | - | - | 1 | - | 1 | 3 | 4 | 39 | 166 |
| B33(1) Bronchitis and Emphysema | M | 118 | - | - | - | - | - | - | 1 | 2 | 24 | 36 | 55 |
| | F | 46 | - | - | - | - | - | - | 1 | 4 | 8 | 33 | - |
| B33(2) Asthma | M | 1 | - | - | - | - | - | - | 1 | - | - | - | - |
| | F | 13 | - | - | - | - | 1 | - | 2 | 3 | 1 | 4 | 2 |
| B46(7) Other Diseases of Respiratory System | M | 17 | - | - | - | - | - | - | 1 | 1 | 1 | 5 | 9 |
| | F | 14 | - | - | 1 | - | - | - | - | - | 2 | 1 | 10 |
| <i>TOTAL</i> | | 600 | 4 | 7 | 4 | - | 3 | 2 | 8 | 14 | 50 | 129 | 379 |
| B34 Peptic Ulcer | M | 19 | - | - | - | - | - | 1 | - | 2 | 1 | 8 | 7 |
| | F | 18 | - | - | - | - | - | - | - | - | 2 | 4 | 12 |
| B35 Appendicitis | M | 1 | - | - | - | - | - | - | - | - | 1 | - | - |
| | F | 2 | - | - | - | - | 1 | - | - | - | - | - | 1 |
| B36 Intestinal Obstruc- tion and Hernia | M | 9 | - | - | - | - | - | - | - | - | - | 3 | 6 |
| | F | 15 | - | - | - | - | - | 1 | 1 | 1 | 1 | 5 | 6 |
| B37 Cirrhosis of Liver | M | 8 | - | - | - | - | - | - | - | 1 | 3 | 3 | 1 |
| | F | 4 | - | - | - | - | - | - | - | 1 | 2 | - | 1 |
| B46(8) Other Diseases of Digestive System | M | 17 | - | - | - | - | 1 | 1 | - | - | 5 | 4 | 6 |
| | F | 28 | - | - | - | - | - | - | - | 1 | 1 | 7 | 19 |
| B38 Nephritis and Nephrosis | M | 7 | - | - | - | - | - | - | 1 | 2 | 2 | 2 | - |
| | F | 11 | - | 1 | - | - | 1 | 2 | 1 | 1 | - | 1 | 4 |
| B39 Hyperplasia of Prostate | M | 10 | - | - | - | - | - | - | - | - | - | 2 | 8 |
| B46(9) Other Diseases, Genito-Urinary System | M | 8 | - | - | - | - | - | - | 1 | 1 | 1 | 1 | 4 |
| | F | 19 | - | 1 | - | - | - | 1 | - | 2 | - | 5 | 10 |
| B41 Other Complications of Pregnancy, etc. | F | 2 | - | - | - | - | 1 | - | 1 | - | - | - | - |

| CAUSE OF DEATH | Sex | Total all ages | Under 4 Weeks | 4 weeks and under 1 year | AGE IN YEARS | | | | | | | | |
|---|-----|----------------|---------------|--------------------------|--------------|-----------|-----------|-----------|-----------|------------|------------|------------|-------------|
| | | | | | 1-4 | 5-14 | 15-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | 75 & over |
| B46(10) Diseases of Skin, Subcutaneous Tissue | M | - | - | - | - | - | - | - | - | - | - | - | - |
| | F | 1 | - | - | - | - | - | - | - | - | - | - | 1 |
| B46(11) Diseases of Musculo-Skeletal System | M | 3 | - | - | - | 1 | - | - | - | - | - | 1 | 1 |
| | F | 7 | - | - | - | - | - | - | - | - | - | 1 | 6 |
| B42 Congenital Anomalies | M | 10 | 4 | 4 | - | - | - | - | - | 2 | - | - | - |
| | F | 14 | 4 | 2 | 2 | 2 | - | - | 1 | - | - | 1 | 2 |
| B43 Birth Injury, Difficult Labour, etc. | M | 11 | 11 | - | - | - | - | - | - | - | - | - | - |
| | F | 7 | 6 | 1 | - | - | - | - | - | - | - | - | - |
| B44 Other Causes of Perinatal Mortality | M | 8 | 8 | - | - | - | - | - | - | - | - | - | - |
| | F | 6 | 6 | - | - | - | - | - | - | - | - | - | - |
| B45 Symptoms and Ill Defined Conditions | M | 1 | - | - | - | - | - | - | - | - | - | - | 1 |
| | F | 7 | - | - | - | - | - | - | 1 | - | - | - | 6 |
| TOTAL | | 253 | 39 | 9 | 2 | 3 | 4 | 6 | 6 | 15 | 19 | 48 | 102 |
| BE47 Motor Vehicle Accidents | M | 27 | - | - | - | 2 | 4 | 5 | 3 | 3 | 3 | 3 | 4 |
| | F | 16 | - | - | 1 | 1 | 1 | 1 | 3 | - | 2 | 2 | 5 |
| BE48 All Other Accidents | M | 25 | - | 1 | 1 | 1 | 3 | 4 | - | 4 | 4 | 4 | 3 |
| | F | 26 | - | - | - | - | 2 | - | 2 | 2 | 5 | 2 | 13 |
| BE49 Suicide and Self-Inflicted Injuries | M | 21 | - | - | - | - | 4 | 1 | 3 | 5 | 3 | 4 | 1 |
| | F | 17 | - | - | - | - | - | 3 | 2 | 5 | 3 | 2 | 2 |
| BE50 All Other External Causes | M | 3 | - | - | 1 | - | 1 | - | - | - | 1 | - | - |
| | F | 3 | - | - | - | - | - | - | 1 | - | 1 | 1 | - |
| TOTAL | | 138 | - | 1 | 3 | 4 | 15 | 14 | 14 | 19 | 22 | 18 | 28 |
| TOTAL ALL CAUSES | M | 1780 | 27 | 10 | 6 | 8 | 18 | 18 | 36 | 141 | 330 | 509 | 677 |
| | F | 2048 | 21 | 11 | 6 | 4 | 12 | 18 | 40 | 79 | 194 | 403 | 1260 |
| | | 3828 | 48 | 21 | 12 | 12 | 30 | 36 | 76 | 220 | 524 | 912 | 1937 |

CANCER

Deaths from Cancer occurred at the following ages –

| <i>Age Period</i> | <i>Male</i> | <i>Female</i> | <i>Total</i> |
|-----------------------|-------------|---------------|--------------|
| Under 25 years | 4 | 5 | 9 |
| 25 and under 35 years | 1 | 6 | 7 |
| 35 and under 45 years | 9 | 14 | 23 |
| 45 and under 55 years | 34 | 31 | 65 |
| 55 and under 65 years | 109 | 83 | 192 |
| 65 and under 75 years | 149 | 97 | 246 |
| 75 and over | 113 | 136 | 249 |
| <i>Total</i> | 419 | 372 | 791 |

| <i>Site</i> | <i>Male</i> | <i>Female</i> | <i>Total</i> | <i>Percentage of Total</i> |
|---------------------------|-------------|---------------|--------------|----------------------------|
| Bowel and Rectum | 42 | 55 | 97 | 12.3 |
| Brain | 6 | 11 | 17 | 2.2 |
| Breast | - | 75 | 75 | 9.5 |
| Buccal Cavity | 6 | 4 | 10 | 1.3 |
| Cervix | - | 9 | 9 | 2.4 |
| Gallbladder & Duct ... | 2 | 2 | 4 | 0.5 |
| Hodgkins | 1 | 3 | 4 | 0.5 |
| Larynx & Pharynx | 6 | 3 | 9 | 1.1 |
| Leukaemia... .. | 8 | 17 | 25 | 3.2 |
| Lungs and Bronchus ... | 180 | 46 | 226 | 28.6 |
| Oesophagus | 16 | 5 | 21 | 2.6 |
| Ovary | - | 21 | 21 | 5.7 |
| Pancreas | 13 | 11 | 24 | 3.0 |
| Prostate | 34 | - | 34 | 8.1 |
| Stomach | 33 | 34 | 67 | 8.5 |
| Uterus | - | 8 | 8 | 2.2 |
| Other Malignant Neoplasms | 72 | 68 | 140 | 17.7 |
| <i>TOTAL</i> | 419 | 372 | 791 | |

DETAILS OF INFANT MORTALITY

The following table gives the causes of death during the first month of life (Neo-natal Mortality):—

(1) Complications of Labour

Trauma of Labour 17

(2) Foetal States -

Congenital Malformations 8

(3) Prematurity 14

(4) Post-Natal Causes 9

Total ... 48

| | <i>Percentage Deaths under 1 year per Total Infantile Deaths</i> | | <i>Deaths under 1 year per 1,000 Births</i> | |
|------------------------------------|--|-------------|---|-------------|
| | <i>1971</i> | <i>1972</i> | <i>1971</i> | <i>1972</i> |
| Injury at Birth and Congenital ... | 29.4 | 46.4 | 4.3 | 6.5 |
| Premature Births | 27.0 | 21.8 | 3.9 | 3.1 |
| Respiratory Diseases | 12.8 | 15.9 | 1.9 | 2.2 |
| Atalectasis, Debility and Marasmus | 11.5 | - | 1.7 | - |
| Diseases of Digestion * | 1.3 | 1.4 | 0.2 | 0.2 |
| Other causes | 18.0 | 14.5 | 2.6 | 2.0 |

* These from Gastro-Enteritis

Perinatal Deaths

Stillbirths - 61

Deaths in first week - 42

Perinatal Rate 21 per 1,000

Total (live and still) births

Causes of Death

in first week

Prematurity - 14

Congenital conditions - 6

Meningitis - 1

Birth Trauma - 16

Pneumonia - 2

Other causes - 3

DEATHS UNDER ONE YEAR, ARRANGED IN DAYS, WEEKS AND MONTHS

| CAUSES OF DEATH | 1st day | 2nd day | 3rd day | 4th day | 5th day | 6th day | 7th day | 8th - 14th day | 15th - 21st day | 22nd - 28th day | Total Under 1 month | 1 + months | 2 + months | 3 + months | 4 + months | 5 + months | 6 + months | 7 + months | 8 + months | 9 + months | 10 + months | 11 + months | TOTAL |
|--|---------|---------|---------|---------|---------|---------|---------|----------------|-----------------|-----------------|---------------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-------------|-------------|-------|
| All Causes | 28 | 6 | 4 | 1 | - | 2 | 1 | 1 | 1 | 4 | 48 | 6 | 6 | 3 | 1 | 1 | 1 | 1 | 1 | - | 1 | - | 69 |
| Meningo-Encephalitis | 1 | - | - | - | - | - | - | - | - | - | 1 | - | 1 | - | - | - | - | - | - | - | - | - | 2 |
| Chickenpox | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Measles | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Scarlet Fever | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Whooping Cough | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Diphtheria and Croup | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Tuberculous Meningitis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Abdominal Tuberculosis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Other Tuberculous Diseases | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Meningitis (not tuberculous) | - | - | - | - | - | - | 1 | - | - | - | 1 | - | - | - | - | - | - | - | - | - | - | - | 1 |
| Convulsions | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Laryngitis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Bronchitis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Pneumonia (all forms) | 1 | - | 1 | - | - | - | - | - | - | 1 | 3 | - | 3 | 2 | - | 1 | - | - | 1 | - | 1 | - | 11 |
| Diarrhoea and enteritis | - | - | - | - | - | - | - | - | 1 | - | 1 | - | - | - | - | - | - | - | - | - | - | - | 1 |
| Gastritis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Syphilis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Rickets | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Congenital Malformations | 3 | 2 | - | - | - | 1 | - | - | - | 2 | 8 | 4 | 1 | - | - | 1 | - | - | - | - | - | - | 14 |
| Premature Births | 11 | 1 | 2 | - | - | - | - | - | - | - | 14 | 1 | - | - | - | - | - | - | - | - | - | - | 15 |
| Atrophy, Atelectasis, Debility and Marasmus | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Injury at Birth | 12 | 3 | 1 | - | - | - | - | 1 | - | - | 17 | - | 1 | - | - | - | - | - | - | - | - | - | 18 |
| Haemorrhagic disease of newborn | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Other Causes | - | - | - | 1 | - | 1 | - | - | - | 1 | 3 | 1 | - | 1 | 1 | - | - | 1 | - | - | - | - | 7 |
| TOTALS | 28 | 6 | 4 | 1 | - | 2 | 1 | 1 | 1 | 4 | 48 | 6 | 6 | 3 | 1 | 1 | 1 | 1 | 1 | - | 1 | - | 69 |

MIDWIFERY SERVICE

Municipal midwives attended:—

| | | | | | | | |
|-----|--|-----------|-------------------|-----|-----|-----|-----|
| 1. | Bookings for home confinement | ... | ... | ... | ... | ... | 826 |
| 2. | Bookings for planned early discharges from hospital | ... | ... | ... | ... | ... | 627 |
| 3. | Patients delivered at home | ... | ... | ... | ... | ... | 679 |
| 4. | Primipara delivered at home | ... | ... | ... | ... | ... | 10 |
| | Multipara delivered at home | ... | ... | ... | ... | ... | 669 |
| 5. | Live births delivered at home | ... | ... | ... | ... | ... | 678 |
| 6. | Stillbirths delivered at home | ... | ... | ... | ... | ... | 1 |
| | congenital abnormalities:— Nasal passages | | | | | | |
| 7. | Neonatal death at home | ... | ... | ... | ... | ... | 1 |
| | congenital abnormality:— Imperforate anus | | | | | | |
| 8. | Premature Infants born at home | ... | ... | ... | ... | ... | 17 |
| | 1. 5lb 37 weeks admitted | 9. 5.8 | 36 weeks | | | | |
| | 2. 5.8 Term | 10. 3.12 | 34 weeks admitted | | | | |
| | 3. 5.4 Term | 11. 5.8 | Term | | | | |
| | 4. 5.8 39 weeks | 12. 5.4 | 38 weeks | | | | |
| | 5. 5lb 736 weeks | 13. 5.4 | 38 weeks | | | | |
| | 6. 5.8 736 weeks | 14. 5.2 | 37 weeks | | | | |
| | 7. 5.8 34 weeks admitted | 15. 5.4 | Term | | | | |
| | 8. 4.14 38 weeks admitted | 16. 5.8 | Term | | | | |
| | | 17. 5lb | Term | | | | |
| 9. | Inhalational Analgesia given | "Entonox" | | | | | 509 |
| | | "Trilene" | | | | | 34 |
| 10. | Patients given Pethidine or Pethilorfan | | | | | | 347 |
| 11. | Post Partum Haemorrhage including 2 secondary P.P.H. | | | | | | 7 |
| | Treated at home | | | | | 3 | |
| | Admitted to Hospital | | | | | 4 | |
| 12. | Retained Placentae | | | | | | 14 |
| | Treated at home | | | | | | 3 |
| | Admitted to Hospital | | | | | | 11 |
| 13. | Flying Squad calls | | | | | | 15 |
| 14. | Manual removal of placentae at home | | | | | | 2 |
| 15. | Blood transfusions at home | | | | | | 1 |
| 16. | Prolonged labours over 24 hours delivered at home, | | | | | | - |
| 17. | Forceps deliveries at home | | | | | | - |
| 18. | Ventouse extraction at home | | | | | | 1 |
| 19. | General Anaesthetics given at home | | | | | | 5 |
| 20. | Breech deliveries | | | | | | 4 |
| 21. | Sets of twins delivered at home | | | | | | - |

| | | | | |
|-----|--|---|-----------------------|---|
| 22. | Anaemia of pregnancy treated at home | | 82 | |
| 23. | Pre-eclamptic toxæmia of pregnancy treated at home | | 22 | |
| 24. | Puerperal pyrexia | | 20 | |
| | | Genital 7 Extra-Genital 13 | | |
| 25. | Congenital abnormalities delivered at home | | 12 | |
| | Spina Bifida | Imperforate Anus (N.N.D. at home) | | |
| | Mole on index finger - Rt. hand | Absence of Nasal Passages | | |
| | Extra digit - Left hand | (Mother Rubella contact) | | |
| | Heart Murmur | Hypospadias | | |
| | Small extra digit - Rt. foot | Port Wine Stain Rt. leg | | |
| | Cystic pedicles on ears | Blocked Tear Duct | | |
| | Fractured Humerus - Family history of fragility of bones | | | |
| 26. | Artificial rupture of membranes at home | | 27 | |
| 27. | Buccal pitocin induction of labour at home | | 24 | |
| 28. | Rhesus negative mothers delivered at home | | 93 | |
| 29. | Anti-D Immunoglobulin treatment given | | 49 | |
| 30. | Guthrie tests for phenylketonuria sent to laboratory | | 4,730 | |
| | | including 65 repeat tests | | |
| 31. | Patients admitted to hospital | | 237 | |
| | | Antenatal | 151 | |
| | | During labour | 59 | |
| | | After delivery | 27 | |
| | | (including 10 early discharges re-admitted) | | |
| 32. | Infants admitted to hospital (including 3 re-admissions) | | 24 | |
| | Spina Bifida | 1 | Lethargic | 1 |
| | Respiratory Distress | 2 | Spots on body | 1 |
| | Prematurity | 4 | Malaena Stools | 1 |
| | Vomiting | 3 | Jaundice | 1 |
| | Cyanosis | 3 | Respiratory Infection | 1 |
| | Collapse | 1 | Small for dates | 3 |
| | Asphyxia | 1 | | |
| | Fractured Humerus | 1 | | |
| 33. | Patients received for Home Nursing | | 1,492 | |
| | | Booked for Home Conf. | 158 | |
| | | Booked for Hospital Conf. | 1,334 | |
| | | (including 583 booked for early discharge) | | |
| 34. | No. of Pupil Midwives trained | | 45 | |
| | | (3 did not complete training) | | |
| 35. | District visits of Obstetric Course students | | 45 | |

**MATERNAL AND INFANT MORTALITY
FOR THE YEARS 1965 - 1972**

| <i>Year</i> | <i>Births (Live and Still)</i> | <i>Maternal Deaths</i> | <i>Maternal Mortality Rate (inc. abortion)</i> | <i>Infant Mortality Rate</i> |
|-------------|--|----------------------------|--|--------------------------------------|
| 1965 | 5,800 | - | - | 17.6 |
| 1966 | 5,750 | 1 | 0.17 | 10.9 |
| 1967 | 5,669 | 4 | 0.71 | 20.0 |
| 1968 | 5,654 | 2 | 0.35 | 17.0 |
| 1969 | 5,513 | - | 0.18 | 14.0 |
| 1970 | 5,358 | 1 | 0.18 | 17.0 |
| 1971 | 5,392 | - | - | 15.0 |
| 1972 | 4,927 | 2 | 0.41 | 14.0 |

| Midwife | Mile: | Deliveries | | Mater-nity | | Analgesia | | Ante-Natal | | Post-Natal | | Home Confinement | 48 hour bookings | Home Visits | Clinic Session A.N. | Clinic Session G.P. A/N | Clinic Session Cervical Cytology |
|---------|-------|------------|-----|------------|----------|-----------|---------|------------|-------|------------|-------|------------------|------------------|-------------|---------------------|-------------------------|----------------------------------|
| | | | | Normal | Abnormal | Entonox | Trilene | Midwife | Pupil | Midwife | Pupil | | | | | | |
| 1. @✓ | 4,014 | 43 | + 9 | 41 | 2 | 39 | | 838 | 633 | 762 | 681 | 71 | 52 | 105 | | | |
| 2. @ | 3,019 | 37 | + 4 | 37 | | 31 | | 898 | | 586 | | 45 | 34 | 69 | | | |
| 3. x✓ | 3,202 | 43 | + 5 | 42 | 1 | 39 | | 545 | 98 | 753 | 207 | 29 | 33 | 62 | | | |
| 4. x✓ | 4,314 | 44 | + 7 | 42 | 2 | 37 | | 1,033 | 403 | 800 | 644 | 54 | 29 | 94 | | | |
| 5. x✓ | 4,098 | 35 | + 1 | 32 | 3 | 1 | 33 | 1,440 | 34 | 885 | 31 | 45 | 67 | 96 | | | |
| 6. @✓ | 2,478 | 59 | + 4 | 56 | 3 | 46 | | 1,246 | 380 | 772 | 324 | 72 | 37 | 98 | | | |
| 7. ✓ | 5,679 | 58 | + 4 | 54 | 4 | 41 | | 648 | 300 | 663 | 368 | 53 | 40 | 59 | | | |
| 8. @✓ | 6,570 | 70 | + 3 | 65 | 5 | 50 | | 806 | 419 | 742 | 511 | 53 | 36 | 84 | | | |
| 9. @ | 3,081 | 48 | + 8 | 47 | 1 | 43 | | 528 | 332 | 769 | 513 | 56 | 48 | 166 | | | |
| 10. ✓ | 2,218 | | | | | | | | | | | | | | | | |
| 11. @✓ | 4,471 | 49 | + 4 | 48 | 1 | 41 | | 534 | 209 | 581 | 635 | 93 | 80 | 145 | | | |
| 12. | 1,454 | 12 | + 6 | 11 | 1 | 10 | | 189 | | 133 | | 4 | 10 | 21 | | | |
| 13. x✓ | 4,497 | 49 | + 3 | 48 | 1 | 39 | | 789 | 467 | 770 | 508 | 63 | 58 | 98 | | | |
| 14. x@ | 5,410 | 32 | + 1 | 32 | | 28 | | 516 | | 725 | | 31 | 36 | 47 | | | |
| 15. ✓ | 4,574 | 43 | + 8 | 43 | | 27 | | 1,257 | 561 | 874 | 413 | 43 | 59 | 118 | | | |
| 16. @ | 2,817 | 43 | + 2 | 43 | | 27 | | 1,224 | | 584 | | 46 | 41 | 94 | | | |
| 17. @ | 3,403 | 10 | + 2 | 10 | | 10 | | 629 | 172 | 471 | 353 | 28 | 27 | 53 | | | |
| 18. † | | 1 | + 0 | 1 | | | 1 | | | | 11 | | | | | | |

| Midwife | Miles | Deliveries | | Maternity | | Analgesia | | Ante-Natal | | Post-Natal | | Home Confinement | 48 hour bookings | Home Visits | Clinic Session A.N. | Clinic Session G.P. A/N | Clinic Session Cervical Cytology |
|---------------|--------|------------|------|-----------|----------|-----------|---------|------------|-------|------------|-------|------------------|------------------|-------------|---------------------|-------------------------|----------------------------------|
| | | | | Normal | Abnormal | Entonox | Trilene | Midwife | Pupil | Midwife | Pupil | | | | | | |
| 1. ✓ | 5,440 | | | | | | | 193 | | 456 | | | | 26 | 150 | 33 | 74 |
| 2. ✓ | 4,650 | | | | | | | 220 | | 754 | | | | 18 | 116 | 21 | 39 |
| 3. ✓ | 4,505 | | | | | | | 1,056 | | 619 | | | | 31 | 113 | 31 | 15 |
| 4. * | 4,962 | 3 | + 0 | 3 | | 2 | | 173 | | 573 | | | | 22 | 96 | 19 | 49 |
| 5. | 3,772 | | | | | | | 385 | | 682 | | | | 52 | 100 | 65 | 23 |
| 6. | 5,278 | | | | | | | 92 | | 875 | | | | 24 | 109 | 59 | 23 |
| 7. † | | | | | | | | | | 201 | | | | | | | |
| <i>Totals</i> | 93,106 | 679 | + 71 | 655 | 24 | 509 | 34 | 15,219 | 3,998 | 9,021 | 5,188 | 826 | 627 | 1,382 | 584 | 228 | 223 |

x Denotes 4 Midwives working in attachment schemes but who also undertake some other duties

N.B. Attachment transferred from Midwife 14 to Midwife 3 - November 1972

e Denotes Midwives working in liaison schemes with General Practitioner Obstetricians

The Midwifery Staff in full have assisted 37 doctors at the Ante-Natal sessions in the year.

* Part-time Midwife 4 undertook deliveries in an emergency while on duty.

† District Nurses and Health Visitors undertook these duties in connection with patients discharges from maternity unit during a period of quarantine for infection

✓ Midwives who assist with preparation for parentcraft sessions

Deliveries + = No. of deliveries + No. of patients admitted to Hospital in labour.

Staff Changes

Full Time No. 12 Left Service Sept. 1972 Not replaced (General Relief)

No. 16 Left Service Oct. 1972 Not replaced

Area transferred to Midwife 14 - See Note under Attached Schemes X

No. 17 Promoted 1972 Not replaced

Area transferred to Midwives 8 and 9

Part-Time No. 2 Commenced duties Jan. 1972 Replacement for 1971 Vacancy

| | |
|--------------------------|--------|
| Normal Diet | 14,079 |
| Vitamin A.D. & C Drops | 23,824 |
| Vitamin A.D. & C Tablets | 3,307 |
| Orange Juice | 28,804 |

CARE OF PREMATURE INFANTS

| | |
|--|-----|
| (1) Number of live premature infants notified during 1972 who were born* - | |
| (i) at home or in a nursing home | 16 |
| (ii) in hospital* | 303 |
| (2) The number of those born at home or in a nursing home - | |
| who were nursed entirely there | 16 |
| who were transferred to hospital on or before the 28th day | 1 |
| who died during the first 24 hours | 1 |
| who died in 1 and under 7 days | - |
| who died in 7 and under 28 days | - |
| who survived at the end of one month | 15 |
| (3) Number of those born in hospital - | |
| who died during the first 24 hours | 16 |
| who died in 1 and under 7 days | 14 |
| who died in 7 and under 28 days | 1 |
| who survived at the end of one month | 272 |
| (4) Number of premature still births who were born | |
| (i) at home or in a nursing home | 3 |
| (ii) in hospital | 36 |

* The group under this heading includes cases which may be born in one hospital and transferred to another.

CONGENITAL ABNORMALITIES

No. registered in 1972 - 134, of these 125 were live-births
 8 were still-births
 8 died

| | (1) Central Nervous System | | (2) Eye, Ear | | (3) Alimentary System | | (4) Heart and Great Vessels | | (5) Respiratory System | | (6) Uro-genital System | | (7) Limbs | | (8) Other Skeletal | | (9) Other Systems | | (10) Other Mal-formations | | TOTALS | | OVERALL TOTALS |
|--------------|-------------------------------|----|-----------------|---|--------------------------|---|--------------------------------|----|---------------------------|---|---------------------------|---|--------------|----|-----------------------|---|----------------------|---|------------------------------|---|--------|----|----------------|
| | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | |
| LIVE | 3 | 4 | 3 | - | 11 | 6 | 8 | 12 | - | - | 14 | 2 | 12 | 18 | 9 | 1 | 5 | 8 | 3 | 6 | 68 | 57 | 125 |
| STILL BIRTHS | 1 | 6 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | 2 | 6 | 8 |
| DEATHS | 2 | 3 | - | - | 1 | - | - | - | - | - | 1 | - | - | - | - | - | - | - | 1 | - | 4 | 4 | 8 |
| TOTALS | 6 | 13 | 3 | - | 12 | 6 | 8 | 12 | - | - | 15 | 2 | 12 | 18 | 9 | 1 | 5 | 8 | 4 | 7 | 74 | 67 | 134 |

CAUSES OF DEATH OR STILL-BIRTH

| | |
|--|---|
| Col. 1. Anencephalus | 2 |
| Spina Bifida | 1 |
| Hydrocephalus | 1 |
| Col. 2. Nil | |
| Col. 3. Malformations of alimentary system | 1 |
| Col. 4. Nil | |
| Col. 5. Nil | |
| Col. 6. Malformations of uro-genital organs (cardiac failure) | 1 |
| Col. 7/8/9. Nil | |
| Col. 10. pneumonia | 1 |

ISSUE OF WELFARE FOODS FOR 1972

| | |
|-------------------------|--------|
| National Dried Milk | 14,679 |
| Vitamin A.D & C Drops | 20,624 |
| Vitamin A.D & C Tablets | 3,367 |
| Orange Juice | 26,804 |

(Discontinued)

AT RISK REGISTER
YEAR ENDING 31st DECEMBER, 1972

| | | |
|---|--------|-------|
| Number added to Register during 1972 | ... .. | 747 |
| Number on Register at 31.12.72 | ... .. | 1,998 |
| Number of 8 months checks carried out during 1972 | ... .. | 563 |
| Number of 2 year checks carried out during 1972 | ... .. | 581 |

* * * * *

REFERRALS AND RETESTS 1972

| | | |
|-----------------------|---|----|
| Born 1972 | No. to be seen again at Child Health Centre | 5 |
| | No. referred to Stycar Hearing Clinic, Dr. Morgan | 3 |
| | No. in abeyance awaiting report from Hospital | 1 |
| Born 1971 | No. to be seen again at Child Health Centre | 11 |
| | No. referred to Stycar Hearing Clinic, Dr. Morgan | 9 |
| | No. referred to General Practitioner | 1 |
| | No. referred to Handicapped Register | 1 |
| | No. in abeyance awaiting report from Hospital | 5 |
| Born 1970 | No. to be seen again at Child Health Centre | 93 |
| | No. referred to Stycar Hearing Clinic, Dr. Morgan | 2 |
| | No. referred to Speech Therapy | 1 |
| | No. referred to Handicapped Register | 12 |
| | No. in abeyance awaiting report from Hospital | 7 |
| Born 1969 and 1968 | No. to be seen again at Child Health Centre | 2 |
| | No. referred for Audiogram | 1 |
| | No. referred to Speech Therapy | 6 |
| | No. referred to Handicapped Register | 3 |

STYCAR HEARING TESTS

| | |
|---|-----|
| Number of Clinics held in 1972 | 19 |
| Number of Appointments sent out during year | 153 |
| Number of Non-Attendees | 44 |

SOURCE OF REFERRAL AND RESULT

| SOURCE | HEARING SATISFACTORY | | | | | HEARING UNSATISFACTORY | | | TOTAL |
|----------------------|-------------------------------|--|-------------------------------|------------------------|-------------------|------------------------|--|------------------------|-------|
| | <i>Referred Speech Clinic</i> | <i>Referred Speech Clinic and E.N.T.</i> | <i>Refused Speech Therapy</i> | <i>For Observation</i> | <i>Discharged</i> | <i>Referred E.N.T.</i> | <i>Referred Speech Clinic & T.C.A.</i> | <i>For Observation</i> | |
| CHILD HEALTH CENTRE | 17 | | | 5 | 38 | 2 | 1 | 3 | 66 |
| HEALTH VISITOR | 1 | 1 | | | 8 | | | 2 | 12 |
| SPEECH CLINIC | | | | | 9 | 1 | | | 10 |
| GENERAL PRACTITIONER | 2 | | | | 8 | | | | 10 |
| OTHER SOURCES | 2 | | 1 | | | | | 1 | 4 |

REASON AND SOURCE OF REFERRAL

| REASON FOR REFERRAL | SOURCE OF REFERRAL | | | | | TOTAL |
|---------------------------|-----------------------------|-----------------------|----------------------|-----------------------------|----------------------|-------|
| | <i>Child Health Centres</i> | <i>Health Visitor</i> | <i>Speech Clinic</i> | <i>General Practitioner</i> | <i>Other Sources</i> | |
| 1. Failed stycar test | 33 | 5 | | | | 38 |
| 2. Poor Speech | 22 | 5 | | | 1 | 28 |
| 3. Suspected Hearing Loss | 9 | | 10 | 10 | 3 | 32 |
| 4. Other reasons | 2 | 2 | | | | 4 |

RETESTS

| REASON FOR RETESTS | HEARING SATISFACTORY | | HEARING UNSATISFACTORY | | TOTAL |
|-----------------------------|-------------------------------|--------------------------------|------------------------|---------------------------|-------|
| | <i>Referred Speech Clinic</i> | <i>Referred Child Guidance</i> | <i>Discharged</i> | <i>For Further Retest</i> | |
| Immature Response last test | | | 3 | 1 | 4 |
| Mentally Retarded | | 1 | | | 1 |
| Poor Speech | 1 | | 1 | | 2 |

LONDON BOROUGH OF CROYDON

APPENDIX 1

TOP

DIRECTOR OF NURSING SERVICES
Miss A. Hayward

TOP

DIVISIONAL NURSING OFFICER
Mrs. M.M. Connolly

MIDDLE - AREA NURSING OFFICERS

HEALTH VISITING/SCHOOL HEALTH

Miss M.A. Gabain

MIDWIFERY

(Non-Medical Supervisor)
Mrs. M.C. Hardy

HOME NURSING

Mr. A.R.R. Mills

LOWER MIDDLE NURSING OFFICERS

Miss Fry
Mrs. Ivens
Mrs. Sealey
Mrs. Ellis

HEALTH VISITORS

(Dept. Non-Med. Supervisor)
Miss Jenkins

DOM. MIDWIVES

Mrs. Waldron

Mrs. Benjamin

Mrs. Wilmer

Mrs. McDonough

Mrs. Wenham

REGISTERED HOME NURSES

FIRST LINE

CLINIC NURSES & SCHOOL NURSE ASSTS.

CLINIC/CYTOLOGY NURSES

ENROLLED HOME NURSES AND NURSING AUXILIARIES

**HOME VISITS BY HEALTH VISITORS AND
TUBERCULOSIS VISITORS**

| * TYPE OF CASE | | YEAR 1972 |
|---|--|-----------|
| 1 | Children born in 1972 | 5,256 |
| 2 | Other children aged under 5 years | 15,657 |
| 3 | Persons aged 5 - 16 seen as part of health visiting (not school health service) | 1,245 |
| 4 | Persons aged between 17 and 64 | 3,363 |
| 5 | Persons aged 65 and over | 815 |
| 6 | Households visited on account of T.B. | 634 |
| 7 | Households visited re other infectious diseases | 70 |
| 8 | Households visited for any other reason | 1,011 |
| <i>SUB-TOTAL</i> | | 28,051 |
| | Subsequent visits to children 0 - 5 years | 29,755 |
| | Subsequent visits to persons aged 65+ | 1,106 |
| | Visits to Commonwealth immigrant families | 3,490 |
| | Visits to problem families | 2,971 |
| | Other subsequent home visits | 4,283 |
| | Home visits by Tuberculosis Visitors | 3,884 |
| <i>GRAND TOTAL OF VISITS BY HEALTH VISITORS AND TUBERCULOSIS VISITORS</i> | | 73,540 |

No. of persons in lines 1 - 5 above who were:-

| | |
|----------------------|-----|
| Mentally handicapped | 78 |
| Mentally ill | 214 |

* *N.B.* - If a household rather than a person was visited, the case was included in line 6, 7 or 8, and not in lines 1 - 5, in accordance with DOHSS Form LHS 27/3 (1972)

ATTENDANCES AT CHILD HEALTH CENTRES - 1972

| | Addiscombe Grove Monday P.M. | All Saints Monday P.M. | Bensham Manor Monday A.M. & P.M. | Boston Road Thursday P.M. | Brighton Road, Coulsdon Thursday P.M. | Brighton Road, S. Croydon Wednesday P.M. | Cherry Tree Green Thursday A.M. | Coulsdon Youth Club Monday P.M. | East Croydon Thursday A.M. & P.M. | Falconwood (Alt.) Wednesday P.M. | Forestdale (Alt.) Wednesday P.M. | Hazelglen Wed. A.M. (Jan+Feb.) | Kenley Friday P.M. | Lodge Road Thursday A.M. & P.M. | Lodge Road Friday P.M. | Monks Hill Thursday P.M. | Monks Orchard Monday P.M. | New Addington Monday P.M. |
|---------------------------|---------------------------------|---------------------------|-------------------------------------|------------------------------|--|---|------------------------------------|------------------------------------|--------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------|-----------------------|------------------------------------|---------------------------|-----------------------------|------------------------------|------------------------------|
| Infants born 1972 | 76 | 72 | 120 | 70 | 55 | 134 | 28 | 77 | 154 | 54 | 50 | 2 | 73 | 198 | 105 | 49 | 104 | 108 |
| No. of re-attendances | 357 | 432 | 930 | 481 | 372 | 782 | 274 | 566 | 1201 | 287 | 295 | 2 | 609 | 890 | 409 | 247 | 627 | 491 |
| Children 1-5 years | 165 | 257 | 248 | 219 | 189 | 186 | 91 | 202 | 243 | 99 | 98 | 44 | 232 | 293 | 137 | 66 | 328 | 311 |
| No. of re-attendances | 631 | 1023 | 1347 | 982 | 503 | 862 | 553 | 1408 | 1270 | 457 | 447 | 40 | 999 | 1222 | 588 | 418 | 979 | 632 |
| Total attendances | 1229 | 1784 | 2645 | 1752 | 1119 | 1964 | 946 | 2243 | 2868 | 897 | 890 | 88 | 1913 | 2603 | 1239 | 780 | 2038 | 1542 |
| Consultation with doctors | 475 | 678 | 914 | 490 | 478 | 671 | - | 741 | 1148 | 238 | 230 | 21 | 598 | 1423 | 691 | 359 | 608 | 523 |
| No. of sessions | 44 | 46 | 96 | 52 | 50 | 52 | 52 | 48 | 94 | 28 | 22 | 8 | 50 | 104 | 50 | 52 | 47 | 48 |
| Average per session 1972 | 27.9 | 37.1 | 27.5 | 33.7 | 22.4 | 37.8 | 18.2 | 46.7 | 30.6 | 34.5 | 40.4 | 11.0 | 38.2 | 25.0 | 24.8 | 15.0 | 43.3 | 32.1 |
| Average per session 1971 | 25.8 | 43.2 | 27.3 | 35.6 | 22.0 | 33.9 | 21.2 | 57.8 | 33.0 | 37.4 | 51.0 | 12.7 | 32.0 | 27.9 | 19.1 | 17.2 | 42.8 | 30.2 |

Continued on next page

ATTENDANCES AT CHILD HEALTH CENTRES - 1972 (Continued)

| | New Addington Wednesday P.M. | New Addington Thursday P.M. | Norbury Wednesday A.M. & P.M. | Old Coulsdon Tuesday P.M. | Parish Church Mon. P.M. (Jan. - March) | Purley Tuesday A.M. | Rectory Park Tuesday P.M. | Rectory Park Thursday P.M. | Reedham Park Avenue (Alt.) Wednesday P.M. | St. Albans Wednesday P.M. | St. Andrews Friday P.M. (April - Dec.) | St. Jude's Tues. A.M. (Jan. - Sept.) & P.M. | St. Oswalds Thursday P.M. | St. Paul's Friday P.M. | Selhurst Mon. P.M. (Jan. - Oct.) | Seisdon Monday P.M. | Shirley Thursday A.M. | Shrublands Monday P.M. |
|---------------------------|---------------------------------|--------------------------------|----------------------------------|------------------------------|---|------------------------|------------------------------|-------------------------------|--|------------------------------|---|--|------------------------------|---------------------------|-------------------------------------|------------------------|--------------------------|---------------------------|
| Infants born 1972 | 144 | 173 | 147 | 43 | 26 | 78 | 105 | 95 | 17 | 104 | 121 | 113 | 86 | 72 | 25 | 99 | 72 | 35 |
| No. of re-attendances | 682 | 653 | 998 | 390 | 36 | 448 | 819 | 788 | 53 | 563 | 718 | 660 | 492 | 417 | 112 | 782 | 546 | 248 |
| Children 1 - 5 years | 513 | 417 | 315 | 196 | 111 | 228 | 173 | 305 | 69 | 259 | 20 | 212 | 157 | 217 | 84 | 203 | 197 | 162 |
| No. of re-attendances | 1104 | 1203 | 1854 | 1005 | 95 | 708 | 1010 | 1327 | 163 | 1173 | 513 | 1103 | 783 | 629 | 441 | 1128 | 743 | 635 |
| Total attendances | 2443 | 2446 | 3314 | 1634 | 268 | 1462 | 2107 | 2515 | 302 | 2099 | 1372 | 2088 | 1518 | 1335 | 662 | 2192 | 1558 | 1080 |
| Consultation with doctors | 953 | 803 | 1201 | 354 | 161 | 620 | 350 | 811 | 156 | 631 | 567 | 784 | 564 | 539 | 254 | 550 | 551 | 587 |
| No. of sessions | 60 | 52 | 100 | 51 | 13 | 51 | 55 | 52 | 24 | 52 | 38 | 88 | 52 | 50 | 33 | 48 | 50 | 48 |
| Average per session 1972 | 40.7 | 47.0 | 33.1 | 32.0 | 20.6 | 28.6 | 38.3 | 48.3 | 12.6 | 40.3 | 36.1 | 23.7 | 29.2 | 26.6 | 20.0 | 45.6 | 31.1 | 22.5 |
| Average per session 1971 | 49.5 | 44.8 | 38.3 | 40.6 | 24.6 | 34.6 | 22.1 | 41.9 | 17.5 | 40.3 | - | 27.2 | 29.9 | 37.3 | 27.3 | 46.2 | 27.4 | 29.8 |

Continued on next page

ATTENDANCES AT CHILD HEALTH CENTRES - 1972 (Continued)

| | Shrublands Friday P.M. | South Croydon Thursday A.M. (Jan. - March) | South Norwood Tuesday P.M. | South Norwood Friday P.M. | Upper Norwood (St. Johns) Wednesday P.M. | Upper Norwood (St. Aubyns) Thursday A.M. & P.M. | Waddon Wednesday P.M. | Woodside Friday P.M. | TOTAL 1972 | TOTAL 1971 | Clinics held at General Practitioners' Surgeries - 1972 | Clinics held at General Practitioners' Surgeries - 1971 |
|---------------------------|---------------------------|---|-------------------------------|------------------------------|---|--|--------------------------|-------------------------|------------|------------|---|---|
| Infants born 1972 | 43 | 16 | 67 | 62 | 66 | 168 | 82 | 82 | 3,670 | 4,246 | 841 | 710 |
| No. of re-attendances | 338 | 30 | 421 | 379 | 490 | 940 | 412 | 480 | 22,117 | 25,148 | 4,985 | 3,833 |
| Children 1 - 5 years | 157 | 86 | 106 | 62 | 178 | 382 | 182 | 146 | 8,545 | 9,616 | 1,755 | 1,522 |
| No. of re-attendances | 602 | 290 | 691 | 690 | 768 | 1449 | 431 | 539 | 35,438 | 36,957 | 6,973 | 6,525 |
| Total attendances | 1140 | 422 | 1285 | 1193 | 1502 | 2939 | 1107 | 1247 | 69,770 | 75,967 | 14,554 | 12,590 |
| Consultation with doctors | 478 | 173 | 390 | 395 | 333 | 1044 | 455 | 614 | 24,604 | 26,829 | 5,065 | 5,186 |
| No. of sessions | 50 | 13 | 47 | 50 | 52 | 94 | 52 | 49 | 2,269 | 2,379 | 724 | 570 |
| Average per session 1972 | 22.8 | 32.4 | 27.3 | 23.8 | 28.8 | 31.2 | 21.3 | 25.4 | 30.7 | - | 20.1 | - |
| Average per session 1971 | 20.1 | 32.3 | 24.6 | 25.4 | 23.5 | 51.8 | 24.3 | 24.9 | - | 31.9 | - | 22.1 |

HOME NURSING

Staff as at 31.12.72.

| |
|------------------------------------|
| 1 Area Nursing Officer |
| 4 Nursing Officers |
| 1 Senior District Nurse |
| 51 (46 F.T.E.) Nurses S.R.N. |
| 11 Nurses S.E.N. |
| 18 (15 F.T.E.) Nursing Auxiliaries |

Summary of work carried out during 1972 (1971 figures in brackets)

| | | |
|--------------------------------------|-------|---------|
| Total number patients nursed at home | 7,059 | (6,990) |
|--------------------------------------|-------|---------|

Termination of Domiciliary cases

| | | |
|-----------------------------|--------------|----------------|
| Convalescent | 3,038 | (3,019) |
| Hospital | 971 | (1,058) |
| Died | 456 | (391) |
| Removed - other causes | 671 | (725) |
| Remaining on books 31.12.72 | 1,923 | (1,697) |
| <i>Total</i> | <u>7,059</u> | <u>(6,990)</u> |

| | | |
|---|--------|----------|
| Total number of treatments carried out by Home Nurses in General Practitioner Surgeries | 22,198 | (11,338) |
|---|--------|----------|

| | |
|---|--------|
| Total number of treatments carried out at Health Centre | 11,880 |
|---|--------|

HOME VISITS

Croydon

Cross Boundary Arrangements
with other Local Authorities

| | 1972 | 1971 | |
|--------------|----------------|----------------|--------------|
| January | 14,745 | 15,644 | 104 |
| February | 15,240 | 13,973 | 74 |
| March | 16,100 | 16,472 | 50 |
| April | 15,083 | 14,093 | 98 |
| May | 16,082 | 15,212 | 63 |
| June | 14,962 | 14,517 | 76 |
| July | 15,434 | 15,039 | 144 |
| August | 15,301 | 14,753 | 121 |
| September | 14,696 | 14,952 | 97 |
| October | 16,384 | 15,543 | 89 |
| November | 16,596 | 14,983 | 84 |
| December | 15,060 | 15,198 | 82 |
| <i>TOTAL</i> | <u>185,683</u> | <u>179,379</u> | <u>1,082</u> |

REHABILITATION OF ELDERLY PERSONS

Patients visited during 1972

| | | |
|--------|------------|--------------|
| Female | 105 | (81) |
| Male | 58 | (57) |
| | <u>163</u> | <u>(138)</u> |

Results

| | | |
|-----------------------|----|------|
| Admitted Hospital | 14 | (18) |
| Rehabilitated | 45 | (43) |
| Limited or no success | 73 | (42) |
| Died | 3 | (7) |
| Remaining on books | 28 | (29) |
| 1 Visit only | 44 | |

GENERAL PRACTITIONER ATTACHMENT SCHEMES

Definitions

FULL ATTACHMENT Schemes are those in which a Health Visitor or Home Nurse has regular consultations with specified general practitioners and is responsible for providing Local Health Authority services to all the patients on their lists who live within the Authority's area.

PART ATTACHMENT Schemes are those where a Health Visitor or Home Nurse has regular consultations with specified general practitioners but is responsible for providing Local Health Authority services to only some of the patients on their practice lists who live in the Authority's area.

ALIGNMENT Schemes are where the Health Visitor or Home Nurse is responsible for providing Local Health Authority services to all patients on specified general practitioner lists living in a Local Authority area but where no formal arrangements exist between nursing staff and the general practitioner.

ATTACHMENT SCHEMES AS AT 31st DECEMBER 1972
(1971 FIGURES IN BRACKETS)

| STAFF | FULL ATTACHMENT | PART ATTACHMENT | ALIGNMENT | TOTAL |
|-----------------|--------------------|--------------------|-----------|---------|
| Health Visitors | 29 (28) | 3 (3) | 5 | 37 (31) |
| Home Nurses | 41 (38) | 5 (8) | - | 46 (46) |
| Midwives | 4 (4) | 8 (9) | - | 12 (13) |
| <i>TOTAL</i> | 74 (70) | 16 (20) | 5 | 95 (90) |

CROSS BOUNDARY ARRANGEMENTS

Arrangements have been made on a knock for knock basis with the under-mentioned Local Authorities for community nursing staff to nurse and advise patients registered with specified general practitioners:—

London Borough of Lambeth

London Borough of Bromley

London Borough of Merton

Surrey County Council

LONG STAY IMMIGRANTS

| <i>Country Issuing Passport</i> | <i>Notifications Received</i> | <i>Successful Visits (Contacted)</i> | <i>Unsuccessful Visits (Not Contacted)</i> |
|-------------------------------------|-----------------------------------|--|--|
| Commonwealth Countries | | | |
| Caribbean | 50 | 49 | 1 |
| India | 115 | 66 | 49 |
| Pakistan | 60 | 54 | 6 |
| Other Asian | 70 | 58 | 12 |
| African | 569 | 467 | 102 |
| Others | 37 | 35 | 2 |
| Non-Commonwealth Countries | | | |
| European | 12 | 12 | - |
| Others | 22 | 19 | 3 |
| TOTAL | 935 | 760 | 175 |

MALES 293

FEMALES 341

CHILDREN 301

LOAN OF NURSING EQUIPMENT

The Corporation lends equipment and makes a small weekly charge, with exemption for incomes below a certain figure.

1972

| | HEALTH DEPT. | BRITISH RED CROSS SOCIETY Croydon |
|------------------------------|-----------------|--|
| Air rings | 46 | 17 |
| Bath mat | - | - |
| Bath seat | - | 4 |
| Bed blocks | 71 | 2 |
| Bed pans | 165 | 45 |
| Bed rests | 193 | 40 |
| Bedsteads | 31 | - |
| Bed tables | 18 | 4 |
| Carry Chairs | 5 | - |
| Commodes | 578 | 109 |
| Cradles | 174 | 51 |
| Crutches (Pairs) | 38 | 20 |
| Diapers | 270 | - |
| Enuresis machines | 173 | - |
| Feeding cups | 8 | 2 |
| Foam squares and rings | 125 | 6 |
| Foot suction pumps | 8 | - |
| Fracture boards | 122 | - |
| Hydraulic hoists | 49 | - |
| Incontinence pads | 75,305 | - |
| Kidney bowls | - | - |
| Mackintosh sheets | 82 | 11 |
| Mattresses | 24 | - |
| North pads | 120 | - |
| Paddi rolls | 10,771 | - |
| Pick-up-stick | - | - |
| Plastic sheet | 50 | - |
| Protective undergarments | 1,508 | - |
| Pulleys | 38 | - |
| Ripple beds | 139 | - |
| Renal Dialysis Machines | 8 | - |
| Toilet extension | - | 2 |
| Urinals | 116 | 14 |
| Walking aids | 367 | 24 |
| Walking sticks | 62 | 6 |
| Wheelchairs | 183 | 93 |
| Wheelchairs (self-propelled) | - | 11 |
| Toilet Aid (rail) | - | 2 |
| Bath Aid (rail) | - | 4 |

DEATHS FROM ACCIDENTS IN THE HOME

| <i>Cause</i> | <i>No.</i> | <i>Details</i> |
|------------------|------------------|--|
| Falls | 16 | There were 12 women and 4 men between the ages of 37 and 84 years of age. |
| Asphyxia | 8 | 1 boy aged 2 months - carbon monoxide poisoning when house caught fire. 1 man aged 20 - inhalation of stomach contents. 1 man aged 32 - inhalation of stomach contents. 1 woman aged 58 - inhalation of stomach contents. 1 man aged 63 - carbon monoxide poisoning from inhalation of fumes - faulty flue pipe on gas water heater. 1 man aged 64 - inhalation of smoke and fire fumes. 1 woman aged 75 - drowned in her bath. 1 man aged 79 - carbon monoxide poisoning from inhalation of fumes from solid fuel stove. |
| Burns and Scalds | 1 | 1 woman aged 84 - multiple burns. |
| Poisoning | 4 | 1 boy - aged 2 months - lead poisoning - ingestion of paint flakes. 1 man - aged 52 - Barbiturate. 1 woman - aged 53 - Alcohol and Soneryl. 1 woman - aged 67 - Phenformin overdose. |
| TOTAL | <u><u>29</u></u> | |

"DON'T HOARD MEDICINES" CAMPAIGN. CROYDON - MARCH 1972

| | | |
|--|-----------------|--|
| Number of shops visited | | 74 |
| Time taken on collection | | 33 hours |
| Weighing, packing and incineration | 4 pharmacists - | 120 hours |
| Assessment of 10% sample | 8 pharmacists - | 40 hours |
| Distance covered | | 294 miles |
| Total gross weight of drugs collected | | 1353 lbs. |
| Weight of Chemists' and Doctors' stock | | 236 lbs. |
| Weight returned by public | 1st week | 273 lbs. |
| | 2nd week | 354 lbs. |
| | 3rd week | 490 lbs. |
| Total weight returned by public | | 1117 lbs |
| Total nett weight of tablets etc. | | 247 lbs. = less than one tablet per head of the popula- tion |
| <hr/> | | |
| Number of bottles returned containing | | |
| | Barbiturates | 124 |
| | Amphetamines | 8 |
| | Mandrax | 11 |
| | Preludin | 3 |
| | D.D.A. items | 9 |

Assessment Result: Classified with reference to MIMS Pharmacological Index

| | Px | % | | % |
|-------------------------------|----|---|------------------------------|----|
| Analgesic & Anti-inflammatory | 17 | | Central Nervous System | 38 |
| Alimentary system | 12 | | E.N.T. | |
| Tranquilliser & Sedative | 12 | | Ophthalmic | 15 |
| Antibiotic & Sulphonamide | 9 | | Dermatological | |
| Nutritional & Vitamin | 9 | | Anaesthetic | |
| E.N.T. | 6 | | Alimentary | 12 |
| Dematological | 6 | | Anti infective | 9 |
| Stimulant & Anti-Depressant | 5 | | Nutritional | 9 |
| Cardiovascular | 4 | | G.U. | 4 |
| Hypnotic | 4 | | Respiratory | 4 |
| G.U. | 4 | | Miscellaneous & Unidentified | 4 |
| Respiratory | 4 | | Cardiovascular | 4 |
| Unidentified | 3 | | Hormones | 1 |
| Ophthalmic | 2 | | | |
| Hormones | 1 | | | |
| Anaesthetic | 1 | | | |
| Miscellaneous | 1 | | | |

DRUG COLLECTION CAMPAIGN - SPRING 1972

Assessment of 10% samples

| | Dispensed Medicine | Over the Counter | Tablets | | Type of Preparation | | | | | % Total of Units Returned | |
|------------------------------|-----------------------|---------------------|------------|--------------|---------------------|-------------|----------|-----------|-----------|------------------------------|-------------|
| | | | Bottles | Contents | Capsules | | Liq. | Other | External | | |
| | | | | | Bots. | Cont. | | | | | |
| Alimentary System | 56 | 48 | 64 | 2092 | 4 | 61 | 21 | 10 | | 5 | 12% |
| Cardiovascular | 32 | 1 | 29 | 1342 | 2 | 27 | | 2 | | | 4% |
| Analgesics | | | | | | | | | | | |
| Anti-Inflammatory | 120 | 22 | 122 | 4569 | 16 | 528 | 3 | | | 1 | 17% |
| Tranquillisers/Sed. | 93 | 4 | 79 | 3099 | 14 | 721 | 3 | 1 | | | 12% |
| Stim./Anti-Depressants | 41 | | 27 | 714 | 13 | 368 | 1 | | | | 5% |
| Hypnotic | 29 | 1 | 26 | 804 | 2 | 146 | 2 | | | | 4% |
| E.N.T. | 37 | 13 | 26 | 384 | 5 | 104 | 5 | | 11 | 14 | 6% |
| Hormones | 10 | | 9 | 319 | | | | | 1 | 1 | 1% |
| G.U. | 30 | 2 | 29 | 921 | 3 | 46 | | | | | 4% |
| Antibiotic/ Sulphonamides | 74 | 4 | 44 | 851 | 23 | 172 | 6 | 4 | | 4 | 9% |
| Nutritional/Vitamin | 56 | 20 | 58 | 1539 | 11 | 140 | 7 | | | | 9% |
| Respiratory | 9 | 26 | 13 | 398 | 4 | 130 | 17 | 3 | | | 4% |
| Ophthalmic | 15 | 2 | | | | | | | 10 | 18 | 2% |
| Dermatological | 42 | 9 | | | | | | | 15 | 36 | 1% |
| Anaesthetic | 5 | 4 | 6 | 65 | | | | | 2 | 3 | 1% |
| Contraceptives | | | | | | | | | | | - |
| Miscellaneous | 7 | | 4 | 442 | | | | | | | 1% |
| Unidentified | 25 | 1 | 21 | 1313 | 3 | 123 | 1 | 1 | | | 3% |
| TOTALS | 681 | 157 | 557 | 18852 | 100 | 2566 | 6 | 21 | 39 | 82 | 100% |

Part D. Inspections

| | <i>Children 0-4 (inc.)</i> | <i>Expectant and Nursing Mothers</i> |
|---|--------------------------------|--|
| Number of patients given first inspections during year | 1,028 | 82 |
| Number of patients in A and D above who require treatment | 593 | 76 |
| Number of patients in B and E who were offered treatment | 591 | 76 |

Part E. Sessions

Number of sessions (i.e. equivalent complete half-days) devoted to Maternity and Child Welfare patients:

| | |
|----------------------|-----|
| For treatment | 312 |
| For health education | 3 |

DOMICILIARY FAMILY PLANNING SERVICE 1972

Table 1

| | <i>Number of new patients seen during the year (see note 2)</i> | | |
|--------|---|------------------|--------------|
| | <i>Married (including the widowed separated or divorced)</i> | <i>Unmarried</i> | <i>Total</i> |
| Male | 9 | 1 | 10 |
| Female | 120 | 25 | 145 |
| Total | 129 | 26 | 155 |

Table 2

| | | |
|--|-------------------------|-----|
| Number of new patients seen during the year who were:— | Medical cases | 44 |
| | Non-medical but needy | 61 |
| | Other non-medical cases | 50 |
| | Total | 155 |

Table 3

| | | |
|--|-------------------|----|
| Number of new patients seen during the year who were initially advised to use (see note 3):— | Sheath | 49 |
| | Pill | 48 |
| | Diaphragm | 4 |
| | I.U.D. | 67 |
| | Other methods | 80 |
| | No method advised | 8 |

CERVICAL CYTOLOGY

Number of women tested during 1972

| MONTH | No. of Clinics | Class I | | Class II | | Class III | | Class IV | | Class V | | TOTALS | | TOTAL |
|--------------|----------------|--------------|--------------|--------------|--------------|-----------|-----------|-----------|----------|-----------|----------|--------------|--------------|--------------|
| | | New Cases | Repeats | New Cases | Repeats | New Cases | Repeats | New Cases | Repeats | New Cases | Repeats | New Cases | Repeats | |
| January | 13 | 114 | 78 | 73 | 95 | 2 | 2 | - | - | - | - | 189 | 175 | 364 |
| February | 14 | 128 | 120 | 54 | 86 | 1 | 3 | - | - | - | - | 183 | 209 | 392 |
| March | 20 | 141 | 153 | 76 | 94 | 1 | 2 | - | - | - | - | 218 | 249 | 467 |
| April | 15 | 126 | 89 | 60 | 68 | 4 | - | - | - | - | - | 190 | 157 | 347 |
| May | 21 | 142 | 114 | 103 | 127 | - | 3 | - | - | 1 | - | 246 | 244 | 490 |
| June | 19 | 132 | 144 | 79 | 96 | - | 1 | - | - | - | - | 211 | 241 | 452 |
| July | 17 | 115 | 101 | 76 | 88 | 1 | - | 1 | - | - | - | 193 | 189 | 382 |
| August | 20 | 112 | 109 | 106 | 98 | 2 | 1 | 1 | - | - | - | 221 | 208 | 429 |
| September | 23 | 125 | 114 | 98 | 141 | 3 | 2 | - | - | - | - | 226 | 257 | 483 |
| October | 20 | 116 | 139 | 71 | 112 | 7 | 2 | 1 | - | 1 | - | 196 | 253 | 449 |
| November | 25 | 180 | 137 | 110 | 101 | 1 | - | - | - | - | - | 291 | 238 | 529 |
| December | 17 | 127 | 53 | 124 | 65 | 2 | - | - | - | - | - | 253 | 118 | 371 |
| TOTAL | 224 | 1,558 | 1,351 | 1,030 | 1,171 | 24 | 16 | 3 | - | 2 | - | 2,617 | 2,538 | 5,155 |

Numbers referred to Family Doctors for Treatment

| | | | | | | | |
|----------|----|-------|----|-----------|----|----------|----|
| January | 42 | April | 44 | July | 23 | October | 37 |
| February | 43 | May | 46 | August | 25 | November | 27 |
| March | 38 | June | 31 | September | 44 | December | 16 |

TOTAL REFERRALS - 416

AGE GROUPS

| | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70-74 | TOTAL |
|--------------|-----------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-----------|-----------|--------------|
| Class I | 23 | 207 | 451 | 420 | 468 | 446 | 405 | 277 | 136 | 56 | 12 | 8 | 2,909 |
| Class II | 11 | 111 | 268 | 296 | 310 | 286 | 302 | 313 | 190 | 94 | 16 | 4 | 2,201 |
| Class III | - | 2 | 7 | 10 | 8 | 4 | 3 | 4 | - | 1 | 1 | - | 40 |
| Class IV | - | - | - | 1 | - | 1 | - | 1 | - | - | - | - | 3 |
| Class V | - | - | 1 | - | - | - | - | - | 1 | - | - | - | 2 |
| TOTAL | 34 | 320 | 727 | 727 | 786 | 737 | 710 | 595 | 327 | 151 | 29 | 12 | 5,155 |

Class I - NORMAL SMEAR PATTERN according to age and physiological state (including pregnancy)

Class II - "INFLAMMATORY" PATTERN - may be due to erosion, bacterial or Monilia infections, Trichomonad infestation, Pill, I.U.D. etc. Malignant cells NOT seen. Treat if clinically advisable.

Class III - DYSKARYOTIC CELLS PRESENT - Implies that nuclei of epithelial cells are abnormal and may be a reflection of some atypicality of cervical epithelium. Current opinion suggests that at this stage such a condition may be reversible. Careful follow-up and specialist management required.

Class IV - ISOLATED CELLS SUGGEST MALIGNANCY - Early gynaecological review essential.

Class V - MALIGNANCY PROBABLE - Early gynaecological review essential.

REGISTERED NURSING HOMES

Sections 187 - 194, Public Health Act 1936, as amended by Nursing Homes Act 1963

| | Number of Homes | Number of beds provided | | |
|--|-----------------|-------------------------|-------|-------|
| | | Maternity | Other | Total |
| Homes registered during the year | - | - | - | - |
| Homes whose registrations were withdrawn during year | - | - | - | - |
| Homes on Register at end of year | 15* | 20* | 399 | 419 |

*Includes 1 Mother and Baby Home.

NURSES AGENCIES ACT, 1957

There are two agencies on the Register which supply nurses for home nursing on a private patient paying basis.

CREMATION ACTS, 1902 and 1952

During the year 2,914 certificates were completed by the Medical Officer of Health in the capacity of Medical Referee under the above Acts.

PUBLIC MORTUARY AND
CORONER'S POST MORTEM ROOM 1972

| | | | | | | |
|---|-----|-----|-----|-----|-----|-------|
| Total number of Bodies received | ... | ... | ... | ... | ... | 1,152 |
| Post-Mortem Examination for M.O.H. | ... | ... | ... | ... | ... | 2 |
| Post-Mortem Examinations for H.M. Coroner | ... | ... | ... | ... | ... | 1,145 |
| Still-Born (M) No P.M. | ... | ... | ... | ... | ... | - |
| Adults (M) 3 (F) 2 No P.M. | ... | ... | ... | ... | ... | 5 |

COMMUNICABLE DISEASES NOTIFIED DURING 1972

| Notifiable Disease | Cases notified | | | | | | | | Total cases notified in wards | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------|-----------------|---------|-------|--------|---------|---------|---------|-----------|-------------------------------|---------|-------------|------------|----------------|------------|----------|------|------------|---------------|-------------|---------|--------|-----------|---------|-------------------|-------------------------|----------------------------|---------------|--------|-----|-----|-------|---|
| | At ages - years | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | At all ages | Under 1 | 1 - 4 | 5 - 14 | 15 - 24 | 25 - 44 | 45 - 64 | 65 & over | U. Norwood | Norbury | W. Thornton | Ben. Manor | Thornton Heath | S. Norwood | Woodside | East | Addiscombe | Whitehorse M. | Broad Green | Central | Waddon | Addington | Shirley | Sanderstead North | Sanderstead and Selsdon | Woodcote and Coulsdon West | Coulsdon East | Purley | M | F | TOTAL | |
| Anthrax | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Scarlet Fever ... | 100 | - | 28 | 63 | 9 | - | - | 4 | 2 | 1 | 7 | 5 | 5 | 7 | 7 | 5 | 5 | 3 | - | 1 | 16 | 17 | - | 8 | 1 | 1 | 5 | 49 | 51 | 100 | | |
| Diphtheria | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Acute Meningitis ... | 11 | 4 | 3 | 2 | 1 | 1 | - | 1 | - | - | 1 | - | 2 | 1 | 1 | - | - | - | - | - | - | 1 | - | 2 | - | - | 2 | 7 | 4 | 11 | | |
| Typhoid and Para-Typhoid | 2 | - | - | 2 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | - | - | - | - | 1 | 1 | 2 | | |
| Smallpox | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | |
| Cholera | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | |
| Typhus | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | |
| Ophthalmia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Neonatorum | 1 | 1 | - | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | | |
| Acute Poliomyelitis | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | |
| Dysentery... .. | 13 | 1 | 2 | 5 | 4 | - | 1 | - | 3 | - | - | - | 1 | - | - | - | 1 | - | - | - | - | - | 2 | 3 | 1 | 2 | 8 | 5 | 13 | | | |
| Malaria | 3 | - | - | 3 | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | - | - | - | 2 | - | - | - | - | - | 3 | 3 | | | |
| Infective Jaundice ... | 32 | - | 7 | 5 | 11 | 8 | 1 | 1 | 4 | 2 | 4 | - | 2 | 2 | 2 | 2 | 2 | - | 4 | 2 | 3 | 3 | 1 | 1 | - | - | 20 | 12 | 32 | | | |
| Food Poisoning ... | 15 | - | 1 | 4 | 4 | 4 | 2 | - | 2 | - | 1 | 1 | - | - | - | 1 | - | 1 | - | - | 1 | - | 1 | - | 5 | 1 | 9 | 6 | 15 | | | |
| Acute Encephalitis ... | 2 | - | 1 | - | - | - | 1 | - | - | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | 2 | 2 | | |
| Measles | 498 | 21 | 227 | 240 | 6 | 4 | - | 41 | 10 | 11 | 8 | 43 | 43 | 71 | 16 | 3 | 11 | 11 | 12 | 26 | 109 | 32 | 2 | 31 | 6 | 4 | 8 | 255 | 243 | 498 | | |
| Whooping Cough ... | 50 | 7 | 29 | 13 | 1 | - | - | 2 | 2 | 1 | - | 6 | - | - | - | - | - | 2 | 2 | - | 29 | 1 | - | 3 | 2 | - | 28 | 22 | 50 | | | |
| Leptospirosis | 1 | - | - | 1 | - | - | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | | | |
| Tetanus | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | | |
| Yellow Fever | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | | |
| | 728 | 34 | 290 | 337 | 34 | 20 | 10 | 3 | 50 | 23 | 15 | 22 | 56 | 54 | 81 | 27 | 11 | 19 | 17 | 14 | 31 | 158 | 57 | 5 | 48 | 16 | 7 | 17 | 377 | 351 | 728 | |

Tuberculosis notifications are shown in the section relating to that disease

FOOD POISONING

Corrected food poisoning notifications and cases ascertained in 1972 numbered:—

| 1st Quarter | 2nd Quarter | 3rd Quarter | 4th Quarter | Total |
|-------------|-------------|-------------|-------------|-------|
| 16 | 3 | 23 | 6 | 48 |

Outbreaks due to identified agents:—

| Total Outbreaks | Total Cases |
|-----------------|-------------|
| 5 | 29 |

Outbreaks due to:—

| | | | | | | | | |
|-------------------------------------|-----|-----|-----|--------------------|-----|-----|-----|-----|
| (a) Chemical poisons | ... | ... | Nil | (d) botulinum | ... | ... | ... | Nil |
| (b) Salmonella organisms | ... | ... | 4 | (e) welchii | ... | ... | ... | 1 |
| (c) Staphylococci (including toxin) | ... | ... | ... | (f) other bacteria | ... | ... | ... | Nil |

Outbreaks of undiscovered cause:—

| Total Outbreaks | Total Cases |
|-----------------|-------------|
| Nil | Nil |

Single Cases:—

| Agent identified | Unknown Cause | Total |
|------------------|---------------|-------|
| 16 | 3 | 19 |

Cases due to:—

| | | | | |
|-----------------------|-------------------------|-------------------------|----------------------------|-----------------------|
| <i>Salm. brediney</i> | <i>Salm. infantis</i> | <i>Salm. montevideo</i> | <i>Salm. thompson</i> | <i>Strep faecalis</i> |
| 2 | 1 | 1 | 1 | 1 |
| Unknown Cause | <i>Salm. braenderup</i> | <i>Salm. agona</i> | <i>Salm. typhii murium</i> | |
| 3 | 1 | 1 | 8 | |

Salmonella infection not food-borne Nil

**SAMPLES SUBMITTED TO THE PATHOLOGICAL LABORATORY FOR
BACTERIOLOGICAL EXAMINATION - 1972**

| | | | | | | | | | | |
|-------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|--------------|-----------|
| Faeces outfits | ... | ... | ... | ... | ... | ... | ... | ... | ... | 1,360 |
| Drinking Water samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 600 |
| Public Swimming Bath Water samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 112 |
| Private Swimming Bath Water samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 161 |
| Private Wells | ... | ... | ... | ... | ... | ... | ... | ... | ... | 189 |
| Milk samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 141 |
| Cream samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 42 |
| Ice Cream samples | ... | ... | ... | ... | ... | ... | ... | ... | ... | 151 |
| Sundry Food specimens | ... | ... | ... | ... | ... | ... | ... | ... | ... | 22 |
| Blood | ... | ... | ... | ... | ... | ... | ... | ... | ... | 18 |
| Urine | ... | ... | ... | ... | ... | ... | ... | ... | ... | 571 |
| Nose and Throat Swabs | ... | ... | ... | ... | ... | ... | ... | ... | ... | 40 |
| | | | | | | | | | <i>Total</i> | ... 3,407 |

Samples of Drinking Water

During the year under review the total number of examinations performed were:—

| | | | | |
|-----------------|-----|-----|-----|-----|
| Bacteriological | ... | ... | ... | 600 |
| Chemical | ... | ... | ... | 46 |

Unsatisfactory Samples

The Health Department is warned by telephone whenever preliminary results of bacteriological tests show presumptive coli. The Water Engineer is immediately notified. If there is no apparent cause, simultaneous re-sampling by the Water and Health Departments is performed. Further action depends on the findings of these re-tests.

IMMUNISATION AGAINST WHOOPING COUGH

A total of 6,424 children were immunised against whooping cough, comprising 6,263 under school age and 161 school children.

In addition 754 children were given reinforcing injections.

IMMUNISATION AGAINST TETANUS

A total of 7,474 children were immunised against tetanus, comprising 6,326 under school age and 1,148 school children.

In addition 8,067 children were given reinforcing injections.

VACCINATION AGAINST SMALLPOX

A total of 1,046 persons were vaccinated against smallpox.

| | <i>Under 1 year of age</i> | <i>1</i> | <i>2-4</i> | <i>5-15</i> | <i>16 or over</i> | <i>Total</i> |
|----------------------------|------------------------------------|----------|------------|-------------|-----------------------|--------------|
| Successful Vaccinations | 12 | 162 | 313 | 103 | 8 | 598 |
| Successful Re-Vaccinations | - | - | 36 | 309 | 103 | 448 |
| | | | | | | 1,046 |

DIPHTHERIA

IMMUNISATION IN RELATION TO CHILD POPULATION

Number of children at 31st December, 1972 who completed a course of immunisation during the year.

| <i>Age at 31.12.72 i.e. born in year</i> | <i>Under 1 1972</i> | <i>1969-1971</i> | <i>1968-1965</i> | <i>1964-56</i> | <i>Total</i> |
|--|-------------------------|------------------|------------------|----------------|--------------|
| Completed course of injections | 778 | 5,548 | 402 | 550 | 7,278 |
| Reinforcing injections | - | 312 | 4,285 | 1,382 | 5,979 |
| TOTAL | 778 | 5,860 | 4,687 | 1,932 | 13,257 |

| | <i>Under 1</i> | <i>1-4</i> | <i>Total under 5</i> | <i>5-14</i> | <i>Total under 15</i> |
|--|----------------|------------|--------------------------|-------------|---------------------------|
| Estimated mid year Child population * | 5,070 | 21,030 | 26,100 | 54,500 | 80,600 |

* uncorrected

VACCINATION AGAINST MEASLES

A total of 3,767 children were vaccinated against measles.

VACCINATION AGAINST RUBELLA

A total of 2,586 girls were vaccinated against rubella.

VACCINATED AGAINST POLIOMYELITIS

The following table gives the number of persons who received a course of primary vaccination during the year.

| | <i>Children born 1972</i> | <i>Children born 1971</i> | <i>Children born 1970</i> | <i>Children born 1969</i> | <i>Young Persons born 1968-65</i> | <i>Young Persons born 1964-56</i> | <i>TOTAL</i> |
|-------------------|---------------------------|---------------------------|---------------------------|---------------------------|-----------------------------------|-----------------------------------|--------------|
| With Oral Vaccine | 836 | 3,846 | 1,501 | 298 | 489 | 599 | 7,569 |

Number of persons who received a reinforcing vaccination as at 31st December, 1972.

| <i>VACCINATED</i> | <i>Persons given a first reinforcing Vaccination during 1972.</i> |
|------------------------------------|---|
| With Oral Vaccine | 8,357 |
| Annual Total | 15,926 |
| Total since Vaccination began 1957 | 170,972 |

INTERNATIONAL VACCINATION CERTIFICATES

During the year 12,017 certificates were authenticated; 8,245 Smallpox, 3,429 Cholera, 343 T.A.B.

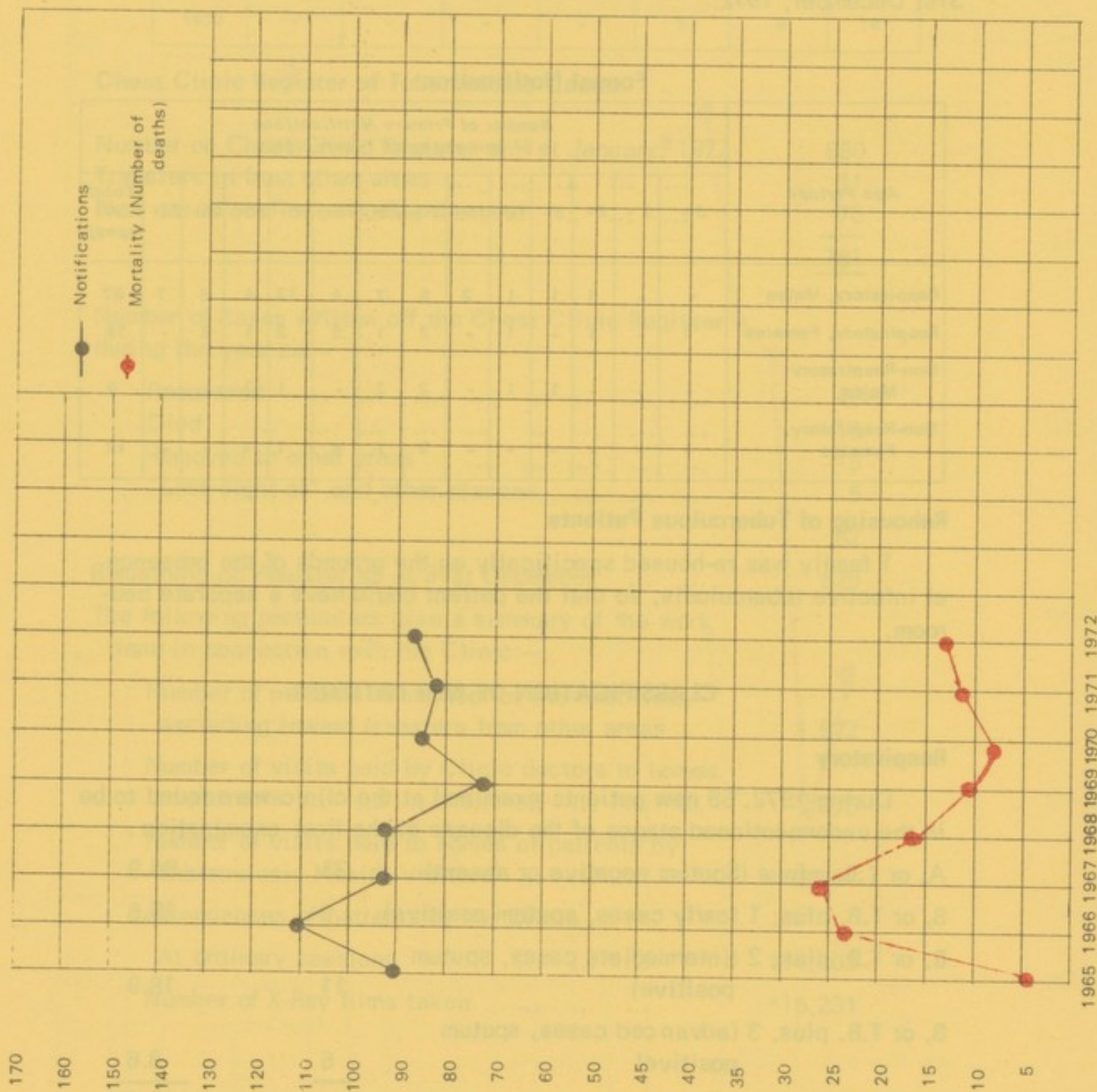
IMMUNISATION OF CHILDREN BORN IN 1971

| <i>Poliomyelitis</i> | <i>Diphtheria</i> | <i>1971 Live Births</i> |
|--------------------------|-------------------|-------------------------|
| 302 - (Immunised 1971) | 298 | |
| 3,846 - (Immunised 1972) | 3,833 | 5,324 |
| 4,148 | 4,131 | |
| (78%) | (78%) | |

MEASLES VACCINATION FROM APRIL 1968

| <i>Year</i> | <i>Children Vaccinated</i> |
|-------------|----------------------------|
| 1968 | 6,035 |
| 1969 | 3,546 |
| 1970 | 4,663 |
| 1971 | 4,408 |
| 1972 | 3,767 |

TUBERCULOSIS (All Forms) PRIMARY NOTIFICATION AND MORTALITY - 1965 - 1972



1965 1966 1967 1968 1969 1970 1971 1972

Ages at Death from Respiratory Tuberculosis

| Year | 0 - 5 | 5 - 15 | 15 - 25 | 25 - 45 | 45 - 65 | over 65 | TOTAL |
|------|-------|--------|---------|---------|---------|---------|-------|
| 1972 | - | - | - | - | 5 | 9 | 14 |

Chest Clinic Register of Tuberculosis Cases

| | |
|--|------------|
| Number on Chest Clinic Register on 1st January, 1972 | 680 |
| Transfers in from other areas | 11 |
| New cases confirmed during the year | 70 |
| | <u>761</u> |

Number of cases written off the Chest Clinic Register during the year as:-

| | |
|--|----|
| Recovered | 46 |
| Died | 16 |
| Removed to other areas | 15 |
| "Lost sight of" and other reasons | 5 |

Remaining on Register as at 31st December 679

The following particulars give a summary of the work done in connection with the Clinic:-

| | |
|---|---------|
| Number of patients examined for the first time, excluding inward transfers from other areas | 1,972 |
| Number of visits paid by Clinic doctors to homes of patients | 176 |
| Number of visits paid to homes of patients by Tuberculosis Health Visitors | 3,884 |
| Attendances of patients at the Clinic - | |
| At ordinary sessions | *14,600 |
| Number of X-Ray films taken | *16,231 |

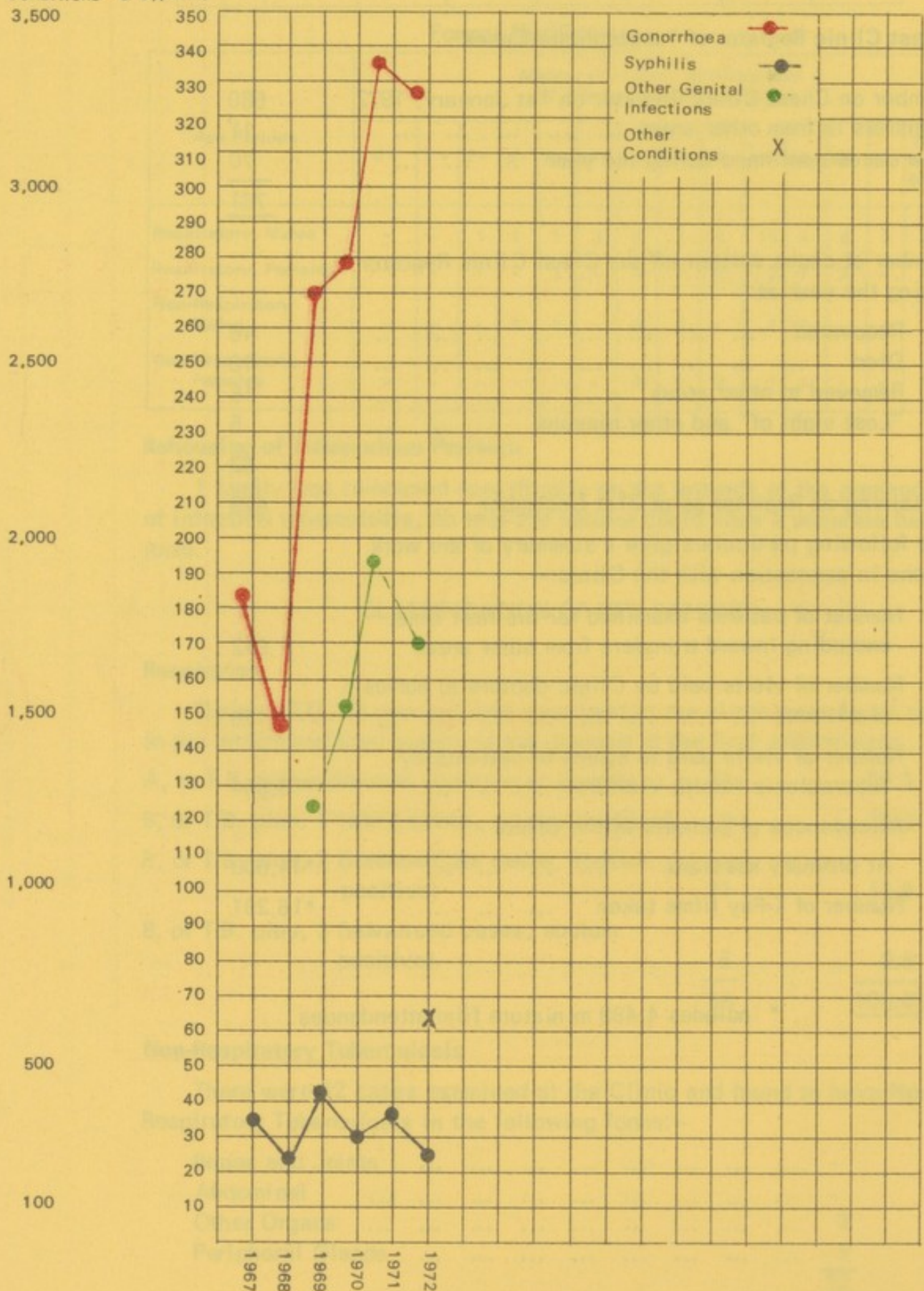
* includes 4,489 miniature film attendances

SEXUALLY TRANSMITTED DISEASES

New cases residing in Croydon and treated in Croydon and at various London Clinics

Other Genital Infections and Other Conditions

Gonorrhoea & Syphilis



SEXUALLY TRANSMITTED DISEASES

Croydon General Hospital Centre

| PART A New Cases of Syphilis | | <i>Total</i> | <i>Male</i> | <i>Female</i> |
|---|--|--------------|-------------|---------------|
| A1 | Primary | 2 | 2 | - |
| A2 | Secondary | 1 | 1 | - |
| A3 | Latent in the first two years of infection | 5 | 4 | 1 |
| A4 | Cardio vascular | - | - | - |
| A5 | Of the nervous system | - | - | - |
| A6 | All other late and latent stages | 12 | 4 | 8 |
| A7 | Congenital aged under 2 years | - | - | - |
| A8 | Congenital aged 2 years and over | 1 | - | 1 |
| | TOTAL OF LINES A1 TO A8 | 21 | 11 | 10 |
| PART B New Cases of Gonorrhoea | | | | |
| B1 | Post-pubertal infections | 336 | 211 | 125 |
| B2 | Pre-pubertal infections | - | - | - |
| B3 | Ophthalmia neonatorum | - | - | - |
| | TOTAL OF LINES B1 TO B3 | 336 | 211 | 125 |
| PART C New Cases of Other Genital Infections | | | | |
| C1 | Chancroid | - | - | - |
| C2 | Lymphogranuloma Venereum | - | - | - |
| C3 | Granuloma Inguinale | - | - | - |
| C4 | Non-specific genital infection | 882 | 652 | 230 |
| C5 | Non-specific genital infection with arthritis | 4 | 4 | - |
| C6 | Trichomoniasis | 133 | 2 | 131 |
| C7 | Candidiasis | 520 | 207 | 313 |
| C8 | Scabies | 17 | 10 | 7 |
| C9 | Pubic lice (pediculosis - pubis) | 32 | 26 | 6 |
| C10 | Herpes simplex | 25 | 16 | 9 |
| C11 | Warts (condylomata acuminata) | 147 | 84 | 63 |
| C12 | Molluscum Contagiosum | 4 | 4 | - |
| | TOTAL OF LINES C1 TO C12 | 1764 | 1005 | 759 |
| PART D New Cases of Other Conditions | | | | |
| D1 | Other treponemal diseases | 12 | 9 | 3 |
| D2 | Other conditions requiring treatment in the centre | 113 | 74 | 39 |
| D3 | Other conditions not requiring treatment in the centre | 582 | 296 | 286 |
| | TOTAL OF LINES D1 TO D3 | 707 | 379 | 328 |
| | GRAND TOTAL OF PARTS A, B, C & D | 2828 | 1606 | 1222 |

PART E AGE GROUPS OF NEW CASES

| | | SYPHILIS (lines A1 & A2) | | | GONORRHOEA (line B1) | | |
|---|---|--------------------------|------|--------|----------------------|-------------|---------------|
| | AGE GROUP | Total | Male | Female | Total | Male | Female |
| 1 | Under 16 | - | - | - | 8 | - | 8 |
| 2 | 16 and 17 | - | - | - | 28 | 8 | 20 |
| 3 | 18 and 19 | - | - | - | 54 | 33 | 21 |
| 4 | 20 to 24 | - | - | - | 108 | 70 | 38 |
| 5 | 25 and over | 3 | 3 | - | 138 | 100 | 38 |
| TOTAL LINES 1 TO 5 | | 3 | 3 | - | 336 | 211 | 125 |
| PART F LOCALITIES IN WHICH INFECTIONS TOOK PLACE | | | | | | | |
| PRIMARY & SECONDARY SYPHILIS (Lines A1 and A2) | | | | | <i>Total</i> | <i>Male</i> | <i>Female</i> |
| 1 | In locality of centre | | | | 2 | 2 | - |
| 2 | Elsewhere in Great Britain and Northern Ireland | | | | - | - | - |
| 3 | Outside Great Britain and Northern Ireland | | | | 1 | 1 | - |
| 4 | Not known | | | | - | - | - |
| TOTAL OF LINES 1 TO 4 | | | | | 3 | 3 | - |
| POST PUBERTAL GONORRHOEA (line B1) | | | | | - | - | - |
| 5 | In locality of centre | | | | 269 | 188 | 81 |
| 6 | Elsewhere in Great Britain and Northern Ireland | | | | 51 | 13 | 38 |
| 7 | Outside Great Britain and Northern Ireland | | | | 10 | 10 | - |
| 8 | Not known | | | | - | - | - |
| TOTAL LINES 5 TO 8 | | | | | 336 | 211 | 125 |
| PART G CONTACT ACTION AND DIAGNOSIS | | | | | | | |
| SYPHILIS | | | | | <i>Total</i> | <i>Male</i> | <i>Female</i> |
| 1 | Contact action taken | | | | 8 | 8 | - |
| 2 | Contacts attending with syphilis | | | | - | - | - |
| 3 | Contacts attending, syphilis not diagnosed | | | | - | - | - |
| GONORRHOEA | | | | | | | |
| 4 | Contact action taken | | | | 235 | 193 | 42 |
| 5 | Contacts attending with gonorrhoea | | | | 64 | 2 | 62 |
| 6 | Contacts attending, gonorrhoea not diagnosed | | | | 35 | 4 | 31 |

| Local Health Authority area of residence of patient | Totals all conditions | Number of New Cases in the Year | | | | |
|---|-----------------------|------------------------------------|--------------------|------------|--------------------------|------------------|
| | | Syphilis | | Gonorrhoea | Other Genital Infections | Other Conditions |
| | | Primary and Secondary (A1 - A2) | Other (A3 - A8) | | | |
| CROYDON | 1959 | 2 | 12 | 255 | 1211 | 479 |
| BROMLEY | 227 | 1 | 3 | 17 | 146 | 60 |
| KENT | 36 | - | - | 2 | 27 | 7 |
| KINGSTON | 6 | - | - | 1 | 5 | - |
| LAMBETH | 70 | - | - | 10 | 41 | 19 |
| LEWISHAM | 19 | - | - | 3 | 13 | 3 |
| MERTON | 64 | - | - | 6 | 44 | 14 |
| SOUTHWARK | 4 | - | - | 2 | 2 | - |
| SURREY | 239 | - | 2 | 25 | 134 | 78 |
| E. SUSSEX | 13 | - | - | 2 | 9 | 2 |
| W. SUSSEX | 4 | - | - | - | 3 | 1 |
| SUTTON | 81 | - | - | 5 | 55 | 21 |
| WANDSWORTH | 27 | - | - | 2 | 19 | 6 |
| OTHERS | 86 | - | 1 | 6 | 55 | 18 |
| TOTALS | 2828 | 3 | 18 | 336 | 1764 | 707 |

To the Chairman and Members of the Education Committee

LADIES AND GENTLEMEN,

This is the eighth Annual Report of the School Health Service of the London Borough of Croydon, and it represents Government Policy as determined by legislation it will be the last to be presented by a Medical Officer wholly employed by the Corporation. When the Corporation was to be transferred from authority control of a so-called health service, it has come inevitable that to prevent competition within the public sector for scarce professional staff the new Area Boards would be required to supply appropriate medical facilities to Education Authorities. Fortunately in Croydon there is a long tradition of co-operation between hospital and local authority health services, so that for parents and children alike under the new system may pass unnoted.

Routine Medical Inspections

There increased in number to come with a record school population. Findings were largely unchanged. There were five pupils whose physical condition was noted as 'unsatisfactory' (0.03%), half the number recorded in the previous year. The centralization of medical record cards was

LONDON BOROUGH OF CROYDON

ANNUAL REPORT

OF THE PRINCIPAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR

1972

To the Chairman and Members of the Education Committee:

LADIES AND GENTLEMEN,

This is the eighth Annual Report of the School Health Service of the London Borough of Croydon, and if expressed Government Policy is confirmed by legislation it will be the last to be presented by a Medical Officer wholly employed by the Corporation. When the decision was made to reject local authority control of a co-ordinated health service, it became inevitable that to prevent competition within the public sector for scarce professional staff the new Area Boards would be required to supply appropriate medical facilities to Education Authorities. Fortunately in Croydon there is a long tradition of co-operation between hospital and local authority health services, so that for parents and children changes under the new system may pass unnoticed.

Routine Medical Inspections

These increased in number to cope with a record school population. Findings were largely unchanged. There were five pupils whose physical condition was noted as "unsatisfactory" (0.03%), half the number recorded in the previous year. The centralization of medical record cards was

impeded by staff shortages, but as the future location of central office premises was uncertain, delay seemed advisable until this question was settled.

Personal Hygiene

The recorded numbers of skin defects were average figures, but infestation with head lice increased despite strenuous efforts to prevent, find and treat this annoying condition. There is no evidence that the latest insecticide was ineffective, but its use must finally be followed by careful washing and combing. Furthermore current hair styles demand constant care and cleanliness if infestation is to be avoided. Plantar warts maintain their troublesome prevalence, and efforts to find a shorter method of cure were pursued with some modest success.

Vision Defects

The system of referral to opticians begun in 1971 worked satisfactorily. Children referred in this way were reviewed in six months to ensure the examination had been carried out, and there was no evidence that any more children failed to attend the optician than would fail an appointment at an Eye Clinic.

Educationally Subnormal Children

There was no return to the position of previous years with a long waiting list of children needing assessment, but the same cannot be noted for the number (72) waiting entry to a day special school.

Maladjusted Children

Last year comment was made about a three-fold increase in the number of children ascertained as maladjusted over the previous years. This was maintained during 1972, and the Sir Cyril Burt Day School has a waiting list for most age groups in both the day and residential departments, as has the unit for non-communicating children. Dr. Crosse in his report on the Child Guidance Service comments on these facts and on the efforts made to increase facilities at the Clinic.

Health Education

The Principal Health Education Officer sets out in some detail the continuing development of this service in schools. From the outset our local health education efforts have been directed to influence two main groups of the population - parents concerned with the upbringing of children, and children themselves. For the latter we have sought to offer help to teachers, in the hope that health education would become part of the usual school curriculum. The effects of this long term approach are incapable of speedy evaluation and await findings when school children so educated form a new generation of parents. It was thought very important to maintain the firm

links established between the Health and Education Departments in this field, and measures to ensure its continuation in 1974 were being considered.

Dental Services

The year began with an exceptionally good staffing position, but as related by the Chief Dental Officer we finished sadly depleted. The general trend of applications for employment by dentists has been encouraging, so that there are reasons to think that this was only a temporary setback.

Speech Therapy

A similar position arose due to resignations for various reasons and the number of Therapists employed at the end of the year had fallen to four. The problem here is much more difficult as there is a national shortage. This had been overcome by local measures which cannot be repeated at the present time.

Infectious Diseases

There was a small outbreak of Sonne dysentery in a South Croydon school which responded rapidly to the usual methods of control. The Committee agreed that during their final school medical examination children should be offered booster doses of tetanus and poliomyelitis vaccines. With the co-operation of Head Teachers this is now being carried out as a routine procedure.

Research

The Committee agreed that subject to the usual safeguards teaching staff could be approached by various organisations for research projects involving schoolchildren. These included blood biochemistry by University College Hospital, London, at Ashburton School, a general survey of Rubella and its connection with deafness by the Hospital for Sick Children, Great Ormond Street, a dental health study on fluoride mouth wash and toothpaste by Guy's Hospital, and a survey of dental health of schoolchildren by the Department of Education and Science. Although most of the work concerns the research teams, these projects do require some help from the staff of schools and officers of this Department, whose essential voluntary efforts are much appreciated.

Acknowledgments

As usual individual contributions to this report are indicated by naming the professional officer concerned and Dr. Burrowes has assembled and commented on the general findings. Professional work must be supported by efficient administration, and this has been forthcoming throughout a somewhat difficult year with unfailing courtesy and competence. It would be impossible to discharge our duties without the help of the Chief Education Officer and his staff, and especially Head and other teachers in all the Croydon schools.

The Members of the Education Committee have continued to exercise the interest and encouragement on which the maintenance and development of the School Health Service depend, and for which I express the collective thanks of the Department.

Yours faithfully

S.L. WRIGHT,

Principal School Medical Officer.

PARTICULARS OF SCHOOL CLINICS
as at 31.12.1972

The following Clinics are provided by the Education Committee; attendance, with the exception of the Minor Ailments Clinics, is by appointment arranged by the Principal School Medical Officer:—

| <i>Clinic</i> | <i>Address</i> |
|---|---|
| | DAILY A.M. |
| MINOR AILMENTS (INCLUDING VERRUCAE) | Lodge Road, Broad Green, Croydon. Parkway Clinic, New Addington. Waddon Clinic, Coldharbour Road, Waddon. |
| | MON. & THURS. IN TERM TIME |
| | Ashburton School, Shirley Road, Croydon. (a.m.) Rockmount School, Upper Norwood. (p.m.) |
| | OTHERS |
| | Norbury Manor Junior School (Wed. a.m. in term) Purley Clinic, Whytecliffe Road, Purley. (Wed. p.m.) Sanderstead Clinic, Rectory Park. (Mon. & Fri. p.m.) Dr. Heber's (Verrucae) Surgery (Thurs. p.m.) |
| DENTAL | Lodge Road, Broad Green, Croydon. 206, Selhurst Road, South Norwood. Parkway Clinic, New Addington. Purley Clinic, Whytecliffe Road, Purley. Sanderstead Clinic, Rectory Park, Sanderstead. Shirley Road, Shirley, Croydon. Waddon Clinic, Coldharbour Road, Croydon. |
| INSPECTION | ONE OF THE FOLLOWING CLINICS APPROX. WEEKLY IN P.M. |
| | Lodge Road, Broad Green, Croydon. Parkway Clinic, New Addington. Purley Clinic, Whytecliffe Road, Purley. |
| | AS REQUIRED |
| | Sanderstead Clinic, Rectory Park, Sanderstead. |
| PHYSIOTHERAPY | Lodge Road Clinic Annexe, Lodge Road, Croydon. 47, St. James's Road, Broad Green, Croydon. Old Coulsdon Clinic, Coulsdon Road. Parkway Clinic, New Addington. Purley Clinic, Whytecliffe Road, Purley. Sanderstead Clinic, Rectory Park, Sanderstead. Waddon Clinic, Coldharbour Road, Croydon. |
| SPEECH | 47, St. James's Road, Broad Green, Croydon. Parkway Clinic, New Addington. Purley, Council Offices, Brighton Road, Purley. Sanderstead Clinic, Rectory Park, Sanderstead. |
| AUDIOLOGY | Lodge Road, Broad Green, Croydon. Parkway Clinic, New Addington. Purley Clinic, Whytecliffe Road, Purley. |
| ENURESIS | Lodge Road, Broad Green, Croydon. (Weekly) Parkway Clinic, New Addington. (Monday p.m.) (fortnightly) Purley Clinic, Whytecliffe Road, Purley. (Friday p.m.) (monthly) |
| EYE | Parkway Clinic, New Addington. Purley Clinic, Whytecliffe Road, Purley. Sanderstead Clinic, Rectory Park, Sanderstead |
| OVERWEIGHT | Public Health Department (Girls) and various schools and clinics (Boys) on various days by appointment. |

STAFF OF THE SCHOOL HEALTH SERVICE

| | | | |
|---|--------|--|-------|
| *Medical Officers | ... .. | 10 (full-time) | (38%) |
| *Medical Officers | ... .. | 8 (part-time) | (39%) |
| Consultants and Specialists | ... .. | 6 (part-time) | |
| *Dental Officers | ... .. | 13 (including 8 part-time and 1 Dental Auxiliary) | (80%) |
| *Physiotherapists | ... .. | 12 (including 9 part-time) | |
| Speech Therapists | ... .. | 4 | |
| *Health Visitor/School Nurses, Clinic Nurses and Nurse/Assistants | ... .. | 75 (including D.N. Officer, A.N. Officer and Nursing Officers, and 13 part-time) | (27%) |
| *Dental Surgery Assistants | ... .. | 17 (including 6 part-time) | (80%) |

*Also performing duties in other sections of Public Health Department.
Percentages in brackets show proportion of time given to school work.

COST OF THE SCHOOL HEALTH SERVICE

The cost of the Medical, dental and nursing services was £232,321.

Cost of Special Schools

| | | |
|--|--------|----------|
| Schools maintained by the Council | ... .. | £376,507 |
| Other Schools (not maintained by local Education Authorities) | ... .. | £122,490 |
| Adjustments with other authorities in respect of Special Schools | ... .. | £53,391 |
| | | £552,388 |

PART I. MEDICAL INSPECTION IN SCHOOLS

As stated previously, no major change in the system of routine medical inspections is contemplated prior to the reorganisation of the Health Services in 1974.

These Inspections are as follows:—

(i) Entrants

Children admitted for the first time to school and not already examined as Entrants, i.e. normally between 5 years and 6 years.

(ii) 8 Year Old Group

Children in their second year in a Junior School, unless previously examined in the Junior School.

(iii) Entrants to Secondary School

Children in their first year in a Secondary School.

(iv) Final Leavers

Children in their last year of attendance at school who have not been medically examined in that year.

(v) Special Cases

Children of any age whom the Head Teacher and parents wish the Medical Officer to see at his next visit.

The number of children seen at Routine Medical Inspections and Special Inspections has not varied significantly from the previous year. The number of re-inspections has, however, decreased by one-fifth after a steady rise over the previous seven years.

Table 1. Numbers seen at Medical Inspections 1972

| | | |
|----------------------------|-------|--------|
| Routine Inspections - | | 18,395 |
| Special Inspections - | | |
| at school medical sessions | 1,016 | |
| at inspection clinics | 38 | |
| | | 1,054 |
| Re-inspections - | | |
| at school medical sessions | 2,840 | |
| at inspection clinics | 598 | |
| | | 3,438 |

Special Inspections have decreased by 10% after a fairly steady rise for some years and a marked increase last year. It is probable, however, that in future years the trend will continue to be for more of these special inspections requested by Head Teachers, School Nurses or parents.

Last year showed an increase in the number of parents attending School Medical Inspections particularly, strangely enough, in the School Leavers Group. This pattern has not continued and the number of parents attending has reverted to under 55% which is just above the average of the previous five or six years.

Table 2. Attendance of Parents at School Medical Inspections

| | 1972 | | 1971 | |
|-----------------------------------|-------|-------|-------|-------|
| | Boys | Girls | Boys | Girls |
| Entrants | 84.1% | 83.2% | 84.0% | 84.0% |
| Leavers | 5.5% | 6.2% | 9.3% | 10.9% |
| Others | 56.7% | 57.4% | 57.3% | 56.1% |
| Total Nos. of Children examined | 9,452 | 8,943 | 9,346 | 8,834 |
| Attendance of Parents (overall %) | 54.8% | | 57.0% | |

Total Defects T's and R's = 6,500

Total Defects O's = 6,074

No. of medical inspections at non-maintained schools = 28 (visits)

The total number of defects discovered appearing to need treatment has remained much the same as in previous years but the number requiring observation has decreased. This accounts for the fall in the number of re-inspections.

The number of visits made to non-maintained schools remains fairly static as shown in Appendix C, Page 55.

Personal Hygiene

The problem of head infestation is still very much with us. There was an increase of 7% in the number of pupils inspected in the course of the year. This number has now risen to a figure almost equivalent to the total school population, though the numbers may include the same infant and junior schools several times in a year, while many secondary schools are not inspected routinely.

The number of pupils found unclean for the first time was the highest figure for many years and the number of pupils found unclean at follow-up visits was also, regrettably, at a record level.

It appears to be true that in Croydon mainly infant and junior children are involved and there was a large outbreak of infestation at an Infant and Junior School which was still not under control at the end of the year. Head Inspections at Secondary Schools, where siblings of the children at the infected school might have been expected to attend, showed some cases of infestation but on nothing like the scale at the Infant and Junior Schools.

Table 3
RETURN OF DEFECTS FOUND AT ROUTINE MEDICAL INSPECTIONS 1972

| Defects | Boys | | | Girls | | |
|---------------------------|----------------------------|------------------------------|-----------------------------|----------------------------|------------------------------|-----------------------------|
| | Number requiring Treatment | Number requiring Observation | Percentage of total Defects | Number requiring Treatment | Number requiring Observation | Percentage of total Defects |
| Uncleanliness - | | | | | | |
| Head/Body | 2 | 11 | 0.2 | 10 | 8 | 0.3 |
| Teeth | 586 | 92 | 10.5 | 764 | 91 | 14.0 |
| Skin | 599 | 156 | 11.7 | 375 | 155 | 8.7 |
| Eyes - | | | | | | |
| Defective Vision | 823 | 812 | 25.1 | 930 | 920 | 30.2 |
| Squint | 135 | 20 | 2.4 | 125 | 30 | 2.5 |
| External Eye Trouble ... | 20 | 28 | 0.7 | 24 | 29 | 0.9 |
| Ears - | | | | | | |
| Deafness | 113 | 163 | 4.3 | 92 | 184 | 4.5 |
| Otitis Media | 50 | 70 | 1.9 | 57 | 95 | 2.5 |
| Other Defects | 7 | 21 | 0.4 | 8 | 20 | 0.5 |
| Nose and Throat | 164 | 337 | 7.7 | 154 | 302 | 7.5 |
| Enlarged Cervical Glands | 7 | 81 | 1.4 | 7 | 71 | 1.3 |
| Speech | 75 | 90 | 2.5 | 50 | 46 | 1.6 |
| Heart and Circulation ... | 101 | 46 | 2.3 | 76 | 64 | 2.3 |
| Lungs | 149 | 109 | 3.9 | 69 | 75 | 2.4 |
| Developmental - | | | | | | |
| Hernia | 25 | 22 | 0.7 | 17 | 16 | 0.5 |
| Other Defects | 186 | 352 | 8.5 | 56 | 204 | 4.3 |
| Deformities - | | | | | | |
| Posture | 17 | 32 | 0.8 | 19 | 45 | 1.0 |
| Flat Feet | 49 | 121 | 2.7 | 32 | 102 | 2.2 |
| Other | 66 | 107 | 2.7 | 73 | 132 | 3.4 |
| Nervous System - | | | | | | |
| Epilepsy | 23 | 22 | 0.7 | 14 | 11 | 0.4 |
| Other | 60 | 121 | 2.8 | 35 | 70 | 1.7 |
| Psychological - | | | | | | |
| Development | 14 | 63 | 1.2 | 20 | 47 | 1.1 |
| Stability | 35 | 112 | 2.3 | 26 | 92 | 1.9 |
| Abdomen | 35 | 33 | 1.0 | 42 | 37 | 1.3 |
| Other Defects | 25 | 80 | 1.6 | 59 | 127 | 3.0 |
| TOTAL DEFECTS | 3,366 | 3,101 | | 3,134 | 2,973 | |

Total Children Examined -

9,452 Boys

8,943 Girls

Table 4
 SUMMARY OF FINDINGS AT ROUTINE MEDICAL INSPECTIONS 1972
 (Percentages of Children Examined)

| Defects | Entrants | | Inter-mediates | | Entrants to High Schools | | Final Leavers | | All Groups | |
|-----------------------|----------|-------|----------------|-------|--------------------------|-------|---------------|-------|------------|-------|
| | Boys | Girls | Boys | Girls | Boys | Girls | Boys | Girls | Boys | Girls |
| Teeth | 9.8 | 10.0 | 10.0 | 11.2 | 4.5 | 9.3 | 3.0 | 7.0 | 7.2 | 9.6 |
| Skin | 4.2 | 3.7 | 6.4 | 6.7 | 11.4 | 8.2 | 11.4 | 4.9 | 8.0 | 5.9 |
| Eyes - | | | | | | | | | | |
| Vision | 15.4 | 16.2 | 19.5 | 21.4 | 16.9 | 22.0 | 17.5 | 24.8 | 17.3 | 20.6 |
| Squint | 2.8 | 2.7 | 2.0 | 1.5 | 0.8 | 1.5 | 0.7 | 0.8 | 1.6 | 1.7 |
| Other | 0.7 | 0.9 | 0.4 | 0.4 | 0.5 | 0.8 | 0.4 | 0.1 | 0.5 | 0.6 |
| Ears - | | | | | | | | | | |
| Hearing | 5.3 | 5.6 | 2.8 | 2.4 | 2.1 | 2.4 | 0.9 | 1.2 | 2.9 | 3.1 |
| Otitis Media ... | 3.0 | 3.0 | 1.2 | 1.6 | 0.4 | 1.3 | 0.1 | 0.4 | 1.3 | 1.7 |
| Other | 0.3 | 0.4 | 0.3 | 0.4 | 0.2 | 0.3 | 0.4 | 0.1 | 0.3 | 0.3 |
| Nose and Throat ... | 8.7 | 7.6 | 6.4 | 5.6 | 3.4 | 4.0 | 1.4 | 1.8 | 5.3 | 5.1 |
| Speech | 3.8 | 2.1 | 1.6 | 1.0 | 0.9 | 0.7 | 0.2 | 0.1 | 1.7 | 1.1 |
| Cervical Glands ... | 0.9 | 1.2 | 1.7 | 1.8 | 0.8 | 0.2 | 0.2 | 0.1 | 0.9 | 0.9 |
| Heart and Circulation | 2.0 | 1.8 | 1.3 | 1.4 | 1.2 | 1.5 | 1.7 | 1.7 | 1.5 | 1.6 |
| Lungs | 3.5 | 2.1 | 2.7 | 1.5 | 2.6 | 1.7 | 1.9 | 0.9 | 2.7 | 1.6 |
| Developmental - | | | | | | | | | | |
| Hernia | 0.8 | 0.7 | 0.5 | 0.4 | 0.2 | 0.2 | 0.4 | - | 0.5 | 0.4 |
| Other | 6.4 | 1.1 | 5.2 | 2.3 | 7.5 | 5.8 | 3.3 | 2.4 | 5.7 | 2.9 |
| Orthopaedic - | | | | | | | | | | |
| Posture | 0.6 | 0.5 | 0.7 | 0.5 | 0.5 | 0.9 | 0.3 | 1.1 | 0.5 | 0.7 |
| Flat Feet | 2.0 | 1.9 | 1.9 | 1.8 | 1.9 | 1.1 | 1.3 | 1.0 | 1.8 | 1.5 |
| Other | 2.3 | 1.7 | 2.1 | 1.8 | 1.4 | 3.4 | 1.4 | 2.4 | 1.8 | 2.3 |
| Nervous System - | | | | | | | | | | |
| Epilepsy | 0.8 | 0.4 | 0.3 | 0.3 | 0.4 | 0.1 | 0.4 | 0.3 | 0.5 | 0.3 |
| Other | 3.6 | 2.1 | 2.0 | 1.1 | 1.2 | 0.7 | 0.3 | 0.5 | 1.9 | 1.2 |
| Psychological - | | | | | | | | | | |
| Development ... | 1.5 | 1.2 | 1.0 | 0.9 | 0.4 | 0.6 | 0.1 | 0.2 | 0.8 | 0.7 |
| Stability | 2.0 | 1.6 | 2.0 | 1.3 | 1.1 | 1.4 | 0.8 | 0.8 | 1.5 | 1.3 |
| Abdomen | 1.3 | 1.2 | 0.5 | 1.0 | 0.4 | 0.8 | 0.2 | 0.4 | 0.7 | 0.9 |
| Other Defects ... | 1.2 | 1.2 | 1.2 | 2.0 | 1.5 | 2.6 | 0.3 | 2.7 | 1.1 | 2.1 |

This does not support the findings in a survey carried out in Tees-side in the Autumn Term 1970. There, a stratified sample of children in infant and junior schools and children in two senior schools were examined. One in seven of the primary school children was found to be infested to some degree, and one in four of the secondary school children.

The need for constant vigilance by parents and older children cannot be too strongly urged to avoid the spread of this essentially curable condition.

The number of children treated at the Cleansing Centre for Scabies showed another welcome reduction and it may be that the large increase of cases in recent years has reached its peak or is on the wane.

Six school children were treated for head vermin at the Cleansing Centre and 16 school children were treated for scabies.

Table 5. Cleanliness Inspections

| | |
|---|--------|
| No. of pupils inspected for cleanliness | 53,910 |
| No. of pupils inspected at follow-up visits | 4,873 |
| No. found unclean for first time in 1972 | 459 |
| No. of occasions in which pupils were found unclean at follow-up visits | 300 |

Skin Defects

There has been little decrease in the number (1,398) of children treated at Minor Ailment Clinics for verrucae and the average number of attendances per child has remained constant at seven. A trial of a different form of treatment gave no better results than those being currently used. Verrucae remain so prevalent that children with the condition should not be allowed to use public swimming baths where the wet surface encourages the survival of the wart virus and the concrete surrounds provide the minor damage to the skin of the soles allowing the virus to enter.

Table 6. Summary of Findings at Routine Inspections of Vision

| | Boys | | | Girls | | |
|--------------------------|------------------------|--------------------------|----------|------------------------|--------------------------|----------|
| | <i>Number Examined</i> | <i>Number of defects</i> | <i>%</i> | <i>Number Examined</i> | <i>Number of defects</i> | <i>%</i> |
| Entrants group | 2,604 | 397 | 15.2 | 2,567 | 416 | 16.2 |
| 8 year old group | 2,612 | 510 | 19.6 | 2,413 | 514 | 21.3 |
| Entrants to High Schools | 2,334 | 395 | 17.0 | 2,357 | 519 | 22.0 |
| 13 year old group | 2,499 | 541 | 21.6 | 2,303 | 508 | 22.1 |
| Final leavers group | 1,902 | 333 | 17.5 | 1,606 | 401 | 25.0 |
| Totals (All Ages) | 11,951 | 2,176 | 18.2 | 11,246 | 2,358 | 21.0 |

The percentage of children discovered with visual defects remains fairly constant. There are slight variations over the years but about 30% of total defects found at routine school medical examinations are of vision. Most parents take their children along for further investigation and treatment when a visual defect is suspected at a screening examination, but a few ignore appointments offered at Eye Clinics or do not attend opticians after receiving a form entitling them to an examination. A lot of unnecessary work is caused to the administrative staff of the Department in sending out reminders and in some cases, unfortunately, it is necessary for a Nurse to be diverted from other work to chase up the recalcitrant. In the meantime, of course, the child may be having difficulty in seeing what is written on the blackboard.

Defects of Ear, Nose and Throat

Otitis Media (disease of the middle ear), deafness and other defects of the ears were found in approximately the same percentage of children as in previous years.

Defects of Heart and Circulation

There have been no significant changes in the year under review.

Defects of the Lungs

Almost exactly the same number of lung defects (149) were discovered to need treatment as last year (150). The great majority of these cases consist of mild bronchitis.

The Tuberculosis figures remain remarkably constant.

Pulmonary - 3

Non-Pulmonary - 2

The incidence rate among the school population works out at 5.0 per 100,000. There was one case less of pulmonary tuberculosis than in 1971 and one more case of non-pulmonary tuberculosis.

Developmental, Abdominal and Orthopaedic Defects

There is no marked change in numbers in this group from previous years.

Defects of the Nervous System

The number of children found to have epilepsy was up slightly as compared to 1971, but the total numbers are so small (23) that the variation is not significant. As mentioned later in the report, none of these children was found to be in need of special education and all are still attending ordinary schools. Two hundred and fifteen children were referred for intelligence assessment in 1972 and there was no waiting list at the end of the year.

Psychological Defects

The number of referrals to the Child Guidance Clinic of children with behaviour difficulties of some kind continues to increase. As will be seen from the account of the Clinic's work in Part II of the Report, the waiting list at the end of the year has unfortunately lengthened again.

Nutrition

Average heights and weights of all age groups of school children measured have reached a plateau over the last few years after rising steadily since the end of the last war.

Table 7.

Average Heights and Weights in 1972 and Previous Years

| Ages | Number Examined in 1972 | Average Height in Inches | | | | | Average Weight in lbs. | | | | |
|----------|-------------------------|--------------------------|-------|-------|------|------|------------------------|--------|--------|-------|-------|
| | | 1972 | 1971 | 1970 | 1969 | 1939 | 1972 | 1971 | 1970 | 1969 | 1939 |
| BOYS | | | | | | | | | | | |
| 5 years | 1,054 | 43.3 | 43.5 | 43.4 | 43.2 | 41.8 | 43.2 | 43.4 | 43.1 | 42.9 | 41.5 |
| 6 years | 845 | 44.0 | 44.6 | 43.9 | 43.9 | 43.8 | 44.8 | 44.9 | 44.4 | 44.0 | 43.4 |
| 14 years | 196 | 64.3 | 64.1 | 64.2 | 64.0 | 59.0 | 113.5 | 113.5 | 116.9 | 112.5 | 90.8 |
| 15 years | 450 | 66.1 | 65.9 | 67.0 | 66.3 | - | 122.2 | 122.7 | 123.7 | 125.9 | - |
| 16 years | 180 | 67.0 | 66.7 | 67.5 | 67.7 | - | 129.7 | 129.3 | 133.4 | 133.6 | - |
| 17 years | 19 | 68.7* | 68.6* | 69.0* | 68.8 | - | 133.4* | 149.3* | 141.4* | 134.9 | - |
| GIRLS | | | | | | | | | | | |
| 5 years | 956 | 43.2 | 43.1 | 43.2 | 43.1 | 41.2 | 42.4 | 42.2 | 42.5 | 41.9 | 39.7 |
| 6 years | 912 | 43.7 | 43.9 | 43.9 | 43.5 | 42.7 | 43.6 | 43.4 | 43.9 | 43.4 | 41.4 |
| 14 years | 197 | 62.5 | 62.6 | 62.4 | 62.3 | 60.3 | 115.4 | 114.5 | 112.5 | 114.4 | 97.9 |
| 15 years | 307 | 63.2 | 63.8 | 63.2 | 63.5 | 62.0 | 118.3 | 119.6 | 120.1 | 120.6 | 105.5 |
| 16 years | 110 | 63.8 | 64.1 | 64.1 | 64.7 | - | 121.1 | 122.3 | 121.0 | 120.7 | - |
| 17 years | 3 | 62.7* | 63.9* | 63.7* | 63.1 | - | 97.7* | 119.6* | 119.3* | 121.0 | - |

*not representative owing to very low numbers

PART II SPECIALIST SERVICES

AUDIOLOGY SERVICE

Mr. J.C. Oakley, Peripatetic Teacher of the Deaf

During 1972, 1,379 children were tested by pure tone audiometry, this included routine follow-up cases, cases referred by School Medical Officers and 688 Sweep Test Failures. Regular clinics were held at Lodge Road, Croydon, Parkway, New Addington and Whitecliffe Road, Purley. All the pre-school children requiring auditory training were seen regularly at home, where parent guidance was given and in some cases, speech training was carried out by the Speech Therapists. In addition, Speech Training Machines were loaned to all parents, for use in the home. Mrs. G.O. Moreland, peripatetic teacher of the deaf was appointed in October to help with this work. She will commence her duties in January 1973.

78 children were seen by Mr. Parsons, the Corporation's Consultant Otologist, who held regular clinics at Lodge Road and visited the Partially Hearing and Deaf Units. 12 hearing aids were recommended during the year, 2 of these were National Health Service 'Medresco' aids and the other 10, Commercial aids paid for by the Corporation. Commercial aids are considered necessary if the hearing loss is greater than the range covered by the 'Medresco' aid, or if there is a sharp perceptive loss in the higher frequencies. The 'Medresco' aid has no automatic volume control and cannot be tolerated by children with such a loss, as the hearing for the lower frequencies is often normal and a general amplification of sound causes a considerable amount of distortion and may become painful.

120 babies were seen at the special clinic held in conjunction with Dr. Morgan for the early assessment of deafness in young babies, 18 of these being referred to Mr. Parsons for further assessment. Blood tests on the failures were continued as part of a survey held in conjunction with Great Ormond Street Hospital for Sick Children, to investigate the question of rubella as a cause of deafness and as a result of this survey, we have been able to pinpoint the probable cause of deafness in two cases which might otherwise have been recorded as "no known cause". It was necessary to continue the increased number of clinics to cope with the waiting list of babies waiting to be tested.

During the year, all infant schools were visited at least once and apart from absentees and unco-operative children (501), all children newly admitted to school during the year were tested. Tests were also carried out in the Special Schools. Of the 8,564 children tested, 786 (approx. 9.1%) failed the test and were referred to the Audiology Clinic for further assessment. We were sorry to lose Mrs. Godderhan at the end of the Summer term, her place was taken by Mrs. Feakins.

For additional statistical details, see Appendix B, Page 51.

CHILD GUIDANCE CLINIC

I am grateful to Dr. G. Crosse, Consultant Psychiatrist, South West Metropolitan Regional Hospital Board, for the following report:—

A steady rise in the demand for child guidance facilities over the past two years set against the reality of static resources has continued to immobilize the waiting time for new appointments at a level of fourteen weeks. All permutations of clinic practice and method have failed to make any impression on this new wave of referrals, and nothing less than an expansion of manpower will resolve this stubborn back-log of cases. The growing concern of local organizations, consumer and administrative, at the continuing existence of a child guidance waiting list has led to administrative initiatives for an increase in the medical establishment and the matter now rests in the hands of the Regional Hospital Board. In the appeal for such reinforcements emphasis was laid on the developing social services in the borough and how this will uncover a long felt latent demand for consultative facilities at the clinic.

The hierarchy of needs which have had to be met by the clinic staff reached new heights in the year under review, and much time and thought has been spent on forward planning of the premises which will house both the School Psychological and Child Guidance Services. There have been other considerations such as those related to the advent of the Seebohm recommendations and the development of Area Health Boards.

From a purely internal domestic point of view it should be recorded that our rationalization of the borough into four geographical areas each supported by a clinic social worker as an ongoing commitment has facilitated a more effective and coherent contribution to the borough service as a whole. At a time when there is a great deal of shift and change caused by the reorganization of the social and health services it should be underlined that the aura of permanence which surrounds our team of four social workers - Miss M.S. Gradwell, Mrs. P.E. Ollerenshaw, Mrs. V.H. Jackson and Mrs. B. Bark - has enabled the clinic to cultivate a stable division and distribution of duties and to discharge its responsibilities to the other systems of care in the borough.

The Wednesday pre-school therapeutic group in which the children take part in activities on the day unit while their mothers are seen as a group by Dr. S.M. Ring and Mrs. V.H. Jackson continues to prosper, and this invaluable preventative exercise could be extended if our medical establishment were to be increased.

It is some measure of present day social pressures that the Sir Cyril Burt School, opened in September 1971 for the education of maladjusted children in the borough, is now oversubscribed, and children ascertained for special education often have to wait several months for a placement. Together with children who have been suspended from school as well as the truants and school refusals, they form a large growing uneasy collection of children who weigh heavily on all educational systems in the borough. They form a mixed bag

of problems at all points of the school age spectrum and it is almost impossible to devise for them a uniform remedy. Many receive home tuition, others attend the Chatsworth centre and the Child Guidance clinic on a part time basis. Nevertheless they present a growing challenge to the administrative services of the borough, and even a partial solution will not be achieved unless there is a close liaison between the educational and psychiatric services in this area.

The day unit continues to provide endless opportunities for experimentation and a significant development this year has been the creation of a group of disturbed adolescent girls who have been encouraged to assume roles of "helpers" to the staff. Those who have been plagued with chronic states of inadequacy have used this opening as a means of recovering their independence and initiative. Although this project barely scratches the surface of the adolescent problems in the area, it highlights the flexibility needed in the treatment of this age group.

This report would not be complete without an expression of thanks to Dr. S.L. Wright, Principal School Medical Officer, Mr. K.G. Revell, Chief Education Officer and Mr. C.H. Langley, Group Secretary to the Croydon and Warlingham Park Hospital Group Management. The administrative support of their respective departments has been greatly appreciated by the clinic staff.

| <i>Source of Referral</i> | <i>Boys</i> | <i>Girls</i> | <i>Total</i> |
|----------------------------------|-------------|--------------|--------------|
| Principal School Medical Officer | 65 | 26 | 91 |
| General Practitioners | 64 | 32 | 96 |
| Social Services Department | - | 2 | 2 |
| School Psychological Service | 29 | 14 | 43 |
| Juvenile Court | 14 | 5 | 19 |
| Hospitals | 10 | 8 | 18 |
| Other Agencies | 14 | 3 | 17 |
| Milton House Remand Home | | 89 | 89 |
| | <u>196</u> | <u>179</u> | <u>375</u> |

| <i>Action</i> | | | |
|-------------------|------------|------------|------------|
| Diagnostic | 22 | 99 | 121 |
| Current Treatment | 147 | 73 | 220 |
| Closed - Improved | 15 | 10 | 25 |
| Unco-operative | 2 | 2 | 4 |
| Transferred | 5 | - | 5 |
| No change | - | - | - |
| | <u>191</u> | <u>184</u> | <u>375</u> |

DENTAL SERVICE

Mr. B.J. West, Principal School Dental Officer

Dentistry, along with most professions, is continually evolving and its standards improving. Originally dentistry consisted of simply extracting aching teeth, usually as a fairground spectacle. Since 1921, but especially since the introduction of the National Health Service, the emphasis has been directed to saving teeth wherever possible by the use of various filling materials. Consequently the proportion of teeth filled to teeth extracted has steadily risen year by year. This has required renewed efforts by the dental educators to change the attitude on the part of the public and promote a greater sense of dental awareness.

We are now on the verge of the next logical stage in the evolution of dentistry, that of the prevention of dental disease, both dental caries and periodontal disease, and considerable effort and thought is now being devoted to find the most effective ways of achieving this. Among the proven methods of reducing the prevalence of dental caries is the adjustment of fluoride in the domestic water supply to one part per million. This, however, is being seriously hampered by social-political factors and although considered the most effective method of reducing dental caries by the vast majority of the medical and dental professions, it is unlikely to be introduced as a large scale public health measure for some time. Other methods of treating teeth with fluoride such as topical application, fluoride tooth pastes, fluoride in school milk and in tablet form, are being tried with varying degrees of success but cannot be as effective as the adjustment of fluoride in water, being dependent on personal effort on the part of the public.

Despite all the efforts being made in the field of preventive dentistry, the major cause of caries and periodontal disease is the abysmal lack of oral hygiene among the public at large and until the standard of personal oral hygiene is considerably improved, even routine conservation of teeth is largely a waste of time, effort and resources. It is essential therefore to educate the mass of the general public to keep their mouths clean before any of the other preventive measures will have any worthwhile effect.

The dental service in Croydon is playing its part in the education of parents and children in oral hygiene and general dental awareness by personal contact, dental education lectures and in-service training of school teachers, and by providing facilities for the dental scientists to further their researches.

The continuing improvement and development of the dental services in the Borough received a considerable setback this year through lack of staff. The year started well but the resignation of five dental officers in mid-summer and the inability to find suitable replacements has inevitably led to the accustomed service being modified. The start of the coming year should see an improvement in the staffing situation but the restoration of a fully staffed service will take some time.

The programme of modernisation and facilities in the various surgeries, however, continues and orders for the replacement of the more obsolete equipment were placed. It was decided to meet the need for additional surgery facilities, especially in the north of the Borough, by the introduction of an adapted caravan as a mobile surgery.

The School Dental Service

The shortage of dental staff resulted in a reduction of 120 in the total number of sessions worked this year. In order to treat as many children as possible, the reduction in treatment sessions was less than the reduction in sessions devoted to routine examinations at schools and in those devoted to Dental Health Education.

In spite of the reduced number of sessions the number of children receiving at least one course of treatment during the year rose by 372 and represents 18.8% of the total school population as opposed to 18.4% in 1971. In addition the total number of teeth filled rose slightly due to a big increase in the number of permanent teeth filled - although the number of deciduous teeth conserved was less. However, the more advanced procedures showed a reduction. The number of crowns fitted was only slightly down on 1971 but the number of teeth root filled showed a reduction of nearly one-third. It is inevitable that when there is a shortage of staff the service must devote more of its time and resources to more routine treatment at the expense of the time consuming advanced techniques.

The need for teeth to be extracted increased markedly during the year and the demand on the general anaesthetic sessions was very heavy, though it eased somewhat during December. As a consequence, the ratio of teeth extracted for every 100 filled, which has been falling since 1951, showed an increase this year as the following shows:

| | | | | | | | | |
|---------|-------|-------|------|-----------|-----|-------|-----|--------|
| In 1951 | 111.2 | teeth | were | extracted | for | every | 100 | filled |
| In 1961 | 65.5 | " | " | " | " | " | " | " |
| In 1966 | 34.5 | " | " | " | " | " | " | " |
| In 1970 | 23.0 | " | " | " | " | " | " | " |
| In 1971 | 21.6 | " | " | " | " | " | " | " |
| In 1972 | 27.4 | " | " | " | " | " | " | " |

Altogether 6,789 teeth were extracted, but this includes many that were extracted to help straighten remaining teeth and also 318 teeth that were extracted at the request of General Practitioners. The number of general anaesthetics administered showed a large increase from 1,488 in 1971 to 1,789 this year. Again 145 of these administrations were for patients referred by General Practitioners.

One service which did not suffer as a result of the reduction in staff was that for patients who cannot be treated by conventional means, mainly the mentally and emotionally handicapped. One session every four weeks was set aside to conserve the teeth of these patients under general anaesthesia. Croydon's dental service is one of the very few providing this type of treatment.

Although there were 29 fewer sessions devoted to school inspections 99 school departments were inspected during the year (71.6% of the total) resulting in 32,260 children (57.9%) being examined at school. In addition a further 7,011 were inspected in the surgery, bringing the total percentage of the school population examined during the year to 70.5%. This was a reduction of 5% on the total number examined the previous year but compares well when it is remembered that there was a reduction of almost 50% in the dental staff for a large part of the year.

Of those examined 59% required some form of dental treatment. The corresponding figure last year was 54.7%; in 1970 48.9% and in 1969 45.6%. It is therefore evident that the need for dental treatment is steadily increasing, and renewed efforts must be made not only to bring the number of dental officers up to the full establishment, but to further increase the establishment in order to cope with the increased need and demand.

There has been a considerable advance in the work done by the Orthodontist, with an increase of 45 in the number of new cases and 28 in cases completed.

The number of failed appointments again fell slightly this year and represented a figure of 21.1% of all appointments made. The corresponding figures for previous years were 22.7% in 1971, 24.4% in 1970 and 24.2% in 1969. It would appear that the position is slowly improving but nevertheless presents an alarming state of affairs.

Dental Health Education

The number of sessions devoted to Dental Health Education was drastically reduced this year in spite of the obvious need for an expansion in this field. However, the student Hygienists from the Royal Dental Hospital have continued their visits to infant and junior classes to instruct the children both in the care of their teeth and the dangers of incorrect diet. In addition, we are working closely with Miss Elliott and her staff in the Health Education Department both to encourage teachers to promote dental knowledge especially through teaching projects, and to give dental health talks in ante-natal clinics and parent/teacher associations. It was proposed that a poster campaign in schools and ante-natal clinics should be mounted, but this would be costly and not have very much effect in the absence of adequate instruction.

Dental statistics will be found on Page 52.

ENURESIS CLINICS

I am grateful to Dr. Margaret White for the following report:—

The numbers attending the local authority enuresis clinics continued to rise during 1972 when 278 children were seen at the clinics at Lodge Road, Purley and New Addington. There were 176 boys and 102 girls, and their ages ranged from four to fifteen. Towards the end of the year the buzzers were breaking down at a higher rate than usual. After consultation with the manufacturers a more reliable electric mechanism is to be tried out. Four children who were incontinent by day as well as night were referred to the Urologist. It was not considered necessary to refer any child to the Child Guidance Clinic.

Towards the end of 1972 the waiting list for the Purley Clinic became very long and to overcome this problem a fortnightly clinic has been started there.

| | | | | | | | | | | | | |
|-----------------------------------|-----|-------------|--------------|----|----|----|----|----|----|----|----|----|
| Total Attendance | 278 | (Boys - 176 | Girls - 102) | | | | | | | | | |
| Still Attending | 106 | | | | | | | | | | | |
| Discharged Dry | 95 | | | | | | | | | | | |
| Discharged for Non-Attendance | 55 | | | | | | | | | | | |
| Left District | 2 | | | | | | | | | | | |
| Lodge Road Clinic | 154 | | | | | | | | | | | |
| New Addington | 81 | | | | | | | | | | | |
| Purley | 43 | | | | | | | | | | | |
| Referred to Urologist | 4 | | | | | | | | | | | |
| Referred to Child Guidance Clinic | - | | | | | | | | | | | |
| Used Buzzer | 126 | | | | | | | | | | | |
| Age | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| No. | 2 | 12 | 52 | 64 | 47 | 30 | 34 | 13 | 9 | 10 | 4 | 1 |

SCHOOL EYE CLINICS

I am grateful to Dr. Derek Clarke for the following report:—

School Eye Clinics are held regularly at Purley, Sanderstead and New Addington as part of the School Health Service. Referrals are seen from routine medical inspections of school children, and also from other examinations by Local Authority Staff (e.g. toddlers' clinics) and directly from General Practitioners. The cases include defective visual acuity and other instances where an ocular abnormality is suspected. The age range of children seen is from infancy to school leaving age.

Referrals are also accepted from the Hospital Eye Service and vice versa.

The facilities offered are complementary to the General Optical Services and the Hospital Eye Service, and are concentrated especially on the require-

ments of school children, particularly in the follow-up system and the liaison with other parts of the School Health Service.

Statistics are to be found on Page 53.

HEALTH EDUCATION IN SCHOOLS

Miss D.S. Elliott, S.R.N., H.V.Cert., D.H.E.
Principal Health Education Officer.

"More years of schooling, the steady increase of urbanisation, the continuing shifts of population and the rapid changes in the types of employment available are but a few of the developments that may not only provide adolescents with new and broadening opportunities, but also contribute to their vulnerability". (WHO (1965). Expert committee on health problems of adolescence).

Each year teachers show a greater interest in health education and have a greater appreciation of its relevance to pupils. With encouragement and support they are taking a more active part in courses in schools and are using the Health Education Advisory and Resource Centre well.

The Education Department is now advised by the Principal Health Education Officer on the purchase of suitable health education aids for loan to schools. The aids are kept in the Health Education Centre in Taberner House so that Health Education Officers may discuss with teachers the content of the aids chosen and the relevance for their groups.

Other help for teachers included:-

- (1) An in-service training course for secondary school teachers of 12 weekly sessions conducted by health education staff and local hospital consultants, whose help is always very much appreciated.
- (2) An in-service training course for primary school teachers of 8 weekly sessions conducted by health education staff and a senior medical officer in the Health Department whose sympathetic and humorous approach clarified detail and showed how health education could be an enjoyable topic.
- (3) Courses conducted in schools with the appropriate teacher present.
- (4) Occasional sessions in schools given by health education staff supplemented work already being carried out by teachers.
- (5) A periodical "Health Education News" issued to all professional workers in the field which included up-to-date information about courses, teaching aids and health education trends.

Other New Developments

Secondary Schools

1. A special course "You And Your Body" was devised for the 11-14 high schools which as the result of reorganisation of schools, had no specific

health education guide for this age group. It is a simple applied physiology course which aims:—

- (a) To give pupils a better understanding of the growth, development and function of their own bodies.
- (b) To inculcate a sense of responsibility with regard to their future health.
- (c) To encourage an awareness of environmental influences on the health of the individual and the community.

The course is divided into 10 units and includes suggestions for visual aids and themes for activities and further discussion which can be taken up in other subject areas.

2. A course "The Child and his World - study of children from 0 to 5 years" for pupils of 14+ years, of particular interest to Home Economics and Social Studies teachers, was also devised and is being tested in Monks Hill, John Ruskin and Lanfranc Schools. It is designed:—

- (a) To give pupils a greater understanding of the physical development and care of young children.
- (b) To enlarge their understanding of the part played by heredity and environment.
- (c) To emphasise the importance of family life in the rearing of children. For convenience this course is also divided into 10 units, containing suggestions for visual aids and themes for further discussion.. Pupils are encouraged to observe normal growth and development by studying one or two children in depth and completing a child development chart throughout the course.

3. The existing community health syllabus for pupils of 14+ years was also revised and re-printed.

For various reasons there is often lack of carry-over of what is learned in school to the home and community. With this in mind and the current emphasis which is being placed on parent education, other new components were included in the health education programmes in some schools:—

- (a) Parents were invited to evening exhibition/demonstrations of materials used during health education courses in schools. These were arranged by Health Education Officers with the co-operation of the teachers and health visitors concerned. They were very well attended, the material aroused great interest and the effort was felt to be very well worthwhile.
- (b) There will always be difficulty in reaching those parents who perhaps need the most help and understanding. However others, not necessarily those with social difficulties, are also often glad to be reassured about their children's development. The Principal Health Education Officer spoke at meetings held in schools on "The Growth and Development of the Primary School Child" and "The Growth and Development of Adolescents" and hopes to encourage more of these meetings in the future.

Junior Schools

Health Visitors in Applegarth and Oval Junior Schools are developing good health education courses and teachers in Fairchildes and Beaumont Schools also carried out some very imaginative health education work. Health Visitors and health education staff at Oval and Beaumont Schools also demonstrated the material used and created by the children to parents.

B.B.C. Radio - Vision programmes "Life Cycle" for 11 - 13 year old pupils.

The Principal Health Education Officer acted as consultant to the above 8 programmes and teachers and pupils from Norbury Manor Boys, Norbury Manor Girls, Ecclesbourne, Taunton Manor and Davidson Schools gave good advice and took part in the pre-testing of the programmes, which were broadcast during the Summer term.

Health education in Croydon schools is making steady progress and has a bright future. The Health Education team is greatly indebted to the Education Department, the Inspectorate and to Dr. S.L. Wright for their continual advice, support and encouragement without which no progress would be possible.

INTELLIGENCE ASSESSMENTS

Children who are not making progress at school are referred for Tests of intelligence to a doctor with special training in the School Health Service or to the School Psychological Service. All children recommended for special school because of learning difficulty and other children where medical factors may be playing a part receive a medical examination. A test of intelligence may also be carried out during the investigation of a large number of other medical problems.

215 children were examined by School Health Service Doctors and had intelligence tests during 1972. The classifications arrived at and recommendations made were as follows:—

- | | |
|--|----|
| (1) Found to be educationally subnormal: | |
| (a) Recommended for St. Christopher's or St. Nicholas Day School for E.S.N. pupils | 80 |
| (b) Recommended for Coldharbour School for E.S.N. pupils | 24 |
| (c) Recommended for Residential School for E.S.N. pupils | 1 |
| (2) Other recommendations: | |
| (a) Referred back to ordinary school | 64 |
| (b) Referred for further investigation by the School Psychological Service | 1 |
| (c) Recommended for Day Special Schools for other handicaps | 13 |
| (d) Referred for Speech Therapy | 8 |

| | |
|-------------------------------------|----|
| (e) Referred for Medical Treatment | 9 |
| (f) Referred for further assessment | 15 |

It was reported last year that the waiting list for assessment had been reduced markedly from the previous year. At the end of the year under review there was no longer any waiting time beyond the few days administratively necessary to arrange appointments. This satisfactory state of affairs is due to several factors. There was a drop in the number of children brought forward by Head Teachers, the Educational Psychologist arrange psychometric testing in many instances. Also two Medical Officers completed the Course on ascertainment of mentally handicapped children while other Medical Officers trained in the technique became available for sessional work.

The numbers of children in special schools who received intelligence assessments to ensure that they were properly placed or for the purpose of advising the Chief Education Officer about their educational needs showed an increase from 55 in 1971 to 63 in the year under review, made up as follows:—

| | |
|--------------------------|----|
| St. Christopher's School | 19 |
| St. Nicholas School | 18 |
| Coldharbour School | 14 |
| St. Giles' School | 9 |
| St. Luke's School | 3 |

PHYSIOTHERAPY SERVICE

Miss J. McBride, M.C.S.P., A.P.T.A., (Superintendent Physiotherapist)

In August 1972 an experimental project for providing physiotherapy treatment for selected children was carried out during the school holidays. This proved to be highly satisfactory and it is hoped that this year the scheme will be repeated and run in conjunction with a play group organised by the Education Department and the Parent/Teachers' Association. The selected children were those who were likely to regress without treatment, and those who were so lonely and unstimulated at home that extra physical activities would prove to be beneficial. In planning the programme with Staff and Parents it transpired that there was a dire need for a recreational facility, so four children were accepted into the Cheyne Holiday Club in London. This provided opportunity for play in the Adventure Playground, outings to the sea and indoor games geared to the physically disabled. Fifteen children received specific physiotherapy and were brought to the School two or three times a week. These numbers are small compared to a normal working day because there was nobody available to occupy them when they were not receiving treatment. Hence this year it is essential to expand the scheme for more patients and have the treatment programme running concurrently with a play group.

I am grateful for the opportunity to participate in the Case Conferences in which many professions are now represented. There is the School Medical

Officer, the Head Master, a Teacher, a Nurse, a Physiotherapist, a Speech Therapist, an Occupational Therapist, a Teacher of the Deaf, a Health Visitor, a Nursery Teacher, a Nursery Nurse, sometimes a Social Worker from Queen Mary's Hospital - all of whom may be called upon to plan an integrated programme for the child. None has more priority than the other in discussion, their united aim is to do their joint best for each patient. What is offered by multi-disciplinary medical care such as this is undoubtedly a wide service - a service to the grossly disabled young rooted in compassion.

Physiotherapy statistics will be found in Appendix B, Page 54.

SPEECH THERAPY SERVICE

Mr. J.R. Brook, Principal Speech Therapist

The work of the Speech Therapy Section has been hampered during 1972 by staff shortages. The Section was approximately 65% fully staffed over the year. At the end of the year there were four full-time Therapists in post out of an establishment of nine. This means that after some years of plenty Croydon's Speech Therapy staff is reduced to a level comparable to most other Authorities. In October 1972 the report of a Committee of Enquiry into Speech Therapy (Quirk Report H.M.S.O.) was published and proposed a four-fold increase in the number of Therapists to meet the demand in the country. Other recommendations in the report included the profession being independently organised under the coming Area Health Authorities and a degree course to replace the present diploma course. These and many other points are being considered by interested parties. The report drew attention to the severe shortage of Speech Therapists, and figures quoted show that new entrants into the profession hardly replace wastage. The Borough has mounted an increased advertising effort to try to attract staff, especially married Therapists, by offering attractive part-time or sessional conditions for the first time.

During the year Miss Pat Blaine, an American Therapist and Mrs. S. Wasmer, an Australian, joined the staff. Miss Blaine left after only four months to be married and Mrs. Robertson and Miss P. Grasso also left. Mrs. Robertson had been with us some time and was the Senior Therapist responsible for special schools. Miss Grasso had been in charge of Speech Therapy at the West Thornton Speech Unit, and she has been replaced there by Mrs. Siddons who was already a member of staff.

The gradual decline in the numbers of Therapists available has inevitably led to a reduction of the service to the special schools and in ordinary clinics at a time when the demand for speech therapy, as shown by requests especially from schools, continues to increase. It seems likely that the services of the Speech Therapist will be required even more as the Borough's school population increases, as does environmental pressure and the survival of handicapped children.

The school visiting programme has so far been maintained together with talks to various groups. The number of students from London Training Schools has had to be slightly reduced. It is obviously important to maintain as many students as possible to help combat the shortage of speech therapists, but also as a pool of potential applicants.

1972 has seen the end of a period of remarkably high staffing compared to other Authorities. The start of the decline can be seen in 1971 and it must be admitted that a return to full staffing as occurred in 1969 cannot be predicted in the foreseeable future.

Statistics are in Appendix B, Page 54.

WEIGHT CONTROL CLINICS

Dr. W. Simmonds, Senior Departmental Medical Officer

It is proposed to extend the weight-control clinics to cover all school-children in Croydon and head teachers have been asked to submit a list of those who might be helped by attending such sessions.

Meanwhile the boys' groups continued in the schools and clinics in which they were already established, with a reasonable degree of success among the "regulars" and of interest from new entrants and their parents.

The girls' groups were conducted by Miss Hunt and Mrs. Gartside until July, and are now waiting to be integrated into the new system, which will provide cover in areas which had so far not been served by a special clinic.

OTHER SERVICES

Transport of Children to Ordinary Schools

In the event of an accident or illness resulting in temporary disability, the school medical officer is asked to decide whether special transport should be provided to enable the child to attend school. Before making any recommendation careful enquiries must be made to ensure not only that the transport is justified but that the child will be able to work satisfactorily when he eventually reaches the school. A child in a leg plaster may have great difficulty in negotiating several flights of stairs in order to attend various classes during the course of the day. School medical officers recommended that special transport should be provided for 47 such children during the year.

Convalescent Treatment

17 children received a convalescent holiday on the recommendation of the school medical officer. These arrangements are not intended to provide annual holidays for children whose parents are unable to provide them; they are an essential part of the recuperative treatment provided for a child

who has been found to be in poor general health or a child suffering from a particular disability. Details of the diagnosis and periods of stay are shown in the accompanying table.

| <i>Diagnosis</i> | <i>No. of Children</i> | <i>Period of Stay</i> |
|------------------------|------------------------|--|
| General Debility | 1 | 2 weeks |
| E.S.N. | 1 | 2 weeks |
| Physically Handicapped | 3 | { 2 - 2 weeks 1 - 1 week |
| Social Deprivation | 3 | 2 weeks |
| Diabetic | 3 | 2 weeks |
| Epileptic | 4 | { 1 - 2 weeks 2 - 1 week 1 - 10 days |
| Asthma | 1 | 2 weeks |
| Head Injury | 1 | 2 weeks |
| <i>Total</i> | <u>17</u> | |

Juvenile Employment Return

The following numbers of children were examined by the medical officers during 1972 as to their fitness to undertake the part-time employment indicated:—

| | 1972 | 1971 |
|-----------------------------------|------------|------------|
| Delivery of Goods for Shopkeepers | 4 | 3 |
| Delivery of Newspapers | 121 | 152 |
| Delivery of Milk | 3 | 3 |
| Shop Assistants | 71 | 57 |
| Others | 26 | 20 |
| <i>Total</i> | <u>225</u> | <u>235</u> |

Provision of Milk and Meals

Free milk is supplied only to pupils in Special Schools, to pupils in Maintained Schools to the end of the Summer term after attaining the age of 7, and to other Maintained pupils in the 7 - 11 age group recommended by the Medical Officer of Health. Approximately 13,115 pupils received one third of a pint each day.

All milk supplied is pasteurised and the sources of supply are subject to the approval and constant supervision of the Medical Officer of Health.

The number of meals supplied to children daily during 1972 was approximately 30,500.

Cost of Milk and Meals

Milk and Meals cost £1,308,363. Income from payment for meals was £526,958, making a net cost of £781,405.

Causes of Death in School Children 1972 (Uncorrected)

| | |
|---|-------|
| Accidental | 5 |
| Cancer (Leukaemia) | 2 |
| Cancer (Other) | 2 |
| Congenital | |
| (a) Hydrocephalus secondary to birth trauma | 1 |
| (b) Meckels diverticulum | 1 |
| (c) Heart disease | 1 |
| Muscular dystrophy | 1 |
| Osteomyelitis | 1 |
| | <hr/> |
| | 14 |

* * * * *

PART III HANDICAPPED PUPILS

The number of handicapped pupils ascertained as needing special education continues to grow. It has risen from 681 in 1966 to 1,167 in the year under review, an increase of 86%. During that period the school population has increased by only 23%. The largest increases are in the E.S.N. group, almost doubled, from 298 to 567, after making allowance for the children at Coldharbour School who were formerly outside the provision of the Education Department and the maladjusted group, increased three and a half times from 48 to 170.

On the other hand the number of physically handicapped children has only increased by one-third, while those categorised as delicate have dropped from 83 to 18. Blind and partially sighted numbers remain substantially the same, while the deaf and partially hearing group has increased from 42 to 72, reflecting, it is believed, an epidemic of rubella in 1962/63.

The growing number of school children with physical defects is relatively easy to explain. The advances in medical treatment both by drugs and surgery are responsible for the survival of more children born with handicaps. The group of spina bifida children is a good example. The fall in the numbers of delicate children may reflect to some extent a healthier population but probably is explained to a much greater extent by a change in philosophy. It is now considered that most of the children in this group should remain at ordinary school, or if they do spend a period at a special school, they return to ordinary school as soon as they appear reasonably fit to do so.

There remain the two large groups mainly accounting for the increase - the E.S.N. and the maladjusted. It may be noted that these two groups of children have not the same easy characteristics of diagnosis as those with physical handicaps. It is very doubtful if there has been a change among the child population sufficient to explain these increases. Probably many factors are contributing. More attention is being paid to the child with educational difficulties by school doctors and teachers, whether they are bound up with behaviour problems or appear simply to be educational retardation. Increases in the staffing of the Child Guidance and the Educational Psychology Service have allowed more children to be seen.

Whatever the factors involved, the increase in the numbers of these two groups of children shows no signs of abating, and this will have increasing repercussions on the School Health and Educational Welfare Sections dealing with the administrative side of the placement of the children in special schools. The School Health Section is already under severe pressure. The need for more places for the children in Day or Residential Schools will also become increasingly a matter for concern. There is now a waiting list at the two day schools for moderately educationally retarded children and the day school for maladjusted children.

TABLE 10
Children requiring Special Education, 1972

| CATEGORY | New Cases Ascertained by Committee | * New Admissions | Number of Children receiving Special Educational Treatment 31.12.72 | | | | | | No. of children awaiting placement on 1.1.73 | |
|--------------------------|------------------------------------|------------------|---|-------------|-----------|-----------|--------------|--------------|--|-------------|
| | | | Special Schools | | Hospitals | Day Units | Home Tuition | Total | Day | Residential |
| | | | Day | Residential | | | | | | |
| BLIND | - | - | - | 9 | - | - | - | 9 | - | - |
| PARTIALLY SIGHTED | 2 | 2 | 21 | 2 | - | - | - | 23 | - | - |
| DEAF | 3 | 7 | 9 | 20 | - | 12 | 1 | 42 | - | 1 |
| PARTIALLY HEARING | 5 | 6 | 2 | 9 | - | 20 | - | 31 | - | - |
| EDUCATIONALLY SUB-NORMAL | 101 | 124 | 528 | 29 | 36 | - | 2 | 595 | 69 | 3 |
| EPILEPTIC | - | - | 1 | - | 8 | - | - | 8 | - | - |
| MALADJUSTED | 59 | 50 | 30 | 105 | - | 1 | 3 | 139 | - | 34 |
| PHYSICALLY HANDICAPPED | 32 | 35 | 147 | 15 | - | - | - | 162 | - | 1 |
| SPEECH | 5 | 5 | - | 2 | - | 9 | - | 11 | - | - |
| DELICATE | 7 | 6 | 7 | 9 | - | - | - | 16 | - | 2 |
| TOTAL | 214 | 235 | 745 | 200 | 44 | 42 | 6 | 1,036 | 69 | 41 |

*Including cases ascertained in previous years.

TABLE 11
PRE-SCHOOL HANDICAPPED CHILDREN

| Category | Age on the 31st December, 1972 | | | |
|------------------------|--------------------------------|-----------|-----------|-----------|
| | 5 years | 4 years | 3 years | 2 years |
| Vision Defect | 1 | 2 | 2 | 3 |
| Hearing Defect | - | - | 1 | 2 |
| Speech Defect | - | 7 | 9 | - |
| Mental Disorder | 3 | 25 | 24 | 9 |
| Epileptic | - | - | - | - |
| Physically Handicapped | 1 | 33 | 41 | 10 |
| Total | 5 | 67 | 77 | 24 |

The numbers of pre-school handicapped children do not generally reflect the increase in the preceding two groups. The moderately retarded child is not usually detected before starting school and while maladjustment for whatever reason may show before school age, there will generally be no formal ascertainment of these children until they have begun at school and shown whether or not they can adapt to the school situation.

I am grateful to the Chief Education Officer for providing school reports by the Head Teachers of each of the Borough's Day Special Schools. They will be found under the appropriate heading.

BLIND AND PARTIALLY SIGHTED PUPILS

| | <i>Blind</i> | <i>Partially Sighted</i> |
|------------------------|--------------|--------------------------|
| In Residential Schools | 9 | 2 |
| In Day Schools | - | 21 |

Blind

No blind child was newly ascertained in 1972.

Partially Sighted

Two children were ascertained in this category during the year under review, both being admitted to St. Luke's School.

St. Luke's Special School for Partially Sighted Children

Steady progress was maintained throughout the year and the children had greater opportunities of widening their interests. Early in the year a colour television set was installed; this has increased the children's general knowledge and stimulated their speech and creative writing.

Additional brightly coloured apparatus for Physical Education has encouraged greater activity and developed confidence in movement which is often lacking in visually handicapped children who tend to rely on others to see for them.

Various educational visits were made during the year including visits to the Commonwealth Institute, the Horniman Museum and a trip on the River Thames to Greenwich followed by a tour of the Cutty Sark and Gypsy Moth IV. A group of children who attended Winterbourne Language Centre were taken to Dieppe. This was a most valuable experience for the children and the success of the visit was due to the efforts of the teacher, Madame Barber, and her husband.

There were opportunities for parents to meet and to hear some very interesting speakers. I am grateful to Dr. Clarke, ophthalmologist, Mrs. J. Kell, Special Schools Adviser to the County of Buckinghamshire, and to Mr. J. Pope, Headmaster of an I.L.E.A. School for the Partially Sighted for giving their time to talk to the parents.

We were very pleased to have Miss M. Sharp, Health Education Officer, to guide the junior children through the television sex education programmes during the Summer Term. The subject was most skillfully handled and the children gained much from her talks. At an evening meeting in the Autumn Term Miss Sharp explained to the parents how she had approached this subject.

On the sports side good progress continued with swimming. We were very pleased to be invited to take part in the I.L.E.A's Partially Sighted Schools' Sports on Tooting Bec Common.

During the Summer Term contact with the Lanfranc High School was made with two pupils coming one half-day a week to help the children here. This arrangement continued with other pupils during the Autumn Term. A second boy began attending Winterbourne Junior Boys' School on a part-time basis. Both boys are coping well in the normal school situation. The headmaster's help and interest is much appreciated and we are also grateful to him for inviting all the children to join his school when the opportunity arises.

We very much regretted saying farewell to Mrs. L. Rebronja from Australia at the end of the Summer Term. During the short time that she had been with us she had brought many new interests to the children. In September we were very pleased to welcome Mrs. H. Harrison who has had valuable experience in one of the London Schools for the partially sighted.

Eye and routine medical examinations were carried out as usual. I wish to thank Dr. T. Wield and the ophthalmologists from the Mayday Eye Unit for their interest and help.

The year ended with the usual Christmas festivities and once again we wish to express our appreciation for the wonderful selection of presents kindly given by the staff of Telephone House and to the Education Committee for providing a grant for the Christmas Party and gifts for the children.

DEAF AND PARTIALLY HEARING PUPILS

| | <i>Deaf</i> | <i>Partially Hearing</i> |
|------------------------|-------------|--------------------------|
| In Residential Schools | 20 | 9 |
| In Day Schools | 9 | 2 |
| In Day Units | 12 | 20 |
| Awaiting Placement | 1 | - |

During the year three children were ascertained as deaf, while five children were ascertained as partially hearing. All these children were admitted to Day Units and one deaf child is awaiting a residential place.

Nursery and Infant Deaf and Partially Hearing Units, Kingsley Infants' School

At the beginning of the year, there were 19 children attending the two units. Although their hearing losses fell into 3 groups (severely partial 70 - 85 db, severely deaf 85 - 100 db and profoundly deaf 100 + db) the children were divided into 2 classes: (1) The Partially Hearing Unit and (2) The Deaf Unit. The staffing in these units was comprised of 2 qualified teachers of the deaf each with a qualified assistant.

During the year changes occurred. Two infant children were transferred to the Junior Units. A multiple handicapped child was sent to the spastic's centre and another was fully integrated into the top class of the infants' school. Three children moved from the Croydon area; one child was recommended and admitted to Margate, and a severely deaf child was accepted into Ovingdean, the Partially Hearing School.

One of the qualified teachers left at the end of the year, which was a great loss, not only for the children, but the units as a whole.

Throughout the year the children have gone out once a week for shopping and the local shopkeepers have been most friendly and co-operative. It is hoped that other outings and visits can be made in the future. The children's progress in these units has been satisfactory, and the work done here has been appreciated by the parents who are most co-operative. Audiometry is done within the unit as necessary. Hearing losses range from 70 db to over 100 db and can be called severe partial to profoundly deaf. However, by a combination of stimulating teaching and the best possible use and maintenance of all available auditory equipment most of the children demonstrate wonderfully improved discrimination of speech sounds by hearing alone.

School staff carefully maintain the children's hearing aids with the generous help of the Public Health Department and St. Helier's Hospital who give every possible support. We also make regular checks upon our main equipment and call upon maintenance services when necessary. We make every effort to see that our older equipment is effective or improved. Recently our Amplivox trainers have had new headphones and it is now known the Technical Department of the R.N.I.D. endorse our views.

New Linco and Speechmaster trainers have been in use this year while the staff have worked upon the design of a simple home trainer now approved as safe by the R.N.I.D. Ten trainers have or will be made to the basic design, and it is hoped five will be used by the Kingsley Unit.

The new Health Service aid type 0166 has been withdrawn as a failure. A member of the Staff has been invited by the Minister of State concerned to contribute his views and practical proposals for a new review of hearing aid provision. It is thus hoped Croydon can help, a little, deaf people everywhere.

Junior Deaf and Partially Hearing Units, Kingsley Junior School

There are 6 children in the Deaf Unit, accommodated in a specially built classroom with Peters equipment installed in individual specially designed desks and fully furnished for all Junior school activities.

An additional teacher has been appointed for some part of the time to this class. Arrangements have been made for a regular weekly visit by this class to a learner bath for swimming instruction.

In the Partially Hearing Unit there are 9 children who are continuing to progress with an interesting, varied and lively curriculum using Connevens group aid and Amplivox speech trainers as well as all the usual school facilities.

There is an individual timetable for each child giving considerable integration with many classes in the school for a variety of activities. The class also has a part-time teacher attending two mornings a week. A student, a qualified teacher, from the Diploma course at the London University is on a teaching practice in the Unit. Visits to places of interest continue to be an important part of the curriculum of the Units; on these occasions the children often go together with children from the main School. Some of the children are joining the school group visiting Belgium and Holland during the Whitsun holiday 1973.

All the children join in with morning assembly, playtimes and at school dinners. Together, they occasionally lead worship at assembly with their teachers. Group and individual work is carried out, children working at their own level because of their widely differing abilities, needs and attainments.

Senior Partially Hearing Unit, Riddlesdown High School

There are five pupils in the unit as follows:—

| | |
|----------|---|
| 5th Year | 1 |
| 4th Year | 2 |
| 3rd Year | 1 |
| 1st Year | 1 |

These pupils are very well integrated throughout the school, viz:

| | |
|---------------|-----------------|
| 5th year boy | 37/40 periods) |
| 4th year girl | 37/40 periods) |
| 4th year girl | 36/40 periods) |
| 3rd year girl | 32/40 periods) |
| 1st year boy | 17/40 periods) |

At the beginning of the 4th year, pupils begin their "option" courses which, where appropriate, lead to C.S.E. Examinations in the 5th year. The 5th year boy recently sat for 5 "mock" exams and it is hoped he will be entered for the C.S.E. exams in June (English, Accounts, History, Geography,

Social Studies). This boy has matured very much and has taken a Saturday job. He is very keen to become an apprentice as a racing car mechanic.

One 4th year girl is doing quite well with Commercial Subjects: typing, accounts etc. The other 4th year girl decided on a non-examination course which includes a great deal of social and liberal studies.

The 3rd year girl manages very well and has made good progress in most subjects and certainly seems to be happy here.

The 1st year boy arrived half way through the Autumn term from the Junior P.H. Unit although he was only 11 years and a few days old. He integrates with 1st years for two afternoons a week and with 2nd years for Drama, P.E. and Art. He is the only 1st year child at the main school and has settled in remarkably quickly and well. He travels quite happily by bus to and from Addiscombe. In January he sat for the entrance examination for the Mary Hare Grammar School for the Deaf. Results have not yet been published.

The pupils take part in very many of the activities of the school, including helping to run the tuck shop, representing their class on the school council, and joining in a wide variety of School Visits with their various groups.

In July a 5th year girl started work in an insurance broker's office where she is doing very well. She passed six C.S.E. exams (Typing, Accounts, English, Needlework, Cookery and Social Studies) for which she had worked extremely hard for two years.

EDUCATIONALLY SUBNORMAL PUPILS

| | |
|--------------------------------|-----|
| In Day Special Schools | 528 |
| In Residential Special Schools | 29 |
| In Hospitals | 36 |
| Home Tuition | 2 |
| Awaiting Placement | 72 |

The Educationally Subnormal group now covers a large range of children. They vary from the child who is just not coping in the larger class in a normal school, and appears to need more attention than a remedial class is capable of giving, to the severely retarded child with possibly other handicaps. The first group attend St. Christopher's and St. Nicholas Day Special Schools or similar Day or Residential Schools. The latter group attend Coldharbour or a similar School or, if their handicaps do not permit them to be contained in the school situation, are admitted to hospital. Before the latter step is taken every effort is made to contain the child elsewhere. He or she will almost always have had a trial at Coldharbour School and Residential placement at a suitable school will have been obtained wherever possible.

I earlier referred to the increased number of this group of children being ascertained and there is still a waiting list for places at each of the three E.S.N. schools. Those children who are severely retarded should all be placed when the second school for this category opens later in 1973.

St. Christopher's Special School for Educationally Subnormal Children

1. Statistics

| | Boys | Girls | Total |
|--------------------------------------|------------|-----------|------------|
| Number on roll 31.12.71 | 125 | 77 | 202 |
| Admitted during 1972 | 42 | 22 | 64 |
| Transferred to work at 16 | 15 | 6 | 21 |
| Transferred to residential schools | 1 | 0 | 1 |
| Transferred to Waylands | 0 | 2 | 2 |
| Transferred to Coldharbour | 4 | 2 | 6 |
| Transferred to Sir Cyril Burt School | 1 | 0 | 1 |
| Transferred to Other Areas | 4 | 2 | 6 |
| Deceased | 1 | 0 | 1 |
| Number on roll 31.12.72. | <u>141</u> | <u>87</u> | <u>228</u> |

2. Various Activities

In order to broaden the experiences of our maturing pupils, a series of expeditions has been undertaken, including camping and canoeing.

The School has introduced the Duke of Edinburgh Award Scheme for a group of older pupils and a number of these pupils are now working towards their Bronze Certificates.

As part of this Award, 5 boys undertook a Course on First Aid, and it is pleasing to report that 4 boys were successful in obtaining their Red Cross Junior Certificate, having satisfied the requirements of an external examiner. These and others of the D. of E. Group are involved in a range of interests including canoeing and canoe-building, art and leathercraft. The girls Interest Section has involved them in Embroidery, Dressmaking and Cookery.

During the Summer Term, a mixed group of our pupils took part in the Pinewood Camp organised by the Department of Social Services. This appeared to be most successful in that our pupils both enjoyed and benefitted from the experience.

In September 1972, a Scout Cub Pack was introduced into School, the School Pack becoming The 30th Croydon Pack. Some 18 of our Junior Department boys have been initiated and are enthusiastic Scouters. We are indebted to a number of the Scouting fraternity for the tremendous support they have afforded us in establishing the Cub Pack and in their continued support in many practical ways since the Pack was installed.

In October 1972, the School obtained the support of the Road Safety Officer in organising, at the School, a Cycle Proficiency Course. The 8 pupils who undertook this Course received intensive instruction from officers of Mr. Arthur's Department and this resulted in all 8 pupils receiving their Cycling Proficiency Certificates, one boy receiving a Special Commendation.

An interesting development in the life of the School has been the recent appointment of Mr. Frank Knight, who is a Music Therapist, to attend the School on one day per week. We have every hope that Mr. Knight's work will be a significant item in the School's total commitment to dealing with the behavioural and educational problems of a number of our pupils.

It is a matter of some concern that the amount of Speech Therapy afforded the School in the past has, due to a number of circumstances, been curtailed. Nevertheless, we are indebted to Mrs. Robinson who left the Authority some months ago, and to Mrs. Siddons, for the excellent work they have done with our pupils in this vital area of education.

It is my pleasure to record that we have been fortunate in receiving the full support of the Staffs of the Education Department and the School Medical Department and we receive considerable assistance in our work from our School Medical Officer, the Educational Psychological Service, and the Child Guidance Clinic. Further I wish to pay tribute to the members of the Governing Body for their unstinted support throughout the year.

Finally, our gratitude must be expressed to the Friends of St. Christopher's Association who, apart from realising large sums of money which they kindly donate towards the development of a wide range of school activities, are ever-ready to give moral and practical support to all School events.

St. Nicholas Special School for Educationally Subnormal Children

The number of children on roll to St. Nicholas School for December, 1972 had increased on the previous year to a total of 175 pupils in an age range of 4 - 17 years.

During the course of the year thirty-four children were admitted to the school, whilst twenty-four children left the school for reasons as detailed below.

| | <i>Boys</i> | <i>Girls</i> | <i>Total</i> |
|------------------------------------|-------------|--------------|--------------|
| Number on roll December 1971 | 96 | 68 | 164 |
| Admissions during 1972 | <u>17</u> | <u>18</u> | <u>35</u> |
| | 113 | 86 | 199 |
| Transferred to Normal School | 2 | 2 | 4 |
| Transferred to Residential Schools | 2 | 3 | 5 |
| Transferred to Coldharbour School | - | 1 | 1 |

| | <i>Boys</i> | <i>Girls</i> | <i>Total</i> |
|---|-------------|--------------|--------------|
| Left school to enter Open Employment | 2 | - | 2 |
| Left school to enter Sheltered Employment | - | 1 | 1 |
| Removal from District | 5 | 6 | 11 |
| Number on roll December 1972 | <u>102</u> | <u>73</u> | <u>175</u> |

The School has continued to enjoy invaluable support and assistance from other agencies and disciplines. School Medical Officers examined a total of 70 children under the system of routine medical inspections at which time considerable advice was afforded the parents and the school, and treatment prompted where defects were discovered. The children of the school are under constant observation to ensure their continued correct placing and as part of this observation 20 children were re-assessed by the School Medical Officer during the course of the year. Regular cleanliness inspections were conducted for the whole school where only a small number of head infestations and skin defects were recognised. The school is indebted to the School Nurse for the regular treatment (on the school premises) of those children suffering with verrucae, as it is reasonable to assume that the defects would have otherwise gone untreated. The school is also grateful for the Nurse's advice to the children and teachers in the prevention of future verrucae especially at a time when all the children attending the school have the opportunity of swimming instruction. All children who were admitted to the school during the course of the year were screened for deficiencies of hearing by the Audiometrician and where children failed the sweep test they were referred for re-assessment and further investigation.

Throughout the year a regular case-load of 40 children received Speech Therapy, either individually or in group sessions. A further 20 children were under the supervision of the Speech Therapist for minor defects. Because of unexpected staff changes in the Speech Therapy Service the allocation of time when a Speech Therapist was able to attend the school was reduced during 1972. Despite resultant difficulties the children have continued to prosper from the treatment afforded them and the school is most grateful for the help and advice given to the teachers and the parents of the children to promote supplementary treatment in the classroom and the home.

During the Summer Term 1972 two groups of children and their teachers took part in school journeys of one week's duration. A group of junior children attended a Holiday Camp on the South Coast, whilst a group of senior children attended the Municipal Camping Site at Dieppe. Both parties of children enjoyed a number of whole-day excursions during these holidays visiting places of cultural, geographical and historical interest. It was rewarding to note the considerable upsurge of vitality of all the children on their return to school and to receive reports that many of the children showed greater and more positive signs of self-reliance on holiday than had been apparent in the school setting.

1972 saw the inauguration of a Youth Club based on St. Nicholas School. The facility of such a club has afforded opportunities to promote good social development and to help guide the senior pupils of the school (who so often are not easy to integrate into existing Youth Club provisions) into acceptable leisure pursuits.

Coldharbour Special School for Educationally Subnormal Children

Staffing problems kept numbers lower at the beginning of the year. Regrettably speech therapy ceased. The Physiotherapist continues her good work. There are additional part-time specialists i.e. language development, art and music therapy.

The school now has its full complement of teaching staff but there is still a great need for more welfare assistants to support teachers.

The Parent/Teacher Association continued to help in providing equipment. Each class now has a record player and the next project may well be a swimming pool.

The Christmas entertainment was very well supported and the annual Christmas party was made possible by the generous grant allocated by the Education Committee.

The Headmistress expressed appreciation of the support received from the Education Welfare Officer, Mr. Tyler.

Movement of Children

| | | | |
|-----------------------------------|----------|-----------------------|---------------------------------------|
| January 1972 - 40 girls | 63 boys. | 103 children on roll. | |
| December 1972 - 41 girls | 62 boys | 103 | " " |
| Transferred to Waylands | | 3 | |
| Taken into permanent care | | 2 | |
| Deceased | | 2 | |
| Transferred to E.S.N. | | 1 | |
| Removed from district | | 2 | |
| Transferred to residential school | | 2 | |
| Excluded | | 1 | |
| | | <u>13</u> | Children admitted during the year 13. |

After 27 years of service at Coldharbour School, the Head Teacher, Mrs. L.B. Mouatt, will retire at the end of the Spring Term 1973.

EPILEPTIC PUPILS

| | |
|--------------------------------|-----|
| In Day Special Schools | - 1 |
| In Residential Special Schools | - 8 |

No pupils were ascertained as epileptic during 1972 for the second year in succession. Some children with epilepsy were placed in special schools but in these cases epilepsy was a secondary handicap and not the main reason for special education. Epilepsy is not, generally speaking, incompatible with ordinary school placement, and wherever possible such children, with the goodwill of teachers, are encouraged to remain at a normal school.

MALADJUSTED PUPILS

| | |
|--|-----|
| In Day Unit for non-communicating children | 10 |
| In Day Special Schools | 26 |
| In Residential Special Schools | 105 |
| Awaiting Placement | 34 |

The number of children ascertained as maladjusted was exactly the same as last year - 59. There is no indication of the hoped for return to the figures for 1970, and previous years, when the average was 15 to 20 children. Indeed, the position is quite a lot worse as was indicated in the opening remarks to this section of the Report, for the number of children awaiting placement has more than doubled from 15 last year to 34 this year. The latter is a very depressing statistic as the Borough Special Day School has only been open for a year and a term, and already almost twice as many disturbed children as ever before had not been found places in suitable schools at the end of the year.

The Unit for Autistic Children, as the following school report points out, is also full. The desirable number of places in this Unit is not determined yet as it is not certain how many of the children will transfer to other placements eventually. It is, however, clear that there are not enough places in the Unit for the needs of the Borough.

Sir Cyril Burt School for Maladjusted Children, including the Unit for Autistic Children

Pupils on Roll

| | | |
|-----------------------|----------------------|-------------|
| Resident Girls | 9 | |
| Resident Boys | <u>17</u> | |
| | <u>26</u> | 26 |
| Day Pupils - Girls | 3 | |
| Day Pupils - Boys | <u>15</u> | |
| | <u>18</u> | 18 |
| Autistic Unit - Girls | 1 | |
| Autistic Unit - Boys | <u>9</u> | |
| | <u>10</u> | 10 |
| | | <u>54</u> |
| | <i>Total on Roll</i> | <i>- 54</i> |

In addition, one girl day pupil, left school and is now in full-time employment. One senior boy, day pupil, was taken off-roll, following a prolonged period of absence. A boy pupil, joining the Autistic Unit in January, 1972, had been gradually transferred to the Infant class of the Main School by Easter, 1972, and his careful phasing back to normal Infants' Day School completed by December.

Another pupil from the Autistic Unit is in the process of gradual transference to the Infants class, and the Unit's only girl now attends St. Christopher's School for two days per week.

The School has largely passed through the initial intake phase. All places for resident boys are filled, and no vacancies exist in the Autistic Unit. The few remaining vacancies are confined to the Infants and Senior/Leavers age group. The latter would be best filled by a redistribution of present pupils as they mature, so that vacancies are created for younger pupils, with whom rehabilitation would be a realistic aim.

Staffing

Appointments have now been made, filling the Teaching Staff establishment.

Ancillary staff include a Nursery Class Assistant and two Welfare Assistants.

A further full-time Male Child Care Officer was appointed during this year, bringing the total Child Care Staff to four (Two men and Two women).

Mrs. Pearn and Mrs. Salter of the School Psychological Service, each attend one day per week, observing, advising and testing within the School. Mr. Reid and Mr. Edwards give the School close support, and regularly attend Case Conference sessions.

Medical Provision

Dr. Crosse and Dr. Mills attend one morning on alternate weeks. Their support is available to pupils in need of psychiatric help, their specialist advice is widely sought, and their contributions to Case Conference Reviews are greatly appreciated. The Review Meetings have included members of the School Psychological Service, Education Welfare Officers, Social Workers, Probation Officers, Home Tutors, Child Guidance Clinic Staff, Teaching and Child Care Staff, Staff from Childrens' Homes and Hospital Staff. Such forums have great value as In-service Training sessions in addition to discussing the needs of individual pupils.

Dr. Boffa or Dr. Atkinson visit the School weekly, and see resident pupils as required, at their surgery.

A very few cases of accidents, involving relatively minor injuries, have been treated at the nearby Beckenham Hospital Casualty Department.

Twenty pupils have, so far, received general medical inspections, during two visits from the School Medical Officer. All pupils have been examined by the Audiologist and School Dental Service. Treatment has been arranged at the Dental Clinic for some pupils. In addition, resident pupils receive regular dental care and examinations at a local Dentist's surgery.

Speech Therapy

Mrs. Julie Robertson's resignation has left the self-evident needs of many autistic, non-communicating and emotionally disturbed pupils unfulfilled since September 1972.

Parent Participation

An encouraging development has been the formation of a Parents' Committee. The Parent/Pupil Socials and other events held at School have been well attended. It is hoped that parents will be more relaxed and confident in their attitudes towards the School, and that pupils will benefit from the mutual support of parents and staff.

PHYSICALLY HANDICAPPED PUPILS

The number of physically handicapped pupils ascertained was 32, a large increase from the 12 of the previous year. However, fifteen of these children were under five years of age, thirteen being ascertained in preparation for attending the Nursery Unit at St. Giles' School to be opened at the beginning of the Spring Term in 1973, and two were ascertained for a small Unit for physically handicapped children with hearing defects to be opened at the same time.

The spina bifida group of children continues to grow. These often severely handicapped children, requiring a lot of medical attention, will place an increasing work load on the School Nurse and her staff, as well as on the school generally.

St. Giles' Special School for Physically Handicapped Children

During the year under review there were 37 admissions and 29 leavers. Of the leavers 17 transferred to other schools or left the district, 10 left to employment or training and 2 died. The number on roll at present is 155 and the main handicap groups are as follows:—

| | Boys | Girls | Total |
|--------------------|------|-------|-------|
| Spina Bifida | 14 | 15 | 29 |
| *Speech Defect | 16 | 12 | 28 |
| Cerebral Palsy | 10 | 7 | 17 |
| Asthma | 9 | 7 | 16 |
| Congenital Heart | 7 | 3 | 10 |
| Epilepsy | 6 | 4 | 10 |
| Muscular Dystrophy | 6 | - | 6 |
| Fibrocystics | 1 | 3 | 4 |

*The numbers with speech defect include 8 boys and 5 girls also suffering from cerebral palsy.

The school medical officer, Dr. Thelma Wield, saw 225 children at 22 medicals, 86 parents being present. At specialist medicals held by Dr. Fanthorpe and Mr. McQueen, a total of 40 children were seen, 22 parents being present. Sister Jordan and her staff were responsible for the arrangements and recording, in addition to dealing with 58 major epileptic fits and the toilet training of incontinent children.

In the Physiotherapy Department the following treatments have been given:—

3,690 chest treatments, 6,631 Spina Bifida,
4,343 Cerebral Palsy and 2,013 miscellaneous treatments -
a grand total of 16,785.

The absence of speech therapy at the end of the period is a matter of grave concern in the School.

PUPILS SUFFERING FROM A SPEECH DEFECT

| | |
|-----------------------|-----|
| In Day Special School | Nil |
| In Day Unit | 9 |
| In Residential School | 2 |

Under this heading only pupils where speech is the major disability are considered. Most of these children attend the Day Unit at West Thornton School until they are fit to transfer back to normal school or until they reach eleven years. Luckily most of the children, after the skilled attention they receive in the Unit, are able to take their places in ordinary schools. The others have been placed reasonably satisfactorily in other special schools and units in the Borough according to their needs.

West Thornton Unit for Speech Disordered Children

There were nine children in the Unit at the beginning of the year. Since then, five have been admitted and seven have left us. Of these seven, five are in ordinary schools, where they are progressing satisfactorily; one is in a School for Educationally Sub-normal children, and one is in a Partially Hearing Unit.

Miss Grasso, Senior Speech Therapist, left in the autumn to return to Australia and we are happy to welcome Mrs. Siddons, L.C.S.T. as our new Senior Speech Therapist.

Three of the older boys in the Unit spend the afternoons in classes with their own age groups, and all the children join with other classes for Assemblies, P.E., games and music. The friendly welcome which they always receive from teachers and children in the main school is a great help. Going into other classes is something which the children in the Unit

look forward to very much. It could so easily be otherwise in a less tolerant atmosphere.

In order that children who are not yet ready to join other classes should make friends with children from outside the Unit, we now have small groups from the Infant School spending two afternoons each week in the Unit.

The general shortage of Speech Therapists has led to a diminution in this side of the work and it is to be hoped that the steps which are being taken to alleviate the position will soon be successful.

DELICATE PUPILS

In Day Special Schools 7

In Residential Special Schools 9

Seven children were ascertained as delicate during the year. The numbers are too small to compare from year to year and there will remain a small number of children, mostly with diseases of the chest or heart conditions who find ordinary school too much of a physical and mental strain. After a period in a day or residential special school most of these children find their way back to ordinary school.

HOME TUITION

If a child is not fit to attend any school, usually due to a temporary medical condition, tuition is provided at home. Such children are returned to school as quickly as possible since the children need social contact for normal development. During the year 37 children were recommended for home tuition and 6 were still receiving this at the end of the year.

IMMIGRANT PUPILS - RECEPTION CENTRE

Dr. P. Goberdhan, Departmental Medical Officer

During 1972 a total of 584 pupils were medically examined.

A summary of the findings is given in the Table below:—

Percentage of Defects in Children Examined

| DEFECTS | ALL AGE GROUPS | | | | | | | |
|-----------------------|----------------|-------|---------------------------|-------|------------------------|-------|--------------------|-------|
| | EUROPEAN | | ASIAN India - Pakistan | | BRITISH WEST INDIES | | OTHER COUNTRIES | |
| | Boys | Girls | Boys | Girls | Boys | Girls | Boys | Girls |
| SKIN | 3.1 | 9.5 | 2.2 | 4.6 | 5.7 | 2.6 | 8.7 | 1.5 |
| VISION | 16.9 | 31.9 | 20.4 | 14.7 | 20.0 | 25.6 | 20.3 | 21.2 |
| HEARING | - | 1.6 | 0.7 | - | - | - | - | - |
| NOSE AND THROAT | 3.1 | 3.2 | - | 0.9 | - | 2.6 | 1.5 | - |
| HEART AND CIRCULATION | - | 1.6 | 0.7 | 0.9 | 8.6 | - | - | 1.5 |
| LUNGS | 1.5 | 1.6 | 0.7 | - | 2.9 | 5.1 | 1.5 | 1.5 |
| STABILITY | 3.1 | - | 0.7 | - | - | - | 1.5 | 1.5 |

Height and weight measurements were taken of all children. As in the 1969, 1970 and 1971 figures, this shows that Asian children are less heavy and smaller than those of other groups. This is especially apparent between the ages of five to fourteen years.

Average Heights and Weights Table 1972

| Boys and Girls Ages in Years | European | | Asian | | B.W.I. | | Others | |
|---------------------------------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|
| | Height | Weight | Height | Weight | Height | Weight | Height | Weight |
| 5 & 6 years | 44.5 in. | 43.1 lb. | 42.6 in. | 38.5 lb. | 44.2 in. | 42.6 lb. | 43.3 in. | 40.1 lb. |
| 7 & 8 years | 49.8 in. | 56.5 lb. | 48.9 in. | 45.5 lb. | 46.5 in. | 48.2 lb. | 47.6 in. | 48.3 lb. |
| 9 & 10 years | 54.0 in. | 75.2 lb. | 51.1 in. | 55.8 lb. | 52.4 in. | 62.2 lb. | 52.1 in. | 62.2 lb. |
| 11 & 12 years | 59.4 in. | 86.9 lb. | 56.0 in. | 73.0 lb. | 59.5 in. | 69.2 lb. | 56.8 in. | 83.2 lb. |
| 13 & 14 years | 61.5 in. | 108.3 lb. | 59.7 in. | 89.1 lb. | 61.3 in. | 91.8 lb. | 59.6 in. | 84.3 lb. |
| 15 & 16 years | 63.0 in. | 111.0 lb. | 63.4 in. | 104.8 lb. | 64.9 in. | 124.9 lb. | 63.2 in. | 107.0 lb. |

In 1972 the use of the Tine Test for Tuberculosis was continued. The figures for the Tine Tests are as follows:—

| | |
|--|-----|
| Total number of children tested | 594 |
| Total number positive (i.e. those exposed to Tuberculosis) | 19 |

The results of further investigation at the Chest Clinic of these children were:—

| | |
|-------------------------|-----|
| Cleared | 6 |
| For further observation | 13 |
| Treatment given | Nil |
| No reports available | 0 |
| * * * * * | |

PART IV STATISTICAL RETURNS

APPENDIX A

STATUTORY TABLES

Number of pupils on registers of maintained primary and secondary schools (including nursery and special schools) in January 1973 as in Forms 7, 7M, and 11 Schools

57,482

PART 1. - MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A - PERIODIC MEDICAL INSPECTIONS

| Age Groups Inspected | No. of Pupils | PHYSICAL CONDITION OF PUPILS INSPECTED | | Pupils found to require treatment (excluding dental diseases and infestation with vermin) | | |
|----------------------|---------------|--|----------------|---|---|-------------------------|
| | | Satisfactory | Unsatisfactory | for defective vision (excluding squint) | for any other condition recorded at Part II | Total individual pupils |
| | | No. (3) | No. (4) | (5) | (6) | (7) |
| 1968 and later | 430 | 430 | - | 12 | 48 | 54 |
| 1967 | 2,786 | 2,786 | - | 124 | 442 | 526 |
| 1966 | 1,955 | 1,955 | - | 117 | 346 | 421 |
| 1965 | 272 | 271 | 1 | 17 | 42 | 53 |
| 1964 | 2,510 | 2,510 | - | 221 | 398 | 556 |
| 1963 | 2,243 | 2,242 | 1 | 194 | 353 | 496 |
| 1962 | 668 | 668 | - | 59 | 107 | 156 |
| 1961 | 297 | 296 | 1 | 28 | 49 | 70 |
| 1960 | 1,967 | 1,965 | 2 | 215 | 360 | 538 |
| 1959 | 1,759 | 1,759 | - | 209 | 328 | 494 |
| 1958 | 1,267 | 1,267 | - | 201 | 186 | 352 |
| 1957 and earlier | 2,241 | 2,241 | - | 356 | 339 | 644 |
| TOTAL | 18,395 | 18,390 | 5 | 1,753 | 2,998 | 4,360 |

Column (3) total as a percentage of Column (2)
total 99.97%

Column (4) total as a percentage of Column (2)
total 0.03%

TABLE B - OTHER MEDICAL INSPECTIONS

NOTES:— A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

| | | | | | | |
|-------------------------------|-----|-----|-----|-----|--------------|--------------|
| Number of Special Inspections | ... | ... | ... | ... | ... | 1,054 |
| Number of Re-inspections | ... | ... | ... | ... | ... | <u>3,438</u> |
| | | | | | <i>Total</i> | <u>4,492</u> |

TABLE C - INFESTATION WITH VERMIN

| | | | | | | |
|---|-----|-----|-----|-----|-----|--------|
| (a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons | ... | ... | ... | ... | ... | 58,783 |
| (b) Total number of individual pupils found to be infested | ... | ... | ... | ... | ... | 459 |
| (c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) | | | | | | 1 |
| (d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) | | | | | | 1 |

PART 2

DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS
DURING THE YEAR 1972

T = requiring Treatment

O = requiring Observation

| Defect or Disease | | PERIODIC INSPECTIONS | | | | SPECIAL INSPECTIONS |
|--------------------------------------|---|----------------------|---------|--------|-------|------------------------|
| | | ENTRANTS | LEAVERS | OTHERS | TOTAL | |
| SKIN | T | 123 | 249 | 602 | 974 | 24 |
| | O | 79 | 46 | 186 | 311 | 15 |
| EYES - (a) Vision | T | 253 | 557 | 943 | 1,753 | 84 |
| | O | 560 | 177 | 995 | 1,732 | 74 |
| (b) Squint | T | 120 | 21 | 119 | 260 | 7 |
| | O | 21 | 5 | 24 | 50 | 5 |
| (c) Other | T | 23 | 4 | 17 | 44 | 3 |
| | O | 18 | 5 | 34 | 57 | 6 |
| EARS - (a) Hearing | T | 53 | 17 | 135 | 205 | 10 |
| | O | 228 | 21 | 98 | 347 | 5 |
| (b) Otitis Media | T | 51 | 2 | 54 | 107 | 5 |
| | O | 100 | 7 | 58 | 165 | 8 |
| (c) Other | T | 2 | 4 | 9 | 15 | 1 |
| | O | 16 | 5 | 20 | 41 | 2 |
| NOSE AND THROAT | T | 140 | 27 | 151 | 318 | 7 |
| | O | 282 | 29 | 328 | 639 | 12 |
| SPEECH | T | 78 | 1 | 46 | 125 | 6 |
| | O | 76 | 4 | 56 | 136 | 17 |
| LYMPHATIC GLANDS | T | 9 | 1 | 4 | 14 | 1 |
| | O | 43 | 3 | 106 | 152 | 2 |
| HEART | T | 59 | 43 | 75 | 177 | 5 |
| | O | 37 | 17 | 56 | 110 | 4 |
| LUNGS | T | 62 | 40 | 116 | 218 | 7 |
| | O | 82 | 11 | 91 | 184 | 8 |
| DEVELOPMENTAL - (a) Hernia | T | 21 | 5 | 16 | 42 | 3 |
| | O | 18 | 3 | 17 | 38 | 7 |
| (b) Other | T | 44 | 54 | 144 | 242 | 12 |
| | O | 149 | 47 | 360 | 556 | 25 |
| ORTHOPAEDIC - (a) Posture | T | 11 | 9 | 16 | 36 | 2 |
| | O | 16 | 13 | 48 | 77 | 7 |
| (b) Feet | T | 31 | 10 | 40 | 81 | 2 |
| | O | 70 | 30 | 123 | 223 | 2 |
| (c) Other | T | 34 | 33 | 72 | 139 | 11 |
| | O | 70 | 32 | 137 | 239 | 7 |
| NERVOUS - (a) Epilepsy SYSTEM | T | 11 | 8 | 18 | 37 | 9 |
| | O | 19 | 4 | 10 | 33 | 4 |
| | T | 32 | 8 | 55 | 95 | 6 |
| | O | 116 | 6 | 69 | 191 | 11 |
| PSYCHO- LOGICAL - (a) Development | T | 9 | 3 | 22 | 34 | 14 |
| | O | 60 | 1 | 49 | 110 | 9 |
| | T | 15 | 9 | 37 | 61 | 13 |
| | O | 80 | 20 | 104 | 204 | 13 |
| ABDOMEN | T | 31 | 7 | 39 | 77 | 4 |
| | O | 34 | 3 | 33 | 70 | 5 |
| OTHER | T | 14 | 12 | 58 | 84 | 6 |
| | O | 48 | 37 | 122 | 207 | 11 |

PART 3

TABLE A - EYE DISEASES, DEFECTIVE VISION AND SQUINT

| | Number of cases known to have been dealt with |
|--|---|
| External and other, excluding errors of refraction and squint | - |
| Errors of refraction (including squint) | 1,034 |
| <i>Total</i> | 1,034 |
| Number of pupils for whom spectacles were prescribed | 400 |

TABLE B - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

| | Number of cases known to have been dealt with |
|--|---|
| Received operative treatment - | |
| (a) for diseases of the ear | 126 |
| (b) for adenoids and chronic tonsillitis | 397 |
| (c) for other nose and throat conditions | - |
| Received other forms of treatment | 111 |
| <i>Total</i> | 634 |
| Total number of pupils still on the register of schools at 31st December 1972, known to have been provided with hearing aids:- | |
| (a) during the calendar year | 9 |
| (b) in previous years | 79 |

TABLE C - ORTHOPAEDIC AND POSTURAL DEFECTS

| | Number known to have been treated |
|--|-----------------------------------|
| (a) Pupils treated at clinics or out-patients depts. | 186 |
| (b) Pupils treated at school for postural defects | 27 |
| <i>Total</i> | 213 |

TABLE D - DISEASES OF THE SKIN

| | Number of pupils known to have been treated |
|-----------------------------|---|
| Ringworm - (a) Scalp | - |
| (b) Body | 7 |
| Scabies | 16 |
| Impetigo | 32 |
| Other skin diseases | 56 |
| <i>Total</i> | 111 |

TABLE E - CHILD GUIDANCE TREATMENT

| | Number known to have been treated |
|---|-----------------------------------|
| Pupils treated at Child Guidance clinics | 286 |

TABLE F - SPEECH THERAPY

| | |
|--|--|
| | <i>Number known to have been treated</i> |
| Pupils treated by speech therapists | 1,134 |

TABLE G - OTHER TREATMENT GIVEN

| | |
|--|--|
| | <i>Number known to have been treated</i> |
| (a) Pupils with minor ailments | 1,761 |
| (b) Pupils who received convalescent treatment under School Health Service arrangements | 17 |
| (c) Pupils who received B.C.G. vaccination | 3,326 |
| (d) Other than (a), (b) and (c) above, Please specify | |
| (1) Enuresis | 278 |
| (2) Overweight Clinics | 113 |
| (3) Consultant for Speech Disorders | 36 |
| <i>TOTAL (a) - (d)</i> | <i>5,531</i> |

APPENDIX B - TREATMENT CLINICS

Summary of Attendances

| | 1972 | 1971 | <i>Increase or Decrease</i> |
|------------------------------------|--------|--------|-----------------------------|
| Audiology Clinic | 889 | 961 | - 72 |
| Dental Clinics | 30,353 | 30,280 | + 73 |
| Enuresis Clinics | 994 | 963 | + 31 |
| Eye Clinics | 1,225 | 1,371 | - 146 |
| Inspection Clinics | 713 | 753 | - 40 |
| Minor Ailments and Verruca Clinics | 11,926 | 12,159 | - 233 |
| Physiotherapy Clinics | 1,680 | 2,256 | - 576 |
| Weight Control Clinics | 290 | 353 | - 63 |
| | 48,070 | 49,096 | - 1,026 |

AUDIOLOGY CLINIC

Numbers attending Croydon Day Schools and Pre-School Children

| | |
|---|------------|
| <i>(a)</i> With hearing sufficiently impaired to require regular supervision: | |
| Pre-School Pupils | 7 |
| Primary School Pupils | 22 |
| Secondary School Pupils | <u>NIL</u> |
| | <u>29</u> |
| <i>(b)</i> With a hearing loss requiring occasional supervision. | |
| Pre-School Pupils | NIL |
| Primary School Pupils | 16 |
| Secondary School Pupils | <u>16</u> |
| | <u>32</u> |

Pure Tone Audiometer Tests (Excluding Sweep Test Failures).

| | |
|---|------------|
| <i>(a)</i> Tested for the first time | 364 |
| <i>(b)</i> Tested as a review case | <u>327</u> |
| | <u>691</u> |

Sweep Testing of Five Year Old School Entrants.

| | |
|---|-------|
| Number of schools visited | 72 |
| Number of children tested | 8,564 |
| Number of children passed | 7,011 |
| Number of children failed | 786 |
| Number of children to be re-tested | 767 |
| Number of children not tested | 501 |
| (absent or unco-operative) | |

The failures were re-assessed as follows:

| | |
|---------------------------------------|-----------|
| No hearing loss | 116 |
| Slight hearing loss | 282 |
| Moderate hearing loss | 241 |
| Moderately severe hearing loss | 42 |
| Severe hearing loss | 7 |
| Failed to keep appointments | 42 |
| Left district | 21 |
| Waiting to be tested | <u>35</u> |

Issue of Hearing Aids

| | |
|--|-----------|
| <i>(a)</i> National Health Service 'Medresco' aids | 2 |
| <i>(b)</i> Commercial aids bought by Croydon L.E.A. | <u>10</u> |
| | <u>12</u> |

7 children under school age are using hearing aids.

DENTAL SERVICE

| Items of Treatment | | 1972 | 1971 |
|--------------------|--|---------------|---------------|
| (1) | Number of children first inspected at school | 32,260 | 35,787 |
| (2) | Number of children first inspected at clinic | 7,011 | 7,179 |
| (3) | Number of (1) and (2) found to require treatment | 23,337 | 23,458 |
| (4) | Number of (1) and (2) offered treatment | 21,859 | 23,260 |
| (5) | Number re-inspected at school or clinic | 4,561 | 5,489 |
| (6) | Number of (5) requiring treatment | 2,533 | 3,059 |
| (7) | Visits - First | 9,487 | 9,109 |
| | Subsequent | <u>20,866</u> | <u>21,171</u> |
| | | 30,353 | 30,280 |
| (8) | Additional courses commenced | 1,402 | 1,397 |
| (9) | Fillings - Permanent | 18,268 | 16,696 |
| | Deciduous | <u>10,858</u> | <u>11,841</u> |
| | | 29,126 | 28,537 |
| (10) | Teeth Filled - Permanent | 14,920 | 14,171 |
| | Deciduous | <u>9,831</u> | <u>10,479</u> |
| | | 24,751 | 24,650 |
| (11) | Extractions - Permanent | 1,783 | 1,545 |
| | Deciduous | <u>5,006</u> | <u>4,045</u> |
| | | 6,789 | 5,590 |
| (12) | General Anaesthetics | 1,753 | 1,488 |
| (13) | Emergencies | 1,244 | 1,355 |
| (14) | X-rays (Number of patients) | 1,126 | 1,400 |
| (15) | Prophylaxis | 816 | 744 |
| (16) | Teeth otherwise conserved | 716 | 591 |
| (17) | Teeth root filled | 69 | 188 |
| (18) | Inlays | - | 4 |
| (19) | Crowns | 98 | 117 |
| (20) | Other operations | 3,020 | 3,756 |
| (21) | Advice | 1,922 | 1,636 |
| (22) | Appointments not kept | 8,499 | 8,884 |
| (23) | Courses of treatment completed | 7,507 | 8,012 |

| | 1972 | 1971 |
|-------------------------------------|-------|-------|
| (24) Orthodontics - | | |
| Cases remaining from previous year | 232 | 145 |
| New cases commenced during year | 274 | 229 |
| Cases completed during year | 190 | 162 |
| Discontinued cases | 17 | 12 |
| Appliances - removable | 535 | 477 |
| - fixed | 42 | 85 |
| (25) Number of dentures supplied | 26 | 25 |
| (26) Number of sessions - Treatment | 4,128 | 4,189 |
| Inspection | 256 | 285 |
| Dental Health Education | 5 | 35 |

EYE CLINICS

PURLEY, SANDERSTEAD AND ADDINGTON

| | 1972 | 1971 |
|---|-------|-------|
| No. of New cases examined | 1,042 | 994 |
| No. of Re-examinations | 321 | 377 |
| Total number of examinations | 1,363 | 1,371 |
| No. of children for whom spectacles were prescribed | 564 | 374 |

On 31st December 1972 the number of:-

| | |
|---|----|
| (1) New Cases referred but not yet examined was | 41 |
| (2) Children due for review in 1972 and still awaiting re-examination was | 60 |

MINOR AILMENTS CLINICS

| Clinic | Defects | Attendances |
|----------------------|---------|-------------|
| Ashburton School | 257 | 1,121 |
| Lodge Road | 301 | 2,140 |
| New Addington | 414 | 2,601 |
| Norbury Manor School | 76 | 475 |
| Old Coulsdon | 61 | 422 |
| Purley | 174 | 1,451 |
| Rectory Park | 194 | 1,542 |
| Rockmount School | 72 | 585 |
| Waddon | 212 | 1,589 |

DENTAL SERVICE

MINOR AILMENTS CLINICS (continued)

| | 1972 | | | 1971 | | |
|---------------------------------|--------------|---------------|-------------------------------------|--------------|---------------|-------------------------------------|
| | Cases | Attendances | Average No. of Attendances per case | Cases | Attendances | Average No. of Attendances per case |
| Ringworm | - | - | - | - | - | - |
| Scabies | - | - | - | - | - | - |
| Impetigo | 1 | 2 | 2.0 | 4 | 4 | 1.0 |
| Other Skin Defects | 56 | 103 | 1.8 | 36 | 64 | 1.8 |
| Otorrhoea and other Ear defects | - | - | - | - | - | - |
| External Eye Defects | 6 | 16 | 2.6 | 4 | 15 | 3.8 |
| Verrucae | 1,398 | 9,802 | 7.0 | 1,403 | 10,066 | 7.2 |
| Miscellaneous | 300 | 2,003 | 6.6 | 428 | 2,010 | 4.7 |
| TOTALS | 1,761 | 11,926 | 6.8 | 1,875 | 12,159 | 6.5 |

PHYSIOTHERAPY CLINICS

| | 1972 | 1971 |
|--|------|------|
| Total number of pupils treated | 280 | 376 |
| Total number of new cases | 80 | 125 |
| Total number of Orthopaedic conditions | 155 | 200 |
| Total number of Respiratory conditions | 125 | 176 |
| Individual treatments | 391 | 319 |
| Number of classes | 41 | 109 |

SPEECH CLINICS

| | 1972 | 1971 |
|-------------------------------|-------|-------|
| Total number of cases treated | 1,134 | 1,183 |
| Number of new cases | 191 | 233 |
| Number of cases discharged | 240 | 392 |
| Number of reviews | 742 | 856 |
| Treatment sessions | 6,436 | 9,369 |

APPENDIX C

RETURN OF MEDICAL INSPECTIONS - NON MAINTAINED SCHOOLS

| A. Routine Medical Inspections:— | | | | | | | | Year | Year |
|---------------------------------------|-----|-----|-----|-----|-----|-----|-----|------------------|--------------------|
| | | | | | | | | 1972 | 1971 |
| Aged 11 and under | ... | ... | ... | ... | ... | ... | ... | 34 | 27 |
| 12 | ... | ... | ... | ... | ... | ... | ... | 125 | 135 |
| 13 | ... | ... | ... | ... | ... | ... | ... | 66 | 57 |
| 14 | ... | ... | ... | ... | ... | ... | ... | 83 | 88 |
| 15 and over | ... | ... | ... | ... | ... | ... | ... | <u>152</u> | <u>145</u> |
| <i>Total Pupils</i> | | | | | | | | <u>460</u> | <u>452</u> |
| Visits to non-maintained schools | | | | | | | | 28 | 26 |
| Total No. of parents present | | | | | | | | 201 | 183 |
| B. The following defects were found:— | | | | | | | | <i>Requiring</i> | |
| | | | | | | | | <i>Treatment</i> | <i>Observation</i> |
| Skin | ... | ... | ... | ... | ... | ... | ... | 36 | 3 |
| Vision | ... | ... | ... | ... | ... | ... | ... | 102 | 40 |
| Squint | ... | ... | ... | ... | ... | ... | ... | 6 | - |
| Hearing | ... | ... | ... | ... | ... | ... | ... | 6 | 3 |
| Otitis Media | ... | ... | ... | ... | ... | ... | ... | - | 1 |
| Nose and Throat | ... | ... | ... | ... | ... | ... | ... | 8 | 11 |
| Speech | ... | ... | ... | ... | ... | ... | ... | - | - |
| Cervical Glands | ... | ... | ... | ... | ... | ... | ... | - | - |
| Heart and Circulation | ... | ... | ... | ... | ... | ... | ... | 2 | - |
| Lungs | ... | ... | ... | ... | ... | ... | ... | - | 1 |
| Development (Other) | ... | ... | ... | ... | ... | ... | ... | 4 | 11 |
| Posture | ... | ... | ... | ... | ... | ... | ... | 9 | 3 |
| Flat Foot | ... | ... | ... | ... | ... | ... | ... | 6 | 3 |
| Orthopaedic (Other) | ... | ... | ... | ... | ... | ... | ... | 7 | 7 |
| Nervous System (Other) | ... | ... | ... | ... | ... | ... | ... | 2 | 2 |
| Psychological | ... | ... | ... | ... | ... | ... | ... | 2 | - |
| Other Defects | ... | ... | ... | ... | ... | ... | ... | 8 | 7 |

C. Other Inspections:—

There were 29 Re-inspections, and 1 Special Medical Inspection.

APPENDIX D

NUMBERS OF PUPILS ON SCHOOL REGISTERS, AND NUMBERS OF
CHILDREN EXAMINED AT ROUTINE MEDICAL INSPECTIONS IN
MAINTAINED SCHOOLS DURING THE YEAR 1972

| Primary Schools | Numbers on Registers | No. of Children Examined | | |
|---|-------------------------|--------------------------|-------|-------|
| | | Boys | Girls | Total |
| All Saints* (C. of E.) J.M. | 323 | 36 | 38 | 74 |
| All Saints* (C. of E.) I. | 191 | 32 | 30 | 62 |
| Applegarth J.M. | 494 | 72 | 63 | 135 |
| Applegarth I. | 341 | 82 | 69 | 151 |
| Ashburton J.M. | 621 | 71 | 80 | 151 |
| Ashburton I. | 339 | 63 | 51 | 114 |
| Atwood J.M. & I. | 381 | 58 | 65 | 123 |
| Beaumont J.M. & I. | 143 | 21 | 23 | 44 |
| Benson J.M. & I. | 531 | 87 | 78 | 165 |
| Beulah J.M. | 602 | 91 | 77 | 168 |
| Beulah I. | 388 | 95 | 78 | 173 |
| Broadmead I. | 229 | 57 | 67 | 124 |
| Byron J.M. & I. | 337 | 61 | 44 | 105 |
| Castle Hill J.M. | 604 | 50 | 39 | 89 |
| Castle Hill I. | 444 | 120 | 147 | 267 |
| Chipstead Valley J.M. & I. | 526 | 82 | 92 | 174 |
| Christ Church (C. of E.) J.M. & I. | 257 | 44 | 46 | 90 |
| Coulsdon J.M. & I. | 134 | 23 | 20 | 43 |
| Courtwood J.M. & I. | 225 | 43 | 36 | 79 |
| Cypress J.M. | 330 | 103 | 88 | 191 |
| Cypress I. | 245 | 25 | 25 | 50 |
| David Livingstone J.M. & I. | 275 | 21 | 51 | 72 |
| Davidson I. | 189 | 42 | 30 | 72 |
| Duppas J.M. | 356 | 53 | 55 | 108 |
| Ecclesbourne I. | 220 | 22 | 26 | 48 |
| Elmwood J.M. | 714 | 90 | 100 | 190 |
| Elmwood I. | 369 | 55 | 51 | 106 |
| Fairchildes J.M. | 452 | 55 | 47 | 102 |
| Fairchildes I. | 335 | 72 | 76 | 148 |
| Fieldway J.M. & I. | 378 | 59 | 68 | 127 |
| Forestdale J.M. & I. | 225 | 34 | 41 | 75 |
| Gilbert Scott J.M. | 597 | 78 | 71 | 149 |
| Gilbert Scott I. | 284 | 53 | 44 | 97 |
| Gonville J.M. & I. | 501 | 79 | 47 | 126 |
| Good Shepherd (R.C.) J.M. | 285 | 29 | 17 | 46 |
| Good Shepherd (R.C.) I. | 188 | 45 | 57 | 102 |
| Gresham J.M. & I. | 324 | 57 | 57 | 114 |
| Hayes J.M. & I. | 365 | 64 | 60 | 124 |
| Heavers Farm J.M. & I. | 102 | 13 | 17 | 30 |
| Howard J.M. & I. | 326 | 55 | 52 | 107 |
| Kenley J.M. & I. | 331 | 56 | 48 | 104 |
| Kensington Avenue J.M. | 518 | 66 | 64 | 130 |
| Kensington Avenue I. | 283 | 64 | 69 | 133 |
| Keston J.M. | 379 | 65 | 40 | 105 |
| Keston I. | 228 | 72 | 41 | 113 |
| Kingsley J.M. | 475 | 67 | 63 | 130 |
| Kingsley I. | 337 | 45 | 52 | 97 |
| Margaret Roper (R.C.) J.M. & I. | 271 | 40 | 42 | 82 |
| Monks Orchard J.M. & I. | 458 | 84 | 74 | 158 |
| Norbury Manor J.M. | 462 | 59 | 68 | 127 |
| Norbury Manor I. | 264 | 59 | 52 | 111 |
| Orchard Way J.M. & I. | 186 | 29 | 39 | 68 |
| Oval J.M. | 335 | 46 | 27 | 73 |
| Oval I. | 230 | 53 | 53 | 106 |
| Parish Church (C. of E.) J.M. | 298 | 38 | 40 | 78 |
| Parish Church (C. of E.) I. | 225 | 40 | 39 | 79 |

| Primary Schools | Numbers on Registers | No. of Children Examined | | |
|---|----------------------|--------------------------|--------------|---------------|
| | | Boys | Girls | Total |
| Park Hill J.M. & I | 338 | 57 | 80 | 137 |
| Purley Oaks J.M. | 334 | 55 | 49 | 104 |
| Purley Oaks I. | 203 | 47 | 54 | 101 |
| Regina Coeli (R.C.) J.M. & I. | 395 | 69 | 54 | 123 |
| Ridgeway J.M. | 381 | 66 | 44 | 110 |
| Ridgeway I. | 195 | 31 | 37 | 68 |
| Rockmount J.M. | 339 | 49 | 47 | 96 |
| Rockmount I. | 516 | 53 | 46 | 99 |
| Roke J.M. & I. | 516 | 97 | 69 | 166 |
| Rowdown J.M. | 472 | 68 | 72 | 140 |
| Rowdown I. | 405 | 78 | 83 | 161 |
| Ryelands I. | 147 | 29 | 32 | 61 |
| St. John's (C. of E.) J.M. & I. | 287 | 35 | 53 | 88 |
| St. Joseph's (R.C.) J.M. & I. | 477 | 102 | 61 | 163 |
| St. Mark's (C. of E.) J.M. & I. | 243 | 25 | 45 | 70 |
| St. Mary's (R.C.) J.M. | 368 | 41 | 52 | 93 |
| St. Mary's (R.C.) I. | 216 | 33 | 50 | 83 |
| St. Michael's (C. of E.) I. | 82 | 22 | 16 | 38 |
| St. Peter's J.M. & I. | 234 | 50 | 37 | 87 |
| Selsdon J.M. & I. | 607 | 67 | 80 | 147 |
| Smitham J.M. & I. | 481 | 64 | 84 | 148 |
| South Norwood J.M. | 509 | 77 | 65 | 142 |
| South Norwood I. | 369 | 70 | 69 | 139 |
| Spring Park J.M. | 471 | 54 | 37 | 91 |
| Spring Park I. | 319 | 67 | 86 | 153 |
| Sydenham J.M. | 304 | 27 | 30 | 57 |
| Thomas Becket J.M. & I. | 309 | 43 | 59 | 102 |
| Toldene J.M. & I. | 249 | 34 | 30 | 64 |
| Waddon I. | 284 | 44 | 54 | 98 |
| Wattenden J.M. & I | 216 | 33 | 27 | 60 |
| West Thornton J.M. & I. | 456 | 57 | 66 | 123 |
| Whitehorse Manor J.M. | 538 | 68 | 70 | 138 |
| Whitehorse Manor I. | 358 | 57 | 60 | 117 |
| Winterbourne J. Boys | 448 | 115 | - | 115 |
| Winterbourne J. Girls | 473 | - | 113 | 113 |
| Winterbourne I. | 508 | 63 | 51 | 114 |
| Wolsey J.M. | 564 | 64 | 47 | 111 |
| Wolsey I. | 404 | 80 | 76 | 156 |
| Woodcote J.M. | 385 | 39 | 65 | 104 |
| Woodcote I. | 256 | 47 | 41 | 88 |
| Woodside J.M. | 629 | 101 | 99 | 200 |
| Woodside I. | 311 | 61 | 55 | 116 |
| TOTAL | 34,757 | 5,514 | 5,379 | 10,893 |
| SPECIAL SCHOOLS | | | | |
| Coldharbour (E.S.N.) Mixed | 100 | 28 | 28 | 56 |
| St. Christopher's (E.S.N.) Mixed | 230 | 54 | 34 | 88 |
| St. Giles (P.H. & Del.) Mixed | 151 | 92 | 59 | 151 |
| St. Luke's (Partially Sighted) Mixed | 19 | 8 | 2 | 10 |
| St. Nicholas (E.S.N.) Mixed | 178 | 30 | 22 | 52 |
| Sir Cyril Burt (Maladjusted) Mixed | 52 | 14 | 6 | 20 |
| TOTAL | 730 | 226 | 151 | 377 |
| NURSERY SCHOOLS | | | | |
| Coulsdon | 48 | 21 | 14 | 35 |
| Crosfield | 49 | 14 | 18 | 32 |
| Purley | 58 | 21 | 21 | 42 |
| Tunstall | 112 | 13 | 14 | 27 |
| TOTAL | 267 | 69 | 67 | 136 |

| Secondary Schools | Numbers on Registers | No. of Children Examined | | |
|-------------------------------------|----------------------|--------------------------|--------------|--------------|
| | | Boys | Girls | Total |
| Archbishop Tenison (C. of E.) Mixed | 360 | 29 | 68 | 97 |
| Ashburton Mixed | 1,243 | 249 | 234 | 483 |
| Coloma (R.C.) Girls | 633 | - | 184 | 184 |
| Davidson Mixed | 455 | 88 | 51 | 139 |
| Ecclesbourne Girls | 412 | - | 127 | 127 |
| Fairchildes Mixed | 1,100 | 273 | 238 | 511 |
| Haling Manor Mixed | 990 | 199 | 97 | 296 |
| Heath Clark Mixed | 870 | 137 | 87 | 224 |
| Ingram Boys | 521 | 189 | - | 189 |
| John Newnham Mixed | 567 | 151 | 155 | 306 |
| John Ruskin Mixed | 634 | 162 | - | 162 |
| Lady Edridge Girls | 660 | - | 141 | 141 |
| Lanfranc Mixed | 1,074 | 242 | 201 | 443 |
| Monks Hill Mixed | 809 | 162 | 154 | 316 |
| Norbury Manor Boys | 458 | 162 | - | 162 |
| Norbury Manor Girls | 473 | - | 163 | 163 |
| Our Lady's (R.C.) Girls | 155 | - | 69 | 69 |
| Overbury Mixed | 667 | 76 | 74 | 150 |
| Purley Boys | 697 | 201 | - | 201 |
| Purley Girls | 659 | - | 207 | 207 |
| Riddlesdown Mixed | 1,055 | 267 | 182 | 449 |
| St. Andrew's (C. of E.) Mixed | 272 | 47 | 46 | 93 |
| St. Mary's (R.C.) Mixed | 601 | 93 | 81 | 174 |
| Selhurst Boys | 743 | 222 | - | 222 |
| Selhurst Girls | 626 | - | 112 | 112 |
| Shirley Mixed | 623 | 143 | 148 | 291 |
| South Norwood Mixed | 467 | - | - | - |
| Stanley Technical Boys | 394 | 196 | - | 196 |
| Taunton Manor Mixed | 660 | 106 | 142 | 248 |
| Tavistock Mixed | 436 | 76 | 71 | 147 |
| Thomas More (R.C.) Mixed | 570 | 145 | 100 | 245 |
| Westwood Girls | 407 | - | 152 | 152 |
| Woodcote Mixed | 731 | 135 | 139 | 274 |
| TOTAL | 21,022 | 3,750 | 3,423 | 7,173 |

CASES OF INFECTIOUS DISEASES AS NOTIFIED BY HEAD TEACHERS

| <i>Disease</i> | 1972 | 1971 | 1970 |
|--|-------|-------|-------|
| Chicken Pox | 301 | 684 | 579 |
| Conjunctivitis | 3 | 12 | 27 |
| Diphtheria | - | - | - |
| Gastro-Enteritis | - | 3 | 22 |
| German Measles | 273 | 368 | 267 |
| Impetigo | 32 | 30 | 34 |
| Jaundice | - | 1 | 2 |
| Measles | 194 | 310 | 388 |
| Mumps | 887 | 47 | 878 |
| Non-Specific Diarrhoea including Dysentery | 291 | 247 | 325 |
| Non-Specific Vomiting | 107 | 74 | 10 |
| Other Diseases | 170 | 47 | 342 |
| Poliomyelitis | - | - | - |
| Ringworm or Vermin | 7 | 2 | 3 |
| | - | - | - |
| Scabies | 4 | 14 | 10 |
| Scarlet Fever | 84 | 66 | 78 |
| Sore Throat including Tonsillitis | 70 | 72 | 111 |
| Whooping Cough | 30 | 50 | 55 |
| <i>TOTALS</i> | 2,453 | 2,027 | 3,131 |

WORK OF THE SCHOOL HEALTH VISITORS AND NURSES

| | 1972 | 1971 | |
|----------------------------------|-------|-------|----------|
| Home Visits re pupils | 3,286 | 3,665 | visits |
| Social Welfare visits to Schools | 576 | 451 | " |
| Minor Ailments | 1,413 | 1,330 | sessions |
| Hygiene | 833 | 822 | " |
| Pre-Medicals | 1,224 | 1,290 | " |
| Routine Medical Inspections | 1,303 | 1,304 | " |
| Follow-up | 31 | 39 | " |
| Immunisation | 96 | 137 | " |
| Health Survey | 168 | 119 | " |
| Health Education | 272 | 578 | " |
| Enuresis Clinics | 90 | 87 | " |
| Eye Clinics | 165 | 115 | " |
| Inspection Clinics | 80 | 89 | " |

CONTENTS

A. — PUBLIC HEALTH REPORT

| | <i>Page</i> | | <i>Page</i> |
|--|--------------|---|-------------|
| Accommodation for confinements | 12 | Ice-cream - bacteriological examination of | 59 |
| Animals Boarding Establishments Act | 53 | Illegitimacy | 11 |
| Animals, diseases of | 44 | Immigrants, longstay | 76, 107 |
| Ante-natal clinics | 21 | Immunisation | 17, 121 |
| At risk register | 98 | Infant mortality | 11, 88, 89 |
| Bacteriological examination | 58, 120 | Inspection - public health inspectors | 46, 62 |
| Births | 11, 12 | Local land charges | 43 |
| Caravan sites | 45 | Lectures, public health inspectors | 44 |
| Cancer | 87 | Marriages | 12 |
| Census | 11 | Maternal mortality | 11, 92 |
| Cervical cytology | 115 | Maternity homes | 116 |
| Chest clinic, work of | 15 | Meat inspection | 57 |
| Child health centres | 22, 102 | Medical examinations | 77 |
| Chiropody | 31 | Midwifery... .. | 24 |
| Clean Air Act | 41 | Midwives Act | 21 |
| Committee, Health and Public Services | 3 | Midwives, work of | 90, 91 |
| Common lodging houses | 39 | Milk supply | 58 |
| Communicable diseases | 17, 117, 118 | Mines and Quarries Act, 1954 | 45 |
| Community nursing services | 23 | Mortuary | 116 |
| Congenital malformations | 21, 97 | Mothercraft classes | 21 |
| Consumer Protection Act | 52 | Measles, vaccination | 121, 122 |
| Cremation | 116 | National Assistance Acts | 76 |
| Deafness | 31, 99 | Neonatal deaths | 11 |
| Deaths | 11, 84 | Noise abatement | 41 |
| Dental treatment | 6, 30, 113 | Notification of Births Acts | 11, 12 |
| Dialysis, home | 76 | Nursing equipment, loan of | 108 |
| Disinfection | 43 | Nursing homes | 116 |
| Disinfestation of premises | 44 | Nurses agencies | 116 |
| Domiciliary nursing team | 6 | Offices, Shops and Railway Premises Act | 48, 51, 64 |
| Drainage | 39 | Outwork | 48 |
| Drug dependency | 78 | Paediatric assessment | 21 |
| Elderly persons, rehabilitation of | 106 | Perinatal deaths | 11, 88 |
| Employment agencies | 51 | Pest control | 40 |
| Environmental hygiene | 6 | Pet Animals Act | 54 |
| Fabrics (Misdescription) Act, 1913 | 53 | Phenylketonuria | 91 |
| Factories and workshops | 47 | Pharmacy and Poisons Act | 54 |
| Family planning | 6, 75, 114 | Planning applications | 43 |
| Food complaints | 62 | Poliomyelitis, vaccination | 122 |
| Food and Drugs Act, 1955 | 56, 59 | Population | 11 |
| Food hygiene regulations, 1960 | 55 | Post-natal clinics | 21 |
| Food poisoning | 119 | Post-mortems | 116 |
| Foodstuffs, condemned | 57 | Premature infants | 96 |
| Food supply | 55 | Prosecutions | 49, 51, 61 |
| General practitioner attachment schemes | 106 | Public health inspectors, work of | 35 |
| Hairdressing | 52 | Public health laboratory, service | 17, 120 |
| Health centres | 6, 22 | Public health nursing service | 23 |
| Health education | 6, 26, 43 | Rag Flock Act | 54 |
| Health visitors, work of | 24, 100, 101 | Rats and mice (destruction) act | 39 |
| Hearing tests | 99 | Rehousing on medical grounds | 76 |
| Home dialysis | 76 | Relaxation classes | 21 |
| Home nursing | 24, 105 | Remedial works carried out | 50 |
| Home safety | 27, 109, 110 | Riding Establishment Act, 1964 | 54 |
| Housing | 37 | | |
| Health Services co-ordination | 7, 23 | | |

| | <i>Page</i> | | <i>Page</i> |
|-----------------------------------|-------------|--|-------------|
| Rivers and streams, pollution of | 40 | Tuberculosis, notifications ... | 15, 123 |
| Rubella, vaccination | 121 | " prevention and control | 15 |
| Schools | 57 | " vaccination | 16, 17 |
| Scrap Metal Dealers Act, 1964 | 54 | Vaccinations (smallpox, cholera, T.A.B.) | 121, 122 |
| Sexually transmitted diseases ... | 18, 126 | Verminous persons, cleaning of | 44 |
| Sewage Disposal | 71 | Vital statistics... .. | 11, 83, 84 |
| Shops act | 51 | Water supply | 71 |
| Statistics, summary of | 11, 83 | Welfare foods | 22, 97 |
| Stillbirths | 11 | X-ray | 16 |
| Tuberculosis, contacts | 16 | | |
| " home visits | 16 | | |
| " mortality | 16, 123 | | |

B. — SCHOOL MEDICAL REPORT

| | <i>Page</i> | | <i>Page</i> |
|---------------------------------|--------------|--------------------------------|---------------|
| Audiology | 12, 14, 51 | Non-maintained schools | 8, 55 |
| Child Guidance | 2, 15, 40 | Nutrition | 13, 26 |
| Cleansing of Pupils | 2, 8, 47 | Orthodontic Service | 17, 52 |
| Clinics | 5, 50 | Orthopaedic defects | 12, 24 |
| Coldharbour School | 39 | Overweight pupils | 13, 26 |
| Convalescent treatment | 26 | Parents, attendances of | 8 |
| Costs | 6, 27 | Partially Hearing Units | 32 |
| Deaf children | 14, 32 | Physiotherapy | 24, 54 |
| Deaths | 28 | Populations of schools | 46, 56 |
| Defects found | 8, 9, 48 | Psychological defects | 13, 15, 40 |
| Delicate children | 30, 42, 44 | School nurses, work of | 59 |
| Dental services | 17, 52 | Special inspections | 7, 47, 48 |
| Developmental defects | 12 | Speech | 25, 43, 54 |
| Enuresis clinics | 20 | Staff | 6 |
| Epileptic children | 30, 39 | Statutory tables | 46 |
| Eye clinics | 11, 20, 53 | Sub-normal pupils | 35 |
| Handicapped pupils | 29 | Sir Cyril Burt School | 40 |
| Health Education | 2, 21 | St. Christopher School | 36 |
| Heart and circulation | 12 | St. Giles School | 42 |
| Heights and weights | 13, 26 | St. Luke School | 31 |
| Home tuition | 44 | St. Nicholas School | 37 |
| Immigrant pupils | 44 | Transport of pupils | 26 |
| Infectious diseases | 3, 59 | Tuberculosis | 12 |
| Intelligence assessments | 23 | Uncleanliness | 2, 8, 47 |
| Juvenile employment | 27 | Verrucae | 11, 54 |
| Maladjusted pupils | 2, 15, 40 | Vision Defects | 2, 11, 20, 53 |
| Meals and milk | 27 | | |
| Medical inspections | 1, 7, 46, 55 | | |
| Minor ailments tables | 53, 54 | | |

