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

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1956

ANNUAL REPORT

OF THE

Medical Officer of Health

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School Medical Officer



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INDEX	ETH, EVERS
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Section 1 - INFECTIOUS DISEASES	Taling blos C.W.S
	A.E. Pooley
Section 2 SANITARY CIRCUMSTANCES OF	
Section 3 SANITARY INSPECTION	anionus 3.A 26 podrabna .u.d
Section 4. GENERAL	anobpec 39 P
	other and the same and
Section 5 - STATISTICAL TABLES	116718 4 46
Section 6 - APPENDIX : REPORT OF THE SE	
MEDICAL OFFICER	
Supplement FOR GENERAL INFORMATION	62
	Mrs. M. G. Syrord
	Wrs. D. Barker
	Mas Schwood 1
	R. M. Newbory

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A.E. Pooley	Section 1 - , WELLIOUS DISSESSE
G.O. Axon Resigned 7.7.56	Section 2 Current Cracerate
A.C. Bamping " 31.1.50	3 " " "
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Mr. Mayor, Aldermen and Councillors,

In presenting my Annual Report for the year 1956 I would like to draw attention to certain items of special interest.

It will be remembered that during the Autumn of 1956 an outbreak of Poliomyelitis occurred and one school was particularly affected. In looking back on the outbreak we were fortunate to have had such a mild type of infection and no deaths occurred as a result of the outbreak. It is also of interest that whilst the location was around one school a number of individual cases occurred at other schools at about the same time, nevertheless the total number of poliomyelitis cases were in fact less in 1956 than they were in 1955. We cannot therefore consider 1956 as a poliomyelitis epidemic year as far as Ealing is concerned.

The new developments with Poliomyelitis vaccine have now proved themselves and there is every reason to look forward hopefully to the elimination of this illness from the population. It is pleasant to know that the enterprise of a firm in the Borough of Ealing is largely responsible for the British made vaccine which is playing such a large part in the present campaign for immunisation against Poliomyelitis.

Progress is steadily being made in our Clean Food work and a statement on the present position is in the body of this Report. It has been a matter of considerable encouragement to us to find that the Clean Food film strip, prepared by our own Health Department, has had such a wide distribution throughout the World and has shown some profit to the Borough Council. It was always anticipated that persistent and patient propaganda and education were the strongest factors in any campaign for Clean Food and our policy has been directed to that end.

Whilst Ealing has, in the main, been extremely fortunate in having so few atmospheric pollution problems to deal with, heavy industry has been established in a few places for very many years. This has led to certain difficult problems which were born out of an absence, a generation ago, of Town Planning powers. The Health Committee and your officers are well aware of the need for close vigilence in any atmospheric pollution problems and much work has been done during the past year to maintain the

good record that Ealing has had for many years in this direction.

The lack of County Borough powers is the greatest handicap to the efficient working of public health services. The responsibility for services being divided between the County Medical Officer, Area Medical Officer and the Borough Medical Officer of Health can never evolve a satisfactory functioning. As Medical Officer of Health I have no hesitation in deploring the present position which in my view is wasteful and inefficient.

May I take this opportunity of expressing appreciation of the support and assistance given at all times by the Chairman and of the conscientious care given by the officers to their duties during the year. These two factors have made the work of the department of great interest and most satisfying in its execution.

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Your obedient servant,

W. G. BOOTH,

Medical Officer of Health.

SECTION 1

INFECTIOUS DISEASES

CONTROL

NOTIFICATION

Notification is the essential preliminary to control of infectious disease and as more and more has become known about each transmissible infectious disease so has it been made notifiable.

The diseases notifiable under the Public Health Act, 1936, are smallpox, cholera, diphtheria, membraneous croup, erysipelas, scarlet fever, typhus, typhoid, enteric and relapsing fever.

The Minister of Health has also made regulations whereby the following diseases are also notifiable; plague, poliomyelitis, tuberculosis, puerperal pyrexia, ophthalmia neonatorum, malaria, dysentery, acute primary pneumonia, acute influenzal pneumonia, measles, whooping cough, acute encephalitis and meningococcal infection.

Food Poisoning is notifiable under the provisions of the Food and Drugs Act of 1955.

EARLY DIAGNOSIS.

Since these diseases are as a rule most infective in the early stages the importance of early diagnosis in the prevention of spread of disease cannot be over emphasised. It is important therefore that parents should be able to recognise the early signs of the common infectious diseases.

As part of the health education campaign, topical leaflets are distributed through the Town Hall and the Public Libraries when any infectious disease is prevalent.

Leaflets describing the essential points of home nursing of persons suffering from infections, and advice as to disinfection are provided when necessary.

LABORATORY SERVICE.

The laboratory at King Edward Memorial Hospital continues its fine and invaluable work in the diagnosis and prevention of infectious disease. The Public Health Department will arrange for the collection of specimens, e.g. faeces and samples of suspected food or vomited material, and for transmission to the King Edward Memorial Hospital laboratory at the request of a general practitioner.

PREVALENCE.

1.612 cases of Infectious Disease were notified in the Borough during the year. Of these 23 were proved not to have suffered from the disease for which they were originally notified reducing the corrected number of cases of Infectious Disease during the year to 1.589.

This substantial decrease in the number of notifications was to be expected and is in complete accordance with the pattern of measles which does show invariably a biennial decrease.

CERTIFICATION

When contacts of infectious persons are excluded from work on account of potential risk to others, a certificate is provided to ensure the payment of benefits under the National Insurance Act.

DISINFECTION.

Books which have been handled by infectious persons are stored in a formalin box for three weeks before being returned to a library.

DIPHTHERIA

No cases were notified in 1956.

The total number of primary immunisations given at clinics and by General Practitioners was 2,029 and the number of booster doses was 2,636. As the number of live births for the year was 2,513 it can be calculated that the proportion of children in the first year of life who received primary immunisation was 80%. It will be remembered that to obtain a satisfactory state of immunity 70% to 75% of children in the first year of life should be immunised. Our percentage for the year therefore is satisfactory.

Although this figure is within satisfactory limits there should be no easing off in immunisation because it is the experience all over the country that as cases of Diphtheria become fewer and fewer so in the minds of parents there is a tendency to regard the need for immunisation as less and less urgent and so a diminishing number of children each year is presented at the clinic for this purpose. It should not be forgotten that the dramatic fall in the number of Diphtheria cases is due mainly to immunisation against the disease and if the level of

immunisation falls too low the disease could regain its former virulence and killing power.

The following interesting information has been revealed following Ministry of Health Surveys.

"In 1954 there were 166 confirmed cases of Diphtheria. One hundred of the 160 cases about which information was available, were under 16 years. Of these 60 had never been immunised and there were 6 deaths among them. Forty had been immunised and there was no death".

DYSENTERY. Description to be believed by the best and best best best by the best best best by the best

179 cases were notified, an increase of 54 compared with the year before.

The majority of cases were of a mild character which rapidly cleared up.

S. Sonnei usually causes a very mild form of the disease, the symptoms being often of so mild a character that they are completely ignored. This is, however a highly dangerous state of affairs as fatalities can occur in the young, the aged and the debilitated and good personal and environmental hygiene should be continually emphasised, in particular hand washing immediately after a visit to the toilet.

ENTERIC FEVER

No cases occurred during the year

ENTERIC FEVER CARRIER

As mentioned in previous reports the same Paratyphoid B carrier was kept under surveillance and routine three monthly faeces examinations carried out. These showed that she continued to be a carrier. She is acutely aware of her handicap and is scrupulous in taking all possible precautions.

ERYSIPELAS.

The same number of cases was notified as in 1955, 12.

FOOD POISONING.

There were 26 notifications received, a decrease of 10 over the previous year. In 16 of the 26 cases laboratory diagnosis was confirmed. 14 were Salmonella Typhimurium and 2 Salmonella Enteritidis.

This further decrease is again highly creditable to the Borough of Ealing but it should be remembered that Food Poisoning is essentially preventible and I feel that the suggestions I made in a previous report for the production of safe food cannot be repeated too often.

Food handlers should realise fully their responsibility and should have a high standard of personal hygiene. Their hands should be in a good condition and clean, their finger nails should be short, clean overalls should be worn and hair covered with a cap. Minor illnesses should be reported. Cuts should be treated and covered. Colds, running ears or diarrhoeal illnesses should be "stood off" or watched carefully.

Firms should provide adequate facilities for their employees for washing their hands. The importance of this especially after use of the toilet, should be emphasised and notices to this effect displayed in lavatories.

Staff should be selected with care and those with a history of enteric or any such illness should not be chosen.

With regard to the technique of the kitchen, manual handling of food should be avoided wherever possible. Refrigeration is a keynote and wrappings and covers for food on display are essential.

Reconstituted eggs, custard powders and so on should not be kept in a warm place. The kitchen should be constructed so that it is easily cleaned, ventilation and lighting should be adequate and there should also be adequate storage space.

The necessity for the above precautions has been fully realised in the Borough and the steps taken by the Chief Public Health Inspector and his staff to achieve the desired effect are mentioned in a later part of this report.

MEASLES.

The biennial decrease previously mentioned occurred in 1956 when 726 cases were notified compared with 2,422 in 1955.

MENINGOCOCCAL INFECTION.

Two notifications were received and upon inspection no overcrowding was found.

OPHTHALMIA NEONATORUM

Two cases occurred in hospital and one in private practice. All three cleared up after treatment and the eyes were not damaged.

PNEUMONIA.

161 notifications were received, again showing a decrease over the previous year.

There were 124 deaths, 57 males and 67 females.

POLIOMYELITIS.

There were 48 confirmed cases, 27 paralytic and 21 non-paralytic.

In spite of the outbreak in the North Ealing area this is a decrease of 10 against the previous year when there were 58 confirmed cases, 20 paralytic and 38 non-paralytic.

Last year's cases occurred in the following age groups: -

	Para	lytic	Non-Pa:	ralytic
	M.	F.	SOUTH LONG	F
Under 1 year	mor (Bea.	1		adir to a
ed it proved "impo	roluze:	1	Leo I Shave	1
orits means of s	00 (309)	The se	THE ROLL	No Stern
and I and I and	2 -	aver2	bill para	Front to
#17 Leymollod	2	1	a ballittor	1
5 - 9 years	8	6	5 .	5
10 - 14 years	not ol	Shriket &	7	2
15 - 24 years	1 3	Hs this	FR60 -81	Jen Tod
45 and over	2	WILLIAM S	Tigage 1	o elest
dernadda edd fo	16	11	12	9
	SPACE IS SEE	150 (100 (100 (100))	NAME OF TAXABLE PARTY.	-

There were no deaths.

The outbreak in the North Ealing area caused considerable anxiety among parents in the Borough and many and varied enquiries concerning this disease were received and dealt with by the Public Health Department. A large number of Head Teachers also sought advice and it was considered advisable to send to every school a printed list of instructions concerning the general precautions to be taken during the summer months when poliomyelitis is prevalent.

The first case was notified on 5th October and from that date until the 10th December there were 43 notifica-

tions of which 38 were confirmed, 22 paralytic and 16 non-paralytic. The first 32 cases had dates of onset varying from 14th September to 4th November and were mainly confined to the North Ealing area but it was interesting to note that the subsequent notifications had a much wider distribution and that they included the five unconfirmed cases. Of the remaining six confirmed cases in this group only one occurred in the North Ealing area. The ages of cases varied from 28 years to 4 weeks.

Ten schools in all were eventually involved but the North Ealing School was hardest hit, there being 13 cases, 6 paralytic and 7 non-paralytic. The age groups affected were as follows:

Age	5	and	under	4
27	7	. 92	n	4
17	8	22	22 0 10 10 10 10 10 10 10 10 10 10 10 10 1	1
99	9	"	11	2
18. 1	11	22	Participation and	2

By thorough investigation of the outbreak it was hoped that something could be added to the existing scanty knowledge of the epidemiology of poliomyelitis but though all avenues of investigation were explored it proved impossible to pinpoint the source of infection or its means of spread. These enquiries did, however, reveal that in five cases originally notified as non-paralytic poliomyelitis, laboratory investigations succeeded in isolating not a virus of poliomyelitis but a virus related to ECHO Virus Type 9. In the last 18 months, this organism has been found in outbreaks of aseptic meningitis in several parts of the country. The condition has many of the appearances of poliomyelitis but paralysis is absent and recovery occurs within a week.

The methods used in investigation and control of poliomyelitis epidemics are as follows:-

METHODS OF CONTROL,

Control of the infected individual, contact and environment.

- (i) All cases are notified to the Medical Officer of Health.
- (ii) All suspected cases are isolated, usually in hospital, for three weeks.

- (iii) Disinfection of throat discharges, faeces and soiled articles is carried out in hospital.
 - (iv) Quarantine is of unproved value. While quarantine of family contacts is theoretically worthwhile there is no evidence of practical benefit because of the large number of unrecognised infections in the community.
- (v) Investigation There is a thorough search for sick persons, especially children, to locate unrecognised and unreported cases.
 - (vi) Treatment There is no specific treatment other than attention to prevention and management of paralysis.

EPIDEMIC MEASURES.

- (i) Notice to general practitioners of increased incidence of the disease.
- (ii) Isolation in bed of all children with fever, pending diagnosis.
- (iii) Education of the public in personal hygiene in order to prevent spread of the disease through transmission of infectious discharges.
- (iv) Protection of children so far as practicable against unnecessary close contact with other persons especially with other family groups or outsiders during epidemic prevalence of the disease.

 Urban schools should not be closed or opening delayed but intensive or competitive athletic programmes should be postponed.
 - (v) Postponement of nose or throat operations where practicable.
 - (vi) Avoidance by children of excessive physical strain.
 - (vii) Postponement of inoculation against diphtheria, whooping cough, etc.
 - (viii) Avoidance of unnecessary travel and visiting.

VACCINATION AGAINST POLIOMYELITIS.

In May vaccination against Poliomyelitis was begun. For some time previously Salk vaccine had been used in America and over 11,000,000 children were vaccinated. When the vaccine was first introduced in the United States some children suffered ill effects but the cause of this was found and rectified.

The vaccine used in this country varies slightly from the American and has been subjected to the most stringent tests. Two injections at a month's interval are given into the upper arm. The protection against paralytic poliomyelitis is not claimed to be complete but it is considered that protected children are 4 to 5 times less likely to suffer in this way than unprotected children. Unfortunately supplies allocated to us by the Ministry of Health are very limited and the position in Ealing by the end of the year is summarised below.

1947 1948 1,233 43 87 91	ren by 56.
101	
1948 1, 233 43	
1949 1, 150 43 71	
1950 1,028 41 68	
1051 645 27 134	
1052 449 19 96	
1952 1953 1954 1954 18 95 45	
1954 285 12 45	
6,631 31 687	e incl

There have been no ill effects amongst Ealing children attributable to the vaccination. One protected child who later became a poliomyelitis suspect was subsequently found to be suffering not from poliomyelitis but an infection with a virus related to ECHO virus type 9 as described above.

It is hoped that during 1957 we shall be in a position to offer vaccination to many more children whose parents wish to avail themselves of this latest advance in preventive medicine.

PUERPERAL PYREXIA.

There were 71 cases, 4 of which occurred in home confinements and the remainder in hospital confinements.

SCARLET FEVER.

There was a slight increase in the number of notifications, 156 against 118 in 1955. They were again of a very mild character.

TUBERCULOSIS.

As the following table shows the number of Pulmonary cases notified was 73 males and 61 females, compared with



(Reproduced by kind permission of "Middlesex County Times")

68 males and 51 females in 1955. Non-pulmonary cases notified decreased from 10 males and 14 females in 1955 to 8 males and 5 females in 1956.

There were 21 pulmonary deaths compared with 17 in 1955, and 1 non-pulmonary death against 3 in 1955.

WHOOPING COUGH.

67 cases were notified, a decrease from 156 in 1955.

TUBERCULOSIS

														-070								-		
											(0,0)	New (Cases						9					4
Age		Pulmonary									Non-Pulmonary													
Periods	19	51	19	52	19	53	19	54	19	55	19	56	19	51	19	5,2	19	53	19	54	19	55	19	956
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F
Under 5 5 - 14 15 - 24 25 - 44 45 - 64 Over 65	5 -24 46 39 8	4 4 26 37 17	5 5 13 46 32 9	2 6 44 37 10 2	5 7 15 30 39 7	2 4 38 43 9 6	3 1 13 23 23 23 3	1 2 24 26 11 2	1 16 21 23 6	1 14 26 7 3	2 2 14 22 29 4	1 5 21 21 9 4	1 2 6 3 -	1 1 4 3 3 3 -	- 4 2 5 1 -	4 1 4 5 3	1 2 4 1	2 1 4 4 1	2 - 1 1 1 1 -	2 2 4 3 1	1 2 2 2 1 2	4 3 4 2 1	1 - 2 1 4 -	is to thuste
Total	122	. 88	110	101	103	102	66	66	68	51	73	61	12	12	12	17	8	12	5	12	10	14	8	

												Dea	ths									9 5	8	5
Amo	Pulmonary									Non-Pulmonary														
Age Periods	1951		1952		1953		1954		1955		1956		1951		1952		1953		1954		1955		1956	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Under 5 5 - 14 15 - 24 25 - 44 45 - 64 Over 65	1 - 2 2 8 5	- 2 9 1	- 6 4 7 7	5 4 3 1	- - 4 9 5	- - 4 3 3	3 5 4	2 3 2	3 5 6	1 1 1	1 1 11 5	- - 2 2	1 1 1	1	1 1	1	11111	1	11,1111	1	1 1 1	17111777	1	
Total	18	12	24	13	18	10	12	7	14	3	17	4	3	1	2	1	-	1		1	3	-	1	6-

SECTION 2

SANITARY CIRCUMSTANCES OF THE BOROUGH

WATER

There are three sources of supply in the Borough. The Northolt, Greenford North, Greenford Central and Greenford South Wards, most of Perivale Ward and part of Hanger Hill Ward are supplied by the Rickmansworth and Uxbridge Valley Water Company with the exception of four roads (in part) in the Perivale Ward and one road (in part) in the Hanger Hill Ward which are served by the Colne Valley Water Company. The remainder of the Borough is supplied by the Metropolitan Water Board. These supplies are not subject to plumbo solvent action and have been satisfactory both in quantity and quality. Water from public mains is supplied to 53,318 houses with an estimated population of 184,200.

Fifteen samples were taken from wells at five factories in the Borough using water from deep borings ranging in depth from 300 to 600 feet. Two of the samples taken from the same point were found to be unsatisfactory for drinking purposes, but after the storage tank concerned had been thoroughly cleansed a further sample proved to be satisfactory. The analysis of the remainder of the samples showed that the supplies were wholesome in character.

DRAINAGE AND SEWERAGE:

One cesspool was discontinued during the year leaving 22 premises not connected to the Council's sewers. Negotiations are at present proceeding for a further cesspool to be abolished and the house connected to the Council's sewerage system.

RIVERS AND STREAMS.

Staff shortages have again handicapped the work of tracing sources of pollution of the River Brent but with staff now up to establishment it is hoped to resume this important work.

Of 19 samples taken during the year by the County Engineers Department of the Middlesex County Council, from sewer outfalls into the River Brent, 7 were found to be unsatisfactory. Investigations were carried out and drainage defects in 16 houses and 1 factory were remedied after notice by the Public Health Inspectors.

ATMOSPHERIC POLLUTION.

During the year further complaints were received from the Birkbeck Residents' Association on behalf of residents in the Long Drive Area, regarding the alleged nuisances from fumes, dust and smoke, stated to be emitted from a heavy industrial factory in this area. Complaints were investigated and full reports of the circumstances were presented at regular intervals throughout the year to the Public Health Committee. In an effort to discover whether any further steps could be taken by the factory in question to improve matters the Council appointed a recommended firm of consulting chemical engineers to inspect the processes at the factory and to submit a report to the Council, Prior approval to this course had already been obtained from the Company concerned. A comprehensive report was received and copies were circulated to every member of the Council. The report was of assistance to the Council in so far as the specific complaints were dealt with in detail, the processes described and the steps which the firm were proposing to take to still further improve their works technique were outlined. Subsequent to this report a meeting took place in the autumn between the Public Health Committee, representatives of the Company and representatives of the Birkbeck Residents' Association.

For a period of sixteen months from the 1st February, 1955 to the 2nd July, 1956, an atmospheric deposit gauge and a lead peroxide instrument were sited in close proximity to the factory and the following tables give the average deposits over this period:

Deposited mat as tons per per	square mile	Sulphur comports peroxide methods as milligrated by of Batch	od expressed ms SO ₃ /day 100 sq. cm.			
August for 16	142 Hill Rise	Average for 16	142 Hill Rise			
Average for 16 months 1.2.55 - 2.7.56. (Ranging from	19.86 7.18 to 46.02)	Average for 16 months 1.2.55 - 2.7.56. (Ranging from	0.83 0.35 to 1.62)			

Over the past four years, the Company concerned have adopted a new technique on the advice of the Alkali Inspector to reduce the emission into the atmosphere of fluorine which was suspected of being a cause of damage to vegetation. They have also had expert advice on the efficient



Deposit Gauge and Lead Peroxide Instrument at Longfield Avenue Depot

working of their oil burning muffle furnaces and have carried out certain modifications to reduce the emission of smoke into the atmosphere other modifications are, I understand being considered. Also grit arrestors have been fitted to the cupola stacks in the foundry. At the present time works are in progress which should be completed during 1957 on the construction of entirely new types of cupola stacks which are stated to incorporate much improved grit arresting appliances.

It would appear that many of the difficulties experienced in this area by residents can be attributed to the absence of effective Town Planning legislation in the past which allowed the siting of residential properties in close proximity to a factory which is carrying out heavy industrial processes.

Towards the end of the year the Council obtained the advice of the Department of Scientific and Industrial Research as to the siting of the atmospheric deposit gauge and acting on this advice the Council authorised one deposit gauge and a lead peroxide instrument to be erected in the Greenford Green area and one deposit gauge and a lead peroxide instrument in the neighbourhood of the Town Hall Ealing. These were placed in position in November, 1956 and the readings for November and December were as follows:

Deposite as tons	d matter e	re mile	Sulphur compounds by lead peroxide method expressed as milligrams SO ₃ /day collected by 100 Sq. cm. of Batch A PbO ₂								
	Longfield Depot	Greenford Green	s increas	Longfield Depot	Greenford Green						
Nov. 1956 Dec. 1956	10.00 17.92	5, 27 12, 08	Nov. 1956 Dec. 1956	1.10	1.22 1.66						

The Clean Air Act, 1956, came into operation on the 31st December, 1956, and I hope to be in a position to include information on the administration of this Act in Ealing in my next year's report.

During the year 185 smoke observations were made on industrial premises in the Borough and in 3 cases it was necessary for the Inspector to make representations to the factories concerned regarding the emission of smoke. In each case the necessary work was carried out and the nuisances were satisfactorily abated.

FOOD HYGIENE

The Food Hygiene Regulations; 1955, came into force on the 1st January 1956, but some of the provisions relating to certain structural alterations were not operative until the 1st July, 1956. In order to give those engaged in the food trades a better understanding of these Regulations a summary was sent to every food trader in the Borough and talks were given to members of the various food trades. Altogether 13 talks were given which were attended by the managers and proprietors of 402 food businesses. Also discussions were held at a special meeting of the Ealing and District Grocers Association and at a meeting of the Greenford Chamber of Trade. I am of the opinion that these explanatory talks on the Regulations served a very useful purpose and in many cases encouraged proprietors of food businesses to carry out the necessary works and improvements required without waiting for a visit from the Public Health Inspectors.

The work of inspecting food premises was handicapped by a shortage of Inspectors for a considerable period of the year, but, nevertheless, 2,062 inspections of food premises were made and 452 repairs and improvements were carried out.

During the year 36 lectures were given to food handlers of whom 123 received Certificates of Attendance upon completing the course. Since the scheme commenced 422 lectures have been given and 1,680 persons have received Certificates of Attendance.

The number of Certificates of Food Hygiene awarded to food establishments increased during the year to 56; two new Certificates being issued.

Twenty-three talks on Food Hygiene were given by the Public Health Inspectors to approximately 920 school-leavers in the Grammar and Secondary Modern Schools in the Borough.

The demand for the film strip on Food Infections made by the Council still continues and a further ten copies were sold during the year.

BATHS AND SWIMMING POOLS.

The Council's Swimming Baths in Longfield Avenue are equipped with pressure filters for continuous filtration and the water is treated with chlorine under strict supervision. Tests for the efficiency of chlorination are taken daily.

There are two privately owned swimming pools in the Borough, both of which are fitted with filtration and chlorination plants.

PUBLIC MORTUARY. The arrangement with the Acton Council for the use of the Acton Mortuary was continued during the year. 248 bodies were taken to this Mortuary and post-mortem examinations were carried out in every case but one.

undertaking use observed by the owner and the work dally

SECTION 3

SANITARY INSPECTION

THE WORK OF THE PUBLIC HEALTH INSPECTORS IN 1956

I append a report to the Medical Officer of Health by the Chief Public Health Inspector giving details of the work of the Public Health Inspectors during the year.

PUBLIC HEALTH ACT, 1936

Inspections.	
Premises inspected on complaint	2,402
Other nuisances observed by Inspectors	61
Premises inspected in connection with infectious	
disease	729
Smoke observations	185
Houses without water supply	78
Inspections of moveable dwellings	41
Other inspections	1,850
Re-inspections	6,426
Intimation Notices served	1,526
Statutory Notices served	217
Letters written	3,830
Proceedings before magistrates	5

Legal Proceedings.

PUBLIC HEALTH ACT, 1936, SECTION 93 Non-compliance with Statutory Notices

In four cases legal proceedings were taken to enforce compliance with Notices requiring the abatement of nuisances. In each case Orders were made by the Magistrates for the necessary work to be carried out within a stated period and costs amounting to £3.3s. Od. were awarded. In one further case proceedings were instituted for non-compliance with a Nuisance Order, but the Magistrates accepted an undertaking given by the owner that the necessary work would be completed within fourteen days. This undertaking was observed by the owner and the work duly completed.

FOOD AND DRUGS ACT, 1955

Food Hygiene Regulations, 1955 Milk and Dairies Regulations, 1949 to 1954

Complaints received				79
Inspections of Milk Purveyors	' Premises	**		96
Contravention of Regulations				-

			010
Inspections of Ice Cream Premises		 = 1	216
Food Inspections	 	 	496
Inspections of Other Food Premise			1,750
Contraventions found	 	 	276
Notices served	 	 	239
Proceedings before Magistrates	 	 	3
Samples of Milk and Cream taken	 	 offo,	42
Samples of Ice Cream taken	 	 	63
Samples of Synthetic Cream taken	 	 	55
Samples of other foods taken	 	 	19

Legal Proceedings.

FOOD AND DRUGS ACT, 1955

In the following three cases proceedings were instituted under Section 2 of the Food and Drugs Act, 1955.

Mould in milk - Fined £10, Costs £3. 3s. 0d.

Foreign matter in potato crisps - Absolute discharge, Costs £5. 5s. 0d.

Nail in currant bun - Fined £5.

SECTION 9, FOOD AND DRUGS ACT, 1938

An Appeal to the Divisional Court against a conviction by the local magistrates for the sale of a loaf of bread containing a used bandage dressing was dismissed with costs.

List of Food Premises in the Borough of Ealing

Bakehouses							31
Bakers' shops							53
Butchers							125
Cafes and Restaurants							148
Canteens - factory							79
Canteens - school							22
Confectioners							240
Dairies and Milk Seller	S						71
Fish Fryers							21
Fishmongers							34
Greengrocers		.,					161
Grocers							331
Ice Cream Manufacturers							5
Public Houses							61
Premises registered for	the	prepa	arati	on or	manu	fac-	
ture of sausages or p	otte	d, pre	essed	pick	kled o	or	
preserved food						.,	103
Premises registered for	the	sale	of I	ce Cre	eam		343

Milk Supply.

There are 86 registered distributors of milk in the Borough.

During the year licences for the sale of milk under the Milk (Special Designation) Regulations were granted as follows: -

	Dealer's Licences	Supplementary Licences	Total
Tuberculin Tested Milk	49	15	64
Pasteurised Milk	58	17	75
Sterilised Milk	55	17	72

Under the provisions of the Milk (Special Designations) (Specified Area) Order 1951, all milk sold by retail in the Borough must be "designated milk," i.e. Tuberculin Tested, Pasteurised or Sterilised Milk.

42 samples of milk were taken and submitted to the Methylene Blue and Phosphatase Tests at the Public Health Laboratory, Ealing.

The results were as follows:

Designation	Samples	Phospi	hatase	Methylene Blue		
		Passed	Failed	Passed	Failed	
Pasteurised	37	37	gave bo	37	61 -	
T.T. Pasteurised	5	5		5	-	

In addition 216 samples of Pasteurised Milk from processing plants in the Borough were taken by the Officers of the County Council who are the licensing authority under the Milk (Special Designations) Regulations.

Ice Cream.

There are 343 premises in the Borough registered for the sale of ice cream.

It was found that their ice cream is obtained from 5 registered manufacturers in the Borough or from 11 manufacturers outside the Borough. Samples from each of these manufacturers were taken once or more during the year, a total of 63 samples of ice cream and ice cream constituents being submitted for bacteriological examination.

The results were as follows:

Commoditu	Samples	720	Gr	Not		
Commodity		1	2	3	4	Graded
Ice Cream -			mein,	t the		
Local Manufacture	26	4	11	2	9	S
Ice Cream -	CARDED SE	1015		0.00	Renel	TER .
Other Manufacturers	27	4	12	2	9	PROTUGAL
Ice Cream		100	007		S AB	densine l
Constituents	10	-	-	-	-	10
tion and as east this	63	8	23	4	18	10

The high proportion of samples shown this year as unsatisfactory is due to the new grading system adopted experimentally by the Bacteriologist at the Public Health Laboratory, Ealing. Together with Brentford & Chiswick, Southall, Acton, Hayes & Harlington and Heston & Isleworth, we agreed to accept these unofficial standards.

Prior to 1956, ice cream was placed in the top grade if it passed the Methylene Blue Test. The presence of faecal and other organisms in any quantity did not affect the grading.

In 1956, the Methylene Blue Test was discontinued and a 'plate count' was carried out on all samples. The presence of faecal organisms automatically placed the sample in the lowest grade, and the number of other organisms present was considered in grading other samples. Plate counts of less than 500 are graded 1, 500-20,000 Grade 2, 20,000-100,000 Grade 3 and over 100,000 Grade 4. On the old system at least 11 of our unsatisfactory samples this year would have been graded as satisfactory.

The following-up of the unsatisfactory samples of ice cream manufactured in Ealing involved the testing of various constituents and equipment, and the contamination was traced in all cases - in one case an unsatisfactory ingredient was being used, in another case the 'sterilizing agent' was not doing its work and in a third case the sterile ice cream was being contaminated by a container after manufacture. Unsatisfactory samples of ice cream manufacturered outside Ealing were reported to the Local Authorities concerned for investigation. Repeat samples subsequently proved to be satisfactory in all cases.

Ice Cream Heat Treatment Regulations, 1947-1952,

There are 6 premises registered for the manufacture of ice cream but only two of these are in regular use.

All the registered ice cream manufacturers in the Borough are equipped in accordance with the conditions laid down in the Regulations.

Synthetic Cream.

55 samples of synthetic cream were taken from local manufacturers. All were found to be satisfactory.

Inspection of Meat and Other Foods.

The following foodstuffs were condemned by the Public Health Inspectors as unfit for human food in the course of their inspections of the various food premises in the Borough:

				lbs.
Apples	olor	nie one	207	2,000
Bacon				116%
Beans		100 500		28
Beef	3851	月到日本	Ab kal	2,836
Black Pudding				7
Brawn	EEFO	14.0%	13.42	3½
Butter				2½
Cheese	TOTAL O	MEDITOR .		49%
Cocoanut	BIO:	double		200
Corned Beef		1 22 0		6244
Fish	The same of			14
Frozen Whole	Egg			44
Ham				262
Hearts	Dhir	Be pan!	YOU DE	23
Jellied Veal		1000		6½
Kidneys			* *.	74
Lamb	TOTAL ST	7004400		14
Liver				90
Margarine		4.9		1
Mutton		244	3200	28
Pork	heren			147
Potatoes				11,080
Roes	1010	0.04	200	28
Sausages		moter	11.0	132
Sausage Meat				105
Semolina		DOGE	1	25
Tongue				2½
Veal				4

Foodstuffs not calculated by weight.

Eggs	** **				127
Fish cake	S				24
Steak Pie	no tine	8.0	1.198		1
Olives				*	barrel
Assorted	tins,	ja	rs,		
packets.	bottl	es	etc.	2,83	5,093

Slaughterhouses.

There is one licensed slaughterhouse in the Borough but no slaughtering was carried out during the year.

MIDDLESEX COUNTY COUNCIL ACT, 1950, SECTION 11

Under this Section, 7 persons were registered during the year for the sale of food from carts, barrows, other vehicles etc. There were 44 persons on the Register at 31st December, 1956.

HOUSING STATISTICS

	HOUSING STATISTICS	
1.	. Inspection of dwelling-houses during the year:	
	(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	2,440
	(2) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Act, 1936	25
	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	11
	(4) Number of dwelling-houses (exclusive of those referred to under the preceding subhead) found not to be in all respects reason-	1 001
	ably fit for human habitation	1,681
2.	. Remedy of defects during the year without serv	ice of
	formal notices:	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1,427
3	. Action under Statutory Powers during the year:	
	A - Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
	(1) Number of dwelling-houses in respect of	
	which notices were served requiring repairs (2) Number of dwelling-houses which were ren-	-
	dered fit after service of formal notices:	
	(a) by Owners (b) by Local Authority in default of owners	
	B - Proceedings under Public Health Act:	
	(1) Number of dwelling-houses in respect of which notices were served requiring defects	187
	(2) Number of dwelling-houses in which defects were remedied after service of formal notice:	
	(a) by Owners	175
	C - Proceedings under Sections 11 and 13 of the Housing Act, 1936:	
	(1) Number of dwelling-houses in respect of	2
	which Demolition Orders were made (2) Number of dwelling-houses demolished in	4
	pursuance of Demolition Orders	
	has been taken by the Local Authority under	
	Section 19, and with respect to which Owners have given an undertaking that they will not be used for human habitation	
	D - Proceedings under Section 12 of the Housing Act, 1936:	
	(1) Number of separate tenements or underground	
	rooms in respect of which Closing Orders were made	4
	(2) Number of separate tenements or underground	
	rooms in respect of which Closing Orders were determined, the tenement or room having	
	been rendered fit	1

During the year one Clearance Area was declared by the Council. This was in respect of Nos. 5, 7, 9, 11 and 13 York Avenue, W. 7. At the end of the year two of these properties were still in occupation.

The following houses were the subject of Demolition Orders:

9 St. Mary's Road, W.5, 1 Rosedale Close, W.7,

Both of these properties have been vacated and the houses demolished.

Closing Orders were made by the Council in respect of the following properties

36 Lower Boston Road (basement) - no re-housing was

necessary as the premises were empty.

Moat Villa, Ealing Road, Northolt (upper portion only)

- this Closing Order was in respect of the dwelling accommodation above a club. The tenants have been re-housed by the Council and the Closing Order is

24 Oxford Road (basement) - no re-housing was necessary as the Council had re-housed the tenant prior

to the Closing Order being made.
55 Mount Avenue, W.5. (basement) - no re-housing was necessary as the Council had re-housed the tenant prior to the Closing Order being made.

One basement No. 38 Alacross Road, W.5, was rendered fit by the owner and the Closing Order was determined by the Council.

During the year the Council agreed in principle to the determination of the Demolition Order in respect of St. Aidan, Ealing Green, upon completion of an approved specification of works of repair and improvement. This work is now in hand.

HOUSING REPAIRS AND RENTS ACT, 1954

During the year 21 applications for Certificates of Disrepair and 22 applications for Certificates of Disrepair to be revoked were granted by the Council.

NEW DWELLINGS, 1956

Completion figures for the 12 months period ending 31st December, 1956 were:

Houses (1 bedroom)	838	8
Houses (2 bedrooms)		4
Houses (3 bedrooms)	-	124
Flats (Bedsitters)	-	1
Flats (1 bedroom)	-	24
Flats (2 bedrooms)	-	86
Flats (3 bedrooms)	-	5





Views front and rear of York Avenue, Hanwell, Clearance Area

FACTORIES ACTS, 1937 AND 1948 Part 1 of the Act

1. Inspections for the purposes of provisions as to health (including inspections made by the Public Health Inspectors):

	Number		Number	of
Premises	on Register			Occupiers prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	73 514	19	26	continues of the contin
Total	587	357	26	

2. Cases in which defects were found:

Cucroniers premises	Nur	Number of cases			
Particulars		Reme-	Refe	in which prosecu-	
	Found		To H.M. Inspector	By H.M. Inspector	tions were in- stituted
Want of cleanliness	1	188 -6	E RUSH	BASE-ON IS	resident of
Overcrowding Unreasonable tempera-	STAT	100 Tall	bred Tell Fill	NAC IND	Series
ture Inadequate ventilation Ineffective drainage	SON CONTRACTOR	3	Effety das	intiders in inter	-
of floors Sanitary Conveniences:	beh	Para-	Held Trice	T shi does	-
(a) Insufficient(b) Unsuitable or de-	2	4		1	- 20
fective (c) Not separate for	10	15	Ru vo vos	8	-
sexes	2	-	DE TEL	DIMOTION	Sale - 15
Other offences against the Act (not includ- ing offences relating	der 'e	103	eganl dal	ath of fet	d, istup
to out-workers)	2	4	ing Gipes	2	0 - 1
Total	17	*26	THE TO BEEN	11	g - 13

^{*}This figure includes certain defects which were outstanding at the end of 1955.

Part VIII of the Act

Outwork

(Sections 110 and 111)

driash or long and to se	Section 110	Section 111
Nature of Work	No. of out-workers in August list required by Sect. 110(1)(c)	No. of instances of work in un- wholesome premises
Wearing apparel: Making, etc. Cleaning and Washing Furniture and upholstery Artificial flowers Paper bags Making of boxes or other receptacles or parts thereof made wholly or partially of paper Carding, etc. of buttons, etc. Feather sorting Stuffed toys Cosaques, Christmas crackers, Christmas stockings, etc. Lampshades Brass and Brass articles Household linen	5 7 5	e of salra-pa3 (1) htth A,5 S - smolt pal st Dariotse as palling los asignas till salra a
Total	440	-

During 1956, 26 inspections of Outworkers premises were carried out by the Public Health Inspectors.

SHOPS ACT, 1950

Improvements under Section 38 of the Shops Act, 1950, relating to the health and comfort of shop workers were carried out in 77 instances:

Lighting and ventilation improved	17
Heating improved Sanitary accommodation improved	35
Washing facilities provided	24

PREVENTION OF DAMAGE BY PESTS ACT, 1949

The following is a summary of the work carried out by the Rodent Operatives acting under the supervision of the Chief Public Health Inspector.

Complaints	880
Premises inspected	1,130
Premises found to be infested with	861
1. Rats 2. Mice	169
Re-visits to infested premises	2,987
Fees received for treatment	£639.15.0d.

Rodent Control in Sewers

In accordance with the requirements of the Ministry of Agriculture, Fisheries and Food (Infestation Control Division), maintenance treatments of the soil sewers in the Borough were carried out during March and September.

A total of 1,220 sewer manholes were dealt with and of these 476 were found to be rat infested. Poison baits were used in the infested manholes.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

Seven premises have been registered in the Borough since the Act became operative, all of which were inspected during the year.

PET ANIMALS ACT, 1951

Fourteen licences were renewed by the Council during the year after the premises had been inspected by the Public Health Inspector.

DISINFECTION

Number of	houses where disinfection was carried out	133
Number of	houses disinfested of vermin	45
Number of	articles disinfected by steam	85
Number of	articles disinfected by formalin spray	299
Number of	articles voluntarily destroyed	317

The arrangement made with the Hammersmith Metropolitan Borough Council in 1952 whereby articles to be disinfected by steam are dealt with at the Scotts Road Depot, W.12, was continued during the year.

SUMMARY OF SANITARY DEFECTS REMEDIED AS A RESULT OF NOTICES SERVED AND LETTERS WRITTEN

Animals - nuisances abated			3
Caravans - nuisances abated		Du. 3	4
Cesspools - cleansed			ik from-
Damp proof courses inserted in walls			35
Dampness - other forms remedied			207
Drains - connected to sewer			1
Drains - cleared and cleansed			653
Drains reconstructed			75
Drains - repaired			216
Drains - new soil and ventilating pipes	prov	ided	20
Dustbins provided			133
Firegrates - repaired or renewed			69
Floors - sub-floor ventilation provided			23

Floors - repaired or renewed	69
Food cupboards ventilated	3
Rainwater eaves gutters, downpipes repaired	226
Refuse - accumulations removed	76
Roofs repaired	264
Sinks repaired or renewed	29
Sink waste pipes repaired or renewed	61
Staircases repaired	20
Walls and ceilings repaired or cleansed	387
Water supply reinstated	78
Water supply - draw taps fixed to main supply	4
Water closets - repaired, reconstructed or improved	162
Windows and doors repaired	280
Yards paved or repaired	39
Other defects remedied or nuisances abated	219
SUMMARY OF WORK DONE AND IMPROVEMENTS	
CARRIED OUT AT FOOD PREMISES	
Walls and ceilings repaired and cleansed	98
Floors repaired	24
Lighting and ventilation improved	17
Washing facilities provided	24
Hot water provided	48
Sinks provided	27
Storage accommodation improved	27
Water supply provided	3
Water closets cleansed or repaired	35
Refrigeration installed or improved	23
Yards paved	1
Shop heating facilities improved	1
Equipment improved	59
Other defects remedied	64

SECTION 4

GENERAL

MASSAGE AND SPECIAL TREATMENT ESTABLISHMENTS.

One new licence was issued to a chiropodist during the year so that the number of registered establishments at the end of the year was 26.

The same four persons were granted exemptions from registration as before by virtue of being members of the Chartered Society of Physiotherapists.

NURSING HOMES.

Eight registered Nursing Homes remain in the Borough and these are inspected annually.

One of these was granted fresh registration in the name of the daughter of the owner upon her taking over the home following her mother's death.

In addition to the above there is one home for exservice men only which is exempt from registration.

HEALTH EDUCATION.

The same means were employed for distributing leaflets issued by the Central Council for Health Education as in previous years, through the display trays in the Town Hall and in the Libraries. In the same manner 1,000 copies a month of Better Health, the journal of the Central Council, are distributed.

From the demand for both the leaflets and the Journal there is no doubt that this is an effective means of bringing to a wide cross section of the general public much useful advice and information.

In November 1956, it was decided that the Borough should take part in the National Home Safety Week from November 5th to 10th.

This campaign was initiated by the Royal Society for the Prevention of Accidents who took as their theme the prevention of accidents in the homes of elderly people. A letter announcing Ealing's participation in this scheme was published in the local press a fortnight in advance.

In this letter it was pointed out that the accident rate among old persons has gradually risen in recent years, and that many such accidents were preventable. In 1954 for example, there were about 5,400 deaths amongst elderly

people resulting from this cause alone in Britain, whilst the number of non-fatalities was probably many times greater.

3,500 leaflets and 375 posters dealing with this problem were distributed by the health clinics, public libraries and old people's clubs in the Borough. Posters and leaflets were also sent to all the General Practitioners in the area. Twenty-five sites were rented for poster display together with spaces hired for poster display at the stations.

200 posters were distributed to shops with the kind co-operation of the Ealing and Greenford Chambers of Commerce and also the Northfield Traders Association.

MEALS ON WHEELS SERVICE.

The following report on the year's work has been supplied by Mrs. E.V. Bruce, the Divisional Director of the Ealing Area Division of the British Red Cross Society whose members carry out the distribution of hot meals to the aged and infirm: -

This service has continued its usefulness in the Borough during 1956 and has delivered hot mid-day meals on five days a week to the sick and Pensioners living entirely alone with no-one to look after them. The food was cooked at Florence Nightingale House, 85 Uxbridge Road, Ealing, W.5, the Headquarters of the Ealing Division of the British Red Cross Society, and 13,980 meals were delivered during the past year. The hot meal, for which 1/- is paid by those who can afford it consists of meat and vegetables or steamed fish and vegetables and milk or steamed pudding. For those who cannot afford to pay, no charge is made. The usual Christmas Dinner was delivered free of charge during the Festive Season, and consisted of roast turkey, vegetables and Christmas Pudding etc.

Requests for these meals come through the Medical Officer of Health, Home Help Department, Almoners of Hospitals and Doctors, and there is generally a waiting list of twelve people."

NATIONAL ASSISTANCE ACT, 1948, Section 47, that of a past of soot edited beds form as

This Section deals with securing the necessary care and attention for persons who

(a) are suffering from grave chronic diseases or being

- aged, infirm or physically incapacitated are living in insanitary conditions, and
- (b) are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

There was no necessity to use these powers during the year. Constant watch is kept on old people to ensure that if they are not receiving care and attention they should, if necessary, enter a hospital or home. On most occasions persuasion is successful but some old people, despite the fact that their home may be a single room in a dirty and unhygienic condition, show great reluctance to leave.

During the year the following two cases were kept under supervision.

The first was an elderly lady who was discharged at her own wish from a Nursing Home in 1954 but she was unable to fend for herself and was practically confined to bed the whole time. She was in receipt of a midday meal from the Red Cross and her doctor and nurse attended daily. The house was in an extremely dirty condition and contained a great deal of unnecessary refuse and was also in a bad state of repair. She refused emphatically to consider admission to any type of Home. She died in September 1956, and subsequently the house was cleansed and all the refuse removed by the Council.

The other case relates to an aged man who lives alone. He receives some assistance from another tenant. He is now becoming incapable of fending for himself and he is being kept under observation in case any further assistance is required. Assistance is also being given by the Home Help section and the Public Health Laundry Service.

Section 50 - Burial of the Dead.

There were 10 burials and one cremation for which the Council accepted financial responsibility.

In the case of the cremation and two of the burials the total cost was recovered from the estate of the deceased.

A proportion of the cost was recovered in two cases.

It was not possible to recover any of the cost in four of the remaining cases and two were still in the course of collection at the end of the year.

LAUNDRY SERVICE FOR THE INCONTINENT

The Laundry Service is still continuing to perform an essential service for those elderly people in the Borough who are incontinent and for whom no other satisfactory arrangements can be made for the cleansing of bed linen and clothing.

The following table shows the growth of the service since its inauguration in 1952:

	1952	1953	1954	1955	1956
No. of cases dealt with dur-	tond	FI PET	SHS SI	49148	us de la la
ing the year	46	66	84	78	62
No. of cases remaining at end	15	23	47	44	47
of year	10000000	1000000		100000000000000000000000000000000000000	
No. of cases that died	18	30	28	39	26
No. of cases removed to hospital	11	18	24	39	28
No. of cases where other					4 1000
arrangements were made Total number of articles	2	10	8	7	5
dealt with	9,958	17,587	25,097	34,259	36,755
Total number of collections	1,144	1,784	2,500	3,347	3,086
Average number of articles per collection	8.7	9.9	10.0	10.2	11.9

Thanks are again due to the Secretary of the Old Peoples Welfare Committee of the Faling Council of Social Service and the panel of helpers who voluntarily continued the work of repairing worn garments.

It is interesting to note that such laundry services are not specifically sanctioned in any legislation but that 28 local authorities do in fact provide them. In Ealing this is done under the Public Health Act, 1936, and the Middlesex County Council Act, 1956, but the procedure varies in different Authorities thus:-

The Public Health Act, 1936

or

The Public Health (London) Act, 1936 - 17 Authorities The National Health Service Act, 1946 - 9 Authorities The National Assistance Act, 1948 - 2 Authorities

It would appear, therefore, that legislation is called for both to clarify the position and encourage local authorities to provide laundry services for incontinent people.

CARE OF OLD PEOPLE.

The study of the age distribution of our population over the last 50 years shows the great increase in the number of old people.

Population of persons in England and Wales per 1,000 of total population 1911, 1921, 1939, 1945 and 1954.

Age Group	1911	1921	1939	1945	1954
Under 15	307	277	210	205	224
15 - 44	480	469	475	450	415
45 - 64	162	194	226	233	247
65 and over	51	60	89	102	114
Total	1000	1000	1000	1000	1000

Advances in medical knowledge have meant that older ages are being achieved, but also a more significant fact that now the great majority of our population do reach old age instead of dying in their prime or middle age. Doubtless future legislation will acknowledge this fact but meanwhile it is opportune to review the not inconsiderable volume of work that is done in Ealing for old folk, both by the statutory and voluntary services.

The spearhead of the Health Department in this respect is formed by the health visiting, home nursing and home help services.

The Health Visitors are concerned with ascertaining the needs of old people and reference of these to the appropriate quarter. Some 500 old people are at present under surveillance by Health Visitors.

Of the cases on the register of the Home Nursing Services 40% are aged 65 years of age or over and due to the complexity of these cases much more than 40% of the home nurses time is spent caring for old people. The Home Nursing Service works in close co-operation with the patient's doctor in the care of those sufficiently well to be treated at home.

The Home Help Service numbers 200 in Ealing and undertakes all types of work in the home except nursing. The homes of many old people have, due to their owners infirmity, become very uncared for before help is sought and the enthusiasm with which the Home Helps restore this situation to normal is greatly to be commended.

The Public Health Inspectors also assist in maintaining satisfactory conditions for old people and ensure that should an old person not be receiving proper care and attention steps shall be taken to admit such persons to an Old People's Home or hospital.

The Laundry Service for the Incontinent is perhaps the most appreciated of the services offered by the Health Department. The number of old folks thus helped is usually about 45 at any one time and it solves for them a problem which would otherwise be insoluble.

The prevention of accidents is at all times the concern of those working for the elderly and no opportunity is lost to give practical advice in this sphere. In addition during the year the Borough participated in a campaign, initiated by the Royal Society for the Prevention of Accidents, and a full account of this valuable work is given elsewhere in the Report.

In addition to the services that the Council is able to provide itself it has powers to give grants to voluntary organisations. Under this arrangement the British Red Cross Society runs a Meals on Wheels service and the Ealing Council of Social Service has begun a Chiropody Service. Between its commencement in June and the end of the year this has provided regular chiropody for 35 persons and it is hoped to extend this several fold. It is sometimes not realised that the simple task of cutting one's toe nails becomes a problem to the infirm. They also arranged a week's summer holiday at Southsea for 217 old people at a nominal charge of £1 1s. Od. The beneficial effect to health and morale of a holiday can well be imagined. This work done with such enthusiasm is of the greatest value.

Much other voluntary work is also done, thus there are 15 Old People's Clubs in Ealing with memberships from 60 to 150 where weekly meetings for tea are held and a wide variety of functions such as concerts, parties and outings to the circus are arranged. Financial help is given to these by several organisations in the Borough and assistance is received from the churches of all denominations. Visiting of sick members is arranged by these Clubs to augment that done by other voluntary bodies.

Visiting, home nursing and the loan of medical equipment is another part of the British Red Cross Society's contribution to the old people's welfare in the Borough.

The value of the Laundry Service has been noted and mention should be made of the allied voluntary services, the mending of garments by the Ealing Council of Social Service assisted by the Ealing Townswomen's Guild and the Catholic Womens League.

We have so far considered only old people in their own homes. There are in the Borough four Old Peoples Homes run by the Middlesex County Council and three voluntary homes. These have a total accommodation of 103 and 82 residents respectively. In addition there are twelve private homes with a total accommodation of 109 persons and registration and supervision of these is carried out by the Welfare Department to ensure the comfort and well being of all residents.

It is hoped from this account that the diverse nature of the services available can be appreciated. The immediate needs in the future are perhaps firstly an increase in the visiting of old people so that a really comprehensive scheme can operate and leave no lonely old person unvisited. The second need is not with the elderly who are incapacitated but with those who are still capable of active work but find that their age bars them from this. Whether special workshops should be instituted for them or whether their entry into normal employment should be facilitated is open to discussion but there does seem a growing need for some service of this nature.

MEDICAL EXAMINATIONS.

Candidates for permanent appointment to the Council's service are required to pass a medical examination on appointment as are manual staff for admission to the Sickness Pay scheme of the National Joint Industrial Council for Local Authorities Non-Trading Services.

During the year the following examinations were carried out:

Administrative, Technical and Clerical Staff	36
Sickness Pay Scheme (Servants)	159
Gunnersbury Park Joint Committee Employees	7
Total	202

SECTION 5

STATISTICAL TABLES

SUMMARY OF STATISTICS

Population (Census, 1951)	8,783 187,306 184,200 8,473,349 £14,300
	tal 2,379
Birth-Rate per 1,000 of Estimated Population	13.6
Still-Births Males, 20 Females, 18 Tot	tal 38
Rate per 1,000 total Births (Live and Still Birth	ns) 14.9
Deaths: Males, 973 Females, 949 Tot	tal 1,922
Death-Rate per 1,000 of Estimated Population	10.4
Deaths of Infants under one year of age:	
	tal 33
Illegitimate Males, 1 Females, 1 Tot	tal 2
Death-Rate of Infants under one year of age: - All Infants per 1,000 Live Births	14
Legitimate Infants per 1,000 Legitimate Live B	
Illegitimate Infants per 1,000 Illegitimate Liv	
Births	15

Deaths from Diseases and Accidents of Pregnancy and Childbirth:

From Sepsis - None

From other Causes - None

Cases of Infectious and Other Notifiable Diseases notified in the Borough

Disease	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Smallpox	-	-	-	-	-	-			-			
Diphtheria	14	29	11	13	16	3	2	24 3		1	The last	4
Scarlet Fever	340	232	133	204	176	294	203	402	238	287	108	15
Enteric Fever								1.0.3		28		2.3
(including	1 1							W. S.		F. H. F.		
Paratyphoid)	-			3	8	5	3	2	3	5	7	T R
Puerperal Pyrexia	47	35	27	25	27	24	38	70	61	54	44	7
Pneumonia:						Mary Control		33.0	P-PRO	38 8		8 00
Primary	110	114	127	189	163	173	162	100	157	152	135	11
Influenzal	14	16	3	6	10	6	38	28	74	52	56	4
Acute Poliomyelitis	3	4	46	10	34	42	10	21	13	5	61	4
Meningococcal Infection	6	6	10	2 2 7	14	9	2	- "	9 -9	6	3	
Malaria		-	1	2	-	4	1	1	3	1	. 1	-
Dysentery	60	10	5		23	24	542	179	132	225	149	19
Erysipelas	26	31	38	32	13	24	17	26	18	18	12	- 1
Tuberculosis:	101	0==	004	000	005	000	010	011	00=	100	***	
Pulmonary	194	275	204	206	205 32	209	210	211	205	132	119 24	13
Non-Pulmonary	3	33	5	21	5	41	6	29	20	2	24	1
Ophthalmia Neonatorum		791	806	1 270			3, 296	993	2,558	132	The second second	72
Measles	2,330	271	310	1,379	1,450	1,016	550	77	491	116	2,422	6
Whooping Cough	230	211	310	18000	21	214	86	26	31	78	36	2
Food Poisoning					21	40	00	20	31	10	36	-
Totals	3,046	1,850	1,757	2,492	2,503	2,174	5, 190	2,165	4,004	1, 284	3,335	1,61

47

The number of cases of infectious disease originally notified sometimes varies due to changes of diagnosis and the following table is therefore given to show the final numbers after correction.

Disease		Disease	
Smallpox Diphtheria Scarlet Fever Enteric Fever (including	156	Food Poisoning Meningococcal Infection Malaria Dysentery	16 2 179
Paratyphoid) Puerperal Pyrexia Pneumonia:	7ī 113	Erysipelas Tuberculosis Pulmonary Non-Pulmonary	12 134 13
Primary Influenzal Acute Poliomyelitis Acute Encephalitis	48 48	Ophthalmia Neonatorum Measles Whooping Cough	726 67
Infective Post Infectious	î	Total	1,589

Infectious and Other Notifiable Diseases Classified in Age Groups

	Scar	rlet		ping		Poli	omyeliti:	S	Maas	sles	Dipht	horio	Dycar	tery	Meningo	coccal
	Fer	Fever		Cough		Paralytic		Non-Paralytic		oubics		- Iparener ru		itery	Infec	tion
Totabase originals	M	F	M	F	M	F.	Ni	F	M	F	M	F	M	F	M	F
Numbers originally notified	85	74	31	36	15	9	11	11	357	369			95	98	1	1
FINAL numbers after correction Under 1 year	- 2	-	3 7	1 6	-	1	DON TOTAL	ī	10 30	10 28	-		5 7	1 5		
2 - 3 -	7 4	2 5	5 5	5 5	2	2	-	-	42 50	48 32	-		7 2	7 2	-	10
4 - 5 - 9 10 - 14	8 45 12	4 46 12	2 8 1	6 9 2	2 8 1	1 6	5 7	1 5 2	55 151 7	63 171 6	-		3 19 7	3 14 7	ī	ī
15 - 24 25 and over Age unknown	3 2	3		1 1 -	1 2 -	-	-	15.	9 3	4 7 -	-		7 30 -	7 46		
Total	83	73	31	36	16	11	12	9	357	369	-	-	87	92	1	1

49

	Pnou	nonia	Sma 1	lpox	A	cute	Encephali	itis	Enter		Paraty	phoid	Ervei	nales	Fo	od
	r neui	monita	Mai		Infec	etive	Post-Infectious		Typhoid Fever		Fevers		Erysipelas		Poisoning	
	M	F	M	F	M	F	M	F	М	F	M	F	M	F	M	F
Numbers originally notified	83	78	-	-	-	1	-	1	-	-	-		6	6	12	14
FINAL numbers after correction	83	12-	338	201	18	M	83		F yas [s	92 6						MI
Under 5 years 5 - 14 15 - 44 45 - 64 65 and over Age unknown	10 10 9 34 20	4 8 19 19 28	111111111111111111111111111111111111111	111111	11111	1		i			1111111		- 2 3 1	2 3 1	2 2 2	6 2
Total	83	78	-	5	-	1		1	-	-	-		6	6	6	10

		Tuberculosis							Other notifiable diseases			
	Respiratory		Meninges	& C.N.S.	Oth				201			
	M	F	M	F	M	F			Final			
		-					M	F	M	F		
Numbers originally notified	73	61	1		7	5	Pt	nerpera.	Pyrex	ia		
FINAL numbers	DEADE OF	LED PAR		Paralytic			-	71	THE	71		
after correction Under 5 years	2	1	1 1 1 1 1 1 1	018 -	- Sensitive	- 19	OI	phth. No	eonator	um		
5 - 14 15 - 24	14	5 21			2	-	2	-	2	-		
25 - 44 45 - 64	22	21	Socifiable	Pinocone	1 4	4	(0)22					
65 and over	4	4		-	-	-						
Age unknown	-	-	-	-	-	-						
Total	73	61	1	-	7	5	13/29					

DEATHS

Causes of Death, 1956

Cours of Dooth	De	eaths, 1	956	Total
Cause of Death	Male	Female	Total	Death 1955
Tuberculosis, Respiratory	17	4	21	17
Tuberculosis Other	1	-	1	3
Syphilitic Disease	4	2	6	3
Diphtheria	-	ments	040.4	
Whooping Cough	-	-	-	-
Meningococcal Infections	1	-	1	DJOE
Acute Poliomyelitis	-	-	-	1
Measles	1 0	OFFER	97 84	
Other Infective and Parasitic Diseases	-	4	4	1
Malignant Neoplasm, Stomach	23	22	45	56
" Lung, Bronchus	54	8	62	86
" Breast	-	34	34	43
" Uterus	-	14	14	12
Other Malignant Lymphatic Neoplasms	89	85	174	172
eukaemia, Aleukaemia	7	4	11	13
Diabetes	2	7	9	18
Vascular Lesions of Nervous System	113	136	249	257
Coronary Disease, Angina	203	118	321	277
Typertension with Heart Disease	25	30	55	52
Other Heart Disease	112	186	298	249
Other Circulatory Disease	37	46	83	83
Influenza	3	3	6	6
neumonia	57	67	124	79
Bronchitis	72	35	107	
Other Diseases of Respiratory System	7	7	14	19
lcer of Stomach and Duodenum	15	4	19	28
lastritis, Enteritis and Diarrhoea	3	6	9	9
ephritis and Nephrosis	8	3	11	14
lyperplasia of Prostate	11	-	11	
regnancy, Childbirth, Abortion	-	-		1
ongenital Malformations	4	8	12	19
ther Defined and Ill-Defined Diseases	52	76	128	158
otor Vehicle Accidents	22	6	28	21
ll other Accidents	19	24	43	30
Suicide	12	10	22	22
domicides and Operations of War	-	956	-	2
Totals	973	949	1,922	1.876

SECTION 6

SCHOOL HEALTH SERVICE

The School Health Service shows no significant trends from the previous year. A slight change in the classification of general health condition needs explanation. Previously this has been shown in terms of "good", "fair" and 'poor'. This is now shown simply as "satisfactory" or "unsatisfactory". The figures represent 98 7% as satisfactory.

The very much higher figure of skin defects results in the close attention that has been given to feet, which has revealed a large incidence of verrucae, this is also reflected in the attendance at Minor Ailment Clinics.

A few isolated cases of tuberculosis have required special investigation in schools. Fortunately, no spread of the disease was discovered. During the latter part of the year preparations were in hand to launch the B.C.G. programme for 1957.

MINOR AILMENT CLINICS

These clinics continue to deal with large numbers of children with minor disorders and provide a means for a more detailed study of any defects noticed at routine inspections.

Attendances	at	Minor	Ailment	Clinics
1954		1955		1956
6,746		6,087		7,897

ROUTINE MEDICAL INSPECTIONS

Three routine inspectious are carried out during the child's school life, during their first year at school. during their last year at primary school and prior to leaving school.

Numbers	Examined	
	1955	1956
First age group Second age group Third age group	2,552 2,665 1,604	2,482 2,981 1,266
Total	6,821	6,729

Classification of General Condition 6.835 Satisfactory 92

Unsatisfactory Total

6,927

Defects requiring Treatment found at Routine Medical Inspection

	1953	1954	1955	1956
Skin Diseases	540	581	559	859
Defective Vision	290	366	444	452
Squint	43	43	37	25
Defects of Hearing	93	116	68	73
Middle Ear Diseases	18	27	32	48
Nose and Throat Diseases	377	382	242	190
Speech Defects	37	44	34	36
Enlarged Glands	5	7	6	7
Heart - Circulation conditions	7	20	14	5
Lung Diseases	84	93	79	72
Hernia	7	9	2	3
Postural Defects	18	38	24	35
Flat Foot	42	110	97	78
Epilepsy	1	2	3	2

ASTHMA CLINIC

The Asthma Clinic has continued its work during 1956 in spite of setbacks. A Physiotherapist left at the end of August and there was a break before her successor could take up her duties. The new Physiotherapist started in November.

In spite of this 2,990 treatments were given to approximately 190 children.

The asthma appears of milder type than was the case about five years ago. At present the cause of this is not apparent.

SCHOOL DENTAL SERVICE

The uncertain conditions of staffing referred to in the report for 1955 have continued to dominate the activities of the dental service during 1956. Fortunately, the part-time officers at present employed seem likely to remain for some considerable period and so to develop a better understanding of and ability to cope with our local dental problems. We remain just over one full-time dental officer short of our establishment, which is approximately 14 per cent.

As has been reported previously, redisposition of the allocation of schools to particular clinics has enabled some catching up in arrears of treatment but the increasing population density, particularly in Northolt - Greenford districts, will make provision of extra surgery accommodation anecessity as soon as the staffing situation improves. With the dental schools now filling up to capacity and the possible reduction in National Service requirements of the newly qualified male dental surgeon,

it is likely that increasing numbers will be entering the school service in a few years and clinic accommodation should be ready to receive them.

Over the year 300 fewer dental sessions were carried out than in 1955, this is a reduction of 13 per cent, but only 300 less attendances were made for treatment, which is a reduction of less than 2 per cent, so it will be appreciated that the staff are making a concerted effort not to lose any more ground.

The excellent ratio of permanent fillings to permanent extractions, which is a very good general indication of the state of dental affairs, was maintained and 14 fillings were carried out for every extraction.

Orthodontic treatment continues to be much in demand from parents and our part-time orthodontists are coping adequately with the demand. Close co-operation is maintained with the E.N.T. Asthma and Speech Therapy departments. Many parents are anxious for their children to have treatment without realising that much of the success is due to co-operation at home and that adequate conservation of the teeth is essential as well, for no amount of "straightening" will make up for decayed teeth which have to be extracted. The frequent request from private practitioners for orthodontic treatment for their patients is itself a tribute to the Orthodontic clinic's success.

Altogether it can be said that 1956 has been a successful year for the school dental service and the staff have reacted vigorously and efficiently to difficult circumstances, but we must plan ahead for an improved service as soon as possible, and maintain the position in the interim period which might be rather more difficult.

Atten-	Treat- ment	ings	Fill- ings Temp-	Extrac- tions Perm-	ons tions		tics	Ortho- dontic treat-
dances	pleted	anent	orary Teeth	anent Teeth	orary Teeth	Gas	Local	Ment New Cases
17197	5527	11248	3341	808	4513	2220	4097	218

EAR. NOSE AND THROAT SERVICE

Mr. Arthur Miller, Consulting Otologist, reports:-

Children are referred to see me by the Medical Officers on account of recurrent colds, mouth breathing, sore throats and deafness. If, upon examination, I have found a child to be suffering from enlarged adenoids (often the cause of persistent colds, mouth breathing and deafness) they have been referred for adenoidectomy.

Children with clinical symptoms of sore throat having infected tonsils I referred for adeno-tonsillectomy, but in the majority of cases all the above-mentioned symptoms were treated successfully by conservative means, such as diastolisation, politzerization and Eustachian catheterization and breathing exercises.

In cases where sinusitis was confirmed by X-Ray examination Proetz displacement treatment was practised.

During the last year we have continued with hearing tests, both with the gramophone and the pure tone Audiometry; one was able in many cases by subsequent tests to show a great improvement in the child's hearing.

	1955	1956
Number of new cases	193	135
Number of re-inspections	301	275
Total attendances	494	410
Number treatment advised	227	242
Number operation advised	106	83

Audiometry Report

	1955	1956
Number of schools visited	16	16
Number of children examined	6,700	6,225
Number of children with hearing loss	103	98
Number of pure tone tests	123	156
Number referred to E.N.T. Specialist	71	81

FOOT HEALTH

The regular inspection of our school children's feet for defects has continued during this year, a total of 10,860 children having been seen by our specially trained nurse. Of these children, 428 were seen by the Medical Officer in charge of Foot Health.

The defects found were the same as in previous years and were invariably associated with either short shoes or poorly shaped ones.

In the age group five to twelve years, the children on the whole are found to wear well-shaped shoes but wear them for too long a period i.e. six months to one year or eighteen months. In particular winter shoes are often worn for two winter seasons running, and may well be as much as one to two sizes too small during the second season. These well-shaped shoes are expensive and the uppers are made of durable leather which tempts the parent into their continued use. Children of this age do not complain that their shoes feel tight, their toes just bend up inside the shoe. Best shoes cause similar foot defects, again due to the fact that by the time they come into general use, they are probably six months old and the foot has outgrown them. One pair of shoes bought at one time, to be worn every day including Sundays and replaced in three to four months, is the policy stressed in the foot clinics.

Over twelve years of age, there are many girls who wear badly shaped shoes with the so called fashionable pointed toe. These shoes, by their inherent shape, encourage the toes to be squashed together and certainly promote any slight bending of the big toe into a bunion. It is stressed in the foot clinics that until the foot has at least stopped growing, the shape of the shoe should correspond to the shape of the natural foot.

The search for foot infection has continued and every term all junior and senior school children had their feet inspected for verrucae and tinea. The incidence of verrucae in these schools has averaged 1 9% in the Spring and Summer terms and 1.6% in the Autumn term. The senior schools continue to show the highest incidence, one Senior Modern Boys' School having an incidence of 4.4% in one term. So far the regular once a term search for verrucae has not dramatically reduced the rate of infection, though when found the verrucae are usually small and respond quickly to the treatment. The children thus suffer the minimal disability and lose very little time from school.

Foot Inspection - Defects Found

Total number examined	these 'd	10,860
Defect	No.	%
Tinea	49	.4
Verrucae	94	8,10
Defective shoes	2,255	20
Everted ankles	315	2.9
Hallux Valgus	1,853	17
Children referred to Foot Clinic	454	4
" Chiropodist	105	1

HANDICAPPED CHILDREN

The following table sets out in their various categories the number of handicapped pupils as at 31st December, 1956.

	D:	ecial ay ools	Resi	ecial den- al pols	In main rain Prima Secon School		at ool	Total		
S Tree to the second	В	G	В	G	В	G	В	G	В	G
Blind Pupils Partially-	1	Sun Du	1	1		atpa	1	3 []	3	1
Sighted Pupils	4	1	-	1	-		-	1	4	3
Deaf Pupils	4	4	1	4	-	ni tad	-	L US	5	8
Partially Deaf Pupils Educationally Sub-normal	3	6	4	3	1000 1100	2	HAP HAP	S Li	7	11
Pupils	12	15	10	8	29	15	2	of a	53	39
Epileptic Pupils	10	-	1		20	10	1		2	00
Maladjusted Pupils	-	-	22	9	17	4	-	-	39	13
Physically Han- dicapped Pupils	9	11	4	2	2	1	3		18	14
Pupils with			-	-	-	1	0		10	1.4
Speech Defects	- Indiana	-	1	-	1	2		1	2	2
Delicate Pupils	3	1	10	6	52	24	1	-	66	31
Pupils with Multiple Defect	H De		18 20	6 66	belg	1		24	4 3	1
Total	36	38	54	34	101	49	8	1	199	123

OPHTHALMIC SERVICE

Mr. Freeman Heal, Consultant Ophthalmologist, reports - Report on School Children examined at Mattock Lane and Ravenor Park Clinics for the year January to December, 1956.

The total number of cases seen was 1,603 (1955 - 1,606) of which 448 (1955 - 537) were new cases, and 1,155 (1955 - 1,069) were re-inspections.

The number of pairs of glasses prescribed was 918 (1955 - 1,015).

Abnormal Eye Conditions other than Errors of Refraction were as follows:

Congenital Abnorma	lit	ie	S								New Cases	01d Cases
Squint					*		19979		Ho	. 2	56	213
Congenital Nystagmus Progressive Myopia						*	ques		shit		2 2	4 2
Congenital Epiphora							and.	ė	2.16		3	-

Abnormalities in extra ocular muscles 2 Ectopia Lentis 2 Congenital Cataracts 2 Ptosis 3 Opacity in Cornea 1 Microphthalmic eye (removed) 1 Cyst of orbit 1 Coloboma of Uveal tract 1 Congenital disinsertion of retina 1 Abnormalities due to Infection Blepharitis 6 Styes 1 Blind disorganised eye due to infantile illness 1 Sub-acute Conjunctivitis 1 Follicular Conjunctivitis 1 Retino Choroiditis 2 Corneal scar (chicken pox) 1 Abnormalities due to Trauma Damage to macula contusion of globe 1 Number of children sent for squint training 6		New Cases	01d Cases
Congenital Cataracts Ptosis Opacity in Cornea Microphthalmic eye (removed) Cyst of orbit Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1			1
Ptosis Opacity in Cornea Microphthalmic eye (removed) Cyst of orbit Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula contusion of globe 1		4	2
Opacity in Cornea Microphthalmic eye (removed) Cyst of orbit Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula contusion of globe 1			1
Microphthalmic eye (removed) Cyst of orbit Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1	0 11 1 0	1	
Cyst of orbit Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1	Microphthalmic eve (removed)	1	
Coloboma of Uveal tract Congenital disinsertion of retina Abnormalities due to Infection Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1		1	-
Abnormalities due to Infection Blepharitis	Coloboma of Uveal tract	-	1
Blepharitis Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1 -	Congenital disinsertion of retina	1	-
Styes Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1 -	Abnormalities due to Infection		
Blind disorganised eye due to infantile illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1	Blepharitis	6	2
illness Sub-acute Conjunctivitis Follicular Conjunctivitis Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1 -	Styes	4	-
Sub-acute Conjunctivitis	Blind disorganised eye due to infantile		2
Retino Choroiditis	illness	-1	4
Retino Choroiditis Corneal scar (chicken pox) Abnormalities due to Trauma Damage to macula - contusion of globe 1 -		Lengt no	
Abnormalities due to Trauma Damage to macula - contusion of globe		1	
Abnormalities due to Trauma Damage to macula - contusion of globe 1 -		î	
Damage to macula - contusion of globe 1 -			
	Abnormalities due to Trauma		
	Damage to macula - contusion of globe	1	-
		6	911-31

ORTHOPAEDIC CLINIC

Mr. J.A. Cholmeley, the Orthopaedic Consultant, reports:-

The Orthopaedic Clinics continue to be busy and there has been an increase in the number of attendances under all headings. I feel sure that the numbers, particularly of minor disabilities, would be greater if there was not a chiropodist in the Ealing School Medical Service. I also consider that the routine examination of school children's feet and shoes with advice on proper shoe fitting, as carried out in Ealing is of real value in prevention of minor foot and toe deformities and development of corns and callosities.

Recently there have been several cases of Poliomyelitis in Ealing and some of these, fortunately not severely disabled, have returned home and are now attending the Orthopaedic Clinic for treatment and supervision. Such cases are often time consuming and increase the amount of work of the physiotherapists to a much greater extent than the number of attendances would suggest.

Trans to every R ment to die see	1955	1956
Number of new cases	125	136
Number of re-inspections	383	4 13
Total attendances	508	549
Number of children referred		
for physiotherapy	167	200
Number of attendances	2, 930	3, 199

SPEECH THERAPY

The work of the Speech Therapy Department continued at a slightly increased volume during 1956:-

Number on Roll at 1.1.56		appdi	sin	817. 10	206
New cases during the year	101			64.19	76
Number discharged	10	sa sapa		eldin	44
Number of attendances at Speed	ch Th	herapy	Cli	nics	4,092
Number on Roll at 31.12.56		bear t		Manie.	238

The percentage frequency with which each type of defect occurred was as follows:-

(1)	Dyslalia	-	Mixing	or	missing	out	of	consonants
-----	----------	---	--------	----	---------	-----	----	------------

			45%
(2)	Aphasia - Absence of	speech	15%
(3)	Dysarthria - Defects	due to disorders of the	
	articulatory muscles	or soft palate	14%

(4) Stammering 26%

The department's work is largely with school children but in many instances pre-school children are referred. This is of course valuable as treatment can be commenced and sometimes a defect remedied before the time the child goes to school. During last year the division into pre-school and school children was as follows:-

School children	85%
Pre-school children	15%

The service the department offers is widely known and during 1956 referrals were from the following sources.

Doctors	66%
Teachers	29%
Parents	5%

The satisfactory diagnosis and treatment of speech defects may require co-ordination of the services of Ear, Nose and Throat Surgeon, Plastic Surgeon, Neurologist and Educational Psychologist. The close liaison between the Assistant Medical Officer in charge of Speech Therapy and the Speech Therapists facilitated this co-ordination.

Each child has an initial medical examination to enable the type of defect to be diagnosed and a plan for treatment to be formulated. Regular speech therapy is then given either at clinics or at school. This may include play therapy, exercises, or advice both to the child and parents on the means of overcoming the defect. Progress is reviewed at periodical medical examinations. A special Speech Class was started in April, 1954 for children with the severest defects who would benefit by continuous treatment. The teacher in this class has special experience and interest in the subject and the Speech Therapist visits three times weekly. Twenty-five children have now received this form of treatment. Most were unintelligible on admission and their speech has been so improved by the time of discharge that it has no longer been a significant handicap.

A speech defect presents a considerable problem both to the child concerned and to the parents. The outlook of course varies with the type of defect. Stammering is probably the most irresponsive to treatment, whilst in the case of dyslalia rapid improvement can be expected. Overall the results achieved during 1956 have continued to be gratifying.

EALING CHILD GUIDANCE CENTRE

1. New cases referred in 1956.

In 1956, 243 cases were referred to the Centre, 64 cases were brought forward from the 1955 waiting list, making a total of 283.

2. Problems referred to the Centre.

The average intelligence quotient of the children referred in 1956 does not differ significantly from that of the previous year. There has been almost no change in the numbers coming from different types of schools. There is a barely significant increase in the average age, probably because the number of pre-school children has decreased.

There has been little change in the frequency of various symptoms referred. Children difficult to manage at home continue to head the list.

In 1956, for the first time since the opening of the Centre, fewer cases were referred than in the previous year.

Rather more cases were discharged from treatment in 1956 than in 1955 and it is satisfactory to be able to report that there was an appreciable fall in the number awaiting treatment in 1956.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

(1)	Number of children medically examined in order to ascertain whether they were physically fit to undertake employment of a light nature out- side school hours	347
(2)	Number of instances in which the state of health	341
	was found to be such that certificates were withheld	2
(3)	Number of children examined as to fitness to take part in entertainments	6
(4)	Number of cases in which certificates to take part in entertainments were withheld	-
Case 1944	es dealt with under Section 57, Education Act,	
	Sub-Section 3 Sub-Section 4	9
	Sub-Section 5	1
Case	es de-notified under Section 8, Education (Mis- laneous Provisions) Act, 1948	1
Numb	per of teachers examined as to fitness for pintments	51

INFESTATION WITH VERMIN

Once again I am pleased to report a decline in the number of children infested with vermin. Of 54,545 examinations carried out, only 94 children were found to be infested. Although this is no longer a major problem, constant vigilance is maintained to improve the standard.

SUPPLEMENT - FOR GENERAL INFORMATION

HEALTH SERVICES PROVIDED BY THE LOCAL HEALTH AUTHORITY

In Middlesex the Local Health Authority under the National Health Service Act is the Middlesex County Council. They have formed ten areas in the county Ealing and Acton forming Area No. 7. In Ealing the local administration is carried out at the Town Hall, Ealing.

MATERNITY AND CHILD WELFARE CLINICS

The following are the addresses of the Maternity and Child Welfare Clinics in Ealing:

Ante-Natal Clinics (Interviews by Appointment)

	Address	Times
	Abbey Parade, North Circular Road, Ealing.	Tues. mornings.
	Brentside, Westcott Crescent, Hanwell, W.7.	Thurs. mornings.
2	Cherington House, Cherington Road, Hanwell, W.7.	Tues, Wed, mornings.
	Greenford Green, Wadham Gardens, Greenford.	Tues. Fri. mornings.
	Islips Manor, Eastcote Lane, Northolt.	Mon. Wed. mornings.
	Laurel House, Windmill Road, Ealing.	Thurs. mornings.
	Mattock Lane, 13 Mattock Lane, Ealing, W.5.	Wed. Thurs. Fri.
	Perivale, Horsenden Lane, Greenford.	Wed. mornings.
	Ravenor Park, Oldfield Lane, Greenford.	Mon. Thurs. mornings.

Greenford.	
Child Welfare Clinics	
Abbey Parade, North Circular Road, Ealing.	
Brentside, Westcott Crescent, Hanwell, W.7.	Thurs. 2 - 4 p.m.
Cherington House, Cherington Road, Hanwell, W.7.	Mon. Tues. Thurs. 2 - 4 p.m.
Greenford Green, Wadham Gardens, Greenford.	Tues, Wed, Fri. 2 - 4 p.m.
Islips Manor, Eastcote Lane, Northolt.	Mon. Thurs. 2 - 4 p.m.
Northolt Grange Community Centre, Northolt.	Tues. 2 - 4 p.m.
Laurel House, Windmill Road, Ealing.	Mon. Thurs. 2-4 p.m.
Mattock Lane, 13 Mattock Lane, Ealing.	Mon. Wed. Thurs. Fri. 2 - 4 p.m.
Perivale, Horsenden Lane, Greenford.	Mon. Thurs. 2-4 p.m.
Ravenor Park, Oldfield Lane, Greenford.	Mon. Tues. Wed. Fri. 2 - 4 p.m.

DOMICILIARY MIDWIFERY SERVICE

An expectant mother can obtain the services of a general practitioner obstetrician' for her confinement in her own home. As an alternative she can obtain the services of a County Council midwife who will attend her in the home either as a midwife, delivering the child herself, or as a maternity nurse when the mother is arranging for her doctor to attend the confinement. If the services of one of these midwives is needed, application should be made through the Maternity and Child Welfare Clinic.

HOME NURSING SERVICE

Free Nursing Service in the Home to cover all types of sickness is now available for every one for as long as it is necessary. There are a number of nurses in the Area whose services are made available at the request of the medical practitioner and they work under his instruction. Further details regarding this service can be obtained from the Area Medical Officer, Town Hall, Ealing.

HOME HELP SERVICE

In addition to the arrangements made to provide domestic help during confinement at home, domestic help is also provided in other cases of emergency, such as sickness, aged people in need of help, cases of tuberculosis and sickness in the home where there are very young children. Applicants needing Domestic Help should apply to the Area Health Office, Town Hall, Ealing. A charge is made for this service, although this is reduced in cases of hardship.

DAY NURSERIES

There are two Day Nurseries in the Ealing portion of the area for the care of children under five years of age. Admission is restricted as a general rule to children whose mothers need to go out to work, although in exceptional circumstances, e.g. during the mother's illness or other emergency, other children may be accepted. The nurseries are open from 7.30 a.m. to 6 p.m.

Applications for admission should be made to the Area Medical Officer, Town Hall, Ealing.

A charge is made for this service on a sliding scale based on the parents income.

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