

**[Report of the Medical Officer of Health for Ilford].**

**Contributors**

Ilford (London, England). Borough Council.

**Publication/Creation**

[1962]

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## Borough of Ilford



# HEALTH REPORT

FOR THE YEAR

1961

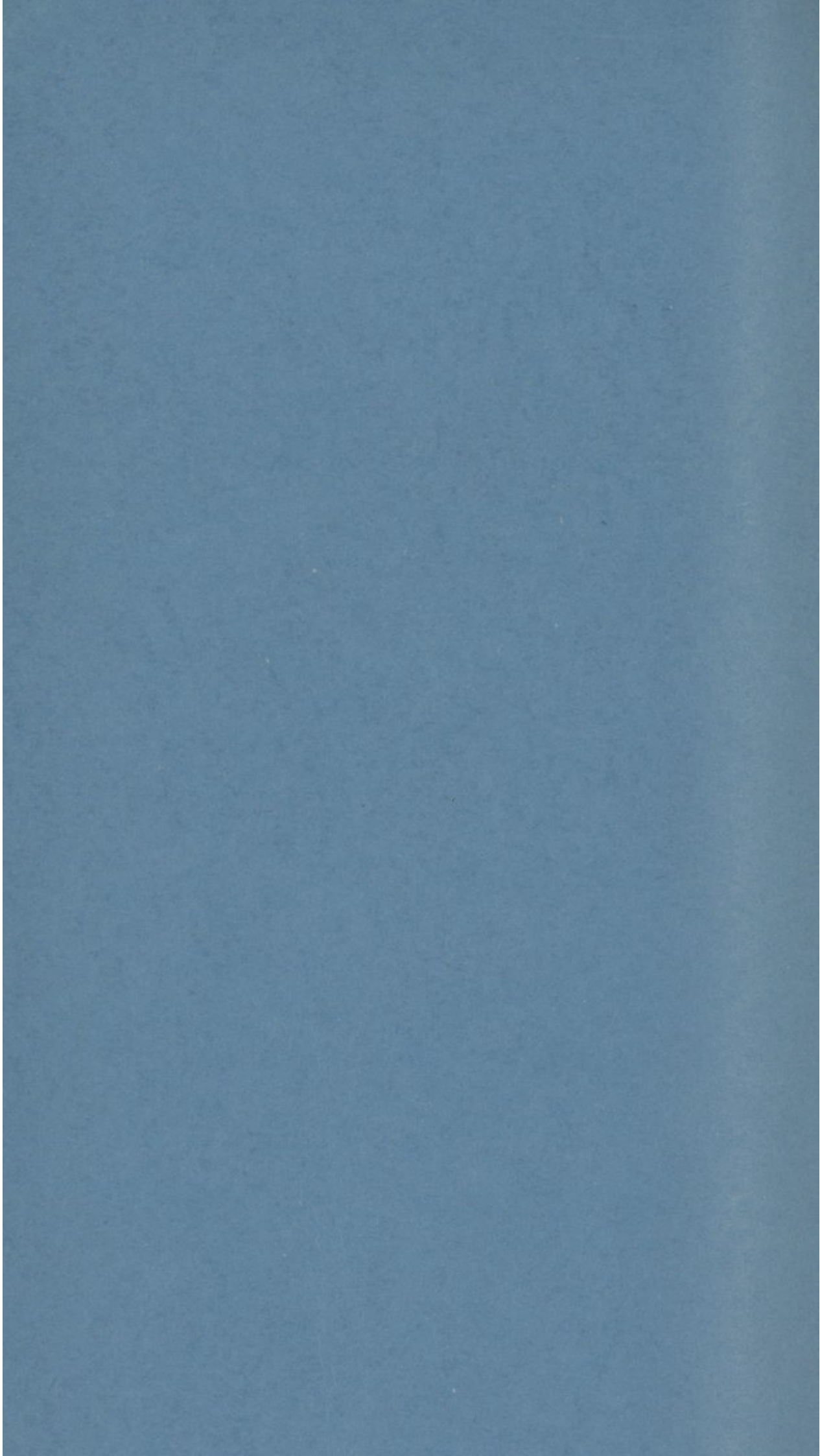


**I. GORDON**

M.D., Ch.B., M.R.C.P., D.P.H.

Medical Officer of Health, etc.











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 WALKER, GILBERT, C.B.E., F.R.S.  
 WALKER, JAMES DOUGLAS, F.A.C.C.A., F.C.C.A.  
 WALLACE, NICHOLAS, F.P.S.-C.C.P.  
 WARD, JOHN EDWIN

Consultants

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WATSON, CAPT. RAYMOND, J.P., F.V.I.	WATSON, CYRIL GEORGE, A.L.F.
WATSON, VIVIAN WILFRED	WATSON, JOHN LOUIS
WATSON, SYDNEY GEORGE	WATSON, ERIC WILLIAM, F.A.C.C.A.
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WATSON, FRANK HERBERT, F.R.C.S.	WATSON, JOSEPH CRANKS
WATSON, MRS. BETH	WATSON, DOUGLAS EDWARD



## ILFORD BOROUGH COUNCIL

Municipal Year 1961-62

COUNCILLOR OWEN WATERS, J.P. *Mayor.*COUNCILLOR L.V. DREW, *Deputy Mayor.**Aldermen:*

BARKER, JOHN, C.B.E., J.P.	GOOCH, LIONEL ARCHER SCOTT.
BENNETT, MRS. FLORENCE EDITH.	HEADLEY, CECIL AUBREY, J.P.
COLVIN, GILBERT, C.B.E., F.C.I.S.	MASTERS, FRANK ROBERT.
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GIBSON, CYRIL IRVING.	TERRY, MISS ANNE SYLVIA, J.P.

*Councillors:*

ALY, HARRY REGINALD BERTRAM.	LIVERMORE, JOHN.
BYSOUTH, HENRY ALBERT, F.I.A.C.	LOVELESS, CHARLES EDGAR, F.A.I.A.
CARRADICE, DENNIS ANNESLEY.	LOVELESS, SYDNEY FRANK.
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CLACK, ARTHUR HENRY.	MURPHY, JOHN LOUGHLIN, J.P., A.R.I.N.A., A.I.Mar.E.
COPSEY, HUGH EDMUND.	NATZLER, ISAAC BERNARD.
DAVIES, DAVID SAMUEL.	NORWOOD, JOHN HENRY.
DAVIES, GEORGE EVELEIGH, J.P., B.Sc.	OSBORNE, ALAN FRANK.
DOYLE, THOMAS JOHN.	ROLFE, CYRIL GEORGE, A.I.S.T.
EAREY, ERIC RAYMOND, J.P., F.V.I.	RYDER, JOHN LOUIS.
FERRIER, VIVIAN WILFRED.	SEAMAN, ERIC WILLIAM, A.A.C.C.A.
GLEED, SYDNEY GEORGE.	SHAW, ARNOLD JOHN, B.A.
GROSE, JOHN STANLEY.	SHERRELL, ALBERT REGINALD PRENTICE, C.A. (E.C.C.).
HARRIS, EDGAR FRANK, (E.C.C.).	WATSON, GEORGE HENRY.
HERRIDGE, WILLIAM HENRY, J.P., C.A. (E.C.C.).	WATTS, JOSEPH CHARLES.
HITCHCOCK, LEONARD, A.I.B.	WOODS, DOUGLAS EDWARD.
JAMES, FRANCIS HERBERT, (E.C.C.).	
LITTLEJOHN, MRS. RUTH CONSTANCE, M.A.	



## PUBLIC HEALTH COMMITTEE

Municipal Year 1961-62

ALDERMAN MISS A.S. TERRY, J.P., *Chairman.*COUNCILLOR A.R.P. SHERRELL, C.A. (E.C.C.), *Vice-Chairman.*

ALDERMAN J. BARKER, C.B.E., J.P.	COUNCILLOR L. HITCHCOCK, A.I.B.
COUNCILLOR H.A. BYSOUTH, F.I.A.C.	COUNCILLOR J.H. NORWOOD.
COUNCILLOR MRS. G.M. CHAMBERLIN, (E.C.C.).	COUNCILLOR A.F. OSBORNE.
COUNCILLOR H.E. COPSEY.	COUNCILLOR C.G. ROLFE, A.I.S.T.
COUNCILLOR T.J. DOYLE.	COUNCILLOR OWEN WATERS, J.P. ( <i>Mayor</i> ).
COUNCILLOR L.V. DREW, ( <i>Deputy Mayor</i> ).	COUNCILLOR G.H. WATSON.
COUNCILLOR S.G. GLEED.	COUNCILLOR D.E. WOODS.

ILFORD HEALTH AREA SUB-COMMITTEE OF THE  
HEALTH COMMITTEE OF THE ESSEX COUNTY COUNCIL

Municipal Year 1961-62

*Ilford Borough Council Representatives:* ALDERMEN COLVIN, MASTERS, ROOT, MISS TERRY (*Chairman*); COUNCILLORS MRS. CHAMBERLIN (*Vice-Chairman*), CLACK, FERRIER, GLEED, HARRIS, HITCHCOCK, MRS. LITTLEJOHN, C.E. LOVELESS, MURPHY, NORWOOD, ROLFE.

*Essex County Council Representatives:* ALDERMAN GLENNY; COUNCILLORS BERRY, MRS. BOVILL, JAMES, SWEETLAND, MRS. WILLIS, WORTLEY.

*The Executive Council for Essex Representative:* MRS. V.L. WILSON.

*Local Medical Committee Representative:* (One vacancy).

*Hospital Management Committee Representative:* ALDERMAN MRS. L. FALLAIZE.

*Voluntary Organisations' Representatives:* MRS. G.M. BUTLER, MRS. R.E. EAST, MRS. D.M. HOLLOWAY, MRS. TAYLOR.

## ILFORD COMMITTEE FOR EDUCATION

Municipal Year 1961-62

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ALDERMAN J. BARKER, C.B.E., J.P.	COUNCILLOR G.E. DAVIES.
ALDERMAN G. COLVIN, C.B.E., F.C.I.S.	COUNCILLOR T.J. DOYLE.
ALDERMAN MRS. L. FALLAIZE, J.P. (E.C.C.).	COUNCILLOR MRS. R.C. LITTLEJOHN, M.A.
ALDERMAN C.I. GIBSON.	COUNCILLOR J. LIVERMORE.
ALDERMAN F.R. MASTERS.	COUNCILLOR J.L. MURPHY, J.P., A.I.R.N.A., A.I.Mar.E.
ALDERMAN F.T. PEARSON.	COUNCILLOR C.G. ROLFE, A.I.S.T.
ALDERMAN MISS A.S. TERRY, J.P.	COUNCILLOR E.W. SEAMAN, A.A.C.C.A.
COUNCILLOR H.R.B. ALY.	COUNCILLOR A.J. SHAW, B.A.
COUNCILLOR D.A. CARRADICE.	COUNCILLOR A.R.P. SHERRELL, C.A. (E.C.C.).
COUNCILLOR MRS. G.M. CHAMBERLIN, (E.C.C.).	

*Co-opted Members:*

MRS. D.E. CARTER (to 11.12.61.)  
 MR. R.E. DOVER (from 19.12.61.)  
 THE VERY REV. CANON M. HANCOCK, B.A.  
 MR. H.S. KENWARD, M.A.  
 MR. E.R. LOWER, B.A.  
 THE REV. H.R. NEALE.  
 MR. J.G. PAGE  
 MISS F. STEVENS.

*County Nominated Members:*

COUNTY COUNCILLOR A.F.J. CHORLEY, M.B.E.  
 COUNTY COUNCILLOR MRS. L.E. JACKSON.



## OFFICERS OF THE PUBLIC HEALTH SERVICES

### Ilford Borough Council

*Medical Officer of Health, Divisional School Medical Officer, Area Medical Officer, Ilford Health Area Sub-Committee:*

I. GORDON, M.D., Ch.B., M.R.C.P. (Lond.), D.P.H. (Edin.).

*Deputy Medical Officer of Health: (Part Time)*

D.M.B. GROSS, M.D., Ch.B., (Leeds), M.M.S.A., D.P.H. (Lond.).

*Chief Public Health Inspector:*

S.R. DALY, LL.M., B.Sc., D.P.A. (Lond.), Barrister-at-Law.

*Deputy Chief Public Health Inspector:*

P.W. ENGLISH.

*Public Health Inspectors:*

G.W. NEWMAN.	J. COOK.
R.E. SMALLEY.	F. NAU.
A.C.R. NEALE.	D.F. SCOTT.
T.F. JOHNSON.	J.A. HARRIS.

C. BROOMFIELD.

*Chief Administrative Assistant (I.B.C. and E.C.C.):*

F.J. HOCKING (to 15.11.61.).

*Administrative Assistant:*

A.E. TOURLE.

*Welfare Officer for Old Folk:*

MISS M.J. COPPING, Dip. Social Sc. (Lond.).

### Essex County Council

*Assistant County Medical Officers:*

D.M.B. GROSS, M.D., Ch.B. (Leeds), M.M.S.A., D.P.H. (Lond.) (Part Time).

F.E. O'CONNOR WILSON, B.A., M.B., B.Ch., B.A.O., D.P.H. (T.C. Dub.), L.M. (Rot.).

A. COLLINS, M.B., B.Ch., B.A.O. (Cork).

H.B. GRANGE, M.B., B.S. (Lond.) (Part Time).

J.M. POOLEY, M.B., B.S. (Lond.), D.C.H. (Part Time).

R.M. NOORDIN, M.R.C.S., L.R.C.P. (to 31.3.61.).

G.B. TAYLOR, M.B., B.S. (Lond.), D.C.H., D.Obst.R.C.O.G. (to Part Time from 9.10.61).

M.B. GEE, M.B., Ch.B. (Bristol) (Part Time from 1.8.61.).

*Area Dental Officer:*

E.V. HAIGH, L.D.S., R.C.S. (Eng.).

*Dental Officer:*

G.H. WILLSON, L.D.S., R.C.S. (Eng.) (from 7.5.62.).

*Educational Psychologists:*

MISS B.S. GASCOYNE, B.A. (Hons. Psych.).

MISS C.H.F. WATT, B.A. (Hon.).

*Psychiatric Social Workers:*

MISS J.M. BARTON (to 31.5.62.).

MISS M. BAKER (to 6.7.62.).

MISS M.D. BOYD (from 29.9.61.).

*Speech Therapists:*

MRS. M. WALKER, L.C.S.T.

MRS. P.A. PREVIOUS, L.C.S.T.

*Cerebral Palsy Unit:*

*Physiotherapist:*

MISS G.L. BOWERS, M.C.S.P.

*Occupational Therapists:*

MRS. M.I. RAVEN (to 31.3.62.).

MRS. P.M. LEVERSEDGE (from 7.5.62.).



**Officers of the Public Health Services – continued.**

---

*Non-Medical Supervisor of Midwives:*

MISS R.K. JESSON.

*Superintendent Health Visitor:*

MISS J.M. OLIVER.

*Health Visitors and School Nurses:*

MISS E.M.P. COLLINS	MISS A.E. RIDPATH
MISS A.N. BOWMER	MRS. L.M. ELDRIDGE (to 15.4.61.)
MISS M.G. DUGUID	MRS. C.D. CONSTABLE
MISS H. ARNOLD	MISS M.M. STOWER (to 7.1.62.)
MISS C. OLDHAM	MISS N.L. HALL
MISS P.M. LEAVETT	MISS R.A. BARTON
MRS. J.M. WESTON	MRS. M.R. VAN ALTAAN (to 27.6.62.)
MRS. J.H. GADD	MRS. G. ODLING
MRS. L.K. LAWRENCE (Part Time)	MRS. M.K. PRESSEY
MISS I. HARRIS (Part Time)	MRS. M. WELLER (Part Time)
MISS I.L. MOBBS	MRS. W.R. HEYWOOD (Part Time)
MRS. V.I. BAYLIS (from 1.8.61.)	(from 4.4.61.)
MRS. D.M. RASOR (Part Time)	MRS. E.T. FERGUSON (from 29.8.61.)
(from 13.11.61.)	MRS. J.P. WILLCOX (from 15.1.62.)

*Tuberculosis Visitors:*

MRS. K.M. PARKES	MRS. M.J. MOORE.	MRS. C. EARWAKER
------------------	------------------	------------------

*Occupational Therapist (T.B. Cases):*

MISS Z.E. MERCER.

*Matrons of Day Nurseries:*

Goodmayes Lane ... ..	MRS. E. DROWER.
Ley Street ... ..	MISS G.M. GROSS.

*Administrative Assistants:*

MISS H.M. NUNN (Part III Services).  
E.S. JENKINS (School Health Services).

*Domestic Help Organisers:*

MRS. L.G. LAWRENCE.  
MRS. K.M. BEDWELL.

*Chiropodists:*

MR. F.W. GIBSON, M.Ch.S.  
MISS M.I. MERCER, M.Ch.S.

PART TIME:—

**Regional Hospital Board.**

*Surgeon in charge of Orthopaedic Clinic:*

H.G. KORVIN, D.M., F.R.C.S.

*Ophthalmologists:*

H.J.R. THORNE, M.B., B.S., D.O., D.O.M.S.  
P. LANCER, M.B., B.S.

**Officers of the Public Health Services – continued.**

*Surgeon in charge of Ear, Nose and Throat Clinic:*

MARGARET M. MASON, M.A., F.R.C.S.

*Physician in charge of Paediatric Clinic:*

A. RUSSELL, O.B.E., M.D., M.R.C.P.

*Child Guidance Clinic:*

*Consultant Psychiatrist:*

W.P. GURASSA, M.D., M.R.C.P.

*Psychiatrist:*

H.J. ALTSCHULOVA, M.D.

*Cerebral Palsy Unit:*

*Consultant:*

H.B. LEE, F.R.C.S.

*Orthoptist:*

MISS M.E. TOWNSEND, D.B.O. (to 15.12.61.)

MISS M. LEWIS (from 20.12.61.)

*Physiotherapist:*

A. BRAND, M.C.S.P.

**Essex County Council**

*Assistant Dental Officers (Part Time):*

R.J. NEWMAN, M.B.E., L.D.S., R.C.S. (Eng.), J.P.

R.A. SOAR, B.D.S.

R.C. BIGMORE

W.V. VICTORS, L.D.S., B.D.S.

G.H. WILLSON, L.D.S., R.C.S. (Eng.) (to Whole Time from 7.5.62.)

N.B. DAVIS, B.D.S. (from 17.7.61.)

MISS S. STEPHENS, B.D.S. (from 31.7.61.)

N.D. GLICKMAN, L.D.S. (from 25.9.61.)

MISS A. PETERS, L.D.S., R.C.S. (Eng.) (from 3.4.62. to 27.6.62.)

Y.J. TOOLSY, B.D.S. (from 31.5.62.)

J.A. AKINOSI, B.D.S. (from 1.8.62.)

*Child Psycho-Therapists (Non-Medical) (Part Time):*

MISS L. FOLKART, B.A.

MRS. D. HANDJA

*Speech Therapist (Part Time):*

MRS. B.J. TINGEY, L.C.S.T.

*Chiropodists (Part Time):*

MR. R.J.P. BUNDER, M.Ch.S. (from 2.1.61.)

MR. C.K. BOWER (from 10.7.61.)

**Ilford Borough Council**

*Public Analyst:*

J. HUBERT HAMENCE, M.Sc., Ph.D.



## Preface

---

Telephone:  
VALEntine 3401

PUBLIC HEALTH OFFICES,  
ILFORD.

July, 1962.

Mr. MAYOR, LADIES and GENTLEMEN,

I submit herewith the Annual Report of the Health Services for the year 1961.

With an Infant Mortality Rate of 15.79 and adjusted Death Rate of 11.5, and other indices remaining much as before, it is my pleasure to report that the health of the borough is being well maintained.

Mr. Hocking, Chief Clerk of the Department, retired in November 1961, after practically 30 years in that post. His departure is much regretted. He was the last remaining official link on the administrative side between the borough and county staffs. I asked Mr. Hocking to write a review of the changes he had seen in these 30 years; this review follows and is the reason why my preface this year must be brief.

I must, however, mention one novelty in local government introduced this year, the Ten Year Development Plan. The pleasure in looking ten years ahead is somewhat dimmed by the knowledge that in three years, with the Re-organisation of Local Government in Greater London, the basis of the plan will be completely altered.

### DOCTOR OR DISTRICT

A problem of immediate importance in the work of the health visitor (HV) is whether she is to be attached to a geographical district (as at present) or to the practice of a doctor (as some doctors would insist, and the Ministry of Health recommend). The former practice many would consider "out of date" and the latter "modern and progressive". Even at the risk of being considered backward, I feel it essential that the logistics of the position must be fairly presented.



In Ilford approximately 20 HVs must work with 70 GPs; this in itself makes any exclusive arrangement at present impossible. But there is a further problem resulting from free choice of doctor (and free choice of patient). With the help of the Executive Council for Essex an investigation has been made in a street adjacent to the surgery of a local doctor who is most anxious to have his own HV. In that street are the patients of 13 GPs (three of whom have their practices centred outside the borough). Thus in that street 13 HVs (half of our staff) will be practising and often more than one (and maybe strangers to each other) serving the same household. Each individual HV will have clients in each ward of the town, and some in adjacent boroughs. Files and records will be in confusion. This cross-movement chaos adds to the harmful effect such a practice would have on the fundamental basis of the HV's professional activities. She is no longer purely a medical auxiliary whose work is confined to helping a specified physician, but a social worker as well, whose client may not even be consulting a doctor. She is interested in the client's family, relations, house, street, school, club, neighbourhood, clinic, friends, neighbours, place of work, park, pub, and indeed everything that goes by the name "local" and the smaller the area she has to cover the better will be her local knowledge. I am not suggesting she should not co-operate with the family doctor. This co-operation should be as close as possible, but each GP should co-operate with more than one HV, who cannot be exclusive to one practice.

I am aware that exclusive allotment of HVs to GP practices works in certain areas. I feel sure that this is only because in most cases the practice concerned is the main one in the area, or the GP is the only one amongst many colleagues who really appreciates and uses the HV's services.

Exclusive allotment of HVs to GP practices, if generally carried out, will only lead to confusion and a decline in the quality of the social work that the HV is able to do.

I must once again acknowledge the help given to me by my staff and fellow Chief Officers. The support of the members of the Council, Chairmen, Vice-Chairmen, and members of the Ilford Borough and Essex County Committees with which the department is concerned has been most encouraging.

Finally, again I wish to thank the numerous helpers in a number of voluntary societies for their continued and essential help.

I have the honour to be

Your obedient Servant,

I. GORDON,

Medical Officer of Health.

*Postscript (from a letter received in the Public Health Department):-*

"I am writing to ask you, if you have any vacancies, in the "Valentines Mansions"\*, as I have heard how very nice it is there for elderly people, and I am wanting to find some-where for my mother-in-law."

\*The Public Health Department.



## LOOKING BACK

On taking up my duties in Ilford in April 1932, Dr. Burton was the Medical Officer of Health, a Chief Officer with a definite plan of action which defied much opposition, especially in the mid 1930s, when the extensions to the Maternity Home and Isolation Hospital were hotly debated in Committees and Council, but Dr. Burton, with the unflinching support of his Chairmen and Committee Members won through and the subsequent new buildings at both Institutions remain a tribute to his and their progressive outlook.

Dr. Burton was one of the pioneers in the campaign for Diphtheria Immunisation, and was prepared to contest the issue with Anti-Vivisectionist speakers in Hyde Park. He was a Barrister-at-law, and I recall many sessions with him poring over legal books etc., e.g. on the Public Health Acts, or the examination of the provisions of the Ilford Corporation Act of 1937; in the latter case a great effort being made to enlarge and strengthen the existing Sanitary Provisions.

During the period 1932-1945 the emphasis of the department's work was on the control of infectious diseases, food sampling, overcrowding surveys, the extensions already referred to, building of the Mayesbrook Clinic, and the introduction of the four war-time day nurseries. During the war years the department's work was greatly disrupted, much time, perforce, being devoted to the inception and maintenance of the First Aid Posts, evacuation of expectant mothers and many other unusual tasks, made more difficult by staff shortages and the bombing.

Dr. Burton was, unfortunately, for some years much troubled with his health, and his retirement on medical grounds in September 1945 was greatly regretted by all.

Following Dr. Burton's resignation, Dr. Weir, the deputy, took up the reins of M.O.H., and was faced with the task of re-assembling all the Health Services from the effects of the war, which he set about with great enthusiasm. Hereabouts the provisions of the Education Act 1944 took effect, and the Borough School Medical Officer became Divisional School Medical Officer after lengthy discussions at Committee level over the Delegated Powers. Worse was to follow, consequent on the National Health Service Act 1946, operative on 5th July 1948, from which date the North East Metropolitan Regional Hospital Board took over both the Isolation Hospital and the Maternity Home, and the Maternity and Child Welfare services came under the jurisdiction of the Essex County Council, the new Local Health Authority. The loss of the control of the two Institutions



and the unfettered administration of the M. & C.W. Services was much regretted, but here, maybe, is not the place to record any disadvantages arising from the transfer of these Services. It can be said that multitudes of letters, returns and discussions accompanied the transfer. In the case of the Isolation Hospital and Maternity Home, the department faded out, though for some months after July 1948 we carried on most of the day to day administration of these Institutions on an agency basis. As regards the former M. & C.W. Services, now to be known as Personal Health Services under Part III of the National Health Service Act – we remained in close association, in fact for 2-3 years they were much as before and the several new services which followed were spurred on by the Act. For this new set up Dr. Weir became Area Medical Officer, general policy being the responsibility of the County Medical Officer of Health at Chelmsford.

Dr. Weir resigned in February 1950 to take up the appointment of M.O.H. with the Royal Borough of Kensington and the Metropolitan Borough of Chelsea, a departure much regretted by the staff and his many friends.

In reflecting on the many changes which have occurred in the field of *environmental health* over the 29½ years, one is struck by the control of a number of the infectious diseases, e.g., smallpox, typhoid and diphtheria, with tuberculosis on the point of control, but other problems arose with the increasing incidence of poliomyelitis and food poisoning, both calling for close investigation, and occasional field surveys.

The new Food and Drugs Act and Regulations thereunder have made for many improvements in the control of foodshops, cafes etc. and in the inspection and sampling of food, milk and ice cream, not forgetting the lectures, with film strips, on food hygiene, given by the Public Health Inspectors to food handlers. The Clean Air Act 1956 and the making of smokeless zones was a new and necessary feature, as also the Housing Act 1957 (attack on slum clearance, still probably the most predominant factor and a link with care and welfare of the aged), and the Litter Act 1958. Another problem was radiation hazards. The welfare of the old folk – a national problem – demanded attention and, while this was, by statute, an Essex County Council function, a lady welfare officer was appointed by the Borough Council and commenced duty in April 1952, and her duties have yearly increased in scope and value. Together, they indicate important steps forward in environmental health and show the ever-widening functions of the department's work in this field.

Public Relations – generally associated with relations between the Local Authority and the public (the ratepayers) has, since the war,



received much attention. For some 6 years each newly elected Councillor to the Borough Council, has been sent a synopsis of all the department's activities with an invitation to visit, raise any points desired and be introduced to the actual methods employed in the Sections (I.B.C. and E.C.C.). This has been well received. A rather unique feature in this field was the holding in 1958 of a public opinion poll on a small scale, approximately 500 questionnaires being distributed to members of the public in receipt of our services, asking for complaints and suggestions. The results were very satisfactory and reassuring and were published in a medical journal. Earlier in the year a 3-day Seminar on Public Relations, organised by the Central Council for Health Education, was held at the Public Health Offices, at which all branches of the health services attended and where we critically examined our procedures before experts.

Health Education functions have grown considerably and continue to do so. In the 1930s a few pamphlets were issued, e.g. summer diarrhoea, fly pests, diphtheria immunisation. Now the many leaflets and posters embrace numerous aspects of health – from the expectant mother to old folk – including sex education, smoking and lung cancer, and home accidents. All this is supplemented by lectures (often with films) by the medical and nursing staff, public health inspectors, welfare officer for old folk, and domestic help organisers.

That one of the Assistant County Medical Officers devotes a portion of his time to health education indicates the importance of this subject in the present day health services. In 1955 the department organised a Health and Home Safety Exhibition at a business premises in the town, depicting actual treatment sessions, food hygiene, with lectures on health topics. I wish the hard work involved were rewarded by bigger attendances of the public.

The post-war years witnessed the inception of several new Clinics – the Paediatric, Child Guidance, Speech, Enuresis, Orthoptic and Chiropody – also the opening of the Manford Way (1951), Kenwood Gardens and Heathcote Avenue (1960) Health Services Clinics, which enabled several of these clinics, as also the Ante-Natal, Ear Nose & Throat, Dental, Orthopaedic, Poliomyelitis Vaccination, Ophthalmic, and Diphtheria Immunisation Clinics to be held at them, as demand occasioned, with modern facilities for staff and patients.

Other growth features in the *Personal Health Services* were:  
 (i) Domestic Help Service, inaugurated in 1946, with a part-time Organiser and 15 helps; to-day there are two full-time Organisers, two clerical



assistants and 150 helps, giving assistance to 1,900 cases (approximately) a year; (ii) Convalescent Facilities for mothers and infants, over 70 cases being sent away in 1960; (iii) Loan of Sick Room Equipment – 5 articles loaned in 1949, increasing to 1147 in 1960; (iv) Vaccination against Poliomyelitis – at the end of 1960, a total of 49,399 primary courses had been completed; (v) Whooping Cough Immunisation; (vi) Night Attendant Service; (vii) Infant Welfare Centres, many now held at premises with much improved and modern facilities; (viii) Distribution of National Welfare Foods (taken over from the Ministry of Food in 1954); (ix) The ever-widening scope of the work of the Health Visitors, who have now entered the field of the General Social Worker; (x) District Midwifery Service – in 1932 there was one district midwife employed by the Ilford Council; she cycled the area to attend her cases (there were also private midwives in the Town): the Midwives Act of 1936 introduced a salaried municipal district midwifery service and from that date the service greatly expanded: at present there is a non-medical supervisor, 9 full-time and 2 part-time midwives; all the midwives are qualified to administer gas and air analgesia and their labours have been rightly eased by five being allocated County cars and four granted an allowance to use their own cars on official duties; Midwives' Ante-Natal Clinics are now an important feature, being regularly held at five Clinic premises.

The infant mortality rate (deaths per 1,000 live births) is often quoted as an index to the health of the district, and Ilford's figures deserve recognition. In 1932 the rate was 39.8 (79 deaths under 1); in 1960, 17.5 (44 deaths) – both considerably under the national average.

Since the introduction of the National Health Service Act a feature has been the sociological side of the work, reflected in the emphasis now attached to the individual, as distinct from the community, in respect of the Personal Health Services.

The *School Medical Services* can also point to increasing services. In 1932, there was a school population of 18,187; in 1960 it was 23,383 and, in addition, the Service is now responsible for the medical supervision of the two Boarding Schools in Surrey and Oxfordshire. The Child Guidance Clinic staff and treatment sessions have increased and reference has already been made to the several new Clinics (Specialist and Other) which serve both the school and pre-school child (an economic arrangement for all staff).

One interesting and important experiment was the provision in 1950 of a small class for spastic children at the Benton School for the Handicapped. Its success was such that a separate Cerebral Palsy Unit was



provided at the former Becontree Day Nursery in 1955, and its inception may be attributed largely to the industry and enthusiasm of Dr. Gordon and Dr. Gross, and the Unit was one of the few then under the control of a Local Education Authority. Another step forward – plans have been approved for the building of a new school for the physically handicapped. This will be one of the most advanced in the country, incorporating the Cerebral Palsy Unit, with a small pool for hydrotherapy, and a nursery class for earlier diagnosis.

B.C.G. Vaccination against tuberculosis commenced in 1950, at the outset for children of 13 years of age attending secondary modern schools, in 1960 extended to include all pupils over 13 and students at Universities and Teaching Colleges, and in 1961 further extended to children of 10 years of age and upwards, in the latter cases at the discretion of the Divisional School Medical Officer.

Over the years attention is drawn to the decline in the incidence of ringworm and uncleanliness of head and body in school children. In the pre-war days many school children were found with defective footwear; this is now, fortunately, almost unknown, but the trend in modern styles of children's footwear has caused comment and a Foot Survey in 1960 of Ilford school children in the age groups 9-11, carried out by an Assistant Medical Officer, suggests that the ability readily to buy shoes has brought a new hazard in footwear.

Strides have been made in the past few years in the ascertainment and placing of handicapped children, particularly in the immediate past years with partially deaf and educationally subnormal children, but the shortage of vacancies in special schools persists, but not to the same extent as pre-war. Facilities for operations for tonsils and adenoids have much advanced, the waiting list is very short and the operations performed at a local hospital by the Specialist attending our Ear Nose and Throat Clinic.

On reviewing the Ophthalmic Clinic workings, a somewhat large number of children are still prescribed spectacles; one might expect that the overall improvement in community health would reduce the incidence of defective vision. Could it be another case of improved standards of ascertainment, and does T.V. viewing have any effect? The inception of the Orthoptic Clinic enables children to have treatment for squint etc. quickly and locally.

A visit to the four Health Services Clinics makes one aware of the modern appliances, fittings, etc. especially in the Orthopaedic and Dental



Clinics; the latter clinics are provided with x-ray facilities which obviate delay to the dental officers and travelling for the patients. I recall the small room and the chair, used for anaesthetic sessions, at Valentines Mansion, in the 1930s. The provision at these four Clinics (also at Newbury Hall) of office accommodation for the Health Visitors, serving the adjacent areas, has saved much travel time and enabled many records to be readily available to the Health Visitors.

Sessions of most of the Specialist and Other Clinics are now held at the four Health Services Clinics, thus enabling the facilities to be reasonably convenient to most users; we have followed the modern trend of reaching out to the people.

Much has been written in the press as to the need for full co-operation in all branches of the National Health Services. Few M.O.Hs. have striven more sincerely than Dr. Gordon to achieve this. I wish he had had more satisfying results, but I know he will go on with his efforts.

It is my firm opinion that the health services administered in the Borough are modern, efficiently run, and I believe the majority of those who use the services would agree (the public opinion poll held in 1958 supports this view). Public Health is, and must be, a developing subject with new facets. As the demand for services alters, so do the services.

Loyalty to, and enthusiasm for, their duties has been the creed of the administrative and clerical staff with whom I have been fortunate to serve.

An important contrast to the numerous changes in the personnel and buildings – I have occupied the same room in the Georgian splendour of Valentines Mansion throughout my 29½ years.

I leave a united and happy team, obsessed with one ideal, the furtherance of the health services for the benefit of all residents and their continuing progress will be a delight to me – I shall never lose touch.

F.J. HOCKING,  
Chief Administrative Assistant.

Public Health Offices,  
ILFORD.  
November, 1961.

## SECTION A.

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

	(Land and Inland )	
Area (in Acres) ... ..	( Water ... .. 8,404 )	8,411
	(Tidal Water ... .. 7 )	
Population (Census 1921) ... ..		85,194
" (Census 1931) ... ..		131,061
" (Census 1951) ... ..		184,706
Registrar-General's Estimate of resident Population:-		
June 30th 1958 ... ..		179,000
" 1959 ... ..		178,600
" 1960 ... ..		178,520
" 1961 ... ..		177,760
Number of inhabited houses (April 1st, 1961) according to Rate Books (approx.)		52,808
Rateable Value - April 1st, 1961 (Houses and Land) ... ..		£3,100,813
Sum represented by a penny rate, April 1st, 1961 (approx.) ... ..		£12,780
	1960-61	1961-62
Combined Rate (all services) ... ..	21s.4d.	23s.0d.
	in the £	in the £

The following figures as to unemployment were supplied by the Ministry of Labour:-

	Males	Females
As at December, 1960 ... ..	464	74
As at December, 1961 ... ..	411	69
	1961	1960
Live Births ... ..	2,533	2,512
Live Birth rate per 1,000 population - Crude rate ... ..	14.25	14.07
- Adjusted rate ... ..	14.25	14.07
Illegitimate Live Births per cent of total live births ... ..	3.79	3.78
Stillbirths ... ..	40	37
Stillbirth rate per 1,000 total live and stillbirths ... ..	15.55	14.52
Total Live and Stillbirths ... ..	2,573	2,549
Infant deaths (under 1 year) ... ..	40	44
Total infant deaths per 1,000 total live births ... ..	15.79	17.51
Legitimate " " " legitimate " ... ..	15.18	18.20
Illegitimate " " " illegitimate " ... ..	31.25	0.00
Neo-natal mortality rate per 1,000 live births (first four weeks) ...	12.24	15.13
Early Neo-natal mortality rate per 1,000 total live births (under one week) ... ..	10.66	13.14
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths) ... ..	26.04	27.46
Maternal deaths (including abortion)... ..	1	1
Maternal mortality rate per 1,000 live and stillbirths ... ..	0.39	0.39
Deaths (all causes) ... ..	2,065	1,970
Death rate per 1,000 population - Crude rate ... ..	11.62	11.04
- Adjusted rate ... ..	11.50	11.26
Percentage of total deaths occurring in public institutions ... ..	52.95	48.08
Deaths from Cancer (all ages) ... ..	401	400
" " Measles (all ages) ... ..	1	Nil
" " Whooping Cough (all ages) ... ..	Nil	Nil
" " Diarrhoea (under 2 years of age)... ..	Nil	2



## 1. RAINFALL

Total rainfall registered in the district during the year was 23.51 inches; the greatest fall in 24 hours was registered on 4th May, 1.17 of an inch; whilst the longest duration occurred on 19th November, 16.4 hours. December was the wettest month.

## 2. COMPARABILITY FACTOR – BIRTHS AND DEATHS

The Registrar-General supplies each town with figures known as the "area comparability factor" in connection with the birth and death rates. These factors make allowance for the way in which the sex and age distribution of the local population differs from that for England and Wales as a whole. The death rate area comparability factors are also adjusted specifically to take account of the presence of any residential institutions in each area, and the birth rate area comparability factors are adjusted specifically to take account of the presence of sterile population in institutions for the mentally ill or mentally deficient in each area.

The figures for Ilford are 1.00 for the birth rate and 0.99 for the death rate, and these are used in calculating these rates in Table 1A.

When local crude birth and death rates have been adjusted (by multiplication by the appropriate area comparability factors) they are comparable with the crude rate for England and Wales or with the corresponding adjusted rate for any other area.

## 3. BIRTHS

The number of births registered (adjusted for inward and outward transfers) during the year was 2,533.

	Males	Females
Legitimate ... ..	1,280	1,157
Illegitimate ... ..	45	51

i.e., 3.8 per cent of the births registered were illegitimate.

The percentage of illegitimate births registered in the previous 10 years was 3.8 (1960), 3.7, 3.3, 2.7, 2.8, 2.6, 2.2, 3.0, 3.9, 2.9.

The adjusted birth rate, calculated on the estimated population of 177,760 is 14.25 per 1,000.

## 4. DEATHS

The total number of deaths of Ilford residents was 2,065. This is obtained by taking the total number of deaths registered in the district (1,660), subtracting the deaths of non-residents, occurring in the district (225), and adding the deaths of Ilford residents registered as having died in other districts (630).

The number of deaths of non-residents registered in the district was as follows:-

King George Hospital ... ..	70
Chadwell Heath Hospital ... ..	40
Claybury Hospital ... ..	52
Goodmayes Hospital ... ..	28
Other Non-residents ... ..	35
Total ...	225

The number of deaths of Ilford residents registered as having died in other districts during the year was as follows, and includes deaths at the following Institutions:-

Oldchurch Hospital, Romford ... ..	59
Wanstead Hospital ... ..	42
Langthorne Hospital ... ..	23
London Hospital and Brentwood Annexe	90
St. Bartholomew's Hospital ... ..	17
Rush Green Hospital ... ..	12
St. Joseph's Hospice, Hackney ... ..	15
East Ham Memorial Hospital... ..	18
St. George's, Hornchurch ... ..	93
Dagenham Hospital... ..	15
Barking Hospital ... ..	14
Whipps Cross Hospital ... ..	45
Plaistow Hospital ... ..	11
In other Hospitals, Institutions and residences outside the Ilford district	176
Total ...	630

The adjusted death rate, calculated on the estimated population of 177,760 is 11.50 per 1,000.



Inquests. — During the year, 76 inquests were held on deaths occurring in Ilford, 61 on Ilford residents, and 15 on non-residents.

The ages at death were as follows:-

Under 1 year	1-2 years	3-5 years	6-15 years	16-25 years	26-45 years	46-65 years	66 years and upwards
—	—	—	1	7	17	22	29

#### DEATH RATES FROM CANCER, 1961.

The following Table shows the death-rates for 1961 for Ilford, compared with the provisional death-rates for England and Wales for the same period per 1,000 population; the figures having been supplied by the Registrar-General:-

	Ilford	England and Wales
Cancer of lung and bronchus ... ..	.591	.494
Cancer, other forms... ..	1.665	1.670

5. TABLES OF VITAL STATISTICS. — Table I gives a comparative statement of the birth-rate and death-rate for the past five years.

Table IA gives a comparison of the vital statistics of Ilford with England and Wales, and the London Administrative County.

Table II gives a classified statement of the causes of death in 1961, arranged according to the age groups at which deaths occurred.

TABLE I. - VITAL STATISTICS OF WHOLE DISTRICT DURING 1961 AND PREVIOUS YEARS

Year	Resident population, estimated to middle of each Year	Births			Total Deaths Registered in the District		Transferable Deaths		Net Deaths belonging to the District			
		Uncorrected Number	Net (a)		Number	Rate (b)	of Non-Residents registered in the District	of Residents not registered in the District	Under 1 year of Age		At all Ages	
			Number	Rate					Number	Rate per 1,000 Net Births	Number	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1957	179,600	1,788	2,219	12.35 (c)	1,713	9.5	150	601	38	17.1	2,164	12.05 (c)
1958	179,000	1,785	2,228	12.45 (c)	1,622	9.1	241	604	37	16.6	1,985	11.09 (c)
1959	178,600	1,802	2,216	12.41 (c)	1,682	9.4	257	612	33	14.9	2,037	11.41 (c)
1960	178,520	1,889	2,512	14.07 (c)	1,564	8.8	232	638	44	17.5	1,970	11.04 (c)
1961	177,760	1,928	2,533	14.25 (c)	1,660	9.3	225	630	40	15.8	2,065	11.62 (c)

(a) The net number of births is obtained by taking the uncorrected number of births supplied by the local Registrar and adjusting for inward and outward transfers.

(b) Calculated on the estimated resident population.

(c) Crude rate.



TABLE IA.

Table showing comparison between the Birth-rate, Death-rate, etc., of Ilford, London (Admin. County), and of England and Wales for the Year 1961.

	Rate per 1,000 Population	Rate per 1,000 Total (Live and Still) Births	Rate per 1,000 Population	Rate per 1,000 Related Live Births	Death rate per million Population				
					Live Births	Stillbirths	Deaths (all ages)	Deaths under 1 year	Whooping Cough
England and Wales ... ..	17.4	19.1	12.0	21.6	.58	.22	153.8	1.27	649
London Admin. County ... ..	18.7	18.3	11.9	21.5	—	1.25	77.4	.31	763
ILFORD (Estimated Population mid-1961 = 177,760) ...	14.25	15.5	11.50	15.8	—	—	107 <sup>1</sup>	—	788 <sup>2</sup>

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

<sup>1</sup> 19 deaths.

<sup>2</sup> 140 deaths.





## SECTION B.

## GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

1. (i) PUBLIC HEALTH OFFICERS OF THE AUTHORITY. – Vide list at the beginning of this report.

(ii) HOME NURSING. – This service is administered by the Essex County Council. A report of the work performed during 1961 will be found in Part III Services section.

(iii) LABORATORY FACILITIES. – Pathological specimens are now sent to the Bacteriological Laboratory, Oldchurch Hospital, Romford, for examination.

(iv) BYELAWS EXIST FOR:-

Prevention of Nuisances.

Cleansing of footways and pavements, and cleansing of earth closets, privies, ashpits and cesspools.

Dealing with common lodging houses and houses let in lodgings.

Houses let in lodgings or occupied by members of more than one family. (Sec. 84, Ilford Act, 1937.)

Slaughterhouses and humane slaughtering of animals.

Pleasure Fairs. (Sec. 59, Essex C.C. Act, 1952.)

Tipping of Dust, Spoil, and Refuse. (Sec. 85, Ilford Act, 1937.)

For securing the cleanliness and freedom from pollution of tanks, cisterns and other receptacles used for storing water used or likely to be used by man for drinking or domestic purposes, or for manufacturing drink for the use of man. (Sec. 53, Ilford Improvement Act, 1898.)

Nuisances in connection with the removal of offensive or noxious matter.

Depositing of Rubbish, etc. (Sec. 249, Local Government Act, 1933.)

Establishments for Massage and Special Treatment. (Essex C.C. Act, 1933, Part IV.) Inspections of licensed establishments are carried out quarterly. During 1961, two new applications and 28 applications for renewal of licences were received. The Council granted the licences in respect of these establishments. The licences expire on 31st March of each year.

Hairdressers' and Barbers' Premises. (Essex C.C. Act, 1933, Part VI). During 1961, 74 visits of inspection were made by the Public Health Inspectors to these premises.

Camping Grounds and Moveable Dwellings. (Essex C.C. Act, 1933, Part IX.)

Prevention of Fouling of Public Footway by Dogs.

(v) There are three local Acts in operation – (1) The Ilford Improvement Act, 1898, which has important sanitary provisions; (2) The Ilford Urban District Council Act, 1904, the Section which deals with the control of tuberculosis is repealed, the powers of the Corporation now being contained in the Food and Drugs Act, 1955, and (3) The Ilford Corporation Act, 1937.

(vi) ESSEX COUNTY COUNCIL ACT, 1952. – This Act came into operation in 1953. Reference is made in this Report in appropriate sections as to action taken under the Act.

(vii) NURSES AGENCIES ACT, 1957. –

The Essex County Council on application by the Ilford Council, delegated to them, the powers conferred upon the County Council by the Act, subject to certain conditions.

Agencies are inspected before the issue of a licence, and thereafter at intervals of not more than once a quarter.

The Medical Officer of Health and Deputy are authorised under Section 3(2) to enter and inspect any such licensed premises in the Borough.

No application for a licence was received during 1961.

(viii) NATIONAL ASSISTANCE ACT, 1948. – The County Welfare Officer has kindly supplied me with the following information.



"The County Welfare Committee is responsible to the County Council for functions under Part III of the National Assistance Act, 1948, the main aspects being:-

- (a) the provision of residential and temporary accommodation, and
- (b) welfare arrangements for blind and other handicapped persons.

The following statistics show the extent to which the main services provided by the County Welfare Committee under the National Assistance Act, 1948, have been afforded to persons residing within the Borough of Ilford during the year 1961:-

(1) Residential and Temporary Accommodation

- (a) Number of Ilford residents provided with residential accommodation at 31.12.61:- 261.
- (b) Aged persons admitted to hostels and other residential establishments:- 77.
- (c) Other persons admitted to residential accommodation:- Nil.
- (d) Persons admitted to temporary accommodation:- Adults 9; Children 28 = 37.

The County Council have two Old People's Homes in Ilford - at Pegram House, Longhayes Avenue, Marks Gate, accommodating 47 residents, and at Heath Gate, Chadwell Heath Lane, Chadwell Heath, which accommodates 60 residents. Additionally, an annual grant is made by the County Council towards the cost of welfare services and amenities provided by the Borough in their special accommodation for old people at Stoneleigh Court.

(2) Blind Persons

The numbers of registered blind, partially sighted and defective sighted persons resident in the Borough as at 31st December, 1961, were as follows:-

(i) Registered as blind	263
(ii) Partially sighted	72
(iii) Defective sighted	20

all of whom were under the supervision of the County Council's Home Teachers. During the year 6 blind residents participated in the

Home Workers' Scheme operated through the agency of the Royal London Society for the Blind, and 2 were employed in Workshops for the Blind. In addition, 32 blind and 10 partially sighted persons were employed in open industry. During 1961, 2 blind residents in the Borough were admitted to homes for the blind.

### (3) Deaf or Dumb and other Handicapped Classes

The Welfare Committee of the County Council has continued to develop its activities in respect of welfare services for permanently and substantially handicapped persons (other than blind, to which reference is made above) as provided for under Section 29 of the National Assistance Act, 1948; in addition to direct provision such as special equipment on loan, grants have been made towards the cost of structural adaptations to premises to meet special needs, etc., the fullest co-operation has been maintained with specialised organisations in this field of welfare services, many of these bodies acting as the Council's agents in this connection.

323 handicapped persons in the Borough of Ilford have registered with the Welfare Department. They are visited by officers appointed to assist them with handicrafts and individual needs. Many of them attend the Occupational Centres for the handicapped at Barking and Ilford, the latter being opened in mid-1961."

In Ilford the scheme for other handicapped persons, so far as voluntary action is concerned, has been delegated to a Sub-Committee of the Ilford Social Service Association of which the Medical Officer of Health is Chairman.

### NATIONAL ASSISTANCE ACT, 1948.

(a) Section 47 provides for the removal of persons to hospital who are unable to devote to themselves proper care and attention.

Two persons were dealt with during the year. They were females aged 72 and 87 years, respectively.

(b) Section 50 requires a Local Authority to arrange for the burial or cremation of a person who has died or been found dead, and where it appears to the Local Authority no suitable arrangements are being made for the disposal of the body.

The burials of five persons were dealt with during the year:- a male, aged 77, who died at King George Hospital; a male, aged 84,



who died at home; a male, aged 21, found dead at Open Air Swimming Pool; a female, aged 59, who died on arrival at King George Hospital; and a male, aged 54, who died at home.

Miss M.J. Copping, Welfare Officer for Old Folk, reports as follows:-

"During the year 1961 I made 702 visits to the homes of elderly persons or their relatives. Visits to the relatives occasionally entailed a journey to another area and usually took place during evening hours. Most of these visits to relatives were made at the request of the relatives themselves, and such requests are always welcomed by me, as almost invariably they are an indication of a genuine interest in the old person's welfare and of family solidarity. Those relatives who have no inclination to fulfil their responsibilities, or who are trying to dodge them, do not ask to be visited.

I also interviewed 308 persons either at the Public Health Offices, or elsewhere to suit the convenience of the persons concerned.

For instance I saw a few in public restaurants where we talked while we had a cup of tea together. Others I met in the house of a neighbour who kindly offered the use of a room for an hour to make privacy possible for an old person unable to travel to the Public Health Offices, and without privacy in their own accommodation.

Among these, were elderly tenants of rooms in owner occupied houses, whose relationships with their landlords were strained or even openly hostile. Others were living in disharmony with offspring or other relatives and wanted to keep the interview secret. A few were living with a senile partner, and consequently could not have an uninterrupted conversation in their own home.

In many of the cases where strained relationships were the primary problem the cause could readily be detected, but some were very complex cases and several visits were necessary before any clear picture of the situation could be formed. I try to persuade my clients to allow me to meet any other persons involved. There is much danger in hearing only one side of the story or in accepting the story of outsiders. I find that the public are predisposed to sympathise with every old person, but I am sorry to say that old age is not invariably the period of sweet reasonableness and endearing mellowness, that the uninitiated are inclined to suppose it to be,



and when some indignant onlooker tells me that dear old Mrs. Blank is abominably treated by her family or landlady I am sceptical.

On the other hand I have found instances where after painstaking probing, and extreme care upon my own part to be sure that my judgment was unbiased I have been forced to admit that deliberate unkindness was being meted out to an old person in the hope that he would find the situation so unbearable that he would seek accommodation elsewhere or consent to enter welfare accommodation against his inclinations. The cause for these cases is usually bitter resentment by younger persons at having to care for, or share a house with, someone who by reason of physical disabilities, or mental frailty, has become a tie or has developed repulsive or annoying habits etc., or at the worst is dependent, even if sweetly so.

I have great sympathy with the younger married woman who would like to seek employment outside the home to supplement the family income, or to broaden and enrich her own life, but who cannot do so because of an old person who cannot be left alone; and with the young mother who would like to take more outings and holidays with her children, or just be free to play with them and enjoy the various stages of their development, but who has to divide her time between them and a grandparent, who perhaps gives unwelcome advice about their upbringing, or who demands more personal attention than any infant requires.

Sympathy however is not enough, it must be translated into practical help, but so often the family want to dictate the form that such help should take. Nothing but permanent removal of the old person to the care of the state in state provided accommodation of some type will satisfy some of them. This is sometimes the right and only step to take and my experience is that where this is so, the step is usually suggested by the G.P. without the relatives having to actively press for it, although not always without a considerable delay, due to waiting lists. What I would like to stress here is that we cannot be expected to know that there is a problem unless someone brings it to our notice. Many families complain bitterly to me that no one cares about the old. Conversation with them reveals that they have suffered some problem in complete silence, expecting some official person to come searching it out. This is quite impractical. There are 25,000 or more elderly persons in Ilford any of whom may have, or be the cause of, problems of varying degrees.



Much of the resentment and friction which occurs in families where there is an old person is unnecessary. The primary complaint made to me is that the family cannot go out together and leave the old person. My experience is that there are very few old persons who cannot be left alone for a half day, or an evening while the family have some recreation. What few there are could have the occasional services of an official day attendant, of a volunteer from a church, or of a friendly neighbour. I have met with refusals from offspring to accept offers of such help. These same offspring may have been most bitter in their complaints about being tied to the house. A common reason for the reluctance to accept help, is a false sense of guilt about leaving the aged parent, or a false idea that should an accident occur during their absence, some official will censure them for being away from the house. Over protection of old persons often leads to a state of complete dependence and a genuine need to have someone at hand at every moment. I am frequently told "I do not let mother go out now as she might be run over", "I have told father that he will catch pneumonia if he goes out to his club in this weather". The habit of going out is broken, the incentive lost, once housebound there is a great temptation to the old person to become bedridden too. How much wiser it would be to advise the old people always to use a pedestrian crossing, and to cross with younger persons when possible, to see that they have a hot, nourishing meal and wear a warm vest before going out in wintry weather, and then let them go their way, thankful that they still have the strength and desire to get out and about.

Houseproudness is another frequent cause for the rejection of the assistance which would bring opportunities for relaxation, or allow a younger person to go out to business. Housewives who keep mother and father confined to a bedroom or to a chair rather than do away with the slip mats, or roll up the carpets which are a danger to shuffling feet are many. So are those who refuse to have a commode in the house or a bed on the ground floor because it would spoil the look of the room or disorganise existing routine. Meals-on-Wheels have often been refused by relatives who have said "I do not want a stranger to enter my house while I am out. They might spill some food or have muddy shoes". I am sorry to say that in a few homes the goods and chattels are valued above the comfort and well being of some or all of the human beings who make up the family. I try to remember that this may well be a manifestation of an anxiety neurosis built up by the strain of having to care for an old person. An excuse which I deplore is "what will the neighbours think if they see meals being delivered?" This fear of losing face



sometimes leads to an old person having to make do at midday with a stale sandwich and with tea put into a flask at breakfast time. If the person is well cared for and the relative's conscience clear does it matter one iota what any outsider thinks? If the relative is not happy about the care he or she is able to give but cannot improve upon it, then what neighbours think is of importance only if the said neighbours are willing to give practical help, or can give advice about obtaining practical help from some other source.

Many old people owe a great deal to neighbours who shop, cook, clean for, and comfort them both in times of sickness and in some instances, on a long term basis. I often marvel at what is done. There is a legend that in the British Isles true neighbourliness is found only in the Midlands and North. I say that the Southerner, admittedly more reserved in the main, is equally neighbourly in adversity, and if there are any delays or gaps in the official services I find that as long as the old person will permit it, neighbours willingly make good the deficiencies.

My advice to persons who have an ageing relative or friend living with them is this. If you wish to avoid a problem do all in your power in an unobtrusive way to encourage the ageing to remain independent. Never succumb to the temptation to wait upon them in such matters as washing and dressing them because you can do it for them much more quickly. If you do the old person will lose his skills and be unable to help himself when you are unwell yourself, or wanting to leave him alone; or he may so enjoy being pampered, and become so accustomed to having you with him that he will deliberately put on an act of helplessness and refuse to accept attention from any substitute person. Forget your fears about whether he may be run over, catch cold, fall downstairs or burn himself. In the same way that you let your young children find their wings by taking reasonable risks, so you must let your old folk retain their freedom by doing the same. Clipped wings will mean extra responsibilities for you, and a miserable aimless existence for them. Also, if the old person wishes to help with household tasks accept the offer. The result may not be as you would wish it, but most old people like to feel that they are being useful. I wince when a daughter says to me "I do everything myself, there is no need for mother to lift a finger". This sort of remark is most often made in a precisely neat clinically clean house, and I find more depressed withdrawn, apathetic old persons in such houses, than I do in homes which look a little the worse for wear and tear, and rather untidy.



A total of 906 cases were dealt with; 325 of which concerned persons not previously known either to myself or to the Health Visitors. The number of persons interviewed was 308, approximately half of which were old persons, and the remainder either relatives or friends of old persons. Visits to persons discharged from Hospital, principally from Chadwell Heath, numbered 100. A proportion were already known to me prior to admission and had been visited by me during the period immediately before admission. Some had to wait two or three weeks for a bed and these were helped by arranging domiciliary services, loan of sick room equipment and in some cases the special laundry service. It is not unusual for the relatives of persons waiting for beds to telephone or call at the office daily out of a false idea that we can do more to hasten admission. In fact a great deal of valuable time is expended in telling the same persons the same thing over and over again.

Seventy three cases were referred to me because the family were having difficulty in coping. Among these were a number where the daughter or daughter-in-law caring for the old person was elderly herself and not very fit physically. In one instance a niece aged 78 years and her husband 80 years were caring for an old lady of 96 years. These were wonderfully fit but were feeling the strain. The old lady was admitted to Hospital while they had a holiday by the sea, and she has since been admitted to Part 3 accommodation.

Forty-two of the old persons seen by me were referred to the Essex County Council Welfare Department for investigation with a view to being placed on the waiting list for Part 3 accommodation. Of these about 20 asked me to help them to apply. A further 12 were persons who had been patients in the Geriatric Unit, and been advised by Dr. Dunn not to continue to live alone. Some of these would have preferred to have gone to live with offspring, but offspring either had insufficient accommodation or did not want such an arrangement. While it is hard for the old person to bear deliberate rejection by his family it is I am sure harder still to have to live in a household where one is not really wanted. Some sons and daughters who say quite frankly that they have no affection for their parents and who do nothing at all for them will take them into their homes if they decided to make application for admission to state-provided accommodation. This is because of what neighbours or family friends may say if the old person is allowed to enter a Hostel or Institution. This can be disastrous for the old person, especially for one who is not able to get out to make contact with other people. It may mean that he is spending all his time with persons who resent his presence.



About 10 persons were advised by me to apply because they were living in rather squalid conditions and not keeping themselves clean. Among these were some who had lost heart following the death of husband or wife and some who were senile.

Forty-eight families appealed to me because they wanted a holiday away from home, but must first arrange care for an old person. Or they wished the old person to have a holiday but could not afford to pay for him. Holiday accommodation by the sea was found for several persons and some were assisted financially from the Mayor's Fund.

Some of the 48 were admitted to Private Guest Homes for the elderly, some of which very graciously consented to reduce their fees to make it possible. The balance was paid by the old persons themselves or their relatives. I often feel that relatives could help much more with these payments. Many families tell me that they cannot afford to make the slightest contribution and then reveal that they have booked a very expensive holiday abroad for themselves. Persons with a fairer sense of values would plan a less expensive holiday and use the balance to pay for the support of the old person. Some go as far as to claim part of the person's old age pension for rent even during the period when he is away from home. Also some persons book their own holiday accommodation early in the year and then appeal for care of the old person about 4 weeks or less from the commencement of the holiday. This is unavoidable if the person has just become ill or had an accident, but in many cases the family knew when they made their own holiday arrangements that the old person concerned could not be left alone in the house. I cannot take a firm line with these relatives as I would like to do because if their holiday is cancelled the old person is distressed. Quite frequently the old persons are mentally confused or very forgetful. Away from their customary surroundings and routine they become more so, and it is not unusual for me to receive an S.O.S. from a boarding establishment that one of my old persons has caused a disturbance, e.g. one hit the proprietor with an umbrella and then walked out of the house, another became intoxicated and quarrelled with other guests, several have wandered into the wrong bedrooms during night hours and others have been taken ill and had to be admitted to Hospital. I try to arrange for relatives to leave with the Proprietors and myself an address of where they will be staying, but if they are going abroad or touring the countryside this is not possible or of little use in an emergency, and it is left to me to sort out the immediate problem.



Journeys too have to be arranged as some old persons cannot travel on public transport because of a disablement, or they need escort to help them on flights of steps or escalators at railway stations. Lifts to the station have been given by friends and colleagues, and by various voluntary organisations, such as the Rotary Clubs, Toc H, etc. On one or two occasions the old person has been taken by car to the coast and brought back two weeks later. Enquiries about times of trains and sometimes the procuring of tickets in advance must be undertaken by me. If this demand continues and increases, some recognised scheme will be needed, both because of the special difficulties and the time taken up. It is fast becoming a full time job. The Essex County Council admit some of the old persons to Part 3 accommodation for 2 weeks but the demand is far greater than the number of beds that become available. An increase of such accommodation would, I believe, be the best solution.

In addition to those persons who can go to a home, Hotel or Part 3 accommodation are many for whom only a Hospital or a Nursing Home is suitable. Hospital care is free, therefore, I am receiving almost daily requests for my assistance in getting someone into Hospital. G.Ps. refer the public to me; if I am eventually able to persuade the G.P. that the approach should be direct to the Hospital, and not through me, I can relax until the Hospital decides that it cannot assist, when the family are again pursuing me to tell me that they are hoping that I will be able to bring about a reversal of the decision, or to arrange for Nursing Home fees to be paid from some statutory source.

Housing problems referred to me numbered 91. Some were subsequently awarded priority for Stoneleigh Court or ground floor old persons flats on medical grounds. Many were not eligible for rehousing. Among these were many who had adequate accommodation but were unhappy with married offspring. These problems remain more or less unchanged from year to year.

Among the 906 cases dealt with 127 were admitted to Hospital, 82 died in Hospital, and 70 died at home. There was only one case referred by a G.P. to the Medical Officer of Health for assistance in obtaining a Hospital bed. There were, however, cases which had to wait up to 3 weeks for admission and which were the subject of many enquiries and much misdirected criticism of the Department by relatives and interested persons.

As during other years I was invited to address several meetings and made many useful and pleasant contacts as a result. "

The laundry service for cleansing of soiled bed linen and personal clothing continued to operate throughout the year, proving of invaluable assistance in very difficult cases.

During the year 90 persons were assisted and 18,227 articles were laundered.

(ix) HOSPITALS, etc.

Chadwell Heath Hospital. – 173 beds are provided; 69 for general infectious diseases, 96 for geriatric cases, and 8 beds are used for ear, nose and throat cases.

Maternity Hospital. – 51 beds for reception of maternity cases are maintained at the Ilford Maternity Hospital.

King George Hospital. – The following is a return in respect of bed accommodation:-

Total number of Beds at 31st December 1961	Pay Beds 14 Amenity Beds 7	Other Patients				Children
		Medical		Surgical		
		Male	Female	Male	Female	
208	21	26	18	55	55	33

At 31.12.61. 4 beds were occupied by "chronic sick".

The above three hospitals are included in the Ilford and Barking Group. (Group 12 N.E. Metropolitan Regional Hospital Board).

Mr. H.F. Harris, the Hospital Group Secretary, informs me as follows regarding the proposed extensions to the King George Hospital.

"The latest position with reference to the King George Hospital Major Development Scheme is that it was included in the Government's White Paper issued in January, 1962, as a Scheme to be commenced before 1964/65. The number of beds is to be increased to approximately 300 and in addition nearly all Departments will be



replaced by larger up-to-date Units. In fact, the present set of plans which have been recently approved only allow for the retention of the six existing main Ward Blocks, the Administrative Block at the front of the Hospital and the main Nurses' Home. This Scheme is virtually the equivalent of supplying a new 300-bedded Hospital for Ilford.

Part of the War Memorial Grounds has now been acquired which will allow the majority of the proposed development to be carried out without having to demolish buildings in advance. This will obviously, reduce the number of stages in the building programme and, even more important, avoid the major disruption of existing services."

Psychiatric Hospitals. – There are two large Psychiatric Hospitals in the district, the Goodmayes Hospital, with 64 Resident Staff and 1,306 patients (males 588, females 718), and Claybury Hospital, with 183 Resident Staff and 2,038 patients (males 829, females 1,209) in residence on 30th June, 1961. (These Hospitals are Groups 21 and 20 respectively of the North East Metropolitan Regional Hospital Board.)

Other Institutions. – Australasian Medical Unit (Dr. Barnardo's Homes), Barkingside, has 60 beds in the Hospital and on 30th June, 1961, there were 31 Resident Staff and 34 patients.

Nursing Homes. – There are 2 private registered Nursing Homes in the district for medical and senile cases.

All Nursing Homes in the district are visited by the Medical Officer of Health and the Chief Public Health Inspector (or their deputies) quarterly and at other times when necessary.

#### (x) AMBULANCE FACILITIES: COUNTY AMBULANCE SERVICE.

The County Ambulance Service is provided and administered centrally by the Essex County Council.

An Ambulance Control at Ilford deals with all requests for ambulance transport arising in the whole of the Metropolitan Area of Essex. The Control is manned continuously, is in direct contact with all Ambulance Stations in the Metropolitan Area of the County and with the Divisional Control at Chelmsford. The Control which is equipped with two-way radio, is also in direct communication with ambulance vehicles operating in the area.

In cases of emergency it is only necessary to dial 999. All other requests for ambulance transport should be made, preferably in writing, to the Controller, Ilford Ambulance Control, Aldborough Road, Ilford. Requests for ambulance transport, other than emergency requests, are only accepted from Doctors, Midwives, Mental Welfare Officers and the medical staff of hospitals.

General medical practitioners, when arranging a patient's admission or first appointment at a hospital, inform the hospital concerned that ambulance transport is necessary and the hospital is then responsible for ordering the ambulance transport.

If any difficulty should arise in obtaining an ambulance, a call may be made direct to the Controller, Ilford Ambulance Control, Valentine 8822, or to the County Medical Officer of Health, County Hall, Chelmsford, Chelmsford 3231.

(xi) CLINICS AND TREATMENT CENTRES : MATERNITY AND CHILD WELFARE. — Infant Welfare Centres are held at the following premises:-

Chadwell Christian Mission Hall, Essex Road, Chadwell Heath (for residents of Chadwell Heath area) ... ..	Monday, 2.00 p.m.
Mayesbrook Clinic, Goodmayes Lane, Goodmayes (for residents of Becontree area) ... ..	Tuesday, 2.00 p.m.
St. John's Church Hall, Devonshire Road, Newbury Park (for residents of Downshall area) ... ..	Tuesday, 2.00 p.m.
Manford Way Clinic, Chigwell (for residents of the Ilford portion of L.C.C's. Hainault estate) ... ..	Tuesday, 2.00 p.m.
Marks Gate Clinic, Lawn Farm Grove, Chadwell Heath (for residents on Padnall Estate) ... ..	Tuesday, 2.00 p.m.
Kenwood Gardens Clinic, Gants Hill (for residents of Woodford Avenue area) ... ..	Wednesday, 2.00 p.m. and Friday, 9.30 a.m.
Heathcote Avenue Clinic, Clayhall (for residents of Barkingside and Clayhall area) ... ..	Wednesday, 9.30 a.m. and Wednesday, 2.00 p.m.



Cecil Hall, Granville Road, Ilford (for residents of the east side of Cranbrook Road) ... ..	Wednesday, 2.00 p.m.
Seven Kings Methodist Church Hall, Seven Kings Road (for residents of Seven Kings area) ... ..	Wednesday, 2.00 p.m.
St. Albans Church Hall, Albert Road, Ilford (for residents of Grosvenor Road area) ... ..	Wednesday, 2.00 p.m.
Cecil Hall, Granville Road, Ilford (for residents of the west side of Cranbrook Road) ... ..	Thursday, 2.00 p.m.
Newbury Hall, Perryman's Farm Road, Barkingside (for residents of the Newbury Park area) ... ..	Thursday, 2.00 p.m.
Mayesbrook Clinic (for residents of Goodmayes area) ... ..	Thursday, 2.00 p.m.
St. Albans Church Hall, Albert Road, Ilford (for residents of Ilford Lane area) ... ..	Friday, 2.00 p.m.
Parish Hall, Mossford Green, Barkingside (for residents of Fairlop area) ... ..	Friday, 2.00 p.m.
Methodist Church Hall, The Drive (for residents of Valentines and Cranbrook area) ... ..	Friday, 2.00 p.m.

Ante-Natal Clinics. — An Ante-Natal Clinic is held at the Maternity Hospital, Eastern Avenue, Ilford, on Tuesday morning and afternoon, Wednesday morning and afternoon (Obstetric Specialist), Thursday morning and afternoon, Friday morning and afternoon (Obstetric Specialist), Saturday morning; at Mayesbrook Clinic, Goodmayes Lane, on Monday and Thursday mornings, and alternate Saturday mornings; at Manford Way Clinic, Hainault, every Wednesday morning.

Midwives Ante-Natal Clinics are held at the Kenwood Gardens Clinic each Friday afternoon; at Mayesbrook Clinic each Monday afternoon; at Manford Way Clinic on alternate Thursday afternoons; at Heathcote Avenue Clinic on alternate Tuesday afternoons and at Marks Gate Clinic on first and third Wednesday afternoons of each month.

Post-Natal Clinics. – These Clinics are held at the Maternity Hospital on each Monday afternoon; at the Mayesbrook Clinic, Goodmayes Lane, on alternate Saturday mornings; and at the Manford Way Clinic, Hainault, on the first Friday morning of each month.

School and other Clinics. – Clinic sessions are held at Health Services Clinics as under:-

(i) KENWOOD GARDENS CLINIC, for –

Minor Ailments  
 Dental (Children and Expectant and Nursing Mothers)  
 Orthopaedic and Remedial Exercises treatment  
 Artificial Sunlight treatment  
 Diphtheria, Whooping Cough and Tetanus Immunisation  
 B.C.G. Vaccination  
 Poliomyelitis and Smallpox Vaccination  
 Ear, Nose and Throat  
 Ophthalmic treatment  
 Paediatric  
 Infant Welfare  
 Toddlers  
 Midwives' Ante-Natal  
 Mothercraft  
 Enuresis  
 Chiropody

(ii) MAYESBROOK CLINIC, Goodmayes Lane, for –

Minor Ailments  
 Dental (Children and Expectant Mothers)  
 Ophthalmic treatment  
 Artificial Sunlight treatment  
 Ante-Natal and Post-Natal  
 Mothercraft  
 Diphtheria, Whooping Cough and Tetanus Immunisation  
 Poliomyelitis and Smallpox Vaccination  
 B.C.G. Vaccination  
 Orthopaedic and Remedial Exercises treatment  
 Infant Welfare  
 Speech Therapy  
 Midwives' Ante-Natal  
 Orthoptic  
 Chiropody



(iii) NEWBURY HALL, Perryman's Farm Road, for –

Infant Welfare

Chiropody

Mothercraft

(iv) VALENTINES SCHOOL, Beehive Lane, for –

Dental (Children)

Speech Therapy

(v) LOXFORD HALL, Loxford Lane, for –

Child Guidance

(vi) MANFORD WAY CLINIC, Hainault, for –

Ante-Natal and Post-Natal

Mothercraft

Infant Welfare

Diphtheria, Whooping Cough and Tetanus Immunisation

Poliomyelitis and Tetanus Vaccination

Midwives' Ante-Natal

Dental (Children only)

Ophthalmic treatment

Orthopaedic treatment

Chiropody

(vii) HEATHCOTE AVENUE CLINIC, for –

Infant Welfare

Midwives' Ante-Natal

Mothercraft

Diphtheria, Whooping Cough and Tetanus Immunisation

Poliomyelitis and Smallpox Vaccination

Chiropody

Speech Therapy

(xii) CHEST CLINIC. – A clinic for the diagnosis and treatment of tuberculosis is provided by the North East Metropolitan Regional Hospital Board at 130-132, Cranbrook Road, Ilford.

The following sessions (by appointment only) are held each week.

For Adults – Monday	2 to 4 p.m.	(new cases)
Friday	10 to 12 noon	(new cases)
Tuesday	10 to 11.45 a.m.	(old cases)
Wednesday	2.30 to 4.15 p.m.	(old cases)
Friday	2 to 4.30 p.m.	(old cases)
Wednesday	6.30 to 8 p.m.	(new and old cases)
Monday	10 to 12 noon	(Ambulance cases)

For Children – Wednesday 10 to 12 noon

Contacts Clinic – Tuesday 2.30 p.m.

B.C.G. Clinic – Thursday 10.30 a.m.

## SECTION C

## SANITARY CIRCUMSTANCES OF THE AREA

The Chief Public Health Inspector reports as follows:-

During the year under review the sanitary circumstances of the district have been generally satisfactory. The Council's original five year programme of slum clearance has been delayed somewhat because of the difficulties in obtaining sites for re-housing purposes. Nevertheless the project is nearing completion.

The Council's decision to determine high standards in the provision of sanitary conveniences, sinks, water supplies, food cupboards, cooking facilities and dustbins for the use of families occupying houses let in lodgings was efficacious in preventing the widespread letting of houses in separate tenements. When the owners received the Council's notices to provide satisfactory amenities, a speedy reduction in the number of tenancies ensued. But strict control of these premises must be maintained.

The proposed new Housing (Management of Houses in Multiple Occupation) Regulations should have an ameliorating effect on housing conditions generally.

The Council's proposals for formulating Smokeless zones has grown apace. There are two areas formally approved and three others are in advanced stages of preparation.

Nuisances from smoke emission have been reduced somewhat but the problem of soots and smells from one well known industrial plant has continued to cause concern to the occupants of dwellings nearby. This factory is under the control of the Alkali Works Act Inspectorate hence free from action by the Council. As this factory will soon be included in a "Smokeless Zone" perhaps some mitigation of the nuisance will be obtained.

It is conceded that most industrialists have co-operated in the diminution of atmospheric pollution by converting appliances and plant to smokeless fuels.

Householders too have accepted their responsibilities in this field of health promotion, have assiduously conformed to the advice given by the Public Health Inspectors and have been pleased in general with the salutary effects produced in the smoke control area.



In not one case has it been necessary to take action for contravention of the Act in this behalf.

Food Hygiene Education has been a major task of the Inspectors vested with this important task. So successful have their efforts been that only in rare instances have there been complaints made regarding the hygienic standards in food premises. Those responsible for the management of these establishments have been anxious to inculcate sound principles of hygiene in their staffs and it is noted with satisfaction that the amount of smoking by them has almost disappeared, due in no small measure to the prosecutions instituted by the Council for offences under the Food Hygiene Regulations of 1960.

Some indication of the effectiveness of health education can be seen from the fall in the number of food poisoning notifications from 117 in 1960 to 84 in 1961 and for dysentery from 204 to 129 in the same years.

The Litter Act of 1958 has had some effect in reducing the unsightliness in the thoroughfares from deposits produced no doubt in large measure to the prosecution of offenders by the local authority, the frequent advertisements and exhortations in both press and on television by the central government and by local publicity.

(i) WATER SUPPLY. — The district is served by the Metropolitan Water Board and South Essex Waterworks Co. The subject of the water supply of the Borough was dealt with at length in the Report for 1945.

Dr. E. Windle Taylor, Director of Water Examination of the Metropolitan Water Board, has kindly supplied me with the following information.

\*The part of Ilford in the area of the Metropolitan Water Board is supplied with water derived from the River Lee which is filtered and chlorinated at the Lee Bridge Works, together with water from the Board's well at Wanstead.

Samples of water passing into supply from these works are collected daily and a total of 306 samples was submitted to chemical and/or bacteriological examination.

During the year 1961 there were no new sources of supply instituted by the Board in Ilford and no important extensions of trunk mains or changes in the general scheme of supply. The total distances of new water mains of various diameters laid in the Borough of

Ilford was 1,057 yards. All new and repaired mains are chlorinated before being restored to supply and samples from these are tested to confirm that the quality of the water is up to the standard normally supplied."

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The water provided to the remainder of the Ilford district by the South Essex Waterworks Co. is obtained from the River Stour and from deep wells at Mill Road, Grove Road and Roding Lane.

Mr. P. Gordon Spencer, Chief Engineer to South Essex Waterworks Co., has kindly supplied me with the following information.

"During 1961 over 4,120 chemical, bacteriological and biological examinations were made at the Langham Laboratory, and all water going into supply was reported as wholesome. In addition samples were examined for radioactivity.

Samples from the wells situated in the Company's area of supply were analysed weekly and all were likewise reported on as above; in addition, samples were taken weekly from houses in various parts of the supply area for bacteriological examination and they were invariably perfectly satisfactory.

A supplementary supply of water was obtained from the Metropolitan Water Board during the months January, March, April and June, the total quantity being 11 million gallons.

The water supply of the area and of its several parts has been satisfactory as to quality and quantity.

The following mains were laid in Ilford during 1961:-

	<u>3 ins.</u>	<u>4 ins.</u>	<u>9 ins.</u>	<u>18 ins.</u>
Yards	94	49	79	1

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There are now no public wells in existence. There are a few private wells for domestic and commercial purposes.

Four samples of piped water supply (2 South Essex Waterworks Co., and 2 Metropolitan Water Board) were taken by the Department and sub-



mitted for Chemical and Bacteriological examination, and all gave satisfactory analyses.

(ii) PUBLIC SWIMMING BATHS. – There are three public swimming baths in the Borough. Two indoor, 120,000 gallons and 66,000 gallons respectively and one open-air, of 250,000 gallons approximately. Mains water supply is used in all cases and the method of treatment is by break-point chlorination. The water is normally changed once annually in the case of the larger indoor bath and the open-air bath, which are closed during the winter months. The smaller indoor bath is, however, in operation throughout the whole of the year, and as is the case with all the baths, is "topped up" as necessary.

Five samples of water for examination were taken from the open-air swimming bath from April to September. The samples were satisfactory. Fifteen samples were also taken from the two indoor baths during January, March, April, June, July, August, September, October and December: all the samples were satisfactory and of a high standard of bacterial purity.

(iii) DRAINAGE AND SEWERAGE. – The Borough Engineer has kindly supplied me with the following:-

#### Main Drainage

Progress continued on the relief of flooding in the Borough and the stages of various schemes undertaken during the year are as follows:-

#### Completed:

- |                                                     |          |
|-----------------------------------------------------|----------|
| (a) Hainault/Trelawney Road Surface Water Sewer ... | £300,500 |
| (b) Cranbrook Stage III Surface Water Sewer ... ..  | £102,050 |

#### Commenced:

- |                                                                                      |          |
|--------------------------------------------------------------------------------------|----------|
| (a) Woodford Avenue, Claybury Broadway to River Roding<br>Surface Water Sewer ... .. | £112,996 |
| (b) Roding Valley Mid-Level Soil Sewer Stage II ... ..                               | £113,200 |

#### RIVERS AND STREAMS

Flooding. – A number of cases of flooding occurred in areas which have not yet been dealt with under the Drainage Scheme.

Pollution of Streams. — Pollution of streams, particularly by oil continues and more especially on the Seven Kings Water and the Mayesbrook.

(iv) COLLECTION AND DISPOSAL OF REFUSE. — The Borough Engineer also kindly supplied the following information:-

	Tons
Total amount of refuse collected and disposed of	53,155
Collection of Salvage:-	Tons      Income
Wastepaper ... ..	1,375      £10,375
Rags and Scrap Metal ... ..	77      £920

(v) SANITARY INSPECTION OF THE AREA. — The following is a summary of the work of the Public Health Inspectors during the year:-

Houses and premises inspected ... ..	33,865
Houses and premises reinspected (work in progress) ...	19,996
Visits during disinfection ... ..	133
Houses in which nuisances were detected ... ..	645
Houses in which nuisances were abated ... ..	698*
Premises disinfected ... ..	18
Premises from which articles only disinfected ... ..	25
Articles disinfected ... ..	166
Premises disinfested for verminous conditions ... ..	14

\* Includes 115 nuisances detected before 1st January, 1961.

Notices served:-	Served	Complied with
Statutory:-		with
Public Health Act, 1936 ... ..	60	49
Clean Air Act 1956 ... ..	1	—
Housing Acts, 1936 and 1957 ... ..	8	3
Factories Acts, 1937 and 1948 ... ..	—	—
Shops Act, 1950 ... ..	—	—
Provide Dustbin		
(Ilford Urban District Council Act, 1904)	17	15
Food and Drugs Act, 1955 ... ..	—	—
Cleanse Water Storage Cistern (Byelaws)	—	—
Cover Water Storage Cistern (Byelaws) ...	—	—
Informal ... ..	730	643
	<u>816</u>	<u>710</u>

In addition to the above, 151 notices (14 statutory and 137 informal) served previous to 1st January, 1961, were also complied with.



Complaints. – During the year 2,879 complaints of nuisances were received and investigated.

The following is a summary:-

Accumulation of manure and refuse ... ..	58
Animals improperly kept ... ..	17
Bad smells ... ..	60
Dampness of premises ... ..	60
Defective drains, w.c.s and fittings ... ..	631
Defective roofs, gutters, downpipes, etc. ... ..	45
Defective water fittings ... ..	52
Dirty and verminous houses ... ..	23
Dirty condition of rearway ... ..	11
Flooding of premises ... ..	20
Overcrowding ... ..	23
Smoke nuisances ... ..	68
Defective or no provision of dustbin ... ..	678
Rats and mice ... ..	655
Miscellaneous ... ..	478
Total ...	<u>2,879</u>

(vi) SHOPS ACT, 1950 (Section 38). – Since this Act came into operation the Public Health Inspectors have made inspections in accordance with Section 38.

During the year 220 inspections were made, and 2 Preliminary Notices were served. One Certificate of Exemption from the provisions of Section 38 was granted in 1961.

(vii) SLAUGHTER OF ANIMALS ACT, 1933 to 1954. – No licence to act as slaughterman was granted during the year.

(viii) RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951. – Registration has been granted in respect of 7 premises, where filling materials, as specified in the Act, are used.

The occupier of registered premises may only obtain "rag flock" from premises licensed under the Act, either for the manufacture of rag flock or as a rag flock store. No licence was issued in 1961 in respect of premises used as a rag flock store.

(ix) LAND CHARGES ACT, 1925. – During the year 3,794 enquiries were dealt with under this Act.

(x) CLEAN AIR ACT, 1956. — The Council has agreed that the whole of the Borough shall become a smokeless area and a programme has been prepared for this to be effected over a period of 10 years.

The first Smoke Control Order (Padnall and Marks Gate Estates) came into operation in 1960, the second (No. 2. (South Hainault) Smoke Control Order) and the third (No. 3 (South Hainault) Smoke Control Order), subject to confirmation by the Minister, will come into operation on 1st July, 1963.

Further areas are the subject of detailed inspections with a view to the preparation of future Orders.

(xi) ATMOSPHERIC POLLUTION. — Complaints were received of alleged smoke nuisance from 15 factories in the Grove Road, Newbury Park, Green Lane and Ilford Lane areas. In 12 instances no emission was noted which would have enabled action to be taken under the Public Health Act, 1936, or Clean Air Act, 1956. One statutory and two informal notices were served in other instances.

Three stations for measurement of atmospheric pollution have been installed in the Borough as follows:-

- No. 1 — Gantshill Library
- No. 2 — John Bramston School
- No. 3 — Ilford Town Hall.

Each station now has a volumetric apparatus only. The use of deposit gauges and lead peroxide instruments at the stations was discontinued, on the recommendations of the Department of Scientific and Industrial Research, as from 31st March, 1961.



## SECTION D. — HOUSING.

(i) OVERCROWDING. — Two notices were served during 1961.

(ii) CLEARANCE AREA. — One area was declared by the Council to be a Clearance Area, in 1961.

The Council makes a grant of £5 towards the removal expenses of any family required to move from a house to which a demolition or closing order applies.

## (iii) HOUSING STATISTICS.

## 1. Inspection of dwelling-houses during the year:-

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... ..	1,702
(b) Number of inspections made for the purpose	17,745
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ... ..	1
(b) Number of inspections made for the purpose	1
(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 sub-head) found not to be in all respects reasonably fit for human habitation ... ..	249

## 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 ... ..	204*
------------------------------------------------------------------------------------------------------------------------------------	------

## 3. Action under Statutory Powers during the year:-

A. Proceedings under Sections 9, 10 and 16 of the Housing Act, 1957.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs... ..	-
(2) Number of dwelling-houses which were rendered fit after service of formal notices:-	
(a) By owners ... ..	-
(b) By local authority in default of owners ... ..	-
<b>B. Proceedings under Public Health Acts:-</b>	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ..	77
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:-	
(a) By owners ... ..	48*
(b) By local authority in default of owners ... ..	1
<b>C. Proceedings under Section 17(1) of the Housing Act, 1957.</b>	
(1) Number of dwelling-houses demolished as a result of formal or informal procedure	11
(2) Number of dwelling-houses closed in pursuance of an undertaking given by the owners and still in force ... ..	-
<b>D. Proceedings under Section 18 of the Housing Act, 1957.</b>	
Number of separate tenements in respect of which Closing Orders were made ...	-
<b>4. Housing Act, 1957, Part IV Overcrowding:-</b>	
(a) (i) Number of dwellings overcrowded at the end of the year ... ..	15
(ii) Number of families dwelling therein ... ..	16
(iii) Number of persons (units) dwelling therein	54
(b) Number of new cases of overcrowding reported during the year ... ..	7



(c) (i) Number of cases of overcrowding relieved during the year ... ..	15
(ii) Number of units concerned in such cases	82
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the local authority have taken steps for the abatement of overcrowding ... ..	-
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report ... ..	-

\*Includes compliances during 1961 of Notices served prior to 1st January, 1961.

#### HOUSING ACTS, 1936 and 1957.

During the year 1961 the work of receiving applications, calling for calculations for the "permitted number" was continued with a view to the issue of housing certificates.

1 certificate in respect of 1 house was issued during the year, making a total of 18,367 certificates, in respect of 25,177 houses, issued to the end of 1961.

As new premises were constructed and placed upon the rating lists, "permitted number" certificates were issued as required.

#### MEDICAL PRIORITIES FOR REHOUSING

In 1961 48 recommendations were made to the Housing Committee. In addition to the visits and reports of the Public Health Inspectors on the home circumstances, the Medical Officer of Health has consultations with the private doctors and/or Hospitals.

#### INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACT, 1920 and 1933, AND HOUSING REPAIRS AND RENTS ACTS, 1954 and 1957

Particulars relating to 1961 are as follows:-

Application for Certificates of Disrepair received ... ..	26
Certificates of Disrepair granted ... ..	25
Certificates of Disrepair refused ... ..	—
Applications Withdrawn ... ..	1
Certificates of Disrepair issued ... ..	11
Undertakings received from landlords ... ..	16
Unexpired Notices of Proposal to issue Certificates of Disrepair —	
Certificates cancelled ... ..	2
Applications for cancellations of Certificates applied for but not granted ... ..	—
Certificates as to remedying of defects specified in Landlord's Undertaking to remedy Defects:	
Issued to Landlords ... ..	5
Issued to Tenants ... ..	2



## SECTION E.

## INSPECTION AND SUPERVISION OF FOOD

## MILK SUPPLY

The Council has delegated to the Public Health Committee all its powers and duties under the Food and Drugs Act, 1955, and any Regulations which might thereafter be made thereunder.

The Milk (Special Designations) (Specified Area) Order, 1951, which came into operation on 1st October, 1951, specified an area, including Ilford, in which the compulsory use of special designations for retail sales of milk shall operate.

(i) MILK AND DAIRIES (GENERAL) REGULATIONS, 1959. – Persons and premises registered as at 31st December, 1961:-

Persons registered as distributors of milk ... ..	128
Premises registered as dairy premises (other than dairy farms) ... ..	10

217 inspections of dairy premises were carried out during the year.

(ii) MILK (SPECIAL DESIGNATION) REGULATIONS, 1960:-

The following licences were granted during 1961 for the 5-year period ending 31st December, 1965:-

Dealer's (Pasteuriser's) ... ..	1
do. (Steriliser's) ... ..	1
do. (Tuberculin Tested) ... ..	1
do. (Pre-Packed Milk)	
Tuberculin Tested ... ..	50
Pasteurised ... ..	90
Sterilised ... ..	103

Two licences granted by the Essex County Agricultural Executive Committee, in respect of the production of Tuberculin Tested milk at farms in the Borough are in operation.

(iv) SAMPLING. – The following is the routine practice adopted:-

Designated Milks (Raw and Heat treated). – These are sampled bi-monthly and after unsatisfactory reports.

Biological Tests. – Samples of all raw milk (if any) are submitted for biological test for T.B. quarterly. Repeat samples if positive after clearance by the Divisional Inspector of the Ministry of Agriculture, Fisheries and Food.

Milk Supplies to Maintained Schools. – These are sampled monthly and after unsatisfactory results.

The following results were obtained:-

Grade of Milk	Total	Satisfactory	Unsatisfactory	Remarks on unsatisfactory results
Tuberculin Tested (Pasteurized) Milk	42	42	–	–
Tuberculin Tested Milk (Farm bottled) ... ..	4	4	–	–
Pasteurized Milk	49	49	–	–
Sterilized ... ..	17	17	–	–

(v) BIOLOGICAL TESTS. – Two samples of milk were submitted to a biological test for tuberculosis. Both proved to be negative.

(vi) MILK AND DAIRIES ORDERS, 1926 AND 1938: INSPECTION OF DAIRY HERDS. – Two examinations were made by the Veterinary Officers of the Ministry of Agriculture, Fisheries and Food. The Ministry's Divisional Officer states that no cows were found to be suffering from tuberculosis. No samples of milk were sent for bacteriological examination.

(vii) LEGAL PROCEEDINGS. – 5 complaints of the presence of foreign bodies in milk were received and investigated. Letters of warning were sent to the bottlers and distributors in all cases. One of the complaints is detailed in the paragraph on Food and Drug sampling.

(viii) REGISTRATION. – No application for registration was refused during the year.



## ICE CREAM

## (i) REGISTRATION.

Section 158, Essex County Council Act, 1933. In 1948, the Council delegated to the Public Health Committee its powers and duties with regard to the granting, refusal or revocation of registrations, including the duty of interviewing applicants who are required to show cause why applications for registration should not be refused or existing registration should not be revoked.

31 applications for registration in respect of 30 premises were considered during the year 1961; all were granted in respect of the sale (only) of ice-cream.

## (ii) ICE-CREAM (HEAT TREATMENT, ETC.) REGULATIONS, 1959.

The Council has decided, in accordance with the recommendations of the Ministry of Health, that 4 thermometers should be provided of the following types:-

- A recording thermometer at the heat treatment stage;
- An indicating thermometer at the heat treatment stage;
- An indicating thermometer at the cooling stage;
- An indicating thermometer at storage stage.

## (iii) SAMPLING

Samples for bacteriological examination are taken monthly from April to September and at regular intervals during the winter months as supplied by all manufacturers to mobile salesman and local retailers. Samples are repeated after unsatisfactory results. In 1961 40 samples were submitted for examination with the following results:-

No. of Samples	Ministry of Health Provisional grade.	% of Total	Unsatisfactory Samples.
30	I	75	—
2	II	5	—
5	III	13	—
3	IV	7	1
<u>40</u>		<u>100</u>	<u>1</u>

The Food Standards (Ice-Cream) Regulations, 1959, prescribed standards for ice-cream. During 1961, no samples were submitted for chemical analysis.

## MEAT AND OTHER FOODS.

### (i) INSPECTION AND SUPERVISION.

The Council made bye-laws under Section 15, Food and Drugs Act, 1938 for securing the observance of sanitary and cleanly conditions and practices in connection with the handling, wrapping and delivery of food sold or intended for sale for human consumption, and in connection with with the sale or exposure for sale in the open air of food intended for human consumption.

The Public Health Inspectors reported 37 instances of individuals using tobacco whilst engaged in the handling of "open" food contrary to the Food Hygiene (General) Regulations, 1960. Legal proceedings were taken in four cases and fines of £5 plus £1.1s. costs in three cases and £5 plus £1 costs in the other case were imposed by the Court. In all other instances letters of warning were served.

The Essex County Council Act, 1952, Section 105, requires that as from 2nd April, 1953, any person intending to use premises which were not used immediately before that date for the sale, storage, or preparation for sale of any food (other than milk) intended for human consumption shall give not less than 14 days' notice to the Council of his intention so to do.

The whole-time services of two Public Health Inspectors are utilised to deal with food preparing premises, factory canteen premises and food and drugs sampling. During 1961, they made 13,192 inspections of food shops and food preparing premises. 67 informal notices were served under the Food and Drugs Act, and 73 informal notices were complied with including 21 informal notices served prior to 1961.

### (ii) FOOD HYGIENE.

The following gives the numbers of food premises in the area by the type of business:-



Cafes and Restaurants ... ..	162
Factory canteens ... ..	28
Butchers' shops ... ..	118
Grocers' shops ... ..	252
Fruiterers' and Greengrocers' shops	124
Fishmongers' and Fishfryers' shops	50
Bakehouses ... ..	20
Bakers' shops ... ..	39
Confectioners' shops ... ..	213
	<hr/>
	1,006

The practice of inculcating interest in the proprietors, directors and staffs of food handling organisations was continued in 1961, and the catering industry, as a whole, continues to co-operate.

The lectures and demonstrations with film strips and films to food handlers were continued in 1961.

Education in food hygiene has been extended to the senior schools and to study groups of various local organisations.

### (iii) SAMPLING.

The Council has delegated to the Public Health Committee power to institute legal proceedings under the Food and Drugs Act, 1955.

193 samples (187 formal and 6 informal) were obtained during the year 1961; 3 formal and 3 informal samples were not satisfactory as follows:-

(a) Crispbread (formal). – Claim that commodity was perfect aid to slimming was not justified. No action was taken.

(b) Orange Drink (formal). – Contained 8% potable fruit content. No action was taken.

(c) Slimbread (informal). – Claim that commodity was useful aid to slimming not justified. No action was taken.

(The above items (a), (b) and (c) were referred to the Association of Municipal Corporations for information and any action that may be considered desirable).

(d) Gin (formal). – Contained only 67.7% proof spirit which complied with requirement of Food and Drugs Act, 1955, but was stated to contain 70%. No action was taken.

(e) Bread (informal). – Contained portions of used surgical dressing. A letter of warning was served.

(f) Bottle of Milk (informal). – Contained a metal foil wrapping. Letters of warning were sent to the bottlers and distributors.

#### (iv) HAWKERS OF FOOD.

Section 103 of the Essex County Council Act, 1952, came into operation on 2nd April 1953, and provides that hawkers of any food, and premises used for the storage of such food, shall be registered by the local authority. Registration was granted to 10 persons and 3 premises were also registered during 1961.

(v) REGISTRATION OF PREMISES USED FOR THE PREPARATION OR MANUFACTURE OF SAUSAGES, OR POTTED, PRESSED, PICKLED OR PRESERVED MEAT, FISH OR OTHER FOOD INTENDED FOR SALE.

Section 80 of the Ilford Corporation Act, 1937, requires registration of such premises.

3 applications for registration were received and granted during 1961.

#### (vi) ARTICLES OF FOOD SURRENDERED.

During the year the following articles were surrendered and condemned as being unfit for the food of man:-

Bacon, 64 lbs.; Beverages, 21 tins; Biscuits, 26 pkts; Butter, 3 lbs.; Cereals, 33 lbs.; Cheese, 52 lbs.; Chicklettes, 6 lbs.; Cream, 3 tins; Fish (Wet and Dry), 115 stone; Fish (tinned), 344 tins; Flour, 8 lbs.; Fruit (tinned), 2084 tins; Fruit (Dried), 17 lbs.; Fruit Juice, 22 tins; Jam (preserves), 46 lbs.; Meat – Fresh, 3283 lbs.; Meat (tinned), 4053 lbs.; Meat pies, 62; Milk (tinned), 390 tins; Pastry and Pudding Mix, 13 pkts.; Pickles, 19 jars; Sugar, 96 lbs.; Poultry, 926 lbs; Soups (tins), 11; Vegetables, (tins), 56; Sausages, 99 lbs.; Tea, 4 lbs.; Ice Cream, 333 cartons.

#### (vii) FOREIGN BODIES IN FOOD.

15 complaints (including 1 milk sample referred to in paragraph (iii) Sampling) were received during 1961 of the presence of foreign bodies in foodstuffs; letters of warning were sent in 8 cases and legal proceedings taken in 1 case, which was dismissed.



## (viii) FOOD POISONING.

By virtue of Section 82 of the Ilford Corporation Act, 1937, food poisoning became compulsorily notifiable in Ilford as from 1st October, 1938. It is also notifiable under Section 17, Food and Drugs Act, 1955.

84 notifications were received.

There were 29 family outbreaks, 2 other outbreaks, and 31 single cases.

In 8 outbreaks (involving 23 persons) the causal organism was identified as Salmonella Typhi-murium; and in 1 outbreak (involving 2 persons) as Salmonella Chicago. In the remaining 22 outbreaks (involving 90 persons) no agent was identified.

Regarding the single cases, the agents identified were Salmonella Typhi-murium 19, and Salmonella Chicago 1. In the remaining 11 cases no organism was identified.

(x) BAKEHOUSES. — There are 20 bakehouses in the district, all of which use motive power, 366 inspections of bakehouses were carried out during the year.

It was necessary to call upon the occupiers of bakehouses to carry out cleansing and other work in 5 instances and the requests were complied with in all cases.

(xi) MERCHANDISE MARKS ACT, 1926. — No contravention of this Act was reported during 1961.

## DISEASES OF ANIMALS ACT, 1950.

(i) FOWL PEST ORDER OF 1936 AND THE FOWL PEST (AMENDMENT) ORDER OF 1947

A Notice, Form C, under this Order was received from the Ministry of Agriculture, Fisheries and Food withdrawing the Notice (Form B) restricting the movement of poultry at a Farm in Essex, and another notice Form A withdrawing the notice declaring the Farm to be an "Infected Place".

(ii) FOWL PEST (INFECTED AREAS RESTRICTIONS) ORDER 1956

A Notice was issued permitting the movement of 200 pullets from a

Farm in Doncaster, Yorkshire to an Essex Farm. These birds were to replace those destroyed during the recent outbreak of fowl pest at the Farm.

(iii) THE FOWL PEST (INFECTED AREAS) SPECIAL ORDER No. 4, 1961

This Order withdrew as from 8th February the restriction of movement in the Southern part of Essex.

(iv) FOWL PEST ORDER 1936

A Notice Form B was served on a farm in the Borough restricting the movement of poultry from the area at the side and rear of the premises, there being a suspicion of fowl pest among the poultry on the premises. The premises were visited and the poultry appeared in good health. The suspected fowl pest was not verified.

(v) THE FOOT AND MOUTH DISEASE (INFECTED AREAS) SPECIAL ORDER 138, 1960

This Order declared an area, including part of the County of Essex south of the A.127 to be an infected area. Although this did not include Ilford, notices were served on the appropriate persons giving the purpose of this Order.

(vi) THE FOOT-AND-MOUTH DISEASE (INFECTED AREAS) SPECIAL ORDER No. 7, 1961

This Order revoked the above-mentioned Order.

(vii) THE IMPORTATION OF CARCASSES AND ANIMAL PRODUCTS (AMENDMENT) ORDER 1961

The Minister of Agriculture, Fisheries and Food and the Secretary of State, acting jointly, in exercise of the powers vested in them by the Diseases of Animals Act 1950 and the Agriculture (Miscellaneous Provisions) Act 1954, have made the above Order which alters the provisions of the Importation of Carcasses and Animal Products Order 1954 so as to make it illegal to land in Great Britain dry sausages (salamis), fully cured bacon and ham, and sausage casings (cleaned and scraped) originating in Spain or Portugal without a licence.

(viii) REGULATION OF MOVEMENT OF SWINE ORDER 1959

A licence was issued by the County of Hertford authorising the movement of 19 store pigs from Bishop's Stortford to a farm at Newbury Park. The pigs were kept under supervision and the requirements of the Order were complied with.



## (ix) SWINE FEVER ORDER OF 1938

A telephonic notice was given on 19th September by the Animal Health Division of the Ministry of Agriculture, Fisheries and Food, Chelmsford, that a pig was suspected as suffering from swine fever. Accordingly a Notice, Form A, under the Order was served on the Farm in the Borough, prohibiting the movement of pigs and for the taking of necessary precautions to prevent the spread of infection.

A Notice was received from the Ministry withdrawing the notice in Form A which was served on 19th September in respect of the above premises.

PREVENTION OF DAMAGE BY PESTS ACT, 1949. — The Council has appointed a whole-time Rodent Operative. Where infestation has been ascertained on inspection the services of the Rodent Operative are made available to secure effective disinfection. In the case of business premises these services are offered on a contractual basis, a practice which is greatly appreciated by most business firms. The following is a statement of the work carried out during 1961.

	Type of Property				Total
	Local Authority	Dwelling Houses	Agricultural	All other (including Business and Industrial)	
I. Total No. of properties in District	221	52,783	25	6,598	59,627
II. No. of properties inspected as a result of notification ... ..	54	556	1	115	726
No. of such properties found to be infested by –					
Common Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	16	149	1	23	189
Ship Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	–	–	–	–	–
House Mouse					
Major ... ..	–	–	–	–	–
Minor ... ..	30	163	–	54	247
III. No. of properties inspected in the course of survey under the Act ...	13	18	–	13	44
No. of such properties found to be infested by –					
Common Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	13	9	–	12	34
Ship Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	–	–	–	–	–
House Mouse					
Major ... ..	–	–	–	–	–
Minor ... ..	–	5	–	–	5
IV. No. of properties otherwise inspected ... ..	–	–	–	1,006	1,006
No. of such properties found to be infested by –					
Common Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	–	–	–	–	–
Ship Rat					
Major ... ..	–	–	–	–	–
Minor ... ..	–	–	–	–	–
House Mouse					
Major ... ..	–	–	–	–	–
Minor ... ..	–	–	–	–	–
V. Total No. of inspections and re-inspections carried out ... ..	152	1,215	5	13,423	14,795
VI. No. of infested properties (under II, III and IV) treated by Local Authority ... ..	33	328	1	72	434
VII. Total No. of treatments and re-treatments carried out ... ..	33	328	1	85	447
VIII. No. of Notices served under Section 4 –					
(1) Treatment ... ..	–	–	–	–	–
(2) Structural works (i.e., Proofing) ... ..	–	3	–	2	5
IX. No. of cases in which default action was taken by Local Authority following issue of Notice under Section 4 ... ..	–	–	–	–	–
X. Legal proceedings ... ..	–	–	–	–	–
XI. No. of "block" control schemes carried out ... ..	–	–	–	–	Nil



PET ANIMALS ACT, 1951. — This Act came into force on 1st April, 1952, and the Council is the Local Authority for the Borough. The Chief Public Health Inspector is designated as the officer responsible for the administration of the Act and he and his Deputy are authorised to inspect any premises in the Borough where licences are in force.

Licences were granted in respect of 11 premises during 1961.

PETROLEUM (CONSOLIDATION) ACT, 1928. — The Public Health Inspectors made 1,633 visits to premises where petroleum is stored, or in conjunction with the installation of such storage, and the testing of petroleum appliances or fittings.

The number of Licences issued was 151, and the fees paid to the Council for such Licences was £124.15s.

LITTER ACT, 1958. — The Public Health Inspectors are authorised by the Council to investigate and report offences under the Act. During 1961, 3 offences were reported. Legal proceedings were taken in one case and a fine of £2, plus 4s. costs was imposed. A letter of warning was also served in one other instance.

NOISE NUISANCES — ILFORD CORPORATION ACT, 1937 AND PUBLIC HEALTH ACT, 1936.

Complaints were received of noise nuisances from 31 premises during the year. In 16 cases no nuisance was found to exist in respect of which action could be taken. In 12 cases representations by the Public Health Inspector resulted in abatement of the nuisance. One Statutory Notice was served and complied with, and two Intimation Notices served, one of which was complied with in 1961.

## SECTION F.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

The following diseases are notifiable to the Medical Officer of Health:

## 1. Under Section 144 and 343, Public Health Act, 1936.

Smallpox	Relapsing Fever.
Cholera	Anthrax (made notifiable by the Local Authority as from 1/4/22).
Diphtheria	
Membranous Croup	Pemphigus Neonatorum (made notifiable by the Local Authority as from 29/6/29).
Erysipelas	
Scarlatina or Scarlet Fever	
Typhus Fever	
Enteric fever (Typhoid and Para-typhoid)	

## 2. Under Regulations of the Ministry of Health.

Plague ... ..	L.G.B. Order, 19/9/1900.
Puerperal Pyrexia ... ..	The Puerperal Pyrexia (Amendment) Regulations, 1954.
Ophthalmia Neonatorum ... ..	P.H. (Ophthalmia Neonatorum) Regulations, 1926.
Acute Primary and Acute) influenza Pneumonia ... ..)	
Dysentery ... ..)	P.H. (Infectious Diseases) Regulations, 1953 and 1960.
Malaria ... ..)	
Anthrax ... ..)	
Tuberculosis ... ..	P.H. (Tuberculosis) Regulations, 1952.
Acute Rheumatism (up to 16 years) ... ..	The Acute Rheumatism (Amendment) Regulations, 1958.
Measles and Whooping Cough	The Measles and Whooping Cough Regulations, 1940.
Acute Poliomyelitis ... ..)	P.H. (Acute Poliomyelitis, Acute Encephalitis and Meningococcal Infection) Regulations, 1949.
Acute Encephalitis ... ..)	
Meningococcal Infection ... ..)	

## 3. By Local Act.

Food Poisoning ... ..	Ilford Corporation Act, 1937, and Food and Drugs Act, 1955.
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In addition to the above diseases notifiable to the Medical Officer of Health, certain industrial diseases are notifiable to the Chief Inspector of Factories, Home Office, under Section 66 of the Factories Act, 1937. These are cases of Lead, Phosphorous, Arsenical or Mercurial Poisoning or Anthrax contracted in any factory. The Secretary of State can add other diseases to those mentioned by Regulation.

The total numbers of deaths of Ilford residents from the under-mentioned infectious diseases during 1960 and 1961 were as follows:-

	1960	1961
Scarlet Fever ... ..	-	-
Enteric Fever ... ..	-	-
Diphtheria ... ..	-	-
Acute Poliomyelitis ... ..	-	-
Measles ... ..	-	1
Whooping Cough ... ..	-	-
Influenza ... ..	4	19
Tuberculosis - Pulmonary	7	12
Other forms	1	1
Pneumonia (all forms) ...	127	140
Meningococcal Infections	-	-
Totals	<u>139</u>	<u>173</u>

The year 1961 showed a higher incidence of infectious disease, mainly due to the increase in the number of cases of measles, 2,907 occurred as compared with 73 in the previous year. There were, however, only 37 cases of whooping cough as compared with 397 in the previous year.

(a) Smallpox. - No cases were notified during 1961.

Vaccination is the responsibility of the Essex County Council and details appear in the Part III Services Section of this Report.

(b) Scarlet Fever. - 132 cases occurred in 1961. There were no deaths from this disease. Only 3 cases were admitted to hospital, the remainder being nursed at home.

(c) Diphtheria. - No cases occurred in 1961. This is the tenth successive year in which it has been possible to record a clean "bill of health" for this disease in Ilford.

(d) Ophthalmia Neonatorum. - No cases occurred in 1961.

TABLE III. — CORRECTED NOTIFICATIONS OF INFECTIOUS DISEASES FOR THE YEAR 1961.

NOTIFIABLE DISEASE	At all Ages	Number of Cases Notified At ages — Years						Total Cases Notified in each Ward										* Total Cases Admitted to Hospital	* Total Deaths							
		Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards	Granbrook	Park	Loxford	Clementswood	Mayfield	Goodmayes	Fairlop	Clayhall	Barkingside			N. Hainault	Seven Kings	S. Hainault				
Smallpox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ... ..	132	1	25	100	3	3	—	7	11	4	6	3	4	32	19	20	7	9	10	—	—	—	—	—	—	—
Diphtheria, including Membranous Croup ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever (Typhoid and Para-Typhoid) ... ..	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ... ..	106	2	5	9	2	11	46	31	17	13	5	10	5	8	8	20	10	2	7	1	—	—	—	—	—	—
Puerperal Pyrexia ... ..	43	—	—	—	21	22	—	1	—	—	—	—	—	—	1	—	—	41	—	—	—	—	—	—	—	—
Acute Poliomyelitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infection ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ... ..	129	5	28	26	12	30	23	5	13	22	2	2	4	—	6	38	27	6	5	4	—	—	—	—	—	—
Ophthalmia Neonatorum ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	21	—	—	—	—	2	14	5	2	4	1	2	1	—	1	3	1	4	1	1	—	—	—	—	—	—
Pemphigus Neonatorum ... ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis Pulmonary ... ..	80	—	2	3	12	25	28	10	7	8	8	4	2	3	8	5	10	8	12	79	—	—	—	—	—	—
Other Forms ... ..	9	—	1	—	2	4	1	1	1	1	—	—	—	—	3	—	2	—	1	1	5	—	—	—	—	—
Anthrax ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria — Believed contracted in this country ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Believed contracted abroad ... ..	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Rheumatism ... ..	3	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ... ..	2,907	74	1,274	1,533	17	9	—	318	130	210	263	160	216	306	341	310	242	224	187	15	—	—	—	—	—	—
Whooping Cough ... ..	37	4	18	14	—	—	—	2	—	4	4	3	4	3	3	5	3	2	4	—	—	—	—	—	—	—
Food Poisoning ... ..	84	—	17	21	11	17	13	5	8	14	—	4	6	5	6	8	18	9	6	—	—	—	—	—	—	—
Typhus Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ... ..	3,554	87	1,370	1,709	81	123	127	57	376	203	234	295	184	241	374	440	399	325	263	220	185	154	—	—	—	—

\* Included in the figures in these columns are cases notified in previous years as well as 1961.



The following figures show the number of cases of Ophthalmia Neonatorum notified during the past five years: 1957, 6; 1958, 1; 1959, nil; 1960, 6; 1961, nil.

(e) Enteric Fever (Typhoid and Para-Typhoid). – One case occurred in 1961. – A male, aged 48. The patient had returned from a continental visit just prior to the onset and it is probable that infection occurred abroad.

(f) Acute Poliomyelitis. – No cases occurred in 1961.

(g) Acute Encephalitis. – No cases occurred in 1961.

(h) Meningococcal Infection. – No cases occurred in 1961.

(i) Pneumonia – Influenzal and Primary. – The number of cases which occurred during 1961 was 106 compared with 92 in 1960.

(j) Tuberculosis. – During 1961 there were 80 new notifications of Pulmonary Tuberculosis and 9 of other forms of Tuberculosis. In addition 77 pulmonary and 3 non-pulmonary cases were transferred to the district.

The population of Ilford has not varied greatly during the past five years and the number of cases added to the register has also shown little change as the following figures show:-

<i>Year</i>	<i>Population</i>	<i>No. of Persons added to list (all forms)</i>	<i>Deaths (all forms)</i>	<i>No. of Persons on register 31st December</i>
1957	179,600	178	13	1,510
1958	179,000	177	11	1,525
1959	178,600	184	13	1,562
1960	178,520	181	8	1,574
1961	177,760	169	13	1,524

Notifications and Deaths from Tuberculosis of Ilford residents during 1961:-

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
Under 1 year	—	—	—	—	—	—	—	—
1-5 years ...	1	1	—	1	—	—	—	—
5-15 ... ..	2	1	—	—	—	—	—	—
15-25... ..	6	6	—	2	—	—	1	—
25-45... ..	15	10	2	2	—	1	—	—
45-65... ..	20	8	1	—	4	3	—	—
65-75... ..	4	1	—	1	3	1	—	—
Over 75 ...	4	1	—	—	—	—	—	—
Totals	52	28	3	6	7	5	1	—

Of the foregoing new cases, the following were notified from Institutions in the district:—

	Respiratory Tuberculosis	Non- Respiratory Tuberculosis
King George Hospital ... ..	—	—
Goodmayes Hospital ... ..	6	—
Chadwell Heath Hospital ...	—	—
Claybury Hospital ... ..	2	—
Dr. Barnardo's Village Homes	—	—

Of the 13 deaths which occurred of Ilford residents, notification had previously been made of 11 of the cases. In the other cases the presence of tuberculosis was discovered as a result of post-mortem.

	Pulmonary	Non- Pulmonary	Total
Number of cases on register, 1st January, 1961 ... ..	1,419	155	1,574
Number of cases entered on the register during the year ... ..	157	12	169
Number of cases removed from the register during the year ... ..			
	Pul.	Non- Pul.	
Recovered.. ... ..	75	7	
Deceased ... ..	35	—	
Left District ... ..	79	13	
Lost sight of ... ..	9	1	
Diagnosis not established	—	—	
	198	21	219
Number of cases remaining on register on 31st December, 1961 ... ..	1,378	146	1,524



The treatment of Tuberculosis is now under the control of the Regional Hospital Board. On the 31st December, 1961, there were 1,282 patients on the register of the Ilford Chest Clinic.

The number of patients from Ilford sent to Institutions under the Regional Hospital Board Tuberculosis Scheme during 1961 was as follows:-

	Pulmonary		Non-Pulmonary		Total
	Males	Females	Males	Females	
Adults	39	24	19	4	86
Children	4	1	—	—	5

Tuberculosis Care Association. — Assistance was granted to 31 persons who received 190 extra nourishment grants. 66 other grants (cash, etc.) were also made to 66 patients.

(k) Venereal Diseases. — Treatment of these diseases is now the responsibility of the Regional Hospital Board.

The following are the V.D. Treatment Centres situate nearest to Ilford:-

Romford. — The Annexe, Oldchurch Hospital, Waterloo Road, Romford:-

	<u>Males</u>	<u>Females</u>
Consultations:	Monday and Tuesday 4 p.m. to 6.30 p.m. Thursday 12 noon to 3 p.m.	Monday and Tuesday 4 p.m. to 6.30 p.m. Thursday 12 noon to 3 p.m.
Treatments:	Monday to Friday 8 a.m. to 7 p.m. Saturday 9 a.m. to 1 p.m.	Monday to Friday 8 a.m. to 7 p.m. Saturday 9 a.m. to 1 p.m.

Whitechapel. — Whitechapel Clinic, Turner Street, Mile End, London, E.1.:-

	<u>Males</u>	<u>Females</u>
Consultations:	Monday to Friday 10 a.m. to 7 p.m. Saturday 10 a.m. to 3 p.m.	Monday to Friday 10 a.m. to 7 p.m. Saturday 10 a.m. to 3 p.m.
Treatments:	Monday to Friday 7 a.m. to 7 p.m. Saturday 7 a.m. to 3 p.m.	Monday to Friday 8 a.m. to 7 p.m. Saturday 8 a.m. to 3 p.m.

West Ham.—Queen Mary's Hospital, West Ham Lane, Stratford, London, E.15:—

	<u>Males</u>	<u>Females</u>
Consultations:	Monday 3 to 6 p.m. Thursday 11 a.m. to 1 p.m. and 6 to 8 p.m. Saturday 2.30 to 4.30 p.m.	Monday 6 to 8 p.m. Thursday 11 a.m. to 1 p.m. and 3 to 6 p.m. Saturday 2.30 to 4.30 p.m.
Treatments:	Monday 9 a.m. to 6 p.m. Tuesday 9 a.m. to 5 p.m. Wednesday 9 a.m. to 1 p.m. Thursday 9 a.m. to 8 p.m. Friday 9 a.m. to 5 p.m. Saturday 9 a.m. to 4.30 p.m.	Monday 9 a.m. to 8 p.m. Tuesday 9 a.m. to 5 p.m. Wednesday 9 a.m. to 1 p.m. Thursday 9 a.m. to 6 p.m. Friday 9 a.m. to 5 p.m. Saturday 9 a.m. to 4.30 p.m.

Albert Dock Seamen's Hospital, Alnwick Road, London, E.16.

	<u>Males</u>	<u>Females</u>
Consultations:	Monday, Wednesday and Friday 2 to 4.30 p.m.	No female clinic.
Treatments:	Monday to Friday 9.30 a.m. to 5 p.m. Saturday 9.30 a.m. to 12 noon.	

#### HEALTH EDUCATION.

Public lectures to Voluntary Guilds and Institutes and Church organisations, etc., on health topics were given during the year. The Chairman of the Public Health Committee also made reference at a number of Council meetings to health subjects. Poster displays regarding various health topics were also given prominence.

The Public Health Committee considered the question of smoking and Lung Cancer and decided to co-operate in any way considered desirable. A Medical Officer on the staff of the Essex County Council is endeavouring, with the aid of heads of local schools, to disseminate propaganda on this subject.



The Medical Officer devotes a substantial part of his time to health education and his report is included in the Part III Section, together with a report by the Superintendent Health Visitor on health education at infant welfare centres.

#### EXAMINATION OF OFFICERS AND SERVANTS.

The following medical examinations were carried out during 1961:-

	<u>Officers</u>	<u>Servants</u>
New Appointments ... ..	111	52
Under Sickness Regulations	3	11
On behalf of other Authorities	1	-
Total	<u>115</u>	<u>63</u>

In addition enquiries were made of General Practitioners and Hospitals in respect of numerous cases, referred under Sickness Regulations, which were not subsequently medically examined at the Public Health Offices.

#### MASS RADIOGRAPHY.

A mass radiography unit visited the Borough on Mondays from 13th February to 15th May, 1961 and again from 25th September to the end of the year. The service is still in operation and Dr. H. Ramsey, the Medical Director, has kindly supplied me with the following details, relating to the period under review.

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Referred by General Practitioners	1,253	1,311	2,564
General Public	2,692	3,873	6,565
Organised Groups	170	803	973
Total numbers X-rayed	<u>4,115</u>	<u>5,987</u>	<u>10,102</u>
Requiring further investigation	144	119	263
<u>Pulmonary Tuberculosis</u>			
Requiring immediate treatment	6	3	9
Requiring close clinic supervision ... ..	3	2	5
Requiring occasional clinic supervision ... ..	16	5	21
Presumed healed, no further action required ... ..	27	23	50





## SECTION G. – FACTORIES.

Prescribed Particulars on the Administration of the Factories Act, 1937.

## PART I OF THE ACT.

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

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	149	134	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities ... ..	454	660	3	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	38	70	—	—
Total ... ..	641	864	3	—

2. Cases in which DEFECTS were found.

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

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) ...	—	—	—	—	—
Overcrowding (S.2)... ..	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6) ... ..	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ... ..	—	—	—	—	—
(b) Unsuitable or defective	5	4	—	3	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work) ... ..	—	—	—	—	—
Total ... ..	5	4	—	3	—

## PART VIII OF THE ACT

## OUTWORK

(Sections 110 and 111)

Nature of work	Section 110			Section 111		
	No. of out-workers in August list required by Section 110(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing ) Making apparel ) etc. ...	79	—	—	—	—	—
Cosaques, Christmas stockings, etc. ...	42	—	—	—	—	—
Total ...	121	—	—	—	—	—



## PART III - SERVICES

## NATIONAL HEALTH SERVICE ACTS, 1946 - 1957.

**BIRTHS.** - In accordance with the provisions of the Public Health Act, 1936, all live births and all stillbirths of twenty-eight weeks gestation and over must be notified within 36 hours to the Medical Officer of Health of the area in which the birth took place. The number of live births notified in Ilford under this Act during 1961 was 1,928 (1,009 males and 919 females), of which there were 119 (61 males and 58 females) where the ordinary place of residence of the parents was outside Ilford.

In addition 737 notifications of live births (363 males and 374 females) which took place outside the district, although the ordinary residence of the parents was in Ilford, were transferred to this district.

There were also 30 stillbirths (18 males and 12 females) notified in Ilford, of which there were 3 (all females) where the ordinary place of residence of the parents was outside Ilford, and notifications of 11 stillbirths (5 males and 6 females) which took place outside the district, although the ordinary residence of the parents was in Ilford, were transferred to this district. This represents a total of 38 where the home address was stated to be in Ilford, whereas the Registrar-General has allocated 40 stillbirths to Ilford.

The following table shows the causes of the 38 stillbirths notified where the usual residence of the parents was stated to be in Ilford:-

## STILLBIRTHS 1961.

Cause of Stillbirth	Delivery unknown found on District	Delivery in Nursing Home	Delivery at Home	Delivery in Hospital	TOTAL
Achondroplasia ... ..	-	-	-	2	2
Anencephalic ... ..	-	-	-	1	1
Anoxaemia ... ..	-	-	-	1	1
Anoxia ... ..	-	-	1	2	3
Ante-Partum Haemorrhage ... ..	-	-	-	4	4
Asphyxia ... ..	-	-	-	2	2
Diaphragmatic Hernia ... ..	-	-	1	1	2
Eclampsia ... ..	-	-	-	1	1
Hydrocephalic ... ..	-	-	-	1	1
Hydrops Foetalis ... ..	-	-	-	1	1
Inco-ordinated Uterine Activity ... ..	-	-	-	1	1
Intra-Cranial Haemorrhage ... ..	-	-	-	1	1
Intra-Uterine Death ... ..	-	-	-	3	3
Multiple Abnormalities ... ..	-	-	-	4	4
Placental Insufficiency ... ..	-	-	1	3	4
Rhesus Incompatibility ... ..	-	-	-	1	1
Unknown ... ..	2	-	2	2	6
Totals ... ..	2	-	5	31	38

CARE OF PREMATURE INFANTS. — Of the 1,928 live births occurring in Ilford during 1961, 83 weighed 5½ lb. or less at birth, 11 of these babies were born on the district, 71 in Hospital (including 12 where the home address of the parents was outside Ilford), and one in a garage. The last mentioned infant, found abandoned shortly after its birth, was conveyed to hospital after resuscitation by the ambulance driver; the mother was subsequently traced and it was ascertained that her home address was outside Ilford.



Of the 11 babies born at home:-

- 7 were nursed entirely at home;
- 4 were transferred to hospital;
- 1 died at the age of three days (in hospital);
- 10 survived at the end of one month.

Of the 71 babies born in hospital:-

- 3 died during the first 24 hours;
- 2 died between the ages of one day and one month;
- 66 survived at the end of one month (including 12 where the home address was outside Ilford).

The baby born in the garage survived at the end of one month.

In addition, 49 notifications were received of births outside the district where the ordinary residence of the parents was in Ilford and the weight of the infant at birth was  $5\frac{1}{2}$  lb. or less. Of these there were:-

- 9 who died within the first 24 hours (in hospital);
- 40 who survived at the end of one month.

**INFANT MORTALITY.** — The number of infants dying within the first year of life was 40, the total number born being 2,533. The latter figure is supplied by the Registrar-General for calculating infant and maternal mortality rates. The infant mortality, or rate of deaths per 1,000 live births, was therefore 15.8.

The following table gives the deaths of infants under one year of age, classified according to age:-

## INFANT DEATHS 1961.

Cause of Death	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 Weeks	1-3 Months	3-6 Months	6-9 Months	9-12 Months	TOTAL
Atelectasis ... ..	5	-	-	-	5	-	-	-	-	5
Cerebral Haemorrhage ... ..	2	-	-	-	2	-	-	-	-	2
Circulation Failure ... ..	1	-	-	-	1	-	-	-	-	1
Congenital Heart Disease ... ..	2	1	-	-	3	2	1	1	-	7
Erythroblastosis Foetalis ... ..	1	-	-	-	1	-	-	-	-	1
Fibroelastosis ... ..	-	-	-	-	-	-	1	-	-	1
Haemolytic Disease of the Newborn	2	-	-	-	2	-	-	-	-	2
Hyaline Membrane Disease ... ..	1	-	-	-	1	-	-	-	-	1
Hydrocephalus ... ..	-	-	-	1	1	-	-	-	-	1
Intra-Ventricular Haemorrhage ...	1	-	-	-	1	-	-	-	-	1
Multiple Abnormalities ... ..	2	-	-	1	3	-	-	-	-	3
Pneumonia ... ..	1	-	-	-	1	3	-	-	1	5
Prematurity ... ..	7	-	-	-	7	-	-	-	-	7
Pulmonary Syndrome ... ..	1	-	-	-	1	-	-	-	-	1
Pyelonephritis ... ..	-	-	-	1	1	-	-	-	-	1
Respiratory Failure ... ..	1	-	-	-	1	-	-	-	-	1
Totals ... ..	27	1	-	3	31	5	2	1	1	40

The comparative figures for the past 10 years are as follows:-

Year	No. of Deaths under 1 year	Rate per 1,000 Registered Live Births
1961 ... ..	40	15.8
1960 ... ..	44	17.5
1959 ... ..	33	14.9
1958 ... ..	37	16.6
1957 ... ..	38	17.1
1956 ... ..	33	15.6
1955 ... ..	42	20.0
1954 ... ..	41	18.7
1953 ... ..	45	20.2
1952 ... ..	44	18.9



The mean average Infant Mortality rate for the past 10 years is therefore 17.5 per 1,000 live births.

The following table shows the comparison for Ilford, England and Wales and London for the past 10 years:-

<u>Year</u>	<u>Ilford</u>	<u>England and Wales</u>	<u>London</u>
1961 ... ..	15.8	22	21
1960 ... ..	17.5	22	22
1959 ... ..	14.9	22	22
1958 ... ..	16.6	23	23
1957 ... ..	17.1	23	22
1956 ... ..	15.6	24	21
1955 ... ..	20.0	25	23
1954 ... ..	18.7	25	21
1953 ... ..	20.2	27	25
1952 ... ..	18.9	28	24

NEONATAL MORTALITY. — The death-rate of infants under four weeks of age is known as the Neonatal Mortality. There were 31 deaths of infants under four weeks of age during 1961 and the rate for the year was 12.2 per 1,000 live births.

The figures for the past 10 years are as follows:-

<u>Year</u>	<u>Number</u>	<u>Rate</u>
1961 ... ..	31	12.2
1960 ... ..	38	15.1
1959 ... ..	27	12.2
1958 ... ..	29	13.0
1957 ... ..	30	13.5
1956 ... ..	25	11.8
1955 ... ..	30	14.3
1954 ... ..	29	13.2
1953 ... ..	34	15.2
1952 ... ..	32	13.8

ILLEGITIMATE BIRTHS AND DEATHS. — 96 of the live births registered (45 males and 51 females) were illegitimate, that is 3.8% of the births registered.

There were 3 deaths of illegitimate children under one year of age.

The following table shows the birth and death rates of legitimate and illegitimate infants for the past ten years:-

Year	Legitimate Infants				Illegitimate Infants			
	Live Births	Percentage of Registered Births	Deaths	Rate per 1,000 Legitimate Live Births	Live Births	Percentage of Registered Births	Deaths	Rate per 1,000 Illegitimate Live Births
1961	2,437	96.2	37	15.2	96	3.8	3	31.2
1960	2,417	96.2	44	18.2	95	3.8	—	—
1959	2,134	96.3	32	15.0	82	3.7	1	12.2
1958	2,155	96.7	36	16.7	73	3.3	1	13.7
1957	2,158	97.3	38	17.6	61	2.7	—	—
1956	2,056	97.2	30	14.6	59	2.8	3	50.8
1955	2,045	97.4	40	19.6	55	2.6	2	36.4
1954	2,145	97.8	40	18.6	48	2.2	1	20.8
1953	2,164	97.0	43	19.9	67	3.0	2	29.9
1952	2,232	96.1	44	19.7	91	3.9	—	—

The Chelmsford Diocesan Moral Welfare Association continued to undertake the care of the unmarried mother and her child on behalf of the County Council and there has been direct co-operation through their moral welfare workers for this district. In addition, all cases are followed up by the health visitors.

HEALTH VISITORS AND SCHOOL NURSES. — Miss J. M. Oliver, Superintendent Health Visitor, reports:-

#### "Care of Widows and Widowers

Early in 1961 it was decided that the health visitors would visit the home six weeks after the notification of a death certificate was received at the Public Health Offices.

It was felt that remaining partners (although we are not aware of these until we visit) might at this time need assistance. It would appear that this service is appreciated. Many partners are fit, able to



return to work or continue happily in their own homes. Others have been referred to social services such as National Assistance, W.V.S. and the Housing Department.

We find that many remaining partners are undecided about their future and tactful advice at this stage may prevent them breaking up their home which later they often regret.

### Home Accidents

A considerable number of people continue to be followed up after home accidents. Our liaison with our local hospital has been good and for many years they had been sending us particulars of these monthly. Information was brief giving details of admission, discharge and transfer to other hospitals. Many elderly people were helped following their discharge and discussion on the prevention of avoiding further accidents was one of the health visitor's aims.

The local link with the hospital was made more difficult when all such reports went to Chelmsford for information, with the ultimate object of reducing the incidence of home accidents. Our former procedure was more efficient, and reports now come to us first, as an early visit may assist the person recovering from an accident. We continue preventive education against home accidents, taking part in all the RoSPA campaigns locally. Group discussions in welfare centres were ideal, one health visitor doing this for three months at a time, taking such objects as "Dangerous Pills", "Safe Materials" and "Water Safety" etc.

### Hospital Discharges

Information from hospitals outside the area vary; from hospitals dealing with children it is good and the Almoner always telephones if the matter is urgent. The health visitor visiting the local hospital ward knows of the discharges weekly.

Geriatric Wards – notices here again vary from a detailed report by the Almoner to a slip of paper which requests the health visitor to visit and she does so, not even being aware of the patient's illness. This sometimes can lead to confusion and unnecessary overlapping.

General Hospitals – unless the patient has an urgent problem or is likely to require considerable care and relatives need support we are not likely to hear of these. I feel, however, that we do know of such very ill or helpless cases usually where hoists, walking aids, laundry service and other facilities come within our province.



### General Practitioner and Health Visitor

One health visitor continues to work twice-monthly with a general practitioner, one session for mothers and babies and another teaching mothercraft to expectant mothers. I am sure the people covered benefit from this combined service. Other general practitioners continue to telephone for assistance via the Public Health Department.

### Health Education

Apart from our campaigns mentioned, our health education efforts continue as last year. The three mothers' clubs are kept going by the efforts of the health visitors. The seven mothercraft and relaxation sessions could I am sure be much better attended.

### Careers Exhibition and Training of other Students

The above exhibition was held in the Town Hall and health visitors assisted the hospital stands. A tree of professions in the nursing world took pride of place and health visiting leaflets were displayed. Any opportunity given to increase suitable candidates to the profession is worth while. Many of the school children visiting the stands knew the health visitor and questions were varied. We continue to train student health visitors, student nurses and other social workers.

### Tuberculosis Visiting

The work of our three tuberculosis visitors has been changing slightly and follow-up of cases of lung cancer now need their attention. The liaison with the nearest chest hospital has improved and visits made to reassure patients worried about home difficulties or to persuade them to accept their treatment have been helpful."

At the end of the year there were 19 full-time and 5 part-time qualified health visitors and school nurses, in addition to the Superintendent Health Visitor, and 5 clinic nurses.

The following is a summary of the home visits made by the health visitors and clinic-nurses during 1961 as far as Part III Services are concerned:-

First visits to newly-born infants ... ..	2,505
Subsequent visits to children under 1 year of age ...	6,732
Subsequent visits to children over 1 year of age and under 5 ... ..	14,878
Visits to expectant mothers ... ..	1,098
Home visits for other reasons (inc. 1,247 visits to old folk) ... ..	3,798
Total visits paid ... ..	<u>29,011</u>



In addition there were 5,833 visits paid where no reply was received.

At the request of the Director of the Public Health Laboratory at the Chelmsford and Essex Hospital, assistance has been given in a survey, which has been carried out in selected areas throughout the Country, to determine the intestinal carriage of poliomyelitis, other viruses and food poisoning organisms in young children. The survey was commenced in Ilford in July 1961, with the object of covering over a period of a year about 1,000 children under the age of five years, some 20 children being selected at random in specified age groups each week. A letter sent to the parents explaining the nature of the survey and seeking their co-operation has been followed by a visit from the health visitor and those parents who have agreed to take part have themselves posted to the laboratory a specimen of the child's faeces. The excellent response has been very gratifying and in the six months ended the 31st December 1961, of 505 families contacted by the health visitors 494 had agreed to participate and a total of 459 specimens had been received at the Laboratory.

#### DAY NURSERIES

(a) The hours of opening at the two nurseries during 1961 continued to be 7.30 a.m. to 6 p.m., Monday to Friday only.

(b) The standard charge for accommodation at the day nurseries remains at 10/6d. per child per day. Provision is made for this charge to be reduced according to scale when the means of the parents do not justify the full fee.

Accommodation has continued to be made available to neighbouring Areas for children who can more conveniently attend an Ilford nursery than one in their own Area.

(c) The training of students at the Nurseries for the Certificate of the National Nursery Examination Board continued. Six students (3 from the Ley Street Nursery and 3 from the Goodmayes Lane Nursery) entered for the examination during the year, all of whom obtained the Certificate.

(d) The following is a table showing the attendances, etc., at the day nurseries during 1961:-

Situation	Accommodation (Children)	Average daily attendance during 1961	No. of days "In Quarantine"	Reasons for "Quarantine" with Number of Cases			No. on Waiting List at 31st Dec. 1961
				Chicken Pox	Mumps	Measles	
Goodmayes Lane, Goodmayes ... ..  (Opened 14.11.51 - replaced Green Lane Nursery, open from 5.5.43 to 9.11.51)	50	43	54	-	12	5	13
226-236, Ley Street, Ilford ... ..  (Opened 16.8.43)	50	40	101	6	1	6	18

NURSERIES AND CHILD-MINDERS REGULATION ACT, 1948. —  
This Act requires, inter alia, that every local health authority shall keep registers —

- (a) of premises in their area, other than premises wholly or mainly used as private dwellings, where children are received to be looked after for the day or a substantial part thereof or for any longer period not exceeding six days;
- (b) of persons in their area who for reward receive into their homes children under the age of five to be looked after as aforesaid.

Certain conditions are laid down to safeguard the welfare of the children received and one of the most recently introduced requirements, as part of the precautions against exposure to infectious diseases, is that all persons to be engaged in caring for the children concerned shall have satisfactorily passed, within the two preceding years, an X-ray examination of the chest and shall thereafter submit themselves annually to such examination. All persons already on the registers were invited to take similar action, so far as concerned themselves and any persons engaged by them to care for the children, and all agreed to comply.

The following shows the position regarding registrations under the Act:-



	(a) <u>Premises</u>	(b) <u>Child-minders</u>
Number on register at 31.12.60	7	5
Number registered during 1961	7	3
Number removed from register during 1961 ... ..	1	3
Number on register at 31.12.61	13	5
Number of children provided for at 31.12.61 ... ..	403	28

The premises referred to in (a) above as removed from the register, were closed by the person in charge as she no longer wished to receive children therein.

The 3 child-minders whose names were removed from the register (see (b) above) no longer wished to act in that capacity.

#### CLINIC PREMISES

Manford Way, Health Services Clinic. – The Family Planning Association continued to use these clinic premises throughout 1961 for their sessions on every Monday evening, a charge being made to them to cover the cost of heating, lighting, cleaning and caretaking.

INFANT WELFARE CENTRES. – 90 voluntary lady helpers were engaged in the work at the infant welfare centres at the end of December, 1961. During the year a letter was sent to each voluntary helper advising her that all persons working amongst young children should, as a precautionary measure, have an annual chest X-ray and inviting her to attend the Mass X-ray Unit at the Thompson Rooms, Ilford. The response was excellent.

In view of the heavy attendances at the Wednesday afternoon centres at the Kenwood Gardens and Heathcote Avenue Clinics, an additional session was arranged at each of these premises, viz. on Friday mornings at the Kenwood Gardens Clinic, commencing on the 6th January, 1961, and on Wednesday mornings at the Heathcote Avenue Clinic, as from the 28th June, 1961.

During the year 1961 the following attendances were recorded:-

Total number of attendances of infants ... ..	41,730
First attendances ... ..	2,401
Attendances of children from 1 to 5 years ... ..	9,934
Total number of children on roll on 31/12/61 after omission of all those who had not attended for six months ... ..	4,287

The following is a comparison of the attendances at the infant welfare centres for the past five years:-

Year	Total No. of attendances of Infants	First attendances	Total No. of children on roll on 31st December
1961 ... ..	41,730	2,401	4,287
1960 ... ..	38,560	2,372	4,460
1959 ... ..	35,961	2,043	3,859
1958 ... ..	35,756	1,946	3,802
1957 ... ..	37,948	1,916	3,976

834 sessions were held during the year, the average attendance per session being 50 mothers with their infants.

The following are the figures for each centre:-

	<u>Sessions</u>	<u>Average Attendance</u>
Chadwell ... ..	48	58
Becontree ... ..	48	56
Downshall ... ..	48	59
Manford Way ... ..	48	39
Kenwood Gardens (Wednesdays) ... ..	48	64
Kenwood Gardens (Friday mornings) (from 6/1/61) ... ..	48	19
Seven Kings ... ..	48	65
Grosvenor Road ... ..	47	50
Heathcote Avenue (Wednesday mornings) (from 28/6/61) ... ..	25	14
Heathcote Avenue (Wednesday afternoons)	48	57
Cecil Hall (Wednesdays) ... ..	47	47
Cecil Hall (Thursdays) ... ..	47	41
Newbury Hall ... ..	47	58
Marks Gate ... ..	48	38
Goodmayes ... ..	48	51
Ilford Lane ... ..	46	49
Fairlop ... ..	47	60
The Drive ... ..	48	52



TODDLERS' CLINIC. — Dr. J.M. Pooley reports as follows with regard to the Toddlers' Clinic, which is held at the Kenwood Garden Clinic:-

"During 1961, unfortunately it was only possible to hold 8 toddler clinic sessions; this was due to pressure of other clinics and to illness. However, the clinic was keenly attended and the sessions are now being held on every third Wednesday morning.

The mothers are interested and co-operative, and the clinic is proving extremely valuable in detecting speech, visual and minor orthopaedic defects which would not otherwise be dealt with until the child is of school age.

The sessions, attendances and referrals for the year were as follows:-

Sessions held ... ..	8
First attendances ... ..	63
Follow-up attendances ... ..	49
Referrals to other clinics ... ..	16
Referrals to hospital ... ..	1

PHENYLPYRUVIC AMENTIA. — This form of mental backwardness is associated with the presence of phenylpyruvic acid in the urine, and by early detection and dietary treatment mental deterioration that is otherwise unavoidable may be prevented. The arrangements for testing by routine the urine of infants at the third to fourth week of life for the detection of the presence of this acid have continued. The test is a simple one and is carried out by the health visitors. The following are the statistics with regard to this testing in the year 1961.

- (i) Number of children tested:-
- |                                                     |       |       |
|-----------------------------------------------------|-------|-------|
| (a) Where specimen of urine obtained at clinic ...  | 1,258 |       |
| (b) Where specimen of urine obtained at home ... .. | 734   | 1,992 |
- (ii) Number of children tested (included in (i) above) because of suspected mental backwardness ... Nil
- (iii) Number of tests which resulted in a positive reaction Nil

ORTHOPAEDIC CLINIC. —

The following table summarises the attendances of children under 5 years during 1961:-

Clinic	Sessions	New Cases	Old Cases	Attendances
Kenwood Gardens ... ..	43	88	98	307
Mayesbrook ... ..	23	34	38	115
Manford Way ... ..	7	3	7	11
Totals ... ..	73	125	143	433

The 268 children were found by the Orthopaedic Surgeon to have the following defects:-

Diagnosis	New Cases			Old Cases		
	A	B	C	A	B	C
Spastic Paresis ... ..	1	—	—	—	—	—
Deformity of Hips ... ..	1	1	—	—	—	—
Genu Valgum ... ..	33	17	—	39	10	2
Pes Valgo-Planus ... ..	3	1	—	3	—	—
Valgus Ankles ... ..	11	2	1	16	6	3
Congenital Talipes E.V. ... ..	9	1	—	3	—	—
Intoeing ... ..	12	2	—	7	7	—
Deformity of Toes ... ..	2	6	1	7	3	—
Scoliosis ... ..	—	—	—	3	—	—
Metatarsal Varus ... ..	2	—	—	—	—	—
Out. Curvature Tibiae ... ..	—	—	—	—	2	—
Genu Varum... ..	—	—	—	—	1	—
Deformity of Foot ... ..	—	—	—	3	—	—
Hemiplegia ... ..	—	1	—	—	—	—
Postural Defect ... ..	1	—	—	6	—	—
Torticollis ... ..	—	2	—	—	—	—
Kyphosis ... ..	1	—	—	11	9	2
Other conditions ... ..	12	1	1	—	—	—
Totals ... ..	88	34	3	98	38	7

A — Kenwood Gardens B — Mayesbrook C — Manford Way

12 pairs of valgus insoles, 7 G.V. night splints and 85 wedges to shoes were supplied during 1961.

In addition 1 repair to surgical shoes and 2 repairs to splints were undertaken.

The Physiotherapist treated 53 children under 5 at Kenwood Gardens Clinic, 38 at Mayesbrook Clinic and 2 at Manford Way, with attendances of 528, 285 and 12 respectively.

PAEDIATRIC CLINIC. — Dr. A. Russell, the Consultant Paediatrician, continued to attend this Clinic at Kenwood Gardens Clinic during 1961. 28 sessions were held and 114 new cases were examined, having been referred from the infant welfare centres, schools and the Ilford Maternity Hospital for the reasons set out in the following table; a total of 274 attendances were made.



Diagnosis	Discharged Improved	Discharged with advice or for other reasons	Discharged No treatment	Cured	Referred Hospital, Doctor or Clinic	Still Attending	Total
Amentia ... ..	-	-	-	-	1	-	1
Asphyxia Neonatorum ... ..	-	-	-	-	1	-	1
Blue Spot ... ..	-	-	1	-	-	-	1
Bronchospasm ... ..	-	-	-	-	-	1	1
Cardiac Murmur... ..	2	3	-	-	1	-	6
Cephalhaematoma ... ..	1	-	2	-	-	-	3
Choroidal Atrophy ... ..	-	-	-	-	-	1	1
Cleft Palate ... ..	-	-	-	-	2	-	2
Congenital Megacephaly... ..	-	-	1	-	-	3	4
Corneal Opacity ... ..	-	-	-	-	1	-	1
Cryptorchidism ... ..	-	-	1	-	-	-	1
Cyst ... ..	-	-	-	-	1	-	1
Deaf Mutism ... ..	-	-	-	-	-	1	1
Ectopic Testis... ..	-	-	-	-	1	-	1
Epulis ... ..	-	-	-	-	1	-	1
Enuresis ... ..	-	-	-	-	1	1	2
Erbs Palsy ... ..	-	-	-	-	-	1	1
Facial Palsy ... ..	-	-	-	-	-	1	1
Feeding problems ... ..	2	8	1	-	-	3	14
Fibrocystic disease ... ..	-	-	-	-	-	1	1
Haemangioma ... ..	1	-	-	-	-	-	1
Hernia ... ..	-	-	-	-	2	1	3
Hydrocele ... ..	1	1	1	-	-	-	3
Hypospadias ... ..	-	-	1	-	3	-	4
Jaundice ... ..	-	-	-	-	-	1	1
Malrotation of Midgut ... ..	-	-	-	-	-	1	1
Migraine ... ..	-	1	-	-	-	-	1
Mongolism... ..	-	-	-	-	-	1	1
Muscular Dystrophy... ..	-	-	-	-	1	-	1
No abnormality discovered ... ..	-	8	13	-	-	4	25
Naevi... ..	-	-	1	-	-	1	2
Obesity ... ..	-	-	-	-	-	1	1
Overlapping toes ... ..	-	-	-	-	-	1	1
Pilonidal dimple ... ..	-	-	2	-	-	-	2
Plagiocephaly ... ..	-	-	1	-	-	-	1
Ptosis ... ..	1	-	-	-	-	-	1
Pyloric Stenosis ... ..	-	-	-	-	1	-	1
Prematurity ... ..	-	-	-	-	-	1	1
Respiratory Infection ... ..	1	-	-	-	-	-	1
Scalp Keloid ... ..	-	-	1	-	-	-	1
Sterno-Mastoid Tumor ... ..	1	-	-	1	-	1	3
Stress Diarrhoea ... ..	-	-	-	-	-	1	1
Sub-Periosteal Haematoma ... ..	1	-	-	-	-	-	1
Supernumerary Digit ... ..	-	-	-	-	3	-	3
Talipes ... ..	-	2	-	-	-	-	2
Under observation ... ..	-	-	1	-	1	4	6
Totals ... ..	11	23	27	1	21	31	114

Special cases are followed-up over a long period, re-attending the clinic for examination periodically, and in cases where special treatment or investigation is required admission is arranged to the Consultant Paediatrician's hospital units.

OPHTHALMIC CLINICS. — Attendances of children under school age for treatment by the Ophthalmologists during 1961 were as follows:-

	Kenwood Gardens Clinic	Mayesbrook Clinic	Manford Way Clinic	Total
Number of children who attended ... ..	57	64	8	129
Number of pairs of spectacles prescribed ...	11	21	1	33
Total number of attendances made ... ..	88	134	12	234

EAR NOSE AND THROAT CLINIC. — The E.N.T. Surgeon attended at 50 sessions during 1961. There were 20 new cases commenced, and a total of 34 attendances were made by children of pre-school age.

Operations were performed on two children, one at King George Hospital and one at Chadwell Heath Hospital.

ARTIFICIAL SUNLIGHT CLINIC. — The following table summaries the attendances of children under 5 years:-

Clinic	Sessions	New Cases	Old Cases	Attendances	Discharged		
					Cured	Much Improved	Left District etc.
Kenwood Gardens	44	1	—	2	1	—	—
Mayesbrook ...	43	2	3	11	1	—	—
Totals ...	87	3	3	13	2	—	—

The conditions treated were anaemia, debility, malnutrition and catarrh.

SPEECH CLINIC. — 43 children of pre-school age attended, making 569 attendances. The following is the classification of the defects found by the speech therapist:-

Dyslalia ... ..	16
Stammering ... ..	4
Retarded speech and language ... ..	17
Others ... ..	3

In three cases it was found that no treatment was required.



VACCINATION AND IMMUNISATION. — In the autumn of 1961 the County Council approved revised arrangements for vaccination and immunisation in accordance with advice given to the Minister of Health by the Standing Medical Advisory Committee. These provide for a programme throughout childhood involving smallpox and poliomyelitis vaccination and immunisation by the use of combined antigens against diphtheria, whooping cough and tetanus, with appropriate reinforcing doses. The provision of facilities for immunisation against tetanus to all residents in the Administrative County was approved in principle, but for the time being this form of immunisation is limited to children up to school leaving age.

Immunisation against Diphtheria, Whooping Cough and Tetanus. — Regular sessions for immunisation, combined with the school clinics held for the treatment of minor ailments, were held throughout 1961 at the Kenwood Gardens and Mayesbrook Clinics, and at the Manford Way, Newbury Hall, Marks Gate and Heathcote Avenue Clinics immunisation was undertaken at the infant welfare centre sessions. In addition, much of this work has, as previously, been carried out by general practitioners.

Details of the immunisations carried out during the year 1961 are given in the following table:-

Form of Immunisation	Primary Courses	Reinoculations	Attendances at Clinics
<b>Diphtheria only:</b>			
Kenwood Gardens Clinic ... ..	108	213	621
Mayesbrook Clinic ... ..	197	231	924
Infant Welfare Centres ... ..	263	82	962
Totals at Clinics ... ..	568	526	2,507
General Practitioners ... ..	1,204	1,524	—
<b>Totals ... ..</b>	<b>1,772</b>	<b>2,050</b>	<b>2,507</b>
<b>Whooping cough only:</b>			
Kenwood Gardens Clinic ... ..	105	—	314
Mayesbrook Clinic ... ..	184	—	551
Infant Welfare Centres ... ..	250	9	803
Totals at Clinics ... ..	539	9	1,668
General Practitioners ... ..	790	125	—
<b>Totals ... ..</b>	<b>1,329</b>	<b>134</b>	<b>1,668</b>
<b>Tetanus only:</b>			
General Practitioners ... ..	3	—	—
<b>Diphtheria and whooping cough (combined) ...</b>			
General Practitioners ... ..	941	497	—
<b>Diphtheria, whooping cough and tetanus (triple):</b>			
Kenwood Gardens Clinic ... ..	1	—	1
General Practitioners ... ..	70	40	—
<b>Totals ... ..</b>	<b>71</b>	<b>40</b>	<b>1</b>

For purposes of comparison, the following summary shows the numbers of children inoculated and reinoculated over the past five years:-

	<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
Diphtheria immunisation:-					
Primary courses ... ..	1,774	2,082	2,042	2,862	2,784
Reinoculations ... ..	1,140	1,696	1,192	2,019	2,587
Whooping cough immunisation:-					
Primary courses ... ..	1,641	1,798	1,692	2,074	2,341
Reinoculations ... ..	322	409	290	542	671
No. of live births in Ilford ...	2,219	2,228	2,216	2,512	2,533

(N.B. Where combined diphtheria and whooping cough antigens have been used, the figures have been included under both headings).

Vaccination against Poliomyelitis. — The programme of vaccination of the eligible groups, i.e. children and adults from the age of six months to 40 years at the date of registration, expectant mothers, and doctors, dentists, nurses, ambulance and certain other public health staff and their families proceeded during 1961.

As was mentioned last year, the scheme was further extended in May 1961 by the introduction of a reinforcing fourth injection for all children between the ages of 5 and 12 years and also those who were under 5 if they are attending school. Unfortunately later in the year the administration of this fourth injection had to be suspended owing to a shortage of vaccine, but I am glad to record that it was recommenced in April 1962.

The general practitioners have continued to play an important part in the scheme and most of those practising in the Area are participating.

During 1961 in addition to holding sessions at the various clinics, most of which were combined with school clinic or infant welfare centre sessions, our medical and nursing staff, with the excellent co-operation extended by many of the larger firms in the Area, continued to visit their premises during working hours to vaccinate eligible persons employed by them. The statistics given over-page show the vaccinations carried out by our medical staff:-



<u>Premises</u>	<u>No. of Sessions</u>	<u>Injections given</u>			
		<u>First</u>	<u>Second</u>	<u>Third</u>	<u>Fourth</u>
Kenwood Gardens Clinic	42	549	584	745	1,193
Mayesbrook Clinic ...	20	412	368	414	848
Manford Way Clinic ...	46	115	107	92	266
Newbury Hall ... ..	21	25	25	26	275
Marks Gate Clinic... ..	27	50	45	19	33
Heathcote Avenue Clinic	27	150	123	110	248
Factories, etc. ... ..	17	268	218	818	-
<b>Totals ... ..</b>	<b>200</b>	<b>1,569</b>	<b>1,470</b>	<b>2,224</b>	<b>2,863</b>

The medical staff at the Village Homes, Barkingside, also carried out a total of 48 primary courses, 26 third injections, and 9 fourth injections.

Record cards received in 1961 from general practitioners were as under:-

Completed primary courses (two injections) ... ..	5,941
Third injections ("boosters") given ... ..	5,564
Fourth injections ("boosters") given ... ..	6,855

At the 31st December, 1961 a total of 56,858 primary courses had been completed in Ilford (36,648 children under 16 years, 9,663 persons aged 16 to 25 years, 8,061 persons aged 26 to 40 years and 2,486 general practitioners, ambulance staff, dentists, hospital and public health staff and their families, etc.).

Towards the end of 1961 information was received that the Ministry of Health had decided on the use of Sabin (oral) vaccine and this became available early in 1962.

Smallpox Vaccination. - During 1961 record cards were received from general practitioners and various hospitals as follows:-

Children under 2 years of age:-

No. primarily vaccinated ... ..	1,200
No. re-vaccinated ... ..	6

Others (including adults):-

No. primarily vaccinated ... ..	424
No. re-vaccinated ... ..	640

In addition 150 children (142 under the age of two years and 8 over two years) were primarily vaccinated at the infant welfare centres at the Kenwood Gardens, Manford Way, Mayesbrook and Marks Gate Clinics.

The following table shows the figures over the past five years:-

	<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
No. of primary vaccinations ... ..	2,169	1,714	1,529	1,646	1,774
No. of re-vaccinations ... ..	975	537	562	485	646
Totals ... ..	<u>3,144</u>	<u>2,251</u>	<u>2,091</u>	<u>2,131</u>	<u>2,420</u>
No. of live births in Ilford ... ..	2,219	2,228	2,216	2,512	2,533

**TREATMENT OF MINOR AILMENTS.** – Children suffering from simple dietetic ailments are treated at the infant welfare centres. Facilities are, however, available at the sessions held for school children at Kenwood Gardens and Mayesbrook Clinics for children under school age to receive treatment for minor ailments, although in practice very few so attend.

**MIDWIVES.** – There were 13 State Certified midwives (including the Non-Medical Supervisor of Midwives, 9 domiciliary midwives and 2 part-time midwives employed by the County Council), resident and practising in the district at the end of the year. In addition there were 25 State Certified midwives at the Ilford Maternity Hospital.

Supervision of the midwives practising on the district, including regular inspections by the Medical Supervisor of Midwives, was carried out as in previous years, and general supervision, in accordance with the Rules of the Central Midwives Board, was exercised over the midwives practising at the Ilford Maternity Hospital.

**Suspension from Practice.** – It was necessary in 1961 to require two domiciliary midwives to remain off duty, one for 15 days and the other for 10 days, to prevent the spread of infection.

**Medical Aid.** – Medical aid was sought in two instances where the infant was found to have a discharging eye. The condition of the eye cleared satisfactorily in each case.

**Domiciliary Midwifery Service.** – At the end of the year there were 9 domiciliary midwives employed by the County Council whole-time and 2 part-time, in addition to the Non-Medical Supervisor.

During the year 603 cases were attended and a doctor was specially called in by the midwife to 78 of these.

Of the infants born there were 5 stillbirths.



Five deaths occurred of infants during the first year of life where the birth had been attended by a domiciliary midwife; in four of these the infant was under the age of ten days.

During 1961 ante-natal clinics conducted by the domiciliary midwives were held weekly at the Kenwood Gardens and Mayesbrook Clinics, fortnightly at the Manford Way and Heathcote Avenue Clinics and twice a month at Marks Gate Clinic. The following is a summary of the attendances at these clinics during the year:-

	First Attendances	Subsequent Attendances	No. of Sessions	Average Attendance per Session
Kenwood Gardens Clinic	397	1,099	51	29
Mayesbrook Clinic ...	245	771	45	22
Manford Way Clinic ...	86	258	26	13
Heathcote Avenue Clinic	58	208	25	10
Marks Gate Clinic ...	44	163	23	9
Totals ...	830	2,499	170	20

In addition 2,871 home ante-natal visits were made during the year.

The scheme continues whereby the doctor and the midwife have a consultation about their patient on several occasions during the pregnancy. The examinations take place at the patient's home, the doctor's surgery or at the Local Health Authority's clinic, as mutually agreed, but in practice the joint consultation is held in the majority of cases in the doctor's surgery.

The Ilford Borough Council continued to provide housing accommodation, where necessary, for midwives employed in the service of the Ilford Health Area Sub-Committee. At the 31st December 1961, one maisonette and two flats were being rented by the County Council from the Borough Council under this arrangement.

During 1961, the domiciliary midwives continued to assist in the training of pupil midwives from the Thorpe Coombe Maternity Hospital, Walthamstow; nine of the whole-time midwives have been approved by the Central Midwives Board as teaching district midwives. The arrangements are for six or seven pupils to come to Ilford at a time for a period of three months, accommodation being provided in one of the local hospitals or in a private house. 20 pupil midwives completed their district training in the Area during 1961 and 6 were still undertaking this training at the 31st December.

Salvation Army Midwifery Service. – One Salvation Army midwife, with a further midwife assisting her as required, served in Ilford during the year, 56 cases were attended by them and a doctor was called in to 26 of these.

Of the infants born there were no stillbirths.

One death occurred of an infant where the birth had been attended by a Salvation Army midwife, the age of the infant being one day.

Gas and Air Analgesia. – During 1961 gas and air analgesia was administered in 569 cases (538 attended by the domiciliary midwives and 31 by the Salvation Army midwives).

All the domiciliary midwives employed at the end of the year were qualified to administer gas and air analgesia and the Salvation Army midwives were also qualified.

Arrangements continued in operation for each of the midwives using cars in the course of their duties to hold a machine at their respective homes to take with them to their own cases and there are also machines stored at the Ambulance Station for the use of the remaining midwives. With regard to the latter, the relatives of the patient are requested to collect a machine, where possible, but when they cannot do this, arrangements are made for a machine to be transported from the Ambulance Station to the house by a hired car, or failing this, by an ambulance vehicle.

The Salvation Army midwives also have two machines which are kept at their Branch Home and taken or sent to the home of the patient when required.

The service is freely available to all having home confinements, provided there are no medical contra-indications, and each expectant mother on booking the midwife is supplied with a leaflet explaining the nature and the availability of the service.

ANTE-NATAL CLINICS. – The following is a summary of the attendance at the ante-natal clinics during 1961 for patients booked for confinement in hospital:-



	Maternity Hospital		Mayesbrook	Manford
	Doctors	Midwives	Clinic	Way Clinic
First attendances ...	908	—	246	125
Subsequent attendances	3,908	3,403	2,316	889
Totals ...	4,816	3,403	2,562	1,014
Number of sessions ...	304	256*	128	54
Average attendance at each session ...	16	13	20	19

\* Includes 205 running concurrently with doctors' clinics.

All patients booked for admission to the Maternity Hospital are medically examined at the ante-natal clinics. The first examination takes place at the 10th week of pregnancy, or as soon as possible after that time if the booking for hospital admission is not made until after the 10th week. Further, arrangements are made for all hospital booked patients to see the Obstetric Registrar at either the Ilford Maternity Hospital or the Mayesbrook Ante-Natal Clinic at about the 35th week of pregnancy.

In conjunction with the ante-natal clinics at the Manford Way and Mayesbrook Clinics the Health Visitors hold classes for relaxation exercises. During 1961 there were 96 sessions at the Mayesbrook Clinic, with 603 attendances, and 97 sessions at Manford Way Clinic, with 656 attendances. A weekly session was also run by Health Visitors at Kenwood Gardens Clinic, 44 sessions being held in the year, with 312 attendances, and at Heathcote Avenue Clinic there were 45 sessions, with 365 attendances. At Cecil Hall the Health Visitors commenced a weekly class in June and held a total of 16 sessions during 1961, with 88 attendances.

Relaxation exercises classes are in addition held by the staff of the Ilford Maternity Hospital for patients attending the ante-natal clinic there.

**POST-NATAL CLINICS.** — All patients confined in the Ilford Maternity Hospital and other patients on request are invited to attend a post-natal clinic for the first time approximately six weeks after confinement.

During 1961 clinics were held at the Maternity Hospital weekly, at Mayesbrook Clinic fortnightly, and at Manford Way Clinic monthly. The following attendances were recorded:-

	<u>Maternity Hospital</u>	<u>Mayesbrook Clinic</u>	<u>Manford Way Clinic</u>
First attendances ... ..	754	221	82
Subsequent attendances ... ..	<u>143</u>	<u>79</u>	<u>7</u>
Totals ... ..	<u>897</u>	<u>300</u>	<u>89</u>
Number of sessions ... ..	52	27	12
Average attendance at each session	17	11	7

CONSULTANT CLINIC. — There were two Consulting Obstetricians in 1961 who each held a weekly clinic for ante-natal and post-natal cases. During the year 104 sessions were held and a total of 2,044 examinations were made.

MATERNAL MORTALITY. — During 1961 there was one death of an Ilford mother recorded by the Registrar-General as due to or in consequence of pregnancy or childbirth; this occurred in hospital.

DOMESTIC HELP SERVICE. — During 1961 the heavy demand for this service continued. The service was controlled by two full-time organisers, under the general direction of the Area Medical Officer, and at the end of the year there were 3 full-time, 126 regularly-employed part-time and 13 casual helps employed. Although every effort is made to accelerate recruitment of domestic helps, including periodic advertising of vacancies in the local press, it has not been possible to engage a sufficient number to provide all the service required, but the organisers ensure that the helps available are employed to the best possible advantage to give some assistance to every case requiring it; this can only be achieved by allocating most of the helps to two or three cases in a day.

The following is a summary of the cases dealt with in 1961:-

Number of applications received for assistance ... ..	1,564
Number of cases where domestic helps were provided (including 854 who were having service at the commencement of the year)	2,059
Number of cases which on investigation were either not eligible for assistance or did not require the service ... ..	142
Cases booked but subsequently cancelled	98



Number of cases where, at the end of the year, a domestic help was booked to attend in future months (maternity cases)	83
Other cases awaiting help at end of year	22
Enquiries incomplete at end of year ... ..	14
Cases being served at 31st December, 1961	898

During 1961 the County Council approved the provision of free domestic help service in all cases where a doctor certifies an expectant mother as suffering from toxæmia of pregnancy and such assistance is medically necessary. Although no cases were dealt with under this scheme during that year, this facility has been utilised in 1962.

One training course, of two weeks' duration, was held by the County Council at Chelmsford in 1961. One domestic help from Ilford attended and she was found to be entirely satisfactory.

**NIGHT ATTENDANCE SERVICE.** – The service for supplying night attendants to give some relief to those people called upon to sit up constantly at night with sick relatives or friends, or to help sick persons with no one to whom to turn for such assistance, has continued. This is integrated with the domestic help service and controlled by the two full-time organisers under the general direction of the Area Medical Officer. Details during 1961 are as follows:-

Number of applications received for assistance ... ..	55
Number of cases where night attendants were provided	38
Number of cases which on investigation were either not eligible for assistance or did not require the service	16
Number of cases awaiting help at end of year ... ..	1
Number of cases being served at 31st December, 1961	2
Total number of hours for which attendants were provided ... ..	2,216
Number of attendants on panel at 31st December, 1961	3

**DAY ATTENDANCE SERVICE.** – The arrangement with the Ilford Social Service Association for providing day attendants in approved cases to sit with sick and infirm persons who cannot afford to meet the charge made by the Ilford Social Service Association, the County Council making

agreed payments to the Association, has continued. 3 cases were dealt with under this arrangement during 1961, the details being as follows:-

No. of cases being attended at 31.12.60. ... ..	Nil
No. of new cases attended during 1961 ... ..	3
No. of cases discontinued during 1961 ... ..	3
No. of cases being attended at 31.12.61. ... ..	Nil
Total number of attendances given:-	
(a) whole days ... ..	13
(b) half days ... ..	5

PREVENTION OF BREAK-UP OF FAMILIES – HEALTH OF CHILDREN. – Supervision of the few problem families in the Area continues, the health visitors taking the leading role and discussing the problems with interested persons, e.g. general practitioners, teachers, Housing Manager and psychiatric social workers. Local case conferences are called as necessary.

The one family, consisting of mother, father and four children admitted to the Rehabilitation Unit at Dr. Barnardo's Homes, Barking, on the 3rd August 1960, under the County Council's scheme, was discharged on the 31st July, 1961, after having made very good progress. Accommodation was then provided for them by the County Welfare Officer in a hostel, pending rehousing.

CONVALESCENT FACILITIES. – The following tables show the number of persons sent away for recuperative holidays during 1961:-

(a) Under Section 22 of the National Health Service Act, i.e., nursing mothers and young children.

Name of Home	No. of Cases	No. of weeks' stay	Remarks
Roland House, Littlehampton ...	2	4	2 unaccompanied children
Lennox House, Southsea ... ..	1	2	Mother and baby
Church Army Home, Bexhill ...	1	2	Mother and baby
Castlehurst Residential Nursery, Whitstable ... ..	1	2	Unaccompanied child
Mrs. McNeil's Home, Henfield ...	1	4	Unaccompanied child
St. Helen's Convalescent Home, Letchworth ... ..	1	3	Unaccompanied child
St. Edith's Centre, Leigh-on-Sea	2	3	2 mothers and babies
Totals ... ..	9	27	5 unaccompanied children 4 mothers and babies



(b) Under Section 28 of the Act, i.e. other persons requiring a change of air and surroundings to aid recovery and rehabilitation.

Name of Home	No. of weeks' stay		Total Cases
	2	3	
Bell Memorial Convalescent Home, Lancing ... ..	14	8	22
Caxton Convalescent Home, Limps- field ... ..	4	—	4
Miss Clark's Home, Brighton ...	1	—	1
Donkey Club Holiday Home, Lancing	2	—	2
Grange Farm Holiday Centre, Chig- well ... ..	1	—	1
The Holiday Home, Bournemouth ...	1	—	1
John Beech Home, Chingford ...	1	—	1
Mildmay Convalescent Home, Worthing	6	—	6
Rustington Convalescent Home, Littlehampton ... ..	2	2	4
Samuel Lewis Convalescent Home, Walton-on-Naze ... ..	10	—	10
St. Michael's Convalescent Home, Clacton ... ..	9	3	12
Shoreditch Convalescent Home, Cophorne ... ..	3	—	3
Mrs. Stiffell's Home, Clacton ...	2	—	2
Wooburn Guest House, Thorpe Bay	4*	—	4
Totals	60	13	73

\*One patient stayed one week only, although arrangements had been made for two weeks.

A standard charge of £3.18s.2d. per week is made, but this is subject to reduction, according to scale, in necessitous cases. Travel vouchers are issued in cases where the payment of fares would cause hardship.

LOAN OF SICK ROOM EQUIPMENT. — The considerable demand for equipment continues and the following table shows the issues from the Public Health Offices during 1961:-

Articles Loaned	Number of Articles			Articles in store at 31.12.61
	on loan at 31.12.60	loaned or reloaned in 1961	on loan at 31.12.61	
Mattress (Dunlopillo) ... ..	14	12	18	1
Mattress (Hair) ... ..	1	1	2	—
Invalid Chairs ... ..	59	71	66	6
Air Pillows ... ..	—	1	1	—
Air Rings ... ..	57	145	56	48
Cushions (Dunlopillo) ... ..	12	18	12	2
Back Rests ... ..	79	216	104	3
Beds ... ..	5	7	9	5
Commodes ... ..	57	61	71	2
Crutches ... ..	7	12	11	10
Fracture Boards ... ..	4	2	6	—
Pillows ... ..	5	4	5	4
Pillow Slips ... ..	—	—	—	1*
Rubber or Plastic Sheeting ... ..	141	245	148	10
Medical Sandbags ... ..	1	1	1	—
Bed Cradles ... ..	21	46	39	5
Air Beds ... ..	—	1	—	5
Bed Pans ... ..	90	216	104	35
Diabetic Scales ... ..	3	1	4	—
Feeding Cups ... ..	2	22	3	11
Urinals ... ..	39	68	43	25
Sputum Mugs ... ..	2	—	2	3
Douche Cans ... ..	1	1	2	—
Water Beds ... ..	—	—	—	1
Water Pillows ... ..	—	—	—	1
Bed Blocks ... ..	1	—	1	1
Bowls ... ..	—	1	—	2
Bedstead Sides (Pair) ... ..	—	—	1	1
Lifting Pole and Chain ... ..	10	11	11	—
Kidney Dishes ... ..	1	3	1	1
Commode Sorbo Cushions ... ..	—	1	1	—
Rubber Toilet Seats ... ..	3	1	2	—
Restraining Net ... ..	1	1	—	1
Bed Trays ... ..	1	2	1	1
Walking Aid ... ..	1	6	7	1
Hydraulic Hoist ... ..	1	2	2	—
Slings ... ..	2	2	2	—
Sierex Air Mattress ... ..	1	4	1	—
<b>Totals ... ..</b>	<b>622</b>	<b>1,186</b>	<b>736</b>	<b>186</b>
1960 Details ... ..	561	1,147	622	241
1959 Details ... ..	517	1,279	561	237
1958 Details ... ..	619	1,083	517	238
1957 Details ... ..	555	1,062	619	125
1956 Details ... ..	519	1,158	555	180
1955 Details ... ..	538	1,117	519	161
1954 Details ... ..	320	975	538	99
1953 Details ... ..	161	698	320	54
1952 Details ... ..	86	326	161	66
1951 Details ... ..	27	162	86	30

\* Provided through special funds.



In June, 1961, the Health Committee of the County Council authorised the issue of draw sheets on loan to incontinent persons and also the issue of disposable pads to such persons being nursed at home. 20 draw sheets were loaned in 1961, 14 being on loan at the 31st December, and 516 disposable pads were issued.

Alarms and pads were also purchased for loan to children attending the Enuresis Clinic. One alarm was loaned during 1961, being still on loan at the end of the year, and 14 pads were issued.

**CHIROPODY SERVICE.** – This service continued during 1961 with two full-time chiropodists and two part-time (one undertaking five sessions per week and the other three sessions per week). Although authority has now been given for the employment of four full-time chiropodists, regular advertising has not yet resulted in a further appointment being made.

The main chiropody clinic, with two chairs, is held at Newbury Hall, and in addition sessions are held at each of the health services clinics. One chiropodist regularly visits the two Welfare Committee residential establishments in the Area and also undertakes domiciliary visits to patients unable to travel, even by ambulance, to a chiropody clinic.

Owing to the restricted accommodation at the Mayesbrook Clinic, the second dental surgery had been used as a chiropody clinic for a limited number of sessions, but with an improvement in the recruitment of dental officers it was necessary to make other arrangements. No accommodation was available on the ground floor and approval was therefore obtained for certain alterations to be carried out on the first floor of the clinic to provide a chiropody surgery with its own small waiting room. The work was completed in July 1961.

Treatment is given only to those patients in the priority groups, i.e. the elderly, the physically handicapped and expectant mothers, although it is intended that the service will be extended to others when circumstances permit. The standard charge is 2/6d. per week, provision being made for reduction or remission, according to scale, where the patient's means do not justify the full charge.

The attendances during the year 1961 were as follows:-

	No. of Sessions	Attendances	
		New Cases	Re-attendances
Newbury Hall ... ..	374	180	1,968
Kenwood Gardens Clinic ... ..	335	161	1,714
Manford Way Clinic ... ..	111	72	605
Mayesbrook Clinic ... ..	234	140	1,122
Heathcote Avenue Clinic ... ..	36	21	211
Welfare Establishments ... ..	26	41	305
Domiciliary Visits ... ..	38	64	42
Totals ... ..	1,154	679	5,967

TUBERCULOSIS VISITORS. — The 3 Tuberculosis Visitors made a total of 2,417 home visits.

DOMICILIARY OCCUPATIONAL THERAPY. — The Domiciliary Occupational Therapist, who undertakes part-time duty in Ilford, has submitted the following report:-

"It has been said of tuberculous patients that "Nature heals and the patient helps by securing rest, fresh air, proper and sufficient food and by maintaining a sanguine and tranquil state of mind". All these, with the exception of the last, the patient secures on entering a sanatorium and it is to produce the "sanguine and tranquil state of mind" that occupational therapy has been introduced as a part of treatment.

For the patient who is discharged from hospital, it has been found that the long months of treatment have combined with the disease to unfit the patient for an abrupt resumption of a normal pattern of living. All his functions and habits are keyed to an inactive existence.

Among the many facilities for tuberculosis which are provided by the County Council are the domiciliary occupational therapy arrangements. This service has been in operation for some years. The patients are recommended for domiciliary occupational therapy by chest physicians with close co-operation by the tuberculosis visitors.

At present there is one full-time occupational therapist employed to carry out this work. The areas covered by this scheme, viz. Dagenham, Barking, Ilford, Romford, Hornchurch, Forest and Grays,



are visited for part of one day in each week. The visits to new patients are made weekly at first, then fortnightly and finally, monthly. In view of the fact that there is only one occupational therapist for these areas it will be appreciated that only those patients who need occupational therapy as a treatment can be visited. There could be a tendency to treat this service as a source of supply of cheap materials from a mobile shop to the detriment of the service, which is a valuable form of treatment for patients suffering from diseases of long duration.

The materials provided are paid for by the patient who is also loaned any equipment required to carry out the chosen occupation. Completed work is sold when possible and some patients make items for their home or for personal use.

At the Dagenham Town Show each year a large variety of hand-made articles are sold, followed by a Sale of Work organised by the local Tuberculosis Care Association. Some of the patients enter stimulating and competitive work with good results – this year at the Dagenham Town Show there were 3 firsts, 3 seconds, 3 thirds and 2 Very Highly Commendeds gained out of twenty entries submitted for various classes. Similar success was gained at the Essex Old People's Welfare Committee's Exhibition at Woodford Green, five out of six entries gaining prizes.

Many sales are made from a show case at 15/17, Thompson Road, Dagenham, where the Occupational Therapist has an office and store-room.

Some of the occupations undertaken by patients in 1961 were printing, bookbinding, leatherwork, basketry, needlework, puppets, rug-making. Two patients have worked on rehabilitation courses with good results.

From the foregoing it will be seen that occupational therapy encourages new interests and keeps the patient in the habit of work in order to prepare him for normal work."

The following visits were undertaken in Ilford during 1961:-

Number of visits to new patients	...	...	...	11
Number of revisits to patients	...	...	...	187
Number of other visits (to Chest Clinics, etc.)..				61

REHABILITATION OF TUBERCULOSIS CASES. — No cases required assistance in the maintenance charges at a rehabilitation settlement during 1961.

OPEN-AIR SHELTERS FOR TUBERCULOSIS CASES. — One open-air shelter supplied for a tuberculosis patient during 1958, continued in use throughout 1961.

PROVISION OF FREE MILK FOR TUBERCULOSIS CASES. — The County Council's scheme for supplying to tuberculosis patients one pint of milk per day free of charge, on the recommendation of the Chest Physician, continued during 1961. Particulars of the grants made in 1961 are given below:-

No. of cases in receipt of free milk at 31.12.60.	...	...	97
No. of new grants made during 1961	...	...	46
No. of grants discontinued during 1961	...	...	47
No. of cases in receipt of free milk at 31.12.61.	...	...	96

BOARDING-OUT OF CHILDREN (TUBERCULOSIS CONTACTS). — No applications were received in 1961 for assistance in the boarding-out of child contacts of tuberculosis patients under the County Council's scheme.

ILFORD TUBERCULOSIS CARE ASSOCIATION. — Mr. H. R. Stanbridge, a member of the Ilford Health Area Office staff, continued to undertake the secretarial work of this Association during 1961.

The following shows the assistance given by the Association during the year:-

	<u>No. of persons assisted</u>	<u>Total No. of grants made</u>
Extra nourishment (grants made usually for periods of one month and renewed as required) ... ..	31	190 (including renewals)
Other grants (Christmas cash gifts, clothing, etc.) ... ..	66	66



TRAVELLING EXPENSES OF RELATIVES VISITING HOSPITAL PATIENTS. — As in previous years, the County Medical Officer was able to give financial assistance in 1961 only in very special cases to enable them to visit relatives who were in hospital; no Ilford persons, however, applied for assistance under this scheme.

EXAMINATION OF OFFICERS AND SERVANTS. — The following medical examinations by Essex County Council staff were carried out during 1961:-

Entrants to County Council Service	...	...	...	...	...	...	43
Other purposes	...	...	...	...	...	...	15
For other Authorities	...	...	...	...	...	...	7

HOME NURSING. — The home nursing service in Ilford is undertaken by nurses under the supervision of the Superintendent of the Lady Rayleigh Training Home at Leytonstone but operating from the Branch Home "Abury House" in Aldborough Road, Ilford.

The work undertaken by home nurses in the Ilford area in 1961 was as follows:-

Cases attended	...	...	...	...	...	...	1,865
Visits paid	...	...	...	...	...	...	55,527

HEALTH EDUCATION. — Dr. G.B. Taylor, Assistant County Medical Officer, reports:-

"The most important development over the past year has been the report from the Royal College of Physicians on the effects of smoking and cancer. Medically speaking there is nothing new in this report. In Ilford we had been concerned with this problem and had been tackling it long before such report ever came out. The over-riding importance of an official report such as this is that it does give to the public the considered opinions of the most eminent Medical authorities in the land. This report carried very weighty views and it would seem that few members of the public are now unaware of the association between smoking and cancer.

The problems of this epidemic are novel. The epidemic cannot be tackled in the classical manner by cutting off the offending cause at its source. If we had a typhoid epidemic in Ilford we could trace the typhoid germ to its source, which may for instance be a faulty water supply, and get rid of the typhoid epidemic by purifying the water. But in this cancer epidemic it is impossible to treat the

source by stopping importation of tobacco, and it is impossible to stop people smoking because this would encroach too much on personal choice. We are therefore reduced to health education, and it appears there is very little else we can do in tackling this epidemic.

Over the past year I have visited the following organisations:-

Teachers at Beal Grammar School  
 Teachers at Mayfield Boys' School  
 Teachers at Downshall School  
 Scholars at Downshall School  
 Mothers' Club, St. Francis Church  
 Toc H (Women's) – on two occasions  
 Insurance Institute of Ilford  
 Seven Kings Youth Club – on two occasions  
 The Glenyou Club  
 Ashurst Drive Baptist Youth  
 Barkingside Methodist Youth Club  
 Claybury Park Baptist Men's Club  
 Sans Egal Swimming Club  
 Welsh Club  
 Goodmayes Round Table  
 Soroptomists  
 Men's Fellowship, High Road Baptist  
 The Vinesmen  
 Society of Cogitators  
 Claybury Park Baptist Youth Club  
 Toc H (Barkingside)  
 Head Teachers Conference (at Beal School)  
 St. Francis Youth Club  
 Inner Wheel Club  
 British Legion  
 Chadwell Heath Ratepayers  
 Rotary Club

The number I lectured to was 870 and this represents a fair cross section of the Ilford community, ranging from Youth Clubs to Rotary Clubs. The lectures given were illustrated and I showed chest X-rays of people who suffer from chest disease. The Registrar General's figures for the increase in the cancer rate were also included. In these lectures I was only concerned in giving the facts. After that my responsibility finishes and it is then up to people themselves to decide on the facts and consequent action they propose to take.



About three months after the lectures I sent questionnaires to the people concerned in order to find out what effect the lectures had had. I felt that it was no good giving questionnaires immediately after the lecture because people are usually influenced for a short time, but the real assessment is what their reactions are some months later. I found from the questionnaires that –

- (a) the majority of people believed in the association between smoking and cancer,
- (b) in spite of this not all would like to give it up,
- (c) those who said they would like to give it up found that they could not because of the tendency for cigarette smoking to produce habit formation.
- (d) These results were common to all the social classes in Ilford.

It seems therefore that health education in and of itself is of very little use when directed towards people who have already acquired the habit of cigarette smoking. If we are to stop this habit we need to use medical means such as the creation of a smokers' clinic rather than educational means. Whether these clinics would be effective in breaking the habit is open to question but at least this appears to be the next step to take.

It must be realised that I did this survey before the report of the Royal College of Physicians came out. The report has been very well publicised through the mass media of newspapers and television and it may have had some effect in reducing cigarette smoking. The only factual evidence of this is that I have made enquiries at several Ilford tobacconists who say that the number of cigarettes they are now selling is less than it was before the report came out.

From all this there are two future approaches to the cancer problem:-

- (1) The creation of clinics
- (2) Continuation of health education in the schools to try to prevent the habit being acquired.

There is a long-term survey about to start in four schools in Ilford in September of this year. We shall know nothing from this survey for 4 or 5 years.

Local authorities, on their own premises, should give a lead on this matter of the prohibition of smoking.

The other point in chest disease, the question of atmospheric pollution is simpler to tackle. Here legislation can be made and individuals are bound to conform. We are in the process of creating smokeless zones in Ilford over the next few years, and when this has been accomplished a potential source of diseases of the chest will have been eradicated. The creation of a smokeless zone by legislation shows how much easier it is to tackle some health problems by legislation than by exhortation."

During 1961, apart from the 29 lectures on "Smoking and Cancer" referred to in Dr. Taylor's report *ante*, 80 lectures on various other Health Subjects were given by him, myself, members of the health visiting staff and the domestic help organisers to schools, professional organisations, youth groups and general adult groups, the total attendances being approximately 3,750.

In addition 298 lectures on "Mothercraft" were given by the health visitors at their ante-natal relaxation classes at the health services clinics, a series of 12 lectures constituting each course.

Posters covering varied aspects of Health were displayed at the Public Health Offices and the health services clinics throughout the year.

DENTAL TREATMENT. — Mr. E.V. Haigh, the Senior Dental Officer, has submitted the following report:-

"Dental facilities for expectant, nursing mothers and children under five years old continued at Mayesbrook Clinic and Kenwood Gardens Clinic. The patients were referred from the ante-natal, post-natal, or infant welfare clinics.

It is noticeable that the dental health of the expectant and nursing mothers has generally improved over the past few years. Less patients are being referred to, or asking for, treatment at the clinic with grossly neglected mouths requiring many or all teeth extracted. This I am sure is due to the fact that they are receiving more regular dental treatment and examinations by private practitioners. This, however, does not apply to children under five because many private dental surgeons do not wish to treat small children and so their parents request or are referred by the welfare clinics to me. The number of children under school age made dentally fit increased by 30% during 1961.



Conservative treatment which consists of fillings, scalings and gum treatment was carried out whenever possible in order to save as many teeth as possible. When however extractions were required these were done under local or general anaesthesia. If a general anaesthetic was used a medical officer was always present to administer it. Most patients prefer a general anaesthetic if they have more than one or two teeth to be extracted and unless there was some medical contra-indication the patient had the choice.

I continued with one evening session per week at Mayesbrook Clinic. The evening sessions, from 5.15 to 8.15 p.m. are very popular with the expectant and nursing mothers because many find it difficult to attend during the day if they are working or unable to find anyone to look after their children. It is noticeable that evening patients are much more at ease and therefore easier to treat.

Dental X-ray facilities are available at all clinics in the Area. This can often save the mother's time and pain by a quicker diagnosis.

Partial and full dentures were supplied to patients who needed them. These are made at a local dental laboratory, an arrangement which has been in operation for many years and is satisfactory.

During 1960 and 1961 high-speed Borden Airtors for fillings have been installed at clinics in Ilford and these are proving to be a great asset in faster cavity preparation and causing less pain to the patient."

The number of cases treated at the Clinics during 1961 was as follows:-

	New Cases		Made Dentally Fit	Total Attendances
	Examined	Needing Treatment		
Expectant and nursing mothers:-				
(a) Day Sessions:-				
Mayesbrook ... ..	38	38	47	181
Kenwood Gardens ... ..	88	87	56	178
(b) Evening Sessions:-				
Mayesbrook ... ..	57	57	62	301
Children under 5:-				
Mayesbrook ... ..	69	69	74	173
Kenwood Gardens ... ..	127	117	112	168

The forms of dental treatment provided were:-

	Extractions	Anaesthetics		Fillings	Scaling or Scaling and Gum treatment	Silver Ni- trate treat- ment	Dressings	Radiographs	Dentures provided, repaired and remade	
		Local	General						Com- plete	Partial
Expectant and nursing mothers:-										
(a) Day Sessions:-										
Mayesbrook ...	238	13	47	76	51	—	45	2	10	7
Kenwood Gardens	36	29	1	128	37	—	28	5	6	6
(b) Evening Sessions:-										
Mayesbrook ...	62	40	—	216	156	2	53	3	12	2
Children under 5:-										
Mayesbrook ...	156	—	62	235	2	—	27	—	—	—
Kenwood Gardens	—	—	—	225	—	—	21	2	—	—

In addition there were 282 prophylactic treatments and other operations carried out in the case of expectant and nursing mothers at day sessions (185 at Mayesbrook and 97 at Kenwood Gardens) and 239 at evening sessions (at Mayesbrook).

The total number of sessions held for expectant and nursing mothers and children under five years of age was 124½, 79½ during the day (42½ at Mayesbrook and 37 at Kenwood Gardens) and 45 in the evenings (at Mayesbrook).

**DISTRIBUTION OF NATIONAL WELFARE FOODS.** — The distribution of National Welfare Foods (National dried milk, orange juice, cod liver oil and vitamin tablets) to beneficiaries has continued to be the responsibility of the Local Health Authorities under the National Health Service. With a view to effecting economy and cohesion in the service this work has been fully integrated with that of the distribution of nutrients and medicaments which has been in operation in the maternity and child welfare service for many years.

As was reported last year, the High Road Methodist Church premises were closed at the end of March 1961 when the new Methodist Church in Ilford Lane was completed. The branch distribution centre at these premises was therefore, by arrangement with the Church authorities, moved to a room in the Church Hall adjoining the new Church, the approach to the centre being from Britannia Road. The dates and times of opening remained unaltered until June 1962, when the Friday morning and afternoon sessions were discontinued in view of the decline in attendances.



As from 1st June 1961 the price of orange juice has been increased and a charge has been made for cod liver oil and vitamin tablets which hitherto were issued to beneficiaries free of charge. It has been noted that there has been a decline in the number of issues of these items since these charges came into operation, but this has been largely offset by the take-up of other vitamin preparations. From enquiries made there appears to be no evidence of any vitamin deficiency in Ilford children.

The following shows the present distribution centres with the days and times they are open:-

(a) Main Centre

Kenwood Gardens Clinic, Kenwood Gardens, Ilford.	Monday to Friday	9.30 a.m. – 5 p.m.
	Saturday ... ..	9.30 a.m. – 12 noon

(b) Branch Centre

Methodist Church Hall, Ilford Lane (entrance in Britannia Road), Ilford.	Tuesday ... ..	(9.15 a.m. – 1 p.m. 2 p.m. – 3.15 p.m.)
	Saturday ... ..	9.15 a.m. – 12 noon

(c) Infant Welfare Centres

Chadwell... ..	Monday ... ..	2 – 4 p.m.
Marks Gate ... ..	Tuesday ... ..	2 – 4 p.m.
Manford Way ... ..	Tuesday ... ..	2 – 4 p.m.
Manford Way ... ..	Friday ... ..	2 – 4 p.m.
Becontree ... ..	Tuesday ... ..	2 – 4 p.m.
Goodmayes ... ..	Thursday ... ..	2 – 4 p.m.
Downshall ... ..	Tuesday ... ..	2 – 4 p.m.
Kenwood Gardens ... ..	Wednesday ... ..	2 – 4 p.m.
Kenwood Gardens ... ..	Friday ... ..	9.30 a.m. – 12 noon
Heathcote Avenue... ..	Wednesday ... ..	9.30 a.m. – 12 noon
Heathcote Avenue... ..	Wednesday ... ..	2 – 4 p.m.
Cecil Hall ... ..	Wednesday ... ..	2 – 4 p.m.
Cecil Hall ... ..	Thursday ... ..	2 – 4 p.m.
Seven Kings ... ..	Wednesday ... ..	2 – 4 p.m.
Newbury Hall... ..	Thursday ... ..	2 – 4 p.m.
Grosvenor Road ... ..	Wednesday ... ..	2 – 4 p.m.
Ilford Lane ... ..	Friday ... ..	2 – 4 p.m.
The Drive ... ..	Friday ... ..	2 – 4 p.m.
Fairlop ... ..	Friday ... ..	2 – 4 p.m.

(d) Private House

Mrs. Taylor, 31 Lime Grove, Hainault.	Monday to Friday	9 a.m. – 5 p.m.
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## SCHOOL HEALTH SERVICE

**SCHOOL ROLL AND PREMISES.** - There are 40 schools with 66 departments. The number of children on the school roll of Primary and Secondary Schools in Ilford on 20th December, 1961, was 22,913 which figure includes Barking Abbey (457). In addition there were 103 children attending the special schools.

**MEDICAL INSPECTION AND FOLLOWING UP.** - During the year 5,063 periodic medical inspections were carried out and in addition, 775 special inspections and 1,778 re-inspections were undertaken. 3,440 parents or 67.9 per cent, attended the full medical inspections.

As in previous years the Elmbridge and Kennylands Boarding Schools remained under this authority for the purpose of medical supervision and Dr. Gross visited each school once a term to undertake routine medical inspections and follow-up cases.

The existing arrangements, however, whereby Surrey County Council undertook dental inspection and treatment of pupils at Elmbridge School were continued.

**STAFF.** - On 31st March, 1961, Dr. Noordin resigned his appointment as a full-time Assistant County Medical Officer of Health. Dr. M. B. Gee was appointed in a part-time capacity and commenced six sessions weekly as from 1st. August, 1961. Dr. G. B. Taylor resigned his full-time appointment on 7th October, 1961, but remained on the staff in a part-time capacity, commencing six sessions weekly as from 9th October, 1961. By the end of the year our part-time dental staff had doubled its strength, both in numbers and sessions, and there were 8 part-time dentists undertaking 29 sessions, in addition to the full-time Area Dental Officer. As a consequence we were able to carry out school dental inspections to the extent of 32% of the school roll as against what for many years has been 5 - 10%.

Miss Radford, Psychiatric Social Worker at the Child Guidance Clinic, resigned her appointment on 15th January, 1961 and Miss M. D. Boyd, who was appointed to her vacancy, commenced duties on 29th September, 1961.



Miss LeSage, Physiotherapist at the Cerebral Palsy Unit, resigned on 5th August, 1961, to return home to her own country and Mrs. P. M. Colbert took over her duties on 4th September, 1961.

Mrs. W. Butterworth, who had been Resident School Nurse at Kennylands Boarding School for many years, resigned on 29th March, 1961, on reaching retirement age. For many months the nursing situation at this school was acute, as they were without a regular nurse. It was not until 13th November, 1961, that Mrs. M. E. Vallance was appointed to the post.

VISITS. - (a) The Public Health Inspectors made 1,132 visits to maintained schools, (1) to enquire as to the milk supplies and (2) to inspect the sanitary arrangements.

(b) School nurses made (i) 123 visits to schools (111 for general hygiene and 12 for head inspections) when 17,071 individual children were examined and 17,463 actual examinations were made, (ii) 2,276 home visits in regard to treatment recommended, and (iii) 1,345 home visits to cases of minor infectious diseases.

(c) I have continued my own regular visits to schools in an endeavour to become more fully acquainted with schools and Head Teachers and have set myself the target of conducting one routine medical inspection in each school. This programme, which must depend on the time I have available, is nearing completion.

(d) A separate report is furnished by the Chief Public Health Inspector on the general subject of hygiene conditions in schools.

INFECTIOUS DISEASES. - In the Ilford Schools there was a rather extensive outbreak of measles which seemed to follow the usual biennial pattern. It was reported that in quite a few of the Infant Schools the percentage of school roll dropped to as low as 50%. The epidemic was at its height from February to May. During this same period there was a mild outbreak of mumps in some areas.

At the Kennylands Boarding School we were beset with the usual difficulties. During the early part of the year there was a mild outbreak of Sonne dysentery which persisted



throughout the whole of the Easter Term. This of course once again placed great strain on the nursing staff and it was necessary to call on outside assistance. In October, 1961, the school had a slight epidemic of mumps, followed by chicken pox and German Measles, the latter bringing with it a rather disturbing virus infection. At this time the new Resident School Nurse, Mrs. Vallance, commenced duties but owing to the number of children falling sick it became necessary to turn one of the dormitories into a sick ward and to enlist the aid of the British Nurses Co-operative Association at Oxford for auxiliary nursing duties. The situation did not ease until the end of the term.

**CHIROPODY CLINICS.** - Owing to the pressure on the chiropody clinics from the aged and physically handicapped, sanction has not yet been received for the scheme to include treatment for school children.

**MINOR AILMENT CLINICS.** - The Minor Ailment clinics functioned as last year, a full session weekly being operated at both the Mayesbrook and Kenwood Gardens Clinics. In addition facilities were afforded for any urgent cases to consult the doctor at the immunisation clinics held weekly at Mayesbrook Clinic and the Kenwood Gardens Clinic.

**NEW AND ORIGINAL WORK.** - During the year two interesting surveys were commenced, one on the Mental Sub-normality in Twins and Premature Children, and the other respecting Childhood Malignancies.

Dr. Taylor commenced a series of lectures to small groups in Secondary Boys' Schools on the relevancy of smoking to lung cancer. He has also taken the opportunity during routine medical inspections of school leavers in certain selected Grammar Schools of giving sex education to very small groups.

A second small class containing a further six maladjusted children was opened during the year.

**SPECIALIST SERVICES.** - The various specialist clinics functioned as in previous years and these are the subject of separate reports by the Consultants included under the particular Clinic details.



STATISTICS. - The Ministry of Education Annual Returns and the summary of heights and weights over a period of 10 years are printed at the end of this Report.

#### MEDICAL TREATMENT.

(a) Minor Ailments Clinics. - The attendances during 1961 were as follows:-

	<u>Kenwood Gardens</u>	<u>Mayesbrook</u>
Number of individual children seen	281	338
Number of attendances of children	423	647

The following table shows the conditions dealt with at both the Clinics during the year.

Sub-normal Nutrition	...	...	135
Debility	...	...	64
Uncleanliness:-			
Head	...	...	33
Body	...	...	--
Skin:-			
Ringworm:-			
Head	...	...	-
Body	...	...	-
Scabies	...	...	1
Impetigo	...	...	3
Dermatitis	...	...	-
Urticaria	...	...	-
Furunculosis	...	...	1
Eczema	...	...	2
Athletes Foot	...	...	1
Warts	...	...	87
Other Skin Diseases	...	...	40
Eye:-			
Blepharitis	...	...	6
Conjunctivitis	...	...	8
Defective Vision (excluding Squint)	...	...	75
Squint	...	...	8
Other conditions	...	...	42

<b>Ear:-</b>	
Defective Hearing . . . . .	4
Otitis Media . . . . .	3
Other Ear Diseases . . . . .	5
<b>Nose and Throat:-</b>	
Tonsilitis only . . . . .	12
Adenoids only . . . . .	-
Tonsilitis and Adenoids . . . . .	8
Nasal Catarrh . . . . .	13
Nasal Obstruction . . . . .	4
Other conditions . . . . .	14
<b>Enlarged Cervical Glands</b>	
(Non-Tuberculous) . . . . .	6
Defective Speech . . . . .	14
Teeth - Dental Diseases . . . . .	19
<b>Heart and Circulation:-</b>	
Functional . . . . .	1
Anaemia . . . . .	7
<b>Infectious Diseases:-</b>	
Mumps . . . . .	1
Colds and Coughs . . . . .	22
Influenza . . . . .	1
<b>Lungs:-</b>	
Asthma . . . . .	4
Bronchitis . . . . .	1
Pulmonary Catarrh . . . . .	2
Other Non-Tubercular Diseases . . . . .	8
<b>Psychological:-</b>	
Development . . . . .	-
Stability . . . . .	5
<b>Nervous System:-</b>	
Enuresis . . . . .	9
Other Conditions . . . . .	9
<b>Deformities:-</b>	
Genu Valgum . . . . .	2
Posture . . . . .	2
Pigeon Chest . . . . .	2
Flat Feet . . . . .	23
Valgus Ankles . . . . .	16



Other forms . . . . .	18
Minor Injuries . . . . .	18
Rheumatism . . . . .	4
Other Defects and Diseases . . . . .	44

Total number of ailments 807

#### RECUPERATIVE HOLIDAYS.

During 1961 20 Children were recommended for recuperative holidays and were placed by the Borough Education Officer.

#### SPECIAL CLINICS

##### OPHTHALMIC CLINIC

The following table summarises the attendance of school children:-

Clinic	Sessions	New Cases	Old Cases	Attendances
Kenwood Gardens	99	206	869	1,541
Mayesbrook . . .	96	155	529	1,328
Manford Way . . .	11	13	77	169
<hr/>				
Totals	206	374	1,475	3,038

889 complete pairs of spectacles were provided, some of these being renewals after breakages. In addition, in 311 cases the lenses of spectacles were replaced or repairs of frames were carried out.

Dr. H. J. R. Thorne, M.B., B.S., D.O., D.O.M.S., the Ophthalmologist, reports as follows:-

"The School Eye Clinic has continued to function smoothly and satisfactorily.

The Clinic has been well attended at all times throughout the year. The cases seen call for no special comment - the usual school eye clinic "mixture" with refractive errors and squints predominating but with a few cases of congenital abnormalities and odd cases of pathological change.

Good liaison and co-operation have been obtained from London Eye Hospitals and especially from the Eye Department of King George Hospital, Ilford, to which cases requiring further investigation and/or operation have been referred as necessary.

The Orthoptic Department (at Mayesbrook) and the arrangements for fitting and supply of spectacles (by attending optician) have been quite satisfactory.

#### ORTHOPTIC CLINIC.

Miss M. Townsend, D.B.O. . makes the following report on the Orthoptic Clinic held at Mayesbrook Health Services Clinic for the year ended 31st December, 1961.

"206 sessions were held throughout the year and 121 new cases were referred for treatment. In addition 106 old cases were under treatment. Total attendances amounted to 769 and 46 patients were discharged.

The Orthoptic Clinic functioned efficiently as an indispensable adjunct to the School Eye Clinic in the treatment and observation of squint cases - both true and latent and pre- and post-operative. "

Miss Townsend attended at the Clinic for five sessions a week.

#### ORTHOPAEDIC CLINIC.

Mr. H. G. Korvin, F.R.C.S., the Orthopaedic Surgeon makes the following report.

"Some further modifications carried out during the year made the Kenwood Gardens Clinic a most satisfactory place to work in. The tea-kitchen is accessible now from the waiting hall without passing the orthopaedic room. Suspension hooks and a sliding gantry have been fitted on the ceiling. There are still some problems to solve - provision of a filing cabinet for X-ray films and of suitable changing accommodation for children receiving sunlight treatment. A new type of floor-mat has proved very satisfactory.



Structural alterations at Mayesbrook Clinic have reduced the space available for orthopaedic exercises, but this has been made up for by modified arrangements. The wall mirror suffered breakage in the course of the alterations and needs replacing.

Attendance at the Clinic was satisfactory, and the arrangements were much the same as in past years. Hospital admissions went to East Ham Memorial Hospital, X-ray examinations were carried out at Chadwell Heath Hospital. Mr. Rogers, who had been attending as fitter for surgical appliances, resigned from the firm of Messrs. Pryor and Howard during the year. His place has been taken by Mr. Daniels, of the same firm.

Mr. Brand, M.C.S.P., was, as always, the backbone of these Clinics. I wish to thank him and all the others who helped in the running of the Clinic for their untiring efforts."

The following table summarises the attendances of school children:-

<u>Clinic</u>	<u>Sessions</u>	<u>New Cases</u>	<u>Old Cases</u>	<u>Attendances</u>
Kenwood Gardens	43	81	218	469
Mayesbrook ...	23	43	82	151
Manford Way...	7	1	8	10
<b>Totals ...</b>	<b>73</b>	<b>125</b>	<b>308</b>	<b>630</b>

#### SUMMARY OF CASES SEEN

Diagnosis	New Cases			Old Cases		
	A	B	C	A	B	C
Spastic Paresis ... ..	-	-	-	1	2	-
Cerebral Palsy ... ..	-	-	-	-	-	-
A. P. M ... ..	1	-	-	3	8	-
Hemiplegia ... ..	-	-	-	1	-	-
Scoliosis ... ..	1	2	-	4	-	-
Kyphosis ... ..	2	-	-	2	-	-
Slack Posture ... ..	5	4	-	16	5	1
Deformity of Hips ... ..	-	1	-	3	-	-
Genu Valgum... ..	15	12	-	76	31	2
O. C. T ... ..	-	-	-	3	-	-

Diagnosis	New Cases			Old Cases		
	A	B	C	A	B	C
Genu Varum . . . . .	-	-	-	2	1	1
Pes valgus-planus . . . . .	7	3	1	10	4	-
Valgus Ankles . . . . .	20	5	-	32	9	1
Talipes calcaneo-valgus . . . . .	-	-	-	-	2	-
Intoeing . . . . .	3	2	-	9	3	-
Hallux valgus . . . . .	1	2	-	8	1	-
Deformity of Foot . . . . .	-	-	-	3	-	-
Deformity of Chest . . . . .	-	-	-	2	-	-
Lumbar Lordosis . . . . .	1	-	-	-	-	-
Deformity of Toes . . . . .	7	6	-	16	5	1
Torticollis . . . . .	-	-	-	2	1	-
N. A. D. . . . .	1	-	-	-	-	-
Foot Strain . . . . .	2	-	-	2	1	-
Metatarsal varus . . . . .	-	-	-	7	-	1
Osteomyelitis . . . . .	-	-	-	1	-	-
Spina Bifida . . . . .	-	-	-	1	1	-
Hydrocephalus . . . . .	-	-	-	1	-	-
Other conditions . . . . .	15	6	-	13	8	1
Totals . . . . .	81	43	1	218	82	8

A - Kenwood Gardens. B- Mayesbrook. C - Manford Way.

13 children of school age were admitted to East Ham Memorial Hospital. Particulars as follows:-

<u>No. of Cases</u>	<u>Operation</u>
1	Removal of Exostosis Rt. Femur
2	Operation Torticollis
1	Transfer flexor Longus to Extensor Expansion 2nd 3rd R. & L.
1	Arthrodesis Gt. Toe Lt. 3rd Toe Rt.
1	Further Eversion Tarsal Lt.
1	Tenotomy & Holdsworth Operation.
1	D. I. P. Arthrodesis
1	P. I. P. Wedge Arthrodesis. 2nd Toe left foot.
1	Bunionectomy and Phalangeal Osteotomy
1	D. I. P. Arthrodesis 4th Toe Lt.
1	Spinal fusion.
1	Holdsworth Operation Lt.

During the year 14 pairs of valgus insoles, 8 pairs of surgical boots or shoes, 5 pairs Genu Valgum splints, 1 metatarsal bar, 7 calipers and inverting irons, 20 repairs



to calipers and shoes, and 88 pairs wedges to shoes, 1 spinal jacket and 2 repairs to spinal jackets were supplied to school children.

143 cases were discharged from the Orthopaedic Clinic, 21 as cured, 47 due to absence and 68 were showing improvement and were kept under observation at school. 7 cases left school or left the district.

#### MINOR ORTHOPAEDIC DEFECTS.

Dr. F. E. O'Connor Wilson, one of the school medical officers, has under supervision and attends periodically one of the following Clinics conducted by the Physiotherapist:-

Exercise

Massage

Sunlight

and she reports as follows:-

#### "REMEDIAL EXERCISES.

There were 243 new cases and 1,237 attendances at Kenwood Gardens Clinic, and 157 new cases and 788 attendances at Mayesbrook Clinic.

The cases for treatment which were referred from School Medical Inspections numbered 261 and these made 480 attendances.

The total number of new cases at both clinics therefore was 661 and the total attendances 2,505. Classes were held to demonstrate the exercises for the treatment of the particular defect.

#### ARTIFICIAL SUNLIGHT TREATMENT.

Ultra-violet ray treatment was given as usual at two centres during 1961 - Kenwood and Mayesbrook Clinics. There was a total of 29 new cases during the year, with 209 attendances.

Of these 3 new cases and 103 attendances were at Kenwood and 26 new cases with 106 attendances at Mayesbrook.

The remedial exercises figures are lower this year as there was no Foot and Posture Survey in 1961, also some children were recommended by school doctors to attend school gymnastic classes instead of clinics. These children were reviewed at certain intervals.

#### PHYSIOTHERAPY CLINICS.

These were held at Kenwood Gardens on Monday and Thursday mornings and at Mayesbrook Clinic on Tuesday and Friday mornings..

Details of attendances:-

Clinic	Sessions	New	Old	Attendances
		Cases	Cases	
Kenwood Gardens	84	83	114	951
Mayesbrook ...	86	56	98	594
Total ...	170	139	212	1,545

#### ARTIFICIAL SUNLIGHT CLINICS.

These were held at Kenwood Gardens on Tuesday afternoon and Mayesbrook Clinic on Thursday afternoon.

Details of attendances:-

Clinic	Sessions	New Cases	Old Cases	Attendances	Discharged		
					Cured	Much Improved	Left District etc.
Kenwood Gardens	44	3	5	103	3	-	1
Mayesbrook	43	26	11	432	20	-	7
Total ...	87	29	16	535	23	-	8

The lamp used at each Clinic is a Centrosol Unit. The conditions treated were as follows:-

Defects Treated	Cases	
	A	B
Alopecia ... ..	2	1
Chilblains ... ..	-	5
Anaemia, Debility and Malnutrition	2	15
Bronchitis ... ..	2	5
Other Conditions ... ..	2	11
	8	37

A. - Kenwood Gardens Clinic. B. - Mayesbrook Clinic.



## EAR, NOSE AND THROAT CLINIC.

Miss M. M. Mason, F.R.C.S., Consultant, Ear Nose and Throat Clinic, makes the following report:-

"In 1961, 50 sessions of the Aural Clinic took place. In all, 362 children attended, 133 of them for the first time. 78 operations were performed, mainly for tonsil and adenoid disease; 47 were done at King George Hospital and 31 at Chadwell Heath.

A list of the main diagnoses met with is appended below. It is an interesting reflection on the changing aspect of disease that only 3 cases of otitis media reached a specialist clinic. This shows that the modern development of effective antibiotics has enabled treatment of the acute attack by the family doctor to be effective in nearly all cases, despite the misgivings many practitioners have experienced as to the possible development of resistance by the bacteria usually responsible.

A small but definite number of cases of deafness are still seen each year, many of them of congenital origin. During the year 3 were of sufficient severity to warrant further investigation and this was done at a special Audiology Unit.

## Cases Diagnosed - 1961.

Tonsils and Adenoids Infection	...	43
Moderate Adenoids	... ..	3
Maxillary Sinusitis	... ..	4
Hypertrophied Adenoids	... ..	36
Deafness	... ..	5
Eustachian Deafness	... ..	5
Nasal Allergy	... ..	6
Otitis Media	... ..	3
Rhinitis	... ..	5
Constitutional	... ..	2
Epistaxis	... ..	2
Deflected Nasal Septum	... ..	1

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## SPEECH CLINICS.

Mrs. M. Walker, the Senior Speech Therapist, reports on the work of the Speech Clinics during 1961 as follows:-

Mrs. Tingey	Six Sessions per week.	Mayesbrook and schools.
Mrs. Pretious	Full-time.	Cerebral Palsy Unit school clinics and schools.
Mrs. Walker	Full-time.	Valentines Clinic and schools.

"Again more children under school age have been seen and this has paid dividends in the form of preventive treatments and a younger age at discharge, although this does not necessarily mean a shorter over-all period of treatment. These children rarely develop the deep seated emotional problems and feelings of social inadequacy which are already strongly established in most of the children who are referred at a later age.

Older patients, mainly those suffering from stammer, tend to take up more and more treatment sessions over a very long term, so that from everyone's point of view the plea is still "the earlier the better". We make it a principle that a child should be placed on the waiting list as soon as the mother expresses anxiety about his speech, or his behaviour in 'speech situations'.

Therapists have continued to work full sessions in those schools which have a large enough number of speech defective children to warrant this.

In the past we have praised the advantages of this in the resulting better attendances. The disadvantages, however, have gradually revealed themselves as being almost disproportionately large. The lack of the all-important contact with parents has previously been touched upon; added to this is the tendency of treatment sessions to become grossly overcrowded, to the detriment of therapists and patients. (There seems to be a pressing obligation



when actually on the premises to see immediately every child in need of treatment, rather than to place on a separate school waiting list.)

It remains to be seen whether or not treatment in the schools is a true expedient.

There have been several visitors to the speech clinics in the past few years, notably by student health visitors, and we like to think that this accounts, in part at least, for the excellent relationships growing up between this and other departments."

The defects treated were as follows:-

Stammer	...	...	...	...	...	66
Dyslalia	...	...	...	...	...	151
Retarded speech and language	...	...	...	...	...	13
Hearing losses	...	...	...	...	...	4
Cleft Palate	...	...	...	...	...	8
Dysarthria	...	...	...	...	...	1
Neurological	...	...	...	...	...	-
Treatment not needed	...	...	...	...	...	4
Others..	...	...	...	...	...	19

82 children of school age were discharged from the Clinics during the year. In 49 cases the speech was normal. Of the remaining 33 cases, 7 left the district, 4 improved, 5 ceased to attend, 2 left school, 5 were referred elsewhere, 4 did not require treatment, 6 refused further treatment.

#### SCHOOL DENTAL SERVICE.

Mr. E. V. Haigh, Area Dental Officer, reports as follows:-

"The dental services available to school children in the Ilford Area increased considerably during 1961. At the beginning of the year there were only four part-time dental surgeons doing 14 sessions per week which with my services on school dentistry made an equivalent strength of two full-time Dental Officers. This shortage however improved slowly during the year and by the end of 1961 we had eight part-time dental officers doing 29 sessions per week. This means that we have four surgeries

almost fully staffed. We have been unable to obtain any full time officers. I have approached all the part-time dental surgeons about doing fulltime service but none of them are interested at the present salary rate.

For many years it has been impossible to inspect more than 5 - 10% of school children each year, sufficient numbers applying for treatment to keep available staff fully occupied. However during 1961 it was possible to inspect 32% of the school population at school inspections and I have every hope that this will be higher in 1962 if we retain the same staff strength.

High speed equipment for cavity preparation of fillings has been installed in the four surgeries in constant use in the area and these Airotors are proving to be one of the great improvements in dentistry as they cause less pain to the patient.

The children received full dental treatment at the Clinics. Conservative, extractions under local or general anaesthesia and orthodontic appliances fitted as required.

I continued with one evening session per week at Mayesbrook Clinic for school children who are unable to attend during the day. These sessions from 5.15 - 8.15 p.m. are in great demand by older children studying for examinations. Many of these children would not attend during the day and so this is giving a service of value. Emergency treatment and inspection sessions continued at Mayesbrook Clinic. On Wednesday or Friday mornings from 9 a.m. - 11 a.m. any school child without an appointment could attend and be seen for the relief of pain or for an inspection. Appointments were made for these children to have extractions, conservative or orthodontic treatment. Dental X-ray facilities are available at each Clinic. This saves time and pain, a quicker diagnosis being possible.

Most extractions were performed under general anaesthesia which was always given by a medical officer. The number of children requiring



extractions under general anaesthesia has decreased considerably over the past ten years. I do not see so many badly neglected mouths requiring multiple extractions. This I am sure proves that the parents and children are becoming more dentally conscious."

#### BENTON SCHOOL.

Dr. D. M. B. Gross, Medical Officer in Charge, reports as follows:-

"During 1961 the number of children on roll varied between 66 on 31st December 1960 and 71 on 31st December, 1961.

There were 16 admissions and 11 discharges. Recommendations for admissions were received from the following sources:-

School Medical Officers ... ..	1
Specialist Consultants ... ..	1
Private Doctors ... ..	3
Hospitals ... ..	4
Borough Education Officer ...	4
Parents ... ..	2
Others ... ..	1
	<u>16</u>

The diagnoses were as follows:-

Fusion of spine. ... ..	1
Perthes' disease ... ..	2
Rheumatic Fever ... ..	1
Respiratory Infection ... ..	1
Asthma... ..	6
Bronchitis ... ..	2
Polyneuritis ... ..	1
Muscular Dystrophy ... ..	1
Haemophilia ... ..	1
	<u>16</u>

The 11 children discharged left for the following reasons:-

Fit for ordinary school ... ..	2
Left school ... ..	5

Left the Country . . . . .	1
Admitted to special school, . . . . .	1
Left district . . . . .	2
	11

The work at the school has proceeded smoothly as in previous years. In addition to the routine medical examinations, an audiometric survey has been started on the lines of the one just finished at the Cerebral Palsy Unit.

As in previous years, the trend continues towards admitting more severely handicapped children not only from Ilford but also from surrounding areas, and here again the establishment of a nursery class will increase the scope of the work.

The problem of suitable placement of children with a dual handicap, i.e. physical disability and mental retardation, remains a very difficult one which is probably only to be solved at a higher level.

In conclusion I should like to thank the staff for their continued help and co-operation, which has made possible the smooth running of the school. "

#### CEREBRAL PALSY UNIT

Dr. D. M. B. Gross, Medical Officer in charge, reports as follows:-

"During the year in question the number of children on roll varied between 18 on 31st December, 1960, and 23 on 31st December, 1961.

In reviewing the work undertaken throughout this period, 8 children were examined in connection with suitability for admission; of these, 5 were accepted and came from the following areas:-

Ilford	2
Romford	2 (1 under school age)
South Essex	1

The 3 children rejected, with the reason for rejection and the responsible Authority concerned were:-



- Romford (A) Very young and immature but child was eventually accepted for a National Spastic Society Home.
- South Essex (A) Progressive muscular dystrophy - very disturbed child and resisted medical examination.

The admissions during the year number 7, which include 3 children who were seen in 1960 and admitted in 1961, and 4 of the children found suitable as stated above. This, therefore, leaves two children on the waiting list; one who has yet to reach school age and a child of school age seen in 1959 who is not yet ready for admission.

Those pupils discharged numbered 2 and the reason, together with the Authority concerned, is as follows:-

- Mid-Essex Had reached school leaving age.  
 Ilford Transferred to an ordinary day School.

During the year an audiometric survey of all the children at the Unit was undertaken. The results have not yet been collated but already valuable information has been obtained which is of the greatest help in dealing with the children concerned. Otherwise the work of the Unit has proceeded smoothly and I should like once again to thank the staff for their continued co-operation and interest and their efforts in dealing with children who are often very difficult and in whom progress is necessarily very slow. It is hoped that in the comparatively near future the establishment of a nursery assessment class will further increase the scope of the Unit.

#### CHILD GUIDANCE CLINIC.

Dr. W. P. Gurassa, Consultant Psychiatrist, and Medical Director of the Ilford Child Guidance Clinic, writes as follows:-

"During the first half of the year Dr. Shackleton continued to do two of my sessions as a locum until I was able to take them up again in the summer.



Work has proceeded along the usual lines, though there has been some slowing-up, partly due to the back-log of cases originally seen by Dr. Shackleton. The waiting list is therefore a little longer than usual at the present time. While it is hoped to bring this back to the former level it has become clear that in order to reduce it substantially we shall require additional psychiatric sessions and application has been made for these. We have been helped by the addition of a third full-time Psychiatric Social Worker, Miss Boyd, who has come to us from the St. Alban's Clinic. She is an experienced person, and is already doing a good deal to relieve the excessive load of work with parents carried hitherto by her two colleagues. In addition she is also undertaking some preliminary screening interviews with parents of new referrals, to help decide upon the urgency, and to mitigate the effect of the waiting period for diagnosis. We have also been granted two additional sessions for a Child Psycho-therapist, which Mrs. Handja will be taking up in the near future. She already has enough children on the treatment waiting list to fill her additional time.

We have continued our policy of encouraging visitors to the Clinic, i. e. School Teachers, Probation Officers, Health Visitors, etc. The response has been gratifying in terms of attendance and interest shown. We aim in this way to help allied workers to handle many of the simpler problems that arise in the course of their work, and aid in the prevention of more established disorders.

A notable event has been the extension of the Maladjusted Day Class from Infants to Juniors, with the provision of an additional teacher; this is working well and the teachers attend fairly frequently for consultations, which help them in their work with children and parents.

We continue to see a number of children who are unable to attend school, and there is a growing recognition outside the Clinic that these children are often suffering from neurotic disturbances which require treatment, and are not just to be regarded as anti-social delinquent characters. A problem some-



times arises in connection with children referred by the Juvenile Courts where residential treatment is recommended but not available immediately, and sometimes for several months. The Local Authority has been able to help by providing temporary care in a Children's Home or Hostel, and it would be especially helpful if in other cases, not referred by the Courts, similar facilities were available for temporary placement, with a minimum of formality, i.e. for children in disturbed homes who are awaiting placement in a Residential School or admission to a special Psychiatric Treatment Centre.

I am pleased to say that facilities for admission of children under 12 now exist in the Paediatric Section of Whipps Cross Hospital, where a pilot experiment has been in progress for some months. Dr. Herbert Davy is the visiting Consultant Psychiatrist, though the beds are technically under Dr. Hinden Consultant Paediatrician. The general policy has been to admit only children who can be coped with in a General Ward, and to exclude children whose behaviour is too grossly disturbing, though they have even managed to cope with some of these. There is still some delay in finding suitable vacancies for in-patient treatment of older and more disturbed children.

It has been found useful for members of the Clinic staff to visit and establish personal contact with people working in Residential Schools and Residential Treatment Centres. A few such visits were made during the past year and more are desirable. It has been found to help us with the selection of centres for placement in relation to a particular child and helps those in charge to a fuller appreciation of the child's situation and needs. We also try to maintain contact with parents after a child has been sent away, and where possible to work with them, and to prepare them for the eventual return home of their child. It is important in this respect that we are kept fully informed of the child's progress while away, and of any impending changes, for example transfer to another school, or return home. "



## SCHOOL PSYCHOLOGICAL SERVICE.

Miss B. S. Gascoyne and Miss C. H. Watt, Educational Psychologists, report as follows:-

"During the year 147 new school cases have been tested as opposed to 115 last year.

Also, although it is not reflected in the figures we have been involved in more referrals of school children to the Child Guidance Clinic. 27 children have been referred following consultation between the head teacher and the psychologist. In a number of cases it has proved very useful for the parents to be able to meet the psychologist before referral to the Child Guidance Clinic is officially instigated. The psychologist can provide a personal link between the school, the parents and the clinic and can answer the parents' questions and doubts about referral, which often reassures them. It also means they know someone they can contact if the problem becomes more urgent while waiting for the referral.

Two short surveys have been undertaken with the aim of trying to assess the validity of the Binet results in a given age group. This has, we think, been of some value to the teaching staff in learning more accurately the potential of their pupils, as it is difficult to be sure of this only from group tests and it has also served to give a rough estimate of the range of the age group as a whole. To the psychologist it has yielded additional information about the test which becomes more apparent when a series of children of the same age are seen and it has been valuable to see children who are normal, in that they are neither backward in school work nor emotionally maladjusted, although of course one or two children were found to be borderline cases and will be kept under observation. No results of these surveys can be given as the numbers involved are statistically too small and the information was intended only to be of use to the teachers and psychologists in the area.

The maladjusted class can now be described more accurately as a class and a half since Mrs. Shaw joined them in September and has taken over the



teaching of those children who can respond to more formal work in the mornings but who are not yet sufficiently adjusted emotionally to return to normal schools. This has enabled a few more children to be taken into the school, which comprises both Infant and Junior age groups, as the remaining original members become older. The class continues to be of absorbing interest to the clinic as weekly conferences are held on the progress of the children.

The Special Classes at Valentines School are always well up to strength but over the year the waiting list has been of manageable proportions which makes the psychologists' job much easier because instead of asking parents to agree to their child being admitted at an unspecified future date it is now possible to assure them that this should be within two terms. It is encouraging that the number of children needing to have remedial teaching in Secondary Schools seems to have dropped. We hope that this is accounted for by retarded children being reported either at the top of the Infants or in the first two years of the Juniors and that there is not a concealed iceberg base of illiterate seniors, but we have no evidence in the Ilford area to justify such a gloomy prospect. The help the children receive from attending Valentines School continues to be invaluable both to the children themselves and to all the other schools who can refer backward children in the knowledge that something can be done."

#### Summary

New cases... ..	147
Follow-ups for clinic ... ..	142
Follow-ups for schools ... ..	48
Remedial Education ... ..	14
Children referred to C.G.C... ..	2

#### ILFORD ENURESIS CLINIC

Dr. J. M. Pooley, Medical Officer in charge, reports as follows:-

During the 12 months ended December 31st, 1961, the clinic continued to be held on Wednesday

mornings. The number of sessions held this year had, of necessity, to be reduced from 35 to 22, and therefore the number of new cases seen was unavoidably lower - being 55 seen during the 12 months, as compared with 89 during 1960.

### I. Appointment List

The 55 cases seen throughout the year were made up as follows:-

<u>Recommended by</u>	<u>Under 5 years</u>		<u>Over 5 years</u>	
	<u>Boys</u>	<u>Girls</u>	<u>Boys</u>	<u>Girls</u>
Infant Welfare Officers	6	8	-	-
School Medical Officers	-	-	17	7
General Practitioners	1	-	7	-
Parents ... ..	2	-	1	1
Health Visitors ... ..	2	1	-	-
Consultants ... ..	-	-	-	2
	11	9	25	10

Total: 55 Cases.

Total attendances (old and new cases): 280

Number of sessions: 22.

### II. Procedure

The procedure adopted in previous years has been largely adhered to, namely:-

- (1) Urinalysis
- (2) History of enuresis and of previous illnesses.
- (3) Physical examination.
- (4) Treatment.

Time spent in explaining to the child, an interesting charting system, a strict routine and various other suggestions always proves most valuable in that the child's interest is held, and the mother acts upon the instructions more faithfully. Problems such as over-crowding, housing difficulties and emotional instability in either parent or child, are commonly met with and should of course be considered carefully in relation to the treatment being adopted.



### III. Treatment

The treatments issued or prescribed are listed below:-

- (1) Long-acting (bonded) Dexamphetamine - "Dexten" (supplied by arrangement with Aspro-Nicholas Ltd. , ) - 5 mgms. at bedtime.
- (2) Plain dexamphetamine - 5 mgms. at bedtime.
- (3) Phenobarbitone gr.  $\frac{1}{2}$  or  $\frac{1}{4}$ .
- (4) Routine and charting only.
- (5) The Sentinel or Downs bedbuzzer (There are now 17 of these machines in use through the Clinic).
- (6) "Librium" mgms. v c.m. or b.d.

A considerable measure of success has followed the use of this tranquillising drug, which must of course be given only under strict supervision - the Librium has been issued by co-operation with the patient's general practitioner.

### IV. Results

A number of cases have been discharged cured during the year, as follows:-

<u>Discharged cured</u>	<u>Boys</u>	<u>Girls</u>
Under 5 years ... ..	2	2
Over 5 years ... ..	22	14
Total:	24	16

This number includes a few children who were first seen in 1960, and who were still receiving treatment in 1961.

<u>Self-discharged</u>	<u>Boys</u>	<u>Girls</u>
Under 5 years ... ..	2	1
Over 5 years ... ..	20	10
Total:	22	11

Attendances at the clinic have been good, and both mother and child have shown sustained interest.

A paper has recently been completed on the subject of pre-waking enuresis and analysing the

advantages of a long acting resin-bonded emphetamine such as "Dexten" over the short acting dexamphetamine.

The bedbuzzers are proving very successful and have provided yet another link of interest between many general practitioners and the Enuresis Clinic.

#### HANDICAPPED CHILDREN.

Section 33 of the Education Act, 1944, and the regulations made thereunder have placed on the Local Education Authorities responsibilities for the provision of suitable education of children suffering from disability of mind or body.

A record of all such children is revised annually from returns submitted by all Head Teachers, and any new cases attending local maintained schools are reported to me with a view to medical examination and ascertainment of their suitability or otherwise of attendance at an ordinary school.

The several categories of pupils requiring special educational treatment as defined in the Handicapped Pupils (Certificate) Regulations, 1953, came into operation on 16th December, 1953 (amended by 1959 Regulations).

The number of children coming within these categories and their disposition as on the 31st December, 1961, are tabulated in the following table in accordance with the Handicapped Pupils Regulations, 1953, and amended by the Handicapped Pupils and Special Schools Regulations, 1959, operative with effect from 1st April, 1959.



CATEGORY	Number of children of school age on 31st December, 1961, formally ascertained as handicapped pupils and requiring special educational treatment (s.e.t.)													
	Attending day special school	Awaiting placement in day special school	Attending residential special school	Awaiting placement in residential special school	Attending boarding homes	Awaiting placement in boarding homes	Attending independent schools	Awaiting placement in independent schools	Attending hospital schools	Awaiting placement in hospital schools	Receiving Education in hospital under Section 56	Receiving home tuition under Section 56	Awaiting home tuition under Section 56	Total No. of children of school age requiring s.e.t.
Blind ... ..	-	-	2	-	-	-	-	-	-	-	-	-	-	2
Partially Sighted ...	5	-	1	1	-	-	1	-	-	-	-	-	-	7
Deaf ... ..	4	-	2	-	-	-	1	-	-	-	-	-	-	7
Partially deaf ... ..	12	-	-	-	-	-	2	-	-	-	-	-	-	14
Delicate ... ..	24	-	2	2	-	-	4	-	-	-	-	-	-	31
Physically handicapped	40	1	-	2	-	-	9	-	-	-	-	5	-	56
E.S.N. ... ..	50	5	15	6	-	-	-	-	-	-	-	3	1	78
Maladjusted ... ..	1	-	7	10	2	-	16	-	-	-	-	2	-	38
Epileptic ... ..	-	-	-	-	-	-	2	-	-	-	-	-	1	3
Speech defect ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dual Defects ... ..	2	-	-	2	-	-	1	-	-	-	-	-	-	4
Total ... ..	138	6	29	23	2	-	36	-	-	-	-	10	2	240

### MENTAL HEALTH SERVICE

The Training Centre for severely Subnormal Children and Adult Female patients, was opened on 8th September, 1953, at the Methodist Church Hall, Bennett's Castle Lane, Becontree. It is known as the Ilford Junior Training Centre.

Full medical inspection is carried out once a year, by one of the School Medical Officers, also a survey visit is made quarterly.

## GENERAL WELFARE

Provision of Meals and Milk for School-children. -

The provision of meals in the schools commenced on 7th October, 1940. The total number of mid-day meals served during 1961 was 2,261,582 approximately.

There are 29 kitchens in the Borough, established at the following schools:-

Barking Abbey, Barley Lane, Beal Boys, Beal Girls, Becontree C. P. Unit, Benton, Canon Palmer, Caterham, County High Boys, County High Girls, Cleveland, Dane, Fairlop Boys, Fairlop Girls, Goodmayes, Gordon, Loxford, Mayfield Boys, Mayfield Girls, Mossford Green, Parkhill, Redbridge, South Park, St. Augustines, The Gilbert Colvin, The Glade, The John Bramston, Uphall and Wm. Torbitt.

As from 6th August, 1946, milk in school has been supplied free of charge in accordance with the Provision of Free Milk Regulations, 1946.

In September 1961, 18,421 children were receiving milk in school.

Provision of Baths. - Shower baths are installed at Beal, County High Boys, Barking Abbey Grammar, Caterham, Dane, Fairlop Boys and Loxford Secondary Schools.

Work done by the N.S.P.C.C. - The following 38 cases were investigated:-

(1) Neglect . . . . .	26
(2) Ill-treatment cases . . . . .	3
(3) Other cases . . . . .	9

(Nine cases were reported from the Public Health Department 29 were reported from other sources for general neglect.)

Ninety-seven children (65 boys and 32 girls) were involved, 58 being of school age. In addition to this work, 195 supervision visits were paid to different cases, some of which were made to those reported during the previous year.



The Invalid Children's Aid Association. - Once again we are indebted to this Association for the case-work and welfare undertaken by its members. The following is a summary of activities in 1961.

Intensive case-work	...	...	...	...	4
Case-work visiting	...	...	...	...	5
Supportive visiting	...	...	...	...	7
Aftercare of children who have been in Residential Schools	...	...	...	...	2
Grant towards cost of T.V. Licence	...	...	...	...	1
Invalid chair obtained	...	...	...	...	1

#### THE HEALTH VISITOR AND THE SCHOOL NURSE

Miss J. Oliver, Superintendent Health Visitor, submits the following report:-

"Constant vigilance on the part of parent, school teacher and health visitor was needed in 1961; many informal inspections were requested. The health visitor's contact with the home makes tactful suggestions on care of the hair and getting rid of infestation fairly easy. Our procedure commenced in 1958 has proved worth while coupled with the higher standard of present day hygiene. It would appear that the families moving into the town to obtain work need our special care.

Visits to homes to remind parents that children should wear their spectacles are still far too high and it cannot be over-emphasised that this is a parental responsibility. Children's eyes could be permanently damaged through lack of encouragement from parents and it is most unfair that teachers should have this added responsibility of constantly reminding children to wear their spectacles.

One more senior school asked for Mothercraft lectures to be given to the girls in a 'C' stream. All pupils were attentive and enthusiastic and their interest was shown on open day when model baby and toddler garments were on show with model diets suitable for various age groups. Bathing the model doll in front of parents and admiring friends always gathered a crowd. The health visitors feel that



courses in Mothercraft will always be worth while. Good information is spread amongst friends and taken back to the home. There are no reasons to show from visiting homes that the 'C' stream mother fails in her duties to parenthood any more than her 'A' stream sisters.

Handicapped pupils need a considerable amount of help and guidance from teachers and parents - many coming within this category hold down good jobs and find a happy niche in the world. I feel it is up to us to help much more and this could well be the health visitor's aim for the future.

We continue to carry out medical inspections in school often in very difficult circumstances. I am quite sure that many parents would like to have a quiet word with the school doctor but find this impossible as insufficient privacy is given.

One senior school made an innovation this year by inviting parents to see the teachers and the child's new school at the same time as the routine medical inspection. From our point of view this was valuable because more parents than usual attended the medical examination. "

Hygienic Conditions in Schools in the Division. - Mr. S.R. Daly, Chief Public Health Inspector, reports as follows:-

"During the current year, the Ilford Borough Council Public Health Inspectors have continued to make monthly visits to the Borough Schools to ensure that the sanitary circumstances are satisfactory and that the canteen facilities are maintained at a standard to conform with the Food Hygiene Regulations. As can be expected, defects have been discovered and references to the Borough Education Officer and the Schools Medical Officer have produced a speedy reparation thereof.

The use of cardboard cartons for the delivery of milk has continued without any serious complaint this year. I am of opinion that this system might well be augmented. The only complaints regarding the supply of milk to schools emanate solely from the use of glass bottles.



It might be considered advisable to reorganise the sanitary conveniences at schools, particularly the old ones, to prevent the undue waste and inconvenience arising from the unsuitable external situation of these facilities which undoubtedly cause discomfort to pupils, staff and administrators.

It is also pleasing to note that the water supplies to the schools were sufficient throughout the year, thus preventing complaints arising from the deficiencies of the previous year when certain schools in the Borough were without adequate flushing water to the sanitary conveniences."

Employment of School-children and Young Persons. - During 1961, 112 children were submitted for medical examination in accordance with the Bye-laws made under Part II of the Children and Young Persons Act, 1933, and all were found to be medically fit.

#### B. C. G. VACCINATION OF SCHOOL CHILDREN

In 1961 the scheme was extended to include all pupils over the age of 13 years and students attending Universities, Colleges or other establishments of further education. In addition those previously invited who did not accept were given a further opportunity, hence the large number to whom it was offered.

No. of pupils to whom B. C. G. was offered	...	2,354
No. of pupils whose parents consent to treatment.	... ..	1,401
No. of pupils undergoing tuberculin test	... ..	*1,479
Positive:	99	
No. of pupils who received B. C. G.	... ..	1,285
	*78 carried forward from previous year.	

MEDICAL EXAMINATION OF TEACHERS, OFFICERS AND SERVANTS. - The following examinations were carried out during 1961:-

	Officers	Servants	Teachers	Intending Teachers	Total
New Appointments ... ..	12	42	44	75	173
Under Sickness Regulations	-	4	-	-	4

THE CAUSES OF DEATH AMONG CHILDREN OF SCHOOL AGE (i.e. FROM 5 - 15 YEARS) IN ILFORD, DURING 1961 WERE:-

Bilateral Glioma . . . . .	1
Leukaemia . . . . .	1
Haemophilia . . . . .	1
Intracranial Tumour... . . . .	2
Multiple Injuries (Road Accident) . . . . .	1
Cerebral Abscess . . . . .	1
	<hr/>
	8
	<hr/>

### MINISTRY OF EDUCATION

### MEDICAL INSPECTION RETURNS

YEAR ENDED 31st DECEMBER, 1961.

TABLE I.

Medical Inspection of pupils attending maintained Primary and Secondary Schools including (Special Schools).

#### A. - PERIODIC MEDICAL INSPECTIONS

Number of Inspections 5-15 year age group . . . . .	4,042
Number of other Periodic Inspections . . . . .	1,021
	<hr/>
Total: . . . . .	5,063
	<hr/>

#### B. - OTHER INSPECTIONS.

Number of Special Inspections . . . . .	775
Number of Re-inspections . . . . .	1,778
	<hr/>
Total: . . . . .	2,553
	<hr/>



C. - PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (Excluding Dental Diseases and Infestation with Vermin).

(No individual pupil is recorded more than once in any column of this Table, and therefore the total on column (4) will not necessarily be the same as the sums of columns (2) and (3).)

Age Groups inspected (by year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total individual pupils (4)
1956	13	96	96
1955	19	125	134
1954	3	23	25
1953	4	11	15
1952	4	14	17
1951	2	13	13
1950	193	312	474
1949	101	150	235
1948	5	9	14
1947	88	121	198
1946 and earlier	208	156	337
TOTAL	640	1,030	1,558

TABLE II

A. - RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1961.

NOTE. - All defects noted at medical inspection as requiring treatment are included in this return, whether or not this treatment was begun before the date of the inspection.

Defect Code No.	Defect or Disease	Number of Defects Requiring Treatment		Number of Defects Requiring Observation but not Treatment	
		Periodic Inspection	Special Inspection	Periodic Inspection	Special Inspection
		(1)	(2)	(3)	(4)
4	Skin ... ..	97	—	31	—
5	Eyes — a. Vision ...	640	8	178	1
	b. Squint ...	32	—	9	—
	c. Other ...	43	—	9	1
6	Ears — a. Hearing ...	15	25	24	1
	b. Otitis Media	8	—	6	—
	c. Other ...	11	—	5	1
7	Nose or Throat ...	83	3	278	—
8	Speech ... ..	32	13	34	3
9	Lymphatic Glands ...	1	—	40	2
10	Heart and Circulation	21	—	58	—
11	Lungs ... ..	40	—	93	1
12	Developmental —				
	a. Hernia ...	5	—	8	—
	b. Other ...	25	1	90	2
13	Orthopaedic —				
	a. Posture ...	258	2	22	—
	b. Flat foot	211	2	83	—
	c. Other ...	152	2	167	4
14	Nervous system —				
	a. Epilepsy	4	—	6	—
	b. Other ...	—	—	19	—
15	Psychological —				
	a. Development	1	4	6	—
	b. Stability	39	20	61	—
16	Abdomen ... ..	12	2	17	—
17	Other ... ..	113	14	111	5



B. - CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups inspected by year of birth)	Number of Pupils Inspected	No. whose condition was classified	
		Satisfactory	Unsatisfactory
1956	404	382	22
1955	577	560	17
1954	62	61	1
1953	43	42	1
1952	53	50	3
1951	44	43	1
1950	1,439	1,413	26
1949	648	637	11
1948	47	47	-
1947	725	702	23
1946 and earlier	1,021	1,010	11
<b>TOTAL</b>	<b>5,063</b>	<b>4,947</b>	<b>116</b>

TABLE III.

## INFESTATION WITH VERMIN.

All cases of infestation, however, slight, are recorded.

This return relates to individual pupils and not to instances of infestation.

(i) Total number of pupils examined in the schools by school nurses or other authorised persons...	17,071
(ii) Total number of individual pupils found to be infested ... ..	51
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ... ..	-
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ... ..	-

## (v) Number of individual pupils disinfested:-

By Local Authority	...	...	31
By parents	...	...	20

TABLE IV.

## TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS).

Notes:- (a) Treatment provided by the Authority includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, i.e., whether by periodic inspection, special inspection, or otherwise, during the year in question or previously.

(b) Treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

## GROUP 1. - DISEASES OF THE SKIN (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE III).

	Number of New Cases Treated during the year	
	By the Authority	Otherwise
Ringworm (i) Scalp	—	—
(ii) Body	—	2
Scabies	—	—
Impetigo	3	—
Other Skin Diseases	131	33



GROUP 2. - EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint ....	139	10
Errors of Refraction (including squint) ....	-	1,849
Total ....	139	1,859
Number of pupils for whom spectacles were		
(a) Prescribed ....	-	895
(b) Obtained ....	-	901

GROUP 3. - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear ....	-	-
(b) for adenoids and chronic tonsillitis	-	388
(c) for other nose and throat conditions	-	-
Received other forms of treatment ....	63	80
Total ....	63	468

GROUP 4. - ORTHOPAEDIC AND POSTURAL DEFECTS.

	By the Authority	Otherwise
(a) Number treated in clinics or out-patients departments ....	661	810
(b) Pupils treated at school for postural defects ....	46	-

## GROUP 5. - CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of individual pupils treated at Child Guidance Clinics ....	99	8

## GROUP 6. - SPEECH THERAPY

	By the Authority	Otherwise
Number of pupils treated by Speech Therapists for the first time ....	104	3

## GROUP 7. - OTHER TREATMENT GIVEN.

	By the Authority	Otherwise
(a) Miscellaneous minor ailments ....	302	53
(b) Other		
(1) Sunlight Treatment ....	45	—
(2) Enuresis ....	64	2
Total ....	411	55

TABLE V.

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by Dental Officers:-	
(a) Periodic age groups ...	7,348
(b) Specials ... ..	2,030
Total (1)	<u>9,378</u>
(2) Number found to require treatment ... ..	
(3) Number referred for treatment	5,645
(4) Number actually treated ...	2,960
(5) Attendances made by pupils for treatment ... ..	12,677



(6) Half-days devoted to:		
Inspection	... ..	52
Treatment	... ..	1,426
	Total (6)	<u>1,478</u>
(7) Fillings: Permanent Teeth		... 7,095
	Temporary Teeth	... 1,315
	Total (7)	<u>8,410</u>
(8) Number of teeth filled:		
Permanent Teeth	... ..	6,276
Temporary Teeth	... ..	1,245
	Total (8)	<u>7,521</u>
(9) Extractions:		
(i) Permanent Teeth:-		
(a) On account of Caries		468
(b) For other purposes		90
(ii) Temporary Teeth:-		
(a) On account of Caries		1,348
(b) For other purposes		69
(10) Administration of general anaesthetics for extraction		... 806
(11) Other operations:		
Permanent Teeth	... ..	3,009
Temporary Teeth	... ..	1,063
	Total (11)	<u>4,072</u>
(12) Orthodontics		
(i) Cases commenced during year..	... ..	190
(ii) Cases carried forward from previous year	... ..	364
(iii) Cases completed during year..	... ..	172
(iv) Cases discontinued during year	... ..	48
(v) Pupils treated with appliances	... ..	147
(vi) Removable appliances fitted	... ..	154

(vii) Fixed appliances fitted	-
(viii) Total attendances ...	3,135
(ix) Number of sessions devoted to treatment ...	210
Number of pupils supplied with artificial dentures ...	28
Number of dentures fitted ...	28

Aggregate staff in terms of full-time officers employed in the School Health Service	Number	Number of School Clinics (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)
(1)	1	(2)
A. Medical Officer	1	(3) General Practitioner
B. Dental Officer	1	(4) Physiotherapist
C. Dental Nurse	1	(5) Occupational Therapist
D. Dental Technician	1	(6) School Nurse (including Physiotherapist)
E. Dental Assistant	1	(7) Hospital Assistant
F. Physiotherapist	1	(8) Dental Officer (General)
G. Speech Therapist	1	(9) Pathologist
H. Central Path Unit	1	(10) Dental X-ray Assistant
I. Dental Radiologist	1	
J. Physiotherapist	1	
K. Nurse	1	
L. Clerk	1	

\* All hold Health Visitor's Certificate.



SCHOOL HEALTH SERVICE STAFF AND  
SCHOOL CLINICS

AS AT 31st DECEMBER, 1961.

1. - STAFF OF THE SCHOOL HEALTH SERVICE.

Divisional School Medical Officer: I. Gordon, M.D., Ch.B.,  
M.R.C.P. (Lond.), D.P.H.

Area Dental Officer: E. V. Haigh, L.D.S., R.C.S.

	Number	Aggregate staff in terms of full-time officers employed in the School Health Service
(a) Medical Officers:		
(i) Whole time School Health Service ...	—	—
(ii) Whole time School Health and Local Health Services ...	8	2.02
(iii) General Practitioners working part-time in the School Health Service ... ..	—	—
(b) Speech Therapists ... ..	3	2.54
(c) Physiotherapist C.P. Unit ...	2	2.00
(d) Occupational Therapist C.P. Unit ... ..	1	1.00
(e) School Nurses including Superintendent ... ..	25*	(Combined posts, H.V. and S.N.) 10.02
(f) Nursing Assistants ... ..	6	(Clinic Nurses) 3.75
(g) (i) Area Dental Officer ...	1	0.76
(ii) Dental Officers (Part-time)	8	2.64
(iii) Orthodontists ... ..	—	—
(iv) Dental Surgery Assistants	4	3.76

\*All hold Health Visitor's Certificate.

- II. — NUMBER OF SCHOOL CLINICS (i.e., premises at which Clinics are held for school-children) provided by the L.E.A. for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

Number of School Clinics ... 5

- III. — TYPE OF EXAMINATION AND/OR TREATMENT provided at the School Clinics returned in Section II. either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the Clinic.

Examination and/or Treatment	Number of School Clinics (i.e. premises) where such treatment is provided	
	Directly by the Authority	Under arrangements made with R.H.B. &c.
(1)	(2)	(3)
A. Minor ailment and other non-specialist examination or treatment ...	3	-
B. Dental ... ..	4	-
C. Ophthalmic ... ..	-	3
D. Ear, Nose and Throat ...	-	1
E. Orthopaedic ... ..	-	3
F. Paediatric ... ..	-	1
G. Speech Therapy ... ..	4	-
H. Cerebral Palsy Unit ...	-	1
I. Artificial Sunlight ...	-	2
J. Remedial Exercises & Physiotherapy ... ..	3	2
K. Enuresis ... ..	1	-
L. Orthoptic ... ..	-	1



## IV. — CHILD GUIDANCE CENTRES.

(i) Number of Child Guidance Centres provided by the Authority = 1.

Staff	Number	Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists ... ..	2	0.82
Educational Psychologists...	2	2
Psychiatric Social Workers	3	3
Others:-		
Child Psychotherapist ...	2	1
Clerk/Typist ... ..	3	3

The Psychiatrists are employed by arrangement with the Regional Hospital Board.

Table Showing the Average Heights and Weights of Ilford Boys and Girls Examined.

Owing to a change in the Presentation of Ministry of Education Returns whereby Periodic Medical Inspections are recorded in Years of Birth, from and Including 1958, the Figures recorded below cannot be compared with the Groups in previous years.

	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944																										
<b>BOYS</b>																																							
1958 ... ..	-	-	-	573	111	19.7	533	115	21.2	123	120	23.6	71	125	25.9	39	130	28.8	555	136	31.8	1097	143	36.4	630	146	37.7	48	150	41.5	30	155	46.1						
1959 ... ..	-	-	-	403	114	21.1	152	120	23.0	50	126	26.2	49	132	28.8	34	137	32.5	835	144	36.6	516	146	38.3	95	150	42.0	358	163	53.0	764	163	53.5						
1960 ... ..	-	-	-	81	120	23.6	73	125	25.2	46	130	28.7	92	139	32.7	878	142	36.0	438	144	38.0	45	151	43.3	452	162	53.1	226	166	55.6	123	172	62.3						
1961 ... ..	205	112	20.2	294	114	21.0	35	119	23.4	24	125	25.0	30	130	28.1	21	137	32.4	678	141	35.9	328	145	38.8	27	154	41.7	239	162	52.8	284	165	55.4	104	168	60.4	98	174	64.1
<b>GIRLS</b>																																							
1958 ... ..	-	-	-	552	111	19.5	461	115	20.8	118	120	23.1	32	126	25.5	31	129	28.6	41	137	30.0	1005	145	37.6	527	147	39.4	31	149	41.7	23	156	46.3						
1959 ... ..	-	-	-	438	114	20.6	200	119	22.9	42	125	25.8	38	129	30.3	38	129	30.3	980	144	37.1	504	148	39.2	59	152	43.5	374	160	52.2	791	159	51.9						
1960 ... ..	-	-	-	67	119	22.6	37	125	22.6	37	129	27.2	103	137	30.3	911	142	36.5	387	146	39.3	34	153	46.5	437	159	51.3	299	160	54.0	81	162	55.4						
1961 ... ..	199	111	20.1	283	112	20.8	27	117	23.7	19	122	24.7	23	131	29.4	23	136	32.7	761	144	37.9	320	147	39.8	20	150	44.7	486	159	52.5	406	161	54.4	77	161	54.9	52	163	55.0

	Age Groups												Age Groups																										
	5-6 Years		6-7 Years		7-8 Years		8-9 Years		9-10 Years		10-11 Years		11-12 Years		12-13 Years		13-14 Years		14-15 Years		15-16 Years		16-17 Years		17-18 Years														
	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)	Number of Children Examined	Average Height (in Centimetres)	Average Weight (in Kilogrammes)						
<b>BOYS</b>																																							
1957 ... ..	498	113	20.5	470	116	21.7	62	123	24.7	35	127	26.8	29	132	29.8	603	142	34.9	781	144	36.5	18	145	38.5	8	148	45.2	437	160	50.7	48	170	62.4	10	168	63.8			
1956 ... ..	818	112	20.0	409	117	21.7	89	122	23.9	70	128	27.9	47	135	30.8	555	140	34.6	688	142	36.1	50	145	38.7	37	152	43.8	575	162	51.1	160	168	57.4	104	172	61.2	60	174	64.3
1955 ... ..	605	113	20.6	842	116	21.9	125	123	24.3	68	124	25.5	38	135	29.9	320	142	34.4	994	144	35.7	46	146	37.3	13	155	47.0	381	162	50.7	206	168	57.8	62	171	61.4	45	175	63.5
1954 ... ..	561	113	20.4	718	117	21.8	124	123	23.8	73	128	26.6	52	132	29.2	325	141	34.5	863	144	34.9	63	147	38.5	33	153	42.5	485	162	48.3	203	167	57.2	75	171	60.2	43	176	64.1
1953 ... ..	649	112	20.2	925	116	20.4	82	121	23.6	34	126	26.3	36	133	28.9	194	140	33.3	799	144	34.7	49	145	36.3	22	153	44.0	441	162	51.0	259	168	55.7	84	172	61.2	35	172	56.6
1952 ... ..	820	113	20.2	799	116	21.2	65	123	24.8	52	127	26.2	44	132	28.6	110	140	32.8	766	143	35.3	46	146	36.2	52	154	41.3	372	161	49.8	226	167	55.9	47	172	60.3	1	176	56.2
<b>GIRLS</b>																																							
1957 ... ..	452	113	20.0	441	116	21.1	66	122	24.4	55	128	28.5	41	132	29.7	456	141	34.8	826	144	37.4	24	150	41.5	13	151	46.6	305	158	50.1	119	160	53.1	44	161	55.0	16	161	55.3
1956 ... ..	782	112	19.7	373	117	21.6	91	121	23.1	44	126	26.4	46	134	29.8	438	141	34.9	821	142	37.1	100	150	41.4	57	156	48.1	525	157	50.2	149	160	53.0	123	164	54.1	23	158	54.5
1955 ... ..	604	113	20.1	637	116	21.5	113	121	24.4	74	126	25.9	54	133	29.9	292	141	34.6	1052	144	36.6	73	149	40.5	34	156	48.8	359	159	50.7	180	159	52.5	68	161	54.8	19	161	54.7
1954 ... ..	522	111	19.6	605	116	21.3	93	121	22.8	44	125	24.9	52	134	29.2	288	140	33.9	968	144	36.5	71	148	39.8	36	155	46.4	481	158	48.4	216	160	55.0	85	161	56.8	9	164	57.1
1953 ... ..	657	112	20.0	827	117	21.3	81	119	22.8	38	127	25.8	37	133	28.9	173	140	32.5	841	143	35.5	59	150	39.9	49	156	47.1	374	156	50.9	212	160	53.6	49	162	54.9	5	164	55.6
1952 ... ..	746	112	19.9	695	115	21.0	70	121	23.3	57	125	24.6	39	132	29.1	124	139	33.5	784	143	35.7	79	148	40.5	29	155	49.8	410	158	50.5	239	156	54.9	67	160	55.0	5	159	49.0



