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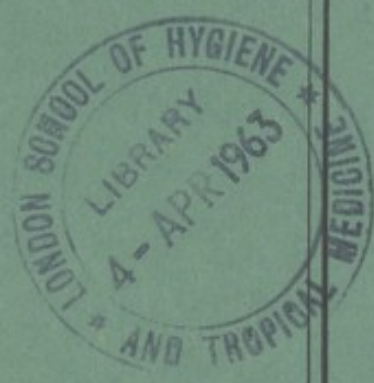


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BOROUGH OF WALTHAMSTOW

REPORT

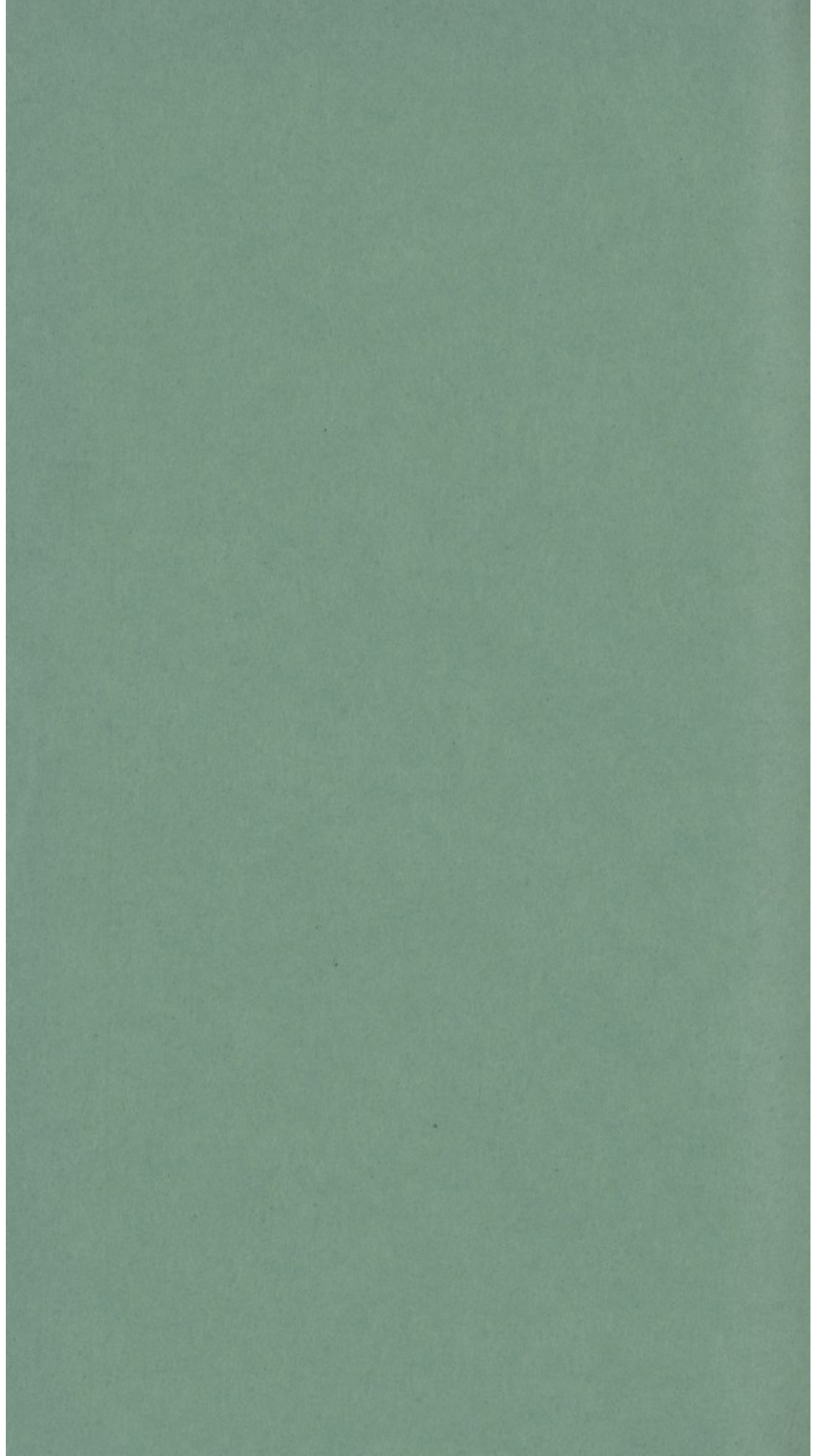
OF THE

MEDICAL OFFICER OF HEALTH

for the Year 1961

MELVILLE WATKINS, M.R.C.S., L.R.C.P., D.P.H.

MEDICAL OFFICER OF HEALTH





BOROUGH OF WALTHAMSTOW

REPORT

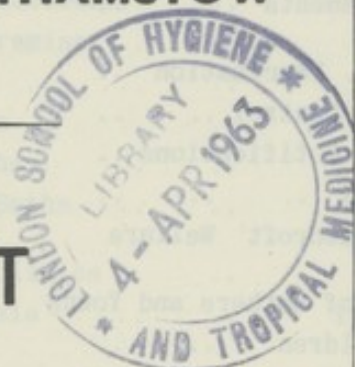
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for the Year 1961

MELVILLE WATKINS, M.R.C.S., L.R.C.P., D.P.H.

MEDICAL OFFICER OF HEALTH



I N D E X

	Page
SECTION A - Statistics and Social Conditions of the Area	9
SECTION B - General Provision of Health Services in the Area	13
SECTION C - Prevalence and Control over Infectious Diseases	16
SECTION D - Sanitary Circumstances of the Area	19
SECTION E - Sanitary Circumstances of the Area - Statistics..	24
SECTION F - National Health Service Act, 1946 - Part III Services	54

	Page		Page
Acreage	9	Disinfestation	20
Adulteration of Food..	34	Domestic Help	47, 58, 76
Aged and chronic sick	42	Domiciliary Chiropody	75
Ambulance Facilities..	14	Employment.. .. .	12
Ante-Natal Clinics ..	64	Factories Acts, 1937/59	37
Assessments	9	Food and Drugs Act, 1955	22
B.C.G. Vaccination ..	75	Food Hygiene Regulations, 1960	22, 35
Birth Control	64	Flooding	16
Birth Notifications ..	64	Food Inspection	31
Births	9	Food Poisoning	17
'Brookscroft' Welfare	70	Funeral Arrangements ..	15
Care of Mothers and Young		Gas and Air Analgesia ..	71
Children	55, 64	General Dental Service	54, 63
Chest Clinic	59	General Information ..	15
Chiropody	44, 58, 75	Hairdressers	20
Clean Air Act, 1956 ..	6	Health Education.. ..	56, 76
Clearance Areas ..	21	Health Centres	54
Committees	4, 53	Health Services Clinics	63, 70
Comparability Factor..	12	Health Visiting	56, 72
Confinements	72	Home Nursing	45, 57, 73
Convalescence	69, 76	Hospital Accommodation..	14
Conveniences, Public..	15	Housing Act, 1936 ..	21
Cremation	16	Housing, General.. ..	29
Daily Guardian Scheme	69	Housing, Inspection ..	28
Day Nurseries	69	Housing Statistics ..	27
Deaths from Accidents in		Ice Cream	22
the Home	12	Immunisation	57, 73
Deaths, Infants ..	9	Improvement Grants ..	27
Deaths, Causes of ..	11	Infant Mortality.. ..	9, 10
Dental Laboratory ..	63	Infectious Diseases ..	5, 14, 16
Dental Treatment ..	66	Inquests	16
Diphtheria Immunisation	73	Laboratory Facilities ..	13
Diseases of Animals Acts	23		
Disinfections	15, 25		

	Page		Page
Land Charges	21	Prevention of Illness ..	58, 75
Laundry Service for the		Public Health Inspection	19, 24, 49
Incontinent	48		
Legal Proceedings ..	23	Rainfall	16
Legislation	15	Rateable Value	9
		Rehousing on Medical Grounds	30
Massage and Special Treatment	14	Rent Act, 1957	20, 26
Maternal Mortality ..	9	Rodent Control	36
Meals on Wheels Service	15		
Meat and other Foods ..	22, 32	Sampling of Food	22
Medical Examinations	15, 78	Scabies Treatment.. ..	14
Medicaments	68	Sickroom Equipment ..	76
Midwifery	55, 71	Smallpox Vaccination ..	73
Milk	21	Smoke Abatement	6, 19, 25
Moral Welfare	58	Social Conditions.. ..	9
		Special Premises	25
Night Attendance.. ..	77	Staff	13
Notices, Sanitary ..	24	Statistics	5, 9, 63
Nursing Homes	14	Stillbirths.. ..	9
Nutrients	68	Swimming Baths	20
Old People's Welfare ..	7, 14, 39	Toddlers Clinics	70
Orthopaedic Treatment ..	65	Tuberculosis	17, 75
Outworkers.. ..	37		
		Vaccination.. ..	57, 73
Paediatric Clinic ..	65	Verminous Premises ..	20
Pet Animals Act, 1951 ..	24	Vital Statistics	5, 9
Poliomyelitis	17		
Poliomyelitis Vaccination	74	W'stow Assn. of T.B. Care Helpers	60
Population.. ..	9	Water	5
Post Mortems	16	Welfare Centres	56, 67, 70
Post Natal Clinics ..	64	Welfare Foods	68
Premature Infants ..	64	Welfare Services	62
Prevention of Damage by Pests		Whooping Cough Immunisation	74
Act, 1949	24, 36		

HEALTH COMMITTEE

1961 - 62

Chairman:

COUNCILLOR MRS. W. M. PALETHORPE

Vice-Chairman:

COUNCILLOR MRS. C. E. STANNARD

Ex-officio:

THE WORSHIPFUL THE MAYOR - ALDERMAN E. C. REDHEAD, J.P., M.P.

THE DEPUTY MAYOR - ALDERMAN W. R. BALDWIN

CHAIRMAN OF FINANCE COMMITTEE - ALDERMAN ROSS WYLD, O.B.E., J.P.

ALDERMAN THE LADY MCENTEE, O.B.E., J.P. (Deceased)

ALDERMAN G. S. MACE

ALDERMAN C. B. REYNOLDS

COUNCILLORS:

MRS. E. L. BALDWIN

L. A. BAYLIS

J. J. BRACKEN

MRS. R. COLIN

W. G. FREWIN

COUNCILLORS:

F. FURBER

J. H. HAMMOND

MRS. J. C. OAKMAN

MRS. B. M. REYNOLDS

E. ROSOMAN

D. WEINSTEIN

Medical Officer of Health:

M. WATKINS, M.R.C.S., L.R.C.P. D.P.H. (Part-time)

Deputy Medical Officer of Health:

G. H. POOLE, M.B., B.S., D(Obst.) R.C.O.G., D.P.H. (Part-time)

Chief Public Health Inspector:

W. RICHARDS, D.P.A., M.A.P.H.I.

Deputy Chief Public Health Inspector:

N. SMITH, M.A.P.H.I.

Chief Clerk:

R. ROSE

**TO THE MAYOR ALDERMEN AND COUNCILLORS OF
THE BOROUGH OF WALTHAMSTOW**

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1961.

VITAL STATISTICS

The mid-year population according to the Registrar General's report was about 2,800 less than the previous year. This contrasts with a reduction of 1,400 between the years 1959/60.

In spite of this the number of births increased from 1,428 to 1,529 but in contrast the total deaths from all causes also rose from 1,137 to 1,323, the birth-rate was considerably less than the national average and the death rate slightly more. The infant Mortality Rate of 15.7 per thousand live births is much reduced from last year's figure and considerably less than the national figure. We must not read too much into this since the numbers are so small that one or two deaths more or less would alter the rate considerably. It may be remembered that the figure in 1958 was 15.4. There were no maternal deaths during the year.

Of the total deaths the conditions that claimed most lives were again diseases of the heart and blood vessels and cancer. Of the 285 cancer deaths 81 (28.4%) were due to lung cancer. Nearly 45% of the deaths were in the age group 75 and over.

INFECTIOUS DISEASES

The overall incidence of infectious diseases again followed the lower trends of recent years. Measles was prevalent during the first quarter of the year, also, for some inexplicable reason, dysentery. Of the more dangerous diseases such as diphtheria and poliomyelitis no cases were recorded.

In spite of this favourable picture, last year's outbreak of diphtheria is a reminder that we can never afford to relax our vigilance and should always be ready for the unexpected.

WATER - WATER

A safe and pure water supply has always been one of our prime public health functions, and the receipt of Dr. Windle Taylor's report as Chief Medical Officer to the Metropolitan Water Board on the "Results of the Bacteriological, Chemical, and Biological Examination of the London Water" for 1959/60 is therefore a salutary reminder of this, and at the same time of much that we take for granted - a commodity which is essential for life itself.

The provision of such vast quantities of water to so many millions of people is mainly an engineering problem but its purity and safety is equally important if we are to prevent the occurrence of the water-borne diseases which affected us in the past. The older Medical Officers of Health will remember being directly responsible for the chemical and bacteriological examinations of their water supplies; and an outbreak of enteric would send them scurrying to double check its safety. We have got so used to the high standards of safety set by the Board that if we are confronted with an outbreak these days the water supply is almost the last vehicle of infection we suspect. True we still receive in the Department many complaints of foreign bodies in water, bad tastes, bad smells, infection, etc., but they are almost all due to domestic storage conditions and not the main supply. How often have dead birds and rats been found in cisterns? The Water Board can hardly be blamed for these.

One is tempted to regard the examination and security of the quality and purity of water supplies as routine matters but as the Report shows, new hazards and problems present themselves. Establishments of the Atomic Energy Authority discharge their waste into the Thames, from which source is extracted the bulk of London's supply.

Tests for radio-activity are therefore an added responsibility. Fortunately figures do not show any difference between Thames waters and those from other sources.

Again attention has recently been drawn to the presence in sewage polluted water of disease producing viruses. Viruses seem to be more resistant to chlorination than bacteria. These are just a few of the newer hazards and responsibilities that have to be contended with.

The rarity of water-borne diseases and the never failing water supply tends to make us forget the enormous amount of work that goes on to produce for us a safe and wholesome product, but at least one person in Walthamstow maintains a keen interest in our water supply. Alderman Tom Smith has been for many years the Borough's representative on the Water Board, and we are delighted to know that his great concern and diligence as a member on our behalf has been rewarded by the conferment upon him of the Vice-Chairmanship.

SMOKE CONTROL

Smoke Control Order No. 1 came into operation on the 1st June, 1961. It is not anticipated that the concentration of smoke and sulphur dioxide in the atmosphere will show a significant reduction from that of the last few years until an appreciable area of the Borough is under control.

Yet the Annual Report of the Department of Industrial and Scientific Research gives us much encouragement in our efforts. It shows that smoke-free areas can and do exist near areas of high pollution, so that benefits, however small, are obtained with the coming into existence of each succeeding area.

This may be an appropriate time to include in the Report a coloured map of the phased programme of smoke control areas for the whole town. It should prove useful for reference purposes, but it is hoped that it may prove possible during the next few years to accelerate the programme.

CARE OF THE ELDERLY

Most of the narrative in this year's Report is devoted to the responsibilities of both the Public Health and the Area Health departments towards the aged. The topic suggested itself, following a small sample survey carried out by health visitors on the social and medical needs of old people, the results of which are reproduced in later pages. It is often of value to concentrate on some specific function of the Department from time to time. It enables one to give a critical appraisal of work done, and to assess how far it meets the changing demands for the particular service.

Our investigations so far as they have gone suggest that in Walthamstow the general standard of care of the elderly is good, but there are still too many without a normal home background who have been consigned to a life of wasteful living in virtual isolation, which can lead to inertia, frailty, squalor and complete resignation. The causes are multiple but whatever they are the result is almost the same. They have no sense of belonging to the community, become extremely suspicious and resistant to any help offered. The problem is to find the cases and having found them, to induce them to accept assistance. The worst cases are usually reported as needing care and attention and subject to compulsory removal under Section 47 of the National Assistance Act, but thanks to the supporting services of health visitors, domestic helps, home nurses, chiropodists, and such dedicated voluntary assistances given as Meals on Wheels, not one case was dealt with by removal during the year.

Effective preventive action can only be taken following early information regarding such cases, but unfortunately there are limiting factors such as shortage of staff.

Just as with so many other conditions, prevention is better than cure, so our aim with the elderly should be to maintain them active, interested, and useful members of the community.

The Ministry of Housing and Local Government issued an excellent circular during the year on the services for old people.

It gave a comprehensive picture of how co-operation in this work could be achieved between housing, local health and welfare authorities, and voluntary organisations. My report endeavours to show the contributions made by the Public Health Department and the Local Health Authority. For the sake of continuity the contributions of the staffs of the various departments have been placed together.

ACKNOWLEDGMENTS

Once again I would like to express my gratitude for the support given by all members of the Health and Area Health Committees, also for the co-operation of members of staff and especially those who have contributed to this report.

I have the honour to be,

Your obedient Servant,

M. WATKINS

Medical Officer of Health.

A. - STATISTICS & SOCIAL CONDITIONS OF THE AREA

Area (in acres)	4,343
Population (Registrar General's Estimate, mid-year 1961)	108,860
Number of Assessments (31st December 1961)	40,176
Rateable Value (31st December 1961)	£1,788,829
Estimated Product of a penny rate (1961/62)	£7,240

Population. - The Registrar-General's Estimate of the home population at mid-year, 1961, is 108,860, a decrease of 2,750 on the previous year. The steady decline continues.

This figure has been used for the calculation of the following statistics:-

Live Births:

Number	1,529
Rate per 1,000 population	14.0
Illegitimate Live Births per cent of total live births	5.1

Stillbirths:

Number	27
Rate per 1,000 total live and stillbirths	17.3
Total Live and Stillbirths	1,556

Infants Deaths (deaths under 1 year)	24
--	----

Infant Mortality Rates:

Total infant deaths per 1,000 total live births ..	15.7
Legitimate infant deaths per 1,000 legitimate live- births	15.1
Illegitimate infant deaths per 1,000 illegitimate live births	25.6

Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	9.8
--	-----

Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	9.1
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Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	26.3
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Maternal Mortality (including abortion):

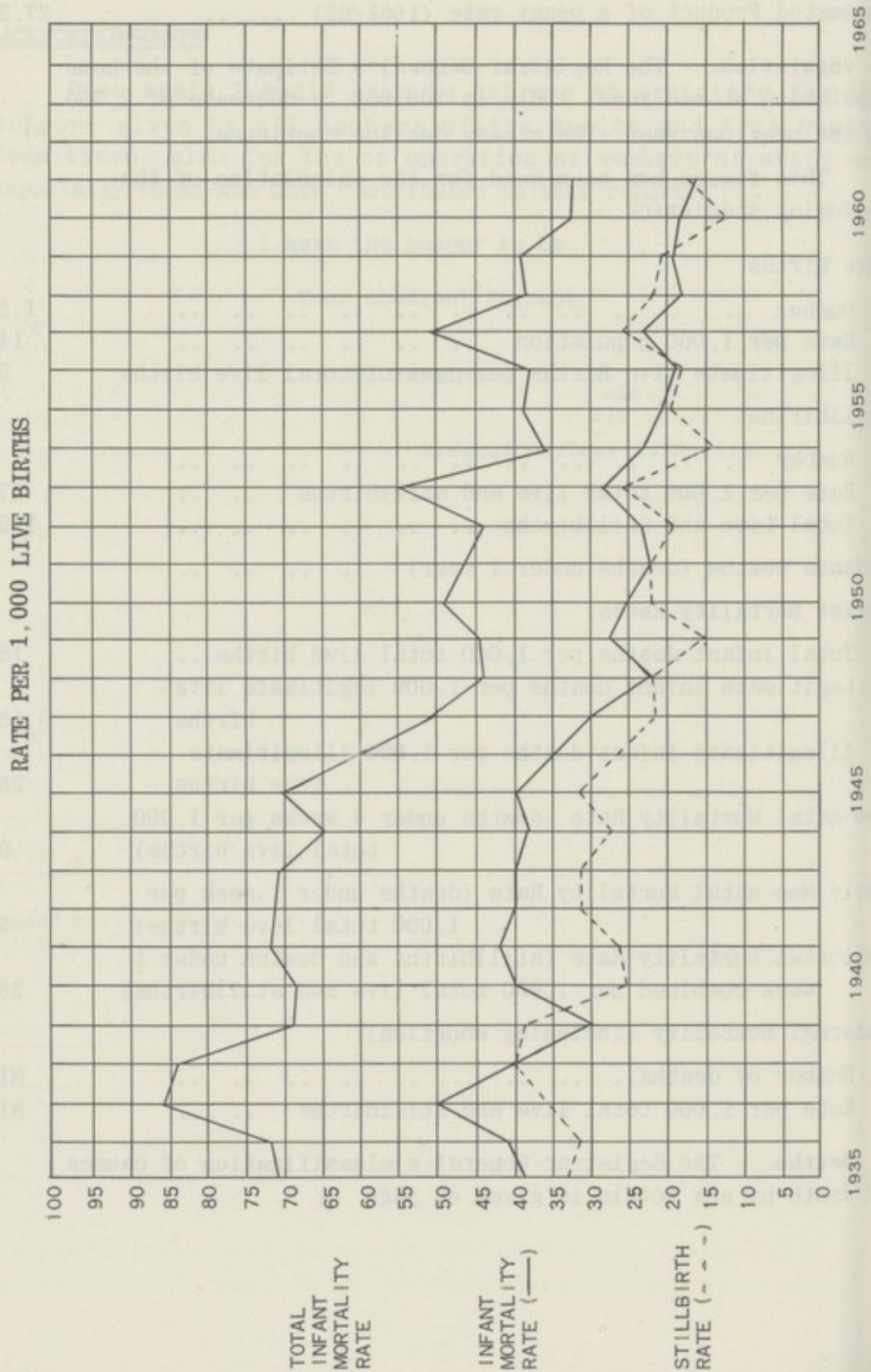
Number of deaths.. .. .	Nil
Rate per 1,000 total live and stillbirths	Nil

Deaths. - The Registrar-General's classification of causes of death by sex totals is given on page 11

Total Infant Mortality

This is defined as the sum of the deaths that occur during child-birth and during the first year of life.

The attached graph shows the position since 1935.



**Causes of Death as given by the Registrar General for the
Year 1961**

<i>Causes of Death</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>	<i>1960</i>
1. Tuberculosis, Respiratory ..	5	2	7	7
2. Tuberculosis, other	1	-	1	1
3. Syphilitic Disease	1	1	2	1
4. Diphtheria	-	-	-	1
5. Whooping Cough	-	-	-	-
6. Meningococcal Infections	-	-	-	-
7. Acute Poliomyelitis	-	-	-	-
8. Measles	-	-	-	-
9. Other Infective and Parasitic Diseases	1	-	1	3
10. Malignant neoplasm, stomach ..	21	19	40	31
11. Malignant neoplasm, Lung, bronchus	74	7	81	67
12. Malignant neoplasm, breast ..	-	23	23	33
13. Malignant neoplasm, uterus ..	-	10	10	7
14. Other malignant and lymphatic neoplasms	61	60	121	100
15. Leukaemia, aleukaemia	6	4	10	9
16. Diabetes	1	9	10	5
17. Vascular lesions of nervous system	61	93	154	126
18. Coronary disease, angina	156	95	251	204
19. Hypertension with heart disease	11	19	30	26
20. Other heart disease	68	97	165	154
21. Other circulatory disease	23	39	62	56
22. Influenza	2	7	9	3
23. Pneumonia	41	45	86	69
24. Bronchitis	57	25	82	78
25. Other diseases of respiratory system	10	-	10	5
26. Ulcer of stomach and duodenum ..	10	6	16	12
27. Gastritis, enteritis and diarrhoea ..	2	4	6	9
28. Nephritis and nephrosis	4	2	6	5
29. Hyperplasia of prostate	8	-	8	5
30. Pregnancy, childbirth, abortion	-	-	-	-
31. Congenital malformations	5	2	7	15
32. Other defined and ill defined diseases	36	59	95	73
33. Motor Vehicle Accidents	10	3	13	10
34. All other accidents	6	7	13	12
35. Suicide	3	1	4	10
36. Homicide and operations of war	-	-	-	-
Totals 1961 ..	684	639	1,323	-
Totals 1960 ..	566	571	-	1,137

The age distribution of Cancer deaths was as follows: Deaths from Lung Cancer are shown separately but are also included in the total age groups.

	<i>Under 1 yr.</i>	<i>1-4 yrs.</i>	<i>5-14 yrs.</i>	<i>15-24 yrs.</i>	<i>25-44 yrs.</i>	<i>45-64 yrs.</i>	<i>65-74 yrs.</i>	<i>75 & over</i>
Total deaths -	-	-	1	1	6	110	94	73
Lung								
Males -	-	-	-	-	4	33	29	8
Females -	-	-	-	-	-	2	3	2

The total number of deaths in 1961 (1,323) compares with 1,137 in 1960, the respective death rates being 12.15 and 10.1 per 1,000 population.

The comparability factors for Walthamstow are given by the Registrar-General as follows:-

Comparability factor for births	.. ..	1.03
Comparability factor for deaths	.. ..	1.04

The above factors, when applied to the crude rates, produce the following adjusted rates:-

Live births	.. .. .	14.4
Deaths	.. .. .	12.6

Deaths from Accidents in the home

Six deaths occurred in 1961 from this cause. All died in hospital. The ages and sexes were:-

Female: 60, 71, 74, 75, 95 Male: 66

In order to put these and other deaths in proper perspective, the following comparison is made:-

<i>Cause of Death</i>	<i>1961</i>	<i>1960</i>
(a) Suicide	4	10
(b) Motor Vehicle accidents ..	13	10
(c) All other accidents	13	12
(d) Accidents in the house (included in line (c))	6	5
(e) Tuberculosis	7	7
(f) Poliomyelitis	Nil	Nil

Employment

Miss D.M. Rogerson, Manager of the Local Employment Exchange has kindly contributed the following information:-

"I am afraid we do not keep separate records relating to the ages of the people we find jobs for, but in fact we are able to place men and women in their 70's.

1. Insured population of the borough of Walthamstow, Leyton, Chingford and Wanstead and Woodford:- approximately 46,200 men, 38,800 women.
2. Insured population of the borough of Walthamstow:- approximately 20,700 men, 16,200 women.
3. The number of persons placed in employment in the whole area during 1961:- approximately 4,000 men, 1,600 women. These figures include approximately 270 disabled men and 75 disabled women.
4. The average number of persons unemployed in the whole area during 1961:- 860 men, 164 women. These figures include approximately 90 disabled men and 15 disabled women.

Note - The figures of insured persons are based partly on the number of N.I. cards exchanged during the June to September quarter and partly on returns rendered by certain employers showing the number of N.I. cards they hold. Caution should be exercised in comparing the number of persons unemployed with the insured persons, as an unemployed person need not necessarily register at an Employment Exchange in the area where his N.I. card is exchanged. Normally an employed person's N.I. card would be counted in the area in which he works, while if he became unemployed he would be likely to register at the Employment Exchange in the area in which he lives."

B. - GENERAL PROVISION OF HEALTH SERVICES IN THE BOROUGH

Public Health officers of the Authority

The following changes in the Officers employed in the Health Department took place during the year:-

<i>Appointments</i>	<i>From</i>
Mr. A.H. Hall, Rodent Operative	27.11.1961
Miss N.M. Tomlinson, S.R.N., S.F.N., C.M.B. Infectious Diseases Nurse	4. 9.1961
<i>Resignations</i>	
Mr. E.W. Beckett, Public Health Inspector (supernumary)	31.12.1961
Mr. B.J. English, Public Health Inspector	5. 2.1961
Mr. H.J. Newbury, Rodent Operative	30.11.1961

Laboratory Facilities

Arrangements continued with the Public Health Laboratory Service at Colindale. The number of specimens examined during the year was as follows:-

<i>Specimens</i>	<i>Total</i>
Faeces and rectal swabs	396
Nose and throat swabs	119 *
Urine	3
Food	-
Miscellaneous	5
Total	523

* The reason for the considerable reduction in the number of Nose and Throat swab examinations during 1961 is explained by the fact that during 1960 there was unfortunately a Diphtheria outbreak which necessitated numerous swabbings.

Ambulance Facilities

These are available from a depot situated at Whipps Cross which is administered centrally from Chelmsford, via the Control Centre at Ilford.

Treatment of Scabies and Verminous Conditions

The arrangement, detailed in the report for 1953, with the Hackney Borough Council continued, and four cases were referred there during 1961 receiving seven treatments.

Hospital Accommodation

(a) *Acute Cases.* - There were no major changes in 1961 in regard to the hospital accommodation available for the inhabitants of the Borough.

(b) *Chronic Cases.* - Regional Hospital Boards have asked that Medical Officers of Health shall support when necessary on "social" grounds the recommendations of medical practitioners for the admission of the chronic sick to hospital. All possible help was given when requested.

The following table shows the position in regard to hospital and hostel admissions considered and/or supported on "social" grounds.

Total number of cases	.. .. .	35
New Cases	.. .. .	33
Brought forward from 1960	.. .. .	2
M.O.H. requests to Langthorne Hospital or Area Welfare Officer	.. .. .	8
Admitted to Hospitals	.. .. .	7
Admitted to Part III accommodation	.. .. .	7
Died before admission	.. .. .	5
Refused Hospital or Hostel accommodation	.. .. .	7
Cancelled or deferred	.. .. .	7
Waiting Part III accommodation	.. .. .	-

It is a pleasure again to record the unfailing help and consideration experienced from Dr. DeLargy at Langthorne Hospital, from Mr. R.N. Weston, Area Welfare Officer and my staff.

(c) *Infectious Diseases.* - St. Ann's Hospital, Tottenham, is the main hospital to which any infectious disease cases are admitted from this area.

Public Health Act, 1936. - Nursing Homes

There is no Nursing Home registered in the Borough.

Essex County Council Act, 1933 (Establishments for Massage and Special Treatment)

No new licence was granted under the Act during 1961.

During the year the medical staff paid fourteen visits to the establishments registered for massage and special treatment.

Old People's Welfare

The contributions under this heading made by the members of the staffs of the various sections appear on page 39.

The Town Clerk, as Honorary Secretary of the Old People's Welfare Association reports that "the Meals on Wheels figures for the year 1961 were 34,877, including the Free Christmas Dinner given annually. 250,928 dinners had been delivered at the end of March, 1962, since the scheme commenced in March 1948."

Funeral Arrangements

Arrangements continued with regard to burials within the terms of the National Assistance Act, 1948.

Legislation

The following Acts of Parliament came into operation during 1961:

Public Health Act, 1961
Housing Act, 1961
Factories Act, 1961
Land Drainage Act, 1961
Consumer Protection Act, 1961
Rivers (Prevention of Pollution) Act, 1961.
Home Safety Act, 1962

Medical Examinations

During the year the medical staff carried out 183 examinations of Borough Council employees in respect of the Superannuation and Sick Pay Schemes.

Disinfection

The Council continued to provide facilities for steam disinfection for the Chingford and Leyton Corporations.

General

The Borough Engineer and Surveyor contributes the following information:-

<u>Public Conveniences</u>	<u>Erected</u>
Forest Road, Lloyd Park - Men and Women ..	1922
Forest Road, Higham Hill Road - Men and Women	1923
Wood Street - Men and Women	1933
Oak Hill - Men and Women	1949
Crooked Billet - Men and Women	1951
Tamworth Avenue - Men and Women	1952
Larks Hall Road - Men and Women	1953
St. James Street Car Park - Men and Women ..	1955
Selborne Road - Men and Women	1957
Willow Walk - Men and Women	1961

Free washing facilities continued to be available by the supply of soap and paper towels at the Public Conveniences.

A charge of 2d. continues for the issue of cloth towels.

No charge is made for the use of public conveniences.

Cremation

Facilities for cremation are available at the City of London Crematorium at Manor Park and also the Manor Park Crematorium, Manor Park.

Inquests and Post Mortems

	Walthamstow	Others	Total
Post Mortems only ..	127	237	364
Post Mortems and Inquests	13	44	57
Inquests only ..	1	74	75
	<u>141</u>	<u>355</u>	<u>496</u>

Rainfall

The annual rainfall at the Ferry Lane Station was 23.82 inches In 1960 it was 28.57

Flooding

Flooding occurred 3 or 4 times during the year. There was no severe storm that would lead to widespread flooding of the Borough.

C. - PREVALENCE OF AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

General. - The following table shows the ward incidence of the various infectious diseases which are referred to in later pages of the report.

Disease	St. James Street	High Street	Hoe Street	Wood Street	Hale End	Higham Hill	Total
Scarlet Fever ..	28	18	25	16	19	21	127
Whooping Cough ..	8	5	2	4	13	7	39
Measles	108	149	223	218	380	297	1,375
Diphtheria	-	-	-	-	-	-	-
Pneumonia	3	9	8	11	10	12	53
Meningococcal Infection	-	-	1	-	-	-	1
Acute Poliomyelitis Paralytic	-	-	-	-	-	-	-
Non-Paralytic ..	-	-	-	-	-	-	-
Acute Infective Encephalitis ..	-	-	-	-	-	-	-
Post Infectious Encephalitis ..	-	-	-	-	-	-	-
Dysentery	5	2	1	2	29	5	44
Ophthalmia Neonatorum	1	-	-	-	-	-	1
Puerperal Pyrexia	1	-	3	97	1	1	103
Smallpox	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	1	1
Typhoid Fever ..	-	-	-	-	-	-	-
Food Poisoning ..	-	2	4	1	4	15	26
Erysipelas	2	1	1	1	1	2	8
Malaria	-	-	-	-	-	-	-
Tuberculosis Respiratory ..	4	6	7	6	11	8	42
Meninges and Central Nervous System	-	-	-	-	-	1	1
Other Forms ..	4	-	-	1	1	1	7
Totals, 1961	164	192	275	357	469	371	1,828
Totals, 1960	128	103	93	154	210	270	958

FOOD POISONING

Twenty-six cases were notified and in addition two cases were 'ascertained' i.e. became known otherwise than by notification, by following up notified cases. None was fatal.

There was one small familial 'outbreak', in which the infecting agent was *Salmonella Typhi-murium*.

Four of the single cases were due to *Salmonella Typhi-murium*, and in one case the infecting agent was *Salmonella Welternden*.

Poliomyelitis

No case of Poliomyelitis was notified during the year.

Tuberculosis

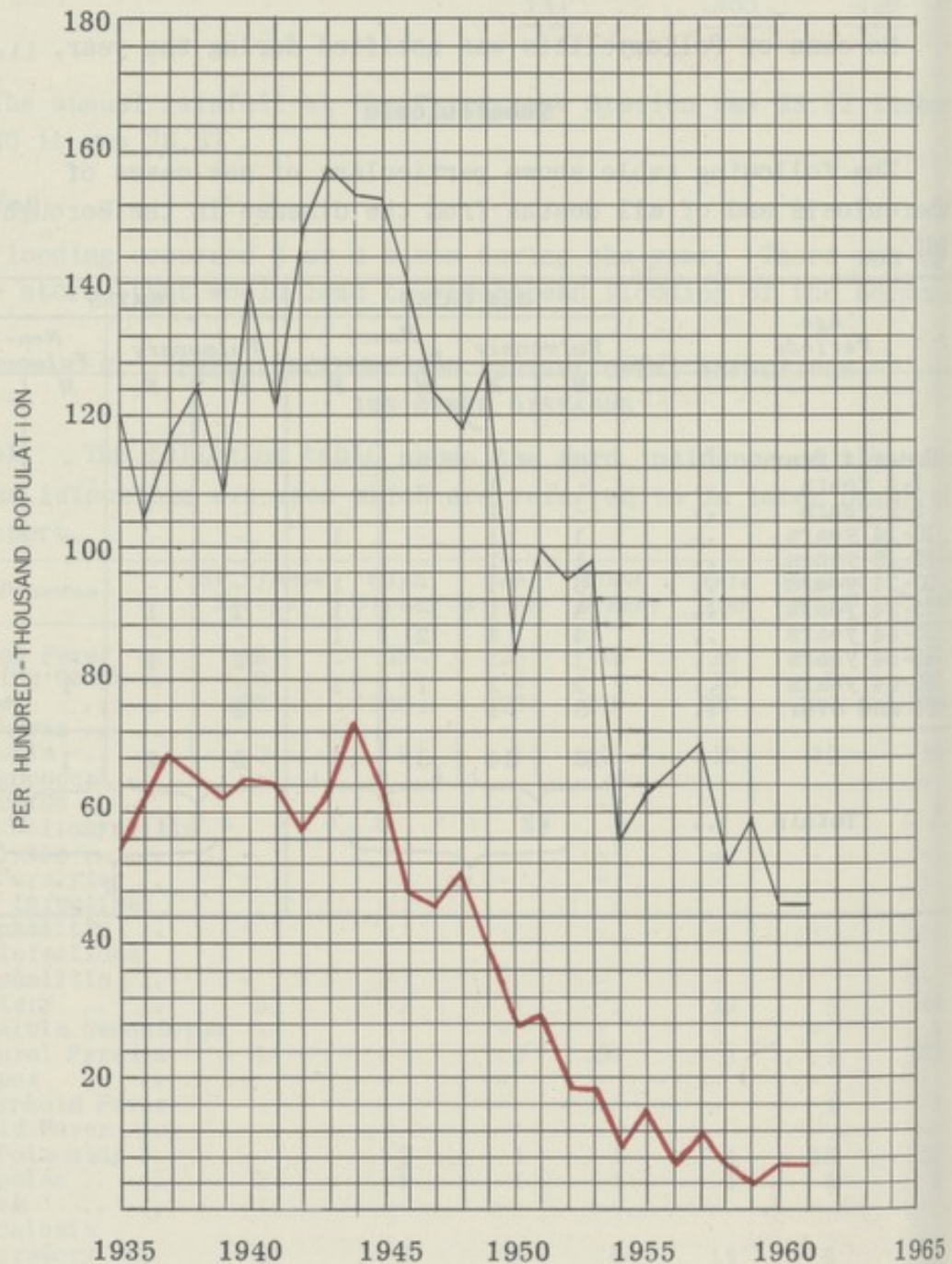
The following table shows particulars of new cases of tuberculosis and of all deaths from the disease in the Borough during 1961: -

Age Periods		NEW CASES				DEATHS			
		Pulmonary		Non- Pulmonary		Pulmonary		Non- Pulmonary	
		M	F	M	F	M	F	M	F
Under 1 year	..	-	-	-	-	-	-	-	-
1-4 years	..	-	1	-	-	-	-	-	-
5-9 years	..	-	1	-	-	-	-	-	-
10-14 years	..	1	1	-	1	-	-	-	-
15-19 years	..	1	1	-	-	-	-	-	-
20-24 years	..	6	1	-	1	-	-	-	-
25-34 years	..	4	1	-	1	1	1	-	-
35-44 years	..	4	4	2	1	-	-	-	-
45-54 years	..	1	1	-	-	2	1	-	-
55-64 years	..	3	2	1	1	-	-	1	-
65 and over	..	8	1	-	-	2	-	-	-
		28	14	3	5	5	2	1	-
		42		8		7		1	
Totals ..		50				8			

TUBERCULOSIS-NOTIFICATION AND DEATH RATES

The following graph shows the trend of notification of tuberculosis since 1935, and of deaths from tuberculosis. The fall in the latter results in the survival (and increased longevity due to new methods of treatment) of many infective patients. i.e., an increase in the infecting pool.

Notifications of tuberculosis (all forms) in persons of all ages are shown in black, and deaths from tuberculosis (all forms) in persons of all ages are shown in red.



D. SANITARY CIRCUMSTANCES OF THE AREA

Mr. W. Richards, Chief Public Health Inspector, reports as follows:-

Public Health Inspection of the Area

During the year 572 Intimation Notices were served; 123 were in respect of business premises and 449 related to defects in private houses. Of the latter figure, 324 were complied with without resort to statutory procedure. These notices required the carrying out of various repair works and resulted in better housing conditions and improved conditions in factories.

It was found necessary to institute legal proceedings against owners for non-compliance with Abatement Notices served in respect of fourteen properties. An Order, of twenty-eight days, was made in one case; one case was adjourned sine die with costs of £2.2s.0d. and in twelve cases proceedings were withdrawn as the works were completed before the date of hearing.

Large numbers of food premises and various other types of premises were inspected and various works were carried out to these premises. These works resulted in improved hygienic conditions.

Smoke Abatement

Observations in respect of smoke nuisances from premises amounted to 92. Investigations were carried out in all cases and steps taken to abate the nuisance. New boiler plant was installed in some factories and improvements effected in others.

Atmospheric pollution instruments are in operation, for measurement of sulphur in the atmosphere, at the Sir George Monoux Grammar School, in Willow Walk, in Blackhorse Lane and at the Woodford County High School. The recordings of the above instruments are similar to those obtained by adjacent authorities and are lower than those given for Central London. An instrument for measuring smoke pollution is in operation at the Town Hall. Daily readings are taken and the figures obtained are in milligrams of solid matter per 100 cubic metres of air.

Smoke Control Areas

The detailed survey in respect of Smoke Control Area No. 2 was completed during the year, and the Order was confirmed by the Minister of Housing and Local Government. This Order will come into operation next year. By the end of the year a number of fireplaces in this area had been converted to burn smokeless fuels.

The detailed survey in respect of Smoke Control Area No. 3 was completed in October and the Council made a Smoke Control Order in respect of this area in November. This Order was submitted to the Minister of Housing and Local Government for confirmation.

The inspection of dwelling houses in Smoke Control Area No. 4 was commenced in October and was still proceeding at the end of the year.

The coloured map of the phased programme appears facing this page

Verminous Premises

The number of dwelling houses reported to be infested with vermin remains comparatively small.

Seventy-nine rooms were disinfected and insecticides were issued free of charge to eighty-four tenants.

Swimming Baths and Pools

There are two public swimming baths and three school swimming baths within the Borough. The water used in these baths is obtained from the Metropolitan Water Board mains and is recirculated and treated by filtration plants consisting of pressure filters, chlorination plants and in some cases aeration plants. The water in the baths is changed as often as necessary, depending on the amount of use.

Samples of water from all these baths are taken at frequent intervals for both chemical and bacteriological examination. All samples taken during the year indicated that the water was suitable for bathing purposes.

The Walthamstow Baths Manager submits the following information:-

From January 1st to December 31st the Public Baths were open on 294 days. The number of Swimming Bath bathers was 163,289 whilst 84,024 hot baths were provided. 7,871 Pensioners took advantage of the free bathing facilities. Swimming attendances continue to increase. Sampling was carried out with very good results.

Sewerage

Arrangements for sewerage and sewage disposal in the district are reasonably adequate.

Hairdressers

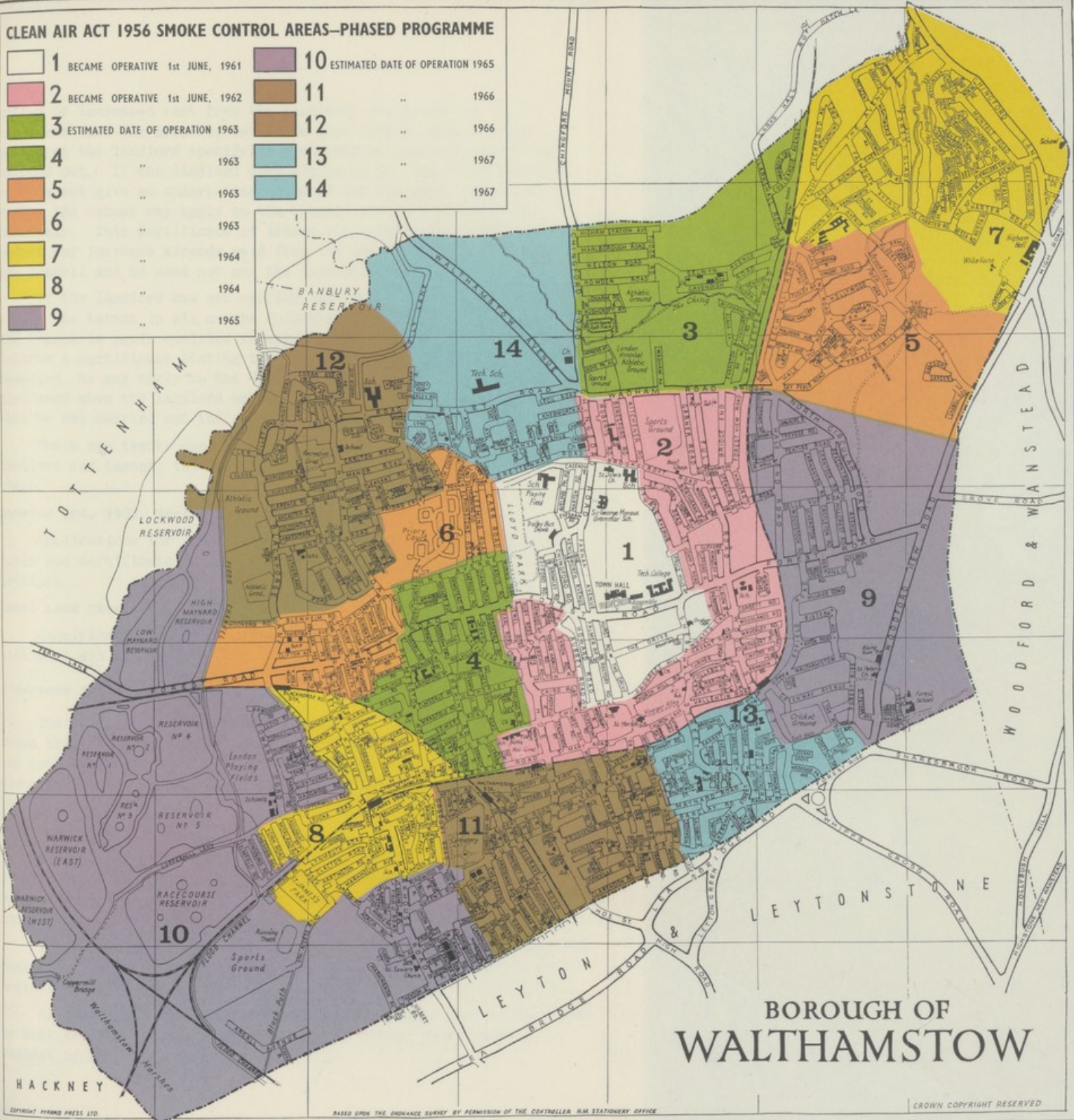
Eighty-two premises are registered under the Walthamstow Corporation Act, 1956. Inspections of these premises were carried out under the Bye-Law requirements and most were found to be in a reasonable condition.

Rent Act, 1957

This Act empowers the landlords of dwelling houses to increase rent provided the property is in good repair. On receipt of a

CLEAN AIR ACT 1956 SMOKE CONTROL AREAS—PHASED PROGRAMME

1	BECAME OPERATIVE 1st JUNE, 1961	10	ESTIMATED DATE OF OPERATION 1965
2	BECAME OPERATIVE 1st JUNE, 1962	11	" 1966
3	ESTIMATED DATE OF OPERATION 1963	12	" 1966
4	" 1963	13	" 1967
5	" 1963	14	" 1967
6	" 1963		
7	" 1964		
8	" 1964		
9	" 1965		



BOROUGH OF
WALTHAMSTOW

PLAN AIR ACT 1958 SMOKE CONTROL AREA PHASED PROGRAMME

1	10	11	12	13	14	15	16	17	18	19
1	2	3	4	5	6	7	8	9	10	11
12	13	14	15	16	17	18	19	20	21	22
23	24	25	26	27	28	29	30	31	32	33
34	35	36	37	38	39	40	41	42	43	44
45	46	47	48	49	50	51	52	53	54	55
56	57	58	59	60	61	62	63	64	65	66
67	68	69	70	71	72	73	74	75	76	77
78	79	80	81	82	83	84	85	86	87	88
89	90	91	92	93	94	95	96	97	98	99
100	101	102	103	104	105	106	107	108	109	110
111	112	113	114	115	116	117	118	119	120	121
122	123	124	125	126	127	128	129	130	131	132
133	134	135	136	137	138	139	140	141	142	143
144	145	146	147	148	149	150	151	152	153	154
155	156	157	158	159	160	161	162	163	164	165
166	167	168	169	170	171	172	173	174	175	176
177	178	179	180	181	182	183	184	185	186	187
188	189	190	191	192	193	194	195	196	197	198
199	200	201	202	203	204	205	206	207	208	209
210	211	212	213	214	215	216	217	218	219	220
221	222	223	224	225	226	227	228	229	230	231
232	233	234	235	236	237	238	239	240	241	242
243	244	245	246	247	248	249	250	251	252	253
254	255	256	257	258	259	260	261	262	263	264
265	266	267	268	269	270	271	272	273	274	275
276	277	278	279	280	281	282	283	284	285	286
287	288	289	290	291	292	293	294	295	296	297
298	299	300	301	302	303	304	305	306	307	308
309	310	311	312	313	314	315	316	317	318	319
320	321	322	323	324	325	326	327	328	329	330
331	332	333	334	335	336	337	338	339	340	341
342	343	344	345	346	347	348	349	350	351	352
353	354	355	356	357	358	359	360	361	362	363
364	365	366	367	368	369	370	371	372	373	374
375	376	377	378	379	380	381	382	383	384	385
386	387	388	389	390	391	392	393	394	395	396
397	398	399	400	401	402	403	404	405	406	407
408	409	410	411	412	413	414	415	416	417	418
419	420	421	422	423	424	425	426	427	428	429
430	431	432	433	434	435	436	437	438	439	440
441	442	443	444	445	446	447	448	449	450	451
452	453	454	455	456	457	458	459	460	461	462
463	464	465	466	467	468	469	470	471	472	473
474	475	476	477	478	479	480	481	482	483	484
485	486	487	488	489	490	491	492	493	494	495
496	497	498	499	500	501	502	503	504	505	506
507	508	509	510	511	512	513	514	515	516	517
518	519	520	521	522	523	524	525	526	527	528
529	530	531	532	533	534	535	536	537	538	539
540	541	542	543	544	545	546	547	548	549	550
551	552	553	554	555	556	557	558	559	560	561
562	563	564	565	566	567	568	569	570	571	572
573	574	575	576	577	578	579	580	581	582	583
584	585	586	587	588	589	590	591	592	593	594
595	596	597	598	599	600	601	602	603	604	605
606	607	608	609	610	611	612	613	614	615	616
617	618	619	620	621	622	623	624	625	626	627
628	629	630	631	632	633	634	635	636	637	638
639	640	641	642	643	644	645	646	647	648	649
650	651	652	653	654	655	656	657	658	659	660
661	662	663	664	665	666	667	668	669	670	671
672	673	674	675	676	677	678	679	680	681	682
683	684	685	686	687	688	689	690	691	692	693
694	695	696	697	698	699	700	701	702	703	704
705	706	707	708	709	710	711	712	713	714	715
716	717	718	719	720	721	722	723	724	725	726
727	728	729	730	731	732	733	734	735	736	737
738	739	740	741	742	743	744	745	746	747	748
749	750	751	752	753	754	755	756	757	758	759
760	761	762	763	764	765	766	767	768	769	770
771	772	773	774	775	776	777	778	779	780	781
782	783	784	785	786	787	788	789	790	791	792
793	794	795	796	797	798	799	800	801	802	803
804	805	806	807	808	809	810	811	812	813	814
815	816	817	818	819	820	821	822	823	824	825
826	827	828	829	830	831	832	833	834	835	836
837	838	839	840	841	842	843	844	845	846	847
848	849	850	851	852	853	854	855	856	857	858
859	860	861	862	863	864	865	866	867	868	869
870	871	872	873	874	875	876	877	878	879	880
881	882	883	884	885	886	887	888	889	890	891
892	893	894	895	896	897	898	899	900	901	902
903	904	905	906	907	908	909	910	911	912	913
914	915	916	917	918	919	920	921	922	923	924
925	926	927	928	929	930	931	932	933	934	935
936	937	938	939	940	941	942	943	944	945	946
947	948	949	950	951	952	953	954	955	956	957
958	959	960	961	962	963	964	965	966	967	968
969	970	971	972	973	974	975	976	977	978	979
980	981	982	983	984	985	986	987	988	989	990
991	992	993	994	995	996	997	998	999	1000	1001

notice of increased rent from the landlord, the tenant, if he considers that the property is not in good repair, must serve a notice on the landlord specifying the works he considers should be carried out. If the landlord does not carry out the works specified or does not give an undertaking to carry out the work, within six weeks, the tenant may apply to the Council for a Certificate of Disrepair. This Certificate if issued will enable the tenant to deduct any increase already paid from the date of the application to the Council and he need not pay the increased rent demanded.

If the landlord has not carried out the undertaking given by him to the tenant in six months following the date of the undertaking, the tenant is again entitled to make a deduction in his rent. If he desires a certificate stating that the undertaking has not been remedied, he may apply to the Council for same. This Certificate is also used when the landlord makes application to the Council stating that he has carried out the undertaking.

There are twenty-one forms specified by the Act for use between landlord and tenant; the Council may be involved in thirteen of these.

Housing Act, 1936, Section 62

Applications for "permitted number" were received from landlords and certificates issued during the year respecting eight lettings.

Local Land Charges

Enquiries relating to outstanding sanitary notices were dealt with in 1,855 cases.

Clearance Areas

The Council are purchasing large numbers of dwelling houses which are included in the 1960-65 slum clearance programme. When all the dwellings in a proposed clearance area have been purchased by the Council, the tenants will be rehoused, the dwellings demolished and the site redeveloped.

Milk Supplies

During the year seventy-eight samples of milk were taken and submitted to the Counties Laboratories for bacteriological examination, including Phosphatase, Methylene Blue and Turbidity tests.

These samples of milk were mainly taken from roundsmen during the course of delivery, or on arrival at schools. They include the bi-monthly sampling of the two dairymen holding Pasteuriser's Licences.

All milk sold within the Borough must be either tuberculin tested or heat treated. Licences to sell milk by retail were issued in respect of a number of premises.

Ice Cream

There are five manufacturers of ice cream within the district and a large number of premises for the sale of ice cream. These premises are licensed and are subject to regular inspection. A high standard of hygiene is maintained.

Samples of ice cream are taken for both chemical and bacteriological examination. Those taken for chemical examination complied with the legal requirements for fat content etc. and samples taken for bacteriological examination were mostly of a high standard.

A number of samples of iced lollies were also taken for bacteriological examination and most of these were of a reasonable standard.

Where reports showed that any of these samples were unsatisfactory, the manufacturer was informed and further check samples were taken as soon as possible. If the manufacturer was outside the district, copies of the reports were sent to the local authority of the district where the article was manufactured.

Meat and other Foods

There are no slaughterhouses in operation in the Borough.

A considerable amount of various types of food was inspected, a certain quantity of which was condemned as unfit for human consumption.

Sampling of Food for Bacteriological Examination

Various types of food were sampled including shellfish, jellied eels, cooked meats, cream, corned beef and meat pies. Most of these samples were found to be in a satisfactory condition although some improvement could be effected in the case of cooked meats.

Food and Drugs Act 1955

During the year, 104 samples were submitted to the Public Analysts for chemical examination.

Chemical and Bacteriological Examination of Foods

Chemical examinations of food samples are carried out by the Public Analysts, Dr. J.H. Hammence, F.R.I.C. and Mr. P.S. Hall, A.R.I.C., of 20, Eastcheap, London, E.C.3. and bacteriological examinations by the Counties Public Health Laboratories, Thresh House, Verulam Street, Gray's Inn Road, London, W.C.1.

Food Hygiene (General) Regulations, 1960

A reasonably high standard continues to be maintained in the food premises within the Borough. It was found necessary to serve notices under the Regulations in a few cases, most of which had been complied with by the end of the year.

The conditions laid down in the Regulations are being maintained throughout the district.

There are two dairy premises in the area registered under the Milk and Dairies Regulations.

Condemned food is destroyed at the Council's Depot at Low Hall Farm. The only exception to this is where sufficient meat is condemned and is worth salvaging, and it is then disposed of through reliable sources, being used mainly for soap manufacture.

Legal Proceedings

The following action was taken during 1961:

Food Hygiene Regulations, 1955/1960

Dirty condition of shelves in food premises (1 case). Court awarded Penalty of £15.

Smoking on food premises (5 cases). One case, Court awarded Penalty of £15, £5 Penalty was given in two cases with £1.10s.0d. costs each, £2 Penalty was awarded in another case with £1.10s.0d. costs, and one case was withdrawn.

Smoking whilst handling open food (1 case). Court awarded Penalty of £5 and £1.10s.0d costs.

Absence of nail brushes (2 cases)	} Penalty of £1 in each case was awarded, with £1.10s.0d costs.
Absence of soap (2 cases)	
Absence of towels (1 case)	
Absence of water (1 case)	
Dirty condition of sink (1 case)	

In another case of absence of water and towels, Penalty of 10s. was awarded on each account and 10s.6d. costs.

Food and Drugs Act 1955, Sections 2, 8 and 106

One case of selling food unfit for human consumption was given an Absolute Discharge with £3.3s.0d. costs.

One case of selling food not of the substance demanded was given an Absolute Discharge with £3.3s.0d. costs.

One case of selling "thick cream" which was sub-standard was awarded Penalty of £10.

Milk and Dairies (General) Regulations 1959, Regulation 27 (1)

One case of a dirty milk bottle was given an Absolute Discharge and 4s. costs.

Rag Flock and other filling materials Act, 1951

No applications for approval were received during the year and all premises registered or licenced under the Act were inspected.

Diseases of Animals Acts

Swine Fever (Infected Areas) Order, 1953

No licences were issued during the year

Fowl Pest Order, 1936

No Order was issued during the year

Foot and Mouth Disease Orders

No Order was issued during the year

Pet Animals Act, 1951.

Seventeen premises are licensed in the Borough for the sale of pet animals. All licences are renewed annually and all premises were inspected during the year.

Prevention of Damage by Pests Act, 1949.

The agreed scheme of work has continued and the two trained Operatives have been fully engaged under the general supervision of the Public Health Inspectors.

E - STATISTICS**Public Health Inspection of the Area**

No. of inspections made	No. of nuisances remedied	No. of complaints received	No. of Intimation Notices		No. of Statutory Notices		Total visits
			Served	Complied with	Served	Complied with	
23,419	2,783	1,783	572	649*	125	134*	30,153

* Includes notices outstanding from previous year

The following table shows the nature of work executed and improvements effected during the year:

Drains tested, 332; Drains reconstructed or repaired, 176; Drain obstructions removed, 86; Drains, means of access provided, 12; Drains, ventilation provided or improved, 13; Soil pipes renewed or repaired, 74; Rainwater pipes repaired or renewed, 55; Roofs repaired or renewed, 222; Gutterings repaired or renewed, 137; W.C. pans and traps provided, 102; W.C's repaired or cleansed, 104; W.C's light and ventilation improved, 5; Gully traps provided, 21; Waste pipes repaired or renewed, 38; New sinks provided, 20; Stoves and firegrates repaired or renewed, 22; Water supply re instated, 14; Yard and forecourt pavings repaired, 48; Dirty houses cleansed, 5; Dirty rooms cleansed, 26; Floors repaired, 105; Ventilation under floors provided or improved, 25; Dampness remedied, 282; Offensive accumulations removed, 17; Manholes repaired or resealed, 77; Miscellaneous repairs, 725; Animals improperly kept, removed, 3.

Infectious Diseases

Visits to premises, 27;

Disinfections

Rooms disinfected, 14; Articles disinfected, 4,381; Articles destroyed, 15.

Special Premises

								<i>Number</i>	<i>Visits paid</i>
Factories (a)	Non-power	..	..	..	..	..	..	31	62
	(b) Power	..	..	..	..	..	..	481	496
	(c) Other premises	..	..	..	..	..	..	25	2
Outworkers		..	..	..	..	..	..	471	471
Butchers		..	..	..	..	..	..	86	231
Bakers and Shops		..	..	..	..	..	..	43	82
Fishmongers, Fryers and Curers		..	..	..	..	..	..	34	100
Cafes and Caterers		..	..	..	..	..	..	93	355
Grocers		..	..	..	..	..	..	231	580
Greengrocers		..	..	..	..	..	..	79	165
Ice Cream Manufacturers		..	..	..	..	..	..	5	65
Ice Cream Vendors		..	..	..	..	..	..	384	258
Dairies		..	..	..	..	..	..	2	25
Milksellers		..	..	..	..	..	..	132	204
Laundries		..	..	..	..	..	..	1	7
Ladies' Hairdressers		..	..	..	..	..	..	37 (Com- bined)	37
Gentlemen's Hairdressers		..	..	..	..	..	..	31 14)	45
Rag Dealers		..	..	..	..	..	..	3	4
School Kitchens		..	..	..	..	..	..	20	88
Street Stalls		..	..	..	..	..	..	161	361
Stables		..	..	..	..	..	..	1	3
Schools		..	..	..	..	..	..	61	34
Public Houses		..	..	..	..	..	..	38	57

Smoke Abatement

Readings from atmospheric pollution instruments for the year are as follows: (the figures given are in milligrams of sulphur per day).

	<i>Jan:</i>	<i>Feb:</i>	<i>March</i>	<i>April</i>	<i>May</i>	<i>June</i>
Sir George Monoux Grammar School	2.6	2.7	2.1	1.6	0.93	0.86
Willow Walk site	1.7	1.8	1.8	1.5	0.89	0.56
Woodford County High School	1.6	1.4	1.5	0.81	0.54	0.55
Blackhorse Lane site	2.6	3.0	2.6	1.2	0.71	0.90
	<i>July</i>	<i>Aug:</i>	<i>Sept:</i>	<i>Oct:</i>	<i>Nov:</i>	<i>Dec:</i>
Sir George Monoux Grammar School	0.65	0.70	1.3	1.1	2.0	2.6
Willow Walk site	0.57	0.58	0.86	1.4	1.8	2.1
Woodford County High School	0.43	0.44	0.66	0.86	1.3	1.5
Blackhorse Lane site	0.56	0.61	1.5	1.8	2.1	2.4

The above figures are similar to those obtained by adjacent authorities and are lower than those given for Central London, the highest figures for Central London being 7.2.

Rent Act, 1957

The following action was taken under the Act during 1961:

Part I - Applications for Certificates of Disrepair

(1)	Number of applications for certificates	19
(2)	Number of decisions not to issue certificates.. .. .	-
(3)	Number of decisions to issue certificates	
	(a) in respect of some but not all defects	10
	(b) in respect of all defects	9
(4)	Number of undertakings given by landlords under paragraph 5 of the First Schedule	9
(5)	Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule.. .. .	-
(6)	Number of certificates issued	10

Part II - Applications for Cancellation of Certificates

(7)	Number of applications by landlords to Local Authority for cancellation of certificates	15
(8)	Number of objections by tenants to cancellation of certificates	1
(9)	Number of decisions by Local Authority to cancel in spite of tenant's objection	-
(10)	Number of certificates cancelled by Local Authority ..	12

In addition to the above, fifteen applications were received from landlords and tenants for certificates as to remedying, or failing to remedy, the defects set out on the undertaking given by the landlord. Of the fifteen applications, thirteen certificates were issued and the remainder (2) were not granted.

As a result of the regular periodical visiting of the above premises, the following works were carried out:

Butchers - Cleansings, 11; Accumulations removed, 2; New bins provided, 7; W.C's repaired and cleansed, 1; Other improvements, 16; Floors repaired and ventilated, 1.

Bakers - Cleansings, 4; Floors repaired, 2; Other improvements, 7

Fishmongers - Cleansings, 1; Accumulations removed, 3; Other improvements, 3.

Cafes and Caterers - Cleansings, 35; Floors repaired, 4; Kitchen light and ventilation improved, 3; Other improvements, 31.

Grocers - Store rooms cleansed, 7; Washing accommodation improved, 4; Other improvements, 18.

Greengrocers - Store rooms cleansed, 10; Washing accommodation improved, 1; Other improvements, 10.

Ice Cream Manufacturers and Vendors - Cleansings, 3; Improvements, 3;

Hairdressers - Improvements, 2.

Dairies and Milksellers - Cleansings, 2; Fittings and other improvements, 1.

Laundries - Cleansings, 3.

School Kitchens - Improvements, 1.

Street Traders - Stalls improved, 1.

Public Houses - Cleansings, 5; Hot water supplied, 1.

HOUSING

The Borough Architect, F.G. Southgate Esq., A.R.I.B.A., A.M.T.P.I. has kindly contributed the following in regard to statistics and improvement grants:-

Houses completed by the Local Authority

1961

Hoe Street Ward	.. .. .	76 Flats	12 Houses
St. James Street Ward	.. .. .	-	-
Higham Hill Ward	.. .. .	-	-
High Street Ward	.. .. .	-	-
Hale End Ward	.. .. .	6 Flats	
Wood Street Ward	.. .. .	83 Flats	
		165 Flats	12 Houses

Houses completed by Private Enterprise

Hoe Street Ward	.. .. .	2 Flats	2 Houses
St. James Street Ward	.. .. .	-	-
Higham Hill Ward	.. .. .	6 Flats	
High Street Ward	.. .. .		1 House
Hale End Ward	.. .. .	11 Flats	10 Houses
Wood Street Ward	.. .. .		4 Houses
		19 Flats	17 Houses

Note: All were permanent houses and flats

In addition to the main building programme, improvements and conversions have been carried out at a number of Council owned properties.

Improvement Grants

Applications received from owner/occupiers:-

Discretionary	122
Standard	106

Total number of grants and amounts approved by Council to owner/occupiers:

Discretionary	127	£30,466
Standard	35	£ 3,890

Applications received from Warner Estate Ltd.

Discretionary	57
---------------	----

Total number of grants and amounts approved by Council to Warner Estate Ltd.

Discretionary	50	£ 9,840
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Summary

Total number of applications

Discretionary	179
Standard	106

Total number of grants:-

Discretionary	177
Standard	35

Total amount of grants:-

Discretionary	£40,306
Standard	£ 3,890

INSPECTION

The Chief Public Health Inspector reports as follows:-

I. Inspection of dwelling houses during the year:-

- | | | |
|---------|--|-------|
| (1) (a) | Total number of dwelling houses inspected for housing defects (under the Public Health or Housing Acts) | 1,646 |
| (b) | Number of inspections made for the purpose | 4,422 |
| (2) (a) | Number of dwelling houses (included under sub-head (1) above) which are inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 | 62 |
| (b) | Number of inspections made for the purpose | 105 |
| (3) | Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (N.B. These comprise individual unfit houses) | 13 |
| (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 | 449 |

II. Unfit houses closed:-

(1)	Under Sections 16(4), 17(1) and 35(1), Housing Act, 1957	.. .. .	13
(2)	Under Sections 17(3) and 26, Housing Act, 1957		-
(3)	Parts of buildings closed under Section 18, Housing Act 1957	.. .. .	

III. Unfit houses made fit and houses in which defects were remedied:-

(1)	After informal action by Local Authority	324 *
(2)	After formal notice under (a) Public Health Acts	134
	(b) Sections 9 and 16, Housing Act, 1957	2
(3)	Under Section 24, Housing Act, 1957	-

* including those notices outstanding from previous years

General

Mr. C.W. Rayner, A.I.Hsg., the Council's Housing Manager has kindly contributed the following details of rehousing carried out by the Housing Department in 1961:-

No. of new properties made available for letting	177
Acquired	157
Normal vacancies	116
Nominations to private landlords	49
New properties at Canvey	45
New properties at Billericay	161
Total ..	<u>705</u>

Families rehoused:-

1-bedroom group	..	..	..	..	..	..	..	202
2-bedroom group	..	..	..	..	..	..	..	241
3-bedroom group	..	..	..	..	..	..	..	235
4-bedroom group	..	..	..	..	..	..	..	27
					Total	..		705

Property under management at December 1961:-

Pre-1939 houses and flats	1,613
New houses and flats	2,969
Properties at Canvey Island	157
Properties at Billericay	308
Prefabricated bungalows	102
Properties converted into flats	287
Properties improved	234

Properties acquired for improvement and conversion ..	556
Properties for Clearance and Demolition	114
Requisitioned dwellings	-
Halfway houses	4
General Properties	30
Commercial Properties	90
Garages	907
Total ..	<u>7,371</u>

The number of families rehoused in New Towns during 1961 was 62.

The following extracts are taken from the Annual Report of the Housing Management Committee:-

Rehousing - During 1961 the Lettings Sub-Committee considered reports dealing with individual cases submitted in accordance with the Conditions of the Points Scheme:-

*Conditions
of
Points Scheme*

'C'	Families living with relatives	48
'D'	Families living apart	5
'E'	Irregular overcrowding	60
'K'	Three or more families (relatives) in house	-
'H'	Transfer of priority housing	-
'J'	Special cases	52
'J'	Rehousing subject to nomination	36
M.O.H.	Medical recommendations (T.B.)	6
M.O.H.	Cases for consideration	6
	Special requests for emergency accommodation	<u>41</u>
	Total ..	<u>254</u>

MEDICAL CASES

During 1961, six cases claiming rehousing priority for tuberculosis were investigated and reported upon. Of these six cases were added to the list.

The position at the end of 1961 was as follows:-

	<i>Class 1</i>	<i>Class 2</i>	<i>Class 3</i>	<i>Class 4</i>	<i>Total</i>
On list at end of 1960	1	2	8	-	11
Added to list during 1961	<u>2</u>	<u>2</u>	<u>1</u>	<u>1</u>	<u>6</u>
	3	4	9	1	17
Rehoused or removed from list during 1961	<u>1</u>	<u>1</u>	<u>-</u>	<u>1</u>	<u>3</u>
On list at end of 1961	2	3	9	-	14

In addition to the tuberculosis cases, fifteen other cases were recorded as needing special consideration on medical grounds and seventy on general grounds.

Inspection and Supervision of Food

Details of Milk Samples taken:

Grade	No. of Samples	Satisfactory Results	Unsatisfactory Results
Pasteurised	44	42	2
Sterilised	6	6	-
Tuberculin Tested Pasteurised	28	27	1
Totals	78	75	3

Milk (Special Designations) Regulations 1960.

As from the 1st January, these Regulations brought into force new forms of licences and period of duration. The following licences are in operation to 31st December, 1965.

Pasteurisers' Licences	2
Dealers' Licences: Tuberculin Tested:	2
Dealers' Pre-packed Milk Licences:	
Sterilised	123
Pasteurised	79
Tuberculin Tested	22

There are no cow-keepers in the district.

The number of Retail Milk Distributors is 132.

Two hundred and four visits were paid to registered premises and a satisfactory standard of cleanliness was maintained.

Ice Cream

Thirty-six applications for registration were received and were dealt with as follows:-

Manufacturer, Transfer	1
Vendors, New	16
Vendors, Transfers	17
Application refused	2

Number on Register at end of year 384

Number of premises used for manufacturing 5

Food Standards (Ice Cream) Order, 1951

Five samples of ice cream were taken and submitted to the Public Analysts who reported the following satisfactory results:

Fat Content

10.0%

10.0%

10.6%

11.4%

11.7%

Bacteriological Examination of Ice Cream

Seventy-nine samples were submitted for examination and for grading in accordance with the provisional test of the Ministry of Health, with the following results:

Grade I	-	53
Grade II	-	19
Grade III	-	2
Grade IV	-	5

Lollies (Various)

Eleven samples were examined for bacterial purity, one being unsatisfactory.

Meat and Other Foods

There are no slaughterhouses in the Borough.

The following is a summary of food surrendered and condemned as being unfit for human consumption. Where possible, the food was salvaged.

317 tins Evaporated Milk	106 tins Salmon
81 tins Full Cream Milk	1 tin Sardines
1 tin Skimmed Milk	56 tins Pilchards
11 tins Cream	1 tin Crab
5 tins Drinking Chocolate	68 tins Fish Cakes
3 tins Coffee	48 tins Lemon Curd
872 tins Soup	26 tins Marmalade
116 tins Baby Foods	23 tins Gherkins
12 tins Junior Foods	64 jars Jam
107 tins Creamed Rice	2 jars Salmon Spread
1 tin Macaroni	23 jars Pickles
1 tin Custard Powder	136 bottles Sauce
90 tins Treacle Pudding	16½ lb. Sausages
3 tins Fruit Pudding	1½ lb. Liver Sausage
68 tins Date Pudding	2¼ lb. Breakfast Sausage
79 tins Christmas Pudding	8½ lb. Plucks
96 tins Mincemeat	30 lb. Ox Tongues
3 tins Curried Beans	81 lb. Ox Liver
685 tins Baked Beans	50 lb. Ox Cheeks
32 tins Butter Beans	5¼ lb. Lambs Tongues
30 tins Beans & Pork	17½ lb. Minced Pork
11 tins Spinach	230 lb. Steak
10 tins Pease Pudding	676 lb. Corned Beef
39 tins Macedoine of Veggies	72 lb. Corned Mutton
1405 tins Peas	438 lb. Luncheon Meat
125 tins Spaghetti	282 lb. Chopped Pork
6 tins Vegetable Salad	19 lb. Cooked Bacon
24 tins Cut Potatoes	13 lb. Ham
39 tins Carrots	362½ lb. Ham (tinned)

12 tins Beetroot	102 lb. Pork (tinned)
133 tins Tomatoes	185½ lb. Pork
9 tins Ravioli	767 lb. Beef
11 tins Meat and Vegetables	11 lb. Veal
3 tins Stew	18 lb. Jellied Veal
33 tins Stewed Steak	14¼ lb. Fruit Pie Filling
29 tins Beef & Dumplings	6¾ lb. Fruit Cocktail
10 tins Meat Pudding	11¼ lb. Tomato Puree
1 tin Steak & Kidney Pie	192 lb. Jam
8 tins Sausages	15½ lb. Confectionery
85 tins Fruit Cocktail	448 lb. - ditto
64 tins Grapefruit Juice	256½ lb. Tapioca
6 tins Pineapple Juice	4 lb. Dried Prunes
19 tins Orange Juice	4½ lb. Apricots
2 tins Lemon Juice	60 lb. Split Peas
40 tins Tomato Juice	28 lb. Potatoes
4 tins Raspberries	207 lb. Biscuits
345 tins Pineapple	213½ lb. Spiced Buns
209 tins Peaches	87 lb. Enriched Bread
4 tins Gooseberries	22 lb. Cocoa Bread
7 tins Cherries	24 lb. Sugar
14 tins Rhubarb	2¾ tons Bananas
48 tins Apricots	7½ stone Cod
18 tins Grapes	1½ stone Haddocks
178 tins Mandarin Oranges	3 stone Whiting
21 tins Grapefruit	8¼ stone Skate
84 tins Plums	72 Sausage Rolls
111 tins Pears	5 Pork Pies
63 tins Prunes	7 Steak & Kidney Pies
48 tins Youngberries	130 Sugar Cakes
2 tins Shrimps	130 Chickens

Shellfish and Jellied Eels

The following samples were taken during the year for bacteriological examination:-

Escallops	..	..	..	1
Cockles	..	..	..	7
Mussels	..	..	..	5
Jellied Eels	..	..	..	10
Whelks	..	..	..	1
Winkles	..	..	..	1

One of these samples was of an unsatisfactory standard and the necessary investigations were carried out.

Cooked Meats

Sampling of these products continued during 1961, eighty-four samples being taken. Twenty-four were classified as unsatisfactory because of bacteriological contamination which occurred during storage and exposure for sale.

Miscellaneous Samples

Twenty-one samples were submitted for bacteriological examination, with the following results:-

		<i>Satisfactory</i>	<i>Unsatisfactory</i>
Creamed Confectionery	6	3	3
" " (Synth)	1	1	-
Dried Milk	2	2	-
Cornflour	1	1	-
Blancmange	6	5	1
Custard	2	2	-
Jelly	3	3	-

Adulteration, etc. - Food and Drugs Act, 1955.

During the year, one hundred and four samples of food and drugs were submitted to the Public Analysts.

Four samples were reported as being unsatisfactory, details respecting same are given below:-

<i>Description of Articles</i>	<i>Result of Analysis</i>	<i>Action taken</i>
Beef Sausages	No declaration of preservatives.	Warning letter
Tapioca	Infected with mould organisms.	Warning letter
Cream	Contained insufficient milk fat to justify description of "Thick Cream"	Prosecution Penalty £10
Pork Sausages	No declaration of preservatives	Warning letter

The following summary gives details of food sampled and results of analyses:-

				<i>No. Satisfactory</i>			<i>No. Unsatisfactory</i>		
				<i>Formal</i>	<i>Informal</i>	<i>Total</i>	<i>Formal</i>	<i>Informal</i>	<i>Total</i>
Milk	..	..	..	8	1	9	-	-	-
Cream	..	..	..	-	3	3	1	-	1
Butter	..	..	..	1	1	2	-	-	-
Margarine	..	..	..	-	3	3	-	-	-
Milk, Evaporated	..	..	..	-	2	2	-	-	-
Coffee	..	..	..	-	2	2	-	-	-
Beer	..	..	..	-	1	1	-	-	-
Whisky	..	..	..	7	-	7	-	-	-
Gin	..	..	..	4	-	4	-	-	-
Cider	..	..	..	-	1	1	-	-	-
Grapefruit Juice	..	..	..	-	1	1	-	-	-
Orange Drink	..	..	..	-	1	1	-	-	-
Glucose Juice	..	..	..	-	1	1	-	-	-
Cornish Cream Ice	..	..	..	1	-	1	-	-	-
Ice Cream	..	..	..	1	3	4	-	-	-
Ice Lolly	..	..	..	1	1	2	-	-	-
Sausage, Pork	..	..	..	4	-	4	1	-	1
Sausage, Beef	..	..	..	2	2	4	1	-	1
Meat, Cooked, Pickled	..	..	..	-	2	2	-	-	-

			No. Satisfactory			No. Unsatisfactory		
			Formal	Informal	Total	Formal	Informal	Total
Pork, Pickled	..	..	1	-	1	-	-	-
Beef, Potted with Butter	..	..	-	1	1	-	-	-
Paste, Chicken Meat ..	..	..	-	1	1	-	-	-
Pate de Foie	..	..	-	1	1	-	-	-
Paste, Fish	..	..	-	1	1	-	-	-
Fish Cakes, Salmon ..	..	..	-	1	1	-	-	-
Jam	..	..	-	1	1	-	-	-
Jelly	..	..	-	3	3	-	-	-
Honey	..	..	-	1	1	-	-	-
Gelantine	..	..	-	1	1	-	-	-
Nutmeg Ground	..	..	-	1	1	-	-	-
Ginger Ground	..	..	-	1	1	-	-	-
Almonds Ground	..	..	-	2	2	-	-	-
Dried Fruit	..	..	-	2	2	-	-	-
Caraway Seed	..	..	-	1	1	-	-	-
Pepper	..	..	-	2	2	-	-	-
Flour	..	..	-	2	2	-	-	-
Powder, Baking	..	..	-	1	1	-	-	-
Powder, Curry	..	..	-	2	2	-	-	-
Cherries	..	..	-	1	1	-	-	-
Pears	..	..	-	2	2	-	-	-
Apples	..	..	-	1	1	-	-	-
Rhubarb	..	..	-	1	1	-	-	-
Rhubarb in Syrup ..	..	..	-	1	1	-	-	-
Tomatoes	..	..	-	1	1	-	-	-
Peas, frozen	..	..	1	-	1	-	-	-
Peas, split	..	..	-	1	1	-	-	-
Pickle, Mustard ..	..	..	-	1	1	-	-	-
Tapioca	..	..	-	-	-	-	1	1
Butterscotch	..	..	-	1	1	-	-	-
Fruit Drops	..	..	-	1	1	-	-	-
Buttered Brazils ..	..	..	-	1	1	-	-	-
Bubble Gum	..	..	-	1	1	-	-	-
Toffee Apple	..	..	1	-	1	-	-	-
Cough Twist	..	..	-	1	1	-	-	-
Chlorodyne	..	..	-	1	1	-	-	-
Saccharin Tablets ..	..	..	-	1	1	-	-	-
Yeast Tablets	..	..	-	1	1	-	-	-
Wincarnis Jelly ..	..	..	-	1	1	-	-	-
Totals			32	68	100	3	1	4

Food Hygiene (General) Regulations, 1960

The following food premises are established in the Borough:-

Butchers, 86; Bakers, 43; Fishmongers, 34; Cafes and Caterers, 93; Grocers, 231; Greengrocers, 79; Milk sellers, 132; Ice Cream Manufacturers, 5; Ice Cream Vendors, 384.

The following inspections were carried out in respect of food premises:

Butchers, 231; Bakers, 82; Fishmongers, 100; Cafes and Caterers, 355; Grocers, 580; Greengrocers, 165; Dairies, 25; Milk sellers, 204; Ice Cream Manufacturers, 65; Ice Cream Vendors, 258.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

	Type of Property				
	Non-Agricultural				Agri-cultural
	Local Authority	Dwelling houses	All other (including business premises)	Total	
I. No. of properties in Local Authority's District	18	34,557	5,572	40,147	4
II. No. of properties inspected as a result of:-					
(a) Notification	11	482	91	584	1
(b) Survey under the Act	-	275	57	332	-
(c) A visit primarily for some other purpose	-	-	-	-	-
III. Total inspections carried out - including re-inspections	113	1,886	430	2,429	1
IV. No. of properties inspected (in Sec. II) which were found to be infested by:-					
(a) Rats Major	1	-	13	14	-
Minor	5	479	81	565	-
(b) Mice Major	-	-	-	-	-
Minor	5	34	17	56	-
V. No. of infested properties (in. Sec. IV) treated by the Local Authority	11	513	111	635	-
VI. Total treatments carried out - including re-treatments ..	-	-	-	-	-
VII. No. of notices served under Sec. 4 of the Act					
(a) Treatment	-	-	-	-	-
(b) Structural Work (i.e. Proofing) ..	-	-	-	-	-
VIII. No. of cases in which default action was taken following the issue of a notice under Sec. 4 of the Act	-	-	-	-	-
IX. Legal Proceedings	-	-	-	-	-
X. No. of 'Block' control schemes carried out ..	1	-	-	-	-

Factories Acts, 1937 & 1959

The following tables show the work carried out under these Acts:-

1. - INSPECTION OF FACTORIES, ETC.

(Including Inspections made by Public Health Inspectors)

Premises (1)	No. on Register (2)	In- Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	31	21	2	-
Factories not included above in which Section 7 is enforced by the Local Authority ..	481	215	6	-
Other premises in which Section 7 is enforced by the Local Authority ..	25	2	-	-
Totals ..	537	238	8	-

2. - DEFECTS FOUND IN FACTORIES, ETC.

Particulars (1)	No. of cases in which defects were found.				
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	Referred by H.M. Inspector (5)	Legal Proceedings Instituted (6)
Want of Cleanliness (Sec.1)	11	8	-	-	-
Overcrowding (Sec.2) ..	-	-	-	-	-
Unreasonable Temp. (Sec.3) ..	-	-	-	-	-
Inadequate Ventilation (Sec.4)	-	-	-	-	-
Ineffective drainage of floors (Sec.6)	-	-	-	-	-
Sanitary Conveniences:-					
(a) Insufficient	3	-	-	-	-
(b) Unsuitable or Defective	19	28	1	1	-
(c) Not separate for Sexes	-	-	-	-	-
Other offences (not including offences relating to Outwork)	1	1	-	-	-
Totals ..	34	37	1	1	-

NUMBER AND TRADES OF OUTWORKERS NOTIFIED

Wearing Apparel (making of)	..	..	..	418
Basket Making	..	..	..	1
Paper Bags	..	..	..	6
Furniture and Upholstery	..	..	..	3
Umbrellas etc.	..	..	..	3
Boxes	..	..	..	14
Brush Making	..	..	..	11
Stuffed Toys	..	..	..	3
Artificial Flowers	..	..	..	9
Cosaques, Christmas Crackers etc.	..	..	..	2
Lampshades	..	..	..	1
Total	..	..	..	471

CARE OF THE ELDERLY

The following are contributions from the various members of the Staff dealing with the services provided for old persons, commencing with details of the Pilot Survey of the elderly in Walthamstow.

pilot survey of the elderly in Walthamstow

In order to form an estimate of the total number of elderly people in Walthamstow, especially those living alone, and to determine the proportion needing help from the Health and Welfare Services a survey has been carried out by the Health Visiting staff.

All houses in streets whose names commence with the letter 'E' were visited representing a random sample of approximately 3 1/3 % of the total inhabited dwellings. Assuming that this sample, drawn from all districts in the town, is fairly representative, the ascertained numbers when multiplied by a factor of 30 gives an approximation of the total population in the various groups.

The survey, although much more time-consuming than was at first expected, has proved most illuminating. Not only will the data obtained be very valuable in planning any extensions to existing services but it has disclosed a number of cases where practical help, needed now, has been provided and a much large number where the need for assistance will almost certainly arise in the near future. All these cases are being kept under observation by means of follow-up visits.

The number of people of pensionable age found by the survey was 368. Of these 252 were women and 116 men. The estimate for the total number of pensioners is therefore $368 \times 30 = 11,040$, representing almost 10 per cent of the population of the town, with a percentage distribution of sex and age groups as follows:-

	60-64	65-70	71-80	81-90	90+		
	yrs.	yrs.	yrs.	yrs.	yrs.		
Women	11.4	21.4	25	9	1.63	=	67.43
Men	-	13.6	13.6	4.1	0.27	=	31.57
							<u>99%</u>

Of the 368 interviewed 97 women (26%) and 16 men (14%) were living alone but an encouraging factor was that in only two cases (both ladies 71-80) were they without effective relatives or friends. Less satisfactory is the fact that only 39 of the 368 were previously known to the health visitors with another 7 who were receiving help from other agencies.

62 (17%) needed help of some kind and 52 were already receiving it, in 33 cases from the Health Department and in 19 from other agencies. As a result of the survey new or additional help was provided for 45 cases, in 34 of them direct by the Department and in 11 through other agencies. (NOTE - Because of this duplication the figures for help provided do not agree with the other totals in the attached table).

After some initial suspicion in a few cases the Health Visitors' enquiries were well received by the old people, many of whom were obviously very pleased indeed to find some-one really concerned about their welfare even when, as often happened, they refused help. An example of this was an old couple living with their bachelor son. Both were over 80 and crippled (wearing calipers) as the result of a street accident. Domestic Help was clearly needed here but so far has been refused.

Some cases are managing only precariously like a lady of 64 whose husband, prematurely retired because of ill-health, is often confined to his bed. She then has to nurse him as well as look after her aged mother (96) who lives alone next door. If she herself is taken ill we shall be faced with a triple problem.

The majority of the old people, however, are hale and hearty and managing their affairs without assistance. An example of sturdy independence and self help is the old lady of 86 who has purchased a typewriter in order to correspond with her married children because she can no longer hold a pen.

In our opinion this kind of survey and the resulting follow-up of cases like those quoted above can make a substantial contribution to the health and welfare of the elderly.

	60-64	65-69	70-74	75-79	80+
Men	11.4	11.4	11.4	11.4	11.4
Women	11.4	11.4	11.4	11.4	11.4
Total	22.8	22.8	22.8	22.8	22.8

Of the 388 interviewed 97 women (25%) and 19 men (5%) were interviewed alone but an accompanying factor was that in only two cases (both ladies 71-80) were they without effective relatives or friends. It is satisfactory in the fact that only 39 of the 388 were previously known to the health visitors with another 7 who were receiving help from other agencies.

62 (17%) needed help of some kind and 52 were already receiving it in 33 cases from the Health Department and in 19 from other agencies. As a result of the survey new or additional help was provided for 45 cases. In 24 of these efforts by the Department and in 21 through other agencies. (NOTE - Because of this duplication the figures for help provided do not agree with the other totals in the attached table.)

SUMMARY
SURVEY OF THE ELDERLY

CONDITIONS							WOMEN					MEN						
							60-64	65-70	71-80	81-90	90+	Total	65-70	71-80	81-90	90+	Total	
LIVING	...	Alone					13	25	42	16	1	97	7	5	4	-	16	
	With {	Spouse					12	34	24	6	-	76	29	34	7	-	70	
		Relative						15	19	25	11	5	75	13	11	4	-	28
		Companion						2	1	1	-	-	4	1	-	-	1	2
TOTALS							42	79	92	33	6	252	50	50	15	1	116	
KNOWN	...	to Health Visitor					6	6	10	5	2	29	5	3	2	-	10	
		to other agency					1	-	2	-	4	7	-	-	-	-	-	
		Previously unknown					35	73	80	28	6	222	45	47	13	1	106	
IN CONTACT WITH ... Relatives (or friends)							42	79	90	33	6	250	50	50	15	1	116	
NEED OF HELP ... Present							5	3	20	11	1	40	2	12	7	-	21	
None at present							37	76	82	22	5	222	48	38	8	1	95	
HELP PROVIDED	...	(By Health Dept.					2	2	10	3	2	19	2	6	6	-	14	
	Already {	(By other agency					2	2	5	3	-	12	1	4	2	-	7	
As result of Survey	{	(By Health Dept.					1	1	14	6	-	22	-	9	3	-	12	
		(By other agency					1	-	8	-	-	9	-	2	-	-	2	
	TOTAL HELPED							6	5	37	12	2	62	3	21	11	-	35

Aged and/or Chronic Sick

Section 47 of the National Assistance Act 1948 gives local authorities power for securing the necessary care and attention for persons who:-

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

If the Medical Officer of Health reports to the local authority after investigation and consideration that he is satisfied that, in the interest of any such person residing in the area, removal from the premises would alleviate suffering or injury to health, or serious nuisance to other persons, the appropriate authority may make application to a court of summary jurisdiction for the area for an order for the removal of such person subject to certain other conditions. Such an order, if granted, remains in force for a period of three months.

This is rather a complicated procedure, but in 1951 the National Assistance (Amendment) Act was introduced to enable local authorities to deal with such cases expeditiously. This enables the Medical Officer of Health or local authority to apply direct to the Court or J.P. for an order for removal which can be put in operation immediately, but in this case the order remains in force for a period of three weeks only.

Experience has proved that it is far better to persuade the person to accept the social services available, or to be admitted to welfare accommodation voluntarily.

During the year, six cases required consideration. One case died at home, one was persuaded to enter an institution for the blind and one was admitted voluntarily to welfare accommodation. The remaining three cases remain at home under close supervision.

An increase of visits to the elderly is partially due to the 'Pilot' survey undertaken by health visitors. Close liaison with hospitals continue, 214 written reports were submitted by the health visitors at the request of different hospitals, relating to elderly people, either before admission to or following discharge from hospital.

The care of the elderly is essentially a human problem and whether home or institutional care is better for any individual person is a matter for consideration and discussion amongst all concerned. Acute distress can be caused to old people when removed from their own homes and near relatives. If they are to have the latter part of their lives without suffering and distress, the care of the elderly must always be a matter of human relationship with their families, their relatives or friends. Whether the relatives

choose to leave it to 'someone else' or face up to the moral responsibility of a frequently exacting nature is a matter of individual choice. Fortunately a great majority of relatives do accept their responsibilities but are not always aware of the help they can be given in the form of equipment, which helps to lighten the burden.

Varying standards of hygiene and habits are frequently a matter of concern to relatives and visitors especially amongst the elderly living alone. Little success will be achieved in trying to enforce personal standards, especially where facilities are limited. Any improvement that may be possible must of necessity be of a gradual and persuasive process. The elderly living alone can quite successfully be allowed to remain happily in their own homes, particularly if they can be persuaded to take advantage of the available services. Very few elderly people accept institutional care readily, even for a temporary period, in order that their relatives or friends can have a holiday. Once they have accepted such an arrangement, it is usually reasonably easy to persuade them to accept again when the occasion arises.

The following are details of two of many similar cases which were dealt with during the year.

Miss D. Aged 90 years -

Lives alone. A niece had been very attentive until severe ill health prevented her from giving further assistance, and an elderly brother although visiting regularly, is unable to give any material help because of his age. Because of her confused state at times, and in spite of all the social services provided, it is doubtful that she could have been allowed to remain in her own home, but for the continual supervision of her neighbour. It was possible after much persuasion, to get her consent for temporary admission to Langthorne Hospital for one month during the neighbour's absence. This acceptance was only made possible on the promise that she would return home.

Mr. S. Aged 70 years -

Brought to the notice of the Health Department by his brother's general practitioner who had arranged admission to hospital for Mr. S's brother. The two brothers had lived together for many years and both were unmarried. Mr. S. had chronic suppurating ulcers of both legs, for which he had been discharged from the army during 1914/18. Apparently he had not worked since, his income being derived from investments made by a relative. Possibly he was supported by his brother who, it was understood, was a retired schoolmaster. This brother died a few days after admission to hospital. Mr. S. had had no medical treatment for many years and was not registered with a general practitioner. He was ultimately persuaded to enter hospital and after five months treatment and rehabilitation was able to return to his own home.

Chiropody in relation to old age

Mr. R.J. King, M.H.Ch.S., Chief Chiropodist, reports as follows:-

The Walthamstow Chiropody Clinic has been serving the Borough since September, 1931. It was the first Municipal Clinic in Essex and the second in the Country. Municipal Chiropody started in Bermondsey in 1930, having been introduced by the late Mr. A.J.R. Bride, B.Sc.F.C.Ch.S., who was at that time the Head of the Chelsea School of Chiropody. Mr. Bride was also consulted by the Walthamstow Health Committee when the Chiropody service was started in this Borough. From its inception the Chiropody service in Walthamstow has provided treatment for all age groups and until 1948 all persons of pensionable age were treated free, without an assessment of means.

Later, domiciliary treatment was provided by the Old People's Welfare Committee of the Borough Council and the work undertaken by a private Chiropodist. Two years ago the County Council assumed responsibility for the Domiciliary Service, which, together with the Clinic Service, is administered by the Walthamstow Health Area Sub-Committee. In Walthamstow we now provide five domiciliary sessions per week and during 1961, 707 treatments were given to patients in their own homes.

The population over 65 years of age forms a large proportion of our patients, (of a total of 22,784 treatments given during the year, 6,992 were for patients in this age group) and in this field professional attention of a specialised nature is called for.

Elderly patients are often troubled with poor circulation and a condition which causes loss of sensation, (Peripheral Neuropathies) thus minor abrasions in treatment, or from trauma, can very quickly lead to ulceration. The degeneration of elastic and muscular tissue, coupled with the disappearance of subcutaneous fat, and atrophy of the fibro fatty pads, plus the fine tissue paper skin, calls for very careful handling and often lengthy treatment time because the dry fine skin is usually coupled with very hard corny conditions and deformed nails. These conditions are worsened by the inability of the patients to reach their feet, and quite often shoes are discarded because of pain, which restricts normal social and domestic activity. Deterioration can be rapid resulting in the patients becoming bed-ridden. With chiropody attention however these patients can, in many cases, be kept ambulant, thus saving hospital beds, or daily visits by the home nurse.

Elderly people who live on their own often bring their problems to the chiropodist, simply because they have no one to talk to at home, and the chiropodist, because of his knowledge of the Health Services generally, is in a position to put them in touch with the appropriate officials. As well as hearing about the problems of our elderly patients, we also hear of their joys, and the chiropodist needs to be a good listener.

The Chiropody Service in Walthamstow is fortunate in having six full time and three part time Chiropodists, and is the only Clinic in Essex with a full staff. This situation has not been brought about by higher salaries or elaborate surgeries, but I think, by the happy relations which exist between the Chiropodists and the other members of the Health Department Staff.

District nursing of the elderly

The primary aim and object of the district nursing service is to provide total nursing care to patients in their own homes, especially the chronic sick and aged, in order to cater for their physical, mental, emotional and social needs; to assist in rehabilitation and to play an important part in health teaching and prevention of disease.

The 'home nurse' or district nurse has had special training to equip her for these highly skilled duties, and has the privilege of right of entry into all homes she visits. She works as right hand to the doctor and the family whenever skilled nursing care is needed in the home. Any responsible person may summon her, in fact she is a public servant, but she may not continue to visit without the family doctor's consent.

In a busy district her day's work may entail twenty calls, giving injections to patients suffering from diabetes, cardiac failure, cerebral degeneration, cancer, respiratory infections, doing dressings for a variety of cases, varicose ulcer, leg ulcers, burns, scalds or any post-operative wounds, to carrying out general nursing care for a variety of conditions from a terminal case of carcinoma, where she may spend two hours daily in the house, to a young child with whooping cough.

Daily reporting of all patients under her care to the family doctor and the Nursing Superintendent is necessary, as well as writing accurate concise reports on the appropriate message form left at the house. Occasionally she will meet the family doctor in order to discuss the progress of the patient and to see if anything more can be done to help him.

General nursing care consists of attending to the daily toilet, including care of the skin, hair, teeth and nails, as well as blanket bathing. This is very important to the comfort of the patient if there is any question of bedsores.

Where long term illness exists, i.e. an advanced stage of carcinoma, the condition calls for all the skill, patience, ingenuity, cheerfulness and moral support which a nurse can give to the patient and his family and this is nursing of the highest order.

It may be necessary for sick room equipment to be borrowed, i.e., special bedstead with hoist, mackintosh sheet, urinal, bed cradle back rest, air cushion, commode etc. The relatives are requested to call for these at the District Nurses Home, or the local authority or

Red Cross. The district nurse has knowledge also of the many services, voluntary and statutory in the area, which can help her patient.

These services are especially useful where a home nurse is visiting an elderly blind person living alone and who must be given constant supervision and total nursing care. Requests are also made through the district nurse for home helps, night sitters-in, chiropody service, meals on wheels etc.

When nursing the heavy, helpless patient it is necessary for the home nurse to know the art of lifting without incurring the occupational hazard of a slipped disc. In these cases a mechanical hoist may be provided and the relatives taught how to operate this single handed.

The home nurse plays a vital part in the attempt to rehabilitate a patient under her care recovering from a stroke, aiming to bring the muscles back into working condition. This can only be achieved by a gentle approach on her part giving helpful suggestions as well as listening to the patient with a sympathetic ear, at the same time encouraging him to talk freely. For his part, the patient realises he is an active participant and that joint efforts are being made for a real purpose.

Quite often the opinion and advice of the home nurse may be sought on modern treatment of mental illness, and may tip the scales in order to encourage a patient to enter a mental hospital as a voluntary patient.

Certain other responsibilities in relation to nursing patients in their own homes compels a district nurse to become competent in the art of improvisation, i.e. where there is strictly limited domestic equipment.

She has already learned the art of caring for the tools of her trade, e.g., district bag, but even this requires considerable resourcefulness on her part, and although the patient runs less risk of infection at home, the methods of sterilising equipment and dressings must approximate to hospital standards.

Certain essential records of all patients, as well as report making to the family doctor, must be kept by the nurse as this is necessary for her own and the patients good, as well as providing useful information for the Medical Officer of Health in compiling of statistics, and the great aim of all is prevention of disease.

Constant health teaching and giving of advice to relatives on how to manage in between visits is an important part of the responsibilities of the home nurse - she may be asked for advice on prevention of accidents in the home, especially in the case of elderly persons, also for the healthy members of the household. In this respect she will bear out and complement the work of the Health Visitor who may also be attending the home.

At all times the good relationship which exists between the patient, relatives and nurse is of infinite value and something to be guarded. Co-operation with the three legs of the National Health Services is also essential to the success of district nursing.

Finally, the district nurse (as a person) should always be approachable, friendly yet professional to all people who wish to confide in her. She is before the eye of the community and the public set store by her principles, general behaviour, appearance and standard of work. In this respect she serves patient, family and community.

The position at the end of December 1961, was as follows:-

	<i>Cases Attended</i>	<i>Visits Paid</i>
Persons of 65 years and over at first visit during year	1239	39,724
Persons who received more than 24 visits during year	499	43,765

Of these the largest proportion were suffering from cardiac failure, cerebral degeneration, arthritis and carcinoma, and the remainder mainly from respiratory infections and post operative conditions.

Domestic Help Service

Over the years the Domestic Help Service has brought great relief and comfort to hundreds of old people especially those living alone, who very often are heard to remark that "they don't know how they would have got on without it". Regular attendances from 'their own' domestic help means so much to them, apart from the value of often helping to keep good standards in the home and very often in the person.

Throughout the Winter months this Service had proved very valuable where it has been necessary for fires to be lighted daily, this very often being one of the few comforts that is left to aged people, since in most cases they are home bound.

In both areas there are a number of bed-ridden cases where but for service given by Domestic Helps together with Meals on-Wheels, Incontinent Laundry Service and District Nurse, working in conjunction with each other, they would not be able to remain in their own homes.

Some of the typical problems facing old people are namely, inability to get out in severe weather conditions, (very often to collect pensions), climbing stairs to bring in coals etc. There is also the problem of loneliness and difficulty in enlisting help from neighbours who all too often look upon old people as a nuisance. All the difficulties are very often ironed out by the attendance of a domestic help together with check visits by domestic help organisers.

Here we illustrate two typical examples of patients covered by these services:

- Mrs. A. aged 74 years suffering from disseminated sclerosis with incontinency, is confined to wheelchair, spends six weeks in Langthorne and six weeks at home. Domestic Help attends daily, lighting fire, giving breakfast, (meals-on-wheels are delivered mid-day,) sandwiches and flask of tea are left for tea, does personal washing and ironing and in fact makes this patient generally comfortable.
- Mrs. B. aged 70 years suffering from a fibrous growth on lung, cardiac and severe arthritis, is entirely helpless, relies upon this service seven days a week to perform such tasks as emptying toilet bucket, making bed, and putting everything at hand for patients needs throughout the day, together with keeping her home clean, shopping and personal washing etc. An hour is given on Saturdays and Sundays to give patient immediate comforts.

Laundry Service for the Incontinent

In 1953 the Borough Council held a Conference on the problems and progress of Old Peoples' Welfare and reference was made to the need for a Laundry Service for the Incontinent. Subsequently it was reported that such a Service could be carried out within the terms of Section 84 of the Public Health Act 1936, which gives power "to cleanse at the Authority's expense upon a certificate signed by the Medical Officer of Health or the Public Health Inspector any article that requires to be cleansed in order to prevent injury or danger of injury to the health of any person in the premises."

A pilot scheme was authorised and arrangements were made with a local laundry for the laundering of the articles after preliminary cleansing and disinfection at the Council's Disinfecting Station. The articles dealt with are mainly bed linen, night clothing or underclothing, and the service is free to the patient. The Service is only carried out where the Medical Officer of Health or Public Health Inspector gives a certificate and where it is impossible for the washing to be done at home by a relative or Domestic Help. The necessary equipment was installed at the Disinfecting Station and the collection, preliminary cleansing, rinsing and disinfecting carried out by the Disinfecting Staff. The Service was commenced on 1st March, 1954 and collection was made weekly and the articles returned completely laundered within approximately 24 hours.

Experience conclusively proved the need of this Service and authority was given for additional equipment, i.e., a steam washing machine and a hydro extractor, to be provided, and this was installed in 1955. Later in the year further improvements were authorised with a view to the extension of the Service to enable some of the worst

cases to be dealt with twice weekly, and in 1956 a part-time laundress was appointed so that the whole of the Service could be carried out at the Disinfecting Station, and arrangements with the local contractor were cancelled.

There is no doubt that the success of this scheme has proved beneficial to those old persons where relatives are unable to cope with soiled linen, because during the whole period of this Service there has been not one single complaint. During the first year a total of 12 cases (average of four per week) were dealt with. Up to the end of 1961 the total number of cases dealt with had reached 114. Of these 30 were still using the Service. In addition, in December 1961, the Borough Council agreed to undertake the service for two neighbouring authorities on a financial cost basis.

The following table shows the number of cases dealt with during 1961 and how the Service has increased since its inauguration in 1954.

	1961	1954
Total number of persons	30	12
Average number of cases per week	15	4
Total number of articles laundered	11,872	1,287
Average number of articles per week	233	29
Total number of journeys	1,128	336

Old People and the Work of the Public Health Inspector

Contact between the Public Health Inspectors and Old People arises mainly in connection with visits concerning domestic accommodation or associated matters. In this respect, the old people themselves are not necessarily a problem, but more the unfortunate victims of circumstances associated with their stage of life, and the problems hinge more on economical factors than on direct public health matters.

The main reasons for calls in connection with old people arise in much the same manner as calls generally for all walks of life; repair of property, unsatisfactory housing, and visits in connection with alterations to fireplaces by virtue of the operation of the Clean Air Act. The fact that the majority of old people have retired from work removes them from the sphere of duties which involve factories, shops, food premises and other non-domestic premises.

The special problem of old people living in dirty conditions and in need of care and attention is in effect an exceptional state of affairs, rather than a generality, and the Public Health Inspector is only one officer of the many people involved in the event of one of this category of person being discovered. This type of person, the recluse, or the invalid requiring the resources of the Council's

incontinent laundry service, whilst needing attention - frequently almost immediately - does not present a normal picture of conditions associated with old people, but should rather be considered as a pathological case requiring remedial treatment; this is beyond the scope of the Public Health Inspectors. The cleaning up and clearing of accumulations usually associated with such a case is in no way different from that which would be required in a similar case of a person of younger years.

The main problem, which could be generalised (although with specific exceptions) arises from shortage of money. There are broadly three categories of circumstances:

- 1) the owner/occupier,
- 2) the controlled tenant
- 3) the owner of tenanted property

In all three cases, the shortage of money results in the maintenance of the property being neglected. The money shortage inevitably arises from the limited income of fixed pensions and the income is insufficient to cover the costs of repair and redecoration of the living accommodation. The effect is also aggravated by the physical inability to render 'do-it-yourself' services in similar manner to the efforts of younger generations.

Each of the three categories has similar results on the properties. The dilapidation becomes more intense, and the resultant deterioration requires greater eventual expense to rectify.

The retired person who is an owner-occupier does not normally come to the attention of the Public Health Inspector as a result of his own initiative (apart from enquiries for grants under the Clean Air Act); indeed, in the majority of cases there would be little purpose as there are few occasions on which the Council can provide much assistance through the Public Health Inspector to an owner-occupier. Contact with such a person may arise, possible, only after the accommodation may have deteriorated to an extent that adjoining property is affected. A typical example would be where a leaky gutter causes dampness in the neighbouring house, and the occupier affected complains to the Health Department. Upon inspection of the offending property, a typical picture may emerge. The elderly occupants may use only two rooms of the house, the other rooms being in disuse and becoming damp and dilapidated. The whole premises may be badly in need of redecoration, and the room nearest the offending gutter may be virtually uninhabitable. The only action that the Public Health Inspector can take is to require the repair of the offending gutter in order to prevent nuisance to the neighbouring house. Whilst it is not strictly the Public Health Inspector's problem as to how the house owner is going to afford the repair required, it will, nevertheless, be asked of him. It is this real difficulty of finding a practical solution which can be considered as the basic problem underlying the work of the Public Health Inspector in relation to old people.

The Public Health Inspector can only make suggestions. The decisions rest with the people concerned. The result is in a sacrifice of some form or another and this may or may not have an effect on their existing standard of living or a subsequent (although not readily connected) effect on their general well-being, or health. In addition, it is normally only the minimum essentials that receive attention, and the property remains in much the same basic state of neglect and subject to additional troubles arising.

The general living conditions of old people who are controlled tenants show similar characteristics. Only part of the house is in regular use; the internal decorations are dirty with age, and the exterior decorations badly weather-worn and exposing the fabric of the building underneath. Often, the last major attention the property received was during the immediate post-war period as a result of war damage repair. Here, speaking generally, the owners budget for repair work within the confined limits of the return from the controlled rent and the effect on the property is one of apparent neglect. Usually, the essential repairs are attended to by the owners, and as such there is no immediate problem, but the Public Health Inspector is often asked in such cases whether assistance can be given to obtain redecoration of the rooms in use. Typically, the walls and ceiling of the living room may be almost black, and give a very depressing atmosphere to the old people who spend a large proportion of their time in the room. It poses a difficulty to convince the old people concerned that under the existing provisions of the Rent Act the terms of the tenancy are such that it falls upon themselves to bear the cost of the redecoration and that the owner no longer has the responsibility.

The Public Health Inspector does not often come into direct contact with the old person who is an owner of tenanted property, as the property is normally in the hands of agents. However, the effect on the property is much the same, with expenditure at a minimum and the property on the border-line of repair. Depending upon the actual tenure, the state of the premises may be improved by the activity of the tenant, particularly if there is a young tenant who exerts himself to redecorate the rooms to his liking.

The effect of limited fixed incomes of old people also shows in connection with work required under the Clean Air Act, in that the elderly persons will often indicate that the alterations cannot be afforded, or that the cost of the smokeless fuel will be beyond their means. Most of them have a strong sense of independence, and it is only a few who actually apply for extensions of the 70% grant available. In general, the benefit of conversion to smokeless fuel is not appreciated by the old people, and there remains a rooted preference for the coal fire which they have been accustomed to for the past sixty or seventy years or more. It often seems that the Public Health Inspector's conversations with old people on this subject has little lasting effect, and they are reluctant to convert to smokeless fuel.

To summarise, the problem in connection with old people is not a direct one, but the aggregation of circumstances which results in a long term deterioration of property with a consequential greater financial outlay at some future time in order to bring the premises up to a reasonable standard, and whilst the solution to the problem is not the affair of the Public Health Inspector, nevertheless, various aspects of the problem are thrown at him.

The Housing Manager says:

"With regard to problems associated with old age, I would say that whilst the Council do not make a lot of fuss in building blocks of flats specifically for elderly people, the needs of these people do receive more attention by the Council as regards rehousing than any other sections. All vacancies of bedsitting room flats, and ground floor one bedroom flats are allocated to elderly people and of this type of accommodation on first and second floors at least two-thirds go to elderly people, who feel sufficiently active to climb the stairs. I think it is true to say that as far as Walthamstow is concerned, the elderly people like to be provided with accommodation that is not specially designed for elderly people. They like to feel that they are a real part of the community. We experience certain complaints for example, in connection with the block of flats on the Hylands Estate, which was specially designed for the elderly people, but I am of the opinion that the majority of the complaints are to the fact that there are 40 elderly people all in one group."

SECTION G
NATIONAL HEALTH SERVICE ACT, 1946
PART III SERVICES
WALTHAMSTOW HEALTH AREA SUB-COMMITTEE
(1961/62)

Chairman: -

Councillor Mrs. W.M. PALETHORPE (Walthamstow Borough Council)

Vice-Chairman:

Councillor Mrs. C.E. STANNARD (Walthamstow Borough Council)

Members:

Representing: -

Essex County Council

Alderman K.E.B. GLENNY, O.B.E., J.P. (Chairman, County Health Committee)	Councillor W.J. BOWSTEAD, J.P. Councillor Mrs. M.J. HARVEY.
Councillor Mrs. S.M. BOVILL (Vice-Chairman, County Health Committee)	Councillor Mrs. A.E. WELSH (One Vacancy)
Alderman H.J.E. PALETHORPE.	

Walthamstow Borough Council

Alderman The Lady McENTEE O.B.E., J.P. (deceased)	Councillor W.G. FREWIN. Councillor F. FURBER, J.P.
Alderman C.B. REYNOLDS.	Councillor J.H. HAMMOND.
Councillor Mrs. E.L. BALDWIN.	Councillor Mrs. B.M. REYNOLDS.
Councillor L.A. BAYLIS.	Councillor E. ROSOMAN.
Councillor J.J. BRACKEN.	Councillor D. WEINSTEIN.
Councillor Mrs. R. COLIN.	Councillor Mrs. J.C. OAKMAN.

Executive Council for Essex Mr. F.A. WORTLEY.

Forest Group Hospital Management Committee: Mrs. B.E. BOTTOMLEY,
J.P.

Local Medical Committee for Essex: Dr. W.R. JOHN.

Voluntary Organisations

Mrs. L.A. BRAZIER.	Mrs. A. CORDELL.
Mrs. M. BROWN.	Mr. E.P. MARR.

F. NATIONAL HEALTH SERVICE ACT (PART III) SERVICES

The Local Health Authority functions under the National Health Service Act are administered by the Walthamstow Health Area Sub-Committee on behalf of the County Health Committee (Essex County Council). Details are given in statistical form on pages 63 to 78.

Section 21 HEALTH CENTRES

During 1960 the Health Area Sub-Committee recommended the establishment in Walthamstow of four main Health Services Clinics to serve the following neighbourhoods:-

- (a) Highams Park
- (b) Higham Hill
- (c) West Avenue
- (d) St. James' Street
- (e) Hurst Road.

In addition a subsidiary clinic in the Wood Street area was proposed.

The clinics at Highams Park, West Avenue, and St. James' Street are intended as replacements of the existing inadequate or unsuitable premises. The Hurst Road Clinic will absorb the clinics and sessions at present accommodated in the Town Hall in order to release more rooms for use by the Walthamstow Borough Council's staff.

In the case of Higham Hill an extension of the existing Clinic built in 1959 is recommended in order to provide more adequate accommodation for the Health Services operated there.

The County Health Committee subsequently approved the provision of clinics in Hurst Road and at Highams Park and these were included in the provisional programmes for 1963/4 and 1964/5 respectively.

It was at one stage proposed that the Hurst Road Clinic should be built partly on land owned by the Walthamstow Borough Council and partly on adjoining land owned by the Walthamstow Child Welfare Society. Unfortunately certain difficulties arose which necessitated a decision to build the Clinic on the Borough Council's land only.

Negotiations in regard to the acquisition of the land were proceeding at the date of preparation of this Report.

General Dental Service

The work of the General Dental Service continues to contract owing to the shortage of dental staff. However an additional surgeon was recruited towards the end of the year which should improve the situation.

Section 22. CARE OF MOTHERS AND YOUNG CHILDREN

Welfare Foods Service

From the 1st June, 1961, under the directions of the Minister of Health, orange juice, cod liver oil and vitamin tablets distributed through the Welfare Foods Service have been sold at prices which cover the cost, i.e. orange juice 1/6d. per bottle instead of 5d., and in place of free supplies of cod liver oil and vitamin tablets these have been sold at 1/0d. per bottle and 6d. a packet respectively, tokens not being required for these purchases. From this date orange juice has been obtainable for children up to the age of 5 years instead of 2 years as previously. The only tokens now in use for orange juice, cod liver oil and vitamin tablets as distinct from those for liquid or dried milk, are those issued for free supplies by the National Assistance Board or the Ministry of Labour.

Details of issues are given in the table on page 68.

Section 23 MIDWIFERY

During the year 23 pupil midwives from Thorpe Coombe Maternity Hospital undertook their district midwifery training at the Nurses' Homes, and all passed the examination.

The retirement of two teaching midwives towards the end of the year brought about a serious situation in the District Midwifery Service. The two midwives with their pupils had been undertaking 180 cases annually and the remaining midwives were all working to capacity. Thus, taking into account the increasing number of home confinements, unless replacements could be recruited there would be a minimum of 200 babies born in Walthamstow during the following year without the aid of a midwife. Unfortunately repeated advertisements had failed to attract applicants.

Against this background of approaching emergency, consultations were held with hospital and general practitioner representatives in order to try and solve the immediate problem.

Meantime letters were sent to some 200 non-practising qualified midwives resident in Walthamstow and district inviting application for the vacant posts. As a result of these letters, and the efforts of our associates in hospital and elsewhere, we were able to recruit four midwives. This was made possible by the co-operation of the Walthamstow Borough Council who made housing accommodation available for two of the midwives. The third midwife occupied a house owned by the County Council and made vacant by one of the retirements. The fourth midwife already had her own home just outside the Borough. She had not practised midwifery for a good many years and was given a comprehensive refresher course at Thorpe Coombe Maternity Hospital

before taking over her own district.

In view of the national shortage of practising midwives we must count ourselves singularly fortunate at the outcome. However, several of our present midwifery staff are also nearing retiring age, and we shall not be permanently out of difficulty in Walthamstow until the wider problem is solved.

Section 24. HEALTH VISITING

Expectant Mothers - First and subsequent visits to expectant mothers again shows a considerable increase. We are greatly indebted to the Thorpe Coombe Maternity Hospital for their continued co-operation in respect of the expectant or nursing mother and her baby. Requests for reports on social conditions gives the health visitor an early and necessary opportunity of making contact with the expectant mother.

Relaxation and Mothercraft - Regular sessions continue to be held at the four main clinics and 'Carville' Home, one health visitor giving a series of talks over several weeks, which ensures continuity of instruction. The value of this type of instruction and demonstration is now accepted and appreciated. Many mothers attending are referred by their general practitioner and hospitals.

Infant Welfare Clinics - The mothers who bring their babies regularly can be given guidance in management and feeding problems. A careful check can be kept on those babies who do not make mental or physical satisfactory progress. The doctors sessions are kept within reasonable numbers so that an unharassed atmosphere can be created. This is necessary to allow time to penetrate into medical problems and give suitable advice. The health visitor whilst of necessity, copes with large numbers, can make arrangements, where there are special difficulties, to pay a home visit and by listening, interpreting, encouraging and counselling seek to help. As the baby grows older, the mothers attend the clinics less frequently. The toddler sessions seek to obtain more regular supervision of the 2 - 5 age group, and mental defects and behaviour problems can be found before they become serious. Higher standards of health and physique among young babies over recent years is obvious, and there is an increased urge by parents to do their 'best'. This necessitates deep understanding, sympathy and tact on the part of health visitors and doctors.

Health Education in Schools - The programme of health education in secondary modern schools has continued and young mothers attending the child welfare clinics renew their acquaintance with health visitors from whom they have had guidance as adolescents. During the year talks were given and in the form of experiments, simple instruction was given to a group of educationally sub-normal girls. Shortage of staff and other demands made on the health visitor prevented continuation and possible evaluation of the experiment.

School Nursing Service - The work undertaken by the school nurse has included preparation and attendances at routine medical and hygiene inspections, certain home visits to parents including those required for the follow up of defaulters from clinics. The discovering of minor defects and verminous conditions before these develop into matters of serious concern are the primary duties of the school nurse and are intended to fill the gap in between the routine medical inspections. Close contact between head teacher, class teacher and school nurse is maintained at all times. A new commonsense attitude of parents seeking the help and advice of the school nurse before conditions have a chance to affect others, replaces the old antagonism and feeling of parental guilt associated with infestation. In general the trend of the school nurses work is more preventive in character with opportunities for the school child to regard the school nurse as a friend.

The duties of the full time school nurse at the School for the Physically Handicapped can be regarded as an integral part of the life of the school. She deals with minor ailments, attends medical inspections, carries out treatment prescribed by the school medical officer. She also visits the homes of the pupils where necessary and takes part in out of school activities.

Section 25. HOME NURSING

During 1961 one Queen's student undertook her three months district training. Four district nurses attended Refresher Courses, and six public health students accompanied nurses on observation visits.

A total of 62,536 visits were made during the year. This is a decrease from the number made in the previous year owing to the admission of elderly sick patients to hospital at an earlier stage in the illness than formerly. Fewer visits to surgical patients were required owing to advanced treatment by doctors, therefore more time was spent by nurses in giving advice and help on social and domestic problems to the aged sick.

During the year mechanical hoists were provided for four heavy, helpless patients and these enabled relatives to operate necessary lifting single handed.

Section 26. VACCINATION AND IMMUNISATION

Arrangements for vaccination against Poliomyelitis continued, as in the previous year, to be available to all persons between the ages of 6 months to 39 years plus certain groups who are at special risk because of their occupation, together with their families.

Some interference with the programme of vaccination was experienced because of shortages of Salk vaccine but on the whole a fairly satisfactory number of primary vaccinations and reinforcing doses were administered.

Section 28. PREVENTION OF ILLNESS, CARE AND AFTER CARE Chiropody

The re-organisation of the Chiropody Service in the Health Area reported fully in my Report for 1960 operated very successfully during 1961 but the Area Sub-Committee became concerned at the rather lengthy waiting periods between treatments at certain peripheral clinics. In order to reduce these periods it was decided to transfer all patients under 45 years of age who had no special disability or whose circumstances did not merit special consideration, to the Town Hall Clinic where, because of the number of chiropodists employed, they could be absorbed without unduly extending the waiting list there.

This arrangement was introduced in September and achieved a reduction of 2 to 3 weeks in the waiting periods at the Clinics concerned to the benefit of the more elderly and necessitous patients attending.

Section 29. DOMESTIC HELP SERVICE

The demand for home help continues to increase and assistance was given for 184,794 hours compared with 181,602 hours the previous year.

The Night Attendance Service has continued to serve a small number of patients strictly on recommendation from doctor and has included many aged cases, affording great relief and appreciation from relatives often in desperate circumstances. This Service has become more widely known in recent months and a small staff of regular night attendants working an average of three nights a week has met all demands to date.

CHELMSFORD DIOCESAN MORAL WELFARE ASSOCIATION

The 'Carville' Home, now at 43 West Avenue Road, E.17. is administered by the Walthamstow Deanery Branch of the above Association. The home provides accommodation for a total of 16 mothers and their babies.

Miss E. Williams, Superintendent of the Home, contributes the following details:-

The table below summarises our work for the year. All these are new cases, and do not include the follow-up work arising from 1960 cases. The ages of the mothers were 14 years (2); 15 years (3); 16 years (10). Most of the remainder were 17 or 18 years with one or two over 20.

The relaxation classes arranged at the home by the health

visitors are of considerable help to the girls.'

<i>Admitted</i>	<i>Adults</i>	<i>Babies</i>	<i>Total</i>
From Walthamstow	19	13	32
From rest of County	70	53	123
From outside County	2	2	4
Totals	91	68	159
<i>Outdoor work:</i>			
Walthamstow (Mothers and babies)	30	15	45
Other County cases	22	10	32
From outside County	4	4	8
Totals	56	29	85

In addition to the nineteen Walthamstow mothers admitted to the Home, Miss Williams made arrangements for ten others to enter homes elsewhere in the County, supervising further care on return to the Borough.

WALTHAMSTOW CHEST CLINIC

Dr. H. Ramsay, Consultant Chest Physician at the Walthamstow Chest Clinic, has contributed the following:-

'The number of cases of tuberculosis remaining on the Clinic Register at 31.12.1961 was:-

Respiratory	1313	} 1418
Non-Respiratory	105	

'The clinic figures of main interest are set out below.. They refer, of course, to the combined attendances of Walthamstow and Chingford patients.

	1961	1960
Total Attendances	14,572	13,370
Total New Cases	5,408	5,249
Total X-rays	13,166	12,175
Total Screening	34	67
Miniature Camera	3,371	3,640
New Notifications	51	55
(W' stow only)		

'Cancer of the lung steadily increases, and 71 cases were diagnosed at the Clinic during the year.

'The total number of new cases of tuberculosis arising in the Clinic Area, i.e. Walthamstow and Chingford, was 69 of which 57

were cases of respiratory disease and 12 were non-respiratory, this is only three less than the previous year. Of the total number remaining on the Clinic register at December 31st 1961, 50 produced broncho-pulmonary secretions positive for tubercle bacilli during the year.

'In addition to the work at the Clinic centre in Walthamstow there is a session each week at Chingford Hospital, where the total attendances in 1961 were 800 (new cases 281).

'On March 17th 1962, the Clinic finally moved to a new building at Whipps Cross Hospital where the service provided in the old premises in the High Street will be maintained in full.'

WALTHAMSTOW AND CHINGFORD ASSOCIATION OF TUBERCULOSIS CARE HELPERS

Miss V. Jennings, Honorary Secretary of the Walthamstow and Chingford Association of Tuberculosis Care Helpers reports as follows:

At the Annual Meeting of the Association in May 1961, we amended our Constitution to enable us to give help to patients suffering from chest conditions other than tuberculosis.

The decision to do this was not reached without serious thought, particularly as the County Council were not prepared to agree to our using for these patients any monies derived from County Council grants. It was therefore necessary for us to establish a separate fund, and assistance to non-tuberculous patients was, of necessity, limited by the money available in that fund. We decided that, in general, we should give help with warm clothing bedding and fuel during the winter months and if possible, with holidays where these were recommended by the Chest Physician.

Long-term help of the kind given to tuberculous patients by means of grocery vouchers etc., would not be possible without the certainty of a substantial income to this fund.

A beginning has been made and it is hoped that in the not too distant future it may be possible to offer these other patients the full range of help now given to the tuberculous.

During the year covered by this Report, a total of 100 individual cases was dealt with and help arranged as follows:-

Milk	2
Grocery	30
Fuel	39
Fares to visit patients	2
Clothing and Bedding	25
Holidays	5
Christmas Grants	75

In addition to those listed above, special help was given to a patient disabled by arthritis. With the advice and co-operation of the Head Occupational Therapist at Whipps Cross Hospital where the patient was treated for tuberculosis, we were able to provide equipment to facilitate bathing following discharge and also to obtain attachments for knife and fork to enable him to deal more easily with his meals - a benefit not only to the patient but also to his wife who was relieved of considerable strain.

COUNTY COUNCIL OF ESSEX WELFARE COMMITTEE
RESIDENTIAL AND WELFARE SERVICES

Mr. W.E. Boyce, County Welfare Officer has kindly prepared the following table and explanatory notes:-

Extent to which services provided in 1961.	Number of Walthamstow residents in accommodation provided under Section 21(1) (a) National Assistance Act, 1948.			Number admitted to Residential Accommodation during 1961.		Number admitted to Temporary Accommodation under Section 21 (1)(b) National Assistance Act, 1948.		Blind Persons etc.					Other Classes of Handicapped Persons Registered
								Registered			Number employed in:		
								Blind	Partially Sighted	Defective Sighted	Workshops)		

The above table indicates the extent to which the various services provided by the County Council under the provisions of the National Assistance Act, 1948 have been afforded in 1961 to persons having residence in the Borough of Walthamstow.

The County Council continue to develop the provision of residential accommodation for aged persons and a second home is now in the course of erection in Walthamstow and when it is completed in 1962 will accommodate 62 aged persons.

Welfare services are available for blind and handicapped persons in a variety of ways; these include home visitation by specialised field workers, tuition in handicrafts, recreational and holiday facilities and, especially for the handicapped person, the supply of home aids, gadgets and hoists, and in addition the Committee give financial aid towards the cost of structural alterations designed to assist the handicapped person in overcoming his disability.

An occupational centre for physically handicapped persons will be operating in the Borough in 1962.

STATISTICAL SUMMARY

Section 21

Health Service Clinics

Low Hall Lane, E.17 (Opened in 1929)

Higham Hill Priory Court, E.17. (Opened in 1959)

Silverdale Road, Highams Park, E.4. (Adapted for Clinic purposes 1948)

West Avenue, E.17. (Opened as Health Services Clinic 1949)

General Dental Service

No. of sessions	415	
Number of patients treated	325	
Appointments made	3003	
kept	2739	
Plastic fillings	258	) 1167
Amalgam fillings	909	
Inlays	6	
Crowns	8	
Scalings and gum treatments	320	
Dressings	320	
Extractions	314	
General anaesthetics	55	
Local anaesthetics	255	
X-rays	356	
Impressions	545	
Bites	135	
Try-ins	214	
Full upper dentures	67	) 176 total
Full lower dentures	42	
Partial upper dentures	23	) dentures
Partial lower dentures	44	
Repairs	158	
Minor Oral Surgery	16	
Other Operations	376	

Dental Laboratory

	Dentures	Re-pairs	Re-line	Re-makes	Appliances	Crowns	Inlays
General Dental Service	173	155	6	4	-	7	1
Walthamstow Committee for Education	42	34	-	-	146	15	-
Leyton Committee for Education	30	16	-	-	83	4	1
Forest Divisional Executive Committee for Education	1	2	-	-	20	-	-
Maternity and Child Welfare Patients	6	-	-	-	-	-	-

Section 22. CARE OF MOTHERS AND YOUNG CHILDREN

Notification of Births

	<i>Domiciliary</i>		<i>Institutional</i>	
	<i>Live</i>	<i>Still</i>	<i>Live</i>	<i>Still</i>
Notified births which occurred in the Area	474	5	1,691	32
Birth notifications transferred out to places outside the Area	-	1	901	18
Birth notifications transferred in from places outside the Area	1	-	369	10

Care of premature infants

(Weighing 5½lb or under)

Born at Home	17
Born in Hospital or Nursing Home	85

Ante Natal and Post Natal attendances

(Local Authority Clinics)

New Patients -	<i>Ante Natal</i>	<i>Post Natal</i>
Low Hall Lane Clinic	48	7
Silverdale Road Clinic	11	-
West Avenue Clinic	2	-
District Nurses Training Home and Midwives' sessions held at Ante-Natal Clinics	395	-
TOTALS	456	7

Total Attendances -		
Low Hall Lane Clinic	177	20
Silverdale Road Clinic	77	-
West Avenue Clinic	8	-
District Nurses Training Home and Midwives' sessions held at Ante-Natal Clinics	2,196	-
TOTALS	2,458	20

Birth Control

(Medical Grounds)

New cases	-
Total attendances	21

Orthopaedic and Physiotherapy Clinic

(Children under School Age)

New cases seen by Orthopaedic Surgeon	18
Re-attendances	41
Children treated	10
Children attending for aftercare	15
Children attending for U.V.L.	1

Paediatric Clinic

(Children under school age)

New cases:-

Heart disease	2
Enuresis	2
Migraine	1
Hernia	2
Persistent vomiting	1
Coeliac disease.. .. .	1
Epilepsy	1
Development	6
Shortened fraenum	1
Eczema	1
Swelling in Chest	1

Total 19

Total attendances 36

Dental Clinics

Patients inspected and treated during the year.

	<i>Expectant Mothers</i>	<i>Nursing Mothers</i>	<i>Children under school age</i>
Patients examined	9	12	61
Patients found to require treatment	9	12	58
Patients who have commenced treatment	9	12	52
Patients who have completed treatment	4	9	19
Patients awaiting treatment ...	-	-	-
Attendance for treatment	16	33	72
<i>Types of Treatment Given</i>			
Extractions -			
(a) Permanent teeth	3	6	-
(b) Temporary teeth	-	-	78
Fillings -			
(a) Permanent teeth	6	17	-
(b) Temporary teeth	-	-	21
Inlays provided	-	-	-
Crowns provided	-	-	-
Anaesthetics administered -			
(a) Local	1	6	-
(b) General (i) by Medical Offrs.	2	5	-
(ii) by Dental Officers ...	-	-	51
Scaling	1	1	-
Prolonged scaling and gum treatment	2	-	-
Silver nitrate treatment	-	-	-
Dressings	-	3	2
X-ray examinations	-	2	1
Dentures provided -			
(a) Full	-	-	-
(b) Partial	-	2	-
Dentures repaired	-	-	-
Dentures remade -			
(a) Full	-	-	-
(b) Partial	-	-	-
Orthodontic appliances -			
(a) Fixed	-	-	-
(b) Movable	-	-	-
Prophylactic treatment and other operations	6	10	-

Child Welfare

	<i>Brookscroft (Voluntary Scheme)</i>	<i>Low Hall Lane</i>	<i>Higham Hill and Priory Court</i>	<i>Silverdale Road</i>	<i>West Avenue</i>	<i>Winchester Road</i>	<i>Total</i>
UNDER 1 YEAR -							
First attendances	289	356	307	156	258	107	1,473
Subsequent attendances	4,106	4,541	4,537	2,348	3,881	1,603	21,016
Total attendances	4,395	4,897	4,844	2,504	4,139	1,710	22,489
1 YEAR OF AGE -							
First attendances	12	19	8	13	11	1	64
Subsequent attendances	986	1,042	879	562	648	294	4,411
Total attendances	998	1,061	887	575	659	295	4,475
2-5 YEARS -							
First attendances	16	27	8	10	19	1	81
Subsequent attendances	559	1,355	739	478	614	235	3,980
Total attendances	575	1,382	747	488	633	236	4,061
Total attendances (all age groups)	5,968	7,340	6,478	3,567	5,431	2,241	31,025
Number examined by Clinic Doctor	794	1,732	1,253	504	742	390	5,415
Sessions held	103	122	150	127	119	51	672

Welfare Foods

<i>DISTRIBUTION CENTRE</i>	<i>National Dried Milk (Tins)</i>	<i>Cod Liver Oil (Bottles)</i>	<i>Vitamin Tablets (Packets)</i>	<i>Orange Juice (Bottles)</i>
Brookscroft Welfare Centre ..	1 638	665	507	3,912
Low Hall Lane Health Services Clinic	1,774	521	435	3,745
Northcott House Distribution Centre	7,201	889	1,273	9,825
Higham Hill and Priory Court Health Services Clinic.. ..	2,465	479	514	4,191
Silverdale Road Health Services Clinic	850	503	411	4,206
Thorpe Coombe Maternity Hospital	-	62	499	1,728
West Avenue Health Services Clinic	2,393	555	407	4,359
Winchester Road Infant Welfare Centre	484	333	249	3,126
TOTAL issues at Distribution Centres	16,805	4,007	4,295	35,092
In addition, the following were issued to:-				
Hospitals (National Health Service).. .. .	714	-	-	54
Day Nurseries	-	180	-	204
GRAND TOTAL OF ISSUES ..	17,519	4,187	4,295	35,350

Nutrients and Medicaments

	<i>Sales</i>		<i>Free Issue</i>	
	<i>lbs.</i>	<i>ozs.</i>	<i>lbs.</i>	<i>ozs.</i>
Adexolin	-	-	30	3
Bemax	107	6½	-	-
Cow and Gate	5,202	-	-	-
Farex	839	8	-	-
Glucodin	102	4	-	-
Lactagol	24	4	-	-
Maltoline with Iron	-	-	99	-
Marmite	683	12	-	-
Milk of Magnesia	-	-	17	-
Mist Ferri et Ammon.Cit.Pro. Infantibus	-	-	3	14
Ostermilk	3,958	-	-	-
Robinson's Ready Cooked Groats	332	8	-	-
Scott's 'Twin Pack'	436	8	-	-
Virol	717	2	-	-
Trufood	298	-	-	-
S.M.A.	640	-	-	-

Value of Cash Sales £2,286. 2. 5d.

Convalescence

Mothers sent to Convalescent Home

Children 2
 Mothers and children .. . 1 Mother with 1 child

Day Nurseries

There are two day nurseries in the Borough approved for training purposes each having accommodation for 60 children aged 0-5 years.

	<i>HIGHAM HILL</i>		<i>HANDSWORTH AVE</i>		<i>TOTAL</i>	
	<i>0-2 yrs</i>	<i>2-5 yrs</i>	<i>0-2 yrs</i>	<i>2-5 yrs</i>	<i>0-2 yrs</i>	<i>2-5 yrs.</i>
Number of approved places at end of year	20	40	20	40	40	80
Number of children on register at end of year	13	50	18	43	31	93
Total attendances during year	2,921	9,817	3,119	8,718	6,040	18,535
Average attendances	11.5	38.6	12.3	34.3	23.8	72.9
	50.1		46.6		96.7	
Number of days open	254		254			

Training

Number of Students who gained certificate of National
 Nursery Examination Board 8

Future Careers (on leaving):

In Day Nurseries of other Authorities 2
 Staff Nursery Nurse Special School 1
 Staff Nursery Nurse Nursery School 1
 Staff Nursery Nurse in U.S.A. 1
 Teaching 1
 Banking 1
 Marriage 1

Daily Guardian Scheme

No. of Guardians on Register at end of year.. .. . 16
 No. of applications for services of Daily Guardians.. .. . 57
 Referred to Day Nurseries 48
 Referred to Daily Guardian but nothing further heard 4
 Placed with Daily Guardian 5
 Continued in care of Daily Guardian from previous years.. .. . 4

PROGRAMME OF CLINICS HELD AT DATE OF PUBLICATION

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Town Hall	A.M.	Dental Foot Clinic Orthoptic Minor Ailment Ophthalmic (1st, 3rd & 5th)	Dental Foot Clinic (School- children) Orthoptic Optician	Dental Foot Clinic Ophthalmic (1st, 3rd & 5th) Orthoptic Minor Ailment	Dental Foot Clinic Paediatric (1st & 3rd)	Dental Foot Clinic Orthoptic Orthodontic Minor Ailment	Dental Ophthalmic (2nd & 4th) Optician (2nd & 4th) Minor Ailment
	P.M.	Dental Foot Clinic Ear, Nose & Throat Ophthalmic (2nd & 4th)	Dental Foot Clinic Ophthalmic Optician	Dental Foot Clinic Orthoptic Immunisation & Vaccination	Dental Foot Clinic Ophthalmic Orthoptic Optician	Dental Foot Clinic Ophthalmic Orthodontic Optician	
	Evening	Foot Clinic	Foot Clinic General Dental Service	Foot Clinic General Dental Service	Foot Clinic General Dental Service	Foot Clinic Orthodontic	
Silverdale Road	A.M.	Foot Clinic	Minor Ailments Foot Clinic (School- children)	Foot Clinic	Dental Foot Clinic	Dental Foot Clinic	
	P.M.	Ante Natal/ Post Natal (twice monthly) Toddlers Clinic (twice monthly)	Midwives Ante Natal Clinic Foot Clinic	Infant Welfare	Relaxation and Mothercraft Class Dental Foot Clinic	Infant Welfare Dental	
	Evening	Foot Clinic		Foot Clinic			
Higham Hill and Priory Court	A.M.	Foot Clinic	Dental Foot Clinic (School- children)	Dental Foot Clinic	Foot Clinic	Foot Clinic	Dental
	P.M.	Dental Foot Clinic Infant Welfare	Dental Foot Clinic Toddlers Clinic (alternate weeks)	Dental Midwives Ante Natal Clinic Foot Clinic	Infant Welfare Foot Clinic	Relaxation and Mother- craft Class	
	Evening	Foot Clinic			Foot Clinic		
Low Hall Lane	A.M.	Minor Ailment Foot Clinic	Foot Clinic (School- children)	Foot Clinic	Minor Ailment Foot Clinic	Foot Clinic	
	P.M.	Infant Welfare Foot Clinic	Relaxation and Mother- craft class	Infant Welfare Foot Clinic	Ante Natal/ Post Natal Foot Clinic	Infant Welfare Foot Clinic	
	Evening	Foot Clinic		Foot Clinic	Foot Clinic	Foot Clinic	
West Avenue	A.M.	Foot Clinic	Dental Foot Clinic (school- children)	Dental Foot Clinic	Dental Foot Clinic	Dental Foot Clinic	
	P.M.	Foot Clinic Dental	Infant Welfare Dental	Relaxation and Mother- craft Class Foot Clinic Dental	Ante Natal/ Post Natal (twice monthly) Infant Welfare Dental	Toddlers Clinic (alternate weeks) Foot Clinic Dental	
	Evening			Foot Clinic		Foot Clinic	
Winchester Road	P.M.		Infant Welfare				
District Nurses Training Home, Carisbrooke Road	P.M.		Midwives Ante Natal Clinic		Midwives Ante Natal Clinic		
Old Monoux School, High Street		Speech Therapy, & Child Guidance Consultations daily (morning and afternoon) from Monday to Friday.					
Orthopaedic Clinic, Wingfield House School, Hale End Road		Speech Therapy, & Massage & Treatment - sessions daily (morning and afternoon) from Monday to Friday.					
Walthamstow Child Welfare Society (Voluntary Society) 'Brookscroft' Forest Road	P.M.		Massage, Remedial Exercises and Sunlight Treatment	Weighing Clinic & Cookery Lecture Infant Welfare	Infant Welfare	Massage, Remedial Exercises and Sunlight Treatment Diphtheria & Whooping Cough Immunisation (Alternate weeks)	

Section 23. MIDWIFERY
Cases attended by Council Midwives

	MIDWIVES		Total
	Domiciliary Midwives	Home Nurse Midwives	
1. Cases attended: -			
(a) No doctor booked or present at delivery	3	2	5
(b) No doctor booked but one present	-	-	-
(c) Doctor booked but not present	309	28	337
(d) Doctor booked and present	111	22	133
	423	52	475*
2. Cases delivered in institution but attended by Council Midwives on discharge	53	12	65
3. Ante Natal Examination: -			
(a) Patients' Homes	1,637	75	1,712
(b) Local Health Authority Clinics	2,201	95	2,296
(c) General Practitioners' Clinics	1,647	338	1,985
	5,485	508	5,993
4. Lying-in visits	4,661	375	5,036

* Including three cases attended outside the Borough by arrangement, and one case confined in the Borough but normally resident outside the County of Essex.

Administration of Trilene, and Gas and Air Analgesia

Number of patients who received analgesia .. 434
 Percentage of district confinements .. 91.37

Medical Aid

Number of medical aid notices received .. 15

Place of Confinement

During the year Walthamstow Mothers were confined as follows:-

Forest Gate Hospital	30
Hackney Hospital	7
Mother's (Salvation Army) Hospital, Clapton	190
North Middlesex Hospital Edmonton	23
Queen Mary's Hospital E.15.	12
Thorpe Coombe Maternity Hospital	798
Wanstead Hospital	47
Other Hospitals or Nursing Homes	68
Total ..	<u>1,175</u>

At Home:

Council Midwife present	471
Family doctor but not Council Midwife present	4
Total Confined ..	<u>1,650</u>

Section 24. HEALTH VISITING

During the year the Health Visitors made 17,511 visits to homes:

To expectant mothers:-

First visits	595
Subsequent visits.. .. .	121

To children under 1 year of age:-

First visits	1,504
Subsequent visits.. .. .	3,179

To children between the ages of 1 and 2 years:-

First visits	209
Subsequent visits.. .. .	2,176

To children between the ages of 2 and 5 years

4,376

Other visits:-

To the aged	1,776
Tuberculous households.. .. .	1
After stillbirths	16
Special visits	1,235
Unsuccessful visits	2,323

Number of attendances by Health Visitors
at Local Health Authority clinic
sessions

688

Number of Health Education talks given in
Schools

224

Section 25. HOME NURSING

	<i>New Cases</i>	<i>Total visits</i>
Medical	889	51,930
Surgical	126	7,040
Tuberculosis	5	468
Infectious diseases	-	-
Maternal Complications.. .. .	-	25
Others	138	3,073
Totals	<u>1,158</u>	<u>62,536</u>

Number of visits (included above) to persons over 65 years
of age

39,724

Section 26. VACCINATION AND IMMUNISATION

Vaccination against Smallpox

<i>Age at date of vaccination</i>	<i>Persons Vaccinated</i>	<i>Persons Re-vaccinated</i>
Under 1 year	751	-
1 year	100	-
2-4 years	64	11
5-14 years	55	39
15 years and over	107	204
Total	1,077	254
Total vaccinated by local authority staff (included above)	506	52

Immunisation against Diphtheria

<i>Age at date of final injection</i>	<i>Children who completed a full course of primary immunisation during the year</i>	<i>Children who were given a re-inforcing injection during the year</i>
Under 1 year	1,038	-
1-4 years	322	160
5-9 years	172	963
10-14 years	28	183
Total	1,560	1,306
Total immunised by local authority staff (included above)	787	781

The 1,560 children who completed a full course of immunisation during the year received their injections at the following places:-

Schools	167
Welfare Centres	446
Town Hall Clinic... ..	96
Brookscroft	78
General Practitioners' Surgeries	773

Total number of children under 15
years immunised at 31st December

1961 18,532

Immunisation against Whooping Cough

<i>Age at time of the final injections</i>	<i>Children who completed a full course of immunisation during the year</i>	<i>Records of combined diphtheria-pertussis immunisation received</i>
Under 6 months	803	185
6-12 months	400	182
1-4 years	144	72
5 years and over	42	29
TOTAL (primary courses)	1,389	468
Total immunised by local authority staff (included above)	667	-
Reinforcing injections	101	110

Poliomyelitis Vaccination

<i>Category</i>	<i>Number of persons vaccinated (2 injections)</i>	
	<i>During 1961</i>	<i>Total since scheme commenced (including vaccinations completed in 1961)</i>
Children born in years 1943/61	1,842	22,573
Persons born in years 1933/42	712	6,323
Persons born before 1933 who were under 40 years of age	1,637	3,997
Others (Special Groups)	23	277
Expectant Mothers	67	1,159
Totals	4,281	34,329
Third doses (all groups)	4,711	29,410
Fourth doses (School children only)	5,219	5,219

B.C.G. Vaccination

Category	Number Skin Tested	Result of Heaf Test		Vaccinated with B.C.G.
		Tuberculin Positive	Tuberculin Negative	
School Children	1,586	220	1,291	1,291
Students attending further education establishments	-	-	-	-
Totals	1,586	220	1,291	1,291

**Section 28. PREVENTION OF ILLNESS, CARE AND
AFTER CARE****Chiropody**

	New cases during year	Cases being treated at end of year	Clinic attendances during year	Domiciliary treatments during year
Pre-school children	7	1	23	-
School children	550	498	2,660	-
Expectant Mothers	1	4	10	-
Physically handicapped	1	2	24	-
Aged (over 65 years of age)	571	1,860	6,285	707
Others	687	2,931	13,075	-
Total	1,817	5,296	22,077	707

Tuberculosis*Home Visits and Clinics attended*

	Tuberculosis Visitors	Health Visitors
Total of tuberculous households at end of year	1,026	-
Visits to tuberculous households during the year (excluding non-access visits)	1,273	1
Attendance at Chest Clinic sessions during the year	711	-

Extra Nourishment

Number of new cases during year supplied with free milk .. 41
 Total number being supplied free milk at end of year .. 110

Rehabilitation

Number of cases receiving rehabilitation treatment for
 whom financial responsibility accepted .. NIL

Loan of Sick Room Equipment

Number of issues made to patients during year	225
Number of articles on loan at end of year which had been on loan for:-	
(a) under 1 year	166
(b) 1 and under 2 years	76
(c) 2 and under 5 years	82
(d) 5 years and over	11

Convalescence for Adults

Number of applications during year	67
Length of stay:-	
One week	3
Two weeks	47
Three weeks	1
Four weeks	-

Of the 67 applications received, 32 were in respect of patients aged 65 years and over. Recuperative holidays were arranged and accepted by 24 of these patients whose ages ranged from 65 to 84 years.

Health Education

<i>Teaching to groups by Departmental Staff</i>	<i>No. of Sessions</i>	<i>Total Attendances</i>
(a) Clinic, Welfare Centres, Relaxation Classes	158	1,008
(b) School	224	6,341
(c) Professional Organisations	-	-
(d) Parent/Youth/General Adult Group	-	-
(e) Others	4	132
Total	386	7,481
Number of film shows given at sessions referred to above		17
Exhibitions in which department has participated ...		-

Section 29. DOMESTIC HELP

Visits by Domestic Help Organisers

	<i>Domestic Help Service</i>	<i>Night Attendance Service</i>
First visits to homes	700	9
Re - visits to homes		
(a) Domestic help present ...	352	1
(b) Night attendant present...	-	2
(c) Help/Attendant not present	2,770	7
Other visits	360	13

Help provided

	<i>Mater- nity</i>	<i>Acute Sick</i>	<i>Tuber- culo- sis</i>	<i>Chronic Sick</i>		<i>Aged not sick</i>	<i>Others</i>	<i>Total</i>
				<i>Aged</i>	<i>Others</i>			
Requests for help from new cases during the year	107	57	6	318	68	4	10	633
Cases not eligible for assistance or not requiring service	26	8	-	42	10	2	4	92
New cases helped during the year	81	49	6	339	58	2	6	541
Total cases completed during the year (a)	87	51	5	326	62	4	4	539
Cases being helped at end of year who have received help for:								
Under 3 months	-	4	2	62	10	1	-	79
3-5 months (incl.)	-	1	1	52	7	1	1	63
6-11 months (incl.)	-	1	3	119	14	-	2	139
12 months & over	-	-	13	561	54	4	-	635
Total (b)	-	6	19	797	85	6	3	916
Total cases helped during the year (i.e. total of (a) and (b))	87	57	24	1,123	147	10	7	1,455
Hours of help provided during the year	3,613½	1,901½	3244½	156275½	17,700	1,111½	687	184793½

Night Attendance Service

	<i>Seriously ill patients residing alone</i>	<i>Inability of aged husband or wife to care for seriously ill patients at night</i>	<i>Relief of relatives who have to give routine night attention to sick people</i>
Cases completed during the year and helped for:			
4 weeks & under	-	1	8
Over 4 weeks	-	-	2
Total (a)	-	1	10
Cases being helped at end of year who received help for:			
Under 3 months	-	-	3
Over 3 months	-	-	1
Total (b)	-	-	4
Total cases helped during the year (i.e. total of (a) and (b))	-	1	14
Hours of attendance provided during year	-	10	1,149½

MEDICAL EXAMINATION OF STAFF

<i>Category</i>	<i>No. of medical examinations</i>
County Council employees:	
(a) Entrants to County Council's service	153
(b) Retirement on Superannuation	1
Walthamstow Borough Council employees	327
Entrants to teaching profession and training colleges	112
Others	6
Total	599