

[Report of the Medical Officer of Health for Richmond upon Thames].

Contributors

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The Health of Richmond upon Thames



1970

LONDON BOROUGH OF RICHMOND UPON THAMES



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

PRINCIPAL SCHOOL MEDICAL OFFICER

For the Year

1970

A. M. NELSON, M.B., Ch.B., D.P.H.

HEALTH DEPARTMENT,
ELMFIELD HOUSE,
HIGH STREET,
TEDDINGTON,
MIDDLESEX.

Telephone:
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SOCIAL SERVICES COMMITTEE

as at 31st December, 1970

§ His Worship the Mayor, Councillor L. W. MILLER.

§ The Deputy Mayor, Councillor D. J. NEAL-SMITH, M.D., F.R.C.O.G.,
F.R.C.O. (CHM).

Alderman L. DEFRIES-PORTER, LL.B., M.B.I.M. (Chairman).

Councillor M. GOLD, M.R.C.S., L.R.C.P., D.Obst.R.C.O.G. (Vice-Chairman).

Alderman J. W. H. CRANE (Deputy Vice-Chairman).

Alderman W. F. Nation.

Councillor Mrs. H. M. Abell.

Councillor T. J. Attwood.

Councillor M. A. Beal.

Councillor Mrs. S. Cooper.

Councillor F. D. Gilday-Fox, B.A., J.P.

Councillor H. L. Lewis, C.B.E.

Councillor P. J. Maitland.

Councillor E. D. Vince, F.Inst.D.

Councillor Mrs. A. Woodward, J.P.

G. L. Brown, Esq., M.B., B.S., D.Obst.R.C.O.G. (Advisory.)

§ (ex-officio).

EDUCATION COMMITTEE

as at 31st December, 1970

Councillor Mrs. H. A. M. CHAMPION (Chairman)

Councillor Mrs. H. E. BELL-WRIGHT (Vice-Chairman)

Councillor A. M. LEANEY (Deputy Vice-Chairman)

Alderman R. A. J. Alcock.

Alderman C. Gompells, B.Sc., (Econ.)

Alderman H. Hall, M.P.S.,
F.S.M.C., J.P.

Councillor A. F. Arbour.

Councillor J. K. Baker, B.Sc. (Eng.),
C.Eng., M.I.Mech.E.

Councillor T. Q. Battle.

Councillor B. Bligh.

Councillor T. A. Bligh.

Councillor G. M. Cooper.

Councillor Mrs. S. Cooper.

Councillor F. D. Gilday-Fox, B.A., J.P.

Councillor S. Grose, B.A.

Councillor D. J. Harris, J.P.

Councillor C. Harston, B.A.

Councillor Mrs. E. Kramer,

M.R.C.S., L.R.C.P.

Councillor J. F. Lambeth, F.I.A.

Councillor H. L. Lewis, C.B.E.

Councillor P. J. Maitland.

Councillor T. H. F. Raison, M.A.

Councillor J. McC. Russell.

Councillor G. Tremlett.

Councillor E. D. Vince, F.Inst.D.

Councillor S. D. Wade.

Councillor W. K. Warren, F.P.S.

Councillor A. West.

Councillor Miss O. J. Wilkins.

Councillor E. W. Wilton,
M.A. (Oxon.), F.R.S.A.

Co-opted members: The Rev. Canon F. J. Davys; The Rev. C. E. Pocknee; The Rev. T. F. Valentine, M.A.; Mrs. M. B. Davies; Mr. F. A. W. Counter; Mr. C. Holman; Mr. A. C. Jordan; Mr. A. G. Leach; Mr. B. W. Pride and Mr. N. Radley.

EDUCATION, SCHOOLS AND GENERAL PURPOSES SUB-COMMITTEE

as at 31st December, 1970

§ Councillor Mrs. H. E. BELL-WRIGHT (Chairman).

Councillor C. HARSTON, B.A. (Vice-Chairman).

Alderman H. Hall, M.P.S., F.S.M.C., J.P.

Councillor B. Bligh.

Councillor T. A. Bligh.

Councillor G. M. Cooper.

Councillor Mrs. S. Cooper.

Councillor F. D. Gilday-Fox, B.A., J.P.

Councillor S. Grose, B.A.

Councillor D. G. Harris, J.P.

Councillor J. F. Lambeth, F.I.A.

Councillor H. L. Lewis, C.B.E.

Councillor P. J. Maitland.

Councillor T. H. F. Raison, M.A.

Councillor Miss O. J. Wilkins.

Mrs. M. B. Davies.

The Rev. Canon F. J. Davys.

Mr. C. Holman.

Mr. A. C. Jordan.

Mr. N. Radley.

§ Councillor Mrs. H. A. M. Champion.

§ (ex-officio).

OFFICERS

Medical Officer of Health and Principal School Medical Officer :

A. M. NELSON, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :

MARGUERITE E. M. JAMES, M.B.E., M.B., Ch.B., D.P.H.

Senior Medical Officers :

CICILY M. CLARKE, M.A., M.B., Ch.B., D.C.H.

SALLY E. FLEW, M.B., B.S., M.R.C.S., L.R.C.P., D.Obst. R.C.O.G., D.C.H.

MARY J. O'DONOVAN, M.B., B.Ch., B.A.O., L.M., D.P.H., D.C.H.

(resigned 15.11.70).

Chief Dental Officer and Principal School Dental Officer :

G. H. TUCKER, L.D.S. R.C.S.

Chief Public Health Inspector :

E. S. HERBERT, M.A.P.H.I.

Chief Nursing Officer :

MRS. M. E. WHEATLEY, S.R.N., C.M.B. (Pt. I), H.V.Cert.

Superintendent Health Visitor :

MISS D. M. WOODS, S.R.N., S.C.M., H.V.Cert.

Non-Medical Supervisor of Midwives and Home Nursing Superintendent :

MISS J. T. PARSONS, R.S.C.N., S.R.N., S.C.M., N.D.N.Cert.

Principal Social Work Organiser :

MISS D. C. CLARK, Certificate in Social Work.

Chief Administrative Officer :

H. J. PUGH.

HEALTH DEPARTMENT,
ELMFIELD HOUSE,
HIGH STREET,
TEDDINGTON,
MIDDLESEX.

July, 1971.

To : *The Mayor, Aldermen and Councillors of the
London Borough of Richmond upon Thames.*

LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report for 1970.

The techniques of medicine have now achieved a high degree of sophistication and expertise with resultant benefits to mankind. The practice of medicine is a highly respected paradox in that a skilful scientific discipline is pursued as an art moulded by humanity, humility and compassion. Medicine is involved in the causation, identification and treatment of disease and disability. The latter in a limited concept is considered by some to involve either surgical intervention or the prescribing of 'pills and potions'. Medicine concerned with the disharmony in society is a social science in its own right, although the ensuing therapy may have to be on a purely social basis. This therapy may be administered not by medical men alone, but also by others, e.g. engineers, architects, lawyers, educationists and social workers. Medicine is involved in the writing of the social prescription, but medical men do not necessarily dispense this prescription. Medicine in partnership with other disciplines aims to eradicate social disharmonies.

Two enactments were placed on the statute book during the year which bring into sharp relief this social prescription and dispensing concept. Both the Local Authority Social Services Act 1970 and the Education (Handicapped Children) Act 1970 became operative on appointed days in 1971. Thus a statutory interface has been created between the health and social welfare services. Some prescriptions for social therapy are dispensed by teams under medical direction, while others are dispensed by teams under non-medical direction but, it is hoped, with medical advice. Debate surrounds the argument where the dividing line between these teams should be. In practice the essential aim and object of any health service is the welfare of the patient.

My own view is that there is no true division between health and social services since an individual in need of help cannot determine what service he or she needs. There must be a mutually respected partnership, so that a team approach of different skill and disciplines is achieved.

Three units became operational during the year :—

1. The Strathmore Junior Training School opened its doors at the beginning of the autumn term. This school is a credit to the Borough in its provision for the mentally handicapped.

It is to be hoped the educational and social benefit to the pupils, the allaying of parental anxiety and concern, and the pride of the Authority will stand as a lasting tribute to all those involved in its creation.

2. Hostel for the Adult Mentally Handicapped, Rosslyn Road, Twickenham opened in September, 1970.
3. Day Clinic for the Elderly, Teddington.

If older people cannot get out of their homes on account of crippled feet, arthritis of the lower limbs, or cardiac and respiratory embarrassment, then loneliness can supervene. Social contact with the community outside is lost, and the insidious con-

dition of social isolation manifests itself. Elderly sick people can receive treatment at hospital as either an out-patient or as attenders at a day hospital.

Older people can attend day centres under the auspices of the social welfare services. However the older person isolated in the community is reluctant and even refuses to go along to either a day hospital or day centre. Therefore you decided to create a day unit for older people who had been medically assessed at the Maddison Clinic, Teddington, to give them an opportunity to re-establish themselves from social isolation and in time take part again in local community activities. It is still too early to draw firm conclusions about the results of this project.

The decline in the incidence of the major infectious diseases in this country has been brought about by planned, concerted immunisation programmes. German measles is on the whole mild infection. However, if a mother in early pregnancy who has little or no immunity to the disease is exposed to the infection and develops the clinical features, then the risk to the foetus can be tragic in the extreme. As national public policy vaccination against german measles is now offered to all young adolescent school girls.

Pollution and conservation of the environment are of acute public concern and debate at international, national, regional and local levels. I would direct your attention to the consistent and sustained effort by the public health inspectorate in their monitoring of the environment and taking action to prevent nuisances and hazards to the public health. This diligence is silent but effective.

A small alteration of Borough boundaries was made during the year. Under the Greater London and Surrey Order 1970 there was a transfer of Thames Ditton Island from Greater London and Richmond to the County of Surrey and Esher and Platts Eyot from Surrey and Esher to Greater London and Richmond with effect from 1st April, 1970.

In accordance with Circular 1/71 paragraph 8(c) it is noted that you took no further action during the year.

You very kindly gave Dr. Sally Flew, Senior Medical Officer, leave of absence for six months to be a member of a "Save the Children Fund" team in Nigeria.

The retirements of Mr. H. G. Easter, Deputy Chief Public Health Inspector and Mr. E. Matthews, Administrative Officer, took place during the year. Mr. Easter had previously been the Chief Public Health Inspector for the former Borough of Twickenham since 1953. Mr. Matthews had been Deputy Area Administrative Officer, Area 10, with the former Middlesex County Council, since 1949. We wish them well.

Grateful acknowledgment is made to the following for their co-operation and collaboration in the field of community medicine pertaining to, and in the service of, the residents of Richmond upon Thames:—

The family doctors;
All hospital staff;
All voluntary organisations;
The Chief Officers.

The staff of the health department have worked with diligence. I would especially thank Dr. Marguerite James, Mr. E. S. Herbert, and Mr. H. J. Pugh.

I conclude by thanking the Social Services and Education Committees, and the respective Chairmen involved, for their encouragement.

I am,

Yours respectfully,

A. M. NELSON,

Medical Officer of Health and
Principal School Medical Officer.

VITAL AND GENERAL STATISTICS 1970

Area in acres	13,971
Population (census 1961)	181,030
Population—estimated to mid-year (as supplied by the Registrar-General)	174,550
Number of inhabited houses	62,017
Rateable value	£11,489,951
Sum represented by a penny rate	£45,200

	<i>Total</i>	<i>M.</i>	<i>F.</i>
Live Births—Legitimate ...	2,220	1,149	1,071
Illegitimate ...	176	88	88
Total	<u>2,396</u>	<u>1,237</u>	<u>1,159</u>

Live Birth rate per 1,000 of estimated Population	13.7
Adjusted Live Birth rate per 1,000 of estimated Population	13.8
Illegitimate Live Births per cent. of total Live Births	7

	<i>Total</i>	<i>M.</i>	<i>F.</i>
Still Births—Legitimate ...	22	10	12
Illegitimate ...	1	—	1
Total	<u>23</u>	<u>10</u>	<u>13</u>

Still Birth rate per 1,000 live and still births	10
Total Live and Still Births	2,419

Infant Deaths (under 1 year of age):—

	<i>Total</i>	<i>M.</i>	<i>F.</i>
Legitimate ...	31	15	16
Illegitimate ...	4	2	2
Total	<u>35</u>	<u>17</u>	<u>18</u>

Infant mortality rate per 1,000 live births	15
Legitimate Infant mortality rate per 1,000 legitimate live births	14
Illegitimate Infant mortality rate per 1,000 illegitimate live births	23

Neo-Natal deaths	Under 4 weeks of age			Under 1 week of age		
	<i>Total</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>	<i>M.</i>	<i>F.</i>
Legitimate ...	23	11	12	22	11	11
Illegitimate ...	3	2	1	3	2	1
Totals	<u>26</u>	<u>13</u>	<u>13</u>	<u>25</u>	<u>13</u>	<u>12</u>

Neo-Natal mortality rate (deaths under 4 weeks) per 1,000 total live births ...	11
Early Neo-Natal mortality rate (deaths under 1 week) per 1,000 total live births...	10
Perinatal mortality rate (stillbirths and deaths under 1 week combined) per 1,000 total live and still births	20
Maternal mortality (including abortion) deaths	—
Maternal mortality rate per 1,000 live and still births	—

	<i>Total</i>	<i>M.</i>	<i>F.</i>
Deaths	2,371	1,190	1,181

Crude death rate per 1,000 of estimated population	13.6
Adjusted death rate	11.3

POPULATION

The Registrar General's estimate of mid-year population for the Borough was 174,550, which is a decrease of 2,050 compared with 1969. The natural increase (excess of births over deaths) was 25.

Year	Population	Population trend			Migration excess	
		Total increase or decrease	Percentage proportion	Natural increase or decrease	Inward	Outward
1965	181,130	- 950	- 0.52%	+ 658	—	1,608
1966	180,200	- 930	- 0.51%	+ 432	—	1,362
1967	179,040	- 1,160	- 0.64%	+ 404	—	1,564
1968	177,130	- 1,910	- 1.15%	+ 140	—	2,050
1969	176,600	- 530	- 0.42%	+ 221	—	751
1970	174,550	- 2,050	- 1.17%	+ 25	—	2,075

BIRTHS

During the year 2,396 live births were registered (a decrease of 103 compared with 1969) giving a live birth rate of 13.7 per 1,000 of the population or 13.8 when adjusted by the birth comparability factor. The latter makes allowances for differences in the age and sex distribution of the population throughout the country. The birth rate for England and Wales was 16.0.

DEATHS

The number of deaths registered in 1970 was 2,371 (an increase of 93 compared with 1969) giving a death rate of 13.6 per 1,000 of the population or 11.3 when adjusted by the comparability factor. The death rate for England and Wales was 11.7.

The table on pages 10 and 11 shows the distribution of deaths by age and cause.

Main Causes of Death

An analysis of the death returns reveals the following main causes of death:

<i>Disease</i>	<i>Percentage of total deaths</i>	<i>Death rate per 1,000 of the population</i>
Diseases of heart and circulatory system	38.17	5.17
Cancer	23.75	3.22
Bronchitis, Pneumonia, and other respiratory diseases	14.21	1.93
Vascular lesions of nervous system	10.80	1.46
Accidents, Violence	3.71	0.50

INFANT MORTALITY

During the year there were 35 deaths of infants under one year of age, a decrease of 9 on the previous year. The infant mortality rate was 15 per 1,000 live births compared with 18 for England and Wales.

An analysis of the causes of death is shown on page 9.

A major proportion of the deaths — 71.4% — occurred in the first four weeks of life. As expected prematurity, bronchitis and bronchopneumonia, respiratory distress syndrome, etc., took a high toll.

MATERNAL MORTALITY

There were no recorded maternal deaths during the year.

Infant Mortality, 1970.

Net Deaths from stated causes at various ages under one year compiled from returns received.

CAUSE OF DEATH	TOTAL		Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	1-3 months	3-6 months	6-9 months	9-12 months
	Under one year	Under four weeks								
			M F	M F	M F	M F	M F	M F	M F	M F
Total from all causes	35	25	13 11	— 1	— —	— —	3 3	1 1	— 2	— —
Congenital Malformations	2	1	1 —	— —	— —	— —	— 1	— —	— —	— —
Congenital Heart Disease	1	1	— —	— 1	— —	— —	— —	— —	— —	— —
Post-Natal Asphyxia and Atelectasis	5	5	3 2	— —	— —	— —	— —	— —	— —	— —
Respiratory Distress Syndrome ...	5	5	4 1	— —	— —	— —	— —	— —	— —	— —
Bronchitis and Bronchopneumonia	7	3	1 2	— —	— —	— —	2 —	1 —	— 1	— —
Prematurity	7	7	3 4	— —	— —	— —	— —	— —	— —	— —
Cerebral Haemorrhage	3	3	1 2	— —	— —	— —	— —	— —	— —	— —
Other	5	—	— —	— —	— —	— —	1 2	— 1	— 1	— —

Distribution of Deaths by Age and Cause
Registrar General's Official Returns, 1970

Cause of Death	Age Group																Total		Grand Total
	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75 and over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1. Tuberculosis of respiratory system	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	1	1	2
2. Late effects respiratory tuberculosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
3. Syphilis and its sequelae ...	-	-	-	-	-	-	-	-	-	-	1	-	2	1	1	1	4	2	6
4. Other infective and parasitic diseases	-	-	-	-	-	-	-	-	-	-	-	3	-	-	1	-	1	3	4
5. Malignant neoplasm, buccal cavity, etc.	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	4	1	5	6
6. Malignant neoplasm, oesophagus	-	-	-	-	-	-	-	-	1	-	4	3	4	4	4	4	13	11	24
7. Malignant neoplasm, stomach ...	-	-	-	-	-	-	-	-	-	-	5	5	9	5	7	9	21	19	40
8. Malignant neoplasm, intestine ...	-	-	-	-	-	-	-	-	-	-	15	10	13	15	15	20	43	45	88
9. Malignant neoplasm, larynx ...	-	-	-	-	-	-	-	-	-	-	1	-	4	1	3	-	8	1	9
10. Malignant neoplasm, lung, bronchus	-	-	-	-	-	-	-	-	4	1	49	15	43	12	28	10	124	38	162
11. Malignant neoplasm, breast ...	-	-	-	-	-	-	-	-	2	-	17	-	12	-	8	-	39	39	39
12. Malignant neoplasm, uterus ...	-	-	-	-	-	-	-	-	-	-	5	-	7	-	7	-	19	19	19
13. Malignant neoplasm, prostate ...	-	-	-	-	-	-	-	-	-	-	1	-	9	-	4	-	14	-	14
14. Leukaemia	-	-	-	-	-	1	-	1	-	2	4	1	2	3	4	8	10	18	18
15. Other malignant neoplasms, etc.	-	-	-	-	-	-	1	-	6	3	23	15	26	21	21	28	77	67	144
16. Benign and unspecified neoplasms	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2	1	3	4
17. Diabetes Mellitus	-	-	-	-	-	-	-	-	-	-	1	-	4	4	4	6	9	10	19
18. Avitaminoses, etc.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
19. Other endocrine etc. diseases ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	3	3
20. Anaemias	-	-	-	-	-	-	-	-	-	-	1	-	1	-	3	1	5	1	6
21. Other diseases of blood, etc. ...	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
22. Mental disorders	-	-	-	-	-	-	1	-	1	-	-	-	-	1	1	-	3	1	4
23. Meningitis	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	1	-	3	3
24. Multiple Sclerosis	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	2	-	2
25. Other diseases of nervous system	-	1	-	-	1	1	1	-	1	-	1	1	3	5	5	4	12	12	24
26. Chronic rheumatic heart disease ...	-	-	-	-	-	-	-	-	-	-	2	4	5	5	4	7	11	16	27
27. Hypertensive disease	-	-	-	-	-	-	-	-	1	-	6	2	6	4	8	16	21	22	43
28. Ischaemic heart disease	-	-	-	-	-	-	1	-	3	-	106	20	100	58	100	187	310	265	575
29. Other forms of heart disease	-	-	-	-	-	-	-	-	1	-	3	5	7	8	35	79	46	92	138

Cause of Death	Age Group																Total		Grand Total
	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75 and over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
30. Cerebrovascular disease ...	-	-	-	-	-	-	-	-	1	-	23	14	23	29	46	120	93	163	256
31. Other diseases of circulatory system	-	-	-	-	-	-	-	-	-	-	6	6	10	13	30	56	46	75	121
32. Influenza ...	-	-	-	-	-	-	-	-	-	-	5	1	7	4	3	5	15	10	25
33. Pneumonia ...	3	4	1	-	-	-	-	1	1	-	9	3	18	18	55	65	87	91	178
34. Bronchitis and emphysema ...	-	-	-	-	-	-	-	-	-	-	19	6	24	6	36	12	79	24	103
35. Asthma ...	-	-	-	-	-	-	-	1	-	1	5	-	1	-	-	2	6	4	10
36. Other diseases of respiratory system	1	1	-	-	-	-	-	-	-	-	1	-	4	3	3	5	9	9	18
37. Peptic ulcer ...	-	-	-	-	-	-	-	-	-	-	-	1	4	-	-	3	4	4	8
38. Appendicitis ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
39. Intestinal obstruction and hernia	2	1	-	-	1	-	-	-	1	-	-	-	2	1	4	2	10	4	14
40. Cirrhosis of liver ...	-	-	-	-	-	-	-	-	-	-	1	1	1	-	-	-	2	1	3
41. Other diseases of digestive system	-	-	-	-	-	-	-	-	-	-	4	4	5	4	5	11	14	19	33
42. Nephritis and nephrosis ...	-	-	-	-	-	-	-	-	-	2	1	-	3	-	1	-	5	2	7
43. Hyperplasia of prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	3	-	4	-	4
44. Other diseases, genito-urinary system ...	-	-	-	-	-	-	-	-	-	1	2	1	1	4	2	6	5	12	17
45. Diseases of skin, subcutaneous tissue	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	1	2	3
46. Diseases of musculo-skeletal system	-	-	-	-	-	-	-	-	-	1	1	-	2	4	2	7	5	12	17
47. Congenital anomalies ...	3	2	1	-	-	-	2	-	-	-	-	-	2	-	-	1	8	3	11
48. Birth injury, difficult labour, etc. ...	5	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	5	10
49. Other causes of perinatal mortality	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3	6
50. Symptoms and ill-defined conditions ...	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	4	1	5	6
51. Motor vehicle accidents ...	-	-	1	-	3	-	2	1	4	1	2	1	3	4	2	4	17	11	28
52. All other accidents ...	-	-	-	-	1	-	2	-	1	2	9	-	4	3	1	10	18	15	33
53. Suicide and self-inflicted injuries ...	-	-	-	-	-	-	1	1	1	5	5	2	4	4	-	4	11	16	27
54. All other external causes ...	-	-	-	-	-	-	1	-	1	1	1	1	1	-	-	-	4	2	6
	17	18	3	1	6	1	13	4	29	21	318	152	359	264	445	720	1190	1181	2371

INFECTIOUS DISEASES

The number of notifications received during the year, compared with 1969 may be summarised as follows:

Disease.	1970	1969
Dysentery	4	34
Encephalitis (Acute)	1	1
Food Poisoning	11	22
Infective Jaundice	37	34
Malaria	7	2
Measles	380	262
Meningitis (Acute)	4	7
Ophthalmia Neonatorum	—	—
Scarlet Fever	48	59
Whooping Cough	17	12

The table on page 17 gives the number of cases notified under age groups.

Scarlet Fever.

The incidence of this disease is still ranking second to measles in number of notified cases. During the year 48 cases were notified, a slight reduction on the 1969 figures. Nearly half the cases were in the 5-9 age group with both sexes being equally susceptible.

Whooping Cough.

Of the seventeen cases notified, two are recorded as having been immunised.

Measles.

There was a sharp rise in the number of cases due to a minor epidemic during the spring and summer months, which was attributed to a temporary shortage of vaccine.

The summer outbreak prompted many parents to have their children vaccinated and demand for vaccine remained high.

Only eight of the notified cases were recorded as having been immunised.

The histogram on page 14 shows the comparison of notified cases since 1959.

Previous years figures are as follows:

1959	1957	1965	1992
1960	57	1966	888
1961	2422	1967	1400
1962	112	1968	262
1963	1885	1969	262
1964	234	1970	380

The distribution of cases during each quarter of the year was as follows :

	M.	F.	Total
1st January — 31st March ...	4	4	8
1st April — 30th June ...	79	74	153
1st July — 30th September ...	61	66	127
1st October — 31st December ...	55	37	92
Total ...	199	181	380

From the table below it will be seen that the first nine years of childhood suffer the major incidence of the disease :

	M.	F.	Total
Under 1 year ...	6	3	9
1 year ...	16	23	39
2 years ...	16	15	31
3 years ...	25	17	42
4 years ...	36	23	59
5 — 9 years ...	91	94	185
10 — 14 years ...	4	3	7
15 — 24 years ...	2	2	4
25 + ...	3	1	4
Total ...	199	181	380

Vaccination and Immunisation (see page 32).

Dysentery.

All four cases notified were of bacillary dysentery. It was not necessary to exclude any contacts from their normal employment.

In order to standardise the procedure for the control of dysentery and food poisoning an agreement was reached with adjacent authorities to adopt that which was recommended in the guide issued jointly by the Society of Medical Officers of Health and the Public Health Laboratory Service. This guide will not necessarily be appropriate for all situations and the circumstances of each individual case will be considered.

Food Poisoning.

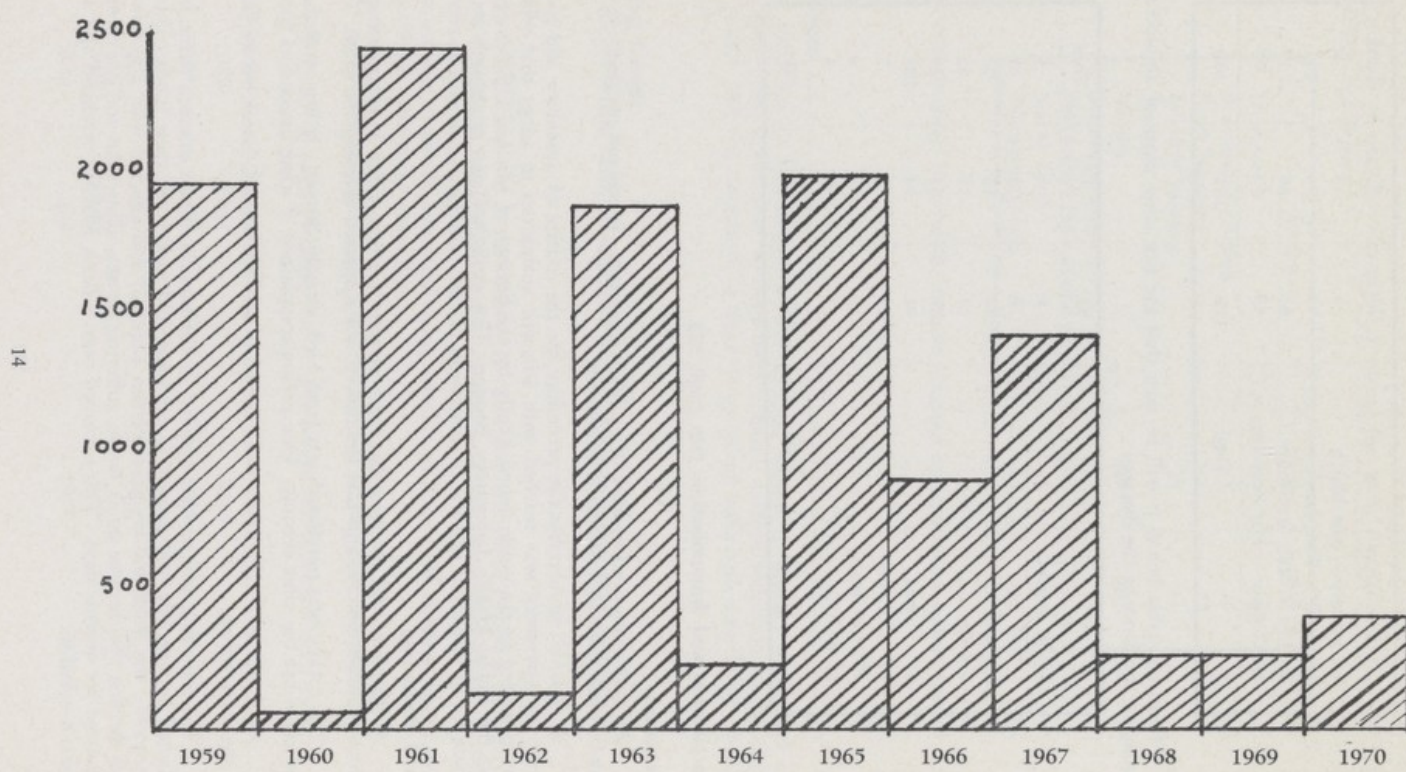
A complaint was received that three persons had been taken ill after eating a meal which included turkey, and that the turkey was suspected as being the cause.

The turkey was purchased as a fresh bird, already cleaned. It was stuffed, cooked and eaten hot the same evening. One person complained of some discomfort that night.

After the meal the turkey was allowed to cool for about 2 hours before being put in the refrigerator.

The following day another member of the household had stomach pains, but both affected persons felt well enough to eat some cold turkey for their lunch. During the afternoon, the third and youngest person (age 23) was affected with abdominal pain, and the first two became much worse, suffering nausea, acute pain and diarrhoea which persisted for several days. This occurred over a Bank Holiday weekend and a doctor was not called in.

NUMBER OF CASES OF MEASLES 1959 TO 1970



This Department was informed and the remains of the turkey were immediately sent to the Public Health Laboratory for analysis. *Clostridium welchii* was isolated. This organism is usually found to be present in the live animal as distinct from being infected by careless handling. The organism is highly resistant to cooking, and thrives on warm heat.

This case is typical of food poisoning caused by *Clostridium welchii*. Almost certainly the live bird carried the organism which cooking failed to destroy. One person only was mildly affected when the meat was eaten hot, but when the carcass was left to slowly cool the organisms multiplied with the result that when the meat was consumed cold all persons were seriously affected.

Previous years figures are as follows:—

1962	14	1967	3
1963	6	1968	30
1964	8	1969	22
1965	6	1970	11
1966	—		

Infective Jaundice.

Thirty-seven cases were notified during the year of which ten were admitted to hospital. In one episode a mother and two sons were involved and in another three children in the same family were affected, but all other cases were isolated incidents.

In December 1970 arrangements were made with West Middlesex Hospital to assist in a pilot survey of the epidemiological aspects of the disease and this trial is still in progress.

The age distribution of the notified cases was as follows:

	M.	F.	Total
Under 1 year	—	—	—
1 year	—	—	—
2 years	1	—	1
3 years	—	1	1
4 years	—	—	—
5—9 years	—	—	—
10—14 „	3	3	6
15—24 „	8	6	14
25—34 „	6	3	9
35—44 „	—	—	—
45—64 „	1	1	2
65+	3	1	4
TOTAL	22	15	37

Smallpox.

No cases of smallpox were notified during the year.

Under the Public Health (Aircraft) Regulations, 1966, and the Public Health (Ships) Regulations, 1966 arrivals in this country from endemic areas who are not in possession of valid international certificates of vaccination against Smallpox are placed under surveillance by the Port or Airport Medical Officer for a period of fourteen days.

43 such cases of persons proceeding to addresses situated in the Borough were notified during the year. All were kept under surveillance for the stipulated period.

Venereal Disease.

The following new cases have been notified by the undermentioned hospitals of patients treated from this Borough during 1970.

				<i>New Cases</i>		
				<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other Conditions</i>
						<i>Total</i>
West Middlesex	...	...	...	7	60	456
The London	...	...	...	—	3	6
St. Thomas'	...	...	...	—	2	44
St. Helier	...	...	...	—	3	14
Westminster	...	...	...	—	4	40
Dreadnought Seaman's	...	...	...	—	—	1
St. Bartholomew's	...	...	...	—	1	23
Central Middlesex	...	...	...	1	—	3
The Middlesex	...	...	...	1	6	82
						89

Only one request was received from any of these hospitals to assist in contact tracing and it was found that the patient had moved without leaving a forwarding address. Indestructible notices have been placed in all public conveniences in the Borough giving information as to the nearest hospital and times for treatment. This subject is incorporated into talks given regularly to senior pupils of local schools.

Medical Arrangements for Long-stay Immigrants.

The number of immigrants giving destination addresses situated in this Borough showed a decrease compared with 1969 but there is still a large number (25%) who do not arrive at the address given and of whom all trace is lost immediately after arrival.

All destination addresses are visited by Public Health Inspectors who advise immigrants of the scope of the National Health Service and every effort is made to persuade them to have a chest X-ray as soon as possible. Once again no immigrant admitted to any history of chest infection.

Where children accompany the immigrant, follow up visits are made by the Health Visitor.

The following table shows from which country the immigrants passports were issued :

<i>Country where passport issued</i>							<i>Number of Immigrants</i>	
							1970	1969
COMMONWEALTH COUNTRIES.								
Caribbean	...	...	...	...	...	...	9	8
India	...	...	...	...	...	...	15	36
Pakistan	...	...	...	...	...	...	8	6
Other Asians	...	...	...	...	...	...	15	23
African	...	...	...	...	...	...	19	19
Other	...	...	...	...	...	...	36	33
NON-COMMONWEALTH COUNTRIES.								
European	...	...	...	...	...	...	31	61
Other	...	...	...	...	...	...	15	5
Total							148	191

Cases of Infectious Diseases Notified during the year 1970

DISEASE	CASES NOTIFIED AT VARIOUS AGES (YEARS)														Total Cases Notified
	Under 1 Year	1	2	3	4	5-9	10-14	15-19	20-24	25-34	35-44	45-64	65 and Over	Age not known	
Dysentery	-	1	-	-	-	-	-	2	-	-	-	1	-	-	4
Encephalitis (Acute)	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Food Poisoning	-	-	-	-	-	-	2	-	1	5	1	1	1	-	11
Infective Jaundice	-	-	1	1	-	-	6	6	8	9	-	2	4	-	37
Malaria	-	-	-	1	-	-	-	-	-	4	1	1	-	-	7
Measles	9	39	31	42	59	185	7	-	4	4	-	-	-	-	380
Meningitis (Acute)	-	-	-	-	-	3	1	-	-	-	-	-	-	-	4
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	-	2	4	4	8	17	5	2	1	3	-	1	1	-	48
Whooping Cough	5	2	-	-	-	5	2	-	2	-	-	1	-	-	17
Total ...	14	44	36	48	67	210	23	10	17	25	2	7	6	-	509

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal and Post-Natal Clinics

Number of women attended :			
Ante-Natal	Attendances	Post-Natal	Attendances
489	1,632	32	34
Sessions held 377.			

Ante-natal relaxation and post-natal exercises are taught in all the clinics. 866 women made 3,137 attendances at these clinics during the year.

Incidence of Congenital Malformations

Since 1st January, 1964 the Ministry of Health (now the Department of Health and Social Security) have required all congenital malformations in new-born babies to be notified by Local Health Authorities to the Registrar General, so as to enable the latter to complete statistical information from which to detect any national or regional changes in the pattern of congenital malformations.

The number of babies born with defects during 1970 was 39.

Family Planning

Medical Cases.

The arrangement whereby the Council pays for women referred by its own medical officers on medical grounds continued in 1970 when 49 patients were referred.

Domiciliary Cases

In accordance with the Council's scheme, 48 cases were referred to the Domiciliary Service of the Family Planning Association up to the end of the year.

Youth Counselling Service

The Youth Counselling Service has now been established for 18 months. There were 36 new cases during the calendar year and 144 interviews were carried out. The majority of the clients were under 21; only three were young men. The trend observed in the previous annual report on the service continues to be borne out by subsequent work. The majority of the clients were young women seeking contraceptive advice or help in coping with the problems of termination, who are frequently referred to the clinic because they are felt to be in need of help with emotional problems. A number of the clients are referred with other personal difficulties.

Referrals are received from many different sources which are listed below :—

Gynaecologists	...	...	...	4	Community Care Association	...	...	4
General Practitioners	...	...	...	2	Voluntary Workers	...	...	1
Health Department	...	...	...	6	Youth Advisory Service	...	...	2
Mental Welfare	...	...	...	1	Colleges	...	...	4
Family Planning Association	...	...	...	1	Relatives	...	...	1
Children's Department	...	...	...	3	Friends	...	...	6
National Council for the Unmarried	...	...	...	...
Mother and her Child	...	...	...	1	Total			36

The close association with the Royal Hospital, Richmond has been maintained. It is gratifying to note the number of clients referred from other agencies but it would be encouraging if the public were more generally aware of the existence of the clinic so that more youngsters were able to refer to clinic directly for help.

The work of the clinic frequently led to close co-operation with the Children's Department and the Probation Service and in some instances the clinic staff has supported quite disturbed young people until appointments have been arranged for them to see a psychiatrist. Facilities for the treatment of psychiatrically ill adolescents are very limited and concern for this situation continues.

Discussions with other agencies about cases and with colleagues from other boroughs, who wanted to know more about the clinic as they feel a need for similar facilities to be provided in their own area, took up a considerable amount of time, much of it outside clinic hours.

The secretary left at the end of the year, having nursed the clinic through its administrative beginnings and her help was greatly appreciated.

Care of Unsupported Mothers and Their Babies

Miss H. Oliver, Social Welfare Worker, comments:—

As long ago as 1943, the Ministry of Health empowered local authorities, if they so wished, to employ specialist social workers to work in the field of unsupported mothers.

The need for this work by health departments was again underlined in the National Health Service Act, 1946 under Section 22 which made the care of mothers and young children the responsibility of the health departments. Now that this great pioneering social work is to be passed to the new Social Services Department, this will therefore be the last report to be given by the Health Department.

Within the limits of the service the work may be said to have been an unqualified success, the illegitimate infant mortality rate, although still higher than among those legitimately born, is lower than at any time, and this is part of the test of that success.

The point was made in the annual report for 1966 and long before Seebohm that "in the wider field one would wish to see the activities of local authorities extended on behalf of the unsupported mother and beyond the scope of the National Health Service Act. The point at which a mother decides to keep her child is the point at which she is most vulnerable and in need of help. The responsibility for solving her dilemma must surely rest with the statutory welfare departments if she has no home to which she can go."

This is the field in which the new Social Services Department will be called upon to act.

Total Number of New Cases referred in 1970:—

Unsupported mothers	...	...	...	...	...	...	...	...	Total
									107
Referred by									
Medical Social Workers	...	...	...	...	...	...	...	...	42
Doctors	...	...	...	...	...	...	...	...	21
Voluntary Social Workers	...	...	...	...	...	...	...	...	12
Health Visitors	...	...	...	...	...	...	...	...	14
C.A.B.	...	...	...	...	...	...	...	...	1
N.C.U.M.C.	...	...	...	...	...	...	...	...	5
Children's Department	...	...	...	...	...	...	...	...	5
Parents	...	...	...	...	...	...	...	...	2
Department of Health & Social Security, Housing and Welfare Departments	...	...	...	...	...	...	...	...	5
									107

THE MOTHERS

Marital Status			Domicile		Occupation			
Single	...	99	In area	...	76	Office Workers	56	
Divorced	...	4	Outside area		31	Factory Workers	10	
Separated	...	3				Domestic and		
Widowed	...	1				Hotel Workers	9	
Education			Religion			Nurses	...	7
Sec. Mod.	...	86	C. of E.	...	70	Students and		
Grammar	...	10	R.C.	...	27	Schoolgirls	14	
Convent	...	3	Free Church		7	Teachers	...	5
Training			Buddhist	...	1	Civil Servants	3	
College	...	5	Mohammedan		1	University		
University	...	3	Lutheran	...	1	Lecturers...	1	
						Social Worker	1	
						Accountant		

Ages				Countries of origin other than G.B.			
14 years	...	2		Eire	...	14	
15 "	...	3		Australia	...	3	
16 "	...	9		France	...	2	
17 "	...	15		Morocco	...	1	
18 "	...	6		Mauritius	...	1	
19 "	...	12		Ethiopia	...	1	
20 "	...	8		Italy	...	1	
21-30 yrs.	...	41		Thailand	...	1	
31-40 "	...	10		Sweden	...	1	
42 "	...	1					

PUTATIVE FATHERS

Marital Status			Ages			Countries of origin other than G.B.			
Single	...	61	16 years	...	2	Eire	...	...	14
Married	...	24	17	„	4	W. Indies	...	...	3
Separated	...	7	18	„	10	France	...	...	2
Unknown	...	15	19	„	10	Canada	...	...	2
			20	„	19	India	...	...	3
			21-30 yrs.	...	36	Australia	...	...	2
			31-50 „	...	24				
			Unknown	...	2				
Occupation									
Teachers	...	11							
Lecturers	...	2							
Students	...	22							
Chefs	...	2							
Male Nurses		2							
Manual									
Workers	...	29							
Office Workers		32							
Unknown	...	7							

Ways in which unsupported mothers have been helped.

By admission to working girls hostels in early pregnancy	...	...	11
By admission to maternity homes and hostels	...	...	26
By providing private accommodation	...	...	8
By reconciliation with parents or relatives	...	...	14
By private financial agreements or affiliation orders	...	...	9
By adoption through registered adoption agencies	...	...	30
By fostering arrangements and private nurseries	...	...	21
By temporary care provided by the Children's Department pending other arrangements	...	...	2
By satisfactory residential posts	...	...	2
By gifts of clothing, cots, prams and grants	...	...	12
By arrangements made for residential care but later cancelled...	...	...	11
By vacancies found in flatlet houses	...	...	3

At the end of 1970 the mothers who decided to keep their babies were living in the following way

Had returned to parents or relatives	...	...	27
Had married putative father	...	...	6
Had married other than putative father	...	...	4
Were co-habiting	...	...	12
Were living in lodgings or own home	...	...	9

Mothers who parted with their babies or lost them

By adoption	...	...	30
Miscarriages	...	...	2
Terminated (those known)...	...	...	5
Still in care at end of the year	...	...	1

Arrangements incomplete at end of year — 7

Cases who left district and whose decisions were not known	4
--	-----	-----	---

Surveys

The department has taken part in a number of surveys during the year (either during the actual period of the survey or research project or later in the various follow-up functions) which has included the following :—

Sponsoring Body.	Subject of Survey.
Greater London Council.	Children suffering from spina bifida.
Institute of Child Health.	A study of mothers of children born with anencephaly or spina bifida cystica in the Greater London area.
Oxford University.	Childhood cancers.
National Birthday Trust Fund and the Royal College of Obstetricians and Gynaecologists.	Perinatal Mortality Survey.
Department of Medicine, Charing Cross Hospital Medical School.	Urinary Tract Infections in Women.
Hammersmith Hospital, Royal Post-graduate Medical School.	Serum lipoproteins in infancy related to dietary history.
National Bureau for Co-operation in Child Care.	National Child Development Study.

Guthrie Tests — Phenylketonuria

As recommended by the Department of Health and Social Security and the Medical Research Council, all infants have continued to be tested for a rare but important metabolic condition, hyperphenylalaninaemia (phenylketonuria), by taking a blood sample on or soon after the sixth day of life. Laboratory facilities are provided at Queen Mary's Hospital, Carshalton, and I am grateful to Dr. R. L. Newman for effecting a prompt and efficient service.

I very much hope that all maternity hospitals will continue their policy of informing me whether or not this test has been performed if the baby is still in their care on the sixth day of life. Without this information the chances of providing an efficient screening service are very much reduced.

I am happy to report that during the year no positive result was recorded.

Special Observation/Handicap Register

During the latter half of the year a scheme was instituted whereby any child whose general progress was in doubt or who appeared to be at especial risk of developing a handicap was included in a register. This register enables special care to be taken to ensure that these children, above all others, will be observed at regular intervals and appropriate help and advice given where necessary. Previously, other registers of "at risk" groups of children had been tried but were not found suitable or adequate for the purpose. The present scheme is based more on clinical identification and due to its very nature will be more selective than formerly.

At the end of the year, 207 children under five years of age had been identified as requiring special observation whilst 115 children had been classified as having a definite continuing physical and/or mental handicap. There will undoubtedly be more young children living in the Borough in these categories since the extensive task of considering every child will take some time to complete.

Early Detection of Deafness

In order that children who have a hearing loss may be detected as early as possible, routine hearing tests are performed by the health visitors and clinic doctors from the age of six months.

Ophthalmia Neonatorum

(See page 55).

Child Health Clinics

At the end of the year, there were 12 child health clinics. (For location of clinics etc. see map inside the cover at the end of the report). One clinic has 6 sessions a week, two have 3 sessions a week, 7 have two sessions a week, 2 have one session a week.

To augment the above the arrangement made with Surrey County Council for the use of its mobile clinic was continued. Five sessions in alternate weeks are held at sites in Hampton, Twickenham and Whitton.

For details of attendances etc. during the year, see page 25.

Developmental Assessments

During the past two years it has become possible to offer to children attending the clinics a short screening assessment of the child's general development and progress. This is in accordance with the Sheldon report of 1967 and recommendations of the Department of Health and Social Security.

These assessments have a number of aims:—

- (1) To identify as early as possible any deviation from or abnormality of development that could lead to continuing disability.
- (2) If such a deviation is found to institute further investigation and/or treatment in conjunction with the family doctor, parents and others concerned.
- (3) To identify any child at special risk of abnormal development and ensure that progress is observed at regular intervals.
- (4) To help parents to understand the principles of child development in general and of their own child in particular.

In relation to the last point it is worth noting that many mothers have shown great interest in these screening procedures and have been anxious to discuss how they can best help their child's general progress appropriately.

The routine assessments are carried out six-monthly during the first two years of life and thereafter at yearly intervals until the child enters school. This involves

special training in child development and the majority of medical officers have attended courses to help them in this work.

Dental Treatment — Expectant and Nursing Mothers and Young Children

Mr. G. H. Tucker, L.D.S. R.C.S., Chief Dental Officer, reports as follows:—

The number of attendances and the amount of treatment given during the year is shown in Tables I and II which follow:—

Table I.

Pre-School Children

Examined at clinic ...	...	...	600
Requiring treatment	...	...	274
Commenced treatment	...	...	264
Attendances for treatment	...	...	613
Fillings inserted	...	...	365
Extractions	...	...	146
General Anaesthetics	...	...	72

Table II.

Expectant and Nursing Mothers

Examined ...	...	...	...	96
Requiring treatment	...	...	...	81
Commenced treatment	...	...	...	79
Attendances for treatment	...	...	...	193
Fillings inserted	...	...	...	122
Extractions	...	...	...	48
Gum treatment	...	...	...	23
General Anaesthetics	...	...	...	7
Dentures supplied	...	...	...	8
X-rays taken	...	...	...	12

The figures in the above tables show very little change from the previous year (although 19 less sessions were required to complete treatment) in spite of continued efforts by health visitors and departmental medical officers to encourage mothers to bring their pre-school children for inspection.

Nurseries and Child-Minders Regulation Act, 1948

The following table gives details of the registrations during 1970:—

	Day Nurseries.		Child-Minders.	
	Number	Places	Number	Places
1st January, 1970 ...	68	1724	168	796
New Registrations ...	10	240	79	167
Cancellations ...	6	117	30	178
31st December, 1970 ...	72	*1847	217	*785

* There were during the year variations in the permitted number of children which are not reflected above.

Daily Minders

There were several cancellations during the year of registered daily minders taking the higher numbers of children for all-day care. This in some cases was for economic reasons. The Department of Health and Social Security's general recommendation that no woman without assistance should mind more than 3 children under the age of five years is an excellent one; this, however, has restricted new applicants who are loathe to increase costs by employing an assistant. Therefore, this year, in spite of an increase in the number of registrations, our number of places for children has been reduced. Discussion has taken place about the provision of suitable courses for child minders.

There were no daily minders receiving fees from the authority at the end of the year.

Playgroups (Pre-School)

In all parts of the country the desirability of providing facilities for children 2-5 years is recognised.

Included in the total numbers of registered daily minders and day nurseries are 91 playgroups offering 1,872 places for morning sessions. Enquiries are received regularly by people interested in starting new groups and encouragement and advice are given. Although the need is apparent it is essential that the leaders of these groups should be suitably qualified and the aim is to raise the present standards. Richmond Adult Institute have two courses for playgroup leaders, one introductory course and a more comprehensive three-term course. These courses are run with close co-operation from the Health Department and lectures are given by members of staff. Visits of observation have been arranged to selected playgroups in the Borough for playgroup leaders as well as for students on the courses.

Local Authority Day Nurseries

The three day nurseries in the Borough offer 148 places. The circumstances governing admissions to the day nurseries may be social, medical or financial. Priority is given to children from deprived home backgrounds. Sixty-six per cent of children attending are from single parent families, either the children of unmarried mothers or broken marriages. In some cases the day nursery place has been able to prevent the necessity of taking children into care. There is great pressure on Parkshot and Gifford Lodge and they usually carry a waiting list of several months. Demand at Barnes has been less and if some means of transport could be provided for the children the load could be more evenly distributed. Many students in the field of education, social work, child care as well as health visitor students, have visited nurseries to observe child development and day care.

Mayoral Visits

All three day nurseries were visited at Christmas time by the Mayor and Mayoress, Councillor and Mrs. Lewis Miller, visits which were greatly appreciated.

Welfare Foods

The Council is responsible for the distribution of welfare foods (National Dried Milk, cod liver oil, fruit juices, etc.) supplied by the Department of Health and Social Security.

In addition various proprietary brands of dried milk and dietary supplements are sold at the child health clinics on the recommendation of the medical officers, health visitors or family doctors. I gratefully acknowledge the work of all voluntary helpers.

Cervical Cytology (Well Woman Clinics)

This service expanded during the year from six sessions per fortnight to thirteen sessions per fortnight. These sessions are held at seven clinics in the Borough and 1,290 women made 1,326 attendances. Six women had positive smear tests. All were referred to their personal medical attendant for further investigation.

Despite this expansion not many women in age groups at greatest risk of developing cervical cancer are coming forward for examination and health education efforts are constantly being made to improve this situation.

Child Health Clinics

Number of children who attended during the year				Number of sessions held by				Total number of sessions in columns (5)–(8)	Number of children referred elsewhere
Born in 1970 (1)	Born in 1969 (2)	Born in 1965–1968 (3)	Total (4)	Medical Officers (5)	Health Visitors (6)	G.P.s. employed on a sessional basis (7)	Hospital medical staff (8)		
2294	1982	2223	6499	1304	106	—	—	1410	274

Total attendances during the year 44,859.

DOMICILIARY MIDWIFERY AND HOME NURSING SERVICES

Staff as at 31st December, 1970

- 1 Non-Medical Supervisor of Midwives and Home Nursing Superintendent.
- 1 Deputy Non-Medical Supervisor of Midwives and Home Nursing Superintendent.
- 6 Full-time Midwives.
- 1 Part-time Midwife.
(0.5)*
- 5 Full-time District Nurses/Midwives.
- 1 Part-time District Nurse/Midwife.
(0.75)*
- 1 Full-time Senior District Nurse.
- 32 Full-time District Nurses.
- 7 Part-time District Nurses.
(3.5)*
- 8 Part-time District Nurse Assistants.
(4)*

* equivalent whole-time.

MIDWIFERY SERVICE

Training

Five midwives are approved as teachers.

Two midwives attended a refresher course as required by the rules of the Central Midwives Board. Two Midwifery Tutor Diploma students spent a week observing the community services in the Borough as part of their training.

Seventeen pupil midwives from West Middlesex Hospital, Isleworth, and Queen Charlotte's Hospital, Hammersmith, completed their three months period of training on the district.

Twelve nurses from West Middlesex Hospital taking their obstetric training spent a half-day on the district observing the work of the domiciliary midwives.

Transport

All the domiciliary midwives drive cars. Two use Council vehicles; the remainder have their own cars.

Ante-natal Clinics

Total weekly sessions during year (midwives only present)	...	207
" " " " " (medical officer present)	...	170
" " " " " at family doctors' clinics	...	325

Mothercraft

Mothercraft and relaxation classes were held at all clinics. A total of 866 women attended.

Deliveries attended by Domiciliary Midwives

Number of domiciliary confinements attended by midwives under N.H.S. arrangements.			Number of cases delivered in hospitals and other institutions but discharged and attended by domiciliary midwives before 10th day
(1) Doctor not booked	(2) Doctor booked	(3) Total	(4)
1	256	257	729

This table relates to women delivered, and not, in the case of multiple births, to infants.

All midwives in the domiciliary midwifery service have been advised that patients, who are to have a domiciliary confinement, should be referred to their family doctor either for booking or for the latter to refer the patient to a practitioner on the obstetric list.

Visits by Domiciliary Midwives

A total of 12,970 visits were made by midwives as follows:—

Ante-natal	...	...	...	...	2,749
During labour	...	...	...	...	533
Nursing, following domiciliary confinement	...	...	...	...	3,227
Nursing, following institutional discharge	...	...	...	...	4,551
Home conditions reports	...	...	...	...	748
Others	...	...	...	...	1,162
Total					12,970

Notification of intention to practise

Under the rules of the Central Midwives Board, 14 midwives notified their intention to practise within the Borough. Thirteen of these were the Council's domiciliary midwives; the other a domiciliary midwife practising privately.

Medical Aid

Medical aid was required for 127 patients as follows:—

During Pregnancy		Infant		In Labour		Puerperium	
Mild Toxaemia	6	Sticky eyes	11	Foetal Distress	8	Abscess in groin	1
Ante-partum		Prematurity	1	Premature		Engorged	
haemorrhage	4	Jaundice	4	Labour	1	breasts	1
Early rupture		Septic spots	3	Delay in Labour		Infected	
of membranes	1	Swelling in leg	1	(1st stage)	2	episiotomy	1
		Thrush	8	Delay in Labour		Retention	
		? Congenital		(2nd stage)	1	of Urine	1
		malformation	3	Retained		Pyrexia	4
		Circumcision	1	placenta	1	Excessive Lochia	6
		Coryza	5	Ruptured		Offensive Lochia	1
		Feeding		perineum	22	Post-partum	
		problems	4	Incomplete		haemorrhage	1
				placenta	1	Subinvolution	5
				Raised blood		Muscular pain	1
				pressure	1	? Influenza	2
				Maternal		Raised blood	
				distress	1	pressure	1
				Undiagnosed		Thrombo	
				twins	1	phlebitis	7
				Ante-partum			
				haemorrhage	1		
				Post-partum			
				haemorrhage	3		

Premature Births

Number of premature births (as adjusted by any notifications transferred in or out of the area).

Weight at birth	Premature live births												Premature stillbirths	
	Born in hospital				Born at home or in a nursing home									
					Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
	Total births	Died			Total births	Died			Total births	Died			Born	
within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	in hospital	at home or in a nursing home	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	
1 2 lb. 3 oz. or less ...	4	2	1	—	—	—	—	—	—	—	—	—	5	—
2 Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ...	9	4	1	—	—	—	—	—	—	—	—	—	1	—
3 Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. ...	24	2	—	—	2	1	—	—	—	—	—	—	—	1
4 Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ...	27	1	1	—	1	—	—	—	1	—	—	—	3	—
5 Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ...	80	2	1	—	1	—	—	—	—	—	—	—	—	—
6 Total ...	144	11	4	—	4	1	—	—	1	—	—	—	9	1

1 = 1,000g, or less, 2 = 1,001 – 1,500g, 3 = 1,501 – 2,000g, 4 = 2,001 – 2,250g, 5 = 2,251 – 2,500g.

Early Discharges

The domiciliary midwives nursed 729 mothers and babies discharged from hospital early in the puerperium. The majority of these mothers had planned discharges.

Maternity Outfits

A maternity outfit is supplied free to each expectant mother arranging her confinement at home under the National Health Service, as well as — if requested — to those entering private nursing homes.

A smaller pack is supplied to patients discharged from hospital 48 hours after delivery.

Maternity Liaison Committee

As Medical Officer of Health, I am a member of the Maternity Services Liaison Committee Catchment Area IV, whose purpose is to discuss midwifery problems of hospital, family doctors, and the local authority health department.

HOME NURSING SERVICE

Training

5 district nurses received district training.

84 student nurses from West Middlesex, Royal Richmond, Barnes, Surbiton, and The Middlesex hospitals accompanied the district nurses on domiciliary visits. This is part of the training programme and enables them to see at first sight some of the services in the community. Seven student nurses from Chiswick Polytechnic undertaking the S.R.N. Integrated Training were assigned to district nurses in the Borough, for varying periods for district nursing observation and experience.

Persons nursed and Visits made

Total number of persons nursed	...	...	2,984
Number of above over 65 years of age	...	...	2,064
Number of above under 5 years of age	...	...	8
Total number of visits	...	...	98,115

Types of Care given

Number of injections	...	...	24,713
Number of dressings	...	...	17,163
Number of visits for general nursing care...	...	...	27,785
Number of baths	...	...	16,039

The remaining visits were made to patients needing supervision and/or support.

District Nurse Assistants

The number of district nurse assistants was increased to 8 by the end of 1970.

Marie Curie Memorial Foundation. Area Welfare Grant Scheme

The Borough continues to participate in the Area Welfare Grant Scheme providing for the urgent needs of cancer patients who are being nursed at home. Such assistance is only given "in kind" and covers for a limited period, day and night nursing, special equipment, linen and bedding, clothing, extra heating and nourishment. Thirty patients received help with night and/or day nursing on 227 occasions.

HEALTH VISITING

Staff as at 31st December, 1970

1	Chief Nursing Officer.
1	Superintendent Health Visitor.
29	Health Visitors (includes 2 Field Work Instructors, 3 Group Advisers).
5 (2.5)*	Part-time Health Visitors.
11 (4.0)*	Part-time Clinic Nurses.
1	Health Assistant.
1	Tuberculosis Health Visitor.
3	Student Health Visitors.

* equivalent whole-time.

Fifty-one students from West Middlesex, Royal Richmond, and The Middlesex Hospitals accompanied health visitors on domiciliary visits and/or also attended the local health authority clinics.

Two students from Chiswick Polytechnic undertaking the integrated S.R.N./N.D.N./H.V. Course were assigned to health visitors for one week's observation in practical health visiting.

Training and Refresher Courses

Two health visitors attended Field Work Instructor courses, and four attended other refresher and training courses.

Family Doctors and Local Authority Nursing Staff

The table on page 31 summarises the position at the end of the year concerning the attachment/liaison of nursing staff with family doctors in the Borough.

Local Health Authority Nursing Staff

Practice No.	No. of Health Visitors	No. of Midwives	No. of District Nurses
1.	1	1	
2.	2		
3.	1½		1
4.	2		
5.		1	
6.		1	
7.		1	
8.		1	
9.			1
10.			1
11.		1	
12.			1

In practices 3, 9, 10 and 12 members of the nursing staff are fully attached to the practices, i.e. they provide, in consultation with the family doctors, the local authority health services in their particular sphere for the patients of the practices exclusively.

In practices 1, 2 and 4 the health visitor attends the doctors child welfare (child health) clinics and liaises between the doctors and the appropriate health visitors for those patients who do not live within her own geographical area.

In practices 1, 5, 6, 7, 8 and 11 the midwife attends the family doctor's ante-natal clinics.

These schemes are kept under constant review and new applications for attachment or liaison are considered in relation to the family doctors' requirements and the local authority staff available.

Health Visiting

	Cases visited by health visitors	Number of cases
1	Total number of cases	10,649
2	Children born in 1970	2,716
3	Children born in 1969	2,364
4	Children born in 1965-68	3,940
5	Total number of children in lines 2 — 4	9,020
6	Persons aged 65 or over	1,203
7	Number included in line 6 who were visited at the special request of a G.P. or hospital	470
8	Mentally disordered persons	51
9	Number included in line 8 who were visited at the special request of a G.P. or hospital	25
10	Persons, excluding maternity cases, discharged from hospital (other than mental hospitals)	20
11	Number included in line 10 who were visited at the special request of a G.P. or hospital	8
12	Number of tuberculous households visited	—
13	Number of households visited on account of other infectious diseases	12
14	Other cases	948
15	Number of tuberculous households visited by tuberculosis visitor	144

VACCINATION AND IMMUNISATION

Table 1. Immunisation against Diphtheria/Whooping Cough/Tetanus (separately or combined), Poliomyelitis, Measles, German Measles.

Type of Vaccine		YEAR OF BIRTH					Others Under 16	Total
		1970	1969	1968	1967	1963/66		
PRIMARY COURSE	DIPHTHERIA ...	108	1169	326	9	8	12	1632
	WHOOPING COUGH	103	1134	314	8	5	1	1565
	TETANUS	108	1169	326	10	12	268	1893
	POLIOMYELITIS ...	105	1105	330	10	18	15	1583
	MEASLES	23	958	491	168	286	48	1974
	GERMAN MEASLES...	—	—	—	—	—	44	44
RE-INFORCING DOSES	DIPHTHERIA ...	3	101	450	107	1640	739	3040
	WHOOPING COUGH	—	62	335	67	189	47	700
	TETANUS	3	106	450	109	1649	1092	3409
	POLIOMYELITIS ...	2	90	437	108	1585	669	2891

Immunisation against Diphtheria/Whooping Cough/Tetanus, Poliomyelitis

In each case there was a considerable increase (over 50%) in the number of children receiving the primary course, whilst there was a decrease in the number of re-inforcing doses given, due mainly to the new schedule of immunisations introduced in 1969.

Measles Vaccination

There was an increase of 544 in the number of children receiving measles vaccination. Vaccine supplies were easier than in 1969 and there was an outbreak of measles in the summer, which may well have a bearing on this increase.

German Measles Vaccination

A programme of vaccination against german measles for girls of 13 years of age was started in the autumn in the schools in the Borough in an attempt to reduce the number of babies born with defects due to german measles in pregnancy. Take-up was considerably less than expected, parents either being apathetic or under the misapprehension that it would be better to wait until the girls were nearing marriage or that it was unnecessary if the child had previously had the disease.

Table 2. Vaccination against Smallpox.

Age at date of Vaccination	Under 1	1	2—4	5—15	Total
No. vaccinated ...	69	893	350	100	1412
No. revaccinated ...	—	3	42	435	480

Smallpox Vaccination

The total number of persons receiving primary smallpox vaccination increased (1,412 compared with 1,105 in 1969).

Protection against Typhoid Fever

Typhoid inoculation was recommended for all persons travelling overseas and children going abroad in school parties were inoculated either by their family doctor or, failing this, at the local clinic.

B.C.G. Vaccination against Tuberculosis. See page 35.

PREVENTION OF ILLNESS, CARE AND AFTER CARE

Tuberculosis

During 1970 there were 37 notifications of pulmonary tuberculosis and 5 notifications of non-pulmonary tuberculosis in the Borough, compared with 35 and 9 notifications respectively, in 1969.

The following table shows an analysis of cases notified in 1970.

Age Periods.	Respiratory		Non-Respiratory	
	M	F	M	F
0—4 ...	—	1	1	—
5—14 ...	—	1	—	—
15—24 ...	2	2	—	—
25—44 ...	7	1	1	1
45—64 ...	16	3	1	1
65 and over...	2	2	—	—
Age unknown	—	—	—	—
Totals ...	27	10	3	2

The total number of cases on the register at the end of the year was :

Pulmonary ...	1083
Non-pulmonary ...	168

As may be seen from the Registrar General's official return there were 2 deaths from tuberculosis of the respiratory system and 1 death from late effects of respiratory tuberculosis in 1970.

The Borough was again well served by the Chest Clinics of Ashford, Hounslow, Kingston, and the *ad hoc* clinic at the Richmond Royal Hospital.

The following comments have been received from

(a) Dr. P. E. Baldry, Consultant Physician, Ashford Chest Clinic :—

Although I have only had nine new cases of tuberculosis from your Borough, as I only deal with a small section of it, from the area covered by this Chest Clinic I am surprised to find that we are still picking up cases of quite extensive tuberculosis.

(b) Dr. C. O. Edwards, Consultant Physician, Kingston Chest Clinic :—

Annual notifications continue to fall. It is beginning to become apparent that an increasing number of fresh notifications are in immigrants who have not long been resident in the U.K.

We still, of course, have the problem of the 'refused treatment patient', and it has always been my feeling that until these two problems, a) immigration, and b) compulsory treatment, are dealt with, tuberculosis will never be eradicated in this land.

Mass Radiography

Mass X-ray facilities were available to the general public without appointment at the West Middlesex Hospital, Twickenham Road, Isleworth on any weekday (excluding Saturday) between the hours of 9.0 a.m.—12.30 p.m. and 1.30 p.m.—5.0 p.m.

A mobile mass X-ray unit also visited the Bus Station at the rear of the Odeon Cinema, Richmond, on Thursday evenings between 5.15 p.m. and 6.15 p.m., and the

Car Park, Municipal Offices, Sheen Lane, East Sheen, on Monday evenings between 5.45 and 6.30 p.m.

B.C.G. Vaccination against Tuberculosis.

B.C.G. Vaccination of schoolchildren is carried out at about the age of 13. During 1970, 1063 schoolchildren were skin-tested and the details are as follows:—

No. skin tested	...	...	1063	(873)
No. found positive	...	...	133	(761)
No. found negative	...	...	858	(72)
No. vaccinated	...	...	909	(67)

The figures in brackets show the number of schoolchildren who were re-tested during the year.

Children with Grade 1 positive reactions are vaccinated.

The reason for the reduction in B.C.G. Vaccination was due to a concentrated programme of Rubella Vaccination in the latter part of the year.

AFTER CARE FACILITIES.

The Council operates a free milk and extra nourishment scheme for chest cripples. Persons in need are recommended for this service by the Medical Social Workers of the chest clinics serving the Borough. Persons in receipt of supplementary benefit from the Department of Health and Social Security are automatically eligible, others are assessed according to income to ascertain their eligibility. Persons whose income does not allow them to come within the Council's scheme may, if appropriate, be referred to the Richmond upon Thames Chest and Tuberculosis Care Committee.

The number of patients who received help during 1970, was as follows:—

Adults	...	...	...	...	27	(34)
Children	...	...	...	...	1	(1)
Total					28	

Patients receiving free milk only	...	...	...	14	(18)
Patients receiving extra nourishment only	...	...	...	2	(4)
Patients receiving both free milk and extra nourishment	...	...	...	11	(13)

(Figures in brackets show comparable figures for 1969).

The Richmond upon Thames Chest and Tuberculosis Care Committee also continued to undertake after care of chest cripples for the whole Borough.

I am indebted to Mrs. M. Jolliffe, Chairman, and her colleagues for the following report on the progress of the Organisation during the year.

"Ever since the Richmond London Borough Council once more took over the responsibility for the allocation of free milk and extra nourishment there have been three clear trends in the pattern of the Committee's activities.

Firstly there has been the economic trend of increased costs — postage, stationary, printing, etc., — making the expenses for organising the Seals Sale about 40% of the total income, which might well make the Charity Commissioners frown! Secondly there has been the social trend of people contributing less and less each Christmas or limiting the number of charities they support. But thirdly there has been a disturbing trend of fewer patients applying for assistance from the Committee. This is rather depressing when one feels that there must be many needy chest patients in the Borough who never come forward, yet the Committee's

freedom of action is limited to helping patients who come officially through the Chest Clinic and who live in the Borough.

However, with the aid of the funds available and the regular grants from the Borough Council, help has been given as generously and as wisely as possible, fuel grants, holiday grants and Christmas parcels again forming the greater part of the expenditure. This year 15 patients received assistance, one of these being a Richmond resident attending a clinic outside the Borough.

If the work of the Committee is to be fully rewarding it is imperative that, in 1971 and onwards, the needy patients must be found and brought forward by the authorities. The alternative would be to alter the Committee's terms of reference to include some of the fringe areas where it is known that needy patients do exist".

CARE OF THE ELDERLY.

The health and care of the elderly living at home still poses a major problem for Health Department staff.

Elderly people are often found to be living alone without help and in unsuitable accommodation, which fails to take account of increasing frailty with increasing age. Many old people are living on fixed incomes which do not keep abreast with the rising cost of living, or alternatively, they may be afraid to spend what little money they may have out of fear that they may have to end their days in an Old People's Home.

There is, therefore, a risk of older people existing on sub-standards of nutrition in inadequately heated living rooms and unheated bedrooms, not only with increasing and progressive deterioration in health but with the real danger of hypothermia developing. See page 38.

The Clinics for Older People provide a medical screening service for residents of the Borough from 55 years of age and are much appreciated by the older people attending. Normally each person has an annual complete re-examination and are seen at six-monthly, three-monthly or two-monthly intervals, depending on age and need.

It has become clear from experience that some patients need the encouragement and stimulation of more frequent visits for socio-medical advice and contact. Details of the Clinics are set out below:—

Clinic.	No. of Sessions per week.	No. of Attendances.	No. of New Cases.
Maddison Clinic, Church Road, Teddington.	6 per week.	3,058	179
Kings Road, Richmond.	1 per week.	301	43
Whitton Clinic.	1 per week.	246	35
Barnes Clinic.	1 per week.	75	21
Mortlake Clinic (from 15/6/70)	1 per fortnight		

Because of certain accommodation difficulties the Barnes Clinic for Older People was discontinued on the 18th May, 1970, and patients transferred to the Mortlake Clinic as from the 15th June, 1970. The number of sessions held was reduced from one per week to one per fortnight pending a greater demand.

Day Centres have been set up by the Welfare Department for those whose needs are social rather than medical. Day Hospitals offer therapeutic activity such as physiotherapy, occupational therapy, speech therapy, chiropody, medical examinations and nursing treatment but the number of places available is necessarily limited.

There is, nevertheless, a great need for those patients who are not fit enough to attend the Day Centre nor infirm enough for a Day Hospital and in order to meet this need a Day Clinic for the Older People was started at Stanley Road Clinic, Teddington in May 1970. All patients attending have been through the medical check and screening procedures at the Maddison Clinic and those patients thought to be at risk of breaking down physically and emotionally are referred by the examining doctor and health visitor as being in need of further care and stimulation by weekly attendance at the Day Clinic. The Day Clinic is staffed by health visitors who are available to give advice on all aspects of keeping fit and well, a physiotherapist who takes small exercise classes geared to the special needs of older people and a consultant psychiatrist who holds very successful group discussions about emotional problems. The Friends of the Maddison Clinic provide a valuable team of volunteers for transport, help with meals and have given certain items of equipment.

The Clinic is held on one day per week and twelve patients attend.

The Richmond Institute of Adult Education arranges classes of instruction at the Clinic in handicrafts such as basketwork, soft toy making, knitting for patchwork covers, tea cosies, coat-hanger coverings, cooking for one, etc. In addition, films are shown—Royal Family activity films seem to be a great favourite with the older people. Travel slides and talks have also been initiated.

My thanks are due to the staff of the Clinic and the Friends of the Maddison Clinic for the hard work and considerable interest shown in this project which has proved to be a most successful venture.

Dr. Alfred Torrie, Consultant Psychiatrist, has been working as a member of the medical team at the Clinics for Older People for several years, and I am grateful to him for the following report:—

"The Clinics for Preventive Medicine have had the assistance of a Consultant Psychiatrist for over two years now. The psychosomatic cases with a basis of constitutional depression continue to be investigated.

During the year at the Stanley Road Day Clinic in Teddington, I began group discussion with the patients. The Group could be up to nine patients, most of them also severely physically handicapped by difficulty in walking, etc. and also requiring the attention of a physiotherapist. The following hour is devoted to unstructured free expression discussion on any topic any member of the group wishes to initiate, but eventually led by me into discussing the psychological and emotional aspects of a philosophy of life which accepts what can't be changed. Since loneliness is one of the main burdens of growing old, these weekly meetings produce a fellowship at a level deeper than merely sharing entertainment".

Despite the services which are provided for the elderly by both statutory and voluntary bodies, there is little room for complacency. There still remains a hard core of independently-minded older people, potentially at risk, who may not wish to avail themselves of the services which are offered. When a crisis does occur there is no guarantee that the best possible arrangements can be made for each individual case. Shortage of skilled personnel and shortage of adequate resources, especially residential accommodation for the elderly confused, remain a problem.

My thanks are due to Dr. J. S. Finn, Consultant Geriatrician at Kingston Hospital, and Dr. J. Andrews, Consultant Physician to the Geriatric Service, South West Middlesex Group, West Middlesex Hospital, for their co-operation throughout the year.

Dr. Finn emphasized in her report the shortage of places in Welfare homes, for the aged physically and mentally infirm, and also referred to the inadequacy of the Meals on Wheels service.

During 1970 it was not considered appropriate to admit anyone to hospital under Section 47 of the National Assistance Act, 1948.

ACCIDENTAL HYPOTHERMIA.

Emergency accidental hypothermia kits are made available on a 24-hour basis for use by medical and nursing staff. These kits consist of sleeping bags, blankets, hot water bottles, low reading thermometers, convector-type heaters, matches and change for electricity and gas meters. The kits are normally stored in the Hostel at 11 Rosslyn Road, Twickenham, which is reasonably centrally placed in the Borough.

Mothers attending clinics are continually reminded by poster and pamphlet of the dangers of hypothermia in infancy. All nursing staff are provided with low reading thermometers.

CHIROPODY SERVICE.

Details of the chiropody scheme at present operating within the Borough are as follows:—

Method of Provision

- (a) Treatment at the surgeries of private chiropodists.
- (b) Treatment at Borough Council clinics.
- (c) Treatment at sessions arranged by Voluntary Societies.
- (d) Domiciliary treatments.

Categories of Persons Eligible for Treatment and Charges:—

<i>Category</i>	<i>Inclusive Charge</i>
(a) Expectant mothers	8/-
(b) Nursing mothers	8/-
(c) Elderly persons	8/-
(d) Physically handicapped	8/-
(e) Children under 5 years	Nil
(f) School children	Nil
(g) Low income group (£10 single; £12 : 5 : 0 married)	Nil

The Chairman of the Social Services Committee is authorised to waive or reduce charges in special circumstances.

Number of Persons Treated

(a) Aged 65 and over ...	By private chiropodists...	5,019
	In Council clinics ...	215
	In Welfare Dept. establishments	448
(b) Expectant Mothers ...	By private chiropodists...	19
(c) Others ...	By private chiropodists...	480
	In Council clinics ...	1
(d) British Red Cross Society...	... ..	10

Number of Treatments Given

1. In Council Clinics	1,093	(1,254)
2. In Patient's Homes — by private chiropodists	7,491	(8,133)
3. In Old People's Homes	1,879	(2,018)
4. In Private Chiropodists' Surgeries	23,757	(25,471)
5. By British Red Cross Society	53	(56)

(Figures in brackets show the position in 1969).

It is interesting to note that, out of the 34,273 treatments given, 22,891 were free of charge. The reason for this, of course, is that the majority of persons availing themselves of the service are elderly and of low income.

The normal number of treatments allowed is six per person per annum, but this number may be exceeded where clinically necessary.

I would like to express my appreciation of the continued co-operation I have received from the chiropodists serving the Borough and to the British Red Cross Society for their valuable contribution. The fact that many elderly persons are able to go to the chiropodists of their choice with the minimum of travelling on public transport enables them to have the treatment which is considered to be so vital if they are to remain ambulant.

RECUPERATIVE HOLIDAYS.

During the year arrangements were made for 84 persons to be admitted to recuperative holiday homes. Cases referred and the origin of referral are shown below :

					Family Doctor referrals.	Hospital referrals.
Elderly Persons	...	...	...	...	50	3
Adults	...	...	...	...	23	2
Mothers accompanied by children —						
			Mothers	...	2	
			Children	...	4	

Subsequently the arrangements for ten elderly persons, six adults and one child were cancelled.

One family was sent in collaboration with the Children's Department.

HEALTH EDUCATION.

The Health Education Sub-Committee, comprising senior officers of the department, met regularly in 1970 to co-ordinate activities in this sphere.

Monthly Poster Campaigns.

As in previous years a monthly poster campaign was operated as follows :—

January	—	Immunisation
February	—	Well-Women Clinics
March	—	Smoking
April	—	Diet
May	—	Dental Health
June	—	Summer Hazards
July	—	Food Hygiene
August	—	Road Safety
September	—	Dangerous Fruits
October	—	Fireworks
November	—	Guard That Fire Don't Leave Children Alone
December	—	Drugs, Drink and Driving

Five of the subjects chosen were pursued jointly with Mr. J. Dennett, the Borough Safety Officer. On four occasions Mrs. W. Burrington, Divisional Director of the British Red Cross Society, allowed the Red Cross shop window in Twickenham to be used for display purposes on immunisation, well-women clinics, anti-smoking, and food hygiene. In July, a larger campaign was mounted on the subject of food hygiene and I would like to express my thanks to all the Pharmacists in the Borough who helped by exhibiting posters and pamphlets. My thanks are due to Mr. J. Dennett and Mrs. W. Burrington for their help throughout the year.

Anti-Smoking Clinics

I am again indebted to the British Temperance Society for their dedicated service in participating in two five-day clinics for the general public during 1970. The statistics for these clinics are as follows:—

		Number completed course	Number stopped smoking after six weeks	Cut down
April Clinic ...	...	46	*24	*8
November Clinic ...	...	50	* 7	*11

* Figures received from questionnaires returned after the clinic.

In-Service Training

Many senior officers of the Health Department have played a part in this very important section by giving talks, etc., to various groups of officers, such as:—

Home helps, pupil midwives, health visitors, public health inspectors and pupil public health inspectors, student nurses, student health visitors, new recruits to local government, play-group leaders and social workers.

Health Education Service for Schools

Three meetings with teachers were held through the good offices of the Chief Education Officer, which afforded an opportunity for discussion and for film viewing. In addition to their own work in this subject, eight schools have requested help and good use was made of films loaned through this department.

Exhibition of 100 years of State Education

The department was happy to take part in this imaginative exhibition organised by Gainsborough School which lasted for one and a half days.

Dental Hygiene

Kits have been issued to all children on receiving their first dental examination at school and health visitors have given talks illustrated by suitable films to three schools.

Preparation for Childbirth Classes

These continue to be of great use to mothers-to-be. Visual aids from the department have been used to help the health visitors cover a wide range of subjects in these classes including feeding, labour, baby's layette, and home safety. More health visitors have included films and the use of outside speakers in their curriculum.

Voluntary Organisations

In all, 22 separate organisations requested talks and a total of 25 were given. The Chief Public Health Inspector has been in great demand for talks on Environmental Health, and the Geriatric Health Visitor has co-operated with the Home Help Organiser in giving advice to members of old people's day centres.

HOME HELP SERVICE

Staff as at 31st December, 1970

Home Help Organiser ...	...	1
Assistant Home Help Organisers ...	...	2
Home Helps — Whole-time ...	...	6
— Part-time ...	...	104
(Whole-time equivalent) ...	...	66.2

Number of staff employed during 1970: 192 persons.

The order of priority of applications for the Home Help Service remains as before, i.e.:—

1. Acute Emergency cases.
2. Domiciliary confinements and 48-hour hospital discharges.
3. The tuberculous.
4. Other cases, i.e., chronic sick, aged infirm, mentally disordered, etc.

Applicants in receipt of supplementary benefit from the Department of Health and Social Security and those suffering from toxæmia in pregnancy receive the service free of charge. In all other cases patients either pay the standard charge or are assessed to pay according to their financial circumstances.

The standard charge for the service at the end of the year was 7/- per hour.

Cases given help during the period 1968/1970 were as follows:—

	1968.	1969.	1970.
Chronic sick (under 65)	104	103	122
Tuberculous	7	6	6
Mentally disordered	6	6	7
Maternity	124	64	55
†Others	79	117	132
Aged 65 or over	877	1126	1214
	<hr/>	<hr/>	<hr/>
Total cases helped ...	1197	1420	1536
	<hr/>	<hr/>	<hr/>

† Acute cases receiving help over a short period of time.

Each referral is assessed for domestic need by a home visit and during the year 934 referrals were made by various agencies. The total number of visits made by the organising staff was 3,627.

Recruitment

The wage increase given to manual workers late in 1969 helped considerably in the recruitment of home helps. The rise to 6/5½d. per hour and subsequently to 7/10d. per hour meant that, for the first time, wages for domestic workers in the Council's employ were approaching that paid in industry for unskilled labour even though there still remains a considerable disparity between the rate paid to home helps and that received in private domestic employment. The resultant rise in recruitment was such that, at least for a time during 1970, the number of home helps employed was up to the Council's establishment of 70 whole time equivalent.

It had been hoped, in 1970, to increase the field organising staff, because of the considerable increase in work arising from the steady increase in the number of patients and home helps and good neighbours. The organising staff establishment has not been amended since the formation of the Borough in 1965. It was decided, however, to defer this matter pending the setting up of the Council's Social Services Department.

Rates of Pay

Hourly payment is made to home helps in accordance with the Greater London Joint Council negotiated rates of pay. Additional remuneration is given for work in dirty homes and certain cases of infectious diseases.

Training

The Council's certificated In-Service Training Course for home helps is geared to encourage staff to give a better service, improve their understanding and stimulate interest, give confidence and to show the home help her place in the "Health Team".

The first year course includes conditions of service, the main duties of a home help and protection against infection: the second year course includes the understanding of the problems arising from the care of the aged, physically handicapped and chronic sick. Accident Prevention and nursing help is taught: The third year course is more advanced in all subjects and includes supportive action for the mentally disturbed and subnormal.

Six home helps successfully completed the three year course in March 1970 and were presented with their certificates by His Worship the Mayor, Alderman D. G. Harris, J.P., who invited them to tea at the Mayor's Parlour.

A further course to train selected home helps in the specialised knowledge required in dealing with "families with problems" was commenced in 1970 and the six home helps concerned also successfully completed this course.

I am particularly pleased at the enthusiasm and interest which is shown in these training courses which are ably organised by Mrs. J. E. M. Roberts, Home Help Organiser.

Bank Holiday Coverage

Considerable difficulty is often experienced by persons in receipt of the Home Help Service during bank holiday periods, when the Service is not normally available. The "Fish" Church Fellowship Service co-operated to provide persons to do shopping and visitors to the housebound who would normally have been left to their own devices. The British Medical Association Telephone Answering Service (see page 56) provided the emergency link between the home helps and the organiser "on duty".

Dirty Cases

Cases still come to the notice of the Home Help Service of people who, because of illness, etc., are living in abnormally dirty conditions and "at risk" to themselves. During the year, the Home Help Service cleaned nine homes of this particular type, using modern cleaning equipment provided by the Health Department. Home helps who work in a team to carry out this type of work, do so from a sense of dedication.

Advice Centres

Advice Centres are now held at certain day clubs run by voluntary organisations at which the Home Help Organiser or an assistant is in attendance to deal with enquiries from the public.

Good Neighbour Service

Cases receiving the Good Neighbour Service are excluded from the above figures and are set out below:—

	1968	1969	1970
Chronic sick (aged under 65) ...	6	9	9
Chronic sick over 65 ...	85	100	104
Acute under 65 ...	—	1	1
Total cases helped ...	<u>91</u>	<u>110</u>	<u>114</u>

The Neighbourly Help Service within the Borough has augmented the Home Help Service to such a degree as to have become an integral part of the Service.

An important aspect is the employment of members of the public who would not normally be employable by reason of age and irregular hours, etc.

My sincere thanks are due to the voluntary organisations in the Borough, too numerous to mention by name, who have been most helpful throughout the year to the Home Help Organiser. Many homes have been redecorated by various youth organisations, shopping undertaken and help in all sorts of ways given in the many emergencies which arise in a service provided for the needs of the sick and elderly.

Night "Sitters-In" Service.

This service, which commenced in 1967, provides assistance during the night for emergency cases. Help is provided where either no relative or neighbour is immediately available or where relief can be given to relatives who have been caring for chronically ill patients. The service is normally limited to three nights per week, with a maximum of twelve nights for any one patient. This can only be increased with the approval of the Chairman of the Social Services Committee.

The Council pay the "sitters-in" at the rate of 5/-d. per hour, or up to £2. 10. 0d. for a night's duty of ten hours. Persons receiving the service are assessed to pay to the Council a charge according to means subject to a maximum charge of £2. 10. 0d. per night of ten hours. Persons in receipt of benefit from the Department of Health and Social Security receive the service free of charge.

Details of patients helped under the "sitters-in" service during 1970 were as follows:—

Total number of cases	...	17
Men	...	5
Women	...	12

The service was provided on an average of three nights per patient, during the year.

Patients paying full or part of the cost of the service	...	15
Patients paying no contribution to the cost of the service	...	2
Referred by: Family Doctors	...	2
District Nurses	...	10
Relatives	...	5
Hospital	...	—
Geriatric Health Visitor	...	—

The panel of "sitters-in" as at 31st December, 1970 was 16.

MENTAL HEALTH SERVICES

The year 1970 was, for the Mental Health Service, one of achievement in as much as the Council's first 80 place purpose-built Junior Training School was opened at Strathmore Road, Teddington, the hostel for young mentally subnormal adults was opened at 11, Rosslyn Road, Twickenham, and the facilities at the Day Centre for the mentally ill also at 11, Rosslyn Road, Twickenham, were extended. The need to rely on other local authorities and voluntary organisations was, therefore, to some extent reduced.

Further provision is envisaged in the Council's Plan for the Development of the Health and Welfare Services over the next three years and this includes the establishment of purpose-built premises for an 80 place adult training centre in Barnes, a day centre for the mentally ill and a day centre for the elderly mentally infirm.

Consequent upon the opening of the new Junior Training School at Strathmore Road, the former temporary centre at Harle House was closed. I would like to record my thanks and appreciation to the Hounslow, Twickenham and District Society for Mentally Handicapped Children for their help and co-operation during the Council's temporary occupation of its headquarters over a period of two years.

Mental Illness.

The Borough was served by the following psychiatric hospitals during the year :—

Long Grove Hospital, Epsom, Surrey.

(Districts served : Richmond and Barnes).

Springfield Hospital, Beechcroft Road, Upper Tooting, S.W.17, up to 31.1.70.

Horton Hospital, Epsom, Surrey, from 1.2.70.

(Districts served : Twickenham, Teddington, Hampton and Hampton Wick).

The following table shows the number of patients admitted to psychiatric hospitals under the Mental Health Act during the year :

Section	M	F	Total
Section 5 ...	38 (24)	53 (39)	91 (63)
Section 25 ...	37 (30)	60 (47)	97 (77)
Section 26 ...	4 (4)	1 (3)	5 (7)
Section 29 ...	10 (17)	18 (19)	28 (36)
Section 60 ...	— (1)	— (—)	— (1)
Section 136...	— (1)	— (—)	— (1)
Total ...	89 (77)	132 (108)	221 (185)

(Figures in brackets are those as at 31st December, 1969).

Close co-operation was maintained with the hospitals providing psychiatric cover for the Borough, including regular case conferences attended by mental welfare officers. Arrangements exist with all catchment hospitals for the mentally ill for mental welfare officers to be called when statutory action is necessary under the Mental Health Act 1959 on Richmond upon Thames residents. These arrangements ensure a measure of continuity in the care and after care of the persons concerned.

The arrangements whereby a Borough Social Worker was allocated to Springfield Hospital terminated in July, 1970.

My thanks are due to Dr. B. A. J. C. Gregory, Medical Superintendent, and the staff of Horton Hospital, Epsom, and to Dr. A. B. Munro, Physician Superintendent, and the staff of Long Grove Hospital, Epsom, for their co-operation and help since Richmond upon Thames came within their catchment areas.

I set out below a report received from Miss D. C. Clark, Principal Social Work Organiser, who besides acting as Chief Mental Welfare Officer is responsible for the co-ordination of all casework and visits undertaken by the department's social workers, in-service training, and joint liaison with Training Organisations :—

"Training.

During 1970 three Mental Health Social Workers obtained places on courses leading to the certificate in Social Work. The Senior Mental Welfare Officer was one of those successful and was seconded on 75% salary to attend a C.S.W. course for one year at Enfield.

In-service training has continued within the section and three Mental Health Social Worker trainees successfully completed their training and hope to go on to professional training at a later date.

Group Work.

An experiment in group work was started at the early part of the year by one of the Mental Health Social Workers. He found he had a number of disturbed adolescents on his case load who were all experiencing similar problems of making relationships. He decided to meet together one evening a week with these young people in order to help them, by group discussion, to overcome some of their problems. The experiment has proved to be a great success and many of the young people have made great developmental strides.

After a few months one of the parents of a disturbed adolescent expressed anxiety about the sort of group that her son was attending and as a result of this another group was set up, this time with the mothers of the young people in order that they could discuss their mutual problems.

Both these groups I feel, are offering an additional service from the Mental Health Section.

Day Centre.

Early in the year it was necessary to close the Day Centre for the mentally ill due to alterations to the structure of the building which made it impossible to continue throughout the summer. The opportunity was taken to think in terms of a different type of Day Centre and we were fortunate in obtaining the part-time services of a Day Centre Organiser who was experienced in problems of the mentally ill.

Out-patients Clinics.

In February, 1970, patients previously served by Springfield Hospital catchment area were transferred to Horton Hospital at Epsom. Mental Health Social Workers in the department concerned with admissions to Horton Hospital have worked hard to develop useful relationships with the medical staff at the hospital. Out-patient clinics have now been opened in the area and are served by a Consultant Psychiatrist from Horton Hospital. The Mental Health Social Workers in the area attend at the clinic each week to receive referrals from the Consultants and to be available to discuss cases as required. This has been a useful development during the year.

Case-work.

The number of referrals received in the department during 1970 were 563 compared with 795 in 1969. This shows a considerable drop and is believed to be due to the improved quality of case work now being offered by the Mental Health Social Workers in the section. A client is now being offered continuing supportive service and this reduces the need for referrals at time of crisis and is believed to be the reason for the reduction in referrals.

1970 was a year of anticipation and possible anxiety for Social Workers, particularly those working in the Mental Health field. This was due to the proposed setting up of the Social Services Department and the new emphasis on family case-work. In order to become as much aware of the functions of the local authority's other departments, generic group meetings were started and attended by as many Social Workers as were available. These meetings were mainly to start to get to know the work of the other departments and the roles and duties of the Social Worker in them.

In order to rationalise the future work, the Mental Health section was split into three area teams during the year. At the same time, the Children's Department and the Welfare Department also arranged to do this. This has made it possible for the Social Workers in the areas to be able to get together and discuss mutual problems and cases."

The establishment of field staff in the mental health service at the 31st December, 1970, was as follows:—

- 1 Principal Social Work Organiser.
- 1 Senior Mental Welfare Officer.
- 7 Mental Welfare Officers.
- 1 Senior Social Worker.
- 2 Social Workers.

During the year mental welfare officers and social workers made a total of 3525 home visits and approximately 303 office interviews were held during the same period.

The total number of mentally ill persons residing in the community at the 31st December, 1970 and under care was 490, i.e. 168 males and 322 females.

Residential Accommodation for the Mentally Ill.

At the end of 1970 there were 23 patients for whom the Borough had accepted financial responsibility in mental after care homes and hostels run by voluntary societies and other local authorities.

Day Centre for the Mentally Ill.

Set out below is a report received from Mrs. E. Cooper, Day Centre Organiser, who was appointed from 3rd August, 1970:—

"In August of this year a Day Centre Organiser was appointed, previously the Day Centre for mentally ill patients as run by Mental Health Social Workers, and it was with club activities in mind.

The new Centre's aims were the same i.e. giving mentally ill patients a secure environment in which they could learn to adapt to society with the eventual view of employment but the form was somewhat different.

A number of creative activities were introduced — Enamelling, Art, Candle making, Typing, Needlecraft, Basket-work, Fibre Glassing and the making of table lamps. Although the facilities were limited it was felt necessary to adapt these to a person's needs, particularly for the male patients.

It was inevitable that a large number of patients would be suffering from schizophrenia, therefore aids in helping them to communicate were developed.

Out of a total of 25 patients, five have started work; two have been maintained whilst awaiting hospital admission, and one has been maintained until she went back home to India. One patient showed signs of deterioration, and four expressed the belief that it would not help them (three were female, one male). Four patients felt it would be more helpful if the Centre could be open for a full day.

I feel that some measure of success has been attained in the short time that the Day Centre has been re-organised."

Day Centre Placements.

Where appropriate, arrangements are also made for patients to attend day centres run by the London Borough of Hounslow. These patients are mainly referred by the West Middlesex Hospital Psychiatric Unit which has close links with the day centres.

Community Care of the Subnormal and Severely Subnormal.

The total number of subnormal and severely subnormal persons under community care at the end of 1970 was 231 compared with 223 in 1969. This does not include those patients placed in residential accommodation under Guardianship and informal foster care arrangements.

Referrals to the Mental Health Service.

During 1970 the following referrals were received :—

	Subnormal				Severely Subnormal				Total
	Over 16		Under 16		Over 16		Under 16		
	M	F	M	F	M	F	M	F	
Referrals under Section 57 (as amended) Education Act, 1944	—	—	1	—	—	—	—	—	1
Referrals of educationally sub-normal children requiring supervision after leaving school	6	3	—	—	—	—	—	—	9
Referrals from other sources	3	6	2	2	1	1	3	6	24
Total	9	9	3	2	1	1	3	6	34

The success of Community Care for the subnormal depends to a great extent on team effort and a satisfactory relationship between the families concerned and all other bodies, statutory and voluntary, who are active on their behalf. I am glad to report excellent liaison between all interested persons which has resulted in a sharing of experience and in the improvement of facilities.

This has been an eventful year for the families of the handicapped, although some may think, regretfully, that the benefits have come a little too late to ease their particular problem. Since we now have a junior training school, adult training centre and a hostel within the Borough, communications have become easier and the links between the patients, their relatives and professional staff have been strengthened. With the starting of a pre-nursery class at Strathmore Road School very much younger children have been able to benefit from skilled teaching, involving only a short coach journey, and soon it is hoped that other very young people with special problems will be admitted to the special care unit in 1971.

Each new referral occasions a home visit by a senior medical officer to see the child and to determine how best to help him and his family. In addition to further supportive visits by health visitors or social workers, parents may be invited to join in discussion groups with other parents and staff members at counselling clinics.

Counselling Clinics.

When these clinics were first set up in 1967 they had a two-fold purpose — to ensure that each mentally handicapped child had the advantage of a physical examination in the same way as other children and also to afford the opportunity to small groups of parents to meet and discuss their problems with each other and with a senior medical officer, social workers and health visitors. All children at Strathmore Road School have an annual medical examination to which parents are invited. The medical officer is in close touch with the children through weekly visits to the school. Some meetings have consisted of parents only. These have proved to be a great success and will be continued although, on some occasions, children will continue to be invited as well.

These clinics are held once a week, either at Kings Road, Richmond, or at Hospital Bridge Road, Whitton. During 1970 there were 124 attendances.

Periodic Medical Examination of the Adult Mentally Subnormal.

Counselling Clinics for parents of mentally handicapped adults are held at various clinics throughout the Borough.

Patients are given a full medical examination and parents are given advice and help where appropriate. If treatment is considered necessary, patients are referred to their family doctors. Those in need of dental treatment are referred to psychiatric hospitals serving the Borough.

During 1970 there were 55 attendances.

Guardianship and Informal Foster Care.

At the end of 1970 there was only one patient under the Guardianship of the Council, (two at the end of 1969). In order to avoid formal Guardianship procedures informal placements are made wherever practicable. There were also 41 patients placed under informal foster care arrangements in homes and hostels; nine in the Council's hostel at 11, Rosslyn Road, East Twickenham, and 32 in homes and hostels run by other local authorities, voluntary organisations, etc. Liaison is maintained by annual visits by the Senior Medical Officer for Community Care.

The Hostel, 11, Rosslyn Road, East Twickenham.

The Council opened its first hostel for the mentally subnormal young adults at 11, Rosslyn Road, East Twickenham, on the 20th September, 1970, the premises having previously been used as a hostel for the tuberculous. This is a 12 place hostel, six males and six females and the premises are staffed by a resident warden and housekeeper; resident assistant warden, and domestic staff. The residents attend the adult training centre daily or go out to work. The premises were adapted at a cost of £2,500.

I set out below a report received from Mr. S. Summers the Warden in charge of the hostel:—

"My wife and I moved into the house at 11, Rosslyn Road on 15th June, 1970. It had been fumigated, stripped, adapted and had workmen trampling all over the carpets and polished floors. It was dirty, dismal and unloved. There followed three months of cleaning, organising and equipping until, on September 20th, fully staffed and fairly clean, we welcomed our first residents and became a Hostel.

The settling-in period began. The location of the Hostel, so close to parks, river, cinemas and shopping area, is a great asset. The residents were introduced to and readily accepted by, local shopkeepers. An art class was commenced with the assistance of a local artist, who has become a regular visitor and friend of the residents.

Advice on medical and casework matters is obtained from regular weekly visits from Dr. Cicily Clarke, Senior Medical Officer for Community Care, and from a further weekly meeting between the Senior Social Worker, the Manager of the Adult Training Centre (to which the majority of residents have been admitted) and myself.

The climax of our six months work was reached on the occasion of the residents' Christmas Party on December 21st. Invitations were sent out to all those who had shown even the slightest interest in the Hostel. As a result, well over 100 'friends' attended with many more sending their apologies. In addition, following invitations to the Training Centre and two other similar Hostels, our number of 'residents' for the evening was increased to 25! A memorable evening, enjoyed by all. Christmas Day itself was a quiet, family affair.

The foundation of the Hostel has been set. The pattern must now be to further our contact with the local community with the aim on the complete acceptance of this Hostel and its residents in the environment."

Admissions to Hospital.

The Borough is in the catchment area of Normansfield Hospital, Teddington, which serves the districts of Twickenham, Teddington, Hampton and Hampton Wick;

Botleys Park Hospital, Chertsey, Queen Mary's Hospital, Carshalton, and St. Ebba's Hospital, Epsom, which cover the districts of Richmond and Barnes. The following table shows the number of admissions which have taken place from 1st January, 1970 to the 31st December, 1970, all of which were on an informal basis:—

	Subnormal				Severely Subnormal				Total
	Over 16		Under 16		Over 16		Under 16		
	M	F	M	F	M	F	M	F	
Normansfield Hospital	—	—	—	1	—	—	2	—	3
Botleys Park Hospital	—	—	—	—	—	—	—	—	—
Queen Mary's Hospital	—	—	—	—	—	—	—	—	—
St. Ebba's Hospital	—	—	—	—	—	—	—	—	—
Total ...	—	—	—	1	—	—	2	—	3

The number of patients awaiting admission to psychiatric hospitals for the subnormal at the end of the year was as follows:—

	Subnormal				Severely Subnormal				Total
	Over 16		Under 16		Over 16		Under 16		
	M	F	M	F	M	F	M	F	
In urgent need of hospital care	—	—	—	—	—	—	—	1	1
Not in urgent need of hospital care	1	—	—	—	1	2	3	1	8
Total	1	—	—	—	1	2	3	2	9

During the year there were 3 admissions to hospital on a permanent basis compared with 4 in 1969.

The retirement of Dr. N. Langdon Down as Medical Superintendent of Normansfield Hospital, was the end of an era. His devotion to the care of the subnormal was certainly a legend in his own time and I would hasten to record my thanks for his continual help and co-operation since the Borough was formed in 1965. My thanks are also due to Dr. D. S. Sharpe, Medical Administrator, Botleys Park Hospital, and Dr. B. Kirman, Senior Psychiatrist, Queen Mary's Hospital, Carshalton, for their invaluable help.

Temporary Care.

One way in which parents can be given a measure of relief is for the Department to arrange short stay care for periods of up to eight weeks in psychiatric hospitals or arrangements may be made with voluntary societies, etc., for placement in private homes. It may on occasion be exceedingly difficult to arrange short term care, especially in an emergency and especially if the person has multiple handicaps. Nevertheless, during 1970 arrangements were made for eight patients to be sent to hospitals; eight patients were accommodated in privately run establishments.

Training.

(a) Attendance at junior training schools.

As previously mentioned, the Council's temporary junior training centre at Harle House, Cardinal Road, Feltham, closed during the year and the children attending there were transferred to the new purpose-built junior training school at Strathmore Road, Teddington, with effect from the 21st September, 1970. In addition, children still attend the Hanworth Junior Training School, Main Street, Feltham, and the Isleworth Junior Training School, Bridge Road, Isleworth, which are administered by the London Borough of Hounslow, and the Kingston Training Centre, Dukes Avenue, Kingston upon Thames.

The reason for children continuing to attend other authority establishments was due to the fact that the special care unit was not completed at the new school at the end of the year and neither were transport arrangements fully operational. The numbers attending these establishments from the Borough are set out below:—

Name of Establishment	Area Served.	Number attending.
Kingston Training Centre	Richmond and Barnes including Ham	2
Hanworth Junior Training School...	Twickenham, Teddington, Hampton & Hampton Wick	1
Isleworth Junior Training School...	Twickenham, Teddington, Hampton & Hampton Wick	1
†Strathmore Road, Teddington ...	Whole Borough	35
	Total ...	39

† Opened 21.9.70.

Medical inspection and treatment for children attending training schools is provided in the same way as for children attending primary and secondary schools.

(b) Attendance at special care units.

Certain severely subnormal children are unable because of their unsuitability, to attend a junior training school. These children may be admitted to a special care unit attached to the school. These care units cater specifically for mentally handicapped children who also suffer from a physical handicap, or are very over-active, and provide mothers with much needed relief and a measure of habit training for the child. The new junior training school at Strathmore Road, Teddington, includes a 20 place special care unit.

(c) Strathmore Road Junior Training School.

This 80 place Junior Training School at Strathmore Road, Teddington, opened for the reception of children on the 21st September, 1970. The building which cost £65,000 is of modern design with 60 children in the main school and 20 in the special care unit.

The school is staffed with:—

- 1 Supervisor,
- 1 Senior Assistant,

- 6 Assistant Supervisors, (2 for Special Care Unit not yet appointed)
- 4 General Duties Assistants, (2 for Special Care Unit not yet appointed)
- 1 Cook, part-time,
- 1 Assistant, part-time, 30 hours,
- Coach Guides, 45 hours (including Special Care Unit)
- Driver-Handyman,
- Cleaners, 42 hours.

The children are transported by private coach and escorts are employed for the purpose of acting as coach guides. The following report has been received from Mr. R. St. Clair Duncan, Headmaster, who was very kindly seconded to act as temporary Supervisor pending a permanent appointment being made, following the marriage and subsequent departure of Mrs. B. Peacock née Bunce : —

"The year was of special importance to the children of the Junior Training Centre since it saw their transfer from the old building of Harle House to the new 80 place purpose-built school in Strathmore Road, Teddington. The move was effected in September and was not without difficulties since building delays of various kinds were experienced. For this reason, although the whole of the rest of the new school was in use by the end of the Autumn Term, it was still not possible to bring the 20 place Special Care Unit into operation. This is now expected early in 1971.

The accommodation at the school is on two floors and includes five classrooms, two on the ground floor being for nursery and infant-aged children and three on the first floor for older children, and two manual instruction rooms, one for House-craft and the other for Handicraft. There is a Medical Room, used also for speech and physio-therapy, a large Assembly-cum-Dining Hall which is also equipped for gymnastic work, and a fully-equipped Kitchen.

The Special Care Unit is a wing of the main building with its own separate entrance and consists of two classrooms, a bathroom, a laundry or utility room and the necessary cloakroom facilities. The School possesses its own purpose-built motor coach to serve both the Special Care Unit and pre-nursery classes and this is garaged on the premises.

The School grounds include three hard-surface playgrounds, one each for the Nursery, Senior and Special Care Unit children, and equipped with climbing frames, slides, swings and a sand-pit. There are also large grassed areas set with trees and shrubs and containing a smaller area set aside for the children for gardening.

There were 28 children attending Harle House in January and by the end of the year this number had increased to 35 at Strathmore Road, with a further 16 expected early in the New Year.

Unfortunately, not all members of staff at Harle House were able to resume again in the Autumn Term at Strathmore Road, Miss Burch and Miss Charlton both going off on courses and the Supervisor, Mrs. Peacock (née Bunce), having changed her single status during the summer holiday, moved from the Borough at the end of September. However, before leaving she had the satisfaction of settling the children into the new school and of seeing the results of a great deal of planning and organisation come to fruition. Sincere thanks are due to her for her hard work and devotion to the children in her care.

The pattern of training and education built up at Harle House during the previous two years was continued and expanded during 1970 and with the transition into the modern, more spacious and better equipped surroundings represented by the new building, an era has now been inaugurated which will undoubtedly be reflected in the progress of the children in due course.

An important part of their education is the introduction of the children to experiences and relationships with the community outside the school walls and

during the year small parties from every age range paid visits to local shops and parks, to the public library, to the fire and railway stations, and as far afield as London Airport.

A most popular and successful outing was the all day visit in June to the Safari Park, Windsor, when 25 children accompanied by all the staff and a fair number of parents too, had a most enjoyable time.

The children went by invitation to a number of neighbouring schools: nine in June to Clarendon School to see the school play, and in July 10 older boys and girls to Isleworth Junior Training School as guests of the senior class. Also in July, 10 boys went to Sunbury Court as guests of the Scout troop camping there. Earlier in March, the entire school received an invitation from the Lower VIth form of Richmond County School for Girls to an Easter Party, and this proved to be a thoroughly enjoyable and successful affair culminating in the presentation by the girls of a cheque for over £9 to our School Fund. This was followed in December by yet another invitation from the Lower VIth to a Christmas Party, which was gratefully accepted. Unfortunately, this coincided with the electricity workers' strike, but the party was saved by transference to Strathmore Road. About 40 senior girls came to the School and organised games and a sit-down tea party, followed by the presentation of a really splendid gift by their own Father Christmas to every boy and girl in the School. The children thoroughly enjoyed themselves and the girls from Richmond deserved every cheer they got.

The year ended in more Christmas festivities within the School, another Christmas Party for the children with another Father Christmas, and a Christmas dinner, both largely provided by the parents, and a most generous gift of £10 from the Richmond, Barnes and District Society for Mentally Handicapped Children. The highlight of this week was the presentation of form plays and carols by the children which was splendidly attended by their parents. This was the latter's first real opportunity to see the new school and after refreshments had been served they were shown round the classrooms by their children."

(d) Attendance at Adult Training Centres.

In addition to attending the Council's temporary 25 place Adult Training Centre at Chestnut Avenue, East Sheen, S.W.14., mentally subnormal and severely subnormal adults attend the Acton Lodge and Brentford Adult Training Centres, situated within the London Borough of Hounslow, and the Kingston Training Centre, situated within the Royal Borough of Kingston upon Thames. The approximate numbers attending these centres from the Borough are set out below:—

Name of Establishment	Area Served	Number attending
Acton Lodge Adult Training Centre...	Twickenham, Teddington, Hampton & Hampton Wick	24
Brentford Adult Training Centre...	Twickenham, Teddington, Hampton & Hampton Wick	5
Kingston Training Centre	Richmond and Barnes ...	11
Chestnut Ave. Adult Training Centre...	Whole of Borough ...	25
	TOTAL ...	65

The aim of the adult training centres is to train those attending to function at the very highest possible level whether that be to work within the centre or in outside employment. In this way the trainees become more independent and are able to lead as full a life as possible.

Work is undertaken at the centres for local firms on a contract basis and includes assembly of electrical components and television parts, toy assembly, carpentry and joinery, involving the use of heavy machinery, gardening, etc.

At the Brentford and Acton Lodge Adult Training Centres the trainees work a 38½ hour week including a lunch break. They are paid on a scale ranging from 8/- to 40/- per week according to diligence, ability and application to the job.

At the Kingston Training Centre the trainees work a 35 hour week including a lunch break. They are paid on a scale ranging from 10/- to 35/- per week.

I am indebted to Dr. R. L. Lindon, Medical Officer of Health, London Borough of Hounslow, and to Dr. J. C. Birchall, Medical Officer of Health, Royal Borough of Kingston upon Thames, for their co-operation and help throughout the year.

(e) Chestnut Avenue Adult Training Centre.

This 25 place temporary Adult Training Centre is staffed with a Manager, two instructors, a domestic assistant and coach guide.

The trainees are provided with a mid-day meal from the School Meals Service and thanks are due to Miss A. J. Brown, School Meals Organiser, for the excellent service provided.

The trainees attend the Centre from 9.30 a.m. to 4.30 p.m. daily and are paid a monetary reward from 8/- to 40/- weekly according to their diligence, ability, application and general social conduct. 50% of any profit made from work schemes up to a maximum of £100 in any one year is credited to the Centre's Welfare Fund. The following report has been received from Mr. A. L. Tudway, Manager of the Centre:—

“Certain basic environmental improvements have now been effected at the Centre. These are the installation of additional heating, additional toilet accommodation and the re-surfacing of the forecourt. The storage problem has also been greatly alleviated by the acquisition of the site store formerly housing nursing equipment.

Throughout the year, a steady flow of suitably diverse types of out-work from local industry has been negotiated and executed. This has ranged from plastic assembly work to the direct export packing of Hydraulic Rams and Kini-Guns used in municipal and civil engineering maintenance. This Centre is one of the few, if in fact the only Centre in the United Kingdom, which actually part assembles and then finally export packs and crates the finished items for direct dispatch from the Centre to the Docks or Airport. Our current export targets list Holland, Germany, Sweden, Italy, South Africa, Australia, Japan, North and South America.

Other industrial projects include the recovery and salvage operations of spark plugs returned or rejected at various stages of their manufacture. This involves inspection and discrimination according to their catalogue type. It also involves the use of a centre lathe (supplied and installed by the firm), to turn the metal body from the porcelain insulator. This process has enabled some extremely handicapped trainees to be taught how to operate the machine. This important product process is therefore passing from the factory to the Centre, so giving experience to the more severely handicapped person who requires conditions akin to those of a sheltered workshop and whose disability would prevent placement in open employment.

The above work projects are supported by practical social education as recommended in the Department of Health and Social Security "Models of Good Practice" aimed at encouraging the mentally handicapped adults to their potential to the full by active participation in a happy atmosphere.

I would like to thank all those persons who have shown an interest and given help to the Centre during 1970 and in particular to my staff whose untiring efforts in the interests of the trainees have achieved a great deal of success."

Holiday Camps.

By arrangement with the London Borough of Hounslow and the Royal Borough of Kingston upon Thames, arrangements were made for children and adults to attend holiday camps as follows:—

Borough.	Place.	Dates.	Number Attended.
London Borough of Hounslow (Adult Camp)	St. Mary's Bay, Romney Marsh, Kent.	4.9.70 — 11.9.70	5
Royal Borough of Kingston upon Thames (Junior Camp)	Pirates Spring, Dymchurch, Kent.	26.6.70 — 3.7.70	1
Royal Borough of Kingston upon Thames (Adult Camp)	Pengwern Hall, Rhuddlan, Flintshire.	25.9.70 — 2.10.70	2

INCIDENCE OF BLINDNESS

I am indebted to Mr. D. L. Richards, Director of Social Services, for the following information:—

Follow-up of Registered Blind and Partially Sighted Persons for the year ended 31st December, 1970.

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which Section F of Forms B.D.8. recommends:				
(a) No treatment	8	2	—	28
(b) Treatment (medical, surgical or optical and supervision) ...	10	15	—	27
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	2	11	—	22

At the 31st December, 1970, there were 408 persons on the Blind Register.

Ophthalmia Neonatorum

(i)	Total number of cases notified during the year	...	...	—
(ii)	Number of cases in which:—			
(a)	Vision lost	...	...	—
(b)	Vision impaired	...	...	—
(c)	Treatment continuing at end of year	...	...	—

NURSING HOMES

All registered Nursing Homes within the Borough are supervised regularly by medical and nursing officers of the department.

The number of Nursing Homes on the register at the end of 1970 was as follows:

Maternity Homes only	...	Nil.
Other Homes	...	6
Total number of beds	...	124

NURSES AGENCY

At the end of 1970, there were two nurses agencies on the register of this Local Authority.

LOAN OF NURSING EQUIPMENT

The British Red Cross Society continued to operate a scheme on behalf of the Borough for the loan of standard items of nursing equipment. A small charge was made for articles loaned, which was paid by the Council if the patient was in receipt of supplementary benefit.

The Council owns some special equipment including hoists, mechanical and electrically operated beds, etc. These items are loaned free of charge to patients requiring nursing care.

The amount of equipment owned by the Council continues to grow year by year and has in the past been stored in various centres throughout the Borough. Most equipment purchased is very expensive and the question of adequate storage and maintenance has given some cause for concern. Active consideration has been given to the setting up of a central store for nursing equipment and the vast quantities of incontinence pads which are provided under the Incontinent Laundry Service (see below). The establishment of a central store will also lead to greater efficiency in distribution and maintenance.

Alternate Pressure Pads.

Alternate Pressure Pads known as "Ripple Beds" and "Ripple Pads" are hired by the Council for the use of certain patients. These pads save a great deal of unnecessary suffering by preventing and healing pressure sores.

INCONTINENT LAUNDRY SERVICE

A free incontinent laundry service is provided throughout the Borough. Sheets are loaned to patients on the recommendations of the District Nursing Service and are laundered regularly. Normally deliveries and collections are made twice weekly by

Corporation van. Sheets make up the bulk of the laundry but night clothes and other articles are included where necessary. The laundering is undertaken by a local firm.

At the end of the year there were approximately 100 patients receiving this service.

Pads, waterproof pants with disposable linings are also provided. Incontinent pads, instead of sheets, are used where appropriate, thus reducing the laundering of soiled bed linen. These are normally distributed by the district nurses. Used pads are collected and destroyed whenever disposal is requested.

TELEPHONE ANSWERING SERVICE

The service provided by Telephone Answering Services Ltd., was used for emergency calls by the midwifery, mental health services and to some extent by the home help service during the year. This service operates on a full-time basis for midwives and at nights, weekends and holidays for mental welfare officers. The home help service use this facility during Bank Holidays.

Radio Telephone Service.

Midwives and mental welfare officers continue to use the radio telephones which are rented to the Council by Telephone Answering Services Ltd. Four sets are used by the midwives and two by the mental welfare officers.

In using these radio telephone sets the aim is to provide a total 24-hour emergency cover for both services.

MEDICAL ASSESSMENTS

The assessment of medical fitness of new entrants to the Council's service continued to make heavy demands.

A completed medical questionnaire and a satisfactory chest X-ray examination undertaken within the last twelve months are required of each new entrant.

A full physical examination is carried out in any case of doubt, and on all entrants to teacher training colleges.

In addition, recommendations as to medical fitness to continue in the Council's service were made following consultation with the family doctors concerned and physical examinations.

The number involved over the year was:—

Total number of medical assessments ...	...	1,830	(1,733)
Total number of physical examinations ...	...	467	(462)
Total number examined for continued service...		18	(62)
Total number found unfit for further service ...		12	(8)

The figures for 1969 are given in brackets.

ARTIFICIAL DIALYSIS

In accordance with the general approval issued by the Ministry of Health in January, 1968, arrangements continue to be made, in collaboration with the Housing Officer and the Borough Architect, for home renal dialysis units to be installed in council and private properties for patients referred by various hospitals.

Five residents of the Borough have been helped under this scheme; one in 1968, one in 1969 and three in 1970. The cost of adaptations has been as little as £15 in one case and as much as £940 in another. There is little doubt that the service will continue to expand and may well prove to be rather costly.

WATER SUPPLY

All the dwellings in the Borough are supplied from the Metropolitan Water Board's mains, and I am indebted to Dr. E. Windle Taylor, Director of Water Examination, Metropolitan Water Board, for the following report:

"1 a) The supply was satisfactory both as to (i) quality, and (ii) quantity throughout 1970.

- b) All new and repaired mains are disinfected with chlorine; after a predetermined period of contact the pipes are flushed out and refilled; samples of water are then collected from these treated mains; and the mains are returned to service only after analytical results are found to be satisfactory.

The quality control from these laboratories is carried out by means of daily sampling from sources of supply, from the treatment works or well stations, from the distribution system, and through to the consumer. Any sign of contamination or any other abnormality is immediately investigated.

- c) (i) The Board has no record of the number of structurally separate dwellings supplied in your area, but the population supplied direct according to the Registrar General's estimates at 30th June, 1970, was 174,537.

(ii) No houses were permanently supplied by standpipe.

- d) No artificial fluoride is being added, and where the fluoride content is indicated in the analyses it represents the naturally occurring fluoride in the water.

- 2 a) The supply was derived from the following works and pumping stations:
River Thames — derived from Hampton pumping station.

No new sources of supply were instituted and there were no changes to the general scheme of supply in your area.

The number of samples collected and the bacteriological and chemical analyses of the supply from the above sources after treatment are shown on page 58.

- b) On account of their hardness content and alkaline reaction the Board's river and well water supplies are shown to be not plumbo-solvent. It should however, be appreciated that all types of water pick up varying amounts of metal from the material of water piping particularly when it is newly installed; this applies to copper, zinc, iron and also to lead.

- 3 a) During the year, 109 samples of swimming bath water were taken from the six public pools in the Borough and were submitted for bacteriological examination to the Public Health Laboratory Service. The recommended standard is that 75% of samples should have a colony count of less than 10 per ml., the remainder less than 100. 85 samples were satisfactory and 24 were below the recommended standard. Repeat samples produced satisfactory results. (See page 85. — Swimming Pools).

- b) Forty-three samples of swimming bath water were taken from school or privately owned pools. Six were below the recommended standard but repeat samples proved bacteriologically satisfactory.

- c) Three samples of well water were submitted for bacteriological examination and were satisfactory.

- d) Two samples of mains water thought to be causing illness or to be abnormal in taste were submitted for bacteriological examination. Both were satisfactory.

AVERAGE RESULTS OF THE CHEMICAL EXAMINATION of the water supplied to the London Borough of Richmond upon Thames during 1970. Milligrammes per litre (unless otherwise stated).

Description of the Sample	Number of Samples	Ammoniacal Nitrogen	Albuminoid Nitrogen	Nitrate Nitrogen	Oxygen abs. from KMnO_4 4 hrs. at 27° C.	B.O.D 5 days at 20° C.	Hardness (total) CaCO_3	Hardness (non-carbonate) CaCO_3	Magnesium as Mg	Sodium as Na	Potassium as K	Chloride as Cl	Phosphate as PO_4	Silicate as SiO_2	Sulphate as SO_4	Natural Fluoride as F	Surface-active material as Manoxol OT		Turbidity units	Colour (Burgess units)	pH value	Electrical Conductivity (micromhos)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)
Hampton	52	0.010	0.085	4.8	1.03		270	79	5	27.6	5.6	40	2.7	9	70	0.20	0.03		0.1	12	7.9	580

BACTERIOLOGICAL RESULTS — YEARLY AVERAGES, 1970

Source of supply	BEFORE TREATMENT							AFTER TREATMENT				
	Number of samples	Agar plate count per ml.		Coliform count		Escherichia coli count		Number of samples	Agar plate count per ml.		Coliform count	E. coli count
		20-24 hours at 37° C.	3 days at 22° C.	Per cent. samples negative in 100 ml.	Count per 100 ml.	Per cent. samples negative in 100 ml.	Count per 100 ml.		20-24 hours at 37° C.	3 days at 22° C.	Per cent. samples negative in 100 ml.	Per cent. samples negative in 100 ml.
Hampton 	1,969	19.4		40.58	20.2	54.14	5.9	1,159	8.1		100.0	100.0

SEWERAGE & SEWAGE DISPOSAL

I am obliged to (a) Mr. M. S. Hebron, B.Sc., C.Eng., M.I.C.E., A.M.I.Mun.E., Borough Engineer and Surveyor, and (b) Mr. L. H. Thompson, A.M.I.C.E., A.M.I.S.P. Regional Engineer, Greater London Council for the following reports:—

“(a) Sewerage

The replacement of compressed air ejectors by electric pumps is proceeding at Sandy Lane and Lower Teddington Road, Hampton Wick and similar work will be undertaken in 1971 at two further stations in Hampton Court Road, Hampton Wick.

Plans are in hand for the provision of relief foul and surface water sewers in Hampton Road, Twickenham.

The surface water ditches at Dean Road, Hampton have been piped and a further length of defective foul sewer in Waldegrave Road, Teddington has been replaced.

The sewer survey for the Richmond area is progressing satisfactorily and will be continued in the coming months.”

“(b) Sewage Disposal

Sewage for the Borough is treated at two Treatment Works of the Greater London Council.

Kew Sewage Treatment Works receives sewage from the 11 square miles south of the Thames (with the exception of parts of Ham). The Works treat an average daily flow of $7\frac{1}{2}$ million gallons before discharging to the River Thames, between Kew and Chiswick bridges.

Work has commenced on improvements to the aeration plant in order that treatment standards keep pace with the increasing load on the Works.

Sewage from the remainder of the Borough flows to the Mogden Sewage Treatment Works, which deals with some 99 million gallons per day from the whole of the former West Middlesex area. The effluent is discharged into the River Thames at Isleworth.

An automatic pumping station at Ham commissioned in June 1970, conveys sewage to Mogden, and replaces the former station which pumped to Kew.

With the exception of the period of the manual workers strike when effluent from Mogden was only just maintained at the standards required by the Port of London Authority, both Works have discharged an effluent consistently well within these standards.

SANITARY CIRCUMSTANCES OF THE BOROUGH

E. S. HERBERT, M.A.P.H.I.

Chief Public Health Inspector.

1. HOUSING

(1) UNFIT HOUSES.

The unfit housing programme for the period 1966-70 has continued to receive attention in the past year, and in addition, other individual unfit properties have been represented for action as the result of routine inspection on complaint.

The Housing Act, 1969, Part V, now establishes a more equitable principle in the making of well-maintained payments; a house, to qualify, has no longer to be treated as a whole, and a payment may be made for a well-maintained interior even though the exterior of the property has been neglected, and of course, the reverse applies.

The 1969 Act amends Section 4 of the Housing Act, 1957, which deals with the matters to be taken into account when judging the fitness of a house. Food storage facilities can no longer affect fitness for human habitation, but on the other hand, the internal arrangement of a house now forms part of the fitness standard.

The progress made on Clearance Areas comprised —

1-6 (consecutive), Waldegrave Avenue, Teddington. Five of the tenants have now been rehoused and it is anticipated that suitable accommodation will become available for the remaining family in the near future.

1-13, Market Road, Richmond	} Houses Demolished.
109-123, Colne Road, Twickenham	

Dwellings reported as unfit for human habitation not capable of repair at reasonable expense were:

- 24, Park Lane, Teddington;
- 30, Albert Road, Teddington;
- 54, Fifth Cross Road, Twickenham;
- 56, Fifth Cross Road, Twickenham;
- 58, Fifth Cross Road, Twickenham;
- 60, Fifth Cross Road, Twickenham;
- 158, Colne Road, Twickenham;
- 16, May Road, Twickenham;
- 20, Priory Road, Hampton;
- 26, Queens Road, Twickenham (Basement);
- 28, Sheen Lane, East Sheen, S.W.14;
- 20, Strafford Road, Twickenham (Ground Floor);
- 1, Popes Grove, Twickenham (Basement);
- 23, St. Leonard's Road, East Sheen, S.W.14;
- 16, Myrtle Road, Hampton Hill;
- 38, Thames Street, Hampton (Ground Floor);
- 153, Amyand Park Road, Twickenham;
- 23, Grosvenor Road, Twickenham (Basement);
- 4, Park Road, Hampton Wick;

62, Stanley Road, East Sheen, S.W.14;
 50, Upper Grotto Road, Twickenham;
 10, Chestnut Road, Twickenham;
 Eel Pie Island Hotel, Eel Pie Island, Twickenham;
 73a, Church Road, Richmond (Basement);
 6, Clifton Road, Teddington;
 12, Ferry Road, Teddington;
 10, Marchmont Road, Richmond;
 98, Uxbridge Road, Hampton Hill;
 Willoughby House (Part of), Willoughby Road, Twickenham.

The Council made Closing Orders, Demolition Orders or accepted from the owners undertakings in respect of the following premises :

Closing Orders and Undertakings

65 and 67, Park Road, Teddington;
 7 and 9, Springfield Road, Teddington;
 228, Kingston Road, Teddington (Ground floor and basement);
 54, Lion Road, Twickenham;
 24, Park Lane, Teddington;
 158, Colne Road, Twickenham;
 16, May Road, Twickenham;
 26, Queens Road, Twickenham (Basement);
 20, Strafford Road, Twickenham (Ground floor);
 23, St. Leonard's Road, S.W.14;
 1, Popes Grove, Twickenham (Basement);
 38, Thames Street, Hampton (Ground floor);
 153, Amyand Park Road, Twickenham;
 4, Park Road, Hampton Wick;
 62, Stanley Road, East Sheen, S.W.14;
 50, Upper Grotto Road, Twickenham;
 23, Grosvenor Road, Twickenham (Basement);
 43a, Onslow Road, Richmond (Basement) (Undertaking);
 26, Sheen Lane, S.W.14 (Undertaking);
 16, Myrtle Road, Hampton Hill (Undertaking).

Demolition Orders

12, Stanmore Road, Richmond;
 54, 56, 58 and 60, Fifth Cross Road, Twickenham.

The following properties were made fit for human habitation during the year and in each case the Order was determined or the undertaking cancelled :

260, Kew Road, Richmond;
 225, Hampton Road, Twickenham (Basement);
 126, Heath Road, Twickenham (2nd Floor);
 14, Wades Lane, Teddington;
 50b, Church Road, Richmond;

25, Evelyn Road, Richmond;
 2, 6 and 8, Avenue Road, Hampton;
 39, Onslow Road, Richmond (Basement);
 17, Audley Road, Richmond;
 152, Colne Road, Twickenham;
 21, Park Road, Richmond (Basement);
 310, Richmond Road, Twickenham (Part Basement);
 17, Sheendale Road, Richmond;
 4, Tudor Road, Hampton;
 16 and 18, Wick Road, Teddington (Undertaking);
 25, Park Road, Richmond (Basement);
 20, St. Johns Road, Richmond;
 32, Lewin Road, East Sheen;
 10, Katherine Road, Twickenham.

Existing Closing Orders were varied in respect of the following premises:

21, Kew Foot Road, Richmond (Basement);
 18, Munster Road, Teddington (Basement).

Works of improvement having been carried out at the following premises, they have been removed from the 1966-70 Unfit Housing Programme:

21, Coombe Road, Hampton;
 1, Watts Lane, Teddington;
 13, Watts Lane, Teddington;
 75, High Street, Hampton Wick;
 77, High Street, Hampton Wick;
 79, High Street, Hampton Wick;
 4a, King Street, Twickenham;
 3, Watts Lane, Teddington;
 5, Watts Lane, Teddington;
 7, Watts Lane, Teddington;
 9, Watts Lane, Teddington;
 11, Watts Lane, Teddington.

All the dwellings included in the above report were dealt with by way of formal action under the Housing Act, 1957; in addition, repairs were effected at 177 dwellings after informal consultation with the owners, and 66 other dwellings were made fit for human habitation after the service of statutory notices under the Public Health Acts.

The action taken to remedy unfit houses is summarised in the table below:

(a)	Clearance Areas represented to Council	...	...	...	...	Nil
(b)	Dwellings included in (a) above	...	...	...	...	Nil
(c)	Dwellings demolished after Clearance Orders made	...	...	...	...	21
(d)	Dwellings represented for Demolition or Closing Orders	...	...	...	...	29
(e)	Undertakings received to carry out repairs	...	...	...	...	3
(f)	Closing Orders made in respect of —					
	(i) Whole of building	...	...	...	...	13
	(ii) Part of building	...	...	...	...	6

(g)	Demolition Orders made	...	...	...	...	5
(h)	Closing Orders determined on a building being made fit	...	...	...	...	20
(i)	Demolition Orders revoked	...	...	...	...	Nil
(j)	Undertakings cancelled on a building being made fit	...	...	...	...	2
(k)	Dwellings in which defects were remedied after service of formal notice...					66
(l)	Dwellings in which defects were remedied after informal action	...				177

(2) HOUSES IN MULTIPLE OCCUPATION

The Housing Act, 1969, Part IV, contains a new definition for a house in multiple occupation being "a house which is occupied by persons who do not form a single household", the former definition referring to "a house which is occupied by members of more than one family".

Some difficulty had arisen in the past in houses occupied by persons all claiming some family relationship where, on inspection, it seemed clear that there were a number of households sharing unsatisfactory domestic facilities. The new definition enables local authorities to improve conditions in these properties.

The Act also gives an additional power to local authorities to close any part of a house in multiple occupation which is not provided with adequate means of escape in case of fire and cannot be provided with such means at a reasonable expense.

The Housing Manager has continued to refer cases where applications for rehousing indicated multiple occupation problems. His co-operation in this aspect of unsatisfactory housing has enabled action to be taken with a minimum of hardship to the occupants.

Further progress has been made in implementing the Council's standard in these houses, and as owners show willingness to adopt these reasonable provisions for multiple lettings after informal consultation, fewer statutory proceedings have been necessary.

Formal action taken during the year is shown below :

(1)	Number of Management Orders made	...	...	...	Nil
(2)	Number of Directions made	...	...	...	8
(3)	Number of Notices served requiring additional amenities			...	9
(4)	Number of Management Orders revoked	...	...	...	1

(3) CERTIFICATES OF DISREPAIR

Whereas nearly 100 applications were received annually in the seven years following the introduction of the Rent Act, in recent years it has been almost ignored by tenants of controlled premises and no longer provides a means whereby an owner is required to carry out repairs in order to receive the prescribed rent.

Applications for Certificates of Disrepair :

	1957/63	1964/69	1970
1. Number of applications for Certificates	668	27	—
2. Number of decisions not to issue Certificates	24	2	—
3. Number of decisions to issue Certificates :			
(a) in respect of some but not all defects	520	10	—
(b) in respect of all defects	124	15	—

	1957/63	1964/69	1970
4. Number of undertakings given by landlords under paragraph 5 of the First Schedule	415	16	—
5. Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	3	4	—
6. Number of Certificates issued ...	252	13	—

Applications for Cancellation of Certificates:

7. Applications by landlords to Local Authority for cancellation of certificates	134	23	3
8. Objections by tenants to cancellation of certificates	54	3	—
9. Decisions by Local Authority to cancel in spite of tenant's objection	18	3	—
10. Certificates cancelled by Local Authority	98	23	3

(4) QUALIFICATION CERTIFICATES

The position at the end of 1970 was as follows:

Number of applications received	979
Number of certificates issued	400

During the year an application for a Qualification Certificate was received from a Property Company.

The house concerned was built in 1936 and was generally well constructed and maintained, with the interior being well decorated and furnished by the tenant.

An inspection showed that the Standard Amenities were provided, that there were no items of disrepair and that the house was otherwise fit for human habitation with the exception of 6in. of water covering the site concrete (the depth of the sub-floor space being 5ft. 0in.).

The source of the water could be accounted for by the general level of sub-soil water in the garden.

The Council accordingly refused to issue the Certificate on the grounds that as to freedom from damp, the sub-floor space was flooded with water to a depth of 6in. The owners then appealed to the County Court.

The Registrar inspected the house, and the owners, who acknowledged the presence of the water, submitted that a damp proof course was provided, there was adequate sub-floor ventilation, the walls were not damp above the damp proof course and there was no significant dampness or decay in the floor timbers.

The Local Authority submitted that the sub-floor space was part of the house, that water over the site concrete constituted excessive dampness and that entry of damp laden ground air into the house rendered the dwelling unfit for human habitation.

The Registrar, after reviewing Section 4, Housing Act, 1957, accepted the submissions of the owners that water 5ft. 0in. from the living rooms had not produced any structural dampness or damage to the floor timbers; he could not deduce any ill effect

from the passage of damp laden ground air into the house, as the tenant, a healthy man of 80 years had lived there for 30 years and had not felt the need for complaint to the authorities. The Registrar therefore directed the local authority to issue the Qualification Certificate.

(5) MEDICAL PRIORITIES

At the end of 1969 there were 273 families who had been given medical priority still waiting for accommodation and during the year 81 more were recommended for preferential treatment on medical grounds. 87 families were rehoused in the year and the categories of the 267 families with medical priority still awaiting rehousing on 31st December, 1970 are as follows:

Category A — To be used only when the medical condition of the applicant is such that unless rehoused urgently there is an immediate risk to his life or to the health of other persons	2*
Category B — To be used when the applicant's own health will deteriorate if not rehoused but has not the same degree of urgency as in Category A	118
Category C — To be used when there is a medical priority but where the need for rehousing, though not urgent, would prevent the applicant eventually becoming housebound or institutionalised	133
Families who are already tenants of the Council recommended for transfer to more suitable accommodation	14

*Note.

Both these families have been offered alternative accommodation which they have refused.

2. INSPECTION AND SUPERVISION OF FOOD

(1) MEAT INSPECTION

During the past year the importation of meat from France has increased. The meat is delivered in refrigerated articulated lorries, which are sealed at the port of entry and the meat is inspected as it is unloaded at the premises in the Borough which partake in this trade. So far the importation has been confined to forequarters of manufacturing-quality beef and this class of meat is usually cow beef. Some condemnations have been made usually because of bruising or oedema. These conditions are usually found when the cows have to be transported some distance to the abattoirs in cattle lorries. Notifications of the arrival of meat consignments are sent to the Borough from the various ports of entry, and the inspection of these consignments has entailed quite an appreciable amount of extra work.

(2) FOOD COMPLAINTS

111 food complaints were received during the year and in the main followed the pattern of previous years. Mould growths on bread, meat and fruit pies caused numerous complaints during the summer months, despite the fact that all food traders were given a letter reminding them of the danger and asking them to ensure proper rotation of perishable products, and to ensure none were sold after the expiry of the recommended shelf life. This warning has been given to food traders now for several years, and although the majority of traders do co-operate there is always a minority who disregard the most elementary precautions. One interesting complaint investigated was from a restaurant. The proprietor had purchased a dozen plaice from a local fishmonger. These were filleted, dipped in breadcrumbs and fried, and one customer complained of yellow discoloration of the fish. The Public Analyst found that the permitted dye in the bread-crumbs was so affected by heat and the presence of acid (vinegar) as to colour the fish.

In another case a complaint was received of a metallic taste in boiled eggs. Two eggs were boiled in the office and it was found that there was a distinct phenol taste present in both yolk and white. Further laboratory investigation traced the cause to the presence of hypochlorite in the white and yolks of the eggs. This was then found to be due to some suppliers washing down buildings and equipment with hypochlorite solution due to an outbreak of fowl pest in the area, and the eggs had absorbed the solution.

FOOD AND DRUGS ACT, 1955

During 1970 legal proceedings were taken in 9 cases with the following results:

1. A dairy was fined £25 with £6. 6s. 0d. costs for selling 6 packets of sausages affected with mould.
2. A brewer was fined £15 with £7 17s. 0d. costs for selling a bottle of stout containing a hair roller.
3. A grocer was fined £10 with £5 5s. 0d. costs for selling a pork pie affected with mould.
4. A grocer was fined £20 with £15 4s. 0d. costs for selling a carton of yoghurt containing a galvanised metal rod.
5. A baker was fined £25 with £9 14s. 0d. costs for selling a cake affected with mould.
6. A manufacturer was fined £30 with £9 16s. 0d. costs for selling sausages containing a first aid dressing.
7. A dairy was fined £30 with £6. costs for selling a bottle of milk containing a piece of glass.
8. A baker was fined £20 with £6. costs for selling a cake containing a live maggot.
9. A publican was fined £30 with £8. costs for selling a pork pie affected with mould.

The following list of food was voluntarily surrendered and destroyed:

The following list of food was voluntarily surrendered and destroyed					
Beverages (Pkts. & Jars)	...	97	Milk Products, Cream etc. (Cartons)	75	
Biscuits & Cakes (Pkts.)	...	143	Oil (Bottles)	...	24
Biscuits (Boxes)	...	76	Puddings (Tins)	...	810
Cereals (Pkts.)	...	396	Pickles, Preserves etc. (Jars)	...	28
Cheese (Pkts.)	...	40	Poultry (lbs.)	...	466
Fish (Tins)	...	913	Pastry, Pies etc. (Pkts.)	...	1162
Fish (Wet) (lbs.)	...	168	Sausages (lbs.)	...	55
Fish (Frozen) (Pkts.)	...	426	Sweets (lbs.)	...	75
Fruit & Fruit Juices (Tins)	...	2800	Spirits (Bottles)	...	713
Fruit Fillings (Pkts.)	...	21	Soups (Tins & Pkts.)	...	11
Ice Cream (Cartons)	...	411	Soft Drinks (Bottles)	...	2442
Meat (Tins)	...	456	Vegetables (Tins & Pkts.)	...	1994
Meat (Frozen) (Pkts.)	...	1107	Vegetables (lbs.)	...	70
Meat (lbs.)	...	11207*	Miscellaneous (Tins & Pkts.)	...	672

* This figure includes 3661 lbs. of French Beef, part of five consignments delivered in sealed containers to a local firm. The beef originated from eleven abattoirs in France and was transported via Southampton and Newhaven. Total weight of meat consigned and inspected 206,908 lbs.

(3) FOOD PREMISES

High priority is given to the regular inspection of all food premises, with the emphasis on cafés, grocers, butchers and fishmongers and others handling open food. The smaller cafés and shops require constant vigilance, mainly due to poor layout and

lack of adequate and satisfactory storage space. In such circumstances it is easy for the occupier to disregard the standards of hygiene and it is only by regular inspection and enforcement of the regulations that these premises are kept up to standard.

The food processing factory in the Borough which opened in 1969 and provides prepacked food especially for catering, has continued to expand. Samples of various meals have been taken, and in co-operation with the Public Health Laboratory Service a more complete picture is being built up of the bacteriological content; previous to this sampling there had been very little work done in this field, and it is hoped that on completion the results will establish a basis for future comparison.

Legal proceedings were taken in the following cases:

1. A greengrocer was fined £60 with £5 costs in respect of 5 contraventions.
2. A café proprietor was fined £60 in respect of 6 contraventions.
3. A restaurant proprietor was fined £180 with £5. 5s. 0d. costs in respect of 5 contraventions.
4. A butcher was conditionally discharged with £5 costs in respect of 1 contravention.

The classification of food premises in the Borough by trade or principal business is shown in the following table together with the visits made to each class of premises. There are no poultry processing establishments in the Borough.

Food Hygiene (General) Regulations, 1960.

Type of Premises.	No. of Premises	No. of Premises which comply with Reg. 16*	No. of Premises to which Reg. 19 applies†	No. of Premises which comply with Reg. 19	No. of Visits carried out.
Bakehouses	28	27	28	28	81
Butchers' Shops	124	124	124	124	301
Confectioners (Flour)	66	65	—	—	105
Confectioners (Sugar)	260	260	—	—	282
Dairies	6	6	6	6	21
Fishmongers and Poulterers	39	39	39	39	69
Fried Fish Shops	25	25	25	25	53
Greengrocers and Fruiterers	140	140	140	140	232
Grocers	296	292	296	296	643
Ice Cream Premises—Manufacture	7	7	7	7	109
Ice Cream Premises—Sale and Storage	580	580	—	—	
Public Houses and Licensed Premises	247	242	247	244	335
Restaurants, Cafes and Canteens	370	356	370	367	677
	2188	2163	1282	1276	2908

* Regulation 16 deals with the provision of hand washing facilities for all persons engaged in the handling of food.

† Regulation 19 deals with the provision of facilities for washing food and equipment.

(4) STALLS AND VEHICLES

During the summer months numerous ice cream vendors congregated around popular spots such as Hampton Court Palace. They created a difficult problem in as much as their stalls did not comply with the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966, and that they gave false names and addresses. The same problem occurred again during the winter months when hot dog vendors were in large numbers outside Twickenham Rugby Ground. It would appear that the only answer to this problem is for the public health inspectors to make an inspection

with a police constable who has greater powers to check the validity of names and addresses.

Legal proceedings were taken in the following cases :

1. A stall holder was fined £23 with £5. 5s. 0d. costs in respect of 5 summonses.
2. An ice-cream vendor was fined £10 with £5 costs in respect of 5 summonses.
3. A stall holder was fined £30 with £5. 5s. 0d. costs in respect of 4 summonses.
4. An ice-cream vendor was fined £15 with £5 costs in respect of 1 summons.
5. An ice-cream vendor was fined £25 with £5 costs in respect of 3 summonses.

(5) SAMPLING OF FOOD

Bacteriological

236 samples of ice-cream were examined and of these 21 were not up to standard. This entailed visits to the various premises and checks were made of their sterilising techniques. Further samples were then taken. The sampling of other types of food had to be curtailed due to pressure of work on the Public Health Laboratory Services. 51 samples of other types of food were submitted during the year.

Chemical Analysis

Sampling of food and drugs followed the pattern that has been adopted in previous years, namely foods manufactured in the Borough, foods where standards are in force and imported foods, these groups being given the most attention. This was done by means of informal sampling as a wider range can be covered in the time available. District inspectors note any new products being sold in the shops in their area and take samples accordingly. It has been noted this year that several imported canned foods do not comply with the Labelling of Food Order, 1953, particularly in respect of not including a list of ingredients on the label.

During the year 499 samples were taken of which the following were irregular :

Pure Lemon Extract

This was incorrectly labelled. It consisted of an artificially coloured lemon grass oil but contained no lemon oil. The importers agreed to change the wording of the label.

Trifle Mix

This was found to be an incomplete trifle mix requiring the addition of milk and sugar; the manufacturers agreed to change the description on the label.

Chocolate Cherries in Brandy

These were found to be deficient in proof spirit and the importers agreed to discontinue selling this product.

Pastry Fat

This sample contained an excessive 20% water, but enquiries showed that the product was used only in the wholesale trade and as no actual sale was involved there was no contravention of the Food and Drugs Act.

Apricots in Water

These were found to contain 250 parts per million of tin and had a metallic taste. The line was discontinued by the retailer.

Instant Low Fat Milk

This sample did not have the words 'low fat' prefixed to the word 'milk' whenever it occurred on the label. The manufacturers agreed to change the wording on the label.

Blackcurrant Jam

This was deficient in soluble solids and the name and address of the packer was not on the label. The product was homemade and further sale was discontinued by the retailer.

Apple Chutney

This was another homemade product which did not have the list of ingredients or the name and address of the packer on the label. The sale of the product was discontinued.

Dried Sliced Onions

This sample had a moisture content of 11.2% instead of the usual 5%. As a result of a meeting held between a representative of the firm, the Public Analyst and the Chief Public Health Inspector it was agreed that a new pack of less permeable substance be used in future.

Rollmop Herrings Flavoured with Wine Sauce

Wine was omitted from the list of ingredients and the manufacturers agreed to add this to the label.

Herbal Bonbons with Honey

The label declared the Vitamin C content as 260 mg. per 100 g. whereas the sample contained only 202 mg. per 100 g. The importers arranged for the vitamin content to be increased to allow for deterioration due to storage.

Coffee Brandy-Flavoured Chocolates

The label included a picture of a glass which could indicate to the purchaser that the chocolates contained a spirit. The manufacturers agreed to change the label.

Wine Stabiliser

This contained a permitted preservative but one that was not allowed in wine offered for sale. The product has been withdrawn by the manufacturer.

Mixed Vegetables in Vinegar.

This sample did not contain a list of ingredients on the label, and the product has been withdrawn from sale by the retailer.

Peperoni

Two samples of this product obtained from the same shop did not contain a list of ingredients on the label. The present occupier of the shop had no knowledge from which importer the articles had been obtained. All existing stocks were withdrawn from sale.

The following table shows the types of samples analysed and the results obtained :

Article.	Number Analysed	Number Irregular
Alcoholic Drinks	11	—
Beverages	13	—
Cereals and Cereal Products	18	—
Condiments and Sauces	48	1
Dairy Products	26	1
Drugs	16	—
Fish and Fish Products	14	1
Flour Confectionery	12	—
Food Additives	16	1
Fruit and Fruit Products	39	1
Meat and Fish Pastes	17	—
Meat and Meat Products	48	—
Oils and Fats	24	1
Soft Drinks	14	—
Soups	25	—
Spices and Flavourings	40	1
Sugar Confectionery and Chocolates... ..	28	3
Sugar and Preserves	29	1
Vegetables and Vegetable Products	27	4
Miscellaneous	34	1
Total ...	499	16

(6) THE LIQUID EGG (PASTEURISATION) REGULATIONS, 1963

No pasteurising plants exist within the Borough. No samples were taken during the year.

(7) MILK SUPPLIES AND SAMPLING

Licences granted authorising dealers to store and sell designated milk were as follows :

Ultra Heat Treated	40
Pasteurised	104
Sterilised	63
Untreated	30

There are no processing plants in the Borough but there is one Dairy Farm which is registered by the Ministry of Agriculture, Fisheries and Food.

All the 82 samples of milk examined satisfied the prescribed tests. In addition 14 samples of milk examined for the presence of brucella abortus and mycobacterium tuberculosis were found to be negative.

(8) ICE-CREAM MANUFACTURING AND SAMPLING

There are 7 manufacturing establishments in the Borough and 580 premises registered for the storage and sale of ice-cream. The manufacturing establishments comprise one where the ice-cream is pasteurised by heating to a temperature of not less than 160°F for at least 10 minutes and 6 where a sterilised mix is used and the process of manufacture completed by freezing only.

3. ATMOSPHERIC POLLUTION

This was the first complete year that the part of the Borough south of the Thames has been wholly subject to operational smoke control orders.

During the year the following Smoke Control Order became operational :

Order.	Acreage.	Number of Dwellings	Number of Other Premises
Twickenham No. 9	653	4642	418

There are now 12,902 acres including 62,273 premises subject to Smoke Control Orders. This represents 96% of the area of the Borough and 91% of the premises.

During the year the following Orders were made :

Order.	Acreage.	Number of Dwellings	Number of Other Premises
Twickenham No. 10	538	5778	600
Twickenham No. 11	14.6	1	3

Twickenham No. 10 will become operational in July 1972 and Twickenham No. 11 will be in operation on 1st June, 1971. In making these Orders the Council finalised their programme of creating Smoke Control areas to cover the whole of the Borough. The first Area was, in fact, made in November 1959. Over the years the level of smoke pollution has been progressively reduced to that generally experienced in rural communities.

This improvement is illustrated by the amounts of smoke measured at certain points in the Smoke Control areas.

There are now five stations measuring smoke and sulphur dioxide within the Borough (one at each of the following locations — Barnes, Hampton, Teddington, Kew and Whitton). Three of these stations are operated by the Health Department and the other two by Central Government Departments.

The following table gives processed daily average figures over the year, so far available for eight years up to March, 1970.

Year Ended March	STATION (results in microgrammes per cubic metre)					
	Twickenham No. 3		Twickenham No. 4		Barnes No. 1	
	Smoke	SO ₂	Smoke	SO ₂	Smoke	SO ₂
1963	98	181	98	187	—	—
1964	98	151	89	164	96	106
1965	74	140	67	139	77	120
1966	53	111	56	115	57	102
1967	33	100	40	105	48	119
1968	35	106	42	110	49	122
1969	37	103	45	116	41	105
1970	36	89	43	102	34	94

In addition to illustrating the reduction in smoke levels of up to two-thirds, due mainly to the absence of household smoke at ground level, these figures also demonstrate the poor reduction in levels of SO₂. It has been suggested that this phenomenon is due to the greater use of oil-fired central heating; should this be so, the increasing use of natural gas will produce a marked reduction in the levels of SO₂ in the coming years.

Throughout the year threats of a shortage of fuel and an actual shortage were dominating factors. During the first few months Coalite was in short supply and at one period two merchants stated that they were completely out of stock. This state of affairs fortunately only lasted a few days. Another merchant was assured by the factor

who sold him the fuel that a briquette known as "Kentish Fire" was authorised for use in smoke control areas. This was not true and the sale was stopped at the department's request.

Ten residents complained that they could not get solid smokeless fuel and names of other fuel suppliers were given in each case. None came back to the department reporting failure.

The coming of warmer weather at the end of April saw the end of a potentially critical situation during which, fortunately, no one was reported to be without means of heating. The basic problem remained unsolved during the summer and by October hard coke, which had been abundant during the previous winter, also became scarce.

It was during this period that suspension of Smoke Control Orders was first voiced and the subsequent suspension by the Secretary of State for the Environment of 40% of the Smoke Control Orders in the London area, including this Borough, was at the time considered by some to be an unfortunate reversal in the progress towards cleaner air.

The Clean Air (Suspension of Smoke Control — Richmond upon Thames) Order, 1970 was made on the 9th December, 1970 and came into operation on the following day. It suspended until 31st March, 1971 the following orders:

<i>Smoke Control Order.</i>				<i>No. of Premises in Area.</i>
The Barnes No. 1 Smoke Control Order, 1960	...	...	...	1815
The Barnes No. 2 Smoke Control Order, 1961	...	...	...	1482
The Barnes No. 3 Smoke Control Order, 1962	...	...	...	1673
The Barnes No. 4 Smoke Control Order, 1963	...	...	...	187
The Richmond (Surrey) No. 1 Smoke Control Order, 1959...	...	...	...	341
The Richmond (Surrey) No. 2 Smoke Control Order, 1960...	...	...	...	1603
The Richmond (Surrey) No. 3 Smoke Control Order, 1961...	...	...	...	1989
The Richmond (Surrey) No. 4 Smoke Control Order, 1962...	...	...	...	1553
The Richmond (Surrey) No. 5 Smoke Control Order, 1963...	...	...	...	2558
The Twickenham No. 1 Smoke Control Order, 1961 ...	...	...	...	1918
The Twickenham No. 2 Smoke Control Order, 1962 ...	...	...	...	3815
The Twickenham No. 3 Smoke Control Order, 1962 ...	...	...	...	4640
Total				23574

The occurrence of this fuel crisis was most disappointing, and one would have thought with all the forewarnings given that it should have been avoidable. The primary cause was the shortage of gas coke, the effect being worsened by a failure to produce adequate replacement fuels.

In the Borough domestic supplies of gas coke ceased in March and towards the year's end commercial supplies had also been greatly reduced. The shortage arose from the gas industry's policy of changing over from gas originating from coal to naturally occurring gas. By 1975 it is anticipated that there will be no gas coke produced in this country.

Two complaints arising out of the suspensions came from old age pensioners living in areas still subject to operative Orders. They found the premium solid smokeless fuels very expensive and because of this wished only to burn coal. Such persons cannot afford the capital outlay of installing alternative gas or off-peak electric appliances yet it is these older people together with infants who are in greatest need of warmth.

In discussing heating costs it is interesting to compare the figures in the following table which are based on the appliance efficiencies and annual fuel consumptions set out in the 1963 White Paper "Domestic Fuel Supplies and the Clean Air Policy".

The estimated average weekly cost of room heating using 50 cwts. of bituminous coal per annum is compared with alternative fuels:

Fuel.	Appliance.	1966	1969	1970
Coal	Stool and Fret	12/9	13/5	16/4
Gas Coke	Improved Open Fire	11/9	12/8	18/3
Hard Coke	Openable Room Heater	8/-	8/9	11/7
Gas	Gas Room Heater	9/11	11/1	11/1
Electric	Electric Fire	15/8	18/-	17/9
Electric (off Peak)	Electric Storage Heater	8/1	8/6	7/7
Paraffin	Fixed Flued Heater	8/2	8/2	8/5

Householders continue to have freedom of choice for grant purposes in the selection of replacement appliances. Listed below are the percentages of the appliance types selected during the year compared with previous years.

Appliance Selected	1966	1967	1968	1969	1970
Gas Room Heaters	51%	66%	69%	65%	57%
Open Fires	33%	19%	14%	19%	22%
Solid Fuel Heating Stoves	14%	10%	12%	9%	8%
Electric Storage Heaters	2%	5%	5%	5%	11%
Electric Fires				2%	2%

It would appear from these figures that applicants are beginning to appreciate the low running cost of electric storage heaters. These heaters would no doubt be more popular but for the lack of control over the output of heat from the appliance. Certainly the more rapid response of gas makes the gas room heater more attractive to the home-coming commuter.

Four occupiers of buildings in smoke control areas were found to be emitting smoke through burning coal or incorrectly operating an oil-fired boiler. All offenders complied upon informal requests.

Oil-fired boilers are exempt from the provisions relating to smoke control areas on condition that they are designed, installed, maintained and operated so as to minimise the emission of smoke. The design is generally satisfactory but by using instruments measuring the temperature of the flue gases, the percentage of CO₂, the draught and the Bacharach smoke number it has been found that few are correctly installed. Consequently these boilers seldom work as efficiently as they should and sometimes produce smoke, especially if they are, as is too often the case, poorly maintained.

Poor combustion conditions in oil-fired plant can give rise to oily smells. From time to time complaints of a diesel or paraffin smell are investigated and those arising from an obvious source are easily rectified. However, twice during the year it was impossible to pinpoint the source as in both instances all the known furnaces in the area were satisfactory. The investigations however showed that in neither case was the smell prejudicial to health or a nuisance.

These enquiries also confirmed that many persons use paraffin for lighting or reviving fires, especially bonfires; unburnt vapourised fuel can be most unpleasant and is capable of being carried a long way. One of the complainants was firmly of the opinion that the smell came from overflying aircraft and abandoned this view only when the smell was present in the absence of aircraft.

A cold blast cupola, which is a comparatively simple furnace used to melt iron for casting, had for a number of years been the source of complaint from residents adjacent to a foundry. The complaints mainly concerned grit which was discharged from the chimney of the cupola. A local authority can only require the owner of such a furnace to employ practical means to reduce the grit emission. Various opinions as to what was practicable gave rise in other parts of the country to disputes and inconsistent

standards of enforcement. Because of these the Government set up a working party which after long consideration recommended standards to be adopted for uniform enforcement. The management of the foundry agreed to the suggestion that they should fit a wet-type grit arrestor designed in accordance with the working party's criteria. The work had to be delayed, however, until the annual summer shut down.

The fitting of this wet-type grit arrestor also raised the effective height of the chimney to the recommended height of 60 feet and so ensures a lower ground level concentration of effluvia from the chimney. It is pleasant to report that complaints of smell and grit from the cupola have now ceased indicating an acceptable reduction in the former pollution from this source.

Dark smoke was seen arising from the burning of old railway sleepers at a disused railway goods yard and was in contravention of Section 1 of the Clean Air Act, 1968. The emissions ceased when informal advice was given to the contractors.

It is a measure of the public support for Clean Air that no prosecutions were necessary during the year. The Council sent warning letters to two coal merchants pointing out the offence of delivering coal in smoke control areas, and a similar letter to the occupier of a building to which coal had been delivered.

4. OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The total number of premises registered and inspected at the end of the year is summarised below:

	Total number of registered premises.	Number of general inspections during year.
Offices	762	689
Retail Shops	1,186	1,137
Wholesale Shops	45	24
Catering Establishments	225	192
Fuel Storage Depots	3	1
	<hr/> 2,221 <hr/>	<hr/> 2,043 <hr/>

Part 1 — Registrations and Inspections

The Act has now been in force for 6 years and a check on those premises registered upon commencement of the Act reveals that after the initial inspections an average of 3 subsequent inspections at each premise has been achieved i.e. 4 inspections in a period of 6 years. This is considered a satisfactory level of surveillance and it is hoped that it will be largely maintained.

Changes in the information on the original OSR.1 are now found to be occurring with considerable frequency. Companies change in mergers and takeovers, the numbers of employees vary widely and the premises themselves change hands. One large office block had three different owners in scarcely more than 12 months and some of the tenants were still under the impression that their landlords were the initial owners.

The Act places no obligation upon the employer to notify the registration Authority of any changes, even those perhaps materially altering circumstances. Contraventions may of course arise as a result of such changes e.g. insufficient toilet facilities for an increased staff, but only at the next routine inspection are these likely to be revealed.

One is occasionally surprised at the lengths to which employers will go to avoid compliance with the Act. When an employer of a part-time assistant was asked to provide what one would consider nowadays to be the normal civilised amenity of hot water to a wash-hand basin she reduced the working hours of the assistant to 20 hours so as to place the business outside the scope of the Act.

To deal with contraventions which receive no attention after the service of standard contravention notices and reminders, the cases are reported to the Health Committee for approval of legal proceedings. Before, however, proceeding to legal sanctions the Town Clerk issues a formal warning of this action allowing a further 14 days for compliance with the requirements of the notice. These "14 days" letters have a remarkably galvanising effect upon a situation which, up to that point, would best be described as one of monumental inactivity. There is no doubt that they materially reduce the need for applications for summonses.

Part II — Operation of the General Provisions of the Act

The main requirements of the Act are now so clearly understood that few problems of unusual character arise worthy of comment. The following aspects did present some interest during the year.

WORN STEPS

Worn treads and/or nosings to stairs to the extent of producing a contravention of Section 16 are not an unusual feature of the work and the main problem is usually one of exercising judgment as to whether or not the wear has progressed to the stage of presenting an accident hazard. In the case of two old houses long converted into office accommodation the effect of 250 years of wear on the front stone steps was all too obvious. The complications arising from a requirement to remedy this fault proved to be quite remarkable. It transpired that the premises were scheduled buildings of historic interest and any alterations proposed had therefore to be cleared by another authority. It was argued that the worn stone should be replaced by new stone as concrete would not be in keeping with the character and age of the building. This required a search for specialists in stone work and obtaining several estimates. The cost proved to be high (around £150 per premises) and requests were made for local authority financial assistance in this matter. All this necessitated further consideration and planning approval before work could begin. The work involved chipping out portions of the old treads and the careful insertion of new pre-shaped sections of stonework. The initial notices which included reference to the steps were served in April 1968 and the work was completed in November, 1970.

NOISE

Section 21 empowering the Minister to make Regulations governing noise and vibrations would appear to be unlikely to be implemented in the near future. There is of course a growing public awareness of noise as an environmental problem and for the first time during this last year its impact in shops and offices has been observed. A current feature of some of the large trendy clothes shops is the all-pervading sound of pop music at a high volume level. In one such shop it was noticed that in order to hear and be heard on the telephone it was necessary for the person to retreat with the handset behind a rear door and to close it on the shop noise. The noise level varied according to the character of the music but the general level as part of the permanent working environment could scarcely be other than deleterious. The Act however provides no remedy as yet.

CEILING HEIGHT

On several occasions a ruling has been sought by employers as to the minimum ceiling height for rooms in which persons are to be employed to work. These have usually arisen from proposals to utilise basement rooms as offices or store rooms. The minimum height of ceiling laid down under the Housing Acts is 7ft. but other than rooms subject to a Local Authority's Closing Order (the Local Authority must approve their use for 'any purpose') there would appear to be no barrier to a low ceilinged room being used as suggested providing the other provisions of the Act, particularly the ventilation and overcrowding sections, are met.

HOISTS AND LIFTS REGULATIONS

As foreseen in the previous report the enforcement of these Regulations has placed considerable responsibilities on the 'competent persons' — normally, of course, lift engineers. Inevitably a few problems have arisen. Occasionally the copy of the examination report (F.54) of a defective hoist fails to reach the local authority within the 28 days specified. Defects under paragraph 5 of the report (i.e. those repairs, renewals or alterations required to enable the hoist or lift to continue to be used with safety) are sometimes not correctly indicated as to whether they fall within category (a) immediate action or (b) within a specified time. If category (b) is indicated the specified time is sometimes omitted. It is clear that some examiners are in doubt whether to include the lack of an enclosure of the liftway, particularly with hand-operated crate hoists, within paragraph 5 i.e. affecting the safe-use of the hoist or paragraph 6 which has no safe-use implications.

In one aspect the Regulations appear to be inadequate. Where an examination report indicates the need for repair, the officer who checks to see if the work has been done is in a difficult position if the work required is of a highly technical character. It is suggested that lift engineers carrying out repairs specified on an F.54 report should, on completion of the work, endorse the F.54 (or its copy) held on the premises to this effect. The officer can then quickly establish that the lift is again in a sound and safe condition.

The "competent person" referred to in Regulation 6 who is acceptable for the carrying out of an examination of a lift is clearly intended to be an insurance company engineer or an employee of a firm specialising in lift installation or maintenance. There is however no clear obligation in the Regulations for this to be so and it would appear to be possible for a qualified person employed in a large undertaking to carry out examinations on the company's own hoists and lifts and issue F. 54's accordingly. This would seem to be an undesirable situation.

The number of premises within the Borough in which lifts or hoists subject to the Regulations are sited is expected to approximate 150 and the total number of lifts or hoists to be in the order of 200. The present count indicates that 45% of the lifts and hoists are manually operated and the greater part of these require enclosure to meet the Regulations. In a number of cases this work has already been carried out but there is still a preponderance of hand-powered crate hoists, particularly in licensed premises, which require to have the liftway enclosed.

Part III — Accidents

Of the 26 recorded accidents during the year none proved to be of a serious character. The majority arose from an accidental fall, trip or slip (11) or a fall on stairs or from step ladders (5). Accidents occurring to butchers with their knives continue to appear steadily (4 in the year). All accidents were investigated and in only one case was a clear contravention of the Act revealed.

In this case a youth employed part-time undertook on his own initiative, to clean a gravity feed slicing machine in a food shop and sustained cuts. A contravention of Section 18 was established and the Council, upon consideration of the case, decided that a formal warning from the Town Clerk to the owners of the business that proper supervision must be exercised would meet the case.

Part IV — Prosecutions

Nil.

5. PUBLIC HEALTH INSPECTIONS

The extent to which the law seeks to control our environment can be judged from the wide range of visits made during the year and shown in the following table.

Satisfactory progress in performing these varied duties has only been achieved because of the enthusiasm and interest shown by senior and district inspectors and by the technical and general assistants. The assistance given by the pupil public health inspectors has also been greatly appreciated.

Bacteriological sampling — Ice Cream	...	...	...	...	186
— Milk	...	...	...	...	68
— Other Foods	...	...	...	...	20
Clean Air Act — Inspections and Observations	...	...	...	...	7308
Control of Caravans	...	...	...	...	54
Diseases of Animals Act: Waste Food Order	...	...	...	...	2
Drainage and Sanitary fittings examination	...	...	...	...	3039
Food and Drugs Sampling	...	...	...	...	264
Houses inspected — Housing Act	...	...	...	...	3986
Houses Let in Multiple Occupation	...	...	...	...	244
Housing Applications	...	...	...	...	44
Houses inspected — Public Health Act	...	...	...	...	4436
Houses inspected re Permitted Numbers	...	...	...	...	22
Houses inspected re Vermin and Disinfestation	...	...	...	...	564
Infectious Diseases enquiries, disinfection, etc.	...	...	...	...	1081
Noise Abatement Act	...	...	...	...	488
Offices, Shops and Railway Premises Act — General Inspections	...	...	...	...	2043
Offices, Shops and Railway Premises Act — Other Visits	...	...	...	...	2619
Pet Animals Act	...	...	...	...	12
Prevention of Damage by Pests Act	...	...	...	...	10931
Rag Flock and Other Filling Materials Act	...	...	...	...	9
Rent Act, 1968	...	...	...	...	1
Swimming Baths — Sampling	...	...	...	...	71
Unsound food examination	...	...	...	...	587
Water Supply — Inspection	...	...	...	...	127
Water Supply — Sampling	...	...	...	...	3
Agricultural Holdings	...	...	...	...	3
Animal Boarding Establishments	...	...	...	...	2
Bakehouses	...	...	...	...	81
Butchers Shops	...	...	...	...	301
Confectioners (Flour)	...	...	...	...	105
Confectioners (Sugar)	...	...	...	...	282
Dairies	...	...	...	...	21
Factories (Mechanical)	...	...	...	...	174
Factories (Non-Mechanical)	...	...	...	...	8
Factory and School Canteens	...	...	...	...	119
Fishmongers and Poulterers	...	...	...	...	69
Fried Fish Shops	...	...	...	...	53
Greengrocers and Fruiterers	...	...	...	...	232
Grocers	...	...	...	...	643
Hawkers	...	...	...	...	180
Hairdressing Establishments	...	...	...	...	9
Ice-Cream Premises	...	...	...	...	109
Massage and Chiropody Establishments	...	...	...	...	48
Outworkers	...	...	...	...	65
Places of Public Entertainment	...	...	...	...	4
Public Houses and Licensed Premises	...	...	...	...	335
Restaurants and Cafes	...	...	...	...	677
Riding Establishments	...	...	...	...	2
Schools	...	...	...	...	9
Scrap Metal Dealers	...	...	...	...	3
Interviews	...	...	...	...	724
Miscellaneous Visits	...	...	...	...	2669
Inspections other than Houses — Public Health Act	...	...	...	...	2264
Food Manufacturing Premises	...	...	...	...	3
Total number of visits and inspections	...	...	...	...	47403

The complaints received during the year are classified in the table below and they reflect a pattern similar to that of previous years.

Nature of Complaint.					Number Received
Housing Defects	...	...	...	...	409
Choked and defective drains and sewers	...	...	...	...	792
Defective water closets	...	...	...	...	148
Accumulations of offensive matter	...	...	...	...	263
Unsound food	...	...	...	...	111
Verminous and other Infested premises :					
(a) Bugs	...	...	...	...	50
(b) Rats and Mice	...	...	...	...	1360
(c) Wasps	...	...	...	...	588
(d) Fleas	...	...	...	...	103
(e) Others	...	...	...	...	167
Keeping of Animals	...	...	...	...	19
Nuisance from Pigeons	...	...	...	...	34
Smoke Nuisances	...	...	...	...	107
Noise Nuisances	...	...	...	...	73
Fumigation of Rooms	...	...	...	...	14
Miscellaneous	...	...	...	...	331
Condemned Food	...	...	...	...	120
Total					4689

Every effort is made by inspectors to carry out their work through informal action, and to seek co-operation by interview and letter; in certain cases recourse to statutory proceedings is unavoidable, and a summary of notices served during the year is given below :

Subject of Notice.		Public Health Act.	Food and Drugs Act.
Number of Informal Notices served	...	318	147
Number of Informal Notices complied with	...	177	97
Number of Statutory Notices served	...	86	—
Number of Statutory Notices complied with	...	66	—

6. DISINFECTION AND DISINFESTATION

After the occurrence of an infectious disease, premises and articles therein can be disinfected free of charge and in cases other than infectious disease on payment by the individual.

Disinfestation work to eradicate bed bugs, fleas, etc., is paid for by the individual and is not a charge on the Council.

A complaint was received from the occupier of a single bed-room, self contained flat, regarding "white ants" that were biting her during the night. Upon investigation it was found that these insects were martin bugs, and the centre of the infestation was the bed and pillows. Spray treatment was carried out and no further complaint was received.

These insects are akin to the bed bug, but smaller and lighter in colour, and are usually found in association with house-martin or swallow nests. When the birds migrate during the late summer months the bugs left behind search for other hosts.

This particular flat is on the first floor of a block of three storeys. The roof is of flat construction with a parapet wall, and there is no place for birds to nest. None of the other residents in the block have reported similar infestations. Outside the bed-room window there is a large tree, and some experts believe that the birds disinfest themselves on trees before migration, and it is possible that some bugs may have gained access to the flat from this tree.

Persons suffering from scabies or infested with lice are taken, with their bedding, to Hammersmith Medical Baths for cleansing, and I am indebted to Dr. A. D. C. S. Cameron, Medical Officer of Health and Director of Social Services of the London

Borough of Hammersmith, and to Mr. F. G. Baldwin, Superintendent of the Baths, for their valuable assistance during the year.

7 patients received treatment against scabies. In addition the bedding of 14 further cases, who were treated by their family doctor, was cleansed. In one incident where patients were students in a residential college, it was thought desirable to cleanse over 100 blankets.

28 people were treated for lice infestation, some of whom received more than one treatment during the year.

2 premises were disinfected following infectious diseases and 186 premises disinfested. Costs amounting to £455 4s. 0d. were recovered.

7. PEST CONTROL

(a) RATS AND MICE.

Once again reports of rat and mice infestations received by the Department averaged out at over 5 complaints in each working day of the year and showed no reduction on the previous two years.

	1970	1969	1968
Number of complaints received	1360	1347	1353
Number of infestations found	1074	1091	1040
Total number of visits by rodent control staff ...	10401	10748	8444

Most of the infestations were in or around private dwellings (86%) and the majority of the reports concerned rat infestations (879), mice producing only 195 complaints.

A total of 3,962 premises were inspected for rodent infestation during the year.

The total number of visits made by the rodent control staff showed some reduction over the previous year. This was almost entirely due to the staff being compelled to use public transport or to operate on foot for more than a month due to certain difficult industrial relations.

In last year's report I made reference to the value of the concentrated attack on the sewer rats in the Richmond/Barnes area using fluoracetamide in four direct poisoning treatments. The result had been a marked reduction in the rat population of the sewers as revealed by the annual test baiting programme. It was decided to continue the quarterly treatment in 1970 but, in the event, this was reduced to three. In the Twickenham sector the usual procedure of two treatments in the year was continued. In December the routine testing programme revealed a somewhat changed situation. A total of 453 manholes on the soil sewerage system of the Borough i.e. about 13%, were tested for the presence of rats (71 in Barnes, 154 in Richmond and 228 in Twickenham). The results indicated an increase in activity over 1969. In Richmond/Barnes the percentage of baits taken increased from 2.4% in 1969 to 4.8% despite a total absence of takes in the Barnes sewers tested. In Twickenham the increase was of a more disquieting size from 3% in 1969 to 15% in 1970 (35 out of 228 manholes). This increase in Twickenham after several years of low activity is disappointing and suggests that quarterly treatments should be maintained throughout the Borough if the rapid natural increase in the sewer rat population is to be countered.

An increase of the rodent control staff by one operative in April opened up possibilities for a serious campaign upon the reservoir areas of rat infestation including the systematic and permanent treatment of such areas as parks, open spaces, derelict land, river banks, etc. A start was made on the time-consuming survey work when the resignation of one operative called a halt. No replacement could be obtained during

the remainder of the year but with improved wage levels it seemed possible as the year closed that the vacancy might be filled and the work, it is confidently hoped, may be resumed in 1971.

Contingency planning had been undertaken to deal with the possible environmental health problems arising from the strike of Council manual workers especially with regard to the accumulations of refuse. Both authorised and unauthorised dumps of rubbish were expected to provide an encouragement to rat activity. In practice, however, the problems in the field proved to be minimal. At some unauthorised dumps rats were observed raiding the rubbish but no major infestations developed. It was perhaps fortunate that the strike occurred at that time of the year when infestation reports are usually at their lowest point.

An anxious enquiry was received during the year from a veterinarian into the character of the materials used in our rodent control work and their possible effect on domestic pets particularly dogs and cats. This is an aspect upon which residents occasionally express their anxiety and concern. It cannot therefore be too often stated that, with the sole exception of the sewers, no acute poisons are laid and the poisons used are designed to be specific for rats or mice and are used in concentrations relative to the body weight of the rodents. A dog or cat would therefore have to consume very large quantities of the cereal/poison mixture before suffering any ill effects. The amounts of poison laid do not make this possible in normal circumstances. Nevertheless, precautions are taken to site the bait in positions largely inaccessible to domestic pets, e.g. well within the rat holes or in small bore portions of piping. No report of injury to cats or dogs has been received by this Department which could be attributed to the materials used in rodent control.

The use of warfarin in the control of mice infestations has become largely ineffective and recourse has now been made to the use of Alphachloralose. Using this bait some very effective results have been obtained. In the case of one old licensed premises numerous bodies were picked up and the extensive infestation appears to have been satisfactorily dealt with. Nevertheless, it remains a fact that most mice infestations require the expenditure of many more man-hours to effect a clearance than do most rat infestations.

In the ever-widening environment of concrete and brick in which we live one can have considerable sympathy with those amongst us who struggle to maintain contact with the natural world. One manifestation of this urge is the wide tendency to feed the birds. Ornithologically speaking, except under the harshest winter conditions, there is no real need for the provision of food for birds and one assumes that the fundamental wish is to attract natural bird life into the private garden. Whilst understanding these motives it is as well to emphasise again that the indiscriminate scattering of stale bread on the lawn or similar practices can attract much less welcome visitors amongst the wild life. Residents whose roofs have become permanent roosts for pigeons or who have suffered from the effects of squirrels in the roof space will testify to the problems they cause. There is an even greater likelihood of attracting rats and the number of such infestations under garden sheds, in rockeries or "compost heaps" testifies to the existence of a problem which shows no signs of diminishing. If the urge to feed the birds is irresistible it is suggested that the better course is to use either the suspended net bag holding bird food or the suspended tray or platform on a pole. It is important to add that the tray or platform should have sides to prevent spillage and scatter of the food on to the ground during feeding.

The charges for rodent control work at non-domestic premises (domestic property is of course treated free of charge) had to be increased during the year because of increased costs and wages. The charge remains modest at an all-inclusive £1 6s. 0d. per hour and the average contract is for 3 months at an estimated cost of £6 10s. for 10 $\frac{1}{2}$ -hourly visits. There is occasional resentment at this charge amongst occupiers of

small shops and businesses, but equally there is no doubt that the cost of the Council's service is lower than that of private contractors.

A total of 97 commercial contracts were entered into during 1970 and a further 48 premises belonging to the Council received attention. Under the latter heading are included mice infestations in school kitchens which can be a recurring nuisance.

GREY SQUIRRELS

In previous years I have referred in detail to the problems caused by grey squirrels. Although gardens and open spaces are the natural habitat of squirrels they sometimes invade roof spaces of houses. It must be borne in mind that the department has no statutory obligation to deal with infestations but, when complaints are received from householders whose roof spaces are affected, appropriate advice is given.

FERAL PIGEONS

Subject to certain conditions, Section 74 of the Public Health Act, 1961, permits a local authority to take steps for mitigating nuisance from pigeons. During the year the Council decided to take action to mitigate serious nuisance being caused by pigeons in two areas in the Borough. Specialist firms were engaged for the purpose and 671 pigeons were trapped and humanely destroyed.

WASPS NESTS

Although wasps cannot be regarded as vermin they can be a considerable nuisance. In foraging for food they invade orchards, gardens, food factories and food shops. In houses they can be a persistent worry particularly if there is a nest on the premises. During the summer of 1970 there seemed to be more wasps than usual and 588 requests for advice or help were received from residents in the Borough. Advice was given where necessary, but when complainants requested the nest to be destroyed, arrangements were made for two private contractors operating in the Borough to carry out the work of destruction where possible and for which they charged a reasonable fee to the complainant.

8. FACTORIES ACT, 1961, Part I of the Act.

(1.) INSPECTIONS, FOR PURPOSES OF PROVISIONS AS TO HEALTH.

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written Notices</i>	<i>Occupiers prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	7	8	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	605	174	6	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Totals	612	182	6	—

(2.) CASES IN WHICH DEFECTS WERE FOUND.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S. 1)	—	1	—	—	—
Overcrowding (S. 2)	—	—	—	—	—
Unreasonable temperature (S. 3)	—	—	—	—	—
Inadequate ventilation (S. 4)	—	—	—	—	—
Ineffective drainage of floors (S. 6)	—	—	—	—	—
Sanitary Conveniences (S. 7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	6	6	—	2	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	—	—	—	—	—
Totals	6	7	—	2	—

Part VIII of the Act, Outwork.

<i>Nature of Work</i>	<i>Section 110</i>			<i>Section 111</i>		
	<i>No. of out-workers in August list required by Section 110 (1) C</i>	<i>No. of cases of default in sending lists to Council</i>	<i>No. of prosecutions for failure to supply lists</i>	<i>No. of instances of work in unwholesome premises</i>	<i>Notices served</i>	<i>Prosecutions</i>
Wearing Apparel	19	—	—	—	—	—
Electrical Fuse Makers	51	—	—	—	—	—
Artificial Flowers	30	—	—	—	—	—
Lampshades	11	—	—	—	—	—
Total	111	—	—	—	—	—

9. MORTUARY.

The Mortuary at Hampton continued to function satisfactorily and the number of bodies admitted during the year was 834.

10. RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

There is one small business in the Borough using rag flock and other filling materials, a firm manufacturing quilts, sleeping bags and similar quilted material. The filling materials used are now almost exclusively man-made fibres, principally Terylene.

11. DISEASES OF ANIMALS ACT, 1950

PET ANIMALS ACT, 1951

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

RIDING ESTABLISHMENTS ACT, 1964

The Corporation of London act as agents for the Council in respect of the above Acts. The arrangements have worked very well and I am indebted to Mr. G. S. Wiggins, M.R.C.V.S., Veterinary Officer to the Corporation of London, for his valuable advice and help.

His report on the work carried out on behalf of the Council for the year ended 31st December, 1970 is as follows:

Riding Establishments Act, 1964

Under the terms of this Act, veterinary inspections were carried out at four riding establishments and recommendations submitted. All were recommended for re-licensing. In my report for 1969 I stated that an establishment had not been recommended for licensing until alterations had been carried out. A report was sent on the 19th November, 1970, to the effect that the owner was not intending to operate a riding establishment at this address.

Animal Boarding Establishments Act, 1963

Five establishments were inspected and all were recommended for re-licensing.

In July it was recommended that new conditions, as recommended by the British Veterinary Association, should be used. This was accepted by this authority and these conditions are now embodied on licences.

Pet Animals Act, 1951

Regular visits of inspection were made to pet shops and thirteen were recommended for re-licensing. A new pet shop was inspected and recommended for licensing. Two shops closed during the year.

Psittacosis or Ornithosis Order, 1953

A case of psittacosis occurred in November in a dove. The bird, one of a consignment of twelve which had been imported from Germany, had died and a post mortem had been positive for psittacosis. Visits were made and the remaining eleven doves were restricted until December.

Rabies Order, 1938

Notification was received in August that form A.1. under the above Order had been served. The animal concerned was a siamese cat. The form was withdrawn after three days.

Performing Animals (Regulation) Act, 1925

A certificate of registration was issued to the Secretary of a Television Company on the 7th April. A meeting was held at the offices of the Company and the provisions of the Act were explained to the Secretary. Since the certificate was issued several visits have been made to attend performances of performing animals and to ensure that the terms of the Act are conformed to.

General

Regular visits of inspection were made by Diseases of Animals Inspectors to the following premises:

Poultry Keeper, Oak Avenue, Hampton

Condition was satisfactory.

Piggery, Harvey Road, Hounslow

Satisfactory.

Dairy Farm, Petersham Meadows Farm, Richmond

Throughout the year an excellent standard was once again maintained at this farm.

Kosher Butcher, Red Lion Street, Richmond

Five visits were made to this shop, two being concerned with the fowl pest outbreak regarding disposal of viscera. The shop was kept very clean.

Bushy Park — Richmond Park

Visits were made concerning grazing cattle, sheep and deer. Conditions were very good.

Animals (Miscellaneous Provisions) Order, 1927

Under the terms of this Order, the following were advertised in a national daily newspaper.

The Export of Horses (Excepted Cases) Order, 1969.

The Export of Horses (Protection) Order, 1969.

12. ESTABLISHMENTS FOR MASSAGE and/or SPECIAL TREATMENT

Twenty-nine establishments where massage or special treatment is carried on are licensed under the Middlesex County Council Act, 1944.

All new licensees are required, where applicable, to possess the qualifications necessary for registration by the Board established under the Professions Supplementary to Medicine Act, 1960.

13. SWIMMING POOLS

I am obliged to Mr. T. Lindley, F.Inst.B.M., Baths Manager, for the following report:

"Swimming Pools (Open Air)

Bathing facilities are provided at three Open Air Pools, during the summer period, within the Borough, each of these properties being owned by the Council. The water capacity of each of the Pools is as follows:

Twickenham Open Air Pool	...	...	280,000 gallons
Hampton Open Air Pool	...	...	206,000 gallons
Teddington Open Air Pool	...	...	180,000 gallons

this water being supplied by the Metropolitan Water Board. The pools' water is filtered through pressure sand filters and sterilized by chlorine gas treatment operating

on the "marginal" principle. The pool water at the Twickenham and Teddington Pools is turned over once every $6\frac{1}{2}$ hours, whilst that at the Hampton Pool operates on a 4 hour turnover rate.

Colourmetric tests and water samples at each pool are taken three times daily to determine free-available/residual chlorine content of the water, the pH values of the same, and both shallow and deep end water temperatures. Each of the results obtained are recorded in a standard log-book.

Bacteriological tests of the water at each of the above pools and including Richmond Baths are made monthly and, during the past year 109 samples have been taken, of which 85 were satisfactory and, whilst the remaining 24 were below the recommended standard, repeat samples in each case have produced satisfactory results.

Richmond Baths (Indoor and Open Air)

The Richmond Baths Establishment, of a "combination" nature, situated in the Old Deer Park, Richmond, was opened to the public in August, 1966.

The establishment consists of one main Indoor Pool 110' x 42', water capacity of 210,000 gallons and a turnover rate of 3 hours; one Indoor Learner's pool 42' x 24', water capacity of 17,000 gallons and a turnover rate of $1\frac{1}{2}$ hours, and an Open Air pool 110' x 42', water capacity of 160,000 gallons and a turnover rate of 4 hours. The filtration of all pools' water is through Pre-coat filters, and sterilization is carried out by chlorine gas treatment on "breakpoint" principle. A system of pool water sampling and testing is installed and all indications are automatically recorded on graphs. A plenum heating system is installed and the whole establishment is operated electrically utilising "off-peak" electricity.

The private baths suite consists of 12 private baths for both ladies and gentlemen respectively together with the necessary waiting rooms, toilets, etc.

The grounds are landscaped and well laid out and provide some two acres of grass and banked areas which are available for sunbathing, games, etc."

14. FERTILISERS AND FEEDING STUFFS ACT, 1926

Eighteen samples of fertilisers were taken during the year and the following two were reported upon by the Agricultural Analyst as being irregular :

Sulphate of Ammonia

The percentage of nitrogen was 0.6 above that stated on the statutory statements and was in excess of the limit of variation allowed. Although this was not considered to be to the prejudice of the purchaser the retailer amended the statutory statement accordingly.

Rose Fertiliser

The percentage of phosphoric acid soluble in water was 1.1 below and the phosphoric acid insoluble in water 1.9 above that on the statutory statement. It is known that during storage soluble phosphoric acid can change to the insoluble form, the process being known as reversion but there is no loss of nutrient, the phosphoric acid becoming available to the plant when applied to the soil. Under the circumstances as the purchaser would not be prejudiced no further action was taken.

15. COMMON LODGING HOUSES

There are no common lodging houses in the Borough.

16. HAIRDRESSERS AND BARBERS

At the end of the year 164 hairdressers' premises were registered, and in no case was it necessary to take legal proceedings for enforcement.

SCHOOL HEALTH SERVICE

POPULATION.

The population of Richmond upon Thames at mid-1970 was 174,550 (1969—176,600) of which 21,187 (1969—20,736) were school children in maintained schools.

I am indebted to Mr. W. R. Wainwright, B.A., D.P.A., Chief Education Officer, for the information given in Table I. below, Table 17 on page 99 and for the information on Meals and Milk in schools on page 106.

Table I.

SCHOOL POPULATION (as at 22.1.71)

	No. of schools	Number on Registers		Total
		Boys	Girls	
Secondary Grammar ...	5	1,614	1,574	3,188
Secondary Modern ...	11	2,452	2,364	4,816
Primary	51	6,538	6,303	12,841
	<hr/> 67	<hr/> 10,604	<hr/> 10,241	<hr/> 20,845
Nursery	2	47	53	100
Day Special Schools for E.S.N. children ...	2	103	60	163
Day Special School for Maladjusted children :				
Junior	1	*38	*14	52
Infant	1	16	3	19
Autistic Unit	1	6	2	8
	<hr/> 7	<hr/> 210	<hr/> 132	<hr/> 342
TOTAL	74	10,814	10,373	21,187

* Includes 2 boys and one girl of senior school age.

An increase of 451 pupils compared with the number in 1969 should be noted.

MEDICAL INSPECTION AND TREATMENT

Year ended 31st December, 1970

Table II.

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools
(including Nursery and Special Schools).

A. — PERIODIC MEDICAL INSPECTIONS.

Year of Birth	Number of pupils inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		Number	% of column 2	Number	% of column 2
(1)	(2)	(3)	(4)	(5)	(6)
1966 and later	85	85	100.00	—	—
1965	779	775	99.48	4	0.52
1964	1431	1427	99.72	4	0.28
1963	213	212	99.53	1	0.47
1962	120	118	98.33	2	1.67
1961	82	82	100.00	—	—
1960	69	68	98.55	1	0.45
1959	252	251	99.63	1	0.37
1958	975	968	99.28	7	0.72
1957	709	708	99.86	1	0.14
1956	1147	1145	99.83	2	0.17
1955 and earlier	1124	1122	99.22	2	0.78
TOTAL	6986	6961	99.64	25	0.36

B. — OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	3,131
Number of Re-Inspections...	...	...	...	...	2,609
					<hr/> 5,740 <hr/>

Periodic Medical Inspections.

The number of children inspected at routine periodic medical inspections was 6,986 (1969—6,549). Special examinations and re-inspections were 5,740 compared with 5,905 for the previous year.

Physical Condition of Pupils Inspected.

The general physical condition of school children remains high. Out of 6,986 children examined only 25 were found to be of unsatisfactory physical condition.

The co-operation and collaboration of the teaching staff is gratefully acknowledged. Without their help and understanding it would not have been possible to arrange these routine medical inspections.

Table III.

TABLE A. — Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Year of birth	For defective vision (excluding squint)	For any of the other conditions in table IV(A)	Total individual pupils
(1)	(2)	(3)	(4)
1966 and later	1	7	8
1965	21	99	113
1964	47	204	232
1963	14	51	61
1962	6	36	37
1961	15	31	39
1960	8	24	28
1959	37	31	63
1958	79	118	183
1957	41	78	112
1956	87	124	207
1955 and earlier	101	138	224
TOTAL	457	941	1307

The 6.5 per cent of children inspected who were found to require treatment or under treatment for defective vision, compares with 7.6 per cent in 1969, 9.8 per cent in 1968, 8.6 per cent in 1967, 6.3 per cent in 1966 and 9.00 per cent in 1965.

Table IV.

Defects found by medical inspection in the year ended 31st December, 1970.

TABLE A. — PERIODIC INSPECTIONS.

Defect code number	Defect or disease	Periodic inspections							
		Entrants		Leavers		Others		Total	
		(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4	Skin	54	96	94	68	99	115	247	279
5	Eyes: a. Vision	77	175	148	173	232	268	457	616
	b. Squint	36	45	3	7	16	34	55	86
	c. Other	6	8	4	22	5	43	15	73
6	Ears: a. Hearing	20	214	4	40	15	111	39	365
	b. Otitis media	14	91	3	10	5	48	22	149
	c. Other	14	8	16	4	11	14	41	26
7	Nose and throat	39	259	6	65	14	155	59	479
8	Speech ...	27	87	—	9	19	43	46	139
9	Lymphatic glands ...	3	54	—	2	1	37	4	93
10	Heart ...	1	54	2	28	—	41	3	123
11	Lungs ...	11	66	3	37	10	71	24	174
12	Developmental:								
	a. Hernia ...	—	17	2	1	2	6	4	24
	b. Other ...	7	141	3	39	15	60	25	240
13	Orthopaedic:								
	a. Posture ...	3	18	3	25	12	36	18	79
	b. Feet ...	15	73	9	28	31	76	55	177
	c. Other ...	5	39	6	33	11	49	22	121
14	Nervous system:								
	a. Epilepsy ...	3	22	3	6	9	15	15	43
	b. Other ...	1	13	—	13	2	30	3	56
15	Psychological:								
	a. Develop- ment	7	33	—	4	82	87	89	124
	b. Stability ...	9	103	1	20	77	121	87	244
16	Abdomen ...	2	22	3	7	1	24	6	53
17	Other ...	85	125	55	79	98	252	238	456

(T) Requiring treatment.

(O) Requiring observation.

Table IV. — *continued.*

TABLE B. — SPECIAL INSPECTIONS.

Defect code number	Defect or disease	Pupils requiring Treatment	Pupils requiring Observation
(1)	(2)	(3)	(4)
4	Skin	636	63
5	Eyes: a. Vision ...	111	148
	b. Squint ...	4	4
	c. Other ...	20	7
6	Ears: a. Hearing ...	118	375
	b. Otitis media ...	6	6
	c. Other ...	32	8
7	Nose and throat ...	30	64
8	Speech	36	47
9	Lymphatic glands ...	3	13
10	Heart	3	37
11	Lungs	4	33
12	Developmental:		
	a. Hernia ...	2	2
	b. Other ...	34	106
13	Orthopaedic:		
	a. Posture ...	8	15
	b. Feet ...	40	62
	c. Other ...	9	37
14	Nervous system:		
	a. Epilepsy ...	1	2
	b. Other ...	8	21
15	Psychological :		
	a. Development ...	12	55
	b. Stability ...	26	78
16	Abdomen	1	11
17	Other	72	170

Table V.

Recorded incidence of certain defects found to require treatment at periodic inspection per 1,000 pupils examined.

					1970	1969
Total children examined	...	...	...	...	6,986	6,549
Skin	...	...	...	...	35.4	32.8
Eyes : a. Vision	...	...	...	...	65.4	75.8
b. Squint...	...	...	...	...	7.9	12.8
c. Other	...	...	...	...	2.1	3.3
Ears : a. Hearing	...	...	...	...	5.6	5.3
b. Otitis media	...	...	...	...	3.1	3.6
c. Other	...	...	...	...	5.9	7.7
Nose and Throat	...	...	...	...	8.4	11.6
Speech	...	...	...	...	6.6	8.1
Lymphatic Glands	...	...	...	...	0.6	2.7
Heart	...	...	...	...	0.4	0.6
Lungs	...	...	...	...	3.4	2.9
Developmental :						
a. Hernia	...	...	...	...	0.6	0.6
b. Other	...	...	...	...	3.6	3.0
Orthopaedic :						
a. Posture	...	...	...	...	2.6	2.5
b. Feet	...	...	...	...	7.9	8.8
c. Other	...	...	...	...	3.1	2.9
Nervous System :						
a. Epilepsy	...	...	...	...	2.1	2.5
b. Other	...	...	...	...	0.4	1.0
Psychological :						
a. Development	...	...	...	...	12.7	11.7
b. Stability	...	...	...	...	12.5	12.2
Abdomen	...	...	...	...	0.9	0.4
Other	...	...	...	...	34.1	18.0

Table VI.

Number of children examined other than at Periodic Medical Inspections :

Pupils examined for any condition, ailment or defect...	...	...	...	2,472
Other special examinations, freedom from infection, employment byelaws, etc.				659
				<hr/> 3,131
Re-inspections of pupils previously found to have some defect	...	...		2,609

Table VII.

CLINICS.

	School Health Service facilities available (as at 31.12.70)	
BARNES Essex House, Station Road, Barnes, S.W.13.	Dental (including X-ray) Minor Ailments Orthopaedic (physiotherapy) Speech Therapy	Vaccination and Immunisation
HAM Ashburnham Road, Ham, Richmond, Surrey.	Dental (including X-ray) Minor Ailments Ophthalmic	Orthopaedic (physiotherapy) Speech Therapy Vaccination and Immunisation
HAMPTON 24, Station Road, Hampton, Middlesex.	Dental (including X-Ray) Minor Ailments Vaccination and Immunisation	
HAMPTON WICK 20, Seymour Road, Hampton Wick, Kingston-upon-Thames, Surrey.	Minor Ailments Orthopaedic (Physiotherapy)	Vaccination and Immunisation
MORTLAKE North Worples Way, Mortlake, S.W.14.	Minor Ailments Ophthalmic	Orthopaedic (physiotherapy) Speech Therapy Vaccination and Immunisation
RICHMOND Kings Road, Richmond, Surrey. Windham Road, Richmond, Surrey.	Minor Ailments Orthopaedic (Physiotherapy) Child Guidance Service Dental (including X-ray) Minor Ailments Ophthalmic (including Orthoptic)	Speech Therapy Vaccination and Immunisation Orthopaedic (physiotherapy) Speech Therapy Vaccination and Immunisation
TEDDINGTON Church Road, Teddington, Middlesex. Stanley Road, Teddington, Middlesex.	Dental (Orthodontic and X-ray only) Minor Ailments Ophthalmic (including Orthoptic)	Vaccination and Immunisation
TWICKENHAM York House, Richmond Road, Twickenham, Middlesex. 58, Hampton Road, Twickenham, Middlesex.	Dental Minor Ailments Ophthalmic Vaccination and Immunisation Child Guidance Service Speech Therapy	
WHITTON Hospital Bridge Road, Twickenham, Middlesex.	Dental (including X-ray) Minor Ailments Vaccination and Immunisation	

OPHTHALMOLOGY

Dr. Helena Bridget Casey, M.B., B.Ch., D.O.M.S., Ophthalmologist, reports on the work of the ophthalmic clinics :—

The number of attendances at the clinics is good. A very high percentage of eye defects are diagnosed at the specific age medical checks and by the telebinocular vision screener. I am often surprised how unaware parents are of defective vision in their children.

During the past year I have introduced the use of Mydrilate as a mydriatic. It is instilled on the day of attendance one hour before the child is examined. It obviates the use of atropine instillation twice a day for the previous three days before attendance. It appears to be least traumatic for the parents; the nurses, I am afraid have the trauma instead!

H.E.S. 1 forms for the supply of spectacles have also been introduced on the Richmond side of the borough during the past year and are much more efficient than form OSC 2 of the National Health Service Supplementary Ophthalmic Services. Parents prefer and get their prescriptions immediately under this system.

I would like to thank all those who have helped me in performing the work of the past year.

Table VIII.
Eye Diseases, Defective Vision and Squint.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	79
Errors of refraction (including squint)	2257
Total	2336
Number of pupils for whom spectacles prescribed	461

Keystone Telebinocular Vision Screener.

The use of Keystone Telebinocular Vision Screeners continued in the schools during 1970. The instruments are operated by the audiometer/vision screener operators. The statistics relating to this screening procedure are given below:

Table IX.

Age Group. (1)	First Tests TOTAL (2)	Failures	
		TOTAL (3)	% of Col. 2 (4)
Infants ...	1511	128	8.47
Junior ...	1385	235	16.97
Senior ...	980	165	10.84
TOTAL ...	3876	528	13.62

Table X.

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been dealt with
Received operative treatment:	
(a) for diseases of the ear	2
(b) for adenoids and chronic tonsillitis ...	27
(c) for other nose and throat conditions ...	—
Received other forms of treatment	336
Total ...	365
Total number of pupils in schools who are known to have been provided with hearing aids:	
(a) in 1970	9
(b) in previous years	37

AUDIOMETRY

At the end of 1970 two audiometer/vision screener operators were on the staff of the department.

The year under review saw an added priority given to the routine testing of very young children to the exclusion of senior school children where experience had shown that virtually no new case of defective hearing was discovered. An increase last year of 233 first tests and 178 re-tests on children in the very young age groups was recorded. The number of first tests in the junior age groups declined by 192, although there was a slight increase in the number of re-tests, but in special cases e.g. children with speech defects and children failing to make progress in school, which have first priority, the number of first and re-tests increased by 321 and 146 respectively.

Audiometers are kept in condition by regular calibration by the manufacturers.

Children who fail the audiometric test are referred for further investigations. Thirty four new cases were seen and 104 re-examinations were carried out in 1970 at the Heston Hearing Clinic to which the majority of referrals are made.

Table XI.

(a) Audiometer Tests — Routine

Age Group	1st Tests *	Re-tests.	Failures.	
			Total	% of Col. 1
	(1)	(2)	(3)	(4)
Up to 7 yrs.	2829	490	457	16.15
10 to 11 yrs.	1522	160	156	10.25
Total ...	4351	650	613	14.09

* In Schools.

(b) Audiometer Tests — Specials

Age.	1st Tests.	Re-tests.	Failures.	
			Total.	% of Col. 1
	(1)	(2)	(3)	(4)
Under 5	130	28	64	49.23
5	296	61	186	62.84
6	224	86	146	65.18
7	194	77	110	56.70
8	178	51	78	43.82
9	170	44	78	45.88
10	150	41	74	49.33
11	121	34	54	44.63
12	115	19	42	36.52
13	82	15	29	35.37
14	60	15	23	38.33
Over 14	115	15	81	70.43
Total ...	1835	486	965	52.59

Table XII.

INFESTATION WITH VERMIN.

(i) Total number of individual examinations of pupils in schools by school nurses or other authorised persons...	22,027
(ii) Total number of individual pupils found to be infested ...	123
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ...	—
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ...	—

Table XIII.

DISEASES OF THE SKIN

(excluding uncleanness — see Table XII.).

	Number of cases known to have been treated.
Ringworm :	
(a) Scalp ...	—
(b) Body ...	—
Scabies ...	—
Impetigo ...	—
Other skin diseases ...	399
Total ...	399

Table XIV.

OTHER TREATMENT GIVEN.

	Number of cases known to have been treated.
(a) Pupils with minor ailments ...	1505
(b) Pupils who received convalescent treatment under School Health Service arrangements...	4
(c) Pupils who received B.C.G. vaccination ...	†* 976
(d) Other than (a), (b) and (c) above —	
Heart ...	5
Lungs ...	31
Developmental defects ...	26
Nervous system ...	27
Lymphatic Glands ...	4
Psychological defects ...	20
Abdomen ...	21
Total ...	2619

† Children with Grade I positive re-actions are now being vaccinated.

* includes 67 revaccinations.

Table XV.

HANDICAPPED PUPILS.

Pupils ascertained during the year requiring education at a special school :

(a)	Blind	...	...	...	...	...	...	—
(b)	Partially sighted		...	...	...	...	...	1
(c)	Deaf	...	...	...	...	...	...	—
(d)	Partially hearing		...	...	...	...	...	6
(e)	Educationally sub-normal		...	...	...	...	...	2
(f)	Epileptic	...	...	...	...	...	...	2
(g)	Maladjusted	...	...	...	...	...	...	34
(h)	Physically handicapped		...	...	...	...	...	6
(i)	Speech	...	...	...	...	...	...	—
(j)	Delicate	...	...	...	...	...	...	5*

* Includes one child delicate / maladjusted.

Table XVI.

HANDICAPPED PUPILS, YEAR ENDED 31st December 1970

ASCERTAINMENT

DISTRIBUTION
(As at last day of year)

	No. of ascertained cases known on 31.12.69		No. of new cases ascertained during year		No. of ascertained cases known on 31.12.70		In special day schools		In special residential schools		In main- tained Primary & Secy. schools		In Independent schools		Not at school		TOTAL	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G
Blind	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Partially-sighted ...	1	3	1	—	2	2	2	2	—	—	—	—	—	—	—	—	2	2
Deaf	3	—	—	—	3	—	—	—	3	—	—	—	—	—	—	—	3	—
Partially-Hearing ...	8	4	4	2	11	4	8	3	1	—	—	—	2	1	—	—	11	4
Educationally Sub. ...	68	31	1	1	61	27	49	23	6	—	5	2	1	2	—	—	61	27
Epileptic	3	—	2	—	5	—	—	—	5	—	—	—	—	—	—	—	5	—
Maladjusted	99	31	23	11	101	38	45	16	9	2	8	4	37	14	2	2	101	38
Physically Handicapped	25	11	3	3	23	12	16	6	2	4	2	1	2	—	1	1	23	12
Speech Defects ...	—	1	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	1
Delicate	12	9	4	—	14	6	1	1	6	2	5	2	2	1	—	—	14	6
Multiple Defects ...	9	—	1	—	9	—	4	—	3	—	1	—	1	—	—	—	9	—
TOTAL	229	90	39	17	229	90	125	51	35	8	21	9	45	19	3	3	229	90
GRAND TOTALS ...	319		56		319		176		43		30		64		6		319	

Children NOT ascertained as H.P. but recommended convalescence in a Holiday Home or Camp School during year ended 31st December 1970.

B	G
1	2

RESIDENTIAL SPECIAL SCHOOLS — Table XVII.

	Blind	Partially Sighted	Deaf	Partially Hearing	Educationally Subnormal	Maladjusted	Delicate	Physically Handicapped	Speech Defects	Epileptic	TOTAL
<i>Maintained Schools (L/42)</i>											
Anerley (I.L.E.A.) ...						1					1
Compton Diagnostic (Hants) ...					1						1
Elmers Court (Harrow) ...							3				3
Park Place (Hillingdon) ...							1				1
Red House (Ealing) ...						1					1
St. Nicholas (Surrey) ...					2						2
Suntrap (Haringey) ...							1				1
Swaylands (Barnet) ...					3						3
Tylney Hall (Brent) ...						1					1
<i>Non-Maintained Schools (L/42)</i>											
Bessels Leigh ...						1					1
Burton Hill House ...								1			1
Florence Treloar ...								1			1
John Horniman ...									1		1
Lord Mayor Treloar ...								1			1
Meath ...							2				2
Muntham House ...						2					2
Ovingdean Hall ...				2							2
Red Hill ...						1					1
Royal School for Deaf ...			1								1
St. Margaret's ...								1			1
Shotton Hall ...						2					2
Tenovus ...	1										1
Warlies ...								1			1
<i>Recognized Ind. Schools (L/70)</i>											
Childscourt ...						1					1
Cokethorpe ...						1					1
Craig-Y-Parc ...								1			1
Dartington Hall ...						1					1
Falcon Manor ...						1					1
Farmhill House ...					1						1
Farney Close ...						1					1
Frensham Heights ...						3					3
The Grove ...						1					1
The Hall, Wincanton ...						1					1
Hamilton Lodge ...			1								1
Hengrove ...						1					1
Horncastle ...						2					2
Hurn Court ...						1					1
Leighton Park ...						1					1
Melbreck ...						1					1
Monkton Wyld ...						1					1
Normansal ...						1					1
Northaw ...						3					3
Peredur ...						1					1
Philpotts Manor ...						1					1
St. Agnes & St. Michael ...						1					1
St. Christopher's ...						2					2
St. George's College ...							1				1
St. Mary's Abbey ...							1				1
St. Mary's, Wrestwood ...						1					1
Salesian College ...						1					1
Sandon House ...						2					2
Sibford ...						1					1
Sheiling ...						1					1
Stanbridge ...						2					2
Stinsford ...						1					1
Westonbirt ...						1					1
<i>Other Independent Schools</i>											
Berrow Wood ...						1					1
Bladon House ...						1					1
<i>Hospital Schools</i>											
Chailey Heritage ...								1			1
Lingfield ...									5		5
	1		2	2	7	47	9	7	1	5	81

RESIDENTIAL SPECIAL SCHOOLS.

Table XVII on page 99 shows the number of Handicapped Children maintained by the Richmond upon Thames Education Committee in Residential Special Schools as at 31st December, 1970.

The total number of handicapped children maintained by the Richmond upon Thames Education Committee in Residential Special Schools as at 31st December, 1969 was 86.

DAY SPECIAL SCHOOLS.

St. Hilda's Day Special School for Educationally Sub-normal Children, Barnes.

Admissions during 1970	...	...	...	...	...	...	...	...	11
Discharges during 1970	...	...	...	...	...	...	...	...	6
Transferred to ordinary schools...	...	...	...	...	...	...	...	1	
Transferred to senior day E.S.N. school	...	...	...	...	...	...	...	4	
Transferred to residential school	...	...	...	...	...	...	...	1	
Number of children on roll as at 31st December, 1970	...	...	...	...	...	...	...	...	35

Clarendon Day Special School for Educationally Sub-normal Children, Hampton.

Admissions during 1970	...	...	...	...	...	...	...	...	28
Discharges during 1970	...	...	...	...	...	...	...	...	11
Left school for employment	...	...	...	...	...	...	...	1	
Transferred to ordinary schools...	...	...	...	...	...	...	...	3	
Transferred to Junior Training Centre	...	...	...	...	...	...	...	1	
Transferred to residential school	...	...	...	...	...	...	...	1	
Transferred to school for partially hearing	...	...	...	...	...	...	...	1	
Left district	...	...	...	...	...	...	...	4	
Number of children on roll as at 31st December, 1970	...	...	...	...	...	...	...	...	124

Oldfield House Junior Day Special School for Maladjusted Children, Hampton.

Admissions during 1970	...	...	...	...	...	...	...	...	13
Discharges during 1970	...	...	...	...	...	...	...	...	9
Transferred to ordinary schools...	...	...	...	...	...	...	...	1	
Transferred to residential schools	...	...	...	...	...	...	...	5	
Transferred to Home tuition	...	...	...	...	...	...	...	1	
Left district	...	...	...	...	...	...	...	2	
Number of children on roll as at 31st December, 1970	...	...	...	...	...	...	...	...	52

Oldfield House Infant Day Special School for Maladjusted Children, Hampton.

Admissions during 1970	...	...	...	...	...	...	...	...	8
Discharges during 1970	...	...	...	...	...	...	...	...	Nil.
Number of children on roll as at 31st December, 1970	...	...	...	...	...	...	...	...	16

Athelstan House Autistic Unit, Hampton.

Admissions during 1970	...	...	...	...	...	...	...	...	1
Discharges during 1970	...	...	...	...	...	...	...	...	2
Transferred to ordinary school	...	...	...	...	...	...	...	2	
Number of children on roll as at 31st December, 1970	...	...	...	...	...	...	...	...	9

Handicapped Pupils.

All handicapped children attending special schools, either day or residential, are medically reviewed by the School Health Service at least once a year, and sometimes more frequently so that their progress and special educational treatment can be assessed.

During 1970, one report was issued to the Local Health Authority under Section 57 (4) of the Education Act, 1944, regarding a child who was found unsuitable for education at school.

Information was passed to the Local Health Authority about five educationally sub-normal children who required supervision after leaving school.

TUBERCULOSIS IN SCHOOLS

Following the receipt of information that a member of the non-teaching staff at a school in the Borough was suffering from tuberculosis, investigations were carried out in conjunction with the Consultant Chest Physician. All possible contacts (staff and pupils) were investigated and I am pleased to report that no further cases were discovered.

I am grateful for the co-operation of the Chest Physician, staff and parents in carrying out these investigations.

I would stress here the importance of regular chest X-rays for all personnel in contact with children.

CHILD GUIDANCE SERVICE.

The Medical Directors of the Child Guidance Clinics, Dr. Robin Higgins, M.A., M.B., B.Chir., D.P.M., and Dr. Agnes Main, M.B., B.S., report as follows:—

Dr. Robin Higgins —

The following table summarises the number of cases referred, seen and treated at the Clinic during 1970:—

Referred	Seen	Under Intensive Treatment	Under Supervision or Annual Review
119	101	47	36
Referring Agents:			
General Practitioners	17
School Medical Officers and Health Visitors	30
Consultants	4
Educational Sources	27
Parents	29
Speech Therapists	4
Children's Department	5
Miscellaneous (Courts and N.S.P.C.C., etc.)	3
			119

The brunt of the psychotherapy has been undertaken by Mrs. Powell, but during the course of the year we have also enjoyed assistance from Miss Hyman, (Music), Mrs. Laird (Drama), and Miss Mann, (Remedial Teacher). Two Certificate in Social Work Course students at Chiswick Polytechnic have been placed in the Clinic for periods of 4 months each, and one student for 9 months from the Institution of Education Course for teaching maladjusted children.

We have carried out a detailed analysis of our work during the years 1969 and 1970 with a view to assessing our role and function in the light of prospective and actual changes within the Health and Social Services of the Borough. We have also given a number of talks about our work to outside organisations.

Dr. Agnes Main —

The following table summarises the number of cases referred, seen, and treated at the Clinic during 1970:—

Referred	Seen	Under Intensive Treatment	Under Supervision or Annual review
173	158	98	88

Referring Agents :							
General Practitioners	...	...	...	...	...	...	16
School Medical Officers	...	...	...	...	...	...	24
Head Teachers and Educational Psychologists	...	...	...	...	...	...	53
Parents	...	...	...	...	...	...	53
Speech Therapists and Health Visitors	...	...	...	...	...	...	9
Children's Department	...	...	...	...	...	...	6
Miscellaneous Agencies	...	...	...	...	...	...	12
TOTAL							173

During the year we were fortunate in having the services of Miss Marriott who extended her attendance as psychotherapist to 5 sessions a week, and Mrs. Powell, psychotherapist, who gives us one whole day. This has been immensely helpful and we have been extremely sorry that Miss Marriott is, owing to pressure of commitments, unable to continue this apportioning of her time.

During last year we lost the services of Mrs. MacMillan, one of our psychiatric social workers who had been with us for many years. She is much missed by patients and staff. After her departure we were extremely fortunate that Miss Lomax found herself able to increase her sessions to full-time and for many months she coped alone with all the demands that the Clinic imposes.

We continue to appreciate the help the Maria Grey post-graduate students give in the remedial teaching field, during their training. We had also once more a post-graduate student from the Institute of Education (London University) and in this symbiotic process we each gain.

The Borough's two special schools for maladjusted children are continuing to function most beneficially. Infant Oldfield is expanding and in the absence of provision for day education of maladjusted children of senior age group the Head Teacher of Junior Oldfield has had a special class with senior trained teachers made available. Children from Junior Oldfield reaching senior school standard have progressed so satisfactorily that many went on to senior secondary modern schools.

The Autistic Unit at Athelstan House continues to provide for the more severely mentally handicapped child and two children have been integrated into normal schools.

Table XVIII.
Child Guidance Treatment.

	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics	259

Table XIX.
Orthopaedic and Postural Defects.

	Number of cases known to have been treated.
(a) Pupils treated at clinics or out-patient departments ...	179
(b) Pupils treated at school for postural defects	42
	221

SPEECH THERAPY.

Therapists working in the Borough during 1970 were:—

Miss Kathleen Buckman (Senior — Full-time).

Mrs. Mary Pletts (Full-time).

Mrs. Penelope Hunter (Full-time — January to September).

Mrs. Lesley Prout (Full-time from September onwards).

Mrs. Mary Hughes (Part-time).

Mrs. Pleonie Tooley (Part-time).

Mrs. Hunter left in September for personal reasons. She was succeeded by Mrs. Prout who had worked previously in the London Borough of Newham.

During the year 328 children attended for treatment at one of the following clinics or special schools:—

Child Guidance Clinic, Twickenham

Windham Road, Richmond

Kings Road, Richmond

Mortlake

Essex House, Barnes

Ham.

The special schools visited regularly were:—

Oldfield House Infant

Oldfield House Junior

Clarendon E.S.N.

St. Hilda's E.S.N.

Barnes Boys' Secondary (Remedial Class)

Athelstan House Autistic Unit

The Special Junior Training Centre.

Most of the children referred for treatment were young, and on the whole attendance was good, despite some transport difficulties.

There has been good liaison between therapists and schools, and this co-operation has been valuable.

It was felt that many young children referred for treatment suffered from television replacing conversation in the home, and often when both parents go to work insufficient time can be given to stimulating and encouraging speech.

As in former years, several students from London Training Schools (Speech Therapy) attended regularly.

Members of staff were grateful for being permitted to attend the annual Speech Therapy Conference at Manchester, and also courses on the Speech of the Mentally Handicapped Child, and the day courses on Stammering and the Autistic Syndrome.

Table XX.

Number of pupils treated by Speech Therapists under arrangements
made by the Authority.

Number of Children treated ...	...	...	...	...	...	328
Number of New Patients ...	...	...	...	...	...	140
Total Number of Attendances	...	...	...	...	...	4797
Number on Waiting List, 31.12.70	...	...	...	...	...	26
Number of Children Discharged	...	...	...	...	...	111
Normal Speech	...	...	...	...	...	57
Improved	...	...	...	...	...	41
Referred elsewhere, left district, etc.	...	...	...	...	...	9
Uneventuated (non-attendance, etc.)	...	...	...	...	...	4

Table XXI.

Types of cases treated during the year.

Dyslalia ...	...	...	...	...	...	141
Retarded Speech and Language Development...	...	...	...	...	...	66
Stammering	...	...	...	...	...	35
Indistinct Speech	...	...	...	...	...	9
Sigmatism	...	...	...	...	...	56
Hyper Nasality	...	...	...	...	...	6
Cleft palate	...	...	...	...	...	7
Dysphasia	...	...	...	...	...	3
Autism ...	...	...	...	...	...	3
Dysarthria	...	...	...	...	...	1
Dypraxia	...	...	...	...	...	1

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER.

During the year 1970 there were again changes in the dental staff. Miss S. Adams, part-time orthodontic surgeon at the Church Road Clinic, resigned in August having practised there since 1959. Her dental nurse, Miss A. Puntin, who had been at the clinic since 1954 resigned due to ill health in March, and I have regretfully to report that she died in Teddington Hospital later in the year. Mr. C. J. Grigson completed his apprenticeship at the dental laboratory and commenced employment at the Dental School, University of Wales. Mrs. J. Crane was appointed specialist surgery assistant in June, and Mr. A. Bocca as a dental apprentice in December. Mr. M. Perry passed his Final City and Guilds Dental Technician examinations in July.

During the year, 140 sessions were devoted to the dental inspection of the mouths of 9,928 children in schools and a further 3,034 were inspected for the first time in the year at clinics. A total of 5,827 children were found to require treatment after inspection and all were offered treatment except those already attending their own practitioner. The number offered treatment was 5,338 and of these 3,462 accepted it. The number of sessions devoted to treatment was 1,705 and details of the treatment are shown below arranged in age groups. 1,764 pupils were re-inspected at clinics and 1,239 of them were found to require treatment.

Table XXII.

	Age 5—9.	Age 10—14.	Age 15+
First visit to clinic	1773	1341	348
Subsequent visits	2616	2785	649
Total visits	4389	4126	997
Additional courses commenced ...	419	279	72
Fillings: Permanent teeth ...	1059	2352	894
Fillings: Deciduous teeth ...	2255	243	—
Permanent teeth filled	909	2157	867
Deciduous teeth filled	2080	229	—
Permanent teeth extracted ...	71*	317†	75‡
Deciduous teeth extracted ...	1125	373	—
General anaesthetics	511	225	18
Emergencies	426	169	27
Pupils supplied with partial dentures	—	10	3
Number of dentures supplied ...	—	10	3

* this figure includes 16 teeth extracted for orthodontic purposes.
† this figure includes 192 teeth extracted for orthodontic purposes.
‡ this figure includes 31 teeth extracted for orthodontic purposes.

The next table shows a wider range of treatment given but not divided into age groups.

Table XXIII.

No. of pupils X-Rayed	168
Prophylaxis	426
Teeth otherwise conserved	304
No. of teeth root filled	5
Inlays or crowns	26
Courses of treatment completed ...	3792
Orthodontics :	
Cases pending from 1969	326
New cases commenced	49

Continuing from last year nearly 1000 entrants to primary infant schools at the time of their first dental inspection were presented with a dental hygiene kit, consisting of a bathroom beaker, toothbrush and toothpaste, together with a letter encouraging parents to take an increased interest in their child's oral hygiene.

Perhaps as a result of this and seventeen sessions devoted to Dental Health Education there has been a marked increase in the number of attendances and amount of treatment in the 5-9 years old age group over the last three years. (Table XXIV).

Table XXIV.

	1968.	1969.	1970.	% Increase.
No. of Children at School ...	9402	9609	9920	5.5
No. of Attendances ...	3771	3526	4389	16.0
No. of Fillings ...	1996	2488	3314	66.0
No. of Extractions ...	935	1803	1196	27.9
No. of Emergencies...	385	309	426	10.6

Five clinics in the Borough have sessions devoted to general anaesthetics at regular intervals. One consultant and one appropriately qualified anaesthetist are employed on a sessional basis.

The orthodontic surgeon treated 375 patients with 168 removable appliances and completed treatment for 47 children. Twenty seven courses of treatment were discontinued during the year.

The dental laboratory which has a staff of one chief technician, 5 technicians and 2 apprentices supplies the needs not only of this Borough but also of the London Boroughs of Brent, Ealing, Harrow, Hounslow and also, for a short while, Ashford Hospital. The output of the laboratory was as follows:—

Table XXV.

Dentures	Ortho. appliances	Inlays and Crowns	Misc.
167	1850	100	547

NUTRITION.

Meals and Milk.

The number of children receiving mid-day dinners and milk at maintained schools on a selected date in 1970 was as under:—

Date	Number of dinners	Number of children at school	% of children having dinners	1/3 pints milk (Primary Schls. only)	Number of children at school
22nd September, 1970	*15,574	19,524	79 (appx.)	10,935	11,758

* In addition approximately 1500 meals per day to Teaching, Kitchen and Cooking Staff.

The number of children receiving milk at non-maintained schools on 22nd September, 1970 was 1,711 (number of children in school 2,117).

In September, 1970, meals were being cooked at 41 school kitchens and three central kitchens.

Table XXVI.

ROAD ACCIDENTS TO CHILDREN, 1970.

Mr. M. S. Hebron, Borough Engineer and Surveyor, has kindly supplied the following details of road accidents to children under 15 years of age :—

Month	Fatal.	Serious.	Slight.	Total.
January ...	—	2	12	14
February ...	—	—	19	19
March ...	—	2	20	22
April ...	—	3	19	22
May ...	—	7	18	25
June ...	—	2	14	16
July ...	—	4	15	19
August ...	—	—	13	13
September ...	—	3	17	20
October ...	*2	7	16	25
November ...	—	1	21	22
December ...	—	—	7	7
Totals	2	31	191	224

- * 1. Pedestrian (male aged 10) ran into path of private motor car in Kew Road, Richmond.
 * 2. Pedestrian (male aged 5) ran into path of private motor car in Twickenham Road, Richmond.

Table XXVII.

DEATHS OF SCHOOLCHILDREN.

It is with regret that I include the following details of local schoolchildren living in the Borough who died in 1970 :—

M	Sex		Age	Cause of Death.
		F		
1			5	Lacerations of spinal cord with fracture of thoracic vertebrae. (Road accident).
1			10	Contusions of brain with fracture of skull. (Road accident).
1			10	Cerebral anoxia due to bronchopneumonia and acute epilepsy. Electrical burns. Accidental death.
1			12	Volvulus of small intestine.
1			15	Asphyxia. Misadventure.
1			15	Pseudo-hypertrophic muscular dystrophy.
1			16	Hanging. Took his own life.

	CLINICS
Barnes	1. Essex House, Station Road
Ham	2. Library, Cassinaw
Hampton	3. Ashburnham Road
	4. 24 Station Road
	5. Mobile Clinic, Green Road
Hampton Wick	7. 20 Seymour Road
Kew	8. St. Winifred's Hall, Leybourne Park
Mortlake	9. North Wicoria Way
Richmond	10. Kings Road
	11. Windham Road
Teddington	12. Church Road
	13. Stanley Road
Twickenham	14. York House
	15. 58 Hampton Road
	16. Mobile Clinic, Meadow
	17. Mobile Clinic, Roslyn Road
Whitton	18. Hospital Bridge Road
	19. Mobile Clinic, Colonial Avenue
	DAY NURSERIES
Barnes	20. 47 Cassinaw
Richmond	21. Parkshay
Twickenham	22. Gifford Lodge, The Green
	HOSTEL
Twickenham	23. 11 Roslyn Road
	ADMINISTRATIVE OFFICES
Teddington	24. Elmfield House, High Street
Richmond	25. Kings Road
	ADULT TRAINING CENTRE
East Sheen	26. Chessnut Avenue
	JUNIOR TRAINING SCHOOL
Teddington	27. Sorchmore Road

