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

Contributors

Merton (London, England). Borough Council.

Publication/Creation

[1966?]

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London Borough of Merton

THE HEALTH OF MERTON



1965

The Annual Report of the MEDICAL OFFICER OF HEALTH and the PRINCIPAL SCHOOL MEDICAL OFFICER P. J. DOODY, M.B., B.Ch., B.A.O., D.P.H.



THE HEALTH OF MERTON

by

P. J. DOODY, M.B., B.Ch., B.A.O., D.P.H.

THE HEALTH OF MERTON

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P. J. DOODY, M.B. B.Ch., B.A.O., D.P.H.

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To The Mayor, Aldermen and Councillors of the London Borough of Merton.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the first Annual Report on the health of the London Borough for 1965. The Report shows that the health of the residents has been good during the year and, generally, vital statistics compare favourably with those of the country as a whole. The Registrar-General's estimated mid-1965 home population of 185,130 shows a decrease of 910 compared with the population in 1964.

The live births totalled 2,899 giving a live birth rate per 1,000 of the population of 15.66. Of these 2,899 live births, 228 were illegitimate. The live birth rate for England and Wales for the year was 18.1.

Deaths from all causes numbered 2,106 giving a death rate per 1,000 of the population of 11.37. The excess of births over deaths was 793.

The reduced population followed a trend which has persisted over the past ten years. The population of the area in 1955 was 195,970. It will thus be seen that the population of the area has fallen, since 1955, by 10,840, although in each of the intervening years there has been an excess of live births over deaths. Throughout the years since 1955 the live birth rate of the area has been considerably lower than the national rate, and whilst in 1955 the death rate of the area was 9.1 compared with the national rate of 11.7 for England and Wales, over the intervening years the disparity between the local and the national death rates has narrowed—for 1965 Merton's death rate is 11.37 and that for England and Wales is 11.5.

There would appear to be no indication that this tendency to a shrinking population may be altered in the near future. In the summary of the Ten-Year Plan for the Development of Health and Welfare Services of Local Authorities in England and Wales, the Ministry of Health shows the projected population of the Borough as 173,600 by 1976, giving a further anticipated reduction of population of 11,530 during the next 11 years.

There was only one case of poliomyelitis during the year. This was a case which produced partial paralysis of the upper arm and shoulder of the patient, which was diagnosed in retrospect some weeks after the onset of the initial symptoms.

One case of typhoid fever occurred during the year. This occurred in a child returning from a Continental holiday with her parents. During the incubation period of the disease, the child was attending a private nursery. An investigation was carried out on the staff and pupils at this nursery. All the specimens of stools taken proved to be negative. The child made a satisfactory recovery.

There was a high incidence of measles, which is a normal epidemological feature every two years.

The demand on the Home Help Service throughout the year was heavy, and the difficulty of recruiting sufficient Home Helps to meet all demands to the full, in an area in which women were able to find many alternative forms of employment, made the task of allocation of help a matter of careful selection of priorities of need.

In the operation of the Mental Health Service, the need for establishing a close liaison with mental hospitals to which patients from this area are regularly admitted, became a matter of priority. By the end of the year a close link had been established, both by the medical staff and by the Mental Welfare Officers of the Department. The Authority's Mental Welfare Officers took the initiative in requesting case conferences with hospital staff on patients with specially complex difficulties. Some difficulty was experienced in ascertaining whether patients being discharged from hospital were in need of, or desirous of having, community care even when such patients had been receiving such care before their admission to hospital.

The practical difficulties of maintaining a close link with mental hospitals in the area are very real ones. Patients from this Borough are admitted to three mental hospitals, namely Netherne, West Park and Horton Hospitals and if, in accordance with the highest standards of social work practice, a close liaison is to be maintained with patients, whilst in hospital or in the community, close links with three mental hospitals are obviously much more difficult and time consuming with a limited staff, than would be the case if a close link had merely to be established with one hospital serving the area. In addition it is also necessary to maintain some liaison with three hospitals for subnormal patients.

Throughout the year, difficulties associated with staffing were an ever-present problem. The establishment framed to meet the needs of the Health Department, comprises a variety of professional and semi-professional workers, and the twofold problem was that of recruiting staff with appropriate professional qualifications and the necessary experience, and of retaining such staff once recruited.

In the case of Social Workers it became apparent that the acute shortage was to be a continuing one, especially when one realises that on the establishment of the Health Department there is provision for Medical Social Workers, Psychiatric Social Workers, Mental Welfare Officers and other Social Workers whose period of training leading to eventual qualification varies from two to four years. The choice, therefore, in filling vacancies for Social Workers on the establishment was seldom one of selecting the best applicant from a short list of qualified and experienced candidates but was rather a matter of appointing from the available applicants, one who, although professionally unqualified, had previous practical experience in this field of work, and whose personality was suitable. It was not possible, therefore, to fill all the vacancies on the establishment with qualified staff, and it is obvious that the best hope for the future is for the Authority to train, on an assisted training scheme, persons with the necessary educational background and personality, to embark on training leading to an eventual professional qualification. In the meantime, unqualified staff on the establishment receive guidance and help from the qualified staff.

By the end of the year it had not been possible to recruit a Deputy Superintendent of the Midwifery and Home Nursing Service, and the Superintendent, therefore, carried on under considerable difficulties.

The inability to appoint a Health Education Officer is very much to be regretted. This is an essential post in a Health Department for, without such an Officer, health education tends to become sectionalised rather than being carried out as a cohesive and carefully formulated plan, placing due emphasis at appropriate times, on various aspects of positive health. As a means of maintaining a close liaison with other branches of the National Health Service and with other London Boroughs, during the year it is necessary for me to attend meetings of St. Helier Group Medical Committee, The Association of London Borough Medical Officers of Health, London Liaison Committee, South West London and Surrey Executive Council, South West London and Surrey Local Medical Committee, Regional Liaison Committee of the South West Metropolitan Regional Hospital Board, and St. Helier Group Maternity Liaison Committee (of which I am the Chairman).

A period of reorganisation of such great significance as the London one is bound, in the early stages of its implementation, to present difficult problems of administration, not the least of which has been the change, in the sphere of the Personal Health Services from a system of Divisional Administration formulated by the Surrey County Council, and carried out by the three former County Districts under the guidance of County Council Central Administration, to a system of administration as a directly responsible Local Health Authority. The first year of the new set-up, therefore, has been to some extent a period of transition in which the staff of the Health Department, particularly those in senior administrative posts, have slowly conditioned themselves to the greater responsibilities associated with the assumption by the Authority of direct responsibility, as opposed to responsibility under the umbrella of a County Central Administration. This was inevitable since, with few exceptions, the Health Department staff comprised personnel who had worked in the previous Divisional system.

On the Environmental Health side, of course, this was a merging of the Services of three Authorities into one, the change from Divisional to Central Administration not being an attendant problem, although the merging of the policies of three former Districts, particularly under the Clean Air Act, into one procedure for the new Borough presented very real problems.

In conclusion, I should like to take this opportunity of expressing my appreciation to the Chairman and Members of the Health Committee for the consideration and courtesy they have shown to me during the year.

My thanks are also due to all members of the Health Department for the loyal and efficient manner in which they carried out their duties during a difficult period of reorganisation. I would especially like to thank Mr. Cockell, the Chief Public Health Inspector and Mr. Atkinson, my Chief Administrative Officer, for their contributions in connection with the preparation of this Report.

I am also indebted to my colleagues in other Departments for their ready help and co-operation on all occasions.

I have the honour to be,

Your obedient Servant,

P. J. DOODY, Medical Officer of Health.

COMMITTEES AT 31st DECEMBER, 1965

HEALTH COMMITTEE

The Mayor, Alderman Cyril S. Marsh, J.P. Councillor (Miss) N. K. Watts (Chairman) Councillor G. Waller (Vice-Chairman)

Alderman T. H. Metcalf

Councillors:

J. T. Botten (Mrs.) E. M. Davis A. S. Hutchin Miss S. Knight G. W. A. Pearce, J.P. J. T. Pyne, J.P. G. H. Raymond W. Reay J. Wemms

ENVIRONMENTAL HEALTH SUB-COMMITTEE

Chairman of the Health Committee, Councillor (Miss) N. K. Watts (Chairman)

Vice-Chairman of the Health Committee, Councillor G. Waller

Councillors:

J. T. Botten (Mrs.) E. M. Davis (Vice-Chairman) A. S. Hutchin G. W. A. Pearce, J.P. G. H. Raymond W. Reay

MENTAL HEALTH SERVICES SUB-COMMITTEE

Chairman of the Health Committee, Councillor (Miss) N. K. Watts (Chairman)

Vice-Chairman of the Health Committee, Councillor G. Waller

Councillors:

A. S. Hutchin (Miss) S. Knight G. H. Raymond (Vice-Chairman) W. Reay

Co-opted members:

Representative of the Local Medical Committee (Dr. R. A. Arthur).

Representative of the S. W. Metropolitan Regional Hospital Board (Dr. M. A. Fawkes).

TOWN CLERK

Sydney Astin (Solicitor)

WHOLE-TIME STAFF

(At 31st December, 1965)

Medical Officer of Health and Principal School Medical Officer	P. J. Doody, M.B., B.Ch., B.A.O., D.P.H.
Deputy Medical Officer of Health and Deputy Principal	
School Medical Officer	W. D. Swinney, M.B, Ch.B., D.P.H.
Senior Medical Officer Assistant Medical Officers and	M. D. Sussman, M.B., Ch.B., D.P.H.
School Medical Officers	Alison M. Batten, M.B., Ch.B., L.R.C.P., L.R.C.S., L.R.C.P.S., D.P.H. June P. Cooper, M.B., B.S., M.R.C.S., L.R.C.P., D.Obst. R.C.O.G., D.C.H., D.P.H. V. Feldman, M.D., M.B., B.S., M.R.C.P., M.R.C.S., L.R.C.P., D.P.H. Maria J. Freeman, M.B., B.S., L.M.S.S.A. J. F. Kelly, M.B., B.Ch., B.A.O., D.P.H. L. W. McNamara, M.B., B.S., D.P.H. Elizabeth Pryce-Jones, M.B., Ch.B., D.C.H. Joan P. Tom, M.B., B.S., D.C.H.
Chief Dental Officer	M. T. Gibb, L.D.S., R.C.S.
School Dental Officers	S. Adorjan, M.D. (U.Vienna), L.D.S., R.C.S. Elizabeth W. Beaver, B.Ch.D. (Leeds). Wanda T. Truscoe, B.D.S. (Lond.), L.D.S., R.C.S. H. W. Freeth, L.D.S., R.C.S., M.R.C.S., L.R.C.P.
Chief Public Health Inspector	G. H. Cockell, F.A.P.H.I., F.R.S.H.
Deputy Chief Public Health	
Inspector	G. E. Hayne, M.A.P.H.I., M.R.S.H.
Superintendent Health Visitor	Miss P. M. Richards, S.R.N., S.C.M., H.V.Cert.
Superintendent of Midwifery and Home Nursing Service	Miss B. R. Lamberg, S.R.N., S.C.M., Q.N., M.T.D.
Home Help Organiser	Miss J. Forrest
Chief Administrative Officer	W. Atkinson, D.P.A., Cert. S.I.B.
Deputy Chief Administrative	NEW YORK THE SERVICE AND THE S
Officer	J. R. Richardson
Senior Mental Welfare Officer	F. T. Rainer, Dip.Soc. Science.
Deputy Senior Mental Welfare Officer	F. J. Gerring
Mental Welfare Officers	F. C. Dorrington
349	S. G. H. Worrall Mrs. H. Yates, S.R.N., Cert. in Applied Social Studies
Mental Health Social Worker	Mrs. F. M. Coleman

Social Worker ... Mrs. A. Martin, B.A. (Hons.), H.O. Training Certificate

Supervisor, Junior Training

Centre ... Mrs. M. Barlow, Dip.N.A.M.H.

Educational Psychologist ... Miss D. Waldeck, B.A. (Liverpool), Dip. N.A.M.H. (Lond.)

Psychiatric Social Worker ... Mrs. A. Litauer, Mental Health Diploma,

London, Social Science Diploma, London

Speech Therapist ... Miss C. M. Durie, L.C.S.T.

PART-TIME STAFF

(At 31st December, 1965)

Cl Di		IN HER ME ME DO MECE
Chest Physicians	- 6	J. M. Hill, M.D., M.B., B.S., M.R.C.P., M.R.C.S., L.R.C.P.
		E. Sanders, M.D., M.B., B.S., M.R.C.P., M.R.C.S., L.R.C.P.
		F. J. H. Walters, M.D., M.B., B.S., M.R.C.P., M.R.C.S., L.R.C.P.
Consultant Psychiatrist		R. K. Freudenberg, M.D., L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.M.
Ophthalmic Surgeons		W. L. Armstrong, M.A., B.M., B.Ch., (Oxon.), D.O. (Eng.) M. C. Shah, L.M.S.S.A.
Orthopaedic Surgeon		G. Hadfield, M.R.C.S., L.R.C.P., F.R.C.S. (Eng.)
Child Psychiatrists		D. Rumney, M.R.C.S., L.R.C.P., D.P.M. A. R. Wilson, M.A. (Oxon.), B.M., B.Ch., D.P.M.
Assistant Medical Officers	and	
School Medical Officers		Cicily M. Clarke, M.A., M.B., Ch.B., D.C.H.
		Hilda C. Dean, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
		Joyce M. Havelock, M.B., B.S., M.R.C.S., L.R.C.P., C.P.H.
		Susan M. S. Turner, M.B., Ch.B., D.P.H. B. S. Sweetman, M.B., B.S., M.R.C.S., L.R.C.P.
School Dental Officers		C. A. J. Heath, L.D.S., R.C.S. Joyce Heath, B.D.S. (Lond.)
		Ann C. Leonard, L.D.S., R.C.S.
		Sheila McDonald, L.D.S. J. M. Sturman, L.D.S., R.C.S.
		M. G. Smith, L.D.S., R.C.S. P. Turnbull, B.D.S.
Dental Orthodontists		Frances J. Bigg, L.D.S., D.Orth., R.C.S.,
Dental Orthodolison		B.D.S.
		S. I. Robinson, L.D.S., R.C.S. J. G. Whitelegg, L.D.S., R.C.S., B.D.S.
Dental Anaesthetists		W. Carpenter, M.A., M.B., B.Ch., B.A.O., D.A.
		Betty M. Margetts, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H.
		Iris I. Grant-Adams, M.R.C.S., L.R.C.P., D.P.H.
		R. G. Smith, M.B., B.S., M.R.C.S., L.R.C.P., D.A., D.Obst.R.C.O.G.
Dental Auxiliaries		Miss V. Hooker Mrs. G. V. Gliddon
Speech Therapist		Mrs. S. J. Gold, L.C.S.T.
Audiometrician		Mrs. M. Dean, S.R.N.

Physiotherapists

.. Mrs. A. G. Ockleshaw, M.C.S.P. Mrs. T. Puddifoot, M.C.S.P. Mrs. V. Kelly, M.C.S.P.

Social Workers

.. Mrs. M. C. Hudson Miss E. M. Smith, S.R.N., S.C.M., Dip.Nsg.

Intern Mortality Rate per 1,000 from ble/s.

Inform Mortality Rate per 1,000 legitimus/fixe births

Inform Mortality Rate per 1,000 standard for fixe births

GENERAL PUBLIC HEALTH SERVICES

General Information

Area of Borough in acres		 	9,739
Number of private dwellings (1961)		 	59,482
Number of private households (1961)		 	64,219
Rateable value, at 1st April, 1965		 	£10,958,770
Actual product of a penny rate: -			
1965-66		 	£45,005
Population: —			
Census figure (1961)		 	186,647
Registrar-General's Estimate of Popul	ulation	1965	1964
at 30th June		185,130	186,040

Summary of Vital Statistics 1965

23.0	nana 0	00.1	no nimon	Pocun		
Live Births—					1965	
Legitimate: Males				11	1336	
Females						
10.1						2671
Illegitimate: Males					120	2030
Females		nelsono.	- 000 F	7242 7		
1 ciliates						228
			Totals			2899
			2 Octato			
Live Birth Rate per 1,000	popula	tion				15.66
Corrected Live Birth Rate						16.29
Illegitimate live births—per						8.55
Still Births—	ccircage	or tot	al live of	LLIIS		0.55
Legitimate: Males					17	
Females	***				23	
remaies				***	23	40
Illamitimata a Malas					3	40
Illegitimate: Males Females					3	
Females					THE PARTY	2
						3
			Tatala			42
			Totals			43
0.71 1 1 1 D 1 000 1						14.62
Still-birth Rate per 1,000 li	ve and	still-b	irths			14.62
Still-birth Rate per 1,000						0.23
Total live and still-births						2942
Infant Mortality (Deaths of	t intan	ts unc	ier one	year		
of age)—						
Legitimate: Males					29	
Females					21	
						50
Illegitimate: Males	***				3	
Females					1	
						4
			Totals			54
Infant Mortality Rate per	1,000	live bi	irths			18.35
Infant Mortality Rate per 1	,000 le	gitima	te live bi	rths		18.73
Infant Mortality Rate per 1,						17.54
Neo-Natal Deaths (Deaths						
of life)						31
Neo-Natal Mortality Rate						10.69
Early Neo-Natal Mortality		(death	s of inf	ants		
in first week of life pe	r 1.000	live b	pirths)			9.69
Perinatal Mortality Rate (S	Still-bir	ths pl	us death	s in		
first week of life per						21.83
Total loss of infant life						21.05
deaths) per 1,000 live						24.22
Maternal Deaths (including			LAID			2
Maternal Mortality Rate pe			nd still-hi	irthe		0.68
Deaths	1,000	Ave al	ad Still-O	T CHIS		2106
Death Rate per 1,000	nonu	lation				11.14
Corrected Death Rate	per 1	ouu p	opulation	1		11.14

Deaths from Bronchitis per 1,000 population	0.65
Deaths from Pneumonia per 1,000 population	0.65
Deaths from Cancer of lung and bronchus per 1,000	
population	0.68
Deaths from other forms of Cancer per 1,000 popu-	
lation	1.81
Marriages	1480
Marriage Rate per 1,000 population	8.0

Causes of Death at different Periods of Life in the London Borough of Merton during 1965

Cause of Death		τ		- 4	Wks.	0.							_					_							
		4	Jnder week		under l year	1	to 5 ears		o 15 ears		o 25 ars	25 to year		35 t yes		45 t yes	o 55 ars		to 65	65 to		75 y and		Ton	TAL
		Λ	1 F	1	M F	N	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	13
Suberculosis: Respiratory								-	_	1	_	_	_	_		-	_	2	_	2	_	5	3	10	
							_	_		_	_	_	_	-	_	_	_	-	_	-	_	-	-2	-	
Lillain Phinner						_	_		_		_	_	_	_			-	-	_	3	2	2	_	5	
Market and African Comment		-						0200	_	_	_		_	_	_					_	_	_	000	_	
Mharaina Carab		707						PES			-														
1 2 2 2		***					1	900																	
95 11 11.1		***			1991	100		18.25								100									
					50/10	185		100	-	10000			200					100				15	1		
		***	0 0	200			1	10000		1	_	-	-	-	100	-	-	1	-2	-	-	-	-	_	
Other infections and parasitic di	iseases	***			1	-		1000	-	7	-	1	1	-	_	-	1	-	2	-	_	-	1	2	
Aalignant neoplasm: Stomach		***							-	-	-	-	-	-	-	4	_	6	-	10	6	7	7	27	
Malignant neoplasm: Lung, bro				- -		-	_	-	-	-	-	-	-	2	1	12	2	40	5	41	6	12	5	107	
ialignant neoplasm: Breast		=		- -		-	-	-	-	-	-	-	-	-	7	-	10	-	13	-	11	-	9	-	
falignant neoplasm: Uterus	***			- -			-	-	-	-	-	-	-	-	2	-	3	-	5	-	5	-	7	-	
ther malignant and Lymphatic	neoplas	m -					-	1	-	-	-	2	1	5	-	15	9	27	25	34	32	32	31	116	
eukæmia: Aleukæmia						- -	- 2	1	-	-	-	-	-	-	-	1	1	1	-	1	_	-	2	4	
							-	-	-	-	-	-	-	1	-	-	1	1	2	-	4	3	9	5	
ascular lesions of nervous syst	em						_	-	-	-	1	1	_	4	2	8	2	13	11	27	38	41	96	94	1
Coronary Disease: Angina			-			-	-	-	-	-	_	2	_	5	-	38	6	73	19	92	64	76	108	286	1
Typertension with Heart Diseas	se						-	-	-	-	_	_	_	_	_	2	_	1	1	3	3	5	13	11	
							_	-	-	_	_	2	_	1	1	1	1	8	9	10	26	29	97	51	1
a a a a		-		- 1		-	_	-	-	1	_	_	_	î	1	3	1	10	6	15	14	27	45	57	9
· O			_				_		_	_	_	_	_			_	_	-	1	-			1	_	
a common in			1	1	4	1 3	_	1	_	_	_	_	_	_	_	2	1	6	5	11	10	31	41	58	
ann ab lela		000						1							Ta.	4	_	21	A	38	8	23	22	86	
at the territory			100					1500								-4	1	3	1	5	1	5	3	13	
Ilcer of Stomach and Duodenu	111		Libra					1700							100	100		1	1	5	2	3	1	9	
astritis, Enteritis and Diarrho	1111		Blo =					75.5							100	100		1	1	3	2	1	2	1	
							6000	1		1000	6170		10 10		-	05.5	1000	1		-2	3	1	2	4	
		=			3020			1	3 155	1000					-	100	150	1		1 2	233	-	4	4	
lyperplasia of prostate				-				1000			-	-	7.	-	-	27.7	50	-		1	-	4	-	5	
regnancy: Childbirth, abortion					-		-	-	-	-	1	-	_	-	1	_	-	-	-	-	-	-	-	-	
ongenital Malformations	***		2 -		2		_	177	1	-	-	1	-	-	-	_	1	77	1	1		-	-	6	
ther defined and ill-defined di		2	0 '	7	2 :		-	1	-	2	3	1	-	2	4	9	9	14	5	12	19	15	29	79	
						1	-	-	-	3	-	2	-	-	1	-	-	2	-	3	1	1	1	12	
					-	3	-	15-	-	-	-	-	1	3	2	2	1	1	-	1	5	2	8	12	
uicide						-	-	-	-	2	-	3	1	1	2	1	-	2	3	2	1	1	1	12	
Iomicide and operations of war						-	-	-	_	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	
ALL CAUSES		2		8	9 1		3	5		9	6	15		25	24	102	50	222		319	261			1072	-

Comparative Statistics, 1965

Blada tate bina takkan mengan pian 1 1 dan 1 1	Merton	England and Wales
Rates per 1,000 Population:	1110 2 3	1 80 5
Live births	15.66	18.1
Deaths (all causes)	11.37	11.5
Respiratory tuberculosis	0.07	0.04
Cancer of lung and bronchus	0.68	0.55
Rates per 1,000 live and still births:		
Still births	14.62	15.8
Maternal mortality	0.68	0.25
Perinatal mortality	21.83	26.9
Rates per 1,000 live births:		3
Infant mortality—deaths of infants under 1 year	18.35	19.0
Neo-natal mortality—deaths of infants in first 28	10.00	25.0
days of life	10.69	13.0

PRINCIPAL CAUSES OF DEATH IN ORDER OF FREQUENCY

Out of 2,106 deaths occurring during the year 1,924 were attributable to the undermentioned principal causes:—

		No. of Deaths.	D	ercentage of eaths from all causes.
1.	Heart Diseases	696		33.0
2.	Cancer	461		21.9
3.	Vascular lesions of the nervous			
	system	244		11.5
4.	Other defined and ill-defined			
	causes	157		7.5
5.	Other Circulatory Diseases	124		5.9
6.	Pneumonia	121		5.7
7.	Bronchitis	121		5.7

INFANT DEATHS (Under 1 year)

				Ag	ge at	De	ath				
Duinging Louriful	Under	ng A	D	ays				m . 1			
Principal certified Causes of Death			1- 7			22- 28		3- 6	6-9	9- 12	Total
Prematurity		14	4	-	_	_	_	_	_	-	18
Commonited Malformations		4	-	-	1	-	4	-	-	1	10
Bronchopneumonia		-	-	2	1	-	3	3	1	1	11
Birth Injuries		3	1	-	-	-	-	-	_	-	4
Othor course		2	1	-	-	-	4	-	3	2	12
Totals		23	6	2	2	-	11	3	4	4	54

INFANT MORTALITY

Of the 54 infant deaths, 29 occurred in the first seven days of life. The only one of these which was delivered at home died within 30 minutes, the cause being multiple congenital abnormalities.

The infant mortality rate of 18.35 and the neonatal mortality rate of 10.69 per 1,000 live births compare satisfactorily with the respective rates of 19.0 and 13.0 for England and Wales.

PERINATAL MORTALITY

The perinatal mortality rate for Merton was 21.83 per 1,000 live and still-births thus comparing favourably with that for England and Wales of 26.9.

MATERNAL MORTALITY

Two maternal deaths were attributed to the Authority for 1965. One was a death in hospital in March, the cause of death being antepartum haemorrhage following breech delivery of a full-term infant.

The second death actually occurred in November, 1964, but since the cause of death, given as air embolism due to instrumental abortion, was certified by the Coroner following his enquiry in 1965, this death was attributable to 1965, thus producing an unfortunately high maternal mortality rate of 0.68 per 1,000 live and still-births.

CONTROL OF COMMUNICABLE DISEASES

Notifications received during 1965 (Corrected Notifications)

	Days	Ag	e Gr	oups o	of Ca	ses N	Votifie	d		100
Disease	Under 1	1-2	3-4	5-9	10- 14	15- 24	25- 44	45- 64	65 & over	Tota
Measles	81	578	737	934	64	18	16	_	_	2428
Scarlet Fever	. 1	3	16	36	6	-	-	_	_	62
Pneumonia		-	1	_	-	3	1	6	-	11
Puerperal Pyrexia		-	-	-	-	8	7	-	-	15
Whooping Cough	4	8	9	20	1	-	_	-	-	42
Dysentery	. 2	4	9	7	1	4	4	3	-	34
Tuberculosis (Resp.):	- 1 - 1 -	1	1 %				1000			ann.
Males		-	-	1	-	- 5	9	11	4	30
Females		-	-	1	1	4	3	4	2	15
Tuberculosis (Non-Resp.)							10.0			
Males		-	-	-	_	1	2	-	_	3
		-	-	-	-	-	4	2	_	6
		-	-	-	-	1	-	-	-	1
		-	1	-	-	-	_	_	_	1
		-	-	_	-	-	1	5	1	7
	1	1	2	2	-	1	1	1	-	9
Ophthalmia Neonatorum.	. 1	-	-	-	-	-	-	-	-	1
Poliomyelitis (paralytic) .	. –	_		-	_	1	_	_	Tor	1
Totals	90	594	775	1001	73	46	48	32	7	2666

TUBERCULOSIS

There are three chest clinics serving the Borough, one for each of the three constituent areas. All are based at Cumberland Hospital, Mitcham.

The Chest Physicians reported that, while the number of new cases of pulmonary tuberculosis remained much the same, lung cancer constituted an increasing problem. The high number of cases of bronchitis and emphysema presents serious difficulties which could only be effectively alleviated if more housing were available.

They also reported a waiting list, for the first time, for beds in Cumberland Hospital; due mainly, in their opinion, to respiratory cripples who are kept alive by modern medical practice but require repeated admission to hospital because of recurrent chest illness.

It was also reported that the general practitioner service of the Mass X-Ray continues to be increasingly patronised.

The Authority employs one whole-time and two part-time Tuber-culosis Health Visitors, and one part-time Tuberculosis Visitor, who work in close liaison with the Chest Physicians. In addition, for dealing with social problems of in-patients and out-patients of Cumberland Hospital, suffering both from tuberculosis and other diseases of the chest, the Authority employs a Medical Social Worker.

DOMICILIARY VISITING

All households from which notifications have been received are regularly visited. Intensive efforts are made to trace all contacts with a known case of respiratory tuberculosis. Details of domiciliary visiting by Health Visitors are given below:—

Visits i	n connection with old cases	 963
Visits i	n connection with new cases	 42
Visits i	n connection with contacts	 264

1269

Total.

B.C.G. VACCINATION

During the year B.C.G. inoculation of school children in the thirteen-year-old age group was carried out:—

Number of children skin tested	 	1753
Number found negative	 	1544
Number vaccinated with B.C.G.	 	1537

No children with positive skin tests were known to be contacts with notified cases of tuberculosis.

One-hundred and fifty-five of the children with positive skin tests were X-rayed. No case of active disease was found.

INCIDENCE AND DEATH RATES PER 1,000 POPULATION

During the year the following notifications of Tuberculosis were received:—

		Males.	Females.
Respiratory	 	30	 15
Non-respiratory	 ***	3	 6

The death rates per 1,000 population were 0.07 respiratory and 0.000 non-respiratory, compared with 0.04 and 0.006 respectively for England and Wales.

MASS X-RAY

In addition to the general practitioner service, visits were made to industrial sites throughout the area and sessions were held for the general public. The service is of great value in the early diagnosis of pulmonary tuberculosis and non-tuberculous abnormalities.

The results are tabulated below: -

	1000	imber rayed		nonary . found	Primary Lung Cancer found		
	Males	Females	Males	Females	Males	Females	
General Practitioner Service	912	745	2	2	11	_	
Public and Industrial Sessions	10,776	6,727	9	6	7.8	501	
Totals	11,688	7,472	11	8	18	1	

DEATHS

There were 13 deaths from respiratory tuberculosis during the year. The table of causes of death on page 17 gives an analysis by age and sex.

AFTER-CARE OF THE TUBERCULOUS

The Authority makes an annual grant of £100 to each of the three T.B. Care Committees working within the Borough, to aid them in the much appreciated work which they carry out in connection with the after-care of the tuberculous.

PROPHYLACTIC MEASURES

The table below gives details of initial protection given by the injection of prophylactics against diphtheria, smallpox, whooping cough, poliomyelitis and tetanus:—

Discourse	Number of primary courses given											
Disease against which protection	rwom!	Y	ear of Bir	th	Idren wi	Others	T 1					
given	1965	1964	1963	1962	1958/61	under 16 years	Total					
Diphtheria Whooping Cough Poliomyelitis	1,042 1,041	1,265 1,255	153 151	29 29	126 45	37 2	2,652 2,523					
(By injection)	2	6	6	3	5	3	25					
Poliomyelitis (Oral) Tetanus	384 1,042	1,723 1,264	192 153	81 29	183 201	48 173	2,611					

The continuing need for immunisation and vaccination is brought home to the public at large by the use of leaflets, posters and displays, and by the teaching of the Health Visitors at the clinics and in the course of their district visits.

RE-INFORCEMENT MEASURES

In addition to the above measures of primary protection the following numbers were given re-inforcement doses:—

Diphtheria	 	1802
Whooping Cough	 	1411
Poliomyelitis	 	2062
Tetanus	 	1734

POLIOMYELITIS

At the end of the year, 80,193 persons had completed a full course of immunisation since the scheme began in 1956. The age distribution of these completed cases is given below:—

Persons	born 194	13-65		52,106
Persons	born 193	33-42		15,791
Others				12,296
To	tal		***	80,193

FOURTH INJECTION

At the end of the year 19,124 children, aged not less than five years and not more than 12 years, had received a fourth dose either by injection or by the oral method.

SMALLPOX

The following table shows the number of persons vaccinated or re-vaccinated against smallpox, in the various age groups during the year:—

		Age at Time of Vaccination										
				6–9 months	9 months -1 year	1 2-4 years		5-15 years	Total			
Number cinated	vac-	15	22	26	78	1,496 177 16		1,830				
Number re- vaccinated		OIL AS	E POS			CES	15	22	37			

GENERAL MEDICAL SERVICES

During the year the medical staff carried out 667 medical examinations of staff for superannuation purposes. Five examinations were also carried out on staff, absent from work owing to sickness, to ascertain their fitness to return to duty.

VENEREAL DISEASES

The table below is compiled from figures supplied by the clinics at St. Helier Hospital, Carshalton, and Croydon General Hospital. No figures are available from other clinics in the London area.

Number of patients resident in Merton and treated for the first time in 1965:—

		s.B	Male	Female	Total
Gonorrhoea	 		18	2	20
Syphilis	 		4	3	7
Other conditions	 		70	47	117
Totals	 		92	52	144

24

Notifications of Birth

The table below gives details of all births notified during the year occurring in the home, or in Institutions, and gives the total number of births finally attributable to Merton after outward transfer of births attributable to other Authorities. This figure of attributable notified births does not necessarily coincide with the number of attributable registered births supplied by the Registrar-General.

		Domiciliary Births						Institutional Births					Total Births					
	L	ive	St	Still Tota		Total		ve	e Still		Total		Live		Still		To	otal
	M	F	M	F	M	F	М	F	M	F	M	F	M	F	M	F	M	F
Births notified as occurring in Merton	212	233	_	1	212	234	1220	1125	11	16	1231	1141	1432	1358	11	17	1443	1375
Transfers)	4	2	-	-	4	2	700	697	13	11	713	708	704	699	13	11	717	710
Total of all births notified Births occurring in Merton attri-	216	235	-	1	216	236	1920	1822	24	27	1944	1849	2136	2057	24	28	2160	2085
butable to other Authorities (Outward Transfers)	-	_	_	-	-	_	679	616	6	6	685	622	679	616	6	6	685	622
Total births attributable to Merton	216	235	_	1	216	236	1241	1206	18	21	1259	1227	1457	1441	18	22	1475	1463

PERSONAL HEALTH SERVICES

MATERNAL AND CHILD-CARE

GENERAL

Maternal and Child Care Services are operated in nine purposebuilt Clinics, and five hired halls throughout the Borough.

ANTE-NATAL AND POST-NATAL SERVICES

Six ante-natal Clinics are held each week at Clinics in the area, at which an Assistant Medical Officer and a Health Visitor are in attendance. At these ante-natal Clinics cases are booked for subsequent hospital confinement. Post-natal sessions are also held on these occasions.

In addition seven ante-natal sessions are held by midwives for patients booked for domiciliary confinement.

Relaxation and mothercraft classes are held throughout the Borough at which health education on a personal basis is carried out by health visitors and midwives.

Attendances at the ante-natal clinics during the year were as follows:—

Number of women who attended for ante-natal examination ... 1137 Number of women who attended for post-natal examination ... 36

There were 374 midwives' clinic sessions at which 506 women attended. The total number of attendances was 2,883.

RELAXATION CLASSES

Ante-natal relaxation classes are held weekly by health visitors and midwives at the following clinics: Amity Grove, Church Road, Grand Drive, Middleton Road, Morden Road, Russell Road, Wide Way. The attendances were:—

Number of women who attended during the year-

(a) (b)	Institutionally booked Domiciliary booked	 	 354 26
		Total	 380

The total number of attendances was 2,242.

PREMATURE INFANTS

The total number of premature infants born in the area during 1965 was 190.

Weight at Birth	nur	at hom sed enti at home	rely	Born at home and transferred to hospital on or before 28th day			0
	Total	Died within 24 hrs of birth	Sur- vived 28 days	Total	Died within 24 hrs of birth	Sur- vived 28 days	Grand Total
2 lb. 3 oz. or less	1	1		2.5	_		1
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz	-	-	-	-	-	-	00-
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz Over 4 lb. 6 oz. up to and includ-	1	11111	1	_		el.	1
ing 4 lb. 15 oz	-	-	-	-	-	-	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz	11	0840	11	1	11/2-70	1	12
Totals	13	1	12	1	_	1	14

Twenty-two premature infants died during 1965. This means that 11.6% of the 190 premature infants born during the year died within a year. Only 1.2% of full-term babies died before reaching the age of one year.

CHILD WELFARE

GENERAL

The Local Authority holds Infant Welfare Clinics at the fourteen premises listed below. Nine of these are purpose-built, the remainder being hired for the weekly clinic session.

The Toddlers' Clinics provide a service very similar to the School Health Service. The child receives a detailed medical examination and a full range of specialist services are available, including the special clinics provided by the Education Service. Children can be referred to the Child Guidance Clinic, and the visiting Consultant is available to discuss individual problems with medical and nursing staff. These Toddlers' Clinics are an important factor in establishing the means whereby the developmental progress of children may be carefully observed both prior to entry to school and later in their progress through school life. The attendance at these clinics is often disappointing.

Infant Welfare Centres being operated at the end of the year

were as follows:—		
Amity Grove Clinic	Monday	2-4 p.m.
West Wimbledon	Wednesday	2-4 p.m.
	Friday	10-12 a.m.
Cavendish Road Clinic	Monday	1.30-3.30 p.m.
Colliers Wood	Friday	9.30-11.30 a.m.
Church Road Clinic	Wednesday	1.30-3.30 p.m.
Mitcham	Thursday	1.30-3.30 p.m.
Churchill Hall Clinic*	Tuesday	2-4 p.m.
Effra Road, S.W.19		

Emmanuel Hall* Lingfield Road, S.W.19	Thursday	2-4 p.m.
Grand Drive Clinic Raynes Park	Monday	10-12 a.m. and 2-4 p.m.
and the state of t	Wednesday	
Meopham Road Clinic Mitcham		1.30-3.30 p.m.
Middleton Road Clinic Morden	Tuesday	10-12 a.m. and 2-4 p.m.
Holden	Thursday	2-4 p.m.
Morden Road Clinic	Tuesday	10-12 a.m.
Merton	Thursday	2-4 p.m.
Pelham Road Clinic	Tuesday	2-4 p.m.
Wimbledon	Friday	2-4 p.m.
St. Barnabas Hall*	Tuesday	1.30-3.30 p.m.
St. Barnabas Road, Mitcham	a deciding	2100 Died Pilli
St. John's Hall* High Path, Merton	Thursday	9.45-11.45 a.m.
St. Luke's Hall*	Friday	2-4 p.m.
Strathmore Road, S.W.19	2 2 2 2 2 2 2	Dental Services
Wide Way Clinic	Monday	1.30-3.30 p.m.
Mitcham		9.30-11.30 a.m.
T-111		W/ D1

Toddler sessions are held, by appointment, at Western Road School Clinic and at all of the above excepting Churchill Hall, Emmanuel Hall, St. John's Hall and St. Barnabas Hall.

ATTENDANCES AT INFANT WELFARE CENTRES

I I I	Total	12	T-1-1			
Name of Centre	No. of	bes 1	Born In	Total	Attendance	
	Sessions	1965	1964	1960– 63	Total 1960–65	including Firsts
Amity Grove	113	251	18	5	274	5,380
Cavendish Road	73	158	12	8	178	3,002
Church Road	79	193	58	106	357	3,370
Churchill Hall	38	103	9	66	178	2,760
Emmanuel Hall	39	92	5	52	149	1,692
Grand Drive	108	219	47	125	391	5,789
Meopham Road	39	56	20	29	105	1,443
Middleton Road	76	115	20	39	174	2,165
Morden Road	115	196	33	68	297	4,321
Pelham Road	77	239	47	56	342	4,716
St. Barnabas Hall	38	219	51	16	286	3,227
St. John's Hall	40	38	11	26	75	1,385
St. Luke's Hall	38	127	8	30	165	2,744
Wide Way	75	160	79	29	268	2,928
Totals	948	2,166	418	655	3,239	44,922

A total of 7,635 children attended during the year.

^{*} Denotes hired premises.

ATTENDANCES AT TODDLER'S CLINICS

	First At	ttendances	Born as bee		Marine Star	
Born In Total		Total	Total Attendances	Total Sessions (All Clinics)		
1965	1964	1960-63	1960-65	rittendances	(All Clinics)	
_	13	322	335	733	65	

DENTAL CARE

A satisfactory feature of the treatment of children under five years was the high proportion of fillings to extractions, 557—87.

Forty expectant and nursing mothers were examined during the year and 29 commenced treatment. This comparatively small number is due to the fact that most adults receive treatment under the General Dental Services.

	Examined	Commenced treatment	Completed course of treatment
Expectant and Nursing Mothers	40	29	33
Children under 5	325	181	169

	Scaling and gum	Fil- lings	Silver Ni- trate	Cr'ns and	Ex- trac-	Gen- eral Anae-	Dent	ures	X- Rays
	ment		treat- ment	Inlays	tions	sthe- tics	Full	Part	
Expectant and Nursing Mothers Children under 5	29 14	83 557	83	=	25 87	4 37	1	3 1	3

DAY NURSERIES

The Authority had, at the end of the year, two Day Nurseries in operation providing accommodation for 85 children under the age of five years.

Admissions are made under the following categories of priority:

First Priority—Where the mother is the sole wage earner.

Second Priority—Where there is sickness in the family, or where home conditions exist which are likely seriously to prejudice the health of the child.

Third Priority—In exceptional cases, where, upon consideration of individual circumstances, it appears to the Council that admission is necessary in the best interests of the child.

The following table shows the places available and the average daily attendance at each nursery:—

Nursery	No. of places 0–2 years	No. of places 2-5 years	Total number of places	Average daily attendance	
All Saints Day Nursery	. 12	34	46	44.8	
Middleton Road Day Nursery	. 9	30	39	35.4	

At the end of the year there were eleven private day nurseries registered under the Act, with a total of 250 places. In addition there were 7 daily minders on the register.

CARE OF UNMARRIED MOTHERS AND THEIR CHILDREN

Thirty-nine cases including one who paid all her own expenses, were admitted to various Homes during the year. Close co-operation is maintained between the various Homes and the Authority in order to secure the follow-up of the infants.

CONGENITAL MALFORMATIONS

The Authority continued to operate the system laid down by Surrey County Council by which congenital malformations are noted on the card notifying the birth.

The following malformations w	ere noti	ified du	ring th	ne year:-
Central nervous system				6
Eye, ear				4
				4
Heart and Great Vessels				2
Uro-genital system	1 0			3
Limbs			5	12
Other skeletal				ala labor
Other systems		***		4
Other malformations				3
			or nois	men nl 3
Total				39

WELFARE FOODS AND VITAMINS

National Dried Milk and vitamins were available at all Infant Welfare Centres with the exception of Pelham Road Clinic, and also at Russell Road Clinic and the W.V.S. Centres in Merton and Mitcham.

Sales for the year 1965 are shown below: -

National Dried Milk	 	22,660 tins
Cod Liver Oil	 	3,390 bottles
Vitamins 'A' and 'D'	 	3,895 packets
Orange Juice	 	58,837 bottles

PUBLIC HEALTH NURSING AND ALLIED SERVICES

HEALTH VISITING

STAFF

At the end of the year, the staff position was:-

1 Superintendent Health Visitor.

1 Deputy Superintendent Health Visitor. 28 Health Visitors/School Nurses.

4 Student Health Visitors.

The Authority has continued to operate a Student Health Visitor scheme and recruited four Student Health Visitors during the year, who it is hoped will qualify during 1966. Four Student Health Visitors recruited during 1964 by Surrey County Council, joined the Authority's staff as qualified Health Visitors during the year. Largely owing to their training policy, and that of Surrey County Council prior to 1st April, 1965, the Authority has had no serious staffing difficulties in this sphere.

HEALTH VISITOR'S DUTIES

The most important of the Health Visitor's duties is family visiting. Each Health Visitor has her own geographical area and, wherever possible, is based on a clinic within that area. She visits all the 'special' people in every family within her area; i.e., expectant mothers, new babies, children under five years, physically and/or mentally handicapped children and old people.

The importance of this part of her work cannot be too greatly stressed. Having access to the home, she is the one who can detect at an early stage any deviation from normal and can call in any special assistance that may be necessary. In the course of her visiting she is able to instruct mothers in Health Education and stress to them the continued necessity for immunisation and vaccination.

In addition to visiting, Health Visitors attend sessions at Clinics in the area which include:-

Ante-natal clinics. Relaxation and Mothercraft sessions. Audiology clinics. Vaccination and immunisation clinics. Infant welfare clinics. Toddler clinics. Parentcraft groups.

Health Visitors attend case conferences and co-ordinating conferences besides writing reports and keeping records and must maintain contact with colleagues in the allied fields of health work. Long stay immigrants on their arrival in this country are visited to acquaint them with the provisions of the National Health Service.

At the close of the year, arrangements were in hand to start a scheme of attachment of Health Visitors to general practitioners, under which they will be attached to certain group practices, rather than to specific areas.

There are in Merton at present, two additional aspects of health visiting which should be mentioned. The first is the large number of families moving into and out of the Borough. This is most probably due to a combination of high rents, mobility of labour and the fact that the Borough has housing property outside its boundaries. This often means a changing, and heavier, case load for Health Visitors.

The second problem is the increasing number of coloured families in the Borough, mainly in the North Mitcham, Colliers Wood and Wimbledon Park areas. These families occupy more than the usual amount of the Health Visitor's time owing to their different habits and customs, and language difficulties. It is very often found that the women are anxious to go out to work or to resume their studies quickly after a confinement, and great care is needed to ensure that their children are not unsatisfactorily minded, nor left alone, nor inadequately cared for.

SUMMARY OF WORK OF HEALTH VISITORS

The following table shows the number of cases in the various categories visited by the Health Visitors in 1965:—

Category. Children born in 1965 Children born in 1964 Children born in 1960/3	arter A		Number of cases visited. 3,164 3,211 8,329	
Total, 1960-1965			14,704	
Persons aged 65 and over Mentally disordered person			369 242	
Total	where		15,315	
Attendances at Clinics	and (Centre	?s—	
No. of attendances at Welfare Centre No. of attendances at Ante-natal an			clinic	2,109
sessions				339

HEALTH EDUCATION

This essential aspect of Public Health is being rapidly developed by means of teaching groups which the Health Visitors hold in schools, talks which are given to outside organisations, and Mothercraft and Parentcraft sessions which are held at the various Welfare Centres. Use is also made of leaflets, posters and displays.

A film on smoking and lung cancer was shown to Parentcraft Classes, and posters were displayed at the various clinics throughout the area.

There were no special lectures devoted to venereal diseases, but the topic is generally included in the health education programme, particularly relating to personal hygiene. The policy of displaying posters giving details of treatment centres has been continued.

MIDWIFERY

STAFF

At 31st December, 1965, the staff consisted of:—

1 Non-medical Supervisor of Midwives.

9 Full-time Midwives. 1 Part-time Midwife.

ORGANISATION

The day-to-day supervision of the Midwifery Service is carried out by a Non-medical Supervisor of Midwives, who is also appointed as Superintendent of the Home Nursing Service, although the services are operated separately.

For the most part, the arrangements under which three midwives covered the Wimbledon area, three covered the Merton and Morden area, and three covered the Mitcham area, were continued in operation. The three midwives in the Wimbledon area are housed at the Nurses' Home, Kings Road, Wimbledon, one in the Merton and Morden area is housed at the Nurses' Home, 'The Croft', Commonside East, Mitcham, and the remaining five are in their own homes.

Eight midwives have cars, in respect of which the Authority pays an essential user car allowance, and one midwife is supplied with a bicycle.

MATERNITY CASES ATTENDED

There were 452 domiciliary confinements reported and 2,486 institutional confinements during the year.

Midwives employed by the Authority attended 451 cases (four where no doctor was booked and 447 where a doctor was booked).

MEDICAL AID

Medical aid was summoned by midwives in 134 domiciliary cases including 126 cases where the medical practitioner had arranged to provide the patient with maternity medical services under the National Health Service Act. The Authority is liable for the payment of the practitioners' fees in the other eight cases.

ANALGESIA

All the Authority's midwives are qualified to administer analgesia (trilene, gas and air, and pethidine) in accordance with the rules of the Central Midwives Board.

During the year municipal midwives administered analgesics to mothers as follows:—

Gas and Air Trilene Pethidine 235

PUERPERAL PYREXIA

Fifteen cases of puerperal pyrexia were notified, 14 of which were hospital cases.

OPHTHALMIA NEONATORUM

One case of ophthalmia neonatorum was notified during the year.

MATERNITY OUTFITS

A free issue of maternity outfits is made in accordance with Ministry of Health instructions, namely, to those patients whose confinement will be conducted under the National Health Service arrangement. These are issued by midwives to their patients.

EARLY DISCHARGES FROM MATERNITY HOSPITALS

During 1965 351 patients were discharged from hospital before the tenth day of puerperium.

MIDWIFERY TRAINING

The Authority continued to operate the Part II (District) Training arrangements formerly operated by Surrey County Council in this area, under which not more than five pupils from Epsom Hospital, and one from Woking Maternity Hospital, were received on the district for their second-period training.

The pupil midwives are accommodated either at the Nurses' Home, Kings Road, Wimbledon, or in lodgings arranged with private householders. One midwife in the Mitcham area is able to provide accommodation in her own home for the pupil attached to her.

POST-GRADUATE COURSES

Three midwives attended Post-Graduate Courses during the year.

HOME NURSING

STAFF

At 31st December, 1965, the staff consisted of: -

- 1 Superintendent of Home Nursing Service.
- 32 Whole-time Home Nurses.
- 5 Part-time Home Nurses.

ORGANISATION

There is a group of Home Nurses for each of the three former districts sufficient to provide for demands on the service. In the Wimbledon area, calls for the service are made by general practitioners to the Nurses' Home, Kings Road, whilst calls for the Merton and Morden and Mitcham areas are made on the Health Department. It is intended to make arrangements at an early date for calls for the Wimbledon area to be made on the Health Department, to provide for completely central administration of the Borough service.

TRAINING

Two Home Nurses were seconded for District Training. Five Home Nurses attended a Refresher Course.

CASES ATTENDED

The table below gives details of the number of cases on the books at the beginning and end of the year, the cases added and disposed of during the period and the age groups into which they fall:—

Age group	Cases on books at 1.4.65		Cases removed	Cases on books at end of period	
0–5 years	. 1	28	26	3	
E 61	. 182	611	628	165	
CF 1	627	1,139	1,146	620	
Totals	810	1,778	1,800	788	

The total number of cases attended during the year was 2,588.

VISITS MADE

The following table shows the total number of visits made each month:—

January		 	8103
Februar		 100	8025
March		 	8064
April		 	8370
May		 	7972
June		 	7933
July		 	8086
August		 	7794
Septem	ber	 	7804
October	· Land	 	7938
Noveml	ber	 	8396
Decemb	per	 	8285
To	tal	 	96770

INCONTINENCE PADS

The Authority continued the practice of issuing incontinence pads at the request of the general practitioner or nurse in attendance.

Those patients who use these pads are provided with tarred paper containers for disposal of the soiled pads through the refuse collection service.

INCONTINENT LAUNDRY SERVICE

In conjunction with a neighbouring Authority, a collection and delivery service of draw sheets is arranged, twice weekly, to patients who have been recommended by a District Nurse.

DOMESTIC HELP SERVICE

STAFF

At 31st December, 1965, the staff consisted of:—
I Home Help Organiser.

- 1 Senior Assistant Home Help Organiser.
- 2 Assistant Home Help Organisers.
- 2 Clerks.
- 1 Full-time Home Help.
- 163 Part-time Home Helps.

ORGANISATION

During the year there was a decrease in the number of Home Helps employed owing to the general shortage of labour. Despite strenuous efforts throughout the year to find additional staff there were 15 fewer Home Helps in December, 1965, than in January, 1965.

Owing to this shortage it was not always possible to give as much help as might have been wished. The situation was somewhat eased by making fuller use of the Neighbourly Help Scheme whereby a small payment is made to near neighbours in return for assistance given to patients.

STATISTICS

The following table gives details of the numbers and types of cases attended and the hours worked by Home Helps during the year:—

Categories of Cases.

				Total cases dealt with during 1965	Total hours worked	Cases on books at 31st Dec., 1965
Chronic Sick and	Aged		 	971	161,334	819
Tuberculosis			 	13	1,551	9
Acute Illness			 	147	5,380	35
Maternity		***	 ****	118	6,687	4
Totals			 	1,249	174,952	867

As in previous years the demands of the aged category have absorbed the greatest proportion of the increased help available, the number of current cases in this category on 31st December, 1965, being 819.

DETAILS OF SOURCES OF APPLICATIONS IN 1965

General Practition	ers			441
Hospitals				241
Health Visitors				1
Home Nurses				1
Welfare Services				2
Blind Welfare			MP	1
Maternity Booking	gs			142
Others		***		6
				835

The Organiser and the three Assistant Organisers have paid 413 first visits and 3,668 re-visits to homes in connection with the service.

at the begin	Chronic Sick and Aged	T.B.	Acute	Maternity	Payments under Neighbourly Help Scheme £ s. d.	Total hours worked
January	15,775	160	449	528	31 5 0	16,912
February	12,962	141	467	654	20 10 0	14,224
March	13,120	100	596	418	19 0 0	14,234
April	13,017	95	473	704	19 0 0	14,289
May	16,560	147	563	877	23 15 0	18,147
June	12,149	125	578	326	19 0 0	13,178
July	14,341	144	469	488	23 15 0	15,442
August	10,655	110	366	439	27 7 6	11,570
September	11,094	74	362	590	26 10 0	12,120
October	15,602	153	331	799	32 0 0	16,885
November	13,215	148	364	267	24 10 0	13,994
December	12,844	154	361	596	32 0 0	13,955
Totals	161,334	1,551	5,379	6,686	298 12 6	174,950

CHIROPODY SERVICE

The Council's chiropody service caters for the elderly, the registered blind or partially sighted, the physically handicapped and nursing and expectant mothers. It comprises two separate schemes:—

- (a) The Direct Scheme whereby application is made to the Medical Officer of Health and authority is given, to those eligible, to have a fixed number of treatments carried out by any chiropodist on the Council's panel.
- (b) The Indirect Scheme whereby treatment is arranged by Voluntary Organisations. A number of old people are taken for treatment by members of these voluntary organisations whose work is greatly appreciated.

Under either scheme, treatment can be given in the patient's home if a doctor certifies that the patient is unable to travel.

The number of people receiving treatment under the service is increasing steadily and is likely to continue to do so. In the twelve months ended 31st December, 1965, 1,267 new applications for treatment were received.

The following table gives the statistical picture for the year:

Category	Persons treated in 1965	Number of treatments given	Number on books at 31.12.65
Elderly	2,187	12,989	2,094
Registered Blind or Partially Sighted	31	144	29
Physically Handicapped	58	381	56
Expectant Mothers	4	4	Nil
Totals	2,280	13,518	2,179

RIPPLE BED SERVICE

Ripple beds (air beds having a mechanically induced rhythmic undulation designed to prevent bed sores), are available on loan to patients of the Home Nursing Service at the request of a doctor or Home Nurse. The beds are hired from the suppliers and 65 such loans were made in the year.

SICK ROOM EQUIPMENT

There are three Medical Loan Depots, one each in Merton, Mitcham and Wimbledon. Loans of medical equipment are made to residents in the Borough on request from the family doctor or from a Home Nurse. Owing to the heavy demand loans are reviewed every three months.

The depots are staffed on a voluntary basis by members of the British Red Cross Society.

The following table shows the total loans made during the year: -

	Item			Total loans	Item		Total		
Air rings				113	Commodes				145
Bed rests				116	Cradles				63
Bed pans				162	Crutches				27
Bed tables				13	Feeding cup	3			18
Invalid cha	irs	***		138	Waterproof s	heets	***		63 27 18 151
Invalid cha	airs	(self-pro	pell-	722.00	Urinals				85
ing)			***	3					

RECUPERATIVE HOLIDAYS

Under Section 28 of the National Health Service Act 1946, the Authority is empowered to provide a recuperative holiday for persons needing it to complete or assist in their recovery to normal health, but who do not need organised medical or nursing care.

A recommendation from a medical practitioner is necessary. A number of Homes in Surrey and on the south-east coast are used, the holiday being usually for two weeks. Forty-five such holidays were arranged in the year.

FLUORIDATION OF THE PUBLIC WATER SUPPLIES

In accordance with Ministry of Health Circular 15/65 a recommendation was made to the Council that fluoridation of the public water supplies should be undertaken under Section 28 of the National Health Service Act, 1946. After giving consideration to this the Council passed the following resolution:—

'That the Council does not participate in any arrangements with the Water Undertakings concerned for the addition of fluoride to the public water supplies, but that the Medical Officer of Health in consultation with the Chief Education Officer, arrange for the supply and distribution of fluoride in tablet form to all children attending schools within the Borough

whose parents request such medication, and that the Finance Committee be requested to make the required financial provision.'

It was later ascertained from the Ministry of Health that the Minister's general approval under Section 28 of the National Health Service Act 1946, was limited to the fluoridation of water supplies and did not extend to the making available of fluoride tablets as part of a Local Health Authority's arrangements for the prevention of illness, care and after care. The Council, therefore, decided to take no action in connection with fluoridation of public water supplies.

MENTAL HEALTH SERVICES

ORGANISATION

On 1st April, 1965, responsibility for Local Health Authority Services under the Mental Health Act, 1959, previously operated by Surrey County Council, passed to this London Borough. The day-to-day organisation of these services is the concern of the Mental Health and Social Work Section of the Department. A Senior Medical Officer and a Senior Mental Welfare Officer have been appointed to this Section.

The arrangements under which persons may be admitted to hospital under the procedures laid down for compulsory admission under the Mental Health Act, are operated by Mental Welfare Officers acting as Statutory Officers under the Act. The Mental Welfare Officers also assist general practitioners in arranging informal admission of patients to Mental Hospitals. Where compulsory powers of admission are used, the decision whether to take action or not, in any particular case, is solely that of the Mental Welfare Officers concerned, who may thus be regarded, on occasions, as the trustees of the patient's liberty. The Department was doubly fortunate in being able to appoint as Senior Mental Welfare Officer a well qualified and experienced Social Worker, and also in retaining the services of two former Surrey Mental Welfare Officers who operated in this area prior to the re-organisation. They brought with them a wealth of experience, local knowledge, and goodwill. One of these two Officers became the Deputy Senior Mental Welfare Officer.

STAFF

At 31st December, 1965, the staff position was:-

1 Senior Medical Officer.

1 Senior Mental Welfare Officer.

1 Deputy Senior Mental Welfare Officer.

3 Mental Welfare Officers.

1 Mental Health Social Worker.

In addition, during the year, the Authority was fortunate in obtaining the services, in a part-time capacity, of Dr. R. K. Freudenberg, the Physician-Superintendent of Netherne Hospital as Consultant Psychiatrist to advise the Authority on aspects of the Mental Health Services.

MENTAL HEALTH ESTABLISHMENTS

The Authority operates a Junior Training Centre which provides 75 places (12 of which were temporarily in use as a Special Care Unit pending the building of the proposed Special Care Unit by the Mitcham Round Table), 32 places being taken by Merton children, and 43 by Sutton children. In addition 13 places are filled by Merton children at the Intermediate Centre (for children aged 13 to 16 years) in the London Borough of Sutton.

The Authority provides transport for the conveyance of Merton children to and from these Centres.

The Authority's provision for adult training of subnormal patients over the age of 16 years is by arrangement with Surrey County Council under which 36 places are available at Surrey's Adult Training Centre at Banstead.

In their Ten-Year Plan for the Development of the Health Services, the Authority have included the following:—

One 80 to 100-place Adult Training Centre.

One 15-place Hostel for adult subnormals.

One 15-place Hostel for female subnormals.

One 50-place Day Centre.

In addition, by the end of the year plans were nearing completion for the building of a 20-place Special Care Unit by the Mitcham Round Table in the grounds of the Junior Training Centre.

THE CASEWORK SERVICES

These Services are operated by both Mental Welfare Officers, and Mental Health Social Workers, with the general aim of the prevention, care and after-care of mental illness. Mental disorder, or mental illness generally ranges through personality disorders, psychopathic personalities, subnormality and severe subnormality, to the educationally subnormal school leaver with problems. Over this whole range, cases need casework support to enable them to live in the community. Prior to 1st April, 1965, these Casework Services were administered from County Hall, Kingston, and the major part of the casework was carried out by staff based at this administrative centre. Since the setting-up of this Borough, however, the work of Mental Welfare Officers and Mental Health Social Workers has been integrated so far as practicable.

A proportion of the supervision of the subnormal and severely subnormal is in the hands of the Health Visitors who pay routine visits to them and report directly to the Mental Health Section. There is a good liaison between Mental Welfare Officers and Health Visitors.

SUBNORMALITY

1. CASES IN COMMUNITY CARE

At the end of the year, 217 patients, as shown below, were in the community care of the Authority:—

	Under 16 years		16 years and over		Total		Grand
Category of patient	Male	Female	Male	Female	Male	Female	Total
Subnormal patients receiving routine home visits Severely subnormal patients receiving routine home visits	8	8 24	25 47	38	33 85	46	79 138
Totals	46	32	72	67	118	99	217
Patients included in above figures who are attending Junior or Adult Training Centres	30	18	24	13	54	31	85

2. JUNIOR TRAINING CENTRE

The numbers of children attending the Junior Training Centre were as follows:—

32 from the London Borough of Merton.

43 from the London Borough of Sutton.

Within the Junior Training Centre there is a Special Care Unit, temporarily housed there until the proposed purpose-built unit is completed, for the care of subnormal children with physical handicaps such as spasticity. Children attending this Special Care Unit, who are unable to travel in the coaches provided, are collected from their own homes.

Under the present arrangement for training, children attend the Junior Training Centre up to the age of 13 years, at which age they are transferred to the 'Intermediate' Training Centre operated by the London Borough of Sutton. It is hoped to rationalise this arrangement in the near future to ensure that all Merton children being cared for at the Junior Training Centre, as well as the 'overflow' of 13 to 16 years old at Sutton should attend this Authority's Junior Training Centre, thus giving a continuity of training at one Centre for Merton children up to the age of 16 years.

The table below gives details of the attendances at the Junior Training Centre during the year:—

to exercise from Health Visitors, her	Merton	Sutton	Total
No. of children attending at end of year No. of attendances made during year	32	43	75
	4,545	6,834	11,379

3. ADULT TRAINING CENTRE

The facilities for the training of subnormals over the age of 16 years are provided, by arrangement, with the Surrey County Council, at their Adult Training Centre at Banstead. At the end of the year 24 males, and 13 females were in attendance. There was also a waiting list for admission of three males and nine females, but in view of the pressure for admission of Surrey's own cases to this Centre, there was little hope of any further Merton cases being admitted.

To provide for the increasing numbers requiring adult training, and, as an interim measure, until the Authority are able to provide a purpose-built Adult Training Centre, negotiations were in progress at the end of the year, with the Physician-Superintendent of the Manor Hospital whereby facilities could be made available for Merton cases attending the Banstead Training Centre, and for those Merton cases on the waiting list, to attend a Day Centre at the Manor Hospital, Epsom. It was also realised that the facilities provided by Surrey County Council could be made available only so long as the arrangements did not prevent admission of their own cases to Banstead Adult Training Centre.

OTHER FORMS OF MENTAL DISORDER

1. CASES DEALT WITH BY MENTAL WELFARE OFFICERS

During the year, 365 cases were referred to Mental Welfare Officers for attention.

One hundred and eighty-six patients were admitted to Mental Hospitals through the Mental Health Service. Details of these ad-

missions are given below:-

Admitted informally		Males.	Females.	Total.
Admitted under Section 25 vation)		8	16	24
Admitted under Section (2	7	9
Admitted under Section 29 servation in case of emerg Admited under Section 60	ency)	35	60	95
Courts)		1	nder de e pe	1
Admitted under Section 1 conjunction with Police)	136 (in	4	6	10
Totals		68	118	186

These figures do not include a large number of informal admissions arranged directly by general practitioners, or admitted informally through Psychiatric Out-patient Clinics. The informal cases listed above are only those where the Department has rendered assistance, and are probably but a fraction of the total number of informal admissions from the Borough.

Mental Welfare Officers received ready co-operation from other Sections of the Department, particularly from Health Visitors, but also from Public Health Inspectors, the School Health Service, and the Home Help Service. There is also a close liaison, and frequent contact, with the Education, Welfare Services, and Children's Departments.

Especial thanks are due to the Metropolitan Police, who make possible an after-hours emergency service. Doctors requiring the duty Mental Welfare Officer out of office hours telephone the Police who refer them to the appropriate Mental Welfare Officer.

2. PATIENTS RECEIVING COMMUNITY CARE

Forty-nine male and 75 female patients were being provided with community care by the Authority, at the end of the year.

The supervision of mentally ill persons within the community is carried out by Mental Welfare Officers and Social Workers and covers a very wide range of activities. This may be to assist patients with their material problems, or in supporting them through bouts of depression, or periods of more serious illness where admission to hospital is being avoided. Some of these are chronic cases and could not survive in the community otherwise. It is in this sphere that the Mental Welfare Officer often has the care of elderly people and the chronically ill.

In all activities associated with community care a close liaison is maintained with the general practitioner and with hospital staff, wherever possible.

PATIENTS IN HOSPITAL

It is known from records maintained by the Mental Health Section, that 229 Merton patients are in long-term care in hospitals for the subnormal and severely subnormal.

Whilst, ideally, it would be comforting to think that it is possible for the Local Health Authority to be an effective link between the hospital and families, in many cases this is simply not possible, since the patients were admitted so long ago and have settled in their hospital environment, and their relatives have come to accept this position. However, in any case where one of the hospitals, or any of the parents or patients require any help, this Authority gives it through its Mental Welfare Officers.

It is important to bear in mind that, when the Authority is able to acquire its own hostel accommodation, a number of these patients who are suitable for hostel accommodation, will return to the community. The actual numbers involved will, however, represent only a small proportion of those in hospital, due to the tendency for long-term care in hospital to render a subnormal patient unsuitable for life in the community.

GUARDIANSHIP

There are no cases under guardianship in the Borough.

CASES BOARDED OUT

The Authority, at the end of the year, was making financial provision for the boarding-out of eight patients. A particularly close liaison is maintained with the two Cheshire Foundation Homes in the district, and in addition to giving supervision to the Merton cases in residence there, the Authority has undertaken supervision of patients from other Authorities accommodated there, when requested to do so.

SHORT-TERM CARE

During the year, the Authority provided periods of short-term care in eight cases.

SOCIAL WORK SECTION

The Authority continued the arrangements intitiated by the Surrey County Council whereby Social Work staff are attached to the Cumberland Hospital, Mitcham, to render assistance to the Chest Physicians with both in-patients and out-patients afflicted with chest diseases. This staff is housed in a suite of rooms adjacent to the Chest Clinic in the hospital building and rented by the Authority from the Hospital Management Committee. This staff is also increasingly concerned with case work on families at risk of break-up.

Cases are referred to the Social Workers by the Co-ordinating Committee for the Prevention of Break-up of Families, and by the Health Visitors. This Section is under the day-to-day control of a Senior Medical Officer.

At the end of the year, the Authority's staff in this Section comprised:—

1 Whole-time Social Worker.

2 Part-time Social Workers (equivalent to one whole-time Social Worker).

The whole-time Social Worker is qualified, and whilst the two part-time Social Workers have no approved social work qualifications, their previous training, it was felt, was of use in their present sphere.

Great difficulty was experienced in recruiting qualified Social Workers up to the establishment approved by the Authority, and to ease the case-load in this Section, when a qualified Medical Social Worker left the Authority's service, a qualified Social Worker from the Mental Health Section was temporarily seconded for duty at Cumberland Hospital.

The Medical Officer of Health is designated by the Authority as Chairman of the Co-ordinating Committee for the Prevention of the Break-up of Families. The Senior Medical Officer and the Social Workers in this Section, working closely with Health Visitors, maintain a close liaison with the Education, Children's, Welfare Services, and Housing Departments.

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

INTRODUCTION

This part of the Annual Report deals with the Environmental Health Service, and shows the efforts which have been made to maintain a service to the public, despite the upheaval caused by amalgamation. Initial difficulties were experienced in April, 1965, in channelling all the records into one basic administrative system and in applying the new system to the great variety of duties carried out by the Environmental Health Section. Staff changes and staff shortages were two factors which had to be, and are still having to be, overcome and although work was proceeding smoothly by the end of the year, some of the statistics given show that arrears of work are accruing.

Much of the work of the Environmental Health Section is unspectacular and anonymous in character, but the very nature of the duties involved bring the staff into close contact with the personal problems and difficulties of both occupiers and owners of houses and business premises. It is most necessary, therefore, that good public relations be maintained, but this is not possible if routine visits are few and far between, or if prompt attention is not given to requests for visits to be made, or if made, follow-up procedure is neglected.

It is the endeavour of the Public Health Inspectorate not only to maintain but to improve the environmental standards in the district and though the volume and quality of work during the year 1965 has been good, it is hoped that the staffing situation during the coming year will improve so that a more complete Environmental Health Service may be put into operation.

In reviewing the work of the Public Health Inspectorate during 1965 regard has been had to Ministry of Health Circular 1/66 dated 11th January, 1966. The statistics given are for a complete year (1965) and the figures for the first three months have been obtained from records of the Boroughs of Mitcham and Wimbledon and the Urban District of Merton and Morden.

SERVICES UNDER THE PUBLIC HEALTH ACTS

WATER SUPPLY

The Metropolitan Water Board and the Sutton District Water Company are responsible for the supply of water to the Borough and regular periodic examinations are made by these undertakings. Reports on examinations are also exchanged with adjoining Local Authorities who are supplied by the Sutton District Water Company.

The supply of water has been satisfactory in both quality and quantity.

With a few exceptions all the dwelling houses in the London Borough of Merton are supplied from public water mains direct to the houses but the actual number of such houses is not available. A number of industrial premises have an additional supply of water from their own deep wells. There are seven caravan yards within the Borough, each with a stand-pipe supplying mains water.

During the year 1965 samples of water were taken for bacteriological and chemical analysis as follows:—

T			7
Bacte	mole	onca	1-
and the pre	11 1010	8,00	

Swimming Baths			 	111
Paddling Pools			 	17
Dwelling houses: — Metropolitan Wa Sutton District V	ater Be		h	4 2
Well water			 	8 14
Other premises:				nivigos r
Sutton District V		Co.	 	2
				144
Unsatisfactory Result	s—			
Swimming Baths			 	18
Paddling Pools		•••	 	14
				32

Immediate action was taken in respect of the unsatisfactory swimming bath water and subsequent samples proved satisfactory. The treatment of water in a number of paddling pools in the Borough will be the subject of a special study during the 1966 season.

Chemical—

Swimming Baths Dwelling Houses:—	 6
Metropolitan Water Board supply	 2
Sutton District Water Co. supply	 1
Well water	 1
	- 4
Other premises:—	
Sutton District Water Co. supply	 1
	11

These samples of water proved satisfactory.

Fluoride Content

Information was obtained during 1965 that the fluoride content of the water supplies was as follows:—

Sutton District Water Co.—a trace: less than .2 parts per million (not added).

Metropolitan Water Board—.25 milligrammes per litre.

Plumbo-Solvent Action

One well water supply is known to be liable to have plumbosolvent action and the galvanised iron service pipe line to a dwelling house was replaced by Alkathene tubing in 1958. Subsequent samples have been free of metallic content.

SEWERAGE AND SEWAGE DISPOSAL

The previous Annual Reports of the three constituent Authorities indicate that the arrangements for sewerage and sewage disposal are

adequate. There is a number of cesspools in the Borough and arrangements to empty them at intervals are made by the respective owners.

REGISTERED COMMON LODGING HOUSES

There are no registered common lodging houses in the Borough.

DISTRICT INSPECTION

The following is a summary of the complaints received and the visits made during the year 1965:—

Complaints received-

General disrepair and	insanita	ry con	ditions		239	
2					139	
					24	
Overcrowding Defective drainage syst	tems				36	
Blocked drainage syst	ems				468	
Defective drainage fitt	ings				44	
Defective w.c. pans an			appara	tus	90	
Defective water service	pipes				17	
Absence of, or defect	ive dus	thins	era lon	1110 2	15	
Accumulation of refus			A HA I	1992	145	
Rats and mice				600	923	
Pigeons					31	
Insect pests					537	
Smoke nuisances					141	
Noise					115	
Smells and odours					132	
Unsound food					210	
Miscellaneous					150	
Miscellaneous			•••		150	
					3,456	
					3,430	
Visits made—					LD.	
General.						
P.H. Act (Nuisances)					1,314	
P.H. Act (Dwelling ho				1120	1,695	
					124	
Drain testing		1		22.	184	
Other drainage work					917	
Same annually trans		Manag	0.00	900		5,847
Housing.						,017
Dwelling houses (Hou	-		***		964	
			***	***	446	
P. No. measurements			***		28	
Rent Act 1957	***		***		56	
Underground rooms			***		7	
Houses in multiple oc	cupatio	n			477	
			00		40	
Caravans					60	
						2,078

Food and Food Prem	ises.					
Milk processing dairie	S	1.19	meds, coon	1188	113	
Milk vendors					138	
Ice-cream premises					233	
Food factories		C3.5 TJ			28	
Food vehicles),,,oo		Dimmi		383	
School kitchens	ni samuni	ALEKS I			138	
Restaurant kitchens					482	
Licensed premises					65	
Bakehouses			ROLLON		67	
D . 1	di.lo				253	
Wet and fried fish she		***			47	
Other food shops	opa				1,165	
Meat inspection			_		455	
Unsound food					383	
Sampling: Food and	Druge	girl by	n zigdəl	100.1	335	
Sampling: Milk	Drugs			100	190	
Sampling: Ice-cream			30	Hilly	176	
Sampling: water		valco	agitinen		211	
Food hygiene swabs		min	a specia		107	
1000 Hygiene swabs				P	107	4,969
Clean Air Act, 1956.					Detect.	7,709
					11 601	
Smoke control areas	inita			1	11,681	
Other Clean Air Act v	ISITS				505	
Smoke observations					335	
Air pollution recordin	ig appa	ratus		***	1,014	12 525
Factories Act, 1961.					135501	13,535
					251	
Factories (powered)	***			***	351	
Factories (non-power			8111000	227		
Factories (building sit	es)		*** 50		19	
Outworkers		***	***	0.552	102	
Workplaces				***	24	
Infactions Discours						527
Infectious Diseases.						
I.D. enquiries					403	
I.D. contacts					22	
Food poisoning					11	
Specimens			one in		98	
Disinfection					7	
					2001000	541
Offices, Shops and R	Railway	Prema	ises Act.	196	3.	
O.S.R. general inspec			mi		269	
O.S.R. general inspec			1007 598		552	
O.S.R. general inspect			/wareho		7	
O.S.R. general inspect	tion cat	oring	/ warenc	Jusc	21	
O.S.R. general inspect	ion con	teens			10	
O.S.R. all other visits	ion can		***	***	2,364	
O.S.R. all Other Visits				***	2,304	3 222
Insects, Pests, Rodent	S.				A	3,223
					12 702	
Rats and mice control						
Insect control					335	
Pigeon control			***		155	
Verminous premises		***			38	14000
						14,230

Animals.						
Stables					55	
Piggeries					37	
Slaughterhouse (hyg	iene)				56	200
10. 11						148
Miscellaneous.						
Hairdressers and bar	rbers				29	
Diseases of Animals	Act, 19	950			5	
Fertilisers and Feedi			1926		13	
Noise Abatement Ac					448	
Places of public en			2		4	
Schools					20	
Court proceedings					21	
Public conveniences					11	
Water courses					26	
Shops Act 1950				892	217	
Pet shops					27	
Miscellaneous					1,071	
		8				1,892
					-	46,990

RESULT OF SERVICE OF NOTICES

(1) Legal Proceedings.

Proceedings were instituted against the owners of a dwelling house for failing to comply with the requirements of Abatement Notices (Public Health Act, 1936: Section 93). The Notices were complied with after the summonses had been issued. Application was made to the Court for costs and a total of £15 15s. was granted.

(2) Nuisances abated and Defects remedied.

As the result of the service of verbal, written and Statutory Notices, 2,454 defects were remedied. 711 were in connection with the drainage of buildings; 948 in and around dwelling houses; 759 in connection with food premises and 36 were of a miscellaneous nature.

FACTORIES ACT, 1961—PART I.

(1) Inspection for Purposes of Provisions as to Health.

Deamises	Number	Number of				
Premises	Register	Inspec- tions	Written Notices	Prose- cutions		
Factories without mechanical power Factories with mechanical power Other premises under the Act (includ- ing works of building and engineer-	45 903	31 351	1 33	M.F.		
ing construction but not including outworkers' premises)	12	19	1	_		
Totals	960	401	35	0.32-		

(2) Defects found.

			Number of Defects					
Particulars		Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	Prosecutions		
Want of cl	eanliness (S.1)		4		DOL FOR		_	
Overcrowd	ling (S.2)		_	-	_	_	_	
Unreasona	ble temperature (S.3)		-	101-	-	_	_	
	e ventilation (S.4)		15	-	_	1	_	
Ineffective Sanitary C	drainage of floors (S.6) conveniences (S.7):—		-	-	bosoon,	m=0	-	
Insufficie			2	1	_	_	_	
Unsuitab	le or defective		23	19 5	-	-	_	
	rate for sexes		19	5	107-1	-	_	
	nces (excluding offences outwork)	re-	18	3	_100	de sel	_	
Tota	ls		81	28	_	1	_	

FACTORIES ACT, 1961—PART VIII

Outwork-Sections 133 and 134.

Nature of work	5	Section 133	Section 134			
Application was faculty and faculty and Sacuros with a standard with a faculty and saculty	No. of outworkers in August list required by Sec. 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failing to supply lists	No of instances of work in unwhole- some premises	Notices served	Prosecutions
Wearing apparelmaking Furniture and up-	54	二十寸5	19-18	ac e , zi	28-0	01:
holstery Lampshades	1 58	1	o =ods	es for Per		
Total	113	1	_	_	-	_

Number of addresses received from other Councils	110
Number of addresses forwarded to other Councils	69
Number of premises where outwork was carried on at	
the end of 1965	100
Underground bakehouses in use at the end of the year	1

SERVICES UNDER FOOD AND DRUGS ACT, 1955

Milk and Dairies (General) Regulations, 1959.

The number of Distributors of milk in the Borough as shown by the register kept in accordance with these Regulations, is 139.

There are four dairies handling milk in bottles or sealed churns, and two pasteurising establishments, one of which also processes milk by ultra high temperature treatment.

Milk (Special Designation) (Amendment) Regulations, 1965.

These Regulations came into operation on 1st October, 1965, to amend the Milk (Special Designation) Regulations, 1963.

Schedule 1 of the Regulations which refers to the special conditions subject to which licences to use the special designation 'Ultra Heat Treated' may be granted, were applied to a dairy processing this designated milk.

Milk (Special Designation) Regulations, 1963, as amended.

The following licences, which will remain in force until 31st December, 1970, have been issued under the Regulations:—

Dealers'	(Pasteuriser's) Lice	nces		 2
Dealers'	(Ultra Heat	Treate	ed) Lic	ence	 1
Dealers'	(Pre-packed	Milk)	Licenc	es:—	
Untr	eated milk			57	
Paste	eurised milk			121	
Steri	lised milk			101	
Ultra	Heat Treated	1 milk		9	

During the year 279 samples of designated milk were submitted for statutory tests. The results were as follows:—

Designation	n.	Satisfactory.		Unsatisfacto	ry.
Pasteurised		 243		_ 110	
Sterilised		 26		onto in the	
Untreated		 9	9	1	

The unsatisfactory sample of untreated milk, which was taken from a vending machine, failed the Methylene Blue test. A further sample taken from the same machine proved satisfactory.

Brucella Abortus.

No positive samples of milk were found.

Ice-Cream.

During the year 154 samples were submitted for bacteriological examination. The results were as follows:—

Grade 1	 	 	114
Grade 2	 	 	11
Grade 3	 	 	16
Grade 4	 	 	13

Grade 1 and 2 samples can be considered satisfactory; only 20% of the samples taken from any one vendor should be of Grade 3 quality, and none of Grade 4. Appropriate action was taken in the cases of unsatisfactory samples.

Meat and Other Foods.

There is one licensed slaughterhouse in the Borough, which is privately owned. This slaughterhouse, which has been in use for a number of years, is old and there are many inherent defects. The layout of the premises is poor and facilities for meat inspection are inadequate. Following action by the Town Planning Authority in

1961 a Compulsory Purchase Order was made, and in 1962 the Mitcham Borough Council made an offer to the occupier of a new site within the Borough. It is hoped that steps will be taken during 1966 to finalise arrangements whereby the use of the existing premises will cease. In the meantime slaughtering continues throughout the week (except on Saturday) and from 6 a.m. to noon on Sundays. A 100% meat inspection service has been maintained throughout 1965.

During the year, thirteen slaughtermen's licences were issued under the provisions of the Slaughter of Animals Act, 1958, two being licences to slaughter only under supervision.

Meat Inspection.

Carcasses inspected and condemned	Cattle	Calves	Sheep & lambs	Pigs
Number killed	248	116	405	19,273
Diseases except Tuberculosis and Cysticerci Whole carcasses condemned Carcasses of which some part or organ was con-	2	Nil	1	32
demned	37	Nil	9	2,994
Tuberculosis only Whole carcasses condemned Carcasses of which some part or organ was con-	Nil	Nil	Nil	Nil
demned	Nil	Nil	Nil	396
Cysticerci Carcasses of which some part or organ was condemned Carcasses submitted to refrigeration Generalised and totally condemned	6 6 Nil	Nil Nil Nil	Nil Nil Nil	Nil Nil Nil

The total weight of meat condemned as unfit for human consumption was 7 tons 16 cwts, 80 lbs.

Four hundred and fifty-five visits were made to the slaughterhouse for the purpose of meat inspection during the year.

Food Premises.

The inspection of food premises has formed an important part of the work of the Public Health Inspectors during the past year. 4,375 visits were made to premises in which foodstuffs, intended for human consumption, were prepared, stored or sold. All food premises must comply with the Food Hygiene (General) Regulations, 1960, and a considerable amount of work has been done under the Regulations during the year. In general, it has been found that food traders within the Borough are co-operative and I have reason to believe that the assistance and advice given by the Department is appreciated.

The provisional register of food premises includes the following:

Greengroce	rs					157
Confectione						273
Ice-Cream	premises					496
Bakers						48
Grocers and	Grocers and Provision		Dealers			295
Butchers	dni ssenm :					104
		Car	ried for	ward		1373

	Broug	ght for	ward		1373
Fishmongers/Fish	Fryers	11000			60
Milk distributors					139
Chemists	puls odi m				51
Licensed premises	s				84
Clubs					79
Restaurants and	Cafes				168
Works canteens					55
School canteens a	nd kitchen	IS			100
Food stalls/vehicl	les	***			33
Places of public		ent			73
				nilk/e	2,215

The information required by Circular 1/66 in connection with the provision of ablution facilities, sinks and hot and cold water supplies is not available at this time.

The number of food premises registered in accordance with Section 16 of the Act is as follows:—

Registered for the storage and sale of ice-cream		464
Registered for the manufacture and sale of ice-crear	n	6
Registered for the preparation or manufacture	of	
sausages		70
Registered for the preparation or manufacture		
potted, pressed, pickled or preserved food		150

The number of inspections of registered food premises during 1965 was 784.

Bacteriological Examination of Equipment.

During the year 312 swabbings of articles used in food premises and catering establishments, were submitted to the Public Health Laboratory for bacteriological examination.

The results were as shown:-

			No.	s	Result.				
	Article.			taken.	Sat	isfactor	ry. U	nsatisfact	ory.
Beer mugs and glasses Wine and spirit glasses			39		35		4		
			9		7		2		
Plates			***	59		52		7	
Cups and be	eakers			77		65		12	
Saucers				4		4		10-4	
Knives				37		33		4	
Forks				43		42		1	
Spoons				38		36		2	
Dishes				1		1		-	
Scoops and l	adles			2		2		_	
Draining bo				1		0-		1	
Food slicing		nes		2		2		1	

In addition 17 samples of ice-cream server water were submitted for bacteriological examination, eight of which were unsatisfactory.

Special visits were made to premises from which unsatisfactory reports were received, and the occupiers were advised upon principles of hygiene to effect an improvement.

Food Inspection.

Unsound food surrendered to the Health Department is destroyed at the Council's refuse disposal works.

Excluding meat condemned at the slaughterhouse, the following

is a list of unsound food surrendered during 1965:-

			Cwts.	Qrs.	Lbs.
Canned meat			41	3	9
Canned soup			6	1	4
Canned fish			2	- 010	16
Canned vegetables			9	2	21
Canned fruit			25	None P	14
Canned puddings			_	_	14
Canned milk/cream			5	_	24
Miscellaneous cans			24	3	20
Meat, bacon, poultry			18	1	9
Meat pies, sausages			The state of the s	O DOING	14
Meat and fish paste		100		2	5
Fish			2	2	10
Fruit and vegetables			10/40	3	19
Fruit and vegetable ju			2	_	12
Flour, bread, cereals			1	2	20
Spaghetti			toning and a	The state of	27
Pie fillings			019_10 10	2	18
Sugar, jam, syrup			_	1	9
Salt, pickles, salad c			1 1	2	18
Frozen food	LUMIN		22	1	23
Beverages			4	2	7
Develages	***		171 cwts.	2 qrs.	5 lbs.

The number of complaints received during the year regarding unsound food was 210. These included references to extraneous matter in food and a detailed investigation was made in each case. Informal action was taken in the majority of cases.

The complaints of extraneous matter in food included the

following: -

Foreign bodies found in loaves of bread—matchsticks (2); carbon and grease (7); nail; poppy seeds; fly; mould in wrapped bread; mould on loaf; metal; pellet of dirt; dried fruit skin; wheat bran.

Fruit fly larvae in bottle of milk.

Solidified polyester resin in bottle of milk.

Bird dropping in bottle of milk.

Maggot in bottle of milk.

Mould in can of stewed steak.

Mould in can of corned beef.

Mould in pork pie (3).

Insect in can of pears.

Wasp in can of apricots.

Beetle in can of strawberries.

Fly in can of oranges.

Glass rod in jar of marmalade.

Slug in packet of frozen peas.

Smoked cigarette in potato crisps.

Caterpillar in can of broad beans.

Jute fibre in Dundee cake.

Jute fibre in marshmallow pastry.

Mould in currant bun.
Pellets of dirt in cream meringues.
Tobacco in cream slice.
Stone in scone.
Ants in sugar.
Mould in jar of clotted cream.
Mould in can of milk pudding.
Maggots in gammon bacon joint.
Calcium and sodium salts in cooking salt.
Algae in bottle of lemonade.
Wire in lamb chop.

Sampling of Food and Drugs.

The following samples were submitted to the Public Analyst for chemical examination during 1965, with the results shown:—

								Non-genuine or irregular.
					1	aj.	e.	nu sala
Article	s.			Ti.	Formal	Informa	Genuine.	-ge-
				Total	OLL	oju	en	on
				H	I	H	0	Z 6
Antussin cough trea	tment			- 1	- 1	mbl	1	Cruinb
Apples—liquid				1	î	unibi	1	Ound)
toffee				1	1		1	Drugs.
Bakewell tart mix				1	_	1	1	Cumma
Bananas				1	1	lob	1	
Beef—corned loaf				1	1	_	1	Dairy
curry with r				1	1	_	1	Degran
minced				1	1	2000	1	_
potted with	butter			1	1	Manager 1	1	7100000
salt				1	1	Transit Tr	1	-sinia(I
Beefburgers—frozer	1			1	1	_000	1	_
Beetroot in vinegar				1	1	O arm (1)	1	_
Bisto				1	1	-20	1	_
Blancmange powder	-choc	olate		1	1		1	_
Brandy				2	2	_	2	
Bread-milk loaf				1	1	-	1	
and butter				1	1	_	1	D.ORT
Butter				7	7	-	7	-IIIOPI
rum flavoure	ed			2	1	1	2	_
Butter beans				2	1	1	2	_
Cal-Fresh—drink			77.0	1	1	_	1	Dilling.
Cannelloni				1	1		1	Tallar I
Celab				1	1	OR THE	1	- 311301
Celery salt				1	1	_	1	2010
Cereal—breakfast				1	1	-	1	_
high protei	n			1	1	_	1	_
mixed, with	fruit a	nd nu	ts	1	1		1	_
Cheese—Cheddar			200	1	1	-	1	
spread				1	1	-	1	_
Cherries—cocktail		***	7	1	1	-	1	-
Cherryade—drink			***	1	1	-	1	_
Chicken in jelly—n	ninced			1	1	-	1	_
Chocolate—drinking		***	***	2	2	-	2	-
Chow-Chow—Swee	t Prairi	e		1	1	-	1	_

Articles.			Total.	Formal.	Informal.	Genuine.	Non-genuine or irregular.
Cochineal food colour			1	1	m	1	_
Cockles—cooked		00	1	1		1	_
Cocktail—damson cream			1	1		1	_
wine			1	1		1	_
Coconut—desiccated			2	2	_	2	- 0
Codeine phosphate, syrup	of		1		1	1	dame
Codis tablets			1	1		1	_
Coffee-and chicory essen	nce	W 200	1	1	_	1	olumbia.
instant			2	1	1	2	_
with creme and s			1	1	_	_	1
white with sugar			1	1	_	1	_
Conserve—raspberry			1	1	_	1	_
Cordial—ginger			1	1	_	î	_
lime	-	***	2	2	_	2	_
Crispbread—starch reduce	ed		2	2	1	2	
Crumbs—golden			2	2	_	2	1
Crush—sparkling orange			1	1		1	
Crystals—lemon foam			1	1		1	
Commonto			1	1		1	The state of the s
Custard powder			2			2	
Dairy topping			1	2		2	1
5			2	2		2	1
Chocolate			1	1		1	
			1	1		1	_
Dessert—pineapple Drink—bitter lemon			1	1	-	1	_
Drink—bitter femon		***	1	1	-	1	_
glucose			1	1	-	1	U
lemon—low calor	ie		2	1	-	1	-
orange			1	1		2	
sparkling lemon			7	1	_	1	_
Dripping			3	3	_	3	-
Dubonnet Fish cakes			1	1	-	1	-
			2	1	1	2	_
			1	-	1	_	1
confectionery			10	8	2	9	1
self-raising Frankfurters			2	2	_	2	-
Frankfurters Fritter mix—tomato		***	1	1	-	1	-
		***		1	-	1	-
Garlic—instant powder		***	1 3	-	1	1	-
				3	-	3	-
			1	1	-	1	-
crystallised				1	-	1	_
non-alcoholic			1	1	-	1	-
			3	2	1	3	-
Glycerine and thymol pass	tilles		1		1	1	-
Gravy browning			1	1	_	1	_
Groats			1	1	_	1	-
Ham			1	1	_	1	-
Hamburgers with gravy			1	1	_	1	-
Health salts	***		1	1	10	1	-

Article	S.			Total.	Formal.	Informal.	Genuine.	Non-genuine or irregular.
Honey				1	1	_	1	000
Horse radish				- 1	1	_	1	Ounder
Ice-cream				4	3	1	4	0 == 0
—cherry	pie			- 1	Print.	1	1	Pindo
chocolate		ival		î	_	100	1	Property
dairy				1	1		1	_
lemon n		tan		1	read b	1	î	
maple v	ralnut	tan		1		1	1	
				1	est part	1	1	1
peach m	erba			1		1	1	1
powder		1-		1	_	1	1	_
raspberr	y ripp	ole	***	1	_	1	1	_
Instant Whip-butt	erscot	ch		1	1	_	1	_
Jam—strawberry				1	_	1	1	-
Jelly—greengage				1	1	-	1	_
lemon	***			1	1	3440	1	_
table			***	1	1	_	1	_
with fruit				1	1	Total -	1	1
Juice—lemon				1	1	Con it	1	Petron
tomato				1	1	Liber	î	Penes
TZ -1				1	1	100	1	Pegnan
				2	2	Distance	2	
Ketchup—tomato	mad.			1	4	1	1	
Kipper fillets—bute	rea		***	1		1	1	Person
Lard				1	1	-	1	Parente
Lemon curd				1	-	1	1	_
Lentils		***		1	1	-	1	-
Liquid paraffin—B.	P.	***	***	1	1	-	1	-
Macaroni				1	1	-	1	-
—cheese				1	1	_	1	The state of
				2	2	_	2	_
Marmalade—orange				1	-	1	1	_
lime				1	1		1	-
Marzipan				1	1	120	1	_
Mayonnaise—lemon		1		1		1	1	-outso
Meat patties				2	2	_	2	_
Menthol and Eucaly		RPC		1	ĩ	receiver.	1	Peddin
Milk	peus .	D.I .C.		49	48	1	48	1
—condensed				2	40	2	2	1
	, ,			1	1	2	2	-anni
drink 'Benge	ers			1	1	-	1	
hot				1	1	_	_	1
powder				1	1	-	_	1
skimmed—ir	istant	dried	***	2	2	-	2	_
Mincemeat				1	1	0	1	_
Mint				2	2	_	2	-
-sauce				1		_	1	10017
Nuts				3	2	1	2	1
Oil—cooking				2		1	2	0.00
corn maize				2	2	_	2	
ground nut				2	2	amed-	2	Twhen?
olive				1	1	niz b	1	- 100

Articles.			Total.	Formal.	Informal.	Genuine.	Non-genuine or irregular.
Opas			1	1		1	-1
Ovaltine			1	1	_	1	_
Oxo cubes			2	2	_	2	_
Parsley-dried, rubbed			1	1	_	1	_
Paste—anchovy			1	_	1	1	_
chicken			1	_	1	1	_
chicken and ham			2	1	1	2	-
crab			1	_	1	1	
crab and tomato			1	1	_	1	
ham and beef			1	_	1	1	
ham and tomato			1	_	1	1	_
ham and tongue			1	_	1	1	
lobster			1	_	î	1	
pilchard and tomate			1		î	1	<u>ullo</u> j
salmon and anchovy			1		î	1	_
sardine and tomato			1		î	î	_
Pastry mix—short			1	1	_	1	
Patum paparium			1	_	1	1	anin'i
Patum peperium Pears—strained			1	1	1	1	
			1	1		1	wale N
Peas—frozen, garden			1	1	-	1	The same of
processed			1	1		1	
yellow —split			1	1		1	The state of
Pease pudding			1	1		1	
Pectin—liquid fruit			1	1	_	1	Time 1
Pepper—white			1	1		1	No.
Pepsi-Cola			1	1		1	
Pie—apricot	***		1	1		1	_
Pilchards	***		1	1	1	1	anne M
Pork—brawn			1	1	1	1	
chopped			1	1	_	2	_
luncheon meat			1	2	_	1	
roll-stuffed			1	1	_	1	1000000
Potato—chips, ready to eat			1	1	-	1	-
crisps			1	1		1	
Pudding—Christmas			1	1	-	1	-dDM
ginger sponge			1	1		1	_
milk—macaroni			1	1		1	_
Puree—condensed, tomato			1	1		1	_
Raisins			1	1	-	1	
Relish—corn		***	1	1		1	
Yorkshire	***		1	1	_	1	
Rennet—essence of			1	1		1	anil.
Rice	***		1 4	1	_	4	_
Rum			2	4 2	_	4	-
				2	1	1	50
Salmon—pink			1	1	1	1	_
			1	1	_	1	_
Sandwiches—buttered salm			1	1	_	1	_
Sarmi-stuffed vine leaf di	sn		1	1	_	1	_

Article	es.			Total.	Formal.	Informal.	Genuine.	Non-genuine or irregular.
Cause show				,	,			
Sauce—chop				1	1	_	1	-
mustard				1	_	1	1	»InnA
tartar	***			1	1	_	1	Brend
Sausages—beef				9	9	_	8	1
calf liver				1	1	_	1	_
cocktail				1	1	_	1	-
pork				15	15	_	14	1
pork chip	oolatas			1	1	_	1	ms71.7
rolls				2	2	_	2	HUPL
Seven-Up-drink				1	1	32 10	2	Lenton
Shrimps				1		1	1	de la la
Smatana—creamed				1		1	1	man
				1	-	1		Milk
Soft drink	***			1	1	_	1	Sardin
Soup—cream of ton	nato			1	1	-	1	_
Swiss celery				1	1	_	1	_
Spam				1	1	_	1	_
Squash—lemon				1	1	-	1	-
orange				5	4	1	5	nit to the same
Steak-casserole, st	ewed			1	1	_	1	_
and kidney			. 1100	1	0010	1	1	0
and kidney	nie	-777		1	î	-	î	_
and kidney		nor		1		1	1	
minced	puddii	B	***	1	1	1	1	
Stew—Irish				1	1	-	1	_
	***			3	1	2	3	-
Strawberries in heav Stuffing—parsley ar	y syrup nd thyn	ne		2	2		2	1
sage and				1	1	_	1	_
Suet				1	1	_	1	_
Sugar—brown				1	1		1	_
confectioner	v			35	33	2	35	_
Syrup—ice lolly	,			1	1	_	1	
maple	***	***		1	1		2011	_
milk shake				1	1		1	_
			***	2	2	.380	2	0
morello che	rry			1	1		1	_
orange flavo	our			1	1	-	1	_
raspberry				1	1	-	1	_
rose hip				1	1	-	1	-
Tea				3	3	-	3	_
Throaties			180	1	1		1	_
Tizer				1	1		1	_
Tongue and turkey	roll			1	_	1		1
Vinegar—malt		750000	100.00	5	4	1	4	1
Vital restorers				1	1	1	1	1
Vitar restorers Vitamin health drin	ale.		***	1	1		1	_
	TK		***	1		TO	1	_
Whisky		***		0	6	-	6	-
Yeast—vitamin				1	-	1	1	-
Yogurt—low fat				1	1	-	1	-
Zing—drink	*** ***	****	***	1	1	1	1	_
	Totals			409	352	57	394	15

The following samples were submitted for special examination:

A C X B	rticles.		Total.	Formal.	Informal.	Genuine.	Non-genuine or irregular.
Apple wine		 	1	_	1	1	_
Bread loaves	-	 	3	_	3		3
Bread roll		 	1	131	1	1	_
Canned rhubar	b	 	2	_	2	2	
Cooking salt		 	1	_	1	_	1
Cream slice	nd held	 	î	_	1	_	î
Fruit scone		 	1	or other	1	_	1
Lemonade	Conuth.	 	î	_	1		Î.
	pastry	 	1	_	1		1
Meringues	paotaj	 	1	10.11	1	1	1
Milk		 	1	_	1	_	1
Sardines		 	1	_	1	1	1300
	Totals		15	_ 7	15	5	10
	T OFFITS	 	**			-	170

It will be seen that adverse reports were received upon 25 samples and following is a brief account of the action taken in respect thereof:

Coffee with Creme and Sugar.

Purchased from vending machine.

Description misleading purchaser to expect coffee with cream.

No evidence of cream added.

Machine re-labelled 'Coffee White' after correspondence.

Dairy Topping.

Sample of sterilised and homogenised top of the milk containing 18.5% butterfat.

Description generic—not specific. Correspondence with producer.

New label to meet requirements of Labelling of Food Order, 1953.

Cake Flour.

Not being wholemeal and wheat malt flour must contain added chalk (The Bread and Flour Regulations, 1963).

Imported from America.

Stocks withdrawn from shops within Borough.

Ministry of Health informed of breach of Regulations in flour imported from America.

Cream Slices.

Imitation cream.

No notice displayed at time of purchase.

Omission rectified.

Peach Melba Ice Cream.

Sample of imitation peach melba made with ice-cream and fruit ice flavoured with peach puree.

Carton changed to Peach Delight.

Milk.

Sample contained 1.40% milk fat as against the 3% requirement of the Sale of Milk Regulations, 1939.

Deficiency 53%.

Vendor prosecuted. Pleaded guilty. Fined £15. Costs £5 5s.

Hot Milk.

5% deficiency in milk solids. 8.04% against 8.5%.

Investigations at vendor's premises and bottling plant showed no reason for deficiency.

Babies' Milk Powder.

Labelled 'The nearest approach to Mother's Milk'.

Vegetable fat or oil-not milk fat.

Misleading. Correspondence with manufacturers to amend label.

Nuts.

Common or usual name of the article and the ingredients not included on label. (Labelling of Food Order, 1953.)

Packed by importers. Verbal warning.

Beef Sausages.

Contained preservative. No notice displayed. Letter to butcher.

Pork Sausages.

Contained preservative. No notice displayed. Letter to butcher.

Creamed Smatana.

Cultured milk enriched with milk fat. Ingredients not specified on label. Informal action taken to amend label.

Strawberries in Heavy Syrup.

Imported from Holland. Syrup density below normal. Ministry of Agriculture, Fisheries and Food informed.

Tongue and Turkey Roll.

Contravention of Labelling of Food Order, 1953.

Two ingredients specified on label generic and another ingredient not adequately described.

Label amended.

Malt Vinegar.

Sample of non-brewed condiment sold as vinegar. Written warning sent to vendor.

Bread.

Sliced white loaf.

Black pellet of foreign matter consisting of cotton fibres, wheat flour and miscellaneous dirt baked in the bread. Informal action taken.

Bread.

White loaf containing poppy seeds baked in the bread (was alleged to be contaminated with mouse excreta).

Informal action taken.

Bread.

Sliced white loaf containing small pieces of brown foreign matter found to consist of a mixture of wheat bran and wheat flour.

Informal action taken.

Cooking Salt.

Dark grey foreign matter in two layers in a block of salt found to consist of a compacted mass of calcium and sodium salts. Not an uncommon contaminant of lump salt.

Manufacturers advised.

Cream Slice.

Foreign matter embedded in the jam layer consisted of shreds of tobacco baked in the slice.

Warning letter to bakers.

Fruit Scone.

Dried fruit tissue mixed with wheat flour formed a hard pellet. Informal action taken.

Lemonade.

Opened bottle containing foreign particles and coloured deposit found to be algae.

Informal action taken.

Marshmallow Pastry.

Alleged insect found to consist of jute fibres twisted together, partly covered with marshmallow.

Informal action taken.

Meringues.

Pellets of black foreign matter present in the meringue mixture, found to consist of flour and egg white rubbed up with dirt to produce black pellets. They were baked in the meringues.

Warning letter to bakers.

Milk.

Amorphous foreign matter having characteristics of a bird dropping.

Informal action taken.

Other Legal Proceedings.

Milk and Dairies (General) Regulations, 1959-Article 27.

Two cases of dirty one pint milk bottles being used for delivery of milk.

Defendants pleaded guilty. Fined £10 each case. Costs £3 3s.

Food Hygiene (General) Regulations, 1960—Regulation 9. Smoking in food room in which there was open food.

Defendants pleaded guilty. Fined £10. Costs £5 5s.

Food Hygiene (General) Regulations, 1960.

Condition of premises and other matters.

Fined £25. Costs £5 5s.

Public Health Act, 1936—Section 107.

Appeal against consent of Local Authority for the establishment of an offensive trade (fat rendering) for a period of two years.

Appeal upheld.

Period extended to three years. Application for costs refused.

SERVICES UNDER OTHER ENACTMENTS

Rent Act, 1957-Certificates of Disrepair.

The following is a summary of applications dealt with during 1965:—

Applications received (Form I)			9
Decisions not to issue certificates			Nil
Certificates issued (Form L)			4
Undertakings given by landlords (Form K)			5
Applications by landlords for cancellations	(Form	M)	3
Objections by tenants to cancellation			Nil
Certificates of Disrepair cancelled			3
Number of visits made during 1965 in conne	ection w	vith	
the Rent Act, 1957, were			56

Shops Acts, 1950-65.

Prior to amalgamation the Public Health Inspectors of the three constituent Authorities carried out all the duties under this legislation. On 1st April, 1965, it was intended that the Town Clerk would administer those Sections of the Shops Act, 1950, relating to hours of closing, Sunday trading, etc. In May, 1965, however, these functions were transferred to the Public Health Inspectors.

The Shops (Early Closing Days) Act, 1965, which came into force during the year, clarified the position created by previous Closing Orders which had been made by the three constituent Authorities.

Shops in the Borough have been kept under observation and contraventions have been remedied. Action has also been taken in respect of general closing hours, half-day closing and Sunday trading. The total number of inspections made during 1965 was 217.

Offices, Shops and Railway Premises Act, 1963.

Work under this legislation was continued during 1965 and specialist technical staff was appointed on 1st April, 1965, for this purpose. In general, the co-operation of employers in meeting the requirements of Informal Notices served has been most encouraging and no serious objection has been raised as to the manner in which the enforcement of the Act has been carried out.

Registrations and General Inspections.

Class of Premises	Number of Premises Registered During Year	Number of Registered Premises at end of Year	Number of Registered Premises Receiving : General Inspection During the Year	
Offices	538	525	269	
Retail Shops	1,118	1,104	552	
Wholesale Shops, Warehouses	28	28	7	
Catering Establishments open to the Public, Canteens	128	128	31	
Fuel Storage Depots	4	4	ben bering save	
Totals	1,816	1,789	859	

Contraventions rectified.

Cleanliness					130
Overcrowding					6
Temperature	Iggs w				259
Ventilation					26
Lighting		mu.il			26
Sanitary convenien	ces	11	01	J	153
Washing facilities					118
Supply of drinking	water		1		2
Clothing accommod					5
Sitting facilities	noine Haven				2
Eating facilities					4
Floors, passages, s	tairs				26
Dangerous machine		d	720		3
First aid provisions					298
Abstract of Act po					176
Not registered		7			39
Other contravention	ns				46
Other Communication	10-100 100				
1201 mA					1,319

Exemption.

One exemption (Section 46), for a period of two years was granted from the requirement to provide a sanitary convenience in respect of a Coal Order Office.

Accidents Reported and Investigated.

In Offices						5
In Retail Sh	ops					16
In Wholesale		Wareho	uses			5
In Catering	Establish	ments (open to	public;	in	
Canteens,	etc.		mar's w	with h		9
						35

The total number of visits of all kinds made by Inspectors during the year was 3,223.

Petroleum (Regulations) Acts, 1928 and 1936.

The Chief Public Health Inspectors of the three constituent Authorities were designated 'Petroleum Officers' and carried out duties in connection with petroleum installations. On 1st April, 1965, by virtue of Section 50 of the London Government Act, 1963, the Greater London Council became the Petroleum Authority and all the records were accordingly transferred.

Prevention of Damage by Pests Act, 1949.

The table below summarises surface rodent control work which was carried out during 1965.

The inspection and treatment of sewers was undertaken in collaboration with the Borough Surveyor's Department. 10% of the total manholes in the whole sewer system were test baited, and maintenance treatment was carried out on these, and other manholes known to be infested, three times during the year. During 1965, 356 manholes were baited and only 32 showed evidence of rodent infestation.

The Department continued to deal with rodent treatment and disinfestation work in Council-owned property within the Borough.

Type of Property		per of Prop spected as result of		Prop	ber of erties to be ed by	Number of treatments carried out	Number of inspections made including reinspec- tions
	Notifi- cation	Survey under Act	Total	Rats	Mice	retreat- ments	
Local Authority Dwellings All other	35 809	46 3,620	81 4,429	42 593	11 248	57 840	296 9,342
including Business Premises	186	545	731	82	70	155	4,064
Totals	1,030	4,211	5,241	717	329	1,052	13,702

Other Pest Control Work.

During the year 1965, 537 complaints were received concerning insect pests and the following is a list of the infestations dealt with:—

Ants	 	 36
Beetles	 	 23
Bed Bugs	 	 14
Caterpillars	 	 1
Crickets	 	 1
Cockroaches	 	 1
Earwigs	 	 3
Fleas	 	 11
Flies	 	 13
Gnats	 	 2
Lice	 	 1
Mosquitoes	 	 14
Maggots	 	 5
Silverfish	 	 5 7
Spiders	 	 2
Woodworm	 	 7
Wasps	 	 396

The incidence of wasps was again generalised during 1965, and it is considered that the service provided by the Department in the destruction of wasps nests plays a great part in the Council's Food Hygiene Policy.

Ponds, ditches, open spaces and other mosquito breeding grounds were sprayed with insecticide during the year, with satisfactory results.

Thirty-one complaints of nuisance or damage caused by feral pigeons were received. Pigeon traps were placed at suitable sites within the Borough, giving effect to a reduction in the number of pigeons.

It is to be hoped that more concerted action by London Borough Authorities in respect of feral pigeons may be organised during the coming year.

Pet Animals Act, 1951.

Twelve licences to keep pet shops were issued during 1965. Twenty-seven visits were made to these premises and any infringements of the conditions of licence were rectified.

Animal Boarding Establishments Act, 1963.

There is one licensed animal boarding establishment in the Borough.

The Riding Establishments Act, 1964.

This Act came into operation on 1st April, 1965, and provides that no person shall keep a riding establishment except under the authority of a licence granted in accordance with the provisions of the Act.

Four applications for licences were received, three of which were granted. The fourth application was not granted, the refusal being based on the report of the Council's Veterinary Officer.

Diseases of Animals Act, 1950.

No outbreaks of disease occurred within the Borough during 1965. Copies of Orders made by the Ministry of Agriculture, Fisheries and Food in respect of outbreaks elsewhere of foot and mouth disease, anthrax, swine fever and fowl pest were received. Numerous Movement Licences authorising the transfer of pigs from areas covered by Orders to the slaughterhouse at Mitcham, were received during the year.

Thirty-seven visits were made to the five piggeries which are licensed under the Diseases of Animals (Waste Foods) Order, 1957, for the boiling of foodstuffs for the feeding of animals.

Clean Air Act, 1956.

During the year 1965, 141 complaints were received with regard to smoke or grit emission, and the necessary observations were made and remedial action taken.

Legal proceedings were instituted against a Company for contravention of the Dark Smoke (Permitted Periods) Regulations, 1958. The defendants pleaded guilty and were fined £10 with £6 6s. costs.

An application was made to the Magistrates Court under Section 16 (2) for an Order prohibiting the recurrence of a smoke nuisance created by a demolition contractor. The service of the Summons could not be proved and the case was not proceeded with. The nuisance was abated and did not recur.

Twelve notices of proposal to install a furnace to which Section 3 (1) of the Act applied were received, and the installations were inspected and recorded.

In 11 instances plans which were deposited for building byelaw approval showed in each case the proposed construction of a chimney. After examination of the plans, followed by discussions with the applicants, opinions upon the heights of chimneys in relation to Section 10 of the Act were sent to the Borough Surveyor.

National Survey of Atmospheric Pollution.

The Health Department maintains seven daily smoke filter and sulphur dioxide (volumetric) instruments which are sited in approved positions in the Borough. These instruments, which record smoke density and sulphur dioxide content in the atmosphere, are visited daily throughout the year and recordings are sent to the Ministry of Technology's Warren Spring Laboratory. Two standard deposit gauges are also sited within the Borough. These have a somewhat limited

use, but, nevertheless, serve to indicate localised atmospheric pollution. Recordings from these instruments are also sent periodically to the Ministry of Technology.

DEPOSIT GAUGE RECORDINGS 1965

		Jan	Feb	Mar	Apl	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
in Tons - per Sq. mile	Garth Road Cemetery	9.26	9.73	8.55	9.64	9.30	8.40	9.50	6.63	10.13	168.30	82.4	8.43
	Morden Park Bandstand	9.93	8.53	17.11	8.04	13.74	9.47	7.78	9.28	8.30	7.70	12.61	7.37

AVERAGE DAILY SMOKE CONCENTRATION (MICROGRAMS PER CU. METRE) 1965

Site	Town Hall	Atkinson Morley Hospital	Public Baths	Sewage Works	Leopold Road School	Lombard Road	Grand Drive
Number	Wimble- don 3	Wimble- don 4	Wimble- don 5	Wimble- don 6	Wimble- don 7	M.1	Merton & Morden 3
Jan. Feb. Mar. Apr. May Jun. Jul. Aug. Sep. Oct.	114 110 N N N N N N	61 58 52 27 23 22 N N 36 109 N	144 142 107 71 N N 18 19 46 146 N	103 113 86 53 N N 22 40 47 129 N	58 65 55 28 15 14 9 18 43 115 N	115 137 130 49 55 16 18 24 N 105 N	129 120 N N N N N N 27 117
Nov. Dec.	N	93	123	124	N	97	62

N indicates No Recording

AVERAGE DAILY SULPHUR DIOXIDE CONCENTRATION (MICROGRAMS PER CU. METRE) 1965

Site	Town Hall	Atkinson Morley Hospital	Public Baths	Sewage Works	Leopold Road School	Lombard Road	Grand Drive
Number	Wimble- don 3	Wimble- don 4	Wimble- don 5	Wimble- don 6	Wimble- don 7		Merton & Morden 3
Jan.	172	189	262	241	201	183	183
Feb.	250	243	303	319	231	283	269
Mar.	N	208	262	241	223	254	N
Apr.	N	107	150	112	91	158	NNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNNN
May	N	62	N	N	73	110	N
Jun.	N	88	N	N	66	116	N
Jul.	N	N	56	56	53	66	N
Aug.	N	N	75	71	75	83	N
Sep.	N	63	64	78	79	N	55
Oct.	N	185	210	199	242	148	162
Nov.	N	190	212	209	242	132	181
Dec.	N	141	176	182	N	96	133

N Indicates No Recording

These tables, which it is proposed to publish year by year, indicate, so far as smoke concentration is concerned, an improvement in the area of Wimbledon No. 4 instrument. This is in a smoke control area, the Order upon which became operative in 1963, and the area is adjoined on the west by smoke control areas within the Royal Borough of Kingston-upon-Thames.

It is hoped that, as time passes, a comparison may be made with the past year's recordings. Graphs based on records are maintained in the Department and these are beginning to demonstrate the effect of smoke control.

The records of sulphur dioxide concentration, however, do not indicate quite such a marked improvement and comparisons in future years will be the subject of further comment.

Smoke Control Areas.

During the year the Council reviewed the Smoke Control Area programmes of the three constituent authorities and a new programme was adopted. This provides for the division of the remainder of the Borough into 32 areas so arranged as to allow for linking up with those areas already covered by Smoke Control Orders.

The position on 31st December, 1965, was as follows:-

April 1985 April 1985 April 1985	Charles of the Association of the	Oliver and the state of the sta		
Wimbledon	Smoke Control	Orders—		Opera-
Order No.	State.	Made.	Confirmed.	tive.
(No. 1) 1962	Operative	2.2.62	13.2.63	1.12.63
(No. 2) 1962	Operative	10.8.62	19.11.62	1.6.64
(No. 3) 1963	Operative	27.6.63	7.11.63	1.10.64
(No. 4) 1963	Operative	12.12.63	31.8.64	1.7.65
Merton and	Morden Smoke	Control Ord	ers—	
(No. 1) 1961	Operative	13.3.61	13.9.61	1.10.62
(No. 2) 1961		24.7.61	20.12.61	1.10.62
(No. 3) 1962	Operative	29.1.62	14.6.62	1.10.63
(No. 4) 1963	Operative	22.4.63	30.8.63	1.10.64
(No. 5) 1963	Operative	22.7.63	11.12.63	1.10.64
(No. 6) 1964	Operative	22.6.64	24.9.64	1.10.65
(No. 7) 1965	Confirmed	8.2.65	16.9.65	1.10.66
Mitcham Sn	noke Control Ord	ders—		
(No. 1) 1963	Operative	24.1.63	14.5.63	1.12.63
(No. 2) 1963				
(No. 3A) 1964				
Merton Smo	oke Control Area	as—		
(No. 1) 1965	Confirmed	21.7.65	11.10.65	1.10.66
(No. 2) 1965	Awaiting	8.12.65		
	Confirmation			

Areas Nos. 3 and 4 under survey.

The area covered by Orders either in operation, confirmed but not operative, or awaiting confirmation is 4,355 acres. The total number of houses involved in these areas is 22,514. Comparable figures at the commencement of the year were 3,797 acres and 17,245 houses.

The two Smoke Control Areas under survey at the end of the year will cover an additional 291 acres with 3,162 houses.

The total number of visits made during 1965 in connection with the Clean Air Act, 1956, for all purposes, was 13,535.

Work in connection with Smoke Control Areas presented considerable difficulties on 1st April, 1965, inasmuch as it involved three separate systems of administration and varying stages of completion in respect of surveys, Areas and Orders, and a depleted staff. Nevertheless, these difficulties were overcome and the work was proceeding satisfactorily on one system by the end of the year, except in the case of Merton and Morden (No. 7) Smoke Control Order, 1965. The changeover was completed whilst maintaining good relations with residents in the Areas concerned.

After the operative date of any Smoke Control Order, observations are made from time to time by Public Health Inspectors and Technical Assistants, to ensure compliance with the Order.

Noise Abatement Act, 1960.

During 1965, 115 complaints regarding noise were received and 448 visits were made. Many of the complaints referred to alleged noise nuisances at night and the majority of these visits were made outside normal office hours, for the purpose of observation and the taking of Noise Level Meter readings.

Legal proceedings were instituted against the driver of an icecream vehicle for sounding his loudspeaker chimes outside the permitted hours. The defendant pleaded guilty and was fined £3.

The Pharmacy and Poisons Acts, 1933-1941 (a).
The Rag Flock and Other Filling Materials Act, 1951.
The Fertilisers and Feeding Stuffs Act, 1926.

The administration of the Council's powers under these enactments is the responsibility of the Public Health Inspectors. It was not possible to make any progress in connection with this legislation during 1965 with the exception of (a) above, where the issue of licences was undertaken by the Town Clerk's Department.

Housing Acts, 1957-1964.

In accordance with the Ministry of Health Circular 17/55, details of housing matters are omitted from this Report, but I think that some reference should be made to the work carried out in this field.

The implementation of the Slum Clearance Programmes of the three constituent Authorities continued, and, in addition, a number of houses were inspected, either for repair or for Closing Order or Demolition procedure. During the year the Council adopted Standards to be Applied to Houses let in Multiple Occupation, and 477 visits were made to such houses. The total number of visits made to premises of all kinds, for the purposes of housing administration, was 2,078.

CONCLUSION

Despite an obvious slowing down process immediately before, and for some time after, 1st April, 1965, a good standard and variety of work has been maintained by the staff of the Environmental Health Section of the Department. The continuity of the service has been maintained but staffing difficulties are reflected in some of the statistics given in this Report.

On 1st April, 1965, the establishment of Public Health Inspectors was 18 but, in fact, there were two vacancies. During the year two more Inspectors left to take up appointments elsewhere and one new Inspector joined the staff so that at the end of the year there were three vacancies. These vacancies represent several hundred visits, and whilst duties such as requests for visits, food inspection, meat inspection at the slaughterhouse, infectious disease enquiries and the like were given priority, work of a routine nature, i.e., inspections of food premises, factories and work places, stables, etc., and sampling work, tended to be curtailed or neglected. The Inspectors are also required to carry out a great deal of work in connection with the Housing Acts and by the end of the year arrears of this and other work were becoming an embarrassment.

The assistance of the seven Technical Assistants in the fields of rodent control, smoke control, and offices, shops and railway premises administration must be acknowledged but, valuable though these Officers are, they cannot replace Public Health Inspectors in the carrying out of statutory duties.

It is to be hoped that the staff situation may be improved during 1966 so that more time may be devoted to other aspects of environmental hygiene.

G. H. COCKELL,

Chief Public Health Inspector.

ANNUAL REPORT

to the

EDUCATION COMMITTEE

on the work of the

SCHOOL HEALTH SERVICE

for the year

1965

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ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER

for the year 1965

SPECIAL SERVICES (EDUCATION) SUB-COMMITTEE (As at 31st December, 1965)

Chairman: Councillor A. Leivers

Alderman N. S. Clarke

Councillors:

A. M. Anderson, M.A. E. H. Ceci P. Corbishley
D. J. Hempstead G. N. Smith R. A. Spalding W. G. Terrett
(Mrs.) J. E. Vowles The Rev. C. H. Smith, M.A.

Ex-Officio:

Sir Cyril Black, J.P., D.L., M.P. (Chairman of the Education Committee)

Alderman V. Talbot, J.P.
(Vice-Chairman of the Education Committee)

Chief Education Officer: R. Greenwood, M.A.

SCHOOL CLINICS PROVIDED BY THE LOCAL EDUCATION AUTHORITY

General Medical Clinics

Amity Grove,

West Wimbledon: Thursday mornings.

Grand Drive,

Raynes Park:

Tuesday mornings.

Middleton Road,

Morden:

Wednesday mornings. Monday mornings.

Morden Road, Merton:

Pelham Road, Wimbledon:

Monday and Wednesday

mornings.

Thursday and Friday 9-10 a.m. (Health Vis-

itors only).

Western Road,

Mitcham:

Monday and Friady

mornings.

Wednesday 9-10 a.m. (Health Visitors only)

Wide Way, Mitcham: Wednesday mornings.

Examination of cases referred by Teachers, Education Department, Health Visitors, etc.: Treatment of minor ailments.

Child Guidance Clinics

All Saints Road,

Wimbledon:

Sherwood House, Commonside East, Mitcham: - Monday to Friday all day.

(Cases seen by appointment by Psychiatrist or Educational Psychologist, with the assistance of Psychiatric Social Workers)

Ophthalmic Clinics

Amity Grove,

Pelham Road.

West Wimbledon:

Grand Drive,

Tuesday afternoons.

Raynes Park: Morden Road, Merton:

Tuesday mornings.

Wednesday afternoons.

Friday mornings.

Western Road,

Mitcham: Wide Way, Mitcham:

Wimbledon:

Wednesday afternoons. Tuesday mornings.

Examination and treatment of errors of refraction and squint.

Orthopaedic Clinic

Pelham Road,

Wimbledon:

Every fourth Wednesday afternoon.

Examination of referred cases by an Orthopaedic Surgeon.

Audiology Clinic

Russell Road,

Wimbledon:

Alternate Friday morn-

ings.

Detailed investigation of cases referred.

Psychological Clinic

Pelham Road,

Wimbledon:

Every third Monday morning.

Cases referred for special attention.

Remedial Exercises

Amity Grove,

West Wimbledon:

Tuesday mornings.

Remedial and breathing

Pelham Road,

Wimbledon:

Tuesday and Thursday

afternoons.

Wide Way, Mitcham:

Tuesday afternoons.

exercises as recommended by School Medical Officers.

Speech Therapy Clinics

Amity Grove,

West Wimbledon:

Thursday afternoons.

Grand Drive,

Raynes Park: Wednesday all day and

Friday afternoons.

Middleton Road,

Morden:

Tuesday mornings and Wednesday afternoons.

Morden Road, Merton:

Russell Road,

Wimbledon:

Thursday mornings.

Monday all day and Tuesday afternoons.

Treatment of speech defects.

Dental Clinics

Amity Grove,

West Wimbledon:

Monday to Friday all day.

Church Road,

Mitcham:

Monday all day, Tuesday and Thursday mornings.

Friday all day.

Grand Drive,

Raynes Park:

Monday to Friday all day.

Meopham Road,

Mitcham:

Monday to Friday all day.

Middleton Road,

Monday to Friday all day.

Morden: Morden Road, Merton:

Monday to Friday all day.

Pelham Road,

Wimbledon:

Monday to Friday all day.

Western Road,

Mitcham:

Monday to Friday all day.

To the Chairman and Members of the Education Committee:

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the first Report of the School Health Service for the London Borough of Merton for the year 1965. It should be pointed out that for the first three months of the year, the Service was that operated by Surrey County Council as a Divisional Service comprising three separate Divisions (Wimbledon, Merton & Morden and Mitcham) each with its own Divisional School Medical Officer. With effect from 1st April, 1965, the London Borough of Merton assumed responsibility as a Local Education Authority. Since the area itself has remained unchanged geographically, the collation of information for the whole year has presented no serious difficulty.

The operation of the School Health Service during the year, however, has presented some administrative problems precipitated by the amalgamation of three Divisions each with their three separate systems and each with their own records comprising in all some 24,000 school children's medical records. This has inevitably caused some dislocation in the School Health Service, but by the end of the year most of the difficulties had been overcome, although much still requires to be done. On the whole, in spite of difficulties of amalgamation, the Service has run quite smoothly.

There was little change in the establishment of Medical, Dental and Health Visiting staff employed in connection with the Service. The principal change was the retirement of Dr. A. R. Graham, as Divisional School Medical Officer for Mitcham, on 31st March, 1965.

School Departments now number 83 and compared with 1964, the school population increased by 228. The percentage of school children whose general condition was found to be satisfactory on inspection was 99.98% compared with 99.90% in 1964, an increase of .08%. This percentage reflects the continuing high standard of the health of school children in this area. 14.95% of the 1965 school population were found at routine medical inspections to require treatment for various defects mostly minor in character compared with 16.59% of the 1964 school population.

On notification of a case of tuberculosis in a pupil, an epidemiological survey was necessary during the year at a Secondary Boys' School in Wimbledon. A detailed report of this survey is given on page 83.

There was a relatively high incidence of measles and chickenpox during the year, but apart from this there were no serious outbreaks of infectious disease.

I am grateful for the help and co-operation received from Mr. R. Greenwood, Chief Education Officer, and his staff, and from Head Teachers, Teaching Staff and Secretaries of the many schools in the area. My thanks and appreciation are also due to the Medical, Dental, Health Visiting and other staff of the School Health Service for the satisfactory and efficient manner in which their respective duties were carried out in this inaugural year of the London Borough of Merton. I should like to make special mention of the valuable work of the

Chief Administrative Officer, Mr. W. Atkinson, who joined the department in May, 1965, and to Mr. E. A. Ayling, the Senior Clerk of the School Health Service section. I am also grateful for the support and encouragement so kindly extended at all times by the Chairman and Members of the Special Services (Education) Sub-Committee.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

P. J. DOODY,

Principal School Medical Officer.

THE SERVICE

The Service provides for periodic inspections of all children:

- (a) for whom primary, secondary or further education is provided by the Local Education Authority at any school or college maintained by them, and
- (b) receiving primary or secondary education under special arrangements made by the Local Education Authority otherwise than at school.

The treatment of minor ailments, eye, dental, speech, postural and breathing defects, and of children with behaviour problems, is provided at Clinics in the area. Attendance of children is normally by appointment. Most other forms of treatment are provided by general practitioners or the hospital services. There is close co-operation between the School Health Service and general practitioners and the hospitals.

MEDICAL INSPECTIONS

Medical inspections are carried out as follows:-

- 1. On entry to school for the first time (including a vision test).
- During the year in which eight years of age is reached.
 On entry to Grammar, Technical and Secondary Schools.
- 4. During the year in which 15 years of age is reached.
- During the last year in school if not inspected in the previous twelve months.

In addition, special inspections are carried out at the request of teachers, school nurses, parents or other bodies when children are thought to be requiring medical or other educational treatment, and also on children to ascertain their fitness for part-time employment.

The statistics of medical inspection and treatment together with other statistics are contained in the Tables in Appendices 'A' and 'B'.

AUDIOMETRY AND AUDIOLOGY

A sweep audiometric test is carried out by the Audiometrician on six-year-old children attending primary schools. All children who fail this test are referred to the school clinic for aural examination by the school medical officers. If the hearing failure remains unexplained, a second audiometric test is carried out by the audiometrician, and, if necessary, the case is referred to the audiologist for further investigation and possible referral to a specialist hospital department if required.

Details are given below of audiometric primary testing carried out during the year:—

Number of schools visited	 	 38
Number of children tested	 	 2,177
Number of primary failures	 	 116

SPEECH THERAPY

Number of sessions held (a) for treatment	 550
(b) for consultation	 62
Number of cases on register at beginning of year	 187

Number of cases added Number of cases discha Number of cases on regi	rged du	ring ye	ear		66 69 184
Cases discharged during	year w	ho:-			
Achieved norr				27	
Were greatly i				24	
Showed some	improv	ement		9	
Showed little	or no i	mprove	ment	9	
Analysis of cases treated dur	ing year	-:-			
Stammering				19	
Dyslalia			11.00	139	
Cleft palate				5	
Nasal obstruct	rion			1	
Cluttering				1	
Aphasia				1	
Nasality				1	
Defective spee	ch due	to amo	ontia	1	
Defective spee		to dea	fness	2	
Retarded spee	ch			18	

THE WORK OF THE SCHOOL NURSES

In this Local Education Authority the Health Visitors are also School Nurses, and each Health Visitor has the responsibility of two or three school departments. Where it is possible, the Health Visitor is attached to a primary school in her own area, since she often knows the children and their families well. This is of value as there is in the main, very good co-operation between the Head Teacher, School Medical Officer and the Health Visitor.

Hygiene inspections are carried out regularly in the majority of schools by the Health Visitor early in each term and 'follow-up' visits are paid either in school or at home where necessary. There is a link here with the Education Welfare Officers who are notified in cases of exclusion and are told the probable length of children's absences from school and the names of the School Clinics where children will be seen before re-admission to school.

Routine medical inspections in primary schools are carried out with a Health Visitor in attendance. She tests vision and is present during the medical inspection by the School Medical Officer. This is of value because the Health Visitor can often give details of the past history of the children and she also knows the parents, which promotes a more friendly atmosphere altogether. At routine medical inspections in grammar and secondary schools there is usually a state registered nurse present. This has been found to be a practical idea, since the Health Visitor rarely knows the older children who often travel long distances to school. The state registered nurse, wherever possible, is allocated to a particular School Medical Officer, which builds up a good team relationship.

Vision tests are carried out by Health Visitors in all schools where there are 13-year-old children, since there is not now a medical inspection for this age group. Where a possible defect is discovered by the Health Visitor at this primary vision test, the child's parents are offered the choice of an appointment with the Ophthalmologist at the School Clinc, or to make their own arrangements for eye testing.

The reinforcing injections against diphtheria and tetanus are given shortly after entry to school and Mantoux testing and B.C.G. vaccination are carried out by School Medical Officers with a state registered nurse in attendance at the age of 13 years.

There are few minor ailments being treated at sessions of General Medical Clinics these days, but a considerable number of children are referred back to those Clinics from routine medical inspections by the School Medical Officers, who wish to see them and their parents for a 'follow-up'. The state registered nurses act as school nurses for these sessions.

Health education in schools is a service which is generally on the increase in the Borough, and is proving of great value, although its scope is still more limited than is hoped for in the future. In general, the Health Visitor visits a secondary girls' school for one period each week, and takes a small group of children aged between 11 and 15 years for a variety of mothercraft and hygiene subjects. Because of the smallness of these groups, there is ample opportunity for discussion, and both the girls and the teachers are well pleased with the results so far achieved.

HANDICAPPED PUPILS

NUMBERS OF HANDICAPPED PUPILS

The following table gives the numbers of pupils on the Handicapped Pupils' Register on 31st December, 1965, together with the numbers ascertained during the year:—

	Classifi	Total ascertained during year	Total ascertained at 31.12.65			
Blind		 			1	12
Partially-sighted		 			stell and dalay a	9
Deaf		 			1	11
Partially-hearing		 			1	8
Delicate		 			8	27
Physically-handicap	ped	 			7	27
Educationally subno		 			37	150
Maladjusted		 			19	43
Totals		 	1		74	287

PROVISION OF SPECIAL EDUCATION

The table below gives details of the numbers of pupils for whom special educational facilities have been provided by the Authority:—

Classification		ng special ool as	under arra made und 56 of the	education angements er Section Education 1944	- Total
Classification	Day Pupils	Boarders	In Hospital	At home	1 otal
Blind	5	7		S. Hilliam	12
Partially-sighted	8	1	CT WITH THE	more arres	9
Deaf	4	7	-	_	11
Partially-hearing	6	STIPLE RIVER	THE PARTY	PRAPHY	6
Delicate	17	8	-	3	28
Physically-handicapped	18	3	_	2	23
Educationally-subnormal	135	10	os - non	-	145
Maladjusted	6	33	HT - JEST	3	42
Totals	199	69	and the second	8	276

CHILDREN UNSUITABLE FOR EDUCATION IN ORDINARY SCHOOLS

During the year seven children were reported as suffering from a disablity of mind of such nature and to such extent as to make them unsuitable for education at school.

INFECTIOUS DISEASES AND PROPHYLACTIC MEASURES

1. INFECTIOUS DISEASES

Infectious Diseases.

Disease		5	Suffering	Excluded on suspicion	Infection at home	Total exclusions
Smallpox			12.1-	barra - saV	O.O. to and a	
Diphtheria			_	_	-	_
Scarlet Fever			42	-	_	42
Enteric Fever			_	_	_	_
Measles			654	4	11	669
Whooping Cough			16	-	16	32
German Measles			134	1	4	139
Chicken Pox			464	6	4	474
Mumps			17	1	re wing 21	18
Jaundice			1	10-11	chard—durin	1
Influenza			23	_	_	23
Other			118	2	7	127
Totals			1,469	14	42	1,525

Contagious Diseases.

Disease		Suffering	Excluded on suspicion	Total exclusions	
Ringworm		 	1	_	1
Impetigo		 	2	The second secon	2
Scabies		 	_		_
Other		 ***	9	na neci-enterti	9
Tota	ls	 	12	_	12

Compared with 1964 there were 24 fewer cases of communicable disease notified and 15 fewer children excluded from schools.

2. PROPHYLACTIC MEASURES

1. Poliomyelitis Vaccination.

Vaccination of school children against Poliomyelitis continued during the year. The actual number vaccinated or receiving reinforcing doses during 1965 was as follows:—

Number o	f children	vaccinated		 240
Number of	f children	given re-inforcing	doses	 1,993

I am pleased to say that no case of Poliomyelitis occurred among schoolchildren during 1965.

2. Diphtheria/Tetanus Immunisation.

Number	of	children	given	immunisation	 163
Number	of	children	given	re-inforcing doses	 596

I have much pleasure in being able to report again that there was no case of Diphtheria among school children or otherwise in this area, but the importance of immunisation for all children is in no way diminished.

3. Protection of School Children against Tuberculosis. B.C.G. Vaccination.

]	Percentage.
Number in age group	 1,987		0
Number of consents	 1,721		86.61%
Number skin tested	 1,712		86.11%
Number Mantoux positive	 194		9.81%
Number B.C.G. Vaccinated	 1,518		76.39%

ANCILLARY SERVICES

1. NURSERY CLASSES

There were 215 children atending the nursery classes at the infants' schools during the year.

2. PROVISION OF MILK AND MEALS

The following table gives details of milk and meals supplied together with the percentage of pupils partaking; compared with 1964:—

Vana	Numbers	Takir	ng Milk		Taki	ng Meals	
Year	attendance	Number	Percentage	Free	Paid	Total	Percentage
September, 1965	22,494	18,578	82.5	343	15,673	16,016	71.2
September, 1964	22,835	18,784	82.2	316	15,190	15,506	67.9

Epidemiological Survey at Wimbledon Secondary Boys' School

In Janaury, 1963, a pupil attending the above school was referred to the Chest Clinic because of a strong positive reaction to the Mantoux skin test, prior to B.C.G. vaccination. At the time, clinical examination and chest X-ray showed nothing abnormal.

The boy was admitted to hospital in February, 1965, for investigation of a small haemoptysis, and in March, 1965, he was notified as a case of pulmonary tuberculosis.

The Chest Physician recommended an epidemiological survey as follows:—

- All pupils who had not been B.C.G. vaccinated, or who were not know to be tuberculin positive should be Mantoux tested, and,
- 2. All previous and present positive reactors, as well as those who had received B.C.G. vaccination should be chest X-rayed.

Notification of the proposal to conduct the survey was given to the Chief Education Officer in May, 1965, and with the fullest possible co-operation of the Head Teacher and his staff, consent forms were distributed to parents of boys attending school to be included in the survey.

Of the 875 boys in attendance (excluding the notified case of tuberculosis) consent was not forthcoming, or was refused, in 30 cases only. On 10th June, 1965, 280 boys were given tuberculin skin tests and seven proved positive (two of whom had already been tested previously with positive results). Arrangements were made for the Mass Radiography Unit to visit the school on 2nd July, 1965, when 413 pupils were examined, including the five unexplained positive reactors. Fourteen were already under the supervision of the Chest Clinic and 143 were absent for the X-ray as examinations were in progress at the school when the Unit visited.

Sixty members of the teaching and ancillary staff were X-rayed at the same time. A further five who did not avail themselves of the opportunity had undergone recent X-rays. Twelve were absent, one had left, and one refused to have an X-ray.

A note was sent to the parents of the boys who had missed the chest X-ray examination, similarly for those boys who had left school at the end of the Spring term 1963, when the possibility of infection first existed, advising a chest X-ray as a precautionary measure.

Following the survey, a member of the teaching staff was referred to the Chest Clinic for further investigation, and it was discovered that he was suffering from infectious tuberculosis, notification being made on 12th August, 1965. He was excluded from school, and admitted to hospital for treatment, his return to teaching being dependent on satisfactory recovery and freedom from infection.

The Chest Physician recommended a further epidemiological survey, in consequence, after a period of six months has elapsed from the last attendance at the school of the teacher concerned.

THE SCHOOL DENTAL SERVICE

I am indebted to Mr. M. T. Gibb, the Chief Dental Officer, for the following report on the operation of the School Dental Service during the year.

'At 31st December, 1965, the Dental Staff consisted of five full-time officers, one part-time salaried officer, and ten sessionally employed officers, equivalent to 2.9 full-time officers. The employment of 1.4 Dental 'Auxiliaries forms a useful addition to the team. There were no variations in the full-time staff during the year, apart from my own appointment, which I took up in June, but various changes occurred among the sessionally employed staff. Orthodontic treatment was carried out on six sessions a week at the Church Road, Amity Grove and Grand Drive Clinics, and a smaller amount of Orthodontic treatment was also carried out by Dental Officers, either on their own initiative or in consultation with an Orthodontist.

'The dental scheme in the Borough begins, as regards each child, with its entrance into school life, and provides for an annual re-examination, together with arrangements for recall inspections up to the end of school life, with the opportunity for treatment, if necessary, after each inspection. The recall system leads to many more teeth being saved and thus there is a consequent reduction in the number of general anaesthetic extraction sessions.

'Children of pre-school age and expectant and nursing mothers are also offered treatment under the Maternity and Child Welfare scheme.

'The work of our two Dental Auxiliaries is confined to the four two-surgery clinics in the Borough, as their regulations lay down that they must work under the direct supervision of a qualified Dental Surgeon. They are permitted to do simple fillings, scaling, cleaning and polishing of the teeth, and applying prophylactic solutions. They are also trained to give instructions in oral hygiene, and to assist in giving dental health education talks to parents and children. They are particularly good with young children, and their work is of a high standard.

'Dental health education will form a more important part of our work, and talks, illustrated with films and demonstrations, will be given to Parentcraft Classes, perhaps the most receptive audience. Head Teachers have also been most cooperative in promising to arrange for groups of children to be given instruction in oral hygiene, either by Dental Officers or by Dental Auxiliaries'.

The statistics relating to the School Dental Service are as follows:—

STATISTICS FOR YEAR 1965

Number of pupils on the register of maintained primary and secondary schools including nursery and special schools in January, 1966, as in Forms 7, 7m, and 11 schools—24,401.

Attendances and Treatment.

IN AND TREATMENT STREET	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Tota
First Visit	1,896 3,658 5,554 391 1,865 3,159 1,534 2,919 68 948 486 141	2,103 6,126 8,229 382 4,857 344 4,240 322 420 333 284 87	768 2,574 3,342 176 2,351 2,042 107 67 36	4,767 12,358 17,125 949 9,073 3,503 7,816 3,241 595 1,281 837 264
Number of pupils X-rayed		a	. 480	
Prophylaxis			. 1,270	
Teeth otherwise conserved			. 1,678	
Number of teeth root filled			. 34	
Inlays			. 4	
Crowns			. 10	
Courses of treatment complet	ted		. 4,548	
Orthodontics.				
Cases remaining from previo	us vear	7291	. 115	
New cases commenced during			147	
Cases completed during year	, year		06	
			51	
Cases discontinued during ye		ttad	210	
Number of removable applia		ttea		
Number of fixed appliances			. 3	
Pupils referred to Hospital C	Consulta	ant	. 6	
Prosthetics. 5 to 9.	. 10 to	14. 15	and over.	Total.
Pupils supplied with F.U. or				
F.L. (first time) —	hold a	10	_	_
Pupils supplied with other				
dentures (first time)	-	_	1	1
Number of dentures supplied —	noirro-	the second	4	4
Anaesthetics.	unito			
General Anaesthetics administe	red by	Dental	Officers—15	5.
Inspections.				
 (a) First inspection at school: n (b) First inspection at clinic: n Number of (a)+(b) found to Number of (a)+(b) offered (c) Pupils re-inspected at school 	umber o requi treatm	of pupils re treatm	2,228	

Sessions devoted to treatment	2,996
Sessions devoted to inspection	205
Sessions devoted to Dental Health	1
Education	1

Appendix 'A'

MEDICAL INSPECTION AND TREATMENT

(Excluding Dental Inspection and Treatment)

Return for the year ended 31st December, 1965

Number of pupils on registers of maintained, primary, secondary, special and nursery schools in January, 1966:—

(a)	Ordinary	y School	s		24,033
(b)	Special	Schools			153
(c)	Nursery	Schools	and	Classes	215

Total ... 24,401

SECTION A.

Routine Medical Inspections.

Age Groups Inspected (By year of birth)	Number of Children Inspected
1961 and later	623
1960	1,817
1959	503
1958	137
1957	1,532
1956	228
1955	93
1954	92
1953	1,112
1952	465
1951	68
1950 and earlier	2,286
Total	8,956

Other Medical Inspections.

Type of Inspection	Number of Children Inspected
Special Inspections Re-Inspections	2,454 706
Total	3,160

Return of Defects found in the course of Medical Inspections.

	Periodic I	nspections	Special Ir	spections
Defects or Disease	No. referred for Treatment	No. referred for Observation	No. referred for Treatment	No. referred for Observation
Skin	92	154	200	39
Eyes (a) Vision (b) Squint (c) Other	753 83 20	505 24 45	735 4 17	86 14
Ears (a) Hearing (b) Otitis Media (c) Other	31 18 10	103 73 25	48 7 7	120 6 2
Nose and Throat	71	469	57	58
Speech	41	80	12	17
Lymphatic Glands	5	111	-	7
Heart and Circulation	30	118	5	16
Lungs	65	148	10	22
Development (a) Hernia (b) Other	9 20	15 113	1 12	5 27
Orthopaedic (a) Posture (b) Flat Foot (c) Other	23 43 64	57 177 157	3 17 27	7 37 32
Nervous System (a) Epilepsy (b) Other	8 8	5 20	- 3	4 4
Psychological (a) Development (b) Stability	4 9	18 83	1 10	1 17
Abdomen	18	36	4	8
Other defects and diseases	45	225	76	132
Totals	1,470	2,761	1,256	661

Four thousand two hundred and thirty-one defects were found in children at routine medical inspections of which 1,470 were referred for treatment and 2,761 for observation, 1,917 defects were found at special inspections, 1,256 being referred for treatment and 661 for observation. The total number of defects referred for treatment and observation in 1965 was 6,148.

Number of Individual Children found at Routine Medical Inspections to require treatment (excluding uncleanliness and dental disease)

Group	Number of children inspected	Number of children requiring treatment	Percentage requiring treatment
Disservation	reminer T contract	dO tosseenT	%_
1961 and later	623	35	5.62
1960	1,817	245	13.48
1959	503	64	12.72
1958	137	22	16.06
1957	1,532	230	15.01
1956	228	43	14.47
1955	93	15	16.13
1954	92	15	16.30
1953	1,112	184	16.55
1952	465	90	19.35
1951	68	21	30.88
1950 and earlier	2,286	375	16.33
Totals	8,956	1,339	14.95

Classification of General Condition of Pupils Inspected during 1965.

Group	Number of children inspected	Percentage found satisfactory	Percentage found unsatisfactory
55	01 851	%	%
1961 and later	623	100	
1960	1,817	100	Devolerment III
1959	503	100	nires 44 (a)
1958	137	100	(b) (c)
1957	1,532	99.94	0.06
1956	228	99.57	0.43
1955	93	100	anom= (a)
1954	92	100	1007 10 44 (d)
1953	1,112	100	(a)
1952	465	100	_
1951	68	100	Numerous Symmon
1950 and earlier	2,286	100	Yampla ss (e)
Totals	8,956	99.98	0.02

SECTION B.

TREATMENT

Uncleanliness and Verminous Conditions.

1.	Total number of ind			ations	of pupil	s by	
	Health Visitors in Sc	hools					9,102
2.	Number of individual	pupils	found	to be in	nfested		66
3.	Number of exclusion	s:-					
ni	First time					18	
	Second time				***	7	
	Third time					1	
					M. Marie		26
4.	Number of pupils cle	eansed		dimine :			12
5.	Number of cases refe	rred to	the N.S	S.P.C.C	with s	satis-	
	factory results						_
6.	Number of Cleansin						
	issued under Section	of th	ne Educ	cation P	Act, 194	4	

Diseases of	the	Skin	(excluding	uncleanliness)
-------------	-----	------	------------	----------------

Di	seases of the Skin (e	excluding un	icleanl	iness)	
	and an March Street, S		Num	ber of cases	treated
	Diseases of the Ski	n.		under treat	
				uring the ye	
Rin	gworm—scalp	i ministration	1235	_	
	gworm—body			merca V	
	bies			1	
22 200	etigo			_	
	ner Skin Diseases			296	
Ott	ici okili Discases			250	
		Total		297	
		Total		291	
Е	ye Diseases, Defects	ive Vision a	nd San	uint.	
		The high and	700	per of cases	known
	Ena Diseases and D	of anta			
T	Eye Diseases and D			ve been dea	it with.
	ernal or other, exclu	TOTAL CONTRACTOR OF THE PARTY O	OI	20	
	efraction and squin			28	
Err	ors of refraction (in	cluding squi	nt)	3,474	
		Total		3,502	
			-		
Nu	mber of pupils for w	hom spectac	eles		
V	vere prescribed			956	
	and the same appropriate				
	Diseases of the Ea	r. Nose and	Thro	at.	
	Distance of the Lan	, 11000 11110		er of cases l	rnoun.
	Diseases and Defe				
n.			to na	ave been tre	ated.
	ceived operative trea				
	a) for diseases of th		**		
(b) for adenoids and	chronic ton	S11-	10	
mentional Ply	litis			12	
(c) for other nose as	nd throat co	on-		
AVIII three	ditions			100-10	
Rec	ceived other forms o	f treatment		124	
		Total		126	
		Total		136	
	Orthopaedic and	Postural De	efects.		
N	mber of cases known		2 227.2		
	reated in Clinics				
		or Out-rati	CIII	189	
Paris In 1	Departments	and solitable		109	
	ere held at Pelham	Road Ren	nedial	Exercises	Clinic
during 1		44 014 0000	disch	nand	
	were admitted and				01: .
41 sessions w during 1	ere held at Amity 1965.	Grove Ren	nedial	Exercises	Clinic
And the second s	were admitted and	10 old cases	s disch	arged.	
	ere held at Wide Wa			AND DESCRIPTION OF THE PARTY OF	during
1965.	it field at wide wa	y Kemediai	DACI CI	ses Cillic	during
3324 11131111111111111111111111111111111	were admitted and	19 old cases	disch	arged	
					T- 1
	ere held at St. Chris				
	Annexe Remedial E				
4/ new cases	were admitted and 5	old cases	discha	aroed	

89

47 new cases were admitted and 57 old cases discharged.

Other Treatment Given.

Number of cases treated.
452
5
31
75
13
615

Appendix 'B'

1. General	vieaica	4 / IV	unor Au	men	u Gumes		
Attendances	made	by	children	at	General	Medical/	Minor

Ailment Clinics 3,015

2. Other Medical Examinations undertaken by School Medical Officers.

(a)	Childen	examined	for	part-time employment	 430
				Entertainment Licences	 4

In addition to medical examinations specified as above, School Medical Officers in their capacity as Assistant Medical Officers of Health also carried out 672 medical examinations of Teachers, Teacher Trainees, School Cooks, School Caretakers, and other staff for superannuation purposes. Arrangements are also made for Chest X-ray where this is necessary.

3. Recuperative Holidays.

Children sent for	recuperative !	holidays on	the	recomme	nda-	
tion of School	Medical Offic	ers				74

All these children had seaside holidays and when examined on their return were all found to have benefited.

CHILD GUIDANCE SERVICE

I am indebted to the Chief Education Officer for the following report on the Child Guidance Service:—

GENERAL

The work of the Wimbledon Clinic proceeded satisfactorily during 1965 and no interruption was caused by the transfer of responsibility to the new Borough.

For the Mitcham Clinic, on the other hand, the year's work was disrupted by the resignations of the psychiatrist and educational psychologist. This is reflected in the attached statistics. Each of the posts of psychiatrist, psychiatric social worker and educational psychologist was vacant for some part of the year, and the last-named has still not been filled owing to the national scarcity of educational psychologists.

ESTABLISHMENT

For the Committee's information the total establishment of professional staff to be shared between the two clinics is as follows:—

2 Psychiatrists— six half-day sessions per week each.

2 Educational Pyschologists—full-time.

3 Psychiatric Social Workers-full-time.

1 Psychotherapist-full-time.

REMEDIAL CLASSES

Two of these classes exist in the Borough. The children attending the classes are all of at least average intelligence, and often well above this, but for one reason or another have fallen behind in their school work. The class in Wimbledon caters for seven schools, the Morden class for six schools from both Mitcham and Morden. Children attend for three sessions a week. The teachers spend some Friday afternoons in visiting the children's base schools and discussing their progress with the class teachers. Each class has an Open Evening on an average once a term and these have been much appreciated by the parents, a large percentage of whom have attended to discuss their children's progress. Initially children are selected through group intelligence and attainment tests administered in general by Heads or class teachers, and then seen by the Educational Psychologist for individual assessment. As a result of the latter, the child may be recommended for the Remedial class, individual tuition, in need of investigation at the Child Guidance Clinic, or for supervision. Frequent contact with both the base school and the Remedial class is maintained by the Educational Psychologist. Thus every child is kept under review and returned full-time to its own school as soon as this seems advisable.

In concluding this section on Remedial classes, it should be mentioned that both classes are only able to function so successfully because of the help and support given by the Heads of the schools in which they are accommodated. There is a need to extend this service if teachers could be found. (The wider question of what special provision can be made for children who are backward but not 'educationally subnormal' is at present under consideration.)

DIAGNOSTIC CENTRE FOR FIVE-YEAR-OLDS.

One of the needs which, the Educational Psychologist reports, has emerged clearly over the last year is the need for a diagnostic centre for 5-year-olds. It is often difficult to decide whether such a young child is in fact ESN, maladjusted, merely immature, etc., and in any case one hesitates to label children of this age. The child may not be ready for the reception class and yet is too old to stay at the Nursery School or at home. Where a query arises, a few months in a small group under a teacher trained to observe such children and with the help of experts available, would provide opportunity for careful assessment. Where a child is minimally handicapped, careful observation over a few months can help to establish the area affected and how far the child can cope with a particular type of school. More success in ultimate placement of these children would be achieved, and the fear of failure and subsequent change under stress to another type of education would be minimised. Consideration will be given to the inclusion of this type of centre in the Authority's new ESN school.

PREMISES

The Wimbledon child guidance team continued to work in the cramped and unsatisfactory clinic in All Saints Road, but it is hoped that they will be able to move to the newly-acquired Rokeby building, 97 Worple Road, in the near future.

The Mitcham clinic premises at Sherwood House, Commonside East, are generally satisfactory.

CHILD GUIDANCE SERVICE STATISTICS FOR 1965

(A) THE GENERAL WORK OF THE CHILD GUIDANCE SERVICE

1. New Referrals.		Wimble-don.		Boys.	Girls.	Total.
Referring agencies:—				10129 12		
Courts or probation officers School Health Service Hospitals or specialists General practitioners Schools Parents Others		4 30 6 13 41 7 9	5 7 1 6 28 6 5	7 27 3 11 52 7 10	2 10 4 8 17 6 4	9 37 7 19 69 13 14
Totals		110	58	117	51	168
Predominant reasons for	refe					
Nervous disorders Behaviour problems Habit disorders Educational problems Psychomatic disorders Others		24 47 13 26 —	13 18 10 11 2 4	20 50 17 25 1 4	17 15 6 12 1	37 65 23 37 2 4
Totals		110	58	117	51	168
Number of cases on diagnos waiting list	tic	16	14	15	15	30
2. New Cases Seen.						
Referring agencies:—						
Courts or probation officers School Health Service Hospitals or specialists General practitioners Parents Others		4 25 8 13 7 9	5 6 4 4 3	7 24 5 9 6 10	2 7 3 8 5 2	9 31 8 17 11 12
Totals		100	44	107	37	144

Range of intelligence quotients of cases: —

don. cham. Boys. Girls. Total Limited I.Q. 71-85 7 4 7 4 11	Aminge of internig	sence qu	otten	Wimble-					
Limited I.Q. 71-85 7 4 7 4 11 Low average I.Q. 86-95 16 5 12 9 21 Average I.Q. 96-105 26 4 21 9 30 Good average I.Q. 106-115 14 7 16 5 21 Above average I.Q. 116-130 17 4 15 6 21 Superior I.Q. 131-150 7 1 7 1 8 Exceptional I.Q. 151+ Not tested 6 12 17 1 18 Untestable 2 - 2 - 2 Totals 100 38 103 35 138 Action taken:— Consultation and advice 9 13 16 6 22 Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 9 8 1 9 Placement in special schools, etc 9 - 8 1 9 Placement in special schools, etc 9 - 8 1 9 Placement in special schools, etc 9 - 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present: Improved 20 10 15 15 30 Slightly improved 30 - 24 6 30 Not yet improved 32 - 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49					cham.	Boys.	Girls.	Total.	
Low average I.Q. 86-95	Inferior I.Q. below	w 71		5	1	6	-	6	
Good average I.Q. 106-115 14 7 16 5 21 Above average I.Q. 116-130 17 4 15 6 21 Superior I.Q. 131-150 7 1 7 1 8 Exceptional I.Q. 151+	Limited I.Q. 71-8	85			4			11	
Good average I.Q. 106-115 14 7 16 5 21 Above average I.Q. 116-130 17 4 15 6 21 Superior I.Q. 131-150 7 1 7 1 8 Exceptional I.Q. 151+					5				
Above average I.Q. 116-130 17 4 15 6 21 Superior I.Q. 131-150 7 1 7 1 8 Exceptional I.Q. 151+ — — — — — — — — — — — Not tested 6 12 17 1 18 Untestable 2 — 2 — 2 — 2 — 2 — 2 — 2 — 2 — 2 —				26	4		9	30	
Superior I.Q. 131-150 7 1 7 1 8	Good average I.Q.	106-115	5	14			5	21	
Exceptional I.Q. 151+	Above average I.Q	. 116-13	30				6	21	
Not tested				7	1	7	1	8	
Action taken:— Consultation and advice 9 13 16 6 22		51+		_	_	_	-	0.	
Action taken:— Consultation and advice 9 13 16 6 22 Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought 9 — 8 1 9 Periodic supervision 31 8 27 12 39 Other action 9 — 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present: Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49					12		1		
Action taken:— Consultation and advice 9 13 16 6 22 Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought — — — — — — — — — — — — — — — — —	Untestable			2	- 30	2	-	2	
Consultation and advice 9 13 16 6 22 Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought 9 — 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present: Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49		Totals		100	38	103	35	138	
Consultation and advice 9 13 16 6 22 Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought 9 — 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present: Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49				Total Time		1	nivate	Other In	
Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought — — — — — — — — — — — — — — — — —	Action taken:	. 01							
Psychotherapy 9 8 16 1 17 Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc. 9 — 8 1 9 Placement in special schools, etc., being sought — 3 9	Consultation and	advice		9	13	16	6	22	
Placed on waiting list for pyschotherapy 29 2 22 9 31 Remedial tuition 1 1 - - 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc. 9 - 8 1 9 Placement in special schools, etc., being sought -				9		16	1		
Remedial tuition 1 — — 1 1 Casework with parents only 3 2 3 2 5 Placement in special schools, etc. 9 — 8 1 9 Periodic supervision 31 8 27 12 39 Other action 9 — 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present:- Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 <td></td> <td>ng list</td> <td>for</td> <td></td> <td></td> <td></td> <td></td> <td></td>		ng list	for						
Casework with parents only 3 2 3 2 5 Placement in special schools, etc 9 — 8 1 9 Placement in special schools, etc., being sought	pyschotherapy			29	2	22	9	31	
Placement in special schools, etc. 9 8 1 9 Placement in special schools, etc., being sought - - - - - - - - - - - - - - - - -	Remedial tuition			1	_	_	1	1	
etc 9 — 8 1 9 Placement in special schools, etc., being sought				3	2	3	2	5	
etc., being sought Periodic supervision 31 8 27 12 39 Other action 9 - 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present:- Improved 20 10 15 15 30 Slightly improved 30 - 24 6 30 Not yet improved 32 - 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49	etc			9	line :	8	1	9	
Periodic supervision Other action 31 8 27 12 39 Other action 9 - 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present:- Improved 20 10 15 15 30 Slightly improved 30 - 24 6 30 Not yet improved 32 - 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49			ools,						
Other action 9 6 3 9 Totals 9 — 6 3 9 Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present: Improved 20 10 15 30 24 6 30 24 6 30 11 32 21 11 32 18 1 16 3 11 Totals 100 11 76 35 111 3 <th c<="" td=""><td></td><td></td><td></td><td>21</td><td>-</td><td>27</td><td>12</td><td>20</td></th>	<td></td> <td></td> <td></td> <td>21</td> <td>-</td> <td>27</td> <td>12</td> <td>20</td>				21	-	27	12	20
Totals 100 33 98 35 133 Results of action taken insofar as it is possible to judge at present:- Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49		on			8				
Results of action taken insofar as it is possible to judge at present:- Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49	Other action			9	15710	0	3	9	
Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49		Totals		100	33	98	35	133	
Improved 20 10 15 15 30 Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49									
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Slightly improved 30 — 24 6 30 Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49	01								
Not yet improved 32 — 21 11 32 Doubtful 18 1 16 3 19 Totals 100 11 76 35 111 3. Current case-load on 31st December, 1965. Cases under treatment 26 10 24 12 36 Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49							1 TO THE R. P. LEWIS CO., LANSING, MICH.		
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Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49	3. Current case-loc	ad on 31	st De	cember, 1	965.				
Cases under supervision 135 9 106 38 144 Cases awaiting treatment 44 5 30 19 49	Cases under treati	ment		26	10	24	12	36	
Cases awaiting treatment 44 5 30 19 49				135		106	38		
C Seamer Statement of the Committee of t				44			19		
Totals 205 24 160 69 229		Totals		205	24	160	69	229	

4. Summary of Work Involved.	Wimble	- Mit-	
Psychiatrist:—	don.	cham.	Total.
Interviews for diagnosis or assessment	188	16	204
Interviews for treatment	491	153	644
Interviews with parents or guardians	6	32	38
Interview with social worker or other	30.30		
officials Other interviews	13	10	23
Visits, meetings, etc., outside the Clinic	2	10	12
Appointments arranged but not attended	185	42	227
Total	885	263	1148
Psychotherapist:—	3		
Interviews for treatment	95	33	128
Interviews with parents or guardians	_	_	_
Interviews with social workers or other			
officials	_	_	_
Other interviews	- Mill-	_	_
Visits, meetings, etc., outside the Clinic	10	7	17
Appointments arranged but not attended			-
Total	105	40	145
Educational Psychologist (work in sch	nools exce	pted):-	
Interviews with children for examination Interviews with children for remedial	96	10	106
tuition	132	_	132
Interviews with parent or guardian	4	_	4
Interviews with other officials	18	_	18
Visits outside clinic (not schools)	21	_	21
Appointments arranged but not attended	20		20
Total	291	10	301
Psychiatric Social Worker:		700	Di tadik
Interviews with parents or guardians at			
Clinic	767	26	793
Interviews with parents or guardians at			
home	93	3	96
Interviews with children		_	_
Interviews with other workers or officials	61	6	67
Visits to schools, hostels, etc	6	4	10
Other visits	40	2	42
Appointments arranged but not attended	139	7	146
Total	1106	48	1154
(B) THE WORK OF THE EDUCAT IN THE SCHOOLS			
707' 11 1 A		stics for 1	
Wimbledon Area.	Boys.		Total.
I. Number of referrals II. Source of referral—	77	24	101
(a) Chief Education Officer	10	4	14
(b) School	63	20	83
(c) Parent	2	20	2
(d) School Medical Officer	2		2
(d) believe recurear officer	77		101

Total ...

III. Type of school attended—			
		stics for 1	
	Boys.	Girls.	Total.
(a) Nursery	1	1	2
(b) Infant	14	2	16
(c) Junior	49	14	63
(d) Secondary	4	_	4
(e) Grammar	-	1 3 3	1 4
(f) Private	1	3	
(g) To be placed	8	3	11
Total	77	24	101
IV. Main problem—			
(a) Learning	44	15	59
(b) Behaviour	24	5	29
(c) Other	9	4	13
Total	77	24	101
V. Disposal—			
(a) Remedial class	18	8	26
(b) Remedial tuition at the Clinic	2	1	3
(c) Child Guidance Clinic	20	_	25
(general)	30	5	35
(d) Supervision	15)	20
(e) Recommendation for special school	4	1	5
(f) Recommendation to Chief	7	1	2
Education Officer	7	4	11
(g) Recommendation to Prin-	,	-	11
cipal School Medical			
Officer	1	_	1
Total	77	24	101
VI. Supervision from previous years	47	17	64
Supervision from 1965	52	14	66
Total under supervision	99	31	130
VII. Parents of children seen—			
new referrals	22	0	41
Parents of children seen—	32	9	41
under supervision	6	3	9
under supervision	0		,
VIII. Schools-Group Testing for Rema	edial C	lasses—	
12 schools. Number of children 8+			428



