

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

Contributors

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London Borough of Merton

1.	Dr. Didsbury	B.405
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THE HEALTH OF MERTON

1967



1967

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.



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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 Annual Report on the Health of Merton, for the year 1967. Examination of the vital statistics shows that the health of the residents has been good during the year.

As in previous years, although there was an excess of live births over deaths, the Registrar-General's mid-year estimate of population showed a fall of 1,140 from 184,190 for 1966 to 183,050 for 1967. This decrease in population was accentuated by a fall in the live birth rate accompanied by a rise in the death rate. The trend of a falling population to which I have drawn attention in my previous Reports is at an average rate of 1,000 per year, and has persisted since 1950 when the area reached its highest population. In each year since 1950 there has been a fall of population although there has also been a yearly excess of live births over deaths. It is obvious, therefore, that the falling population is due principally to constant migration of population out of the Borough.

There were 2,747 live births in 1967 compared with 2,865 in 1966, a fall of 118, and the birth rate consequently showed a fall from 15.55 per thousand of the population to 15.01. The live birth rate for England and Wales for 1967 was 17.2 compared with 17.7 for 1966. The number of illegitimate live births rose from 218 to 231, and their percentage of live births rose from 7.61 to 8.40, but this is still lower than the percentage for 1965 of 8.55.

The number of infant deaths remained steady at 45, but the reduced number of live births resulted in an increased infant mortality rate of 16.38 per thousand live births compared with 15.53 for 1966. Merton's infant mortality rate of 16.38 still compares favourably with the national rate of 18.3.

The number of still births for 1967 was 36, giving a rate per thousand live and still births of 12.93 compared with 11.81 for 1966. The stillbirth rate for England and Wales was 14.8. The increased stillbirth rate was accompanied by a fall in the early neo-natal mortality rate from 11.52 in 1966 to 11.28 for 1967.

Although there was one less neo-natal death, 36 compared with 37 in 1966, the rate per thousand live births rose from 12.91 in 1966 to 13.10 in 1967—a direct result of the fall in the number of live births during the year.

The peri-natal mortality rate rose from 22.44 in 1966 to 24.07 in 1967 although this increased rate compared favourably with the rate for England and Wales of 25.4.

Deaths during the year showed an increase of 46 from 1,995 in 1966 to 2,041 in 1967 and the death rate consequently increased from 10.83 in 1966 to 11.15 in 1967. The death rate for England and Wales for 1967 was 11.2 per thousand of the population.

There were no serious outbreaks of infectious disease during the year, apart from the usual high incidence of measles which occurs every two years and consequently there were 1,777 cases notified.

So far as the operation of services was concerned, 1967 was a year of steady progress. In March the Developmental Clinic was started at Morden Road Clinic at which Dr. A. R. Worters, the Physician-Superintendent of the Manor Hospital attends and sees, by appointment, young children to advise parents on their possible future mental development. My thanks are due to Dr. Worters for the excellent Specialist Service which he renders to the Authority. Details of the working of this Clinic will be found on page 32.

In May a Clinic for Older People was commenced at Amity Grove Clinic, operated by Dr. Joan Ferreira who has given an interesting review of her year's work at this Clinic on page 42.

In my Annual Report for 1966, I drew attention to the fact that the pilot scheme of 10 cervical smears per week being examined by the Consultant Pathologist at St. Helier Hospital would expand as the Pathology Department of the Hospital was able to provide increased facilities for examination. Early in the year the number of smears taken weekly increased from 10 to 20, and in July was increased to 40 and by the end of the year this increased number was able to cope adequately, not merely with demands for initial examination, but also with the repeat samples called for by the Consultant Pathologist. There was no waiting list at the end of the year.

Apart from the continuing difficulty of recruiting a full complement of Public Health Inspectors, there were no serious staffing shortages during the year. Some difficulty is still experienced in recruiting qualified Social Workers, and it would still seem that the most likely long-term method of ensuring a full establishment of qualified Social Workers will be to provide trainee posts, not merely for those taking the two-year course leading to the Certificate in Social Work Training, but for graduates who are eligible for a one-year post-graduate course qualifying them as specialised Social Workers.

Co-operation with the general practitioner and hospital services, with voluntary and statutory bodies, and with other Departments of the Authority was good throughout the year.

I should like to express my appreciation to the Chairman and Members of the Health Committee for the consideration and courtesy which they have shown to me during the year.

My thanks are also due to all members of the Health Department staff for the loyal and efficient way in which they have carried out their duties during the year. My special thanks are due to Mr. Cockell, the Chief Public Health Inspector, and to 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 help and co-operation at all times.

I have the honour to be,

Your obedient Servant,

P. J. DOODY,
Medical Officer of Health.

COMMITTEES AT 31st DECEMBER, 1967

HEALTH COMMITTEE

The Mayor, Councillor G. W. A. Pearce, J.P.

Councillor (Miss) N. K. Watts (Chairman)

Councillor G. H. Raymond (Vice-Chairman)

Alderman T. H. Metcalf

Councillors:

J. T. Botten (Mrs.) E. M. Davis K. L. Goddard A. S. Hutchin

(Miss) S. Knight J. T. Pyne, J.P. W. Reay W. H. Thurlow

J. Wemms

ENVIRONMENTAL HEALTH SUB-COMMITTEE

Councillor G. H. Raymond (Chairman)

Councillor (Miss) N. K. Watts (Vice-Chairman)

Councillors:

J. T. Botten (Mrs.) E. M. Davis A. S. Hutchin

W. H. Thurlow W. Reay

MENTAL HEALTH SERVICES SUB-COMMITTEE

Councillor J. Wemms (Chairman)

Councillor (Miss) N. K. Watts (Vice-Chairman)

Councillors:

A. S. Hutchin (Miss) S. Knight 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. R. K. Freudenberg).

TOWN CLERK

Sydney Astin (Solicitor)

WHOLE-TIME STAFF

(As at 31st December, 1967)

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	... M. D. Susman, M.B., Ch.B., D.P.H.
Assistant Medical Officers and School Medical Officers	... 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. Maria J. Freeman, M.B., B.S., L.M.S.S.A. Ann E. R. Gonet, M.B., B.S. W. James, M.R.C.S., L.R.C.P. 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. H. W. Freeth, L.D.S., R.C.S., M.R.C.S., L.R.C.P. Isobel A. S. Kennedy, B.D.S. (commen- ced 4.9.67) Ann C. Leonard, L.D.S., R.C.S. (com- menced 25.9.67)
Dental Auxiliary	... Miss A. Chandler
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 M. J. Faraday
Chief Administrative Officer	... W. Atkinson, D.P.A., Cert. S.I.B.
Deputy Chief Administrative Officer	... J. R. Richardson, A.R.I.P.H.H.
Senior Mental Welfare Officer	... F. T. Rainer, Dip.Soc. Science.
Deputy Senior Mental Welfare Officer	... F. J. Gerring

Mental Welfare Officers	...	Mrs. J. Barber, S.R.N., S.C.M. F. C. Dorrington Miss D. A. Tilt, Dip. Soc. Studies, Dip. Mental Health S. G. H. Worrall Mrs. H. Yates, S.R.N., Cert. in Applied Social Studies
Mental Health Social Worker	...	Mrs. F. M. Coleman, Dip.Soc. Studies & Soc. Admin.
Senior Social Worker	...	Mrs. M. A. Tripet, S.R.N., H.V. Cert., Dip. Soc. Studies
Social Worker	...	Mrs. M. J. Jacks, B.Sc. (Hons. Socio- logy) (commenced 4.9.67)
Supervisor, Junior Training Centre	...	Mrs. M. Barlow, Dip.N.A.M.H.
Educational Psychologists	...	Mrs. M. J. Badawi, B.A. (Hons.), Lond., Post-Graduate Diploma in Psychology Miss D. Waldeck, B.A. (Liverpool), Dip. N.A.M.H. (Lond.)
Psychiatric Social Workers	...	Miss M. F. Bosanquet, B.A. (Hons.) London Mrs. A. Litauer, Mental Health Diploma, London, Social Science Diploma, London Mrs. I. Windebank (commenced Sept., 1967)
Speech Therapists	...	Miss F. M. Cameron, L.C.S.T. (com- menced 23.1.67) Miss G. M. Stephenson, L.C.S.T.

PART-TIME STAFF

(As at 31st December, 1967)

Chest Physicians	...	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	...	J. M. McKeogh, L.R.C.P.I., L.R.C.S.I., D.O.M.S., (commenced 12.5.67) M. H. Malik, M.B., B.S., D.O. (Eng.), F.R.C.S. 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 Psychiatrist	...	D. Rumney, M.R.C.S., L.R.C.P., D.P.M.
Assistant Medical Officers and School Medical Officers	...	Cicily M. Clarke, M.A., M.B., Ch.B., D.C.H. Dorothy S. Critchley, M.D., M.B., B.S., M.R.C.S., L.R.C.P., D.C.H. Hilda C. Dean, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. E. G. Evans, M.A., M.B., M.R.C.S., L.R.C.P., B.Chir. Joan D. Ferreira, M.R.C.S., L.R.C.P. (commenced 3.5.67) Joyce M. Havelock, M.B., B.S., M.R.C.S., L.R.C.P., C.P.H. Norah C. Johns, M.B., B.S., M.R.C.S., L.R.C.P. Karen I. Parkes, M.D., M.B., B.S., F.R.C.S. M.R.C.S., L.R.C.P. Susan M. S. Turner, M.B., Ch.B., D.P.H.
School Dental Officers	...	Elizabeth W. Beaver, B.Ch.D. Cynthia A. Cesar, L.D.S., R.C.S., B.D.S. Sheila McDonald, L.D.S. M. G. Smith, L.D.S., R.C.S. P. Turnbull, B.D.S.
Dental Orthodontists	...	Linda R. Read, B.D.S., L.D.S., R.C.S. (commenced 10.1.67) N. Upson, L.D.S., R.C.S., D.Orth. 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. K. B. McKay, M.R.C.S., L.R.C.P. R. G. Smith, M.B., B.S., M.R.C.S., L.R.C.P., D.A., D.Obst.R.C.O.G.

Dental Auxiliary	...	Mrs. V. Hibbert
Speech Therapists	...	Mrs. S. J. Gold, L.C.S.T. Miss P. J. Lewis-Owen, L.C.S.T.
Audiometrician	...	Mrs. M. Dean, S.R.N.
Physiotherapists	...	Mrs. B. S. Fenner, M.C.S.P. (commen- ced 18.4.67) 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, Dip. in Sociology Mrs. A. Martin, B.A. (Hons.), H.O. Training Certificate Miss E. M. Smith, S.R.N., S.C.M., Dip.Nsg.
Medical Social Worker	...	Mrs. S. N. Coles

		Population:	
		1967	1968
Totals		45	45
Males		19	27
Females		18	12
Totals		37	39
Males		7	5
Females		1	1
Totals		8	6
Infant Mortality Rate per 1,000 live births		16.38	15.53
Infant Mortality Rate per 1,000 legitimate live births		17.88	14.73
Infant Mortality Rate per 1,000 illegitimate live births		34.20	27.52
Neo-Natal Deaths (Deaths of infants in first 28 days of life)		36	37
Neo-Natal Mortality Rate		13.10	12.91
Early Neo-Natal Mortality Rate (deaths of infants in first week of life per 1,000 live births)		11.28	11.52
Perinatal Mortality Rate (Still-births plus deaths in first week of life per 1,000 live and still-births)		24.07	22.44
Total loss of infant life (Still-births plus infant deaths) per 1,000 live and still-births		29.10	26.58
Maternal Deaths (including abortion)		1	3
Maternal Mortality Rate per 1,000 live and still-births		0.36	1.04
Deaths		2041	1995
Death Rate per 1,000 population		11.15	10.83
Corrected Death Rate per 1,000 population		10.93	10.83

GENERAL PUBLIC HEALTH SERVICES

General Information

Area of Borough in acres	...	...	...	9,379
Number of private dwellings (1961)	...	...	...	59,482
Number of private households (1961)	...	...	...	64,219
Rateable value, at 1st April, 1967	£11,242,943

Actual product of a penny rate:—

1966/67	£44,606
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Estimated product of a penny rate:—

1967/68	£45,350
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Population:—

Census figure (1961)	186,647
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Registrar-General's Estimate of Population				1967	1966
at 30th June	183,050	184,190

Summary of Vital Statistics

					1967	1966
Live Births—						
Legitimate: Males					1295	1368
Females					1221	1279
					2516	2647
Illegitimate: Males					112	104
Females					119	114
					231	218
Totals					2747	2865
Live Birth Rate per 1,000 population					15.01	15.55
Corrected Live Birth Rate per 1,000 population					15.11	16.17
Illegitimate live births—percentage of total live births					8.40	7.61
Still Births—						
Legitimate: Males					15	19
Females					18	9
					33	28
Illegitimate: Males					—	4
Females					3	—
					3	4
Totals					36	32
Still-birth Rate per 1,000 live and still-births					12.93	11.81
Still-birth Rate per 1,000 population					0.20	0.17
Total live and still-births					2783	2897
Infant Mortality (Deaths of infants under one year of age)—						
Legitimate: Males					19	27
Females					18	12
					37	39
Illegitimate: Males					7	5
Females					1	1
					8	6
Totals					45	45
Infant Mortality Rate per 1,000 live births					16.38	15.53
Infant Mortality Rate per 1,000 legitimate live births					17.88	14.73
Infant Mortality Rate per 1,000 illegitimate live births					34.20	27.52
Neo-Natal Deaths (Deaths of infants in first 28 days of life)					36	37
Neo-Natal Mortality Rate					13.10	12.91
Early Neo-Natal Mortality Rate (deaths of infants in first week of life per 1,000 live births)					11.28	11.52
Perinatal Mortality Rate (Still-births plus deaths in first week of life per 1,000 live and still-births)					24.07	22.44
Total loss of infant life (Still-births plus infant deaths) per 1,000 live and still-births					29.10	26.58
Maternal Deaths (including abortion)					1	3
Maternal Mortality Rate per 1,000 live and still-births					0.36	1.04
Deaths					2041	1995
Death Rate per 1,000 population					11.15	10.83
Corrected Death Rate per 1,000 population					10.93	10.83

Deaths from Bronchitis per 1,000 population ...	1967	1966
Deaths from Pneumonia per 1,000 population ...	0.49	0.57
Deaths from Cancer of lung and bronchus per 1,000 population ...	0.82	0.57
Deaths from other forms of Cancer per 1,000 population ...	0.69	0.76
Marriages ...	1.84	1.69
Marriage Rate per 1,000 population ...	1447	1481
	7.9	8.0

Corrected Death Rate per 1,000 population ...	10.93	10.83
Death Rate per 1,000 population ...	11.15	10.83
Maternal Mortality Rate per 1,000 live and still-births ...	20.41	19.92
Maternal Deaths (including abortion) ...	0.36	1.04
deaths) per 1,000 live and still-births ...	1	3
Total loss of infant life (Still-births plus infant first week of life per 1,000 live and still-births)	29.10	26.58
Perinatal Mortality Rate (Still-births plus deaths in first week of life per 1,000 live births)	24.07	23.44
Early Neo-Natal Mortality Rate (deaths of infants of life)	11.38	11.32
Neo-Natal Mortality Rate	13.10	12.91
Neo-Natal Deaths (Deaths of infants in first 28 days Infant Mortality Rate per 1,000 live births	34.20	32.52
Infant Mortality Rate per 1,000 legitimate live births	17.88	14.73
Infant Mortality Rate per 1,000 live births	16.38	12.53
Totals ...	42	42
Illegitimate: Males	1	6
Illegitimate: Females	8	39
Legitimate: Males	7	12
Legitimate: Females	37	27
of age) —	18	19
Infant Mortality (Deaths of infants under one year	12.93	11.81
Still-birth Rate per 1,000 population	0.50	0.17
Still-birth Rate per 1,000 live and still-births	12.93	11.81
Totals ...	35	32
Illegitimate: Males	3	4
Illegitimate: Females	89/3501	88/3501
Legitimate: Males	18	19
Legitimate: Females	33	28
Still Births —	15	16
Illegitimate live births—percentage of total live births	15.11	16.17
Corrected Live Birth Rate per 1,000 population	15.11	16.17
Live Birth Rate per 1,000 population	15.11	16.17

Causes of Death at different Periods of Life in the London Borough of Merton during 1967

CAUSE OF DEATH	AGE GROUP AND SEX														TOTALS							
	Under 4 weeks		4 Wks. & under 1 year		1 to 5 years		5 to 15 years		15 to 25 years		25 to 35 years		35 to 45 years				45 to 55 years		55 to 65 years		65 to 75 years		75 years and over
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Tuberculosis: Respiratory	-	-	-	-	-	-	-	-	-	-	-	1	1	6	-	1	-	1	-	9	1	
Syphilitic Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	-	2	2		
Other infective and parasitic diseases	-	-	-	-	1	-	-	-	-	-	-	-	-	1	1	-	-	-	-	2	1	
Malignant neoplasm: Stomach	-	-	-	-	-	-	-	-	-	-	-	1	2	9	1	13	8	8	10	31	21	
Malignant neoplasm: Lung, bronchus	-	-	-	-	-	-	-	-	-	1	-	12	3	39	3	39	9	17	4	108	19	
Malignant neoplasm: Breast	-	-	-	-	-	-	-	-	-	-	-	-	9	-	17	-	11	-	9	-	46	
Malignant neoplasm: Uterus	-	-	-	-	-	-	-	-	-	2	-	1	-	5	-	2	-	4	-	-	14	
Other malignant and Lymphatic neoplasms	-	-	-	-	-	1	-	1	-	2	-	4	2	8	14	31	23	37	29	34	24	
Leukaemia: Aleukaemia	-	-	-	-	-	-	-	-	1	1	1	1	1	3	-	1	1	1	3	8	7	
Diabetes	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2	2	2	3	3	8	7	
Vascular lesions of nervous system	-	-	-	-	-	-	-	-	-	1	-	1	-	4	8	16	17	38	47	97	72	
Coronary Diseases: Angina	-	-	-	-	-	-	-	-	-	-	8	-	28	5	77	23	90	62	86	133	289	
Hypertension with Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	5	8	6	
Other Heart Diseases	-	-	-	-	-	1	-	-	-	-	-	2	2	8	6	10	13	29	73	50	94	
Other Circulatory Diseases	-	-	-	-	-	-	-	-	-	1	1	2	1	10	1	14	9	22	39	49	51	
Influenza	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	
Pneumonia	3	1	2	-	1	-	-	-	1	-	-	1	3	3	2	10	6	49	68	69	82	
Bronchitis	-	-	-	-	-	-	1	-	-	-	-	3	1	8	2	34	6	24	10	70	19	
Other Diseases of the Respiratory System	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	5	2	3	4	10	6	
Ulcer of Stomach and Duodenum	-	-	-	-	-	-	-	-	-	2	-	1	-	3	-	4	3	-	5	7	11	
Gastritis, Enteritis and Diarrhoea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	4	1	2	4	6	6	
Nephritis and Nephrosis	-	-	-	-	-	-	-	1	1	-	-	1	1	2	-	1	-	2	3	7	5	
Hyperplasia of Prostate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2	-	4	-	
Pregnancy: Childbirth, abortion	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	
Congenital Malformations	1	4	1	1	1	1	-	-	-	-	-	1	-	-	-	2	1	-	1	7	8	
Other defined and ill-defined diseases	15	12	-	-	1	-	-	1	-	2	2	-	1	1	7	10	10	4	16	14	39	
Motor Vehicle accidents	-	-	-	-	-	1	-	2	-	4	-	1	1	1	-	2	1	-	1	7	2	
All other accidents	-	-	4	1	-	-	-	2	-	-	-	2	1	1	2	2	1	2	2	-	9	
Suicide	-	-	-	-	-	-	1	-	2	-	3	2	3	5	2	2	6	3	1	-	18	
Homicide and operations of war	-	-	-	-	1	1	-	-	1	-	-	1	-	-	-	-	-	-	-	2	2	
ALL CAUSES	19	17	7	2	4	3	4	3	7	2	13	4	21	17	67	63	230	119	300	227	357	555

Comparative Statistics, 1967

	Merton	England and Wales
<i>Rates per 1,000 Population :</i>		
Live births	15.01	17.2
Deaths (all causes)	11.15	11.2
Respiratory tuberculosis	0.05	0.04
Cancer of lung and bronchus	0.69	0.58
<i>Rates per 1,000 live and still births :</i>		
Still births	12.93	14.8
Maternal mortality	0.36	0.20
Perinatal mortality	24.07	25.4
<i>Rates per 1,000 live births :</i>		
Infant mortality—deaths of infants under 1 year	16.38	18.3
Neo-natal mortality—deaths of infants in first 28 days of life	13.10	12.5
Early neo-natal mortality—deaths in first week of life	11.28	10.8

Principal causes of Death in order of Frequency

Out of 2,041 deaths occurring during the year 1,841 were attributable to the undermentioned principal causes:—

	No. of Deaths.	Percentage of Deaths from all causes.
1. Heart Diseases	672	32.9
2. Cancer	464	22.7
3. Vascular lesions of the nervous system	229	11.2
4. Pneumonia	151	7.4
5. Other defined and ill-defined causes	136	6.6
6. Other Circulatory Diseases ...	100	5.0
7. Bronchitis	89	4.4

INFANT DEATHS (Under 1 year)

Principal certified causes of death	Age at Death									Total
	Under 24 hours	Days				Months				
		1- 7	8- 14	15- 21	22- 28	1- 3	3- 6	6- 9	9- 12	
Prematurity	13	7	-	-	1	-	-	-	-	21
Congenital Malformations ...	2	2	1	-	-	1	-	-	1	7
Broncho-pneumonia	-	1	1	-	-	1	-	-	1	4
Birth Injuries	1	1	-	-	-	-	-	-	-	2
Other causes	1	5	-	2	-	3	-	1	-	12
Totals	17	16	2	2	1	5	-	1	2	46

INFANT MORTALITY

Of the 46 infant deaths, 33 occurred in the first seven days of life. One of these was delivered at home and lived only eight hours. It was a non-viable male foetus of only 26 weeks gestation. The death occurred in hospital.

The infant mortality rate of 16.38 per 1,000 live births compares satisfactorily with the rate of 18.3 for England and Wales.

PERINATAL MORTALITY

The perinatal mortality rate for Merton was 24.07 per 1,000 live and still-births thus comparing favourably with that for England and Wales of 25.4.

MATERNAL MORTALITY

There was one maternal death during the year which occurred in hospital. Details are given below:—

Age at death.	Cause of Death.	Remarks.
39 yrs.	Amniotic embolus cardiac arrest; renal failure.	Married woman: died three weeks after delivery of a stillborn child.

CONTROL OF COMMUNICABLE DISEASES

Notifications received during 1967
(Corrected Notifications)

Disease	Age Groups of Cases Notified									Total
	Under 1	1-2	3-4	5-9	10-14	15-24	25-44	45-64	65 & over	
Measles	71	492	569	592	29	14	10	—	—	1777
Scarlet Fever	—	7	15	33	4	—	1	—	—	60
Pneumonia	—	1	—	—	1	—	3	7	9	21
Puerperal Pyrexia	—	—	—	—	—	1	1	—	—	2
Whooping Cough	10	25	34	28	6	4	10	—	—	117
Dysentery	—	5	3	7	—	4	1	—	—	20
Tuberculosis (Resp.):										
Males	—	—	—	—	—	3	5	10	9	27
Females	—	—	—	—	—	5	4	4	1	14
Tuberculosis (Non-Resp.):										
Males	—	—	—	—	—	—	—	1	—	1
Females	—	—	—	—	—	—	—	1	1	2
Erysipelas	—	—	—	—	—	—	—	3	1	4
Food Poisoning	—	—	1	—	—	1	1	—	—	3
Acute encephalitis (infective)	—	1	—	—	—	—	—	—	—	1
Malaria	—	—	—	—	—	1	—	—	—	1
Totals	81	531	622	660	40	33	36	26	21	2050

Twelve persons, living within the Borough, attended a party, one of the guests at which was subsequently found to be a case of typhoid fever. The contacts were kept under surveillance for the incubation period and specimens were taken, all of which proved negative in result.

Nine contacts of other single cases of typhoid, all contracted abroad, were also investigated, with the same result.

A case of sonné dysentery occurred in a 'half-way house' in the Borough and all families living in the house were investigated. It was found that only two persons in one family were affected and they were quickly cleared.

Three children living in the Borough and attending a special school in a neighbouring borough where there was an outbreak of sonné dysentery, were also investigated. Two were cleared quickly but in the remaining case it was found that four other children in the family were also positive and the investigation continued for nine weeks before all were cleared.

There was an outbreak of dysentery at a residential nursery situated within the Borough, but belonging to the London Borough of Brent. Specimens were taken from 27 children and 18 staff which showed that six children and four of the staff were suffering from sonné dysentery. All were fairly quickly cleared up, with the exception of one child who remained positive for three months.

Two other outbreaks of diarrhoea and/or sickness were also investigated, one in Cannizaro Old People's Home and one in Rowan Secondary Girls' School. Both were short lived and in neither case could a causative organism be isolated.

Following the occurrence of a case of smallpox in a neighbouring borough, it was discovered that there were three contacts living in this area. All were kept under daily surveillance during the incubation period and all remained in good health.

Seventeen cases of persons arriving in the district without a valid International Certificate of Vaccination were also kept under surveillance for the required period.

Food Poisoning

Three notified cases were confirmed during the year, one of salmonella typhimurium, one of salmonella derby and one unusual case in which the organisms of salmonella typhimurium and salmonella panama were both present. The first two cases were of short duration but the last continued for more than three months.

Two cases of salmonella indiana, in infants living in the Borough but diagnosed in a hospital outside the Borough, were also under investigation. One started in August and one in November and neither was clear at the end of the year. This is an infection which is generally tenacious in the case of infants. The two cases are not connected, so far as can be found.

TUBERCULOSIS

Chest Clinics

There are three chest clinics serving the Borough. All are based at Cumberland Hospital, Mitcham. At these clinics the Tuberculosis Health Visitors assist the Chest Physicians, and help and advise the patients. They do Mantoux tests and follow-up contacts on patients who fail to attend. During 1967 the case load of Tuberculosis Health Visitors was as follows:—

Cases of tuberculosis ...	...	...	...	569
Lung carcinoma cases ...	...	...	...	68
Other cases (bronchitis, bronchiectasis, etc.) ...	...	...	...	116

The new cases examined at the Chest Clinics in 1967 are analysed in the table below:—

	Respiratory			Non-Respiratory			Total
	M	F	Under 15 yrs.	M	F	Under 15 yrs.	
Diagnosed Tuberculous	22	10	—	—	3	—	35
Non Tuberculous	467	337	147	—	—	—	951

Domiciliary Visiting

Home visiting is very important. Chest patients have many queries and difficulties which the Tuberculosis Health Visitor helps to solve, and she also gives advice on matters of hygiene and the essential examination of contacts. The number of tuberculosis households visited during the year was 314.

Details of domiciliary visiting by Health Visitors are given below:—

Visits in connection with old cases	...	997
Visits in connection with new cases	...	35
Visits in connection with contacts	...	154
Total	...	1186

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	...	1763
Number found negative	...	1653
Number vaccinated with B.C.G.	...	1649

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

Ninety-four of the children with positive skin tests were X-rayed. No case of active disease was found.

Incidence of Tuberculosis

Primary notifications of tuberculosis received during the year were as follows:—

	Males.	Females.
Respiratory	27	14
Non-respiratory	1	2

The table below shows the state of the Tuberculosis Register at the beginning and end of the year:—

	Respiratory		Non-Respiratory		Total	
	M	F	M	F	M	F
No. of cases on Register at 1.1.67	441	284	27	41	725	68
Primary Notifications in 1967	27	14	1	2	41	3
Inward transfers in 1967	27	12	1	3	40	4
Totals	495	310	29	46	806	75
Died during 1967	21	2	1	—	23	1
Recovered during 1967	58	38	2	4	96	6
Transferred out in 1967	30	17	—	3	47	3
No. of cases on Register 31.12.67	386	253	26	39	640	65

Two hundred and forty-six contacts were examined for the first time during the year and one was found to be tuberculous.

Mass X-Ray

The Mass Radiography Unit of the Regional Hospital Board, in addition to providing a regular service for general practitioners, carried out surveys on industrial sites, 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:—

	Number X-rayed		Pulmonary T.B. found		Primary Lung Cancer found	
	Males	Females	Males	Females	Males	Females
General Practitioner Service	965	790	4	—	10	1
Public and Industrial Sessions	9,495	6,873	13	4	7	3
Totals	10,460	7,663	17	4	17	4

The figures in respect of public and industrial sessions do not apply to Merton residents only, as the service is available to any member of the public.

Deaths

There were nine deaths from respiratory tuberculosis during the year. The table of causes of death on page 16 gives an analysis by age and sex.

The death rates per 1,000 population were 0.05 respiratory and nil non-respiratory, compared with 0.04 and 0.005 respectively for England and Wales. The comparable figures for the Borough for 1966 were 0.04 and 0.005.

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 use of prophylactics against diphtheria, smallpox, whooping cough, poliomyelitis and tetanus:—

Disease against which protection given	Number of primary courses given						Total
	Year of Birth					Others under 16 years	
	1967	1966	1965	1964	1960/63		
Diphtheria ...	945	1,284	147	33	67	17	2,493
Whooping Cough...	945	1,277	145	32	43	2	2,444
Poliomyelitis (By injection) ...	—	1	2	1	1	—	5
Poliomyelitis (Oral)	941	1,785	227	53	117	12	3,135
Tetanus ...	945	1,283	147	33	78	93	2,579

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.

Reinforcement Measures

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

Diphtheria ...	4828
Whooping Cough ...	1786
Poliomyelitis ...	1625
Tetanus ...	4012

Poliomyelitis

At the end of the year, 85,756 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 1943-67 ...	57,669
Persons born 1933-42 ...	15,791
Others ...	12,296
Total ...	85,756

Fourth Injection

At the end of the year 21,595 children, aged not less than five years and not more than 13 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							Total
	0-3 months	3-6 months	6-9 months	9 months -1 year	1 year	2-4 years	5-15 years	
Number vaccinated ...	8	11	9	29	1,414	235	46	1,752
Number re-vaccinated ...	—	—	—	—	—	10	57	67

VENEREAL DISEASES

The table below is compiled from figures supplied by the clinics listed and shows the number of patients resident in Merton who were treated for the first time in 1967:—

Clinic	Number of new cases seen during year				
	Total all conditions	Syphilis		Gonorrhoea	Other
		Primary & Secondary	Other		
Croydon General Hospital ...	33	—	1	8	24
Dreadnought Seamen's Hospital ...	5	1	—	1	3
London Hospital ...	7	—	—	1	6
St. Bartholomew's Hospital ...	7	—	1	—	6
St. Helier Hospital ...	219	1	5	30	183
St. Thomas's Hospital ...	121	2	—	25	94
Westminster Hospital ...	13	—	—	1	12
Totals ...	405	4	7	66	328

GENERAL MEDICAL SERVICES

During the year the medical staff carried out 862 medical examinations of staff for superannuation purposes. Eight examinations were also carried out on staff, absent from work owing to sickness, to ascertain their fitness to return to duty.

NATIONAL ASSISTANCE ACTS

The Medical Officer of Health and his Deputy, are authorised by the Council to act under Section 47 of the National Assistance Act, 1948, or, in conjunction with a general practitioner under Section 1 of the National Assistance (Amendment) Act, 1951, in connection with the removal to hospital or other suitable accommodation of persons

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					
	Live		Still		Total		Live		Still		Total		Live		Still		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Births notified as occurring in Merton	183	182	1	—	184	182	1241	1187	13	14	1254	1201	1424	1369	14	14	1438	1383
Births occurring outside Merton attributable to Merton (Inward Transfers)	1	—	—	—	1	—	653	652	10	15	663	667	654	652	10	15	664	667
Total of all births notified	184	182	1	—	185	182	1894	1839	23	29	1917	1868	2078	2021	24	29	2102	2050
Births occurring in Merton attributable to other Authorities (Outward Transfers)	1	1	1	—	2	1	657	681	9	7	666	688	658	682	10	7	668	689
Total births attributable to Merton	183	181	—	—	183	181	1237	1158	14	22	1251	1180	1420	1339	14	22	1434	1361

PERSONAL HEALTH SERVICES

MATERNAL AND CHILD-CARE

General

Maternal and Child Care Services are operated in nine purpose-built 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 five 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 ...	306
Number of women who attended for post-natal examination ...	36

There were 318 midwives' clinic sessions at which 431 women attended. The total number of attendances was 2,543.

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 numbers of women who attended were:—

Booked for hospital confinement ...	412
Booked for domiciliary confinement ...	54
Total ...	466

The total number of attendances was 2,432.

Premature Infants

The total number of premature infants born in the area during 1967 was 197.

Twenty-seven premature infants died during 1967. This means that 13.7% of the 197 premature infants born during the year died within a year. Less than 1.0% of full-term babies died before reaching the age of one year.

Premature Infants Born at Home—

Weight at Birth	Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Grand Total
	Total	Died within 24 hrs of birth	Survived 28 days	Total	Died within 24 hrs of birth	Survived 28 days	
2 lb. 3 oz. or less	—	—	—	1	1	—	1
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	—	—	—	—	—	—	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	—	—	—	—	—	—	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	1	—	1	—	—	—	1
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	8	—	8	—	—	—	8
Totals	9	—	9	1	1	—	10

CHILD WELFARE

General

The Local Authority holds Infant Welfare Centres at the fourteen premises listed below. Nine of these are purpose-built, the remainder are 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.

Infant Welfare Centres being operated at the end of the year were as follows:—

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

Emmanuel Hall*	Thursday	2-4 p.m.
Lingfield Road, S.W.19		
Grand Drive Clinic	Monday	10-12 a.m. and
Raynes Park		2-4 p.m.
	Wednesday	10-12 a.m.
Meopham Road Clinic	Wednesday	1.30-3.30 p.m.
Mitcham		
Middleton Road Clinic	Tuesday	2-4 p.m.
Morden	Friday	2-4 p.m.
Morden Road Clinic	Tuesday	2-4 p.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		
St. John's Hall*	Thursday	9.45-11.45 a.m.
High Path, Merton		
St. Luke's Hall*	Friday	2-4 p.m.
Strathmore Road, S.W.19		
Wide Way Clinic	Monday	1.30-3.30 p.m.
Mitcham	Thursday	9.30-11.30 a.m.

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

* Denotes hired premises.

Attendances at Infant Welfare Centres

Name of Centre	Total No. of Sessions	First Attendances				Total Attendances including Firsts
		Born In			Total 1962-67	
		1967	1966	1962-65		
Amity Grove ...	100	224	507	375	1,106	4,879
Cavendish Road	99	155	86	144	385	3,927
Church Road ...	104	236	261	246	743	4,135
Churchill Hall ...	51	100	50	117	267	3,398
Emmanuel Hall	52	117	88	103	308	2,214
Grand Drive ...	148	309	307	368	984	7,673
Meopham Road	52	76	84	105	265	2,041
Middleton Road	102	100	62	199	361	2,805
Morden Road ...	103	158	175	222	555	3,501
Pelham Road ...	102	290	249	225	764	5,751
St. Barnabas Hall	51	243	264	203	710	4,015
St. John's Hall ...	52	68	84	134	286	1,945
St. Luke's Hall...	50	126	106	155	387	2,310
Wide Way ...	99	207	257	191	655	3,900
Totals ...	1,165	2,409	2,580	2,787	7,776	52,494

A total of 7,776 children attended during the year.

Attendances at Toddlers' Clinics

First Attendances				Total Attendances	Total Sessions (All Clinics)
Born In			Total 1962-67		
1967	1966	1962-65			
—	41	1233	1274	2084	194

Dental Care

During the year, Birthday Greetings cards have been sent to three-year-olds with a covering letter to parents suggesting a dental check-up and giving information about local dental clinics.

Many parents have expressed appreciation of these and although no great rush of patients has been experienced in the clinics, it is felt that this early alerting of parents to the necessity of preventive treatment for their children early in life is well worth while.

In spite of many staff changes due to retirement and sickness, the improvement shown last year in the number of sessions devoted to priority services and to the volume of work carried out, was maintained in 1967.

	Examined	Commenced treatment	Completed course of treatment
Expectant and Nursing Mothers	45	40	34
Children under 5	577	398	355

	Scaling and gum treatment	Fillings	Teeth otherwise conserved	Cr's and Inlays	Extractions	General Anaesthetics	Dentures		X-Rays
							Full	Part	
Expectant and Nursing Mothers	34	157	—	1	8	3	4	1	9
Children under 5 ...	168	1001	507	—	58	32	—	—	10

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	44.2
Middleton Road Day Nursery ...	9	30	39	28.4

At the end of the year there were twenty-one private day nurseries registered under the Nurseries and Child Minders Regulation Act, with a total of 518 places. In addition there were eight daily minders on the register.

Developmental Clinic

A monthly Developmental Clinic for young children was commenced on 9th March at Morden Road Clinic, at which Dr. A. R. Worters, Physician-Superintendent at the Manor Hospital, Epsom, attends, and where parents may bring young children, by appointment, for examination and advice on their mental development. Dr. Worters is assisted at this Clinic by an Assistant Medical Officer, a Health Visitor, a Speech Therapist from the Manor Hospital, and a Mental Health Social Worker.

Seven sessions were held during the year at which 28 children were seen for the first time, and nine children were seen for a second time for a case review.

Care of Unmarried Mothers and their Children

Thirty-three cases 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 following malformations were notified during the year:—

Central nervous system	...	...	13
Eye, ear	...	...	3
Alimentary system	...	...	4
Uro-genital system	...	...	3
Limbs	...	...	18
Other skeletal	...	...	2
Other malformations	...	...	8
Total	...	...	51

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.R.V.S. Centres in Merton and Mitcham.

Sales for the year 1967 are shown below:—

National Dried Milk	...	21,760 tins
Cod Liver Oil	...	3,840 bottles
Vitamins 'A' and 'D'	...	4,002 packets
Orange Juice	...	60,087 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.
- 26 Full-time Health Visitors.
- 4 Part-time Health Visitors.
- 1 Part-time Geriatric Health Visitor.
- 1 Full-time Tuberculosis Health Visitor.
- 1 Part-time Tuberculosis Health Visitor.
- 2 Part-time Tuberculosis Visitors.
- 3 Student Health Visitors.

Eight Health Visitors left the Service during 1967. Three retired, two left on marriage and of the remainder, one went to Northumberland as her husband's work was removed to that area, one to nurse in Zambia and the third to do classroom teacher's duties in Aberdeen prior to commencing training as a Health Visitor tutor.

Six Health Visitors joined the staff during 1967, including two students who qualified as Health Visitors in September, 1967. There were two vacancies at the end of the year but the areas were covered by temporary part-time Health Visitors. Three students began training in September, 1967, two at the University of Surrey and one at Ewell Technical College, Surrey County Council.

Health Visitors' Duties

The work of the Health Visitors has broadened considerably during the year. The emphasis is still on home visiting of the family, but certain aspects of the work have been developed and appear to be much appreciated by the public.

It has long been felt that more could be done for ante-natal mothers and their husbands, and, therefore, on one evening in each month during 1967 a film on the birth of a baby was shown in Morden Library. An average of twenty couples attended each showing and took part in the discussion that followed. As this pilot scheme proved successful a series of Fathercraft classes was given in October as a joint project of Midwives and Health Visitors. These film shows and classes are now to become permanent features.

There was a change in the arrangements for Toddler Clinics during the year. In the past an appointment was made only at the request of the mother, and it was felt, therefore, that many children who needed to be seen never came to these sessions. It was decided that all children in the Borough should be sent an invitation for a complete examination at the age of three years, and children 'at risk' should have additional examinations at the ages of two and four. As a result of this the number of Toddler sessions was doubled in 1967 and the attendances rose from 965 to 2084.

The scope of Health Visiting is always widening and there are always ways in which Health Visitors can increase their value to families in the area. Certain services have to be adjusted and curtailed as their use becomes less important, and the Health Visitor's time must be arranged to cover work with the new priority groups.

It is to be hoped that this pattern is being successfully carried out, bearing in mind that home visiting of families is always the first priority.

Training of Health Visitors

Health Visitors in the Borough who are qualified as Fieldwork Instructors continued to receive students attached for training or for observation purposes during the year from various centres.

'In-Service' training of Health Visitors was continued. Five Health Visitors attended post-graduate refresher courses, two undertook training as Fieldwork Instructors, and one attended a weekend course in Psychoprophylaxis to enable her to take classes for ante-natal mothers in 'Preparation for Childbirth'.

In addition Health Visitors attended several one-day or half-day conferences on subjects of special interest.

Summary of Work of Health Visitors

The following table shows the number of cases in the various categories visited by the Health Visitors in 1967:—

Category.	Number of cases visited.
Children born in 1967	2,812
Children born in 1966	3,324
Children born in 1962/5	8,847
Total born 1962/7	14,983
Number of people aged over 65 visited	529
Number of mentally disordered people	168
Total visits	15,680

Attendances at Clinics and Centres:—

No. of attendances at Infant Welfare Centres	2,220
No. of attendances at Ante-natal and Post-natal Clinics	284
No. of attendances at Mothercraft Sessions	327
No. of attendances at Parentcraft Classes	223
No. of attendances at Toddler Clinics	204
No. of attendances at Geriatric Clinics	35
No. of attendances at G.P. Clinics	172

The immigrant population in Merton is now quite a sizeable one and verbal communication is sometimes a problem, although the Health Visitors are helped by certain pamphlets on feeding, etc., which are printed in Urdu and other languages. Some Health Visitors have become quite expert in miming.

General Practitioner Attachments

The general practitioner attachments are proving helpful both to the patients and to the Doctors and Health Visitors, and a further

attachment was requested and supplied in the Raynes Park area in 1967. These attachments are of especial value to the Health Visitor in getting to know her ante-natal patients better and earlier, and she also hears of families who need help through her work with general practitioners.

Health Education

A Health Education Officer was appointed to the Borough and commenced her duties in September.

A very important part of the work of the Health Education Officer is liaison with other sections within the Health Department and, equally important, liaison with other departments, within the Local Authority, and with outside organisations.

One of the first tasks of the Health Education Officer was to promote the work of the Health Department at the 'Welcome to Citizenship' Exhibition held at the end of November. The displays on the stand attracted considerable attention and interest.

The Health Education section is concerned with stimulating interest in topics directly and indirectly connected with the health hazards of today, such as dental health, cancer, smoking, drugs, family planning, home safety, personal relationships, sex education and venereal diseases, and with the promotion of such subjects as mental well-being. This, and many other subjects, are also dealt with by the Health Visitors both in teaching in schools, clinics and when invited to speak to outside organisations.

Both Mothercraft classes for ante-natal mothers and Parentcraft classes for mothers and their children continue to be greatly appreciated and well attended. In addition, evening classes for expectant parents were commenced in October at Church Road Clinic.

MIDWIFERY

Staff

As at 31st December, 1967, the staff consisted of:—

- 1 Non-medical Supervisor of Midwives.
- 8 Whole-time District Midwives.
- 2 District Nurse/Midwives.

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 operate separately.

Introductory

The number of home confinements continued the decline which has been evident for the last few years. Early discharges from hospital, which had been increasing, also showed a marked decrease in 1967.

Organisation

It has been found practicable to retain as three midwifery areas the districts of Wimbledon, Merton and Morden, and Mitcham, and to have one group of midwives working in each area. A rota system is in operation which ensures sufficient sleep and rest for midwives

between shifts, which is particularly important if a high standard of patient care is to be ensured.

Three midwives are housed at the Nurses' Home, Kings Road, Wimbledon, one is housed at 'The Croft', Commonside East, Mitcham, one in a flat leased from the Greater London Council, and the remaining five live in their own homes.

All midwives, except one who uses a bicycle, use either their own cars or a car supplied by the Authority.

Maternity Cases Attended

There were 364 domiciliary confinements reported and 2,431 hospital confinements during the year. This shows a reduction of 158 on the figure for 1966. Midwives employed by the Authority attended 363 (360 where a doctor was booked and three where no doctor was booked) of the 364 domiciliary cases.

Inhalational Analgesia

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

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

Gas and oxygen—260	Trilene—44
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Puerperal Pyrexia

Two cases of puerperal pyrexia were notified; both were hospital cases.

Ophthalmia Neonatorum

No 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.

Medical Aid

Medical aid was summoned by midwives in 80 domiciliary cases including 79 cases where the general practitioner had arranged to provide the patient with maternity medical services under the National Health Service Act. The Authority was liable for the payment of the practitioner's fees in the one case where no doctor was booked.

Early Discharges from Maternity Hospitals

The numbers of discharges from hospital before the tenth day of puerperium were as follows:—

48 hours after confinement	...	...	...	210
Other discharges before the tenth day	...	...	...	101
Total	...	...	...	311

This shows an overall decrease of 82 on those for 1966.

Midwifery Training

During the year eleven pupil midwives from St. Teresa's Hospital and four from Epsom Hospital each spent three months in district training with the Authority.

Post-Graduate Courses

One midwife attended a post-graduate course in accordance with the Rules of the Central Midwives' Board, and one midwife attended a week-end seminar in Psychoprophylaxis.

Domiciliary Visits

The following visits were carried out by midwives to their patients, other than attendance at the actual confinement:—

Visits during the ante-natal period ...	2,992
Post-natal visits to home confinements ...	5,480
Post-natal visits to 48-hour and other early discharges from hospital ...	2,383
Total ...	10,855

Health Education of Expectant Parents

It has been felt for some time that couples becoming parents for the first time would benefit considerably if the prospective father could attend talks together with his wife.

A trial scheme was run, which consisted of four evening lectures followed by discussion. The talks are given by Health Visitors and Midwives. Interest was keen and it is hoped to extend this scheme so that all the Borough's expectant parents can attend these classes in the future if they so wish.

Attendances at Clinics

Three hundred and eighteen ante-natal clinic sessions were held by midwives during the year, and 431 women attended these clinics for the first time. The total number of attendances at midwives' ante-natal clinics was 2,543.

Transfers to Hospital

The undermentioned patients booked for domiciliary confinement were transferred to hospital:—

(a) During pregnancy ...	59
(b) During labour ...	11

Co-operation with General Practitioners

In 1967 a start was made on the scheme for ante-natal clinics held jointly by general practitioners and domiciliary midwives. A group practice of three general practitioners was chosen and an ante-natal clinic is held once a week at the doctor's surgery with a domiciliary midwife and a pupil midwife in attendance. It is hoped to extend the scheme next year to another group practice.

Maternity Liaison Committee

The Medical Officer of Health continued to act as Chairman of the St. Helier Group Maternity Liaison Committee which ensures co-operation of the hospital, general practitioner and local health authority maternity services.

HOME NURSING

Staff

On 31st December, 1967, the staff consisted of:—

- 1 Superintendent of the Home Nursing Service.
- 1 Deputy Superintendent of the Home Nursing Service.
- 32 Whole-time Home Nurses (female) — S.R.N. and District Trained.
- 2 Whole-time Home Nurses (male) — S.R.N. and District Trained.
- 3 Whole-time Home Nurses (female) — S.E.N. not District Trained.
- 4 Part-time Nursing Auxiliaries (female).

With a large nursing staff, some turnover of staff is inevitable, due to retirement of older members of staff and removal from the area in the case of married staff whose husbands' place of employment moves to areas outside the Borough. In spite of this the Authority managed throughout the year to maintain a reasonably full complement of nursing staff.

Two Nursing Auxiliaries were replaced during the year maintaining the total of four part-time Nursing Auxiliaries on the establishment. In-service training is given to these Nursing Auxiliaries by an experienced Home Nurse and the Superintendent or Deputy Superintendent satisfies herself, in each case, that the Auxiliary is competent to carry out her work unsupervised before actually doing so.

Organisation

The Borough is divided into eight areas of differing population and size, and each area is staffed by a group of Home Nurses. Requests for the services of a Home Nurse are principally referred by general practitioners. These are taken mainly by telephone at the Health Department and are passed to the nurse concerned on the same day.

Gradual changes are taking place in the type of nursing required in the patient's own home, as well as in the type of nurse supplying the service.

As in previous years, the Home Nursing Service continued to centre round the elderly, infirm and chronically sick patient, some 80% of all cases being in this category.

Training of District Nurses

This Authority is approved as a training area for the practical part of the District Nurse training, leading to the Queen's Institute District Nursing Certificate. Students attend the Queen's Institute Headquarters in London for their theoretical instruction.

Four nurses were seconded for training in 1967. The theoretical part of the training was carried out by the Queen's Institute of District Nursing in London and the practical part of the training by suitable and experienced Home Nurses who are willing to undertake this practical training of Student District Nurses. All four nurses successfully passed their examinations.

Post-Graduate Courses for District Nurses

During the year nine nurses attended residential refresher courses of one week's duration and two attended non-residential courses lasting one day.

Cases Attended

The table below gives details of the numbers 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 1.1.67	Cases added	Cases removed	Cases on books at end of period
0-5 years	2	23	20	5
5-64 years	135	591	571	155
65 years and over ...	639	1,305	1,274	670
Totals	776	1,919	1,865	830

The total number of cases attended during the year was 2,695.

Visits Made

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

January	...	...	8,360
February	...	...	7,522
March	...	...	8,513
April	...	...	8,106
May	...	...	8,330
June	...	...	7,786
July	...	...	7,992
August	...	...	7,710
September	...	...	7,859
October	...	...	7,826
November	...	...	8,073
December	...	...	8,122
Total	...	...	96,199

Marie Curie Foundation Cancer Nursing Service

This Authority acts as agents for the Marie Curie Memorial Foundation who bear all the costs of the Day and Night Sitting Service supplied locally to any cancer patient being nursed at home and in need of additional care, especially night attendance. This service

is staffed by qualified nursing staff and unqualified staff, and the appropriate person is sent to each case. The service is run locally through the Home Nursing Service.

The aim of this service is mainly to relieve relatives from night nursing duties to enable them to get sufficient sleep and rest in order to continue the often strenuous task of looking after a really sick patient, particularly when he or his family wish the relative to remain at home until the end.

The Authority also operate the Foundation's Area Welfare Grant Scheme under which extra comforts may be supplied to a cancer patient at the expense of the Marie Curie Foundation.

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.

There was a marked increase in the number of cases to whom these pads were issued during the year.

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, 1967, the staff consisted of:—

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

Organisation

Recruitment has been maintained throughout the year, although there has been a considerable changeover, due mainly to retirement, ill health and Home Helps moving from the district.

The target figure of 120 whole-time equivalent Home Helps was exceeded due to increased case load and additional hours required in some existing cases. The demands on the service increase each year. Fortunately, recruitment kept abreast of the demand.

Talks were given by the Home Help Organiser to Parentcraft groups and the 'Visiting Service' of the Mitcham Old People's Welfare.

There was a slight increase in the recruitment of Neighbourly Helps but, owing to the heavy competition from local industry, this scheme continues to be slow to expand.

Statistics

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

Category of cases	Cases on books at 31st Dec., 1966	Cases on books at 31st Dec., 1967	Total cases dealt with during 1967
Chronic Sick and Aged	966	1,019	1,377
Tuberculosis	16	12	20
Acute Illness	19	15	123
Maternity	2	2	90
Totals	1,003	1,048	1,610

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, 1967, being 1,019.

Details of Sources of Applications in 1967

General Practitioners	509
Hospitals	233
Health Visitors	12
Home Nurses	5
Welfare Services	10
Blind Welfare	5
Maternity Bookings	118
Others	1
	<hr/>
	893

The Organiser and the three Assistant Organisers have paid 714 first visits and 5,564 re-visits to homes in connection with the Service.

HOURS WORKED BY HOME HELPS

	Chronic Sick and Aged	T.B.	Acute	Maternity	Payments under Neighbourly Help Scheme £ s. d.	Total hours worked
January ...	15,548	267	669	384	45 5 0	16,868
February ...	15,510	255	586	383	42 4 0	16,734
March ...	14,386	255	356	738	42 4 0	15,735
April ...	18,880	314	410	646	57 3 0	20,250
May ...	16,053	273	381	297	47 16 0	17,004
June ...	14,589	229	360	532	49 8 0	15,710
July ...	18,348	276	504	420	73 14 0	19,548
August ...	13,613	226	386	259	55 15 0	14,484
September ...	18,033	225	266	79	68 6 6	18,603
October ...	16,286	229	326	69	56 16 0	16,910
November ...	16,226	198	204	127	62 9 0	16,755
December ...	18,289	180	396	189	73 8 6	19,054
Totals ...	195,761	2,927	4,844	4,123	674 9 0	207,655

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Clinic for Older People

This service was started in May, under Dr. Joan Ferreira. Persons over the age of 55 years who live in the Borough can attend, providing their own doctors agree and that they are not currently under treatment for an illness. A full medical examination is given and a search is made for disease which may be in an early stage without causing symptoms, for example, cancer of the breast and cervix, diabetes, anaemia and glaucoma. A chest X-ray is arranged and a hearing test done. A report is sent to the family doctor, with whom the clinic doctor aims to work as closely as possible.

Patients who have some disorder or disability which cannot be cured, can be helped by a full discussion of how best to look after it. Others who are experiencing difficulty in adapting to changes in themselves or their circumstances as they grow older, find they are not alone in this and respond well to the reassurance and support the clinic is able to give.

Patients are seen again a year after the first visit, and are given another diagnostic examination. They are seen between these visits according to need.

There is no doubt that there is a demand for this kind of clinic, as shown by the length of the waiting list, which by December, 1967, was about three months.

Unnecessary fears are relieved when everything is found to be satisfactory, and people say they feel better for coming. Many opportunities arise for the promotion of health and the maintenance of the well-being of the patient, which it is the task of the clinic staff to develop.

Dr. Ferreira reports as follows on the work of this clinic during the year:—

‘The first clinic was held at Amity Grove on 3rd May, 1967. A few older people known to the health visitors, such as clinic voluntary workers, health department staff and home helps were invited to attend. From this beginning the clinic grew quickly. Friends, neighbours and husbands of the first patients asked for appointments, and there was also a steady flow of applications from members of the Council of Women and the Workers’ Educational Association. About 10% of patients have been referred directly from their own doctors (most of these have come from one group practice).

As far as time would allow, contact was made at the outset with the surrounding doctors to discuss the aims of the clinic. It is proposed to follow this up with another visit when the clinic has been running a year, and to seek suggestions for further co-operation and improvement in the service. Every doctor has a letter informing him that his patient has asked for an appointment at the clinic before this is given, so that he has a chance of disagreeing (none have done so). After the examination a full report is sent to the family doctor.

The number of patients attending during the year was as follows:—

67 new patients: 75% women, 25% men. (Average age 57 years.)

89 re-attendances.

4 deaths: 2 men suffering from inoperable carcinoma found at first attendance and referred back to their doctors.

1 man with acute depression referred to doctor and mental welfare department (suicide).

1 woman aged 81—followed up at home by health visitor—died of pneumonia in hospital.

Ten patients were referred to their doctors for treatment or investigation.

Observation of other patients for mild hypertension, cystic swelling in breasts, vague abdominal symptoms, etc., has accounted for some of the re-visits, while others might be regarded as treatment through counselling, e.g., re-visits of those suffering from depression or obesity. The clinic has attracted patients who are obviously looking for considerable support and reassurance, and the encouraging thing is that many have responded and are now in better health. There has not, however, been an overwhelming number of such patients; most people have approved of the preventive idea and have asked to attend for this reason.

The aims of the clinic are:—

1. Encouragement of health by the attitude of the staff; sympathetic listening, general optimistic attitude, attempting to help the patients adjust to changes in themselves and their surroundings.

2. Education about the nature of the patient's symptoms and the best way of looking after disease or disability which cannot be cured.

3. Pre-symptomatic diagnosis by repeated medical examination. Thorough examination annually, screening of urine, blood pressure and weight and interviews with patients between these examinations.

Patients are told that in other branches of the health service they present a symptom, which has to be given priority, but here the family and personal history and present health can be assessed as a whole and an attempt made to promote well-being to the best level possible.

There is obviously a demand for this kind of clinic and there is a limit to the time, energy and money that can be spent on it. Other branches of the health service may be relieved by this work. Anxious patients will attend their doctors less often if they have such an outlet and will tend to "save up" their symptoms for their clinic visit. Time spent on discussing problems with the patients results in a saving of the use of drugs.

Ways must be explored of increasing the number of patients seen. Doctor and health visitor work as a team, and once the patients are orientated to this idea there is no reason why the

doctor should see some patients more than once yearly. The load on the health visitor will obviously grow, and she may require some relief, say from a clinic nurse, and perhaps may need to group some of the patients, e.g., the obese patients might form a "weight-watchers group". It would be helpful also to increase contact with the mental health service.

We have been outstandingly fortunate in having the services of Mrs. R. G. Davies, S.R.N., who has acted as secretary/receptionist and has typed all the correspondence in a voluntary capacity. She has been invaluable and we wish her well for her stay in America.

This is rewarding work for anyone who is interested in preventive medicine. One has to be constantly on the alert to improve the efficacy of the pre-symptomatic diagnostic methods.

A detailed summary of findings is available. It shows that the overwhelming incidence of disease in this older age group falls into one of three categories—joint disorders, obesity and mild depression. A few unsuspected cases of mild hypertension were discovered, and one possible diabetic. A much larger number of people would have to be examined to make a reduction in disease in the community at a pre-symptomatic stage. The medical examination, however, is a personal one, and is a basis for the supportive and educative functions of the clinic which have been outlined.

Chiropody Service

The Council's chiropody service caters for the elderly, the registered blind or partially sighted, the physically handicapped and expectant and nursing 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, 1967, 995 new applications for treatment were received.

The following table gives figures for the Direct Scheme:—

Category	Persons treated in 1967	Number of treatments given	Number on books at 31.12.67
Elderly	2,820	18,590	2,766
Registered Blind or Partially Sighted ...	49	212	47
Physically Handicapped	81	463	83
Expectant Mothers	3	3	—
Totals	2,953	19,268	2,896

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 77 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 to whom thanks are due for the maintenance of a most essential service.

The Society has supplied the details given in the table below of issues of sick room equipment during the year:—

Item	Total loans	Item	Total loans
Air rings	88	Cradles	71
Bed rests	117	Crutches	41
Bed pans	154	Dunlopillo mattresses	1
Bed tables	9	Feeding cups	11
Invalid chairs	90	Inhalers	2
Commodes	185	Urinals	55
		Waterproof sheets	94

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. Fifty-four such holidays were arranged in the year.

Cervical Cytology

During the year the Cytology Screening Service for the taking of smears from well women expanded, as a result of additional laboratory facilities being available. The number of smears being dealt with was increased from 10 a week to 20 a week in May and to 40 a week in July, plus repeat smears. As before, the service is available to women of all ages.

At the inception of the scheme, smears were taken at two ante-natal clinics in the Borough, but by July smears were being done at six ante-natal clinics. The patients and General Practitioners were notified of the results in every case. The total number of new cases dealt with was 1,187 and the number of repeat smears taken was 260. Besides complete pelvic examination, breast examination, urine test and blood pressure were routinely done in all cases.

As a result of pelvic screening, cases with defects such as erosions, polypi, fibroids, trichinomas, prolapse, etc., were referred to their General Practitioner for further treatment.

Arising from the screening, four cases of malignancy were discovered in its very early stages and all have been very satisfactorily treated.

Family Planning

Family planning sessions are carried out by the South-West London Branch of the Family Planning Association as shown below:

Pelham Road Clinic, Wimbledon—

Wednesday and Friday evenings, 6.15 to 8.15 p.m.

Church Road Clinic, Mitcham—

Tuesday evenings, 6.30 to 8.30 p.m.

Amity Grove Clinic, Raynes Park—

Monday evenings, 6.15 to 8.15 p.m.

In accordance with Ministry of Health Circular No. 5/66, the Authority, during the year, was responsible for payment, on a per capita basis of all cases referred to the above clinics by their family doctor on the grounds that a further pregnancy would be detrimental to health.

The use of the Authority's clinic premises is made free to the Family Planning Association and the Authority also bears the cost of cleaning clinic premises after use by the Association.

As a result of the passing of the National Health Service (Family Planning) Act, 1967, and the issuing of Ministry of Health Circular No. 15/67, the Authority resolved to operate from 1st January, 1968, through the agency of the South-West London Branch of the Family Planning Association, a Family Planning Service as follows:—

1. Free examination, advice, treatment and supplies for any woman referred by her doctor to a Family Planning Clinic on the grounds that a further pregnancy would be detrimental to health.

The following categories of 'medical' cases were laid down by the Authority:—

- (a) Any woman who seeks advice within 12 months of the birth of a child;

- (b) Any woman who seeks advice after the birth of a third child;
 - (c) Any woman who suffers from a specific medical condition, gynaecological or otherwise, which would render pregnancy dangerous;
 - (d) Any woman whose general health would be caused to suffer by reason of mental, physical or social burden placed upon her by pregnancy.
2. Free examination and advice to all *married* 'social' cases, who will be required to pay for any supplies issued, unless their means are such that the supplies should be made free, or at a reduced charge. A simple form of assessment has been agreed for use by the Family Planning Association.

Any charges made to 'social' cases by the Family Planning Association will continue to be those fixed on a standard national basis by that Association.

The effect of these arrangements will be that the Authority will meet the net cost of operating this service, including a contribution towards the administrative costs of the South-West London Branch, and a contribution towards the national levy made by the Family Planning Association on all regional branches. Income from the sale of supplies to 'social' cases will be offset by the South-West London Branch against the overall cost of operation of the service in Merton.

It was anticipated by the Authority that as the service expands additional Family Planning sessions may be required, and facilities should be made available in other local authority clinics provided that this will neither entail disruption of existing local health authority services, nor prevent expansion of other essential services.

MENTAL HEALTH & SOCIAL WORK SERVICES

Introductory

The daily supervision of these services is delegated to a Senior Medical Officer, who is assisted in the mental health aspects by a Principal Mental Welfare Officer, and in the other social work aspects by a Senior Social Worker.

MENTAL HEALTH SERVICES

General

The Borough still has the use of beds in hospitals and out-patient clinics associated with the former County Districts which now comprise the London Borough of Merton, but there is no doubt that by working as a unified London Borough greater facilities do, in fact, become more generally available.

Residents of the Borough have a right to apply for the services provided by their appropriate catchment hospital, but there are other services available to residents of any part of the Borough, including contact with specialised units either for mothers suffering from puerperal schizophrenia, young male heroin addicts, or alcoholics, etc. In addition, the close proximity of the Borough to leading Teaching Hospitals, providing both out-patient and in-patient facilities, extends the field of operation to cover many kinds of help. It is, however, unfortunate that with the formation of the new London Boroughs some rationalisation of hospital catchment areas was not effected. There are three catchment areas in the Borough, and as a result, it is not always possible to know readily the details of facilities provided by the Regional Hospital Boards within or without the Borough.

Staff

At 31st December, 1967, the staff position was:—

- 1 Principal Mental Welfare Officer.
- 1 Deputy Principal Mental Welfare Officer.
- 5 Mental Welfare Officers (including one Psychiatric Social Worker).
- 1 Mental Health Social Worker.
- 1 Part-time Mental Health Social Worker.
- 1 Trainee Mental Welfare Officer.

Dr. R. K. Freudenberg, Physician-Superintendent of Netherne Hospital, continues to act as part-time Consultant Psychiatrist to advise the Authority on aspects of the Mental Health Services.

In April a Trainee Mental Welfare Officer was appointed and it was interesting to note that this post attracted the attention of a considerable number of applicants, whereas some advertisements for qualified Social Workers failed to attract any owing, presumably, to the increased demand for their services. It would seem, therefore, that the future number of Social Workers available will largely depend upon the number of trainee posts made available in the next few years.

In September two Mental Welfare Officers were appointed. They were Miss D. A. Tilt, an experienced Psychiatric Social Worker, and Mrs. J. Barber. These posts were additions to the establishment.

Training of Staff

The Service is concerned with the training of staff in two ways. First by accepting students from neighbouring colleges to work under the supervision of qualified staff, as part of the training for the Certificate in Social Work. These students spend two days a week under close supervision. Students who are in training for other social work disciplines are attached to the Mental Health Services to learn the work in general of a Health Department, and in particular of the Mental Health Service. A regular arrangement exists with Bedford College to take a student for one month each July.

The other part of staff training is the organisation of In-Service Training Courses. In 1967 a course was again organised and on this occasion the theme was 'Mental Disorder: its Care in the Community', and an invitation was extended to General Practitioners working in the Borough and Assistant Medical Officers to attend. It was a stimulating feature of this In-Service Training to bring together in order to learn and discuss Mental Health problems, an audience of doctors, professional Social Workers, Health Visitors and Nursing Staff.

It had originally been envisaged that the course should cater for 60 people in order that seminars could be in groups of approximately 20, but nominations from local authority staff for the course doubled this number and in addition some social work staff in hospitals specifically asked to attend, in order to share in the exchange of ideas.

We are again fortunate to have the co-operation of neighbouring Boroughs, who also sent representatives, and it was with pleasure that the opportunity to work with the Boroughs of Lambeth, Wandsworth and Sutton was provided.

Whilst it has always been the intention of this Borough that the organisation of such courses might take place in neighbouring Boroughs each year, the facilities and organisation provided by the London Borough of Merton appear to have met with the general approval of our colleagues, and Merton will therefore continue to act as a Centre for In-Service Training.

We were particularly indebted to Mrs. P. E. Strauss, Deputy Director of Training of the London Boroughs' Training Committee for her personal interest and practical help as a Group Leader, and also to Mr. E. Marshall, Deputy Principal Mental Welfare Officer, London Borough of Wandsworth, who assisted as a Group Leader.

A further aspect of internal training has developed with the introduction of case conferences at present held between Mental Health staff and the Psychiatric Social Worker for the Mitcham Child Guidance Clinic. It is hoped that this type of exchange of thought on various social work disciplines will engender a deeper understanding, not only of the problems we attempt to solve, but also of our work relationships.

THE WORK OF THE MENTAL WELFARE OFFICERS

The statistics on page 54 show a high proportion of informal admissions arranged by the Mental Welfare Officers although it should be remembered that some informal admissions are arranged by General Practitioners or by Psychiatric Out-patient Clinics. This shows that a larger number of persons referred to the Mental Health Service have been helped by arrangements being made for their treatment in hospital.

During the year the Mental Health staff have been encouraged more and more to be associated closely with clinical work and, at the present time, staff attend an out-patient clinic at the Wilson Hospital in conjunction with West Park Hospital, and an out-patient clinic at Nelson Hospital in conjunction with Horton Hospital. Case conferences held at West Park and Horton Hospitals are also attended regularly by Mental Health staff.

There are two hostels in the Borough run by the Cheshire Foundation which provide after care facilities for persons who have suffered from mental disorder. A part-time Mental Health Social Worker maintains a close liaison with these two Hostels and reports back to the sponsoring Authority on the progress of the patients nominated by them. This is a very time-consuming task since the residents at the Hostels normally work during the day and must therefore be seen in the evenings.

The Developmental Clinic, which was set up early in the year, is closely linked to the Mental Health Service and the family histories are compiled by the Mental Health staff. This is a particularly lengthy and highly skilled appraisal of the social situation of a family with a child believed to be showing abnormal developmental traits.

An important piece of pioneer work in the Borough was started in November, 1967, when a Mental Welfare Officer commenced a weekly session undertaking interviews on the premises of a group practice of doctors. The cases are selected by the doctors as those likely to need the help of the Mental Welfare Officer. There is good co-operation with the doctors. It is hoped that this work will have an important preventive aspect in that patients with emotional disturbance will be seen in the early stages.

An In-Service Training Seminar led by Dr. Brooks, Consultant Psychiatrist of the Cassell Hospital, is attended by the Mental Welfare Officer, and this is proving to be extremely helpful and informative.

Co-operation with Voluntary Associations

The Mental Health staff are associated with the Rendezvous Club which is an after care club run by a special Committee of the Wimbledon Guild of Social Welfare. They also attend a club for mentally handicapped persons run by the Merton Association for Mentally Handicapped Children, and it is hoped that in 1968 the Borough will be able to provide a further club for mentally handicapped persons.

The Mental Health staff are in close contact with the Merton Association of Health and Welfare and assist them, so far as they are able, in planning their Mental Health programmes, particularly those associated with Mental Health Week.

Mental Health Week was organised in conjunction with the London Boroughs of Wandsworth and Lambeth and the catchment hospitals, which is undoubtedly a very appropriate way of planning this kind of venture, the intention of which is to interest the general public in aspects of Mental Health. It is interesting to observe that more public interest can be stimulated by discussion on 'mental disorder' than on 'mental health' and at the present time it seems as if public and semi-public talks and discussions on drugs will receive maximum support, even if those attending are unwilling to concede that this is a mental health problem.

In this Borough drug addiction is not a serious problem and all instances reported have been helped. It has been possible to provide expert information and speakers on the subject, where this has been required.

From time to time Mental Health staff are called upon to speak on mental health subjects, sometimes at quite short notice and at other times for occasions booked well in advance. These are excellent opportunities to help the general public to give sympathetic understanding to the problems of persons and families involved in mental disorder and also to enable the public to see that the Mental Welfare Officer is not primarily concerned with removing people to hospital, but is more concerned with preventive and supportive work for people with the object of avoiding the necessity for admission to hospital.

Patients in Hospital

It is known from records maintained by the Mental Health Service that 241 Merton patients are in long-term care in hospital for the subnormal and severely subnormal.

SUBNORMALITY

Cases in Community Care

At the end of the year 169 patients, as shown below, were in the community care of the Authority:—

Category of patient	Under 16 years		16 years and over		Total		Grand Total
	Male	Female	Male	Female	Male	Female	
Subnormal patients receiving routine home visits	3	10	20	37	23	47	70
Severely subnormal patients receiving routine home visits	32	22	26	19	58	41	99
Totals	35	32	46	56	81	88	169
Patients included in above figures who are attending Junior or Adult Training Centres	31	22	26	19	57	41	98

Special Care Unit

The Special Care Unit which was opened in 1966 clearly met a well established need. In this Unit, day care is provided for severely subnormal children with additional physical handicaps. At the present time the Unit is virtually full. The fact that this is a twenty place unit does not always mean that there should, or can be, twenty children in attendance. This has to be regulated according to the 'children available' or the particular type of needs of the children attending. This unit is also used by the London Borough of Sutton as is the Junior Training Centre. It has also been possible to make available to the London Borough of Wandsworth two vacancies for children who were in urgent need of such care and for whom no appropriate facilities were immediately available. Vacancies to other Boroughs are offered only on the understanding that they are not required for Merton children. A spirit of co-operation between Boroughs for the efficient and economic use of the facilities they have available, is of paramount importance in the planning of services.

The table below gives details of the number of attendances at the Special Care Unit during the year:—

	Merton	Sutton	Wands'th	Total
No. of children attending on 1.1.67	9	6	2	17
No. of children attending on 31.12.67	11	5	2	18
No. of attendances made during year	1,656	731	266	2,653

Junior Training Centre

The Junior Training Centre, whilst it has 75 places, had, at the end of the year, only 56 children in attendance. This is mainly due to the fact that the London Borough of Sutton are now able to provide facilities for more of their children within their Borough and therefore have less need for places in our Centre. The use of the Junior Training Centre may be extended to assist parents by providing a nursery group at some time in the future.

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

	Merton	Sutton	Total
No. of children in attendance on 1.1.67	40	17	57
No. of children in attendance on 31.12.67	42	14	56
No. of attendances made ...	6,710	2,672	9,382

Adult Training Centre

The arrangements for Adult Day Training centred on the Unit in the Manor Hospital, Epsom, have now been consolidated and, at the end of the year, 45 trainees were in attendance. A very small

number of parents do not wish to accept the facilities available and prefer to care for their children in their own homes until the Borough's own Adult Training Centre becomes available. However, by providing this necessary service, it is interesting to note that the number of trainees over 16 receiving day training has increased from 33, who were able to attend Banstead, to a total of 43 now attending the Adult Day Training Centre at the Manor. Two other adults attend centres in neighbouring Boroughs. This Day Centre in 1968 will be rehoused in a workshop block which has been specially adapted for the purpose. Much of the equipment has already been provided by the Borough and will in fact be later transferred to the Borough's own Centre. This transfer to Adult Day Training at the Manor Hospital was made easier by virtue of the fact that we were fortunately able to acquire the service of two of the coach guides who had formerly escorted the trainees to Banstead, and who have now been appointed as Assistant Supervisors on the staff of the Manor Hospital. It was not, therefore, a difficult transfer in any way. It has also given stimulation and a larger outlook on life, not only to our own trainees, but to those who for social reasons are living in the hospital and working in a similar setting.

In order to assist the Physician Superintendent of the Manor Hospital, a small Committee of parents and representatives of the Borough meet at regular intervals to discuss various aspects of the arrangements, and all requirements, with few exceptions, seem to have been matters of common agreement.

The table below gives details of attendance at the Training Centre at the Manor Hospital:—

On register at 31.12.67	Males	Females	Total
No. attending Manor Hospital	25	18	43
Total No. receiving training	25	18	43

OTHER FORMS OF MENTAL DISORDER

Cases dealt with by Mental Welfare Officers

During the year 436 cases were referred to Mental Welfare Officers for attention.

Two hundred and ninety-three patients were admitted to Mental Hospitals through the Mental Health Service. Details of these admissions are given below:—

	Males Under 65	Males Over 65	Females Under 65	Females Over 65	Total
Admitted informally	44	10	75	30	159
Admitted under Section 25 (for observation)	8	1	8	5	22
Admitted under Section 26 (for treatment)	3	—	2	—	5
Admitted under Section 29 (for observation in case of emergency)	27	8	34	21	90
Admitted under Section 60 (by the Courts)	—	—	2	—	2
Admitted under Section 136 (in conjunction with the Police)	8	—	3	4	15
Totals	90	19	124	60	293

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.

The above figures show a rise from 191 cases dealt with in 1966 to 293 for 1967.

The bulk of this increase is absorbed in the figure given for informal admission. It is fair to say that although more cases of mental illness have been dealt with by the Mental Welfare Officers, this is primarily due to the fact that their help has been sought at an early stage or they have been re-arranging admissions for people already known to them.

It is of interest to note that when the figures under this section are broken down 19 males and 60 females are over the age of retirement. This constitutes a high proportion of the total and it must be admitted that there is a growing tendency among other agencies to refer cases of elderly persons to the Mental Health Service, whether or not the primary problem is one of mental health.

Of the 436 cases referred to the Mental Health Service, a large number were elderly.

Patients receiving Community Care

At the end of the year 101 male and 159 female patients were being provided with community care by the Authority. This shows an increase of 46 males and 37 females compared with 1966.

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, including assisting patients with their material problems, or 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 otherwise survive in the community. It is in this sphere that the Mental Welfare Officer often has the care of the 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.

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 19 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, when requested to do so, undertaken supervision of patients from other Authorities accommodated there.

SHORT-TERM CARE

During the year, the Authority provided periods of short-term care in 24 cases, compared with 15 cases in 1966. This is an illustration of the increased demand made for the facilities when their availability is known to those families in need.

SOCIAL WORK SECTION

Staff

At the end of the year the staff position was:—

- 1 Senior Social Worker.
- 1 Whole-time Social Worker.
- 3 Part-time Social Workers.
- 1 Part-time Social Worker (joint appointment with St. Helier Hospital Management Committee).

One part-time Social Worker resigned in August and one whole-time worker then took on the duties of part-time work. In addition a whole-time Social Worker was appointed in September bringing the staff to its full complement.

General

The work of this section, which includes social work assistance at the Chest Clinics at Cumberland Hospital, is varied and interesting.

During the year the work of the section increased considerably and there were referrals from Medical Social Workers, General Practitioners and other departments of the Borough. Some work was

undertaken with students, and on two occasions girls from the local Grammar School attended the department for information and help on projects.

During the past year some aspects of the work changed, and in addition to the work referred, the section is now responsible for initial enquiries and assessments to find out the need or problem within the family group, and either to continue to work with the family, or, if it is more beneficial to the family, to transfer the case to the appropriate department or agency. All cases referred are investigated and if no other department or agency is working with them, this Department then takes on the social work. In all aspects there is close liaison with the Children's, Welfare and Housing Departments, as well as with the voluntary organisations within the area.

The Senior Medical Officer acted on behalf of the Medical Officer of Health as Chairman of the Co-ordinating Conference for the Prevention of the Break-up of Families, and the Social Workers attended the Conferences, submitting reports on the families under their supervision.

Towards the end of the year it was agreed by the heads of other departments that this section should deal initially with the problems of rent arrears arising in Council tenancies, especially with regard to tenants who were under Notice to Quit. After the assessment has been made, memoranda are sent to the other departments concerned and a report is submitted to the Co-ordinating Conference.

Since October, 1967, the Greater London Council has notified the Medical Officer of Health of any families in danger of being evicted because of mortgage payment arrears. These cases are followed up by the Social Workers and close liaison is maintained with the Greater London Council to prevent eviction. Ten families were referred during October and December and, as a result of action by Social Workers, no evictions took place. There were also two referrals for mortgage arrears from the Town Clerk's Department, which were also followed up and liaison was maintained with the Town Clerk's Department by the Medical Officer of Health.

The number of cases dealt with has increased and there were 118 referrals from the Chest Physicians, Health Visitors and Medical Social Workers of other Boroughs. These cases were supervised by the Social Workers and financial assistance, if necessary, was obtained from voluntary organisations. Through the medium of the Care Committee these families also received grants for extra fuel, nourishment and holidays. In many cases, outstanding bills for the essential services were paid to help the family through financial difficulties.

The Section works very closely with the Children's Department and throughout the year a substantial number of families have been given help under Section 1 of the Children and Young Persons Act, 1963. This assistance is very valuable to the Social Worker as, in many urgent cases, help is needed to overcome hardship to the children. Many of these families could be considered 'Families at Risk for Social Reasons' and it is recognised by each Social Worker that no matter what type of problem occurs it must be overcome if the family is to be given effective help.

Liaison has been maintained with voluntary housing organisations and some families have been helped to find their own accommodation, thus alleviating the need for application for temporary

accommodation, or for reception of children into care by the Children's Department. Other families have been encouraged to apply for mortgages, if their financial position permits this. Homelessness was averted in 52 cases, involving 114 children, thereby saving a great deal of time and money for the Local Authority.

Social Casework

The number of cases carried throughout the year was 455, this includes referrals throughout the year—269, and the cases brought forward from 1966—186. The number of cases closed during the year was 86.

The number of families with problems referred was 139, and each family was visited and supervised. Unfortunately, this side of the work is rather limited since many families live in temporary accommodation provided under Part III of the National Assistance Act, 1948, which can make rehabilitation difficult. In many cases, the Social Workers raised funds from voluntary organisations to help the family to maintain the standard of the home, and also to make the home more comfortable for the children.

The following table analyses referrals during the year:—

	Category			Total
	Chest Clinic families	Families with problems	Mortgage arrears	
Cases still open	83	64	12	159
Cases satisfactorily closed ...	34	49	—	83
Cases unsatisfactorily closed	—	3	—	3
Cases moved out of the area	1	5	—	6
Cases transferred to other departments	—	18	—	18
Totals	118	139	12	269

The 'chest clinic families' dealt with involved 11 children, six of them being under five years of age. For families with problems the corresponding figures were 280 and 180 respectively and for mortgage arrears cases, 28 and 12.

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

The surroundings in which we live can have a profound effect upon our health and development. The elimination of unhealthy conditions, be they in connection with food, housing, water supplies, atmospheric pollution, refuse disposal, pest infestations; or in offices factories or other work places, is the basis of what is usually called Environmental Health. The scope of Environmental Health is obviously very wide and the need for controlling those factors which can have a significant effect on health is now freely accepted.

This part of the Annual Report deals therefore with the Environmental Health Service, and shows the efforts made to maintain an efficient service, despite continued staff shortages and staff changes.

In reviewing the work of the Public Health Inspectorate during 1967, regard has been had to Ministry of Health Circular 1/68 dated January, 1968. The statistics cover the year ended 31st December, 1967, being the second complete calendar year of the London Borough of Merton.

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.

With a few exceptions all the dwelling houses within the Borough are supplied from public water mains direct to the houses but the actual number of 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.

I am indebted to the Director of Water Examination, Metropolitan Water Board for the following information so far as the supply from that Authority is concerned:—

1. (a) The supply was satisfactory both as to quality and quantity throughout 1967.
- (b) All new and repaired mains are disinfected with chlorine; after a predetermined period of contact the pipes are flushed out and refilled; samples of water are then collected from these treated mains; and the mains are returned to service only after results are found to be satisfactory.

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

- (c) (i) The Board has no record of the number of structurally separate dwellings supplied in your area, but the population supplied direct according to the Registrar General's estimates at 30th June, 1967, was 152,922.
- (ii) No houses were permanently supplied by standpipe.
- (d) No fluoride was added, and where the fluoride content is indicated in the analyses it represents the naturally occurring fluoride in the water.
2. (a) The supply was derived from the following works and pumping stations:—

River Thames via Hampton, Walton, Surbiton.

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

- (b) The Board's river and well sources have not been considered to have a plumbo-solvent action, on account of their hardness content and alkaline reaction. It should, however, be appreciated that all types of water pick up varying amounts of metal from piping, particularly when it is newly installed; this applies to copper, zinc, iron and also lead.

Tests for lead have been carried out in connection with chemical analyses of samples of running water collected from premises in the distribution system and I set out below the information obtained over the period 1st January to 31st December, 1967:—

Lead content (mg/l. Pb) water from main taps in consumer's premises.

	Number of samples	Per cent
Less than 0.01	64	66.7
0.01	22	22.9
0.02	3	3.1
0.03	4	4.2
0.04	2	2.1
0.05	—	—
0.06	1	1.0
	96	100.0

The above figures apply to the whole of the Board's area but it should be pointed out that the general characteristics of the water are similar throughout the area so that the findings are applicable to individual Boroughs.

The regular system of examination for lead in water in domestic premises will continue during 1968.

Sampling of water supplies is an integral part of sampling duties, and a growing responsibility is the bacteriological control of water in swimming baths.

During 1967 samples of water were taken for bacteriological and chemical examination by the Public Health Inspectors as follows:—

Bacteriological—

Swimming Baths 190

Dwelling houses:—	
Sutton District Water Company...	1
Well water	12
	<hr/> 13
Other premises:—	
Sutton District Water Company...	3
	<hr/> 206
<i>Unsatisfactory Results—</i>	
Swimming Baths	15
<i>Chemical—</i>	
Swimming Baths	11
Dwelling houses:—	
Well water	1
Other premises:—	
Sutton District Water Company...	2
	<hr/> 14
<i>Unsatisfactory Results—</i>	
Swimming Baths	2

The Council-owned swimming baths are closely controlled by the Department concerned, and the co-operation of the Baths Manager in taking action in respect of unsatisfactory samples is gratefully acknowledged.

Sewerage and Sewage Disposal

I am advised that the arrangements for sewerage and sewage disposal are adequate. There are 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 and requests received and the visits made during the year 1967:—

Complaints received—

General disrepair and insanitary conditions ...	265
Dampness	274
Overcrowding	27
Defective drainage systems	47
Blocked drainage systems	707
Defective drainage fittings	7
Defective sanitary accommodation	108
Defective service water pipes	45
Absence of, or defective, dustbins	11

Accumulation of refuse, etc. ...	172
Rats and mice ...	1,224
Pigeons ...	64
Insect pests ...	613
Smoke nuisances ...	132
Noise ...	105
Smells and odours ...	226
Unsound food ...	185
Water supply ...	146
Miscellaneous ...	353
	<hr/> 4,711

Visits made—

General.

P.H. Act (Nuisances) ...	1,967
P.H. Act (Dwelling houses) ...	2,559
Storage of refuse ...	286
Drain testing ...	170
Choked drains ...	2,471
Other drainage work ...	853
Radioactivity ...	11
	<hr/> 8,317

Housing.

Housing Act (Dwelling houses) ...	1,531
Overcrowding ...	72
Permitted No. measurements ...	17
Rent Act, 1957 ...	61
Underground rooms ...	12
Houses in multiple occupation ...	267
Improvement grants ...	422
Caravans ...	63
	<hr/> 2,445

Food and Food Premises.

Milk processing dairies ...	125
Milk vendors ...	198
Ice-cream premises ...	406
Food factories ...	28
Food vehicles ...	609
School kitchens ...	63
Restaurant kitchens ...	712
Licensed premises ...	170
Bakehouses ...	40
Butchers ...	319
Wet and fried fish shops ...	117
Other food shops ...	1,397
Meat inspection ...	467
Unsound food ...	485
Sampling: Food and Drugs ...	282
Sampling: Milk ...	237
Sampling: Ice-cream ...	94
Sampling: Water ...	202
Food hygiene swabs ...	67
	<hr/> 6,018

Clean Air Act, 1956.

Smoke control areas	...	...	...	5,163	
Other Clean Air Act visits	...	...	...	418	
Smoke observations	...	...	...	561	
Air pollution recording apparatus	...	...	...	1,155	
				<hr/>	7,297

Factories Act, 1961.

Factories (powered)	245	
Factories (non-powered)	...	...	...	22	
Factories (building sites)	...	...	...	26	
Outworkers	...	...	...	85	
Workplaces	...	...	...	31	
				<hr/>	409

Infectious Diseases.

I.D. enquiries	306	
I.D. contacts	...	...	...	31	
Food poisoning	...	...	...	32	
Specimens	...	...	...	34	
Disinfection	...	...	...	17	
				<hr/>	420

Offices, Shops and Railway Premises Act, 1963.

O.S.R. general inspection offices	142	
O.S.R. general inspection shops	...	...	...	362	
O.S.R. general inspection wholesale/warehouses	...	...	...	21	
O.S.R. general inspection catering	...	...	...	31	
O.S.R. general inspection canteens	...	...	...	1	
O.S.R. general inspection fuel stores	...	...	...	1	
O.S.R. all other visits	...	...	...	2,859	
				<hr/>	3,417

Insects, Pests, Rodents.

Rats and mice control	...	...	...	10,365	
Insect control	...	...	...	332	
Pigeon control	...	...	...	162	
Verminous premises	...	...	...	74	
				<hr/>	10,933

Animals.

Stables	...	...	...	40	
Piggeries	...	...	...	7	
Slaughterhouse (hygiene)	...	...	...	71	
				<hr/>	118

Miscellaneous.

Rag Flock, etc., Act, 1951	...	...	...	2	
Hairdressers and barbers	...	...	...	234	
Diseases of Animals Act, 1950	...	...	...	44	
Noise Abatement Act, 1960	...	...	...	466	
Schools	...	...	...	8	
Court proceedings	...	...	...	37	
Public conveniences	...	...	...	7	
Water courses	...	...	...	54	
Shops Act, 1950	...	...	...	87	
Pet shops	...	...	...	33	
Other visits	...	...	...	961	
				<hr/>	1,933

41,307

Result of Service of Notices

(1) *Legal Proceedings.*

Proceedings were instituted in four cases against owners of dwelling houses for failing to comply with Abatement Notices served under Section 93 of the Public Health Act, 1936. The defendants failed to appear before the Court. In all these cases, with the exception of one, where the works had been subsequently carried out, Nuisance Orders were made for the work to be done within 28 days.

Total costs of £9 9s. 0d. each in two cases and £5 5s. 0d. each in the other two cases were granted against the owners.

(2) *Nuisances abated and Defects remedied.*

Two thousand eight hundred and twenty-three defects were remedied as the result of the service of verbal, written and Statutory Notices. 1,150 were in connection with the drainage of buildings; 897 in and around dwelling houses; 745 in connection with food premises; and 31 were of a miscellaneous nature.

Factories Act, 1961—Part I

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

Premises	Number on Register	Number of		
		Inspections	Written Notices	Prosecutions
Factories without mechanical power	43	22	—	—
Factories with mechanical power ...	894	245	24	—
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises) ...	42	57	—	—
Totals	979	324	24	—

(2) *Defects found.*

Particulars	Number of Defects				Prosecutions
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	
Want of cleanliness (S.1)	—	1	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	1	—
Inadequate ventilation (S.4)	—	11	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7):—					
Insufficient	1	10	—	1	—
Unsuitable or defective	43	38	—	1	—
Not separate for sexes	1	7	—	—	—
Other offences (excluding offences relating to outwork)	—	7	—	—	—
Totals	45	74	—	3	—

Factories Act, 1961—Part VIII

Outwork—Sections 133 and 134.

Nature of work	Section 133			Section 134		
	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 apparel ... -making	62	—	—	—	—	—
Lampshades ...	25	—	—	—	—	—
Carboard box-making	76	—	—	—	—	—
Total ...	163	—	—	—	—	—

Number of addresses received from other Councils ... 155

Number of addresses forwarded to other Councils ... 129

Number of premises where outwork was carried on at the end of 1967 ... 246

Underground bakehouses in use at the end of the year 1

Cleansing Station

One of the occasional but important duties of a local authority is to ensure the disinfestation of verminous persons and their clothing. A Cleansing Station is maintained at Aston Road, S.W.20, and the equipment consists of two slipper baths with incidental rooms, a Dodwell and Dunning electric disinfecting chamber for clothing and a recently installed gas water heating unit. The premises are maintained and staffed by the Health Department. During the year 1967, 34 local residents and 17 persons from other districts received treatment for scabies or for lice infestation. A fee of 30s. is payable by outside authorities for persons sent by them for treatment.

The independent space heating unit mentioned in the Annual Report 1966 had not been installed by the end of 1967, but a gas unit was fitted and in operation early in 1968.

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 126.

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.

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, was applied to the dairy which processes this milk. Enquiries were received during the year from other Councils to whom applications had been made for licences in respect of the sale of U.H.T. milk, and a number of Health Certificates were issued to the company concerned for the export of U.H.T. milk.

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

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

Dealers' (Pasteuriser's) Licences	...	...	2
Dealers' (Ultra Heat Treated) Licence	...	...	1

Dealers' (Pre-packed Milk) Licences:—

Untreated milk	...	...	63
Pasteurised milk	...	...	160
Sterilised milk	...	...	126
Ultra Heat Treated milk	...	...	39

During the year 194 samples of designated milk were submitted for statutory tests. The results were as follows:—

Designation.	Satisfactory.	Void.	Unsatisfactory.
Pasteurised	177	3	6
Sterilised	10	—	—
Untreated	2	—	2
Ultra Heat Treated	5	—	—

All the unsatisfactory samples of milk had failed the Methylene Blue Test. Investigations were made into these and in one instance legal proceedings were instituted.

Brucella Abortus.

No positive samples of milk were found.

Ice-Cream.

During the year 83 samples were submitted for bacteriological examination. The results were as follows:—

Grade 1	...	...	...	57
Grade 2	...	...	...	15
Grade 3	...	...	...	11
Grade 4	...	...	...	Nil

Bacteriological Examination of Other Foods.

Samples of chocolate pie, rice pudding, brine solution and sugar confectionery were sent to the Public Health Laboratory for special bacteriological examination. None of the samples showed the presence of pathogenic organisms, and they were reported as being satisfactory.

Meat and Other Foods.

There is one licensed slaughterhouse in the Borough which is in private ownership. The Annual Report for 1966 indicated that the premises were old and that there were many inherent defects, but that

it had been licensed up to the year ending 31st March, 1967. In February, 1967, the Health Committee renewed the licence for a period of three months only, ending on 30th June, 1967. A further application by the licensee for the renewal of the licence was refused and the applicant appealed to the Magistrates' Court against the Committee's decision. The Appeal was heard before the Wallington Magistrates on 17th August, 1967, and the case went over to 22nd August, 28th September, 16th November and 14th December, on which latter date it was finally determined.

The Court came to the conclusion that where breaches of Regulations were alleged it would have been reasonable for such breaches to have been brought to the notice of the licence-holder. Furthermore the Court thought that the Local Authority would have brought the contents of the adverse report considered by the Health Committee to the licence-holder's notice and to have clearly indicated that report as a prime reason for granting a licence for three months only. The Court, therefore, allowed the Appeal and awarded a sum of 600 guineas costs against the Council. At the end of 1967 the Council were considering an Appeal to the Divisional Court.

During the year ten slaughterman's licences were issued under the provisions of the Slaughter of Animals Act, 1958.

Meat Inspection.

Carcasses inspected and condemned where necessary	Cattle	Calves	Sheep & lambs	Pigs
Animals slaughtered	272	17	232	18,632
<i>Diseases except Tuberculosis and Cysticerci</i>				
Whole carcasses condemned	Nil	Nil	Nil	26
Carcasses of which some part or organ was condemned	70	Nil	19	3,444
<i>Tuberculosis only</i>				
Whole carcasses condemned	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned	1	Nil	Nil	527
<i>Cysticerci</i>				
Carcasses of which some part or organ was condemned	3	Nil	Nil	Nil
Carcasses submitted to refrigeration	3	Nil	Nil	Nil
Generalised and totally condemned	Nil	Nil	Nil	Nil

The total weight of meat condemned as unfit for human consumption was 7 tons 15 cwt. 10 lbs.

Four hundred and sixty-seven visits were made to the slaughterhouse for the purpose of meat inspection during the year, and 100% inspection service was maintained.

Poultry Inspection.

The slaughter and dressing of hens and broilers has taken place on one day each week at the slaughterhouse at Mitcham after the slaughtering of other food animals has ceased. The average number of birds handled each week was 200.

The poultry are removed from the place of slaughter to a butcher's shop within the Borough and here they are subject to a

percentage inspection. At no time has it been found necessary to condemn any poultry as unfit for human consumption. These operations have been carried on for a number of years and will continue until the slaughterhouse is closed down, which it is anticipated will be some time during 1968.

Food Premises.

All food which is intended for sale is subject to inspection from the point of production until final sale to the consumer. Closely related to food inspection is the control of the conditions under which food is stored, handled, transported and exposed for sale, and the enforcement of satisfactory standards of hygiene. The inspection of food premises has formed an important part of the work of the Public Health Inspectors during the past year. 5,207 visits were made to premises in which foodstuffs intended for human consumption were prepared, stored or sold. A considerable amount of work was done under the provisions of the Food Hygiene (General) Regulations, 1960, and in general it has been found that food traders are co-operative. I believe that the advice and assistance given by the Inspectors is generally well received and appreciated.

The provisional register of food premises includes the following:

Greengrocers	...	...	...	...	153
Confectioners	...	...	...	...	237
Ice-cream premises	...	...	...	...	486
Bakers	...	...	...	...	64
Grocers and Provision Dealers	...	...	...	...	302
Butchers	...	...	...	...	106
Fishmongers and Fish Fryers	...	...	...	...	56
Milk Distributors	...	...	...	...	126
Chemists	...	...	...	...	50
Licensed premises	...	...	...	...	213
Clubs	...	...	...	...	50
Restaurants and Cafes	...	...	...	...	132
Works Canteens	...	...	...	...	72
School Canteens and Kitchens	...	...	...	...	100
Food Stalls/Vehicles	...	...	...	...	82
Places of Public Entertainment	...	...	...	...	40
					<hr/>
					2,269

The information required by Circular 1/67 in connection with the provision of ablution facilities, sinks and hot and cold water supplies has not yet been compiled.

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	...	486
Registered for the manufacture and sale of ice-cream	...	6
Registered for the preparation or manufacture of sausages	...	73
Registered for the preparation or manufacture of potted, pressed, pickled or preserved food	...	165

The number of inspections of registered food premises during 1967 was 1,060.

Bacteriological Examination of Equipment.

During the year 175 swabbings of articles of equipment used in food premises and catering establishments were submitted to the Public Health Laboratory for bacteriological examination. The results were as follows:—

Article.	No. of swabs		Result.	
	taken.	Satisfactory.	Unsatisfactory.	
Beer mugs and glasses ...	15	14	1	
Wine and spirit glasses ...	7	7	—	
Plates ...	39	36	3	
Cups and beakers ...	37	34	3	
Saucers ...	1	1	—	
Knives ...	18	18	—	
Forks ...	27	25	2	
Spoons ...	31	28	3	

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

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

Food Inspection.

Unsound food which is surrendered to the Health Department is destroyed at the refuse disposal works by arrangement with the Greater London Council.

Excluding meat condemned at the slaughterhouse, the following is a list of unsound food surrendered during 1967:—

	Tons.	Cwts.	Lbs.
Canned foods ...	5	3	62
Frozen foods ...	1	4	21
Meat, bacon and poultry ...	—	17	74
Flour, bread and cereals ...	—	8	65
Yeast ...	—	8	28
Cocoa beans ...	—	7	56
Sugar, jam and syrup ...	—	6	83
Beverages ...	—	6	48
Butter, fat and cheese ...	—	5	101
Sage, salt, salad cream, etc. ...	—	5	19
Dried fruit ...	—	2	77
Fruit and vegetables ...	—	2	28
Rice, macaroni, etc. ...	—	2	19
Fruit and vegetable juices ...	—	1	37
Puddings and pastry ...	—	1	9
Fish ...	—	—	110
Sausages ...	—	—	56
Eggs ...	—	—	45
Meat pies ...	—	—	44
Pie fillings ...	—	—	12
Curry ...	—	—	8
Miscellaneous ...	—	—	17
	10	6	11

The number of complaints received during the year regarding unsound food was 185. 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, but certain of the items marked * in the following list were the subject of legal proceedings.

Foreign bodies found in bread—mould growth on wrapped bread (5); mouldy bread rolls; grease and carbon (4); foreign bodies (3); plastic price ticket; piece of glass; piece of metal; beetle in bread roll; brown mark through loaf.

Dead twig in bottle of milk*

Fruit fly larvae in bottles of milk (2).

Foreign matter in bottle of milk.

Glass fragment in bottle of milk.

Dirty milk bottles (8). See note below.

Mould in pork pies (3)*

Mould in meat pies (2)*

Black substance in veal, ham and egg pie.

Black substance in crust of pork pie.

Piece of wickerwork in meat pie.

Mould on canned ham.

Black substance inside can of ham.

Mould on leg of lamb.

Abscess on pig's liver.

Dead fly and eggs in chicken carcass.

Foreign object in jar of minced chicken.

Mould in can of luncheon meat.

Stone in can of pork luncheon meat.

Wire in smoked luncheon meat.

Discolouration of can of rhubarb.

Iron filings in can of peaches.

Iron in can of grapefruit juice.

Stone in can of blackcurrants.

Insecticide on apples.

Maggot in packet of biscuits.

Nutshell in biscuits.

Mould in apple strudel.

Piece of glass in trifle.

Ants in fruit pie.

Metal in scone*

Foreign matter in cherry sultana cake.

Foreign body in coconut cake.

Piece of wire in Eccles cake.

Glass in doughnut.

Glass in jar of jam.

Iron rust in jars of honey.

Brown stain on piece of bubble gum.

Maggots in Raspberry Ruffles (confectionery).

Foreign matter and insects in Brazil Nougat sweets.

Spider beetles in drinking chocolate*

Worm in green salad.

Dirt in salad lettuce.

Foreign matter in corn flakes.

Foreign body in potato crisps.

Black substance on margarine.

Yoghurt affected by mould.

Hair in frozen fish finger.
 Metal in can of soup.
 Yellow marks on skinless sausages.
 Metal clip in canned corn beef.
 Foreign body in bottle of vinegar.
 Larvae and pupae in bags of flour.
 Drinking straw in capped bottle of drink.

By arrangement with other local authorities, complaints concerning dirty milk bottles which are received by them are referred to me when the bottle has been found to have been filled at one of the establishments within the London Borough of Merton. After investigation (and after report has been made to the Health Committee when necessary) the facts are notified to the local authority concerned.

Sampling of Food and Drugs.

Samples of food and drugs were sent to the Public Analyst, Messrs. Moir & Palgrave, 16 Southwark Street, S.E.1, for examination and report. During the year 1967, 442 samples were submitted of which 250 were formal samples and 192 informal. The Public Analyst reported that of these samples, 420 were found to be genuine, and to comply with the relevant Acts, Orders and Regulations, and that 22 did not so comply.

Particulars of genuine samples.

American ginger ale	...	...	1
American lard	...	...	1
Apple fruit pie	...	...	1
Apple juice	...	...	1
Apple sponge pudding	...	...	1
Apricot filling	...	...	1
Apricot fruit pie	...	...	1
Apricot pudding	...	...	1
Asparagus spears	...	...	1
Assorted wafers	...	...	1
Bacon fingers	...	...	1
Bacon grill	...	...	1
Baked beans in tomato sauce	...	...	2
Barbecue sauce	...	...	1
Beef broth	...	...	1
Beef curry	...	...	1
Beef patties	...	...	1
Beef sausages	...	...	3
Beef steak with gravy	...	...	1
Beef steak pie with kidney	...	...	1
Beef suet	...	...	1
Belgian waffles	...	...	1
Biscuits	...	...	12
Bisk-o-lait	...	...	1
Blackcurrant and apple pie	...	...	1
Blackcurrant health drink	...	...	1
Blackcurrant jam	...	...	1
Blackcurrant pie filling	...	...	1
Blackcurrants in syrup	...	...	2
Black pudding	...	...	1
Boric acid crystals	...	...	1

Bournvita	...	...	1
Brandy	...	...	1
Brie cheese	...	...	1
Brisket	...	...	1
Bristol cream sherry chocolates	...	...	1
Broad beans (canned)	...	...	1
Butter	...	...	13
Butter shortbread	...	...	1
Buttered rolls	...	...	1
Buttered toast	...	...	3
Butter puffs	...	...	1
Camembert—full fat soft cheese...	...	...	1
Canadian apple sauce	...	...	1
Cape Loganberries	...	...	1
Carrots—whole	...	...	3
Cheeseburgers	...	...	1
Cheese spread	...	...	3
Cheez whiz	...	...	1
Cherry chips	...	...	1
Cherry fruit cake	...	...	1
Chicken croquettes	...	...	2
Chicken curry	...	...	2
Chick snak	...	...	1
Chipolatas	...	...	1
Cho-cho peppers	...	...	1
Chocolate flavoured drink	...	...	1
Christmas pudding	...	...	1
Coca Cola	...	...	1
Coffee and chicory essence	...	...	1
Coffee, instant	...	...	4
Coldrex tablets	...	...	1
Cooking oil	...	...	1
Cottage cheese	...	...	1
Country supper	...	...	1
Crab meat	...	...	5
Cream—fresh	...	...	3
Cream—canned	...	...	3
Cream—double	...	...	1
Cream style golden corn	...	...	1
Curry sauce mix	...	...	1
Custard powder	...	...	1
Cydrax	...	...	1
Dairy cream trifle	...	...	1
Damson jam	...	...	1
Emmenthal cheese	...	...	1
Energen starch reduced Terms	...	...	1
Evaporated milk	...	...	2
Farlene	...	...	1
Figs in Syrup	...	...	1
Fish cakes	...	...	1
Fish fingers	...	...	1
Flour confectionery	...	...	7
Frankfurters in brine	...	...	1
Frankfurters, continental	...	...	1
Fruit cocktail in syrup	...	...	1
Fruit and malt loaf	...	...	1

Fruit salad in syrup	...	6
Garden peas, dried	...	1
Gelatine	...	1
Gin	...	2
Ginger punch	...	1
Golden lime juice cordial...	...	1
Gooseberry jam	...	1
Grapefruit juice	...	1
Greengage jam	...	1
Ground nut oil	...	1
Ham—chopped with pork	...	1
Ham—cooked	...	1
Hamburgers in gravy	...	1
Hazel nut spread	...	1
Honey-bear spread	...	1
Honey, pure churned	...	1
Horse-radish relish	...	1
Ice-cream	...	18
Ice lollies	...	4
Irish stew	...	1
Jelly cream (coffee flav.)	...	1
Jiffy-Jelly (lime flav.)	...	1
Junior lamb dinner	...	1
Kidney risotto	...	1
Lamb tongues	...	1
Lembena—drink	...	1
Lemfizz—pineapple flavour	...	1
Lemon cheese with eggs and butter	...	1
Lemon mini-sponges	...	1
Liquafruta	...	1
Long Life beer	...	1
Luncheon sausage	...	1
Macaroni cheese	...	2
Macedoine of vegetables	...	1
Macedoine	...	1
Malt vinegar with caramel	...	1
Mandarin oranges in syrup	...	1
Mango cheeks in syrup	...	1
Maple syrup	...	1
Margarine	...	2
Marzipan	...	2
Mashed potato, instant	...	1
Meat pies	...	1
Mentho-lyptus tablets	...	1
Mexicorn	...	1
Milk, pasteurised	...	32
Milk, ultra heat treated	...	2
Milk chocolate, sugar free	...	1
Mince, lean	...	1
Minced steak and onions with gravy	...	1
Mincemeat	...	1
Mini pork pies	...	1
Mixed vegetables	...	1
Mon Cheri chocolate liqueurs	...	1
Munchmallow (milk choc. biscuits)	...	1
Mushrooms	...	1

Nesquik (raspberry flavour) ...	1
Okra in tomato sauce ...	1
O.K. sauce ...	1
Onion chutney ...	1
Orange crush ...	1
Orange drink ...	2
Orange and pineapple drink ...	1
Ox tongues ...	3
Paella ...	1
Parsley, dried ...	1
Peanut butter ...	1
Peardrax ...	1
Pellao curry rice ...	1
Pickled onions ...	1
Pineapple chunks in syrup ...	1
Pineapple cubes in syrup ...	2
Pineapple in light syrup ...	1
Pineapple real fruit yoghurt ...	1
Plum and walnut with brandy liqueur preserve ...	1
Pork kidneys in gravy ...	1
Pork sausages ...	6
Pork sausages—frozen preserved... 1	1
Pork sausages—skinless ...	1
Prawns ...	1
Prawns, frozen ...	1
Prawn curry with rice ...	1
Prepared Seville oranges ...	1
Processed peas ...	1
Pudding mixture ...	1
Pumpernickel—sliced ...	1
Raspberry fruit pie ...	1
Raspberry jam ...	2
Rhubarb and ginger jam ...	1
Rhubarb in syrup ...	1
Rice—flaked ...	1
Roast beef with gravy ...	1
Rum ...	3
Salad cream ...	1
Salmon fish cakes ...	2
Salmon, red canned ...	6
Salmon and shrimp paste ...	1
Salmon spread ...	1
Salted cashew nuts ...	1
Sardines in tomato sauce ...	2
Sauerkraut—canned ...	1
Sausage meat ...	1
Sausage rolls ...	1
Savoury Quick Jel ...	1
Shandy ...	1
Shrimps—canned ...	1
Simbix ...	1
Sliced cucumber ...	2
Smoked Bavarian cheese with ham	1
Soya sauce ...	1
Spaghetti with tomato cheese sauce	1

Spry	...	...	...	1
Steak casserole	...	...	...	1
Steak and kidney pie	...	...	...	1
Steak pudding	...	...	...	4
Steaklets	...	...	...	1
Stewed steak	...	...	...	6
Stewed steak lean cut	...	...	...	1
Strawberries in syrup	...	...	...	2
Stuffed manzanilla olives	...	...	...	1
Stuffed peppers with rice	...	...	...	1
Sugar confectionery	...	...	...	30
Table jellies	...	...	...	6
Tapioca flakes	...	...	...	1
Tea	...	...	...	2
Thick pea soup	...	...	...	1
Tip Top drink	...	...	...	1
Tomatoes—canned	...	...	...	2
Tomatoes—peeled	...	...	...	2
Tomato ketchup	...	...	...	2
Tomato paste—concentrated	...	...	...	1
Tomato sauce	...	...	...	1
Tomato sauce—concentrated	...	...	...	1
Treacle	...	...	...	2
Tuna fish—canned	...	...	...	1
Turkish Delight	...	...	...	1
Vegetable oil	...	...	...	2
Vegetable sauce	...	...	...	1
Vermicelli with egg	...	...	...	1
Walnut dairy milk chocolate	...	...	...	1
Whiskey	...	...	...	8
Whole hazel nut milk chocolate	...	...	...	1
Wine—sweet white	...	...	...	1

Particulars of non-genuine samples and action taken.

Asian Curried Beans.

Sample of curried beans which was not labelled in accordance with the requirements of the Labelling of Food Order, 1953. Not proceeded with—retailer discontinued business.

Beans in Tomato Sauce.

One of the ingredients specified as 'seasonings' is not an appropriate designation for the purpose of the Labelling of Food Order, 1953. Label amended.

Minced Beef and Onion with Gravy.

Sample contained lean beef 26.2%, beef fat 8.7% (total meat 34.9%) and excess fat 3.2%. In the Public Analysts opinion the meat content must be at least 50%. To await proposed legislation concerning canned meat.

Blackcurrant and Liquorice Sweets.

Sample of sugar confectionery, the wording on the wrappers not complying with labelling legislation. Wrapper amended.

Procea Bread.

In the opinion of the Public Analyst it was misleading to label this bread 'Less of the calories' and at the same time 'All of the goodness', as, weight for weight, the number of calories present were approximately the same as ordinary white bread. Label amended.

Peppermint Chocolate.

An informal sample of imitation chocolate confectionery in which no trace of peppermint flavour could be detected. Stock exhausted—no other samples obtainable.

Fruit Salad in Heavy Syrup.

Contained a deficiency in peaches and contained an excess of apricots. Informal action taken.

Gherkins

Salt not shown as ingredient on label. Label amended.

Gin and Bitter Lemon Liqueur Chocolates.

The chocolates were partly faulty in condition and strength due to perforation of chocolate and loss of alcohol. Informal action taken.

Gooseberry Crunchy Sponge.

In the Public Analyst's opinion the necessity to add one egg and some sugar should have been stated on the label so as not to mislead the purchaser. Label amended.

Lancashire Hot Pot.

The ingredients specified as 'seasoning' is not an appropriate designation. Label amended.

Milk Shake Syrup.

The list of ingredients on the label did not include the full contents of the sample. Informal action taken.

Milk (Pasteurised).

The sample was slightly deficient in milk solids; 8.42% as against a minimum of 8.5%. Informal action taken.

Milk (Pasteurised).

The sample contained 2.85% milk fat and 8.42% milk solids other than milk fat; as against 3% and 8.5% respectively as required by the Sale of Milk Regulations, 1939. Legal proceedings instituted against vendor were dismissed by the court.

Channel Islands Milk (Pasteurised).

The sample was deficient in milk fat; 3.7% as against 4% as required by the Milk and Dairies (Channel Islands and South Devon Milk) Regulations, 1956. Legal proceedings were instituted against vendor who was conditionally discharged for six months and ordered to pay £6 12s. 0d. fees and court costs.

Untreated Milk.

The sample contained 2.63 % milk fat; as against minimum of 3 % required by the Sale of Milk Regulations 1939. Legal proceedings instituted against vendor were dismissed by the court.

Peppermint Chocolates.

Peppermint sweets consisting mainly of a white boiled sugar base with a cocoa substance incorporated in the middle. The substance was not chocolate. Informal action taken.

Red Kidney Beans.

The ingredients of this sample of red kidney beans with sauce containing two or more ingredients, were not specified on the label. Label amended.

Shandy.

Sample contained alcohol not more than 1.4% proof spirit whereas the Public Analyst was of the opinion that shandy should contain not less than 1.5% proof spirit. Informal action taken.

Sugarless Instant Jelly.

Although the sample contained the ingredients specified on the label the claim of being ' Specially Prepared for Diabetics and Those Needing a Sugar-free Diet ' could be misleading because of the calorie content of the article. Informal action taken.

Strawberry Flavoured Jelly.

A table jelly in which no fruit or fruit juices could be detected causing the illustration of whole strawberries on the carton to be misleading and calculated to deceive the purchaser. Label amended.

Sunny Spread.

Made from invert sugar, honey, colouring and flavouring as specified on the label, considerable precipitation of dextrose had occurred, possibly due to long storage, causing the spread not to be of the nature or quality demanded. Informal action taken.

The following eleven samples were submitted for special examination, the results being as shown:—

Apples	...	...	Genuine
Baby food	...	...	Genuine
Corn flakes	...	...	Genuine
Eccles cake	...	...	Genuine
Fruit cake	...	...	Non-genuine
Medicine	...	...	Genuine
Milk (2)	...	...	Non-genuine (2)
Potato crisps	...	...	Non-genuine
Steak and kidney pie	...	...	Non-genuine
Vinegar	...	...	Non-genuine

Further particulars regarding the six non-genuine samples are given below:—

Fruit Cake.

Complaint by purchaser; dark foreign substance found to be beetle parts and animal fibres. Informal action taken.

Milk (1).

Complaint by purchaser; dark coloured marks inside milk bottle consisted of a mixture of dried milk solids, miscellaneous dirt and mould growth. Vendor prosecuted; absolute discharge; costs of £5 5s. 0d. Same milk bottle also contained dead woody twigs and branches; fined £20 with a further £5 5s. 0d. costs.

Milk (2).

Complaint by purchaser; small dark coloured particles and a larger piece of foreign matter deposited at bottom of milk bottle found to be one small dead weevil and miscellaneous dust and dirt. Informal action taken.

Potato Crisps.

Complaint by purchaser; foreign matter consisting of two hard lumps of dirty-looking yellowish-brown horny substance found to be a many times cooked piece of potato. Informal action taken.

Steak and Kidney Pie.

Complaint by purchaser; piece of wicker-work wood baked in the pie. Informal action taken.

Vinegar.

Complaint by purchaser; cream coloured cylindrical object lying in bottle found to consist of a compact mass of bacteria. Informal action taken.

All food complaints are thoroughly investigated, and this includes interviews with the complainants, and with vendors; visits to places of sale, storage and manufacture or processing, and consultations with the Public Analyst and with other persons concerned. Informal action is taken when it appears impracticable to recommend legal proceedings, or when the complainant is unwilling to give evidence as to purchase. Investigation of these matters has one end in view—the prevention of a recurrence of the incident.

Other Legal Proceedings.

Food and Drugs Act, 1955—Sections 36 (1) and 43.

Designated milk sold by Registered Distributor which was not the designation for which the defendant was licensed, and for the sale of milk which on two occasions failed to pass the methylene blue test. Both cases dismissed on the submission that proceedings were taken out of the time limit.

Food and Drugs Act, 1955—Section 2.

Scone contained a piece of metal. Defendants pleaded guilty; fined £20 with £6 6s. 0d. costs.

Pork pie affected with mould growth. Defendants pleaded guilty; fined £10 with £6 6s. 0d. costs.

Two meat pies affected with mould growth. Defendants pleaded guilty; fined £25 with £6 6s. 0d. costs.

Drinking chocolate infested with spider beetles; defendants pleaded guilty; fined £15 with £5 5s. 0d. costs.

Food Hygiene (General) Regulations, 1960.

Cafe premises in insanitary condition, and other matters. Defendant did not appear; eight contraventions proved; fined £25 with £8 costs.

Hand washing facilities not provided in food premises. Defendant pleaded not guilty; case proved; fined £1 with £3 3s. 0d. costs.

Forecourt and doorway of vacant shop premises used for retailing vegetables. Defendant pleaded not guilty to all four summonses but was found guilty; fined £8 with £6 costs.

Forecourt and doorway of vacant shop premises used on two occasions for retailing vegetables. The two defendants each pleaded guilty to four offences, and not guilty to an alleged fifth offence which was dismissed; both defendants fined £4 each; costs not allowed.

SERVICES UNDER OTHER ENACTMENTS

Rent Act, 1957—Certificates of Disrepair.

The following is a summary of applications dealt with during 1967:—

Applications received (Form I)	...	...	...	3
Decisions not to issue Certificates	...	...	...	Nil
Certificates issued (Form L)	...	...	...	4
Undertakings given (Form K)	...	...	...	Nil
Number of visits made	...	...	...	61

Shops Acts, 1950-65.

Shops in the Borough have been kept under observation and contraventions have been remedied. Excellent relations exist between the three Chambers of Commerce and the Department, and advice has been given both to the Chambers and to shopkeepers. Action has also been taken in respect of general closing hours, half-day closing and Sunday trading.

During the year a new system of Inspection Records has been introduced and an up-to-date list of shop premises has been compiled.

Offices, Shops and Railway Premises Act, 1963.

Work under this legislation was continued during 1967, with the specialist staff appointed for the purpose. The majority of owners and occupiers of premises which require to be registered have submitted Form OSR 1. It has been found necessary to maintain a record of unoccupied premises in order that observation may be made to ensure registration when they are reoccupied.

The co-operation of employers has been most encouraging and no serious objection has been raised as to the manner in which the enforcement of the Act is being 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 a General Inspection During the Year
Offices	52	695	142
Retail Shops	71	1,228	362
Wholesale Shops, Warehouses ...	7	42	21
Catering Establishments open to the Public, Canteens	10	153	32
Fuel Storage Depots	—	5	1
Totals	140	2,123	558

Contraventions rectified.

Cleanliness	212
Overcrowding	25
Temperature	149
Ventilation	15
Lighting	19
Sanitary conveniences	136
Washing facilities	93
Eating facilities	4
Clothing accommodation	17
Sitting facilities	2
Floors, passages, stairs	78
Dangerous machinery guarded	31
First aid provisions	142
Abstract of Act posted	182
Not registered	16

Exemptions.

No exemptions (Section 46) were granted in 1967.

Accidents Reported and Investigated.

In offices	5
In retail shops	27
In wholesale shops and warehouses	4
In catering establishments open to public; in canteens, etc.	1

No reports of serious accidents were received during the year. Every accident reported, however, was followed up and advice given to the employers concerned. It is interesting to note that the majority of the accidents reported during 1967 occurred in retail food premises.

The total number of visits of all kinds made by the specialist staff and by the Public Health Inspectors during 1967 was 3,417.

Prevention of Damage by Pests Act, 1949.

The following table summarises surface rodent control work which was carried out during 1967.

Number of Properties inspected as a result of			Number of Properties found to be infested by		Number of premises treated including retreatments	Visits made including reinspections
Notification	Survey under Act	Total	Rats	Mice		
1,291	2,840	4,131	1,037	185	1,214	10,365

The inspection and treatment of sewers was undertaken in collaboration with the Borough Surveyor. Ten per cent. of the total manholes in the whole sewer system were test baited, and maintenance treatment was carried out in these, and other manholes known to be infested, four times during the year. During 1967, 683 manholes were baited and only 86 showed evidence of rodent infestation.

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

Other Pest Control Work.

During the year 1967, 613 complaints were received concerning insect pests and the following is a list of the infestations dealt with:—

Ants	...	...	...	...	23
Bees	...	...	...	...	26
Beetles	...	...	...	...	18
Bedbugs	...	...	...	...	18
Cockroaches	...	...	...	...	11
Fleas	...	...	...	...	19
Flies	...	...	...	...	27
Lice	...	...	...	...	1
Maggots	...	...	...	...	9
Mealworms	...	...	...	...	2
Mites	...	...	...	...	1
Mosquitoes	...	...	...	...	20
Silverfish	...	...	...	...	5
Slugs	...	...	...	...	1
Snails	...	...	...	...	1
Spiders	...	...	...	...	1
Wasps	...	...	...	...	395
Woodworm	...	...	...	...	5

Where possible practical help is given by the carrying out of disinfestation work, but in certain cases reference is made to contractors who specialise in control work.

The incidence of wasps was again generalised during 1967. No charge is made for the destruction of nests, but this work can only be undertaken when the nest is readily accessible. If the number of requests for assistance exceeds our capabilities, householders are advised as to the best, and safest, methods of destruction.

Ponds, ditches and other mosquito breeding grounds were sprayed with insecticide as found necessary, with satisfactory results.

Sixty-four complaints of nuisance or damage caused by feral pigeons were received. Pigeon traps were placed on suitable sites, giving effect to a reduction in the number of birds. The situation regarding the positive reduction in the number of pigeons is still very unsatisfactory.

Pet Animals Act, 1951.

Twelve licences to keep Pet Shops were issued during 1967. Thirty-three visits were made to these premises to ensure compliance with the conditions attached to the licences.

Animal Boarding Establishments Act, 1963.

One application for the renewal of a licence was not recommended.

The Riding Establishments Act, 1964.

Three applications for a licence to keep a riding establishment were received during the year, all of which were granted.

Diseases of Animals Act, 1950.

No outbreaks of disease occurred within the Borough during 1967. Many movement licences authorising the transfer of pigs from areas affected by Swine Fever Orders to the slaughterhouse at Mitcham were received during the year.

Numerous copies of Orders made by the Ministry of Agriculture, Fisheries and Food were received in respect of the unprecedented widespread epidemic of Foot and Mouth Disease, together with those concerning outbreaks of Swine Fever and Fowl Pest.

On 18th November, 1967, the whole of England and Wales was declared by the Ministry to be a controlled area for the purpose of preventing the spread of Foot and Mouth Disease. The effect of the Order was that no movement of animals was permitted except under licence granted by the Inspector of the Local Authority into whose district the animals were to be moved. Up to the end of the year, 120 Movement Licences were issued, permitting 3,299 pigs, 5 sheep and 28 cattle to be taken to the Mitcham slaughterhouse for slaughter. The Foot and Mouth Disease (Controlled Areas) Special Order No. 10, 1967, was still in force at the end of 1967.

During the year a meat van was notified to me as having carried Swine Fever infected material. After considerable difficulty this motor van was traced and was brought to Mitcham where it was disinfected in accordance with Ministry requirements.

Clean Air Act, 1956.

During 1967, 132 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 the occupier of industrial premises for contravention of the Dark Smoke (Permitted Periods) Regulations, 1958, in permitting an emission of dark smoke from the chimney of an incinerator for nineteen minutes in a period of twenty-nine minutes. The defendant, who pleaded guilty, was fined £20 with £10 10s. 0d. costs.

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

In 21 instances plans which were deposited for Building Regulations 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 height of the chimneys in relation to Section 10 of the Act were sent to the Borough Surveyor.

Measurement of Atmospheric Pollution.

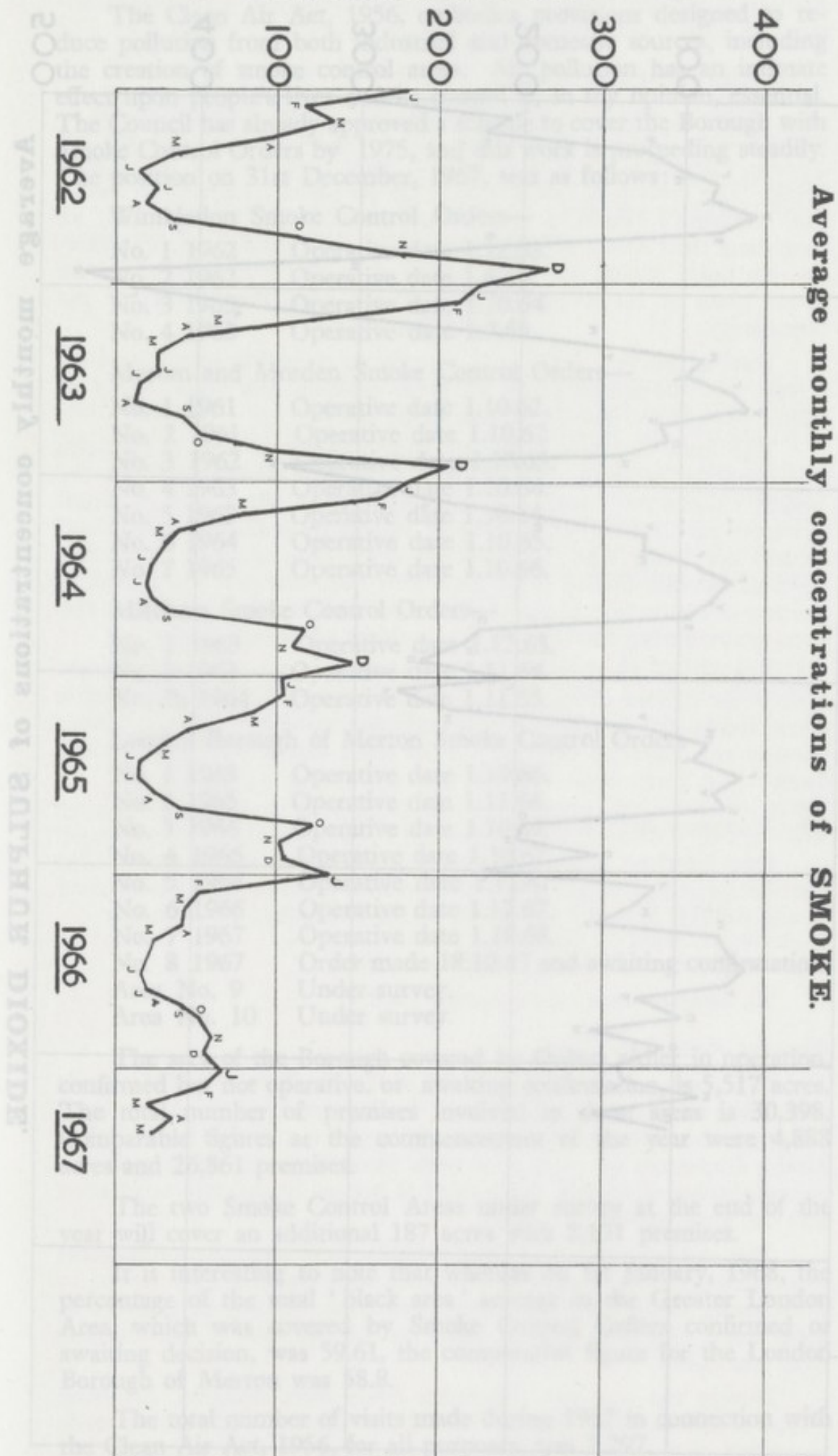
The Health Department maintained two single port instruments and six eight port instruments which are sited in approved positions in the Borough. These instruments, which record smoke density and sulphur dioxide content in the atmosphere, are visited daily in the case of single port instruments and weekly in the case of eight port instruments. Recordings are standardised and the results are sent monthly to the Ministry of Technology.

It is of value to the practical aspects of the control of air pollution to be able to equate action taken with measurements which show improvement. In previous Annual Reports, the average monthly results have been expressed in the form of tables, but in the following pages these results are depicted by means of graphs. The figures for 1967 are only available up to the month of May but it is hoped, in succeeding years, to show the complete graphs for the year of the Report.

It is pleasing to note the steady fall during the winter months, in smoke concentrations in the atmosphere, due undoubtedly in some measure to the coming into operation of Smoke Control Orders.

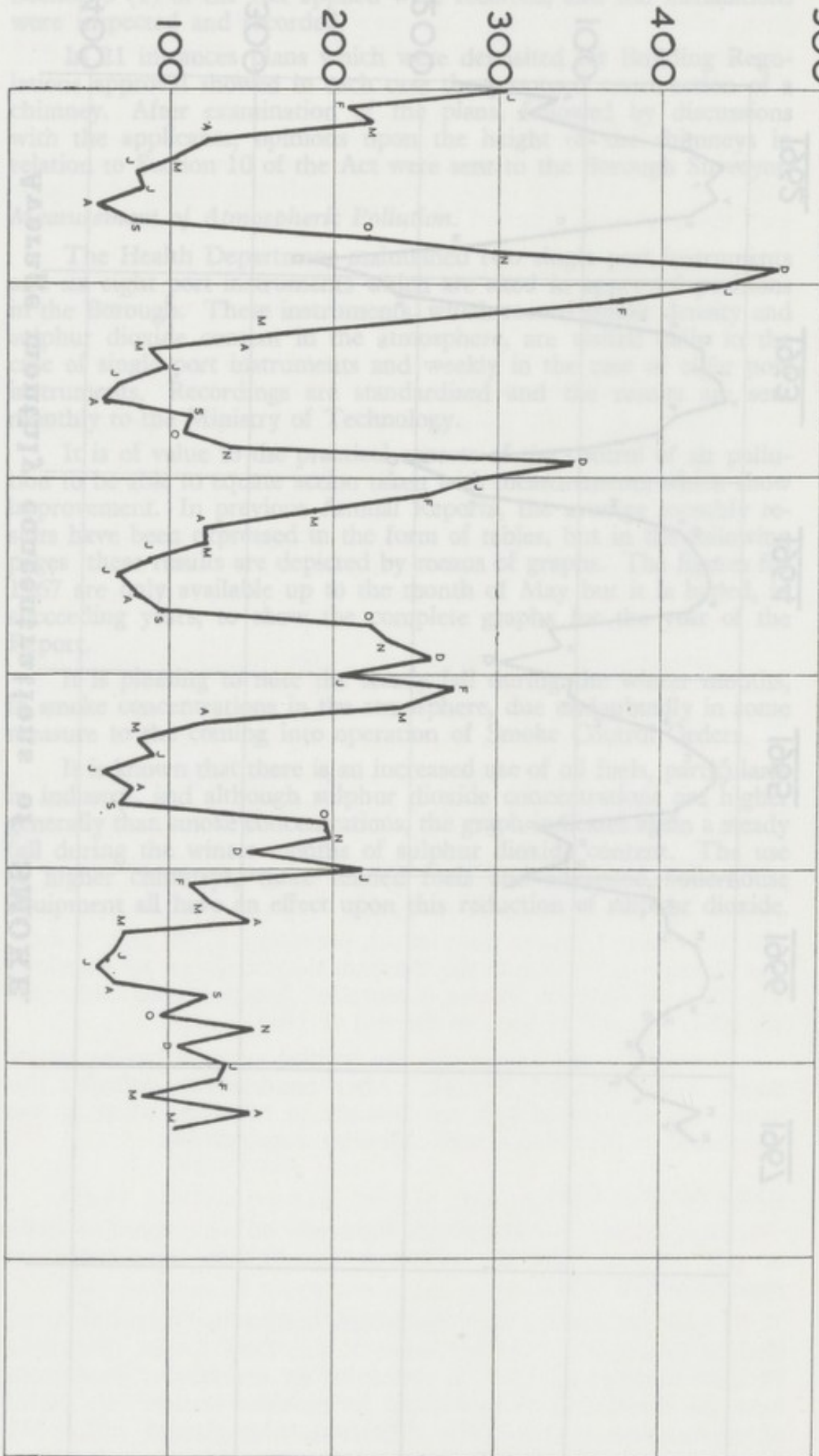
It is known that there is an increased use of oil fuels, particularly in industry, and although sulphur dioxide concentrations are higher generally than smoke concentrations, the graph indicates again a steady fall during the winter months of sulphur dioxide content. The use of higher chimneys, more refined fuels and advanced boilerhouse equipment all have an effect upon this reduction of sulphur dioxide.

microgrammes per cubic metre of air.



microgrammes per cubic metre of air.

Average monthly concentrations of SULPHUR DIOXIDE.



Smoke Control Areas.

The Clean Air Act, 1956, embodies provisions designed to reduce pollution from both industrial and domestic sources, including the creation of smoke control areas. Air pollution has an intimate effect upon people's lives and its control is, in my opinion, essential. The Council has already approved a scheme to cover the Borough with Smoke Control Orders by 1975, and this work is proceeding steadily. The position on 31st December, 1967, was as follows:—

Wimbledon Smoke Control Orders—

No. 1 1962	Operative date 1.12.63.
No. 2 1962	Operative date 1.6.64.
No. 3 1963	Operative date 1.10.64.
No. 4 1963	Operative date 1.7.65.

Merton and Morden Smoke Control Orders—

No. 1 1961	Operative date 1.10.62.
No. 2 1961	Operative date 1.10.62.
No. 3 1962	Operative date 1.10.63.
No. 4 1963	Operative date 1.10.64.
No. 5 1963	Operative date 1.10.64.
No. 6 1964	Operative date 1.10.65.
No. 7 1965	Operative date 1.10.66.

Mitcham Smoke Control Orders—

No. 1 1963	Operative date 1.12.63.
No. 2 1963	Operative date 1.11.64.
No. 3a 1964	Operative date 1.11.65.

London Borough of Merton Smoke Control Orders—

No. 1 1965	Operative date 1.10.66.
No. 2 1965	Operative date 1.11.66.
No. 3 1966	Operative date 1.10.67.
No. 4 1966	Operative date 1.10.67.
No. 5 1966	Operative date 1.11.67.
No. 6 1966	Operative date 1.12.67.
No. 7 1967	Operative date 1.10.68.
No. 8 1967	Order made 18.10.67 and awaiting confirmation.
Area No. 9	Under survey.
Area No. 10	Under survey.

The area of the Borough covered by Orders either in operation, confirmed but not operative, or awaiting confirmation, is 5,517 acres. The total number of premises involved in these areas is 30,398. Comparable figures at the commencement of the year were 4,888 acres and 26,861 premises.

The two Smoke Control Areas under survey at the end of the year will cover an additional 187 acres with 2,131 premises.

It is interesting to note that whereas on 1st January, 1968, the percentage of the total 'black area' acreage in the Greater London Area, which was covered by Smoke Control Orders confirmed or awaiting decision, was 59.61, the comparative figure for the London Borough of Merton was 58.8.

The total number of visits made during 1967 in connection with the Clean Air Act, 1956, for all purposes, was 7,297.

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

Noise Abatement Act, 1960.

Excessive and unwanted noise is one of the great problems of modern life. Noise levels in this and many other countries are becoming intolerable, and unnecessary noise is a menace of modern living. The growth of motor traffic, the jet plane, complicated industrial machinery, building operations, music from public halls, all contribute their quota of noise. There is an increasing public awareness that noise, which has been described as the wrong sound in the wrong place at the wrong time, interferes with the comfort of the community.

During the year 1967, 105 complaints regarding noise were received, and the investigation of these entailed 466 visits, many of which were made outside normal office hours.

The most common causes of noise complaint were in factories (26), domestic premises (19) and road works (7). During the year the Health Committee considered the Ministry of Housing and Local Government Circular 22/67 which relates to industrial noise, and records are being kept in accordance with the requirements of that Circular. Public Health Inspectors have been and are still attending courses of instruction in noise abatement and particular attention has been given during the year to the problem of noise.

During the year legal proceedings were instituted in three cases against the drivers of ice-cream vehicles for sounding chimes outside permitted hours. In each case the defendants pleaded guilty and were fined in two cases £5 each and in the third case £3 with £3 3s. 0d. costs.

The Pharmacy and Poisons Acts, 1933-1941

One hundred and thirty-seven applications were received for Certificates of Entry, Retention or Alteration from persons who wished to sell poisons included in Part II of the Prescribed Poisons List.

The Fertilisers and Feeding Stuffs Act, 1926.

No samples were taken during 1967.

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. Public Health Inspectors are concerned with Slum Clearance, the repair and reconditioning of houses, the control of houses in multiple occupation and the improvement of houses.

The implementation of the Council's slum clearance programme was continued, and a number of houses were inspected for repair, or for Closing Order or Demolition procedure. The total number of visits made to premises of all kinds for the purposes of the Housing Acts was 2,445.

During the year two Clearance Areas were declared, involving a total of 129 dwelling houses. In addition Closing Orders were made in respect of six other dwelling houses.

Caravan Sites and Control of Development Act, 1960.

One licence authorising land to be used as a site for a caravan for a limited period of time expired during 1967.

The number of site licences operating at 31st December, 1967, was five, and the permitted number of caravans, including those kept on two sites occupied by members of the Showmen's Guild, was 41. Sixty-three visits were made to sites during the year.

From time to time itinerant caravans were found to be parked on unauthorised sites and as the result of visits, the occupiers were persuaded to remove their vehicles.

CONCLUSION

It is hoped that this Report reflects the good standard which has been maintained and the variety of work which has been covered by the Public Health Inspectors, Technical Assistants and clerical staff.

On 1st January, 1967, there were three vacancies for District Public Health Inspectors. During 1967 one further Inspector left, having obtained an appointment elsewhere, and two Inspectors were appointed, leaving a deficiency at the end of the year of two. In addition two Inspectors gave notice during December of their intention to leave the Department early in 1968.

During the year one Pupil qualified as a Public Health Inspector and it is pleasing to record that he was awarded a 'Travelling Scholarship' (£50) by the Governors of the South East London Technical College. Two additional Pupils were appointed, making four in training at the end of the year.

My thanks are due to the staff for the extra effort required of them in maintaining coverage of those districts in the Borough where there was no Inspector and, at the same time, ensuring a 100% meat inspection service at the slaughterhouse.

G. H. COCKELL

Chief Public Health Inspector.

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ANNUAL REPORT

to the

EDUCATION COMMITTEE

on the work of the

SCHOOL HEALTH SERVICE

for the year

1967

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To the Chairman and Members of the Education Committee:

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report on the School Health Service of the London Borough of Merton for the year 1967.

The health of school children in Merton during the year was generally good. The percentage of school children whose general condition was found to be satisfactory was 99.93 compared with 99.91 in 1966.

School medical inspections totalled 12,780 (9,607 routine inspections and 3,173 special inspections and re-inspections) compared with 14,078 (11,205 routine inspections and 2,873 special inspections and re-inspections) in 1966. At routine and other medical inspections 7,174 defects, mostly minor in character, were found compared with 6,490 during 1966.

There were no serious staffing difficulties apart from staff absences, due to illness.

Discussions were held during the year with the Principal School Medical Officer of the London Borough of Kingston-upon-Thames, regarding increased use of the joint staff of the two Boroughs in the Audiology Service, as a result of which it would be possible for the two Boroughs to provide their own training facilities for Health Visitor in sweep tests of hearing of young children, and to provide for a closer link between the Maternity and Child Welfare Service and the School Health Service.

It is a matter of considerable satisfaction to report that no case of tuberculosis in school children or in teaching staff was notified during the year.

I am grateful for the help and co-operation received from the Chief Education Officer and his staff, from Head Teachers and from the many School Secretaries in the Borough. My thanks are also given to the medical, dental, nursing and other staff of the Department for the satisfactory and efficient manner in which their respective duties were carried out during the year.

I should especially like to thank Mr. W. Atkinson, my Chief Administrative Officer, and Mr. E. A. Ayling, the Senior Clerk of the School Health Service Section, for their contributions in connection with the preparation of this Report.

I am grateful for the continued support and encouragement so kindly extended to me at all times by the Chairman and Members of the Education Committee and the Special Services (Education) Subcommittee.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

P. J. DOODY,

Principal School Medical Officer.

SPECIAL SERVICES (EDUCATION) SUB-COMMITTEE

(As at 31st December, 1967)

Chairman: Councillor (Mrs.) W. R. Castle

Councillor A. Leivers, J.P., F.I.D., M.N.I.H. (Vice-Chairman)

Councillors:

Sir Cyril Black, J.P., D.L., M.P. E. H. Ceci P. Corbishley

W. Reay G. N. Smith R. A. Spalding W. G. Terrett

(Mrs.) J. E. Vowles

Co-opted Members:

The Rev. C. H. Smith, M.A. G. W. B. Hawkins, M.B.E.

Ex-Officio:

Alderman V. Talbot, J.P.

(Chairman of the Education Committee)

Councillor A. M. Anderson, M.A.

(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:	2nd and 4th Thursday mornings.	Examination of cases referred by Teachers, Education Depart- ment, Health Visitors, etc.: Treatment of minor ailments.
Grand Drive, Raynes Park:	Tuesday mornings.	
Middleton Road, Morden:	Monday afternoons.	
Morden Road, Merton:	Monday mornings.	
Pelham Road, Wimbledon:	Monday and Wednesday mornings.	
Western Road, Mitcham:	Monday and Friday mornings.	
Wide Way, Mitcham:	Wednesday mornings.	

Child Guidance Clinics

97 Worple Road, Wimbledon:	Monday to Friday all day.
Sherwood House, Commonside East, Mitcham:	

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

Ophthalmic Clinics

Amity Grove, West Wimbledon:	Friday afternoons.	Examination and treatment of errors of refraction and squint.
Grand Drive, Raynes Park:	Friday afternoons.	
Morden Road, Merton:	Wednesday afternoons.	
Pelham Road, Wimbledon:	Friday mornings.	
Western Road, Mitcham:	Wednesday afternoons.	
Wide Way, Mitcham:	Tuesday mornings.	

Orthopaedic Clinic

Pelham Road, Wimbledon:	Every fourth Wednes- day afternoon each month.	Examination of referred cases by an Orthopaedic Surgeon.
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Audiology Clinic

Russell Road, Wimbledon:	Alternate Friday morn- ings.	Detailed investigation of cases referred.
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Remedial Exercises

Amity Grove, West Wimbledon:	Tuesday mornings.	Remedial and breathing exercises as recommended by School Medical Officers.
Pelham Road, Wimbledon:	Tuesday and Thursday afternoons.	
Wide Way, Mitcham:	Tuesday afternoons.	

Speech Therapy Clinics

Amity Grove, West Wimbledon:	Wednesday mornings.	Treatment of speech defects.
Grand Drive, Raynes Park:	Tuesday mornings and Wednesday all day.	
Middleton Road, Morden:	Tuesday mornings and Wednesday afternoons.	
Morden Road, Merton:	Thursday mornings.	
Russell Road, Wimbledon:	Monday all day and Tuesday afternoons.	
Western Road, Mitcham:	Tuesday all day and Thursday mornings.	
Wide Way, Mitcham:	Friday mornings and afternoons.	

Dental Clinics

Amity Grove, West Wimbledon:	Monday to Friday all day.
Church Road, Mitcham:	Monday and Wednesday all day.
Grand Drive, Raynes Park:	Monday to Thursday all day.
Meopham Road, Mitcham:	Monday, Tuesday, Thursday, Friday, all day.
Middleton Road, Morden:	Monday to Friday all day.
Morden Road, Merton:	Monday, Wednesday Friday, all day.
Pelham Road, Wimbledon:	Monday to Friday all day.
Western Road, Mitcham:	Monday to Friday all day.

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).
2. During the year in which eight years of age is reached.
3. On entry to Grammar, Technical and Secondary Schools.
4. During the year in which 15 years of age is reached.
5. 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	...	...	...	39
Number of children tested	...	...	...	2,227
Number of primary failures	...	...	...	134

SPEECH THERAPY

Due to the appointment of an additional Speech Therapist, the Service was more efficient during the year, since it became possible to interview, advise and treat many more children in the Borough, and waiting lists were thus reduced. The Speech Therapy Service was, however, still overloaded and this position can only be improved if we continue to have a full complement of Speech Therapists. Experience has taught us that, in general, Speech Therapists are inclined to leave the Service after a few years.

Number of sessions held: (a) for treatment	1,460
(b) for consultation	243

Number of cases on register at beginning of year	176
--	-----

Number of cases added during year	203
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Number of cases discharged during year	132
--	-----

Number of cases on register at end of year	247
--	-----

Cases discharged during the year who:—

Achieved normal speech	52
------------------------	----

Were greatly improved	30
-----------------------	----

Showed some improvement	28
-------------------------	----

Showed little or no improvement	12
---------------------------------	----

Other reasons	10
---------------	----

Analysis of cases treated during the year:—

Stammering	27
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Dyslalia	240
----------	-----

Cleft palate	11
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Dysarthria	4
------------	---

Cluttering	4
------------	---

Aphasia	5
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Defects of voice	4
------------------	---

Defective speech due to deafness	11
----------------------------------	----

Retarded speech	79
-----------------	----

THE WORK OF THE SCHOOL NURSES

The work of the Health Visitors/School Nurses during 1967 did not differ, to any great extent, from that in 1966.

Visits to Schools for immunisation programmes and Mantoux/B.C.G. continued. The Mantoux/B.C.G. programme was completed for the whole Borough in two weeks, with the exception of those who were absent and had to be dealt with at a later period.

Health Visitors assist School Medical Officers at routine medical inspections in Infant and Junior Schools, and State Registered Nurses assist in Senior Schools. The Health Visitor often knows the younger children and their families.

In many Schools where hygiene inspections are still carried out, this is done by the Health Visitors. In most Schools, the Health Visitor/School Nurse is well-known to the Head Teacher and teaching staff.

The Pilot Scheme under which talks were given to mixed groups of children in Western Road Secondary School proved successful, and

was continued during the year. Talks by a Health Visitor were also part of the weekly curriculum in Willows Girls' School, Morden, and Ricards Lodge Girls' School, Wimbledon.

As in 1966, courses have been run for Red Cross diplomas and the Duke of Edinburgh award, after school hours, in Mitcham and Morden Clinics. These have been given on request and have proved popular with the girls attending them. The results were encouraging.

Dr. Cicily Clarke, Assistant Medical Officer, has contributed the following comments on the work she carries out at Pelham Road Clinic every third Monday morning each month.

'Judging by the number of referrals it would seem that this Clinic continues to serve a useful purpose, probably the most important factor is that sufficient time can be given to each child and its parents to enable one to form a reasonable assessment of the problem at issue and to decide on the most appropriate action.

Difficulties affecting children of different ages, presented in a wide variety of ways, have been dealt with. Some have been resolved; others have been sent on to the Child Guidance Service for full assessment and specialist help.'

CHILD GUIDANCE SERVICE

1. Staffing

Mitcham Child Guidance Clinic suffered a severe loss when Dr. A. R. Wilson, the Psychiatrist, left in December to take up a senior post in Inner London. Fortunately a successor was soon found in Dr. P. E. Lomas, who is available for four sessions per week—although the establishment provides for six sessions.

The establishment of psychotherapists was increased from one to two, to enable each of the two clinics to have a full-time psychotherapist. As had been feared, however, it has proved extremely difficult to attract suitable applicants for the newly-created post: at the time of printing there are two possible candidates in the offing, but at present the existing psychotherapist, Mrs. M. Livesey, is attempting to share her services between the two clinics.

Mrs. I. Windebank joined the Service as the third psychiatric social worker, her time being shared between the two clinics. It was gratifying to see this long-standing vacancy at last filled.

In all other respects, too, the staffing position was satisfactory.

2. Accommodation

The new Wimbledon Child Guidance Clinic at 97 Worple Road came into operation after Easter and is a great improvement on the previous premises at All Saints Road.

Mitcham Clinic, however, is somewhat limited in its accommodation and with a view to improving the position, the Borough Architect designed a small extension which would provide four additional small rooms when funds permit.

3. Remedial Classes

The three remedial classes based at Manor House Nursery School, Malmesbury Primary School and Lonesome Junior School continue to function satisfactorily.

4. School Provision for Maladjusted Children

The Authority's plans for expanding its school provision for maladjusted children were submitted to the Department of Education and Science: as recently reported to the Committee, however, the proposal to build a new St. Christopher's E.S.N. School and to convert the present building into a maladjusted school has not been approved for the 1969-70 Special Schools Building Programme.

5. Visits to Schools

As instructed by the Committee, the Assistant Education Officer for Special Services visited a number of residential special schools where Merton children are placed, to inspect the educational and living facilities. The educational psychologists and psychiatric social workers have also made such visits when necessary to ensure correct placement of maladjusted children.

(A) The General Work of the Child Guidance Clinics

1. *New Referrals.*

				M.	F.	Total.
(a) Referring agencies:—						
Courts or probation officers	...	...	...	4	5	9
School Health Service	...	...	...	33	17	50
Hospitals or specialists	...	...	...	2	1	3
General practitioners	...	...	...	9	4	13
Schools	...	...	...	42	18	60
Parents	...	...	...	17	5	22
Others	...	...	...	24	12	36
Total				131	62	193

(b) Predominant reasons for referral:—						
Nervous disorders	...	...	...	19	11	30
Behaviour problems	...	...	...	78	31	109
Habit disorders	...	...	...	2	—	2
Educational problems	...	...	...	30	17	47
Psychosomatic disorders	...	...	...	—	2	2
Others	...	...	...	2	1	3
Total				131	62	193

(c) Number of cases on diagnostic waiting list				15	7	22
--	--	--	--	----	---	----

(d) Reasons why no diagnostic interview undertaken:—					
Transferred to other areas	...	...	1	1	2
Failed to attend appointments	...	...	6	6	12
Improved	...	...	3	6	9
Other reasons	...	...	7	6	13
Total			17	19	36

(e) Ages of children when referred:—					
Under 5 years	...	...	10	4	14
5 - 6 years	...	...	26	5	31
7 - 8 years	...	...	34	20	54
9 - 10 years	...	...	21	9	30
11 - 12 years	...	...	16	15	31
13 - 14 years	...	...	16	5	21
Over 14 years	...	...	8	4	12
Total			131	62	193

2. New Cases Seen.

(a) Referring agencies:—			M.	F.	Total.
Courts or probation officers	...	...	4	5	9
School Health Service	...	...	25	17	42
Hospitals or specialists	...	...	3	1	4
General practitioners	...	...	7	3	10
Schools	...	...	41	17	58
Parents	...	...	16	5	21
Others	...	...	26	9	35
Total			122	57	179

(b) Range of intelligence quotients of cases:—					
Inferior I.Q. below 71	...	...	2	4	6
Limited I.Q. 71 - 85	...	...	11	8	19
Low average I.Q. 96 - 105	...	...	19	8	27
Average I.Q. 96 - 105	...	...	27	11	38
Good average I.Q. 106 - 115	...	...	18	6	24
Above average I.Q. 116 - 130	...	...	18	7	25
Superior I.Q. 131 - 150	...	...	3	1	4
Exceptional I.Q. 151+	...	...	—	—	—
Not tested	...	...	20	12	32
Untestable	...	...	4	—	4
Total			122	57	179

(c) Action taken:—					
Consultation and advice	...	...	28	17	45
Psychotherapy	...	...	7	10	17
Placed on waiting list for psychotherapy	...	...	13	3	16
Remedial tuition	...	...	5	2	7
Case-work with parents only	...	...	14	6	20
Placement in special schools etc.	...	...	12	5	17
Placement in special schools, etc., being sought	...	...	3	1	4
Periodic supervision	...	...	27	10	37
Other action	...	...	13	3	16
Total			122	57	179

(d) Results of action taken, insofar as it is possible to judge at present:—

Improved	...	...	...	28	18	46
Slightly improved	...	...	...	32	14	46
Not yet improved	...	...	...	15	7	22
Doubtful	...	...	...	15	2	17
Not applicable	...	...	...	32	16	48
Total				122	57	179

3. Current case-load on 31st December, 1967.

Cases under treatment	...	...	...	19	18	37
Cases under supervision	...	...	...	227	75	302
Cases awaiting treatment	...	...	...	24	4	28
Total				270	97	367

4. Summary of Work Involved.

Psychiatrists:—

Interviews for diagnosis or assessment	...	...	...	274
Interviews for treatment	...	...	...	609
Interviews with parents or guardians	...	...	...	69
Interviews with social workers or other officials	...	...	...	32
Other interviews	...	...	...	12
Visits, meetings, etc., outside the Clinic	...	...	...	21
Appointments arranged but not attended	...	...	...	137
Total				1,154

(b) Psychotherapists:—

Interviews for treatment	...	...	...	597
Interviews with parents or guardians	...	...	...	—
Interviews with social workers or other officials	...	...	...	3
Other interviews	...	...	...	1
Visits, meetings, etc., outside the Clinics	...	...	...	10
Appointments arranged but not attended	...	...	...	68
Total				679

(c) Educational Psychologists:—

Interviews with children for examination	...	...	...	141
Interviews with children for remedial tuition	...	...	...	157
Interviews with parents or guardians	...	...	...	16
Interviews with other officials	...	...	...	35
Visits outside Clinic (not schools)	...	...	...	34
Appointments arranged but not attended	...	...	...	21
Total				404

(d) Psychiatric Social Workers:—

Interviews with parents or guardians at Clinic	...	...	...	1,514
Interviews with parents or guardians at home	...	...	...	86
Interviews with children	...	...	...	3
Interviews with other social workers or officials	...	...	...	91
Visits to schools, hostels, etc.	...	...	...	19
Other visits	...	...	...	73
Appointments arranged but not attended	...	...	...	177
Total				1,963

(B) The Work of the Educational Psychologists in the Schools

1. Referring agencies :—

				M.	F.	Total.
(a)	Chief Education Officer	...	...	10	4	14
(b)	School	...	...	104	66	170
(c)	Parent	...	...	—	6	6
(d)	School Medical Officer	...	...	11	6	17
(e)	Other	...	...	2	—	2
Total				127	82	209

2. Types of Schools attended:—

				M.	F.	Total.
(a)	Nursery	...	...	2	—	2
(b)	Infant	...	...	10	6	16
(c)	Junior	...	...	90	56	146
(d)	Secondary	...	...	15	10	25
(e)	Grammar	...	...	1	3	4
(f)	Private	...	...	—	4	4
(g)	To be placed	...	...	6	3	9
(h)	Other	...	...	3	—	3
Total				127	82	209

3. Main Problem :—

(a)	Learning	...	...	104	57	161
(b)	Behaviour	...	...	13	17	30
(c)	Other	...	...	10	8	18
Total				127	82	209

4. Disposal :—

(a)	Remedial class	...	...	35	12	47
(b)	Remedial tuition at the Clinic	...	...	5	1	6
(c)	Child Guidance Clinic (general)	...	...	26	14	40
(d)	Supervision	...	...	38	33	81
(e)	Recommendation for special school	...	...	10	5	15
(f)	Recommendation to Chief Education Officer	...	...	6	4	10
(g)	Recommendation to Principal School Medical Officer	...	...	2	2	4
(h)	Other	...	...	5	11	16
Total				127	82	209

5.	Supervision from previous years	...	...	30	8	38
	Supervision from 1967	...	...	38	33	71
Total under supervision				68	41	109

6. Schools—Group Testing for Remedial Classes:—

16 schools. Number of children 8+ tested	926
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7. Total number of school visits	412
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HANDICAPPED PUPILS

Numbers of Handicapped Pupils

The following table gives the numbers of pupils on the Handicapped Pupils' Register on 31st December, 1967, together with the numbers ascertained during the year:—

Classification	Total ascertained during year	Total ascertained at 31.12.67
Blind	—	6
Partially-sighted	1	8
Deaf	3	17
Partially-hearing	2	8
Educationally subnormal	27	187
Epileptic	—	1
Maladjusted	8	84
Physically-handicapped	8	35
Delicate	10	32
Totals	59	378

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	Attending special school as		Receiving education under arrangements made under Section 56 of the Education Act, 1944		Total
	Day Pupils	Boarders	In Hospital	At home	
Blind	3	3	—	—	6
Partially-sighted	7	—	—	—	7
Deaf	9	7	—	—	16
Partially-hearing	7	—	—	—	7
Educationally-subnormal	173	13	—	1	187
Epileptic	—	1	—	—	1
Maladjusted	31	50	—	2	83
Physically-handicapped	23	11	—	1	35
Delicate	25	5	—	2	32
Totals	278	90	—	6	374

Children unsuitable for Education at Schools

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

THE SCHOOL DENTAL SERVICE

Mr. M. T. Gibb, the Chief Dental Officer, has contributed the following report on the operation of the School Dental Service during the year:—

' At 31st December, 1967, the Dental staff consisted of the Chief Dental Officer, four full-time Dental Officers, five part-time Dental Officers and three part-time Orthodontists giving a full time equivalent of 7.4 Dental Officers compared with 7.9 in 1966. The Authority employs two Dental Auxiliaries (whole-time equivalent 1.6). Four sessions per week are devoted to orthodontic treatment by Orthodontists, and two by one of the Dental Officers.

Of the eight clinics in the Borough, only two were unaffected by either staff changes or prolonged absences of Dental Officers due to illness. Mrs. Kojder resigned from the full-time staff and Mrs. Beaver retired but has now re-joined on a part-time basis. Mr. Sturman also left the service. We have obtained the full-time services of Miss I. Kennedy at the Amity Grove Clinic and Miss Leonard, who had been on our part-time staff, has now been appointed full-time at the Grand Drive and Church Road Clinics. Two full-time Officers were off for three months due to illness and one of the Orthodontists for eight months.

These staff problems resulted in fewer sessions being devoted to school inspections with a consequent fall in the number of children inspected at school, but in spite of a loss of 135 treatment sessions, some 550 more fillings were done in permanent teeth.

New dental units were installed in the second surgeries at Pelham Grove and Amity Grove Clinics and conversions of anaesthetic appliances to conform to new British Standard requirements were carried out where necessary.

Thirty-four sessions were devoted to Dental Health Education. During the summer, 36 Infant and Nursery Schools were visited by 'Pierre, the Clown' whose amusing method of putting over Dental Health Education was very popular with the children, each of whom received an apple. This scheme has the support of the General Dental Council and is promoted by the Apple Growers' Association. Talks on Dental Health have been given in five of the Borough Clinics to Parentcraft Classes and in Schools to different age groups. Films, posters and pamphlets are used. The prevention of dental decay by proper care should be taught as early as possible and to this end Greetings Cards are now being sent to all children in the Borough on their third birthday with a letter to the parents urging them to seek advice at one of the dental clinics or from the family dentist. Much damage is done to the teeth of young children by well-meaning but misguided adults who allow children to eat sweets and snacks between meals. Parents and School Teachers could make a great contribution to the dental health of the children in their care by discouraging this habit, particularly in an area where there is a water supply deficient in fluoride.

The Orthodontic Service continued to expand during the year with more new cases, more completed cases, and greater use made of the County Laboratory.'

The statistics relating to the School Dental Service will be found following:—

Statistics for Year 1967

Number of pupils on the register of maintained primary and secondary schools including nursery and special schools in January, 1968—24,555.

Attendances and Treatment.

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visit	2,261	2,020	611	4,892
Subsequent Visits	4,257	5,123	1,633	11,013
Total Visits	6,518	7,143	2,244	15,905
Additional courses of treatment commenced	616	469	178	1,263
Fillings in permanent teeth	2,125	3,999	1,494	7,618
Fillings in deciduous teeth	3,742	218	—	3,960
Permanent teeth filled	1,746	3,311	1,275	6,332
Deciduous teeth filled	3,249	207	—	3,456
Permanent teeth extracted	56	415	98	569
Deciduous teeth extracted	1,040	456	—	1,496
General anaesthetics	500	280	21	801
Emergencies	204	85	22	311

Number of pupils X-rayed	533
Prophylaxis	1,760
Teeth otherwise conserved	1,259
Number of teeth root filled	26
Inlays	1
Crowns	17
Courses of treatment completed	4,704

Orthodontics.

Cases remaining from the previous year ...	338
New cases commenced during year ...	253
Cases completed during year ...	123
Cases discontinued during year ...	65
Number of removable appliances fitted ...	9
Pupils referred to Hospital Consultant ...	12

Prosthetics.

	5 to 9.	10 to 14.	15 and over.	Total.
Pupils supplied with F.U. or F.L. (first time)	—	—	2	2
Pupils supplied with other dentures (first time)	—	—	5	5
Number of dentures supplied	—	—	7	7

Anaesthetics.

General Anaesthetics administered by Dental Officers—Nil.

Inspections.

(a) First inspection at school: number of pupils ...	16,360
(b) First inspection at clinic: number of pupils ...	2,334
Number of (a)+(b) found to require treatment	8,153
Number of (a)+(b) offered treatment ...	7,350

(c) Pupils re-inspected at school clinic ...	3,034
Number of (c) found to require treatment ...	2,111

Sessions.

Sessions devoted to treatment ...	3,073
Sessions devoted to inspection...	175
Sessions devoted to Dental Health Education ...	34

INFECTIOUS DISEASES AND PROPHYLACTIC MEASURES

1. Infectious Diseases

Infectious Diseases notified by Schools.

Disease	Suffering	Excluded on suspicion	Infection at home	Total exclusions
Scarlet Fever ...	29	—	2	31
Measles ...	260	1	2	263
Whooping Cough ...	22	1	3	26
German Measles ...	93	—	—	93
Chicken Pox ...	159	—	3	162
Mumps ...	450	3	2	455
Jaundice ...	2	—	—	2
Other ...	41	—	1	42
Totals ...	1,056	5	13	1,074

Contagious Diseases notified by Schools.

Disease	Suffering	Excluded on suspicion	Total exclusions
Impetigo ...	2	—	2
Scabies ...	4	—	4
Other ...	5	—	5
Totals ...	11	—	11

Compared with 1966 there were 249 more cases of communicable disease notified as a result of which children were excluded from School.

2. Prophylactic Measures

1. *Poliomyelitis Vaccination.*

Vaccination of school children against Poliomyelitis continued during the year. The actual number vaccinated or receiving re-inforcing doses during 1967 was as follows:—

Number of children vaccinated ...	130
Number of children given re-inforcing doses ...	1,363

No case of Poliomyelitis occurred in the Borough in 1967.

2. Diphtheria/Tetanus Immunisation.

Number of children given immunisation	...	171
Number of children given re-inforcing doses	...	3,295

No case of Diphtheria or Tetanus occurred 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	...	2,140	...
Number of consents	...	1,838	85.89%
Number skin tested	...	1,763	82.38%
Number Mantoux positive	...	110	5.14%
Number B.C.G. Vaccinated	...	1,649	77.06%

ANCILLARY SERVICES

1. Nursery Schools/Classes

There were 447 children attending the nursery schools and 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 1966:—

Year	Numbers in attendance	Taking Milk		Taking Meals			
		Number	Percentage	Free	Paid	Total	Percentage
September, 1966 ...	22,544	18,475	81.9	506	15,864	16,370	72.6
September, 1967 ...	22,497	17,634	78.3	643	16,050	16,693	74.2

Appendix 'A'

MEDICAL INSPECTION AND TREATMENT

(Excluding Dental Inspection and Treatment)

Return for the year ended 31st December, 1967

Number of pupils on registers of maintained, primary, secondary, special and nursery schools in January, 1968:—

(a) Ordinary schools	23,901
(b) Special schools	177
(c) Nursery schools and classes	477
Total ...	24,555

SECTION A.

Routine Medical Inspections.

Age Groups Inspected (By year of birth)	Number of Children Inspected
1963 and later	702
1962	1,823
1961	487
1960	193
1959	1,764
1958	221
1957	132
1956	1,238
1955	696
1954	135
1953	282
1952 and earlier	1,934
Total	9,607

Other Medical Inspections.

Type of Inspection	Number of Children Inspected
Special Inspections	2,112
Re-Inspections	1,061
Total	3,173

Return of Defects found in the course of Medical Inspections.

Defects or Disease	Periodic Inspections		Special Inspections	
	No. referred for Treatment	No. referred for Observation	No. referred for Treatment	No. referred for Observation
Skin	80	208	235	56
Eyes				
(a) Vision ...	1,297	715	1,120	97
(b) Squint ...	113	32	—	—
(c) Other ...	10	61	14	8
Ears				
(a) Hearing ...	37	115	26	93
(b) Otitis Media	24	71	2	2
(c) Other ...	10	27	13	8
Nose and Throat	95	390	22	33
Speech	73	99	29	5
Lymphatic Glands	8	61	—	2
Heart	23	72	3	4
Lungs	69	184	7	6
Development				
(a) Hernia ...	19	22	2	1
(b) Other ...	50	140	13	14
Orthopaedic				
(a) Posture ...	19	48	1	3
(b) Feet ...	40	105	12	9
(c) Other ...	64	159	19	25
Nervous System				
(a) Epilepsy ...	11	10	—	1
(b) Other ...	8	24	—	1
Psychological				
(a) Development	15	47	3	2
(b) Stability ...	27	88	11	13
Abdomen ...	13	36	—	6
Other defects and diseases ...	59	228	46	101
Totals ...	2,164	2,942	1,578	490

Five thousand one hundred and six defects were found in children at routine medical inspections of which 2,164 were referred for treatment and 2,942 for observation. 2,068 defects were found at special inspections, 1,578 being referred for treatment and 490 for observation. The total number of defects referred for treatment and observation in 1967 was 7,174.

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

Group	Number of children inspected	Number of children requiring treatment	Percentage requiring treatment
1963 and later	702	38	5.41
1962	1,823	326	17.88
1961	487	103	21.15
1960	193	41	21.24
1959	1,764	356	20.18
1958	221	39	17.65
1957	132	24	18.18
1956	1,238	255	20.59
1955	696	153	21.98
1954	135	31	22.96
1953	282	67	23.76
1952 and earlier	1,934	497	25.67
Totals	9,607	1,930	20.09

Classification of General Condition of pupils inspected during 1967

Group	Number of children inspected	Percentage found satisfactory	Percentage found unsatisfactory
1963 and later	702	99.57	0.43
1962	1,823	100	—
1961	487	99.59	0.41
1960	193	100	—
1959	1,764	100	—
1958	221	100	—
1957	132	100	—
1956	1,238	100	—
1955	696	100	—
1954	135	100	—
1953	282	99.65	0.35
1952 and earlier	1,934	99.95	0.05
Totals	9,607	99.93	0.07

SECTION B.

Treatment

Uncleanliness and Verminous Conditions.

- Total number of individual examinations of pupils by Health Visitors in Schools ... 11,091
- Number of pupils found to be infested ... 140
- Number of exclusions:—

First time	...	...	...	8
Second time	...	...	...	1
				9
- Number of pupils cleansed ... 15
- Number of Cleansing Notices or Cleansing Orders issued under Section 54 of the Education Act, 1944 ... 17

Diseases of the Skin (excluding uncleanness)

Diseases of the Skin.	Number of cases treated or under treatment during the year.
Ringworm—scalp	—
Ringworm—body	1
Scabies	—
Impetigo	—
Other skin diseases (including verru- cae, eczema, allergic skin condi- tions, acne, etc.)	312
Total ...	313

Eye Diseases, Defective Vision and Squint.

Eye Diseases and Defects.	Number of cases known to have been dealt with.
External or other, excluding errors of refraction and squint	24
Errors of refraction (including squint)	3,508
Total ...	3,532

Number of pupils for whom spec-
tacles were prescribed ... 1,084

Diseases of the Ear, Nose and Throat.

Diseases and Defects.	Number of cases known to have been treated.
Received operative treatment:—	
(a) for diseases of the ear	7
(b) for adenoids and chronic ton- sillitis	39
(c) for other nose and throat con- ditions	1
Received other forms of treatment	112
Total ...	153

Orthopaedic and Postural Defects.

Number of cases known to have been
treated in Clinics or Out-Patient
Departments 211

85 sessions were held at Pelham Road Remedial Exercises Clinic during 1967.

30 new cases were admitted and 37 old cases discharged.

42 sessions were held at Amity Grove Remedial Exercises Clinic during 1967.

15 new cases were admitted and eight old cases discharged.

42 sessions were held at Wide Way Remedial Exercises Clinic during 1967.

20 new cases were admitted and 24 old cases discharged.

71 sessions were held at St. Christopher's Special School and Eagle House Annexe Remedial Exercises Clinic during 1967.

25 new cases were admitted and 36 old cases discharged.

Other Treatment Given.

Ailments.	Number of cases treated.
Miscellaneous minor ailments ...	441
Lymphatic Glands ...	6
Heart and Circulation ...	23
Lungs ...	71
Development (Hernia and Other) ...	66
Nervous System ...	20
Total ...	627

Appendix ' B '

1. *General Medical/Minor Ailment Clinics.*

Attendances made by children at General Medical/Minor Ailments Clinic ...	3,334
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2. *Other Medical Examinations undertaken by School Medical Officers.*

(a) Children examined for part-time employment ...	527
(b) Children examined for Entertainment Licences ...	14

In addition to medical examinations specified as above, School Medical Officers in their capacity as Assistant Medical Officers of Health also carried out 862 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 recommendation of School Medical Officers ...	51
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All these children had seaside holidays and when examined on their return were all found to have benefited.



