

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

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London Borough of Merton

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# THE HEALTH OF MERTON

1969



1969

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.



# CONTENTS

	Page
<b>INTRODUCTION:</b>	
Introductory Letter	7-8
Committees	9
Staff	10-13
<b>GENERAL PUBLIC HEALTH SERVICES:</b>	
General Information	14
Summary of Vital Statistics	15-16
Comparative	18
Principal Causes of Death	18
Causes of Death at Different Periods of Life	17
Infant Deaths	19
Infant Mortality	19
Perinatal Mortality	19
Maternal Mortality	19
Control of Communicable Diseases:	
Notifications received during 1969	20
Reports	20
Food Poisoning	23
Tuberculosis:	
Chest Clinics	24
Domiciliary Visiting	25
by	
P. J. DOODY, M.B., B.Ch., B.A.O., D.P.H.	25
Incidence of Tuberculosis	25
Mass X-Ray	26
Deaths	26
After-Care of the Tuberculous	26
Prophylactic Measures	27-28
Venereal Diseases	28
General Medical Services	29
National Assistance Acts	29
Notifications of Birth	30
<b>PERSONAL HEALTH SERVICES:</b>	
Maternal and Child Care:	
General	31
Ante-natal and Post-natal Services	31-32
Relaxation Classes	32
Premature Infants	32





# CONTENTS

	Page
<b>INTRODUCTION:</b>	
Introductory Letter ... ..	7-8
Committees ... ..	9
Staff ... ..	10-13
<b>GENERAL PUBLIC HEALTH SERVICES:</b>	
General Information ... ..	14
Summary of Vital Statistics... ..	15-16
Comparative Statistics ... ..	18
Principal Causes of Death in Order of Frequency ... ..	18
Causes of Death at Different Periods of Life ... ..	17
Infant Deaths ... ..	19
Infant Mortality ... ..	19
Perinatal Mortality ... ..	19
Maternal Mortality ... ..	19
Control of Communicable Diseases:	
Notifications received during 1969 ... ..	20
Reports ... ..	20
Food Poisoning ... ..	23
Tuberculosis:	
Chest Clinics ... ..	24
Domiciliary Visiting ... ..	25
B.C.G. Vaccination ... ..	25
Incidence of Tuberculosis ... ..	25
Mass X-Ray ... ..	26
Deaths ... ..	26
After-Care of the Tuberculous ... ..	26
Prophylactic Measures ... ..	27-28
Venereal Diseases ... ..	28
General Medical Services ... ..	29
National Assistance Acts ... ..	29
Notifications of Birth ... ..	30
<b>PERSONAL HEALTH SERVICES:</b>	
Maternal and Child Care:	
General ... ..	31
Ante-natal and Post-natal Services ... ..	31-32
Relaxation Classes ... ..	32
Premature Infants ... ..	32

	Page
Child Health :	
General ... ..	33
Attendances at Child Health Centres ... ..	34
Attendances at Toddlers' Clinics ... ..	34
Dental Care ... ..	34-35
Day Nurseries ... ..	35-36
Developmental Clinic ... ..	36
Care of Unmarried Mothers and their Children ... ..	36
Congenital Malformations ... ..	36
Welfare Foods and Vitamins ... ..	36

## PUBLIC HEALTH NURSING AND ALLIED SERVICES:

Health Visiting:	
Staff ... ..	37
Training of Health Visitors ... ..	38
General Practitioner Attachments ... ..	38
Summary of Work of Health Visitors ... ..	39-40
Midwifery:	
Staff ... ..	40
Introductory ... ..	40
Organisation ... ..	40
Maternity Cases Attended ... ..	41
Inhalational Analgesia... ..	41
Ophthalmia Neonatorum ... ..	41
Maternity Outfits ... ..	41
Medical Aid ... ..	41
Early Discharges from Hospital ... ..	41
Midwifery Training ... ..	41
Post-Graduate Courses ... ..	42
Domiciliary Visits ... ..	42
Attendances at Clinics ... ..	42
Transfers to Hospital ... ..	42
Home Nursing:	
Staff ... ..	43
Organisation ... ..	43
Training of District Nurses ... ..	43
Post Graduate Courses for District Nurses ... ..	43
Cases Attended ... ..	44
Visits Made ... ..	44
Marie Curie Foundation Cancer Nursing Service ... ..	44



	Page
Incontinence Pads ... ..	45
Incontinent Laundry Service ... ..	45
Domestic Help Service:	
Staff ... ..	45
Organisation ... ..	45
Statistics ... ..	46
Details of Sources of Application ... ..	46
Hours worked by Home Helps ... ..	46
Prevention of Illness, Care and After-Care:	
Clinic for Older People ... ..	47
Health Education ... ..	48-50
Chiropody Service ... ..	50
Ripple Bed Service ... ..	51
Sick Room Equipment ... ..	51
Recuperative Holidays ... ..	51
Cervical Cytology ... ..	51
Family Planning ... ..	52
Mental Health and Social Work Services:	
Introduction ... ..	53
General ... ..	53
Staff ... ..	53
Training of Staff ... ..	53-54
The work of the Mental Welfare Officers ... ..	54
Co-ordination of the Hospital Services ... ..	54
Community Care of the Mentally Disordered ... ..	54
Subnormality:	
Cases in Community Care ... ..	55
Special Care Unit ... ..	55-56
Junior Training Centre ... ..	56
Senior Training Centre ... ..	56-57
Short Term Care ... ..	57
Other Forms of Mental Disorder:	
Cases dealt with by Mental Welfare Officers ... ..	57
Guardianship ... ..	58
Patients receiving Community Care ... ..	58
Cases Boarded Out ... ..	58
Social Work Section:	
Staff ... ..	58
General ... ..	58
Social Casework ... ..	59-60

# ENVIRONMENTAL HEALTH SERVICES :

Page

## Services under the Public Health Acts :

Water Supply	61-62
Sewerage and Sewage Disposal	63
Registered Common Lodging Houses	63
District Inspection	63-65
Cleansing Station	67

## Services under the Food and Drugs Act :

Milk and Dairies (General) Regulations, 1959	67
Milk (Special Designations) (Amendment) Regulations, 1965	67
Milk (Special Designations) Regulations, 1963	67
Brucella Abortus	68
Ice-cream	68
Meat and Other Foods	68
Meat Inspection	68
Poultry Inspection	68
Food Premises	68
Bacteriological Examination of Equipment	69-70
Food Inspection	70-72
Sampling of Food and Drugs	72-76

## Services under Other Enactments :

Rent Act, 1957	76
Shops Acts, 1950-65	76
Offices, Shops and Railway Premises Act, 1963	76-78
Prevention of Damage by Pests Act, 1949	78
Pet Animals Act, 1951	79
Riding Establishments Act, 1964	79
Diseases of Animals Act, 1950	79
Clean Air Act, 1956	79-80
Factories Act, 1961	66-67
Noise Abatement Act, 1960	81
Pharmacy and Poisons Acts, 1933-1941	82
Fertilisers and Feeding Stuffs Act, 1926	82
Housing Acts, 1957-1964	82
Caravan Sites and Control of Development Act, 1960	82
Greater London (General Powers) Act, 1967 (Hair-dressers and Barbers)	83



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 1969.

The Registrar-General's estimate of population showed a fall from 184,220 in 1968 to 183,570—a reversion to the steady yearly decline in population of the area since 1951.

Live births totalled 2,437, being 173 less than in 1968, and the live-birth rate thus showed a marked fall from 14.17 in 1968 to 13.27. Of the 2,437 live births 90.1% were born in hospital. The falling number of domiciliary births was, however, accompanied by a corresponding increase in early discharges (within 48 hours after birth) from hospital.

The number of deaths of infants under one year continued to decline, from 38 in 1968 to 35 and the resulting infant mortality rate of 13.90 per thousand live births, compared with a rate of 18.0 for England and Wales, was most pleasing.

Stillbirths showed an increase from 25 in 1968 to 31 and the stillbirth rate per thousand live and stillbirths rose from 9.49 in 1968 to 12.56. The rate of 12.56 was still lower than the rate for England and Wales (13.0).

The number of neo-natal deaths also showed a continued decline, from 29 in 1968 to 27 and the neo-natal rate was 10.26 compared with 12.0 for England and Wales. The perinatal mortality rate fell from 23.90 in 1968 to 20.67 which compared favourably with the rate of 23.0 for England and Wales.

The death rate per thousand of the population rose from 11.06 in 1968 to 11.46 but this is no greater variation than has occurred on several occasions during the last 15 years. Due to the influenza outbreak which occurred in the latter part of the year, there were 24 deaths from influenza, 18 more than in 1968.

There were no maternal deaths during the year.

One thousand two hundred and seventy-four notifications of infectious disease were received during the year, compared with 494 in 1968. The increase was principally due to the incidence of measles and dysentery. There were a number of outbreaks during the year and though none could be regarded as really serious, the investigations that had to be carried out were very time-consuming.

On the whole, 1969 was a year of steady progress in most fields of activity. The amendment of the Nurseries and Child Minders Regulation Act, 1948, by Section 60 of the Health Services and Public Health Act, 1968, greatly increased the work of inspection, registration and supervision of private day nurseries and child minders, child minders being particularly affected.

Difficulty was again experienced in the recruitment of qualified Social Workers both in the field of mental health and the general field

of prevention of break-up of family life, and increased demands on both services produced difficulties and high case-loads, as a result of incomplete staff establishments.

The policy of attachment of health visitors and district nurses to group practices, where mutually satisfactory arrangements could be established, continued. These attachments appear to increase the job satisfaction of the nurses involved.

Co-operation with general practitioners and the hospital service, and 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 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 ready 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, 1969

### HEALTH, WELFARE AND CHILDREN'S COMMITTEE

The Mayor, Councillor P. Corbishley

Councillor A. M. Anderson, M.A. (Chairman)

Alderman N. S. Clarke (Vice-Chairman)

Aldermen:

Sir Cyril Black, J.P., D.L., M.P. J. P. Brown, J.P. T. H. Metcalf

Councillors:

(Mrs.) W. R. Castle J. B. Garwood K. L. Goddard

(Mrs.) D. M. Hedges (Miss) L. Hirst A. S. Hutchin

G. S. Lewis (Miss) D. M. Lord F. H. Meakings

R. J. H. Pike, M.B.E. G. H. Raymond P. J. Shurville

Geoffrey N. Smith G. Watts (Miss) N. K. Watts

J. Wemms A. J. White

(now deceased)

Co-opted member:—

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

### ENVIRONMENTAL HEALTH AND HOME SAFETY SUB-COMMITTEE

Chairman of the Health, Welfare and Children's Committee

(Councillor A. M. Anderson, M.A.)

Vice-Chairman of the Health, Welfare and Children's Committee

(Alderman N. S. Clarke)

Alderman T. H. Metcalf

Councillors:

J. B. Garwood K. L. Goddard (Miss) L. Hirst A. S. Hutchin

(Miss) D. M. Lord E. J. H. Pike, M.B.E. G. H. Raymond

P. J. Shurville Geoffrey N. Smith G. Watts (Miss) N. K. Watts

Co-opted member:—

Mr. C. F. Waller (Home Safety Organiser for the Greater London  
Area, RoSPA)

### TOWN CLERK

Sydney Astin (Solicitor)

## WHOLE-TIME STAFF

(As at 31st December, 1969)

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.
Additional Deputy Medical Officer of Health and Deputy Principal School Medical Officer	Elza H. Todd, M.B., Ch.B., D.P.H.
Senior Medical Officer	... Post vacant
Departmental 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. Marie J. Freeman, M.B., B.S., L.M.S.S.A., D.P.H., F.R.I.P.H.H. 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	... H. W. Freeth, L.D.S., R.C.S., M.R.C.S., L.R.C.P. Ann C. Leonard, L.D.S., R.C.S. S. P. Motani, L.D.S.
Dental Auxiliary	... Miss D. Tomlin (commenced 13.10.69)
Chief Public Health Inspector	... G. H. Cockell, F.A.P.H.I., F.R.S.H.
Deputy Chief Public Health Inspector	... Post vacant
Principal Nursing Officer	... Mrs. A. A. B. Poole, S.R.N., S.C.M., H.V. Cert. (commenced 13.10.69)
Superintendent Health Visitor	... Mrs. I. Brown, S.R.N., S.C.M., H.V.Cert.
Superintendent of Midwifery and Home Nursing Service	... Miss O. Williams, S.R.N., S.C.M., Q.N.
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.
Principal Mental Welfare Officer	F. T. Rainer, Dip.Soc. Science, Dip.Soc. Admin., H.O.Cert. Child Care
Deputy Principal Mental Welfare Officer	... F. J. Gerring



Mental Welfare Officers	...	Mrs. J. Barber, S.R.N., S.C.M. F. C. Dorrington D. Dunne, C.S.W. (commenced 1.8.69) J. R. O'Neill, Cert. in Soc. Studies, Diploma in Applied Soc. Studies (Child Care), Diploma in Applied Soc. Studies (Psych- iatric Social Work) (commenced 1.10.69) S. G. H. Worrall
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, Declaration of Recog- nition of Experience in Child Care
Social Workers	...	Mrs. M. J. Jacks, B.Sc. (Hons. Socio- logy) Miss E. A. Coupland, Dip. Soc. Studies Mrs. P. M. S. Thorne, C.S.W.
Supervisor, Senior Training Centre	...	J. Malinowski, Dip.T.C.M.H.
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. (Hons.)
Psychiatric Social Workers	...	Miss M. F. Bosanquet, A.A.P.S.W., B.A. (Hons.) London Mrs. B. Litauer, A.A.P.S.W., Mental Health Diploma, London, Social Science Dip- loma, London Mrs. I. Windebank, A.A.P.S.W., Mental Health Diploma, London, Social Science Diploma, London
Psychotherapist	...	Mrs. M. Livesey, N.F.F. Diploma, Assocn. of Child Psychotherapists
Speech Therapists	...	Miss G. M. Stephenson, L.C.S.T. Mrs. L. F. Kingsley, L.C.S.T. Mrs. A. Varah, L.C.S.T.
Audiometrician	...	Mrs. M. Dean, S.R.N.



# **PART-TIME STAFF** (As at 31st December, 1969)

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. 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.
Departmental Medical Officers	Joan M. H. Clarke, M.R.C.S., L.R.C.P. (commenced 22.5.69) 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. Ann E. R. Gonet, M.B., B.S. (transferred from whole-time to part-time 1.10.69) 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. Elizabeth A. South, M.B., Ch.B. Jane Vernon-Roberts, M.B., B.S. Douglas W. Sim, M.B., Ch.B. (commenced 4.3.69)
School Dental Officers	... P. D. Bainton, L.D.S., R.C.S. (Eng.) (com- menced 19.7.69) G. R. Barker, B.Sc., L.D.S., R.C.S., M.B.B.S. (commenced 29.7.69) Elizabeth W. Beaver, B.Ch.D. Sheila McDonald, L.D.S. M. G. Smith, L.D.S., R.C.S.
Dental Orthodontists	... Linda R. Read, B.D.S., L.D.S., R.C.S. N. Upson, L.D.S., R.C.S., D.Orth.
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. R. G. Smith, M.B., B.S., M.R.C.S., L.R.C.P., D.A., D.Obst.R.C.O.G.



# GENERAL PUBLIC HEALTH SERVICES

## General Information

Area of Borough in acres ... 9,379

Number of private dwellings (1961) ... 59,482

Number of private dwellings (1969) ... 62,605

Rateable value, at 1st April, 1969 ... £11,468,169

Actual product of a penny rate:—

1968/69 ... £45,739

Estimated product of a penny rate:—

1969/70 ... £45,980

Population:—

Census figure (1961) ... 186,647

Registrar-General's Estimate of Population	1969	1968
at 30th June	183,570	184,220

### School Dental Officers

P. D. Baimon, L.D.S., R.C.S. (Eng.) (commenced 1976/69)  
 G. K. Barker, B.Sc., L.D.S., R.C.S., M.B.B.S. (commenced 1972/69)  
 Elizabeth W. Beever, R.C.D.  
 Sheila McDonald, L.D.S.  
 M. G. Smith, L.D.S., R.C.S.

### Dental Orthodontists

John R. Read, B.D.S., L.D.S., R.C.S.  
 N. Upton, L.D.S., R.C.S., D.O.M.

### Dental Anaesthetists

W. Carpenter, M.A., M.B., B.Ch., B.A.O., D.A.  
 Barry M. Margrett, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H.  
 R. G. Smith, M.B., B.S., M.R.C.S., L.R.C.P., D.A., D.O.M., R.C.O.G.



# Summary of Vital Statistics

					1969	1968
Live Births—						
Legitimate:	Males	...	...	...	1167	1263
	Females	...	...	...	1098	1110
					— 2265	— 2373
Illegitimate:	Males	...	...	...	89	119
	Females	...	...	...	83	118
					— 172	— 237
Totals					2437	2610
Live Birth Rate per 1,000 population					13.27	14.17
Corrected Live Birth Rate per 1,000 population					13.80	14.73
Illegitimate live births—percentage of total live births					7.05	9.08
Still Births—						
Legitimate:	Males	...	...	...	17	10
	Females	...	...	...	12	14
					— 29	— 24
Illegitimate:	Males	...	...	...	—	1
	Females	...	...	...	2	—
					— 2	— 1
Totals					31	25
Still-birth Rate per 1,000 live and still-births					12.56	9.49
Still-birth Rate per 1,000 population					0.17	0.14
Total live and still-births					2468	2635
Infant Mortality (Deaths of infants under one year of age)—						
Legitimate:	Males	...	...	...	24	17
	Females	...	...	...	6	18
					— 30	— 35
Illegitimate:	Males	...	...	...	3	1
	Females	...	...	...	1	2
					— 4	— 3
Totals					34	38
Infant Mortality Rate per 1,000 live births					13.90	14.60
Infant Mortality Rate per 1,000 legitimate live births					12.80	14.74
Infant Mortality Rate per 1,000 illegitimate live births					23.26	12.74
Neo-Natal Deaths (Deaths of infants in first 28 days of life)					25	27
Neo-Natal Mortality Rate					10.26	10.34
Early Neo-Natal Mortality Rate (deaths of infants in first week of life per 1,000 live births)					8.08	9.58
Perinatal Mortality Rate (Still-births plus deaths in first week of life per 1,000 live and still-births)					20.67	23.90
Total loss of infant life (Still-births plus infant deaths) per 1,000 live and still-births					26.33	22.77
Maternal Deaths (including abortion)					—	—
Maternal Mortality Rate per 1,000 live and still-births					—	—
Deaths					2104	2038
Death Rate per 1,000 population					11.46	11.06
Corrected Death Rate per 1,000 population					11.23	10.94

	1969	1968
Deaths from Bronchitis and Emphysema per 1,000 population ... ..	0.58	0.74
Deaths from Pneumonia per 1,000 population ... ..	0.93	0.74
Deaths from Cancer of lung and bronchus per 1,000 population ... ..	0.76	0.74
Deaths from other forms of Cancer per 1,000 population ... ..	2.00	1.62
Marriages ... ..	1471	1472
Marriage Rate per 1,000 population ... ..	8.01	7.90



Causes of Death at different Periods of Life in the London Borough of Merton during 1969

CAUSE OF DEATH	AGE GROUP AND SEX																							
	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		TOTALS	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Enteritis and other Diarrhoeal Diseases...	-	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-
Tuberculosis of Respiratory System ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	2	-	-	-
Other Tuberculosis, incl. Late Effects ...	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	1	1	-	-
Streptococcal Sore Throat, Scarlet Fever	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
Syphilis and its sequelae ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1	-
Other Infective and Parasitic Diseases ...	-	-	-	-	-	-	-	-	-	1	-	-	1	2	-	-	3	-	-	1	4	4	-	-
Malignant Neoplasm: Buccal Cavity, etc.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	-	-
Malignant Neoplasm: Oesophagus ... ..	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	1	1	1	1	5	3	8	-	-
Malignant Neoplasm: Stomach ... ..	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	4	17	5	6	11	26	20	-	-
Malignant Neoplasm: Intestine...	-	-	-	-	-	-	-	-	-	-	1	-	2	1	13	5	12	11	11	12	39	28	-	-
Malignant Neoplasm: Larynx ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	2	-	-	-
Malignant Neoplasm: Lung, Bronchus...	-	-	-	-	-	-	-	-	-	-	1	-	12	-	36	7	44	7	24	8	117	22	-	-
Malignant Neoplasm: Breast ... ..	-	-	-	-	-	-	-	-	-	-	-	3	-	14	-	16	-	15	-	5	-	53	-	-
Malignant Neoplasm: Uterus ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	-	8	-	2	-	19	-	-
Malignant Neoplasm: Prostate ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	6	-	12	-	21	-	-	-
Leukaemia ... ..	-	-	-	-	-	-	-	-	-	-	1	-	2	1	3	-	2	1	3	1	11	3	-	-
Other Malignant Neoplasms, etc. ....	-	-	-	-	1	-	1	1	3	-	3	4	1	5	13	17	21	19	16	27	59	74	-	-
Benign and Unspecified Neoplasms ...	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	2	-	-	-	1	1	4	-	-
Diabetes Mellitus ... ..	-	-	-	-	-	-	-	-	-	-	1	-	1	1	2	1	2	4	3	4	9	10	-	-
Avitaminoses, etc. ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	3	-	-	-
Other Endocrine Etc. Diseases ... ..	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	2	-	1	-	1	1	5	-	-
Anaemias ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	5	2	5	-	-
Mental Disorders ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	1	-	-
Meningitis ... ..	-	-	-	-	-	-	-	-	2	-	-	1	-	-	-	-	-	-	1	2	2	-	-	-
Other Diseases of Nervous System, etc.	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	1	3	1	1	2	5	6	-	-
Chronic Rheumatic Heart Disease ...	-	-	-	-	-	-	-	-	1	-	-	-	2	2	2	3	1	11	5	12	11	28	-	-
Hypertensive Disease ... ..	-	-	-	-	-	-	-	-	-	-	1	-	2	2	4	-	3	4	5	15	15	21	-	-
Ischaemic Heart Disease ... ..	-	-	-	-	-	-	-	-	-	-	5	-	25	3	79	17	92	60	73	143	274	223	-	-
Other forms of Heart Disease ... ..	-	-	-	-	-	1	-	-	-	-	-	-	1	-	6	6	8	11	22	47	37	65	-	-
Cerebrovascular Disease ... ..	-	-	-	-	-	-	-	-	-	5	1	2	5	4	18	11	30	29	34	95	88	146	-	-
Other Diseases of Circulatory System ...	-	-	-	-	-	-	-	-	-	-	-	1	1	1	5	2	13	11	24	42	43	57	-	-
Influenza ... ..	1	-	-	-	-	-	-	-	-	-	-	-	1	2	2	1	6	6	1	4	11	13	-	-
Pneumonia... ..	-	-	3	-	-	-	-	-	-	1	-	1	2	-	6	6	21	6	54	71	86	85	-	-
Bronchitis and Emphysema ... ..	-	-	-	-	-	1	-	-	-	-	1	-	3	-	18	4	30	8	31	10	84	22	-	-
Asthma ... ..	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	2	-	-	-	3	-	-	-
Other Diseases of Respiratory System ...	-	-	-	-	-	1	-	-	-	-	-	-	-	-	2	-	2	3	4	3	8	7	-	-
Peptic Ulcer ... ..	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	7	1	1	3	11	4	-	-
Intestinal Obstruction and Hernia ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2	5	2	8	-	-
Cirrhosis of Liver ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	-	-
Other Diseases of Digestive System ...	-	-	1	-	-	-	-	-	1	-	-	-	-	1	2	1	3	3	2	6	8	12	-	-
Nephritis and Nephrosis ... ..	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	2	2	4	2	-	-
Hyperplasia of Prostate ... ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	2	-	5	-	-	-
Other Diseases, Genito-Urinary System	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2	4	4	6	6	13	-	-
Diseases of Skin, Subcutaneous Tissue...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	1	-	-
Diseases of Musculo-Skeletal System ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	2	1	2	-	-
Congenital Anomalies ... ..	6	-	1	-	2	1	1	-	-	-	-	1	-	-	-	-	1	-	-	1	11	3	-	-
Birth Injury, difficult Labour, etc. ...	6	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	4	-	-
Other Causes of Perinatal Mortality ...	5	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	3	-	-
Symptoms and Ill-defined conditions ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	2	5	2	6	-	-
Motor Vehicle Accidents ... ..	-	-	-	-	-	-	1	5	1	3	-	-	3	1	-	1	-	2	2	3	13	9	-	-
All other Accidents ... ..	-	-	-	-	-	-	2	-	2	1	2	1	2	-	1	1	-	5	4	3	13	11	-	-
Suicide and Self-inflicted Injuries ...	-	-	-	-	-	-	2	-	-	-	4	-	3	-	1	2	-	5	-	5	10	12	-	-
All other external causes ... ..	-	-	-	-	-	-	1	-	-	-	1	-	-	-	1	1	-	-	-	-	3	1	-	-
TOTAL ALL CAUSES ... ..	18	7	9	-	3	3	3	5	11	3	12	8	23	14	75	45	225	125	336	246	359	574	1074	1030





## Comparative Statistics, 1969

	Merton	England and Wales
<i>Rates per 1,000 Population :</i>		
Live births ... ..	13.3	16.3
Deaths (all causes) ... ..	11.5	11.9
Respiratory tuberculosis ... ..	0.01	0.02
Cancer of lung and bronchus ... ..	0.76	0.61
<i>Rates per 1,000 live and still births :</i>		
Still births ... ..	12.56	13.0
Maternal mortality ... ..	—	0.19
Perinatal mortality ... ..	21.0	23.0
<i>Rates per 1,000 live births :</i>		
Infant mortality—deaths of infants under 1 year	13.9	18.0
Neo-natal mortality—deaths of infants in first 28 days of life ... ..	10.26	12.0
Early neo-natal mortality—deaths in first week of life ... ..	8.09	10.0

### Principal causes of Death in order of Frequency

Out of 2,104 deaths occurring during the year 1,813 were attributable to the undermentioned principal causes:—

	No. of Deaths.	Percentage of Deaths from all causes.
1. Heart Diseases ... ..	674	32.0
2. Cancer ... ..	507	24.1
3. Cerebrovascular disease ... ..	255	12.1
4. Pneumonia ... ..	171	8.1
5. Bronchitis and Emphysema ... ..	106	5.0
6. Other diseases of the Circulatory System ... ..	100	4.7



## 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 ... ..	9	7	-	-	-	1	-	-	-	17
Congenital Malformations ...	-	1	3	-	-	1	-	-	-	5
Broncho-pneumonia ... ..	-	-	1	-	-	4	-	-	-	5
Birth Injuries ... ..	2	-	-	-	-	-	-	-	-	2
Other causes ... ..	1	1	-	1	-	1	-	-	2	6
Totals ... ..	12	9	4	1	-	7	-	-	2	35

### INFANT MORTALITY

Of the 35 infant deaths 21 occurred in the first seven days of life. All of these 21 babies were delivered in hospital.

The infant mortality rate of 13.9 per 1,000 live births compares most satisfactorily with the rate of 18.0 for England and Wales.

### PERINATAL MORTALITY

The perinatal mortality rate for Merton was 20.67 per 1,000 live and still-births thus comparing favourably with that for England and Wales of 23.0.

### MATERNAL MORTALITY

There were no maternal deaths during the year.



# CONTROL OF COMMUNICABLE DISEASES

Notifications received during 1969  
(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 ... ..	26	258	340	286	36	12	6	—	—	964
Dysentery ... ..	—	14	18	61	20	4	16	6	—	139
Scarlet Fever ... ..	—	3	15	20	7	1	2	—	—	48
Acute Meningitis ... ..	—	—	—	—	1	—	2	1	—	4
Acute Encephalitis ... ..	—	—	—	—	—	—	1	1	—	2
Leptospirosis ... ..	—	—	—	—	—	—	—	1	—	1
Paratyphoid Fever ... ..	—	—	1	—	—	—	—	2	—	3
Food Poisoning ... ..	1	—	—	1	—	—	1	4	16	23
Infective Jaundice ... ..	—	1	1	5	7	12	7	1	2	36
Tuberculosis (Resp.):										
Males ... ..	—	—	—	—	1	5	7	2	4	19
Females ... ..	—	—	1	—	—	2	7	6	3	19
Tuberculosis (Non-Resp.):										
Males ... ..	—	—	—	—	—	2	—	—	1	3
Females ... ..	—	—	—	—	—	—	2	1	—	3
Whooping Cough ... ..	—	2	5	1	—	—	—	—	—	8
Ophthalmia Neonatorum ... ..	1	—	—	—	—	—	—	—	—	1
Malaria ... ..	—	—	—	—	—	1	—	—	—	1
Totals ... ..	28	278	381	374	72	39	51	25	26	1274

## General

1969 saw a great increase in the number of cases of enteritic type illness both in this Borough and in England and Wales as a whole. This increase applied, of course, not only to confirmed cases but also to suspected cases and contacts.

## Typhoid Fever

Eight contacts, involving 25 persons, of typhoid fever were investigated during the year. Four were contacts of cases in this country and four were contacts while abroad. All proved negative.

## Paratyphoid Fever

There were three confirmed cases of paratyphoid fever in the Borough during the year, two in adults returning from a Mediterranean cruise and one in a four-year-old boy taken ill while on holiday in Spain. The boy and one adult are clear, but the other adult was still in the carrier state at the end of the year. In addition, there were ten contacts of cases contracted while on holiday abroad and three suspected contacts, involving 51 people in all. One of the last concerned a party of 14 from a local school who were thought to have come in contact with a case while staying at a Youth Hostel. Specimens were quickly taken and all results proved negative but there was a certain amount of disquiet until the results were known.

## **Leptospirosis**

A fatal case of this disease occurred in September. The man concerned was employed in a Crematorium in a neighbouring borough. At the inquest the death was attributed by the coroner to an industrial disease contracted through work.

## **Hong Kong Influenza**

In early February information was received from a local factory of a number of cases of illness, some of which had enteritic symptoms. It was at first thought that the illness might be due either to food or, as the factory processes involved the use of chemicals, possibly to fumes; but investigation showed neither of these to be responsible. Nose and throat swabs from the later cases were sent for bacteriological examination and in one case a Hong Kong variant of the influenza A2 virus was isolated.

## **Scarlet Fever**

There was a small outbreak of scarlet fever among children in the Council's 'half-way' accommodation at Durnsford Court. Ten cases in all were confirmed, the outbreak being short-lived.

## **Dysentery in Day Nurseries**

Early in February information was received from one of the Authority's two Day Nurseries that a number of the children were suffering from diarrhoea. Routine investigation revealed that 19 children and one member of the staff were, in fact, infected with sonné dysentery. Follow up investigation into the families of the children concerned brought to light a further 12 cases. More than 430 specimens had to be taken before the last child was cleared for return to the Nursery on 25th March.

On 13th May it was found that a cleaner at the second of the Authority's two Day Nurseries had been suffering from gastro-enteritis and a faecal specimen from her on 14th May proved positive for sonné dysentery. On the same day one child at the nursery had loose stools and three suffered from sickness. These were all excluded and two specimens were obtained from all children and from the staff.

Results showed one child to be positive and family investigation brought to light two further cases. Everyone was cleared within a week, with the exception of this last family, who remained infectious until late June. The total number of specimens taken was 165.

## **Gastro-Enteritis in a Mother and Baby Home**

In late April and early May there was a small outbreak of gastro-enteritis at a Mother and Baby Home in the area. Three babies of four weeks or less were affected and specimens were taken from the staff and residents. All results proved negative and the outbreak was over within a fortnight. An inspection of the Home in the early stages of the investigation revealed some defects in procedure which were put right.



## **Infective Jaundice**

By the end of March eleven children and one member of the kitchen staff at a school in the Borough had contracted infective jaundice. All the children in the class mainly concerned, were offered a protective inoculation with Gamma Globulin and twenty parents accepted. The inoculation was given on 27th March and the only other case at the school, which occurred three days later, was obviously being incubated at the time of the inoculation.

## **Dysentery in Schools in the Area**

Following the absence, with enteritis, of a catering assistant at a school in early March, her family was investigated and her daughter was found to be infected with sonné dysentery. Enquiries were made at the school and seven other children were also found to be infected. Routine investigation of the associated families brought to light another four cases. Most of the cases were cleared by the end of March though one child continued positive until 21st April. More than 100 specimens were taken before the outbreak ended.

In mid-May news was received from a Departmental Medical Officer of a number of absences at a school due to diarrhoea. An investigation was started immediately and five days later the number of absentees had risen to 80, of whom 41 were confirmed cases of dysentery. It was therefore decided to close the school for the three days remaining before the half-term holidays in order to help to contain the outbreak. All positive cases and their contacts were excluded from school until clear and local hospitals, local doctors and Medical Officers of Health of neighbouring boroughs were informed of the outbreak. In all, 109 positive cases were found among pupils of the school and their families. Special cleansing was carried out and some drinking taps were re-sited.

It is gratifying to be able to think that by prompt action the outbreak was quickly contained. On 3rd June, ten cases were already cleared and no new cases were notified after 11th June, by which time 49 children had been cleared for return to school. The majority of the excluded children were back at school by early June, though one case continued until 25th August.

In all, 61 families comprising 340 persons were investigated and more than 1,100 specimens were taken before the outbreak ended.

Following the outbreak previously mentioned it was necessary to keep a close check for possible cases of dysentery in all other primary schools in the Borough. 202 persons connected with 16 schools were investigated, two cases of food poisoning infection and 14 cases of dysentery being brought to light. The majority of the cases discovered cleared quickly but one or two dragged on, the last being cleared on 26th August. 362 specimens were taken.

## **Enteritis in a Primary School**

In mid-October two of the kitchen staff and six children at a local primary school suffered symptoms of enteritis. Specimens all proved negative and the outbreak was quickly over.



## **Winter Sickness in a Primary School**

A number of children suffered attacks of sickness in mid-October. Specimens from 14 children proved negative and this outbreak, too, ended quickly.

## **Tuberculous Meningitis**

In early May a notification of tuberculous meningitis was received in respect of a young lady no longer resident in the Borough. Enquiries revealed that she had been a student at the Wimbledon School of Art. All other students and the staff at the school were offered Mass X-ray by the Mobile Unit which attended the school on 9th June. 127 people were X-rayed out of a possible 250 who had been circularised. No significant disease was found.

## **Smallpox**

Twenty-two persons arriving in the Borough without a valid International Certificate of Vaccination were kept under surveillance for the necessary period.

## **Food Poisoning and Food Poisoning Infections**

In mid-April the Department was notified of a case of food poisoning in a member of the staff at a Public House in the Borough. Routine investigation of the staff brought to light one other person who was a carrier of a different food poisoning organism. Both the case and the carrier were excluded from work but the carrier was able to go back after two weeks although, since in her capacity as assistant manageress she had worked at a number of hotels in the immediately preceding period, a widespread investigation was necessary. The original case continued positive for seven weeks. The agent causing the illness was not discovered.

Early in August there were a number of cases of food poisoning among blind persons following a meal. Two of the kitchen staff of the caterers who supplied the meal were also affected. The illness was fortunately very mild and of less than 24 hours' duration. It was found to be due to roast beef which had been re-heated. Inspection of the kitchen concerned resulted in several improvements being made and in the handling and preparation of the pre-cooked meals being re-organised so as to make a repetition of the trouble most unlikely.

## **Food Poisoning Infection in a Hostel**

In October, as a result of the routine medical examination of a newly appointed teacher who had recently returned from India, a case of food poisoning infection was found. She was admitted to hospital and after a course of treatment was cleared fairly quickly. Twenty-two other residents were checked and one carrier was found who cleared quickly after treatment.

## **Suspected Food Poisoning - Old People's Home**

There was an outbreak of enteritic type illness among the residents of one of the Authority's Old People's Homes in November. A visit by the Deputy Medical Officer of Health resulted in samples of

a meal and specimens from some of the residents being sent for bacteriological examination, but all the results were negative. The outbreak was a short one.

There were, in addition, 38 other confirmed cases of food poisoning infection, comprised as follows, which involved the checking of 84 people:—

Salmonella Bredeney	...	2
„ Enteritidis	...	4
„ Heidelberg	...	3
„ Indiana	...	1
„ Kotbuss	...	1
„ Oranienberg	...	2
„ Panama	...	4
„ Reading	...	3
„ Stanley	...	3
„ Typhimurium	...	8
„ Virchow	...	3
„ Singapore	...	1
„ Group E un-named		1
„ Group B un-named		2

There was no apparent connection between any of these cases, which were evenly distributed throughout the Borough. In four cases the patient had just returned from a holiday abroad.

Twenty-one cases of suspected food poisoning, involving 50 people, were also investigated and all proved negative.

## 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 and patients who fail to attend. During 1969 the case load of Tuberculosis Health Visitors was as follows:—

Cases of tuberculosis	...	570
Lung carcinoma cases	...	97
Other cases (bronchitis, bronchiectasis, etc.)	...	106

The new cases examined at the Chest Clinics in 1969 are analysed in the table below:—

	Respiratory		Non-Respiratory		Total
	M	F	M	F	
Diagnosed Tuberculous	14	11	—	—	25
Non Tuberculous	445	274	—	—	719



## Domiciliary Visiting

Home visiting continues to be an important part of the work of Tuberculosis Health Visitors. The number of tuberculosis households visited during the year was 547.

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

Visits in connection with old cases	...	927
Visits in connection with new cases	...	41
Visits in connection with contacts	...	111
Total	...	1,079

## 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	...	1,503
Number found negative	...	1,470
Number vaccinated with B.C.G.	...	1,469

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

Thirty-three 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	19	19
Non-respiratory	3	3

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	P	Non-P
No. of cases on Register at 1.1.69	243	228	26	39	471	65
Primary Notifications in 1969	19	19	3	3	38	6
Inward transfers in 1969	8	5	1	—	13	1
Totals	270	252	30	42	522	72
Died during 1969	9	2	1	—	11	1
Recovered during 1969	28	18	—	1	46	1
Transferred out in 1969	14	13	1	5	27	6
No. of cases on Register 31.12.69	219	219	28	36	438	64



One hundred and ninety-nine contacts were examined for the first time during the year and none were found to be tuberculous. Four old contacts were 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	
	Total	Males	Females	Males	Females
General Practitioner Service ... ..	1,997	4	—	17	1
Public and Industrial Sessions ... ..	11,277	4	—	13	5
Totals ... ..	13,274	8	—	30	6

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

The death rates per 1,000 population were 0.01 respiratory and nil non-respiratory, compared with 0.02 and 0.01 respectively for England and Wales. The comparable figures for the Borough for 1968 were 0.03 and nil.

### 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, whooping cough, measles, poliomyelitis and tetanus:—

Disease against which protection given	Number of primary courses given						Total
	Year of Birth					Others under 16 years	
	1969	1968	1967	1966	1962/65		
Diphtheria ...	117	892	75	11	3	7	1,155
Whooping Cough...	117	890	75	11	28	6	1,127
Poliomyelitis (Oral)	93	831	60	15	51	31	1,081
Tetanus ... ..	117	892	75	11	53	32	1,180
Measles ... ..	1	96	274	181	266	23	841

The table below gives the percentage of children born in 1967 and 1968 who had been given protection against whooping cough, diphtheria and poliomyelitis with the figure for England and Wales shown in brackets:—

	Percentage of Children Inoculated	
	Born in 1967	Born in 1968
Whooping Cough ...	86 (81)	67 (66)
Diphtheria ...	87 (83)	67 (67)
Poliomyelitis ...	86 (80)	65 (65)

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 ...	3,381
Whooping Cough ...	1,142
Poliomyelitis ...	3,426
Tetanus ...	3,359

### Poliomyelitis

At the end of the year, 89,360 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 1943-68 ...	61,273
Persons born 1933-42 ...	15,791
Others ...	12,296

Total ...	89,360
-----------	--------



At the end of the year 26,612 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 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 ...	2	11	13	10	1,003	194	138	1,371
Number re-vaccinated ...	—	—	—	—	—	16	247	263

The percentage of children under two years vaccinated against smallpox was 40 compared with the figure of 31 for England and Wales.

## 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 1969:—

Clinic	Number of new cases seen during year				
	Total all conditions	Syphilis		Gonorrhea	Other
		Primary & Secondary	Other		
Croydon General Hospital ...	41	—	—	9	32
Dreadnought Seamen's Hospital ...	1	—	—	—	1
London Hospital ...	7	—	—	—	7
St. Helier Hospital ...	140	—	—	20	120
St. Thomas's Hospital ...	138	5	1	27	105
Westminster Hospital ...	26	—	—	6	20
Moorfield's Eye Hospital ...	4	—	1	—	3
St. Bartholomew's Hospital ...	16	—	—	—	16
Totals ...	373	5	2	62	304

Although returns of patients treated were received from eight hospitals compared with six in 1968, the total numbers of new syphilitic cases dealt with fell from 420 in 1968 to 373 in 1969.



## GENERAL MEDICAL SERVICES

During the year the medical staff carried out 1,263 medical examinations of staff for superannuation purposes. Seventeen examinations were also carried out on staff, absent from work owing to sickness, to ascertain their fitness to return to duty.

## NATIONAL ASSISTANCE ACTS

During the year two cases were removed to hospital by Orders made under the National Assistance Acts. In neither case was it necessary to apply for an extension of the Order.

### Child Health Centres

The medical change in the first year of the Child Health Centres was continued in 1952. The main emphasis of the programme is the traditional child health service, but the management of the centres is of increasing importance. At the same time the development of the medical staff of the centres is being encouraged.

While the great majority of the children are for the most part developing normally, medical attention of the new centres is resulting in the survival of more children with physical or mental defects who would formerly have succumbed. For the most part the children are brought to the centres at an early age, and the medical staff are able to detect and prevent or mitigate the development of such defects. The work of the medical staff of the centres is of increasing importance, and the medical staff are being encouraged to take a more active part in the work of the centres.

If a defect is discovered or suspected the child is referred to the parents, who can be referred to the Social Service or to the Developmental Clinic. The aim of the service is to give the maximum help to the child and his family. They can then be helped by their education, and by the moment they are able to take any important steps which have been designed to reduce their children's handicap.

### Ante-Natal and Post-Natal Services

The ante-natal and post-natal services are held each week at the area, at which the Medical Officer and a Public Health Nurse are in attendance. The ante-natal clinics are held for the purpose of subsequent health checks, and the post-natal sessions are held on these occasions.

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

### 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 ... ..	118	98	—	—	118	98	948	839	11	5	959	844	1066	937	11	5	1077	942
Births occurring outside Merton attributable to Merton (Inward Transfers) ... ..	1	1	—	—	1	1	690	761	10	9	700	770	691	762	10	9	701	771
Total of all births notified ... ..	119	99	—	—	119	99	1638	1600	21	14	1659	1614	1757	1699	21	14	1778	1713
Births occurring in Merton attributable to other Authorities (Outward Transfers) ... ..	—	1	—	—	—	1	460	514	4	1	464	515	460	515	4	1	464	516
Total births attributable to Merton	119	98	—	—	119	98	1178	1086	17	13	1195	1099	1297	1184	17	13	1314	1197

# PERSONAL HEALTH SERVICES

## MATERNAL AND CHILD-CARE

### General

Since 1st January, 1968, screening for Phenylketonuria by the Guthrie Blood Test method has been carried out by our domiciliary midwives on all babies delivered at home or discharged from hospital before the sixth day. The laboratory work is carried out by the Group Laboratories at Queen Mary's Hospital for Children, Carshalton.

During 1969 this service was extended and the two maternity units in the Borough are now taking blood from all babies delivered in the units who are still there on the sixth day. Nelson Hospital commenced on 1st July, 1969, and St. Teresa's Maternity Hospital on 1st October.

Our domiciliary midwives took 652 specimens during the year, five of which were repeat samples where the first reading had been slightly raised. All specimens eventually gave negative results.

### Child Health Centres

The gradual change in the function of the Child Health Centres was continued in 1969. The Immunisation programme and the traditional advice concerning feeding and management retained their importance, but at the same time the developmental assessment of children is becoming a vital part of the medical officer's work.

While the great majority of the children are found to be developing normally modern medical treatment of the newborn is resulting in the survival of more children with physical or mental defects who would formerly have succumbed. Regular examinations of all children are preferably arranged to coincide with the ages at which screening tests are most suitably performed. The early detection of a defect may prevent or mitigate the development of a handicap. The present and future importance of the work of the medical officers in the Centres rests on their ability to detect deviation from the normal physical, mental and emotional development of children at the earliest possible age.

If a defect is discovered or suspected the child and his parents can be referred for Specialist advice or treatment to the Developmental Clinic or Hospital. The aim of the service is to give maximum help to the children who require it. They can then profit by their educational opportunities from the moment they start school as any important defects should already have been discovered, and steps taken to treat them or at least reduce their adverse effects.

### Ante-Natal and Post-Natal Services

Six ante-natal sessions are held each week at Clinics in the area, at which a Departmental 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 ...	221
Number of women who attended for post-natal examination ...	50

There were 288 midwives' clinic sessions at which 269 women attended. The total number of attendances was 1,575.

## 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 ...	379
Booked for domiciliary confinement ...	42
Total ...	421

The total number of attendances was 2,322.

## Premature Infants

The total number of premature infants born in the area during 1969 was 148 compared with 142 in 1968.

Fifteen premature infants died in 1969. This means that 10.1% of the 148 premature infants born during the year died within a year as compared with 0.8% for full-term babies.

### 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 ...	—	—	—	—	—	—	—
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. ...	2	—	2	—	—	—	2
Totals ...	3	—	3	—	—	—	3

## CHILD HEALTH

### General

The Local Authority continues to hold Child Health Centres at the fourteen premises listed below. Nine of these are purpose-built, the remainder are hired for weekly sessions.

In addition, there are now four group practices of general practitioners who hold child health clinics at which the health visitor attached to the group attends. These sessions have naturally resulted in a slight reduction in the total attendance at some of the local authority clinics. The overall attendances, however, remain high. Here, great emphasis is made on the early detection and referral of any condition likely to hinder a child's normal physical, mental or emotional development.

Child Health Centres being operated at the end of the year were as follows:—

Amity Grove Clinic West Wimbledon	Monday Friday	2-4 p.m. 10 to 12 noon
Baptist Hall Longley Road, S.W.17	Tuesday	1.30-3.30 p.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* Lingfield Road, S.W.19	Thursday	2-4 p.m.
Grand Drive Clinic Raynes Park	Monday Wednesday	10 to 12 noon and 2-4 p.m. 10 to 12 noon
Meopham Road Clinic Mitcham	Wednesday	1.30-3.30 p.m.
Middleton Road Clinic Morden	Tuesday Friday	2-4 p.m. 2-4 p.m.
Morden Road Clinic Merton	Tuesday Thursday	2-4 p.m. 2-4 p.m.
Pelham Road Clinic Wimbledon	Tuesday Friday	2-4 p.m. 2-4 p.m.
St. John's Hall* High Path, Merton	Thursday	10 to 12 noon
St. Luke's Hall* Strathmore Road, S.W.19	Friday	2-4 p.m.
Wide Way Clinic Mitcham	Monday Thursday	1.30-3.30 p.m. 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 Child Health Centres

Name of Centre	Total No. of Sessions	First Attendances				Total Attendances including Firsts
		Born In			Total 1964-69	
		1969	1968	1964-67		
Amity Grove ...	99	222	221	224	667	4,367
Cavendish Road	99	186	226	140	552	3,490
Church Road ...	103	226	211	210	647	3,769
Churchill Hall ...	52	80	71	89	240	2,148
Emmanuel Hall	50	79	59	69	207	1,541
Grand Drive ...	151	258	243	445	946	7,232
Meopham Road	52	62	99	101	262	1,895
Middleton Road	101	95	108	77	280	2,454
Morden Road ...	101	149	97	45	291	2,950
Pelham Road ...	102	238	331	240	809	4,740
St. Barnabas Hall	44 ★	204	240	122	566	3,690
Longley Road ...	8 ★	34	5	8	47	462
St. John's Hall ...	51	82	68	81	231	1,606
St. Luke's Hall...	50	92	73	80	245	1,770
Wide Way ...	102	188	151	228	567	3,507
Totals ...	1,165	2,195	2,203	2,159	6,557	45,621

A total of 6,557 children attended during the year.

\*The Child Health Centre at St. Barnabas' Church Hall was discontinued in November, difficulties having been experienced in providing adequate heating, and new premises were rented in Longley Road, commencing on 11th November.

## Attendances at Toddlers' Clinics

First Attendances				Total Attendances	Total Sessions (All Clinics)
Born In			Total 1964-69		
1969	1968	1964-67			
—	16	1766	1782	2434	253

## Dental Care

During 1969, reduced staff, particularly of Dental Auxiliaries, accounted for 52 fewer sessions being devoted to this work. Inspections, however, were about the same, 614 in 1968 and 607 in 1969. Of these, fewer required treatment, 305 in 1968 and 276 in 1969.

Following his visit of Inspection in March, 1969, an officer of the Department of Education and Science reported on the Dental Services as follows: 'The Service for Mothers and Pre-school Children has developed satisfactorily, and the Authority is congratulated on the



high standard of Dental Care provided and for the fact that a very much higher than average number of these children were inspected and given treatment if they required it.'

The policy of directing Dental Health Education towards Parent-craft Groups and of persuading parents of the benefits of early check-ups for their children and treatment where necessary, is helping to reduce the incidence of dental disease, and an increasing number of parents now realise that simple preventive measures from three years onwards will save their children much pain and discomfort later on.

Fewer expectant and nursing mothers presented for treatment during the year. Treatment is of course available for them in the General Dental Service, but Health Visitors have been asked to ensure that expectant and nursing mothers are made aware of the availability of dental inspections and treatment in the Borough Clinics.

	Examined	Commenced treatment	Completed course of treatment
Expectant and Nursing Mothers	28	27	16
Children under 5 ... ..	607	465	297

	Scaling and gum treatment	Fillings	Teeth otherwise conserved	Extractions	General Anaesthetics	Dentures		X-Rays
						Full	Part	
Expectant and Nursing Mothers	19	63	—	3	1	—	2	6
Children under 5 ...	185	874	777	75	41	—	—	2

## 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	40.0
Middleton Road Day Nursery ...	9	30	39	29.7

At the end of the year there were 35 private day nurseries registered under the Nurseries and Child Minders Regulation Act, with a total of 848 places. In addition there were 103 daily minders on the register. These figures show a marked increase on the figures at the end of 1968, when 28 private nurseries providing 723 places and 23 daily minders were on the register, thus reflecting the effect of operating the amendment made to the Nurseries and Child Minders Regulation Act by the Health Services and Public Health Act, 1968.

### Developmental Clinic

At this Clinic young children are seen by appointment by Dr. Rona McLean of the Manor Hospital, Epsom, who advises parents on the mental development of their children. A Health Visitor and a Mental Health Social Worker of the Authority and a Speech Therapist from the Manor Hospital, assist Dr. McLean at this Clinic.

This Developmental Clinic is made possible by the ready co-operation of Dr. Worters, the Physician-Superintendent of the Manor Hospital, Epsom, in making available a senior member of his medical staff to conduct this highly successful clinic, which is much appreciated by parents of children seen there.

Seventeen sessions were held during the year at which 28 children were seen for the first time and 40 children were seen for a second time for a case review.

### Care of Unmarried Mothers and their Children

Thirty 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 and Ear	...	4
Alimentary System	...	2
Heart and Circulatory System	...	1
Urino-Genital System	...	7
Limbs	...	14
Other Malformations	...	5

Total ... 46

### Welfare Foods and Vitamins

National Dried Milk and vitamins were available at all Child Health 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 1969 are shown below:—

National Dried Milk	...	17,695 tins
Cod Liver Oil	...	3,770 bottles
Vitamins 'A' and 'D'	...	4,278 packets
Orange juice	...	65,488 bottles



# PUBLIC HEALTH NURSING AND ALLIED SERVICES

## HEALTH VISITING

### General

The past year has seen some changes and re-organisation within the nursing services.

Miss P. Richards, Superintendent Health Visitor, retired after 22 years' combined service with this Authority and with the Surrey County Council.

At the same time, as part of a re-organisation of the management structure of the Nursing Services, a post of Principal Nursing Officer was created in substitution for a post of Deputy Superintendent Health Visitor. The role of Principal Nursing Officer is to co-ordinate the activities of the three branches of the Nursing Services and to act as a single adviser to the Medical Officer of Health on the administration and development of the Nursing Services. A post of this kind is essential if the Nursing Services are to be flexible enough to meet the changing needs and techniques precipitated by the policy of attachment of nursing staff to general practitioners, and the rapidly changing pattern of hospital care brought about by advanced methods of treatment.

On the retirement of Miss Richards, Mrs. I. Brown, former Deputy Superintendent Health Visitor, was appointed as Superintendent.

### Staff

At 31st December, 1969, the staff position was:—

- 1 Superintendent Health Visitor.
- 28 Full-time Health Visitors.
- 2 Part-time Health Visitors.
- 2 Part-time Geriatric Health Visitors.
- 1 Full-time Tuberculosis Health Visitor.
- 2 Part-time Tuberculosis Health Visitors.
- 4 Health Visitor Students.

Approval was given in November by the Establishment Committee for the substitution of three posts of Group Adviser for three posts of Health Visitors as a further measure of re-organisation of the Nursing Services. In addition to carrying a small personal case load, these senior health visitors would be responsible, at field level, for the organisation of, and work within, a group of health visitors. They would undertake the practical work supervision of student health visitors as they approached the end of their training, and the supervision of child-minders and playgroups within their own area. Applicants from the Borough's existing staff were of such high calibre that it was possible to make the appointments from existing staff.

These new posts were part of the measures necessary to provide a new management structure in the Nursing Services in line with the recommendations made by the Working Party on the Management Structure of the Local Authority Nursing Services set up by the Department of Health and Social Security.



Changes other than those already mentioned, in health visiting staff were considerable. Three members retired; the teaching profession claimed three; two had babies and one moved away from the area. Two of three students sponsored for training in 1968 successfully completed their course and joined the staff in October, 1969. In addition to these two newly trained health visitors, it was possible to recruit only a further three staff to replace the losses already mentioned. The shortage of trained nurses throughout the country is well-known and this effect is now being felt in the community. This makes it doubly important to ensure that trained staff are used only for the purpose for which they have been trained, and not for duties, not requiring their specialised skills, which may be carried out by ancillary staff.

## **General Practitioner Attachments**

In December 1969, 11 Health Visitors were attached to 37 general practitioners. This close liaison between groups of general practitioners and health visitors employed by the local authority, gives a more personal and complete service to the community. General practitioners readily admit the advantages to the practice of these highly trained nurses. The Health Visitor fully undertakes her role as a family visitor, detecting and alerting the general practitioner and other social agencies, to deviations from the normal in social, emotional and physical developments within all members of the family.

As more general practitioners form working groups, the requests for the attachment of nursing staff will increase. It has already been demonstrated that the demands on attached staff by general practitioners and the community has increased; it is therefore essential to ensure that sufficient staff are maintained to meet these demands.

## **Training of Health Visitors**

Four Health Visitor Students were sponsored for training in 1969. Two are undertaking their courses at the University of Surrey; one at Chiswick College and one at The Borough Polytechnic. If successful they will join the staff in October, 1970.

## **Post-Graduate Training**

One Health Visitor completed her Fieldwork Instructor's Course during the year, bringing the number of staff qualified to train students to five. Suitable staff who wish to do this work must have been qualified for a minimum period of two years. The mobility of staff makes it essential that the number of staff trained as field work instructors is maintained at a reasonable level.

Five Health Visitors attended post-graduate refresher courses and four attended a weekend course in psychoprophylaxis to enable them to take classes for ante-natal mothers in Preparation for Child-birth. One Health Visitor who re-joined the staff after a period of time abroad, attended a health visitor re-entry course.

Screening an infant for possible deafness is a specialised procedure carried out by Health Visitors on all infants at the age of seven months. Thirteen staff were given in-service training in this throughout the year.

Where the result of the screening tests are not satisfactory, children may, after consultation with, or examination by, a Departmental Medical Officer, be referred to the Audiology Clinic for specialist diagnosis.

Mrs. Brown, the Superintendent Health Visitor, was awarded a place by the London Boroughs Training Committee on the course in Middle Management run by the King Edward VII Hospital Fund.

## Geriatric Health Visiting

The numbers of elderly persons within the borough continue to increase. A considerable portion of all Health Visitors' time is spent in visiting this age group. The aims of all staff are to support the elderly persons in their own homes for as long as it is possible to do so.

One Health Visitor has continued to work part-time attached to the team of the consultant geriatrician, based at St. George's Hospital, Tooting. She has acted as a valuable link between hospital, general practitioner and local staff. The volume of work within this field is so great that plans are proceeding for a Health Visitor to undertake geriatric health visiting as a full-time specialist. This service is developing very well in association with Dr. Millard, who also acts as part-time Consultant Geriatrician to the Local Authority.

## Health Education

All Health Visitors undertake health education teaching in an informal manner in every visit they pay to a home or in every consultation they have in a clinic or surgery. The mothercraft classes, at which psychoprophylaxis teaching is also given, are tremendously successful, and the evening for expectant parents has been so popular that it is now held monthly. Health teaching, particularly to young adolescents, has also been requested by a number of schools. Classes held have covered a wide range of health topics and have proved popular and extremely valuable, allaying fears and correcting misconceptions. It has not been possible this year, because of staff shortage, to meet all the demands made, but it is hoped as more supportive ancillary staff become available for other duties, to expand in this field of work.

## Summary of Work of Health Visitors

The following tables give details of the number of children and other cases visited, and attendances by the Health Visitors at the various clinics and centres:—

### VISITS PAID

To children under 5 yrs				To families with problems	To the mentally ill	To the mentally sub-normal	To geriatric cases	No. of families visited
Born in 1969	Born in 1968	Born in 1964-67	Total					
2,551	2,669	7,625	12,845	542	121	75	622	9,766



## Sessions attended.

At Ante-Natal Clinics	...	...	212
Relaxation Classes	...	...	330
Developmental Clinics	...	...	18
Child Health Centre Sessions	...	...	1,885
General Practitioners' Clinics	...	...	232
Toddlers' Clinics	...	...	237
Parentcraft Classes:			
Day Sessions	...	...	60
Evening Sessions	...	...	94
Fathercraft Classes	...	...	27
Geriatric Clinics	...	...	102
Vaccination and Immunisation Sessions			87
Cytology Clinics	...	...	13
Co-ordinating Conferences	...	...	13
Case Conferences	...	...	22
Screening tests of hearing of young children	...	...	168
Meetings with outside bodies	...	...	365
Sessions with students	...	...	236
Total	...	...	4,101

## MIDWIFERY

### Staff

As at 31st December, 1969, the staff consisted of:—

- 1 Non Medical Supervisor of Midwives (also acts as Superintendent of the Home Nursing Service).
- 1 Deputy Non-Medical Supervisor of Midwives (also acts as Deputy Superintendent of the Home Nursing Service).
- 7 Whole-time District Midwives.
- 2 District Nurse/Midwives.

### Introductory

The number of home confinements has continued its downward trend (217 compared with 321 for 1968), but with an increase of 99 planned and unplanned 48-hour discharges from hospital, there has been no overall decrease in work.

Midwives have continued to obtain blood samples for the testing of phenylketonuria by the Guthrie method for babies delivered at home or discharged from hospital before the sixth day.

### Organisation

2 midwives are housed at 28/30 Kings Road, Wimbledon, S.W.19.

1 at 'The Croft', Mitcham.

1 in a flat leased from the Greater London Council, and the remaining three in their own homes.

Two District Nurse/Midwives relieve full-time Midwives during holidays, refresher courses, sickness, etc. All midwives are motorists using their own cars or one supplied by the authority.



## Maternity Cases Attended

There were 217 domiciliary confinements reported and 2,294 hospital confinements during the year. This shows a reduction of 127 on the figure for 1968. Midwives employed by the Authority attended all home confinements, 216 where a doctor was booked and one where no doctor was booked.

## Inhalational Analgesia

All the Authority's Midwives are qualified in administering inhalational analgesia (trilene and gas and oxygen) in accordance with the rules of the Central Midwives' Board. During the year, District Midwives administered inhalational analgesia to mothers as follows:

Gas and oxygen—140.

Trilene—23.

## Ophthalmia Neonatorum

One case was notified during the year.

## Maternity Outfits

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

## Medical Aid

Medical aid was summoned by midwives to 97 domiciliary cases where a doctor was already booked for the confinement.

## The Emergency Obstetric Unit

The aid of this unit was summoned on five occasions and the patients were subsequently admitted to hospital:—

2 antepartum haemorrhage.

1 breech presentation.

1 foetal heart not heard (still-born infant).

1 retained placenta.

## Early Discharges from Maternity Hospitals

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

48 hours after confinement	...	...	386
Other discharges before the tenth day	...	...	126
			<hr/>
Total	...	...	512

This shows an increase of 99 on those for 1968.

## Midwifery Training

During the year 19 Student Midwives from the Epsom, Nelson and St. Teresa's Hospitals completed their domiciliary training. There were a further four in training at the end of December, 1969.

Eight midwives are approved by the Central Midwives' Board as District Midwifery Teachers for the practical training of student

Midwives. Twenty-six patients were delivered at the Nelson Hospital by student Midwives, accompanied and supervised by a domiciliary Midwife. Patients are discharged as soon as possible after delivery, the home care being continued by the domiciliary Midwife. With the continued decrease in home confinements, these deliveries form an important part of the Second Period Training of student Midwives.

Eight obstetric student Nurses from St. Helier Hospital spent a day with the Midwives observing some of the services that the community offers to mothers booked for home confinement and for planned early discharge.

### Post-Graduate Courses

The Midwifery Superintendent and three District Midwives attended refresher courses in accordance with the rules of the Central Midwives' Board. One District Midwife attended a Day Release Course on the methods of teaching parentcraft.

### 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 ...	1,839
Post-Natal visits to home confinements ...	3,571
Post-Natal visits to 48-hour and other early discharges from hospital ...	3,286
Total ...	8,696

### Attendances at Clinics

Two hundred and eighty-eight Ante-Natal Clinic sessions were held by Midwives during the year and 269 women attended these clinics for the first time.

The total number of attendances at Midwives' Ante-Natal Clinics was 1,575.

### Transfers to Hospital

The undermentioned patients booked for home confinements were transferred to hospital:—

(a) during pregnancy ...	30
(b) during labour ...	13

All patients transferred to hospital during labour are accompanied by a Midwife unless the Emergency Obstetric Squad has been called.

## HOME NURSING

### General

The work of the Home Nurses this year has continued to increase, with an additional 228 patients receiving nursing care. Most of the work has been in giving care to the elderly, infirm and chronically sick. These patients require frequent visiting and the often lengthy nature of such visits places full demands on the capacity of the nursing staff.



## **Staff**

At the 31st December, 1969, the staff consisted of:—

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

## **Organisation**

Seven Nurses and five Nursing Auxiliaries left during the year. Recruitment of trained staff, S.R.N. and S.E.N., has been maintained with a high percentage of married staff. Considerable difficulty, however, has been experienced in the recruitment of suitable Nursing Auxiliaries. This has improved with the provision of car allowances. Nursing Auxiliaries are vital members of the Health team with one auxiliary working with a group of nurses. Her duties are mainly bathing, dressing, getting up and putting to bed elderly patients who do not require nursing care. In spite of the 3,851 visits undertaken by auxiliaries, the nurses still undertook 8,780 visits that did not really require the expertise of a trained nurse. It is hoped that in the forthcoming year, with an increase in auxiliary staff, this number can be decreased.

## **Training of District Nurses**

This Authority continues to be an approved training area for the practical part of the district nurse training leading to the National Certificate of District Nurse Training. Four nurses successfully completed their district training and three are still working for the Borough. The husband of the fourth student was transferred by his firm to another area.

## **Visiting Hospital Staff**

Forty-eight Nurses from the Wimbledon, Nelson, Wandle Valley and Wilson Hospitals spent a morning with the District Nurse observing the operation of community services.

## **General Practitioner Attachments**

Eight District Nurses are now attached to groups of General Practitioners, an increase of seven in the last year. Plans for further attachments are under discussion. General Practitioners have been full of praise for the work of their attached nurses. Their work loads consequently increased in number and in the variety of cases referred. It is anticipated that with planned hospital discharges following selective surgery, their work will increase even more.

## **Post-Graduate Courses for District Nurses**

During the year six nurses attended residential refresher courses of one week's duration and three 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 1.1.69	Cases added	Cases removed	Cases on books at end of period
0-5 years ... ..	—	21	20	1
5-64 years ... ..	150	631	629	152
65 years and over ...	778	1,395	1,448	725
Totals ... ..	928	2,047	2,097	878

The total number of cases attended during the year was 2,975.

## Visits Made

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

January ... ..	8,193
February ... ..	7,652
March ... ..	8,510
April ... ..	8,489
May ... ..	8,260
June ... ..	7,967
July ... ..	7,748
August ... ..	7,232
September ... ..	7,759
October ... ..	7,487
November ... ..	7,679
December ... ..	8,285
Total ... ..	95,261

## 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**

These pads are supplied to patients free of charge at the request of either the general practitioner or district nurse in attendance. With the number of elderly persons increasing and living longer, the demand has continued to rise. Patients who use these pads are provided with tarred paper containers. Soiled pads can then be sealed in these bags and collected for disposal by the refuse collection service.

## **Incontinent Laundry Service**

In conjunction with a neighbouring authority a collection and delivery service of draw sheets is arranged, twice weekly, to patients where the district nurse advises this. It is a growing and much appreciated service.

## **DOMESTIC HELP SERVICE**

### **Staff**

At 31st December, 1969, the staff consisted of:—

- 1 Home Help Organiser.
- 1 Senior Assistant Home Help Organiser.
- 2 Assistant Home Help Organisers.
- 3 Clerks.
- 197 Part-time Home Helps.
- 5 Neighbourly Helps.

### **Organisation**

Recruitment was less successful than in the previous year, 61 Home Helps were engaged, eight less than in 1968. 72 Home Helps left the service during the year for various reasons. Advertisements were put in the press, leaflets were delivered door to door and were also handed out outside Sainsbury's and other supermarkets. The response was very disappointing.

Talks were given by the Home Help Organiser to Parentcraft groups at Mitcham, Wimbledon and Morden, to Old People's Welfare and to the Nurses and Student Health Visitors.

### **Training Course**

The Training Course continued during the year, except between June and September due to the peak holiday period. The Home Helps enjoyed the Courses, but a more comprehensive scheme, where one could judge the practical work would be more beneficial.

### **Neighbourly Help Scheme**

Efforts were made to increase the numbers but there was no response. There is a lot of competition from industry.

The annual 'get together' for Home Helps was held in the Vestry Hall in October. This is very popular and proved even more successful than in previous years.



## 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., 1968	Cases on books at 31st Dec., 1969	Total cases dealt with during 1969
Chronic Sick and Aged ... ..	1,095	1,163	1,541
Tuberculosis ... ..	13	6	17
Acute Illness ... ..	18	12	88
Maternity ... ..	—	—	48
Totals ... ..	1,126	1,181	1,694

## Details of Sources of Applications in 1969

General Practitioners ... ..	528
Hospitals ... ..	244
Health Visitors ... ..	18
Home Nurses ... ..	3
Welfare Services ... ..	20
Blind Welfare ... ..	6
Maternity Bookings ... ..	37
Others ... ..	6
	862

The Organiser and the three Assistant Organisers have paid 751 first visits and 4,968 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 ...	15,810	209	380	264	49 4 0	16,663
February ...	15,920	222	378	339	49 4 0	16,859
March ...	19,765	287	336	137	61 10 0	20,525
April ...	13,402	163	361	290	49 4 0	14,216
May ...	19,277	222	466	69	52 6 6	20,034
June ...	15,019	174	414	180	44 16 6	15,787
July ...	13,687	120	338	96	45 8 6	14,241
August ...	15,812	170	297	121	56 11 6	16,400
September ...	13,898	136	147	46	35 16 0	14,227
October ...	15,391	187	235	75	35 13 0	15,888
November ...	18,783	202	434	218	40 9 0	19,637
December ...	13,387	150	201	117	26 4 0	13,855
Totals ...	190,151	2,242	3,987	1,952	546 7 0	198,332



# PREVENTION OF ILLNESS, CARE AND AFTER-CARE

## Clinics for Older People

There are two clinics for older people. Dr. Joan Ferreira reports on the clinic at Amity Grove as follows:—

Our main problem during the year was to meet the demand for new appointments and to make provision for the patients who are returning for re-examination and advice. It became necessary to hold a second weekly session in November.

We try to carry out as thorough an examination as possible and do certain screening tests. This is, however, only the basis.

We are not so much looking for disease as for health, and hope that patients may achieve the maximum well-being of which they are capable. At the same time we try to identify the more vulnerable and to recognise their special needs. This is a new and mainly unexplored field of work for the health visitor.

There are several quite important ways in which our patients can be helped. Some are overweight and many do not realise that ideas on diet must change as life progresses. Others are potentially lonely and depressed and will become more so unless this is recognised and treated appropriately. Some have chronic anxiety (this is not surprising when one hears the traumatic childhood histories which reflect the social and medical conditions of the beginning of the century). Supportive therapy from interested and skilled health visitors can be of great benefit.

Mild high tone deafness is common and may result in certain difficulties in the patient which are misinterpreted by him and may also lead him to appear to his family and friends as absent-minded, impolite, or stupid. We are trying to develop methods of education of the slightly hard of hearing to prevent the isolation which can ensue.

Many of the patients have osteo-arthritic symptoms which worry them not so much because of the inconvenience and discomfort, but because they fear a general worsening and 'seizing up'. The subject can be discussed and put in perspective.

On the whole the obvious hazards to health seem to be the most difficult to eliminate. We have a number of patients who continue to smoke, despite the known risk of developing cancer of the lung, chronic bronchitis and an aggravation of heart disease.

As people live longer it becomes more important to promote health in the older age group. This type of clinic should ideally be run in a group practice where the patient's main medical records are available and where his own doctor, or another in the practice especially interested in health education, can work with the health visitor. Patients in this age group presenting in surgery with vague complaints could then be studied further in the clinic, and it could cater for those older members of the community who do not consider they have particular symptoms, but would appreciate examination and advice.

We have learnt to admire the older patients who come to the clinic for many reasons. Perhaps the most impressive group are the over-seventies, who have been adults in two major wars and have experienced such enormous social changes. Some of them are still working. I wonder if the community appreciates enough their strength and adaptability?

The second clinic at Middleton Road is attended by Dr. W. B. James who has the following observations to make:—

Although the figures given below represent a full year's operation of this Clinic, the total number of new patients seen is only 57, and the number of re-attendances is 30. Only two new cases are normally seen at this clinic at each session, since the compilation of a medical history by the nurse and the doctor in attendance is time consuming, and a full scale medical examination is subsequently carried out.

In spite of the relatively small numbers seen, the thorough examination, the results of which are forwarded to the patient's own general practitioner, has been found to be well worth-while and, in most cases, gives some re-assurance to the patients concerned. Any treatment is, of course, a matter for the patient's own doctor, but after the first attendance, where confidence has been established between the doctor and the health visitor at the clinic, advice and guidance can more readily be given to the patients on adjustment to the process of growing older.

In subsequent years, the numbers of re-attendances may be expected to increase.

### **Health Education**

Good progress was maintained throughout the year in the ever expanding field of health education. The number of requests for help continues to increase from members of staff within the Health Department, from other Departments, particularly the Education Department, and from local hospitals and other outside organisations. The type of help required varied tremendously from the severely practical to the challenging abstract. All requests were met with every assistance possible.

### **In Service Training**

A seminar was held in July on 'The Techniques of Teaching Health Education'. Members of the Health Education Council were fully involved with the staff of the Health Education Section in organising and conducting this course. Staff from the Education, Children's and Welfare Departments, as well as from the Health Department, attended and very considerable benefit was derived, not least from the social contact with staff from other fields of work.

Help was given throughout the year at In-Service Training Courses for Home Helps, visual aids being supplied, and informal talks and discussions were held on subjects closely allied to the field of the Home Help.

Assistance and co-operation was also given to the Audiology Staff when running courses for health and teaching personnel, and for parents of children with hearing defects.



## **Health Education in Schools**

Continuing co-operation was received from, and given to, the Education Department. The teaching pattern has had need to change, partly due to changes occurring in the educational system, but it is felt that constant changes of pattern may well be inevitable in health education in schools and will vary according to the needs to be met from school to school.

In addition to health education staff, Health Visitors and Public Health Inspectors teaching in schools, girls from some of the High Schools attended clinics during Child Health Centre sessions and coffee mornings for the elderly, where they are encouraged to take advantage of these more informal learning situations. The relationships between Health Visitors and pupils which have developed through these visits, appear to be of great value to both sides.

The Health Education Section also liaised with tutors of the University of Surrey in arranging a suitable programme for student Health Visitors' teaching practice.

## **Dental Health**

A return visit was made by Pierre the Clown to many of the primary and middle schools in the Borough to help promote and maintain a good standard of dental health. This visit was followed up in some of the schools by the dental auxiliary, in addition, of course, to any follow up made by the teachers themselves.

## **Anti-Smoking Clinics**

Two 'Five Day Plan' clinics were held in May and October. These were reasonably well attended. From the follow up it would appear that continuing support might have achieved more beneficial results.

The October Anti-Smoking Clinic was followed after a two-week interval by a Five Day Weight Control Plan and three weeks later a programme on general health hints took place.

## **Cervical Cytology**

There was a close liaison with a local hospital who were organising a campaign to encourage more women to take advantage of the facilities available for cervical smears. Displays were set up and film shows given. The latter were followed by discussions and question and answer sessions, in which the Health Education staff took part.

## **Civic Exhibition**

The theme of the Health Department this year illustrated the services available for 'Man, His Family and His Environment'. Much interest was shown in the exhibits, particularly in foetal models and in a display concerning air pollution.

## **'Old People's Week'**

Displays were again exhibited in departmental stores and libraries in addition to those in the clinics and the foyer of the Health Department. Co-operation was received from the Guild of Social Service

to man these various stands, which were illustrating the needs of the elderly.

Every assistance is given by the Health Education staff to the Health Visitors and Midwives in helping to organise and carry out the programmes for expectant parents and, further, to the Health Visitors in organising the programmes for the parentcraft groups. The needs of this latter group have changed considerably in recent years and it is hoped that their changing needs are being met.

The enthusiasm and expertise shown by Health Visitors and Clinic staff in erecting displays on varying health topics has been most encouraging and their support and co-operation is of the utmost value.

Liaison is maintained with Public Health Inspectors and Mental Welfare Officers and also with the Accident Prevention Officer.

## 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, 1969, 1,057 new applications for treatment were received.

The following table gives figures for the Direct Scheme:—

Category	Persons treated in 1969	Number of treatments given	Number on books at 31.12.69
Elderly ... ..	4,393	23,514	4,294
Registered Blind or Partially Sighted ...	60	347	57
Physically Handicapped ... ..	104	671	120
Expectant Mothers ... ..	1	1	—
Totals ... ..	4,558	24,533	4,471

The number of cases on the books at the end of 1968 was 3,664, thus showing the extent to which this service is expanding.



## 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 98 such loans were made in the year. The demand for this service continues to increase.

## 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 ... ..	59	Crutches ... ..	32
Bed rests ... ..	83	Dunlopillo mattresses ...	1
Bed pans ... ..	98	Feeding cups ... ..	7
Bed tables ... ..	3	Urinals ... ..	21
Invalid chairs ... ..	146	Waterproof sheets ... ..	60
Commodes ... ..	174	Walking Aids ... ..	21
Cradles ... ..	65		

## Recuperative Holidays

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

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

## Cervical Cytology

The Cytopathology Unit at St. Helier Hospital is able to deal adequately with the Borough's requirements.

It is necessary, from time to time, to have a campaign to ensure that all women are aware of the facilities. It is particularly necessary to endeavour to deal with women in the lower income groups, where the prevalence of cervical cancer may be higher.

In all, 1,429 new cases were dealt with and 2,918 repeat smears were taken.

From the total of 4,347 smears taken during 1969, 15 required further investigation for possible malignancy. These patients were referred to their own doctors for follow-up or gynaecological review. In addition many patients were referred to their doctors for treatment of infection by Trichinomas, Monilia and other organisms, also for other defects found on cervical examination.

## Family Planning

Family planning sessions are held at Local Authority Clinics as follows:—

Amity Grove Clinic, Raynes Park	Monday evenings, 6.15-8.15
Cavendish Road Clinic, Colliers Wood	Tuesday mornings, 9.30-11.30
Church Road Clinic, Mitcham	Tuesday and Thursday evenings, 6.15-8.00
	Thursday mornings, 9.30-11.30
Pelham Road Clinic, Wimbledon	Monday, Wednesday and Friday evenings, 6.15-8.15
Wide Way, Mitcham	Monday mornings, 9.30-11.00

Extra sessions have been provided at Pelham Road and Church Road clinics to meet the increased demand for this service. The number of cervical smears taken at the Family Planning clinics has greatly increased.

Details are given below of the numbers and types of case dealt with during the year:—

### New Patients:—

Number	Medical	...	...	494
	Social	...	...	771
	Total	...	...	1,265
Age	Under 16	...	...	—
	16 to 20	...	...	203
	21+	...	...	1,062
Advice	IUD	...	...	251
	Other	...	...	1,014

### Established patients (including transfers):—

Medical	...	...	584
Social	...	...	1,553
Total	...	...	2,137

### Supplies for Social Hardship cases:—

Paying part cost	...	32
Free	...	28

### Cytological Smears:—

Number taken	...	2,184
Referred for Investigation	...	17
Out of Borough patients	...	160
Total Attendances to see the Doctor	...	10,014
Number of Doctor Sessions	...	618



# 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 work of the Mental Health Section continues to increase each year as shown in previous Annual Reports, and this is primarily due to the fact that the community services provided are better known, and accepted more freely.

1969 has been a year of considerable progress in some respects. The South West Metropolitan Regional Hospital Board has begun to replan the psychiatric services which affect this Borough and the first stage has been an arrangement whereby West Park Hospital and Springfield Hospital accept joint responsibility for that part of the London Borough of Merton which formerly comprised the Borough of Mitcham, and that an acute unit opened on 1st July, 1969, at Springfield Hospital, accepting all acute cases, both informally and under legal powers for the greater part of the patients requiring treatment from the Mitcham area.

### Staff

As at 31st December, 1969, the staff position was:—

- 1 Principal Mental Welfare Officer.
- 1 Deputy Principal Mental Welfare Officer.
- 5 Mental Welfare Officers.
- 1 Mental Health Social Worker.
- 1 Part-time Mental Health Social Worker.

Dr. D. M. O. Lowry, who was appointed as Senior Medical Officer of Health with special responsibilities to the Mental Health Services, resigned in October, 1969, to take up an appointment with the Greater London Council.

In March, 1969, Mrs. H. Yates resigned her post as Mental Welfare Officer to take up a similar post in another London Borough.

### Training of Staff

The Mental Health Section continues to accept students from neighbouring colleges to work under supervision of qualified staff as part of their training, and in 1969 one student each from Bedford College and Bromley College of Technology were placed for periods of up to two months. There were also shorter placements from time to time.

This part of the work of the Mental Health Section has been severely limited by the fact that at the relative time of student placements there were two vacancies on the staff, and the training programmes and supervision had to be undertaken entirely by the Principal Mental Welfare Officer.

## **THE WORK OF THE MENTAL WELFARE OFFICERS**

The work of the Mental Welfare Officers continued to extend and increase and my comments in previous Reports regarding use of a training policy for recruitment of Social Workers must be repeated. The difficulties of recruiting qualified staff in the Mental Health field are, perhaps, best illustrated by the fact that a post of Mental Welfare Officer which became vacant in March this year was not filled by the end of the year. In spite of a depleted staff, the requests for the services of Mental Welfare Officers have increased and whilst in 1968 one Social Worker had a liaison attachment with a group practice, now two Mental Welfare Officers and one Social Worker have liaison attachments with group practices. Further, the reorganisation of the services provided by the Regional Hospital Board has made it inevitable that staff from the Mental Health Section should work in very close liaison with the new Acute Unit which is now at Springfield Hospital in association with St. George's Hospital, in addition to the liaison which is maintained with other psychiatric hospitals.

## **Co-ordination of the Hospital Services**

The reorganisation planned by the Regional Hospital Board, mentioned above, has important implications for the Mental Health staff of the London Borough of Merton. The concept of acute units implies a greater degree of care in the community. This, coupled with new methods of drug therapy, indicates that the pattern for the future will tend to develop services for the treatment of mental illness in the community, rather than in hospital. This means that the number of people cared for by the community increases and the number of re-admissions to psychiatric hospitals also increases, although the actual time spent in hospital, away from families and friends, may decrease.

It is difficult to reorganise services to meet these changes, bearing in mind that care and after-care of the mentally disordered are the concern of general practitioners, Regional Hospital Boards and Local Health Authorities. In order to bring the services together, general practitioners are notified, from time to time, about the Local Authority Services available for their patients, and the hospital service also endeavours to keep general practitioners informed of the services they are providing.

## **Community Care of the Mentally Disordered**

The number of cases referred to the Mental Health Section continues to increase, although it is important to note that, for the first time, there was a decrease, of 22, in the numbers of patients admitted to psychiatric hospitals.



## SUBNORMALITY

### Cases in Community Care

At the end of the year 225 patients, as shown below, were in the community care of the Authority, as compared with 182 at the end of 1968:—

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 ... ..	7	10	29	22	36	32	68
Severely subnormal patients receiving routine home visits ... ..	46	33	45	33	91	66	157
Totals ... ..	53	43	74	55	127	98	225
Patients included in above figures who are attending Junior or Adult Training Centres	39	31	25	16	64	47	111

### Special Care Unit

The Special Care Unit continues to play a most important part in the provisions in the community for severely subnormal children with additional physical handicaps. It is only with careful management that we have been able to ensure places for Merton children amid the numerous requests from other Authorities who would like to have the opportunity of using such facilities. We have been able to give limited help to our neighbouring Boroughs of Wandsworth and Sutton, but it is unlikely that this will be possible for much longer. Fortunately we have not yet been obliged to ask another Authority to withdraw a child and it is hoped that, as we anticipated some years ago, the opening of Wandsworth's own Unit and Sutton's eventual arrangements, will approximately coincide with our own need for the full use of the Special Care Unit.

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 1.1.69 ... ..	15	3	2	20
No. of children attending on 31.12.69 ... ..	14	3	2	19
No. of attendances made during year ... ..	1,899	390	269	2,558

A very real problem to be faced in the not far distant future, will be the facilities which will be needed for the care of persons over 16 years who have previously been in Special Care Units and continue

to need the kind of care provided there. Whilst, in principle, this kind of care would be available in a Day Hospital, there are no Day Hospitals for the severely subnormal nearer than day facilities provided by the Manor Hospital at Epsom, with attendant difficulties associated with transporting severely handicapped persons over ten miles in each direction.

### Junior Training Centre

The number of children on the register of the Junior Training Centre at the end of the year was 56 and of these two are from the neighbouring Borough of Sutton. It is now possible to provide more adequate facilities for a group of children under five years of age and this has proved of real benefit both to the children who get the early atmosphere of a setting like a Day Nursery, and to their parents since they feel that they have started to discharge their responsibilities for the education and training of their handicapped children in conjunction with the talented and devoted staff of the Junior Training Centre.

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

	Merton	Sutton	Total
No. of children attending on 1.1.69 ... ..	47	5	52
No. of children attending on 31.12.69 ... ..	56	2	58
No. of attendances made during year ... ..	8,582	760	9,342

### Senior Training Centre

The Senior Training Centre at the Manor Hospital continues to be the primary facility for the training of subnormal persons over the age of 16 years. The actual number in attendance varies from time to time but at the date of the presentation of this report the number on the register was 39. This number, however, is somewhat lower than what would have been expected because, thanks to the co-operation of our colleagues in the Education Department, certain young people who have left the school for the educationally subnormal have been able to remain on at school in order that they may be considered for placement at the new Senior Training Centre in Wandle Way, Mitcham, which was completed by November, although admission of trainees was planned for January, 1970. Also a small group of senior trainees at the Junior Training Centre have remained there, to facilitate admission to the new Senior Training Centre along with others to be transferred from the Manor Hospital Centre.

Mr. J. Malinowski was appointed as the Manager of the new Centre in Wandle Way in June, in order to be associated with the equipping and staffing of the new Senior Training Centre.



Details are given below of the numbers attending the Training Centre at the Manor Hospital at the end of the year:—

On register at 31.12.69	Males	Females	Total
No. attending Manor Hospital	24	15	39

## Day Centre

In May, a Day Centre for the Mentally and Physically Handicapped was opened in Queens Road, Wimbledon, in premises previously used as a Civil Defence Headquarters. The Centre is jointly operated by the Health and Welfare Departments who have the use of part of the building. It was felt that this provided an opportunity for the Health Department and the Welfare Department to work together in providing a Centre for persons suffering from various forms of handicap, both physical and mental. The Centre has regular sessions five days per week.

## SHORT-TERM CARE

During the year, the Authority provided periods of short-term care in 31 cases, compared with 28 cases in 1968. This is an illustration of the increased demand made for the facilities when their availability is known to those families in need.

## OTHER FORMS OF MENTAL DISORDER

### Cases dealt with by Mental Welfare Officers

During the year 529 cases were referred to the Mental Welfare Officers for attention and 316 other cases were admitted to mental hospitals through the Mental Health Service.

The following table gives details:—

	Males Under 65	Males Over 65	Females Under 60	Females Over 60	Total
Admitted informally ... ..	58	9	54	30	151
Admitted under Section 25 (for observation) ... ..	17	4	20	14	55
Admitted under Section 26 (for treatment) ... ..	7	—	4	1	12
Admitted under Section 29 (for observation in case of emer- gency) ... ..	31	5	37	9	82
Admitted under Section 60 (by the Courts) ... ..	1	—	—	—	1
Admitted under Section 136 (in conjunction with the Police)	10	1	4	—	15
Totals ... ..	124	19	119	54	316

## **Patients receiving Community Care**

At the end of the year 111 males and 230 female patients were being provided with community care by the Authority. This shows an increase of 18 males and a decrease of 22 females compared with 1968.

## **Guardianship**

There are no cases under guardianship in the Borough.

## **Cases Accomodated away from Home**

The Authority, at the end of the year, was making financial provision for the accommodation of 26 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.

## **SOCIAL WORK SECTION**

### **Staff**

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

- 1 Senior Social Worker.
- 2 Whole-time Social Workers.
- 3 Part-time Social Workers.

One Social Worker left to commence a course at the London School of Economics, and a full-time Social Worker was appointed in her place.

During this year families have been referred to this Section from the Medical Officer of Health, Health Visitors, Medical Social Workers in hospitals and other Departments. It is interesting to note that 47 persons came to the Social Welfare Section to ask for help and advice on personal problems. During the year 1968 the comparable figure was 20.

The Social Welfare Section continues to provide a social service for families with problems, families with inadequate or unsatisfactory housing conditions, and families who are inadequate within their own environment.

The work continues with the Chest Clinic at Cumberland Hospital, particularly with regard to patients who are discharged into the community and need home visits and special care within their own homes. Social Workers approach the Care Committee for help in cases of need, and this is a great comfort to the patients, many of whom live on very limited incomes.

The Social Welfare Section also investigates lapsed mortgage repayments, where there is a threat of eviction, to try to help the families to get into a regular pattern of payments to ensure that they do not lose their homes. These are cases referred by the Local Authority and Greater London Council. Social Workers are also supervising six families who have mortgage arrears to private Building Societies.



There is a continued close liaison between the Social Welfare Section and other departments and in addition to the primary enquiries for families rendered homeless, or potentially homeless, the Social Workers deal with families who are under Notice to Quit because of rent arrears. Again it is essential that urgent and prompt action is taken to prevent families losing their homes, and 'go through the rounds' of Part 111 Accommodation. Towards the end of the year a good stable service was built up between voluntary housing associations and this Section which helped to alleviate the suffering of families who were living under overcrowded and cramped conditions.

At the beginning of the year there were 490 active cases which were receiving supervision by this section. During the year 483 new cases were referred and by the end of the year 631 cases were still receiving supervision.

It will be noted from the attached figures that the work is increasing and all the Social Workers are aware that there is insufficient time to give each family the help and guidance which they require, especially now that families appear to be more aware of their own problems and they come to the Section to make known their problems.

#### *New Cases Referred During 1969*

New referrals registered as active cases	...	...	294
Internal transfers	...	...	16
Mortgage cases: London Borough of Merton	...	4	
Greater London Council	...	16	
		—	20
Assessment cases	...	...	74
Cases necessitating initial enquiries only, followed by transfer to other Departments	...	...	79
		—	
Total	...		483

#### *Disposal of Cases During 1969*

Active cases brought forward from previous years...	490
New active cases registered during year	294
Internal transfers	16
Mortgage cases	20
	—
	820
Deduct cases closed during year	189
	—
Number of active cases registered on 31st December, 1969	631

#### *Reasons for Closures of Cases During 1969*

Moved away from area	...	18
Satisfactorily closed	...	121
Unsatisfactorily closed	...	11
Transferred to other Departments	...	18
Deaths	...	21
	—	
Total	...	189

# *Sources of Referral of New Cases During 1969*

## (a) *From Council Departments.*

Welfare Services Department	...	...	...	51
Housing Department	...	...	...	25
Medical and Nursing Staff of Health Department...	...	...	...	52
Children's Department	...	...	...	3
Town Clerk's Department	...	...	...	1
				<hr/>
				132

## (b) *From other Agencies.*

Chest Clinics	...	...	...	82
Self referrals	...	...	...	47
Medical Social Workers of Hospitals	...	...	...	22
Greater London Council	...	...	...	3
Citizens' Advice Bureau	...	...	...	8
Department of Health and Social Security	...	...	...	9
Probation Officer	...	...	...	2
National Society for the Prevention of Cruelty to Children	...	...	...	1
Councillor	...	...	...	1
Headmistress	...	...	...	1
County Court (Bailiffs)	...	...	...	1
Estate Agent	...	...	...	1
				<hr/>
				178

## (c) *Mortgage Cases.*

London Borough of Merton	...	...	...	4
Greater London Council	...	...	...	16
				<hr/>
				20

## (d) *Assessment Cases.*

Housing Department	...	...	...	8
Welfare Services Department	...	...	...	29
Medical and Nursing Staff of Health Department...	...	...	...	9
Self referrals	...	...	...	13
Surrey County Council	...	...	...	1
Medical Social Worker in Hospital	...	...	...	1
Education Department	...	...	...	2
Chest Clinic	...	...	...	5
Citizens Advice Bureaux	...	...	...	4
Children's Department	...	...	...	1
Department of Health and Social Security	...	...	...	1
				<hr/>
				74

Cases carried forward to 1970—631\*

\*This figure does not include 74 cases which were transferred to other Council Departments after initial enquiries.



# REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

This is the Fifth Annual Report on the Environmental Health of the London Borough of Merton and the contribution which Public Health Inspectors are constantly making to improve standards in this important public service.

In reviewing the work carried out during the year 1969 regard has been had to Ministry of Health Circular 1/70 dated January, 1970.

## 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. 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:—

‘The supply was satisfactory both as to quality and quantity throughout 1969.

‘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.

‘(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, 1969, was 153,357.

‘(ii) No houses were permanently supplied by standpipe.

‘No artificial fluoride is added, and where the fluoride content is indicated in the analyses it represents the naturally occurring fluoride in the water.

‘The supply was derived from the following works and pumping stations:—

River Thames-derived, also a small quantity of water from a Merton well.

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

'Eight thousand five hundred and ninety samples were collected for bacteriological and chemical analyses of the supply during the year.

On account of hardness content and alkaline reaction the Board's river and well water supplies are not considered to be plumbo-solvent. It should, however, be appreciated that all types of water pick up varying amounts of metal from the material of water piping particularly when it is newly installed; this applies to copper, zinc, iron and also to lead. Surveys carried out between 1966 and 1968 on analyses of water from consumers' premises confirmed this statement.'

During 1969 samples of water were taken for bacteriological and chemical examination by the Public Health Inspectors as follows:—

*Bacteriological—*

Swimming Baths	...	...	...	...	198
----------------	-----	-----	-----	-----	-----

*Dwelling houses:—*

Metropolitan Water Board	...	...	...	...	2
Well water	...	...	...	...	12

*Other premises:—*

Sutton District Water Company	...	...	...	...	4
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216

*Unsatisfactory Results—*

Swimming Baths	...	...	...	...	14
----------------	-----	-----	-----	-----	----

*Chemical—*

Swimming Baths	...	...	...	...	10
----------------	-----	-----	-----	-----	----

*Dwelling houses:—*

Well water	...	...	...	...	1
Metropolitan Water Board	...	...	...	...	1

*Other premises:—*

Sutton District Water Company	...	...	...	...	2
-------------------------------	-----	-----	-----	-----	---

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14

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.

During August, 1969, the unsatisfactory condition of the boating pool in Ravensbury Park, fed by the River Wandle, caused some concern. The unsatisfactory state of effluent discharged from Beddington Sewage Works, combined with warm climatic conditions, caused humus on the river bed to rise and form a thick scum.

Samples of the water were examined bacteriologically, and they were found to be unsatisfactory. Subsequently, the Director of Parks and Cemeteries was advised to close the boating pool and this was done for the remainder of the season. As a result of discussions and correspondence, and the examination of further water samples, it was hoped that conditions will so far improve as to allow the boating pool to be used again next season.



## 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 visits made during the year 1969:—

### *Complaints received—*

General disrepair and insanitary conditions ...	228
Dampness ... ..	276
Overcrowding ... ..	21
Defective drainage system ... ..	81
Blocked drainage system ... ..	929
Defective drainage fittings ... ..	34
Defective sanitary accommodation ... ..	92
Defective service water pipes ... ..	26
Absence of, or defective, dustbins ... ..	36
Accumulation of refuse, etc. ... ..	220
Rats and mice ... ..	1,622
Pigeons ... ..	63
Insect pests ... ..	287
Smoke nuisances ... ..	110
Noise ... ..	150
Smells and odours ... ..	261
Unsound food ... ..	292
Water supply ... ..	127
Miscellaneous ... ..	390
	<hr/>
	5,245
	<hr/>

### *Visits made—*

#### *General.*

P.H. Act (Nuisance) ... ..	1,819
P.H. Act (Dwelling houses) ... ..	2,671
Storage of refuse ... ..	276
Drains testing ... ..	64
Choked drains ... ..	2,711
Other drainage work ... ..	787
Radioactivity ... ..	3
	<hr/>
	8,332

#### *Housing.*

Housing Act (Dwelling houses) ... ..	2,618
Overcrowding ... ..	42
Permitted number measurements ... ..	10
Rent Act ... ..	22
Underground rooms ... ..	29

Houses in multiple occupation	...	...	144
Improvement grants	...	...	592
Caravans	...	...	81
			— 3,538

#### *Food and Food Premises.*

Milk processing dairies	...	...	121
Milk vendors	...	...	131
Ice-cream premises	...	...	305
Food factories	...	...	34
Food vehicles	...	...	512
School kitchens	...	...	62
Restaurant kitchens	...	...	771
Licensed premises	...	...	177
Bakehouses	...	...	82
Butchers	...	...	190
Wet and fried fish shops	...	...	135
Other food shops	...	...	1,033
Meat inspection	...	...	30
Unsound food	...	...	497
Sampling: Food and Drugs	...	...	90
Sampling: Milk	...	...	111
Sampling: Ice-cream	...	...	57
Sampling: Water	...	...	157
Food hygiene swabs	...	...	44
			— 4,539

#### *Clean Air Act, 1956.*

Smoke Control areas	...	...	9,871
Other Clean Air Act visits	...	...	593
Smoke observations	...	...	632
Air pollution recording apparatus	...	...	505
			— 11,601

#### *Factories Act, 1961.*

Factories (powered)	...	...	341
Factories (non-powered)	...	...	17
Factories (building sites)	...	...	33
Outworkers	...	...	226
Workplaces	...	...	25
			— 642

#### *Infectious Diseases.*

I.D. enquiries	...	...	754
I.D. contacts	...	...	33
Food poisoning	...	...	46
Specimens	...	...	69
Disinfection	...	...	27
			— 929

#### *Offices, Shops and Railway Premises Act, 1963.*

O.S.R. general inspection offices	...	...	172
O.S.R. general inspection shops	...	...	208
O.S.R. general inspection wholesale/warehouses	...	...	27



O.S.R. general inspection catering	...	...	38
O.S.R. general inspection canteens	...	...	1
O.S.R. all other visits	...	...	1,500
			<hr/> 1,946

*Insects, Pests, Rodents.*

Rats and mice control	...	...	16,716
Insect control	...	...	458
Pigeon control	...	...	265
Verminous premises	...	...	53
			<hr/> 17,492

*Animals.*

Stables	...	...	55
Piggeries	...	...	5
Slaughterhouse (hygiene)	...	...	10
			<hr/> 70

*Miscellaneous.*

Places of public entertainment	...	...	1
Hairdressers and barbers	...	...	117
Fertiliser and Feeding Stuffs Act	...	...	1
Noise Abatement Act, 1960	...	...	490
Schools	...	...	89
Court proceedings	...	...	33
Public conveniences	...	...	1
Water courses	...	...	52
Shops Act, 1950	...	...	240
Pet shops	...	...	23
Diseases of Animals Act	...	...	8
Rag Flock Act	...	...	1
Other visits	...	...	945
			<hr/> 2,031
			<hr/> 51,120

## Result of Service of Notices

### (1) *Legal Proceedings.*

Proceedings were instituted in the following cases:—

(a) For failing to comply with an Abatement Notice—Public Health Act, 1936, Sections 90/94. Nuisance order made (3 months) and costs of £10 awarded.

(b) For failing to comply with an Abatement Notice—Public Health Act, 1936, Sections 91/94. Nuisance order made (7 weeks) and costs of £5 5s. awarded.

(c) For failing to comply with an Abatement Notice—Public Health Act, 1936, Sections 91/94. (Nuisance order made (21 days) no costs awarded.

### (2) *Nuisances abated and Defects remedied.*

Three thousand two hundred and ninety-one defects were remedied as the result of the service of verbal, written and statutory Notices. 1,456 were in connection with the drainage of buildings; 886 in and around dwelling houses; 865 in connection with food premises; and 85 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	41	17	—	—
Factories with mechanical power ...	900	341	11	—
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises) ...	51	58	1	—
Totals ...	992	416	12	—

### (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) ...	3	—	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	1	—	—	—	—
Inadequate ventilation (S.4) ...	—	1	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7):—					
Insufficient ...	2	4	—	—	—
Unsuitable or defective ...	37	39	—	—	—
Not separate for sexes ...	8	4	—	—	—
Other offences (excluding offences relating to outwork) ...	—	—	—	—	—
Totals ...	51	48	—	—	—

## 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 unwholesome premises	Prosecutions
Wearing apparel ...					
-making	39	—	—	—	—
Lampshades ...	33	—	—	—	—
Carboard box-making	—	—	—	—	—
Total ...	72	—	—	—	—



Number of addresses received from other Councils ...	58
Number of addresses forwarded to other Councils ...	159
Number of premises where outwork was carried on at the end of 1969 ... ..	315
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 disinfection 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 gas water heating unit. The premises are maintained and staffed by the Health Department. During the year 1969, 16 local residents and one person from another district received treatment for lice infestation. A fee of 30s. is payable by outside authorities for persons sent by them for treatment.

## 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 134.

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	...	...	64
Pasteurised milk	...	...	185
Sterilised milk	...	...	140
Ultra Heat-Treated milk	...	...	61

During the year, 82 samples of designated milk were submitted for statutory tests. The results were as follows:—

Designation.	Satisfactory.	Void.	Unsatisfactory.
Pasteurised	79	2	—
Sterilised	2	—	—
Untreated	—	—	—
Ultra Heat-Treated	1	—	—

### *Brucella Abortus.*

No samples of raw milk were submitted for examination.

### *Ice-Cream.*

During the year 63 samples were submitted for bacteriological examination. The results were as follows:—

Grade 1	...	...	...	...	53
Grade 2	...	...	...	...	3
Grade 3	...	...	...	...	2
Grade 4	...	...	...	...	5

Investigation into Grade 4 samples invariably proved that there was incomplete sterilisation of apparatus or careless handling of either ice-cream, or apparatus, or both. Appropriate action was taken in each case until satisfactory samples were obtained.

### *Bacteriological Examination of Other Foods.*

Subsequent to outbreaks of suspected food poisoning, ten samples of various foodstuffs were sent to the Public Health Laboratory for special bacteriological examination. Cultures from a remnant of a steak and kidney pie, and from a portion of roast beef yielded growths of *clostridium welchii*. *Staphylococcus aureus* growths were isolated in a piece of liver. No pathogens were isolated in the remaining specimens submitted for examination.

### *Poultry Inspection.*

There are no poultry processing premises within the district.

### *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. 3,870 visits were made to premises in which foodstuffs intended for human consumption were prepared, stored or sold. In addition, 512 visits were made relative to food vehicles. 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.

I would like particularly to refer to the inspection of food preparation and service conditions in connection with Shows, Fairs, etc., held in the Borough during the year. I receive requests during the season for approval of catering arrangements at these meetings, and they are given careful attention. During the Annual Tennis Championship Meetings, at Wimbledon, complete inspections of all catering points are made, and facilities are afforded by the caterers for the taking of food samples, and for swabbing of utensils, etc., for bacteriological examination. I would like to record my appreciation of the assistance given on these occasions by the Club Officials and the staff of the catering contractors.



The annual Mitcham Fair also receives the attention of the Department, and it is now the practice of the Director of Parks and Cemeteries to submit to me applications from food vendors for a site within the perimeter of the Fair, for an opinion as to the standard of food hygiene attained by the applicant. I greatly appreciate the co-operation of the Director in maintaining a high standard.

Fairs on Wimbledon and Mitcham Commons are visited and food vending points are given particular attention. I think it must be appreciated that most of this work is carried out by the Public Health Inspectors outside normal hours, but it is important work, which is well worth while.

The provisional register of food premises includes the following:

Greengrocers	...	...	...	185
Confectioners	...	...	...	236
Ice-cream premises	...	...	...	455
Bakers	...	...	...	60
Grocers and Provision Dealers	...	...	...	309
Butchers	...	...	...	108
Fishmongers and Fish Fryers	...	...	...	59
Milk Distributors	...	...	...	134
Chemists	...	...	...	50
Licensed premises	...	...	...	301
Clubs	...	...	...	49
Restaurants and Cafes	...	...	...	154
Works Canteens	...	...	...	74
School Canteens and Kitchens	...	...	...	100
Food Stalls/Vehicles	...	...	...	129
Places of Public Entertainment	...	...	...	39
				2,442

This list does not include manufacturing factory premises.

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	...	505
Registered for the manufacture and sale of ice-cream	...	6
Registered for the preparation or manufacture of sausages	...	74
Registered for the preparation or manufacture of potted, pressed, pickled or preserved food	...	177

The number of inspections of registered food premises during 1969 was 1,050.

#### *Bacteriological Examination of Equipment.*

During the year 141 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	...	12	...	8
Wine and spirit glasses	...	3	...	2
Plates	...	32	...	28
Cups and beakers	...	29	...	29

Knives	...	...	11	...	11	...	—
Forks	...	...	27	...	27	...	—
Spoons	...	...	18	...	18	...	—
Food containers and lids	...	...	9	...	6	...	3

In addition 16 samples of ice-cream server water were submitted for bacteriological examination, ten 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 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.

The following is a list of unsound food surrendered during 1969:—

	Tons.	Cwts.	Lbs.
Canned foods	2	8	70
Frozen foods and ice-cream	3	14	43
Meat, bacon and poultry	2	1	86
Confectionery	—	—	44
Sugar, jam and syrup	—	—	56
Beverages	—	—	7
Butter, fat and cheese	—	17	31
Fruit and vegetables	—	1	9
Minerals and vegetable juices	—	—	17
Puddings and pastry	—	1	106
Fish	—	1	54
Sausages	—	—	18
Vinegar, pickles and sauce	—	—	61
Miscellaneous	—	—	9
	9	8	51

The number of complaints received during the year regarding unsound food was 292. 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\* (6); grease and carbon (5); insect\* (3); tobacco; string; bristle; rat dropping\*; screw\*; wire; excessive yeast (2).

Sand and cement in bottles of milk (5)\*.

Fruit fly larvae in bottles of milk (3)\*.

Oil in bottle of milk\*.

Glass in bottle of milk.

Dust in bottles of milk (2).

Iron oxide in bottles of milk.

Foreign matter in bottles of milk (6).

Mould in bottles of milk (3)\*.

Mouldy steak and kidney pies (2)\*\*.

Mouldy blackcurrant and apple pie\*.

Mouldy cheese (3).



Mouldy bag of flour.  
 Mouldy crumpets.  
 Mouldy sausage roll.  
 Mouldy pork pie\*.  
 Mouldy cornish pasty.  
 Mould in apple pie\*.  
 Mould in can of spaghetti bolognese.  
 Mould growth on chocolate sponge sandwich.  
 Mould growth on bacon.  
 Mould growth on sausages.  
 Glass in pork and ham sandwich.  
 Glass in packet of chicken supreme.  
 Glass in cakes (3)\*.  
 Glass fragment in glass jar of pickle.  
 Glass in bottle of lemon squash.  
 Glass in cereal.  
 Glass in ice lolly.  
 Insect in fish and chips.  
 Insect in cereal.  
 Insect in orange.  
 Insect in baby rice.  
 Insect in creamed rice milk pudding.  
 Insect in can of pineapple.  
 Insect on bag of flour.  
 Insects in sugar.  
 Insect infested sweets (2)\*.  
 Fly in sausage and sauce roll.  
 Fly in chicken roll\*.  
 Maggots in bacon pieces.  
 Maggots in packet of currants.  
 Blowfly and eggs in corned beef slices.  
 Snail in blackcurrant jam.  
 Moth in bar of chocolate.  
 Wire in can of pineapple pie filling.  
 Wire in apple puff.  
 Wire and fibres in prawn curry.  
 Metal in can of corned beef.  
 Metal in pie.  
 Foreign matter on breast of chicken.  
 Foreign matter in turkey liver.  
 Foreign matter in can of minced beef.  
 Foreign matter in packet of mince pies.  
 Foreign body in mint creams.  
 Unsound can of tomatoes.  
 Unsound can of peaches.  
 Crystals (Tyrosin) on livers.  
 Crystals in can of sardines.  
 Putrified can of prawns.  
 Putrified can of red salmon.  
 Putrified packet of black pudding.  
 Tainted luncheon meat.  
 Tainted yoghurt\*.  
 Tainted fish.  
 Unsound can of red salmon.  
 Bristles in sponge cakes.

Sand and cement in carton of sweets.  
 Hair grip in packet of jam tarts.  
 Paper in tin of soup.  
 Paper in packet of butter.  
 Bone in frozen fish fingers.  
 Small stones in can of peas.  
 Contaminated sandwich.  
 Contaminated can of corned beef.  
 Sour cream in fresh cream cookies\*.  
 Unsound jam tarts.  
 Unsound mutton.  
 Mouse-eaten bar of chocolate.

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 1969, 206 samples were submitted, of which 112 were formal samples, and 94 informal. The Public Analyst reported that of these samples, 199 were found to be genuine, and to comply with the relevant Acts, Orders and Regulations, and that seven did not so comply. A full list of genuine samples is not given in this report, but they are included in the Quarterly Returns made to the Minister of Agriculture, Fisheries and Foods, and numbers are available.

#### *Particulars of non-genuine samples and action taken.*

##### *Cherries in Light Syrup.*

The artificial colour in the cherries should have been declared as an ingredient, as required by the Labelling of Food Order, 1953. A communication was sent to the suppliers, who stopped delivery of this article.

##### *Fruit Salad in Syrup.*

This sample consisted of pears, apricots, peaches, pineapple and cherries, and the fruits were not presented in the order in which they were declared in the list of ingredients which was given on the label. The suppliers were advised and a new label was produced.

##### *Buttered Toast.*

This sample was obtained from a local Café, and consisted of toast spread with margarine. After some consultation, a warning letter was sent to the vendor.



### Kirbitone.

This was a formal sample of Tonic Restorative. The Public Analyst reported that the information on the label did not compare exactly with his analysis of the sample. The incorrect information later appeared to be a misprint of the wording on the label, which was corrected by the manufacturers.

### Lemon Curd.

The soluble solids in this sample were reported by the Public Analyst to be 64.8%; Lemon Curd should contain not less than 65% of soluble solids, to comply with the Food Standards (Preserves) Order, 1953, and the sample was therefore deficient to the extent of 0.3%. Informal action was taken in respect of this sample.

### Beef Mince with Onions and Gravy.

This sample was described on the label as 'lean-cut beef mince with onions and gravy'. The Public Analyst reported that the fat content amounted to 25% of the total meat content. In his opinion the fat content should not exceed 15% of the total and that the description therefore was not justified. Informal action was taken in respect of this sample.

### Wheat Diet with Apple.

The Public Analyst reported that a note on the packet for the information of diabetics gave the carbohydrate content per ounce as approximately 19 grams, whereas the actual carbohydrate content equalled 23 grams per ounce. This discrepancy was considered to be too great, if a diabetic used the information on the label to calculate his carbohydrate intake. A warning letter was sent to the manufacturers in this case.

The following 22 samples were submitted for special examination, the results being shown:—

Bread (6)	...	Non-genuine (6)
Cake (2)	...	Non-genuine (1)
Chicken Roll	...	Non-genuine
Corned Beef	...	Non-genuine
Currants	...	Non-genuine
Fruit Bun	...	Genuine
Jam Tarts	...	Genuine
Milk (6)	...	Non-genuine (6)
Oranges	...	Non-genuine
Pineapple Filling	...	Non-genuine
Sweet Corn	...	Genuine

Further particulars regarding the 18 non-genuine samples are as follows:—

#### Bread (6).

Foreign matter in loaf of bread—rat dropping—legal proceedings instituted—absolute discharge and no costs awarded.

Discolouration of loaf of bread—soot in dough mix—warning letter sent to bakery firm.

Metal bolt in loaf of bread—appeared to have been baked in loaf—legal proceedings instituted—defendant fined £20 with £7 costs.

Part of insect (cockroach) found in bread roll—legal proceedings instituted—defendant fined £10 with £7 costs.

Oil deposit in loaf of bread—Public Analyst of opinion oil contamination after baking—warning letter sent to bakery firm.

Foreign matter in slices of bread—consisted of wheat bran mixed with dough—in Public Analyst's opinion, baked in bread—warning letter sent to bakery firm.

#### Cake.

Glass in currant slices—in Public Analyst's opinion, baked in cake—legal proceedings instituted—defendant fined £10.

#### Chicken Roll.

Slices of chicken roll submitted were found to contain portions of a fly and in the Public Analyst's opinion, had been incorporated during the manufacture and before slicing—legal proceedings instituted—defendant fined £10 with £7 costs.

#### Corned Beef.

Opened 7 oz. can containing foreign matter (dirt, vegetable tissue, sandy matter, and compounds of iron). The can was of foreign origin; warning letters sent to importers and vendors.

#### Currants.

Found to contain insect larvae and frass—warning letter sent to vendor.

#### Milk (6).

Dirty one pint bottle of milk containing foreign matter consisting of dry milk solids which had turned sour—informal action taken.

Dirty one pint bottle of milk containing mould growth—legal proceedings instituted—defendant fined £10 with £7 costs.

Dirty one pint bottle of milk—foreign matter in bottle consisted of sandy cement—legal proceedings instituted—defendant fined £10 with £7 costs.

Foreign matter in one pint bottle of milk—Public Analyst reported matter consisted of portions of house flies—informal action taken.

Glass in one pint bottle of milk—informal action taken.

Dirty one pint bottle of milk—rust etchings on inside surface—informal action taken.

#### Oranges.

One whole orange and part of another contained brown insect larvae—identified as fruit fly larvae, which were probably present in the flower before the fruit was formed—informal action taken.



### Pineapple Filling.

Can of pineapple filling found to contain pieces of wire—in Public Analyst's opinion wire was produced as shaving from sheet metal—informal action taken.

All complaints are investigated, and this includes interviews with 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 food complaints has one end in view—the prevention of a recurrence of the incident.

### *Other Legal Proceedings.*

#### Food and Drugs Act, 1955—Section 2.

Blackcurrant and apple pie containing mould growth. Defendant pleaded guilty; fined £5 with £7 costs.

Whole almonds infested with insects. Defendants pleaded guilty; fined £5 with £7 costs.

Individual jam tarts containing hair grip. Defendants pleaded guilty; fined £10 with £7 costs.

Fresh cream cookies—cream sour. Defendants pleaded guilty; fined £10 with £7 costs.

Individual apple pie containing mould growth. Defendant pleaded guilty; awarded conditional discharge, but ordered to pay £7 costs.

Yoghourt in rancid condition. Each of two defendants pleaded not guilty, but both were fined £5 each with £3 costs, and £5 5s. witness expenses were awarded.

Individual beef steak pie containing mould growth. Defendants pleaded guilty; fined £15 with £7 costs.

Individual pork pie containing mould growth. Defendants pleaded guilty; fined £5 with £7 costs.

Individual steak and kidney pies (2) containing mould growth. Defendant pleaded not guilty, but he was fined £20 with £9 10s. costs.

Loaf of bread (wrapped) containing mould growth. Defendant pleaded not guilty, but was fined £10 with £10 costs.

#### Food and Drugs Act, 1955, and Milk and Dairies (Regulations) 1959.

One pint milk bottle containing black spots having the appearance of oil globules. Defendants pleaded guilty; fined £10 with £7 costs.

One pint bottle of milk containing fruit fly larvae, delivered in area of London Borough of Wandsworth. Defendants pleaded guilty; fined £10.

#### Food Hygiene (General) Regulations—Reg. 9.

Employee smoked cigarette whilst in a food room in which

there was open food. Defendant pleaded guilty; awarded absolute discharge, but ordered to pay £7 costs.

Employee of bakehouse summoned for 23 offences under the Regulations. Pled guilty to 20, and not guilty to three. Convicted on 22 charges, and fined £7 on each (£154) with six guineas costs. Charge on further summons dismissed.

## SERVICES UNDER OTHER ENACTMENTS

### *Rent Act, 1957/68—Certificates of Disrepair.*

The following is a summary of applications dealt with during 1969:—

Applications received (Form I) ...	...	2
Decisions not to issue Certificates ...	...	Nil
Certificates issued (Form L) ...	...	2
Undertakings given (Form K) ...	...	—
Number of visits made... ..	...	22

### *Shops Acts, 1950-65.*

The Shops Acts regulate the closing hours of shops and the working hours of shop assistants. Shops in the Borough have been kept under observation and contraventions have been remedied. Formal action has also been taken in respect of general closing hours, half-day closing, and Sunday trading. During the year, advice has been given when required to the three Chambers of Commerce, and to individual shopkeepers. Inspection records were added to and the Shops Register kept up-to-date

During the year, further consideration was given by the Council to an application from a trader in respect of making a Six Day Trading Week Order. The negotiations culminated in the decision of the Council to try to ascertain the wishes of shop keepers with regard to the introduction of a six day trading week at an open meeting, which was held during March, 1969. The meeting was, however, attended only by a small number of shop keepers. In the circumstances, it had to be announced that it was apparent that no positive evidence could be adduced to enable the Council to proceed with the relevant procedure under the Shops Act, 1950. Towards the end of the year, however, I did receive several enquiries regarding the making of a Six Day Trading Order, and it appears to me that a fresh approach may be made during the coming year.

### *Offices, Shops and Railway Premises Act, 1963.*

Work under this Act was continued during 1969 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.

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 ... ..	65	776	172
Retail Shops ... ..	42	1,262	208
Wholesale Shops, Warehouses ...	8	59	27
Catering Establishments open to the Public, Canteens ... ..	4	150	38
Fuel Storage Depots ... ..	—	6	Nil
Totals ... ..	119	2,253	445

### *Contraventions rectified.*

Cleanliness ... ..	184
Overcrowding ... ..	2
Temperature ... ..	92
Ventilation ... ..	16
Lighting ... ..	7
Sanitary conveniences ... ..	64
Washing facilities ... ..	55
Supply of drinking water ... ..	1
Clothing accommodation ... ..	8
Seats (Sedentary Workers) ... ..	1
Floors, passages, stairs ... ..	43
Dangerous machinery guarded ... ..	9
First Aid provisions ... ..	90
Abstract of Act posted ... ..	107
Not registered ... ..	19
Other contraventions ... ..	34

### *Exemptions.*

No exemptions (Section 46) were granted in 1969.

### *Accidents Reported and Investigated.*

In offices ... ..	10
In retail shops ... ..	21
In wholesale shops and warehouses ...	7
In catering establishments open to the public, in canteens, etc. ... ..	1

Reports upon 39 accidents were received during the year. In most cases, accidents were of a minor character, and only involved the injured party, and were due in the main to carelessness. The percentage of accidents in food premises was lower than in previous years. All reported accidents, however small they appeared to be, were investigated.

No legal proceedings were instituted during the year, although in some instances it was necessary to send warning letters to offenders.

In the early part of the year, a circular letter was sent to occupiers of premises where a lift or hoist was installed, drawing attention to the Regulations which came into operation in May, 1969. Since that date, a number of Reports of Examinations forms have been inspected, and it has been necessary to write to a number of occupiers in respect of lift defects. In the main passenger lifts are very well maintained. Problems are still arising in connection with heating and ventilation of offices and buildings where a part or entire air-conditioning plant is installed, and it would appear that more expert planning is necessary in this field.

#### *Prevention of Damage by Pests Act, 1949.*

The following table summarises surface rodent control work which was carried out during 1969.

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		
1,706	2,368	4,174	1,170	284	1,619	16,716

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 1969, 992 manholes were baited and 248 showed evidence of rodent infestation.

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

#### *Other Pest Control Work.*

During the year 1969, 515 complaints were received concerning insect pests and the following is a list of the infestations dealt with:—

Ants	...	...	...	34
Bees	...	...	...	31
Beetles	...	...	...	28
Bedbugs	...	...	...	46
Spiders	...	...	...	1
Cockroaches	...	...	...	14
Fleas	...	...	...	56
Flies	...	...	...	16
Lice	...	...	...	1
Maggots	...	...	...	23
Earwigs	...	...	...	2
Mosquitoes	...	...	...	27
Silverfish	...	...	...	1
Slugs	...	...	...	2
Wasps	...	...	...	227
Woodlice	...	...	...	2
Woodworms	...	...	...	4



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

The incidence of wasps was higher than in previous years. 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-three complaints of nuisance or damage 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 but, nevertheless, 344 pigeons, 148 eggs, and 19 nests were destroyed as a result of action by the Department.

#### *Pet Animals Act, 1951.*

Thirteen licences to keep Pet Shops were issued during 1969. Twenty-three visits were made to these premises to ensure compliance with the conditions attached to these licences.

#### *The Riding Establishments Act, 1964.*

Three riding establishments continued to be licensed throughout the year. One application for a licence was refused, and no appeal was entered by the applicant.

#### *Diseases of Animals Act, 1950.*

No outbreaks of disease occurred within the Borough during 1969. During the period when Rabies Orders were in operation in certain parts of Surrey, two complaints were received alleging dog bites. Both of these instances were investigated, and the Ministry of Agriculture, Fisheries and Food was notified. In one case, a dog was destroyed at the voluntary request of the owner. No case of rabies was confirmed within the Borough.

#### *Clean Air Act, 1956/1968.*

During 1969, 110 complaints were received of smoke or grit emissions and the necessary observations were made and remedial action taken.

Twenty-seven notices of proposals to instal a furnace, to which Section 3 (1) of the Act applied, were received and the installations were inspected and recorded. In seven instances, plans which were deposited for Building Regulation approval, showed in each case the proposed construction of a chimney. After examination of the particulars, opinions upon the height of the chimneys in relation to Section 10 of the Clean Air Act, 1956, were sent to the Borough Surveyor.

On 1st April, 1969, the provisions relating to heights of chimneys contained in the 1956 Act, were superseded by Section 6 of the Clean Air Act, 1968. The new Act authorised the Local Authority to approve

or disapprove an application in respect of the height of a chimney without reference to the Building Regulations. I was authorised by the Council to act in accordance with the new provisions and four applications were approved in 1969.

#### *Measurement of Atmospheric Pollution.*

The Health Department now maintains eight eight-port instruments which are sited in approved positions in the Borough. These instruments, which record smoke density and sulphur dioxide contained in the atmosphere, are visited weekly. Recordings are standardised and the results are sent monthly to the Ministry of Technology. The graphs which have been published in this report in previous years, are not available this year, but nevertheless, it is interesting to note that the average monthly concentration of smoke still continues to fall during mid-winter months, the maximum being 62 microgrammes per cubic metre, and to maintain their normal low level during mid-summer months (18 microgrammes per cubic metre). The average monthly concentrations of sulphur dioxide also fell during 1969, to a maximum in mid-winter of 204 microgrammes per cubic metre, and to 76 microgrammes per cubic metre during mid-summer. This slight fall in the levels of both smoke and sulphur dioxide concentrations is undoubtedly due in some measure to the continuation of the Smoke Control area programme.

#### *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, 1969, 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	Operative date 1.11.68.
No. 9 1968	Operative date 1.7.69.
No. 10 1968	Operative date 1.7.69.
No. 11 1968	Operative date 1.9.69.
No. 12 1968	Operative date 1.10.69.
No. 13 1969	Operative date 1.7.70.
No. 14 1969	Operative date 1.7.70.
No. 15 1969	Operative date 1.9.70.
Area No. 16	Under Survey.
Area No. 17	Under Survey.

The area of the Borough covered by Orders either in operation, or confirmed but not operative, is 6,315 acres. The total number of premises involved in these areas is 39,035. Comparable figures at the commencement of the year were 5,927 acres and 34,942 premises.

The two Smoke Control Areas under survey at the end of the year will cover an additional 492 acres with 3,538 premises.

On 1st January, 1969, 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 72.2 and the comparative figure for the London Borough of Merton was 67.3.

The total number of visits made during 1969 in connection with the Clean Air Acts, for all purposes, was 11,601.

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 life. In areas where residential housing ends and industrial development begins, it is sometimes difficult to strike a balance between what is acceptable, considering the nature of the area, and what standards should be used to determine the degree of nuisance or annoyance. Assistance is given in this respect by the use of noise level meters, and by the application of British Standards and of recommendations contained in the Wilson Report.

During the year 1969, 150 complaints regarding noise were received, and the investigation of these entailed 490 visits, many of which were made outside normal office hours.

The most common cause of noise complaint were factories (41), business premises (34), whilst domestic premises accounted for nine.

The Council has associated itself with the Local Authorities Aircraft Noise Council, and I attended several meetings of this organisation during the year, including a visit of inspection to the noise monitoring unit at London Airport, Heathrow.

Legal proceedings were instituted in two instances during the year, under Section II (3) of the Noise Abatement Act, 1960, against two persons for sounding loud-speaker chimes attached to ice-cream vehicles outside permitted hours. In each case the defendants pleaded guilty, and were fined £2 with £3 3s. costs.

#### *The Pharmacy and Poisons Acts, 1933-1941*

One hundred and twelve 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.*

Two samples of fertiliser were submitted to the Agricultural Analyst. Both were found to be satisfactory, and the Ministry of Agriculture, Fisheries and Food were notified on Returns.

#### *Housing Acts, 1957-1969.*

The Public Health Inspectors are concerned with the Council's Slum Clearance Programme, the repair and reconditioning of houses, the inspection and control of Houses in Multiple Occupation, the inspection of houses in respect of Standard and Discretionary Grants, and for the purposes of Qualification Certificates.

The implementation of the Council's Slum Clearance Programme continued, and other houses were inspected for repair or for Closing Order or Demolition Procedure. The total number of visits made to premises of all kinds was 3,458.

During the year ten Clearance Orders were declared, involving a total of 122 dwelling houses and elsewhere six Closing Orders were made. Application for Standard and Discretionary Grants are referred to me for opinion as to the fitness and anticipated life of the dwelling houses concerned. It is customary to carry out an inspection and to apply the statutory standards of fitness in these cases, and the total number of houses so inspected was 183.

In August, 1969, Part III of the Housing Act, 1969, became operative, and thereafter applications for Qualification Certificates and for Certificates of Approval are referred to me for a recommendation as to the ultimate granting of a certificate. The position on 31st December, 1969, was as follows:—

#### Section 45. Qualification Certificates—

Applications received	...	403
Certificates granted	...	Nil
Certificates refused	...	Nil

#### Section 46. Certificates of Provisional Approval—

Applications received	...	11
Certificates granted	...	1
Certificates refused	...	Nil

#### *Caravan Sites and Control of Development Act, 1960.*

The number of sites which were subject to licence or consent at 31st December, 1969, was seven, and the permitted number of cara-



vans, including those kept at four sites occupied by members of the Showman's Guild, is 41. Eighty visits were made to the sites during the year. Towards the end of 1969 a monthly survey of sites occupied without consent was commenced and records were kept. At the end of the year, nine caravans were sited upon vacant sites on a slum clearance area and were recorded.

#### *Registration of Hairdressers and Barbers.*

The Council have adopted the provisions of the Greater London Council (General Powers) Act, 1967, insofar as they relate to the registration of Hairdressers and Barbers. At the end of the year, 163 premises were registered, and 117 visits were made during the year.

### 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, 1969, the establishment of Public Health Inspectors was reduced from 13 to 11, and two posts of Senior Public Health Inspector were substituted for two posts of District Public Health Inspector. The two Senior Public Health Inspectors were appointed for supervision of district work, and a great improvement in the carrying out of district work was already apparent by the end of the year. During the year, four Inspectors left, having obtained appointments elsewhere, and five Inspectors were appointed, leaving a deficiency of one at the end of the year. In addition, one other Inspector had already given notice during November and was awaiting confirmation of an overseas appointment. These changes were upsetting from an administrative point of view, and unfortunately much work which should have received attention was neglected, but nevertheless it is pleasing to record that generally a high standard was maintained.

Of the four Pupil Public Health Inspectors, two were successful in passing their respective annual examinations, but, unfortunately, two final year pupils failed to qualify. One of these was appointed as a supernumerary technical assistant and the other will retake his final examination during 1970. A fourth pupil was appointed to fill the vacancy created.

My thanks are due to the technical staff for the extra effort required of them in maintaining coverage of those districts in the Borough where there was no Inspector, and to the clerical staff for their excellent supporting administrative work.

G. H. COCKELL

*Chief Public Health Inspector.*





CONTENTS

Chairman, Ladies, Gentlemen, ...

Primary Education and Special Services Sub-Committee ...

at 31st December, 1969 ...

School Clinics provided by the Local Education Authority ...

The Service ...

Medical Inspections ...

Appendix A: ...

Appendix B: ...

Appendix C: ...

Appendix D: ...

Appendix E: ...

Appendix F: ...

Appendix G: ...

Appendix H: ...

Appendix I: ...

Appendix J: ...

Appendix K: ...

Appendix L: ...

Appendix M: ...

Appendix N: ...

Appendix O: ...

Appendix P: ...

Appendix Q: ...

Appendix R: ...

Appendix S: ...

Appendix T: ...

Appendix U: ...

Appendix V: ...

Appendix W: ...

Appendix X: ...

Appendix Y: ...

Appendix Z: ...

# ANNUAL REPORT

to the

## EDUCATION COMMITTEE

on the work of the

## SCHOOL HEALTH SERVICE

for the year

1969

# CONTENTS

	Page
Introductory Letter by Principal School Medical Officer ...	87-88
Primary Education and Special Services Sub-Committee as at 31st December, 1969 ...	89
School Clinics provided by the Local Education Authority ...	90-91
The Service ...	92
Medical Inspections ...	92
Audiometry and Audiology ...	92
Speech Therapy ...	93
The Work of the School Nurses ...	93-94
Child Guidance Service ...	94
Handicapped Pupils ...	95
The School Dental Service:	
Report by Chief Dental Officer ...	95-96
Statistics on School Dental Service ...	96-97
Infectious Diseases and Prophylactic Measures:	
Table 1—Infectious Diseases ...	98
Table 2—Contagious Diseases ...	98
Sonne Dysentery ...	98
Infective Jaundice ...	99
Report on Epidemiological Survey in Girls' High School ...	99
Prophylactic Measures ...	99-100
Ancillary Services:	
Nursery Schools and Classes ...	100
Provision of Milk and Meals ...	100
Appendix 'A':	
Routine Medical Inspections ...	101
Other Medical Inspections ...	101
Return of Defects Found at Medical Inspections ...	102
Children Found to Require Treatment ...	103
Classification of General Condition of Pupils ...	103
Uncleanliness and Verminous Conditions ...	103
Diseases of the Skin ...	104
Eye Diseases, Defective Vision and Squint ...	104
Diseases of the Ear, Nose and Throat ...	104
Orthopaedic and Postural Defects ...	104-105
Other Treatment Given ...	105
Appendix 'B':	
Attendances at Clinics ...	105
Other Medical Examinations by School Medical Officers ...	105
Recuperative Holidays ...	105



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 1969.

The health of school children in Merton during the year was very good, the percentage whose general condition was found to be satisfactory being 99.93 compared with 99.98 in 1968.

School medical inspections totalled 9,299 (6,741 routine inspections and 2,558 special inspections and reinspections) compared with 12,906 (10,401 routine inspections and 2,505 special inspections and reinspections) in 1968. At routine and other medical inspections 4,983 defects, mostly minor in character, were found of which 2,211 were referred for treatment and 2,772 for observation, compared with 6,491 (3,170 for treatment and 3,321 for observation) in 1968.

It was decided to introduce a system of selective medical examination to coincide with the beginning of comprehensive education in the Borough.

Selective medical examination is designed to enable the School Medical Officer to have more time to concentrate on those pupils who most require attention and who would most benefit by continuing medical supervision. The new system was approved by the Education Committee, subject to review at the end of the school year.

In fact, during the current year no selective medical examinations were carried out, although plans were in readiness to commence these in 1970. It would have been impossible to have full information from the Head Teachers of the schools and to receive the completed questionnaires as at that particular time pupils were being transferred from the middle schools to the high schools.

Considerable staffing difficulties were encountered during the year; first, as pointed out in the report on the Child Guidance Service, the departure of Dr. Lomas at the end of March depleted the staff for this service, which was without a second Child Psychiatrist for the majority of the year. In addition, the staff of School Medical Officers was seriously affected by prolonged absence, one due to sickness, one following an accident and one due to pregnancy leave. In addition, Dr. D. Lowry, Senior Medical Officer, resigned in early October to take up a post with the Greater London Council, and his vacant post had not been filled by the end of 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 Administrative Assistant 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 Primary Education and Special Services Sub-Committee.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

P. J. DOODY,

*Principal School Medical Officer.*



**PRIMARY EDUCATION AND  
SPECIAL SERVICES SUB-COMMITTEE**

(As at 31st December, 1969)

Chairman: Councillor P. S. Gill

Councillor F. H. Meakings (Vice-Chairman)

Alderman E. J. Mills

Councillors:

B. N. Clifford (Mrs.) W. R. Castle R. G. Cooper M. C. Gardner

J. N. Healey R. L. Mackenzie, F.C.A. W. G. Terrett

Co-opted Members:

Reverend H. B. Jamieson Reverend Douglas Noble

Mr. C. H. Davies, J.P., B.A.

Ex-Officio:

Alderman V. Talbot, J.P.

(Chairman of the Education Committee)

Alderman Sir Cyril Black, J.P., D.L., M.P.

(Vice-Chairman of the Education Committee)

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

## SCHOOL CLINICS PROVIDED BY THE LOCAL EDUCATION AUTHORITY

### General Medical Clinics

Amity Grove, Raynes Park:	1st and 3rd Thursday mornings.	Examination of cases referred by Teachers, Education Department, Health Visitors, etc. Treatment of minor ailments.
Grand Drive Raynes Park:	Tuesday mornings.	
Middleton Road, Morden:	1st, 3rd and 5th Monday afternoons.	
Morden Road, Merton:	1st, 3rd and 5th Monday mornings.	
Pelham Road, Wimbledon:	Monday mornings.	
Western Road, Mitcham:	Monday mornings.	
Wide Way, Mitcham:	1st, 3rd and 5th 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, Raynes Park:	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

Pelham Road, Wimbledon:	Friday mornings.	Detailed investigation of cases referred.

### Remedial Exercises

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

## Dental Clinics

Amity Grove, Raynes Park:	Monday to Friday all day.
Church Road, Mitcham:	Wednesday morning (Orthodontic Clinic) and Thursday and Friday all day.
Grand Drive, Raynes Park:	Monday to Wednesday all day. Thursday morning Orthodontic only.
Meopham Road, Mitcham:	Monday to Friday all day.
Middleton Road, Morden:	Monday to Friday all day.
Morden Road, Merton:	Monday, Wednesday and Friday, all day.
Pelham Road, Wimbledon:	Monday to Friday all day.
Western Road, Mitcham:	Monday to Wednesday 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, general practitioners and hospitals.

## MEDICAL INSPECTIONS

In accordance with modern trends and as advised by the Department of Education and Science, the education authority approved a modified system of selective medical examinations, commencing in the new school year in September, subject to review after one year's operation.

The following schedule of examinations is now carried out:—

- (a) **PRIMARY SCHOOL**
  - (i) Full medical inspection during the first year.
  - (ii) Hearing test at six years.
  - (iii) Vision test at seven years.
- (b) **MIDDLE SCHOOL**
  - (i) Full medical inspection during the first year, including colour vision test.
  - (ii) Hearing tested during last year in middle school.
- (c) **HIGH SCHOOL**
  - (i) Selective medical examination plus vision during first year.
  - (ii) Full medical inspection during the school leaving year.

The selective medical examination involved the sending of a confidential questionnaire to the parents of all pupils in the age group. Following scrutiny of the completed medical questionnaires by school medical officers, pupils are selected for medical examination. The child's progress at school is also taken into account.

## AUDIOMETRY AND AUDIOLOGY

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

Number of primary schools visited ...	...	39
Number of children tested ...	...	2,758
Number of primary failures ...	...	181
Number of middle schools visited ...	...	12
Number of children tested ...	...	1,511
Number of middle failures ...	...	54

A total of 4,269 children (primary and middle) were tested, of these 235 failed the audiometric test.



## SPEECH THERAPY

The Authority was fortunate in having a full complement of three Speech Therapists, and it was thus possible to allocate a Speech Therapist in each case to the Mitcham area, the Merton and Morden area, and the Wimbledon area.

Details of cases dealt with are given below:—

Number of sessions held: (a) for treatment	...	1,093
(b) for consultation	...	67
Number of cases on register at beginning of year	...	370
Number of cases added during year	...	149
Number of cases discharged during year	...	177
Number of cases on register at end of year	...	342

Cases discharged during the year who:—

Achieved normal speech	...	57
Were greatly improved	...	44
Showed some improvement	...	34
Showed little or no improvement	...	22
Other reasons	...	20

Analysis of cases treated during the year:—

Stammering	...	48
Dyslalia	...	192
Cleft Palate	...	10
Dysarthria	...	9
Cluttering	...	1
Aphasia	...	3
Defects of voice	...	18
Defective speech due to deafness	...	21
Retarded speech and language...	...	162

## THE WORK OF THE SCHOOL NURSES

Health Visitors in their capacity as School Nurses visit all nursery and primary schools in the Borough. In these schools their previous knowledge of the young child and his home is especially valuable. They undertake regular health surveys where this is necessary and assist the School Medical Officer with routine medical examinations.

The amount of health teaching by Health Visitors in Middle and High schools has increased from 20, in 1968, to 133. Health Visitors also attended four Parent-Teacher Association meetings.

The response to these sessions by both staff and pupils has been most rewarding, and we received more requests for talks than we could accept. Great assistance in the preparation of these programmes has been given by the Health Education Officer.

State Registered Nurses who act as School Nurses visit with the School Medical Officers all the Middle and High schools for medical examinations. They also undertake the vision testing in the schools, assist with the programme of Diphtheria and Tetanus inoculations and the Mantoux/B.C.G. injections. They also staff the general medical clinics.

The following tables give details of visits paid, and clinic sessions attended by Health Visitors/School Nurses during the year:—

### 1. Visits.

To pupils, found at school medical examinations to require observation or treatment	...	...	49
To educationally subnormal children	...	...	168
To verminous cases	...	...	64
To infectious or contagious cases	...	...	27
To miscellaneous cases (arising from school medical inspections at request of Head Teacher, etc.)	...	...	87

### 2. Sessions attended.

For school medical inspections	...	...	...	401
Hygiene inspections	...	...	...	96
General medical clinics	...	...	...	356
Health teaching	...	...	...	133
Vision testing	...	...	...	9
Immunisation	...	...	...	62
Freedom from infection inspections	...	...	...	10

## CHILD GUIDANCE SERVICE

### 1. General

The work of the Service has continued on the same lines as before, dealing with a variety of difficulties at varying levels of complexity in children, not only with respect to themselves, but also in relationship with family and school.

### 2. Staffing

The position at Wimbledon has remained satisfactory apart from the loss of the part-time services of Mrs. I. Windebank, Psychiatric Social Worker. The position at the Mitcham Child Guidance Clinic was affected not only by the leaving, at the end of November, 1969, of Mrs. Windebank who worked part-time also at that Clinic, but by the absence for some months of a psychiatrist, following Dr. Lomas's departure at the end of March. Dr. Lorna Brierley acted as locum until Christmas, 1969. The Mitcham Clinic staff has also been augmented by the services of Mr. Cordell, Psychotherapist, since October, 1969.

### 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. Placement for Maladjusted Children

There is a very serious difficulty in finding suitable residential schools for those children considered to need the kind of help provided by such placement. It should be pointed out that perhaps a third of this number would have been able to stay at home, if there had been available a day-school for maladjusted children in the older age group. A school for the maladjusted is included in the Authority's Development plan.



## HANDICAPPED PUPILS

### Numbers of Handicapped Pupils

The following table gives the numbers of pupils on the Handicapped Pupils' Register on 31st December, 1969, together with the numbers ascertained during the year:—

Classification	Total ascertained during year	Total ascertained at 31.12.69
Speech Defects ... ..	1	1
Blind ... ..	—	8
Partially-sighted ... ..	—	8
Deaf ... ..	—	15
Partially-hearing ... ..	2	11
Educationally subnormal ... ..	24	178
Epileptic ... ..	—	1
Maladjusted ... ..	22	91
Physically-handicapped ... ..	6	42
Delicate ... ..	7	39
Totals ... ..	62	394

### 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 ... ..	4	4	—	—	8
Partially-sighted ... ..	6	1	—	1	8
Deaf ... ..	8	6	—	—	14
Partially-hearing ... ..	11	—	—	—	11
Educationally-subnormal ... ..	159	13	—	—	172
Epileptic ... ..	—	1	—	—	1
Maladjusted ... ..	31	46	—	4	81
Physically-handicapped ... ..	28	11	—	—	39
Delicate ... ..	25	10	—	3	38
Totals ... ..	272	92	—	8	372

### Children unsuitable for Education at Schools

During the year six 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, 1969, the dental staff consisted of the Chief Dental Officer, three full-time Dental Officers, five part-time Dental Officers and one part-time Orthodontist giving a full-time equivalent of 6.3 Dental Officers compared with 7.3 for 1968. The Authority also employs one Dental Auxiliary as compared with a full-time equivalent of 1.6 previously. Four sessions per week were devoted to orthodontics by the Orthodontist and two by one of the Dental Officers.

' There has been less disruption of the work of the Dental Clinics during 1969 due to changes in Dental Officer staff, but the vacancy for a full-time Dental Officer has existed since last May. Every effort has been made to maintain the service by the employment, when available, of sessional Dental Officers, but it has not been possible to carry out inspections of all schools attached to a clinic where a full-time vacancy exists. The re-organisation of schools carried out during the year caused by the Borough's Comprehensive Education Scheme also meant that some children missed dental inspection. 19,561 first inspections and 2,446 re-inspections were carried out. In addition, 607 pre-school children were inspected.

' Twenty sessions were devoted to Dental Health Education during the year when talks were given on this important subject to Parentcraft Groups in Clinics and to children in schools. In addition, a second visit was arranged through the General Dental Council of Pierre, the Clown, who, during a week of school visits, distributed nearly 10,000 apples supplied free through the Fruit Producers' Council.

' A report on the Borough Dental Service received during the year from the Department of Education and Science stated, " Compared with the national average the standard of treatment is good, with twice as many permanent teeth filled to each extracted and three times as many deciduous teeth filled to each extracted. The lower than average number of children seen at school inspections who required treatment, and the higher than average number who seek treatment from the School Dental Service indicates that the Authority's efforts are successful ".

' The comparatively low average number of children who require treatment is not, in my opinion, due to a low incidence of dental disease in the district, but to the availability of treatment in the General Dental Service as well as the School Service, the high rate of annual school dental inspections which alert parents to their children's dental needs, to the recall system operated in the School Dental Clinics and to Dental Health Education.

' In addition, the Orthodontic Service is much appreciated by parents and children and this service is now more comprehensive as fixed appliances are supplied when necessary.

' The gradual improvement of clinic equipment has been maintained with the fitting of new units at Middleton Road and Meopham Road Clinics and a new X-ray machine. Authority was given during the year for provision to be made to instal three new operating lights and two air turbine engines during 1970.'

The statistics relating to the School Dental Service are given below:—

### **Statistics for Year 1969**

Number of pupils on the register of maintained Primary, Middle and High Schools including nursery and special schools in January, 1970, as in Forms 7, 7m and 11 schools: 24,511.



## Attendances and Treatment.

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visits ... ..	2,470	1,935	433	4,838
Subsequent Visits ... ..	4,040	4,766	1,144	9,950
Total Visits ... ..	6,510	6,701	1,577	14,788
Additional courses of treatment commenced	481	310	56	847
Fillings in permanent teeth ... ..	2,639	4,305	1,359	8,303
Fillings in deciduous teeth ... ..	3,908	183	—	4,091
Permanent teeth filled ... ..	2,281	3,619	1,164	7,064
Deciduous teeth filled ... ..	2,772	159	—	2,931
Permanent teeth extracted ... ..	43	392	56	491
Deciduous teeth extracted ... ..	861	339	—	1,200
General anaesthetics ... ..	411	248	21	680
Emergencies ... ..	229	76	21	326

Number of pupils X-rayed ... ..	491
Prophylaxis ... ..	999
Teeth otherwise conserved ... ..	205
Number of teeth root filled ... ..	11
Inlays ... ..	—
Crowns ... ..	11
Courses of treatment completed ... ..	4,176

### Orthodontics.

Cases remaining from previous year ... ..	334
New cases commenced during year ... ..	171
Cases completed during year ... ..	134
Cases discontinued during year ... ..	30
Number of removable appliances fitted ... ..	284
Number of fixed appliances fitted ... ..	17
Pupils referred to Hospital Consultant ... ..	3

### Prosthetics.

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time) ... ..	—	—	—	—
Pupils supplied with other dentures (first time) ... ..	1	5	—	6
Number of dentures supplied	1	5	—	6

### Anaesthetics.

General Anaesthetics administered by Dental Officers—Nil.

### Inspections.

(a) First inspection at school: number of pupils ...	16,824
(b) First inspection at clinic: number of pupils ...	2,737
Number of (a)+(b) found to require treatment	8,444
Number of (a) +(b) offered treatment ...	8,241
(c) Pupils re-inspected at school clinic ...	2,446
Number of (c) found to require treatment ...	1,440

### Sessions.

Sessions devoted to treatment ...	2,827
Sessions devoted to inspection... ..	183
Sessions devoted to Dental Health Education ... ..	20

# INFECTIOUS DISEASES AND PROPHYLACTIC MEASURES

## 1. Infectious Diseases

Table 1.  
*Infectious Diseases notified by Schools.*

Disease	Suffering	Excluded on suspicion	Infection at home	Total exclusions
Scarlet Fever ... ..	43	—	1	44
Measles ... ..	352	—	2	354
Whooping Cough ... ..	6	—	—	6
German Measles ... ..	89	—	5	94
Chicken Pox ... ..	296	—	—	296
Mumps ... ..	512	10	2	524
Jaundice ... ..	3	—	1	4
Other ... ..	70	2	3	75
Totals ... ..	1,371	12	14	1,397

Table 2.  
*Contagious Diseases notified by Schools.*

Disease	Suffering	Excluded on suspicion	Total exclusions
Impetigo ... ..	8	—	8
Scabies ... ..	1	—	1
Other ... ..	4	—	4
Totals ... ..	13	—	13

Compared with 1968, there were 147 more cases of communicable disease notified as a result of which children were excluded from School.

### Sonne Dysentery

In March, there was a minor outbreak of dysentery at a Junior School involving eight cases. Fortunately this outbreak cleared up very quickly and necessitated only 100 special tests.

In May, an explosive outbreak of Sonne dysentery occurred at a Primary School. The investigation of this outbreak involved the Health Department and the Public Health Laboratory Service in a great deal of work as the cases, their families and all immediate contacts, had to be investigated.

The excellent co-operation received from all concerned including the school staff resulted in the infection being cleared up in a remarkably short time in spite of the fact that there were 109 positive cases necessitating over 1,100 laboratory tests.

Following the outbreak, it was necessary to keep a close check for possible cases of dysentery in many other primary schools in the Borough and, in all, 202 persons connected with 16 schools were investigated.



## **Infective Jaundice**

In March, an outbreak of infective jaundice occurred in a primary school in the Borough, 11 children and one member of the staff being infected. The other children in the class mainly concerned were offered protective inoculation in the form of gamma globulin and it is interesting to note that no further cases occurred thereafter.

## **Winter Vomiting**

In mid-October, 14 children in a Primary School in the Borough suffered attacks of sickness. Investigations were carried out and the outbreak quickly ended.

## **Report on Epidemiological Survey in a Girls High School**

In August, 1969, a pupil of a Girls' High School was found to have pulmonary tuberculosis; she was already under observation as a previous contact by the chest clinic.

It was decided that epidemiological survey of the pupils and the staff was indicated within three months.

The parents of the 701 girls attending the school were approached and 682 of them agreed that their girls should be included for skin testing and chest X-ray if necessary.

The skin tests and readings were carried out in November. 164 of those with negative results were given B.C.G. vaccination and the mobile mass X-ray unit visited the school at the beginning of December.

Two hundred other girls who had left school at the end of the summer term were contacted and were advised to attend for X-ray, along with those in the survey, who had a positive skin test or had been absent for the skin test or the reading.

A total of 320 girls were X-rayed; 318 were normal and two were referred to their doctors for non-tuberculous conditions. 55 of a total of 76 teaching and ancillary staff were X-rayed. All results were satisfactory.

Those girls still attending the school who had positive skin tests, although they had not previously had B.C.G. vaccination and had failed to attend for X-ray, were followed up individually.

## **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 1969 was as follows:—

Number of children vaccinated ... ..	82
Number of children given re-inforcing doses ...	2,000
No case of Poliomyelitis occurred in the Borough in 1969.	

### *2. Diphtheria/Tetanus Immunisation.*

Number of children given immunisation ...	85
Number of children given re-inforcing doses ...	1,946

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 ...	1,958	...	
Number of consents ...	1,740	...	88.86%
Number skin tested ...	1,503	...	76.78%
Number Mantoux positive ...	33	...	1.68%
Number B.C.G. Vaccinated ...	1,469	...	75.02%

The figure of 1.68% who were Mantoux positive is very gratifying and is an indication of a low incidence of tuberculosis in the community.

## ANCILLARY SERVICES

### 1. Nursery Schools/Classes

There were 672 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 1968:—

Year	Number in attendance	Taking Milk		Taking Meals			
		Number	Percentage	Free	Paid	Total	Percentage
September, 1968 ...	22,937	12,115 *13,037	92.9	2,099	14,976	17,075	74.4
September, 1969 ...	22,393	12,597 *13,732	91.0	1,239	16,082	17,321	77.3

\* Number in attendance entitled to milk (i.e., pupils in Primary and Middle Schools).



## Appendix 'A'

### MEDICAL INSPECTION AND TREATMENT

(Excluding Dental Inspection and Treatment)

Return for the year ended 31st December, 1969

Number of pupils on registers of maintained, primary, middle, high, special and nursery schools in January, 1970:—

(a) Ordinary schools ... ..	23,690	<i>24,511</i>
(b) Special schools ... ..	184	
(c) Nursery schools and classes	637	

Total ... 24,511 *25,332*

#### SECTION A.

##### *Routine Medical Inspections.*

Age Groups Inspected (By year of birth)	Number of Children Inspected
1965 and later	1,069
1964	1,483
1963	383
1962	152
1961	1,637
1960	185
1959	108
1958	74
1957	190
1956	110
1955	28
1954 and earlier	1,322
Total	6,741

##### *Other Medical Inspections.*

Type of Inspection	Number of Children Inspected
Special Inspections	1,568
Re-Inspections	990
Total	2,558

*Return of Defects found in the course of Medical Inspections.*

Defect or Disease	Periodic Inspections		Special Inspections	
	No. referred for Treatment	No. referred for Observation	No. referred for Treatment	No. referred for Observation
Skin ... ..	56	136	151	40
Eyes				
(a) Vision ...	635	471	699	46
(b) Squint ...	73	38	4	—
(c) Other ...	9	22	10	10
Ears				
(a) Hearing ...	45	80	25	91
(b) Otitis Media	18	51	1	3
(c) Other ...	1	15	5	6
Nose and Throat	58	373	21	31
Speech ... ..	63	126	26	13
Lymphatic Glands	3	69	1	2
Heart ... ..	15	53	2	5
Lungs ... ..	32	176	5	13
Development				
(a) Hernia ...	13	22	1	1
(b) Other ...	20	102	9	15
Orthopaedic				
(a) Posture ...	5	28	1	6
(b) Feet ...	23	81	8	12
(c) Other ...	28	99	14	25
Nervous System				
(a) Epilepsy ...	12	22	1	2
(b) Other ...	7	20	—	3
Psychological				
(a) Development	14	45	3	4
(b) Stability ...	17	75	11	12
Abdomen ...	10	37	1	6
Other defects and diseases ...	30	183	25	102
Totals ...	1,187	2,324	1,024	448

Three thousand five hundred and eleven defects were found in children at routine medical inspections of which 1,187 were referred for treatment and 2,324 for observation. 1,472 defects were found at special inspections, 1,024 being referred for treatment and 448 for observation. The total number of defects referred for treatment and observation in 1969 was 4,983.



*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
1965 and later	1,069	58	%
1964	1,483	208	5.42
1963	383	64	14.03
1962	152	29	16.71
1961	1,637	241	19.07
1960	185	29	14.72
1959	108	21	15.67
1958	74	12	19.44
1957	190	43	16.35
1956	110	17	22.63
1955	28	6	15.45
1954 and earlier	1,322	314	21.43
Totals	6,741	1,042	23.75
			15.61

*Classification of General Condition of pupils inspected during 1969*

Group	Number of children inspected	Percentage found satisfactory	Percentage found unsatisfactory
1965 and later	1,069	%	%
1964	1,483	100	—
1963	383	99.93	0.07
1962	152	100	—
1961	1,637	100	—
1960	185	100	—
1959	108	100	—
1958	74	100	—
1957	190	100	—
1956	110	100	—
1955	28	100	—
1954 and earlier	1,322	100	—
Totals	6,741	99.93	0.07

## SECTION B.

### Treatment

*Uncleanliness and Verminous Conditions.*

1. Total number of individual examinations of pupils by Health Visitors in Schools ... .. 6,506
2. Number of individual pupils found to be infested ... 82
3. Number of exclusions:—
 

First time	...	...	...	...	13
Second time	...	...	...	...	2
					15
4. Number of pupils cleansed ... .. 7
5. Number of Cleansing Notices or Cleansing Orders issued under Section 54 of the Education Act, 1944 ... 5

### *Diseases of the Skin (excluding uncleanness)*

Diseases of the Skin.				Number of cases known to have been treated during the year.
Ringworm—scalp	...	...	...	2
Ringworm—body	...	...	...	—
Scabies	...	...	...	2
Impetigo	...	...	...	4
Other skin diseases (including verru- cae, eczema, allergic skin condi- tions, acne, etc.)	...	...	...	317
Total				325

### *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	...	...	...	54
Errors of refraction (including squint)	...	...	...	2,132
Total				2,186

Number of pupils for whom spec-  
tacles were prescribed ... 921

### *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	...	...	...	14
(b) for adenoids and chronic ton- sillitis	...	...	...	22
(c) for other nose and throat con- ditions	...	...	...	3
Received other forms of treatment	...	...	...	100
Total				139

### *Orthopaedic and Postural Defects.*

Number of cases known to have been  
treated in Clinics or Out-Patient  
Departments ... 111

79 sessions were held at Pelham Road Remedial Exercises Clinic  
during 1969.

25 new cases were admitted and 23 old cases discharged.

40 sessions were held at Amity Grove Remedial Exercises Clinic  
during 1969.



10 new cases were admitted and 7 old cases discharged.

37 sessions were held at Wide Way Remedial Exercises Clinic during 1969.

4 new cases were admitted and 9 old cases discharged.

71 sessions were held at St. Christopher's Special School and Eagle House Annexe Remedial Exercises Clinic during 1969.

31 new cases were admitted and 15 old cases discharged.

*Other Treatment Given.*

Ailments.	Number of cases treated.	
Miscellaneous minor ailments	...	154
Lymphatic Glands	... ..	10
Heart and Circulation	... ..	13
Lungs	... ..	29
Development (Hernia and Other)	... ..	32
Nervous System	... ..	16
Total	...	254

**Appendix ' B '**

*1. General Medical/Minor Ailment Clinics.*

Attendances made by children at General Medical/Minor Ailments Clinic ... .. 2,734

*2. Other Medical Examinations undertaken by School Medical Officers.*

Children examined for part-time employment ... .. 298

In addition to medical examinations specified as above, School Medical Officers also carried out 1,280 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 ... .. 10

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













