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LONDON BOROUGH OF MERTON



THE
HEALTH
OF
MERTON
1971

THE ANNUAL REPORT OF THE
MEDICAL OFFICER OF HEALTH
and the PRINCIPAL SCHOOL MEDICAL OFFICER
E. H. TODD, M.B., Ch.B., D.P.H.

THE HEALTH OF MERTON 1971

by

E. H. TODD, M.B., Ch.B., D.P.H.

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

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the Health of the London Borough of Merton for the year 1971, incorporating the Annual Report on the School Health Service. Dr. P. J. Doody was Medical Officer of Health during the year, but it was not found possible to prepare this report for publication before his retirement at the end of June, 1972.

The steady decline in population of this area since 1955 continued. The Registrar General's estimate of population fell from 181,460 in 1970 to 177,150 in 1971. The Census population figure for 1971 was 176,524; the somewhat higher estimated figure of 177,150 would appear to reflect some degree of unavoidable under-enumeration in the Census.

Live births totalled 2,467—79 more than in 1970 and this increase, coupled with the fall in population resulted in the live birth rate rising from 13.20 per thousand population in 1970 to 13.90 in 1971. This is the first year since 1965 that there has not been a fall in the live birth rate.

There was a reduction of domiciliary births from 169 in 1970 to 135 in 1971, but the number of planned early discharges from hospital within 48 hours of confinement increased from 474 to 487 and, in addition, domiciliary midwives delivered 44 patients in hospital.

There were 34 deaths of infants under one year of age (six less than in 1970) and the infant mortality rate fell from 16.77 in 1970 to 13.78 in 1971. This welcome fall in the number of infant deaths was reflected in the neo-natal, early neo-natal and perinatal mortality rates, all of which showed a fall on 1970. These infant mortality figures are extremely satisfying because the infant mortality rate is used as an index of the improvement in social and material conditions which have occurred in line with improved obstetrics and paediatrics over the years.

I am giving below details of the respective rates for 1970 and 1971, together with a corresponding rate for England and Wales for 1971, from which it will be seen that Merton compares favourably with the national rates:—

	Merton		England and Wales.
	1970	1971	1971
Infant mortality rate	16.77	13.78	18.0
Neo-natal mortality rate (deaths of infants in first 28 days of life)	11.74	10.54	12.0
Early neo-natal mortality rate (deaths of infants in first week of life)	9.22	7.70	10.0
Perinatal mortality rate (still- births plus deaths of infants in first week of life) ...	18.00	16.87	22.0

There were 71 less deaths in 1970 and this resulted in a fall in the death rate per thousand population from 11.50 in 1970 to 11.36 in 1971. Some of the leading causes of death, both in the country as a whole and in Merton, are cerebro-vascular and cardio-vascular disease, including coronary heart disease, cancer of the lung and chronic bronchitis. These particular diseases are aggravated by personal habits—some of them lethal! It is true to say that the health of the cigarette smoker is at stake by his or her own personal pollution. It is clear, therefore, that the need for intensive health education is paramount so that our young can learn about the importance of trying to keep healthy before acquiring habits that may eventually result in personal destruction or reduce their expectation of life span.

The incidence of notifiable infectious diseases was generally lower than in the previous year and as the reduction was mainly due to the fall in measles notifications it is hoped that the immunisation campaign is beginning to affect the incidence of the disease. The only major outbreak was of dysentery following a school educational cruise to the Mediterranean in which 600 pupils were involved. This is reported in detail in the body of the report.

The excellent co-operation of the general practitioners, the public health inspectors and the ever available support of Dr. Fleck, the Director of the Public Health Laboratory Service and his staff are a great help to the Health Department in the control of infection.

Since the implementation of the Local Authority (Social Services) Act, 1970, on 1st April, 1971, and the establishment of the new Social Services Department, we have attempted to maintain the closest collaboration with the Social Services Department so that jointly we try to meet the needs of the community and give support to the sick, the aged, the physically handicapped and the mentally disordered.

The Chief Public Health Inspector has reported in detail on the Environmental Health Section and on the ever increasing volume of work in his section.

The policy of attachment of health visitors and home nurses to general practitioners was continued during the year and the Authority supported the recommendation of the London Boroughs Association that, whenever possible, health visitors and home nurses should be allowed to cross authority boundaries in order to visit all patients of practices to which they are attached, and not merely patients in the area of the nurses' employing authority. Meetings were held during the year with neighbouring health authorities to discuss arrangements for crossing boundaries.

The number of persons aged 65 and over continues to increase and this affects the demands made on the community nursing services, particularly the Home Nursing Service. A large number of old people live alone and when they become ill support from the community services by day, however good, is not sufficient, so there is a dire need for a night nursing service.

It is disappointing to record that in spite of every effort to provide a Health Centre in the Borough it was not possible during the year to produce a site which was convenient and acceptable to general

practitioners, but there will be no diminution of effort to ensure that a Health Centre in Merton shall become an established fact. The public, the general practitioners and the staff of the Authority, have all much to gain from the close working relationship which is fostered in a Health Centre.

The Department was actively concerned during the year in ensuring that cases of renal failure could dialyze at home and thus reduce pressure on hospital beds. Three cases were dealt with—two by way of adaptation of the patient's house, and one by way of the provision of a 'Portakabin' adjacent to the patient's house. This brought the total of these cases in Merton to five at the end of the year.

I would like to offer my colleagues in the other Departments of the Council my thanks for their friendly and helpful co-operation at all times. I am also indebted to our Geriatrician, Dr. Peter Millard, for his ready assistance, to our Obstetricians and Paediatricians and all other Consultants who so willingly help us and also the many voluntary and statutory bodies who are always ready to offer support.

The loyal and efficient manner in which all members of the Health Department carried out their duties during the year was greatly appreciated. Special thanks are due to Mr. Smith, the Chief Public Health Inspector (and his predecessor Mr. Cockell), to Mrs. Poole, the Chief Nursing Officer, and to Mr. Atkinson, my Chief Administrative Officer, for their contributions in connection with the preparation of this report.

Finally, I would like to express my thanks to all members of the Council, and particularly members of the Health Committee, for their support throughout the year.

I have the honour to be,

Your obedient servant,

E. H. TODD,

Medical Officer of Health.

COMMITTEES AT 31st DECEMBER, 1971

HEALTH COMMITTEE

The Mayor, Mr. J. L. Coombes

Councillor Geoffrey N. Smith (Chairman)

Councillor A. J. Pullman (Vice-Chairman)

Aldermen:

J. P. Brown, J.P. J. R. Daniels

Councillors:

(Mrs.) M. E. Chadwick P. J. Glasspool (Miss) L. Hirst

(Miss) S. Knight D. T. Miller

G. H. Raymond H. C. A. Turner (Miss) N. K. Watts

Co-opted member:—

Representative of the Local Medical Committee

(Dr. R. A. Arthur, J.P.)

ENVIRONMENTAL HEALTH AND HOME SAFETY SUB-COMMITTEE

Chairman of the Health Committee

(Councillor Geoffrey N. Smith)

Vice-Chairman of the Health Committee

(Councillor A. J. Pullman)

Alderman J. R. Daniels

Councillors:

(Mrs.) M. E. Chadwick (Miss) L. Hirst D. T. Miller

H. C. A. Turner (Miss) N. K. Watts

Co-opted member:—

Dr. R. A. Arthur, J.P.

TOWN CLERK

Sydney Astin (Solicitor)

WHOLE-TIME STAFF

(As at 31st December, 1971)

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 ...	Elza H. Todd, M.B., Ch.B., D.P.H.
Senior Medical Officers ...	Marie J. Freeman, M.B., B.S., L.M.S.S.A., D.P.H. Elizabeth Cloake, M.B., B.S. (Lond.), D.Obst.R.C.O.G., D.P.H.
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. 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 ...	E. T. Thompson, L.D.S., R.C.S. (commenced 11.10.71)
Senior Dental Officer ...	Mrs. M. A. Libbey, L.D.S., R.C.S. (Eng.) (commenced 1.12.71)
School Dental Officers ...	Ann C. Leonard, L.D.S., R.C.S. S. P. Motani, L.D.S. Mrs. P. Mainwaring, L.D.S., R.C.S. (Eng.), B.D.S. (Lond.), (commenced 11.10.71)
Dental Auxiliary ...	Miss S. P. Foley (commenced 7.9.71)
Chief Public Health Inspector ...	G. H. Cockell, F.A.P.H.I., F.R.S.H.
Deputy Chief Public Health Inspector ...	J. P. Smith, M.A.P.H.I., M.R.S.H.
Chief Nursing Officer ...	Mrs. A. A. B. Poole, S.R.N., S.C.M., H.V. Cert.
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.
Health Education Officer ...	Mrs. I. Holloway, S.R.N., S.C.M., H.V. Cert.
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.
Educational Psychologists	...	Mrs. M. J. Badawi, B.A. (Hons.), Lond., Post-Graduate Diploma in Educational Psychology Miss D. Waldeck, B.A. (Hons.) Mrs. A. Court, B.Sc., Diploma in Educational Psychology (commenced 1.9.71)
Psychiatric Social Workers	...	Mrs. B. Litauer, A.A.P.S.W., Mental Health Diploma, London, Social Science Diploma, London C. M. Oakley, A.A.P.S.W., B.Soc., Dip.Crim. (Cambridge)
Psychotherapists	...	Mrs. M. Livesey, N.F.F. Diploma, Assocn. of Child Psychotherapists
Speech Therapists	...	Mrs. G. M. Stephenson, L.C.S.T. Mrs. A. Varah, L.C.S.T. Mrs. C. M. Holland, L.C.S.T. (commenced 20.9.71)
Audiometrician	...	Mrs. M. Dean, S.R.N.

PART-TIME STAFF (As at 31st December, 1971)

Ophthalmic Surgeons	...	H. A. Reddy, D.O., F.R.C.S. (commenced 5.2.71) M. C. Shah, L.M.S.S.A.
Orthopaedic Surgeon	...	G. Hadfield, M.R.C.S., L.R.C.P., F.R.C.S. (Eng.)
Child Psychiatrists	.....	D. Rumney, M.R.C.S., L.R.C.P., D.P.M. Joan C. Wells, M.D., M.R.C.P., D.P.M.
Departmental Medical Officers		Zainab E. Asvat, M.B., B.Ch. (commenced 2.9.71) Joan M. H. Clarke, M.R.C.S., L.R.C.P. E. A. 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. Joyce M. Havelock, M.B., B.S., M.R.C.S., L.R.C.P., C.P.H. Aleksandra Nawrocka, L.A.H. (Dublin) Karen I. Parkes, M.D., M.B., B.S., F.R.C.S. M.R.C.S., L.R.C.P. Daphne M. Pearson, M.B., B.S. Douglas W. Sim, M.B., Ch.B. Elizabeth A. South, M.B., Ch.B. Audrey P. Whitfield, M.B., B.S.
School Dental Officers	...	Wanda Kojder, B.D.S. Sheila McDonald, L.D.S. Felicity J. Street, B.D.S. (commenced 25.1.71)
Dental Orthodontists	...	Linda R. Read, B.D.S., L.D.S., R.C.S.
Dental Anaesthetists	...	W. Carpenter, M.A., M.B., B.Ch., B.A.O., D.A. Betty M. Margetts, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H. R. G. Smith, M.B., B.S., M.R.C.S., L.R.C.P., D.A., D.Obst.R.C.O.G.
Geriatrician	...	P. H. Millard, M.B., B.S. Hons., M.R.C.S., M.R.C.P.
Physiotherapists	...	Mrs. B. S. Fenner, M.C.S.P. Mrs. R. J. Kempton, M.C.S.P. Mrs. J. Simmons, M.C.S.P.
Speech Therapist	...	Mrs. E. P. Jefferson, L.C.S.T.

GENERAL PUBLIC HEALTH SERVICES

General Information

Area of Borough in acres	...	...	...	9,379
Number of private dwellings (1961)	...	...	...	59,482
Number of private dwellings (1971)	...	...	...	63,790
Rateable value, at 1st April, 1971	...	...	...	£11,731,062
Actual product of a penny rate:—				
1970/71	...	...	...	£46,739
Estimated product of a penny rate:—				
1971/72	...	...	...	£112,305
Population:—				
Census figure (1961)	...	...	...	186,647
Census figure (1971)	...	...	...	176,524
Registrar-General's Estimate of Population				
			1971	1970
at 30th June	...	...	177,150	181,460

Summary of Vital Statistics

					1971	1970
Live Births—						
Legitimate:	Males	...	...	...	1190	1164
	Females	...	...	...	1068	1032
					2258	2196
Illegitimate:	Males	...	...	...	106	103
	Females	...	...	...	103	89
					209	192
Totals					2467	2388
Live Birth Rate per 1,000 population					13.90	13.20
Corrected Live Birth Rate per 1,000 population					14.45	13.7
Illegitimate live births—percentage of total live births					8.47	8.05
Still Births—						
Legitimate:	Males	...	...	...	6	7
	Females	...	...	...	13	14
					19	21
Illegitimate:	Males	...	...	...	3	—
	Females	...	...	...	1	1
					4	1
Totals					23	22
Still-birth Rate per 1,000 live and still-births					9.24	9.14
Still-birth Rate per 1,000 population					0.13	0.12
Total live and still-births					2490	2410
Infant Mortality (Deaths of infants under one year of age)—						
Legitimate:	Males	...	...	...	21	21
	Females	...	...	...	11	13
					32	34
Illegitimate:	Males	...	...	...	1	4
	Females	...	...	...	1	2
					2	6
Totals					34	40
Infant Mortality Rate per 1,000 live births					13.78	16.77
Infant Mortality Rate per 1,000 legitimate live births					14.00	15.48
Infant Mortality Rate per 1,000 illegitimate live births					9.57	31.25
Neo-Natal Deaths (Deaths of infants in first 28 days of life)					26	28
Neo-Natal Mortality Rate					10.54	11.74
Early Neo-Natal Mortality Rate (deaths of infants in first week of life per 1,000 live births)					7.70	9.22
Perinatal Mortality Rate (Still-births plus deaths in first week of life per 1,000 live and still-births)					16.87	18.00
Total loss of infant life (Still-births plus infant deaths) per 1,000 live and still-births					22.90	25.75
Maternal Deaths (including abortion)					—	1
Maternal Mortality Rate per 1,000 live and still-births					—	0.41
Deaths					2013	2084
Death Rate per 1,000 population					11.36	11.50
Corrected Death Rate per 1,000 population					10.68	11.00

	1971	1970
Deaths from Bronchitis and Emphysema per 1,000 population	0.63	0.52
Deaths from Pneumonia per 1,000 population ...	0.87	0.85
Deaths from Cancer of lung and bronchus per 1,000 population	0.78	0.78
Deaths from other forms of Cancer per 1,000 population	2.00	1.95
Marriages	1425	1454
Marriage Rate per 1,000 population	8.04	8.01

Causes of Death at different Periods of Life in the London Borough of Merton during 1971

CAUSE OF DEATH	AGE GROUP AND SEX																							
	Under 4 weeks		4 Wks. & under 1 year		1 to 4 years		5 to 14 years		15 to 24 years		25 to 34 years		35 to 44 years		45 to 54 years		55 to 64 years		65 to 74 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
Tuberculosis of Respiratory System ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-		
Late Effects of Respiratory T.B. ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-		
Other Tuberculosis ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1		
Meningococcal Infection ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-		
Malignant Neoplasm: Buccal Cavity, etc. ...	-	-	-	-	-	-	-	-	1	-	-	-	2	-	-	1	2	1	1	-	6	2		
Malignant Neoplasm: Oesophagus ...	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	2	-	2	1	5	2		
Malignant Neoplasm: Stomach ...	-	-	-	-	-	-	-	1	-	-	-	-	2	1	9	5	9	8	7	13	27	28		
Malignant Neoplasm: Intestine ...	-	-	-	-	-	-	-	-	-	-	1	1	1	-	6	7	13	11	10	12	31	31		
Malignant Neoplasm: Larynx ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	-	-	2	1		
Malignant Neoplasm: Lung, Bronchus ...	-	-	-	-	-	-	-	-	-	-	-	1	12	1	28	6	51	12	19	9	110	29		
Malignant Neoplasm: Breast ...	-	-	-	-	-	-	-	-	-	-	-	2	-	11	-	14	-	11	1	12	1	50		
Malignant Neoplasm: Uterus ...	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	4	-	4	-	2	-	12		
Malignant Neoplasm: Prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	-	7	-	16	-		
Leukaemia ...	-	-	-	-	-	1	-	1	-	-	1	-	1	-	1	-	3	-	4	-	10	2		
Other Malignant Neoplasms, etc. ...	-	-	-	-	-	-	1	1	2	-	-	3	8	9	11	10	20	27	17	22	59	72		
Benign and Unspecified Neoplasms ...	-	-	-	-	1	-	-	-	-	-	-	-	-	-	2	-	-	1	1	1	3	3		
Diabetes Mellitus ...	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	2	6	2	2	4	9		
Avitaminoses, etc. ...	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1		
Other Endocrine Etc. Diseases ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	1	-	-	2	2		
Anaemias ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2		
Mental Disorders ...	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	1	1	1	3		
Meningitis ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1		
Multiple Sclerosis ...	-	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	-	-	-	-	3		
Other Diseases of Nervous System, etc. ...	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	2	3	-	3	4	8	7		
Chronic Rheumatic Heart Disease ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	3	7	2	11	5	22		
Hypertensive Disease ...	-	-	-	-	-	-	1	-	-	1	-	2	-	6	-	7	3	2	5	18	9			
Ischaemic Heart Disease ...	-	-	-	-	-	-	-	-	1	-	5	-	30	2	61	18	88	56	102	115	287	191		
Other forms of Heart Disease ...	-	-	-	-	1	-	-	-	1	-	-	-	1	-	1	2	11	8	19	57	33	68		
Cerebrovascular Disease ...	-	-	-	-	-	-	-	-	-	3	1	6	2	11	11	27	30	44	123	91	167			
Other Diseases of Circulatory System ...	-	-	-	-	-	-	1	-	-	1	-	2	2	1	2	15	14	18	28	38	46			
Influenza ...	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	1	1	2			
Pneumonia ...	-	-	2	1	-	-	-	-	-	1	2	2	-	4	1	11	16	48	66	68	86			
Bronchitis and Emphysema ...	-	-	-	-	-	-	-	-	-	-	-	1	-	16	4	33	8	39	11	89	23			
Asthma ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	-	-	2	1			
Other Diseases of Respiratory System ...	1	-	-	1	-	-	-	-	-	-	1	1	1	2	1	1	1	5	3	10	8			
Peptic Ulcer ...	-	-	-	-	-	-	-	-	-	-	1	-	1	1	2	-	5	6	4	6	13	13		
Intestinal Obstruction and Hernia ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	2	2	4	3			
Cirrhosis of Liver ...	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	1	-	-	-	1	3			
Other Diseases of Digestive System ...	-	1	-	-	-	-	-	-	-	-	-	-	1	3	1	4	5	1	7	8	15			
Nephritis and Nephrosis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	2	5	2	8			
Hyperplasia of Prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-		
Other Diseases, Genito-Urinary System ...	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	2	-	5	1	11	1			
Diseases of Skin, Subcutaneous Tissue ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1			
Diseases of Musculo-Skeletal System ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	2	4	4	6			
Congenital Anomalies ...	8	1	1	3	1	1	-	-	2	-	-	1	1	-	1	-	1	1	-	13	9			
Birth Injury, difficult Labour, etc. ...	5	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	1			
Other Causes of Perinatal Mortality ...	5	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	4			
Symptoms and Ill-defined conditions ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	2	11	3	11			
Motor Vehicle Accidents ...	-	-	-	-	-	-	3	-	2	-	1	-	1	1	2	2	-	4	1	-	10	7		
All other Accidents ...	-	-	-	-	1	-	1	1	-	4	-	-	-	-	-	-	3	-	2	5	11	6		
Suicide and Self-inflicted Injuries ...	-	-	-	-	-	-	-	-	2	1	-	1	5	1	2	-	2	2	-	-	11	5		
All other external causes ...	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-			
TOTAL ALL CAUSES ...	19	7	3	5	2	3	1	3	7	6	13	4	16	16	83	39	178	103	336	248	1036	977		

Comparative Statistics, 1971

	Merton	England and Wales
<i>Rates per 1,000 Population :</i>		
Live births	13.89	16.00
Deaths (all causes)	11.36	11.60
Respiratory tuberculosis	0.02	0.19
Cancer of lung and bronchus	0.78	0.63
<i>Rates per 1,000 live and still births :</i>		
Still births	9.24	12.00
Maternal mortality	—	0.17
Perinatal mortality	16.87	22.00
<i>Rates per 1,000 live births :</i>		
Infant mortality—deaths of infants under 1 year	13.78	18.00
Neo-natal mortality—deaths of infants in first 28 days of life	10.54	12.00
Early neo-natal mortality—deaths in first week of life	7.70	10.00

Principal causes of Death in order of Frequency

Out of the 2,013 deaths occurring during the year 1,737 were attributable to the undermentioned principal causes:—

	No. of Deaths.	Percentage of Deaths from all causes.
1. Heart Diseases	633	31.4
2. Cancer	496	24.6
3. Cerebrovascular disease	258	12.8
4. Pneumonia	154	7.6
5. Bronchitis and Emphysema	112	5.6
6. Other diseases of the Circulatory System	84	4.2

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	11	1	1	-	-	-	-	-	-	13
Congenital Malformations	2	4	3	-	2	3	-	-	-	14
Broncho-pneumonia	-	-	-	-	-	2	1	-	-	3
Birth Injuries	-	-	-	-	-	3	-	-	-	3
Other causes	-	1	-	-	1	-	-	-	-	2
Totals	13	6	4	-	3	8	1	-	-	35

INFANT MORTALITY

Of the 35 infant deaths, 19 occurred in the first seven days of life. All of these babies were delivered in hospital.

The infant mortality rate of 13.78 compares very favourably with the rate of 18.0 for England and Wales.

PERINATAL MORTALITY

The perinatal mortality rate for Merton was 16.87 per 1,000 live and still births, thus comparing favourably with that for England and Wales of 22.0.

MATERNAL MORTALITY

There were no maternal deaths in 1971.

CONTROL OF COMMUNICABLE DISEASES

Notifications received during 1971

(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	13	80	105	182	27	12	8	—	—	427
Dysentery	—	3	4	7	51	24	3	—	—	92
Scarlet Fever	—	2	11	23	12	—	1	1	—	50
Whooping Cough	2	10	11	21	3	1	2	—	—	50
Infective Jaundice	—	1	2	4	6	7	5	3	1	29
Tuberculosis (Resp.):										
Males	—	1	—	—	—	4	2	3	—	10
Females	—	—	1	—	—	1	7	1	—	10
Tuberculosis (Non-Resp.):										
Males	—	—	1	—	—	1	2	—	1	5
Females	—	—	—	—	—	—	1	—	1	2
Acute Meningitis	—	—	—	2	—	2	1	1	—	6
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	1
Food Poisoning	—	1	—	—	—	5	8	2	—	16
Malaria	—	—	—	—	—	1	1	—	—	2
Poliomyelitis (Paralytic)	—	—	—	1	—	—	—	—	—	1
Totals	16	98	135	240	99	58	41	11	3	701

General

Notifications in 1971 totalled 701, compared with 985 for the previous year. The reduction was mainly due to the fall in measles notifications from 738 to 427, although 1971 should have been a peak year for this disease. Apparently the measles immunisation campaign, now in its second year, is beginning to affect the incidence of the disease.

The following table shows the corrected notifications of infectious disease received in 1971 and in the preceding six years:—

Disease	1971	1970	1969	1968	1967	1966	1965
Measles	427	738	964	322	1777	851	2428
Dysentery	92	21	139	5	20	39	34
Scarlet Fever	50	42	48	55	60	45	62
Whooping Cough	50	53	8	49	117	74	42
Typhoid Fever	—	3	—	—	—	—	1
Food Poisoning	16	65	23	9	3	4	9
Malaria... ..	2	1	1	—	1	—	—
Infective Jaundice	29	20	36	11	...	...	...
Acute Meningitis	6	2	4	1	—	—	1
Ophthalmia Neonatorum	1	1	1	—	—	—	1
Tuberculosis:							
Respiratory	20	29	38	36	41	48	45
Non-Respiratory	7	10	6	6	3	5	9
Acute Encephalitis	—	—	2	—	1	—	—
Leptospirosis	—	—	1	—	—	—	—
Paratyphoid	—	—	3	—	—	—	—
Poliomyelitis (Paralytic)	1	—	—	—	—	—	1
Totals	701	985	1274	494	2023	1066	2633

NOTE: Infective jaundice not notifiable until 1968

Cholera

Following outbreaks of cholera in Spain, Portugal and Northern Africa, and the discovery of a case in Wales, travellers entering Britain were required to have a valid certificate of inoculation against cholera. Ninety-eight persons arriving without such a certificate were kept under surveillance for the necessary period and tested when it was thought necessary. All results were negative. This involved the Health Department staff in much additional week-end work.

Diphtheria

Once again there were no notifications. Education in the necessity for immunisation continues. In October it was found that a student teacher in the Borough had been in contact with a case of diphtheria in another Borough. She was excluded from work while tests were carried out. All the results were negative.

Dysentery

The following major outbreak of sonné dysentery occurred in 1971.

In March, immediately following an educational Mediterranean cruise by 600 children from 20 Merton schools, a number of children were found to be absent from school. Enquiries showed that several had diarrhoea and immediate laboratory tests showed them to be infected with sonné dysentery. Subsequent investigation at all

20 schools revealed a total of 60 absentees among children who had been on the cruise, with a further 140 children who had been ill and recovered. In all, 78 children were found to be infected.

Control measures were put into effect immediately. The schools concerned were visited and inspected, advice was given on hygiene and additional cleaning and disinfection of toilets was arranged. Canteen staff were alerted and advised and Head Teachers were asked to inform the Health Department of any new cases. A letter was sent to the parents of all children who had been on the cruise in order to inform them of the outbreak and to enable the Department to trace any contacts in 'at risk' occupations.

There was close liaison with the Chief Medical Officer of the Shipping Company and food handlers in the ship were tested and found to be negative. The ship's next four cruises were uneventful. The overall picture of the children's health on the cruise was somewhat confused by sea-sickness during the last few days, but the most probable source of infection was thought to have been ice-cream eaten at the end of the cruise in a small café in Itea where there was only one toilet and no washing facilities.

In all, about 325 families were tested, including 48 with members in 'at risk' occupations, and more than 900 specimens were sent to the Public Health Laboratory at St. George's Hospital, whose staff coped wonderfully well with what must have been a great burden. The last case was not cleared until two months had elapsed.

When the outbreak was over, additional recommendations were made to the Education Committee which should minimise the possibility of a recurrence.

Following notification in May of dysentery in an adult male, investigation showed that his stepson, who attended a Day Nursery, was a symptomless excreter. Enquiries at the Nursery subsequently revealed two more positive cases. All children and staff at the Nursery were tested and, apart from the three cases mentioned above all were negative. The mother of one child was found to be a Nursing Auxiliary at a local hospital. The three cases were cleared within a month. The Nursery was kept under supervision by a Senior Medical Officer during the course of the investigation.

Late in May notification was received from the local Public Health Laboratory of a case of sonné dysentery in a child living in premises which are Part III accommodation owned by the Borough. On investigation the whole family was found to be infected and the father, who worked as a food handler in another Borough, was excluded from work. Four other cases, in three families, were subsequently discovered, but the last case was cleared by the end of June. The premises were visited frequently during the outbreak by members of the Health Department staff.

In the last week in May several children at a primary school were reported as suffering from diarrhoea, but on investigation were found to be negative. The school was, however, kept under observation and tests were made on fresh cases which occurred, with the result that between 18th June and 7th July, nine positive cases of sonné dysentery came to light. The nine cases were in five families and, of these, two were in adjacent houses. Two teachers and a meals supervisor had

symptoms but were negative. The school was visited by a Senior Medical Officer, who found the standard of hygiene satisfactory. All cases were cleared by the end of June except for one family, which continued positive until July.

Apart from these outbreaks, individual notifications of dysentery resulted in the investigation of 181 families involving 396 people all of whom were tested. Of these 97 positive cases of dysentery were found in 36 families, all others being negative. It is routine investigation of this kind that keeps dysentery under control in this country.

Meningitis

There were three deaths from meningitis. The first was a 15 year old schoolboy who died from staphylococcal meningitis after a brief illness—and before a doctor had been called.

The second case was a one year old boy and again the cause of death was staphylococcal meningitis and the illness was brief, less than 24 hours.

The third case was a 21 year old man who died in hospital after two days' illness. The cause of death was given as meningococcal meningitis.

In all three cases contacts were tested and kept under surveillance and prophylactic treatment given to any considered to be at risk. All results were negative. There was no apparent connection between the cases, which were in different parts of the Borough.

Four other cases of meningitis and three contacts were also investigated during the year.

Poliomyelitis

One case, with some paralysis of one leg, occurred during the year in a schoolgirl aged eight years, who had not been immunised, as her parents had not accepted immunisation. There was a delay of seven weeks before a doctor was called in. All the immediate family contacts were immunised and school children in the family were excluded from school for the necessary period. Contacts were widespread as the illness occurred over the Christmas holiday when relations were visiting. The patient's school was visited, preventive measures were arranged and advice on hygiene was given. It was thought to be too late for general immunisation of pupils, 76% of whom were, in any case, already immunised. Although no organisms were isolated from specimens, probably because of the delay in seeking medical advice, it was considered by the various doctors in contact with the case that the clinical symptoms clearly indicated poliomyelitis. The Chief Medical Officer of the Department of Health and Social Security was informed and he in turn notified the World Health Organisation.

Smallpox

Twenty-three persons arriving from abroad without a valid certificate of vaccination, and three persons who were flight contacts of a suspected case of smallpox, were kept under surveillance for the nec-

essary period. One case of suspected smallpox in a resident in the Borough was also investigated at the request of the family doctor, but proved to be negative.

Streptococcal Infections

In mid-May a notification of meningitis was received in respect of a child attending one of the Borough's Special Schools. Investigation revealed that a number of children at the school had sore throats and laboratory tests showed the infection to be due to haemolytic streptococcus. The children were excluded while they were under treatment and for 48 hours after treatment ended. No new cases occurred.

Late in August a maternity patient at a local hospital was found to be infected with haemolytic streptococcus, Lancefield Group A. Three other patients and six staff were also found to be infected. The infected patients were isolated and kept under the care of the infected staff to prevent further spread of infection. Two of the Borough's midwives and two pupils were involved, but test results in their case were negative.

Tuberculosis

In September a worker in a playgroup was found to be suffering from active pulmonary tuberculosis. There was a thorough and complete investigation of the staff, children and contacts and all the children and some adults connected with the playgroup were tested. All results were negative and no new cases have so far come to light.

Typhoid and Paratyphoid

There were no notified cases in 1971. Five suspected cases of typhoid and four of paratyphoid were investigated, all with negative results. The laboratory assistant who had typhoid in 1970 was finally cleared in December, 1971.

Minor outbreaks

In late April and early May there were minor outbreaks of illness at three Primary, one Middle and two High Schools. In four, the symptoms were sore throats, temperature, headache and runny eyes, and in the other two schools, sickness. Specimens were sent for virological as well as bacteriological examination, but all results were negative.

Food Poisoning

During the year there were three minor outbreaks of food poisoning. In the first, 15 people became ill after a meal, in a private house, prepared from chicken. The illness was of short duration and not severe. Although salmonella virchow was isolated from a chicken carcase, tests on the people affected all gave negative results. The infection was thought to have been brought about by the too slow cooling and subsequent re-heating of the chicken.

The second outbreak, involved four residents at a Mother and Baby Home in the Borough. In this case *clostridium welchii* was isolated from the patients' specimens and the illness was attributed to a meal of shepherd's pie, which was allowed to cool too slowly and was insufficiently re-heated. The illness was short-lived.

The third case concerned four members of the staff of a local hospital who became ill after a meal at a local restaurant. Prawn cocktail was the suspected food, but unfortunately none was available for testing. *Clostridium welchii* was found in one patient, but tests on the restaurant staff all gave negative results. In this outbreak the illness was more severe and lasted a week in two cases.

In addition to these outbreaks there were 18 individual cases, as listed below, involving 46 persons. Four of these were contracted abroad.

Salmonella agona	...	2
Salmonella brandenburg	...	1
Salmonella enteritidis	...	2
Salmonella montevideo	...	1
Salmonella oranienberg	...	1
Salmonella panama	...	1
Salmonella saint paul	...	3
Salmonella typhimurium	...	6
Salmonella group B	...	1

Twenty-four suspected cases involving 38 persons were also investigated, all proving negative.

TUBERCULOSIS

Chest Clinics

There are two chest clinics serving the Borough. Both 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. At the end of the year the case load of Tuberculosis Health Visitors was as follows:—

Cases of tuberculosis	...	...	483
Cases of lung cancer	...	...	87
Other chest cases (bronchitis, bronchiectasis, etc.)	...	...	68

The new cases examined at the Chest Clinics in 1971 are analysed in the table below:—

	Respiratory		Non-Respiratory		Total
	M	F	M	F	
Diagnosed Tuberculous	5	3	—	—	8
Non Tuberculous	352	227	—	—	579

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 266.

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

Visits in connection with old cases	...	516
Visits in connection with new cases	...	27
Visits in connection with contacts	...	47
Total	...	590

B.C.G. Vaccination

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

Number of children skin tested	...	3,139
Number found negative	...	3,032
Number vaccinated with B.C.G.	...	2,996

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

Seventy-five 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:—

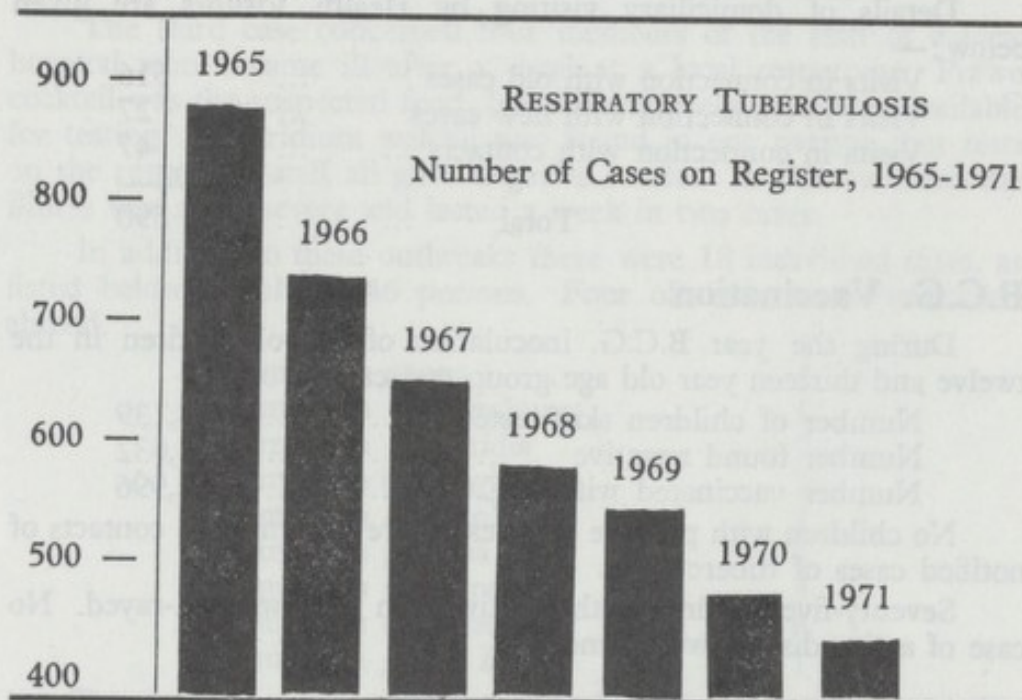
	Males.	Females.	Total.
Respiratory	10	10	20
Non-respiratory	6	1	7

These are the lowest figures ever recorded in the Borough, and show a decrease of 30% on 1970.

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 1.1.71	277	195	30	37	472	67
Primary Notifications in 1971 ...	10	10	6	1	20	7
Inward transfers in 1971 ...	9	7	—	—	16	—
Totals	296	212	36	38	508	74
Died during 1971 ...	13	—	—	1	13	1
Recovered during 1971 ...	19	10	—	5	29	5
Transferred out in 1971 ...	11	6	1	—	17	1
Total cases removed from Register	43	16	1	6	59	7
No. of cases on Register 31.12.71	253	196	35	32	449	67

The decrease in the number of notifications of respiratory tuberculosis each year, in conjunction with the successful use of anti-tuberculous drugs, has resulted in a marked decline in the number of cases on the tuberculosis register. The accompanying table shows the decline since 1965:—



One hundred and fifty-three contacts were examined for the first time during the year and one was found to be tuberculous. No 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	
		Males	Females	Males	Females
General Practitioner Service	1,485	—	1	10	1
Public and Industrial Sessions	5,666	—	1	2	2
Totals	7,151	—	2	12	3

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 three deaths from respiratory tuberculosis and its late effects during the year. The table of causes of death on page 16 gives an analysis by age and sex.

The death rates per 1,000 population were 0.02 respiratory and 0.006 non-respiratory, compared with 0.02 and 0.004 respectively for England and Wales. The comparable figures for the Borough for 1970 were 0.04 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, tetanus and rubella:—

Disease against which protection given	Number of primary courses given						Total
	Year of Birth					Others under 16 years	
	1971	1970	1969	1968	1964/67		
Diphtheria ...	40	1428	379	55	53	25	1980
Whooping Cough...	40	1423	375	53	35	10	1936
Poliomyelitis (Oral)	38	1441	369	59	43	33	1983
Tetanus	40	1428	380	55	53	56	2012
Measles	8	702	521	209	249	35	1724
Rubella	—	—	—	—	—	829	829

Below are given the percentages of children, born in 1969, who had been given protection against whooping cough, diphtheria and poliomyelitis by the end of 1971. The figure in brackets is the corresponding percentage for England and Wales:—

Whooping cough ...	79 (78)
Diphtheria ...	80 (80)
Poliomyelitis ...	77 (80)

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 ...	2,376
Whooping cough ...	437
Poliomyelitis ...	2,465
Tetanus ...	2,502

Poliomyelitis

At the end of the year, 93,309 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 1943-70	...	65,222
Persons born 1933-42	...	15,791
Others	... ..	12,296
Total ...		93,309

Smallpox

From 28th July, 1971, on the advice of the Department of Health and Social Security, vaccination against smallpox was deleted from the schedule of recommended routine procedures in early childhood.

SEXUALLY-TRANSMITTED 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 1971:—

Clinic	Number of new cases seen during year					
	Total all conditions	Syphilis		Gono- rrhea	Other Genital Infections	Other Conditions
		Primary & Secondary	Other			
Croydon General Hospital	25	—	—	3	19	3
Dreadnought Seamen's Hospital	1	—	—	—	—	1
London Hospital ...	16	—	—	—	10	6
Middlesex Hospital ...	107	—	2	8	60	37
St. Bartholmew's Hospital	34	—	—	1	25	8
St. Helier Hospital ...	580	1	5	63	350	161
St. Thomas's Hospital ...	138	—	1	12	90	35
Westminster Hospital ...	25	—	—	1	12	12
Totals ...	926	1	8	88	566	263

There was an increase in the numbers of new cases of conditions other than syphilis and gonorrhoea from 499 in 1970 to 829 in 1971.

GENERAL MEDICAL SERVICES

During 1971, the system introduced from 1st August, 1970, whereby all new staff are required to complete a medical questionnaire, was continued. The replies assist in deciding whether a medical examination is necessary.

From 1st January, 1971, to 31st December, 1971, 1,121 questionnaires were received and 314 medical examinations were subsequently conducted, 807 staff being accepted following completion and scrutiny of the questionnaire only. The quicker medical clearance of newly appointed staff is being achieved as intended.

There were 259 medical examinations of teachers and teacher trainees and, in all, 598 staff medical examinations were conducted compared with 980 in 1970 (all staff were medically examined 1st January, 1970 - 31st July, 1970).

In 13 cases the examinees were found unfit either to commence or return to work and 25 examinations concerned staff absent from duty owing to sickness, to determine their fitness or otherwise to return.

A total of 1,405 staff were dealt with, compared with 1,302 in 1970.

NATIONAL ASSISTANCE ACTS

The Medical Officer of Health and his Deputy, are authorised by the Council to act under Section 47 of the National Assistance Act, 1948, or, in conjunction with a general practitioner under Section 1 of the National Assistance (Amendment) Act, 1951, in connection with the removal to hospital or other suitable accommodation of persons suffering from grave chronic disease, or persons who are aged and infirm and living in insanitary conditions, and who are not receiving proper care and attention.

No cases were dealt with during the year.

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	66	70	—	1	66	71	1075	990	3	14	1078	1004	1141	1060	3	15	1144	1075
Births occurring outside Merton attributable to Merton (Inward Transfers)	—	—	—	—	—	—	754	654	8	3	762	657	754	654	8	3	762	657
Total of all births notified	66	70	—	1	66	71	1829	1644	11	17	1840	1661	1895	1714	11	18	1906	1732
Births occurring in Merton attributable to other Authorities (Outward Transfers)	—	2	—	—	—	2	599	533	3	5	602	538	599	535	3	5	602	540
Total births attributable to Merton	66	68	—	1	66	69	1230	1111	8	12	1238	1123	1296	1179	8	13	1304	1192

PERSONAL HEALTH SERVICES

MATERNAL AND CHILD-CARE

General

Screening for phenylketonuria by the Guthrie Blood Test method is 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.

The two maternity units in the Borough take blood specimens from all babies present in the unit on the sixth day.

Our domiciliary midwives took 692 specimens during the year, 33 of which were repeat samples where the first reading showed a slightly raised phenylalanine level. One case proved to be positive and the health visitor concerned takes a weekly Guthrie test to check the phenylalanine level.

Observation and Handicap Register

The work, begun at the end of 1970, on a revision of the Observation and Handicap Register has continued during the year.

Child Health Centres

In September, 1971, two of the busiest Child Health Centres started to hold one session a month of Special Developmental examinations of babies at about 7 to 8 months old. These are done by Departmental Medical Officers with the assistance of health visitors for some of the screening procedures. This has helped both to provide a more thorough examination for this age group and also to relieve the pressure of work on the medical officers at their normal clinic sessions. It is hoped that it may be possible to increase the number of special sessions in the future.

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 examinations are also carried out at these sessions.

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

In view of a decline in the numbers attending ante-natal clinics the sessions held are now for ante-natal and cytology.

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 ... 139

Number of women who attended for post-natal examination ... 29

There were 295 midwives' clinic sessions at which 172 women attended. The total number of attendances was 1,091.

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 ... 399

Booked for domiciliary confinement ... 8

Total ... 407

The total number of attendances was 2,196.

Premature Infants

The total number of premature infants born in the area during 1971 was 128 compared with 152 in 1970.

Thirteen premature infants died in 1971. This means that 10.1 % of the 128 premature infants born during the year died within a year as compared with 0.9 % 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.	—	—	—	—	—	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	2	—	2	1	—	—	3
Totals	2	—	2	1	—	—	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 eight group practices of general practitioners who hold child health sessions 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 1966-71	
		1971	1970	1966-69		
Amity Grove ...	100	236	196	360	792	3,839
Cavendish Road	100	179	270	212	661	4,207
Church Road ...	104	215	234	157	606	3,705
Churchill Hall ...	51	100	16	28	144	2,469
Emmanuel Hall	51	81	46	104	231	1,328
Grand Drive ...	146	235	127	76	438	5,725
Longley Road ...	51	194	238	261	693	3,728
Meopham Road	52	81	60	139	280	1,946
Middleton Road	102	114	118	91	323	3,606
Morden Road ...	100	104	132	46	282	2,603
Pelham Road ...	25	64	256	154	474	1,131
Russell Road ...	77	196	19	42	257	3,217
St. John's Hall ...	52	76	115	136	327	1,451
St. Luke's Hall...	52	55	61	31	147	1,616
Wide Way ...	100	193	232	325	750	4,699
Totals ...	1,163	2,123	2,120	2,162	6,405	45,270

A total of 6,405 children attended during the year.

Attendances at Toddlers' Clinics

First attendances				Total attendances	Total sessions (All clinics)
Born In			Total 1966-71		
1971	1970	1966-69			
—	33	1618	1651	2392	281

Dental Care

There was a slight increase in the numbers of expectant and nursing mothers treated and a fall in the numbers of pre-school children treated, compared with 1970.

The dental health education carried out by health visitors and other staff at ante-natal clinics has contributed greatly to the fact that the number of three and four year old infants inspected in the Borough is 70% above the national average.

	Examined	Commenced treatment	Completed course of treatment
Expectant and Nursing Mothers ...	39	35	39
Children under 5 ...	678	322	291

	Scaling and gum treatment	Fillings	Teeth otherwise conserved	Extractions	General anaesthetics	Dentures		X-Rays
						Full	Part	
Expectant and Nursing Mothers	36	113	—	30	2	—	6	4
Children under 5 ...	60	730	30	36	16	—	—	3

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.

Twenty sessions were held during the year at which 21 children were seen for the first time and 60 children were seen for a subsequent case review.

Congenital Malformations

The following malformations were notified during the year:—

Central Nervous System	...	14
Eye and Ear	... ..	2
Alimentary System	... ..	3
Heart and Circulatory System...		1
Urino-Genital System	... ..	7
Limbs	... ..	21
Other Malformations	... ..	4
Respiratory System	... ..	2
Total		54

Welfare Foods and Vitamins

National Dried Milk and vitamins were available at all Child Health Centres and also at Russell Road Clinic and the W.R.V.S. Centres in Merton and Mitcham.

Sales for the year 1971 are shown below:—

National Dried Milk	...	14,057 tins
Cod Liver Oil	...	3,000 bottles
Vitamins 'A' and 'D' Tablets	...	3,133 packets
Vitamins 'A' and 'D' Drops	...	3,607 bottles
Orange Juice	...	66,337 bottles

PUBLIC HEALTH NURSING AND ALLIED SERVICES

General

A Nursing Management Structure in accordance with the principles of the Mayston Report was fully in operation during 1971. All senior nursing staff in first-line, middle and top management had completed an approved course in management by the end of the year. Mrs. A. Poole, Chief Nursing Officer, was awarded a Scholarship by the London Boroughs Association to attend a Senior Management Course of eight weeks' duration, at the King's Fund College of Hospital Management.

Throughout the year, the demands for the services of all the Department's nursing staff have grown. This was particularly evident in the field of home nursing where visits paid increased by 11,086. Great emphasis is placed today on caring for as many patients as possible within the community. Many patients discharged to the community nursing services frequently require considerable attention by nursing staff by day and often by night. The need for a night nursing service is one that is made later in this Report. The urgent need for such a service cannot be stressed too much.

The planned programme of attachment of local authority nursing staff to general practitioners has continued. Patients, general practitioners and nursing staff find these attachments of great benefit. An attachment does, however, bring additional work to both health visitor and nurse. She spends longer periods in travelling, and more time is spent in care discussions with other members of the team. Many general practitioners have patients in one or more Boroughs other than Merton. Naturally when a general practitioner has staff attached to him he wishes them to attend all patients, irrespective of their address. Preliminary discussions have taken place with neighbouring authorities concerning reciprocal visiting by nursing staff across authority boundaries. This does, however, require careful planning by senior nursing staff, not only to ensure that the work load is a satisfactory one, but that the facilities of the other area are known to a nurse who operates outside the area of the authority which employs her. Every authority has its own system of organising its services; its forms are sometimes different, the statistics it requires may be different. All these are factors that can cause considerable frustration to a member of staff anxious to do her best for the patient she is trying to serve.

With the prospect of an integrated health service drawing nearer, every effort has been made to foster good relationships with the hospitals that serve the Borough. Trained staff as well as students have visited the community from both St. George's Hospital and St. Helier Hospital. Senior nursing staff at all levels have met to discuss continuing patient care, and health visitors and nurses have visited wards and departments in the hospitals and are present at some out-patient sessions.

It is the aim of all staff that, whatever form the reorganisation of the National Health Service may take, the service to the public shall not suffer.

HEALTH VISITING

Staff

As at 31st December, 1971, the staff consisted of:—

- 1 Principal Nursing Officer.
- 3 Nursing Officers.
- 23 Full-time Health Visitors.
- 7 Part-time Health Visitors.
- 1 Full-time specialist geriatric Health Visitor.
- 1 Full-time specialist Chest Diseases Health Visitor.
- 8 Part-time Clinic/School Nurses.
- 3 Full-time Clinic Aides.
- 4 Health Visitor Students.

Staff Changes

Eight Health Visitors left during 1971 for the following reasons:

Moved from area	...	...	3
Pregnancy	...	...	1
To travel	...	...	1
To undertake teacher training	...	...	1
To take up teaching post	...	...	1
Retired	...	...	1

One Clinic Aide left to take up part-time employment.

Four students sponsored by the Borough in 1970/71 were successful in their examinations and joined the Health Visiting staff in September, 1971.

Introduction

The volume of work undertaken by health visitors has grown tremendously throughout the year. A considerable proportion of this increase has been as a result of the attachment of further staff to general practitioners. Requests are received for visits to be paid to all sections of the community—young, old, middle-aged and adolescent—indeed to any person, where the prevention of ill health, or the promotion of good health is required. With an increasing number of people at work many visits have to be paid in the evening.

The number of child health and immunisation sessions run by general practitioners, at which health visitors were present, increased this year by 190.

In April, 1971, responsibility for the supervision of child minders and playgroups passed to Social Service Departments. The health visitors continue to visit to advise on all health matters, including the control of infectious diseases.

One health visitor attends the paediatric consultant clinic at St. Helier Hospital and another attends a paediatric clinic and case discussions with the consultant in infectious diseases at St. George's Hospital, Tooting. These links with the hospital services are very valuable and ensure continuity of care and advice between hospital and community services.

General Practitioner Attachments

At the end of the year arrangements had been completed for the attachment of staff to 69 general practitioners within 24 practices.

Training of Health Visitor Students

Four health visitor students were sponsored for training in 1971. Two are undertaking their course at Croydon Technical College and two at Chiswick Polytechnic. If successful they will join the health visiting staff in September, 1972.

Eight health visitor students received their practical training in the Borough during the year, and the four students sponsored by Merton, together with another student released by her sponsoring authority, undertook their period of supervised practice.

Post Registration Training

Management courses were completed by three nursing officers.

Three health visitors attended post-certificate refresher courses, and a number of other health visitors attended professional study days.

Ten staff were given in-service training on screening infants for possible deafness. This test is conducted on all infants at about the age of seven months.

Geriatric Health Visiting

The specialist geriatric health visitor is an important member of the geriatric team led by the Consultant Geriatrician. She plays an important role in acting as a liaison between the hospital, general practitioner and local authority services. In the latter part of the year a second health visitor joined the staff, but unfortunately, for domestic reasons, left after a short time.

Health Education

The demands for health education in High and Middle Schools by health visitors continues to increase. In 1970 there were 101 teaching sessions undertaken, and the full demand could not be met. In 1971 there were 150 sessions held and still the requests received exceeded staff availability. These sessions require much time devoted to them not only in their giving, but in the preparation and collection of teaching material and visual aids that will stimulate and maintain the interest of this age group.

The attendances at preparation for childbirth classes remain high and the evening parentcraft classes continue to be very popular. Here both husband and wife can, together, receive guidance and reassurance about their future roles as parents.

Visiting Hospital Staff

The number of visitors to the Department from hospitals continues to rise, imposing a considerable additional burden on already busy members of staff. It is, however, essential that trainee staff in

hospitals are aware of the services within the community for their patients, and also of the role of their community nurse colleagues.

For nurses in training community experience is an essential part in learning to care for a patient as a member of a family and a part of the community in which he lives.

Number of days on which training visits, or visits of observation, were made—451.

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:—

To children under 5 yrs				To families with problems	To the mentally ill	To the mentally handicapped	To geriatric cases	No. of families visited
Born in 1971	Born in 1970	Born 1966-69	Total					
2,562	2,406	7,537	12,505	392	27	30	1,194	9,841

Sessions attended by Health Visitors.

Local Authority Ante-Natal Clinics ...	9
General Practitioner ...	127
Developmental (Morden Road) ...	34
Special Development (7 to 8 months) at Russell Road and Cavendish Road	25
Child Health Centres ...	1,762
G.P. Child Health and Immunisation Clinics ...	498
Toddler Clinics ...	301
G.P. Toddler Clinics ...	48
Parentcraft (Day) ...	53
Parentcraft (Evening) ...	54
Expectant Parents' Evenings ...	42
Geriatric Clinics ...	174
Case Conferences ...	15
Screening Tests of Hearing of Young Children ...	228
Sessions with students ...	870
Meetings ...	478
Mothercraft ...	298

Sessions attended by State Registered Nurses.

Ante-Natal and Cytology ...	296
Vaccination and Immunisation ...	137
Developmental (Morden Road) ...	24
Child Health Centres ...	384
Cystic Fibrosis ...	72
Staff Medicals ...	148

MIDWIFERY

Staff

As at 31st December, 1971, the staff consisted of:—

- 1 Principal Nursing Officer (Home Nursing and Midwifery) who is also Non-Medical Supervisor of Midwives.
- 1 Senior Nursing Officer, who is also qualified to act as Non-Medical Supervisor of Midwives.
- 7 Whole-time District Midwives.
- 2 District Nurse/Midwives.

Staff Changes

One District Nurse/Midwife left to undertake full midwifery duties.

Introductory

The number of home confinements has, as expected and in common with most other parts of the country, continued to decline (135 compared with 169 in 1970). The number of early discharges of patients from hospital to the care of the domiciliary midwives continues to increase. All these patients in addition to receiving nursing care after delivery, are visited at home, as early as possible in their pregnancy to ensure that they have the adequate facilities and help necessary to be discharged early. This visit also gives the mother an opportunity to meet the midwife, who will be caring for her, and to discuss, in the relaxed atmosphere of her home, any anxieties that she may have.

The 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. 692 tests were made during the year and 33 repeat tests were made. (These figures compared with those of 1970 show an increase of 87 initial tests and 12 repeat tests.)

The number of patients delivered by the domiciliary midwives and their students in the Nelson and St. Helier Hospitals continues to increase. These patients are discharged home as soon as possible after delivery, thereby giving them all the facilities of a hospital for the actual birth, with a minimum period of separation from their families.

Thirty-nine patients were delivered at the Nelson Hospital and five at St. Helier by midwives. Every facility is offered to the domiciliary midwives by the staff in the obstetric visits at St. Helier and the Nelson Hospitals. The ready co-operation of these hospitals is greatly appreciated.

Organisation

- 2 midwives are housed at 28/30 Kings Road, Wimbledon.
 - 1 at 'The Croft', Mitcham.
 - 1 in a flat rented from the Borough Council.
- and the remainder in their own homes.

Two district nurse/midwives relieve the full-time midwives during holidays, refresher courses, sickness, etc. All midwives are motorists using either their own car or one supplied by the Authority.

Maternity Cases Attended

There were 135 domiciliary confinements reported and 2,361 hospital confinements during the year. This shows a reduction of 34 on the figure for 1970. Midwives employed by this Authority attended all home confinements, a doctor having been booked in all but one of the 135 cases.

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—113

Trilene—11

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 129 domiciliary cases where a doctor was already booked for the confinement.

The Emergency Obstetric Unit

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

- 1 breech presentation.
- 1 delay in second stage.
- 1 baby white asphyxia.
- 1 undiagnosed twins.

Early Discharges from Maternity Hospitals

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

48 hours after confinement	...	...	487
Other discharges before the tenth day	...	...	144

Patients delivered by domiciliary midwives	
in hospital	44
Total ...	675

This shows an increase of 68 on those for 1970.

Midwifery Training

During the year 20 student midwives from the Nelson Hospital completed their domiciliary training. There were a further five in training at the end of the year. Eight midwives are approved by the Central Midwives' Board as district midwifery teachers for the practical training of student midwives. St. Helier Hospital hope to commence an Integrated Midwifery training for student midwives in 1971 and senior staff of both hospital and local authority have had discussions on its implementation.

Eight student nurses from St. Helier and fourteen from Charing Cross Hospital who are undertaking an approved obstetric course spent a day with the midwives and health visitors observing some of the services that are provided by the local authority in caring for mothers and children.

Post-Registration Courses

Three midwives attended statutory refresher courses and one attended a teaching course on 'Preparation for Parenthood'.

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	1,862
Post-natal visits to home confinements	2,773
Post-natal visits to 48-hour and other early discharges from hospital	4,841
Total	9,476

Attendances at Clinics

Two hundred and ninety-five Ante-Natal Clinic sessions were held by midwives during the year and 172 women attended these clinics for the first time.

The total number of attendances at Midwives' Ante-Natal Clinics was 1,091.

Transfers to Hospital

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

(a) during pregnancy	32
(b) during labour	6

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

HOME NURSING

Introduction

The amount of work undertaken by the home nurses continues to grow at an almost overwhelming rate. 108,442 visits were paid during 1971, an increase of 11,876 on those of 1970. More patients are being referred for nursing care with the most significant increase this year being in the age groups under five years and 65 years and over. As the percentage of people aged 65 years and over increases, more patients are requiring nursing care more often and for longer periods of time. It is evident that a considerable number of patients require nursing care late at night, or during the night. At present those patients who require urgent care during the evening are attended to by staff working split shifts; but with the increased volume of work, its type, and the time many visits take, the small increase in establishment obtained has not been adequate to meet this demand.

The organisational problems of providing adequate staff, who work a five-day week, to meet day and evening demands of patients for seven days a week is a tremendous one. Problems become doubled during periods of staff sickness and annual leave. It is obvious that this Authority requires a night nursing service as a matter of urgency.

The work undertaken by the nursing auxiliaries continues to grow, and it is of immense value. They are, indeed, very important members of the health care team. During 1971 they paid 11,086 visits, an increase compared with 1970, of 3,519. They work under the supervision of the trained home nurse, bathing, dressing, getting up and putting to bed elderly patients who do not require skilled nursing care.

The trained nurse, however, still paid 5,495 visits that could have been undertaken by an auxiliary. The number of visits of this type increased by a total of 2,000 during 1971 and this again shows the demands made on the service by the large number of elderly people in the Borough who are unable to give adequate care to themselves.

Staff

At 31st December, 1971, the staff consisted of:—

- 1 Principal Nursing Officer (Home Nursing and Midwifery) who also acts as Non-Medical Supervisor of Midwives.
- 1 Senior Nursing Officer.
- 3 Nursing Officers.
- 21 Whole-time home nurses (female)—S.R.N. and District Trained.
- 7 Whole-time home nurses (female)—S.R.N. (not District Trained).
- 3 Whole-time home nurses (male)—S.R.N. and District Trained).
- 2 Part-time home nurses.
- 2 Whole-time home nurses (female) S.E.N. and District Trained.
- 3 Whole-time home nurses (female) S.E.N. not District Trained.
- 13 Part-time nursing auxiliaries (female).

Staff Changes

Eight nurses left during 1971 for the following reasons:—

To work overseas	...	...	...	2
To work nearer home following a change in address	...	...	...	1
Due to sickness	...	...	...	2
Marriage	...	...	...	1
Pregnancy	...	...	...	1
To work in hospital (later returned to district nursing)	...	...	...	1

Four nursing auxiliaries left during 1971 for the following reasons:—

To resume nurse training	...	...	...	1
To work in hospital	...	...	...	2
Left district	...	...	...	1

Training of District Nurses

This Authority continued to be an approved training area for the practical part of the District Nurse training leading to the National Certificate of District Nurse Training.

Three State Registered Nurses and two State Enrolled Nurses successfully completed their training. All are still employed by this Authority.

Visiting Hospital Staff

Nurses from many hospitals, trained and in training, have visited the Department throughout the year.

Our staff are pleased to welcome trained hospital staff in order to give them an opportunity of seeing what facilities there are available for their patients' continuing care, and also to see how their nurse colleagues in the community work. For nurses in training, community experience is an essential part in learning to care for a patient as a member of a family and part of the community in which he lives.

Number of days on which training visits, or visits of observation were made—248.

General Practitioner Attachments

At the end of the year arrangements had been completed for the attachments of staff to 65 doctors within 23 practices. Nursing staff, general practitioners and patients appreciate this close working relationship.

Some nursing staff have carried out nursing procedures within the doctors' surgeries. There have been numerous requests for an expansion of this work, but with existing staff trying to meet increasing demands previously mentioned, it has not been possible to agree to this.

Most of the treatment that has been undertaken in the surgery has been on patients who would have otherwise have required a domiciliary visit by the nurse.

Number of patients seen by the nurse in surgeries—470.

Treatments given—

Dressings	...	...	111
Ear syringing	...	...	114
Injections	...	...	423
Blood samples taken	...	...	17
Totals	...	...	665

Post-Registration Courses

First line Management Courses were completed by three Nursing Officers. Five staff attended practical work instructors' courses, and two attended general refresher courses. Thirteen staff attended day courses on various subjects, in order to maintain and improve technical skills and theoretical knowledge.

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 1.1.71	Cases added	Cases removed	Cases on books at end of year
0-4 years	2	5	7	—
5-64 years	169	767	761	175
65 years and over ...	781	1,471	1,386	866
Totals	952	2,243	2,154	1,041

The total number of cases attended during the year was 3,195 and the total number of visits made was 108,442.

Marie Curie Foundation Cancer Nursing Service

This Authority acts as agents for the Marie Curie Memorial Foundation who bear the initial costs of the Day and Night Cancer Nursing Service supplied locally to any cancer patient being nursed at home and in need of additional care, especially night attendance. The Authority reimburses the Foundation with one-third of the annual expenditure on this service. The service is staffed by qualified nursing staff and unqualified staff, the appropriate person being sent to each case as necessary. The service is run through the Home Nursing Service. Twenty-seven patients were nursed during 1971, receiving

a total of 86 visits. 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 it is desired that the patient shall remain at home until the end.

The Authority also operates 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 and Appliances

Pads and appliances are supplied to patients free of charge at the request of either the home nurse in attendance, the patient, the general practitioner or the health visitor. With the increase in the number of elderly and handicapped persons being cared for at home the demands continue to rise.

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 home nurse advises this. It is a growing and much appreciated service.

Age group	Cases at books at 1.1.77	Cases at books at 31.12.77
0-4 years	1	1
5-14 years	1	1
15-64 years	1	1
65 years and over	1	1
Total	4	4

The total number of cases attended during the year was 3,195 and the total number of visits made was 108,442.

Marie Curie Foundation Cancer Nursing Service

This Authority acts as agent for the Marie Curie Memorial Foundation who bear the initial costs of the Day and Night Cancer Nursing Service supplied locally to any cancer patient being nursed at home and in need of additional care, especially night attendance. The Authority reimburses the Foundation with one-third of the annual expenditure on this service. This service is called 'Qualified visiting and unqualified' and the unqualified service being sent to visit cases as necessary. This service is run through the Home Nursing Service. Twenty-seven patients were nursed during 1971, including

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:—

‘The demand for new appointments continued during the year and, in spite of increased sessions, there is still rather a long waiting list. A growing proportion of patients are referred by their own doctors, the rest come on their own initiative.

‘At the clinic examination, general and psychological needs are assessed, and appointments with the Health Visitor are made accordingly. Special attention is given to the socially isolated, the bereaved, and the recently retired.

‘Our main efforts are directed to preventing people from getting old before their time and we try to do everything possible to make ageing a maturing rather than a disintegrating process.

‘The clinical examination is repeated annually and patients express appreciation of the chance to discuss questions they would consider too trivial to bother their doctors about. This is possibly why the examination seems to have a therapeutic effect in itself.

‘If medical or surgical treatment is required patients go to their own doctor, but we do try to treat known health hazards such as smoking addiction and obesity.

‘The examination includes four screening tests which in our present state of knowledge appear to have some value. These are cervical cytology, measurement of intraocular tension, blood and urine sugar estimation and haematological examination.

‘This clinic has the same mixture of detection and prevention of disease, health education and the promotion of well being with which we are familiar in conventional child health centres. Perhaps in a modified form this may become the acceptable way of caring for the older person in the general practice team of the future.’

Attendances were:—

Number of new patients seen in 1971 ...	Male	22
	Female	68
Number of re-attendances in 1971 ...	Male	227
	Female	460
Average age of new patients ...		64

Dr. W. B. James makes the following observations on the Middleton Road Clinic:—

‘The clinic appears to have given a sense of satisfaction and moral well-being for those who got assurance of being well and healthy. A number of patients were referred to their family doctors for anaemia and others were advised and given general supportive advice. Many expressed their appreciation of the examination and re assurance gained.’

Attendances were:—

Number of new patients seen in 1971	...	Male	18
		Female	30
Number of re-attendances in 1971	...	Male	32
		Female	87
Average age of new patients	... ..		65

HEALTH EDUCATION

General

The greatest problem in health education still appears to be the lack of understanding which continues to exist regarding the importance of this subject. Instead of health education being regarded as an essential part of the operation of health services it is often regrettably considered to be a luxury to be indulged in if time and money will allow, rather than being recognised as the basic education for a far healthier and happier way of life.

Despite this comment, a considerable amount has been achieved by the Health Education staff during the past year.

Health Education in Clinics

As is customary in many places, a topical theme is universally displayed and discussed with parents, etc., by clinic staff throughout the Borough. The subject is usually changed every month. The Health Education Officer normally devises a plan for the year and distributes appropriate material, e.g., posters, leaflets, together with other visual aids, to all clinics. The subjects cover a wide range including Dental Health, Protection from Summer and/or Winter Hazards, Immunisation and protection from diseases, Sexually Transmitted Diseases and their prevention, Clean Air, Food Hygiene, Mental Health, Cervical Cytology, Home Safety, Anti-Smoking, Safety from Fireworks, etc.

Parentcraft

The number of couples attending these classes illustrates clearly the desire the younger generation of both sexes has to learn whatever they can to give them both a better understanding of childbirth and of each other to enable them to become better parents. The Health Education staff organises the programmes, which are carried out by various speakers including a general practitioner, health visitors and midwives.

Health Education in Schools

Health education teaching has been carried out by the Health Education Officer, very ably assisted by health visitors and medical officers, in six High Schools, one Middle School and one Special School. Very valuable help has been given by Dr. Barrow, a consultant physician from St. Thomas's and St. Helier Hospitals and from outside speakers.

Dental health teaching was performed by the Health Education Officer and a dental auxiliary in 18 Primary Schools.

Many more schools requested visits of this nature but the shortage of staff available for this purpose was the regrettable reason for having to refuse these requests.

Every assistance was given to teachers requiring advice and information to enable them to include aspects of health education in their own teaching programmes and also by the loan of a considerable variety of audio-visual aids. The facilities offered by the Health Education Section have been widely used and seem much appreciated.

Young Wives Groups

These groups meet at clinics in various parts of the Borough, some during the afternoons where play and minding facilities are organised for the children, and others in the evenings. A programme with widely varied interests is arranged for each group by the Health Education staff. These sessions are usually well attended and the benefits derived are quite considerable and as wide as the variety of topics covered, although they may perhaps be less obvious to the undiscerning.

Youth Clubs

The claim on the Health Education Service has increased from Youth Clubs during this past year and the old adage 'They know it all' has been seen to be very wrong. The attendance at one Youth Club doubled on the nights that subjects such as contraception and sexually transmitted diseases were to be discussed and it has since been reported that the attitudes of many of the young people noticeably changed and developed a more responsible note. It may be of interest to know that these sessions were requested by the young people attending the club and were not merely the ideas of the leaders.

There is enormous scope for advancement in this field where people evidently have the desire to learn and are not merely a captive audience.

Several courses in child care were organised by the Health Education Officer and carried out by health visitors. Both bronze and silver awards were obtained by girls taking these courses.

Training

The Health Education Officer, in addition to her other work, carried out lectures at a Teacher Training College and at a Midwife Teacher Training College. It is felt that whilst all aspects of her work are important, teaching these students who are to be responsible for extending the education of the next generation has an importance all its own.

Assisting with the training of student nurses and midwives during the period of their attachment to the community nursing services is another of the Health Education Officer's functions, to which considerable importance should be attached, for among these young women we may hope to find future health education staff. In any

event, they are likely to be in a position to instill good health habits into many people, not least their own families, and to encourage people to discard bad habits which they may have already acquired. Many nurses are unaware of the influence they have over people and we should encourage them to use this influence to benefit as many as possible of those with whom they may come into contact.

Special Activities

(a) A Forum on Drug Dependence was held in February, 1971, to which were invited representatives from all interested bodies, such as Teachers, Youth and Social Workers, Doctors and Pharmacists, J.P.s, the Police, Rotarians and others. The Forum was opened by His Worship the Mayor, Councillor A. Leivers. Dr. Dalzell Ward, as Chairman, introduced the three eminent speakers, Dr. Dale Beckett, Dr. George Birdwood and Dr. Peter Chapple. Many interesting questions and comments came from the floor during the discussion which followed and the evening was considered a success.

(b) The Borough Show. This took place on August Bank Holiday and the Health Department had a stand in one of the marquees. This was organised by Health Education staff in conjunction with Senior Public Health Inspectors. The themes illustrated were those of both personal and environmental health, i.e., 'Poisonous Plants', 'Cervical Cytology and Breast Examination', 'Dental Health', and 'Rats—They Spread Disease'.

The stand was manned throughout the day by various members of staff from the Department. Thanks are extended to members of the Local National Women's Cancer Campaign for their effort and help on that day. It was stated that well over 22,000 people visited the show and a great many of them came to the Department's stand.

(c) The Civic Exhibition. This annual event again took place in October in the Public Hall at Wimbledon. The theme taken was 'Food'—the benefits derived from it and the troubles it can cause, and also the responsibilities of the public health inspector for the food sold in our shops and restaurants.

(d) Mind Week. Unfortunately this coincided with the Civic Exhibition which meant that the Health Education staff were unable to give as much help to the Local Mental Health Association as they would otherwise have done, but help had been extended during the previous months and support was given to the events which took place during that week.

(e) Anti-Smoking Clinic. Another anti-smoking Five-Day Plan Clinic was held in November with the help of Dr. White of the British Temperance Society. The extent of the continued success of this clinic will, no doubt, be established at the Follow-Up Clinic which will be starting in the New Year.

Conclusion

The capacity of this service has this year become stretched to the limit, both in staff and accommodation. Assistance given to schools, local organisations, etc., has been immense but without additional staff,

the ultimate has been reached. It is to be hoped that in the coming year the need for expansion will not only be recognised but will be made possible.

OTHER ALLIED SERVICES

Chiropody Service

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

(a) The Direct Scheme whereby application is made to the Medical Officer of Health and authority is given, to those eligible, to have a fixed number of treatments carried out by any chiropodist on the Council's panel.

(b) The Indirect Scheme whereby treatment is arranged by Voluntary Organisations. A number of old people are taken for treatment by members of these voluntary organisations whose work is greatly appreciated.

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

The number of people receiving treatment under the service is increasing steadily and is likely to continue to do so. In the twelve months ended 31st December, 1971, 1,197 new applications for treatment were received.

The following table gives figures for the Direct Scheme:—

Category	Persons treated in 1971	Number of treatments given	Number on books at 31.12.71
Elderly	4,888	27,469	5,044
Registered Blind or Partially Sighted ...	74	367	70
Physically Handicapped	170	787	159
Expectant Mothers	5	14	—
Totals	5,137	28,637	5,273

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 150 such loans were made this year.

In addition to the ripple beds, a ripple chair pad is now available to those patients who are able to leave their beds. Since, however, the majority of cases using ripple beds are bedridden, the demand for chair pads is very small. Two such loans were made in 1971.

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	91	Cradles	60
Bed rests	103	Crutches	13
Bed pans	111	Feeding cups	1
Bed tables	20	Waterproof sheets	67
Wheelchairs	196	Walking Aids	63
Commodore	210	Urinals	82

Recuperative Holidays

Under Section 22 of the National Health Service Act, 1946, the Authority is empowered to provide a recuperative holiday for expectant and nursing mothers needing it to complete or assist in their recovery to normal health, but who do not need organised medical or nursing care. Recommendation from a Departmental Medical Officer is necessary. Two such holidays were arranged in 1971.

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, 883 new cases were dealt with and 1,437 repeat smears were taken.

From the total of 2,320 smears taken during 1971, 12 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

General

This service has continued to expand during the year, and much publicity has been given to it. Maternity hospitals advise patients before discharge, where this is appropriate, of Family Planning Services available in the area, and close integration of hospital and local health authority Family Planning Services is now the declared objective.

The Authority's service provides free examination, advice, treatment and supplies for all medical cases. For social cases, examination and advice are free to all from 16 years of age (married or unmarried) with patients paying for their supplies. In social cases where patients are unable to afford the cost of supplies these are made available free of charge.

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, 9.30-11.00
Church Road Clinic, Mitcham	Tuesday and Thursday evenings, 6.15-8.00
Russell Road Clinic, Wimbledon	Thursday mornings, 9.30-11.00 Monday, Wednesday, Thursday and Friday evenings, 6.15-8.15.
Wide Way, Mitcham	Monday mornings, 9.30-11.00 Monday evenings, 7.30-8.30

In August arrangements were made to supply a domiciliary service for those unable or unwilling to attend Family Planning Clinics.

By the end of the year, 12 such cases had been referred.

Details of the cases dealt with by the Family Planning Association in this Borough during the year are as follows:—

New patients seen:—

Medical cases	476
Non-medical but needy	13
Other non-medical cases	1,113
	<hr/> 1,602

New patients advised to use:—

Sheath	59
Pill	982
Diaphragm	211
I.U.D.	227
Other cases	123
	<hr/> 1,602

*Total sessions held	718
Total attendances	13,083

* including sessions at hospitals.

Domiciliary Service

Considerable emphasis was placed during the year on the need to expand the Domiciliary Service in those cases where, for various reasons, opportunity cannot be taken of the normal clinic facilities in the area. Midwives, health visitors and social workers were all briefed on the extent of the Domiciliary Service and advised how cases could be referred, through the Health Department, to the Family Planning Association, and by the end of the year a number of cases had been referred. The expansion of the Domiciliary Service will satisfy a very real need.

Geriatric Service

I am indebted to Dr. Peter Millard, the Borough's Consultant Physician in Geriatrics, for the following report on this service:—

'During 1971, 497 elderly people were referred for the first time to the geriatric service. Not all of these were admitted, some being seen as out-patients or on a domiciliary visit only.

'In April of 1971 Woodlands Hospital was closed and a day hospital for 20 patients a day and an in-patient rehabilitation unit of 16 beds was opened at the Cumberland Hospital. The development of the day hospital specifically for Merton patients has helped to maintain the elderly in their own homes. If this unit is to flourish, however, there will have to be an increase in the number of day centre places in the Borough. In the first eight months of operation 107 people attended for a total of 2,288 attendances.

'In October a mixed sex admission ward for 20 patients was opened at the Wimbledon Hospital and this unit now plays a valuable part in the treatment and rehabilitation of the elderly.

'A study of the work carried out in the Department was undertaken during 1971. Over four-fifths of the patients are referred by their general practitioners and two-thirds of the patients are aged 80 and over. Of those admitted a third are discharged within three weeks and the increasing work of the Department is necessitating an increase in domiciliary services.

'The close co-operation that is being developed between the health and social services of the Borough and the hospital service is helping us to maintain a service for the elderly which is enabling them to continue to live in the community.'

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

This is the Seventh 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.

The surroundings in which we live and work have a profound effect on our health and development, and the elimination of unhealthy conditions is the basis of environmental health. Houses that have become dilapidated or overcrowded, or which lack amenities such as proper water supply, bath and satisfactory sanitary accommodation; diseased, unsound, unwholesome and adulterated food; smoke, grit, dust and other air pollutants; bad drainage and waste disposal; unsatisfactory working conditions and excessive noise; rodent and insect infestations—these are some of the conditions the public health inspector is concerned with in his daily work.

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 1971.

‘Daily sampling was carried out from the 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.

‘No houses were permanently supplied by stand-pipe.

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

‘The principal source of supply is the River Thames, and no new sources of supply were instituted and there were no changes in the general scheme of supply in the Merton area.

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

During 1971, samples of water were taken for bacteriological and chemical examination by the Public Health Inspectors as follows:—

Bacteriological—

Swimming Baths	182
----------------	-----	-----	-----	-----	-----

Dwelling houses:—

Metropolitan Water Board	...	...	...	...	1
Sutton District Water Company	...	...	...	...	1
Well water	...	...	...	...	9

Other premises:—

Metropolitan Water Board	...	...	...	...	2
Sutton District Water Company	2
Well water	1

198

Unsatisfactory Results—

Swimming Baths	22
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Chemical—

Swimming Baths	10
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Dwelling houses:—

Metropolitan Water Board	1
Well water	3

Other premises:—

Metropolitan Water Board	2
Sutton District Water Company	...	...	...	...	1
Well water	...	...	...	...	1

18

All 18 of these samples were satisfactory.

During the year one house which obtained its supply of water for domestic purposes from a shallow well, was connected to the Metropolitan Water Board main supply.

The swimming baths mentioned above include installations at certain school premises, and these in the main were satisfactory.

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

Sewerage and Sewage Disposal

I am advised that the arrangements for sewerage and sewage disposal are adequate. There are a number of cesspools in the Borough and arrangements to empty them at intervals are made by the respective owners.

Registered Common Lodging Houses

There are no registered common lodging houses in the Borough.

District Inspection

The following is a summary of the complaints and requests received and visits made during the year 1971:—

Complaints received—

General disrepair and insanitary conditions ...	227
Dampness	259
Overcrowding	8
Defective drainage system	71
Blocked drainage system	1,099
Defective drainage fittings	25
Defective sanitary accommodation	73
Defective service water pipes	92
Absence of, or defective dustbins	5
Accumulation or refuse, etc.	437
Rats and mice	1,883
Pigeons	73
Foxes	12
Insect pests	706
Smoke nuisances	218
Noise	127
Smells and odours	260
Unsound food	325
Water supply	91
Miscellaneous	79
	<hr/>
	6,070
	<hr/>

Visits made—

General.

P.H. Act (Nuisance)	2,764
P.H. Act (Dwelling houses)	2,171
Storage of refuse	185
Drains testing	96
Choked drains	2,408
Other drainage work	828
Radioactivity	53
Child Minders	17
	<hr/>
	8,522

Housing.

Housing Act (Dwelling houses)	...	...	4,532
Overcrowding	...	...	22
Permitted number measurements	...	...	125
Rent Act	...	...	17
Underground rooms	...	...	37
Houses in multiple occupation	...	...	161
Improvement grants	...	...	1,353
Caravans	...	...	354
			<hr/> 6,601

Food and Food Premises.

Milk processing dairies	...	...	114
Milk vendors	...	...	129
Ice cream premises	...	...	281
Food factories	...	...	27
Food vehicles	...	...	584
School kitchens	...	...	74
Restaurant kitchens	...	...	904
Licensed premises	...	...	261
Bakehouses	...	...	86
Butchers	...	...	240
Wet and fried fish shops	...	...	117
Other food shops	...	...	1,069
Meat inspection	...	...	56
Unsound food	...	...	478
Sampling: Food and drugs	...	...	129
Sampling: Milk	...	...	290
Sampling: : Ice cream	...	...	74
Sampling: Water	...	...	53
Food hygiene swabs	...	...	1
			<hr/> 4,967

Clean Air Act, 1956/1968.

Smoke Control areas	...	...	11,166
Other Clean Air Act visits	...	...	611
Smoke observations	...	...	706
Air pollution recording apparatus	...	...	402
			<hr/> 12,885

Factories Act, 1961.

Factories (powered)	...	...	185
Factories (non-powered)	...	...	12
Factories (building sites)	...	...	35
Outworkers	...	...	59
Work places	...	...	14
			<hr/> 305

Infectious Diseases.

I.D. enquiries	...	...	1,329
I.D. contacts	...	...	45
Food poisoning	...	...	13
Specimens	...	...	239
Disinfection	...	...	22
Long stay immigrants	...	...	246
			<hr/> 1,894

Offices, Shops and Railway Premises Act, 1963.

O.S.R. general inspection offices	203
O.S.R. general inspection shops	...	...	256
O.S.R. general inspection wholesale/warehouses	...	...	33
O.S.R. general inspection catering	...	...	109
O.S.R. all other visits	...	...	968
			<hr/> 1,569

Insects, Pests, Rodents.

Rats and mice control	...	...	15,557
Insect control	...	...	375
Pigeon control	...	...	312
Verminous premises	...	...	175
Foxes	...	...	10
			<hr/> 16,429

Animals.

Stables	...	...	50
			<hr/> 50

Miscellaneous.

Places of public entertainment	...	...	6
Hairdressers and barbers	...	...	121
Fertilisers and Feeding Stuffs Act, 1926	...	...	141
Noise Abatement Act, 1960	...	...	456
Schools	...	...	23
Court proceedings	...	...	26
Public conveniences	...	...	60
Water courses	...	...	52
Shops Acts, 1950-1968	...	...	2,108
Pet shops	...	...	67
Diseases of Animals Act, 1950	...	...	20
Exhumations	...	...	58
Other visits	...	...	1,169
			<hr/> 4,307
			<hr/> 57,529

The overall total of visits made during 1971 is less than 1970 (when a great number of visits was recorded as the result of the delivery of smoke control circular letters). Nevertheless the total is greater than the average of previous years, and increases are particularly noted in respect of Improvement Grants (+430); infectious disease enquiries (+835, due mainly to visits in connection with an outbreak of illness among children who had been on an educational cruise); rats and mice control (+1768); and Shops Act, 1950-1968 (due to Six-day Trading Order procedure).

Result of Service of Notices

Nuisances abated and defects remedied.

Six thousand and forty-seven defects were remedied as a result of the service of verbal, written and statutory notices. 1,634 were in connection with the drainage of buildings; 2,968 in and around dwelling houses; 1,310 in connection with food premises; and 135 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	29	12	—	—
Factories with mechanical power ...	901	185	25	—
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises) ...	45	49	1	—
Totals ...	975	246	26	—

(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) ...	10	2	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4) ...	3	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7):—					
Insufficient ...	4	2	—	—	—
Unsuitable or defective ...	32	11	—	3	—
Not separate for sexes ...	1	—	—	—	—
Other offences (excluding offences relating to outwork) ...	11	7	—	—	—
Totals ...	61	22	—	3	—

Factories Act, 1961—Part VIII

Outwork—Sections 133 and 134.

Nature of work	Section 133			Section 134		
	No. of outworkers in August list required by Sec. 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failing to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel-making	25	—	—	—	—	—
Cardboard box-making	72	—	—	—	—	—
Total ...	97	—	—	—	—	—

Number of addresses received from other Councils ...	45
Number of addresses forwarded to other Councils ...	48
Number of premises where outwork was carried on at the end of 1971	371
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 1971, six local residents received treatment for scabies infestation. A fee of £1.50 is payable by outside authorities for each person 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 on the Register kept in accordance with these Regulations is 135.

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, 1975, were issued under these Regulations:—

Dealers' (Pasteuriser's) Licences	...	...	2
Dealers' (Ultra Heat Treated) Licence	...	...	1
Dealers' (Pre-packed Milk) Licences:—			
Untreated milk	...	...	—
Pasteurised milk	...	...	120
Sterilised milk	...	...	73
Ultra Heat Treated milk	...	...	82

During the year, 148 samples of designated milk were submitted for prescribed tests. The results were as follows:—

Designation.	Satisfactory.	Void.	Unsatisfactory.
Pasteurised ...	118	1	1
Sterilised ...	12	—	—
Untreated ...	—	—	—
Ultra Heat-Treated	16	—	—

Brucella Abortus.

No samples of raw milk were submitted for examination.

Ice-Cream.

The number of premises registered for the storage and sale of ice-cream is 540. Supplies are generally from well-known sources, and before premises are registered, compliance with Food Hygiene Regulations requirements is ensured. The Inspectors made 281 visits to these premises during the year, and 64 samples of ice-cream were obtained for bacteriological examination. The results were:—

Grade 1	...	...	...	...	57
Grade 2	...	...	...	...	4
Grade 3	...	...	...	...	3
Grade 4	...	...	...	...	—

Bacteriological Examination of Other Foods.

Subsequent to outbreaks of suspected food poisoning five samples of foodstuffs were sent to the Public Health Laboratory for special bacteriological examination. No pathogens were isolated.

Poultry Inspection.

There are no poultry processing premises within the district.

Food Premises.

The Food Hygiene (General) Regulations, 1970, came into force on 1st March, 1971, to replace the 1960 and 1962 Regulations. Certain changes were also made in the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966. One welcome new requirement concerned open food, which the new Regulations now require to be protected against dirt, and the actions of customers, by the fitting of covers or screens to displays of such food.

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. 3,837 visits were made to premises in which foodstuffs intended for human consumption were prepared, stored or sold. In addition, 584 visits were made relative to food vehicles. To a considerable extent, the most satisfactory progress in promoting food hygiene is achieved by discussion and persuasion. For this to be successful the co-operation of all those concerned is necessary. 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.

The catering arrangements at the Merton Show, which were revised in 1970, were inspected before and during the course of the Show period, and were satisfactory.

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	...	...	...	137
Confectioners	...	...	...	209
Ice-cream premises	...	...	...	408
Bakers	...	...	...	63
Grocers and Provisions Dealers	...	...	...	175
Butchers	...	...	...	100
Fishmongers and Fish Fryers	...	...	...	53
Milk Distributors	...	...	...	135
Chemists	...	...	...	43
Licensed Premises	...	...	...	246
Clubs	...	...	...	49
Restaurants	...	...	...	151
Works Canteens	...	...	...	75
School Canteens and Kitchens	...	...	...	100
Food Stalls/Vehicles	...	...	...	181
Places of Public Entertainment	...	...	...	36
				<hr/>
				2,161

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	...	540
Registered for the manufacture and sale of ice-cream	...	6
Registered for the preparation or manufacture of sausages	...	75
Registered for the preparation or manufacture of potted, pressed, pickled or preserved food	...	195

The number of inspections of registered food premises during 1971 was 1,245.

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 1971:—

	Tons.	Cwts.	Lbs.
Canned foods ...	7	7	96
Frozen foods and ice-cream ...	4	15	74
Meat, bacon, poultry ...	—	13	11
Fish ...	—	3	61
Fruit and vegetables ...	—	2	110
Cereals, bread, flour ...	—	—	22
Peanuts ...	—	1	56
Vinegar, pickles and sauces ...	—	1	104
Cheese, butter ...	—	—	93
Miscellaneous ...	—	—	39
	13	7	106

The number of complaints received during the year regarding unsound food was 325. 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 (9) ***.
- Hair in loaf.
- Mouse dropping in loaf.
- Charred dough baked in loaf.
- Old dough baked in loaf.
- Beetle in wrapped loaf.
- Parts of pencil in loaf *.
- Oil and compounds of iron in loaf *.
- Glass in bread (2) *.
- Bristle in loaf.
- Dirty milk bottle (22) *****.
- Insects/larvae in milk (3) ***.
- Glass in milk (3) *.
- Mould in milk (2) **.
- Paint in milk *.
- Rubber particles in milk *.
- Piece of cucumber in milk *.
- Piece of paper in milk.
- Sour milk.
- Mouldy canned peaches.
- Mouldy canned spaghetti.

Mouldy cheese (2).
 Mouldy jam.
 Mouldy yoghurt *.
 Mouldy canned Roly-poly.
 Mouldy sausage rolls.
 Mouldy fruit pie (2) **.
 Mouldy canned rice.
 Mouldy scotch eggs.
 Mouldy minced meat.
 Mouldy butter *.
 Mouldy sausages *.
 Mouldy meat pie *.
 Mouldy dates.
 Smell from yoghurt.
 Smell from fried fish.
 Smell from canned fruit.
 Smell from ice-cream.
 Smell from leg of lamb.
 Smell from canned brislings.
 Smell from lard.
 Smell from soup.
 Sour cream (2) **.
 Sour tasting beef.
 Bad tasting meat pie.
 Bitter taste of marrow.
 Bitter taste of tomato juice.
 Paraffin taste of biscuits.
 Blown can of tomatoes.
 Nail in canned tomatoes.
 Insects in jar of onions *.
 Insect in 'take away meal'.
 Insect in cake.
 Insects in packet of rice *.
 Fly in carton of salad.
 Fly in pasty.
 Fly in medicine.
 Maggots in bacon *.
 Maggots in cheese.
 Larvae in egg noodles.
 Larvae in mustard.
 Blue bottle fly in bacon.
 Beetle in box of figs.
 Unsound peppermint creams.
 Unsound chicken liver.
 Unsound beef (3).
 Unsound lamb's liver.
 Unsound bacon (3).
 Unsound frozen chicken.
 Unsound salad dressing.
 Foreign matter in packet of fruit and nuts.
 Foreign matter in individual trifle.
 Foreign object in dried milk.
 Foreign matter in frozen peas.
 Stone in frozen beans.
 Coke in frozen peas.

- Metal in bag of flour.
- Metal in corned beef.
- Metal in can of tuna fish.
- Metal in soup.
- Rubber band in can of soup.
- Hair in sage and onion stuffing.
- Gristle in sausage meat.
- Mouse dropping in doughnut *.
- Glass in cheese.
- White deposits in can of grape-fruit.
- Plastic in carton of caramel.
- String in icing of bun *.
- Wood in pack of butter.
- Stale meat pie.
- Stale cakes (2) *.
- Rancid butter *.
- Rotten apples *.
- Water in sealed beer can.
- Discoloured luncheon meat.
- Discoloured tomato soup.
- Misdescription of cream pastries.
- Mould and dirt in orange drink *.

It will be observed that many of these complaints referred to mould growths on food, and unsound and soured foods. Many of these incidents could have been avoided if proper attention had been paid to the coding of foodstuffs. In this connection a great deal of publicity has been given nationally and professionally to coding practice during the past year, and the subject has been discussed by the Health Committee. Coding for the information of the consumer would not appear to be practical, since so much depends, not upon the date the product was made, but upon the quality and freshness of the food from which it is prepared, and upon conditions of transport and storage. The Food and Drugs Act gives adequate protection to anyone who considers that a food purchased is not of the nature, substance or quality demanded, and in cases of doubt the purchaser should consult with the public health inspector. Food manufacturers should adopt a national uniform coding system, which should also be understood by retailers who in turn should make it their business to be aware of the 'shelf life' of the various foodstuffs sold by them. The practice of moving stock from shop to shop by van delivery salesmen, and trading on a sale or return basis, should be prohibited.

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 1971, 307 samples were submitted of which 120 were formal samples, and 187 informal. The Public Analyst reported that of these samples 287 were found to be genuine, and to comply with the relevant Acts, Orders and Regulations, and 22 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 details are available. I am, however, setting out particulars of non-genuine samples and the action taken in connection with them.

Particulars of non-genuine samples and action taken.

Whole Carrots.

Butter Beans.

New Potatoes.

Broad Beans.

The presence of the carrying liquid or brine was not disclosed in the description of the article and after correspondence with the Cannery it was conceded that the title should be amended to show that the article was in water with salt added.

Cottage Pie.

This sample consisted of an incomplete mix for making cottage pie. The necessity to add certain extra ingredients was not stated on the front of the packet. In their correspondence the manufacturers mentioned that they were willing to amend the wording on their packaging.

Butterscotch.

This informal sample contained vegetable oil in addition to butterfat. An imported article; a further formal sample was unobtainable.

Kaviar.

Mock caviar. Sample contained permitted preservatives, but fish roe, not being a specified food for the purposes of the Preservatives in Food Regulations, 1962, should not have contained any added preservatives. Informal warning to retailer. Action with importer referred to Local Authority in whose area they were situated.

Jelly Spread.

Informal sample of a sweet jelly spread named 'Golden Jaffa' contained no fruit. In the opinion of the Public Analyst, the name was calculated to mislead as to the nature of the article. Formal sample unobtainable.

Greengage Piping Jelly.

No fruit juice was found in this sample, and the generic term 'buffer salt' is not an appropriate designation for the purpose of the Labelling of Food Order, 1953. The article should be called 'Greengage Flavour Piping Jelly'. Discussions undertaken with the manufacturer on revising label.

Spaghetti Sauce with Mushrooms.

The list of ingredients in this article of pre-packed food, containing more than two ingredients, included the generic term of 'vegetables' and 'seed oil'; designations not appropriate for the purposes of the Labelling of Food Order, 1953. Discussions with the manufacturer on revising the label.

Cream Buns.

The filling in the bun was made from genuine cream and a cream substitute; the proportion of butter fat being 90% of the total fat. A cream bun should have cream only in the filling. A formal warning was sent to the local baker concerned.

Hot Dog Sausages.

The Sausage and Other Meat Product Regulations, 1967, state that any sausage shall have a meat content of not less than 50%. The analysis of this sample showed that it contained 26% lean meat and 10% fat, making a total meat content of 36%. The sample was therefore deficient in meat to the extent of 28%. Formal sample to be taken. Danish importer cannot explain departure from their daily routine checks.

Chocolate Sponge Cakes.

A sample of sponge cakes enrobed with a chocolate substitute containing a high proportion of vegetable fat other than cocoa butter. Chocolate should be made with cocoa nibs, sugar and cocoa butter and contain no vegetable fat other than cocoa butter. Action deferred pending result of discussion between Baking Industry Committee and Local Authorities Joint Advisory Committee.

Preserved Pork Sausages.

Analysis showed that the sample contained total meat content, including fat, of 55%. The Sausage and Other Meat Product Regulations, 1957, state that Pork sausages must contain not less than 65% meat. The sausages were manufactured by a local butcher against whom legal proceedings were taken. The defendants pleaded guilty of the offence and were fined £20 with £10 costs.

Canned Ham.

The sample contained a total meat content of 79%, the remainder being gelatine 3% and added water 18%. In the opinion of the Public Analyst the meat content of canned ham should be not less than 90%. Informal discussions with importer from Holland as canned cured hams are exempt from the Regulations.

Canelloni.

An imported sample of canned food, the container of which was not correctly labelled in that the list of ingredients required by the Labelling of Food Order, 1953, were declared in French. A description in a foreign language does not indicate to a prospective purchaser the true nature of the ingredients. English Company of international group, given a written warning.

Hamburgers.

This sample, referred to by the Public Analyst as sausage meat, had a total meat content of 54%. In his opinion hamburgers should contain not less than 80% meat. Retailer agreed to rename article.

Low Fat Yoghurt.

Containing 1.1% milk fat, the article was described on the carton in three places simply as yoghurt whilst in a further place, in small print, the words 'low fat' appeared; manufacturers have considered altering label.

Canned Cod Roe.

The sample contained not more than 85% cod roe. It was the Public Analyst's opinion that an article claiming to be wholly roe should contain not less than 95% roe. Legal proceedings instituted and a summons issued.

Whole Fruit Cherry Jam.

Not more than 30% cherry fruit were contained in this sample. According to the Food Standards (Preserves) Order, 1953, the cherry jam, which was imported, should not have contained less than 40% fruit; the sample being 25% deficient in fruit. A summons was issued, but withdrawn when a warranty was produced.

Ardennes Liver Paste.

Liver paste containing 5% wheat flour, 93% meat and 2% salt and spices. The ingredients were declared to be bacon, pork liver, pork, flavour, salt and spices. Flour was not declared and in the Public Analyst's opinion the article should be called bacon and pork liver paste in view of the high proportion of bacon present. A Belgian product. The revision of name was discussed with the importer.

Cream Cheese Cake.

The illustration on the lid of the carton showed a sandwich cake consisting of a thick sponge, sandwiched between a biscuit layer and a thin covering of a cheese-containing layer; whereas the sample consisted of a layer cake formed from a thick cheese-containing layer resting on a thin biscuit portion. The illustration was misleading as to the nature of the article. This was a Canadian product and the revision of the label was discussed with the importer.

The following 20 samples were submitted for special examination, the results being as shown:—

Bacon	...	...	Genuine
Bread (3)	...	...	Non-Genuine (3)
Doughnut	...	...	Non-Genuine
Fresh cream pastries...			Non-Genuine
Linctus	...	...	Genuine
Milk (10)	...	...	Non-Genuine (8)
Orange crush	...	...	Non-Genuine
Peas	...	...	Non-Genuine
Sausage meat	...	...	Non-Genuine

Further particulars regarding the 16 non-genuine samples are as follows:—

Bread (3).

Loaf containing a rodent dropping — warning letter sent to bakery concerned.

Slices of cut brown loaf incorporated in which was foreign matter consisting of charred dough. Letter sent to bakery concerned.

Foreign matter consisting of dough, discoloured by mineral oil containing compounds of iron, baked in the bread—legal proceedings instituted—defendants pleaded guilty—fined £40 with £8 costs.

Doughnut.

Rodent dropping contained within a jam doughnut — legal proceedings instituted—both defendants pleaded guilty and were each fined £15 with £7 costs.

Fresh Cream Pastries.

Four buns with a cream-like filling, sold in individual paper trays marked 'Real Dairy Cream' 'Fresh Cream Cakes'—only a small proportion of filling was butterfat — warning letter to bakery concerned.

Milk (8).

Dirty one-third pint bottle of milk containing pupae of the fruit fly—legal proceedings — defendants pleaded guilty — fined £25 and £11 costs shared against three other similar cases.

Dirty one pint bottle of milk containing what the Public Analyst identified as miscellaneous dirt — legal proceedings — defendants pleaded guilty—fined £25 and share of £11 costs.

Dirty one pint bottle of milk containing fruit fly pupae—legal proceedings—defendants pleaded guilty—fined £25 and £11 costs.

Dirty one pint bottle of milk in which was a piece of cucumber—legal proceedings—defendants pleaded guilty—fined £25 and £11 costs.

Dirty one pint bottle of milk containing foreign matter—legal proceedings—defendants pleaded guilty—fined £30 and £7 costs.

Dirty one pint bottle of milk containing sandy cement—defendants pleaded guilty—fined £20 and £7 costs.

Two dirty one pint bottles of milk both of which contained black particles of rubber — legal proceedings — defendants pleaded guilty—fined £20 and £7 costs.

Dirty one pint bottle of milk containing foreign matter—legal proceedings—defendants pleaded guilty—fined £25 and £11 costs.

Orange Crush.

Dead mould and spores, and miscellaneous dirt in a one-third pint bottle of orange drink—legal proceedings—defendants pleaded guilty—fined £10 and £7 costs.

Peas (Frozen).

Foreign matter consisting of vegetable tissue derived from pea pods—informal action.

Sausage Meat.

Sample contained an excessive amount of rind — informal action.

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.

String in the icing of a bun—defendants pleaded guilty—fined £15 with £7 costs.

A piece of glass in a bottle of milk—defendants pleaded guilty—fined £35 with £5 costs.

Bottle of milk containing dirt—defendants pleaded guilty—fined £10 with £7 costs.

Cream found to be sour within 15 minutes of purchase—defendants pleaded guilty—fined £10 with £7 costs.

Sour condition of cream sold out of date—defendant pleaded guilty—fined £10 with £7 costs.

Yoghurt found to be fermenting 30 minutes after purchase—defendants pleaded guilty—fined £15 with £7 costs.

Pork pie affected by mould growth—pleaded not guilty—case proved—fined £5 with £7 costs.

Mouldy skinless sausages—defendants pleaded guilty—fined £25 with £7 costs.

Wrapped sliced loaf of bread affected by green mould—defendants pleaded guilty—fined £10 with £7 costs.

Mouldy wrapped sliced loaf of bread—defendant pleaded guilty—fined £25 with £7 costs.

Part baked loaf of bread affected by mould—pleaded not guilty—case proved—fined £30 with £7 costs.

Parts of a pencil embedded in loaf of bread—defendants pleaded guilty—fined £25 with £7 costs.

Glass in loaf of bread—defendants pleaded guilty—fined £15 with £7 costs.

Five packets of cakes opened on day of purchase found to be stale—defendants pleaded guilty—fined £15 with £7 costs.

Fruit pie affected by mould—defendants pleaded guilty—fined £30 with £7 costs.

Fruit pie sold out of date affected by mould—defendant pleaded guilty—fined £15 with £7 costs.

Bacon infested by maggots—defendant pleaded guilty—fined £10 with £7 costs.

Apples, bruised and affected by white mould growth—defendants pleaded guilty—fined £30 with £7 costs.

Rice containing larvae and pupae—defendants pleaded guilty—fined £40 with £8 costs.

Rancid butter—defendant pleaded guilty—fined £15 with £7 costs.

Bottled onions containing dead fly and a grub—defendants pleaded guilty—fined £20 with £7 costs.

Milk and Dairies (General) Regulations, 1959.

One pint bottle of milk containing foreign matter—defendants pleaded guilty—fined £25 with £7 costs.

One pint bottle of milk—bottle in dirty condition—defendants pleaded guilty—fined £10 with shared costs of £7.

One pint bottle of milk—bottle in dirty condition—defendants pleaded guilty—fined £10 with shared costs.

One pint bottle of milk—bottle in dirty condition—defendants pleaded guilty—fined £25 with £7 costs.

One pint bottle of milk—bottle in dirty condition—defendants pleaded guilty—fined £25 with £7 costs.

One pint bottle of milk containing mould deposits—defendants pleaded guilty—fined £25 with £7 costs.

One pint bottle of milk—bottle in dirty condition—defendants pleaded guilty—fined £10 with £7 costs.

One pint bottle of milk containing cement deposit—defendants pleaded guilty—fined £25 with £11 shared costs.

One pint bottle of milk containing cement deposit—defendants pleaded guilty—fined £25 with shared costs.

One pint bottle of milk containing insect pupae—defendants pleaded guilty—fined £25 with £11 costs.

Food Hygiene (General) Regulations, 1970.

Eight summonses were brought against the proprietress of a small roadside cafe for offences under these Regulations—the defendant pleaded guilty to three offences but not to the remaining five. However, six offences were proved and fines amounting to £41 were imposed, with £7 costs. The cafe subsequently closed down voluntarily.

Inspection of Imported Food.

In the past imported foodstuffs were inspected at the port of entry. However, with the development of the Container system, a changed procedure has been instituted to allow the inspection to take place at the point where the container is unpacked. When this is done, not at a port, but at an inland destination, special provisions are necessary. The Imported Food Regulations, 1968, which came into operation on 1st August, 1968, make provision for the contents of a food container to receive health clearance at its destination when the container is opened prior to distribution. Inland local authorities have the same powers of inspection and detention as Port Health authorities, since the responsibilities under the Regulations are transferred to them.

Unopened food containers have been arriving at two premises in this London Borough at irregular intervals during the past year, although latterly only one firm's premises were concerned. As a general rule, the Port Health authority notifies me by telephone that a container is on the way (on other occasions notification is by post), and a visit is made by an Inspector immediately the notification is received. Despite this arrangement containers do invariably arrive, are unloaded and depart before the arrival of the Inspector. I have made informal arrangements with the local receiving firm to keep container contents apart until the Inspector has visited. The firm is most co-operative in this respect, but there would appear to be no obligation for them to do so.

During the past year several articles have been published in national newspapers and professional journals on this subject and correspondence has ensued. The Association of Public Health Inspectors are endeavouring to establish the degree of difficulties which have arisen in the working of the Regulations, and it is to be hoped that ultimately a satisfactory system of notification and detention will be formulated.

SERVICES UNDER HOUSING ACTS

Of all the duties carried out by Public Health Inspectors, one of the most important is in the field of housing. The aspects of housing work for which they are responsible include the clearance of houses which are unfit for human habitation; the repair of houses; the improvement of individual houses; the improvement of houses as part of the policy of improving housing areas as a whole; the inspection and control of houses which are in multi-occupation, and miscellaneous duties including the inspection of houses in connection with Rent Act legislation.

Whatever might be the involvement of other officers, these are all matters which in one way or another concern the Public Health Inspector, and the housing authority of the future, no less than the present, will require a strong staff of Inspectors.

Applications for Improvement Grants referred to me by the Borough Surveyor numbered 583 (Standard 319; Discretionary 264). All the houses concerned were inspected to Housing Act standards, and by arrangement with the applicants, were made fit as a condition of the approval of a grant. The number of applications received was increasing steadily at the end of the year.

Applications for Qualification Certificates (Part III, Housing Act, 1969) referred to me by the Town Clerk, continued to be dealt with, and the position on 31st December, 1971, was:—

Section 45, Qualifying Certificates—

New applications	...	...	292
Certificates granted	...	...	379
Certificates refused	...	...	94

Section 46, Certificates of Provisional Approval—

New applications	...	...	96
Certificates granted	...	...	116
Certificates refused	...	...	—

Total number of applications dealt with either by approval or refusal	...	1,056
Number of applications still subject of negotiations at end of year	...	627

Total	1,683
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As will be seen there was still a considerable volume of work outstanding at the end of the year in respect of Qualification Certificates, and applications are still filtering in. No appeals against the Council's decision as to the granting or refusal to grant Certificates were entered during the year.

The implementation of the Council's Slum Clearance programme continued but no Clearance Areas were declared during 1971. The programme provided for the inspection of 185 dwelling houses in All Saints Road, South Road, East Road, North Road and Haydons Road (North section of South Wimbledon Area), and these inspections were carried out during the year. I anticipate that the results will be analysed, and a report made to the Housing Committee (Management) early in 1972.

A Public Local Enquiry was held in January, 1971, into the making by the Council of the London Borough of Merton, South Wimbledon (Clearance Areas Nos. 1 to 8) Compulsory Purchase Order, 1970, which involved 110 dwelling houses. This Order was confirmed by the Secretary of State for the Environment in June, 1971, with minor modifications.

Closing orders were made in respect of two individually unfit houses (9 Wandle Bank, S.W.19, and 79 Merton High Street, S.W.19) during 1971.

The total number of visits to premises of all kinds was 6,247.

Consideration of the general improvement of part of the South Wimbledon area continued during the year, and the Working Party of officers referred to in my last Report met on numerous occasions. In December, 1971, the Council declared the area enclosed by Haydons Road, All Saints Road, Leyton Road and Merton High Street (Plan No. TP/P/128) to be a General Improvement Area to be known as the 'All Saints General Improvement Area'. By the same Resolution the Council instructed the officers to compile a chronological programme of the implementation of the proposals contained in the improvement scheme.

SERVICES UNDER OTHER ENACTMENTS

Rent Act, 1957/68—Certificates of Disrepair.

The following is a summary of applications dealt with during 1971:—

Applications received (Form I) ...	...	2
Decisions not to issue Certificates ...	...	Nil
Certificates issued (Form L) ...	...	1
Undertakings given (Form K) ...	...	1
Number of visits made ...	...	17

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.

In my last Annual Report I referred to preliminary steps which were being taken in respect of a proposed application to the Council to consider the making of a Six-Day Trading Order. Certain traders within the Borough did in fact conduct a referendum of shopkeepers, and the Council was satisfied that a majority of the occupiers of shops of all classes might be in favour of being exempted from the provisions of the Act relating to weekly half-holiday closing. Subsequently a ballot of all the shopkeepers in the Borough was conducted, and as a result the London Borough of Merton Shops Weekly Half Holiday Exemption Order, 1971, dated 21st July, 1971, was made in respect of 43 classes of shops. In the case of 20 other classes of shops, more than half the votes recorded were against exemption, and these were excluded from the Order. All the shopkeepers in the Borough were notified as to the making of the Order by letter dated 27th July, 1971.

The number of visits made during the year for all purposes of the Shops Acts, 1950-65, was 2,108.

Offices, Shops and Railway Premises Act, 1963.

For many years there has been legislation to protect the health and safety of employees in factories, but until 1964 only limited provision was made in public health and shops legislation for those in non-industrial employment. The Offices, Shops and Railway Premises Act, 1963, and subsequent regulations make standards for health, welfare and safety in offices, shops and certain railway premises. Matters covered by the Act include cleanliness, overcrowding, heating and lighting, sanitary facilities, safety and fire precautions. Responsibilities for enforcing the Act are divided between local authorities, the factory inspectorate and fire authorities.

The number of visits made for all purposes of the Act during 1971 in Merton was 1,569 and the co-operation of employers has been most encouraging. 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	50	856	192
Retail Shops	34	1,276	282
Wholesale Shops, Warehouses ...	11	70	32
Catering Establishments open to the Public, Canteens	5	162	75
Fuel Storage Depots	—	4	2
Totals	100	2,368	583

Contraventions rectified.

Cleanliness	192
Overcrowding	1
Temperature	69
Ventilation	41
Lighting	25
Sanitary conveniences	64
Washing facilities	65
Clothing accommodation	16
Seats	1
Floors, passages, stairs	41
Dangerous machinery guarded	11
First Aid provisions	94
Other contraventions	140

Exemptions.

No exemptions (Section 46) were granted in 1971.

Accidents Reported and Investigated.

In offices	5
In retail shops	17
In wholesale shops and warehouses ...	10
In catering establishments open to the public, in canteens, etc.	4

As in previous years, new registrations have resulted mainly from routine checks and constant surveillance of vacant premises, rather than as a result of action taken by employers to register. The number of office premises registered at the end of the year continued to show an increase, but retail shop premises show a slight decrease due partly to the closing of a number of the small types of shops, and partly due to the bigger combines closing down their smaller units.

Inspections continue to follow the same pattern and once again it has been found that contraventions are in the main of a minor character. Infringements under Section 16, arising from inadequate maintenance of floor covering, obstruction of stairs, and trailing wires, are quite common, and the best of employers and managers tend sometimes to be complacent in this respect. In multiple office blocks it is noted that the practice of having a series of small offices is giving way to the open plan system which in my opinion is infinitely better.

Due to the heavy demand on the services of lift mechanics and engineers, employers have difficulty in ensuring that minor lift defects receive attention quickly, although normally no such difficulty arises where renewal of suspension ropes are required. Where lifts not connected to mechanical power exist, there appears to be reluctance on the part of some employers to comply with the requirements of the Regulations, but again, no serious difficulties have arisen.

No legal proceedings were instituted during the year.

No reports of serious accidents were made during the year, and the total number of accidents reported (36) is about average. As in previous years, all accidents reported are investigated and recorded. I find that however seemingly insignificant an accident may appear to be, some advice can usually be given to prevent a similar occurrence.

Fork lift trucks in warehouses are an easy, manoevrable form of handling and cause few complications, but floor surfaces over which trucks travel are very often uneven and even hazardous, and particular attention is paid to this when inspections are carried out. Conveyors in some warehouses and supermarkets are constantly in use and wear is very heavy. The slatted type tend to become dangerous when slats become loose or break away. Here again particular attention is paid to the condition of the slats and their fixings when inspections are carried out. I find that small electric service lifts such as are used in supermarkets are regularly examined, under the (Hoists and Lifts) Reports Order, 1968, but persons operating these lifts tend to put speed first and safety second, with breakdowns occurring very frequently.

The booklet 'The Safe Use of Food Slicing Machines', SHW 14, has not been generally distributed in this Borough. When inspections are carried out, general guidance is given on safety measures, and the requirements of Sections 17, 18 and 19 are brought to the

attention of Managers and Shop Owners, who are also advised to refer any particular mechanical or guarding problem to the manufacturer.

I have previously drawn attention to the need for the re-introduction of refresher courses, and I hope that such courses will eventually be arranged to meet the needs of specialist staff engaged on Offices, Shops and Railway Premises work.

Prevention of Damage by Pests Act, 1949.

The following summarises a report on rodent control work made to the Ministry of Agriculture, Fisheries and Food for the year ended 31st December, 1971:—

Number of properties in district	...	...	74,811
Number of properties inspected	...	...	14,458
Number of properties infested by rats	...	...	862
Number of properties infested by mice	...	...	906
Total number of visits including re-inspections			15,557

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 1971, 1,075 manholes were baited and 181 showed evidence of rodent infestation.

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

Other Pest Control Work.

During the year 1971, 706 complaints were received concerning insect pests and the following is a list of the infestations dealt with:—

Ants	...	...	...	37
Bees	...	...	...	20
Beetles	...	...	...	20
Bedbugs	...	...	...	45
Cockroaches	...	...	...	28
Fleas	...	...	...	97
Flies	...	...	...	21
Lice	...	...	...	4
Maggots	...	...	...	16
Mosquitoes	...	...	...	3
Silverfish	...	...	...	9
Slugs	...	...	...	10
Wasps	...	...	...	390
Woodlice	...	...	...	4
Woodworm	...	...	...	2

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

The incidence of wasps was lower than in previous years. No charge is made for the destruction of nests, but this work, which must invariably be carried out during the evening, 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.

Seventy-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 and 107 pigeons and 93 eggs were destroyed. Night visits were made to four railway bridges to take birds which were roosting, and one treatment with narcotic bait was carried out on local authority property, with the co-operation of the Ministry of Agriculture, Fisheries and Food.

During the year 12 complaints were received of the presence of foxes, which were causing some alarm among nearby householders. The Ministry of Agriculture, Fisheries and Food having withdrawn their extermination services, the Council authorised the Public Health Inspectors to supervise this work. I made arrangements for the actual digging out and destruction of these foxes to be carried out by a specialist contractor, and during the year it was necessary to employ his services on two occasions and three foxes were destroyed. There is no doubt that this service is appreciated by householders.

Pet Animals Act, 1951.

Fifteen licences to keep Pet Shops were issued during 1971. Sixty-seven visits were made to these premises to ensure compliance with the conditions attached to these licences.

The Riding Establishments Acts, 1964-1970.

The Riding Establishments Act of 1970, amended the 1964 Act by giving power to local authorities to grant a provisional licence for a period of three months. This enables the authority to observe carefully the operation of any particular riding establishment during a trial period before consideration is given to the granting of an annual licence.

There are three Riding Establishments within the Borough for which three provisional licences of three months' duration and three full licences for one year were issued during the year after inspection of the premises by the Inspectors, and by the Council's Veterinary Officers (Gates and Serth, Members R.C.V.S., 102 Brighton Road, Purley).

Diseases of Animals Act, 1950.

No outbreaks of disease occurred within the Borough during 1971.

Clean Air Act, 1956/1968.

During 1971, 218 complaints were received of smoke or grit emissions and the necessary observations were made and remedial action taken.

Twelve 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.

Section 6 of the Clean Air Act, 1968, authorises 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 of eleven applications received during the year, all were approved.

Legal Proceedings.

Proceedings under Section 1 of the Clean Air Act, 1968, were taken against a firm of demolition contractors for burning wood on site from which was emitted dark smoke. The case was dismissed; the defendants proving the statutory defence that the offence was inadvertent and that all practical steps had been taken to avoid a nuisance.

Measurement of Atmospheric Pollution.

Eight 8-port instruments are maintained by the Health Department, and these are sited in approved positions within the Borough. These instruments, which record smoke density and sulphur-dioxide contained in the atmosphere are visited weekly. Recordings are standardised, and results are sent monthly to the Department of Trade and Industry, Warren Spring Laboratory. The graphs which appeared in the Annual Report, 1970, have not been shown this year, but the levels for smoke and sulphur dioxide are similar to those shown for 1970. It is clear that since the Clean Air Act became law in 1956 there has been a steady reduction in emissions into the air, but there is still an urgent need for a more vigorous application of the Clean Air Acts in some areas of Great Britain. So much depends upon an adequate supply of the right fuels, and I believe that with the ever increasing use of natural gas for domestic heating, a still further improvement in the condition of the atmosphere can be achieved in this field.

Smoke Control Areas.

In the Annual Report 1970, I referred to the suspension by the Council of 11 Smoke Control Orders due to a shortage in the supply of solid smokeless fuel. This suspension was in fact in operation until 31st March, 1971. In addition, the Health Committee having recommended that the making of Smoke Control Order No. 19 be deferred until adequate supplies of such fuel were available, no advancement in initial survey work was made in the early months of 1971. In September the Health Committee received Department of the Environment Circular 53/71, which, inter alia, expressed the hope that local authorities would resume their programmes, the solid smokeless fuel situation having been resolved.

I submitted a revised smoke control programme to the Health Committee, and estimated that the result of the survey of the final area (No. 33) might be reported upon in November, 1975, and the Smoke Control Order for that area might become operative during 1977. The Committee approved the revised programme, and by the end of 1971 four further Orders had been made and progress was up to date.

The position regarding Smoke Control Orders is now 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.
No. 16 1970	Operative date 1.5.71.
No. 17 1970	Operative date 1.7.71.
No. 18 1970	Operative date 1.7.72.
No. 19 1971	Operative date 1.9.72.
Area No. 20	Awaiting confirmation.
Area No. 21	Awaiting confirmation.
Area No. 22	Awaiting confirmation.
Area No. 23	Under survey.

The area of the Borough covered by Orders either in operation, or confirmed but not operative, is 7,136 acres. The total number of premises involved in these areas is 45,686. Comparable figures at the commencement of the year were 6,807 acres and 42,573 premises.

In addition, Areas 21, 22 and 23 will cover an additional 695 acres with 4,593 premises.

On 1st January, 1971, 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 77.4 and the comparative figures for the London Borough of Merton was 76.

The total number of visits made during 1971 in connection with the Clean Air Acts, for all purposes, was 12,885.

After the operative date of any Order, observations are made from time to time by Public Health Inspectors and Technical Assistants to ensure compliance, and I am pleased to report that no obvious contraventions have been recorded.

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 1971, 127 complaints regarding noise were received, and the investigation of these entailed 456 visits, many of which were made outside normal office hours.

The most common cause of noise complaint were factories (25), domestic premises (25) and commercial premises (16).

The Council has associated itself with the Local Authorities Aircraft Noise Council, and I attended several meetings of this organisation during the year.

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

The Pharmacy and Poisons Acts, 1933-1941

One hundred and four 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.

Twelve samples of fertiliser were submitted to the Agricultural Analyst. Two were found to be unsatisfactory, and after investigations had been made with the manufacturers or suppliers, the Ministry of Agriculture, Fisheries and Food were notified on Returns.

Burial Act, 1857.

Eight licences under this Act, for the removal of human remains, were received from the Home Office during the year. Exhumation work is normally carried out in the early hours of the morning, and in the interests of public health, a Public Health Inspector attends at the cemetery on each occasion.

Seven of the licences related to the exhumation of the remains of persons whose relatives wished to have them reinterred in family graves, in some cases returned to their native land for reinterment. The eighth licence was issued following the discovery of human remains beneath the foundations of houses being constructed in Malvern Close, Mitcham, the land having been formerly part of the Streatham Park Cemetery.

The human remains of some 341 persons were exhumed and reinterred in graves within the cemetery boundary. This work took three weeks to complete, with exhumations taking place throughout the working day. A Public Health Inspector was in attendance every day to ensure that the exhumations were carried out in a proper manner.

Although, initially, the cemetery authorities were unable to account for the remains, they eventually produced records showing that the remains found came from medical schools and schools of anatomy.

Following the reinterment of the remains in communal graves, a committal service was held attended by a member of my staff together with representatives of the builders and the cemetery authority.

Caravan Sites and Control of Development Act, 1960.

The number of sites which were subject to licence or consent on 1st January, 1971, was seven. Three of these sites, namely Gale's Yard, Fountain Road; Dennard's Yard, Gladstone Road; and Gray's Yard, Fountain Road; were included in the areas covered by the Mitcham (Fountain Road) C.P.O., 1963, and the London Borough of Merton (Mitcham North West Quadrant) C.P.O., 1968, and the licences in respect thereof may be considered to be terminated. The four remaining sites are:—

33 South Road, Wimbledon, S.W.19.

Consent on 2.2.61 for seven caravans.

46 Deburgh Road, Wimbledon, S.W.19.

Consent on 2.2.61 for two caravans.

Swing's Yard, 37a Western Road, Mitcham.

Licensed on 27.1.61 for four caravans.

Gray's Yard, 230-232 London Road, Mitcham.

Licensed on 27.1.61 for sixteen caravans.

The Caravan Sites Act, 1968.

The periodic survey of sites occupied by caravans without licence or consent was continued, and in January, 1972, 27 occupied and three unoccupied caravans were recorded.

The provision by the Council of an authorised site was discussed during the year at both Committee and Officer level. The Department of the Environment and the leaders of the National Gypsy Council were also consulted, and towards the end of 1971 the Council approved a scheme for the provision of a site with 15 standings to be constructed on the site of the former Wimbledon Sewage Works, Durnsford Road, S.W.19. Financial implications, management matters, occupation and other details were still under discussion at the end of the year.

In the meantime a mains water standpipe and access to a soil drainage connection has been provided on the North West Quadrant (Mitcham) Site, and although conditions generally are far from satisfactory, the provision of an authorised site by the Council should solve this long-standing problem.

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, 159 premises were registered, and 121 visits were made during the year.

CONCLUSION

The full establishment of Public Health Inspectors referred to in my last Report was maintained during the year, but in December, 1971, one District Inspector signified her intention to leave, having obtained an appointment with another local authority. Two pupil Inspectors were under training at the commencement of the year, and a third pupil was appointed during the year. All three made satisfactory progress in their studies, and the fourth vacancy remained unfilled.

A good standard of work was maintained by the staff of the Environmental Health Section, but there are still problems to be overcome. The volume and intensity of work grows year by year, and a reappraisal of the establishment, which was determined in 1964, is overdue.

On behalf of my predecessor, Mr. G. H. Cockell (now retired), who was in office during 1971, I would like to express my appreciation of the support of the Chairman and members of the various Committees concerned with the work of the Public Health Inspectors, and my thanks to the Inspectors, Technical Assistants and clerical staff for their willing help and loyalty during his year of office.

J. P. SMITH,

Chief Public Health Inspector.

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To the Chairman and Members of the Education Committee:

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my last Annual Report on the School Health Service of the London Borough of Merton for the year 1971, since I shall be retiring from office at the end of June, 1972.

The health of school children in Merton during the year was very good, the percentage whose general condition was found to be satisfactory being the same as in 1970, namely 99.7.

Medical inspections of school children totalled 13,594 (10,752 routine inspections and 2,842 special inspections and reinspections) compared with 12,508 (9,040 routine inspections and 3,468 special inspections and reinspections) in 1970. At routine and other medical inspections 4,979 defects, mostly minor in character, were found of which 2,380 were referred for treatment and 2,599 for observation, compared with 5,151 (1,827 for treatment and 3,324 for observation) in 1970.

The system of selective medical examinations which was approved by the Education Committee and became fully operative in 1970, was continued. 455 questionnaires were distributed to school children on entry to high schools and on the recommendation of the School Medical Officer, or at the request of the parent or both, 197 children were medically examined.

As a result of these examinations, 24 children were referred for treatment or observation, these being followed up by the private doctor, or at a school clinic. The majority of the children in the age group had been dealt with in 1970 and thus the number involved in 1971 was correspondingly lower.

As was the case previously the system of selective medical examinations resulted in fewer children in the age group being seen and this enables School Medical Officers to concentrate on those pupils who most require attention.

Services at Pelham Road Clinic ceased in April when the building was vacated to enable its demolition to commence to clear the site for the erection of a new clinic. The Dental Services, Audiology Clinic and Ophthalmic Clinic were transferred to Morden Road Clinic, and the Minor Ailments Clinic and Orthopaedic Clinic were transferred to Russell Road Clinic.

The Education (Handicapped Children) Act, 1970, which terminated the procedure for ascertaining mentally handicapped children as unsuitable for education at school and thus brought them within the educational system, came into force on 1st April, 1971, and from that date, the premises in Bordesley Road, Morden, formerly administered by the Health Committee as a Junior Training Centre, were transferred to the Education Committee and are now known as St. Ann's School.

It is with great regret that I must report the death, in September, of Dr. H. W. Freeth, who had been a School Dental Officer with this Authority and previously with Surrey County Council for many years. His excellent work in the School Dental Service will be greatly missed.

The Chief Dental Officer, Mr. M. T. Gibb, whose services were retained for a further six months beyond his normal retiring age, retired in October and was succeeded by Mr. E. T. Thompson of our own staff.

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 my Deputy, Dr. E. H. Todd, 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 Schools and Special Services Sub-Committee.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

P. J. DOODY,

Principal School Medical Officer.

SCHOOLS AND SPECIAL SERVICES SUB-COMMITTEE

(As at 31st December, 1971)

Chairman: Alderman J. P. Brown, J.P.

Councillor (Mrs.) H. Bramsted (Vice-Chairman)

Aldermen:

R. S. Scorer V. Talbot, J. P.

Councillors:

E. A. Chapelow D. F. Connellan (Mrs.) E. M. Davis

(Mrs.) C. A. Fletcher W. E. R. Haddow J. N. Healey

D. J. Hempstead D. N. Rogers J. A. Watson

Co-opted Members:

Miss S. C. Auger Mr. C. H. Davies, B.A., J.P. Rev. D. Noble

Canon J. O'Donnell

Ex-Officio:

Councillor B. N. Clifford

(Chairman of the Education Committee)

Alderman J. P. Brown, J.P.

(Vice-Chairman of the Education Committee)

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

SCHOOL CLINICS PROVIDED BY THE LOCAL EDUCATION AUTHORITY

General Medical Clinics

Amity Grove, 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.	
Russell Road, Wimbledon:	2nd and 4th Wednesday 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 and Friday mornings.	
Western Road, Mitcham:	Wednesday afternoons.	
Wide Way, Mitcham:	Tuesday mornings.	

Orthopaedic Clinic

Russell Road, Wimbledon:	Every fourth Wednesday afternoon each month.	Examination of referred cases by an Orthopaedic Surgeon.
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Audiology Clinic

Morden Road, Merton:	1st Friday (all day) Other Fridays— mornings only.	Detailed investigation of cases referred.
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Remedial Exercises

Amity Grove, Raynes Park:	Monday mornings.	Remedial and breathing exercises as recommended by School Medical Officers.
Cavendish Road, Colliers Wood:	Thursday mornings.	
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:	Monday all day, Thursday afternoons and Friday all day.	
Middleton Road, Morden:	Wednesday all day.	
Morden Road, Merton:	Tuesday and Thursday mornings.	
Russell Road, Wimbledon:	Monday and Friday mornings. 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 to Friday all day.
Western Road, Mitcham:	Monday to Wednesday all day.

THE SERVICE

The Service provides for periodic inspection of all children:

- (a) for whom primary or secondary 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. 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

The system of medical inspections is modified to include a selective medical examination of pupils entering High Schools and approved by the Education Authority.

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 on reaching school leaving age.

The selective medical examination involves 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.

Schools are now being asked to provide details during the summer holidays of all pupils who could leave the following Easter or July, whether they are to leave or not. Those pupils requiring medical inspection are then seen during the autumn and spring terms, thus avoiding the examination period. These pupils are not seen again unless full-time education at school continues for any length of time, or any specific medical condition warrants it.

This arrangement has proved effective and has been of considerable help to schools.

AUDIOMETRY AND AUDIOLOGY

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

Number of primary schools visited ...	...	40
Number of children tested ...	...	2,863
Number of primary failures ...	...	201
Number of middle schools visited ...	...	15
Number of children tested ...	...	3,558
Number of middle failures ...	...	134

A total of 6,421 children in primary and middle schools were tested, of these 335 failed the audiometric test. In 1970, 4,784 children were tested and there were 429 failures.

SPEECH THERAPY

The Authority has a complement of three whole-time and one part-time Speech Therapists. One whole-time Speech Therapist is allocated to each of the three areas of Wimbledon, Mitcham and Merton & Morden. The part-time Speech Therapist is based at St. Ann's School, Bordesley Road, Morden.

Details of cases dealt with are given below:—

Number of sessions held: (a) for treatment ...	1,053
(b) for consultation ...	128
Number of cases on register at beginning of year ...	324
Number of cases added during the year ...	211
Number of cases discharged during year ...	211
Number of cases on register at end of year ...	324

Analysis of cases discharged during year.

Children who:—

Achieved normal speech ...	93
Were greatly improved ...	67
Showed some improvement ...	19
Showed little or no improvement ...	8
Left for various reasons ...	24

Analysis of cases treated during year:—

Stammering ...	58
Cluttering ...	3
Dyslalia ...	256
Dysarthria ...	11
Cleft Palate ...	5
Defects of voice ...	16
Aphasia ...	6
Dyseria ...	15
Retarded speech and/or language ...	191

THE WORK OF THE SCHOOL NURSES

Throughout 1971, the demands made on the services of health visitors and school nurses have increased in carrying out their role of preparatory screening of pupils and their work in helping to prevent the spread of infectious and contagious diseases. This necessitates the carrying out of many visits which require tact and skill on behalf of the nursing staff, some of which frequently need to be carried out in the evening when parents are at home.

In addition to this role, the health visitors and school nurses play an important part in acting as a liaison between the school, the home, the general practitioner and the Principal School Medical Officer.

During 1971, 154 visits to homes were paid (compared with 54 in 1970) either arising from school medical inspections or at the request of the head teacher. Again, these visits are often paid in the evening to ensure that parents are at home. The increase in the number of visits shows the value of, and the need for, this liaison to continue and expand.

The programme of vision screening has continued and grown during 1971. 177 sessions have been held (compared with 102 in 1970) and, similarly, the prophylaxis programmes for B.C.G., diphtheria, tetanus and rubella, and during 1971, 83 prophylaxis sessions were held compared with 49 in 1970.

The demands for health education teaching in middle and high schools by health visitors have continued to increase. In 1970, there were 101 teaching sessions undertaken and the demand could not be fully met. In 1971, there were 150 sessions and the requests received still exceeded staff availability. These sessions require much time devoted to them, not only in their giving, but in the preparation and collection of teaching material and visual aids that will stimulate and maintain the interest of this age group. The Health Education Officer's contribution to the success of these sessions in their planning, and in her advice to the health visiting staff, is enormous and very much appreciated.

During 1971 there was some increase in head infestation amongst the school children of the Borough, which necessitated considerably more attention by health visitors.

The following tables give details of visits paid by them during the year:—

1. Visits.

To pupils found at school medical examinations to require observation or treatment	...	...	56
To educationally subnormal children	...	...	138
To verminous cases	...	...	109
To infectious or contagious cases	...	...	49
To miscellaneous cases (arising from School Medical inspections at request of Head Teacher, etc.)	...	...	154
To children with handicaps	...	...	20

2. Sessions attended.

Pre-medical and vision testing	...	...	...	177
School medical inspections	...	...	...	548
Health surveys	...	...	...	163
General medical clinics	...	...	...	239
Health teaching	...	...	...	150
Immunisation	...	...	...	83
Freedom from infection inspections	...	...	...	24

CHILD GUIDANCE SERVICE

1. General

The pressure of work in the two Child Guidance Clinics has continued, with additional responsibilities having to be undertaken. The number of children being referred has continued to increase.

2. Staffing

The Wimbledon Clinic has remained fully staffed, but at Mitcham Mrs. Windebank, Psychiatric Social Worker, resigned and the vacancy was not filled by the end of the year.

3. Remedial Classes

The three classes based at Manor House, Malmesbury and Garth Primary Schools continue to flourish and the services of Miss Matthews, Peripatetic Remedial Teacher, were supplemented by the appointment of Mrs. El-Nagdy, who is specially responsible for the teaching of English to immigrants. Plans for a Remedial Centre are in hand.

4. Places for Maladjusted Children

Melrose School for Senior Maladjusted Children was opened in 1971 and will ultimately accommodate 60 children as and when suitable staff are appointed.

5. Places for Backward Children

Ravensbury School for E.S.N. Children of primary age opened in June, 1971, accommodating 75 pupils.

HANDICAPPED PUPILS

The following table shows the numbers of pupils on the Handicapped Pupils' Register as at 31st December, 1971, together with details of the special educational facilities which have been provided by the Authority:—

Classification	Numbers of pupils ascertained during 1971	Total number ascertained as at 31.12.71	Attending Special schools as :		Awaiting placement at end of year
			Day pupils	Boarders	
Blind	1	10	4	5	1
Partially-sighted	1	6	5	—	1
Deaf	1	17	10	7	—
Partially-hearing	7	20	13	4	3
Educationally sub-normal	35	259	236	14	9
Epileptic	1	2	—	1	1
Maladjusted	29	102	46	51	5
Physically-handicapped ...	4	40	32	6	2
Delicate	10	41	28	10	3
Totals	89	497	374	98	25

The numbers of pupils receiving education at home under Section 56 of the Education Act, 1944, were six maladjusted and two delicate.

THE SCHOOL DENTAL SERVICE

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

‘ At 31st December, 1971, the dental staff consisted of the Chief Dental Officer, four full-time Dental Officers, two part-time Dental Officers and one part-time Orthodontist, giving a full-time equivalent of 5.5 Dental Officers compared with 6.5 in 1970. The Authority also employs one Dental Auxiliary. Four sessions per week were devoted to orthodontics by the Orthodontist and two by one of the Dental Officers.

‘ The staff changes during the year, mainly the resignation of two part-time Dental Officers, and the sudden death of a full-time Officer, resulted in a disruption of the School Inspection programme, with 4,000 less children being inspected.

‘ The number of permanent teeth extracted, mainly for orthodontic purposes to relieve overcrowding, was about the same as for 1970. The number of deciduous teeth extracted was 228 less than 1970, showing that more teeth had been saved by conservation.

‘ Dental Health Education has been given by Health Visitors, Dental Auxiliaries and Dental Officers, with the co-operation of the Health Education Officer.’

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

Statistics for Year 1971

Number of pupils on the register of maintained Primary, Middle and High Schools including nursery and special schools in January, 1972, as in Forms 7, 7m and 11 schools: 26,419.

Attendances and Treatment.

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visits	2,501	2,186	438	5,125
Subsequent Visits	3,752	4,674	1,118	9,544
Total Visits	6,253	6,860	1,556	14,669
Additional courses of treatment commenced	705	387	69	1,161
Fillings in permanent teeth	2,313	4,260	1,536	8,109
Fillings in deciduous teeth	4,631	317	—	4,948
Permanent teeth filled	2,019	3,783	1,386	7,188
Deciduous teeth filled	4,227	292	—	4,519
Permanent teeth extracted	45	373	70	488
Deciduous teeth extracted	662	337	—	999
General anaesthetics	270	149	16	435
Emergencies	333	130	12	475

Number of pupils X-rayed	596
Prophylaxis	678
Teeth otherwise conserved	132
Number of teeth root filled	22
Inlays	—
Crowns	6
Courses of treatment completed	4,764

Orthodontics.

Cases remaining from previous year	365
New cases commenced during year	141
Cases completed during year	139
Cases discontinued during year	9
Number of removable appliances fitted	250
Number of fixed appliances fitted	17
Pupils referred to Hospital Consultant	1

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)	—	4	2	6
Number of dentures supplied	—	4	2	6

Anaesthetics.

General Anaesthetics administered by Dental Officers—Nil.

Inspections.

(a) First inspection at school. Number of pupils ...	18,127
(b) First inspection at clinic. Number of pupils ...	3,228
Number of (a)+(b) found to require treatment	10,145
Number of (a)+(b) offered treatment ...	8,721
(c) Pupils re-inspected at school clinic ...	3,672
Number of (c) found to require treatment ...	1,998

Sessions.

Sessions devoted to treatment ...	2,584
Sessions devoted to inspection...	185
Sessions devoted to Dental Health Education ...	39

INFECTIOUS DISEASES AND PROPHYLACTIC MEASURES

1. Infectious Diseases

Table 1.

Disease	Suffering	Excluded on suspicion	Infection at home	Total exclusions
Scarlet Fever ...	16	—	3	19
Measles ...	218	4	5	227
Whooping Cough ...	24	—	1	25
German Measles ...	122	—	1	123
Chicken Pox ...	231	1	3	235
Mumps ...	12	—	—	12
Jaundice ...	2	—	—	2
Other ...	96	1	2	99
Totals ...	721	6	15	742

Table 2.

Contagious Diseases.

Disease	Suffering	Excluded on suspicion	Total exclusions
Impetigo ...	6	—	6
Scabies ...	2	—	2
Other ...	3	2	5
Totals ...	11	2	13

Compared with 1970, there were 403 fewer cases of communicable disease notified by schools as a result of which children were excluded.

Diphtheria

There were no notified cases. A teacher at a primary school was found to have been in contact with a case in another Borough and was excluded from school pending investigation. Results were negative.

Dysentery

The following major outbreak of sonné dysentery occurred during the year. In March, immediately following an educational Mediterranean cruise by 600 children from 20 Merton schools, a number of children were found to be absent from school. Enquiries showed that several had diarrhoea and immediate laboratory tests showed them to be infected with sonné dysentery. Subsequent investigations at all 20 schools revealed a total of 60 absentees among children who had been on the cruise, with a further 140 children who had been ill and recovered. In all, 78 children were found to be infected.

Control measures were put into effect immediately. The schools concerned were visited and inspected, advice was given on hygiene and additional cleaning and disinfection of toilets was arranged. Canteen staff were alerted and advised and Head Teachers were asked to inform the Health Department of any new cases. A letter was sent to the parents of all children who had been on the cruise in order to inform them of the outbreak.

There was close liaison with the Chief Medical Officer of the Shipping Company and food handlers in the ship were tested and found to be negative. The ship's next four cruises were uneventful. The overall picture of the children's health on the cruise was somewhat confused by sea-sickness during the last few days, but the most probable source of infection was thought to have been ice-cream eaten at the end of the cruise, at a small café in Itea where there was only one toilet and no washing facilities.

In all, about 325 families were tested and more than 900 specimens were sent to the Public Health Laboratory at St. George's Hospital, whose staff coped wonderfully well with what must have been a great burden. The last case was not cleared until two months had elapsed. When the outbreak was over, additional recommendations were made to the Education Committee which should minimise the possibility of a recurrence.

In the last week in May several children at a primary school were reported suffering from diarrhoea, but on investigation were found to be negative. The school was, however, kept under observation and tests were made on fresh cases which occurred, with the result that between 18th June and 7th July, nine positive cases of sonné dysentery came to light. The nine cases were in five families and, of these, two were in adjacent houses. Two teachers and a meals supervisor had symptoms but were negative.

The school was visited by a Senior Medical Officer, who found the standard of hygiene satisfactory. All cases were cleared by the end of June except for one family, which continued positive until July.

Meningitis

Early in January, the death occurred from meningitis of a 15-year-old schoolboy. The illness lasted only five days and the patient died at home before medical advice had been sought.

Parents of all pupils at the boy's school were informed of the death and were advised to consult their family doctor if it appeared

at all necessary. Letters were also sent to all general practitioners informing them of the death and telling them the recommended treatment. The boy's family and other close contacts were given protective medicine.

Poliomyelitis

One case, with some paralysis of one leg, occurred during the year in a schoolgirl aged eight years, who had not been immunised, as her parents had not accepted immunisation. There was a delay of seven weeks between the onset of the illness and the seeking of medical advice. All the immediate family contacts were immunised and school-children in the family were excluded from school for the necessary period. The patient's school was visited, preventive measures were arranged and advice on hygiene was given.

Although no polio virus was isolated from specimens, it was considered by the various doctors in contact with the case that the clinical symptoms clearly indicated poliomyelitis.

Streptococcal Infections

In mid-May a notification of meningitis was received in respect of a child attending one of the Borough's Special Schools. Investigation revealed that a number of children at the school had sore throats and laboratory tests showed the infection to be due to haemolytic streptococcus. The children were excluded while they were under antibiotic treatment and for 48 hours after treatment ended. No new cases occurred.

Winter Sickness

In late April and early May there were outbreaks of winter sickness type illness at three Primary, one Middle and two High Schools. In four, the symptoms were sore throats, temperature, headache and runny eyes and in the other two schools, sickness. Specimens were sent for virological as well as bacteriological examination, but all results were negative.

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 1971 was as follows:—

Number of children vaccinated	76
Number of children given re-inforcing doses ...	2,209

2. Diphtheria/Tetanus Immunisation.

Number of children given immunisation	109
Number of children given re-inforcing doses ...	2,239

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. *Tetanus Vaccination.*

Tetanus vaccination of school leavers was added to the prophylaxis schedule during the year and the following numbers were vaccinated:—

	In School Clinics	By General Practitioners	Total
Primary courses	3	28	31
Booster injections	66	64	130

4. *Protection of School Children against Tuberculosis.*

B.C.G. Vaccination.

		Percentage
Number in age group	4,215	
Number of consents	3,589	85.15
Number skin tested	3,139	74.47
Number Mantoux positive	69	1.64
Number B.C.G. vaccinated	2,996	71.07

The low percentage of those children showing a Mantoux positive reaction indicates the continuing low incidence of tuberculosis in the community.

5. *Rubella Vaccination.*

To enable pupils to obtain vaccination without disruption of school activities, late afternoon sessions were held in school clinics at which 695 girls in the prescribed age group were vaccinated. In addition 134 girls were vaccinated by general practitioners. No vaccination sessions were held in schools.

ANCILLARY SERVICES

1. Nursery Schools/Classes

There were 785 children attending the nursery schools and nursery classes at 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 1970:—

Year	Number in attendance	Taking Milk		Taking Meals			
		Number	Percentage	Free	Paid	Total	Percentage
September, 1970 ...	22,999	12,368 *13,285	93.0	1,294	15,536	16,830	73.1
September, 1971 ...	23,880	6,371 † 6,575	96.8	1,594	12,422	14,016	58.6

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

† This figure reflects the position after the withdrawal of free school milk from pupils aged seven years and over, those who continued to receive it free for a time afterwards being at primary schools only.

By the end of 1971, 657 children over the age of seven years, had been assessed by Medical Officers and of these, 440 had been assessed as requiring free school milk on health grounds, subject to review at the end of one year. Some of these children were attending middle schools.

These assessments were carried out in compliance with the Local Education Authority's decision to supply free milk to pupils aged between 7 and 11 years who were found, as a result of assessment, to require it on health grounds.

In addition to these special assessments, when pupils over seven years of age are seen by School Medical Officers at routine medical inspections, the need for free school milk, where it is warranted on health grounds for any particular pupil, is assessed.

Appendix 'A'

MEDICAL INSPECTION AND TREATMENT

(Excluding Dental Inspection and Treatment)

Return for the year ended 31st December, 1971

Number of pupils on registers of maintained primary, middle, high, special and nursery schools in January, 1972:—

(a) Ordinary Schools ...	25,351
(b) Special Schools ...	283
(c) Nursery Schools and Classes	785
Total ...	26,419

SECTION A.

Routine Medical Inspections.

Age Groups Inspected (By year of birth)	Number of Children Inspected	Number of Children found not to warrant medical examination*
1967 and later	599	—
1966	2,209	—
1965	441	—
1964	202	—
1963	200	—
1962	1,152	—
1961	1,642	—
1960	1,385	—
1959	887	—
1958	650	—
1957	503	162
1956 and earlier	1,122	—
Total	10,752	162

* i.e., after a School Medical Officer had considered a medical questionnaire completed by the parents and the medical records.

Other Medical Inspections.

Type of Inspection	Number of Children Inspected
Special Inspections	1,259
Re-Inspections	1,583
Total	2,842

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	150	200	55	42
Eyes				
(a) Vision ...	1238	622	29	15
(b) Squint ...	145	20	2	—
(c) Other ...	27	34	3	2
Ears				
(a) Hearing ...	44	81	19	135
(b) Otitis Media	21	40	—	1
(c) Other ...	11	20	—	1
Nose and Throat	96	235	5	8
Speech	79	79	11	7
Lymphatic Glands	6	58	—	—
Heart	27	75	1	8
Lungs	63	125	4	23
Development				
(a) Hernia ...	11	30	1	—
(b) Other ...	103	144	2	5
Orthopaedic				
(a) Posture ...	11	16	—	2
(b) Feet ...	23	54	6	17
(c) Other ...	45	70	6	12
Nervous System				
(a) Epilepsy ...	30	14	1	5
(b) Other ...	10	16	—	3
Psychological				
(a) Development	9	28	4	14
(b) Stability ...	19	64	14	27
Abdomen ...	16	40	5	4
Other defects and diseases ...	60	298	21	56
Totals ...	2,254	2,368	126	231

Four thousand six hundred and twenty-two defects were found in children at routine medical inspections of which 2,254 were referred for treatment and 2,368 for observation. 357 defects were found at special inspections, 126 being referred for treatment and 231 for observation. The total number of defects referred for treatment and observation in 1971 was 4,979.

*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
1967 and later	559	45	% 8.19
1966	2,209	314	14.21
1965	441	82	18.59
1964	202	31	15.34
1963	200	30	15.00
1962	1,152	231	20.05
1961	1,642	287	17.48
1960	1,385	262	18.92
1959	887	162	18.26
1958	650	121	16.15
1957	503	119	23.65
1956 and earlier	1,122	286	25.49
Totals	10,952	1,970	17.98

Classification of General Condition of pupils inspected during 1971.

In three cases only was the condition of a child regarded by the School Medical Officer as unsatisfactory.

SECTION B.

Treatment

Uncleanliness and Verminous Conditions.

1. Total number of individual examinations of pupils by Health Visitors in Schools	...	...	...	16,087
2. Number of individual pupils found to be infested	...	...	...	213
3. Number of exclusions:—				
First time	...	...	...	16
Second time	...	...	...	2
			—	18
4. Number of pupils cleansed	...	...	...	20
5. Number of Cleansing Notices issued under Section 54 of the Education Act, 1944	...	...	...	10

Diseases of the Skin (excluding uncleanness)

Diseases of the Skin.	Number of cases known to have been treated during the year.
Ringworm—scalp	...
Ringworm—body	...
Scabies	...
Impetigo	...
Other skin diseases (including verrucae, eczema, allergic skin conditions, acne, etc.)	...
	142
Total	154

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)	2,694
Total ...	2,748
Number of pupils for whom spectacles were prescribed	788

Diseases of the Ear, Nose and Throat.

Diseases and Defects.	Number of cases known to have been treated.
Received operative treatment:—	
(a) for diseases of the ear ...	7
(b) for adenoids and chronic tonsillitis	15
(c) for other nose and throat conditions	3
Received other forms of treatment...	215
Total ...	240

Orthopaedic and Postural Defects.

Number of cases known to have been treated in Clinics or Out-Patient Departments	271
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Remedial Exercises.

During 1971, 117 sessions for remedial exercises were held in clinic premises, 57 new cases being admitted and 51 old cases discharged. The sessions held at Pelham Road Clinic were transferred in March, 1971, on closure of the building, to Cavendish Road Clinic.

In April, 1971, the Health Department accepted responsibility for 16 children requiring physiotherapy in the Junior Training Centre at Morden when this became St. Ann's Special School. 150 sessions were held in all at St. Christopher's, Ravensbury and St. Ann's Special Schools, 33 new cases being admitted and 38 old cases discharged.

Other Treatment Given.

Ailments.	Number of cases treated.
Miscellaneous minor ailments ...	248
Lymphatic Glands	2
Heart and Circulation	24
Lungs	112
Development (Hernia and Other)	75
Nervous System	30
Pyschological Development and Stability	8
Total ...	499

Appendix ' B '

1. General Medical/Minor Ailments Clinics.

Attendances made by children at General Medical/Minor
Ailments Clinics 2,602

2. Other Medical Examinations undertaken by School Medical Officers.

Children examined for part-time employment 237

In addition to the above, 259 medical examinations of teachers and teacher trainees were carried out during the year.

3. Recuperative Holidays.

Children sent for recuperative holidays on the recommenda-
tion of School Medical Officers 15

All these children were examined on their return and all were found to have benefited from the holidays provided.

