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

Contributors

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LONDON BOROUGH of HACKNEY





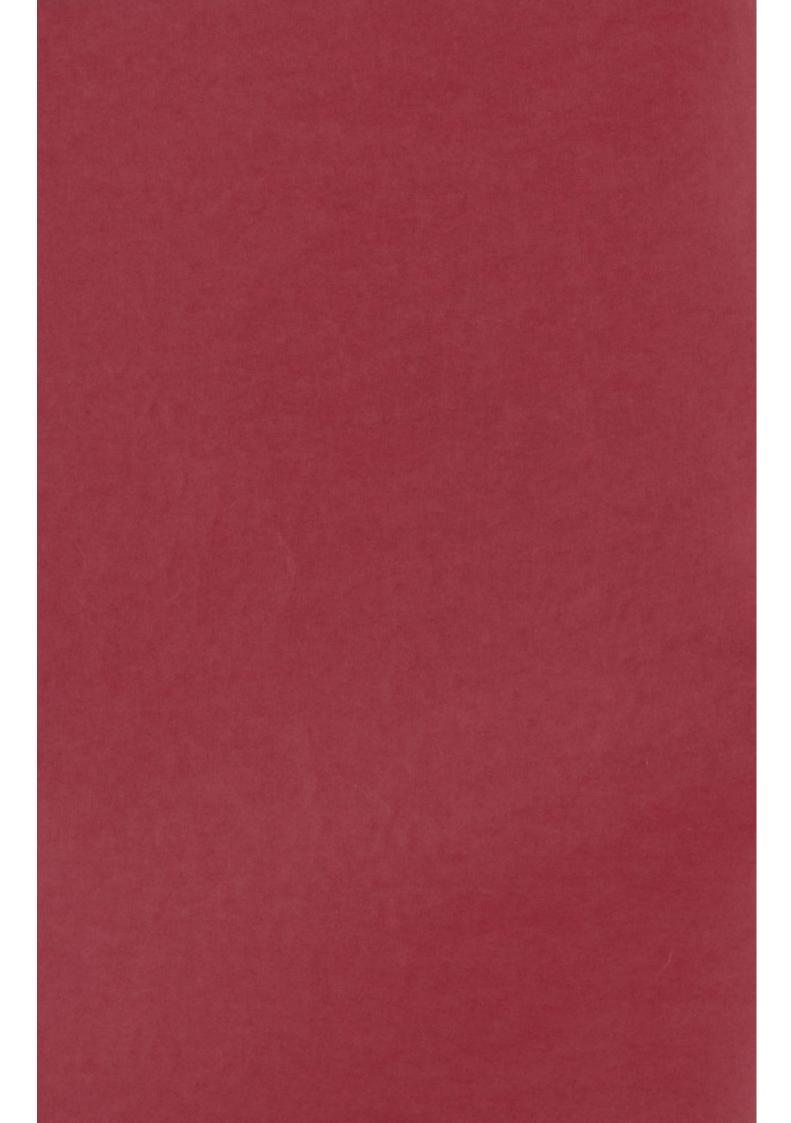
ANNUAL REPORT

on the

HEALTH OF THE BOROUGH

for the year

1970



LONDON BOROUGH of HACKNEY



ANNUAL REPORT

on the

HEALTH OF THE BOROUGH

1970

Dr. R. G. Davies

Medical Officer of Health &

Principal School Medical Officer

LONDON BOROUGH



ANNUAL REP

on the

HEALTH OF THE BO

1970

HEALTH COMMITTEE

as at 31st December, 1970

Ex Officio - Councillor Charles H. Hegerty, J.P. (Mayor)

Chairman - Councillor N.P. Mett, M.A.,

Vice-Chairman - Councillor G.R. Bell

Alderman Mrs. Bessie Benabo, J.P. Alderman K.S. Lightwood Alderman R.W. Masters Alderman L. Sherman, O.B.E., J.P. Councillor R.R. Atkins Councillor C.H.E. Bird Councillor S. Clinton Davis, M.P.

Councillor H. Freeman
Councillor Miss Lilian Karpin
Councillor S.E. Kelly
Councillor J.W. Oakeley
Councillor Miss M.E. Parry-Williams
Councillor Mrs. Sally Sherman
Councillor Miss M.E. Watts

Co-opted Members

J. Denham, Esq., M.D., D.P.H. G. Forrest, Esq., Mrs. R.L. Hegerty Miss H.E. Howarth L. Layward, Esq.

Miss P. Lucas Mrs. M.J. Metcalf Mrs. G.A. Morris E. Weissel, Esq. G. Wintle Esq.

Representation on Organisations concerned with Health Work

Atmospheric Pollution - Investigation of -Standing Conference of Co-operating Bodies City of London and East London Dispensary Fund

Easton House Management Committee Family Planning Association Family Welfare Association

Hackney and Bethnal Green Chest Diseases Care Committee

Hackney and Stoke Newington Chest Diseases Care Committee

Hackney (No.6) Group Hospital Management Committee

Inner London Education Authority
Inner London Executive Council for the
National Health Service
London Boroughs Training Committee (Social
Services)

National Association for Maternal and Child Welfare

National Council for the Unmarried Mother and her Child

National Society of Children's Nurseries

National Society for Clean Air

Psychiatric Rehabilitation Association

St. Bartholomew's Hospital Board of Governors Save the Children Fund Playgroup Committee Shoreditch Chest Clinic Care Committee Alderman L. Sherman, O.B.E., J.P. Dr. R.G. Davies Mrs. R.L. Hegerty

Alderman Mrs. Bessie Benabo, J.P. Councillor G. R. Bell Alderman Mrs. Bessie Benabo, J.P. Councillor Miss M.E. Parry-Williams Alderman Mrs. Bessie Benabo, J.P. Councillor Miss Ivy K. Townsend Councillor Miss Mary E. Watts Alderman Mrs. Bessie Benabo, J.P. Councillor S.F. Mason Councillor Miss Ivy K. Townsend Councillor Miss Mary E. Watts Alderman Mrs. Bessie Benabo, J.P. Councillor M. Ottolangui, J.P. Alderman L. Sherman, O.B.E., J.P. Dr. R.G. Davies Councillor Mrs. Helen M. Phillips Alderman L. Sherman, O.B.E., J.P.

Councillor G.R. Bell (Deputy) Councillor Mrs. Rose Lipman Alderman Mrs. Bessie Benabo, J.P. Councillor Mrs. Elizabeth Mumford Councillor Miss M.E. Parry-Williams Miss G.W. Smith, S.R.N., S.C.M., M.T.D. Councillor Miss Ivy K. Townsend Mrs. J. Heath Councillor Mrs. Rose Lipman Councillor Miss Ivy K. Townsend Councillor H. Freeman Councillor Miss Mary E. Watts Councillor G.R. Bell Councillor Miss Lilian Karpin Councillor Mrs. Sally Sherman Councillor Miss M.E. Parry-Williams Councillor C.H.E. Bird Councillor Mrs. Helen M. Phillips

STAFF OF THE HEALTH DEPARTMENT

as at 31st December, 1970

Medical Officer of Health and Principal School Medical Officer - R.G. Davies

Deputy Medical Officer of Health & Deputy Principal School Medical Officer - L.M. Fry Principal Medical Officers - J.M. Davies, M.D. Mollison, A.G. Poulsen-Hansen Departmental Medical Officers - Full-time (6), Sessional (24)

Chief Dental Officer and Principal School Dental Officer - S. Gelbier

Senior Dental Officer (1), Orthodontist (1), Dental Officers - Full-time (7),
Sessional (11), Dental Auxiliary (2), Dental Surgery Assistants (18 + 3 vacancies)

Co-ordinating Nursing Officer - M.T. Roche

Senior Nursing Officers (5), Centre Superintendents (8+1 vacancy), Health Visitors (37+4 vacancies), Tuberculosis Health Visitors (2), Clinic Nurses (7+6 vacancies), Clinic Auxiliaries (6), School Nurses (11+5 vacancies), Day Nursery Matrons (7), Day Nursery Deputy Matrons (7), Day Nursery Wardens (5+3 vacancies), Staff Nursery Nurses (23+6 vacancies), Nursery Assistants (16+2 vacancies), Nursery Students (17+14 vacancies), District Nursing and Midwifery Staff (30+19 vacancies), District Auxiliaries (6), Organiser (Playgroups) (1 vacancy), Nursery Assistants (Playgroups) (6+3 vacancies)

Principal Mental Health Social Worker - H.T. Lockwood

Deputy Principal Mental Health Social Worker (1), Assistant Principal Mental Health Social Workers (3 + 1 vacancies), Mental Health Social Workers (14 + 2 vacancies), Head Teacher, Junior Training Centre (1), Deputy Head Teacher, Junior Training Centre (1), Supervisor Teachers of Training Centres (13 + 1 vacancy), Supervisor of Adult Training Centre (1), Deputy Supervisor of Adult Training Centre (1), Senior Assistant Supervisor of Adult Training Centre (1), Deputy Supervisor of Day Centre (1), Deputy Supervisor of Day Centre (1), Craft Instructors (5), Head Teacher of Special Care Unit (1), Supervisor Teachers of Special Care Units (6)

Principal Health Social Worker - Vacancy

Senior Health Social Worker (1, acting Principal), Family Case Workers (2 + 1 vacancy). School Health Social Workers (4) part-time (1), Social Workers, Chest Clinics(1), part-time (1), Social Worker, V.D. (1).

Chief Public Health Inspector - T.H. Marshall

Deputy Chief Public Health Inspector (1), Senior Supervisory District Public Health Inspectors (3), Supervisory District Public Health Inspectors (8), District Public Health Inspectors (19 + 7 vacancies), Pupil Public Health Inspectors (8), Technical Assistants (9), Superintendent, Disinfecting Station (1), Deputy Superintendent, Disinfecting Station (1 vacancy), Rodent Officers/Drainage Foreman (2 vacancies), Mortuary Keeper (1), Assistant Mortuary Keeper (1)

Chief Administrative Assistant - J. A. Rozzier

Principal Administrative Assistant (1), Senior Administrative Assistants (6), Administrative and Clerical Assistants (95 + 11 vacancies), Medical Officer of Health's Secretary (1), Typing Supervisor (1), Assistant Typing Supervisor (1), Shorthand-Typists (7 + 2 vacancies)
Home Help Organisers (4), Assistant Home Help Organisers (5)

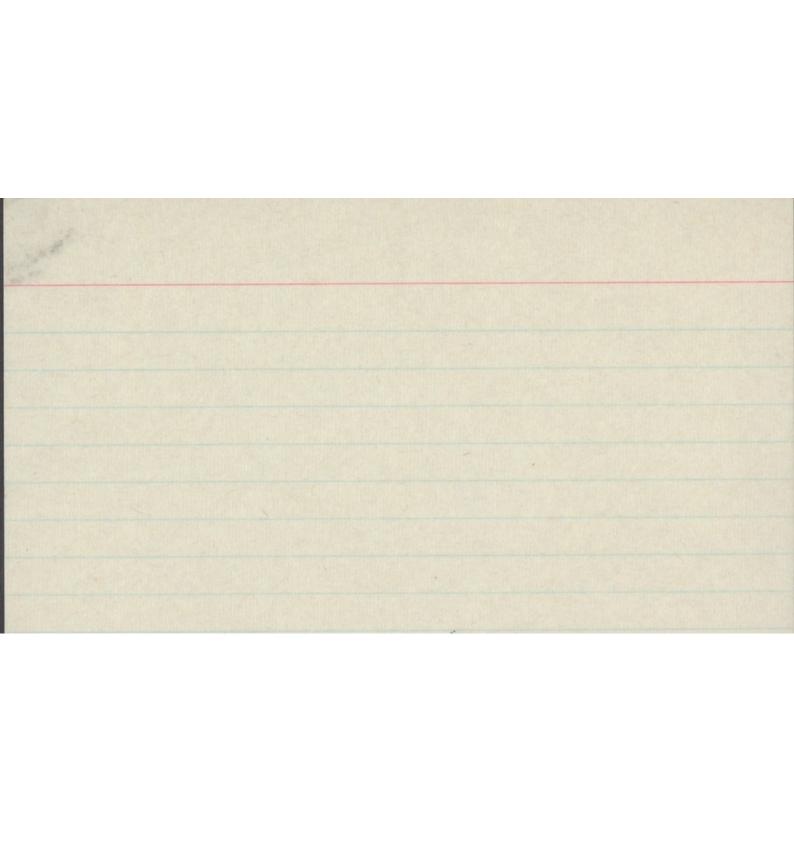
Chief Chiropodists - E.V. Gregory, M. Lewis Chiropodists - Full-time (3 + 2 vacancies), Sessional (15)

Joint Public Analysts - H. Amphlett-Williams, J.S. Lea, J.H. Shelton

M.O.H. Hackpay (L.B.) A/Ryt. 1970

Dr. Waiter 16 NOV 1971 River 16 AMAY 1912

DR. WAITER D307 25 AUG 1972 18261 d35 1-1



MATERNAL AND CHILD HEALTH ESTABLISHMENTS

Particulars of clinics and services provided as at 31st December, 1970

Centre	Ante- and Post-Natal	*Child Health	Vaccination & Immunisation	Food Sales	Nursery group	Family Planning	Dental	Chiropody
BARTON HOUSE 233 Albion Road, N16 9JT Telephone: 254-4704 Medical Officer - Dr. B. Pfitzner Centre Superintendent - Miss D. Mackenzie	The second secon	M. p.m. W. p.m. F. a.m. her services: Min					Every day a.m. & p.m. plus Monday and Thursday evening	Every day a.m. & p.m. plus Monday and Thursday evenings
CRANSTON Cranston Estate, N. 1.		Th. p.m.		Th. p.m.				
ELSDALE STREET 28 Elsdale Street, E9 6QY Telephone: 985-5368 Medical Officer - Dr. F.M. Pisher Centre Superintendent - Mrs. E.G. Mikesch	Alternate Th. p.m.	M. a.m.&p.m. W. p.m.	Tu. p.m.	M. a.m.&p.m. Tu. p.m. W. a.m.&p.m. Th. p.m.	W. a.m. Th. a.m.&p.m. F. a.m.			Every day a.m. & p.m. plus Monday and Tuesday evenings
JOHN SCOTT HEALTH CENTRE Woodberry Down, Green Lanes N4 2NU Telephone: 800-0111 Medical Officer - Dr. K. Sultana Centre Superintendent - Miss V. Packer	F. a.m. a cytology, Tu. p.m. & evening	M. p.m. Tu. p.m. Th. p.m. vices: Audiolody nd p.m. Auditory alt. Tu. evenings wothers' Club, W. Th. a.m. & even Tu. a.m. & p.m.	Training for t , Minor Ailments p.m. Orthoptic ing. Special Inv	the Young Deaf, s, every morning, cs, Tu. p.m., F. a. m vestigation Clini	by appointment. Mothercraft & Rel n. Physiotherapy, c, W. p.m. Speech	Cervical axation, M. a.m. Therapy,	Every day a.m. & p.m. plus Monday and Thursday evenings	M. a.m., p.m & evenin Tu. a.m. & p.m W. a.m. & p.m Th. a.m., p.m & evenin F. a.m.
KINGSMEAD 5/6 Templemead House, Kingsmead Estate, E.9. Telephone: 985-3987		W. p.m.	W. p.m.					
LOWER CLAPTON 6 Lower Clapton Road, E5 OPB Telephone: 985-2316 Medical Officer - Dr. G. Capper Centre Superintendent - Miss L.F.D. Fitzgerald	Alt. W. a.m.	M. p.m. Tu. a.m. & p.m. Th. p.m.	F. p.m.	Every day a.m. & p.m.		M. evening (FPA) W. evening (FPA) Th. evening		
Wroo P'L'D' LifeBergin	Other ser	vices: Cervical		Tu. evening. Mo		laxation,		

^{*} In addition to Child Health Clinics, Toddlers Clinics are held at all centres by appointment.

Centre	Ante- and Post-Natal	*Child Health	Vaccination & Immunisation	Food Sales	Nursery group	Family Planning	Dental	Chiropody
RICHMOND ROAD 136 Richmond Road, E8 3AN Telephone: 254-6374 Medical Officer - Dr. M.E.E. Knowlson Centre Superintendent - Mrs. P. Craighton-Gutteridge	М. р.ш.	W. a.m.&p.m. Th. p.m. F. a.m. Other services:	Tu. p.m.	M. p.m. Tu. p.m. W. a.m. &p.m. Th. p.m. F. a.m. &p.m.	M. a.m. &p.m. Tu. a.m. Th. a.m.	Tu. a.m. Alt Tu. evening (FPA) Th. a.m. Th. evening (FPA)	Every day a.m. & p.m.	M. a.m., p.m. & evening Tu. a.m.&p.m. W. a.m.&p.m. Th. p.m. & evening F. a.m.&p.m.
SHOREDITCH HEALTH CENTRE 210 Kingsland Road, E2 8ED Telephone: 739-8351 Medicial Officer - Dr. Y.B. Khan Centre Superintendent - Mrs. A. Butler	Minor A Th. ever	ilments, every m ning. Special A	orning. Sewing (dvisory Clinic,	Every day a.m. & p.m. F. a.m. Marriage Class, Tu. p.m. Sn Th. a.m. Special Tu. a.m. & p.m. V	nokers Advisory (Investigation (Clinic,	Every day a.m. & p.m. plus Monday, Tuesday and Wednesday evenings	M. a.m., p.m. & evening Tu. a.m., p.m. & evening W. a.m., p.m. & evening Th. a.m. (Further sessions are held at the Goodwill Mission, New North Road N. 1)
UPPER CLAPTON 186 Upper Clapton Road, E5 9DH Telephone: 806-2420 Medical Officer - Dr. M.E. Ure Centre Superintendent - Miss A. Edwards	М. а.т.&р.т.	Tu. a.m.&p.m. W. a.m.&p.m.	Th. p.m.	M. a.m. Tu. a.m.&p.m. W. a.m.&p.m. F. a.m.	orning.			
WEST HACKNEY St. Paul's Church Hall, Evering Road, N16 7QB Telephone: 254-3132 Medical Officer - Dr. J. Mannall Centre Superintendent - Mrs. B. Clark	(Due to the b	Tu. a.m.&p.m. Th. a.m.&p.m.	M. p.m.	M. a.m. Tu. a.m.&p.m. Th. a.m.&p.m.	nay be revised in	n latter part of	1971.)	
WICK 29 Cadogan Terrace, E9 5EQ Telephone: 985-6808 Medical Officer — Dr. B. Subramanian Centre Superintendent —		M. p.m.	F. p.m.	M. p.m. F. p.m.			Every day a.m. & p.m.	
Mrs. E.G. Mikesch								

^{*} In addition to Child Health Clinics, Toddlers Clinics are held at all centres by appointment.

CHEST CLINICS		Tele	phone
Chest Clinic, London Chest Hospital, Victoria Park, E. Metropolitan Chest Clinic, 335 Kingsland Road, E8 4DS Shoreditch Chest Clinic, 204 Hoxton Street, N1 5LH	2 9JS	980 1214 254 2156 8	Ext. 5
DAY NURSERIES	No. of approved places	01-980 3	
Fernbank, 1A Fountayne Road, N16 7EA	56		4463
Hillside, 1 Leatherhead Close, Holmleigh Road, N16 5Q			7325
St. John's, St. John's Churchyard, Mare Street, E8 1H	P 51		2993
Sun Babies, Branch Place, N1 5PH	60		3950
Victorian, Victorian Grove, N16 8EZ Wetherell, Wetherell Road, E9 7DB	60 50		6197 5705
Woodberry Down, Green Lanes, N4 7NU	42		0111
CLEANSING AND DISINFECTING			
THE TOTAL PROPERTY OF THE PROP			
Millfields Road, E5 OAR Shoreditch Health Centre, 210 Kingsland Road, E2 8ED			5930
Shorediton hearth Centre, 210 kingstand Road, E2 6ED		139	8351
HOME HELP OFFICES			
Barton House, 233 Albion Road, N16 9JT		254	4704
Elsdale Street, 28 Elsdale Street, E9 6QY			4283
Shoreditch, 210 Kingsland Road, E2 8ED Upper Clapton, 186 Upper Clapton Road, E5 9DH			8897
opper Clapton, 166 opper Clapton Road, E5 9DH		806	1415
HOME NURSING			
Hackney, 8 Lower Clapton Road, E5 OPB		985	58 13
MENTAL HEALTH DAY CENTRES	No. of Places		
Clifton Lodge, 96 Dalston Lane, E8 1NG	40	254	5945
Hindle House, Arcola Street, E8 2DJ	30		1181
Shoreditch, Dawson Street, E2 8JU	20	739	4102
MENTAL HEALTH SPECIAL CARE UNITS			
Hackney, Ickburgh Road, E5 8AD	12	806	4638
Millfields, Millfields Road, E5 OAR	20	985	1140
MENTAL HEALTH TRAINING CENTRES			
Hackney, Ickburgh Road, E5 8AD	75	806	4638
Homerton, Morning Lane, E9 6LG	120		3123
MODITIMANY		Ext.	н. 343
MORTUARY		0.05	2808
St. John's Churchyard, Mare Street, E8 1HP		900	2000
NURSERY GROUPS			
Hawksley Court, Albion Road, N16 9JT			

Hawksley Court, Albion Road, N16 9JT

M. p.m., Tu. and W. a.m. and p.m. Th. p.m.

Elsdale Street Maternal and Child Health Centre, 28 Elsdale Street, E9 6QX

W. a.m. Th. a.m. and p.m. F. a.m.

Florence Court, Kenninghall Road, E5 8BU

M. a.m. Tu. a.m. W. p.m. Th. p.m.

John Scott Health Centre, Woodberry Down, Green Lanes, N4 2NU

Every day a.m. and p.m.

Richmond Road Maternal and Child Health Centre, 136 Richmond Road, E8 3HN

M. a.m. Tu. a.m. Th. a.m.

George Downing Estate, Cazenove Road, N16

M. p.m. Tu. and W. a.m. and p.m. Th. a.m. F. a.m.

SCHOOL TREATMENT CENTRE Hackney, 13 Goulton Road, E5 8HA

CHOOL TREATMENT CENTRE
school, is doubton nond, as and

HEALTH DEPARTMENT,
MUNICIPAL OFFICES,
380 OLD STREET,
EC1 V9LS

Telephone: 01-986 3123

To His Worship the Mayor, and the Aldermen and Councillors of the London Borough of Hackney

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my Annual Report for 1970 on the health of the borough.

The overall staffing position in the Department continued much the same throughout the year. However, there was an improvement in the key sector of health visitors; this was largely brought about by the improvement in the intake of student health visitors during the previous year. The students qualified towards the end of 1970 and have now commenced their duties. This has enabled the Department to re-assess its approach to the attachment of health visitors to general practitioners. A series of discussions with interested general practitioners has taken place during the year and, although nothing had been concluded by the end of 1970, at the time of writing this Report, attachment had taken place to one of the health centres and to certain practitioners in the Borough. The position as regards the recruitment of nursery staff remained much the same as reported in the Annual Report for 1969. I can only reiterate what I said then that in view of the importance of day nurseries in a borough such as this the need to attract recruits to this service is vital. The Health and Administration Committees have done their best in the way of giving incentives, but the salaries negotiated nationally by the Whitley Council are such as to mitigate against any local efforts to obtain recruits to the nursery service. The rewards offered locally by industry and commerce are far in excess of that a nursery nurse can expect for undertaking a difficult and arduous job, and it is perhaps today asking too much of young girls to have nothing but an altruistic approach to this vital service.

The senior staff of the Department remained very much the same with the exceptions of the Chief Administrative Assistant and the Co-ordinating Nursing Officer. Mr. Pike, who had given many years of good service to the London County Council, and had been the Chief Administrative Assistant of the Department since its inception in 1965, retired in July. Similarly, Miss Arrow, the Co-ordinating Nursing Officer, who had given a lifetime to the care of mothers, young children and school children in the London area, was the Divisional Nursing Officer in Division 4 of the London County Council and became the Borough's first Co-ordinating Nursing Officer in April 1965.

The population of the Borough continues to decline. This is probably due partly to emigration from the Borough and partly to a continuing decline in the birth rate. The fall in the birth rate in the Borough is in line with the national decline, although the rate of decline within Hackney is probably slightly higher than the rate of the national decline. Although the birth rate has declined, the number of marriages during the last year showed a marked increase. The illegitimate birth rate within the Borough has again shown an increase and the rate is well over double that for England and Wales. However, this should not be looked at in isolation, but should be correlated with the many factors involved in the social structure of London and of the Borough in particular.

As was mentioned in the 1969 Report, the number of domiciliary births in the Borough has fallen to a very low level. During theyear the two domiciliary services - that of the Mothers' Hospital and the Borough midwifery service - were merged and there has been one overall service since the 1st April.

The midwifery bed situation of the hospitals in the area is now such that in Hackney there could probably be 100% hospital confinement if all women wished it. However, some women still choose to have their babies at home and there will obviously be a need for a domiciliary midwifery service for some time to come. The Borough has now reached the happy position where a woman may make her choice of what form of confinement she wishes to have. As all the facilities exist, although the first concern must be the safety of the mother and baby, mothers have the choice of a hospital ante-natal care and confinement or of a mixture of hospital and general practitioner ante-natal care and domiciliary confinement, and a further facility of hospital confinement but of planned early discharge.

The Borough continues to run a full family planning service. The service is still run partly by the Family Planning Association and partly directly by the Health Department. The figures available seem to show that the numbers attending the Council's clinics are rising whereas those attending the Family Planning Association sessions are showing some decline. The clinics are open to all irrespective of whether the women live in the Borough or not, and are open to both the married and unmarried. In addition to the ordinary clinics there is a clinic run to give advice and, where necessary, the appropriate services to young people. The need for advice to young people was considered to be such that an extra session was made available during the year for this purpose. It was thought that certain of the young people would prefer a more detailed discussion with certain of the staff than had been previously possible. Unfortunately this has not been quite the success it was hoped it would be. I still feel that there are many people, particularly young people, in the Borough who are not aware of the facilities which are available, and discussions have taken place during the writing of this Report to see how this knowledge can be better disseminated. I also regret to report that the domiciliary family planning service that is available is not being used as much as one had anticipated. It is a little difficult to understand the reason for this. is possible that some of the cases where it was needed have been dealt with and that there are not now the number of people needing this type of service. However, I really think this is not the case and again I feel that there is a need to inform people of the Borough that this service exists should they wish to take advantage of it.

The Women's National Cancer Control Campaign mobile caravan again visited the Borough to undertake cervical cytology, but was not quite the success it was in previous years. However, the standing clinics have been well attended and numbers attending show a slight increase. The Health Committee have agreed that the caravan should visit again during 1971.

The normal services for the young child continued. Great emphasis was placed during the year on the problem of the "battered baby" and many discussions took place between the various Departments of the Council and interested outside bodies such as the various hospital services and other statutory and non-statutory bodies. A modus operandi was worked out and agreed between these various organisations during the year.

A further playgroup run directly by the Council was instituted during 1970 and interest continued to be shown by various groups of mothers in the formation of private playgroups. The Council continued to support playgroups by various grants and a certain amount of money was received which could be utilized for this purpose under the scheme for Urban Aid. Negotiations have been proceeding for some little time with the Inner London Education Authority for the opening of further nursery schools and nursery classes, and it is hoped that the Inner London Education Authority will take over the premises at Fellows Court, previously used as a playgroup, for the purposes of nursery education early in 1971.

The need for playgroups and nursery education in a Borough of this nature cannot be over-emphasized. The necessity to relieve young mothers for part of the day, and the needs for the socialisation of young children living in blocks of flats, or even in houses where there are no facilities to play with other children, is very great. It is estimated that some facilities or other probably exist for approximately 16% of the children in the Borough between the ages of 3-5 to have supervised care outside their own homes for part of the week. Although the prime person to care for a child of this age is obviously the mother, in the type of urban society within this Borough there are probably now less opportunities for children of this age to meet other children and to meet aunties, uncles, grandmothers, etc., than existed previously than exists in the less urbanized parts of the country.

Immunisation continued to be carried out throughout the year and the numbers attending for measles vaccination showed a rise over the previous year. The year saw the beginning of a system of computerisation of immunisation schedules for young children. This service was available not only for children attending the maternal and child health services of the Health Department, but was made available to general practitioners. The computer provides not only for recording of immunisation, but for sending off appointments at appropriate times for the child to attend for immunisation and re-immunisation.

The year saw the process of building of the Somerford Grove Health Centre, the first new health centre to be built in the London Borough of Hackney. At the time of the preparation of this Preface it had just been completed. Several health centres are planned for the Borough and also at the time of the preparation of this Preface two other health centres had commenced building, the one at Barton House and the one at Clapton Park. Negotiations at health centres have taken up a great deal of time of the Department. The necessity to make equitable charges to general practitioners working in the centres so as to provide a better service for the people of the Borough, with the economics of running the centre has been difficult, and at the end of the year these negotiations were still in progress.

The mental health services continued throughout the year. Steps had been taken to reorganise the basis of the mental health service into areas in such a way that they would fit in to the area concept of the new Social Services Department. Although no work has commenced on the adaptation of the Territorial Army building in Albion Road nor on the provision of the junior hostels in Green Lanes, the position had been virtually finalized by the end of the year and it is hoped that actual work will commence on these buildings during 1971.

The Report again embodies a section on the work of the School Health Service and the School Dental Service. Although these are not the direct concern of the Borough Council, as they affect the health of the children of the Borough, these sections make interesting reading. It is interesting to note that a special survey showed that only 25% of the 5 year old children had no decayed teeth, which emphasized the continued need for care for both the physical and dental health of young children.

There was no major epidemic during the year, although there was some increase in the number of cases of measles. This disease seems to have lost its previous biennial pattern possibly because of vaccination. The main causes of death remain similar to previous years; again the number of cases of cancer of the lung causes concern.

1970 saw a repeat of the problem that had arisen in 1969 - the effects of a major and prolonged strike by the dustmen and certain allied services. The problem of uncollected refuse again threw a severe burden on the Department for which the whole of its resources had to be mobilised. Again there was good co-operation between the Unions concerned and officers of the Department to keep any danger to a minimum consistent with the actual strike conditions.

It is again pleasing to report that there was no major illness or any other untoward effect directly attributable to the strike.

The environmental problems continued as in previous years with housing as one of the pre-eminent problems in the Borough.

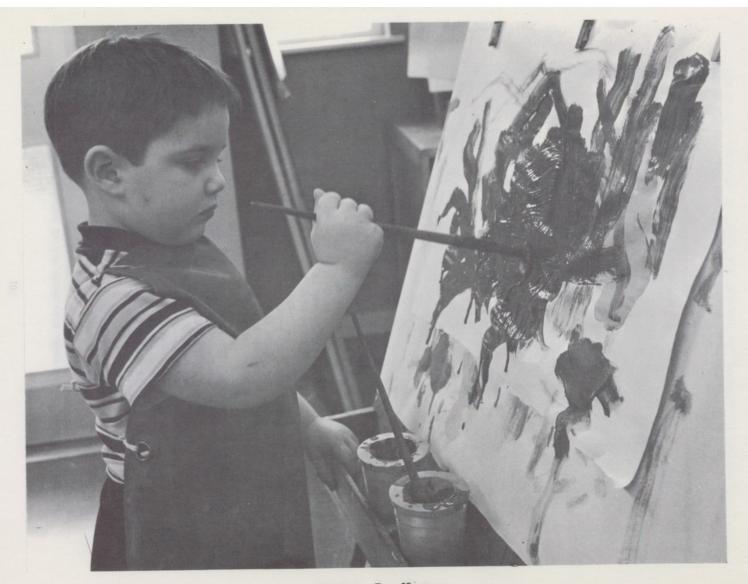
The year was one of unsettlement and anticipation following the Local Authority Social Services Act in July 1970. The latter part of the year saw the commencement of work towards re-arrangement of the Department to fit in to the new Social Services Department which will come into being on the 1st April, 1971. There were also changes necessary because of the Education (Handicapped Children) Act, 1970. The ultimate effects of this legislation will only be seen during 1971, and their effects will be reported on in the Annual Report of that year. At the same time there are movements towards a unified Health Service and undoubtedly consideration will have to be given to these.

I would again like to express my thanks to the Chairman of the Health Committee and to the Members for their assistance and help during the year, also to all the Chief Officers of the Council and their staffs for their help during the year, and also to the Inner London Education Authority and its officers for their help and co-operation. I would again stress that although this report is put out under my name, it could only be written because all the officers of the Department contribute by their work to the running of the Department, and I would again take this opportunity of thanking them all for their co-operation and help.

I am, Mr. Mayor, Ladies and Gentlemen,
Your obedient servant,
ROWLAND GWYN DAVIES

Medical Officer of Health

VITAL STATISTICS



Painting - Day Nursery

VITAL STATISTICS

Area			. 3					4.814	acres
Public open spaces									acres
Population									
Estimate of Registrar Gene	eral at	mid-y	ear 19	70		Dan I	o man	2	33, 490
Density per acre		,							48.5
Rateable Value									
Rateable value of the Boro	ugh							£14, 8	46,826
Estimated product of a pen								£	57, 450
Number of inhabited homes		la!	19000						67,820
Marriages			heta						1, 587
Served and distance and									
Births and Deaths									
Edward & Park	L	egitima	te	11	legitim	ate		Total	112
Model Cinorders 574.	Male	Female	Total	Male	Female	Total	Male	Femal e	Total
Live Births	1,722	1,652	3, 374	413	358	771	2, 135	2,010	4. 145
Still Births	24		48	5	4	9	29	28	57
Live and Still Births	1,746	1, 676	3, 422	418	362	780	2, 164	2,038	4, 202
Deaths (all causes)	-	4	-	-	-	-	1, 38 4	1, 359	2,743
Infant Mortality	46	21	67	15	12	27	61		94
Neo-natal Mortality	34	12	46	12	9	21	46	21	67
Early Neo-natal Mortality	30	10	40	12	9	21	42	19	61
Perinatal Mortality	54	34	88	17	13	30	71	47	118
Admired and or san't a	BULBER	100	Y ST.	DAKE.	HL HL	500 T	7 191	mass.	00 000
Crude birth rate per 1,000 p	onulati								
Adjusted birth rate (area									
Circumia of liver - and	G 200 I				100131				
Illegitimate hirth rate per	cent of	tota	live	hir	the				19.0
Illegitimate birth rate per Illegitimate birth rate fo	r Great	er Lor	ndon			a la tri	100		11.0
Illegitimate birth rate fo	or Engla	and and	d Wale	S	II Library				8.0
Union-manage as grassave	110000								
Stillbirth rate per 1,000 li	ve and	still	birth	s		a I non	Dung!		14.0
					1028114		a guru j		
Death rate									
Crude Death rate per 1,000									11.7
Adjusted Death rate (area									12.9
Infant Mortality rate per (Legitimate 20, Illegiti			rths						23.0
Neo-natal Mortality rate	er 1 00	00 liv	e birt	hs					16.0
Neo-natal Mortality rate p Early Neo-natal Mortality	rate pe	r 1.00	00 liv	e bi	rths				15.0
Perinatal Mortality rate p	per 1,00	0 liv	e and	still	birth	S .			28.0
Maternal Mortality rate pe	er 1,000	live	and s	till	births				Nil

Comparative Table of Births and Deaths

	Live	Still Births	Deaths	Infant	Neonatal Mortality	Early Neonatal Mortality	Perinatal Mortality
England and Wales	16.0	13	11. 7	18	12	11	23
London Borough of Hackney	16.2	14	12. 9	23	16	15	28

Premature Babies

		Pr	emature	live b	irths				
	Born in hospital				Born a	t home		ature births	and
			Died					orn	live
Weight at birth	Total births in hospital	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days	Nursed entirely at home	Transferred to hospital on or before 28th day	In hospital	At home	Total premature liv
Up to and including 3 lb. 4 ozs.	35	21	6	2	-	-	15	1-0	50
Over 3 lb. 4 ozs. and up to and including 5 lb. 8 ozs.	287	5	10	2	10	3	21	3	311
Total	322	26	16	4	10	3	36	3	361

DEATHS

The number of deaths in 1970, 2,741 as against 2,793 in 1969, showed that the pattern of causes of death remained the same.

An analysis of the 94 deaths of infants under one year of age shows that 74 were due to peri-natal causes, birth injuries and congenital anomalies and that 20 were due to an infection. Details are set out below:-

Analysis of deaths of chi	ldren unde	er one	year o	f age
Enteritis				3
Meningococcal infection				1
Other forms of heart diseas	se			1
Avitaminoses, etc				1
Pneumonia				8
Other respiratory causes				- 8
Congenital anomalies				18
Birth injury				23
Other causes of perinatal	nortality			27
Symptoms and ill-defined co				1
All other accidents		11.		2
All other external causes				1

ANALYSIS OF DEATHS (ALL CAUSES)			Males	Females	Total
Enteritis and other Diarrhoeal diseases	3		2	2	4
Tuberculosis of respiratory system .			2		2
Late effects of respiratory tuberculosi			2	The same	- 2
Meningococcal infection				1 1	1
Syphilis and its sequelae			1	-	1
Other infective and parasitic diseases.			-	1	1
Malignant neoplasm - buccal cavity etc.			6	-	6
Malginant neoplasm - oesophegus			6	9	15
			42	28	70
			29	33	62
			2	-	2
			164	26	190
Maladanak annalan basas			-	71	71
W-1-7				24	24
Malginant neoplasm - prostate			17		17
			4	5	9
Other malignant neoplasms, etc			72	76	148
Benign and unspecified neoplasms .	•	1.	2	5	7
Diabetes mellitus			8	25	33
			0	2	
0// 1 1 1 1			1	2	2
			5	7	12
041 11 0 111 -+-			1	the state of the state of	14
W - t - Y - AZ			1	9	1
			1	3	4
			2	1	3
			3	1	4
Other diseases of nervous system, etc.			15	7	22
Chronic rheumatic heart disease			14	24	38
			16	22	38
			371	266	636
			38	63	101
Cerebrovascular disease			93	185	278
Other diseases of circulatory system .			36	75	111
Influenza			5	9	14
			129	184	313
Bronchitis and emphysema			116	40	156
			, , , _	6	6
Other diseases of respiratory system .			17	9	26
Peptic ulcer			10	12	22
Intestinal obstruction and hernia .			3	5	8
Cirrhosis of liver			3	2	5
Other diseases of digestive system .			16		34
Nephritis and nephrosis			6	4	10
			4	-	4
Other diseases of genito-urinary system	1		8	13	21
Diseases of skin, subcutaneous tissue .				2	2
Diseases of musculo-skeletal system .			2	20	22
Congenital anomalies			13	11	24
Birth injury, difficult labour, etc			16	7	23
Other causes of perinatal mortality .			19	8	27
Symptoms and ill-defined conditions .			2	9	11
Motor vehicle accidents			11	7	18
All other accidents			20	19	39
			20	8	28
			6	2	8

CAUSES OF DEATH IN AGE GROUPS

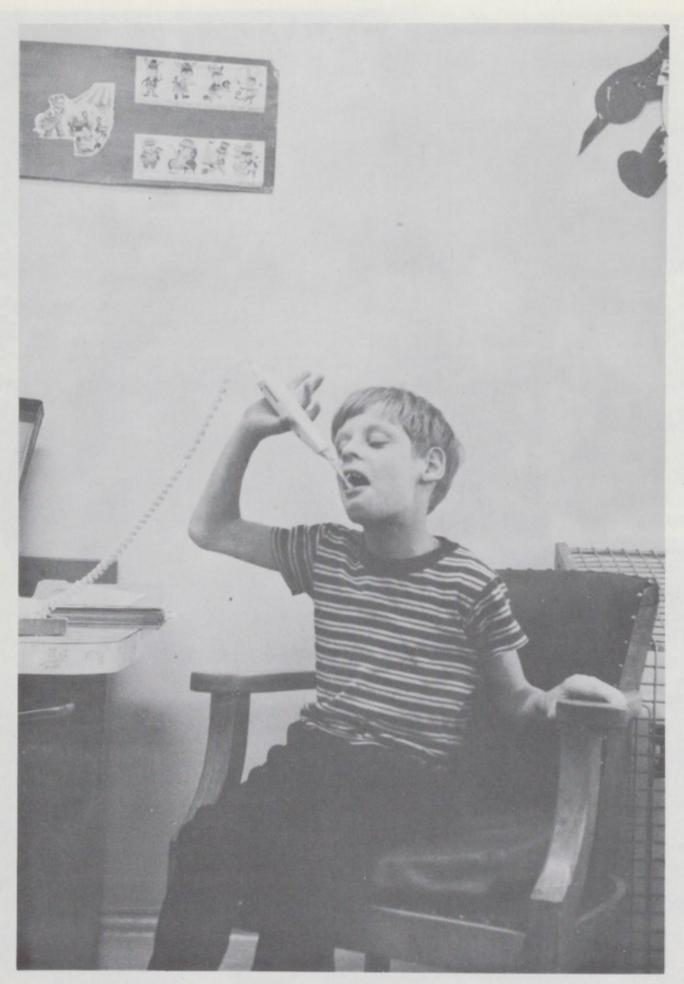
		1000	eeks	and				Ag	e i	n y	ears	2017	0 1 15
Cause of death	Sex	Total all	Under 4 weel	4 weeks a	판	5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 and
Enteritis and other diarrhoeal diseases	MF	2		1	1	-	-	-	-	-	-	-	
Tuberculosis of respiratory system	M	2 2	-	2	-	-	-	-	1	-	-	1	
Late effects of respiratory tuberculosis	F	2	-	-	-	-	-	-	-	-	2	-	
Meningococcal infection	F	-	-	-	-	-	-	-	-	-	-	-	o La
Syphilis and its sequelae	F	1	-	1	-	-	-	-	-	1	-		
Other infective and parasitic diseases	F	-	-	-	-	-	-	-	-	-	-	-	100
Malignant neoplasm, buccal cavity, etc.	F	1 6	-	-	-	-	-	-	1	1	1	2	
Malignant neoplasm, oesophegus	F	- 6	-	-	-	-	-	-	1	1	1	1	
Malignant neoplasm, stomach	F	9 42	-	-	-	-	-	-	2	- 6	1 5	4 15	1
	F	28	-	-	-	-	-	-	-	1	4	9	1
Malignant neoplasm, intestine	F	29 33	-	-	-	-	-	1	-	-	7	12 12	1
Malignant neoplasm, larynx	M F	2	-	-	-	-	-	-	-	-	-	1 -	ine
Malignant neoplasm, lung, bronchus	M F	164 26	-	-	-	-	-	-	5 -	7 2	48	78 8	1
Malignant neoplasm, breast	M F	71	-	-	-	-	-	1	6	14	15	21	1
Malignant neoplasm, uterus Malignant neoplasm, prostate	F	24 17	-	-	-	-	-	1	1 -	3	10	6 4	1
Leukaemia	MF	5	-	-	-	-	1		-	-	1	3	
Other malignant neoplasms, etc.	MF	72 76	-	-	1	2	1	1	3 5	5 9	27 11	20 23	1 2
Benigh and unspecified neoplasms	MF	2 5	-	-	1	-	1	-	1	-	1	2	
Diabetes mellitus	MF	8 25	-	-	-	-	-	1	1	1	2	3 7	1
Avitaminoses, etc.	MF	-	-	-	-		-	-	-	-	-	-	
Other endocrine etc. diseases	M	2 4 2 5 7	-	1 -	-	-	-	-	-	1	-	3	503
Anaemias	F	5	-	-	1	-	-	-	-	-	1	1	
Other diseases of blood, etc.	F	1	-	-	-	-	-	1 -	-	-	1	2 -	n da
Mental disorders	F	1	-	-	-	-	-	-	-	-		1351	nge
Meningitis	F	3 2 1	-	-	-	-	-	-	1	1 -	1	11.	100
Multiple sclerosis	F	1 3	-	-	-	-	-	1	-	1	1	1	
Other diseases of nervous system, etc.	F	1 15	-	-	-	1	-	1	2	3	1 1 2	1	ad
Chronic rheumatic heart disease	F	7 14	-	-	-	=	1	2	1	1	-	2 6	12 P
Hypertensive disease	F	24 16	-	-	-	-	-	-	2	4 2	3 5 3	8	
Ischaemic heart disease	F	24 371	-	-	-	-	-	- 2	- 6	1 38	3 98	7 134	1 9
Other forms of heart disease	F	266	-	-	-	-	-	1	-	5	35	80	14
Owner forms of near consense	F	38 63	-	1	-	-	-	-	1	3	7 3	8	4

			8 3	and				Age	ir	1 уе	ars		
Causes of death	Sex	Total all Ages	Under 4 week	4 weeks a	1 - 4	5 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75 and
Cerebrovascular disease	M	93	-	-	-	-	- 0	-	2	6	13	25	47
Other diseases of circulatory system	F M F	185 36 75	-	-	-	1 1 1	2		5 - 1	3	14 7 3	6 11	114
Influenza	MF	5 9	-	-	1		1	1 1	1	1 1	-	1 3	
Pn eumonia	M	129 184	1	7		1	2		- 1	7	10 11	29	7:
Bronchitis and Emphysema	MF	116	-	-			101	-	1	4	18	39 11	54
Asthma	MF	- 6		-	-		-	- 1	1	- 1	- 1	11	
Other diseases of respiratory system	MF	17 9	1	3 4	1	-	-	-	-	1	1	8 2	1
Peptic ulcer	MF	10 12		-	-			1 1		1 1	1	3 2	8
Intestinal obstruction and hernia	MF	3 5	- 1	-				1 1	1	-	1 1	- 2	
Cirrhosis of liver	M F	3 2		-		1 1		1 1	1		1 2	1	
Other diseases of digestive system	M F	16 18	1 1	-			- 1		-	3	5	4	1
Nephritis and nephrosis	M F	6 4		-	-			1 -	-	1 1	1 -	2 2	
Hyperplasia of prostate Other diseases of Genito-urinary system	M M F	4 8 13	1 1 1	1 1 1		1 1 1	1 1 1	1		1 1 1	2 2	1 2 3	
Diseases of skin, subcutaneous tissue	M F	- 2	-	-	-	-	-	-	-	-	1	-	
Diseases of musculo-skeletal system	M F	20	1 1	-	- 1	1 1		- 1		1	2	4	13
Congenital anomalies	M F	13 11	9	3	2	2	-	-	1 1	-	-	-	
Birth injury, difficult labour, etc.	M F	16 7	16 7	-	-	-	-		-		-	-	
Other causes of perinatal mortality	M F	19 8	19 8	-	-	-	-	-		-	-	1 1	
Symptoms and ill-defined conditions	M F	9		1	-	-	-	-		-	-	-	8
Motor vehicle accidents	M F	11 7	1 1	-	1 -	- 0	5	1 -	1	1	2	-	
All other accidents	M F M	20 19	1 1 1	2	5 2	1	2 - 3	3 - 4	1 1 3	- 2	2 2 4	3 3	8
Suicide and self-inflicted injuries All other external causes	F	20 8 6		1			1	1 1	1 1	3	2	1	0.
ar outer external causes	F	2	-	-	-	-	-	-	1	-	1	-	
Total all causes	M F	1, 384 1, 359		15 12	10 5	6 3	15 4		38 29		279 164		436
Total		2, 743	67	27	15	9	19	27	67	16 5	443	729	117



Reading Corner - Hillside Day Nursery

PERSONAL HEALTH SERVICES



Dental Care - Special Care Unit

CARE OF MOTHERS AND CHILDREN

ANTE-NATAL CARE

Attendances at antenatal and postnatal clinics have again shown a considerable drop and overall fell by approximately 25%.

The number of sessions held has been correspondingly reduced and at three centres (Lower Clapton Road, Upper Clapton Road and Barton House) sessions previously held weekly are now held fortnightly. At Shoreditch Health Centre, where attendances at the fortnightly clinic had shown a similar decline, it was decided to retain half of the session for antenatal patients and use the remainder to relieve the hard-pressed I U D session held at this centre.

The general provision of antenatal clinics was under consideration at the end of theyear in the light of the Peel Committee's recommendation that "general practitioner obstetricians should provide all the antenatal and postnatal care at present given by local authority doctors".

L 11.5 1.883 1.290	THE RESERVE	Number of attende	Glen Debissi	
Centre	No. of sessions			Total attendances
Barton House	51	119	57	578
Elsdale Street	24	55	82	20 2
John Scott	25	47	28	131
Lower Clapton	33	30	103	200
Richmond Road	49	89	80	367
Shoreditch	25	28	30	91
Upper Clapton	48	96	55	260
Total	255	464	435	1,829

Education classes have been held for expectant mothers. The subjects dealt with include the preparation of women for labour, the care of their health during pregnancy and also many facets of the care of their young babies such as sewing and dressmaking. Attendances at these classes dropped a little, consequent upon the fewer births.

The number of women who attended during 1970 is shown below: -

Total attendances 808
Number of sessions 120

There were no maternal deaths in the borough during the year.

CHILD HEALTH CENTRES

The fall in the birth rate has continued and is reflected in lower attendance figures for children born in 1970 and 1969 and in total attendances.

Figures for attendances at Child Health Centres in 1970 are tabulated over-leaf.

Number of children who attended Council clinics during 1970:-

Who were born in 1970	 	 3, 246
Who were born in 1969	 	 3, 120
Who were born in 1965-68	 	 4,661
Total attendances	 	 38, 515
Number of sessions	 	 1, 855
Number medically examined	 	 19,036
Number referred elsewhere		 544

Child Health Attendances

odr oop bie elfeddig Lain odr oop bie elfeddig Lain opsky biel fa wiel opsky biel bire tober ferebegt tedl sillarosynosi	Barton House	Shoreditch H.C. (inc. Cranston)	Elsdale Street (inc. Wick)	John Scott H. C.	Lower Clapton	Richmond Road	Upper Clapton	West Hackney
Estimated population served								
by the Centre	23,000	35, 000	36,000	28,000	32,000	31,000	36,000	13,000
attended	1, 511	1, 141	1,794	8 53	1, 434	1, 313	1,682	1, 299
Total attendances	4,914				5, 371	4, 161	4,838	4,676
Number of sessions Number of children medically			700000000000000000000000000000000000000		248	252	244	192
examined	2,310	1,950	2,830	1,851	2,677	2, 343	2, 793	2, 282
Number referred elsewhere Average attendance per	124		35	90	63	14	144	47
session	24	22	20	20	22	17	20	24
Per cent medically examined Per cent referred by M.O.	47	47	44	46	50	56	58	49
elsewhere	5	1	1	5	2	1	5	2

General practitioners now receive the results of the yearly developmental examinations carried out on children who are on their lists. Two new forms have been devised for this purpose - one to report a satisfactory result and the second for details of any handicapping condition or physical defect which may have been detected. Brief details are recorded in the child's examination record card (Form MCW 46), which is being redesigned to facilitate the recording of this more detailed examination procedure.

A new poster, advertising the efficacy of the "Ready for School" examination which is carried out between the ages of four and four and ahalf will be issued in 1971. Before school entry it is very important to ensure that handicapping conditions have not been missed and to check vision, hearing and speech. Certain developmental tests are used to give an indication of intelligence level, dexterity, skill and perseverance. A revised letter to parents urging them to bring their children to the clinic for this examination and for their pre-school immunisation has also been introduced. Percentile weights and heights charts and the graded balls for distance vision testing in babies aged six to twenty four months, the latter test devised by Doctor Mary Sheridan, have been ordered for use in child health centres.

Battered Children

The battering of children is still a subject of great concern and a good deal of attention was focused on it during the year. Following receipt of the Chief Medical Officer's Circular CMO2/70 and Department of Health and Social Security Booklet "The Battered Baby" informal discussions were held to review arrangements between the Medical Officer of Health, Children's Officer and members of their departments.

In September a meeting was held between all workers concerned in the Borough, including hospital consultants, medical social workers, Police, N. S.P. C. C., Inner London Local Medical Committee, Divisional Education Welfare Service, together with representatives of the local authority departments. A scheme was agreed for bringing to the notice of the statutory authorities cases of definite or suspected injury to children. Details of the referral procedure have been circulated to staff of the department and general practitioners, together with the arrangements for collating all relevant information about the families and information of battered or suspected battered children was also overhauled and arrangements made for regular review by health visiting and medical staff.

Observation and Handicap Register:

The Kalamazoo punch card system has been continued and regularly reviewed in order to keep this a live record. Certain slight alterations and additions were made to the observation categories.

With several new full-time and part-time doctors it was felt that a lecture on developmental paediatrics was again due. Doctor Dorothy Egan, a consultant in child health, was invited and gave an excellent lecture/demonstration at the John Scott Health Centre.

Three speakers, a Principal Medical Officer and two Senior Nursing Officers, were also asked to speak to Home Helps in November. The different aspects of child development were discussed.

Assessment Centre:

Informal discussions were held during the year with consultant staff at Queen Elizabeth Hospital for Children, Hackney Road, about plans for an Assessment Centre/Day Hospital. It is hoped that the Centre will develop as an integral part of the health services in the borough with Health Department staff participating.

Congenital Abnormalities:

The notifications to the Registrar General of congenital abnormalities detectable at birth continued during 1970.

This year only 66 abnormalities were detected among 55 babies and details are set out below.

Anencephaly		1	Polydactyly and Syndactyly	14
Hydrocephalus		4	Talipes	17
Spina bifida		5	Defects of hip and limbs	4
Microcephalus		1	Defects of muscles (including	
Defects of ear .		1	umbilical hernia)	1
Cleft lip and palate.		2	Mongolism	2
Defects of alimentar	y system	2	Other specific sydromes	2
Defects of urogenita	1 system	7		-
Reduction deformities	alpost.co.	3		66

Joint Adoption Panel

A Joint Adoption Panel is held at eight-weekly intervals for discussion and decision about prospective adopters. It is attended by Child Care Officers and a Principal Medical Officer. The medical application forms are initially scrutinised by the latter and additional medical information obtained, when relevant.

Finer Committee on one-parent families

Information relating to the following services was submitted by the Health Department for inclusion in the Council's evidence to this Committee; day care facilities for unsupported mothers, home help service, health of children in one-parent families, work of the health visitor and statistics of illegitimate births.

DENTAL SERVICE

During 1970, a total of 514.7 sessions were devoted to the dental care of expectant and nursing mothers, and children under the age of 5 years. Of this number 99.3 (43 in 1969) were utilized for dental health education. The dental ancillary staff have expanded the education aspects of the work at toddlers clinics. This provides mothers with sufficient information to start their children along the correct path to good dental health.

Children - By the end of the year the dental birthday card scheme for three year olds had got under way, but it is too early to assess its effectiveness.

82.6 per cent of children below the age of five years were found to need treatment, which is even higher than the figure for school children. One wonders how much longer this heart-breaking situation must continue before children receive the benefits of fluoridated water.

It is interesting to note that a special examination of day nursery children showed that only 18.1 per cent required treatment. This very low figure is partially a reflection of the good eating habits engendered by the day nursery staff, and partly due to the fact that these children are examined on a regular basis, detecting and treating trouble at an early stage. 3.4 percent of these children had already had teeth extracted, and 8.8 per cent had received fillings. In a questionnaire answered prior to the examination, parents indicated that 78.9 per cent of their children had their teeth cleaned at least once a day, which is very good. Eighteen stated that they knew treatment to be required, but they had not yet done anything about seeking this treatment.

A sample of five-year-old children was examined to see what sort of dental care they had received by the time they first went to school. The following results were obtained without the use of radiographs, so the true figures would undoubtedly be even higher.

	1969	1970
Number of children	1, 170	1, 169
Total number of decayed and untreated teeth	2,816	3, 113
Number of these requiring extraction	151	107
Number of missing teeth	537	650
Number of teeth filled	505	9 26

Thus the average child had a total of at least four teeth which were decayed, missing, and/or filled at the time of commencing school, which again shows that one can ill-afford to wait until children go to school before instituting dental preventive and treatment care.

294 more children attended for treatment than in 1969. Although the number of general anaesthetic attendances increased by two, this is not significant in view of the vast increase in total visits since last year, a further 653.

Once again there has been an increase in the number of emergency visits.

Unfortunately there were 667 failed appointments, which is equivalent to 20.9 per cent of all the appointments given. This is a great waste of everyone's time. If only parents would notify the clinic when they are unable to bring their child, the appointment could be offered to someone else.

44.7 per cent of the children were made dentally fit (26.1 per cent in 1969). There was a large rise in the number of fillings completed, and the ratio of teeth filled to teeth extracted rose from 10.4 to 1, to 14.4 to 1. This quite clearly shows that the dental staff are doing much more to save teeth rather than to remove them. It is partially a reflection of the policy of sending selected officers on post graduate courses and conferences, where they learn about all the up-to-date techniques. They greatly appreciate this facility.

Mothers - The number of visits has more or less remained constant. The ratio of teeth filled to extracted has increased from 2.4 to 1, to 4.8 to 1. Thirty per cent of appointments were not kept.

This is an opportune moment to review the progress of the dental service for pre-school children since the coming together of the three boroughs in 1965. The following table shows the variation of attendance, fillings and extractions

as well a	Attendances	filled for ea	Extractions	Ratio of teeth filled to
MANAGE DA	THE TRUBE SERVICE AND ADDRESS OF THE PERSON		T102200 4 19 B	extracted
1966	762	1, 283	224	4.5 : 1
1967	1, 418	1, 144	184	4.9 : 1
1968	1,808	1, 229	172	6.5 : 1
1969	1, 869	1, 154	100	10.4 : 1
1970	2, 522	1,941	112	14.1 : 1
~				

Statistics

		ren aged 4 years		ant and Mothers
ne dational of this vacatas asversions	1969	1970	1969	1970
1. Inspections (a) Number of first inspections (b) Number requiring treatment (c) Percentages requiring treatment (d) Number offered treatment	529 296 56.0 287	545 450 82.6 443	117 91 76.0 90	115 108 93.9 106
2. Visits for Treatment (a) First visits (b) Subsequent visits	785 1,074	1,079 1,443	264 475	26 1 498
(c) Total visits	1,869	2, 522	- 739	759
(d) Additional coursesof treatment commenced (e) Attendances for general anaesthetic (included in total) (f) Emergencies (included in total)	28 30 97	45 32 114	9 6 54	8 1 34
3. Patients made dentally fit	205	482	85	97
4. Analysis of General Treatment (a) Fillings	1, 154 1, 036 100 8 409 211 N. A. N. A.	1, 941 1, 615 112 5 287 35 N. A	428 388 163 31 124 - 8 3	542 482 100 46 139 11 2 4
5. Prosthetics (a) Patients supplied with full upper and/or lower dentures	dana ta	- 1 2	2 11 24	3 8 14
6. Topical application of Fluoride	73	47	N. A.	N. A.
7. Appointments not kept	296	667	372	326
8. Sessions (a) Treatment	*309.1 * 43.0	310.8 96.8 des mother	N. A. N. A. s' session	104.6 2.5

VACCINATION AND IMMUNISATION

The computer scheme for immunisation recording, mentioned briefly in my 1969 Report, came into operation in Hackney on 1st April 1970. Its aim is to improve acceptance rates by ensuring a better follow up of children who never attend for immunisation or fail to complete courses. Operation of the computer is dealt with by the Computer Division of the London Boroughs' Management Services Unit but the remainder of the work, including clerical details, is dealt with by staff of the Health Department.

Appropriate details of all children born in 1969 and 1970 have been submitted to the computer which also holds the immunisation schedule and details of clinic and surgery sessions. The computer prints out appointment cards and appointment lists for the children as their immunisation becomes due. If any child fails to attend two further appointment cards are sent. Lists of those who still do not attend are then printed out for follow up by the health visitor. The problem of catching up with defaulters rests very largely on the effectiveness of this follow up.

General practitioners in the borough were invited to take part in this scheme and parents are permitted to choose between attending their child health centre or their G.P's. surgery.

It is too soon after only one year's working to pass judgement on the success of the scheme. The 1970 figures do however show a slight increase in the number of completed primary courses in contrast to the downward trend which had continued for some years previously.

In January doctors at immunisation clinics were again reminded of the importance of deep intramuscular injection of adsorbed triple antigen in order to avoid local reactions. Since the introduction of this vaccine several such incidents have been reported.

Measles Vaccination

The campaign to vaccinate children against measles was held back in the early part of the year by breakdown in the supply of vaccine (supplies arranged by the Department of Health and Social Security). These difficulties were not resolved until April when it was possible for routine measles immunisation to be resumed.

Rubella

Advance notice was received in February from the Chief Medical Officer, Department of Health and Social Security, that the Joint Committee on Vaccination and Immunisation were considering the use of Rubella vaccine. Further guidance was received from the Chief Medical Officer in July with the recommendation that the vaccine now available should be offered to girls aged 11 to 14, with priority at the outset to 13 year olds.

Since girls of this age are all attending school a programme on the lines of the present BCG vaccination scheme was arranged. This was discussed beforehand with the Divisional Officer of the Inner London Education Authority and preparatory health education talks were given in schools by teaching staff and Health Department staff. Leaflets and posters were used and a special letters to parents distributed.

Smallpox

In July a complication ensuing after smallpox vaccination was reported to the Dunlop Committee on Safety of Drugs and to the Department of Health and Social Security. Such a satellite vaccinia is relatively uncommon and the two-year old child had to be admitted to the Queen Elizabeth Hospital for Children for treatment.

Diphtheria

During March two children who reside in the London Borough of Wandsworth were found to be carriers of the diphtheria bacillus. Four children at the same school were subsequently found to be harbouring the organism Corynebacterium Diphtheriae, Mitis strain. It was ascertained that the grandmother, living in the same house, was employed in a firm in Hackney. A visit was therefore paid by a Principal Medical Officer and a Senior Nursing Officer. Nose and throat swabs were taken from 15 possible contacts and were all subsequently reported negative for diphtheria.

Influenza

During the autumn, staff at day nurseries, training centres, day centres, home helps who work for 30 hours or more a week, district nurses and midwives were given vaccination against influena

Completed Primary Courses

Le la Billiante Child		MARRIE	Year of	birth	Walter Str		Total		
Type of vaccine or dose		1970	1969	1968	1967	1963- 1966		Others under 16	
Diphtheria		***	1, 334	2, 465	217	83	139	105	4, 343
Wnooping Cough			1, 322	2, 433	209	69	62	18	4, 113
Tetanus			1,334	2, 466	217	83	139	181	4, 430
Poliomyelitis			1,328	2, 443	229	83	171	203	4, 457
Measles		HEART	2	1,946	724	254	335	39	3, 300

Reinforcing Injections/Doses

			a Tax	Year of birth						
Type of vaccine or		dose	1970	1969	1968	1967	1963- 1966	Others under 16	Total	
Diphtheria			Property Lan	667	1, 345	237	1,871	296	4, 416	
Whooping Cough			-	663	1,806	216	242	33	2, 460	
Tetanus		dilect o	tidus el	667	1, 344	237	1,859	395	4,502	
Poliomyelitis		40000	Not the	662	1, 344	214	1,815	250	4, 285	

Smallpox Vaccination

Age	imms aplant	0-3 mths	3-6 mths	6-9 mths	9-12 mths	1 year	2-4 years	5-15 years	Total
Primary vaccination		101-0110 101-0110	9	21	26	2, 198	509 56	91 232	2, 854 292

MIDWIFERY

The number of home confinements in 1970 was virtually the same as the 1969; the number of early discharges showed a slight increase. The total home confinements numbered 271 and in all but two cases a doctor was booked (137 women were given analgesia). The number of mothers discharged from hospital before the tenth day totalled 266 as against 233 the previous year.

Under the extended agency arrangement which came into effect on 1st April, 1970, the domiciliary midwifery service for the whole borough is provided by the Mothers' Hospital (Salvation Army). Three midwives directly employed by the Health Department at the transfer date were retained on the Council's payroll to sageguard superannuation rights and conditions of service. However for practical purposes they work on one duty rota with the hospital district midwives.

A revised method of payment was agreed with the hospital for part-cases, i.e. those where the hospital midwives undertake part but not all of a patient's care at home, e.g. the baby is born in hospital.

During the year, 211 state certified midwives notified this Council, as local supervising authority, of their intention to practise within the area.

In view of the extended agency arrangement the practical training of Pupil Midwives taking Part II of their Midwifery Training Course is now dealt with in its entirety by the Mothers' Hospital within the Agency Service. A total of 59 pupils underwent their district training in the year.

DAY CARE OF CHILDREN

Child Minders

The current procedure for inspection and registration of child minders was described in the Annual Report for 1969. As soon as an enquiry or request for registration is received the applicant is visited by the Senior Nursing Officer who was specially appointed for this part of the work. The rooms to be used are inspected and arrangements for children's care discussed. A report is compiled and a recommendation made as to the applicant's suitability for registration and the maximum number of children she may take.

Routine checks are made for any previous record in the Health Department concerning mental health, notified cases of tuberculosis in the household or information about the premises. The Children's Department are also asked for any information known to them about the applicant or her family.

The arrangements for inspection by the Public Health Inspectors of heating appliances and fire prevention arrangements in the homes of child minders have continued and have proved very satisfactory. One or more re-visits may be needed to ensure that the applicant has carried out the advice given, e.g. to fix fire-guards; each visit is followed up with a letter stating the items still requiring attention.

The standard procedure which has to be followed even where only one child is to be minded is complex but this is unavoidable in view of the statutory requirements to be applied.

Registration allows supervision and an improvement in standards in the home and child care has been observed together with easier communication between minder and Health Department staff.

The number of applicants coming forward for registration shows no sign of falling-off. At 31st December 1970 the total number of registered child minders was 230 with places for 480 children.

Nursery Groups

At the end of the year the Health Department had three directly run nursery groups. These are set up at the George Downing Estate where sessions were increased to seven per week (four in the morning and three in the afternoon), Hawksley Court and Florence Court. The latter opened in February 1970 for two mornings and two afternoons per week. These groups were all set up under Phase 1 of the Urban Aid programme and have places for a total of 55 children. Children may attend part-time and 133 were on the register at 31.12.70.

Three groups are also still held at the John Scott Health Centre, Elsdale Street and Richmond Road Centres under the supervision of the Centre Superintendent. These were formerly known as occasional creches; a similar creche held at Barton House Centre closed when the nearby group at Hawlsley Court was started.

The extension of the Health Department nursery groups originally envisaged has not materialised but there has been a welcome growth of interest and initiative on the part of private individuals and organisations to set up voluntary play groups. At the end of the year there were ten registered private play groups with a total of 201 places. Anumber of other applications were "in the pipeline".

The play group liason committee, set up in June 1969 in an attempt to co-ordinate future action in the Borough, met again during the year. Meetings have also been held with the various organisations concerned with play group provision in Hackney - The Inner London Pre-School Play Groups Association, Save the Children Fund and Hackney Community Relations Council.

The development of interest was given a considerable boost by the aid granted by the Home Office under the Urban Aid programme. In November approval was given to expenditure of £6,000 under Phase 3 of the programme. (The Home Office grant 75% of this sum and the Council is responsible for the balance). Although this sum fell far short of the total requested it was nevertheless most welcome.

Permission was also received from the Home Office for the £3,500 approved under Phase 2 to be made available for voluntary play groups in community halls as the planned extension of directly provided groups had not materialised. At the end of the year, grants to two new play groups in community halls had been approved.

Training courses for people interested in becoming play group leaders are run by the Inner London Pre-School Play Groups Association in conjunction with the Inner London Education Authority and completion of the Pre-School Play Groups Association course has become the standard qualification for this work. During the year the PPA also ran preparatory courses in the Borough for mothers under the title of "Can you help your toddler" and "Living with young children". These courses aim to help parents and anyone concerned with children; they deal in particular with the importance of play for children's development, including practical ideas for play material. A supervised play group is provided for children under school age as part of the course. Attendance at one of these courses may lead to the longer course for play group leaders but mothers are in no way committed to this.

The development of nursery education is lamentably slow and against this background there can be no doubt whatever of the valuable role of the private play group as a means of helping both the child and its mother.

The table below shows the nursery groups functioning at the end of the year, the number of sessions held during the year and the total attendances:-

Nursery group	Number of sessions	Total attendances
Elsdale Street*	 206	1,995
Florence Court (opened 4/2/70)	 176	1,936
George Downing	 337	3,631
Hawsley Court	 309	3,436
John Scott Health Centre*	 465	7,516
Richmond Road*	165	2,649
	1,658	21, 163
*Attached to clinics	nous opeyour Standards	cicolesio ranti da bilan

Day Nurseries

The Council's 7 day nurseries have places for 379 children and at the end of the year 353 children were attending.

The new Hillside Day Nursery was completed during the year and opened in October. The former nursery in Holmleigh Road had been established in a former tennis club pavilion and was re-built on adjacent ground in Leatherhead Close. The new nursery accommodates 60 children. A milk kitchen had been built so that very young babies can be admitted when necessary. The youngest child accommodated up to the present time was aged 9 months.

There are three large nursery rooms. The children will mix as frequently as possible. Nevertheless, nursery 1 accommodates children up to the age of 2½ years who have there afternoon rest away from the older children, aged 2½-5 years, who occupy nurseries 2 and 3. One of the bathrooms caters for 40 children and is equipped with 8 small toilets and 12 wash basins. The second has 4 toilets and 6 wash basins for 20 children. The matron's office adjoins the entrance hall and there is a large staff sitting room cum dining room.

An analysis made in June 1970 of children's reasons for attending a day nursery showed that of the 364 children present:-

325 were admitted because they had only one parent 27 " for health reasons of parent of child

In addition, 14 children were attending day nurseries under the special scheme for severely subnormal children and 1 under the scheme for deaf children.

One additional day nursery with 50 places (at Holly Street) is planned in the Borough.

The Day Nursery Service has unfortunately continued to be hampered by staff shortages. Regrettably there does not appear to be any immediate solution of the recruitment difficulty and in the long term the staffing of the nurseries must rest on the number of nursery students coming into the service and their retention. There are many deterrent factors — long hours, lowrates of pay, better conditions in office jobs or with the Education Service.

The demand for day nursery places always exceeds supply; it would seem that even with the additional nursery to be built and with all the existing day nursery places fully staffed so that they could be used to maximum capacity, there would still not be sufficient places to meet all the demands.

CERVICAL CYTOLOGY

Following the successful visit last year of a mobile Cervical Cytology Unit to Hackney, arrangements for a second visit were made in 1970. This was for a period of five weeks from 27th July to 28th August. The caravan was again kindly lent by the Women's National Cancer Control Campaign.

Publicity was arranged for this year's campaign as follows: special posters leaflets and handbills were produced and a press release issued. House to house distribution of publicity was arranged as in 1969 with the co-operation of the Welfare Department. The location of the caravan was given careful consideration and the venues chosen were based on their position in the Borough and their attendance record in 1969.

The total number who attended during the five weeks was 397 compared with 1,064 during the nine week visit in 1969.

It was again interesting to ascertain the source of information from the women who attended and the table below compares the two years.

		1970	1969
Posters and leaflets	 	 90	427
Site of caravan	 	 75	156
Local Press	 	 52	159
Child Health Centres	 	 42	33
Friends	 	 19	72
General Practitioners	 	 7	37
Radio and film show		Co	15
Not known	 	 112	165
		397	1064

A total of 134 disorders was found as listed below; these woman were again all referred to their own general practitioners.

Disorders found

Breast		 of	 TOLANT	h	4
Abdomen		 Med.	 	00	2
Urethra		 100	 		1
Vaginal Discharge		 	 		19
Vaginitis		 	 		2
V. D		 	 		1
Polyp		 	 		16
Cyst		 	 		1
Cystocoele		 	 		3
Cervix erosion	201	 	 		47
Ovarian Cyst		 	 		5
Cervisitis		 	 		11
Diabetic vulvitis		 7.	 		1
Neoplasm of anus		 	 		1
Early leukoplakia		 	 		1
Uterus					
Enlarged (Fibr	oids)	 	 		9
Retroverted		 	 		8
Anaemia		 	 		1
Threatened Aborti	on	 	 		1
			TY	otal	134

Results of Smears

Adenocarcinoma			 	111.00	1
Malignant squamous cells			 		1
Atypical squamous cells			 		1
Trichomonas vaginalis			 		16
Mycelia present			 		2
No abnormality detected			 		369
No smear taken or nothing	on	slide	 		7

It is known that 2 women had subsequent hospital treatment and that a third is still under supervision.

Age distribution

Age				
Under 20	 	 	 	 3
20 - 25	 	 	 	 34
26 - 30	 	 	 	 50
31 - 35	 	 	 	 58
36 - 40	 	 	 	 49
41 - 45	 	 	 	 50
46 - 50	 	 	 	 54
51 - 55	 	 	 	 32
56 - 60	 	 	 	 33
61 and over		 	 	 34

The social class of married women attending was analysed according to husband's occupation using the Registrar General's Classification of Occupations 1966.

Socio - Economic Group Professional workers		6
Employers and managers in central and local		
government, industry, commerce, etc		3
Own-account workers (non-professional)		20
Foremen and supervisors (manual). Skilled manual work	ers	96
Intermediate and junior non-manual workers in offices		58
Personal service and semi-skilled manual workers Unskilled manual workers, armed forces and		77
agricultural workers	ballaria	35
	Total	295

The Health Committee has since decided that a campaign with the mobile unit should be an annual event as it is felt to arouse interest and meet a need not covered by the static clinic Sessions.

The number of Cytology Clinics has remained as before. Of the three sessions held at Child Health Centres, two are held in the evenings and one in the afternoon. Attendances in 1970 were slightly less than in 1969 but on the whole requests for appointments seemed fairly steady.

The Stoke Newington Women's Cancer Campaign continued their publicity efforts and organised a meeting in April when three films on breast and cervical cancer were shown. One of the Principal Medical Officers was present to answer subsequent questions.

de al alasignos da bentrong animi	F.P.A. Clinics	Cervical Cytology Clinics	A.N. Clinics	Total
Richmond Road	134	225	66	425
Lower Clapton Road	133	221	1	355
John Scott Health Centre	375	186	2	563
Shoreditch Health Centre	398	2017-1	4	402
Barton House	120	1111-	17	137
Total	1, 160	632	90	1,882

FAMILY PLANNING SERVICE

Attendances at family planning clinics run by the Health Department and the Family Planning Association continued at a substantial level. Attendances at Council clinics totalled 6,314 and those at Family Planning Association clinics 5,921, the combined total attendances was 420 less than in 1969. At the end of the year the Health Department and the Family Planning Association each had a total of 8½ weekly sessions; all except one are held at the Council's maternal and child health centres.

The Young People's Advisory Clinic held at the Richmond Road Centre and run by the Family Planning Association as the Council's agent has proved to be extremely valuable and the pressure of work necessitated the opening of an additional fortnightly session. This started in October 1970 and is for referrals from the existing session where extra time is needed for consultation and for new cases which are more involved or present special problems. The doctor who had been in charge of the clinic from its inception resigned during the year and another was appointed in her place. A handbill giving details of the Young People's Advisory Clinic was prepared and issued.

In April the Department was informed that the Brook Advisory Clinic had started a weekly clinic at the Out-patient Department, St. Bartholomew's Hospital. Problems in the younger age group are catered for. In July the Council agreed to pay the fees of Hackney residents who attend any of the clinics run by the Brook Advisory Centres.

The service available to young people was also affected by the Family Planning Association decision, announced in April, to provide advice on birth control at all their Clinics for anyone over the age of sixteen years, irrespective of marital status.

Discussions were held during the year with representatives of the Central London Branch Family Planning Association about ways of increasing publicity for the services available, and in particular communicating information to young married couples and unmarried young people aged 18 - 25. A revised edition of the information leaflet on Health Department and Family Planning Association services was printed and the poster "Do you wish to plan the size of your family" was reissued. An approach to the local Education Department by the Family Planning Association with Health Department support about publicity in schools had a rather mixed reception. However it did result in circulation of a letter to secondary schools setting out details of the educational service available from the Family Planning Association. The importance of instruction in the school can never be over-emphasised.

The Domiciliary visiting scheme, run by the Family Planning Association as the Council's Agent, continued during 1970 when 33 new families were visited and a total of 63 cases were dealt with.

Officers of the Department attended meetings during the year concerning the possibility of family planning services being provided at hospitals in the Hackney and Tottenham groups. Unfortunately there had been no development about this by the end of the year.

Early in the year approval was granted by the Family Planning Association for one of the Health Department's Clinics to undertake the teaching of doctors and nurses taking the Family Planning Association Certificates. During the year two doctors and two nurses undertook training there.

A liaison committee initiated by the Family Planning Association was set up during the year to provide a link between the two parts of the service and an opportunity for discussing matters of common interest.

The department hit the headlines during the year when the Council approved a scheme to make male sterilisation (vasectomy) available in appropriate cases, fees being paid by the Council. The furore which this created was in fact out of all proportion to the original idea which was that vasectomy should be available within the domiciliary scheme as an alternative to existing birth control methods. Doubts have since been raised whether a local health authority has power to provide vasectomy within the terms of the National Health Service (Family Planning) Act 1967. It would seem most unfortunate if the general principle of making contraception available to either partner should be hindered by this interpretation.

Towards the end of the year, the Family Planning Association announced the introduction of their National Family Planning Agency Scheme whose object is to rationalise present arrangements and make a standard scheme applicable to the whole country. From the case rate figures quoted, it was apparent that the Council would be involved in additional expenditure under the new scheme. It was therefore decided that the agency arrangement with the Family Planning Association should be gradually phased out and the Council's directly provided service be extended to take over existing Family Planning Association sessions. It is anticipated that this will be a gradual process and will be a change of administration rather than of service. Staff now working at Family Planning Association sessions will be invited to transfer to the Health Department service.

For the last nine months of the year additional statistics were requested by the Department of Health and Social Services on the type of cases attending family planning clinics and the different methods adopted. These are set out below.

Sex and marital distribution

Males Married females Unmarried females	776 78 855
	855
Medical	6 50
Non-medical but needy	142
Other non-medical	62 854
	854
	o and analyzing
Sheath	3 28
Pill	359
Diaphragm	112
I. U. D.	264
Other method	13
No method advised	9
	1,085
	Married females Unmarried females Medical Non-medical but needy Other non-medical Sheath Pill Diaphragm I.U.D. Other method

More than one method would have been adopted in several cases.

HEALTH VISITING

The health visitor is a trained nurse with post registration qualifications in obstetrics and health visiting, who provides a continuing service to families and invididuals in the community.

In some areas she works very closely with the family doctor, but she is a practitioner in her own right, detecting cases of need on her own initiative as well as acting on referrals. She has skills and knowledge particular to her work and these are drawn from her nursing background and from the additional preparation in her health visiting course.

Her work has five main aspects:-

- The prevention of mental, physical, and medical ill health and its consequences,
 - Early detection of ill health and the surveillance of high risk groups,
 - 3. Recognition and identification of need and mobilisation of appropriate resources where necessary,
 - 4. Health teaching,
 - 5. Provision of care; this will include support during periods of stress, and advice and guidance in cases of illness as well as in the care and management of children. The health visitor is not however actively engaged in technical nursing procedures.

She has a statutory duty to visit every new born baby following the notification of birth, thus laying the foundation for a lasting relationship with the family. No other worker at present combines the type of knowledge and skills outlined. The service the health visitor offers is essential if medico/social problems are to be contained within manageable proportions in relation to available resources in money and personnel, quite apart from the promotion of the health of the community in its widest sense.

The statistical table set out below gives an indication of the nature of her visits but it must be borne in mind that this represents only a portion of her duties.

Type	of Case			Number visited
	Children born in 1970			4,055
	Children born in 1969			3, 617
	Children born between 1965 and 1968			8,316
7.8.10	Persons aged 65 or over			713
	Mentally disordered persons	becate	10 Page 12	81
	Persons, excluding maternity cases, disc	charged	from	
	hospital (other than mental hospitals)			117
	Tuberculous households			57
	Households visited on account of other infect	ious dis	eases	31
	Other cases			1, 273

Because of the improvement in the recruitment of health visitors for sponsorship, eleven additional health visitors were in post by September bringing the total health visiting staff to 46, including 8 Centre Superintendents. It was, therefore, possible to reduce the individual health visitors' case load to approximately four hundred families from the previously high number of near seven hundred.

Arrangements were made for one health visitor to work with the medical and nursing staff at the Queen Elizabeth Hospital for Children for three sessions each week for the purpose of improving total patient care to the young child particularly with regard to follow up in the community.

One health visitor completed her Teaching Training with the Family Planning Association and is now able to teach family planning techniques to nursing staff working in the Council's service.

The health visitors at Lower Clapton Maternal and Child Health Centre have taken over the home visiting of patients attending the London Chest Hospital and it is hoped eventually to integrate the whole of the tuberculosis visitors work into the general health visiting programme.

In June, a letter was sent to all general practitioners in the borough, inviting them to take part in arrangements to link the general practitioners and the health visitors at maternal and child health centres. Of the 125 general practitioners circulated 41, representing 34 practices, replied that they were interested in the scheme. Arrangements were made to discuss the matter further with them at local meetings and a working party, composed of general practitioners and health department representatives, was then appointed to prepare a scheme. The working party had finished its deliberations by the end of the year and the final document had been drafted. It is envisaged that this will be a "partial attachment" scheme. A limited number of health visitors will be involved in the first instance and the scheme will be extended or adapted as staff resources allow. Each health visitor taking part will spend one day a week or two half days on work arising from the attachment. She will retain her geographical area and for the rest of the week do her ordinary work from the child health centre. Special arrangements will be made to cover the John Scott Health Centre and other health centres as they open.

FAMILY CASE WORK

During 1970 the social work section remained fairly stable in numbers though a few changes in personnel took place. Greater direction was given to the work of this section with most social workers being seconded on short term courses, and intensive supervision of the casework of the social workers by the senior staff in the department.

The family caseworkers primarily deal with multiple problem families. Their cases were mainly referred from the Social Services Co-ordinating Committee of the Borough, the Rent Arrears Panel, the Problem Case Conference of the Inner London Education Authority, and other Departments. The work of these social workers is family orientated which in turn means that they have a wider co-ordinating function to perform as regards different services dealing with the same family.

The School Health Social Workers (jointly appointed by the Inner London Education Authority and the London Borough of Hackney) are attached to the New River Partially Sighted School, Geffrye Physically Handicapped School, Stormont House Day Open Air School, and a Partially Hearing Unit at London Fields School. The role of the social worker in the school is essentially to maintain contact between home and school; to co-operate with teachers and medical staff and to provide casework help for the handicapped child and its family.

The two social workers at the Chest Clinics and the venereal disease social worker involved in contact tracing maintained close contact with the other social workers at the central office.

Students from University and professional courses continued to be accepted for practical work training during the year.

Co-ordination of Social Services

The Social Services Co-ordination Committee met regularly during 1970. The membership consists of the chief officers of the Health, Children's, Welfare and the Housing Departments, the Deputy Town Clerk and representatives of the Inner London Education Authority, the Housing Department of the Greater London Council, the Department of Health and Social Security, the Probation Service and certain local voluntary organisations.

The Fieldworker's Conference which is a sub Committee meets fortnightly. At this Conference cases are discussed which have been referred by any social work department or agency in the Borough. At the field level the object is to pool information regarding the family under discussion and arrive at an agreed decision on the rational use of the available social work resources. Occasionally the Conference was unable to arrive at satisfactory conclusions and referred the cases to the full Co-ordinating Committee for action.

During 1970 the Co-ordinating Committee continued to arrange meetings for social workers in the Borough with the aim of explaining the policy and practice of different Departments and thereby improving the understanding and relationship between the social work services.

The Kingsmead Centre completed its first year of existence at 5 and 6 Templemead House. Statistics gathered at the end of the year clearly showed the extent of the services performed to the tenants on the Estate and the facilities it provided for different social workers in meeting their clients who were living on the Estate. Over the months the tenants made more and more calls on the Centre asking for various kinds of help and information. Just as an example, there were 48 calls made to the Centre in December 1969 whereas there were 90 calls made in December 1970. Various services make use of the Centre including the Education Welfare Service, the Children's Department, the Welfare Department and the Probation Service. The Tenants' Association hold their meetings at the Centre and social workers from this Department in co-operation with social workers from other Departments have been able to establish two clubs which operate also at the Centre. One of these clubs is meant for mothers living on the Estate and the other for teenage girls. These clubs have proved very satisfactory and helped in promoting a greater feeling of community among those participating and living on the Kingsmead Estate.

1970 has been to some extent an unsettling year for the social workers because of the impending changes, and on the whole the social workers have played their full part in anticipating the changes and entering discussions and contributing in various ways to the thinking going on amongst social workers in other Departments.

MENTAL HEALTH SERVICES

During 1970 some improvement took place in the mental health service. The increase in staff made it possible to re-deploy the social workers in teams each covering an area thus improving the community care and the case-work. Whereas in 1969 none of the social workers had the appropriate academic background, five fully qualified staff entered the section, one who returned from training sponsored by the Council and four newly appointed as Deputy Principal, and Assistant Principal, Mental Health Social Workers. Plans for an extension to 120 beds of the psychiatric part of Hackney Hospital including a Day Hospital for 100 patients were approved and the implementation of these plans began. Plans for new Council establishments were approved by the Council and by the Department of Health and Social Security.

Although the Administration Committee had approved the increase of the establishment from 12 to 20 mental health social workers just before the end of 1969, the full complement had not been achieved at the end of 1970 when there was a total of 17 mental health social workers apart from the Principal and Deputy Principal. There were 14 mental health social workers (basic grade) and 3 assistant principal mental health social workers acting as team leaders for 3 of the new teams. This delay in filling all the posts was caused by a variety of reasons.

The areas in which the new teams worked were the same as those already used by the Welfare Department and similar to those envisaged for the new Social Services Department. Each area has a team consisting of a team leader and 3 mental health social workers. This has eased the working conditions and liaison with the hospitals who now know whom they can directly contact when they are dealing with a patient from a special area. Two mental health social workers were on training courses at the end of the year and a day centre leader started a one year's course.

Centres

As usual the three Psychiatric Day Centres have been fully occupied during the year. The referrals are still the same and the patients working there would not be able to find work in the open market. The number of new patients admitted to these centres during the year was 63; 6 clients were found jobs in open industry and 21 were re-admitted to hospital.

The junior training centres has been functioning well. The number of pupils on the roll is really beyond the optimum number recommended by the Department of Health and Social Security. Each class should only have 10 pupils and with five classrooms and 92 pupils on the roll, the number in each class is extremely high and so makes it very difficult, in spite of the good work of the teachers, to train the children satisfactorily.

During the year the Spastics Society offered funds for the construction of a Special Care Unit for severely handicapped children. The Department had planned to construct a Special Care Unit in the grounds of the junior training centre at Ickburgh Road and the Council agreed that this now could be constructed with the funds given by the Spastics Society. Accordingly a very comprehensive and up-to-date plan was produced by the Spastics Society's Architects for acceptance by the Council and it is hoped that the construction will be started at the beginning of the new year. The unit will have 25 places, 5 of which will be observation places.

During 1969 approval was given for an extension of the Special Care Unit at Millfields to the ground floor of the neighbouring cottage, giving floor space for 14 more children, and work on this was nearing completion at the end of the year. There are still difficulties because pupils above the school leaving age of 16 are still attending. The extension of this Special Care Unit will improve present facilities as there will be 40 sq. ft. per child which is required by the Regulations. However, the building is far too removed and isolated from the junior training centre and should only be considered temporary until such time that enough Special Care Unit facilities can be constructed near the junior training centre. It was agreed during the year that attempts should be made to obtain new premises and staff in order to establish a kind of Special Care Unit for young adults. Although the philosophy may be to have these severely handicapped adults working with the other mentally handicapped at an adult centre, these youngsters are so handicapped with incontinence etc., that it would not be possible to look after them at the adult centre for mentally handicapped in its present form.

The activities at the Adult Centre for the adult mentally handicapped remain unchanged. A total of 115 people aged 16 to 65 attend, 47 men and 68 women. The work carried out is of an occupational therapy nature and the men and women work separately, although sometimes if a special contract has to be finished in time, some of the men may work with the women. They all have their meals together. Social academic instruction is also being given to most of the clients by one specially trained instructor. However, as mentioned earlier the period of training of this kind for each is far below that desirable in order to get the trainees to attain a level where they can mix with ordinary citizens without embarrassment. None of the clients have been found a place in industry in the open market during the year. The attitude and treatment of these adult mentally handicapped persons by the staff and much more by the parents has tended to be very much over-protective with the result that the independence that one ultimately should aim for them is not being achieved. At the time of the annual medical assessment of the patient this problem has been discussed with the parents and an endeavour made to explain that much more freedom and training in social and ordinary environmental activities is necessary in order to give their children a fuller life and to give them the independence needed should they have to live on their own.

Purchase Tax on Handicraft Articles

In December 1969, a general enquiry was made by H.M. Customs and Excise as to centres in the Health and Welfare Departments in the Borough in which disabled and handicapped persons undertook therapeutic activities resulting in the production of finished articles. It was evident that work of this nature, which had hitherto avoided attention, was to be investigated. Replies to this enquiry emphasised the individual rather than the corporate nature of such activities and also that the Council purchased handicraft materials and sold complete articles on the makers' behalf.

In May 1970, an application for exemption on these grounds in respect of the Welfare Department Centre was submitted, but it became clear, following a meeting of Health and Welfare Department officers, representatives of Town Clerk and Borough Treasurer with officials of the Customs and Excise, that no exemption could be granted to that Department or the Adult Training Centre of the Health Department, although a concession was made to the effect that the appropriate purchase tax rate would be levied on 80% of the selling price in recognition of the fact that there was no intermediate stage between maker and seller. Registration of Health Department activities became effective from 27th April, 1970.

The articles made at the Homerton Training Centre, the centre for adult mentally subnormal, are in the main purchased by trainees themselves, their relatives or friends, or by staff. Only a very small proportion are sold to the public - usually at the Council's Annual Field Day. The items made range from dishcloths, scourers and slippers, to bags, baskets, plant-stands and trays.

The sales average £1,100 a year, the proceeds of sales being used to purchase raw materials for the goods. It was estimated that the Purchase Tax due on the items would be about £100 p.a.

The Health Committee considered this matter and recommended that representation be made to the appropriate bodies, including the Central Council for the Disabled, with a view to the promotion of legislation to exempt undertakings manufacturing goods for recreational purposes for handicapped persons or for therapeutic or rehabilitation purposes from the payment of purchase tax.

It will be interesting to see the outcome of these representations.

Social Clubs

Social Club activities for both the mentally ill patients and for the mentally handicapped continue. These activities are supported by Mental Health Social Workers and they all are run in Council premises.

Relationship with Hospitals

The relationship with the hospitals is still improving. The psychiatric unit at Hackney Hospital was being enlarged during the year and it was hoped that some extra accommodation would be taken into use early in 1971. However, this will not meet the full need but the improved facilities for the Mental Health Unit, a lift and 20 more beds will mean that in 1971 an increasing number of the Hackney patients can be admitted to Hackney Hospital and not have to go 25 miles away to the other side of London to Long Grove Hospital. The ultimate aim is 120 beds and to build a day hospital for approximately a hundred patients in the grounds of Hackney Hospital.

The usual visits of Mental Health Social Workers to both psychiatric hospitals continues. Discussions took place with the psychiatrists but unfortunately all too rarely are the patients under discussion those that will be dealt with by the Hackney mental health social workers.

The conversion of Section 26 Patients at Long Grove Hospital is causing very considerable waste of time on the part of the mental health social workers who often spend days preparing and having to be ready to sign for these conversions. This is not the practice in some of the other London Boroughs where the Authority of the areas in which the Hospitals are situated provide the social service for these conversions.

Statistics

The statistical information has been compiled somewhat differently this year as compared to previous years and direct comparisons cannot properly be made.

The statistics for 1970 do indicate increased activity within the area of mental health social work. The total number of people under community care was 1,185 at the end of 1970 which is slightly lower than the number at the end of 1969 - 1,272. This does not mean that there has been less activity for during the year the lists were reviewed by the staff of the mental health section to make them more realistic.

The total referrals for the year, 1,177, is considerably higher than the referrals for last year and the number of new referrals, 573, is also very much higher. This means that many patients are discharged much earlier from hospital and may be re-admitted because of their subsequent breakdown in the community.

The statistics set out at the end of this chapter deal only with those referred during the year.

The total number having community care in one way or the other within the London Borough of Hackney was at the end of the year 1,185, 635 of these were mentally handicapped and 550 mentally ill patients.

The ways in which the local authority aids these people is set out in the table below:-

	Mentally ill	Mentally handicapped
Attending day centres	68	CAMID ATTEMS WIT
Attending training centres	of court topy right, by	216
Awaiting admission to training centres	Linconsented in	27
In residential care	31	41
Awaiting admission to residential care	ing-trade and Clinical	70
Home visits	451	281
Total	550	635

The number awaiting residence in a local authority hostel for severely mentally handicapped is 44 men and 26 women making a total of 70. These numbers are mainly requests from the hospitals for the mentally handicapped.

A survey at Long Grove Hospital showed that 90 patients out of 236 interviewed were considered suitable for rehabilitation through a hostel or community home.

Hospital admissions

With regard to admissions to hospital it is somewhat disturbing to see that the informal admissions have gone down from 153 in 1969 to 136 and that the compulsory admissions have gone up from 187 to 246. This high number of compulsory admissions is quite against the philosophy and the wishes of the Department of Health and Social Security but there are several reasons for this.

Firstly, still nearly 90% of all patients suffering from mental illness have to be admitted to Long Grove Hospital situated far away on the other side of London. This means that patients who may have been admitted there, come back home again and then have to be re-admitted, are not very happy about going so far away and refuse to be re-admitted voluntarily and for that reason perhaps compulsory admissions are involved.

Secondly, it is sometimes a temptation for new and largely inexperienced staff to fill in a form and have it signed ready for compulsory admission although in fact it may not be used. The social worker sometimes finds that whilst on her way to Long Grove Hospital with a patient who has previously expressed the desire for voluntary admission suddenly decides to refuse to go into hospital. In this case the compulsory admission forms already filled in are used in order to secure that the patient who really needs admission will be admitted to the hospital. Whilst accepting that this is highly undesirable it arises because of the fact that there are not enough local beds and because the social worker in his zeal to look after the welfare of the patient feels he has to use a compulsory process.

Mental Health Liaison Committee

Meetings continued regularly during the year. Representatives from the Police, Ambulance Service and other bodies were invited to attend certain meetings during which the relationships with the mental health service were discussed and at times problems were solved. The number of people attending decreased somewhat and became static consisting of the participants who are directly involved in mental health activities.

Special Advisory Clinic

The clinics have been conducted regularly under the direction of two specialists from the I.L.E.A. One of the principal medical officers dealing with maternal and child health has been trained and is gradually taking over the clinic. During the year 64 children aged 1 to 5 were examined and assessed at the clinic. The age distribution was as follows:

Year	of Birth	Number
	1965	15
	1966	30
	1967	13
	1968	5
	1969	1

Voluntary organisations

Easton House has had a somewhat disappointing year because of a crisis amongst the staff.

The number of boys in residence has fallen well below even the optimum number and at the end of the year the position was still not too hopeful. The Psychiatric Rehabilitation Association continued to function during the year but no new major developments took place. The liaison with the Health Department continues as before.

The Hackney Society for Mentally Handicapped Children has now a permanent base at the Council's Day Psychiatric Centre in Dawson Street. Their activities were similar to previous years.

The Elfrida Rathbone Club continued to meet at the Homerton Training Centre. Certain difficulties arose over the use of the accommodation but it is hoped that these will be resolved.

Dental Care

Once again great emphasis has been placed on this facet of the dental service. Nearly three times as many visits were made for treatment as in 1969. The ratio of permanent teeth filled to extracted rose from 4.4 to 1, to 12.3 to 1. For deciduous teeth the figure was 2.1 to 1, instead of 3.2 to 1. Although the number of fillings nearly doubled, rising from 192 last year to 338, the number of teeth extracted actually went down by 12. Even greater attention has been paid to prevention of tooth and gum diseases, as shown by the vastly increased number of prophylaxes and scalings. Further attempts at prevention are shown by the number of patients given chairside dental health education and application of topical fluoride. Eighty-five sessions were devoted to group dental health education. The two dental auxiliaries are a great asset in this facet of the work. They enthusiastically spend a great deal of time at training centres, showing the trainees how to clean their teeth, and indicating what foods to avoid. They are getting remarkable results in work which is quite unique for this country, if not throughout the world.

Statistics

1. 5	SESSIONS				1969	1970
_	(a) Treatment				64.5	189
	(b) Dental health education	4.8	1.1		0.0	85
2. 1	VISITS FOR TREATMENT				of to lo	1997 183 2017 111
	(a) First visits	o.T	bee to		113	74
	(b) Subsequent visits				393	1, 279
	(c) Total visits				506	1,353
	(d) Emergency visits				1	8
	(e) Patients made dentally fit				59	80
	(f) Additional courses commenced				N. A.	19
3. /	ANALYSIS OF GENERAL TREATMENT	Ope d	A.A.	the Til	sto feto	Lalbogs
640	(a) Fillings - Permanent teetn	1.881			173	322
	(b) Fillings - Deciduous teeth				19	16
-	(c) Teeth filled - Permanent teeth			0.0	155	270
	(d) Teeth filled - Deciduous teeth				19	15
- 1	(e) Teeth extracted - Permanent teeth				35	22
	(f) Teeth extracted - Deciduous teeth				6	7
	(g) Prophylaxis				380	1,080
	(h) Scaling				N. A.	133
	(i) Teeth otherwise conserved				4	22
	(j) Teeth root filled				1	3
	(k) General anaesthetics				0	0
	(1) Chairside dental health education				N. A.	419
	(m) Application of topical fluorides			d did a	N. A.	43
	(n) Patients fitted with dentures				N. A.	2
	(o) Total dentures fitted		* *	**	N. A.	2

STATISTICS

Mental Illness

Total number of referrals during the year				1, 177
Number of initial referrals during the year	**		551 101	573
The final arrangements made for the referrals w	ere as	follows	(2-3 burns	
Hospital care:-				
Admitted informally				136
Admitted compulsorily			A COLUMN	246
Psychiatric out-patient or day hospital				
Admitted to general hospital				
Number taken into Council's community care				
Domiciliary visit by consultant only				89
Referred to another agency				52
No further action				306
A further breakdown of the persons taken into the year, showing the type of care arranged, wa Admitted to hostel	s as fo	llows:-		8
Receiving visits from Mental Health Social Attendance at day centre			1 hobours	295 63
In addition a further 87 domiciliary visits were of other cases, e.g. hospital admissions, O/P a				in respect
Mental Subnormality				
Number of referrals				157
Number of new cases reported during the ye	ar			97
The final arrangements made for the referrals w	as as f	ollows:	- box so	
Number taken into Council's community care				96
Other community care				3
				4750

A further breakdown of the persons taken into Council's community care during the year, showing the type of care arranged, was as follows:-

13

37

Number admitted to hospital ...

Referred to another agency ...

No further action ..

Admission to private homes, etc.			 	4
Receiving visits from Mental Health	Social	Worker	 	55
Attendance at training centre			 	33
Admission to Special Care Unit			 	4

HOME NURSING

There was a slight improvement in recruitment to the service during the year. It has now been arranged for the District Nurse Training to be undertaken at the North Western Polytechnic and agreement has been reached that the college will give each prospective student an entrance examination in order to assess suitability for the course. It is important to raise the standard of the District Nurse because of the changing demands which are likely to occur in any future re-organisation of the health service.

The statistical summary below indicates briefly the amount of work carried out by the district nurses during the year:-

Number of cases being nursed at end of 1970		887
Total number of patients nursed during year		2, 432
(Of these 37 were aged under 5 years and 1,086	were	
aged 65 years or over at their first visit in	1970)	
Total number of visits during 1970		85, 452
Number of home nurses		32

The limited scheme of attachment of District Nurses to general medical practices inaugurated at the end of 1963 continued satisfactorily throughout the year. It is now felt that there is room for some enlargement of the scheme and discussions will take place between the Health Department and the local medical practitioners in 1971 to see if this is possible.

Bathing Service and Incontinent Laundry

The bath service for elderly people is now carried out at Shoreditch Health Centre and during the year 779 baths were given. In addition, home bathing is undertaken in cases where a visit to the Centre is not possible. The number of baths given was 9,599.

The laundering of soiled linen continues to be carried out at Millfields Centre. In 1970 the number of articles laundered totalled 29,088.

CHIROPODY

Chiropody Clinics are held in six health service establishments and statistics of attendances at these clinics are set out below. The location of the clinics and sessions is set out on pages 3 and 4. Most of the school children were treated for verrucae. No expectant mothers were treated.

Number of sessions					 	5, 741
Number of cases age	0 - 4	Nil				
	5 - 14 15 - 64	599 517				
	65 and over	3,745				
Number of attendance	s		a oray lo	Total	 	4,861 30,965

No detailed record was made regarding the treatment of handicapped patients in the clinics, but the approximate number was 50. Accurate records are not being kept.

Domiciliary Chiropody Service

The Council, at the latter end of 1969, gave approval to the commencement of a domiciliary service. The following are the figures for 1970:-

	Cases	Total Visits
Under 65	33	84
Over 65	429	1, 508
	e vone ne :	district seed to be of
	462	1, 592

Seven handicapped persons under 65 were visited.

On 27th May, 1970, a chiropody service was commenced at Glebelands, one of the Council's old people's homes. Initially the service has been limited to one session a week but it is hoped to increase this number in the next year.

The low level of recruitment of chiropodists still continue and causes a waiting time of an average of 8 weeks although the staff do try and accommodate urgent cases as far as humanly possible.

RECUPERATIVE HOLIDAYS

Details of the holidays arranged for adults and children who have suffered from recent acute illness and who needed a short period of rest without medical or nursing care are set out below:-

	1969	1970
Adults	230	360
Children under 5 not attending school	21	28
Schoolchildren	145	215

ARTIFICIAL KIDNEY MACHINES

Early in 1968 the Minister of Health gave local authorities general approval to make adaptations to homes of individuals who need an artificial kidney machine. During the year adaptations were carried out in one home and preparations were being made for installing a machine in another home.

HOME HELP SERVICE

The service continued to be organised from four area offices. The reasons for giving home help are various; help during pregnancy, help where a patient has had to go into hospital and in certain cases help where the home circumstances are difficult. However, the main proportion of the service is given to the elderly in the borough who cannot cope for a variety of reasons particularly illness and infirmity on their own. Help is not restricted to pure domestic chores but includes help with shopping and other similar services. Every attempt is made to provide some assistance to all eligible cases, and at times, mainly due to shortage of home helps, it is necessary to spread the available service somewhat thinly.

Because circumstances were propitious in that certain of the staff had left it was suggested to the Health Committee that the Home Help Service should be given free. The saving on the cost of administrative time would approximately balance the income received from levying charges. However, the Council did not approve the scheme and assessments continued to be made and charges levied in the appropriate cases.

Meetings with the home help organisers are held monthly, when matters of common concern are discussed.

Three training courses for home helps were held during the year. They were held at Shoreditch Health Centre and 44 home helps attended. Follow-up day courses were also arranged and 16 home helps attended.

Details of the service in this and the previous year are set out below: -

	1969	1970
Number of new applications received	 1, 317	1, 314
Types of cases assisted: Maternity	 30	31
Tuberculosis	 26	21
Old people (over 65)	4, 168	4,317
Chronic Sick (under 65)	 513	502
Miscellaneous	 337	327
	5,074	5, 198

The number of home helps employed (equivalent whole-time) was 412 and great difficulty was being experienced at the end of the year in keeping recruitment at that level.

HEALTH EDUCATION

There is no designated Health Education Officer in this Department and the Programme is determined by a Health Education Panel consisting of professional staff in the various fields who meet regularly throughout the year.

The Hackney Field Day was held in Clissold Park in June and this Department contributed a standillustrating aspects of work of the Department. In addition to the stand selling articles made by the patients at mental health establishments there was a standillustrating the methods used for carrying out developmental paediatric examinations on pre-school children. A poster depicting the subject was also produced and publicised widely. In addition the Jimmy Germ Puppet Show was put on by two of the Department's dental auxiliaries.

SMOKERS' ADVISORY CLINIC

The Smokers' Advisory Clinic held weekly at Shoreditch Health Centre continued throughout the year but again the numbers attending were disappointing. In all 63 attended 144 times and 8 stated that they had stopped smoking following the advice given at the clinic. In spite of all efforts to increase the popularity of the clinic by means of film shows the numbers attending continued to be disappointing. Slightly less than the previous year attended but they did attend more often.

MARRIAGE GUIDANCE

In January, the London Marriage Guidance Council opened a second evening session in the Borough - at John Scott Health Centre (there is an existing session at Shoreditch Health Centre). The Health Department also runs a Clinic, staffed by a Senior Psychiatrist on a sessional basis for married couples with emotional, sexual and family planning problems.

RE-HOUSING ON MEDICAL GROUNDS

There were thirteen meetings between representatives of the Housing Department and the Health Department and 321 cases were discussed to review what priority for re-housing on medical grounds should be given. 51 cases were considered not to fall within the category of medical priority, 200 were given the highest medical

priority and 70 a degree of medical priority. Of these cases 195, or 72%, were re-housed. Some families having been accorded the highest priority for housing on medical grounds for at least two years have not yet been re-housed. The lack of four and five bed-roomed units causes some concern. The approach to assessment has lately been changed from a very strict medical to a more socio-medical consideration: this attitude bears in mind the damage done to the future general health of the younger element in the community by living in bad housing conditions.

NURSING HOMES

There are four nursing homes registered in the borough. Two of them are mother and baby homes run by the Salvation Army and the Sisters of St. Mary the Virgin, Wantage, respectively; one which is in essence a hospital for terminal cases; and only one nursing home in the accepted sense. This latter home, St. Margaret's Nursing Home, 262 Victoria Park Road, E.9. now accommodates 11 chronic medical patients as the maternity element ceased to operate after August. The number of confinements which took place in this home during the year was 15.

There are no maternity beds at the two mother and baby homes,

All the homes are periodically inspected by staff of the Health Department.

HEALTH CENTRES

After so many years producing plans for health centres and holding innumerable discussions it is a pleasure to report that bricks were actually laid during the year. Work on the Health Centre at Somerford Grove, which is replacing the Child Health Centre in the West Hackney Church Hall commenced in February and the building should be ready for occupation in the summer of 1971.

The situation at the end of the year in respect of the other proposed Health Centres was as follows: -

Barton House, N. 16.

- Plans have been agreed with the Department of Health and Social Security. The architect is preparing working drawings. At the time of writing this report work had actually commenced on the site.

Clapton Park, E. 5.

- Plans have been agreed with the Department of Health and Social Security. The architect is preparing working drawings.

Fountayne Road, N. 16.

- Plans are still under discussion with the Department of Health and Social Security.

Hedgers Grove, E.9.

- Plans awaiting approval by the Department of Health and Social Security.

Kingsmead Estate, E.9.

- As there was no response by the local general practitioners it was decided not to proceed with a special building to provide maternal and child health facilities on the Estate. It is now proposed to erect a community hall on the Estate and accommodation will be made available for health purposes.

Lower Clapton Road, E.5. - During the year a site in Tresham Avenue for the replacement of the Centre at 6 Lower Clapton Road and the School Treatment Centre, 13 Goulton Road, was agreed and earmarked for development as a Health Centre.

SURVEYS

During the year the department supplied information for the following surveys:

Greater London Council survey of children with spina bifida.

Medical Research Council long term follow-up of measles vaccine trial. Survey of childhood malignancies.

Survey of British births 1970.

Department of Education and Science survey of physically handicapped children in ordinary schools.

Survey of children's speech (Medical Research Council developmental psychology unit).

This involved the Department in a considerable amount of work but it was felt that this was worthwhile in the interests of general community health. However, in view of the increasing number of requests from a variety of sources it is becoming more and more necessary to scrutinize the worthiness of each request received.

STAFF MEDICAL SERVICE

Normally new entrants to the Council's service are required to complete a medical questionnaire only but certain Officers, mainly those who will be resident and working with children, are required to undergo medical examination before taking up duty. In addition students intending to go to Teachers' training colleges and persons living in the borough but who propose working for another Authority are also medically examined by staff in this Department.

A total of 1,217 medical questionnaires were processed and a further 180 medical examinations were carried out for those special categories mentioned above. If there is doubt as to some condition, the applicant's general practitioner is asked for a confidential report. If there is any doubt as to whether the applicant would be suitable for the position because of medical reasons then the person has an interview with a principal medical officer. However, this happens very rarely.

Cases of long term illness and accidents are assessed by a principal medical officer. These can be very time consuming because it is important, in order that the correct assessment can be made, that the fullest details be obtained. The number of such medical examinations carried out during the year was 248. Provision is made for recommending employees found permanently unfit to carry out their normal duties to be offered employment in certain designated light duty post for which they are considered capable of occupying.

In addition, because of recent legislation, 51 of the Council's heavy goods vehicle drivers were examined.

A total of 101 sessions were required to carry out all the medical examinations.

TRAINING

Apart from the statutory requirement to provide training for pupil midwives, the Council has arrangements for training other nursing staff for specific duties.

Nursery Nurses

There is an annual intake of young girls who have just left school for a two-year course of practical and theoretical training in the care of children from birth to five years of age, leading to the examination for the Certificate of the National Nursery Examination Board.

Practical training is given to these nursery students at six of the Council's day nurseries which have been approved by the Department of Health and Social Security for this purpose, whilst formal theoretical study is undertaken at the North London College for Further Education.

22 students received training during the year and 7 second year students taking the examination in 1970 were successful in obtaining the certificate.

District Nurses

The course of practical training for State Enrolled Nurses has been approved by the Department of Health and Social Security and three State Enrolled Nurses successfully completed the course of District Nurse Training for the appropriate certificates of The Queen's Institute of District Nursing. In addition nine pupil nurses undertaking an integrated enrolled nurse course of training at St. Matthew's Hospital received practical instruction in district nursing work with this Authority. Arrangements have been made for State Registered Nurses to undertake their district nurse training at the North Western Polytechnic.

Health Visitors

7 qualified nurses who have had midwifery or obstetric training and who were accepted by Colleges of Further Education to undertake a course in health visitor training have been sponsored by the Council for the duration of the course being held in the Academic Year 1970/71. The course, leading to the Health Visitor Certificate involves one year's full-time study, including both theoretical and practical training and is based on the syllabus of the Council for the Training of Health Visitors. During the Academic year 1969/70 13 students were sponsored, 12 of whom were successful at the final examination.

Mental Health Staff

Mental Health Social Workers and Training Centre, Day Centre and Special Care Unit staff have attended short residential courses and day and part-time day release courses arranged by the London Boroughs' Training Committee, the National Association for Mental Health and Spastics Society. In addition a supervisor/teacher of a junior training centre is undergoing a two-year course of training, leading to the award of the Diploma of the Training Council for Teachers of the Mentally Handicapped.

Two Mental Health Social Workers were undergoing a two-year course of training at the end of the year leading to the award of The Certificate of the Council for Training in Social Work, and a supervisor of a day centre is undergoing a one-year course of training leading to the award of The Diploma in the Training and Education of Mentally Handicapped Adults.

Pupil Public Health Inspectors

Seven pupil public health inspectors are currently undergoing courses of training, leading to the examination of The Diploma of the Public Health Inspectors Education Board. They are receiving their theoretical training at the Tottenham Technical College and practical training is undertaken within the department. Five students were successful in the 1970 examinations.

Administrative and Clerical Staff

During the year 12 administrative and clerical officers in the Department undertook various courses of study leading to the Local Government Clerical

Examination, the Diploma of Municipal Administration, etc. Such staff are granted day release by the Council for the purpose of attending classes and the Council meet all fees and expenses in connection with these studies. At times it is not easy to release staff from their ordinary duties in the Department as the fixed establishment does not allow for this, but in the majority of cases the Department is able to make arrangements and, in fact, encourages staff to take these examinations which it is hoped will be of long term benefit to the Council.

Reciprocal Arrangements

In addition to ensuring that staff receive adequate training, the Department provides practical training facilities for other organisations. For instance, nursing, social and medical students from hospital schools visit the maternal and child health centres, day nurseries, and mental health establishments as part of their training. I am pleased to be able to offer these facilities as it enables students in all the fields of the health services to learn something from each other and so foster the close liaison that is so necessary in the work.

In-Service Training

Throughout the year staff in all grades continued to attend refresher and training courses held by the various professional organisations. A large proportion of the fees for these courses is re-imbursed to the Council by the Local Government Training Board.

SCHOOL HEALTH SERVICE



Dental Health - Hackney Field Day

SCHOOL HEALTH SERVICE

The Inner London Education Authority is responsible for the school health service, but by virtue of an agreement required by Section 32 of the London Government Act, 1963, there is joint use by the Authority and the Borough Council of professional staff, premises and equipment. The Medical Officer of Health is the Principal School Medical Officer of the Inner London Education Authority for the area and responsible to that Authority for the day-to-day running of the service.

In this report some of the more detailed statistical information has been omitted, but for those who are interested it will be found in the report of the Medical Adviser to the Inner London Education Authority.

May I take this opportunity of thanking the Medical Adviser and his staff and the divisional officer of the I.L.E.A., Mr. Mason, and his staff, for all the help and co-operation they have given so willingly during the year.

SCHOOL MEDICAL EXAMINATIONS

Both the number of children examined in routine medical examinations (14,099) and the school population (36,369) show no significant change during the year. In addition a further 406 children were examined under the selective medical examination scheme.

NON-ROUTINE MEDICAL INSPECTIONS

Employment cert	ificates		un tabén	THE REAL PROPERTY.	alpatha				134
Theatrical chil						•			42
School journeys									1,603
Recuperative ho	lidays								255
Secondary schoo	l annual	surveys	8						101
Outward bound c	ourses								1
Boarding school	s for the	delica	ate						33
Handicapped pup	ils - sta	tutory	examin	ation					162
Handicapped pup	ils - per	iodic s	special	defect	examina	ation			418
At request of:							al book)	170
BYCH OF BOARD SE	Head tead	her - c	others						308
	School nu	rse							57
	Divisions								16
	District	Care On	rganise	r or Car	re Comm:	ittee			25
	Parent							ni mi in	90
	School do								66
			***						86
Miscellaneous									
									3,567

The total is slightly higher than in 1969. The category 'theatrical children' means children who have been selected by theatre management to appear on stage, usually as part of a chorus.

RE-INSPECTIONS

In addition to routine and non-routine medical examinations, 4,208 children were seen again by the school doctor 3 to 12 months later in order to check on some defect noted on a previous occasion.

EDUCATION WELFARE SERVICE

After much consideration the Inner London Education Authority decided to develop a unified education welfare service which incorporated the School Care Service and the School Enquiry Service. The new service came into operation on 1 October 1970. Schools are still being served by combined area teams of both paid and voluntary workers thus preserving the tradition of voluntary care so long established in the London Education service.

TREATMENT FACILITIES

School children are treated at most maternal and child health centres and at Hackney School Treatment Centre, 13 Goulton Road, E.5. Details of the work done at these clinics are set out below.

Type of Clinic		No. of Sessions	New Cases	Total Attendances	
Vision			310	2, 122	4,440
Orthoptic			163	286	590
Audiology			35	132	223
Special investigation			158	198	898
Minor ailment			114	389	1,907

Vision testing is provided at eye clinics at four centres in the borough. Orthoptists are available at two centres and they play an important role in providing an efficient remedial service.

The majority of cases seen were found to have errors of refraction and/or squint and 1,088 pairs of spectacles were ordered.

All children have their vision tested on entering school at 5 years - or earlier if they attend a nursery class.

When any defect is found the children are seen by eye specialists at one of the four centres in the borough, or at the eye department of local hospitals.

Special attention is given to verifying that a child's hearing is satisfactory. One school nurse spends most of her time touring the schools testing hearing using an audiometer.

Those children who fail the first test - a sweep test - are given a more detailed hearing test at John Scott Health Centre. During the year, out of 5,812 children who were given a sweep test, 163 required a further test and 138 were referred to the consultant ear, nose and throat surgeon who conducts a weekly clinic at the Centre.

The three special investigation clinics continue to provide a service for children suffering from obesity, enuresis and early emotional problems.

Some children may be seen at a Special Investigation Clinic prior to being referred to 'child guidance' and in these cases the social worker will provide support for the families, and also provide a social report on the family. School health social workers maintain very close liaison with the area teams of the Education Welfare Service.

Each minor ailment clinic is staffed by a clinic nurse; details of the defects treated are set out below:-

Athlete's foot	 		 		28
Plantar warts (verrucae)	 		 		528
Other skin disease	 		 		1
Bruises, lacerations, etc.	 	,	 	In each	127
					684

In addition 599 school children attended one of the Council's chiropody clinics - mainly for the treatment of plantar warts.

School children made a total of 629 attendances at the two bathing centres, 324 children attended for vermin and nits, and 181 for scabies.

HEALTH SURVEYS

The school nurse makes regular health surveys at her schools. They may be comprehensive, in which case all the children in a class are inspected, or selective, when only a smaller number of selected children are seen. At all surveys the nurse examines the child not only for cleanliness of the head, but also for other aspects, e.g. squint, ear discharge, nutritional state. Where necessary the child is referred for further investigation or treatment.

The school nurse also undertakes communicable disease surveys for particular conditions such as plantar warts or athletes foot.

The figures for the year are set out below:-

Number examined at comprehensive surveys			 23,776
Percentage found verminous			 1.5
Number examined at selective surveys			 6,485
Percentage found verminous			 3 - 25
Number of individual pupils found verminous	TUN SOLD	701.190	 430
Number referred to a bathing centre	aranto o		 176

INFECTIOUS DISEASES IN SCHOOLS

Only two incidents of tuberculosis were reported, one a teacher and the other a pupil. After careful investigation in neither school was it felt that any further action was necessary. The programme of BCG vaccination of susceptible school children in their thirteenth year continued during the year.

The small outbreak of ringworm reported in 1969 was finally brought under control early in 1970.

As mentioned previously in the report, Rubella vaccination for girls in their fourteenth year was commenced towards the end of the year. The vaccinations were carried out with the co-operation of the Inner London Education Authority. Talks explaining the importance of being vaccinated against Rubella were given to schoolgirls by health visitors.

HEALTH EDUCATION

A number of health visitors take classes in the Borough and posters, leaflets and other relevant information is supplied to teachers who are carrying out health education in schools.

STUDENT HEALTH SERVICE

This service so far as this Borough is concerned commenced in 1967 at the London School of Furniture and ceased when this college moved to Tower Hamlets during 1970. No other colleges are participating.

SCHOOL DENTAL SERVICE

Throughout this year all the dental staff worked under even more difficult conditions than in 1969. There has been a very severe lack of dental surgery assistants, placing a heavy strain on the remainder and on dental officers and auxiliaries. The London Borough of Hackney as the employing authority agreed to place the surgery assistants on another pay scale with a view to improving quality as well as quantity. It is not generally realised that to be of any use to the service the sort of person required in a surgery must have all the qualities necessary for clerical work plus the added qualities of understanding the problems relating to dental surgery and to patients, to be able to deal with them in a cheerful, hygenic, and industrious way. It is therefore essential that they be paid more and not less than general duty clerks.

During the year many visitors from all over the world, including Cyprus, Sweden, Ceylon, Goa, New Guinea, India and Malaysia came to see the school dental service in Hackney.

The school and other priority dental services share staff and premises and so everything concerning these aspects relates to both services but the statistics relate only to dental care of school children. Accounts of dentistry for the mentally handicapped, pre-school children and expectant and nursing mothers will be found elsewhere in this report.

Because of the ever increasing cost of running a good dental service a central supplies system has been instituted for certain consumable items. Not only is this saving money for the Authority due to bulk purchases, but it has speeded up the interval between dentists ordering goods and their arrival in the surgery.

STAFF

At the end of the year there was a staff, including Principal School Dental Officer, Orthodontist and Senior Dental Officer, of 10 full-time and 10 Sessional Dental Officers, making a full time equivalent of 13.3 within an establishment of 16. We thus had quite a high rate of recruiting staff, many of whom were quite young. This is the only way to ensure maintenance of high standards.

In addition to the dental surgeons there are two dental auxiliaries. These are invaluable additions to the team of ancillary workers helping the dental officers, both in the realms of dental health education and in clinical treatment of young children.

There were 11 dental surgery assistants within an establishment of 16. In addition to the vacancies many of those in post have been with the Department for only a very short time, and certainly cannot be regarded as trained. In an attempt to improve this situation four dental surgery assistants were encouraged to go to evening classes in order to study for the National Certificate for Dental Surgery Assistants. In addition they have an in-service tutorial on one afternoon a week. By this means it is hoped to ensure that some of the younger workers stay with the service.

The surgery at Geffrye School for physically handicapped children continues to be a great success with children, parents and school staff. It certainly shows the value of having a surgery within the school premises as it is most difficult for these children to be transported elsewhere for treatment. It allows a closer working relationship between the school doctor, dentist and nurse with subsequent benefit to the child. One surgery in the Borough is used by the orthodontist and another is shared between the auxiliaries, leaving the other thirteen for general dental care. Evening sessions continued to be very popular with children who are coming up towards public examinations as they often do not wish to take time off from school during the day; also amongst working mothers who are unable to come with their off-spring during the day.

SCHOOL DENTAL INSPECTIONS

89.7% of the school population was examined, which is very good indeed. 67% of these were found to need some form of dental care. Approximately 69% of those parents replying to the offer of dental care asked for their children to receive this care from the school dental service. The rest indicated apreference for the family practitioner.

In a special survey, only 25.6% of the 5 year old children had no decayed teeth, treated or otherwise. It is thus essential that treatment and prevention begin well before the child goes to school. This includes the essential provision of a fluoridated water supply.

TREATMENT

9,534 children attended on 30,570 occasions to receive 28,510 fillings and to have 3,563 teeth extracted. Thus 476 additional children attended to have 1,165 more fillings and 142 more teeth extracted than in 1969. The actual variation in extraction totals varied with age, as shown in the following chart:-

Age Group	Number of te 1969	eth extracted 1970	Change
5-9 years	1,834	2,085	Increase of 251
10-14 years	1,394	1, 299	Decrease of 90
15 and over	193	179	Decrease of 14
TOTALS:	3,421	3,563	Increase of 142

It is sad to note that it was found necessary to extract many more teeth from younger children. The only good thing that can be said is that as less general anaesthetics were administered more teeth are obviously being taken out with injections, which young children readily accept. One must also note that the number of patients attending for emergency visits has again gone up. During the coming year we shall have to consider why this is so.

The ratio of teeth filled to teeth extracted was 16.80 to 1 for permanent teeth and 3.70 to 1 for deciduous ones, against 16.25 and 3.65 respectively in 1969. This is a further improvement on an already excellent record, showing the benefits to be gained from modern techniques of conservation. If those teeth which were removed for orthodontic reasons are eliminated the ratios rise to 23.3 to 1 for permanent teeth and 4.4 to 1 for deciduous teeth.

There has also been a vast increase in the number of teeth saved by root fillings. There is need for expansion in the provision of advanced techniques and it is to be hoped that the appointment of a second senior dental officer in the early part of the new year to concern himself mainly with these aspects of the work will greatly advance the care given.

General emphasis continued to be placed on the prevention and treatment of gum diseases, as well as tooth decay. The number of prophylaxes or polishings has thus continued to rise.

ORTHODONTICS

There was an increase in the number of new appliance therapy cases commenced during the year, apart from those treated without a brace and thus not recorded statistically as patients. However, what is even more important is that the number of cases actually completed during the year has risen dramatically. Many more appliances were fitted and there was a marked rise in the number of orthodontic attendances. This continually increasing use of the orthodontic service is very gratifying. It is just one more stage in the historic process of dragging the school dental service away from its past associations with multiple extractions, through the realms of filling teeth, and on to the more modern aspects of prevention of disease and concentration on psychological aspects of our work. There is nothing more gratifying than to see a young girl look into the mirror and say how much better her teeth appear now than when she first came to the orthodontist. It is this sort of thing that makes the work worthwhile.

GENERAL ANAESTHESIA

There was a reduction of 259 individual general anaesthetics and 21 general anaesthetic sessions. Many of the anaesthetics were given by the Principal School Dental Officer, who was sent on a clinical attachment to a consultant anaesthetist to learn about up-to-date techniques in inhalation and intravenous anaesthesia, thus ensuring a high standard in our clinics. Some children have been given simple blood tests to ensure that it is safe for them to undergo a general anaesthetic, and this move has been welcomed by the parents concerned.

DENTAL HEALTH ACTIVITIES

Hackney has again been very active in this field. The two dental auxiliaries have been very valuable in giving dental health talks to most primary school children in the Borough. This is usually in response to a request from Head Teachers, following dental inspections by one of the dental officers. There were more than twice as many dental education sessions this year than in 1969. In addition to the normal talks our auxiliaries joined with the dental health educator from County Hall in presenting the Jimmy Germ Puppet Show to young children. This was very well received both by the pupils, and, perhaps even more important, by the teaching staffs. As part of the Health Department display at the Hackney Field Day in Clissold Park, a public performance of this puppet show was given. We are now co-operating with the Headmistress and staff of Southwold Infants School, in showing how dentistry and dental health can form part of the daily routine in schools. This project is being filmed by one of the teachers.

STATISTICS

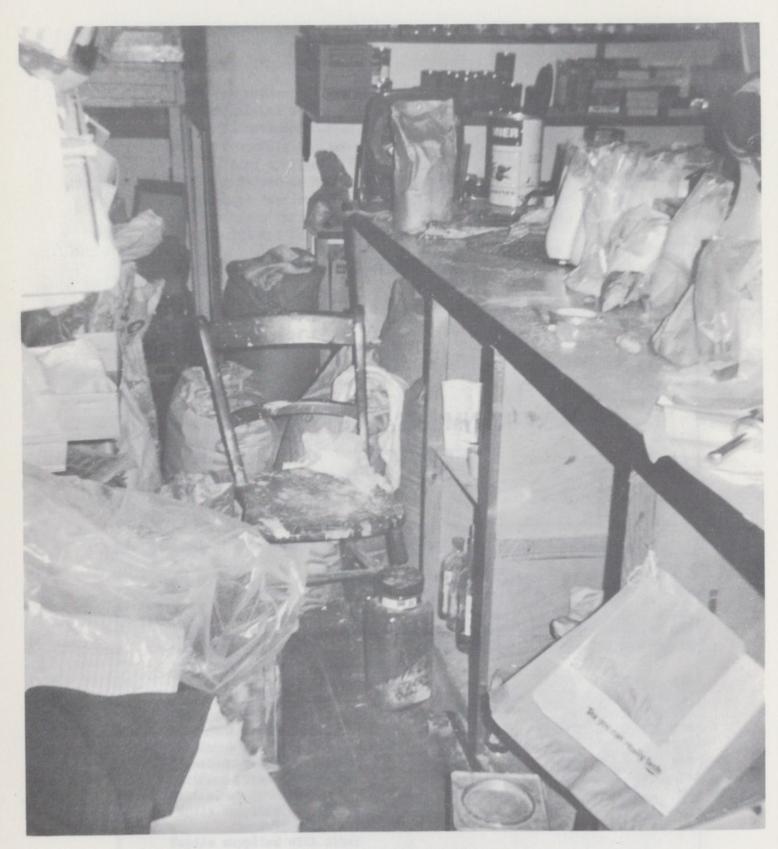
	1970	1969	
1. School Roll:	36, 369	36,05	
2. Number of Sessions:	completed du	Chaes	
Inspections	245.5	28 4	
Treatment - ordinary (including orthodontics)	5741.0	5287. 1	
Treatment - general anaesthetic	34.0	55. 1	
Dental Health Education	106.3	50	
DAT S ASA E	TOTAL OF THE	CONTRACTOR OF THE PARTY OF THE	
TOTAL	0100 0		
TOTAL	6126.8	5676.2	
3. First Inspections:		diden	
a) Number of first inspections at school	28,933	25, 254	
b) Number of first inspections at clinics	3,680	4, 421	
c) TOTAL	32,613	29,675	
d) Percentage of school roll inspected	89.7	82. 3	
e) Number found to require treatment	21,908	20,738	
f) Percentage of number inspected found to	START	Algo Est	
require treatment	67. 2	69.8	
g) Number offered treatment	19, 231	16,837	
h) Percentage of number requiring treatment		CELHA	
offered treatment	88	81	
4. Re-inspections:			
a) Re-inspections at school or clinic	867	931	
b) Re-inspections as percentage of first visit	10.2	10.2	
c) Percentage of number re-inspected found to			
require treatment	78. 2	55. 5	
etment 0,10H 2,084 828 9,554 9,000	st not attent	191119	
5. Visits for treatment		Legg	
a) First visits	9,534	9,058	
b) Subsequent visits	21,036	21,662	
c) TOTAL	30,570	30,720	
d) Emergencies	1,202	1,068	
e) Visits for general anaesthetics	469	728	
f) Additional courses treatment commenced	1, 103	814	
g) Total courses treatment (a + f)	10,637	9,872	
part one state of the state of	In hat fann	armosti aliqui	
6. Children made dentally fit:	5,846	5,070	
Percentage made dentally fit:	54.94	51.37	
7. Failed Appointments	11,423	11,902	

	1970	1969
Orthodontics:		Ton tone
New cases commenced during year	148	137
Cases completed during year	144	89
Cases discontinued during year	20	20
No. of removable appliances fitted	266	216
No. of fixed appliances fitted	9	2
Pupils referred to Hospital Consultant	3	6
Orthodontic sessions	419.1	389.4
Orthodontic attendances	3,464	2,740
Teeth extracted for orthodontic reasons - Permanent	226	302
Teeth extracted for orthodontic reasons - Deciduous	400	286
Other Treatment		
Pupils X-rayed	1, 280	1,014
Prophylaxis	3,620	3, 191
Teeth otherwise conserved	244	304
Number of teeth root filled	174	111
Inlays	6	6
Crowns	119	64
Anaesthetics administered by P.S.D.O.	46	0

10. Analysis of attendances and general treatment according to age groups

	Ages		Totals		
	5 to 9	10 to 14	15 and over	1970	1969
First visits for treatment	5, 108	3,588	838	9,534	9,058
Subsequent visits for treatment	9,852	8,925	2,259	21,036	21,662
Total visits for treatment Additional courses of treatment	14,960	12,513	3,097	30,570	30,720
commenced	495	467	141	1, 103	814
Fillings in permanent teeth	4,507	9,309	2,955	16,771	16,932
Fillings in deciduous teeth	10,508	1, 231	0	11,739	10,413
Permanent teeth filled	3,493	7,734	2,517	13,744	14,374
Deciduous teeth filled	9, 146	1,056	0	10, 202	100000000000000000000000000000000000000
Permanent teeth extracted	122	517	179	818	885
Deciduous teeth extracted	1,963	782	0	2,745	2,536
General anaesthetics administered Pupils supplied with full upper	331	126	12	469	728
and full lower dentures Pupils supplied with other	0	0	2	2	0
dentures	7	4	10	21	13
Number of dentures supplied	7	4	13	24	13

ENVIRONMENTAL HEALTH SERVICES



Food Premises - Lack of Hygiene

INFECTIOUS DISEASES

Details of infectious and contagious diseases notified in 1970 were as follows: -

Anthrax	Nil	Meningitis (Acute)	11
Cholera	Nil	Ophthalmia neonatorum	2
Diphtheria	Nil	Plague	Nil
Dysentery	45	Poliomyelitis	
Encephalitis (Acute)	Nil	(Acute)	Nil
Enteric (Typhoid or		Scarlet fever	42
Para-typhoid fever)	2	Smallpox	Nil
Food Poisoning	98	Tetanus	Nil
Infective Jaundice	29	Tuberculosis	115
Leptospirosis	Nil	Typhus fever	Nil
Malaria	Nil	Whooping Cough	117
Measles	1,214	Yellow fever	Nil

The two enteric cases were one case of typhoid fever and one of paratyphoid fever. The case of typhoid fever was a 12 years old immigrant child. It was not possible to find the source of infection but a guest who had returned home by the time the child was in hospital, may have been the culprit. The appropriate health authorities were informed so that the local medical service could take appropriate preventive measures. The paratyphoid case was a young school boy of 16 years who was infected with Salmonella paratyphi B during a visit to the U.S.A. Both cases recovered without any after-effects.

Only about a third of the food poisoning cases were typed. Of these 16 were Salmonella typhimurium, 4 S. flexneri, 3 S. Panama and one case each of S. Virchow, Agona and Cl. Welchii. There were eight cases of S. Indiana in children who returned from a holiday home in Sussex where there was an outbreak of this type of Salmonella.

The remaining cases were either notified as suspect food poisoning and never confirmed or the salmonella species was untyped. The latter includes an outbreak of 36 cases in St. Matthew's Hospital.

It is thought that the following detailed account of a case of typhoid involving a typhoid carrier would be of interest.

Successful treatment of typhoid carriers is generally rare. A carrier living in the London Borough of Hackney was cured and can now live and work as an ordinary person. How this was achieved is told below.

At the beginning of 1969, a child developed typhoid fever. It was not difficult to establish that this family were relatives of one of the known typhoid carriers living in the Borough, the carrier being a sister of the child's father. This typhoid carrier was a married lady (aged about 40 years) who came to this country thirteen years ago. At an outbreak of typhoid fever in 1966 at the house where she and her family were living two typhoid carriers were found and she was one of them. In spite of different courses of treatment given by her G.P. each of the six-monthly tests from 1966 until Summer, 1969 showed her to be producing Salmonella typhi positive stools.

In view of the fact that this carrier might have been the source of more than one case of typhoid fever within the Borough it was decided, partly from an epidemiological and partly from a human point of view, again to try to cure her of her typhoid carrier state. To this end some successful team work was carried out between the patient, the G.P., the Consultant at the fever hospital and the staff of the Health Department dealing with epidemiological problems.

The G.P. was very appreciative of the plan, the Consultant was very agreeable to it and he in fact was the partner in the team who had the difficult task to actually examine and cure the patient. The patient accepted the plan without any hesitation.

The patient was admitted to the fever hospital on 15th September, 1969. On admission no physical abnormalities were found. The carrier state was confirmed by the isolation of Salmonella typhi from two specimens of her stool, the bacillus being sensitive to Ampicillin, Tetracycline, Streptomycin, Humatin, Chloramphenicol and Colomycin. Strangely enough, her Widal agglutinations did not show a high titre to the VI antigen. Urine specimens did not grow Salmonella typhi. A cholecystogram was performed but this showed no evidence of gall stones or gall bladder disease.

The patient was started on following therapy on 25th September:

- 1. Ampicillin 1 gram twice daily intramuscularly
- 2. Ampicillin 1 gram 8 hourly orally
- 3. Probenecid 1 gram twice daily to act as a renal blockade and raise the blood level of Ampicillin

She was given this regime for one week and discharged on 2nd October, 1969 on following medication: Ampicillin orally one gram 8-hourly and Probenecid orally one gram twice daily for eleven weeks. The patient was made aware that the success rate for this treatment is 75%. It was not considered necessary to carry out a cholecystectomy.

Immediately after this home treatment seven stools were examined and later a further three with a month's interval and they all proved to be negative. For all practical purposes the carrier had now been cured from her typhoid carrier state and she was informed accordingly on 2nd June, 1970.

There was also a second person who had been registered as a typhoid carrier because she had produced several positive stool specimens within two months after her typhoid fever attack but never since in spite of six stool examinations during the next month and two stool examinations annually for two years. In 1969 she had a thorough test with six stool examinations at two weeks interval and they were all negative. This carrier was considered to have been a temporary carrier only and was taken off the list of carriers during 1969. Thus two persons were relieved of the unpleasant stigma of a typhoid carrier and ceased to be potential dangers to other people in the community.

TUBERCULOSIS

Of the 115 primary notifications of tuberculosis 86 were in respect of pulmonary tuberculosis and 29 in respect of non-pulmonary tuberculosis.

The number on the Department's tuberculosis register at the beginning of the year was 1,689. After adding primary notifications and transfers in and subtracting deaths, transfers out and recovered cases etc., the number on the register fell to 1,605 by the end of the year.

The number of cases receiving extra nourishment at the end of the year totalled 133.

VENEREAL DISEASES

The Department runs a scheme of contact tracing which appears to be quite successful. A full-time officer having a nursing qualification is employed and her time is divided between the Health Department, the hospital clinics and actual contact tracing in the appropriate amounts. Her work is far from easy involving as it sometimes does sitting in "pubs" and even clubs of a somewhat doubtful character in the West End. The Council has appreciated her difficulty and has made certain concessions to help her with her work.

Some health education has been done in respect of venereal disease but it is regretted that it probably falls far short of what might be done.

Details in respect of Hackney residents attending the Homerton Grove Clinic, the only one situated in Hackney are set out below. Some residents from Hackney are known to attend clinics outside the Borough and details from other hospitals are also included:-

Hospital	No. of new ca	Total		
	Gonorrhoea	Syphilis	Total	
Homerton Grove Moorfields	428	22 7	450 7	
London	380	45	425	
Prince of Wales	128	2	130	
St. Thomas'	3	1	4	
Middlesex	37	1	38	
St. Bartholomews	20	3	23	
Central Middlesex	. 1	- 1	1	
Seamen's	1	San Humanitation as	1	
Royal Northern	97	9	106	
Total:	1,095	90	1, 185	

PUBLIC HEALTH LABORATORY SERVICE

Bacteriological specimens are sent to the Public Health Laboratory at County Hall, S.E.1. and an analysis of the 615 specimens submitted for examination is set out below: -

Chaoimana	Number	Organisms	Results		
Specimens	Mumper	Organisms	Negative	Positive	
Throat and Nose Swabs	106	Diphtheria Bacilli	98	-	
		Haemolytic Streptococci	49	18	
	p topp	Vincent's Angina	71	1	
Faeces and Rectal Swabs	500	Pathogens	422	100	
	- harries	Salmonella Enteritidis	or one are	2	
	100000000000000000000000000000000000000	Salmonella Paratyphi B	so Li Prome	4	
	1 7	Salmonella Typhimurium	th let that I	17	
		Shigella Sonnei	-	34	
	The latest	Salmonella Virchow	Tana Call	1	
	100	Salmonella Panama	-	2	
	1 7610	Salmonella Indiana	-	10	
	V65 RC8	Cl. Welchii	100	5	
	TO THE	Bact. E. Coli. 0111	-	3	
Urine	9	Pathogens	9	5 17-101	

HOUSING

HOUSING ACT 1957

Eleven Clearance Orders involving 413 houses and 433 families comprising 1,028 persons were made during the year.

The following Clearance Orders made earlier by the Council received confirmation from the Ministry during the year:-

Mandeville Street area, comprising 5 houses
Millers Terrace, areas 1 & 2, comprising 11 houses
Oswald Street area, comprising 4 houses
Ridley Road area, comprising 15 houses

The position regarding Tresham Avenue Clearance Area had still not been determined, since an appeal to the House of Lords was pending.

Individual Unfit Premises

Nineteen Closing Orders were made in respect of whole houses during the year plus five Closing Orders in respect of self-contained flats.

Closing Orders were made in respect of 51 rooms including 47 Underground rooms.

During the year five Closing Orders were determined and one Undertaking cancelled, the premises having been made fit. Legal proceedings were instituted in respect of five contraventions of Closing Orders and resulted in the defendants incurring penalties totalling £80 with £20 costs.

HOUSING ACT 1961

Management Orders

Management Orders were made in respect of thirteen houses where proper standards of management had not been maintained, bringing the total number of Management Orders made by the Council to 150. Generally compliance with the Housing (Management of Houses in Multiple Occupation) Regulations 1962 was secured as a result of informal action, but in respect of eight houses legal proceedings were instituted and fines totalling £348, with £35 costs, were imposed.

Directions

During the year 55 Directions were given and there are now 2,075 houses which are subject to Direction. Legal proceedings in respect of contraventions of Directions were successful in eight instances, the owners being fined a total of £425 with £35 costs. One Direction was varied so as to increase the number of individuals who should occupy the house concerned; the owner having provided additional amenities. Failure to furnish statements of the occupancy of three houses resulted in the owners being fined a total of £145 with £12 costs.

Registers of Houses in Multiple Occupation

Section 22 of the Housing Act, 1961 enables local authorities to make, subject to confirmation by the Minister, a scheme for the compilation and maintenance of a register for the whole or part of their areas of houses in multiple occupation. Any such scheme prescribes the particulars to be registered, makes it the duty of appropriate persons to notify the local authority of the particulars for registration, and to notify any change. Such a scheme is an "informatory" scheme and public notice must be given, both of the intention to submit a scheme and, subsequently, of its confirmation.

These powers are extended by Section 64 of the Housing Act, 1969, which provides for "control" provisions to be incorporated in a scheme for preventing multiple occupation to a greater extent than permitted. This is known as a regulatory scheme and also requires that public notice must be given of intention to submit the scheme to the Minister, and of confirmation.

The "control" provisions include powers for the local authority to refuse registration under certain circumstances and also to require works to make a house suitable before registration. The owner has a right of appeal to the County Court against a refusal to register, or the requirement of works.

On 9th December, 1970, the Council resolved to make a combined informatory and regulatory scheme to cover the whole of the Borough, but excepting properties owned or controlled by this Council and the Greater London Council.

The scheme is based on the Ministry's model scheme, and subject to confirmation, will come into operation on 1st February, 1971.

Provision of Amenities

Section 15 of the Housing Act, 1961 enables a local authority to serve a Notice on an owner specifying works which are required to render a house reasonably suitable for the number of individuals and households accommodated for the time being on the premises, and is extended by Section 67 of the Housing Act, 1964, to enable a Notice to be served for works to render a house suitable for occupation by a number of individuals and households smaller than the number accommodated for the time being on the premises.

Three Notices were served during the latter part of the year.

Housing Act, 1969

Extensive work was carried out in connection with applications for improvement grants and the issue of 428 qualification certificates, entailing well over 2,500 inspections by public health inspectors during the year.

FOOD AND DRUGS

The ever increasing variety of foodstuffs being imported into the country provides evidence that the legislative requirements of food and drugs authorities should be standardised, perhaps by means of an international clearing house. Varying labelling standards, standards for permitted colours in foods are examples which indicate the need for international control. It is reasonable to assume that effects on humans are a constant factor wherever they may be; thus the need for regularising standards.

Imported Foods

As a result of the introduction of the system of container-transportation an increasing quantity of food which previously would have been inspected at the Port of entry into the Country is now inspected by the Inspectors in the area to which the food is consigned. Experience over the past twelve months has indicated that as far as Hackney is concerned there is a growing demand on the manpower available to maintain a satisfactory policy of food inspection and one can foresee that it may well be necessary in the near future to give consideration to augmenting the number of Inspectors undertaking this work.

The nature of the consignments are varied and comprise frozen meat, frozen prawns, fresh fruit, confectionery, canned foodstuff and novelties.

Two consignments of novelties with sweets were detained as the chemical examination of the sweets revealed the presence of a non-permitted colour. In both instances the Importer extracted the sweets from the novelties and surrendered them to the Local Authority for destruction.

Markets

With a slightly improved staffing situation it has been possible to direct more attention to the regular inspection of foodstalls in the street markets and other places. As a result both by persuasion and, where this has failed by compulsion, there has been a marked improvement in standards.

New Legislation

Food and Drugs (Milk) Act 1970

This enactment authorises the treatment of milk by the application of steam and subject to certain conditions, this method of treatment shall not be considered as the making of an addition of water to that milk in contravention of Section 32 of the Food and Drugs Act, 1955.

The Cheese Regulations 1970

These regulations became operative on 31st January 1970 and re-enact the Cheese Regulations 1965 with amendments, to include requirements for the composition, description and labelling of specified cheeses.

The Cream Regulations 1970

These Regulations supersede the Food Standards (Cream) Order 1951 and specify the requirements for the description, composition and labelling of cream.

The Labelling of Food Regulations 1970

When these regulations came into operation on 31st March 1970 they revoked the Labelling of Food Regulations 1967 and they will supersede the Labelling of Food Order 1953 as amended on the 1st January 1973.

The principal changes include the restrictions on claims declared on labels or in advertisements; the restriction on the use of the works "Milk" "Butter" and "Cream" on labels and advertisements; and the restriction on claims that foods have tonic, restorative or medicinal properties.

Soft Drinks (Amendment) Regulations 1969

These amending regulations, which came into operation on 1st January 1970 amend the definition of "Permitted Artificial Sweetener" in the principal regulations so that Saccharin, Saccharin Calcium and Saccharin Sodium are the only permitted artificial sweeteners.

Artificial Sweeteners in Foods Regulations 1969

These regulations which became operative on 1st January 1970 supersede the 1967 Regulations. The principal change is that Cyclamic Acid, Calcium Cyclamate and Sodium Cyclamate are no longer permitted artificial sweeteners or permitted ingredients in artifical sweetening tablets.

Food Complaints

Following investigation into complaints that articles of food purchased by members of the public were unwholesome legal proceedings were instituted in three instances resulting in the vendors being fined a total of £30 with £20 costs. The summonses related to a mouldy loaf of bread, a cigarette in a loaf of bread, and a foreign body in a Steak and Kidney pie.

Food Trades

Details of food trades carried on in 2, 120 premises situated in the Borough are set out overleaf:-

Aerated water manufacturer	1	Greengrocery	148
Bakehouses (basement)	7	Grocery and Provisions	429
Bakers shops and bakehouses	78	Ice cream - manufacture and sale	610
Beer bottlers	1	Milk distributors	271
Butchers	179	Public houses and Off licences	366
Cake decoration manufacturer	1	Preserved food premises	240
Confectionery (Sweet shops)	382	Restaurants and cafes	291
Fish, wet, fried and curing	91	Wholesale food storage	33
Food importers	3		3, 134

Section 16 of the Food and Drugs Act requires the registration of premises upon which ice-cream is manufactured, stored or sold by retail and also premises upon which the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale is carried on. The preparation of food includes the cooking of fish and chips and also Chinese food prepared for consumption off the premises. Three applications for the registration of premises for the preparation or manufacture of preserved food were granted, as were eight applications for registration of premises for the sale of ice cream. One summons for using non-registered premises resulted in the defendant being fined £75 with £25 costs.

Food Hygiene (General) Regulations 1960-1966

Regular visits were made to premises selling food to ensure that the Food Hygiene (General) Regulations 1960 are being complied with. Contraventions totalling four hundred and two were found at one hundred and sixteen premises. Following an informal approach to the occupiers of the premises concerned, it was necessary to institute legal proceedings in twelve cases resulting in penalties totalling £480 with £73 costs being imposed.

An analysis of premises found to be contravening the Food Hygiene (General) Regulations 1960 to 1966 showed the following:-

Bakers	11	Grocers	2
Butchers	16	Grocery and Provision	21
Cafes and Restaurants	33	Off Licences	2
Canteens	5	Public Houses	28
Confectioners	5		110
Fishmongers	3		116

In one case the premises were in such an unsatisfactory condition that the Court, on the application of the Council, made an Order under Section 14 of the Act disqualifying the occupier from using the premises as catering premises for a period of two years.

Regulations contravened

Regulation No.		No.
5	Food businesses not to be carried on in insanitary premises	5
6	Cleanliness of equipment etc.	50
8	Food to be protected from risk of contamination	16
8 9	Personal cleanliness	5
12	Soil drainage systems	1
14	Sanitary conveniences	84
16	Wash-hand basins to be provided	85
17	First aid materials to be provided	23
18 19	Accommodation for clothing, etc.	7
19	Facilities for washing food and equipment	59
20	Lighting of food rooms	8
21	Ventilation of food rooms	4
22	Food room not to be, or communicate with, a sleeping place	1
23	Cleanliness and repair, etc. of food rooms	125
24	Accumulation of refuse, etc.	26
25	Temperature at which certain foods are to be kept	3
		402

Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966

The position in regard to street traders licensed to engage in the sale of food commodities at 31st December was as follows:-

munitation, themse has about the			Plac	e of Tr	ading		
to Legislationegators boot as	Hoxton Street	Ridley Road	Chats- worth Road	Well Street	Broad- way	Other Sites	Total No. of stalls
Fruit and Vegetables	43	55	29	19	29	13	188
Fish (wet, dry and shell)	4	11	4	3	3	3	28
Poultry	1	7	-	-	-	-	8
Meat and Poultry	2	3	1	-	1	-	7
Grocery and Provisions	6	1	4	- 1	2	-	13
Sweets and Ice cream	2	2	2	2	1	40	9
Cakes and biscuits	3	1	3	1	5	-	13
Refreshments (Coffee stalls)	-	10-	-	-	-	2	2
Eggs	1	3	2	1	3	-	10
West Indian Foods	-	7	-	-	-	-	7
Totals	62	90	45	26	44	18	285

SAMPLING

A wide variety of food samples was taken and submitted to the Public Analyst. The results are set out in the table below: -

			Formal	Samples	Informa	al Samples
Descript	ion	relie relie	Number Taken	Number Non- Genuine	Number Taken	Number Non- Genuine
Acetic Acid		 	2	2	-	-
Ackees		 	1	- 675	La character	-
Almond Flavoured Drink		 	1	-	-	-
Almond Marzipan		 	3	-	-	-
Almonds, Ground		 	1	-	-	-
Angelica		 	1	-	-	-
Apple Squash		 	1	-	-	-
Apricots in heavy syrup		 	1	-	-	-
Arrowroot		 	1	000	0002	-
Baby Foods		 	-	1 -	1	-
Baking Powder		 	1	-	-	-
Banana Porridge		 	1	1	-	-
Beans, Blackeyed		 	1	-	-0	-
Beefburgers		 	3		-	-
Beef Goulash		 	1	-	-	-
Beef, Minced		 	5	1	-	-
Beef, Potted with Butter		 	1	The Parish of	19 -	2-
Beef Spread		 	1		-	-
Beer		 	25	-	-	-
Benedictine		 	1	-	-	-
Bicarbonate of Soda		 	1	-	-	-
Bienizlin		 	1	-	-	-
Biscuits		 	5	1	-	-
Blackcurrant Health Drink		 	1		-	-
Blackcurrant Juice		 	1	7.319	-	-
Black Jira		 	1	1	-	-
Black Pudding		 	1	-	0 -	7.
Blood Compound		 	1	1970000	-	-
Bone and Vegetable Cereal		 	1	-	-	-

				Formal	Samples	Informal	Samples
Description	1			Number Taken	Number Non- Genuine	Number Taken	Number Non- Genuine
Bouquet Gar				1	-	-	-
Brandy				10	-	-	
Bread				20	11-	-	110
Bread and Butter				6	1	-	and the
Breadfruit				1	100	4110	2000
Broad Beans				1		-	bu to
Butter				3		-	no Dannyo
Butter Beans				2	-		di Linco
Butter Drops			100	1	-	112-00	-
Buttered Ginger				1	-	-	-
Buttermint Bonbons				2	-	-	
Buttermints, Royal				1	-	-	-
Dodd-washah Daldaha				1	100		-
				1	27-1-1		-
Cabbage Bursht Cake Fruit Mixture		**		1	Assessed to the second		2000
Galaca Book Yallu	**			1	100		
O In Williams				1	12.	91210	101100
			**	1	19.	0	191110
Caraway Seeds					1.0	4	NAME OF TAXABLE
Carob Syrup				1	1.5	Poster	mb. Trans
Carrots				1		- Saba	VI Tarre
Celery Salt				1	-	Transfer of	byEraic
Cheese				41	1	4	Amount of
Cheese and Beer				1	-	la tradicion	
Cheese Crackers				1	-	-	-
Cheese Popples				1	-	-	7
Cheese Sandwich				1	-	-	-
Cheese Sandwich Parsley				1	-	1	-
Cheese Spread with Mushrooms				1	1 -		-
Cheez Whiz				1		-	-
Cherries in Syrup				1	-	-010	-
Chewing Gum				1		-	0.1+11119
Chicken Breast in Jelly				1	1	10000	-
Chicken, Minced in Jelly				1	- 0	072B00	10-01
Chilli Pepper				1	-	be mi	0 -019
Chilli Powder				1	-	1	1
Chives				1	-		-
Cho-Cho				1	-	-	-
Chocolate Cream				1 1	-		-
Chocolate Delight				1	-	-	-
Chocolate, Milk				1	-	-	-
Chocolate Spread				1	-	1	-
Chocolate Turkish Delight				1	-	112101	
Chocolate, Whisky Flavour			100	1	C. BODG	1300	"do rou
Cholla Loaf Bread				1	-	Donne	-
Chopped Liver	::			1	- C-	2013	Line
Christmas Pudding				1	1	2003	1 2 111
				1	-		1
Cider Citrus Blossom Water				1	-		1
				1		1	1129 700
Cocam				1			The same
Cochineal			**	1	1670		101201
Cocktail Cherries				1			
Coconut Candy				1	10000	3.0	
Coconut Dessicated				1	107/00/2	The Table	-
Cod Fish Cakes				1	-	-	
Cod Roe, Smoked				1	10	200	1
Cod Steak		**		1	100	37000	-
Coffee	**			16	1	7 40	1200

				Formal	Samples	Informa	l Samples
Taket Nor-	Description	on	700	Number Tak en	Number Non- Genuine	Number Taken	Number Non- Genuine
Coffee Whip Crunc	h			 1	-	-	
Cole Slaw				 3	-	-	-
Cooking Fat .				5	-		
0 -11 - 011				 1	-		-
a				 1			11 11 11 11
O 61				 1			
Chandal Walland				 1		1	
G W-1 0/1				 1			1000
				 2		1	1
Cornmeal					-		
Crab, Dressed				 1	-		
Cream				 1	-	1	-
Cream Cake, Fresh				 1	-	-	1
Cream, Danish (St				 1	-	-	-
Creamed Coconut .				 1		-	1
Creamy Whirls .				 1	-	-	3 - 3
Crisps				 2	-	-	-
Currants				 2	-	-	a division
Curridan Powder .				 1	1	-	-
Curry Powder .				 4	-	1	-
Custard Powder .				 1	-	-	-
Dessert Whip .				 1	-	-	
Drinking Chocolat	е			 1	1	-	-
Drinks, Soft .				 26	3	6	1
Dripping				 5	-	-	-
Droxalin Tablets.				 1	-	-	-
Dubonnet				 1	-	-	-
Egg Custard Tart.				 1	-	-	-
Egg Farfals .				 1	1	-	10 to 400 D
Faggots				 2	-	-	30.410
Farex Fingers .				 1	-	1	-
Fish Cakes, Savou	гу			 1	13280	10015-10	-m/21/0
Fish, Canned .				 1	1	3	A Philips
Fish Fingers .				 1	-	1020	14,10
Fishlets, Jar .				 1	-	-	MYLE
Fish Paste .				 10	-	1	000-000
Flour, Self-Raisi				 1	-		2 10000
Food Colours .				 1	-		110000
Frankfurters .				 2	-	-	-
French Mustard .				 1	-	-	-
Frolen, Fruit and				 1	-	-	
Fruit, Canned .				 2	-	-	-
Fruit, Dried .				5			
Fruit Juice .				 1			
Fruit Pies .				 1	1111		1000
014- 0-14				 1			
Gelfilte Fish .				 1			
Ghee, Pure .				 2	1		
Ch h d				 1	1	-	100000000
Ci-				 7	100		
Gin					-	-	-
Glycerin and Thym	or lapters			 1	7	2.00	1000
Grain Flour .				 1		-	-
Gravy Powder .				 2	-	-	-
Ground Ginger .				 2	-	-	-
Ground Rice .				 1	-	-	-

				11 15	Formal	Samples	Informal	Sample
	riptio	on			Number Taken		Number Taken	Number Non- Genuine
Guava Jelly								
Gulab Jamum Mix					2	7	-	Tall tol
					1	-	-	-
Haddock, Buttered Smok					1	-	-	-
Haddock Fillets					1	-	1	-
Halva					2	-	BIRDS D	00 2 -00
Ham		**			5	-	-	0038
Herbs					-	-	1	-
Herring, Chopped					1	F.120001	duple he	not be to the
Herrings, Cooked					1	5. 1	THE TABLE	- 110
Herrings, Pickled					1	-	-510	In this and
Honey					1	-	-	10.5941
Honey Nougat					1	-	-	in Tiple
Horseradish					1	. 2	-	-
Horseradish sauce					1	-	-	-
Hot Dogs					1		-	-
Hot Peppers					3	Can Tarrente	-	-
Ice Cream					4	1	-	in the same
Instant Whip						2	1	is some
							1	. Edyland
T 00 0 1							1	THOUSE
				**	00	gotted o	1	Diam'r.
Jam					22		6	medito!
Jelly	**		**	**	6	-	1	100
Jelly Tots					1	-	-	-
Krepach					1	-		-
Lambs' Tongues					1	-		-
Lard					6	-	1	-
Lemonade Crystals					1	-	-200	- 10
Lemon and Honey Sweets					1	7 00	-	-1010
Lemon Filling					1	-	-	- Trans
Lemsip					1	T-trible	1 1 1 1 1 1 1	line and
Lentils					1	-	-	-
Liquid Food					1	-	-	
Liver Sausage					2	-	- Can-	-
Low Fat Spread					2	-	-	-
Mangos					3	-	-	-
Margarine					10	-	-	-
Marmalade					3	-	-	-
Marshmallows					1	_	-	THE RES
Marzipan				100	1			1111
Maté Tea					1		i dela	DALLORS
Meat Paste					7		3	serie or
					6	2	3	118fbas
Meat Products		**				4	100 00000	Did nas
Meat Products, Canned					15		4	11
Meat Tenderiser					1			-
Medicine, Proprietary		**	**		4	150000	1	-
Methi				**	2	-	-	-
Milk					50	-	-	-
Milk, Evaporated					-	-	1	12
Milk, Pudding					1	-	-	-
Mincemeat					2	-		102
Mint Balls					1	-		I te loca
						11/1/27/19		

					Formal	Samples	Informal	Samples
Desc	ription	1			Number Taken	Number Non- Genuine	Number Taken	Number Non- Genuine
Mint Jelly	2	F.	1400		-		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	46 2400
	**					-	1	mr zem
Mixed Fruit			**		1	- SHOOL	00202000	2-000
Mustard	**				2	-	0.000	1 - 100
Non-Brewed Condiment	**				2	-		- 1
Nutella					1	-		-
Nutmeg					3	-		-1970
Nutritional Liquid Mea	1				1	-	1000-00	36-336
Nuts in Sugar Syrup					1	-	L.BRIGGO	NO STATES
Obesital Oil					1	-	boursia	AND ALTER
Olive Oil					1	-		-3,000
Onion Salt					1	-	1. 1.00	- Man
Orange Juice					4	-		10.50
Paprika					2	2	Some or	-
Passion Fruit and Oran	ge Drin	k			1	20		estale an
Pastry Mixture					-	200	1	-
Peanut Butter					1	-	1 12	
Peanuts, Salted					2	2"		780,110
Pepper					5	1 2 4	2	10001111
Peppers, Crushed in Br				200	1	2	-	
					3		1	
				**	1	1	1 5	1919
Pigs Tails, Seasoned Pineapple Chunks	**			***	1	1	9	13.04.10
				***	1		-	1.000
Pistachio Nuts		**			1	7-	11-11-11	
Plaice, Fresh				**	1	-	1	
Porridge Oats					1	7.	BIRD-CEA	-
Potato, Dried Mashed					4	- 0300		-
Potato Latkes					1	-	-	
Potatoes and Salt Wate	г				1	-		-
Prunes					2	-1	-	-
Raisins					1	-	-	-
Ravioli in Tomato Sauc	е				1	-	-	-
Ready Meals					1	1 -	-	
Rice					1	20		-
Rosemary Leaves, Dried					1	-		-
Rose Water					1	-	- "	-
Rum					11	21 1 2	-	-
Russian Salad					1	1 2 -	-	-
Rye Bread					1	12	-	-
Saccharin Tablets			1.		1	1 2 3	-	-
Sage and Onion Stuffin			11. 17		2	25		-
Sage, Dried			100	100	1	1 - 00		
Salad Cream			100		3			
Salmon, Potted with Bu	tter		1	**	1	1 1		
			1.		9			- Silve
						130	1	
Sausage Meat				.,	1			-
Sausage Rolls					6	31	The sale	-
Sausages					101	-		-
Saveloys					3		-	-

				Formal	Samples	Informa	Sample
Descripti	on	mapil		Number Tak en	Number Non- Genuine	Number Tak en	Number Non- Genuine
Scampi				1	-	-	ont_ino
Sesame Seeds				1	2	-	1/2
Shandy				3	-	-	_
Sherbert Lemons				1			-
Snowball, Bottled				1	. 07700	111 0000	507-105
Soor				1			
				8	31111111	0	
Soup Preparation				0	1	2 2	
Soya Bean Oil				,	3000	4	
Spanish Salad				1			
							-
Spices Spread (Rum flavoured butter				15		4	
Observation and the second				1	-	1	-
Strudel Leaves				1	-	-	-
Suet, Shredded				1	-	-	-
Sugar Cane Juice			**	1	-	10-10	-
Sugar Confectionery				8	-	-	-
Sultanas				2	-	-	-
Sunbix	**			1	-	-	-
Sweet Basil				1	-	-	-
Sweets				1	-	-	-
Tapioca				1	-hios	District Dis	an Luchi
Teabreak				1	2000	-	-
Tea				10		-	-
Tea Extract				1	_	-	-
Toffee Apples				1	-	-	-
Toffee, Brazil Nut				1		1 3000	-
Toffee, Rum and Butter Flavo	ur			1	-	-	-
Tomato Juice, Cocktail				1	-	-	-
Tomato Paste				3	-	UN 203 - 210	uniform or
Tomato Puree				3	-	1	-
Treacle				1	-	-	-
Turkish Delight				1	-	-	-
Vanilla Flavour				1	-	-	m+1 21
Vanilla Sugar				1	-	-	-
Vegetable Drink				1	-	-	-
Vegetable Oil				1		-	-
Vegetables, Canned				1	-	4	-
Vienna Sausage				3	-	-	-
Vita Drink				1	-	-	-
Vinegar				4	-	1	10-
Vodka				10	-	-	-
Walnut Halves				1	-	-	-
Whisky				11	-	-	-
Yellow Yam				1	-	-	-
TOTALS:		Teste 1	o cosi	818	20	63	2

A detailed analysis of the non-genuine samples and the action taken is set out below:-

Sample	Analysts's Report	Action Taken
Formal		
Minced Beef	Contained Sulphur Dioxide contrary to the Pre- servatives in Food Regulations, 1962	Warning letter to manu- facturer
Butter Osborne Biscuits	Contained fat other than butter	No action as standards are being discussed by Food Standards Committee and Biscuits Manufacturers Association
Acetic Acid	The sample was one of concentrated acetic acid and contained 4.4% in excess of the declared amount.	Warning letter to manufacturer who agreed to exercise more control in production
Bread and Butter	The fat spread on the sample was margarine containing not more than 10% butter	Warning letter to vendor that further samples will be taken and legal proceedings instituted if an adverse report is received.
Concentrated Acetic Acid	The sample was one of concentrated acetic acid and contained 2.6% in excess of the declared amount	Warning letter to manufacturer who agreed to exercise more control in production.
Chicken Breast in Jelly	Deficient in meat to the extent of 17.7%	Legal proceedings instituted.
Blackcurrant Drink	Sample contained Cycla- mates, contrary to Artificial Sweeteners in Food Regulations, 1969	Remainder of stock voluntarily surrendered by retailer.
Meat Pies	Meat content 1.1/5 oz or 18% of pies instead of at least 25% of pies	Warning letter to manu- facturer
Meat Pies	Meat content 2/3 oz. or 19% of the pies instead of at least 25% of pies	Warning letter to manufacturer
Dairy Ice Cream	Milk fat content - none; fat other than milk fat 6%. Dairy Ice Cream should contain not less than 5% milk fat and no fat other than milk fat	Sample not Dairy Ice Cream - was mixture used as base for lollies - mistake on part of assistant - no further action.
Curridan Powder	Proportion of sand and siliceous matter too high and renders the product of poor quality	No further action as after further investi- gation Analyst considered matter trivial

Sample Analyst's Report Action Taken Black Jira Proportion of sand and No further action as siliceous matter too high after further investiand renders the product gation Analyst considered of poor quality matter trivial Pure Lemon Juice Sample of poor quality Letter to Importer advising amendment of label Sample of poor quality Letter to Importer Cloudy Lemon Juice advising amendment of label Letter to manufacturer Jamaican Drinking List of ingredients in Chocolate the wrong order requesting amendment of label Description not covered This product does not Seasoned Pigs Tails contravene Regulations by Canned Meat Product Regulations, 1967 because it is not listed. No further action Package bore the des-Banana Porridge Warning letter to manucription "Enriched with facturer Milk" and "With all the natural goodness of iron for health and energy". In the absence of full cream milk and the very small amount of iron present in the product, the above claims are not justified Sample consisted of Imported product-letter Pure Vegetable Ghee vegetable oils and fats to importers containing no butter. Ghee is a product made from butter and the description"Vegetable Ghee" is therefore a mutual contradiction in terms. Under the labelling of Food Order, 1953, the

declaration on the can "Contains Vitamins" is required to be qualified with a qualitative and a quantitative statement of the vitamins present

Sample

Analysts's Report

Action Taken

Smoked Gruyer Processed Cheese

The labelon this cheese bore the declaration 45% F.i.T. which stands for Fett ins Trocken or Fat on a dry basis, and is not one of the permitted forms for the labelling of this type of cheese. The water content is in excess of that normally found in Gruyere cheese, but is satisfactory provided the product is correctly labelled

Letter to manufacturer advising amendment of label

Canned Octopus in Olive

The ingredients were not declared in accordance with the Labelling of Food Order, 1953

Letter to wholesaler requesting amendment of label

Informal

Chilli Powder

Contained a small quantity of a red, oil soluble, coal-tar colour, consistent with Sudan Red G, not permitted in food by the Colouring Matter in Food Regulations

Stock returned to wholesaler

"Nufizz" Drink

Deteriorated. The constituents had reacted together due to absorption of moisture and the sample produced practically no effervescence when mixed with water Whole stock withdrawn and destroyed

MILK AND DAIRIES

Treated and prepacked milk comes into the Borough from three sources only, and sampling has again followed a pattern of control considered adequate to safeguard the purchaser or consumer:-

Type of Test	Roundsmen and shops	Schools	Vending Machines	Milk Dispensers	Hospitals	Total
Chemical	36	nintari 1	6	5	3	50
Bacteriological	11	7	1914 - 41 3	-	1	19

All samples for chemical analysis were taken formally. No adverse chemical or bacteriological reports were received.

There are no milk bottling plants in the Borough.

Details of Dealers' licences for pre-packed milk: -

Ultra Heat Treated	 	115
Untreated	 	56
Pasteurised milk	 	267
Sterilised milk	 	270

ICE CREAM

The reports on the 50 samples of ice cream which were submitted to the Public Health Laboratory Service for grading tests were as follows:-

Grade 1 - 20 Grade 2 - 4 Grade 3 - 9 Grade 4 - 17

POULTRY PROCESSING PREMISES

There are no such establishments situate within the Borough.

BACTERIOLOGICAL FOOD CONTROL

The following list of samples and specimens were submitted for bacteriological examination to the Public Health Laboratory Service, County Hall, whose co-operation throughout the year was greatly appreciated.

Ice Cream	 	50
Milks	 	19
Manufactured foods	 	14
Imported foods	 ***	10
		09

WATER SUPPLY

The Metropolitan Water Board is responsible for supplying water to this area and the Director of Water Examination has kindly supplied the following information:—

The supply was satisfactory both as to quality and quantity throughout 1970.

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

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

The Board has no record of the number of structually separate dwellings supplied in your area, but the population supplied direct according to the Registrar General's estimate at 30th June, 1970, was 233,490.

No houses were permanently supplied by standpipe.

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

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

River Thames - derived water

New River - derived water from Stoke Newington Pumping Station

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

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

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

Results of bacteriological examination before treatment (yearly average)

	10 10	I a supplied the second		Colifo	Ser I purpose	Escherichia coli	
Source of Supply	Number of samples	20-24 hours at 37°C.	3 days at 22°C.	Per cent. samples negative in 100 ml.	Count per 100 ml.	Per cent. samples negative in 100 ml.	Count per 100 ml.
Stoke Newington	754	39.1		56.76	6.9	75.46	1.7
River Thames derived	8,259	31.9	178 (8) (9)	37.91	17.3	53.58	4.7

Results of bacteriological examination after treatment (yearly average)

Source of supply	No. of samples	Agar Plate count per ml. after 20-24 hours at 37°C.	count per cent samples negative in 100 ml.	E. Coli count per cent samples negative in 100 ml.
Stoke Newington	258	15. 3	100.0	100.0
River Thames derived	3, 710	8. 0		99.97

Average results of the chemical examination of water (Milligrams per litre)

						River Thames derived
Number of samples				teris her	52	363
Ammoniacal Nitrogen					0.008	0.026
Albuminoid Nitrogen					0.061	0.083
Nitrate Nitrogen					5. 2	4.8
Oxygen abs. from KMnt	04 4	hrs. at :	27°C		0.61	1.02
Hardness (total) CaC					305	274
Hardness (non-carbons				148,10	78	79
Magnesium as Mg					5	5
Sodium as Na					30.9	27.7
Potassium as K					4.9	5.6
Chloride as Cl					45	40
Phosphate as PO4					1.9	2.7
Silicate as SiO2					9	9
Sulphate as SO4					71	70
Natural Fluoride as I					0.20	0.20
Surface-active mater:	ial a	s Manoxol	LOT		0.02	0.03
Turbidity units					0.0	0.1
Colour (Burgess units	s)				8	11
pH Value					7.9	7.9
Electrical Conductiv					620	570

SWIMMING BATHS

Regular routine samples are taken of the water in the four Public Swimming baths in the Borough, and no action was necessary in respect of the 15 taken for chemical and bacteriological examination during the year.

FLUORIDATION

The Council (3/12/69) resolved as follows: -

"That having considered Department of Health and Social Security Circular 8/69 and the request of the Secretary of State to give further consideration to the fluoridation of water, this Council calls upon the Secretary of State to recognise the impossibility of securing unanimity among the Health authorities in the area of the Metropolitan Water Board and requests him to take this matter out of the local government arena and to introduce legislation to implement the recommendations contained in the report entitled 'Fluoridation Studies in the United Kingdom and the Results Achieved after Eleven Years'."

At a meeting on 16th September 1970 on a motion proposed by a member of the Council resolved as follows:-

"In view of consideration now being given at all levels to different aspects of Government and public consultation, and the fact that the public issue of fluoridation has not been decisively resolved by this Council, the Finance and Policy Committee are instructed to consider, in consultation with the principals of the opposing viewpoints and to report to the Council with the financial implications, for a Hackney Referendum of the public on this issue to take place as soon as possible."

Subsequently the Finance and Policy Committee resolved

"that the Town Clerk be requested to submit to us, as soon as possible, a report on the feasibility of conducting an opinion poll through the media of the local press."

However, as allowed under Standing Orders, a sufficient number of members of the Committee asked that directions of Council be taken before action on this resolution was taken. At its meeting on 28th October 1970 the Council discussed the subject once more and resolved that no further action be taken on the matter.

The resolution of 3/12/69 therefore reflects this Council's present views on the subject of fluoridation of public water supplies.

CLEAN AIR

The following sources of air pollution required increased attention.

- 1. The high levels of sulphur dioxide within the Borough and within Inner London generally.
 - 2. Exhaust fumes from petrol and diesel engines.
- 3. Exhaust from certain commercial and factory premises, e.g. dry cleaning establishments.

During the year a number of dry cleaning establishments came into operation almost all of which use perchlorethylene. Constant care is necessary to ensure that fumes are exhausted to a safe outlet as in the majority of premises families are in occupation over the shops.

Sixteen notifications were received during the year of furnace installations and two approvals were given regarding the height of newly constructed chimneys.

Measurement of Atmospheric Pollution

Five stations are situated within the Borough boundaries where daily assessment of pollution is carried out by the Staff.

Serious consideration is being given to the installation of equipment which will automatically change the filter apparatus once a week and thus abolish the need for daily visits to each station. The result will be the release of manpower for other duties.

Shortage of Smokeless Fuel during Winter 1970/1971

Notice was given early in the summer that there would be a serious shortage of solid smokeless fuels during the approaching winter and the Ministry of Housing and Local Government indicated that the Minister would be prepared to consider the suspension of Smoke Control Orders in areas where this was deemed advisable to enable the supply and burning of bituminous coal.

The Council resolved not to apply for Suspension Orders and considered every effort should be made to avoid relaxation of smoke control in areas of high density; other less densely populated areas might well be able to relax control in the knowledge that no serious level of pollution would result.

A comparatively mild winter meant that the situation regarding solid smokeless fuel supplies in the Borough did not reach crisis point, but in a few isolated instances informal permission was given to burn bituminous coal where it was considered that hardship would otherwise result.

PUBLIC HEALTH ACTS

During the year two hundred and six Drainage plans were submitted and each one was examined and necessary amendments made before approval was given.

Four Notices under the Public Health (Recurring Nuisances) Act, 1969 were served during the latter part of the year.

CLEANSING, DISINFECTION AND DISINFESTATION

A total of 162 adults and 89 children under five years were treated for scabies and 25 adults and 47 children under five years of age treated for vermin at the Shoreditch Health Centre. Normally two treatments are required to clear a case of scabies and one for vermin.

Arrangements have also been made with other authorities for the treatment at the bathing centre of residents in their areas.

The Department is also responsible for the disinfestation of verminous rooms and articles and a total of 912 rooms and 1,188 articles were treated.

Certain foreign countries prohibit the importation of second-hand clothing unless a certificate that the articles have been disinfected can be produced. A charge is made to private firms wishing to have second-hand clothing disinfected for this purpose.

OFFENSIVE BUSINESS

Fur skin dressing is the only offensive business in the Borough and at the beginning of the year was in operation at four premises.

In one instance renewal of the consent to establishment had been granted the previous year, on the owner giving a firm undertaking that the premises would be brought up to the standard required by the by-laws within the following four months. This was not done and legal proceedings resulted in a fine of £12 with £5 costs.

Despite the advice and assistance given to the applicant the work was still not carried out, and in June the Health Committee refused an application for renewal of the consent for the succeeding year.

Notice of appeal against the Council's decision was lodged, but was subsequently withdrawn.

COMMON LODGING HOUSES

There are none in the Borough.

MORTUARY

The Council's mortuary adjoins the churchyard of the Parish Church of St. John-at-Hackney and provides refrigerated accommodation for 15 bodies.

There is an arrangement with the London Borough of Tower Hamlets for receiving bodies from the Bethnal Green area, the cost being shared on a population basis.

Details for 1969 are set out below: -

	(andologon	OF ORG		
	Hackney	Bethnal Green	Else- where	Total
Number of bodies received	392	92	76	560
Number to await postmortem examination	386	90	74	550
Number of inquest cases	64	13	15	92

ANIMALS

The Council has various responsibilities under Acts relating to the protection and diseases of animals and arrangements have been made for the Corporation of the City of London, who employ a Veterinary Officer and inspectors to undertake the duties in respect of these Acts on an agency basis, except in the case of the Pet Animals Act, 1951, which this Department administer direct.

The action taken under two of the five main Acts dealing with animals is given below: -

Diseases of Animals Act, 1950

The Corporation of the City of London inspectors make routine visits to butchers and poulterers but no infringements of the regulations were reported.

Pet Animals Act, 1951

No new licences were issued. Licences were renewed in respect of 10 premises. Regular visits were made to the premises licensed and conditions were reported as satisfactory.

No action was called for under the Riding Establishments Act, 1964, Performing Animals (Regulations), Act, 1925, or Animal Boarding Establishments Act, 1963.

RODENTS

For a variety of reasons mice infestation has become a major problem particularly in houses in multiple occupation and blocks of flats. Every effort is being made to comply with the Minister's suggestion that it is essential to carry out block control policy. This has increased the work of the Public Health Inspectors and Rodent Operatives under their control, particularly in view of difficulties involved in being unable to gain access as and when required in order to deal adequately with every letting in the premises. Another serious handicap is the lack of effective safe poisons which may be used in this type of dwelling.

The position regarding rodent control continues to present problems. Following representations by this Council regarding the increasing ineffectiveness of Warfarin against mice, a communication was received from the Ministry of Agriculture, Fisheries and Food stating that every effort was being

made by their Infestation Control Laboratory to find new mouse poisons. The Ministry also pointed out in the same letter the importance of all sewer manholes being baited four times during the year in order to reduce rat infestations, and the Council approved additional expenditure to enable the recommended four treatments per year to be carried out in 1970/1971.

Rats gaining access to premises which have been vacated and are unoccupied allowing the water seals of drains, water closets and other sanitary appliances to evaporate and thus destroying the barrier between the premises and the sewer have given cause for concern, so much so that it was decided to make representation to the London Boroughs Association in order that consideration could be given to implementing legislation in the next Greater London Council (General Powers) Bill for enforcing suitable measures to be taken to temporarily seal off drains in premises empty for a period of three months or more.

With regard to mouse infestations in business premises, every effort has been made to co-operate with servicing companies. It is however, a matter of concern that there is no obligation on the part of servicing companies to notify the local authorities when they are so engaged and whilst some of the more reliable companies do inform the Department and enlist co-operation, it is regrettable others do not.

Perhaps consideration could be given at some future date to the wisdom of formulating such legislation.

It is of interest to note that whereas ready mixed baits were proving to be of only moderate success against mice in business premises, much more success has resulted by using as a bait the particular foods the mice seem to attack in the premises, for instance, chocolate and custard powder. There can be no doubt the policy of paying more attention to the selection of base baits will pay dividends.

Infested premises cleared of vermin

di 1n 7-1 enoti	Business Premises	Dwelling Houses	Total
Rats	49	610	659
Mice	504	3, 330	3,834
Total	553	3, 940	4, 493

A total of 4,946 complaints were received and 4,815 inspections carried out.

RAG FLOCK & OTHER FILLING MATERIALS ACT, 1951

This Act requires the Registration of Premises upon which specified materials are used in the process of upholstering furniture, the stuffing or lining of bedding, or toys. There are 25 premises registered in the Borough. There are five premises where these specified materials are actually manufactured, stored or offered for sale and these are licensed annually.

The normal sampling programme was interrupted because the Department had been informed by the Testing Station that the work was not being undertaken until negotiations regarding revised fees had been settled with the Ministry.

MASSAGE AND SPECIAL TREATMENT

Under the provisions of the London County Council (General Powers) Act, 1920, as continued in force by the London Government Act, 1963, 14 establishments were licensed to carry out massage and special treatments.

The London Boroughs Association are considering introducing a uniform code of practice for massage establishments. This Council has suggested that hygienic standards of the buildings should be included.

PHARMACY AND POISONS ACT, 1933

The names of 102 persons and the addresses of their business premises were entered in the Authority's register for the sale of Part II poisons at the end of the year.

FERTILISER AND FEEDING STUFFS ACTS. 1926

No samples were taken during the year.

REGISTRATION OF HAIRDRESSERS AND BARBERS

At the end of the year 177 hairdressers had been registered with the Council under the Greater London Council (General Powers) Act, 1967.

FACTORIES ACT, 1961

Details of inspections carried out in accordance with Sections 1-7 of the Factories Act, 1961, are set out in the table below:-

	ander the	Number of			
Premises	Number on Register	Inspections	Written Notices	Occupiers Prosecuted	
(i) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local	AM DRILL	PRINTE A	NG FLOCI	33 6. m1 dit	
Authorities (ii) Factories not included in (i) in which Section 7 is enforced	80	4		to the President of the Color o	
by Local Authority (iii) Other premises in which Section 7 is en- forced by the Local	2, 434	267	52	3	
Authority (excluding Outworkers premises)	50	28	SZAMONI B. SM. S	nt problems	
Total	2, 564	299	52	3	

The state of the s			cases in were for		No. of cases in
and a second second second second second	111	eniol	Refe	rred	which
Particulars	Found	Reme- died	To H.M. Inspec- tor	By H.M. Inspec- tor	prose- cutions were in- stituted
Want of cleanliness (S. 1)	-	-	A LOTOLIS	-	-
Overcrowding (S. 2)	-	-	-	-	-
Unreasonable temperature (S. 3)	-	-	-	-	-
Inadequate ventilation (S. 4)	-	-	-	-	-
Ineffective drainage of floors (S.6) Sanitary Conveniences (S.7) -	RILLE	BW 189	DIE -, SE	rido I	-
(a) Insufficient	moldans	11967	d merchal	est too Lite	130.37
(b) Unsuitable or defective	45	41	-	40	3
(c) Not suitable for sexes Other offences against the Act (not including offences relating to out-	7	5	-	7.7	-
work)	200	10 -	-	-	-
Total	52	46	-	40	3

The three prosecutions resulted in the defendants being fined a total of £45 with £7 costs.

OUTWORKERS

The occupier of every factory or contractor employed by any such occupier in the business of the factory is required to submit to the local authority during February and August in each year, a list showing all the outworkers employed by him during the previous six months.

The current list showed 54 Hackney firms as having employed 737 outworkers of whom 268 worked in Hackney:-

Nature	of Wo	No. of outworkers in August lis	
Wearing apparel		 	681
			7
		 	35
Brush making		 	8
Carding of buttons		 	6
Total			737

There were no instances of an employer failing to send a list nor of work being done in unwholesome premises.

If an outworker appearing on this list works from premises situated in another area, the local authority concerned is informed by the authority receiving the list from the factory. In this way it is possible to ascertain how many residents in Hackney are doing outwork. Lists received from other local authorities show 304 Hackney outworkers employed by firms outside the Borough. The type of home work carried out by outworkers is listed below:-

Wearing apparel	 obst.	494
Household linen	 	9
Furniture and upholstery	 Include	2
Brass articles	 	1
Iron and steel chains	 	6
Artificial flowers	 	10
Making of boxes	 	35
Brush making	 	7
Carding of buttons	 	2
Stuffed toys	 	1
Unbrellas	 	5
	Total	572

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Statistics relating to registration and general inspections are set out below:-

Class of Premises	Number of premises registered during the year	registered	Number of registered premises receiving a general inspection during the year
Offices	14	872	60
Retail shops	7	1,552	938
Wholesale shops, warehouses.	absorbeb 411 of be	369	43
Catering establishments open	TAX BUTTON CONTRACTOR	THE ADDRESS OF THE PARTY OF	
to the public, canteens	1	278	25
Fuel storage depots	-	5	Journal
Total	26	3,076	1,066

During the year 42 notifications of accidents were received, 39 were of a minor nature but there were three serious accidents, one of them fatal. In no instance was it found that the accident resulted from a breach of the Act. 81 Notices were served upon occupiers of premises who failed to comply with the requirements of the Act but in only two instances was it necessary to institute legal proceedings and fines totalling £12 with £8 costs were imposed. The Public Health Inspectors made a total of 1,857 visits.

Analysis of persons employed in registered premises by workplace

tions 1, 2, 3gt a . de be enforced by . Anthorities TEV.		of Wor	kplace		24	EBOTEN Li	Number of persons employed
Offices	hich.						17, 776
Offices Retail shops	F 400 . 34		m Ant She	ma 20 s	Bousta	4 98.07	10,451
Wholesale departments	, wareho	uses	34	- Bonesian	9 990	Tolibin 1	6,895
Catering establishmen	ts open	to the	public				1,862
Canteens			11				812
Fuel storage depots	nolar.	Liberry	волог у	Lichton	8 (550	1 055	98
Total			Name of				37, 894
Total males	olgan,	10470	allo ,ța	A Hacke	08 VOR	andida	21, 222
Total females							16,672

SUMMARY OF VISITS BY PUBLIC HEALTH INSPECTORS AND TECHNICAL ASSISTANTS

D.11: W. 141 A	1001				Visits	Re-visits
Public Health Acts, 1936 and	1961					
On complaint					5,740	6,727
House to House					132	86
Infectious Disease					175	106
Verminous Conditions					477	249
Housing Acts						
Advances for House Purchase					011	44
Demolition Orders					211	44 18
Closing Orders					259	278
Clearance Areas					653	194
Houses in Multiple Occupati					616	492
Standard Grants					166	198
Special Grants					47	89
Improvement of Dwellings					627	777
Qualification Certificates					340	177
Food and Drugs Act, 1955						
Registered Food Premises					165	132
Other Food Premises					631	523
Stalls					56	14
Markets					54	17
Food Inspection					155	500
Dairies and Milk Distributo	ors' Pr	remises			18	2
Investigations						
					40	EC
Food Complaints					49 53	56 44
Food Poisoning					33	44
Others Visits						
Others visits						
Aged and infirm persons				.,	24	28
Drainage (General)					1, 338	3, 495
Drainage (Rat Infestation)					122 299	216 140
Factories Hairdressers and Barbers					38	7
Heating Appliances					54	77
Noise Investigations					177	140
Offensive Trades					5	2
Pet Shops					22	3
Offices, Shops and Railway					1,066	791
Rag Flock and Other Filling					6	4
Smoke Observations (by Di			Healt	h In-		
spectors)					125	112
Vacant sites					46	206
Amusements with prizes					6 7	2
Adaptations in Smoke Contro Appointments and interviews			::	::	441	137 251
Attendances at Court					101	34
Builders Notices (Supervis:	ion of				146	629
Housing Applications					84	16
Miscellaneous visits					1, 118	1, 145

PUBLIC HEALTH INSPECTORS AND TECHNICAL ASSISTANTS

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