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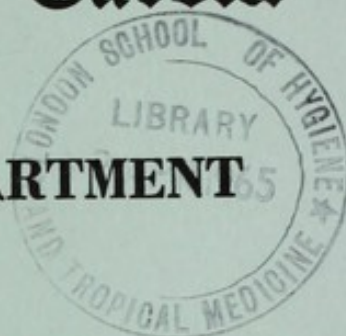


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City and Port of Cardiff

PUBLIC HEALTH DEPARTMENT



ANNUAL REPORT 1963

W. POWELL PHILLIPS, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

*Medical Officer of Health
Principal School Medical Officer
Port Medical Officer*

CITY OF CARDIFF MUNICIPAL OFFICES
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PREFACE

I have the honour to present the Annual Report on the personal and environmental health service in the City of Cardiff during 1963.

Statistical

It is customary at the start of the preface to mention a few of the salient features which are shown in the Registrar-General's vital statistics. The population of Cardiff continues to show a regular annual increase. The estimated number of inhabitants at mid-1963 was 260,640. The birth rate for Cardiff in the year was 20.17 births per thousand population; the comparable figure for England and Wales was 18.2. This excess is a recurring feature in the statistics for the City. There were 130 babies who died during the first year of life. The infant death-rate (24.72) was lower than last year (26.31) but remains higher than the national average (20.17). It is interesting to note that the neo-natal death rate shows a creditable decrease. The infant deaths occurring between the age of one month and a year are mainly attributable to respiratory infection. There were probably quite a proportion of these infants who could have been saved had medical advice been sought at an early stage in illness.

The lesson which must be learned is that health education and advice should stress that respiratory infection must not be taken lightly in infancy. The infant deaths were highest in the districts with a poor standard of housing.

Nationally, there has been in recent years an increase in the number of illegitimate babies. This is reflected in Cardiff. During 1963 there were 406 illegitimate babies born which gave an incidence of 76 in each thousand births, whereas, ten years ago this latter figure was 45. Faced with this increasing problem, with its attendant social consequences the Health Committee has decided to establish during 1964 a small mother and baby home. Its purpose is to provide for the mother of the illegitimate child, time in which to decide on the baby's future.

The death-rate shows no significant change. The number of deaths from various forms of cancer was higher by 35, and no less than 23 of the additional cancer deaths were due to cancer of the lung. During the year there has been considerable effort made to bring home to the young and to the adult the very real dangers of smoking. It is now a standard procedure to visit each school in the City once a year when films are shown to illustrate the health hazards which result from the tobacco habit. Films on their own achieve little, but, the discussions which follow are most useful. The Cancer Information Centre which is a voluntary organisation, largely based in Cardiff, has been most generous in providing films and transport. For adults the British Temperance Society has been most efficient in providing courses of lectures and discussions. There is a balance of lay and medical opinion put forward to demonstrate some of the effects of smoking. Most of these talks have been given at the central offices of the Health Department. Results of such propaganda are most difficult to evaluate but some attempt at assessment is mentioned in a section of this report.

The Infectious Diseases including their Prevention.

Thankfully one can say that the year has been uneventful. There have been no epidemics which have caused concern. Whooping cough has been more prevalent but reports tend to indicate that the illness is of a mild character. Most practitioners consider that immunisation has altered the degree of severity in whooping cough. This is a general statement and one which would be difficult either to prove or disprove on a scientific basis.

There have been no cases of poliomyelitis notified during the year. It does seem that both the inactivated Salk vaccine given by injection and the living attenuated Sabin vaccine given by the mouth have played their part in reducing the incidence of this infection. Fortunately, the Cardiff public are keen to have their infants and older children protected against infectious diseases. This is most helpful to the Health Department.

For the first time, since tuberculosis notifications have been recorded, there have been less than one hundred received in the year. There are still 2,683 patients on the tuberculosis register. In other words, the number of persons under supervision is not noticeably decreasing although the number of new cases ascertained is falling. This is all as it should be. It is becoming apparent that with a continued effort at both prevention and treatment this disease should be well under control in a relatively short period. It is still very necessary to be watchful and, especially, is it required that any signs of a check in the progress of eradication should be dealt with promptly.

The sensitivity tests which are now done each year for school children should give a reliable guide as to the success, or otherwise, of control measures. Some of the publications by Dr. A. H. Griffith, Senior Medical Officer, during 1963, considered techniques and applications of the sensitivity tests.

Dr. S. H. Graham, the Chest Physician, has co-operated in every aspect of tuberculosis control. He is most anxious to prevent the spread of infection from the positive sputum cases. To this end he has endeavoured to ensure that each patient who has a positive sputum is reviewed regularly, hospital treatment given, and every opportunity taken to convert the patient into a closed case with a negative sputum.

The infection which is causing grave concern is gonorrhoea. Without doubt this form of venereal disease is increasing. A disturbing feature is the number of teenagers who are infected. This is a local problem but one which reflects the trend in all large cities.

Maternal, Child Health, Nursing and Social Services.

Emphasis during the year has been on co-ordination as between family doctor, hospital and local health services for the care of the expectant mother. Improvement in infant health in recent years has been remarkable. This enables more time to be spent on the ascertainment at the earliest age of any abnormalities which may yield to treatment. The notification of all abnormalities present at birth of the baby and during subsequent development is now an important part of the midwife's work and an increasing responsibility for the health visitor.

Both the health visitor and the home nurse are spending a very high proportion of their time on care of the elderly. The home-help service devotes 90 per cent. of staff time to their care. Co-operation between hospital, welfare and local health services is most necessary for success in the care of old people. The development of day centres near to their homes often provides that stimulus to self-care and interest in life which can mean so much to the old folk. The Welfare Department are most active in this service in Cardiff. At one of our Health Clinics a special group of elderly patients discharged from hospital come under regular review, but also have their creature comforts attended to in the form of a sound meal and company.

Chiropody arrangements are on the whole working smoothly although there are patients who may wait up to a period of three months before they receive attention. This is a matter of finance because the service is organised on a definite budget.

Mental Health

The close co-operation between the domiciliary care of the mentally ill and the hospital service continues to be most satisfactory.

It is envisaged that early in the New Year a small hostel will be opened in a residential part of Cardiff providing accommodation for some eight ladies discharged from hospital. This will be an interesting development and should provide a practical lead on this difficult subject of hostel accommodation for those who have been mentally ill. Co-operation with Ely Hospital, which deals very largely with residential accommodation for the mentally subnormal, is also excellent. The help given by the hospitals in dealing with those who present acute social problems is much appreciated. The emphasis is on a two-way system and this is shown by the number of patients we are accepting back into the community through after-care arrangements. Many of the mentally ill and sub-normals have been in hospitals for some years.

The important aim in mental health would seem to be to re-establish the patient in the community at the earliest possible moment rather than allow him to become an established hospital patient.

Mention was made last year of some work which Dr. J. Jacobs, the consultant paediatrician, has carried out at our occupation centres. Deanol was given to a group of children who were mentally subnormal. The investigation was very well documented but, unfortunately, the drug did not really benefit those to whom it was administered.

Closely tied up with mental health is the treatment of alcoholism. Whitchurch Hospital is keenly interested in this cause of ill health and social disability. The Health Department and Hospital again find themselves with a common objective for efficient treatment and after-care. Clinic premises and, more important, medical and mental welfare officers of the health department, play their part in treatment and care of the alcoholics. The results of this venture seem to be promising and certainly it has helped to support the treatment which the alcoholic receives in hospital.

School Health Service.

There is nothing of special note to mention in connection with the school health service save that Dr. S. M. Harrison has been carrying out an investigation into the selective examination of children in the 11 plus age group. If this is considered to be a satisfactory procedure it is quite likely that the routine inspection of this age group will be dropped from our programme and the selective method of visiting schools and dealing with more individual problems will become a feature of the school health service in Cardiff.

The Principal School Dental Officer, Mr. H. V. Newcombe, points out that the tuck shops in school which sell to children sweets and other carbo-hydrates are a bad example in the practice of dental hygiene. This matter has been brought to the attention of the Special Services Committee but it is a difficult subject to deal with.

Environmental Health.

The Chief Public Health Inspector has been much concerned during the year with houses in multiple occupation and the difficulties encountered with these types of property. There is no ready solution to this problem.

The policy of dealing with slum clearance areas on a planned basis is proceeding and a group of properties in the Wellington Street district have been represented. The next stage will be the remainder of the Butetown district. Efforts have been made by the Public Health Inspectorate to ensure that the protein content of meat pies is up to the standard that a purchaser would normally expect and it has been found that by sampling and bringing deficiencies to the notice of the manufacturer improvements can be effected.

Dr. Coles, Chief Public Analyst, has joined the staff of the Glamorgan County Council and Mr. A. R. Phillips has been appointed in his place as Public Analyst to the City.

Other Items of Interest

During the year the work of one of our health visitors has been to follow up patients who have been suffering from cardiac illness. Dr. A. J. Thomas in a communication, which he has sent to me, stresses how valuable the health visitor can be in helping the physician to adjust his patient to home life after a period in hospital. Unfortunately, this is the type of work which should be considerably extended but there are not sufficient numbers of health visitors available to make this the common practice. Dr. C. W. Anderson, the Deputy Medical Officer of Health, was during the year President of the School Health Service Section of the Society of Medical Officers of Health and arranged a very enjoyable refresher course in Cardiff for assistant medical officers from all parts of the country. This was particularly well organised and I am sure Dr. Anderson would wish me to thank all those who helped him by giving lectures and demonstrations to the post-graduates who attended. We have also held several post-graduate courses on the prevention of tuberculosis. Dr. A. H. Griffith has organised these in conjunction with Sully Hospital and the Tuberculosis Department of the Welsh National School of Medicine.

The number of publications and special investigations done in the Department during the year is encouraging.

Conclusion

I wish to thank all members of the staff of the health department for the excellent work which they have put in during the year and, on their behalf and my own, our grateful thanks are due to the Health Committee who continually encourage members of their staff to carry out any work or investigations which are likely to benefit public health.

W. POWELL PHILLIPS

Public Health Department,
City of Cardiff Municipal Offices,
Greyfriars Road,
CARDIFF.

December, 1964.

PUBLICATIONS AND PAPERS

OAKS FROM ACORNS

Anderson, C. W., M.B., CH.B., D.P.H., T.D.D.

Presidential Address to School Health Service Group of Society of Medical Officers of Health, Public Health.

PUBLIC CO-OPERATION IN CONTROLLING T.B.

Griffith, A. H., M.B., B.S., D.P.H.

Chest and Heart Association Bulletin Vol. XXVI No. 3 (June).

HEAF TEST STUDIES

Griffith, A. H.

The Medical Officer, Vol. CX, No. 10, p.p. 161-167.

LOW-GRADE SENSITIVITY TO TUBERCULIN IN SCHOOL CHILDREN

Griffith, A. H., Marks, J., Richards, M.

Tubercle, Vol. 44, No. 1, p.p. 135-140.

TEN CASES OF BCG. OVERDOSAGE TREATED WITH ISONIAZID.

Griffith, A. H.

Tubercle, Vol. 44, p.p. 248-250.

CASE FINDING BY SERIAL TUBERCULIN TESTING OF SCHOOL CHILDREN.

Griffith, A. H. Bellamy, M. J., S.R.N., H.V.C., and Davey, M.F., S.R.N., H.V.C., T.A.C.

British Medical Journal, No. 5359, p.p.717-720.

A COMPARISON BETWEEN MULTIPLE PUNCTURE AND INTRADERMAL METHODS OF BCG. VACCINATION.

Griffith, A. H., Kingsley, Barbara J., Anderson, D.J.

Tubercle, Vol. 44, No. 3, p.p. 372-377.

RECENT EXPERIENCES IN BCG. VACCINATION

Griffith, A. H.

Paper given at Conference on "Recent advances in Tuberculin and B.C.G." organised by London County Council.

THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

Bate, W., M.A., D.P.A., F.R.S.H.

The Sanitarian, Nov. 1963.

AN OUTBREAK OF FOOD POISONING CAUSED BY SALMONELLA TYPHIMURIUM, PHAGE-TYPE 12, PROBABLY SPREAD BY INFECTED MEAT.

Harvey, R. W. S., Price, T. H., Bate, W., and Allen, D.R.

J. Hyg., Camb. 61, 419.

AFTER-CARE FOR DIABETICS

O'Shea, Clarice, S.R.N., H.V.CERT.

Nursing Times, 22nd Feb.

HAZARDS OF USING EXPLOSIVES IN CAVES

Williams, R.M., M.B., B.CH., D.P.H., AND Williams, M. A. H., M.SC.

Transactions of the Cave Research Group of Great Britain, Vol. 6, No. 2.

Reports and Investigations

SEX EDUCATION IN GIRLS' SCHOOLS

Richards, M., B.SC., M.B., B.CH., D.OB.R.C.O.G., D.C.H.

A SURVEY INTO THE USE AND/OR ABUSE OF THE CARDIFF AMBULANCE SERVICE

Crompton, G., M.B., B.CH., D.(OBST.), R.C.O.G., D.P.H., and
Hine, D. J., M.B., B.CH.

"AN EVALUATION OF INFANT WELFARE CLINICS IN THE CITY OF CARDIFF"

Hughes, J. N. P., M.B., CH.B., D.P.H.,
James, E. C., M.B., B.CH., and
Roberts, C. G., M.B., B.S., M.R.C.S., L.R.C.P., D.R.C.O.G.

Visitors to the Department

There was a large number of visitors to the Department throughout the year to observe the work in its various aspects. In addition to visitors from this country, they came from all parts of the world, as the following list indicates:—

Ethiopia, Hong Kong, Pakistan, Turkey, India, U.A.R., Libya, Sudan, Ceylon, Nigeria, Burma, Ghana, Cyprus, Persia, Malta, Eire, Australia, Czechoslovakia, Transvaal, Austria, New Zealand, Mauritius, Norway, Borneo, Canada, Jugoslavia, Saudi Arabia.

PUBLIC HEALTH DEPARTMENT STAFF (as at 31st December, 1963)

MEDICAL OFFICER OF HEALTH (CITY AND PORT) AND PRINCIPAL SCHOOL MEDICAL OFFICER

W. POWELL PHILLIPS, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER

CECIL W. ANDERSON, M.B., CH.B., D.P.H., T.D.D.

SENIOR MEDICAL OFFICERS

A. H. GRIFFITH, M.B., B.S., D.P.H.

F. MARIE RICHARDS, B.SC., M.B., B.CH., D.OBS.R.C.O.G., D.C.H.

ASSISTANT MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS (Whole-time)

GILIAN M. BRYANT, M.B., B.CH., D.C.H., D.OBS.R.C.O.G. BRENDA M. MEAD, M.B., B.CH., D.C.H., D.P.H.

N. FRANK, M.B., D.P.H., D.T.M.

ENID CURRAN, M.B., B.CH., D.C.H.

SYLVIE M. HARRISON, B.SC., M.B., D.P.H.

R. M. WILLIAMS, M.B., B.CH., D.P.H.

Eight Part-time Assistant Medical Officers

VISITING SPECIALIST MEDICAL OFFICERS

PETER A. GRAHAM, F.R.C.S., Ophthalmic Surgeon

HECTOR A. THOMAS, F.R.C.S., Aural Surgeon

Professor A. G. WATKINS, M.D., F.R.C.P., Professor of Child Health

S. H. GRAHAM, M.D., Chest Physician

GAYNOR LACEY, M.B., B.S., D.P.M., Psychiatrist, Child Guidance Clinic

DENTAL

Principal School Dental Officer—H. V. NEWCOMBE, L.D.S., R.C.S.

Dental Officers

D. W. ELLIOT, L.D.S.

J. W. LEWIS, L.D.S.

Six Part-time Dental Officers

D. J. ANDREWS, L.D.S.

J. W. COOMBS, L.D.S., R.C.S.

Ten Dental Clerks

One Dental Auxiliary

NURSING AND MIDWIFERY

Superintendent Health Visitor—Miss N. M. OSMOND, S.R.N., S.C.M., H.V.CERT.

Deputy Superintendent Health Visitor—Miss M. J. PRICE, S.R.N., S.C.M., H.V.CERT.

Fifty-seven Health Visitors

Nine Clinic Nurses (S.R.N.)

Two Senior Physiotherapists

One School Nurse

Non-Medical Supervisor of Midwives and Superintendent of Midwifery Service

Miss M. BUCKLEY, S.R.N., S.C.M., Q.N.

One Midwifery Tutor. Two Assistant Superintendents. Twenty-four and half a Domiciliary Midwives.

Superintendent of Home Nursing Service—Miss G. M. WILLIAMS, S.R.N., S.C.M., H.V. CERT., Q.N.

One Assistant Superintendent.

Forty-three Domiciliary Nurses (including two night nurses)

One Administrative Nurse

SANITARY ADMINISTRATION

Chief Public Health Inspector (Urban)—W. BATE, M.A., D.P.A., F.R.S.H., M.A.P.H.I.

Deputy Chief Public Health Inspector—D. LLOYD-JONES, M.A.P.H.I.

Three Divisional Public Health Inspectors.

Three Senior Specialist Public Health Inspectors.

One Senior Public Health Inspector (Housing)

Four Specialist Public Health Inspectors.

Three Senior Public Health Inspectors.

Nine District Public Health Inspectors.

Four Pupil Public Health Inspectors.

One Lady Visitor for Housing Estates.

One Rodent Control Officer.

Chief Port Health Inspector—T. G. NEWBY, Master Mariner, M.A.P.H.I.

One Port Health Inspector.

One Deratisation Officer.

VETERINARY, MEAT INSPECTION AND ABATTOIR**Veterinary Officer, Chief Meat Inspector and Abattoir Manager**

J. H. M. HUGHES, M.R.C.V.S., D.V.S.M.

Deputy Abattoir Manager—R. M. DAVIES, M.A.P.H.I.

Three Meat Inspectors.

One Administrative Officer and Authorised Meat Inspector, Diseases of Animals Acts.

CITY ANALYST'S LABORATORY**City Analyst—Vacant.****Deputy City Analyst—R. H. MCKINLEY, F.R.I.C.**

One Senior Analyst; Four Assistant Analysts; Two Laboratory Technicians.

ADMINISTRATION, ETC.**Principal Administrative Assistant—P. H. WILLIAMS, F.C.C.S.****Senior Administrative Officer—J. S. GENTLE****Administrative Officers—General Administration—W. H. ORTON, F.C.C.S.**

Finance and Stores—W. PATTERSON

School Health, Clinics and Staff Programmes—A. K. JENKINS

Vaccination, Immunisation, and Public Relations—B. GOODWIN, D.M.A.

Administrative and Clerical Assistants—General, Finance, Domiciliary Health Services—19

Sanitary Administration—6

School Health Service—16

Vaccination and Immunisation—10

Mental Health—2

Others—5.

Senior Mental Welfare Officer—L. CLUTTERBUCK, S.R.N., R.M.N., R.M.P.A., A.I.S.W.

Five Mental Welfare Officers Two Mental Health Visitors.

Ambulance Officer—H. D. EDWARDS

Joint Ambulance Liaison Officer Six Ambulance Supervisors.

Home Help Organiser—Miss GRETA MIDGLEY.

Assistant Home Help Organiser Female Visiting Officer

Occupation and Training Centres

Two Senior Supervisors; Nine Supervisors; Five Assistant Supervisors.

Seven Nursery Assistants.

Medical Auxiliaries

Two Senior Orthoptists (one part-time).

Senior Speech Therapist—Miss B. MORRIS, L.C.S.T.

Three Speech Therapists (one part-time).

GENERAL HEALTH SERVICE

1—SUMMARY OF GENERAL AND VITAL STATISTICS

Area (acres) :—

Including inland water and foreshore	18,066
Including inland water (excluding foreshore)	15,271
Excluding inland water	14,867

Population :—

Census, 1961	256,270
Registrar-General's estimate, mid-1963	260,640
Number of persons per acre	17.53
Estimated number of inhabited houses	71,224
Estimated number of inhabited houses per acre	4.8
Estimated average number of persons per occupied house	3.7
Rateable Value, 1/4/63	£11,317,520
Estimated product of a penny rate 1963/64	£47,500
Live Births .. 5,258 Birth-rate per 1,000	<div> <div>Crude</div> <div>Adjusted by A.C.F.</div> </div> <div> <div>20.17</div> <div>19.97</div> </div>
Deaths .. 3,040 Death-rate per 1,000	<div> <div>Crude</div> <div>Adjusted by A.C.F.</div> </div> <div> <div>11.66</div> <div>13.29</div> </div>
Excess of births over deaths—Males 1,098; Females, 1,120	2,218
Deaths under one year .. 130. Death rate per 1,000 live births	24.72
Deaths under one month .. 92. Death rate per 1,000 live births	17.49

	<i>Number</i>	<i>Death-rate per 1,000 Total Births</i>
Deaths arising from Pregnancy, Childbirth, or Abortion	3	0.56

<i>Deaths from various causes :—</i>	<i>Number</i>	<i>Death-rate per 1,000 population</i>
Meningococcal infections	—	—
Typhoid fever	—	—
Measles	—	—
Scarlet fever	—	—
Whooping cough	1	0.004
Diphtheria	—	—
Tuberculosis of respiratory system	18	0.07
Other forms of tuberculosis	2	0.008
Cancer, all forms, including leukaemia	596	2.29
Influenza	14	0.05
Acute poliomyelitis	—	—
Enteritis and diarrhoea (under 2 years)	—	—

II—AREA AND POPULATION

The area of Cardiff (land and inland water but excluding foreshore) is 15,271 acres. According to the Census of 1961, the population of Cardiff was 256,270 (males 123,384 females 132,886).

The population at mid-1963, as estimated by the Registrar-General, was 260,640 and it is on this figure that the vital statistics for 1963 are computed.

II—BIRTHS

The numbers of Births and Still-births registered and allocated to Cardiff during 1963 sub-divided according to sex and legitimacy, are shown in Table I.

Live-births and crude rates per 1,000 population are compared with the England and Wales figures for past years in Table II.

Still-birth statistics and illegitimate birth figures are shown in Tables III and IV respectively.

Table I Live Births

	Legitimate	Illegitimate	Total
Males	2,465	217	2,682
Females	2,398	178	2,576
TOTAL	4,863	395	5,258

Still Births

	Legitimate	Illegitimate	Total
Males	34	3	37
Females	40	8	48
TOTAL	74	11	85

Table II Live Births

Year	Population	Legitimate Births	Illegitimate Births	Total	Birth Rate	England & Wales Birth Rate
1953 ..	246,600	4,216	205	4,421	17.93	15.4
1954 ..	248,000	4,280	212	4,492	18.11	15.2
1955 ..	248,400	3,985	202	4,187	16.85	15.0
1956 ..	249,800	4,251	216	4,467	17.88	15.7
1957 ..	251,300	4,361	234	4,595	18.28	16.6
1958 ..	253,300	4,347	230	4,577	18.07	16.4
1959 ..	254,200	4,321	219	4,540	17.86	16.5
1960 ..	255,470	4,592	242	4,834	18.92	17.1
1961 ..	256,900	4,652	316	4,968	19.34	17.4
1962 ..	260,160	4,613	366	4,979	19.14	18.0
1963 ..	260,640	4,863	395	5,258	20.17	18.2

Table III

Still Births

Year	Legitimate	Illegitimate	Total	Rate per 1,000 total births	
				Cardiff	England & Wales
1953	99	—	99	22	22
1954	110	7	117	25	23
1955	122	8	130	30	23
1956	113	5	118	25·7	23
1957	93	7	100	21·3	22·6
1958	92	6	98	20·9	21·6
1959	97	13	110	23·6	20·7
1960	99	7	106	21·46	19·7
1961	91	9	100	19·73	18·7
1962	89	8	97	19·11	18·1
1963	74	11	85	15·91	17·3

Table IV

Illegitimate Births

Year	Live	Still	Total	Rate per 1,000 total births	
				Cardiff	
1953	205	—	205	45	
1954	212	7	219	48	
1955	202	8	210	48	
1956	216	5	221	48	
1957	234	7	241	51	
1958	230	6	236	50	
1959	219	13	232	49·8	
1960	242	7	249	50·4	
1961	316	9	325	64·1	
1962	366	8	374	73·7	
1963	395	11	406	75·99	

IV—DEATHS

Deaths from all Causes.—The total number of deaths from all causes and at all ages registered during the year and allocated to Cardiff was 3,040 (males 1,584 and 1,456 females). The total number of deaths registered in Cardiff was 3,079 but 552 of these were deaths of non-residents which occurred mainly in hospitals and nursing homes, and 513 deaths of residents of Cardiff occurred and were registered in other areas. Allowance has been made for these outward and inward transferable deaths in arriving at the net number.

The following is a comparison of the death-rate for 1963 and the preceding ten years with the death-rates for England and Wales for the same period.

Year	Deaths	Crude Death Rate	England & Wales	
			Death Rate	
1953	2,774	11·25	11·4	
1954	2,872	11·58	11·3	
1955	2,830	11·39	11·7	
1956	2,809	11·24	11·7	
1957	2,798	11·13	11·5	
1958	2,777	10·96	11·7	
1959	2,727	10·73	11·6	
1960	2,810	10·99	11·5	
1961	2,946	11·47	12·0	
1962	2,991	11·50	11·9	
1963	3,040	11·66	12·2	

Cancer.—The number of deaths from malignant neoplasms including 16 deaths from leukaemia and aleukaemia was 596 (335 males and 261 females). The deaths are classified according to age and localisation of the disease in the Table on page 6. The total cancer deaths excluding leukaemia and aleukaemia for the previous ten years are shown below.

Year	No. of Deaths			Death Rates		
	Males	Females	Total	Males	Females	Total
1953	278	305	483	2.37	1.58	1.97
1954	261	244	505	2.20	1.89	2.04
1955	270	228	498	2.27	1.76	2.00
1956	277	233	510	2.31	1.79	2.04
1957	279	193	472	2.32	1.47	1.88
1958	243	242	485	2.02	1.83	1.91
1959	277	220	497	2.21	1.71	1.95
1960	269	220	489	2.24	1.62	1.91
1961	266	255	521	2.15	1.91	2.02
1962	296	253	549	2.36	1.88	2.11
1963	328	252	580	2.61	1.86	2.23

Deaths from Motor Vehicle Accidents.—The number of deaths due to road traffic accidents in the year was 30 (20 males and 10 females) as compared with 33 deaths during 1962 and with an average of 30 for the preceding ten years (1953-62).

Other Accidents.—Other accidents due to violence totalled 57 (32 males and 25 females) and of that number 26 were under 65 years of age. 16 of them being under 45 years.

Maternal Mortality.—There were three maternal deaths during the year, the causes of death being

- (1) Massive pulmonary embolism due to pelvic vein thrombosis due to pregnancy.
(Died at home)
- (2) Renal failure due to bilateral renal cortical necrosis due to spontaneous placental haemorrhage during toxæmia of pregnancy.
(Died in hospital)
- (3) Haemorrhage due to spontaneous rupture of tubal pregnancy.
(Died at home)

Infant Mortality.—The number of deaths under 1 year was 130, and of those 118 were legitimate and 12 illegitimate. There were 83 deaths of infants under 1 week and when the 85 stillbirths are added, the peri-natal mortality rate is 31.44. The neo-natal deaths numbering 92 being 71% of the total deaths.

The table below compares the infant mortality rate with the preceding 10 years and with the rates for England and Wales.

Year	Infant Deaths			Neo-natal Deaths			Still Births		
	No.	Rate per 1,000 Live Births		No.	Rate per 1,000 Live Births		No.	Rate per 1,000 Total Births	
		Cardiff	E.&W.		Cardiff	E.&W.		Cardiff	E.&W.
1953	119	27.0	26.8	70	15.8	17.7	99	22	22.4
1954	153	34.0	25.4	98	21.9	17.7	117	25	23.5
1955	139	33.21	24.9	81	19.1	17.3	130	30	23.1
1956	124	27.76	23.8	85	19.03	16.9	118	25.7	22.9
1957	104	22.85	22.9	78	16.97	16.5	100	21.3	22.4
1958	116	25.34	22.5	84	18.35	16.2	98	20.96	21.6
1959	111	24.45	22.0	80	17.62	15.8	110	23.65	20.7
1960	119	24.62	21.7	89	18.41	15.6	106	21.46	19.7
1961	120	24.15	21.4	77	15.49	15.5	100	19.73	18.7
1962	131	26.31	20.7	99	19.88	15.1	97	19.11	18.1
1963	130	24.72	20.9	92	17.49	14.2	85	15.91	17.3

The causes of death of infants under one year of age in age periods during 1963 (completed from figures supplied by the Registrar-General) are shown in the following table.

Causes of Death	Under 1 day	1-6 days	1 wk.	2 wks	3 wks	Total under 4 wks	1-2 mths.	3-5 mths.	6-8 mths.	9-11 mths.	Total All Ages
Whooping Cough ..	—	—	—	—	—	—	1	—	—	—	1
Pneumonia ..	—	—	—	—	—	—	10	11	2	—	23
Bronchitis ..	—	—	—	—	—	—	2	2	1	—	5
Monstrosity ..	1	—	—	—	—	1	—	—	—	—	1
Spina Bifida and Meningocele ..	1	1	—	—	—	2	1	—	—	1	4
Congenital Hydrocephalus ..	1	—	—	—	—	1	1	—	—	—	2
Congenital Malform- ations of Heart ..	2	5	—	—	1	8	2	1	—	—	11
Other Congenital Malformations ..	2	1	—	—	—	3	1	—	—	—	4
Injury at Birth ..	6	8	1	1	—	16	—	—	—	—	16
Postnatal Asphyxia And Atelectasis ..	18	13	1	—	—	32	—	—	—	—	32
Pneumonia of Newborn ..	—	5	3	2	—	10	—	—	—	—	10
Pemphigus and Sepsis of Newborn ..	—	—	—	—	—	—	1	—	—	—	1
Immaturity ..	9	2	—	—	—	11	—	—	—	—	11
All other causes ..	6	2	—	—	—	8	1	—	—	—	9
Total—all causes	46	37	5	3	1	92	20	14	3	1	130
Percentages ..	35.4	28.4	3.8	2.3	0.8	70.7	15.4	10.8	2.3	0.8	100

The following table, compiled from figures supplied by the Registrar-General, shows the causes of death at various ages during 1963.

CAUSES OF DEATH	ALL AGES										75 yrs & up-wards		
	M.	F.	Total	Under 1 yr.	1-4 yrs.	5-14 yrs.	15-24 yrs.	25-34 yrs.	35-44 yrs.	45-54 yrs.		55-64 yrs.	65-74 yrs.
1. Tuberculosis of Respiratory System	13	5	18	—	—	1	—	—	1	5	2	6	3
2. Other forms of Tuberculosis	2	—	2	—	—	—	1	—	—	—	—	1	—
3. Syphilitic Disease	2	4	6	—	—	—	—	—	—	—	—	4	2
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	1	1	1	—	—	—	—	—	—	—	—	—
6. Meningococcal Infection	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Other Infective and Parasitic Diseases	—	1	1	—	—	—	—	1	—	—	—	—	—
10. Malignant Neoplasm, Stomach	56	46	102	—	—	—	—	—	5	12	17	34	34
11. Malignant Neoplasm, Lung, Bronchus	142	13	155	—	—	—	—	—	2	18	49	60	26
12. Malignant Neoplasm, Breast	2	43	45	—	—	—	—	—	4	11	12	12	6
13. Malignant Neoplasm, Uterus	—	26	26	—	—	—	—	1	2	5	5	8	5
14. Other Malignant and Lymphatic Neoplasm	128	124	252	—	1	2	4	3	8	38	60	64	72
15. Leukaemia, Aleukaemia	7	9	16	—	—	2	—	1	—	—	2	5	6
16. Diabetes	4	6	10	—	—	—	—	—	—	2	1	5	2
17. Vascular Lesions of the Nervous System	129	226	355	—	—	—	—	—	4	17	47	96	191
18. Coronary Disease, Angina	405	293	698	—	—	—	1	—	14	51	127	238	267
19. Hypertension with Heart Disease	37	38	75	—	—	—	—	1	1	7	14	21	31
20. Other Heart Diseases	81	159	240	—	—	—	1	3	6	14	22	36	158
21. Other Circulatory Diseases	59	63	122	—	—	—	1	—	3	8	9	30	71
22. Influenza	8	6	14	—	1	—	1	—	—	—	2	3	7
23. Pneumonia	100	123	223	33	3	6	—	—	4	8	19	36	114
24. Bronchitis	142	51	193	5	—	—	—	1	1	6	38	62	80
25. Other Respiratory Diseases	20	4	24	—	—	—	—	1	1	1	7	10	4
26. Ulceration of the Stomach or Duodenum	17	6	23	—	—	—	—	—	—	1	1	7	13
27. Gastritis, Enteritis, Diarrhoea	6	5	11	—	—	—	—	—	—	1	1	3	6
28. Nephritis and Nephrosis	13	4	17	—	1	1	—	1	2	—	4	5	3
29. Hyperlasia of the Prostate	11	—	11	—	—	—	—	—	—	—	—	3	8
30. Pregnancy, Childbirth	—	3	3	—	—	—	2	1	—	—	—	—	—
31. Congenital Malformations	15	19	34	22	3	1	—	—	—	4	3	1	—
32. Other Defined and Ill-Defined Diseases	112	129	241	69	3	8	—	4	13	12	21	42	69
33. Motor Vehicle Accidents	20	10	30	—	2	2	7	2	2	5	2	4	4
34. All Other Accidents	32	25	57	—	2	2	4	5	3	2	8	6	25
35. Suicide	19	14	33	—	—	—	2	1	9	6	6	8	1
36. Homicide and Operations of War	2	—	2	—	—	—	1	—	1	—	—	—	—
ALL CAUSES	1,584	1,456	3,040	130	16	25	25	26	86	235	479	810	1,208
Percentage of Total Deaths				4.3	0.5	0.8	0.8	0.9	2.8	7.8	15.8	26.6	39.7

V—NOTIFIABLE DISEASES

Foreword

The incidence of notifiable diseases compared with that of the previous ten years is shown in the following table :—

Disease	1963	1962	1961	1960	1959	1958	1957	1956	1955	1954	1953
Scarlet Fever ..	60	69	121	93	228	351	173	290	176	203	336
Whooping Cough ..	218	21	107	414	101	105	587	570	112	467	1,070
Diphtheria ..	—	—	—	—	—	—	—	1	—	—	—
Measles ..	3,594	1,028	6,238	137	3,609	980	4,816	122	6,869	33	1,837
Acute Pneumonia ..	137	114	266	161	245	329	348	242	265	191	282
Meningococcal Infection ..	4	2	1	3	2	6	7	7	14	15	10
Paralytic Acute Poliomyelitis ..	—	—	8	1	—	4	12	4	14	12	7
Non-Paralytic Acute Poliomyelitis ..	—	2	8	2	2	2	1	13	24	5	23
Acute Encephalitis (Infective) ..	—	—	—	—	—	—	—	3	1	—	—
Acute Encephalitis (post infectious) ..	1	—	—	—	—	—	—	2	2	3	1
Dysentery ..	97	207	77	139	1,084	639	23	115	296	228	22
Ophthalmia Neonatorum ..	2	3	2	19	14	50	4	7	16	14	8
Puerperal Pyrexia ..	13	35	82	31	17	57	51	174	111	155	137
Para-Typhoid Fever ..	6	—	2	1	4	—	—	1	8	89	2
Typhoid Fever ..	2	2	—	1	—	—	—	—	1	1	—
Food Poisoning ..	52	46	56	163	56	38	13	27	47	21	29
Erysipelas ..	16	16	15	22	38	49	31	48	37	35	51
Malaria ..	—	—	1	1	4	—	1	1	3	2	4
Acute Rheumatism ..	3	4	13	16	15	—	—	—	—	—	—
Anthrax ..	—	—	—	—	—	—	—	—	—	—	—
Smallpox ..	—	1	—	—	—	—	—	—	—	—	—

(Note—Statistics relating to Tuberculosis are reported upon later in this section.)

Comments on the Prevalence and Control of Infectious Diseases

Scarlet Fever.—Sixty Cases (35 males 25 females) were notified. Most of the cases were very mild with no complications. There were no deaths.

Whooping cough.—After the encouraging reduction in notifications in 1961 and 1962 it is disappointing to report an increase to 218 notifications this year. An enquiry is in process regarding the immunisation state of notified cases and a further note on this subject appears in the section of this report on vaccination and immunisation.

Diphtheria.—There were no cases during the year. The last case occurred in 1956.

Acute Pneumonia.—137 cases were notified. Deaths cannot be correlated with the notifications because the Registrar General's heading "Pneumonia" covers deaths from all types of pneumonia.

Meningococcal Infection.—There were four cases. (3 males, one female). All were treated at the Lansdowne Hospital.

Acute Poliomyelitis.—For the first time for many years there were no cases of acute paralytic or non paralytic poliomyelitis.

Measles.—This was an epidemic year for measles and 3,594 cases were notified. The quarterly totals were:—

Quarter ending 30th March	..	1358
29th June	..	1267
28th September		639
31st December		330
		<hr/>
		3594
		<hr/>

It will be noted that the number of cases notified in the last two quarters still remained at an unusually high level and at the time of writing this report in 1964 this trend has continued into what would normally not be an epidemic year.

Investigation of the complications of Measles.

At the invitation of the Public Health Laboratory Service in collaboration with the Society of Medical Officers of Health, the department agreed to participate in this investigation into the serious complications of measles, particularly encephalitis and other neurological disorders. The information is required in order to assess the need for measles vaccination. This investigation took the form of postal follow-up with notifying medical practitioners of cases of measles notified during the first four months of 1963 when a high incidence of the disease was expected throughout the country.

The success of the scheme depended on the co-operation of all medical practitioners in the area and in January a circular letter was sent to them explaining the scheme and inviting their co-operation in completing and returning the record cards (a specimen of which is given below) which would be sent to them in relation to each case notified.

MEASLES INQUIRY (1963)

Patient's name.....Age.....Sex.....

Date rash appeared.....

Did any of the complications listed below occur? YES / NO

Encephalitis. Impaired consciousness. Behaviour changes.

Motor disturbances (fits, involuntary movements, paresis).

Pneumonia (or severe bronchitis). Otitis media. Deafness.

Other (Specify)

Please underline any which occurred and give brief details.

Date complications first noticed

Is recovery complete? YES / NO

Was the patient admitted to hospital? YES / NO If "yes", date.....

Name of hospital.....

Excellent support was received in response to this letter. During the period 1st January—30th April, 1963 a total of 1919 cases of measles were notified and a record card was sent out for each case. The number of cards returned was 1868 representing 97.3% of the cases notified.

The investigation is still in progress but it is hoped that full details will be given in the annual report for 1964.

Acute Encephalitis (Infective and Post Infectious).—There was one notification in the first quarter of the year of a male child aged 5 years suffering from Post Measles—Encephalitis.

Dysentery.—There were no major outbreaks during the year and only 97 cases were notified. In only a small proportion of these cases was the clinical diagnosis confirmed by the taking of faecal specimens for laboratory examination.

Ophthalmia Neonatorum.—Only two cases (one male and one female) were notified.

Puerperal Pyrexia.—Thirteen cases were notified.

Paratyphoid Fever.—Six cases were notified during the year. Of these cases, one normally resided in the area of the Cardiff Rural District Council. Another case who was normally resident (lodging) in Cardiff was notified to the Registrar General by Penarth U.D.C. as the disease was diagnosed in their area at Llandough Hospital. This patient was employed as a pastry cook at Penarth.

In all the cases with the exception of the last the organism isolated was *S. paratyphi B* phage type Taunton. As a result of investigations it was established that a Cardiff bake-house had, during this period received a consignment of Chinese bulked egg. This bake-house was found to be associated with a number of the Cardiff cases and in addition had supplied egg to the Penarth premises at which the pastrycook patient was employed.

Tests from all employees at both bakery premises proved negative as did drain and wipe swabs. Home contacts of all the cases were also negative. The pastrycook was discharged from hospital on 1st July symptomless but still excreting the organism in spite of various courses of drugs. He was, therefore, unable to resume employment as a food handler and obtained another post. A series of eight negative swabs was obtained—the last on 17th August.

The sixth case of paratyphoid (a male aged 14 years) occurred in July. In this case the phage type was 3a var 2. Routine investigations were carried out but the source of the infection was not ascertained. All family contacts were negative.

Typhoid Fever.—Although only two cases were notified to the Registrar General during the year there were actually three Cardiff residents found to be suffering from the disease. The third case was, however, diagnosed at Llandough Hospital and as this is within the area of Penarth U.D.C. it was counted as occurring within that district and notified accordingly.

Zermatt Outbreak.—The two cases notified were associated with the outbreak which originated in Zermatt in Switzerland during the early months of the year. A communication was received dated 13th March, 1963 from the Chief Medical Officer of the Ministry of Health to the effect that three cases of typhoid fever had been reported among persons who had recently returned from Switzerland. Each of the persons had stayed in Zermatt. At the same time, a letter from the Medical Officer of Health from Hammersmith Metropolitan Borough Council gave details of two Cardiff residents (a man and wife) who had stayed at the same hotel in Zermatt at the same time as one of the identified cases in his area.

A visit to this man and his wife established that they had both been unwell during the latter part of their holiday and since their return, with symptoms which could be those of typhoid fever. Faecal specimens were immediately obtained, their General Practitioners notified and the household placed in isolation at home. *Salmonella typhi* (Phage type El) was subsequently isolated from the stools. Further information was also coming in regarding the extent of the Zermatt outbreak and therefore all general practitioners in the area were circularised to make them aware of the existence of two cases in Cardiff and asking them to make special enquiries from any of their patients who might present themselves with suggestive symptoms following a visit to Zermatt during February or March.

As a result of this circular and other research, we traced another 15 persons (in six family groups) who had stayed in Zermatt. Two of these resided outside the area and were notified to the appropriate Medical Officer of Health. In addition, one man who had been employed as a hotel chef in this area came forward. Many of these persons had had vague illnesses and other suspicious symptoms. As a result of laboratory investigations of faecal and other specimens, it was possible rapidly to establish that none of these persons or other members of their households were suffering from Typhoid Fever.

The two cases (a male aged 41 and female aged 33) were isolated at home together with members of their household under the care of their medical practitioners and advised on the measures to be taken to prevent the spread of infection. Although faecal specimens were taken at frequent intervals from their children they were at no time found to be positive but in view of the prolonged infectivity of their parents they were immunized by T.A.B. injections.

Their mother was admitted to the Lansdowne Hospital on 1-4-1963. She had continued to be pyrexial with some rigours and her stools were still positive in spite of a course of Chloramycetin and she was now suffering from anaemia. This improved with treatment but her stools remained positive although she had courses of Penbritin and Paramomycin. It was agreed that she could return home on 16-4-1963 and she was kept under surveillance by this department. Although she was symptomless her swabs continued positive for months until a series of six consecutive faecal specimens were obtained, the last of which was obtained on 24-9-1963.

Her husband was treated at home with Terramycin and Penbritin but his stools remained positive. From 16-5-63 he began to have abdominal pain, nausea but no vomiting, loose stools and some fever which persisted in spite of another course of Penbritin. He was admitted to Lansdowne Hospital on 30-5-1963. His temperature subsided and he was symptomless until 18-6-1963, when the abdominal pain returned together with a high temperature. These symptoms subsided after 3 days. Cholecystectomy was advised. He was discharged home on 28-6-1963 and readmitted on 25-7-1963 and the gall bladder was removed on 27-7-1963. The first faecal swab after the operation was positive but after 7 negative swabs he was discharged on 5-9-1963.

Case notified by Penarth U.D.C.—The patient, a girl aged 13 years normally resident in Cardiff, was admitted to Llandough Hospital on 16th July, 1963, with a two week history of anorexia, high fever for 3 days and abdominal pain. *Salmonella typhi* Vi-phage type N was isolated from a blood culture and the child was transferred to Lansdowne Hospital. A thorough investigation of the family was made, which included the taking of specimens of faeces, drain swabs and swabs placed in the sewers in the neighbourhood in which the patient lived, all of which proved negative. The mother, who was of Maltese origin, came to this country in 1947, and was at first suspected to be the source but, faecal specimens and two Widal tests were negative.

No case with the same Vi phage type has ever occurred in Cardiff, and it was not possible to establish the source of the infection.

Majorca Outbreak.—A number of cases of typhoid fever occurred in holidaymakers from this country who stayed in Majorca during June and July, 1963. As a result of information from Medical Officers in the areas in which these cases occurred and enquiries made locally of travel agents it was possible to trace persons who were contacts of these cases or who had stayed in the same hotels. Details of those residing in other areas were referred to the respective Medical Officers of Health. Routine enquiries and laboratory investigations of those resident in Cardiff enabled all to be cleared, although one man with symptoms of fever, headache, abdominal pain and diarrhoea was admitted to Lansdowne Hospital but faecal specimens and Widal tests were negative and he made a normal recovery.

Food Poisoning.—There were fifty-two notified cases and in addition four cases were “otherwise ascertained” by the department. There were three outbreaks of *Salmonella typhimurium* phage type 12a and one of *Salmonella cholerae suis* var Kunzendorf. *Salmonella* organisms continued to be the main causative agent where this was identified. The following table gives details in the form prescribed by the Welsh Board of Health.

(1) (a) FOOD POISONING NOTIFICATIONS

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
5	14	22	11	52

(b) CASES OTHERWISE ASCERTAINED

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
—	3	1	—	4

(c) SYMPTOMLESS EXCRETORS

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
—	—	—	—	—

(d) FATAL CASES

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
—	—	—	—	—

(2) PARTICULARS OF OUTBREAKS

CAUSATIVE AGENT	Family Outbreaks			Other Outbreaks			Total Number of Cases
	Number	Number of Cases		Number	Number of Cases		
		notified	otherwise ascertained		notified	otherwise ascertained	
Agent identified							
(a) Chemical poisons ..	—	—	—	—	—	—	—
(b) <i>Salmonella typhimurium</i> (phage type 12a) ..	3	3	3				6
Cholera <i>suis</i> var Kunzendorf				1	7	—	7
(c) <i>Staphylococci</i>	—	—	—	—	—	—	—
(d) <i>Cl. botulinum</i>	—	—	—	—	—	—	—
(e) <i>Cl. welchii</i>	—	—	—	—	—	—	—
(f) Other bacteria	—	—	—	—	—	—	—
Causative Agent not identified	5	12	—	—	—	—	12
TOTAL	8	15	3	1	7	—	25

(3) SINGLE CASES

AGENT	No. of Cases		TOTAL
	Notified	Otherwise Ascertained	
Agent identified:			
(a) Chemical Poisons	—	—	—
(b) Salmonella—			
typhimurium—Phage type 2A ..	1	—	1
" " " U125 ..	1	—	1
" " " 12 ..	2	—	2
" " " 12a ..	10	1	11
enteritidis vat jena	1	—	1
oranienberg	1	—	1
(c) Staphylococci	—	—	—
(including toxin)			
(d) Cl. botulinum	—	—	—
(e) Cl. welchii	—	—	—
(f) Other bacteria	—	—	—
Causative Agent not identified	14	—	14
TOTAL	30	1	31

The cases of salmonella typhimurium (phage type 12a) occurred during the summer months. This organism was isolated on numerous occasions from drain swabs placed in local abattoirs and butchers premises and there seems little doubt that this was the source of the infection. Further details of this are given in the section on Bacteriology of Food-stuffs on Page 97.

The "outbreak" of *Salmonella cholerae suis* var *Kunzendorf* occurred in a Cardiff Hospital. Most of the patients were elderly and all had been admitted during April and May for investigation of fever. Blood cultures were done as a routine and the results came as a surprise. The cases seemed to bear no relationship to each other and no conclusion was reached as to the source. There were no fatalities and no further cases occurred.

Erysipelas.—Sixteen cases were notified (6 males and 10 females). It is not known if any deaths occurred from this disease as they are not classified separately in the Registrar General's return.

Malaria.—No cases were notified.

Acute Rheumatism.—This is notifiable in certain areas, specified in the Acute Rheumatism Regulations 1953 to 1959. In the acute Rheumatism (Amendment) Regulations, 1959, the Minister of Health extended the list of areas to include Cardiff as from 16th February, 1959.

The Regulations require that cases of acute rheumatism in persons under sixteen years of age shall be notified to the Medical Officer of Health.

The following table gives details of the cases notified during the year :—

Clinical Classification of Cases Notified	AGE IN YEARS								Total All Ages		Total Both Sexes
	0-4		5-9		10-14		15 over		M	F	
	M	F	M	F	M	F	M	F			
1. Rheumatism Pains and/or Arthritis without heart disease	—	—	—	—	—	—	—	—	—	—	—
2. Rheumatic Heart Disease (Active)											
(a) alone	—	—	—	—	—	—	—	—	—	—	—
(b) with polyarthritis	—	—	—	—	1	1	—	—	1	1	2
(c) with chorea	—	—	—	—	—	—	—	—	—	—	—
(d) with chorea and polyarthritis ..	—	—	—	1	—	—	—	—	—	1	1
3. Rheumatic Heart Disease (Quiescent)	—	—	—	—	—	—	—	—	—	—	—
4. Rheumatic Chorea (Alone)	—	—	—	—	—	—	—	—	—	—	—
TOTAL Rheumatic Cases	—	—	—	1	1	1	—	—	1	2	3
5. Congenital Heart Disease	—	—	—	—	—	—	—	—	—	—	—
6. Other non-rheumatic Heart Disease or disorder	—	—	—	—	—	—	—	—	—	—	—
7. Not rheumatic or cardiac disease ..	—	—	—	—	—	—	—	—	—	—	—
TOTAL Non-rheumatic Cases	—	—	—	—	—	—	—	—	—	—	—

Anthrax.—This disease was made notifiable by The Public Health (Infectious Diseases) Amendment Regulations 1960 which came into effect on 1st December, 1960. No cases have yet been notified.

Smallpox.—No cases occurred during the year. As a result of notifications received from Port Medical Officers in accordance with the Public Health (Aircraft) Regulations 1952/63, a total of 44 persons were placed under surveillance.

CLASSIFICATION BY AGE AND SEX OF INFECTIOUS DISEASES FOR 1963

[illegible]

PREVENTION OF TUBERCULOSIS

A. H. GRIFFITH, M.B., B.S., D.P.H., Senior Medical Officer

Tuberculosis was described as a prevalent killing disease at the time by Hippocrates and has continued to take a substantial toll of human life ever since. During the last twenty or thirty years there has been a considerable reduction in the number of deaths from the disease and during the last seven or eight years there have been indications that the risk of developing the disease has also been reduced. A stage has now been reached in the history of the disease when it is possible to arrest the course of the disease in nearly all tuberculous persons provided that they carry out the treatment advised. It is now reasonable to expect that the disease will cease to be a major public health problem within a few years.

One new record was achieved in Cardiff during 1963, namely, the number of new cases of pulmonary tuberculosis discovered in the city fell to below 100. The majority of new cases in the future are likely to be found among the homeless vagrant males and among immigrants. Unfortunately the occupants of common lodging houses which form a reservoir of infection perpetuating the risk of disease in this country do not find it worth while to accept treatment and it may be necessary to consider new ways of encouraging their co-operation.

Deaths from Tuberculosis

Seventeen Cardiff persons died of pulmonary tuberculosis during 1963, eight fewer than in 1962. Only two of these were under 45 years of age. The Cardiff death rate for pulmonary tuberculosis was similar to the England and Wales rate of 6 per 100,000. Males out-numbered females, as in previous years; 12 men died of pulmonary tuberculosis, but only 5 females.

Further details regarding deaths from pulmonary tuberculosis are given in Table 1.

Table 1

Giving Annual Number of Deaths from Pulmonary Tuberculosis in age groups.

Age Groups	Number of Deaths Annually from Pulmonary Tuberculosis												
	1931	1932	1941	1942	1951	1952	1957	1958	1959	1960	1961	1962	1963
0-14 ..	4	9	6	7	2	—	—	—	—	—	—	—	1 (1)
15-24 ..	72	45	40	26	7	3	—	—	—	—	—	—	—
25-34 ..	59	68	48	45	22	12	1	1	1	1	1	1	—
35-44 ..	42	53	43	30	22	17	3	2	5	1	1	2	1 (1)
45-54 ..	33	39	33	30	23	20	6	5	6	7	7	3	4 (2)
55-64 ..	22	17	19	22	20	14	6	5	6	9	11	6	2 (1)
65 and over ..	5	3	7	9	9	14	4	11	7	10	10	13	9
TOTAL ..	237	234	196	169	105	80	20	24	25	28	30	25	17 (5)

The numbers in brackets refer to the number of female deaths during 1963.

One death was attributed to non-pulmonary tuberculosis during 1963.

New Cases of Tuberculosis

There were 95 new cases of pulmonary tuberculosis discovered during 1963 (Table II). This was a reduction of 41 cases or 30% on the 1962 figures which were themselves the lowest to date (Table III). The reduction in the incidence of new cases was, however, confined to females, with the result that pulmonary tuberculosis has become a relatively uncommon condition in women. This sex incidence difference was, however, confined almost entirely to persons over the age of 45 years. Present trends suggest that in a few years new cases of tuberculosis will be found only among men over the age of 40 or 45. Non-pulmonary tuberculosis, on the other hand, has been more prevalent in females than males during recent years.

Table II

**Giving the number of new cases of Tuberculosis during 1963
by Age and Sex**

Age Groups	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Under 1	—	—	—	—	—	—
1-4	1	1	2	—	—	—
5-9	2	4	6	—	—	—
10-14	—	2	2	—	—	—
15-19	2	2	4	3	1	4
20-24	7	3	10	1	—	1
25-34	6	4	10	1	2	3
35-44	8	5	13	—	1	1
45-54	12	6	18	—	1	1
55-64	19	3	22	—	—	—
65+	7	1	8	—	3	3
TOTAL ..	64	31	95	5	8	13

Table III shows that the incidence of new cases of pulmonary tuberculosis is decreasing and it is now less than half what it was four years ago.

Table III

**Giving number of new cases of tuberculosis notified and number
on register during recent years**

	1921	1931	1941	1951	1957	1958	1959	1960	1961	1962	1963
Number of new notifications of pulmonary tuberculosis ..	245	352	334	354	299	266	211	152	157	136	95
Number of new notifications of non-pulmonary tuberculosis ..	59	132	110	58	34	21	26	24	21	13	13
Number of pulmonary tuberculosis cases on register at end of the year	848	1,007	1,242	2,096	2,755	2,832	2,886	2,874	2,918	2,970	2,683
Number of non-pulmonary tuberculosis cases on register at end of the year ..	342	1,431	1,744	417	383	348	338	348	336	322	293

The modal age of new cases of pulmonary tuberculosis continues to rise as the disease decreases in incidence among young adults (Table IV).

Table IV

Giving the Modal Ages of New Cases during recent Years

MODAL AGE OF NEW CASES NOTIFIED			
Year	Males	Females	Males and Females
1952	39	27	33
1953	39	25	33
1954	32	26	28
1955	38	27	32
1956	38	28	32
1957	42	30	34
1958	48	35	41
1959	44	30	38
1960	47	34	41
1961	48	39	45
1962	49	36	44
1963	50	34	44

The number of known cases on the tuberculosis register decreased from 2,926 to 2,683 (Table V) during the year. As most of these are quiescent cases, it is likely that a large number will be reclassified as "recovered", in due course.

Table V

Giving the number of cases of Tuberculosis on the Register in Cardiff on the 31st December, 1962 and 1963

	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Number of cases on the register 31/12/62.. ..	1,603	1,323	2,926	142	180	322
Number removed during 1963 through deaths	42	31	73	5	9	14
Number no longer traceable	25	18	43	1	1	2
Number removed during 1963 through leaving Cardiff to live elsewhere	39	29	68	2	2	4
Number removed during 1963 as "recovery" cases	82	105	187	5	10	15
Number of newly notified cases during 1963	64	31	95	5	8	13
Number of known cases who came from outside to live in Cardiff	17	16	33	1	—	1
Number of cases on the register 31/12/63.. ..	1,496	1,187	2,683	135	158	293

Consultant Chest Physician's Report

The Chest Clinic which is under the control of the Cardiff Hospital Management Committee, works in close and happy association with the City Public Health Department.

In spite of the decline in tuberculosis, it continues to be a busy unit.

During the year 2,358 new patients from the City were seen at the Clinic, 94 (3.9%) of these had active tuberculosis. The figure for active tuberculosis in 1962 was 146, so there has been a very definite improvement which is encouraging for the future.

Of the 2,358 new patients seen 907 (38.4%) had non-tuberculous chest diseases, notably pneumonia 314, bronchitis 174 and lung cancer 44. There seems little doubt that both chronic bronchitis and lung cancer are associated with heavy cigarette smoking and much time is spent by the clinic staff in trying, with some success, to discourage excessive smoking.

Table VI

Sources of Ascertainment of New Cases of Pulmonary Tuberculosis—1963

General Medical Practitioners	19
General Practitioner X-ray Sessions	25
Hospitals	16
Mass Radiography Service	10
Examination of Contacts	12
Other Sources	3
	<hr/> 85

It will be seen from this table that the General Practitioner Chest Radiography Unit situated in Castle Street contributed 25 (29.4%) of the 85 new cases of pulmonary tuberculosis and contact examination 12 (14%) new cases.

In spite of the satisfactory reduction in the incidence of tuberculosis contact examination continues to be very important and takes up a considerable amount of Chest Clinic and Health Department time. We are concerned not only with the discovery of new cases of active tuberculosis, but with prevention by giving B.C.G. vaccination.

Table VII

Number of known sputum Positive cases in Cardiff at the end of 1963 with corresponding figures for 1959/60/61 and 62

Year	Recently diagnosed		Persistently Positive for one year or more		Total
	Sensitive	Resistant	Sensitive	Resistant	
1959 ..	16	—	10	40	66
1960 ..	16	—	6	33	55
1961 ..	6	3	9	22	40
1962 ..	11	—	5	26	42
1963 ..	13	—	2	23	38

The Ministry of Health keeps a central register of drug resistant tuberculous cases for England and Wales. During the year there were 33 drug resistant cases registered from the City of Cardiff.

A great deal of effort was made by the Health Department, the Chest Clinic and Sully Hospital to deal with these difficult cases. Difficult, for they more often than not represent social and personal problems, and from the medical point of view their treatment was also difficult as their tubercle bacilli were resistant to one or more of the drugs in general use. Some success can be recorded, for of the 33 resistant cases earlier on in the year, 8 were made negative, mainly by treatment in hospital. One patient left the City and one died, leaving at the end of the year 23 cases still resistant. Unfortunately of these 23, 8 (approximately 33%) were resistant to the three major drugs used in the treatment of tuberculosis. Experience in the use of minor drugs has now increased so that in the near future, these will be tried in the homes of those unwilling or unable to accept hospital treatment. This will be done in close association with the family doctor and the Health Visitor.

S. H. Graham,
Consultant Chest Physician.

Non-Pulmonary Tuberculosis

Thirteen new cases of non-pulmonary tuberculosis were notified during 1963, the lowest number yet during a year (Table VIII).

Table VIII

New Cases of Non-Pulmonary Tuberculosis by Sex and Localisation of the Disease

Site of Infection	1956		1957		1958		1959		1960		1961		1962		1963	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Nervous System	3	2	1	1	—	1	—	—	1	2	—	1	—	—	1	1
Intestines and Peritoneum ..	—	3	1	2	—	—	—	—	—	1	—	—	—	1	—	—
Vertebral Column	5	—	2	—	1	—	2	—	1	—	—	—	—	—	1	1
Bones and Joints	2	1	—	2	1	1	—	—	1	—	—	2	—	1	—	—
Cervical Glands	5	6	2	11	3	7	4	7	4	3	4	7	2	2	3	3
Kidneys	—	—	—	2	1	1	1	3	—	2	—	—	—	1	—	—
Other Organs	3	1	4	5	—	5	3	6	4	5	2	5	—	6	—	3
TOTAL	18	13	10	23	6	15	10	16	11	13	6	15	2	11	5	8

Mass Radiography

In his Annual Report for 1963 Dr. T. Francis Jarman, Medical Director of the Welsh Mass Radiography Service, reported that 21,680 examinations were carried out by the mobile and static units in Cardiff during 1963. Approximately a half were members of the public who had attended the units on their own initiative, 6,500 had been referred by general practitioners and the remainder consisted mainly of factory employees examined at their place of work.

Tuberculin Testing

All Cardiff schoolchildren were again offered tuberculin tests during the year. As a result two children were found to be suffering from pulmonary tuberculosis, among the ten children who had converted from negative to Heaf grade III or IV reactions during the period of twelve months preceding the second tests. No case of tuberculosis was found among the 10 converters to Heaf grade II. There were 546 converters to Heaf grade I reaction, but as it was considered that this change in tuberculin sensitivity was not associated with tuberculous infection, they were not advised to undergo X-ray examination.

Two other cases of tuberculosis were found among children who had Grade III or IV reaction to their first tuberculin test and one among children known to have been tuberculin positive for over a year.

In addition, six adult contacts of strong tuberculin reactors were found to have pulmonary tuberculosis. Four were home contacts of the 10 strong converters and two contacts of children positive to their first test.

The results of the tuberculin testing are given in Table IX. Only 9 out of over 40,000 children were considered to have been definitely infected by tubercle bacilli during the year.

Table IX

Giving the results of Tuberculin Tests among Cardiff Schoolchildren during 1963

Age	Total Number Tested	% of Children unvaccinated	% OF UNVACCINATED CHILDREN			CONVERSIONS TO	
			Tuberculin Negative	Weak Reactors (Heaf I or II)	Strong Reactors (Heaf III or IV)	Weak Positive Reactions	Strong Positive Reactions
5	3,351	86	98	2	0.2		
6	3,529	88	97	3	0.3		1
7	4,507	88	96	4	0.4		1
8	3,694	87	95	4	0.5		2
9	3,685	89	95	5	0.6		3
10	3,740	86	94	5	0.5		1
11	3,397	87	93	7	0.8		
12	3,805	88	91	8	1.0		
13	3,823	78	90	9	1.6		1
14	3,710	28	67	27	5.9		
15	2,223	13	52	38	10.3		
16	1,074	10	33	60	8.2		
TOTAL	40,538	75					9

Table X gives an indication that the prevalence of tuberculosis has remained somewhat unchanged during recent years. An increasing proportion of these tuberculin positive children, however, have only low grade tuberculin sensitivity, probably produced by organisms other than tubercle bacilli. The tuberculin positive rate can no longer be regarded, therefore, as a sensitive index of the prevalence of tuberculous infection in the City.

Table X

Showing the Proportion of Tuberculin Positive Reactors among 13-year-old children only

Year	Number of 13-year-old school children		Percentage of 13-year-old children Tuberculin Positive
	Tuberculin Tested	Found to be Tuberculin Positive	
1954	1,173	282	24.0
1955	1,885	352	18.7
1956	1,919	360	18.8
1957	2,504	426	17.0
1958	1,872	367	19.5
1959	3,050	460	15.8
1960	3,838	629	16.1
1961	4,473	678	15.2
1962	3,982	620	15.6
1963	2,869	396	13.8

BCG Vaccinations

As in previous years, BCG vaccination was offered to tuberculin negative persons in the following groups:— schoolchildren aged 13, children living in tuberculous homes, new-born infants at St. David's Hospital, university and technical school students, medical students and nurses. The number vaccinated is given in Table XI.

Table XI

BCG Vaccinations—Cardiff 1959-63

Year	NUMBER OF								Others Vaccinated
	Contacts (ex. newborn Babies)		Schoolchildren				Newborn Babies Vaccinated		
	Vaccinated	Tuberculin Positive	Offered Vaccination	* Not Tuberculin Tested	Tuberculin Positive	Vaccinated	Contacts	Non-Contacts	
1959	513	20	4,455	862	841	2,752	186	809	223
1960	456	50	4,862	751	772	3,334	278	924	219
1961	569	29	5,656	779	678	4,209	361	1,193	208
1962	572	23	4,911	1,387	657	2,869	279	886	221
1963	403	18	5,274	1,212	531	3,531	399	1,377	89

*—Includes absentees and scholars whose parents withheld consent.

A tuberculin positive state following vaccination is accepted as evidence of a successful vaccination. The proportion of schoolchildren found to be tuberculin positive a year after vaccination is given in Table XII.

Table XII

Showing the Results of Tuberculin Tests carried out during 1954-62 on Pupils Vaccinated 12 months previously

Year BCG given	Number Tuberculin Tested 12 months later	Number Tuberculin Positive	% Tuberculin Positive	Number Tuberculin Negative	Number re-vaccinated
1954	223	223	100	—	—
1955	643	639	97·8	4	—
1956	1,233	1,196	97·0	37	4
1957	1,574	1,533	97·0	41	25
1958	2,111	2,025	95·9	86	47
1959	2,851	2,774	97·3	77	77
1960	2,527	2,401	95·0	126	125
1961	3,206	3,075	95·9	131	118
1962	2,577	2,546	98·8	31	25

Venereal Diseases—Treatment at Treatment Centres in Cardiff—1963

A glance at the figures for the attendances at the Treatment Centres for venereal diseases in Cardiff in 1963 shows that there is an increase compared with 1962. The total number of all new cases attending is also rising. The disquieting fact about this is that all these persons were at risk and required investigation. This draws attention to the urgent need for increased publicity and education of the public if the present epidemiological pattern is to be changed.

The upward trend for proved cases of venereal disease continues in Cardiff. The increase in the number of new cases of syphilis in females, although small, is a cause for concern in view of the hope that this disease would be stamped out of Western Europe. The figures for the male cases at the Hamadryad Hospital show a slight decrease but as many of these cases occurred in seamen there may be other factors involved which distort the picture, e.g., the extent to which shipping uses the port, and it is unlikely that there is a real decrease in the incidence of the disease.

V.D. Treatment Centres	Cardiff Royal Infirmary						Royal Hamadryad Hospital		Grand Total	
	1963			1962			1963	1962	1963	1962
	Male	F'male	Total	Male	F'male	Total	Male	Male		
NEW CASES										
Syphilis only ..	9	13	22	7	12	19	28	22	50	41
Soft Chancre only ..	—	1	1	1	—	1	25	17	26	18
Gonorrhoea only ..	120	63	183	98	61	159	222	268	405	427
Multiple infections ..	—	—	—	—	—	—	19	15	19	15
Other Conditions										
(a) Requiring treatment	310	161	471	167	120	287	67	49	538	336
(b) Not requiring treatment ..	51	121	172	140	110	250	59	68	231	318
(c) Not yet diagnosed ..	—	9	9	—	1	1	—	—	9	1
TOTAL	490	368	858	413	304	717	420	439	1278	1156
TOTAL ATTENDANCES ..	2,302	1,784	4,086	2,247	1,281	3,528	2,089	1,965	6,175	5,493
IN-PATIENT DAYS IN HOSPITAL	115	148	263	263	200	463	66	78	329	541

VI—PERSONAL HEALTH SERVICES

(National Health Service Acts, 1946-61)

CARE OF MOTHERS AND YOUNG CHILDREN

Vital Statistics

Live births (registered)	.. .. .	5,258
Live birth rate per 1,000 population	.. .. .	20.17
Illegitimate live births per cent of total live births	.. .. .	7.51
Still births (registered)	.. .. .	85
Still birth rate per 1,000 total live and still births	.. .. .	15.91
Total live and still births	.. .. .	5,343
Infant deaths	.. .. .	130
Infant mortality rate per 1,000 live births—total	.. .. .	24.72
Infant mortality rate per 1,000 live births—legitimate	.. .. .	24.26
Infant mortality rate per 1,000 live births—illegitimate	.. .. .	30.38
Neo-natal mortality rate per 1,000 live births	.. .. .	17.49
Early neo-natal mortality rate per 1,000 live births	.. .. .	15.78
Peri-natal mortality rate	.. .. .	31.44
Maternal mortality (including abortion) : ..		
Number of deaths	.. .. .	3
Rate per 1,000 total live and still births	.. .. .	0.56

Live births and Still births—Sources of Notification

The following statement shows the number of live births and still births notified as having occurred in Cardiff during 1963, according to the source of notification :—

<i>Notified</i>	<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Municipal Midwives	1,343	5	1,348
Private Midwives (Domiciliary)	1	—	1
Private Midwives (Nursing Homes)	481	6	487
Parents or Doctors	3	—	3
Maternity Hospitals :—			
(a) Cardiff Maternity Hospital	2,550	44	2,594
(b) St. David's Hospital	2,234	48	2,282
	<u>6,612</u>	<u>103</u>	<u>6,715</u>

Notifications in respect of children born to residents of other Authorities were as shown :—

<i>Notified by—</i>	<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Municipal Midwives	—	—	—
Private Midwives (Domiciliary)	—	—	—
Private Midwives (Nursing Homes)	261	3	264
Parents	—	—	—
Maternity Hospitals :—			
(a) Cardiff Maternity Hospital	546	10	556
(b) St. David's Hospital	565	15	580
	<u>1,372</u>	<u>28</u>	<u>1,400</u>

Transferred notifications of Cardiff cases were 26. Thus, after allowing for all transferred notifications, the number of Cardiff births notified was 5,341 and this figure was made up as follows :—

	<i>Live Births</i>	<i>Still Births</i>	<i>Totals</i>
Domiciliary	1,352	6	1,358
Institutional	3,913	70	3,983
			<u>5,341</u>

CHILD WELFARE

Child Welfare Centres

The total number of sessions held at Child Welfare Centres was 1,563, the average attendance at each being 40.3, and the total number of attendances was 63,062. The number of children who, at their first attendance during the year, were under 1 year of age was 7,580. The total number of children who attended during the year was 9,067.

Nose and Throat Defects

Number examined for the first time	..	311
Received operative treatment in hospital		73
Received other forms of treatment at Clinic		29
Total attendances at Clinic	.. ..	425

Visual Defects

Attended clinic for the first time	.. ..	713
Examined for errors of refraction	.. ..	165
Spectacles prescribed	.. ..	136

Screening Tests for Deafness in Infancy

During the year 3,160 infants were tested for deafness by health visitors in the clinics and a further 137 were tested at home. These children represented those especially "at risk" for deafness, but many others were examined at the express wish of the parents. Thirty-one infants failed the screening test and were referred to a medical officer for further assessment. As a result, defective hearing was confirmed in two infants, both of whom had congenital abnormalities of the ear.

Infant Deaths

130 deaths occurred in infants under the age of one year representing an infant mortality rate of 24.7%. (England and Wales 20.9%). Although, still above the national rate for England and Wales, the rate is lower than the previous year's figure of 26.31%.

The main causes of infant deaths are shown in the Table on Page 5. 67.6% of infant deaths occurred in the first week of life, and prematurity was a contributory factor in 50% of these deaths, emphasising the importance of this factor in perinatal mortality.

Pneumonia was responsible for 33 deaths, 10 of which occurred in the new-born child, and 23 in infants over the age of one month. Five infants died from bronchitis, and one infant death from whooping cough (at 2 months) was the first reported since 1957. These deaths constitute a total of 29 infant deaths wholly or partly attributable to respiratory infection in infants over the age of one month, and represent 22.3% of the total infant deaths.

Gross congenital malformations were reported in 22 cases or 16.9% of the total deaths. A great volume of research, especially in South Wales where the incidence of congenital malformations is thought to be relatively high, is being undertaken into aetiological factors.

Routine Urine Testing for Phenylketonuria

The practice of testing the urine of every baby with Phenistix at the age of two weeks and six weeks is now well established. The total number of first tests done by health visitors was 5,118, which represents 97% of the babies born in the year. The number of second tests was 5,132.

Since routine testing for phenylketonuria began in Cardiff in 1958, the disease has been diagnosed in three infants. In 1958, a diagnosis of phenylketonuria was made in a female infant when she was 3 weeks old. She was atypical in that the urine tests became negative at the age of a year and she is now apparently normal. In 1960 a male infant was diagnosed whose brother also had the disease. This infant died at the age of 7 months, despite early diagnosis and treatment. During 1963 a male infant, the child of an unmarried mother resident in Cardiff, was found to have phenylketonuria. Diagnosis was made at the age of two weeks, in hospital, and treatment was begun early. The infant remained in the care of the hospital for a period but has now moved from Cardiff.

Neo-Natal Cold Injury

The severely cold weather in January and February, 1963, resulted in three cases of neo-natal cold injury in infants. Fortunately, all were recognised early and responded well to treatment in hospital.

Infants "At Risk"

The names of 1,277 children were recorded in the "At Risk" Register during 1963. This represents a quarter of all the infants born in Cardiff during that year. A summary of the "At Risk" categories is shown below. Some of the children were recorded in more than one category :—

1. Ante-natal abnormalities	183
2. Labour complications	454
3. Perinatal history	284
4. Prematurity	275
5. Post-maturity	48
6. Congenital Abnormalities	92
7. Family history of Deafness	13
8. Family history of mental subnormality	13
9. Severe illness after the perinatal period	2
10. Parents' suspicion of Deafness	—
11. Speech delayed beyond the age of 2 years	1
12. Other	4
Total	1,369

The register has proved to be most useful. It is a ready means of drawing the attention of health visitors to the need for doing a hearing test at the appropriate time and it focuses attention on handicaps in infants. Partly as a result of this, a record of all pre-school children with handicaps is now available and assessment of these children is now in progress. Examination of infants for special defects requires both time and expert assessment. A survey of infants born "at risk" during 1963 will be carried out in 1964, and every effort is being made to ensure that all the infants selected are examined at or near their first birthday.

Care of Expectant Mothers

Ante-Natal Clinics

The number of sessions held was 1,543, the average attendance at each session being 15.5 expectant mothers. The total number of attendances was 23,961 and the total number of women who attended during the year was 3,948. Further investigation of the Wassermann and Pryce Precipitation Reaction was necessary in the case of five mothers.

Mothercraft and Relaxation

The programme was re-designed to satisfy the needs of expectant mothers having their babies at home and was based on a questionnaire circulated to them at the ante-natal clinics. In addition to the regular talks and demonstrations given by midwives, health visitors, and a physiotherapist, films of an educational nature have been shown. 523 expectant mothers attended the mothercraft and relaxation sessions during 1963, i.e., a third of the total booked for home delivery; 40% of these were primigravidae.

Parentcraft

Parentcraft talks for fathers were given regularly throughout the year by a Registrar in psychiatric medicine.

Deaths ascribed to Pregnancy or Childbirth

There were three deaths during the year. Details are as follows :—

1. Massive pulmonary embolism due to pelvic vein thrombosis due to pregnancy. Gestation period—6 weeks. Maternal age 23 years.
2. Renal failure due to bilateral renal cortical necrosis due to spontaneous placental haemorrhage due to toxæmia of pregnancy. Gestation period—40 weeks. Maternal age 22 years.
3. Haemorrhage due to spontaneous rupture of a tubal pregnancy. Gestation period—8 weeks. Maternal age 31 years.

Diagnostic Clinic at Annexe to Cardiff Royal Infirmary

A total of 83 mothers and children were referred to this clinic via the ante-natal clinics and school health service during 1963. This shows an increase of 46 in the total number of referrals compared with 1962.

The following diagnoses were made :—

Syphilis (old case)	..	..	..	..	1
Syphilis (latent)	..	..	..	..	1
Syphilis (congenital)	..	..	..	..	1
Gonorrhoea	..	..	..	..	4
Lympho Granuloma Venerum	..	..	..	..	1
Other conditions (not venereal disease)	..	..	..	..	75
					—
					83
					—

The age groups of patients were :—

Children of school age	..	..	..	..	8
16-17 years	..	..	..	..	7
18-19 years	..	..	..	..	19
20-24 years	..	..	..	..	25
Over 25 years	..	..	..	..	24
					—
					83
					—

The high proportion of patients between 18 and 24 years is noteworthy, but the increase of 46 in the total number of referrals relates almost entirely to the group classified under "other conditions (not venereal disease)".

District Diagnostic Clinics

The diagnostic clinics, which were commenced during the year at Llanrumney and Ely Clinics, dealt with ante-natal patients complaining of vaginal discharge. A total of 90 patients were seen and treated during the year.

Domestic Help

Notes on this Service are included in the appropriate section of the report, but it is recorded here that the number of instances in which domestic help was provided for cases of confinement during the year was 107.

CARE OF UNMARRIED MOTHERS AND CHILDREN

The admission to the Salvation Army Home (Northlands) of unmarried expectant mothers was arranged in 11 instances during 1963, for all of whom the Authority accepted financial responsibility. Arrangements were also made for 3 cases to be admitted to the Salvation Army Home at Bristol, these cases being approved as transfers from "Northlands" Home in special circumstances.

The Authority, during 1963, approved an extension of the arrangements in existence with "Northlands" to two other organisations providing accommodation for unmarried mothers, namely:—

The Convent of the Good Shepherd, Chepstow; and
The Llandaff Diocesan Association for Moral Welfare.

The admission to the Convent of the Good Shepherd of unmarried expectant mothers was arranged in 6 instances during 1963. The Authority accepted financial responsibility for all 6 cases. The admission to the Llandaff Diocesan Association's Home at Penarth was arranged in 2 instances during 1963, and the Authority accepted financial responsibility for 2 cases. Arrangements were also made for 1 case to be admitted to a Mother and Baby Home at Exeter, this case being approved as a transfer from the Penarth Home in special circumstances.

The Authority have made provision in the next year's estimates of expenditure to acquire a suitable property for accommodating up to 10 unmarried mothers. The decision to provide this accommodation was taken in consultation with representatives of the voluntary organisations already receiving financial assistance from the Authority.

CARE OF PREMATURE INFANTS

Special visits are made in the case of premature babies born at home, 2,365 such visits having been made during the year. The scheme for following up the premature babies on discharge from hospital is described in the reports for 1949 (page 22) and 1953 (page 53).

Statistics relating to prematurity (after correction for transfers) are shown in the following tables and the table on page 28.

Number of Premature Live Births notified :—

(a)	In hospital	.. .. .	..	305
(b)	At home or in a nursing home	..	..	54
				<hr/> 359

Number of Premature Still-Births notified :—

(a)	In hospital	.. .. .	..	53
(b)	At home or in a nursing home	..	..	3
				<hr/> 56

Weight at birth	PREMATURE LIVE BIRTHS														PREMATURE STILLBIRTHS	
	Born at home or in a nursing home															
	Born in hospital				Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day							
	Total Births (1)	within 24 hrs. of birth (2)	Died		Total Births (5)	within 24 hrs. of birth (6)	Died		Total Births (9)	within 24 hrs. of birth (10)	Died		in 7 and under 28 days (12)	in hospital (13)		Born at home or in a nursing home (14)
			in 1 and under 7 days (3)	in 1 and under 28 days (4)			in 1 and under 7 days (7)	in 7 and under 28 days (8)			in 1 and under 7 days (11)	in 7 and under 28 days (12)				
1. 2 lb. 3 oz. or less ..	45	23	8	1	—	—	—	—	1	—	1	—	12	—		
2. Over 2 lb. 3 oz. up to & including 3 lb. 4 oz.	26	3	2	1	—	—	—	—	4	—	2	2	12	—		
3. Over 3 lb. 4 oz. up to & including 4 lb. 6 oz.	45	4	4	—	3	—	—	—	—	—	—	—	14	2		
4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	64	2	1	—	12	—	—	—	3	1	—	—	7	—		
5. Over 4 lb 15 oz up to & including 5 lb. 8 oz.	125	—	1	—	29	2	—	—	2	—	—	—	8	1		
6. TOTALS ..	305	32	16	2	44	2	—	—	10	1	3	2	53	3		

1=1,000g, or less; 2=1,001 - 1,500g; 3=1,501 - 2,000g; 4=2,001 - 2,250g; 5=2,251 - 2,500g

DENTAL TREATMENT

REPORT OF H.V. NEWCOMBE, L.D.S., R.C.S.

Principal School Dental Officer

The following is a record of all forms of dental treatment carried out during 1963 in connection with maternity and child welfare, i.e., expectant and nursing mothers and young children

	Expectant Mothers	Nursing Mothers	Pre-School Children	Total
(a) <i>Numbers provided with dental care</i>				
Referred for treatment by M.O.s	313	370	741	1424
Attended for inspection	253	305	686	1244
Found to be in need of treatment	245	298	579	1122
Treated for first time	183	251	490	924
Made dentally fit	109	209	443	761
Attendances for treatment	567	1512	718	2797
(b) <i>Treatment provided</i>				
Teeth filled	213	367	191	771
Teeth extracted	233	757	819	1809
Silver Nitrate treatment	3	2	19	24
Dressings	51	96	50	197
Scaling with gum treatment	39	71	8	118
Scalings	35	54	2	91
Extractions under local anaesthetic	197	484	29	710
Administrations of general anaesthetics	52	114	417	583
Crowns and inlays	—	—	—	—
Mothers supplied with dentures	41	145	—	186
(c) <i>Dentures supplied</i>				
Full upper	20	86	—	106
Partial upper	22	46	—	68
Full lower	17	67	—	84
Partial lower	7	28	—	35

Number of Sessions 365.

Dental Health

Much has been written about, and publicity given to, the dangers of over-indulgence in the consumption of sweets on account of the cariogenic effect which these substances are known to produce. Little, however, appears in the literature concerning the emotional aspects of sweet-eating but these are clearly of dental importance in relation to caries prevention. Such aspects formed the subject of a paper read at a recent Dental Health Conference held by the General Dental Council which I was privileged to attend. In her paper the author—a consultant psychiatrist to the Child Guidance Training Centre—expressed the view that “although sweet-eating would appear to be entirely an oral form of satisfaction, it does in fact provide substitute compensation for frustration and deprivation in every other area of emotion”. Reference was made to parents who habitually offer sweets in attempting reparation for their failure to meet the child’s emotional needs and thus set a pattern which persists into adult life.

From experience gained at Maternity and Child Welfare dental clinics it is clear that many mothers regard sweets and such like as essential to their children’s well-being. The idea that the taste for sweet things is inborn is not generally supported, many children preferring savoury to sweet things.

It is suggested that mothers should be suitably educated and so help to prevent the cultivation of a taste for sweets. Another idea is that parents could do a great deal by letting children think the taste for sweets is childish and that the taste for savouries is more grown-up.

New Clinics—Progress Report

Completion of the new clinic at Roath Court Road is imminent and should become operational early in January 1964.

With regard to the clinic at Splott Park, the project here has been fraught with innumerable constructive and other difficulties since its commencement, not the least being a hold-up of four months in connection with the laying of the foundation because of the poor nature of the ground on the site. Scheduled to be completed in June 1962, it is now unlikely—according to the latest estimate—to be brought into use before Whitsun 1964.

In the following a comparison is made between the statistical results for 1963 and 1962, figures for the latter year being shown in parenthesis.

Of the total number of Maternity and Child Welfare cases requiring treatment, viz. 1122 (1264), 82.3% and (85.0%) respectively were actually treated and of the latter 82.3% and 86.5% respectively were actually made dentally fit.

Despite there being 152 less cases treated in the current year than in the preceding one, the total volume of work performed, represented by the aggregate of individual items of treatment, was approximately 14.1% higher than that for 1962.

Treatment

The total number of fillings, per cent of mothers and children treated was 133.6 (122.6) and 38.9 (25.2) respectively; whilst in the case of extractions under general anaesthesia, the corresponding figures were 385.0 (310.2) and 173.0 (180.1). Although the overall number of extractions differed but a little from that for the previous year—2519 (2559)—extractions carried out under general dental anaesthesia accounted for 71.8% (83.1%) of the respective totals; thus the decline in the rates of extractions under general anaesthesia to extractions under local—to which reference was made in last year's report—continues.

With the number of mothers supplied with dentures showing a fall of 8.8% below the 1962 level, the number so provided represented 42.8 (42.7) of all mothers treated.

With regard to dentures supplied the rates of partial dentures to full dentures was 1 : 1.08 (1 : 1.59).

HOME NURSING SERVICE

Staff

The District nursing staff on 31st December, 1963, consisted of 3 Administrative, 35 whole-time (including one male) and 4 half-time State Registered Nurses. In addition there were 3 student district nurses and 2 whole-time and 1 part-time State Enrolled Assistant Nurses, making a total whole-time equivalent of 44. 12 student district nurses completed training during the year. Increasing demand on the service resulted in the expansion of the establishment by the addition, in terms of full-time staff, of two district nurses.

The usual facilities for observing the work of the domiciliary nursing service were afforded to 15 students undertaking the health visitors' course at the Welsh National School of Medicine, and to 42 student nurses from the Cardiff Royal Infirmary.

Night Relief Nurses

This service is now in the third year of operation. 29 families have received relief from nurses or night sitters on 242 sessions. The type of patient receiving this help was usually the elderly, but there were some in the younger age groups suffering extreme stages of illness.

Marie Curie Service for Cancer Patients

This service operated on behalf of the Marie Curie Foundation, was provided for 20 patients on 208 sessions totalling 1,872 hours and has greatly been appreciated by the patients and relatives.

Laundry Service for Incontinent Patients

This service has continued to expand since its inauguration in 1959. During the year 185 patients received the benefit of this essential service, many of whom were elderly long term cases. Deliveries and collections are made twice weekly to an average of 70 patients, and this figure increased to 80 patients during the last quarter of the year.

Statistics

The statistics relating to the work of the service during 1963 are as follows :—

Number of new cases	..	..	..	3,725	
Cases carried over from 1962	..	..	..	896	
Total				4,621	
Classification of cases and visits :—					
Medical	..	..	..	3,758	115,295
Surgical	..	..	..	665	18,517
Tuberculosis	..	..	..	81	4,436
Maternal complications	..	..	..	5	23
Others	..	..	..	112	854
				4,621	139,125
Sources from which cases were referred :—					
General Practitioners	..	..	..	3,347	
Hospitals	..	..	..	138	
Public Health Department	..	..	..	93	
Miscellaneous	..	..	..	147	
Brought forward—	..	..	..	896	
				4,621	

DISTRICT MIDWIFERY SERVICE

Midwives in practice

At the end of the year the midwives practising in the area were reported as follows :—

(a) INSTITUTIONAL

- (i) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act, 1946 83
- (ii) Midwives employed in Nursing Homes .. 7

(b) DOMICILIARY

- (i) Midwives employed by the Authority
 - (a) Headquarters Midwives 9½
 - (b) District Midwives 13
- (ii) Midwives in private practice 1

Medical Aid under Section 14(1) of the Midwives Act, 1951

The number of cases in which medical aid was summoned during the year under Section 14(1) of the Midwives Act, 1951, by a midwife :—

(a) **For Domiciliary cases**

(i) Where the medical practitioner had arranged to provide the patient with maternity medical services under the National Health Service	56
(ii) Others	2

(b) **For cases in Institutions** —

Deliveries attended by Midwives

	DOMICILIARY CASES		Totals	Cases in Institutions
	Doctor not booked	Doctor booked		
(a) Midwives employed by the Authority ..	16	1,330	1,346	—
(b) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	4,795
(c) Midwives in Private Practice (including Midwives employed in Nursing Homes) ..	—	—	—	485
TOTALS	16	1,330	1,346	5,280

(This table relates to women delivered, not, in the case of multiple births, to infants).

Statistics

The statistics relating to the work of the service during 1963 are as follows :—

Early hospital discharges attended	1,013
48-hour hospital discharges attended	515
Housing visits to the above to arrange allocation of hospital bed	1,217
Total number of visits to patients during lying-in period	33,801
Total visits to patients during ante-natal period	6,695
Total number of cases booked	1,681
Total number of cases attended	1,347

Part II Midwifery Training School :

Number of pupils entered school	30
Number of pupils entered examination	28
Number of pupils failed to complete training	2

Transport

At the end of the year motor car allowances were being paid to 21 midwives using their cars in connection with the Service. In addition two motor cars were provided for the use of midwives.

Supervision

Officers of the Department made 189 visits of inspection of midwives.

Infectious Diseases arising from Childbirth

The following cases were notified during the year:—

	<i>Domiciliary Confinements</i>	<i>Institutional Confinements</i>
Ophthalmia Neonatorum	1	1
Puerperal Pyrexia	3	10

The Ophthalmia Neonatorum cases cleared up with no impairment of vision and the Puerperal Pyrexia cases were all of a mild type, quickly resuming to normal.

Maternity Outfits

Maternity Outfits are made available where necessary in all cases of confinements other than in National Health Service hospitals. The number supplied during the year was 1580.

Early Discharges from hospital

The increase in the number of maternity patients discharged early from hospital in 1963 necessitated 20 per cent. more home nursing visits by domiciliary midwives during the lying-in period.

Despite the heavy demands made upon the domiciliary midwifery service in visiting these patients this procedure enabled more mothers to benefit from the advantages of hospital confinement. In all but a few isolated cases the progress of the mothers and infants discharged early from hospital was uneventful.

CARDIFF AREA MATERNITY SERVICES LIAISON COMMITTEE

The following items were reported and discussed by this Committee :—

1. The Cardiff Births Survey, under the supervision of Professor A. S. Duncan, Professor of Obstetrics at the Welsh National School of Medicine. The survey commenced in 1963 and is progressing satisfactorily, data being received from both hospital and domiciliary maternity records.
2. Both hospital and domiciliary midwifery staff are conscious of difficulties associated with the system of 48 hour hospital discharges of patients. Three part-time midwives are employed by the Cardiff Local Health Authority to nurse these early discharges at home.
3. The use of local authority premises for consultant clinics was discussed at the request of the Welsh Board of Health. The Medical Officer of Health reported that ample space was available in local authority clinics, but the Committee felt that the increased use of shared ante-natal care was more preferable.
4. A congenital abnormality register is being established by Professor C. R. Lowe in the Department of Social and Occupational Medicine of the Welsh National School of Medicine. Notifications of abnormalities are received by the Medical Officer of Health on the Birth Notification forms completed by midwives, and this information is then sent to Professor Lowe's Department.

HEALTH VISITING

Staff

At the end of the year the staff consisted of the Superintendent, Deputy Superintendent and 58 health visitors. The equivalent time of 45 health visitors was devoted to the full range of duties, which includes general health visiting, school nursing, tuberculosis visiting, mental subnormality routine visiting and care of the aged. The remainder were undertaking particular duties which had been assigned to them and which include the hospital follow-up schemes, care of premature infants, liaison with the Chest Clinic, B.C.G. vaccination, immunisation, mental health work and geriatrics.

To relieve health visitors, the equivalent of 8 full-time State Registered Nurses are employed on duties at clinics, centres and schools.

Home Visiting

A summary of the work carried out by Health Visitors is as follows :—

Children born in 1963	..	{ First visits	..	..	4,777
		{ re-visits	..	..	9,356
Children born in 1962	..	{ First visits	..	..	402
		{ re-visits	..	..	13,761
Children born in 1958-61	..	{ First visits	..	..	449
		{ re-visits	..	..	31,628
Vaccination and Immunisation		{ First visits	..	..	73
		{ re-visits	..	..	151
Nutritional Visits	..	{ First visits	..	..	60
		{ re-visits	..	..	278
Expectant mothers	..	{ First visits	..	..	775
		{ re-visits	..	..	682
Venereal diseases	..	Revisits	..	..	3
Problem families	..	{ First visits	..	..	89
		{ re-visits	..	..	1,848
Chronic sick (under 65 years)		{ First visits	..	..	102
		{ re-visits	..	..	371
Persons aged 65 years & over	..	{ First visits	..	..	2,508
		{ re-visits	..	..	5,875
Mental Subnormality	..	{ First visits	..	..	78
		{ re-visits	..	..	1,321
Mental Welfare	..	{ First visits	..	..	179
		{ re-visits	..	..	1,122
Tuberculosis Households	..	{ First visits	..	..	168
		{ re-visits	..	..	1,591
B.C.G. Vaccination	..	{ First visits	..	..	227
		{ re-visits	..	..	465
Visits to households for other infectious diseases	..	{ First visits	..	..	3
		{ re-visits	..	..	7
Premature Infants	..	{ First visits	..	..	216
		{ re-visits	..	..	2,149
Paediatric cases	..	{ First visits	..	..	415
		{ re-visits	..	..	779
Diabetic cases	..	{ First visits	..	..	122
		{ re-visits	..	..	361

Cases in which help was provided :—

Maternity	107
Tuberculosis	17
Chronic sick	180
Aged and Infirm	1232
Mental	4
Blind	10
Acute sick	45
Miscellaneous	19
	<hr/>
	1614
	<hr/>

THE CARE OF THE ELDERLY

By JEAN M. EVANS, B.Sc., M.B., B.Ch., D.R.C.O.G.
& ROBIN M. WILLIAMS, M.B., B.Ch., D.P.H.

The number of elderly people under the community care services continues to increase. Health Visitors made a total of 8,383 visits to the elderly, 1,125 being to new cases and 7,258 re-visits. At the mid-point of 1963, 2,441 elderly persons were being visited by the area Health Visitors. This is an increase of 34% over the numbers for 1962. Table I shows the number of cases known to the Department in each area at the mid-point in each year.

Table I

Geriatric Cases being Visited by Health Visitors

	1960	1961	1962	1963
Central	307	383	453	651
Gabalfa	139	175	220	214
Sploott	46	56	104	155
Grange	151	186	257	169
Canton	208	258	257	370
Ely	105	130	139	212
Llanrumney	73	91	191	195
College Farm	46	56	63	110
Fairwater	70	87	120	190
Llanishen	21	26	57	91
Miss Major	40	50	50	84
	<hr/>	<hr/>	<hr/>	<hr/>
	1,206	1,498	1,911	2,441
	<hr/>	<hr/>	<hr/>	<hr/>

The new record cards continue to prove their worth and the Central Register of Geriatric Cases which was set up last year is now complete and being added to daily as new cases are reported from the various sources. An additional source of information has been found in the Chiropody Service. Requests for domiciliary chiropody are now notified to the department and the patients names are checked with the register. If they are not already known, the name is entered and the area Health Visitor notified.

Towards the end of 1963, Mrs. M. H. Bradbeer, who had given valuable service for 18 months as a part-time Liaison Health Visitor, transferred full time to the Mental Health Department. Miss H. M. Thomas, previously area Health Visitor at College Farm, will be replacing Mrs. Bradbeer in the New Year but on a full time basis to cope with the increase in volume of work.

The Liaison Health Visitors made a total of 1878 visits during the year made up of 265 new visits 845 revisits and 768 other visits. The number of new visits is less than that in previous years mainly because the worst cases have now largely been cleared leaving the more chronic difficult cases for attention.

Table II

New Cases Visited during the Year 1963 and by whom referred

New Cases

Referred by :—

St. David's Hospital	..	..	..	..	..	99
General Practitioners	..	..	..	..	..	35
Welfare Department	..	..	..	..	..	22
National Assistance Board	..	..	..	..	..	9
Relatives and Friends	..	..	..	..	..	33
Request by Patient	..	..	..	..	..	2
Hospital Almoners	..	..	..	..	..	8
District Nurses	..	..	..	..	..	12
Found whilst visiting	..	..	..	..	..	8
Mental Welfare Officer	..	..	..	..	..	4
Housing Department	..	..	..	..	..	1
Rookwood Hospital & Outpatients Department	..	..	..	..	..	2
Medical Officer of Health	..	..	..	..	..	6
Voluntary Organisations	..	..	..	..	..	5
Chiropodist	..	..	..	..	..	1
Public Health Inspector	..	..	..	..	..	5
Home Help Service	..	..	..	..	..	1
Health Visitors	..	..	..	..	..	7
Councillors	..	..	..	..	..	4
Glamorgan Health Visitors	..	..	..	..	..	1
Total New Cases						265

The close relationship with hospitals, welfare and voluntary services continues in harmony and much work goes into ensuring that all the services available are used to the best purpose. The work, however, is hampered by the shortage of many of the facilities necessary to give elderly people the living conditions which they need. Hostel accommodation is limited and domiciliary services are strained to their limits, but still do not support the elderly in their own homes as much as one would hope. Projected expansion in the Home Help Services and W.V.S. Day Centres may help alleviate this problem. A Day Hospital is being opened under the auspices of the Geriatric Unit in St. David's Hospital in April 1964 and it is hoped that this may ease the problem when elderly persons are discharged from hospital.

Dr. Harrett left the staff in July 1963 after looking after the Geriatric Service from its commencement. His friendly and persuasive manner, which was much liked by his patients, is greatly missed in the department. Dr. Williams, who was already on the staff, took over Dr. Harrett's duties in September. Now Dr. Evans, who was appointed on a part time basis with this work particularly in view, manages the female side while Dr. Williams visits the problem male cases.

REHABILITATION OF PROBLEM FAMILIES

REPORT OF THE SOCIAL CASE WORKERS

One Social Case worker left at the end of March, 1963, and the second at the end of April. Two new Case Workers were appointed from the Health Visiting Staff and commenced duties on the 1st August, 1963.

Weekly visits were made to 9 families by the Home Help Visitor, while the posts were vacant from May - July.

The new Case Workers had had considerable experience with these families and already knew most of them. The families accepted the transition without comment, but the neighbours still called them in for advice which was time consuming. This was, however, an asset in assessing the relationship of a particular family within the community. Close liaison with the Area Health Visitors was also a great help in this respect.

The excellent records left by the previous Social Case Workers were invaluable, particularly where the families were not known.

Cases open at the end of April	..	..	38	
Cases transferred to Children's Dept.	..	..	7	
Cases transferred to Mental Health Section			5	
Cases closed	..	..	8	
Cases left open	..	..	18	
Cases taken over on 1st August	..	..	18	Left open in April
				Previously trans-
			2	ferred to Child-
				ren's Dept.
			—	
			20	

17 Problem Families
3 Rehabilitation Committee.

		Jan. to May	541	Aug. to Dec.	724
No. of visits	85	..	175
No. of agencies	5	..	29
No. of new cases	8	..	14
No. of cases closed			

Cases open 31st December — 35

New Cases.

3 closed cases broke down. In one case the father deserted the family and the mother became apathetic and neglected the home.

11 cases were referred by the Rehabilitation Committee because of rent arrears and general neglect of the home.

4 Cases were added from the Co-ordinating Committee and 11 cases by special referral.

In most of these cases there were multiple problems with financial difficulties in all cases. Where the families were living at subsistence level because of ill-health, mental defect or unemployment, or where there was gross mismanagement of money, the situation was always aggravated by debts. None of these families was capable of sorting out their financial problems unaided.

General Progress

20 families have improved, 23 have remained stationary. Three have deteriorated.
Total 49. (35 still open, 14 cases closed)

Two cases needed only two visits to help them to solve their own problems. In complete contrast, in four months, one family needed 37 visits plus nine visits to agencies on their behalf. This family was threatened with eviction for rent arrears, the home conditions were very poor—no gas or electricity—no bedding. They have improved a great deal but still need support.

Closed Cases.

Nine families were needing help in a particular crisis and were able to manage after that crisis was over.

In one case the parents decided they wanted to try to manage on their own. Their problems were mainly financial and they had been visited for several years.

One case was transferred to a Welfare Department supervised house.

One old problem family improved sufficiently to be closed. Another was closed because of lack of co-operation.

Thanks for help are due to the following :—

All Local Authority Departments
Family Welfare Associations
W.V.S.
Salvation Army and other religious bodies
National Assistance Officers
Prison Welfare and Prisoners Aid Society Officers
Gas & Electricity Board Officers
County Court Officers
British Red Cross Society

CHIROPODY SERVICE

The Health Department's Chiropody Service is operated in the City for the benefit of persons of retirement age, handicapped persons and expectant mothers. The service is provided by arrangement with a panel of chiropodists in private practice at whose surgeries persons are able to obtain treatment at intervals of two months. Persons who are unable to attend the chiropodist's surgery, however, owing to a physical handicap which prevents them from travelling, may be authorised to receive treatment in their own homes, and statistics for the current year show that 2,608 such treatments were provided. For each treatment, whether surgery or domiciliary, the patient pays the chiropodist 2/- and the balance of the chiropodist's fee is paid by the Authority. At the end of the year 18 chiropodists were authorised to provide treatment under the department's scheme.

Statistics relating to the service are as follows :—

Table 1

Number of patients registered	..	..	..	3661
Number of patients on the waiting list	..	..	..	75
Number of Chiropodists	..	..	..	18
Number of treatments given :				
At Surgery	..	11,179		
At home	..	2,608		
				<hr/>
				13,787

Table 2

Number of patients registered in the category of retirement age or over	3,643
Number of patients registered as expectant mothers	4
Number of patients registered as handicapped persons	14
	<hr/>
	3,661
	<hr/>

The service was further expanded during 1963 mainly because of the increased financial provision authorised, and it is particularly gratifying to note that it was largely instrumental in effecting a reduction in the number of persons awaiting treatment under the scheme. For example at the end of 1962 there were 789 persons on the waiting list for treatment, but at the end of the current year this figure had been reduced to 75. It would be unwise, however, for this creditable achievement to induce a feeling of complacency, as seen in its proper perspective the net result has only been to remedy a marked deficiency in the service from the previous year. Further demands on the service must be expected as the facilities become more widely known, and, indeed the number of persons registered of retirement age represents only 13.6% of the known population in Cardiff of persons over the age of 65 years.

It is from this section of the population that the demand for chiropody treatment is greatest, and this fact is clearly illustrated by the figure for this section, shown in Table 2 above, representing 99% of the total patients registered. Equally, it is true that the proportion of aged persons requiring chiropody cannot be readily ascertained, but a survey carried out in Luton amongst this section of the population revealed that 37% of those questioned complained of foot troubles. Financial provisions is the limiting factor, but if the example quoted is taken as a guide, future expansion of the service must eventually aim at approximating to a similar proportion of the elderly.

Some mention should also be made of the co-operation with voluntary organisations such as the Women's Voluntary Service in providing chiropody facilities at day centres for the aged. A small grant is made to this organisation to provide such facilities at the Riverside and Splott Day Centres, and in view of the success of this arrangement it is planned to extend the amenity to other centres by increasing the amount of the grant available in the succeeding year.

Finally, thanks are due to the panel of chiropodists for their co-operation in maintaining an efficient chiropody service in the City throughout the past year.

AMBULANCE SERVICE

Analysis of Journeys 1st January—31st December, 1963

(a)	Patient—Carrying				<i>Journeys</i>	<i>Patients</i>	<i>Miles</i>
	Emergency	..	..	..	8,980	9,796	74,602
	Accident	..	..	..	2,049	3,165	13,202
	Outpatient	..	..	..	20,500	69,860	194,141
	Others	..	..	..	7,316	9,494	54,427
					<hr/>	<hr/>	<hr/>
					38,845	92,315	336,372
(b)	Abortive and service journeys..	..	..	..	1,412		6,801
(c)	Transporting of Midwives apparatus etc.	..			78		461
					<hr/>	<hr/>	<hr/>
	Totals	..			40,335	92,315	343,634
					<hr/>	<hr/>	<hr/>
	(Totals for the year 1962)	..			(37,774)	(75,697)	(304,286)

			<i>Patients</i>	<i>Miles</i>
Strecher cases included in above	..	..	19,682	118,680
Sitting cases included in above	..	..	72,633	217,692
			<hr/> 92,315	<hr/> 336,372

Average mileage per journey — 8.52

Average mileage per patient — 3.71

The Ambulance Service operates from the Ambulance Depot at the Castle Grounds, Blackweir, with a fleet of 19 ambulances which are radio controlled from base.

Requests for ambulances, except in emergency, where any member of the public may call an ambulance, are usually made through the general medical practitioner or the hospital.

A large part of the work of the service is the conveyance of patients to Out-Patients Departments at hospitals, and the co-operation of the general public is requested so that use is made of the Ambulance Service only by those who cannot make use of public transport or their own private transport arrangements.

The whole fleet consists of specially built vehicles with all modern facilities provided, including resuscitation apparatus, when required. For the transport of premature babies two special oxygenaire cots are provided, which are electrically heated by connection to the ambulance battery, and oxygen and moisture content of the air are under the control of the midwife.

The transport of patients over long distances is effected by means of planned journeys using both ambulances and rail facilities.

On the 1st January, 1963 the re-built and modernised Depot at the Castle Grounds, Blackweir, was put into operation.

This depot now consists of a two-storey administrative block and increases the comfort of the ambulancemen providing them with a modern control room, kitchenette, dining-room and lounge, as well as a wash-room and shower and a heated garage.

Some of the latest equipment has been fitted, such as a "Washmobile" which is a labour-saving machine that rolls on wheels along the length of the ambulance shooting out jets of water or soap mixture on both sides and roof simultaneously and can be operated with one hand.

The garage has wall heaters and a battery charging room which is essential for vehicles operating radios all day.

The new control room contains the base wireless station, two emergency telephones, two ordinary telephones, an extension to the police and a "Robophone". The "Robophone" will record non-urgent messages from doctors if other telephones are engaged.

The approximate cost of this work was £27,000 and £1,000 was spent on equipment and furniture.

The re-built Depot was officially opened on 6th September, 1963, by the Right Honourable, The Lord Mayor of Cardiff, Alderman Charles A. Horwood, J.P.

HEALTH EDUCATION

by B. J. GOODWIN, D.M.A.

Administrative Officer for Health Education

The Health Education Unit was set up officially with effect from 1st October, 1963, but it has been gradually extending its work since it was started in May 1963.

A complete set of sound film projection equipment was purchased. This, together with existing equipment owned by the Department, viz., film strip projectors, tape recorder, record player and camera, completes a very comprehensive basic stock of equipment for use by the Unit.

A summary of its work to 31st December, 1963, follows :—

(a) **Anti-smoking**

- (1) Anti-smoking lectures were given in 42 Primary Schools, 36 Secondary Schools, 3 Further Education Establishments, 4 Youth Clubs, and to 14 Adult Groups. Except for those in Youth Clubs, most of the sessions entailed two or more showings of appropriate films.
- (2) Four complete Five Day "Stop Smoking Clinics" were held, involving twenty evening sessions and two follow-up sessions.
- (3) A survey was made of the results of the first two series of clinics and this is included in the report on page 43.
- (4) A tape recording was made of the first series of lectures and was sent to various parts of Britain, so that local Medical Officers of Health could evaluate the courses, which were designed by the British Temperance Society.

(b) **Mothercraft and Infant Welfare**

Arrangements were made for regular showings of suitable films at mothercraft sessions at all local Health Authority clinics. It is envisaged that this programme will be continued and that such films will be shown for a week, during each 8 week period.

(c) **General Health Education**

Lectures on health subjects were offered to any interested youth or adult groups, and although the initial response was slow, many more bookings are now being made. Because most groups decide their programmes very much in advance, it is certain that this aspect of the Department's work will greatly increase over the next year.

(d) **Medical and Nursing Staff**

Frequent sessions were held at which the Department's medical and nursing staff were shown specialist films on a number of topics of particular interest to such staff. By this means a great deal of discussion and thought was provoked, to the advantage of both the staff concerned and the Department as a whole.

The Health Education Unit was able to make a start in planning and controlling the using of propaganda material issued to all sections of the Department and to all sections of the public.

A great deal of help was received from three "outside" sources :—

- (1) The Information Centre for Cancer Education provided a van so that the transporting of the film equipment needed for the extensive anti-smoking campaign caused no trouble. This voluntary body bought one film on the dangers of smoking and is in the process of negotiating the purchase of two others. These films will be kept by the Department and will be available for use in the anti-smoking campaign.
- (2) The Central Film Library of Wales kindly loaned the Department two films on a "block" booking, thus enabling the anti-smoking campaign to be carried on without the need to ask the Health Committee to authorise extra expenditure for buying them.
- (3) The Director of Education always gave any help and advice needed concerning the purchase of the Department's film projection apparatus. Indeed, for the first six weeks of the anti-smoking campaign, he provided apparatus on loan.

From this report you will see that already the Health Education Unit is becoming established and it is hoped that it will prove to be a most useful section of the Department.

Whilst up to now its work has been mainly in connection with the Department's anti-smoking campaign, it is becoming apparent that its scope will widen considerably as the demand for health education grows.

Anti-Smoking Clinics

The Department conducted an intensive campaign to publicise the known harmful effects of cigarette smoking on health and the number of preventable deaths which could be attributed to the habit. It was soon realised, however, that it was necessary for the Department to do more than provide facts regarding the consequences of cigarette smoking; many smokers who wished to discontinue the habit felt that they required help and guidance to do so.

Consequently it was decided to accept an offer received from the British Temperance Society to run a pilot "Five Day Plan to Stop Smoking" in Cardiff. The Department gave assistance to the Society by providing premises, clerical assistance, and the services of a health education officer. This Plan proved so successful that further series of clinics were arranged.

These clinics are now run at regular two-monthly intervals. They appear to have been at least as effective as other anti-smoking clinics in other parts of the country, even though there was no selection of smokers allowed to attend the Course.

Three series of clinics were held during 1963, and those persons attending the first two were followed up after six months. The information received from this survey showed that the long-term success rates were approximately the same whereas the rates immediately following each course were different.

It will be interesting to see if the third course, at which follow-up sessions were instituted, will prove to give better long-term results. The indications are that an improvement will be noticed, but this assumption is based only on opinions gleaned at the follow-up clinics.

A summary of the results of the two long-term surveys is shown in the following table. The numbers shown are lower than those attending the clinics, because only those persons who agreed to co-operate were followed-up. All persons who attended, even for one session, were asked to co-operate.

Stopped Smoking for	First Clinic	Second Clinic
Not at all	—	1
1 day	1	1
2-3 days	5	—
4-5 days	4	1
6-7 days	3	3
1-2 weeks	5	1
2-4 weeks	3	4
4-12 weeks	10	7
Remained a non-smoker up to the time of the survey	15 (32·6%)	9 (33·3%)
Total Persons who agreed to co-operate in survey	46	27

Notes:

- (1) Short Term success rates:—
(re persons still not smoking on the completion of a course)
- | | | |
|------------|-------|-----|
| 1st clinic | .. .. | 60% |
| 2nd clinic | .. .. | 80% |
- (2) In Mr. Cooper's report which follows, a long-term success rate of 48% is quoted. The difference between this figure and those shown in the table is caused because Mr. Cooper took as his total those persons who *completed* the courses.

I am indebted to Mr. A. Cooper, President—Welsh Mission of Seventh Day Adventists for the following report.

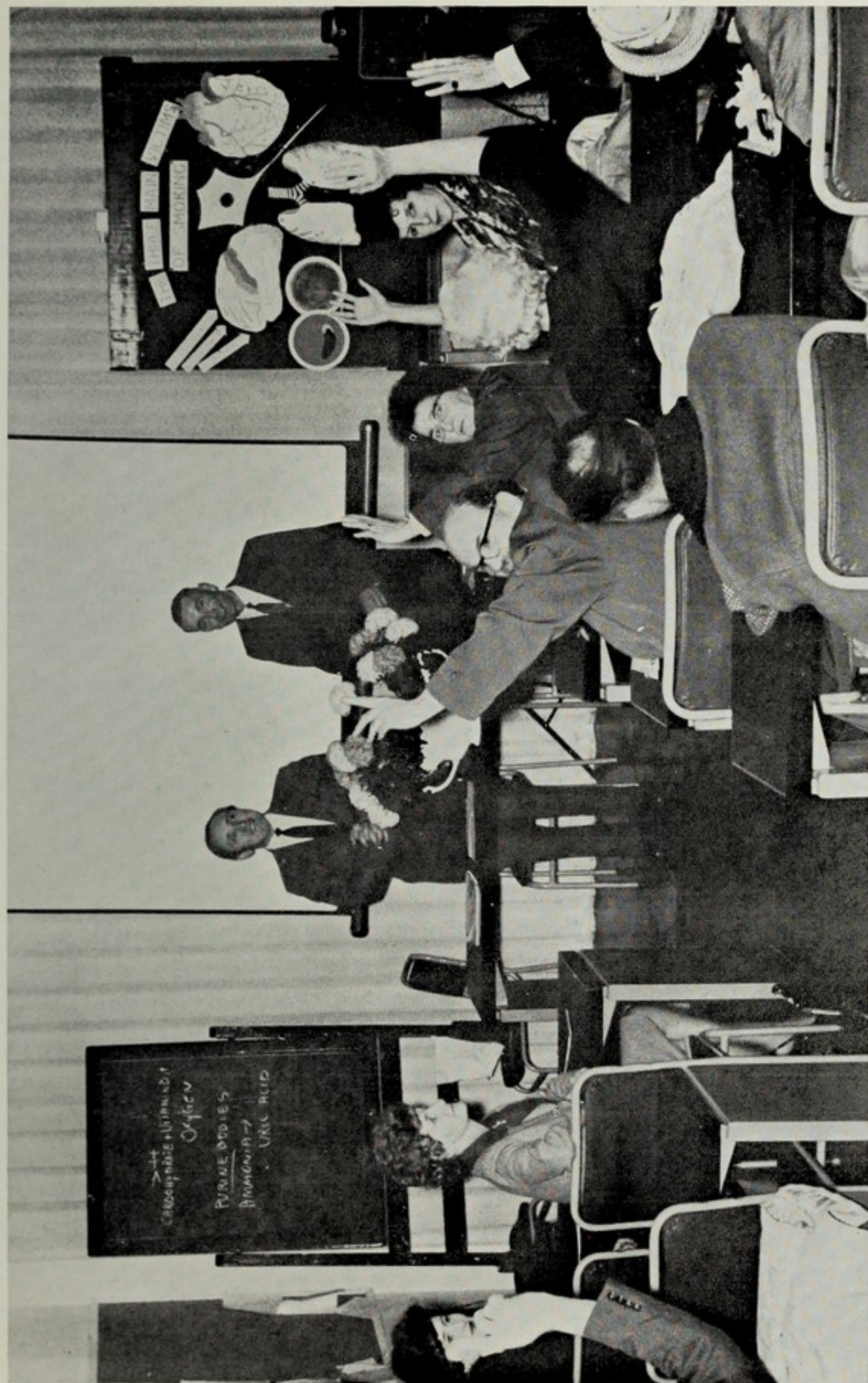
THE FIVE-DAY PLAN TO STOP SMOKING

(1). **What is the Plan?** It is a community service consisting of five consecutive sessions of Group Therapy. One of the following films showing the facts and dangers of smoking is shown each evening: "One in Twenty Thousand", "Cancer by the Carton", "Time pulls the Trigger", "Smoking and You", "Up in Smoke", and "Spotlight on Smoking". Two twenty-minute lectures are given by a clergyman-physician team experienced in psychological and medical problems arising out of smoking. Each evening the members of the class receive a loose-leaf personal control programme to follow the next day, which deals with such things as "The right exercise of the Will and the positive approach", "Rhythmic breathing and exercise", "Fluid intake and Diet", "Contacting your partner", etc. The Plan is a practical approach to personal habit control and sensible health procedures.

(2). **Why is this Plan needed?** (a) Because the habitual smoker sooner or later realises he is not smoking from choice but is caught by a vicious habit and increasingly he feels less capable of breaking away from Lady Nicotine. There is a continual chain of habitual motions which the average smoker does thirty times a day, 210 times a week, 900 times a month, 10,950 times a year. This Group Therapy Plan strengthens the will to deal with this problem.

(b) Because in addition to the strong neuromuscular habit which the smoker develops, the nicotine causes the smoker's addiction, the Five-day Plan is scientifically prepared to eliminate the addictive drug as quickly as possible from the system, thus hastening the departure of the craving.

(3). **How and when did this Plan originate?** It developed from extensive investigation among doctors, dieticians, psychologists and clergymen, and is presented as a community service by the Seventh-day Adventist Church in co-operation with the Public Health Authorities. When it began in the United States of America some years ago it spread very rapidly and is now being operated all over the American continent and is proving very successful in other continents throughout the world. In Britain the first Five-day Plan was conducted in the City of Cardiff in co-operation with the Medical Officer of Health and the Cardiff Public Health Authorities from May 27th to 31st, 1963, and was followed by two further clinics, one in July and one in November.



THE QUESTION HAS JUST BEEN PUT: "HOW MANY OF YOU ARE STILL NOT SMOKING?"



(4). **What are the results?** At the end of the Five-day Plan between 80% and 95% of those following through the course claimed that they had not smoked at all since the first night. Six months after the completion of the May and July courses, 48% of the 96 people who followed the courses through consistently have remained non-smokers and most of the others had reduced their smoking by half or more. After the November clinic we held two follow-up classes and we expect a higher percentage of long-term success. However, the results of the Five-day Plan are much greater than these bare statistics reveal. As a direct result many relatives and friends have been helped by successful patients to also give up smoking and many others have enrolled for future Group Therapy courses. Due to the enthusiastic response of those who take the Five-day Plan it is responsible for an ever widening sphere of influence in educating the public concerning the dangers of smoking.

A. H. COOPER—*President*

Welsh Mission of Seventh-day Adventists.
Organising Secretary for the Five-day Plan in Cardiff.

GROUP HEALTH EDUCATION BY HEALTH VISITORS

Miss M. F. DAVEY, S.R.N., H.V.Tutor, Cert.

Health Education of the individual and the family has always been part of the routine work of the Health Visitor. Recently there has been an increasing spread of Group Health Education—that is—formal and informal teaching of specific groups of people on matters pertaining to the prevention of disease, and the attainment and maintenance of positive health.

This work has received an impetus in Cardiff by the appointment of personnel having the duties of integrating the schemes of work already in existence, helping in the preparation of material, and giving advice on all matters relating to Health Education.

During the past year the following groups have had formal or informal teaching from the Health Visiting staff :—

- Graduate and post-graduate medical and nursing staff;
- House parents;
- Trainee House parents;
- Assistant Supervisors of Occupation Centres;
- Nursery nurse students;
- Training College of Domestic Arts' students;
- Expectant mothers;
- School children;
- Duke of Edinburgh Award Scheme entrants;
- Members of Youth Clubs;
- Members of Adult Clubs—e.g. Young Wives' Clubs, etc.

In addition there have been increasing numbers of overseas students—chiefly doctors and nurses—engaged in the Public Health Services in the underdeveloped countries—who have received individual help and tuition from members of the Health Department staff.

Nurseries and Child Minders Regulation Act, 1948

The year again brought an increasing number of requests for registration of private nurseries, but a number of applicants failed to proceed with their applications on being supplied with details of the regulations governing registration. One nursery ceased operation during the year as a result of insufficient attendances, but this occurred in an area already adequately served by other nurseries.

Number of premises registered at 31st December, 1963 ..	13
Number of children provided for	387
Number of registered Daily Minders at 31st December, 1963	8
Number of children provided for	141

Birth Control and Family Planning

The Health Committee makes a contribution to the funds of the Mothers' Advisory Clinic and is entitled to refer certain cases only on medical grounds to this clinic. The report submitted reveals that no cases were referred by the Department during 1963, but also shows that 407 new cases were seen at this clinic, and 975 cases returned for further advice and treatment.

The Family Planning Association provides two clinics each week in the Cardiff area, one being held at Gabalfa Clinic, North Road, in the afternoon, and an evening clinic is provided at Cardiff Royal Infirmary. The latter provides more spacious accommodation than was formerly available at the clinic held at St. David's Hospital. The Association's report shows that the number of new patients attending reached a record figure of 784, and that an increasing number of new patients are being referred by family doctors, a trend which was welcomed.

Session and Attendances were :—

Number of Sessions	98
Number of New Patients	784
Total number of Patients Attending ..	2,030
Total Attendances at Clinics	3,844

VII—VACCINATION AND IMMUNISATION

Vaccination against Smallpox

In my report for 1962, I stated that, as a result of the outbreak of smallpox in South Wales during the early part of that year, and the mass vaccinations associated with it, it was not possible to assess the effectiveness of the continued propaganda campaign which is aimed at maintaining or improving the vaccination rate among young children.

During 1963 the recommendation of the Minister of Health that routine primary vaccinations should be postponed until the second year of life was adopted in Cardiff, and, as a result, it is again not possible to provide any useful statistical information on the vaccination rate for infants. For nine months during 1963, few routine vaccinations were carried out because of this decision.

In 1964, it is intended to follow-up intensively those cases where the child is not brought for vaccination in spite of the parents being sent two appointments. It will be interesting to see if this personal follow-up by a Health Visitor will be the means of achieving a high rate of vaccinations.

In the following table vaccinations and re-vaccinations are shown in separate age groups and the work done by general practitioners is also indicated separately :—

						<i>By Public Health Dept.</i>	<i>By General Practitioner</i>	<i>Total</i>
PRIMARY VACCINATION								
Under 1 year	..	..	..	..	..	29	90	119
1 to 2 years	..	..	..	..	..	157	49	206
2 to 4 years	..	..	..	..	..	6	9	15
5 to 14 years	..	..	..	..	..	2	11	13
15 years and over	..	..	..	..	..	4	37	41
Totals						198	196	394
RE-VACCINATIONS								
Under 1 year	..	..	..	..	..	—	—	—
1 to 2 years	..	..	..	..	..	6	2	8
2 to 4 years	..	..	..	..	..	10	10	20
5 to 14 years	..	..	..	..	..	7	30	37
15 years and over	..	..	..	..	..	172	192	364
Totals						195	234	429

Diphtheria Immunisation

The protection of the child against diphtheria still holds a position of prime importance in health education activities in the City. As a result, a total of 4,263 children under 5 years of age received their full complement of protective inoculations against diphtheria during 1963.

Protection against diphtheria, whooping cough and tetanus in the form of a triple vaccine continued to be offered and most parents now consent to their children receiving

this vaccine. Through the work of the Health Visitor and the use of an efficient appointments system, all parents are given the opportunity of bringing their children to nearby clinics for all the necessary injections. Some children were immunised in their homes but the proportion of children immunised in this way by means of the Mobile Immunisation Unit decreased from nearly 50% in 1952 to 12.2% in 1963. This decrease was, to some extent, due to the cancellation of Mobile Unit sessions during the severe weather experienced in early 1963.

During the year, 4,500 children received primary immunisation against diphtheria. The number immunised by general practitioners was 547, which was 12.2% of the total number immunised. There were 137 refusals to participate in the immunisation scheme, another 92 children whose parents refused to complete the treatment after only one injection and a further 72 children whose parents refused to allow them to be given the 3rd injection.

The increase in the number of immunisations performed by general practitioners may be due to the fact that the Health Committee decided to offer free supplies of disposable sterile syringes and needles to local general practitioners for use when immunising. General practitioners generally took advantage of this offer which enabled them to immunise without preliminary sterilisation of syringes and needles by boiling.

Details of where children were given primary immunisation against diphtheria or against diphtheria, whooping cough and tetanus combined are given below.

	Diphtheria, Whooping Cough and Tetanus combined	Diphtheria and Tetanus	Diphtheria and Whooping Cough	Diphtheria only
Special and Infant Welfare Clinics ..	3,052	133	4	3
Mobile Unit	545	5	—	—
Schools	—	—	—	211
General Practitioners	536	10	—	1
	4,133	148	4	215

Apart from primary immunisation, the following were given booster doses :—

	Diphtheria Whooping Cough and Tetanus combined	Diphtheria & Tetanus combined	Diphtheria only
Number given booster doses:			
1 to 4 years	2,385	21	—
5 to 14 years	111	—	6,472
	2,496	21	6,472

The following table gives details of children under five years of age who were immunised each year since 1951. The figures show a further increase in the number of children being immunised at the department's clinics and a corresponding decline in the number immunised by means of the Mobile Unit.

**Primary Immunisation of Children under 5 years
1951-1963**

Year	Infant Welfare and and Special Clinics		Mobile Unit		Gen. Practitioners		Total
	Number	%	Number	%	Number	%	
1951	1,806	45.5	1,857	46.7	313	7.8	3,970
1952	1,681	44.5	1,828	48.4	266	7.1	3,775
1953	1,778	46.8	1,741	45.8	282	7.4	3,801
1954	2,866	68.3	1,012	24.2	316	7.5	4,194
1955	2,277	61.2	1,032	27.8	408	11.0	3,717
1956	2,512	61.9	1,146	28.3	400	9.8	4,058
1957	2,295	63.6	891	24.6	427	11.8	3,613
1958	2,492	60.9	1,085	26.5	524	12.6	4,101
1959	2,772	65.7	924	21.9	525	12.4	4,221
1960	2,860	67.7	792	18.8	572	13.5	4,224
1961	3,255	71.3	757	16.6	557	12.2	4,566
1962	3,097	71.1	886	20.3	376	8.6	4,359
1963	3,173	74.4	545	12.8	545	12.8	4,263

During the year it was decided to Schick Test pupils attending schools in two recently developed areas of the City, in order to obtain an indication of the degree of immunity against diphtheria among children aged 8 years to 11 years.

From the following table of the results of the series of tests it can be seen that the degree of immunity was high, and this can be regarded as proof of the importance of intensive work with regard to primary and booster immunisations at early ages.

Year of Birth	Results of Schick Tests		
	+	—	Immunity Rate
1954	4	107	96.4%
1953	19	300	94.0%
1952	28	373	93.0%
1951	4	87	95.1%
1951 to 1954	55	867	94.0%

Protection against Whooping Cough

There were 218 notifications of whooping cough, but there were no deaths from the disease during the year. The following table gives details of age and sex of persons notified:

Notifications of Whooping Cough by age and sex, 1951-1963

	Under 1 year		1-2 years		2-3 years		3-4 years		4-5 years		5-10 years		10-15 years		15 yrs and over		Total		Grand Totals
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
1951	79	65	90	86	105	92	106	123	118	99	127	138	3	7	6	23	634	633	1,267
1952	25	30	21	25	36	35	36	25	28	29	58	54	1	2	1	2	206	202	408
1953	72	45	68	54	73	67	63	71	79	99	160	206	1	4	1	7	517	533	1,070
1954	25	33	25	19	34	38	22	36	31	36	77	85	1	2	—	3	215	252	467
1955	6	13	3	6	9	12	6	11	5	10	13	16	1	—	—	1	43	69	112
1956	30	41	16	15	30	28	33	35	41	40	122	121	6	9	—	3	278	292	570
1957	34	44	19	29	25	33	33	31	36	40	123	111	8	10	1	10	279	308	587
1958	10	9	6	9	2	10	6	7	9	5	10	20	1	—	—	1	44	61	105
1959	10	6	9	7	7	2	3	4	4	7	10	17	9	2	3	1	55	46	101
1960	22	29	29	19	18	20	23	22	18	27	73	91	11	5	4	3	198	216	414
1961	5	7	6	4	9	12	7	9	6	6	12	17	1	2	3	1	49	58	107
1962	—	3	1	4	2	1	1	2	—	—	2	3	1	—	1	—	8	13	21
1963	8	26	13	15	18	25	15	11	14	14	25	26	1	3	—	4	94	124	218

The percentages of the total cases in the various age groups are shown in the following table. The figures in the last two columns are not separable into individual ages for the whole period and are therefore shown as one group.

Percentage of total cases shown in Age Groups, 1951-1963

Year	Under 1 year	1-2 years	2-3 years	3-4 years	4-5 years	5-10 years	10 years and over
	%	%	%	%	%	%	%
1951	11.3	13.1	15.5	18.0	17.3	20.9	3.9
1952	13.5	11.3	17.4	14.9	14.0	27.4	1.2
1953	10.9	11.4	13.9	12.5	16.6	34.2	0.5
1954	12.4	9.4	15.5	12.4	14.3	35.3	0.7
1955	16.9	8.0	18.8	15.2	13.4	25.9	1.8
1956	10.7	5.4	10.2	12.0	14.2	42.6	4.9
1957	13.3	8.2	10.0	10.9	13.0	39.9	4.7
1958	18.1	14.3	11.4	12.4	13.3	28.6	1.9
1959	15.8	15.8	8.9	6.9	10.9	26.7	15.0
1960	12.3	11.6	9.2	10.9	10.9	39.6	5.5
1961	11.2	9.3	19.6	14.9	11.2	27.1	6.5
1962	14.3	23.8	14.3	14.3	—	23.8	9.5
1963	15.6	12.8	19.7	11.9	12.9	23.4	3.7

Following are the details of children who have completed a primary course of pertussis vaccine (singly or in combination).

Children Protected against Whooping Cough

Year of Birth	1963	1962	1961	1960	1959	1954 to 1958	1949 to 1953	Total
No. of children	1,482	2,364	230	33	16	13	1	4,139

Late in the year the number of whooping cough notifications increased greatly and it was decided to investigate these in conjunction with previous records of immunisation against whooping cough.

Unfortunately, no definite conclusions could be made following an examination of the figures produced by the investigation. However, it is hoped that similar investigations will be made in respect of 1963 notifications, and that the results will prove to be useful as a means of assessing the degree of immunity provided by whooping cough vaccine.

Poliomyelitis Vaccination

The programme of poliomyelitis vaccination continued during the year with the emphasis on babies over the age of six months. The main feature of the year's campaign was the introduction of Sabin Oral Vaccine simultaneously with an injection of Triple Antigen. Although the method had not been in operation for more than six months, it was noticeable that by the end of 1963 more babies were completing their courses of oral poliomyelitis vaccinations and, also, more and more general practitioners were adopting the same procedure.

Evening clinics for the vaccination of adults up to forty years of age were discontinued because the response at these clinics was very disappointing.

Following are the details of persons vaccinated against poliomyelitis during the year:

Number of Persons who have received:

Year of Birth	ORAL VACCINE (SABIN)			SALK VACCINE			Total
	Complete Course of 3 doses	Reinforcing Dose after		Complete Course of 2 Injections	3rd Injection	4th Injection	
		2 Salk Injections	3 Salk Injections				
1963	1,438	—	—	—	—	—	1,438
1962	2,465	—	10	9	4	—	2,488
1961	1,131	48	265	5	23	—	1,472
1943 to 1960	650	91	167	10	26	6	950
1933 to 1942	296	15	176	1	10	—	498
Others	500	48	8	9	27	1	593
TOTAL	6,480	202	626	34	90	7	7,439

B.C.G. Vaccination

The work of B.C.G. vaccination carried out as part of the vaccination and immunisation programme is reported upon in full in the section relating to the prevention of tuberculosis.

Yellow Fever Vaccination

Arrangements for yellow fever vaccination were continued at the Vaccination Clinic, Cardiff Maternity Hospital, and 667 persons attended for vaccination. In addition, 415 seamen were vaccinated during visits to 20 ships at Cardiff and Newport Docks. A charge of ten shillings is made for every person vaccinated, which covers the cost of vaccine, any special equipment needed and the extra assistance involved.

The number of yellow fever vaccinations given to seamen on board ship more than doubled during the year, as did the actual number of vessels visited. Following discussions with local shipping interests, it has become apparent that this trend will be followed during 1964, thus mirroring the increased importance attached to iron ore imports at local ports.

Typhoid Fever

Following outbreaks of typhoid fever in Switzerland and Majorca, the Department was asked to provide protection against the disease for parties of school children travelling to Switzerland for holidays organised by the Education Department.

In addition to those inoculations, certain individual members of the public were also given the vaccine prior to their travelling to Switzerland.

Influenza Vaccination

Influenza vaccine, prepared as a water-in-oil emulsion of antigens, was offered to Public Health Inspectors and Home Helps on the Department's staff. A total of 120 doses were administered in October. The winter record of illness due to influenza within this group will be compared with that of a similar group of staff who did not wish to have the necessary injections.

VIII—MENTAL HEALTH SERVICE

During 1963 the expansion of the Community Care Service for the mentally ill and mentally subnormal continued and further steps were taken to implement the long term plans which have been made for this Service.

Administration

There were no changes during the year in the staff of Mental Welfare Officers, although at the end of the year the Mental Health Visitor who was part-time with the geriatric service became full-time mental health visitor. The administration of the section was strengthened by the appointment of Mr. T. Saunders as an Administrative Assistant.

The list of approved medical practitioners was amended by the withdrawal of Dr. D. Harrett and the addition of Dr. G. M. Bryant, Dr. S. G. Gang, Dr. D. A. Richards and Dr. E. F. Curran, the three latter all being general practitioners.

Staff Training

The two Mental Welfare Officers continued to make satisfactory progress in their respective courses at Bristol and Treforest. The practice continued of sending one female member of the Training Centres staff to the one year course for teachers of the mentally handicapped which is organised by the National Association for Mental Health. The part-time Assistant Supervisors' Course organised in conjunction with neighbouring local authorities was attended by two members of the staff of the training centres.

Training Centres for Mentally Subnormal Adults and Children

Some reorganisation of staff, both at Preswylfa and Pengam Centres, was necessary during the year. At Preswylfa, in view of the increased number of children in the Nursery, the appointment of an additional nursery assistant was necessary. At Pengam an additional Supervisor was appointed, which became necessary by the division of the adult males into two main groups and one of these groups being removed from the workshop. This appointment is in line with the policy of development required when this Centre is eventually converted into an adult training centre and workshop.

Considerable redecoration was carried out in the main house at Preswylfa. An alteration was made in the entrance hall and by the erection of a partition it was possible to provide an office for the Supervisor which is also suitable for a medical examination room when necessary. The high stone wall in front of the house was judged to be unsafe and it was demolished down to a height of three feet and a chain link fence, 6ft. high, was erected inside the wall the whole resulting in giving the Centre a more open aspect. In addition the main drive was re-surfaced with tarmac giving a greatly improved surface as part of this drive is used as a playing area for the children.

"Open Days" were held at both Centres when parents and members of the Health Committee were invited to attend and to see the Centres at work. Once again the Preswylfa Training Centre was handed over during the summer holidays for use by the Cardiff Society for Mentally Handicapped Children in providing a short stay holiday home for children and adolescents and forty-eight resided there during this period.

Community Care

The services for community care of the mentally disordered continued to develop during the year and the greatest progress was made in connection with the mentally ill. At the end of the year 472 persons suffering from mental illness were being supported in the community, an increase of 43 over the previous year. There was also an increase of 14 (706 to 720) in the number of subnormal and severely subnormal persons receiving domiciliary care. Domiciliary visits made by mental health staff during the year totalled 3,680, of which 2,705 were in connection with mental illness and 975 with subnormality. In addition to home visits, 1,766 patients or relatives visited the department for advice on personal and social problems.

The co-operation which has developed between the department and Whitchurch Psychiatric Hospital has been an important factor in the further expansion of community care services, particularly in the field of the mentally ill. Statutory and voluntary organisations have all played a considerable part in helping the mentally disordered generally and special mention must be made of the part played by the Disablement Resettlement Officers of the Ministry of Labour. By the end of the year both the male and female Disablement Resettlement Officers were attending the department weekly to interview patients. In the voluntary field a twice-weekly social club, run by the British Red Cross for the Handicapped, has been attended by an average of forty mentally disordered persons. In addition the Red Cross hold a weekly occupational therapy session in the afternoon and seven or eight persons regularly attend.

An important development in the co-operation with Whitchurch Psychiatric Hospital occurred in February when a room at the hospital was allocated for the sole use of the Mental Welfare Officers. Its purpose is to enable any patients who are being discharged from hospital, or their relatives to discuss any personal and social problems which require attention, either before they leave hospital or immediately they return home. A Mental Welfare Officer is available for this purpose each day, Monday to Friday, during normal hospital visiting hours.

In view of this and other close liaison with Whitchurch Hospital, the Hospital Management Committee appointed Mr. L. Clutterbuck as Honorary Senior Mental Health Officer and the other officers as Honorary Mental Health Officers.

Alcoholism

Community care in relation to alcoholism continued to play an increasingly important part in the work of the Mental Health Section. Group psychotherapy sessions are held twice weekly at a public health clinic. Over 100 patients have been referred after treatment in Whitchurch Hospital. Each group session is attended by a doctor from Whitchurch Hospital and a Mental Welfare Officer, and is held in the evening so that patients can attend regularly without disrupting their working hours. Group discussions take place both formally and informally and patients can also discuss their problems privately with the doctor or mental welfare officer.

It has been found that the part played by the Mental Welfare Officer in the organisation is of the utmost importance in integrating the services for the alcoholic. As well as attending the group psychotherapy sessions regular routine visits are made to the patient's home or the patients may visit the department regularly. The Mental Welfare Officer also functions as the "middle man" between the patient and the various organisations which co-operate. Representatives of the National Assistance Board and the Ministry of Labour regularly attend conferences on the rehabilitation unit and, when necessary, interviews are arranged by the Mental Welfare Officers for the alcoholic to make use of these services. All general practitioners in Cardiff have been advised that they may refer alcoholics to one of these clinics as a first step to the patient receiving hospital treatment.

Provision of Hostels

It was not possible to proceed with all the proposals for 1963 detailed in the authority's development plans, although by the end of the year, negotiations for sites for hostels at Corporation Road, Grangetown, and Trowbridge Road, Rumney, reached an advanced stage. A site for a Junior Training Centre and Hostel at Penylan Court was finally acquired and the detailed plans of the project were approved by the Welsh Board of Health. The new project will comprise a nursery, special care unit and junior training centre for approximately 120 children, and a hostel to accommodate 25 female patients with a short stay unit for 12 children in a separate wing. Building is expected to commence early in 1964.

As an alternative to the provision of hostel accommodation a house was acquired in 34 Claude Road to provide accommodation for a group of eight female patients from Whitchurch Hospital who were fit for discharge but who had no suitable homes to which

to return. The house was allocated by the Estates Department but extensive repairs and redecoration were necessary. Most of the furnishing of the house was carried out by the voluntary effort of the staff at Whitchurch Hospital although £350 was provided by this authority to purchase essential items to provide reasonable comfort for these women. The house was ready for occupation just before Christmas but it was felt that as the patients would receive better care in hospital over the holiday period the actual opening was delayed until January, 1964.

Deanol

During 1962 and 1963 and in co-operation with this department, Dr. J. Jacobs, Consultant Paediatrician, St. David's Hospital, conducted a survey on the use of the drug Deaner or Deanol. It was claimed that this drug could increase the intelligence of retarded children or at least improve their behaviour and habits. Children at both Centres took part in this survey and a high rate of parental consent to participate was obtained. A considerable amount of work was carried out by Dr. D. Harrett and Dr. M. Richards in preparing I.Q. assessment forms and the staff at both Centres also co-operated in the conduct of the survey.

It was most unfortunate however that the final result of the trial was negative and in no sphere was there any appreciable change which could be ascribed to the use of this drug.

Cases referred to Mental Welfare Officers during year ended 31st December, 1963

	Under 16 yrs.		16 yrs. & over		Total		Grand Total
	M.	F.	M.	F.	Males	Females	
ADMITTED TO HOSPITAL—							
DETAINED							
Mentally ill	—	—	37	35	37	35	72
Subnormal	—	—	—	—	—	—	—
Severely Subnormal.. ..	—	—	—	—	—	—	—
Totals	—	—	37	35	37	35	72*
ADMITTED TO HOSPITAL—							
INFORMAL							
Mentally ill	—	—	141	161	141	161	302
Subnormal	—	1	7	4	7	5	12
Severely Subnormal.. ..	2	3	2	3	4	6	10
Totals	2	4	150	168	152	172	324
TEMPORARY RESIDENTIAL CARE							
Subnormal	—	3	1	5	1	8	9
Severely Subnormal.. ..	4	7	1	3	5	10	15
Totals	4	10	2	8	6	18	24
COMMUNITY CARE							
Mentally ill	—	—	301	242	301	242	543
Subnormal	5	1	5	9	10	10	20
Severely Subnormal.. ..	13	10	1	—	14	10	24
Totals	18	11	307	251	325	262	587
NOT DEALT WITH UNDER							
MENTAL HEALTH ACT 1959							
Investigation only	18	20	245	160	263	180	443
To Sick Wards	—	—	23	12	23	12	35
Otherwise disposed	—	—	34	40	34	40	74
Totals	18	20	302	212	320	232	552
GRAND TOTAL	42	45	798	674	840	719	1559

* Mental Health Act 1959. Section 60-8, Section 29-55, Section 60-9.

Provision made for Patients' Care during 1963

	Mentally III				Psychopathic				Subnormal				Severely Subnormal				Total				Grand Total
	Under 16 yrs		16 yrs & over		Under 16 yrs		16 yrs & over		Under 16 yrs		16 yrs & over		Under 16 yrs		16 yrs & over		Under 16 yrs & over				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
1. Number of patients under Local Health Authority care at 31/12/63																					
(a) Under Guardianship																					
(b) Attending Training Centres																					
(c) Receiving home visits but not included in (a) & (b)																					
Totals																					
2. Number of patients on Waiting List for admission to hospital at 31/12/63																					
(a) In urgent need of hospital care																					
(b) Not in urgent need of hospital care																					
Totals																					
3. Number of admissions for temporary residential care during 1963																					
To N.H.S. Hospitals																					

**Number of Subnormal and Severely Subnormal Adults and Children
receiving training at Local Health Authority Training Centres on 31st
December, 1963**

	Under 16 years			Over 16 years			Total		
	M.	F.	Total	M.	F.	Total	M.	F.	Total
(A) PENGAM ROAD CENTRE ..									
(a) Nursery	6	6	12	—	—	—	6	6	12
(b) Advanced Nursery ..	8	8	16	—	—	—	8	8	16
(c) Occupation Centre ..	7	—	7	13	—	13	7	13	20
(d) Training Centre ..	—	—	—	28	24	52	28	24	52
TOTAL	21	14	35	41	24	65	49	51	100
(B) "PRESWYLFA", CLIVE ROAD CENTRE									
(a) Nursery (Group I) ..	7	5	12	—	—	—	7	5	12
(b) Nursery (Group II) ..	7	6	13	—	—	—	7	6	13
(c) Intermediate Group ..	7	5	12	—	—	—	7	5	12
(d) Junior Group ..	14	15	29	—	—	—	14	15	29
(e) Special Care Group ..	8	6	14	—	—	—	8	6	14
TOTAL	43	37	80	—	—	—	43	37	80
TOTAL (A) & (B) ..	64	51	115	41	24	65	92	88	180

SCHOOL HEALTH SERVICE 1963.

I—MEDICAL INSPECTION

The average numbers of schoolchildren and the average attendance for the year ended December, 1963 were as follows :—

	Average Number on Registers	Average Attendance
Grammar Schools	6,220	5,819
Secondary Modern Schools ..	11,110	9,849
Primary and All Age Schools ..	26,125	23,287
Special Schools	491	385
TOTAL	43,946	39,340

The following table shows the number of schoolchildren inspected at periodic medical inspections at Schools, their physical condition and the numbers of individual children found to require treatment (excluding dental diseases and infestation with vermin) during 1963 :—

Age Groups inspected (By year of Birth)	No. of Pupils Inspected	PHYSICAL CONDITION OF PUPILS INSPECTED				Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory		Unsatisfactory		For defective vision (excluding squint) (7)	For any other condition (8)	Total Individual pupils (9)
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2 (6)			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1959 and later	337	337	100	—	—	—	12	11
1958	30	30	100	—	—	—	3	3
1957	3,659	3,653	99·8	6	·2	350	898	1,050
1956	767	767	100	—	—	107	184	242
1955	38	38	100	—	—	7	10	15
1954	48	48	100	—	—	6	7	10
1953	48	48	100	—	—	4	8	12
1952	65	64	98·4	1	·6	7	6	12
1951	2,093	2,091	99·9	2	·1	139	359	448
1950	1,054	1,054	100	—	—	57	169	203
1949	2,256	2,256	100	—	—	163	315	417
1948 and earlier	1,546	1,546	100	—	—	54	96	143
TOTAL	11,941	11,932	99·9	9	·1	894	2,067	2,566

The numbers of schoolchildren specially inspected and the numbers of re-inspections undertaken were as follows :—

Special Inspection	{ At School At School Clinic	Boys	Girls	Total
		227 1,361	171 1,218	398 1,978
TOTAL ..		1,588	1,389	2,977
Re-inspections	{ At School At School Clinic	375 503	263 496	638 1,582
		TOTAL		878 759 1,637

Defective vision, squint and other eye defects formed one third of the total defects requiring treatment.

The defects found by the medical inspection of 11,941 children at the periodic medical inspections were as follows :—

DISEASE OR DEFECT	PERIODIC INSPECTIONS							
	ENTRANTS		LEAVERS		OTHERS		TOTAL— ALL GROUPS	
	Requir- ing Treat- ment	Requir- ing Observa- tion	Requir- ing Treat- ment	Requir- ing Observa- tion	Requir- ing Treat- ment	Requir- ing Observa- tion	Requir- ing Treat- ment	Requir- ing Observa- tion
SKIN	80	51	57	—	81	30	218	81
EYES:—								
Vision	459	238	213	—	222	94	894	332
Squint	52	13	1	—	14	15	67	28
Other	17	15	12	—	23	14	52	29
EARS:—								
Hearing	55	34	24	—	18	12	97	46
Otitis Media	31	19	5	—	7	9	43	28
Other	8	8	2	—	2	4	12	12
NOSE OR THROAT ..	218	128	50	—	88	77	356	205
SPEECH	69	77	6	—	11	46	86	123
LYMPHATIC GLANDS ..	27	64	1	—	4	34	32	98
HEART & CIRCULATION ..	34	60	18	—	27	62	79	122
LUNGS	59	77	6	—	22	47	87	124
DEVELOPMENTAL:—								
Hernia	9	15	1	—	4	—	14	15
Other	29	90	17	—	37	51	83	141
ORTHOPAEDIC:—								
Posture	8	15	22	—	15	26	45	41
Flat Foot	138	67	44	—	57	53	239	120
Other	81	100	62	—	70	77	213	177
NERVOUS SYSTEM:—								
Epilepsy	4	8	2	—	2	9	8	17
Other	21	12	3	—	17	6	41	18
PSYCHOLOGICAL:—								
Development	10	8	5	—	16	77	31	85
Stability	61	35	—	—	9	24	70	59
ABDOMEN	9	14	6	—	13	16	28	30
OTHER DEFECTS AND DISEASES	62	31	53	—	51	31	166	62

II—FINDINGS OF MEDICAL INSPECTION

The defects found by the medical inspection of 4,614 children at special inspections and re-inspections were as follows :—

Defect Code No. (1)	DEFECT OR DISEASE (2)	SPECIAL INSPECTION	
		Requiring Treatment (3)	Requiring Observation (4)
4	SKIN:—		
	Ringworm—Scalp ..	—	—
	Body ..	3	—
	Scabies	—	—
	Impetigo	—	—
	Other	2,062	6
5	EYES:—		
	(a) Vision	32	3
	(b) Squint	9	10
	(c) Other	3	—
6	EARS:—		
	(a) Hearing	—	1
	(b) Otitis Media ..	1	—
	(c) Other	—	—
7	NOSE AND THROAT ..	14	23
8	SPEECH	3	39
9	LYMPHATIC GLANDS ..	—	8
10	HEART	—	—
11	LUNGS	1	11
12	DEVELOPMENTAL:—		
	(a) Hernia	—	—
	(b) Other	—	23
13	ORTHOPAEDIC:—		
	(a) Posture	3	6
	(b) Feet	2	13
	(c) Other	6	18
14	NERVOUS SYSTEM:—		
	(a) Epilepsy	—	7
	(b) Other	1	—
15	PSYCHOLOGICAL:—		
	(a) Development ..	6	70
	(b) Stability	—	6
16	ABDOMEN	3	4
17	OTHER	146	166

Selective Examination as an Alternative to Periodic Medical Inspection— A Pilot Survey

by Dr. S. M. HARRISON, B.Sc., M.B., B.Ch., D.P.H., D.C.H., D.R.C.O.G.

Since the inception of the National Health Service the traditional method of conducting the School Health Service has aroused considerable criticism as being a wasteful way of deploying medical manpower.

While the routine medical inspection of all children on first entering school is generally believed to be of the utmost importance, and the routine medical inspection of school leavers has an importance of its own, as an examination for fitness for entry into industry, the intermediate medical examination has no such significance. Scrutiny of an analysis of defects first recognised at the intermediate inspection has shown them to be mainly visual, other physical defects having already been brought to notice by the entrants' inspection, by the family doctor, and the hospital consultant.

The Minister is empowered (by the School Health Services—Handicapped Pupils Regulations 1953, with modifications in 1959) to approve fewer than three routine medical inspections when a Local Education Authority wishes to put forward an alternative scheme. The intermediate inspection can be seen to be the one most easily dispensed with in the devising of such a scheme.

A pilot survey was commenced in one area of Cardiff (Splott), January, 1963, dispensing with the intermediate inspection and replacing it with a more selective scheme of examination of children referred by teachers, parents, and school nurses and those children selected by the Medical Officer at the routine entrants' inspection as needing further medical supervision during their school career.

Splott was considered to be a fruitful area for commencing a scheme of this type, containing as it does, a relatively large number of families with a low standard of maternal care. The total school population of the area in January 1963 was 2,367. 739 children were attending the four infant schools, 1,012 children were attending the three junior schools, and 616 children were attending the two County Secondary schools.

One medical officer was appointed to carry out all the routine entrants' and leavers' medical inspections and was given a further twenty-five sessions, in the first twelve months, in which to conduct selective examinations.

Schools were visited once or twice each term, by appointment. Co-operation from head teachers was, on the whole, good, although some took much greater advantage of the scheme than others. All seemed to appreciate the continuity of care provided by having one medical officer attached to their school on a semi-permanent basis. This continuity also made the work of the medical officer more interesting and rewarding. As time went on the referral of pupils became much more informal and quite a few pupils would arrive at the clinic, near the end of a session, preceded by a 'phone call.

By the end of the first year some 321 children had been seen and selectively examined. It was found that 24 of the children referred by the teachers were already receiving treatment from their own doctors, hospital consultants, or at school clinics.

A disappointing number of children were found whose defects had been recognised previously and for whom treatment had been arranged, but whose parents had failed to keep appointments at clinic or hospital. This lack of parental co-operation was, in fact, one of the biggest problems in the administration of the survey.

The interested co-operation of some of the head teachers did, however, improve the attendance rate, together with home visits for some of the children. Those who would not attend clinic could be, and were, kept under observation in school.

One criticism of the scheme (offered by the School Medical Officer and Educational Psychologist of Bournemouth County Borough) is that early deviations from normal in the child's mental health are too easily missed. I have found that this is one aspect of the child's health which receives greater stress as a result of discussions with the head teachers.

Of the nine schools involved in the survey two only had a shared medical inspection room. In the other seven schools medical inspections were carried out, at some inconvenience to the teaching staff, under very inadequate conditions. Many children had to be seen, for a second time, in the clinic where adequate facilities for examination were available.

A table of analysis of the defects for which children were examined is included. It shows the wide range of defects for which children were referred to the Medical Officer by teachers, parents, and nursing staff and underlines the effect which so many conditions, other than purely perceptive defects, may have on a child's social and educational progress in school.

Total number of children seen and examined	321
Number referred by parent, teacher and school nurse ..	166
Number selected by Medical Officer at routine entrants' inspection	151
Children already attending clinic, hospital, or G.P. for treatment of defect observed	24
Number of referrals (a) to clinic	65
(b) to consultant	4
Number of children for observation in school ..	152

DEFECT	PUPILS REFERRED BY PARENTS, TEACHERS AND SCHOOL NURSES.		PUPILS SELECTED DURING ENTRANTS' ROUTINE MEDICAL INSPECTION		TOTAL
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
3 Teeth	1	0	1	1	3
4 Skin	2	7	2	1	12
5 Vision	10	21	34	28	93
6 { Ears					
(a) hearing	3	6	7	3	19
(b) otitis media	1	3	6	2	12
7 { Nose	6	2	3	0	11
Throat	3	6	0	2	11
8 Speech	21	4	5	0	30
10 Heart	0	4	10	8	22
11 Lungs	4	2	3	5	14
12 { Hernia	0	0	0	2	2
Undescended testes	0	0	22	0	22
13 Orthopaedic	6	2	11	8	27
14 Cerebral Palsy	1	1	1	0	3
15 Emotional Disturbance	1	2	5	0	8
Poor general condition	9	8	0	0	17

Miscellaneous=28

18 Pupils were seen and examined as there was no record of a routine entrants' inspection on their form 10.M.

A scheme of this type has recently been abandoned as unsuccessful in Staffordshire where 8,300 children in 35 schools were involved. I feel that in this case possibly its application was too general. It has greatest value in areas where there is a high concentration of problem families and other families with lower than average standards of maternal care.

In Cardiff I would suggest a limited extension of the scheme to include 2 other areas which are comparable to the one in which it is already being carried out—namely Ely and Docks.

III—"FOLLOWING-UP" AND THE WORK OF HEALTH VISITORS

A summary of the work of the health visitors in connection with home visiting is given in the following table :—

Visits for	Total
Defects of Vision	247
Defects of teeth	154
Defects of ear, nose and throat ..	112
Other defects and diseases ..	807
Scabies	36
Nursery School Pupils	242
TOTAL	1,598

The following is a summary of work done by the visitors in connection with uncleanness during the year :—

Number of :—

Examinations of children for uncleanness	100,943
Children found with vermin and/or nits	2,977
Children found to be free from vermin and nits on re-examination	1,115
Children for whom cleansing notices issued	2,828
Children for whom cleansing orders issued	149

Health Visitors paid 661 routine and 300 special visits to schools to inspect and follow-up children reported to require treatment.

Vision Testing of Pupils in Junior Schools

In addition to periodic medical inspections, arrangements have been made for the annual vision testing of pupils who are in their last two years in the Junior Schools.

The number of children tested was 6,621 and the number found to have a vision defect requiring further investigation at the Clinic was 503.

Silver Jubilee Camp School, Porthcawl.—Each child is inspected by a Health Visitor before travelling to the Camp, mainly to reduce the risk of infection and the spread of verminous conditions but also to prevent any child attending who may have become unfit since selection. Thirty-two visits were paid to schools during the year to undertake such inspections.

IV—TREATMENT

Particulars of the treatment of minor ailments, defective vision and squint, external eye diseases, defects of ear, nose and throat, of orthopaedic and postural defects, dental defects, etc., are given in the following tables :—

(a) *Minor Ailments*

DISEASE OR DEFECT	Number of Defects treated or under treatment during the year under the Authority's Scheme	Total number of attendances at Clinics
SKIN:—		
Ringworm—Scalp	—	
Body	3	
Scabies	96	
Impetigo	80	
Other Skin Diseases	2,064	
MINOR EYE DEFECTS	7	
MINOR EAR DEFECTS	156	
MISCELLANEOUS (<i>e.g.</i> , minor injuries, bruises, sores, chilblains, etc.)	629	
TOTAL	3,035	5,572

(b) *Defective Vision and Squint*

Particulars of the work of the Ophthalmic Clinics during the year are given below :—

Number of children examined	5,763
Errors of Refraction	2,599
*Spectacles prescribed	2,430
Other defects or diseases treated	149
Referred to Orthoptic Clinic	192
Attendances at Clinics	8,354

*There was no change in the prescription in 112 refractions.

Spectacles are supplied through the Supplementary Ophthalmic Service of the National Health Service. The total number of spectacles provided by this Service for schoolchildren during the year was 1,472, which is a further reduction as compared with the previous year, which is no doubt due to parents purchasing other types of spectacles at their own cost.

Orthoptic Clinic

The number of Orthoptists employed as on 31st December, 1963, was equivalent to $1\frac{1}{2}$, and a summary of their work carried out during the year is given below :—

	1963	1962
NEW ADMISSIONS TO CLINIC	251	178
DISCHARGES:—		
Binocular Single Vision	66	90
Cosmetically Straight, but with no Binocular Single Vision ..	88	63
Improved but with Residual Cosmetic or Visual Defect	20	50
Failed to Attend	88	65
Transferred elsewhere	7	10
Intractable Amblyopia	12	5
Unsuitable for Treatment	3	13
TOTAL DISCHARGES	284	291
On Waiting List for Operation	23	14
Operations Performed	89	159
Patients on Treatment, under observation, occlusion and including operation waiting list	738	771
Reports only	11	42
Total Attendances	3,955	4,361
Appointments not kept	1,293 27%	1,399 24%

The Orthoptic Clinic, which is now at the Central School Clinic, will be transferred to the Cardiff Royal Infirmary in the New Year.

There are four Orthoptists at present working for different authorities in the Cardiff area and this will be the first step in bringing them together into one large and more efficient department.

When this move has been completed and the new Department is running efficiently it is proposed to set up a Training School for Orthoptists in the new premises.

(c) Defects of Ear, Nose and Throat

	EAR	NOSE AND THROAT	
		Tonsils and Adenoids	Other Defects
Received Operative Treatment ..	25	640	66
Received Treatment in Hospital	114		
Received other forms of treatment	51	54	
Total number of children examined	460	1,687	
Attendances at Clinics	735	2,497	

Waiting list for Operative Treatment at 31st December, 1963

Tonsils and Adenoids	147
Other ear, nose and throat conditions	4
TOTAL	151

Hearing aids were provided for 4 children during 1963 and 33 children previously equipped, were also using aids.

(d) Orthopaedic and Postural Defects

Children requiring treatment for Orthopaedic and postural defects are referred to the Orthopaedic Clinic which is now maintained by the Cardiff Hospital Management Committee at specially adapted premises in an annexe to the Children's E.N.T. Hospital at Ely.

Details of the treatment provided were included in previous reports when this Clinic was part of the administration of the School Health Service. It can be reported, however, that 1,300 pupils were examined and treated at the Clinic during the year.

(e) Heart Disease and Rheumatism

The following is a record of the supervisory work carried out during the year :—

Cases remaining under supervision at the beginning of the year	39
New cases attending	—
Cases discharged from supervision on leaving school ..	14

Other cases which ceased to be supervised :—

Discharged not sufferin from rheumatism	1
Transferred to other clinics	—
Cease to attend	—

Cases remaining under supervision at the end of year	24
Total attendance at routine rheumatism clinics	33
Routine clinic sessions	2
Average attendance at routine clinic sessions	16.5
Average number of new cases at routine clinic sessions ..	—

The following table shows the condition of the heart in the 14 cases that ceased to remain under the supervision on leaving school :—

	<i>On</i> <i>Ascertainment</i>	<i>On</i> <i>Discharge</i>
Normal	3	10
Minor heart manifestations	11	4
Major heart manifestations	—	—

One case showed slight Congenital Defect? Pulmonary Stenosis? Ventriculo septal defect.

There were no major classifications.

(f) Radiography

The children referred for radiography were X-rayed at the Orthopaedic Clinic which is now administered by the Cardiff Hospital Management Committee.

(g) Special Clinic for girls at Puberty

Dr. E. M. Davies has undertaken special clinics for girls sent to her from schools and clinics for advice and treatment on complaints of special significance at this age period.

(h) Cleansing

(a) Cleansing of children with unclean heads.—It will be noted that the report of the work of the Health Visitors refers to the cleansing inspections which are undertaken each term in schools. Continual infestation of certain pupils is common in a number of families

and it is also noted that certain schools show a considerably higher incidence than others. Every effort is made to ensure that children whose heads are unclean are cleansed at home by the parents. A small proportion for various reasons remain unclean in spite of advice given to parents and such children are sent for cleansing at the Treatment Centre. If this opportunity is not taken by the parents the Authority may proceed against them in the Court under the provisions of the Education Act of 1944. During the year 80 children attended the school clinic or centre for such cleansing, but it was not necessary to seek any further powers to secure the cleansing of any child.

(b) *Treatment of Scabies.*—Whilst scabies is no longer a problem of the same dimensions as was encountered during the war years, measures are necessary to secure effective treatment of the smaller number of persons who become infected. The department's Treatment Centre, which is staffed as required by clinic helpers, is available for the treatment of adults and children.

A summary of the work of the centre during the year is as follows :—

Number of cases treated :—

Vermin and nits in head	..	..	60
Impetigo of head, face and hands			20
Cleansing Baths only	..	..	43
Scabies Baths	..	..	197
TOTAL	..		320

Attendances for Scabies :—

Schoolchildren	..	..	..	224
Children under school age	..	..		54
Adults	..	..	..	179
TOTAL	..			457

V—SCHOOL DENTAL SERVICE

REPORT OF H. V. NEWCOMBE, L.D.S., R.C.S., Principal School Dental Officer

Staff

The table shown below gives the number of dental officers employed in the Authority's School and M. & C.W. dental services, and the strength in terms of full-time officers at the end of the current year, together with the corresponding figures for 1962.

	As at 31st Dec., 1963	As at 31st Dec., 1962
Full-time permanent officers	3	4
Full-time temporary officers	2	3
Half-time temporary officers	1	1
Part-time temporary officers	5	1
Actual strength in terms of full-time officers	7.5	8.2

Changes in dental officer personnel were more marked than in the previous year. Towards the end of the first quarter we lost the services of one full-time woman dental officer; this, however, was expected and reference to her impending departure was made in my report of last year. Within a month we sustained another severe blow when Mr. Howitt finally retired after having served the department faithfully and diligently for a matter of twenty-six years. During the year four part-time dental officers—aggregating the equivalent of two full-time officers—joined the staff and two part-time officers left, one to enter private practice, the other for domestic reasons. In November a part-time officer was appointed but, unfortunately, because of illness requiring a major operation, he was unable to take up the post; however, it is expected that he will be fit enough to take up his new duties early in the New Year.

Because of the less favourable staff situation, the number of hours devoted to treatment was somewhat below that for the previous year and, consequently, the overall volume of work performed was correspondingly reduced.

Figures shown below in parentheses are those for 1962; treatment figures represent the number per cent of cases treated.

Inspection.—There was a moderate fall in the overall number of children inspected in the current year below that for the preceding one; a breakdown of these figures however shows that whereas the number of periodic inspections rose by 1660, those representing 'specials' fell by 2227.

Relative to the number of pupils inspected, the number requiring treatment rose by approximately 1%. Of those offered treatment 71.2% (77.6%) were actually treated.

Treatment.—Figures representing the overall number of fillings to patients treated were 196 (169) and for teeth filled the corresponding figures were 171 (154), whilst in the case of extractions, they were 141 (135). The ratio of teeth filled to teeth extracted was 1.41 (1.35).

Orthodontics.—The number of pupils treated with appliances increased by 25 over that for 1962.

Dentures.—In this category it is pleasing to report a fall of 22 in the number of pupils supplied with artificial dentures.

Attendance Rate.—This fell by .9%.

School Tuck Shops.—In January 1960, the Director of Education reported the sale of biscuits at breaktime in four out of nine schools—taken at random—in Cardiff. On that occasion, apart from discussing the question, no further action appears to have been taken in the matter.

At the commencement of the current year following correspondence from a parent concerned with the "danger of dental caries where biscuits and sweets were sold to pupils during mid-morning and lunch-hour breaks", the whole question was re-opened and a detailed report by the Director (as a result of a questionnaire to all head teachers) showed that eighty-four schools were selling biscuits, sweet foods etc., and that no such sales were made in eighty-five schools. It was also reported that since the compilation of the questionnaire, the Registrar of the General Dental Council had written to the Authority, "expressing the Council's concern about the number of schools with tuck-shops which provide only foods such as biscuits, buns and sweets which are harmful to teeth", and submitted a list giving the wholesale price, retail price and approximate profit of foods recommended as an alternative.

A list of the recommended foods has been supplied to each of the Heads of the eighty-four schools where biscuits and sweet foods were sold, but Head Teachers have been given discretion as to what action they should take in the matter. A further report giving the number of schools where discretion has been exercised in favour of accepting the recommended alternative foods for sale in tuck shops would seem to be indicated.

Supervision of Dental Auxiliaries. Notification from the Registrar of the General Dental Council has been received giving the present views of the Experimental Scheme Committee of the Council, which are summarised as follows :—

- (a) A dental auxiliary carrying out clinical treatment of patients must work under the direction of a registered dentist who has examined the patient and prescribed, preferably in writing, the treatment to be given to the patient by the auxiliary;
- (b) while the treatment is being given, a registered dentist must be within call, in person, and not by telephone, so that he may be able to deal with any difficulties as they arise;
- (c) when the course of treatment prescribed has been completed, a registered dentist should examine the patient before he is discharged;
- (d) It is not essential that the registered dentists mentioned in (a), (b) and (c) above should be the same person. Where it is administratively expedient, the treatment may be prescribed by one dental officer, and supervised by another (or, if several visits are involved, by several dental officers) and the patient may be inspected and discharged by yet another dental officer.

On those occasions when a dental officer is not available for supervision auxiliaries should be encouraged to use this time usefully (a) in carrying out the kinds of work which dental hygienists are permitted to do (scaling, cleaning and polishing, etc.) (b) in dental health education work, by giving talks to children and parents; or by preparing teaching material.

The Experimental Scheme. On the 9th May 1963, the Chairman of the Experimental Scheme Committee, Mr. P. Cocker, visited Cardiff in the course of his tour of inspection of those local authorities—there are sixty at present—who are employers of dental auxiliaries.

Following a very useful discussion with the Chairman on the question of employing auxiliaries in dental radiographic work, it was decided to make part-time use of the services of our own dental auxiliary in this capacity thus releasing a dental officer, previously engaged in this way, to carry out the more specialised work for which he is trained.

In December the General Dental Council produced its interim report on the progress of the Experimental Scheme as required under Section 43 of the Dentists Act 1957.

in view of the short time since the inauguration of the Scheme "no significant opinion on the value of the dental auxiliaries to the Community could be formed until some forty to fifty girls had been in employment for at least a year and that a valid judgement could be formed only when they had been in employment for a longer period".

Emergency Dental Service. Good relations and co-operation between the department and outside bodies concerned with the health and welfare of the patient is always something to be desired and this is well exemplified in the arrangement whereby one of our clinics, in particular that at Gabalfa, has been made available to a recently formed group of local general dental practitioners calling themselves "Cardiff Approach" whose main aim is to provide an emergency service to "those persons unable to obtain urgent dental treatment at the times that it is not ordinarily available through normal channels".

The dentists concerned provide their services and materials free of charge, expenses incurred by the clinic being paid equally by the members participating in the scheme. At the opening of the Seventeenth Session of the General Dental Council the President, Sir Wilfred Fish, C.B.E., referred to the Cardiff scheme which appeared to him to be "a praiseworthy concept which deserves to meet with success, and would, he hoped, be adopted in other Centres of population".

Statistics. The full statistical table of the school dental work carried out during 1963 is as follows :—

(1) Number of Children inspected by the Dentists :—

(a) Periodic Age-groups	..	..	..	..	13,779
(b) Specials	..	..	..	..	4,396
TOTAL					18,175

(2) Requiring Treatment 13,494

(3) Offered Treatment 10,909

(4) Actually treated 7,771

(5) Attendances made by children for treatment 20,286

(6) Half-days devoted to :—

Inspection	..	..	..	..	..	70
Treatment	..	..	..	..	..	2,750
TOTAL						2,820

A further 44 sessions for treatment were carried out by the Consultants Orthodontists.

(7) Fillings :

Permanent Teeth	..	..	..	..	..	13,958
Temporary Teeth	..	..	..	..	..	1,297
TOTAL						15,255

(8) Teeth Filled :

Permanent Teeth	..	..	..	..	..	12,109	
Temporary Teeth	..	..	..	..	..	1,236	
					TOTAL	—	13,345

(9) Extractions :

Permanent Teeth	..	..	..	..	..	2,409	
Temporary Teeth	..	..	..	..	..	6,188	
For Regulation purposes (permanent)	..	..	..	..	..	283	
For Regulation purposes (temporary)	..	..	..	..	..	521	
					TOTAL	—	9,401

(10 Administrations of general anaesthetics for extractions .. 4,615

(11) Other operations—Permanent Teeth :— ..

(a)	Scalings	..	..	..	..	218	
(b)	Cleanings		..	..	..	931	
(c)	Dressings	..	..	..	..	1,446	
(d)	Root Fillings		..	..	..	69	
(e)	X-rays	..	..	..	..	127	
(f)	Crowns	..	..	..	..	9	
(g)	Gum Treatments	..		..	..	301	
				TOTAL	..	————	3,101
	Temporary Teeth	..	..	..	..		447

(12) Number of pupils supplied with artificial dentures .. 82

(13) Orthodontics :—

					<i>By Consultant Orthodontist</i>	<i>By Dental Officers</i>
(a) Cases commenced during the year	..	..	..	..	15	112
(b) Cases carried forward from previous year	..	..	..	..	30	60
(c) Cases completed during the year	..	..	..	..	12	52
(d) Cases discontinued during the year	..	..	..	..	—	51
(e) Pupils treated with appliances	..	..	..	..	45	172
(f) Removal appliances fitted	..	..	..	..	29	136
(g) Fixed appliances fitted	..	..	..	..	—	1
(h) Total attendances	..	..	..	..	500	1068
(i) Referred back to Dental Officer with advice	..	..	..	..	39	—
(j) Referred for X-ray	..	..	..	..	47	—
(k) Under observation only	..	..	..	..	1	—
(l) Partly treated and referred back to Dental Officer	..	..	..	..	2	—
(m) Awaiting Inspection	..	..	..	..	28	—

The School Dental work carried out during 1963 by the Dental Auxiliary, under the direction of a Dental Officer, is as follows:—

(1) Number of children actually treated .. 687

(2) Number of attendances made by pupils for treatment .. 1,970

(3) Half days devoted to :—

(i)	Treatment	..	..	..	..	..	418	
(ii)	Dental Health Education	..	..	..	..	..	38	
	TOTAL	..					—	456

(4) Fillings :

(i)	Permanent teeth	..	..	..	..	..	2,096	
(ii)	Temporary Teeth	..	..	..	..	..	387	
	TOTAL	..					—	2,483

(5) Number of teeth filled :

(i)	Permanent teeth	..	..	..	..	..	1,341	
(ii)	Temporary teeth	..	..	..	..	..	340	
	TOTAL	..					—	1,681

(6) Extractions :

(i)	Permanent teeth	..	..	..	..	..	—
(ii)	Temporary Teeth	..	..	..	..	..	119	
	TOTAL	..					—	119

(7) Other operations— (i) Permanent Teeth

(a)	Scaling	..	..	..	..	..	12	
(b)	Cleaning	..	..	..	..	..	245	
(c)	Dressing	..	..	..	..	..	85	
(d)	Root filling..	..	..	..	..	..	—
(e)	X-ray	..	..	..	..	..	386	
(f)	Crowns	..	..	..	..	..	—
(g)	Gum treatment	..	..	..	..	..	21	
	TOTAL	..					—	749

(ii) Temporary Teeth

(a)	Silver Nitrate	..	..	..	..	..	32	
(b)	Cleaning	..	..	..	..	..	168	
(c)	Dressing	..	..	..	..	..	47	
	TOTAL	..					—	247

4,072 appointments were made and 2,083 appointments were not kept.

VI—HANDICAPPED PUPILS

The numbers of handicapped pupils known to the Department at 31st December, 1963 are shown in the following table.

BLIND CHILDREN				
At Residential Special Schools			4	
At Independent Schools	..	..	—
	TOTAL	..	—	4
PARTIALLY SIGHTED CHILDREN				
At Special Classes for the Partially Sighted			5	
At Residential Schools	..	..	2	
	TOTAL	..	—	7
DEAF CHILDREN				
At Residential Schools	..	..	8	
At Independent Schools	..	..	2	
At Special Day School	..	..	3	
	TOTAL	..	—	13
PARTIAL HEARING CHILDREN				
At Residential Schools	..	..	1	
At Independent School (Residential)			2	
At Special Class	..	..	4	
At Maintained Schools (day)		..	24	
	TOTAL	..	—	31
CHILDREN SUFFERING FROM EPILEPSY				
At Residential Schools	..	..	2	
	TOTAL	..	—	2
DELICATE CHILDREN (Children who by reason of impaired physical condition cannot without risk to their health be educated under the normal regime of an ordinary school)				
At Special Day Schools	..	..	73	
At no school	..	..	2*	
	TOTAL	..	—	75
*Receive Home Tuition				
PHYSICALLY HANDICAPPED CHILDREN				
At Residential Special Schools	..		4	
At Special Day Schools	..	..	36	
At Independent Residential School	..		1	
At no school	..	..	3*	
	TOTAL			44
*Receive Home Tuition				
EDUCATIONALLY SUB-NORMAL CHILDREN				
At Special Day Schools	..	..	415	
At Independent Residential School	..		1	
At Maintained Schools awaiting admission to Special Schools	..	..	26	
	TOAL	..	—	442

MALADJUSTED CHILDREN

At Independent Schools	2
At Non-Maintained Schools—in Residential Hostels	2
At Residential Hostels	15
Awaiting admission to Hostels or Special Schools	2
<hr/>	
TOTAL ..	21

During the year 177 children who had been reported as being handicapped pupils' were specially medically examined, with the following results :—

Educationally sub-normal and suitable for education in a special school (day)	50
Educationally sub-normal and suitable for education at Field House Observation Unit	13
Educationally sub-normal—to have special educational treatment in an ordinary school	33*
Decision deferred for further special medical examination ..	4
Children recommended for admission to ordinary school when they attain the age of 5 years	15
Educationally sub-normal and require supervision and guidance after leaving school	9
Pupils of Gabalfa Special School for educationally sub-normal children :	
(a) Granted permission to leave before attaining the age of 16 years	4
(b) Recommended to return to ordinary school	2
Pupils of Woodlands Special School for educationally sub-normal children :	
(a) Not granted permission to leave before attaining the age of 16 years	2
(b) Recommended to return to ordinary school	3
Children transferred to the care of the Local Health Authority ..	18
Deaf—for admission to a day or residential special school ..	5
Physically handicapped :	
Recommended for admission to a special day school ..	6
Maladjusted—for admission to a residential Hostel or Special School	10
Epileptic—for admission to a residential special school	1
Recommended for Home Teaching	2

Eighteen children were notified to the Local Authority during 1963 in accordance with Section 75 of the Education Act, 1944.

*12 of these children were examined and recommended for special educational treatment in ordinary school by Educational Psychologist. Special Medical Examination was not considered necessary in these cases.

Greenhill Open-air School. In addition to the above examinations, 26 children were found to be delicate pupils and recommended for admission to the Greenhill Open-air School. Twenty-six children were admitted to the school, and 20 were discharged.

Cerebral Palsy Unit

Physiotherapists administered a total of 2,285 treatments during the year, of which 1,907 were treatments at the Cerebral Palsy Unit.

Spastics are treated daily at the Unit. Open-Air School pupils receive treatment from Mrs. M. J. Vickery, the School Nurse, who, after instruction, now does the asthma cases for these pupils. Other treatments are administered as required.

The following table shows the number of physiotherapy treatments administered during the year :—

MONTH	CEREBRAL PALSY UNIT	GREENHILL OPEN AIR SCHOOL
	Spastics	Misc. Cases
January ..	166	9
February ..	203	32
March ..	155	41
April ..	121	31
May ..	210	50
June ..	147	37
July ..	134	31
August ..	59	4
September ..	213	34
October ..	197	36
November ..	184	50
December ..	118	23
	1,907	378

Total treatments administered—2,285.

Speech Therapy

Miss B. M. R. MORRIS, Senior Speech Therapist writes :—

At the commencement of 1963, the Speech Therapy Department had four full time therapists, Miss M. Morris, Miss E. Harrison, Miss M. Hadfield and Mrs. J. Matharu, and two working on a sessional basis, Mrs. L. Clarke and Mrs. M. Harris.

The sessions worked were 47, comprising 30 in clinics or normal schools, 13 in special schools and four in visiting or administration.

At the end of May, Mrs. J. Matharu left us to take up a new appointment at the Cardiff Royal Infirmary. She had been on the staff since September, 1957, and done much valuable work, particularly in the diagnosis and assessment of children thought to be suffering from aphasia.

Mrs. M. Harris also left us in May. Unfortunately no one has been found to replace these two therapists. There are now only 33 sessions being worked, comprising 26 in clinics or normal schools, four in special schools, and three in visiting or administration.

The only special schools receiving speech therapy are the Spastic Unit (two sessions) Gabalfa Special (one session) and Riverbank (one session). There are children waiting to receive speech therapy at nearly every clinic and school in the City.

CHILD GUIDANCE CLINIC

REPORT OF

ROBERT ROBERTSON, M.A., B.Ed., Educational Psychologist in Charge

Dr. GAYNOR LACEY, M.B., B.S., D.P.M., Consultant Psychiatrist

Miss C. J. SERJENT—Secretary

Sessions

The clinic functions as such on three half-days each week: on Tuesday and Thursday afternoons for seeing children and parents: and on Friday mornings for weekly case conference. In general, two new cases are seen each Tuesday and Thursday afternoon; in addition, four old cases are reviewed.

Number of Cases

The number of cases dealt with at the clinic in the period 1.1.63—31.12.63. is shown in the following table :—

Table 1

	Boys	Girls	Total
No. of new cases referred during 1963.. .. .	91	66	157
No. of old cases carried forward	63	34	97
No. of cases on waiting list at 31-12-63	20	16	36
Sex incidence of cases referred	58%	42%	100%

From this table it can be seen that this year again significantly more boys than girls have been referred to the Child Guidance Clinic : 58% boys and 42% girls. This boy-preponderance is not uncommon, since boys tend to present more behaviour difficulties and problems than girls in their upbringing and schooling.

Sources of referral of cases dealt with for the first time in the clinic are shown in the following table :—

Table 2

Parents or guardians	10
Juvenile Courts	1
Probation Officers	3
Social Agencies	3
Schools	48
School Health Service	46
General Practitioners	19
Other Sources	3
TOTAL	133

Of these, about 36% of the referrals are from Headteachers and about 35% are from the School Health Service. However, these figures are not necessarily accurate, as it has to be remembered that cases originating with parents and headteachers are often passed on to health visitors and the like and so become referrals via the School Health Service to the Child Guidance Clinic.

Reasons for referral

Classification of reasons for referral is not always straight forward: it is often arbitrary; sometimes is oversimplified, glosses over complexity. Seldom is causation simple; most frequently several factors operate at the same time with varying intensity. A child can be referred for simply the one symptom that happens to worry the parent at that moment, though the pattern of behaviour difficulty may well extend beyond that one symptom and relate to deepseated causes which have erupted over a period in many different ways.

Table 3

Nervous Disorders

Fears	8
Seclusiveness	8
Depression	2
Obsessions	2
	<hr/>
	20
	<hr/>

Habit Disorders and Physical Symptoms

Speech Disorders	2
Sleep	7
Movement	4
Feeding	6
Excretory	17
Nervous pains	3
Fits	1
	<hr/>
	40
	<hr/>

Behaviour Disorders

Unmanageable	39
Temper	10
Aggressiveness	11
Demanding Attention	5
Stealing	27
Lying and Romancing	12
Truancy	30
Sex difficulty	2
	<hr/>
	136
	<hr/>

Educational and vocational difficulties

Backwardness	10
Inability to concentrate	5
	<hr/>
	15
	<hr/>

— TOTAL 211

The referrals which bulked largest were the behaviour disorders (64.5%); next were the habit disorders (19%); next were the nervous disorders (9.5%); and next were the educational difficulties (7%).

The commonest difficulties in the children referred were : unmanageable (39); truancy (30); stealing (27); excretory (17); lying (12); aggressiveness (11); temper (10); and backwardness (10). This follows quite closely the general pattern reported on in 1958-62.

The ages of the children examined for the first time at the clinic are shown in the following table :—

Table 4

Years	..	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Boys	..	1	3	3	4	14	8	8	5	4	6	7	8	7	2	—	80
Girls	..	1	—	1	3	4	10	6	6	1	6	4	3	4	4	—	53

Of these 133 children, 9 were pre-school; about 43 were Infants; about 42 were Juniors; and about 39 were post-primary pupils.

Table 5 shows the results of treatment and disposal of cases discharged.

Table 5

Adjusted	..	..	..	..	23
Partially adjusted	..	..	..	..	17
Advisory	..	..	..	..	39
Transferred				..	1
Failed to co-operate			..	..	28
Withdrawn	..	..	..	..	28
Left Cardiff		..	..	..	4
Deceased	..	..	..	..	1
Recommended for admission to Homes					1
Admitted to Homes		..	..		1
					<hr/> 143 <hr/>

Of these, 39 cases were closed as advisory after advice had been given to parents, doctors or headteachers, generally where further supportive interviews were not considered necessary.

40 cases were closed as adjusted or as partially adjusted; a good record in such cases as were considered likely to respond to fairly rapid treatment.

28 cases were closed as withdrawn where no notice was taken by parents of even the initial appointments offered; and as many as 28 additional cases were closed where failure to co-operate on the part of parents prevented the clinic staff from proceeding profitably in their efforts.

Table 6 indicates the work of the sections :—

Table 6

	Exam.	Treatment	Parents	Others	School	Home	Total
Psychologist ..	96	157	192	27	101	—	573
Psychiatrist ..	89	194	235	34	—	—	552
Totals ..	185	351	427	61	101	—	1125

Conferences

There have been 43 staff conferences in the period covered by our report, and 704 cases discussed.

Miscellaneous

There have been 46 visitors to the clinic in 1963.

Additional Survey

The clinic secretary, Miss Serjent, has noted certain features of case-histories, e.g. sex, intelligence, housing, etc.

Sex

Of the 98 children in the survey, 58 were boys and 40 were girls, i.e. about 59% were boys and 41% were girls. Clearly more boys are referred than girls to the clinic; boys apparently more frequently than girls present behaviour difficulties in their development, upbringing and schooling.

Intelligence

The distribution of intelligence quotients for these children is shown in Table 7.

Table 7

I.Q. Group	Boys	Girls	Total
130-4	1	—	1
125-9	1	1	2
120-4	1	1	2
115-9	3	4	7
110-4	3	5	8
105-9	6	2	8
100-4	5	2	7
95-9	7	4	11
90-4	4	5	9
85-9	7	4	11
80-4	2	3	5
75-9	4	3	7
70-4	3	1	4
65-9	4	1	5
60-4	2	2	4
55-9	1	1	2
50-4	2	—	2
45-9	2	—	2
40-4	—	1	1
Total	58	40	98
Average I.Q. ..	89.8	93.2	91.5

From the above table, it can be seen that there is a good distribution of intelligence throughout the group of boys and girls with a definite 'tail' below 70; that the average of the whole group is below the normal; and that the average for boys is slightly below the average for girls.

Maladjustment may occur at all levels of ability, but it is likely to affect more frequently those children who by dullness are less able to cope with and adjust to their environment.

Medical Record

The number of children affected by serious illness is again this year quite small. Their failure to adjust adequately is seldom to be found in their physical condition.

Occasionally, as for instance in chronic encopresis, a child is thoroughly examined in hospital by specialists; usually nothing abnormal is discovered; the child is perfectly clean in hospital, but reverts to soiling on his return to his own home; clearly the case has to be dealt with as a longterm reaction with multiple causation—lack of toilet training, inadequate toileting facilities, possibly latent aggression, parental rejection and ineffectual handling.

Place in Family

Table 8 summarises the part played by position in family in this group of children :—

Table 8

	6 boys; 5 girls	Totals
Only child	(1) 17 (2) 17	11
Two children	(1) 13 (2) 7 (3) 5	34
Three children	(1) 3 (2) 2 (3) — (4) —	25
Four children	(1) 2 (2) 2 (3) — (4) 2 (5) 2	5
Five children	(1) 4 (2) 1 (3) 1 (4) 1 (5) 2 (6) 2	8
Six children	(1) — (2) 1 (3) — (4) 1 (5) — (6) 1 (7) —	11
Seven children	(1) — (2) — (3) — (4) — (5) — (6) — (7) — (8) — (9) —	3
Eight children	(1) — (2) — (3) — (4) — (5) — (6) — (7) — (8) — (9) —	—
Nine children	(1) — (2) — (3) — (4) — (5) — (6) — (7) — (8) — (9) —	1
		98

Comparitively small families predominate, though it is to be remembered that these families are not necessarily completed families.

It appears fairly clear from the above table that position in family is not significant, for any child seems as likely to be difficult as any other. From these figures, it cannot be said that maladjustment is due to inexperience with a firstborn, jealousy of any one for any other, or to a large family as such; rather is it more likely to be due to a more complex pattern of causation.

Where the difficulties mainly occur is shown in Table 9.

Table 9

Home	..	..	..	..	47
School	..	..	..	..	18
Both home and school	..	..	..	..	33
					98

It is clear that difficulties occur mostly in the home. Nor is this surprising for higher standards of personal and social behaviour are for the most part expected, encouraged and secured in school with its friendly discipline and its more uniform degree of stability. The need is clearly for skilled parent guidance, particularly as so very few of the children can be described in any real sense as mentally ill.

Accommodation

During 1963, with no Pyschiatric Social Worker on the staff, less than usual has been known about the patients' accommodation. However, practically all types of accommodation from favourable to very unfavourable are represented in this group. Accommodation does not in itself appear to be generally a cause of serious difficulty. In a few cases, however, it does constitute an important contributory factor in maladjustment.

Broken Homes

More significant is the number of broken homes, shown in Table 10.

Table 10

Mother deserted, father remarried	2
Mother dead	2
Mother dead, father remarried ..	1
Parents separated	4
Parents dead	1
Parents divorced	2
Parents divorced, both remarried	1
Adopted	2
Fostered	1
	<hr/>
	16
	<hr/>

A sixth of these 98 cases represent broken homes : a considerable proportion of homes which differ significantly from the normally constituted home wherein both parents may play a part in shaping the lives of their offspring.

Parental Disharmony

It is not easy to say what constitutes parental disharmony, except in an extreme case nor always to be sure that it exists, particularly as it is the mother who usually attends the clinic; but that it clearly does exist is noted in 10 cases, i.e. to such a degree as to constitute a serious contributory factor in maladjustment. This too is in addition to the broken homes listed in Table 10.

Both parents work

This is noted in 23 cases: i.e. about a quarter of the total.

Father's Occupation

Whilst in individual cases it is important and sometimes significant to know what job the father has (e.g. traveller, sailor, shift-worker, etc.) no generalisation can be made in relation to maladjustment other than that any category of occupation may be involved. The personality is clearly very much more important than the occupation.

Parents neurotic or psychotic

It is not easy to establish a criterion as to the mental condition of parents that is not determined simply by personal assessment. Yet so many parents were found to have had nervous breakdowns, to have been in- or out-patients of mental hospitals, that a note was made of cases wherein fairly serious disturbance existed in parents. There were 10 such cases, rather fewer than in previous years, yet appreciable enough to merit recording.

Remarks

A few comments may be made about these 98 children as a group.

- (1) As a group, they are below average in ability, although practically all levels of intelligence are represented.
- (2) There are appreciably more boys than girls in the group.
- (3) The group has not been greatly affected by serious ill-health.
- (4) Small families predominate; place in family is not significant.
- (5) The difficulties relate more to home than to school.

- (6) In individual cases, accommodation difficulties often exist, but in general little of significance emerges in this connection.
- (7) In the Group the number of broken homes is considerable (a sixth).
- (8) Parental disharmony (in at least 10 cases) is another significant factor.
- (9) Yet another is that in a quarter of the cases both parents work.
- (10) Father's occupation cannot be said to be generally significant, though it often is in individual cases.
- (11) Another significant factor is that in at least 10 cases one or other or both parents are themselves more or less seriously unstable and maladjusted.
- (12) These important factors emerge from the survey of this group; boys and small families predominate; broken homes; parental disharmony; both parents working; fairly serious instability in parents.

Comments on the causes of maladjustment in children—(by the Educational Psychologist)

Causation tends to be multiple and complex, and similar elements can vary considerably in valence in different cases. In the consideration of causation, caution is required; generalisations are to be avoided and must frequently be qualified. What is true in one home environment is not necessarily so in another, and what can be said of behaviour in clinic cases is not necessarily typical of course of behaviour and child management generally in the community.

Nevertheless, the impression got of parents attending the clinic is that they feel very much less secure in their judgement than their parents and grandparents were. They tend to show greater tolerance of aberrant behaviour, they tend to be more permissive, much less authoritarian. They tend to abdicate from their traditional responsibility in upbringing to offer no standards, partly through indecision, *laissez-faire*, over-sympathy and over-lively sense of doubt. Thereby they produce uncertainty and insecurity in children. By being over-permissive, they encourage chance wilfulness to develop into habitual patterns of behaviour, and are further confused by the inevitable result of their indecision. Social disapproval troubles them less, for they often claim to have tried everything for varying periods and lack the insight to appreciate their own inconsistency, as well as the causes and results of it. Quick enough to suspect jealousy, and favouritism, they fail to appreciate their own ambivalence, wishful thinking and feelings of rejection.

Parents are less authoritarian. They allow children to go to Sunday School and join Cubs and Brownies and to withdraw from such activities on the merest whim, without feeling obliged to encourage or support them in building up normal, stable associations and social contacts. They tend to be over-permissive and over-sympathetic in the face of minor hurts and rebuffs, minor frustrations and setbacks, unaware of the need to help children to develop resilience, independence, a sturdiness of spirit which will permit them to accept such things with a good grace. Children learn to face cuts, scratches, storms in teacups, visits to dentists and the like without over-timidity, extreme fearfulness, excessive emotional reactions. All too often parents over-sympathise, over-protect, over-react, fail to help develop in children a normal degree of self assurance, and so prevent them from socialising with their coevals in the ordinary give-and-take of home and school life.

They encourage the view that their children are sensitive, highly strung, cannot do without them, do not like Sunday School or Cubs or Brownies, and discuss them constantly in such terms in their presence so that the children come to accept these descriptions as true of themselves. In extreme cases the children will scarcely speak to the teacher in Infant School since this has been prophesied for them by their parents and they are slower than need be to respond in the simplest ways in school.

The lack of ordinary habit-training can relate to feeding, sleeping, obedience routines, so that in some families there are feeding difficulties and food fads, often carried on from parents to children by copying or by over-permissiveness. Children are allowed to stay

up late to watch television sometimes because the parents consider that that is the easy way. If the simplest standards of obedience are not confidently but firmly required from the earliest days, then children are likely to grow up in a confused, inconsistent environment wherein develop wilfulness, temper tantrums, grizzling, lack of sleep, lack of respect for adults as a result simply of the lack of direction or habit-taining. Indulgence is often the rule, associated too with general indifference to precept or example. Some parents consider a penny per year of age a feasible starting-point for pocket money, whereas many others drift into semi-bribery pieces of silver per day which give them no elbow-room. Some parents are compulsively over anxious and over-ambitious for their children; others are totally unconcerned about their schooling. Much depends on the parents' own experience of school and of life, on the quality of their own adjustment to society, on the respect they have for authority and for law and order. This respect—or lack of it—will often be reflected in their children's attitudes and behaviour.

Comments on the Children of Problem Families—(by the Consultant Psychiatrist)

The subject of problem families is one that has for a long time occupied much thought and energy on the part of local authorities and all those trying to help them. Despite great efforts, a hard core of problem families remains in most urban areas. They are the people who seem to be quite unable to manage their own affairs successfully and, as a result, get into all kinds of difficulties. They come to the notice of many local government departments because of these difficulties, but perhaps the most prominent problems are those of housing them and trying to keep them out of debt. Very frequently the father of the family is the sort of man who is either ill or out of work most of the time. Rarely is he in regular employment bringing home a good wage. The difficulties seem to arise from the fact that he is an unstable person rather than that he is unfortunate with jobs, etc. Often, he appears to have little or no sense of responsibility towards his wife and children and is quite content to remain at home doing nothing and accepting all the financial assistance that is offered to him. It is hard to bring any sort of pressure to bear on such an individual because he is, at best, a poor worker and it is the family rather than himself who suffers because of financial stringency. Just as he is a poor worker outside the home, he is a poor worker inside and rarely attempts the decorating and maintenance jobs done by the average man. The family is often deeply in debt, particularly with regard to the rent and repeated warnings have little or no effect. The Council is then faced with the problem of whether or not to evict. It is much more expensive to maintain the members of the family separately in Children's Homes, hostels, etc., and also the house is usually left in a very bad state, requiring a large sum of money to be spent on it before new tenants can be allowed to take over. In many cases, the mother is as inadequate as the father and sometimes even more so. Youngsters who have been deprived in their youth are often attracted to similar types and embark on marriage at an early age in an effort to find the sort of love they have lacked in childhood. They do not find it because, so often, the partner is just as unable to make warm, steady relationships as are they themselves. They frequently have more children than they wish for because they are just not able to carry out the usual methods of family planning. The mother may find the children a very real burden and she may become completely swamped by the ordinary day-to-day care of the children. She may be fond of the children but be quite unable to give them the consistent love and training that the normal mother is able to give. The result is that the children in turn become difficult and show various symptoms of anxiety, insecurity and deprivation. They may become aggressive or anti-social in their behaviour. This means that the mother finds them even harder to manage and she becomes even more inadequate or rejecting. It is a vicious circle which, in the end, often produces a fresh generation of potential problem families. The fathers all too often, do not bear their proper responsibilities in the upbringing of the children. They are frequently very inconsistent, in that, much of the time, they may be over-tolerant and over-indulgent but, at others, violently aggressive. Perhaps the worst type of parent is the one who takes very little interest at all in the children and drifts on his own path regardless of how they are developing.

Many ways of helping such families have been tried and it would seem that close supervision and help on the spot, is the best that can be done for them. The social workers appointed by Local Authorities specially to deal with problem families give valuable assistance in many cases and any method, such as the Family Service Units, which gives practical assistance and advice extending over a long period, is to be recommended. These parents are quite often well-intentioned and willing but just unable to make their own decisions and plans so that they need someone reliable on whom they can fall back and who can encourage them in their efforts.

Children of problem families are quite often referred to the Child Guidance Clinic because they present difficulties of one sort or another. It is not easy to help them, in many cases, because of the extreme inadequacy of the home. The parents are unable to act on discussion and advice and are not able to adapt or alter home circumstances in the way that normal parents can. Sometimes, it is even necessary to remove a child from its home because of very bad circumstances. This is never a decision that is taken easily because it means that the child has to adapt itself again to its home when it returns.

VII—NURSERY SCHOOLS AND CLASSES

There are eight Nursery Schools and two Nursery Classes in the City, situated as follows :—

Nursery Schools :				
1.	CANTON	Severn Road		
2.	GRANGETOWN	Ferry Road		
3.	SPLOTT	Moorland Road		
4.	ELY	Vachell Road		
5.	SPLOTT (Tremorfa) ..	Baden Powell School		
6.	ELY	Hywel Dda School		
7.	SOUTH (Docks) ..	West Close, Bute Street		
8.	RUMNEY	Rumney School		
Nursery Classes :				
1.	NINIAN PARK	Ninian Park School		
2.	ADAMSDOWN	Tredegarville C/W School		

Accommodation is provided at the Nursery Schools for a total of 416 full-time and 96 part-time children aged 2-5 yers. At the Nursery Classes 60 children aged 3-5 years can be accommodated.

Health Visitors pay a visit to each Nursery School and Class at least once in each week and very often at more frequent intervals as such visits become necessary. A Medical Officer visits the Nursery Schools and Classes at intervals of approximately one month for the purpose of medically inspecting new entrants and of reviewing the health of pupils.

VIII—MISCELLANEOUS

INFECTIOUS DISEASES

The number of schoolchildren ascertained to be suffering from infectious diseases during the year were as follows :—

Scarlet Fever	30
Whooping Cough	55
Diphtheria	—
Measles	1319
Acute Pneumonia	22
Meningococcal Infection	—
Paralytic Poliomyelitis	—
Non-Paralytic Poliomyelitis	—
Acute Encephalitis—Post Infectious	1
Dysentery	31
Para-Typhoid Fever	—
Enteric or Typhoid Fever	—
Erysipelas	1
Food Poisoning	6
Tuberculosis—Respiratory	8
Other Forms	—

In addition the following children were notified by Head Teachers as absent from school due to the diseases stated :—

Rubella	35
Mumps	67
Jaundice	25

PROVISION OF MEALS

Central Kitchens are in operation at Ely and Tremorfa and provide approximately 4,900 meals per day for consumption at 75 schools.

Self-contained kitchens are situated at the following schools :—

Gabalfa Special, Greenhill Open-Air, Greenway Junior, Ton-yr-ywen, Heol Trelai, Windsor Clive, Cathays High, Cardiff High for Girls, Glantaf, Gabalfa Junior, Moorland Primary, Fairwater Junior, Lady Margaret High, Cefn Onn, Peter Lea, Brynhafod, Pen-y-bryn, Heol Hir, Lady Mary R.C. Boys, Lady Mary R.C. Girls, Gabalfa Infants, Llanrunney Secondary, The Court, Howardian Grammar, Glan-yr-afon, College of Commerce, Pentreban, Bishop of Llandaff, Canton Boys, Canton Girls, Greenway Infants, Fitzalan Technical High, Mostyn, Pen-yr-Heol, Cyntwell Secondary Modern, Waterhall, Woodlands Special, Ty Celyn, Field House Special, Lakeside Primary, Glyn Derw and eight Nursery Schools.

Canteens. Facilities are available at 139 School Canteens for providing mid-day meals for approximately 14,916 children daily.

The number of children attending primary, high, special and nursery schools, provided with dinners and/or milk during the first and last complete weeks of 1963 were as follows :—

	<i>First complete week, 1963</i>	<i>Last complete week, 1963</i>
Average number of necessitous children provided with dinner daily free	1,969	2,423
Average number of children provided with milk daily free	30,895	34,281
Average number of children provided with dinner daily on payment	11,484	13,955

(The severe weather in January had some effect on the numbers.)

REFRESHER COURSE FOR SCHOOL MEDICAL OFFICERS

At the invitation of the School Health Service Group Council of the Society of Medical Officers of Health, a refresher course for school medical officers was held in Cardiff during September, 1963.

This was the first time such a course had been held in Wales and 34 doctors engaged in the School Health Service in England and Wales attended. Residential accommodation was provided in the Aberdare Hall from 9th—21st September, and the course included lectures from members of the Ministry of Health, Welsh Board of Health, Hospital Board, Welsh National School of Medicine, Local Authorities staffs etc. Visits of observation were paid to various institutions and special schools in Glamorgan and Cardiff.

The Lord Mayor of Cardiff, Alderman Charles A. Horwood, J.P., and the City Council invited the delegates and lecturers to a dinner in the Cardiff Castle on 10th September, and hospitality was also extended to those attending by the staffs of the various schools etc. visited.

The Society of Medical Officers of Health expressed their thanks and appreciation to the City of Cardiff, the lecturers and organisers for a highly successful, interesting and instructive course.

MEDICAL EXAMINATIONS OF TEACHERS AND ENTRANTS TO COURSES OF TRAINING FOR TEACHING AND TO THE TEACHING PROFESSION

The School Medical Officer is an examining medical officer for the Education Committee in respect of the entry of teachers into the superannuation scheme. During the year, 95 teachers were examined for this purpose.

From 1st April, 1952, the Minister of Education instituted new arrangements for medical examinations for entrants to the teaching profession and for candidates applying for entry to training colleges, university departments of education and approved art schools. (Circular 249, 8th March, 1952.)

The School Medical Officer has the duty of examining candidates applying for admission to training colleges and entrants to the teaching profession except those intending to enter the teaching profession on completion of an approved course of training, in which case they are examined as at present by the College Medical Officer. The School Medical Officer has to fulfill this last obligation in respect of students completing courses at the Cardiff College of Art as he acts as the College Medical Officer.

As a result of these requirements, 172 candidates and entrants were medically examined.

The Minister also directed that X-ray examinations shall be an essential part of the medical examination on entry to the teaching profession as from 1st April, 1953. (Circular 248, 28th March, 1952.)

ACCIDENTS TO PUPILS

Head Teachers are requested to provide details of all accidents occurring to pupils on school premises or arising out of school activities.

During 1963, 228 such reports were made.

DESCRIPTION OF REGULAR CLINICS

	Minor Ailments	Cleansing	Ophthalmic	Orthoptic	E.N.T.	School Dental Service	Speech Therapy	Enuresis
(a) School Clinics also used for General Health Purposes:—								
Central Clinic, 30 Richmond Road	Yes	—	Yes	Yes	Yes	Yes	Yes	Yes
Gabalfa Clinic, 213 North Road	Yes	—	Yes	—	Yes	Yes	Yes	—
College Farm Clinic, Llanidloes Road ..	Yes	—	Yes	—	Yes	Yes	—	—
Splott Clinic, 139 Splott Road	Yes	—	Yes	—	Yes	Yes	Yes	—
Grangetown Clinic, Cambridge Street ..	Yes	—	Yes	—	Yes	Yes	Yes	—
Canton Clinic, Wessex Street	Yes	—	Yes	—	Yes	Yes	Yes	—
Fairwater Clinic, Plasmawr Road	Yes	—	Yes	—	Yes	Yes	Yes	—
Ely Clinic, Redhouse Crescent	Yes	—	Yes	—	Yes	Yes	Yes	—
Llanishen Clinic, Newborough Avenue ..	Yes	—	Yes	—	Yes	Yes	Yes	—
(b) Public Health Clinics available for school children:—								
Treatment Centre, 1 Curran Road	—	Yes	—	—	—	—	—	—
Llanrumney Clinic, Llanrumney Avenue ..	Yes	—	Yes	—	Yes	Yes	Yes	Yes

N.B.—Speech Therapy Sessions are also held at Rumney Infants School, Trelai Junior School, Windsor Clive Junior School, Herbert Thompson Junior School, the Spastic Unit at the Greenhill House Open-Air School, Riverbank Special School and the Gabalfa Special School.
December, 1963.

STUDENT-HEALTH SERVICE

CARDIFF TECHNICAL COLLEGES

REPORT BY Dr. ROBIN M. WILLIAMS, M.B., B.Ch., D.P.H.

In 1963 a combined College of Food Technology and Commerce was set up and students of commercial subjects, hairdressing, dressmaking and social sciences were all housed in the old Canton High School premises in Market Road and enrolled there in the commerce department of this new College. Until the 1963 Academic Session, students of commercial subjects only, had enrolled at Llandaff Technical College but had received their tuition in Market Road. These students were usually seen in Llandaff, for the relatively small numbers made special visits to Market Road unjustifiable. The new arrangements of providing training in commerce and food technology in the one College made regular visits there profitable and the corresponding drop in the numbers enrolled at Llandaff Technical College made it possible to re-arrange the allocation of sessions at the Colleges suitably.

The staffs of the Welsh College of Advanced Technology and Llandaff Technical College have been anxious about the health of new students, particularly those from overseas. In the Welsh College of Advanced Technology, 73 overseas students enrolled in 1963 and 51 enrolled at Llandaff Technical College. We were asked to investigate the possibilities of examining routinely all new entrants. Such routine medical examinations are not possible in the time at present allocated and their value is doubtful. However, arrangements were made to see all new overseas entrants, a section of the student community which has special difficulties, particularly in the first year of College life.

In order to make the 'waiting list' from which we work, of more manageable and realistic proportions, only new entrants for the academic year 1963-64 were asked to fill in a full questionnaire. A short version was given to the second and third year students, intended to bring up-to-date information on their health which we had already collected in the previous years. This proved a successful arrangement.

The table below shows the numbers of questionnaires completed and those that indicated that medical examination of the students concerned would be necessary. It also gives 1962 total figures for comparison.

Table I

College	Population (a)	No. of Question- naires (b)	% age completing Question- naires (b) & (a)	Waiting List (c)	% age requiring attention (c) & (b)
Welsh College of Advanced Technology	826	671	81.2	161	24
Llandaff Technical College ..	387	234	60.5	87	37.2
College of Art	209	150	71.9	71	47.3
College of Music and Drama ..	101	75	74.3	27	36.0
College of Food Technology— (Crwys Road)	140	109	77.9	59	55.4
and Commerce (Market Road)	239	193	80.8	99	51.3
Total (1963)	1,902	1,432	74.8	457	32.7
Total (1962)	1,979	1,217	61.5	556	45.7

The relatively small waiting list at the Welsh College of Advanced Technology probably reflects the greater maturity of that student body many of whom have spent some years in industry before entering College.

The numbers of questionnaires completed were about 21 per cent. more than in 1962, whereas the waiting list was reduced to more manageable proportions by about 28 per cent.

The following tables show the number of attendances and the sources of referral of students to the Service, and the reasons for referral :—

Table II

College	Questionnaires	Consult. by Students	Heads of Depts.	Routine Inspections	Total Students	Total Visits	Average Visit per student
Welsh College of Advanced Technology ..	110	69	3	1	183	238	1.3
Llandaff Technical College ..	101	102	9	14	226	291	1.3
College of Art ..	36	10	17	1	64	78	1.2
College of Music & Drama ..	33	7	1	—	41	45	1.1
College of Food Technology—(Crwys Road) ..	22	1	2	—	25	37	1.5
Commerce (Market Road) ..	21	3	1	—	25	32	1.3
Total (1963) ..	323	192	33	16	564	721	1.3
Total (1962) ..	141	120			261	455	1.7

The numbers of students attending rose, but the number of visits by individual students fell on the average, partly due to the practice of combining routine medical examinations with consultations and immunising procedures at the same visit.

Attendance in response to postal appointments was about 70—75% in all colleges, which seems fairly satisfactory.

The conditions for which advice was sought or referrals requested are shown in Table III.

Table III

Group of Ailments	Questionnaire	Consultation	Total	Condition as % age of all conditions	Advised and Treated	Referred to Specialist	% age referred
Cardio vascular diseases, including history of rheumatic fever and anaemia	23	2	25	4.1	13	1	4.0
Chest, including tuberculosis	49	5	54	8.8	17	2	3.7
Muscles and bones ..	14	25	39	6.3	27	9	23.1
Psychological and emotional ..	18	17	35	5.7	26	3	8.6
Defective Vision ..	50	19	69	11.2	46	35	50.7
Abdominal ..	47	12	59	9.6	36	8	13.6
Ear, Nose & Throat ..	104	39	143	23.1	72	13	9.1
Skin, including rashes and infections ..	41	30	71	11.5	42	13	18.3
Miscellaneous ..	79	43	122	19.7	58	15	12.3
Total ..	425	192	617	100	337	99	16

Muscular and bony ailments included injuries which were often referred to casualty departments for further treatments.

Vision defects, skin conditions and abdominal troubles then required the largest numbers of referrals for specialist treatment. Psychological and Emotional conditions required the greater amount of individual attention, the students concerned visiting us freely, sometimes eight or nine times.

Colour vision checks were carried out on 145 prospective students at the College of Art as part of their pre-entry tests.

Tuberculin skin testing and oral polio immunisation was carried out in all colleges when students were seen for the first time at consultations and in special sessions.

Table IV.—Tuberculin Skin Testing (Heaf)

College	Sent for	Tested	Read	Neg.	+/-	1+	2+	3+	4+	For BCG	BCG Given
Welsh College of Advanced Technology	489	288	234	22	14	97	70	17	14	25	11
Llandaff Technical College	283	274	225	13	13	116	67	8	8	15	10
College of Art	164	133	118	8	5	60	35	5	5	7	6
College of Music and Drama	137	69	52	10	5	25	9	4	3	5	10
College of Food Technology—& Commerce (Market Road) ..	61 90	61 90	54 71	1 4	7 7	34 41	8 14	1 1	3 4	8 11	— —
Total	1,224	915	758	58	51	373	203	36	37	71	37

Those awaiting B.C.G. vaccination will receive it when numbers are sufficiently large to ensure supplies are economically used. Those with very strong positive tuberculin reactions were referred for chest X-rays. The one person whose X-ray was not satisfactory was later found to have a harmless lesion.

Table V.—Immunisation against Poliomyelitis

College	1st Dose	2nd Dose	3rd Dose	Total
Welsh College of Advanced Technology ..	54	23	47	124
Llandaff Technical College	33	38	60	131
College of Art	17	—	65	82
College of Music and Drama	1	3	35	39
College of Food Technology—& Commerce (Market Road)	22	15	7	44
Total	127	81	323	531

The large number of third doses was because a large number of students had had their first and second doses during the first term of the 1962-63 academic year. Numbers needing polio immunisation were lower in 1963 because many more students had been adequately immunised before entry to College.

The annual course of lectures on First Aid to chiropody students at Llandaff Technical College was given and two lectures on the School Health Service and Hygiene to trainee teachers at the College of Art.

Mrs. M. P. Davies, the Health Visitor who has been with the Service since its inception assisted at the medical sessions in the various Colleges and spent one session a week visiting student accommodation on behalf of the Colleges.

The table below gives the numbers of accommodation visits made by Mrs. Davies.

Table VI

Completed Visits	Information Incomplete	No Reply	Special Case Visits	Others	Total
196	46	90	10	40	382

All colleges keep their own accommodation lists and the Welsh College of Advanced Technology now has an Academic Registrar, part of whose duties are to deal with this problem.

In conclusion, student appreciation of the Service seems to be growing, as the number of consultations continues to increase. The friendly relationships with hospital and other services continues and student problems get good attention. Records are now kept in filing cabinets in all the individual colleges, thus reducing the amount of carrying of cards from place to place and so making it possible to cope with casual consultations more easily. Accommodation in all colleges has improved within their limits and it is hoped that as new building progresses, the present rather temporary arrangements will be replaced by permanent accommodation.

REPORT FOR 1963

of W. BATE, M.A., D.P.A., F.R.S.H., M.A.P.H.I.

Chief Public Health Inspector

This report is in the form of those of previous years. The style of presentation is a compromise to meet the needs of the general reader, other officers working in the same field, the Committee member, councillor and government departments. Much of the information is necessarily statistical and some of it in the tabulated form stipulated for government returns.

The contents range over the entire field of environmental hygiene, there being reference to each of the following subjects:—

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The year has seen no unusual events or material change in the work and the major part of the time has been spent in the routine day to day tasks of the Public Health Inspector. Staff difficulties have been met for the first time in the City, two out of twelve districts did not have an inspector for the whole period and were covered by Inspectors from adjoining districts.

Nevertheless the visits paid by the staff show no marked decrease and this indicates the effort that is being made to keep up the department's standards of inspection.

Houses in Multiple Occupation have presented the department with a most difficult task. One specialist inspector was appointed to undertake work solely on this matter, but it is obvious that it will take time before any visible improvement will be seen and this problem resolved.

The Slum Clearance programme was continued by the representation of two areas during the year, Riverside and Butetown No. 2. The Riverside area was confirmed by the Ministry after a public inquiry and now the Corporation are settling compensation payments and rehousing the inhabitants. Butetown No. 2 area was represented at the December meeting of the Health Committee, and it will be the new year before any further steps will be taken.

No smoke control orders were made during the year although discussions were held with the Ministry and the National Coal Board. It is hoped that a more favourable report will be submitted next year on this subject.

NEW LEGISLATION

During the year the following legislation was passed or came into operation. All these have a bearing on the work of the department but certain of them merit comment.

The Soft Drinks Regulations 1963.

The Housing (Payment for well maintained houses) Order 1963.

The Offices, Shops and Railway Premises Act 1963.

The Bread and Flour Regulations 1963.

The Milk (Special Designation) Regulations 1963.

The Meat Inspection Regulations 1963.

Soft Drinks Regulations 1963

These regulations control the labelling and composition of soft drinks, with particular reference to those made from citrus fruit.

The Housing (Payment for well-maintained Houses) Order 1963

This Order amended the Housing Act 1957 in respect of payments to be made for well-maintained houses in a Clearance Area, or Compulsory Purchase Order, or one which is individually unfit. The multiplier used to derive the actual payment has been adjusted to take account of the new rateable values of properties.

The Offices, Shops and Railway Premises Act 1963

This Act received Royal Assent in July, but will not be brought into effect until the summer of 1964.

This is a long awaited piece of legislation, welcomed by all in the public health field, in view of the great numbers of office and shop workers employed in premises which are basically unsuitable for their present use and often inadequately provided with facilities for the use of employees.

The main purpose of the Act is to make provision for the safety, health and welfare of persons employed in offices, shops and certain railway premises. Some 8,000 premises will be affected by the Act in Cardiff, when the Act becomes fully operational.

The intention of the Act would seem to be to bring up the environmental standards and working conditions of employees in offices, shops and certain railway premises to those long enjoyed by factory workers under the Factory Acts, and to this end the Act embodies 26 provisions ranging from cleanliness to first aid facilities.

The Minister of Labour will have power to make regulations detailing precise standards for each of these sections, specifying for example ventilation or lighting standards or the number of wash hand basins and sanitary conveniences to be provided according to numbers of employees.

Responsibility for the administration of the Act will be divided amongst local authorities, H.M. Inspectors of Factories and H.M. Inspectors of Mines and Quarries.

Local Authority premises will be inspected by H.M. Inspectors of Factories, who will also be responsible for crown premises, offices and shops in factories, U.K. atomic energy premises and certain railway premises, but the bulk of the work will clearly devolve upon local authorities.

The Bread and Flour Regulations 1963

These regulations control the composition and claims to be used by the manufacturers and importers of bread and flour.

The Milk (Special Designations) Regulations 1963

These regulations make certain changes to the existing legal requirements relating to milk. 'Tuberculin Tested' is replaced by the word 'untreated' and certain alterations are made to the licensing of producers and dealers. The regulations do not come into force until 1st October, 1964.

The Meat Inspection Regulations 1963

The regulations were made primarily to ensure that all home killed meat is inspected before it leaves the slaughterhouse. In order to offset the Local Authority's expenditure necessary to comply with these regulations, charges may be made for the inspection of all meat animals; the maximum charges being laid down in the regulations.

FOOD AND DRUGS CONTROL

Meat Inspection and Slaughterhouses

The major portion of the slaughter of animals for human consumption is carried out at the public abattoir and is inspected by public health meat inspectors under the supervision of the veterinary officer and is reported by this officer.

In addition there is one small slaughterhouse licensed within the city which is used in conjunction with a bacon and small goods factory. All the animals slaughtered at this abattoir have been inspected by the public health inspectors and the following table indicates the details :—

Carcases and Offal inspected and condemned in whole or in part

						Pigs
Number killed	..	..	..	..	..	1,540
Number inspected		..	..	..	..	1,540
All Diseases Except Tuberculosis:						
Whole carcasses condemned	..	..	..			—
Carcases of which some part or organ was condemned						
	..	..	..	..	..	179
Percentage of the number inspected affected with disease other than tuberculosis						11.6
Tuberculosis only:—						
Whole carcasses condemned	..	..	..			—
Carcases of which some part or organ was condemned						
	..	..	..	..	..	9
Percentage of the number inspected affected with tuberculosis						0.58

Animals slaughtered—Comparative Table

		1963	1962	1961	1960	1959	1958
Pigs	..	1,540	2,191	1,847	2,129	3,077	2,954

Weight of Meat and Offal rejected from animals slaughtered

		Tons	Cwts.	Qrs.	Lbs.
Part carcasses of Pork	..	—	3	0	26
Pigs Offal	—	2	2	19

Other Food Inspection

Inspection and condemnation of food at the shops and warehouses etc. in the area is carried out by each district public health inspector and by the Food and Drugs Inspector. A total of 4,431 visits was made for this purpose during the year and the approximate weight of diseased or unsound food and meat surrendered as unfit for human consumption was 108 tons 3 cwt. 15 lbs.

Food Hygiene

A total of 11,263 visits were made to food premises during the year for the purpose of food hygiene and food inspection. There are 2,960 food premises on the register so that arithmetically 3·8 visits to Premises have been made during this period.

Details of the visits made, together with the totals of each type of premises are as follows.

	<i>Premises</i>	<i>Visits</i>
Cafes, etc.	215	904
School canteens	63	141
Other canteens	87	239
Clubs, hotels, public houses	315	395
Butchers and Meat preparing premises	245	767
Bakehouses	46	122
Confectioners (sugar and flour)	281	352
Fried fish shops	70	183
Wet fish shops	31	65
General shops	842	2,207
Wholesale depots	111	423
Ice cream premises	609	806
Markets	3	23
Vehicles	—	66
Other food premises	42	139
	<hr/> 2,960	<hr/> 6,832
Food Inspection—Condemnation visits	855	
Routine Visits	3,576	
	<hr/> 4,431	

158 written notices and 62 verbal notices were issued to occupiers of food premises for contraventions of the Food Hygiene Regulations. Details of the contraventions are as follows:—

Food Premises

Food to be protected from dust, flies, etc.	23
Food to protected from customers, etc.	15
Food to be protected from risk of contamination by animals	2
Clean overalls to be provided	—
Smoking to be discontinued	17
Use of unclean wrapping to cease	17
Sanitary conditions to be modified, cleansed, repaired	37
Wash-hand notices to be provided	5
Provision of water supply (cold)	23
Provision of wash-hand basins	14
Provision of hot water for wash-hand basins	24

Provision of soap, towel, nailbrush, etc.	..	..	..	16
Provision of sinks for food or equipment	..	..	..	10
Provision of hot water for sinks	..	..	..	11
Provision of first-aid equipment	..	..	..	6
Provision of clothing accommodation	..	..	..	3
Lighting of food rooms to be improved	..	..	..	1
Ventilation of food rooms to be improved	..	..	..	2
Food rooms to be cleaned/repaired..	..	..	..	15
Refuse to be removed	..	..	..	9
Cold storage for special foods	..	..	..	—
Hot storage for special foods	..	..	..	4

Foodstalls, vehicles, etc.

Improvements to structure , repair, cleanliness	2
---	----	----	---

BACTERIOLOGY OF FOODSTUFFS

Slaughterhouses

The policy of routine swabbing of the drains at Slaughterhouses has been continued using Moore's swabs. A summary of the results is given in the table on page 98.

Meat preparation premises

The same method of bacteriological examination of the effluents of slaughterhouses and food premises has proved its worth in recent years and this year was taken a stage further by extending the investigation into premises which manufactured meat products, or which supply restaurants, etc., with ready prepared portions of meat such as steaks, chops and joints. In these premises work surfaces and equipment which, by becoming contaminated with meat containing salmonella organisms, can in turn be responsible for the cross infection of other products were regularly tested with wipe swabs.

Bakehouses

In recent years Bakehouses have featured in outbreaks of infectious diseases such as Paratyphoid B and other salmonella infections. As a result of discussions with the management of a large local bakery an investigation was made into the existence of human carriers amongst food handling staff. A total of 188 faecal specimens were obtained. All of these were found to be negative.

As a control and also in an attempt to ascertain whether any of the raw materials used in manufacture were infected, swabs were placed at selected points in the drainage system to sample the effluent from sanitary conveniences and food preparation rooms. All these swabs were negative.

Milk Bacteriology

Heat treated Milk

Heat treatment of milk continues to be carried out at five processing plants in the city; pasteurisation at three plants by the H.T.S.T. method and the holder process at one plant; sterilisation of milk at one dairy.

Samples of raw and heat-treated milks were submitted for examination at the Public Health Laboratory. Samples were collected at the milk processing plants, wholesale and retail dairies, schools and canteens and milk vending machines. Details of the number and designations of the various samples and laboratory reports are tabulated under the appropriate tables. 785 heat treated milks were submitted to the statutory tests. Of 698 samples subjected to the phosphatase test for effective pasteurisation, 3 were reported as failing to satisfy the test. All 87 samples of sterilised milk were reported as satisfying the turbidity test and therefore satisfactorily processed.

11 samples out of the total 698 samples of pasteurised milk submitted to the methylene blue reduction test (for hygiene and keeping quality) were reported as unsatisfactory. Three of these failures were from milk vending machines. The shelf life of milk in milk vending machines, the efficiency of the machines' refrigeration units and the standard of hygiene continues to indicate that strict control of the sale of milk from these sources is most necessary.

Raw Milk

With one exception, all samples of raw milk submitted to the methylene blue reduction test satisfied the test.

Brucella Abortus T.T. Milk

The isolation of *Brucella abortus* from a sample of raw T.T. milk sold in the city indicates that the consumption of raw milk may still be hazardous. In this instance the source of the milk was ascertained and the supplies were still being subjected to heat treatment pending eradication of the cow secreting the organism. The producer concerned was advised to consult his veterinary officer, and the veterinary officers of the Ministry of Agriculture assisted in the investigation. The case will be further reported in the annual report for 1964.

Milk submitted for laboratory examination during 1963

Heat-treated Milk

Designation	Total number of milks submitted for examination	Phosphatase Test		Methylene Blue Test			Turbidity Test	
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Test void temp. more than 65°F.	Satisfactory	Unsatisfactory
Pasteurised ..	281	280	1	279	2	—	—	—
T.T. Pasteurised	228	227	1	224	4*	—	—	—
Homogenised T.T. Pasteurised	30	30	—	30	—	—	—	—
Homogenised Past.	4	4	—	4	—	—	—	—
Channel Islands Pasteurised ..	93	93	—	90	3	—	—	—
Channel Islands T.T. Pasteurised	62	61	1	60	2	—	—	—
Sterilised ..	87	—	—	—	—	—	87	—

*This figure includes samples reported as failing to satisfy the Methylene Blue Test collected from Vending Machines and tabulated in detail under the table "samples taken from milk vending machines".

In addition to the above some twelve samples of sterilised milk, the subject of complaint regarding keeping quality were subjected to bacteriological assay including examination for presence of heat resistant organism.

Raw Milk

MILK DESIGNATION	Methylene Blue Test			BACTERIOLOGICAL EXAMINATION				BIOLOGICAL EXAMINATION					
	No. of samples submitted for Examin- ation	Satis- factory	Unsatis- factory	No. of samples sub- mitted for examination		Positive	Negative	No. of samples sub- mitted for examination	Tuberculosis		BRUCELLA ABORTUS		
				Salmon- ellae	Staphyl- ococcus Aureus				Positive	Negative			
												Tubercul- osis	Brucella Abortus
Tuberculin Tested ..	19	18	1	— 1	22 —	11 —	11 1	64	—	64	15			49
Channel Island Tuberculin Tested ..	7	7	—	—	4	3	1	9	—	9	—	—	8*

* Premature death of guinea pig - sample repeated.

Samples taken from Milk Vending Machines

Designation	Total number of samples submitted for examination	Methylene Blue Test		Phosphatase Test	
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Pasteurised	48	48	—	48	—
T.T. Pasteurised	94	91	3	94	—
Homogenised T.T. Pasteurised ..	25	25	—	25	—
Homogenised Pasteurised	4	4	—	4	—
Tuberculin Tested	2	2	—	—	—

Ice Cream and Ice Cream Premises

There are eleven firms or persons registered for the manufacture of ice cream, four producing a hot mix and seven using a complete cold mix powder. The number of retailers registered for the sale of ice cream is 730.

During the year 776 visits were made to premises at which ice cream was manufactured or sold. Samples taken for bacteriological examination numbered 85, details are given in the table on page 102.

The very small number of unsatisfactory samples were found to be due to poor sterilisation of equipment at retailers, to whom advice was given.

Samples of Ice Cream

Total number of samples submitted for examination	Local manufacturers			National concerns		Satisfactory			Unsatisfactory		
	Ice cream		Ice lollies	Ice cream	Ice lollies	Grade I		Grade II	Grade III		Grade IV
	Hot mix	Cold mix				Ice cream	Ice lollies		Ice cream	Ice lollies	
85*	11	9	—	55	—	61	—	8	2	—	—

* 12 samples proved invalid due to pre-incubation temperature exceeding the statutory limits.

Food and drugs sampling : irregularities of composition

During 1963 a total of 1,139 samples were investigated. Of these, some thirteen were in respect of labelling and were dealt with without reference to laboratory examination. The remainder comprised 539 samples of ordinary milk, 40 samples of Channel Islands milk and 536 food and drugs (other than milk), and 11 miscellaneous food submitted as further investigation of consumers complaints.

The extent of the irregularities is detailed in the table which appears below and subsequently discussed.

Samples submitted for analysis to the Public Analyst and examined for compliance with the Labelling of Food Orders at the Departmental Offices

Nature of Sample	Total No. of samples examined	Reported as Genuine	Adulterations or Irregularity of Composition	Labelling irregularities
Milk—Ordinary	539	499	40	—
Milk—Channel Islands	40	38	2	—
Other Foods	536	473	63	—
Miscellaneous food consumer complaints	11	—	11	—
Samples examined at Departmental Offices for Labelling only	13	11	—	2
TOTALS	1,139	1,021	116	2

Milk

Milk sampling was carried out to conform to the pattern of sampling introduced some 5 years ago as prominence hitherto allotted to milk was again reappraised. The number of milk samples taken is now held to be in keeping with the percentage of adulteration currently encountered. Milk samples were collected at the many and ubiquitous points of production, processing and sale, including the increasing number of milk vending machines and decreasing number of producer-retailers.

Of 539 samples of ordinary milk some 40 were reported as “adulterated” or of irregular composition. In the case of Channel Islands Milk 38 out of 40 samples were found to be genuine, 2 only showing some “irregularity”.

The following details will indicate the nature of the irregularities encountered and their relation to the presumptive and statutory standards.

Milk

Of the 40 ordinary milk samples which were the subject of “irregular” reports :—

Churn Samples

- (a) 8 samples of churned milk forming part of 2 consignments containing 204 galls. were reported to be deficient in milk fat. Though the individual churns were of irregular composition the consignments complied with the legal standard.

- (b) 5 samples taken from churns of two consignments comprising 14 churns containing 133½ galls. were reported to be low in milk fat and other solids. Similarly the consignments were of genuine milk though slightly low in solids not fat.
- (c) 13 samples of churned milk part of 2 consignments comprising 40 churns containing 339 galls. were reported to be deficient in milk fat and solids not fat. Assessed as a whole the consignments complied in all respects with the presumptive standard for ordinary milk.
- (d) 3 samples of churned milk part of two consignments from the same producer were reported as deficient of 9.2%, 10.9% and 6.7% solids not fat and containing 1.5%, 2.5% and 4% of added water respectively. During an inspection of production methods at the farm it was found that inefficient drainage of the cups of the cluster fittings of the milking machines after cleansing, resulted in small amounts of water being retained, this in turn passing to the milk during the initial stages of milking. The producer was advised and requested to ensure complete drainage of all apparatus prior to use. Further samples were found to be genuine milk.
- (e) Two samples of churned milk part of a three churn consignment of 23½ galls. were reported to be deficient of 6.4% solids not fat and containing 2% extraneous water. Churn 2 deficient of 4.7% fat and 3.5% solids not fat. A farm visit indicated that the farmer had failed to ensure complete drainage of milking utensils. Advice was given and a request made that more efficient supervision of production methods be introduced. Further samples were of satisfactory composition.

Bottled Milk

- (f) A pint bottle of farm-bottled T.T. milk was found to be deficient of 3.3% milk fat. The farmer was advised to ensure that morning and evening milk was thoroughly mixed. Further samples were found to be satisfactory.
- (g) Three cartons of pasteurised homogenised milk reported as containing respectively 2% and 2 cases 1.7% of extraneous water and small deficiencies of solids not fat, were from the same source and taken during abnormally cold weather. It was found that the water used to rinse the plant after *insitu* sterilizing had apparently frozen in the exposed pipe lines and resulted in small quantities of water being taken up with the milk when processing was resumed. Further samples were of satisfactory compositional quality.

Bottled Milk

- (h) Two cartons of pasteurised milk collected from milk vending machines and which emanated from the same source were reported as being deficient of 6% and 10% milk fat respectively. Investigations at the packers premises indicated that the operative on a carton handfilling machine had failed to agitate the milk to ensure even distribution of cream after his tea break. An unevenly balanced final product was the result. The management of the dairy were interviewed and the necessary quality control measures were introduced. Eight follow-up samples were found to be genuine milk.
- (i) Three informal samples of pint bottles of sterilised milk were reported as showing deficiencies of milk solids not fat of 4.5%, 4.1%, 4.2% and containing 1.7%, 1.0%, 3% of extraneous water respectively. Series of follow-up samples were found to be of satisfactory compositional quality. The management were advised and requested to ensure complete drainage of the plant prior to processing. Investigation of processing and plant cleansing procedure indicated that enthusiasm for the practice of hygienic control of the plant had superseded efficient quality control.

Channel Islands Milk

- (i) Two samples of churned milk, part of a 5 churn consignment was reported as 6.2% and 11.3% deficient of milk fat. The total average fat content of the consignment satisfied the prescribed standard.

Other Foods

The total number of samples submitted for analysis was 536 some 63 being the subject of comment by the City Analyst. The irregularities and others which were the subject of complaints are referred to briefly in the following notes :—

Meat Pies

Meat pies sold under various description submitted for analysis during the year were found to contain meat in widely varying proportions. The standard used as the basis for report accepted all meat pies with a meat content of 20% and above as satisfactory, and all meat and vegetable pies satisfactory if the meat content was 10% or over.

Whilst it is appreciated that this tentative standard is below that recommended by the Food Standards Committee it is held to be a reasonable standard which is enforceable. The following details will indicate the degree of variation in meat content encountered.

- (1) Of some 41 steak and kidney pies examined, 29 failed to satisfy the agreed standard.
- (2) 7 pies sold as meat pies were also below the standard.
- (3) Out of a total of 12 meat and vegetable pies the meat content of 3 was low.

All pork pies were found to be of satisfactory meat content.

Where deficiencies were reported the details were discussed with the manufacturers. The formulation of the pies was varied, in some cases, increasing the meat content of the pies and therefore complying with the prescribed standard, whilst in other instances the description of the product was amended to be in keeping with the compositional quality.

Shredded beef suet

Three samples of shredded beef suet taken as part of a series of samples of this product were found to be deficient of beef fat and not to comply with prescribed standard. The matter was discussed with the manufacturers who withdrew all stocks from retail premises.

Soft drink containing excessive Saccharin

Reported as containing an excess saccharin content of 22 gr. per 10 galls. Investigations showed that manufacturer adopted a "topping-up" process in which incompletely filled bottles were completely filled with a stock mixture prior to sealing. In this process the topping-up liquid evidently contained excessive saccharin and was not of the same chemical composition as the compound drink being filled. This was rectified and further samples were found to comply with the prescribed standard.

Dried apricots infested with mites.

An informal sample of dried apricots was found to be infested with mites of the species "GLYCHIPHAGUS". The stock at the vendor's premises was surrendered for destruction and the vendor advised as to stock care and rotation.

Mould in christmas pudding

A consumer complaint in respect of mould growth on a Christmas pudding. Stocks at the retail premises were examined and no further evidence of mould on stocks was recorded. The matter was reported to the Public Health Committee who resolved that a warning be given to the manufacturers.

Labelling irregularity unprocessed crisps.

The name and address of the packer did not appear in full on the carton. Overprinting on the approved pattern was arranged by the packer and further action was therefore deemed to be unnecessary.

Labelling irregularity in non-brewed condiment

The offence related to the declaration of content of the container and was therefore referred to the Weights and Measures Department for their attention.

Orange juice containing less than declared amount of Vitamin C

The product was reported as being deficient of 6 mgm. of Vitamin C per fluid ounce. Investigations showed that the orange juice was packed some twelve months previously, and whilst it is accepted that a small loss of ascorbic acid may be attributable to ageing, faulty storage, under conditions involving exposure to bright light and proximity to heat would accelerate the deterioration of the Vitamin C content. The facts were referred to the packers who provided quality control reports in respect of the batch concerned, these reports showed that the Vitamin C content of the product when packed was well above the declared content.

It was not possible to obtain samples from the same batch as the bottle in question; further samples of different batches were found to be of satisfactory composition.

Consumers' complaints of Food Abnormalities

The Public's interest in quality control and wholesomeness of all foods sold was maintained during the year, if complaints are any criterion. A continued increase in the variety of foods which were the subject of complaints was recorded.

During 1963 some 82 items were investigated following reference by members of the public. The following will serve to indicate the nature of the complaints and the field of investigations.

Classification of Complaints

	1963
Bread	8
Cake and flour confectionery	8
Chocolate and sugar confectionery	3
Meat	2
Meat pies and pasties	12
Canned Meats	9
Other meat products	5
Baby foods	1
Milk and milk bottles	18
Milk products	2
Soups	1
Fish	3
Wines and soft drinks	2
Miscellaneous foods	8
	—
	82
	—

Cake and flour confectionery

Legal proceedings were instituted in one case under this section—

rodent contamination of walnutine tarts resulted in a fine of £20 and £2 costs.

(a) Bread

A total of 8 complaints were received and investigated during the year. The presence of oily deposits in bread again proved to be a "hardy annual". Management should continue to exert pressure on their staff to avoid incidents of this nature. Although the lubricating oil in general use in the Baking Industry is of vegetable origin its presence in bread is undesirable, as is also the dirt which it conveys.

The shelf life of bread particularly wrapped bread and the collection of unsold bread by van salesmen continues to produce complaints of mould. Strict control of shelf life with a frequent and regular turnover of stocks together with controlled disposal of returns is absolutely essential and should be strictly enforced.

A screw from a baking processing room door lock was found embedded in a loaf of bread. The company were warned.

(b) Meat pies and pasties

Mould, flies and foreign bodies in pies were among the recorded reasons for complaints. Legal proceedings were instituted in two cases, fines totalling £20 were imposed and 4 guineas costs granted.

(c) Matchstick in bun

No action was possible in this instance since it was not possible to ascertain the source of the matchstick, nor when it had entered the substance of the bun.

(d) Wasp in Chelsea Bun

The ubiquitous wasps again find their way to the sweeter portions of our food, resulting in cause for complaint to the department. The case was reported to the Public Health Committee, the result—a warning administered to the vendor.

(e) Milk and milk bottles

18 complaints were received during the year. This total again placed the dairy industry in the unenviable position of the food industry in respect of which the highest number of complaints was recorded, a fact which should not be misinterpreted in view [of the size of the industry and the misuse of milk bottles by a small section of the community.

Warnings were administered in all cases on the instructions of the Health Committee. The following list will serve to indicate the nature and variety of objects found in bottles of milk—

1. A collection of dust and hair.
2. A bus ticket
3. Paraffin taste—undoubtedly due to customers misuse of a milk bottle.
4. A portion of bacon rind resembling and mistaken for a nematode.
5. Cement and cement-like substances.
6. A partly dissolved yellow powder placed in a bottle of milk as a practical joke, found to be custard powder.
7. A pink discolouration, found to be due to contamination of the milk with bovine blood serum.

Legal proceedings

Legal proceedings were taken against 3 persons for offences against the Food and Drugs Act 1955 and the Food Hygiene General Regulations 1960.

Defendant No.	Offence	Fines	Costs	Total Penalties
		£ s. d.	£ s. d.	£ s. d.
10	Did sell a Cornish Pasty which was mouldy, contrary to Section 2 of the Food and Drugs Act, 1955	10 0 0	2 2 0	12 2 0
11	Did sell a Cornish Pasty which was mouldy, contrary to Section 2 of the Food and Drugs Act, 1955	10 0 0	2 2 0	12 2 0
28	Did fail to protect sugar ice coated Walnutine tarts from risk of contamination, in that the said tarts were contaminated by mice in the said premises contrary to Regulations 8, 33(2) and 34 of Food Hygiene (General) Regulations 1960, made under Section 13 of the Food and Drugs Act 1955	20 0 0	2 0 0	22 0 0
28	Did fail to provide and maintain the wash hand basin, hot and cold water, etc., contrary to Regulations 16(2), 33(2) and 34 of the Food Hygiene (General) Regulations 1960, made under Section 13 of the Food and Drugs Act 1955	10 0 0	2 2 0	12 2 0
28	Did fail to provide suitable and sufficient bandages, dressings and antiseptic for first-aid treatment contrary to Regulations 17, 33(2), 34 of the Food Hygiene (General) Regulations 1960, made under Section 13 of the Food and Drugs Act 1955	10 0 0	2 2 0	12 2 0
28	Did fail to provide for the sink, hot and cold water contrary to Regulations 19 (1) (B), 33(2), 34 of the Food Hygiene (General) Regulations 1960 made under Section 13 of the Food and Drugs Act 1955	10 0 0	2 0 0	12 0 0

HOUSING

Individual unfit houses

During the period under review 30 houses were dealt with by individual action, a shown in the table below :—

Housing Act 1957	Houses	Displaced during the year	
		Persons	Families
(a) Houses made subject to Demolition Orders under Section 17(1)	6	12	5
(b) Local Authority owned houses subject to Certificates of Unfitness	—	356	55
(c) Unfit houses made subject to Closing Orders under Section 17 (1)	15	38	13
(d) Unfit houses subject to undertakings not to be used for human habitation under Section 18	—	—	—
(e) Parts of buildings closed under Section 18	4	6	2
(f) Undertakings to repair accepted under Section 16 (4) ..	1	—	—
(g) Undertakings to repair determined (houses repaired) ..	1	—	—
(h) Closing Orders revoked under Section 27	3	—	—

Houses demolished

(a)	In Clearance Areas.. ..	66
(b)	Local Authority owned houses, subject to Certificates of Unfitness	75
(c)	Individual houses, subject to Demolition Orders under Section 17 (1)	6

During the year, 42 families numbering 152 persons were rehoused from Clearance Areas into Council Houses.

Demolition Orders

45, 47, Ruby Street
38, 39, Davis Street
161, 163 Fidas Road

Closing Orders

127, 127a, 135 Portmanmoor Road
30 Victoria Street
18 Bridge Street
72, 72a Thesiger Street
52 Churchill Way
129 Woodville Road
177a Kings Road
4 Windmill Cottages, Caerphilly Road
1 Buzzard Street
150 Bute Street
1 Canal Parade
133 Cowbridge Road East

Closing Orders on Parts of Buildings

74, 76 Kings Road (basements)
162 Cathays Terrace (basement)
32 Bute Street (ground floor only)

Undertaking to Repair

71 Ethel Street

Undertaking to Repair determined

10 Custom House Street

Closing Orders revoked

1, 2 Pottery Row
139 Pearl Street

Clearance Areas**City of Cardiff (Riverside Areas 1, 2, 3, 4, 5, and 6) Compulsory Purchase Order, 1962**

The public local Inquiry was held on the 7th May at the City Hall.

The Minister of Housing and Local Government Inspector's report and recommendations were subsequently received. The Compulsory Purchase Order was confirmed on the 13th August with certain modifications.

- (a) The Minister excluded No. 133 Cowbridge Road East from the Order and considered that it should be dealt with as an individual unfit house. He also excluded Nos. 145, 146 Wellington Street, Nos. 107, 109a, 111, 129/131 and Nos 135-211 Cowbridge Road East, that is the areas of "grey" land, for the exclusion of which, the Council had asked.
- (b) He excluded Nos. 6 Picton Place, 25 Avon Street, 111 and 138 Wellington Street and 113 Cowbridge Road East which he did not find unfit and recommended their transfer to Part II of the schedule of the Order, i.e. land adjoining the clearance areas.

On the general question of financial hardship due to recent purchases and the existence of outstanding mortgages on some of the properties involved in the Order, he understood that the Council had under consideration alternative methods of dealing with this problem. The services of his officers would be available at any time to discuss these matters with representatives of the Council.

Claims for well-maintained payments were made under Section 60 of the Act in respect of 21 houses. He found that twelve of these houses had been well-maintained, 8 had not, and 1 was a fit house which should be treated as "grey" land. He also found that six other properties in respect of which objections had been made were well-maintained. Accordingly, he directed the Council to make well-maintained payments in accordance with Section 60 and subject to the provisions of Part I of the Second Schedule to the Housing Act, 1957, in respect of the following 18 properties :—

5, 16 Picton Place
 4, 6, 8, 14 East Street
 5, 21, 23, 29, 31 Ann Street
 3, 5, 6 North Morgan Street
 116, 120, 121, 123 Wellington Street

The Minister did not feel justified in making awards on claims in respect of the following 8 properties.

7 East Street
 3, 9, 10, 33, 37 Ann Street
 110, 113 Wellington Street

When the Clearance Area and the land shown coloured grey on the map referred to in the Compulsory Purchase Order is cleared, it will result in the displacement of 135 families—360 persons.

Objections were received in respect of 48 of the 65 properties which were alleged to be unfit and not owner-occupied. Objections in respect of 27 of these houses were limited to objections from freeholders not in possession. Thus objections by "landlords" related to 21 of the 65 rented properties.

Principal grounds notices were served relating to 63 houses in respect of which, objections had been lodged on the grounds that the houses were not unfit.

The houses included in the Compulsory Purchase Order area are all of two storeys and are about 100 years old. They are built in terraces in Picton Place (43 feet wide from building to building), East Street (26 feet wide), Ann Street (19 to 26 feet wide), North Morgan Street (30 feet wide) and Wellington Street (40 feet wide). All the houses have rear garden or yard space, but except in a few instances the only means of access to the yard is through the house. Except at eighteen houses in Picton Place and North Morgan Street (which have short front "areas" or gardens), the front doors open on to the street-pavement. The houses in Wellington Street and Picton Place are the traditional six roomed type, incorporating two living rooms, scullery and three bedrooms within the main structure, which is "L" shaped, there being a back extension at right angles to the line of

the street. The remainder of the houses are principally of a smaller type consisting of two living rooms on the ground floor with two bedrooms above. Two of the houses on Cowbridge Road have basements which are unfit for human habitation.

All the houses included in the Clearance Areas are used for human habitation with the exception of 5 houses which are vacant. In addition, 6 of the houses are partly used for business purposes, i.e.

- (a) one house has an outbuilding used as a window-cleaner's store.
- (b) one house has an outbuilding used as a piano store.
- (c) one house has an outbuilding used by the owner as a private garage.
- (d) one house has one room used as a men's hairdressers.
- (e) one house has two rooms used as a general shop.
- (f) one house has one room used for preparation and sale of chickens.

Between August 1960 and August 1961, all the houses included in the Compulsory Purchase Order area south of Cowbridge Road were inspected in detail. In January 1962, a count was taken of the persons resident in the area and a report submitted to the Health Committee. The Committee resolved that 83 of the houses be defined to form Clearance Areas, the resolution being confirmed by Council on 12th February, 1962. In the same month (21st February 1962) a further report was submitted to the Health Committee relating to three houses fronting Cowbridge Road, it having been resolved by the Estates Committee to secure clearance by Compulsory Purchase Order, incorporating the adjoining properties on Cowbridge Road. The Health Committee resolved that the three properties be included in the clearance areas previously defined. The clearance areas and Compulsory Purchase Order were confirmed by the Council in April 1962.

One of the 86 unfit houses is the subject of a Closing Order. Inspection of the remaining 85 unfit houses included in the clearance areas showed the houses to have the following features :—

- (a) 43 houses (50%) were found to be in a state of disrepair typical of 100-year old houses having regard to their character and locality; 24 houses (28%) were in a more neglected state and were classified as being in a state of general disrepair; 18 houses (21%) were found to be in a good state of repair taking into account their age, character and locality.
- (b) Instability is not a prominent feature of the main structures of the houses. Some of the houses, however, show signs of bulging or fractures in walls or chimney stacks.
- (c) Dampness is prevalent throughout the area. There is evidence of rising dampness in all the 85 houses; stone flagged floors exist in 65 houses (76%) and these show signs of dampness. In addition, there is evidence of penetrating dampness to varying extent in 81 houses (95%).
- (d) In 76 houses (89%) natural lighting to one or more rooms is deficient. Lighting to the rear of the houses is impeded, mainly by the projecting back extensions of the houses themselves and occasionally by other buildings. 79 houses (93%) are affected in this way.

In the majority of houses natural lighting to passage, stairs and first floor landing depends on a small fanlight window over the front door of the house. In a lesser number of houses, the stairs open off a living room or are arranged laterally between front and rear rooms. As a consequence, lighting to stairs and landings is deficient in 70 houses (82%).

- (e) All the houses are provided with a cold water tap located either in the rear room (ground floor) or in the scullery. In only one house is the scullery entered from the yard, the tap not being accessible from the interior of the house. 47 houses rely solely on the cold water tap and in 4 of them the tap is shared between 3 or more families. In 38 houses, tenants have installed hot water systems, 36 of them comprising geysers over sinks.

In 5 houses fixed baths have been installed in separate rooms. In the remaining 80 houses there is no fixed bath.

- (f) The sanitary conveniences comprise either pedestal water closet basins or water closet pans of the obsolete two-piece hopper type. The water closets are external to the houses, being installed in the yards, in compartments which almost without exception are devoid of satisfactory natural or artificial lighting.

However, internal water closets have been installed in 3 houses (in two houses the water closets open direct into the scullery). In four houses, the single water closet is shared between three or more families.

- (g) All the houses are equipped with a sink and cooking stove. Food preparation, cooking and dishwashing is undertaken in improvised extensions at 22 (26%) houses, which are unsuitable for the purposes. In the remainder of the houses, food cooking and preparation takes place in the rear rooms (ground floor), many of which are damp and deficient in natural lighting.
- (h) Only 2 of the houses (2%) are provided with a properly ventilated food store; at the remaining houses, food is usually stored in various cabinets, cupboards, side-boards or on open shelves and tables.
- (i) Secondary means of access to the houses is only available to a few of the houses, usually those at street intersections. At 70 houses (82%), the front door forms the only means of access and fuel, refuse bins, etc., have to be carried through the houses to and from the yards.
- (j) A feature of the houses in Ann Street and East Street are the back bedrooms having low ceilings with low entrance doors.

Butetown Clearance Areas Nos. 2-16

The Health Committee on 13th November received a report on inspections which had been made of 314 properties in an area bounded by North Church Street, Patrick Street, Bute Street and Canal Parade. Detailed inspection reports relating to 239 houses were submitted and representations made that the said 239 houses were unfit for human habitation. They could be dealt with for clearance by incorporating 236 of them into fifteen Clearance Areas and by the making of Demolition Orders on 3 individual houses. The Committee were satisfied that the 236 houses in the Clearance Areas were unfit and that the most satisfactory method of dealing with the conditions in such Areas was the demolition of all buildings therein. The Council were recommended, subject to the Finance and Estates Committees being satisfied, to declare the houses defined and coloured pink on the map submitted to be Clearance Areas under Section 42 of the Housing Act 1957. The resolution was confirmed by the Council on the 2nd December.

Of the 239 unfit properties, six are vacant by reason of Closing Orders and six have become vacant and derelict without action by the Council, and four are owned by the Council. The remaining 223 properties are occupied by 309 families and 258 lodgers amounting in all to 1,148 persons.

House Repairs

The total number of notices served under all acts was 780 preliminary notices and 336 statutory notices. The following summary gives details :—

EXTERNAL

Roofs to be repaired or reslated	..	..	..	423
Gutters and R.W.P.'s to be repaired, etc.	..	..	..	267
Walls and chimneys to be repointed/repared	..	..	..	71
Yards/paths to be repaired or resurfaced	..	..	..	10
Soil pipes to be repaired/renewed	..	..	..	3
Drains to be cleared/repared	..	..	..	69
Cesspools, etc., to be repaired/cleaned	..	..	..	—
Cesspools to be abolished	..	..	..	—

INTERNAL

Dampness to be cured	..	..	..	123
Interior walls and ceilings to be repaired	..	..	..	160
Floors to be repaired	..	..	..	64
Staircases, etc., to be repaired	..	..	..	21
Fireplaces and flues to be repaired	..	..	..	20
Verminous/filthy premises to be cleaned	..	..	..	3

Legal Proceedings

Defendant Number	Offence	Fines	Costs	Total Penalties	Nuisance Orders
		£ s. d.	£ s. d.	£ s. d.	
3	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	3 3 0	3 3 0	1 month
4	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	3 3 0	3 3 0	3 Weeks
19	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	2 0 0	—	2 0 0	28 days
20	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	3 3 0	3 3 0	28 days
24	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	—	—	28 days
29	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	3 3 0	3 3 0	8 weeks
30	Failure to comply with Notice served under Section 93 of the Public Health Act 1936	—	3 3 0	3 3 0	21 days
25	Unlawful occupation of a basement the subject of a closing order ..	1 0 0	—	1 0 0	

Council Housing Estates and Housing Applications

One inspector with a lady assistant is employed on this work. Their function is two-fold; to inspect council houses which are vacant and to investigate claims for rehousing or transfer on the grounds of ill health.

During the year the following visits were made:

Vacant houses inspected	..	..	..	..	..	577
Number found verminous	..	..	..	..	..	9
Visits to occupied houses regarding vermin	..	..	..	..	..	34
Visits regarding transfers	..	..	..	..	..	583
Visits to council house applicants	..	..	..	..	..	390
Miscellaneous visits	..	..	..	..	..	31
Number of interviews at office	..	..	..	..	..	678

The number of visits made to housing applicants, and to council tenants requesting transfer, rose sharply from 672 in 1962 to 973 in 1963. There was also an increase in the number of persons interviewed at the office for these purposes—from 545 in 1962 to 678 in 1963.

The number of houses found verminous on being vacated fell from 4% in 1962 to 1·5% in 1963. This is the lowest ever recorded, and indicates general improvement in the standard of cleanliness of houses vacated by Council tenants. In all cases disinfestation by spraying with an insecticide was carried out.

Consideration was given during the year to a total of 1,677 applications for rehousing an increase of 169 over those considered in 1962. Of these, 524 were requests for transfers, of which 212 were recommended.

The 1,153 applications for rehousing considered on medical grounds were dealt with as follows :—

Recommended immediate rehousing	..	..	..	..	..	53
Awarded medical points	..	..	..	..	..	253
Transferred to the priority group	..	..	..	..	..	22
Given special priority on account of tuberculosis in applicant's family	..	..	..	..	..	6
Given special priority on account of contact with tuberculosis in another family	..	..	..	..	..	1
No action taken	..	..	..	..	..	818

The number of cases where no action was taken is relatively large. This is because it includes 223 applications from old age pensioners. It is the normal practice to rehouse applicants in this category in date order of application. As most people in old age suffer from some type of ailment, it is not possible to give a high degree of priority to any particular application, unless the medical condition is unusually distressing. However, a larger proportion of new building is being devoted to one-bedroom accommodation, in an effort to meet the growing demand from the older people.

Of the 57 cases recommended for immediate rehousing, 37 were in respect of old age pensioners.

The medical conditions cited by applicants for priority for rehousing or transfer are broadly classified as follows :—

Pulmonary tuberculosis	..	..	..	..	..	90
Non-pulmonary tuberculosis	..	..	..	..	..	7
Asthma, bronchitis and other chest complaints	..	..	..	..	..	394
Nervous complaints and mental illness	..	..	..	..	..	309
Heart conditions	..	..	..	..	..	166
Rheumatism	..	..	..	..	..	97
Skin conditions	..	..	..	..	..	29
Physically handicapped	..	..	..	..	..	138
Other illnesses	..	..	..	..	..	451

The percentage of applications considered on account of pulmonary tuberculosis shows a marked reduction over that for 1962. This is a particularly pleasing feature.

Chest ailments continue to account for the largest number of cases considered. Nervous complaints and mental illness form the second largest group. This again reflects the unsatisfactory circumstances in which many families live and for which rehousing is the only answer. The number of cases considered on account of physical handicap remains high.

"Other illnesses" include those which could not accurately be placed in any other category. They consist of a wide variety of complaints, and occasionally conditions which are not primarily of medical concern.

Improvement Grants

One hundred and sixty seven applications were referred to the department for observations. Inspections were carried out resulting in 12 suggested modifications and 1 refusal. The remaining 154 applications were approved without modification. Difficulty has been found on several applications which were received from owners of houses which are likely to be dealt with in the future under the Housing Act Procedure for slum clearance. After discussions at the Estates Committee, the Council decided to approve grants in certain of these cases.

Rent Act

The gradual decline in applications has continued again, as in 1962. The number of certificates still in force was 115 some of these dating back to the commencement of the Rent Act in 1957.

The following information regarding action taken under the Act during 1963 and the comparative returns for 1960, 1961 and 1962.

PART I.—APPLICATIONS FOR CERTIFICATES OF DISREPAIR

	1963	1962	1961	1960
1. Number of applications for certificates	7	7	32	62
2. Number of decisions not to issue certificates ..	Nil	Nil	4	1
3. Number of decisions to issue certificates	3	4	31	57
(a) in respect of some but not all defects ..	3	3	21	48
(b) in respect of all defects	—	1	10	9
4. Number of undertakings given by landlords under paragraph 5 of the First Schedule	4	3	12	36
5. Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	2	Nil	3	Nil
6. Number of certificates issued	3	4	19	20

PART II.—APPLICATIONS FOR CANCELLATION OF CERTIFICATES

7. Applications by landlords to Local Authority for cancellation of certificates	6	6	25	37
8. Objections by tenants to cancellation of certificates	1	1	7	16
9. Decisions by Local Authority to cancel in spite of tenant's objection	Nil	—	2	4
10. Certificates cancelled by Local Authority	5	5	22	30

HOUSES IN MULTIPLE OCCUPATION

In common with other large towns, Cardiff for many years has had the social problem of a large number of houses being occupied by several families, in many cases severely overcrowded and generally lacking in proper facilities for decent living.

Recent highly publicised events brought the situation into sharp focus before the public and Parliament, resulting in the Housing Act 1961 which gave greater powers to the local authorities to control and improve such houses.

In view of the special nature of this work and the need for a consistent standard, it was decided to appoint a housing inspector to deal exclusively with these properties.

Information as to the addresses of houses in multiple occupation was obtained in a number of ways; by house to house surveys, information from the public, complaints of overcrowding by actual tenants, by reports from the officers of other departments and yet others by advertisements in local shops.

Concern was felt generally concerning the possible repercussions, following vigorous action by the department and it was therefore decided to approach matters cautiously and limit the numbers of houses being handled in case the fear of a flood of evicted persons should become reality and strain the City's Housing and Welfare services and cause undue hardships to displaced families.

This policy would appear to have been fairly successful. Whilst a number of tenants have been evicted, they have generally found other accommodation and there has been no severe strain upon the Welfare or the Housing Department.

In this connection, a number of tenants occupying houses in multiple occupation were rehoused through the normal housing priorities in addition to the hardship cases.

Eighty eight properties were submitted to the Health Committee for their consideration during the year. These fell broadly into two groups, viz. :—

(A) large three storeyed terrace houses with, in many cases, adequate facilities in single room lettings at high rentals or (B) small two storeyed terrace houses, all the tenants sharing the one kitchen and external water closet, with comparatively low rentals.

An analysis of rental figures (see tables page 119) gives an average weekly rental of £2. 6s. 2d., the average of lettings consisting of one to two rooms. Specifically, the average weekly rental for a one room letting was £1. 12s. 0d.

This compares most unfavourably with the general level of controlled rents in Cardiff, similar small three bedroomed terrace dwellings are let at approximately 30/- per week inclusive of rates, a better class of terrace type letting at approximately 40/- weekly, inclusive of rates.

In a number of the larger houses in category (A) the total rent income of the owner was over £25 per week, a generous return on an original modest capital investment.

The 88 houses were occupied by 257 families and 228 single lodgers totalling 1,056 persons, with an average of 4 lettings per house. The highest number of persons found in one house, admittedly large, was 29; this house, however, was well run and had adequate facilities.

39 houses were found to be statutorily overcrowded, 11 severely so. Nine of these eleven have been reduced in numbers to a more suitable level for the facilities available in the house.

It has not been found necessary as yet to introduce management orders; notices have been served under sections 15, 16, 19 of the Act:—

- Section 15. Requiring works to be carried out by the owner to provide additional facilities and improve general conditions. (68 notices)
- Section 16. Requiring the provision of means of escape in case of fire, together with necessary smoke stopping arrangements. (48 notices).
- Section 19. Directions fixing the numbers of persons permitted to occupy the house, bearing in mind the facilities and number of rooms available. (85 notices)

In the first instance, following the usual practices, preliminary notices were served on the owners of such properties as a matter of courtesy.

It should be mentioned in connection with the fire escape notices, that the notices were prepared as a result of the most helpful co-operation of the Fire Department, who inspected all the properties and reported their findings.

In a large number of cases, Section 19 notices were served upon owners whose houses were occupied by numbers of people actually below the figure permitted by the local authority. This was a measure to guard against possible future over-crowding, in that a direction having been made, penalty clauses could be invoked against the offending owner.

After a period, revisits established that little work was being carried out by owners following the service of the preliminary notices and the Health Committee was recommended to serve statutory notices with the following results:

Section 15 Notices

- 21 Completed
- 16 Partly carried out
- 11 No action by the Owner
- 12 Are now void as the houses are no longer in multiple occupation

Section 16 Notices

- 5 Completed
- 2 Partly carried out
- 9 Are now void as the houses are no longer in multiple occupation.

Section 19 Notices

The Act allows for a natural decrease in numbers by families moving at their convenience.

It should be noted that 52 of these notices were served as stated previously as a safeguard against possible future overcrowding. Nine have been complied with where there was severe overcrowding.

Positive action under the Housing Act 1957 was taken in 1 case only as this was an extreme example of overcrowding.

The Health Committee then decided to select five houses as a Pilot Scheme, to employ the Local Authority's power to carry out work in default.

The choice of these houses was governed by the need to avoid houses where it was feared that such action by the Local Authority would result in prompt eviction by the landlord, thus causing hardship to the displaced tenants.

A number of builders were asked to submit tenders and following Council approval, the work was duly placed.

Early in the year a need was felt to obtain an overall picture, and a breakdown was carried out on the figures deduced by inspection of the first 98 houses visited under the Act, and the following tables were drawn up in order to clarify the problem.

No. of Persons occupying the 98 Houses

Adults		Children over 10		Children under 10		Total Persons
Male	Female	Male	Female	Male	Female	
428	324	31	40	140	177	1140

No. of Persons in each House

3	Persons	in	1	house
4	"	"	1	"
5	"	"	2	houses
6	"	"	4	"
7	"	"	13	"
8	"	"	11	"
9	"	"	8	"
10	"	"	7	"
11	"	"	6	"
12	"	"	6	"
13	"	"	11	"
14	"	"	3	"
15	"	"	5	"
16	"	"	3	"
17	"	"	5	"
18	"	"	3	"
19	"	"	4	"
20	"	"	2	"
21	"	"	2	"
24	"	"	1	"
25	"	"	1	"

No. of Houses Related to No. of Lettings

No. of Houses with			No. of Houses	Total No. of Lettings
2	lettings	..	4	8
"	"	3	19	57
"	"	4	26	104
"	"	5	18	90
"	"	6	14	84
"	"	7	11	77
"	"	8	4	32
"	"	9	2	18
Total ..			98	470

No. of Families Related to No. of Rooms Occupied

No. of Families with	1	room	..	158
"	"	2	rooms	72
"	"	3	"	40
"	"	4	"	4
"	"	5	"	3
				277

A family is defined as one or more adults and children or a man and wife living together.

No. of Single Lodgers Related to No. of Rooms Occupied

				<i>No. of Houses</i>
No. of Lodgers with	1 room	..		168
"	"	2 rooms	..	21
"	"	3 "	..	2
"	"	4 "	..	2
				<hr/> 193 <hr/>

Notices were served to provide extra facilities in the 98 houses to improve conditions and thus make them suitable as houses in multiple occupation. The following table shows the various items required.

Provision of Ventilated food stores	..	..	204
" additional artificial lighting points			74
" hot/cold water supply	..	..	45
" sinks	..	..	60
" cooking stoves	..	..	40
" kitchens	..	..	11
" refuse bins	..	..	27
" improved ventilation	..	..	10
" baths	..	..	7
" water closets	..	..	4
" space heating	..	..	4
" drainage	..	..	2
" yard concreting	..	..	2

Weekly rental figures were obtained for 370 of the 470 lettings. Of the rest, 17 were owner/occupiers subletting and 83 tenants were unwilling to disclose their rental:

				£	s.	d.
Average weekly rental for all lettings disregarding no. of rooms	..	..	..	2	6	2
Highest weekly rental (3 rooms and kitchen)	..	..		5	10	0
Lowest weekly rental (1 room)	..	..	..		10	0
Average weekly rental for 1 room	..	..	..	1	12	0
Approximate controlled weekly rental of poorer type three bedroomed terrace houses inclusive of rates	..			1	10	0
Approximate controlled weekly rental of better type three bedroomed, terrace houses inclusive of rates	..			2	0	0

Some comment should be made on the difficulties of implementing the Act in the light of the department's experience.

The work of the specialist inspector was complicated by the fact that of the 88 houses presented to the Committee, 69 were owned by persons of foreign extraction many of whom spoke poor English and with whom it was difficult to communicate.

There also was, often, suspicion on their part due to their ignorance of the British local government system calling for considerable tact on the part of the inspector.

Rent books were not always available and as many of the tenants had been perhaps only a short while in the house, the name of the owner was not known to them, in many cases a principal tenant collected the rent, and he often was unhelpful.

Lack of co-operation on the part of tenants was fairly common, due to the natural fear of eviction, unfortunately well founded in some cases, especially in those tenants with children, as the difficulty of finding alternative accommodation rises proportionately with the number of children. In a few cases the landlord gave instructions not to admit the inspector. This was overcome by the procedure laid down in the Housing Acts giving due Notice of Entry.

Despite this, tenancies changed frequently, and as time went on the inspector was surprised to find a number of families he had met previously in a succession of different houses. These were generally of the problem family type.

Another complication has been the owner who, having received notices, then evicted all tenants and either left the house empty or sold the house, the notices becoming void. The next visit would find the house again in multiple occupation and the whole notice procedure having to be repeated.

Some owners were found to be holding their houses on mortgage with the City Council. This resulted, in some cases, in action for repossession on the grounds of a breach of the conditions of mortgage.

In many ways this has been a difficult Act to administer, as it has some serious shortcomings and loopholes and it is to be hoped that the prospective amending Bill before Parliament will do much to remedy the position.

One important weakness of the present Act, namely that the recovery of money expended by a local authority in carrying out work in default, at present a charge on the interest in the property of the person on whom the notice was served, will become a charge upon the property. This will undoubtedly give greater security and encouragement to the local authority. Another promising feature of the new Bill is the power to be given to local authorities to make "Control Orders" applicable to "houses which appear to be in such a state that the safety, welfare or health of the persons in them are in need of protection". These would seem to be wide terms of reference indeed. Furthermore, in such houses the local authority may take the place of the owner and exercise all the normal landlord functions, collecting rent, carrying out repairs and being responsible for the good management of the property. With such extra powers it is hoped that more impact will be made on the problem in the future. Even so, the eventual—and only satisfactory solution is the provision of sufficient houses for all.

NOISE ABATEMENT

The number of complaints made of excessive noise during the year was 25 as compared with 20 in 1962 and 32 in 1961.

The complaints can be divided into the following main categories :—

1. Industrial

Noise from vehicle operation at garage during the night.

Noise of banging of tins etc. at yard.

Mobile crane noise and shouting at night at a transport depot.

Chimes from icecream vehicle (2).

Steam exhaust caused by faulty exhaust valve at a brewery, occurring very early in morning.

Noise from compressor at a building site in the city centre.

Noise from stable and loft.

Public address system at vehicle works.

Noise from generator at engineering works (2).

Panel beating (2).

Paint spraying machine.

Refrigerator motor.

Humming noise from machinery at engineering works.

Banging of lorry doors at petrol station.

Machinery at a joinery (2).

2. Domestic

Noise from wireless (3).

Noise from amplified guitars.

Jazz group at night school and at weekends.

The final decision as to how much noise constitutes a noise nuisance has again caused discussion and differences of opinion between the Inspectors and complainants.

In last year's report I wrote at some length on the history of one complaint caused by the siting of light industry in residential areas. The solution to this particular problem as far as the complaining residents are concerned has still not been discovered and during the year 33 visits were made to the area to ascertain if the noise warranted the institution of legal proceedings. Each visit necessitates a minimal 30 minutes listening period so that the period of time devoted to this one complaint has reached approximately 300 man hours.

Attempts have been made to minimise any noise but so far the result of the combined efforts of the department and manufacturer have failed to satisfy the complainant.

Most of the noise complaints dealt with during the year have, however, resulted in a far happier solution than mentioned above. Industrialists are generally aware of their responsibilities to the general public and have been only too willing to act on any advice given by district inspectors.

AIR POLLUTION

Measurement of Air Pollution

Summarised results of three stations, together with the comparable figures for the previous three years, are shown in Table 1. Volumetric readings were also taken at Crofts Street and Llanrumney Avenue and a deposit gauge for local monitoring of the steelworks was in use at Menelaus Street. Table 1 shows total deposited matter and Table 2 the insoluble portion only, of the deposited matter. The downward trend is again apparent in all readings, with the exception of the sulphur dioxide figures which show a slight rise. In the worst case, Moorland Road, the 1963 figure shows an increase of 6.8 per cent. over 1960; this compares favourably with the calculated national emission of SO₂ which has increased by approximately 12 per cent from 1960 to 1962, a figure which would probably be higher if the 1963 results were available. Where solid fuel is replaced by oil for domestic heating, there is probably a decrease in the emission of sulphur dioxide, as the oil used contains less sulphur content than the average solid fuel, but on large industrial steam raising plant, the reverse is true, due to the use of residual fuel oils with a high sulphur content.

Variation of the incidence of pollution as between summer and winter is shown in Table 3. Smoke is two to three and a half times as great in winter as in summer; sulphur dioxide about two to two and a half. Deposited matter in the industrial area shows little variation but the City Hall area is almost doubled in winter. This, again, reflects the effect of seasonal heating on the general level of pollution.

Table 1

Pollutant	City Hall				Curran Road				Moorland Road			
	1960	1961	1962	1963	1960	1961	1962	1963	1960	1961	1962	1963
Smoke (microgrammes per cubic metre) . .	60	51	48	43	100	93	89	89	90	79	73	63
Sulphur Dioxide (microgrammes/C.metre)	72	61	69	70	83	70	85	89	102	92	93	109
Total Deposited matter (tons/sq.ml./month)	13	12	14	13	18	15	15	13	33	30	20	27

Table II
Measurement of Atmospheric Pollution in Cardiff. January—December, 1963

	SMOKE Daily Average (Microgrammes per cubic metre)						SULPHUR DIOXIDE Daily Average (Microgrammes per cubic metre)						INSOLUBLE DEPOSITED MATTER Tons/sq. ml./month			
	City Hall	Curran Road	Moorland Road	Llanishen Res.	Croft Street	Llanrumney Clinic	City Hall	Curran Road	Moorland Road	Llanishen Res.	Croft Street	Llanrumney Clinic	City Hall	Curran Road	Moorland Road	Menelaus Street
January ..	90	181	133	103	183	91	169	198	226	79	260	176	13	5	4	142
February ..	81	160	110	58	129	88	136	176	185	28	172	140	16	10	4	104
March ..	41	78	80	30	86	45	74	95	137	22	112	74	14	17	28	69
April ..	38	77	59	23	67	43	59	80	102	48	85	56	9	7	23	108
May..	18	43	35	10	37	16	39	52	77	20	53	40	6	8	16	304
June..	14	29	22	9	21	10	28	43	49	21	40	28	6	8	18	200
July ..	10	34	23	10	28	14	23	38	62	16	38	32	5	7	24	—
August ..	8	29	20	7	21	11	20	33	49	15	36	27	3	6	14	—
September ..	37	74	45	21	61	33	40	66	75	24	66	51	4	6	15	118
October ..	34	68	47	22	65	23	53	54	89	34	81	62	5	8	20	91
November ..	47	78	66	27	76	43	65	73	129	28	82	64	6	10	34	118
December ..	92	154	119	51	140	83	132	135	132	51	124	117	9	10	12	30
Annual Average ..	43	89	63	31	76	42	70	89	109	32	96	72	8	9(8.5)	18	107
AVERAGE ALL NORTH ENGLAND TOWNS 1958/59 ..	219						217						*9			
AVERAGE SIX LOWEST SITES 1958/59 ..	22						55						1.4			

* Average of all instruments in England and Wales.

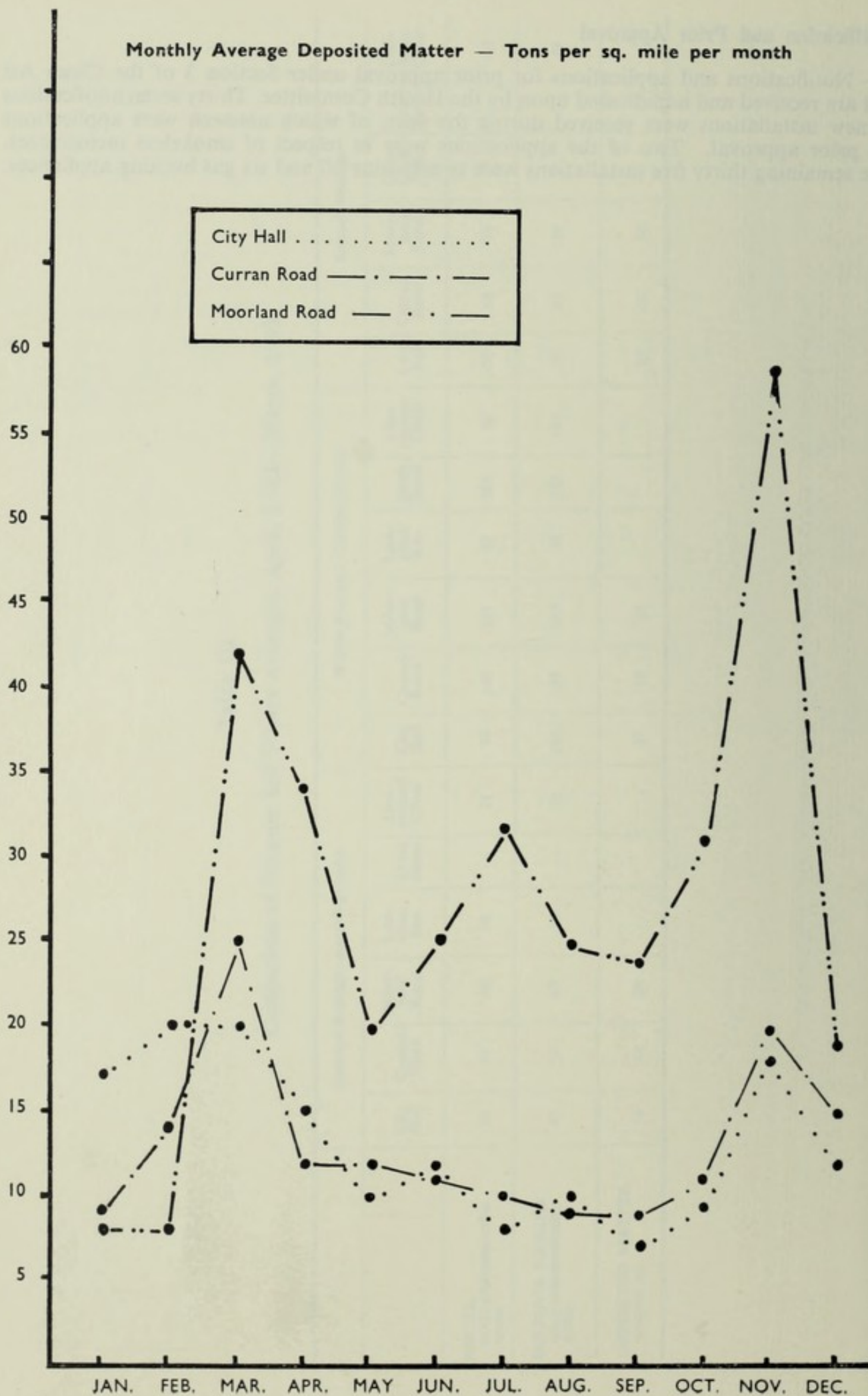
Table III
Comparison of Summer and Winter Averages. April, 1962—March, 1963

	Summer Average: April-September						Winter Average: October-March						Annual Average					
	City Hall	Curran Road	Moorland Road	Llanishen Res.	Croft Street	Llanrumney Clinic	City Hall	Curran Road	Moorland Road	Llanishen Res.	Croft Street	Llanrumney Clinic	City Hall	Curran Road	Moorland Road	Llanishen Res.	Croft Street	Llanishen Clinic
SMOKE microgrammes/cubic metre	24	45	36	16	—	21	75	142	111	57	120	68	50	94	74	37	—	45
SULPHUR DIOXIDE microgrammes/cubic metre	42	53	62	16	—	38	116	139	157	26	152	109	79	96	219	21	—	74
DEPOSITED MATTER tons/sq. ml.	10	16	20				17	14	21				14	15	21			

Notification and Prior Approval

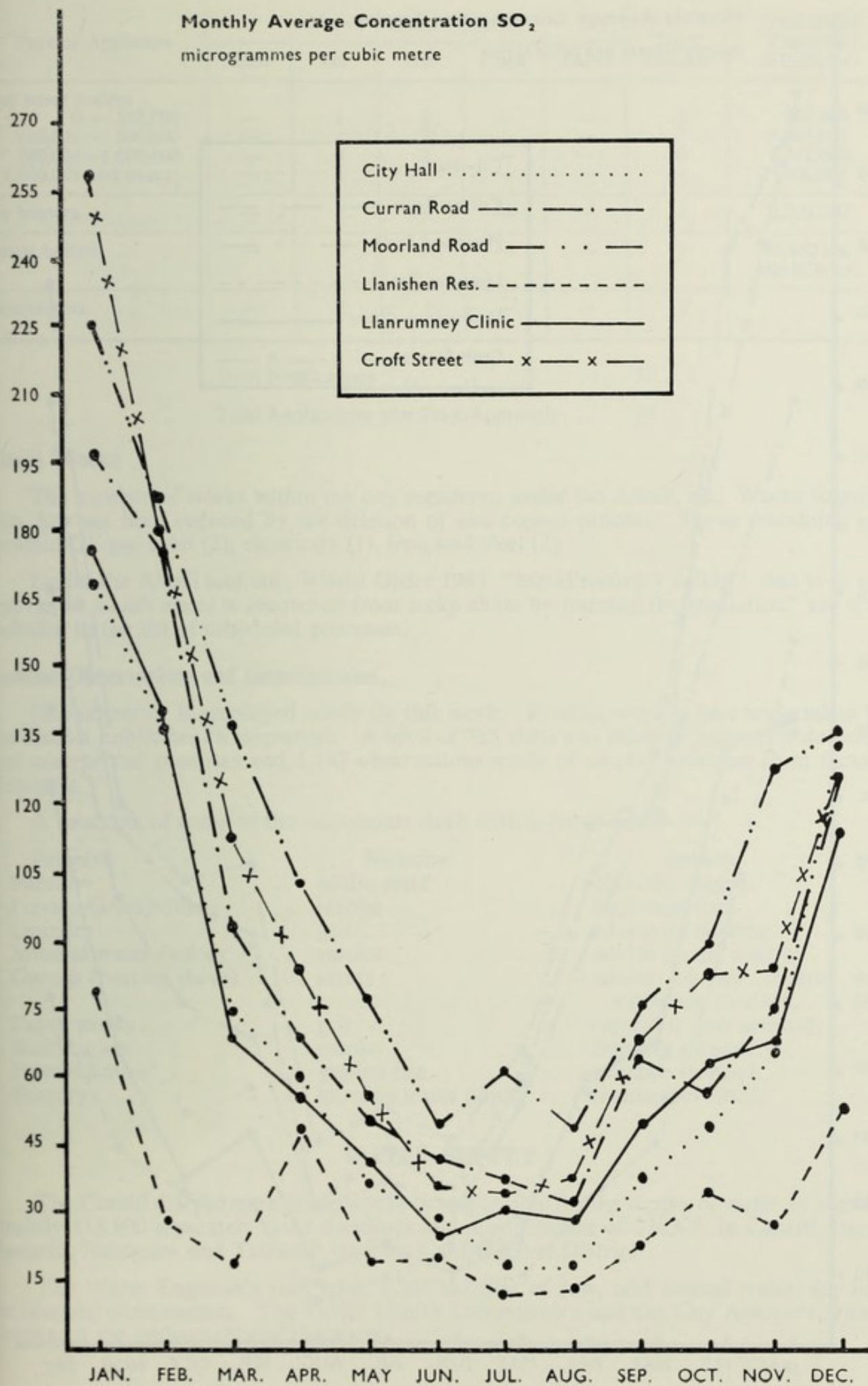
Notifications and applications for prior approval under Section 3 of the Clean Air Act are received and adjudicated upon by the Health Committee. Thirty seven notifications of new installations were received during the year, of which nineteen were applications for prior approval. Two of the applications were in respect of smokeless incinerators. The remaining thirty five installations were twenty-nine oil and six gas burning appliances.

Monthly Average Deposited Matter — Tons per sq. mile per month



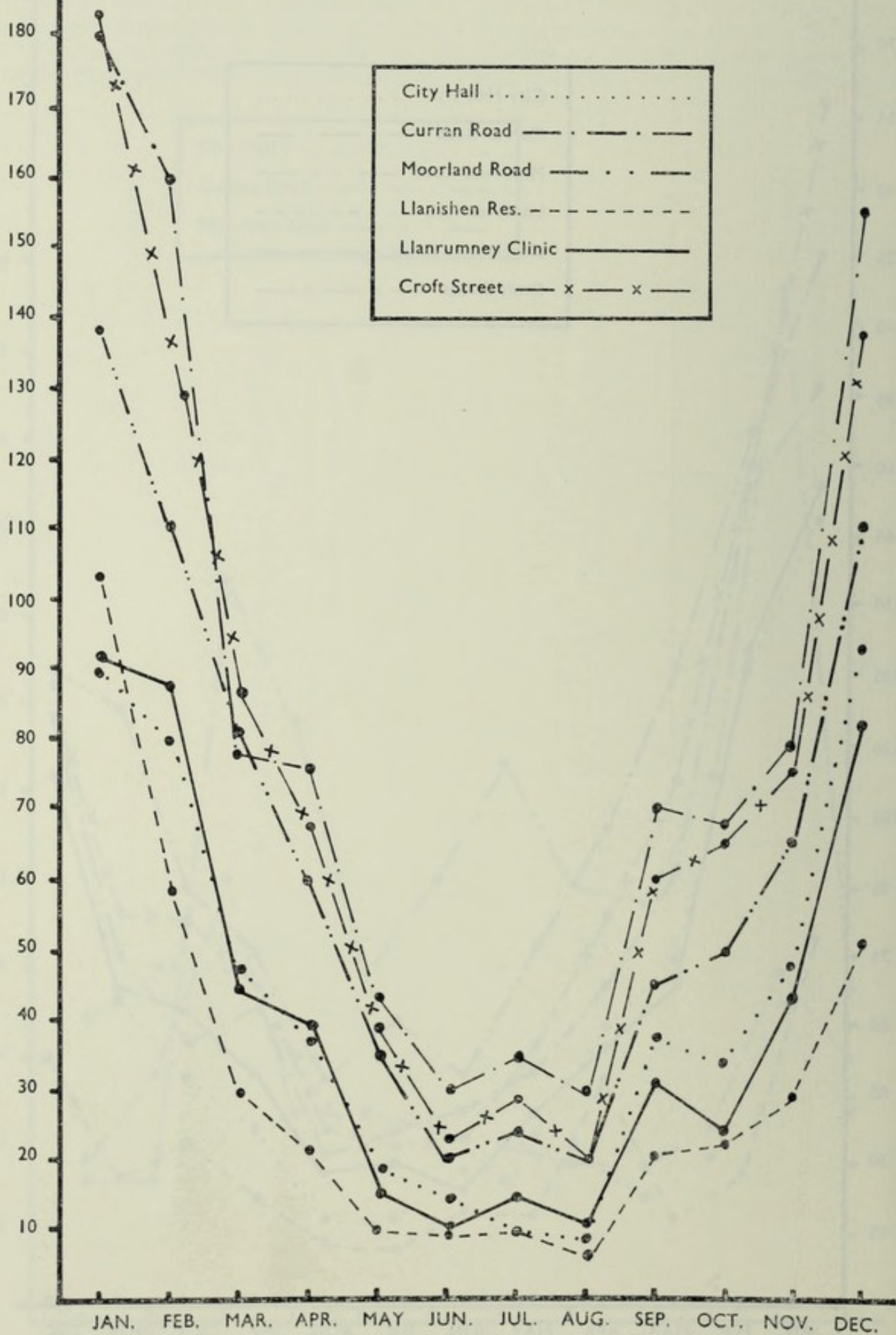
Monthly Average Concentration SO₂

microgrammes per cubic metre



Monthly Average Concentration Smoke

microgrammes per cubic metre



Type of Appliance	NO. OF BOILERS FIRED BY					Total Number	Total added Capacity BTH/hour
	Coal	Oil	Gas	Coke	Other		
Hot water boilers							
0— 100,000	—	1	1	—	—	2	184,000
100,001— 500,000	—	4	3	—	—	7	2,085,000
500,001—1,000,000	—	8	2	—	—	10	8,312,000
1,000,001 and over	—	6	—	—	—	6	25,600,000
Air heaters	—	3	—	—	—	3	2,100,000
Steam boilers	—	7	—	—	—	7	41,660 lbs. steam/hour.
Incinerators	—	1	1	—	—	2	

Total Notifications 37

Total Applications plus Prior Approvals .. 19

Alkali Works

The number of works within the city registered under the Alkali, etc. Works Regulation Act has been reduced by the deletion of one copper process. Those remaining are ceramic (2) gas coke (2), electricity (1), iron and steel (2).

Under the Alkali and etc., Works Order 1963 "Metal recovery works". that is to say "works in which metal is recovered from scrap cable by burning the insulation" are now included in the list of scheduled processes.

Routine Observations and Investigations

One inspector is employed solely on this work. Routine work is also undertaken by the district public health inspectors. A total of 755 visits was made to industrial, domestic and commercial premises and 1,747 observations made of smoke emissions from factory chimneys.

A selection of some of the complaints dealt with is listed below :—

<i>Premises</i>	<i>Nuisance</i>	<i>Remedy</i>
Factory ..	acidic smut	.. chimney lagged.
Private Greenhouse ..	smoke	.. improved fuel.
Laundry ..	grit	.. advice on stoking.
Mineral water factory ..	smoke	.. advice on air control.
Garage (heating stove) ..	smuts	.. advice on air control and extension to stack.
Paper works ..	grit	.. repairs to grit arrestor.
Building site ..	smoke	.. burning stopped.
Private house ..	garden fire	.. practice stopped.
Factory ..	burning waste paper	.. incinerator fitted.

WATER SUPPLY

The Cardiff Corporation Waterworks is responsible for the supply of water to approximately 113,900 separately rated dwellings and a population of 376,670 in Cardiff, Barry, Penarth, Nantgarw and Taffswell, and the Cardiff Rural District.

The Water Engineer's staff took 1,306 samples of raw, and treated water, for bacteriological examination. The Public Health Laboratory's and the City Analyst's reports confirmed the high quality of the water.

No problems of plumbo-solvency have been encountered and added precautions are taken by controlling the alkalinity of the water.

SWIMMING BATHS

There are four swimming baths owned by the Local Authority and two privately owned pools in the City. Testing of water for the Chlorine contents was carried out on 119 occasions. 135 samples were taken for bacteriological and chemical examination.

A description of each bath and the results of the samples taken are given in the following tables:—

Address	Description	Source of water used for filling	Method of Treatment	Frequency of water changing
Guildford Crescent Mixed	75' × 27' × 6' 60,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly circulation
Male	60' × 22' × 6' (2'9") 30,000 gallons			
Female	50' × 22' × 6' (2'9") 30,000 gallons			
Empire Pool (mixed)	165' × 60' × 16' (3') 636,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly Circulation
Llandaff Fields (open-air, mixed)	150' × 90' × 6'10" (1'8") 500,000 gallons	Mains Water	Filtration and continuous Chlorination	Ten hourly circulation
Splott (open-air, mixed)	100' × 30' × 6' (2') 100,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly circulation
Factory (open-air mixed)	80' × 25' × 6' (4') 62,500 gallons	Mains Water	Chlorinated by hand daily (hypochlorites)	Emptied and re-filled weekly
Private School (Girls) (enclosed)	70' × 30' × 8' (2'6") 65,000 gallons	Mains Water	Filtration and continuous Chlorination	Eight hourly circulation

BATH	No. of samples	NUMBER OF ORGANISMS	
		Coliform bacilli per 100 ml.	Faecal coli per 100 ml.
Guildford Crescent	2	0	0
	1	2	0
	1	1	1
	1	18+	18+
Empire Pool	36	0	0
Splott Open Air	22	0	0
Llandaff Fields Open Air	4	0	0
	1	18+	18+
	1	18+	18+
Private Factory	2	0	0
Private School	2	0	0

The samples that indicate high bacterial content were checked against the running procedures for the baths and in each case the action taken to prevent any future reoccurrence has proved successful.

RODENT CONTROL

Seven rodent operatives are employed under the control of a rodent officer.

Sewer Maintenance Treatments

During the first part of the year, despite the very bad weather conditions, some 1,033 manholes belonging to 15 districts which are persistently being infested, were treated with Warfarin poison. The results showed 298 "complete takes", 66 "part takes" and 669 "no takes".

In June it was decided to treat 29 districts including the above 15, with a total of 1961 manholes, with Fluoracetamide poison. All of these manholes were test baited each with medium oatmeal. 639 of the manholes showed takes and were treated with 4gs. of Fluoracetamide poison.

In October, the above 639 manholes were inspected, and their apparent takes recorded. The record shows that 286 manholes had been complete takes, 346 had part takes and 7 no takes. The 639 manholes concerned after having their bait trays cleaned were again each treated with another 4gs. of Fluoracetamide poison. In the first half of 1964 the full treatment of Fluoracetamide poisoning will have been completed, all the above manholes will then be test baited and again dealt with if required.

Forty one other districts, mostly on the outskirts of the City, with a total of 3,076 manholes previously free from infestation and subject to an annual 10 per cent. test bait, were all treated with 2 gs of Fluoracetamide poison, with the exception of 259 which were impossible to bait owing to various reasons—insufficient benching, inability to locate covers, inability to lift covers, or baits which could not be washed off benchings.

Local Authority Premises

These include public works, yards, stores, workshops, depots, Roath Abattoir, parks, baths and all the refuse tips within the City. All the above have been treated during the year (in some cases as many as four times).

Maintenance Treatment for Business Premises

During the year the Corporation undertook to maintain treatments at various intervals for 352 business premises which included cafes, food stores, shops warehouses, cinemas, offices, bakehouses, cold stores, a hospital, breweries, hotels, bingo halls, the Central Market, garages, bus depots, refuse tips, cleansing depots and farms. This is an increase of twelve premises over last year, an increase in value of £289. 10s. 0d. Contracts range from £2. 10s. 0d. to £63. 0s. 0d. and the total amounted to £3,478 0s. 0d. Single treatments for 114 business premises were also carried out for the total sum of £246. 0s. 0d. Thus the total income was £3,724. 0s 0d. an increase of £332. 15s. 0d. over the income for 1962.

Private dwellings

A free service is given to domestic premises, and during the year 1,411 complaints were dealt with. In all, 679 premises were dealt with for rats, 119 for mice, the remaining 613 were investigated, and where necessary test baited without establishing the existence of any infestation. Medium oatmeal with 5 per cent. of No. 5 Warfarin poison was used throughout the year. The bodies of 63 rats and 30 mice were recovered during the above operations and some 199 suspect drains were reported by the operatives. Without exception all proved to be defective after being tested.

Analysis of Surface Infestations

This is reproduced in the form required by the Ministry of Agriculture, Fisheries and Food for the year ending 31st December, 1963.

	TYPE OF PROPERTY				
	Non-Agricultural				
	(1)	(2)	(3)	(4)	(5)
	Local Authority	Dwelling Houses (inc. Council Houses)	All Other (including Business Premises)	Total of Cols. (1), (2) and (3)	Agricultural
I. Number of properties in Local Authority's District (See Notes 1 & 2 overleaf)	291	68,532	10,562	79,835	No record
II. Total number of <i>properties inspected</i> as a result of <i>Notification</i> (See Note 3)	67	1,411	444	1,922	2
No. of such properties found to be infested by:					
Common rat Major	4	Nil	Nil	4	1
Minor	35	679	230	944	1
Ship rat Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
House mouse Major	Nil	Nil	Nil	Nil	Nil
(See Note 4) Minor	15	118	66	199	—
III. Total number of <i>properties inspected</i> in the course of <i>survey under the Act</i>	Nil	Nil	Nil	Nil	14
No. of properties found to be infested by:					
Common rat Major	—	—	—	—	5
Minor	—	—	—	—	2
Ship rat Major	—	—	—	—	—
Minor	—	—	—	—	—
House mouse Major	—	—	—	—	—
Minor	—	—	—	—	—
IV. Total number of <i>properties otherwise inspected</i> (e.g. when visited primarily for some other purpose)	468	3,652	7,807	11,927	Nil
No. of such properties found to be infested by:					
Common rat Major	—	—	—	—	—
Minor	—	—	—	—	—
Ship rat Major	—	—	—	—	—
Minor	—	—	—	—	—
House mouse Major	—	—	—	—	—
Minor	—	—	—	—	—
V. Total inspections carried out including re-inspections (To be completed only if figures are readily available) ..	576	5,063	9,405	15,044	16
VI. Number of infested properties (in Sections II, III & IV) treated by L.A.	54	797	296	1,147	9

Farms.

The farms within the City, fourteen in all, have been inspected during the year, two of which were under contract to be serviced by the Corporation; two other farms suffered light infestations and, the occupiers made their own arrangements to deal with the matter, Warfarin being used as poison; the remaining ten were free from infestation.

Other Activities

Twenty seven wasps nest were destroyed, and the sum of £19. 10s. 0d. received for this service.

Pigeons

282 adult birds, 24 young and 108 eggs were removed at night from Corporation Buildings, the City Hall, Cardiff Castle, Clare Road Depot and Trade Street Depot.

FACTORIES

The number of Factories on the register numbered 1,196. Inspection of factories is carried out as a normal routine of the District Inspector and also as a result of notification by Her Majesty's Inspector of Factories. Details of the work carried out is indicated in the following table :—

1. Inspections for Purposes of Provision as to Health

PREMISES (1)	Number on Register (3)	Number of		
		Inspections (4)	Written Notices (5)	Occupiers Prosecuted (6)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	71	49	—	—
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	990	372	10	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)	135	45	2	—
TOTAL	1,196	466	12	—

2. Cases in which Defects were found

PARTICULARS (1)	Found (3)	Remedied (4)	Referred to H.M. Inspector (5)	Referred by H.M. Inspector (6)	Number of cases in which prosecutions were instituted (7)
Want of Cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	2	1	—	—	—
(b) Unsuitable or defective	17	17	—	—	—
(c) Not separate for sexes	2	2	—	—	—
Other offences against the Act (not including offences relating to Outwork) ..	—	—	—	—	—
TOTAL	21	20	—	—	—

SHOPS ACT 1950

770 initial inspections and 184 reinspections of shop premises were made during the year. The main purpose of inspection is to ensure that the health, welfare and comfort provisions of the Act are complied with.

Attempts were made at the end of the year to standardise the collection of Local Closing Orders but after correspondence with the local trade organisations it was decided that no action was necessary.

GENERAL ENVIRONMENTAL HYGIENE

Complaints and consequential inspections

4,375 complaints were received by the department during the year on public health matters. Individual complaints made to the district Inspector during normal routine work numbered 1,875.

The investigations of these complaints and the necessary subsequent action resulted in a total of 10,141 reinspections being made.

Other visits and interviews in the course of routine action totalled 20,861. Details of which are given in the corresponding sections of the report.

Drains and Sewers

The sewerage system within the City has been reasonably adequate with the possible exception of the Eastern Area, where extensive housing development has taken place, resulting in overloading of the system. The diversion scheme to cope with this overloading is now virtually complete and will, when finished, prevent any further occurrence of this problem. Further schemes are being prepared to cope with the future development of the area including a new pumping station.

The relief schemes for the Cowbridge Road and Powys Road areas progressed satisfactorily and at the end of the year were 90 per cent. completed. A new station was completed in Drope Road, Ely, to serve the new residential area.

Considerable repair and maintenance had to be carried out to several systems in the area mainly as a result of old age and, in some cases, the growth of transport.

Refuse Disposal and Dustbins

The Cleansing Superintendent reports that further satisfactory progress has been made by the dustbin inspector. 33,367 houses and shops have been inspected during the year, making a total of 65,550 since the commencement of the scheme to improve the domestic bin problem. It is stated that eighty-five per cent. of premises in the city now have satisfactory bins.

The Cleansing Superintendent also reports that a start has been made on the older areas and the public generally are proving co-operative, little difficulty now been encountered following notices to provide new bins. The National Assistance Board gave help to old age pensioners to meet the cost of new bins.

A drive has been made to prevent dumping of bulky household objects such as old mattresses and furniture by increasing the service of free collection of these articles. Some success can be recorded. Dumped derelict cars are an increasing problem, the Cleansing Department is removing an average of two a week, despite the complication of legal difficulties.

Side loading vehicles are being replaced by compression type rear loading vehicles, which are easier and cleaner to load and considerably reduce the amount of spillage during collection of refuse.

Infectious Diseases—Epidemiological Enquiries

During the year the following visits, etc., were made in connection with the investigation of infectious diseases :—

Enquiries :	Food poisoning	..	..	..	..	..	98
	Dysentery	..	..	..	..	..	120
	Scarlet Fever	..	..	..	..	..	24
	Small pox	..	..	..	..	..	16
	Other diseases	..	..	..	..	..	196
	Visits, Contacts and surveillance	..	..	..	..	..	320
Samples :	Stools	..	..	..	..	..	497
	Others	..	..	..	..	..	298

Details of some of the routine measures in connection with infectious disease control are also given in the section on Bacteriology of Foodstuffs on page 97.

Caravans

Once again the caravan site at Pontcanna Fields was open during the summer months catering mainly for visitors to the city and holiday makers en route for West Wales.

Although the number of caravans using the site increased, being 78 as compared to 67 in 1962, the actual number of "caravan days" dropped to 286. The majority of caravanners stay only for one or two days, although the site is used by a surprisingly high number of overseas tourists, who stay for longer periods.

The district inspector made 31 visits to the site, and on no occasion was there cause for complaint. Towards the end of the year arrangements were well in hand for the construction of a separate toilet block for the sole use of the caravan dwellers. In addition to providing better overall facilities, this will alleviate the problem caused during the first six weeks of the football season, when the existing facilities are in great demand.

Unauthorised caravan sites were still a problem. Several occupiers of land removed caravans after warnings from inspectors, but legal proceedings were instituted under the Caravan Sites and Control of Development Act 1960 against one landowner on three occasions who persisted in permitting a number of caravans to occupy a portion of his land, without a site licence, despite having been fined for the same offence in 1962. The prosecutions resulted in fines and costs totalling £226. 5s. 0d. but the caravans have not yet been removed and further proceedings are envisaged.

Inspectors co-operated with the Town Clerk's department in attempting to remove gypsies from Corporation land in the Leckwith area. Strong measures were taken including injunctions and in the case of one man, imprisonment, to no avail. Earth banks were raised in an attempt to prevent access to the open land but these proved ineffectual as the gypsies broke down these banks and reappeared in other areas. This would appear to be a problem that will only be permanently solved by development of the land as factory sites and playing fields.

Lodging Houses

Twenty-seven applications were received from Keepers of Seamen's Lodging Houses for the renewal of their annual licenses. One was refused because of the conditions prevailing on the premises but a second application was made after the necessary works had been carried out and was approved.

The two Common Lodging House licenses were also renewed.

Close supervision of all the lodging houses was maintained and a total of 134 visits were made during the year.

Keeping of Animal & Pet Shops

Ten applications were received during the year. In each case an inspection was made and all the applications were approved.

Visits in connection with the keeping of animals were as follows :

Pet Shops	..	..	38
Piggeries and Stables	..	..	44
Others	..	..	12

Knackers Yards & Offensive Trades

There is one Knackers Yard in the City subject to an annual Licence under Section 62 of the Food and Drugs Act, 1955.

Details of horses dealt with during the year were :—

Horses slaughtered	..	39
Horse carcasses received	..	70

Offensive trades are carried out at two premises carrying on the business of tripe boilers. Twelve visits during the year were made and the premises were found to be satisfactory on each occasion.

Pharmacy & Poisons

Licences were renewed in respect of 154 premises and 2 licences were issued to new applicants.

Hairdressers

The registration of hairdressers under Section 33 of the Cardiff Corporation Act, 1961 was nearly completed in 1962. Only 19 premises applied for registration during this year. The byelaws made in 1962 were enforced in all the premises.

Rag Flock & Oother Fillings Act, 1951

Five samples of cotton felt, two washed flock, loose flock, and loose fibre were submitted for examination. All the samples were found to conform to the prescribed standard.

Fertilizer and Feeding Stuffs Act, 1951

Number of Samples submitted for analysis	RESULT OF EXAMINATION		
	Analysis		Other Irregularities
	Satisfactory	Unsatisfactory	
Fertilizer	5	—	—
Feeding Stuff	32	—	—

MISCELLANEOUS INSPECTIONS

Verminous Premises

Total visits and inspections	..	..	..	..	324
Infestations : Local Authority property	..	..	..	..	41
Infestations : Other property	..	..	..	..	81

Public Conveniences

Inspections	99
Reference re defects	6

Places of Public Entertainment

Visits Cinemas, theatres	20
Visits Outdoor entertainment	3
Visits Others	—
Notices served, references made	2

Care of the Aged, etc.

Visits	101
Insanitary conditions found	30

STAFF

The shortage of district public health inspectors was not overcome during the year. The establishment for pupil public health inspectors was increased to six and it is expected that the vacancies for pupils will be filled before the college year commences in September.

Mr. S. C. Best left to take up an appointment with Porthcawl U.D.C. Mr. R. Long, joined this Authority from Bridgend U.D.C. after qualifying as a public health inspector.

Mr M. Vincent and Mr. C. Langmaid were appointed as pupil public health inspectors.

Examination successes were as follows :—

Public Health Education Board Diploma—Intermediate

Miss J. Tyrrell
Mr. A. Lloyd

Diploma of Municipal Administration—Intermediate

Mr. D. M. Cooper

Report of Veterinary Officer, Chief Meat Inspector, and Abattoir Manager

By J. H. M. HUGHES, M.R.C.V.S., D.V.S.M., F.R.S.H.

The Veterinary Section of the Department embraces:—

- (1) The administration of the Diseases of Animals Act 1950 and all statutory Orders and Regulations made thereunder as far as they relate to the City of Cardiff.
- (2) The management of the Municipal Abattoir and Wholesale Meat Market including the collection of tolls and charges for use of the premises and services provided.
- (3) The ante-mortem and post-mortem inspection of animals, carcasses and organs at the abattoir.
- (4) The marking of carcasses intended for human consumption in accordance with the Meat Inspection Regulations 1963.
- (5) Veterinary attention to livestock at Whitchurch Hospital Farm according to financial arrangements made between the Corporation and the Hospital Management Committee.
- (6) Veterinary Services to Cardiff City Police in connection with the Protection of Animals Acts.

Diseases of Animals Act, 1950

The principal purpose of the Act, and of the Orders and Regulations made under it, is to control or eradicate certain defined diseases of animals and poultry which hinder agricultural economy or which present public health problems. The Act further provides for the humane treatment of animals in transit and imposes restrictions on the import of animals, meat and therapeutic substances from abroad which may introduce diseases which are not normally present in this country. The diseases at present scheduled under the Act are Foot and Mouth Disease, Anthrax, Swine Fever, Fowl Pest (Newcastle disease), Bovine Tuberculosis, Sheep Scab, Rabies, Parasitic Mange in Horses, Sheep Pox, Rinderpest, Contagious Bovine Pleuro Pneumonia, Glanders, Epizootic Lymphangitis, Psittacosis and Virus Hepatitis in Poultry. Machinery also exists for the control of Brucellosis (Abortus and Melitensis), Warble fly infestation and the slaughter of bovine animals giving a positive reaction to the tuberculin test. As a result of measures taken a number of the diseases mentioned are now extinct in Great Britain.

The Swine Fever Order 1938 and 1963.—The 1963 Order, came into operation in March, revoked the 1938 Order and re-enacted the principal provisions. It provides for the changed government policy towards the disease whereby control measures have been replaced by a policy of complete eradication by means of slaughter, with compensation, of all pigs on an infected place. The compensation factor has brought to light many concealed and unidentified cases and resulted in the slaughter of 254,528 pigs during the year. Eight suspected cases were investigated in the City all of which were negative. Movement restrictions were imposed in one highly suspicious case which turned out to be due to *Salmonella Cholerae Suis*.

The Regulations of Movement of Swine Order 1959.—The order is complementary to the Swine Fever Orders and its main feature is the control by licence of pigs moved from livestock markets and pig dealers premises. During the year 879 licences were received authorising the movement of 10,995 pigs to the Abattoir and City piggeries. The store pigs moved to private premises were visited and in every case the condition of the licence requiring 28 days detention was observed.

The Swine Fever (Infected Areas Restriction) Orders 1956 and 1958.—The orders were invoked more frequently during the year in conjunction with the intensive campaign for the 'eradication' of the disease, 57 Infected Areas were declared of which 55 were released from restrictions by the end of the year.

Anthrax Order 1938.—This contagious disease of animals and from them to man continues to be a problem in this country. During the year 330 cases came to light but none were found in Cardiff. As a precautionary measure special bacteriological examinations were carried out on 15 pigs, 10 sheep, 5 calves which arrived dead or died in lairage at the Abattoir.

Rabies Order 1938.—Rabies is now extinct in Great Britain mainly due to severe quarantine restrictions governing the import of canine animals in which the Chief Port Health Inspector plays an important part. As a precaution the City Police reported 28 dogs showing aggressive characters, all of which were found free from communicable disease.

Foot and Mouth Disease Orders 1928 to 1938.—The year was notable by the fact that no case of the disease was reported in Great Britain. Its absence is attributed to restrictions and prohibitions imposed on the importation of meat and meat products from countries where the disease is indigenous. The exporting countries have contributed by vaccination and other control measures.

Fowl Pest Orders 1936 to 1963.—Fowl Pest, including Newcastle Disease and Fowl Plague, is now the most serious of the diseases scheduled under the Act. During the year 2,288 outbreaks were confirmed, none of which were in the City area. The Fowl Pest (Amendment) Order 1963 provided for the discontinuance of the general slaughter policy for infected poultry and its substitution by a voluntary vaccination scheme. The Ministry still retains power to slaughter poultry affected with preacute type of the disease.

The Fowl Pest (Infected Areas Restriction) Orders 1956 and 1958.—During the year 10 Infected Areas were declared, mostly in Lancashire, Yorkshire, and the Eastern Counties, two of which remained under restriction at the end of the year.

The Poultry Premises and Vehicles (Disinfection) Order 1956.—Twelve visits were made to four slaughtering points in the City and returns were made to the Ministry of Agriculture, Fisheries and Food. There was no occasion to serve statutory notices to cleanse and disinfect the premises.

The Live Poultry (Restriction) Orders 1957 to 1963.—The order prohibits the sale by auction of store poultry during the last quarter of 1963.

The Poultry Pens, Fittings, and Receptacles (Disinfection) (Amendment) Order 1963.—The Order Amends the 1952 Order by prescribing the use of an approved disinfectant instead of washing soda previously permitted.

The Disease of Animals (Waste Foods) Order 1957.—Sixty-nine visits were made to pig and poultry keepers premises under the Order. No new licences for boiling plant and equipment were granted during the year.

The Animals (Landing from Channel Islands, Isle of Man, Northern Ireland and the Republic of Ireland) Orders 1955 to 1963.—During the year 52 licences were received authorising the movement of 976 Irish Fat Cattle to the abattoir from ports of Fishguard, Holyhead, and Birkenhead. Special isolation precautions were required in respect of untested cattle from the Republic of Ireland. The 1963 Order amends that of 1955 by extending to Swine Fever the provisions of Part 3 of that Order. It further revokes references to Atrophic Rhinitis in consequence of the Atrophic Rhinitis (Revocation) Order 1962.

The Importation of Carcasses and Animal Products (Amendment) Order 1963.—The Order alters the provisions of the 1958 Order by requiring that certificates accompanying fresh pig meat from Columbia, Denmark, Holland, Sweden, and Switzerland, without licence, shall certify that certain safeguards against Foot and Mouth Disease, and Swine Fever have been observed.

The Zebras (Control of Importation) Order 1963.—The order extends the importation of Horses, Asses, and Mules Order 1957 to include Zebras.

The Importation of Dogs and Cats Order 1928.—One dog, alleged to have escaped from a ship at Cardiff Docks, was destroyed and the carcase burned.

The Importation of Canadian Cattle (Amendment) Order 1963.—The order amends the 1933 order declaring Brucellosis, Tuberculosis and Leptospirosis to be diseases within the meaning of the Disease of Animals Act 1950. Cattle landed from Canada not intended for immediate slaughter must now be certified free from the disease before shipment.

The Animals (Importation) Order 1963.—One goat was imported on licence from West Germany and was confined in quarantine at Maindy Barracks, Cardiff for the required 28 days.

The Transit of Calves Order 1963.—The order provides for the protection of calves (less than 6 months old) from unnecessary suffering and for feeding and watering during transit.

The Disease of Animals (Miscellaneous Fees) Order 1963.—The order determines an amended scale of fees for the examination of animals imported into this country.

The Tuberculosis (Slaughter of Reactors) Order 1950 to 1959.—During the year 77 cattle which reacted to the tuberculin test in Glamorgan and Monmouthshire were slaughtered at the abattoir. Detailed post-mortem examinations were made and the results submitted to the Ministry of Agriculture, Fisheries and Food. In selected cases samples of material were sent for biological examination.

Summary of Outbreaks of Scheduled Diseases

	1963	1962	1961	1960
Anthrax	330	340	255	221
Foot and Mouth Disease ..	Nil	5	103	298
Fowl Pest	2,288	3,384	1,240	2,301
Swine Fever	1,243	1,874	1,071	1,213
Atrophic Rhinitis	Nil	Nil	Nil	1

The Meat Inspection Regulations 1963

The Regulations, which came into operation on the 1st October 1963, imposed a statutory obligation on Local Authorities to carry out, according to a defined procedure the inspection of the carcasses of all animals slaughtered in their areas which are intended for human consumption. They further demand the application of a distinctive mark to the carcasses which are found fit for human consumption. A clause in the Regulations permitting Local Authorities to impose charges, within stated maxima, for inspections carried out at slaughterhouses, supplanted the Slaughterhouses (Meat Inspection Grants) Regulations 1958 as from the 1st April 1963 whereby Treasury grants were payable to Local Authorities who carried out 100% inspection of carcasses. Cardiff Council City determined the maximum charges permitted by the Regulations viz. :—

- (a) two shillings and sixpence in the case of each horse or bovine animal other than a calf.
- (b) Ninepence in the case of each calf or pig.
- (c) Sixpence in the case of each sheep, lamb, or goat.

Protection of Animals Acts 1911—1927

Veterinary services under the Acts, were given at the request of the Cardiff City Police, involving attention to 35 animals which were injured in road accidents. This required the destruction of 2 horses and 10 dogs and the treatment of 2 horses, 20 dogs and 1 swan.

The Riding Establishments Act 1939

One establishment exists in the City for the hire of riding horses. It has been kept under observation and no untoward incident in its management was recorded.

The Slaughter of Animals Act 1958

During the year 8 new licences and 66 renewals of licences were granted by the City Council to persons authorising them to stun and slaughter animals.

Prosecutions

Proceedings were taken against three slaughtermen for slaughtering sheep without previous stunning and against one slaughterman for slaughtering a sheep while not being the holder of a valid licence, all contrary to the provisions of the Slaughter of Animals Act 1958. Convictions were recorded in all cases and total penalties of £20 with £8. 8s. 0d. costs were imposed.

Proceedings were also taken by the Cardiff City Police against two Slaughtermen who were found in the illegal possession of liver for which they were each fined £5.

Veterinary Services to Other Departments

Cardif City Police Forty-six visits were made in attendance to animals under Police control.

Whitchurch Hospital Management Committee .. thirty-two visits were made to the hospital farm in connection with pigs.

MEAT INSPECTION STATISTICS

CARCASES AND OFFALS INSPECTED AND CONDEMNED IN WHOLE OR PART

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	10,822	2,360	4,168	74,545	28,839	Nil
Number inspected	10,822	2,360	4,168	74,545	28,839	Nil
ALL DISEASES EXCEPT TUBERCULOSIS						
Whole Carcases Condemned	Nil	11	30	142	49	Nil
Carcases of which some part of organ was condemned	258	165	35	1,900	1,617	Nil
Percentage of number inspected affected with diseases other than Tuberculosis or Cysticercosis	2.38	7.45	1.56	2.74	5.77	Nil
TUBERCULOSIS ONLY						
Whole Carcases Condemned	Nil	6	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	21	18	Nil	Nil	107	Nil
Percentage of number inspected affected with Tuberculosis	0.19	0.76	Nil	Nil	0.37	Nil
CYSTICERCOSIS ONLY						
Carcases of which some part or organ was condemned	10	2	Nil	Nil	Nil	Nil
Carcases submitted to treatment by refrigeration	10	2	Nil	Nil	Nil	Nil
Generalized and Totally condemned	Nil	Nil	Nil	Nil	Nil	Nil
Percentage of number inspected affected with Cysticercosis	0.09	0.08	Nil	Nil	Nil	Nil

ANIMALS SLAUGHTERED—COMPARATIVE TABLE

	1963	1962	1961	1960	1959	1958	1939
Cattle	13,182	12,041	14,295	11,852	8,900	12,271	6,693
Calves	4,168	6,933	9,113	8,785	6,626	8,942	7,788
Sheep	74,545	83,321	98,710	75,740	88,932	59,423	53,632
Pigs	28,839	26,371	26,895	28,036	28,159	31,007	25,257
Total	120,734	128,566	149,013	124,413	129,617	111,643	93,370

INCIDENCE OF TUBERCULOSIS

				Microscopic Lesions	Percentage	Percentage Corresponding Period 1962
ANIMALS SLAUGHTERED						
Sheep	74,545			Nil	Nil	Nil
Pigs	28,839			107	0.37	0.48
TOTAL CATTLE SLAUGHTERED (including Attested, Reactors and Irish Cattle)						
Cows	2,360			18	0.76	1.43
Steers/Heifers	10,816			21	0.19	0.37
Bulls	6			Nil	Nil	Nil
Calves	4,168			Nil	Nil	0.01
ATTESTED CATTLE						
Cows	2,296			3	0.13	0.11
Steers/Heifers	9,829			1	0.01	Nil
Bulls	5			Nil	Nil	Nil
Calves	4,167			Nil	Nil	Nil
KNOWN REACTORS AND DANGEROUS CONTACTS (Sent in by the M.A.F.F.)						
Cows	64			15	23.43	42.37
Steers/Heifers	11			4	36.36	58.00
Bulls	1			Nil	Nil	Nil
Calves	1			Nil	Nil	Nil
IMPORTED IRISH CATTLE						
Steers/Heifers	976			16	1.64	1.9

INCIDENCE OF CYSTICERCOSIS

Cattle Slaughtered			Number of Cases of CYSTICERCOSIS BOVIS	Percentage of Infestation	Total Percentage	Percentage For 1962
Cows	2,360		2	0.08	0.09	0.07
Other Cattle	10,822		10	0.09		

CONDEMNATION CERTIFICATES

428 Certificates were granted in respect of condemned carcasses, part carcasses, and offals at Roath Abattoir and Meat Market during the year 1963.

TABLE SHEWING CAUSES OF REJECTION OF CARCASSES AND PART CARCASSES

	CATTLE		CALVES		SHEEP		PIGS	
	Total	Part	Total	Part	Total	Part	Total	Part
Tuberculosis/Emaciation ..	6	—	—	—	—	—	—	107
Avian Tuberculosis ..	—	—	—	—	1	—	—	—
Oedema/Emaciation ..	9	—	1	—	71	—	2	—
Traumatism ..	—	12	—	1	—	17	—	39
Septic Conditions ..	—	5	—	1	—	3	4	90
Bonetaint ..	—	93	—	—	—	—	—	4
Decomposition ..	—	91	—	—	44	27	3	47
Moribund, Fevered, Illbled	1	—	9	—	14	—	13	—
Jaundice ..	—	—	3	—	—	—	1	—
Immaturity ..	—	—	14	—	6	—	2	—
Pyæmia ..	—	—	2	—	—	—	—	—
Arthritis ..	—	—	—	—	—	1	—	—
Abscesses ..	—	3	—	—	1	15	2	131
Pleurisy, Acute Septic ..	—	—	—	—	2	11	13	10
Septic Metritis ..	1	—	—	—	1	—	—	—
Pneumonia, Acute, Septic	—	—	1	—	—	—	2	—
Septicæmia ..	—	—	—	—	—	—	4	—
Melanosis ..	—	—	—	—	—	1	—	—
Lymph-Sarcoma ..	—	—	—	—	2	—	—	—
Swine Fever ..	—	—	—	—	—	—	3	—
Steatosis ..	—	1	—	—	—	—	—	—
TOTAL ..	17	205	30	2	142	75	49	428

NUMBER OF ORGANS REJECTED

	Cattle	Calves	Sheep	Pigs
HEADS (including tongues)				
Tuberculosis ..	6	—	—	107
Other Conditions ..	140	13	—	—
TONGUES				
Tuberculosis ..	—	—	—	—
Other Conditions ..	64	—	—	—
LUNGS				
Tuberculosis ..	28	—	—	—
Other Conditions ..	681	—	—	—
HEARTS				
Tuberculosis ..	27	—	—	—
Other Conditions ..	183	—	—	—
SKIRTS				
Tuberculosis ..	27	—	—	—
Other Conditions ..	209	—	—	—
LIVERS				
Tuberculosis ..	2	—	—	—
Other Conditions ..	2,437	6	1,858	894
PLUCKS				
Tuberculosis ..	—	—	—	—
Other Conditions ..	—	14	1,040	1,585
TRIPES				
Tuberculosis ..	—	—	—	—
Other Conditions ..	30	—	—	—
TAILS				
Tuberculosis ..	—	—	—	—
Other Conditions ..	138	—	—	—

WEIGHT OF MEAT AND OFFALS REJECTED FROM ANIMALS SLAUGHTERED AT
ROATH MARKET

	Tons	Cwts.	Qrs.	Lbs.
17 Carcases Beef	3	0	2	0
30 Carcases Veal	—	10	1	10
119 Carcases Mutton	1	16	3	11
49 Carcases Pork	2	1	2	10
139 Part Carcases Beef	4	7	0	25
2 Part Carcases Veal	—	—	—	16
55 Part Carcases Mutton	—	5	2	0
407 Part Carcases Pork	2	9	1	11
Beef Offal	4	12	2	10
Calf Offal	—	—	2	3
Sheep Offal	1	3	3	7
Pig Offal	2	13	0	0
TOTAL	23	1	1	19

WEIGHT OF MEAT AND OFFALS REJECTED EX—OTHER SLAUGHTERHOUSES

	Tons	Cwts.	Qrs.	Lbs.
23 Carcases Mutton	—	7	3	17
66 Part Carcases Beef	3	17	3	4
20 Part Carcases Mutton	—	2	1	10
31 Part Carcases Pork	—	5	3	3
Beef Offal	—	5	2	15
Calf Offal	—	—	1	11
Sheep Offal	—	1	1	19
Pig Offal	1	11	1	5
TOTAL	6	12	2	0

TOTAL MEAT AND OFFAL REJECTED DURING 1963

29 Tons 13 Cwts. 3 Qrs. 19 Lbs.

The Abattoir and Meat Markets (General)

The total number of 120,734 animals slaughtered at the abattoir shows a decrease of 7,832 on the 1962 figures. While the numbers of cattle and pigs slaughtered were higher than the previous year, there was a significant fall in sheep which is ascribed to the inclement winter of 1962/63 when large numbers were lost. It is estimated that 70% of all the meat consumed in Great Britain was derived from home killed animals during the year and it is anticipated that this high level of home production will be maintained or increased by restriction of imports and the development of large beef feed-lots. The long awaited report of the Verdon Smith Committee into the marketing and distribution of fatstock and meat, expected at the latter part of the year, was not forthcoming and the recommendations of the Committee may have an influence on the future slaughtering and marketing arrangements in this country.

The disease situation in animals slaughtered was very gratifying, particularly in regard to tuberculosis where the figures in cattle from attested herds was down to 0·02%. The overall incidence of 0·21% includes known reactors to the tuberculine test and some Irish cattle from herds not fully attested. A disturbing feature is the persistence of *Cysticercus Bovis*, the intermediate stage in the development of a human tapeworm. The incidence of the condition here remains rather constant but it is on the increase in some northern districts. The Veterinary Public Health Association is currently engaged on investigations of the condition with a view to making recommendations for its control or

elimination. The virtual absence of mechanical refrigeration at the abattoir was responsible for heavy losses of meat during the summer months from bone-taint and decomposition, a matter which will be rectified in the proposed new premises.

During the early part of the year sites for a new abattoir and meat market were investigated at Heol Trelai, Tyndall Street, and Leckwith Road, all of which were found unacceptable to the meat traders or were rejected by the Council. Towards the latter part of the year a solution was found by the City Council approving the Dumballs Road site which they previously rejected and a lay-out plan prepared by the City Architect was agreed by the Health Committee and approved by the Council. The site meets the demands of the meat trade, being central and well situated in relation to established wholesale meat depots. It is anticipated that final plans for the new premises will be completed before the end of next year.

The long delay in the quest for a site has disturbed the Minister of Agriculture, Fisheries and Food, whose Chief Technical Advisor visited the existing premises in Adamsdown. As a result of his report the Minister insisted on the Corporation carrying out the minimum requirements of the construction regulations, estimated to cost £12,350 by the agreed date of the 1st January 1965. A further attempt will be made to get a postponement of this date in view of the progress made in obtaining a suitable site for the new undertaking.

REPORT OF THE CITY ANALYST FOR 1963

by

A. R. PHILLIPS, B.Sc., F.R.I.C.

I have the honour to present the Annual Report on the work of the City Analyst's Laboratory during 1963.

My appointment as City Analyst did not commence until March, 1964 so that the work which is covered by this report was carried out under the direction of Dr. L. E. Coles, B.Pharm., Ph.D., F.P.S., F.R.I.C., until the end of November and continued under the direction of Mr. R. H. McKinlay, F.R.I.C., as Acting City Analyst.

I wish to express my appreciation to the Medical Officer of Health and the Health Committee for their kind welcome on taking up my appointment and thank them for their continued interest in the work and welfare of the laboratory.

I would also like to acknowledge the excellent work which has obviously been carried out by all members of the laboratory staff during 1963.

The form of presentation of this report has been carried out on similar lines to that of the previous year.

The total number of samples examined during the year was 6,664. Of these 5,815 were for the City of Cardiff and 849 were for the County Borough of Swansea. The samples may be classified under the following headings :—

For the City of Cardiff :—

Under the Food and Drugs Act	1,126
Under the Milk (Special Designation) Regulations ..	88
For the Port Health Authority	203
For the Public Health Department :—	
Under the Fertilisers and Feeding Stuffs Act	40
Atmospheric Pollution :—	
Deposit Gauge Analyses	92
Sulphur dioxide Determinations	1,777
Smoke Measurements	1,780
Foods	18
Waters	15
Other Articles	8
For the City Architect's Department	2
For the City Surveyor's Department	23
For the City Treasurer's Department	7
For the Waterworks Department	620
From other Sources	16
	— 5,815

For the County Borough of Swansea :—

Under the Food and Drugs Act	569
For the Port Health Authority	7
For the Public Health Department :—	
Atmospheric Pollution :—	
Deposit Gauge Analyses	72
Lead Peroxide Cylinders	36
Waters	41
Other Articles	2
For the Borough Engineer's Department	10
For the Waterworks Department	91
For the Weights and Measures Department	21
	— 849

6,664

A separate report on the work carried out for the County Borough of Swansea is made to the Swansea Health Committee.

FOOD AND DRUGS LEGISLATION

An important part of the statutory duties of a public analyst is in connection with the Food and Drugs Act, 1955 and Regulations made under it.

New legislation is continually being made and often presents the public analyst with additional analytical problems.

During 1962 a number of new enactments were passed. These, together with various official reports and recommendations which will affect the work of the laboratory are summarised below.

The Soft Drinks Regulations 1963.

The principal changes to the previous Soft Drinks Order include :— new standards of composition and labelling for citrus fruit drinks; increased minimum sugar requirements and reductions in the amounts of saccharin permitted in soft drinks; specified declarations when saccharin is present; definitions of the acids which soft drinks may contain.

It was intended that these regulations should come into operation in July 1964, but as a result of representations from manufacturers the operating date has been postponed.

The Bread & Flour Regulations 1963

These very comprehensive regulations which come into force in September 1964 re-enact with amendments the Flour (Composition) Regulations 1956 and introduce standards for bread, including "milk bread" "butter bread" and "protein bread". They also impose restrictions on claims that any bread, biscuits or cereal breakfast foods are starch reduced or can aid slimming. The regulations prohibit the sale of flour or bread containing added colouring matter (other than caramel) and restrict the bleaching of improving agents which flour may contain, to those specified. Where bread and flour is certified by a public analyst as containing any colouring matter which is not permitted by the regulations, or where flour is so certified as containing bleaching or improving agent otherwise than in accordance with the regulations, that bread or flour may be treated as being unfit for human consumption.

The Liquid Egg (Pasteurisation) Regulations, 1963

These regulations require the pasteurisation of liquid egg to be used in food intended for sale for human consumption (other than egg broken out on food manufacturers' premises and used within 24 hours).

The method of pasteurisation is prescribed and details are given of the alpha-amylase test which is to be used to determine whether the liquid egg has been correctly pasteurised.

Other regulations include :—Ice-cream (Heat Treatment etc.) Regulations, which allow the addition of sugar to heat treated cold mix preparations—the Milk (Special Designation) Regulations, 1963 which prescribe tests for pasteurised and sterilised milks—and the Poison List Order and Poison Rules 1963.

Meat Pies : Food Standard Committee Report 1963

This report recommends that meat pies and meat pasties should contain a minimum of 25 per cent. of meat. They also introduce a proviso that the standard would be satisfied if one ounce of meat were present in a pie weighing between 4 and 5½ ounces, or ⅝ ounce of meat in a pie weighing less than 3 ounces.

The recommended standard for meat and vegetable pies or pasties (such as Cornish Pasty) is a minimum of $12\frac{1}{2}$ per cent. of meat.

Antioxidants in Food : Food Standard Committee Report 1963

The Antioxidants in Food Regulations, 1958, permit the use of certain specified antioxidants in foods. One of these compounds, butylated hydroxytoluene, has been re-examined on the grounds of toxicity and it is now recommended that it should be withdrawn from the permitted list.

The report also recommends that antioxidants should be prohibited in infant foods, that specifications of purity of permitted antioxidants should be prescribed, and that the use of ethoxyquin, for the prevention of "common scald", should be permitted on apples and pears up to 2 parts per million.

The question of the leaching of antioxidants from plastics and other containers will be dealt with in a later review.

Antibiotics in Milk in Great Britain : Report of the Milk Hygiene Sub-Committee, 1963

This report deals with the problems and possible public health hazards created by the use of antibiotics for the treatment of mastitis. The recommendations of the sub-committee include a publicity campaign to remind producers to take precautions to ensure a milk supply free from traces of antibiotics, a price penalty system for milk found to contain antibiotics, and the encouragement of food and drugs authorities to sample and test ex-farm milk for the presence of antibiotics.

SAMPLES SUBMITTED UNDER THE FOOD & DRUGS ACT

The total number of samples of food and drugs examined during the year for the City of Cardiff was 1,126. Of these, 115, or 10·2% were reported upon adversely. The nature of the various articles submitted, the number of each kind and the numbers that were adulterated or otherwise unsatisfactory is tabulated below :—

Samples submitted under the Food and Drugs Act during 1963

Nature of Sample	Number examined	Number unsatisfactory
Apples	10	—
Apples (strained)	1	—
Apple Pie Filling	1	—
Apple Sauce	1	—
Apricot Pie Filling	1	—
Baking Powder	2	—
Beans (in tomato sauce)	4	—
Bicarbonate of Soda	1	—
Biscuits	4	—
Blackcurrant Pie Filling	1	—
Brislings, in olive oil	1	—
Butter	12	—
Cake Mix	2	—
Cake	6	—
Cakes (iced)	1	1
Cake Decorations	3	—
Cinnamon	1	—
Cinnamon Sugar	1	—
Celery Salt	1	—
Christmas Pudding	1	1
Cheese	2	—
Cheese Spread	1	—
Cocoa	1	—
Corn Relish	1	—

Samples submitted under the Food and Drugs Act during 1963—continued

Nature of Sample	Number examined	Number unsatisfactory
Cooking fat	1	—
Chicken Broth (strained)	1	—
Chocolate flavoured Drink	1	—
Cream	11	—
Crisps	9	1
Custard Powder	3	—
Drugs and Medicinal Preparations:		
Amphetamine Sulphate Tabs. 5 mgm. B.P. ..	1	—
Amylobarbitone Tab. $\frac{1}{2}$ gr. B.P. ..	1	—
Bronchial Mixture	1	—
Camphorated Oil	1	—
Carbromal Tabs. 5gr. B.P.	1	—
Dusting Powders	8	4
Ferrous Sulphate Co. Tab.	1	—
Glycerol Trinitrate Tabs. 1/130gr. B.P. ..	1	—
Indigestion Tablets	2	—
Liquid Paraffin	1	—
Paracetamol Tab. $\frac{1}{2}$ gr. B.P.	1	—
Phenytoin Sodium Tab. 100mgm. B.P. ..	1	—
Promethazine HCl 10mgm. B.P.	1	—
Rose Hip Syrup	1	—
Flour	12	—
Fish Paste	3	1
Fruit Cocktail, in syrup	1	—
Fruit Salad, in syrup	4	—
Fruit, dried	7	1
Fruit Pies	10	5
Garlic Salt	1	—
Gin	1	—
Grapefruit	1	—
Gravy Browning	4	—
Ground Ginger	1	—
Hot Dog Relish	1	—
Horseradish Sauce	2	—
Horseradish Relish	1	—
Ice cream	3	—
Ice Lolly Mix	1	—
Ice Lolly Liquid	1	—
Jelly	3	—
Lager (Non-Alcoholic)	1	—
Lager	3	—
Lard	2	—
Macaroni Cheese	2	—
Margarine	4	—
Marzipan fruits	1	—
Meat and Meat Products:		
Baked Beans with Frankfurters	3	—
Baked Beans with Baconburgers	1	—
Baked Beans with Pork Sausage	1	—
Beans and Ham	1	—
Beef, minced, with onion	1	—
Beef Milano	2	—
Beef Roma	1	—
Beef Potato and Onion Pie	4	1
Beef and Gravy	1	1
Beef, minced	2	—
Beef Pie	2	1
Beef Naturelle	1	—
Beef and Veal Luncheon Meat	1	—
Chicken Casserole	1	—
Chicken Curry	1	—
Corned Beef Loaf	1	—
Chicken and Macaroni	1	—
Chicken and Veal Pie	1	—
Cornish Pasty	5	—
Chicken Capri	1	—

Samples submitted under the Food and Drugs Act during 1963—continued

Nature of Sample	Number examined	Number unsatisfactory
Chicken in Jelly	2	—
Chicken Fillets	1	—
Chicken, minced, in Jelly	1	—
Egg and Pork Pie	1	—
Extract of Beef	1	—
Frankfurters	1	—
Hungarian Goulash	1	—
Liver Paté	1	—
Liver, Bacon and Beans	1	—
Liver Sausage	1	—
Luncheon Meat	1	—
London Grill	1	—
Meat Balls, in white sauce	1	—
Meat and Potato Pie	5	1
Mixed Ready Grill	1	—
Meat Pie	7	7
Meat Paste	4	—
Ox Tongue	1	—
Pasty	22	—
Pork Pie	17	—
Pork Brawn	1	—
Potted Beef, with butter	1	—
Rice, Savoury, with onions ham & mushrooms	1	—
Ravioli	2	—
Roast Beef with rich gravy	1	—
Steak and Kidney Pies	41	29
Steak and Onions with gravy	1	—
Steak, kidney and onion pies	3	—
Steak, Stewed with gravy	1	1
Steak, Stewed	1	—
Steak, minced	2	—
Steak, savoury, minced	1	—
Steak with spaghetti and tomato	1	—
Veal Sorrento	1	—
Meat Tenderiser	1	—
Meat Colouriser	1	—
Milks, ordinary	539	40
Milks, Channel Islands	40	2
Milk, complaint	2	2
Milk Bottle, dirty	3	3
Milk Chocolate Rolls	1	—
Milk Shake Flavouring	1	—
Mint, Garden	1	—
Mint Sauce	1	—
Mustard	3	—
Non-brewed Condiment	2	1
Nutmeg	1	—
Oranges	1	—
Orange Juice	5	1
Onion Powder	1	—
Onion Salt	1	—
Onion Sauce	1	—
Pastilles, Blackcurrant	1	—
Parsley, dried	1	—
Parsley, flakes	1	—
Peas, dried	1	—
Peas	2	—
Peas, dehydrated	1	—
Pearl Barley	1	—
Pears, strained	1	—
Pears	1	—
Peaches, in syrup	1	—
Potato products	2	—
Pilchards, in tomato sauce	1	—
Puddings	9	—

Samples submitted under the Food and Drugs Act during 1963—continued

Nature of Sample	Number examined	Number unsatisfactory
Preserves	25	1
Pepper	1	—
Pudding Cake Mix	1	—
Pickles	1	—
Prunes, in syrup	3	—
Raspberries, canned	3	1
Rennet	1	—
Rice Pudding	1	—
Rhubarb	1	—
Rhubarb in syrup	2	—
Rum	1	—
Sauce	7	—
Sage, Dried	2	—
Salmon Spread	1	—
Salmon Spread, with butter	2	—
Spaghetti Sauce Seasoning	1	—
Sauce Bolognese	1	—
Salad Cream	3	—
Soups	5	—
Soups, canned	3	—
Soup Mix	1	1
Soft Drinks	45	2
Suet	6	3
Sugar Confectionery	2	2
Sponges	1	—
Strawberries, fresh	1	—
Spaghetti Milanese	1	—
Spaghetti Bolognese	1	—
Spaghetti Sauce	1	—
Spaghetti Alloromano	1	—
Tea	6	—
Tomatoes, canned	2	—
Tomato Juice	3	—
Tomato Ketchup	10	—
Tomato Paste and Puree	6	1
Tomato Pickle	1	—
Thyme, Dried	1	—
Vegetables, dehydrated	2	—
Vinegar	2	—
Whisky	1	—
TOTAL	1126	115

MILK

During the year 579 samples of Milk were submitted under the Food and Drugs Act for the determination of quality. Of these 539 were samples of ordinary milk and 40 were Channel Islands Milk. These samples were taken by the Official Sampling Officer of the department of the Chief Public Health Inspector, some at the point of sale to the consumer and others in the course of transit and/or delivery to the dairies concerned with the bulking and bottling of the milk.

None of the samples submitted contained either colouring matter or preservative.

Ordinary Milk—539 samples

Number deficient in Fat only	30
Number containing added water only	10
Number deficient in Fat and containing added water	0

Channel Islands Milk—40 samples

Number containing less than 4% of Fat	2
Number containing added water	None

Ordinary Milk—The presumptive standards of the Sale of Milk Regulations, 1939, require milk to contain not less than 3 per cent of fat and not less than 8·5 per cent of solids-not-fat.

Of the 539 samples of ordinary milk examined 117 contained less than 8·5 per cent. of solids-not-fat but the freezing point test showed that none of them contained added water. 10 samples contained small amounts of added water varying between 1 and 4%. 30 samples were deficient in fat but none of these were found to contain any added water. The deficiencies in fat in some individual samples ranged from 3 to 15%. In most cases, however, these were samples of morning milk taken from churns of raw milk in course of delivery to bottling plants in the City. Analysis of the accompanying afternoon milks showed that the average fat content of the whole consignment would have been satisfactory, after bulking. The deficiencies in fat in individual samples ranged from 3 to 15% but one bulk delivery had 5 churns ranging from 3·3% to 16·7% deficient with an average of 13·1% for the 5 of them. These were confined to morning milk and the bulk delivery was satisfactory.

Channel Islands Milk. The presumptive standards laid down in the Sale of Milk Regulations, 1939, apply to all milk, but in addition the Milk and Dairies (Channel Islands and South Devon Milk) Regulations, 1956, require that milk for human consumption sold under the special designation "Jersey Milk", "Guernsey Milk", "South Devon Milk" or "Channel Islands Milk" shall contain not less than 4·0 per cent. of fat. An extra charge may be made for such milk which in addition to being rich in fat is also rich in non-fatty solids (the protein containing fraction) which, from a nutritional stand-point, is the most important constituent of milk.

During the year 40 samples of Channel Island¹ milk were examined. Of these only 2 were found to be below 4·0 per cent. of fat. They were 2 churns of morning milk out of a total of 5 from the same producer. The deficiencies were 6 and 11% respectively but the average fat content of the bulked milk was 4·24 per cent.

None of the samples were found to contain added water.

Average Composition of Milk Samples. The average composition of all the milk samples including Channel Islands Milk, submitted during the year is given in the table below. The average compositions are calculated from the results of all samples, which include a very small percentage of adulterated samples.

Average Composition of Milk Samples 1963

Variety	Number of Samples	Fat per cent	Non-fatty solids per cent	Total Solids per cent
Channel Islands Milk	40	4·55	9·01	13·56
Other Milk Samples	579	3·68	8·60	12·28
All Milk Samples	619	3·74	8·63	12·36

The monthly variations in the composition of all milk samples other than those of Channel Islands milk are given in the following table :—

Milk samples other than Channel Islands Milk monthly variations, 1963

Month	Number of Samples	Fat per cent	Non-fatty solids per cent	Total Solids per cent
January	27	3.80	8.54	12.34
February	41	3.77	8.59	12.36
March	30	3.65	8.46	12.11
	98	3.74	8.54	12.28
April	92	3.46	8.29	11.75
May	30	3.47	8.60	12.07
June	18	3.28	8.55	11.83
	140	3.44	8.39	11.83
July	111	3.59	8.63	12.22
August	24	3.80	8.68	12.48
September ..	72	3.87	8.82	12.69
	207	3.71	8.70	12.41
October	54	3.84	8.84	12.68
November ..	60	3.79	8.66	12.45
December ..	20	3.87	8.64	12.51
	134	3.83	8.72	12.55
Whole Year ..	579	3.68	8.60	12.28

These variations are somewhat similar to previous years with the exception of the unusually low solids-not-fat figures for the spring months.

In the next table the average composition of the 'ordinary milk' samples for 1963 is compared with the figures for the years 1935-1962.

Average Composition of Milk Samples (excluding Channel Islands Milk)
1935-1963

Year	Fat per cent	Non-fatty Solids per cent	Total Solids per cent
1935	3.81	8.83	12.64
1936	3.77	8.74	12.51
1937	3.81	8.75	12.56
1938	3.67	8.74	12.41
1939	3.66	8.78	12.44
1940	3.68	8.64	12.32
1941	3.61	8.67	12.28
1942	3.64	8.67	12.31
1943	3.62	8.76	12.38
1944	3.65	8.74	12.39
1945	3.59	8.64	12.23
1946	3.65	8.67	12.32
1947	3.59	8.73	12.32
1948	3.55	8.70	12.25
1949	3.57	8.67	12.24
1950	3.55	8.74	12.29
1951	3.55	8.67	12.22
1952	3.51	8.69	12.20
1953	3.48	8.69	12.17
1954	3.52	8.67	12.19
1955	3.48	8.64	12.12
1956	3.50	8.64	12.14
1957	3.61	8.65	12.26
1958	3.57	8.58	12.15
1959	3.53	8.55	12.08
1960	3.52	8.60	12.12
1961	3.55	8.57	12.12
1962	3.55	8.60	12.15
1963	3.68	8.60	12.28

Articles other than Milk

During the year 547 samples of food and articles other than milk were examined for the City of Cardiff under the Food and Drugs Act. Particulars of the 73 samples (13·3 per cent.) that were reported upon adversely are tabulated below.

Unsatisfactory Samples of Articles other than Milk

Article	Formal Informal or Private	Nature of Adulteration or Irregularity
Apricots, dried	Informal	Infested with mites (<i>Glyciphagus</i>)
Cakes, iced	Private	Mould growth was present on the surface of the cakes.
Canned Meat & Gravy (2 samples)	Informal	Both samples had meat contents below the recommended standard of at least 75 per cent of meat.
Chicken Soup Mix ..	Informal	Labelling irregularity. Incorrect list of ingredients.
Chocolate	Private	Infested with webbing of moth (<i>Ephestia</i>).
Christmas Pudding ..	Private	Contained mould growth (<i>Monascus purpurea</i>).
Crisps, unprocessed ..	Informal	Labelling irregularity.
Dusting Powder .. (4 samples)	Informal	Contained approximately 5% of boric acid but with no cautionary label indicating that it should not be applied to raw or weeping surfaces.
Lobster Paste ..	Informal	The contents had undergone protein decomposition due to bacterial action
Fruit Pie (4 samples)	Informal	Pictorial representation of variety of fruits on package was considered to be misleading as to the nature of contents.
Fruit Pie, Apple ..	Informal	Contained only 16·9% of apple filling and package was not labelled in a clear and conspicuous manner.
Meat Pies (8 samples)	Informal	Meat contents low and all below 20 per cent, which was considered a reasonable minimum standard for meat pie.
Steak and Kidney Pie (29 samples)	Informal	Meat contents low and all below 20 per cent.
Meat & Vegetable Pie.. (2 samples)	Informal	Meat contents below 10 per cent, which was considered a reasonable minimum standard for meat and vegetable pies.
Non-brewed Condiment	Informal	Incorrect statement on label of the minimum content.
Orange Juice	Informal	Contained only 54 mgs. of Vitamin C per fluid ounce, whereas label claimed 60 mgs. of Vitamin C per fluid ounce.
Puff Candy	Private	Contained sodium bicarbonate on the outside due to improper mixing during manufacture.
Raspberryade	Informal	Contained 10 grains per 10 gallons, of saccharin in excess of the permitted maximum of 83 grains per 10 gallons.
Raspberries (canned) ..	Private	The can was only quarter full and contained 83 milligrams of sandy matter.
Sarsaparilla & Burdock	Informal	Contained 23 grains per 10 gallons of saccharin in excess of the permitted maximum of 83 grains per 10 gallons.
Raspberry Jam ..	Informal	Contained only 20 per cent of fruit; below the minimum standard of 30 per cent.
Suet (2 samples) ..	Informal	Contained 79·7 per cent, and 82·0 per cent of beef fat, whereas the Food Standards (Suet) Order, 1952 requires at least 83 per cent.

Unsatisfactory Samples of Articles other than Milk—continued

Article	Formal Informal or Private	Nature of Adulteration or Irregularity
Suet	Formal	Contained only 81·8 per cent of beef fat.
Tomato Paste (canned)	Informal	Contained 11 parts per million of lead and 120 parts per million of copper. The maximum limits are 5 and 100 parts per million, respectively.
Milk Bottles containing foreign matter	Private	Contained a deposit consisting of cement and milk solids.
„	Private	Contained coloured liquid consisting of a custard powder preparation.
„	Private	Contained foreign matter consisting of sand and cement.
Milk (complaint) ..	Private	Contained caustic detergent (Sample consisted of approximately 87 parts of milk and 13 parts of 1 per cent sodium hydroxide solution.
Milk (complaint) ..	Private	Contained reddish brown deposit which was identified as cow's blood.

The following comments on some of the samples may be of interest :—

Canned Meat & Gravy. One sample contained 66·9 per cent. and the other contained 71·3 per cent. They were therefore below the 75 per cent minimum recommended for “canned meat with gravy” by the 1962 Food Standards Committee report on canned meat products.

Recent proposals for regulations have increased the minimum for this category to 80 per cent and it is hoped that these proposals will be given legal status in the near future.

Meat Pies. Thirty-seven samples including 29 described as Steak & Kidney Pies were found to have meat contents ranging from 9·2 to 19·9 per cent.

Pending the implementation of the Food Standard Committee recommendations, 20 per cent. has been considered to be a reasonable minimum for meat content.

Dusting Powders. Four samples, each containing about 5 per cent. of boric acid, did not have a cautionary label stating that they should not be used on raw or weeping surfaces. Official preparations (B.P.C.) of similar composition are required to have this notice and it was felt that a similar warning should be present on these products even though they were not B.P.C. preparations.

Milk Bottles containing foreign matter. One contained cement and dried milk solids, one contained cement and sand and another contained the coloured remains of a custard preparation.

Milk (Complaints). One bottle of milk contained a reddish brown deposit which was identified as cow's blood. Further samples taken from the same source were found to be satisfactory. The other bottle of milk received for examination consisted of approximately 87 parts of milk and 13 parts of detergent solution (1 % sodium hydroxide).

ATMOSPHERIC POLLUTION

During the year 92 deposits and rain water from gauges were analysed.

Deposit Gauges. The standard deposit Gauge is used to measure the rate at which atmospheric pollution, in the form of soot or dust, is deposited, and by inference, the rate at which it is emitted into the air. It consists essentially of a glass bowl approximately 12 inches in diameter and of a known area. This bowl drains the rainfall into a bottle of about 10 litre capacity, which is usually enough to collect a month's rainwater. After the gauge has been exposed on the site for one calendar month the dust and rainwater collected is brought to the laboratory for analysis. The full examination of the contents of the gauge includes the determination of the volume of the rain collected, its reaction (pH value), and the concentration of calcium, chloride and sulphate ions and the total dissolved matter; the undissolved matter is weighed and the mineral matter (ash), tar and other combustible matter determined.

In the following table a comparison has been made of the rate of deposition of the atmospheric pollution over the last few years at the four stations where the deposit gauges are situated.

The gauge at Menelaus Street in Splott has been in use since 1962. The results clearly show that the atmosphere in this particular area is much worse than in any other area in the City where deposit gauges have been placed.

Comparison of Yearly Rates of Deposition for 1959-1963 in Tons per square mile per year

Station	1959	1960	1961	1962	1963
CITY HALL					
Total Deposited Matter	157	153	138	169	161
Insoluble Mineral Matter (Ash)	46	46	40	59	63
Rainfall (inches)	39	52	39	31	38
CURRAN ROAD					
Total Deposited Matter	217	220	184	184	159
Insoluble Mineral Matter (Ash)	80	85	74	82	73
Rainfall (inches)	38	52	36	23	24
MOORLAND ROAD					
Total Deposited Matter	321	395	354	275	305
Insoluble Mineral Matter (Ash)	148	204	167	144	161
Rainfall (inches)	38	48	32	25	35
MENELAUS STREET					*
Total Deposited Matter	—	—	—	3,164	1,851
Insoluble Mineral Matter (Ash)	—	—	—	2,548	1,443
Rainfall (inches)	—	—	—	33	38

* these results were for 10 months but have been corrected to a yearly figure by adding the average figures for the summer months.

Method of expression of results. Results published by the Department of Scientific and Industrial Research are now in the units of milligrams per square metre per day, but in practice the conversion from tons per square mile per year to this form of expression simply involves multiplication of the existing figures by a factor of 1.075.

Continuous Smoke and Sulphur Dioxide Recordings

During the year daily determinations of the concentration of sulphur dioxide along with the amount of suspended matter (smoke) in the air have been continued. The method used, at six sampling points in the city, is to draw a measured volume of air through a white filter which collects the smoke and then through a bubbler containing dilute neutral hydrogen peroxide solution which oxidises the sulphur dioxide to sulphuric acid. The acidity of the solution in the bubbler is determined each day by titration with standard alkali solution and this is used to calculate the equivalent sulphur dioxide concentration in the air. The intensity of the grey smoke stain on the filter paper is measured photometrically using a standardised reflectometer. The results are expressed as micrograms per cubic metre, and will be found in the following table.

Comparison of Average Smoke and Sulphur Dioxide concentrations for 1959-1963

Station	Smoke Concentration Micrograms per cubic metre					Sulphur dioxide Concentration Micrograms per cubic metre				
	1959	1960	1961	1962	1963	1959	1960	1961	1962	1963
LLANISHEN RESERVOIR										
Daily Average	40	45	38	33+	31+	57	57	37	19+	33+
Highest Daily Value	230	260	202	220	202	286	200	204	198	223
LLANRUMNEY CLINIC										
Daily Average	—	—	—	39	43	—	—	—	57	72
Highest Daily Value	—	—	—	289	193	—	—	—	343	342
CITY HALL										
Daily Average	60	60	52	48	42	86	86	60	69	70
Highest Daily Value	290	270	290	407	245	343	314	289	298	375
CURRAN ROAD										
Daily Average	90	90	92	89	84	86	86	76	85	87
Highest Daily Value	580	570	621	720	456	428	343	301	536	404
MOORLAND ROAD										
Daily Average	90	90	79	73	64	114	114	91	92	110
Highest Daily Value	550	450	418	536	452	400	371	401	375	529
CROFTS STREET										
Daily Average	—	—	—	96*	77	—	—	—	113*	96
Highest Daily Value	—	—	—	438	381	—	—	—	373	579

* Average of eight months only—Station shut down during May/October.

+ These results are from an automatic eight-day sampler.

MISCELLANEOUS SAMPLES

Sterilised Milk. During the year 88 samples of sterilised milk were submitted under the Milk (Special Designation) Regulations. All the samples satisfied the turbidity test indicating they had been adequately heat treated.

Imported Foods. 203 samples of imported food stuffs were submitted for examination by the Chief Public Health Inspector of the Cardiff Port Health Authority. The following is a list of the articles examined.

Apples	1	Peas	1
Bread Improver ..	1	Pears (canned) ..	2
Butter	1	Pork brawn	1
Corned Beef (canned)	1	Potatoes	2
Casseroled Steak (canned)	4	Ravioli (canned) ..	1
Cherries (canned) ..	1	Salmon (canned) ..	1
Fruit salad (canned)	1	Shrimps (canned) ..	1
Grapes	1	Strawberries	1
Ham	3	Sugar confectionery ..	1
Haricot beans	1	Spaghetti Bolognese ..	1
Lard	1	Stewed Steak	2
Lamb tongues (canned)	1	Tomatoes (canned) ..	152
Luncheon meat (canned)	2	Tomato Soup, condensed,	
Meat products	4	cream of	1
Oranges	1	Tomato Paste & Puree ..	5
Peas, dried	1	Tomato Ketchup	2
Pecan nuts	1	Vegetables, dried	1
		Walnuts	1
		Tomato juice	1

Total 203

The increased number of samples was chiefly due to the large number of canned tomatoes examined, 32 of these (all from the same consignment) contained lead in excess of the 2 parts per million permitted by the Lead in Food Regulations, 1961.

4 Samples of Canned Casserole Steak contained less than the 75 per cent. of meat recommended by the Food Standard Committee for canned meat & gravy products.

One sample of Canned Condensed Cream of Tomato Soup contained only 2.8 per cent of vegetable fat. A double strength condensed cream soup should contain 7 per cent of fat since an ordinary cream soup is expected to contain 3.5 per cent.

All the other samples were found to be satisfactory.

Fertilisers & Feeding Stuffs Act, 1926. During the year a total of 40 samples were submitted under the above Act. There were 35 Feeding stuffs and only one sample was unsatisfactory. This was a High Protein Meal which was deficient in protein to the extent of 4.6 per cent below the declared amount. Follow up samples were found to be satisfactory. The 5 samples of Fertilisers examined were all satisfactory.

Other Samples. Water from Roath Park Lake was examined in connection with the death of fish. The dissolved oxygen content was found to be low and hardly sufficient to support fish life, but no toxic contaminants were detected.

Four samples of basement water were examined. Two were found to be polluted by sewage and two were derived from underground springs. Two swimming bath waters and seven drinking waters were found to be satisfactory. One drinking water, a complaint, contained aluminium floc.

Samples of air from a house were found to contain dangerous amounts of carbon dioxide originating from a coal fire where the chimney was blocked.

Part of a cockroach found in a tin of beans was examined to ascertain whether it had undergone heat treatment and tests indicated that it had.

Canned tomatoes contained excessive amounts of tin ranging from 275 to 405 parts per million and samples of canned tomato paste contained copper in excess of the recommended maximum.

Sausage, mincemeat and mincemeat tart were examined in connection with a case of suspected food poisoning but no toxic substances could be detected.

A foreign body found in a Chelsea bun consisted of a piece of flint probably derived from the dried fruit used. Another foreign body submitted for examination proved to be a fragment of amalgam tooth filling.

City Architect's Department. Two samples of effluent were analysed in connection with an application to be made to the Glamorgan River Board for permission to discharge into the Cadoxton River.

City Surveyor's Department. Seventeen samples of oil and two samples of antifreeze were tested for compliance with specification. Three bricks were examined after a request was made to carry out a lime test on each sample and advice was given as to quality and suitability for use.

An investigation was carried out on cement mortar which failed to adhere to certain bricks. Some of the bricks were unsatisfactory as they contained sulphates which gave rise to a sodium sulphate efflorescence at the surface.

City Treasurer's Department. Two samples of sausages and three samples of dried milk were examined for the Central Contracts department. Two samples of flour were submitted for comparison and examination.

Waterworks Department. 602 samples of water were examined in connection with the routine chemical control of the treatment and purification of the water supply under the control of the Water Engineer and Manager. Some of these samples were taken as a result of complaints by consumers.

A sediment from a concrete lined pipe was shown to consist of calcium carbonate, calcium sulphate and siliceous matter and was not harmful. A sample of soil was analysed and shown to have no significant corrosive action on bitumen coated pipes.

A complaint that the water supply was the cause of lime deposits on radio equipment was not justified.

Three samples of lubricating oils, two of sand, two of slime and a deposit from a gas circulator were examined in connection with various problems.

A sample of chloros was tested for available chlorine content.

PRIVATE SAMPLES

Two samples of sausages were analysed for H.M. Prison Service and were found to be of satisfactory composition.

A sample of filter deposit was examined for an engineering firm and two samples of wax submitted by a manufacturer were tested for freedom from lead and arsenic.

A sample of Feeding Stuff submitted by a private person was found on examination to be infested with mites.

Two articles of clothing were examined for an Insurance Agency in connection with sea water damage alleged to have occurred during shipment.

A mineral analysis of a sample of water was made for an Architect in connection with a central heating installation.

Other samples included two samples of Cherries in Liqueur which were tested for proof spirit content for a private firm, and a sample of Chloros for available chlorine content for the Wales Empire Pool.

STAFF MATTERS AND ACTIVITIES

Dr. L. E. Coles terminated his appointment as City Analyst in November and the resignations of two Assistant Analysts, Miss E. Davies and Miss M. Jenkins, were received at the end of the year, taking effect at the beginning of 1964.

Dr. Coles attended the Annual Conference of the Central Council for Health Education in January, the Annual General Meeting and Conference of the Association of Public Analysts in May and the Fifth International Pesticides Congress at London in July.

Miss E. Davies, B.Sc., attended the October Conference of the Society of Water Treatment and Examination on behalf of the Waterworks Department.

During the year students and other interested groups were shown around the laboratory and given an insight into the work done.

PORT HEALTH SERVICE

REPORT OF T. G. NEWBY, MASTER MARINER, M.A.P.H.I. CHIEF PORT HEALTH INSPECTOR

The Cardiff Port Health Authority was constituted by Provisional Order in 1882, becoming permanently constituted with extended limits of jurisdiction in 1894. The limits of the Port Health District extend from Sully Island to the Rhymney River, the Authority having jurisdiction over all waters, docks, harbours and vessels within the said limits.

The Port Health Authority is invested with all the functions, rights and liabilities of an Urban Sanitary Authority under certain sections of the Public Health Acts, so far as they are applicable to waters, vessels, persons, goods or things on, or landed from, any vessel within the said jurisdiction.

In accordance with the instructions of the Ministry of Health, Form Port 20, Sections I, V, VI, VIII, XIV, XV, and XVI of the report are not repeated in full.

SECTION I—STAFF

TABLE A

Change in Medical Staff during the year.

Douglas Harret, M.B., B.Ch., D.P.H., Assistant Medical Officer of Health, City and Port, resigned 30th June, 1963.

SECTION II

AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

The number and tonnage of vessels entering the port (which includes Penarth) inspected by officers of the Port Health Authority during 1963 are set out below :—

Table B

Ships from	Number	Tonnage	Number Inspected by the		Number of Ships reported as having or having had during the voyage, infectious disease on board
			Medical Officer of Health	Port Health Inspector	
Foreign Ports ..	410	933,716	67	317	1
Coastwise ..	1,441	1,133,529	—	601	—
TOTAL ..	1,851	2,067,245	67	918	1

The following table shows the number of vessels entering the port which were dealt with by the department each month during 1963.

Month	From Foreign Ports	Coastwise	Total
January ..	24	126	150
February ..	20	144	164
March ..	35	126	161
April ..	25	106	131
May ..	35	135	170
June ..	38	105	143
July ..	34	131	165
August ..	35	135	170
September ..	43	112	155
October ..	41	118	159
November ..	40	96	136
December ..	40	107	147
TOTAL ..	410	1,441	1,851

The nationalities of the several types of vessels entering the port which were dealt with by the department during 1963 are shown in the following table :—

Nationality	Steam	Motor	Dumb Barges	Total
Argentine	—	1	—	1
Belgian	—	4	—	4
Brazilian	1	—	—	1
British	100	1,030	7	1,137
Danish	1	31	—	32
Dutch	—	303	—	303
Finnish	4	8	—	12
French	6	17	—	23
German	4	103	—	107
Greek	13	9	—	22
Icelandic	—	1	—	1
Indian	2	5	—	7
Irish	—	23	—	23
Italian	—	1	—	1
Lebanese	—	1	—	1
Liberian	12	8	—	20
Moroccan	—	4	—	4
Nicaraguan	1	—	—	1
Norwegian	4	58	—	62
Panamanian	5	4	—	9
Polish	3	7	—	10
Rumanian	—	6	—	6
Russian	3	8	—	11
Spanish	—	9	—	9
Swedish	7	30	—	37
Swiss	—	3	—	3
Turkish	1	—	—	1
Yugoslav	2	1	—	3
TOTAL	169	1,675	7	1,851

SECTION III

CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

Table C

Passenger Traffic	{	Number of passengers INWARDS	1,206
	{	Number of passengers OUTWARDS	2,221
Cargo Traffic	{	Principal IMPORTS—Iron ore, timber pitwood, bones, fuel oil, grain, fruit and general.	
	{	Principal EXPORTS—Coal, coke, heavy iron and steel goods, and general merchandise.	

Principal countries from which ships arrive. Algeria, Belgium, Brazil, Canada, Cyprus, Finland, France, Germany, Holland, India, Israeli, Italy, Liberia, Norway, Persian Gulf, Poland, Portugal, Russia, Spain, Sweden, United States of America and the West Indies.

SECTION IV

INLAND BARGE TRAFFIC

Numbers and Tonnage using the District and places served by the Traffic.

NONE

SECTION V

WATER SUPPLY

NO CHANGE.

Reports and tests for contamination. During the year 13 samples of drinking water from ships were submitted to the Public Health Laboratory for bacteriological examination, the results being as follows :—

Satisfactory ..	..	9
Contaminated ..	..	4
		—
Total ..		13
		—

Notices were served on the masters of the vessels having contaminated water on board and the tanks were emptied, cleansed and refilled at this port.

Also a sample of water taken from the Pier Master's Office, Pier Head, Queen Alexandra Dock, was submitted for bacteriological examination and proved to be satisfactory.

SECTION VI

PUBLIC HEALTH (SHIPS) REGULATIONS, 1952-1961

NO CHANGE

Cleansing and Disinfestation. During the year 17 vessels were found to be slightly infested with cockroaches and one vessel with bed-bugs, and notices were served upon the masters requiring them to take all necessary steps to eradicate the insects. Seven seamen discovered to be suffering from scabies were treated at the Cardiff Disinfecting Station.

SECTION VII

SMALLPOX

Name of Isolation Hospital to which Smallpox cases are sent from the district.

From Lansdowne Hospital to Penrhys Hospital, Pentre, Rhondda.

Arrangements for transport of such cases to that hospital by ambulance, giving the name of the Authority responsible for the ambulance and the vaccinal state of the ambulance crews.

Arrangements are made at the Lansdowne Hospital, the Cardiff City Council being responsible for the ambulance service.

Ambulance crews are vaccinated.

Names of Smallpox consultants available.

G. F. J. Thomas, M.R.C.S., L.R.C.P., D.P.H.,
Medical Superintendent,
St. David's Hospital, Cardiff.

E. Waddington, M.D., M.R.C.P.,
St. Winifrede's Hospital, Cardiff.

Facilities for Laboratory diagnosis of smallpox.

Facilities are provided by the Public Health Laboratory Service, Institute of Pathology, Cardiff Royal Infirmary.

SECTION VIII**VENEREAL DISEASE****NO CHANGE**

The Treatment Centre for the diagnosis and treatment of venereal disease for seamen is at the Royal Hamadryad General and Seamen's Hospital near the docks.

Twenty-four cases of venereal disease came to the knowledge of the Port Health Inspectors during the year and were recommended for treatment at the Centre.

SECTION IX**CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS**

During the year one case of influenza occurred on a vessel during her stay in port, as shown in the following table :—

TABLE D

Category	Disease	Number of cases during the year		Number of Ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports	Influenza	—	1	1
Cases which have occurred on ships from foreign ports but have been disposed of before arrival	—	—	—	—
Cases landed from other ships	—	—	—	—

The case of influenza mentioned in the foregoing table was treated on board.

SECTION X**OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS**

No case of Malaria was reported to have occurred on vessels entering the port during the year.

SECTION XI

MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No case, or suspected case, of plague was reported to have occurred on vessels arriving at the port during the year. Vessels arriving from plague-infected or suspected areas are visited on arrival, or as soon afterwards as possible, by the Port Medical Officer and Port Health Inspector on rota duty. All vessels arriving from these areas are thoroughly searched for rat evidence by the rodent operative and, where necessary, trapping is carried out and any rats caught or found dead are submitted to the Public Health Laboratory for bacteriological examination.

SECTION XII

MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

Procedure for inspection of ships for rats.

NO CHANGE

Arrangements for the bacteriological or pathological examination of rodents, with special reference to rodent plague, including the number of rodents sent for examination during the year.

A proportion of all rats trapped or found dead after fumigation is submitted to the Public Health Laboratory for examination for the detection of plague. No vessels were fumigated during the year and no rats were caught by traps.

Arrangements in the district for deratting ships and the methods used.

NO CHANGE

Deratting is carried out by private contractors, the undermentioned operate in the district :—

The Associated Fumigators Limited, London.
The Fumigation Services, Ltd., Barking, Essex.
Rentokil Laboratories Limited, Cardiff.
Messrs. David Thomas and Sons, Ltd., Cardiff.
The Western Scaling and Painting Co., Cardiff.

Progress in the rat-proofing of ships.

The incorporation of rat-proofing principles in modern ship construction is having the desired effect of reducing rodent infestation to a minimum.

TABLE E

RODENTS DESTROYED DURING THE YEAR IN SHIPS FROM FOREIGN PORTS

Category	Number
Black rats	—
Brown rats	—
Species not known	—
Sent for examination	—
Infected with plague	—

TABLE F

**DERATTING CERTIFICATES AND DERATTING EXEMPTION CERTIFICATES
ISSUED DURING THE YEAR FOR SHIPS FROM FOREIGN PORTS**

Number of Deratting Certificates issued					Number of Deratting Exemption Certificates issued 6	Total Certificates issued 7
After fumigation with HCN 1	Other fumigant (state method) 2	After trapping 3	After poisoning 4	Total 5		
—	—	—	—	—	124	124

The fees received by the Port Health Authority in respect of these certificates amounted to £612. 10s. 0d.

SECTION XIII

INSPECTION OF SHIPS FOR NUISANCES

TABLE G

INSPECTIONS AND NOTICES

Category of Nuisance and number of Inspections	Notices served		Result of serving Notices
	Statutory Notices	Other Notices	
Defects of Original Construction	—	—	—
Structural Defects through Wear and Tear	—	52	Ships on which defects were remedied 50
Dirt, Vermin and Other Condi- tions prejudicial to health ..	—	36	Ships on which nuisances were remedied 36
TOTAL 918	—	88	86

The number of re-visits made to these vessels in connection with health survey and the remedy of sanitary defects and nuisances totalled 3,514.

Defects and nuisances found on vessels entering the port during 1963 are shown below:

Structural Defects through Wear and Tear**Defective:**

Ventilators	8
Skylight	1
Steam heaters, stoves, stove-pipes, etc.	6
Sanitary conveniences, flushes, etc.	96
Side ports and deck prisms	18
Bulkheads	10
Floors	49
Doors	5
Refrigerators	3
Baths	6
Wash-hand basins	73
Waste pipes	21
Scuppers	21
Decks	19

Dirt, Vermin and Other Conditions prejudicial to health**Dirty :—**

Crew quarters	2
Provision storeroom	1
Refrigerator	1
Bathroom	1
Sanitary conveniences	2
Freshwater tanks	16

Slight cockroach infestation :—

Crew quarters	25
Messrooms	11
Provision storerooms	18
Pantries	22
Galley	7
Slight bed-bug infestation in crew quarters	1
Slight weevil infestation in provision storerooms	7
Foul accumulations	12

Total 461

THE CLEAN AIR ACT, 1956
SECTION 20—APPLICATION TO VESSELS

The Dark Smoke (Permitted Periods) (Vessels) Regulations, 1958

Smoke Emissions.—During the year 102 vessels were observed emitting dark smoke and the masters or persons in charge were advised of the above Regulations and appropriate action was taken to reduce the emissions. The number of visits made to these vessels was one hundred and fifty-four. Five visits were made to premises on the docks and the persons in charge were informed of the emission of dark smoke and steps were taken to reduce the emission.

SECTION XIV**PUBLIC HEALTH (SHELL-FISH) REGULATIONS, 1934 AND 1948**

NO CHANGE

SECTION XV

MEDICAL EXAMINATIONS OF ALIENS

(Applicable only to Ports approved for the landing of Aliens)

List of Medical Inspectors of Aliens holding Warrants of Appointment

NO CHANGE

List of other Staff engaged on this work

NO CHANGE

Organisation of work

NO CHANGE

Accommodation for medical inspection and examination

NO CHANGE

Nature and amount of aliens traffic

Passenger traffic at the port is relatively small and casual. Sixty ships arrived during the year with 129 alien passengers on board and 10 of these were subjected to detailed medical examination.

COMMONWEALTH IMMIGRANTS ACT, 1962

MEDICAL EXAMINATIONS

During the year the number of arriving Commonwealth citizens subject to control under the Act was twelve, none of whom was medically examined.

SECTION XVI

MISCELLANEOUS

NO CHANGE

The Dangerous Drugs Regulations, 1953, No. 499, Section 13 (2) (a). Three certificates were issued authorising the masters of foreign vessels to purchase dangerous drugs.

Certificates of Health. No certificates in respect of the health of the port were issued to Shipping Companies during the year.

THE PREVENTION OF DAMAGE BY PESTS (APPLICATION TO SHIPPING) ORDER, 1951

The Prevention of Damage by Pests (Application to Shipping) Order, 1951, made under Section 23 of the Prevention of Damage by Pests Act, 1949, applying the provisions of the Act, with appropriate modifications to shipping, has been strictly enforced.

Under the provisions of the above Order, periodical inspection of coastal vessels, etc., is carried out by officers of the department, and 3 Rodent Control Certificates were issued to masters of vessels during the year. The fees received by the Port Health Authority in respect of these certificates amounted to £1. 10s. 0d.

Diseases of Animals Acts, etc. Sixty-seven dogs and 29 cats were brought to the port on vessels. All the vessels were visited regularly during their stay in port to ensure that the requirements were observed.

FOOD INSPECTION

The principal food imports during the year were from Australia and New Zealand, and consisted of beef, mutton, lamb, offal, butter and cheese. From Canada and the United States of America, wheat, flour, maize, canned fish and fruit were imported, and from European countries, fresh fruits, canned meats and vegetables. In addition to these direct imports, large quantities of foodstuffs, transhipped at other ports in the British Isles, arrived by coastwise traffic.

Examination of imported food is carried out by the food inspectors in the dockside warehouses and occasionally on board ship. If the food examined is found to be in good condition, the whole consignment is released for distribution, but if found to be diseased or unsound, the whole consignment is detained until a complete examination is carried out. Diseased and unsound articles of food are disposed of under the supervision of the food inspectors. When necessary, samples of foodstuffs are submitted for bacteriological examination.

Examination of imported meat is carried out in the transit sheds on the dock sides and in the local cold stores. The glandular examination of mutton and lamb carcasses weighing over 42 lb. was continued and only two cases of caseous lymphadenitis were found.

Imported Foodstuffs. The quantities of various kinds of foodstuffs imported during the year are shown in the following table :—

DESCRIPTION	QUANTITY	DESCRIPTION	QUANTITY
Bacon (Bales)	333	Mayonnaise (Cartons)	5
Bakery Products (Cartons)	8	Meat, Canned (Cartons)	63,010
Bakery Products (Drums)	4	Milk, Canned (Cartons)	4,180
Beer, Canned (Cartons)	6,726	Milk Powder (Cartons)	135
Brandy, Bottled (Cartons)	10,215	Milk Powder (Bags)	7,280
Bread Improver (Casks)	14	Mineral Water (Carton)	1
Butter (Cartons)	662,836	Olive Oil, Canned (Cartons)	93
Cauliflower, Pickled (Casks)	162	Pecan Nuts (Bags)	60
Champagne, Bottled (Cartons)	75	Potatoes (Bags)	71,009
Cheese (Cartons)	71,628	Rice (Bags)	100
Cheese (Crates)	32,320	Rusks (Cartons)	5,710
Chicken, Canned (Cartons)	610	Salami (Cartons)	100
Chicory (Bags)	28	Sauerkraut, Canned (Cartons)	103
Chocolate (Cartons)	4	Sausage, Canned (Cartons)	50
Cocoa Beans (Bags)	40,000	Shrimps, Canned (Cartons)	149
Coffee (Drums)	4	Spaghetti (Cartons)	75
Confectionery (Cartons)	386	Tomato Juice, Canned (Cartons)	1,306
Corn (Tons)	2,887	Tomato Paste, Canned (Cartons)	790
Cut Cauliflower (Cartons)	20	Tomato Puree, Canned (Cartons)	2,070
Edible Fat (Cartons)	392	Tomato Sauce, Bottled (Cartons)	505
Farina (Bags)	1,780	Tomato Soup, Canned (Cartons)	122
Fish, Canned (Cartons)	759	Vegetables, Canned (Cartons)	131,414
Flour (Bags)	12,550	Vegetables, Canned (Tins)	110
Fruit, Canned (Cartons)	115,968	Vegetables, Dried (Bags)	7,452
Fruit, Fresh (Boxes)	545,928	Vegetables, Fresh (Bags)	9,538
Fruit Pulp (Casks)	66	Vegetables, Fresh (Crates)	30
Gin, Bottled (Cartons)	287	Vegetables, Pickled (Casks)	138
Irish Stew, Canned (Cartons)	1,000	Vinegar, Bottled (Cartons)	20
Jam, Jars (Boxes)	250	Walnuts (Bags)	2,400
Lard (Cartons)	15,975	Wheat (Tons)	74,267
Macaroni (Cartons)	6,401	Whey Powder (Bags)	968
Maize (Tons)	10,062	Wine (Casks)	19
		Wine, Bottled (Cartons)	1,676

Overseas Meat. In addition to the foodstuffs already referred to sixteen vessels arrived with the following quantities of overseas meat :—

DESCRIPTION	QUANTITY	DESCRIPTION	QUANTITY
Carcases of lamb	265,172	Boneless meat (Cartons)	120
Carcases of mutton	1,624	Rabbits (Crates)	500
Quarters of beef	24	Sundries (Bags)	93
Legs of mutton (Cartons)	98	Sundries (Cartons)	5,972

The quantities of various kinds of foodstuffs withheld from human consumption during the year are shown below :—

	Tons	cwt.	lb.
Cheese	—	2	66
Eggs	—	—	15
Flour	—	17	81½
Fruit, Canned	—	12	74½
Fruit, Fresh	—	—	7
Irish Stew, Canned	—	—	12½
Macaroni	—	—	27
Meat, Canned	—	2	39½
Meat, Frozen	—	10	10
Rice	—	1	20
Sausage, Canned	—	—	19
Tomato Puree, Canned	—	—	53½
Vegetables, Canned	—	6	107
Wheat	1	15	0
TOTAL	4	8	50½

The Public Health (Imported Food) Regulations, 1937-1948, the Public Health (Preservatives, etc., in Food) Regulations, 1925-1962, and the Food and Drugs Act, 1955.

Two-hundred and three samples of imported food were submitted to the Public Analyst for analysis. The nature, country of origin, and the number of samples are shown in the following table :—

Description	Country of Origin	Number of Samples
Apples	New Zealand	1
Beans in Brine, Canned	Holland	1
Bread Improver	Holland	1
Butter Substitute	Holland	1
Casserole Steak, Canned	Australia	4
Cherries, Canned	Italy	1
Chocolate Eggs	Italy	1
Chopped Ham, Canned	Denmark	2
Chopped Ham and Pork, Canned	Holland	1
Cooked Ham, Canned	Holland	1
Corned Beef, Canned	Australia	2
Devilled Ham, Canned	Denmark	1
Dried Onions	Holland	1
Dried Peas	Holland	2
Fruit Salad, Canned	Spain	1
Grapes	Spain	1
Lard	Holland	1
Lunch Tongue, Canned	Australia	1
Oranges	Cyprus	1
Ox Tongue, Canned	Holland	1
Pears, Canned	Italy	2
Pecan Nuts	Cyprus	1
Peeled Shrimps, Canned	Germany	1
Pork Brawn, Canned	Denmark	1
Pork Luncheon Meat, Canned	Denmark	2
Potatoes	Belgium	1
Potatoes	Denmark	1
Ravioli	Switzerland	1
Salmon, Canned	Canada	1
Spaghetti, Canned	Italy	1

Description	Country of Origin	Number of Samples
Stewed Steak, Canned	Australia	2
Strawberries, Canned	Holland	1
Tomatoes, Canned	Italy	150
Tomatoes, Canned	Spain	2
Tomato Juice, Canned	Italy	1
Tomato Paste, Canned	Italy	4
Tomato Puree, Canned	Italy	1
Tomato Sauce, Bottled	Italy	2
Tomato Soup, Canned	Italy	1
Walnuts	Italy	1

Thirty-two samples of canned tomatoes from Italy showed excess lead content. Further sampling of the tomatoes (300 gramme size tins) resulted in the detention of 700 cartons (50,400 tins) pending the Importer's decision to export the consignment to the Country of Origin—Italy. Each of the various other samples was reported to be genuine or to contain preservatives within the limits prescribed by the Public Health (Preservatives, etc., in Food) Regulations.

Bacteriological Examinations. Nine samples of imported food were submitted to the Public Health Laboratory Service for bacteriological examination, as follows :—

Description	Country of origin	Number of Samples
Butter	New Zealand	4
Chocolate Eggs	Italy	1
Deville Ham, Canned	Denmark	1
Peeled Shrimps, Canned	Germany	1
Pork Luncheon Meat, Canned	Denmark	2

The results of the examination showed each of the samples to be genuine.

At the request of Dr. R. W. S. Harvey of the Public Health Laboratory Service, three samples of crushed bones from India were also submitted for bacteriological examination.

The Public Health (Imported Milk) Regulations, 1926. No fresh milk was imported during the year.

MISCELLANY

Registration of Private Nursing Homes

The number of private nursing homes registered in the City remained at 8, of which three cater for maternity patients. During 1963 the demand for private maternity homes declined, mainly as a result of the increased number of hospital admissions. It is anticipated that this trend will make their continued operation for maternity purposes uneconomic. Increased pressure, however, was again brought to bear on the services of the other nursing homes which cater for chronic sick and elderly patients.

A new Act, the "Private Nursing Homes Act, 1963", extends the powers of Local Authorities to make requirements on registration and in the exercise of adequate supervision over private nursing homes.

METEOROLOGICAL OBSERVATIONS

1963

The geographical position of the Meteorological Station, which is situated at Penylan, Cardiff, is Latitude $51^{\circ} 30'N.$, Longitude $3^{\circ} 10'W.$, and the height of the Station above mean sea level is 203 feet. Observations were made daily at 9 a.m. (G.M.T.). Summaries of the observations made during 1963 are given in the following tables :—

BAROMETRIC PRESSURE AND RELATIVE HUMIDITY

Month	Attached Ther- mometer (Mean)	Mean Barometric Pressure		Hygrometer		
		Uncorrected	Reduced to Mean Sea Level and Temp. $32^{\circ}F.$	Dry Bulb (Mean)	Wet Bulb (Mean)	Mean Relative Humidity
	$^{\circ}F$	Inches	Inches	$^{\circ}F$	$^{\circ}F$	%
January ..	29	29.652	29.655	27.4	28.8	100
February ..	32	29.616	29.621	30.1	29.4	91
March ..	43	29.601	29.638	42.7	40.7	83
April ..	47	29.668	29.715	46.7	44.6	84
May ..	52	29.850	29.912	52.3	47.9	70
June ..	60	29.748	29.832	59.8	55.4	72
July ..	60	29.879	29.964	60.3	58.8	91
August ..	60	29.660	29.744	58.8	55.6	80
September ..	57	29.866	29.944	55.3	53.1	86
October ..	54	30.271	30.340	52.8	50.9	86
November ..	49	29.355	29.408	47.7	46.2	88
December ..	37	29.854	29.874	37.1	35.8	88
	48	29.752	29.803	47.6	45.6	85

TEMPERATURE

Month				Absolute Maximum °F	Absolute Minimum °F	Mean of Maximum °F	Mean of Minimum °F	Mean Temperature °F
January	..	..	..	42	14	32.6	23.9	28.2
February	..	..	..	42	19	35.9	26.9	31.4
March	..	..	..	56	28	49.6	37.7	43.7
April	..	..	..	64	33	53.9	41.8	47.8
May	..	..	..	77	38	58.8	45.6	52.2
June	..	..	..	79	47	67.4	52.8	60.1
July	..	..	..	80	47	68.0	53.2	60.6
August	..	..	..	77	47	65.0	53.2	59.1
September	..	..	..	74	44	62.3	50.0	56.1
October	..	..	..	67	41	58.3	48.2	53.2
November	..	..	..	58	36	53.0	44.0	48.5
December	..	..	..	50	23	42.2	33.3	37.8
				64	35	53.9	42.5	48.2

UNDERGROUND TEMPERATURE AND SUNSHINE

Month				Underground Temperature (Mean)		Bright Sunshine
				1 ft.	4 ft.	Total Duration
				°F	°F	Hours
January	..	..		35.8	41.9	69.7
February	..	..		34.7	39.6	81.9
March	..	..		40.8	40.9	120.0
April	..	..		47.1	45.2	105.7
May	..	..		52.9	49.6	186.4
June	..	..		60.1	54.9	194.6
July	..	..		62.0	50.8	173.7
August	..	..		61.5	59.1	161.5
September	..	..		58.5	58.1	128.9
October	..	..		55.2	56.2	78.0
November	..	..		50.3	53.5	61.3
December	..	..		41.5	48.3	39.9
				50.0	49.8	1401.6*

*=31.27 % of possible duration and a daily average of 3.84 hours.

RAINFALL

Month	Total Inches	Difference from Average (74 years) Inches	Greatest Fall in 24 hours*		Number of Rain-days (0·01 inch or more)
			Amount Inches	Day	
January ..	0·87	—3·27	·25	3rd	6
February ..	1·82	—1·07	·47	15th	7
March ..	4·87	+2·11	·79	13th	20
April ..	3·49	+0·85	·86	14th	20
May ..	1·57	—1·09	·23	8th & 9th	14
June ..	4·27	+1·74	1·36	13th	19
July ..	2·31	—0·80	·63	2nd	12
August ..	5·47	+1·38	1·01	15th	19
September ..	2·68	—0·75	·61	24th	15
October ..	2·76	+1·89	·49	29th	18
November ..	9·67	+5·61	1·54	17th	30
December ..	1·75	—2·71	·69	24th	8
	41·54	+0·11	1·54 on 17th Nov.		188

*24 hours ended 9 a.m. (G.M.T.) next day

MORTUARY ARRANGEMENTS

The Council of the Welsh National School of Medicine, after consultation with the Board of Governors of United Cardiff Hospitals, have agreed to the Department of Pathology at the Cardiff Royal Infirmary undertaking responsibility for the reception of bodies which would otherwise have been sent to the Public Mortuary, and also for providing facilities for post-mortem examinations. In the event of a substantial increase in the number of cases, especially at night or at week-ends, it may be necessary to review the financial arrangements connected with this service, but at present there are no financial implications.

The Public Mortuary is retained on an emergency basis. Keys are held by the Store-keeper of the Department's Depot adjoining the Mortuary and by one of the van drivers employed in the Department. A third key is held at the Ambulance Depot and the Police and Hospital Authorities have been informed that the Mortuary can be made available for use at any time in emergency.

**CITY OF CARDIFF PUBLIC HEALTH DEPARTMENT
DEVELOPMENT OF LOCAL AUTHORITY HEALTH SERVICES
PROPOSALS OF THE CARDIFF CITY COUNCIL
FIRST ANNUAL REVISION OF THE PROPOSALS—1963-1964**

The Proposals approved by the City Council in 1962 for the Development of Local Health Services have been reviewed in the light of the Command Paper 1973 published by the Minister of Health entitled "Health and Welfare—The Development of Community Care" and of the Minister's Circular 6/63 (Wales) of 17th April, 1963 in which he requested that authorities should annually revise their proposals and carry them forward a further year.

The amendments proposed in the following paragraphs are based on a general reconsideration of the demand on the several services and take into account the standards suggested for these services in the Minister's Review.

A. HEALTH CENTRES

Add the following :—

Riverside. The erection of a health centre with accommodation for general medical practitioners serving the Riverside and Canton area together with Clinic facilities and ancillary services is proposed in the Riverside area. A formal request from the Executive Council and the practitioners concerned has been received.

Site	..	..	£5,000	
Building	..	..	£60,000	To be included in building programme 1964/65
Furniture and Equipment	..	..	£3,000	
			<hr/> £68,000 <hr/>	

B. CARE OF MOTHERS AND YOUNG CHILDREN

Clinics—Delete the following :—

Riverside—Clinic. The proposal is replaced by the proposal for a Health Centre in this area referred to in A.

Insert the following :—

Rumney—Trowbridge Road

Site	..	..	£2,000	To be included in building programme 1965/66 for new Housing Estate to be developed.
Building	..	..	£35,000	
Furniture & Equipment	..	..	£3,000	
			<hr/> £40,000 <hr/>	

Roath—Broadway

Site	..	..	£3,000	To be included in building pro- gramme 1966/67 to provide local facilities in a densely populated area.
Building	..	..	£35,000	
Furniture & Equipment	..	..	£3,000	
			<hr/> £41,000 <hr/>	

Cathays

Site	..	..	£3,000	To be included in building programme 1967/68 to replace present unsatisfac- tory accommodation in Church Hall.
Building	..	..	£25,000	
Furniture & Equipment	..	..	£2,000	
			<hr/> £30,000 <hr/>	

Nursery Provision

Insert in place of existing proposal :—

A review will be undertaken to ascertain if certain of the department's clinics and centres may be adapted to provide limited nursery accommodation primarily for the children of unmarried mothers, widows and deserted wives.

Care of Unmarried Mothers and their Children

Delete existing paragraph and insert :—

The Authority propose to take advantage of the facilities made available by the Llandaff Diocesan Association for Moral Welfare and the Convent of the Good Shepherd, Chepstow, in addition to the arrangements existing with the Salvation Army through their Home at "Northlands". The arrangements will be extended on the same basis as provided in the Scheme approved under the National Health Service Act 1946.

Co-ordination and extension of social work among unmarried mothers will be encouraged by the appointment of an experienced health visitor for this work.

A small Mother and Baby Home will be acquired and opened for approximately ten mothers to extend the facilities available but the provision of a hostel with nursery will not be provided.

Marriage Guidance

Amend by the following :—

The Cardiff Branch proposes to continue in its present accommodation and not to avail themselves of alternative accommodation which had been suggested informally.

C. DISTRICT MIDWIFERY SERVICE

ADDENDUM

The facilities provided by the Authority will be extended by co-operation with the Cardiff Hospital Management Committee in setting up a "General Practitioner Delivery Unit" at St. David's Hospital in May 1964. The Unit will have five beds and District Midwives will accompany their patients to the Unit and attend on them in their confinements and return them to their homes as soon as practicable after the birth of their children. Details of the arrangements necessary for the proper functioning of the Unit are now being discussed among the several interested bodies.

Ambulance facilities will be extended by a proposal to provide a special ambulance for the conveyance of mothers and infants from this Unit and on other occasions after confinements.

D. HEALTH VISITING

Amend by the following :—

A further health visitor has been seconded for duty in the Mental Health Section in the place of the additional female Mental Welfare Officer proposed in 1963/64.

It is proposed to appoint an experienced health visitor for duties in connection with the care of unmarried mothers and the control of venereal disease among young women.

In view of the increase in population forecast by 1972, the staff of health visitors will be increased by the equivalent of 3.5 full-time health visitors by that date.

E. DISTRICT NURSING SERVICE

No amendments proposed.

F. VACCINATION AND IMMUNISATION

Amend by the following :—

General practitioners will be encouraged to offer immunisation to their patients by the issue of supplies of vaccine of prepared packs including sterile disposable syringes and needles.

Agreement has been reached that records of vaccination will only be required in respect of children up to 2 years of age and payment of fees will therefore be limited in this respect.

G. AMBULANCE SERVICE

Amend by the following :—

The fleet has been subjected to an expert inspection and the replacement programme will be reduced from a 10-year to a 7-year term in order to obviate heavy repair and maintenance costs.

This change will necessitate the replacement of six ambulances in 1964/65.

The introduction of personnel carriers for joint use with the Mental Health Service will be brought forward and three will be purchased in 1964/65 and again in 1965/66.

The staff will be augmented by an additional two drivers each year in the years 1964-1967 and three female drivers will be engaged in 1964/65 and a further three in 1965/66.

An ambulance will be allocated for the conveyance of mothers and babies from the General Practitioner Delivery Unit and on discharge from Maternity Hospitals.

H. PREVENTION OF ILLNESS, CARE AND AFTER CARE

(a) **Tuberculosis.** The proposal to spread the programme of skin testing of school children over two years instead of one, will not be proceeded with, as a relatively high number of cases of tuberculosis is being discovered by this means

(b) **Diabetes.** Delete the proposal for a scheme for testing the general public for diabetes.

Proposals for the other services provided under this Section do not require amendment.

I. HOME HELP SERVICE

Amend as follows :—

A detailed assessment of the demand on this service in November 1963 showed that demand had further increased and a further 9 per cent. increase could be expected by 1964/65.

Amended proposals are being made therefore to increase the staff in 1964/65 by the equivalent of 34 full-time home helps.

The regular increase allowed for in subsequent years is not being altered.

J. MENTAL HEALTH

The following amendments are proposed :—

Training Centres for Mentally Subnormal

The new Training Centre at Penylan Court will be restricted to a Junior Training Centre for up to 130 children and adults will not be provided for.

Transport to Training Centres

The introduction of Personnel Carriers for joint use with the Ambulance Service will be brought forward to 1964/65 by the purchase of 3 vehicles and a further 3 vehicles in 1965/66.

Centre for the Mentally Ill

The Day Hospital facilities at Whitchurch Hospital have been augmented by a Club organised on a part-time basis by the British Red Cross Society.

It is proposed to provide a Day Centre in the period 1968/1973.

Hostels

Delay in acquisition of sites will result in hostels at Penylan Court and Corporation Road planned for 1963/64 being placed in the programme for 1964/65.

The hostels proposed for Trowbridge Road and other sites will be deferred until 1965/66.

K. CO-OPERATION OF THE LOCAL HEALTH AUTHORITY WITH VOLUNTARY ORGANISATIONS

No changes are made in the proposals.

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January, 1964.