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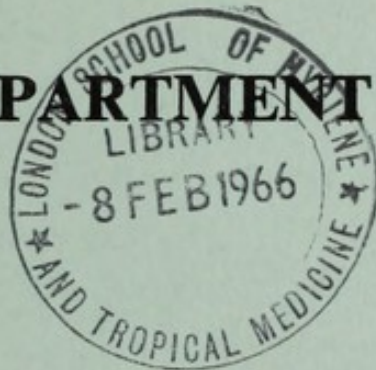


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City and Port of Cardiff

PUBLIC HEALTH DEPARTMENT



ANNUAL REPORT 1964

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
GREYFRIARS ROAD
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PUBLIC HEALTH DEPARTMENT

ANNUAL REPORT


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COMMITTEES

(As at December, 1964)

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Co-opted Members :—

Mrs. D. M. POPPER

Mr. B. A. FRANCIS

Canon F. WALL

Mr. R. J. EVANS

PREFACE

I have the honour to present the Annual Report on the public health services for the City of Cardiff during 1964.

Statistical

The Registrar-General's vital statistics give an overall picture of the important features of the personal and environmental health factors, which may be shown numerically. There has been a slight decline in the estimated population, which is now 260,340. It is of significance to note that the number of people in each occupied house is gradually falling, showing that the house building programme is producing an appreciable effect.

There was a small drop in the birth-rate to 19.50 per thousand but this remains substantially in excess of the national rate of 18.4. It is good to know that there were fewer infant deaths during the year—110 as compared with 130 in 1963. This gives an infant death rate of 21.67 per 1,000 live births which is the lowest figure so far attained in Cardiff; nearest to this being 22.85 in 1957. Cardiff is still above the national average, which has been a persistent feature. However, the gap is gradually closing. The chief causes of death in children under one month have been birth injury, post-natal asphyxia and immaturity, while pneumonia has been the chief cause in those over a month old. There is need to investigate the causal circumstances in this latter group because it is a condition which may yield to preventive action. Deaths from this cause affect all types of family and often account for sudden death in infants.

Attention must be drawn to the increased number of illegitimate births—the number has doubled in the last 10 years. It was hoped to establish a mother and baby home during this year but, unfortunately, the Health Committee were not able to proceed with their intention.

The death-rate for the general population is lower at 10.76 compared with the national rate at 11.3. There were fewer deaths attributed to malignant disease and cancer of the lung was diminished by 31 with 124 deaths from this condition. Propaganda for the control and early ascertainment of cancer continues to feature largely in the programme of health education. A research scheme is envisaged to commence in Cardiff during 1965 for a large scale study into all aspects of cervical cytology. The aim will be to invite married women between 25 and 69 to clinics and to screen a high percentage of women throughout the City. It is a conjoint effort in which the Ministry of Health, Regional Hospital Board, Cardiff United Hospitals, the Welsh National School of Medicine, the Medical Research Council and the City Council, with the support of the Cancer Information Centre, are taking part. There are many facets of cervical cytology which require research and clarification and it is hoped that some of the answers will be forthcoming as the result of this large scale investigation.

Infectious Diseases including Prevention

There has been no noteworthy feature concerning infectious diseases during the year. The prevention aspect continues to occupy a great deal of time in the department. This probably accounts for the fact that there is no dramatic increase in incidence. Diphtheria, whooping cough and tetanus are diseases requiring essential safeguard in infancy. Fortunately, the public co-operate in the effort with benefit which is obvious.

Tuberculosis is dealt with by Dr. W. M. Sutcliffe in the body of this report. This year there were only 8 deaths ascribed to tuberculosis. Few would have believed this possible only 20 years ago.

Dr. S. H. Graham, the Chest Physician, co-operates most closely with the health department in all matters relating to prevention and treatment of this disease.

Venereal disease must be mentioned because it is showing an increase throughout the country. The analysis of cases shows the age at which treatment or advice was sought for a substantial number of the patients. It is of some concern to note the number under the age of 20 who have been seen at clinics. It is difficult to know the correct approach to this problem. A general knowledge of health without undue stress on matters of sex may prove the best way of producing a more responsible attitude among the minority and, fortunately, it is a minority of teenagers who expose themselves to the risk of infection. It is a subject which cannot be ignored but it should not be over-stressed.

Maternal, Child Health and Social Services

During the year the Roath Health Clinic was opened replacing a converted residential building at Richmond Road which formerly served the area. The modern facilities provided are appreciated by the public and the staff who work there.

Every endeavour is being made to bring the health visitor, midwife and home nurse into close co-operation with the general practitioner. As an example a short-stay delivery unit has been opened at St. David's Hospital where the general practitioner and domiciliary midwife can arrange for the mother to be confined under ideal conditions. She is transferred back to her home as soon as the practitioner considers it advisable. This has been an instance of hospital, practitioner and local health services acting in unison.

The close collaboration with the Children's Ear, Nose and Throat hospital in ascertainment and treatment of the deafness in infancy is noteworthy.

The care of the elderly is receiving increasing attention and, during the year, a day hospital centre has been opened at St. David's Hospital. Dr. Jean M. Evans and Dr. John N. P. Hughes provide some interesting details of the problems encountered in providing adequate care for the ageing population. This provides the kind of medical or social problem which taxes the resources of all health departments. Moreover, each problem has peculiarities of its own and often demands special thought to provide a reasonable solution. In Cardiff, the Council of Social Services for Wales has initiated a special survey in two areas of the City which has the mission to encourage neighbours to take an active part in the care of the elderly. It is an undertaking which it is hoped will eventually embrace the whole City. The object is to bring all the social services available to the help of those old folk who need them.

Mental Health

Cardiff is fortunate in having a very well integrated care service for the mentally ill. The hospital and local authority do work as partners. To illustrate this, during the year the City Council provided a house for some eight patients discharged from Whitchurch Hospital. The hospital furnished the house and without any residential oversight this has provided a house fully fitting into the pattern of the residential area in which it is situated. There is a turn-over of occupants as and when they become even more capable of looking after themselves in lodgings. It is hoped to extend this kind of outlet for those who might otherwise remain in hospital.

Progress is being made to rehabilitate the alcoholic patient.

The senior mental welfare officer, Mr. L. Clutterbuck, provides some details of the mental health services in the City.

School Health Service

The various phases of the school health service have functioned smoothly during the year. The Principal School Dental Officer is concerned that there is not an adequate staff to deal promptly with all the children who need dental care. It is likely that the new Dental Training School which opens at the Teaching Hospital Centre at the Heath, Cardiff, will ultimately help in solving the problem of dental staff.

Ascertainment and care of the handicapped child is receiving increasing attention. The child guidance clinic is particularly useful and Field House and Walker House provide the instruments to which much more worthwhile results can be obtained. They are not, however, facts which can be translated into figures. Dr. Gillian Bryant and Dr. W. M. Sutcliffe describe some features of these schemes.

Dr. G. Crompton describes the Student Health Service at the Welsh College of Advanced Technology, the Llandaff Technical College, the College of Art and the College of Food Technology and Commerce.

Environmental Health

Mr. W. Bate, the Chief Public Health Inspector, writes "The year has seen no unusual events or material change in the work of the public health inspector." Not being quite so close to his problems one may mention some features which do show a progressive change. Firstly, the programme of slum clearance with its detailed administrative procedures is gaining momentum as instanced by No. 2 clearance area in Butetown. Secondly, The Offices, Shops and Railways Premises Act, 1963, will certainly provide much needed improvements in working conditions and, thirdly, the increased powers to deal with the problems of multiple occupation of houses provide a range of matters requiring detailed supervision and attention. The shortage of public health inspectors does hamper the work of the environmental health section.

Conclusion

The year 1964 has been satisfactory in that, so far as statistics prove anything, there is a general improvement in health. On the credit side the planning and final arrangements have been completed for a new public Abattoir in Cardiff. This should improve food hygiene so far as fresh meat is concerned. The siting and development of the first Health Centre is in progress and so is a new Occupation and Training Centre being constructed on the Ty Gwyn Road site. These are major undertakings.

Dr. A. H. Griffith, senior medical officer, has resigned from the staff. He is of outstanding ability and made very valuable contributions to the health services in Cardiff during his ten years' service. Dr. W. M. Sutcliffe has taken Dr. Griffith's place as senior medical officer.

Once more may I thank the Health Committee for the stimulus to the department and the encouragement which is given to those who wish to undertake special investigations. The work described in the Annual Report is very much a combined effort in which each member of the staff plays a part and I thank them.

W. POWELL PHILLIPS

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

October, 1964.

PUBLICATIONS AND PAPERS

DISTRIBUTION OF HAEMOGLOBIN LEVEL IN A GROUP OF SCHOOL-CHILDREN AND ITS RELATION TO HEIGHT, WEIGHT AND OTHER VARIABLES.

Elwood, P. C., Withey, J. L., and Kilpatrick, G. S., with the assistance of Phillips, W., Powell, Anderson, C. W., Davies, E., and Mead, B.

British Journal of Preventive and Social Medicine, Vol. 18, No. 3, July, 1964.

MULTIPLE-PUNCTURE B.C.G. VACCINATION

Griffith, A. H.

Postgraduate Medical Journal, Vol. 40, February, 1964, pp. 74-77.

B.C.G. OVERDOSAGE TREATED WITH ISONIAZID

Griffith, A. H.

Postgraduate Medical Journal, Vol. 40, February, 1964, pp. 78-80.

TUBERCULOSIS IN CHILDREN

Griffith, A. H.

The Medical Officer, Vol. CX1, No. 20, 15th May, 1964, pp. 281-282.

HEALTH EDUCATION IN HOSPITALS

Davey, Mildred, S.R.N., H.V.CERT.

Paper presented at Symposium organised by Royal Society of Health, January, 1964.

Visitors to the Department

A large number of people visited the Department during the year, to observe the various aspects of the work. In addition to visitors from this country, they came from all parts of the world, as shown below:—

South Africa, India, Malta, Iraq, Singapore, Nepal, Burma, Hong Kong, Pakistan, Iran, Hungary, Poland, U.S.S.R., Mauritius, Nigeria, Channel Islands, Turkey, Canada.

PUBLIC HEALTH DEPARTMENT STAFF (as at 31st December, 1964)

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

W. M. SUTCLIFFE, M.B., CH.B., D.P.H., D.I.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)

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

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

SYLVIE M. HARRISON, B.SC., M.B., B.CH., D.OBS.R.C.O.G., D.P.H.

GILLIAN BRYANT, M.B., B.CH.(Wales), D.C.H., D.OBST.R.C.O.G.
(Joint appointment with Welsh National School of Medicine)

J. N. P. HUGHES, M.B., B.CH., D.P.H.

BRENDA M. MEAD, M.B., B.CH., D.C.H., D.P.H.

Ten 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 OFFICERS

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

J. W. LEWIS, L.D.S., Senior Dental Officer

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

R. I. SHEPPEARD, B.D.S.

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Eight Dental Clerks

One Dental Auxiliary

NURSING AND MIDWIFERY

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

Fifty-eight 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 a half District Midwives

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

Two Assistant Superintendents.

Forty-five District 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.B.H.I.

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

Three Divisional Public Health Inspectors.

One Senior Public Health Inspector (Housing)

Six District Public Health Inspectors

One Lady Visitor for Housing Estates

Three Senior Specialist Public Health Inspectors

Five Specialist Public Health Inspectors

Six Pupil Public Health Inspectors

One Rodent Control Officer

Four Technical Assistants

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 Assistant and Authorised Meat Inspector****CITY ANALYST'S LABORATORY****City Analyst—A. R. PHILLIPS, B.SC., F.R.I.C.****Deputy City Analyst—R. H. MCKINLEY, F.R.I.C.****One Senior Analyst, One Analyst, Three Assistant Analysts, Two Laboratory Technicians****ADMINISTRATION, ETC.****Principal Administrative Assistant—P. H. WILLIAMS, F.C.C.S.****Deputy Principal Administrative Assistant—J. S. GENTLE****Senior Administrative Assistants—General Health Services—W. H. ORTON, F.C.C.S.
—School Health Service—A. K. JENKINS****Administrative Assistants—Finance and Stores—W. PATTERSON
—Vaccination, Immunisation
and Public Relations } B. GOODWIN, D.M.A.****Administrative and Clerical Assistants—General, Finance—19
Sanitary Administration—7
School Health Service—15
Vaccination and Immunisation—10
Mental Health—2
Others—4****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 Senior Ambulance Supervisor
Five Ambulance Supervisors****Home Help Organiser—Miss GRETA MIDGLEY****Assistant Home Help Organiser Female Visiting Officer****Occupation and Training Centres****Two Senior Supervisors; Nine Supervisors; Four Assistant Supervisors
Seven Nursery Assistants****Medical Auxiliaries****Senior Speech Therapist—Miss B. MORRIS, L.C.S.T.****Four Speech Therapists (Two Part-Time)**

THE HISTORY OF THE UNITED STATES OF AMERICA

BY CHARLES A. BEAMAN, D.D., LL.D.,
OF THE UNIVERSITY OF CHICAGO

NEW YORK: THE CENTRAL BOOK CONCERN, 1894.

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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-1964	..	..	..	..	..	260,340
Number of persons per acre	..	..	..	..	..	17.51
Estimated number of inhabited houses	..	..	..	..	..	71,860
Estimated number of inhabited houses per acre	..	..	..	..	..	4.8
Estimated average number of persons per occupied house	..	..	..	..	..	3.6
Rateable Value, 1/4/64	..	..	..	..	..	£11,392,003
Estimated product of a penny rate 1964/65	..	..	..	..	..	£50,000
Live Births	..	5,076	Birth-rate per 1,000	{ Crude	..	19.50
				{ Adjusted by A.C.F.	..	19.30
Deaths	..	2,800	Death-rate per 1,000	{ Crude	..	10.76
				{ Adjusted by A.C.F.	..	12.26
Excess of births over deaths—Males 1,025; Females, 1,251	..	..	..	..	..	2,276
Deaths under one year	..	110.	Death rate per 1,000 live births	..	..	21.67
Deaths under one month	..	82.	Death rate per 1,000 live births	..	..	16.15

	<i>Number</i>	<i>Death-rate per 1,000 Total Births</i>
Deaths arising from Pregnancy, Childbirth, or Abortion	1	0.19

Deaths from various causes:—	<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	11	0.04
Other forms of tuberculosis	1	0.004
Cancer, all forms, including leukaemia	529	2.03
Influenza	4	0.02
Acute poliomyelitis	—	—
Enteritis and diarrhoea (under 2 years)	2	0.008

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-1964, as estimated by the Registrar-General, was 260,340 and it is on this figure that the vital statistics for 1964 are computed.

III—BIRTHS

The numbers of Births and Still-births registered and allocated to Cardiff during 1964 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 ten 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	2,288	232	2,520
Females	2,347	209	2,556
TOTAL	4,635	441	5,076

Still Births

	Legitimate	Illegitimate	Total
Males	49	1	50
Females	38	2	40
TOTAL	87	3	90

Table II

Live Births

Year	Population	Legitimate Births	Illegitimate Births	Total	Birth Rate	England & Wales Birth Rate
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
1964 ..	260,340	4,635	441	5,076	19.50	18.4

Table III

Still Births

Year	Legitimate	Illegitimate	Total	Rate per 1,000 total births	
				Cardiff	England & Wales
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
1964	87	3	90	17.42	16.3

Table IV

Illegitimate Births

Year	Live	Still	Total	Rate per 1,000 total births	
				Cardiff	
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	
1964	441	3	444	85.95	

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 2,800 (males 1,495 and 1,305 females). The total number of deaths registered in Cardiff was 2,877 but 573 of these were deaths of non-residents which occurred mainly in hospitals and nursing homes, and 496 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 1964 and the preceding ten years with the death-rates for England and Wales for the same period.

Year	Deaths	Crude Death Rate	England and Wales Death Rate
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
1964	2,800	10.76	11.3

Cancer.—The number of deaths from malignant neoplasms including 19 deaths from leukaemia and aleukaemia was 529 (294 males and 235 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 (Estimated)	Females (Estimated)	Total
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
1964	282	228	510	2.25	1.69	1.96

Deaths from Motor Vehicle Accidents.—The number of deaths due to road traffic accidents in the year was 30 (19 males and 11 females) as compared with 30 deaths during 1963. The average for the preceding ten years (1954-63) was 31.

Other Accidents.—Other accidents total 54 (28 males and 26 females) and of that number 27 were under 65 years of age; 11 of them being under 45 years.

Maternal Mortality.—There was one maternal death during the year, the cause of death being

(1) Septicaemia due to septic abortion (Died in hospital).

Infant Mortality.—The number of deaths under 1 year was 110 and of those 94 were legitimate and 16 illegitimate. There were 66 deaths of infants under 1 week and when the 90 stillbirths are added, the peri-natal mortality rate is 30.20. The neo-natal deaths numbering 82 being 75% 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 Live Births	
		Cardiff	E. & W.		Cardiff	E. & W.		Cardiff	E. & W.
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
1964	110	21.67	20.0	82	16.15	13.8	90	17.42	16.3

The causes of death of infants under one year of age in age periods during 1964 (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 mth.	2 mths.	3-5 mths.	6-8 mths.	9-11 mths.	Total All Ages
Whooping Cough	—	—	—	—	—	—	—	—	—	1	—	1
Haemorrhagic Conditions ..	—	1	—	—	—	1	—	—	—	—	—	1
Inflammatory Di- seases of C.N.S.	—	—	—	—	—	—	—	—	—	—	1	1
Diseases of Ear and Mastoid Process ..	—	—	—	—	—	—	1	—	—	—	—	1
Pneumonia ..	—	—	—	—	—	—	2	5	5	2	1	15
Other Respiratory Diseases ..	—	—	—	—	—	—	—	—	1	—	—	1
Gastro-enteritis	—	—	—	—	1	1	1	—	—	—	—	2
Monstrosity ..	3	—	—	—	—	3	—	—	—	—	—	3
Spina Bifida and Meningocele ..	1	—	—	—	—	1	3	—	—	—	—	4
Congenital Hydrocephalus	1	—	—	—	—	1	—	—	—	—	—	1
Congenital Mal- formations of Heart ..	—	—	—	2	—	2	—	—	—	—	—	2
Congenital Mal- formations of Genito-Urinary System ..	—	—	1	—	—	1	—	—	—	—	—	1
Other Congenital Malformations	1	2	—	—	—	3	—	—	3	1	—	7
Injury at Birth ..	10	4	3	—	—	17	—	—	—	—	—	17
Postnatal As- phyxia and Atelectasis ..	10	6	—	—	—	16	—	—	—	—	—	16
Pneumonia of Newborn ..	1	4	—	3	2	10	—	—	—	—	—	10
Immaturity ..	13	3	—	—	—	16	—	—	—	—	—	16
All other con- ditions ..	6	—	2	2	—	10	—	—	—	1	—	11
Total All Causes	46	20	6	7	3	82	7	5	9	5	2	110
Percentages ..	41.8	18.2	5.5	6.4	2.7	74.6	6.4	4.5	8.2	4.5	1.8	100

V—NOTIFIABLE DISEASES

Foreword

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

Disease	1964	1963	1962	1961	1960	1959	1958	1957	1956	1955	1954
Scarlet Fever	63	60	69	121	93	228	351	173	290	176	203
Whooping Cough	200	218	21	107	414	101	105	587	570	112	467
Diphtheria	—	—	—	—	—	—	—	—	1	—	—
Measles	1,682	3,594	1,028	6,238	137	3,609	980	4,816	122	6,869	33
Acute Pneumonia	108	137	114	266	161	245	329	348	242	265	191
Meningococcal Infection	7	4	2	1	3	2	6	7	7	14	15
Paralytic Acute Poliomyelitis	1	—	—	8	1	—	4	12	4	14	12
Non-Paralytic Acute Poliomyelitis	—	—	2	8	2	2	2	1	13	24	5
Acute Encephalitis (Infective)	—	—	—	—	—	—	—	—	3	1	—
Acute Encephalitis (post infectious)	—	1	—	—	—	—	—	—	2	2	3
Dysentery	33	97	207	77	139	1,084	639	23	115	296	228
Ophthalmia Neonatorum	2	2	3	2	19	14	50	4	7	16	14
Puerperal Pyrexia	8	13	35	82	31	17	57	51	174	111	155
Para-Typhoid Fever	—	6	—	2	1	4	—	—	1	8	89
Typhoid Fever	—	2	2	—	1	—	—	—	—	1	1
Food Poisoning	46	52	46	56	163	56	38	13	27	47	21
Erysipelas	25	16	16	15	22	38	49	31	48	37	35
Malaria	—	—	—	1	1	4	—	1	1	3	2
Acute Rheumatism	9	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-three cases (35 males, 28 females) were notified. The cases are usually mild without complications.

Whooping Cough.—Two hundred cases were notified (100 males, 100 females). This disease is further discussed in the section of this report on vaccination and immunisation.

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

Acute Pneumonia.—108 cases were notified (56 males, 52 females). Deaths cannot be correlated with notifications because the Registrar-General's heading "Pneumonia" covers deaths from all types of pneumonia.

Meningococcal Infection.—Seven cases were notified (3 males, 4 females).

Acute Poliomyelitis.—One case was notified of acute paralytic poliomyelitis. This patient, a married woman aged 47 years, whose home address was at Llanbradach, had been a hospital patient since 13th December, 1963—first at Caerphilly Miners' Hospital, where she underwent abdominal surgery. She was transferred to the Cardiff Royal Infirmary on 27th April, 1964 due to respiratory failure. Serological tests carried out at this hospital proved positive for poliomyelitis and the patient was transferred to the Lansdowne Hospital on 9th May, 1964.

The case was counted as one of paralytic poliomyelitis on clinical and serological grounds and although the patient was not a Cardiff resident and had contracted the disease elsewhere it was counted as a Cardiff case as it was first diagnosed in this area.

Measles.—Although this was not an 'epidemic' year, 1,682 cases were notified. The unusually high incidence in the last two quarters of 1963 continued into 1964. The quarterly totals were:—

Quarter ending 30th March	..	681
30th June	..	550
30th September		315
31st December		136
		<hr/>
		1682
		<hr/>

Investigations of the complications of Measles

The investigation which commenced last year (organised by the Public Health Laboratory Service in collaboration with the Society of Medical Officers of Health) continued in the form of follow-up enquiries into selected cases.

In addition, in conjunction with the Medical Research Council, the department co-operated in an investigation of measles vaccines. As this work on both these investigations is still in progress it is not possible to include details in this report.

Acute Encephalitis (Infective and Post-Infectious).—There were no cases notified during the year.

Dysentery.—The number of notified cases again fell to a remarkably low level of 33. These were nearly all single cases and there were no outbreaks.

Ophthalmia Neonatorum.—Only two cases, both males, were notified.

Puerperal Pyrexia.—Eight cases were notified.

Paratyphoid Fever.—No cases were notified during the year.

A Cardiff family consisting of two grandparents, two parents and two children contracted the disease whilst on a touring holiday in Wales. The family left Cardiff on 1st August, 1964. During their tour they stayed at a number of caravan sites and visited a holiday camp.

One of the children and its grandmother became ill on 7th August. The next day the child's mother became ill, followed on 9th August by the father and grandfather. Bacteriological reports showing two of the cases to be positive for Paratyphoid B, were received by the local Medical Officer of Health on 11th August and all the family were admitted to the Tan-y-Bwlch Isolation Hospital at Aberystwyth.

The grandmother was discharged, as faecal specimens proved to be negative but the remainder of the family were positive for Paratyphoid B, Phage Type 1, Var. 6, and received appropriate treatment.

After three consecutive negative specimens had been obtained from each patient the family was allowed to return home to Cardiff.

As a precaution further specimens were obtained from the family after their return and, with the exception of one child, all (including the grandmother) were found to be excreting the organism. The grandmother who was employed as a canteen worker, was excluded from employment and treatment arranged by the patient's own medical practitioner. A series of seven negative faecal specimens enabled the grandmother to be cleared for return to employment on 30th September. It was however 21st October before the remainder of the family produced the last of three consecutive negative results to enable the household to be regarded as free from infection.

Typhoid Fever.—No cases occurred during the year.

Food Poisoning.—There were forty-six notified cases and in addition seven cases were “otherwise ascertained” by the department. *Salmonella* organisms continued to be the main causative agent where this was identified.

It is of interest to note that in several cases of salmonellosis the patients continued to excrete the organism for a considerable time after recovery from their illness. One five year old child admitted to hospital on 5th August was suffering from a *Salmonella* brandenberg infection. In spite of courses of Paramomycin and Chloramphenicol (the only two drugs to which the laboratory reported the organism to be sensitive) faecal swabs were still positive. As the patient no longer had any abdominal pains, diarrhoea or vomiting it was decided to discharge her home on 4th September.

She was kept under supervision by this department: faecal specimens taken at weekly intervals continued to be positive. A further sensitivity test was carried out in November which indicated that the organism was sensitive to Tetracycline and this was prescribed by her medical practitioner. As a result, a series of three negative specimens were obtained and the patient regarded as finally clear of infection on 21st December.

The following table gives details in the form prescribed by the Welsh Board of Health:—

(1) (a) FOOD POISONING NOTIFICATIONS (as returned to Registrar General)

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
14	9	14	9	46

(b) CASES OTHERWISE ASCERTAINED

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
2	1	4	—	7

(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) Salmonella brandenberg ..	—	—	—	1	2	—	2
(c) Staphylococci	—	—	—	—	—	—	—
(d) Cl. botulinum	—	—	—	—	—	—	—
(e) Cl. welchii	—	—	—	—	—	—	—
(f) Other bacteria	—	—	—	—	—	—	—
Causative Agent not identified ..	10	19	5	—	—	—	24
TOTAL	10	19	5	1	2	—	26

(3) SINGLE CASES

AGENT	No. of Cases		TOTAL
	Notified	Otherwise Ascertained	
Agent Identified:			
(a) Chemical Poisons	—	—	—
(b) Salmonella			
menston	—	1	1
typhimurium	3	1	4
tennessee	1	—	1
brandenberg	1	—	1
albany	1	—	1
infantis	1	—	1
thompson	1	—	1
(c) Staphylococci (including toxin)	—	—	—
(d) Cl. botulinum	—	—	—
(e) Cl. welchii	—	—	—
(f) Other bacteria	—	—	—
Causative Agent not identified	17	—	17
TOTAL	25	2	27

Erysipelas.—Twenty-five cases were notified (9 males, 16 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.

Anthrax.—This disease was made notifiable by the Public Health (Infectious Diseases) Amendment Regulations 1960. No cases have yet been notified in the city.

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 and the Public Health (Ships) (Amendment) Regulations 1963, a total of 30 persons were placed under surveillance.

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 nine cases notified during the year:—

[illegible]

CLASSIFICATION BY AGE AND SEX OF INFECTIOUS DISEASES FOR 1964

DISEASES	Under 1 year		1-2 years		2-3 years		3-4 years		4-5 years		5-10 years		10-15 years		15-20 years		20-25 years		25-35 years		35-45 years		45-65 years		65 years and over		All ages		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
Scarlet Fever	1	—	1	1	3	6	6	2	6	3	14	12	2	2	1	—	1	1	—	—	—	—	—	—	—	35	28	63	
Whooping Cough	20	20	9	13	21	9	8	12	8	17	26	23	7	5	1	—	—	1	—	—	—	—	—	—	—	100	100	200	
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles	59	55	124	150	123	134	109	110	91	107	307	235	36	40	—	—	—	1	1	—	—	—	—	—	—	850	832	1682	
Acute Pneumonia	2	2	4	3	2	1	2	3	1	1	5	5	6	—	2	1	2	2	3	6	2	6	7	9	18	13	56	108	
Meningococcal Infection	2	—	1	2	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	3	4	7
Paralytic Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Non-Paralytic Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis Infective	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis Post Infectious	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	1	2	—	—	—	1	3	1	1	1	1	1	—	—	—	1	1	—	2	2	1	2	5	1	7	12	21	33	
Ophthalmia Neonatorum	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2	
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	—	3	—	1	—	—	—	—	—	8	8
Small Pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Para-Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid (ex. Paratyphoid)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	1	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	2	—	3	9	2	6	9	16	25
Food Poisoning	1	1	1	1	—	—	1	1	1	—	2	2	2	6	1	1	—	3	2	4	3	5	—	4	2	2	16	30	46
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Rheumatism	—	—	—	—	—	—	—	—	—	—	1	2	4	2	—	—	—	—	—	—	—	—	—	—	—	—	5	4	9
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Anthrax	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(NOTE:—Statistics relating to Tuberculosis appear later in this section)

PREVENTION OF TUBERCULOSIS

W. M SUTCLIFFE, M.B., Ch.B., D.P.H., D.I.H.

Whilst it is not unreasonable to be optimistic concerning the outcome of attempts to eradicate tuberculosis from our midst (vide this report 1963) yet there is no cause to become complacent or indeed to relax our efforts to control this disease. Whilst fewer persons died of pulmonary tuberculosis, See Table I (8 compared with 17), yet the number of new notifications both of pulmonary and non-pulmonary disease increased slightly during 1964 (See Table IV). Two deaths were attributed to non-pulmonary tuberculosis during the year.

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 Group	Number of Deaths Annually from Pulmonary Tuberculosis									
	1931	1932	1941	1942	1951	1952	1961	1962	1963	1964
0-14	4	9	6	7	2	—	—	—	1	—
15-24	72	45	40	26	7	3	—	—	—	—
25-34	59	68	48	45	22	12	1	1	—	—
35-44	42	53	43	30	22	17	1	2	1	2 (2)
45-54	33	39	33	30	23	20	7	3	4	—
55-64	22	17	19	22	20	14	11	6	2	4 (1)
65 and over	5	3	7	9	9	14	10	13	9	5
TOTAL	237	234	196	169	105	80	30	25	17	11 (3)

The numbers in brackets refer to the number of female deaths during 1964

New Cases of Tuberculosis (see Table II)

There were 100 new cases of pulmonary tuberculosis compared with 95 for the previous year. 75 were males, an increase of 11 over 1964, whilst new female cases fell from 31 to 25. The 'extra' male cases occurred in the age group 25-54 years.

Table II

Giving the number of new cases of tuberculosis during 1964 by Age and Sex

Age Groups	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Under 1	—	1	1	—	—	—
1 year	1	—	1	—	—	—
2-4	2	—	2	—	—	—
5-9	3	1	4	1*	—	1
10-14	2	—	2	—	—	—
15-19	3	—	3	—	—	—
20-24	5	3	8	1	—	1
25-34	10	7	17	—	3	3
35-44	9	4	13	—	4	4
45-54	17	2	19	—	1	1
55-64	10	4	14	—	3	3
65-74	9	2	11	1	—	1
75 and over	4	1	5	—	1	1
TOTAL	75	25	100	3	12	15

*Case of Tuberculous Meningitis

New cases of non-pulmonary tuberculosis numbered 15 compared with 13 for the previous year. The localization of the disease as well as the sex of those affected is shown in Table III below.

Table III**New Cases of Non-Pulmonary Tuberculosis — Localization and Sex**

	Males	Females	Total
Nervous System	—	—	—
Meninges	1	—	1
Intestines and Peritoneum	—	1	1
Vertebral Column	—	—	—
Bones and Joints	—	1	1
Cervical Glands	—	4	4
Other Organs	2	5	7
Disseminated Tuberculosis	—	1	1

Non-pulmonary tuberculosis is commoner in females than males.

Since 1956, 16 cases of tuberculous meningitis have occurred in Cardiff. None of these individuals had had B.C.G. vaccination. The source of infection of this year's case was not found despite extensive enquiries.

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

	1921	1931	1941	1951	1961	1962	1963	1964
Number of New Notifications of Pulmonary Tuberculosis	245	352	334	354	157	136	95	100
Number of New Notifications of Non-Pulmonary Tuberculosis	59	132	110	58	21	13	13	14
Number of Pulmonary Tuberculosis cases on the Register at end of the year	848	1,007	1,242	2,096	2,918	2,970	2,683	2,645
Number of Non-Pulmonary Tuberculosis cases on the Register at end of the year	342	1,431	1,744	417	336	322	293	296

Table V**Giving the number of cases of Tuberculosis on the Register in Cardiff on the 31st December, 1963 and 1964**

	Pulmonary Tuberculosis			Non-Pulmonary Tuberculosis		
	Males	Females	Total	Males	Females	Total
Number of cases on the Register 31.12.63	1,496	1,187	2,683	135	158	293
Number removed during 1964 through deaths from all causes	30	11	41	—	—	—
Number no longer traceable	6	4	10	—	—	—
Number removed during 1964 through leaving Cardiff to live elsewhere	24	27	51	3	1	4
Number removed during 1964 as "Recovery" cases	27	34	61	3	6	9
Number of newly notified cases during 1964	75	25	100	3	11	14
Number of known cases who came from outside to live in Cardiff	19	6	25	2	—	2
Number of cases on the Register 31.12.64	1,501	1,144*	2,645	134	162	296

*Notification of one case was rescinded.

It is interesting to note that 61 cases of pulmonary tuberculosis were removed from the Register as "recovered" in 1964, as compared with 187 in 1963 whilst for other reasons as shown in Table V, the number of cases of pulmonary tuberculosis on the Register fell from 2,683 to 2,645. If the number of cases not traceable measures the efficiency of the after care services in follow-up etc., then it is pleasing to note that only 10 cases of pulmonary tuberculosis escaped surveillance compared with 43 the year previously.

Fewer known cases of pulmonary tuberculosis came to live in Cardiff during 1964 compared with 1963.

It is a pleasure to record the close and happy co-operation of this Department with our clinical colleagues.

Mass Radiography

In his Annual Report for 1964 Dr. T. Francis Jarman, Medical Director of the Welsh Mass Radiography Service, reported that 22,282 examinations were carried out by the static unit in Cardiff during that year. 1,044 films were diagnosed as being abnormal: amongst these 47 new cases of pulmonary tuberculosis were discovered.

Tuberculin Testing

The scheme of annual tuberculin testing of Cardiff schoolchildren was continued during 1964.

Five children were found to have converted from negative to Heaf grade III or IV during that year. The Chest Physician recalled three of them for treatment.

Eight children showed strong positive reactions at their first test. All were over aged 12 years. Three adults and twenty-seven children in contact with the above were investigated, but showed no evidence of tuberculosis.

The table below (VI) summarizes the results of the testing carried out during 1964.

Table VI

Giving the results of Tuberculin Tests among Cardiff Schoolchildren during 1964

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	3,947	77	97	2	0.2	9	—
6	3,385	84	97	3	0.4	23	—
7	4,559	88	97	3	0.1	25	1
8	3,554	88	96	4	0.4	33	—
9	3,825	86	95	5	0.2	35	1
10	3,671	88	94	6	0.2	33	—
11	3,623	86	94	5	1.0	34	—
12	3,643	88	93	6	1.0	48	2
13	3,609	71	90	9	1.4	43	—
14	3,710	24	77	21	2.3	17	—
15	2,529	17	59	32	9.0	18	1
16	1,777	13	59	33	7.6	2	—
TOTAL	41,832					320	5

Compared with the 10 cases of pulmonary tuberculosis detected in 1963, the testing scheme this year only yielded the 3 children mentioned above who were recalled for treatment by the Chest Physician. This suggests a lower prevalence of tuberculosis, and this perhaps is supported by the Table (VII), below which shows a fall in the number of tuberculin positive reactors at 13 years, during 1964. Consideration will have to be given to the need for continuing and modifying the annual tuberculin testing scheme in the future.

Table VII

**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
1964	4,300	419	9.7

BCG Vaccinations

As in previous years, BCG Vaccination was offered to tuberculin negative persons in the following groups:—schoolchildren aged 13, 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 VIII.

Table VIII

BCG Vaccinations—Cardiff 1959-64

Year	NUMBER OF								
	Contacts (ex.newborn Babies)		Schoolchildren				Newborn Babies Vaccinated		Others 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
1964	336	23	5,053	753	419	3,881	231	1,421	244

*—Includes absentees and scholars whose parents withheld consent.

†—Includes students at Colleges of Further Education.

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 IX.

Table IX

Showing the Results of Tuberculin Tests carried out during 1954-64 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
1963	3,440	3,188	92.7	252	233

VENEREAL DISEASES

TREATMENT AT TREATMENT CENTRES IN CARDIFF—1964

The treatment centre at Royal Hamadryad Hospital closed on 31st October, 1964, and a new programme of clinics for males and females was instituted at the Annexe to the Cardiff Royal Infirmary at Moira Terrace. A more extensive series of clinics were made available at this Centre.

The Department increased publicity of these clinics and over-printed a large supply of new posters available from the Ministry of Health with particulars of the new arrangements. These posters were displayed in public conveniences and other suitable places and excellent co-operation was given by certain large undertakings.

V.D. Treatment Centres	Cardiff Royal Infirmary						Royal Hamadryad Hospital		Grand Total	
	1964			1963			1964	1963	1964	1963
	Male	F'male	Total	Male	F'male	Total	Male	Male		
NEW CASES										
Syphilis only	6	8	14	9	13	22	16	28	30	50
Soft Chancre only	3	—	3	—	1	1	6	25	9	26
Gonorrhoea only	172	78	250	120	63	183	132	222	382	405
Multiple infections	—	—	—	—	—	—	13	19	13	19
Other Conditions										
(a) Requiring treatment ..	313	216	529	310	161	471	55	67	584	538
(b) Not requiring treatment ..	133	94	227	51	121	172	118	59	345	231
(c) Not yet diagnosed	1	17	18	—	9	9	—	—	18	9
TOTAL	628	413	1,041	490	368	858	340	420	1,381	1,278
TOTAL ATTENDANCES	3,264	1,935	5,199	2,302	1,784	4,086	1,403	2,089	6,602	6,175
IN-PATIENT DAYS IN HOSPITAL	144	100	244	115	148	263	165	66	409	329

Age Groups				Male	Female	Total
(a) SYPHILIS						
Under 14 years	..	..		—	—	—
15 - 16 years	..	..	..	—	—	—
17 - 18 years	..	..	..	—	—	—
19 - 20 years	..	..	..	—	2	2
20 - 24 years	..	..	..	—	—	—
Over 25 years	..	..	..	14	14	28
				14	16	30
(b) GONORRHOEA						
Under 15 years	..	..		—	5	5
15 - 16 years	..	..	..	—	4	4
17 - 18 years	..	..	..	12	5	17
19 - 20 years	..	..	..	25	20	45
20 - 24 years	..	..	..	58	26	84
Over 25 years	..	..	..	171	56	227
				266	116	382
(c) OTHER CONDITIONS						
Under 15 years	..	..		2	16	18
16 - 17 years	..	..	..	25	29	54
18 - 19 years	..	..	..	61	68	129
20 - 24 years	..	..	..	163	120	283
Over 25 years	..	..	..	314	171	485
				565	404	969

VI—PERSONAL HEALTH SERVICES

(National Health Service Acts, 1946–61)

CARE OF MOTHERS AND YOUNG CHILDREN

Vital Statistics

Live births (registered)	.. .. .	5,076
Live birth rate per 1,000 population	.. .. .	19.50
Illegitimate live births per cent of total live births	.. .. .	8.69
Still births (registered)	.. .. .	90
Still birth rate per 1,000 total live and still births	.. .. .	17.42
Total live and still births	.. .. .	5,166
Infant deaths	.. .. .	110
Infant mortality rate per 1,000 live births—total	.. .. .	21.67
Infant mortality rate per 1,000 live births—legitimate	.. .. .	18.52
Infant mortality rate per 1,000 live births—illegitimate	.. .. .	36.28
Neo-natal mortality rate per 1,000 live births	.. .. .	16.15
Early neo-natal mortality rate per 1,000 live births	.. .. .	13.00
Peri-natal mortality rate	.. .. .	30.2
Maternal mortality (including abortion):		
Number of deaths	.. .. .	1
Rate per 1,000 total live and still births	.. .. .	0.19

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 1964 according to the source of notification:—

<i>Notified by:—</i>	<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Municipal Midwives	1,172	5	1,177
Private Midwives (Domiciliary) ..	—	—	—
Private Midwives (Nursing Homes)	406	1	407
Parents or Doctors	4	—	4
Maternity Hospitals:—			
(a) Cardiff Maternity Hospital	2,613	61	2,674
(b) St. David's Hospital } ..	2,354	50	2,404
G.P. Unit } ..	15	—	15
	<u>6,564</u>	<u>117</u>	<u>6,681</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	4	—	4
Private Midwives (Domiciliary) ..	—	—	—
Private Midwives (Nursing Homes)	207	1	208
Parents	—	—	—
Maternity Hospitals:—			
(a) Cardiff Maternity Hospital	646	16	662
(b) St. David's Hospital ..	606	18	624
	<u>1,463</u>	<u>35</u>	<u>1,498</u>

Transferred notifications of Cardiff cases were 44. Thus, after allowing for all transferred notifications, the number of Cardiff births notified was 5,227 and this figure was made up as follows:—

			<i>Live Births</i>	<i>Still Births</i>	<i>Total</i>
Domiciliary			1,185	5	1,190
Institutional			3,960	77	4,037
					<hr/> 5,227 <hr/>

INFANT AND CHILD WELFARE

Child Welfare Centres

The total number of sessions held at Child Welfare Centres was 1,530, the average attendance at each being 44·3 and the total number of attendances was 67,814. The number of children who, at their first attendance during the year, were under 1 year of age was 8,431. The total number of children who attended during the year was 10,016.

The work at the clinics has been directed towards further observation of infants at risk for a number of conditions. As a result of a careful follow-up of infants born since 1963 it has been possible to isolate at an early age handicapping conditions which might necessitate special arrangements for medical care and education.

Close liaison with paediatricians and general practitioners has been a feature of this follow-up and the specialist health visitors responsible for the after care of children have played an important role in the follow up of children with physical and mental handicaps.

Infants "At Risk"

The names of 1,258 children were recorded in the "At Risk" Register during 1964. 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	..	..	..	200
2.	Labour complications	..	..	..	465
3.	Perinatal history	..	..	..	239
4.	Prematurity	..	..	..	287
5.	Post-maturity	..	..	..	39
6.	Congenital Abnormalities	..	..	..	110
7.	Family history of Deafness	..	..	..	18
8.	Family history of mental subnormality	..	..	..	17
9.	Severe illness after the perinatal period	..	..	..	6
10.	Parents' suspicion of Deafness	..	..	..	—
11.	Speech delayed beyond the age of 2 years	..	..	..	1
12.	Other	..	..	..	—
	TOTAL	..	..	..	<hr/>1,386 <hr/>

A comprehensive register of infants at risk for conditions such as deafness and cerebral palsy, among other handicaps, has been maintained since January 1963. The object of this register is two-fold:—

- (a) It ensures that these children are reviewed at the appropriate time from the point of view of deafness, by health visitors doing routine hearing tests in infancy;
- (b) It provides an easy way of observing the children from the point of view of abnormalities which might prejudice their development and education. In order that the efficiency of the register could be ascertained and possibly the number

of categories 'at risk' reduced, a survey was begun in 1964. A proportion of the infants born in 1963 in these categories were examined at or near the first birthday. A control group of infants born in the same year but not recorded in the observations register were also examined. The results of the enquiry are not yet available.

Screening Tests for Deafness in Infancy and Early Childhood

This test has been restricted largely to children in the observation register. 2,461 infants were tested by health visitors at the clinics and these included children who were tested at the express wish of the mother. Out of the large number of infants tested, 26 failed the screening tests and were referred to a medical officer for further assessment.

Some of the children were toddlers whose speech was defective or retarded in development.

Three children were confirmed as deaf. One was an infant aged 9 months and the other two were 2 years old and 2½ years old respectively.

All three were referred to the Consultant Ear, Nose and Throat Assessment Clinic for confirmation and treatment.

Routine Urine Testing for Phenylketonuria

The total number of Phenistix tests done for infants 14 days after birth, was 4,618. Repeat tests when the children were six weeks old, numbered 4,764. The results show that 92% of infants born in Cardiff were tested. A positive reaction was obtained in a premature baby when he was four weeks old. The discovery of this case brought the total number of cases born in Cardiff since 1958 to four, an incidence of approximately one in 10,000 births.

Nose and Throat Defects

Number examined for the first time	..	..	348
Received operative treatment in hospital	..	..	34
Received other forms of treatment at Clinic	..	..	6
Total attendances at Clinic	..	..	415

Visual Defects

Attended clinic for the first time	..	..	..	861
Examined for errors of refraction	..	..	..	86
Spectacles prescribed	..	..	..	69

Care of Premature Infants

Special visits are made in the case of premature babies born at home, 2,519 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 22.

Number of Premature Live Births notified:—

(a) In hospital	..	..	..	..	367
(b) At home or in a nursing home	..	..	..	..	36
					<hr/> 403

Number of Premature Still Births notified:—

(a) In hospital	..	..	..	..	47
(b) At home or in a nursing home	..	..	..	..	2
					<hr/> 49

PREMATURE LIVE BIRTHS															PREMATURE STILLBIRTHS
Weight at birth	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 hospital (13)	at home or in a nursing home (14)	
in 1 and under 7 days (3)			in 7 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 ..	49	26	5	1	—	—	—	—	3	2	1	—	16	—	
2. Over 2 lb. 3 oz. up to & including 3 lb. 4 oz.	47	9	4	—	—	—	—	—	—	—	—	—	15	—	
3. Over 3 lb. 4 oz. up to & including 4 lb. 6 oz.	48	3	2	1	2	—	—	—	1	—	—	—	9	1	
4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	67	3	—	2	3	—	—	—	5	—	—	—	4	—	
5. Over 4 lb. 15 oz. up to & including 5 lb. 8 oz.	156	3	—	1	31	—	—	—	2	—	—	—	3	1	
6. TOTALS ..	367	44	11	5	36	—	—	—	11	2	1	—	47	2	

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

Infant Deaths

110 deaths occurred in infants under the age of one year representing an infant mortality rate of 21.67 (England and Wales 20.0). Although, still above the national rate for England and Wales, the rate is lower than the previous year's figure of 24.7.

The main causes of infant deaths are shown in the Table on page 5. 65.45% of infant deaths occurred in the first week of life.

Infant Deaths Associated with Pneumonia

The number of infant deaths due to broncho-pneumonia was 35. A large proportion of these deaths occurred in premature babies and in 7 other infants there was associated congenital malformation. The cause of death in 13 cases was acute bronchiolitis. In one third of all cases the standard of mothering was recorded as poor. There was one death from whooping cough in an infant who had not received prophylactic immunisation because of parental refusal.

Nurseries and Child Minders Regulation Act 1948

There continues to be a demand for nursery accommodation for children between the ages of 3 and 5 years. Both registered premises and persons are visited regularly by the health visitor staff. Reports on specially prepared forms are submitted to the Medical Officer of Health by the health visitor three times a year, and in addition the nurseries are visited periodically by a senior medical officer.

Number of premises registered at 31st December 1964	..	13
Number of children provided for	.. .. .	392
Number of registered Daily Minders at 31st December 1964		10
Number of children provided for	.. .. .	171

CARE OF EXPECTANT MOTHERS

Ante-natal Clinics

The number of sessions held was 1,457 and the average attendance at each session was 14 expectant mothers.

Mothercraft and Relaxation

Classes of mothers booked for home confinement have taken place at all the clinics. Although principally for primigravida many women expecting a subsequent child have attended the classes. The attendances varied from clinic to clinic but health visitors, midwives and the physiotherapist endeavoured to stimulate interest in the subject. Appropriate films have been shown at intervals and have been well received.

514 expectant mothers attended the mothercraft and relaxation courses during 1964.

Care of the Unmarried Mother and Her Child

A Health Visitor, Miss M. E. Wells, has been appointed initially on a half time basis to care for unmarried mothers and their children and commenced these duties in December 1964.

The Authority accepted financial responsibility for 21 unmarried mothers in 1964 for admission to the following homes.

- The Salvation Army Home (Northlands)
- The Salvation Army Home (Bristol)
- The Convent of the Good Shepherd, Chepstow
- The Llandaff Diocesan Association for Moral Welfare
- St. Nicholas House, Exeter.

Deaths Ascribed to Pregnancy or Childbirth

There was one death during the year. Details are as follows:—

The cause of death was Septicaemia due to septic abortion. Maternal age 39 years.

Diagnostic Clinic at Annexe to Cardiff Royal Infirmary

A total of 141 mothers and children were referred to this clinic via the ante-natal clinics and school health service during 1964. This shows an increase of 58 in the total number of referrals compared with 1963.

The following diagnoses were made:—

Syphilis	..	..	..	..	..	3
Gonorrhoea	..	..	..	..	..	10
Other conditions (not venereal disease)	..	..	..	..	..	128
(of which 13 were adoption investigations)						
						<hr/> 141 <hr/>

The age groups of patients were:—

Children of school age	..	..	..	..	27
16-17 years	..	..	..	..	10
18-19 years	..	..	..	..	19
20-24 years	..	..	..	..	45
Over 25 years	..	..	..	..	40
					<hr/> 141 <hr/>

From the report on 141 ante-natal cases referred to this department for investigation, it will be seen that 10 cases were found to be suffering from a gonococcal infection. Four of these were extra-marital conceptions. There is no doubt that investigation to exclude gonococcal infection should be an important part of ante-natal care. Attention is drawn to this in the Annual Report of the Chief Medical Officer of the Ministry of Health for 1963.

Of the seven cases referred showing positive serology, one proved to be a true latent syphilis, two were congenital syphilitics, and the remaining four cases were biological false positives.

With the increased incidence of syphilis at the present time the continued routine blood testing in ante-natal cases and the correct interpretation of results is of the greatest importance.

District Diagnostic Clinics

The diagnostic clinics, which were commenced during the previous year at Llanrumney and Ely Clinics, dealt with ante-natal patients complaining of vaginal discharge. A total of 67 patients were seen and treated during the year.

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 three cases were referred by the Department during 1964, but also shows that 327 new cases were seen at this clinic, and 997 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 907 and that an increasing number of new patients are being referred by family doctors, a trend which was welcomed.

Sessions and Attendances were:—

Number of Sessions	103
Number of New Patients	907
Total number of Patients Attending	1,961
Total Attendances at Clinics	4,314

CARDIFF AREA MATERNITY SERVICES LIAISON COMMITTEE

The following items were reported and discussed by this Committee.

General Practitioners' Short Stay Delivery Unit

This Unit was opened in September 1964. It consists of a detached single storeyed building adjacent to the 100 bedded Maternity Unit at St. David's Hospital, Cardiff. There are 5 single rooms, each furnished with a single labour ward bed and other items necessary for domiciliary type confinement. The emphasis has been laid upon simplicity of design but the Unit incorporates up to date conveniences. The patients are entirely under the care of their own general practitioners and the booked domiciliary midwife. The midwife takes the patient to the Unit when she is in labour. After delivery, mothers and babies are discharged home by ambulance in the charge of the midwife, when the doctor considers that they are fit for transfer.

17 patients had been delivered in the Unit by the end of December 1964 and a further 65 had been booked for the period up to the end of July 1965.

No patient admitted to the Unit had to be transferred to a Consultant Unit. There were no re-admissions of mothers nor admission of babies to hospital and there had been no case of serious morbidity in mother or child. A further 14 patients had been booked for delivery in the Unit, but in 6 cases the patient had been too far advanced in labour for transfer to the Unit, when the midwife was called in. The remainder had to be admitted to Consultant Units for the following reasons:—

- 4 premature labour
- 2 emergency admissions—delayed labour
- 1 case of foetal distress
- 1 hand presentation

The Unit is proving popular with the patients, and domiciliary midwives are enjoying the experience of working under the ideal conditions to be found there, although a few adjustments have had to be made in their work schedules. The domiciliary midwives act in an honorary capacity as members of the hospital staff while they are working in the short stay Unit and to facilitate this arrangement, each signs a midwife's honorary contract with the Regional Hospital Board.

Cardiff Births Survey

It was reported that this survey was running smoothly. Data collected on the printed transcription sheet has to be processed by computer and quarterly data for all the births in Cardiff will soon be available.

Cervical Cytology Survey

Under the auspices of the Medical Research Council, the Ministry of Health, the Welsh Hospital Board and the Local Health Authority, it is proposed to carry out a survey in Cardiff for the early diagnosis of cervical cancer. Certain groups of the female population of Cardiff will be screened for this disease and the survey is due to begin in 1965.

Joint Ante-Natal Clinics between Hospitals and Local Authority

Twice weekly clinics at which both hospital and local authority doctors are in attendance were started in the last quarter of 1964 in the new Out-Patient premises at St. David's Hospital, Cardiff. The integration is working well and the arrangement has been officially approved.

DENTAL TREATMENT

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

Principal School Dental Officer

Referrals

Under the present arrangement, a mother attending an ante-natal clinic is given, amongst other things, an initial dental examination by a medical officer. Of necessity, time and the facilities available, do not permit of a complete inspection being made at the time, and it is possible, therefore, that the less obvious dental lesions may be overlooked and the patient not referred to the dental officer on this account.

Again, a certain proportion of referred patients fail to attend for the more detailed examination by the dental officer, although, in recent years, the position in this respect has greatly improved, e.g. 91.1% attended the second inspection in 1964, as against 78.2% in 1959. For the reasons stated above, it would seem desirable, where ante-natal sessions are held at the Authority's Health and School Clinics, that suitable arrangements be made, where possible, so that all mothers, other than those receiving treatment privately, or under the National Health Service, can, after their preliminary dental examination by the medical officer, be sent directly, i.e. during the same sessional period, for further assessment by the clinic dental officer.

In my report for 1961, in May of which year the National Health Service Act, 1961 came into operation, reference was made to the main provision of the Act—whereby all priority class patients became exempt from payment of statutory charges in respect of dentures supplied—and to the effect this might have on clinic attendances, etc. At that time the number of mothers referred by medical officers was 1,081, but has since fallen by almost half to the present level of 568, and the number treated has likewise dropped from 603 to 383.

Despite the all-round contraction in the volume of work performed, resulting primarily from the reduced number of referrals, improvements can be shown in most instances where figures representing items of treatment per cent of patients treated are compared. In the case of expectant mothers, for example, the number of teeth filled per cent of mothers treated was 127 against 116 in 1963, the corresponding figures for children being 40 and 38 respectively; on the same basis of comparison, an improvement is also indicated in respect of expectant and nursing mothers, where the number of teeth extracted fell by 48 and the number of mothers supplied with dentures, by 4.

Decreases occurred in the number of teeth extracted to teeth filled, for both mothers and children, though these were fractional in either case.

Local Authority Dental Services

The Welsh Board of Health, in their L.S.5/234/2, dated 2nd June 1964—following consideration of the report of their Regional Dental Officer, Mr. G. E. Morgan, who visited the Cardiff Authority in connection with the services provided to expectant and nursing mothers and pre-school children—commented favourably on the efforts being made to provide a satisfactory service, giving full credit to the dental officers concerned for the appreciable amount of treatment and time given to inspection, and expressed pleasure at the excellent co-operation between the dental and medical staff, including health visitors and school nurses. The Department commended the high standard of accommodation and equipment, particularly at the more recently built clinics, although some of the equipment in the older clinics was regarded as “outmoded.” It was also suggested that the efforts made in providing a comprehensive dental service would be strengthened if the complement were to be increased to ten or more whole-time officers. It is pleasing, therefore, to record that authorisation has since been given whereby the existing establishment of nine full-time officers has been raised to eleven.

New Clinics

Roath Health Clinic, of which mention was made in my report of last year, was officially opened on the 20th February 1964.

The Dental unit situated on the first floor comprises a waiting-room with adjoining toilets, a centrally placed surgery with direct access on the one side to an office and on the other to a small laboratory and a recovery room. An enquiry hatch is placed between waiting-room and office, whilst patients reach the surgery from the waiting-room via a short corridor with swing doors at either end, the purpose of which being to provide the necessary acoustic insulation between the two rooms; a similar device exists between surgery and recovery room.

Patients arriving at the main entrance, after passing through the dental section, leave by a separate exit, and thus cross-circulation is avoided.

Another important feature is the excellent natural lighting afforded by window coverage extending in height from approximately three feet above floor level to ceiling and, lengthwise, taking in the whole of the dental surgery, office, and most of the waiting-room.

Equipment installed is new and includes an OraleX X-Ray apparatus attached to the dental unit, whilst the laboratory is also fitted out as a dark-room with sink unit and the requisite apparatus for X-Ray film development. In general, there is little doubt that parents and patients are fully appreciative of the modern layout and the facilities available to them.

The Health Clinic now under construction at Splott Park is reaching completion and should be ready for use in the early part of 1965.

Statistics

	Expectant Mothers	Nursing Mothers	Pre-School Children	Total
<i>(a) Numbers provided with Dental care</i>				
Referred for treatment by M.O's	248	320	583	1,151
Attended for inspection	223	295	576	1,094
Found to be in need of treatment	217	289	478	984
Treated for first time	151	232	387	770
Made dentally fit	64	152	318	534
Attendances for treatment	501	1,234	598	2,333
<i>(b) Treatment provided</i>				
Teeth filled	193	300	157	650
Teeth extracted	162	468	670	1,300
Silver nitrate treatment	1	4	9	14
Dressings	40	109	61	210
Scalings with gum treatment	31	46	—	77
Scalings	31	42	3	76
Extractions under local anaesthetics	291	371	4	666
Administration of general anaesthetics	16	79	358	453
Crowns and inlays	—	3	—	3
Mothers supplied with dentures	32	118	—	150
Radiographs	6	18	1	25
<i>(c) Dentures supplied</i>				
Full Upper	22	72	—	94
Partial Upper	10	36	—	46
Full Lower	16	42	—	58
Partial Lower	2	30	—	32

Number of Sessions 348½

DISTRICT MIDWIFERY SERVICE

During the latter part of the year a new rota system for midwives was introduced. The main features of this rota are:—(a) the allocation of the midwives into groups of four with each group serving a broadly defined area of the city; (b) headquarters and district midwifery staff are included in the rota; (c) off-duty commences at 2 p.m. on the afternoon previous to the day or week-end off; (d) midwives now have more free time under the new rota system i.e. 10½ days per 4 week period.

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 124
- (ii) Midwives employed in Nursing Homes 4

(b) DOMICILIARY

Midwives employed by the Authority

- (a) Headquarters Midwives 10½
- (b) District Midwives 14

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 36

(ii) Others —

(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 ..	10	1,167	1,177	—
(b) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	4,980
(c) Midwives in Private Practice (including Midwives employed in Nursing Homes) ..	—	—	—	402
TOTALS	10	1,167	1,177	5,382

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

Statistics relating to Domiciliary Midwives

The statistics relating to the work of the service during 1964 are as follows:—

Early hospital discharges attended 766
 48-hour hospital discharges attended 488
 Housing visits to the above to arrange allocation of hospital beds 1,093
 Total number of visits to patients during lying-in period .. 35,003
 Total visits to patients during ante-natal period 7,890
 Total number of cases booked 1,635
 Total number of cases attended 1,282

Part II Midwifery Training School:

Number of pupils entered school 27
 Number of pupils entered examination 25
 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 213 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	2	—
Puerperal Pyrexia	5	3
All of these cases were of a mild type.		

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 1,584.

HOME NURSING SERVICE

The increasing demand on the services of the district nursing staff has resulted in the addition to the establishment of the equivalent of one district nurse, making a total full-time equivalent of 45. In addition, 11 student district nurses completed their training during the year.

The statistics relating to the work of the service during 1964 are as follows:—

Number of new cases	3,372
Cases carried over from 1963	973
Total ..	<u>4,345</u>

Classification of cases and visits:—	<i>Cases</i>	<i>Visits</i>
Medical	2,667	124,084
Surgical	570	19,821
Tuberculosis	36	3,640
Maternal complications	—	—
Others	99	983
	<u>4,345</u>	<u>148,528</u>

Children under 5 years of age ..	102
Patients over 65 years of age ..	2,365

Sources from which cases were referred:—

General Practitioners	2,965
Hospitals	147
Public Health Department	85
Miscellaneous	175
Brought Forward	973
	<u>4,345</u>

Although the number of cases has decreased since 1963 by 276, the total number of visits has increased by 6% over the figures for 1963. This has meant the greater care and attention has been given to the patients nursed during 1964. The number of aged persons has continued to increase and it will be seen that more than half the patients nursed are in this category and of course usually require nursing for an indefinite period. The following special services have continued during 1964 and have been greatly appreciated by the recipients and their relatives:—

Laundry Service for Incontinent Patients

This service is now in its sixth year and during 1964, 244 patients received this service, an increase of 59 over the previous year.

Marie Curie Service for Cancer Patients

In 1964, 18 patients received this service from specially recruited nurses for 72 sessions, involving 648 hours being worked. This service is operated on behalf of the Marie Curie Foundation.

Night Relief Nurses

27 families received relief from nurses or night sitters on 427 sessions in 1964, the fourth year since the inception of the service. The majority of patients receiving help were elderly, but some were younger people in the extreme stages of illness.

Incontinence Pads

Stocks of Incontinence Pads are available but issues have remained on a limited basis. This is probably due to the excellent use made of the Laundry Service but consideration is being given to the development of the use of these pads.

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, visiting of mentally subnormal persons 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 9 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 1964	..	{	First visits	..	..	4,523
		{	re-visits	..	..	9,180
Children born in 1963	..	{	First visits	..	..	5,835
		{	re-visits	..	..	8,758
Children born in 1959-62	..	{	First visits	..	..	14,237
		{	re-visits	..	..	17,082
Vaccination and Immunisation		{	First visits	..	..	205
		{	re-visits	..	..	101

Nutritional Visits	..	..	{ First visits	..	..	95
			{ re-visits	..	..	77
Expectant Mothers	..	..	{ First visits	..	..	985
			{ re-visits	..	..	398
Venereal diseases	..	..	Re-visits	..	..	4
Problem families	..	..	{ First visits	..	..	139
			{ re-visits	..	..	2,395
Chronic sick (under 65 years)			{ First visits	..	..	163
			{ re-visits	..	..	241
Persons aged 65 years and over			{ First visits	..	..	2,669
			{ re-visits	..	..	4,691
Mental Subnormality	..		{ First visits	..	..	72
			{ re-visits	..	..	1,361
Mental Welfare	..	..	{ First visits	..	..	200
			{ re-visits	..	..	1,776
Tuberculosis Households	..		{ First visits	..	..	675
			{ re-visits	..	..	1,236
B.C.G. Vaccination	..	..	{ First visits	..	..	197
			{ re-visits	..	..	221
Visits to households for other infectious diseases	..	..	{ First visits	..	..	8
			{ re-visits	..	..	9
Premature Infants	..	..	{ First visits	..	..	426
			{ re-visits	..	..	2,093
Paediatric cases	..	..	{ First visits	..	..	649
			{ re-visits	..	..	544
Diabetic cases	..	..	{ First visits	..	..	185
			{ re-visits	..	..	412
Cardiac cases	..	..	{ First visits	..	..	469
			{ re-visits	..	..	430
Asthma cases	..	..	{ First visits	..	..	5
			{ re-visits	..	..	—
Other special enquiries, surveys, etc.	..	..	..	..	..	2,914
Ineffectual visits	..	..	..	..	..	15,162
						<hr/> 100,282 <hr/>

Co-operation with General Practitioners and Hospitals

Health Visitors continued the policy of co-operation with general practitioners and hospitals and the following statistics, whilst not fully revealing the extent of this co-operation, give an indication of the liaison during 1964:—

1. Number of persons aged 65 years or over who were visited at the special request of a general practitioner or hospital .. 182
2. Number of mentally disordered persons who were visited at the special request of a general practitioner or hospital .. 58
3. Persons visited excluding maternity cases after discharge from hospital (other than mental hospitals) 347
4. Number included in item 3 above who were visited at the special request of a general practitioner or hospital .. 241

DOMESTIC HELP SERVICE

The steady expansion of this service has continued in 1964. The number of Home Helps employed at the end of the year has increased from 253 in 1963 to 274 while the average number of working hours authorised each week has been increased from 5,072 in 1963 to 5,576.

Details of the service provided during the year are as follows:—

Number of Home Helps employed at the end of the year:—

Whole-time	..	..	..	..	..	35
Part-time	..	..	..	..	..	239
						274

Cases in which help was provided:—

Maternity	..	..	..	..	..	138
Tuberculosis	..	..	..	..	..	17
Chronic sick	..	..	..	..	..	212
Aged and Infirm	..	..	..	..	..	1,332
Mentally disordered	..	..	..	..	..	5
Blind	..	..	..	..	..	10
Acute sick	..	..	..	..	..	31
Miscellaneous	..	..	..	..	..	15
						1,760

An analysis of the above figures shows an increase in most of the categories for which home helps were provided. The total number of cases has shown an increase of 9% over the figures for 1963, the largest percentage increase being found in the number of home helps provided in maternity cases. The provision of home helps in this category is a much appreciated service and is given for two weeks after the birth of the child. This does much to alleviate the domestic problems caused by the arrival of a new baby in a household. The largest numerical increase has been in the number of cases provided to the aged and infirm and it is anticipated that this increase in the number of old people requiring home helps will continue for the foreseeable future.

THE CARE OF THE ELDERLY

By **JEAN M. EVANS, B.Sc., M.B., B.Ch., D.R.C.O.G.**

and **JOHN N. P. HUGHES, M.B., B.Ch., D.P.H.**

A further increase in the number of elderly persons under the community care services occurred, as would be expected, during 1964. At the mid point of 1964, 2,800 elderly people were being visited by the department. This is an increase of 15% over the numbers for 1963. They comprise 10% of the population of the city of 65 years and over (28,064) recorded at the 1961 census. Table I shows the number of cases known to the department on an area basis in comparison with figures for the previous four years. During 1964, Health Visitors made a total of 7,360 visits, comprising 2,669 first visits and 4,691 re-visits. From Table II it can be seen that less total visits were made during 1964 in comparison with 1963. The unusually high number for 1963 was occasioned by the very severe winter climatic conditions which necessitated more frequent re-visits. Excluding this factor, the overall trend is one of a gradual increase which we may expect to be sustained for a number

of years while the numbers of persons of 65 years and over in the population continue to increase. This factor must be considered in the future deployment of our existing health visiting resources.

The Geriatric Liaison Health Visitors made a total of 1,117 case visits during the year and a further 200 visits in association with a medical officer. Table III shows the sources of new cases seen by the Liaison Health Visitors during 1964. The numbers of new cases have diminished by 30% of those seen in 1963, (265) but they have been largely of a more difficult nature than formerly. In addition, 1,066 visits to various agencies itemed in Table IV were made in connection with these cases. Increased use of Geriatric Liaison Health Visitors by the Hospital Geriatric Service in obtaining social assessments of cases referred to this service prior to their being seen by the consultant has occurred.

During 1964, the Council of Social Service for Wales and Monmouthshire (Inc.) carried out a survey of two areas in the city. All houses in the areas were visited and all occupants of 65 years and over were interviewed. In the Splott and Tremorfa area 1,368 elderly persons were interviewed and it was found that 257 or 19% were lonely and/or infirm. In the Riverside and Canton area, 2,003 elderly persons were interviewed and it was found that 303 or 15%, were lonely and/or infirm. These would appear to be the sections of the geriatric population "at risk", and in need of the Community Care Services. At the end of 1964, the Register of Elderly Persons known to the Community Care Services and kept by the department stood at 3,337. This is 12% of the population of the city of 65 years and over (28,064) recorded in the 1961 census. Thus, it would appear that there is reasonable but by no means complete, cover by the Community Care Services of those geriatric cases most in need.

The nature of the work of the department's special geriatric services continues to be of a co-ordinating and informative nature, so that all the available services, both statutory and voluntary, may be used to best effect. It is becoming increasingly obvious that these services are stretched to their utmost capacity. The excellent close relationship with hospital, welfare and voluntary services has continued and enabled most of the needs of the cases which have been presented to be fulfilled, but the great potential for preventive work in the field of geriatrics must remain untapped until greater supportive facilities are available. In particular, increased domestic home help and Welfare accommodation are required. The Home Nursing Service devotes a great proportion of its facilities to helping infirm, elderly people to dress, undress and bath. These services are essential in helping to maintain geriatrics in the community, but do not require the high degree of nursing skill of the qualified nurse. Suitable unqualified auxiliary personnel could be employed to ease the burden on the qualified home nurses and enable these to be released for cases requiring their more specialised ministrations.

During the year, the Geriatric Day Hospital at St. David's Hospital was officially opened, and now 40 people per day are attending. The Welfare Department have extended their day centre facilities for the elderly with provision for lunch, by taking over the church hall premises at Bangor Street, recently vacated by our department. Voluntary transport facilities for taking elderly people to and from both health and welfare department centres increased during the year, but inadequate transport facilities limit certain developments in the geriatric field.

Increased interest in the problem of hypothermia and temperature control in the elderly has led to the provision of special low reading thermometers in the department. It is proposed that all Health Visitors will, in the coming year, take temperatures during their geriatric visits.

In May, 1964, Dr. R. M. Williams left the department, and his duties in this field were transferred to Dr. J. N. P. Hughes, already a member of the department staff.

Table I

Geriatric Cases known to Health Visitors

Area Clinics—	1960	1961	1962	1963	1964
Roath	307	383	453	651	670
Gabalfa	139	175	220	214	326
Splott	46	56	104	155	117
Grange	151	186	257	169	203
Canton	208	258	257	370	414
Ely	105	130	139	212	247
Llanrumney	73	91	191	195	274
College Farm	46	56	63	110	131
Fairwater	70	87	120	190	189
Llanishen	21	26	57	91	119
Geriatric Liaison Health Visitors ..	40	50	50	84	110
	1,206	1,498	1,911	2,441	2,800

Table II

Geriatric Visits made by Health Visitors

	<i>Total</i>	<i>First Visits</i>	<i>Re-Visits</i>
1960	5,130	949	4,181
1961	6,016	980	5,036
1962	5,949	1,021	4,928
1963	8,383	1,125	7,258
1964	7,360	2,669	4,691

Table III

New Cases Visited during the Year, 1964, and by whom referred

New Cases

Referred by:—

St. David's Hospital	64
General Practitioners	24
Welfare Department	11
National Assistance Board	22
Relatives and Friends	22
Request by Patient	2
Hospital Almoners	3
District Nurses	11
Found whilst visiting	5
Housing Department	2
Medical Officer of Health	2
Voluntary Organisations	8
Public Health Inspectors	2
Health Visitors	3
Councillors	2
Council of Social Service	1
Citizens' Advice Bureau	1

Total New Cases: 185

Table IV

Additional Visits to various Agencies made by Geriatric Liaison Health Visitors during 1964

<i>Agency</i>	<i>No. of Visits</i>
Hospitals	261
General Practitioners	22
Shops, Banks, National Assistance Board, etc.	197
Relatives and Friends of Patients	161
Hospital or Local Authority Clinics	142
Welfare Department Geriatric Centres	127
Other Visits (W.V.S., Order of St. John, Red Cross, etc.)	156
	<hr/> 1,066 <hr/>

REHABILITATION OF PROBLEM FAMILIES

REPORT OF THE SOCIAL CASE WORKERS

Number of Cases left open 31st December, 1963 ..	35
Number of New Cases during 1964	25
Number of Cases closed during 1964	29
Number of Cases left open 31st December, 1964 ..	31
Number of Home Visits	1,787
Number of Visits to Agencies	305
Number of Cases Improved	35
Number of Cases Stationary	21
Number of Cases Deteriorated	4

New Cases

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

4 New cases were taken on at the request of the Co-ordinating Committee. These families had multiple problems including debts, general mis-management, poor family relationship, and in two cases, over-crowding.

12 Cases were specially referred because of marked deterioration in the home, or crisis in the family.

General Progress

In four cases conditions were very bad, e.g. nine children and parents living in two rooms; No gas or electricity; Numerous debts, dirty rooms, apathetic mother.

Two of the families were re-housed and with concentrated case work, have improved a great deal. The other two were transferred to an older part of the city and with support have improved.

The Rent Re-habilitation cases need frequent visiting and often take 6—9 months to show any marked improvement. The whole financial position has to be stabilised and the habit of regular payment of debts established, if possible. One family, evicted for rent arrears, have paid off £20 and, with continued support, hope to be re-housed, so that they can be re-united with their children.

Closed Cases

22 Cases improved sufficiently to be closed.

3 Cases were transferred to the supervision of the Children's Department.

3 Cases were evicted. One for persistent rent arrears. Two because the mothers were unable to cope after the fathers deserted the families. In one case, the children were taken into care because the mentally sub-normal mother neglected them.

Thanks for help are once again due to:—

All the Local Authority Departments

Family Welfare Association

W.V.S.

Cardiff Charity for Special Relief

Dr. Barnardo's

National Assistance Board Officers

County Court Officers

CHIROPODY SERVICE

There has been an increasing demand during the year for this service as more people have become aware of the facilities available to them. The heavy demand has resulted in an increase in the number of patients on the chiropodists' waiting lists from 75 in 1963 to 200 at the end of 1964, in spite of the fact that the number of chiropodists on the panel has been increased by two and the number of treatments authorised has also been increased.

Statistics relating to the service are as follows:—(the figures in brackets relate to 1963):—

Table 1

Number of patients registered	..	..	..	4,292	(3,661)
Number of patients on the waiting list	..	..	..	200	(75)
Number of Chiropodists	..	..	..	20	(18)
Number of treatments given:					
at Surgery	..	13,381	(11,179)		
at Home	..	3,492	(2,608)		
		<u>16,873</u>	<u>(13,787)</u>		

Table 2

Number of patients registered of retirement age or over	..	..	..	..	4,253	(3,643)
Number of patients registered as expectant mothers					6	(4)
Number of patients registered as handicapped persons	..	..	..	..	33	(14)
					<u>4,292</u>	<u>(3,661)</u>

99 per cent of the patients registered are over retirement age but the figure of 4,253 represents only 11.9% of the known population in Cardiff of persons over retirement age. It is of special interest that the number of treatments given at home showed a 33.9% increase during the year and the figure of 3,492 now accounts for approximately a fifth of all treatments.

Co-operation with the Women's Voluntary Service in providing chiropody services at day centres for the aged has continued during 1964. A grant is now made to this organisation to provide facilities at the Grangetown and Plasnewydd Day Centres in addition to the Day Centres at Riverside and Splott for which a grant was given in 1963.

The continued expansion of the Chiropody Service will depend upon sufficient financial provision being made to keep pace with the ever-growing demand for the service.

AMBULANCE SERVICE

The Ambulance Service operates from the Ambulance Depot at the Castle Grounds, Blackweir, with a fleet of 22 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.

Facilities are provided at the Castle Grounds for helicopters to land and transfer patients to hospital in specially approved circumstances.

Vehicles

The vehicle strength has been increased from nineteen to twenty-two vehicles.

Staff

The staff establishment at 31st December, 1964, is as follows:—

1 Ambulance Officer,	5 Ambulance Supervisors,
1 Senior Supervisor,	1 Joint Ambulance Liaison Officer,
35 Male Drivers,	5 Female Drivers.

Analysis of Journeys 1st January—31st December, 1964

(a) Patient—Carrying:—				<i>Journeys</i>	<i>Patient</i>	<i>Miles</i>
Emergency	..	..	..	9,511	10,118	78,239
Accident	..	..	..	2,216	2,464	11,805
Outpatient	..	..	..	24,034	75,318	216,625
Others	..	..	..	5,975	8,975	51,986
				<hr/> 41,736	<hr/> 96,875	<hr/> 358,655

(b)	Abortive and service journeys .. ..	..	1,579		8,201
(c)	Transporting of Midwives apparatus etc.	..	122		619
Totals			..	43,437	96,875
			..	(40,335)	(92,315)
(Totals for the year 1963)			..	(40,335)	(92,315)
			..		(343,634)
	Stretcher cases included in above .. ..	..		20,842	121,676
	Sitting cases included in above .. ..	..		76,033	236,979
				96,875	358,655

Average mileage per journey — 8.46

Average mileage per patient — 3.70

HEALTH CLINICS

New Clinics

The new Roath Health Clinic, to replace facilities previously provided at the School Clinic, 30 Richmond Road, was officially opened on 20th February, 1964.

The Clinic is situated at the junction of Albany Road and Roath Court Road and is built on a restricted triangular site which has made it necessary to plan the accommodation on two floors.

Leading from the Entrance Hall is a spacious waiting room and reception office. From an adjoining corridor access is gained to a large dressing room and two consulting rooms.

The first floor accommodates a Nurses' room, toilets and a further two consulting rooms. A dental suite is also situated on this floor and comprises a waiting room, with adjoining toilets, office, a well lit spacious dental surgery with the latest equipment, a recovery room and a dental laboratory.

A basement boiler house provides domestic hot water and central heating from a thermostatically controlled gas-fired boiler.

The Splott School Clinic at 139 Splott Road is also being replaced by a new Health Clinic in Splott Park which should be completed early in 1965.

HEALTH CENTRES

Butetown Health Centre

The proposal to erect a health centre at Butetown, which is an area of comprehensive re-development, has been approved both by the Health Committee and the Cardiff Executive Council for the National Health Service. Plans for the building have been prepared and a contract for the construction of the premises commenced in September, 1964.

Accommodation will be provided by arrangement with the Executive Council for four suites of consulting rooms for use by general medical practitioners having surgeries in the area. Clinic facilities will be available also together with accommodation for Health Visitors, Clinic Nurses, District Nurses and District Midwives. A complete dental unit is incorporated on the first floor as is also a Chiropody treatment room. The Chief Port Health Inspector and his staff will also be accommodated.

Riverside and Canton Health Centre

Agreement was also reached in 1964 to provide a health centre at Riverside and to associate the present Canton Clinic with this Health Centre to provide surgery accommodation for the whole of the Riverside and Canton areas. This proposal was proceeded with after a request had been received from the Cardiff Executive Council to provide these facilities for general medical practitioners in this area. A comprehensive scheme was planned to associate this Health Centre with the proposed Headquarters for the District Midwifery and District Nursing Services and the proposed Hostel for staffs of these services. Arrangements were put in hand to acquire a site for these purposes at Wellington Street at the junction with Lewis Street. Negotiations to this end were proceeding at the end of the year.

Trowbridge, Rumney Health Centre

A third proposal was agreed in principle for the erection of a small health centre at the new Trowbridge Estate at Rumney which is now being developed. Negotiations on this scheme were under consideration at the end of the year.

HEALTH EDUCATION

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

The Health Education Unit which was set up in 1963, has since been gradually extending its work.

A summary of its work in 1964 follows:—

(a) Anti-smoking

- (1) Anti-smoking lectures were given in 30 Primary Schools, 51 Secondary Schools, 3 Further Education Establishments, 7 Youth Clubs, and to 25 Adult Groups, and in 30 Offices or Works. Except for those in Youth Clubs, most of the sessions entailed two or more showings of appropriate films.
- (2) Six complete Five Day "Stop Smoking Clinics" were held, involving thirty evening sessions, and nine follow-up sessions.
- (3) A six-day exhibition, including the showing of prize-winning posters in a National Children's anti-smoking poster competition, was held, and approximately 2,000 people attended, and were particularly interested in the continuous film shows on the dangers of smoking.

(b) Mothercraft and Infant Welfare

Arrangements were continued for regular showings of suitable films at mothercraft sessions at all local Health authority clinics. It is envisaged that this programme will be continued in 1965 and that such films will again be shown for a week, during each 8 week period.

A tape recording of lessons in the art of relaxing and exercising, given by the Department's physiotherapist, was transferred onto L.P. records which have proved invaluable, whenever she has been unable to take relaxation classes.

(c) General Health Education

Lectures on health subjects were offered to any interested youth or adult groups, and many 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 once more increase over the next year, although in 1964, 30 such lectures were given.

Apart from the Anti-Smoking Exhibition mentioned above, the Unit held a three day general health exhibition in conjunction with the Cardiff and District Horticultural Show. This exhibition, which was tented, and which dealt with the dangers of smoking, with food hygiene and with safety in the home, was arranged so that continuous showings of health education films could be given in a theatre which was an integral part of the exhibition tent. Many thousands attended the exhibition, which proved to be a great success.

(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 responsible for 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 two "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 several films on the dangers of smoking. 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 "block" booking, thus enabling the anti-smoking campaign to be carried on without the need to authorise extra expenditure for their purchase.

From this report, you will see that the Health Education Unit has become established and it is hoped that it will continue to prove 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 had been 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.

As in 1963, the Department again arranged for the British Temperance Society to run the "Five Day Plan to Stop Smoking" in Cardiff, and gave assistance to the Society by providing premises, clerical assistance, and the services of a health education officer.

These clinics are now run at regular two-monthly intervals and six series were held in 1964. 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.

VII—VACCINATION AND IMMUNISATION

Vaccination against Smallpox

1964 would have been the first full year during which primary vaccinations against smallpox were carried out during the second year of life. However, due to the decision to allow Cardiff to take part in the large scale trial of measles vaccines, organised by the Medical Research Council, it was thought better to cancel routine smallpox vaccination sessions for the last three months of the year so that the results of the measles vaccine trials would not be biased by some of the children vaccinated against measles, and some of the control group, being given smallpox vaccinations.

Consequently, the figures quoted in the following table cover only nine months:—

						<i>By Public Health Dept.</i>	<i>By General Practitioner</i>	<i>Total</i>
PRIMARY VACCINATION								
Under 1 year	..	..	..	..	..	3	35	38
1 to 2 years ..	..	..	..	..	..	1,221	198	1,419
2 to 4 years ..	..	..	..	..	..	29	25	54
5 to 14 years	..	..	..	..	..	3	3	6
15 years and over	..	..	..	..	..	1	13	14
Totals ..						1,257	274	1,531
RE-VACCINATIONS								
Under 1 year	..	..	..	..	..	—	—	—
1 to 2 years ..	..	..	..	..	..	—	1	1
2 to 4 years ..	..	..	..	..	..	1	12	13
5 to 14 years	..	..	..	..	..	2	18	20
15 years and over	..	..	..	..	..	26	126	152
Totals ..						29	157	186

Diphtheria Immunisation

In spite of the growing importance of other forms of immunisation and vaccination, the protection of children against diphtheria still holds a position of prime importance in health education activities in the City. As a result, a total of 4,757 children under school age were given their full complement of protective inoculations against diphtheria during 1964.

Most parents now readily consent to their children being given protection against diphtheria, whooping cough, and tetanus, by means of a triple antigen. Through the work of the health visitor, and by the use of an efficient appointments system, all parents are given the opportunity of bringing their children to nearby clinics for all necessary injections. Where necessary, a mobile unit will visit children's homes so that the injections can be given. This visit provides a means of obtaining a higher degree of immunity within the child population, and, whilst it is not responsible for such a high proportion of immunisations as in years when clinic facilities were not so adequate, it provides a most useful addition to the Department's Immunisation Service.

During the year 4,784 children were given primary immunisations against diphtheria. Of this number, 583, or 12.2% of the total, were given by general practitioners.

In 1964 the experiment of offering supplies of disposable syringes and needles to general practitioners for use when immunising, was continued and there are now many more local family doctors using this service which has become an accepted service provided by the Department.

Details of immunisation are given in the following Tables:—

	Diphtheria, Whooping Cough and Tetanus combined	Diphtheria and Tetanus	Diphtheria and Whooping Cough	Diphtheria only
Special and Infant Welfare Clinics ..	3,240	106	5	4
Mobile Unit	792	54	—	—
General Practitioners	580	1	—	2
	4,612	161	5	6

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

	Diphtheria, Whooping Cough and Tetanus combined	Diphtheria and Tetanus combined	Diphtheria only
Number given booster doses:			
1 to 4 years	2,683	40	1
5 to 14 years	43	655	1,697
	2,726	695	1,698

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 also an increase in the number immunised by means of the Mobile Unit.

Primary Immunisation of Children under 5 years 1951—1964

Year	Infant Welfare 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
1964	3,336	70.1	842	17.7	579	12.2	4,757

Protection against Whooping Cough

During the year there were 218 notifications of whooping cough, and there was one death of a child not immunised because of parental refusal. The following table gives details of age and sex of persons notified:—

Notifications of Whooping Cough by age and sex, 1951-1964

	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 Total
	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
1964	20	20	9	13	21	9	8	12	8	17	26	23	7	5	1	1	100	100	200

The percentage 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, 1951-1964

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
1964	20.0	11.0	15.0	10.0	12.5	24.5	7.0

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	1964	1963	1962	1961	1960	1955 to 1959	1950 to 1954	Total
No. of children	1,732	2,506	243	47	17	9	5	4,559

Poliomyelitis Vaccination

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	Complete Course of 2 Injections	3rd injection	4th injection	
1964	1,678	—	1	1	—	1,680
1963	2,682	65	1	—	4	2,752
1962	624	1,616	—	—	—	2,240
1961	336	358	—	—	—	694
1943 to 1960	655	2,233	—	—	—	2,888
1933 to 1942	178	381	—	—	—	559
Others	72	9	—	—	—	81
TOTAL	6,225	4,662	2	1	4	10,894

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 979 persons attended for vaccination. In addition, 488 seamen were vaccinated during visits to 25 ships at Cardiff, Newport and Barry 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.

Typhoid Fever Protection

The Department was asked to provide protection against the disease for parties of school children travelling to the Continent for holidays organised by the Education Department.

Measles Vaccine Trials

Late in the year the Department was asked to co-operate in the Medical Research Council's large scale survey of measles vaccines. 723 courses of vaccine were given, but it will be some months before the follow up surveys, both of those children given the vaccine and those acting as controls, give an indication of the value of such vaccines.

VIII—MENTAL HEALTH SERVICE

L. CLUTTERBUCK, S.R.N., R.M.N., R.M.P.A., A.I.S.W.

Senior Mental Welfare Officer

A big step was taken in 1964 towards a comprehensive service for the care and support of the mentally disordered within the community. Nine out of every ten patients admitted to psychiatric hospitals are reported as being able to return to live in the community within one year.

This very hopeful trend is extremely dependent, however, on ex-psychiatric hospital patients being able to count on after-care and understanding when they have left hospital.

Rehabilitation of long-standing psychiatric hospital patients

34 Claude Road.—This house was allocated by the Estates Department in January 1964, for the accommodation of eight female patients from Whitchurch Hospital. This venture has proved a great success. Six patients during the year have been found alternative accommodation and in their place another six long-standing patients taken from Whitchurch Hospital.

The house is visited three or four times a week by the social workers, and every Sunday (as this is the only day when they are all together), each patient is interviewed individually, and, except in the case of one patient who was re-admitted to Whitchurch Hospital, all appear to be happy in their new environment.

Private Accommodation.—Many long-standing patients from Whitchurch Hospital were discharged home to relatives or to private accommodation. Relatives and landlords were informed that there was a 24-hour service provided by the Department's Mental Health Section in case of emergency. One particular home has five female patients from Ely Hospital, all in full employment, who need only the minimum of support. In another are five male subnormal patients who returned to Cardiff after seven years or more in Oakwood Park Hospital, Conway, North Wales. Four are in full employment and one attends the Adult Training Centre. Many landlords are looking after two or more ex-hospital patients.

Accommodation has also been obtained in a Salvation Army Hostel for a considerable number of male patients discharged from hospital. This has been of great value to the Department, providing as it does, accommodation within the community while arrangements for more permanent care and employment are being made.

Alcoholism.—Community care in relation to alcoholic patients continues to play an increasingly important part in the work of the Mental Health Section. 140 patients were dealt with. Many of these were admitted into the new alcoholic unit at Whitchurch Hospital and all are followed up in the community.

Group psycho-therapy sessions are held twice weekly at a Public Health Clinic and a mental welfare officer is in attendance at each session. These are 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.

Hospital Nurse Training

Student nurses from Whitchurch Hospital visit the department weekly for lectures and for visits to discharged patients in their own homes. It is found that this has been of benefit to them in their nursing studies.

Liaison with Psychiatric Hospital for subnormal patients

Dr. D. G. Wynn Jenkins, Medical Superintendent, Ely Hospital, has opened a Clinic at St. David's Hospital, every Tuesday, from 2.0 to 4.0 p.m. for interview and examination of patients in the community. One of the mental health staff attends these interviews.

Mental Welfare Interviews at Clinic

With the new community care service for the mentally ill, clinics have been opened on the following nights:—

Monday	..	..	7.30 to 9.0 p.m.	..	Roath Clinic
Tuesday	..	..	7.30 to 9.15 p.m.	..	Gabalfa Clinic
Wednesday	..	..	7.0 to 8.30 p.m.	..	Fairwater Clinic
Thursday	..	..	7.0 to 8.30 p.m.	..	Ely Clinic
Friday	..	..	7.0 to 8.30 p.m.	..	Llanrumney Clinic

British Red Cross Society

Social Activity Groups for the mentally ill are held on Tuesdays and Thursdays at the British Red Cross Society, 39 Newport Road, Cardiff, from 6.30 to 9.0 p.m. with a mental welfare officer in attendance.

These have proved of great therapeutic value. On the second Wednesday in each month the hall is also taken over for social activities for Whitchurch Hospital alcoholic patients and discharged patients.

Ministry of Labour Rehabilitation

The male Disablement Resettlement Officer visits the Mental Health Section on Tuesdays from 2.30 to 4.0 p.m.

The female Disablement Resettlement Officer visits on Thursdays from 2.30 to 4.0 p.m. to give individual attention to patients discharged from Whitchurch Hospital and also the mentally handicapped within the community.

During the year a large number of these patients who were thought to be un-employable were placed in full-time employment.

Administration

The list of approved medical practitioners was amended by the resignation of Dr. A. H. Griffith and the appointment of Dr. W. M. Sutcliffe.

During 1964 one male mental welfare officer was appointed to the permanent staff of the section. A female mental welfare officer was engaged in a temporary capacity for the latter half of the year as one of the male mental welfare officers was unable to continue his duties owing to illness. Mr. A. Goundry replaced Mr. T. Saunders, as administrative officer of the Section.

Mr. C. Williams successfully completed his two year course at the Bristol College of Commerce and was awarded the Certificate of the Council for Training in Social Work.

Community Care

At the end of the year 545 persons suffering from mental illness were being supported in the community, an increase over the previous year. There was a slight decrease in the number of subnormal persons receiving domiciliary care. This was partly due to a reorganisation within the Section and to the removal from care of a number of subnormal persons who had been successfully maintaining themselves in the community for a number of years and were requiring no further supervision. There were 5,956 domiciliary visits made

by Mental Health staff during 1964; 4,618 were in connection with mental illness and 1,338 with mentally subnormal persons. In addition to this 2,705 visits were made to the department by patients or relatives seeking advice on personal and social problems.

The close liaison with Whitchurch Psychiatric Hospital continued and this still plays an important part in the expansion of the community care services in the field of mental illness.

Provision of Hostels

The clinic premises at 139 Splott Road were vacated by the School Health staff and the building was then taken over by the Section for the provision of hostel accommodation for a group of 6 or 7 men suffering with either mental illness or subnormality. It is hoped that the renovations and decorations will be completed early in 1965. A male mental welfare officer will be given accommodation in the hostel and in return will give care and guidance and general supervision to the residents as part of his official duties.

TRAINING CENTRES

The Training Centres for children at Preswylfa and for both children and adults at Pengam were in full use throughout the year. Plans were approved, a contract was let and work commenced on the new Junior Training Centre at Penylan Court with which will be associated a Hostel for women and a short stay unit for 12 mentally subnormal children. It is hoped that work will be completed at the end of 1965 or early in 1966.

Both Preswylfa and Pengam Centres held Open Days again this year, when parents and members of the Health Committee were invited to attend and see the Centres at work.

A Harvest Festival service was held at St. Philip's Church, Tweedsmuir Road, for members of Pengam Centre, relatives and friends.

Two members of the staff of the Training Centres attended the part-time Assistant Supervisors' Course organised in conjunction with neighbouring local authorities.

The Preswylfa Training Centre was loaned during the summer holidays for use by the Cardiff Society for Mentally Handicapped Children in providing a day centre for 86 children and adolescents.

**Cases referred to Mental Welfare Officers during year ended
31st December, 1964**

	Under 16 yrs.		16 yrs. & over		Total		Grand Total
	M.	F.	M.	F.	Males	Females	
ADMITTED TO HOSPITAL UNDER ORDER*							
Mentally Ill	—	—	40	47	40	47	87
Subnormal	—	—	2	—	2	—	2
Severely Subnormal ..	—	—	—	—	—	—	—
Totals	—	—	42	47	42	47	89
ADMITTED TO HOSPITAL INFORMAL							
Mentally Ill	—	—	103	113	103	113	216
Subnormal	—	—	8	4	8	4	12
Severely Subnormal ..	5	3	4	3	9	6	15
Totals	5	3	115	120	120	123	243
TEMPORARY RESIDENTIAL CARE							
Subnormal	—	—	3	5	3	5	8
Severely Subnormal ..	15	10	2	4	17	14	31
Totals	15	10	5	9	20	19	39
COMMUNITY CARE							
Mentally Ill	1	—	398	298	399	298	697
Subnormal	3	—	9	20	12	20	32
Severely Subnormal ..	5	5	4	15	9	20	29
Totals	9	5	411	333	420	338	758
GRAND TOTAL ..	29	18	573	509	602	527	1,129

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

Patients referred to Local Health Authority during year ended 31st December, 1964

Referred by	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total				Grand Total
	Under 16 years		16 yrs & over		Under 16 years		16 yrs & over		Under 16 years		16 yrs & over		Under 16 years		16 yrs & over		Under 16 years		16 yrs & over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
General Practitioners
Hospitals, on discharge from in-patient treatment
Hospitals, after or during out-patient or day treatment
Local Education Authorities
Police and Courts
Other Sources
Total	1	—	388	294	—	—	10	4	3	—	9	20	5	5	4	15	9	5	411	333	758

**Number of Subnormal and Severely Subnormal Adults and Children
receiving training at Local Health Authority Training Centres on 31st
December, 1964**

	Under 16 years			Over 16 years			Total		
	M.	F.	Total	M.	F.	Total	M.	F.	Total
(A) PENGAM ROAD CENTRE ..									
(a) Nursery	4	4	8	—	—	—	4	4	8
(b) Advanced Nursery ..	6	11	17	—	—	—	6	11	17
(c) Occupation Centre ..	7	—	7	13	—	13	20	—	20
(d) Training Centre	—	1	1	26	25	51	26	26	52
TOTAL	17	16	33	39	25	64	56	41	97
(B) "PRESWYLFA", CLIVE ROAD CENTRE									
(a) Nursery (Group I) ..	4	2	6	—	—	—	4	2	6
(b) Nursery (Group II) ..	5	6	11	—	—	—	5	6	11
(c) Intermediate Group ..	6	3	9	—	—	—	6	3	9
(d) Junior Group	14	12	26	—	—	—	14	12	26
(e) Special Care Group ..	5	4	9	—	—	—	5	4	9
TOTAL	34	27	61	—	—	—	34	27	61
TOTAL (A) & (B)	51	43	94	39	25	64	90	68	158

In addition to the above-mentioned 158 classified subnormal persons, there are 10 male and 7 female children under five years of age who are receiving training at the Centres but are too young for classification.

SCHOOL HEALTH SERVICE 1964

I—MEDICAL INSPECTION

The average numbers of school children and the average attendances for the year ended December, 1964 were as follows:—

	Average Number on Registers	Average Attendance
Grammar Schools	6,292	5,901
Secondary Modern Schools ..	11,457	10,097
Primary and All Age Schools ..	25,777	23,590
Special Schools	456	403
TOTAL	43,982	39,991

The following table shows the number of school children 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 1964:—

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)
1960 and later	289	289	100	—	—	—	6	6
1959	36	36	100	—	—	4	5	8
1958	3,424	3,424	100	—	—	250	539	728
1957	366	366	100	—	—	23	73	89
1956	39	39	100	—	—	2	15	16
1955	10	10	100	—	—	1	4	5
1954	27	27	100	—	—	1	13	12
1953	18	18	100	—	—	2	5	6
1952	2,218	2,216	99.9	2	.1	116	317	396
1951	1,111	1,111	100	—	—	56	175	219
1950	2,019	2,018	99.9	1	.05	142	230	352
1949 and earlier	631	631	100	—	—	22	63	87
TOTAL	10,188	10,185	99.97	3	.03	619	1,445	1,924

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

					Boys	Girls	Total
Special Inspections	..	At School Clinic	..	..	1,550	1,531	3,081
Re-Inspections	..	At School	..	..	248	335	583
	..	At School Clinic	..	..	428	465	893
TOTAL					676	800	1,476

Defects found by periodic and special medical inspections during the year. The table shows the number of pupils requiring treatment (T) and the number of pupils requiring observation (O).

DISEASE OR DEFECT					PERIODIC INSPECTIONS				SPECIAL INSPECTIONS
					ENTRANTS	LEAVERS	OTHERS	TOTAL	
SKIN	..	..	..	..	T 59	62	105	226	2,044
					O 27	—	19	46	11
EYES (a) Vision	..	..	..	..	T 270	163	186	619	32
					O 120	1	92	213	12
(b) Squint	..	..	..	..	T 9	3	6	18	1
					O —	—	3	3	1
(c) Other	..	..	..	..	T 3	1	11	15	1
					O 6	—	8	14	—
EARS (a) Hearing	..	..	..	..	T 33	9	33	75	8
					O 24	—	14	38	2
(b) Otitis Media	..	..	..	..	T 10	1	11	22	7
					O 4	—	2	6	2
(c) Other	..	..	..	..	T 2	—	4	6	2
					O 4	—	3	7	3
NOSE AND THROAT	..	..	..	..	T 187	72	75	334	23
					O 124	3	53	180	24
SPEECH	..	..	..	..	T 56	3	18	77	5
					O 39	—	55	94	20
LYMPHATIC GLANDS	..	..	..	..	T 12	—	7	19	2
					O 52	—	19	71	12
HEART	..	..	..	..	T 13	10	23	46	13
					O 78	3	46	127	25
LUNGS	..	..	..	..	T 18	4	20	42	2
					O 61	3	21	85	27
DEVELOPMENTAL (a) Hernia	..	..	..	..	T 6	1	2	9	1
					O 24	1	8	33	3
(b) Other..	..	..	..	..	T 9	3	18	30	8
					O 55	1	37	93	35
ORTHOPAEDIC (a) Posture	..	..	..	..	T 18	21	14	53	5
					O 22	—	22	44	11
(b) Feet	..	..	..	..	T 72	13	56	141	41
					O 48	2	49	99	33
(c) Other	..	..	..	..	T 20	57	37	114	3
					O 38	1	46	85	11
NERVOUS SYSTEM (a) Epilepsy	..	..	..	..	T —	—	1	1	—
					O 5	—	1	6	5
(b) Other..	..	..	..	..	T 5	1	2	8	4
					O 3	—	1	4	1
PSYCHOLOGICAL (a) Development	..	..	..	..	T 9	1	5	15	9
					O 8	—	2	10	52
(b) Stability	..	..	..	..	T 14	—	13	27	1
					O 11	—	11	22	24
ABDOMEN	..	..	..	..	T 9	6	5	20	3
					O 9	1	9	19	5
OTHER	..	..	..	..	T 63	11	73	147	496
					O 35	1	51	87	21

II—"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	169
Defects of teeth	108
Defects of ear, nose and throat	90
Other defects and diseases ..	827
Scabies	24
Nursery School Pupils ..	248
TOTAL	1,466

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	94,648
Children found with vermin and/or nits	2,931
Children found to be free from vermin and nits on re-examination	1,173
Children for whom cleansing notices issued	2,784
Children for whom cleansing orders issued	215

Health Visitors paid 711 routine and 287 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 6,163 and the number found to have a vision defect requiring further investigation at the Clinic was 488.

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-three visits were paid to schools during the year to undertake such inspections.

III—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	2	
Scabies	79	
Impetigo	75	
Other Skin Diseases	2,061	
MINOR EYE DEFECTS	14	
MINOR EAR DEFECTS	208	
MISCELLANEOUS (<i>e.g.</i> , minor injuries, bruises sores, chilblains, etc.)	872	
TOTAL	3,311	5,637

(b) Defective Vision and Squint

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

Number of children examined	4,834
Errors of Refraction	1,680
*Spectacles prescribed	1,480
Other defects or diseases treated	99
Referred to Orthoptic Clinic	166
Attendances at Clinics	7,263

* There was no change in the prescription in 101 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 857 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.

(c) Defects of Ear, Nose and Throat

	EAR	NOSE AND THROAT	
		Tonsils and Adenoids	Other Defects
Received Operative Treatment	24	683	91
Received Treatment in Hospital	107	—	—
Received other forms of treatment	47	55	55
Total number of children examined	535	1,856	1,856
Attendances at Clinics	668	2,389	2,389

Waiting list for Operative Treatment at 31st December, 1964

Tonsils and Adenoids	..	..	..	..	..	367
Other ear, nose and throat conditions	..	..	..	..	..	1
						<hr/>
TOTAL	..					368
						<hr/>

Hearing aids were provided for 5 children during 1964 and 42 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 1,350 pupils were examined and treated at the Clinic during the year.

(e) Heart Disease and Rheumatism

The number of rheumatism cases have dropped considerably during the last decade, and the figure does not now warrant the continuation of a Special Clinic for the supervision of these few cases.

Arrangements have therefore been made for these children to be kept under supervision by Professor A. G. Watkins at the Outpatient's Department, Llandough Hospital, Penarth, Glam.

(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 68 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	59
Impetigo of head, face and hands ..	9
Cleansing Baths only	23
Scabies Baths	221
TOTAL ..	312

Attendances for Scabies:—

Schoolchildren	186
Children under school age	63
Adults	266
TOTAL ..	515

IV—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 Maternity and Child Welfare Services, and the strength in terms of full-time officers at the end of the current year, together with the corresponding figures for 1963.

As will be seen from the Table, numerous changes in personnel occurred during the year, but the position at its close shows little improvement as regards overall manpower from that at the end of the previous year.

	As at 31st Dec., 1964	As at 31st Dec., 1963
Full-time permanent officers	4	3
Full-time temporary officers	—	2
Half-time temporary officers	3	1
Part-time temporary officers	6	5
Actual strength in terms of full-time officers	7·9	7·5

One officer appointed in November, 1963 on a sessional basis—but unable to take up his post then because of illness—began his new duties in the department in February but, unfortunately, relinquished these in the following July.

In the second quarter of the year, two members of long standing, viz. Mr. D. W. Elliot and Mr. D. J. Andrews, resigned from their positions as full-time temporary officers but elected to continue on a half-time temporary basis, in which capacity we were fortunate to retain their valuable services; also during this period another sessional officer was employed.

Towards the middle of the year we were very fortunate in engaging a recently qualified dentist on a full-time permanent basis. At the beginning of November a part-time officer resigned, but this loss was offset later in the month when another young dental surgeon began his sessional duties in the department.

Inspection and Treatment

The number of children periodically examined was 1,899 above that for 1963, whilst in the case of 'specials,' falls predominated for the third year in succession, the latest being 518.

There was little change from that of last year, as regards the figure for children requiring treatment, which was around 74 per cent. of those inspected; the acceptance rate for treatment, however, rose by almost 5 per cent.

For purposes of comparison, figures representing work performed shown in the various categories below are computed on the basis of items per cent. of children treated.

Teeth filled. These for 1964 and 1963 were respectively 185·6 and 171·7.

Teeth Extracted. In this section falls were margined—121 as against 120·9 last year.

Teeth Filled/Teeth Extracted. A slight improvement is shown here. In the current year for every 100 teeth extracted there were 153 teeth filled, the figure for the previous year being 141. In last year's report a fall in the number of children supplied with dentures was recorded and it is gratifying to note that this has continued into the current year when the number fell by 15·8 per cent, but this improvement is largely accounted for by the relatively large increase (from 9 to 30) in the number of crowns constructed.

Scheme of Documentation for the Local Authority Dental Service

With effect from the 1st January, 1965, a new scheme of documentation in conformity with the requirements of the Department of Education and Science will replace the former system of recording school dental inspections and treatment, and form 28M, on which the annual return of the Local Authority Dental Service is made, has been revised with the object of integrating the main statistics of this service with those provided by the Dental Estimates Board so that an overall national picture of the treatment given to the children may become available.

Recruitment

Inadequacy of remuneration in relation to that obtainable under the General Dental Service remains without doubt the prime reason why dentists are not attracted to the School Dental Service as a career. Another important factor in the past was the lack of opportunity for promotion within the Service itself, there having been no intermediate grading between that of School Dental Officer and Chief Dental Officer.

In more recent years opportunities have occurred in County Authorities where gradings such as Divisional or Area Dental Officers have been introduced.

Under the Whitley Council agreement of June 1964, "An Area Dental Officer is now defined as an officer to whom is delegated the administration of the dental services in a geographical division of the local authority."

Of special interest, however, was the Council's agreement to recommend the creation of a Senior Dental Officer grade. An officer eligible for appointment or promotion into this grade would be one who, although not responsible for the administration of an area or division, has nevertheless "responsibilities which in the view of the Authority are substantially greater than those normally held by a Dental Officer." Authorities are asked to bear in mind in making their assessment "all relevant factors, for example, the clinical supervision of other dental officers, the supervision of one or more dental auxiliaries etc."

It is, therefore, gratifying to record the promotion of an existing member of the dental staff, namely, Mr. J. Lewis, to fill such a newly created post. Mr. Lewis who has had supervision of a dental auxiliary since September, 1962, will, in addition, have wider responsibilities and duties in connection with dental health education and will also act as Deputy Principal School Dental Officer as and when the need arises.

Dental Health

With dental disease amongst school children showing little sign of improvement, and the question of fluoridation of Cardiff's water supply temporarily at least in abeyance, more time and attention, it would seem, should be given to educative methods as a possible means of improving dental health standards. The recent appointment of Mr. Goodwin to be responsible for the organisation of public relations and health education is to be welcomed. He, together with his assistant, Mr. Pembery, have already rendered valuable service in the promotion of dental health education and it is to be hoped that close collaboration with Mr. J. Lewis, his dental auxiliary and others such as health visitors and dental clerk/assistants, when available, will help to expand the school dental service in this field.

In September notification was received from the General Dental Council of their willingness to allow the department to have on loan their trailer which is fitted up as a dental health exhibition stand. I am pleased to report that advantage was taken of their kind offer and it has been booked for the period covering 2nd to 9th April, 1965.

A successful dental health week was held during the year at Ely Clinic, where appropriate films dealing with the various aspects of dental health were shown to the large audiences of children who attended.

Lectures and demonstrations were given by the dental auxiliary who also showed the value of apples—a supply of which was previously obtained—as a tooth cleaning agent.

Fifty-seven sessions were devoted to dental health education during the year by the dental auxiliary whose work is shown statistically elsewhere in this report.

Dental Survey

The Department of Education and Science has invited selected local authorities representing different parts of England and Wales to take part in a survey of the dental condition of a 10 per cent. sample of girls and boys whose fifteenth birthday falls within the current academic year in order that the Health Department should know to what extent the dental needs of children are being met. Cardiff is one of the authorities invited and has offered to help in the investigation which will take place during the Spring term 1965.

Statistics. The full statistical table of the school dental work carried out during 1964 is as follows:—

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

(a) Periodic Age-Groups	..	..	..	..	..	15,678
(b) Specials	..	..	..	..	..	3,878
					TOTAL	19,556

(2) Requiring Treatment 14,647

(3) Offered Treatment 10,148

(4) Actually Treated 7,730

(5) Attendances made by children for treatment 22,328

(6) Half-days devoted to:—

Inspection	..	..	..	..	..	69
Treatment	..	..	..	..	..	2,536
					TOTAL	2,605

A further 44 sessions for treatment were carried out by the Consultant Orthodontist.

(7) Fillings:

Permanent Teeth	..	..	..	..	..	14,348
Temporary Teeth	..	..	..	..	..	2,168
					TOTAL	16,516

(8) Teeth Filled:

Permanent Teeth	..	..	..	..	..	12,357
Temporary Teeth	..	..	..	..	..	1,992
					TOTAL	14,349

(9) Extractions:

Permanent Teeth	..	..	..	..	..	..	2,267
Temporary Teeth	..	..	..	..	..	..	6,220
For Regulation purposes (permanent)	..	..	..	..	..	..	433
For Regulation purposes (temporary)	..	..	..	..	..	..	437
TOTAL							9,357

(10) Administration of general anaesthetics for extractions 4,472

(11) Other operations—Permanent Teeth:—

(a)	Scalings	..	..	..	..	462
(b)	Cleansings	..	..	..	..	1,077
(c)	Dressings	..	..	..	..	1,577
(d)	Root Fillings	..	..	..	..	59
(e)	X-rays	..	..	..	..	135
(f)	Crowns	..	..	..	..	30
(g)	Gum Treatments	..	..	..	..	299
						<hr/>
TOTAL					..	3,639

Temporary Teeth 531

(12) Number of pupils supplied with artificial dentures 69

(13) Orthodontics:—

				<i>By Consultant Orthodontist</i>	<i>By Dental Officers</i>
(a)	Cases commenced during year	..	..	21	61
(b)	Cases carried forward from previous year			33	69
(c)	Cases completed during year	..	..	15	33
(d)	Cases discontinued during the year	..		—	29
(e)	Pupils treated with appliances	..	..	54	130
(f)	Removal appliances fitted	..	..	32	79
(g)	Fixed appliances fitted	..	..	—	2
(h)	Total attendances	..	..	446	858
(i)	Referred back to Dental Officer with advice			25	—
(j)	Referred for X-ray	..	..	19	—
(k)	Under observation only	..	..	—	—
(l)	Partly treated and referred back to Dental Officer	..	..	—	—
(m)	Awaiting Inspection	..	..	30	—

The School Dental work carried out during 1964 by the Dental Auxiliary, under the direction of a Dental Officer, is as follows:—

(1) Number of children actually treated 373

(2) Number of attendances made by pupils for treatment 1,419

(3) Half days devoted to:—

(i)	Treatment	..	..	..	..	318
(ii)	Dental Health Education	..	..	..	..	57

TOTAL .. 375

(4) Fillings:

(i)	Permanent Teeth	..	..	..	..	..	958
(ii)	Temporary Teeth	..	..	..	..	..	219
							<hr/>
					TOTAL	..	1,177

(5) Number of teeth filled:

(i)	Permanent teeth	..	..	..	..	..	756
(ii)	Temporary teeth	..	..	..	..	..	206
							<hr/>
						TOTAL ..	962

(6) Extractions:

(i)	Permanent teeth	..	..	..	..	..	—
(ii)	Temporary teeth	..	..	..	..	..	22
							<hr/>
					TOTAL	..	22

(7) Other operations—(i) Permanent Teeth

(a) Scaling	..	..	..	..	240
(b) Cleaning	..	..	..	..	295
(c) Dressing	..	..	..	..	53
(d) Root filling	..	..	..	..	—
(e) X-ray ..	..	..	..	..	376
(f) Crowns	..	..	..	..	—
(g) Gum treatment	..	..	..	..	1
					<hr/>
			TOTAL	..	965

(ii) Temporary Teeth

(a) Silver Nitrate	..	..	..	33
(b) Cleaning	..	..	..	175
(c) Dressing	..	..	..	52
				<hr/>
		TOTAL	..	260

2,307 appointments were made and 835 appointments were not kept.

V—HANDICAPPED PUPILS

The numbers of handicapped pupils known to the Department at 31st December, 1964 are shown in the following table.

BLIND CHILDREN

At Residential Special Schools	..	5	
At Independent Schools	..	—	
TOTAL	..	—	5

PARTIALLY SIGHTED CHILDREN

At Special Classes for the Partially Sighted	7	
TOTAL	—	7

DEAF CHILDREN

At Residential Schools	..	9	
At Independent Schools	..	3	
At Special Day School	..	7	
TOTAL	..	—	19

PARTIALLY HEARING CHILDREN

At Special Class	..	5	
At Maintained Schools (day)	..	42	
TOTAL	..	—	47

CHILDREN SUFFERING FROM EPILEPSY

At Residential Schools	..	1	
*At No School	..	1	
TOTAL	..	—	2

*Receive Home Tuition

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	..	76	
*At no school	..	2	
At Hospital Special School	..	1	
TOTAL	..	—	79

*Receive Home Tuition

PHYSICALLY HANDICAPPED CHILDREN

At Residential Special Schools	..	8	
At Special Day Schools	..	27	
At Independent Residential School	..	1	
*At no school	..	2	
TOTAL	..	—	38

*Receive Home Tuition

EDUCATIONALLY SUB-NORMAL CHILDREN

At Special Day Schools	394	
At Residential School	1	
At Field House Diagnostic Unit ..	30	
At Maintained Schools awaiting admission to Special Schools	19	
TOTAL	—	444

MALADJUSTED CHILDREN

At Non-Maintained Schools—in Residential Hostels	2	
At Residential Hostels	20	
Awaiting admission to Hostels or Special Schools	1	
TOTAL	—	23

During the year 181 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)	64
Educationally sub-normal and suitable for education at Field House Observation Unit	16
Educationally sub-normal—to have special educational treatment in an ordinary school	25*
Educationally sub-normal—For admission to Residential Special School	3
Children found not to be educationally sub-normal	4
Decision deferred for further special medical examination ..	9
Children recommended for admission to ordinary school when they attain the age of 5 years	2
Educationally sub-normal and require supervision and guidance after leaving school	2
Pupils of Field House Diagnostic Unit:	
(a) Transferred to Special Day School for Educationally sub-normal children	4
(b) Transferred to Partially hearing Class	1
(c) Transferred to Partially sighted Class	2
Pupils of Llanishen Court Special School for Educationally Sub-normal pupils recommended to return to ordinary School	2
Pupils of Gabalfa Special School for Educationally sub-normal children granted permission to leave before attaining the age of 16 years	6
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	10
Deaf—for admission to a day or residential Special School ..	3
Partially Hearing—for admission to a special class	1
Blind—For admission to Residential School	1

Partially sighted—for admission to Special Class	2
Physically Handicapped—for admission to a Special Day School	5
Physically Handicapped—for admission to a Special Residential School	2
Maladjusted—for admission to a Residential Hostel or Special School	8
Recommended for Home Teaching	4

Ten children were notified to the Local Authority during 1964 in accordance with Section 57 of the Education Act, 1944.

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

Greenhill Open-air School. In addition to the above examinations, 21 children were found to be delicate pupils and recommended for admission to the Greenhill Open-air School. Twenty-one children were admitted to the school, and 10 were discharged.

Cerebral Palsy Unit

The Physiotherapist administered a total of 2,386 treatments during the year, of which 1,909 were treatments at the Cerebral Palsy Unit.

Spastic children are treated daily at the Unit. Open-Air School pupils receive treatment from Mrs. M. J. Vickery, the School Nurse, who, after instruction, now supervises exercises 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	Plasters
January ..	183	46	4
February ..	148	33	2
March ..	164	34	2
April ..	182	39	4
May ..	149	32	2
June ..	202	47	—
July ..	164	34	—
August ..	37	2	—
September ..	192	60	2
October ..	173	51	2
November ..	190	53	3
December ..	135	23	2
	1,909	454	23

Total treatments administered 2,386

Speech Therapy

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

At the commencement of 1964, the Speech Therapy Department had three full-time therapists, Miss M. Morris, Miss E. Harrison and Miss M. Hadfield, and Mrs. L. Clark, employed on a sessional basis.

The sessions worked were 33, comprising 29 in clinics or normal schools, one in a special school, and three in visiting or administration. At the end of April we welcomed back to the staff Mrs. E. Davies, who devotes her whole time to work in special schools, comprising three at Field House, five at Llanishen Court, and two at the Spastic Unit.

In September, Miss M. Hadfield went on to a sessional basis, Mrs. L. Clark tendered her resignation and a new Speech Therapist was appointed. Miss E. Harrison also went on to a sessional basis in December.

At the end of the year, 39 sessions were being worked, 27 in clinics or normal schools, 10 in special schools, and two in visiting or administration. The establishment is five full-time therapists, but this appears impossible to achieve.

The statistics relating to the work for the year, show the number of children treated was 416. New cases admitted during the year were 236 and those discharged 189. In addition, 264 children were being kept under observation, and 82 were awaiting appointments at the end of the year. The Speech Therapists made 87 visits to schools and to the homes of children during the year.

MUSCULAR DYSTROPHY

Muscular Dystrophy

During 1964 the School Health Service Department co-operated with Dr. J. Jacobs, Consultant Paediatrician, Cardiff Hospital Management Committee and Welsh National School of Medicine, and Glamorgan County Council Health Department, in a trial of the preparation Laevadosin in the treatment of schoolchildren suffering from muscular dystrophy. Similar trials were carried out in Glasgow, Edinburgh, Manchester and Newcastle.

In so far as the Cardiff cases were concerned, little beneficial effect was shown, although some slight improvement was observed in four out of twenty-six patients.

CHILD GUIDANCE CLINIC

1. Reports of the Work of the Child Guidance Clinic

The clinic functions on three half-days each week and a brief statement of the work carried out there follows:—

Number of Cases

The number of cases dealt with at the clinic in the period 1.1.64—31.12.64 is shown:—

Table 1

	Boys	Girls	Total
No. of new cases referred during 1964	97	71	168
No. of old cases carried forward	57	33	90
No. of cases on waiting list at 31-12-64	12	5	17

As in previous years more boys than girls have been referred to the Child Guidance Clinic: approximately 58% boys and 42% girls.

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

Table 2

Parents or guardians	..	..	26
Probation Officers	..	..	2
Social Agencies	..	..	5
Schools	..	..	49
School Health Service	..	..	59
General practitioners	..	..	36
Other sources	..	..	8
TOTAL			185

About 28% of the referrals are from Head Teachers and about 32% from the School Health Service.

Reasons for referral

Classification of reasons for referral is not always straightforward as most frequently several factors operate at the same time with varying intensity.

However, the following table gives as accurate an analysis of the various reasons for referral as is practicable:—

Table 3

Nervous Disorders

Fears..	..	..	..	9
Seclusiveness	..	..	..	7
Depression	..	..	..	5
Excitability	..	..	..	1
Obsessions	..	..	..	1
				23

Habit Disorders and Physical Symptoms

Speech disorders	..	..	..	8
Sleep	..	..	..	11
Movement	..	..	..	5
Feeding	..	..	..	5
Excretory	..	..	..	18
Nervous pains	..	..	..	6
Fits	..	..	..	2
				55

Behaviour Disorders

Unmanageable	..	..	..	54
Temper	..	..	..	17
Aggressiveness	..	..	..	15
Jealous	..	..	..	5
Demanding attention	..	..	..	1
Stealing	..	..	..	35
Lying and romancing	..	..	..	10
Truancy	..	..	..	31
Sex Difficulties	..	..	..	10
				178

Education and vocational difficulties

Backwardness	17
Inability to concentrate	2
Special difficulties	1
	—
	20
	— TOTAL 276

The referrals in order of prevalence were: Behaviour disorders (64.5%); Habit disorders (20%); Nervous disorders (8.3%); and Education difficulties (7.2%).

As in previous reports the commonest difficulties in the children referred were: unmanageable (54); stealing (35); truancy (31); excretory (18); temper (17); backwardness (17); aggressiveness (15); sleep (11); lying (10); sex (10); fears (9).

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

Table 4

Years ..	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Total
Boys	1	2	1	6	9	16	9	8	13	11	7	12	8	2	1	1	107
Girls	1	2	1	3	7	12	4	4	5	5	6	8	3	13	4	—	78
TOTAL ..	2	4	2	9	16	28	13	12	18	16	13	20	11	15	5	1	185

Of these 185 children, 17 were pre-school; about 57 were Infants; about 59 were Juniors; and about 52 were post-primary pupils.

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

Table 5

Adjusted	37
Partially adjusted	22
Advisory	42
Transferred	6
Failed to co-operate	45
Left Cardiff	1
Withdrawn	28
Recommended for admission to Homes	4
Admitted to Homes	3
	—
	188
	—

Of these, 42 cases were closed as advisory after advice had been given to parents, General Practitioners or Headteachers, generally where further supportive interviews were not considered necessary.

Fifty-nine 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 withdrawn where no notice was taken by parents of even the initial appointments offered; and as many as 45 additional cases were closed where failure to co-operate on the part of the 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	Totals
Psychologist ..	131	153	236	33	103	—	656
Psychiatrist ..	124	235	283	50	—	—	692
TOTALS ..	255	388	519	83	103	—	1,348

Conferences

There have been 44 staff conferences in the period covered by the report and 748 cases discussed.

Miscellaneous

There have been 29 visitors to the Clinic during the year.

Some comments on additional analysis of case histories are made in the following sections:—

Sex

Of the 142 children in the survey, 80 were boys and 62 were girls: i.e. about 57% were boys and 43% were girls. 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
120-4	—	—	—
115-9	1	2	3
110-4	1	—	1
105-9	6	6	12
100-4	7	5	12
95-9	8	5	13
90-4	7	6	13
85-9	14	11	25
80-4	8	8	16
75-9	8	6	14
70-4	7	8	15
65-9	8	2	10
60-4	2	—	2
55-9	3	—	3
50-4	—	—	—
45-9	—	1	1
Total	80	62	142
Average I.Q. ..	85.4	88.3	86.9

There is a good distribution of intelligence throughout the group of boys and girls, with a definite 'tail' below 70. The average of the whole group is below the normal and the average for boys is slightly below the average for girls.

Maladjustment may occur at all levels of ability, but 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.

Place in Family

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

Table 8

		Totals
Only child	6 boys; 7 girls	13
Two children	(1) 23 (2) 18	41
Three children	(1) 11 (2) 11 (3) 9	31
Four children	(1) 8 (2) 6 (3) 8 (4) 6	28
Five children	(1) 2 (2) 3 (3) 2 (4) 5 (5) 2	14
Six children	(1) — (2) — (3) 2 (4) 1 (5) — (6) —	3
Seven children	(1) 2 (2) 2 (3) 1 (4) — (5) — (6) — (7) 1 (8) —	6
Eight children	(1) — (2) 1 (3) — (4) 1 (5) — (6) — (7) 1 (8) — (9) —	3
Nine children	(1) — (2) — (3) — (4) — (5) — (6) 2 (7) — (8) — (9) —	2
Ten children	(1) — (2) — (3) — (4) — (5) — (6) — (7) 1 (8) — (9) — (10) —	1
		—
		142
		—

Comparatively 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	..	..	..	..	78
School	..	..	..	..	19
Home and School			..	..	45
					—
					142
					—

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

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: living with relatives, lack of facilities and amenities sometimes create complications particularly where maladjustment is likely to occur anyway.

Broken Homes

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

Table 10

Mother dead	..	..	..	1
Father dead	..	..	..	4
Mother dead, Father remarried	..			4
Father dead, Mother remarried	..			2
Both parents dead	..	..		1
Divorced	..	..	..	5
Divorced, Mother remarried	..			1
Separated	..	..	..	7
Mother deserted	..	..	..	2
Mother deserted, Father remarried				1
Adopted	..	..	..	2
Illegitimate	..	..	..	1
Father in prison	..	..	..	1
				—
				32
				—

22½ per cent (i.e. just over one fifth) of these 142 cases represent broken homes: a very 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. Sometimes this leads to lack of discipline; sometimes to over-indulgence; sometimes to interdependence of mother and child, producing anxieties and worries prematurely in the child, poor sleeping habits, emotional tensions, regression.

Parental Disharmony

This existed in 19 cases, i.e. to such a degree as to constitute a serious contributory factor in maladjustment. This is in addition to the broken homes listed in Table 10.

Both parents work

This is noted in 29 cases: i.e. in one-fifth 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

A note was made of cases wherein fairly serious disturbance existed in parents. There were 18 such cases: i.e. in one-eighth of the total. It is not surprising (in terms of environmental experience as much as hereditary tendencies) that the children concerned should have become maladjusted and have been referred for investigation and guidance.

Remarks

Some additional 'remarks' on individual cases include: Parents have been in prison (1); F. has been in prison (1); siblings in Approved School, Borstal and prison (1); illegitimate (3); F. has collapsed lung (1); F. has disseminated sclerosis (1); M. has T.B. (2); F. has T.B. (1); M. has epileptic fits (1); M. is prostitute (2); adopted (3); lost sight of one eye (1).

Comments

A few comments may be made about these 142 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 very considerable (more than one-fifth).
- (8) Parental disharmony (in at least 19 cases) is another significant factor.
- (9) Yet another is that in one-fifth 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 18 cases one or other or both parents are themselves more or less seriously unstable and maladjusted.
- (12) These important factors emerge from my survey of this group; boys and small families predominate; broken homes; parental disharmony; both parents working; fairly serious instability in parents.

Comments on the Autistic Child—(by the Consultant Psychiatrist)

The cases seen in the past year have, as usual, shown great diversity. The backgrounds and histories of the patients seen are never exactly alike and the problems that develop also show variations. Broadly speaking, however, nearly all the children who are referred to the Child Guidance Clinic show behaviour or symptoms that are the result of emotional difficulties. Problems of environment, upbringing, health, education and so on, affect the growing child from its earliest days and, as a result, he sooner or later produces reactions to these. These reactions may be of an aggressive type, a nervous type or an inability to make progress at the expected rate, etc. However, they all have in common the fact that the child can improve greatly if his circumstances improve. By working with the parents and child it is possible to modify the reactions shown so that the child grows into a happier, more well balanced individual. Some cases are not so disturbed as others and these, naturally, react better and more quickly to the sort of help and guidance the clinic is able to give. However, in the great majority of cases one feels that the child's difficulties are reactive to difficulties in his background and that it is possible to modify them.

Another very small group of cases exists in which it is not by any means always possible to link the development of symptoms with incidents in the history or background of the child. This group consists of children who develop a psychosis. Psychosis is relatively common in adult life and perhaps the commonest is schizophrenia, a severely disabling condition which often develops in young adult life, with no obvious cause. Though a vast amount of research has been done into this subject, it is still not possible to say what the real cause is. Occasionally, we see a child in the clinic, perhaps in the early teens, who shows symptoms of schizophrenia at a much earlier age than usual. This is generally a very serious condition and the outlook, as things are at present, is very poor. In recent years much more

attention has been devoted to the problem of very young children who develop symptoms which are somewhat similar to those of an adult psychosis. These children are called autistic children because they appear to withdraw from contact with the outside world and turn more and more into themselves. In the past, it is thought, many of these children were mistaken for mentally defective children. This is because, at a certain stage, they have an appearance that might well suggest severe retardation. However, when a complete history is taken and a more detailed examination of the child is carried out, it becomes obvious that this has not always been so. The history indicates that, at first, the child appeared to develop normally. He might have begun to walk, talk, etc. at the normal age and have given little cause of anxiety. At some stage fairly early on, however, the child's development has slowed down and, eventually, showed regression. Similarly an open, affectionate child may gradually withdraw, so that he becomes cut off in his own world and can no longer respond adequately to demonstrations of parental love. The autistic child often says very little and what he does say may constitute a few repetitive words or phrases. He cannot respond to conversation with an outsider and may act in some ways as though he were deaf, but it is obvious that he is not. He may show many repetitive actions which have little meaning to the observer. He cannot usually play with toys in the normal manner, and instead, may be absorbed in his own ritualistic behaviour. He cannot make friends with other children and join in group play. Though he may show more response to his parents than anyone else, he does not really form any strong emotional response with anyone. The autistic child differs from the mentally retarded child in that, in the latter, it is possible to form a reasonably accurate estimate of his ability and to make some sort of prediction about his future development, but in the case of the autistic child this is not possible. As can be seen, these children constitute a very distressing problem to their parents and all those concerned with their welfare.

Three cases of autism have been seen in the Child Guidance Clinic in the past year. All were attending the Field House Diagnostic Unit.

The problem of the autistic child is one upon which much more attention has been focussed in recent years than formerly. A great deal of work on possible causes has already been done but, so far, no real explanation has been arrived at. There are various possibilities which have to be considered. For instance, inherited factors may be involved. Also it is possible that it is due to brain damage occurring either in the foetus or after birth. Again it might be that it is due to some degenerative condition of the nervous system or to some metabolic disorder. Parents and others concerned with these children often feel that the deterioration in the child's condition is due to some upset or accident that has occurred. It is possible that such things may have a bearing on the condition or it may be that these are just incidents which can occur in a normal child's life without similar consequences. It may also be possible that these incidents act as trigger factors accelerating and uncovering a process which was already beginning to take place. However, this is obviously a field in which much work has yet to be done.

The treatment of these children is difficult. Though, in the past, they have often been dealt with in special schools or Occupation Centres, such placements are not ideal. In some parts of the country, centres exist for the study and treatment of autistic children but no such special facilities exist in South Wales. In fact there is no centre in South Wales which caters for these children or for slightly older children suffering from schizophrenia and other severe psychiatric disorders. It is almost impossible to find placements for them in other parts of the country as places are scarce and readily filled by children from nearby areas. It is planned that a Unit for Psychotic children will be built in connection with Whitchurch Hospital some time in the future but no definite date has yet been fixed for this. It is to be hoped that it will not be long before permission is given for its construction as the need for such a centre in this area is a very important and urgent one.

FIELD HOUSE DIAGNOSTIC UNIT

By

Dr. GILLIAN M. BRYANT, M.B., B.Ch., D.C.H., D.Obs., R.C.O.G.

Assistant Medical Officer and School Medical Officer

Prior to the passing of the Mental Health Act, 1959, a Royal Commission on Mental Illness and Mental Deficiency, of which the Chairman was Lord Percy, had considered two points of view relating to subnormality in children put forward by the secretary of the Association of Education Committees, Dr. W. P. Alexander. One was that Occupation and Training Centres should become the responsibility of the Education Service; the other that the practice of transferring children for whom the Education Service could do no more, to the Health Authorities, was the right and proper procedure. As a result of subsequent discussions it was considered that there might possibly be some advantage in having two distinct types of centres, one under the Education Authority and the other under the Health Authority. The published Report of the Royal Commission, while expressing the opinion that severely subnormal children should remain under the supervision of the Local Health Authority, indicated that local Education Authorities should have considerable freedom in deciding the range of training provided within the school system, and should be allowed to cater for some children in the lower ranges of ability.

A problem facing many medical officers dealing with the assessment of the subnormal child is the diagnosis of the low 'borderline' case and the resulting decision as to his disposal viz: to a training centre for subnormals under the Mental Health Act or to a special school for educationally subnormal children under the Education Acts. The possibility that local Education Authorities might do more to help solve this problem within the framework of the existing legislation was taken up by Dr. Alexander on the instruction of his Executive and following this, discussions took place between him and the Ministry of Education. The final outcome of these discussions resulted in an approach being made to the Director of Education suggesting that the views of the Education Committee might be sought on the setting up of an experimental research "education centre" in Cardiff. The choice of this city was made because of its convenient size, the good special school provision for E.S.N. children which it already had, its good training centres and the good psychological services, closely linked with the psychiatric and paediatric staffs of the Welsh National School of Medicine and Welsh Hospital Board. The Education Committee welcomed the opportunity given to Cardiff to inaugurate this new concept of educational provision for handicapped children and instructed the Director of Education and the Principal School Medical Officer to make further enquiries and investigations on the matter. Subsequent discussions between these two officers and the Ministry's representatives resulted in a joint report to the Education Committee, as a result of which, a decision to proceed with the project was taken.

Field House Diagnostic Unit was officially opened by Dr. Elfed Thomas, Director of Education for Leicester, on 9th March, 1961, although the staff had been appointed in January of that year and some of the children had been admitted from 1st February.

The single storey prefabricated building of the 'DERWENT' type, is situated in its own grounds in fairly close proximity to Llanishen Court Special School for educationally subnormal children and to Walker House, a small residential hostel for maladjusted educationally subnormal pupils.

Since its inception the unit has been in the charge of Mrs. A. M. Robertson, B.Sc., (H. and S.S.) B.Sc. (Psych.), from whom very comprehensive and detailed periodical reports on the assessment, behaviour, educational, psychological progress and final diagnosis and recommendations as to the disposal of individual children are made to the Director of Education and Principal School Medical Officer.

Described as the first experimental unit of its kind in the country and approved by the Minister as a day special school, the work carried out there has created great interest and many visits to it are made annually by representatives of other local education and health authorities.

Although some modifications to its original purposes and aims have been made in the light of subsequent experiences, the basic concept of the unit have remained. These were:—

A diagnostic unit for the intensive and comprehensive study of lower borderline E.S.N. children. They will generally have been ascertained as E.S.N. and although some will be admitted directly from their own homes they will normally have spent a trial period in special schools, training centres or ordinary schools.

Ages will range between 5—8 years, but younger children of 3—4 years will be admitted. Others may be considered if it is felt that they will benefit from attendance.

A full assessment and re-appraisal will be made of entrants from medical and school records and a complete re-evaluation and diagnosis will be carried out on the broadest lines with all the resources of the local authority, the specialist services of the Regional Hospital Board and the Welsh National School of Medicine.

The work at Field House will link up with previous and current investigations and researches on subnormal children in this country and abroad.

Although its primary function will be the assessment and the diagnosis of the needs of mentally handicapped children, it will also be concerned with their development as growing personalities. Speech, language and thinking will be emphasised rather than the "3 Rs" and formal education, although not excluded, will not be of primary concern. The unit will be concerned in a much wider context with methods of treatment and the modification of behaviour generally.

Although essentially a project for detailed diagnosis and classification during a short term stay, the duration of stay will be dependent on diagnosis and on medical, social or psychological progress.

The Medical Officer of Health and Principal School Medical Officer in addition to allocating a member of his medical staff to visit the school regularly will provide the following information:—

- (i) Family History, with special reference to any familial diseases associated with mental retardation (Familial Oligophrenia; Epilepsy; Familial Nervous Diseases; Bone Diseases; Metabolic Disorders; Skin Diseases).
- (ii) Ante-natal History, with special reference to possible causative factors resulting in mental retardation (Threatened Miscarriages; Irradiation of Mother; Vitamin Deficiencies; Virus Infection of Mother; V.D., Rh. Factor; Toxaemia).
- (iii) Birth Record, with special reference to possible causative factors (Precipitate; Premature; Caesarean Section; Haemorrhages; Twins; Asphyxia; Use of Oxygen).
- (iv) Post-natal History, with special reference to possible causative factors (Establishment of feeding; Type of feeding; Sleeping Habits; Excretory Rhythms; Neo-natal Infections; Convulsions; Infectious Diseases including encephalitis and meningitis; Spasticity; Skin Diseases; Asthma and Infantile Eczema; Allergies; Orthopaedic Defects; Accidents (including skull fractures, asphyxia, burns, poisoning); Hospitalisation).

By examination of the children concerned, there will be provided:—

- (a) A general description of build and posture, with reference to any skeletal abnormalities; shape of head; stigmata of degeneration, etc.
- (b) Normal information on height; weight; sight; hearing; teeth; E.N.T., muscular co-ordination; vaccinations (and any possible reactions); temperature; blood pressure; pulse rate; urine, etc.

- (c) Special information on vital capacity; endocrine function; vitamin deficiencies; reaction times; muscle tone and strength, electro-encephalograms; dental conditions; diabetes; orthopaedic defects; intestinal disorders; ophthalmological and audiometric observations.

The Public Health Department will link the Unit with the Specialist Services of the Regional Hospital Board and Board of Governors for Neurological, Endocrinological; Haematological; Audiometric, Ophthalmic, Dietetic advice and reports and for paediatric service with the Department of Child Health of the Welsh National School of Medicine.

The Public Health Department will also provide the services of a Speech Therapist who will, in the first instance, provide detailed reports on each child and possibly later provide therapy where needed. The services of a Physiotherapist will also be useful in selected cases.

The Psychologist-in-charge will prepare comprehensive psychological profiles for each child inclusive of intelligence; personality; aptitude; attitude and interest; emotional and social maturity; perseveration; lateral dominance; visual and auditory perceptual difficulties; levels of aspiration; vocabulary and speech; mental rigidity; sociometry. In addition, full information will be obtained by observation of habits; behaviour patterns; personal and social characteristics; language and speech development; progress and development in response to stimulation. Follow-up sessions with individual children will aim at improving language, number concept, personal and social behaviour.

Case conferences will be held periodically at Field House wherein the various disciplines (staff, P.S.W., A.S.M.O., psychologist) will make their several contributions to assessment and diagnosis in each case.

In future "Annual Reports" it is intended to include a short description of the work carried out in the unit both from the educational and the medical points of view.

The following analysis deals in retrospect mainly with some of the aspects of the work at the unit involving medical consideration and relates to the 66 children admitted to the centre from its opening until September, 1964:—

Total number admitted up to August, 1964	..	66
Total number discharged up to August, 1964	..	43

As one of the children admitted is now deceased and one has left the area only 64 are left for consideration.

Table 1

SOURCE OF REFERRAL	No.	DISPOSAL TO							Total
		Prim. School	E.S.N. School	Training Centre	P.H. School	Home	Deaf Unit	Still in Unit	
Primary School	14	1	7	1	—	—	1	4	14
E.S.N. School ..	12	—	1	8	—	—	—	3	12
Training Centre	12	—	3	1	4	—	—	4	12
Physically Handicapped School	4	—	—	1	—	—	—	3	4
Home	16	—	5	4	1	—	—	6	16
Deaf Nursery ..	2	—	—	1	—	—	—	1	2
Nursery ..	4	—	1	—	—	—	1	2	4
TOTAL ..	64	1	17	16	5	—	2	23	64

30 were admissions from children already at school and 34 from pre-school examinations.

1. Cases with Retardation and Definite Physical Abnormalities on Admission

25 were admitted and in each the physical defects were known before admission. Although chromatography and chromosome counts etc., were done on some of the children, so far no **new major** lesion has been found.

- (a) *Mongolism*
4—two were transferred to a special school for E.S.N. children and one to a Training Centre. One remains in the Unit.
- (b) *Phenylketonuria*
1 from a Training Centre and now returned to it.
- (c) *Hypothyroidism*
2—one returned to a Training Centre, one still in.
- (d) *Cerebral Palsy*
10—four still in unit. 3 transferred to special class for P.H. pupils at open air school. (quadriplegia). 2 transferred to Training Centre, both with a hemiplegia. 1 transferred to E.S.N. school with a hemiplegia.
- (e) Cerebral damage secondary to encephalitis (Toxoplasmosis).
- (f) 1 Child with marked physical retardation and distinctive facial appearance suggestive of the recently described 'Amsterdam Dwarf.'

2. Hearing Defects

A surprising fact was that twelve of the cases admitted were subsequently found to be deaf in the unit. Hearing assessment was often a prolonged and repetitive procedure, although a surprising number co-operated in the tests when the audiometer was available in the familiar school surroundings with an operator known to the children.

- (a) *High Frequency Loss*—5
2 transferred to E.S.N. school, one with a hearing aid. 1 transferred to a blind school. 1 transferred to a training centre. 1 still in unit.
- (b) *Intermittent catarrhal type*
3 severe transferred to E.S.N. school. 2 with recurrent otorrhoea—one in E.S.N. school, one still in unit.
- (c) *Mixture of both*
2 transferred to partially hearing class.

3. Visual Defects

This was a particularly difficult group to assess as some of the children were severely disturbed in addition to their subnormality.

- (a) 1 transferred to blind school (Vision deteriorated).
- (b) *5 Partially Sighted*
1 transferred to partially sighted class Cataract. 2 transferred to training centre — Cataracts. 2 still in unit.
- (c) *15 Squints*
(As this was estimated in retrospect, the actual number may be higher).
- (d) 1 complicated visual field defect not yet fully elucidated.

4. Speech Defects

On admission this defect was only counted if severe enough to be classed as entirely absent, or defective enough to seriously interfere with communication. Many milder speech defects were noted amongst the pupils.

- (a) *Speech Absent on Admission*
8 Speech absent in 5. 2 now in the training centre. 3 still in unit (probably autistic)
Improved—3—2 transferred to special E.S.N. school. 1 still in unit.

(b) *Speech so Defective as to Seriously Interfere with Communication*

There were 17 in this category and 12 remain so.

Still in unit 4

Transferred to Training Centre .. . 4

Transferred to Special Schools .. . 4

1 to P.H. unit for 'spastic'. 3 to E.S.N. special schools.

Five have improved out of this group.

3 still in unit. 1 in training centre. 1 in E.S.N. special school.

Aetiology of the Speech Defects

- | | | | | | | |
|-----|---|--|----|----|---|--|
| (1) | Definite cerebral palsy | .. | .. | .. | 4 | |
| (2) | High frequency deafness | .. | .. | .. | 2 | |
| (3) | Probably autistic | .. | .. | .. | 3 | |
| (4) | Aphasia (a) Probably motor with other signs of cerebral damage | .. | .. | .. | 2 | |
| | (b) Probably associated with difficulty in auditory perception. | .. | .. | .. | 3 | |
| (5) | Severe Emotional Disturbances— | 2. | | | | |
| (6) | Cause Unknown— | There were 9 in this group and 7 of these were regarded as severely subnormal. | | | | |

The incidence of really severe speech defects was 3·8%, a figure of considerable importance when considering that owing to the severe shortage of speech therapists only for the last 6 months has speech therapy been available, and that 9 were transferred to places where regular speech therapy was not always available i.e. special schools for E.S.N. children, Training Centres, etc. When available, the presence of a speech therapist experienced with subnormal children has proved of great value as part of the diagnostic team, apart from the valuable therapy provided by her.

5. Autistic or Psychotic Group

A number of the children when first admitted showed psychotic features, e.g. mannerisms and reticence; absent speech or perseveration; withdrawal from contact with others both adult and child; unawareness of own personality, etc.

With the majority, however, contact was finally established and adequate reasons for the emotional disturbances were found with a gradual alteration in behaviour. This left a small group of 3 or possibly 4 who seemed to be genuinely autistic or psychotic. They have now been seen by a Consultant Psychiatrist at the Child Guidance Clinic and this diagnosis confirmed.

6. "At Risk" Group

A number of children gave a medical history of conditions warranting their inclusion in this group.

- | | | | | | | | |
|-----|--|----|----|----|----|----|---------------------|
| (a) | Prematurity | .. | .. | .. | .. | 13 | |
| | Other perinatal difficulties | .. | .. | .. | .. | 16 | |
| | Subsequent difficulties | .. | .. | .. | .. | 3 | |
| | | | | | | — | |
| | TOTAL | .. | .. | .. | .. | 32 | approximately 46·8% |
| | | | | | | — | |
| (b) | Family history of educational subnormality | | | | | | |
| | Siblings | .. | .. | .. | .. | 11 | |
| | Other | .. | .. | .. | .. | 10 | |
| | | | | | | — | |
| | TOTAL | .. | .. | .. | .. | 21 | approximately 32% |
| | | | | | | — | |

8 children fell into both groups, giving a total "At Risk" group of 45 or 68%.

These figures were obtained retrospectively and the actual number could in fact be higher.

(c) *Signs of Cerebral Damage Other than Subnormality*

Related to "At Risk" categories.

Table 2

	"At Risk" perinatal	"At Risk" Family	Not known to be "At Risk"
High frequency deafness	5	2*	—
Squint	10	3	2
Definite cerebral palsy	6	2	2
Minor but definite C.N.S. signs	4	1*	—
Hyperkinetic destructive behaviour	5	1*	—
Perceptive difficulties—vision	6	1*	—
—auditory	5	2*	—
Severe speech defect	15	6	4
Convulsions	11	1*	—

(* Also in Column One)

This seems to confirm the importance of "brain damage" in this group of children, and the necessity for a close follow-up of the "At Risk" groups.

(d) *Other Miscellaneous Factors*

- (1) There was a *history of psychosis* in one or other parent in 7 children i.e. 16%.
- (2) 23 had not been seen by a paediatrician before admission. Of these, 6 were eventually classified as severely subnormal i.e. almost 25%. There is obviously a need for a full medical investigation for diagnostic purposes, although up to now no new lesion apart from the "brain damage" group has been found.

7. Children Admitted from Training Centres

Without the diagnostic services of the unit it is considered that a number of children admitted from Training Centres might otherwise have remained there.

This is difficult to tabulate retrospectively, but the children who seem most likely to need revision of a former diagnosis of ineducability were those with severe emotional disturbances or speech defects. They were not ready to learn until their difficulties had been overcome, e.g.

- (a) a partially sighted disturbed child who eventually was placed in the partially sighted class, when his disturbed behaviour improved.
- (b) a very disturbed anxious deprived child of a schizophrenic mother with an I.Q. eventually estimated in the 70's whose behaviour at first would not have been tolerated in the special school for E.S.N. children to which, he subsequently went.

- (c) a disturbed child whose speech was almost absent on admission but who improved enough to go on to special school for E.S.N. children.
- (d) The group who are discussed later under the "border-line unit" would also, most probably, all have remained in the Training Centre.

8. Field House "Leavers"

A number of children who had left Field House at least one year previously were followed up to assess progress or otherwise.

(a) *In the care of the Health Authority*

2 of this group are still refusing to attend the Training Centre to which they were referred on discharge.

There was no doubt about the correct placing of this group with one exception. A "non-communicating" child who came via the deaf nursery. He is certainly unsuitable for school education but the cause of the failure in communication is still in doubt.

(b) *The Physically Handicapped School*

All seem to be doing reasonably well except one girl who made no progress initially, but is said to be better since her admission to a Residential School.

(c) *Special E.S.N. Schools*

Some children were still having difficulties in their special schools. A girl, I.Q. 73, from a problem family and with a severe speech defect. She has had three different teachers in one year. No speech therapy is available for her there and parents are non-attenders at clinic.

A boy, rather old when admitted to Field House, with severe difficulty in visual perception and with marked school phobia. When transferred to a special school he broke down again and recommenced school refusal. Possibly with earlier admission and special help in the proposed "border-line" unit better results could have been obtained.

9. Proposed "Border-Line" Unit

It has become obvious that a small group of children in the diagnostic unit are difficult to fit satisfactorily into the existing avenues at present open to them on discharge from Field House. The Education Department's proposition to open a small "border-line" unit attached to the junior E.S.N. school for such children is therefore welcomed by the School Health Service. This will help to solve the problem of disposal of the following types of handicapped pupils:—

- (1) The psychotic group.
- (2) Children with other special difficulties, e.g.—

(a) *Speech*

This group has a much higher "performance" level of intelligence than that estimated by verbal tests and they are beginning to read and write; they seem to deserve some place within the educational system; whether this will eventually make them suitable for employment remains to be seen.

There are 3 children in this group.—A forceps delivery with neonatal difficulties; he has minor neurological signs in addition to a severe degree of dysphasia which is mainly motor.

A premature infant with neonatal jaundice and convulsions; his severe dysphasia appears to be mainly due to difficulties in auditory perception—he is now beginning to achieve sentences.

The youngest and probably most intelligent, with a Nebraska Intelligence Quotient of 77. Severely asphyxiated at birth with feeding difficulties and motor dysphasia.

In spite of the severe communication defect none of these three has developed the severe emotional disturbances that some of the other children have and they are useful and dependable members of the community.

(b) *Severe difficulty in visual perception*

The tests of visual perception designed by Marianne Frosting are proving useful in sorting out some of these children. At present one only is awaiting the new "border-line" unit, i.e.

A premature babe; one of twins from a family with a number of E.S.N. members, none of whom seems to have his specific difficulties.

(c) *A group of children who although making slow progress*

in Field House are not quite ready for junior special school class placement but whose progress is such that transfer to a Training Centre would be undesirable. The present waiting list for admission to Field House may be adversely affected by retaining these children there for a longer period than is necessary for purely diagnostic purposes.

Summary

The major medical lesions in these children have usually been known for some time, but many have unsuspected minor defects, sensory and neurological, which affect their progress, and the medical side of the diagnostic procedure at Field House is mainly aimed at discovering these. One has however to be aware of the possibility of new advances in medical research discovering new means of diagnosing and treating long standing known defects. Each child is a separate problem with many factors contributing to his or her failure, e.g., family influences, emotional difficulties, brain damage from various causes, motor and sensory impairment. It is only by the close study of each child in every direction that the best chance of optimum development can be obtained.

The extent to which these children eventually become useful members of the community remains to be seen and the long-term follow-up of children from Field House should be a most interesting and, it is hoped, a rewarding research project by the members of the staff.

WALKER HOUSE

By Dr. W. M. SUTCLIFFE, M.B., Ch.B., D.P.H., D.I.H.

Walker House (thus named as a tribute to the memory of the late Alderman Dr. Walker, Chairman of Special Services Committee), was opened in January, 1963, as part of the arrangements for the care of maladjusted and educationally subnormal children provided by the Cardiff Education Department.

The home—a purpose built two-storey building—provides residential accommodation for some dozen children (who attend the local schools appropriate to their ability), and yet enables them to maintain contact with their families at weekends. A married couple care for the children whilst in residence.

The impetus for providing this accommodation arose out of the difficulty, frequently experienced, of arranging suitable accommodation for the kind of child mentioned above. Not infrequently such children also create difficulties when they are taken into care and live in accommodation provided by the Children's Department. Again many of these children come from so called "problem families" and it was hoped that the provision of a warm, homely stable environment might help in their development and adjustment. Whilst the Walker House Staff's role is therapeutic, yet the aim of such an establishment is preventive in that it is hoped that with adequate care and help, the children themselves will not in their turn establish problem families of their own when they grow up.

As time has gone by, the original concept of the home has been modified to meet the needs of individual children. Some have been admitted with average intelligence but who yet come from such extremely bad homes, that they merit admission on these grounds alone. The availability of such accommodation as is provided at Walker House has proved of great value to those school medical officers dealing with these children.

The Table below shows briefly the number of children admitted to Walker House up to December, 1964.

TABLE 1

Year			Girls	Boys	
1963	..	..	7	5	12
1964	..	..	2	4	6

Table 2 shows the age distribution of these 18 children

TABLE 2

YEAR		AGE IN YEARS									
		5	6	7	8	9	10	11	12	13	14
1963											
Boys	..	1	1	—	—	1	—	—	1	1	—
Girls	..	—	—	—	1	—	3	1	2	—	—
1964											
Boys..	..	1	1	—	—	—	1	—	1	—	—
Girls	..	—	—	—	—	—	—	1	—	—	1

Eight children have so far been discharged. All except one have returned to their homes. It is too early to assess the outcome of their stay at Walker House.

VI—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	Tredegaville C/W School

Accommodation is provided at the Nursery Schools for a total of 409 full-time and 100 part-time children aged 2—5 years. At the Nursery Classes 60 children aged 2—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.

VII—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	..	..	..	..	..	61
Diphtheria	..	..	..	..	..	—
Measles	..	..	..	..	..	618
Acute Pneumonia	..	..	..	..	..	16
Meningococcal Infection	..	..	..	..	..	—
Paralytic Poliomyelitis	..	..	..	..	..	—
Non-Paralytic Poliomyelitis	..	..	..	..	..	—
Acute Encephalitis—Post Infectious	..	..	..	..	..	—
Dysentery	..	..	..	..	..	1
Para-Typhoid Fever	..	..	..	..	..	—
Enteric or Typhoid Fever	..	..	..	..	..	—
Erysipelas	..	..	..	..	..	2
Food Poisoning	..	..	..	..	..	12
Tuberculosis—Respiratory	..	..	..	..	..	6
Other Forms	..	..	..	..	..	1

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

Rubella	..	..	..	..	243
Mumps	..	..	..	..	566
Jaundice	..	..	..	..	7

PROVISION OF MEALS

Central Kitchens are in operation at Ely and Tremorfa and provide approximately 4,800 meals per day for consumption at 67 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, Llanrumney Secondary, The Court, Howardian Grammar, Glan-yr-Afon, College of Commerce, Pentrebane, 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, St. Illtyds', Tredegarville, Caerau Infants.

Canteens. Facilities are available at 140 School Canteens for providing mid-day meals for approximately 17,031 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 1964 were as follows:—

	<i>First complete week, 1964</i>	<i>Last complete week, 1964</i>
Average number of necessitous children provided with dinner daily free	2,403	2,438
Average number of children provided with milk daily free	36,212	36,553
Average number of children provided with dinner daily on payment	13,901	15,320

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 161 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, 180 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 1964, 349 such reports were made.

DESCRIPTION OF REGULAR CLINICS

	Minor Ailments	Cleansing	Ophthal-mic	E.N.T.	School Dental Service	Speech Therapy	Enuresis
(a) School Clinics also used for General Health Purposes:—							
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
Roath Clinic, Roath Court Road ..	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, 1964

VIII—STUDENT HEALTH SERVICE

IN THE

COLLEGES OF FURTHER EDUCATION

REPORT BY DR. G. CROMPTON, M.B., B.Ch., D.(OBST.)R.C.O.G., D.P.H.

In July 1964, I took over the duties of Medical Officer to the Colleges from Dr. Robin M. Williams, Assistant Medical Officer of Health, Cardiff, who left to become Deputy Medical Officer of Health at Merthyr Tydfil.

Mrs. M. P. Davies, the Health Visitor and myself spend two days (4 sessions) a week at the surgeries in the Colleges and between us we carry out all the Medical and Secretarial work.

We continue to give what is mainly an advisory service for full-time students with physical and psychological problems, but part-time day students and members of the College Staffs are also helped if they have cause for consultation.

The amount of secretarial work involved at present is on the increase and a good case can now be made for the employment of a full-time secretary in the service.

We have reasonably sized surgeries at the Welsh College of Advanced Technology (W.C.A.T.), and at the Llandaff Technical College. Our accommodation in the other Colleges is unsuitable as we have to make use of staff rooms, a typing pool and a studio, all of which may or may not be occupied by other people, when we need to use them for examination or interviewing of students. Achieving any privacy in these Colleges is a matter of chance and the environments consequently reduce the value of the service provided.

The College of Food Technology and Commerce will in the near future be moving to a new building where there will be special provision for the Student Health Service.

That there is need for such a service, is reflected by the numbers of students who avail themselves of the facilities provided. The number of consultations (excluding those for immunising procedures) increased in 1964 from 617 to 934. The figures for the individual Colleges are shown in Table I below:—

Table I

COLLEGE	Total Number of Visits by M.O. and H.V. to the College	Total Number of Visits by Students Excluding Visits for Heaf Testing and Immunization	Number of Students presenting with New Problems (Code N-I)	Number of Students making use of the Student Health Service for first time (Code I-I)
Welsh College of Advanced Technology	53	267	194	153
Llandaff Technical College	56	286	232	172
College of Art	17	122	103	94
College of Food Technology	8	65	55	53
College of Commerce	20	124	109	104
College of Music and Drama	9	70	53	51
TOTAL ..	163	934	746	627

With the envisaged expansion of each of the colleges the number of consultations can be expected to rise again in future years and to cope with this the staffing situation of the service will need to be revised.

The numbers of Students enrolled this year are shown in Table II. There are 423 more full-time students this year than in 1963 and the number of part-time day students attending the colleges has reached 5,381.

Category	1963			1964			1965		
	Full-time	Part-time	Total	Full-time	Part-time	Total	Full-time	Part-time	Total
Engineering	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Science	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Business	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Arts	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Medicine	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Law	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Education	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Physical Education	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Music	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Drama	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Language	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Mathematics	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
History	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Geography	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Psychology	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Social Studies	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Health Sciences	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Environmental Studies	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Interdisciplinary Studies	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Other	1,200	1,200	2,400	1,200	1,200	2,400	1,200	1,200	2,400
Total	12,000	12,000	24,000	12,000	12,000	24,000	12,000	12,000	24,000

Table II

College	Full-Time Students	Full-Time First Year Students	Part-Time Day Students	Questionnaires Returned	Questionnaires Returned By First Year Students	Questionnaires Returned by "Others"	% First Year Students completing Questionnaire	First Year Students on Waiting List	"Others" on Waiting List	% First Year Students Returning Questionnaire on Waiting List	% Others Returning Questionnaire on Waiting List	Estimate of "First Years" not on Waiting List—No Questionnaire Completed
W.C.A.T.	110	457	699	790	320	470	70	291	241	91	51	125
Llandaff Tech.	387	179	3,462	192	132	60	74	125	38	94	63	44
Art ..	245	132	273	164	112	52	84	109	19	97	36	19
		Including A.T.D.C. Supplement										
Music and Drama	117	67	Irrelevant	92	54	38	80	54	16	100	42	13
Food ..	142	64	183	113	58	55	90	56	27	98	49	5
Commerce ..	334	138	764	116	93	23	66	82	7	88	30	40
TOTAL ..	2,325	965	5,381	1,467	769	698	80	717	348	93	50	246

Routine examinations of all 'freshmen' is, with the present staff impossible even if it were proved to be of value to do so. A selective examination is carried out. In order to select an "At Risk" group for interview and examination, all full-time students, both new entrants and old were asked to fill in a questionnaire. The questionnaires used at the beginning of the Michaelmas term this year were considerably different from those used last year, being less confusing for the Students and easier for the examiners to scrutinize and assess. In spite of this, difficulty still arises in arranging for all students to receive a questionnaire and even when these are distributed a considerable number fail to return the completed questionnaire. Further attempts to improve distribution and collection methods must be tried in future.

As shown in Table II, at the Welsh College of Advanced Technology, only 790 questionnaires were returned by the 1,100 full-time Students (70% response).

It is estimated that 125 freshmen at the Welsh College of Advanced Technology and a total of 246 at all the Colleges have need to be medically examined for one reason or another, but they will not be seen as they have failed to return the questionnaires.

Taking all the Students in all the Colleges together, there was an 80% response to the questionnaires amongst the first year Students and less than 50% amongst the others. The returns from Students of the College of Commerce were disappointing (66% amongst first years).

93% of first year Students who returned their questionnaires, were placed on a waiting list for interview, medical examination, skin-testing, poliomyelitis immunization or Chest X-Rays.

All new Students are required to submit proof of their freedom from Tuberculosis. This is secured either by Heaf testing or by Chest X-Rays. A negative Chest X-Ray within a year of entrance to College is accepted as adequate proof except in case of overseas Students.

The number of Skin tests and Chest X-rays carried out are shown in Table III and Table IV.

Table III

COLLEGE	Skin Tested (Heaf)	Read	Negative	+1	+2	+3	+4	Given B.C.G.
Welsh College of Advanced Technology	219	204	38	95	49	9	13	50
Llandaff Technical College	112	103	13	63	22	3	0	25
College of Art	64	61	18	30	9	2	2	22
College of Music and Drama	20	19	3	8	8	0	0	7
College of Food Technology	72	59	13	34	8	2	2	20
College of Commerce	73	57	2	44	8	0	3	4
TOTAL	560	503	87	274	104	16	20	128

Table IV

COLLEGE	Number sent for Routine Chest X-ray	Results Known	Number sent for Chest X-ray after Heaf Test	Results Known	Number Attending Chest Clinic after X-rays
Welsh College of Advanced Technology	42	39	19	19	0
Llandaff Technical College	9	9	2	2	3
College of Art	14	14	6	6	0
College of Music and Drama	18	18	0	0	0
College of Food Technology	14	12	2	2	0
College of Commerce	21	20	3	3	2
TOTAL	118	112	32	32	5

The number of Skin tests (Heaf) performed was lower than in 1963. The main reasons for this were that there is an increasing preference by the Students for Chest X-Rays (Table IV) and also the different criteria used by medical officers in deciding who were and who were not for Skin tests. The numbers given B.C.G. increased from 37 to 128.

The usefulness and importance of the routine use of Skin tests (Heaf) and for Chest X-Rays can be seen by the fact that 5 Students were found to need Chest Clinic Supervision for pulmonary tuberculosis lesions.

The number needing polio immunization was again lower, as many more Students had been adequately immunized before entry to college.

Table V

COLLEGE	1st Dose	2nd Dose	3rd Dose	Total
Welsh College of Advanced Technology	86	84	48	218
Llandaff Technical College	46	40	33	119
College of Art	13	10	25	48
College of Music and Drama	6	9	8	23
College of Food Technology and Commerce	33	37	15	85
TOTAL	184	180	129	493

Table VI

	QUESTIONNAIRE										CONSULTATION							Condition as % of all conditions	ADVISED AND TREATED							REFERRED							% of cases seen, referred	% of all referred	Investigated
	W.C.A.T.	Landaff	Art	Music & Drama	Food	Commerce	"Q" Total	W.C.A.T.	Landaff	Art	M. & D.	Food	Commerce	"C" Total	TOTAL	W.C.A.T.	Landaff		Art	M. & D.	Food	Commerce	A. & T. Total	W.C.A.T.	Landaff	Art	M. & D.	Food	Commerce	"R" Total					
Cardio Vascular Diseases, including Rheumatic Fever and Anaemia ...	5	5	5	1	3	5	24	3	5		1			9	33	3.5	2	6	8	4		1	21	1	3		1			5					
Chest including Tuberculosis ...	49	26	18	28	23	33	177	21	12	13	4	4	15	69	246	26.5	20	8	5	12	1	14	60	2	6	6	5	1		21					
Muscles and Bones ...	1	4	6	3	3	1	18	18	26				1	45	63	6.7	17	24	1	4			46	6	6	1				15					
Psychological and Emotional ...	6	9	1	2	6	9	33	15	11		2		1	29	62	6.7	20	11		4	2	3	40	5	4		1			11					
Defective Vision ...	11	19	12	11	11	18	82	16	31	13			3	63	145	15.5	6	9	5	6			26	9	27	8	5	7		62					
Abdominal Disorders	7	6	5	2	4	12	36	7	4	2				13	49	5.3	14	5	5		2	2	28	2						3					
Ear, Nose and Throat	13	15	10	11	6	11	66	10	17	1	1			29	95	10.2	7	16	6	12		2	43	14	6	1	2	2		25					
Skin Disorders ...	5	7	7		1	6	26	18	19	4		1		42	68	7.3	11	10	6		1	29	4	10	3		1			20					
Gynaecological Disorders ...		1											1	6	8	0.86	1	3			1	5	2	2	2	1				6					
Miscellaneous ...	13	11	1	4	1	6	36	47	56	23				2	129	165	17.6	37	20			1	58	3	3	1	1			9					
TOTALS	110	103	65	62	59	101	500	157	183	57	8	6	23	434	934	100	135	112	36	42	6	25	356	48	67	21	14	12	15	177	19	100	164		

It will be noticed that 15.5% of all consultations were for defective vision. A total of 62 persons (43%) were referred for further eye tests and the majority were prescribed spectacles.

A total of 177 were referred to Specialists for their opinion and to General Practitioners for further treatment (equivalent to 19% of patients seen at consultation).

Psychological and emotional problems required the greatest amount of individual attention, the Students concerned visiting us freely, some 4 or 5 times.

The number of Students presenting with new problems totalled 746 and 627 Students made use of the Service for the first time (Table I).

Tables VII and VIII show a further analysis of the visits made by the Students.

Table VII

COLLEGE	Consultations with ONE Illness (Code 1.n)	Consultations with TWO Illnesses (Code 2.n)	Consultations for THREE Illnesses (Code 3.n)	Consultations with FOUR Illnesses (Code 4.n)	Consultations with FIVE or more Illnesses (Code 5+.n)	Total
Welsh College of Advanced Technology	215	37	10	3	2	267
Llandaff Technical College	213	47	10	8	8	286
College of Art	113	7	2	0	0	122
College of Music and Drama	66	4	0	0	0	70
College of Food Technology	62	2	0	1	0	65
College of Commerce	119	5	0	0	0	124
TOTAL ..	788	102	22	12	10	934

Table VIII

COLLEGE	No. of ONE consultation per illness (Code N.1)	No. of TWO consultations per illness (Code N.2)	No. of THREE consultations per illness (Code N.3)	No. of FOUR consultations per illness (Code N.4)	No. of FIVE consultations per illness (Code N.5)	Total
Welsh College of Advanced Technology	201	46	15	5	0	267
Llandaff Technical College	232	43	7	3	1	286
College of Art	103	18	0	1	0	122
College of Music and Drama	53	14	2	0	1	70
College of Food Technology	55	9	1	0	0	65
College of Commerce	109	14	1	0	0	124
TOTAL ..	753	144	26	9	2	934

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

The Annual Course of lectures on First Aid to Chiropody Students at Llandaff was given as well as two lectures to Trainee teachers at the College of Art and also to the Residential Child Care Course at Llanover Hall.

Technicians at the Bacteriology Laboratory at Llandaff Technical College were Schick tested and given T.A.B. injections.

Ease of availability of Specialist opinion is one of the strengths of the Service and thanks are due to the local hospitals' medical and administrative staffs for the way they have always helped the Students, with the minimum of delay.

Table IX shows how the Service provided compares with the other four Student health Services in Wales at the present time.

Table IX.—Comparison of Student Health Services provided in Wales

COLLEGE	Treatment under N.H.S.	Treatment outside N.H.S.	No. of full-time M.O.s.	No. of part-time M.O.s.	No. of Psychiatrists part-time	No. of part-time Dentists	No. of full-time Nurses	No. of part-time Nurses	No. of full-time Secretaries	No. of full-time Students	No. of part-time Day Students	Routine Medical Exam. on Freshmen	Routine Medical Exam. on All	Routine Mass Chest X-rays—Freshmen	Routine Mass Chest X-rays on All	Routine Heart Tests on Freshmen	Offering B.C.G.	Offering Polio. Immunisation	Offering Tetanus Prophylaxis	Offering Other Vaccines	Year of Origin
College of Further Education Cardiff	Yes	Yes		One two days per week				One three days per week		2325	5381	In-complete		Choice of skin test or chest x-ray		Yes	Yes	Yes	Yes	Yes	1959
U.C.W. Aberystwyth		Nil		One 6 hr. per week	One 6 hr. per week	One 2 days per week		One	One	1890				Yes							1949
U.C.S.W.M. Cardiff		Yes	Two				One		One	2482	156	Yes					Yes	Yes	Yes	Yes	1947/48
U.C.N.W. Bangor	Yes			Three days per week			One			1702	60	Yes	Yes	Yes	Yes						1963
U.C.S.W. Swansea	Yes	Yes	One				One			2069		In-complete		Yes	Overseas students only			Yes	Yes		1955 (pt. t.) 1962 (f. t.)

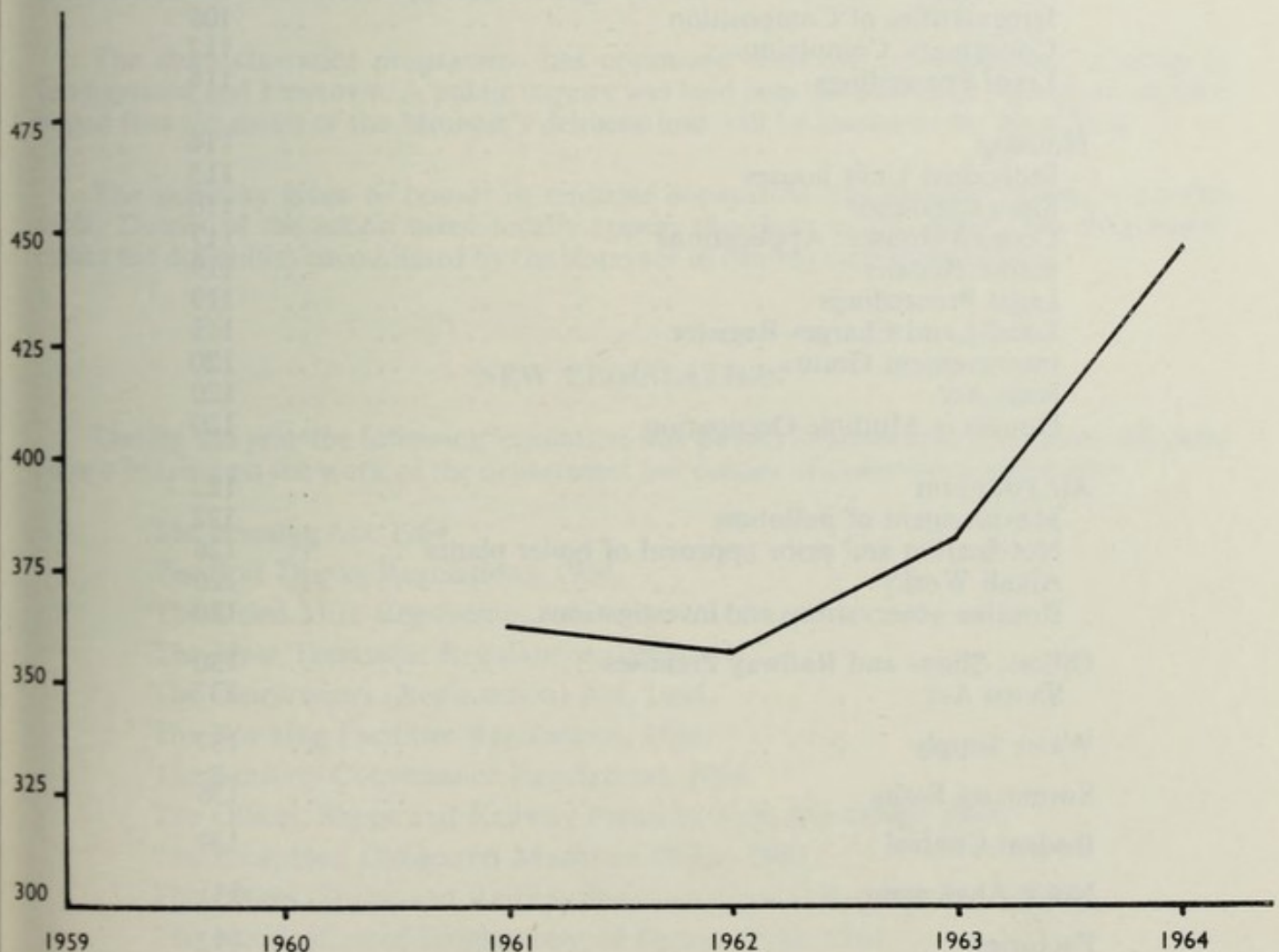
Compiled from Supplement to the Proceedings of the 16th Conference of the British Student Health Association.

During the year enquiries were received from Bath, Brighton, Portsmouth and Oxford regarding the Cardiff schemes for Student Health in Colleges of Further Education. Full reports were sent them.

Mrs. M. P. Davies, the Health Visitor who has been with the Service since its inception, also spent one day a week visiting Student accommodation on behalf of the Colleges. She does not act as a Bureau to which Students can apply when searching for suitable lodgings. Table X summarizes her visiting.

Table X.—Accommodation visits made by Health Visitor

Year	Completed Visits	Information Incomplete	No Reply	Special Case Visits	Other Visits	Total
1964	201	88	126	5	26	446
1963	196	46	90	10	40	382
1962	198	64	71	23	—	356
1961	253	36	63	10	—	362



REPORT FOR 1964

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 previous years. The style of presentation is a compromise to meet the needs of the general reader, other officers working in the field of public health, 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 of the public health inspector. The greatest difficulty that has been faced is the shortage of qualified inspectors to cope with the increase of work resulting from new legislation. For most of the year the department was six district public health inspectors under the establishment, and this is reflected in a decrease in the number of inspections carried out.

Since the local authority had a duty to inspect premises under the provisions of the Offices, Shops and Railway Premises Act, 1963 the Health Committee decided that in view of the shortage of public health inspectors, to appoint four technical assistants to inspect office premises under the supervision of a public health inspector. These assistants have now been employed in the department for a period of four months and it should be recorded that the venture has been worthwhile and resulted in a most satisfactory commencement and a full account of the work appears on page 130 of this report.

The slum clearance programme has continued with the representation of areas in Grangetown and Newtown. A public inquiry was held into the Butetown No. 2 area and it is hoped that the result of the Minister's deliberations will be known in the New Year.

The publicity given to houses in multiple occupation has focussed attention on this topic. Details of the action taken locally appear elsewhere in this report but they hardly reflect the difficulties encountered by the inspector in dealing with these houses.

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 Housing Act, 1964.

The Soft Drinks Regulations, 1964.

The Dried Milk Regulations, 1964.

The Meat Treatment Regulations, 1964.

The Hairdressers (Registration) Act, 1964.

The Washing Facilities Regulations, 1964.

The Sanitary Convenience Regulations, 1964.

The Offices, Shops and Railway Premises First Aid Order, 1964.

The Prescribed Dangerous Machines Order, 1964.

The Offices, Shops and Railway Premises Annual Reports Order, 1964.

The Notification of Employment of Person Order 1964.

Housing Act, 1964

This Act which appeared on the statute book during July of the year is one that will require much attention by the Public Health Inspector. The Act makes further provision for houses let in multiple occupation and to compel the carrying out of works for the improvement of dwellings which are without all or any of the standard amenities.

Soft Drink Regulations, 1964

The regulations relate to the use of artificial sweeteners, the acids which may be used, labelling of soft drinks and composition of fruit juices.

Dried Milk Regulations, 1964

These regulations were introduced as a result of the Food Standards Committee's report on dried milk. The principal changes to the existing regulations are concerned with the milk fat content, moisture content and labelling of dried milk.

The Washing Facilities Regulations, 1964

The Sanitary Conveniences Regulations, 1964

These regulations lay down numerical standards for washing facilities and sanitary conveniences to be provided in offices, shops and railway premises, in accordance with sections 9 and 10 of the Offices, Shops and Railway Premises Act, 1963. The numbers are directly related to the number of staff employed.

The Offices, Shops and Railway Premises First Aid Order, 1964

This order prescribes the requisites and appliances to be contained in first aid boxes provided under s.24 of the Offices, Shops and Railway Premises Act, 1963 and also prescribes the qualifications of persons required to be trained in first aid.

The Prescribed Dangerous Machines Order, 1964

This order prescribes a number of dangerous machines at which a person must not work unless he had been fully instructed as to the dangers arising and the precautions to be observed. Twenty types of machines are listed in the order which is made under the Offices, Shops and Railway Premises Act, 1963.

The Offices, Shops and Railway Premises Annual Reports Order, 1964

This order prescribes the matters to be contained in the annual reports made to the Ministry of Labour by Local authorities under the Offices, Shops and Railway Premises Act, 1963.

The Notification of Employment of Persons Order, 1964

This order stipulates the form of the notices to be served on the local authority by persons employing other persons to work in an office, shop or railway premises to which the Offices, Shops and Railway Premises Act, 1963 applies.

FOOD AND DRUGS CONTROL

Meat Inspection and Slaughter houses

In November 1963, slaughtering which used to take place at one privately-owned licensed slaughterhouse in the city was discontinued. Thus, all slaughtering is now conducted at the Corporation's Municipal Abattoir; details of slaughtering and meat inspection are to be found in the report of the veterinary officer and abattoir manager.

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 5,122 visits was made for this purpose during the year (an increase of 15 per cent on last year) and the approximate weight of diseased or unsound food and meat surrendered as unfit for human consumption was 45 tons. 16 cwts. 2 qts.

Food Hygiene

A total of 10,270 visits was made to food premises during the year for the purpose of food hygiene and food inspection. This is a thousand less than were made in 1963. There are 3,008 food premises on the register so that arithmetically 3.1 visits per 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	1,003
School canteens	65	102
Other canteens	87	96
Clubs, hotels, public houses	348	267
Butchers and meat preparing premises	239	842
Bakehouses	43	174
Confectioners (sugar and flour)	296	176
Fried fish shops	70	123
Wet fish shops	30	76
General shops	823	1,531
Wholesale depots	111	923
Ice cream premises	636	683
Markets	3	29
Vehicles	—	41
Other food premises	42	82
Total	3,008	5,148
 Food Inspection—Condemnation visits	 1,651	
Routine Visits	3,471	
	5,122	

107 written notices and 23 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.	15
Food to be protected from customers, etc.	17
Food to be protected from risk of contamination by animals	1
Clean overalls to be provided	—
Smoking to be discontinued	16
Use of unclean wrapping to cease	9
Sanitary conditions to be modified, cleansed, repaired	31
Wash-Hand notices to be provided	3
Provision of water supply (cold)	12
Provision of wash-hand basins	16

Provision of hot water for wash-hand basins	..	..	19
Provision of soap, towel, nailbrush, etc.	..	..	23
Provision of sinks for food or equipment	..	..	3
Provision of hot water for sinks	..	..	5
Provision of first-aid equipment	..	..	2
Provision of clothing accommodation	..	..	—
Lighting of food rooms to be improved	..	..	—
Ventilation of food rooms to be improved	..	..	1
Food rooms to be cleaned/repared..	..	..	17
Refuse to be removed	..	..	2
Cold storage for special foods	..	..	—
Hot storage for special foods	..	..	2

Foodstalls, vehicles, etc.

Improvements to structure, repair, cleanliness	1
--	----	----	---

Bacteriology of Foodstuffs

As in previous years the policy of routine swabbing at the slaughterhouse, central market and at certain meat preparing premises was continued. The results of swabbing from the chosen points at these premises is shown in the following table.

The results indicated that 22% of all the swabs taken were contaminated by salmonella organisms, whilst at the Public Abattoir the corresponding figure was 64%.

Milk Bacteriology

Heat treated Milk

Heat treatment of milk continues to be carried out at four processing plants in the city; pasteurisation by the H.T.S.T. method at three plants and the holder process at one plant. Sterilisation of milk is no longer carried out, the plant having closed down.

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. 536 heat treated milks were submitted to the statutory tests. Of 490 samples subjected to the phosphatase test for effective pasteurisation, 3 were reported as failing to satisfy the test. All 46 samples of sterilised milk were reported as satisfying the turbidity test and therefore satisfactorily processed.

3 samples out of the total of 490 samples of pasteurised milk submitted to the methylene blue reduction test (for hygiene and keeping quality) were reported as unsatisfactory. Two 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.

Antibiotics and other Inhibitory substances: T.T. and Channel Island T.T. Milk

A total of 211 samples of raw milk, comprising churned milk ex farms and bottled milk, were examined for the presence of antibiotics and other inhibitory substance. With the exception of one sample of churned milk, all were reported to be free from these substances.

Investigation at the farm showed that a cow which was suffering from mastitis had been treated with an antibiotic, the farmer having failed to exclude the milk from his daily production as delivered to the processing plant.

Brucella Abortus T.T. Milk

The isolation of *Brucella Abortus* from raw T.T. Milk sold in the City and reported in the annual report for 1963 was followed by action prohibiting the sale of milk from this source without prior heat treatment. The herd was cleared by the farmer's veterinary officer and the milk kept under surveillance by periodical sampling prior to heat treatment. Further positive results were obtained during the year and the order was re-imposed. A number of cows were sold for slaughter and further routine sampling showed the milk to be free from the organism.

Milk Submitted for Laboratory Examination During 1964 **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 ..	150	149	1*	149	1*	—	—	—
T. T. Pasteurised ..	182	181	1	181	1*	—	—	—
Homogenised T.T. Pasteurised ..	13	13	—	13	—	—	—	—
Homogenised Past.	48	48	—	47	1	—	—	—
Channel Islands Pasteurised ..	61	61	—	61	—	—	—	—
Channel Islands T.T. Pasteurised ..	36	35	1	36	—	—	—	—
Sterilised	46	—	—	—	—	—	46	—

*This figure indicates 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.'

Raw Milk

MILK DESIGNATION	Methylene Blue Test			ANTIBIOTIC EXAMINATION			BIOLOGICAL EXAMINATION			
	No. of samples submitted for exam- ination	Satis- factory	Unsatis- factory	No. of samples submitted for exam- ination	Positive	Negative	No. of samples submitted for examination		Tubercle Bacilli	
							Tubercle Bacilli	Brucella Abortus	Positive	Negative
Tuberculin Tested ..	22	22	—	175	1	174	55	55	—	51*
Channel Island Tuberculin Tested ..	4	4	—	37	—	37	11	11	—	10*
									4	47*
									—	10*

* Premature death of guinea pig. T.T. Milk = 4
C.I.T.T. Milk = 1

Samples taken from Milk Vending Machines

Milk Designation	Total number of samples submitted for examination	Methylene Blue Test		Phosphatase Test	
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Pasteurised	68	67	1	67	1
T.T. Pasteurised	76	75	1	76	—
Homogenised T.T. Pasteurised ..	3	3	—	3	—
Homogenised Pasteurised	39	39	—	39	—
Tuberculin Tested	3	3	—	—	—

Ice Cream and Ice Cream Premises

There are eleven firms and persons registered for the manufacture of ice cream, four producing hot mix and seven using a complete cold mix powder. The number of retailers registered for the sale of ice cream is 759.

During the year 683 visits were made to premises at which ice cream was manufactured or sold. Samples taken for bacteriological examination numbered 103, details of which are given in the table following.

The fifteen unsatisfactory samples were found to be due to poor sterilization or handling of equipment by retailers. Advice was given on the use of suitable sterilizing agents and follow-up samples were satisfactory.

Samples of Ice Cream

Total number of samples submitted for examination	Local Manufacturers		National concerns		Satisfactory				Unsatisfactory			
	Ice cream		Ice lollies		Grade I		Grade II		Grade III		Grade IV	
	Hot mix	Cold mix										
103*	20	13	—	—	49	—	12	—	5	—	10	—

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

Food and Drugs sampling: irregularities of composition

During 1964 a total of 1,127 samples were investigated. Of these, fifteen were in respect of labelling and were dealt with without reference to laboratory examination. The remainder comprised 452 samples of ordinary milk, 75 samples of Channel Island milk, 554 food (other than milk) and 31 samples of drugs and medical preparation.

The extent of the irregularities is detailed in the table which appears below, individual irregularities are subsequently discussed.

Samples submitted for analysis 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	452	421	31	—
Milk—Channel Island	75	58	17	—
Other Foods	554	502	52	—
Drugs and Medical Preparations	31	29	2	—
Samples examined at Departmental Offices for Labelling only	15	—	—	—
TOTALS	1,127	1,010	102	—

Milk

Milk sampling now conforms to the pattern of sampling introduced 5 years ago. The number of milk samples taken is now thought to be more in keeping with its place in the nations diet having regard to past records of analysis. Milk samples were collected at the many points of production, processing and sale, including the increasing number of milk vending machines and decreasing number of producer-retailers.

Of 452 samples of ordinary milk, 31 were reported as 'adulterated' or of irregular composition. In the case of Channel Island Milk 58 out of 75 samples were found to be genuine, 17 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 31 ordinary milk samples which were the subject of 'irregular' reports:—

Churn Samples

- 15 samples of churned milk forming part of 12 consignments comprising 82 churns containing 773 gallons were reported to be deficient in milk fat. Though the individual churns were of irregular composition the whole consignments complied with the legal standard.
- 4 samples taken from churns of 4 consignments comprising 17 churns containing 168½ gallons 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.
- 6 samples of churned milk part of 4 consignments comprising 37 churns containing 353 gallons 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) One sample of churned milk (part of an 8 churn consignment of 79½ gallons) was reported to be deficient of 1.9% solids-not-fat and to contain 1% extraneous water. Another sample of the same consignment was deficient of 4.7% fat and 2% solids-not-fat. A farm visit indicated that the farmer had failed to ensure complete drainage of milk utensils. Advice was given and more efficient supervision of production methods were introduced. Further samples were of satisfactory composition.
- (e) One sample of churned milk comprising a consignment of two churns containing 13 gallons was reported to be deficient of 23% fat and low in solids-not-fat. The total average fat content of consignment was 2.93% and the solids-not-fat 7.85%. Follow up samples were taken and the consignment was found to be of satisfactory compositional quality.
- (f) Two or three samples of churned milk (part of a five churn consignment comprising 43½ gallons) were reported to be deficient of milk fat and solids-not-fat and also contain 0.7% extraneous water. Assessed as a whole the consignment complied with the prescribed standard for ordinary milk but contained a small amount of water. A farm visit indicated that the producers had failed to drain churns and milking buckets after rinsing prior to being used to contain milk. Advice was given and further samples taken. These samples were of satisfactory compositional quality.

Channel Islands Milk

Of the 17 samples of Channel Islands Milk which were the subject of 'irregular' reports:—

- (a) Seven samples taken from churns (part of four consignments comprising 17 churns containing 158 gallons) were reported as deficient in milk fat. Assessed as a whole the consignment complied with the absolute standard prescribed for Channel Islands Milk.
- (b) Two samples of churned Channel Islands Milk were reported to be 3.7% and 2.5% deficient in milk fat, respectively. Assessed as a consignment the total average fat content was 3.97%. Further samples were taken of three churns of a subsequent consignment and were satisfactory.
- (c) Three samples of churned Channel Island milk, (part of a 5 churn consignment comprising 48 gallons) were reported as being 10%, 12.5%, 17.5% deficient in milk fat respectively. The total average fat content of the consignment was 3.89%. Follow-up samples taken on this occasion were deficient in milk fat in three out of five churns, but the consignment as a whole satisfied the absolute standard prescribed for Channel Island Milk.

Other Foods

The total number of samples submitted for analysis was 554, of which 52 were commented upon by the City Analyst. The irregularities in composition encountered and others which were the subject of complaints are referred to briefly in the following notes.

Process Swiss cheese. Excessive moisture content

Samples of Process Swiss Cheese with Ham and Salami were found to contain moisture in excess of the maximum recommended by the Food Standards Committee in their report on Cheese and Cheese Spread, 1962. Discussions with the manufacturers has resulted in a revision of the formulation of product, and amendment of the description of product. The product contained 6.7% 6.8% 7.3% 7.5% and 7.8% moisture in excess of the recommended minimum of 45%.

Powdered gelatine: Inferior setting strength

A product packed locally found to be of inferior setting strength but otherwise of satisfactory compositional quality. The packer withdrew all stock from sale.

Canned oyster soup. Failure to declare minimum mineral content

An imported product carrying a list of ingredients which included the word 'Fresh Oysters rich in iodine' was not accompanied by a declaration of minimum mineral content as required by the Labelling of Food Order, 1953.

Cream of tartar: Labelling irregularity

This product was of satisfactory compositional quality but carried a statement declaring the product to be the subject of a British Pharmacopoeia monograph. This ceased to be the case from January, 1964 onward.

Shrimp flavoured slices: Labelling irregularity

An oriental delicacy intended to appeal to the palate of the gourmet even to the extent of including as an ingredient 'Gourmet Powder.' The term 'Gourmet Powder' however did not indicate the true nature of the ingredient and constituted a labelling irregularity. The importers and packers secured amendment of the label to comply with the requirements of the Labelling of Food Order.

Brandy and Gin. More than 35% under proof

Samples of Brandy and Gin found to be 59.8% proof spirit and 61% proof spirit respectively and hence, watered. The matter was considered by the Health Committee which resolved that a warning be given to the vendors.

Cod liver oil and malt: Not of satisfactory merchantable quality

A 'Welfare Food' product in which loss of moisture due to prolonged storage of the product rendered it incapable of being used as in accordance with the instructions on the label. The stocks were surrendered for destruction.

Non-brewed condiment. Low acetic acid content

A locally packed product, containing 3.6% acetic acid and therefore 4% below prescribed standard. The matter was referred to the packer and further samples were found to be of satisfactory compositional quality.

Canned fruit salad. Incomplete declaration of ingredients

U.K. packs of fruit carrying incomplete voluntary declarations of content in that the tins contained artificial colouring matter which was not included in the list of ingredients. The packer was requested either to include colouring matter in the declaration of contents or to cease to apply a list of ingredients to the product.

Raspberry jam. Fruit content below prescribed minimum

A continental product, four samples of which were reported as showing a fruit content of 18.5% 20% 22% and 23% respectively. The fruit content of all four samples was therefore below that prescribed by the Food Standards (Preserves) Order 1953. The matter is being discussed with the importers with a view to improving the quality of this product, bringing it into line with the other varieties of the same brand currently available.

Canned Meat Products

The ever-increasing variety of products of this nature currently available of necessity requires that a proportion of any sampling programme should be directed to include this type of product.

Meat Products—Meat Deficiency

Several meat products while of good commercial quality have been found to contain smaller percentages of meat than the minimum prescribed by the Food Standards Committee in their report on Canned Meats. Recipes of the products have had to be revised or new trade descriptions have had to be introduced to enable the products to satisfy the above mentioned recommendations.

Canned meat products showing deficiencies in relation to meat content are detailed below:—

Canned Chopped Chicken in Jelly—Meat Deficiency

A continental product packed under a U.K. registered trade mark. Two samples reported as containing 65% and 67% meat respectively therefore below the minimum (80%) recommended for products marketed under this description.

After investigation of the Registered Trade Mark via the Registrar of the Patent Office the matter was taken up with the packers. Discussions are proceeding with a view to amending the description of the product or to secure an increase in the meat content.

Canned stews—Meat deficiency

Two samples of products of similar type containing 29% and 33% meat respectively. The recommended standard for meat content for products of this nature is 35%. But the standard in the draft regulations is 25%. Therefore no action was taken.

Lamb chop with vegetables and gravy

Meat content of the products was 27% and 30% meat respectively, therefore below the standard recommended by the Food Standards Committee in their report on canned meats. Investigations showed that the product is no longer packed and that the sample was one of few cans remaining in stock. The vendors diverted their remaining stock to their staff canteen.

Lunch Tongues

A continental product of good commercial quality but two samples showed meat content of 80% and 85% respectively, this being below the standard of 95% recommended by the Food Standards Committee. Discussions with the manufacturers regarding the formulation of the product are in progress.

Casserole steak. Meat deficiency

Five samples of casserole steak reported as containing 57% 62% 63% 71% and 71% meat respectively and therefore below the standard recommended for products of this nature, viz 75% meat.

The product was packed under a registered trade mark and following receipts of details of the packers' name and address discussions were undertaken and details forwarded to the packers' factory overseas.

Meat Pies

Attention continues to be devoted to this type of product, a total of 23 miscellaneous varieties being submitted for laboratory examination. Three samples detailed below were the subject of comment.

Two samples of steak and kidney pies manufactured by a national concern were found to contain only 17% and 18% meat respectively.

One sample of vegetable and meat pie produced locally contained 9% meat.

All three samples were therefore below the tentative local standard which accepts as satisfactory all meat pies with a meat content of 20% (or more) and vegetable and meat pies if the meat content is 10% (or more).

In the case of the steak and kidney pies the manufacturers suggested that fat migration was the cause of the deficiency, since the company's recipe should have satisfied the standard recommended by the Food Standards Committee, viz. 25%. Research on this point is being carried out at the factory; further samples were of satisfactory compositional quality.

The vegetable and meat pie was dealt with by carrying out adjustments to the filling machine at the factory. Further samples showed that the products were satisfactory.

Sausage

In the absence of a legal standard in respect of the meat content of sausage a tentative standard has been suggested by the Society of Public Analysts; the standard follows that which was originally introduced in war-time by the Ministry of Food and continued for purposes of price control. This tentative standard has been applied in order to achieve an improvement in the quality of the products and obtain a fairly uniform standard of meat content locally.

Twenty four samples of pork sausages and a similar number of samples of beef sausages were submitted for examination. Eleven samples were subject to comment by the City Analyst. Six samples of beef sausages and four samples of pork sausage from a local manufacturer were reported as deficient of meat content or containing an excessive ratio of fat to lean meat. Consultations with the manufacturer and test sampling achieved an improvement in composition and fat to lean ratio.

A further sample of beef sausage also of a local manufacturer was reported as deficient in meat content and found to contain a foreign body in the form of a piece of metal. Investigation showed that the metal object was a portion of a hook used to secure a label to meat when purchased wholesale in quarters. The matter was regarded as an isolated incident.

Consumers' Complaints of Food Abnormalities

The public's interest in quality control and wholesomeness of the many and varied foods appearing on the market continues to be shown in the form of consumer reports in respect of unsatisfactory or suspect foods.

During 1964 some 118 items were investigated following reference by members of the public.

The following tabulation will serve to indicate the nature of the complaints and the field of investigation.

Classification of Complaints	1964
Bread	23
Cake and flour confectionery	19
Chocolate and sugar confectionery	1
Meat	11
Meat pies and pasties	15
Canned meats	8
Other meat products	7
Baby foods	—
Milk and milk bottles	10
Milk products	4
Soups	1

Wines and soft drinks	..	..	..	..	..	2
Tinned tomatoes	..	..	..	..	..	3
Canned foods	..	..	..	..	..	4
Miscellaneous foods	..	..	..	..	..	10

118

Bread

A total of 23 complaints were received and investigated. Most related to the presence of mould and foreign bodies. The total places the baking trade in the unevitable position of being the branch of the food industry in respect of which the greatest number of complaints were recorded. Ineffective control of the shelf life of bread, particularly wrapped bread, continues to be a matter for concern. Stock rotation, controlled disposal of returns, and balanced purchasing are a few of the cardinal points to be observed in a well organised food industry in which the nature of the product is conducive to the development of mould. Foreign bodies in the form of pieces of string, metal objects, wood, the leg of a cockroach were among many items found embedded in what is our daily bread.

Mould in Pies and Pasties

The warmer months of the year continue to be accompanied by complaints of mould in pies and pasties. They are ideal media for the development of mould and demand close control in warm weather.

Cake and flour confectionery

Legal proceedings were instituted in three cases involving confectionery. The sale of products affected with mould and one containing a nut and bolt resulted in fines totalling £40 0s. 0d.

Milk and milk bottles

Ten complaints were received during the year, this being a welcome reduction from the previous year. It is to be hoped that this reduction is an omen for the future.

Legal proceedings were instituted in respect of one failure to cleanse a milk bottle prior to filling it with milk. The processors were granted an absolute discharge on payment of 3 guineas costs.

The nature and variety of the objects found in milk bottles include:—cement and cement-like substances, a house fly, mould, oil.

Legal Proceedings

Legal proceedings were taken against 10 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.
8	Did sell a bun containing a nut and bolt contrary to Section 2 of Food and Drugs Act, 1955	20 0 0	3 3 0	23 3 0
12	Did sell a pork pie which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	10 0 0	3 3 0	13 3 0
13	Did sell a chocolate sponge bar which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	10 0 0	3 3 0	13 3 0
14	Did sell a sausage roll which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	25 0 0	— — —	25 0 0
15	Did sell a steak and kidney pie which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	35 0 0	8 0 0	43 0 0
20	Did fail to ensure that a milk bottle was thoroughly cleansed before use contrary to Regulation 27(1) Milk and Dairies General Regulations, 1959	— — —	3 3 0	3 3 0
21	Did fail to secure that persons employed wore a clean and washable head covering contrary to Regulation 30(1) of the Food Hygiene (General) Regulations, 1960 ..	20 0 0	— — —	20 0 0
22	Did sell a jam sandwich which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	10 0 0	3 3 0	13 3 0
23	Did sell a pork pie which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	20 0 0	3 3 0	23 3 0
24	Did sell a pork pie which was mouldy contrary to Section 2 of the Food and Drugs Act, 1955	20 0 0	3 3 0	23 3 0

HOUSING

Inspection of houses in the docks area having been completed by the end of 1963 and following the recommendation of the Health Committee, a preparatory survey of houses in the Grangetown area was instituted. This involved complete inspections of 117 houses of which, 71 were considered unfit. Immediately following completion of this area, inspections were commenced in the Newtown area, where 172 houses were visited, of which 164 were considered unfit.

At the time of confirming the Riverside Compulsory Purchase Order the Minister of Housing and Local Government had recommended that payments in respect of good maintenance be made in respect of 18 houses of which, 8 were owner/occupied. During the early part of this year the owners and tenants of the 10 rented properties were invited to

provide evidence to support their claim to payment, insofar as the Council are empowered by the Housing Act 1957 to pay in whole or part to any person, other than the owner, who can satisfy them that the good maintenance of the house was attributable to a material extent to work carried out by himself. The tenants of 5 houses did not make application. The claims of the 5 tenants who did make application for payment were fully investigated and reported upon to the Health Committee who resolved in two instances to grant all the payment to the owner, in one case 75% to the owner and 25% to the tenant, and in two cases 50% to the owner and 50% to the tenant.

During the year 29 houses were demolished at the docks and in the central Clearance Areas, together with 18 houses, which had been previously made the subject of Certificates of Unfitness and 5 houses on which had been made Demolition Orders. Families rehoused into Council owned property from houses included in Compulsory Purchase Orders numbered 234, amounting in all to 756 persons.

The Housing Act, 1964 which came into operation during the year provided a new power to take over the control and management of houses in multiple occupation summarily if the living conditions are so bad that immediate intervention by the Local Authority is necessary for the protection of the residents' safety, welfare or health. The Act also made changes in the Schemes of discretionary and standard grants. It also gave local authorities powers to define improvement areas within which houses could be brought up to a better standard by compulsion if necessary incorporating the provision in houses of baths, wash-hand basins, hot and cold water supplies, water closets and satisfactory facilities for storing food.

Individual Unfit Houses

During the period under review 23 houses were dealt with by individual action, as shown in the table below:—

Housing Act, 1957	Houses	Displaced during the year	
		Persons	Families
(a) Unfit houses made subject to Demolition Orders under Section 17(1)	11	23	8
(b) Unfit houses made subject to Closing Orders under Section 17(1)	6	4	3
(c) Unfit houses subject to Undertakings not to be used for human habitation under Section 18	2	—	—
(d) Parts of buildings closed under Section 18	1	—	—
(e) Undertakings to repair accepted under Section 16(4)	1	—	—
(f) Closing Orders revoked under Section 27	2	—	—

Demolition Orders

15 Railway Terrace.
 1, 2, Pwllmawr Cottages, Rumney.
 58, 59, Millicent Street.
 1, 2, 3, Victoria Street.
 27a Wellington Street.
 5 Kite Street.
 202 Bute Street. (also included in Butetown No. 2 Compulsory Purchase Order).

Closing Orders

139 Portmanmoor Road.
 "Ty-Gwyn", Hendre Road.
 57b Albert Street.
 234, 238 Bute Street. (also included in Butetown No. 2 Compulsory Purchase Order).
 122a Broadway.

Undertakings accepted not to be used for human habitation

144, 197 Bute Street. (also included in Butetown No. 2 Compulsory Purchase Order).

Closing Orders on Parts of Buildings

19 South Luton Place (attic).

Undertakings to repair

27a Wellington Street.

Closing Orders revoked

31 Rhymney Street.
 7 Herbert Street, Maindy.

Proposed Clearance Areas during 1964

Area	No. of unfit houses	No. of families	No. of persons
Thomas Street/Madras Street (Grangetown)	71	87	282
Portmanmoor Road (127—141) (Splott)	7	3	13
Pendoylan Street/Ellen Street (Newtown)	164	194	681
TOTALS ..	242	284	976

City of Cardiff (Butetown Areas Nos. 2—16). Compulsory Purchase Order 1964.

The public local inquiry was held on the 8th December at the City Hall by S. J. Parnell, Esq., B.Sc. (Eng.), A.M.I.C.E., M.R.S.H., and the report and recommendations of the Minister of Housing and Local Government is awaited. Principal grounds notices in respect of 102 properties of which objections had been received, were prepared and forwarded to the owners concerned.

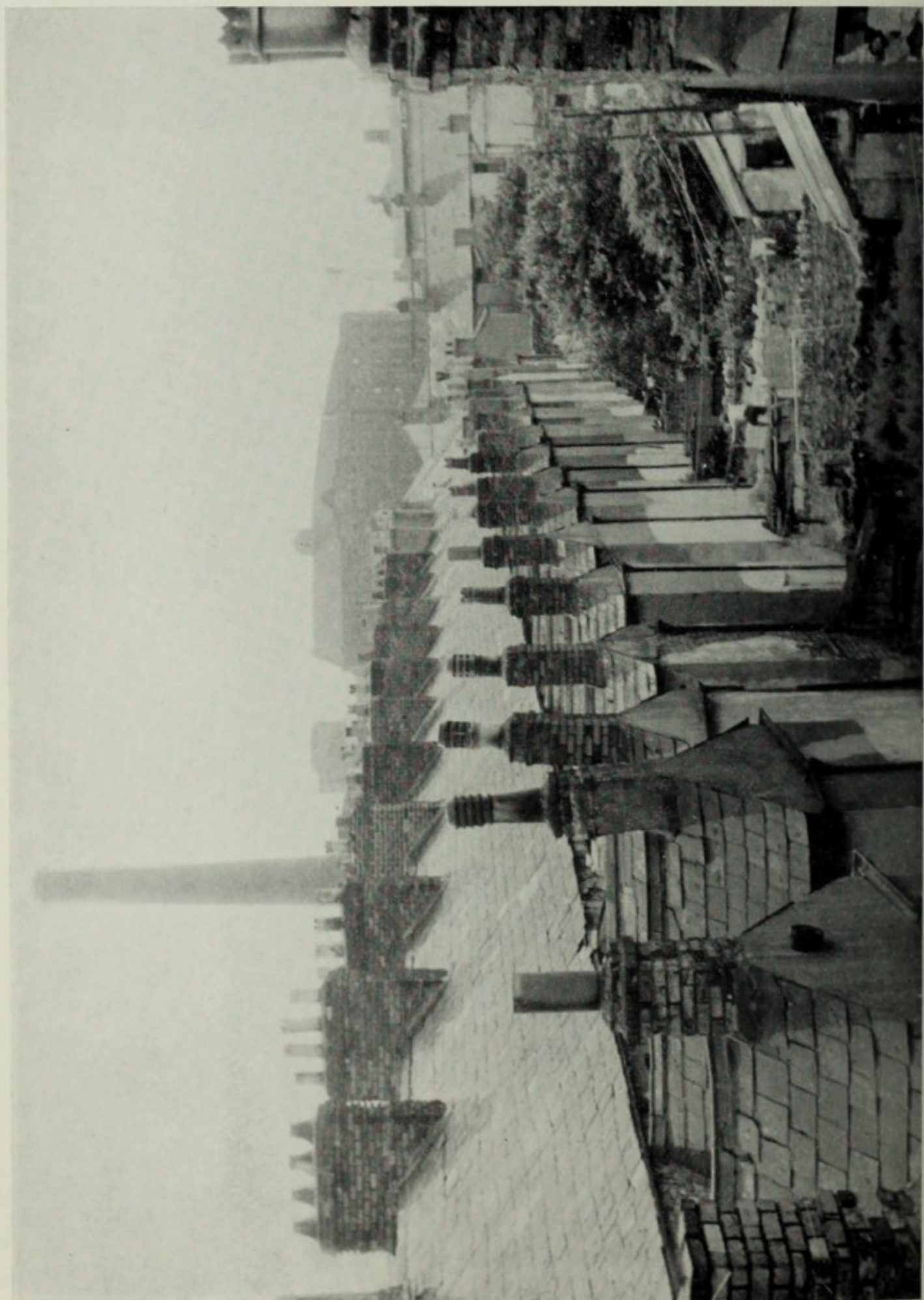
Madras Street/Thomas Street Clearance Area—Grangetown No. 1 Compulsory Purchase Order, 1964

The Health Committee on 1st July received a report on inspections which had been made of 117 properties in an area bounded by Bishop Street, Thomas Street, Franklen Street and North Clive Street. Detailed inspection reports relating to 72 houses were submitted and representations made that the said 72 houses were unfit for human habitation. They could be dealt with for clearance by incorporating 71 of them in one Clearance Area and by the making of an individual Order under the Housing Act 1957 on the one remaining house. The Committee were satisfied that the 71 houses in the Clearance Area were unfit and that the most satisfactory method of dealing with the conditions in the area was the demolition of all buildings therein. The Council were recommended, subject to the Finance and Estates Committee being satisfied, to declare the houses defined and coloured pink on the



Butetown: the old and the new

Multi-Storey Flats at Loudoun Square, Docks, which have replaced houses demolished under the Butetown No. 1 Compulsory Purchase Order.



The rear of Houses in North William Street, included in the proposed Newtown Clearance Areas.

map submitted to be a Clearance Area under Section 42 of the Housing Act 1957. The resolution was confirmed by the Council on 27th July. The unfit houses are occupied by 87 families and 4 lodgers amounting in all to 282 persons. Council approved the making of a Compulsory Purchase Order on the 27th July for the 72 unfit properties together with "grey" land adjoining the Two Clearance Areas.

Two of the unfit houses are also partly used as business premises; one includes a betting shop and the other is a grocer's shop. The houses are in the region of 100 years old and all are arranged in terraces without forecourts. None were found to be in a good state of repair, 60 (83%) in a state of repair typical of their age, and 12 (17%) in an extremely poor state of repair. Dampness, either penetrating or rising, and in some cases both types together, were found in each house classified unfit. Natural lighting to one or more rooms was inadequate in approximately a half of these houses, and drainage defective in 75% of them.

Portmanoor Road—Nos. 127—141—Proposed clearance areas

The Health Committee on 1st July received a report on inspections which had been made of 9 properties between Nos. 127 and 141, Portmanoor Road. Detailed inspection reports were submitted relating to 7 houses, numbered 127, 127a, 133, 135, 137, 139 and 141 and representations made that the 7 houses were unfit for human habitation. They would be dealt with by the making of two Clearance Areas. The Committee were satisfied that the 7 houses in the two areas were unfit and that the most satisfactory method of dealing with the conditions in the areas was the demolition of all the buildings therein. The Committee 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. Council approved the declaration of Clearance Areas on the 27th July. The unfit houses are occupied by 3 families amounting to 13 persons.

Newtown—Proposed clearance areas

The Health Committee on 11th November received a report on inspections which had been made of 172 properties in the Newtown area. Detailed inspection reports relating to 164 houses were submitted and representations made that they were unfit for human habitation and could be dealt with by the making of two Clearance Areas. The Committee were satisfied that the 164 houses in the proposed Clearance Areas were unfit and that the most satisfactory method of dealing with the conditions in the 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 Council on 7th December. The unfit houses are occupied by 194 families and 15 lodgers amounting in all to 681 persons. An enquiry put to each occupier during the course of inspections revealed that 50·7% of the families wished to remain in the area if the land is to be redeveloped for housing purposes.

Purchase of houses by the Corporation in advance of slum clearance

Complete inspections of 51 houses, as to their state of fitness, included in the Council's provisional slum clearance programme, were carried out following requests by the City Housing and Estates Manager. This is in accordance with the Estates Committee resolution to negotiate for the purchase of houses in the current programme where an offer of sale had been made by the owners.

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	..	..	..	..	726
Number found verminous	..	..	..	..	12
Visits regarding transfers	..	..	..	..	256
Visits to council house applicants	..	..	..	..	332
Miscellaneous visits	..	..	..	..	15
Number of interviews at office	..	..	..	..	527

The number of vacant houses rose by 50% over that in 1963. This was due to the increase in the building programme which gave the Housing Department a great deal more flexibility to deal with transfers.

The general improvement in the standard of cleanliness of houses vacated by Council tenants noted in 1963 was maintained, and the number of houses found verminous on vacation remained at 1.6%. Disinfestation where necessary was carried out by spraying with an insecticide.

Consideration was given during the year to a total of 1,373 applications for rehousing. Of these, 253 were requests for transfers, of which 105 were recommended.

The 1,120 applications for rehousing considered on medical grounds were dealt with as follows:—

Recommended immediate rehousing	..	..	..	41
Awarded medical points	..	..	..	221
Transferred to the priority group	..	..	..	32
Given special priority on account of tuberculosis in applicant's family	..	..	..	2
No special recommendation	..	..	..	591

Of the 41 recommendations for immediate rehousing, 28 were in respect of old age pensioners. The number of cases given special priority on account of tuberculosis in the applicant's family was the lowest ever. In dealing with such cases, priority is limited to those cases in which there is a risk of the spread of infection in view of the housing conditions and the patient's infective condition.

The medical conditions cited by applicants for priority for rehousing or transfer are broadly classified as follows:—

Pulmonary tuberculosis	..	..	..	..	51
Non-pulmonary tuberculosis	..	..	..	..	10
Asthma, bronchitis and other chest complaints	..	..	..	..	347
Nervous complaints and mental illness	..	..	..	..	297
Heart Conditions	..	..	..	..	124
Rheumatism	..	..	..	..	90
Skin Conditions	..	..	..	..	13
Physically handicapped	..	..	..	..	96
Other illnesses	..	..	..	..	345

The percentage of applications considered on account of pulmonary tuberculosis again shows a marked reduction over the previous year.

Once again chest ailments account for the largest number of cases, with nervous complaints and mental illness next in order of frequency. Until every applicant can have separate accommodation of his own, these latter complaints will continue to form a large number of the cases.

“Other illnesses” include those which could not accurately be placed in any other category. They consist of a wide variety of complaints, and include conditions which are not primarily of medical concern.

House Repairs

The total number of notices served under all acts was 480 preliminary notices and 214 statutory notices. The following summary gives details:—

EXTERNAL

Roofs to be repaired or reslated	361
Gutters and R.W.P's to be repaired, etc.	242
Walls and chimneys to be repointed/repared	96
Yards/paths to be repaired or resurfaced	25
Soil pipes to be repaired/renewed	1
Drains to be cleared/repared	110
Cesspools, etc., to be repaired/cleaned	—
Cesspools to be abolished	—

INTERNAL

Dampness to be cured	187
Interior walls and ceilings to be repaired	215
Floors to be repaired	51
Staircases, etc., to be repaired	9
Fireplaces and flues to be repaired	6
Verminous/filthy premises to be cleaned	1

Legal Proceedings

Defendant No.	Offence	Fines	Costs	Total Penalties	Nuisance Order
		£ s. d.	£ s. d.	£ s. d.	
1	Did fail to comply with a notice served under Section 93 of the Public Health Act, 1936	— — —	3 3 0	3 3 0	28 days
2	Did fail to comply with a notice served under Section 93 of the Public Health Act, 1936	— — —	4 0	4 0	28 days
18	Did fail to comply with a notice served under Section 93 of the Public Health Act, 1936	— — —	2 2 0	2 2 0	2 months

Local Land Charges Register

A steady increase in the number of searches made to the Corporation has been made in the last few years.

The following table indicates the number of searches made to the Corporation since 1961.

Year	1961	1962	1963	1964
Visits	4,053	4,684	5,079	5,754

Each search requires investigation to ascertain the status of the property with special reference to the slum clearance programme.

In addition all houses which are the subject of Corporation mortgages are now referred to the department for report to the City Treasurer.

The number of houses referred since 1961 is as follows:—

Year	1961	1962	1963	1964
Visits	1,399	1,696	1,472	1,799

Improvement Grants

One hundred and seventy eight applications were referred to the department for observations. Inspections were carried out resulting in three suggested modifications and refusals being recommended in nine cases. The remaining 166 applications were approved without modification. Once again difficulty has arisen from applications which have been submitted relating to properties which are likely to be dealt with under Housing Act procedure in the future. All these cases were discussed at length by the Estates Committee before a firm decision was made.

Rent Act

The number of applications for Certificates of Disrepair has again declined in the same manner as previous years since 1960. It is interesting to note that several certificates were only revealed as a result of the local land charges register.

The following tables indicate the extent of the work in 1964 and a comparison can be made with 1963, 1962 and 1961.

PART I.—APPLICATIONS FOR CERTIFICATES OF DISREPAIR

	1964	1963	1962	1961
1. Number of applications for certificates ..	5	7	7	32
2. Number of decisions not to issue certificates	Nil	Nil	Nil	4
3. Number of decisions to issue certificates ..	3	3	4	31
(a) in respect of some but not all defects	2	3	3	21
(b) in respect of all defects	1	—	1	10
4. Number of undertakings given by landlords under paragraph 5 of the First Schedule	1	4	3	12
5. Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	Nil	2	Nil	3
6. Number of certificates issued	3	3	4	19

PART II.—APPLICATIONS FOR CANCELLATION OF CERTIFICATES

7. Applications by landlords to Local Authority for cancellation of certificates ..	14	6	6	25
8. Objections by tenants to cancellation of certificates	6	1	1	7
9. Decisions by Local Authority to cancel in spite of tenant's objection	1	Nil	—	2
10. Certificates cancelled by Local Authority	8	5	5	22

HOUSES IN MULTIPLE OCCUPATION

During the year the inspection of further houses in multiple occupation and reinspection of properties already known to the department as houses in multiple occupation has continued.

The numbers of newly-found houses represented to health committee during the year declined, mainly due to the obligation to continually revisit the houses which have already been represented.

Early in the year a comparatively large number of the houses that were found to be houses in multiple occupation and which required the service of notices upon them, were found upon investigation to be houses which were subject of corporation mortgages, despite the fact that the mortgagors had signed declarations that they would occupy the whole of the premises and that there would be no subletting. This led to action in the County Court in order to obtain possession of the premises. In all cases taken before County Court the Housing Inspector dealing with these houses was called upon to appear and to prove the tenancies. Certain measures have been introduced to obviate cases of this nature.

Often families in houses in multiple occupation are on the council housing lists. This has led to an interchange of information with the City Housing and Estates Department; this enables the public health inspectorate to inform an occupier of his obligations with regard to overcrowding before a family is rehoused by the Corporation. In some cases this has prevented the possibility of the same rooms becoming overcrowded again.

During the year the most helpful co-operation of the Chief Fire Prevention Officer and his staff has been received in respect of those premises in which notices have been served requiring the provision of fire escapes and smoke-stopping arrangements.

Towards the latter end of the previous year, the Health Committee selected five houses in which the owners had failed to carry out works specified in statutory notices served upon them, with the intention of implementing the Local Authority's power to carry out the work in default. This had the effect either of forcing the owners themselves carrying out the work or of causing the houses to revert to use by one family only.

During the year 61 new houses were discovered and reported to the Health Committee for their consideration. These 61 houses were occupied by 169 families and 150 single lodgers totalling 655 persons, with an average of 4 lettings per house. The highest number of occupants found in one house was 20, the house when initially inspected was without sufficient sinks, food stores, cookers and lacked a fire escape, all of which have now been provided.

Fifteen houses were found to be statutorily overcrowded, four severely so; the occupants of twelve of the fifteen houses have now been reduced to a suitable number.

The procedure of serving notices under Sections 15, 16, 19, of the Act continued during the year; it was not found necessary to introduce management orders.

Thirty six notices were served under Section 15 requiring works to be carried out by the owner to provide additional facilities and improve general conditions.

Twenty six notices were served under Section 16 requiring the provision of a secondary means of escape in case of fire.

Fifty two notices were served under Section 19, directing and fixing the limit as to the number of individuals permitted to occupy the house bearing in mind the facilities and the numbers of rooms available.

On the subsequent revisits to the premises after the expiry of the Statutory Notices, the following results were obtained:—

Section 15 Notices

15 Completed

9 Partly carried out

5 No action by the owner

7 Cancelled, the houses no longer being in multiple occupation

Section 16 Notices

- 10 Completed
- 2 Partly carried out
- 6 No action by the owner
- 8 Cancelled, the houses being no longer in multiple occupation.

The substance of notices served to provide extra facilities in 36 houses included the following items:—

Provision of ventilated food stores	..	..	..	..	150
Provision of additional lighting points	..	..	..	..	31
Provision of hot/cold water supplies	..	..	..	..	34
Provision of additional sinks	..	..	..	..	34
Provision of additional cookers	..	..	..	..	15
Provision of additional kitchens	..	..	..	..	—
Provision of additional refuse bins	..	..	..	..	23
Provision of additional water closet	..	..	..	..	1
Provision of improved ventilation	..	..	..	..	14
Provision of improved natural lighting	..	..	..	..	4
Provision of baths or fixed showers	..	..	..	..	1
Provision of wash-hand-basins	..	..	..	..	3

The lack of co-operation on the part of some of the owners and tenants continued to make it most difficult for the Housing Inspector to ascertain accurate and reliable information, at the times of visiting these premises. A considerable percentage of the houses represented to the Health Committee were owned and in many cases occupied by persons of foreign extraction, creating additional difficulties. Many of the difficulties of ascertainment could only be resolved by the Housing Inspector making numerous late night visits in order to ascertain the exact number of occupants on certain premises.

During the year the powers given to the Local Authorities under the Housing Act 1961 were strengthened by the Housing Act 1964. The new Act provides that a scheme of registration of houses in multiple occupation may commence at once. A scheme is being prepared which, if approved will make it the duty of the owner of a house in multiple occupation to register with the Local Authority, and failure to do so will constitute an offence. The new act also contains an important alternative to merely carrying out work in default; local authorities may prosecute owners who fail to comply with statutory notices served upon them requiring additional facilities. Moreover, where it appears to the local Authority that there is a danger to the safety, welfare or health of persons living in the house, they may take over the house after making a Control Order, and assume the normal duties of the owner, including the carrying out of necessary works and collection of rents.

AIR POLLUTION

Measurement of Air Pollution

Pollution 1960—64.

The annual averages, for three stations for the years 1960 to 1964 inclusive are shown in Table 1. Three other stations are maintained but since no deposit gauges exist at these sites they are not included in this summary. All figures show a drop from last year, though the reduction is least in the case of sulphur dioxide, which increased slightly from 1962 to 1963. Although the period under review—four years—is probably too short for any significant conclusions to be drawn, the continual downward trend year by year, and the drop by comparing 1960 figures with 1964 can be regarded, at least, as encouraging, if not always significant. When considering these figures due regard should be paid to the continually increasing consumption of fuel in the City. Reference to Table 7 for instance shows that

26½ million B.T.U. of heating capacity and steam boilers generating over 75,000 pounds of steam per hour are known to have been brought into operation during 1964. These additions have been approximately the same in each year from 1960 to the present time; the real increase is probably much greater because it is doubtful whether all new installations are being notified to the local authority as required by the Act.

Table I

Pollutant	City Hall					Curran Road					Moorland Road				
	1960	1961	1962	1963	1964	1960	1961	1962	1963	1964	1960	1961	1962	1963	1964
Smoke (microgrammes per cubic metre)	60	51	48	43	38	100	93	89	89	87	90	79	73	63	56
Sulphur Dioxide (microgrammes/cubic metre) ..	72	61	69	70	69	83	70	85	89	63	102	92	93	109	96
Total Deposited Matter, (tons/sq. ml./month)	13	12	14	13	10	18	15	15	13	11	33	30	20	27	23

Pollution during 1964

Table II is a summary of all results from the six stations operating in Cardiff. It will be noted that only the insoluble portion of deposited matter is shown in this table. The seasonable variation in pollution as between summer and winter is shown in Table III. Smoke is two to three times greater in winter than in summer; sulphur dioxide is doubled in the same period. Very little variation occurred between the two periods so far as deposited matter is concerned. This pattern is similar to that seen in 1963, and can be seen graphically in tables IV, V and VI.

Table II
Measurement of Atmospheric Pollution in Cardiff. January—December, 1964

	SMOKE						SULPHUR DIOXIDE						INSOLUBLE DEPOSITED MATTER Tons/sq. mi./month		
	Daily Average Microgrammes per cubic metre						Daily Average Microgrammes per cubic metre						City Hall	Curran Road	Moorland Road
January	104	173	109	71	189	93	122	108	104	62	148	108	7	9	12
February	63	332	121	42	133	61	107	119	150	54	157	87	7	11	10
March	57	79	—	32	93	55	96	106	—	66	125	82	8	8	13
April	24	51	32	13	60	27	68	88	81	52	114	58	7	8	15
May	18	25	27	11	30	17	42	25	67	33	58	39	5	8	21
June	14	28	14	11	27	16	38	19	37	28	57	35	4	2	11
July	13	35	13	8	19	12	32	26	48	27	44	28	6	9	12
August	20	25	25	10	21	19	44	27	49	30	58	45	5	8	13
September	35	33	27	14	46	—	56	28	72	45	67	—	3	7	12
October	63	90	76	—	110	—	88	47	98	—	119	—	6	8	18
November	47	66	70	37	102	37	62	62	112	54	109	31	5	7	20
December	—	107	99	48	158	74	—	100	199	66	173	77	7	10	30
Annual Average	38	87	56	25	82	41	69	63	96	47	102	59	6	8	16
AVERAGE ALL NORTH ENGLAND TOWNS, 1958/59	219						217						*9		
AVERAGE SIX LOWEST SITES, 1958/59	22						55						14		

* Average of Instruments in England and Wales

Table III
Comparison of Summer and Winter Averages. April, 1963—March, 1964

	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	Llanrumney Clinic
SMOKE microgrammes/cubic metre ..	21	48	34	13	39	21	66	147	92	41	116	59	44	98	63	27	78	40
SULPHUR DIOXIDE microgrammes/cubic metre ..	35	52	69	24	53	39	96	99	121	49	110	87	66	76	95	37	82	63
DEPOSITED MATTER tons/sq. ml.	10	11	27	—	—	—	13	15	28	—	—	—	12	13	28	—	—	—

Notification and Prior Approval

A total of 47 notifications of new installations were received during the year, of which 30 were for prior approval. They are analysed in Table VII. This is the first year in which there has been a majority of requests for prior approval and may be taken to be an indication of increased awareness of the provisions of the Act and the assistance which local authorities can give to industrialists designing new installations.

Applications were in respect of an incinerator; 40 oil burning; 4 town gas; 1 coal and 1 coke installations. This pattern follows the trend of recent years.

Table IV

Notifications of Installations of new Installations, (Clean Air Act 1956) received during 1964

Type of Appliance	NO. OF BOILERS FIRED BY				Total Number	Total added Capacity BTH/hour
	Coal	Oil	Gas	Coke		
Hot water boilers						
0 — 100,000	—	5	1	—	6	477,000
100,001 — 500,000	1	6	—	—	7	1,699,000
500,001 — 1,000,000	—	7	1	—	8	5,488,000
1,000,001 and over	—	8	1	—	9	16,618,000
Air heaters	—	4	1	—	5	2,125,000
Steam boilers	—	10	—	1	11	75,248 lbs. steam/hour
Incinerators	—	—	1	—	1	

Total Notifications 47

Total Prior Approvals 30

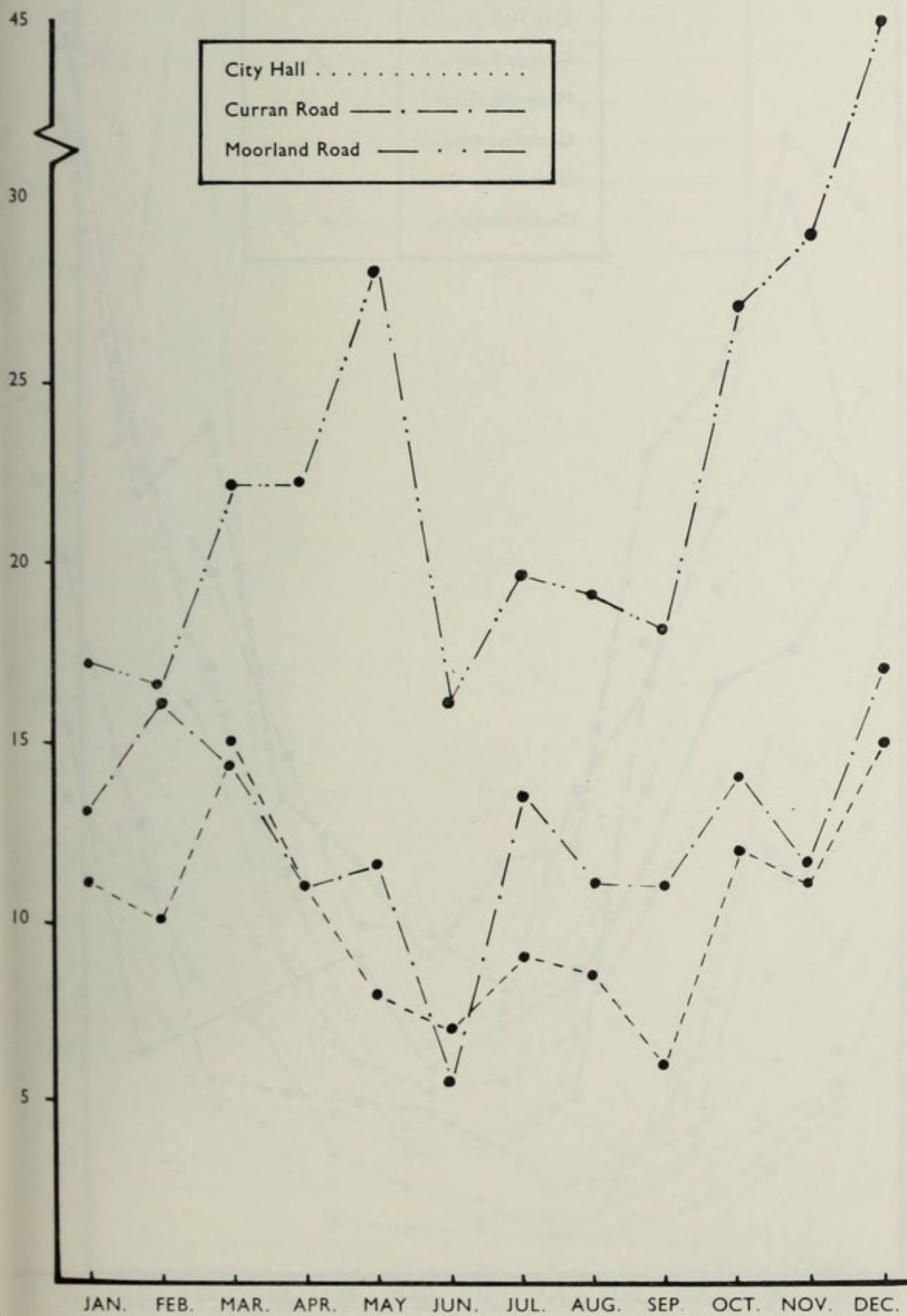
Alkali Works

The numbers of works within the city registered under the " Alkali Works Regulation " Act remains the same, namely, ceramic (2), gas coke (2) electricity (1) iron and steel (1). A close working co-operation continues to be maintained with the alkali inspectorate.

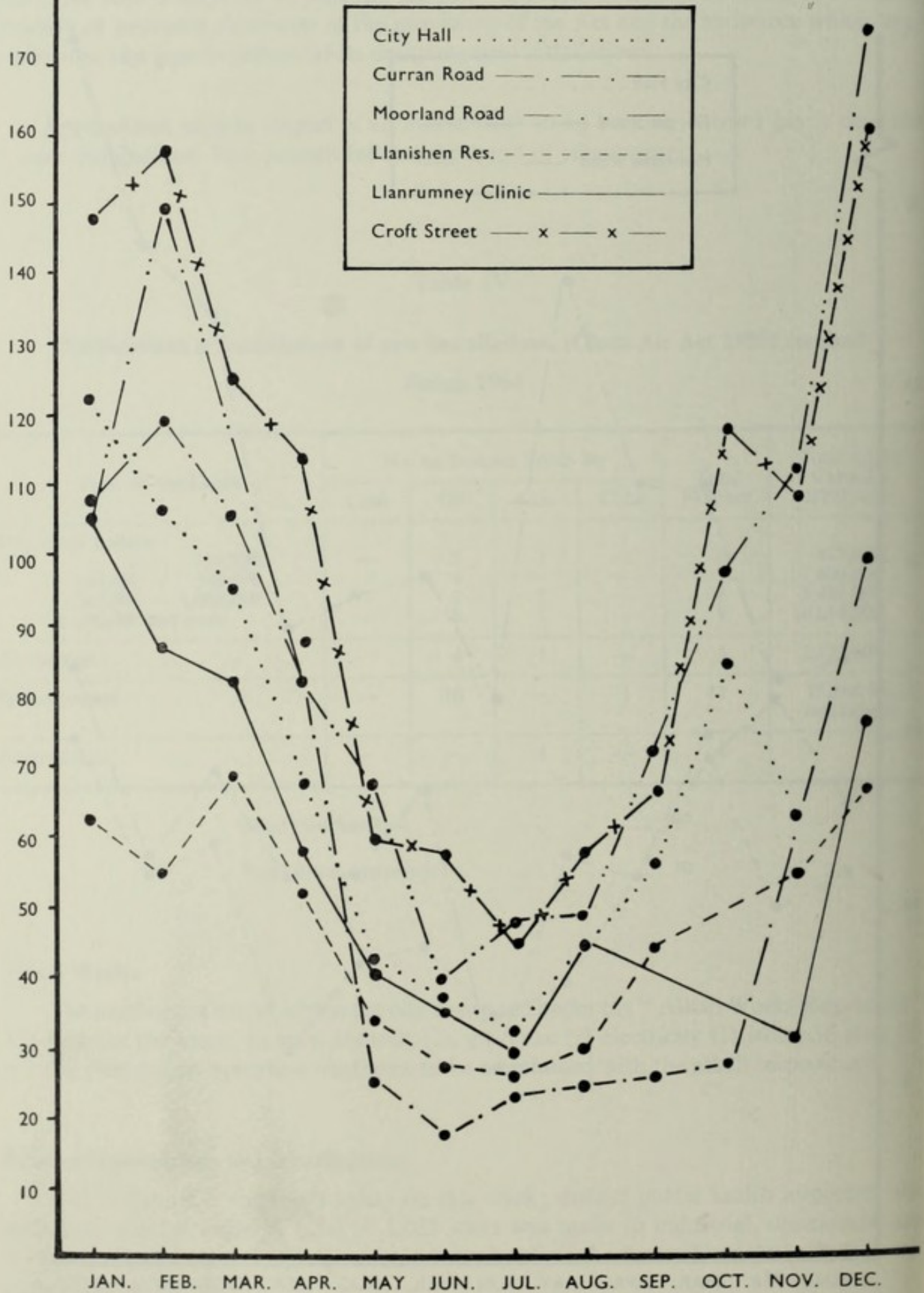
Routine Observations and Investigations

One inspector is employed solely on this work ; district public health inspectors also undertake routine visits. A total of 1,023 visits was made to industrial, commercial and domestic premises and 2,185 observations made of smoke from chimneys in factory and commercial premises.

Monthly Average Deposited Matter — Tons per sq. mi. per month

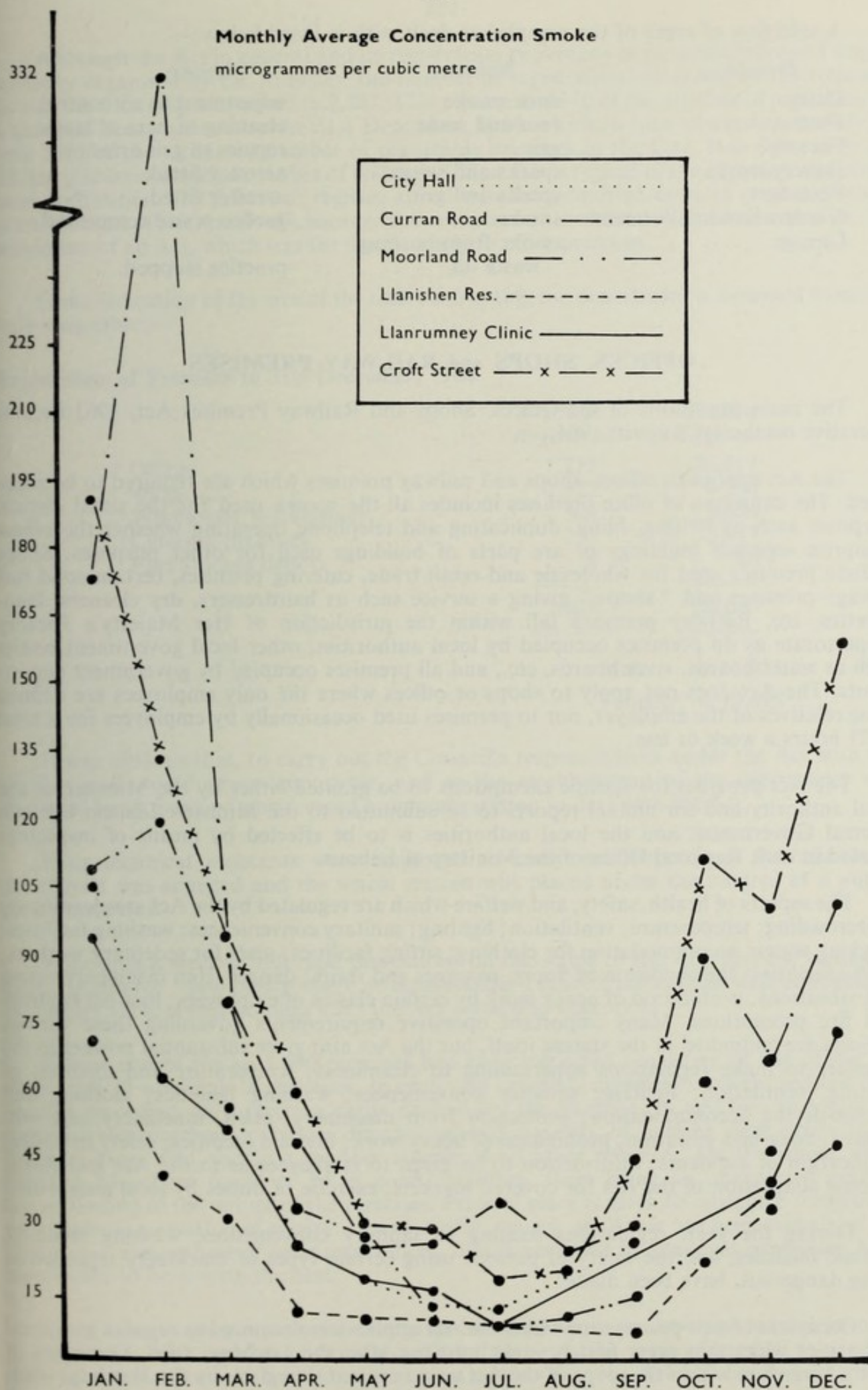


Monthly Average Concentration SO_2
microgrammes per cubic metre



Monthly Average Concentration Smoke

microgrammes per cubic metre



A selection of some of the complaints dealt with is listed below:—

<i>Premises</i>	<i>Nuisance</i>	<i>Remedy</i>
Dairy	dark smoke	adjustment to air control.
Factory	soot and smut	cleaning of base of stack.
Factory	grit	repairs to grit arrestor.
Joinery works	sparks and smuts	arrestor fitted.
Foundry	sparks and grit	arrestor fitted.
Garden fires in allotments	smoke	garden waste composted.
Garage	smoke from burning waste oil	practice stopped.

OFFICES, SHOPS and RAILWAY PREMISES

The main provisions of the Offices, Shops and Railway Premises Act, 1963 became operative on the 1st August, 1964.

The Act applies to offices, shops and railway premises which are required to be registered. The definition of office premises includes all the rooms used for the usual clerical purposes such as writing, filing, duplicating and telephone operating whether the offices comprise separate buildings or are parts of buildings used for other purposes. Shops include premises used for wholesale and retail trade, catering premises, certain solid fuel storage premises and "shops" giving a service such as hairdressers, dry cleaners, laundrettes, etc. Railway premises fall within the jurisdiction of Her Majesty's Factory Inspectorate as do premises occupied by local authorities, other local government bodies such as water boards, river boards, etc., and all premises occupied by government departments. The Act does not apply to shops or offices where the only employees are defined close relatives of the employer, nor to premises used occasionally by employees for a total of 21 hours a week or less.

The Act provides for specific exemptions to be granted either by the Minister or the local authority and for annual reports to be submitted to the Minister. Liaison between Central Government and the local authorities is to be effected by means of inspectors located in each Regional Office of the Ministry of Labour.

The aspects of health, safety, and welfare which are regulated by the Act are cleanliness; overcrowding; temperature; ventilation; lighting; sanitary conveniences; washing facilities; drinking water; accommodation for clothing; sitting facilities; seats for sedentary workers; eating facilities; the condition of floors, passages and stairs; danger from machinery; noise and vibrations; prohibition of heavy work by certain classes of employees; first-aid facilities and fire precautions. Many important operative requirements governing these various subjects are embodied in the statute itself, but the Act also gives substantial powers to the Minister to make regulations appertaining to cleanliness; temperature and methods of heating, ventilation; lighting; sanitary conveniences; washing facilities; clothing and clothes-drying accommodation; protection from machinery, plant, machinery and substances; noise and vibration; prohibition of heavy work; first-aid facilities; safety from fire; notification of accidents; information to be given to employees as to the Act and Regulations; adaptation of the Act for covered markets; exercise of duties by local authorities.

During the year, regulations relating to sanitary conveniences, washing facilities, first-aid facilities, and the safety of persons using certain types of machinery regarded as being dangerous, have been made.

Occupiers of new premises to which the Act applies were required to register with local authorities when they were first brought into use after the 1st May, 1964. Occupiers of existing premises within the scope of the Act were required to register by the 31st July, 1964.

Although the Act in general and its registration provisions in particular received ample publicity organised by the Minister, the number of registrations recorded by the requisite date in the City only amounted to 2,287. This represents 63% of the number of registrations which had been received by the 31st December, 1964, which in turn amounts probably to only 50% of the estimated number of registrable premises in the City. It is deduced from limited discussions with a number of colleagues, that this is typical of the experience of other local authorities. The failure to register appears to be committed more in respect of shop premises than offices, no doubt because the occupiers of the latter were more aware of the provisions of an Act, which was the first to apply to office premises.

Some indication of the size of the task confronting the department is obtained from the following table:—

Registration of Premises to 31st December, 1964

	<i>Premises Registered</i>	<i>Persons Employed</i>
Offices	1,773	20,417
Shops	1,322	9,706
Wholesale Warehouses	308	3,604
Catering premises	227	2,873
Fuel storage depots	8	46
	<hr/> 3,638 <hr/>	<hr/> 36,646 <hr/>
	Male = 16,953	
	Female = 19,693	

It was obvious that, to carry out the Council's responsibilities under the Act with the existing staff would prove impossible, and so the establishment of the department was increased by six persons who formed a separate section to deal with the Act.

Four technical assistants were employed to carry out inspections. An additional clerk/typist was engaged and the whole section was placed under the control of a public health inspector.

Following a week of informal discussions on the scope of the Act, and the setting of local "standards" and policy where no legal standard existed, inspections were commenced on August 17th, seventeen days after the Act came into operation.

By the end of the year 680 premises had been inspected consisting of 546 offices, 61 shops, and 73 wholesale warehouses. In each case complete inspection was carried out with positive recording on inspection cards drafted for the purpose. In addition to visual inspection, measurements of room dimensions and intensity of lighting were made in all doubtful cases, and also in a random sample of all other premises. On the whole, office premises have been found to be in good condition, there being an unexpected grading corresponding to the nature of the premises. Pride of place is given to insurance companies, with banks in a position of rivalry. Unexpectedly, in view of all that has been said about the Dickensian atmosphere of solicitors' offices, offices occupied by the legal profession have been found to be among the best.

In all cases employees welcomed the inspection and employers co-operated unstintingly. A surprisingly high number of firms were found to be on the verge of moving to new and more spacious offices. At least some occupiers confess that the Act was finally responsible for their putting into effect ideas which they have had in mind for years.

Of the 680 premises inspected, 523—or 77%—failed to comply with the Act in some respect; in many cases, the deficiency was no more serious, say, than a missing thermometer or first-aid box. In others, defects were of greater consequence; in all, 1,630 contraventions were discovered.

A total of 623 notices were served, 523 on occupiers and owner/occupiers of premises and 100 on " absentee landlords " in respect of " common parts " of buildings. The notices included the following items:—

Section						
4	To cleanse dirty premises	..	..	..	..	45
5	To abate overcrowding	..	..	..	..	11
6	To provide means of heating	..	..	..	..	3
	To abate noxious fumes	..	..	..	..	1
	To provide thermometers	..	..	..	..	375
7	To provide sufficient ventilation	..	..	..	..	30
8	To provide effective lighting	..	..	..	..	25
9	To provide additional sanitary accommodation	..	..	..	..	21
and sanitary	To mark accommodation	..	..	..	..	146
conveniences	To screen conveniences	..	..	..	..	9
regulations.	To repair or renew fittings and equipment	..	..	..	..	38
	To properly light conveniences	..	..	..	..	51
	To adequately ventilate conveniences	..	..	..	..	23
	To provide proper door fastenings	..	..	..	..	11
	To provide means of disposal of sanitary dressings	..	..	..	..	31
	To clean dirty conveniences	..	..	..	..	36
10	To provide additional washing facilities	..	..	..	..	38
and washing	To provide a hot water supply	..	..	..	..	140
facilities	To protect facilities against weather	..	..	..	..	1
regulations	To repair or renew fittings	..	..	..	..	27
	To properly light facilities	..	..	..	..	11
	To adequately ventilate conveniences	..	..	..	..	12
	To provide soap and towel	..	..	..	..	11
	To clean dirty facilities	..	..	..	..	11
12	To provide accommodation for clothing	..	..	..	..	5
13/14	To renew unsuitable seats	..	..	..	..	10
	To provide adequate seats	..	..	..	..	6
15	To provide facilities for taking of meals	..	..	..	..	1
16	To repair steps and stairs	..	..	..	..	18
	To repair floors and floor covering	..	..	..	..	63
	To repair or provide handrails	..	..	..	..	34
	To clear obstructions from floors	..	..	..	..	7
24	To provide first-aid boxes	..	..	..	..	379

Cleanliness (S.4)

Although 45 premises were found to be dirty, in the majority of cases the parts of the buildings affected were "common parts", i.e. landings, passages, and staircases, in buildings occupied by several companies. Responsibility for cleaning these parts of such buildings, which have been sadly neglected in the past, has now been placed on the owners of the buildings. In many cases, cleaning will also involve re-decoration.

Overcrowding (S.5)

The Act contains a two-part overcrowding standard. Firstly, no room shall be so overcrowded as to cause risk of injury to health. Secondly, as from the 1st August, 1967, rooms, except those to which members of the public resort, will have to provide an average of 40 square feet of floor space and 400 cubic feet of airspace for each employee (inclusive of furniture).

Only 11 of the premises inspected were found to provide space below that which will be obligatory on 1st August, 1967—considerably fewer than what was anticipated. Details of the conditions found in these premises are set out in the following table:—

Type of premises	Rooms affected	No. of persons		Floor space or cu. capacity per person
		Occupying room	Permitted	
Finance Company (office)	1	2	1	30 sq. ft.
Solicitors (office)	2	{ 5	2	21·2 sq. ft.
Airline Operator (office)	1	{ 5	3	29·4 sq. ft.
Motor factors (office)	4	{ 3	2	30 sq. ft.
		{ 5	3	24·8 sq. ft.
		{ 4	2	27 sq. ft.
		{ 2	1	36 sq. ft.
		{ 1	Nil	22 sq. ft.
Business machine manufacturer (office)	1	6	5	36 sq. ft.
Bank (office)	1	6	5	37 sq. ft.
Bookmakers (office)	1	2	1	210 cu. ft.
Accountants (office)	1	2	1	330 cu. ft.
Insurance Company (office)	1	14	11	318 cu. ft.
Typing agency (office)	1	10	8	330 cu. ft.
Wholesale Jeweller (office)	1	2	1	270 cu. ft.

As is to be expected, the amount of space per worker tends to be higher in the smaller office. It is evident that in offices as they exist today, space provision is considerably in excess of the requirements of the Act. In the offices which were the subject of a sample survey, the median average was found to be 80 square feet per person, which is double that which will become law in 1967. This is not inconsistent with the suggestions made at the time the Act was in the Bill stage, that its space standard was set too low. The subjective impressions of inspectors also support this possibility; frequently, they form the opinion that rooms are distinctly congested and over-crowded, only to discover by measurement that they are appreciably in excess of the requirements of Section 5(2). The impression that a room has barely sufficient space for its occupants only begins to be felt when it affords about 55 square feet of floor space for each employee.

Temperature (S.6)

Section 6 of the Act requires that a reasonable temperature be maintained in specified rooms in which people are employed for normal periods and prohibits any method of heating likely to cause injurious or offensive fumes. Where the work does not involve serious physical effort, a temperature of less than 16 degrees centigrade (60·8 fahrenheit) is not deemed, after the first hour, to be a reasonable temperature. A thermometer is required to be kept in a conspicuous position on each working floor. Office rooms are excluded from the requirements if the public are invited to resort thereto *and* if the maintenance of a reasonable temperature is not reasonably practicable. A similar exclusion is provided for shops where the maintenance of a reasonable temperature is not practicable *or* where it would cause deterioration of goods. The Minister may make Regulations prescribing standards, regulating methods and provision of thermometers, but has stated there is no immediate intention of making such Regulations.

Many inspections were carried out during the months of August and September and the early part of October, when heating installations were not in use.

During the remainder of the year only 3 premises were found not to be adequately heated. A variety of appliances are in use, electric heaters being the most common. Only three instances were discovered of appliances capable of producing potentially offensive

fumes; blocked flues in a central heating plant was an individual case. The remaining two cases involved a fairly common form of heating; large capacity free standing gas heaters installed in numbers disproportionate to the available airspace. This form of heating should be designed in conformity with the code of practice applied by the Gas Boards.

The statutory minimum temperature of 60·8 degree fahrenheit was criticised prior to implementation of the Act, as being inadequate for sedentary work. A survey was conducted of a ten per cent random sample of premises during the winter months, revealing that sixty per cent of rooms were at a temperature of 65 degrees fahrenheit (or more), which suggests that the statutory minimum standard is by no means onerous.

Ventilation (S.7)

Inadequacy of ventilation has not featured prominently in the premises inspected, though the service of 30 notices was necessary to remedy conditions caused usually by windows being deliberately fixed for security reasons; or due to interior rooms having been formed by sub-dividing partitions. Employees generally are found to be less concerned about inadequate ventilation than any other common defect. On the contrary, they commonly prefer to restrict means of ventilation than to use it. The question is complicated by the necessity to keep windows closed to exclude traffic noise.

Lighting (S.8)

Section 8 of the Act requires that sufficient and suitable lighting must be provided in every part of any premises in which persons are working or passing. All windows are to be kept clean and unobstructed, except that shading or white-washing to prevent glare is permissible. The Minister may make regulations prescribing standards, but none are imminent. The Minister has indicated however, that local authorities should ensure that employees can work "without undue strain or discomfort"; and that corridors, passages and stairs are sufficiently well lit to prevent accidents.

Sufficiency and suitability of lighting is a matter of quantity of illumination, prevention of glare, quality and positioning of lighting in relation to the work performed. The Illuminating Engineering Society's Code makes detailed recommendations governing all these factors. Naturally, the generality of the phraseology of section 8 does not enable direct application of the Code in all its aspects. At this stage, however, it is relevant to examine the Code in so far as it related to the fairly straightforward matter of recommended lighting values. The Society recommends the following minimum values, according to the nature of the work performed:—

General offices	..	..	..	..	30	lumens per square foot
Conference rooms	..	..	..	..	30	" " " "
Business machine operating	..	..	..	..	45	" " " "
Drawing offices:						
general	..	..	..	..	30	" " " "
boards and tracing	..	..	..	..	45	" " " "

These recommendations compare with values of 8 to 10 lumens per square foot, often quoted as the average office lighting in this country; and with 100 lumens per square foot, alleged not to be uncommon in office installations in the United States of America.

A limited survey was conducted during the inspections carried out during ordinary working hours in winter involving the measurement by light meter of lighting in a random sample of offices. Light values were found to vary from less than 5 lumens per square foot to just over 50 lumens per square foot. In 47% of the rooms the light value was 20 lumens

per square foot or less; the percentage below the Illuminating Engineering Society's recommended standard for general offices of 30 lumens per square foot was 74 per cent. On the other hand, the 'average' as measured by the median value, was just over 20 lumens per square foot—a value considerably higher than that which has been quoted as the estimated average for offices generally in this country.

From the beginning of the inspections under the Act it was decided to require employers to improve the standard of lighting where it fell below 20 lumens per square foot on the grounds that this was not an unreasonable standard having regard to the more stringent recommendations of the Illuminating Engineering Society. Notices have been served, on this basis, in respect of 25 premises. The majority of employers have accepted the notices and have acted upon them. A few, however, have questioned the legality of the notices, contending that "there are no standards". The courts can give guidance on this point, but the Minister by regulation can resolve it.

There is scope for extended field research on this subject particularly in respect of the correlation between subjective assessment of lighting conditions by the trained inspector and objective measurement by light meter. First impressions in Cardiff are that an inspector visually assesses lighting to be inadequate only when the level of illumination is considerably below that which the experts recommend as the acceptable minimum.

Sanitary Accommodation and Washing Facilities (ss. 10 and 11)

The Act requires these to be provided in accordance with the scale specified in the Sanitary Conveniences and Washing Facilities Regulations, 1964, which do not come into operation until 1st January, 1966.

The facilities are to be suitable and conveniently accessible; to be kept clean and properly maintained; to be effectively provided with means of lighting and ventilating; the washing facilities must include a supply of clean, running hot and cold water, soap, clean towels or other suitable means of cleaning or drying. The Regulations require the provision of facilities to a scale (there being a modified scale for male water closets if urinals are installed).

Out of 680 premises, only 21 premises were found to have insufficient conveniences, and only 38 premises to have insufficient wash basins. In nearly all these cases, the provision of only one additional unit was sufficient to remedy the deficiency. In the remainder of the premises the facilities were found to be materially in excess of the prescribed scales with the males being more generously provided for than females. The rate of provision of sanitary accommodation was found to be as follows, with the washing facilities corresponding:—

<i>No. of persons using each sanitary convenience</i>	<i>Percentage of premises</i>	
	<i>Male facilities</i>	<i>Female facilities</i>
1—5	45%	24%
6—10	43%	45%
11—15	9%	28%
over 15	3%	3%

The respect in which facilities were found to be most seriously lacking was the provision of hot water supply. One in five of all offices had only cold water for washing. It is a sad reflection that there are still some employers, who, on receipt of notice, are prepared to argue that the situation could be met by heating the water in the tea-making kettle.

One in five conveniences were not marked to indicate the sex of the persons for which they were provided. Employers frequently resist this requirement in respect of conveniences opening on to corridors or staircases used by members of the public, on the justifiable ground that labelling would result in the use of the conveniences by members of the public resorting to the premises with a consequent lowering of standards of cleanliness and an increase of vandalism.

Generally speaking, sanitary facilities were found to be reasonably well-maintained, though one in seventeen had broken fittings, one in thirteen were not effectively lighted, and one in fourteen were dirty. Most of the dirty, badly tended facilities were in offices in multi-occupation often neglected by owners and occupiers alike, as were the other common parts of the buildings.

Accidents

Occupiers are required to notify the occurrence of accidents which cause loss of life or absence by reason of disablement for more than three days.

During the year, 36 accidents have been notified. Falling, either on a level surface or from steps or stairs, was responsible for nearly half of the accidents and another one-third occurred whilst employees were handling articles. Two-thirds of the accidents involved female workers, who comprise 54% of the registered employees. Precise causes of the accidents are shown in the following table:—

Cause of accident	boys under 18	men	girls under 18	Women	Total
Machinery	2	1	—	—	3
Falling and slipping on level surfaces	—	3	1	4	8
Falling on or from steps and stairs	—	—	3	6	9
Jumping from stacked goods ..	—	1	—	1	2
Handling articles	2	1	1	7	11
Struck by falling objects ..	—	1	1	1	3
TOTALS	4	7	6	19	36

Investigation of the accidents led to conclusions that only 6 arose due to contraventions of the Act. 13 were caused by carelessness on the part of the worker; the remaining accidents, amounting to a half of the incidents were truly "accidental," there being no ascertainable reason or cause. It is perhaps significant that all of the notifications concerned incidents in premises occupied by firms operating on a national scale, or in premises where more than one hundred persons are employed. Either accidents did not occur in small premises, or occupiers of such premises are failing to notify.

None of the accidents notified were fatal. The nature of the injuries sustained were as follows:—

Fractures	5
Bruising	5
Laceration	10
Sprains, or Strains	16

On the evidence of the local experience it is almost certain that the number of work-days lost in a year due to accidents in shops and offices throughout the country runs well into six figures.

As a result of the first notification received, it was found necessary to institute legal proceedings in respect of a contravention of section 17(1) of the Act which requires the secure fencing of all dangerous parts of machinery.

The accident occurred at the premises of a large catering firm in the City and involved an electrically operated bread crumbing machine on which a 15 year old boy caught his fingers causing severe injuries to his hand.

The stipendiary magistrate, finding the defendants guilty of an offence, imposed a fine of £75 and awarded costs to the Corporation.

This case is thought to be the first to be taken under the new Act, and as such received a great deal of publicity in the technical journals.

SHOPS ACT, 1950

365 visits were made to shop premises during the year to ensure that the provisions of the Act relating to health, welfare and comfort of employees were adhered to.

At the end of the year a poll of shops in the Central Area was carried out as a result of representations from the Chamber of Trade to ascertain if shops required an exemption order from the half-day closing provisions. The result of the poll will be known early in 1965 and will be reported fully in the report for that year.

WATER SUPPLY

The Cardiff Corporation Waterworks department is responsible for the supply of water to approximately 114,400 separately rated dwellings and a population of 378,600 in Cardiff, Barry, Penarth, Nantgarw, Taffs Well and the Cardiff Rural District. All supply is from public water mains direct to the houses; there are no standpipes for general domestic use.

The water supply in all parts of the area has been satisfactory with respect to both quality and quantity. This statement is borne out by the reports of the Public Health Laboratory Service and the City Analyst which indicate the usual high standard. 1,346 bacteriological samples were taken, 205 from raw water sources, the remainder, 1,141 being from the treated water supply. 663 chemical samples were taken of which 188 were raw water and 475 from treated water. Both bacteriological and chemical samples were satisfactory.

In addition to these samples 78 bacteriological and 23 chemical samples of drinking water were submitted by the public health inspectors. Towards the end of the year the problem of hardness of water was encountered in a large dairy and other industrial premises. After inspection and submission of samples for analysis the owners were advised on the installation of industrial softening plants.

No problem of plumbo solvency has arisen and added precautions are taken by controlling the alkalinity of the water.

A few instances arose where complaints were received of contamination usually by suspended matter following main-cleaning operations. Immediate action was taken to investigate the cause, trace the source of contamination, increase chlorination and sterilise mains.

The fluoride content of the various supplies in Cardiff has been reported on by the City Analyst as follows:—

	<i>Fluoride Content in parts per million</i>	
Llandegfedd Treated Water (at Crofts Street)	0	070
Cartref Mixed Filtered Water	0	030
Llwynon Mixed Filtered Water	0	030

SWIMMING BATHS

There are four swimming baths owned by the Local Authority and one privately-owned pool in the City. Field tests of water for the chlorine content was carried out by public health inspectors on 124 occasions. 196 samples were taken for bacteriological and chemical examination.

A description of each bath and the results of the samples are given in the following tables:—

Swimming Baths: descriptions

Address	Description	Source of water used for filling	Method of Treatment	Frequency of water changing
Guildford Crescent (mixed)	75' x 27' x 6' 60,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly circulation
Male	60' x 22' x 6' (2' 9") 30,000 gallons			
Female	50' x 22' x 6' (2' 9") 30,000 gallons			
Empire Pool (mixed)	165' x 60' x 16' (3') 636,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly circulation
Llandaff Fields (open-air, mixed)	150' x 90' x 6' 10" (1' 8") 500,000 gallons	Mains Water	Filtration and continuous Chlorination	Ten hourly circulation
Sploott (open-air, mixed)	100' x 30' x 6' (2') 100,000 gallons	Mains Water	Filtration and continuous Chlorination	Four hourly circulation
Private School (girls) (enclosed)	70' x 30' x 8' (2' 6") 65,000 gallons	Mains Water	Filtration and continuous Chlorination	Eight hourly circulation

Swimming Baths: bacteriological examinations

BATH	No. of samples	NUMBER OF ORGANISMS	
		Coliform bacilli per 100 ml.	Faecal coli per 100 ml.
Guildford Crescent	110 1	0 3	0 2
Empire Pool	55	0	0
Sploott (open air)	10	0	0
Llandaff Fields (open air) ..	14	0	0
Private School	6	0	0

On each occasion of bacteriological sampling, tests were made for free and combined chlorine in the water thus enabling a further check to be kept on the plant.

RODENT CONTROL

Six rodent operatives are employed under the control of a rodent officer.

Sewer Maintenance Treatments

In January, 18 districts received their second treatment with fluoracetamide, 11 of the 29 districts receiving this treatment having been dealt with during 1963. All the manholes concerned were each baited with four ounces of fluoracetamide poison.

In February and April the above 639 manholes received their third fluoracetamide poison treatment. In May and June 702 manholes including 63 which completely covered 2 of the worst infested of the 29 districts, were all test baited with medium oatmeal. These treatments revealed that in two of the districts there was a complete absence of "takes" showing them to be free of infestation. The remaining 27 had 117 complete takes, 82 part takes and 503 were free.

The 199 manholes which had takes were each treated with 4 ounces of fluoracetamide poison, and a subsequent treatment was also administered during September.

Local Authority Premises

These include the City Hall, Law Courts, Cardiff Castle, public works yards, stores, workshops, depots, Roath Abattoir and all the refuse tips within the City. All these have been treated during the year, (in some cases as many as four times).

Maintenance Treatments for Business Premises

During the year the Corporation undertook to maintain treatments at various intervals for 366 business premises which include, cafes, food stores, shops, warehouses, cinemas, offices, a bakehouse, cold stores, breweries, steel works, the Central Market, garages, building sites, farms, bus depots and bingo halls. This is an increase of fourteen premises over last year and an increase in contract value of £283 15s. 0d. Contracts ranged from £2 10s. 0d. to £60 and the total income amounted to £3,761 15s. 0d.

Single treatments for 101 business premises were also carried out for the total sum of £194 0s. 0d. Thus the total income was £3,956 5s. 0d., an increase of £232 5s. 0d. over the income of 1963.

Private Dwellings

A free service is given to domestic premises, and during the year 1,151 complaints were dealt with. In all, 426 premises were treated for rats, 86 for mice. The remaining 639 complaints were investigated and where necessary test-baited without establishing the existence of any infestation. Medium oatmeal with 5% of No. 5 Warfarin was used throughout the year.

During the above operations some 115 suspect drains were reported by the operatives, (84 less than the previous year). Almost all proved to be defective after being tested.

Farms

The farms within the City, fourteen in all, have been inspected during the year. One of which was serviced by the Corporation under a contract; three other farms each received one treatment by the Corporation; the remaining ten were free from infestation.

Other activities

31 wasps nests were destroyed and the sum of £25 10s. 0d. received from this service. Two complaints were received for moles which were dealt with and £1 5s. 0d. was recovered for this service.

Pigeons still continue to be a source of nuisance in some localities. 174 adult birds, 20 young and 36 eggs were removed at night from Corporation Buildings, including the City Hall, Clare Road Depot and the District Nurses Home, Park Grove. Also 261 adult birds, 22 young and 54 eggs were removed at night from business premises and a private house, £44 5s. 0d. was recovered from this service. It occasionally happens that ringed pigeons are captured. Only four such birds were encountered and their owners traced with the co-operation of the Royal National Homing Union.

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, 1964.

	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	291	68,532	10,562	79,835	No record
II. Total number of <i>properties Inspected</i> as a result of <i>notification</i>	65	1,151	467	1,683	Nil
Number of such properties found to be infested by:—					
Common rat Major	3	Nil	Nil	Nil	3
Minor	34	426	204	667	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	16	86	64	166	Nil
III. Total number of <i>properties inspected</i> in the course of <i>survey under the Act</i> . Number of such properties found to be infested by:—	Nil	Nil	Nil	Nil	16
Common rat Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
Ship rat Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
House mouse Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
IV. Total number of <i>properties otherwise inspected</i> (e.g. When visited primarily for some other purpose) Number of such properties found to be infested by:—	330	4,590	5,629	10,549	Nil
Common rat Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
Ship rat Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
House mouse Major	Nil	Nil	Nil	Nil	Nil
Minor	Nil	Nil	Nil	Nil	Nil
V. Total inspections carried out including re-inspections	395	6,741	6,096	13,232	16
VI. Number of <i>infested properties</i> (in Sections II, III, & IV.) treated by the L.A.	53	512	268	833	4

NOISE ABATEMENT

The number of complaints of excessive noise made to the department was thirty one, an increase of six on the previous year. Some of the complaints were made in the form of petitions which meant many extra initial interviews to cover one complaint of this kind.

The complaints related to noise generated from the following sources:—

Domestic premises	..	..	..	5
Factory and machines	..	..	..	18
Vehicles	..	..	..	4
Clubs	..	..	..	3
Milk Bottles	..	..	..	1

Although the department did not institute legal proceedings in respect of noise nuisance, evidence was given in a court of appeal in respect of noise from use of a premises.

Over the year, it has been found that, during the summer months the nuisance from excessive noise is aggravated by its ability to carry on a clear night, when factory doors, etc. and house windows are left open for additional ventilation.

Complaints are then lodged by residents against factory estates some distance away. A difficulty is, that, when the complainants are interviewed a variety of noise descriptions are offered, which must first be examined before the noises actually complained of are determined. These noises must then be detected and isolated from the general industrial background before a visit can be made to the offending factory. Co-operation has been in some instances given generously, and management is fully alive to its responsibilities to the neighbouring residential population. This has entailed factory engineers joining the health inspector on his vigil at night, when background noises are reduced to a minimum, giving the Inspector a better opportunity to analyse the situation.

The noise meter has been used to advantage to indicate the intensity of a noise, and to measure any benefit obtained after the use of suitable sound proofing materials. Noise meter readings have been used comparatively, and not as yet to dictate a level of noise which could be said to be a nuisance.

This aspect of the department's duties will extend; more and more people are reacting to noise, and are seeking advice and action from the department to deal with their particular problem. It may be that in the course of time, sustained effort to reduce a number of noise sources may bring about a more acceptable overall level of noise in a particular part of the City.

FACTORIES

The number of Factories on the register numbered 1,157. Inspection of factories were carried out as a result of notification from Her Majesty's Inspector of Factories and as a routine part of the inspectors' work. Details of the work carried out is indicated in the following tables:—

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	70	30	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	965	266	12	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	156	38	2	—
TOTAL	1,191	334	14	—

2. Cases in which Defects were found

PARTICULARS (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (7)
	Found (3)	Remedied (4)	Referred to H.M. Inspector (5)	by H.M. Inspector (6)	
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	2	—	1	—
(b) Unsuitable or defective	9	9	—	2	—
(c) Not separate for sexes	3	3	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTAL	14	14	—	3	—

3. Outworkers

NATURE OF WORK (1)	SECTION 133			SECTION 134		
	No. of out-workers in August list required by Section 133(1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in un-wholesome premises (5)	Notices served (6)	Prosecutions (7)
Paper Bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
Brush making	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons etc.	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosaques, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	12	—	—	—	—	—
Lampshades	—	—	—	—	—	—
TOTAL	12	—	—	—	—	—

GENERAL ENVIRONMENTAL HYGIENE

Complaints and consequential inspections

5,229 complaints were received by the department during the year on public health matters. Individual complaints made to the district inspectors in the course of normal routine work numbered 1,773. The investigations of these complaints and the necessary subsequent action resulted in a total of 9,874 reinspections being made.

Other visits and interviews in the course of routine action totalled 16,638. Details of which are given in the corresponding sections of the report.

Drains and Sewers

The sewerage and sewage disposal system within the City has been reasonably satisfactory this year.

An outfall diversion scheme in the Eastern part of the City completed during the year to cope with overloading due to extensive housing development in the area, has proved successful. A major works scheme has been proposed for this area to provide for anticipated housing development in the Llanedeyrn district and to improve further the existing system. The report is with the Ministry of Housing and Local Government and the outcome is still awaited.

The Western area, despite new housing development, has been adequately served; relief schemes completed during the year in Cowbridge Road and Palace Road have proved adequate.

Sewerage facilities including a pumping station have been provided to serve development now taking place in the Michaelstone Road neighbourhood. As usual in the older parts of the City constant repair and maintenance work has had to be carried out to the sewers. Several schemes are in hand or under consideration for their improvement.

The Butetown main drainage scheme was completed during the year and has resulted in a considerable improvement to the drainage of the Docks area and has eliminated some of the minor sea outfalls.

Refuse Disposal

The Cleansing Superintendent reports that progress on the survey of dustbins slowed down in the latter part of the year, due to unforeseen circumstances. However, it is estimated that some 67,320 premises have been inspected since the commencement of the scheme to improve the domestic bin problem. Some 90% of premises in the City now have satisfactory bins. The inspector is at present employed in the Ely area and after completion will move to Canton and Fairwater. The public has again proved co-operative in providing new bins and it must be mentioned that the National Assistance Board proved most helpful towards old age pensioners in meeting the cost of new bins.

Publicity was given to the drive to prevent dumping of bulky household objects by advertising the free collection service in local newspapers, and every refuse vehicle bears a notice informing the public of the service together with the Cleansing Department's telephone number. Dumping still goes on however, on all waste ground. Abandoned cars are being collected at an average rate of two per week. A nominal charge of 2/6d. is made if any owner asks the department to collect. Some part of the cost is defrayed by the sale of cars to the scrap metal traders who press-bale them.

Further progress was made in replacing side loading refuse vehicles with continuous-loading compression type vehicles. 10 vehicles of the new type have replaced 13 side loaders and are a great improvement being easier to load, cleaner, safer and yielding compressed refuse which takes up less tipping space.

The Rumney refuse tip is nearing completion and the next tipping area will be at Llanedynr near the River Rhymney. The land, which is subject to flooding, will provide playing fields. Leckwith tip is proceeding and will, when finished provide school playing fields. Trouble is still being encountered with "gypsies" searching tip faces for scrap metal.

Infectious Diseases—Epidemiological Enquiries

During the year the following visits, etc., were made in connection with the investigation of infectious diseases:—

Food Poisoning	..	..	..	139
Dysentery	..	..	..	112
Poliomyelitis	..	..	..	5
Scarlet Fever	..	..	..	29
Smallpox Contacts	..	..	..	62
Other diseases	..	..	..	141
Samples: food, stools etc.	..	..	..	426

Caravans

Pontcanna licensed site

The caravan site at Pontcanna was again open during the summer months and appears to be increasingly popular with caravanners. The site caters mainly for visitors to the city including a proportion of overseas tourists and holiday makers en route for West Wales. The number of caravan days increased to 912 compared with 286 in 1963 and approximately 270 caravans used the site. A new sanitary accommodation block was completed during the year; keys are issued to individual caravanners which is appreciated by them, as this measure keeps out the general public thus preventing possible vandalism and helps to maintain a high standard of cleanliness.

The district inspector made 27 visits to the site and on no occasion was there cause for complaint.

Unauthorised sites

Unauthorised caravan sites were still a problem. Several occupiers of land removed caravans after warnings from inspectors, to avoid proceedings under the Caravan Sites and Control of Development Act, 1960.

Inspectors again co-operated with the Town Clerk's department in attempting to remove gypsies and other caravan dwellers from Corporation land in the Leckwith area. 22 further injunctions were sought but full clearance of the land was never obtained.

More earthbanks were raised and one section of the common has been fenced at a cost of £1,200. The earth banks have again proved ineffectual in excluding the caravanners as they have broken gaps in them, even on one occasion using a bulldozer taken without permission at the weekend from a local engineering firm.

The problem is definitely worsening as the numbers of caravans are growing yearly. At one time during the winter, 55 caravans were counted. Stronger measures will undoubtedly have to be taken to solve the problem until the land is developed.

Lodging Houses

Twenty-one applications were received from keepers of seamens lodging houses for renewal of their annual licences. Three were refused because of the conditions prevailing on the premises at the time of the application.

The two common lodging houses licences were also renewed.

Close supervision of all the lodging houses was maintained and a total of 123 visits were made during the year.

Keeping of Animal and Pet Shops

Seven 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	26
Piggeries and stables	4

Knackers Yards and 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.

Offensive trades are carried out at two premises carrying on the business of tripe boilers. Twenty visits during the year were made and the premises were found to be satisfactory on each occasion.

Pharmacy and Poisons

Licences were renewed in respect of 143 premises and 4 licences were issued to new applicants.

Hairdressers

The registration of hairdressers under Section 33 of the Cardiff Corporation Act, 1961 was completed in 1963. Only 23 premises applied for registration during this year. The byelaws made in 1962 were enforced in all the premises. At the present time, 234 premises are registered and regular inspections are made to ensure compliance with the bye-laws.

Rag Flock and Other Fillings Act, and Regulations 1961

Four samples, comprising 2 of cotton felt, 1 washed flock and 1 coir fibre were submitted for examination. All the samples were found to conform to the prescribed standard.

Fertilisers and Feeding Stuffs Act, 1926

Number of Samples submitted for analysis	RESULT OF EXAMINATION	
	Analysis	
	Satisfactory	Unsatisfactory
Fertiliser	8	—
Feeding Stuffs	25	1

3 samples of compound fertilisers were found to contain one or more ingredients in quantities in excess of that stated and in excess of the limit of variation permitted by regulations. Having regard to the nature of the irregularities the sale of the products was not to the prejudice of the purchaser and no official action was necessary.

1 sample of compound feeding stuff was found to be deficient in one constituent and as the variation in content also exceeded the permitted limits of variation, the sale of the product was considered to be to the prejudice of the purchaser. Further sampling at the factory was undertaken and a series of samples submitted for analysis; all were reported to be of satisfactory compositional quality.

Public Conveniences

Inspections	54
Reference <i>re</i> defects	7

Places of Public Entertainment

Visits Cinemas, theatres	41
Visits Outdoor entertainment	2
Notices served, references made	2

Care of the Aged, Etc.

Visits	85
Insanitary conditions found	17

STAFF

Four inspectors left the City to take up posts in Newport, Penybont and Cardigan.

These resignations accentuated the shortage of inspectors. The Council have continued to develop their training scheme, two further pupil public health inspectors being appointed during the year.

The following papers were given by public health inspectors during the year.

The Offices, Shops and Railway Premises to the Royal Society of Health Annual Conference.

Lectures and discussions were arranged for the following groups:—

Student Health Visitors.

Student Midwives.

National Trade Development Council course for Licensed Houses.

Young Wives Clubs.

Old Age Pensioners

Domestic Science Courses at Schools.

School Meals Service.

Youth Club.

Diploma in Public Health.

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 Orders and Regulations made thereunder.
- (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) The administration of the Animals Boarding Establishments Act 1963 and the Riding Establishments Act 1939.
- (6) Veterinary attention to livestock at Whitchurch Hospital Farm in accordance with financial arrangements between the Corporation and the Hospital Management Committee.
- (7) 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 is to control and if possible eradicate certain diseases of animals and poultry which are hazards to the agricultural economy or to public health. The Act further provides for the humane treatment of animals in transit and imposes restrictions on the import of animals, meat, poultry, semen and therapeutic substances from abroad which are liable to transmit disease. The diseases at present scheduled under the Act are Foot and Mouth Disease, Anthrax, Swine Fever, Fowl Pest (Newcastle disease), Bovine Tuberculosis, Sheep Scab, Sheep Pox, Rabies, Parasitic Mange in Horses, Rinderpest, Contagious Bovine Pleuropneumonia, Glanders, Epizootic Lymphangitis, Psittacosis and Virus Hepatitis in Poultry. Machinery also exists for the control of Brucellosis (*Abortus* and *Melitensis*). As a result of measures taken a number of the diseases mentioned are now extinct in Great Britain.

The Swine Fever Order 1963.—Two suspected cases of Swine Fever were reported neither of which were confirmed. The impact of the Order permitting slaughter of and compensation for infected and in-contact pigs, has been significant and resulted in a decrease of confirmed cases from 1,243 in 1963 to 402 in 1964.

The Regulation of Movement of Swine Order 1959.—The Order plays a prominent part in the control of Swine Fever by requiring the licensing of pigs from markets and pig dealers' premises and the retention of pigs licensed for further fattening for a period of 28 days. During the year 804 licences were received authorising the movement of 10,960 pigs to the Abattoir and City piggeries. No infringements of the Order were detected.

The Swine Fever (Infected Areas Restriction) Orders 1956 and 1958.—The Orders give the Minister power to impose temporary restrictions on the movement and marketing of pigs in defined areas following outbreaks of Swine Fever. During the year 39 such areas were declared, all but 3 of which were released from restrictions before the end of the year. The nearest Infected Areas to Cardiff were in Herefordshire and Gloucestershire.

Anthrax Order 1938.—While no cases were recorded in animals in Cardiff the disease continues to assume serious proportions throughout the country. The majority of primary cases are due to infected imported bones which are reduced to bone meal for animal feeding. In all 492 cases were found involving 545 animals. As a precautionary measure special bacteriological examinations were conducted on 1 calf, 27 sheep and 7 pigs which arrived dead or died in lairage at the abattoir.

Rabies Order 1938.—The disease has not been found at large in this country for many years due to the stringent quarantine regulations and careful observation of the Port Health Inspectors of dogs on ships. As a precaution the City Police reported 41 cases of dogs showing aggressive tendencies. All the dogs were examined for this and other communicable disease with negative results.

Foot and Mouth Disease Orders 1928 to 1938.—For the second year in succession no cases of this dreaded disease of farm livestock was recorded in this country. The freedom is no doubt due to the prohibition of certain classes of meat from infected countries and a widespread vaccination programme in some of those countries. One suspicious case was encountered in Cardiff which entailed the imposition of a stand-still on the movement of farm livestock over a five mile area. The findings proved negative and restrictions were removed forthwith.

Fowl Pest Orders 1936 to 1963.—Fowl Pest, which includes Newcastle Disease and Fowl Plague, continues to be a serious problem resulting in 2,176 outbreaks during the year. The present government policy towards the disease is a wide-spread vaccination campaign which has not yet had time to show conclusive results. The slaughter policy for control has been abandoned.

The Fowl Pest (Infected Areas Restriction) Orders 1956 and 1958.—As in the case of Swine Fever the Orders give the minister power to impose restrictions on the movement and marketing of poultry in defined areas where Fowl Pest is prevalent. Twelve such areas were declared, all of which were released from restrictions before the end of the year.

The Poultry Premises and Vehicles (Disinfection) Order 1956.—Twelve visits were made to four poultry slaughter points in the City. In one case it was necessary to serve a statutory notice to cleanse and disinfect the premises which was promptly obeyed.

Psittacosis or Ornithosis Order 1953.—The origin of one case of Psittacosis in a human being was investigated. It appeared the infection was contracted from a budgerigar which died two months prior to the enquiry. The birds in an aviary from which the budgerigar was obtained were examined with negative results.

The Live Poultry (Restriction) Amendment Order 1963.—The Order amends The Live Poultry (Restriction) Order 1957 and makes some minor alterations in the procedure for licensing poultry and poultry carcasses from premises.

The Poultry and Hatching Eggs (Importation) Amendment Order 1964.—The Order extends the prohibition contained in the 1947 Order to poultry and poultry eggs brought from Northern Ireland to Scotland.

The Tuberculosis Order 1964.—The Order revokes the Tuberculosis Order 1938 as amended in 1946 (save articles 6 and 7 thereof), the Tuberculosis (Area Eradication) Order 1950 as amended in 1954, 1955, and 1960, the Tuberculosis (Slaughter of Reactors) Order 1950 as amended in 1959. The Order reinacts the principal provisions of the previous Orders and takes into account the virtual eradication of bovine tuberculosis from this country.

The Tuberculosis (Slaughter of Reactors) Order 1950 to 1959.—The Orders revoked by the preceding Order, were in operation for most of the year. Under the Order 12 cattle which reacted to the tuberculin test in Glamorgan and Monmouthshire were slaughtered at Roath Abattoir and detailed post-mortem reports together with laboratory material were sent to the Ministry of Agriculture, Fisheries and Food. The figure compares with 77 such cases in the previous year.

The Tuberculosis (Compensation) Order 1964.—The order revokes articles 6 and 7 of the Tuberculosis Order 1938 and the whole of the Tuberculosis (Compensation) Order 1950 as amended in 1959. It prescribes the scale of compensation payable for cattle slaughtered as a result of reactors to the tuberculin test as well as cattle slaughtered because they are affected with clinical tuberculosis.

The Diseases of Animals (Waste Foods) Order 1957.—Sixty-two visits were made to pig and poultry keepers premises in connection with the Order. At the end of the year 46 licences were in existence for boiling plant and equipment at the premises. No new licences were granted during the year.

The Transit of Calves Order 1963.—The Schedule to the Order came into operation on the 1st January, 1964. It makes provision for the construction of calf-carrying vehicles and for the distribution of calves on the vehicles.

The Exported Animals Protection Order 1964.—The Order provides for the humane handling of animals immediately before and during transport by sea and air from Great Britain to any place outside the United Kingdom, the Channel Islands, the Isle of Man or the Republic of Ireland. It also requires a veterinary certificate of fitness to travel before the animals are loaded.

The Markets (Protection of Animals) Order 1964.—The Order provides for the protection of Cattle, Sheep, Goats, and Pigs from unnecessary suffering while exposed for Sale in markets or awaiting removal afterwards. The part of the Order relating to feeding and watering is postponed until the 16th January, 1965 and the part relating to the segregation of horned cattle is postponed until the 16th January, 1966.

The Animals (Landing from Channel Islands, Isle of Man, Northern Ireland and the Republic of Ireland) Orders 1955 to 1963.—During the year 45 licences were received authorising the movement of 650 Irish cattle to the Abattoir from the ports of Fighguard, Holyhead, and Birkenhead. Cattle in the Republic of Ireland are not yet fully attested and the consignment of untested cattle from there is only permitted to Selected Abattoirs where isolation facilities are adequate.

The Warble-Fly (Dressing of Cattle) Revocation) Order 1964.—Owing to the difficulty of enforcement and the increased use of systemic insectides the Warble-Fly (Dressing of Cattle) Order 1948 and 1960 were revoked.

The Importation of Carcases and Animal Products (Amendment) Order 1964.—The Order alters the provisions of the Importation of Carcases and Animal Products Order, 1954 so as to make it illegal to land in Great Britain dry sausage (Salami), fully cured bacon and ham, and sausage casings, originating in France, without a licence.

The Importation of Animal Semen (Amendment) Order 1964.—The Order amends the 1955 Order which prohibits the importation of Semen of certain animals and poultry without a licence. Horses are added to the list of animals to which prohibition applies, and swine are excluded.

The Diseases of Animals (Seizure of Carcasses, etc.) Order 1964.—The Order empowers Inspectors of the Ministry and of Local Authorities to seize and dispose of the carcasses, fodder, litter or fertilizers (and in the case of poultry, eggs) of specified animals and poultry which involve a risk of spreading Foot and Mouth disease or Swine Fever, or in the case of poultry Fowl Pest.

The Diseases of Animals (Miscellaneous Fees) Order 1964.—The Order prescribes an amended Schedule of fees payable in respect to the landing in Great Britain from countries out of Great Britain, and the movement into Scotland from any other part of Great Britain, of poultry and hatching eggs.

Summary of Outbreaks of Scheduled Diseases

	1964	1963	1962	1961
Anthrax	492	330	340	255
Foot and Mouth Disease ..	Nil	Nil	5	103
Fowl Pest	2,176	2,288	3,384	1,240
Swine Fever	402	1,243	1,874	1,071

The Protection of Animals Acts 1911 to 1927

Veterinary services under the Acts were given at the request of Cardiff City Police. Examinations were made of 3 horses, 39 dogs, 3 cats and 1 sheep which were injured in road accidents in the City. Of these 1 horse, 21 dogs and 3 cats were destroyed and the remainder treated for injuries.

The Riding Establishments Act 1963

The one establishment in the City was regularly visited and the horses used for riding were found fit for the purpose.

The Animal Boarding Establishments Act 1963

One premises was licenced for the boarding of dogs. It was regularly visited and found to be maintained in good condition.

Slaughter of Animals Act 1958

During the year 1 new licence and 64 renewals of licences were granted by the City Council to slaughtermen authorising them to stun or slaughter animals. No infringements of the Act were observed.

The Meat (Treatment) Regulations 1964

The Regulations prohibit the addition of any substance mentioned in the Schedule to the Regulations, to raw unprocessed meat intended for human consumption.

Veterinary Services to Other Departments

Cardiff City Police	Eighty-seven visits to animals.
Whitchurch Hospital Management Committee ..	Twenty-four visits to animals.
Parks Department	One visit to a sheep.

MEAT INSPECTION STATISTICS

CARCASSES AND OFFALS INSPECTED AND CONDEMNED IN WHOLE OR PART

(Form as set out by the Ministry of Health)

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	8,632	1,286	2,080	77,466	28,353	Nil
Number Inspected	8,632	1,286	2,080	77,466	28,353	Nil
ALL DISEASES EXCEPT TUBERCULOSIS						
Whole Carcases Condemned	Nil	11	16	116	32	Nil
Carcases of which some part or organ was condemned	200	140	18	1,550	1,600	Nil
Percentage of number inspected affected with disease other than Tuberculosis or Cysticercosis	2.32	11.73	1.63	2.15	5.75	Nil
TUBERCULOSIS						
Whole Carcases Condemned	Nil	1	Nil	Nil	Nil	Nil
Carcases of which some part or organ was condemned	Nil	4	Nil	Nil	138	Nil
Percentage of number inspected affected with Tuberculosis	Nil	0.39	Nil	Nil	0.48	Nil
CYSTICERCOSIS						
Carcase of which some part or organ was condemned	12	4	Nil	Nil	Nil	Nil
Carcases submitted to treatment by refri- geration	12	4	Nil	Nil	Nil	Nil
Generalized and Totally Condemned	Nil	Nil	Nil	Nil	Nil	Nil
Percentage of number inspected affected with Cysticercosis	0.14	0.31	Nil	Nil	Nil	Nil

ANIMALS SLAUGHTERED—COMPARATIVE TABLE

	1964	1963	1962	1961	1960	1959	1939
Cattle	9,918	13,182	12,041	14,295	11,852	8,900	6,693
Calves	2,080	4,168	6,833	9,113	8,785	6,626	7,788
Sheep	77,466	74,545	83,321	98,710	75,740	88,932	53,632
Pigs	28,353	28,839	26,371	26,895	28,036	25,159	25,257
Total	117,817	120,734	128,566	149,013	124,413	129,617	93,370

INCIDENCE OF TUBERCULOSIS

				Microscopic Lesions	Percentage	Percentage Corresponding Period 1963
ANIMALS SLAUGHTERED						
Sheep	77,466			Nil	Nil	Nil
Pigs	28,353			138	0.49	0.37

INCIDENCE OF TUBERCULOSIS—*continued*

TOTAL CATTLE SLAUGHTERED (Including Attested, Reactors and Irish Cattle)					
Cows	..	..	1,286	6	0.46
Steers/Heifers	..	..	8,626	1	0.01
Bulls	..	..	6	Nil	Nil
Calves	..	..	2,080	Nil	Nil
ATTESTED CATTLE					
Cows	..	..	1,276	4	0.31
Steers/Heifers	..	..	7,974	Nil	Nil
Bulls	..	..	6	Nil	Nil
Calves	..	..	2,080	Nil	Nil
KNOWN REACTORS AND DANGEROUS CONTACTS (Sent in by the M.A.F.F.)					
Cows	..	..	10	2	20.0
Steers/Heifers	..	..	2	1	50.0
Bulls	..	..	—	Nil	Nil
Calves	..	..	—	Nil	Nil
IMPORTED IRISH CATTLE					
Steers/Heifers	..	..	650	Nil	Nil

INCIDENCE OF CYSTICERCOSIS

Cattle Slaughtered			Number of cases of CYSTICERCOSIS		Percentage of Infestation	Total Percentage	Percentage for 1963
Cows	..	..	1,286	4	0.31	0.16	0.09
Others	..	..	8,632	12	0.14		

INCIDENCE OF HYDATID CYSTS

Animals Slaughtered			Number of Cases of HYDATID CYSTS		Percentage of Infestation	Percentage for 1963
Cattle	..	..	9,918	87	0.88	—
Sheep	..	..	77,466	819	1.05	—

TABLE SHEWING CAUSES OF REJECTION OF CARCASSES AND PART CARCASSES

	CATTLE		CALVES		SHEEP		PIGS	
	Total	Part	Total	Part	Total	Part	Total	Part
Tuberculosis Emaciation	1	—	—	—	—	—	—	138
Oedema Emaciation	8	—	—	—	67	—	3	—
Traumatism	—	24	—	2	—	12	—	80
Bonetaint	—	54	—	—	—	3	—	—
Decomposition	—	7	3	—	7	24	1	93
Moribund	—	—	—	—	29	—	7	—
Fevered	—	—	2	—	3	—	1	—
Jaundice	—	—	1	—	—	—	—	—
Immaturity	—	—	5	—	—	—	—	—
Pyaemia	—	—	3	—	—	—	—	—
Arthritis	—	—	—	—	—	4	—	5
Abscesses	—	1	—	—	2	33	6	181
Erysipelas	—	—	—	—	—	—	1	—
Pleurisy, Acute, Septic	—	—	2	—	3	—	—	—
Lympho-Sarcoma	1	—	—	—	—	—	—	—
Fibrosis	—	—	—	—	—	1	—	—
Multiple Tumours	1	—	—	—	—	—	—	—
Toxaemia	1	—	—	—	—	—	—	—
Pneumonia Acute, Septic	—	—	—	—	5	—	3	—
TOTAL	12	86	16	2	116	77	22	497

CONDEMNATION CERTIFICATES

585 Certificates were granted in respect of condemned carcasses, part carcasses and offals at Roath Abattoir and Meat Market during the year 1964.

NUMBER OF ORGANS REJECTED

	Cattle	Calves	Sheep	Pigs
HEADS (including tongues)				
Tuberculosis	2	—	—	138
Other Conditions	94	4	—	—
TONGUES				
Tuberculosis	—	—	—	—
Other Conditions	42	—	—	—
LUNGS				
Tuberculosis	4	—	—	—
Other Conditions	311	—	—	—
HEARTS				
Tuberculosis	4	—	—	—
Other Conditions	133	—	—	—
SKIRTS				
Tuberculosis	3	—	—	—
Other Conditions	154	—	—	—
LIVERS				
Tuberculosis	—	—	—	—
Other Conditions	1,910	1	2,554	926
PLUCKS				
Tuberculosis	—	—	—	—
Other Conditions	—	14	863	1,397
TRIPES				
Tuberculosis	—	—	—	—
Other Conditions	15	—	—	—
TAILS				
Tuberculosis	—	—	—	—
Other Conditions	102	—	—	—

WEIGHT OF MEAT AND OFFALS REJECTED FROM ANIMALS SLAUGHTERED AT
ROATH MARKET

	Tons	Cwts.	Qrs.	Lbs.
12 Carcases Beef	2	7	3	0
16 Carcases Veal	—	5	2	19
116 Carcases Mutton	1	18	2	12
32 Carcases Pork	1	6	3	12
86 Part Carcases Beef	2	1	0	10
2 Part Carcases Veal	—	—	—	11
77 Part Carcases Mutton	—	7	0	14
444 Part Carcases Pork	2	6	3	2
Beef Offal	2	7	3	21
Calf Offal	—	—	2	3
Sheep Offal	1	12	0	19
Pig Offal	2	9	0	10
TOTAL	17	3	2	21

WEIGHT OF MEAT AND OFFALS REJECTED EX—OTHER SLAUGHTERHOUSES

	Tons	Cwts.	Qrs.	Lbs.
53 Part Carcases Pork	—	5	3	26
Beef Offal	—	—	1	16
Pig Offal	1	16	0	10
TOTAL	2	2	1	24

TOTAL MEAT AND OFFAL REJECTED DURING 1964

19 Tons 6 Cwts. 0 Qrs. 17 lbs.

The Abattoir and Meat Market (General)

The year proved difficult for the beef section of the Meat Trade. Consumer resistance to the consistent high prices of beef was reflected in a reduced number of cattle slaughtered. The enhanced Continental prices, expected to last another year, resulted in the export of large quantities of live cattle and carcass beef which produced a highly competitive market. The demand is now for young cattle finished inside two years which entails a quick turnover difficult to maintain with a limited number of calves coming from declining dairy herds. Sheep slaughtered were up on last year and pigs remained nearly static.

The improving animal health position in the country is shown by a reduction in the weight of carcasses and offals, found unfit for human consumption by about 10 tons compared with the previous year. Bovine Tuberculosis, the greatest cause for condemnations in former years, is now virtually non-existent. During the year 4 cases were detected in attested cattle giving an overall percentage of 0.03. The affected animals were traced back to the farms of origin where the Ministry of Agriculture, Fisheries and Food had further tuberculin tests conducted on the remaining cattle.

Towards the end of the year strong pressure was exerted on the Corporation by the Ministry of Agriculture, Fisheries and Food to bring the abattoir up to regulation standard by the 1st January 1965, thereby incurring an estimated expenditure of £12,350. A meeting between the Corporation and Ministry Officials succeeded in gaining a postponement of the appointed day from the 1st January 1965 to the 1st January 1966 on condition that the Corporation would ensure the erection of a new abattoir at Dumballs Road by the latter date. The City Architect proceeded with all haste to meet the commitment and plans submitted by him were, after some amendment approved by the Ministry. Following approval of the plans and estimated cost by the City Council work on the Dumballs Road Site was scheduled to start in January 1965.

The new abattoir is designed on the most modern system of slaughter and mechanised dressing lines, whereby all work is carried out on carcasses in the suspended position. Advantage is taken of site conditions to allow the dropping by chute of hides, stomach and intestines and other inedible material from the slaughter floor to a ground floor for sorting and despatch. Adequate arrangements are made for ritual slaughter which is expected to be regionalised at the abattoir. Ample chilling-room facilities, incorporating the modern quick-chill process, will be provided. A neatly placed and accessible office and administration block, surmounted by a flat, forms part of the general buildings.

The Report of the Verdon Smith Committee of Inquiry into Fatstock and Carcase Marketing and Distribution was published in the early part of the year but no Government decision was reached on it by the end of the year. The principal recommendations of the

Committee is the formation of a Fatstock and Meat Authority on a Statutory basis in preference to a Meat Marketing Board advocated by the National Farmers' Union of England, Scotland and Northern Ireland. The recommended functions of the Authority are many and diverse but the main ones of interest to Local Government are:—

- (a) To exercise supervisory powers over, and in some respects control, the fatstock auctions.
- (b) To exercise supervisory powers over, and in some respects control, slaughterhouses.
- (c) To develop and direct a National Meat Inspection Service.

The implementation of any or all of the functions would entail a transfer of duties from Local Authorities to the Fatstock and Meat Authority, while Meat Inspection at slaughterhouses would become a National Service under the Authority.

It is not clear to what extent the Authority would interfere with administration of Public Slaughterhouses at present under the control of Local Authorities.

Staff

Mr. R. B. Poole, Public Health Inspector, engaged as full-time Meat Inspector at the abattoir, retired after nearly 45 years service under the Corporation.

Mr. W. Hardwick, a holder of the Royal Society of Health Certificate in Meat Inspection, was transferred from the post of Weighman/Clerk to fill that vacated by Mr. Poole's retirement as Authorised Meat Inspector.

Mr. J. Barry was appointed to fill the vacancy created by Mr. Hardwick's transfer.

REPORT OF THE CITY ANALYST FOR 1964

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 1964.

My appointment as City Analyst commenced in March, 1964 and my first year's work for the City of Cardiff, although not quite a complete year has been a rewarding and interesting experience for me.

I would like to take this opportunity of thanking the Health Committee and the Medical Officer of Health for their interest and support in all matters connected with the running of the laboratory.

I would also like to express my thanks to Mr. R. H. McKinlay, Deputy City Analyst and to all members of the laboratory staff for the excellent work which has been carried out.

The total number of samples examined during the year was 6,148. Of these 5,367 were for the City of Cardiff and 781 were for the County Borough of Swansea.

The following summary shows the extent of the work undertaken for both the Cardiff and Swansea Authorities:—

For the City of Cardiff:—

Under the Food and Drugs Act	1,112
Under the Milk (Special Designation) Regulations ..	51
For the Port Health Authority	71
Under the Fertilisers and Feeding Stuffs Act	34

For the Public Health Department:—

Atmospheric Pollution:—

Deposit Gauge Analyses	84
Sulphur Dioxide Determinations	1,593
Smoke Measurements	1,588
Foods	38
Waters	35
Other articles	42
For the City Architects Department	1
For the Parks Department	3
For the City Surveyors Department	36
For the Transport Department	4
For the Waterworks Department	668
From other sources	7
	— 5,367

For the County Borough of Swansea:—

Under the Food and Drugs Act	532
For the Port Health Authority	1

For the Public Health Department:—

Atmospheric Pollution:—							
Deposit Gauge Analyses	..	..	..	..	..	..	70
Lead Peroxide Cylinders	..	..	..	..	..	..	35
Waters	..	..	..	..	..	..	24
Other articles	..	..	..	..	..	..	2
For the Waterworks Department	..	..	..	..	..	..	93
For the Weights and Measures Department	..	..	..	..	..	..	22
From other sources	..	..	..	..	..	..	2
							<hr/> 781
							<hr/> 6,148

A separate report giving full details of the work carried out for the County Borough of Swansea is made annually to the Swansea Health Committee.

SAMPLES SUBMITTED UNDER THE FOOD AND DRUGS ACT

During the year a total of 1,112 samples were submitted for analysis under the Food and Drugs Act 1955 by the City of Cardiff. These comprised milks (527), foods (554) and drugs (31). The table at the end of this section summarises the total number of samples received and lists those reported as unsatisfactory.

MILK

Of the 527 samples of milk submitted, 452 were samples of ordinary milk and 75 were Channel Islands Milks. The samples were taken by the Official Sampling Officer of the Chief Public Health Inspector's department at many different points within the City. They included samples of pasteurised and sterilized milk taken at the point of retail sale, and also raw milks during transit from farms or at the point of delivery to dairies prior to bulking, processing and bottling.

Ordinary Milk.—Thirty samples of ordinary milk were reported as being deficient in fat. In each case however, these samples were raw milks from single churns prior to bulking. They were morning milks and the calculated average fat of the bulked milk was found to be above the presumptive minimum of 3 per cent so that the mixed milk as sold to the public was satisfactory in each case.

115 samples of milk (compared with 117 in 1963) had non fatty solids of less than 8.5 per cent (the presumptive minimum) but these samples had satisfactory freezing points showing that no added water was present. The Deficiency in these cases was due to natural causes, the cows concerned producing milk of somewhat poor quality.

One sample contained a trace of added water (1%).

Channel Islands Milk.—Milks sold under this designation are required by the Milk and Dairies (Channel Island and South Devon Milk) Regulations 1956 to contain not less than 4 per cent of fat.

As with ordinary milks, sampling has included consignments of churns of raw milk prior to delivery at the processing plant. Seventeen samples taken during one quarter were found to be below the 4 per cent minimum for fat. These were raw morning milks accompanied by much richer evening milks which when bulked together before processing would

have had fat contents above the minimum standard. In one case only was it found that the calculated average fat of the bulked was slightly below the standard. Follow-up sampling of the same source was then found to have a bulked average figure which was satisfactory.

None of the Channel Islands Milks contained any added water.

Out of the total of 527 samples of milk examined, 48 were reported as being of unsatisfactory composition. This apparently high milk adulteration figure of 9.1 per cent which arises from the fat deficiencies found in parts of consignments may give a false impression of the true state of affairs. The value of sampling raw milk before bulking lies mainly in the detection of the addition of water which might otherwise pass unnoticed in the final processed milk. In this respect it is reassuring to note that only one instance of added water was recorded in the whole year and in this case only a trace (1%) was present.

Average Composition of Milk Samples.—The following table shows the average composition of all the milk samples including Channel Islands milk submitted during the year.

The average compositions are calculated from the results of all samples.

Average Composition of Milk Samples 1964

Variety	Number of Samples	Fat per cent	Non-fatty solids per cent	Total Solids per cent
Channel Islands Milk	75	4.39	8.91	13.30
Other Milk Samples	452	3.58	8.58	12.16
All Milk Samples	527	3.70	8.63	12.33

Milk Samples other than Channel Islands Milk Monthly Variations 1964

Month	Number of Samples	Fat per cent	Non-fatty solids per cent	Total Solids per cent
January	25	3.71	8.50	12.21
February	21	3.60	8.34	11.94
March	14	3.46	8.46	11.92
April	33	3.36	8.50	11.86
May	40	3.23	8.71	11.94
June	32	3.33	8.60	11.93
July	60	3.45	8.46	11.91
August	45	3.57	8.59	12.16
September	88	3.80	8.63	12.43
October	65	3.70	8.70	12.40
November	10	3.78	8.69	12.47
December	19	3.80	8.61	12.41
Whole Year ..	452	3.58	8.58	12.16

These variations are similar to the results of the last six years as may be observed in the next table where the average composition of the ordinary milk samples of this year are compared with the figures for the years 1935-1963.

Average Composition of Milk Samples (excluding Channel Islands Milk)

1935-1964

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
1964	3.58	8.58	12.16

Antibiotics in ex-farm Milks

During the year 207 raw milks submitted for chemical examination for composition were also tested for the presence of antibiotics using the T.T.C. test. This test is a microbiological assay of a chemical contaminant using *Streptococcus thermophilus* as the sensitive organism and under suitable conditions can be used to detect the presence of penicillin at a level of 0.02 units per ml. Other antibiotics and substances which inhibit the growth of the organisms are also detected but by using penicillinase the test is made specific for penicillin.

One sample contained penicillin, and this at a level of 0.1 units per ml. Investigation by the sampling officer confirmed that the farmer concerned had used a penicillin preparation for mastitis treatment but had not withheld the milk for a sufficient period (usually at least 48 hours).

All of the other samples tested gave negative reactions for antibiotics and other inhibitory substances.

Sterilized Milks

Under the Milk (Special Designations) Regulations sterilized milks are required to satisfy the prescribed turbidity test indicating that they have been fully heat treated.

The 51 samples examined during the year were found to be satisfactory.

ARTICLES OTHER THAN MILK

During the year 585 articles other than milk were examined under the Food and Drugs Act. Of these 53 (9·1 per cent) were unsatisfactory or showed some irregularity. This apparently high figure is partly due to the fact that in a number of cases further samples of the same article were examined to ascertain whether the defect was general or confined to a single sample.

The unsatisfactory samples comprise those having labelling faults and compositional irregularities. Some details are given below.

Labelling Irregularities

Bread.—Two samples of the same brand of wrapped bread were labelled as “protein enriched.” The Bread and Flour Regulations, 1963, however do not permit claims of added protein. Subsequent labels correctly described this type of bread as gluten bread. This is a permitted description where the protein content is not less than 16%, calculated on the dried matter. The sample concerned contained 18% of protein.

Canned Fruit Salad.—The labels of the two samples carried a voluntary list of ingredients which was incomplete as colouring matter in the cherries was not included. In one case also the ingredients were not in the order stated. The current Labelling of Food Order does not require a statement of ingredients for products, such as these, which were canned in the United Kingdom. However where voluntary declarations are made, they should be complete.

Canned Oyster Soup claimed the ingredients to be rich in natural iodine but failed to state the actual content of iodine, as required by the Labelling of Food Order.

Shrimp Flavoured Slices consisted chiefly of tapioca with fragments of shrimps and included the words “gourmet powder” in the list of ingredients. This description did not indicate the true nature of this constituent.

Compositional Irregularities

Canned Beef with gravy and **Canned Casserole Steak** (five samples of same brand) contained amounts of meat ranging from 62 to 71 per cent whereas the recommended minimum for this product is 75 per cent.

Canned Chicken in Jelly. These samples contained 65 and 67 per cent instead of the recommended minimum of 80 per cent.

Canned Lunch Tongue. Two samples contained 80 and 85 per cent instead of the minimum recommended for canned meat of 95 per cent. These products would be more properly described as Lunch Tongues in Jelly and would then have complied with the proposed 80 per cent standard.

Among the category of canned meat products for which the Food Standards Committee in their 1962 report recommended a minimum standard of 35 per cent, the following did not reach this level:—

Canned Irish Stew (4 samples) contained 29, 31, 31 and 33 per cent of meat;

Canned Lamb Chops with Vegetables and Gravy (2 samples) contained 27 and 30 per cent;

Canned Ready Dinner contained 30 per cent of meat.

Meat Pies. Two samples of Steak and Kidney Pie contained 17 and 18 per cent of meat compared with a provisional standard of 20 per cent; A Potato, Onion and Meat Pie contained 9 per cent of meat instead of not less than 10 per cent. The Food Standards Committee Report on Meat Pies, 1963 and the Proposals for Regulations 1964 recommend minimum standards of 25 per cent and 12½ per cent of meat for meat pies and meat and vegetable pies respectively.

Sausages. Of the 48 samples analysed during the year, 11 were reported against. The recognised minimum standards for meat content are 50 per cent for beef and 65 per cent for pork. Of this total meat content, at least half should consist of lean fat free meat.

Of the Beef sausages, 3 samples contained 16, 23 and 23 per cent of lean meat. Three samples contained 43, 45 and 47 per cent of total meat (including fat) and one sample contained a very high proportion of fat.

Of the Pork Sausages, 2 samples contained 22 and 24 per cent of lean meat and two contained 51 and 57 per cent of total meat.

The average meat content of all the samples examined is given in the following table:—

	No. of Samples	PERCENTAGE		
		Total Meat Content	Lean Meat Content	Fat Content
Beef Sausages	24	57.6	32.0	25.6
Pork Sausages	24	68.6	36.5	32.1

These results include the samples considered to be unsatisfactory which were almost entirely confined to the production of one local manufacturer. When these are excluded from the data the average figures for meat content are those shown below.

	No. of Samples	PERCENTAGE		
		Total Meat Content	Lean Meat Content	Fat Content
Beef Sausages	19	59.9	34.5	25.4
Pork Sausages	20	70.8	39.0	31.8

Sausages are a popular article of food and make a not insignificant contribution to the meat intake of the average person. As such the maintenance of a good standard is important.

The survey carried out during the year shows that apart from the small number which were below standard (from a single manufacturer and including repeat samples) the average meat content of both beef and pork sausages is being well maintained in the City. The figures refer to both nationally branded articles and the products of small butchers and the results obtained are similar to those in other parts of the country.

The unsatisfactory samples were slightly cheaper than any others. Otherwise there was no marked relationship between the meat content found and the price per lb. The price range for the satisfactory samples was from 2/- to 2/10d. per lb. in the case of beef sausages and from 2/6d. to 3/6d. per lb. for pork.

Cheese. Twenty-five samples of cheese, processed cheese and cheese spread were analysed during the year. In spite of efforts for many years to provide legal standards for cheese products these are still lacking in this country. However, official recommendations have been made by the Food Standards Committee and Proposals for Regulations were put forward in the year under review. It is therefore hopeful that the long awaited standards will soon appear. When examining cheese products they are considered in the light of the proposed standards and a few samples, all from the same source, did not meet these requirements:—

Process Swiss Cheese with Ham (3 samples) and **Process Swiss Cheese with Salami** (2 samples) contained 7·8, 6·8 and 7·5 per cent, and 7·3 and 6·7 per cent of water, respectively in excess of the 45 per cent maximum proposed for processed cheese. These products would be more properly described as Cheese Spreads, for which a higher water content (60 per cent) is envisaged.

A Process Swiss Cheese ("Swissy Tilsit") was marked 45% m.g. which presumably referred to the percentage of fat in the dry matter, whereas according to the recommendations a declaration of fat content on the article as sold is preferable.

Gelatine. This sample was of inferior quality with regard to setting strength and did not meet the requirements of the Food Standards (Edible Gelatine) Order in this respect.

Non-brewed Condiment. This sample contained 3·6 per cent of acetic acid instead of at least 4·0 per cent.

Preserves. Four samples of imported Raspberry Jam contained only 20 per cent of fruit (calculated on average figures) instead of the 30 per cent minimum required by the Food Standards (Preserves) Order.

Spirits. Of the four formal samples taken during the year, one of Gin and one of Brandy were found to be 38·9 and 40·2 degrees under proof respectively. Genuine spirits should not be of lower alcoholic strength than 35 degrees under proof i.e. contain not less than 65 per cent of proof spirit. The samples concerned had therefore been adulterated by the addition of water to the extent of at least 6 and 8 per cent respectively.

The other two samples, Whisky and Brandy each contained 70 per cent of proof spirit.

Drugs

The sampling of drugs has been relatively neglected in the past by many authorities. With the ever increasing variety of new medicinals, including the proprietary preparations freely available to the public, it is important to adequately cover this section of the Food and Drugs Act.

During the year 31 samples were tested; these included traditional remedies and some of the more potent drugs. 29 fully complied with the requirements of the British Pharmacopoeia 1963 or with the composition stated on the container.

A Cod Liver Oil and Malt was in an unsatisfactory physical condition (loss of water in storage had produced an extremely viscous product) and a **Cream of Tartar** was marked "Guaranteed B.P." although this substance is not now in the current British Pharmacopoeia.

Samples submitted under the Food and Drugs Act during 1964

The unsatisfactory samples are indicated by the numbers shown in the brackets.

Nature of Sample	Number examined		Nature of Sample	Number examined
Milk	452	(31)	Canned Meat Products:—	
Milk, Channel Islands	75	(17)	Bacon Pudding	1
Foods other than milk:—			Beef Goulash and Dumplings	1
Almonds, Ground	2		Beef Naturelle	1
Almond, Marzipan	2		Beef Stew and vegetables	1
Animals, Marzipan	1		Beef with gravy	1 (1)
Arrowroot	1		Beef loaf, minced	1
Baking Powder	1		Breakfast Grill	1
Beef Suet Shredded	1		Casserole Steak	5 (5)
Bread Gluten	2		Chicken Dinner	1
Bread, Sandwich Loaf	1	(1)	Chicken in Jelly	2 (2)
Bread, High Protein	1		Chicken Delight	1
Bread, Milk	2		Chicken Casserole	1
Bread, Protein enriched	1	(1)	Corned Beef Hash	1
Bottled Beetroot	2		Curried Chicken and Mush- rooms	1
Bottled Wimberries	1		Hamburgers with gravy and onions	1
Butter	32		Hamburger Steaks	1
Buttered Cob	1		Hot Dog Sausages	1
Buttered Rolls	1		Irish Stew	4 (4)
Buttered Shortbread	1		Kreplach	1
Margarine	3		Lamb Chops with vegetables and gravy	2 (2)
Canned Products:—			Lamb Stew and Dumplings	1
Apricots in syrup	3		Lamb tongues in Jelly	1
Apple Puree	1		Lancashire Hot Pot	1
Apricots	1		Lunch Tongues	3 (2)
Beans in Tomato Sauce	2		Luncheon Meat	1
Blackcurrants	1		Liver, Bacon and Beans	1
Blackberries	1		Liver, Bacon, onion and gravy ..	1
Carrots	3		Meat Pie	3
Condensed Milk	1		Meat Balls, in juice	1
Cheese Flaps	1		Oyster Soup	1 (1)
Cranberry Sauce	1		Pate with mushrooms	1
Cream	2		Pate Smoked Goose	1
Creamed Sago Pudding	1		Ready Dinner	1 (1)
Creamed Macaroni Pudding ..	1		Sausages	1
Cherries in Syrup	1		Savoury Minced Steak	2
Cocktail Cherries	1		Spaghetti Bolognese	1
Fruit Salad in syrup	2	(2)	Stewed Steak and Gravy	1
Fruit Salad	2		Stewed Steak	4
Fruit Cocktail	1		Stewed Steak with gravy	2
Green Beans	1		Steak and Onions with gravy ..	1
Macaroni Cheese	1		Turkey in Jelly	1
Macedoine	1		Other Meat Products:—	
Mixed Vegetables	1		Cornish Pasties	2
Onions	1		Pasty	4
Peaches, in syrup	1		Pasty, Potato, Onion and Meat ..	2
Peaches	1		Pasty, Meat	2
Peas	1		Pie, Potato, Onion and Meat ..	4 (1)
Porridge with Cream	1		Pie, Steak	3
Prunes in syrup	4		Pie, Steak, Kidney and Onion ..	4
Prunes	1		Pie, Steak and Kidney	2 (2)
Pie Filling	3		Sausages, Beef	24 (7)
Raspberries	1		Sausages, Pork	24 (4)
Rhubarb, in syrup	2		Cake Decorations	3
Sardines in oil	2		Cake Covering	1
Sild in tomato sauce	1		Celery Salt	1
Soup	5		Cheese, Cream	1
Spinach	1		Cheese, Lactic	1
Strawberries in syrup	1			
Tomato Juice	1			

Samples submitted under the Food and Drugs Act during 1964—continued

Nature of Sample		Number examined		Nature of Sample		Number examined	
Cheese, Processed	15	(6)		Rice, Chicken, Curry and ..	1		
Cream Cheese, Processed ..	2			Salad Oil	1		
Cream Cheese, Spread	1			Salad Cream and Dressing ..	3		
Cheese Spread	5			Sauce, Bread	1		
Curry Powder	1			Sauce, Fruit	3		
Custard Powder	1			Sauce, Horseradish	1		
Cut Mixed Peel	1			Sauce, Mint	1		
Chewing Gum	3			Sauce, Onion	1		
Chocolate Confectionery ..	1			Sauce, Parsley	1		
Christmas Pudding	5			Sauce, Tartare	1		
Chutney, Cranberry	1			Sauce, Tomato	2		
Chutney, Fruit	1			Seasoning, Barbecue	1		
Chutney, Tomato	1			Seasoning, Maggi	1		
Chutney, Mango	1			Seasoning, Sausage	1		
Coffee and Chicory Essence ..	1			Shrimp Flavoured Slices ..	1	(1)	
Coffee	1			Soft Drinks	72		
Cooking Fat	1			Soft Drink with Vitamin C ..	1		
Corn Oil (Maize Oil)	1			Soft Drink Powder	2		
Desiccated Coconut	1			Spice, Pickling	1		
Dried Fruit	6			Spirits:—			
Dried Lentils	2			Brandy	2	(1)	
Dried Mint	2			Gin	1	(1)	
Dried Parsley	1			Whisky	1		
Dried Peas	3			Starch Reduced Cereals ..	6		
Dried Prunes	1			Stuffing	2		
Dried Sage	2			Stuffing, Parsley and Thyme ..	1		
Dried Soup	3			Stuffing, Sage and Onion ..	1		
Flavouring, Almond	4			Sugar Confectionery containing			
Flavouring, Fruit	4			spirits	2		
Flavouring, Vanilla	2			Sugar Confectionery	3		
Flakes, Bran	1			Sugar, Vanilla	1		
Flour, Plain	3			Syrups, Flavoured	3		
Flour, Self Raising	5			Table Water	1		
Fresh Cream Eclairs	2			Tapioca	1		
French Capers in Vinegar ..	1			Tea	5		
Fruit Juices	4			Tenderiser, Meat	1		
Garlic Salt	1			Toasted Beskwits	1		
Gelatine	2	(1)		Yeast, Dried	1		
Gravy Browning	3			Drugs and Medicinal Preparations:—			
Gravy Salt	1			Amylobarbitone Tablets ($\frac{1}{2}$ gr)	1		
Ground Ginger	2			Aspirin Tablets	1		
Ground Nutmeg	2			Aspirin Tablets, Junior ..	1		
Ground White Pepper	2			Bicarbonate of Soda	6		
Honey	1			Castor Oil B.P.	1		
Ice Cream	2			Cod Liver Oil and Malt ..	1	(1)	
Ice Cream, Dairy	6			Cream of Tartar	1	(1)	
Ice Cream Powder	1			Epsom Salts B.P.	1		
Instant Non Fat Milk	1			Ferrous Sulphate Tablets (3 grs)	1		
Instant Welsh Rarebit	1			Glycerine, Lemon and Honey	1		
Jelly Prepared	1			Glycerine B.P.	1		
Jelly, Strawberry	1			Glyceryl Trinitrate Tablets			
Lard	2			(1/130 grs)	1		
Malt Vinegar	7			Indigestion Tablets	2		
Milk Powder, Skimmed	2			Liquid Paraffin B.P.	1		
Mustard	1			Nicotinic Acid Tablets ..	1		
Non-Brewed Condiment	3	(1)		Ointment	1		
Onion, Cocktail	1			Paracetamol Tablets (500 mgs)	1		
Onion Powder	1			Phenergen Tablets (10 mgs) ..	1		
Onion Salt	1			Teething Powders	3		
Pepper Sauce	1			Vitamin A Tablets	1		
Pickle	4			Vitamin B ₁ Tablets	1		
Piccalilli	2			Vitamin C Tablets	2		
Potato Sticks	1						
Preserves	28	(4)					
Rice	4						
				TOTAL	1,112	(101)	

Imported Foods submitted by the Port Health Authority

During the year a total of 71 samples were submitted for analysis by the Chief Port Health Inspector and included the following:—

Apples	1	Lamb Tongues (canned)	1
Apples, dried	1	Lemons (fresh)	2
Beef steak with gravy (canned)	2	Lunch Tongues (canned)	1
Butter	2	Luncheon Meat (canned)	1
Casserole Meat (canned)	1	Marmalade (canned)	1
Cellophane Paper	1	Macaroni	1
Chicken Fillets in jelly (canned)	1	Oranges (fresh)	2
Chopped Chicken in jelly (canned)	1	Orange Juice, comminuted	1
Chopped Pork and Ham (canned)	1	Olive Oil	1
Currants	1	Preserves	1
Dried Carrots	1	Prunes	1
Dried Leeks	1	Raisins	2
Dried Peas	2	Salami Sausage	1
Evaporated Milk (canned)	1	Sauce for Macaroni	1
French Beans	1	Steak and vegetables (canned)	1
Fruit Cocktail (canned)	2	Strawberries (preserved)	1
Flour	2	Strawberries (canned)	1
Gherkins (canned)	1	Sultanas	1
Grapefruit (canned)	1	Tomatoes (canned)	17
Grapefruit (fresh)	1	Tomato Puree (canned)	2
Gelatine Powder	1	Tomato Paste	3
Irish Stew (canned)	1	Tomato Soup condensed (canned)	1

Total 71

All samples were examined in the light of current regulations, particularly with reference to the presence of preservatives, colouring matter and in the case of canned products the presence of excessive contamination by tin, lead and other metals.

No samples were found to be unsatisfactory with regard to the above matters but five samples were reported against as not complying with recommended standards of composition. These were all canned meat products and included:—Chopped Chicken in Jelly, 65 per cent instead of 80 per cent of meat; Beef Steak with gravy and Casserole Steak, 68 per cent each instead of 75 per cent of meat; Irish Stew, 33 per cent, and Stewed Steak and Vegetables, 31 per cent instead of 35 per cent of meat.

Mould Count. In addition to the examination of canned tomato products for metals mould counts were carried out, in view of high figures reported by the Analyst for the Port of London Authority for many samples of imported canned tomatoes.

In the samples examined the results were satisfactory, none showing more than 20% positive fields in the Howard mould count procedure. A figure greater than 50% positive fields (i.e. half the microscopic fields examined showing a definite mould fragment) has been considered to indicate an unsatisfactory product, sterilized but originally manufactured from mouldy fruit.

Pesticide Residues. Six samples of fresh fruit (Oranges, Grapefruit and Lemons) were tested qualitatively for insecticide residues using the fruit fly as the sensitive detector. In this test an extract of the fruit is made in an organic solvent (dichloromethane) which is then evaporated to dryness in small test jars. Test flies are exposed to this extract. No evidence of significant quantities of insecticides was obtained by this test in the samples examined.

The question of pesticide residues on foodstuffs is one which has given rise to much public concern and it is highly desirable that testing in this sphere should be increased using more sensitive methods (such as thin layer chromatography and gas chromatography) on a larger number and increased variety of samples.

FOOD AND DRUGS LEGISLATION

An account of the analytical work done under the Food and Drugs Act etc. at this laboratory would not be complete without making some brief mention of the changes or additions to the legislation which govern the composition, and purity of the articles concerned. Generally the changes which occur increase the protection given to the public and also the amount of work which the Public Analyst must carry out during the examination of such articles.

During 1964 the following regulations were made:—

The Meat (Treatment) Regulations 1964 prohibit the addition of ascorbic acid and nicotinic acid to raw and unprocessed meat intended for sale for human consumption.

These substances have the effect of improving the colour retention of raw meat but owing to their use in excessive amounts there have been a number of instances of unpleasant reactions occurring in persons consuming the treated meat. In particular nicotinic acid, (a vitamin of the B group) although an essential nutrient, when taken in excess produces marked vaso dilatory effects.

The Dried Milk Regulations 1964 re-enact with amendments the Public Health (Dried Milk) Regulations 1923-48. The principal changes are that minimum and maximum percentages are prescribed for the milk fat content of various types of dried milk. The upper limit for the milk fat content of dried skimmed milk has been reduced from 8 per cent to 1.5 per cent. A maximum moisture content of 5 per cent is prescribed for all descriptions of dried milk and also detailed labelling requirement for containers of dried milk is laid down.

The Mineral Hydrocarbons in Food Regulations 1964 prohibit, with certain exceptions, the use of any mineral hydrocarbon in the composition or preparation of food. The exceptions relate to dried and citrus fruit, sugar confectionery, lubricants, cheese, eggs and chewing compounds.

The regulations lay down specifications for mineral hydrocarbons which may be used and include a detailed chromatographic test for limits of content of certain polycyclic aromatic hydrocarbons.

The Soft Drinks Regulations 1964 in addition to prescribing standards of composition for normal soft drinks have also included semi-sweet and low calorie soft drinks together with labelling provisions for these. Cyclamic acid and cyclamates are permitted as artificial sweeteners in soft drinks, in addition to saccharin. The presence of artificial sweetener must, however, be declared on the label. The descriptions of soft drinks sold from vending machines, and where appropriate a declaration of the artificial sweetener content, must appear on such machines.

The main requirements of these regulations do not come into operation until June 1965.

During the year Proposals for Regulations which represent the final step before the recommendations of previous reports are given legal status, appeared in respect of the following:—

Canned Meat Products.—Apart from detailed labelling requirements, four categories of Canned Meat will have a prescribed standard and any others will be required to state the actual content on the label but will in all cases have to contain at least 25 per cent of meat.

Meat Pies.—The previously recommended standards of 25% for meat pies and 12½% for meat and vegetable pies and pasties remains unchanged.

Cheese.—Detailed standards for hard cheese, soft cheese, cream cheese and cheese spread are given with prescribed fat and moisture contents and a list of substances which may be lawfully added to cheese.

Antibiotics in Milk.—Circular FSH 15/64 from the Ministry of Agriculture, Fisheries and Food makes recommendations regarding the problem of antibiotics in milk. The testing of ex-farm milk which has already been undertaken by local authorities is welcomed. No decision has yet been made as to whether it should be made a specific offence for milk to contain antibiotics but the report points out that where formal sampling is undertaken with a view to possible court proceedings it is necessary for samples to be analysed by the Public Analyst.

Food Standards Committee Report on Colouring Matters 1964.—This report is the first review of the Colouring Matter in Food Regulations 1957. After considering all the known facts it recommends that six synthetic colours on the existing list of thirty permitted coal tar colours should be withdrawn. These are Ponceau 3R, Ponceau SX, Naphthol Yellow S, Blue VRS, Yellow RFS and Yellow RY. It also recommends that the colouring of citrus fruits should be prohibited and that specifications of purity of the permitted colours should be prescribed in accordance with the data published by the World Health Organisation.

The report also states that any revised regulations made as a result of this report should be reviewed again in five years.

Fertilisers and Feeding Stuffs Act, 1926

During the year a total of 34 samples were submitted for analysis under the above act. These consisted of 8 Fertilisers and 26 Feeding Stuffs and included the following:—

Bone Meal 1, Dried Blood 1, Sulphate of Ammonia 1, General Compound Fertiliser 4, Liquid Fertiliser 1.

Barley Meal 3, Crushed Oats 1, Maize Meal 2, Dairy Cubes 1, Ayrshire Cubes 1, Channel Island Cubes 1, Friesian Cubes 1, Winter Milk Cubes 4, Weaners and Growers Cubes 1, Easifeed Barley Balancer 1, Pig Fattening Meal 2, Sow and Weaner Meal 2, Layers Pellets and Mash 4, Growers Crumbs 1, Turkey Starter Pellets 1.

Of the 8 Fertilisers examined 3 fully complied with the requirements of the Act. The samples of Sulphate of Ammonia and Dried Blood were of satisfactory composition but did not carry a statutory statement of the particulars in or on the packet. Three samples contained excesses of one or more constituents: General Fertiliser, 1.2% of phosphoric acid above amount stated; Vegetable Fertiliser 1.4% of nitrogen and 3.0% of phosphoric acid above amount stated; Liquid Fertiliser 1.4% of nitrogen above amount stated.

These amounts were in excess of the limits of variation permitted but were not considered to be to the prejudice of the purchaser.

Of the 26 samples of Feeding Stuffs examined, 23 were of satisfactory composition. A sample of Sow and Weaner Meal and one of Pig Fattening Meal contained 1.2% of oil above the amount stated. This was in excess of limits of variation but was not to the prejudice of the purchaser.

A sample of Winter Milk Cubes showed a deficiency of oil, being 1.7% below the amount stated, such deficiency being to the prejudice of the purchaser. Further samples however, were found to comply with the statutory declaration in all respects.

Changes in Fertiliser and Feeding Stuff Legislation

From time to time amending or modifying regulations are made. The Fertilisers and Feeding Stuffs (Amendments) Regulations 1964 clarify the definitions of certain fertilisers and feeding stuffs, bringing under control nitrogenous gas, liquor, revise certain of the methods of analysis and vary the particulars to be given on a sale of sulphate of ammonia.

ATMOSPHERIC POLLUTION

During the year 84 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 three stations where the deposit gauges are situated.

Comparison of Yearly Rates of Deposition for 1960-1964 in Tons per square mile per year

Station	1960	1961	1962	1963	1964
CITY HALL					
Total Deposited Matter	153	138	169	161	123
Insoluble Mineral Matter (Ash)	46	40	59	63	48
Rainfall (inches)	52	39	31	38	31
CURRAN ROAD					
Total Deposited Matter	220	184	184	159	151
Insoluble Mineral Matter (Ash)	85	74	82	73	71
Rainfall (inches)	52	36	23	24	22
MOORLAND ROAD					
Total Deposited Matter	395	354	275	305	279
Insoluble Mineral Matter (Ash)	204	167	144	161	165
Rainfall (inches)	48	32	25	35	28

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 paper 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.

The following table gives a summary of the results obtained during the year. The results are expressed in micrograms per cubic metre (µg/m³) and in parts per million (ppm) by volume. The results are given for the six sampling points in the city, and for the average of the six points. The results are given for the year as a whole, and for the four quarters of the year. The results are given for the year as a whole, and for the four quarters of the year. The results are given for the year as a whole, and for the four quarters of the year.

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Point	1	2	3	4	5	6	Average
Year	12.5	15.2	18.7	21.3	24.8	27.9	18.4
Q1	11.2	14.1	17.5	20.1	23.6	26.7	17.2
Q2	13.8	16.5	19.9	22.5	26.0	29.1	19.8
Q3	10.7	13.4	16.8	19.4	22.9	26.0	16.9
Q4	14.6	17.3	20.7	23.3	26.8	29.9	20.5

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Comparison of Average Smoke and Sulphur Dioxide Concentrations for 1960—1964

Station	Smoke Concentration Micrograms per cubic metre					Sulphur dioxide Concentration Micrograms per cubic metre				
	1960	1961	1962	1963	1964	1960	1961	1962	1963	1964
YEAR										
LLANISHEN RESERVOIR										
Daily Average	45	38	33	31	27	57	37	19	33	47
Highest Daily Value	260	202	220	202	201	200	204	198	223	203
LLANRUMNEY CLINIC										
Daily Average	—	—	39	43	41	—	—	57	72	60
Highest Daily Value	—	—	289	193	219	—	—	343	342	277
CITY HALL										
Daily Average	60	52	48	42	42	86	60	69	70	67
Highest Daily Value	270	290	407	245	254	314	289	298	375	283
CURRAN ROAD										
Daily Average	90	92	89	84	83	86	76	85	87	63
Highest Daily Value	570	621	720	456	524	343	301	536	404	495
MOORLAND ROAD										
Daily Average	90	79	73	64	56	114	91	92	110	92
Highest Daily Value	450	418	536	452	400	371	401	375	529	636
CROFTS STREET										
Daily Average	—	—	96*	77	83	—	—	113*	96	102
Highest Daily Value	—	—	438	381	512	—	—	373	579	466

* Average of eight months only—Station shut down during May/October

Miscellaneous Samples Submitted by Public Health Department

The following articles of food were submitted for examination by the Chief Public Health Inspector in connection with complaints from the public.

ARTICLE	RESULT OF EXAMINATION
Peppermint Sweet (Mint Imperial) ..	Contained fibrous cotton material embedded in the centre of the sweet.
Dinner Cob	Contained a short length of brown twine.
Sponge Roll	Contained several strands resembling nylon bristle but consisting of gelatine.
Pork Pie	Contained a black object which consisted of burnt starch.
Pork Pie	Contained a roll of bandage and lint which was pink coloured due to the lint.
Part of slice of Bread	Contained insect fragment—Cadelle Beetle larva
Fragment from meat pie	Fragment consisted of brown strands of vegetable origin.
Bread Roll and Insect fragment ..	Part of a cockroach leg submitted with sample had probably not been baked in the bread roll.
Blackberry Tart and a nail	The nail had adhering fruit tissue indicating it had been baked in the tart.
Cream Puff	Contained growth of the black mould, <i>Rhizopus nigricans</i> .
Wrapped Loaf	Damage to wrapper resembled rodent attack but not definitely confirmed by microscopical examination.
Currant Bun	Contained a small brownish green cylinder about $\frac{1}{2}$ inch long—a piece of animal feeding stuff.
Christmas Pudding	Contained heavy growth of yellow and grey green mould (<i>Aspergillus</i> and <i>Penicillin</i> sp) on surface. Soluble solids and fat content low.
Canned Fruit (3 samples)	Cans rusted externally but contents in fairly good condition.
Canned Orange Juice	Contents had unpleasant taste due to presence of 0.8% of acetic acid.
Canned Apricots	Complaint of having caused unpleasant reactions after eating. Analysis showed sample to be satisfactory.
Canned Minced Beef Loaf	Showed patches of tin and iron sulphide staining on the meat surface.
Canned Corned Brisket of Beef (8 samples)	Showed patches of tin and iron sulphide staining in varying degrees of severity. Three were considered satisfactory, two were moderate, and two showed severe staining.
Canned Corned Beef	Contents badly stained with tin and iron sulphide on surface.
Canned Corned Beef (4 samples) ..	One out of four cans had an unpleasant oily odour on opening.
Sterilized Milk	Separation had occurred probably due to inefficient homogenisation.
Fruit Jelly	Showed some evidence of fermentation.
Butter	Suspected of being margarine but was genuine butter.
Buttered Cob	Fat used to spread cob contained 25% of margarine.
Cat Food	No poisonous substances were detected in spite of fears of complainant.

A number of waters and seepage waters were examined largely as a result of complaints from the public. These included six cellar waters, three of which showed evidence of sewage pollution. The other three were probably from a deep source or underground spring.

Water taken from a garden showed no evidence of sewage pollution in spite of complaints that it was polluted.

A complaint that water from a kitchen tap was greasy could not be substantiated by chemical analysis.

Another sample, submitted because of a complaint of discoloration contained a small amount of iron oxide from the mains piping.

Water from a milk pasteurisation plant was examined because of deposits formed on the equipment. This was due to the deposition of calcium carbonate the temporary hardness of the supply concerned being higher than was formerly the case.

Fourteen samples of water, and a length of copper piping were submitted for examination in an attempt to explain the corrosion of copper piping in a school laboratory.

Only two samples of swimming bath waters were received for chemical analysis during the year. Both samples were satisfactory.

Articles other than foods and water, submitted for examination included:—two deposits from a pasteurising plant which were found to consist largely of calcium carbonate, two dust samples which were examined chemically and microscopically, one of these showing the characteristic fused spheres of boiler fly ash, a sample of coal for determination of volatile matter, and two brands of Rose Hip Syrup which were compared for Vitamin C content.

Plastic Toys

As a result of the Bournemouth incident in which imported plastic toys were suspected of having caused lead poisoning in children, a large number of similar toys on sale in Cardiff were submitted for examination.

A total of 35 samples, many of which were composite articles such as tool sets, dolls hair dressing outfits and building blocks were tested. More than 80 separate analyses for total lead were carried out. Each involved the preparation of the sample, converting to ash by ignition at 500 °C, dissolving the residual inorganic lead in acid and finally measuring the lead content polarographically.

The results showed a frequent occurrence of lead in amounts up to several thousand parts per million. In some cases cadmium was also detected.

Further tests indicated that although the total lead content of the samples concerned was high, very little lead could, in fact, be extracted by dilute acids from the plastics, so that significant quantities would not be likely to be extracted by sucking and chewing by children.

Many other Public Analysts were associated with this problem at the time, and throughout the country numerous plastic toys were examined with very similar results.

The Home Office, after considering evidence from many sources, finally issued a statement to the effect that no danger was likely from such toys, but as lead is an undesirable ingredient importers of plastic toys were strongly recommended to keep the level of total lead below 250 parts per million in future.

On this question of toxic materials in children's toys and playthings a British Standard Specification (No. 3443) recommends generally that they should not include ingredients known to be injurious to persons with whom they may come in contact but have a specific recommendation that lead in coating materials (i.e. paints) should not exceed 1.1 per cent. Possibly future codes need to be made more specific for toxic metals.

A number of local authorities require analytical checks to be made for the absence of toxic metals in crayons, pencils and plasticine used by young children in their schools and it may be desirable that such testing be carried out for this authority also.

The entire question of the use of plastics, particularly those used for food packaging, is now receiving more attention than hitherto. Numerous additives are used to improve the properties of plastics, and it is essential to ensure that these will not have toxic effects. The British Plastics Federation has for some time been considering this question and hold the practical view that hazard does not arise unless there is extraction of the toxic material into the food. It is likely that legislation on this matter will be forthcoming in the near future and will probably require testing of both plastics and food which has been packed in plastics.

Miscellaneous Samples Submitted by other Corporation Departments

City Architect's Department.—A sample of building sand was analysed for chloride content.

City Surveyor's Department.—Twelve lubricating oils and greases were tested for compliance with the detailed requirements of the Corporation Specifications. Two oils and one grease were found to be incorrect but replacement samples were satisfactory.

Four samples of emulsion paint were compared both physically and chemically; tests were made for water and binder content and the composition of the pigments used.

Four specimens of very old mortar and also a fresh mortar were analysed in detail in order to assess the original make up of the mix. In a similar way two samples of grout material were compared. A roofing slate showing pyrites inclusions was tested for compliance with the British Standard Specification for Welsh Slates.

A corroded aluminium kettle and a sample of the water used were submitted to ascertain the cause of the serious pinholing which had occurred. This was considered to have been due to inadequate chromium plating of the element.

Three water repellent solutions containing silicones were compared. Advice was given on the wording of future specifications since analysis revealed that the specification should have referred to the percentage of dry silicone solids as distinct from a content stated in terms of a proprietary solution.

A flue dust was examined in connection with a complaint that it was the cause of corrosion, and a sample of anti-freeze was tested and found to comply with the appropriate British Standard Specification.

Parks Department.—A sample of lubricating oil was analysed for specification compliance. Two mixed fertilisers were submitted for testing, for information.

Transport Department.—The four lubricants analysed for this department were all found to be satisfactory.

Waterworks Department.—668 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. These samples included a very small number which were submitted because of complaints from consumers and also others in connection with seepages to ascertain whether derived from leaking mains.

All samples were given a detailed examination including tests for metals such as iron, manganese, copper and lead. No instances of plumbo solvency were detected during the year. No requests were received to ascertain the natural fluoride content of the supply.

Every effort was made during the year to speed up the reporting of routine water samples and generally results are now despatched within two or three days instead of about ten days as was formerly the case.

PRIVATE SAMPLES

A small number of samples were received from private sources. These included two samples of sausages for meat content and two cooking oils for identity tests. Human milk from St. Davids Hospital was analysed for fat and non-fatty solid content. A deposit taken from a central heating system was analysed for a firm of consulting engineers and a seepage water from a basement was tested for the presence of sewage.

STAFF MATTERS AND LABORATORY AFFAIRS.

The resignations of two assistant analysts, Miss E. Davies and Miss Jenkins, took effect from the beginning of the year. Mr. A. Morgan A.R.I.C. was appointed as assistant analyst in March. Mr. G. Woodman resigned in August and Mr. T. Beedle, L.R.I.C. was appointed as assistant analyst in his place in December. He was the only applicant for the post. Miss M. Tregunna was appointed as a Junior Technician.

The question of staffing and regrading was reviewed during the year and in this connection I wish to thank the Health Committee for the sympathetic consideration given to the proposals put forward. The problem of attracting and retaining qualified chemists in the face of severe competition from industry, the universities and the civil service is a real one. It is, however, mainly a question of being able to offer a sufficiently attractive salary and good long term prospects. The awards granted this year, although not as much as was hoped for, should go some way to improving the position.

Work in Public Analysts' laboratories is becoming increasingly complex and modern instrumental techniques are now essential to deal with the present-day problems associated with additives and contaminants in food. A proportion of the time must also be devoted to analytical investigation in addition to the more routine forms of analysis. Qualified and experienced scientists who are prepared to interest themselves in work of this kind are therefore an essential requirement for the future.

In addition to its food and drug control work, the laboratory provides scientific advice and an analytical service to any of the departments of the Corporation requiring it and it is hoped that the facilities available will be utilised more fully in the future as the value of such scientific assistance becomes recognised.

During the year I have been given the opportunity to attend the Annual Conference of Public Analysts at London in May, and their general meetings subsequently. I was also able to visit the Royal Society of Health Congress in Torquay for one day to hear important contributions on topics of great current interest, the subject of antibiotics in milk and the question of pesticides in our environment. Mr. McKinlay went to Swansea University College in July for a three-day symposium on "Pollution," a subject with which we are all concerned. Earlier in the year, Mr. Hopkin, our Senior Analyst, attended a short course on "Safety in the Chemical Laboratory."

Many visits by individuals and parties were made to the laboratory during the year. They included members of the Health Department, groups from the Welsh Board of Health and from local schools, and a large number of students from the College of Domestic Arts. They were given a short introductory talk on the extent of the work, followed by a tour of the laboratory conducted by Mr. McKinlay and other members of the staff. This opportunity to obtain some idea of the nature of the Public Analyst's work was clearly much appreciated by all who visited us.

PORT HEALTH SERVICE

REPORT FOR 1964 OF MR. 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.

Dr. A. H. Griffith, M.B., B.S., D.P.H., Senior Medical Officer of Health, City and Port resigned 21st November, 1964.

Dr. J. N. P. Hughes, M.B., B.Ch., D.P.H., Assistant Medical Officer of Health, City and Port commenced 29th June, 1964.

Dr. G. Crompton, M.B., B.Ch., D.(OBST.), R.C.O.G., D.P.H. commenced 29th June, 1964.

SECTION II

AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

The number and tonnage of vessels entering the port (which includes Ely Harbour) inspected by officers of the Port Health Authority during 1964 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 ..	390	974,058	81	302	
Coastwise ..	1,214	1,042,993	—	441	—
TOTAL ..	1,604	2,017,051	81	743	—

The following table shows the number of vessels entering the port which were dealt with by the department each month during 1964:—

Month	From Foreign Ports	Coastwise	Total
January ..	38	128	166
February ..	38	114	152
March ..	35	119	154
April ..	28	121	149
May ..	36	128	164
June ..	31	94	125
July ..	53	97	150
August ..	30	86	116
September ..	29	81	110
October ..	32	89	121
November ..	20	88	108
December ..	20	69	89
TOTAL ..	390	1,214	1,604

The nationalities of the several types of vessels entering the port which were dealt with by the department during 1964 are shown in the following table:—

Nationality	Steam	Motor	Dumb Barges	Total
American	1	—	—	1
Argentine	2	—	—	2
Belgian	2	5	—	7
Brazilian	1	—	—	1
British	98	988	—	1,086
Danish	1	18	—	19
Dutch	1	175	—	176
Finnish	4	19	—	23
French	—	11	—	11
German	1	74	—	75
Greek	6	5	—	11
Indian	4	3	—	7
Irish	1	26	—	27
Israeli	—	3	—	3
Italian	1	—	—	1
Liberian	9	17	—	26
Norwegian	—	40	—	40
Pakistan	1	—	—	1
Panamanian	5	—	—	5
Polish	2	4	—	6
Rumanian	—	4	—	4
Russian	5	9	—	14
Spanish	4	9	—	13
Swedish	—	40	—	40
Swiss	—	2	—	2
Yugoslav	—	3	—	3
TOTAL ..	149	1,455	—	1,604

SECTION III

CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

Passenger Traffic	{	Number of passengers INWARDS	2,578
	{	Number of passengers OUTWARDS	2,404
Cargo Traffic	{	Principal IMPORTS—Iron ore, timber, bones, fuel oil, fruit and general.	
	{	Principal EXPORTS—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, Israel, 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 16 samples of drinking water from ships were submitted to the Public Health Laboratory for bacteriological examination, the results being as follows:—

Satisfactory	..	..	16
Contaminated		..	—
			—
Total	..		16
			—

Also a sample of water taken from the Tap-Low Water Pier, Cardiff Docks, 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 16 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. Five 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. Winifred'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**

The treatment Centre for the diagnosis and treatment of venereal disease for seamen is at the Cardiff Royal Infirmary. The Centre at Royal Hamadryad Hospital closed on 31st October, 1964.

Six 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 measles and two cases of chickenpox occurred on vessels during their 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	Chickenpox	1	—	1
Cases which have occurred on ships from foreign ports but have been disposed of before arrival	—	—	—	—
Cases landed from other ships	Measles Chickenpox	1 —	— 1	1 1

SECTION X**OBSERVATIONS OF 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

De-ratting 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.

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		
—	—	—	—	—	98	98

The fees received by the Port Health Authority in respect of these certificates amounted to £516 4s. 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	—	—	Ships on which defects were remedied 53
826	—	53	
Dirt, Vermin and Other Conditions prejudicial to health	—	—	Ships on which nuisances were remedied 46
826	—	46	
TOTAL 826	—	99	99

The number of re-visits made to these vessels in connection with health survey and the remedy of sanitary defects and nuisances totalled 3,373.

Defects and nuisances found on vessels entering the port during 1964 are shown below:—

Structural Defects through Wear and Tear

Defective:

Ports	4
Ventilators	22
Skylights	8
Steam heaters, stoves, stove-pipes, etc.	6
Sanitary conveniences, flushes, etc.	97
Side ports and deck prisms	3
Bulkheads	4
Floors	33
Doors	10
Refrigerators	6
Wash-hand basins	65
Waste pipes	36
Scuppers	45
Decks	19
Tiles	16
Showers	12
Bunks	7
Glass Rubbers	5
Food lockers	5
Steam Pipes	2
Drain Pipes	4
Wash Hand supply pipes	14

Dirt and Other Conditions prejudicial to health**Dirty:—**

Pantries	..	..	..	..	..	..	..	5
Galleys	..	..	..	..	..	..	..	8
Provision Store-rooms	..	..	..	..	..	..	..	5
Refrigerators	..	..	..	..	..	..	..	5
Bathroom	..	..	..	..	..	..	..	1
Sanitary Conveniences	..	..	..	..	..	..	..	5
Foul Accumulation	..	..	..	..	..	..	..	4
Food Lockers	..	..	..	..	..	..	..	1

Verminous:—

Crew Quarters	..	..	..	..	..	..	..	29
Messrooms	..	..	..	..	..	..	..	16
Provision store-rooms	..	..	..	..	..	..	..	11
Pantries	..	..	..	..	..	..	..	18
Galleys	..	..	..	..	..	..	..	10
Slight bed-bug infestation in crew quarters	..	..	..	..	..	..	..	1
Slight weevil infestation in provision store-rooms	6
Rat infestation	5
Mouse infestation	2

Total	..	555
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THE CLEAN AIR ACT**SECTION 20—APPLICATION TO VESSELS****The Dark Smoke (Permitted Periods) (Vessels) Regulations, 1958**

Smoke Emissions.—During the year 63 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 eighty-four. Six 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 EXAMINATION 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 127 alien passengers on board and none 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 seventeen, none of whom was medically examined.

SECTION XVI**MISCELLANEOUS**

NO CHANGE

The Dangerous Drugs Regulations, 1953, No. 499, Section 13 (2) (a). No 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. Fifty-eight dogs and twenty-one 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 food-stuffs, 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 food-stuffs are submitted for bacteriological examination.

Examination of imported meat is carried out in the transit sheds on the dock sides and the local cold stores. The glandular examination of mutton and lamb carcasses weighing over 42lb. was continued and only two cases of caseous lymphadenitis were found.

Imported Foodstuffs. The quantities of various kinds of food-stuffs imported during the year are shown in the following table —

DESCRIPTION	QUANTITY	DESCRIPTION	QUANTITY
Advocaat (cases)	205	Jam, Jars (bottled)	250
Bakery Products (cartons)	18	Lard (cartons)	4,305
Bacon (bales)	140	Macaroni (cartons)	5,760
Beer (canned)	2,400	Maize (tons)	7,393
Brandy (bottled) (cartons)	9,957	Meat (canned) (cartons)	91,431
Butter (cartons)	562,678	Milk, canned (cartons)	3,920
Cauliflower, Pickled (casks)	122	Milk Powder (bags)	10,002
Cheese (cartons)	215,319	Olive Oil, canned (cartons)	105
Cheese (crates)	32,451	Potatoes (bags)	150,171
Chicken, canned (cartons)	2,970	Rusks (cartons)	4,590
Chicory (bags)	35	Salami (cartons)	183
Citric Acid (bags)	200	Spaghetti (cartons)	175
Coffee (drums)	112	Tomato Juice, canned (cartons)	250
Confectionery (cartons)	251	Tomato Paste canned (cartons)	1,247
Edible Fat (cartons)	318	Tomato Puree canned (cartons)	1,155
Farina (bags)	280	Tomato Sauce, bottled (cartons)	36
Fish (canned) (cartons)	600	Tomato Soup, canned (cartons)	1,525
Flour (bags)	19,600	Vegetables, canned (cartons)	169,315
Fruit, Canned (cartons)	141,677	Vegetables, Dried (bags)	5,760
Fruit, Dried (cartons)	250,509	Vegetables, Fresh (bags)	12,696
Fruit Juice (cartons)	2,125	Vegetables, Pickled (casks)	117
Fruit Pulps (casks)	29	Vinegar, bottled (cartons)	15
Gelatine Powder (bags)	510	Wheat (tons)	34,000
Gherkins (cases)	374	Wine (casks)	576
Gin, bottled (cartons)	24	Wine, bottled (cartons)	2,275
Irish Stew, Canned (cartons)	3,500	Whisky, bottled (cartons)	20

Overseas Meat. In addition to the food-stuffs already referred to, eleven vessels arrived with the following quantities of overseas meat:—

DESCRIPTION	QUANTITY	DESCRIPTION	QUANTITY
Carcases of Lamb	112,347	Liver (cartons)	79
Carcases of Mutton	3,177	Meat, offal (cartons)	326
Quarters of Beef	2,113	Sundries (Bags)	45
Boneless meat (cartons)	174	Sundries (Cartons)	6,044
Rabbit (Crates)	10,948	Beef (Cartons)	140,184

The quantities of various kinds of food-stuffs withheld from human consumption during the year are shown below:—

				Tons.	Cwts.	lbs.	ozs.
Fruit (canned)	—	5	38
Meat (canned)	—	3	2
Potatoes (Bags)	12	6	56
Rusks	—	—	12
Tomato Puree	—	1	16
Tomatoes (canned)	14	6	75
TOTAL	27	2	89
							2½

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.

Eighty-four 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 (canned)	Australia	1
Beef Steak	Australia	2
Butter	Holland	1
Butter	Israel	1
Casserole Meat	Australia	1
Chicken (canned in jelly)	Holland	1
Chopped Ham and Pork	Belgium	1
Currants	Greece	1
Dried Leeks (Bags)	Holland	1
Dried Carrots (Bags)	Holland	1
Dried Peas (Bags)	Holland	2
Fancy Flake Hen Egg Albumen	America	2
Flour	Australia	1
Flour	Canada	1
French Beans	Italy	1
Fresh Apples	America	1
Frozen Rabbits	Australia	1
Fruit (canned)	America	2
Gelatine Powder	Belgium	1
Grapefruit	Israel	2
Irish Stew	Australia	1
Jam (Apricot)	Hungary	1
Lamb Tongue	Australia	1
Lunch Tongue	Australia	1
Lemons	Israel	2
Milk (evaporated)	Holland	1
Olive Oil	Spain	1
Oranges	Israel	2
Orange Juice	Israel	1
Orange Marmalade	Australia	1
Pasta (Macaroni)	Italy	1
Peeled Shrimps	Holland	11
Pickled Gherkins	Hungary	1
Pork Luncheon Meat (canned)	Holland	1
Prunes	America	2
Raisins	America	2
Steak and Vegetables	Australia	1
Salami Sausage	Denmark	1
Strawberries	Holland	1
Strawberry Pulp	Holland	1
Sultanas	Greece	1
Tomatoes (canned)	Italy	16

Description	Country of Origin	No. of Samples
Tomatoes (canned)	Spain	1
Tomato Paste	Italy	2
Tomato Puree	Italy	3
Tomato Sauce	Italy	1
Tomato Soup.. .. .	Italy	1

Each of the various 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. Sixteen samples of imported food were submitted to the Public Health Laboratory Service for bacteriological examination, as follows:—

Description	Country of Origin	No. of Samples
Salami Sausage	Denmark	1
Gelatine Powder	Belgium	1
Peeled Shrimps	Holland	11
Fancy Flake Hen Egg Albumen ..	America	2
Chopped Ham and Pork	Belgium	1

The results of the examination showed 15 of the samples to be genuine.

One sample of Chopped Ham and Pork from Belgium which was submitted for bacteriological examination was reported as follows:—

The meat content was only 65%. The meat content of the sample was therefore below the minimum 80% recommended for canned meat by the Food Standards Committee Report on Canned Meat Products.

The Public Health (Imported Milk) Regulations, 1926. No fresh milk was imported during the year.

MISCELLANY

Registration of Private Nursing Homes

Private nursing homes registered with the department were the subject of certain changes during the year. One home which accommodated elderly and chronic sick patients closed. Another, which for many years had been concerned entirely with maternity cases, ceased to admit expectant mothers and was re-registered after certain adaptations as a nursing home for chronic sick and elderly patients.

At the end of the year 7 homes were registered providing 24 maternity beds and 119 beds for other cases.

METEOROLOGICAL OBSERVATIONS

1964

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 1964 are given in the following tables —

BAROMETRIC PRESSURE AND RELATIVE HUMIDITY

1964	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 ..	39	30.135	30.165	38.4	37.4	90
February ..	41	29.798	29.799	39.7	38.4	89
March ..	41	29.118	29.119	40.0	38.2	85
April ..	48	29.395	29.438	47.8	44.8	79
May ..	56	29.877	29.955	56.2	52.3	76
June ..	58	29.886	29.969	58.4	54.0	76
July ..	63	29.975	30.072	62.6	58.3	77
August ..	67	29.880	29.988	61.4	57.4	76
September ..	59	29.884	29.970	58.4	55.0	80
October ..	51	29.788	29.852	46.8	46.5	86
November ..	48	29.899	29.954	46.7	45.3	85
December ..	40	29.755	29.787	39.5	38.0	86
	51	29.783	29.839	49.6	47.1	82

TEMPERATURE

1964	Absolute Maximum °F	Absolute Minimum °F	Mean of Maximum °F	Mean of Minimum °F	Mean Temperature °F
January	59	13	43.3	35.0	39.0
February	56	24	45.9	36.2	41.0
March	58	29	46.0	33.0	41.0
April	67	33	54.0	37.0	48.0
May	74	42	63.0	48.0	56.0
June	75	42	64.4	50.8	57.7
July	76	46	68.8	54.4	62.5
August	78	42	69.0	54.0	61.5
September	75	41	67.0	50.0	59.4
October	65	33	56.0	42.0	50.5
November	59	31	49.0	41.0	48.0
December	58	17	45.0	33.0	40.0
	67	33	55.9	42.9	50.4

UNDERGROUND TEMPERATURE AND SUNSHINE

1964	Underground Temperature (Mean)		Bright Sunshine
	1 ft.	4 ft.	Total Duration
	°F	°F	Hours
January	40.7	44.8	23.4
February	41.1	43.9	56.4
March	42.5	44.0	76.5
April	47.0	46.0	149.8
May	55.0	51.0	198.8
June	59.8	55.2	131.9
July	63.5	58.4	194.9
August	63.6	60.4	208.8
September	59.6	59.4	204.0
October	52.9	56.0	113.6
November	49.5	52.4	63.6
December	43.3	49.2	45.2
	51.5	51.7	1466.9*

*=33% of possible duration and a daily average of 4.02 hours

RAINFALL

1964	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 ..	0.80	—3.29	.30	27th	10
February ..	1.71	—1.19	.79	5th	14
March ..	5.02	+ 2.20	1.10	18th	11
April ..	2.56	—0.09	.59	15th	18
May ..	2.11	—0.55	.35	21st & 31st	16
June ..	2.22	—0.33	.70	5th	9
July ..	2.87	—0.12	1.05	14th	12
August ..	2.23	—1.79	.48	23rd	11
September ..	1.55	—1.46	.48	15th	9
October ..	3.05	—1.57	.84	5th	17
November ..	3.53	—0.60	1.08	13th	15
December ..	4.97	+ 0.54	.95	26th	18
	32.62	—0.69	1.10 on 18th March		160

*24 hours ended 9.0 a.m. (G.M.T.) next day