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Contributors

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Carmarthenshire County Council

Annual Report

OF THE

County Medical Officer of
Health

AND

Principal School Medical
Officer

For the Year 1969

LLANELLI :

Printed by the Llanelly Mercury Printing Co., Ltd.



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Mr. Chairman, Aldermen and Councillors,

Each year presents a challenge to improve existing services and to implement new schemes but for the last few years there has been a tendency to severely limit the resources available for this purpose.

Statistically there have been changes and it is noticed with satisfaction that there has been an increase in the number of children vaccinated against smallpox. The Carmarthenshire figure for children under two is now 49 per cent. against the previous year's figure of 36 per cent. The average for Wales is 20 per cent. and that for England and Wales 31 per cent. The computer program has undoubtedly contributed to the improvement in the County's figures.

The incidence of measles has shown a marked increase. This could have been avoided to a certain extent by the public accepting the offer of vaccination. Since infectious jaundice has become notifiable one notices that about 90 per cent. of the cases occur in the south-east corner of the County. Personal and environmental hygiene play an important part in the control of this disease.

The tuberculosis register shows that whereas in 1959 there were 7.46 cases per 1,000 population, at the end of 1969 it had fallen to 2.08. There has been an increase in the incidence of V.D.

Environmentally the County is ideally suited to develop the outdoor life in the form of riding, walking, golf and swimming. I am sure if the middle aged who are committed to a sedentary life took advantage of the facilities there might be a drop in the incidence of cardio-vascular disease.

Heart and other circulatory diseases, and cancer are, once more, the chief causes of death. When one looks through the Annual Reports for the last 50 years one finds that communicable diseases which can be prevented by vaccination, and diseases such as tuberculosis, which can be successfully treated with drugs have decreased in a dramatic manner.

Publicity given to the connection between smoking and lung cancer and certain heart conditions brings little success. Too often the young look on smoking as a state of being "grown-up," while for the "grown-ups" it has become a habit too difficult to break.

The only change in the medical staff was the retirement of Dr. Gladys M. Herbert, Divisional Medical Officer of Health. We wish her well in her retirement. The nursing staff, however, showed many changes and the following retired after many years service with the Authority:—

Miss G. M. Burford.

Mrs. S. E. V. Jones.

Mrs. E. J. Davies.

Mrs. A. James.

Mrs. S. A. Davies.

Mrs. R. H. Davies.

Miss E. J. M. Jones.

Mrs. H. E. A. Ratford.

It was with great regret that we learned of the death of Mr. Emlyn Lewis, the Consultant Plastic Surgeon. The services rendered by Mr. Lewis were internationally recognised. His passing is a great loss.

The condition of the teeth of the children in our schools, as in previous years, is still deplorable, and this is a stigma on the Authority for its attitude towards preventive measures. The Department of Health and Social Security have strongly advocated the adoption of fluoridation

of water supplies but the Authority have continued to reject this advice with the result that the children suffer undue pain and harm, and will continue to do so.

In spite of all difficulties, Mr. W. Llewelyn, Principal Dental Officer, and his staff provide an efficient service and our thanks are due to them for their continued efforts. The comments of Mr. Llewelyn appear later on in the report.

As in previous years the Home Help Service continues to give 90 per cent. of its aid to the chronic sick and elderly. At times it has been difficult to find Home Helps in certain areas but it is rarely that the Organisers have failed to satisfy the needs of the community although this has meant that at times the Home Helps have had to travel some distance to give their service.

The Adult and Junior Training Centres are continuing to do good work but once the new Adult Training Centre is opened in Llanelli the position will improve. With the transfer of the adult women contained at present in the Junior Training Centre to the Adult Training Centre all the children on the waiting list can be admitted.

As you can see from perusal of the Ambulance Officer's report there has again been an increase in the mileage and number of patients carried by the ambulances. Before the Hospital Authority develops a new service such as day centres I feel there should be a full consultation between them and this Authority to explore what will be the demands on the ambulance service and how we can best meet it. The ambulance staff have been hard pressed to provide an efficient service and I compliment them on their efforts. They have always dealt with the patients in a pleasant and polite manner and at all times have kept the ambulances clean. With the non-availability of stretcher accommodation on railways, the Authority should now consider buying what one could classify as luxury ambulances which would give the injured and sick a comfortable journey on long distances. With the build up of traffic during the summer months consideration may have to be given to a combined helicopter service to ensure the early arrival in hospital of the critically injured.

Tribute must be paid to Miss Dorothy Davies, School Meals Organiser, for her ever conscious appreciation of the importance of good hygiene by continuing to include lectures on this subject in her training courses for canteen staff. Dr. Danaher, my Deputy, and Miss Cummins, Assistant Nursing Officer, have been responsible for these lectures.

Dr. Danaher also lectured to dairy workers at short courses held at Pibwrlwyd Rural Technical College. The Department fully co-operated in connection with the N.N.E.B. course at Ammanford Technical College. Lectures were given by Dr. Danaher, Miss E. Evans, Chief Nursing Officer and the local Health Visitors.

During the year we developed and implemented a new scheme for district nurse training. The scheme was launched in September, 1969. Miss Davies, Deputy Chief Nursing Officer, was appointed Course Organiser and she put a tremendous effort into this project. Full support was given by Hospital Consultant staff, local Authority staff and other Lay Specialists. The result of this effort was a 100 per cent. pass and Miss Davies is to be congratulated on her effort. The pattern I hope will be repeated next year. In the office Mr. Ken James has assisted in the smooth administration of the scheme.

Much discussion took place on the second Green Paper but it does not seem to have found favour with many factions of the medical profession or with the local Authorities, but basically the idea of a unified medical service is sound and would be of benefit to the community.

There was less discussion on the Seebohm report on the social services when I feel there should have been a lot more. I consider that the idea of separating Medical and Social Services is a detrimental step.

All the Schools were visited and children examined in accordance with the requirements of the Department of Education and Science. There are no points to which special reference need be made.

A great deal of preparatory work was undertaken in connection with the selective examination of pupils which will be introduced next year and I must pay special tribute to the assistance given me by Mr. W. R. Davies in connection with this.

It is pleasing to report that we have been successful in securing the services of a peripatetic teacher for the deaf who is at present undergoing a further course of training. Further reference is made in the body of the report to the development of the service for the deaf.

I acknowledge the support I have received from Aldermen, Councillors and Mr. W. S. Thomas. As in the past the Treasurer and his staff have been most helpful. Mr. Dunton and his staff have given me valuable advice in the development of Health Centres, Clinics and Training Centres. As usual I have had full consultation and support from the Director of Education and his staff. My appreciation to my colleagues on the medical side, especially to Dr. Danaher, who as always shows such dedication to his work. Miss Evans, the Chief Nursing Officer, in spite of shortages and changes of staff has managed to keep the service efficient.

Mr. Owen, my Chief Administrative Officer, has again seen that the efficiency of the staff is maintained at a high level.

D. G. G. JONES,

County Medical Officer of Health.

Principal School Medical Officer

HEALTH AND SOCIAL SERVICES COMMITTEE, 1969

Chairman : Councillor Haydn Lewis, O.B.E.

Vice-Chairman : Councillor T. W. Davies.

Aldermen :

W J. Davies (Llandovery).

S. O Thomas.

W. J. Davies (Llanelli).

W. J. Franklin Thomas,

Josiah Jones, M.B.E.

O.B.E, D.L.

Councillors :

D. Idris Davies.

T. Idwal Jones.

E. T. Davies.

D. L. W Morris.

Idris Evans.

B. Owen.

W. Evans.

D. T. Price.

D. D. Harries.

C. H. Robertson.

J. A. J. Harries.

D. C. Thomas (Burry Port).

D. A. James.

D. C. Thomas (Llandissilio).

D. W. James.

S. I. Thomas.

H. G. James.

A. T. Wilkins.

SCHOOL SERVICES SUB-COMMITTEE

Chairman : Miss Mollie D. Phillips.

Vice-Chairman : Councillor Haydn Lewis, O.B.E.

Aldermen :

J. H. Davies.

Labor Dennis.

Councillors :

W. I. Daniel.

J. James.

T. W. Davies.

T. Idwal Jones.

C. D. Evans.

G. Lewis.

Idris Evans.

L. R. McDonagh.

T. Evans.

B. Owen.

W. Evans.

D. T. Price.

Austin Griffiths.

D. J. Richards.

D. D. Harries.

D. C. Thomas.

W. Harry.

D. M. Thomas.

S. J. Howells.

A. T. Wilkins.

D. T. Williams.

HEALTH AND SCHOOL HEALTH OFFICERS OF THE COUNTY COUNCIL

County Medical Officer of Health and Principal School Medical Officer :

D. G. G. Jones, M.B., B.S., D.P.H.

Deputy County Medical Officer of Health and Deputy Principal School Medical Officer :

M. G. Danaher, M.B. B.Ch., B.A.O., L.M., D.P.H.

Chief Administrative Officer :

W. G. Owen.

Principal Dental Officer :

W. E. T. Llewelyn, L.D.S., R.C.S.

Chief Nursing Officer :

Miss E. Evans, S.R.N., S.C.M., H.V.Cert., Cert. of Nursing Admin.
(Public Health).

Organiser of Home Helps :

Miss Joan M. Crossman.

County Ambulance Officer :

G. B. Evans, M.B.E.

Department Medical Officers :

C. I. Morgan, M.R.C.S., L.R.C.P.

E. Lynette Davies, B.Sc., M.B., B.Ch., D.R.C.O.G.

Audrey A. Jones, M.B., Ch.B.

Ann H. Rees M.B., B.Ch.

P. R. E. Williams, M.R.C.S., L.R.C.P., M.B., B.S.

Olwen Williams, B.Sc., M.B., B.Ch.

*E. H. Beynon-Hopkins, M.R.C.S., L.R.C.P., D.P.H. (part-time).

*Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (part-time) (ceased
15/7/69).

*M. Steane, M.B., Ch.B., D.P.H. (part-time) (commenced 1/9/69).

Elizabeth T. Davies-Humphreys, M.R.C.S., L.R.C.P. (part-time).

A. Nest M. Crane, B.Sc., M.B., B.S., D.C.H. (part-time).

Mair Walker, M.B., Ch.B. (part-time)

Mary Ll. Morgan, J.P., B.Sc., M.B., B.Ch. (part-time).

Jean Jenkins, M.B., B.S. (part-time).

*Divisional Medical Officer of Health.

School Dental Officers :

D. L. Walters, L.D.S., R.C.S.

T. J. Thomas, L.D.S., R.C.S.

S. C. R. Evans, B.D.S. (U. London), L.D.S., R.C.S.

P. M. Llewelyn, B.D.S. (part-time).

K. A. Treharne, B.D.S. (London), L.D.S., R.C.S. (part-time).

Dental Auxiliary :

Mrs. J. D. James.

Administrative Assistants :

W. R. Davies.

K. A. T. James.

Deputy Chief Nursing Officer :

Miss N. I. Davies, S.R.N., S.C.M., H.V.Cert., Q.N., Certificate of
Nursing Admin. (Public Health).

Assistant Nursing Officer :

Miss B. C. Cummins, S.R.N., S.C.M., H.V.Cert., Q.N.

Senior Orthopaedic Sister :

Miss E. R. Buckley, M.C.S.P.

Assistant Orthopaedic Sister :

Vacant.

Speech Therapists :

Mrs. J. V. W. Jones, L.C.S.T. (part-time) (ceased 19/12/69).

Mrs. R. M. Stewart, L.C.S.T. (part-time).

Mrs. G. Jones, L.C.S.T. (part-time).

Assistant Organisers of Home Helps :

Mrs. E. J. Griffiths.

Miss M. M. Y. Hughes.

Mrs. L. E. Jenkins (Temp.) (ceased 3/1/69).

Mrs. E. G. Rice (Temp.) (commenced 17/3/69)

Chiropodist :

Mrs. M. J. Lloyd, M.Ch.S. (part-time).

Dental Attendants :

Mrs. V. M. Arundel.

Miss E. B. Evans.

Miss A. M. Maliphant.

Mrs. M. A. Hughes.

Miss J. Jenkins.

Head Social Worker, Mental Health :

H. Lewis, A.A.P.S.W., Dip.Soc.Sci.

Mental Welfare Officers :

W. O. Williams, Dip.Soc.Sci.

Mrs. M. M. Clarke, C.S.W. (ceased 14/2/69).

Miss M. Williams, Dip.Soc.Admin.

A. J. Bennett.

Mrs. J. M. Hennah, Dip.Soc.Sci., S.E.N., P.S.W. (commenced 1/10/69).

Mental Welfare Assistants :

D. P. Jones.

Mrs. A. L. Skinner.

Mrs. H. Hughes.

Acting Mental Welfare Officers :

*J. A. D. Hopkins.

*D. G. Jones.

*Esmor Evans.

*D. J. Lewis.

*J. I. Stephens C.S.W.

*D. A. David, C.S.W.

*Also County Welfare Officers.

Supervisor, Llanelli Junior Training Centre and Home Teacher for Mentally Subnormal :

Mrs. M. A. Lewis.

Senior Assistant Supervisor and Home Teacher for Mentally Subnormal :

Mrs. J. M. Jones.

Assistant Supervisors :

Miss P. A. Davies.

Mrs. M. Y. Russ.

Mrs. B. E. Bowen.

Mrs. H. Thomas, N.N.E.B. (Nursery).

Mrs. C. George, S.E.N. (Special care unit).

Manager/Supervisor Adult Training Centre :

D. E. Ambrose.

Male Instructor :

G. Daniels.

Assistant Supervisors :

Miss G. S. Brown.

Miss E. M. Davies.

Matron—Residential Home :

Mrs. L. Christopher, S.R.N.

Assistant Matron :

Miss A. M. Thomas, S.R.N.

Home Teachers and Visitors for the Blind :

S. Davies.

Miss S. M. Tidmarsh.

Mrs. F. Perry.

Mrs. M. Evans (ceased 31/12/69).

Welfare Officer for the Handicapped :

Miss Myra Thomas.

Welfare Officer for the Deaf :

J. M. Roberts.

Occupational Therapist :

Mrs. R. Jones.

County Analyst :

D. C. Jenkins, M.Sc., D.I.C., F.R.I.C.

Inspectors under Food and Drugs Act :

Chief Inspector E. G. Nicholls, M.I.S.A.A., M.I.W.M.A.

Deputy Chief Inspector G. W. Beynon, M.I.W.M.A.

Educational Psychologist :

C. B. E. James, B.A., B.Ed., Ph.D., F.B.P.S.

CONSULTANTS AVAILABLE FOR COUNTY HEALTH SERVICES

Pathologists :

D. F. Davies, M.D., M.R.C.P., M.C.Path.
A. L. Wells, M.D., M.R.C.P., D.C.P., F.C.Path.

Public Health Laboratory Service :

H. D. S. Morgan, M.R.C.S., L.R.C.P., M.C.Path., Dip. Bact.

Chest Physicians :

J. T. Jones, B.Sc., M.B., B.Ch.
D. B. Ll., Morgan, M.D.

Assistant Chest Physician :

J. Williams, B.Sc., M.B., B.Ch.

Venereologist :

M. M. Beveridge, L.R.C.P., L.R.C.S., L.R.F.P.S.

Obstetricians :

J. R. E. James, B.Sc., M.B., F.R.C.S., F.R.C.O.G.
J. D. Llywelyn Jones, M.B., B.Chir., F.R.C.S., M.R.C.O.G.

Orthopaedic Surgeons :

G. D. Rowley, B.Sc., M.Ch.
R. L. Rees, F.R.C.S.

Ophthalmic Surgeons :

G. S. Forrester, M.B., Ch.B., D.O.M.S.
R. E. Packer, B.Sc., M.B., B.Ch., D.O.M.S.
A. H. Haley, B.Sc., M.B., Ch.B., D.O.

Audiologist :

Hector A. Thomas, F.R.C.S., Cardiff.

Ear, Nose and Throat Surgeons :

S. Morgan, B.Sc., F.R.C.S.
W. I. Jones, F.R.C.S.

Plastic Surgeon :

A. Schofield, M.B., Ch.B., F.R.C.S.
M. N. Tempest, M.D., Ch.M., F.R.C.S.

Paediatricians :

R. T. Jenkins, B.Sc., M.B., B.Ch., M.R.C.P., D.C.H.
K. R. Keay, M.D., M.R.C.P., D.C.H.
W. R. Forbes, M.B., B.Ch., B.A.O., M.R.C.P., D.C.H.,
D.Obst.R.C.O.G.

General Medicine :

E. A. Danino, M.D., F.R.C.P.
G. R. Davies, M.D., M.R.C.P.
J. N. Harries Jones, M.D., F.R.C.P.
Eirian Williams, M.D., M.R.C.P.

Geriatricians :

J. C. Davies, M.B., B.S., M.R.C.P.
T. F. McCarthy, B.Sc., M.D., M.R.C.P.

Dermatologist :

D. Leighton Rees, M.D., M.R.C.P.

Orthodontist :

W. A. B. Brown, L.D.S., D.Orth., R.C.S.
D. Seel, F.D.S., D.Orth., R.C.S.

Dental Surgeon :

E. J. R. Morgan, M.B., Ch.B., F.D.S., R.C.S.

Neurologist :

B. M. Phillips, M.B., B.S., M.R.C.P.

Neuro Surgeons :

D. C. Provan, F.R.C.S.
P. J. E. Wilson, F.R.C.S.

Hon. Consultant Psychiatrist :

John Farr, M.B., B.S., D.P.M.

Psychiatrists :

E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M.
N. J. C. McGill, M.B., B.S., D.P.M.
M. T. Stather-Dunn, M.B., B.Ch., D.P.M.
H. Edwards, M.B., B.S., M.R.C.S., L.R.C.P., D.P.M.

Child Psychiatrists :

J. McDonald, M.A., M.B., Ch.B., D.P.M.
Evan W. Davies, M.B., B.Ch., M.R.C.P., D.P.M.

Psychiatrists in Subnormality :

Margaret E. Morgan, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.M.
D. C. Jones, L.M.S.S.A., D.P.M.

NURSING

	Name	Qualifications
Whole-time Health Visitors :		
Amman Valley	M. G. Evans	S.R.N., S.C.M., H.V.Cert.
Ammanford (No. 1)	I. M. Beynon	S.R.N., S.C.M., H.V.Cert.
Ammanford (No. 2)	N. D. Williams	S.R.N., S.C.M., H.V.Cert.
Bancyfelin	E. N. E. Davies	S.R.N., H.V.Cert.
Burry Port	G. M. H. James	S.R.N., S.C.M., H.V.Cert.
Carmarthen Borough	E. M. Williams	S.R.N., S.C.M., H.V.Cert.
	D. Evans Murray	S.R.N., S.C.M., H.V.Cert.
Felinfoel	E. M. Jones	S.R.N., S.C.M., H.V.Cert.
Gwendraeth	M. E. Morris	S.R.N., S.C.M., H.V.Cert.
Kidwelly	G. M. Williams	S.R.N., S.C.M., H.V.Cert.
Llandeilo	G. Demery	S.R.N., S.C.M., H.V.Cert.
Llandovery	D. Bowden	S.R.N., H.V.Cert.
Llandybie	M. M. Davies	S.R.N., H.V.Cert.
Llanelli Borough	D. C. Insley	S.R.N., S.C.M., H.V.Cert.
	S. A. Richards	S.R.N., S.C.M., H.V.Cert.
	M. E. Jones	S.R.N., S.C.M., H.V.Cert.
	E. M. Perrott	S.R.N., S.C.M., H.V.Cert.
	J. Jones	S.R.N., S.C.M., H.V.Cert.
Llangendeirne	M. E. Thomas	S.R.N., S.C.M., H.V.Cert.
Llangennech	E. Edwards	S.R.N., S.C.M., H.V.Cert.
Llanybyther	M. Stephenson	S.R.N., S.C.M., H.V.Cert.
Nantgaredig	A. M. Morse	S.R.N., S.C.M., H.V.Cert.
Newcastle Emlyn	B. F. Tidmarsh	S.R.N., S.C.M., Q.N., H.V.Cert.
St. Clears	M. E. E. Davies	S.R.N., S.C.M., H.V.Cert.
Tumble	A. T. Muir	S.R.N., S.C.M., H.V.Cert.
*Whitland	P. A. Davies	S.R.N., S.C.M., Q.N., H.V.Cert.
Relief	M. M. Cummins	S.R.N., S.C.M., Q.N., H.V.Cert.
* Also undertakes some midwifery duties		
District Nurse/Midwives :		
Ammanford	M. Branch	S.R.N., S.C.M., Q.N.
	M. A. Thomas	S.R.N., S.C.M.
	G. Edwards	S.R.N., S.C.M., Q.N.
	S. E. Rees	S.R.N., S.C.M.
Brynamman	T. E. Griffiths	S.R.N., S.C.M., Q.N.
Burry Port	M. J. Davies	S.R.N., S.C.M.
	M. Evans	S.R.N., S.C.M.
Caeo	M. M. Jones	S.C.M., S.E.N.
Carmarthen	M. A. James	S.R.N., S.C.M.
Garnant	S. E. James	S.R.N., S.C.M., Tb.Cert.
Glanamman	V. Sharp	S.R.N., S.C.M.
Cynwyl Elfed	E. Thomas	S.R.N., S.C.M., Q.N.
Dafen	S. Walters	S.R.N., S.C.M.
Drefach	E. A. Jones	S.R.N., S.C.M.
Felinfoel	H. M. Jones	S.R.N., S.C.M.
Ferryside	E. F. Rees	S.R.N., S.C.M.
Gorslas	M. P. Jones	S.R.N., S.C.M.
Kidwelly	C. M. Thomas	S.R.N., S.C.M.
Laugharne	E. John	S.C.M., S.E.N.
Llandeilo	H. Harry	S.R.N., S.C.M., Q.N.
Llandeilo (South)	S. A. N. Price	S.R.N., S.C.M.
Llandovery	M. M. Ladd	S.R.N., S.C.M.
Llandybie	L. Thomas	S.R.N., S.C.M.
Llanelli	C. D. Harries	S.R.N., S.C.M.
	J. Price	S.R.N., S.C.M.
Llanfihangel-Aberbythich	A. M. Pugh	S.R.N., S.C.M.
*Llangadog	Vacancy	
Llangennech	D. G. John	S.R.N., S.C.M.
	Vacancy	

	Name	Qualifications
Llansadwrn and Llanwrda	D. E. Davies	S.C.M., S.E.N.
*Llansawel	M. M. M. John	S.R.N., S.C.M.
Llanybyther	D. Thomas	S.R.N., S.C.M.
Llwynhendy	M. A. Rees	S.R.N., S.C.M.
Newcastle Emlyn	Vacancy	
Pencader	S. J. Jones	S.R.N., S.C.M.
Penygroes	L. M. Davies	S.R.N., S.C.M., Q.N.
	K. J. Pryce	S.R.N., S.C.M., Q.N.
Pontyates	Vacancy	
Pontyberem	A. M. Hughes	S.R.N., S.C.M.
St. Clears	S. H. Griffiths	S.R.N., S.C.M.
Tumble	R. M. F. Waters	S.R.N., S.C.M.
Trimsaran	H. R. Morgan	S.R.N., S.C.M.
Velindre	G. R. Luke	S.R.N., S.C.M.
Whitland	R. E. Hopkins	S.R.N., S.C.M., Q.N.

* These posts have been redesignated District Nurse but while nurse holds C.M.B. certificate she will continue to practice midwifery.

District Nurses :

Brechfa/Llanfynydd	B. Y. Edwards	S.R.N.
Carmarthen	M. O. Davies	S.R.N., S.C.M.
	E. M. Husband	S.R.N., Q.N.
	H. Jones	S.R.N., Q.N.
	E. G. Thomas	S.R.N., S.C.M., Q.N.
Llanboidy	E. M. Adams	S.R.N., Q.N.
Llanelli	H. Bushell	S.R.N., Q.N.
	G. Honour	S.R.N.
	E. J. Somers	S.R.N., S.C.M.
	J. B. Tasker	S.R.N., Q.N.
Nantgaredig/Llangathen	A. E. C. Rees	S.R.N.

Whole-time Midwives :

Carmarthen	E. M. James	S.R.N., S.C.M.
	M. D. Jones	S.R.N., S.C.M.
	M. J. Thomas	S.R.N., S.C.M.
Llanelli	M. David Griffiths	S.R.N., S.C.M.
	K. Y. Perrott	S.C.M.

Relief District Nurse/Midwives :

Ammanford	B. Williams	S.R.N., S.C.M.
Gwendraeth	Vacancy	
Llandeilo	P. B. Rees	S.R.N., S.C.M.
Llwynhendy/Burry Port	M. E. Thomas	S.R.N., S.C.M., H.V.Cert.

Relief District Nurses :

Ammanford	Vacancy	
Carmarthen/Ferryside/ Kidwelly	M. J. Wiltshire	S.R.N.
Llandovery	H. A. Jenkins, J.P.	S.R.N.
Llanelli	L. Jones	S.R.N.
Pencader	E. M. Davies	S.R.N.
St. Clears	A. G. Blain	S.R.N.

Clinic Nurses :

Ammanford	R. N. Llewelyn	S.R.N.
Llanelli	E. M. Thomas	S.R.N., Tb.Cert.

Part-time :

Carmarthen	M. L. Keir	S.E.N., S.C.M.
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Part-time Relief :

Ammanford	B. M. Collins	S.R.N.
Llanelli	N. Jones	S.R.N.

GENERAL

Area : 588,472 acres.

Population—Census 1961 : 168,008.

Estimated by Registrar General for 1969 : 163,600.

Product of a Penny rate for general purposes : £18,305.

Rateable Value for general purposes : £4,728,005.

In area, the County of Carmarthen is the largest of the Welsh Counties, but in estimated population it lies fourth. The density of population per acre (0.28) emphasises the fact that a large part of the County is rural and sparsely populated and, unfortunately, the estimated population for 1969 showed a continued fall.

Carmarthenshire is predominantly rural in character with dairy farming on the rich pastures of the Towy Valley and coastal lowlands giving way to forestry and sheep farming on the high land to the north. Only in the extreme south east of the county is there any concentration of population and industry. Here employment in the traditional industries of coal mining, iron production and tinplating has been substantially reduced but an influx of new firms combined with rationalisation in the coal mining industry has led to the emergence of a more balanced economic structure.

In addition to primary, secondary modern, high and grammar schools, there are in the County three technical colleges, an agricultural institute, a Public school and a teachers' training college.

The hospitals in the County are one district hospital at Carmarthen, a general and eye hospital at Llanelli, a general hospital with general practitioner beds at Glanamman, a cottage hospital at Llandovery and a maternity hospital at Llanelli.

The county has almost 45 miles of coastline varying in character from extensive stretches of sandy beaches to quiet, secluded estuaries. This coastline together with the rugged highlands of the Beacons National Park and the proposed Cambrian Mountains National Park offers both residents and visitors exceptional opportunities for outdoor leisure activities including sailing, swimming, fishing, sightseeing and hiking.

STATISTICS

There was a slight decrease in the number of births and this was also reflected in the number of illegitimate births. It is very pleasing to note that the number of still births (31) and the rate per thousand live births (14.0) was the lowest ever recorded in the County.

There was a drop in the infant mortality rate from 22.0 in 1968 to 18.0 in 1969 but, unfortunately, the rate is so variable from year to year that the trend is not apparent.

The Registrar General's Returns show no maternal deaths in the County and it is of much satisfaction that this is the fifth consecutive year in which there have been no maternal deaths.

There was no very significant increase or decrease in any other cause of death over the previous year, but the figures over the last few years show a continuing slight upward trend in deaths from heart and other circulatory diseases, and vascular lesions.

ADMINISTRATION

The County Health Services were administered by the Health and Public Health Committee and the School Health Service by the General Welfare Sub-Committee of the Education Committee. As part of the

Authority's re-organisation in the light of the Maud Report, the Health Committee ceased to function as a separate Committee. The new Committee—The Health and Social Services Committee replaced the County Health Committee, County Welfare Committee, Children's Committee and the Diseases of Animals Committee. This has the advantage that matters which previously had to be referred from one Committee to the other can now be considered at one meeting. Co-operation and liaison between these services was already very good, but with the advent of one Committee, there should be even better liaison.

The County Education Committee replaced the General Welfare Sub-Committee by a School Services Sub-Committee which also deals with matters other than the School Health Service.

The Llanelli Divisional Executive Committee is responsible for the medical and dental inspection of pupils attending schools in the Division in accordance with the requirements of the Department of Education and Science and with the directions of the Education Authority. They are required to ensure, so far as possible, that such children as require treatment are in fact treated either under arrangements made by the Authority or through the National Health Service. They are also responsible for ensuring the cleanliness of pupils, investigation of any outbreak of communicable diseases in school children and for securing the hygienic condition of all educational establishments in the area.

There are no formal joint administrative arrangements with other local Health Authorities, but arrangements have been made with Glamorgan, Pembrokeshire and Cardiganshire Authorities for Ambulance Services along the border areas. Arrangements have also been made with the Glamorgan Authority for home nursing and midwifery services in the Cwmllynfell and Garnswllt areas and with Pembrokeshire Authority in respect of the Clynderwen and Whitland areas.

JOINT USE OF STAFF

It is the Authority's policy to employ Department Medical Officers as Medical Officers in charge of Child Health Clinics. There is, however, one Child Health Clinic with a general medical practitioner as Medical Officer in Charge.

Department Medical Officers attend in turn at the Paediatric Out-Patient's Clinic at the West Wales General Hospital for one session a week. This practice has been found to be very useful and has greatly improved liaison with the Consultant Paediatrician and has assisted in the continuity of medical investigation and treatment of children.

The Orthopaedic Sister, when required, treats hospital orthopaedic in-patients, particularly infants born with congenital defects.

The arrangements of the Authority for the Mental Health Service provide for the joint use of staff with the Hospital Board.

The Physician Superintendent of St. David's Hospital is the Honorary Consultant Psychiatrist to the Authority.

The Consultant Chest Physicians of the Hospital Board undertake for the Authority duties in connection with the prevention and after care of tuberculosis.

The Consultant Orthopaedic Surgeons under the Hospital Board also attend the County Orthopaedic Clinics.

The Head Social Worker assists the Consultant Child Psychiatrist at the Carmarthen Child Guidance Clinic.

The services of the Geriatricians appointed for the two Hospital Management Committees are available for the welfare services of the Authority.

The County Medical Officer of Health attends the meetings of the two Hospital Management Committees and the Carmarthenshire Executive Council. In addition, the County Medical Officer is a member of the Maternity Liaison Committees, Mental Health and Geriatric Liaison Committees of both Hospital Management Committees and also of the Group Medical Advisory Committee of the South West Wales Hospital Management Committee.

Students from the three Nurse Training Schools in the County spend one day, usually during the third year of training, accompanying domiciliary nurses, midwives and health visitors on their home visits, and also visit the clinics. Talks are given to the students by the Authority's Senior Nursing Staff.

Students from the Psychiatric Hospital Training School also accompany the Mental Welfare Officers on their visits and they are given talks by the Head Social Worker.

Members of the professional staff give lectures to students attending the National Nursery Examination Board Course at the Ammanford Technical College.

IN-SERVICE TRAINING

Every effort is made to encourage in-service training for all members of the staff. This is in addition to refresher courses.

Regular sessions were arranged for the health visitors, midwives and district nurses. Six sessions were held during 1969.

One session in-service training courses for casual home helps were held at Carmarthen, Llanelli and Ammanford. 46 home helps attended.

Tribute must be paid to Hospital Consultants and Lay Consultants in other fields and also members of the Authority staff who have so readily given of their time to lecture and demonstrate at these sessions.

Two members of the administrative staff were seconded to the South West Wales Hospital Management Committee Group Office for one week and to the West Wales District Hospital for one week. Appreciation of the co-operation of the Group Secretary and Hospital Secretary must be put on record.

STAFF MEETINGS

Quarterly meetings are held by the medical staff to discuss policy and current trends in medicine.

VOLUNTARY ORGANISATIONS

The work of the Voluntary Organisations still plays an important part in the Health Services. Unfortunately, in some fields, the trend is towards reduced availability of voluntary workers.

Tributes must be paid to the undermentioned Voluntary Organisations for their continued activities in connection with the services mentioned:—

Voluntary Ladies' Committees—Attendance at Child Health Clinics and distribution of National Welfare Foods.

County Branch of the Women's Royal Voluntary Services—Hospital Car Service; Distribution of National Welfare Foods; Allowing the use of the Llanelli office as a Home Help Information Bureau.

British Red Cross Society—Arranging escorts for patients travelling by ambulance; Providing a chiropody service; Supervising swimming lessons for pupils from the Training Centres.

St. John's Priory for Wales—Providing a Chiropody service.

Old People's Associations and Local Welfare Associations—Providing a chiropody service.

St. David's Diocesan Moral Welfare Committee—Care and Rehabilitation of Unmarried Mothers and their children. The Authority make a financial grant to the Committee in respect of this assistance.

A great deal of work in connection with problem families and neglected children is undertaken by the Inspectors of the National Society for the Prevention of Cruelty to Children, but assistance in this field is made through the Children's Officer.

HEALTH CENTRES

Little progress can be reported in connection with Health Centres. At the end of the year, there was still only one Health Centre—Llwynhendy Centre—in the County. It is, however, hoped that there will be a start on the Kidwelly Centre before the end of the financial year.

There are various reasons for delays and reluctance in providing Centres. Most of the reasons stem from the financial aspects of the project, and many of these could be cleared up quickly if firmer guidance lines were laid down centrally on the question of charges for the use of Health Centres. This is not a local problem, it is a national one and should be dealt with centrally.

USE OF LOCAL AUTHORITY CLINICS BY GENERAL PRACTITIONERS

General practitioners have been allowed the use of Laugharne and Llandovery clinics as surgeries. In Laugharne the clinic is used as a branch surgery but in Llandovery it is the main surgery.

DOMICILIARY HEALTH SERVICES—ELDERLY, SICK AND INFIRM

The Care of the elderly, sick and infirm continues to present problems. Where should the elderly sick be cared for—in hospital or at home? The problem varies in each case because of the circumstances and the attitude of the patient. Local Authority domiciliary care is available by district nurses, health visitors and home helps, but if the patient is bedridden and living alone, these services are in themselves not sufficient. In these cases in particular, greater voluntary activity would be very welcome.

During 1969, 2,459 patients of 65 years of age were attended by district nurses and 450 were visited by health visitors. Home help assistance was provided for 866 elderly sick.

MATERNITY AND CHILD WELFARE

Attendances at the Ante Natal clinics showed a decrease as compared with 1968. This is probably due to the fact that more general practitioners hold their own clinics. Attachment of health visitors and midwives to general practitioners has a bearing on this. Cases referred from the Authority's clinics for Specialist opinion are sent to the Consultant

clinics at the West Wales General Hospital, Carmarthen, Llanelli Hospital, and the Amman Valley Hospital, Glanamman. Copies of the Consultants reports are sent to the general practitioners as are also the results of blood specimens taken at the clinic and the rhesus agglutinins.

A Mothercraft/Relaxation Class was commenced at Ammanford in June. The success of these classes is reflected in the good attendances at each session at the five clinics in the County.

Maternity Outfits are supplied by the Authority free of charge through the domiciliary midwives to all patients confined at home. Outfits are also supplied to patients confined in hospital but discharged within 48 hours of delivery.

Personal record cards are provided and serve as means of ensuring continuity of ante-natal care.

Tallquist Haemoglobin charts are issued to all midwives to enable them to estimate the haemoglobin of every maternity patient booked and to refer all cases of anaemia as soon as possible to the general practitioners.

Unmarried Mothers are referred to the Moral Welfare Workers of the St. David's Diocesan Moral Welfare Committee who arrange for admission to a Hostel, assist with any maintenance orders and also with the problem of rehabilitation. The Moral Welfare Committee is also a registered Adoption Society. Twelve unmarried mothers were admitted to Hostels under the arrangements of the Authority during the year.

Attendance at the Authority's 37 Child Health Clinics continues to be excellent in spite of the fact that accommodation at some rented premises leaves much to be desired.

Premature baby outfits are available to midwives during normal offices hour at the County Health Department and at any time of the day or night at Llanelli Ambulance Station. A portable Oxygenaire incubator is available at the Ambulance Service Headquarters, Carmarthen, for the transfer of premature infants to hospitals. Of the 138 premature infants notified during 1969, 21 died within the first 28 days. Death was due to prematurity or directly associated causes in respect of 18 infants. Malformations and definite pathological conditions were responsible for the death of the other 3 infants.

All arrangements for the medical treatment of school children are also available for those under school age. However, as a general rule, Medical Officers of Child Health Clinics refer infants to family doctors for treatment.

One case of cleft lip and palate is known to have been treated during the year by the Plastic Surgeon.

There is no change in the Authority's arrangements for Orthopaedic treatment. Mr. Gordon Rowley and Mr. R. L. Rees attend clinics in the County and children requiring in-patient treatment are admitted to Gorseinon, Morriston and the West Wales General Hospital.

Infants at Risk of Handicapping Conditions

Provision has been made on the Notification of Births Forms to enter particulars of any At Risk conditions found in infants. All midwives and hospitals in the County have been supplied with a list of these conditions. The current list is given below:—

Pre-Natal :

1. Rubella or other virus infection in first 16 weeks of pregnancy.
2. Blood incompatibilities, e.g., rhesus sensitization.

3. Hyperemesis.
4. Ante-partum haemorrhage.
5. Severe illness necessitating chemotherapy or major surgery in early months of pregnancy.
6. X-ray other than chest X-ray.
7. Thyrotoxicosis.
8. Diabetes.
9. Toxaemia of pregnancy.
10. Other complications of pregnancy, e.g., pyelitis.
11. Any psychiatric illness in pregnancy.

Peri-Natal :

12. Prolonged or difficult labour.
13. Post-maturity.
14. B.W. under 5½ lbs. ; gestation under 36 weeks.
15. Foetal distress.
16. Birth asphyxia.
17. Prolonged poor sucking.

Post-Natal

18. Jaundice.
19. Convulsions.
20. Respiratory distress ; cyanotic attacks.
21. Any congenital abnormalities.

Genetic

22. Family history of deafness, blindness, etc.
23. Symptomatic Group.
24. No applicable factor.

519 individual children were reported ' at risk ' during the year.

Congenital Malformations

During 1969, 27 children (19 live and 8 still births) were reported as having a malformation observable at the time of birth.

Ruth Griffiths Test

The Ruth Griffiths hearing test and mental development scales are performed to assess hearing acuity and intelligence. The investigations are performed by Department Medical Officers specially trained in the work. Premature infants and those suffering from haemolytic disease of the newborn are given these specialised tests as also are any other infants referred by Consultant Paediatricians.

Phenylketonuria

Tests by means of phenistix were carried out by health visitors in respect of every infant during the fifth or sixth week of life. No positive reaction to these tests was reported by the health visitors during 1969.

The implementation of the arrangements for tests by the Guthrie method was deferred pending the receipt of further information from the Hospital Board in regard to the Woolf Test.

Ophthalmia Neonatorum

One case of Ophthalmia Neonatorum was notified by a Hospital ; this was an out-county patient.

Welfare Foods

Distribution of Welfare Foods at Llandeilo was transferred from the Urban District Council Offices to the Child Health Clinic in February. At the end of the year, the foods were being distributed from 43 centres in the County as follows:—

- 2 Centres staffed by whole-time employees.
- 4 at the offices of the County District Authorities.
- 23 at Child Health Clinics.
- 14 Voluntary Centres.

There was a considerable drop in the distribution of National Dried Milk—a reduction of over 31 per cent. on the previous year. The distribution of Orange Juice and Vitamin Tablets on the other hand showed an increase of over 13 per cent. There was little difference in the sale of Cod Liver Oil.

Special brand of baby foods are available at the majority of Child Health Clinics under arrangements made by voluntary workers or health visitors. At the Llanelli Child Health Clinic, proprietary baby foods are sold by the staff of the National Welfare Foods Distribution Centre.

Dental Treatment

The arrangements for the dental treatment of expectant and nursing mothers, and young children was undertaken through the School Dental Service.

FAMILY PLANNING CLINICS

As for 1968, the financial position made it impossible to implement in 1969 the comprehensive scheme adopted by the Authority under the provision of the National Health Service (Family Planning) Act, 1967.

The Authority, however, continued to make a grant to the Carmarthenshire Branch of the Family Planning Association in respect of advice and treatment for patients likely to suffer detriment to their health as the result of pregnancy. Clinics are held by the Association in the County as follows:—

Ammanford—The Clinic, High Street, 2nd and 4th Thursdays of the month.

Carmarthen—West Wales General Hospital, Glangwili, first four Mondays of the month.

Llanelli—The General Hospital, 2nd and 3rd and 4th Tuesdays of the month.

NURSERIES AND CHILD MINDERS

The Health Service and Public Health Act 1968 has amended the Nurseries and Child Minders Regulation Act, 1948. Under the amendments, a woman who receives into her home for reward one child of whom she is not a relative, and a Nursery or Playgroup held for an aggregate of two hours or more in any day, have to register. The new conditions have resulted in a considerable increase in the number of Nurseries (or Playgroups) and persons registered. At the end of the year 6 Nurseries and Playgroups and 11 Child Minders were registered as compared with 2 and 3 respectively for 1968.

However, in spite of all the publicity given to the changes in the Act, there may still be some Playgroups or persons who have not submitted application for registration. The penalty for failing to register is £50 or, in the case of a second or subsequent offence, imprisonment for a term not exceeding three months or to a fine of £100 or both.

NURSING HOMES

There are no registered Nursing Homes in the County.

MIDWIFERY SERVICE

During 1969, 121 deliveries were undertaken in the County by domiciliary midwives and 1,816 by hospital midwives. The total deliveries by midwives is 5 per cent. down on 1968. Once more, over 93 per cent. of the confinements were in hospital.

A large proportion of the time of domiciliary midwives is taken up with the puerperium nursing of patients discharged from hospital before the tenth day. During the year, there were 1,886 cases of early discharge from hospital.

The arrangements for the secondment to Consultant Obstetric Units of midwives who had not taken 10 deliveries during the year, continued but availability of midwifery staff limited the number seconded in 1969 to 7 midwives.

117 midwives notified their intention to practise during 1969 :—

Domiciliary midwives—61

Institutional—56

The County is covered for maternity emergencies by flying squads at Morriston Hospital and the West Wales General Hospital and the arrangements are working satisfactorily. The object of the flying squad is to give emergency consultant maternity treatment in the patient's home and then to transfer the patient to a Consultant Unit.

All domiciliary midwives employed by the Committee have been issued with a Blease Sampson Neonatal resuscitator.

Medical aid was sought in respect of 220 cases, 144 by institutional midwives and 76 by domiciliary midwives.

The use of the Minnitt gas/air apparatus was discontinued. Midwives now have available for their use nitrous oxide/oxygen (Entonox) apparatus and trichloroethylene apparatus.

8 midwives attended courses approved for the purpose of rule G.1 of the Central Midwives Board and 2 midwives also attended a special course in methods of preparation for child birth.

No arrangements have been made by the Authority for the training of pupil midwives.

The non-medical supervision of midwives is undertaken by the Chief Nursing Officer, who is also responsible for the supervision of the work of home nursing and health visiting. The Deputy Chief Nursing Officer and an Assistant Nursing Officer assists her with these duties.

Special visits of investigation were also undertaken in regard to puerperal pyrexia, infant eye conditions, source of infection and septic spots.

HEALTH VISITING

At the end of the year, the full establishment of 27 health visitors were in post. The scope of the work of health visitors is being progressively widened and attachment or liaison with general medical practitioners assists greatly in this.

Three student health visitors successfully completed their course and took up duties in the County.

Three health visitors attended refresher courses during 1969.

HOME NURSING

There was little change in the work of the home nursing service. Attachment to general practices worked reasonably well but the full benefit of attachment will not be apparent until either adequate accommodation for the nurse is provided at the Surgeries or the medical practices worked from Health Centres.

Over 57 per cent. of the patients attended to and over 65 per cent. of the visits made by District Nurses were to patients over 65 years of age. For 1968 the figures were 55 per cent. and 63 per cent. respectively.

Two district nurses attended refresher courses during the year.

District Training

The approval of the Welsh Office was received to the District Nurse Training Scheme adopted by the Authority. Under the Scheme, theoretical and practical training are undertaken within the County. Tribute must be paid to the readiness of Consultants, a General Practitioner, Heads of Local Government and Central Government Departments and other Officers to co-operate in the Training Scheme.

The first course commenced October, 1969 and the Training Officer was the Deputy Chief Nursing Officer.

PREVENTION OF BREAK-UP OF FAMILIES

A Co-ordinating Committee set up in 1950 with the Deputy County Medical Officer of Health as Chairman and the Children's Officer designated to co-ordinate all activities, holds regular meetings. These meetings are attended by the Senior Nursing Officers, Organiser of Home Helps, Child Care Officers, Education Welfare Officers, Probation Officers, representatives of the Department of Health and Social Security, Local Inspectors of the National Society for the Prevention of Cruelty to Children, Moral Welfare Workers, Welfare Officer for the Deaf, and representatives of the District Authorities.

Cases are specially considered at the meetings and decisions reached as to the best action to be taken with particular reference to unnecessary over-lapping of visits.

The Authority have also agreed to the provision of home helps for problem families where it is considered necessary by the Co-ordinating Committee.

VACCINATION AND IMMUNISATION

The arrangements of the Authority for vaccination against smallpox and poliomyelitis and immunisation against diphtheria, whooping cough and tetanus provide for the work to be undertaken by general medical practitioners, Medical Officers of the Child Health Clinics and District Medical Officers of Health. The majority of the general medical practitioners co-operated in arrangements.

These arrangements are mainly based on a computer program. The birth register is maintained on the computer and consent forms are sent out to the parents of all the babies. When the completed form is received for the procedures to be undertaken at one of the Authority's clinics or by one of the doctors participating in the scheme, the child's vaccination/immunisation record is set up on the Computer. The program is based on monthly sessions at clinics or at doctor's surgeries.

The immunisation programme follows the Department of Health and Social Security recommendations and when a child is due for any procedure, the Computer prints out a postcard addressed to the parent giving the child's name and details of the appointment and a list for the doctor or clinic indicating the procedure due. Following the session, the list is appropriately marked and the child's computer record is up-dated in readiness for the next procedure.

It is hoped that with time all doctors in the County will participate in these arrangements.

Measles

Measles vaccine became available during the year but unfortunately the supplies received from one Firm were found to be unsatisfactory. However, before the end of the year a fresh supply was made available to Local Authorities.

There still appears to be a great deal of reluctance on the part of the parents to consent to measles vaccination and it may take some time before a sufficient number of children have been immunised to have any bearing on the number of cases of measles in children.

BCG Vaccination

The arrangements of the Authority provide for the BCG vaccination of the following groups:—

1. School children of 13 years of age and over.
2. Pupils of independent schools of 13 years of age and over.
3. Students attending further education establishments.

BCG vaccination of child contacts of tuberculosis patients is the responsibility of the Chest Physicians.

COUNTY AMBULANCE SERVICE

The arrangements for the Ambulance Service continued to work satisfactorily.

The workshop at the Carmarthen Ambulance Station has proved to be a valuable asset. All routine servicing and maintenance are carried out at the workshop and the time that ambulances are "off the road" is now very short.

It was not necessary to call on the helicopter service to transport patients during the year.

Requests as follows were granted during the year for an ambulance on a repayment basis under the National Health Service (Amendment) Act, 1957 :—

- 2 for ambulances to standby at Sports Functions.
- 11 for ambulance transport of patients under private arrangements.

The radio control of ambulances continued to function satisfactorily.

The County Ambulance Officer reports as follows in regard to the service :—

The demands made on the County Ambulance Service did not abate during 1969 and indeed not infrequently the Service was hard pressed to meet its mounting commitments. It is not an exaggeration to state that a stage is now being reached when further pressures on the Service might well prove to be beyond its capacity to deal with them without severe impairment of efficiency. As the District General Hospitals expand their services and an increasing variety of treatment for more and more major and minor ailments becomes available to out-patients so there is a consequent rise in the demand for ambulance service transport. In particular the establishment and development at these hospitals of day centres providing out-patient rehabilitation treatment for severely disabled patients whose condition otherwise would require them to be in-patients, imposes an additional burden on the service that threatens to overwhelm its resources. An explosive expansion of the Service has to be contemplated if the present trends continue. The alternative can only be an acceptance of lowered standards with patients being subjected to intolerable delays and longer and more tedious journeys to and from hospital as more and more patients are served by the disproportionately small and inelastic ambulance fleet.

Staff

The number of operational staff employed at the 31st December, 1969, was 41.

A new national wage structure for the operational staff came into operation on 30th June, 1969, related to the standard of training and the range of duties and experience required of the personnel.

The "Millar" Working Party Report on Ambulance Training (Part 1) published in 1966 strongly advocated that ambulance staff should have properly co-ordinated training, leading to the award of an officially recognised certificate of proficiency, for their very demanding duties. On the basis of the "Millar" Report recommendations, and following consideration of those recommendations by the National Ambulance Service Advisory Committee, the National Joint Council for Local Authorities' Services (Manual Workers) announced new rates of pay for ambulance staff who were assessed by their authority as competent over the whole range of ambulance duties (including accident and emergency work) and who thus became eligible for the award of a proficiency certificate. The Health and Social Services Committee, fully supporting the conclusions of the Millar Report, readily approved the measures recommended to enable the staff to qualify for the proficiency certificate entitling them to the enhanced rates of pay. In the case of staff with over five years service the National Ambulance Service Advisory Committee's recommendation was that a satisfactory assessment by the authority should render them eligible for the award of a certificate. This was accepted by the Committee and the 21 staff in this category were formally assessed as competent. For staff having less than five years but more than two years service, official "shorter" training courses of two weeks duration were authorised. By the end of 1969 all the staff in this category had completed their training at the Local Government Training Board—approved Regional Ambulance Service Training School established at Bridgend by Glamorgan County Council on a co-operative basis following a series of meetings between the Medical Officers of

Health and Chief Ambulance Officers of the South Wales Local Health Authorities. New entrants and staff with less than two years service are now required to undergo the full six-weeks basic course at an approved training school, as recommended in the Millar Report, and during 1969 two new entrants completed basic courses at the Cheshire County Council Ambulance Training School, Nantwich.

During the year, too, all members of the operational staff received individual instruction on resuscitation from Dr. H. B. Maliphant, Consultant Anaesthetic, South West Wales Hospital Management Committee, whose deep and personal interest in this important aspect of an ambulance-man's duties is greatly appreciated, not least by the staff themselves.

In the early part of the year the greatest difficulty was experienced in maintaining adequate ambulance cover because of the influenza epidemic. With four Control Officers laid low, leaving only two to provide the necessary 24-hour continuous manning of the Control Room, and the availability of operational staff reduced to nearly half for the same reason, it was only through the fullest co-operation of those members of both staffs who remained unaffected and the temporary engagement, on a voluntary basis, of a past member of the Control staff, that the Service was able to meet its commitments.

For zeal and efficiency displayed throughout the year by the officers and personnel of the Service in discharging their duties, the warmest praise is due. The public is not unmindful of the high standard set by the staff as letters of appreciation received during the year and others published in the Press so eloquently testify.

The Service suffered a great loss during the year with the sudden death at the age of 57 of Station Leader Kenneth Dyer Williams, Llanelli, who had served the community devotedly in his capacity as a member of the operational staff of the service since 1946.

Mr. T. C. Davies, Assistant County Ambulance Officer, terminated his duties on 31st October, 1969, on being appointed as County Ambulance Officer of Montgomeryshire. His successor, Mr. T. Leslie Jones, a member of the County Health Department staff, took up his duties on 13th November, 1969.

Vehicles

At the 31st December, 1969, the County Ambulance fleet consisted of 23 vehicles, made up of 20 Bedford-Lomas 28 h.p. dual-purpose Ambulances, 2 B.M.C. Sitting Case Vehicles and one ex-Civil Defence Commer ambulance adapted as a Major Accident Vehicle and equipped with a full range of stretchers, blankets, First Aid material and light rescue stores.

The normal vehicle replacement programme provides for the purchase of three new ambulances every year but as only two were acquired in 1968, an additional vehicle was purchased during the year under review.

In pursuance of our policy of standardisation, the new ambulances are of the Bedford-Lomas type which has proved so effective in operation over many years. They conform very closely, both in design of the body and in the equipment carried, to the recommendations contained in Part II of the Millar Working Party Report on Ambulance Training and Equipment but are a departure from County Council tradition in being painted white externally (as opposed to the cream colour forming the Carmarthenshire Ambulance Service livery since 1948)—again to meet the Working Party's recommendation.

Of the four Bedford-Lomas ambulances disposed of in part exchange during the year, two were purchased in 1961 and two in 1962. Each has covered on average a total of 144,271 miles.

The service and maintenance of the fleet is carried out on a time basis, the preventive maintenance scheme in operation ensuring that every vehicle is subjected to an inspection and comprehensive servicing schedule at the Central Workshop at Ambulance Headquarters every four weeks.

In order to take advantage of the economy resulting from bulk purchase it is the policy to refuel ambulance service vehicles from County-owned petrol storage installations whenever practicable. The two main ambulance stations, Carmarthen and Llanelli, have their own petrol pump. During the year a total, from all sources, of 29,387 gallons of petrol were consumed, giving an average fuel consumption for the fleet of 14.02 miles per gallon.

All eligible staff of the Service were entered in the National Safe Driving Competition for 1969, the results being as follows:—

Entered	...	...	40
Disqualified	...	...	1
Exemption	...	...	1
Diplomas	...	...	18
5-year medals	...	...	2
Bars to 5-year medals	...	...	11
10-year medals	...	...	1
Bars to 10-year medals	...	...	6

Hospital Car Service

The Hospital Car Service continued to play its invaluable role in supplementing the ambulance service and I should like to pay a personal tribute to all the operators for their dedication and the extremely efficient way in which they carried out their duties in all weathers. Mention must be made too of the very cordial relations that exists between the County Headquarters staff of the W.R.V.S. who administer the Hospital Car Service in Carmarthenshire and the staff at Ambulance Headquarters; and special thanks are due to Mrs. R. Nicholas, the W.R.V.S. County Organiser, and Mrs. M. London, the County Secretary, for their untiring efforts in promoting the service.

Service Statistics

Emergency Section—The total number of “emergency” cases requiring the immediate attendance of an ambulance, dealt with during the year was 4,888 and the following table shows an analysis of these emergency calls by type.

Road Traffic Accidents	...	460
Public Place Accidents	...	509
Home Accidents	...	547
Industrial Accidents	...	105
Colliery Accidents	...	169
Parturition	...	589
Illness	...	2129
Others (attempted suicide, assault, unclassified)...		380
		<hr/> 4888 <hr/>

The following table gives an analysis of the emergency calls by hours :—

a.m.	12—1	186	p.m.	12—1	317
	1—2	130		1—2	322
	2—3	84		2—3	346
	3—4	86		3—4	307
	4—5	68		4—5	292
	5—6	62		5—6	262
	6—7	74		6—7	269
	7—8	80		7—8	258
	8—9	111		8—9	227
	9—10	181		9—10	208
	10—11	248		10—11	223
	11—12	323		11—12	224

The sources of the emergency calls were as follows:—

Police	...	309
Public	...	1165
Doctors	...	2952
Hospitals	...	230
Midwives	...	135
Others	...	97
Total	...	4888

Five "hoax" calls with malicious intent were received during the year.

Vehicle Mileages

In the following table the total mileage covered by the fleet during 1969 is averaged on a vehicle basis.

No. of vehicles in Service at 31/12/69				All Vehicles		Average per Vehicle	
				Annual Mileage	Average Weekly Mileage	Annual Mileage	Weekly Mileage
Ambs.	SCV's	Major Acc. Veh.	Total	412410	7931	17930	344
20	2	1	23				

Maintenance of Vehicles

The following table shows the total number of vehicles withdrawn to the Central Workshops during the year, together with an analysis of the work carried out :—

Work carried out	Number of vehicles withdrawn
Service operations only	207
Service operations and repairs	118
Miscellaneous repairs	150
Total	475

Accidents

During 1969 a total of eight accidents involving County Ambulance Service Vehicles directly or indirectly, were reported.

The following table analyses the accidents on a mileage basis:—

Total Mileage	All Accidents		Blameworthy Accidents	
	Number Reported	Average mileage per accident	Number Reported	Average mileage per accident
412410	8	51552	1	412410

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The Authority's arrangements are for the:—

- (a) Tuberculous patients and their families.
- (b) Patients suffering from malignant disease and their families.
- (c) Provision of sick room and nursing requisites.
- (d) Chiropody Service for the elderly, physically handicapped, and expectant and nursing mothers.
- (e) Exfoliative Cytology Service for women at risk.
- (f) Travelling expenses of relatives in necessitous cases for visiting long stay patients in distant hospitals.
- (g) Community Mental Health Service.

The Chest Physicians stationed at Carmarthen and Llanelli and their Assistants cover the majority of the County. Carmarthenshire cases along the borders however are dealt with by the Chest Physicians of Pembrokeshire and Swansea. It is pleasing to note that the number of new cases reported continued to decrease. However, the problem has not disappeared and care must be taken that there is no reversion of trend due to indifference on the part of the public.

Beds and bedding are available on loan to tuberculous patients and also to those suffering from malignant disease, but no requests have been received from patients for several years.

Requests are however received from time to time for the provision of special beds and equipment for paraplegic patients. It is anticipated that with the increased rate of survival, requests for these special beds will increase.

Where the need arises incontinence pads are issued free of charge to patients being nursed at home. The demand for incontinence pads continues to increase and over 86,000 were issued during 1969, an increase of 20 per cent. over the previous year. So far, no problem has been reported in connection with their disposal which at present is by burning in domestic grates.

The arrangements of the Authority for chiropody clinics are mainly through voluntary organisations who are supported by means of grants. The Authority also employ a part-time chiropodist for those areas in the County not covered by voluntary organisations. Treatment is at present confined to the elderly, physically handicapped and expectant and nursing mothers. The number of patients treated during the year showed an increase from 4,829 in 1968 to 4,835 in 1969.

Regular sessions are held at Llanelli, Carmarthen and Ammanford for exfoliative cytology and the frequency of sessions is kept under review. Close co-operation is maintained with the general medical practitioners who receive copies of all the laboratory reports and institute any necessary action.

Assistance is granted by the Authority in necessitous cases towards the cost of travelling expenses of relatives of long-stay patients in Hospitals. 14 applications were granted during the year.

Venereal Diseases

Carmarthenshire cases are treated at the special Treatment Centres at the West Wales General Hospital, Carmarthen, and Mount Pleasant Hospital, Swansea. In common with the rest of the country, the number of cases dealt with shows an increase over the last few years.

Cases of venereal disease or their contacts which needed follow up were dealt with by the County Medical Officer of Health and the Chief Nursing Officer.

Health Education

Once again, it was necessary to defer the appointment of a Health Education Officer because of the curtailment of expenditure. A good deal of work on health education was, however, undertaken by Department Medical Officers, the Chief Nursing Officer and her Senior Nursing Officers, Health Visitors, District Nurses and Midwives.

Fluoridation of Water Supplies

Although the question was again raised, the County Council had not by the end of the year changed their decision not to arrange for the fluoridation of water supplies in the County. In spite of all the information supplied by the Department of Health and Social Security, there still appears to be a greater readiness to accept the advice of other organisations. In the meantime the infants in the County are being deprived of the benefits of fluoridation in the prevention of dental decay.

HOME HELP SERVICE

The home help service continued to provide assistance for the essential duties of households. 1,096 patients received assistance during 1969 as compared with 1,061 for 1968.

It will be of interest to note that of the 882 patients on books at the end of the year, 601 had received assistance for over 12 months. This underlines the fact that the service is predominantly one of long term assistance for the aged and chronic sick. Early discharges from hospitals will, however, change this to some extent. It will be necessary for the training of home helps to be reviewed to make them sufficiently proficient to face this new challenge to the service. Another need which will be considered when the finances are available is the provision of a central laundry for use by the home helps.

On the 31st December, 312 home helps were available for duty. Service given in the last normal week of the year was equivalent in terms of whole-time employment to 101 home helps.

In-Service Training

In-Service training sessions for casual home helps were held during the year at Ammanford, Carmarthen and Llanelli.

MENTAL HEALTH SERVICE

The Authority's community mental health service continues to be handicapped by a shortage of qualified field staff. One qualified mental welfare officer unfortunately had to resign owing to ill-health early in the year and her replacement did not commence duties until October. At the end of the year consideration was being given to appointing student mental welfare officers subject to their being acceptable for a University C.S.W. Course.

Suitable residential accommodation is a necessary part of a proper community mental health service, but up to the present no such accommodation is available. However, the Authority have provisionally included in their Capital Building Programme for 1970/71 a proposal to erect a Residential Home for the Subnormal at Llanelli. It is thus hoped that a project which has been under active consideration since 1961 will at last come to fruition.

A new Adult Training Centre for 100 pupils was included in the Capital Building Programme for 1969/70 but constructional work had not commenced at the end of 1969.

The Residential Home associated with the Junior Training Centre has been fully justified and for most of the time has been fully occupied. Staffing difficulties have been experienced but we have been fortunate in retaining the Senior Staff and thus maintaining continuity in management. In addition to those attending regularly at the Junior Centre, thirteen children were admitted to the Residential Home for short periods to enable the parents to have holidays or in emergencies.

Both the Adult and Junior Training Centres have continued to maintain a steady course on approved lines and both establishments have a full complement of staff and pupils. The lack of room for expansion in the Adult Centre however has meant that there is a waiting list for admission to both Centres. Older pupils, especially females, have to be maintained at the Junior Centre and this hampers inter-class movement and even in the Nursery Class many of the children are ready to move to more purposeful activities. The waiting list is of course increasing as young children become of age to attend.

The commissioning of the new Adult Training Centre referred to above will in due course it is hoped resolve these difficulties.

Once more, the Training Centres received many gifts. For the record, a list of these good people and organisations are given below:—

Bethel Presbyterian Church, Pembrey.
 British Railways Service Staffs Association.
 Mr. R. C. Chappell, 11, Hafod Road, Llanelli.
 Cross Hands Workingmen's Club.
 Mrs. Gwyneth Edwards.
 Felinfoel Carnival and Gala Committee
 Felinfoel Women's Institute.
 Ina Needle Bearings Ltd., Llanelli.
 Inner Wheel Club, Llanelli.
 Mr. and Mrs. Silas Jones, Bancffosfelen.
 The Reverend and Mrs. K. E. Jones, Manselton, Swansea.
 Llanelli Ladies' Circle.
 Payne's (Ammanford) Ladies Football Team.
 Mr. W. Sewell, 145, Richmond Road, Roath, Cardiff.
 Mrs. B. Thomas, 126, Bronallt Road, Fforest.
 Harold Thomas, Esq., His Worship the Mayor of Llanelli.
 Mrs. Whelan.

Special mention must be made of our good friends the British Railways Service Staffs Association. The members of this Club have every year since 1956 made a handsome contribution to the Welfare Fund of the Training Centres and have also given the pupils a bounteous Christmas tea at which every pupil received a valuable gift. Nothing I can say will be too great a praise for these friends of the pupils.

I must also make special reference to one donation. One of the pupils of the Adult Training Centre died during the year and the parents invited their friends to make a contribution to the Training Centre instead of the age old practice of sending wreaths. As a result over £100 was contributed to the Welfare Fund. This is one of the most touching incidents in the history of our Centres.

COUNTY WELFARE SERVICES

The County Council Welfare Services under the National Assistance Act, 1948, are carried out under the aegis of the County Welfare Committee.

Blind Persons

There is no change to report in the arrangements for the care and welfare of blind persons, and the Carmarthenshire Blind Society continued to act as agents of the County Council.

LABORATORY SERVICES

The Public Health Laboratory at Carmarthen, which is controlled by the Medical Research Council is available for the examination of bacteriological specimens in connection with the County Health Services. The services rendered by the Laboratory are particularly valuable in the control of epidemics and full co-operation is maintained between the staff of the Laboratory and the Health Department.

FOOD AND DRUGS

The duty of the County Council under the Food and Drugs Act, 1955, to ensure that food sold for human consumption is of good quality and wholesome is an important part of the comprehensive public services which are essential to good health. The following is the report of the Chief Inspector of Food and Drugs for the year:—

Report on the work done in the County of Carmarthenshire during the year ending 31st December, 1969, under the provisions of the Food and Drugs Act, 1955, and the various Regulations and Orders made thereunder.

Total number of samples submitted to the Public Analyst	...	776
Informal samples of milk tested for compositional quality by officers of the Food and Drugs Department	...	270
Alcoholic spirits tested by officer of the Food and Drug Department	...	43
Milk samples sent for bacteriological or biological examination to the Public Health Laboratory	...	430
Samples of foodstuffs submitted to the Public Analyst for examination and analysis for Pesticide Residues	...	24
Total	...	1543

Milk Samples submitted to the Public Analyst

Number of samples submitted	...	481
Certified to be genuine in Fat and Non-fatty solids	...	380
Deficient in Non-fatty solids due to natural causes	...	57
Contained added water	...	12
Deficient in Fat	...	13
Deficient in both Fat and Non-fatty solids	...	12
Deficient in Fat and also contained Antibiotics	...	—
Deficient in Non-fatty solids and also contained Antibiotics	...	2
Unsatisfactory owing to the presence of Antibiotics	...	2
Unsatisfactory owing to the presence in the bottle of milk of a piece of wire in the form of a helix	...	1
Sterilised milk unsatisfactory—slightly curdled	...	1
Unsatisfactory due to contamination by dead flies and other foreign matter	...	1

Included in the above are six 'Appeal to Cow' samples of milk, of which one was reported to be deficient in Fat and five were reported to be genuine.

Milk samples certified to contain added water

Of the 12 samples certified to contain added water, 11 were of milk supplied wholesale to Creameries and one was from a Producer-Retailer.

Legal proceedings under Section 32(3) Food and Drugs Act, 1955, were instituted in respect of six milk samples taken from a producer-wholesaler in October, 1969. Proceedings were also taken under Section 2 in respect of four milk samples taken in December, 1969 from the same producer-wholesaler.

Fines and costs imposed were as follows:—

<i>Percentage Extraneous Water</i>	<i>Fines and Costs Imposed</i>
4% } 8% } 11% } 8% } 6% } 12% }	£30
20% } 14% } 39% } 9% }	£46 4s. 6d. (Second Offence)

This producer has since gone out of business in this County.

In the case of the remaining two samples the amounts of added water were small and the producers concerned (one wholesaler and one retailer) were warned in view of all the circumstances.

Milk Samples deficient in Fat and/or Non-fatty Solids

Invariably, in cases of deficiency of this nature, there is a thorough investigation in order to establish the cause. In most cases, deficiencies are found to be due to natural causes but it is also found that such deficiencies can be due to carelessness and the producers concerned are warned and instructed to take all measures necessary.

Milk Samples tested for Antibiotics

Of the samples submitted to the Public Analyst for analysis, 387 were tested for the presence of Antibiotics. Traces of antibiotics were found in 4 of the samples examined and in view of the fact that these were first offences, the producers concerned were warned and advised that legal proceedings would follow a recurrence.

Extraneous Matter in Milk

A purchaser complained regarding a piece of wire found in a bottle of milk which had been supplied by a dairy situated outside this County. The wire was bent in such a way that it remained in the bottle when the milk was poured out. It was deemed inadvisable to institute proceedings under Section 2 and the facts were reported to the Food and Drugs Authority concerned for possible action under the Milk and Dairies Regulations, 1959 for failing to ensure that the bottles had been cleansed. It was found subsequently that the dairy concerned was warned.

A complaint was received in respect of a piece of glass alleged to have been found in a bottle of milk. The bottle cap could not be produced and all the milk had been used and it was therefore felt that legal proceedings would be unsuccessful. The dairyman concerned was warned.

Proceedings were instituted in respect of a bottle of milk containing dead flies, etc. The case was dismissed.

Informal Samples of milk taken at Schools and other establishments and tested at this office by the Food and Drugs Inspectors

Number of samples tested	...	...	...	270
Genuine in Fat and Non-fatty Solids	...	...	...	250
Contained added water	...	...	...	—
Deficient in Fat	...	...	...	8
Deficient in both Fat and Non-fatty Solids	...	...	...	2
Deficient in Non-fatty solids	...	...	...	10

Where it was found necessary, further samples were taken for analysis by the Public Analyst.

Miscellaneous Articles of Food and Drugs

Number of samples submitted to the Public Analyst	...	...	...	295
Certified to be Genuine	...	...	...	270
Certified to be Unsatisfactory	...	...	...	25

The samples comprised the following:—

Sausages, 30 ; Ice Cream, 28 ; Soft Drinks, 27 ; Canned Meat Products, 26 ; Butter, 25 ; Marmalade, 19 ; Cream, 18 ; Malt Vinegar, 15 ; Coffee, 12 ; Milk Pudding, 11 ; Meat Pies, 8 ; Bread, 8 ; Evaporated Milk, 5 ; Almond Marzipan, 5 ; Honey, 5 ; 3 each of Beefburgers, Jam, Ground Almonds, and Mince Meat ; 2 each of Canned Baby Food, Sausage Rolls, Non-Brewed Condiment, Canned Grapefruit, Canned Milk (18 per cent. Butter Fat), and Breakfast Foods, One each of Lard, Fish Fingers, Mint Confectionery, Chocolate Roll with Buttercream, Condensed Skimmed Milk, Meat Paste, Faggots in Gravy, Starch-Reduced Bread, Cooking Oil, Salmon Spread, Creamed Horse Raddish, Cereal Baby Food, Butter Scotch Sweets, Potted Beef with Butter, Milk Chocolate Biscuits, Plain Flour, Pigs Liver, Meat Pasty, Tea, Cheese Spread, Lemon Cheese, Margarine, Condensed Full Cream Milk, Cough Mixture, Liver Salts, Aspirin Tablets, Rose Hip Syrup, Antacid Digestant Powder, Linctus of Glycerine and Honey.

Particulars relating to the Unsatisfactory Samples

<i>Description of Article</i>	<i>Nature of Deficiency or Irregularity</i>		
Pork Sausages	Deficient in Meat	Standard Content	65% 63%
Low-Calorie High-Protein Bread	Claim not justified—calorific value similar to that of ordinary bread		
Beefburgers	Deficient in Meat	Standard Content	80% 73%
	Preservatives declared but none found		
Beef Sausages	Preservative declared but none found		
Sliced White Bread	Contained dead insects and insect parts		
Double Strength Mints	Deficient in soluble oil content		
	Standard	0.25% v/w.	
	Content	0.16% v/w.	
Canned Vegetables and Beef for Babies	Contents decomposed due to defect in can		
Lime Jelly Marmalade	Deficient in Fruit Content	Standard Content	20% 19%
Honey (Imported)	Label misleading as to country of origin		
Stewed Steak with Gravy	Deficient in Meat content	Standard Content	75% 69.6%
Lime Marmalade	Deficient in Fruit content	Standard Content	20% 16%
Mixed Fruit Jam	Deficient in Fruit content	Standard Content	40% 32%

<i>Description of Article</i>	<i>Nature of Deficiency or Irregularity</i>		
Beef Sausages	Contained undeclared preservative 145 p.p.m. SO ₂		
Beef Sausages	Contained undeclared preservative 175 p.p.m. SO ₂		
Pork Sausages	Contained excess preservative Permitted maximum 450 p.p.m. SO ₂ Content 500 p.p.m. SO ₂		
Instant Coffee	Deficient in Caffeine	Standard Content	3% 2.6%
Pork Luncheon Meat	Deficient in Meat content	Standard Content	80% 78.5%
Sparkling Lemonade (Consumer complaint)	Stopper contaminated by phenolic disinfectant. Contents slightly tainted		
Plain Flour (Consumer complaint)	Contaminated with live Flour moth larvae, web- bing of excreta		
Meat Pasty (Consumer complaint)	Alleged to contain a dead insect—Strawberry Weevil		
Pork Luncheon Meat	Deficient in Meat content	Standard Content	80% 77.8%
Sliced White Bread (Consumer complaint)	Discoloured due to presence of fibrous outer layers of Wheat grain		
Beef Sausages	Contained undeclared preservative 170 p.p.m. SO ₂		
Instant Coffee	Deficient in Caffeine	Standard Content	3% 2.6%

Legal proceedings were instituted in respect of a loaf of sliced white bread containing dead insects and insect parts (Sections 2 and 113 Food and Drugs Act, 1955). A fine of £80 and £4 14s. od. costs were imposed.

Legal proceedings were also instituted in respect of a bag of Plain Flour contaminated with live moth larvae, etc. A fine of £80 plus £4 costs were imposed.

In the case of the Canned Vegetables and Beef for Babies, the contents had decomposed due to a defect in the can. The complainant did not wish to be involved in legal proceedings and there were certain features which made proceedings inadvisable. The manufacturers were warned.

The contents of the bottle of Sparkling Lemonade had been slightly tainted by the stopper which had been contaminated by a phenolic disinfectant. The Public Analyst reported that the degree of contamination was not likely to be injurious to health and the manufacturers concerned were warned.

A small portion of pasty and an insect alleged to have been found in the pasty was brought to the department by the complainant. The insect was identified as a Strawberry Weevil. Having regard to all the circumstances, the manufacturer was warned.

In the other cases, the deficiencies or irregularities were not serious and warnings were given to the manufacturers.

One complaint was received that consumption of a Breakfast Cereal had caused severe sickness. A sample submitted to the Public Analyst was reported to be free from any harmful ingredients.

Articles of Food examined by the Food and Drugs Inspectors and not submitted to the Public Analyst

Investigations were carried out in respect of a complaint that Fresh Cream had been found to be rancid when the carton was opened a few hours after delivery. The Cream was not submitted for analysis and the purchaser did not wish to be involved in legal proceedings. The Dairy Company concerned was warned and a formal sample taken subsequently was reported to be genuine.

A complaint was received that a piece of metal foil wrapping had been found in a steak and kidney pie. In view of the fact that the complaint was delayed for a fortnight after purchase, no action could be taken apart from a warning to the manufacturers.

A loaf of bread alleged to contain foreign matter was the subject of a complaint which was investigated. A warning was given to the supplier.

Another complaint was in respect of soft cheese with mould on it. In view of all the circumstances, the supplier was warned.

A carton of Dairy Cocktail was brought to the Department by a purchaser who had found the contents to be mouldy and fetid. Legal proceedings were instituted against the manufacturers under Sections 2 and 113(3) Food and Drugs Act. A fine of £20 was imposed.

A nail was alleged to have been found in a tea cake when being eaten, after it had been sliced and buttered. The circumstances were such that it was considered that successful legal action could not be taken and the Bakery firm concerned was warned.

Parts of an insect were found on a slice of brown bread after it had been buttered. It was not possible to determine when the contamination had occurred and no action could be taken.

A dead wasp was found embedded in one of the slices in a loaf of Sliced White Bread. The complainant was not prepared to be involved in legal proceedings and a warning was given to the bakery firm concerned.

A warning was given to the owner of a bakery in respect of a piece of string found in a loaf of bread.

A complaint was received in respect of a meat pasty alleged to contain particles of glass. The complainant did not wish to be involved in legal proceedings and the circumstances were such as to make legal action inadvisable. The firm was warned.

A plastic bearing was alleged to have been found in a can of cooked potatoes of foreign origin. After investigations the importers were cautioned and instructed to take the matter up with the manufacturers.

A complaint was received in respect of a small fruit tart which contained a piece of flint and after investigations at the manufacturers' premises it was found that the object had come from the imported fruit used. The complainant did not wish to be involved in legal proceedings.

and a warning was given to the manufacturers, who gave an undertaking that additional precautions would be taken with a view to preventing such occurrences.

Investigations were carried out in respect of complaints relating to a (1) bottle of milk with a badly chipped and cracked neck supplied to a householder and (2) third pint bottles which were dirty on the outside when delivered to a school. The same dairy company was concerned in both complaints and a warning was given.

Some of the complaints listed were serious enough to warrant the institution of legal proceedings, but it is always difficult to establish with certainty where and when contamination occurs and the defendant must always have the benefit of the doubt. Sometimes, the only witness is a child and it is obviously inadvisable to prosecute such cases. Very few of the complainants are prepared to appear in Court to give evidence and experience has shown that reluctant witnesses are virtually useless. In such cases, therefore, the administration of a warning is the only course to follow.

Alcoholic Spirits

43 informal samples of alcoholic spirits were taken at licensed premises and were tested by the Food and Drugs Inspectors. The samples consisted of 23 of Whisky ; 8 of Gin ; 7 of Rum and 5 of Vodka. All samples were found to be satisfactory.

Pesticide Residues

The National Survey undertaken by the Local Authority Associations in conjunction with the Association of Public Analysts has been continued and during the third year of operation of the Scheme, 10 samples were submitted to the Public Analyst, comprising the following: Sterilised Milk, Butter, Bread, Pears, Pork, Cooking Fat, Cheese, Pork Sausages, Lettuce and Strawberries.

Traces of Organo-chlorine compounds were found in all the samples with the exception of the Pork, but in each case they were below the reporting limits under the scheme.

In the case of the Pears, traces of Organo-Phosphorus compounds were found and the presence of Malathion was suggested.

In the case of Belly Pork and Lettuce, there was 100 per cent. mortality of the *Drosophila* flies used in the tests for Organo-Phosphorus compounds. These samples were subjected to further examination using gas-liquid chromatography technique fitted with a detector which was specially sensitive to Organo-Phosphorous compounds. Trace responses were obtained but were so minute that positive identification was not possible.

In addition to the National Scheme, a further, more comprehensive survey was undertaken jointly with the Counties of Brecon, Pembroke, Cardigan and Radnor, and a programme was carried out involving tests on milk, eggs, butter, cheese, bread, pork, mutton, chicken, Pork sausages, Beef sausages, Pig's liver, ox kidney, pears, apples, strawberries, tomatoes, plums, lettuce, potatoes, swedes, turnips, cabbage, beetroot, runner beans, cucumber, peas, carrots, parsnips, broad beans, onions, mushrooms, sprouts, cooking fat, Baby food (Vegetable Soup), Baby food (Apples, prunes and custard), Baby food (Bacon and Vegetables), honey, mixed spice and sauce.

Out of a total of 68 samples, only four were found to be free from residues, viz. :—Belly Pork, cooking fat, ox kidney and lettuce.

This County's share in this programme for 1969 was 13 samples (plus a further seven samples up to March, 1970) comprising strawberries, carrots, tomatoes, peas, yellow turnips, cabbage, beetroot, runner beans, potatoes, swedes, butter, cucumber, and Pig's liver.

Of the 13 samples, one sample of strawberries and one of Pig's liver was found to be free from residues. The remaining 11 samples were all found to contain traces of organo-chlorine compounds, mainly DDT, BHC, Aldrin, Dieldrin, and Endrin and one sample of cabbage was also found to contain traces of organo-phosphorus compound—Malathion, but they were below the reporting limits.

Generally, the level of contamination in this Country is significantly lower than, for example, the United States. This is due, at least in part, to the fact that the climate of this country does not favour certain pests to the extent that it does in the U.S. and does not call for such heavy use of pesticides.

Organo-chlorine compounds are more persistent but organo-phosphorus compounds are more toxic and there has been a significant increase in phosphorus poisoning since organo-phosphorus compounds were made available as alternative seed dressings in 1968. These can be absorbed through intact skin and can also be inhaled and therefore can be extremely dangerous when used in agriculture and horticulture.

There is now general agreement amongst Scientists that man is poisoning his environment. Man has always polluted his environment but now he pollutes the atmosphere, the rivers, the sea, the earth and the food he eats and there is a very real danger that he will bring about the complete destruction of his environment unless pollution in all its various forms is effectively checked.

Arsenic in Food Regulations, 1959

Lead in Food Regulations, 1961

Traces of lead were found in a sample of pears and in a sample of potatoes. A sample of Pig's liver was submitted for examination for the presence of arsenical compounds. It was free of arsenic, but traces of copper were found which were below the reporting limit of 20 p.p.m. Allegations have been made that arsenical compounds are fed to pigs in feeding material in order to promote growth and a limit of 1 part per million is laid down in the above regulations. The liver is a naturally concentrating organ for many metals.

With regard to metallic residues generally, formulations containing copper, lead, arsenic and mercury are used to a small extent on certain foodstuffs and samples especially fruits, submitted for examination for pesticide residues were also examined for the presence of these compounds.

The Milk (Special Designation) Regulations, 1963 and 1965

218 samples of milk were taken for examination from Milk dealers to whom licences have been issued by the County Council. The results of the tests carried out on these samples at the Public Health Laboratory were as follows:—

Pasteurised Milk

Satisfied both Phosphatase Test for adequacy of Heat Treatment and Methylene Blue Test for bacteriological quality	...	138
Satisfied Phosphatase Test but failed Methylene Blue Test	...	6
Failed Phosphatase Test but satisfied Methylene Blue Test	...	2
Satisfied Phosphatase Test but Methylene Blue Test void	...	8
Total	...	154

Untreated Milk

Satisfied Methylene Blue Test	...	38
Failed Methylene Blue Test	...	6
Total	...	44

Sterilised Milk

Total number of samples taken	...	19
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All were reported satisfactory under the prescribed Turbidity Test.

Ultra Heat Tested Milk

Total number of samples taken	...	1
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The sample satisfied the prescribed test.
All suppliers of unsatisfactory samples were warned.

Milk Bottles

30 empty bottles which were ready to be filled with milk were taken from dairies in the County and were sent for examination for bacterial content to the Public Health Laboratory.

11 of the bottles were reported to be unsatisfactory and a further 12 bottles contained numbers of bacteria colonies higher than the recommended limits. The dairyman concerned was warned and instructed to take immediate steps to improve the bottle washing process.

Milk in Schools Scheme

Details of the results of the bacteriological tests carried out on 212 samples of milk supplied to schools in the County are as follows—

Pasteurised Milk

Satisfied both Phosphatase Test and Methylene Blue Test	...	133
Satisfied Phosphatase Test but Methylene Blue Test Void	...	6
Total	...	139

Untreated Milk

Satisfied Methylene Blue Test	...	50
Failed Methylene Blue Test	...	4
Total	...	54

Ultra Heat Treated Milk

Total number of samples taken	...	19
-------------------------------	-----	----

All samples satisfied the prescribed Colony Count Test.

Milk samples examined for *Brucella Abortus*, Tubercle Bacillus, etc.

Three samples of untreated milk supplied to Schools were submitted for guinea pig inoculation at the Public Health Laboratory for examination for Tubercle Bacilli, *Brucella Abortus*, etc.

The reports on these samples indicated that there was no evidence of Tubercle Bacillus or *Brucella Abortus* infection.

93 of the samples of Untreated milk taken at Schools, etc., were also examined for *Brucella Abortus* under the Brucella Ring and Culture Tests. *Brucella Abortus* was not isolated in any of these samples.

A report has been received from the Carmarthen Divisional Office of the Ministry of Agriculture, Fisheries and Food that, during the year 1969, on the arrangements made between the Ministry, the County Council and the local authorities in the County, in order to avoid duplication of visits to farms 728 milk samples taken for other purposes by officers of the Ministry from Milk/Producer/Retailers registered in Carmarthenshire were also examined by the Public Health Laboratory Service for the presence of *Brucella Abortus*.

Positive results were obtained in 53 cases under the Brucella Ring test but *Brucella Abortus* was not isolated in any of the samples under the follow-up Culture Test.

Inspectors under the Food and Drugs Act:—

Chief Inspector :—E. G. Nicholls, M.I.S.A.A., M.I.W.M.A.

Deputy Chief Inspector :—G. W. Beynon, M.I.W.M.A.

Senior Inspector :—B. S. Parry-Jones, M.I.S.A.A., L.M.R.S.H.

Inspector and Sampling Officer :—D. T. Jones.

E. G. NICHOLLS,

Chief Inspector.

SCHOOL HEALTH SERVICE

Medical Inspections and Findings

All the Primary and Secondary Schools in the County were visited during the year for medical inspections. 7,425 children were examined in the routine age groups and 2,772 special inspections and re-inspections were made.

The following are notes on some of the defects found:—

Skin Diseases.—44 cases required treatment and 173 cases were referred for observation.

Eye Defects.—Treatment was advised for 590 children with defective vision and 73 children with squint, while 1,217 cases of defective vision and 141 cases of squint were referred for observation.

Ear Conditions.—95 cases of defective hearing were referred for treatment and 137 for observation. Treatment was required for 26 cases of Otitis Media (ear discharge) and a further 74 cases were referred for observation. 5 cases of other ear conditions were also referred for treatment and 28 for observation.

Nose and Throat Conditions.—There were 127 cases of nose and throat defects (including enlarged tonsils and adenoids, sinusitis, antral conditions, etc.) requiring treatment, and a further 519 were referred for observation.

Heart Diseases.—36 cases with suspected heart disease were referred for specialist advice and 290 cases referred for observation.

Chest Diseases.—40 cases of various chest diseases were referred for treatment and 200 for observation.

Orthopaedic Defects.—Treatment was advised for 270 orthopaedic defects, 211 of which were foot defects, and 420 cases, 260 of which were foot defects were referred for observation.

Diseases of the Nervous System.—34 cases suffering from diseases of nervous system, 27 of which were epileptics, were referred for specialist advice and 76 cases (44 epileptics) were referred for observation.

Psychological Cases.—Specialist advice was recommended in 55 cases of psychological disorders and 156 cases were referred for observation.

Speech.—Treatment was advised for 58 cases of defective speech and 107 cases were referred for observation.

Physical Condition.—All the 7,425 children examined, were considered to be in a satisfactory physical condition.

Following Up

Cases found to be defective at medical inspection are followed up in the homes by the school nurses who also visit the homes of children suffering from communicable diseases, uncleanliness, etc. During the year, the school nurses made 746 visits to schools for the purpose of cleanliness surveys. In addition, they made 1,287 home visits.

Following up is also carried out by School Medical Officers by periodic reviews and, in some cases, special visits were made to schools and clinics to examine special cases.

The treatment of cases of minor ailments is undertaken either at the Hospital Out-Patients Department or at the Surgeries of the general medical practitioner.

Vision

Sessions are held at the Llanelli Hospital, Amman Valley Hospital and the West Wales General Hospital, Carmarthen, for the Specialists' Ophthalmic examination of children. During 1969, 1,948 school children were seen by Eye Specialists. Glasses were prescribed for 386 children and from the information available, 339 had been provided with glasses before the end of the year.

Ear, Nose and Throat Defects

Children with ear, nose and throat defects were referred for Specialist examination at the West Wales, Llanelli and Amman Valley Hospitals. When children are found to require in-patient treatment, they are placed on the waiting list of the particular hospital and arrangements for admission are in the hands of the Hospital Authorities.

Children with Impaired Hearing

A significant advance was made in the Authority's provisions for partially hearing children when the junior pupils were transferred to the new unit attached to the Cross Hands C.P. School. The larger unit at Cross Hands includes facilities for a nursery group together with two additional classrooms and an assessment room.

The successful implementation of a programme for partially hearing children presents many problems particularly in the pre-school period and despite our efforts we have experienced great difficulty in obtaining the services of an adequately trained staff. As this has presented a formidable problem over the years we were extremely fortunate in securing the services of Mrs. Cummins, a trained teacher of the deaf who was appointed in July, 1969 and was seconded to Manchester University for an academic year with a view to taking the Diploma in Audiology.

This was a significant advance as we may now look forward to the development of a comprehensive service with adequate peripatetic coverage for the County. The services of a peripatetic teacher who is a qualified audiologist will ensure that parental guidance and auditory training are provided at the earliest possible stage to the pre-school child.

The routine audiometric testing of school entrants continues successfully and it is proposed to extend this scheme during the next year.

Plastic Treatment

Children for examination in connection with plastic treatment are referred to the West Wales and Morriston Hospitals. Treatment is carried out at St. Lawrence Hospital, Chepstow.

Asthma

Dr. Peter Williams is the Medical Officer in Charge of the Llanelli, Carmarthen and Ammanford Asthma Clinics. One weekly session is held at each clinic and 916 attendances were made during the year.

Orthopaedic Treatment

The arrangements for the orthopaedic supervision and after care of children is still undertaken by the Education Committee. Failure to fill the vacancy for an Assistant Orthopaedic Sister has resulted in the restriction of the frequency of sessions in some clinics and the cancellation of sessions at others. Children who would normally attend at the cancelled Clinics, are, however, given the opportunity to attend at one of the main clinics for supervision and treatment.

Mr. Gordon Rowley, Swansea, and Mr. R. L. Rees, Carmarthen, attend clinics in the County and children requiring in-patient treatment are admitted to Gorseinon, Morriston and West Wales General Hospitals. A number of orthopaedic cases are attended to by the hospitals under their own arrangements.

Speech Therapy

Speech Therapy continues to suffer from our inability to recruit and retain adequate staff. One of the part-time Therapists left the service before the end of the year.

The following is a summary of the work undertaken during the year:—172 new cases were referred to the Speech Therapists, 131 of whom were found to require treatment. 110 children attended clinics for treatment and they made 1,671 attendances. 104 were discharged from the clinics during the year, 42 with normal speech, 36 with improved speech and 26 for other reasons.

Mrs. Gwenda Jones observes as follows on her work :—

Attendance at the Speech Therapy clinics during the year has been fairly good, although it is still necessary to impress upon some parents the importance of speech therapy to their child.

As well as treating children at clinic parents are also advised on the development of speech and language. It is therefore important that children be referred early to the clinic and this can not only be done by School Medical Officers, but by General Practitioners who may see the pre-school children and via the Health Visitors who are in contact with the family and are able to assess the progress of the child in the home.

I would like to thank the staff of the Health Department and the schools for their co-operation.

Mrs. R. M. Stewart has the following comments to make—

Attendances during 1969 for both Speech Therapy and Auditory Training were reasonably good and a consistently good standard of co-operation was obtained from the parents.

Articulatory defects of speech predominated, with stammering probably the second most common speech defect found.

Auditory training seems to have been a rewarding field of work and has been of benefit as a basis for the development of speech and language in children with hearing losses.

Child Guidance

Regular Child Guidance Clinics are held at Brynmair, Llanelli, by Dr. John McDonald, Consultant Child Psychiatrist to the Glantawe Hospital Management Committee and at Pond Street Clinic, Carmarthen, by Dr. Evan Davies, Consultant Child Psychiatrist to the South West Wales Hospital Management Committee. 129 children were seen at the clinics during the year.

Dr. McDonald reports as follows on the Llanelli Clinic :—

During the year 1969 I continued to provide a child psychiatric service at the Local Education Authority premises at Goring Road, Llanelli. In addition the Psychiatric Social Worker in Swansea frequently attended in order to interview parents and families of the children presented.

In last year's report I indicated the difficulty of striking a balance between providing a consultative service and a treatment service. In fact I think during this last year the tendency has been to see a slightly smaller number of patients more frequently rather than a larger number for single consultation. This has meant a drop in the number of new patients seen from thirty-nine to seventeen. However, the number remaining on the waiting list at the end of the year only went up by three compared with 1968, so the consultative service was not being badly neglected. The real sign of less service having been provided to Llanelli is the drop in the number of sessions from thirty-nine to thirty-three. It is true that certain Llanelli patients are seen either at Morriston Hospital, Singleton Hospital or at the headquarters clinic in Swansea, but even making allowances for that fact I think that I should attempt to increase the number of sessions provided during the following year.

The report on the Carmarthen Clinic by Dr. Evan Davies is as follows:—

During the year 1969 I continued to spend one day per week in Child Guidance Clinics in Carmarthenshire. The geographical difficulties had led me to believe that many children in the north of the county experienced difficulties in attending clinics held in Carmarthen and in order to facilitate their attendance arrangements were made whereby alternate clinics were held in Pond Street, Carmarthen and Ammanford.

Some 63 sessions were held in Pond Street where 157 patients were seen, 23 of these being new referrals. Attendances at Ammanford did not begin until July and 13 sessions were held there during the remainder of the year. 34 patients were seen of which 10 were new referrals.

Mr. Hywel Lewis continued to assist as social worker to the clinic preparing social work assessments of families attending and undertaking casework when required. Psychological assessments were obtained both from Dr. Cyril James, the Educational Psychologist, and from school medical officers, who were also responsible for recognition and referral of many of the emotionally disturbed school children seen in the clinic.

Facilities for dealing with disturbed adolescents remain unsatisfactory. The proposed unit for disturbed adolescents to be opened at St. David's Hospital will be of considerable value in providing opportunity for inpatient assessment of the more difficult problems encountered among adolescents attending the clinic. In addition, the proposed school for maladjusted children would be invaluable in providing residential accommodation and teaching for those children at present requiring placement in maladjusted schools outside the area.

School Milk and Meals

The number of primary school children receiving milk on a particular day towards the end of the year was 13,398 out of 14,746 in attendance, a percentage of 91 per cent.

158 School Departments received pasteurised milk, and 7 untreated milk. At 26 Departments, 'Long Life' milk was provided.

School meals continued in all schools and out of an attendance of 24,980 pupils, 20,429 pupils (82 per cent.) took advantage of the arrangements.

All appointments to school kitchens and canteen staff were subject to satisfactory medical, including chest X-ray examinations and to satisfactory faecal and urine bacteriological investigations.

Co-operation of Parents, Teachers and Voluntary Organisations

Generally, parents display an active interest in the medical inspection and treatment of their children, and are eager to follow the advice given by Medical Officers. 3,603 parents were present at the medical inspections during the year, equivalent to a percentage of 35.6. Greater efforts should be made by parents to attend the first medical examination of children at school.

Appreciation of the keen interest and active co-operation of Head-teachers and their staffs must again be recorded. The importance of their influence in matters relating to the children and also to the parents cannot be over-estimated, and the activities of the School Health Service would be seriously handicapped without that help and co-operation.

A good deal of assistance is also rendered by the Inspectors of the National Society for the Prevention of Cruelty to Children but their work relating to problem families and neglected children is now undertaken through the Children's Officer.

Handicapped Children

The ascertainment, classification and supervision of the handicapped child is one of the important functions of the School Health Service. There are no fixed procedures or specific criteria which govern the

placement of such children. Each case requires individual assessment and consideration and is evaluated on its own merits to ensure appropriate placement at the optimum age.

Educational facilities must be made available in keeping with age, aptitude and ability. These include special schools, provision of home tuition and special educational treatment at an ordinary school.

It is an accepted principle that no handicapped pupils be sent to a special school who can be satisfactorily educated at an ordinary school, thus avoiding withdrawal from the home influence and environment.

Home tuition is a poor substitute for education at school, but may be the only educational provision suitable for a small percentage of children suffering from severe disability. It obviously serves a very useful purpose during short periods as in convalescence from illness.

Report of Principal Dental Officer

The dental staff employed by the County remained unchanged during the year and consisted of myself, three full-time dental officers and two part-time female dental officers making a total full-time equivalent of 4.6 dental officers. One dental auxiliary is also employed. The five dental attendants employed by the County have remained unchanged for over 17 years and I should like to mention that Miss A. M. Maliphant has not missed a single day's work since she commenced her duties in 1952.

Mr. S. C. R. Evans, one of the dental officers, was granted permission to attend a course of lectures leading to a Diploma in Dental Public Health. The course lasts for 2½ days per week for a period of 30 weeks.

School Dental inspection is still confined to the Infant and Junior schools in the County due to the limited manpower available. Treatment at the clinics is however available to all school ages when requested.

During the year the first mobile dental clinic was delivered and has been in constant use in the mainly rural Western part of Carmarthenshire. The introduction of the mobile clinic has proved to be most beneficial and children can now be treated under conditions which are as good as at any static clinics in the County.

Attempts to obtain a second mobile clinic for the Eastern part of the County have been delayed owing to financial difficulties, but it is hoped to obtain another mobile clinic during 1970. The introduction of a second mobile clinic for the remainder of the County will then allow all children to be treated under proper conditions and do away with the so-called temporary clinics in schools and other establishments.

I should like to thank the driver of the Land Rover who has been responsible for towing the mobile clinic and also setting it up ready for me under some very difficult conditions.

New equipment for one surgery in Llanelli was installed during the year, which could be transferred to the proposed Health Centre in Llanelli. It is hoped to instal a dental surgery at the new Comprehensive School in Llandeilo. Plans are also in being for the erection of Health Centres at Kidwelly, Burry Port, and Cross Hands.

Mrs. J. D. James, the dental auxiliary, spent 40 sessions attending schools to talk to the children on dental health. The school dental officers also take advantage of their visits to schools during school inspections to discuss dental health problems.

During the year, Mr. Derek Seel, F.D.S., D.Orth., R.C.S., was appointed as Consultant Orthodontist at Morriston Hospital. After consultation with Mr. Seel, the County now are able to refer cases to Morriston for his advice and he will also carry out treatment for cases

which are beyond our scope. This is a great improvement on conditions which existed a few years ago of having to refer cases to Guy's Hospital, in London. I should like to record my thanks to Mr. Seal for all his advice and ready help during the past year.

I should like to express my regret that although over 80 per cent. of the children in Carmarthenshire are found to have carious teeth, the County still opposes the Fluoridation of the water supplies of Carmarthenshire which, if introduced, could reduce by over 50 per cent. the present very high rate of caries. I hope, when the County Council discusses the subject of fluoridation, in the near future, that it will reverse its previous decision.

The Annual returns for Dental Services for Expectant and Nursing Mothers and children under 5 years are included in this joint report of the County Medical Officer of Health and the Principal School Medical Officer.

I should like to thank Mr. Eric Morgan, M.B., F.D.S., R.C.S. (Eng.), Consultant Dental Surgeon, Morriston Hospital, for his advice and treatment of the cases I have referred to him.

I should also like to thank Dr. Gerallt Jones and Dr. Martyn Danaher for their support and interest in dental matters and also my colleagues in the dental service, medical staff, headteachers and administrative staff for their ready co-operation.

WILLIAM LLEWELYN,

Principal Dental Officer.

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TABLE No. 1
Births

	Live Births	Still Births	Total
Legitimate :			
Male	1073	12	1085
Female	956	17	973
Illegitimate :			
Male	50	—	50
Female	54	2	56
Total	2133	31	2164
Rate per 1,000 estimated population	13.0	—	—
Rate per 1,000 live and still births	—	14	—
Rate of Illegitimate Births per 100 Live/Still Births	—	—	4.9

TABLE No. 2
Infant Mortality

	Infant Deaths	Neonatal Deaths	Early Neonatal Deaths	Perinatal Deaths
Legitimate	37	26	25	54
Rate per 1,000 Legitimate Live Births	18	13	12	27
Illegitimate	2	2	2	4
Rate per 1,000 Illegitimate Live Births	19	19	19	38
Total	39	28	27	58
Rate per 1,000 Live Births	18	13	13	—
Rate per 1,000 Live and Still Births	—	—	—	27

TABLE No. 3.
Infant Mortality—Causes

	Male	Female	Total
Enteritis and other diarrhoeal diseases	1	—	1
Pneumonia	1	2	3
Other diseases of respiratory system	1	—	1
Congenital anomalies	7	4	11
Birth injury, difficult labour, and other anoxic and hypoxic conditions	7	6	13
Other causes of perinatal mortality	4	5	9
Other malignant neoplasms	1	—	1
Totals	22	17	39

TABLE No. 4.
Live Births, Stillbirths and Infant Deaths
1965—1969

	1969	1968	1967	1966	1965
Live Births	2133	2237	2138	2294	2357
Rate per 1,000 estimated population	13.0	13.6	12.9	13.8	14.2
Still Births	31	46	41	43	41
Rate per 1,000 Live and Still Births	14.0	20.1	19.0	18.4	17.1
Infant Deaths	39	50	40	36	53
Rate per 1,000 Live Births	18.0	22.0	18.7	15.7	22.5
Neonatal Deaths	28	37	34	27	38
Rate per 1,000 Live Births	13.0	16.5	15.9	11.8	16.1
Early Neonatal Deaths	27	31	29	22	32
Rate per 1,000 Live Births	13.0	13.9	13.6	9.6	13.6
Perinatal Deaths	58	77	70	65	73
Rate per 1,000 Live and Still Births	27.0	33.7	32.7	27.8	30.4

TABLE No. 5
Maternal Deaths

	1969	1968	1967	1966	1965
Maternal Deaths	—	—	—	—	—
Rate per 1,000 total Births	—	—	—	—	—
Rate for England and Wales	0.19	0.18	0.20	0.20	0.25
Maternal Deaths excluding Abortions	—	—	—	—	—
Rate per 1,000 Total Births	—	—	—	—	—

Cause of Death	All Ages			Under 4 weeks			4 weeks and under 1 year			1 to 5			5 to 15			15 to 45			45 to 65			65 to 75			75 years and over		
	Male		Total	M		T	M		F	M		F	M		F	M		F	M		F	M		F	M		T
Other diseases of the respiratory system	54	11	65	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	12	1	13	22	2	24	18	8	26
Peptic ulcer	9	5	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	1	5	3	—	3	2	4	6
Appendicitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Intestinal obstruction and hernia	5	4	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	2	2	—	2	1	4	5
Cirrhosis of liver	3	8	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	3	—	5	5	1	2	3
Other diseases of the digestive system	6	11	17	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	2	5	2	4	6	—	5	5
Nephritis and nephrosis	9	8	17	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	4	8	—	3	3	4	1	5
Hyperplasia of prostate.....	6	—	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	3	3	—	3
Other diseases of the genito-urinary system	7	9	16	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	4	3	4	7	2	3	5
Abortion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other complications of pregnancy, childbirth and puerperium	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of the skin and subcutaneous tissue	2	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of the musculo-skeletal system and connective tissue	2	6	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital anomalies	10	8	18	3	2	5	4	2	6	—	2	2	—	—	—	—	—	—	1	1	2	1	3	4	—	2	2
Birth injury, difficult labour, and other anoxic and hypoxic conditions	7	6	13	7	6	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other causes of perinatal mortality	4	5	9	4	5	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Symptoms and ill-defined conditions	6	9	15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Motor vehicle accidents	14	11	25	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	4	2	2	4	4	9	13
All other accidents	31	30	61	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	8	1	4	5	6	22	28
Suicide and self-inflicted injuries	5	6	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	4	8	1	2	3	—	—	—
All other external causes	3	3	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	3	5	—	—	—	—	—	—
	1284	1166	2450	15	13	28	7	4	11	3	4	7	7	4	11	53	25	78	364	194	558	417	306	723	418	616	1034

TABLE No. 7
Chief Causes of Death

Cause of Death	1965		1966		1967		1968		1969	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Heart and other Circulatory Disease	996	5.99	978	5.90	966	5.85	979	6.00	1006	6.15
Cancer	375	2.25	378	2.28	396	2.40	368	2.23	388	2.37
Vascular Lesions of Brain	315	1.98	368	2.22	381	2.31	387	2.35	428	2.62
Pneumonia	55	0.33	62	0.37	69	0.42	105	0.64	94	0.57
Bronchitis	73	0.44	103	0.62	65	0.39	106	0.64	117	0.72
Other diseases of respiratory system	74	0.44	89	0.54	69	0.42	46	0.28	65	0.40
Motor Vehicle Accidents	28	0.17	28	0.17	22	0.13	22	0.13	25	0.15
All Other Accidents	60	0.36	62	0.37	66	0.40	62	0.38	61	0.37

TABLE No. 8
Classification of Deaths from Cancer

Site of Cancer		Age Periods						Total	Grand Total
		0—	1—	5—	15—	45—	65—	75—	
Buccal Cavity, etc.	M	—	—	—	1	1	2	1	5
	F	—	—	—	—	—	1	3	4
Oesophagus	M	—	—	—	—	1	1	2	4
	F	—	—	—	—	—	2	2	4
Stomach	M	—	—	—	1	13	10	12	36
	F	—	—	—	—	5	12	12	29
Intestine	M	—	—	—	1	9	15	10	35
	F	—	—	—	—	6	11	15	32
Lung, bronchus	M	—	—	—	1	31	23	5	60
	F	—	—	—	—	7	2	1	10
Breast	M	—	—	—	—	—	—	—	—
	F	—	—	—	2	10	6	6	24
Uterus	M	—	—	—	—	—	—	—	—
	F	—	—	—	3	5	4	6	18
Prostate	M	—	—	—	—	4	10	7	21
	F	—	—	—	—	—	—	—	—
Others	M	1	—	2	1	19	15	8	46
	F	—	1	—	5	21	14	19	60
Total	M	1	—	2	5	78	76	45	207
	F	—	1	—	10	54	52	64	181

TABLE No. 9
Ante-Natal Clinics

	Weekly Sessions	M.O.	Attendances		Average Total attendance per session
			Ante-Natal	Post-Natal	
Amman Valley Hospital	One	John Davies	1066	—	21.76
Burry Port	Two	O. Williams	329	71	4.08
Cross Hands	Two	M. Ll. Morgan	659	51	6.96
Kidwelly	One	O. Williams	112	47	3.18
Llanelli	One	C. I. Morgan	329	5	6.42
Pontyates	One	O. Williams	385	18	8.06

	Total number of cases	Total Attendances
Ante-Natal	781	2880
Post-Natal	141	192
Totals	922	3072

TABLE No. 10
Mothercraft and Relaxation Classes

Class	Sessions weekly	Attended for first time during year		Total Attendances	Average attendance per session
		Booked for Hospital Confinement	Booked for Home Confinement		
Llanelli	One	154	—	788	11.26
Carmarthen	One	105	1	763	14.96
Llwynhendy	One	55	2	252	5.60
Llandeilo	One	50	2	312	6.24
*Ammanford	One	34	—	161	5.55

* Classes commenced 18th June

TABLE No. 11
Child Health Clinics

No. of Child Health Clinics at end of year—37.

Clinic	Where Held	Day Held	Attendances	Average Attendances
Ammanford	Child Health Clinic, High Street, Ammanford	Tuesday (W)	1602	32.04
Brechfa	Church Hall, Brechfa	Thursday (M)	96	4.80
Brynamman	The Clinic, Brynamman	Thursday (W)	1613	32.26
Burry Port	Memorial Hall, Burry Port	Tuesday (F)	1763	70.52
Carmarthen	The Clinic, Pond Street, Carmarthen	Wednesday (F)	647	15.05
Cross Hands	Public Hall, Cross Hands	Tuesday (F)	685	27.40
Cwmamman	Bethesda Chapel Vestry, Glanamman	Wednesday (F)	602	23.15
Cwmann	Church Hall, Cwmann	Thursday (F)	247	9.88
Felinfoel	Ysgol-y-Babanod, Felinfoel	Wednesday (F)	631	24.27
Ferryside	Community Centre, Ferryside	Tuesday (F)	233	9.71
Kidwelly	Capel Sul Vestry, Kidwelly	Tuesday (F)	663	26.52
Laugharne	The Clinic, Laugharne	Tuesday (F)	440	18.33
Llandeilo	The Clinic, 16, Crescent Road, Llandeilo	Wednesday (F)	231	9.24
Llandovery	The Clinic, Llandovery	Tuesday (F)	421	16.84
Llandybie	Assembly Rooms, Memorial Hall, Llandybie	Wednesday (F)	570	21.11
Llanelli Borough	Brynmair, Llanelli	Mon. and Fri. (W)	4242	28.47
Llangadog	Y.M.C.A. Hall, Llangadog	Friday (M)	267	22.24
Llangennech	Salem Chapel Vestry, Llangennech	Tuesday (F)	562	22.48
Llanstephan	Memorial Hall, Llanstephan	Wednesday (F)	225	8.65
Llanybyther	The Clinic, Llanybyther	Monday (F)	191	7.96
Llwynhendy	The Health Centre, Llwynhendy	Thursday (W)	978	30.56
Meidrim	Church Hall, Meidrim	Thursday (M)	186	15.50
Newcastle Emlyn	The Court House, Newcastle Emlyn	Friday (F)	250	10.00

Clinic	Where Held	Day Held	Attendances	Average Attendances
Pencader	County Primary School, Pencader	Wednesday (F)	192	7.38
Pendine	The Institute, Llanmiloe, Pendine	Thursday (F)	310	12.92
Penygroes	Congregational Chapel Vestry, Penygroes	Tuesday (F)	406	16.92
Ponthenry	Welfare Hall, Ponthenry	Wednesday (F)	380	14.62
Pontyates	Welfare Hall, Pontyates	Wednesday (F)	751	28.88
Pontyberem	Public Hall, Pontyberem	Wednesday (F)	552	22.08
Pumsaint	Coronation Hall, Pumsaint	Thursday (6W)	64	7.11
Pwll	Community Centre, Pwll	Thursday (F)	216	9.00
St. Clears	The Clinic, St. Clears	Tuesday (F)	345	13.80
Trimsaran	Welfare Hall, Trimsaran	Tuesday (F)	418	17.42
Tumble	Welfare Hall, Tumble	Tuesday (F)	485	20.21
Velindre	Red Dragon Hall, Velindre, Llandyssul	Thursday (F)	498	19.15
Whitland	Memorial Hall, Whitland	Friday (F)	355	14.79
Ystradowen	The County Primary School, Ystradowen	Wednesday (F)	227	9.08

W—weekly ; F—fortnightly ; M—monthly ; 6W—six weekly

Number of children who attended Clinics :—

Born 1969	1421
Born 1968	1319
Born 1964-1967	1326
	<u>4066</u>

Number of children attending clinics at the end of the year :—

Under 1 year of age	1321
Between 1 and 5 years of age	2250
	<u>3571</u>

No. of children referred for special treatment or advice : 180

TABLE No. 12
Orthopaedic Treatment

Summary of cases.

	Education Committee	Health Committee	Hospital Manage- ment Committee	Total
Number of individual cases under Scheme on 1st January, 1969	1712	1232	30	2974
Number of new cases during the year	158	249	—	407
Transfer to	158	—	4	—
Number of individual cases dealt with during the year	982	646	16	1644
Transfer from	4	158	—	—
Number of cases withdrawn from Scheme	361	329	6	696
Number of cases under the Scheme on the 31st December, 1969	1663	994	28	2685
Total number of attendances made at the clinics	5457	3366	86	8909
Number of home visits by Sisters	353	313	44	710
Number of cases examined by visiting Orthopaedic Surgeons	96	62	2	160
Number of cases recommended in-patient hospital treatment by Surgeons	11	5	1	17
Number of cases admitted to hospital	13	12	2	27

TABLE No. 13
Orthopaedic Treatment

Diagnosis of all cases under Supervision at 31st December, 1969

	Education Committee	Health Committee	Hospital Manage- ment Committee	Total
Paralysis :				
Infantile	6	2	12	20
Spastic	17	5	1	23
Obstetrical	—	—	—	—
Other	—	1	—	1
Congenital Deformities	102	57	6	165
Infective Conditions of Bones and Joints :	—	—	1	1
Non-infective conditions of Bones and Joints :				
Rickets	—	—	—	—
Other	2	—	—	2
Static or Postural Defects	1521	905	6	2432
Traumatic Deformities	—	—	1	1
Multiple Defects	—	—	—	—
Miscellaneous	15	24	1	40
Totals	1663	994	28	2685

Premature Births

Number of premature births (as adjusted by any notifications transferred in or out of the area)

Weight at birth	Premature live births													
	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					
	Died				Died				Died					
	Total births	within 24 hours of birth	in 1 and under 7 days	in 7 and under 28 days	Total births	within 24 hours of birth	in 1 and under 7 days	in 7 and under 28 days	Total births	within 24 hours of birth	in 1 and under 7 days	in 7 and under 28 days	Born	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
(1) 2 lb. 3 oz. or less	8	5	3	—	—	—	—	—	1	1	—	—	5	—
(2) Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	11	2	2	—	—	—	—	—	1	—	—	—	3	—
(3) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	26	5	—	—	—	—	—	—	1	—	—	—	4	—
(4) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	23	1	—	—	2	—	—	—	1	—	—	—	2	—
(5) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	63	1	1	—	1	—	—	—	—	—	—	—	4	—
(6) Total	131	14	6	—	3	—	—	—	4	1	—	—	18	—

TABLE No. 15
No. entered on "At Risk" Register during 1969

Code No.	No. of Notifications
<i>PRE-NATAL :</i>	
1 Rubella or other virus infection in first 16 weeks of pregnancy	—
2 Blood incompatibilities, e.g., rhesus sensitization	8
3 Hyperemesis	2
4 Ante-partum Haemorrhage	16
5 Severe illness necessitating chemotherapy or major surgery in early months of pregnancy	—
6 X-ray other than chest X-ray	2
7 Thyrotoxicosis	—
8 Diabetes	8
9 Toxaemia of pregnancy	86
10 Other complications of pregnancy, e.g. pyelitis	4
11 Any psychiatric illness in pregnancy	—
<i>PERI-NATAL :</i>	
12 Prolonged or difficult labour	65
13 Postmaturity	46
14 B.W. under 5½lbs. ; gestation under 36 weeks	145
15 Foetal distress	46
16 Birth asphyxia	119
17 Prolonged poor sucking	—
<i>POST-NATAL :</i>	
18 Jaundice	40
19 Convulsions	—
20 Respiratory distress ; cyanotic attacks	8
21 Any congenital abnormalities	14
<i>GENETIC :</i>	
22 Family history of deafness, blindness, etc.	9
23 Symptomatic group	—
24 No applicable factor	—

Total number of children reported—519

TABLE No. 16
Congenital Malformations

	Number of	
	Live Births	Still Births
Central Nervous System	9	6
Eye, Ear	—	—
Alimentary System	1	4
Heart and Great Vessels	—	1
Respiratory System	—	—
Uro-Genital System	1	—
Limbs	10	1
Other skeletal	—	1
Other systems	—	1
Other Malformations	—	1

No. of individual cases involved :—

Live Births 19

Still Births 8

TABLE No. 17
Ruth Griffiths Tests

Condition	No. of cases Assessed	Hearing			General Intelligence Quotient				
		Normal	Doubtful	Defective	Under 25%	25—49%	50—74%	75—100%	100+ %
Prematurity	67	60	7	—	—	1	1	39	26
Haemolytic Disease of the new-born	4	4	—	—	—	—	—	2	2
Delayed milestones	2	2	—	—	—	—	2	—	—
Other Conditions	17	15	2	—	—	—	2	9	6
Totals	90	81	9	—	—	1	5	50	34

TABLE No. 18
National Welfare Foods

	First quarter		Second quarter		Third quarter		Fourth quarter		Total distribution for year	Average weekly distribution during year
	Total distribution	Average per week	Total distribution	Average per week	Total distribution	Average per week	Total distribution	Average per week		
National Dried Milk (Tins)	4888	376.00	4422	340.15	3999	307.62	3756	288.92	17065	328.17
Cod Liver Oil (Bottles)	806	62.00	572	44.00	482	37.08	716	55.08	2516	49.54
Orange Juice (Bottles)	7163	551.00	8426	648.15	8444	649.54	8148	626.77	32181	618.87
Vitamin 'A' & 'D' (Packets)	468	36.00	366	28.15	286	22.00	469	36.08	1589	30.56

TABLE No. 19
Dental Services for Expectant and Nursing Mothers and Children under 5 years

Attendances and Treatment

Number of Visits for Treatment During Year	Children 0—4 (inclusive)	Expectant and Nursing Mothers
First Visit	40	7
Subsequent Visits	47	22
Total Visits	87	29
Number of Additional Courses of Treatment other than the First Course commenced during year	8	—
Treatment provided during the year—Number of Fillings	86	17
Teeth Filled	70	14
Teeth Extracted	22	18
General Anaesthetics given	12	1
Emergency Visits by Patients	5	—
Patients X-Rayed	1	1
Patients Treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis)	9	3
Teeth Otherwise Conserved	3	—
Teeth Root Filled	—	—
Inlays	—	—
Crowns	—	2
Number of Courses of Treatment Completed during the year	27	5

Prosthetics

Patients Supplied with full upper or full lower (First Time)	.....	I
Patients Supplied with Other Dentures	.....	—
Number of Dentures Supplied	.....	I

Anaesthetics

General Anaesthetics Administered by Dental Officers	—
--	-------	---

Inspections

	Children 0—4 (inclusive)		Expectant and Nursing Mothers	
Number of Patients given First Inspections During Year	A	36	D	6
Number of Patients in A and D above who required Treatment	B	28	E	6
Number of Patients in B and E above who were offered Treatment	C	28	F	6

Sessions

Number of Dental Officer Sessions (i.e. Equivalent Complete Half Days) :				
Devoted to Maternity and Child Welfare Patients :				
For Treatment	.....	G	20	
For Health Education	.....	H	—	

TABLE No. 20
Deliveries by Midwives

	Domiciliary Cases				Totals	Cases in In- stitu- tions
	Doctor not booked		Doctor booked			
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child		
County Council mid- wives (including dis- trict nurse/midwives employed directly by the Authority)	I	I	41	78	121	—
Midwives employed by Hospital Manage- ment Committees	—	—	—	—	—	1816
Private midwives*	—	—	—	—	—	—
Totals	I	I	41	78	121	1816
*Cases taken while relieving for : County Council and included in table above	—	—	—	3	3	—

TABLE No. 21
Domiciliary Deliveries—Analgesia

	Doctor present	Doctor not present	Total
Gas/Air	4	2	6
Gas/Oxygen	12	20	32
Pethidine	—	1	1
Pethilorfan	5	8	13
Trichloroethylene	—	5	5
Trichloroethylene/Gas Oxygen	—	1	1
Trichloroethylene/Pethidine	—	1	1
Gas/Air and Pethidine	—	1	1
Gas/Air and Pethilorfan	—	—	—
Gas Oxygen and Pethilorfan	4	12	16

TABLE No. 22

Health Visiting

Number of home visits

Infants

Born	Number of " FIRST " Annual Visits						Total Number of revists to all infants
	1969	1968	1967	1966	1965	1964	
No. of Infants	2151	1110	1905	1913	1935	552	31,621

Adults

(Table does not show actual number of **individual** patients as some have to be included under more than one heading, e.g., patient over 65 years of age discharged from hospital would be included under both headings).

	Number of Cases	Total No. of Visits
Mentally disordered	11	37
Over 65 years of age	450	1717
Discharged from Hospital (excluding Mental Hospital)	111	429
Ante-Natal	117	313
Tuberculous Households	261	550
Other Infectious Diseases	8	10
Not already included above	382	627
Total Visits		3683

Ineffective Visits

Health Visitors also made 6,942 "no access" visits, i.e., visits to homes, but found the patients or mother and infant not at home.

Clinic Sessions

1,585 Local Health Authority Clinic sessions were attended by Health Visitors.

TABLE No. 23
Home Nursing

	Under 5 years of age		5 years and up to 65 years		Over 65 years		Total	
	Number of patients	Number of Visits	Number of patients	Number of visits	Number of patients	Number of visits	Number of patients	Number of visits
Medical	59	289	1138	27404	2049	64133	3246	91826
Surgical	61	712	543	10933	384	11627	988	23272
Infectious Diseases	1	9	3	16	3	28	7	53
Tuberculosis	—	—	30	1404	6	129	36	1533
Maternal Complications	—	—	2	19	—	—	2	19
Others	6	7	11	18	17	200	34	225
Totals	127	1017	1727	39794	2459	76117	4313	116928
% of Total Cases	2.94	0.87	40.04	34.03	57.01	65.10	—	—

TABLE No. 24
Smallpox Vaccination

Year of birth	Estimated percentage vaccinated under two years of age	
	Carmarthenshire	Wales
1967	31%	28%
1968	36%	25%
1969	49%	20%

Vaccinations undertaken during year :—

Under 1 year old	110
Age 1 year	995
Age 2—4 years	204
Age 5—15 years	43

Total	1352
-------	------

Records in respect of 103 re-vaccinations were also received.

TABLE No. 25
Vaccination of Persons under the age of 16 completed during 1969

Completed Primary Courses

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962-65		
Quadruple DTPP	—	—	—	—	—	—	—
Triple DTP	910	673	155	48	90	21	1897
Diphtheria/Pertussis	—	—	—	—	—	—	—
Diphtheria/Tetanus	1	3	6	3	43	15	71
Diphtheria	—	—	—	—	—	—	—
Pertussis	—	—	—	—	—	—	—
Tetanus	—	2	2	9	48	267	328
Salk	—	—	—	—	—	—	—
Sabin	828	631	204	73	156	45	1937
Measles	4	64	45	48	13	15	189

Number of Children immunised against each disease during year

Disease	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962-65		
Diphtheria	911	676	161	51	133	36	1968
Whooping Cough	910	673	155	48	90	21	1897
Tetanus	911	678	163	60	181	303	2296
Polio	828	631	204	73	156	45	1937
Measles	4	64	45	48	13	15	189

Total Number of Children under 5 years of age immunised at any time

Born	Diphtheria	Whooping Cough	Tetanus	Polio	Measles
1969	911	910	911	828	4
1968	1420	1417	1423	1310	69
1967	1856	1829	1867	1670	84
1966	1902	1875	1922	1759	98
1965	1866	1833	1879	1623	46

TABLE No. 26

Vaccination of persons under 16 years of age completed 1969
Reinforcing Doses

Type of vaccine or dose	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962-65		
Quadruple DTPP	—	—	—	—	—	—	—
Triple DTP	—	235	252	56	224	57	824
Diphtheria/Pertussis	—	—	—	—	—	—	—
Diphtheria/Tetanus	—	12	25	10	325	62	434
Diphtheria	—	—	—	—	—	—	—
Pertussis	—	—	—	—	—	—	—
Tetanus	—	4	5	3	27	96	135
Salk	—	—	—	—	—	—	—
Sabin	—	12	42	13	246	140	454
Measles	—	—	—	—	—	—	—

No. of children who received "booster" doses against each disease during year

Disease	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962-65		
Diphtheria	—	247	277	66	549	119	1258
Whooping Cough	—	235	252	56	224	57	824
Tetanus	—	251	282	69	576	215	1393
Polio	—	13	42	13	246	140	454

TABLE No. 27
BCG Vaccination

	School Children	Pupils attending independent schools	Students	Child Contacts of Tuberculosis Patients
(1) No. eligible	1613	—	—	—
(2) No. of (1) skin tested	1501 (93.06%)	—	—	186
(3) No. of (2) who were :—				
(a) Found to be negative	1242 (82.74%)	—	—	150 (73.81%)
(b) Found to be positive	61 (4.06%)	—	—	21 (12.70%)
(c) failed to attend for reading of skin test	70 (4.66%)	—	—	—
(d) Had BCG vaccination	1204 (80.21%)	—	—	119 (47.22%)
(e) No. refused vaccination after having skin test or were medically unfit for vaccination	11 (0.73%)	—	—	—

27 children class contacts of a reported case of tuberculosis were skin tested only. All were found negative.

TABLE No. 28
Ambulance Stations

Station	Number of Ambulances	Whole-time Drivers	Attendants
Llanelli	3†	8	Three whole-time and Volunteers
Carmarthen	3*	7	Three whole-time and Volunteers
Glanamman	1	2	Volunteers
Ammanford	2*	4	Volunteers
Trimsaran	1	2	Volunteers
Tumble	3*	5	Volunteers
Llandeilo	2*	3	Volunteers
Llandovery	1	2	Volunteers
Whitland	1	2	Volunteers

* 1 Ambulance only on 24 hour service

† 1 Ambulance only between midnight and 8 a.m.

TABLE No. 29

Comparison of mileages travelled and patients carried during last ten years

Year	Mileage	% + or — over previous year	Patients	% + or — over previous year
1960	559,845	+ 3.24	58,361	+ 5.26
1961	553,971	— 1.05	60,306	+ 3.33
1962	539,915	— 2.54	60,208	— 0.15
1963	581,192	+ 7.65	65,900	+ 9.47
1964	645,940	+ 11.14	72,266	+ 9.65
1965	663,925	+ 2.78	76,709	+ 6.15
1966	655,529	— 1.27	68,959	— 10.11
1967	646,771	— 1.33	66,820	— 3.10
1968	644,583	— 0.34	66,683	— 0.20
1969	670,849	+ 4.07	71,822	+ 7.70

Summary of the monthly work of the Ambulance Service for the year 1969 with comparable average monthly figures for the previous year

Month	TRIPS				PATIENTS				MILEAGE				Total		
	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service		C.C. "Sitting Case" Vehicles	Hired Cars
January	931	312	223	14	1480	3174	1097	1371	75	5717	24602	19099	8840	1031	53572
February	884	343	226	11	1464	2829	1073	1304	58	5264	23017	17712	8507	758	49994
March	1141	461	232	5	1839	3735	1622	1565	22	7004	29767	25039	8924	351	64081
April	859	349	214	5	1427	2774	1181	1285	25	5265	22974	18767	7919	377	50037
May	1115	434	246	6	1801	3874	1517	1574	32	6997	29498	22650	9114	521	61783
June	970	378	200	5	1553	3266	1322	1421	28	6037	25363	19322	8498	415	53598
July	903	358	190	11	1462	2984	1125	1147	50	5306	24550	17756	8189	953	51448
August	1120	403	267	10	1800	3319	1372	1400	55	6146	30436	22231	9522	837	63026
September	910	364	147	21	1442	3123	1197	965	93	5378	24951	19793	5789	1281	51814
October	880	383	200	15	1478	3078	1288	1573	57	5996	23678	20998	8399	1036	54111
November	1087	483	244	23	1837	4060	1755	1838	86	7739	30590	26498	9560	1746	68394
December	875	315	186	16	1392	2772	1025	1126	50	4973	23252	18128	6471	1140	48991
Total	11675	4583	2575	142	18975	38988	15574	16569	631	71822	312678	247993	99732	10446	670849
Average per month for 1969	973	382	215	12	1581	3249	1298	1381	53	5985	26056	20666	8311	870	55904
Average per month for 1968	930	354	231	6	1521	2924	1183	1421	29	5557	24462	19979	8802	472	53715

TABLE No. 31
Chiropody
Classification of patients treated

Classification	No. of Cases	Clinic Attendances	Home Treatments
Elderly	4662	14268	9113
Handicapped	165	294	547
Expectant and nursing mothers	8	22	—
	4835	14584	9660

Summary of Conditions treated

Condition	No. of treatments	Condition	No. of treatments
Bunions	1254	Callosities	10733
Corns	14452	Ingrowing Nails	1015
Nail trimming	13158	Miscellaneous Conditions	6114

TABLE No. 32
Exfoliative Cytology

Clinic	No. of Sessions	Number Investigated	Results	
			Satisfactory	Unsatisfactory
Llanelli	52	256	224	32
Carmarthen	25	129	108	21
Ammanford	21	120	112	8
Total	98	505	444	61

TABLE No. 33
Cases receiving home help assistance on 31st December, 1969

		WEEKLY HOURS OF ASSISTANCE, ACCORDING TO AGE										Totals
Age Distribution	30 years of age and under	Over 30 and up to 40 years	Over 40 and up to 50 years	Over 50 and up to 60 years	Over 60 and up to 65 years	Over 65 and up to 70 years	Over 70 and up to 75 years	Over 75 and up to 80 years	Over 80 and up to 85 years	Over 85 and up to 90 years	Over 90 years	
Weekly Assistance Received :												
6 hours and under	4	9	9	48	59	108	179	146	80	27	7	676
Over 6 hours and up to 9 hours	—	2	3	5	9	12	14	22	20	7	2	96
Over 9 hours and up to 12 hours	2	3	3	7	13	10	23	13	8	7	7	96
Over 12 hours and up to 15 hours	1	—	—	1	—	—	2	1	2	1	—	8
Over 15 hours and up to 18 hours	1	—	1	1	—	—	1	—	1	—	—	5
Over 18 hours	—	1	—	—	—	—	—	—	—	—	—	1
Totals	8	15	16	62	81	130	219	182	111	42	16	882

TABLE No. 34
Duration of assistance for cases on books on 31st December, 1969

Period	No. of Cases
Less than one month	24
One month to two months	31
Two months to three months	36
Three months to four months	38
Four months to five months	11
Five months to six months	19
Six months to twelve months	122
Over twelve months	601
Total	882

TABLE No. 35
Home Help Service
Classification of Patients who received assistance during 1969

Classification	No. of Cases
Over 65 years of age	866
Under 65 :	
Chronic Sick and Tuberculous	177
Mentally Disordered	2
Maternity	15
Others	36
Total	1096

TABLE No. 36
Mental Health Service

Mental Subnormality—Patients brought to notice of Local Health Authority during 1969

	Male	Female	Total
At Hospital—inward transfer	I	—	I
Admitted to Hospitals	—	—	—
Placed on Waiting List for admission to suitable Hospitals	—	—	—
Placed under guardianship	—	—	—
Placed in Community Care	IO	4	14
Action Pending	—	—	—
Found not to be Subnormal	—	—	—
Died	—	—	—
Totals	II	4	15

TABLE No. 37

Table of hospitals for the subnormal at which Carmarthenshire patients are resident

Hospital	Male		Female		Totals
	Aged		Aged		
	under 16	over 16	under 16	over 16	
Hensol Hospital	3	22	2	11	38
Ely Hospital	2	2	4	8	16
Llanfrechfa Grange	1	6	—	3	10
Garth Angharad	—	3	—	—	3
Oakwood Park	—	3	—	—	3
Llys Maldwyn	—	5	—	3	8
Brynhyfryd Hospital	—	3	—	—	3
Pantglas	—	—	—	39	39
Broughton Hospital	—	—	1	2	3
Little Plumstead Hospital, Norwich	—	1	—	—	1
Totals	6	45	7	66	124

TABLE No. 38
Number of Persons under Local Health Authority Care at 31st December, 1969

	Mentally Ill				Elderly mentally Infirm		Psychopathic				Subnormal				Severely subnormal				Total
	Under age 16		16 and over		M	F	Under age 16		16 and over		M	F	Under age 16		16 and over				
	M	F	M	F			M	F	M	F			M	F					
1 Total number	—	—	42	78	—	—	—	—	—	—	27	25	54	50	9	10	23	15	333
2 Attending workshops, day centres, or training centres (including special units)	—	—	—	—	—	—	—	—	—	—	19	18	30	21	6	5	3	2	104
3 Awaiting entry to workshops, day centres or training centres (including special units)	—	—	—	—	—	—	—	—	—	—	5	5	4	6	2	1	3	3	29
4 Receiving home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5 Awaiting home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6 Resident in L.A. home	—	—	—	—	—	—	—	—	—	—	4	—	1	3	1	2	2	—	13
7 Awaiting residence in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8 Resident in other home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9 Boarded out in private household	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10 Attending day hospital	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11 Receiving home (a) suitable to visits and not attend a training centre included in lines 2-10	—	—	—	—	—	—	—	—	—	—	—	1	4	4	—	1	—	2	12
(b) Others	—	—	42	78	—	—	—	—	—	—	3	1	16	18	1	3	15	8	185

TABLE No. 39
Communicable Diseases

Summary of notifications of infectious diseases received during 1969:—

Disease	No. of cases Notified	Disease	No. of cases Notified
Measles (excluding Rubella)	669	Ophthalmia Neonatorum	1
Dysentery (Amoebic or Bacillary)	130	Acute Poliomyelitis :	
Scarlet Fever	23	Paralytic	—
Whooping Cough	—	Non-Paralytic	—
Infective Jaundice	328	Leptospirosis	—
Tuberculosis :		Paratyphoid Fever	—
Respiratory	28	Typhoid Fever	—
Meninges and C.N.S.	—	Food Poisoning	2
Other	11	Malaria :	
Diphtheria	—	Contracted naturally in Great Britain	—
Tetanus	—	Abroad	—
Acute Meningitis	—	Induced :	
Acute Encephalitis :		Accidentally	—
Infective	—	Therapeutically	—
Post Infectious	—	Other	—

TABLE No. 40
Venereal Diseases

Cases treated at Special Treatment Centres

	Syphilis	Gonor- rhoea	Non-V.D. and other conditions	Total
Swansea Centre	1	16	69	86
Carmarthen Centre	—	6	43	49
Total	1	22	112	135

TABLE No. 41
Venereal Diseases

No. of cases dealt with for first time during each of last five years

Year	Acquired and Congenital Syphilis			Gonorrhoea			Other conditions
	M	F	T	M	F	T	
1965	5	2	7	15	1	16	71
1966	3	—	3	21	7	28	90
1967	2	1	3	15	—	15	90
1968	5	1	6	13	7	20	89
1969	1	—	1	13	9	22	112

TABLE No. 42
Tuberculosis

No. of new cases reported during last five years and rate per 1,000 population

Year	No. of Respiratory cases		Case rate	No. of Non-Respiratory cases		Case rate
1965	44		0.26	12		.07
1966	59		0.36	13		.08
1967	49		0.30	7		.04
1968	42		0.25	12		.07
1969	28		0.17	11		.07

TABLE No. 43
Tuberculosis

Mortality figures during last five years

Year	Deaths from Respiratory T.B.		Death Rate per 1,000 population	Deaths from Non-Respiratory T.B.		Death Rate per 1,000 population
1965	8		.05	3		.02
1966	5		.05	2		.01
1967	6		.04	1		.006
1968	4		.02	3		.018
1969	2		.01	1		.006

TABLE No. 44

Tuberculosis

Return of Children seen by Chest Physicians

	Dr. D. B. Ll. Morgan	Dr. J. T. Jones	Others	Total
Total number of children examined during 1969	456	144	1	601
Number of these children who were :—				
(a) Contacts	218	16	—	234
(b) Under school age	97	32	—	129
(c) Found to be suffering from :				
(i) Respiratory Tuberculosis	—	—	—	—
(ii) Non-Respiratory Tuberculosis	1	—	—	1
(d) Still under observation but not diagnosed at 31/12/69	8	4	—	12
(e) Found with no evidence of active tuberculosis	447	140	1	588

TABLE No. 45

Tuberculosis

Age distribution of all new cases notified during 1969

Age Periods	Respiratory		Non-Respiratory		Total
	M	F	M	F	
0—1	—	—	—	—	—
1—5	—	—	—	—	—
5—15	—	1	1	—	2
15—25	1	2	—	1	4
25—35	2	3	—	1	6
35—45	6	1	—	1	8
45—55	2	2	1	—	5
55—65	3	—	—	1	4
65+	3	2	1	4	10
Total	17	11	3	8	39
Grand Totals	28		11		

TABLE No. 46
Tuberculosis
Age distribution of deaths during 1969

Age Periods	Deaths from Tuberculosis			
	Respiratory		Non-Respiratory	
	M	F	M	F
0—1	—	—	—	—
1—5	—	—	—	—
5—15	—	—	—	—
15—45	—	—	—	—
45—65	—	—	—	—
65+	2	—	—	1
Totals	2	—	—	1
Grand Totals	2		1	

TABLE No. 47
Tuberculosis
Summary of cases on Register during 1969

	Resp.		Non-Resp.		Totals		Grand Total	Rate per 1,000 population
	M	F	M	F	M	F		
Cases on Register 1/1/69	301	101	19	54	320	155	475	2.88
Notified cases, 1969	15	10	3	7	18	17	35	0.21
Inward Transfers	2	1	—	1	2	2	4	0.02
Total New cases	17	11	3	8	20	19	39	0.24
Withdrawn : Recovered	24	12	2	3	26	15	41	—
Left Area	5	3	—	—	5	3	8	—
Change of Diagnosis	1	—	—	—	1	—	1	—
Deaths :								
Tuberculosis	2	—	—	1	2	1	3	—
Other causes	13	7	1	—	14	7	21	—
On Register, 1/1/70	273	90	19	58	292	148	440	2.08

TABLE No. 48

Blind Persons

Age distribution and primary ocular disease of cases registered during 1969

Age at Registration	Primary Ocular Disease								Total		Grand Total
	Cataract		Glaucoma		Retrolental Fibroplasia		Other				
	M	F	M	F	M	F	M	F	M	F	
0—4	—	—	—	—	—	—	—	—	—	—	—
5—15	—	—	—	—	—	—	—	—	—	—	—
16—20	—	—	—	—	—	—	—	—	—	—	—
21—29	—	—	—	—	—	—	—	—	—	—	—
30—39	—	—	—	1	—	—	—	—	—	1	1
40—49	—	—	—	—	—	—	1	—	1	—	1
50—59	—	1	—	—	—	—	3	2	3	3	6
60—69	1	4	1	2	—	—	4	7	6	13	19
70—79	4	11	1	3	—	—	2	7	7	21	28
80 and over	2	14	—	7	—	—	4	7	6	28	34
Totals	7	30	2	13	—	—	14	23	23	66	89

TABLE No. 49

Blind Persons

Age distribution of all persons on Register at 31st December, 1969

Age Group	Males	Females	Total
0—4	1	—	1
5—15	—	2	2
16—20	2	2	4
21—29	4	3	7
30—39	9	2	11
40—49	14	11	25
50—59	26	20	46
60—69	34	54	88
70—79	49	114	163
80 and over	58	146	204
Totals	197	354	551

TABLE No. 50
Partially Sighted

Age distribution and primary ocular disease of cases registered during 1969

Age at Registration	Primary Ocular Disease								Total	Grand Total
	Cataract		Glaucoma		Retrolental Fibroplasia		Other			
	M	F	M	F	M	F	M	F		
0—4	—	—	—	—	—	—	—	—	—	—
5—15	—	—	—	—	—	—	—	—	—	—
16—20	—	—	—	—	—	—	—	—	—	—
21—49	1	—	—	—	—	—	1	2	2	4
50—64	2	1	—	—	—	—	5	—	7	8
65 and over	8	10	2	2	—	—	6	12	16	24
Totals	11	11	2	2	—	—	12	14	25	27

TABLE No. 51
Partially Sighted

Age distribution of all persons on Register at 31st December, 1969

Age Group	M	F	Total
0—4	—	—	—
5—15	1	—	1
16—20	—	1	1
21—49	13	11	24
50—64	14	15	29
65 and over	43	63	106
Totals	71	90	161

TABLE No. 52
Follow-up of Registered Blind and Partially Sighted Persons

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(1) Number of cases registered during the year in respect of which Section F.1 of Form B.D.8 recommends :				
(a) No treatment	17	2	—	18
(b) Treatment (medical, surgical or optical)	42	17	—	45
(2) Number of cases at (1) (b) above which on follow-up action have received treatment	22	12	—	30

TABLE No. 53
Employment of Blind Persons

Number in Employment :

			M.	F.
In workshops for the blind	...	...	6	—
In open employment	...	...	14	4
			—	—
Total	...	...	20	4
			—	—
Number undergoing training	...	...	—	—

Number unemployed but capable of work :

			M.	F.
Trained for sheltered employment	...	...	1	—
Trained for open employment	...	...	1	—
Subject to being trained :				
(a) For sheltered employment	...	...	4	—
(b) For open employment	...	...	1	—

TABLE No. 54
Vital Statistics, 1969

Name of District	Estimated Population for 1969	Live Births		Deaths registered in District		Transferable Deaths		Deaths under 1 year		Area of District in Acres	Census 1961 Total population at all ages
		No.	Rate per 1,000 Population	No.	Rate per 1,000 Population	Outward	Inward	No.	Rate per 1,000 Live Births		
URBAN:											
Ammanford	5,940	73	12.3	83	14.0	2	22	2	27	951	6,267
Burry Port	5,900	90	15.3	79	13.4	3	43	2	22	1,374	5,865
Carmarthen	12,820	159	12.4	243	19.0	521	15	1	6	5,160	13,247
Cwmaman	4,050	37	9.1	67	16.5	11	23	1	27	756	4,263
Kidwelly	2,950	59	20.0	44	14.9	2	19	2	34	2,854	2,879
Llandeilo	1,880	16	8.5	27	14.4	2	8	—	—	311	1,904
Llandovery	2,090	22	10.5	29	13.9	21	8	1	45	1,266	1,911
Llanelli	27,570	328	11.9	431	15.6	174	63	4	12	2,069	29,979
Newcastle Emlyn	670	10	14.9	12	17.9	—	7	—	—	208	648
Total	63,870	794	12.4	1015	15.9	736	208	13	16	14,949	66,963
RURAL:											
Carmarthen	27,950	393	14.1	405	14.5	15	151	8	20	202,733	28,027
Llandeilo Fawr	23,350	293	12.5	348	14.9	14	136	3	10	236,581	24,480
Llanelli	40,430	547	13.5	526	13.0	55	216	13	24	51,367	40,301
Newcastle Emlyn	8,000	106	13.3	156	19.5	2	61	2	19	82,842	8,237
Total	99,730	1339	13.4	1435	14.4	86	564	26	19	573,523	101,045
Whole County	163,600	2133	13.0	2450	15.0	822	772	39	18	588,472	168,008
England and Wales	48,826,000		16.3		11.9				18		

TABLE No. 55
Table A.—Periodic Medical Inspections

Age Groups Inspected (By year of Birth)	No. of Pupils who have received a full medical examination	Physical Condition of Pupils Inspected		No. of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
		No.	No.		(6)	(7)	(8)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1965 and later	299	299	—	—	7	38	45
1964	1289	1289	—	—	32	166	186
1963	522	522	—	—	28	72	93
1962	51	51	—	—	2	3	5
1961	1615	1615	—	—	98	162	254
1960	301	301	—	—	21	23	43
1959	146	146	—	—	7	18	25
1958	977	977	—	—	59	44	97
1957	915	915	—	—	61	52	108
1956	184	184	—	—	10	9	19
1955	18	18	—	—	—	—	—
1954 and earlier	1108	1108	—	—	49	24	71
Total	7425	7425	—	—	374	611	946

Column (3) total as a percentage of Column (2) total 100%
 Column (4) total as a percentage of Column (2) total —%

TABLE No. 56
Other Inspections

Number of special Inspections	...	...	...	2693
Number of Re-inspections	...	...	...	79
Total		...	...	<u>2772</u>

TABLE No. 57
Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by School nurses or other authorised persons	...	...	...	41132
(b) Total number of individual pupils found to be infested	...	...	...	104
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	...	...	...	Nil
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	...	...	...	Nil

TABLE No. 58
Part II.—Defects found by periodic and special medical inspections during the year

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections				Special Inspection (7)
		Entrants (3)	Leavers (4)	Others (5)	Total (6)	
4	Skin	T 9	—	18	27	17
		O 35	9	80	124	49
5	Eyes—(a) Vision	T 68	49	257	374	216
		O 147	111	358	616	601
	(b) Squint	T 29	1	19	49	24
		O 33	2	58	93	48
	(c) Other	T 3	—	7	10	7
		O 6	1	17	24	13
6	Ears—(a) Hearing	T 20	1	40	61	34
		O 48	4	35	87	50
	(b) Otitis Media	T 10	2	6	18	8
		O 41	1	17	59	15
	(c) Other	T —	—	3	3	2
		O 10	—	11	21	7
7	Nose and Throat	T 43	2	41	86	41
		O 199	20	165	384	135

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections				Special Inspection (7)
		Entrants (3)	Leavers (4)	Others (5)	Total (6)	
8	Speech	T 10	—	22	32	26
		O 30	—	26	56	51
9	Lymphatic Glands	T 3	1	2	6	2
		O 88	1	68	157	59
10	Heart	T 6	1	10	17	19
		O 94	10	77	181	109
11	Lungs	T 11	3	15	29	11
		O 54	5	78	137	63
12	Developmental—(a) Hernia	T 3	—	1	4	4
		O 2	—	3	5	1
	(b) Other	T 7	4	20	31	17
		O 66	—	44	110	36
13	Orthopaedic—(a) Posture	T 3	—	1	4	3
		O 3	4	22	29	9
	(b) Feet	T 95	2	61	158	53
		O 75	7	91	173	87
	(c) Other	T 18	4	12	34	18
		O 40	6	47	93	29

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections					Special Inspection (7)
		Entrants (3)	Leavers (4)	Others (5)	Total (6)		
14	Nervous System—(a) Epilepsy (b) Other	T 5	3	6	14	13	
		O 17	2	11	30	14	
		T 1	—	3	4	3	
		O 8	3	12	23	9	
15	Psychological— (a) Development (b) Stability	T 3	—	5	8	23	
		O 15	2	28	45	34	
		T 4	—	6	10	14	
		O 21	1	22	44	33	
16	Abdomen	T 1	1	3	5	1	
		O 11	3	33	47	18	
17	Other	T 3	2	12	17	10	
		O 12	7	44	63	27	

TABLE No. 59

**Treatment of pupils attending maintained Primary and Secondary Schools
(including Nursery and Special Schools)**

Eye diseases, defective vision and squint

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	6
Errors of refraction (including squint)	1942
Total	1948
Number of pupils for whom spectacles were prescribed	386
Number of pupils for whom spectacles were provided	339

Diseases and defects of Ear, Nose and Throat

	Number of cases known to have been dealt with
Received operative treatment :—	
(a) for diseases of the ear	52
(b) for adenoids and chronic tonsilitis	393
(c) for other nose and throat conditions	46
Received other forms of treatment	49
Total	540
Total number of pupils still on the register of schools at 31st December, 1969, known to have been provided with hearing aids :—	
(a) during the calendar year 1969	—
(b) in previous years	23

Orthopaedic and postural defects

	Number known to have been treated
(a) Pupils treated at clinics or out-patients departments	1339
(b) Pupils treated at school for postural defects	—
	1339

Diseases of the skin (excluding uncleanliness)

	Number of pupils known to have been treated
Ringworm—(a) Scalp	1
(b) Body	—
Scabies	—
Impetigo	—
Other skin diseases	35
Total	36

Child Guidance Treatment

	Number known to have been treated
Pupils treated at Child Guidance Clinics	129

Speech Therapy

	Number known to have been treated
Pupils treated by speech therapists	110

Other Treatment Given

	Number known to have been treated
(a) Pupils with minor ailments	—
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	1204
(d) General Medical	657
(e) General Surgical	138
(f) Paediatrics	1144
	3143

TABLE No. 60
Summary of Children Examined by Ophthalmologists

	Outpatients	Inpatients	Total
West Wales Hospital	599	44	643
Llanelli Hospital	1168	29	1197
Amman Valley Hospital	100	—	100
Other Hospitals	6	2	8
Totals	1873	75	1948

Glasses were prescribed for 386 children and records held by the School Medical Officer showed that 339 had been provided with glasses at the end of the year.

TABLE No. 61*Asthma Clinics*

	Ammanford	Llanelli	Carmarthen	Total
No. of cases on register 1st January, 1969	66	130	61	257
No. of new cases	14	8	4	26
No. withdrawn	1	—	—	1
No. of cases on register 31st December	79	138	65	282
Total attendances	313	440	163	916
No. of individual cases treated	26	30	12	68

TABLE No. 62**Number of Children ascertained as Handicapped during 1969**

	Boys	Girls	Total
Blind	1	—	1
Physically handicapped	1	—	1
Educationally Subnormal	12	6	18
Total	14	6	20

Decisions were recorded under Section 57 of the Education Act, 1944, that 10 children (7 boys and 3 girls) had been found to be unsuitable for education at school.

TABLE No. 63**Number of Children admitted to Special Schools**

	On Waiting List at 31/12/68		Assessed 1969		Total
	B	G	B	G	
Blind	—	—	—	1	1
Educationally Subnormal	11	5	2	2	20
Total	11	5	2	3	21

TABLE No. 64
Number of Children at Special Schools or Classes on 22nd January, 1970

	Type of School						Special Classes	
	Maintained		Non-Maintained		Independent			
	B	G	B	G	B	G	B	G
Blind	—	1	—	—	—	—	—	—
Partially Sighted	1	—	—	—	—	—	—	—
Deaf	3	3	—	—	—	1	—	—
Partially hearing	1	2	—	—	—	—	8	6
Physically handicapped :—								
Spastics	1	—	1	—	—	—	—	1
Others	2	—	2	—	—	—	2	2
Delicate	—	—	—	—	—	—	—	—
Maladjusted	1	—	—	—	2	—	13	4
Educationally Subnormal	33	26	1	1	—	—	—	—
	42	32	4	1	2	1	23	13

There was also one diabetic child in a Boarding Home and attending an ordinary school

TABLE No. 65
Handicapped Children
Waiting List for Special Schools at 22nd January, 1970

	Blind		Physically handicapped		E.S.N.		Total
	B	G	B	G	B	G	
Under 5 years of age :							
Assessed pre 1969	—	—	—	—	—	—	—
Assessed during 1969	1	—	—	—	—	—	1
5 years of age and over :							
Assessed pre 1969	—	—	—	—	14	6	20
Assessed during 1969	—	—	1	—	10	4	15
Total	1	—	1	—	24	10	36

TABLE No. 66

Education in accordance with Section 56 of the Education Act, 1944

Home Tuition

			Boys	Girls	Total
Physically handicapped :					
	Spina bifida/hydrocephalus	...	3	1	4
	Perthes Disease	...	2	1	3
	Heart	...	2	2	4
	Others	...	1	5	6
Delicate	...	...	2	1	3
Others	...	...	1	2	3
	Totals	...	11	12	23

One girl was receiving education while at hospital.

TABLE No. 67

Dental Inspection and Treatment, 1969

2. *Attendances and Treatment*

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visit	3259	1751	120	5130
Subsequent Visits	2475	1669	235	4379
Total Visits	5734	3420	355	9509
Additional courses of treatment commenced	190	100	9	299
Fillings in permanent teeth	2697	3390	445	6532
Fillings in deciduous teeth	2511	100	—	2611
Permanent teeth filled	1987	2613	341	4941
Deciduous teeth filled	2192	78	—	2270
Permanent teeth extracted	177	489	78	744
Deciduous teeth extracted	1891	631	—	2522
General anaesthetics	802	299	12	1113
Emergencies	211	87	11	309
Number of Pupils X-rayed	43			
Prophylaxis	345			
Teeth otherwise conserved	614			
Number of teeth root filled	27			
Inlays	—			
Crowns	4			
Courses of treatment completed	3067			

3. *Orthodontics*

Cases remaining from previous year	77
New cases commenced during year	43
Cases completed during year	28
Cases discontinued during year	10
No. of removable appliances fitted	59
No. of fixed appliances fitted	—
Pupils referred to Hospital Consultant	12

4. *Phrosthethics*

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with full upper or full lower (first time)	—	1	—	1
Pupils supplied with other dentures (first time)	—	5	4	9
Number of dentures supplied	—	10	7	17

5. *Anaesthetics*

General Anaesthetics administered by Dental Officers 4

6. *Inspections*

(a) First inspection at school. Number of pupils	6259
(b) First inspection at clinic. Number of pupils	476
Number of (a) + (b) found to require treatment	5404
Number of (a) + (b) offered treatment	5404
(c) Pupils re-inspected at school or clinic	5504
Number of (c) found to require treatment	4191

7. *Sessions*

Sessions devoted to treatment	1955
Sessions devoted to inspection	185
Sessions devoted to Dental Health Education	40

TABLE No. 68

Other Examinations by Department Medical Officers

School Children

Special examination of children (for home tuition, special educational treatment, absence from school, transport to school, employment of children, boarded-out children)	186
Mental assessment of school children	80
Ruth Griffiths testing of children under two years of age ...	90
Hearing assessments	122

Others:—

Applications for admission to Welfare Homes ...	35
Staff Appointments	267
New Teaching Appointments	39
Persons on continuous sick leave	107
Persons retiring on account of illhealth	10
N.N.E.B. Students	9
Training College Students	294

TABLE No. 69

School Clinics

Location of Clinic	Type of Clinic	No. of Sessions
Permanent Clinics :		
Brynmair Clinic, Goring Road, Llanelli	Orthopaedic	Two weekly
	Asthma	One weekly
	Speech Therapy	Four weekly
	Hearing Assessment	One weekly
	Dental	As required
	Child Guidance	One weekly
The Clinic, High Street, Ammanford	Orthopaedic	Two weekly
	Asthma	One weekly
	Speech Therapy	Two weekly
	Hearing Assessment	As required
	Dental	As required
	Child Guidance	Fortnightly
Pond Street Clinic, Pentrefelin, Carmarthen	Orthopaedic	Two weekly
	Asthma	One weekly
	Speech Therapy	Two weekly
	Hearing Assessment	As required
	Dental	As required
	Child Guidance	Two weekly
The Clinic, 16, Crescent Road, Llandeilo	Orthopaedic	Two monthly
	Speech Therapy	One fortnightly
	Hearing Assessment	As required
	Dental	As required
The Clinic, Llwynhendy	Orthopaedic	Two fortnightly
	Speech Therapy	Two fortnightly
	Dental	As required
The Clinic, 5, Broad Street, Llandovery	Orthopaedic	Two monthly
	Dental	As required
	Speech Therapy	One fortnightly
The Clinic, Llanybyther	Orthopaedic	One monthly
	Dental	As required

School Clinics—continued

Location of Clinic	Type of Clinic	No. of Sessions
The Clinic, Laugharne	Dental	As required
The Clinic, Old Junior School, Brynamman	Orthopaedic Dental	One monthly As required
Penuel Old Vestry, St. Clears	Orthopaedic Dental	One monthly As required
The Clinic, C.P. School, Pencader	Orthopaedic Dental	One monthly As required

Temporary Clinics :

Memorial Hall, Whitland	Orthopaedic Dental	One monthly As required
Capel Sul Chapel Vestry, Kidwelly	Orthopaedic Dental	One monthly As required
The Institute, Memorial Square, Burry Port	Orthopaedic	Two fortnightly
Assembly Rooms, Memorial Hall, Llandybic	Orthopaedic	One monthly
Memorial Hall, Pontyberem	Orthopaedic	One monthly
Welfare Hall, Pontyates	Orthopaedic	One monthly
Bethania Chapel Vestry, Upper Tumble	Orthopaedic	One monthly
Tabernacle Vestry, Trimsaran	Orthopaedic	One monthly
County Primary School, Garnant	Orthopaedic	One monthly
Public Hall, Cross Hands	Dental	As required
Neuadd Ddraig Goch, Velindre	Dental Medical Examinations	As required As required
Memorial Hall, Llangain	Dental Medical Examinations	As required As required

TABLE No. 70
Chiropody Clinics

Place	Address	Responsible Body
Ammanford	The Clinic, High Street	Ammanford OAPA
Brynamman	The Clinic	Brynamman Detachment BRCS
Burry Port	Memorial Hall	Burry Port OAPA
Carmarthen	Red Cross H.Q., Spilman Street	Carmarthen Detachment BRCS
Carmarthen	Red Cross H.Q., Spilman Street	Carmarthenshire Branch BRCS
Carway	Primary School	Carway and District NFOAPA
Cefneithin	Welfare Hall	Cefneithin Branch NFOAPA
Cross Hands	Public Hall	Cross Hands OAPA
Cwmamman	Workmen's Hall (Garnant)	Cwmamman Detachment BRCS
Cwmgwili (Llanelli)	C.P. School	Cefneithin Branch NFOAPA
Drefach (Llanelli)	Hebron Chapel Vestry	County Council
Felinfoel	Community Centre	County Council
Ferryside	Community Centre	Ferryside Nursing Division StJAB
Gorslas	Church Hall, Church Road	Gorslas Branch NFOAPA
Hendy	C.P. School	Hendy Branch NFOAPA
Kidwelly	Town Hall	Kidwelly OPWC
Laugharne	The Clinic, Wogan Street	Laugharne OAPA
Llanarthney	C.P. School	Llanarthney Branch NFOAPA
Llandeilo	Llysefwr Hall, Greenfield Place	Llandeilo Detachment BRCS
Llandovery	The Clinic, Broad Street	Llandovery Detachment, BRCS
Llandybie	Tybie Hall, Kings Road	Llandybie Detachment BRCS
Llanelli	St. Alban's Church Crypt, Alban Road	Alban Road Branch NFOAPA
Llanelli	Bigyn and District OAP Hall, Bigyn Road	Bigyn and District OAPA
Llanelli	Western Hall, Paddock Street	Llanelli No. 1 Branch NFOAPA
Llanelli	Home Treatments	Llanelli OPWC
Llanelli	44, Coleshill Terrace	Llanelli Division StJAB
Llanelli	Council Offices, Swansea Road	Swansea Road Branch NFOAPA
Llanelli	St. Barnabas Church Hall, Llewellyn Street	Tyisha and Dock OAPA
Llangadog	Red Cross Hall, The Square	Llangadog Detachment BRCS
Llangeler	Village Hall, Pentrecwrt	Llangeler OPWC
Llangennech	Elderly Citizens Hall, Bridge Street	Llangennech Branch NFOAPA
Llanstephan	Memorial Hall	Llanstephan Detachment BRCS
Llanybyther	The Clinic	County Council
Llwynhendy	The Health Centre	Llwynhendy OAPA
Pembrey	Memorial Hall	Pembrey Darby and Joan Club
Pencader	Church Hall	County Council
Penybanc	Welfare Hall	Penybanc OAPA
Penygroes	OAP Hall, Bridge Street	Penygroes OAPA
Penygroes	Memorial Hall	Penygroes Detachment BRCS
Ponthenry	Village Welfare Hall	Ponthenry OAPA
Pontyates	Welfare Hall	Pontyates and District OAPA
Pontyberem	Memorial Hall	Pontyberem Branch NFOAPA
Pumpsaint	Coronation Hall, Pumpsaint	County Council
Pwll	Community Centre	County Council
St. Clears	The Clinic	St. Clears Detachment BRCS
Trimsaran	Welfare Hall	Trimsaran and District OAPA
Tumble	St. David's Vestry	Tumble Detachment BRCS
Tycroes	Welfare Hall	Tycroes and District Branch NFOAPA
Velindre (Llandyssul)	Y Ddraig Goch Hall	Velindre Detachment BRCS
Whitland	Memorial Hall	Whitland Detachment BRCS
Ystradowen	C.P. School	County Council

Home Treatments only are undertaken under the arrangements of the Newcastle
Emlyn and Adpar OPWC

BRCS	.....	British Red Cross Society
NFOAPA	.....	National Federation of Old Age Pensioners' Association
OAPA	.....	Old Age Pensioners' Association
OPWC	Old People's Welfare Committee
St JAB	Saint John Ambulance Brigade

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Item	Amount	Total
General Fund	100.00	100.00
Salaries	75.00	75.00
Fringe Benefits	15.00	15.00
Travel	5.00	5.00
Telephone	2.00	2.00
Postage	1.00	1.00
Supplies	1.00	1.00
Miscellaneous	1.00	1.00
Depreciation	1.00	1.00
Interest	1.00	1.00
Insurance	1.00	1.00
Utilities	1.00	1.00
Maintenance	1.00	1.00
Security	1.00	1.00
Legal	1.00	1.00
Professional Fees	1.00	1.00
Consulting	1.00	1.00
Advertising	1.00	1.00
Public Relations	1.00	1.00
Information Systems	1.00	1.00
Research and Development	1.00	1.00
Acquisition	1.00	1.00
Disposal	1.00	1.00
Capital Expenditures	1.00	1.00
Debt Service	1.00	1.00
Reserve	1.00	1.00
Other	1.00	1.00
Total	100.00	100.00







