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MONMOUTHSHIRE COUNTY COUNCIL.



ANNUAL REPORT
OF THE
COUNTY MEDICAL OFFICER OF HEALTH.
FOR THE YEAR 1960.

GWYN ROCYN JONES,

M.A., M.D., B.Chir., D.P.H.,

County Medical Officer.

CAMBRIA HOUSE,
CAERLEON, MON.



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INDEX

	Page		Page
Acute Poliomyelitis	16, 60	Tuberculosis	16, 63
Adulteration of Foodstuffs, etc. ...	89	Venereal Disease	70
Ambulance Service	20	Whooping Cough	16, 60
Ambulance Service, Table	77, 78	Infectious Diseases, Analysis, Table ...	59
Ante-Natal Clinics & Ante-Natal Care Area, Population, etc.	6, 72 48	Infectious Diseases, Notification Table ...	58
B.C.G. Vaccination	17	Infectious and Other Diseases, Prevalence and Control of ...	15
Births	48	Influenza	16, 60
Birth Control Clinics	7	Inspection and Supervision of Food ...	89
Births and Infant Deaths, Registrar-General's Table	53	Isolation Hospitals	60
Blindness, Prevention and Care of ...	14, 86	Liaison Arrangements	9
Cancer	16, 67	Lung Cancer	67, 68, 69
Caravans	45	Maternal Mortality	50
Care of Premature Infants	12	Maternity and Child Welfare	5, 6, 72
Causes of Deaths, Table	54, 55	Measles	16, 60
Cerebral Palsy	30	Meat	44
Chicken Pox	16, 60	Medical Appliances Scheme	10, 89
Child Guidance	25, 93	Medical Examination of Staff	95
Children's Homes	7	Meningococcal Infection	15, 60
Chiropody	14	Mental Health Service	22
Clean Air	40	Midwifery Services	11, 73
Clinics	8	Milk	42, 92
Convalescent Treatment	11, 87	Notifiable Diseases	15, 60
Deafness, Treatment of	18	Nuclear Radiation	45
Deaths	50	Nurseries and Child Minders	82, 83
Deaths from all Causes, Table	55	Nursing Home, Registration	83
Deaths, Causes and Age Groups	54	Nursing Service, Home	9, 81
Dental Officer's Report	8	Nursing Service, Night	9, 80
Dental Service, Table	88	Ophthalmia Neonatorum	75
Diphtheria	15, 60	Physiotherapy, Service, Mobile	79
Diphtheria, Immunisation, Tables ...	60	Poliomyelitis	16, 60
Epilepsy	30	Poliomyelitis Vaccination	17, 71
Family Planning Clinics	7	Post-Natal Clinic	7, 73
Foods and Drugs Act, 1955	89	Pneumonia	16, 60
Food Hygiene	44	Premature Infants, Care of	12
Gas and Air Analgesia	73	Premature Births, Table	76
Geriatric Service	9	Prevention of Blindness	14, 86
Health Centres	8	Problem Families	10, 89
Health Education	13	Puerperal Pyrexia	51
Health Visiting, Table	82	Registrar-General's Return of Deaths ...	55
Health Visitors, Work of	5, 72	Sale of Infant Food, etc.	6
Home Help Service	10	Sanitary Circumstances of the Area ...	36
Home Help Service, Table	88	Scarlet Fever	15, 60
Home Nursing Service	9	Schools	40
Home Nursing, Tables	81	Sewerage	38
Housing	38	Shops and Offices	45
Housing Acts, 1949 and 1954, Loans and Grants Table	85	Smallpox	15, 60
Housing, Table	84	Spastics	30
Ice Cream	44	Specialist Services	9
Illegitimate Children, Care of	8, 73	Staff	1, 2, 3, 4
Immunisation against Diphtheria ...	60	Statistics	48
Infant Mortality, Tables	56, 57	Stillbirths	49
Infant Protection	7	Swimming Baths	45
Infectious and Other Diseases, Prevalence, etc.—		Tuberculosis	16, 63
Acute Poliomyelitis	16, 60	Tuberculosis, Clinics, Time Tables	65
Cancer	16, 67	Tuberculosis Visiting	82
Chicken Pox	16, 60	Unmarried Mothers, Care of... ..	8
Diphtheria	15, 60	Vaccination, Smallpox, Table	62
Influenza	16, 60	Venereal Diseases	70
Measles	16, 60	Vital Statistics	51
Meningococcal Infection	15, 60	Vital Statistics, Table	52
Ophthalmia Neonatorum	75	Water Analyses, Table	91
Pneumonia	16, 60	Water Supplies	36
Poliomyelitis, Acute	16, 60	Whooping Cough	16, 60
Puerperal Pyrexia	51	Whooping Cough, Immunisation, Table ...	62
Scarlet Fever	15, 60	Women Dying in, or in Consequence of Child Birth	50
Smallpox	15, 60		

PREFACE.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN.

I have the honour and pleasure to submit my Annual Report as County Medical Officer for the County of Monmouth for the year 1960.

In general, the pattern of the report is similar to that of last year, with most of the statistical data in a section at the end.

The mid-year estimated population showed an increase of 1,950 over the previous year. The live birth rate per 1,000 of population increased from 16.85 to 17.29 and the death rate decreased to 11.58 from 11.75. Infantile mortality per 1,000 related home births was 25.49 as compared with 27.23 for 1959.

There were no serious outbreaks of infectious disease, a notable absentee amongst the notifications being acute poliomyelitis. There were again no cases of diphtheria and the number of measles notifications was very low, while respiratory tuberculosis notifications and deaths touched a new low level.

As regards the general health of the County, it has been a very satisfactory year.

I have the honour to be,

Your obedient Servant,

G. ROCYN JONES.

Cambria House,
Caerleon, Mon.

December, 1961.

PREFACE

To the Chairman and Members of the Health Committee
Mr. Chairman, Ladies and Gentlemen:

I have the honor and pleasure to submit to you a report on the
Medical Office for the County of Worcester for the year 1901.
In general, the pattern of the report is similar to that of last year,
most of the statistical data is a continuation of the same.

The mid-year estimate of population based on a census of 1,800 was the
basis for the report. The one born was 1,800 of population estimated for
the year 1901 and the County Office for the year 1901. The
population per 1,000 related home births was 30.44 as compared with 28.44
for 1900.

There were no serious outbreaks of infectious diseases, a notable exception
amongst the population being influenza. There were eight cases
of diphtheria and the number of scarlet fever cases was very low. The
respiratory tract, influenza and febrile conditions touched a new low level
in 1901.

As regards the general health of the County, it has been very good
during the year.

I have the honor to be
Your obedient servant,
G. BUCKLE JONES

Cambridge House
Quebec, Mass.
December, 1901

THE STAFF OF THE MONMOUTHSHIRE COUNTY COUNCIL HEALTH DEPARTMENT.

COUNTY MEDICAL OFFICER OF HEALTH:

G. Rocyn Jones, M.A., M.D., B.Chir., D.P.H.

Health Department, Cambria House, Caerleon, Mon. Tel. Caerleon 421.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH:

William Panes, M.R.C.S., L.R.C.P., D.P.H.

CONSULTANT MEDICAL AND SURGICAL STAFF:

J. T. Rice Edwards, F.R.C.S., L.R.C.P. (Surgical).

G. W. Hoare, M.A., M.B., F.R.C.S., M.R.C.S., L.R.C.P. (Ophthalmic).

D. N. Rocyn Jones, M.A., M.D., F.R.C.S. (Orthopaedic).

D. B. Sutton, F.R.C.S., L.R.C.P. (Ear, Nose and Throat).

R. Vaughan-Jones, M.B., Ch.B., D.O.M.S., F.R.C.S. (Ophthalmic).

Professor A. G. Watkins, M.D., M.R.C.S., F.R.C.P.

(Heart and Rheumatic).

M. L. Insley, M.D., Ch.B. (Geriatric).

Nora L. Keevil, M.D., B.S., M.R.C.O.G. (Obstetrics),

D. F. V. Johnston, B.Sc., M.B., B.Ch. (Child Psychiatric).

David Thomas, B.Sc., M.B., M.R.C.P., D.P.M. (Child Psychiatric).

DISTRICT AND AREA MEDICAL OFFICERS OF HEALTH:

Rhymney U.D.C.	}	Area No. 1	M. J. Donelan, M.B., B.Ch., D.P.H.
Tredegar U.D.C.			
Bedwellty U.D.C.		Area No. 2	R. A. Hoey, M.R.C.S., L.R.C.P., D.P.H.
Abercarn U.D.C.	}	Area No. 3	H. V. M. Jones, M.B., B.S., D.P.H.
Mynyddislwyn U.D.C.			
Ebbw Vale U.D.C.		Area No. 4	Thomas Stephens, M.C., B.Sc., M.R.C.S., L.R.C.P., D.P.H.
Nantyglo & Blaina U.D.C.	}	Area No. 5	J. Walters Bowen, M.B., B.Ch., D.P.H.
Abertillery U.D.C.			
Magor & St. Mellons R.D.C.	}	Area No. 6	K. P. Giles, M.B., Ch.B., D.P.H.
Bedwas & Machen U.D.C.			
Risca U.D.C.			
Pontypool U.D.C.	}	Area No. 7	F. J. Hallinan, M.B.E., M.B., B.Ch., B.A.O., D.P.H.
Blaenavon U.D.C.			
Cwmbran U.D.C.	}	Area No. 8	Evelyn D. Owen, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. (Retired 9-4-60).
Caerleon U.D.C.			Hywel G. Jenkins, M.B., B.S., D.P.H. (Com- menced 1-5-60, Asst. M.O. until 30-4-60).
Chepstow U.D.C.	}	Area No. 9	E. N. Dowell, M.R.C.S., L.R.C.P., D.P.H.
Chepstow R.D.C.			
Monmouth U.D.C.			
Monmouth R.D.C.			
Abergavenny U.D.C.	}	Area No. 10	Sadie M. R. James, M.B., B.Ch., B.Sc., D.P.H.
Abergavenny R.D.C.			
Usk U.D.C., Pontypool R.D.C.			

SENIOR MEDICAL OFFICERS OF HEALTH :

Rhiannon Morgan, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
 Esther Hughes Rees, M.B., B.Ch.

SENIOR MEDICAL OFFICER FOR MENTAL HEALTH :

Mary E. Cochrane-Dyett, M.B., Ch.B.

ASSISTANT MEDICAL OFFICERS :

Mary Rose MacQuillan, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

A. Joan Lewis, M.R.C.S., L.R.C.P.

Anna Gregory, M.R.C.S., L.R.C.P.

Margaret C. Jenkins, M.R.C.S., L.R.C.P.

Mary Stewart, B.Sc., M.B., B.Ch.

Mary Ll. Williams, M.B., B.Ch.

Cicely Waters, M.D., B.Sc., D.P.H., R.C.P.S.

Lilian J. Powell, M.B., B.Ch., B.Sc.

Elfreda Alice Davies, M.B., B.Ch.

Glenys G. Trenhaile, L.M.S.S.A.

Nano Joyce Sumption, M.B., B.Ch., B.Sc. (Wales).

Hywel G. Jenkins, M.B., B.S. (Lond.), D.P.H. (Commenced as Area
 Medical Officer 1-5-60).

William L. P. Gould, T.D., L.M.S.S.A. (Lond.),

Margaret May Salmon, M.B., B.Ch., D.Obst.R.C.O.G.

Kenneth E. Howells, M.B., B.S. (Temporary from 15-2-60. Permanent
 from 1-8-60).

Ann Thomas, M.B., B.Ch., D.Obst.R.C.O.G. (Commenced 1-2-60).

Arthur Trenhaile, L.M.S.S.A. (Temporary, commenced 30-10-60).

Peter N. Kersley, M.B., B.S., D.Obst.R.C.O.G. (Temporary, part-time
 commenced 2-12-60).

SENIOR DENTAL OFFICER :

E. F. J. Sumner, L.D.S., R.C.S.

ASSISTANT DENTAL OFFICERS :

J. C. Morley, L.D.S.

Greta McHarg, L.D.S.

W. S. Hazell, L.D.S., R.C.S. (Part-time).

D. J. Coughlin.

R. V. Clarke, L.R.C.P. & S., L.D.S.(Ed.).

Maureen F. E. Vaughan Jones, L.D.S.

Ruth G. Phillips, B.D.S.

COUNTY HEALTH INSPECTOR :

H. C. Bird, M.S.I.A., A.R.S.H.

ADDITIONAL COUNTY HEALTH INSPECTOR:

C. A. Lewis, M.S.I.A., A.R.S.H.

COUNTY AMBULANCE OFFICER:

H. Price.

MEDICAL COMFORTS OFFICER AND EQUIPMENT OFFICER:

Idris Williams.

SUPERVISOR OF MIDWIVES:

Miss O. Griffiths, S.C.M. (Retired 31-10-60).

SUPERINTENDENT OF HEALTH VISITORS:

Miss E. Morgan, S.R.N., S.C.M., H.V.

ASSISTANT SUPERINTENDENT OF HEALTH VISITORS:

Miss L. Tristram, S.R.N., S.C.M., H.V.

JOINT SUPERVISORS OF MIDWIFERY AND HOME NURSING:

Miss I. Prosser, S.R.N., S.C.M., H.V. (as from 1-7-60).

Miss E. Jeffries, S.R.N., S.C.M. (Commenced 12-9-60).

Mrs. C. P. Bantom, S.R.N., S.C.M. (Commenced 1-7-60).

SUPERVISOR OF HOME HELPS:

Mrs. M. V. Hughes.

MORAL WELFARE OFFICER:

Miss G. A. Knight, S.R.N., S.C.M.

SPEECH THERAPISTS:

Mrs. U. E. Billinghamurst, L.C.S.T., (R.M.A.).

Miss Patricia Powell, L.C.S.T., (R.M.A.).

Miss A. N. James, L.C.S.T., (R.M.A.). (Commenced 1-9-60).

Mrs. Enid Varga (nee Iles), L.C.S.T. (R.M.A.). (Resigned 30-4-60).

ORTHOPTISTS:

Miss J. M. Burston, D.B.O.

Miss Margaret Ericson, D.B.O. (Part-time, on Regional Hospital Board Staff).

TEACHER OF THE DEAF:

Miss Audrey Guy.

MENTAL HEALTH WORKERS:

Mr. E. T. Pritchard.

Mr. Brynley Price.

LADY HEALTH VISITORS :

Bowen, A. M.
 Camm, B. M. (nee
 Heneberry). (Com-
 menced 25-7-60).
 Camm, E. M.
 Cooper, M. S.
 Davies, E. M.
 Delahaye, M.
 Dredge, M. W.
 Edwards, E. M.
 Edwards, M.
 Elias, M.
 Fraser, E.
 Giles, M. R.
 Gilford, M.
 Golding, G. I.
 Harvey, B.
 Heath, S. E. M.
 (Commenced
 1-2-60).

Hockaday, S.
 Holland J.
 Hopkins, F.
 Jackson, J. P.
 James, E. N.
 Jones, A.
 Jones, E.
 Jones, I.
 Jones, B.
 Jones, M. J.
 Jukes, M. S.
 Kavanagh, P. G.
 Lewis, M.
 Lewis, R.
 Meyrick, J.
 Morgan, C.
 Morgan, G. J.
 Pulsford, M.
 Reade, K.
 Rogers, G. M.

Rowlands, L. M.
 Simms, C. D.
 Smith, H. M.
 Sparkes, E. S.
 Stevens, S. L.
 Stinchcombe, N. G.
 Walters, M.
 Walters, W. I.
 Watson, M.
 (Resigned 5-3-60).
 Wibberley, N. E.
 Wilcox, D. G.
 Williams, F.
 Williams, N.
 Wixey, N. A.
 Wright, O. P.

ORTHOPAEDIC SISTER :

Miss M. M. Pugh, S.R.N., S.C.M., H.V.

REFRACTION UNIT SISTER :

Mrs. G. Sillman, S.R.N.

AUDIOLOGY UNIT SISTER :

Mrs. B. Pearce, S.R.N.

ORAL HYGIENIST :

Mrs. P. Schofield.

DENTAL ATTENDANTS :

Mrs. Carol Huggett,
 S.R.N.
 Miss Betty Wynn.

Mrs. Olwen P. Brodie
 Mrs. O. Church.
 Mrs. R. Fiveash.

Mrs. S. M. Morgan.
 Miss C. F. Bufton.
 Mrs. M. Evans.

DOMICILIARY PHYSIOTHERAPISTS :

Mr. E. Stratford-Leach, C.S.P.
 Mr. R. J. Holley.

CHILD PSYCHOTHERAPIST :

Miss M. H. Dundas, B.A. (Hon.) Psych., Dip. I.C.P.

SOCIAL WORKER (Child Guidance) :

Miss S. Readman.

PERIPATETIC OCCUPATIONAL THERAPIST :

Miss Linda Bissett.

MATERNITY AND CHILD WELFARE.

Work of the Health Visitors.

During the year 1960, two additional Health Visitors were appointed to the Staff. The Superintendent Health Visitor had the assistance of an Assistant Superintendent Health Visitor, but part of her duties included Health Education.

Examination of the figures given in the statistical section at the end of this Report will show that the total number of visits to homes made by Health Visitors during the year was very considerably increased over the previous year, and this appears to be reflected in the larger number of attendances at the Infant Welfare and Ante-Natal Clinics.

In the field of Maternal and Child Welfare, responsibility for Health Education in Monmouthshire falls upon the County Council. Work of this kind is continually increasing, and is carried out almost entirely by the Health Visitor. These duties are supplementary to her routine duties, the latter embracing a wide sphere of activities. Whilst her ordinary work is mainly concerned with Maternity and Child Welfare, thus involving clinic work and home visits, the Health Visitor is the officer called upon to supply all kinds of information concerning families living in her area, to carry out the field work for special surveys, such as the Scheme for detection of deafness in young children, to supply details of social history required by consultants in cases of asthma, etc., and to exercise supervision of certain cases of epilepsy. Special work has recently involved a Survey, carried out at the request of the Ministry of Health, to obtain details of Vitamin D intake among certain children. Then there is supervision of certain handicapped children, referred by consultants, and such extraneous duties as escorting handicapped pupils to and from special residential schools. In this latter case, I should mention that many of these escort duties are also undertaken by members of the British Red Cross Society, and I am grateful to them for their kindness. Some of these journeys entail two days away from home. Visits to the homes of the elderly after their discharge from hospital are also carried out, not forgetting selective visits to problem families and to tuberculous homes.

The Health Visitor in this County also acts as School Nurse, which entails visits to schools, "follow-up" visits to homes and attendance at School Clinics.

At evening and other clinics held for poliomyelitis vaccination, Health Visitors attended as Clinic Sisters.

It will be seen that as the services provided by the Health Committee are increased, the scope of the Health Visitor becomes ever wider.

During the Summer of 1960, three Health Visitors attended a two-week Refresher Course, organised by the Public Health Officers' Association, at Oxford, and one attended a two-week Course, arranged by the Central Council of Health Education, at Bangor.

ANTE-NATAL CLINICS.

In the County of Monmouth there were 29 Ante-Natal Clinics in operation at the end of 1960, and a total of 146 half-day sessions per month were held. These were all staffed by Medical Officers of the Council's Staff together with Health Visitors. The local County Midwives were encouraged to attend in order to see cases in which they were interested. In the main the Clinics were held a whole or half-day weekly, but in certain cases they were fortnightly.

The comprehensive facilities mentioned in previous Reports are still available at the Ante-Natal Clinics and during the year there was a noticeable increase in the number of new cases attending and also in the total number of attendances.

MATERNITY AND CHILD WELFARE CLINICS.

49 Infant Welfare Clinics, with a total of 306 half-day sessions per month, were functioning at the end of the year. These Clinics are available for the care of children from the time the midwife concludes her attention until the time of entry to school. Mothers are advised upon the upbringing of the infant and supervision is exercised by a Medical Officer and Health Visitor to ensure that normal health and growth are being maintained. The regular medical examinations are invaluable as a means of detecting illness or disability in the earliest stage, making it possible for treatment to be commenced with a minimum of delay. Treatment of defects is most likely to be effective when detected early in their development.

Prophylactic measures such as vaccination against smallpox and poliomyelitis and immunisation against diphtheria and whooping cough were undertaken at the Clinics.

Facilities were available to mothers attending the clinic for the purchase of proprietary infant foods at a little over cost price, the amount paid by mothers in 1960 being £23,514. Welfare Foods were on sale at 43 of the Infant Welfare Clinics and at 38 other centres such as shops, private houses, W.V.S. Centres, etc., where the distribution was carried out by voluntary workers.

A Mobile Clinic catered in a similar way for rural areas in which mothers found it difficult to attend fixed Clinics.

During 1960 the total number of attendances by children at the Infant Welfare Clinics showed a considerable increase over 1959.

Post-Natal Clinic.

Throughout 1960 a weekly Post-Natal Clinic was held at the Stanley Road Clinic, Newport, Dr. Nora Keevil attending as Consultant Medical Officer.

Mothers who had not undergone a medical examination, either by the family doctor or in hospital following a recent confinement, were encouraged to attend an Ante-natal Clinic, at which facilities were available for post-natal examination or Dr. Keevil's Clinic. Cases in need of a consultant examination following examination at an Ante-Natal Clinic were referred to Dr. Keevil, who also saw all cases of sterility.

Birth Control Clinics.

These Clinics continued at the same five centres in the County and the demand for appointments for treatment on medical, and not social grounds kept up. Specially trained Medical Officers of the Department were in charge, assisted by Health Visitors.

Family Planning Clinics.

The County Council has agreed to the use of clinic premises at Newport and Chepstow by the Family Planning Association for weekly sessions. The Council does not accept any responsibility for these clinics other than allowing the use of the rooms.

Patients are treated on social grounds.

At Stanley Road, Newport, sessions were held on Thursdays, afternoons and evenings alternately, and at Chepstow on Monday evenings.

INFANT PROTECTION.

The responsibility for the welfare of children who have been deprived of parental care and attention rests with the Children's Department, which was set up by the County Council under the provision of the Children's Act, 1948. The County Medical Officer of Health, however, acts as Medical Adviser to the Children's Committee and undertakes the management of medical matters relating thereto.

CHILDREN'S HOMES.

These are administered by the Children's Department, and day-to-day medical treatment is provided by general medical practitioners by arrangement with the Children's Committee. Over-all medical supervision, however,

rests with the County Medical Officer, and regular quarterly medical inspections of the children are carried out by Medical Officers of the Health Department.

CARE OF UNMARRIED MOTHERS.

During 1960 six unmarried expectant mothers were admitted to The Salvation Army Hostel at "Northlands," Cardiff, and one to Dunmore House, Devon. Financial responsibility for maintenance was accepted by the County Council, but the women were expected to contribute the amount of National Health Insurance benefit to which they were entitled.

The Health Department's Social Worker continued her work for the welfare of unmarried mothers, but this only accounted for part of her time, other duties also being allotted to her.

REPORT OF THE PRINCIPAL DENTAL OFFICER ON DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS, AND CHILDREN UNDER FIVE YEARS OF AGE.

During the year under review, the constitution of the Dental Staff remained as for 1959, namely one Principal Dental Officer, with six full-time Dental Officers and one part-time. One Oral Hygienist was also employed.

As mentioned in previous Reports, it was not possible to perform routine dental inspections of Maternity and Child Welfare patients, owing to the limited dental staff and the amount of school dental work falling upon it.

However, comprehensive treatment was available in well-situated Clinics with up-to-date equipment. Last year, reference was made to the provision of High-Speed Turbine Dental Drills in Clinics and early in 1960 six of these machines were obtained. One was installed at each of the Clinics at Aber-tillery, Blackwood, Newbridge, Pontypool and Newport, whilst a portable instrument was used at Tredegar, Chepstow and Risca.

So far, none of the steps taken to encourage recruitment of dentists, to our Dental Services has been successful, but efforts are still being made.

HEALTH CENTRES AND CLINICS.

There was no change to report in the operation of the Council's Health Centres at Tredegar, Rhymney, Ebbw Vale and Blaenavon.

After extensive alterations and renovation, the Clinic at "The Grove," Tredegar, was re-opened on 4th July, 1960. The new arrangements allowed for the function of numerous Clinics at the premises and these included Infant

Welfare, Ante-Natal, Child Guidance, Psychotherapy, Speech Therapy, Orthopaedic, Audiology, Ear, Nose and Throat, Refraction, Orthoptic, Teacher of the Deaf and Backward Babies Clinics.

A new Infant Welfare Clinic was opened on 9th May, 1960, at the Manor House, Penllwyn, Pontllanfraith.

SPECIALIST CONSULTANT SERVICES.

On page one of this report will be found a list of names of Medical and Surgical Consultants whose services were available to the County Council at Clinics, etc. With the exception of the Consultant Orthopaedic Clinic, which was held in various parts of the County and the Tredegar Child Guidance Clinic, all the sessions were held at the Central Clinic at Stanley Road, Newport. Appointments for other specialist examinations were made, with the approval of the general practitioners concerned, at Out-patient Departments at the major hospitals in the area.

HOME NURSING SERVICE.

The total number of visits to patients by Home Nurses during 1960 was 309,391, as compared with 316,798 for the previous year.

LIAISON ARRANGEMENTS.

The Home Nursing Service provides at the request of general medical practitioners, any home nursing facilities required to help prevent admission to hospital and is also available to assist in nursing patients capable of early discharge. Where patients are in need of nursing appliances to facilitate nursing at home, the equipment is loaned by the Council's Medical Equipment Service. Children are included in these services and where requested by hospitals, health visitors also visit homes to ensure their fitness to receive discharged patients.

THE NIGHT-ATTENDANT SERVICE.

The number of applications for provision of a Night Attendant was the same as for 1959, but there was a slight increase in the number actually provided.

GERIATRIC SERVICE.

During the year 1960 the Geriatric Service dealt with many problems arising amongst elderly patients in the County.

One hundred and twenty-seven patients had been referred by their General Practitioners or hospital Consultants for domiciliary physiotherapy and another 57 were seen at the request of Dr. Salkeld of Mount Pleasant Hos-

pital, Chepstow. The noticeable thing about the latter group of patients was that the only way to deal with the majority of them was by admitting them as soon as it could be arranged to hospital.

The number of patients seen by the Domiciliary Physiotherapist was less than in 1959 and as in previous years the largest single group of patients were those suffering from cerebro-vascular accidents. From the statistical table it will be seen that patients suffering from Rheumatoid Arthritis form the second largest group for whom physiotherapy was prescribed. At the end of the year almost one-third of the total number of cases, made up of patients falling into these two groups, were still receiving treatment.

Generally speaking, after the investigation of any case, help is often required from some other section of the Health Department, Welfare Department or from voluntary organisations. It has often been found necessary to arrange for Home Help, Medical Comforts, District Nurses, or Home Visiting, in order that the patient's life may be made more comfortable.

THE HOME HELP SERVICE.

The Home Help Service continued to expand in services rendered and in cost.

The care of the aged and the chronic sick continued to be the main concern of the Home Help Service. Apart from the actual domestic work undertaken for this type of case, the care and companionship of regular visits from the Home Help did much to brighten the long lonely hours for many old folk, and enabled them to remain in the security of their own homes, when they could no longer care for themselves unaided.

PROBLEM FAMILIES.

Problem Families were still dealt with by the Co-ordinating Committees.

Family Helps, who are Home Helps specially chosen for qualities of human understanding, adaptability, and ability to guide and teach, again contributed substantially towards the solution of this difficult problem. These constitute an important part of the teams dealing with problem families.

THE MEDICAL COMFORTS AND APPLIANCES SCHEME.

The Scheme continued to increase in service, with expanding demand for the more expensive articles. Night Commodes and invalid wheel chairs were in constantly expanding request, and the work of delivery and collection was increased. Owing to the nature of the illnesses occasioning the applications, a constant watch had to be kept for articles no longer needed by the patients, due to recovery or death.

The stock of the larger articles was kept at the Central Office in order to economise in overall stock and to expedite delivery. Smaller items were still available at numerous premises throughout the County, where voluntary staff supplied by the British Red Cross Society or St. John's Ambulance Brigade attended to issue and return, but overall supervision was operated from the Health Department by the Medical Equipment Officer.

CONVALESCENT TREATMENT.

"The Rest" Convalescent Home, Porthcawl, was again available for the reception of adult male and female patients who had suffered from a recent illness and were in need of a period of convalescence. Patients were required to submit a medical certificate stating the nature of the illness and that convalescence was necessary. All applicants were medically investigated by Area Medical Officers, and approved cases were assessed by the Council's scale as to their ability to pay towards financial maintenance. Patients were expected to be ambulant and to be able to attend to their own simple needs. They were also required to be not in need of medical attention, this being the dividing line between the Council's Scheme and that provided under the National Health Service. Normally the admission was arranged for a period of two weeks, and transport was arranged each way from and to Newport. The charges for 1960 were £6 per patient per week.

The number of applications again exceeded the number of admissions authorised by the Health Committee, but many were from patients who had been admitted since their last definite illness.

No children were admitted to Convalescent Homes under the Council's arrangements during 1960.

THE DOMICILIARY MIDWIFERY SERVICE.

The Staff of whole-time County Midwives at the end of the year was 53, whereas the year previously ended with 56. There was also one less part-time Midwife and one less independent Midwife but the number of District Nurse/Midwives remained the same. 3 new County Midwives had been obtained as replacements for some of the retiring midwives.

11 County Midwives attended Refresher Courses approved by the Central Midwives Board.

There were no closures of Maternity Units during the year.

5 cases of puerperal pyrexia were notified by County Midwives and all recovered satisfactorily before the fourteenth day.

On July 1st, 1960, a change in the Rules of the Central Midwives Board reduced the lying-in period from 14 to 10 days.

Lectures were given to midwives by the medical supervisor regarding measures to be taken to avoid "cold injury" to new-born infants and steps were being taken to provide them with low-reading clinical thermometers. Wall-thermometers were also being obtained and should be available early in 1961 to encourage parents to maintain a proper degree of warmth in their rooms.

On July 1st, 1960, a change took place in the non-medical supervision of domiciliary midwives. Instead of one full-time supervisor, the County was divided between three joint Supervisors of Midwifery and Home Nursing.

Expectant mothers attending the Council's Ante-Natal Clinics are referred to their family doctors for any treatment required, including those considered to need hospital ante-natal treatment.

No definite arrangements were centrally made with regard to a night rota system of reliefs for midwives who were heavily burdened during unusually busy periods of night work. However, a very workable arrangement had been arrived at whereby the midwives were allowed to arrange amongst themselves their own temporary reliefs. There were occasions, however, when midwives telephoned the Central Office asking for a relief to be provided for a short time so that sleep could be obtained. In these instances, immediate arrangements were made to that end.

It would seem that to institute fixed rotas of special reliefs would require extra midwifery staff, and this at present is not available.

County Midwives were, of course, allowed their normal rest periods, i.e., 28 consecutive hours each week for three weeks of each month, and 72 consecutive hours in one week of each month.

CARE OF PREMATURE INFANTS.

No change in the arrangements for the care of premature infants took place during the year.

There was an increase of eleven in the number of premature live births at home and also premature stillbirths over last year.

Special cots were still available for the home nursing of premature infants.

HEALTH EDUCATION.

The function of Health Education was made the responsibility of the Assistant Superintendent of Health Visitors, and as part of her work she attended to the preparation of exhibits at the Council's Health Exhibitions which were put on at Agricultural Shows held at Chepstow and Usk. These exhibits were notable for their comprehensive nature, dealing with practically all of the Council's services. The Exhibitions were very successful in that they encouraged people to take an interest in their own well-being and showed what could be done to prevent accident or illness.

An invitation was received from the Cwmbran Urban District Council for an exhibit to be provided in connection with a Civic Week which was being organised. A stand was prepared concerning Poliomyelitis Vaccination and was shown.

Classes for expectant mothers continued at previously stated clinics and during the year further Mothercraft Classes were instituted at Newbridge, Caerwent, Usk, Monmouth, Abertillery, Caldicot, Cwmbran and Caerleon. Visual aids were used and in September an important addition was obtained in the shape of a new Sound-Film Projector Unit with a daylight screen. This opened up new fields and at once the requests for its use began to come in. Not only did the instructional film displays interest the attenders at Maternity and Child Welfare Clinics, but requests were received for illustrated lectures to be given at evening meetings of local societies. Further, it meant that at future Exhibitions the Department could organise its own film show, this previously being done by outside professional bodies.

All previously reported activities were continued, including talks on Smoking and Lung Cancer given by Health Visitors at schools and at all other classes.

In April, 1960, a lecture was arranged at the County Hall, Newport, to which Health Visitors, District Nurses and County Midwives were invited, to hear a lecture by Mrs. Micklethwait, W.V.S., on protection against effects of radio-active fall-out.

Immunisation and Vaccination was a constant topic of discussion at all Infant Welfare Clinics, and posters were attractively displayed.

On February 9th and 10th, 1960, a two-day In-Service Staff Training Course for Medical Officers, Health Visitors and Midwives, arranged by the Central Council for Health Education was held at the County Hall, Newport. The Course was held under the Chairmanship of Alderman W. H. Palmer,

Chairman of the County Health Committee and was addressed by Dr. D. J. Gordon-Smith, Deputy Medical Director of the Central Council for Health Education. Films, "The Traitor Within," and "The Fight; Science against Cancer," were shown and lectures included "Cancer Today," "Problems of Cancer Education, including Smoking and Lung Cancer," "Cancer Education for the Public and some Teaching Methods," and "Cancer Control."

A two-day Course for members of the Staff of the Health Department was arranged by the Central Council for Health Education on the subject "The Prophylaxis of Mental Illness" and was held at the County Hall, Newport, on Tuesday and Wednesday, 20th and 21st June, 1960. The Chairman was Councillor L. W. Carpenter, Chairman of the County Health Committee, and the speakers were Dr. D. J. Gordon-Smith, M.B., B.Ch., D.P.H., Deputy Medical Director and D. Lynton Porter, Education Officer, both of the Central Council. Films, "The Way to Independence," "Larry," and "Chain Reaction" were exhibited and the lectures, "Emotional Security and Parentcraft," "Starting People Talking," "Education for Mental Health" and "A Recipe for Mental Health," were followed by group work and discussions.

CHIROPODY.

The County Council during 1960 had no statutory scheme for the provision of a Chiropody Service, but made a substantial contribution to the cost of a chiropody service provided by Old Folks' Club which catered for most of the County Administrative Area.

PREVENTION OF BLINDNESS AND CARE OF BLIND PERSONS.

Facilities for the examination and, if necessary, certification of cases of suspected blindness or partial sight were provided by the County Council. Patients able to travel were seen by the Consultant Ophthalmologist to the Council at his Clinic, and for those who were unable to make the journey, domiciliary visits were made. Besides certification, the Consultant made any necessary arrangements for treatment and Hospital admissions were sought for cases in need of surgical treatment for cataract or other eye conditions.

As will be seen in later pages, the total number of persons on the County Register of the Blind showed an increase over last year, but the number of Partially Sighted persons showed a slight reduction.

Seven cases previously certified as Blind, were during the year de-certified and re-registered as Partially Sighted. One Partially Sighted case was removed from the Register as not now being Blind or Partially Sighted.

NOTIFIABLE DISEASES.

Smallpox.

There were no cases of notified Smallpox in Monmouthshire during 1960 and no cases of complications of vaccination.

Last year I commented on increased efforts to increase the number of vaccinations, and the 1960 total figure is about 12% over that for 1959, 34.2% of the children under 1 year of age were vaccinated, which compares with 35.7% for the whole of Wales, and 41.27% for England and Wales.

Scarlet Fever.

There was a decrease in the number of notifications over 1959.

Diphtheria.

For the sixth consecutive year there were no notified cases of Diphtheria in the Administrative County. Diphtheria immunisation was still available at the Council's Clinics and by General Medical Practitioners. There was a perceptible increase in the number of children immunised against Diphtheria compared with 1959, probably as a result of the intensified campaign at Clinics. The percentage of children under the age of 15 years who had been immunised rose from 43.8 in 1959 to 49.8 but this latter figure is still considered to be too low for safety against epidemic.

During the last few years, owing to the risk (even though small) of producing provocative poliomyelitis, combined prophylactics were not included in the Council's Vaccination and Immunisation Scheme. In November, 1960, however, the Monmouthshire County Council received the approval of the Welsh Board of Health for the inclusion of Tetanus immunisation in its scheme. It was decided also in the light of present knowledge to approve the use, and issue of, combined prophylactics in addition to single antigens, the latter still being available on request. All the Council's Medical Officers and Health Visitors were notified of the change, and a suggested schedule of immunisation procedures were provided as a guide. Similar notification was sent to General Practitioners who were also told that the materials were available to them. It is quite likely that general practitioners who had previously wanted to use combined prophylactics had obtained them privately, and perforce did not notify the County Authority of the number of children so immunised. This in its turn may have had an effect on the immunisation returns, producing a falsely low index.

Meningococcal Infection.

One case of this condition was notified in 1960, and resulted in death.

Acute Poliomyelitis.

No cases of paralytic poliomyelitis were notified during 1960, this following 4 in 1959, 7 in 1958, and 63 in 1957. The poliomyelitis vaccination scheme made its substantial start in 1957 and so far seems to be justified in being allotted much of the credit for the low notification rate.

The percentage of children born between 1943 and 1960 in the County who had received two injections was 75.4. The figure for the whole of Wales was 76.5 and for England and Wales 76.0.

Chicken Pox.

This disease was not compulsorily notifiable.

Measles.

There was a marked decrease in the number of measles notifications, this being only 21, with no deaths. Not since 1954 (47) had the figure been anywhere near so low.

Whooping Cough.

Here again, the number of children who received immunisation treatment against whooping cough showed increase over last year. However, the number of notifications of cases remained about the same and it is possible that the beneficial effect may be shown later.

Influenza.

This disease was not compulsorily notifiable but the number of deaths from it declined to the low figure of 13 last recorded in 1956.

Acute Pneumonia.

Notifications of this condition do not appear to bear any relation to the actual incidence of the disease, as although the number of notifications was only 45 in the County, the Registrar General returns the number of deaths from it as 114.

DEATHS FROM CANCER.

In 1960 there were 651 deaths from all forms of cancer this being 15 more than in the previous year. In the appendix will be found tables giving further details.

TUBERCULOSIS.

Last year I reported that although the notification rate of respiratory tuberculosis had continued to decline for many years past, in 1959 the fall

was arrested. In 1960, however, the downward movement in notification was resumed. Non-respiratory notifications returned to the low level last obtained in 1957.

Arrangements for the prevention and after-care of tuberculosis were continued as before, with no new departure to report.

During May, 1960, the Mass Radiography Service instituted an intensive campaign in Tredegar, Sirhowy, Rhymney and Abertysswg. At their request, the assistance of County Health Visitors was made available and they paid visits to homes and conducted 3,933 interviews with members of the public for the purpose of encouraging attendance at the Mass Radiography Unit.

In October a similar visit was made to Llandogo, where Health Visitors visited 88 homes.

B.C.G. Vaccination.

During the year B.C.G. Vaccination was continued as previously for school children aged 13 years and over. Preliminary tuberculin skin tests were carried out on 3,965 children and 3,259 yielded negative results. Of the latter cases, 3,198 were vaccinated with B.C.G. Vaccine, Post B.C.G. Vaccination skin tests were performed on 1,064 children and 986 of these gave positive results, indicating successful vaccination. 221 children were absent at the time of testing. Children whose tests gave negative results were listed for re-test, and re-vaccination if necessary.

The percentage of school children who were skin tested under this scheme and found to give positive reactions was 17.8. The figure for the whole of Wales was 17.8, and for England and Wales it was 15.6.

POLIOMYELITIS VACCINATION.

The facilities previously reported for poliomyelitis vaccination continued and evening clinics were still held in addition to day clinics. On 1st February, 1960, however, the age limit was raised to include those persons who had not already been embraced by the younger and priority groups and had not passed their 40th birthday. There was only a fair response and 5,230 persons born before 1933 and were less than 40 years of age received two injections.

Details of numbers of injections given are to be found in the statistical section at the end of this Report.

EARLY DIAGNOSIS AND TREATMENT OF DEAFNESS AMONG CHILDREN.

The Audiology Clinic continued its work throughout 1960 at the Stanley Road Clinic, Newport, and also at the Grove Clinic, Tredegar, where two sound-proofed rooms were specially equipped with the latest diagnostic equipment.

The following is an analysis of all cases of deafness seen in 1960 where there was a hearing loss of over 20 db. in one or both ears.

A. Deafness in the Recently-born.

Children born at risk in 1959 were examined, 342 in all. No cases of severe deafness were found.

B. Deafness in the Pre-School Child.

	<i>New</i>	<i>Old</i>	<i>Total</i>
Conductive Deafness	4	0	4
Nerve Deafness	0	9	9

Cases referred for Surgery for Conductive Deafness in 1960:—

Tonsils and Adenoids removed	2
Adenoids removed	1

C. Deafness in School Children.

Cases aged between 5-10 years seen in Audiology Clinics:—

	<i>New</i>	<i>Old</i>	<i>Total</i>
Conductive Deafness	68	65	133
Nerve Deafness	1	21	22

Cases aged between 5-10 years referred for Surgery for Conductive Deafness in 1960:—

	<i>New</i>	<i>Old</i>	<i>Total</i>
Tonsils and Adenoids removed	20	1	21
Tonsils and Adenoids and Proof Puncture	5	0	5
Adenoids and Proof Puncture	5	6	11
Adenoids removed	8	1	9
Politzerisation	1	0	1
Proof Puncture	1	1	2

Cases aged between 10-15 years seen in Audiology Clinic in 1960:—

	<i>New</i>	<i>Old</i>	<i>Total</i>
Conductive Deafness	30	66	96
Nerve Deafness	1	32	33

Cases aged between 10-15 years referred for Surgery for Conductive Deafness in 1960:—

	<i>New</i>	<i>Old</i>	<i>Total</i>
Tonsils and Adenoids removed ...	3	0	3
Tonsils and Adenoids and Proof Puncture	2	0	2
Adenoids and Proof Puncture ...	1	2	3
Adenoids removed ...	1	2	3
Politzersiation ...	4	3	7
Mastoidectomy ...	0	1	1

D. Prevention of Conductive Deafness.

The Otorrhoea Clinic was held weekly for the diagnosis and treatment of otitis media in order to help in the prevention of conductive deafness.

121 children were under the supervision of the clinic during 1960 and received daily treatment by their District Nurse.

E. Hearing Aids Prescribed by the Audiology Clinic in 1960.

Commercial Aids ...	13
National Health Service Medresco Aids ...	7

F. Work of the Teacher of the Deaf.

The peripatetic Teacher of the Deaf continued her invaluable work teaching the children in their homes, seeing particularly deaf children in school and assisting with diagnosis in the Audiology Clinic.

During the year 51 children were under the supervision of the Teacher of the Deaf, 25 were seen regularly—once or twice weekly, and 26 were seen periodically for supervision.

Of the total 51 children seen, 7 were seen regularly at home, 2 were seen regularly at Nursery School or at home, and 4 were seen at Occupation Centres. 9 were seen periodically at the Partially Deaf Unit, Pentwynmawr, 3 were later found not to be deaf, 2 died during 1960, 1 was transferred to Residential School. The remaining children were seen at ordinary schools or in the Audiology Clinic.

G. Partially Deaf Unit, Pentwynmawr.

The Partially Deaf Unit opened at Pentwynmawr in January, 1960. Mr. Glyn Rees, qualified Teacher of the Deaf, was appointed as teacher. The unit consists of a sound-proofed room specially fitted with a Group Hearing Aid and a loop system, to enable the partially deaf children to have special in-

dividual and group training. Provision was made for a maximum of ten children and nine children attended the Class in 1960. The children of the Class mixed with the hearing children of the School for some lessons and also for games, physical education, music and other activities.

The special training of the Unit, combined with mixing with hearing children has been of great benefit to the children. All the children attending the Unit made good progress in 1960.

H. Mobile Clinic.

The special Mobile Clinic for use in the early detection and treatment of young children was not ready for use in 1960, but it was expected to be delivered early in 1961.

REPORT OF THE AMBULANCE SERVICE FOR 1960.

National Health Service Act, 1946, Section 27.

“It shall be the duty of every Local Health Authority to make provision for seeing that ambulances and other means of transport are available, where necessary, for the conveyance of persons suffering from illness *or* mental defectiveness or expectant or nursing mothers, from places in their area to places in or outside their area.”

In discharge of their obligation under this section of the Act, the County Council had proceeded to develop their Ambulance Service in accordance with the Amended Ambulance Scheme which had received the approval of the Minister of Health in 1950. The requirements of the Service were constantly under review and all necessary measures taken to meet new and increasing demands for transportation under the National Health Service. It had been anticipated that, as the various health services became mobilised, and the public educated in the uses of the free health facilities available, additional problems of transportation would arise and it was evidence of the soundness of the County Health Committee's advance planning that this loading had been met by developing the Ambulance Service within the scope of the scheme, and up to the present, no major amendment had been necessary.

During 1959, however, the total cases removed by County ambulances reached 110,372, a new high level, and it became clear that any further increases could be met only by some extension of the ambulance facilities. It had been observed that pressure on the ambulances was heaviest in the Aberbeeg, Chepstow and Pontypool areas and early in 1960 the Health Committee considered a report on the situation. It was also brought to the attention of the Health Committee that notification had been received of certain amendments of the National Conditions for Ambulance Staffs which were likely to

affect the manpower position. Driver/attendants with 10 years service were to receive 3 days extension of holidays, and, commencing on 1st January, 1961, the hours of work were to be reduced from 44 to 42 per week.

It was, therefore, decided that the Council should seek the approval of the Welsh Board of Health, to amend their Ambulance Scheme by increasing both the total vehicles in the ambulance fleet and the number of driver/attendants then specified. The desired approval was received as follows:—

APPENDIX F.

National Health Service Act, Section 27.—Ambulance Service— Modified Proposals.

3. *Ambulance Fleet.*

The ambulance fleet will comprise 50 Ambulances and dual purpose vehicles and one sitting case car.

4. *Staff.*

The staff required to provide an efficient organisation will not exceed 100 whole-time driver/attendants. This establishment will provide for the development of the service and the reduction of the working week from 44 to 42 hours.

Review of the year's working.

The following operational statistics may convey some impression of the magnitude of the task now being undertaken by the Council's Ambulance Service.

During the twelve months ended 31st December, 1960, a total of 110,318 patients were conveyed. This figure includes 10,751 accidents and emergencies and 99,567 non-emergencies. During the same period the ambulances made 29,993 journeys on which a total of 835,319 miles were covered. The cases conveyed in 1960 were less than those conveyed in 1959 by the small margin of 54.

It should not be deduced from this pause in the trend of increase that peak demand has yet been reached; there is, in fact, every reason to anticipate that the Ambulance Service will be required to accept further burdens, when new developments of the hospital services, including provision of day hospitals, are put into operation.

Ambulance Service for the National Coal Board.

Under the Council's contract with the National Coal Board, the Ambulance Service dealt with 1,853 cases of accident or illness occurring

at the Board's undertakings during the year. This involved 29,438 miles which are chargeable to the Board.

Conveyance of Patients by Rail.

Where patients are to travel long distances, it is now recognised that such a journey can usually be accomplished by ambulance/rail/ambulance with less strain upon the patient than when the whole journey is by ambulance. The journey is planned throughout by the Ambulance Service responsible for the provision of transport and the necessary reservations made with British Railways for either seats, or a compartment in the case of a stretcher patient. Ambulance conveyance is provided to the entraining station and, on completion of the rail journey, ambulance transport is made available from the detraining station to the final destination by the Ambulance Service of the Local Health Authority in whose area the station is situated.

The excellent facilities provided by British Railways for this phase of patient transport, were used to full advantage by the Council's Ambulance Service during the year; the arrangements being highly satisfactory in all the many cases so conveyed. We are indebted to British Railways for this splendid service.

Though abuse of the Ambulance Service is less apparent than hitherto, reports are still being received of patients using the ambulances when they could reasonably be expected to travel by other means. There is also some wastage of ambulance service, when patients in a locality are obtaining similar treatment from widely separated hospitals, and frequently two or three ambulances are involved, where, with more careful direction of patients, one vehicle would suffice.

MENTAL HEALTH SERVICE.

General.

During 1960, the remaining sections of the Mental Health Act, 1959, became law, whereby all former Lunacy and Mental Treatment Acts, 1890-1930 and the Mental Deficiency Acts, 1913-1938 have been repealed.

The New Act lays great emphasis on community care of the mentally sick and mentally sub-normal and we can anticipate considerable expansion of the work required from this Department. Anticipating the changing circumstances much re-organisation has been carried out and we now have a skeleton Staff upon which we shall build as the pressure for the services of the department increasingly demands, and an early increase in the number of mental welfare officers can be expected.

The new Act requires the Local Authority to provide hostels for the convalescent mentally sick and to organise rehabilitation training centres to re-equip them to resume normal employment. The Authority is also required to provide hostels for the permanent care of mentally sub-normal children and adults and also to provide training facilities for them in specially equipped Centres and workshops.

Up to date no increase has been made in the Authority's establishment and change has only been made with regard to mental welfare officers, two full-time and nine part-time Officers having been replaced by four full-time Officers.

Routine affairs are considered once a month by the No. 2 Sub-Committee of the Health Committee and matters of policy are dealt with by the Full Health Committee. The County Medical Officer is responsible to the Health Committee for implementation of policy which is carried out by the Mental Health Unit of the County's Health Service, whose headquarters is at Cambria House, Caerleon.

Organisation and Staff.

1. Administration ... Senior Medical Officer.
Administration Officer—Grade A.P.T.I.
2 clerical assistants.
2. Field Services ... for the community care of mentally disordered persons in their own homes.
4 Mental Welfare Officers—S.R.N., R.M.N.
R.M.P.A.
1 Psychiatric Social Worker—Dip.Soc.Sc.—seconded to Child Guidance Service.
3. Home Teaching ... 1 Occupational Therapist—City and Guilds Certificate.
4. Child Guidance Service ... A joint service, administered by this department in conjunction with the School Psychological Service and Regional Hospital Board.
5. Training and Occupation Centres four in number.
1 Centre Organiser and Senior Supervisor—unqualified.
2 Supervisors—unqualified.
2 Acting Supervisors—unqualified.
39 Assistant Supervisors—unqualified.
3 Instructors—unqualified.
6. Developmental Diagnostic Clinic organised and administered by the senior medical officer assisted by the occupational therapist.

Number of Mentally Disordered persons under Local Health Authority's Care at 31-12-60.

	SUBNORMAL				SEVERELY SUBNORMAL				TOTAL			
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A. Receiving Training or Occupation in Day Centre ...	55	43	34	49	21	20	3	10	76	63	37	50
B. Awaiting Training or Occupation in Day Centre ...	8	1	21	12	3	1	—	—	11	2	21	12
C. Receiving Home Training ...	—	—	1	5	1	—	—	3	1	—	1	8
D. Awaiting Home Training ...	—	—	1	2	—	—	—	—	—	—	1	2
E. Receiving Home Visits from Mental Welfare Officers:												
(a) Patients under Supervision ...	74	55	275	249	33	32	54	49	107	87	441	382
(b) Patients under Guardianship ...	—	—	—	—	—	—	2	—	—	—	2	—
F. Number of Patients awaiting urgent admission to Psychiatric Hospitals for the Sub-Normal ...	1	2	7	3	9	4	2	1	10	6	9	4
G. Number of Patients admitted temporarily for Short-Term Care:												
(i) Mrs. Roberts, The Old Rectory, Porthkerry	4	2	—	—	10	6	—	—	14	8	—	—
(ii) National Health Service Hospitals ...	1	—	3	—	—	1	1	1	1	1	4	1

Mentally ill.

	Over the Age of 16.		
	M.	F.	T.
Visits paid by Mental Welfare Officers ...	112	84	196

(as and from 1-11-60).

Admissions to Psychiatric Hospitals.

	Under 16.			Over 16.		
	M.	F.	T.	M.	F.	T.
A. Subnormal and Severely Subnormal ...	2	4	6	12	16	28
B. Mentally Ill ...	1	0	1	81	81	162

Field Services and Home Visiting.

During the year changes were made in the Home Visiting staff whereby two full-time and nine part-time mental health officers were replaced by four full-time mental welfare officers. The County is now divided into four areas each served by a mental welfare officer who is mobile and telephones have been installed in their homes so that they are easily accessible to the general practitioners in their areas. The coming into force of the Mental Health Act, 1959, with entirely new methods of hospital admission, etc., has meant an increasing burden for these officers, but transition has been smoothly effected. An increasing use has been made of the services of the mental welfare officers by the psychiatric hospitals in the resettlement in their homes of mentally sick patients and arrangements have been made for the attendance of welfare officers at the hospitals so that joint consultation takes place with regard to patients before discharge from hospital, personal contact which is very beneficial to the patients and a contribution towards integration of hospital and local authority services. Opportunity has been taken to send mental welfare officers on short courses arranged by the National Association for Mental Health and this procedure will be continued.

Close co-operation exists between the Health Visiting Services of the Authority and the Mental Health Services, particularly with regard to mothers and young children—see report on Developmental Diagnostic Clinic and Child Guidance.

With regard to geriatric cases, joint consultations have been held with the mental and geriatric hospital staffs, also the Mental Health and Welfare Officers of the Local Authority and good liaison established whereby adequate arrangements are made for patients in the older age groups; no difficulties have arisen which could not be solved by the provision of more hospital beds for the chronic sick in the northern part of the County.

Child Guidance Service.

This is an essential part of any preventive mental health service and aims to diagnose and treat all forms of maladjustment in children which are usually present in one of three main categories:—

1. *Emotional*—characterised by behaviour problems—e.g., temper tantrums, personality change, uneven school performance and school phobia.
2. *Psychosomatic*—when the child complains of physical ailments for which no physical basis can be found.
3. *Delinquent*—which may lead to appearance in Children's Courts.

If these disabilities can be diagnosed and treated in childhood there is promise of mental stability in later life. It is now recognised that symptoms of maladjustment may appear even in infancy and if recognised and dealt with at this very early age re-adjustment and stability can be achieved in a very short time whereas if left untreated until school age and/or adolescence treatment will take a much longer time. Too often maladjustment in the very early years becomes submerged only to be triggered off by emotional upsets later on. It is our objective therefore, to encourage in our Medical and Nursing Staff awareness of the significance of early symptoms of maladjustment. During the year arrangements were made for all the County Area and Assistant Medical Officers to attend sessions of the Child Guidance Clinic and they are encouraged to attend case conferences when children personally known to them are under consideration. Copies of all case conference reports are sent to school medical officers and family doctors. Similar training sessions will be arranged in the near future for health visitors, and an intensive course on "Problems of Toddler Behaviour" organised by the Council of Health Education, has been arranged. The Senior Medical officer, Mental Health, is available at all times for consultation and advice and health visitors are encouraged to refer problems and to attend case conferences at the clinic.

Two full Clinic teams of Psychiatrist, psychologist, and psychiatric social worker as recommended in Circular 3/59 have operated throughout the year, administered by the Senior Medical Officer Mental Health. The opening of The Grove, Tredegar, after structural alterations has helped materially in bringing full clinic facilities nearer the homes of families in the northern half of the County.

The work of the Service continues to be much hampered by the meagre amount of psychiatric time allowed by the Regional Hospital Board and the services of a full-time child psychiatrist is needed if the quality and quantity of this work which the County needs, is to be adequately performed. To help overcome this difficulty the child psychotherapist employed by the County has worked very hard indeed and a report on her work at the Newport Clinic is appended. The following is a report upon the work of the Child Psychotherapist at the Newport Clinic. The pattern of the work is similar to that carried out at the School Clinic, The Grove, Tredegar.

It was again a very successful year with regard to the Child Psychotherapy. Patients were seen on two and a half days a week by the Psychotherapist.

The number of attendances was 523. This is thirty-seven more than last year. This increase may be accounted for by the younger age at which children were referred for treatment, so that they were brought regularly by their parents. In 1959, the average age of new patients was eight years ten months; in 1960 it was just under eight years. This trend is welcome, as the length of treatment tends to be shorter for younger children.

The Psychiatric Social Worker was free to give more time to interviews with the children's parents, which have been very helpful in supplementing the children's treatment.

Thirty-three children were given regular psychotherapeutic treatment during the year. The majority attended once a week for one hour. Eight children were given supportive therapy once a fortnight; this included four boys from The Mount Special School, Chepstow. In 1961, more of these boys can be treated as there is now a room available at The Mount for psychotherapy.

The periods for which patients were required to attend, varied from four weeks to ten months; twenty-one patients were discharged; two were passed on to the Psychiatrist at St. Cadoc's; one to Church Village Child Guidance Clinic; one to Mounton House and one to The Mount.

Among the successful cases was that of a boy aged five, supposed at the time of referral to be suffering from severe mental deficiency, who was discharged as normal and is now making satisfactory progress in school; a boy aged thirteen was able, with the helpful co-operation of the Education Department and his Head Master, to return to school after over two years absence due to a phobia, and to fit in with his own age group; a girl school-leaver, potentially unemployable because of timidity and related symptoms, has started work and is leading a normal social life.

It is hoped that a Therapeutic Group may be organised, and the Psychiatric Social Worker would be willing to organise a Parents' Discussion Group.

The Child Guidance Team met on alternate Tuesdays and Clinic sessions were held at the School Clinic, Stanley Road, Newport, the Mental Health Department providing clerical assistance. As was anticipated the appointment of the lay psychotherapist has meant that much remedial work has been undertaken at the Clinic and Dr. Johnston has continued to treat a number of cases at St. Cadoc's Hospital. Dr. John-

ston has continued to visit The Mount School for Maladjusted Boys at Chepstow once a month, where his specialised advice has been much appreciated by the Headmaster. His advice is also available at all times to the Headmaster, Crick Remand Home.

Attention must be drawn however to the lack in Wales of beds for child and adolescent mentally sick patients and to the quite inadequate provision for these cases in England, so serious is this shortage that it has been found impossible to obtain the proper hospital treatment anywhere for the mentally sick adolescent.

Home Teaching.

With the expansion of the Occupation and Training Centre provision the occupational therapist has been able to devote an increasing amount of time to the patients referred to the Developmental Diagnostic Clinic, an ever increasing number.

As in former years the occupational therapist has continued to visit the homes of mentally sub-normal patients unable or unsuitable to attend occupation and training centres, encouraging and instructing them in the performance of a variety of crafts. The work performed is of such a high standard as to be readily marketable and includes needlework, plain and fancy, basket-work, and rug making and lampshades, glass and china painting. During this year the occupational therapist has extended her activities into the homes of patients discharged from mental hospitals.

Training and Occupation Centres.

This year has proved to be a year of continuing advance in the provisions of Centre facilities and a further centre for boys, girls and adults has been opened at Glengariff, Griffithstown. This new centre is complementary to our original Centre, Neville House, Garndiffaith and indicates an important advance in forward thinking. Neville House is now used for nursery and young children and for the severely mentally sub-normal patients who are unlikely to benefit from the graduated training schemes which are a feature of our system. The more highly skilled children and adults from Neville House and whose progress has been encouraging now attend Glengariff; and we confidently hope that in the quiet, busy atmosphere of this house some at least will eventually become self supporting either in the sheltered workshop to be built on the site or in selected employment aided by the Ministry of Labour. We confidently anticipate similar development when the new workshops now being erected at Sunninghill Centre are completed when only very young children will be accommodated in the house, the more gifted, trainable pupils already responding will attend the workshop.

The Mental Health Act, 1959, requires a Local Authority to provide Training and Occupation Centre facilities for all children deemed to be unsuitable for education in the schools and this Authority is to be congratulated on its forward looking policy whereby places are now available for all children who need this service.

The New Act also requires the Authority to make available to children attending Centres, all the benefits of the School Health Service. This has already been done and provision has been made for routine medical inspections and where necessary consultations and treatment by specialists in the Visual, Audiology, Spastic, Paediatric and Dental Units, together with provision of meals and milk.

So successful was the in-service training scheme organised jointly with our neighbours in Cardiff and Glamorgan that a second course began in October to which one assistant supervisor from each Centre was seconded. Moreover two members of the Occupation Centre Staff were accepted for the full Training Course organised by the National Association for Mental Health, the only recognised training scheme in the country.

The Health Committee has accepted in principle the provision of hostel accommodation for young and adolescent mentally sub-normal patients and provision has been made for this in current estimates.

Developmental Diagnostic Clinic (for Backward Babies).

The work of this clinic which was very fully described in the Annual Report for 1959 has continued throughout the year to perform its useful function. This service was begun primarily with the objective of finding the handicapped child as soon as possible so that each child could be given the best treatment possible with the hope that by such means the handicap could be diminished. Whilst this objective has been achieved to a greater or lesser extent with physical disabilities such as Deafness and defective vision and certain locomotor defects such as spastic and athetoid cerebral palsy and poliomyelitis, the same degree of success has not been obtained with certain of the brain damaged and mongol children, primary amentias and those obscure and still imperfectly understood cases where backwardness is due to recessive genes and certain other congenital abnormalities. Nevertheless, this early diagnostic work which was pioneered in Monmouthshire six years ago, and is now an integral part of many other enlightened Local Authority Health Services has served to focus attention on these afflicted children and has led to an ever expanding field of research into these problems in this Country, on the Continent and in America.

Our second objective—to provide a counselling service for the parents of such children to which they could turn for advice and practical help in how to deal with the anxiety and re-adjustment in personal relationships which the birth into a home, of a severely mentally handicapped child, of necessity brings. This is much appreciated by the parents of afflicted children, and of value in preventing excessive anxiety which could well lead to mental ill-health and disruption in family relationships.

The children and their families who come to this clinic are mainly referred by the health visitors who discover them during home visits and is another example of successful integration in a Local Authority Health Service.

CEREBRAL PALSY—"SPASTICS".

The Cerebral-Palsy Scheme continued to operate during 1960 under the direction of Mr. D. N. Rocyn Jones, F.R.C.S., whose services were made available by the Welsh Regional Hospital Board. At the Stanley Road School Clinic, Newport, there was a full-time Physiotherapist, also supplied by the Welsh Regional Hospital Board.

In addition to the minimal cases of cerebral palsy who are not in need of special educational facilities, there were 53 cases aged 5 to 15 years on the register of Handicapped Pupils. These children were being educated as follows:—

In Special Schools	...	...	...	...	22
In ordinary Schools, with special facilities	...	...	...	...	24
Home Tuition	...	...	...	...	7

In addition there were 15 children aged 2-5 years who had been registered as Physically Handicapped Pupils, as a result of Cerebral Palsy.

EPILEPSY.

Since 1st October, 1957, there has been in operation in this County, a Scheme for Epileptics which aimed at early diagnosis, treatment and supervision at home and in school and the keeping of a Register of all known cases in the School Health Department.

Cases of fits occurring in very young children are commonly referred to the Paediatricians by family doctors, but a number of cases are also found and referred to Clinics by members of the County's Health Visiting Staff and School Medical Officers. Paediatricians forward copies of their reports to the County Medical Officer and it is from these sources that the Register is compiled. Upon receipt of these reports the Health Visitor, for the area in which

the patient resides, is informed and it is her duty to visit the home not only to ensure that drugs are given regularly, and hospital appointments kept, but also to provide for the parents a counselling service to advise regarding home management and to relieve the anxiety which the diagnosis of Epilepsy brings to a family.

It was hoped that by these measures most children who developed Epilepsy in infancy and early childhood could be so stabilised that they would proceed to school at the age of five years as normal healthy children. We have to record, however, that of ninety confirmed cases of children with fits occurring before school age, fifty-two are still under treatment.

Encephalography.

The occurrence of fits in young children may not necessarily be due to Epilepsy, and they are a not uncommon symptom of febrile illness accompanied by high temperature. The differential diagnosis between true epilepsy and fits of febrile origin is therefore extremely important, and also very difficult and in some cases a febrile illness may trigger off incipient idiopathic epilepsy. Not all children who suffer from Epilepsy exhibit the classical physical "fit", the disease may be manifested by exacerbated temper tantrums or other physical disorders of psycho-somatic type—the so-called abdominal epilepsy—and in these cases one's first suspicion may be aroused when a positive and healthy response is gained from empirical anti-convulsant therapy. Encephalography, a tracing of brain activity in response to electrical stimulation, can be of great aid in confirming diagnosis based on clinical symptoms and in these cases of a symptomatic Epilepsy of behaviour and abdominal type. Moreover, repeated encephalograms can demonstrate the fundamental success or otherwise of drugs employed, as improving cases show a more nearly normal spike and wave in the encephalogram. It is to be regretted, therefore, that in the County the provision of these machines is quite inadequate. There are at present three machines each located at a Psychiatric Hospital—Maindiff Court Hospital, St. Cadoc's Hospital and Llanfrechfa Grange Hospital. Owing to the lack of skilled technicians it frequently happens that one or more of these machines is not available for use.

Moreover, owing to prejudice against these Hospitals, which is still prevalent amongst certain sections of the community, and also to the difficulty of access to these Hospitals, parents all too frequently fail to keep E.E.G. appointments.

Therefore whilst appreciating the value of Encephalography in confirming diagnosis and in assessing the efficacy of drug treatment, one must deplore its inaccessibility at the present time for Monmouthshire patients.

Incidence.

During the year there were 346 names on the Register of children between the age of two and fifteen and of these the diagnosis has been confirmed by E.E.G. in 177 cases. Whilst most of the fits begin in the very early years (33 confirmed cases occurred in the first year of life and 21 in the second year), Epilepsy may reveal itself at any age, and in a number of cases without any obvious precipitating cause. 44 cases were discharged during the year as "cured" having been free of fits for not less than two years.

Dual Defects.

Depending upon the frequency, duration, and site of origin in the brain of the electrical discharge which triggers off the fits the severity of the disease can be determined, and if this remains untreated permanent damage to the brain will ensue which may be revealed by symptoms of:—

- (a) Cerebral Palsy affecting the limbs.
- (b) Deafness and/or visual defect.
- (c) Mental retardation.
- (d) Personality defects.

Children showing evidence of these disorders receive specialised treatment and training through the special clinics organised and administered by the County with the advice and personal aid of Hospital Consultants. Where it is advisable the Education Committee co-operates fully in provision of special education either at home or in residential schools where this is recommended.

For children so severely afflicted as to be unsuitable for education in School, Occupation Centres provide training and a social environment and there is no upper age limit for those attending.

Children exhibiting behaviour disorders of bizarre type + with excessive temper tantrums are referred to the Child Guidance Clinic, and during the year thirty-three epileptic children attended. It is satisfactory to record that these cases, with or without physical "fits" show a gratifying response to anti-convulsant therapy, and moreover patients and their families benefit from the specialised help of the Clinic's Psychiatric Social Workers in restoring disturbed family relationships.

Incomplete Records.

There is no short cut to cure in the treatment of Epilepsy, and to achieve success treatment must be continuous, frequently over a long period of years, and even after fits have ceased. Characteristic Epilepsy is an unstable nervous mechanism, and illness of any kind, and particularly febrile illness, may be accompanied by a recurrence of fits. For this reason supervision of Epileptic

patients is extremely important and it is to be regretted that we have to record 127 cases in which our records are incomplete. This is in part due to the misguided action of some parents in ceasing to attend Clinics when they find that the fits diminish in frequency and severity. Moreover, there is an upper age limit beyond which children become ineligible to attend paediatric clinics. Thereafter their medical care devolves upon the family doctor who may or may not refer them to a consultant physician, through whom they may be referred to a Consultant Neurologist.

It will be appreciated therefore that whilst we have an organised scheme, albeit imperfect, for the supervision of young Epileptics, once children pass beyond the paediatric clinic their further treatment becomes problematical, particularly if Epilepsy alone is the clinical illness from which they suffer.

Even so the names and addresses and clinical notes of all children known or suspected to be epileptic are sent to the School Medical Officers of the areas, and it is a recognised feature of the School Health Service for handicapped children, that the School Medical Officer should pay special attention to all epileptic pupils and through consultation with Head and class teachers ensure that each child and his personal difficulties are understood and his education geared to his ability and need.

One must regret however, that the recent Mental Health Act, 1959, did away with the former Section 57(5) of the Education Act, 1944 (recommendation for care and supervision for certain children on leaving school) and did not replace this most useful section with an adequate alternative.

Even so, in this County, a conference on all handicapped school leavers is held each term by the Youth Employment Officer and a Senior Medical Officer of the Local Authority, to ensure where practicable that handicapped children will be placed in suitable employment.

Circular E.C.78/58 (Wales).

Upon receipt of this circular together with the Memorandum prepared by the Standing Medical Advisory Committee for the Minister of Health, the County Medical Officer prepared and sent to the Monmouthshire and Newport Executive Council on 16-2-59 a Memorandum on the Local Authority's provisions for Epileptics.

patients is extremely important and it is to be regretted that we have not been able to secure in this country an adequate number of trained nurses to staff the hospitals. The Ministry of Health is endeavouring to do this by the introduction of a new system of training for nurses, which is being carried out in the hospitals. It is to be hoped that this new system will result in a more efficient staff of nurses for the hospitals.

It will be appreciated therefore that while we have an organized system of medical education, the supervision of young physicians, upon whom the future of the profession depends, is still in the hands of the medical profession. It is to be hoped that the Government will take steps to improve this system.

Even so the names and addresses and clinical notes of all children known to be epileptic are kept by the School Medical Officer of the area, and it is a recognized fact that the School Medical Officer has a special interest in all epileptic pupils and through consultation with Head and class teachers ensures that each child and his personal difficulties are understood and his education carried on in the best possible manner.

One must regret however that the recent Mental Health Act, 1959, does not provide for the necessary arrangements for the care and supervision of epileptic children in boarding schools and other institutions. It is to be hoped that the Government will take steps to improve this situation.

It is to be hoped that the Government will take steps to improve the position of epileptic children in boarding schools and other institutions. It is to be hoped that the Government will take steps to improve this situation.

Order E.C. 38 (Wales)

The object of this Order is to provide for the better care and supervision of epileptic children in boarding schools and other institutions. It is to be hoped that the Government will take steps to improve this situation.

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SANITARY CIRCUMSTANCES OF THE AREA.

Water.

Adequacy.

The prolonged drought of the summer and autumn of 1959 was followed by long periods of rain during the succeeding winter and the spring of 1960. The summer was typical of normal British climate and was followed by a rainy autumn and winter. Consequently there were few complaints of shortage of water, even during the summer months of 1960. Advantage was taken of the opportunity to improve supplies where shortage had previously been experienced, particularly in the Chepstow area.

Initial work on the preparation of the Llandegveth Reservoir Scheme by Cardiff Corporation was continued.

Negotiations are still proceeding on the re-grouping of Water Undertakings in the County.

Quality.

888 samples of water were taken for bacteriological examination, and six samples were taken for Chemical examination by District Public Health Inspectors during the year. These figures are considerably smaller than those for 1959, when special care was necessary owing to the variableness of supplies under drought conditions.

Of the total samples taken, 131 were of untreated waters before going into public supply to check on the extent of treatment necessary, taken in the areas of Blaenavon, Chepstow, Ebbw Vale, Rhymney and Tredegar Urban Districts, and Chepstow and Monmouth Rural Districts, which were directly responsible for the treatment of water for public supply. Of the 633 samples of treated water taken during distribution throughout the County, 91 were unsatisfactory. The rather high proportion of unsatisfactory samples was due largely to the high number (43) found to be unsatisfactory at Blaenavon, where, for many years, special care has been found to be necessary. A few samples were unsatisfactory in the Bedwellty, Chepstow and Ebbw Vale Urban Districts. These were due to temporary local contamination, and in such cases no effort is spared in tracing and eradicating the cause. A number of failures occurred in the Abergavenny, Magor and St. Mellons and Pontypool Rural Districts, where sometimes the bacteriological condition of public treated water supplies causes some concern.

The untreated local supplies of water from wells, springs, streams and boreholes are assessed bacteriologically at a lower standard than that for public treated supplies. Nevertheless, out of 124 samples taken, 81 were con-

sidered unsatisfactory. Since the war a great deal has been accomplished under the grant schemes of the Rural Water Supplies and Sewerage Acts to extend public treated water supplies to rural localities, and the majority of these samples were taken from remote country and mountainous areas which even now cannot be served by public supplies. The number of samples of untreated water at consumption points taken for examination tends to decrease (i) due to their replacement by piped, treated supplies and (ii) because all action that can be taken in respect of such supplies known to be liable to contamination has already been taken in previous years.

The chemical composition of water supplies has been found to change but little, and once it is known for a particular supply only occasional checks are required. Accordingly the number of samples taken for chemical examination is small. Only six samples were taken during 1960

The Table in the Appendix Showing Details of Water Analyses gives more detailed information of the samples taken to safeguard the quality of the water supplied in the individual districts.

General Comments.

During the year, chlorinating apparatus was installed at Bunkers Tank at Blaenavon and No. 1 Reservoir was taken out of service. This action will considerably improve the quality of water supplied from the Council's own sources. Inadequacy during dry periods is still reported in respect of the higher levels of Caerleon and Risca. In the Chepstow Rural District, very expensive grant schemes under the Rural Water Supplies and Sewerage Acts are now being actively pursued to relieve the general water shortage in this sparsely populated area. The extension of the major Trelleck scheme to the Far Hill, Penyclawdd, Dingestow, Tregare, Penrhos, Llantilio-Crossenny and Talycoed areas of the Monmouth Rural District will considerably improve the general pattern of piped water supplies in that area, and is likely to be the last major scheme to be undertaken by the Council for the area. At Cwmbran, close scrutiny was made of untreated supplies away from the areas of main supply.

Of schemes for consideration for grant under the Rural Water Supplies and Sewerage Acts, those for Grosmont (Abergavenny Rural District), Trelleck extensions (Monmouth Rural District), Coedypaen and Gwehelog extension (Pontypool Rural District) were entirely or almost completed. Schemes for Llangattock-Lingoed (Abergavenny Rural District), Earlswood and Newchurch West, Llangwm, and Devauden, Llansoy, Wolvesnewton and the Glyn (Chepstow Rural District), and Llanhennock (Pontypool Rural District) were

actively pursued. The Devauden extension scheme is being curtailed in respect of Wolvesnewton, however, on account of the very high cost of this length of main in relation to its anticipated use. A scheme for improvement at Coedkernew (Magor and St. Mellons Rural District) is under consideration.

Flooding.

The taking of practical measures for the prevention of flooding is, in the case of most major incidents, outside the sphere of local authorities. They are, however, taking an active part in the alleviation of distress at such times. Areas of the County which are affected from time to time are at Usk, Monmouth, Crumlin and parts of the Wentloog and Caldicot Levels.

Sewerage.

The comparatively new Eastern Valley Sewer and its enlarged treatment plant at Ponthir, discharging effluent into the River Afon Ilwyd, continues to give good service. As reported in previous years, the Rhymney and Western Valleys Trunk Sewers both discharge crude sewage into the Bristol Channel, are some 50 years old and now require a great deal of maintenance, and are of doubtful adequacy.

Even with the aid of grants under the Rural Water Supplies and Sewerage Acts it would appear that sewerage schemes prepared for rural localities are proving too expensive for the Rural District Councils concerned. No scheme suggested for grants was completed during the year and progress generally in this field of work in rural areas is slow. Schemes for the following localities have been previously considered and are in various stages of preparation: Rhymney Bridge and Princetown, Langstone, Pandy, The Bryn, Brynygwenin, Grosmont, Undy, Tintern, Magor, Henllys and Castleton and Marshfield.

Housing.

The tendency of recent years for fewer new houses to be erected was somewhat reversed in 1960, due largely to an increase in the number of houses erected under private enterprise. As the number of properties preserved by standard and other improvement grants and loans was also considerably increased, one can conclude that there was a slight general improvement in the general housing pattern of the County.

The following details shows the number of new dwellings erected during several years:—

1938—Council houses erected	...	...	...	...	520
Private houses erected	...	...	...	...	429
			Total	...	949
1946—Council houses erected (Permanent)	...	...	...	...	545
Council houses erected (Pre-fab)	...	...	...	...	525
Private houses erected	...	...	...	...	26
			Total	...	1,096
1956—Council houses erected	...	...	...	...	1,521
Private houses erected	...	...	...	...	266
Cwmbran Development Corporation	...	...	...	...	578
			Total	...	2,365
1957—Council houses erected	...	...	...	...	910
Private houses erected	...	...	...	...	294
Cwmbran Development Corporation	...	...	...	...	572
			Total	...	1,776
1958—Council houses erected	...	...	...	...	663
Private houses erected	...	...	...	...	248
Cwmbran Development Corporation	...	...	...	...	747
			Total	...	1,658
1959—Council houses erected	...	...	...	...	862
Private houses erected	...	...	...	...	296
Cwmbran Development Corporation	...	...	...	...	454
			Total	...	1,612
1960—Council houses erected	...	...	...	...	807
Private houses erected	...	...	...	...	432
Cwmbran Development Corporation	...	...	...	...	457
			Total	...	1,696

The proportion of smaller dwellings erected by local authorities and Cwmbran Development Corporation is gradually increasing.

The following are numbers of houses of all types owned by local authorities in Monmouthshire at the end of each of the years 1938, 1946 and 1960:—

1938	...	...	...	...	...	6,831
1946	...	...	...	...	...	7,550
1960	...	...	...	...	...	25,156

Although the number of new dwellings erected by local authorities was lower during 1960 than 1959, their activities increased in saving sound properties by way of standard and discretionary grants and loans. The increase in the number of houses dealt with under these provisions is encouraging. It must be admitted, however, that practically every advantage taken of the provisions was by owner-occupier, and the vast mass of dwellings which are rented from

private landlords are deteriorating in repairs and falling behind in the provision of public health amenities. The number of houses passing from renting to private ownership is increasing. As it has to be acknowledged that both the standard of compulsory repair and the standard for demolition of unfit houses is still below that of nearly 25 years ago, it is apparent that at the present rate of progress unabated effort will need to be made in every aspect of this sphere of public health welfare for the next 30 or 40 years to provide fit homes for everyone to live in.

During 1960, some 335 Standard Improvement grants were sanctioned by local authorities compared with 38 for the portion of 1959 during which the provisions operated. Discretionary Improvement grants sanctioned were 408 compared with 414 during 1959. The total for the year was therefore 743 compared with 452 during 1959, involving estimated costs of £133,261 compared with £95,532 during the preceding year. Loans totalled 197 compared with 152, involving some £45,484, compared with £36,858 in 1959.

Certificates of Disrepair numbered 30 compared with 42 in 1959. Although very little advantage is taken of this procedure, the provisions have no doubt restricted rent increases in many cases of unsatisfactory housing accommodation.

Further details of the activities of individual District Councils in the erection of new dwellings and in sanctioning grants and loans during 1960 will be found in the appropriate Tables in the Appendix.

Schools.

Matters concerning sanitary accommodation and sewage disposal often still receive the least attention at schools. In many rural schools adequate facilities have not been provided. In many larger schools where public services are available the care of the facilities provided is not all that can be expected. Efforts to educate some children in the use of amenities provided do not always bring the reward they merit. The need of providing hot water (not too hot) to enable children as well as staffs to wash their hands cannot be too strongly emphasised.

Clean Air.

The Monmouthshire County Council have shown an enlightened outlook in their approach to matters of cleaner air campaigns. Although charged with no specific compulsory or optional duties under the Clean Air Act they have made full use of their powers for health education to advance well informed publicity wherever possible. The establishment of the massive Spencer Steelworks on the southern moors east of the River Usk Estuary, with consequent additional development of the Cwmbran New Town and other areas in south and

south-eastern Monmouthshire has increased an awareness of the atmospheric pollution dangers which lie ahead. The County Council has co-operated with the local authorities directly concerned in these areas in a consideration of the problems which confront them, and in particular:—

- (i) has provided facilities for the reading of smoke filter paper stains from all areas on the same County Council Reflectometer. This makes for greater uniformity of results and is also more economical, and
- (ii) has provided facilities for the speedy collation and dissemination amongst the authorities of all measurements of atmospheric pollution which became available.

These projects have served to stimulate interest amongst local authorities; the following have set up stations for measuring either grit deposits, or smoke or sulphur concentrations in the atmosphere, or are in process of having them set up and are contributing to the County pattern—Bedwas and Machen, Bedwellty, Caerleon, Chepstow, Cwmbran, Ebbw Vale, Monmouth, Risca and Tredegar Urban Districts, and Chepstow, Magor and St. Mellons and Pontypool Rural Districts. Fullest information is being gathered at Cwmbran and the Magor and St. Mellons areas in the vicinity of Spencer Works. Air Pollution measurements are also being taken at Pontypool.

As this service is extending a great deal of valuable information on the condition of the air in various parts of the County is being accumulated, and a statistical picture of atmospheric Monmouthshire is emerging. As the significance of the findings becomes apparent no doubt greater interest will be shown in the domestic issues of clean air, as well as in the industrial aspects. The encouraging signs that the dead-lock on concessionary coal is ending will have a market effect on the reception of clean air principles in a County which is predominantly coal producing. From a publicity point of view it is unfortunate that the need for improvement in domestic emanations has to be put over to the public in face of increased trade pollution due to industrial expansion. It is necessary to impress upon the public that where industrial pollution cannot be curtailed for some time to come without prejudicing the life of the industry, in order to reduce accumulated pollution as far as possible it is all the more important to eradicate domestic smoke altogether. Provisions is made for this to be done in the Clean Air Act by the optional power given to local authorities to create Smoke Control Areas and it is hoped that many Monmouthshire authorities will now be encouraged to begin to use these

powers, especially in those areas where the proportion of new post-war houses which are already fitted with suitable appliances for burning smokeless fuel, is highest.

A warning is here appropriate, however, that it would appear that in industry the first flush of enthusiasm on the introduction of the Clean Air Act is receding, and is tending to be replaced by a state of *laissez-faire*. The fuel, grates, methods of stoking, and recording and warning instruments, as well as measures for arresting grit and fumes are matters which require constant attention.

The County Council is aware of its opportunities for education and publicity in this field of work and is making use of these directly, as occasion permits, and also through the activities of the newly formed South Wales Division of the voluntary body, the National Society for Clean Air, which it is fully supporting.

Milk.

The plant at Abergavenny ceased pasteurising during the year. Application for a licence was received in respect of a small plant at Llanhennock. The pasteurising plants at Abertillery, Marshfield and Nantyglo, and the sterilising plant at Marshfield remained in operation throughout the year. Between them these plants process most of the milk consumed in the area and a considerable quantity is exported to Newport, Cardiff and Glamorgan. The County Council is the licensing authority for these plants and the responsibility for their supervision devolves upon the County Health Inspectors, who also undertake routine bacteriological sampling of milk supplies from these plants and of supplies to Schools, Hospitals, Old Folks' Homes, Children's Homes, Special Schools, etc. Samples of milk sold raw in retail are also taken for biological examination.

The whole of the County is a "specified" area and all milk sold in retail is required to be "Sterilised", "Pasteurised" or "Tuberculin Tested".

The Table in the Appendix, which is published by courtesy of Dr. R. D. Gray, M.D., D.P.H., Director of the Public Health Laboratory Service, Newport, shows the number of samples taken by the County Council and the local authorities in Monmouthshire during the years 1954-60.

The following is a summary of the origin of the 1,330 samples of milk taken by the County Health Inspectors during the year:—

For Bacteriological Examination :				
From Pasteurising Plant	...	...	...	480
From Sterilising Plant	...	...	...	43
On delivery at Schools	...	...	...	501
On delivery at Hospitals, Old Folks' Homes, Children's Homes, Special Schools, etc.	...	...	...	239
				<hr/>
				1,263
For Biological Examination	...	...	...	67
				<hr/>
				1,330

The number of samples taken during the year was rather less than during several previous years due to the necessity, at the end of the year, to afford some degree of priority to over 200 applications for licences under the Milk (Special Designation) Regulations, 1960.

The County Health Inspector is the authorised officer for securing that milk sold in retail is properly subject to the respective special designations. The following is a summary of action taken in this respect during the year :—

Complaints investigated :

(i) of falsely describing milk	...	...	...	1
(ii) of selling milk in a "specified" area with- out holding appropriate licences	.....	.....	.....	7
Licences subsequently issued	...	...	...	7

In addition, 9 licences were issued after informal consultation with a local authority.

No legal action was necessary in the case investigated for falsely describing milk, but advice was given to ensure that the provisions of the Food and Drugs Act would not be violated.

The Milk (Special Designation) Regulations, 1960, were issued during the year. From the 1st January, 1961, the County Council becomes the licensing authority for milk retailers of milk (except producer-retailers who remain under the supervision of the Ministry of Agriculture) as well as pasteurisers and sterilisers for the area for which it is a Food and Drugs Authority, and become responsible for the conditions under which milk is retailed and for its sampling. Licences will be for five-yearly periods. Samples will now require to be paid for. Modified tests have been introduced to gauge the efficiency of pasteurisation and the keeping quality of milk.

A scheme to cover the Council's responsibilities has been worked out and will be integrated into the existing duties of the County Health Inspectors. It is anticipated that control of some 250 milk retailers will be transferred from Districts Councils to the County Council. It is intended to check pasteurising and sterilising plants weekly, to sample retailers quarterly, paying special attention to supplies to schools, hospitals, old folks' homes, etc. It is anticipated that some 2,000 samples of milk annually will be required adequately to carry out the programme envisaged. A sampling officer (Student Public Health Inspector) has been appointed to assist the County Health Inspectors in this work. Details of the first year's working of the scheme will be given in the report for 1961.

Ice Cream.

Control of the manufacture and sale of Ice Cream under the three forms of pasteurisation and the form of sterilisation permitted by the Ice Cream (Heat Treatment) etc., Regulations, 1959, continues smoothly. A legal bacteriological standard would, nevertheless, be an additional asset to the local authorities carrying out these duties.

Meat.

Facilities for slaughtering animals for human food are still under review. Local authorities have now submitted to the Minister their reports as to the adequacy and standard of slaughtering facilities in their areas. Eventually Ministerial Orders will prescribe a date when all the slaughterhouses in each district will require to conform to structural regulations.

The general aim of 100% inspection of meat at the time of slaughter is still a long way from fulfilment in the case of smaller establishments. The unrestricted hours of killing, with short notice of intention to kill, and short compulsory holding time subsequent to killing prior to inspection, can render the aim impossible of achievement in areas with several slaughterhouses and a small staff of Public Health Inspectors.

A further complication in this field is the increase in the broiler house poultry industry and the need to supervise slaughtering conditions at those factories and inspect the products for signs of illness or disease.

Food Hygiene.

Although the Food Hygiene Regulations, revised during 1960, have helped a great deal in focusing attention to this subject, have improved the structural conditions under which food is handled, and ensured that certain vital foods are not left to ravages of despoilation and bacterial growth under conditions of warm temperature, the high incidence of food-borne illnesses show that

all is not well with the conditions under which food is prepared, handled, stored and sold, especially when one considers the effects of the expansion of the catering trade since the war.

The hygienic practices of all engaged in this work must be exemplary. It is not unreasonable to require that all engaged in the industry should be capable of absorbing, and should be required to attend, a suitable course of lectures or illustrated talks. It would be a good thing if such large employers of catering staffs as Local Education Authorities would give a lead by having these requirements written into the Conditions of Service of their catering employees.

Caravans.

Monmouthshire has few holiday and a number of permanent caravan sites. The conditions under which the latter are to remain in occupation are being amended.

Swimming Baths.

Supervision continues by way of chlorine content estimations on the site and the submission of check samples to the Public Health Laboratory for bacteriological examination.

Nuclear Radiation.

Knowledge is gradually increasing of the hazards involved in this new subject. Intense study on the part of all engaged in public health work is now required to cope with day-to-day problems and any emergency which might arise. The development of a chain of atomic power stations in the vicinity of Monmouthshire increases the need for vigilance.

Shops and Offices.

The long delay in effecting legislation to implement the recommendations of the Gowers Committee is causing some concern. Provision should be made immediately for extending to workers in these occupations the measure of minimum protection afforded to employees in other industries.

STATISTICAL DATA

Year	Population	Births	Deaths	Population	Births	Deaths
1949	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1950	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1951	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1952	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1953	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1954	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1955	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1956	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1957	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1958	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1959	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1960	3,117,000	232,000	117,000	3,117,000	232,000	117,000

STATISTICAL DATA.

Year	Population	Births	Deaths	Population	Births	Deaths
1949	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1950	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1951	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1952	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1953	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1954	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1955	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1956	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1957	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1958	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1959	3,117,000	232,000	117,000	3,117,000	232,000	117,000
1960	3,117,000	232,000	117,000	3,117,000	232,000	117,000

In all cases in the above table, the estimated mid-year population is shown by the first figure in each line, the population in the second figure, the number of births in the third figure, and the number of deaths in the fourth figure. The population in 1949 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1950 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1951 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1952 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1953 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1954 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1955 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1956 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1957 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1958 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1959 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000. The population in 1960 was 3,117,000, the number of births was 232,000, and the number of deaths was 117,000.

STATISTICAL DATA.

Area	...	...	...	...	339,089 acres
Population in 1949	(Mid-year)	...	...	...	318,510
Population in 1950	do.	...	...	...	319,640
Population in 1951	do.	...	...	...	317,900
Population in 1952	do.	...	...	...	318,000
Population in 1953	do.	...	...	...	318,800
Population in 1954	do.	...	...	...	320,800
Population in 1955	do.	...	...	...	321,500
Population in 1956	do.	...	...	...	323,400
Population in 1957	do.	...	...	...	325,200
Population in 1958	do.	...	...	...	327,500
Population in 1959	do.	...	...	...	329,200
Population in 1960	do.	...	...	...	331,150
Rateable Value, 1960	...	...	...	...	£3,143,090
Estimated Sum represented by a penny rate					
1960	...	...	...	...	£11,854

Vital Statistics for Monmouthshire and for England and Wales for the year 1960, compiled by the Registrar-General are as in the sub-joined table.

	Birth Rate per 1,000 of home population				Death Rate per 1,000 Home population		Deaths under one year of age per 1,000 related live births	
	Live Births	Live Births	Still Births	Still Births				
	1960	1959	1960	1959	1960	1959	1960	1959
ENGLAND & WALES	17.1	16.5	0.35	0.35	11.5	11.6	21.9	22.2
MONMOUTHSHIRE	17.29	16.85	0.48	0.54	11.58	11.75	25.49	27.23

In all cases in the above table, the estimated mid-year home populations as supplied by the Registrar-General have been used in the compilation.

Births.

During 1960 there were, according to the Registrar-General's returns, 5,727 live births in the Administrative County and 160 still-births. Further details are as follows:—

	Legitimate		Illegitimate		Totals.	Comparability Factor.
	M.	F.	M.	F.		
URBAN DISTRICTS:						
Live Births ...	2,398	2,207	82	74	4,761	1.01
Still Births ...	66	61	4	3	134	
RURAL DISTRICTS:						
Live Births ...	503	440	8	15	966	0.99
Still Births ...	14	12	—	—	26	
Totals ...	2,981	2,720	94	92	5,887	—

The number of registered live births showed an increase of 181 compared with the year 1959, and it was 148 higher than for 1958.

The crude live birth rate per 1,000 population for the year under review and for the preceding five years is as follows, comparative figures being given for England and Wales:—

	1960	1959	1958	1957	1956	1955	1954
Monmouthshire ...	17.29	16.85	17.04	17.1	16.8	15.3	16.3
England & Wales ...	17.1	16.5	16.4	16.1	15.6	15.0	15.2

The number of live births in the County during 1960, 5,727, gave a rate of 17.29 per 1,000 population. As the comparability factor is 1.00, no adjustment is necessary, and the rate compares with 17.1 for England and Wales.

The number of still-births was 160, giving a crude and adjusted rate of 0.48 per 1,000 population. This is higher than the rate for England and Wales, which for 1960 was 0.35 per 1,000 civilian population. The number of registered still-births works out at 27.2 per 1,000 live and still-births and 27.9 per 1,000 live births.

Deaths.

The total number of deaths registered in the Administrative County, as shown by the Registrar-General returns, was 3,837. How this compares with previous years is shown:—

1960	1959	1958	1957	1956	1955	1954	1953	1952	1951
3,837	3,869	3,842	3,897	3,867	3,986	3,824	3,691	3,665	4,256

The crude general death rate calculated upon the estimate of population submitted by the Registrar-General, 331,150, was 11.58 per 1,000 living. The figure was higher than for England and Wales, 11.5. After adjustment by the comparability factor of 1.16 the County figure was 13.43. The following is a comparison of the crude rate with previous years:—

1960	1959	1958	1957	1956	1955	1954	1953	1952	1951
11.58	11.75	11.73	11.98	11.96	12.4	11.9	11.6	11.5	13.4

The Infant Mortality rate per 1,000 related live births for Monmouthshire and also for England and Wales for the present and past six years are as follows:—

	1960	1959	1958	1957	1956	1955	1954
Monmouthshire ...	25.49	27.23	25.81	30.98	28.96	33.97	39.7
England & Wales ...	21.9	22.2	22.6	23.1	23.8	24.9	25.4

During 1960, 101 children died before reaching the age of 4 weeks. This represented a neo-natal mortality rate of 17.6 per 1,000 related live births. The figure for England and Wales was 15.6.

There were 87 deaths of infants under 1 week of age.

Perinatal Mortality (still-births and deaths of infants under 1 week of age) in the County for the year 1960 gave a crude rate of 42.0 per 1,000 total live and still births. The rate for England and Wales was 32.9.

Maternal Mortality.

There were no deaths registered during the year from accidents and diseases of pregnancy and parturition.

The Maternal Mortality rate for England and Wales was 0.39 per 1,000 total (live and still) births.

The County maternal mortality rates per 1,000 live and still-births for the present and previous years are shown:—

1960	...	...	...	Nil
1959	...	...	...	0.52
1958	...	...	...	6.17
1957	...	...	...	0.70
1956	...	...	...	1.07
1955	...	...	...	0.98
1954	...	...	...	1.49
1953	...	...	...	1.09
1952	...	...	...	0.71
1951	...	...	...	1.48
1950	...	...	...	1.73
1949	...	...	...	2.83
1948	...	...	...	1.92
1947	...	...	...	1.17

During the year 1960 there were 25 cases of puerperal pyrexia which were notifiable according to Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations. In 1959 there were 25 notifications, in 1958 there were 14, and in 1957, 19.

PRINCIPAL VITAL STATISTICS RELATING TO MOTHERS AND INFANTS, 1960.

Number of live births	...	...	...	...	...	5,727
Live birth-rate per 1,000 population, crude	...	...	...	...	...	17.29
Illegitimate live-births per cent. of total live births	...	...	...	...	...	3.1
Number of still-births	...	...	...	...	...	160
Still-birth rate per 1,000 live and still-births	...	...	...	...	...	27.2
Total number of live and still-births	...	...	...	...	...	5,887
Total number of infant deaths (under 1 year of age)	...	...	...	...	...	146
Infant mortality rate per 1,000 total live births	...	...	...	...	...	25.5
Mortality rate of legitimate infants per 1,000 legitimate live births	...	...	...	...	...	25.4
Mortality rate of illegitimate infants per 1,000 illegitimate live births	...	...	...	...	...	28.0
Neo-natal mortality rate per 1,000 live births (first 4 weeks)	...	...	...	...	...	17.6
Early neo-natal Mortality per 1,000 live births (under 1 week)	...	...	...	...	...	15.2
Perinatal Mortality (still-births and deaths of infants under 1 week of age) per 1,000 total live and still-births	...	...	...	...	...	42.0
Number of maternal deaths (including abortions)	...	...	...	...	...	Nil
Maternal mortality rate per 1,000 live and still-births	...	...	...	...	...	Nil
Still-birth rate per 1,000 population	...	...	...	...	...	0.48
<hr/>						
Total Death rate per 1,000 population, crude	...	...	...	...	...	11.59
Total Death rate per 1,000 population, adjusted	...	...	...	...	...	13.20
Total number of deaths	...	...	...	...	...	3,837

REGISTRAR-GENERAL'S RETURN OF BIRTHS AND INFANT DEATHS IN URBAN AND RURAL DISTRICTS IN 1960

District.	Estimated Mid-Year Home Population.	Live Births.				Still Births.				Deaths under 1 Year of Age.				Deaths under 4 Weeks of Age.				Deaths under 1 Week of Age.				Comparability Factors.						
		Legit.		Illegit.		Legit.		Illegit.		Legit.		Illegit.		Legit.		Illegit.		Legit.		Illegit.		Births.	Deaths.					
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.							
Urban.																												
Abercarn ...	18,800	167	169	3	2	4	4	1	—	5	2	—	—	4	1	—	—	4	1	—	—	0.99	1.22					
Abergavenny ...	9,080	77	60	5	9	4	—	—	1	1	2	—	—	1	2	—	—	1	1	—	—	1.00	0.98					
Abertillery ...	26,380	219	196	5	9	8	4	—	—	6	7	1	—	4	6	—	—	3	5	—	—	1.03	1.15					
Bedwas & Machen ...	9,900	92	90	3	5	—	—	—	—	4	—	—	—	2	—	—	—	1	—	—	—	0.95	1.26					
Bedwelty ...	28,150	249	232	8	10	8	10	—	—	10	8	—	—	5	5	—	—	3	5	—	—	1.01	1.35					
Blaenavon ...	9,310	58	58	1	1	—	—	—	—	3	1	—	—	2	1	—	—	2	1	—	—	1.05	1.14					
Caerleon ...	4,020	19	26	—	—	1	—	—	—	2	1	—	—	2	1	—	—	2	2	—	—	1.08	0.66					
Chepstow ...	5,980	59	60	2	1	1	—	—	—	1	2	—	—	1	2	—	—	1	2	—	—	1.00	0.60					
Cwmbran ...	21,130	240	230	2	4	8	8	—	—	6	5	—	—	6	4	—	—	5	4	—	—	0.80	1.45					
Ebbw Vale ...	28,360	231	238	16	8	8	3	2	—	7	4	2	—	5	4	1	—	4	4	1	—	—	1.05	1.23				
Monmouth ...	5,720	51	41	1	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1.01	0.87				
Mynyddislwyn ...	15,460	126	110	5	3	6	5	—	1	5	5	—	—	3	3	—	—	3	3	—	—	—	1.00	1.34				
Nantyglo & Blaina ...	10,990	106	93	5	2	3	3	—	—	2	1	—	—	—	1	—	—	—	1	—	—	—	—	1.05	1.11			
Pontypool ...	39,720	301	266	11	9	7	7	—	—	10	5	—	—	9	4	—	—	7	3	—	—	—	—	1.04	1.12			
Rhymney ...	8,800	90	72	4	3	2	2	—	—	2	1	—	—	1	1	—	—	—	—	—	—	—	—	—	1.03	1.16		
Risca ...	14,580	111	78	5	1	1	2	—	—	1	—	—	—	1	—	—	—	1	—	—	—	—	—	—	1.01	1.08		
Tredegarr ...	20,260	179	182	6	3	5	4	—	1	8	5	—	—	4	3	—	—	4	3	—	—	—	—	—	1.00	1.13		
Usk ...	1,760	23	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1.09	1.02	
Totals Urban Districts	277,790	2398	2207	82	74	66	61	4	3	73	49	3	—	50	38	1	—	41	33	1	—	1.01	1.16					
Rural.																												
Abergavenny ...	8,700	77	53	1	3	4	3	—	—	2	1	—	—	1	—	—	—	1	—	—	—	—	—	—	—	1.27	0.54	
Chepstow ...	10,890	79	91	4	5	2	1	—	—	1	5	—	—	1	2	—	—	1	2	—	—	—	—	—	—	1.02	1.09	
Magor & St Mellons ...	14,740	147	124	1	4	3	5	—	—	4	1	2	—	3	1	—	—	3	1	—	—	—	—	—	—	1.00	1.03	
Monmouth ...	5,800	35	39	—	2	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1.08	0.88
Pontypool ...	13,230	165	133	2	1	3	2	—	—	3	2	—	—	3	1	—	—	3	1	—	—	—	—	—	—	—	0.76	1.50
Total Rural Districts	58,360	503	440	8	15	14	12	—	—	10	9	2	—	8	4	—	—	8	4	—	—	0.98	0.99					
Grand Totals ...	331,150	2801	2647	90	89	80	73	4	3	83	58	5	—	58	42	1	—	49	37	1	—	1.00	1.14					

Year	Month	Day	Time	Location	Species	Count	Notes
1900	Jan	1	10:00	Forest	Red-shouldered Hawk	1	
1900	Jan	2	11:00	Forest	Red-shouldered Hawk	1	
1900	Jan	3	12:00	Forest	Red-shouldered Hawk	1	
1900	Jan	4	13:00	Forest	Red-shouldered Hawk	1	
1900	Jan	5	14:00	Forest	Red-shouldered Hawk	1	
1900	Jan	6	15:00	Forest	Red-shouldered Hawk	1	
1900	Jan	7	16:00	Forest	Red-shouldered Hawk	1	
1900	Jan	8	17:00	Forest	Red-shouldered Hawk	1	
1900	Jan	9	18:00	Forest	Red-shouldered Hawk	1	
1900	Jan	10	19:00	Forest	Red-shouldered Hawk	1	
1900	Jan	11	20:00	Forest	Red-shouldered Hawk	1	
1900	Jan	12	21:00	Forest	Red-shouldered Hawk	1	
1900	Jan	13	22:00	Forest	Red-shouldered Hawk	1	
1900	Jan	14	23:00	Forest	Red-shouldered Hawk	1	
1900	Jan	15	24:00	Forest	Red-shouldered Hawk	1	
1900	Jan	16	25:00	Forest	Red-shouldered Hawk	1	
1900	Jan	17	26:00	Forest	Red-shouldered Hawk	1	
1900	Jan	18	27:00	Forest	Red-shouldered Hawk	1	
1900	Jan	19	28:00	Forest	Red-shouldered Hawk	1	
1900	Jan	20	29:00	Forest	Red-shouldered Hawk	1	
1900	Jan	21	30:00	Forest	Red-shouldered Hawk	1	
1900	Jan	22	31:00	Forest	Red-shouldered Hawk	1	

CAUSES OF DEATH IN VARIOUS AGE GROUPS IN THE ADMINISTRATIVE COUNTY OF MONMOUTH FOR THE YEAR 1960

Age Groups	Causes of Death																																				All Causes				
	Tuberculosis, Respiratory	Tuberculosis, Other	Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm, Stomach	Malignant Neoplasm, Lung, Bronchus	Malignant Neoplasm, Breast	Malignant Neoplasm, Uterus	Other Malignant and Lymphatic Neoplasms	Leukemia, All types	Diabetes	Vascular Lesions of Nervous System	Coronary Disease, Angina	Hypertension, with Heart Disease	Other Heart Disease	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy Childbirth, Abortion	Congenital Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and Operations of War					
Urban Districts.																																									
Males	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36					
0-14	—	—	—	—	1	1	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	10	1	—	—	—	2	1	—	15	41	—	3	—	—	—	—	76		
15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	
25-44	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	
45-64	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	24	
65-74	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	15	
75+	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	24	
Total Males	21	1	3	—	1	1	—	—	4	57	107	—	—	166	5	6	173	370	40	213	69	8	50	186	50	21	6	20	32	—	23	123	28	47	16	1	—	1,836			
Females																																									
0-14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	49	
15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	
25-44	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	
45-64	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	
65-74	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	61	
75+	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	263	
Total Females	4	1	—	—	—	—	—	—	2	50	8	46	25	114	3	25	240	186	38	289	63	4	39	49	7	8	10	13	—	14	128	9	29	6	—	—	—	1,410			
Rural Districts.																																									
Males																																									
0-14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12	
15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	23	
25-44	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	29	
45-64	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	66	
65-74	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	88	
75+	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	133	
Total Males	3	—	—	—	—	—	—	—	1	5	18	—	—	23	5	3	27	73	9	47	15	1	16	20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	341	
Females																																									
0-14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	
15-24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	63	
25-44	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	53	
45-64	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	53	
65-74	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	122	
75+	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	247
Total Females	—	—	—	—	—	—	—	—	—	5	3	10	5	19	1	2	39	34	4	59	17	—	9	2	3	1	1	2	—	1	5	13	4	5	2	—	—	—	—	247	
Grand Totals	28	2	4	—	1	1	1	—	7	117	136	56	30	312	14	36	479	663	91	608	164	13	114	257	60	31	19	41	37	1	44	290	53	94	32	1	—	3,837			

0 to 4 Weeks.

District.	TUBERCULOSIS.		Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Poliomyelitis	Measles	Cancer (Malignant Disease)	Heart Disease	Influenza	Pneumonia (All Forms)	Bronchitis	Other Respiratory Diseases	Congenital Malformations	Gastritis, Enteritis and Diarrhoea	Violence	Atelectasis	Prematurity	Erythroblastosis Foetalis or Incompatibility of Parents' Blood Group	Other Causes	Total	
	Respiratory	Other																					
URBAN.																							
Abercarn ...															1					1		3	5
Abergavenny ...															1					1		1	3
Abertillery ...												2							2	3		2	9
Bedwas & Machen ...					1									1	2				1	1			2
Bedwellty ...														1					1	1			8
Blaenavon ...															1				1	1			3
Caerleon ...															1				1	1			3
Chepstow ...															3				1	1			2
Cwmbran ...										1					1				2	1			10
Ebbw Vale ...															1				1	1			11
Monmouth ...																				4			5
Mynyddislwyn ...																				1			1
Nantyglo & Blaina ...															4					1			2
Pontypool ...															1				1	8			13
Rhymney ...												1							1	1			2
Risca ...																			2	3			8
Tredegarr ...																			2	3			8
Usk ...																				1			1
Urban Totals ...						1				1		3		1	14	1		8	33	4	21	87	
RURAL.																							
Abergavenny ...																			1	1			2
Chepstow ...																			2	1			3
Magor & S. Mellons ...																			3	1			4
Monmouth ...																				1			1
Pontypool ...															1				2	2			5
Rural Totals ...															1			8	3	2	2	14	
Grand Totals ...						1				1		3		1	15	1		16	36	4	23	101	

Table compiled from M.O.H.'s Returns.

Infant Deaths under One Year of Age, 1960 (Continued).

4 Weeks to 1 Year.

District.	4 Weeks to 1 Year.														Total								
	TUBERCU- LOSIS.	Other	Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infection	Acute Polyomyelitis	Measles	Cancer (Malignant Disease)	Heart Disease	Influenza	Pneumonia (All Forms)	Bronchitis	Other Respiratory Diseases		Congenital Malformations	Gastritis, Enteritis and Diarrhoea	Violence	Atelectasis	Prematurity	Rhytroblastosis Foetalis or Incompatibility of Parents' Blood Group	Other Causes	
URBAN.																							
Abercarn ...					1							1											2
Abergavenny ...												2								1		1	5
Abertillery ...												1								1		1	2
Bedwas & Machen ...												3		1								2	8
Bedwellty ...						2																1	1
Blaenavon ...																						1	1
Caerleon ...																							
Chepstow ...																							
Cwmbran ...																				1			1
Ebbw Vale ...												1											2
Monmouth ...																							
Mynyddislwyn ...						1						1										1	3
Nantyglo & Blaina ...																						1	1
Pontypool ...																						1	2
Rhymney ...												1										1	1
Risca ...																							
Tredegar ...																						1	4
Usk ...																							
Urban Totals ...					1	3				2		10		1	1	2				3		9	92
RURAL.																							
Abergavenny ...																						2	4
Chepstow ...												3											3
Magor & S. Mellons ...												3											3
Monmouth ...																							
Pontypool ...																							
Rural Totals ...												6										2	10
Grand Totals ...					1	3			2			16		1	3	2				3		11	42

SUMMARY OF NOTIFICATIONS OF INFECTIOUS DISEASES FOR 1960

DISTRICTS	Estimated Mid-1960 Population	Scarlet Fever	Whooping Cough	Acute Poliomyelitis		Measles (excluding Rubella)	Diphtheria	Acute Pneumonia	Dysentery	Smallpox	Acute Encephalitis		Enteric or Typhoid Fever	Paratyphoid Fevers	Erysipelas	Meningococcal Infection	Food Poisoning	Puerperal Pyrexia	Ophthalmia Neonatorum	Tuberculosis		Other	
				Paralytic	Non-Paralytic						Respiratory	Meninges and CNS.											
URBAN.																							
Abercarn	18,800	6	4	...	...	1	...	...	117	...	...	...	...	...	...	...	3	...	...	11	...	1
Abergavenny	9,080	...	...	...	...	...	...	...	7	...	...	...	...	...	...	...	...	...	...	5	...	1
Aberfferry	26,330	6	24	...	...	1	...	...	6	...	...	...	...	...	...	...	...	...	...	10	...	...
Bedwas and Machen	9,900	6	10	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	4	...	1
Bedwellty	28,150	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	28	...	...
Blaenavon	9,010	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...
Caerleon	4,020	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	5	...	2	...	...
Chepstow	5,980	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cwmbran	21,130	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ebbw Vale	28,360	6	27	...	...	2	...	14	82	...	...	...	...	...	...	...	1	...	...	6	1	3
Monmouth	5,720	...	3	...	...	3	...	...	34	...	...	...	...	...	...	...	...	...	...	9	...	1
Mynyddislwyn	15,460	...	...	...	...	3	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	1
Nantyglo and Blaina	10,990	...	5	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...
Pontypool	39,720	5	11	...	...	2	...	...	10	...	...	...	...	...	...	...	...	...	...	10	1	1
Rhynney	8,800	...	8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...
Risca	14,380	4	15	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	10	...	...
Tredegar	20,260	2	...	...	...	...	...	24	6	...	...	...	...	...	...	...	...	...	...	16	...	2
Usk	1,700	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...
Totals, Urban	277,790	38	108	...	...	16	...	39	265	...	...	...	...	...	4	...	46	5	3	134	2	11
RURAL.																							
Abergavenny	8,700	...	2	...	...	...	...	...	17	...	...	...	...	...	...	...	2	...	...	6	...	1
Chepstow	10,890	14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Magor & St. Mellons	14,740	6	2	...	...	2	...	6	...	...	...	...	...	...	...	...	...	...	...	4	...	...
Monmouth	5,800	6	2	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	...	3	...	...
Pontypool	13,220	6	24	...	...	3	...	...	1	...	...	...	...	...	...	...	...	...	...	10	...	4
Totals, Rural	53,360	32	30	...	...	5	...	6	23	...	...	...	...	...	...	...	1	3	...	24	...	5
Grand Totals	331,150	70	138	...	...	21	...	45	288	...	...	...	...	...	4	1	49	5	3	158	2	16

ANALYSIS OF NOTIFICATIONS FOR CASES FOR THE

NATURE OF DISEASE	1924		1925		1926		1927		Total
	No.	%	No.	%	No.	%	No.	%	
Scarlet Fever	1	100	1	100	1	100	1	100	4
Dysentery	1	100	1	100	1	100	1	100	4
Acute Bronchitis	1	100	1	100	1	100	1	100	4
Latent	1	100	1	100	1	100	1	100	4
Post-intestinal	1	100	1	100	1	100	1	100	4
Enteric or Typhoid Fever	1	100	1	100	1	100	1	100	4
Paratyphoid Fever	1	100	1	100	1	100	1	100	4
Rheumatism	1	100	1	100	1	100	1	100	4
Food Poisoning	1	100	1	100	1	100	1	100	4
Paratyphoid Typhoid	1	100	1	100	1	100	1	100	4
Gonorrhoeal Prostatitis	1	100	1	100	1	100	1	100	4

NATURE OF DISEASE	1924		1925		1926		1927		Total
	No.	%	No.	%	No.	%	No.	%	
Acute Prostatitis	1	100	1	100	1	100	1	100	4
Dysentery	1	100	1	100	1	100	1	100	4
Acute Bronchitis	1	100	1	100	1	100	1	100	4
Latent	1	100	1	100	1	100	1	100	4
Post-intestinal	1	100	1	100	1	100	1	100	4
Enteric or Typhoid Fever	1	100	1	100	1	100	1	100	4
Paratyphoid Fever	1	100	1	100	1	100	1	100	4
Rheumatism	1	100	1	100	1	100	1	100	4
Food Poisoning	1	100	1	100	1	100	1	100	4
Paratyphoid Typhoid	1	100	1	100	1	100	1	100	4
Gonorrhoeal Prostatitis	1	100	1	100	1	100	1	100	4

NATURE OF DISEASE	1924		1925		1926		1927		Total
	No.	%	No.	%	No.	%	No.	%	
Respiratory	1	100	1	100	1	100	1	100	4
Neurological and CNS	1	100	1	100	1	100	1	100	4
Other	1	100	1	100	1	100	1	100	4

Table compiled from District...

NOTIFIABLE DISEASES.**Isolation Hospitals.**

These are under the control of the Regional Hospital Board and are the responsibility of the Hospital Management Committee.

Smallpox.

No case of Smallpox was reported in the County during 1960.

Scarlet Fever.

The number of notifications of Scarlet Fever was 70. It was 107 in 1959.

Diphtheria.

During the year under review, there were no notifications of cases of Diphtheria.

	1960	1959	1958	1957	1956	1955	1954	1953	1952
No. of Notification ...	Nil	Nil	Nil	Nil	Nil	Nil	2	Nil	8
No. of Deaths ...	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	2

Meningococcal Infection.

	1960	1959	1958	1957	1956	1955
No. of cases notified ...	1	3	5	6	2	3
No. of deaths ...	1	2	1	4	2	1

Acute Poliomyelitis.

	1960	1959	1958	1957	1956	1955
No. of cases notified ...	Nil	4	7	63	8	33
No. of deaths ...	Nil	1	Nil	3	Nil	2

Chicken Pox.

This disease was not compulsorily notifiable.

Measles.

	1960	1959	1958	1957	1956	1955
No. of cases reported ...	21	1,955	2,894	2,822	1,554	4,620
No. of cases ...	Nil	1	2	1	1	Nil

Whooping Cough.

	1960	1959	1958	1957	1956	1955
No. of cases notified ...	138	140	225	276	437	399
No. of deaths ...	1	Nil	Nil	Nil	2	Nil

Influenza.

	1960	1959	1958	1957	1956	1955
No. of deaths ...	13	47	18	60	13	25

Acute Pneumonia.

	1960	1959	1958	1957	1956	1955
No. of cases notified ...	45	113	99	163	108	177
No. of deaths ...	114	103	109	118	123	140

DIPHTHERIA IMMUNISATION FOR THE YEAR 1960.

Number of children in the Local Health Authority area on 31st December, 1960, who have completed a course of diphtheria immunisation at any time between 1st January, 1946, and 31st December, 1960.

Age on 31-12-1960 (i.e., born in Year)	Under 1 1960	1 to 4 1956-59	5 to 9 1951-55	10 to 14 1946-50	Under 15 Total
A. Number of children whose last course (primary or booster) was completed in the period 1956-60.	1,078	12,626	14,753	11,327	39,784
B. Number of children whose last course (primary or booster) was completed in the period 1955 or earlier.	—	—	12,784	20,556	33,340
C. Estimated mid-year child population.	5,440	21,160	53,300		79,900
Immunity Index 100 A/C.	19.82	59.67	48.93		49.79

DIPHTHERIA IMMUNISATION FOR THE YEAR 1960.

	AGE at Date of Final Injection (as regards A) or of Reinforcing Injection (as regards B).			
	Under 1	1 to 4	5 to 14	Total
A. Number of children who completed a full course of primary immunisation in the Authority's Area (including temporary residents) during the 12 months ended 31st December, 1960.	1,525	2,069	1,149	4,743
B. Number of children who received a Secondary Injection (i.e., subsequently to Primary Immunisation at an earlier age) during the 12 months ended 31st December, 1960.	11	310	3,192	3,513

SMALLPOX VACCINATION.

(1) NUMBER OF PERSONS VACCINATED (or revaccinated) DURING 1960.

Age at Date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	1,909	444	153	117	164	2,787
Number re-vaccinated ...	—	1	7	27	203	238

(2) NUMBER OF CASES SPECIALLY REPORTED DURING 1960. (Age Groups as above).

(a) Generalised Vaccinia	—	—	—	—	—	—
(b) Post-vaccinal Encephalomyelitis	—	—	—	—	—	—
(c) Death from complications of vaccination other than (a) and (b) ...	—	—	—	—	—	—

WHOOPIING COUGH IMMUNISATION.

Return for Year ended 31st December, 1960.

	AGE at date of final injection		
	0-4 Years	5-14 Years	Total
Number of children who have completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the Authority's area during the year ended 31st December, 1960 ...	3,419	94	3,513

TUBERCULOSIS.

Public Health (Tuberculosis) Regulations, 1952.

	1959	1960
Number of Primary Cases of Respiratory Tuberculosis notified	177	152
„ „ Deaths from Respiratory Tuberculosis ...	37	28
„ „ Non-Respiratory Tuberculosis Cases notified ...	19	16
„ „ Deaths from Non-Respiratory Tuberculosis ...	5	2

The following table giving the notification rate and death rate per 1,000 of the estimated population is submitted for the purpose of comparison with previous years:—

Year.	Notification rate per 1,000 of population.		Death rate per 1,000 of population.	
	Respiratory.	Non-Respiratory.	Respiratory.	Non-Respiratory.
1939	1.25	.48	.64	10
1940	1.60	.49	.57	.13
1941	1.12	.40	.51	.15
1942	1.12	.42	.62	.13
1943	1.32	.36	.60	.11
1944	1.33	.42	.52	.10
1945	1.10	.32	.57	.11
1946	1.16	.27	.49	.08
1947	0.98	.23	.55	.10
1948	1.21	.22	.52	.09
1949	1.19	.15	.49	.08
1950	1.06	.21	.30	.06
1951	1.14	.18	.27	.05
1952	1.09	.15	.25	.03
1953	0.91	.10	.19	.03
1954	0.91	.10	.18	.03
1955	0.83	.09	.15	.01
1956	0.71	.06	.10	.006
1957	0.63	.05	.09	Nil
1958	0.54	.07	.09	.003
1959	0.54	.06	.11	.015
1960	0.46	.05	.08	.006

Summary of notifications by District Medical Officers of Health to the County Medical Officer under the Public Health (Tuberculosis) Regulations, 1952, during the year 1960, with the number of deaths notified by the Registrar-General is shown as follows:—

Primary Notifications of New Cases						DEATHS.					
Age Periods.	Respiratory		Non-Respiratory			Age Periods.	Respiratory		Non-Respiratory		Total
	Males	Females	Males	Females	Total		Males	Females	Males	Females	
0—	—	—	—	—	—	0—	—	—	—	—	—
1—	1	3	—	—	4						
2—	3	1	—	1	5						
5—	2	2	—	—	4						
10—	3	6	—	1	10						
15—	4	8	2	2	16						
20—	7	12	—	—	19						
25—	12	18	3	1	34	25—	3	—	—	—	3
35—	11	6	1	1	19						
45—	15	6	1	—	22	45—	12	2	—	1	15
55—	15	3	1	2	21						
65—	9	2	—	—	11	65—	7	1	1	—	9
75 and Upwards	3	—	—	—	3	75—	2	1	—	—	3
	85	67	8	8	168		24	4	1	1	30

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period 1st January, 1960, to 31st December, 1960, otherwise than by formal notification.

Source of Information.			Number of cases in age Groups.												TOTAL		
			0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—		75—	
Death Returns from Local Registrars	Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(A)
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(B)
	Non-Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(C)
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(D)
Death Returns from Registrar General (transferable deaths)	Respiratory	M	...	...	...	...	...	...	...	...	...	1	...	...	1	(A)	
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(B)
	Non-Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(C)
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(D)
Posthumous Notifications	Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(A)
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(B)
	Non-Respiratory	M	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(C)
		F	...	...	...	...	...	...	...	...	...	...	...	...	...	—	(D)

Totals: (A) ... 1 (B) ... — (C) ... — (D) ... —

Number of Visits made to Tuberculosis households by Health Visitors, 757.

TUBERCULOSIS CLINIC TIME TABLES.**NEWPORT AND EAST MONMOUTHSHIRE AREA.****PERSONNEL :**

Chest Physician ...	...	Dr. M. I. Jackson.	Private Tel. No. 65623.
Asst. Chest Physicians ..		Dr. H. James. Dr. H. Pick. Dr. T. L. Hilliard.	
Clinic Sisters ...	...	1 full-time. 2 part-time.	

CHIEF CLINIC.

129, Stow Hill, Newport. Tel. No. : Newport 66781.

TIME TABLE.

<i>Clinics.</i>	<i>Days and Times.</i>	<i>Sessions.</i>
Newport. 129, Stow Hill. New and old cases, by appointments only.	Monday	9.15 a.m. Men only. 2. 0 p.m. M R. Recalls
	Tuesday	9.15 a.m. Women only.
	2nd Tuesday	2. 0 p.m. Non-respiratory Clinic.
	Wednesday	9.15 a.m. Children only. 2. 0 p.m. Contacts. 5.30 p.m. Working Males.
	Thursday	9.15 a.m. Men only. 2. 0 p.m. Contacts.
	Friday	9.15 a.m. Women only. 2. 0 p.m. B.C.G. Clinic.
	Saturday	9.15 a.m. Appointments only.
Pontypool. Park Buildings. Tel. No. 480.	Tuesday	10. 0 a.m. Men only. 2. 0 p.m. Women and Children.
	Thursday	9.30 a.m. G.P. X-ray Clinic. (men). 11. 0 a.m. G.P. X-ray Clinic. (women). to 12.30 p.m. By appointment only. 2. 0 p.m.
	Thursday	10.30 a.m. New and old patients (by appointment only)
Abergavenny. Maindiff Court. Tel. Abergavenny 226.	Thursday	10.30 a.m. New and old patients (by appointment only)
Monmouth. 1st and 3rd Monmouth General Hospital.	Friday	10.30 a.m. New and old patients (by appointment).

Chepstow. Tuesday 2.0 p.m. New and old patients
 Chest Unit, (by appointment).
 Mount Pleasant
 Hospital.
 Tel. Chepstow 332.

Static Mass Radio- Monday } 10 a.m. to
 graphy Unit, Tuesday } 12 noon General Population.
 Wrenford Memorial Thursday } 2 p.m. to
 Hall, Commercial Friday } 4 p.m.
 Street, Newport. Tuesday, 5 p.m. to General Population,
 7 p.m.
 Wednesday, 10 a.m. to School Children.
 12 noon.
 2 p.m. to Expectant Mothers
 4 p.m.

RHYMNEY AND SIRHOWY VALLEY AREA.

PERSONNEL :

Chest Physician. Prof. F. Heaf. Private Tel. No. :
 Asst. Chest Physicians. Dr. N. C. Norman. Cardiff 51619.
 Dr. M. C. McCabe.
 Dr. S. Keidan.
 Clinic Sisters. 3 (1 half-time).

CHIEF CLINIC :

"Heathfield," St. Martin's Road, Caerphilly.
 Tel. No. : Caerphilly 2333 and 2334.

TIME TABLE :

<i>Clinics.</i>	<i>Days and Times.</i>	<i>Sessions.</i>
Caerphilly. "Heathfield," St. Martin's Road.	Monday,	9.30 a.m. Children. 2.0 p.m. New patients.
	Tuesday,	9.30 a.m. New patients. 2—3 p.m. Miniature Radiography
	Wednesday,	2.0 p.m. Old patients (Male). 5.0 p.m. Special appointments.
	Thursday,	9.30 a.m. New patients. 2.0 p.m. Old patients (Female).
	Friday,	9.30 a.m. Old patients (Bed cases). 2.0 p.m. Contact and B.C.G. Clinic. Non-Tb. Chests.

Pontllanfraith.	Monday,	10. 0 a.m.	New and old patients— male.
Llanarth Road.	„	2. 0 p.m.	New patients—male.
Tel. No.	Tuesday,	10. 0 a.m.	Tomography Clinic.
Blackwood 3281.	„	2.30 p.m.	Tomography Clinic.
	Wednesday,	10. 0 a.m.	New and old patients —female.
	„	2.30 p.m.	Old patients—bed cases.
	„	2.30 p.m.	Contact Clinic.
	Thursday,	10. 0 a.m.	Special X-ray appointments.
	„	2.30 p.m.	Special X-ray appointments.
	Friday,	10. 0 a.m.	New and old patients— children.
	„	2.30 p.m.	Contact and B.C.G. Clinic.
Ebbw Vale .	Tuesday,	1.30 p.m.	New and old patients.
Pentwyn House,	Friday,	1.30 p.m.	New and old patients.
Ebbw Vale Hospital.			
Nantyglo.	Tuesday,	11. 0 a.m.	New and old patients.
Blaina & District Hospital.	(Also for Brynmawr patients)		
Tredegar.	Thursday,	1. 0 p.m.	New and old patients.
Tredegar General Hospital,			
O.P. Department, Market Street.			

New and old cases by appointment only.

CANCER.

During the year 1960 the number of deaths from Cancer was 651, an increase of 15 on 1959. The following table shows the incidence of the disease over the past 15 years:

All Forms of Cancer.

1960	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946
651	636	582	592	609	597	564	624	569	569	537	563	557	532	503

CANCER OF LUNG AND BRONCHUS.

1960	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946
136	113	107	89	105	106	70	107	74	74	59	—	—	—	—

The increase in the total number of deaths from all forms of cancer for the year was 15, but it will be noted that as the increase over 1959 in deaths from cancer of lung or bronchus was 23, the number of deaths from other forms of cancer actually decreased by 8.

Incidence of Cancer of Lung and Bronchus. (Deaths).

URBAN DISTRICTS.

MALES.

Year	1960	1959	1958	1957	1956	1955	1954
Age Group							
0—	—	—	—	—	—	—	—
25—	5	3	2	5	2	1	2
45—	56	36	48	43	51	45	33
65—	42	31	26	15	20	28	16
75—	4	9	8	3	8	8	4
Total Males	107	79	84	66	81	82	55

FEMALES.

Year	1960	1959	1958	1957	1956	1955	1954
Age Group							
0—	—	—	—	—	—	—	—
25—	3	—	—	1	1	1	1
45—	4	5	3	4	4	1	1
65—	—	3	1	—	—	4	1
75—	1	1	—	—	2	—	2
Total Females	8	9	4	5	7	6	5

RURAL DISTRICTS.

MALES.

Year	1960	1959	1958	1957	1956	1955	1954
Age Group							
0—	—	—	—	—	—	—	—
25—	1	1	—	1	—	—	1
45—	7	10	10	6	12	13	5
65—	7	8	7	5	3	2	2
75—	3	2	—	2	2	1	1
Total Males	18	21	17	14	17	16	9

FEMALES.

Year	1960	1959	1958	1957	1956	1955	1954
Age Group							
0—	—	—	—	—	—	—	—
25—	—	—	—	—	—	—	—
45—	1	4	—	1	—	—	1
65—	2	—	1	3	—	2	—
75—	—	—	1	—	—	—	—
Total Females	3	4	2	4	—	2	1

Grand Total ...	1960	1959	1958	1957	1956	1955	1954
	136	113	107	89	105	106	70

DEATHS FROM ALL FORMS OF CANCER.

Year.	No. of cases.	Increase or decrease over cases previous year.	% Increase or decrease over previous year.
1954 ...	564	- 60	- 10%
1955 ...	597	+ 33	+ 6%
1956 ...	609	+ 12	+ 2%
1957 ...	592	- 17	- 3%
1958 ...	582	- 10	- 1.7%
1959 ...	636	+ 54	+ 9%
1960 ...	651	+ 15	+ 2.4%

CANCER OTHER THAN OF LUNG OR BRONCHUS.

	No. of cases.	Increase or decrease over previous year.	% Increase or decrease over previous year.
1952 ...	495	—	—
1953 ...	517	+22	+ 4%
1954 ...	494	-23	- 4%
1955 ...	491	- 3	-0.6%
1956 ...	504	+13	+2.6%
1957 ...	503	- 1	-0.2%
1958 ...	475	-28	-5.6%
1959 ...	523	+48	+ 9%
1960 . .	515	- 8	-1.5%

CANCER OF LUNG AND BRONCHUS.

Year.	No. of cases.	Increase or decrease over cases previous year.	% Increase or decrease over previous year.
1952 ...	74	—	—
1953 ...	107	+33	+45%
1954 ...	70	-37	-35%
1955 ...	106	+36	+51%
1956 ...	105	- 1	- 1%
1957 ...	89	-16	-16%
1958 ...	107	+18	+20%
1959 ...	113	+ 6	+ 6%
1960 . .	136	+23	+20%

VENEREAL DISEASES.

The Treatment Centre was situated at the Royal Gwent Hospital, Newport. The days and hours of sessions were as follows:—

MALES.

Tuesday	...	...	9. 0 a.m.
Wednesday	...	...	2. 0 p.m. and 5. 0 p.m.
Friday	...	...	5.30 p.m.

FEMALES.

Monday	...	...	2. 0 p.m.
Tuesday	...	...	2. 0 p.m. and 5.30 p.m.

ANTE-NATAL CASES.

Tuesday	...	...	2. 0 p.m.
Thursday	..	...	2. 0 p.m.

The following numbers of new cases from Monmouthshire were treated:

	At Royal Hospital, Newport	At Cardiff Royal Infirmary	Graig Hospital, Pontypridd
Syphilis	... 23	—	—
Gonorrhoea	... 36	4	—
Other conditions	113	6	1

Responsibility for the treatment at this Centre is that of the Welsh Regional Hospital Board.

The part-time services of a Lady Enquiry Officer are available and in co-operation with the Treatment Centre, during 1960, carried out confidential enquiries with regard to detection and treatment of venereal disease, as outlined in Section 28 of the National Health Service Act, 1946. The remainder of this Officer's time was devoted to other duties in the Health Department.

POLIOMYELITIS VACCINATION.

CLASS.	No. of Persons Vaccinated at Clinics during year with:		No. of applicants awaiting 1st Injection. at end of year.
	2nd Injection.	3rd Injection.	
Children and Young Persons born in years 1943 to 1960	4,197	/	171
Young Persons born in years 1933 to 1942	1,620		160
Persons born before 1933 who have not passed their 40th Birthday ..	5,230		240
Others	101		66
Total	11,148	38,916	637
Doses of vaccine issued during year to hospitals where number of staff, medical students and their families vaccinated not included above			586
Numbers of Record Cards submitted by General Practitioners during the year	(a) Recording 1st and 2nd injections ...	1,883	
	(b) Recording 3rd Injections ...	1,717	

WORK OF THE HEALTH VISITORS.

Staff at the end of 1960: 1 full-time Superintendent.

1 part-time Assistant Superintendent.

49 full-time Health Visitors acting jointly as School Nurses.

Apportionment of time to Maternity and Child Welfare Work approximately equal to 32.6 full-time Health Visitors.

4 other nurses working as Clinic Staff gave the equivalent of 0.4 nurses to Maternity and Child Welfare work.

The number of fruitful visits paid to homes by Health Visitors under the Maternity and Child Welfare Service during the last 5 years were:—

1960	1959	1958	1957	1956
59,278	45,907	54,606	49,059	54,246

Of the 59,278 fruitful visits paid in 1960, 5,854 were in respect of new babies, 8,827 fruitless visits were made in addition.

VISITS IN 1960.

	<i>1st Visits</i>	<i>Total Visits</i>
To Expectant Mothers	561	806
„ Children under 1 year of age	5,854	16,886
„ Children between 1 and 5 years of age	—	41,586
In other cases	—	4,045
		(excluding 8,827 fruitless visits).

The number of domiciliary births in which the infant was wholly breast-fed at the fourteenth day was 1,974, compared with 1,089 for 1959.

Ante-Natal Clinics.

The number of Ante-Natal Clinics in the County at the end of the year was 29, and there were held 146 half-day sessions per month. The attendances for the whole of the Clinics were:—

	1960	1959	1958	1957	1956
New Cases	2,332	2,132	2,421	2,785	2,909
Re-Visits	10,507	9,549	9,755	8,540	10,623
Total Attendances	12,839	11,681	12,176	11,325	13,532

Maternity and Child Welfare Clinics.

At the end of the year there were 49 Infant Welfare Clinics in operation and 306 half-day sessions per month were held.

The attendances at the Centres during 1960 and 4 previous years were:—

	1960	1959	1958	1957	1956
No. of Infants who attended					
Child Welfare Centre ...	15,275	12,383	12,466	11,919	12,056
No. of new cases under 1 year ...	5,463	7,721	7,456	7,274	5,817
No. of attendances under 1 year...	70,454	66,810	62,440	61,321	57,711
No. of attendances 1 to 5 years ...	33,872	26,941	22,655	21,916	29,093
Total No. of attendances ...	104,326	93,751	85,095	83,237	86,804

Post-Natal Clinics.

Number of women who attended at Ante-Natal Clinics during the year for Post-Natal examination ...	262
Number of new cases included in the above ...	248
Number of attendances of Post-Natal cases at Ante-Natal Clinics	361
Number of women examined at Newport Post-Natal Clinic ...	331
Number of new cases at Newport Post-Natal Clinic (included in above) ...	300
Number of attendances at Newport Post-Natal Clinic ...	442

Care of Illegitimate Children.

Number of new cases of unmarried mothers dealt with by social worker ...	46
Number of visits to above ...	317
Number of women admitted to "Northlands," Cardiff ...	6
Number of women admitted to Dunmore House, Devon ...	1
Number of cases who were single women ...	37
Number of cases who were married to other men ...	6
Number of cases who were widows ...	1
Number of cases who were divorced women ...	2
Number of women who later married the putative father ...	1
Number of children admitted to Children's Nurseries...	8

DOMICILIARY MIDWIFERY SERVICE.

There were at the end of 1960, three Joint Supervisors of Midwives and Home Nurses, and in addition the number of whole-time County Midwives was 53. There were also 3 part-time midwives, 8 Home-Nurse-Midwives and 4 Independent Midwives.

With 56 Midwives engaged in hospitals and Maternity Homes, the total number of midwives on the County Register at the end of 1960 was 124.

The number of deliveries attended by Midwives during the year 1960, with figures for four preceding years were as follows:—

<i>Notified by</i>	1960	1959	1958	1957	1956
County Midwives ...	2,085	2,098	2,087	2,038	2,098
Independent Midwives ...	2	5	4	1	—
Maternity Hospitals and Maternity Homes ...	3,540	3,311	3,418	3,382	3,294
Total ...	5,627	5,414	5,509	5,421	5,392

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

(a) For Domiciliary Cases:

(i) Where Medical Practitioner had arranged to provide the patient with Maternity Medical Service under the National Health Services ...	...	...	...	...	327
(ii) Others ...	...	...	...	...	122
Total ...	...	...	...	...	449

(b) For Cases in Institutions ... 936

Particulars of Midwives in respect of Inhalation Analgesics at the end of 1960.

There were 53 Institutional Midwives in the area at the end of the year who were qualified to administer inhalation analgesics in accordance with the requirements of the Central Midwives Board, also 64 Domiciliary Midwives, and 4 Domiciliary Midwives in private practice. There were 64 sets of gas and air analgesia apparatus in use and they were used in 1,664 cases where the administrator in domiciliary practice was acting as a midwife, and 120 when acting as a maternity nurse. There were no sets in use for the administration of "Trilene."

The number of cases in which pethidine was administered by midwives in domiciliary practice during the year when acting as midwife was 865, and when acting as a maternity nurse was 92.

Pethidine was administered by an independent midwife to one case while acting as a Maternity Nurse.

Domiciliary Midwifery Visits in the County.

Number of Ante-Natal Visits	17,450
Number of Live Births attended (Actual)	2,085
Number of Still Births attended (Actual)	36
Number of Miscarriages attended	107
Number of Daily Nursing Visits	36,245
Number of Hospital Post-Natal Nursing Visits	9,708
Number of Hospital Post-Natal Cases Visited	2,376

Ophthalmia Neonatorum Notifications under Public Health (Ophthalmia Neonatorum) Regulations were:—

Year	1960	1959	1958	1957	1956
Number of cases	1	1	1	Nil	2

There were 10 other cases of eye trouble reported by Midwives, all of which were followed up by Health Visitors. All cases cleared up without any impairment of vision.

PREMATURE BIRTHS FOR THE YEAR 1960.

NOTES: This section covers live births and still-births of 5½ lbs. or less at birth. Births in an ambulance or in the street are listed under the place to which the case is immediately transferred.

1. NUMBER OF PREMATURE LIVE BIRTHS NOTIFIED (as adjusted by transferred notifications):

(a) In hospital	...	332
(b) At home	...	158
(c) In private nursing homes	...	—
Total	...	490

2. NUMBER OF PREMATURE STILL-BIRTHS NOTIFIED (as adjusted by transferred notifications):

(a) In hospital	...	74
(b) At home	...	21
(c) In private nursing homes	...	—
Total	...	95

* "Private nursing homes" includes nursing homes and maternity hospitals and homes not in the National Health Service and Mother and Baby Homes where women are confined in the Home.

Weight at birth.	PREMATURE LIVE BIRTHS												PREMATURE STILL-BIRTHS					
	† Born in Hospital.			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home			
	Total (2)	Died within 24 hrs. of birth (3)	Survived 28 days (4)	Total (5)	Died within 24 hrs. of birth (6)	Survived 28 days (7)	Total (8)	Died within 24 hrs. of birth (9)	Survived 28 days (10)	Total (11)	Died within 24 hrs. of birth (12)	Survived 28 days (13)	Total (14)	Died within 24 hrs. of birth (15)	Survived 28 days (16)	(17)	(18)	(19)
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	44	14	18	3	2	1	16	2	5	—	—	—	—	—	—	35	8	—
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	67	6	60	8	1	7	13	3	10	—	—	—	—	—	—	19	6	—
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	72	2	69	18	—	18	7	—	7	—	—	—	—	—	—	5	—	—
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	149	1	146	88	1	86	5	1	4	—	—	—	—	—	—	15	7	—
Totals ...	332	23	293	117	4	112	41	6	26	—	—	—	—	—	—	74	21	—

† The group under this heading includes cases which may have been born in one hospital and transferred to another.

**NATIONAL HEALTH SERVICE ACT, 1946, SECTION 27.
NATIONAL HEALTH SERVICE (AMENDMENT) ACT, 1949
SECTION 24.**

In observance of the above Acts, the Council maintains a fleet of 48 radio-controlled ambulance vehicles, based at stations throughout the administrative area.

Ambulance Scheme.

CONTROL STATIONS.	SUB-STATIONS.	NUMBER OF VEHICLES.	AREA SERVED.
Main County Control, Ambulance Service Headquarters, Cambria House, Caerleon. Telephone: Caerleon 283/4/5 (Operational). Caerleon 421 (Ambulance Officer and Administrative). (24 hour service).	Cambria House, Caerleon.	3	Caerleon U. Magor & St. Mellons R. (East of Newport). Pontypool R. Usk U.
	Vauxhall Road, Chepstow.	3	Chepstow U. & R.
	Drybridge House, Monmouth.	2	Monmouth B. & R.
	St. Mary's Road, Abergavenny.	2	Abergavenny B. & R.
Tredegar Zone Control, Vale Terrace, Tredegar. Telephone: Tredegar 341/2. (24 hour service).	—	7	Tredegar U. Rhymney U. Ebbw Vale U.
Bedwellty Zone Control, Maesruddud, Argoed. Telephone: Blackwood 2333/4. (24 hour service).	—	7	Bedwellty U. Mynyddislwyn U. Bedwas & Machen U. (Maesycwmmmer).
Abertillery Zone Control, Warm Turn, Aberbeeg. Telephone: Abertillery 2292/3. (24 hour service).	—	6	Blaina & Nantyglo U. Abertillery U. Llanhilleth & Trinant (Abercarn U.).
Pontypool Zone Control, Ashgrove, Upper George Street, Pontypool. Telephone: Pontypool 475/6. (24 hour service).	—	7	Blaenavor U. Pontypool U. Cwmbran U.
Bassaleg Zone Control, Whitehead's Sports Ground, Bassaleg. Telephone: Newport 59951/2. (24 hour service).	—	6	Bedwas & Machen U. (exclude Maesycwmmmer). Abercarn U. (exclude Llanhilleth & Trinant). Risca U. Magor & St. Mellons R. (West of Newport).

In the event of failure to contact any of the above telephone numbers, contact the Main Ambulance Control, Caerleon 283, as second call.

The Main Ambulance Control telephone number—*Caerleon 283*, is exhibited at telephone exchanges throughout the County and in *Real Emergency* the public may obtain service by the following procedure: dial "999" or "0" or "01" according to local arrangements, ask the operator for "Ambulance" and the call will be put through to the Main Ambulance Control.

AMBULANCE SERVICE, 1960.
Operational Return for the year ended 31st December, 1960.

	DIRECTLY OPERATED.			SUPPLEMENTARY SERVICE.
	Ambulances.	Sitting-Case Cars.	Total.		Hired Cars.
A. No. of Patients:				
(1) Accidents and Emergencies	10,690	61	10,751	—
(2) Others	98,249	1,318	99,567	—
(3) Total of (1) & (2) ...	108,939	1,379	110,318	Nil
B. Journeys:				
(1) Patient Carrying ...	28,434	619	29,053	—
(2) Abortive & Service	921	15	936	—
(3) Analgesia & Midwives, etc. ...	4	—	4	—
(4) Total of (1) (2) & (3)	29,359	634	29,993	Nil
C. Total Mileage	813,293	22,026	835,319	Nil
D. No. of Operational Vehicles as at 31-12-60 ...	47	1	48	—
	Driving Staff.	Station Staff.	Control Room Staff.	Total.
E. No. of Operational Staff as at 31-12-60	82 Ambulance Drivers 1 S. Case-Car Driver	5 Leader Drivers. 5 Deputy Leader Drivers.	1 Supervisor. 4 Telephonists	98
F. No. of Ambulance Stations as at 31-12-60 ...	6 Zone Stations.	3 Depôts 1 Sub-Depôt.		Total 10.

MOBILE PHYSIOTHERAPY SERVICE, 1960.

Number of New Cases referred by Family Doctor ...	100
Number of New Cases referred by Hospitals ...	25
Others	2
Total Number of Cases	<u>127</u>

Of the above total referred for treatment, upon investigation 5 were found to be unsuitable for treatment.

CASES TREATED BY THE PHYSIOTHERAPY SERVICE.

	Improved with Treatment.				No Improvement.				Too ill for treatment to be continued.			
	20-39	40-59	Over 60	Total	20-39	40-59	Over 60	Total	20-39	40-59	Over 60	Total
Hemiplegia	—	4	27	31	—	—	1	1	—	2	20	22
Rheumatoid Arthritis ...	—	1	3	4	—	1	1	2	—	4	11	15
Fractures	—	—	4	4	—	—	—	—	—	—	3	3
Muscular Dystrophy ...	—	1	6	7	—	—	2	2	—	—	2	2
Old Poliomyelitis ...	—	2	—	2	—	—	—	—	—	1	—	1
Osteo Arthritis	—	—	6	6	—	—	—	—	—	—	1	1
Disseminated Sclerosis ..	—	—	—	—	—	—	—	—	1	—	1	2
	—	8	46	54	—	1	4	5	1	7	38	46

5 Patients were admitted to hospital after treatment had commenced.

4 cases ceased treatment owing to deterioration of physical condition.

NIGHT ATTENDANT SERVICE.

FOR THE PERIOD 1ST JANUARY, 1960—31ST DECEMBER, 1960.

Number of Cases for whom a Night Attendant was requested ...	98
Number of Patients who received the services of a Night Attendant	68

Of the 30 cases who did not receive the Service:—

- 8 Patients died before the Service could be put in.
- 6 Patients were admitted to hospital.
- 8 Cases were investigated and assessed "No Need."
- 8 Patients refused a Night Attendant.

Of the 68 patients who received the Service:—

- 16 Recovered and the Service terminated.
- 33 Patients died.
- 16 were admitted to Hospital.
- 3 were still being attended at the end of the year.

	ADMINISTRATIVE AND SUPERVISORY NURSING STAFF				STATE REGISTERED NURSES (S.R.N., R.S.C.N., and R.F.N.)				ENROLLED ASSISTANT NURSES				STUDENT HOME NURSES		
	Whole-time (2)	Part-time (3)	Equivalent Whole-time of (3) (4)		Whole-time (5)	Part-time (6)	Equivalent Whole-time of (6) (7)		Whole-time (8)	Part-time (9)	Equivalent Whole-time of (9) (10)		Whole-time (11)	Part-time (12)	Equivalent Whole-time of (12) (13)
(a) L.H.A.	—	3	1.5		56	4	2		5	4	2		—	—	—
(b) Vol. Org.	—	—	—		—	—	—		—	—	—		—	—	—

Number of Nurses engaged in Home Nursing and Midwifery ... 8

Number of Nurses engaged in Health Visiting and School of Nursing ... 49. Number of Male Nurses ... Nil

HOME NURSING.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Number of cases attended by Home Nurses during the year:— (a) L.H.A. ...	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year.	Children included in (2)-(7) who were under 5 at the time of the first visit during the year.	Patients included in (2)-(7) who have had more than 24 visits during the year
5,689	1,830	2	77	52	1,242	8,892	4,140	554	3,498	
(b) Vol. Org. under arrangements with the Authority ...	—	—	—	—	—	—	—	—	—	—
Number of visits paid by Home Nurses during the year:— (c) L.H.A. ...	221,541	52,443	12	5,522	648	29,225	309,391	185,238	5,792	250,144
(d) Vol. Org. under arrangements ...	—	—	—	—	—	—	—	—	—	—

DAY NURSERIES
YEAR 1960.

Daily Minders receiving Fees from the Authority under Section 22 of the National Health Service Act, 1946, at End of Year.

- (a) Number of Minders
(b) Number of children cared for

HEALTH VISITING AND TUBERCULOSIS VISITING.

A. Visiting.

(1)	Number of children under 5 years of age visited during year (2)	HEALTH VISITORS						TUBERCULOSIS VISITORS			
		Expectant Mothers	Children under 1 year of age	Children age 1 and under 2 years	Children age 2 but under 5 years	Tuberculous Households	Other cases	Total number of families or households visited by Health Visitors (11)	Total visits paid to tuberculous households (12)		
		First visits (3)	Total visits (4)	First visits (5)	Total visits (6)	Total visits (7)	Total visits (8)	Total visits (9)	Total visits (10)	Total visits (11)	Total visits (12)
(a) L.H.A. "Access" Visits	37,676	561	806	5,854	16,886	14,498	27,088	757	4,045*	13,225	—
"No Access" Visits	—	—	—	—	1,495	2,444	4,888	—	—	—	—
(b) Vol. Org.	—	—	—	—	—	—	—	—	—	—	—

*Including 4,021 home interviews in connection with Mass Radiography Surveys.

B. Clinics.

- (a) Total number of attendances made by Health Visitors at local Health Authority Clinic Sessions during the year 1960 11,254
- (b) Total number of attendances of Whole-time Tuberculosis Visitors at Chest Sessions per month —

YEAR 1960.

RETURN OF WORK DONE BY THE AUTHORITY UNDER:—

1. Nurseries and Child-Minders Regulation Act, 1948. 2. Registration of Nursing Homes (Sections 187 to 194 of the Public Health Act, 1936).

	Number registered at end of year	Number of children provided for	Number of Homes	Number of beds provided for:—		
				Maternity	Others	Totals
Premises ...			—	—	—	—
(a) Factory	—	—				
(b) Other nurseries	2	24	—	—	—	—
Daily Minders	—	—				
						83

Names of the Councils of any County Districts to which the powers and duties of the County Council have been delegated under Section 194 of the Public Health Act, 1936, and particulars of the powers delegated.

District.	No. of Separate Dwellings owned by Local Authority on 31-12-60.		No. of Separate Dwellings completed during 1960.		
	Tempor-ary.	Permanent.	By Local Authority.	By Private Enterprise.	Total.
Urban.					
Abercarn	50	1,544	52	3	55
Abergavenny	50	1,026	43	13	56
Abertillery	100	737	—	8	8
Redwas & Machen	50	1,016	38	16	54
Bedwellty	100	1,998	—	23	23
Blaenavon	50	390	6	—	6
Caerleon	49	227	—	10	10
Chepstow	—	632	46	31	77
Cwmbran	100	1,652	51	18	69
Ebbw Vale	—	2,348	84	29	113
Monmouth	50	487	18	8	26
Mynyddislwyn	99	1,246	35	20	55
Nantyglo & Blaina	49	858	108	8	116
Pontypool	300	3,446	73	19	92
Rhymney	49	508	40	—	40
Risca	46	1,241	14	7	21
Tredegar	87	1,486	56	9	65
Usk	—	52	—	4	4
Rural.					
Abergavenny	—	406	15	12	27
Chepstow	—	855	—	28	28
Magor & St. Mellons	50	1,332	110	40	150
Monmouth	—	222	18	14	32
Pontypool	—	168	—	102	102
Totals	1,279	23,877	807	422	1,229

Housing under Cwmbran Development Corporation

In the U.D. Cwmbran Area	Total No. of Dwellings completed by 31-12-60: Houses, 1,893; Flats, 232	In the Pontypool R.D. Area	Total No. of Dwellings completed during 1960: Houses, 213; Flats, 1
Under construction at 31-12-60:	Completed during 1950: Houses, 206; Flats, 37	Under construction at 31-12-60:	Completed during 1960: Houses, 213; Flats, 1
Houses:	Houses:	Houses:	Houses:
1 Bedroom ... 3	1 Bedroom ... 5	1 Bedroom ... 11	1 Bedroom ... 30
2 ... 4	2 ... 4	2 ... 4	2 ... 4
Flats:	Flats:	Flats:	Flats:
1 Bedroom ... 9	1 Bedroom ... 5	1 Bedroom ... 11	1 Bedroom ... 30
2 ... 4	2 ... 4	2 ... 4	2 ... 4

HOUSING ACTS. Details of Grants and Loans, 1960

DISTRICT.	IMPROVEMENT GRANTS.				IMPROVEMENT LOANS.		RENT ACT, 1957. No. of Certificates of Disrepair issued 1960.
	No. of Standard Improvement Grants.	No. of Other Improvement Grants.	Amount of Standard Improvement Grants. £	Amount of Other Improvement Grants. £	No. of Improvement Loans.	Amount of Improvement Loans. £	
Urban.							
Abercarn ...	21	22	2,440	5,867	17	3,850	—
Abergavenny ...	15	6	1,846	1,376	1	250	1
Aberthillery ...	8	15	746	3,160	20	2,550	1
Bedwas & Machen ...	13	5	1,527	1,327	—	—	—
Bedwellty ...	35	8	3,940	1,560	4	620	1
Blaenavon ...	11	9	992	2,087	—	—	—
Caerleon ...	1	4	146	1,513	4	1,160	—
Chepstow ...	8	—	582	—	—	—	—
Cwmbran ...	1	39	94	6,435	16	2,970	—
Ebbw Vale ...	10	100	743	19,165	48	8,411	10
Monmouth ...	12	14	1,786	2,814	6	1,916	—
Mynyddislwyn ...	5	6	565	1,128	—	—	2
Nantyglo & Blaina ...	71	—	6,840	—	23	4,123	—
Pontypool ...	28	23	2,277	4,657	5	1,060	9
Rhymney ...	6	2	694	540	—	—	—
Risca ...	6	31	564	7,485	20	5,826	4
Tredegar ...	17	23	1,832	6,696	24	5,693	—
Usk ...	3	—	256	—	—	—	—
Rural.							
Abergavenny ...	3	19	190	7,120	—	—	—
Chepstow ...	24	22	3,135	6,901	3	1,390	—
Magor & St. Mellons ...	4	42	575	13,168	6	5,665	2
Monmouth ...	31	6	2,626	1,570	—	—	—
Pontypool ...	2	12	270	4,026	—	—	—
Totals ...	335	408	34,666	98,595	197	45,484	30

PREVENTION OF BLINDNESS AND CARE OF BLIND PERSONS.

	Male.	Female.	Total.
Number of Persons on County Register as Blind on 31-12-60	421	574	995
Number of Persons on County Register as Partially Sighted on 31-12-60	126	214	340

Results of Examinations by Consultant Ophthalmologist at Clinic.

New Cases certified to be Blind	37
New Cases certified to be Partially Sighted	37
New Cases certified to be Not Blind or Partially Sighted ...	1
Old Blind Cases found to be not Blind or Partially Sighted ...	—
Old Partially Sighted Cases found to be not Blind or Partially Sighted	1
Old Cases re-examined and found to be still Blind	5
Old Cases re-examined and found to be still Partially Sighted ...	49
Old Cases previously Partially Sighted now found to be Blind...	24
Old Cases previously Blind now found to be Partially Sighted ...	4

Results of Domiciliary or Hospital Examinations.

	Examined by Mr. G. W. Hoare.	Examined by Mr. R. Vaughan-Jones	Examined by other Ophthalmologists
New Cases found to be Blind	85	1	6
New Cases found to be Partially Sighted	59	2	—
Old Cases previously Partially Sighted now found to be Blind	41	1	—
Old Cases previously Blind now found to be Partially Sighted	3	—	—
Old Cases previously Blind now found to be still Blind	4	—	—
Old Cases previously Partially Sighted now found to be still Partially Sighted	22	—	—
Number of New Cases found to be not Blind or Partially Sighted	4	—	—

Operations

Number of Operations for removal of Cataract, as result of recommend- ation made at time of examin- ation	12	—	—
Number of Patients too ill for recom- mended operation	2	—	—
Number of Patients who refused to have operation	1	—	—

CONVALESCENT TREATMENT.

“THE REST,” CONVALESCENT HOME, PORTHCAWL. Open from 25th April, 1960, to 7th November, 1960.

Number of applications for admission received	207
Number of applicants admitted	99
Number of applications withdrawn, other than due to illness	7
Number of applications withdrawn due to illness	5
Number of applications rejected by Committee	29
Number of applications rejected by Medical Officers	17
Number of applicants who did not attend for admission	3

DENTAL SERVICE.

Number of Dental Clinics in operation at end of 1960	...	...	...	...	11
" " Half-day Sessions devoted to Maternity and Child Welfare during year	...	...	...	...	186
" " Dental Technicians employed in Council's Dental Laboratories	...	...	...	...	1

	Examined	Needing Treatment.	Treated.	Made Dentally Fit.
Expectant and Nursing Mothers	879	843	575	523
Children under 5 ..	511	484	434	434

	Extractions	General Anaesthetics	Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Crowns or Inlays	Radiographs	Dentures Provided	
								Full Upper or Lower	Partial Upper or Lower
Expectant and Nursing Mothers	1,543	512	132	53	35	—	35	232	77
Children under 5 ..	795	395	—	12	—	—	7	—	—

HOME HELP SERVICE.

Area Health Sub-Committee	Helps supplied during 1960.					Helps employed at end of 1960		
	Maternity Cases	Tuberculosis Cases	Chronic Cases	Others	Total	Whole-time	Part-time	Total
No. 1 ..	31	5	316	—	352	—	122	122
No. 2 ..	3	3	173	35	214	—	47	47
No. 3 ..	4	—	167	14	285	1	37	38
No. 4 ..	1	—	131	97	229	1	52	53
No. 5 ..	4	1	313	4	322	3	59	62
No. 6 ..	13	1	345	1	350	—	107	107
No. 7 ..	7	4	524	87	622	1	269	270
No. 8 ..	15	1	173	9	198	—	73	73
No. 9 ..	16	2	87	6	111	—	40	40
No. 10 ..	12	1	154	17	194	—	68	68
Total ..	106	18	2,383	270	2,877	6	874	880

Cost of Home Help Service	1960	1959	1958
Number of persons assisted	£169,126	£148,463	£136,417
	2,877	2,600	2,474

Problem Families.

Number of Councils who have called Committees in 1960	...	...	...	...	...	...	5
Number of Meetings held	...	...	...	...	...	...	7
Number of Families considered	...	...	...	...	...	...	14

MEDICAL COMFORTS APPLIANCES SCHEME.**MEDICAL APPLIANCES PROVIDED IN 1960.**

No. of Depôts at end of 1960.	No. of Patients.	No. of Articles issued.	Length of Period in use.	Articles damaged and unfit for further use.
61	4,022	11,267	50% 1 month 50% longer period	269

FOOD AND DRUGS ACT, 1955.**SAMPLING.****Report for the year ending 31st December, 1960.**

During the year 1960, 1,062 samples of all kinds of food were submitted by the Sampling Officers of the Weights and Measures Department of the Public Analyst under the provisions of the above Act. These samples were procured from all parts of the County excluding those areas covered by the Pontypool Urban District Council and that of the Newport Borough Council.

They consisted of 529 milk samples taken whilst in course of sale to the Public, 452 samples of other food, 13 pharmaceutical products, 28 beer samples and 40 samples of ice-cream. The samples of "other food" were of all kinds of tin, jar and packet varieties.

The Public Analyst certified 516 milk samples, 456 samples of other food, 39 samples of ice-cream, all the pharmaceutical products and 28 beer samples to be in accordance with the various standards required.

13 samples of milk were not up to standard. Of these 9 were of abnormal composition, 2 slightly deficient in fat, 1 contained a slight amount of added water and 1 was adulterated by the addition of a snail.

9 samples of food of other kinds were adulterated and 1 sample of ice-cream was deficient in fat.

Proceedings were instituted as follows:—

Complaint:—

Maggot in Faggots and Peas ...	...	£5/5/0 costs.
Snail in bottle of milk ...	...	£5 Fine and £5/5/0 costs.
Glass in bottle of school milk ...	...	£5 Fine and £3/3/0 costs.
Cement in bottle of school milk ...	...	£2 Fine and £3/5/0 costs.
Ice-cream—deficient in fat ...	...	Absolute discharge.
		£3/3/0 costs.

In other instances, the manufacturers were written to and in some cases cautioned, the circumstances being such that no further action was advisable.

The average composition of the milk was Fat 3.68%, Solids not fat 8.74%, and total Solids 12.42%.

The percentage of samples not up to standard was 2.165%.

TABLE SHOWING DETAILS OF WATER ANALYSES.

DISTRICT.	Bacteriological Examination of Untreated Water.			Bacteriological Examination of Treated Water.		Chemical Analysis.	
	Public Supplies.	Other Supplies.		Public Supplies.	Other Supplies.		
	No. of Samples Taken	No. Satisfactory	No. Unsatisfactory	No. Satisfactory	No. Unsatisfactory		No. of Samples Taken
Urban.							
Abercarn	—	—	2	4	—	—	—
Abergavenny	—	3	2	2	—	—	—
Abertillery	—	—	—	—	—	—	—
Bedwas & Machen	—	2	—	4	—	—	—
Bedwellty	—	—	2	56	4	—	—
Blaenavon	23	—	—	11	43	—	—
Caerleon	—	—	—	3	—	—	—
Chepstow	1	—	—	40	5	—	—
Cwmbran	—	—	12	6	—	—	—
Ebbw Vale	25	—	—	49	5	—	4
Monmouth	—	1	4	42	1	—	—
Mynyddislwyn	—	—	3	4	—	—	—
Nantyglo & Blaina	—	—	2	6	—	—	2
Pontypool	—	—	—	96	1	—	—
Rhymney	40	4	—	45	—	—	—
Risca	—	—	—	—	—	—	—
Tredegar	15	—	—	35	—	—	—
Usk	—	—	—	8	—	—	—
Rural.							
Abergavenny	—	30	24	40	6	—	—
Chepstow	19	—	9	39	2	—	—
Magor & St. Mellons	—	2	8	26	17	—	—
Monmouth	8	—	8	12	—	—	—
Pontypool	—	1	5	14	7	—	—
Totals	131	43	81	542	91	—	6

**Samples of Milk submitted to the Public Health Laboratory Service,
Newport, during the years 1955-60 for Bacteriological
and Biological Examination.**

	1955	1956	1957	1958	1959	1960
MONMOUTHSHIRE COUNTY						
COUNCIL	1,006	1,350	1,266	1,404	1,523	1,330
URBAN DISTRICTS :						
Abercarn	—	1	8	22	5	8
Abergavenny	9	23	28	25	26	16
Abertillery	5	—	1	2	1	—
Bedwas & Machen	—	—	—	—	—	—
Bedwellty	22	46	51	76	111	105
Blaenavon	57	52	53	45	47	39
Caerleon	—	—	—	—	—	—
Chepstow	2	6	12	21	19	18
Cwmbran	—	9	4	13	27	13
Ebbw Vale	101	52	69	65	71	70
Monmouth	47	39	58	89	37	15
Mynyddislwyn	14	16	10	—	13	2
Nantyglo & Blaina	12	6	11	6	—	—
Pontypool	171	159	168	194	210	189
Rhydney	79	65	79	71	57	62
Risca	30	51	54	57	60	54
Tredegarr	124	142	85	108	91	93
Usk	—	1	—	—	—	—
RURAL DISTRICTS :						
Abergavenny	—	8	6	17	14	5
Chepstow	—	—	—	—	—	—
Magor & St. Mellons	25	51	48	47	36	31
Monmouth	—	—	—	—	2	—
Pontypool	7	8	—	—	—	1
Total	1,711	2,085	2,011	2,262	2,350	2,051

(By courtesy of R. D. Gray, M.D., D.P.H., Director of Laboratory).

CHILD GUIDANCE CLINICS.

Newport Clinic: Report for 1960.

No. of Cases on Waiting List at 1-1-60	...	...	...	22
Continuing Cases from 1959	...	...	...	52
New Cases referred, 1960	...	...	...	104
				<hr/> 178
No. of Cases attending Clinic, 1960	...	...	...	96
No. of Cases under supervision	...	...	...	9
No. of Cases offered appointment, not kept, 1960:—				
(a) No parental co-operation	...	...	...	3
(b) Problem solved	...	...	...	11
(c) Gone away	...	...	...	9
No. of Cases on Waiting List at 31-12-1960	...	...	...	46
Educational Problems (not maladjusted)	...	...	...	4
				<hr/> 178

Cases closed during 1960:—

(1) Problem resolved	...	...	...	15
(2) Recommended/admitted to Special Schools	...	...	...	8
(3) Improved	...	...	...	3
(4) Transferred to Local Authority, Section 57	...	...	...	2
(5) No parental co-operation	...	...	...	2
(6) Gone away	...	...	...	2
(7) For diagnosis only and treatment elsewhere	...	...	...	6
				<hr/> 38

Sources of Referral.

A. *Medical.*

School Medical Officers, Infant Welfare Clinics	...	...	31
Family Doctors	...	...	16
Hospital Consultants	...	...	30
			<hr/> 77

B. *Educational.*

Education Psychologists	...	...	13
Head Teachers	...	...	4

17

C. Other Agencies.

Probation Officers	2
Children's Officers	3
Youth Employment Officer	1
Parents	4

Cases carried forward to 1960.

Continuing Cases	78
Waiting List	46
	<hr/>
	124
	<hr/>

Tredegar Clinic: Report for 1960.

Clinics were held each week at The Grove Clinic, Tredegar, from July, 1960. Here it had been possible to equip two play therapy rooms for the lay psychotherapist, Miss Dundas, so that the long journey from the top of the valleys to Newport had become no longer necessary—a great benefit to children and their parents.

No. of Cases on Waiting List at 1-1-1960	22
No. of Cases continuing from 1959	40
No. of New Cases referred, 1960	126
	<hr/>
	188
	<hr/>

No. of Cases which attended Clinic, 1960	168
No. of Cases offered appointment, not kept:—	
(a) No parental co-operation	2
(b) Problem resolved	4
(c) Gone away	4
No. of Cases on Waiting List at 31-12-1960	10
	<hr/>
	188
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Cases Closed during 1960:

(1) Problem resolved	28
(2) Recommended/admitted to special schools	9
(3) Improved	21
(4) Transferred to Local Authority under Section 57... ..	5
(5) Lack of parental co-operation	18
(6) Gone away	8
(7) For diagnosis only, and treatment elsewhere	7
	<hr/>
	96
	<hr/>

Sources of Referral.

A. Medical.				
School Medical Officers	Infant Welfare Clinics	...	...	51
Family Doctors	...	...	...	21
Hospital Consultants	...	...	...	22
C.M.O., Breconshire	...	...	...	3
				97
B. Educational.				
Education Psychologists	...	...	...	9
Head Teachers	...	...	...	6
				15
C. Other Agencies.				
Probation Officers	...	...	...	7
Children's Officers	...	...	...	5
Parents	...	...	...	1
Police	...	...	...	1
				14
Cases carried forward to 1961:—				
Continuing Cases	...	...	...	77
Waiting List	...	...	...	10
				87

MEDICAL EXAMINATIONS OF STAFF, ETC.

All new members of the Council's Administrative, Professional and Technical Staff are examined by Medical Officers prior to permanent appointment.

Number of Medical Examinations carried out on newly-appointed members of the Staff	...	...	...	...	482
No. of School Children examined for physical fitness for part-time employment under the Council's Employment of Children's Bye-laws, 1949	...	...	...	...	200
No. of examinations of applicants for admission to Teachers' Training Colleges	...	...	...	...	222
No. of examinations of newly-appointed School Teachers	...	...	...	...	198

