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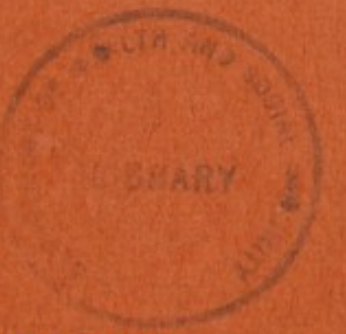
PEMBROKESHIRE COUNTY COUNCIL



ANNUAL REPORT

of the

COUNTY
MEDICAL OFFICER OF HEALTH

for

PEMBROKESHIRE

1970

PEMBROKESHIRE COUNTY COUNCIL

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TO THE CHAIRMAN AND MEMBERS OF THE
HEALTH COMMITTEE OF THE
PEMBROKESHIRE COUNTY COUNCIL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my eighteenth annual report.

Despite the uncertainties resulting from the anticipated changes in local government and the health services and the imminent integration of the personal social services, definite progress was possible in the provision of the local health authority services in this County during the year. The developments included: a detailed review and revision of the local arrangements for the attachment of health visitors and other community nurses to general practices; the opening of a new health centre at Haverfordwest; the initiation of a district nurse training scheme for state enrolled nurses; an extension of the training of ambulance-men; the introduction of a scheme for vaccination against german measles (rubella) with the aim of reducing the incidence of congenital malformations; the construction of a new adult training centre for the mentally handicapped at Haverfordwest; and a higher priority for the health education programme particularly in the secondary schools. The planning of health centres received considerable attention but progress was seriously hampered by the difficulties in obtaining suitable sites at Tenby and Fishguard.

Unfortunately, there are still considerable gaps in our knowledge of the causes of certain basic health problems such as atherosclerosis, cancer, mental

subnormality, mental illness, the mental and other complications of ageing, and various congenital handicaps and diseases. It is hoped that medical and scientific research will soon provide, at least, some of the required additional information and thus facilitate a high priority to the prevention of illness in the anticipated unified health service.

The strong feelings of dissatisfaction among the public and the local members of the medical profession concerning the location of the hospital and consultant services in South West Wales were increased by the difficulties experienced in 1970 with the provision of a 'casualty' service at the County War Memorial Hospital, Haverfordwest. Following representations by the County Council and other organisations, the Secretary of State for Wales arranged for a special review of the local health services, with particular reference to the accident and emergency service, in November, 1970. Though the subsequent report did not support demands for the main general hospital in South West Wales to be provided at Haverfordwest, it included a recognition of the need for improved hospital services, including accident and emergency treatment facilities, in the County, and for the early provision of a new general hospital at Haverfordwest. The planning of the latter hospital made good progress during the year. Some of the recommendations of the report have been implemented, but others are still under detailed consideration.

The European Conservation Year, 1970, was particularly relevant to this County with its need to promote tourism, encourage agriculture, and to assimilate the developing oil industries on the shores of the Milford Haven. The local discussions on the

AMOCO refinery project and the extensions to the Esso Refinery revealed an increasing awareness of the importance of the conservation of the local environment.

At the end of the year, as part of the integration of the personal social services, the management of the home help and certain community mental health services was transferred to the newly formed Social Services department. I was glad that the Health Committee recognised that the senior and experienced members of the transferred staff had made appreciable contributions to the development of the local health authority services in the County. Thanks for their past services and good wishes for the future were conveyed to all transferred members of the staff.

I am grateful to the Chairman and members of the Health Committee for their continued support and interest. My thanks are also due to the staff of the County Health department for their efforts during the year. Continued helpful assistance was received from the two district medical officers of health, the family doctors, and the local hospital consultants.

Miss G.M. Knight, my secretary, has helped with the preparation of the manuscript, and many of the statistics have been compiled by Mr. J. Thomas, a senior clerk of the department.

I am,

Ladies and Gentlemen,

Your obedient Servant,

D. J. DAVIES

County Medical Officer of Health.

County Health Department,
HAVERFORDWEST.

25th June, 1971.

COUNTY OF PEMBROKE
HEALTH COMMITTEE
(as on 31st December, 1970)

Chairman:
County Alderman D.W. Evans

Vice-Chairman:
Councillor O.G. John, O.B.E.

County Aldermen:
E. Anthony, M.B.E.
Rev. Mathias Davies
Mrs A. Norman

County Councillors:

T.W.H. Byard
C.V. Davies
Mrs E.R. Donnelly
C.M. George
Rev. W. Harry
T.V. Hay
T.G.V. Johns
P.E.C. Jones
Mrs R.D. Keane
D.T. Lewis
A.J. Mills
C.E. Nicholls
W.H. Symmons

Local Medical Committee Representative:
Dr. J.A.K. Douglas

Federation of Women's Institutes Representative:
Mrs E. Nisbet

South-West Wales Hospital Management Committee Representative:
Rev. T. Arwyn Thomas

W.R.V.S. Representative:
Mrs M. Llewellin

STAFF OF COUNTY HEALTH DEPARTMENT 1970

County Medical Officer of Health and Principal School Medical Officer:
D.J. Davies, MBE,BSc,MD,BS,DPH.

Deputy County Medical Officer of Health and Deputy Principal School Medical Officer:
D.F.J. Malins, MB,ChB,DPH.

District Medical Officers of Health:
(These Officers devote up to 25 per cent of their time to County Council duties)
W.J.Y. Speedy, MB,BCh,LRCP & S,LRFP & S,DPH.
M. Lawlor, MB,BCh,BAO,LM,DCH,DPH.

Medical Officers in Department and School Medical Officers:
F.J. Harrison, MB,BCh,BAO.
J.F. Rees, BSc,MB,BCh.
C.M.E. Rees, MA,MB,BChir,MRCS,LRCP.(Part time)

Chief Dental Officer and Principal School Dental Officer:
D.G. James, LDS,RCS.

School Dental Officers:
Mrs P. Jenkins, BDS.
G. Hellings, LDS.(Resigned 31.3.70)
R.R. Lewis, LDS,RCS.
A.D. Hanson, BDS.(Part time from 1.10.70)

County Nursing Officer:
Miss J.M. Young, SRN,SCM,QNCert,HVCert.

Senior Orthopaedic Physiotherapist:
Mrs C. Griffiths, MCSP.

County Home Help Organiser:
Miss M.R.F. Collins

Assistant Home Help Organiser:
Miss M.A.M. Smith

Senior Social Worker:
D.G. Jones, DMA,CSW.

Group Adviser Health Visitors:
Miss S.M. Morgan, SRN,SCM,HVCert.
Miss L.B. Williams, SRN,SCM,HVCert.
Miss M.D. Griffiths, SRN,SCM,HVCert.

County Ambulance Officer:
P.J. Hunt, FIAO.

Speech Therapists:
Miss M. Thompson (Part time)
Mrs M.J. Hudson, LCST.(Part time)(Resigned 28.3.70)
Miss A.F. Miskin, LCST,Dip.Aud,(Commenced 23.3.70)

Chiropodist:
Vacancy

Consultant Child Psychiatrist:
Evan W. Davies, MB,BCh,MRCP,DPM.

Educational Psychologists:
C.B.E. James, BA,MEd,PhD,ABPsS.
T.C.H. Thomas, BSc,Dip.Ed,Dip.Ed.Psychology

Supervisors of Training Centres:
Mrs A. Berry
Mrs E.M.P. Davies

Chief Clerk:
D.J. Pritchard, DMA.

Other Nursing Staff:
(as at 31st December, 1970)

12 Health Visitors and School Nurses
17 District Nurse/Midwife/Health Visitor/School Nurses
12 District Nurse/Midwives
17 District Nurses
1 Clinic Nurse
4 Enrolled Nurses
1 District Nurse/Health Visitor/School Nurse

Home Helps:
186 Occasional Home Helps

COUNTY COUNCIL COMMITTEES
(concerned with health services)

1. Health Committee
   (a) General Purposes Sub-Committee

2. Education Committee responsible for School Health Service

HEALTH CENTRES (on 31.12.70)

1. Neyland: Charles Street

2. Narberth: Eastgate House (temporary centre)

3. Haverfordwest: Winch Lane (opened on 12.10.70)

In addition, health centres were being planned at Fishguard, Tenby and Hakin. At the end of the year, arrangements were finalised for the commencement of the building of a permanent health centre at Narberth in 1971.

SECTION I

VITAL STATISTICS FOR 1970

1. AREA

The area of the County, including inland water, is 393,007 acres.

2. POPULATION

1911 - By Census	90,014
1921 - By Census	91,580
1931 - By Census	86,020
1938 - Estimated Mid-Year ...	83,200
1945 - Estimated Mid-Year ...	82,690
1951 - By Census	90,906
1955 - Estimated Mid-Year ...	93,800
1959 - Estimated Mid-Year ...	94,600
1961 - By Census	93,980
1962 - Estimated Mid-Year ...	93,050
1963 - Estimated Mid-Year ...	94,660
1964 - Estimated Mid-Year ...	95,350
1965 - Estimated Mid-Year ...	95,920
1966 - By Census	96,530
1967 - Estimated Mid-Year ...	98,330
1968 - Estimated Mid-Year ...	100,360
1969 - Estimated Mid-Year ...	101,150
1970 - Estimated Mid-Year ...	101,200

3. FINANCIAL

The product of a penny rate for the financial year 1970/71 was £18,240. Rateable value of the County on the 1st April, 1970, was £4,321,114.

4. GENERAL OBSERVATIONS

With the closure of the Royal Naval Air Station at Brawdy and the School of Artillery at Manorbier and the reaching of the completion stage of the construction of the two thousand megawatt Pembroke Power Station, a reduction in the population of the County was expected in 1970: the Registrar General has, however, estimated that, at mid year, there was an increase of fifty over the previous year's population.

In the summer months, the population continues to be augmented by a considerable influx of holiday visitors and there were indications in 1970 of a limited extension of the summer tourist season.

According to available information, only thirteen immigrants, including one non-European, entered the County in 1970.

Despite a slight decrease in the live birth-rate, the rate remained higher than the figure for England and Wales. The adjusted birth rates were approximately the same in the rural and the urban districts: the highest rate was in the Pembroke borough and the lowest in the Narberth urban district. There were nineteen fewer illegitimate births than in 1969.

There was an increase in the infant mortality rate which was slightly higher than the national figure for England and Wales. The peri-natal mortality rate increased slightly over the previous year and was also higher than the national figure. It is, however, important to remember that, in a County with a comparatively small population, fluctuations of vital statistics are not always significant.

The adjusted death rate was slightly higher than in the previous year and remained above the national figure. I am pleased to report that there was no maternal death in 1970.

A number of features in the mortality statistics for the year cause concern. The increase in deaths due to motor vehicle accidents from thirteen in the previous year to twenty-four in 1970 is a sad confirmation of the need for more attention to road safety. As in other areas of England and Wales and in other mainly industrial countries, diseases of the heart and blood vessels and cancer continued to be the main causes of death. The total number of deaths in the County due to cancer was 250 as compared with 217 in the previous year. There was an increase of seven in the deaths from lung cancer: almost eight times as many men died of this disease as women. There was a marked increase in deaths from accidents: from thirty-three in 1969 to seventy in 1970. There were six cases of suicide.

5. (i) DETAILED STATISTICS

Live Births	Male	Female	Totals
Legitimate	811	754	1,565
Illegitimate	48	56	104
Totals	859	810	1,669
Still Births			
Legitimate	15	9	24
Illegitimate	4	-	4
Totals	19	9	28

Live birth rate per 1,000 population (Crude) ...	16.5
(Adjusted) ...	17.8
Still-birth rate per 1,000 total live and still-births	16.5
Total live and still-births	1,697
Infant deaths (deaths under 1 year)	33
Infant Mortality Rates:	
Total infant deaths per 1,000 total live births	19.8
Legitimate infant deaths per 1,000 legitimate live births	20.4
Illegitimate infant deaths per 1,000 illegitimate live births	9.6
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	13.2
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	12.6
Peri-natal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	28.9
Maternity Mortality (including abortion):	
Number of deaths	Nil
Rate per 1,000 total live and still-births ...	Nil

(ii) CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE:

Cause of Death	Total All ages M.	Total All ages F.	Under 4 weeks M.	Under 4 weeks F.	4 weeks & under 1 year M.	4 weeks & under 1 year F.	1-4 M.	1-4 F.	5-14 M.	5-14 F.	15-24 M.	15-24 F.	25-34 M.	25-34 F.	35-44 M.	35-44 F.	45-54 M.	45-54 F.	55-64 M.	55-64 F.	65-74 M.	65-74 F.	75 & Over M.	75 & Over F.
1. Enteritis and other Diarrhoeal Diseases	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Tuberculosis of Respiratory System	4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	-	-	-
3. Late effects of Respiratory Tuberculosis	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1	-
4. Other Tuberculosis	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
5. Other Infective and Parasitic Diseases	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-
6. Malignant Neoplasm, Buccal Cavity, etc.	4	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1	1	1	1
7. Malignant Neoplasm, Oesophagus	7	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	4	2	2	-
8. Malignant Neoplasm, Stomach	19	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	9	3	8	4	2	6
9. Malignant Neoplasm, Intestine	20	23	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	4	4	7	11	7	7
10. Malignant Neoplasm, Larynx	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
11. Malignant Neoplasm, Lung, Bronchus	47	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11	-	12	1	18	1	6	4
12. Malignant Neoplasm, Breast	-	16	-	-	-	-	-	-	-	-	-	-	-	1	-	3	-	2	-	3	-	5	-	2
13. Malignant Neoplasm, Uterus	-	15	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	4	-	2	-	5	-	2
14. Malignant Neoplasm, Prostate	8	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	3	-	4	-
15. Leukaemia	2	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
16. Other Malignant Neoplasms	28	29	-	-	-	-	-	-	-	1	-	-	1	-	2	2	1	2	10	6	9	4	5	14
17. Benign and Unspecified Neoplasms	4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	-	1
18. Diabetes Mellitus	5	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	-	4	1	2
19. Avitaminoses, etc.	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
20. Anaemias	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
21. Other Endocrine etc. Diseases	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
22. Other Diseases of Blood, etc.	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-
23. Multiple Sclerosis	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-
24. Other Diseases of Nervous System	7	4	-	-	-	-	-	-	2	-	-	1	-	-	-	-	-	-	1	-	-	1	4	2
25. Meningitis	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
26. Active Rheumatic Fever	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
27. Chronic Rheumatic Heart Disease	5	11	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	4	3	1	5
28. Hypertensive Disease	8	16	-	-	-	-	-	-	-	-	-	-	-	1	2	-	-	2	1	3	6	2	7
29. Ischaemic Heart Disease	206	128	-	-	-	-	-	-	-	-	-	-	1	3	-	25	1	31	13	85	24	62	89
30. Other Forms of Heart Disease	33	36	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	3	3	9	12	18	21
31. Cerebrovascular Disease	84	115	-	-	-	1	-	-	-	-	2	-	-	-	-	1	5	4	10	7	33	25	34	77
32. Other Diseases of Circulatory System	30	39	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	3	-	6	6	19	33
33. Influenza	12	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	2	4	3	6	2
34. Pneumonia	39	40	2	-	1	1	1	-	-	-	-	-	-	-	-	-	1	-	3	2	15	6	16	31
35. Bronchitis and Emphysema	37	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	8	-	14	1	14	5
36. Asthma	3	4	-	-	-	-	-	-	-	-	1	1	-	-	-	-	1	-	-	-	1	1	-	2
37. Other Diseases of Respiratory System	9	3	-	-	1	1	-	-	-	-	-	-	1	-	-	-	-	-	1	-	6	1	-	1
38. Peptic Ulcer	3	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	2	-	1	-
39. Intestinal Obstruction and Hernia	3	3	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	2
40. Cirrhosis of Liver	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
41. Other Diseases of Digestive System	6	5	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	2	-	3	2	-	3
42. Nephritis and Nephrosis	5	6	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	1	2	2	-	-	3
43. Hyperplasia of Prostate	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	3	-
44. Other Diseases, Genito-Urinary System	6	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	2	-	3	3
45. Diseases of Skin, Subcutaneous Tissue	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
46. Diseases of Musculo-Skeletal System	-	3	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	1
47. Congenital Anomalies	3	3	1	2	1	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
48. Birth Injury, Difficult Labour etc.	6	4	6	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
49. Other Causes of Perinatal Mortality	2	2	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
50. Symptoms and Ill-Defined Conditions	3	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	7
51. Motor Vehicle Accidents	14	10	-	-	-	-	-	1	1	2	6	3	2	2	1	1	1	-	1	1	2	-	-	-
52. All Other Accidents	24	22	-	-	1	1	-	-	1	-	3	1	2	-	4	-	4	-	3	1	2	4	4	15
53. Suicide and Self-Inflicted Injuries	4	2	-	-	-	-	-	-	-	-	-	-	1	1	1	-	-	1	2	-	-	-	-	-
54. All Other External Causes	3	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-
Totals	720	610	14	8	6	5	4	1	4	3	12	8	7	6	19	12	58	21	123	57	252	138	221	351

(iii) DISTRICT COUNCIL, PEMBROKE COUNTY AND NATIONAL COMPARATIVE VITAL STATISTICS (USING APPROPRIATE AREA COMPARABILITY FACTORS):

	Area in Acres	Estimated mid-year Population for 1970	Live Births No.	Live Births Adjusted Rate per 1,000	Deaths No.	Deaths Adjusted Rate per 1,000	Infant Mortality No.	Infant Mortality Rate per 1,000 Live	No. of Maternal Deaths and Rate per 1,000 Live and Still Births	
URBAN										
Fishguard and Goodwick U.D.C. ...	1,841	4,970	69	16.5	81	15.6	-	-	-	-
Haverfordwest M.B.	1,404	10,630	198	16.0	132	12.0	5	25.3	-	-
Narberth U.D.C.	122	1,040	14	15.8	33	20.0	-	-	-	-
Neyland U.D.C.	484	2,420	44	19.1	29	13.1	-	-	-	-
Milford Haven U.D.C.	2,404	13,730	225	15.7	134	14.0	7	31.1	-	-
Pembroke M.B.	4,679	14,390	300	22.0	194	14.6	4	13.3	-	-
Tenby M.B.	1,090	4,590	62	15.1	66	11.5	1	16.1	-	-
Total	12,024	51,770	912	17.8	669	13.8	17	18.6	-	-
RURAL										
Cemaes R.D.C.	79,576	8,240	113	16.6	142	15.1	1	8.8	-	-
Haverfordwest R.D.C.	172,310	23,450	366	17.8	262	13.1	8	21.8	-	-
Narberth R.D.C.	80,237	10,020	150	17.3	172	15.8	1	6.7	-	-
Pembroke R.D.C.	48,860	7,720	128	19.4	85	13.1	6	46.8	-	-
Total	380,983	49,430	757	17.7	661	14.2	16	21.1	-	-
Whole County	393,007	101,200	1,669	17.8	1,330	13.9	33	19.8	-	-
England and Wales				16.0		11.7		18.2		0.18

SECTION II

LOCAL HEALTH SERVICES PROVIDED BY THE COUNTY COUNCIL UNDER THE NATIONAL HEALTH SERVICE ACT

1. CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE

Expectant and Nursing Mothers

The health services for these mothers are particularly important. They are provided by the three sections of the National Health Service and their local provision is in accordance with the national pattern. The medical ante-natal care is undertaken by general practitioners, supported, when required, by the facilities at the hospital consultant ante-natal clinics. The increasing functional unification of the local maternity services has been facilitated in recent years by the schemes for the attachment of local authority nurses, including domiciliary midwives, and health visitors to general practices and by the improved liaison, particularly in the care of early discharged maternity patients and their babies, between the appropriate staffs of the maternity units of local hospitals and of the County Health department. The trend of an increasing proportion of births in hospital, particularly at the consultant obstetric unit at the County War Memorial Hospital, Haverfordwest, continued in 1970. The latter unit is intended primarily for mothers specially selected for hospital confinement because of the existence of factors capable of leading to complications in the mother or child necessitating specialised medical care during or following birth.

In 1970, the long awaited report on domiciliary midwifery and maternity bed needs, prepared by a Sub-Committee of the Standing Maternity and Midwifery Advisory Committee of the Central Health Services Council, was published. The conclusions and recommendations in the report emphasise the greater safety of hospital confinement for mother and child and support the present trend towards a hundred per cent hospital confinement rate and a functional and administrative unification of the maternity services, based primarily on the hospitals.

The proposed new general hospital at Withybush, Haverfordwest, will have much improved obstetric or maternity facilities, but, in accordance with one of the recommendations of the afore-mentioned report, it is advisable to have a paediatrician readily available for the full clinical examination of every newly born infant. The latter need has been emphasised to the Welsh Hospital Board.

The demand for 'preparation for child-birth and instruction in mothercraft' classes continued to increase in 1970. A series of classes, organised by the staff of the County Health department, were held at Haverfordwest, Hakin, Pembroke Dock, Tenby, Fishguard and Narberth: 862 expectant mothers attended as compared with 842 and 613 in 1969 and 1968 respectively. The syllabus of the classes included an explanation of the development of a baby, health precautions in pregnancy, preparation for the confinement, the simple physiology of birth and the care of a baby.

There was only one meeting of the Maternity Liaison Committee in 1970: the subjects discussed

included the investigation of peri-natal deaths, the afore-mentioned report on domiciliary midwifery and maternity bed needs, and the local co-operation in the maternity services.

Since the national obstetrical survey in 1958, there have been considerable advances in obstetrical and paediatric techniques and, to assist in the assessment of the effect of these advances and to indicate defects in the present maternity services, a further British Births Survey was arranged by the National Birthday Trust and the Royal College of Obstetricians and Gynaecologists during the week beginning the 5th April, 1970: the staff of the County Health department participated fully in the survey and it is hoped that the national results, when available, will be particularly helpful.

Increasing emphasis is being given in the maternity services to the need for planned parenthood and the avoidance of unwanted children. Society is now accepting that family planning is, in certain respects, a public responsibility. The support given by the County Council to the local development of family planning services is described in the appropriate section of this report.

Children under School Age

There were no major local changes in the health and related services for this group during the year. It is unnecessary to repeat the account in the previous annual report of the considerable past development of child health services and of the remaining difficult problems including those concerned with the mental, emotional, physical, linguistic and

social development during the pre-school period of life. Increasing attention is being given to these problems both locally and nationally.

The Welsh Hospital Board has not yet been able to provide in south-west Wales a hospital clinic for the detailed assessment of handicapped children and, locally, this latter work is undertaken, as far as possible, at the developmental and handicap assessment clinics organised by the County Health department at Haverfordwest, Pembroke Dock and Tenby. These clinics are primarily for pre-school children and referrals continue to be made by the consultant paediatrician, his clinical assistants, family doctors, local health authority doctors, and health visitors. Dr. M. Lawlor continued as medical officer at these clinics. Despite the absence of a special hospital clinic, Dr. K.R. Keay, the local consultant paediatrician, continued to provide helpful clinical reports on a number of handicapped children.

The total attendances during the year at child health clinics and centres in the County was 27,238 as compared with 28,370 in 1969: with the increasing attachment schemes this decrease was expected. Voluntary helpers kindly assisted at a number of the clinics and centres and their work deserved commendation.

In 1970, the Standing Medical Advisory Committee of the Central Health Services Council issued a helpful memorandum on a clinical condition known as the 'battered baby or child' syndrome which results from serious physical maltreatment of young children by their parents or other adults. This condition is being increasingly recognised in the United Kingdom

and in the United States of America. Though there have been no proved local cases in recent years, a special meeting of doctors, police and social workers was held at the County Health department on the 26th June to review the problem and to ensure, as far as possible, that the necessary preventive, diagnostic, treatment and social case-work facilities are available locally.

The routine testing of babies in the County for phenylketonuria was continued in 1970 but no definite case was detected. In December, arrangements were made at the request of the Welsh Hospital Board and Dr. R.F. Mahler, Professor of Medicine, Welsh National School of Medicine, for the replacement of the Guthrie blood test method by the Woolf test which is undertaken at the Cardiff Royal Infirmary and should facilitate the detection of other inborn errors of metabolism in addition to phenylketonuria.

Care of Premature Babies

The following statistics of premature births (5lbs. 8ozs. and less) in the County during the last three years are of interest:

Year	Premature Live Births		Died		Premature Still-births	
	Home	Hospital	1st day	2nd-28th day	Home	Hospital
1968	7	78	4	8	Nil	10
1969	6	86	8	6	1	16
1970	4	92	4	6	1	13

Of the four premature babies born at home, two failed to survive - one of these babies weighed only 1lb. 10ozs.

The Oxygenaire portable incubator was used during the ambulance transport, mainly inter-hospital, of twenty-four babies.

The local incidence of premature live births in 1970 was 5.7% of notified live births as compared with 5.5% in 1969 and 4.9% in 1968.

Congenital Malformations

The national voluntary scheme of notifying the Registrar General of congenital malformations detected at birth was initiated in 1964. The main purpose of the scheme is to facilitate the early detection of the causes of these malformations, such as the use of particular drugs by expectant mothers or the contraction of a virus infection during pregnancy. The County Health department continued to participate in the scheme during 1970. Details of malformations observed in newborn babies are notified to the County Medical Officer of Health by the doctor or midwife in attendance, and a monthly statistical return of these notifications is sent to the General Register Office.

There was a welcome reduction in the number of cases of congenital malformations reported in Pembrokeshire in 1970: twenty-two cases as compared with thirty-three in 1969.

Classification of Malformations in 1970

Central Nervous System	Sight and Hearing	Limbs	Alimentary	Other Sites
9	2	7	1	3

Distribution of National Welfare Foods and Dried Milk

The administration of this scheme is undertaken at the County Health department and is under the supervision of Mr. D.H. James, a senior clerk.

At the end of the year, national welfare foods were available at forty-nine centres, including clinics, in the County. The distribution at thirty-six of these centres was undertaken by voluntary workers: their valuable assistance continued to be much appreciated.

The following distribution statistics show a decrease in the demand for national dried milk, cod liver oil and orange juice, and an increased demand for vitamin tablets and branded dried milk as compared with the previous year:

	1969	1970
Packets of National Dried Milk ...	10,302	7,661
Bottles of Orange Juice	27,751	27,718
Bottles of Cod Liver Oil	1,636	1,465
Packets of Vitamin Tablets ...	951	1,024
Packets/Tins of Branded Foods ...	90,582	92,365

Dental Care

Due to the resignation of two full-time dental officers, there was a decline in 1970 in the numbers of pre-school children and expectant and nursing mothers inspected and treated in the school dental clinics. As mentioned in previous reports, a considerable proportion of such children and mothers are treated by local dental surgeons participating in the general dental service.

Dental caries or decay remained prevalent among children in the County. Advice on preventive measures is given by all dental officers to the parents attending with children at the dental clinics. Parents are also advised that every child at the age of three years should be taken to a dental surgeon for examination of the teeth and, if necessary, treatment.

All the dental officers are disappointed by the failure to initiate a scheme for the fluoridation of the major local water supplies. There continues to be strong local opposition to the adoption of the latter preventive measure.

Details of the school dental service in 1970, prepared by the Principal School Dental Officer, are included in the separate report of the school health service.

The following annual statistics, which do not include the dental inspection and treatment of school children, are of interest:

	Expectant and Nursing Mothers	Pre-school Children
First inspections ...	38	284
Total visits to clinics for inspections and treatment	107	290
Number of fillings ...	47	143
Teeth extracted ...	8	71
Scaling and polishing	24	4
Number of completed courses of treatment ...	20	72
Number of dentures provided	2	-
General anaesthetics	6	31

Family Planning

The two local branches of the Family Planning Association continued to operate the family planning service in Pembrokeshire in accordance with the provisions of the National Health Service (Family Planning) Act, 1967, and the appropriate official circulars. During the financial year 1970/71, the County Council made a grant of £2,850 towards the cost of the service, and continued to provide free use of the clinic premises, including heating, lighting, cleaning and storage facilities.

During 1970, family planning clinics were held at the County Council clinics at Haverfordwest, Hakin, Pembroke Dock and Tenby. There were 3,281 attendances at the clinics, and 597 new patients were registered. The total number of family planning clinic sessions during the year was 156.

Family planning advice and the related medical examinations are available free of charge to all persons attending the clinics. Prescriptions and supplies are provided free for persons with a medical need. The determination of the latter requirement is primarily the responsibility of the lady doctors at the family planning clinics.

In 1970, the demand for advice continued to increase. Advice on sterility and sex problems in marriage is available in addition to family limitation guidance.

The co-operation of the officials of the aforementioned branches and of Mrs J.E. Williams, Organising Secretary of the Mid and West Wales Branch of the Family Planning Association, was very helpful to this department. On the 16th November, 1970, the progress of the local family planning service was reviewed at a meeting attended by the Chairman of the Health Committee and the above-named officials.

Details of the arrangements for the taking of cervical cytology smears at the local family planning clinics are given in the section relating to prevention, care and after-care of illness.

Care of Unmarried Mothers and their Children

The social workers of the St. David's Diocesan Moral Welfare Committee continued to be responsible for the major part of the social work for unmarried mothers and their children. The committee received a grant of £250 from the County Council in 1970.

The social workers arranged for the admission of

ten unmarried mothers to appropriate hostels during the year.

There were 108 illegitimate births in Pembrokeshire in 1970, as compared with 127 in the previous year.

2. DOMICILIARY MIDWIFERY

The difficulties of maintaining an efficient domiciliary midwifery service were described in recent annual reports.

In 1970, a Sub-Committee of the Standing Maternity and Midwifery Advisory Committee issued the report on domiciliary midwifery and maternity bed needs: in view of the conclusions, described in the previous section on expectant and nursing mothers, it is very likely that facilities will be provided for all confinements to take place in hospital and the present domiciliary midwifery service will be integrated with the hospital maternity service.

As in other parts of England and Wales, the reduction in domiciliary confinements continued: the proportion of local births in hospital was 97.2% in 1970 as compared with 95.4%, 92.9% and 90.9% in 1969, 1968 and 1967 respectively: the total number of local home confinements was only forty-eight in 1970.

No domiciliary midwife is employed on full-time midwifery in this County. Of the twenty-two district nurses and district nurse/health visitors qualified as midwives and 'on call' for domiciliary midwifery for varying periods during 1970, fifteen attended less than five home confinements during the year.

Eight 'gas and oxygen' (Entonox) analgesia machines were available for use in domiciliary midwifery. Trilene analgesia was used by a midwife on only one occasion during the year.

The co-operation between the domiciliary midwives, family doctors, and the staff of the local hospital maternity units continued to improve: in nine practices, the midwives attended ante-natal clinics organised by the family doctors and, in all areas, they participated in the care of mothers and babies on early discharge from maternity units.

Four domiciliary midwives attended approved refresher courses at Cheltenham and Bristol. Two such midwives were seconded in 1970 for short periods of experience at a local hospital maternity unit.

The County Nursing Officer is the non-medical supervisor of midwives.

The following statistics relate to the midwifery services in this County in 1970:

Number of live and still-births	1,697
Number of such births in hospital (including transfers from other areas)	1,649
Number of such births at home (including transfers from other areas)	48
Number of home births attended by private midwives	-
Number of still-births in hospital	27
Number of still-births at home	1
Number of midwives (part-time) employed by the County Council	29
Number of hospital midwives in practice on 31st December, 1970	28
Number of midwives in private practice on 31st December, 1970	-
Number of maternal deaths in hospital	-
Number of maternal deaths at home	-
Number of mothers who received Entonox analgesia at home	26
Number of mothers who received pethidine from nurses during confinement at home	29
Number of mothers who received trilene from nurses during confinement at home	1

Number of inspections of midwives by County Nursing Officer:

	Routine	Special
Hospitals	3	4
County district nurse/midwives ...	44	90
Private midwives	-	-
Private nursing homes	-	-

3. HEALTH VISITING

Despite difficulties of recruitment, an adequate health visiting service was maintained in the major part of the County during 1970. All the health visitors undertake school nursing duties.

Considerable emphasis continues to be placed nationally on the need for health visitors and other community nurses to work in close partnership with family doctors. In 1970, Dr. D. Malins, the deputy county medical officer of health, who has had considerable experience of general practice in the County, continued his detailed reviews of the local arrangements in co-operation with Miss Young, the county nursing officer. The family doctors and the community nurses co-operated fully and, by the end of the year, initial or revised schemes of attachment of health visitors and district nurses were in full operation in most areas of the County including Haverfordwest, Milford Haven, Hakin, Neyland, Fishguard, Newport, St. Davids, Solva, Tenby and Saundersfoot. A provisional scheme was in operation in the Narberth area. The arrangements in the Pembroke borough and the eastern part of the Cemaes rural district presented difficulties and no definite schemes were formulated in these two areas.

In accordance with the Welsh Office Circular 81/70 (Wales), based on the report, issued in 1969, of the Working Party on Management Structure in the Local Authority Nursing Services, the County Council reviewed and defined, during the latter part of the year, the nursing managerial structure of the local community nursing services, including health visiting, district nursing and domiciliary midwifery: Miss

Young, the county nursing officer, will undertake the duties specified for a chief nursing officer; Miss M. Griffiths was appointed as group adviser health visitor and her duties include certain first-line nursing management; and it was later confirmed that the management role of Miss L.B. Williams, the district nurse/midwife/health visitor and group adviser in health education, also includes certain first-line nursing management. Increasing attention is being given nationally to the introduction of modern management practice into the health services.

All health visitors are encouraged to undertake group health education and further progress was possible in 1970. Details are available in the section of the report dealing with health education. Their educational work at the classes for expectant mothers on 'preparation for childbirth and mothercraft' deserves commendation. At some of the latter classes, district nurse/midwives also participated.

On the 16th February, 1970, there was a good attendance of health visitors and other community nurses at an interesting seminar at the County Health department: the sessions included talks and discussions on child development, the early diagnosis of congenital dislocation of the hip, emotional problems in childhood, and a particularly helpful symposium on the attachment of health visitors and district nurses to general practices: thanks are due to the speakers who included Dr. Evan Davies, the consultant child psychiatrist, Mr. R.L. Rees, the consultant orthopaedic surgeon, and Dr. C.L. Perry, a member of a group practice at Haverfordwest: in conjunction with the seminar, Miss L.B. Williams

arranged an exhibition of posters, leaflets and other aids in health education.

Three health visitors attended refresher courses at Cardiff, Swansea and Shrewsbury during 1970: Miss M. Griffiths, the group adviser health visitor, attended the International Conference on Alcoholism and Addiction, held at Cardiff in September.

In April, three health visitor students were attached to the department for special experience. In June, we were pleased to welcome Mrs D.L. Calais, who is in charge of the Public Health Nursing Services in the Seychelles: as a Fellow of the World Health Organisation, she wished to study the organisation of the health visiting and other community nursing services in the County.

The following statistics of health visiting work in 1970 are of interest:

	No. Visited
Children born 1970	1,595
Children born 1969	1,626
Children born 1965-1968	5,462
Persons aged 65 years and over	1,022
Mentally disordered persons	194
Miscellaneous patients requiring after-care visits	224
Tuberculous patients	109
Households visited on account of infectious diseases	119
Total number of visits	29,628

4. HOME NURSING

There continued to be a considerable demand for this service in all areas of the County. In 1970, the main feature was the considerable progress in the revision and development of the arrangements for the attachment of community nurses to general practice. The progress is outlined in the report on health visiting. The contribution of the local district nursing service to the care of discharged hospital patients continued to increase and this trend facilitated the earlier discharge of such patients.

The staffing of this service presented few difficulties and there was no shortage of applicants for the few vacancies which occurred during the year. Four state enrolled nurses were employed on district nursing during the year. The need for nursing auxiliaries on the district was kept under review, but, a decision on their possible recruitment was postponed because of the difficulties in their employment in a rural County and the easy local availability of qualified nurses.

The approved training scheme, initiated in September, 1968, continued and, in 1970, five local district nurses were successful in obtaining the national certificate in district nursing for state registered nurses. During the last quarter of the year, modified district nursing training facilities for state enrolled nurses were initiated in the County and four such nurses were prepared for the national certificate examination in January, 1971. The efforts of the senior and experienced members of the nursing staff, who arranged and undertook part of the appropriate instruction required by the afore-

mentioned schemes, deserve to be commended.

Many of the district nurses attended a local study day organised by the Pembrokeshire branch of the Royal College of Nursing at the County War Memorial Hospital, Haverfordwest, on the 31st October, and a talk and demonstration on modern developments in first aid at the County Health department on the 29th September. As part of the in-service training, notes were distributed to district nurses on appropriate subjects including vaccination against rubella, prevention of home accidents, and co-operation with hospital social workers.

As in other recent years, appreciable time was devoted to the home nursing of the elderly and, in addition, some nurses, particularly in the rural areas, continued to visit known elderly infirm people particularly those living on their own.

By arrangement with the Marie Curie Memorial Foundation, eleven patients suffering from late cancer received assistance particularly to provide special comforts. The arrangements were made by Miss Young, the county nursing officer.

The following statistics are an indication of the home nursing work during the year:

Total number of patients nursed during the year	3,982
Number of children under 5	297
Number of persons 65 years of age or over ...	2,110
Total number of home nursing visits	103,900

5. VACCINATION AND IMMUNISATION

The introduction of a scheme for vaccination against rubella (german measles) was the major development in 1970. The disease is usually a mild one, but, unfortunately, if a pregnant woman develops the disease, there is a serious risk that, as a consequence of the transmission of the infection to the foetus in the uterus, either the baby will eventually be still-born or born with one or more congenital defects or malformations such as deafness, congenital heart disease and eye cataracts. The danger is greatest during the first three months of pregnancy. Live attenuated rubella virus vaccines have been developed in recent years in various countries and, in September, 1970, an initial limited supply of one of these vaccines (Cendehill strain) was made available locally for the immunisation of thirteen year old girls. It was announced that the scheme would be extended to all girls between their eleventh and fourteenth birthdays when adequate supplies of vaccine become available. The intention is to protect such girls against rubella before they reach the normal child bearing age and thus ultimately reduce the incidence of congenital defects or malformations in the population. The local arrangements for the scheme were made in the County Health department and, by the end of 1970, 573 thirteen year old girls in the County had been vaccinated against the disease.

As compared with the previous year, higher primary immunisation rates against diphtheria, whooping cough, tetanus and poliomyelitis were achieved among local children, but, there was a decline in the number of booster injections at school

entry due primarily to organisational difficulties caused by the introduction of the rubella vaccination scheme in the autumn term. The family doctors are undertaking an increasing proportion of the primary immunisations against the diseases listed in the first sentence of this paragraph.

There was an appreciable increase in the number of children vaccinated against measles but, generally, the response from parents to this scheme continued to be somewhat disappointing.

The staff of the County Health department continued to be responsible for the distribution of smallpox vaccine to all family doctors, hospitals and defence establishments in the County: in 1970, 4,486 doses were issued.

The designated centre in south-west Wales for vaccination against yellow fever continued to be at the County Health department: during the year, 266 persons, including seamen, were vaccinated against this disease as compared with 208 in 1969.

During the summer months of 1970, the rapid extension of cholera, due to the El Tor biotype, to the Mediterranean littoral of Asia Minor and North Africa and to West Africa caused concern due to the number of travellers to and from these areas either on holiday or on business. This led to an increased local demand for vaccination against this disease and to the requirement, with effect from 18th September, 1970, of international certificates of vaccination against cholera for travellers on arrival in the United Kingdom from the cholera infected countries. Fifty persons proceeding to the latter countries were

vaccinated against this disease in this department and the family doctors also vaccinated a considerable number of such persons.

The following vaccination and immunisation statistics for 1970 relate to children under sixteen years of age:

Number of children who received a primary course of poliomyelitis vaccine (oral) ...	1,690
Number of children who received a booster dose (oral) (mainly at school entry) ...	1,211
Number of children protected against whooping cough	1,857
Number of children who received a primary course of immunisation against diphtheria and tetanus	1,885
Number of children who received a booster injection against diphtheria and tetanus (mainly at school entry)	1,333
Number of successful primary vaccinations against smallpox in children	800
Number of re-vaccinations against smallpox in children	188
Number of children vaccinated against measles	1,123
Number of girls vaccinated against rubella	573

The statistics of the scheme for B.C.G. vaccination against tuberculosis are in the section of the report dealing with the prevention, care and after-care of illness.

6. COUNTY AMBULANCE SERVICE

An appreciable increase in the demands on this service was a feature of the year: as compared with

1969, an additional 2,047 patients were carried and there was an increase of 20,406 in the total mileage of ambulances and sitting case cars. At first sight, these figures may be a cause for concern but annual comparisons with ambulance statistics of other counties in Wales show repeatedly that fewer local patients per thousand population are carried in ambulances and sitting case cars than in other counties. The local increases are in accordance with national trends and reflect the increasing use of the hospital service, the development of special treatment centres outside the County and the reduced availability of public transport in the rural districts. In Pembrokeshire, the need to take many patients outside the County for hospital treatment is one of the major problems in the management of the service.

1970 was a year of marked controversy concerning the hospital accident and emergency services available to the population of the County: the general public and local doctors became increasingly alarmed by potential inadequacies in the present and future planned provision of such services. Their fears were aggravated by the partial closure, due to staffing difficulties, of the casualty department of the County War Memorial Hospital, Haverfordwest, which commenced on the 30th September. The County Ambulance Service makes an important contribution to the accident and emergency services and, for this and other reasons, the County Council took a keen interest in the controversy. Following representations by a deputation from the Council, and requests from interested authorities and organisations, the Secretary of State for Wales arranged for a review of the Health Services in Pembrokeshire with particular reference to the accident and emergency services: this

was undertaken in November, 1970, by Dr. R.T. Bevan, Chief Medical Officer, and Dr. W.C.D. Lovett, Medical Officer, Welsh Office.

Their report was issued early in 1971 and, at the time of writing, certain recommendations are still under detailed consideration. Detailed comments on the report will thus be included in the next annual report. Fortunately, it became possible to re-open on a full-time basis the afore-mentioned casualty department with effect from the 22nd February, 1971.

Some of the difficulties in the local accident and emergency services are a reflection of national problems, such as the shortage of casualty medical staff, but there are specific local problems, particularly the distance and the travelling time from the major industrial developments on the shores of the Milford Haven to the designated district general hospital at Glangwili, Carmarthen. The latter problems were described in evidence given by the County Medical Officer of Health and County Ambulance Officer to members of a special Committee of the Welsh Hospital Board who visited Haverfordwest on the 1st July.

The partial closure of the casualty department increased the demands on the County Ambulance Service and a reasonable service was only maintained by the willing co-operation of the personnel who accepted additional duty periods. They deserve commendation for their efforts during this period.

The Agent for A.E. Farr, Civil Engineering Co. Ltd., main contractors for the Cleddau Bridge, sent a letter of appreciation for the contribution of the

service to the care and transport of the injured persons following the collapse of the section of the bridge on the 2nd June, 1970: prompt provision of ambulance transport was possible, but, unfortunately, one of the injured men died during the journey to the West Wales General Hospital, Carmarthen, and another injured man died soon after arrival at the latter hospital: two other men were found dead in the wreckage of the bridge.

The operation of the combined fire and control room became more difficult with the increasing fire risk, resulting from industrial developments, in the County. Towards the end of the year, the County Council approved the necessary arrangements for a full-time ambulance control room to be established with effect from the 4th January, 1971, at the County Health department, Haverfordwest. Dr. Bevan and Dr. Lovett, in their above-named report, strongly supported this decision.

Considerable attention was given during the year to the training of ambulance-men in accordance with the recommendations of the Working Party on Ambulance Training (Part I), described in the previous report. Ten ambulance-men, including three recruits, attended appropriate courses at the Glamorgan Ambulance Training School, Bridgend: it is pleasing to report that all these students were successful in their examinations at the end of the courses. The helpful co-operation of the Glamorgan County Council and of the appropriate staff of the Glamorgan County Health department in providing these training facilities was much appreciated. Mr. P.J. Hunt, the County Ambulance Officer, acted as guest instructor at the school on several occasions: at the invitation of the Department

of Health and Social Security, he also was a member of the directing staff at a short course for Ambulance Service Instructors at the Ambulance Training School, Wrenbury Hall, Cheshire.

Delays in the delivery of replacement ambulances, described in the previous annual report, continued in 1970. Due to difficulties in the motor industry, the delay has become as long as twelve months.

In recent years, the demands of the service have required the increasing employment of full-time ambulance-men and the use of personnel of the voluntary aid societies has correspondingly declined. However, a few voluntary personnel of the St. John Ambulance Brigade and the British Red Cross Society continued in 1970 to give helpful assistance in the ambulance service, particularly at Milford Haven, Fishguard and Pembroke Dock.

The following statistics of the Ambulance Service for 1970 are of interest:

Station	Patients Str.	Patients Sit.	Total No. of Patients	Miles Travelled	Average Miles per Case
Haverfordwest No. 1	523	1,637	2,160	32,294	15.0
Haverfordwest No. 2	883	3,693	4,576	35,224	7.7
Haverfordwest No. 3	15	1,505	1,520	63,197	41.5
Tegryn	147	1,465	1,612	19,884	12.3
Fishguard	423	2,166	2,589	47,317	18.3
Milford Haven	489	3,218	3,707	29,433	7.9
Pembroke Dock No. 1	386	1,491	1,877	39,801	21.2
Pembroke Dock No. 2	547	2,345	2,892	32,301	11.1
Tenby No. 1	322	1,594	1,916	28,282	14.8
Tenby No. 2	417	1,366	1,783	24,966	14.0
Totals	4,152	20,480	24,632	352,699	14.3

The following figures illustrate the use of the County Ambulance Service, with the exception of the Sitting Case Car Service, since 1950:

Year	Patients	Miles	Average Miles per case
1950	9,516	186,007	19.54
1951	12,086	230,361	19.06
1952	12,540	220,296	17.57
1953	14,877	270,762	18.20
1954	16,690	280,458	16.80
1955	16,177	284,720	17.60
1956	18,214	280,542	15.48
1957	18,741	268,017	14.30
1958	18,085	264,678	14.74
1959	17,913	234,083	13.06
1960	22,294	255,472	11.46
1961	20,427	232,056	11.36
1962	21,211	241,496	11.38
1963	21,315	240,296	11.27
1964	20,610	245,581	11.91
1965	21,090	244,063	11.09
1966	21,683	274,955	12.68
1967	21,559	298,898	13.90
1968	21,437	321,606	14.00
1969	22,942	338,269	14.75
1970	24,632	352,699	14.30

The following figures illustrate the use of the Sitting Case Car Service - provided by a number of private car hire proprietors - since 1958:

Year	Journeys	Patients	Miles
1958	2,674	4,851	96,319
1959	2,898	5,191	116,525
1960	2,025	3,312	74,279
1961	2,446	3,608	91,063
1962	2,262	3,421	90,793
1963	2,564	4,335	106,605
1964	2,096	3,385	84,484
1965	1,922	3,002	81,867
1966	1,316	2,189	59,087
1967	1,120	1,761	48,916
1968	888	1,482	41,808
1969	566	862	29,432
1970	754	1,219	35,408

7. PREVENTION, CARE AND AFTER-CARE OF ILLNESS

The mental health work, an important part of the above-named service, is described later in this report.

Tuberculosis

As compared with the previous year, there was one more death from the disease and eight more notifications. These increases do not signify that the remarkable decline in the incidence of tuberculosis in the County, a feature of the past thirty years, has permanently ceased. It should be noted that, with two exceptions, the new notifications were of persons over the age of forty-five years.

In January, 1970, the final routine visit was made of the mobile unit of the mass radiography service of the Welsh Hospital Board: 3,082 persons

received chest x-rays during this visit. The afore-mentioned Board has now withdrawn the mobile units in Wales primarily because of the low incidence of tuberculosis.

On the advice of the Consultant Chest Physician, the County Council supplied, during the year, 13,605 pints of milk for the extra nourishment of tuberculous patients.

The B.C.G. vaccination scheme for thirteen year old children and contacts of tuberculous patients was continued in 1970: 1,098 children, including fifty contacts, were vaccinated against tuberculosis. Of the thirteen year old children tuberculin tested, only 9.5 per cent were found to be positive. This is a further indication of the limited incidence of tuberculosis in Pembrokeshire.

Health Education

The appreciable local development of health education has been described in recent annual reports. Further priority was given to this activity in 1970 and definite progress was made.

The main expansion was of the provision of special group health education in the secondary and grammar schools. Though a considerable amount of such education continued to be undertaken by teachers during normal teaching sessions, health visitors, assisted on occasions by a school medical officer, gave, at the request of headteachers, an increased number of talks, associated with group discussions, to senior pupils of the latter schools. In 1970, the afore-mentioned staff of this department held 481

special health education sessions at the secondary and grammar schools. Special attention continued to be given to health and social problems of current importance including the health hazards of smoking, drug dependency, personal relationships, mental health, venereal diseases, the prevention of home and other accidents and dental health. At the request of the headteachers, special day courses were held for school leavers at Tasker's School and the County Secondary School, Haverfordwest: particular attention was given by the lecturers, a health visitor and a school medical officer, to drug dependency, personal relationships, venereal diseases, population control and family planning. With the present limited availability of health visitors, it is difficult to provide special health education sessions in primary schools: in 1970, only nineteen sessions were held in such schools.

Miss L.B. Williams, the district nurse/midwife/ health visitor and group adviser in health education, continued to make a major contribution to group health education in the schools and other places. Dr. J.F. Rees, school medical officer, who has had considerable experience of general practice, is taking an increasing interest in the subject and he works in co-operation with Miss Williams: his talks and leadership of group discussions at certain of the secondary and grammar schools in the County are much appreciated.

As in other recent years, many health talks and demonstrations were given by members of the staff of the department to groups of the public: examples included talks on nutrition to a weight watchers' club at Tenby; a series of talks and discussions on health

subjects, including the abuse of drugs, at the Youth Club, Tenby; a lecture on keeping well in middle and old age to a group of business and professional ladies at Haverfordwest; and talks on the prevention of home accidents to women's organisations at Begelly and Fishguard.

The evaluation of the effect of the display of health education posters is difficult. Such posters continued to be shown at the child health clinics and centres in the County. They dealt with relevant and important subjects such as the health hazards of smoking, prevention of home accidents, water safety, prevention of accidents due to fireworks, and vaccination and immunisation. As in previous years, a considerable number of leaflets on health subjects were distributed.

In the group education, there was considerable use of audio visual aids. In 1970, thirty-two different health films were borrowed from film libraries for showing to various audiences in the County: the subjects included dental health, care of the feet, family planning, the abuse of drugs, menstruation, and the work of district nurses. At the County Health department, a library of film strips, flannelgraphs, tape-recordings and books is maintained: all deal with relevant health subjects and are used by the staff of the department particularly at sessions of group education.

During 1970, regular 'mothercraft and preparation for childbirth' classes for expectant mothers were held at Haverfordwest, Pembroke Dock, Tenby, Narberth, Hakin and Fishguard. The instructional work of the health visitors and other staff at these classes

continued to be much appreciated.

The County Council continued to give an annual grant to the Health Education Council and appreciable use was made of the literature and other health education material supplied by the latter organisation. In July, 1970, the county medical officer of health attended a short seminar, organised by the Health Education Council, at Manchester University: the subjects discussed included the present contribution of health education to the prevention of diseases and the promotion of health and the future development of this important activity.

Provision of Home Nursing Equipment

The scheme for the distribution of this equipment continued as described in my previous report - items were issued mainly from the County Health department and from the local depots organised by members of the local branches of the British Red Cross Society and the Order of St. John.

There was a further considerable increase in the demand for walking-aids for elderly patients recovering from 'strokes' and other illnesses. Other items in heavy demand were wheel-chairs, and, for incontinent patients, disposable absorbent pads and plastic sheeting. The home nursing of patients was also facilitated by the provision of foam-rings, bed-cradles and bed-rests.

The care of helpless patients at home presents particular problems. In such cases, the use of mechanical hoists is sometimes of value - seven hoists were in use during the year, including two of the

special type known as the 'steel nurse'.

Chiropody

The voluntary chiropody service for elderly and handicapped persons continued to be organised by the Pembrokeshire Old People's Welfare Committee. The latter organisation received a grant of £3,000 from the County Council during the financial year 1970/71 towards the cost of the service.

During the year, 3,973 persons received chiropody treatment through this service, as compared with 3,168 in 1969.

Due mainly to problems of recruitment, the County Council was unable to provide a direct chiropody service in 1970.

Cervical Cytology: Population Screening for Cancer of the Cervix

Facilities for this preventive measure continued to be available at the surgeries of family doctors and at the family planning clinics held at Haverfordwest, Hakin, Pembroke Dock and Tenby. The service at the latter clinics was available to women irrespective of whether they sought family planning advice.

During the year, 961 cervical smears were taken at the family planning clinics, compared with 811 in 1969.

The cervical cytology facilities at local hospital gynaecological and obstetric clinics are restricted to women referred by their family doctors

for the opinion of the consultant.

8. DOMESTIC HELP: HOME HELP SERVICE: NIGHT ATTENDANCE SERVICE

There were no major changes in these services during 1970. They continued to be mainly services for elderly infirm persons and chronic sick patients and played an important part in enabling many of these individuals to continue living in their own homes or in special housing for the elderly. The home help organisers maintained a satisfactory liaison with other services for the elderly such as meals on wheels, luncheon clubs, the provision of special housing, district nursing, hospital geriatric services, and the supplementary benefits commission of the Department of Health and Social Security. A number of requests were received for assistance in the finding of resident house-keepers for elderly infirm persons, but, unfortunately, there is a shortage of suitable women for these posts.

The measures initiated in the previous year and described in the 1969 annual report resulted in an improvement in the recruitment of home helps even in the holiday districts of Tenby and Saundersfoot.

In-service training sessions for home helps were held during the year at Haverfordwest, Hakin, Neyland, Fishguard, Crymych, Narberth and Pembroke Dock. Thanks are due to the health visitors, public health inspectors and others who participated in the instruction.

Miss M.R.F. Collins, the home help organiser, attended the week-end school of the Institute of Home

Help Organisers at Malvern in September. In April, Miss M.A.M. Smith, the assistant home help organiser, was a student at a week's residential course at Weston-Super-Mare on the organisation of home help services.

The following statistics relating to persons provided with home helps in the County during 1970 and 1969 are of interest:

	1970	1969
Elderly persons (65 years and over) ...	403	367
Younger chronic sick patients	30	47
Maternity patients	18	14
Mentally disordered patients	6	11
Other patients	38	25
Totals	495	464

There was a limited but necessary demand for the night attendance service: during 1970, fifteen applications were dealt with as compared with seventeen in the previous year.

In accordance with the integration of the personal social services, the administration of the home help and night attendance services was transferred to the newly created Social Services department at the end of the year. Miss M.R.F. Collins, the home help organiser, had been a senior member of the staff of the County Health department since April, 1951, and had made the major contribution to the successful development of these services in the County. Miss M.A.M. Smith was appointed

assistant organiser in April, 1965, and had proved herself to be a conscientious and helpful member of the staff. Their colleagues in the County Health department regretted the need for the transfer.

9. MENTAL HEALTH

The major expansion of the local community mental health services since 1960 has been described in previous annual reports. There were a number of developments during the year. Attention was given to the more detailed organisation of the existing services and to the preparation for the expected transfer of the responsibility for the education of mentally handicapped children to the Education department and for the integration of the social work and related aspects of the community mental health services with the other personal social services of the County Council. This preparation was facilitated by previous decisions of the Health Committee to organise the two junior training centres for mentally handicapped children as schools and to use 'general purpose' social workers as mental welfare officers.

The reconstructed premises of the Avenue School and Centre, including a modern workshop and facilities for industrial therapy, at Tenby, were officially opened on the 13th March, 1970, by Alderman Mrs A. Norman. On the 8th May, 1970, Mrs Eirene White (now Baroness White), the then Minister of State, Welsh Office, performed the opening ceremony at the new residential home for the elderly mentally infirm at Prendergast, Haverfordwest. Both ceremonies were well attended and demonstrated the considerable interest in the local community mental health services.

The social club (with youth club facilities) for mentally handicapped adolescents and adults, initiated at Haverfordwest in 1968, continued to be a considerable success. A similar club was initiated at Tenby on the 5th May, 1970, and, so far, the progress has been very satisfactory. Other developments included the extended use of the mental health training facilities in the department by students of applied social studies from the University of Swansea and by pupil nurses from St. David's Hospital, Carmarthen, and the increasing use of young volunteers in certain mental health services particularly the social clubs and training centres. The latter trend is being encouraged nationally.

The mentally ill patients from the County, who required in-patient treatment, were admitted to St. David's Hospital, Carmarthen. In 1970, 90 were admitted by compulsory order: 86 of the latter were admissions under Section 29 of the Mental Health Act, 1959.

The work of the child guidance clinic in the County is described in the 1970 report of the school health service. During the year, there was one particularly helpful development: Dr. Evan W. Davies, the Consultant Child Psychiatrist, initiated regular child guidance case conferences attended by social workers of the various departments of the County Council.

One meeting of the mental health and geriatric liaison advisory committee for south west Wales was held in 1970: the discussed subjects included the provision of a psycho-geriatric assessment unit for south west Wales, and closer co-operation between

local authority health and welfare services and the hospital geriatric service. The local Community Care Group Society was active during the year: on the 11th April, 1970, the Society held a successful conference, with the theme of 'Home, School and Social Work', at Haverfordwest, and a considerable number of social workers from all parts of south Wales attended; and regular evening meetings were also held and the subjects discussed included drug addiction and alcoholism and the problems of psychopaths.

Though considerable progress has been made in the local and national mental health services, many problems remain. There are still very considerable gaps in our knowledge of mental disorder and more research into mental health is necessary. Some observers consider that the biggest social problems in Great Britain are mental disorders in various forms which are possibly greater obstacles to human well-being than homelessness, unemployment and poverty. Perhaps insufficient attention is given to sociological and psychological factors in the organisation of society and industry and in schemes of social and economic development. A major problem is the mental health of the elderly and this is evidenced by the increasing number of elderly patients admitted to mental hospitals. This problem needs further attention and it is hoped that the necessary psycho-geriatric assessment arrangements will soon be established in south west Wales by the Welsh Hospital Board.

Numerous people have contributed to the appreciable development of the local community mental health services and, in view of the administrative changes mentioned in the first paragraph of this sub-

section, the time is now opportune to pay certain tributes to the following: the development would have been impossible without the understanding and continued support of the Chairman and members of the Health Committee; the staff of the County Health department and the associated mental health establishments deserve thanks for their conscientious efforts and their helpful contributions to the planning of schemes; numerous volunteers have made valuable contributions to the success of various schemes particularly the development of social clubs; and considerable encouragement and help have been received from many individuals, members of voluntary organisations, including the two local societies for mentally handicapped children, members of youth organisations, and senior pupils of secondary and grammar schools, and, not least, from the parents and families of the mentally disordered. Unfortunately, a list of the members of the staff, organisations and also individuals, who contributed to the aforementioned development, would be too long for inclusion in this short report.

SECTION III

EPIDEMIOLOGY: INFECTIOUS AND OTHER COMMUNICABLE DISEASES

The extensive and explosive outbreak of influenza, due to the Hong Kong variant of influenza Virus A2, which commenced at the end of November, 1969, ended almost abruptly during the first week of February, 1970. The peak of the outbreak appeared to be during the Christmas period. A considerable proportion of the local population was affected: a possible estimate was one-third. A number of patients were seriously ill and influenzal pneumonia was not uncommon. This outbreak was part of an epidemic of influenza in Britain and other countries.

There was a moderate incidence of measles among children during the year. The peak months were June and July, but the notifications during the summer months included a number of young holiday visitors. Measles vaccination was introduced in 1968 but the demand for this form of vaccination has been limited and many children are unprotected.

Dr. Eirian Williams, the local consultant physician, continued his studies into brucellosis: in 1970, he diagnosed the disease in twenty-nine patients from Pembrokeshire and the adjacent areas of the neighbouring counties: twelve of these patients were Pembrokeshire residents. The majority of the patients were farmers and farm workers and were probably infected by direct contact. The sampling officers of the Weights and Measures department continued to assist appreciably in the epidemiological enquiries, particularly in the sampling of milk from herds with

suspected brucella infection.

Only four cases of salmonellosis were reported during the year: in all cases the infecting organism was salmonella typhimurium: the patients presented with symptoms of food poisoning: three patients, a young married couple and young son, apparently contracted the infection on holiday in Bedfordshire, and the other patient was infected in this County but the source was not discovered.

Acute non-bacterial gastro-enteritis was comparatively common during the summer months in the busy holiday districts, but, there was some evidence that the condition was less prevalent than during the previous summer. Similar outbreaks occur in many holiday districts at home and abroad.

Shigellosis (dysentery) continued to be comparatively uncommon: there was a minor outbreak at the beginning of the year in the Hayscastle area but only one case was officially notified; and a family outbreak, with eight cases including four school children, occurred at Neyland.

There were two cases of tetanus during the year: a middle-aged housewife died of the disease which resulted from a laceration of a leg in a car park; and a fourteen year old boy made a satisfactory recovery after an infection following a lacerated knee - he had been immunised against the disease in infancy but had apparently not received a booster dose of vaccine at school entry.

Other communicable diseases caused some concern during the year: there was a slight increase in the

prevalence of infective jaundice but most cases were mild; the scarlet fever cases were mild infections; and two teenagers at Milford Haven had attacks of meningococcal meningitis; and there was one case of suspected post-infectious encephalitis associated with mumps. No local cases of diphtheria or poliomyelitis were reported in 1970.

The confirmed notifications of infectious diseases in this County in 1970 are listed in the following tables:

Disease	Haverfordwest M. B.	Tenby M. B.	Pembroke M. B.	Fishguard & Goodwick U. D.	Milford Haven U. D.	Neyland U. D.	Narberth U. D.	Haverfordwest R. D.	Narberth R. D.	Pembroke R. D.	Cemaes R. D.	TOTALS
Acute Encephalitis ...	-	-	-	-	-	-	-	-	-	-	-	-
Acute Meningitis ...	-	-	-	-	2	-	-	-	-	-	-	2
Acute Poliomyelitis ...	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	8	-	1	-	-	-	9
Infective Jaundice ...	4	3	5	26	2	-	-	41	3	-	-	84
Measles	85	23	210	28	198	7	2	84	19	38	1	695
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever ...	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	1	-	14	-	-	-	-	2	-	6	-	23
Tetanus	-	-	-	-	-	-	-	-	1	-	1	2
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	3	-	-	-	-	-	-	7	-	-	-	10
Food Poisoning	-	-	1	-	-	-	3	-	-	-	-	4
Leptospirosis	-	-	-	-	-	-	-	-	-	-	-	-
Totals	93	26	230	54	202	15	5	135	23	44	2	829

Tuberculosis

Comments on the incidence of this disease are given in a previous section of the report relating to the prevention, care and after-care of illness.

The following tables are of interest:

1. NUMBER AND AGE DISTRIBUTION OF NEW NOTIFICATIONS OF TUBERCULOSIS AND DEATHS FROM THIS DISEASE IN 1970

Age Group in years	New Notifications				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0- 1	-	-	-	-	-	-	-	-
1- 2	-	-	-	-	-	-	-	-
2- 5	-	-	-	-	-	-	-	-
5-10	-	-	-	-	-	-	-	-
10-15	-	1	-	-	-	-	-	-
15-20	-	-	-	-	-	-	-	-
20-25	-	-	1	-	-	-	-	-
25-35	-	-	-	-	-	-	-	-
35-45	-	-	-	-	-	-	-	-
45-55	1	4	-	-	1	-	-	-
55-65	3	2	-	1	2	-	-	-
65-75	1	-	-	-	3	-	-	1
75 plus	1	-	-	1	1	-	-	-
Totals	6	7	1	2	7	-	-	1

2. NOTIFICATIONS OF AND DEATHS FROM TUBERCULOSIS: 1939-70

Year	New Notifications of Tuberculosis		Deaths from Tuberculosis	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1939	88	27	43	12
1940	53	18	38	10
1941	64	22	26	14
1942	88	19	43	8
1943	63	32	22	1
1944	73	21	36	1
1945	73	24	32	5
1946	64	18	25	4
1947	68	14	36	3
1948	62	29	24	1
1949	73	18	41	1
1950	62	16	28	3
1951	66	9	26	9
1952	51	5	24	1
1953	63	6	22	6
1954	61	9	15	1
1955	35	7	14	3
1956	49	4	8	2
1957	36	4	11	1
1958	38	3	7	-
1959	26	1	8	3
1960	29	1	8	-
1961	26	3	14	2
1962	32	3	8	-
1963	34	2	8	-
1964	26	5	11	-
1965	25	6	3	1
1966	18	4	3	-
1967	15	2	5	-
1968	10	1	4	2
1969	7	1	4	-
1970	13	3	7	1

SECTION IV

MISCELLANEOUS

1. MILK

Dairy farming continued to be an important part of the economy of the County: at the end of 1970, there were 2,169 registered dairy farms.

As described in recent annual reports, the main remaining health problem is the eradication of brucellosis, an infection associated with a high abortion or prematurity risk in cattle with a resultant serious financial loss in farming. This infection can be transmitted to humans either by direct contact or by the drinking of non-heat treated milk. The clinical studies of Dr. Eirian Williams, the local consultant physician, described in the previous section, continued to confirm the need for effective measures to eradicate the disease. As in other recent years, considerable attention was given in the County, during the year, to the detection of 'brucella' infected non-heat treated retail milk and to the subsequent issue of appropriate heat treatment notices by the district medical officers of health: during the four years, 1967 to 1970, thirty-three of the latter notices have been served locally. The sampling officers of the County Council continued to work in close co-operation with Dr. Eirian Williams and with the public health medical officers and their conscientious work in this field deserves commendation. In 1970, 2,848 samples of raw milk were tested for brucella abortus infection: 398 gave a positive ring test and subsequent cultures confirmed the infection in 22 samples. Some of these samples were

taken from the same herd. It was necessary, during the year, for the district medical officers of health to serve six heat treatment notices.

The voluntary Brucellosis (Accredited Herds) Scheme, which had made somewhat slow progress in the County, was closed to new applicants in March, 1970, and was replaced by the voluntary Brucellosis Incentives Scheme. Fortunately, an increasing number of local farmers are applying for entry into the latter scheme. The eradication of the disease in cattle will be a difficult task but details of the expected initial phase of the official eradication scheme were received in March, 1971: so far, Pembrokeshire is not included in the initial eradication areas or in the extension and potential eradication zones. It is hoped that the increasing number of applicants for the afore-mentioned incentives schemes will result, in due course, in the early inclusion of the County in the eradication zones.

When milk is subjected to heat treatment, it is important to ensure that the process, including the temperature control, is satisfactory. Most of the pasteurised (heat treated) milk sold locally comes from a pasteurisation plant outside the County, but two small plants continued to operate locally. Careful surveillance of these plants and the associated bottle washing arrangements is essential. Of thirty-four samples of heat treated (pasteurised) milk tested during the year, none failed the methylene blue test for keeping quality and two the phosphatase test for correct heat treatment: one hundred and forty four laboratory tests of the bacterial purity of washed milk bottles were under-

taken and five were unsatisfactory.

Dr. H.D.S. Morgan, consultant bacteriologist, and his staff at the Public Health Laboratory, Carmarthen, were responsible for all the afore-mentioned laboratory tests, and, as in previous years, their advice and assistance were most helpful.

The problem of the presence of antibiotics in milk consequent on their use in the treatment of mastitis in dairy cows was described in previous reports. Of 546 samples of milk tested in 1970, only 6 - 1.1 per cent - contained antibiotics.

The other milk sampling results relating to the chemical quality and adulteration of milk are described in the latter part of this section.

Since the 1st September, Mr. D.G. Evans and Mr. D. John, the 'diseases of animals' inspectors, have been attached to the County Health department and this arrangement has, so far, functioned without difficulty.

2. FOOD

The enforcement of the legislation relating to food hygiene, including food handling and the protection of foods from risks of contamination, is primarily the responsibility of district councils in this County, and details of local action are contained in the reports of the district medical officers of health and public health inspectors.

The main role of the County Council in food legislation remains limited to the local enforcement

of the parts of the Food and Drugs Act, 1955, and of the relevant food regulations and orders, concerned with the labelling, composition and quality of food and drugs. The staff of the Weights and Measures department continued to undertake the sampling of food and drugs in the County, and I am grateful to Mr. F.W.J. Read, the Chief Inspector of Weights and Measures, for details of the results of sampling in 1970. A brief summary is as follows:

Food	No. of Samples	Non-Genuine	Defects
Milk	546	22	including low fat content, added water and antibiotics
Ice-cream	10	-	-
Butter, Margarine and Cooking Fat ...	21	-	-
Tinned Meat and Fish	32	-	-
Jam and Related Products	29	-	-
Soft Drinks ...	37	1	insufficient lemon content of bitter lemon
Alcoholic Drinks ...	14	1	one whisky underproof
Drugs	11	-	-
Miscellaneous Foods including Bread, Dried Fruits, and Sausages	266	25	comparatively minor defects

The Public Analyst is Mr. D.C. Jenkins, M.Sc., F.R.I.C. of Carmarthen.

3. NURSERIES AND CHILD MINDERS REGULATION ACT, 1948, AS AMENDED BY THE HEALTH SERVICES AND PUBLIC HEALTH ACT, 1968

At the end of 1970, there were sixteen registered private day nurseries and two registered child minders in Pembrokeshire. Seven of these nurseries were initially registered during the year and this reflects the continuing demand for facilities for the group care of pre-school children.

The nurseries are organised on a sessional basis and the children are supervised either by a small staff or by the mothers working on a rota system. During the year, an average of three hundred children were on the attendance registers in this County.

The provisions relating to registration and the subsequent visits to day nurseries and child minders by the appropriate staff of the County Health department continued in accordance with the Nurseries and Child Minders Regulation Act, 1948, as amended by the Health Services and Public Health Act, 1968, and the guidance in the appropriate circulars.

4. MEDICAL EXAMINATION OF COUNTY STAFF

The following examinations were undertaken during 1970:

Entrants (excluding teachers and police) to County Council employment	244
Manual workers for entry into sickness benefit scheme	72
Entrants to Teachers' Training Colleges ...	168
Newly appointed teachers	87
Canteen staff	113
Re-examination of existing employees ...	35
Number of chest x-ray examinations of staff (excluding mass radiography examinations)	315
Examinations carried out on behalf of other local authorities (reciprocal arrangements)	11

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