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COUNTY BOROUGH OF BOURNEMOUTH

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# Annual Report

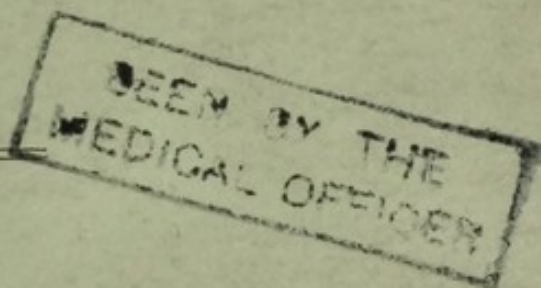
of the

Medical Officer of Health

and

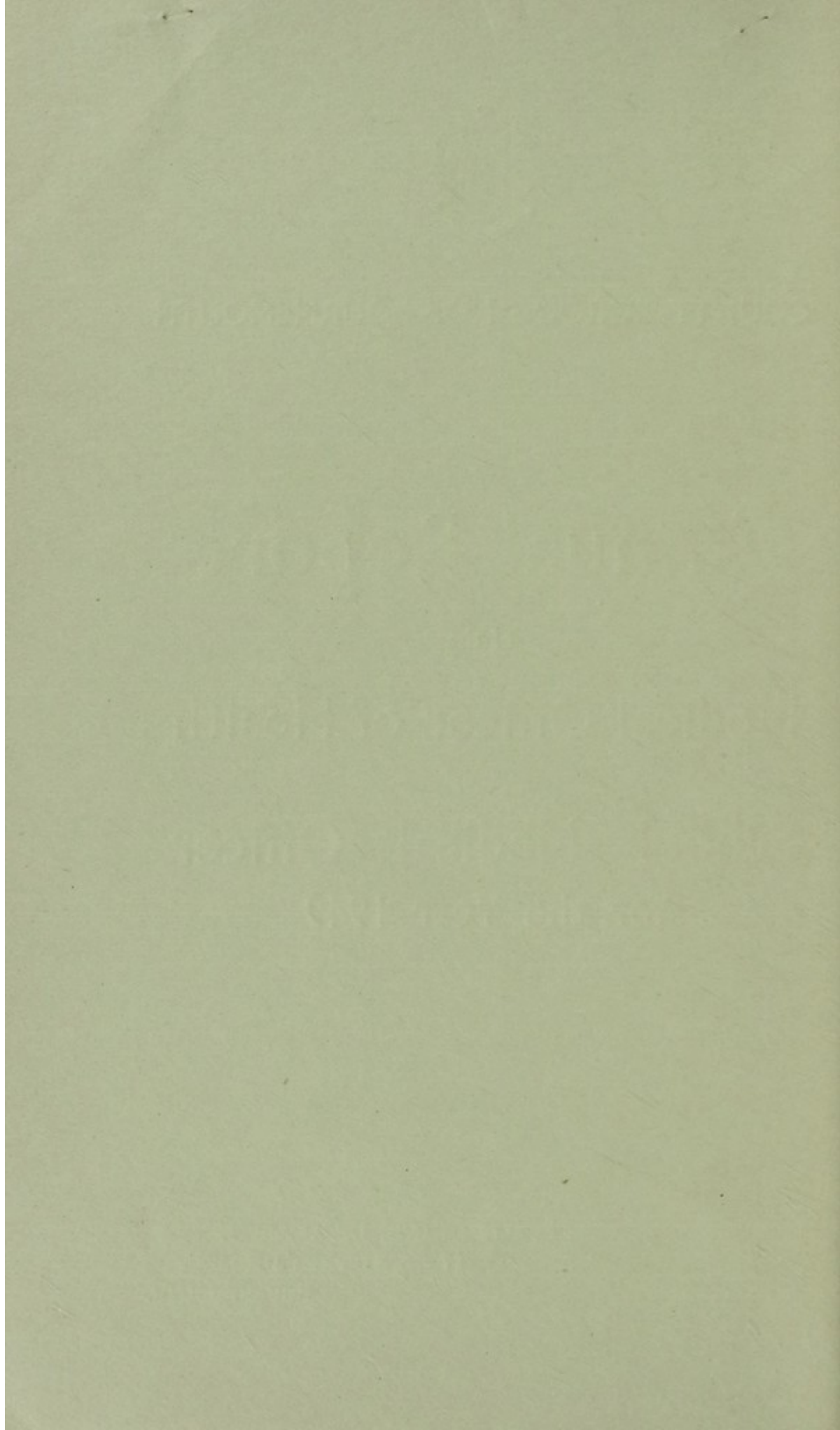
School Medical Officer

for the Year 1949



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# Annual Report

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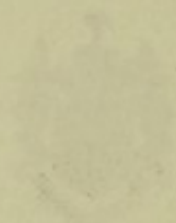
School Medical Officer

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PUBLIC HEALTH DEPARTMENT,  
17 ST. STEPHEN'S ROAD,  
BOURNEMOUTH.





COUNTY BOROUGH OF BOURNEMOUTH

HEALTH DEPARTMENT

# Annual Report

of the

Medical Officer of Health

and

School Medical Officer

for the Year 1949

PRINTED BY THE BOROUGH ENGINEERS

Public Health Department,  
17 St. Andrew's Road,  
Bournemouth.

COUNTY BOROUGH OF BOURNEMOUTH

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# ANNUAL REPORT

OF THE

## Medical Officer of Health

FOR THE YEAR 1949

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PUBLIC HEALTH DEPARTMENT,

17 ST. STEPHEN'S ROAD,

BOURNEMOUTH.

*To the Mayor, Aldermen and Councillors of the  
County Borough of Bournemouth*

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my twenty-second and last Annual Report relating to the Health conditions of Bournemouth. At the same time, it may be opportune to review the period from March 1st, 1928 when my duties as Medical Officer of Health commenced and to render some account of my stewardship.

It was apparent prior to my appointment that the Health Services of the County Borough had not been fully developed and that those in existence were largely carried out on behalf of the Health Authority by other organisations. It was likely therefore that an official who attempted the reorganisation that was desirable would have a difficult and unenviable task.

For many years the circumstances of Bournemouth had been changing. Originally referred to as a Health and later as a Health and Pleasure resort the motto of "Pulchritudo et Salubritas" was appropriate and what are still referred to as the natural amenities sufficed. Now with a residential population of nearly



140,000 which at certain seasons is swollen by the addition of many thousands of visitors the locality is chiefly a pleasure resort. But however described, Bournemouth should have hospitals and other institutions and facilities such as those supplied by any progressive Health Authority interested in the development of its Health Services.

From a preliminary survey in 1928 of the Municipal Health organisation it was ascertained that this for a County Borough with 96,000 inhabitants was unusual if not unique. The Health and Sanitary departments were controlled respectively by the Medical Officer of Health and the Chief Sanitary Inspector. The latter concerning himself with general sanitary administration and Housing in particular had established a high standard. Until 1929 when the Chief Sanitary Inspector retired and the two departments were combined the Medical Officer of Health had little scope. In 1928 he had only one full time Assistant Medical Officer who could have been kept fully occupied with the medical inspection and treatment of School Children. For the Medical Officer of Health himself, there was administration of the Health Department and the responsibility of the Isolation Hospital, the only municipal institution of any importance. This was a disappointing hospital for it was composed of ward-blocks some of them described as temporary which were not suitable for the isolation and treatment of patients suffering from various diseases.

In 1929 there was an epidemic of Scarlet Fever of a moderately severe type and at the same time there were many cases of Diphtheria caused by a Diphtheria bacillus of the "gravis" variety. In consequence the accommodation of the hospital was severely taxed for in a town where catering for visitors is the main industry infection is regarded seriously. In September, two cases of Smallpox were diagnosed and although a major incident was avoided the difficulties encountered



in 1929 in connection with Infectious diseases made me realise that proper accommodation should be supplied as soon as possible. My recommendations to the Health Committee that a new hospital for infectious diseases should be built at first fell on stony ground so that when the Typhoid epidemic occurred in 1936, the beds available in the existing hospital were totally inadequate. After the epidemic, the Council acquired a site for a new hospital but no building resulted and since 1947 all infectious cases in Bournemouth needing treatment in hospital have been admitted to the Isolation Hospital originally provided by the Municipal Borough of Poole.

The circumstances as regards Tuberculosis have been somewhat similar. The Tuberculosis Dispensary more recently described as the Chest Clinic existed until 1949 in the form of an insignificant building of bungalow type in the grounds of the Royal National Sanatorium, the Resident Medical Officer of that institution acting for some years as part-time Clinical Tuberculosis Officer. This dispensary was often overcrowded and had no X-ray apparatus so that treatment by artificial pneumothorax was not given on the premises. If for the purpose of diagnosis, the Tuberculosis Officer required an X-ray film the patient had to go to Boscombe Hospital, an arrangement which had obvious drawbacks. For several years Tuberculosis patients needing in-patient treatment were roughly classified as "early" and "late" the former being admitted with the approval of the Medical Superintendent to the Royal National Sanatorium, the latter chiefly to the Firs Home also in Bournemouth. In 1936, the Council purchased a private sanatorium with about 40 beds at Linford near Ringwood and decided to build on adjoining land a sanatorium-hospital of 140 beds intended to satisfy the needs of Bournemouth and part of Dorset. This institution was well on the way to completion when building operations ceased in the early years of the War. When this happened, the need of beds for patients



suffering from Pulmonary Tuberculosis was urgent and in 1942 the Ministry of Health sanctioned the use of the Herbert Convalescent Home, Bournemouth which had been designated an Emergency Hospital. This building though not ideal for the purpose was adapted and supplied with X-ray apparatus and is still being used by the Sanatoria Management Committee as a Sanatorium and Chest Clinic. As regards General Hospitals difficulties have been apparent for several years. In 1931, the Boundaries of Bournemouth were extended. Since then the population of the County Borough has increased by approximately 50,000 and appreciable expansions have taken place also in West Hampshire. Before the War the Royal Victoria and West Hants Hospital satisfied most of the needs of the area it serves and provided beds for almost every condition excepting patients suffering from notifiable diseases, Pulmonary Tuberculosis, Mental disorders and chronic infirmities ; but accommodation for Maternity cases was sometimes strained. The Council had decided not to take advantage of the provisions of the Local Government Act, 1929 which would have permitted the appropriation of the institution at Fairmile, Christchurch and its development as a Public Health Hospital. The merits of this excellent institution were demonstrated during the Typhoid epidemic of 1936 when the Public Assistance Committee lent some of the wards and also during the War when it became an emergency hospital. The Council subsequently resolved that a municipal hospital should be built on a site to be selected and that a Maternity Unit should be included but nothing had materialised when the National Health Service Act came into operation. It seems likely that the deficiency of hospital beds will in due course be overcome by the use of the former American hospital at St. Leonards, near Ringwood which in spite of much that has been said to the contrary, possesses several advantages and is capable of being converted into an excellent hospital.



It has been mentioned that many of the services for which the Council was responsible were supplied by other institutions and organisations. In addition to the accommodation for in-patients in the Royal Victoria and West Hants Hospital there were by agreements with the Council various specialist Clinics for School Children who obtained beds in the hospital when necessary. There were also Clinics for the diagnosis and treatment of Venereal diseases and for the diagnosis of Nervous disorders and lately for Cancer. The last-named was a Municipal Clinic the Director having been appointed by the Council but there was close liaison with the Hospital staff as regards diagnosis and the treatment recommended by the Director.

The above indicates briefly the position in relation to hospitals and major institutions but the situation in regard to those of less importance has left much to be desired. Certain premises such as a private house, an elementary school and a technical institute have been adapted for use as an Ante-natal clinic, Minor Ailments Clinic or for a combination of purposes but no building has been newly erected. In most districts Infant Welfare Centres are established in Church halls an arrangement which aids multiplicity but is associated with disadvantages. In spite of the absence of imposing buildings, it has been found possible to expand the Health Services and to achieve results. Especially does this apply to Maternity and Child Welfare which is now a very active and popular concern. Certain of the Services such as the Maternity and Child Welfare and the School Health are intimately associated and much progress can be attributed to co-ordination for whenever possible Medical Officers, Dental Officers and Health Visitors have districts in which they carry out all the duties for which the Council has accepted responsibility.

It should be said that in Bournemouth there is an unusual number of voluntary helpers who



assist the paid officials to do work which without voluntary assistance would be performed less thoroughly or even left undone. The tasks of the Sanitary Inspectors have been increasing year by year. They give constant attention to nuisances large and small but are much hampered by the shortage of houses which is responsible for many cases of overcrowding and the domestic unhappiness associated therewith. If the building of houses proceeds at the present rate it will be many years before the situation can be regarded as satisfactory from the point of view of a Health Official. In a town such as Bournemouth, the inspection and control of foods is of great importance and the sanitary inspectors are persistently endeavouring to raise the standard of cleanliness. This subject received considerable attention when a Health Week including an exhibition was held in March, 1949. No opportunity has been lost to educate the Public including sections which seem particularly interested and it has been gratifying to note the extent to which the community—especially young mothers and fathers—has profited.

The statement relating to progress is supported to some extent by the statistics given in annual reports. It would not be fair to attribute the good results entirely to local efforts for my period of office has coincided with the introduction by certain Ministries of measures and schemes such as immunisation against Diphtheria and the supply of vitamins to expectant and nursing mothers and infants. Moreover, much activity as regards Research has been responsible for the use of Penicillin, the M. and B. drugs and other remarkable discoveries.

In conclusion, there is a personal note. Without some encouragement, work would be intolerable. In times of stress there have been members of the Council who have had confidence in me and given their support ; there are colleagues who have helped me on numerous occasions and the staff of the Public Health



Department from whom I have received many tokens of loyalty. It is undesirable that I should mention individuals by name and in a few words it is not within my ability to do them justice. I trust that my views are known to them and that they will understand this brief record of appreciation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

H. GORDON SMITH.



# COMPOSITION OF COMMITTEES AND STAFF

## AS AT 31st DECEMBER, 1949

### HEALTH COMMITTEE

The Mayor (Councillor J. H. Turner, J.P.)			
Alderman J. B. C. Beale ( <i>Chairman</i> )			
Councillor A. H. Abbott ( <i>Vice-Chairman</i> )			
Alderman	W. Asten, M.D.	Councillor	F. S. Coleman, B.Sc.,
"	H. C. Brown.		M.R.C.S., L.R.C.P.
"	J. J. Empson, J.P.	"	Mrs. E. L. A. Hockey, J.P.
"	T. Peaty	"	J. G. Middleton
"	A. J. Playdon	"	F. A. W. Purdy
"	J. Richards		Rev. A. J. Elgar
Councillor	D. A. Bowerman		W. R. Pratt, Esq., M.B., Ch.B.
"	Mrs. F. E. Boyce, J.P.		N. Ross Smith, Esq., F.R.C.S.
			R. G. Torrens, Esq., B.A., B.D.Sc.

### MENTAL HEALTH SUB-COMMITTEE

Councillor	Mrs. F. E. Boyce, J.P.,	Alderman	T. Peaty
	(Chairman)	Councillor	F. A. W. Purdy
Alderman	W. Asten, M.D.		Dr. I. H. Jenkins
"	J. J. Empson, J.P.		

### PUBLIC HEALTH DEPARTMENT

Medical Officer of Health, School Medical Officer, and Medical Referee to Cremation Authority	H. Gordon Smith, M.D. (State Medicine), B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health, Deputy School Medical Officer, Deputy Medical Referee to Cremation Authority ...	Ivor Anderson MacDougall, M.B.E., M.R.C.S., L.R.C.P., D.P.H.
Assistant Medical Officer of Health, Assistant School Medical Officer ...	C. J. Sanderson, M.R.C.S., L.R.C.P., D.P.H.
Assistant Medical Officer of Health, Assistant School Medical Officer ...	F. A. Heimann, M.D.(Breslau), L.R.C.P., L.R.C.S., L.R.F.P.S.
Assistant Medical Officer of Health (Maternity and Child Welfare) ...	P. K. H. Keating, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.W.
Senior Dental Officer ...	A. A. Wood, L.D.S.
Dental Officers ...	E. Johnson, L.D.S.
	J. M. Webb, L.D.S.
Senior Sanitary Inspector ...	William Riley, F.R.San.I. * † † †
Deputy Senior Sanitary Inspector	Jack Randall, M.R.San.I. + † † †
District Sanitary and Food Inspectors ...	H. R. Ambrose + † M. Guthrie + †
	A. J. Mortimer + † † O. Stewart* †
	R. C. Sweet + † S. Tweedie + †



District Sanitary Inspectors ...	W. Vincent Morris,* D. J. Mortimore,* S. Powell,* †
Superintendent Health Visitor ...	S. Stoner
Health Visitors (and School Nurses) ... ..	L. M. Austin, E. I. Bartlett, C. V. Bailey, W. Burrows, P. M. Carey, M. G. Cornish, A. M. Crisp, E. M. Gibbs, G. Hammond, G. M. Lunn, C. M. Morgan, E. Tonkin, E. Turner, H. J. Underwood
Municipal Midwives ... ..	P. D. Aldridge, E. M. Chetland, M. Harris, L. Hawthorne, M. H. Popham, E. M. Shock
Duly Authorised Officers ...	F. H. Lewis, G. O. Willis, F. J. Goode (Part-time)
Dental Attendants ... ..	D. M. Cox, B. D. M. Read, N. Woods
Chief Administrative Assistant and Chief Clerk ... ..	A. W. Hurley
Senior Administrative Assistant Clerks ... ..	J. W. Roberts S. C. Banks, S. M. Brewer, G. A. Capes, K. F. Clarke, W. G. Clarkson, M. A. Cormack, E. H. Davis, F. J. Goode, E. G. Payne, J. A. Perry, J. W. Peake, A. Pollock, R. W. Rowe, M. Shipp, E. Sweet, M. Watton, G. O. Willis
Home Help Organiser ... ..	K. J. Cooke
Ambulance Depot Superintendent	F. A. Cutler
Superintendent of Public Con- veniences and Mortuary ...	A. E. Tarrant
Sanitary Inspectors' Assistants ...	G. Christy, A. E. Gerault, M. C. Russell, H. E. Slocombe, J. Tyrell
Rodent Officer ... ..	F. Bennett
Rat Catchers ... ..	H. J. Burridge, R. Hibberd, H. Maher, A. McGrath, J. Richards, A. Thomas

#### PART-TIME OFFICERS

Public Analyst ... ..	G. V. James, M.B.E., M.Sc., Ph.D., F.R.I.C.
Meteorologist ... ..	A. C. Marsh, F.R.Met.Soc., F.B.O.A.

\* Certificate of the R.San.I. for Sanitary Inspectors.

† Certificate of the R.San.I. for Inspectors of meat and other foods.

° Certificate of the R.San.I. for Smoke Inspectors.

+ Certificate of the R.San.I. and Sanitary Inspectors' Examination Joint Board.

‡ Certificate of the Examination Board of the Sanitary Inspectors' Association (1921).

‖ Certificate of the R.San.I. for Sanitary Science.

## GENERAL STATISTICS

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Area of the County Borough	...	11,627 acres
Estimated Civilian Population	...	138,840
Rateable value	... ..	£1,985,081
Sum represented by a penny rate	...	£7,999 4s. 7d.

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## EXTRACTS FROM VITAL STATISTICS

Live Births :—				<i>M</i>	<i>F</i>
Legitimate	...	...		810	748
Illegitimate	...	...		61	73
				<hr/>	<hr/>
				871	821
				<hr/>	<hr/>

Birth Rate, 12.18 per 1,000 population.

Still Births :—				<i>M</i>	<i>F</i>
Legitimate	...	...		23	19
Illegitimate	...	...		1	2
				<hr/>	<hr/>
				24	21
				<hr/>	<hr/>

Still-birth Rate 25.9 per 1,000 total births.

Deaths at all ages—Males, 920 ; Females, 1,217. Death Rate, 15.39 per thousand population.

Corrected Death Rate 10.77.

Deaths from Cancer—Males, 137 ; Females, 202. Death Rate, 2.44 per thousand population.

Deaths from Pulmonary Tuberculosis, Males 34 ; Females 20. Death Rate, .38 per thousand population.

Deaths of infants under 1 year of age—Legitimate, 50 ; Illegitimate, 4.

Death Rate 31.91 per 1,000 live births.

Death Rate 32.09 per 1,000 legitimate births.

Death Rate 29.84 per 1,000 illegitimate births.

Number of women dying in, or in consequence of, childbirth—  
From Sepsis, 1. From other causes, 3. Death Rate 2.30 per 1,000 total births.

Deaths from Measles, 1 ; Whooping Cough, 0 ; Diarrhoea (under 2 years), 5.



# CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1949

Causes of Death	All Ages	0—	1—	5—	15—	45—	65—
All Causes ... ..	2137						
1—Typhoid and Paratyphoid fevers ... ..	...	...	...	...	...	...	...
2—Cerebro-spinal fever ... ..	...	...	...	...	...	...	...
3—Scarlet Fever ... ..	...	...	...	...	...	...	...
4—Whooping Cough ... ..	...	...	...	...	...	...	...
5—Diphtheria ... ..	...	...	...	...	...	...	...
6—Tuberculosis of respiratory system ... ..	54	...	...	...	20	21	13
7—Other forms of Tuberculosis ... ..	8	2	...	2	1	1	2
8—Syphilitic diseases ... ..	13	...	...	...	1	5	7
9—Influenza ... ..	19	1	...	...	1	4	13
10—Measles ... ..	1	...	1	...	...	...	...
11—Acute Poliomyelitis and Polio-encephalitis ... ..	4	...	1	...	...	3	...
12—Acute inf. encephalitis ... ..	1	...	...	...	...	...	1
13—Cancer of buccal cavity and oesophagus (M) and uterus (F) ... ..	24	...	...	...	...	10	14
14—Cancer of stomach and duodenum ... ..	42	...	...	...	1	7	34
15—Cancer of breast ... ..	52	...	...	...	3	23	26
16—Cancer of all other sites ... ..	221	...	...	...	10	67	144
17—Diabetes ... ..	14	...	...	1	...	3	10
18—Intracranial vascular lesions ... ..	284	...	...	...	...	34	250
19—Heart disease ... ..	735	...	...	...	11	108	616
20—Other diseases of circulatory system... ..	83	...	...	...	1	9	73
21—Bronchitis ... ..	84	1	...	...	1	14	68
22—Pneumonia ... ..	58	9	1	...	1	8	39
23—Other respiratory diseases ... ..	31	...	...	...	4	10	17
24—Ulcer of stomach or duodenum ... ..	29	...	...	...	2	9	18
25—Diarrhoea under 2 years ... ..	5	5	...	...	...	...	...
26—Appendicitis ... ..	8	...	...	...	...	2	6
27—Other digestive diseases ... ..	35	...	...	1	2	9	23
28—Nephritis ... ..	59	1	...	...	2	6	50
29—Puerperal and post-abortive sepsis ... ..	1	...	...	...	1	...	...
30—Other maternal causes ... ..	4	...	...	...	4	...	...
31—Premature birth ... ..	15	15	...	...	...	...	...
32—Congenital malformations; birth injuries; and other infant diseases	23	17	2	...	...	1	3
33—Suicide ... ..	26	...	...	...	3	14	9
34—Road traffic accidents ... ..	14	...	...	...	4	2	8
35—Other violent causes ... ..	41	3	2	1	2	6	27
36—All other causes ... ..	149	...	2	1	13	21	112

## REMARKS CONCERNING THE DEATHS

The uncorrected death-rate is slightly higher than in the previous year. Once more Infection has played a minor part.

The actual number of deaths from Cancer and from Pulmonary Tuberculosis is smaller. The infant



mortality rate is low but not quite so good as in 1949. The same applies to the maternal mortality rate. There is nothing unusual about the other causes of death.

## MATERNITY AND CHILD WELFARE BIRTHS

The number of live births allocated to the area after adjustment for inward and outward transfers was 1692. There were 212 fewer births than in 1948.

### CARE OF PREMATURE INFANTS

(i.e. babies weighing 5½lbs. or less at birth irrespective of period of gestation)

(a) Number of premature infants notified during the year (including transferred notifications) whose mothers normally reside in the area	1. Born at home ... ..	29
	2. Born in hospital or nursing home ... ..	67

(b) Premature babies born in the area (whether their mothers normally reside in the area or not) but excluding babies born in maternity homes and hospitals in the National Health Service.

### BORN AT HOME

				Trans-ferred to Hospital (1)	Nursed entirely at home					Grand Total (7)
					Died in first 24 hrs. (2)	Died on 2nd to 7th day (3)	Died on 8th to 28th day (4)	Sur- vived 28 days (5)	Total (6)	
Under 3 lbs.	...	...	...	1	3	1	—	—	4	5
3 to 4 lbs.	...	...	...	—	—	—	—	2	2	2
4 to 5½ lbs.	...	...	...	—	2	—	1	19	22	22
Total	...	...	...	1	5	1	1	21	28	29

## BORN IN PRIVATE NURSING HOMES

	Transferred to Hospital (8)	Nursed entirely in private nursing home					Grand Total (14)
		Died in first 24 hrs. (9)	Died on 2nd to 7th day (10)	Died on 8th to 28th day (11)	Survived 28 days (12)	Total (13)	
Under 3 lbs. ... ..	—	2	1	—	—	3	3
3 to 4 lbs. ... ..	—	—	3	—	2	5	5
4 to 5½ lbs. ... ..	—	1	—	—	26	27	27
Total ... ..	—	3	4	—	28	35	35

## MIDWIVES ACTS, 1902-1936

## MIDWIVES

	Number of Midwives practising in the area of the Local Supervising Authority at 31st December, 1949		
	Domiciliary Midwives	Midwives in Institutions	Total
(a) Midwives employed by the Authority ... ..	6	—	6
(b) Midwives employed by Voluntary Organisations :—			
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act ... ..	—	3	3
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ... ..	—	—	—
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ... ..	—	18	18
(d) Midwives in Private Practice (employed in Nursing Homes)	4	14	18
Totals ... ..	10	35	45



## MATERNITY CASES ATTENDED

	Number of maternity cases in the area of the Local Supervising Authority attended by midwives during the year					
	Domiciliary Cases		Cases in Institutions		Total	
	As Midwives (1)	As Maternity Nurses (2)	As Midwives (3)	As Maternity Nurses (4)	As Midwives (5)	As Maternity Nurses (6)
(i) Midwives employed by the Authority ... ..	304	146	—	—	304	146
(ii) Midwives employed by Voluntary Organisations :—						
(a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service Act ... ..	—	—	—	—	—	—
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ... ..	—	—	40	4	40	4
(iii) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ... ..	—	—	210	753	210	753
(iv) Midwives in Private Practice (including Midwives employed in Nursing Homes) ...	26	32	29	527	55	559
TOTALS	330	178	279	1284	609	1462

## MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES' ACT, 1918

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1918, by a Midwife :—

(a) For Domiciliary cases :—						
(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service ... ..	...	...	...	...	...	1
(ii) Others ... ..	...	...	...	...	...	28
Total ... ..	...	...	...	...	...	29
(b) For cases in Institutions ... ..	...	...	...	...	...	66

# ADMINISTRATION OF GAS AND AIR ANALGESIA

## (1) INSTITUTIONAL MIDWIVES

Number of Institutional Midwives in practice in the area at the end of the year qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board :—

(a) Employed in homes and hospitals in the National Health Service	...	...	...	14	} Total—20
(b) Employed in nursing homes or in maternity homes and hospitals not in the National Health Service				6	



## (2) DOMICILIARY MIDWIVES

(1)	(2) Domiciliary Midwives employed directly by Local Health Authority (2)	(3) Domiciliary Midwives employed in public midwifery service under Section 23 by voluntary organisations as agents of Local Health Authority (3)	(4) Domiciliary Midwives employed in public midwifery service under Section 23 by hospital authorities as agents of Local Health Authority (4)	(5) Domiciliary Midwives in private practice or employed by organisations not acting as agents of Local Health Authority (5)	(6) Total (6)
(a) Number of domiciliary midwives practising in the area at 31st December, 1949, who are qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board ...	6	—	—	1	7
(b) Number of sets of apparatus for the administration of gas and air in use by domiciliary midwives employed in the Authority's domiciliary midwifery service at 31st December, 1949	6	—	—	—	6
(c) Number of cases in which gas and air was administered by midwives in domiciliary practice during the period 1st January, 1949 to 31st December, 1949 :—	204	—	—	—	204
(i) When acting as a midwife	76	—	—	—	76
(ii) When acting as a maternity nurse		—	—	—	

# ANTE-NATAL AND POST NATAL CLINICS

The figures appended relate to the Clinics held in Madeira Road and Kinson

(1)	Number of clinics provided at end of year	Number of sessions held per month	Number of women who attended during year	Number of women included in column (4) who had not previously attended any clinic during current pregnancy and for Post Natal Clinics women who had not previously attended a post-natal clinic after last confinement	Total number of attendances made by women included in column (4) during the year
	(2)	(3)	(4)	(5)	(6)
Ante-natal Clinics } Post-natal Clinics } Combined	2	13	689 61	543 60	1822 66



## INFECTIOUS DISEASES

There were no notifications of Ophthalmia Neonatorum or Pemphigus Neonatorum but there were 5 cases of Puerperal Pyrexia, 1 of these being associated with a domiciliary confinement while 4 occurred in institutions.

## DEATHS ASCRIBED TO PREGNANCY, OR CHILDBIRTH

7 deaths which occurred in the area were associated with parturition. 4 of the patients normally resided in the County Borough.

The cause of death in each of these 4 cases was certified as follows :—

<i>Age of Patient</i>	<i>Cause of Death</i>
39	1. (a) Shock (b) Post-partum haemorrhage
26	1. (a) Septicaemia (b) Puerperal Parametritis
26	1. (a) Obstetric Shock (b) Post-partum haemorrhage
35	Shock due to acute inversion of uterus following parturition

The Maternity Mortality rates per 1000 total (live and still) births were :—

Puerperal Infections	...	...	...	.57
Other maternal causes	...	...	...	1.72
			Total	2.29

## INFANT DEATHS

There were 54 deaths of children under 1 year of age. 35 of these occurred before the child was 4 weeks old, a better result than that obtained in 1948. In the latter year, there were no deaths from diarrhoea but in 1949, the infant mortality rate has been unfavourably influenced by 5 fatal cases. It will be noted that apart from one death attributed to



Influenza and 2 to Tuberculosis, there have been no others associated with infectious disease in children under 1 year.

*The rate of Infant Mortality in Bournemouth for the past 10 years*

1940	1941	1942	1943	1944	1945	1946	1947	1948	1949
65.9	42.6	43.9	47.0	41.1	48.0	33.7	35.1	27.8	31.91

## INFANT DEATHS IN 1949

Cause of Death	Under 1 wk.	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 mts.	3-6 months	6-9 months	9-12 months	Total deaths under 1 year
Influenza ... ..	—	—	—	—	—	—	—	1	—	1
Tuberculous Meningitis ...	—	—	—	—	—	—	—	—	1	1
Other Tuberculous Diseases ... ..	—	—	—	—	—	—	1	—	—	1
Bronchitis ... ..	—	—	—	—	—	1	—	—	—	1
Pneumonia (all forms)	—	—	4	—	4	3	2	—	—	9
Diarrhoea ... ..	—	—	2	1	3	—	—	2	—	5
Injury at birth ... ..	2	—	—	—	2	2	—	—	—	4
Atelectasis ... ..	2	—	1	—	3	—	—	—	—	3
Congenital Malformations	2	—	1	2	5	2	1	—	1	9
Premature Birth ... ..	14	1	—	—	15	—	—	—	—	15
Other causes ... ..	2	—	1	—	3	—	1	—	1	5
TOTALS ... ..	22	1	9	3	35	8	5	3	3	54

## CHILD WELFARE CENTRES

A new Centre was found to be necessary for the inhabitants of the prefabricated houses erected in Strouden Park and arrangements have been made for a weekly session in the Community Centre, Bradpole Road, a building which is most suitable for the purpose.

There are no centres provided by voluntary organisations and the figures supplied herewith relate to those under the control of the Health Authority.



(1) Local Health Authority Centres	(2) Number of centres provided at end of year	(3) Number of Child Welfare sessions now held per month in centres in column (2)	(4) Number of children who attended centres in column (2) during the year	Number of children who first attended the centres during the year and who on the date of their first attendance were :—		Number of children in attendance at the end of the year who were then :—	Total Number of attendances made by children included in column (4) during the year
				Under 1 year of age (5)	Over 1 year of age (6)		
		(3)	(4)	1508	454	1234	27695
	14	68	5376			3580	22348
				Under 1 year of age (9)	Over 1 year of age (10)		

## HEALTH VISITING

There are 15 Health Visitors employed by the Health Authority. The visits recorded by them were as follows :—

(1)	Number of Health Visitors Employed at end of year		Equivalent Whole-time Health Visitor services provided under column (3) (all classes including attendance at Child Welfare Centres) (4)	Number of visits paid by Health Visitors during the year							
	Whole-time on health visiting	Part-time on health visiting		Expectant mothers		Children under 1 year of age		Children between the ages of 1 and 5		Other cases	
				First visits	Total visits	First visits	Total visits	First visits	Total visits	First visits	Total visits
Local Health Authority	(2)	(3)	10	736	1460	1860	10378	22	16128	3213	7031



## DAY NURSERIES

(1)	No. (2)	Number of approved places		Number of children on the register at the end of the year		Average daily attendance during the year	
		0-2 (3)	2-5 (4)	0-2 (5)	2-5 (6)	0-2 (7)	2-5 (8)
Nurseries maintained by the Council	3	48	72	40	98	28.66 31.97*	71.87 80.28*

\* Excluding Saturdays

## DAILY MINDERS

None are provided by the Authority.

## DOMESTIC HELPS

- (i) Number employed :—  
 (a) Whole-time—11 (b) Part-time—42
- (ii) In how many cases were Domestic Helps provided during the year ? ... 572
- (iii) Number of Domestic Help Organisers employed ? ... 1

## MOTHER AND BABY HOMES

There are no municipal institutions but the following receive a grant from the Authority.

Name and Address of Home or Hostel (1)	Number of beds				Average length of stay	
	Total beds (excluding maternity and labour and cots) (2)	Maternity (excluding labour and isolation) (3)	Labour beds (4)	Cots (5)	Ante-natal (6)	Post natal (7)
Free Church Council Maternity and Training Home, 11, St. Albans Avenue ...	13	4	1	8	6 weeks	4 weeks
St. Thomas Lodge, 12, Charminster Road, Bournemouth ...	14	Nil	Nil	7	10 weeks	5 weeks

The total number of women admitted during the year to the above was 76.

The number of admissions for which the authority was responsible was 1.

The number of cases sent to Mother and Baby Homes other than those mentioned above, payment being made on an ad hoc basis.

- (a) Expectant Mothers 2
- (b) Post-natal cases Nil

### ILLEGITIMATE CHILDREN

A Social worker for the purpose of Circular 2866 is not employed, but necessary information and advice is given by the Health Visitors.



## REPORT OF THE SENIOR DENTAL OFFICER

### *Dental Treatment for Mothers and Young Children*

During the year 1949 there was a fall in the number of expectant and nursing mothers attending our dental clinics. This I consider was due to the fact that the free dental treatment available under the National Health Scheme removed the financial advantage which they gained previously by coming to us.

I feel that we can best adjust our scheme of Dental Service to the changed situation, by devoting more time to the pre-school children. Generally speaking, private dentists have so much to do for the adult population that they are happy to leave the dental care of the children to us, and we are taking steps to bring more of these young people under our care.

We have found all too frequently that when children attend primary school many of them have advanced decay and even unsaveable teeth, which sad state of affairs would have been avoided had we been able to see them from the age of about three years, and given advice and treatment earlier.

There appears to have been a tendency for parents to send their children to school at an earlier age than in previous years and consequently some children under the age of five were dealt with by the School Dental Service.

### **Staff**

Whilst our present staff is more than sufficient to supply the demand for treatment of mothers there is room for a considerable expansion in the service for the children under the age of five years. Our proposed new dental clinic at East Howe should be



completed within the next few months and when in use we shall be able to give a better service. The teeth of young children are liable to very rapid decay and it is essential that inspections should be frequent so that early treatment can be given where required.

### **General Observations**

There can be no doubt that the teeth of the children have benefited by the dietetic concessions made to expectant and nursing mothers and by the supplementary rations and vitamin products such as orange juice and cod liver oil supplied to the young children.

Every opportunity is taken to give advice to the mothers on the care of the teeth with a view to minimizing dental trouble in the future.

### **Co-operation of Other Health Services**

As in previous years we had the valuable co-operation of doctors and health visitors.

All expectant mothers attending the ante-natal clinics were given the opportunity to have a dental inspection and treatment if required.

Nursing mothers and pre-school children attending the Infant Welfare Centres were referred to us by doctors and health visitors.

### **Dental Health Education.**

In March, 1949, a "Health of the People" Exhibition was held at the Town Hall, Bournemouth. Mr. P. J. Pretty, Senior Dental Officer for the County of Dorset, Mr. K. G. Hyland, Senior Dental Officer for Poole and myself jointly produced a dental exhibit. Some interesting models showing various dental conditions, also pamphlets for distribution to the public were kindly provided by the Dental Board of the United Kingdom.

A. A. WOOD



# MATERNITY AND CHILD WELFARE

## (a) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	252	222	224	139
Children under five ...	167	118	114	92

## (b) FORMS OF DENTAL TREATMENT PROVIDED

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and gum treatment	Silver Nitrate treatment	Dressings	Radio-graphs	Dentures provided	
		Local	General						Com-plete	Partial
Expectant and Nursing mothers	447	60	97	262	59	Nil	163	Nil	28	59
Children under five	133	2	63	173	Nil	13	53	Nil	—	—

## NURSING HOMES

These have been inspected periodically but some have received more attention than others. In no instance has there been found any serious deficiency, though staffing difficulties continue to arise.

	<i>Number of Homes</i>	<i>Number of beds provided for Maternity Others</i>	<i>Totals</i>
Homes first registered during 1949	Nil	Nil	Nil
Homes on the register at the end of 1949	60	60	560
			620

## HOME NURSING

The Bournemouth Home Nursing Association has recorded a larger number of visits and it is apparent that the staff will need to be increased.

<i>Number of nurses employed at 31.12.49 in a whole-time capacity</i>	<i>Number of cases attended</i>	<i>Number of visits paid</i>
1 Superintendent and 18 nurses	2659	59622

## AMBULANCE SERVICES

The Municipal and the St. John Ambulance Services have continued to co-operate. The number of calls is increasing. Two cars became available from May 30th and July 11th but use is still made of the Hospital Car Service.

	<i>No. of vehicles at 31.12.49</i>	<i>No. of journeys</i>	<i>No. of patients carried</i>	<i>No of accidents and other emergency journeys included in column (3)</i>	<i>Total mileage</i>	<i>No. of staff at 31.12.49</i>
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Municipal ambulances	6	5411	5776	1386	58662	20
Service cars	*2	1752	2214	—	24162	—
St. John Ambulance Association ambulances	4	1699	1736	20	30513	5
Hospital Car Service cars	—	5842	7141	—	89997	—

\* 1 from May 30th, 1949.  
1 from July 11th, 1949.



## PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

There continued to be sporadic cases of Polio-myelitis and Polio-encephalitis and 4 of the patients died.

There were 17 notifications of Food-poisoning. This was undoubtedly a common condition before it became notifiable but cases were seldom brought to the notice of the Medical Officer of Health until it was too late to take effective action.

Measles in mild form has been even more prevalent but whooping cough is abating. Scarlet-Fever was little in evidence and Diphtheria has become a rarity. The diminished incidence of the latter disease can only be explained by the co-operation of the parents in connection with immunisation as indicated by the figures.

It is regrettable that the statistics relating to Vaccination are not equally good, for an outbreak of Smallpox in Bournemouth which has visitors at all times of the year might have far reaching effects and be the cause of considerable financial loss to the town. In 1929 at the height of the holiday season 2 visitors were found to have the disease and it was extremely difficult to trace all contacts and to keep the cases in Bournemouth to the original number. The town was very fortunate and at the time little was heard of the incident.



## NOTIFIABLE DISEASES OTHER THAN TUBERCULOSIS

Disease	Total of cases notified	Total deaths
Diphtheria (including Mem- branous Croup) ...	2	—
Erysipelas ...	19	—
Scarlet Fever ...	97	—
Enteric Fever (including Para-Typhoid) ...	—	—
Ophthalmia Neonatorum ...	—	—
Pneumonia ...	77	58
Dysentery ...	2	—
Puerperal Pyrexia ...	5	1
Poliomyelitis ...	25	4
Polioencephalitis ...	3	
Measles ...	1785	1
Whooping Cough ...	122	—
Scabies ...	22	—
Cerebro-spinal Fever ...	2	—
Food Poisoning ...	17	—

### CASES OF INFECTIOUS DISEASES WHICH OCCURRED DURING 1949

Notifiable Disease	Number of Cases Notified							
	At Ages—Years							
	At all ages	Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards
Diphtheria (including Membranous Croup) ...	2	—	—	—	1	1	—	—
Erysipelas ...	19	—	—	—	2	7	6	4
Scarlet Fever ...	97	—	37	56	3	1	—	—
Enteric Fever (including Para- Typhoid) ...	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—
Pneumonia ...	77	7	13	12	5	10	11	19
Dysentery ...	2	—	—	1	—	1	—	—
Puerperal Pyrexia ...	5	—	—	—	2	3	—	—
Poliomyelitis ...	25	1	8	3	7	5	1	—
Polioencephalitis ...	3	—	—	2	—	1	—	—
Measles ...	1785	43	869	832	12	24	3	2
Whooping Cough ...	122	12	69	37	1	3	—	—
Scabies ...	22	—	2	13	3	3	1	—
Cerebro-spinal Fever ...	2	—	—	—	1	—	1	—
Food Poisoning ...	17	—	1	1	1	8	6	—



## IMMUNISATION AGAINST DIPHTHERIA

Number of children immunised by Public Health Department ...	1297
Number of children immunised by Private doctors ...	274
Number of children who received re-inforcing doses by Public Health Department ...	1239
Number of children who received re-inforcing doses by Private doctors	93

## VACCINATIONS

These figures relate to vaccinations performed by General Practitioners and the Medical Officers of Infant Welfare Centres.

	<i>Under 1 year</i>	<i>Aged 1—4</i>	<i>Aged 5—14</i>	<i>Aged 15 or over</i>	<i>Total</i>
Primary vaccinations	361	226	35	61	683
Re-vaccinations	—	3	31	194	228
TOTALS	361	229	66	255	911

As regards other diseases it has been a disappointment to many that the Municipal Cancer Clinic which was established at Boscombe Hospital in 1943 has ceased to exist. With Mr. Sampson Handley as the first Medical Director exceptional facilities for diagnosis were available to the Public and treatment was provided for in various institutions.

Moreover, as the scheme was inaugurated by the Health Authority it seemed that there was an opportunity to consider Cancer as a Public Health problem and to carry out some investigations in relation to Prevention and control. Cancer accounted for 339 deaths in Bournemouth during 1949 and the death rate per 1,000 population is 2.4.

## MENTAL HEALTH

The admission of patients to Mental Hospitals is carried out promptly by the Duly Authorised Officers and the Scheme is working smoothly. The arrangements for the admission of mentally defective persons to colonies or other institutions are most unsatisfactory. Cases regarded as urgent on account



of violent propensities or undesirable habits have been awaiting vacancies for years and others, who are not receiving proper attention, have little hope of obtaining a bed. Some relief will be given to the latter in 1950 as a building has been adapted at Pokesdown for the purpose of an Occupation Centre.

## SUMMARY OF CASES ADMITTED INTO MENTAL HOSPITALS

### MENTAL TREATMENT ACT

		<i>Male</i>	<i>Female</i>
Voluntary Patients	...	50	71
Temporary Patients	...	3	4
		—	—
		53	75
		—	—

### LUNACY ACT

		<i>Male</i>	<i>Female</i>
Certified Patients	...	33	75

## PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930

Age periods	Number of Primary Notifications of new cases of Tuberculosis													Total (all ages)
	0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 and up-wards	
Respiratory—														
Males ...	1	—	3	—	2	5	2	5	7	15	13	6	1	60
Females ...	—	—	2	2	1	10	10	6	4	5	2	5	2	49
Non-Respiratory—														
Males ...	1	—	1	2	1	1	—	—	—	2	—	1	—	9
Females ...	—	—	1	3	1	1	—	2	—	—	—	1	—	9



Particulars of new cases of Tuberculosis and of deaths from the disease of Bournemouth residents.

	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ...	1	—	1	—	—	—	2	—
1-5 years ...	3	2	1	1	—	—	—	—
5-15 „ ...	2	3	3	4	—	—	1	1
15-45 „ ...	19	30	1	3	9	11	1	—
45-65 „ ...	28	7	2	—	17	4	1	—
65 and upwards	7	7	1	1	8	5	1	1
Totals ...	60	49	9	9	34	20	6	2

		New cases		Deaths	
		Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1940	...	194	34	57	10
1941	...	189	60	78	14
1942	...	137	36	65	8
1943	...	165	24	68	11
1944	...	124	32	54	5
1945	...	140	27	53	13
1946	...	113	27	57	10
1947	...	124	25	45	13
1948	...	118	16	67	6
1949	...	109	18	54	8

Location of Non-Respiratory Tuberculosis in the patients of all ages who were notified :—

LOCATION				Male	Female	Total
Bones and Joints	...	...	...	1	1	2
Genito-Urinary System	...	...	...	1	—	1
Abdomen	...	...	...	1	2	3
Glands	...	...	...	3	4	7
Other parts	...	...	...	3	2	5
Totals	...	...	...	9	9	18

The services dealing with the prevention of Tuberculosis and the treatment of those suffering from the disease have been augmented by the Bournemouth Voluntary Tuberculosis Care Committee.



This is composed of not less than 16 Members, representing various organisations interested in matters of Health, and particularly Tuberculosis.

"The ultimate aim of the Committee is to see that all cases of Tuberculosis in Bournemouth receive the maximum good from their treatment by removing causes of anxiety and so to hasten and make sure their ultimate recovery where such is possible."

In consequence valuable help has been given in money or in kind to meet special needs.

PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS,  
1925—RELATING TO PERSONS SUFFERING FROM  
TUBERCULOSIS IN THE MILK TRADE

No action has been required.

SECTION 172 OF THE PUBLIC HEALTH ACT, 1936—  
RELATING TO THE COMPULSORY REMOVAL TO HOSPITAL  
OF PERSONS SUFFERING FROM TUBERCULOSIS.

No action has been taken.

### WATER SUPPLY

Samples of water have been taken at various points within the Borough and submitted for chemical and bacteriological examination. They were all reported upon favourably.

### SEWAGE DISPOSAL

After the Borough boundaries were extended in 1931, works were provided in Kinson for the treatment of the sewage in that area. The remainder of the sewage as is customary in seaside resorts is discharged after a process of disintegration into the sea. The Boroughs of Poole and Christchurch also discharge sewage into the bay and the populations of the three towns and the number of visitors is rapidly increasing. The question arises, what quantity of sewage can be received by the sea at any particular time without the creation of a nuisance. The subject received the



consideration of the Councils concerned prior to the War and an extensive scheme for the disposal of the sewage by more efficient methods was presented. The work, if undertaken, will take several years to complete and will be costly, but such a scheme should ultimately be a great asset to the town and an early decision is called for.

## SANITARY CIRCUMSTANCES OF THE AREA

The following details have been supplied by the Senior Sanitary Inspector summarising the activities of his Section during the year :—

### (1) NUISANCES

Complaints received and investigated	...	...	...	...	...	1407
Statutory Nuisances found	...	...	...	...	...	994
Statutory Nuisances abated	...	...	...	...	...	813
Total number of visits re above	...	...	...	...	...	5005

### (2) DRAINAGE WORK

Visits to Buildings in course of construction	...	...	...	...	...	2271
Tests applied to drainage at the above	...	...	...	...	...	1943
Defects found and remedied	...	...	...	...	...	418
Visits to existing buildings re drainage	...	...	...	...	...	1253
Tests applied to drainage at the above	...	...	...	...	...	517
Defects found and remedied	...	...	...	...	...	253
Cesspools built	...	...	...	...	...	14
Cesspools abolished and drains connected to sewer	...	...	...	...	...	36
Private sanitary surveys made	...	...	...	...	...	23

### (3) REFUSE ACCOMMODATION

Number of dustbins provided following service of notices	...	...	...	...	...	465
--	-----	-----	-----	-----	-----	-----

### (4) DISINFESTATION

Visits to verminous premises	...	...	...	...	...	131
Premises treated with insecticides	...	...	...	...	...	37
Wasps' nests destroyed	...	...	...	...	...	308

### (5) INFECTIOUS DISEASES AND DISINFECTION

Visits in connection with enquiries	...	...	...	...	...	264
Number of rooms disinfected	...	...	...	...	...	661
Number of articles disinfected	...	...	...	...	...	2193
Number of articles destroyed	...	...	...	...	...	273



## (6) HOUSING

*(Housing Act, 1936 and Public Health Act, 1936)*

Total number of houses inspected for housing defects ... ..	906
Total number of visits made for the above purpose ... ..	3192
Houses found not to be in all respects reasonably fit for human habitation ... ..	580
Defective houses made fit following service of formal and informal notices (including outstanding notices brought forward from the year 1946) ... ..	422

## (7) OVERCROWDING

*(Housing Act, 1936—Part IV)*

Houses inspected re alleged overcrowding ... ..	146
Houses found to be overcrowded ... ..	54
Number of cases of overcrowding referred to the Housing Manager ...	39
Number of cases of overcrowding abated ... ..	59
Number of houses visited to ascertain "permitted number" ... ..	517
Number of rooms measured to ascertain "permitted number" ... ..	1714

## (8) TENTS, VANS, SHEDS AND CAMPING SITES

Number of visits made to tents, vans, etc. ... ..	56
Licences to station caravans granted ... ..	9
Camping grounds licensed ... ..	5

## (9) ATMOSPHERIC POLLUTION

During the year complaints were received regarding smoke or grit nuisances from 13 factory chimneys and in 10 instances statutory nuisances were found. Of these 8 have been abated.

In connection with this work, 41 half-hour observations were made of factory chimneys and 31 visits were made to industrial premises.

Several of the nuisances have been caused through the burning of trade refuse ; others have been caused by the emission of grit due to poor quality fuel.

In two instances the advice and assistance of the Technical Officers of the Ministry of Fuel and Power have been sought and readily given.

Further application has been made to the Ministry of Health for confirmation of a Bye-Law stipulating a limit as to the amount of black smoke which an industrial chimney may emit. It was felt by the Ministry that the present time is not opportune for the introduction of such a bye-law.



## (10) FACTORIES

*(Prescribed particulars on the administration of the Factories Act, 1937)*

## PART I OF THE ACT

1.—INSPECTIONS for purposes of provisions as to health.

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	748	235	4	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...	362	183	33	Nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	2	Nil	Nil	Nil
TOTAL	1112	418	37	Nil

## 2.—CASES IN WHICH DEFECTS WERE FOUND.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	Referred By H.M. Inspector (5)	
Want of cleanliness (S.1) ...	4	4	—	3	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ...	1	—	—	1	—
(b) Unsuitable or defective ...	26	24	—	4	—
(c) Not separate for sexes ...	3	2	—	1	—
Other offences against the Act (not including offences relating to Outwork) ...	29	6	22	—	—
TOTAL	63	36	22	9	Nil



# **PART VIII OF THE ACT**

## **OUTWORK**

(Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of out-workers in August list required by Section 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel (Making, etc.)	78	Nil	Nil	Nil	Nil	Nil

## (11) SHOPS ACTS, 1912-1936

Total number of visits	...	...	...	...	...	...	100
Contraventions found and remedied	...	...	...	...	...	...	3

## (12) RODENT CONTROL

(*Rats and Mice (Destruction) Act, 1919 and the Infestation Order, 1943*)

Complaints received and investigated	...	...	...	...	...	1562
Dwellinghouses surveyed	...	...	...	...	...	5667
Business premises surveyed	...	...	...	...	...	169
Land surveyed	...	...	...	...	...	60
Premises where poison baits were laid and taken	...	...	...	...	...	2822
Rats destroyed (bodies found)	...	...	...	...	...	1337
Estimated number of rats killed after baiting	...	...	...	...	...	5772

Early in the year the public sewers were test-baited with negative results at approximately 500 points and from this fact and from observations made, it may be assumed that Bournemouth's sewers are free from rats.

The Foreshore, from Hengistbury Head to Alum Chine, also the Pleasure Gardens, were surveyed and treated twice during the year.

The Iford refuse tip has been under almost continual treatment and complaints in that area have been greatly reduced. The King's Park tip now disused, has been kept under observation and treated for minor infestations. The Redhill tip, also kept under observation has been free from rats. The Refuse Destructor has been baited on several occasions, with good results.

From the increase in the number of complaints received, it would appear that the general public are taking a greater interest in rat destruction and more private residents are availing themselves of the free service provided by the Council for this purpose.



## (13) PHARMACY AND POISONS ACT, 1933

Shopkeepers who are not registered pharmacists and who retail certain poisonous substances (e.g. weed-killers, disinfectants and insecticides) to the general public are required to have their names entered in the local authority's list of persons entitled to sell such poisons.

At the end of 1949, there were 277 of these "listed sellers" in the Borough, and during the year 346 visits were made by the Sanitary Inspectors to control the sale of Part II poisons. The 18 contraventions observed were remedied following informal action.

## (14) MISCELLANEOUS INSPECTIONS

<i>Description</i>	<i>Number made</i>
Young Persons (Employment) Act, 1938 ... ..	87
Offices ... ..	56
Public Conveniences... ..	257
Places of Entertainment ... ..	48
Ponds, ditches and watercourses ... ..	38
Piggeries and stables ... ..	100

## INSPECTION AND SUPERVISION OF FOOD

MILK AND DAIRIES ORDER, 1926 AND MILK AND DAIRIES  
REGULATIONS, 1949

Number of producers in the Borough registered to sell milk wholesale ... ..	17
Number of producers in the Borough registered to sell by retail ... ..	1
Number of retail purveyors registered ... ..	90

## INSPECTIONS

Dairies ... ..	260
Cowsheds ... ..	66
Milkshops ... ..	130
Pasteurising plants ... ..	76



## MILK (SPECIAL DESIGNATIONS) ORDERS, 1936-1946

The following licences were in operation during the year :—

*Tuberculin Tested Milk*

Producers' licences	...	...	2
Bottlers' licences	...	...	4
Dealers' licences ...	...	...	5

*Accredited Milk*

Producers' licences	...	...	6
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*Pasteurised Milk*

Pasteurising establishments	...	...	3
Dealers' licences ...	...	...	11

183 samples of designated milk were submitted to the Public Analyst who reported that all of these complied with the prescribed standards.

Heat treated milk	...	...	...	1
Tuberculin tested milk	...	...	...	57
Tuberculin tested (pasteurised) milk	...	...	...	20
Accredited milk	...	...	...	25
Pasteurised milk	...	...	...	80
				—
				183
				—

In addition, 4 samples of raw ungraded milk were taken, each of which complied with the standard prescribed for Accredited Milk.

## SLAUGHTERHOUSES

One slaughterhouse controlled by the Ministry of Food was in use throughout the year. 300 visits were made by the Inspectors to examine carcasses and offals. One licenced slaughter-house was also occasionally used for the slaughter of cottagers' pigs.



## CARCASSES INSPECTED AND CONDEMNED

	<i>Cattle excluding cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and lambs</i>	<i>Pigs</i>
Number killed ... ..	786	1100	1051	2759	228
Number inspected ... ..	786	1100	1051	2759	228
<b>All diseases except Tuberculosis—</b>					
Whole carcasses condemned	1	—	3	3	2
Carcasses of which some part or organ was condemned	371	487	2	135	25
Percentages of the number inspected affected with disease other than Tuberculosis ... ..	47.3%	44.3%	0.5%	5.0%	11.4%
<b>Tuberculosis only—</b>					
Whole carcasses condemned	4	10	—	—	5
Carcasses of which some part or organ was condemned	169	272	3	—	19
Percentage of the number inspected affected with Tuberculosis ... ..	22.0%	25.7%	0.3%	—	10.5%

## INSPECTION AND CONTROL OF OTHER FOOD PREMISES

More than five thousand visits have been made by the Sanitary Inspectors to food premises and continued vigilance on the part of these officers is ensuring a high standard of hygiene in the handling, preparation and storage of food in shops, hotels and restaurants.

As a result of informal action taken, many substantial improvements have been effected at such premises and in numerous cases these have included the installation of adequate ablution facilities.

It is pleasing to note, however, that food traders are very conscious that cleanliness is "good business" and in many instances have modernised their premises and fitted new equipment in order to satisfy a growing public demand rather than to comply with a legal standard.

Visits to food premises were as follows :—

Bakehouses	...	...	248
Butchers' shops	...	...	775

Cafes and restaurants	...	671
Confectioners' shops	...	128
Cooked meat premises	...	697
Fishmongers' and poulterers' shops	...	473
Fried Fish shops	...	166
Greengrocers' shops	...	134
Grocers' shops	...	1005
Gut scraping works	...	62
Hotel kitchens	...	234
Ice Cream premises	...	924
Mineral Water Factories	...	4
School Feeding Centres	...	32
Stalls, kiosks and street traders' vehicles	...	23
Wholesale-meat markets	...	82

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5658

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## FOODSTUFFS CONDEMNED

Commodity	Tons	cwts.	qrs.	lbs.
Bacon	...	4		16 $\frac{3}{4}$
Barley Crystals	...			10
Barley Flakes	...		3	19
Barley Flour	...			15 $\frac{1}{2}$
Biscuits	...	3	1	25 $\frac{1}{4}$
Butter...	...	1		4 $\frac{1}{2}$
Cake Mixture...	...		1	8
Cheese...	...	1	3	7 $\frac{1}{2}$
Chitterlings	...	2		25
Chocolate Spread	...			25
Coffee Beans	...		3	22
Cooked Meat	...	1	1	0 $\frac{1}{2}$
Confectionery	...			7
Cornflakes	...			20
Creamola	...		2	4
Currants	...		1	22
Custard Powder	...			9
Dates	...		1	9 $\frac{1}{2}$
Eggs	...	4	3	25 $\frac{1}{2}$
Farinoca	...			14 $\frac{1}{2}$
Fish	7	18	1	15 $\frac{1}{2}$
Flour	...	1	3	26 $\frac{3}{4}$
Frozen Carrots	...		3	7
Fruit Relish	...			20
Gammon	...			8 $\frac{3}{4}$
Junket	...			1
Lettuce	...	7		



<i>Commodity</i>	<i>Tons</i>	<i>cwts.</i>	<i>grs.</i>	<i>lbs.</i>
Lobsters ... ..				13 $\frac{1}{4}$
Margarine ... ..			1	
Marzipan ... ..				26 $\frac{3}{4}$
Meat ... ..	21	8	1	26 $\frac{1}{2}$
Oatflakes ... ..				21
Oatmeal ... ..		1		
Onion Powder ... ..				20
Oysters ... ..				6
Pastry Mixture ... ..				18
Pickles ... ..			1	4 $\frac{1}{2}$
Pies ... ..			1	7
Pigs Feet ... ..			3	14
Plums, bottled ... ..				3 $\frac{1}{4}$
Potatoes ... ..			3	1
Poultry ... ..		18		5
Poussins ... ..			2	16
Prunes ... ..	1	15	3	14
Pudding Mixture ... ..		1	2	20 $\frac{1}{2}$
Rabbits ... ..		7		10
Salad Cream ... ..		1		17
Salami Sausages ... ..		2	1	21
Sauce ... ..		2		6
Sausages ... ..		1	1	12
Semolina ... ..		1		24
Sugar ... ..		1		10
Sultanas ... ..			2	2
Sweetphat ... ..				19
Sweets ... ..				18 $\frac{1}{2}$
Tea ... ..				10 $\frac{3}{4}$
Tinned Goods ... ..	10	3	3	6 $\frac{3}{4}$
Toffee ... ..				16
Tomato Ketchup ... ..				12
<b>TOTAL</b>	<b>45</b>	<b>2</b>	<b>1</b>	<b>15<math>\frac{1}{4}</math></b>

## ICE CREAM

284 samples of this commodity were submitted to the Methylene Blue test, with the following results :—

<i>Number of Samples</i>	<i>Result (Provisional Grade)</i>
186	I
45	II
34	III
19	IV

Grades I and II are satisfactory ; but where ice cream samples consistently fall within Grades III or IV they are considered to indicate defects of manufacture or handling which call for further investigation.

In each of the cases where the 53 unsatisfactory samples were obtained, the manufacturers or retailers were warned and their methods checked by the Sanitary Inspectors. In every instance satisfactory repeat samples were soon obtained.

In addition 2 samples of frozen fruit juice were taken and in each case the result proved satisfactory.

### SWIMMING BATH WATER

The 29 samples of water taken from public swimming baths for bacteriological examination were all found to be satisfactory.

### FERTILISERS AND FEEDING STUFFS ACT, 1926

The seven samples taken under this Act were reported upon by the Public Analyst as satisfactory.

### LEGAL PROCEEDINGS

The following legal proceedings were taken during the year.

Acts, Orders or Regulations under which proceedings were taken	Remarks	Result	Total Fines	Total Costs
Food and Drugs Act, 1938, Section 3	Action taken against a wholesaler for selling adulterated milk to a local dairyman	Case proved Fined £3 on each of 16 charges	£ 48	£ 16 s. 16



## WEATHER REPORT FOR THE YEAR 1949

1949, unlike this present year, was one which fulfilled all visitors expectations of holiday weather, but for its extremely high sunshine total and serious lack of rainfall during the summer months caused concern to farmers. The sunshine total of 2058.6 hours was 248.2 hours above the average, and the rainfall of 26.45 inches was 5.74 inches below the average of 32.19 inches.

Rainfall in all months was low except for September, October and November, which made up for the lack of rain earlier in the year, but came too late for growing crops.

### JANUARY

The most pleasant January for many years. Sunshine was nearly 18 hours above the average, and rainfall 2.3 inches below. The mean temperature which was 2.6 degrees higher than usual gave a mild month free from severe frosts. Fog occurred towards the end of the month, but it was the sunniest January since 1940, the driest since 1914 and the warmest since 1944.

### FEBRUARY

This month followed January's lead with a total of sun over 40 hours above the average. This was the sunniest February for 40 years, its total of 123 hours 42 minutes has only once been exceeded and that in 1909 by only 30 minutes! Rainfall was exceptionally low, the total was 1.28 inches, 1.25 inches below the average and half the month's total fell on one day (the 8th). The first six nights were the coldest but generally throughout the month there was a marked absence of severe frosts.



## MARCH

A moody month with sunny periods. The first snow of the winter ( $\frac{1}{2}$  inch) fell on the 5th ; there were cloudy days with occasional rain till the 14th. The rest of the month was sunny and rainless except for the 20th and there was some mist and fog on the last three days. Sunshine total of 131 hours 30 minutes was 5 hours 30 minutes above the average and rainfall of 1.48 inches was 1.37 inches below the average.

## APRIL

Summer-like conditions gave a pleasant Easter with 43 hours of sunshine during the four days. Easter Saturday had a record maximum of 79 degrees. The month was one of the sunniest of recent years, the sunshine total of 224 hours 54 minutes being over 64 hours above the average. Rainfall was a little below the average but all fell in five fairly heavy falls occurring mostly during the night. There was a slight thunderstorm on the 25th.

## MAY

Another month outstanding for continuous sunshine. The month's total was nearly 36 hours above the average and sunshine was recorded on every day. The first half of the month was particularly dry with practically no rain until the 15th ; during the latter half however, although it was sunny, there were three fairly heavy falls of rain. The last week was one of high winds and a gale occurred on the night of the 27th.

## JUNE

June lived up to its reputation and was a month of abundant sunshine and scarce rainfall. The month was sunny and dry apart from the first few days which gave unsettled conditions. The sunshine total of 282 hours 18 minutes was over 45 hours above the average and it was the sunniest June since 1940. It was also the driest since 1940, no rain at all falling between the 7th and the 30th.



## JULY

The sunniest and driest July since 1934. Sunshine was recorded on every day (66 hours above the average). Rainfall was 1.88 inches below the average and fell on only five days.

## AUGUST

August was once again another month with ample sunshine and scarce rainfall. Temperatures during the middle of the month reached well over the eighties. The shortage of rainfall was by this time causing concern, and falls apart from those on the 1st and 26th were very light. Sunshine was 35 hours above the average and rainfall 1.84 inches below the average of 2.70 inches. The only thunderstorm giving welcome rain to relieve the drought occurred on the morning of the 26th.

## SEPTEMBER

At last a month which although fine and warm gave a needed amount of rain. Rainfall was over 2 inches above the average and there were two days of very heavy rain—1.57 inches on the 13th and 1.98 inches on the 21st. (This fall on the 21st was the heaviest since September, 1939). Sunshine for a change was below the average, being 142 hours 30 minutes. (Average 192 hours 36 minutes).

## OCTOBER

A month of heavy rainfall and unusually violent storms. During the month 7.61 inches of rain fell and it was the wettest October for 40 years. (1909—7.89 inches). The greater part of the month's total fell during the ten days 17th to the 26th, when 6.20 inches were recorded. Sunshine did not fall badly below the average (only 17 hours) and totalled 121 hours 36 minutes, being recorded on 29 days. A maximum of 72 degrees was recorded on the 3rd and there was no frost during the month.



## NOVEMBER

With November the frosts began, but however were not severe. Conditions generally were cloudy and unsettled with occasional rain, but there were bright periods on several days. Sunshine total of 82 hours 42 minutes was only 7 hours 24 minutes below the average. There were early and late mists on several days and fog on two occasions, being particularly dense in the early hours of the 20th. Rainfall was above the average and was recorded on 17 days, 1.09 of the 3.82 inches total fell on the 20th.

## DECEMBER

Usually the month with the largest total of rain (an average of 4.08 inches) December had an unusually low total. Only 1.97 inches fell and although it rained on 20 days on only eleven did the fall exceed 0.03 inches. Sunshine was almost up to normal although the last ten days were dull and overcast. The mean temperature was above the average but during the first half of the month the winds were particularly boisterous and gave that bleak touch we tend to expect at the end of the year.

DENNIS B. MARSH, F.R.MET.SOC.

*Meteorological Registrar*



**SUNSHINE (Hours and tenths)**

	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
40 Year Average	63.8	85.3	126.0	160.5	236.5	237.0	229.8	204.8	192.6	138.3	90.1	66.2
1949	81.6	123.7	131.5	224.9	272.3	282.3	295.7	239.8	142.5	121.6	82.7	60.0
40 Year Average : 1,810.4 hours												
	1949 : 2,058.6 hours											

**RAINFALL (Inches)**

40 Year Average	3.06	2.57	2.85	2.00	1.70	1.27	2.26	2.70	2.30	3.91	3.45	4.08
1949	0.76	1.28	1.48	1.78	1.68	0.39	0.38	0.86	4.44	7.61	3.82	1.97
40 Year Average : 32.19 inches												
	1949 : 26.45 inches											

**MEAN TEMPERATURE**

40 Year Average	41.2	41.4	45.0	47.8	52.1	58.0	61.7	61.5	58.0	52.0	43.7	43.0
1949	43.8	43.5	43.2	51.4	53.0	60.6	65.3	64.9	63.4	55.9	45.9	44.7
40 Year Average : 50.4												
	1949 : 52.9											

DENNIS B. MARSH, F.R.MET.SOC.  
*Borough Meteorologist.*

## Report of the Public Analyst

For the Year ended the 31st December, 1949

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Mr. Mayor, Ladies and Gentlemen,

I have pleasure in submitting for your consideration my Report on the samples of foods and drugs, submitted for analysis during the year 1949.

A portion of this report, up to 1st August, 1949, has been compiled from records taken over at the decease of Dr. R. Pendrill Charles, your former Public Analyst.

The total number of samples submitted under the Food and Drugs Act, 1938 was 615, of which 158 were formal samples, 456 were informal samples, taken by your Foods and Drugs Inspectors, and one was submitted privately.

The number of adulterated samples was 29, representing a percentage adulteration of 4.7. This figure shows a slight decrease when compared with the previous year.



TABLE I

158 formal samples :—

Nature of sample	Examined	Genuine	Harmful Colouring Matter	Containing Preservative	Adulterated	Percentage Adulterated
Almond Paste ... ..	1	—	—	—	1	100.0
Milk ... ..	156	137	—	—	19	12.25
Sausages ... ..	1	1	—	—	—	—
	<u>158</u>	<u>138</u>			<u>20</u>	

TABLE II

456 informal samples :—

Nature of sample	Examined	Genuine	Harmful Colouring Matter	Containing Preservative	Adulterated	Percentage Adulterated
<b>Foods—</b>						
Arrowroot ... ..	2	2	—	—	—	—
Baby Food ... ..	2	2	—	—	—	—
Baking Powder ... ..	14	14	—	—	—	—
Barley Flour ... ..	3	3	—	—	—	—
Beers, Various ... ..	5	5	—	—	—	—
Blancmange Powder ... ..	1	1	—	—	—	—
Butter... ..	2	2	—	—	—	—
Butter, Peanut ... ..	1	1	—	—	—	—
Cachous scented ... ..	1	1	—	—	—	—
Cakes and Confectionery ... ..	11	11	—	—	—	—
Cake and Pudding Mixtures... ..	34	32	—	—	2	5.8
Chewing Gum ... ..	2	2	—	—	—	—
Chitterlings ... ..	1	1	—	—	—	—
Cochineal Colouring ... ..	1	1	—	—	—	—
Coffee ... ..	5	5	—	—	—	—
Coffee and Chicory Extract ... ..	5	5	—	—	—	—
Coffee Extract ... ..	1	1	—	—	—	—
Crab, Dressed ... ..	1	1	—	—	—	—
Creamy Toffee ... ..	1	—	—	—	1	100
Curry Powder ... ..	3	3	—	—	—	—
Custard Powder ... ..	5	5	—	—	—	—
Dripping ... ..	1	1	—	—	—	—
Eggs, Dried ... ..	3	3	—	—	—	—
Farinoca ... ..	1	1	—	—	—	—
Fatma... ..	1	1	—	—	—	—
Fish Cakes ... ..	1	1	—	—	—	—

TABLE II—*continued*

Nature of sample	Examined	Genuine	Harmful Colouring Matter	Containing Preservative	Adulterated	Percentage Adulterated
Flavouring Essence ...	9	9	-	-	-	-
Flour, Self raising ...	12	12	-	-	-	-
Gelatine ...	7	7	-	-	-	-
Golden Raising Powder ...	2	2	-	-	-	-
Gravy Salts and Powders ...	5	5	-	-	-	-
Haslet ...	1	1	-	-	-	-
Ice Cream ...	59	59	-	-	-	-
Jams and Preserves ...	14	14	-	-	-	-
Lactose Compound ...	1	1	-	-	-	-
Lemon Essence ...	1	1	-	-	-	-
Lemonade Crystals ...	5	5	-	-	-	-
Macaroni ...	2	2	-	-	-	-
Marshmallow ...	1	1	-	-	-	-
Maws, Pressed ...	1	1	-	-	-	-
Margarine ...	2	2	-	-	-	-
Meat Tenderiser ...	1	1	-	-	-	-
Milk ...	62	60	-	-	2	3.2
Milk, Channel Isles ...	2	2	-	-	-	-
Milk, Heat Treated ...	1	1	-	-	-	-
Milk, Dried ...	1	1	-	-	-	-
Mustard ...	2	2	-	-	-	-
Oatmeal ...	6	3	-	-	3	50
Oats, Rolled ...	2	2	-	-	-	-
Orange Juice ...	2	2	-	-	-	-
Pastes, Meat and Fish ...	6	6	-	-	-	-
Peas, Dried ...	1	1	-	-	-	-
Pears ...	3	3	-	-	-	-
Pies and Puddings (Meat) ...	6	6	-	-	-	-
Potato Crisps... ...	1	1	-	-	-	-
Processed Cheese ...	2	2	-	-	-	-
Rennet Essence ...	2	2	-	-	-	-
Salad Creams... ...	2	2	-	-	-	-
Salt ...	5	5	-	-	-	-
Sandwich Spreads ...	4	4	-	-	-	-
Sausages and Sausage Meats ...	9	8	-	-	1	11.1
Sauces... ...	11	11	-	-	-	-
Soups ...	2	2	-	-	-	-
Spices, Various ...	22	22	-	-	-	-
Soft Drinks ...	9	9	-	-	-	-
Sugar ...	3	3	-	-	-	-
Sweetfat ...	2	2	-	-	-	-
Sweetening Tablets ...	2	2	-	-	-	-
Sweet Oil ...	1	1	-	-	-	-
Tea ...	1	1	-	-	-	-
Toffee ...	1	1	-	-	-	-
Tinned Fish ...	6	6	-	-	-	-
Vanilla Essence ...	1	1	-	-	-	-
Veal Cutlet ...	1	1	-	-	-	-
Vinegars ...	7	7	-	-	-	-
Welsh Rarebit ...	1	1	-	-	-	-



TABLE II—*continued*

Nature of sample			Examined	Genuine	Harmful Colouring Matter	Containing Preservative	Adulterated	Percentage Adulterated
<b>Drugs—</b>								
Ammoniated	Tincture	of						
Quinine	...	...	3	3	-	-	-	-
Aspirin Tablets	...	...	2	2	-	-	-	-
Bicarbonate of Soda...	...	...	3	3	-	-	-	-
Camphorated Oil	...	...	1	1	-	-	-	-
Cream of Tartar	...	...	1	1	-	-	-	-
Chocolate Laxative	...	...	1	1	-	-	-	-
Epsom Salts	...	...	2	2	-	-	-	-
Eucalyptus Oil	...	...	2	2	-	-	-	-
Friar's Balsam	...	...	2	2	-	-	-	-
Fruit Salts	...	...	1	1	-	-	-	-
Germicides	...	...	2	2	-	-	-	-
Glauber's Salts	...	...	3	3	-	-	-	-
Glycerine	...	...	3	3	-	-	-	-
Liquorice Powder	...	...	1	1	-	-	-	-
Liquid Paraffin	...	...	3	3	-	-	-	-
Magnesia Powder	...	...	1	1	-	-	-	-
Olive Oil	...	...	1	1	-	-	-	-
Seidlitz Powder	...	...	1	1	-	-	-	-
Sulphur Ointment	...	...	1	1	-	-	-	-
Tincture of Iodine	...	...	2	2	-	-	-	-

TABLE III

Adulterated formal samples :—

No.	Nature of Sample			Nature of Adulterant	
172	Almond Paste	...	...	No binding agent	
56	Milk	...	...	23.5 per cent extraneous water	
25	Milk	...	...	3.3 per cent fat deficiency	
24	Milk	...	...	6.6 per cent fat deficiency	
51	Milk	...	...	11.7 per cent extraneous water	
54	Milk	...	...	15.2 per cent extraneous water	
55	Milk	...	...	9.4 per cent extraneous water	
38	Milk	...	...	12.8 per cent extraneous water	
39	Milk	...	...	27.0 per cent extraneous water	
40	Milk	...	...	15.2 per cent extraneous water	
41	Milk	...	...	18.8 per cent extraneous water	
44	Milk	...	...	15.2 per cent extraneous water	
45	Milk	...	...	11.7 per cent extraneous water	
46	Milk	...	...	11.7 per cent extraneous water	
22	Milk	...	...	8.2 per cent extraneous water	
49	Milk	...	...	14.1 per cent extraneous water	
50	Milk	...	...	10.5 per cent extraneous water	
35	Milk	...	...	15.2 per cent extraneous water	
36	Milk	...	...	10.5 per cent extraneous water	
37	Milk	...	...	18.8 per cent extraneous water	

TABLE IV

Private sample :—

No.	Nature of Sample	Genuine
1	Sugar ... ..	1

TABLE V

Adulterated informal samples :—

No.	Nature of Sample	Nature of Adulteration
25	Cake Mixture ... ..	Infested with flour moth
45	Cake Mixture ... ..	Infested with meal mites
102	"Creamy" Toffee ... ..	Misdescription, only 2.6 per cent fat
24	Milk ... ..	6.6 per cent Fat deficiency
25	Milk ... ..	2.9 per cent Fat deficiency
46	Oatmeal ... ..	Infested with meal mites
47	Oatmeal ... ..	Infested with meal mites
48	Oatmeal ... ..	Infested with meal mites
63	Sausages, Pork ... ..	6.4 per cent meat deficiency

TABLE VI

Excluding the 21 adulterated samples of milk, the remaining samples gave the following average proportions of fat and non-fatty solids.

Quarter	No. of Samples	Percentage Fat	Percentage of Non-fatty Solids
1st	59	3.46	8.74
2nd	54	3.52	8.88
3rd	49	3.60	8.65
4th	35	3.63	8.93
Whole Year	197	3.55	8.80

The average percentage of fat and non-fatty solids shown above, is very satisfactory, and compares favourably with the figures given for previous years.

TABLE VII

Ice cream—average percentage fat :—

Quarter	No. of Samples	Percentage Fat
1st	Nil	Nil
2nd	35	7.65
3rd	16	8.71
4th	8	7.00
Whole Year	59	7.85



Ice Cream deserves special mention, as it is now a favourite all the year round food, although naturally in greater demand in the summer. The samples examined showed an average fat content of 7.55 per cent. This is below the 8.5 per cent fat content, which one of the leading Ice Cream Trade associations recommends that its members should aim at. Unfortunately there is no official standard for fat, or other ingredients, and many manufacturers prefer to satisfy a demand, rather than reach a nutritional standard, although in the above series 21 samples were over the 8.5 per cent fat content previously referred to.

During the year 27 samples of Drugs were submitted, and they all satisfied the requirements of the British Pharmacopoeia.

14 unofficial samples of Baking Powder were submitted, and all conformed to the Statutory requirements.

11 samples of Cakes and Confectionery were examined, and no mineral oil was found in any sample. They were likewise free from harmful colouring matter and preservatives.

Of the 34 samples of Prepacked Cake and Pudding mixtures, 2 were found to be adulterated. The one contained meal mites, and the other contained web and larvae of the flour moth.

One sample of "Creamy" Toffee was examined and found to contain only 2.6 per cent fat. The fat was not butter fat, hence the term "Creamy" should not be applied, since it implies a higher fat content, the fat being butter fat.

Nine samples of flavouring essence were examined and found to be satisfactory.

Twelve samples of self raising flour were examined and conformed to the Statutory requirements.



Seven samples of gelatine also agreed with the limits of harmful material.

Fourteen samples of Jams and Preserves conformed with the Statutory requirements.

Six unofficial samples of Oatmeal were received, and three were found to be adulterated with meal mites.

Three samples of fresh Pears were received, and the arsenic present was within the limit of 1.4 parts per million, permitted in foodstuffs.

Out of nine samples of sausages and sausage meats, one sample of pork sausage was found to be deficient to the extent of 6.4 per cent pork.

Eleven samples of various types of sauces, and twenty-two samples of many varieties of spices were examined, and all found to be genuine.

Two samples of chewing gum were examined, they were sold free of sweet coupons and contained about 75 per cent paraffin wax. Paraffin wax has been used as an extender by the trade for a long period, and since the material is not swallowed, no objection can be made to its use.

All the other samples examined during the year were genuine and of good quality.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

G. V. JAMES,

*Public Analyst.*

5th April, 1950.



Seven samples of gelatine also agreed with the limits of bacterial material. Fourteen samples of Jams and Preserves conformed with the statutory requirements.

Six unofficial samples of Oatmeal were received, and three were found to be adulterated with meal. Three samples of fresh Eggs were received, and the arsenic present was within the limit of 1.4 parts per million, permitted in foodstuffs.

Out of nine samples of sausages and sausage meats, one sample of pork sausage was found to be deficient to the extent of 0.4 per cent pork.

Eleven samples of various types of sauces, and twenty-two samples of many varieties of spices were examined, and all found to be genuine.

Two samples of chewing gum were examined, they were sold free of sweet coupons and contained about 75 per cent paraffin wax. Lardine wax has been used and is expected by the trade for a long period, and since the material is not swallowed, no objection can be made to its use.

All the other samples examined during the year were genuine and of good quality.

I am, Sir, very respectfully,  
Your obedient servant,  
G. A. JAMES, Esq.

Mr. Mayor, Ladies and Gentlemen,  
I have the honor to acknowledge the receipt of your letter of the 14th inst. in relation to the examination of the samples of foodstuffs submitted to me for analysis.

Very respectfully,  
G. A. JAMES, Esq.

San Francisco, April 1950.



COUNTY BOROUGH OF BOURNEMOUTH

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EDUCATION COMMITTEE

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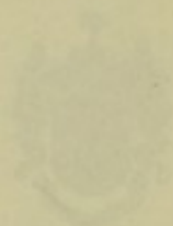
# Annual Report

of the

## School Medical Officer

Year 1949





COUNTY SCHOOL OF BOURNEMOUTH

EDUCATION COMMITTEE

# Annual Report

School Medical Officer

Year 1949

## TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

While compiling my twenty-second and final annual report, it is natural that I should contemplate the period between the commencement and termination of my appointment, for certain events of national or local importance have influenced the administration of the School Health Service and the welfare of the scholars.

In 1930, the Borough boundaries were extended and Kinson and Holdenhurst, two semi-rural areas were absorbed. For these, especially the former, much has been done. Large and imposing schools have been erected and the medical and nursing facilities supplied to the remainder of the borough made available. Unfortunately, clinics and other requisite buildings of the same order as the schools have not been forthcoming. Outbreaks of infectious diseases including Diphtheria, Scarlet Fever, Typhoid and Acute Poliomyelitis have occurred and taken their toll but during recent years, there have been striking changes. Cases of Diphtheria seldom occur and the modern methods of treating most infectious diseases are so effective that few complications arise, convalescence is hastened and the death rate markedly reduced. The Typhoid epidemic of 1936 affecting principally Bournemouth, Poole and Christchurch which caused the death of many children directed attention to Food hygiene and the importance of co-operating at all times with other local authorities. The War created its own peculiar problems for the school population was increased by the arrival of evacuees from other areas and at the same time the depleted staff found more work to do. Nevertheless, most of the routine services were maintained. The state of the children's teeth suffered to some extent from insufficient attention, but the Health Department is fortunate enough to possess three whole-time dentists who are steadily adjusting the deficiencies.

It is not possible to say whether the shortage of certain articles of diet during and since the War has affected unfavourably the general health of the children nor to state accurately how the latter are being influenced by bad housing conditions. But, for many families, these are shocking and it would be surprising if children brought up in such circumstances did not suffer in some respect whether this be physical, mental or moral or a combination of defects.



Other matters of importance have been noted in previous reports but I would like to thank all members of the Health Department for their co-operation and loyalty and to record my appreciation of the friendly assistance of Mr. Childs who has interpreted the functions of an Education Officer most pleasantly and done much to co-ordinate the efforts of the staffs of both departments.

Finally, I gratefully acknowledge the sympathetic attitude of the Chairman and members of the Education Committee who on various occasions have given much needed encouragement.

I am,

Yours faithfully,

H. GORDON SMITH.

March, 1950.

## SCHOOL HEALTH SERVICE STAFF.

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### *School Medical Officer:*

H. GORDON SMITH, M.D., B.S.(LOND.), M.R.C.S., L.R.C.P., D.P.H.

### *Deputy School Medical Officer:*

IVOR ANDERSON MACDOUGALL, M.B.E., M.R.C.S., L.R.C.P., D.P.H.

### *Assistant School Medical Officers :*

CHARLES J. SANDERSON, M.R.C.S., L.R.C.P., D.P.H.

F. ANTON HEIMANN, M.D.(Breslau), L.R.C.P., L.R.C.S., L.R.F.P.S.

P. K. KEATING, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H.

### *Physiotherapist :*

E. R. DEACON, M.C.S.P.

### *Orthoptists :*

P. KEELAN, M.B.O.S.

M. DAND, M.B.O.S.

### *Senior Dental Officer :*

A. A. WOOD, L.D.S.

### *Assistant Dental Officers :*

E. M. JOHNSON, L.D.S.

J. M. WEBB, L.D.S.

### *Dental Attendants :*

D. M. COX, B. M. READ, N. WOODS

### *Speech Therapist:*

V. ABELSON

### *School Nurses :*

L. M. AUSTIN

C. V. BAILEY

E. I. BARTLETT

H. BEETSCHEN

W. R. BURROWS

P. M. CAREY

M. G. CORNISH

A. M. CRISP

E. M. GIBBS

G. HAMMOND

G. M. LUNN

C. M. MORGAN

S. STONER

E. TONKIN

E. TURNER

H. J. UNDERWOOD

### *Clerks :*

F. J. GOODE, E. G. PAYNE, J. W. PEAKE, M. H. W. WATTON

*All the above, with the exception of one nurse, the Speech Therapist and the Clerks, are part-time Officers of the School Health Service.*



Number of Primary Schools ...	...	...	31
Number of Secondary Modern Schools	...	...	6
Number of Secondary Grammar Schools	...	...	2
Average attendance	...	...	12,437
Average number on School Registers	...	...	13,750

In addition there are 80 pupils on the register of the Junior Technical School for Building.

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### CO-ORDINATION

All the Health Visitors are school nurses and therefore able to consider the needs of the whole family instead of devoting attention to individual members only. The link between the Maternity and Child Welfare Services and the School Health Service is particularly close, the former being antecedent to the latter so that a child should be under continuous supervision from birth or even earlier until it leaves school.

The Medical Officers also perform duties for both services and so do the Dental Officers.

The administration of all the Municipal Health Services is carried out in the same building, an arrangement which facilitates the keeping of records and the transfer of information.

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### SCHOOL HYGIENE

A few of the schools are old buildings which should be replaced as they have deficiencies to a variable degree in connection with heating, lighting, ventilation and general sanitation and it would not be practicable to reconstruct them.

Several schools have been built during recent years and are fine structures suitably sited so that they have adequate playgrounds and ample air-space.

On the whole, the defects in hygiene that are observed are of a minor nature and easily corrected.

### MEDICAL INSPECTION

Children have been inspected in the prescribed groups which are—

- (a) Pupils admitted for the first time to a maintained school.
- (b) Pupils attending a maintained primary school during the last year of attendance at such a school.
- (c) Pupils attending a maintained secondary school during the last year of attendance.

There were also periodic examinations at various ages of scholars in the Boys' and Girls' Secondary Grammar schools. Further, there were re-examinations and special examinations of scholars of all ages.



A TABLE SHOWING THE NUMBER AND NATURE OF THE DEFECTS FOUND DURING EXAMINATION OF CHILDREN IN THE PRESCRIBED AGE-GROUPS AND OF OTHERS "PERIODICALLY INSPECTED".

DEFECTS	Entrants 1,362		Children Aged 10 1,033		Children Aged 14 1,059		Secondary Gram. Pupils 1,037	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin ... ..	9	8	7	6	6	13	10	5
Eyes :—								
Defective Vision ...	9	4	130	93	155	77	188	58
Squint ... ..	24	—	18	—	7	—	1	—
Other ... ..	12	8	13	4	11	7	23	4
Ears :—								
Defective hearing ...	6	2	—	—	1	—	—	—
Otitis Media ... ..	5	—	1	—	1	—	1	—
Other ... ..	2	1	3	—	3	4	1	1
Nose and Throat ...	81	187	19	135	7	97	14	57
Speech ... ..	12	7	2	—	3	2	1	1
Cervical glands ...	1	66	1	13	—	5	1	3
Heart and Circulation ...	5	1	1	6	1	6	12	5
Lungs ... ..	8	6	5	—	2	3	3	3
Developmental :—								
Hernia ... ..	1	3	1	—	—	—	—	2
Other ... ..	2	1	3	—	1	2	2	1
Orthopaedic :—								
Posture ... ..	15	7	5	22	20	8	8	39
Flat foot ... ..	23	13	5	7	13	—	36	59
Other ... ..	27	13	9	7	10	2	29	10
Nervous System :—								
Epilepsy ... ..	—	—	1	—	1	—	—	—
Other ... ..	—	—	—	—	—	—	1	1
Psychological :—								
Development ... ..	20	9	1	3	1	—	—	—
Stability ... ..	1	1	—	—	—	—	—	—
Other ... ..	4	—	—	—	1	1	—	2
	267	337	225	296	244	227	331	251



## FINDINGS OF MEDICAL INSPECTION

### (a) *Uncleanliness.*

At routine medical examinations it is unusual to observe unclean heads. The periodic inspections by the school nurses reveal that the standard of cleanliness is high—in some schools very high—for the percentage of individual children found to be infested is approximately .7.

Bournemouth children as a whole have been regarded as clean and relatively few children could be described as grossly verminous.

The standard of cleanliness is tending to rise, a fact which can be explained to some extent by the substitution of new and more efficacious substances as cleansing agents for the less pleasant and more slowly acting remedies.

### (b) *General condition.*

As was mentioned in the last annual report a new system of classification has been introduced which can only serve as a rough index. It is noted that fewer children were placed in Group C (poor) than in 1948 and it is likely that there has been some improvement in the nutrition of the scholars.

### (c) *Minor ailments.*

These constitute a large group including sores, slight injuries and other skin conditions. Scabies has almost disappeared and while there have been cases of Ringworm of the body no child has been found to have Ringworm of the scalp. There have been many children with external eye disease and ear-defects.

### (d) *Eye defects.*

A considerable number of pupils have defective vision, the condition being more frequently observed in the seniors as would be expected.

### (e) *Defects of the nose and throat.*

It is not easy to explain why with such a clean atmosphere and favourable climate so many children have enlarged tonsils and adenoids. It will be seen that a large proportion of the entrants have been recommended for operation.

### (f) *Lung disorders.*

These were various though not numerous. Asthma is a fairly common condition. Tuberculosis is not. It has often been assumed



that Bournemouth has a large number of inhabitants suffering from Tuberculosis in which case one would expect to find many children with signs of the disease. Actually neither surmise is correct. It has not been practicable to submit children under 13 to mass radiography but the evidence obtained by this method of examination in respect of the rest of the population has been very satisfactory for the Director of the Portsmouth unit reported in 1949 that "the figures for Pulmonary tuberculosis not only show a gratifyingly low proportion of cases of active disease as compared with the proportion in other areas but also as compared with the previous survey."

(g) *Heart and Circulation.*

Few abnormalities were recorded. Organic heart disease in children is commonly the result of Acute Rheumatism the incidence of which seems to be low in Bournemouth.

(h) *Orthopaedic.*

During recent years greater attention has been directed to orthopaedic conditions and many defects have been discovered.

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## MEDICAL TREATMENT

The National Health Service Act, 1946, has in some ways affected the administration of the School Health Service, but the facilities provided for the treatment of the children have not been greatly varied or augmented, in fact there are still certain deficiencies.

The parents are in all cases informed as to the nature of the defects found and they are helped in every way possible to obtain appropriate treatment. Generally, the response of the parents is good, but in a few instances there has been lack of co-operation or even obstruction, so that appeals for help have been made to the National Society for the Prevention of Cruelty to Children from which organisation valuable assistance can always be anticipated.

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## MINOR AILMENTS

Children come to the clinics with a great variety of defects. Most of these can be dealt with on the premises but sometimes it is thought desirable to refer the child to a general practitioner or to a specialist.



The attendances at the Minor Ailments Clinics were :—

	<i>Primary</i>	<i>Secondary Modern</i>	<i>Secondary Grammar</i>	<i>Totals</i>
Charminster ...	1567	2	55	1624
East Howe ...	2499	745	—	3244
Malmesbury Park	810	351	25	1186
Pokesdown ...	335	97	1	433
Southbourne ...	829	380	1	1210
Winton ...	1207	10	3	1220
	<hr/> 7247	<hr/> 1585	<hr/> 85	<hr/> 8917

In addition to the above, there were 887 attendances of scholars who were submitted to 'Tuberculosis "Patch" tests.

### DEFECTS OF THE NOSE AND THROAT

Children requiring the services of a specialist are referred to the Hospital Authority which arranges for the necessary appointments to be made as regards examination and treatment. Those awaiting removal of tonsils and adenoids are included in a formidable waiting list of several hundreds ; the largest ever recorded was reached in 1949. The size of the waiting list has been influenced to a slight extent by the prevalence of Poliomyelitis which for a few weeks led to a cessation of operations. But it does not seem likely that really adequate facilities will be available in the near future and it is doubtful if it is fair to keep a child or its parents in anticipation of an operation which may not take place for two years. If there must be this waiting period, it would seem to be desirable to re-examine the waiting children from time to time in case the need of operative treatment is no longer present.

In 1949, 259 scholars were operated upon as compared with 301 in the previous year.

### VISUAL DEFECTS

The Supplementary Ophthalmic Services Regulations have enabled two specialists to undertake refractions at the Madeira Road and Pokesdown clinics. The children are dealt with promptly and the waiting period between the prescribing of glasses and their acquisition is being gradually reduced.



Number of children examined ... ..	1314
Number of attendances ... ..	1642
Number of children for whom glasses were prescribed :—	
New Cases ... ..	232
Old cases ... ..	395

Two orthoptists have been available for the treatment of 188 patients ; 74 of these were new cases referred by the ophthalmic surgeons.

72 children attended twice a week making a total of 901 treatments.  
501 periodical tests were given to patients who report at intervals of 1 to 3 months for a check-up.

54 children are on the waiting list for regular treatment.

16 children have received operative treatment.

10 children are awaiting operative treatment.

2 children have discontinued treatment on account of intractable amblyopia.

30 children have been discharged.

9 of these were cosmetically straight with intractable amblyopia, and,

9 who failed to obtain single binocular vision are cosmetically straight.

5 children have left the district.

7 children have failed to attend.

4 children were found to be unsuitable.

1 child has left school.

## ORTHOPAEDICS

Surgeons from Lord Mayor Treloar's Hospital have visited Malmesbury Park Clinic to which the following details apply.

Number of surgeon's sessions ... ..	21
Number of scholars seen by the surgeons ... ..	231
Number of new cases ... ..	85
Number of examinations made by surgeons ... ..	458
Number of cases remaining on the register on December 31st, 1949 ... ..	200

### Defects found.

Spastic conditions ... ..	8
Due to anterior poliomyelitis ... ..	11
Spinal curvature (Kyphosis, lordosis and scoliosis) ... ..	12
Postural ... ..	23
Congenital dislocation of hip ... ..	4
Deformities of foot ... ..	122
Other conditions ... ..	51



One whole-time physiotherapist attends the surgeon's sessions and between these holds classes for remedial exercises. She also gives electrical and ultra-violet light treatment. The following figures apply to physio-therapy only.

Total number of children attending	...	...	...	...	265
Number of new cases attending	...	...	...	...	101
Number of cases discharged	...	...	...	...	55
Total Number of treatments given	...	...	...	...	2803

22 children were received as in-patients at the Lord Mayor Treloar's Hospital.

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### SPEECH THERAPY

There is one whole-time speech therapist who visits schools in which she forms classes. The children are submitted to her after examination by one of the Medical Officers. He re-examines them at intervals and decides when treatment shall be discontinued. 98 scholars were treated and at the end of the year it was considered that 58 should continue to attend.

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### CHILD GUIDANCE

In this connection, there is a deficiency inasmuch as no clinic is specially provided. The psychiatrists at the Royal Victoria Hospital kindly examine children referred to them by the School Medical Officers but this cannot be regarded as a complete or suitable scheme. It is not practicable as a rule to have the children examined promptly and it is undesirable that they should have to attend an out-patients department of a general hospital where they may witness morbid incidents and come to regard themselves as patients. Moreover, when these children have been examined and all the factors assessed, experts are not available to keep them under supervision or to advise parents and teachers of the measures that should be adopted. Although accurate statistics are not forthcoming, there has been a tendency during recent years for the number of handicapped children to increase and the records of the Juvenile Courts testify to the complexity and gravity of the problem. This state of things should not cause surprise for the home conditions of very many families are depressing and degrading and the children and parents are suffering in consequence. Steps should therefore be taken in the immediate future to provide a comprehensive scheme which will include a properly constituted Child Guidance Clinic.



### Immunisation against Diphtheria

1253 scholars who received initial injections in early infancy received a re-inforcing dose. 97 others not so treated had their first course of two injections.

### Notifications of Infectious Diseases

The following relate to school children.

<i>Disease</i>	<i>No. of cases</i>
Scarlet Fever ... ..	56
Measles ... ..	832
Whooping-cough ... ..	37
Pneumonia ... ..	12
Acute Poliomyelitis ... ..	3
Acute Polio-encephalitis... ..	2
Scabies ... ..	13
Dysentery ... ..	1
Food-poisoning ... ..	1
	<hr/> 957 <hr/>

There were also 5 notifications of respiratory Tuberculosis and 7 of other forms of this disease.

### Following up

The Nurses visit the schools and make surveys in connection with cleanliness or the control of infection. They also see individual children as regards treatment or for other particular reason. It is sometimes necessary to call at the homes and interview the parents in order to advise them as to treatment or after-care.

The School nurses recorded the following :—

<i>Reason for visit</i>	
Eye defects ... ..	149
Ear, nose and throat conditions	401
Skin complaints ... ..	32
Uncleanliness ... ..	103
Miscellaneous ... ..	691
	<hr/> 1376 <hr/>

### Exclusion from School

Scholars were excluded for the following reasons.

Bronchitis	...	...	...	2
Chicken-pox	...	...	...	4
Impetigo	...	...	...	4
Scabies	...	...	...	7
Other skin conditions	...	...	...	5
Pharyngitis	...	...	...	6
Tonsillitis	...	...	...	5
Pyrexia	...	...	...	11
Uncleanliness	...	...	...	54
Miscellaneous	...	...	...	54
				<hr/>
				152
				<hr/>

### Open-Air Education

It is perhaps regrettable that there is not an open-air school maintained by the Education Authority. It has been found necessary to send 12 boys and 13 girls to residential open-air schools usually at some distance from Bournemouth which are provided by other authorities.

### Holiday Camps

During the summer months, it has been customary to send girls to the Guides' Camp at Dudsbury which is very conveniently situated a few miles outside Bournemouth and boys to a camp at Swanage.

In June, 40 girls and in July 60 boys were accommodated. The results are generally very beneficial and it would be an advantage if a larger number of children could be offered facilities.

### Employment of School Children

309 children aged 13 or more who wished to be employed outside school hours were medically examined and all of them were found to be fit for the purpose.

The occupations proposed were—

Errand-boys	...	...	...	44
News-boys	...	...	...	211
News-girls	...	...	...	31
Other	...	...	...	23
				<hr/>
				309
				<hr/>



32 other children were granted certificates to take part in public entertainments.

### **Other examinations**

67 Teachers were examined as a condition of appointment to the Authority's staff.

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## **THE PROVISION OF MEALS TO PRIMARY AND SECONDARY SCHOLARS**

### **Meals.**

The arrangements made for the provision of dinners have been expanded. 27 centres are now utilised. During the month of December, there was a daily average of approximately 6,000 children who were paying for their meals and some 540 were having them free of cost.

In all the schools, there has been a continuation of the scheme which enables scholars to obtain milk in school in 1/3rd pint bottles. The daily average of children supplied was 11,433.

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## **HEALTH EDUCATION**

The education of children in Hygiene takes place constantly but at times special emphasis is placed on the subject. In the schools the nurses during their visits stress the importance of personal hygiene. Naturally their task is made easier when the school buildings and the sanitary and washing equipment are of a modern type and kept in good order. Obviously an adequate supply of soap and clean towels is of prime importance.

At the feeding centres also there are opportunities of demonstrating how the food should be presented in a clean and appetising way and consumed in an orderly manner.

In many of the schools the parents have sessions at which speakers give addresses on a variety of subjects. At times a medical officer is invited to express his views. These events are certainly of value for the speaker has an opportunity of telling the parents what has been done for the children and of showing how with the co-operation of all concerned further improvements can be effected.

In March, there was a Health Week during which certain attractions were offered at the Town Hall. In addition to the display of films and the giving of lectures, there was an exhibition which illustrated many subjects relating to Health of interest to children and adults.



# Annual Report

## of the Senior Dental Officer

### **General Remarks.**

Complete dental treatment for every child under our care is of prime importance and this is always our objective. Many of the children whose treatment was commenced during 1949 will have this completed during the present year. Sometimes it was not possible to give complete treatment owing to the prejudice on the part of parents against fillings. Such prejudice is definitely decreasing as people become more conscious of the advantages of treating teeth in the early stages of decay. However, there still remains a small proportion of parents who cannot be convinced of this. The value of the School Dental Service would be enhanced by a shortening of the time intervals between school inspections, but more frequent visits to the schools at the expense of curtailing the treatment of the teeth would be of no advantage.

### **Central Clinic—Comments.**

Mrs. M. Redfern who was our dental officer at the Central Clinic resigned during the summer for family reasons, leaving on 29th August. She had only been able to carry out her duties on a part-time basis for four months prior to this. As a consequence the work in her area fell into arrears. We were fortunate in obtaining Mrs. Johnson as Dental Officer to succeed Mrs. Redfern. Mrs. Johnson commenced duty on 1st September and has worked hard to catch up with the work. She completed the treatment for those children who had been inspected by Mrs. Redfern and then carried out her first school inspection on 13th November at a school which had previously been visited twenty months before.

### **Winton Clinic—Comments.**

As I mentioned in my report for the year 1948 the large number of children living in the northern end of the town has resulted in Mrs. Webb having more work than any one dental officer could manage. She worked hard and reduced the time interval between her school inspections by 2 months (from 20 to 18 months). Another dental officer on our staff is greatly needed, and I am hopeful that our proposed new dental clinic at East Howe will be completed before the middle of the present year.



### **Pokesdown Clinic—Comments.**

I reduced my time-intervals between school inspections by about two months (from 16 to 14 months) and anticipate that before the end of the present year I shall be inspecting the schools in my area at intervals of one year or less.

### **Care of the Teeth.**

Every opportunity has been taken to give advice on this subject to parents and children. Whilst attending to a child's teeth a little extra time spent in this way will tend to reduce the extent of dental troubles in future years. Whenever practicable a talk on the care of the teeth has been given to the mothers who attended at school inspections but many mothers were not present at the schools and so some chairside advice was given ; although this reduced to some extent the output of fillings, ultimately, from a preventive aspect much will be gained.

Advice on the following lines was given :—

*Hygiene.* Much dental trouble can be prevented or minimized by the regular practice of oral hygiene.

*Diet.* Food of a cleansing nature such as an apple at the end of a meal is very beneficial to the teeth and is recommended.

### **The Equipment of the Dental Surgeries.**

During the year some items of equipment at the Central and the Winton Clinics were renewed. These were items which had been in use for many years. The dental clinic at Pokesdown was completed only just over two years ago and is very well equipped. A well fitted surgery provides encouragement to the dentist working on it and helps to increase efficiency.

### **Co-operation of Boscombe Hospital Staff.**

I should like to express my gratitude to the dental surgeons on the staff of Boscombe Hospital for the kind help they have given to the school dental service of Bournemouth during the year, 1949. My thanks are also due to the radiologists for excellent X-rays and reports. The South West Metropolitan Regional Hospital Board have decided to appoint a full time orthodontist with headquarters at Boscombe. In common with dentists in private practice in

the area, the school dental officers will be able to refer children to this specialist for treatment or advice. This service will be greatly welcomed and will prove of great benefit to the children.

### Co-operation of the Teachers.

Headmasters and teachers continued to give us all possible assistance and I am grateful for their kind co-operation.

A. A. WOOD.



# Medical Inspection Returns

Year Ended 31st December, 1949

**TABLE I.**

## MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

### A—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants ...	...	...	1362
Second Age Group ...	...	...	1033
Third Age Group ...	...	...	1059
Total ...			3454

Number of other Periodic Inspections ...	...	1037
Grand Total ...		4491

### B.—OTHER INSPECTIONS.

Number of Special Inspections ...	...	3574
Number of Re-Inspections ...	...	1331
Total ...		4905

### C—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with vermin).

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils
(1)	(2)	(3)	(4)
Entrants ...	9	257	263
Second Age Group ...	130	91	205
Third Age Group ...	155	85	198
Total (prescribed groups) ...	294	433	666
Other Periodic Inspections ...	188	125	287
Grand Total ...	482	558	953

TABLE II.

## A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

Defect Code No.	Defect or Disease	Periodic Inspections		Special Inspections	
		Number of defects		Number of defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin ... ..	32	32	—	—
5	Eyes— (a) Vision ...	482	232	1	1
	(b) Squint ...	50	—	—	—
	(c) Other ...	59	23	—	—
6	Ears— (a) Hearing ...	7	2	1	1
	(b) Otitis Media ...	8	—	—	—
	(c) Other ...	9	6	—	—
7	Nose or Throat ...	121	476	2	6
8	Speech ... ..	18	10	—	—
9	Cervical Glands ...	3	87	—	3
10	Heart and Circulation	19	18	1	1
11	Lungs ... ..	18	12	—	1
12	Developmental :—				
	(a) Hernia ...	2	5	1	—
	(b) Other... ...	8	4	—	—
13	Orthopaedic :—				
	(a) Posture ...	48	76	1	1
	(b) Flat foot ...	77	79	—	2
	(c) Other... ...	75	32	—	2
14	Nervous System :—				
	(a) Epilepsy ...	2	—	1	1
	(b) Other... ...	1	1	1	—
15	Psychological :—				
	(a) Development	22	12	—	—
	(b) Stability ...	1	1	—	—
16	Other ... ..	5	3	—	—



**B.—Classification of the General Condition of Pupils Inspected during the Year in the Age Groups.**

Age Groups	Number of Pupils Inspected	A (Good)		B (Fair)		C (Poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants ...	1362	411	30.18	912	66.96	39	2.86
Second Age Group ...	1033	217	21.01	777	75.22	39	3.77
Third Age Group ...	1059	554	52.31	494	46.65	11	1.04
Other Periodic Inspections...	1037	493	47.54	528	50.92	16	1.54
Total ...	4491	1675	37.3	2711	60.36	105	2.34

**TABLE III.  
INFESTATION WITH VERMIN**

(i) Total number of examinations in the schools by the school nurses or other authorised persons ...	34,139
(ii) Total number of individual pupils found to be infested ...	264
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ...	NIL
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ...	NIL

**TABLE IV.  
TREATMENT TABLES**

**Group I.—MINOR AILMENTS** (excluding Uncleanliness, for which see Table III).

	Number of Defects treated or under treatment during the year
(a)	
SKIN :—	
Ringworm—Scalp :—	
(i) X-ray treatment ...	—
(ii) Other treatment ...	—
Ringworm—Body ...	10
Scabies ...	13
Impetigo ...	27
Other skin diseases ...	1268
Eye Disease (External and other, but excluding errors of refraction, squint and cases admitted to hospital) ...	248
Ear Defects (Treatment for serious diseases of the ear, e.g. Operative treatment in hospital is not recorded here) ...	134
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains, etc.)	751
Total ...	2451
(b) Total number of attendances at Authority's minor ailments clinics ...	8,917

**Group II.—DEFECTIVE VISION AND SQUINT (excluding Eye Disease treated as Minor Ailments—Group I).**

	No. of defects dealt with
ERRORS OF REFRACTION (including squint) ... ..	1314
Other defect or disease of the eyes (excluding those recorded in Group I) ... ..	—
Total ...	1314
Number of Pupils for whom spectacles were (a) Prescribed ...	645
(b) Obtained ...	618

**Group III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.**

	Total number treated
Received operative treatment :—	
(a) for adenoids and chronic tonsillitis ... ..	259
(b) for other nose and throat conditions ... ..	—
Received other forms of treatment ... ..	—
Total ...	259

**Group IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.**

(a) Number treated as in-patients in hospitals or hospital schools ... ..	24
(b) Number treated otherwise, e.g. in clinics or out-patient departments ... ..	452

**Group V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.**

Number of pupils treated :—	
(a) under Child Guidance arrangements ... ..	—
(b) under Speech Therapy arrangements ... ..	98

**TABLE V.**  
**DENTAL INSPECTION AND TREATMENT**

(1) Number of pupils inspected by the Authority's Dental Officers :—	
(a) Periodic age groups ... ..	7376
(b) Specials ... ..	2663
(c) TOTAL (Periodic and Specials) ... ..	10039
(2) Number found to require treatment ... ..	7354
(3) Number actually treated ... ..	3882
(4) Attendances made by pupils for treatment ... ..	9292
(5) Half days devoted to (a) Inspection ... ..	56
(b) Treatment ... ..	1185
Total (a) and (b) ...	1241



							Total number treated
(6)	Fillings	Permanent teeth	...	...	...	...	3888
		Temporary teeth	...	...	...	...	2092
Total							5980
(7)	Extractions	Permanent teeth	(a)	Caries ...	...	461	717
			(b)	To relieve over- crowding	...	256	
		Temporary teeth	...	...	...	4317	
			Total				
(8)	Administration of general anaesthetics for extraction						1864
(9)	Other operations	(a)	Permanent teeth	...	...	1514	
		(b)	Temporary teeth	...	...	650	
Total (a) and (b)							2164
(10)	Dentures and space retainers fitted			...	...	...	27

#### Orthodontics.

Cases treated during the year	...	...	...	181
Attendances	...	...	...	2132
Appliances provided	...	...	...	173
Cases completed during year	...	...	...	26

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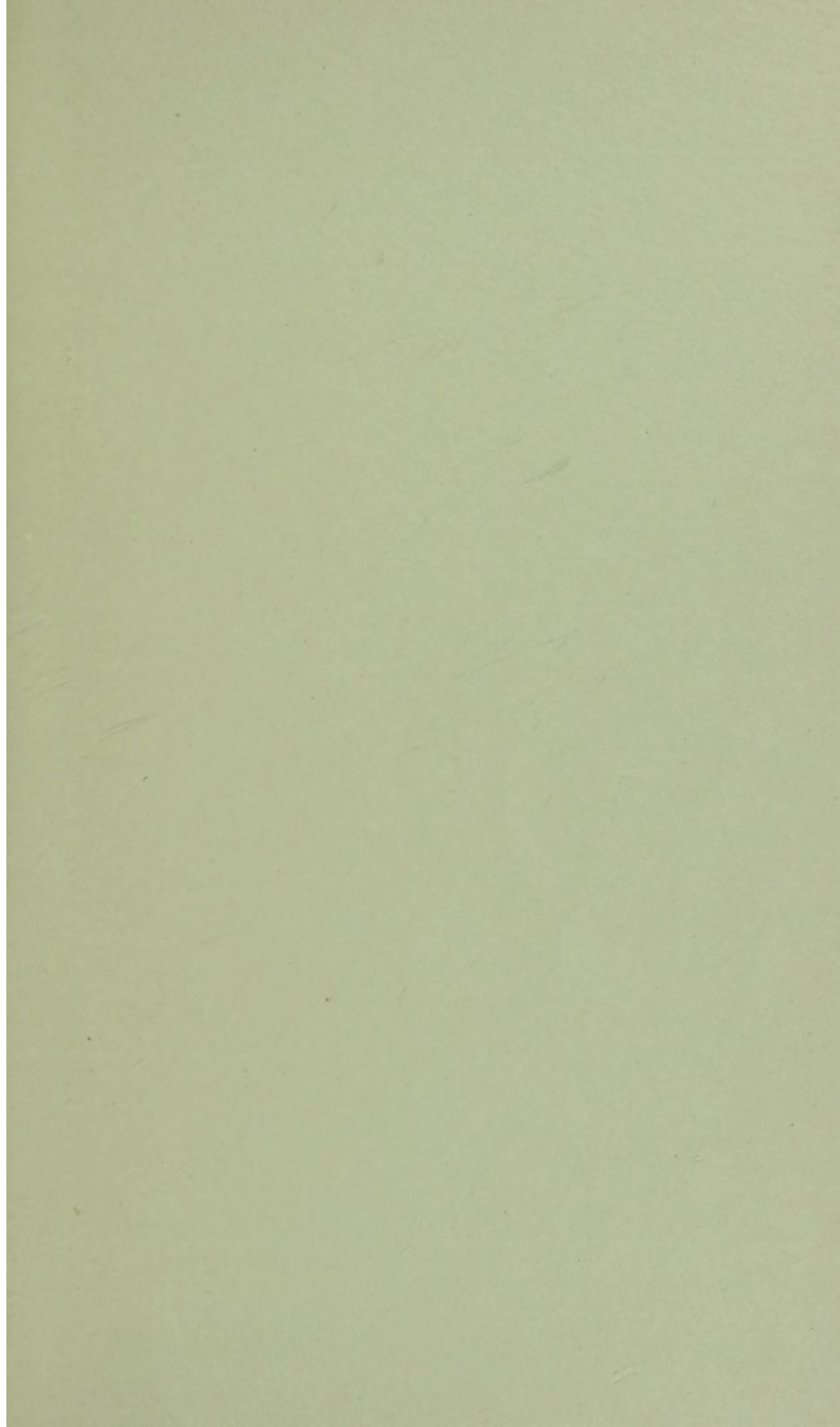
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