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COUNTY BOROUGH OF BOURNEMOUTH

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# Annual Report

of the

Medical Officer of Health

and

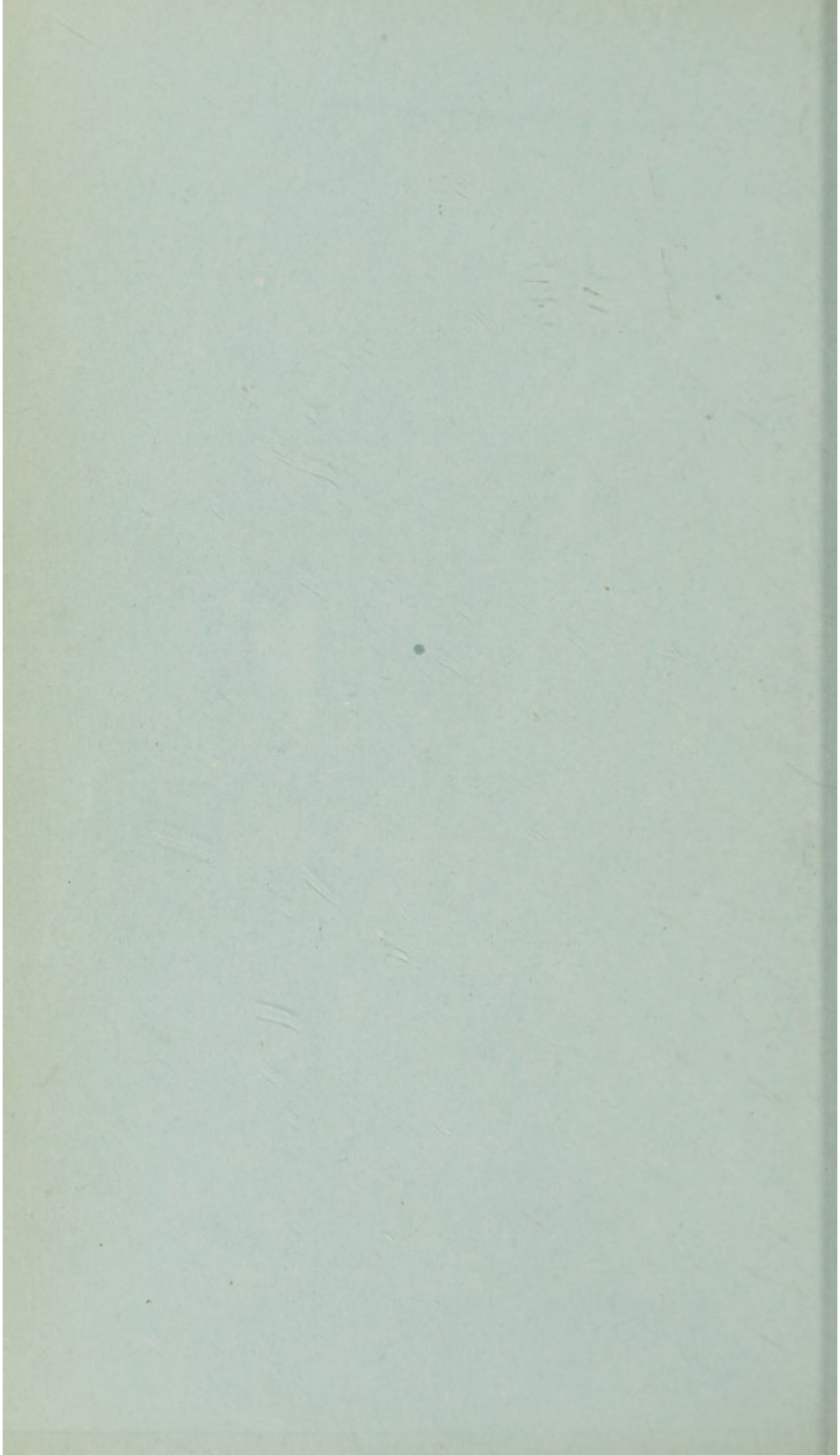
School Medical Officer

for the Year 1951

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





COUNTY BOROUGH OF BOURNEMOUTH

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PUBLIC HEALTH DEPARTMENT,  
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COUNTY BOROUGH OF BOURNEMOUTH

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# ANNUAL REPORT

OF THE

## Medical Officer of Health

FOR THE YEAR 1951

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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 to you my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth. This is the seventy-third Annual Report in the series.

Reference to the statistical tables in this Report and to the notifications of infectious diseases is undoubtedly encouraging as an index of the state of health of the town, and indeed of national progress. It is true to state that the majority of the notifications of death received relate to persons in the seventh or eighth decade of life, with not a few in the ninth. More and more babies survive the hazardous first year of life and maternal mortality has fallen to new low levels.

These gratifying inroads into mortality should on no account be permitted to give rise to complacency regarding the state of the nation's health. Whilst certain individual diseases like diphtheria have been conquered, there remains to be tackled that great volume of illness which continues to beset us and which is indicated by the high figures of sickness absenteeism and the millions expended

annually on drugs under the National Health Service Act, quite apart from the sum voluntarily expended by the public (estimated at over two million pounds per annum) on the so-called patent medicines.

Hospital waiting lists are as long as ever and indications that the mental health of the community is ailing are to be seen in the country's statistics for crime, broken homes, child neglect and juvenile delinquency. All these problems, including cancer, rheumatism and tuberculosis, are a great challenge to the Public Health Services at a time when it is to be regretted that recruitment of doctors into the Service is negligible.

There are indications that the pattern of disease is changing and this is due in part to the powers of adaptability of the disease causing micro-organisms, which can acquire altered pathogenicity when they are ejected from established strongholds by modern drugs.

It behoves the Public Health Service, and indeed the general public, to maintain vigilance in the matter of food and nutrition. In spite of American experience and the evidence of animal experiments, bread is still sold containing the chemical agene. More and more of our food is sprayed and treated with powerful chemicals, which have already resulted in the death of several of the operatives. What of the effects on the consumer ?

It has been shown in the matter of clean food that much can be achieved by the combined action of the Public Health Department and the food handler. It is equally important to ensure that the food we strive to keep clean is worth eating from a nutrition standpoint by virtue of freshness, wholesomeness, good cultivation and freedom from added poisons.

Two notable advances which have occurred during the year are the opening of the Occupation Centre and the establishment of the Child Guidance Centre. The Occupation Centre, capable of accommodating up to 25 persons, has done an excellent year's work and is a considerable asset to the Mental Health Service of the town. The Child Guidance Centre, under the able direction of Dr. W. H. Whiles, Consultant Children's Psychiatrist, is most amply proving its value and an account of its work, written by Dr. Whiles, is included in the School Health section of this Report. For the

time being Dr. Whiles has two consultant sessions per week at the Centre, and I feel the time is coming when the South West Metropolitan Regional Hospital Board should be asked to permit him a further session each week for this important work.

Before concluding this introduction to my Report, I wish to make respectful reference to the death during the year of Alderman Dr. W. Asten, who, as Chairman of the Health Committee for twenty years, gave so much thought and devoted service to the advancement of the Public Health Services of this town.

In conclusion, I would express with pleasure my sincere thanks to the Chairman and members of the Health Committee for the support and encouragement I have received from them throughout the year, and to all members of the Public Health Department staff I give my thanks for most loyal and competent service.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

IVOR A. MACDOUGALL.



# Health Committee and Staff

as at 31st December, 1951

## HEALTH COMMITTEE

The Mayor (Councillor F. J. McInnes, J.P.)

Alderman J. H. Turner (*Chairman*)

Councillor A. H. Abbott (*Vice-Chairman*)

### *Council Members*

Alderman	J. B. C. Beale, J.P.	Councillor	J. G. Middleton
"	H. C. Brown	"	F. A. W. Purdy
"	J. J. Empson, J.P.	"	S. G. Quayle
"	T. Peaty	"	V. T. Searle-Jordan
"	A. J. Playdon	"	C. E. Walker, M.B.E., M.A.
Councillor	Mrs. E. L. A. Hockey, J.P.	"	Mrs. M. C. Wall
"	Mrs. E. G. Little		

### *Other Members*

F. S. Coleman, Esq., B.Sc., M.R.C.S., L.R.C.P.

The Rev. A. J. Elgar

A. A. F. Shepherd, Esq., L.R.C.P., L.R.C.S.

N. Ross Smith, Esq., F.R.C.S.

R. G. Torrens, Esq., B.A., B.D.Sc.

## PUBLIC HEALTH DEPARTMENT

Medical Officer of Health, School Medical Officer, and Medical Referee to Cremation Authority	Ivor Anderson MacDougall, M.B.E., 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 ...	Kenneth O. A. Vickery, M.D., B.S., 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.H.
Senior Dental Officer ... ..	A. A. Wood, L.D.S.
Dental Officers ... ..	J. M. Webb, L.D.S. N. J. Wood, L.D.S.
Dental Officers (part-time) ...	M. B. Redfern, L.D.S. J. K. Donald, 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, M.C. + † A. J. Mortimer + †    O. Stewart* † R. C. Sweet + † S. Tweedie + †
District Sanitary Inspectors ...	W. Vincent Morris,* D. J. Mortimore,* S. Powell,*
Superintendent Health Visitor ...	W. M. Melhuish
Health Visitors (and School Nurses) ... ..	L. M. Austin, E. I. Bartlett, C. V. Bailey, H. Beetschen, W. Burrows, P. M. Carey, M. G. Cornish, E. M. Gibbs, G. Hammond, G. M. Lunn, C. M. Morgan, E. M. Smith, E. Tonkin, E. Turner, D. M. Wellsted
Municipal Midwives ... ..	E. M. Chetland, M. Harris L. Hawthorne, H. E. Holmes M. H. Popham, E. M. Schoch
Superintendent, Home Nursing Service ... ..	V. A. Scott
Senior Nurse, Home Nursing Service ... ..	F. Grindrod
Educational Psychologist ...	B. W. Foxley
Psychiatric Social Worker ...	M. R. Barnes
Duly Authorised Officers ...	F. H. Lewis, G. O. Willis, F. J. Goode (Part-time)
Dental Attendants ... ..	J. Blant, D. M. Cox, B. D. M. Read, N. Woods
Chief Administrative Assistant and Chief Clerk ... ..	A. W. Hurley
Senior Administrative Assistant	J. W. Roberts
Secretary to Medical Officer of Health ... ..	Mrs. M. Shipp
Section Clerks ... ..	G. O. Willis, F. J. Goode, G. A. Capes
Clerks ... ..	S. C. Banks, H. R. Bryan, K. F. Clarke, M. A. Cormack, E. H. Davis, G. A. Fox, I. B. Hopper (part-time), E. G. Payne, J. A. Perry, J. W. Peake, R. W. Rowe, R. Smith, E. Sweet, S. G. Tarrant, M. Watton
Home Help Organiser ... ..	Mrs. L. A. Horwood
Ambulance Depot Superintendent	F. A. Cutler
Supervisor, Occupation Centre ...	S. Nott
Assistant Supervisor (Temporary), Occupation Centre ... ..	K. E. Perry
Assistant (Temporary), Occupation Centre ... ..	C. A. M. Palmer
Superintendent of Public Conveniences and Mortuary ...	A. E. Tarrant, M.M.
Sanitary Inspectors' Assistants ...	G. Christy, A. E. Gerault, M. C. Russell, H. E. Slocombe, J. Tyrell
Rodent Officer ... ..	F. Bennett
Rodent Operatives ... ..	R. Burns, R. Hibberd, H. Maher, A. McGrath, J. Richards, A. Thomas
Disinfector ... ..	H. J. Burrige

## PART-TIME OFFICERS

—Chest Physicians	...	...	W. H. Tattersall, M.A., M.D. H. R. Paterson, M.A., M.R.C.S., L.R.C.P., D.P.H. D. J. ap Simon, M.A., M.B.
—Consultant Children's Psychiatrist			W. H. Whiles, M.R.C.S., L.R.C.P., D.P.M.
Public Analyst	...	...	G. V. James, M.B.E., M.Sc., Ph.D., F.R.I.C.
Meteorologist	...	...	D. B. Marsh, F.R.Met.Soc.

\* 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.

—Employed by South West Metropolitan Regional Hospital Board.

## General Statistics

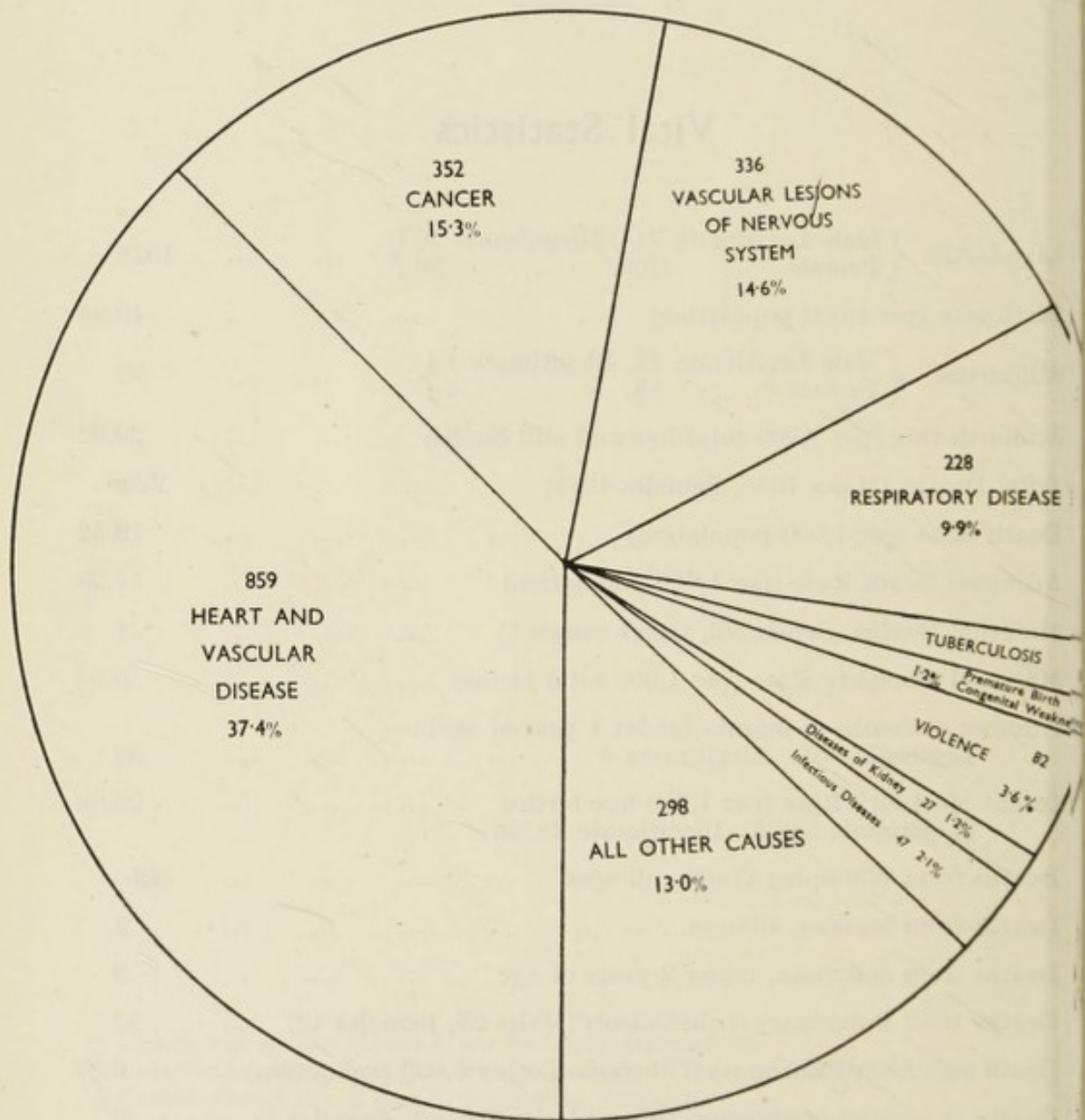
Area of the County Borough	...	11,627	acres
Estimated Civilian Population	...	138,900	
Rateable Value	... ..	£2,015,698	
Product of 1d. rate	... ..	£8,176	

## Vital Statistics

Live births	$\left\{ \begin{array}{l} \text{Male Legitimate 714, Illegitimate 56} \\ \text{Female ,, 700, ,, 50} \end{array} \right\}$	... ..	1520
Birth rate (per 1,000 population)	... ..	...	10.94
Stillbirths	$\left\{ \begin{array}{l} \text{Male Legitimate 12, Illegitimate 1} \\ \text{Female ,, 15, ,, 4} \end{array} \right\}$	... ..	32
Stillbirth rate (per 1,000 total live and still births)	... ..	...	20.62
Total Deaths (Males 1038, Females 1257)	... ..	...	2295
Death Rate (per 1,000 population)	... ..	...	16.52
Adjusted Death Rate (per 1,000 population)	... ..	...	11.39
Maternal Deaths (Sepsis Nil, Other causes 1)	... ..	...	1
Maternal Mortality Rate (per 1,000 total births)	... ..	...	0.64
Number of deaths of infants (under 1 year of age) :—			
Legitimate 35 Illegitimate 3	... ..	...	38
Infant Mortality Rate (per 1,000 live births)	... ..	...	25.00
(Legitimate 24.75 Illegitimate 28.30)			
Deaths from Whooping Cough, all ages	... ..	...	Nil
Deaths from Measles, all ages...	... ..	...	2
Deaths from diarrhoea, under 2 years of age	... ..	...	3
Deaths from Pulmonary Tuberculosis (Males 25, Females 12)	... ..	...	37
Death rate from Pulmonary Tuberculosis (per 1,000 population)	... ..	...	0.27
Deaths from Non-pulmonary Tuberculosis (Males 1, Females 1)	... ..	...	2
Death rate from non-pulmonary Tuberculosis (per 1,000 population)	... ..	...	0.01
Deaths from cancer (Males 155, Females 197)	... ..	...	352
Death rate from cancer (per 1,000 population)	... ..	...	2.53

# PROPORTION OF DEATHS FROM PRINCIPAL CAUSES, 1951.

Total Deaths, 2295





**NOTIFIABLE DISEASES OTHER THAN TUBERCULOSIS WHICH  
OCCURRED DURING 1951**

Disease	Total of cases notified	Total deaths
Diphtheria (including Membranous Croup) ...	2	—
Erysipelas ...	20	—
Scarlet Fever ...	60	—
Enteric Fever (including Para-Typhoid) ...	1	—
Ophthalmia Neonatorum ...	1	—
Pneumonia ...	110	96
Dysentery ...	122	—
Puerperal Pyrexia ...	2	—
Poliomyelitis—paralytic ...	5	—
non-paralytic ...	—	—
Acute Encephalitis—Infective ...	1	—
Post In-fective ...	1	—
Measles ...	2168	2
Whooping Cough ...	355	—
Scabies ...	26	—
Meningococcal Infection ...	3	—
Food Poisoning ...	14	—

**CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1951**

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	—	—	2	—	—	—	—
Erysipelas ...	20	—	—	—	—	4	8	8
Scarlet Fever ...	60	—	17	41	2	—	—	—
Enteric Fever (including Para-Typhoid) ...	1	—	—	1	—	—	—	—
Ophthalmia Neonatorum ...	1	1	—	—	—	—	—	—
Pneumonia ...	110	8	9	10	2	12	22	47
Dysentery ...	122	3	23	32	18	21	16	9
Puerperal Pyrexia ...	2	—	—	—	2	—	—	—
Poliomyelitis—paralytic ...	5	—	—	2	—	3	—	—
non-paralytic ...	—	—	—	—	—	—	—	—
Acute Encephalitis—Infective ...	1	—	—	1	—	—	—	—
Post-Infective ...	1	—	1	—	—	—	—	—
Measles ...	2168	41	1068	1015	22	15	2	5
Whooping Cough ...	355	19	169	159	2	5	—	1
Scabies ...	26	1	4	13	2	4	2	—
Meningococcal Infection ...	3	—	1	—	—	1	1	—
Food Poisoning ...	14	—	—	2	2	2	6	2

## Social and Climatological Conditions

If environment was the only factor to be considered there would be little excuse for the enjoyment of ill-health in Bournemouth. Most surely the climate and beauty of its surroundings give every help to the maintenance of health. Bournemouth is situated almost midway between the moist warm climate of the South West and the dryer cooler atmosphere of the South East coast. The winter climate is almost as mild as the southern Cornish Coast and much less wet. The summer maximum temperatures are usually well below the excesses experienced by London and East Anglia.

The industry of Bournemouth is almost exclusively devoted to the care and entertainment of the visitor and it is surely no accident that included among the latter are a regular and goodly proportion of convalescents. There can be no doubt that the climatic, scenic, and cultural attributes of Bournemouth can be of the greatest possible help to the physically and mentally sick. No small part of the work of the Public Health Department is devoted to advising visitors and potential visitors with health problems and in exercising the vigilance necessary to guard against the spread of imported infection, particularly at the times of the year when the population rises to a quarter of a million.

There was some seasonal unemployment but the numbers were small.

## Care of Mothers and Young Children

### Marriages

Year	No.	Rates per 1000	
		Bournemouth	England and Wales
1951	1143	16.5	16.4

### Births

The number of live births allocated to the area after adjustment for inward and outward transfers, was 1,520. This was 134 fewer than in 1950.



The following tables show the comparison with the previous six years :—

<i>Year</i>	<i>No.</i>	<i>Rates per 1000</i>
1945	1895	14.96
1946	2161	16.03
1947	2189	15.86
1948	1904	13.88
1949	1692	12.18
1950	1654	11.85
<b>1951</b>	<b>1520</b>	<b>10.94</b>

#### Still-Births

<i>Year</i>	<i>No.</i>	<i>Rates per 1000</i>
1945	54	27.7
1946	67	30.0
1947	50	22.3
1948	35	18.0
1949	45	25.9
1950	33	19.56
<b>1951</b>	<b>32</b>	<b>20.62</b>

#### Illegitimate Births

<i>Year</i>	<i>No.</i>	<i>Rates per 1000</i>
1945	307	158
1946	257	115
1947	189	84
1948	161	83
1949	137	79
1950	140	83
<b>1951</b>	<b>111</b>	<b>72</b>

Births notified as occurring in Bournemouth during 1951 are as follows :—

Domiciliary births ... ..	433	} Total 1989
Institutional births ... ..	1556	

The institutional births took place as follows :—

Royal Victoria Hospital, Shelley Road, Boscombe	603
Aston Grays Maternity Home ... ..	360
Free Church Council Maternity Home ... ..	45
Private Maternity Homes ... ..	548
	<hr/>
	1556
	<hr/>

#### Care of Premature Infants

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

Number of premature infants notified during 1951 (including transferred notifications) whose mothers normally reside in the area :—

(i) Born at Home ... ..	9
(ii) Born in hospital or nursing home ... ..	79

Details of these are as follows :—

**BORN AT HOME**

Birth Weight	Transferred to Hospital	Nursed entirely at home				Grand Total
		Died in first 24 hrs.	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	
2 lbs. 3 oz. or less	—	—	—	—	—	—
Over 2 lbs. 3 oz. up to and including 3 lbs. 4 oz.	—	—	—	—	1	1
Over 3 lbs. 4 oz. up to and including 4 lbs. 6 oz.	1	—	—	—	3	4
Over 4 lbs. 6 oz. up to and including 4 lbs. 15 oz.	—	—	—	—	1	1
Over 4 lbs. 15 oz. up to and including 5 lbs. 8 oz.	—	—	—	—	3	3
Total	1	—	—	—	8	9

**BORN IN PRIVATE NURSING HOMES**

Birth Weight	Transferred to Hospital	Nursed entirely in private nursing home				Grand Total
		Died in first 24 hrs.	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	
2 lbs. 3 oz. or less	—	—	—	—	—	—
Over 2 lbs. 3 oz. up to and including 3 lbs. 4 oz.	—	—	—	—	—	—
Over 3 lbs. 4 oz. up to and including 4 lbs. 6 oz.	2	—	—	—	5	7
Over 4 lbs. 6 oz. up to and including 4 lbs. 15 oz.	—	—	—	—	5	5
Over 4 lbs. 15 oz. up to and including 5 lbs. 8 oz.	—	—	—	—	6	6
Total	2	—	—	—	16	18

During this year, as previously, premature baby cots and scales have been on loan from this Department. These have been most useful and much appreciated by parents.

A "Queen Charlotte" infant oxygen tent is held in readiness at the Ambulance Depot for the transportation of a premature infant.

### Infant Mortality

There were 38 recorded infant deaths during the year, of whom 24 were males and 14 females. Of the total, 22 occurred before the child was four weeks old.

The rate of infant mortality in Bournemouth compared with England and Wales during recent years was as follows:—

<i>Year</i>	<i>Bournemouth</i>	<i>England and Wales</i>
1941	42.6	60.04
1942	43.9	50.62
1943	47.0	49.12
1944	41.1	45.44
1945	48.0	46.00
1946	33.7	42.85
1947	35.1	41.37
1948	27.8	33.93
1949	31.9	32.0
1950	33.2	29.8
1951	25.0	29.6

### Infectious Diseases Associated with Childbirth

There were two cases of Puerperal Pyrexia, one domiciliary and one institutional.

### Maternal Mortality

Three deaths attributable to childbirth occurred in the area. Only one of these was a Bournemouth resident, the cause of death in this case being Post Partum haemorrhage. The patient was aged 34.

The maternal mortality rate was 0.64.

The maternal mortality rates in Bournemouth compared with England and Wales for the past 9 years were as follows :—

<i>Year</i>	<i>Bournemouth</i>	<i>England and Wales</i>
1943	2.30	2.29
1944	3.49	1.93
1945	4.10	1.79
1946	2.24	1.43
1947	1.33	1.17
1948	0.51	1.02
1949	2.30	0.98
1950	0.59	0.86
1951	0.64	0.79

### **Ante Natal and Post Natal Sessions**

154 combined sessions were held at Avebury and Pelhams Ante Natal Clinics.

576 patients attended. This was 91 fewer than last year. Attendances numbering 1560 showed a corresponding decrease of 401.

## **Infant Welfare Centres**

The most important function of an Infant Welfare Centre is the giving of expert advice on the nurture of young children and the health of nursing mothers. All other functions, including the sale of foods and the issue of prescriptions for minor ailments are of only incidental importance.

The Health Visitor is the vital link between home and clinic.

Mothers are encouraged to attend regularly, rather than to wait until something has gone wrong. The doctor working in an Infant Welfare Centre has been trained to think in terms of health rather than disease. The advice given is preventive and creative, and much of it is directed towards securing a sound basis of nutrition—the biggest single controllable factor in child health.

The attendance record of the ladies of the Maternity and Child Welfare Voluntary Association has once again been splendid—without their valued services the smooth running of the clinics would have been impossible.

There has been no change in the location or number of sessions.

## CLINIC ATTENDANCES, 1951

Clinic	Infants under 1 year	Pre-school Children	Total	Sessional Average
Avebury .....	1508	1041	2549	50
Boscombe .....	2439	1622	4061	80
Castle Lane .....	1803	2194	3997	78
Charminster .....	1313	773	2086	41
East Howe .....	1700	941	2641	54
Ensburry Park .....	1404	857	2261	44
Iford .....	1178	974	2152	41
Malmesbury Park .....	2059	1290	3349	64
Moordown .....	1259	1429	2688	53
Pelhams .....	1382	1350	2732	53
Pokesdown .....	2182	1306	3488	68
Strouden .....	1011	1855	2866	55
West Cliff .....	1718	1323	3041	62
Winton (a.m.) .....	1166	883	2049	40
Winton (p.m.) .....	2377	2224	4601	90
	24,499	20,062	44,561	58

## Day Nurseries

The three Day Nurseries at Hadow Road, Wellington Road, and Castlemain Avenue have been well filled throughout the year, and for most of the year there have been waiting lists at each.

There can be no doubt that the proper place to bring up a child is in the home with the mother. Nevertheless, this ideal is not always possible. The children of the widow, the unmarried mother, the mother who is ill or being confined, are among those for whom care is essential, and quite naturally such children are given priority of admission to the Council's Day Nurseries. In addition sympathetic consideration is given to children with difficult home conditions, and good use is made of temporary vacancies to ease the lot of the tired mother with a large family.

Only when all the priority needs have been met are places given to families where both father and mother go out to work. These latter places are allocated on the basis of mornings or afternoons, or three full days in the week, by which means a greater number are assisted.

	Places	Trained Staff	Students
Hadow Road .....	50	6	8
Wellington Road .....	40	5	6
Castlemain Avenue .....	30	6	—

### Nurseries and Child-Minders (Regulation) Act, 1948

There are four premises registered under this Act, and between them they provide accommodation for 79 children.

### 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	Number of beds				Average length of stay	
	Total beds (excluding maternity and labour and cots)	Maternity (excluding labour and isolation)	Labour beds	Cots	Ante-natal	Post natal
Free Church Council Maternity and Training Home, 11, St. Alban's Avenue ...	14	4	1	8	6 weeks	6 weeks
St. Thomas Lodge, 12, Charminster Road	14	Nil	Nil	7	7 weeks	4 weeks

The total number of women admitted during the year to the above was 75.

The number of admissions for which the authority was responsible was 7.

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 4
- (b) Post-natal cases Nil

### Contraceptive Clinic

A Municipal Contraceptive Clinic is held each month at Avebury for cases referred by doctors on medical grounds in accordance with Ministry of Health Memorandum 153/M.C.W.

Also during 1951 as a result of representations from the local branch of the British Medical Association the Family Planning Association commenced a weekly Clinic at Avebury for the purpose of giving contraceptive advice on social grounds and also for the investigation and treatment of infertility and sub-fertility. The Association pay a rental to the Corporation to cover the cost of heating, lighting and cleaning the premises.

## Dental Treatment for Mothers and Young Children, 1951

### General Observations.

The dental surgeons each gave part of their time to the inspection and treatment of mothers and pre-school children. All mothers who attended the ante-natal clinics were invited to attend the dental clinics for inspection and where treatment was required this was offered, but the decline in the number of mothers wishing to take advantage of the Local Authority dental service which has been so noticeable since the General Dental Service became available to them has continued to be apparant. Many more mothers have been attending private dentists since July, 1948. When the half-charge for dentures was made it was thought that more mothers would come to the clinics in order to have free dentures, but up to the time of writing this report this anticipated change has not occurred.

Mothers who regularly attended their own private dentist were advised to continue doing so.

### Pre-School Children

Although up to three-elevenths of each dental officer's time could be allocated to Mother and Child Welfare Work, in practice it was found that the work could be adequately dealt with in fewer sessions.

Pre-school children attending the infant welfare centres were inspected and treatment was given when necessary.

Nursing mothers and pre-school children were referred to the dental clinics by doctors and health visitors, but the number of pre-school children so referred (usually on account of pain) were few as we were able to see most of the children at the clinics before they had tooth-ache.

### **Facilities for X-Rays**

It was not found necessary to have any X-Rays taken during the year, but there is an arrangement for patients requiring X-Rays to be referred to the Radiologist at the Royal Victoria Hospital, Boscombe.

### **Provision of Dentures**

Dentures were made by the technicians at the Royal Victoria Hospital, Boscombe dental laboratory. This arrangement has proved very satisfactory, the work being of a very high standard.

The central position of the laboratory has enabled the Local Authority dental surgeons to pay occasional visits in order to give personal directions regarding the work when this has been desirable.



## Maternity and Child Welfare

### (a) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	90	79	69	50
Children under five ...	373	233	216	192

### (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	84	19	26	89	20	Nil	29	Nil	9	16
Children under five	255	2	131	411	Nil	15	105	Nil	Nil	Nil

TABLE SHOWING DENTAL CONDITION OF CHILDREN AT THE DAY NURSERIES AND BOURNEMOUTH  
CHILDREN'S HOME—Year 1951

31, Wellington Road

Age	Number Examined	Number Needing Treatment	Caries Free Teeth	Decayed Teeth	Filled Teeth	Missing Teeth	Total D.F.M.
2	8	1	157	1	-	-	1
3	7	2	138	2	-	-	2
4	5	3	89	11	-	-	11
Totals	20	6	384	14	-	-	14

East Howe Day Nursery

Age	Number Examined	Number Needing Treatment	Caries Free Teeth	Decayed Teeth	Filled Teeth	Missing Teeth	Total D.F.M.
2	10	1	197	1	-	-	1
3	17	5	323	17	-	-	17
4	13	6	245	14	1	-	15
Totals	40	12	765	32	1	-	33

## Southbourne Day Nursery

Age	Number Examined	Number Needing Treatment	Caries Free Teeth	Decayed Teeth	Filled Teeth	Missing Teeth	Total D.F.M.
2	11	1	211	1	-	-	1
3	7	2	136	4	-	-	4
4	6	3	113	7	-	-	7
Totals	24	6	460	12	-	-	12

## Bournemouth Children's Home, Fairmile

Age	Number Examined	Number Needing Treatment	Caries Free Teeth	Decayed Teeth	Filled Teeth	Missing Teeth	Total D.F.M.
2	6	1	110	2	-	-	2
3	7	2	137	3	-	-	3
4	11	3	213	6	1	-	7
Totals	24	6	460	11	1	-	12

## Midwives' Services

The number of Municipal Midwives remained at 6 during the year and they attended 422 confinements.

The Bed Service Officer at the Royal Victoria Hospital, Shelley Road, Boscombe continued to refer to this Department all applications for maternity beds on social grounds. There were 513 of these and each received a special home call from the Health Visitor. On the strength of her report and any other information available a decision was made on each case by a medical officer of this Department acting as referee.

1951 has apparently seen the end of private domiciliary midwifery in Bournemouth.

### 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	As Maternity Nurses	As Midwives	As Maternity Nurses	As Midwives	As Maternity Nurses
(i) Midwives employed by the Authority ... ..	295	127	—	—	295	127
(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) ... ..	—	—	39	5	39	5
(iii) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ... ..	—	—	225	720	225	720
(iv) Midwives in Private Practice (including Midwives employed in Nursing Homes) ... ..	1	3	21	280	22	283
<b>TOTALS</b>	<b>296</b>	<b>130</b>	<b>285</b>	<b>1005</b>	<b>581</b>	<b>1135</b>

**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	...	...	...	...	...	...	...	—
	(ii)	Others	...	...	...	...	...	...	...	18
Total		...	...	...	...	...	...	...	...	18
(b) For cases in Institutions										
		...	...	...	...	...	...	...	...	17

**Gas and Air Analgesia**

The six Municipal Midwives are qualified to administer Gas and Air Analgesia and each has an apparatus for her use. During the year Gas and Air Analgesia was given by these midwives in 296 cases.

**Health Visiting**

The number of Health Visitors employed during 1951 remained at 15, including one seconded for whole time duty at the Chest Clinic.

Regular visits are made to the homes of all children under 5 years of age for the purpose of giving advice on feeding, nurture and home management. The Health Visitors are also responsible for School Health duties and thereby maintain an interest in the child from birth to school leaving age.

Whereas in former days the work of the Health Visitor was largely devoted to the care of mothers and children, Section 24 of the National Health Service Act has widened the scope to embrace the whole family unit particularly in relation to the giving of advice to the domiciliary sick including the aged and infirm.

Unfortunately the recruitment of Health Visitors into the Service does not keep pace with an ever increasing case load and whilst in Bournemouth it proved possible during the year to maintain the establishment of Health Visitors, serious deficiencies have been reported from many parts of the country.

The visits recorded by them were as follows :—

Number of visits paid by Health Visitors during the year

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
809	1507	1601	8262	16	12893	4468	8542

## Home Nursing

In January of this year the Bournemouth Home Nursing Association, which on an agency basis had provided a home nursing service for the Corporation, asked to be relieved of this responsibility and as from April 1st, 1951 the home nursing service, with the approval of the Ministry of Health, came directly under the Health Committee and is administered as part of the Public Health Department. Great credit must be paid to the Bournemouth Home Nursing Association for the admirable work they have done in the past and the efficiency with which they administered this most important service. Another busy year has been undertaken by the home nurses and the demands on the service seem steadily to increase. Many aged persons are being nursed in their own homes, due in part to insufficient hospital accommodation.

Nursing equipment is loaned to the patients and considerably assists the nurses in carrying out their duties.

### THE YEAR'S WORK

	1950	1951
Number of patients on the register, 1st January	366	432
Number of new patients attended	2645	2748
Total number of patients attended	3011	3180
Number remaining on register, 31st December	432	473
Number of patients taken off the register	2579	2707
Total number of nursing visits	62,746	66,594

The illnesses of new patients were classified as follows :—

	1950	1951
Tuberculosis .....	17	31
Pneumonia .....	70	84
Miscarriages .....	3	6
Surgical .....	363	328
Medical .....	2192	2284
Measles .....		11
Whooping-cough .....		4
	<hr/>	<hr/>
	2645	2748

Nursing visits were discontinued for the following causes :—

	1950	1951
Patients convalescent .....	689	675
Patients admitted to hospital .....	344	391
Patients died .....	378	336
Other causes (left district, etc.) .....	1168	1305
	<hr/>	<hr/>
	2579	2707

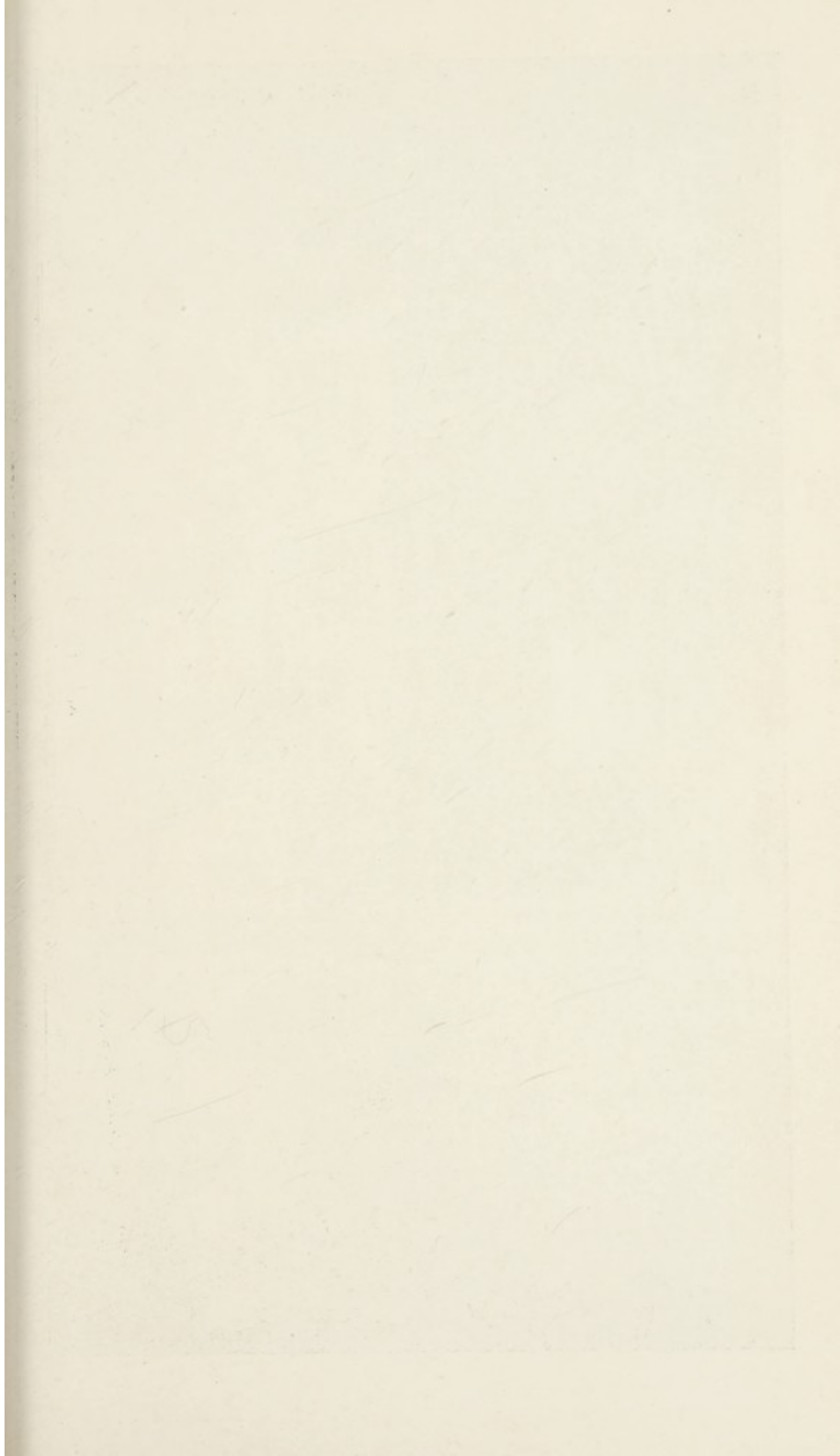
## Domestic Help Service

764 cases were assisted during 1951 as compared with 762 cases in 1950.

With an ever increasing demand for help under this Service continued vigilance has been necessary to ensure that the available resources are used to assist those with the greatest need. Maternity patients and cases of illness in mothers with young children have continued to command priority and all such requests were met. Likewise cases of tuberculosis nursed at home were given every possible assistance including a reduction in the assessed charge in cases approved by the Committee.

The greatest inroad into the Service and none the less deserving, continued to be made by the aged and chronic sick. The help for these cases once established has usually to be continued until death or removal to a home or hospital. Nevertheless, in spite of the drain on the Service thus created it is well worth while to provide the means for old people to stay in their home surroundings, quite apart from the incalculable saving in institutional beds.

It will be seen from the summary of work for the year that the majority of the workers were part-time. Even if the required number of full time helps was available, the needs of the Service







THE NEW 25 H.P. AUSTIN AMBULANCES PURCHASED DURING 1951.

are more efficiently and economically met by the employment of part-time workers. One important reason for this is that the greatest need for help is during the morning hours.

#### SUMMARY OF WORK FOR 1951

	<i>Number of cases helped</i>	<i>Number of hours</i>
Maternity .....	67	4,652
Acute Illness .....	344	29,179
Maternity and Child Welfare .....	57	6,064
Old Age .....	272	32,313
Tuberculosis .....	21	2,485
Mental Deficiency .....	3	190
	<hr/> 764	<hr/> 74,883

79 Home Helps were on the staff at December 31st, 1951 of which 6 were full-time and the remainder part-time.

### Ambulance Service

The municipal and St. John ambulances have again co-operated throughout the year and an efficient service has been given to the public. The Hospital Car Service has most ably assisted and is responsible for the conveyance of sitting cases.

The use of train transport for long distance journeys has been further developed and with the co-operation I have received from the general practitioners, it is found that many of these journeys can be done by train at a greater comfort to the patient and, of course, far more speedily and therefore less tiring to a sick person.

Three of the older ambulances have been replaced by new 25h.p. Austin vehicles.

The headquarters continues at the Porchester Road Depot and during the year extensive plans have been approved for the general re-decoration of the building and improvements to the site.



## Vaccination and Immunisation

### Vaccination

During the year Vaccination continued to be carried out by General Practitioners and by the Local Health Authority's medical staff.

The numbers dealt with were as follows :—

By General Practitioners	...	...	...	...	...	...	1718
By Local Health Authority's staff	...	...	...	...	...	...	436

	<i>Under 1 Year</i>	<i>Aged 1 Year</i>	<i>Aged 2—4</i>	<i>Aged 5—14</i>	<i>Aged 15 or over</i>	<i>Total</i>
Primary vaccinations	801	36	39	88	210	1174
Re-vaccinations	—	—	19	93	868	980
<b>TOTALS</b>	<b>801</b>	<b>36</b>	<b>58</b>	<b>181</b>	<b>1078</b>	<b>2154</b>

### Immunisation

Number of children immunised by Public Health Department	...	...	989
Number of children immunised by Private doctors	...	...	464
Number of children who received re-inforcing doses by Public Health Department	...	...	1482
Number of children who received re-inforcing doses by Private doctors	...	...	136

The present position is that 64.54 per cent of children under 5 years of age and 86.64 per cent of children between the ages of 5 and 15 years have been protected against Diphtheria.

## Prevention of Illness, Care and After-Care

### Tuberculosis

A member of the Health Visiting staff has been seconded for whole-time duty at the Chest Clinic and for domiciliary visits to tuberculous patients. A car is provided to enable her to carry out efficiently her home visits.

During the year the Local Health Authority has accepted responsibility for patients undergoing rehabilitation as follows :—

Papworth Hall, Cambridge	....	....	....	....	....	2
Enham-Alamein, Andover	....	....	....	....	....	2

Where it is found to be desirable to re-house a family on account of tuberculosis, such cases are referred to the Housing Committee and I am grateful for the careful consideration these cases are given. During the year there were 28 cases where the environmental conditions were unsatisfactory and re-housing of the patients was desirable. 16 of these families were re-housed during the year.

Invaluable assistance has again been received from the Bournemouth Voluntary Tuberculosis Care Committee. A total of 73 cases have been assisted during the year as follows :—

#### CLASSIFICATION OF ASSISTANCE GIVEN

Provision of Clothing	.....	.....	.....	.....	.....	.....	.....	.....	.....	2
Provision of Coal	.....	.....	.....	.....	.....	.....	.....	.....	.....	3
Provision of Bedding and Furniture	.....	.....	.....	.....	.....	.....	.....	.....	.....	7
Monetary Grants	.....	.....	.....	.....	.....	.....	.....	.....	.....	14
Extra Nourishment (Milk)	.....	.....	.....	.....	.....	.....	.....	.....	.....	40
Advised only	.....	.....	.....	.....	.....	.....	.....	.....	.....	7
										—
									TOTAL	73
										—

Mass miniature radiography. A unit has been available in the Borough during the year and a report by its Medical Director, Dr. J. Stuart Robertson will be found under the Section headed "Tuberculosis".

#### Mental Illness or Defectiveness

Domiciliary visits are paid by the Health Visiting staff and during the year 332 visits were made. The year saw the opening of the Occupation Centre at Pokesdown and an excellent year's work has been carried out with considerable benefit to those mentally handicapped persons in need of special care.

#### Provision of Sick-Room Equipment

Articles of sick room equipment are stored at the Ambulance Depot, Portchester Road and during the year the following were issued on loan :—

	<i>Number of Articles Loaned</i>
Bed Cages	5
Bed Pans	73
Bed Rests	14
Bed Rings	93
Bedsteads (Fowler)	2
Blankets	2
Crutches	4
Dunlopillo Mattresses	9
Feeding Cups	3
Infra red lamps	2
Mackintosh sheets	101
Pillows	2
Pillow-cases	3
Push Chair (Child's)	1
Sheets (single size)	3
Sputum cups	4
Urinals	53
Walking Chairs	5
Wheel Chairs	10
	<hr/> 389 <hr/>

### **Rest Homes**

During the year 47 patients recommended by General Practitioners were sent to Rest Homes.

### **Health Education**

Notwithstanding the undoubted value of the leaflet, film, film strip and poster the most useful method of health education is word of mouth explanation or advice given by doctor, health visitor or sanitary inspector. Such activity forms part of the every day work of these officers, but in addition a number of talks were given by members of the staff to local and other organisations on health and allied subjects.

### **Nursing Homes**

There were 60 registered nursing homes in the Borough providing accommodation for 43 maternity and 653 medical, surgical, aged or convalescent patients.

The total number of homes is 2 fewer than last year and although 5 new homes were registered during the year the overall tendency in most of the homes has been a fall in the number of patients accommodated, due undoubtedly to financial insufficiency of the Nursing Home class of patient.

In spite of rising costs and ever present staffing difficulties the standard of Bournemouth Nursing Homes has continued to be high. Regular inspections were made by a medical member of the staff.

	<i>Number of Homes</i>	<i>Number of beds provided for</i>		<i>Totals</i>
		<i>Maternity</i>	<i>Others</i>	
Homes first registered during 1951 .....	5	Nil	54	54
Homes on the register at the end of 1951 .....	60	43	653	696

## Mental Health Service

The Mental Health Sub-Committee, which meets monthly, consists of six elected members of the Health Committee, and one non-Council member.

The Medical Officer of Health is responsible for the medical direction of the service. There are three Duly Authorised Officers, one whole-time and two part-time, who are able to provide a 24-hour service and can deal promptly with calls for assistance.

During the year a careful review of all guardianship cases has been carried out. When an Order had been made purely for the purpose of permitting the authority to make a financial grant, these cases were referred to the local office of the National Assistance Board. In this way it has been possible to discontinue 25 guardianship orders the patients receiving financial help under National Assistance and supervision only from the local authority.

Arrangements for the admission of mental patients to colonies and other institutions still remains most difficult but I gratefully acknowledge the consideration and willing help given by the Medical Superintendents of Park Prewett Hospital and Herrison House in those cases where real urgency exists.

It is to be regretted that another year has passed and still there are no Section 20 beds available in Bournemouth. It is to be hoped that this omission will soon be rectified by the Regional Hospital Board permitting the use of beds for this purpose in one of the local hospitals approved and designated by the Minister of Health for the purpose.

## SUMMARY OF CASES ADMITTED INTO MENTAL HOSPITALS

### MENTAL TREATMENT ACT

		<i>Male</i>	<i>Female</i>
Voluntary Patients	...	42	77
Temporary Patients	...	1	4
		—	—
		43	81
		—	—

### LUNACY ACT

		<i>Male</i>	<i>Female</i>
Certified Patients	...	40	77

The number of Defectives awaiting vacancies in Institutions at the end of the year was 19.

### MENTAL DEFICIENCY ACTS, 1913-1938

			<i>Over 16</i>		<i>Under 16</i>		<i>Total</i>
			<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
(1)	In Institutions	...	52	50	11	5	118
(2)	On Licence	...	3	6	1	—	10
(3)	Guardianship	...	11	13	3	6	33
(4)	Supervision	...	33	22	4	3	62

#### *Cases reported during the year*

Admitted to Institutions	...	...	—	—	—	—	—
Placed under guardianship	...	...	—	—	1	3	4
Removed to Place of Safety	...	...	—	1	—	—	1
Action not yet taken	...	...	—	—	1	—	1
Placed under Supervision	...	...	2	3	—	2	7

## National Assistance Act, 1948

### Section 47

No action has been taken under this Section during the year.



## Bournemouth Crematorium

The steady increase in the use of cremation as a means of disposal of the dead is shown by the annual figures given below :—

### YEARLY TOTALS OF CREMATIONS HELD AT BOURNEMOUTH CREMATORIUM SINCE OPENING ON 31.3.38

1938	....	....	....	229
1939	....	....	....	384
1940	....	....	....	514
1941	....	....	....	557
1942	....	....	....	584
1943	....	....	....	693
1944	....	....	....	708
1945	....	....	....	742
1946	....	....	....	834
1947	....	....	....	1026
1948	....	....	....	1012
1949	....	....	....	1155
1950	....	....	....	1306
1951	....	....	....	1484

## Public Health Laboratory Service

### Report by Dr. G. J. G. King, Director of the Bournemouth Laboratory

During this year the Public Health Laboratory was transferred to Bournemouth (17th November). The new building, in the grounds of the Royal Victoria Hospital, Gloucester Road, had been planned for several years but it was only possible to undertake the construction recently. The Borough Architect's Department of Bournemouth Corporation had charge of the construction, having already drawn the plans.

The Laboratory remains an area laboratory of the Public Health Laboratory Service (which is directed by the Medical Research Council for the Ministry of Health) and serves the same areas as before, namely, Bournemouth, Poole, Christchurch, Lymington, Ringwood and Fordingbridge.

The examinations carried out during the year for Bournemouth doctors, the Public Health Department and Sanatoria in the borough were distributed as follows :—

Nose and throat swabs	319
Specimens of sputum	4708
Specimens of faeces or urine	383
Specimens of water	132
Specimens of milk	519
Specimens of ice cream	317
Specimens from miscellaneous sources	478
Total	6856

The nose and throat swabs come chiefly from doctors who suspect diphtheria or haemolytic streptococcal infection, the latter being far commoner; however, two isolations of diphtheria bacilli were made from children in the town. The great preponderance of sputum specimens is due to their being sent from institutions as well as from doctors and the chest clinic.

Specimens for dysentery organisms constituted most of the examinations in the next group and came from cases and contacts, and for the exclusion of the carrier state.

Water samples included specimens taken from the sea as well as from piped supplies for routine bacteriological examination, which, like milk and ice cream samples are examined regularly throughout the year.

#### SPECIMENS RECEIVED AT THIS LABORATORY FOR THE YEAR 1951 (Bournemouth)

Nose and throat	319
Sputum	4708
Faeces and urine	383
Water	132
Milk	519
Ice Cream	317
Miscellaneous	478
Total	6856

## Tuberculosis

**Report by Dr. J. Stuart Robertson, Medical Director, Mass  
Radiography Unit**

The value of routine radiography of the apparently healthy population as a means of tuberculosis case finding depends on the fact that X-ray evidence usually precedes the appearance of symptoms. The method is thus capable of diagnosing the disease at a relatively early stage when the prospects of successful treatment

are greatest, and the period of incapacity least. In addition, and of no little importance, the discovery and treatment of the unknown infective case is an important public health measure in the prevention of spread of infection ; for it is this type of case which is the greatest source of danger to the community.

Although the scheme was aimed chiefly at the discovery of unsuspected cases of pulmonary tuberculosis, other intrathoracic diseases affecting the heart and lungs are discovered by this method of examination.

Mass Miniature Radiography was sponsored by the Ministry of Health in the early years of the late war, when the high incidence of pulmonary tuberculosis and consequent loss of man power directly and indirectly was giving rise to serious concern. As the X-ray apparatus and equipment had to be specially designed and manufactured, not until 1943 was it possible to put this scheme into operation for the examination of the civilian population. At the inception, only a few units were available and these were allocated by the Ministry of Health to selected large local authorities who had the requisite facilities and from whom the greatest yield of cases was to be expected. Since that time the scheme has greatly developed and at present over fifty units are operating in various parts of the country.

With the implementation of the National Health Service Act these units passed from the jurisdiction of the local Health Authority to that of the Regional Hospital Boards. It was however fully realised that as this service was in essence a preventive measure, the local Health Authority, although freed from the financial responsibility for the running of these units, was a vitally interested party. In various circulars it was stressed by the Ministry that close co-operation should exist between both bodies and that there should be consultation and mutual assistance in organising the surveys in the respective local health authority areas.

Prior to 1950 no unit was available to the Borough. Through the co-operation of Portsmouth Borough Council a unit allocated for their use visited the Borough in 1946 and 1948.

The unit now based in Bournemouth serves, in addition to the Borough, the County of Dorset and parts of Hampshire and Wiltshire. Following negotiations, the ground floor premises of

the Ambulance Depot at 42 Portchester Road were leased to the Regional Hospital Board as headquarters premises for the unit.

During the year under review three surveys have been carried out in different parts of the Borough. It has not been possible so far to use the headquarters premises as an operational centre, although it is intended to do so when the structural alterations at present in course of completion are finished.

Surveys were carried out from the following centres :

- (i) Pokesdown 19th June to 6th July, 1951.
- (ii) Boscombe 30th October to 26th November, 1951.
- (iii) Kinson 27th November to 21st December, 1951.

The response of the public from the first two centres was highly satisfactory with over 4,000 attendances at each ; the third was disappointing, where only a total of 1,695 attended during the four week period. Inclement weather during this period was considered to be largely responsible for the poor turn-out.

In the forthcoming year more intensive surveys are planned, using premises in the centre of the town to deal with the business population, and within the next few months the headquarter premises will also be available.

### Statistics

The following figures give briefly the main findings as a result of the three surveys :

TABLE I

(1)	Total number examined	....	....	....	9990	
(2)	Number recalled for large film	....	....	....	293	(2.92%)
(3)	Number recalled for Clinical examination	....	....	....	82	(.82%)
(4)	Number referred to Chest Clinic for lesions probably tuberculous	....	....	....	37	(.37%)
(5)	Number referred to own doctor for cardio-vascular and non-tuberculous conditions	....	....	....	27	(.27%)

**TABLE II**  
**AGE GROUPS EXAMINED AND INCIDENCE OF ACTIVE PULMONARY TUBERCULOSIS**

	Under 14		14		15-24		25-34		35-44		45-59		60+		TOTAL		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	Total
Number examined	169	248	226	286	583	1287	729	1100	721	1157	828	1387	537	732	3793	6197	9990
Number of Cases	—	—	—	—	—	4	2	—	1	1	—	1	—	1	3	7	10
Rate per 1000 examined	—	—	—	—	—	3.1	2.7	—	1.4	.86	—	.72	—	1.36	.79	1.12	1

## Comment

Following the large film examination 82 (.82%) were recalled for clinical examination. Of these 37 (.37%) were advised further investigation for radiologically significant lesions and were referred to the appropriate chest clinic; 27 cases showing evidence of cardio-vascular or non-tuberculous disease were referred to their own doctors to arrange and carry out treatment and supervision.

Following the immediate chest clinic investigation of the 37 patients, 10 were considered to be active cases of pulmonary tuberculosis; the remainder required a further period of clinic observation before a decision could be reached.

These figures are very gratifying, as in the general findings approximately 10 per 1,000 examinees are referred to chest clinics, with a significant tuberculous lesion, and of these 3 to 4 are, on the initial investigation, found to be cases of active disease. The present figures are only about one third of the general findings and confirm the comparatively low incidence in the area as found in the previous surveys.

It is interesting to note that in the female age group 15-24, 3.1 per 1,000 were active cases. This is the age group which in general has shown the greatest incidence of infection.

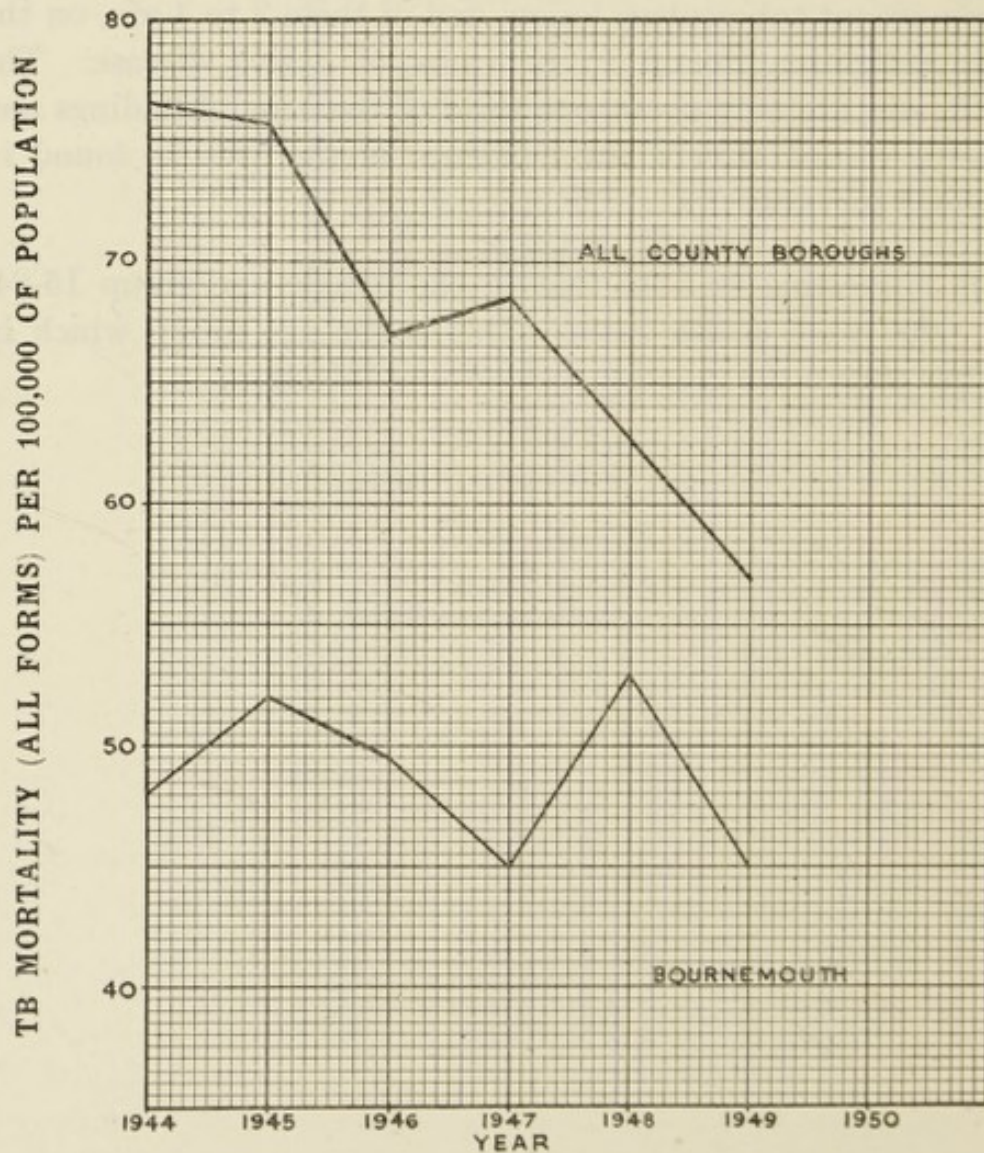
Report by Dr. W. H. Tattersall, Consultant Chest Physician.

### Tuberculosis in Bournemouth

#### 1. Incidence and Mortality

The decline of tuberculosis in Bournemouth during the years following the recent war has proceeded rather more slowly than in the country generally.

Whereas in 1945 the tuberculosis mortality rate in this town was lower than in most of the County Boroughs in England and Wales, this difference is now much less pronounced than it was formerly as the accompanying graph indicates.



## 2. New Cases of Tuberculosis in Bournemouth during 1951

Table II indicates the source and type of disease of each new case of tuberculosis diagnosed during the year.

TABLE II

TYPE OF TUBERCULOSIS	General Practitioners	Contacts	Fluoroscopy (Total 1158)	M.M.R.	General Hospitals	School Health Service	Removed from elsewhere	Readmissions	Other	TOTAL
Healed disease .....	11	1	13	3	2	—	3	3	3	39
Primary infection .....	5	3	4	2	—	4	1	—	1	20
Pleural effusion .....	6	1	2	1	2	—	6	—	1	19
Non-pulmonary (including miliary) .....	3	1	1	—	3	1	7	1	—	17
Pulmonary-sputum —ve .....	19	4	15	13	7	2	14	5	2	81
Sputum +ve .....	20	2	12	3	9	5	44	7	3	105
Notified after death .....	—	—	—	—	—	—	—	—	1	1
TOTAL .....	64	12	47	22	23	12	75	16	11	282*

\* Of this total only 97 were notifiable, 75 having been notified elsewhere.

The above data merit certain comment. Of the 66 new cases of pulmonary tuberculosis referred from general practitioners 32, (i.e. almost 50 per cent) had already reached the infectious stage at diagnosis. One is constantly striving to achieve earlier diagnosis of cases for general practitioners and this is only possible by offering convenient and easy facilities for their patients to be examined and X-rayed. Only 12 cases were disclosed through the examination of contacts, the same number as were found through the school health service; it is hoped that in the future these two methods will disclose increasing numbers of cases. Table II also shows that many patients diagnosed elsewhere, come to live in Bournemouth. It is most important that these should become known to the clinic as soon as possible so that their treatment can be continued, risk of spread of disease can be minimised, and their contacts observed as necessary.

## 3. Non-Tuberculosis Cases Dealt With

It is now the proper function of a Chest Clinic to diagnose and treat non-tuberculosis patients. The 660 such cases fully investigated during the year are grouped as shown in Table III.



TABLE III

No organic disease	349
Acute pulmonary illnesses	65
Bronchitis and allied conditions	41
Bronchiectasis	42
New growths of the lung	18
Other pulmonary conditions	55
Upper respiratory infections	24
Cardiac disease	29
Other conditions	19
Diagnosis not concluded	18
<b>TOTAL</b>	<b>660</b>

Of those cases where no organic disease was found, a number were being examined preventively, e.g. the staffs of municipal nurseries, home helps, recruits to the Bournemouth Police Force, etc. However, investigation and diagnosis of these non-tuberculous cases, and the facility to arrange their treatment when necessary, either in Christchurch Hospital under the Chest Physician or else in a thoracic surgical unit, is undoubtedly a way in which a chest clinic should increasingly afford help to general practitioners.

#### 4. Fluoroscopy Sessions

To facilitate the X-ray examination of their patients general practitioners are now afforded the opportunity to refer any of their patients for a screen examination of the chest; these patients are rarely delayed more than ten minutes for this investigation, and their own doctor receives a report the following day. As shown in Table II, 1,158 people have been examined during the year in this way, of whom 4 per cent were found to be suffering from tuberculosis, besides the other abnormalities of the chest which were found. This service effects a substantial conservation of X-ray film and its extra cost is almost negligible.

#### 5. Clinical Sessions

These have been re-arranged during the year to make two sessions weekly available for each sex, and anyone who wishes can now make an appointment to be seen at a particular time. The introduction of a weekly evening clinic has been appreciated by many persons who would otherwise have had to leave work during the day-time hours. The increase of collapse measures in treatment

has necessitated the introduction of an extra refill session weekly, and arrangements have been made for visitors to the town to have their refill treatment on any week-day by appointment.

## 6. Ancillary Investigations

During 1951, 3,435 X-ray films, 112 tomograms and several bronchograms were carried out. 998 specimens of sputum were examined by the Public Health Laboratory. 35 out-patient gastric lavages were carried out by the Health Visitor, some of these in the patient's own home. Other pathological examinations were arranged through the hospital and public health laboratory services whenever necessary.

## 7. Discharges

Recovered	.....	.....	.....	.....	.....	.....	.....	.....	.....	35
Lost sight of	.....	.....	.....	.....	.....	.....	.....	.....	.....	8
Removed elsewhere	.....	.....	.....	.....	.....	.....	.....	.....	.....	42
Deaths	.....	.....	.....	.....	.....	.....	.....	.....	.....	37*

\* Liable to correction by the Registrar General.

## 8. Beds

During the year the Bournemouth and East Dorset Hospital Management Committee allocated three male and three female beds at Christchurch Hospital to the Chest Physicians for Bournemouth and South Hants for investigation and diagnosis. Nine female beds in the Firs Sanatorium have been made available for the treatment of tuberculous cases from Bournemouth under the Chest Physician, and a fluoroscopy unit has been installed there to improve the facilities for modern methods of treatment.

## 9. Home Treatment

This country cannot afford to build more sanatoria and hospitals at the present time, nor is it certain that they could be staffed if built, but tuberculosis, thanks to the results of research, continues to become an increasingly treatable disease. Fortunately, some of this can sometimes be arranged in the patient's own home and the number of cases in Bournemouth undergoing such management has risen to 21 by the end of the year. These patients are visited regularly by the Chest Physicians and refill treatment is carried out at that visit when practicable. The district Nursing

Service kindly carry out streptomycin injections, and other drugs are prescribed from the clinic or by the family practitioner. Home Helps often have to be provided for long periods to manage domiciliary treatment, and Bournemouth Corporation have allowed this free of charge when necessary. The Children's Officer has several times helped by boarding out children from a household to enable a patient to be cared for by his or her own family. The patient always appreciates the opportunity to have his treatment continued at home, and this liberates a hospital bed for more advantageous use. By treating patients in their own homes where practicable, the waiting list for admission to hospital has rarely exceeded a fortnight and the cost of treating twenty patients at home over a whole year is several thousand pounds cheaper to the community than treating them in hospital.

#### **10. Rehousing**

16 tuberculosis families have been rehoused by the Corporation during the year.

#### **11. Contact Supervision**

During the year 383 persons were examined for the first time as contacts. All were X-rayed and tuberculin tested, and those under 35 years old encouraged to remain under surveillance for a period of several years. Tuberculin negative reactors were offered vaccination with B.C.G. and 75 such people were successfully vaccinated. Only the contacts of the 97 newly notified and the 75 notified cases coming from elsewhere were sought after, thus a ratio of 2.2 contacts attended for each notified case. Several families found difficulty in meeting the travelling expense to undergo contact examination. Toward the end of the year, Bournemouth Corporation arranged that where the need arose the local authority would meet this expense.

#### **12. Tuberculin Testing of School Entrants**

During the autumn term all school entrants in Bournemouth were offered tuberculin testing through the co-operation of the Education Committee. Almost 2,000 children were tested leading to the discovery of seven adult cases of pulmonary tuberculosis among their families. This method of searching for cases of tuber-

culosis is entirely novel. It is believed that the procedure can probably be usefully developed and possibilities are being further explored. These results have been published in the "Medical Officer" in December, 1951 by the doctors responsible.

### **13. Social Welfare Conference**

In the autumn, a weekly conference was instituted at which the Chest Physicians and the Health Visitor meet the Disablement Resettlement Officer, a representative of the National Assistance Board, the Group Occupational Therapist, and the case secretary of the Tuberculosis Voluntary Care Association. This experiment has proved remarkably successful. The total experience of the members of this conference is considerable, and patients' social and economic problems have been substantially helped. At the same time, it has become increasingly apparent how very much the services of an Almoner or Social Worker are needed. Through the deliberations of this conference the placing of recovered patients in suitable employment has been greatly assisted.

### **14. B.C.G. Vaccination of Hospital Staffs**

The whole nursing staff of all branches of the Royal Victoria Hospital at Westbourne, Boscombe, Gloucester Road and St. Leonards have now been offered B.C.G. vaccination where appropriate, and this has been accepted almost without exception. There are now practically no tuberculin negative nurses on that hospital staff and all student nurses are now routinely tuberculin tested and offered B.C.G. vaccination before they begin work on the wards.

### **15. Chest Clinic Staff and Equipment**

The above expansion of chest clinic work has necessitated increase in the staff and equipment of the clinic. During the year the secretarial staff has been increased from one clerk and one junior clerk, to four clerks, all competent shorthand typists.

The Medical Officer of Health has allocated one Health Visitor wholly to tuberculosis work. Such a nurse, by attending clinic sessions and also carrying out the home visits, acquires greater experience of tuberculosis problems, it makes for closer co-operation between the chest physician and the health visitor, and a more

direct liaison between the clinic and patients' homes is established. Provision of this Health Visitor with a car for her domiciliary work has increased her capacity for visiting homes by 50 per cent.

A part-time dark room technician has also been appointed to assist the radiographer with the X-ray work and the labelling and storage of films.

The four valve rotating anode X-ray plant was installed at the end of 1950, and a tomogram attachment was added early in 1951. A modern developing tank was added later in the year.

### **16. Staff Sick Leave**

It is recorded with regret that Dr. D. J. Ap Simon was taken ill during the summer and has remained off work since that time. Good wishes are extended for his speedy recovery. Mrs. Fabian, the radiographer, was also on sick leave for the last six months of the year but was able to return to duty at the beginning of 1952.

### **17. Future Development**

The foregoing data indicate the progress made in the past two years toward keeping pace with modern development in anti-tuberculosis and chest clinic work. It has been my privilege to participate in the later stages of this work begun earlier by Dr. H. R. Paterson and Dr. D. J. Ap Simon. The help and co-operation of the Sanatorium Management Committee and the Bournemouth Public Health Committee in achieving this progress has been invaluable.

The modern medical treatment of early cases of tuberculosis is far more successful than it has ever been before. It is now generally realised that social, economic and environmental influences are often potent factors in precipitating not only the initial breakdown, but a subsequent relapse. It is therefore of paramount importance to alleviate such stresses in life whenever possible. Therefore there is an outstanding need for an Almoner, or Social Worker to work in the clinic and also visiting patients in hospital or sanatorium.

It is not uncommon to find that Tuberculosis Health Visitors spend much of their time doing welfare work for which they are not

specially trained, while at the present time tuberculosis beds in many sanatoria are closed for lack of nurses. With sufficient secretarial staff now appointed, the appointment of an almoner to work partly in the clinic and partly in sanatoria should avoid the need for more than two whole time Tuberculosis Health Visitors.

### PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930

Age periods	Formal Notifications													Total (all ages)	
	Number of Primary Notifications of new cases of Tuberculosis														
	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	—	—	5	9	17	16	12	5	5	4	74	
Females ...	—	1	2	—	2	4	7	11	11	2	4	8	1	53	
Non-Respiratory—															
Males ...	—	—	1	2	1	1	—	—	1	2	—	—	—	8	
Females ...	—	—	—	1	—	1	—	1	2	—	—	—	—	5	

Particulars of new cases of Tuberculosis notified, and 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	—	—	—	—	—	—	—	—
1–5 years	1	3	1	—	—	—	—	—
5–15 "	—	2	3	1	—	—	—	—
15–25 "	14	11	1	1	1	1	—	—
25–45 "	31	22	1	3	8	4	—	—
45–65 "	17	6	2	—	12	3	1	1
65–75 "	5	8	—	—	2	1	—	—
75 and upwards	4	1	—	—	2	3	—	—
Totals	74	53	8	5	25	12	1	1

	New cases		Deaths	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
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
1950	80	11	46	1
1951	127	13	37	2

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

LOCATION	Male	Female	Total
Bones and Joints	2	2	4
Genito-Urinary System	1	1	2
Abdomen	1	—	1
Glands	3	2	5
Other parts	1	—	1
Totals	8	5	13

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.

## Housing

During the year 256 requests were received from housing applicants for support on medical or sanitary grounds. The follow up of these involved 169 home visits by sanitary inspectors and 79 by health visitors for the purpose of making detailed reports on the home circumstances. Each such report together with

medical certificates was assessed by myself or my Deputy and the Housing Manager was advised whether intervention on the grounds of health was considered to be justified.

I would like to take this opportunity to thank the Housing Manager for the able manner in which he incorporated such recommendations in his reports and also the Housing Committee for their sympathetic hearing of these cases.

## Water Supply

The water supply to the Borough comes from two sources, the Bournemouth Gas and Water Company's Water Undertaking supplying the whole of the Borough with the exception of that part of Southbourne east of Irving Road and Clifton Road, which is supplied by the West Hants Water Company.

Chemical and bacteriological analyses are frequently carried out at various points in the Borough, and have all proved satisfactory.

## 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	...	...	...	...	...	1256
Statutory Nuisances found	...	...	...	...	...	861
Statutory Nuisances abated	...	...	...	...	...	781
Total number of visits re above	...	...	...	...	...	5684

### (2) DRAINAGE WORK

Visits to Buildings in course of construction	...	...	...	...	...	2398
Tests applied to drainage at the above	...	...	...	...	...	2061
Defects found and remedied	...	...	...	...	...	365
Visits to existing buildings re drainage	...	...	...	...	...	959
Tests applied to drainage at the above	...	...	...	...	...	419
Defects found and remedied	...	...	...	...	...	179
Cesspools built	...	...	...	...	...	2
Cesspools abolished and drains connected to sewer	...	...	...	...	...	13
*Private sanitary surveys made for prospective purchasers of property	...	...	...	...	...	33

\* These are made on payment of a fee to the Corporation, the scale of charges being as follows :—

	£	s.	d.
If the rateable value of the property is under £50 per annum	1	11	6
If the rateable value of the property is £50 or over but under £250	2	12	6
If the rateable value of the property is £250 or over	5	15	6



## (3) REFUSE ACCOMMODATION

Number of dustbins provided following service of notices	...	...	127
----------------------------------------------------------	-----	-----	-----

## (4) DISINFESTATION

Visits to verminous premises	...	...	...	...	...	121
Premises treated with insecticides	...	...	...	...	...	102
Wasps' nests destroyed	...	...	...	...	...	214
Number of articles disinfested	...	...	...	...	...	57

## (5) INFECTIOUS DISEASES AND DISINFECTION

Visits in connection with enquiries	...	...	...	...	...	357
Number of rooms disinfected	...	...	...	...	...	391
Number of articles disinfected	...	...	...	...	...	1140

## (6) HOUSING

(*Housing Acts, 1936 to 1949 and Public Health Act, 1936*)

Total number of houses inspected for housing defects	...	...	...	747
Total number of visits made for the above purpose	...	...	...	2652
Houses found not to be in all respects reasonably fit for human habitation	...	...	...	482
Defective houses made fit following service of formal and informal notices (including outstanding notices brought forward)	...	...	...	459
Total number of unfit houses demolished	...	...	...	3
Total number of unfit huts and sheds used for human habitation demolished	...	...	...	6

## (7) OVERCROWDING

(*Housing Act, 1936—Part IV*)

Houses inspected re alleged overcrowding	...	...	...	163
Houses found to be overcrowded	...	...	...	69
Number of cases of overcrowding referred to the Housing Manager	...	...	...	25
Number of cases of overcrowding abated	...	...	...	48
Number of houses visited to ascertain "permitted number"	...	...	...	260
Number of rooms measured to ascertain "permitted number"	...	...	...	1089

## (8) CONTROL OF MOVABLE DWELLINGS

During the year **1951**, twenty-one applications for new licences under Section 269 of the Public Health Act, 1936 were received and investigated; of these, the Health Committee granted fifteen until the 31st December, **1951**; but six were refused.

At the end of the year there were in the Borough, eleven licensed sites accommodating various numbers of caravans and a

total of twenty-three licensed caravans. All these have been closely supervised by the Sanitary Inspectors when the conditions attached to the licences were checked.

The restricted air space in a typical caravan condemns the use of this type of dwelling over a prolonged period, especially by children. As more houses become available, the numbers of caravan dwellers should diminish considerably.

#### (9) ATMOSPHERIC POLLUTION

An atmosphere reasonably free from palls of coal smoke is a priceless amenity in any place in terms of health, clean buildings and verdant foliage.

With this in mind, the Sanitary Inspectors made 381 observations of the chimneys at the few industrial premises in the Borough. Eight emissions of smoke in such quantity as to be a nuisance were noted ; but these were abated after the offending firms had been warned.

A complaint of excessive emissions of grit from a boiler plant was investigated and referred to the Ministry of Fuel and Power for advice. Some improvement followed ; but the premises were under observation at the end of the year.

A bye-law regulating the emission of smoke from chimneys, except at private houses, would assist the Sanitary Inspectors in the discharge of their duties.

## (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	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	185	75	1	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ... ..	574	226	11	Nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	Nil	Nil	Nil	Nil
TOTAL ... ..	759	301	12	Nil

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

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1) ...	2	1	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ...	1	—	—	3	—
(b) Unsuitable or defective ...	8	8	—	5	—
(c) Not separate for sexes ...	1	1	—	1	—
Other offences against the Act (not including offences relating to Outwork) ...	3	3	1	—	—
<b>TOTAL</b>	15	13	1	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.)	55	Nil	Nil	Nil	Nil	Nil

## (11) SHOPS ACT, 1950

The Sanitary Inspectors also act as Shops Inspectors.

Total number of visits	183
Contraventions found and remedied after warning letters had been sent	8

## (12) RODENT CONTROL

Complaints received and investigated	1647
Dwellinghouses surveyed	2042
Business premises surveyed	93
Land surveyed	33
Premises where poison baits were laid and taken	1653
Rats destroyed (bodies found)	1825
Estimated number of rats killed after baiting	7240

1519 dwellinghouses were treated, free of charge, for either rats or mice during the year and 134 business premises were treated at a charge to cover the cost of the work.

The following Corporation properties received special attention :--

*Refuse Tips*

The tips at King's Park and Iford (now closed) were treated periodically with good results. The Redhill tip was inspected on several occasions and found to be free from infestation.

*Foreshore*

Effectual measures have been taken to reduce the rat population on the foreshore and cliffs throughout the year. Infestation has occurred chiefly in the neighbourhood of the cafés.

*Pleasure Gardens*

Both the Lower and Upper Gardens were treated on many occasions ; here, much of the infestation has been caused by the indiscriminate dumping of uneaten foodstuffs.

No testing of the sewers was possible this year owing to reduction in staff and further shortage due to sickness.

It should be emphasised that prevention is in every way better than cure in rodent control. Rats are dependent on an adequate food supply for their survival. All refuse, foodscraps, pigswill, etc., should, therefore, be placed in sound, covered, rat-proof

receptacles ; fowl-houses and runs should be made rat-proof and occupiers of all premises, especially of food shops and stores, should ensure that their premises are maintained in a structurally sound condition in order to prevent ingress of rats.

It may not be generally known that under the provisions of the Prevention of Damage by Pests Act, 1949, it is now the legal obligation of the occupier of property to notify the local authority forthwith in writing if it comes to his knowledge that rats or mice are living on, or resorting to, his land in substantial numbers.

Two formal notices under Section 4 of the Act were served upon owners of premises requiring the execution of works.

#### (13) FERTILISERS AND FEEDING STUFFS ACT, 1926

Nine of the ten samples taken under this Act were reported upon by the Public Analyst as satisfactory. The remaining sample did not conform to the guarantee.

#### (14) PHARMACY AND POISONS ACT, 1933

This Act requires County Borough Councils and some other Local Authorities to keep a list of retailers who are not registered pharmacists and who are entitled, subject to certain conditions, to sell poisons included in Part II of the Poisons List, (e.g., ammonia, certain disinfectants and weed-killers).

At 31st December, 1951, there were 276 "listed sellers" in the Borough. The Sanitary Inspectors visited these from time to time ; but only three contraventions of the Act were found and these were remedied following informal action.

#### (15) RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

This Act which came into operation on the 1st November, 1951, is to secure the use of clean filling materials in upholstered articles and other articles which are stuffed or lined, and for purposes connected therewith.

Six premises where listed filling materials are used, have been registered and two premises used for the storing of rag flock were inspected and licensed for one year.

## (16) SWIMMING BATH WATER

Eleven samples for chemical analysis and fourteen for bacteriological examination were taken from the three swimming baths open to the general public. These were found to be satisfactory.

Of the samples taken from the swimming pools at two hotels, four from one of the pools were unsatisfactory. This pool has now been closed.

## (17) PUBLIC CONVENIENCES

There are now 154 public conveniences in the Borough under the control of this department. During the year the Superintendent and his assistant collected a total of £14,101 6s. 7d. from the coin-operated locks.

It is displeasing to report the misuse of and the damage to these buildings by irresponsible members of the public.

More public conveniences are needed in some of the outlying and rapidly developing parts of the town. The construction of additional buildings, however, is a matter of some difficulty at present owing to the limitation of capital expenditure imposed upon Local Authorities by the Government.

## (18) MISCELLANEOUS INSPECTIONS

<i>Description</i>	<i>Number made</i>
Young Persons (Employment) Act, 1938	17
Offices	29
Public Conveniences...	770
Places of Entertainment	106
Piggeries and stables	151

## (19) INSPECTION OF FOOD AND FOOD PREMISES

(a) *Milk and Dairies.*

The Ministry of Agriculture supervises the production of milk at dairy farms ; but the local authority is still responsible for the control of all other milk distributors' premises in the Borough. Much time has been devoted to this important work, by the Sanitary Inspectors, details of which are as follows :—

	<i>Number registered</i>	<i>Number of inspections</i>
Dairies	11	328
Milkshops	63	156
Pasteurising Plants	3	162



The following licences were in operation during the year :—

*Tuberculin Tested Milk*

Bottlers' Licences	....	....	....	....	....	....	....	....	....	3
Dealers' Licences	....	....	....	....	....	....	....	....	....	13

*Pasteurised Milk*

Dealers' (Pasteurisers') Licences	....	....	....	....	....	....	....	....	....	3
Dealers' Licences	....	....	....	....	....	....	....	....	....	64

290 samples of Pasteurised milk and 167 samples of Tuberculin Tested (Pasteurised) milk were submitted to the Public Health Laboratory for examination, when all were found to comply with the prescribed standards.

(b) *Ice Cream.*

Most of the Ice Cream retailed in Bournemouth during 1951 was pre-packed by the manufacturers in suitable wrappers or containers.

Eight premises were registered for the preparation of this commodity. In addition, supplies were brought into the Borough from nine manufactories in other towns.

Your Sanitary Inspectors made 924 inspections of Ice Cream premises and obtained 295 samples which were subjected to the Methylene Blue Test at the Public Health Laboratory to ascertain the hygienic quality of the Ice Cream. The results were as follows :—

<i>Number of Samples</i>	<i>Result (Provisional Grade)*</i>
274	I
11	II
7	III
3	IV

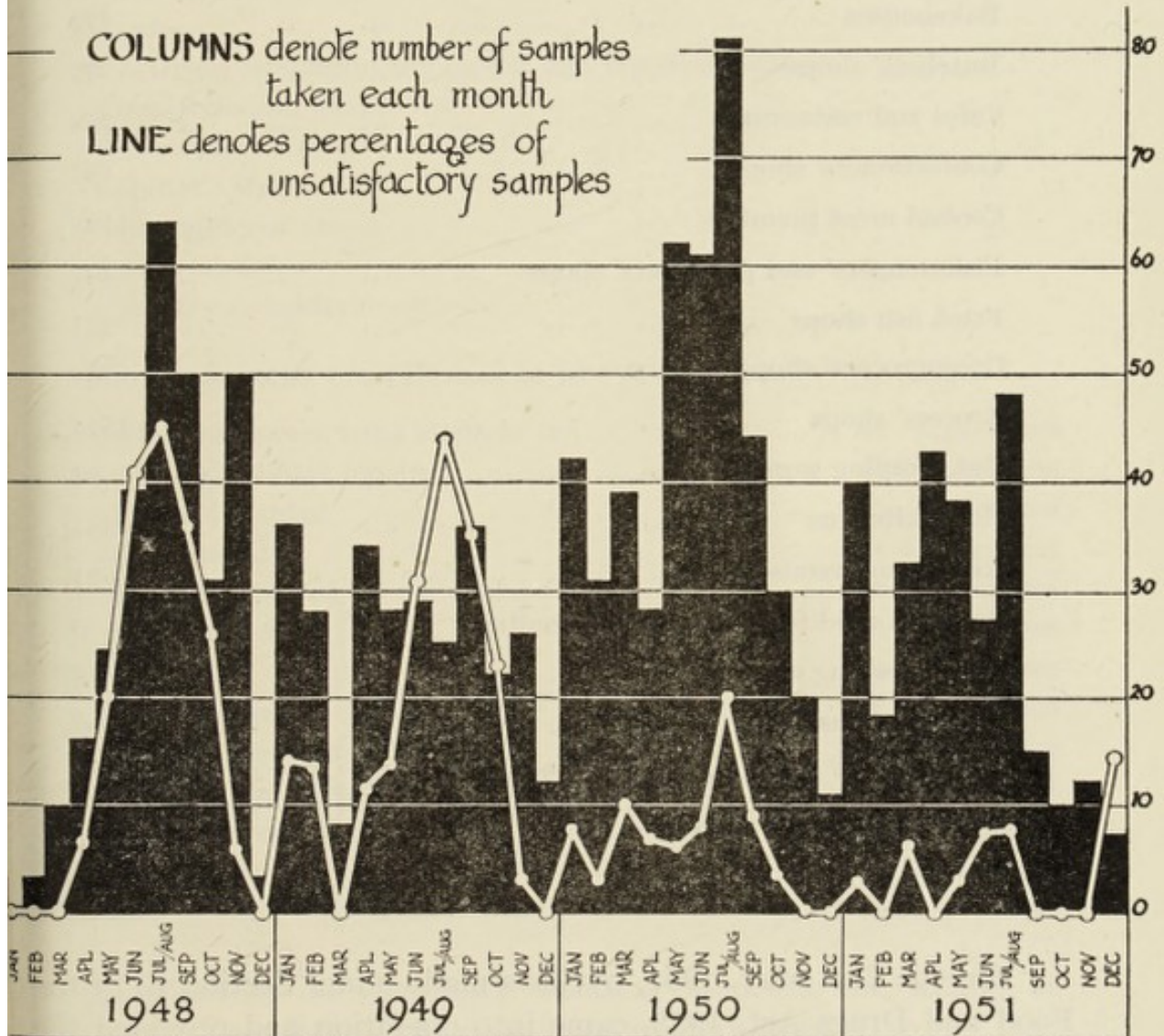
\* Grades I and II are classed as satisfactory ; but where a series of samples from the same supply fall within Grades III and IV, the bacteriological purity of the ice cream is regarded as unsatisfactory and indicates contamination in handling or manufacture.

Prompt warnings of unsatisfactory samples are given to the manufacturers and vendors concerned whose premises and methods are inspected ; and in the case of unsatisfactory samples from supplies brought into the Borough, the local Health Department is notified.

The chart on page 61 shows the progress that has been made during the past four years in improving the hygienic quality of Ice Cream sold in the Borough.

# ICE CREAM SAMPLES

## METHYLENE BLUE TEST RESULTS



(c) *Inspection and Control of Food Premises.*

The control of the various premises where food intended for human consumption is prepared, handled or sold is a most important part of public health administration and one to which your Sanitary Inspectors devoted much time during the year 1951 as is shewn in the following summary of visits :—

<i>Type of premises</i>	<i>Number of visits</i>
Bakehouses	179
Butchers' shops	77
Cafes and restaurants	754
Confectioners' shops	154
Cooked meat premises	1188
Fishmongers' and poulterers' shops	407
Fried fish shops	131
Greengrocers' shops	164
Grocers' shops	1514
Gut scraping works	82
Hotel kitchens	551
Ice Cream premises	924
Premises used for the killing of poultry	6
School feeding centres	43
Slaughterhouse	6
Stalls, kiosks and street traders' vehicles	20
Wholesale meat markets	105
Total	6305

On the 21st May, 1951, byelaws made under Section 15 of the Food and Drugs Act, 1938, came into operation and provided the Department with powers for securing the observance of sanitary and cleanly practices and conditions in connection with the handling, wrapping and delivery of food and sale of food in the open air.

Steps were taken by the Sanitary Inspectors in the course of their routine visits, to familiarise food traders with the provisions of the byelaws ; furthermore, the Senior Sanitary Inspector gave

four addresses to various organisations on the subject of food hygiene.

As a result of persuasive action under the byelaws and the Food and Drugs Act, 1938, the following improvements were secured by the Inspectorial Staff at a total of one hundred and four food premises comprising :—

2	bakehouses
5	butchers' shops
11	cafes
68	catering establishments (hotels and boarding houses)
4	confectioners' shops
1	fishmonger's shop
1	fruiter's shop
3	greengrocers' shops
8	grocers' shops
1	poultry slaughterhouse

The improvements referred to above were :—

Bedrooms disconnected from kitchens	...	...	...	at	2	premises
Ceiling and wall plaster repaired	...	...	...	at	14	premises
Cracked cups discarded	...	...	...	at	1	premises
Decorations executed	...	...	...	at	41	premises
Defective sinks replaced by sound sinks	...	...	...	at	6	premises
Drain inlet removed	...	...	...	at	1	premises
Floors repaired	...	...	...	at	2	premises
Food stores improved	...	...	...	at	4	premises
Rat-proofing carried out	...	...	...	at	2	premises
Refuse accommodation improved	...	...	...	at	7	premises
Ventilation improved	...	...	...	at	5	premises
Water heaters installed	...	...	...	at	18	premises
Walls tiled	...	...	...	at	1	premises

In addition, an insanitary building used for the killing of poultry was demolished and re-built on modern lines.

Much remains to be done in educating food handlers in their responsibilities.

Throughout the year there was close co-operation between the Department and the local Executive Officer of the Ministry of Food regarding the suitability or otherwise of proposed food premises, all of which were visited by the sanitary inspectors.

## FOODSTUFFS CONDEMNED FOLLOWING INSPECTION

<i>Commodity</i>	<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Bacon ... ..			1	7
Beverages ... ..			1	10
Beef Cubes ... ..			1	12
Biscuits ... ..		1	1	3
Bottled Fruit ... ..			1	15
Bread Dough ... ..		7	3	2
Butter ... ..			2	27
Cakes ... ..			1	14
Cake and Pudding Mixture ... ..		1	—	19
Cereals ... ..		14	3	7
Cheese ... ..		9	3	3
Chitterlings ... ..		1	—	26
Cooked Meat ... ..		1	—	14
Corned Meat ... ..				3
Custard Powder ... ..				22
Dried Fruit ... ..		3	3	20
Eggs ... ..		1	2	21
Fats ... ..		12	—	14
Fish... ..	4	17	—	19
Fish Paste ... ..				26
Flour ... ..		2	3	18
Haggis ... ..			1	4
Ice Cream Powder ... ..				24
Jellies ... ..		2	1	3
Meat ... ..	2	10	1	28
Milk Powder ... ..		3	—	—
Mincemeat ... ..			1	27
Pickles ... ..				10
Pies ... ..		2	3	18
Poultry ... ..			2	4
Preserves ... ..			2	14
Puddings ... ..				12
Rabbits ... ..		1	1	24
Salad Dressing ... ..				9
Salts ... ..			1	21
Sauces ... ..				24
Sausage ... ..			1	20
Spices ... ..				8
Sugar ... ..				10
Sweets and Chocolates ... ..	...	3	1	20
Tea ... ..			2	19
Tinned Goods ... ..	17	5	2	22
Vegetables ... ..	1	10	—	—
Total	30	1	2	7

## SLAUGHTERHOUSES AND THE INSPECTION OF MEAT

The only slaughterhouse in use in the Borough in the year 1951 was a small one licensed for the occasional slaughter of cottagers' pigs, the carcasses and organs of which were inspected and found fit for human consumption.

The wholesale meat markets and butchers' shops were visited frequently.

## LEGAL PROCEEDINGS

The following is a summary of the legal proceedings taken during the year under review.

<i>Proceedings taken under</i>	<i>Reason</i>	<i>Result</i>
Food and Drugs Act, 1938	For selling sausages deficient in meat	Defendants fined £5
Food and Drugs Act, 1938	Alleged sale of adulterated sausages	Case dismissed. Costs amounting to £5 5s. 0d. awarded against Corporation
Food and Drugs Act, 1938	For selling Chelsea bun and cake containing foreign materials	Defendant fined £3 and costs
The Milk and Dairies Regulations, 1949	For selling bottle of milk containing a potato	Defendants fined £5
Public Health Act, 1936	For failing to comply with an Abatement Notice	Defendant fined £1. Order made requiring him to comply with notice within 28 days

**WORK EXECUTED BY LOCAL AUTHORITY ON FAILURE OF OWNERS OF PROPERTY IN COMPLYING WITH STATUTORY NOTICES**

<i>Notice served under</i>	<i>Particulars of work executed</i>	<i>Cost involved which has been recovered</i>
Section 39, Public Health Act, 1936	Leaking eaves gutters repaired	£3
Section 56, Public Health Act, 1936	Defective paving repaired	£12 10s. 0d.
Ditto	Ditto	£20 0s. 0d.
Ditto	Ditto	£15 0s. 0d.
Section 45, Public Health Act, 1936	Defective water-closet repaired	£4 6s. 4d.

# Report of the Borough Meteorological Registrar 1951

## **JANUARY**      **Unsettled and Wet on the whole**

The average maximum temperature was only 46.4 degrees and the minimum 36.9 degrees. The mean temperature of 41.7 was only one degree above the average. The highest maximum of 52 occurred on the 17th and the lowest minimum of 27 degrees on the 29th.

Earth temperatures averaged 40.1 degrees at 1 foot and 42.3 degrees at 4 feet.

The total fall of rain was 3.22 inches, 19 per cent above the average. Heaviest fall in one day was on the 5th (.58 inches). There were 16 days which had .01 inches or more and .04 inches or more fell on 13 days. Snow fell twice but did not settle. Hail was recorded on 2 days, thunder once and fog on two mornings. Ground frost occurred on 4 nights.

The daily mean of sunshine recorded was 1.51 hours, 71 per cent of the average.

## **FEBRUARY**      **Rather cold, very wet but bright**

The mean maximum temperature was 46 degrees and the minimum 35.7. Mean temperature was 40.9, .01 below the average. The highest maximum occurred on the 16th (50 degrees) and the lowest minimum 30 degrees on the 28th.

Earth temperatures were 39.8 and 42 degrees at 1 and 4 feet.

Total rainfall for the month was 6.04 inches which represented 252 per cent of the average. The largest fall was 1.22 inches on the 8th. Twenty-two days had .01 inches or more and on 18 of these days there was more than .04 inches. Snow occurred once and hail fell twice during the month.

The daily mean of sunshine was 2.95 hours—only just below the average (98 per cent).

**MARCH      Unsettled and rather cold, very wet**

The mean maximum temperature was 47.6 degrees and the minimum 36.7. The mean temperature was 42.1 degrees, 1.3 degrees below the average. The highest maximum was 54 degrees on the 15th and the lowest minimum 27 recorded on the 1st and 5th.

Temperatures at 1 and 4 feet were 41.7 and 42.7.

Rainfall was heavy (3.56 inches) 153 per cent of the month's average. The largest fall occurred on the 13th (.69). There were 23 rainy days (.01 inches or more) and 18 of these were "wet-days" (.04 inches or more).

Hail fell on 2 days, fog occurred once, and ground frost twice.

The daily mean of sunshine was 3.02 hours, 68 per cent of the average.

**APRIL      Cool and unsettled but sunny, rather wet**

The average maximum temperature was 54.6 and the minimum 37.6 giving a mean temperature of 46.1, this was 1.2 degrees below the average. The highest maximum was 76 degrees on the 25th and the lowest minimum 32 on the 15th and 17th.

Temperatures at 1 and 4 feet were 46.1 and 45.8 respectively.

Total rainfall was 3.10 inches (173 per cent of average) the highest fall in one day was .73 on the 30th and 15 days of the month were rainy while 13 were wet.

Snow fell on one day but did not settle while hail occurred on 3 days.

The month's sunshine was above the average with a daily mean of 6.95 hours this represented 118 per cent of the average.

**MAY      Cool, wet and mainly dull**

The average maximum temperature was 58.9 and the minimum 44.1. Mean temperature of 51.5 was 2.4 degrees below the average. The highest maximum was 68 degrees on the 31st and the lowest



minimum 36 degrees was recorded on the night of the 1st of the month.

Temperatures at 1 and 4 feet were 52.8 and 50.4.

Rainfall for the month totalled 2.57 inches, 146 per cent of the average and the highest amount of 1.05 inches fell on the 26th. 14 days were rainy and 11 of these were wet days.

Snow fell once and there was a thunderstorm during the month.

The daily sunshine mean was 5.96 hours only 84 per cent of the month's average.

### **JUNE Sunny and dry but average temperatures**

Average maximum temperature was 67.2 and the minimum 49.8. The mean temperature was just above the average (plus 0.3) and was 58.5 degrees. The highest maximum of 75 degrees occurred on the 21st and the lowest minimum 43 degrees on the same day.

Temperatures at 1 and 4 feet were 60.6 and 57.0 degrees.

Rainfall was very low, only .54 of an inch, which was only a quarter (27 per cent) of the month's average. Highest fall was .43 inches on the 11th and there were only 2 wet days amongst the 6 rainy days. No other phenomena were recorded during the month.

Sunshine was above the average (128 per cent) and the daily mean was 9.82 hours.

### **JULY Rather warm and sunny, fairly dry**

Average maximum and minimum temperatures were 72.4 and 55.4 and the mean temperature was 63.9, 2.2 degrees above the average. The highest maximum was 81 degrees and occurred on three days the 17th, 20th and the 28th. The lowest minimum of 46 degrees occurred on the 13th and 14th.

The 1 foot and 4 feet average temperatures were 64.5 and 61.1.

Rainfall for the month was 1.19 inches, only 56 per cent of the monthly average. The highest amount in one day was .80 of an inch which fell on the 22nd. Seven days were rainy and 4 of these wet. Hail was recorded once and there were three thunderstorms during the month.

The daily mean of sunshine was 7.77 hours which was 109 per cent of the average.

### **AUGUST      Unsettled, rather cool and wet**

The average maximum was 67.0 degrees and the minimum 54.1 degrees. This gave an average mean temperature of 60.5 degrees, 1.2 below the average. The highest maximum of 73 degrees occurred on the first and the lowest minimum of 47 degrees on the 16th.

The 1 foot and 4 foot temperatures were 63.0 and 62.0 degrees.

Rainfall totalled 4.14 inches, 164 per cent of the average. Highest day's total for the month was .89 which fell on the 11th. On 19 days .01 inches or more was recorded and more than .04 of an inch fell on 16 days.

Sunshine mean was 6.41 hours, 98 per cent of the average.

### **SEPTEMBER      Rather wet and cloudy, but warm**

The average maximum temperature was 64.9 and the minimum 53.3, giving a mean temperature of 59.1, 1.3 degrees above the average. The highest maximum of 74 degrees occurred on the 6th and the lowest minimum of 42 on the 29th.

Earth temperatures at 1 and 4 feet were 60.9 and 60.6.

Rainfall for the month was above the average and totalled 3.25 inches (139 per cent of the average). The highest fall of rain was on the 27th (1.24 inches), 13 days of the month were rainy and 10 of these wet.

Thunder was heard once but the month was free from hail and fog.

The daily mean of sunshine was 3.11 hours and the total recorded only 57 per cent of the average for the month.

### **OCTOBER      A dry month**

Average maximum temperature for the month was 59.1 degrees and the minimum 43.1 thus the mean for the month was only 0.7 below the average. The highest day temperature occurred on the 15th (67 degrees) and the lowest on the 23rd and 24th (28 degrees).

Rain during the month totalled only 1.66 inches (39 per cent average) the highest fall being .58 inches on the 29th and only 8 days during the month had more than .04 of an inch. Hail fell once and two thunderstorms were experienced.

The daily mean of bright sunshine was 4.80 hours and the total was above the average (128 per cent).

### **NOVEMBER**      **Exceptionally wet, though very mild**

Both maxima and minima were high (53.6 and 44.4) the mean temperature being 49 degrees (3.8 degrees above the average). Highest maximum was 59 degrees on the 7th and the lowest temperature only 32 degrees on the 26th.

Earth temperatures were 49 and 51.1 degrees at 1 and 4 feet.

Rainfall for the month was very high, exactly 10 inches being recorded, this figure being nearly 3 times the usual monthly average (294 per cent). The greatest fall in one day was on the 8th when 1.47 inches of rain fell. Rain was recorded on 22 days and of these 20 days had more than .04 of an inch.

The daily mean of sunshine was 2.66 hours, exactly the same as the average for the month.

### **DECEMBER**      **Mainly rather mild and dry, average sunshine**

The mean maximum and minimum were 49.5 and 40.3 degrees—a very small daily range, and the month's mean temperature was 2.6 degrees above the average. The highest temperature for the month was 54 degrees and was recorded on 3 days, the 15th, 19th and 20th, the lowest temperature occurred on the 11th (26 degrees).

Earth temperatures at 1 and 4 feet were 44.1 and 47.7 degrees.

Rainfall for the month was only 75 per cent of the monthly average and yielded 2.89 inches of which the greatest fall was .56 inches on the 28th. Just under half the month was completely free from rain, but of the 15 rainy days 14 were "wet days". Hail was recorded on one day only and the sunshine total was 97 per cent of the monthly average.

D. B. MARSH,  
*Meteorological Registrar.*

**BOURNEMOUTH OBSERVATORY**

Latitude 50° 45' N.

Longitude 1° 55' W.

Height above Sea Level 145 feet.

**TABLE OF SUNSHINE, RAINFALL AND MEAN TEMPERATURE**

(The first line gives the 40 year Average, the second the figure for 1951)

**SUNSHINE (Hours and tenths)**

	<i>Jan.</i>	<i>Feb.</i>	<i>March</i>	<i>April</i>	<i>May</i>	<i>June</i>	<i>July</i>	<i>Aug.</i>	<i>Sept.</i>	<i>Oct.</i>	<i>Nov.</i>	<i>Dec.</i>
40 Years	63.8	85.3	126.0	160.5	236.5	237.0	229.8	204.8	192.6	138.3	90.1	66.2
<b>1951</b>	<b>46.8</b>	<b>82.6</b>	<b>93.6</b>	<b>208.5</b>	<b>184.8</b>	<b>294.6</b>	<b>240.9</b>	<b>198.7</b>	<b>93.3</b>	<b>148.8</b>	<b>79.8</b>	<b>50.0</b>
Totals :	40 Year Average : 1810.4 hours											
	1951 : 1722.4 hours											

**RAINFALL (Inches)**

40 Years	3.06	2.57	2.85	2.00	1.70	1.27	2.26	2.70	2.30	3.91	3.45	4.08
<b>1951</b>	<b>3.22</b>	<b>6.04</b>	<b>3.56</b>	<b>3.10</b>	<b>2.57</b>	<b>.54</b>	<b>1.19</b>	<b>4.14</b>	<b>3.25</b>	<b>1.66</b>	<b>10.0</b>	<b>2.89</b>
Totals :	40 Year Average : 32.19 inches											
	1951 : 42.16 inches											

**MEAN TEMPERATURE**

40 Years	41.2	41.4	45.0	47.8	52.1	58.0	61.7	61.5	58.0	52.0	43.7	43.0
<b>1951</b>	<b>41.7</b>	<b>40.9</b>	<b>42.1</b>	<b>46.1</b>	<b>51.5</b>	<b>58.5</b>	<b>63.9</b>	<b>60.5</b>	<b>59.1</b>	<b>51.1</b>	<b>49.0</b>	<b>44.9</b>
Totals :	40 Year Average : 50.4 degrees											
	1951 : 50.8 degrees											

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

*Meteorological Registrar, 5, Nelson Road, Bournemouth. Telephone Westbourne 61002.*

# Report of the Public Analyst

For the Year ended the 31st December, 1951

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 **1951**.

The total number of samples submitted under the Food and Drugs Act, 1938, was 526, of which 75 were formal samples, and 450 were informal samples taken by your Food and Drugs Inspectors, and one sample was submitted privately.

The number of adulterated samples was 32, representing a percentage of 5.1 per cent which is an increase over the year 1950.

The various statistics are presented in Tables I to VII, and the following points require comment.

The average percentage of fat and non-fatty solids in the milk (Table VI) shows a decrease over the corresponding value for 1950, although the actual results are quite satisfactory, and no fat deficient or adulterated samples found.

Channel Island milks have a separate fat standard, and the results of examination of these milks are shown in Table VII. On several occasions fat deficient milks were found, but there was little doubt that the milks were actually genuine and the deficiency was due to natural causes. These causes may be briefly summarised as follows:-- In spring time it is normal for milk fats to drop, and **1951** had a late spring, hence the drop-fat extended to the third quarter of the year. Any drop is accentuated by long intervals between milkings, and due to labour difficulties, most farmers had to milk early in the afternoon or evening and late in the morning, often 15 or 16 hours existing between milkings, and this leads to a morning's milk which is low in fat.

It is a requirement in certain dairies that milk bottles should be sterilised by use of a chlorine sterilising agent, and these agents

usually contain considerable traces of chlorates. Milk is therefore tested for the presence of chlorates, to ensure that the chlorine steriliser has been properly rinsed from the bottle before it is used for milk. This ensures that the sterilising agent has no preservative effect on milk. Seventy-six tests for chlorates were carried out during the year.

Nine samples of canned vegetables were examined, and two found to contain excessive quantities of metallic impurities.

Six samples of cider were examined and found to be contaminated with a deposit containing yeasts, dead flies and pectin compound. This would not occur if the cider had been properly processed and hygienic conditions were existing at the factory.

Thirteen samples of cake and confectionery were examined, and one was found to contain small pieces of glass, a successful prosecution resulted on this sample.

One sample of cooking fat was examined and found to consist of soft paraffin. The use of this material is prohibited in the preparation of food.

Fourteen samples of fish pastes and other fish products were examined, and all found to be satisfactory. Some of these products were imported and had fish contents lower than that required for home produced pastes (70 per cent). It was unfair that fish pastes, and in fact other foods too, were imported at a lower standard than home produced materials, and as a result of complaints from various quarters, an order came into effect bringing the two types into line.

One sample of gravy browning was received. No standard is available for this preparation, but usually the gravy browning consists of salt, caramel, hydrolysed protein and cereal. The sample submitted consisted of a solution of a harmless brown dye in water. No objection could be taken to this as it serves for the purpose.

Eight samples of jams, mincemeats, etc. have been examined and one sample of mincemeat called "Irish Mincemeat" reported as adulterated, due to the absence of fat and acetic acid required by M.o.F. standard. The sample would be more correctly described as sweetened dried fruit.

Two samples of "Creamy" lollies were examined and reported against, being mis-described. Use of the adjective "creamy" infers the presence of considerable quantities of butter fat, whereas only 0.7 per cent fat (not butter fat) was present in these samples. The product would be more correctly described as a sweetened water ice.

Forty-nine samples of meat products were examined and nine samples of sausages were reported against as being deficient in either pork or beef in amounts varying from about ten per cent to forty-five per cent. The vendors were usually prosecuted successfully.

Seven informal samples of vinegar were examined and found to be as declared.

Twelve samples of spices were examined and found to be free from adulteration.

During the year **1951**, 35 samples of drugs were examined and found to conform with the requirements of the 1948 British Pharmacopoeia, or the British Pharmaceutical Codex, or to the composition declared on the label.

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

#### **Pharmacy and Medicine Act, 1941**

Two samples were submitted for examination under the provisions of this Act, and conformed with its requirements.

#### **Rag Flock Act, 1911**

Eleven samples were submitted for examination and nine samples conformed with the chlorine limit test of 30 parts per 100,000. This Act has been replaced by a new Act in which various standards for cleanliness have been fixed. When some experience has been gained, of the working of the new Act, and its accompanying regulations, it will be interesting to review the situation.

## Fertilisers and Feeding Stuffs Act, 1926

The ten samples of fertilisers taken under this Act were reported upon. In one case of dried blood fertiliser, an excess of nitrogen was present, and whilst this is unlikely to be harmful, it may be economically wasteful.

## Swimming Bath Water

Samples of water from Municipal and Private Swimming Baths are submitted to chemical examination from time to time, and were found suitable for further use.

## Water Supply

Regular samples of water from both sources of supply to the Borough (Bournemouth Water Co. and the West Hants Water Co.) are examined chemically and have all proved satisfactory.

## Sewage Disposal

Samples of effluent from the Kinson Works have been regularly examined, and in view of the excessively over-loaded condition of these Works, the quality of the effluent is fair, but it does not come up to the standards expected, and the River Stour, into which the effluent discharges, suffers in consequence.

TABLE I  
75 Formal Samples

Nature of sample	Examined	Genuine	Harmful Colouring	Preservative	Adulterated	Percentage Adulterated
Beer .....	3	3	-	-	-	-
Milk .....	62	62	-	-	-	-
Channel Island Milk .....	2	1	-	-	1	50
Sausages, Beef .....	2	1	-	-	1	50
Sausages, Pork .....	1	-	-	-	1	100
Skim Milk Powder .....	1	1	-	-	-	-
Whisky .....	4	4	-	-	-	-
	<hr/> 75	<hr/> 72			<hr/> 3	



TABLE II  
450 Informal Samples

Nature of sample	Examined	Genuine	Harmful Colouring	Preservative	Adulterated	Percentage Adulterated
<i>Foods</i>						
Almonds, Ground	4	4	-	-	-	-
Almonds, Salted	1	1	-	-	-	-
Baking Powder	2	2	-	-	-	-
Beans, Runner	1	1	-	-	-	-
Beer	4	4	-	-	-	-
Biscuits	1	1	-	-	-	-
Blancmanges and Jellies	9	9	-	-	-	-
Butter	1	1	-	-	-	-
Cake Flours and Mixtures	3	3	-	-	-	-
Canned Fish	5	5	-	-	-	-
Canned Fruit	1	1	-	-	-	-
Canned Vegetables	9	7	-	-	2	22.2
Cashew Nuts	1	1	-	-	-	-
Cheese, Processed	1	1	-	-	-	-
Cider	6	-	-	-	6	100
Coffee and Essences	8	8	-	-	-	-
Confectionery and Sweets	13	12	-	-	1	7.7
Cornflour	5	5	-	-	-	-
Cooking Fat	1	-	-	-	1	100
Custard Powder	5	5	-	-	-	-
Essences and Flavourings	4	4	-	-	-	-
Farinoca	1	1	-	-	-	-
Fish Pastes and Cakes	14	14	-	-	-	-
Flour	1	1	-	-	-	-
Flour, Self-raising	8	8	-	-	-	-
Fondant and Icing	2	2	-	-	-	-
Fruit Bar	2	2	-	-	-	-
Gelatine	3	3	-	-	-	-
Gravy Browning	1	1	-	-	-	-
Ground Rice	1	1	-	-	-	-
Herbs	1	1	-	-	-	-
Ice Cream	28	28	-	-	-	-
Jams, Mincemeat, etc.	8	7	-	-	1	12.5
Lemonade Powder	9	9	-	-	-	-
Lollies, "Creamy"	2	-	-	-	2	100
Meat Paste, Sausages	46	39	-	-	7	15.3
Milk	64	64	-	-	-	-
Milk, Channel Island	23	14	-	-	9	39.1
Milk (Chlorates Test)	76	76	-	-	-	-
Orangeade	1	1	-	-	-	-
Pineapple, Dried	1	1	-	-	-	-
Rice	3	3	-	-	-	-
Rice, Ground	1	1	-	-	-	-
Saccharin Tablets	1	1	-	-	-	-
Sago	1	1	-	-	-	-
Sandwich Spread	2	2	-	-	-	-
Sauces	3	3	-	-	-	-
Semolina	1	1	-	-	-	-

TABLE II—*continued*

Nature of sample	Examined	Genuine	Harmful Colouring Matter	Containing Preservative	Adulterated	Percentage Adulterated
Soya flour	1	1	-	-	-	-
Soup	1	1	-	-	-	-
Spices	12	12	-	-	-	-
Tapioca	3	3	-	-	-	-
Tea	1	1	-	-	-	-
Vinegar	7	7	-	-	-	-
Walnut Kernels	1	1	-	-	-	-
<i>Drugs</i>						
Aspirin Tablets	2	2	-	-	-	-
Basilicon Ointment	1	1	-	-	-	-
Bicarbonate of Soda	4	4	-	-	-	-
Camphorated Oil	1	1	-	-	-	-
Castor Oil	4	4	-	-	-	-
Cough Syrup	2	2	-	-	-	-
Eucalyptus Oil	2	2	-	-	-	-
Friar's Balsam	3	3	-	-	-	-
Glycerine	1	1	-	-	-	-
Liquorice Powder	1	1	-	-	-	-
Menthol Pellets	1	1	-	-	-	-
Olive Oil	1	1	-	-	-	-
Paraffin Liquid	2	2	-	-	-	-
Perodex Germicide	1	1	-	-	-	-
Seidlitz Powders	2	2	-	-	-	-
Stomach Pills	1	1	-	-	-	-
Tincture of Iodine	1	1	-	-	-	-
Wintergreen Ointment	1	1	-	-	-	-
Yeast Tablets	2	2	-	-	-	-
Zinc Ointment	2	2	-	-	-	-

TABLE III

## Private Sample

No.	Nature of sample	Nature of examination
1	Meat Pie	Poisonous metals and fitness for consumption

TABLE IV

## Adulterated Formal Samples

No.	Nature of sample	Nature of adulteration
327	Pork Sausage	25.0 per cent deficiency of pork
10	Beef Sausage	29.0 per cent deficiency of beef
540	Milk, Channel Island	10.0 per cent deficiency of fat

TABLE V

## Adulterated Informal Samples

<i>No.</i>	<i>Nature of Sample</i>	<i>Nature of adulteration</i>
46	Irish Mincedmeat	Acetic acid and fat absent
19	Sausage, Beef	9.8 per cent deficiency of beef
43	Sausage, Beef	10.0 per cent deficiency of beef
54	Sausage, Beef	16.0 per cent deficiency of beef
88	Sausage, Beef	36.0 per cent deficiency of beef
24	Sausage, Pork	28.0 per cent deficiency of pork
5	Sausage, Beef	45.0 per cent deficiency of beef
30	Sausage, Beef	35.8 per cent deficiency of beef
18	Milk, Channel Island	2.5 per cent deficiency of fat
25	Milk, Channel Island	2.5 per cent deficiency of fat
35	Milk, Channel Island	2.5 per cent deficiency of fat
43	Milk, Channel Island	5.0 per cent deficiency of fat
1	Milk, Channel Island	12.5 per cent deficiency of fat
3	Milk, Channel Island	2.5 per cent deficiency of fat
11	Milk, Channel Island	2.5 per cent deficiency of fat
13	Milk, Channel Island	2.5 per cent deficiency of fat
84	Milk, Channel Island	7.5 per cent deficiency of fat
51	Tomato Soup	Contained 3.1 grains of tin per lb.
52	Tomato Juice	Contained 15 parts per million of lead
76	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
77	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
78	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
79	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
80	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
81	Cider, Bottled	Deposit of yeasts, dead flies, pectin compound
15	Chelsea Bun	Contained particles of broken glass
57	Cooking Fat	Consisted of white soft paraffin
24	Creamy Lollies	Misdescription, only contained 0.7 per cent edible fat
43	Creamy Lollies	Misdescription, only contained 0.7 per cent edible fat

TABLE VI (Excluding Channel Island Milks)

## Average proportions of fat and non-fatty solids

<i>Quarter</i>	<i>No. of Samples</i>	<i>Percentage Fat</i>	<i>Percentage of Non-fatty Solids</i>
1	21	3.51	8.86
2	48	3.35	8.78
3	35	3.34	8.74
4	22	3.56	8.87
Whole Year	126	3.44	8.81

TABLE VII (Channel Island Milks)

Average proportion of fat and non-fatty solids

<i>Quarter</i>	<i>No. of Samples</i>	<i>Percentage Fat</i>	<i>Percentage of Non-fatty Solids</i>
1	2	4.30	9.20
2	10	4.03	9.15
3	7	3.94	8.90
4	6	4.40	9.25
Whole Year	25	4.17	9.12

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

G. V. JAMES,

*Public and Agricultural Analyst.*

TABLE VII. (Continued)

Physical properties of the compounds

Compound	Melting point, °C	Boiling point, °C	Refractive index, $n_D^{20}$	Density, $d_4^{20}$
1	102	175	1.452	1.012
2	105	178	1.455	1.015
3	108	180	1.458	1.018
4	110	182	1.460	1.020
5	112	185	1.462	1.022
6	115	188	1.465	1.025
7	118	190	1.468	1.028
8	120	192	1.470	1.030
9	122	195	1.472	1.032
10	125	198	1.475	1.035

TABLE VIII. (Continued)

Physical properties of the compounds

Compound	Melting point, °C	Boiling point, °C	Refractive index, $n_D^{20}$	Density, $d_4^{20}$
11	128	200	1.478	1.038
12	130	202	1.480	1.040
13	132	205	1.482	1.042
14	135	208	1.485	1.045
15	138	210	1.488	1.048
16	140	212	1.490	1.050
17	142	215	1.492	1.052
18	145	218	1.495	1.055
19	148	220	1.498	1.058
20	150	222	1.500	1.060

TABLE IX. (Continued)

Physical properties of the compounds

Compound	Melting point, °C	Boiling point, °C	Refractive index, $n_D^{20}$	Density, $d_4^{20}$
21	152	225	1.502	1.062
22	155	228	1.505	1.065
23	158	230	1.508	1.068
24	160	232	1.510	1.070
25	162	235	1.512	1.072
26	165	238	1.515	1.075
27	168	240	1.518	1.078
28	170	242	1.520	1.080
29	172	245	1.522	1.082
30	175	248	1.525	1.085

TABLE X. (Continued)

Physical properties of the compounds

Compound	Melting point, °C	Boiling point, °C	Refractive index, $n_D^{20}$	Density, $d_4^{20}$
31	178	250	1.528	1.088
32	180	252	1.530	1.090
33	182	255	1.532	1.092
34	185	258	1.535	1.095
35	188	260	1.538	1.098
36	190	262	1.540	1.100
37	192	265	1.542	1.102
38	195	268	1.545	1.105
39	198	270	1.548	1.108
40	200	272	1.550	1.110



COUNTY BOROUGH OF BOURNEMOUTH

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EDUCATION COMMITTEE

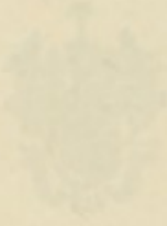
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# Annual Report

of the

## School Medical Officer

Year 1951



COUNTY BOROUGH OF ROUANENBURY



EDUCATION COMMITTEE

# Annual Report

of the

## School Medical Officer

Year 1951

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit to you my second Annual Report as Medical Officer to the Education Committee. This report is the 44th of the series dealing with medical inspection, treatment and the general health of children in attendance at your schools.

As in previous years medical inspections of school children were carried out in the prescribed age groups and are all well up-to-date. Dental inspections I regret to say are still in arrears and as mentioned by the Senior Dental Officer in his report the School Dental Service has been hampered by the general shortage of dental officers willing to work for local authorities. Whilst normally we should have four whole-time dental officers we have for the greater part of the year had two only assisted by one part-time officer. We had the galling experience of having our new and much needed dental clinic at East Howe ready and equipped but no Dental Surgeon to man it. It was only eight months later that we were fortunate in securing a whole-time dentist. There is no doubt the school dental work would have fallen far more into arrears had not the Education Committee most wisely authorised me to take on additional part-time help and I would express my gratitude to Mrs. Redfern and Mr. Donald the two temporary part-time Dental Surgeons who gave such valuable help.

The general health of the school child is on the whole good. Two cases only of anterior poliomyelitis occurred this year as against 11 in the previous year. Measles and whooping cough have been the most significant of the infectious diseases occurring during the year. Measles was distinctly prevalent accounting for 1015 cases as against 92 in 1950 showing its usual biennial tendency.

This year has been notable for the opening of the Child Guidance Centre an adjunct to the School Health Service which the Health and Education Committees most rightly pressed for and which will beyond doubt prove of great assistance to those children in need of the special facilities it provides. A report written by Dr. Whiles, Consultant Children's Psychiatrist on the work carried out at the Centre will be found on page A 16.

In concluding this introduction to my report I would express my sincere thanks to the Education Officer for his assistance and ready co-operation. I should like to thank the school teachers and school attendance officers for their valuable help in the school health service.



In conclusion, my thanks to my own staff, medical, dental, nursing and clerical for conscientious and willing work throughout the year.

I am,

Yours faithfully,

IVOR A. MacDOUGALL.

**SCHOOL HEALTH SERVICE STAFF.**

(As at 31st December, 1951)

*School Medical Officer:*

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

*Deputy School Medical Officer:*

K. O. A. VICKERY, M.D.(Lond.), B.S.(Lond.), 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.  
 FRANZ A. 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.

*Senior Dental Officer :*

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

*Assistant Dental Officers :*

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

N. J. WOOD, L.D.S.

M. B. REDFERN, L.D.S. (Part Time)

J. K. DONALD, L.D.S. (Part Time)

*Dental Attendants :*

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

*Consultant Children's Psychiatrist (Part-time) :*

\*W. H. WHILES, M.R.C.S., L.R.C.P., D.P.M.

*Educational Psychologist :*

B. WORTHINGTON FOXLEY, B.SC.(HONS.), P.G.A.D.P.

*Psychiatric Social Worker :*

M. R. BARNES

*Ophthalmic Surgeons (Part-time) :*

\*E. P. TULLOH, M.B., B.S., D.O.M.S.

E. R. BOWES, M.B., B.S., D.O.M.S.

*Orthoptist (Part-time) :*

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

\* Employed by South West Metropolitan Regional Hospital Board.

*Orthopaedic Surgeons (Part-time) :*

\*N. ROSS SMITH, CH.M., F.R.C.S.

\*N. VERE HODGE, M.B., B.CH., F.R.C.S.

*Physiotherapist (Part-time) :*

\*K. W. MACDONALD, M.C.S.P.

*Speech Therapist :*

V. ABELSON

*Superintendent Health Visitor and School Nurse :*

W. MELHUISE

*Health Visitors and School Nurses :*

L. M. AUSTIN	G. HAMMOND
C. V. BAILEY	G. M. LUNN
E. I. BARTLETT	C. M. MORGAN
W. R. BURROWS	E. M. SMITH
P. M. CAREY	E. TONKIN
M. G. CORNISH	E. TURNER
E. M. GIBBS	

*School Nurse :*

M. BEETSCHEN

*Clerk in charge of School Health Service Section :*

F. J. GOODE

*Clerks :*

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

**SCHOOLS AND SCHOLARS**

Number of Primary Schools ... ..	32
Number of Secondary Modern Schools ... ..	7
Number of Secondary Grammar Schools ... ..	2
Average attendance ... ..	13,166
Average number on School Registers ... ..	14,552

**CO-ORDINATION**

The School Health Service whilst it is under the control of the Local Education Authority remains very properly an integral part of the Public Health Department with medical, dental and nursing staff actively engaged and interested in the health of the community of the town irrespective of age. In this way, complete health supervision is possible from infancy to adult life.

\* Employed by South West Metropolitan Regional Hospital Board.

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 1,516		Children Aged 10 1,156		Children Aged 14 1,141		Secondary Gram. Pupils 1,118	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin ... ..	17	16	2	4	10	2	20	10
Eyes :—								
Defective Vision ... ..	3	4	82	7	161	17	204	12
Squint ... ..	17	—	7	—	15	—	—	—
Other ... ..	12	12	9	2	4	—	9	4
Ears :—								
Defective hearing ... ..	2	5	—	—	—	—	—	—
Otitis Media ... ..	3	1	1	—	1	—	—	—
Other ... ..	4	1	1	—	—	—	—	—
Nose and Throat ... ..	60	147	9	128	7	97	3	31
Speech ... ..	8	15	1	—	2	—	—	—
Cervical glands ... ..	—	33	1	3	—	4	—	—
Heart and Circulation ... ..	3	10	3	3	11	5	1	8
Lungs ... ..	6	2	3	2	4	—	3	—
Developmental :—								
Hernia ... ..	1	2	1	—	2	—	1	1
Other ... ..	—	1	2	—	—	—	1	9
Orthopaedic :—								
Posture ... ..	15	2	7	12	7	31	22	30
Flat foot ... ..	53	8	10	3	9	8	12	33
Other ... ..	37	12	10	15	23	17	47	14
Nervous System :—								
Epilepsy ... ..	—	—	—	—	—	—	1	—
Other ... ..	—	—	—	—	—	—	—	—
Psychological :—								
Development ... ..	9	3	1	—	1	—	—	—
Stability ... ..	—	—	—	3	3	—	—	—
Other ... ..	—	—	—	—	—	—	—	—
	250	274	150	182	260	181	324	152

## MEDICAL INSPECTION

No change has taken place in routine medical inspections during the year, and children have been inspected in the groups prescribed in the Education Act, 1944 :—

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

Periodic examinations at various ages were also carried out in the Boys' and Girls' Secondary Grammar Schools. There were also re-examinations and special examinations for scholars at all ages who were found to have defects which required to be kept under observation.

## FINDINGS OF MEDICAL INSPECTION

### (a) *Uncleanliness.*

Periodic inspections by the School Nurses reveal that the standard of cleanliness amongst Bournemouth scholars is high, and has been steadily improving year by year, as will be seen from the following table :—

### Infestation with Vermin

#### Examinations in Schools

<i>Year</i>	<i>Average No. on School Registers</i>	<i>No. of Examinations</i>	<i>No. of individual pupils found infested</i>
1951	14,552	36,951	184
1950	14,183	35,093	235
1949	13,750	34,139	264
1948	12,017	34,075	296
1947	11,126	34,340	434
1946	10,916	32,170	539
1945	10,153	31,667	521
1944	10,945	34,219	503
1943	10,586	29,157	511
1942	11,192	32,616	651
1941	11,785	31,127	607
1940	11,060	31,003	593
1939	13,249	36,835	755
1938	10,143	32,601	581
1937	10,124	28,766	645
1936	9,987	27,616	483

} Includes Evacuees

### (b) *General Condition.*

The classification of the general condition of school children as Good, Fair and Poor has again been applied. Whilst it is on the

whole a useful index of the general health and nutritional state of children there is no doubt that individual assessments vary quite a lot and therefore too much notice should not be paid to minor variations in findings. A comparison of percentages in each category for the years 1949, 1950 and 1951 is given below :—

Age Groups	A. (Good)			B. (Fair)			C. (Poor)		
	1949	1950	1951	1949	1950	1951	1949	1950	1951
	...	...	...	...	...	...	...	...	...
Entrants ... ..	30.18	28.75	30.41	66.96	69.28	67.15	2.86	1.97	2.44
Second Age Group ...	21.01	23.62	23.36	75.22	73.30	75.0	3.77	3.07	1.64
Third Age Group ...	52.31	27.63	25.24	46.65	71.20	73.18	1.04	1.17	1.58
Other Periodic Inspections	47.54	44.71	40.08	50.92	54.30	59.03	1.54	0.99	0.89

(c) *Minor Ailments.*

This year again no case of ringworm of the scalp has been found, and only 4 cases of ringworm of the body. Impetigo, a skin disease once so common amongst scholars, is now a comparative rarity and only 12 cases were found during the year.

(d) *Vision.*

The ascertainment of visual defects amongst school children is to my mind a most important duty of the school medical and nursing staff. Whilst it may be that since the National Health Service Act came into operation children are more frequently taken to be seen by the general practitioner, his examination would not be likely to include testing the child's vision unless of course there was some indication of impairment. The routine testing by the School Health Service no doubt brings to light many cases of impairment which would otherwise pass undetected until later life.

Normally the vision of school children is not tested until during the last term at a Primary school, i.e. at about 10 years of age. I have therefore decided to introduce a routine vision test at the age of 7.

All those with suspected defects are seen by the consultant ophthalmologists who hold special sessions for school children at our school clinics.

(e) *Defects of the Nose and Throat.*

The number of children referred for removal of tonsils and adenoids remains high and the waiting list for admission to hospital for operation is enormous—approximately 1,200. So long as it is possible, as at present, to get quick admission of the really urgent

cases I do not place any particular importance on this long waiting list as there is no doubt that many children initially recommended for operation are after a year or so found no longer to require surgical intervention.

In 1951 278 scholars were operated upon as compared with 320 in the previous year.

(f) *Lung Disorders.*

Serious lung disorders in children are not numerous. Asthma and bronchitis are again conditions causing absence or irregular attendance at school during the year.

Pulmonary tuberculosis is not a common condition in school life but it is essential never to lose sight of the risk to a child through contact with an adult who has active disease.

It may be recalled that in my report last year I did advocate the tuberculin testing of school entrants as part of the routine school examination and towards the end of 1951 the Education Committee kindly granted me permission to carry out a pilot survey on some 2,000 school entrants. I gratefully acknowledge the help given to me by Dr. Tattersall, Senior Chest Physician, in carrying out this investigation. The findings of this pilot survey are both interesting and significant and are given below.

#### Children Tuberculin Tested

Eligible children	...	...	2123
Examination refused	...	...	70 (3%)
Absent at time of examination	...	...	188 (8%)
Number tested	...	...	1865
Positive reactors	...	...	42 (2.25%)

#### Number and Per Cent of Positive Results of Tuberculin Tests in Age Groups

Age Group	Boys			Girls			Total		
	Number Tested	Positive		Number Tested	Positive		Number Tested	Positive	
3-4 Years	48	0		51	0		99	0	
4-5 Years	331	10 (3.0%)		258	4 (1.5%)		589	14 (2.4%)	
5-6 Years	606	16 (2.6%)		571	12 (2.1%)		1177	28 (2.4%)	
Total	985	26 (2.65%)		880	16 (1.8%)		1865	42 (2.25%)	

From the examination of the contacts of the positive reactors 7 new unknown and previously undetected adult cases of Pulmonary tuberculosis were discovered. This high discovery of new adult cases suggested a further testing of a second batch of 2,000 entrants and with the permission and keen support I have received from the Education Committee this will be started in the January term 1952 and the results given in my report for that year.

(g) *Treatment of Children in Hospital.*

The following information is given from hospital discharge reports received during the year :—

<i>Group of Diseases</i>						<i>No. of Children</i>
1.	Infections or Parasitic Diseases	...	...	...	...	46
2.	Neoplasms (a) Benign	...	...	...	...	6
	(b) Malignant	...	...	...	...	3
3.	Allergic, Endocrine, Metabolic and Nutritional	...	...	...	...	3
4.	Diseases of blood and blood forming organs	...	...	...	...	4
5.	Mental, Psychoneurotic	...	...	...	...	3
6.	Diseases of Nervous System and Special Senses	...	...	...	...	*84
7.	Diseases of Circulatory System and Lymphatics	...	...	...	...	4
8.	Diseases of Respiratory System	...	...	...	...	†320
9.	Diseases of Digestive System	...	...	...	...	73
10.	Genito-Urinary System	...	...	...	...	13
11.	Skin and Cellular Tissues	...	...	...	...	5
12.	Bones, etc. (non-congenital)	...	...	...	...	37
13.	Congenital Malformations	...	...	...	...	9
14.	Accidents, Poisoning and Violence	...	...	...	...	35

\* Includes 25 operations for "squint".

† Includes 278 cases for tonsillectomy.



LIST OF CLINICS HELD FOR SCHOOL CHILDREN

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>Minor Ailments Clinics.</b>					
Malmesbury Park : 70, Stewart Road	AFTERNOON	—	AFTERNOON	—	MORNING
Winton : Somerley Road ... ..	AFTERNOON	—	MORNING	AFTERNOON	—
Pokesdown : 896, Christchurch Road	AFTERNOON	—	MORNING	—	AFTERNOON
East Howe : Moorlea, Caroline Road ...	MORNING	—	AFTERNOON	—	MORNING
Charminster : East Way ... ..	AFTERNOON	—	AFTERNOON	MORNING	—
Southbourne : Gospel Hall, Cranleigh Rd.	AFTERNOON	—	MORNING	—	AFTERNOON
Kinson : Pelhams, Millhams Road ...	—	—	—	MORNING	—
<b>Dental Clinics.</b>					
Central : 10, Madeira Road ... ..	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON
Pokesdown : 896, Christchurch Road	Do.	Do.	Do.	Do.	Do.
Winton : 19, Cranmer Road ... ..	Do.	Do.	Do.	Do.	Do.
East Howe : Moorlea, Caroline Road ...	Do.	Do.	Do.	Do.	Do.
<b>Eye Clinics.</b>					
Central : 10, Madeira Road ... ..	MORNING AND AFTERNOON	—	MORNING	—	—
Pokesdown : 896, Christchurch Road	—	—	—	MORNING	—
<b>Child Guidance Centre.</b>					
896, Christchurch Road, Pokesdown ...	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON

## ATTENDANCES AT MINOR AILMENTS CLINICS

During the year a total of 7,651 attendances were made by children at the various Minor Ailments Clinics, as follows :—

	<i>Primary</i>	<i>Secondary</i>	<i>Totals</i>
Charminster ...	1419	42	1461
East Howe ...	1675	525	2200
Malmesbury Park	739	285	1024
Pokesdown ...	520	84	604
Southbourne ...	505	399	904
Winton ...	850	17	867
Pelhams ...	591	—	591
			7,651

## VISUAL DEFECTS

Two Ophthalmic Surgeons have undertaken refractions at the Avebury and Pokesdown Clinics; the arrangement has worked very well, children have been promptly dealt with and there has been little waiting time for glasses for those found to be in need.

Number of children examined	...	...	...	...	1497
Number of attendances	...	...	...	...	1772

Number of children for whom glasses were prescribed :—

New cases	...	...	...	...	260
Old cases	...	...	...	...	468

### Orthoptic Clinic

210 Patients have received treatment, of these 68 were new cases referred by the Ophthalmic Surgeons.

79 children attended twice a week making a total of 1612 Treatments.

517 periodical tests were given to Patients who report at intervals of one to three months for check up.

25 children have received operative treatment.

18 children are awaiting operative treatment.

9 children were found to be unsuitable for orthoptic treatment.

42 children have been discharged (21 of these are cosmetically straight and 21 have single binocular vision).

10 children have left the district.

6 children have gone to private schools.

8 children have left school.

4 children have failed to attend.

## ORTHOPAEDICS

The Specialist Orthopaedic Service for school children has continued during the year to be carried out by surgeons at the Orthopaedic Out-patient department of the Royal Victoria Hospital, Shelley Road, Boscombe. It will be recalled that in my report last year I expressed some misgivings with this arrangement as it seemed to me that in view of the crowded and difficult circumstances under which the surgeons work in the Out-patient Department at the hospital there would be delay in seeing cases and a consequent lengthening waiting list. This has in fact occurred and it is urged that some re-arrangement is necessary to meet this most important children's service.

Increased attention is to be paid to the important question of posture in the growing child. There is no doubt that a considerable number of children suffer from mild postural defects which, if not treated in their early stages, may become deformities and give rise to chronic pain and inconvenience in later life.

A careful and detailed scheme of posture work which can fit in to the normal programme of Physical Education in the schools was planned with keen and invaluable assistance by Miss Nora Reed, Chief Woman Organiser of Physical Education.

The first step in inaugurating the Scheme was taken by the Education Officer who arranged for two One-day Conferences to which all Primary school teaching staff were invited. The Conferences were designed to give a clear explanation of the Scheme, its objects and importance, and were exceedingly well attended and much interest aroused.

There is no doubt that many children will derive considerable benefit from this most practical Scheme.

### Details of attendances for the past year are as follows:—

Number of scholars seen by the surgeons	...	171	(262)
Number of new cases	... ..	100	(89)
Number of cases discharged	... ..	8	(58)

(Figures in brackets refer to 1950).

### Defects found.

Genu Valgum	... ..	20	
Spastic conditions	... ..	10	
Due to Anterior Poliomyelitis	... ..	16	
Spinal Curvature	... ..	13	
Osteomyelitis	... ..	3	
Congenital dislocation of the hip	... ..	4	
Deformities of the foot	... ..	65	
Other conditions	... ..	40	

A part-time physiotherapist attends the surgeons' sessions and beyond this, holds classes for remedial exercises. She also gives electrical and ultra violet light treatment.

**The following figures apply to physiotherapy only :—**

Number of new cases attending	...	...	...	...	186
Total number of treatments given	...	...	...	...	2986

20 children were received as in-patients at the Lord Mayor Treloar Orthopaedic Hospital and 21 at the Royal Victoria Hospital, Boscombe.

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### ULTRA VIOLET RAY CLINIC

This clinic has again been available throughout the year for children considered in need of such treatment. There is no doubt that in certain conditions of general debility particularly following some severe illness a course of Ultra Violet Light can act as a most useful tonic.

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### SPEECH THERAPY

As during last year, there is one whole-time Speech Therapist who visits various schools where Speech Classes are held. Children with defects are first examined by one of the Assistant School Medical Officers and are periodically seen by him to decide how soon treatment may be discontinued.

As mentioned in my report last year I feel that too much of the speech therapist's available teaching time is taken up by travelling between classes and that this can only be overcome by establishing fewer classes which would in turn limit the number of children who could be given treatment. A second speech therapist engaged on a part-time basis would considerably enhance the service which can be given.

118 scholars were treated by the speech therapist during the year.

## CHILD GUIDANCE

### Report by Consultant Children's Psychiatrist.

With my appointment by the South West Metropolitan Regional Hospital Board as Consultant Psychiatrist the Child Guidance Service commenced in April, 1951. During the year additional staff have been added. The Educational Psychologist was appointed and took up duty in July, and the Psychiatric Social Worker was appointed, commencing in September. The full team necessary for comprehensive Child Guidance work has, therefore, been established, and a complete diagnostic and treatment service is now available for all children up to school leaving age. So far the Centre has been working in temporary premises, but it is anticipated that more adequate accommodation will be ready during the coming year.

During the nine months up to December 31st, 1951, 93 new cases were seen for diagnosis and full investigation; 22 other children had been referred, but were still awaiting investigation at the end of the year.

Reports from Head Teachers are obtained on all children. At the first interview, the parent is seen by the Psychiatric Social Worker, while the child is tested and examined by the Educational Psychologist. At the subsequent interview both child and parent are seen by me and a treatment plan is formulated following a case conference. In some instances advice to whoever referred the child is all that is required, in other instances regular treatment by myself or the Psychologist, involving regular attendance at the Centre once or twice a week, is necessary. At the same time the parent is seen for guidance by the Psychiatric Social Worker. A number of other children and parents do not need this intensive help, but need to be seen less frequently for a more superficial treatment approach.

At the end of the year 20 children were being seen regularly for psychiatric or psychological treatment, and a further 26 children and parents were being seen periodically for the simpler forms of treatment and guidance.

The School Medical Officer and General Practitioners have been the main source of referral, but as the Child Guidance Centre is becoming better known and its contacts with the community are becoming developed, an increasing number of children are being referred from other social agencies. This is an important development when it is remembered that Child Guidance is not only a means of ascertaining and treating those children who have become emotionally disturbed, but also has an important prophylactic function in the mental health of the community. This is particularly important in developing work with children in the pre-school

or infant school range. It is in these groups that emotional disturbance and difficulties in relationship between child and parents first becomes noticeable and where the simpler treatment approaches are most effective and lasting.

Amongst the first cases referred to the Centre it was noticeable that there were a large number who had been awaiting Child Guidance help for a considerable time and so the ultimate therapeutic possibilities had become correspondingly limited. This means that a relatively high number of children have needed to be recommended for a residential approach to treatment as their condition had become so chronic that ordinary out-patient treatment while in their own home was no longer possible.

The Child Guidance Centre staff are, therefore, endeavouring to develop all possible links with the other social services so that it can become, through the various members of the team, an advisory service on all mental health aspects of child development, as well as offering a treatment service for children already showing definite emotional disturbance.

The welcome which has been given to the establishment of the Child Guidance Centre by various sections of the community, doctors, health visitors, teachers, social workers and the parents themselves has been most encouraging to the staff.

#### ANNUAL RETURNS FOR YEAR ENDING 31st DECEMBER, 1951

Total New Cases Seen	...	...	...	...	93 (Boys 57 : Girls 36)
Awaiting Investigation, 31st December, 1951	...	...	...	...	22

<i>Source of Referrals.</i>	<i>No. of Cases</i>
The School Medical Officer	51
Hospitals and General Practitioners	24
The Children's Officer	7
Head Teachers (direct referrals)	5
Probation Officer and Juvenile Court	1
Other Sources	5
	—
	93
	—

<i>Reasons for Referral.</i>	<i>No. of Cases</i>
Behaviour problems	43
Backwardness	20
Nervous Symptoms	16
Psychosomatic symptoms	13
Others (advice only)	1
	—
	93
	—

*Age Groups.*

Pre-school age	...	...	...	...	...	...	...	6
Infants School age	...	...	...	...	...	...	...	23
Junior School age	...	...	...	...	...	...	...	39
Secondary Modern Schools	21	}	...	...	...	...	...	25
Grammar Schools	4		...	...	...	...	...	—
								93
								—

*Summary of Recommendations.*

Periodic survey and superficial treatment	...	...	...	...	...	...	...	26
Advice only	...	...	...	...	...	...	...	17
Residential placement advised	...	...	...	...	...	...	...	8
Long term treatment by Psychiatrist	...	...	...	...	...	...	...	12
Treatment by Psychologist	...	...	...	...	...	...	...	17
Still under investigation	...	...	...	...	...	...	...	13
								—
								93
								—

*Treatment on 31st December, 1951.*

Regular intensive treatment by Psychiatrist	...	...	...	...	...	...	...	8
Regular intensive treatment by Psychologist	...	...	...	...	...	...	...	12
Regular work with parents by Psychiatric Social Worker	...	...	...	...	...	...	...	12
Treatment waiting list for Psychiatrist	...	...	...	...	...	...	...	4
Treatment waiting list for Psychologist	...	...	...	...	...	...	...	5
Superficial treatment by Psychiatrist	...	...	...	...	...	...	...	26
Superficial work by Psychiatric Social Worker	...	...	...	...	...	...	...	34

*Interviews.**Psychiatrist (since April 2nd, 1951).*

Diagnostic	...	...	...	...	...	...	...	60
Parents and others	...	...	...	...	...	...	...	79
Treatment	...	...	...	...	...	...	...	82
Survey	...	...	...	...	...	...	...	27
Total	...	...	...	...	...	...	...	— 248

*Psychologist (since July 2nd, 1951).*

Diagnostic and Testing	...	...	...	...	...	...	...	79
Parents and others	...	...	...	...	...	...	...	77
Remedial Treatment	...	...	...	...	...	...	...	135
Survey	...	...	...	...	...	...	...	50
School visits	...	...	...	...	...	...	...	23
Total	...	...	...	...	...	...	...	— 364

*Psychiatric Social Worker (since September 17th, 1951).*

New Cases	...	...	...	...	...	...	...	29
Therapeutic Interviews	...	...	...	...	...	...	...	178
Others...	...	...	...	...	...	...	...	50
Home Visits	...	...	...	...	...	...	...	40
Total	...	...	...	...	...	...	...	— 297

W. H. WHILES,

*Consultant Children's Psychiatrist.*

## IMMUNISATION AGAINST DIPHTHERIA

As in previous years facilities are available at all clinics for the immunisation of school children and no opportunity is lost by the Assistant School Medical Officers and school nurses to persuade parents of the importance of this prophylactic measure.

There is no doubt that there is a tendency amongst parents to become complacent in this matter as diphtheria no longer holds for them its previous horrors and it is whooping cough which now occupies first place in the mind of the parent as the most frightsome of the common infectious diseases. This complacency regarding immunisation should it become widespread could obviously bring about the re-introduction of diphtheria as a major killing disease amongst children and for this reason most energetic steps should be taken by doctors and school nurses to ensure a high percentage of protected children.

1462 scholars who received initial injections in infancy received a re-inforcing dose during the year.

83 others not previously treated received their first course of two injections.

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## NOTIFICATIONS OF INFECTIOUS DISEASES

The following relate to school children :—

<i>Disease</i>	<i>No. of cases</i>
Scarlet Fever ... ..	41
Measles ... ..	1015
Diphtheria ... ..	2
Whooping Cough ... ..	159
Pneumonia ... ..	10
Poliomyelitis—paralytic... ..	2
Scabies ... ..	13
Dysentery ... ..	32
Food Poisoning ... ..	2
Acute Enecephalitis—infective ... ..	1
	<hr/>
	1,277
	<hr/>

There were also 2 notifications of respiratory Tuberculosis and 4 of other forms of this disease.

### Diphtheria

It is disappointing to have to record two cases of diphtheria during the year, but at least they serve to emphasise again the importance of immunisation as a protection against this disease, for in neither case is there proof that effective immunisation had been carried out.



## FOLLOWING UP

Most valuable work is done by the school nurses in the general follow-up of children found to have defects or who have recently been ill. By home visits the nurse is able to give helpful advice to the parent and can satisfy herself that treatment has been sought from the general practitioner and his advice carried out. In this connection I often feel it is a great pity the general practitioner does not make fuller use of the services of the school nurse who could assuredly by home visits and parental advice relieve him of considerable anxiety as to the care of the sick child and no doubt thereby save his valuable time for other pressing duties. This form of assistance of the Health Visitor/School Nurse is undoubtedly envisaged in the wording of Section 24 of the National Health Service Act.

Under the above heading, mention must be made of the valuable assistance given to the School Health Service by the N.S.P.C.C. Ready and willing help is always forthcoming from the local inspector, Mr. B. A. Ayling, in those cases which it is considered require his attention.

The School Nurses recorded the following reasons for home visits :—

	<i>No.</i>
Eye Defects ... ..	108
Ear, Nose and Throat conditions	217
Skin complaints ... ..	33
Uncleanliness ... ..	67
Patch Testing ... ..	109
Miscellaneous ... ..	440
	974

### Exclusion from School

Scholars were excluded from school during 1951 for the following reasons :—

Bronchitis ... ..	1
Chicken Pox ... ..	1
Scabies ... ..	7
Other skin diseases ... ..	5
Tonsillitis ... ..	1
Uncleanliness ... ..	45
Mumps ... ..	2
Squint (post operative) ... ..	23
Miscellaneous ... ..	19
	104
Total ... ..	104

### Open-air Education

During the year 12 boys and 3 girls have been sent to residential open-air schools. The benefit derived by a debilitated child after a period at such a school is often most striking and the value of open-air education with good and regular meals is beyond doubt.

### Holiday Camps

In July 40 girls and 60 boys were accommodated at the two camps used in previous years. The Guide's Camp at Dudsbury for the Girls, and the camp at Swanage for the Boys. The children are always medically examined before leaving for camp. There is no doubt that they derive much benefit from this health-giving form of holiday, and it would be an advantage if a larger number of children could be sent to these camps each year.

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### STAFF EXAMINATIONS

60 school teachers were examined by the medical staff, as a condition of appointment.

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### EMPLOYMENT OF SCHOOL CHILDREN

A total of 479 children aged 13 or more who wished to be employed outside school hours were medically examined by the Assistant School Medical Officers. All were found fit for the purpose. The occupations proposed were :—

Errand boys	...	...	...	56
News boys	...	...	...	354
News girls	...	...	...	59
Other	...	...	...	10

11 other children were granted medical certificates as being fit to take part in public entertainments.

## SCHOOL MEALS SERVICE

There is no doubt of the great value to the nutritional state and the general health of the scholars of the School Meals Service.

The standard of meals supplied and the care and proficiency with which they are prepared reflect great credit on the school meals organisers and staff under their direction.

The standard of hygiene maintained in school canteens and canteen workers continues to be high and the meals organisers are obviously ever conscious of the dangers inherent in mass produced meals.

28 Centres are utilised for the provision of meals, and the number of pupils partaking of meals and milk is illustrated by sample days on which statistics were collected.

<i>Day in :</i>	<i>Attendance</i>	<i>Meals Provided</i>	<i>Milk Supplied</i> <i>(bottles <math>\frac{1}{2}</math> pts.)</i>
February	11,803	6,094 (of which 537 were free)	9,906 (includes 292 at home)
May	13,163	6,593 (648 free)	11,079 (65 at home)
October	13,766	6,838 (573 free)	11,563 (47 at home)

## COD LIVER OIL AND MALT

During the year 666 school children were recommended by the Assistant School Medical Officers to have Cod Liver Oil and Malt. This was supplied free of cost.

## HANDICAPPED PUPILS

Category	Ascertainment		Special Schools*					
	New Cases Ascertained During 1951	Number on Register, 31.12.51	Number Recommended During the Year for Admission	Number Admitted During the Year	Number Discharged During the Year	Number Attending at any Time During the Year	Number Attending on 1.12.51	Number Awaiting Placement on 31.12.51
Blind ... ..	—	6	—	—	—	3	3	1
Partially Sighted ... ..	—	1	—	1	1	1	—	1
Deaf ... ..	—	9	1	4	—	9	9	—
Partially Deaf ... ..	2	8	—	2	—	4	4	—
Delicate ... ..	13	28	8	11	9	15	6	3
Physically Handicapped ... ..	8	26	3	1	1	7	6	5
Educationally Sub-normal ... ..	32	152	30	16	11	44	33	32
Maladjusted ... ..	15	26	6	4	4	11	8	6
Epileptic ... ..	3	13	1	—	2	4	4	1
Diabetic ... ..	—	1	—	—	—	1	1	—
Speech Defective ... ..	44	65	—	—	—	—	—	—
Total ... ..	117	335	49	39	28	99	74	49

\* Includes boarding houses or hostels : excludes Hospital Schools.

# Annual Report of the Senior Dental Officer

## General Observations

During the year 1951 the Bournemouth School Dental Service was affected adversely by the general shortage of school dental officers throughout the country.

Although the establishment was four, for the greater part of the year we had only two full-time dental officers assisted by a part-time one.

As a result of the staff shortage the inspections at schools in the central and the East Howe areas were unfortunately delayed; many of the children attending the schools which were not inspected came to the clinics for treatment as special cases.

## Central Clinic—Comments.

Mrs. E. Johnson left on the 7th February to take up an appointment with the Surrey County Council. There were no suitable applicants to fill the vacancy created, but fortunately Mrs. Redfern increased the number of sessions she worked there and gave approximately half-time service.

The part-time work carried out at this clinic was augmented by the help of Mr. J. K. Donald, who operated for four sessions each week from the time he was appointed on 19th November.

The interval between school inspections was about two and a half years.

## East Howe Clinic—Comments.

The building of the new dental clinic was completed on the 16th March but unfortunately we were unable to obtain the services of a dentist to work there until nearly the end of the year, when the full-time dental officer appointed was Mr. N. J. Wood who commenced his duties on 10th December.

Before that date I had completed fifty sessions of work at that clinic during which time I inspected and treated as many as possible of the girls and boys attending the East Howe Secondary School. The older children were selected in order that as many as possible of these should leave school dentally fit.

The period between school inspections at the East Howe schools was about two and a half years.

### **Winton Clinic—Comments.**

Mrs. Webb continued to provide dental care for the children in her area in her usual kindly and efficient manner. The schools in her area were inspected at intervals of about eighteen months.

I have always considered that Mrs. Webb had too many children under her care and I was pleased to be able to transfer the responsibility for treatment of some of her schools to the dental officer at the East Howe Clinic. This also gave the great advantage that the children in the northern end of her district were in closer proximity to the East Howe Clinic, so saving time in attendance for treatment.

### **Pokesdown Clinic—Comments.**

During the greater part of the year I spent my time working at the Pokesdown Clinic. Inspections at the schools in this area were carried out at the same intervals of time as during the previous year, i.e. once in fourteen months.

In an endeavour to reduce the arrears of work at the Central and East Howe Clinics I gave up some of my time and worked for thirty-one sessions at the Central Clinic and fifty sessions at East Howe.

### **Orthodontic Treatment.**

One hundred and fifty-one children were referred by the school dental officers to Mr. J. D. Hooper, Orthodontic Consultant at Boscombe Hospital for treatment.

One hundred and eighty-seven children received orthodontic treatment at the school dental clinics.

During the year all children in Bournemouth who needed orthodontic treatment were able to obtain it and we were fortunate in being able to send many cases to Mr. Hooper so that the school dental officers were able to devote additional time to more essential work such as fillings and extractions.

Orthodontic treatment appears to be increasing in popularity, but so long as any arrears exist in the routine treatment of children the amount of orthodontic work undertaken by school dental officers should be strictly limited.

Approximately one quarter of the orthodontic specialist's time during the year was spent treating children referred to him from the school clinics.

**Dental Attendants.**

Mrs. M. Beetschen, School Nurse, acted as dental attendant at the East Howe Clinic during the later part of the year. Miss J. Blant was appointed as an additional dental attendant and she commenced duty early in the present year.

Each dental officer had a dental attendant and the efficient work done by these helpers proved of great value.

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

I should like to thank dental surgeons on the staff of the Royal Victoria Hospital, Boscombe for the help they have given during the year, and I am also grateful to the Radiologists for providing X-rays and reports.

**Co-operation of Teachers.**

Head Masters, Head Mistresses and teachers were most helpful and I am very grateful for their co-operation.

A. A. WOOD,  
*Senior Dental Officer.*

# Medical Inspection Returns

Year Ended 31st December, 1951

**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 ... ..	1516
Second Age Group ... ..	1156
Third Age Group ... ..	1141
Total ... ..	3813

Number of other Periodic Inspections ... ..	1118
Grand Total ... ..	4931

### B.—OTHER INSPECTIONS.

Number of Special Inspections ... ..	5378
Number of Re-Inspections ... ..	1257
Total ... ..	6635

### 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 ... ..	3	247	248
Second Age Group ... ..	82	68	147
Third Age Group ... ..	161	102	240
Total (prescribed groups) ... ..	246	417	635
Other Periodic Inspections ... ..	204	102	292
Grand Total ... ..	450	519	927



**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 ... ..	49	32	—	—
5	Eyes— (a) Vision ...	450	40	—	—
	(b) Squint ...	39	—	1	—
	(c) Other ...	34	18	1	—
6	Ears—(a) Hearing ...	2	5	1	1
	(b) Otitis Media ...	5	1	—	—
	(c) Other ...	5	1	—	—
7	Nose or Throat ...	79	403	2	8
8	Speech ... ..	11	15	—	—
9	Cervical Glands ...	1	40	—	—
10	Heart and Circulation	18	26	—	—
11	Lungs ... ..	16	4	—	—
12	Developmental :—				
	(a) Hernia ...	5	3	—	—
	(b) Other... ...	3	10	—	—
13	Orthopaedic :—				
	(a) Posture ...	51	75	1	—
	(b) Flat foot ...	84	52	2	3
	(c) Other... ...	117	58	—	—
14	Nervous System :—				
	(a) Epilepsy ...	1	—	1	—
	(b) Other... ...	—	—	—	—
15	Psychological :—				
	(a) Development ...	11	3	—	—
	(b) Stability ...	3	3	—	—
16	Other ... ..	—	—	—	—

**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 ...	1516	461	30.41	1018	67.15	37	2.44
Second Age Group ...	1156	270	23.36	867	75.0	19	1.64
Third Age Group ...	1141	288	25.24	835	73.18	18	1.58
Other Periodic Inspections...	1118	448	40.08	660	59.03	10	0.89
Total ...	4931	1467	29.75	3380	68.55	84	1.70

**TABLE III.**

**INFESTATION WITH VERMIN**

- (i) Total number of examinations in the schools by the school nurses or other authorised persons ... 36,951
- (ii) Total number of individual pupils examined ... 12,450
- (iii) Total number of individual pupils found to be infested ... 184
- (iv) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) ... NIL
- (v) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ... NIL

**TABLE IV.**

**TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)**

**Group I.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III).**

	Number of cases treated or under treatment during the year	
	by the Authority	otherwise
Ringworm—(i) Scalp ...	—	—
(ii) Body ...	4	—
Scabies ...	9	—
Impetigo ...	12	—
Other skin diseases ...	895	3
Total ...	920	3

**Group 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT**

	Number of cases dealt with	
	by the Authority	otherwise
External and other, excluding errors of refraction and squint ... ..	186	1
Errors of Refraction (including squint)	1497*	37
<b>Total</b> ... ..	<b>1683</b>	<b>38</b>
Number of pupils for whom spectacles were—		
(a) Prescribed ... ..	728*	—
(b) Obtained ... ..	728*	—

**Group 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT**

	Number of cases treated	
	by the Authority	otherwise
Received operative treatment—		
(a) for diseases of the ear ... ..	—	9
(b) for adenoids and chronic tonsillitis... ..	—	278
(c) for other nose and throat conditions ... ..	—	—
Received other forms of treatment ...	96	32
<b>Total</b> ... ..	<b>96</b>	<b>319</b>

**Group 4.—ORTHOPAEDIC AND POSTURAL DEFECTS**

	By the Authority	Otherwise
(a) Number treated as in-patients in hospitals ... ..	41	
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments...	—	171

**Group 5.—CHILD GUIDANCE TREATMENT**

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinics ... ..	87	—

**Group 6.—SPEECH THERAPY**

	Number of cases treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapists ... ..	118	—

\* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

## Group 7.—OTHER TREATMENT GIVEN

		Number of cases treated	
		By the Authority	Otherwise
(a)	Miscellaneous minor ailments ...	695	—
(b)	Other ... ..	Nil	281

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

(1)	Number of pupils inspected by the Authority's Dental Officers :—				
(a)	Periodic age groups	...	...	...	7475
(b)	Specials	...	...	...	1916
(c)	TOTAL (Periodic and Specials)				9391
(2)	Number found to require treatment				6333
(3)	Number referred for treatment				6241
(4)	Number actually treated				3810
(5)	Attendances made by pupils for treatment				9108
(6)	Half days devoted to	(a) Inspection	...	...	62
		(b) Treatment	...	...	1132
		Total (a) and (b)		...	1194
(7)	Fillings	Permanent teeth	...	...	4260
		Temporary teeth	...	...	2203
		Total		...	6463
(8)	Number of teeth filled—Permanent Teeth		...	...	3855
	Temporary Teeth		...	...	2029
		Total		...	5884
(9)	Extractions	Permanent teeth	(a) Caries ...	...	384
			(b) To relieve over-crowding	...	218
		Temporary teeth	...	...	4345
		Total		...	4947
(10)	Administration of general anaesthetics for extraction				1880
(11)	Other operations	(a) Permanent teeth	...	...	1443
		(b) Temporary teeth	...	...	598
		Total (a) and (b)		...	2041
(12)	Dentures and space retainers fitted				42
<b>Orthodontics.</b>					
	Cases treated during the year				187
	Attendances				1546
	Appliances provided				110
	Cases completed during year				36

TABLE VI - OTHER TREATMENT DATA

Number of cases treated  
 In the institution  
 Outside the institution

TABLE VII

DENTAL INSPECTION AND TREATMENT

Year	Number of patients		Number of teeth	
	(a)	(b)	(c)	(d)
1937	1,000	1,000	1,000	1,000
1938	1,000	1,000	1,000	1,000
1939	1,000	1,000	1,000	1,000
1940	1,000	1,000	1,000	1,000
1941	1,000	1,000	1,000	1,000
1942	1,000	1,000	1,000	1,000
1943	1,000	1,000	1,000	1,000
1944	1,000	1,000	1,000	1,000
1945	1,000	1,000	1,000	1,000
1946	1,000	1,000	1,000	1,000
1947	1,000	1,000	1,000	1,000
1948	1,000	1,000	1,000	1,000
1949	1,000	1,000	1,000	1,000
1950	1,000	1,000	1,000	1,000
1951	1,000	1,000	1,000	1,000
1952	1,000	1,000	1,000	1,000
1953	1,000	1,000	1,000	1,000
1954	1,000	1,000	1,000	1,000
1955	1,000	1,000	1,000	1,000
1956	1,000	1,000	1,000	1,000
1957	1,000	1,000	1,000	1,000
1958	1,000	1,000	1,000	1,000
1959	1,000	1,000	1,000	1,000
1960	1,000	1,000	1,000	1,000
1961	1,000	1,000	1,000	1,000
1962	1,000	1,000	1,000	1,000
1963	1,000	1,000	1,000	1,000
1964	1,000	1,000	1,000	1,000
1965	1,000	1,000	1,000	1,000
1966	1,000	1,000	1,000	1,000
1967	1,000	1,000	1,000	1,000
1968	1,000	1,000	1,000	1,000
1969	1,000	1,000	1,000	1,000
1970	1,000	1,000	1,000	1,000
1971	1,000	1,000	1,000	1,000
1972	1,000	1,000	1,000	1,000
1973	1,000	1,000	1,000	1,000
1974	1,000	1,000	1,000	1,000
1975	1,000	1,000	1,000	1,000
1976	1,000	1,000	1,000	1,000
1977	1,000	1,000	1,000	1,000
1978	1,000	1,000	1,000	1,000
1979	1,000	1,000	1,000	1,000
1980	1,000	1,000	1,000	1,000
1981	1,000	1,000	1,000	1,000
1982	1,000	1,000	1,000	1,000
1983	1,000	1,000	1,000	1,000
1984	1,000	1,000	1,000	1,000
1985	1,000	1,000	1,000	1,000
1986	1,000	1,000	1,000	1,000
1987	1,000	1,000	1,000	1,000
1988	1,000	1,000	1,000	1,000
1989	1,000	1,000	1,000	1,000
1990	1,000	1,000	1,000	1,000
1991	1,000	1,000	1,000	1,000
1992	1,000	1,000	1,000	1,000
1993	1,000	1,000	1,000	1,000
1994	1,000	1,000	1,000	1,000
1995	1,000	1,000	1,000	1,000
1996	1,000	1,000	1,000	1,000
1997	1,000	1,000	1,000	1,000
1998	1,000	1,000	1,000	1,000
1999	1,000	1,000	1,000	1,000
2000	1,000	1,000	1,000	1,000
Total (a) and (b)	100,000	100,000	100,000	100,000
Total (c) and (d)	100,000	100,000	100,000	100,000

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