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COUNTY BOROUGH OF BOURNEMOUTH

Annual Report

of the

Medical Officer of Health

and

Principal School Medical Officer

For the Year 1963

Public Health Department,
17 St. Stephen's Road,
Bournemouth.
Telephone Bournemouth 22066.





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ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1963

PUBLIC HEALTH DEPARTMENT,
17 St. Stephen's Road,
Bournemouth.

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

Mr. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth for the year 1963, the eighty-fifth in the series.

Vital Statistics

The Registrar-General's mid-year estimate of population showed an increase from 149,830 to 150,690, and this latter figure forms the basis for the vital statistics that follow.

A total of 1,873 live births were registered, representing a birth rate of 12.43 per 1,000 population, compared with 12.16 per 1,000 population in 1962. Included in this total were 212 illegitimate births, about 11.3 per cent of the total, almost the same as in 1962. Included in the body of the Report is an analysis of illegitimate births occurring during 1963.

Stillbirths were 33 in number, giving a rate of 17.31 per 1,000 live and stillbirths, which compares with the national figure.

Forty-four infants died before their first birthday, compared

with 40 in 1962, and the infant mortality rate rose from 21.95 to 23.49 per 1,000 live births. This rate is higher than it should be in a Borough so well endowed with natural and acquired advantages as Bournemouth, and it is worth recording that the mortality rate in illegitimate infants was 50 per cent higher than in those born to married parents.

Deaths occurring in the Borough totalled 2,708, representing a death rate of 17.97 per 1,000 of the population, and an adjusted death rate of 11.32 per 1,000 of the population. The pattern of mortality was much the same as in 1962, but the extraordinarily severe winter of 1962-63 was undoubtedly directly responsible for a proportion of deaths occurring in elderly people.

There were no maternal deaths during the year, and only five deaths from pulmonary tuberculosis.

Notifiable Infectious Diseases

There were no cases of serious infectious disease during the year, but 1,601 cases of measles were notified, chiefly in toddlers and school-age children.

Tuberculosis

Notifications of pulmonary tuberculosis fell from 50 in 1962 to 37 in 1963, while the number of deaths declined from seven to five. Co-operation between the Health Department and the Chest Clinic was maintained at a very high level.

Maternity and Child Welfare

No major changes have occurred in the Council's arrangements for the care of mothers and young children, and attendances at the Council's clinics though lower than in 1962, were still at a high level. The decline in attendances at clinics was particularly noticeable during the first quarter of the year when the weather conditions were extremely severe.

Welfare foods continued to be available at all clinics, also a variety of proprietary infant foods.

Ante-natal facilities were continued as a once-weekly clinic at "Avebury", 10 Madeira Road, but the attendances are now so small that consideration should be given to closing this clinic, as there is ample alternative provision.

Financial support was continued to the Free Church Council's

Mother and Baby Home at 11 St. Alban's Avenue, and St. Thomas' Lodge, Charminster Road, and the Health Committee also made special grants towards the expenses of a number of unmarried Bournemouth girls who had their babies in Homes outside the Borough.

The Corporation Day Nursery at 10 Wellington Road was under heavy pressure throughout the year and at one period there were 80 pre-school children on the waiting list. Rightly or wrongly a very high proportion of married women wish to go out to work nowadays and in spite of the increase in registered Daily Minders, the pressure on the Day Nursery continues. The Health Committee therefore decided to limit admissions to priority cases.

The Domiciliary Services of the Corporation

Domiciliary Midwifery Health Visiting Home Nursing Domestic Helps

These services now provide some 60 trained nurses and about 130 part-time domestic helps to meet the needs of those who, for one reason or another, remain at home during confinement, illness or in old age, rather than go into hospital.

For these categories of persons, help must be of a practical kind, and is frequently dirty and unpleasant, and it is proving difficult to increase staffs and take some of the pressure from those who have given such splendid service over the years.

The Ambulance Service

There was once again a small fall in patients carried and mileage covered by the Ambulance Service, but at peak periods as during certain hospital out-patient sessions, the Service was fully extended. Meetings have been held between hospital and ambulance staff in an attempt to spread the load.

Vaccination and Immunisation

Vaccination and immunisation against smallpox, diphtheria, whooping cough, poliomyelitis, tetanus, tuberculosis and yellow fever have continued on the lines recommended by the Ministry of Health, and in respect of the first five diseases the general practitioner has continued to play an increasing part. None of these diseases can be completely eradicated from the world in the foreseeable future, but so far as this country is concerned they can

be contained and controlled if the public accepts the simple protective measures available.

Mental Health Services

Admissions to mental hospitals, arranged by the Council's mental welfare officers were slightly below those of 1962, 418 compared with 425. The Borough was officially transferred by the Wessex Regional Hospital Board to the catchment area of Herrison Hospital in October, 1963, and thereafter practically all Bournemouth patients suffering from mental illness were admitted to either Herrison Hospital or St. Ann's Hospital.

Generally speaking the new arrangement has worked very well, although there have been a few short periods when a patient could not be admitted immediately. Liaison between the staff of the Hospital and the Mental Health Section has also been materially strengthened.

As regards admissions to hospitals for mental subnormality,, there has been little change in the position and long waiting lists; at both Coldeast Hospital and Tatchbury Mount Hospital have: been the rule.

Sanitary Circumstances, Housing and Inspection of Food

Mr. J. Randall, your Chief Public Health Inspector, has reported in detail on these very important aspects of environmental hygiene, and the action that has been taken to deal with factors affecting; the public health.

In addition to their many other duties, the Public Health Inspectors each spent a proportion of his time investigating Houses in Multiple Occupation, of which a considerable number exist in Bournemouth.

It remains for me to thank the Chairman and members of the: Health Committee for their help and encouragement during the: year.

My thanks are also due to my Deputy, Dr. H. C. Jennings, to Mr. J. W. Roberts, my Chief Administrative Assistant, and to all my staff for their loyal co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

WILLIAM FIELDING.

Health Committee and Staff

as at 31st December, 1963

HEALTH COMMITTEE

The Mayor (Alderman H. P. E. Mears, O.B.E., J.P.)
Alderman Mrs. M. C. Wall (*Chairman*)
Councillor F. H. Beale, M.A. (*Vice-Chairman*)

Councillot 1. 11. Dec	are, man ir (rice enamman)
Council Members Alderman F. A. W. Purdy Councillor T. Ashworth ,, W. C. Grove ,, Mrs. B. Hoskin ,, L. Brockbank	Councillor Mrs. G. Rees ,, A. W. Patton ,, C. H. Roberson ,, Mrs. M. A. Webley
Other Members L. J. J. Morgan, Esq., LL.B. A. S. Ogden, Esq., M.B., Ch.B. A. A. F. Shepherd, Esq., L.R.C.P., L. C. Heygate Vernon, Esq., F.R.C.S.	.R.C.S.

PUBLIC HEALTH DEPARTMENT

PUBLIC HEAL	IH DEPARIMENT
Medical Officer of Health, Principal School Medical Officer, and Medical Referee to Cremation Authority	William Fielding, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health, Deputy Principal School Medical Officer, Deputy Medical Referee to Cremation Authority	H. C. Jennings, M.B., Ch.B., D.P.H., D.R.C.O.G.
Assistant Medical Officers of Health, School Medical Officers	J. D. Beale, M.B., B.S. C. R. Haines, M.B., Ch.B., D.R.C.O.G. P. K. H. Keating, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H.
Principal Dental Officer	A. A. Wood, L.D.S., R.C.S.
Dental Officers	H. S. Hooper, B.D.S., L.D.S., R.C.S. F. E. Lockwood, B.D.S. (Univ. L'pool). (One vacancy).
Chief Public Health Inspector	Jack Randall, M.R.S.H. + † ° ‡
Deputy Chief Public Health Inspector	G. A. Morgan + †
District Public Health and Food Inspectors	H. R. Ambrose+† H. B. Frost+† D. G. Lord+† A. J. Mortimer+†‡ S. M. Payne+†‡ S. Tweedie+† A. R. Woollard+† (1 vacancy).
District Public Health Inspector	W. Vincent Morris* Plus 4 Assistants.

Superintendent Health Visitor and Non-Medical Supervisor of Mid- wives	L. E. Roberts.
Health Visitors	K. H. Beaumont, D. E. Blundstone, F. Darlington, M. E. Davies, E. Derry, M. H. Dutton, B. Geach, M. J. Grosvenor, P. A. Haden, A. Johnson, A. D. Lane, B. Leadbitter, A. Morton, J. Mulligan, M. Peakman, J. M. Robinson, E. Roth, M. K. J. Stephens, N. E. Smith, C. M. Sorton, G. N. Suckamore, M. N. M. Tratsart, J. Venn, D. L. Vincent, E. M. P. Ward, J. Wilkinson.
Municipal Midwives	E. J. Frampton, F. Hailwood, D. Hoare, B. McBride, C. D. Reid, E. M. Schoch, D. M. A. Sharp.
Superintendent, Home Nursing	E C . I . I
Service	F. Grindrod.
Senior Nurse, Home Nursing Service	E. Lane.
Home Nurses	M. Burnett, D. G. Collier, M. DaCosta,
	G. Draper, E. Finnemore, M. Fothergill, E. P. Gilbert, R. Guscott, M. M. L. Hemmi, M. Higgins, B. Jackson, M. Jones, T. M. Jones, C. Langley, M. Large, P. R. May, L. Mist, M. K. Mundy, J. L. H. Pegg, E. Rampton, B. M. Rendle, E. E. Souter, G. H. Sutton, J. K. Tolley, D. E. Welch
Senior Psychiatric Social Worker	H. S. Lovejoy
Psychiatric Social Worker	M. Hergett
Social Workers	E. Evans, G. M. Parr, A. E. Stalbow
Mental Health Officers	F. H. Lewis, R. Smith. D. G. Lord, W. Vincent Morris (both part-time).
Dental Surgery Assistants	H. Allen, D. M. Cox, F. R. Hickmott, B. D. M. Read.
Chief Administrative Assistant and Chief Clerk	J. W. Roberts
Senior Administrative Assistant	H. V. Humberston
Secretary to Medical Officer of Health	B. Tyrer
Section Clerks	F. J. Goode, C. Lockett, S. Murphy
Clerks	H. R. Bryan, K. F. Clarke, P. E. Crawford, B. F. A. Elliott, P. Hawke, W. A. Longman, M. McGovern, M. E. Mead, I. Murphy, E. G. Payne, J. W. Peake, M. A. Reeve, R. W. Rowe, J. A. Smith, S. G. Tarrant, N. Ullithorne.

Part Time Člerks	J. I. M. Sherwood, R. P. Sheppard
Home Help Organiser	L. A. Horwood
Assistant Home Help Organiser	I. M. Clements
Ambulance Depot Superintendent	A. N. Platts
Deputy Ambulance Depot Super- intendent	H. G. Martin
Training Centre	C. R. Ashley, A. M. Sowerby (Supervisors), W. E. Fisher, J. G. Hanlon, G. M. Nott, S. Nott, J. F. Randall, K. Starkie, B. Usher, F. Whild.
Superintendent of Public Conveniences and Mortuary	W. C. R. Jewell
Rodent Officer	P. L. J. Sibley, plus 4 Operatives.

PART-TIME OFFICERS

Senior Medical Officer for Mental Health	G. J. Bell, L.D.S., R.C.S., L.R.C.P.S., M.B., B.S., D.P.M.
=Chest Physicians	W. H. Tattersall, M.A., M.D. A. C. Craig, B.Sc., M.B., Ch.B. A. T. Hendry, M.B., Ch.B., F.R.F.P.S.
=Consultant Children's Psychiatrist	J. E. Stirrat, M.B., Ch.B., D.P.M.
Public Analyst	F. A. Lyne, B.Sc., F.R.I.C.
Meteorological Registrar	A. J. Mortimer.
Deputy Meteorological Registrars	C. Lockett, S. Tweedie.
Dental Officers	M. B. Redfern, L.D.S. M. Gardener, L.D.S., R.C.S.

- * 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 R.San.I. for Sanitary Science.
- = Employed by Wessex Regional Hospital Board.

General Statistics

Area of the County Borough				11,627 acres
Estimated Civilian Population-	-Mid	Year	1963	150,690
Provisional Census Population,	1961			153,965
Rateable Value at 1.4.63				£9,580,874
Product of 1d. rate, 1963/64				£38,787

Vital Statistics

Live births { Male Legitimate 894, Illegitimate 118 Female ,, 767, ,, 94 , 88.7% ,, 11.3%			1873
,, 88·7% ,, 11·3% Birth rate (per 1,000 population)			12-43
			12.43
Stillbirths { Male Legitimate 16, Illegitimate 4 }			33
Stillbirth rate (per 1,000 total live and still births)			17-31
Total Deaths (Males 1228, Females 1480)			2708
Death Rate (per 1,000 population)			17-97
Adjusted Death Rate (per 1,000 population)			11.32
Maternal Deaths (Sepsis Nil, Other causes Nil)			Nil
Maternal Mortality Rate (per 1,000 total births)			Nil
Number of deaths of infants (under 1 year of age) :— Legitimate 37, Illegitimate 7			44
Infant Mortality Rate (per 1,000 live births)			23.49
Number of Neo-natal Deaths (under 4 weeks of age)			33
Neo notal Mortality Pata (par 1 000 live hirths)			17.62
Number of Forly Nee noted Doothe (under 1 week of age)			30
Early Neo-natal Mortality Rate (per 1,000 live births)			16.02
Number of Perinatal Deaths (Stillbirths and deaths under 1	week		1002
age)			63
Perinatal Mortality Rate (per 1,000 live and still births) .			33.05
Deaths from Whooping Cough, all ages			Nil
Deaths from Measles, all ages			Nil
Deaths from Diarrhoea, under 1 year of age			1
Deaths from Pulmonary Tuberculosis (Males 5, Females Nil)		5
Death rate from Pulmonary Tuberculosis (per 1,000 populat	ion)		0.033
Deaths from Non-Pulmonary Tuberculosis (Males Nil, Fem	ales :	1)	1
Death rate from Non-Pulmonary Tuberculosis (per 1,000 pop	ulati	on)	0.007
Deaths from Cancer (Males 228, Females 243)			471
Death rate from Cancer (per 1,000 population)			3.13

Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1,873, an increase of 51 on the total for 1962, and nearly 14 per cent higher than the average births in the ten year period 1953-62.

Average number of births, 1953	-1962	 1,647	
Dietho in 1063		 1,873	
Average birth rate, 1953-1962			1,000 population
Rirth rate 1963			1,000 population
Birth rate, England and Wales,	1963	 18·20 per	1,000 population

Stillbirths

There were 33 stillbirths in 1963 compared with 22 in 1962, the majority of them occurring in hospital practice. The rate for 1963, though a great increase on the previous year, is very similar to the national average.

Average number of stillbirths, 1953-1962	32
Stillbirths in 1963	33
Average stillbirth rate, 1953-62	19.34 per 1,000 total births
Stillbirth rate, 1963	17.31 per 1,000 total births
Stillbirth rate, England and Wales, 1963	17.3 per 1,000 total births

Illegitimate Births

Illegitimate births accounted for 11.3 per cent of the total births the same proportion as in 1962.

In all, 311 illegitimate births were registered in Bournemouth in 1963, and allowing for inward and outward transfers, 216 of these were adjudged by the Registrar-General to be Bournemouth cases. Miss L. E. Roberts, Superintendent Health Visitor, has provided the following information about them:—

Babies born in Bournemouth of Bournemouth mothers	157	
Babies born in Bournemouth to mothers residing elsewhere		154
Babies born elsewhere to Bournemouth mothers	59	
Total illegitimate babies born in Bournemouth		311
Total illegitimate tabies born to Bournemouth mothers	216	

Further information is available about the 157 Bournemouth mothers having illegitimate babies in the Borough:—

Single women	88
Single women living as married	28
Married women living with husband (not husband's child)	18
Married women living with child's father, who is not their	
husband	23

157

The ages of the 88 single women registered as living in Bournemouth were as follows:—

Aged 15 year	s	 	5
,, 16 ,,		 	5 3
,, 17 ,,		 	9
,, 18 ,,		 	15
,, 19 ,,		 	12
,, 20-22 ,,	* * *	 	28
,, 23-27 ,,		 	14
, 35 ,,		 	1
,, 40 ,,		 	1
			_
			88
			-

Six of these women are known to have had at least one previous illegitimate pregnancy.

Although these single women were bona-fide Bournemouth residents in that they lived here at the time of the confinement, no fewer than 35 were pregnant when they came to Bournemouth, and of this number seven came to live with relatives, the remainder finding their own accommodation.

All of the 15-year-old girls were Bournemouth girls.

It is often thought that the majority of illegitimate babies are adopted, but this was not the case in 1963, and only about one baby in five was adopted during the time the girl was in Bournemouth.

17 babies were adopted

15 girls left Bournemouth with their babies

50 girls kept their babies; 25 keeping the baby with them, 9 arranging for daily minding, and 16 arranged private fostering. Two of the girls married the father of the child and kept the child.

4 babies were stillborn

2 babies died

88

The occupations of the unmarried mothers varied, but most of them came within the following categories:—

Hairdressers
Secretaries
Ships' stewardesses
Nurses
Shop assistants
Students
Waitresses
Factory workers

Quite clearly, illegitimacy is an increasing problem, and involves every major town and city in the country. It is a symptom of the general malaise that affects a proportion of our young people today, and together with their reefers, purple hearts, alcoholism and antisocial habits, reflects the indiscipline that pervades so much of the modern way of life.

Health education is powerless to deal with a situation such as this. What is required is a spiritual and moral revolution.

Prematurity

(i.e. babies weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of the period of gestation).

During the year 175 premature births were notified, 9.2 per cent of the total births, and 13 more than in 1962. The causes of prematurity are still obscure, but the precarious hold on life possessed by these small babies has a direct bearing on the infant mortality rate, and many of the babies dying during 1963 before their first birthday were born prematurely.

Born at home or in Nursing	Live	Stillborn	Total
Homes Born in Hospital	25 133	1 16	26 149
	158	17	175

Infant mortality

During the year 44 infants died in the first year of life, four more than in 1962 and the infant mortality rate rose from 21.95 per 1,000 live births to 23.49. This is higher than the national average of 20.9 per 1,000 live births, and is in part due to the higher mortality in illegitimate infants.

Thirty of the 44 infants died before they were a week old, 22 from prematurity, 5 from congenital abnormalities incompatible with survival, 2 from injuries sustained during birth, and 1 from pneumonia.

Of the remaining 14 babies surviving the early neonatal period, four died later from congenital deformities, two from pneumonia, three from asphyxia, one from gastro-enteritis, and four from other causes.

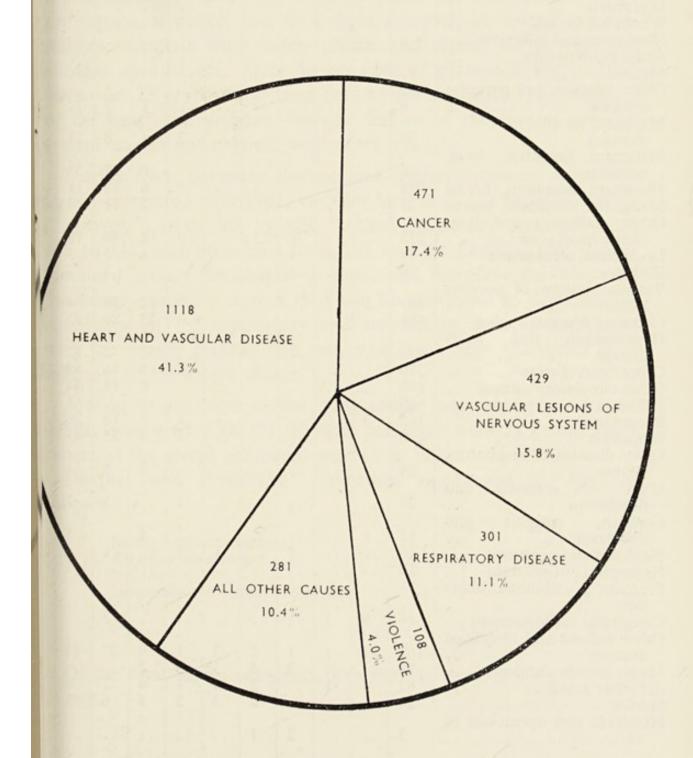
Maternal mortality

For the fifth consecutive year, no Bournemouth mother died following childbirth.

	PREMATURE	OHLLBIKING	Born	in at hos- home or in a nurs- ing	home (13) (14)	3 -	3	3 1	3	4	16 1
		fore		in 7 and under 28 days	(12)	1	1	1	1	1	1
	ome	Transferred to pital on or bef 28th day	Died	in 1 and under 7 days	(11)	1	1	1	1	1	1
	rsing ho	Transferred to hospital on or before 28th day		with- in 24 hours of birth	(10)	1	1	1	1	1	3
	n a nu	hos		Total births	(6)	1	1	5	1	1	6
IRTHS	Born at home or in a nursing home	at		in 7 and under 28 days	(8)	1	1	1	1	1	1
PREMATURE LIVE BIRTHS	n at ho	Nursed, entirely at home or in a nursing home	Died	in 1 and under 7 days	6	1	1	1	1	1	1
ATURE	Bor	ursed, e home nursing		with- in 24 hours of birth	(9)	1	1	1	1	1	1
PREM		Z		Total births	(5)	1	1	1	2	14	16
				in 7 and under 28 days	(4)	1	1	1	1	-1	1
	.5	hospital	Died	in 1 and under 7 days	(3)	2	2	4	1	1	10
	Dorn in	log		with- in 24 hours of of	(2)	5	3	1	1	1	6
				Total births	Ξ	13	10	17	20	73	133
		Weight of Lines.	weignt at birth			2 lb. 3 oz. or less	Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	Total
						1.	2.	3.	4.	5.	9

Proportion of Deaths from Principal Causes, 1963

TOTAL DEATHS 2,708



CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1963

Causes of Death	All Ages	0—	1—	5—	15—	25—	35—	45	55—	65—	75-
All Causes	2708	44	5	7	14	14	40	109	369	664	144
Tuberculosis, respiratory	5							2	3		
Tuberculosis, other	1					00	100	1000	-	1	261
Syphilitic disease	4								1	1	
Diphtheria			-							1.2	
Whooping Cough											
Meningococcal infections											
Acute poliomyelitis						-					
Measles											
Other infective and parasitic		100				10.0		100		1	811
diseases	4							1	3		
Malignant neoplasm			3000				1990		-		551
at a see a als	59						2	4	8	23	12
Malignant neoplasm, lung,	0,						-	1		20	
huanahua	86							6	27	32	::
Malignant neoplasm, breast	54				1		4	6	15	11	1
Malignant neoplasm, uterus	25				7	75.5		2	11	4	
	25							-	11	. 1	
Other malignant and lym-	233				1		9	12	44	79	18
phatic neoplasms	14			i			1	1	5	3	19
Leukaemia, aleukaemia	10			1			1		3		
Diabetes	10								3		
Vascular lesions of nervous	420						2	12	30	94	200
system	429						3 5	23	89	172	22
Coronary disease, angina	568					2.5	3	23	09	1/2	24
Hypertension with heart	20				1971			1	2	12	100
disease	39				1			.:	16	12	23
Other heart disease	370				1		2	6	16	48	22
Other circulatory disease	141						1	6	14	44	
Influenza	16		1:			.:	1	.:	10	3	
Pneumonia	145	3	1			1	1	3	18	26	
Bronchitis	130		1				2	4	23	45	101
Other diseases of respiratory		1	14 1					-	0		100
system	26							2	8	4	
Ulcer of stomach and			1		1				-	_	2
duodenum	25				5.		1		5	7	
Gastritis, enteritis and		1								-	13
diarrhoea	11	1						1		5	4
Nephritis and nephrosis	16			1		1	1		1	4	
Hyperplasia of prostate	12									5	
Pregnancy, childbirth, abor-	1									1	
tion	1										
Congenital malformations	14	9	1						3		
Other defined and ill-defined	1/2	1					1	1700	1		
diseases	163	27	1	1	2	2	1	.9	27	33	
Motor vehicle accidents	19			2	4 2	2 3	3	2 4			
All other accidents	62	4	1		2	4	1	4	7	6	
Calaida	24				2	3	3	3	6	3	
Homicide and operations of		1	1		1 36						
	3			2	1						1
war		1			1						

DEATHS FROM PRINCIPAL CAUSES, 1963

Deaths during 1963 totalled 2,708, an increase of 145 over 1962, and in attempting to explain this increase, due weight must be given to the exceptionally severe winter of 1962-63, which was prolonged far into the New Year. The dislocation of essential public services, water and fuel supplies, placed an intolerable strain on many elderly people and led to their premature demise. Bournemouth is, however, a town where an exceptionally high proportion of people live to a great age and, in normal circumstances, maintain their independence and vigour far beyond the allotted span of life. Over 53 per cent of persons dying in 1963 were over 75 years of age, and over 85 per cent died from diseases of the heart and arteries, vascular lesions of the central nervous system, cancer and chronic respiratory disease.

Deaths from coronary disease and angina increased from 538 to 568 compared with 1962, vascular lesions of the nervous system ("strokes") from 389 to 429, "other circulatory disease" from 105 to 141, and bronchitis from 101 to 130. Deaths from cancer remained largely unchanged in total, and therefore the whole of the excess mortality during 1963 can be attributed to degenerative conditions of the circulatory and respiratory systems associated with the ageing process and may well have been the direct consequence of the severe winter.

Among deaths from cancer, lung cancer was responsible for 86 deaths compared with 101 in 1962, but there were 25 deaths from cancer of the uterus compared with 19 in 1962.

Deaths from "violence" remained unchanged at 108, as follows:—

	1962	1963
Motor vehicle accidents	 18	19
All other accidents	 58	62
Suicide	 31	24
Homicide and operations of war	 1	3
	108	108
		-

Of the fatal motor accidents, five were in persons over 75 years of age.

Notifiable Infectious Diseases, 1963

The Borough was relatively free from serious infectious disease during 1963, and there were no cases of poliomyelitis, diphtheria or enteric fever.

An epidemic of measles totalling 1,601 cases and affecting chiefly toddlers and school-age children occurred in the middle of the year, but with this exception schoolchildren in general suffered very little in the way of infectious disease. A small number of cases of infective hepatitis were reported, however, but as this condition is not notifiable and the long incubation period leads to great difficulties in investigation, no firm conclusions were reached regarding the source of the outbreak.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1963

and the governor and another the		Nun	nber	of Ca	ises N	Notifi	ed	
ignation and the state of the first	At Ages — Years							
Notifiable Disease	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
Scarlet Fever Whooping Cough Acute Poliomyelitis—Paralytic Non-Paralytic Measles Diphtheria Acute Pneumonia Dysentery Paratyphoid Fever Typhoid Fever Typhoid Fever Erysipelas Meningococcal Infection Food Poisoning Puerperal Pyrexia Ophthalmia Neonatorum Scabies Malaria Acute Encephalitis	28 27 — 1601 — 22 22 — 6 1 5 3 1 8 — 1		9 8 - 685 - 7 - 1 - 2 -	16 12 - 866 - - 1 1 - 2 - 1	1 3 — 15 — 2 — — — 2 — — — — — — — — — — — — —	2 1 - 4 - 6 - - - 2 - 2	- - - - - - - - - - - - - - - - - - -	

Tuberculosis in Bournemouth

During the year 37 cases of pulmonary and 10 cases of non-pulmonary tuberculosis were notified compared with 50 and 4 notifications respectively in 1962. The number of new cases of pulmonary disease equals the lowest figure ever recorded (in 1961), but non-pulmonary tuberculosis showed an unusual increase, all but one of the cases occurring in adults.

The general arrangements for the diagnosis, treatment and follow-up of cases of tuberculosis have remained unchanged, and an excellent spirit of co-operation exists between the Chest Clinic and the Public Health Department.

The notifications of new cases and deaths from tuberculosis since 1948 are shown in the accompanying table :—

		New	cases Non-	Dea	aths
		Respiratory	Respiratory	Respiratory	Non- Respiratory
1948		118	16	67	6
1949	 	109	18	54	8
1950		80	11	46	1
1951		127	13	37	2
1952	 	141	17	33	5
1953	 	98	17	20	2
1954	 	136	16	28	_
1955	 	117	9	12	2
1956	 	107	9	14	4
1957	 	114	11	10	4
1958	 	110	10	11	411011
1959	 	81	4	7	3
1960	 	66	9	5	1
1961	 	37	5	6	1
1962	 	50	4	7	2
1963	 	37	10	-	
1700		31	10	The state of the s	The same of the same of

Notifications of pulmonary tuberculosis were 21 in males and 16 in females.

Cases of non-pulmonary tuberculosis occurred as follows:-

TIGO

Genito-ur	inary	system	(includ	ling kic	ineys)	 6
Glands	x		4.			 3
Meninges						 1

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

	1				Fo	orma	al N	otif	icati	ons				
	THE THE	1	Num	ber	of I		ary Tub				ns o	f ne	w cases	
Age periods (years)	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	to	55 to 65	to	75 and up- wards	Total (all ages)
Respiratory — Males Females Non-	-	<u>-</u>	-	1 1	- 1 - 1	1	1 2	3 4	3 1	8 3	2 2	1 1	1 -	21 16
Respiratory — Males Females		-	1			1-1		111	- 1	- 2	1 1	1	- 2	3 7

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

		New	Cases	Deaths					
	Respiratory		No Respi		Respi	ratory	Non- Respiratory		
	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1 year 1-5 years 5-15 ,, 15-25 ,, 25-45 ,, 45-65 ,,	 	1 1 3 5	- 1 - - 1				11111		
45–65 ,, 65–75 ,, 75 and upwards	 1 1	1	1 _	1 2	=	=	=	1	
Totals	 21	16	3	7	5	_	_	1	

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.

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

No action has been required.

Dr. J. Stuart Robertson, Medical Director of the Mass Radiography Unit, has provided the following information of the work carried out in Bournemouth.

Report by Dr. J. Stuart Robertson, Medical Director. MASS RADIOGRAPHY 1963

As in the past our two units have continued their work throughout Hampshire, Dorset and Wiltshire. In the various surveys within the Borough 11,248 individuals have been examined and in addition some 250 prospective staff for employment with your authority have attended as part of their general medical examination at sites outside the Borough boundaries.

From the total number examined 31 patients were referred to the appropriate chest clinic for further investigation and 15 to their own doctor or hospital. The numbers are too small for significant statistical analysis but the incidence of pulmonary tuberculosis is still falling and if the present trend continues this serious infectious disease will cease to be of epidemiological significance by another decade. In the interval it is, however, important to continue and intensify our efforts to discover and eliminate any unknown infectious case which could be a grave menace to our public health measures. Unfortunately the incidence of lung cancer is still showing the reverse trend and the prognosis is disheartening. Surgery is still our main line of defence and it has been stated that the best results are in those cases picked up by Mass Radiography Units.

35 mm. Unit
MASS RADIOGRAPHY SURVEYS CARRIED OUT IN
BOURNEMOUTH DURING 1963

	A	dults	Schoole	hildren	
	Males	Females	Males	Females	Total
Mass Radiography Centre					
$(1.1.63 - 1.2.63) \dots$	589	553	17	18	1177
Avenue Road, Bournemouth	1485	1967	15	16	3483
Max Factor, Bournemouth	332	767	-	_	1099
Municipal College, Bourne-					
mouth	879	287			1166
Mass Radiography Centre					
(14.5.63 - 24.5.63)	410	406	10	8	834
Telephone House, Bournemouth	455	131		1	587
P.O. Sorting Office	245	23	2		270
Mass Radiography Centre					
(13.9.63)	6	8			14
Mass Radiography Centre					
(10.12.63 - 31.12.63)	659	524	28	11	1222
	5060	4666	72	54	9852

Statistics

TABLE I.

The foll	lowing giv	es briefly	the ma	in results:
----------	------------	------------	--------	-------------

Number examined	 9852
Recalled for large film examination	 65 (0.66%)
Recalled for clinical examination	 41 (0.42%)
Referred to Chest Clinic	 26 (0.26%)
(a) probably tuberculous	 10 (0.10%)
(b) probably non-tuberculous	16 (0.16%)
Referred to doctor or hospital	 15 (0.15%)

TABLE II (a)

Number referred to the appropriate Chest Clinic as probably tuberculous:-10

 2. 3. 	No. of cases diagnosed as active pulmonary tuberculosis, and recommended for hospital treatment No. of cases diagnosed as active pulmonary tuberculosis, and recommended for domiciliary treatment Tuberculosis requiring supervision	1 2 1	Female	Total 1 2 4
4.	Not yet classified	2	1	3
	nd reversion to strong their discount but to	6	4	10

TABLE II (b)

Non-tuberculous cases:

1. 2. 3.

Referred to Chest Clinic Referred to Doctor or He	ospital	16 15 		
Cardiovascular lesions Carcinoma of lung Other non-tuberculous conditions		 Male 5 8 6	Female 5 1 6	Total 10 9 12
		19	12	31

100 mm. Unit

	Males	Females	Total
Anglo-Continental School of English, Bourne-			
mouth	57	36	93
Royal Victoria Hospital, Gloucester Road	12	26	38
Royal Victoria Hospital, Shelley Road	76	210	286
Plummer Roddis Ltd., Boscombe	14	47	61
Lee Motor Works Ltd., Winton	93	9	102
Heathlands Hotel, Bournemouth	38	15	53
Anglo-Continental School of English, Bourne-			
mouth	90	84	174
J. J. Allen, Bournemouth	90 .	83	173
Devon Towers Hotel, Bournemouth	13	18	31
Anglo-Continental School of English, Bourne-			
	68	28	96
Malmesbury and Parsons Dairies Ltd., Bourne-		7000	
mouth	53	26	79
Wentworth School, Boscombe	3	189	192
Hartwell Motors, Bournemouth	18	107	18
Traitmen motors, Bournemouth	10		10
Standard Standard State Actions in tome	625	771	1396
entering the contract of the state of the st	-	-	
A brief analysis of the results is as follows :-			
No. X-rayed	1396		
No. referred for investigation	5		
	200		
	Males	Females	Total
Tuberculosis, requiring hospital treatment	_	1	1
Tuberculosis, requiring domiciliary treatment	1	_	1
Tuberculosis, requiring supervision	1	_	1
Carcinoma of lung	1	_	1
Other non-tuberculous conditions	_	1	1
THE PARTY OF THE P		-	
	3	2	5

Maternity and Child Welfare

At the end of 1963 there were 16 Infant Welfare Centres in the Borough providing 21 clinic sessions weekly. Seven of the 16 Centres were in Corporation ownership, the remaining nine being rented from religious and other organisations on a sessional basis.

For the first time for many years, attendances declined from 50,817 in 1962 to 46,546 in 1963, and this was probably associated with the severe weather in the first quarter of the year, as most of the decline was in children under one year of age, from 28,883 to 25,885.

All clinics continue to be supervised by a medical officer, one or two health visitors, and a number of voluntary helpers, and although the Bournemouth Infant Welfare Voluntary Association has now ceased to exist, many of their former members still continue to give magnificent service to the clinics and others have joined them in the last few years.

ATTENDANCES AT INFANT WELFARE CENTRES, 1963

Clinic	Infants under 1 year	Pre- school Children	Total	Sessional Average
Avebury	1456 1256	688 850	2144 2106	45 41
Chamainstan	816	764	1580	30
Cook III.	1813	1680	3493	66
Ensbury Park	1331	1188	2519	50
ford	1240	1076	2316	45
Kinson	1580	1253	2833	56
Malmesbury Park	1400	921	2321	46
Moordown	774	798	1572	32
Northbourne	1052	838	1890	36
Pokesdown (a.m.)	1184	590	1774	35
Pokesdown (p.m.)	1550	648	2198	44
Strouden	1194	1390	2584	51
Sutton Road	1161	1029	2190	44
Tuckton	1340	1191	2531	53
West Cliff	1186	604	1790	37
West Howe (a.m.)	833	1132	1965	39
West Howe (p.m.)	957	1312	2269	44
Vinton (a.m.)	1480	1062	2542	5 i
Winton (p.m.)	1731	1183	2914	58
Castle Lane	551	464	1015	35
	25885	20661	46546	45

Ultra Violet Light Clinics

A small number of children, 16 in all, made 196 attendances at the Malmesbury Park (Stewart Road) Clinic.

Welfare Foods

The sale of welfare foods, which was transferred to local authorities from the Ministry of Food in 1954, has continued at all infant welfare centres, but the demand has steadily fallen, and now represents only about a quarter of the sales in 1955. The reason is undoubtedly the preference most mothers show for the branded article, and although the cost may be a little more, a very wide selection now exists from which to choose.

	1957	1958	1959	1960	1961	1962	1963
National Dried Milk (tins)	31,861	26,288	24,073	20,584	15,801	13,789	11,475
	11,259	7,483	7,174	7,312	5,086	2,478	2,256
Vitamin A and D Tablets (packets) Orange Juice (bottles)	5,982 87,977		6,447 57,763			3,430 22,265	3,168 26,037

Ante Natal Supervision

Attendances at the Avebury Ante Natal Clinic decreased from 390 to 266, and the number of mothers attending fell from 294 to 214. Virtually the whole of the ante natal work in the Borough is now carried out by the general practitioners and the hospital ante natal clinics, together with the domiciliary midwives in respect of their own cases only.

The time has probably now come when the Corporation clinic can be closed, particularly as the matrons of both general practitioner maternity homes in the Borough have intimated their desire to conduct their own ante natal clinics.

BIRTHS OCCURRING IN BOURNEMOUTH, 1963

	19:	57	19	58	19	59	19	60	19	61	19	62	190	53
	No.	%	No.	%										
Domicil- iary Births	527	27.5	533	27-2	559	27.6	616	29.3	601	28.3	499	20-9	365	14
Institu- tional Births	1390	72.5	1425	72.8	1464	72.4	1484	70.7	1525	71.7	1894	79-7	2247	86
Totals	1917	100	1958	100	2023	100	2100	100	2126	100	2393	100	2612	100

During 1963 the following births were notified as occurring in the Borough:

Domiciliary births	365	(499)			
Institutional births	2247	(1894)	Royal Victoria Hospital	970	(895)
			Aston Grays Maternity Home	430	(295)
		Of this b	Firs Maternity Home (which opened in Sept., 1961)	669	(488)
mer weet or a		917 10	Free Church Council Maternity Home	57	(64)
	1.1		Private Nursing Homes	121	(152)
			to the state of th	2247	(1894)

Figures in brackets indicate corresponding numbers for 1962.

This total is therefore 219 more than in 1962, there having been an increase of 353 in the number of institutional births and a decrease of 134 in the number of domiciliary births.

In addition 75 Bournemouth patients were delivered in the Hospital Management Committee's Maternity Home at Barton-on-Sea and 70 at Poole General Hospital.

Infectious Diseases associated with Childbirth

2612 (2393)

Three cases of puerperal pyrexia and one case of ophthalmia neonatorum were notified during the year.

Family Planning

Total

The Family Planning Association held three clinic sessions a week at their premises in Stafford Road, and the local authority made a grant in respect of 7 cases referred there on medical grounds.

Nursery and Child Minders (Regulation) Act, 1948

Ten premises were registered under the act, providing accommodation for 105 children, as follows:—

	NT- and	
Address	No. and age of children accepted	Hours of opening
Surrey Road	12 2-5 years	9.30 a.m. to 12.30 p.m.
Clynch," 81 Glenferness Avenue	14 2-5 years	9.30 a.m. to 12.30 p.m. excepting school holidays
2 Seafield Road	2-5 years	9.0 a.m. to 4.0 p.m.
Snowdon Road	21 2-5 years	8.30 a.m. to 5.30 p.m.
5 Pine Road	6 2-5 years	9.30 a.m. to 12.30 p.m. and 2.30 p.m. to 4.30 p.m.
Varren Edge Road	12 2-5 years	9.15 a.m. to 12.15 p.m.
Palmerston Road	14 2-5 years	9.0 a.m. to 5.0. p.m.
Rosemount Road	10 3-5 years	9.30 a.m. to 12.30 p.m.
Grosvenor Road	6 2-5 years	8.0 a.m. to 4.0. p.m.
St. Alban's Crescent	6 2-5 years	8.30 a.m. to 5 p.m.

During the last few years there has been a steady increase in the number of these privately run day nurseries, presumably due to the increasing number of mothers going out to work, but none have applied to be registered for infant minding and appear to confine their activities entirely to the toddler age range. The children attending also appear to belong mainly, if not entirely, to the "non-priority" class.

The standard required before registration follows as nearly as possible the Ministry recommendations for war-time Day Nurseries, which is the standard maintained at the Corporation Day Nursery at 10 Wellington Road. The public health inspector and the fire prevention officer advise on any matters requiring attention, and

following registration the district health visitor makes frequent, regular visits.

Mother and Baby Homes

Financial grants were continued by the local authority to the two mother and baby homes maintained by voluntary organisations within the Borough. Eight local girls were admitted to the Free Church Council Home at 11 St. Alban's Avenue compared with eight in 1962, and while one local girl was admitted to St. Thomas' Lodge as a "shelter" case only, the local authority contributed financially to none of these admissions to both Homes.

In addition, eleven Bournemouth girls were provided with accommodation outside the Borough, at the expense of the local authority, compared with ten in 1962.

Day Nursery

The Corporation Day Nursery at 10 Wellington Road had an average daily attendance of 32 babies and young children, compared with 33 in 1962 and 29 in 1961. There was considerable pressure on the accommodation in the Day Nursery during the year, not reflected in the average attendance, as an outbreak of dysentery restricted attendances over a prolonged period, and at one stage the waiting list approached 80.

Day Nurseries were originally a war time measure to allow married women to engage in essential employment, and due to declining attendances the two other Day Nurseries at Castlemain Avenue, Southbourne and Hadow Road, East Howe, were closed in 1955.

There is now an increasing demand for child minding from professionally trained women, such as teachers and nurses, who are badly needed to supply the increasing demands of the educational and hospital services, and from other women engaged in a wide variety of trades and industries. Although privately run Day Nurseries now provide 105 places, these premises are only registered for the accommodation of the "toddler" group, aged 2 to 5 years, and the only accommodation for babies is in the Corporation Day Nursery.

During the year the Health Committee carefully considered extending their Day Nursery facilities in view of the long waiting

list, and discussed the question on the following main grounds :-

- 1. The advantages and disadvantages to a young child in being separated from its mother during a major part of the day.
- Whether, in the event of more Day Nursery accommodation being provided, it should be by the extension of the existing nursery or by the provision of a new nursery in some other area of the Borough.
- Whether the reopening of nursery classes in certain schools would not provide a better solution to the problem by allowing existing Day Nurseries to concentrate on the younger child.

The whole question was finally deferred and admissions to the Day Nursery restricted to the "priority" groups.

Dental Treatment for Mothers and Young Children, 1963

Report by A. A. Wood, L.D.S., Principal Dental Officer

The three full-time and two part-time dental officers employed by the Bournemouth Local Authority each gave part of their time to the inspection and treatment of mothers and young children, and treatment was provided at each of the four clinics in the Borough.

The dental surgeons were also engaged in the School Dental Service.

All patients were given the opportunity and encouraged to have provided for them at the clinics all the treatment necessary to produce dental fitness, and the mothers were given all possible information about care of the teeth.

It is to be regretted that there was an unavoidable fall in the output in the Maternity and Child Welfare Dental Service compared with previous years; this was due to the very severe weather in the early part of the year, which discouraged mothers from taking young children out. The other factor which adversely affected output was illness, which kept two members of the staff away from work for several months each.

Dental Health Education

All mothers who attended the ante-natal clinics were told about the great importance of good dental health, and those who were not under the care of their own dentists were offered appointments for examination and treatment if necessary at their nearest dental clinic.

Miss L. E. Roberts, Superintendent Health Visitor, and her enthusiastic team showed great interest in the work of dental health education, and their efforts were most valuable. A great deal of useful work in this field was carried out at Ante Natal and Infant Welfare Centres, in addition to talks given to older children at schools. The importance of dental health education has been more fully appreciated throughout the country during recent years.

Visits to Infant Welfare Centres

As in previous years, the dental surgeons visited the Infant Welfare Centres periodically in order to give dental advice to the

parents and to examine the young children's teeth. Twenty-eight sessions were spent in this way.

Royal Victoria Hospital

I am very grateful to Mr. R. G. Torrens for his kindness in treating difficult cases which were referred to him during the year, and this help was very much appreciated.

Facilities for X-rays

The X-ray unit which was installed at the Central Clinic, Madeira Road, in 1956 again proved to be a very valuable diagnostic aid.

Provision of Dentures

Dentures were made by the highly skilled technicians at the Royal Victoria Hospital, Boscombe. This arrangement, which has been in operation for several years, continued to prove extremely satisfactory.

Visits to Day Nursery

The Day Nursery at Wellington Road was visited by one of our dental surgeons, Mrs. H. S. Hooper, twice during the year for the purpose of examining the children's teeth and treatment was offered when necessary. The findings at these inspections are included in the statistical part of this report.

Maternity and Child Welfare

(a) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	35	29	26	23
Children under five	685	209	191	174

(b) FORMS OF DENTAL TREATMENT PROVIDED

		Anaes	Anaesthetics		Scalings	Silver	70	Den	Dentures
	Extractions	Local	General	rillings	and gum treatment	treatment	graphs	Com- plete	Com- Partial plete
Expectant and Nursing mothers	12	5	3	36	5	N	12	4	∞
Children under five	80	3	42	255	ZiZ	37	=======================================	īž	Z

TABLE SHOWING DENTAL CONDITION OF CHILDREN AT THE DAY NURSERY—Year 1963 Wellington Road

and the same	Charles .	
Total D.F.M.	700	20
Missing Teeth	3	3
Filled	1 101	10
 Decayed Teeth		7
Caries Free Teeth	112 236 260	809
Number Needing Treatment	4	4
Number Examined	6 12 14	32
Age	0w4	Totals

The Domiciliary Services provided by the Corporation

The domiciliary services of the Corporation at present provide: approximately 60 highly trained nurses working in the Corporation clinics or in the homes of patients as health visitors, home nurses or domiciliary midwives, and carrying out a wide variety of duties in the prevention and treatment of illness, and in attendance att normal confinements.

As has been noted in previous Annual Reports, the intention off the Ministry, described in the Command Paper "A Hospital Plans for England and Wales," is to reorganise the hospital service to provide modern facilities for the diagnosis and treatment of disease, but patients would only normally be detained in hospital so long; as they require care and treatment that only a hospital could provide.

When this period of active hospitalisation had elapsed, the patient would in most cases return home to continue treatments under the care of the family doctor, assisted by the Corporation's sidomiciliary nurses, and with such hospital out-patient attendances as might be required to assess progress.

Future calls on the services of domiciliary nurses, particularly health visitors and home nurses, are therefore likely to increase, as the proportion of elderly persons in the community increases, and as the policy of the hospitals gradually changes along the lines indicated above.

It is fortunate, therefore, that during the past year recruitment to the domiciliary nursing services has improved a little, and thereseems to be a greater interest among young newly qualified States Registered Nurses for work in the community rather than in hospital.

Perhaps they are coming to realise that although work in the community often lacks the drama associated with the busy acute hospital, there are compensations in closer personal relationships among many different types of patients and their families.

Domiciliary Midwifery Service

Seven full-time midwives were directly employed by the Council, and attended 357 confinements (360 births), compared with 4988 confinements in 1962.

This decline in domiciliary confinements appears to be directly connected with the improved facilities for confinement in general practitioner maternity units in the area, and particularly with the opening of the 29-bedded Firs Maternity Home in September, 1961. During the year 669 admissions were made to the Firs Maternity Home compared with 488 in 1962, and the confinements in all general practitioner maternity homes increased from 783 to 1,099.

Domiciliary births now only represent 14 per cent of total births, a very low proportion compared with the national average, and while there are obvious advantages to the mother in an institutional confinement, there are perennial staffing problems in all maternity units, often leading to early discharge of the mother and baby.

During the year, 136 early discharges, chiefly from the maternity unit at Poole General Hospital, were taken over by the domiciliary midwives, and their nursing continued until the 14th day following confinement.

Towards the end of the year enquiries were made by the Hospital Management Committee as to whether Bournemouth could assist by accepting students from the Part II Training School at Poole General Hospital as the number of domiciliary confinements in Poole was similarly declining and had become insufficient for the training of six students. Early in 1964 the Health Committee acceded to this request.

Details of domiciliary confinements attended were :-

Total No. of confine-	Primi	Multi-	No. of Previous Pregnancies											
ments	para	para	1	2	3.	4	5	6	7	8	9	10	11	12
357	43	314	140	91	48	18	7	6	1	1	-	1	-	1

15-20	20-25	25-30	30-35	35-40	40-45	45-50
27	96	132	66	33	3	_

Gas and air analgesia was given in 281 cases and pethidine in 203 cases.

MATERNITY CASES ATTENDED

Number of Deliveries attended by Midwives in the area during 1963 **Domiciliary Cases** Cases in Dr. Dr. not Totals Institu-Booked Booked tions (i) Midwives employed by the Authority 2 355 357 (ii) Midwives employed by Voluntary Organisations :-(a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service (b) Otherwise (including Hospitals not transferred to the Minister under National Health the Service Act) 57 (iii) Midwives employed Hospital Management Com-mittees or Boards of Goverunder the National Health Service Act 2044 (iv) Midwives in Private Practice (including Midwives employed in Nursing Homes) ... 120 TOTALS ... 2 355 357 2221

MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES ACT, 1951

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

(a)			the Me	dical	Practitio		to provide under the		
	(ii)	Nationa	al Health	h Serv	ice	 	 		8
Total						 	 		8
(b)	For	cases in	Institut	ions		 	 		13

I rases and anti-

Health Visiting

At the end of 1963 the health visiting staff consisted of a Superintendent and 26 health visitors. Two health visitors were seconded for full-time duty to the Chest Clinic, where in addition to assisting in the clinic and X-ray sessions they undertook contact tracing, housing enquiries and the supervision of patients on domiciliary treatment; and two health visitors were employed full-time as geriatric health visitors, spending most of their time visiting elderly and aged people living alone, assessing the home circumstances of patients recommended for admission to the chronic sick hospitals, and maintaining a close liaison with the almoners at Christchurch Hospital.

The remaining health visitors undertook general duties in the community and in the local authority's schools, staffing the Infant Welfare Centres, visiting expectant mothers and young children, problem families, elderly people who were not specifically visited by the geriatric visitors, undertaking health education in schools, and by advice and example encouraging a healthy mode of life among all sections of the community.

Although the strength of the health visiting staff has been maintained, it is proving extremely difficult to increase the establishment and thereby extend health visiting activities, the visiting of old people, and the supervision of the chronic sick in their own homes. There is a great field for activity here, in accident prevention, in preparation for retirement and the use of leisure time, and in the early detection of physical and mental conditions requiring medical care.

For some years past Bournemouth has been one of the sponsoring authorities of the Health Visitor Training Course at Southampton University, and three student places are reserved for Bournemouth applicants. It is not always possible to appoint three suitable candidates, and during 1963 three students qualified as health visitors and started duty in Bournemouth, while one student commenced training.

During the year 32,500 interviews and visits were undertaken, compared with 30,159 in the previous year.

Liaison Arrangements

Liaison arrangements between the local health authority and the hospitals of the Bournemouth and East Dorset Hospital Management Committee are extremely good, and the health visitors take a prominent part in these arrangements. In addition to the health visitor link with the Chest Clinic and the Geriatric Unit at Christchurch Hospital described above, there is a health visitor liaison officer with the Paediatric Unit at Christchurch Hospital, and a similar arrangement with the Women's V.D. Clinic at the Royal Victoria Hospital.

Infant Welfare Clinics

Two health visitors attended the majority of the 21 Infant Welfare Centres held each week, discussing problems with the mothers, weighing babies where necessary and referring matters requiring further advice to the clinic doctor. The majority of clinics were attended by one of the full-time Assistant Medical Officers of Health employed by the local authority, but a number of part-time medical officers, often retired from the public health service, are called upon in emergency.

Total attendances were 46,546 in 1963 compared with 50,817 the previous year, and there were particularly heavy attendances at Winton, East Howe, Kinson, Strouden and Tuckton Clinics.

A number of these clinics are held in very unsatisfactory rented premises, and the help of the ladies of the former Bournemouth Infant Welfare Voluntary Association has been greatly appreciated, as they have carried out a wide variety of tasks, often under very trying conditions.

Mothercraft Classes

Mothercraft classes have continued both as a senior school activity, and also for expectant mothers. The ten series of classes held at Avebury and East Howe Clinics were attended by 293 mothers.

Relaxation Classes

Classes for expectant mothers were held at Avebury, Pelhams, East Howe, Pokesdown and Strouden. There were, in all, 56 courses of 10 lecture/demonstrations each, attended by 548 mothers.

Fathercraft Classes

Eight classes for fathers, chiefly those embarking on parenthood for the first time, were held at Avebury, at which 52 fathers attended.

Visits to the Elderly and Aged

During 1963 a total of 2,319 elderly and aged persons received 6,268 visits, compared with 5,275 visits to 1,194 elderly persons in 1962. The number of persons visited at the request of the Hospital Management Committee regarding their application for admission to a chronic sick bed increased from 409 to 480.

It is among this category of persons, who represent one in five of Bournemouth's population, that so much more could be done with a larger staff of health visitors. Far too many of the cases encountered have deteriorated beyond recall, to a stage where only custodial care is a solution to their problem. Friendly visiting and advice might have delayed the onset of these distressing symptoms for a considerable period, and enabled the services of other domiciliary workers, home nurses, home helps, the Welfare Services and National Assistance Departments, to be called in at a stage when their services would have been much more effective.

Special Services for Elderly and Handicapped Persons

- (a) Laundry Service. The laundry service provided draw-sheets, mackintosh sheets, air rings and covers to 65 cases, mainly persons suffering from double incontinence and on the waiting list for Christchurch Hospital. These articles were delivered to the homes of the patients three times per week, and the dirty linen collected and laundered at Christchurch Hospital.
- (b) Chiropody Service. The Chiropody service, which is available free of charge to old people, disabled persons and expectant mothers who are unable to make private arrangements, commenced in September, 1957, on the basis of one session per week, and by the end of 1963 an average of four sessions per week were held. The demand is now such that the services of a full-time chiropodist is required, and this arrangement would have the added advantage of day-time sessions, instead of early evening sessions as at present.

CHIROPODY CLINIC 1963

Number of sessions h Number of persons to Number of treatment	reated .			 	168 551 1,486
					umber of ents given
Number of persons re	" " " " " " " " " " " " " " " " " " "	2 tr 3 tr 4 tr 5 tr 6 tr 7 tr 8 tr 9 tr 10 tr 13 tr 14 tr 22 tr	reatments reatments reatments reatments reatments reatments reatments reatments reatments reatments reatments reatments reatments reatments	126 174 141 60 22 12 7 2 2 1 1 1	126 348 423 240 110 72 49 16 18 10 13 14 22 25
				551	1,486

Problem Families

The arrangements for helping problem families continued as before, and regular monthly meetings of the Family Case Committee allowed full discussion of current problems and the diversion of assistance and enquiry into the most appropriate channels.

The results of work with problem families are almost invariably disappointing to those who expect substantial improvements. Success is more often measured by the maintenance of the status quo.

Health Education

It is in the field of health education that the health visitor can, if suitably encouraged and directed, make her maximum impact. She comes into daily contact with schoolchildren and young people, with the aged, and particularly with expectant mothers, who are of all people most receptive of advice and ideas affecting the unborn child.

But the health visitor is seldom trained in salesmanship, and no matter how professionally skilled, is at a serious disadvantage when opposed to the cleverly prepared propaganda of the public relations expert. Indeed, it seems extraordinary that local health authorities should be expected to rely on amateurs for their counterblast against the millions of pounds spent on advertising commodities such as tobacco and alcohol, both of which if used to excess are known to be the cause of untold suffering.

If health education is our business, only "big business" methods will be of any avail in reducing unnecessary suffering and death.

HEALTH VISITING

Ineffective	Visits made	by H.Vs.	1	1	1	1	1	1	3,986	4,532	4,488	4,106	3,590	4,701	4,701	6,072
Visits by	culosis	visitors	1	1	1	1,401	1,607	1,525	1,297	1,562	1,532	1,791	1,877	1,953	2,026	1,712
Visits to TB house-	in "Other	Cases"		1	1	223	190	207	279	230	221	184	124	611	179	84
Other Caces	Ounci Cases	Total Visits	5,360	8,542	6,190	1,657	1,869	1,881	2,705	4,362	4,494	4,384	5,635	6,221	6,081	7,062
Children between the	ages of 1 to 5	Total Visits	12,810	12,893	11,350	11,830	11,460	11,712	12,136	11,920	11,349	10,354	8,307	12,870	11,242	12,139
Children under 1 year of age	Visits	Total	7,687	8,262	8,357	8,904	080'6	9,001	8,615	8,247	8,007	7,653	6,823	8,788	8,674	9,631
Children unde 1 year of age	Vis	First	1,674	1,601	1,598	1,642	1,592	1,496	1,483	1,513	1,645	1,609	1,609	1,688	1,861	1,849
ctant	its	Total	1,314	1,507	1,457	1,741	1,991	1,972	2,166	2,122	1,963	2,076	2,070	2,450	2,136	1,956
Expectant	Visits	First	743	608	828	806	1,100	1,047	1,117	1,162	1,156	1,130	1,114	1,260	1,132	1,131
		Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963

THE HOME NURSING SERVICE

The Home Nursing Service consisted of a Superintendent, a Senior Nurse and 25 full-time nurses at the end of 1963, and during the year 75,730 visits were made, almost identical with the 75,541 visits in 1962.

As in previous years, nearly three-quarters of the visits were to elderly and aged people, many of them confined to bed with heart disease, strokes, cancer or some other debilitating illness and involving heavy physical work on the part of the nurses. When it is remembered that home nurses are on the go in all weathers, day in, day out, it is not surprising that a certain amount of sickness occurs among them and that lifting injuries occasionally happen. That their services are greatly appreciated is evident from the number of congratulatory letters received from patients, and nobody was prouder of the home nurses than the late Mrs. A. M. Sargeaunt, who as a former secretary of the Bournemouth Home Nursing Association had been associated with them for many years. Mrs. Sargeaunt was a co-opted member of the Health Committee and died in April, 1963.

New Patients attended during 1963

In all, 3,444 patients were served during the year, of whom 2,655 were new cases, made up as follows:—

Complaint				N	o. of Cases
Tuberculosis				 	61
Respiratory system (ot	ther t	than T.B	3.)	 	208
Heart and Circulatory	syste	em		 	655
Digestive system				 	325
Reproductive system				 	75
Nervous system				 	76
Urinary system				 	94
Cancer				 	235
Diabetes				 	73
Injuries, burns, etc.				 	111
Senility				 	172
Rheumatism				 	121
Leg Ulcers and Skin c				 	155
Ear, Nose and Throat					50
Preparation for hospit				 	204
Miscellaneous condition	ons			 1	40
					2,655

The age distribution of all patients treated in 1963 was:

	130110	Pa	× 12 20		
	dies les	Male	Female	Total	Percentage
0- 4 years		9	6	15	0.44
5-14 years		14	17	31	0.90
5-24 years		36	63	99	2.87
5-44 years	beef h	60	155	215	6.24
5-64 years		235	537	772	22.42
5-74 years		314	600	914	26.54
5- years	ur .di	417	981	1398	40.59
	le al ug	1085	2359	3444	100-00

Sources of referral of new cases in 1963 were:

General Practitioners				 1	1,831
Hospitals				 	579
Personal application				 	195
Voluntary agencies	:			 	3
Health Department a	nd Ch	est Cli	nic	 	47
			in le		2,655
					2,000

During the year, 2,600 cases were removed from the register owing to:

Admission to hospital		 12.	514
Died	 	 	315
Satisfactory outcome of case	 	 	1,771
			2,600

The Nursing of Sick Children

Just more than one per cent. of patients nursed during 1963 were below the age of 14 years, chiefly for complications of infectious disease and minor medical and surgical conditions. Home nurses attended child patients on their own districts and no special arrangements were necessary.

The Treatment of Visitors

Requests for the continuation of special treatments were received on 190 occasions, and 1,380 visits were made to visitors in hotels, boarding houses and private holiday accommodation.

Injection Therapy

During the year, 32,660 injections were given to 1,354 patients, of which 9,588 were insulin injections.

Daily injections were necessary for 342 patients, and 91 patients received injections twice a day.

Late visits

The number of visits made between 8.0 p.m. and 8.0 a.m. decreased from 546 in 1962 to 429 in 1963, and were carried out by the home nurse on whose district the request arose.

At the end of the year 844 cases remained under treatment, receiving visits as follows:

 Twice Daily	Daily	Alternate days	Twice weekly	Thrice Weekly	Weekly	Fort- nightly	Monthly
3	96	34	124	60	286	120	121

A summary of the year's work and a comparison with previous years, was as follows:

		1956	1957	1958	1959	1960	1961	1962	1963
Nur	nber of patients on								
th	ne Register, 1st Jan.	723	720	777	761	679	756	766	789
Nur	nber of new patients								
	ttended	3269	3249	3054	2763	2724	2658	2547	2655
									- Caller
Tota	al number of								
pa	atients attended	3992	3969	3831	3524	3403	3414	3313	3444
Nur	nber remaining on								
th	ne Register on 31st								
D	ecember	720	777	761	679	756	766	789	844
Nun	nber of Patients								
ta	ken off the Register	3272	3192	3070	2845	2647	2648	2524	2600
Tota	al number of nursing								
vi	sits 8	30,590 8	33,6108	30,239	76,086	76,0317	78,7137	75,541 7	5,730

The illnesses of patients were classified as follows:

		1956	1957	1958	1959	1960	1961	1962	1963
Tuberculosis		 126	146	139	107	93	86	62	61
Pneumonia		 95	68	58	47	38	42	43	58
Miscarriages, etc	c.	 6	18	26	18	24	16	36	39
Carringl		 656	427	447	437	394	494	429	395
Medical		 3098	3271	3136	2892	2830	2748	2705	2855
Infectious diseas	es	 11	39	25	23	24	28	38	36
		3992	3969	3831	3524	3403	3414	3313	3444
				-					

DOMESTIC HELP SERVICE

At the end of the year the Domestic Help Service consisted of an Organiser and Assistant Organiser, one full-time and 124 part-time domestic helps, working nearly 114,000 hours in all. They served 1,468 cases, or 76 more than in 1962.

The summary of cases helped shows that each patient received an average of 77 hours service during the year, rather more than in 1962 (70.4 hours), the biggest increases in service going to aged persons and those suffering from chronic illness and tuberculosis.

The Domestic Help Service is still far short of requirements, bearing in mind the very large number of old people in the Borough and the degenerative illnesses that almost invariably afflict them sooner or later.

As the hospital service is incapable of providing for them all, the domiciliary services must do so.

SUMMARY OF CASES HELPED

Type of Case	Number	Hours spent	Percentage of Total Hours	Average hours per case
Old age	1129	85,401	75.0	75.6
Illness	228	23,442	20.6	102.8
Tuberculosis	6	1,183	1.0	197-2
Confinements	47	1,540	1.3	32.8
Mental Deficiency	12	1,439	1.3	119-9
Maternity and Child Welfare	44	756	0.7	17-2
Problem Families	2	83	0.1	41.5
TOTALS	1,468	113,844	100-0	77-6

Classification of cases served (by ages).

Under 15 years		 	44	3.0%
15-64 years		 	295	20.1%
65 years and ove	г	 	1129	76.9%
			1468	100.0%

Ambulance Service

For the greater part of 1963, the Ambulance Service maintained the tripartite arrangement that had operated for many years, but in October the St. John Ambulance Service ceased its agency arrangement, and the Borough Ambulance Service together with the Hospital Car Service provided thereafter a complete 24-hour service.

There was a slight decline in the number of patients transported, 58,652 compared with 61,293 in 1962, and the mileage similarly declined from 304,692 to 281,045.

In some respects there is an analogy between ambulance work and other emergency services such as fire-fighting, in that there is a completely uneven distribution of work over the 24-hour cycle. At times, as during certain out-patient sessions at the Royal Victoria Hospital, the Ambulance Service is strained to its limit and beyond, while at other times there is little to do.

Clearly a balance needs to be struck between over-staffing and under-staffing — the one is wasteful, the other incompetent, and there is room for still closer co-operation between the hospitals and the ambulance service if an efficient service is to be achieved at reasonable cost.

TABLE SHOWING PATIENTS CARRIED AND MILEAGES COVERED BY AMBULANCE SERVICE SINCE 1949

Year	Lo Auth	ority	St. J Assoc	ohn iation	Hosp Car S		Т	otal
rear	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage
1949	7,990	82,824	1,736	30,513	7,141	89,997	16,867	203,334
1950	11,937	100,634		31,325	7,438	82,431	21,920	214,390
1951	12,335	103,192	2,973	25,401	13,132	82,467	28,440	211,060
1952	15,340	110,424	3,160	21,391	15,639	71,425	34,139	203,240
1953	18,782	127,334	2,159	13,619	17,446	73,258		214,211
1954	20,683	127,975	268	1,228	17,353	71,456	38,304	200,659
1955	23,104	142,991	163	1,131	18,241	69,740	41,508	213,862
1956	27,409	148,584	271	1,430	18,006	72,625	45,686	222,639
1957	30,736	159,511	427	1,487	17,257	70,866	48,420	231,864
1958	31,037	157,235	557	1,264	18,441	82,911	50,035	241,410
1959	35,030	170,938	572	1,777	19,494	89,526	55,096	262,241
1960	35,275	171,315	3,808	13,295	20,385	96,220		280,830
1961	36,196	173,192	4,639	15,856	21,686	109,518		298,566
1962	35,912	176,452	4,792	15,798	20,589	112,442	61,293	304,692
1963	36,266	169,053	3,484	9,917	18,902	102,075		281,045

Radio control has continued to play a major part in reducing the mileage covered per patient, and it is commonplace for an ambulance and crew to be away from the Depot for their whole tour of duty, being directed from one calling place to another through the radio transmitter at Portchester Road.

	Ave	rage miles cover	ed per patient car	ried
Year	Local Authority	St. John Association	Hospital Car Service	Total all Services
1949	10-36	17.57	12.60	12.05
1950	8.43	12.31	11.08	9.77
1951	8.36	8.53	6.27	7.42
1952	7.19	6.76	4.56	5.95
1953	6.78	6.30	4.19	5.58
1954	6.18	4.58	4.11	5-23
1955	6.18	6.94	3.82	5.15
1956	5.42	5.28	4.03	4.87
1957	5.19	3.48	4.11	4.79
1958	5.07	2.27	4.50	4.82
1959	4.88	3.11	4.59	4.76
1960	4.85	3.49	4.72	4.72
1961	4.78	3.42	5.05	4.78
1962	4.91	3.30	5.46	4.97
1963	4.66	2.85	5.40	4.79

At the end of the year, the Corporation fleet consisted of 9 ambulances and 4 dual-purpose vehicles, maintained by a staff of a Superintendent, Deputy, 30 driver/attendants and one clerk.

A 24-hour service was maintained.

THE WORK DONE BY THE SERVICE DURING 1963 IS SHOWN IN THE FOLLOWING TABLE

	Patient	Patients Carried	Carried	Abortive	Transport of	Total	Tran	Transport	No. of
Venicles Number at	Lourneys	Accident		Service	Analgesia	Mile-	by	Rail	Staff
31.12.63)		or Emergency	Other	Journeys	Midwives, etc.	a garage	No.	Rail Miles	Rail 31.12.63 Miles
Ambulances (9)	5,269	2,145	21,863	278	3	116,855		100 15,975	-
Dual purpose (4)	1,882	191	12,097	138	1	52,198	143	20,259	32
	265	82	3,402	10	1	9,917	-1	1	Ϊ́Ζ
	5,542	1	18,902	49	1	102,075	1	1	i al
	12,958	2,388	56,264	475	4	281,045 243 36,234	243	36,234	32

Vaccination and Immunisation

Protection against smallpox, diphtheria, whooping cough, and poliomyelitis continued through the year under schemes approved by the Ministry, and general practitioners co-operated in carrying out the work. The one change in the pattern followed a recommendation by the Ministry that primary vaccination against smallpox in infants should be carried out during the second year of life instead of during the first year, owing to the smaller danger of serious complications at the later age. Wherever possible protection against tetanus is included in the programme, usually combined with diphtheria and whooping cough immunisation, and thereby avoiding the necessity of giving anti-tetanic serum if the child should subsequently receive treatment as a casualty.

Vaccination against Smallpox

1,388 persons received protection against smallpox, 1,306 by general practitioners and 82 in the local authority clinics. The total included 118 infants under the age of one year.

Immunisation against Diphtheria

A total of 3,219 children received protection against diphtheria, either as a single antigen or combined with other antigens. 982 were protected by general practitioners and 2,237 at local authority centres. During the year 77 per cent of the children under one year of age were protected.

Details follow:

			Chil	dren bo	rn in y	ears		1
	1963	1962	1961	1960	1959	1954 —58	1949 —53	Total
A. No. of children who completed a full course of Primary Immunisation in the Authority's Area (incl. temporary residents) during the 12 months ended 31st December, 1963.	753	644	45	11	5	9		1467
B. Number of children who received a secondary (reinforcing) injection (i.e. subsequently to primary immunisation at an earlier age), during the 12 months ended 31st December 1963		192	241	33	46	1226	14	1752

Vaccination against Poliomyelitis

During 1963, 2,124 persons completed a course of vaccination and 1,817 persons received booster doses.

Details of the complete vaccination programme from its commencement in 1956 to the end of 1963 are as follows:

Persons who have received four doses	10,880	
Persons who have received three doses	36,450	
Persons who have received two doses	3,896	
i.e., a total of 160,662 doses given to	51,226	persons

The 2,124 persons who completed a course of vaccination this year come within the following age groups:—

Year of Birth:	1963	1962	1961	1943/1960	1933/1942	Others
Number:	321	1076	128	207	185	207

Prevention of Illness-Care and After Care

Arrangements in force during the year included

(1) Tuberculosis

- (a) The seconding of two health visitors for full-time duty at the Chest Clinic and in domiciliary visiting of tuberculous patients.
- (b) The payment of a proportion of the salary of the almoner and occupational therapist employed at the Chest Clinic.
 - (c) Boarding out of child contacts.
- (d) Assistance in rehousing tuberculous patients by recommendation to the Housing Committee. During the year 8 cases were rehoused.
 - (e) Provision of nursing requisites.
- (f) Provision of domestic help, 6 patients receiving 1,183 hours service.
- (g) A grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect of their work in providing cash payments, extra nourishment, bedding, coal and other items for tuberculous patients and their families.
- (h) Occupational therapy for domiciliary patients, 55 cases receiving 903 visits during the year.

(2) Venereal Diseases

A health visitor attended the special clinic at the Royal Victoria Hospital.

(3) Illness generally

Provision was made at rest homes for the convalescence of patients recommended by general practitioners or hospital consultants. During the year 23 persons received recuperative holidays compared with 25 in 1962. The cost to the patient was based on income, but the majority of beneficiaries under the scheme paid little if anything. All patients who had been away in rest homes were visited on their return home by a health visitor, and almost invariably had benefited considerably in health.

Articles of sick room equipment were issued on loan as required at the request of General Practitioners or hospitals. 552 issues were made during the year, those in most frequent demand being mackintosh sheets (81), bed pans (70), commodes (111), wheel chairs (117), urinals (48), bed rings (41).

Mental Health Service

Although Bournemouth patients suffering from mental illness were admitted to Herrison Hospital in increasing numbers from early 1963, it was not until October that the Wessex Regional Hospital Board officially declared Bournemouth to be within the catchment area of Herrison Hospital, and thereafter all Bournemouth patients were admitted to Herrison Hospital and its subsidiary, St. Ann's Hospital at Canford Cliffs. In referring to this new arrangement, this is perhaps an opportunity to offer the thanks of the Borough to Dr. Atkin and his staff at Park Prewett Hospital, who for many years have given advice, treatment and support to Bournemouth patients, and in spite of the long distance between Bournemouth and Basingstoke, maintained the closest co-operation with the Borough's officers.

The present arrangement is that where possible, Bournemouth patients suitable for short-term observation and treatment, and suitable for admission to an open ward, are admitted to St. Ann's Hospital, but otherwise are admitted to the main hospital near Dorchester. This arrangement appears to have worked well and only very occasionally and then for short periods has there been any delay in arranging admissions.

There have been alterations, too, in the medical administration of Herrison Hospital, and in place of the former Physician Superintendent there have emerged a number of "firms," each headed by a senior consultant psychiatrist and each responsible for a portion of the hospital catchment area. A number of very profitable meetings have been held with Dr. A. C. Gibson, in charge of Bournemouth admissions, and an increasingly close co-operation is being achieved at all levels between hospital and local authority staffs.

Admissions to Mental Hospitals, 1963

Admissions to mental hospitals arranged by mental welfare officers of the department were 418 compared with 425 in 1962. This figure probably does not truly reflect the total hospital admissions from Bournemouth, as with the increasing frequency of informal admissions, a number of patients undoubtedly make their own arrangements.

Of the 418 cases during 1963, 169 or just over 40 per cent were informally admitted.

ADMISSIONS TO MENTAL HOSPITALS DURING LAST 9 YEARS

Year	N.D.	V.	T.	Section 11	Section 14 etc.	Section 20	Total
1955	11	166	10	2	95	42	326
1956	103	80	15	8	98	47	351
1957	98	92	12	6	77	76	361
1958	118	63	16	6	72	103	378
1959	119	28	4	3	18	201	373
1960 1.1.60— 31.10.60	125	-	10 - 10	— Mental	10 Health	196 Act	331*
Madesanies	Inf.	-	Sect. 60	Sect. 29	Sect. 26	Sect. 25	393
1960 1.11.60— 31.12.60	28		B 1.72	6	4	24	62*
1961	146		1	111	17	175	450
1962	169	19	4	93	4	155	425
1963	169		4	105	15	125	418

^{*} The new Mental Health Act, 1959, came into operation on 1st November, 1960

It will be noted by reference to the following table that admissions were spread throughout the entire age range, 10-80 plus, and that in the decades between 30-80 years there were no extreme variations in numbers admitted to hospital.

ALL PATIENTS ADMITTED TO HOSPITAL DURING 1963 Under Mental Health Act

) hear	7-10	Pers.	Males	illel e	sit in	1072	I	emale.	S	11 11	W SA
Age Group	Inf.	Sect. 26	Sect. 25	Sect.	Sect.	Inf.	Sect. 26	Sect.	Sect. 29	Sect.	Total
10-20	_	_	1	4	-	6	-	2	5	-	18
20-30	11	_	4	8	1	14	-	3	2	4	43
30-40	16	_	3	7	1	18	5	7	7	1	65
40-50	13	_	2	4	-	16	3	15	16	-	69
50-60	6	2	3	5	1	14	3	10	8	_	52
60-70	13	1	4	6	_	13	1	18	13	_	69
70-80	6	-	8	2		19	_	27	10	-	72
80+	1	_	1	4	-	3	_	17	4	_	30
	66	3	26	40	- 3	103	12	99	65	1	418

Readmissions to Mental Hospitals

Readmission to hospital due to a relapse has become increasingly common, and in 1963 accounted for 37.8 per cent of all admissions.

RE-ADMISSIONS TO MENTAL HOSPITALS

1957	Total admissions	361	Re-admissions	115	Percentage	31.8%
1958	,,	378	,,	120	,,	31.7%
1959	***	373	,,	131	,,	35.1%
1960	,,	393	,,	140	"	35.6%
1961	,,	450 425	,,	160 146	,,	35.6%
1963	,,	418	,,	158	,,	34.4%

Drug therapy has become an increasingly important part of the regimen of a mental hospital, leading in many cases to spectacularly successful results, but freedom from relapse is very often dependent on the continuation of treatment for months or years following discharge from hospital. Conversely, a great many relapses requiring rehospitalisation are avoidable and are simply due to the failure of the former hospital patient to continue a regular and systematic course of treatment following discharge.

Many relapses occur in people living alone, or in people lacking

support from relatives or friends, and although such persons are priority cases for aftercare, the social workers' visits are perforce too infrequent to provide a really adequate safeguard.

As with the solitary aged person, the lonely ex-mental patient is very vulnerable indeed and poses a problem that has so far defied solution.

Mental Welfare Officers

There were two full-time and two part-time mental welfare officers maintaining a 24 hour a day service in the admission of patients to hospital, their documentation and travel arrangements. In addition, they made arrangements for the safe keeping of patients' possessions where necessary, kept Receivership accounts, and one of the full-time officers was responsible for the routine visiting of mentally subnormal patients and ordering supplies for the hostel.

Mental Social Workers

The staff of social workers consisted of a senior psychiatric social worker, employed half-time on community care and half-time at the Child Guidance Centre, a psychiatric social worker employed full-time at the Child Guidance Centre, and three social workers employed full-time on community care. All worked under the day by day supervision of the Senior Medical Officer for Mental Health, an experienced psychiatrist.

Following Bournemouth's association with Herrison and St. Ann's Hospitals, it has been possible to develop a closer liaison between the social workers and the hospital staff, at case conferences and by attendance at psychiatric out-patient sessions, and as the social workers also maintain contact with the patient's family doctor, the patient's aftercare receives most careful consideration. The difficulty, as explained above, is that limitation of staff precludes the frequent (often almost daily) visits that are necessary to prevent a relapse in certain cases.

Mental Hostels

"Beaufort House", the first mental hostel established by the Borough, was opened to patients in January 1963, and work proceeded on the adaptation of a second hostel, "Wallfield".

From the outset, there were enormous practical difficulties, primarily those due to staffing, and the extreme reluctance of

suitably trained staff to undertake rehabilitative work among former mental hospital patients would appear to severely limit future hostel development.

Basically, the objections of potential staff appear to be towards residential employment in a small unit where they cannot have fixed hours of duty, where their quarters are cheek by jowl with the patients' quarters and they cannot really get away from them, and where arrangements for off-duty relief are not always easy to maintain. Most of these objections are absent from hospital employment, but even in hospitals it is becoming increasingly difficult to maintain a resident staff (except in staff houses) and perhaps the real reason is that so many posts are available nowadays with "office hours" that short of offering a salary far in excess of any hitherto considered, there will always be a staff shortage.

The second basic difficulty is in the selection of patients to be admitted to a hostel. Mental hospitals are in general overfull and contain large numbers of patients fit for discharge into the community to a sheltered environment, and therefore on the face of it, very suitable candidates for a hostel. But among these are many middle-aged "chronics" who would tend to remain in the hostel until the day they die, others who are mildly anti-social and a potentially disruptive element in the hostel, and comparatively few where there is a real chance of rehabilitation, where the hostel could be used in its proper function of a "half-way house" and where the patient could be absorbed into the wider community within three to six months.

For these two main reasons, staffing difficulties and the acceptance only of suitable cases, only 15 patients were admitted to "Beaufort House" during the year, and with 7 discharges there remained 8 patients at the end of the year.

It is difficult to visualise the future of mental hostels, and in the light of Bournemouth's experience, which appears to be similar to that of other local authorities, some urgent rethinking of the problem at Ministry level is required.

Mental Subnormality

During the year 11 new cases of mental subnormality were reported, 7 of them being children who were reported by the Education Authority as being unable to benefit from education in normal schools.

The position at the end of the year was that 366 cases of mental subnormality were on the authority's registers, as follows:—

*	In hospitals									160
	Attending the T	urner	Training	Centre	and	living at	home			91
	Attending the T	urner	Training	Centre	and	living in	Local	Autho	ority	
	Hostel			7						4
	Under Guardian	nship								5
	Living at home		Tetter			1				106
										366

^{*} The majority of cases in hospital (approximately 130) were at Coldeast and Tatchbury Mount Hospitals.

Fourteen persons suffering from mental subnormality were admitted to hospital during the year, two to Coldeast Hospital, four to Tatchbury Mount Hospital, two to Coldharbour Hospital two to Kenton House Nursery Home, one to Moss Side Special Hospital, one to St. Mary's Home, Alton, one to Christchurch Hospital and one to Herrison Hospital. Eleven of these cases were admitted informally, two were admitted under Section 60 of the Mental Health Act, and one under Section 65, after an appearance before the Bournemouth Magistrates.

In addition, eleven persons were admitted to hospital for short periods in order to give their parents a short period of freedom from worry, or a holiday.

Two deaths were notified among mentally subnormal persons, both in hospital.

At the end of the year fourteen cases (eight male and six female) awaited urgent hospital admission, and there were seven less urgent cases on the waiting list.

Arrangements for training mentally subnormal children and adults in the community

During the year the Turner Training Centre continued to provide training and rehabilitation for 95 persons who were on the register on 31st December. Of this number, six were not subnormal, but were convalescent following mental illness, and were admitted to the Centre on the recommendation of Dr. G. J. Bell, Senior Medical Officer for Mental Health.

	Ma	les	Fem	ales	
No. of children in attendance	Under16	Over 16	Under 16	Over 16	Total
Male Section	1	29	-	-	30
Female and Junior Section	20	, -	18	27	65
Totals	21	29	18	27	95

As before, mid-day meals were provided through School Meals Service arrangements, and two special buses brought a large proportion of the children from "picking-up points" reasonably close to their homes. An ambulance was also used for those children suffering from physical or other handicaps requiring special travel arrangements.

The numbers attending the Centre have been gradually increasing, and a few carefully selected cases referred by the Psychiatric Clinics have also been given periods of training, with some success.

Open days, exhibitions and sales of work, and the annual sports day have given not only the Health Committee, but also a considerable number of parents and members of the public an opportunity of seeing what improvement can be achieved by skilled and sympathetic handling of the children, and the staff are to be congratulated on their year's work.

Nursing Homes

At the end of the year 36 nursing homes were registered by the local authority, two fewer than in 1962. Accommodation was provided for 10 maternity and 491 medical and surgical cases.

Bournemouth Crematorium

Since the opening of the Crematorium in 1938, there has been a steady increase in this method of disposing of the dead, the yearly totals being:

1938	 	 229
1939		 384
1940		 514
1941	 	 557
1942	 	 584
1943	 	 693
1944	 	
1945	 * *	 708
	 	 742
1946	 	 834
1947	 	 1026
1948	 	 1012
1949	 	 1155
1950	 	 1306
1951	 	 1484
1952	 	 1472
1953	 	 1681
1954	 	 1770
1955		1991
1956		 2142
1957	 	 2207
1958	 	 2340
1959	 	 2472
1960	 	
	 	 2609
1961	 	 2648
1962	 	 2873
1963	 	 3171

An analysis of the statistics for 1963 showed that 45.8 per cent. of applications for cremation came from within the Borough, while 54.2 per cent. were received from other areas.

The Medical Officer of Health is the Medical Referee to the Crematorium, and in an emergency has two deputies authorised by the Home Office, the Deputy Medical Officer of Health and a retired Assistant Medical Officer of Health.

NATIONAL ASSISTANCE ACT, 1948, Section 47

Action was taken under this section of the Act in one case during the year, brief details of which were :—

Miss E. McL. Aged 87. Living under unhygienic conditions—her sole companion an aged retainer who had to be admitted to a Mental Hospital. Admitted to Christchurch Hospital under a Magistrates' Order and subsequently transferred to an Old Persons Home.

NATIONAL ASSISTANCE ACTS, 1948 - 1951 — INCIDENCE OF BLINDNESS

The registration of blind persons and the provision of welfare services for this category of disabled persons is carried out by the Welfare Services Committee, and the following information in respect of new registrations has been supplied by the Director of Welfare Services:

(i) Number of cases regis-		Cause of	Disability	
tered during the year in respect of which para. 7(c) of Forms B.D.8 recommends:—	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	7	- 0	Kent was	19
(b) Treatment (Medical Surgical or Optical)	29	12	-	19
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	21	10	A STATE OF THE STA	19

Public Health Laboratory Service

REPORT BY Dr. G. J. G. KING, DIRECTOR OF THE BOURNEMOUTH LABORATORY

SPECIMENS RECEIVED FROM BOURNEMOUTH, 1963

Public Health Department

Bloods		 	 25
Faeces and uri	ne	 	 1,533
Nose and throa	at	 	 14
Other human		 	 1
Food and shell	fish	 	 162
Ice-cream		 	 200
Milk		 	 392
Water		 	 658
Other sanitary		 	 151
Veterinary		 /	 1

3,137 c.f.

			3,137 b.f.
General Practitioners			3,12. 3.j.
Faeces and uri Nose and throi Sputa Other human Food and shell	at	120 25 6 32	
Other sanitary		2	107
Bournemouth Chest C		2,019	187
Pleural fluids Sputa: Direct Cultur Urine Other human		73 548 21	2664
		The last track	2,664
Royal National Hospi	tal		
Gastric lavage Laryngeal swale Pleural fluids Sputa: Direct Cultur Urine Other human	bs t	23 604 27 23 497 31	To redenant file
			1,209
Herbert Hospital (up			
Laryngeal swab Pleural fluids Sputa: Direct Cultur		144 35 10 715	904
		11016 - 11 - 11	904
Royal Victoria Hospit	al	1 0 0	
Faeces Phage typing Pleural fluid Other human Biological Water		15 320 1 16 6	
.,		Think and the	359
		Total	8,460

REPORT BY A. J. MORTIMER, METEOROLOGICAL REGISTRAR

1963 Summary

1962 was the third coldest year of the century, with a mean temperature of 48.5 degrees, but 1963 now has the doubtful honour of equalling the lowest recorded mean temperatures in Bournemouth, with a figure 0.5 degrees below that of last year. The severe weather of January, which had the lowest mean temperature since records were taken, with snow cover for the entire month (another record) was followed by the second coldest February on record, with renewed blizzards and all the inconveniences of frozen mains. A more normal windy March followed, although temperatures were still low. Spring was late and slow in coming, with April still cool and sunshine below normal, followed by a cool May, although sunshine figures did climb back to just above average.

The first ten days of June were brilliantly sunny and warm, but then the weather broke, the remainder of the month being exceptionally wet and lacking in sunshine. July opened badly, but the last two weeks saw a return to real holiday weather, raising hopes which were soon dashed as August turned out to be the second wettest of the century, with 5.60 inches of rain. A reasonably good calm and mellow September followed, and like the year before, October produced some of the pleasantest weather conditions of the year. Rain, 7.75 inches of it, was November's outstanding contribution, but it was mild. December adjusted the balance with less than normal rainfall and very cold but dry and sunny conditions, particularly in the period before Christmas.

SUMMARY

Highest temperature recorded	 79° on 10th June
Lowest temperature recorded	 12° on 25th and 26th January
Greatest fall of rain in one day	 1.58 inches on 3rd August
Total rainfall	 35.21 inches (average 31.21 inches)
Total sunshine	 1578-4 hours (average 1709-9 hours)
Number of days with sunshine	 294
Number of days with rain	 180
Mean temperature	 48.0° (average 50.9°)

BOURNEMOUTH CLIMATOLOGICAL STATION

Latitude 50° 44' N. Longitude 1° 53' W. Height above Mean Sea Level 130 ft.

TABLES OF TEMPERATURE, SUNSHINE AND RAINFALL

1. TEMPERATURE (Degrees Fahrenheit)

		Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	::	41.0	41.3	44.3	48.5	53.7	59.3	62·7 59·2	62.4	58.4	52·1 53·3	45.5	41.7
Absolute Maximum Date	::	40 26th	43 28th	55 18th	62 23rd	78 31st	79 10th	78 22nd	73 1st	70 16th	62 23rd	60 10th	52 2nd
Absolute Minimum Date	::	12 25/26	19 2nd	27 1st	31 13th	37 4th	47 27th	46 27th	44 29th	44 13th	40 14th	32 21st	22 23rd
Mean Range	:::	10.0	7.7	10.7	11.5	14.0	12.5	11.9	12.5	12.3	9.6	9.3	9.5

Mean Temperature for 1963 — 48·0

Average (Air Ministry) — 50-9.

2. SUNSHINE (Hours)

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	62.3	79.2	137.3	175.5	213.6	229·8 194·8	210·8 228·0	203·1 167·8	151.8	115-3	71.7	59.5
Average per day (1963)	2.7	2.7	4.2	4.0	7.2	6.5	7.3	5.4	4.7	2.5	2.4	2.1
Highest amount in one day Date	7.7 18th	9.6 28th	9.8 1st	11.9 22nd	14·4 25th	15·2 11th	14.7 27/28	11.8 1st	11·4 12th	9.5 4th	6.7 3/8th	7.0 21st
Days with sunshine	20	17	27	27	27	27	30	29	27	20	22	21

Total for 1963 — 1578-4.

Average (Air Ministry) - 1709-9.

3. RAINFALL (Inches)

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	3.56	3.56 2.28 0.63 1.60	3.96	2.00	1.90	1.56	2.22	2.47	2.50	3.46	3.74	3.46
Daily Average	0.05	90.0	0.13	0.11	0.03	0.12	0.05	0.18	60.0	0.07	0.25	0.05
Greatest fall in one day Date	.35 2nd	.44 14th	.57 17th	.62 15th	·21 14th	1.06 28th	.67 6th	1.58 3rd	.90 1st	·87 30th	.97 18th	.43 25th
No. of days with rain	7	10	15	20	15	17	11	19	12	15	25	14

Total for 1963 — 35-21

Average (Air Ministry) - 31-21.

Water Supply

The entire Borough, except for that part of Southbourne east of Irving and Clifton Roads, is served by the Bournemouth and District Water Company, the remainder by the West Hampshire Water Company. Throughout the year, both supplies have been satisfactory, both as regards quantity and quality, and 296 samples were submitted to the Public Health Laboratory by the district public health inspectors from the mains supplies, with completely satisfactory bacteriological results.

The bulk of the water supplied to the Borough is drawn from local rivers, particularly the Avon, and there is no traceable content of fluoride in the water as supplied.

I am indebted to the General Manager of the Bournemouth and District Water Company and to the Chief Engineer of the West Hampshire Water Company for the following information:—

		Bournemouth and District Water Co.	West Hants Water Co.
(a)	Quality and quantity of water supply throughout the year.	Satisfactory.	Satisfactory.
(b)	Number of bacteriological examinations of raw water made during the year.	254	313
	Results: Probable number of B. Coli organisms per 100 ml.	Varied from 170 to 140,000	Varied from 20 to 18,000
	Number of samples taken of water going into supply	365	365
	Results:	Standard. All bacteria absent samples.	istry of Health coliform type from 100 ml.
(c)	Plumbo-solvent action	None.	
(d)	Action taken in respect of any form of contamination	(other than	on was necessary sterilisation of following repair).
(e)	Number of dwelling houses supplied from the public water mains (i) direct to houses	44,828	6,370
	(ii) by means of stand-pipes	None	None

THE BOURNEMOUTH AND DISTRICT WATER COMPANY WATER ANALYSIS

B. Coliform P.N. in 100 n	-1				0
				 	 0
Agar Cultures 24 hours at				 	 1
,, ,, 48 hours at				 	 1 4
,, ,, 72 hours at				 	 Absent fro
				 	 100 ml
Colour (Burgess Scale)				 	 11
Filtrability Index				 • •	 7.70
pH	2000			 	 7.79
Electrical Conductivity at Residual NH2CL	20 C			 • •	 420
Residual NH2CL				 • •	 0.10
D 1 1 D D 14					
Results in P.P.M.					
Chlorine in Chlorides				 	 17.0
Nitrogen in Nitrates				 	 3.0
Nitrogen in Nitrites				 	 0.02
Free Ammonia				 	 0.07
Ammoniacal Nitrogen				 	 0.06
Albuminoid Ammonia				 	 0.09
Albuminoid Nitrogen				 	 0.07
Oxygen Absorbed (4 hours	s at 37	°C)		 	 0.84
Dissolved Oxygen				 	 9.3
Free Carbon Dioxide				 	 6.0
Alkalinity as CaCO3				 	 196.0
Silica as SiO2				 	 11.0
Phosphates as P2O5				 	 0.34
Iron as Fe				 	 0.03
Suspended Solids				 	 _
Total Dissolved Solids				 	 282-0
Total Hardness				 	 232.0
Carbonate Hardness				 	 196.0
Noncarbonate Hardness			6	 	 36.0

THE BOURNEMOUTH AND DISTRICT WATER COMPANY

MINERAL ANALYSIS — Parts per Million Sample: Bournemouth Town Supply

Ca	Mg	Na	K	CO3	SO4	CL	NO3	SiO3	Probable Combi	nations
78·40 8·34 2·06	2:44	4·05 4·95 1·43	2.10	117-60					Calcium Carbonate Sulphate Chloride Nitrate Magnesium Carbonate Sulphate Chloride Nitrate Sodium Carbonate Sulphate Chloride Nitrate Silicate Potassium Carbonate Sulphate Chloride Nitrate Silicate Potassium Carbonate Sulphate Chloride Nitrate Silicate Sulphate Chloride Nitrate Silicate	196·00 28·34 5·71 9·56 10·28 18·25 3·79
									Other Silicates as Si02 Ferric Oxide	7·50 0·04
										283-62
			Tot	al Soli	de Dr	ied a	+ 180	°C		282-00

THE WEST HAMPSHIRE WATER COMPANY ANALYSIS

WEST HANTS WATER, MAINS WATER, RIVER AVON DERIVED

Chemical Results in Parts per Million.

Appearance: Bright and clear

Nil

pH:

Colour:

7.6

Electric Conductivity: 435 Chlorine present as Chloride: 19

Free Carbon Dioxide: 10

Turbidity : Nil

Odour: Nil

Dissolved Solids dried

at 180°C.: 290 Alkalinity as Calcium

Carbonate: 200

Hardness: Total: 260 Carbonate: 200

Non-carbonate: 60

Nitrate Nitrogen: 4·1 Nitrite Nitrogen: Absent
Ammoniacal Nitrogen*: 0·007 Oxygen Absorbed: 0·80

Albuminoid Nitrogen*: 0.048 Residual Chlorine: Absent

Metals: Iron, Copper, Lead, Zinc, - Absent

* to convert to Ammonia multiply by 1.21.

SEWERAGE AND SEWAGE DISPOSAL

The Borough Engineer has kindly supplied me with the following information:—

Work has continued on the main drainage programme for the Winton area, both on the construction of relief sewers and the Sewage Purification Works at Holdenhurst and Berry Hill. It is clear that diversion of the sewage flow from the Winton area away from the sea outfalls and to the Purification Works cannot be completed until the summer of 1964.

The foul sewerage system for Wick Village is now nearing completion and by June of 1964 transfer from cesspool to main drainage will be possible for the properties in that area.

A flooding point in Christchurch Road has been removed by the completion of a length of surface water sewer near Iford Roundabout.

Proposals for the diversion of all sewage from sea outfalls have been put to the Ministry in principle and design work for the first of the contracts is well under way. The actual construction programme will probably not be commenced before April of 1965.

ENVIRONMENTAL HYGIENE

Report by Jack Randall, M.R.S.H., Chief Public Health Inspector

From the following pages it will be seen that, in spite of some staff shortages and new responsibilities in connection with the inspection of houses in multiple occupation and hairdressing establishments, a considerable volume of work was maintained.

Thanks are due to the staff, both inspectorial and clerical, for their efforts which have been greatly valued by me in my first year of office as Chief Inspector.

Inspections and Visits

Water			
To obtain samples of water for chemical and bact	eriolog	ical	
examination			443
Food Supply			
			1 201
Hotel and Boarding House kitchens			1,391
Cafes and Restaurants			524
Factory Canteens			23
School Feeding Centres			75
Bakehouses			200
Food Preparation Premises			181
Shops re sale of food			2,200
Stalls and street vendors' vehicles			63
Dairies and milkshops for milk samples			729
Shops for other food and drugs samples			285
Dairies and milk distribution premises			397
Pasteurising plants			65
Premises used for the manufacture of ice cream			35
Premises used for the storage and sale of ice cream			329
Meat markets and cold stores			91
Atmospheric Pollution			
			56
			114
Visits to premises			117
Housing Conditions			
Primary inspections of dwellinghouses (under Public H	ealth /	\ct	
			228
1936 and Housing Act, 1957, etc.)			1,262
Subsequent inspections of dwellinghouses	1061)		723
Houses in multiple occupation (Housing Acts, 1957 and			50
Overcrowding	1057)		12
Applications for certificates of disrepair, etc. (Rent Act,			
Caravan dwellings			180
Occupational Conditions			
Factories			552
Homes of Outworkers			15
Shops re Shops Act, 1950		1000	186
Other business premises (Young Persons (Employment)	Act et	c)	149
Other business premises (1 bung reisons (Employment)	race, ce		1-13

Infectious Diseases						
Primary visits after notification						69
Subsequent visits						66
Contacts					- 1	202
Food poisoning						83
Took poisoning.		Contract to				
General Sanitary Conditions						
			4			
Cemeteries, exhumations, etc.						4
Cesspools						50
Hairdressing establishments						275
Holiday accommodation						136
Noise Nuisances						178
Nuisances other than the above						1,796
Nursing homes, day nurseries, etc.						8
Offensive trades						8
Paddling Pools						60
Pet Shops						61
Piggeries and swill-boiling plants						22
Places of Entertainment						62
Premises for the examination of d	rains					
Old Buildings						1,929
New Buildings						740
Private Sanitary Inspections						65
Public Conveniences						84
Rag flock and other filling materia						7
Rat infestation						2,260
Refuse accommodation						243
Sale of Poisons		4				82
Curimming baths						173
Verminaus premises				100		101
Water courses						29
Missellaneous						1,068
Miscenaneous						1,000

Food Supply

The responsibilities of a local authority, such as Bournemouth, in protecting the public from food-borne diseases and ensuring that food sold is safe, clean and properly described are considerable. A large part of the public health inspector's work in the field is spent with this end in view.

Regular sampling enables the authority to maintain a constant check on the fitness for human consumption of foods sold or served. It also provides an opportunity to seek out cases of adulteration or misleading descriptions, and to control the addition of colouring matters or preservatives, some of which, although in use a few years ago, are now prohibited, having been suspected or proved capable of causing illness in the consumer.

The importance of this work should not be minimised; nevertheless it is generally recognised that outbreaks of food-borne disease are often the result of unhygienic practices on the part of food-handlers.

Much time is spent therefore in visiting various types of food premises to ensure that the requirements of the Food Hygiene (General) Regulations, 1960 are fully observed. These regulations set out the standards required as to construction and cleanliness of premises, the equipment used, and the good conduct of food-handlers.

In Bournemouth, generally speaking, good co-operation exists between food traders and the local authority, and standards of hygiene in food premises are for the most part of a high order. There is, however, no room for complacency in a holiday resort, where many catering and food businesses are to a large degree, dependent upon the custom of visitors.

If national figures for food poisoning are to be substantially reduced, a positive approach to food hygiene on the part of local authorities, managements, food-handlers and the general public is essential.

During the year, the Public Health Inspectors made 5,574 visits to the 1,568 catering establishments and 815 other food premises. 140 written notifications were sent drawing attention to contraventions of the Regulations, and these, in the main, were speedily complied with, as were many verbal notices and recommendations. In no case was it necessary to institute legal proceedings to secure compliance with the authority's requirements. Legal proceedings were taken against two food-handlers observed by the District Inspector to be smoking whilst handling open food. These cases were heard before the Court early in 1964, both defendants being fined £10.

To augment inspections of food premises during the months of July, August and September two additional public health inspectors were engaged on a temporary basis.

Meat Inspection

The Minister of Agriculture, Fisheries and Food introduced the Meat Inspection Regulations 1963 in July, 1963, and they became operative on the 1st October, 1963.

In general terms the Regulations establish a comprehensive and detailed system of inspection for all meat at slaughterhouses and permit local authorities to charge for the inspection service. In addition, meat passed by a Council's officer as fit for human consumption is required to be marked as such in a manner as to enable the inspecting officer to be identified.

There are no slaughterhouses within the Borough, but the necessary arrangements for meat marking have been made to deal with carcases, affected by a cystic condition, which, from time to time, may be received in the local cold stores from slaughterhouses in other areas. These carcases locally infested with "cysticercus bovis" may be released for human food only after periods of cold storage at not more than 20°F. for three weeks, or not more than 14°F. for two weeks. It is not possible, therefore, for inspectors at slaughterhouses to mark such meat as fit if the cold storage treatment is to be carried out in an area outside that of their own authorising Council.

It is therefore incumbent on the authority in whose area cold stores are situated to ensure the final inspection and marking of all carcases treated in those premises. Four inspectors were authorised by the Council to carry out this work when necessary and numbered stamps designed in accordance with the Regulations have been provided for their use.

Milk Supplies

All milk sold in the Borough during 1963 was of the following special designations as required by the provisions of the Milk (Special Designations) (Specified Areas) Order 1952:—

- "Pasteurised" and "Tuberculin Tested (Pasteurised)"
 Milk bottled at two pasteurising plants in Bournemouth and at two in Poole.
- 2. "Sterilised" Milk processed and bottled in Bristol.

Over 460 visits were made by the Public Health Inspectors to supervise the processing and distribution of milk at the two licensed pasteurising plants and 383 registered dairies and milk shops in the Borough.

386 samples of designated milk were submitted to the Public Health Laboratory and all passed the prescribed tests, except one of Pasteurised milk, which failed the Methylene Blue Test. Following investigations at the plant concerned, satisfactory repeat samples were obtained.

During the year 28 shopkeepers were licensed to sell designated milks, as follows:—

**	Pasteurised	"				 28
**	Tuberculin	Tested	(Paster	urised)'	,	 14
66	Sterilised "					 11

The Milk (Special Designations) Regulations, 1963, were introduced during the year but the changes in designations which they will bring about will not be effective until 1964.

Apart from the thousands of milk bottles which are left by thoughtless holiday-makers and others in the New Forest, on the Purbeck Hills and elsewhere, many are contaminated by paint, cement, paraffin and other noxious substances by irresponsible persons. Many are eventually returned to the dairy. Although the bottle washing machines at the two local bottling plants are modern and well manned by vigilant operatives, there is always the risk of a contaminated bottle reaching the consumer. The general public could greatly assist in ensuring that empty milk bottles are rinsed immediately and not misused.

Ice Cream

The number of premises registered for the storage and sale of ice cream is now 626, nine new premises having been registered during the year. Three premises are registered for the manufacture of this commodity.

Of the 211 samples of ice cream taken for examination at the Public Health Laboratory, 135 were placed in Grade I, 35 in Grade II, 23 in Grade III and 18 in Grade IV.

Grades I and II are deemed to be satisfactory; but where a series of samples from the same supply fall within Grades III and IV, the bacteriological quality of the ice cream is considered suspect and a full investigation is carried out.

The relatively high percentage of unsatisfactory samples was due, in part, to the high proportion taken as sold loose from bulk containers, as against "prepacked". The risk of contamination from imperfectly sterilised "servers" is ever present when ice cream is sold from bulk. Samples of ice cream sold in this manner mainly from stalls, cafes and restaurants revealed faulty technique in serving. After instruction of the vendors by the Public Health Inspectors, repeat samples were generally found to be satisfactory.

Samples of prepacked ice cream almost invariably fall within Grades I or II.

Prepared Foods

There are in the Borough 127 premises which are registered for the manufacture of meat or fish products.

181 visits were made to such premises during 1963. 47 samples of meat and fish products were submitted for bacteriological examination at the Public Health Laboratory and all were found to be satisfactory.

Bacteriological Examination of other Foods

49 samples of a variety of foodstuffs, including ice lollies, shell-fish, cream cakes, trifles, jellies and tinned goods were submitted to the Public Health Laboratory and were all reported free from harmful organisms.

Foodstuffs Condemned

The Public Health Inspectors condemned the following amounts of food during the year :—

Description		Tons	Cwts.	Qtrs.	Lbs.
Fish			5	_	19
Meat		 1	15	2	20
Tinned Goods		 4	6		16
Other Foods			14	3	13
	Total	 7	1	3	12

2203 Condemnation notes were issued.

Adulteration of Food and Drugs

(a) Milk. Three District Public Health Inspectors sampled 343 bottles of milk in the course of retail distribution and submitted them to the Gerber Test, as follows:—

" Pasteurised " Milk		 133
"Tuberculin Tested (Pasteurised)	" Milk	 68
"Channel Islands" Milk		 119
"Sterilised" Milk		 11
" Homogenised " Milk		 12

All were found to comply with the prescribed standards, with one exception. In this case, six other bottles from the same batch were found to be satisfactory.

(b) Other Food and Drugs. 285 samples of food and drugs were taken by the Public Health Inspectors and sent to the Public Analyst. Particulars are as follows:—

	FORMAL	SAMPLES	INFORMAL	Total	
	Found to be genuine	Found to be adulterated	Found to be genuine	Found to be adulterated	Samples Samples
Food	14	9	206	4	233
Drugs	27	_	25	-	52
TOTAL	41	9	231	4	285

Thirteen of the samples analysed were found to be adulterated, a percentage adulteration of 4.56.

During the past five years, the incidence of adulteration has been as follows:—

	1959	1960	1961	1962	1963
No. of samples taken	 290	188	271	181	285
No. of samples adulterated	 12	7	19	11	13
Percentage adulteration	 4.1	3.7	7.0	6.1	4.56

Details of the adulterated samples and of the action taken with regard to them are set out in the following statement:—

		Formal Samples	
Ref. No.	Sample	Nature of Adulteration	Action taken
47	Buttered Bun	Not Butter	Warning letter sent to Vendor.
45	Buttered Scone	Not Butter	Warning letter sent to Vendor.
144)			
145	Cream	Contained artificial	Warning given to Ven-
146 147	Doughnuts	cream	dor after investigation.
809	Hot Milk	Deficient in solids not fat; contained added water	
810 811	Hot Milk	Deficient in fat and solids not fat; con- tained added water	milk heated by steam injection.
		Informal Samples	
42	Sparkling Sugar Free Beverage	Contained excess Benzoic Acid	Formal sample taken, and found to be genuine
67	Self Raising Flour	Contained Drug Store Beetle	Warning letter to occ- upier of shop after full investigation
225	Cream Bun	Contained no butter fat	Formal sample taken
223	Butter Candy Fudge	Not more than 10% of fat was butter fat. (Fat content 9%)	Formal sample to be taken.

It is appropriate at this point to mention that Mr. F. A. Lyne ended a period as Public Analyst at the end of the year and to express appreciation of his co-operation and help during his association with the Department.

Atmospheric Pollution

During the year 56 observations were made of industrial and commercial chimneys and 14 contraventions of Section 1 of the Clean Air Act relating to the emission of dark smoke were detected. Fourteen smoke nuisances were dealt with and abated after informal action.

New furnaces and chimneys

The provisions of Section 3 of the Clean Air Act, 1956, require that all new industrial furnaces shall be smokeless as far as practicable; also that prior notice of intention to install such furnaces shall be given to the Council. Furthermore, Section 10 of the Act requires that new chimneys subject to certain exceptions, shall be sufficiently high to ensure that no nuisance will arise from the smoke, gases, etc. emitted from them. The heights of 12 proposed industrial chimneys, as shown on plans submitted for Byelaw approval were accepted as sufficient without amendment. In two other cases, the proposed heights were increased by the Architects concerned before approval was given.

Daily recording of atmospheric pollution

1963 was the first complete year during which the Department assisted in the National Survey of Air Pollution, conducted by the Department of Scientific and Industrial Research. A large number of stations, usually in public health departments, laboratories and schools, has been established throughout the country and daily readings are taken using standard equipment and apparatus.

The process involves the passage of a measured quantity of air through a filter paper and a dilute hydrogen peroxide solution, both of which are changed daily. Particles of suspended solids are trapped in the filter paper and, by the use of a reflectometer, the density of the resultant smoke-stain can be measured and subsequently expressed as smoke contamination in microgrammes per cubic metre of air. Sulphur dioxide in the air, on being drawn through the Hydrogen Peroxide, is converted into sulphuric acid. Subsequent titration with Sodium Tetraborate and the application of an appropriate formula gives a result which indicates the sulphur content of the atmosphere in microgrammes per cubic metre.

The results are recorded daily and sent to the Department of Scientific and Industrial Research at monthly intervals in accordance with agreed practice and on a standard form. Collation and interpretation of results are carried out at the Research Laboratory on a national basis.

The three stations in the Borough are so sited as to provide an indication of pollution in varying degrees having regard to the character of the buildings in the area in which each is placed. The daily readings and estimations are carried out by the public health inspectors.

The charts shown hereunder indicate a position very much to be expected. In the Pokesdown area the higher proportion of industrial premises, using coke or oil burning plant, accounts for the somewhat higher sulphur content in the atmosphere, whilst the reduction in smoke pollution in the Cunningham Crescent area during the summer months well illustrates the effect of coal fires in an area developed predominantly for housing purposes.

Figures to enable an accurate comparison between cities and towns throughout the country are not available, but it is clear from the limited information provided that Bournemouth is one of the cleaner areas.

I. SMOKE — POLLUTION EXPRESSED IN MICROGRAMMES PER CUBIC METRE

		ephen's oad	Morle	y Road	Cunningham Crescent		
	Average Density	Highest Density Recorded	Average Density	Highest Density Recorded	Average Density	Highest Density Recorded	
JANUARY	125	371	146	265	150	313	
FEBRUARY	95	175	120	224	132	349	
MARCH	49	103	68	127	80	211	
APRIL	37	72	51	98	41	105	
MAY	15	41	21	37	19	46	
JUNE	19	36	14	37	17	43	
JULY	20	50	12	41	10	26	
AUGUST	12	28	12	24	13	29	
SEPTEMBER	30	48	24	41	23	47	
OCTOBER	31	102	33	103	45	178	
NOVEMBER	55	282	55	208	83	257	
DECEMBER	134	424	155	292	198	452	

II. SULPHUR — POLLUTION EXPRESSED IN MICROGRAMMES PER CUBIC METRE

		St. Stephen's Road		y Road	Cunningham Crescent		
	Average Density	Highest Density Recorded	Average Density	Highest Density Recorded	Average Density	Highest Density Recorded	
JANUARY	186	349	281	452	215	388	
FEBRUARY	139	187	212	386	180	316	
MARCH	75	147	111	257	104	139	
APRIL	73	108	113	202	105	223	
MAY	55	111	140	283	101	306	
JUNE	65	167	168	329	86	136	
JULY	60	128	186	405	116	210	
AUGUST	48	93	163	230	84	155	
SEPTEMBER	53	80	148	271	103	295	
OCTOBER	61	118	96	211	153	285	
NOVEMBER	57	121	100	205	139	387	
DECEMBER	130	235	156	307	226	656	

Housing

The number of houses found to be unfit having regard to the standard laid down in Section 4 of the Housing Act, 1957, showed an increase over that of 1962. It is of interest to note that, of the fifteen dwellings represented to the Council as unfit and incapable of repair at a reasonable cost, in only one case was the owner prepared to consider the repair of the property. It has been found that owners of such worn-out houses usually present no opposition to the making of Demolition Orders, preferring the resultant cleared site, available for re-development, to the retention of a property occupied by the sitting tenant perhaps at a controlled rent.

As in many other parts of the country, unfit houses in Bournemouth are seldom found to be capable of repair at a reasonable cost and this situation will doubtless prevail as long as the present legal standard remains in force.

Summary of Action Taken	
Number of houses inspected for housing defects	348
Number of visits made for the above purpose	1,355
Repair	
Number of houses found to be defective	146
action	148
formal notices under the Public Health Act, 1936	
(a) by owners	8 2
Demolition and Closure	
Number of Demolition Orders made (Housing Act, 1957 Section	12
Number of Closing Orders made (Housing Act, 1957 Section 18)	12
Number of cases where an Undertaking not to use for human	
habitation was accepted	2
Certificates of Disrepair	
Inspections made in connection with applications for issue or	
revocation of certificates	12
Land Charges Enquiries	
A total of 5,682 enquiries concerning various properties r	eceived
attention during 1963.	
graduate continue of the contract contract of the contract contract of	
Houses in multiple occupation) BT
Number of visits made to houses in multiple occupation	723 126
Number of lettings inspected	1,075
Number of informal notices served	114
Number of cases where formal action was taken	3

It is estimated that at least 600 houses in the town are in multiple occupation and, as the above figures show, a most satisfactory start has been made to deal with the problem. It is perhaps too soon to assess the position fully but it can already be appreciated that the house in multiple occupation is to be an ever present problem in the foreseeable future. Even when initial action to bring the premises up to the Council's declared standard has been carried out, periodic routine visits will continue to be necessary to ensure the maintenance of satisfactory conditions.

The proportionally high figure for visits compared with the number of premises inspected is an indication of the difficulty experienced in inspecting this type of house. It is not surprising that, with an average occupation of between 8 and 9 families, several visits must sometimes be made before access can be obtained to all parts of the house. This in spite of attempts to minimise the difficulty by contacting owners or their managers before inspection.

It is pleasing to report that the reasonable and co-operative relationship which normally exists between the public and the inspectorate, has again been evident in this field of the work and much has been accomplished by an informal approach to owners. The efficient and helpful co-operation of the Chief Fire Officer and his staff in advising as to means of escape in case of fire has been greatly appreciated.

Caravan dwellings

The position with regard to caravan dwellings in the Borough at the end of 1963 was as follows:—

Number of licensed caravan parks		 Di		14
Number of individual caravans sited on land with				9
permission	resid	dential	pur-	,
poses				379
Number of caravans stationed for holiday use				392

Generally speaking the caravans and sites have been wellmaintained during the year and there have been few infringements of the conditions attached to the Site Licences.

Occupational Conditions

Factories

Factories Act, 1961. Part I - Inspections.

	Number		Number	of
Premises (1)	Number on Register (2)	Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	146	47	1	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	652	406	21	of sey prompt deal and the di
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	72-1	20	Eleszant Inspire Inspire Inspire	
TOTAL	798	473	22	ne - gr

Cases in which defects were found

	Nu		eases in wh were found		No. of cases in which prosecu-
		Reme-	Refe	erred	tions
Particulars (1)	Found (2)	died (3)	To H.M. Inspctr. (4)	By H.M. Inspctr. (5)	were insti- tuted (6)
Want of cleanliness (S.1) Overcrowding (S.2) Unreasonable temperature	1			=	=
(S.3) Inadequate ventilation (S.4) Ineffective drainage of floors	1 -	=	=	=	=
(S.6) Sanitary Conveniences (S.7)	1	-	-		-
(a) Insufficient(b) Unsuitable or defective(c) Not separate for sexes	21	14	=	1	=
Other offences against the Act (not including offences relating to Outwork)	15	3	12	-	_
TOTALS	39	17	12	1	_

10 defects found, and the subjects of written notices, remained unremedied at the end of the year. 2 notices, relating to defects found in 1962 were complied with during the year.

Outwork (Sections 133 and 134).

	S	Section 13	3	S	ection 13	14
Nature of Work (1)	No. of out-workers in August list required by Section 133 (1) (c) (2)	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.)	37	-	-	-	_	_
Curtains & furni- ture hangings	8	-	_	_	_	-
TOTAL	45	-		_	_	_

Shops

Owing to staff shortage and emphasis placed on other activities fewer inspections were made of shops to enforce the provisions of the Shops Act, 1950, relating to closing hours, the provision of welfare facilities for assistants and the display of prescribed notices in connection with the working hours of young persons, etc. As a result of the 186 visits made by the District Public Health Inspectors only four contraventions of the Act were noted. These were subsequently remedied as a result of informal action.

The following Orders were made under the Act by the Council during the year :—

An Order permitting shops to open from 8.0 a.m. to 1.0 p.m. on each Sunday between the 26th May and the 15th September for the sale of :—

- (i) Articles required for bathing and fishing.
- (ii) Photographic requisites.
- (iii) Toys, souvenirs and fancy goods.

The following Order was revoked by the Council :-

The Bournemouth Weekly Half Holiday Order (Hair-dressers and Barbers) 1912.

The effect of the revocation was to permit occupiers of premises previously affected to fix a day suitable to themselves as their declared half holiday.

Young Persons (Employment) Act, 1938

The number of hours which young persons under the age of eighteen may work as projectionists and usherettes at cinemas, as lift boys and bell boys and in similar employment, is controlled by the provisions of this Act. 68 visits were made to premises in this connection during the year. The three contraventions found were remedied after informal action.

The Offices, Shops and Railway Premises Act, 1963

It is perhaps appropriate to mention that this major piece of public health and social legislation, which was passed on the 31st July, 1963, will probably become operative at some date in 1964. It will greatly increase the responsibilities of the local authority and its officers with regard to the control of conditions of employment in their area.

The new Act will require much more of employers in the provision of health and welfare facilities and of safety precautions in non-industrial premises, and will create a legal standard of working conditions for shop and office employees similar to that at present enjoyed by factory workers.

General Sanitary Conditions

Infectious Diseases

374 visits were made in connection with 55 notified cases of infectious disease, and to persons who had been referred to the Department as having been in contact with infectious diseases.

Seven rooms were disinfected after notifiable disease, sixty-eight after non-notifiable disease, and ten after tuberculosis. 150 articles were treated in the steam disinfector.

Drainage Work

The public health inspectors and their assistants carried out the following duties in connection with drainage.

Visits to buildings in course of construction	 		1,929
Tests applied to drainage at such buildings	 		1,793
Defects revealed and remedied at such buildings	 		278
Visits to existing buildings re drainage	 		740
Tests applied to drains at existing buildings	 		422
Defects revealed and remedied	 		140
Number of obstructed drains cleared	 ***		226
Number of private sanitary surveys carried out	 	000 . 50	20
Total fees received for such surveys	 719.4	£89:58	Ud.

Refuse Accommodation

Unsatisfactory conditions were found at 75 premises, and as a result of action taken by the Department, 117 dustbins were provided. In all, 243 visits were made in connection with the storage of refuse.

Nuisances

1047 complaints of nuisances were received and investigated, 409 statutory nuisances being found and 403 abated during the year. 3020 visits to premises were made in this connection.

Eradication of Insect Pests

During the year disinfestation work for the destruction of cockroaches, fleas, etc., was carried out at 58 premises, and no less than 252 wasps' nests were destroyed at a charge of 7s. 6d. per nest.

Many householders, in doubt as to the nature or significance of various insects found on their premises, bring specimens to the Department for identification and advice. It is appropriate here to acknowledge the valuable assistance given in these matters from time to time by the Department of Entomology of the British Museum.

Rodent Control

During 1963 a total of 1212 complaints were received regarding rat and mouse infestations and these were dealt with by the Rodent Officer and his operatives. In addition, the valuable work of surveying both private and business premises continued and 1048 visits were made for this purpose, resulting in the detection of 440 minor infestations. Treatment was carried out in all cases, with the use of the anti-coagulant "Warfarin" in accordance with the Ministry's recommendations. In 206 cases, "block" treatment methods of eradication were used.

Where the occupiers co-operate treatment at domestic premises

is carried out free of charge, but a charge is made for the service at business premises. An income of £200 was derived from this service in 1963.

During the year the Department undertook routine treatment to prevent infestations at the Council's catering establishments, work previously carried out by private contractors, whilst rodent control at refuse tips has continued.

The rodent control staff also dealt with several infestations of rabbits on Corporation land and assisted the R.S.P.C.A. Inspector in the trapping of wild cats.

Sale of Pets and Pet Foods

20 persons were granted annual licences to conduct pet shops. 61 inspections were made to ensure that conditions attached to licences were being observed. No contraventions were detected.

Samples of pet meat were submitted to the Public Health Laboratory on eight occasions, when all were found to be free from food poisoning organisms. One contravention of the Meat (Staining and Sterilization) Regulations, 1960, was found. This was remedied following the issue of a warning letter.

Swill-boiling Plants

The Diseases of Animals (Waste Foods) Order, 1957, requires pig keepers and others who collect swill to sterilise it in a boiling plant licensed by the local authority. All such swill must be so treated before being fed to livestock, and adequate precautions must be taken to prevent animals from gaining access to untreated swill. This is to prevent the spread of diseases such as swine fever and fowl pest. At the end of the year there were 35 licensed plants in the Borough.

Public Swimming Baths

Details of these are given below :-

Description of Swimming Bath	Capacity	Source of water used for filling	Method of Treatment	Frequency of changing the water	Bacteriological examinations of water
Pier Approach (owned by Local Authority)	150,000 gallons	Mains	Continuous filtration and chlorination	Every 2— 3 years	Consistently good results.
Stokewood Road (owned by Local Authority)	100,000 gallons	ditto	ditto	Every 3 years	Mainly good results.
Linden Hall (Privately owned)	60,000 gallons	ditto	ditto	Yearly	Consistently good results.

108 samples of water from the above baths were submitted to the Public Health Laboratory, of which five were found to be not completely satisfactory. In all these cases immediate action was taken to correct the position.

Private Swimming Baths and Paddling Pools

70 samples of water were taken from baths in six private hotels and one school. All except three were satisfactory, the unsatisfactory results having arisen from inadequate chlorination. Repeat samples, following action by the Department, were satisfactory.

34 samples of water were taken from six paddling pools and of these 12 were found to be bacteriologically unsatisfactory. Following chlorination in these cases satisfactory results were obtained.

When sampling water from paddling pools and swimming baths frequent checks on free chlorine content are carried out by the Inspectorate.

Fertilisers and Feeding Stuffs Act, 1926

12 samples of fertilisers were taken and with one exception were found to be correctly described. Investigation into the reason for the incorrect description of one fertiliser was carried out and proved to result from an assistant's error. The firm concerned were warned and repeat samples will be taken in 1964.

Of the four samples of feeding stuff taken one, upon analysis, was found to be deficient in protein. The contravention was

referred to the Chief Weights and Measures Inspector of Dorset for further investigation at the manufacturer's premises.

Merchandise Marks Act, 1926 and Agricultural Produce (Grading and Marking) Act, 1928

No offences were detected.

Hairdressing Establishments

The Council, utilising the powers afforded by Section 55 of the Bournemouth Corporation Act, 1960, fixed 2nd September 1963 as the appointed day, after which it would be an offence to carry on a business of hairdresser or barber without the occupier and the premises being registered with the local authority in accordance with the provisions of the Section.

Bye-laws with respect to Hairdressers and Barbers were also made under Section 77 of the Public Health Act, 1961. These are intended to ensure the hygienic condition of the premises, the cleanliness of instruments, towels, equipment and material used and the standard of hygiene adopted by hairdressers working in the business, as respects both themselves and their clothing.

By the end of the year, 238 hairdressers or barbers had applied for personal registration and applications had been received in respect of 220 establishments.

Inspections of 172 premises were carried out, involving 275 visits. In all but a few cases the inspectors found that the requirements of the Byelaws were being observed and that premises were in all respects satisfactory. Informal action has proved sufficient to bring about the necessary improvement in the few premises not up to standard.

Sale of certain poisons

The provisions of the Pharmacy and Poisons Act, 1933 and the Poisons Rules as to the retail sale of the poisons scheduled in Part II of the Poisons List are administered by the Department.

205 traders, mainly grocers and hardware dealers, are registered by the Council as authorised sellers of such poisons in accordance with the requirements of the Act.

The Poisons Rules deal with the requirements as to containers, labelling, storage, transport, sale and records. 82 inspections were made, but no contraventions were noted.

Public Conveniences

During 1963, the sum of £12,595: 13s.: 2d. was collected by the Public Conveniences Superintendent from the conveniences in the Borough under the control of the Public Health Department.

This amount was derived from the following:-

Source			Amou	nt	
			£	s.	d.
Coin locks		 	12,160	17	2
Wash and brush up rooms		 	324	16	6
Paper towel dispensers		 	41	19	8
"Brylcreem" dispensers		 	8	19	8
Perfume and hand lotion-dis	spensers	 	59	0	2

(The last two amounts are a quarter of the total receipts, the balance being paid to the firms operating the machines).

There are 512 coin-operated locks in the public conveniences and these are occasionally damaged by petty thieves in attempts to extract pennies from them. These efforts are seldom profitable to the would-be thieves, as the lock-tills are emptied frequently. The damage to the expensive locks, however, entails considerable costly repair or renewal, and to avoid this in future, pilfer-proof locks are being fitted as replacements in all cases where renewals become necessary.

The main improvements carried out in public conveniences during the year were —

- (i) The installation of electric lighting in the Meyrick Park Gents' Convenience.
- (ii) The replacement of flushing cisterns by two continuous flushing troughs in the Avenue Road Conveniences. This will reduce maintenance costs and improve flushing efficiency during peak periods of use.

Washing facilities at public conveniences are being steadily extended. At nineteen attended conveniences hot and cold water with soap and linen towels are available at a charge of 2d. and at eighteen of these a free wash with paper towels and liquid soap may also be obtained, hot and cold water with free paper towels and liquid soap are available at seven more conveniences. 122 unattended conveniences are fitted with wash basins and a cold water supply, and in seven of these free paper towels are available.

A certain amount of pilfering and damage takes place in

conveniences where no attendants are employed. This tends to restrict the free washing facilities which could be offered to the public, and increases the cost of maintenance.

One person was prosecuted and fined £5 with 10/- costs for causing damage to the Lansdowne Gents' Convenience.

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COUNTY BOROUGH OF BOURNEMOUTH

EDUCATION COMMITTEE

Annual Report

of the

Principal School Medical Officer

Year 1963

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my tenth Annual Report as Principal School Medical Officer to the Education Committee, the fifty-sixth of a series dealing with the health of children attending your schools.

In general, 1963 was a very satisfying year, not only because of the continued high standard of physical and mental health enjoyed by the majority of school children, but because substantial progress is now being made in facilities offered to the handicapped child. There is a growing "team spirit," fostered by discussions between doctors, teachers and skilled therapists on the best means of salvaging human material which, if left to chance, must almost inevitably suffer the disappointments of a home-bound cripple or a dead-end occupation.

If there is a fly in the ointment it is that too often it is the parents, who should of all people be most concerned with the child's future, who fail to provide that co-operation and encouragement which is so essential to success.

There have been no serious outbreaks of infectious disease during the year, and my thanks are due to all members of the School Health Service and to the Head Teachers of your schools for their willing co-operation.

I am,

Yours faithfully,

WILLIAM FIELDING.

SCHOOL HEALTH SERVICE STAFF.

(As at 31st December, 1963).

Principal School Medical Officer: WILLIAM FIELDING, M.D., B.SC., D.P.H.

Deputy Principal School Medical Officer:
H. C. JENNINGS, M.B., CH.B., D.OBST.R.C.O.G., D.P.H.

School Medical Officers:
J. D. Beale, M.B., B.S.

CICELY R. HAINES, M.B., CH.B., D.R.C.O.G.
PAULINE K. KEATING, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H.

Principal School Dental Officer: A. A. Wood, L.D.S., R.C.S.

School Dental Officers:

M. GARDENER, L.D.S., R.C.S. (Part-time)

H. S. HOOPER, B.D.S., L.D.S., R.C.S.

F. E. LOCKWOOD, B.D.S.

M. B. REDFERN, L.D.S. (Part-time)

Dental Surgery Assistants:

H. Allen, D. M. Cox, F. R. HICKMOTT, B. M. READ

Consultant Children's Psychiatrist (Part-time):

*J. Stirrat, M.B., Ch.B., D.P.M.

Educational Psychologist:
B. WORTHINGTON FOXLEY, B.SC.(Hons.), P.G.A.D.P.

Psychiatric Social Workers:
H. S. LOVEJOY
M. HERGETT

*Ophthalmic Surgeons (Part-time):

*G. G. K. HOLDING-PARSONS, M.A., M.B., B.CH., D.O., M.R.C.S., L.R.C.P.

*RALPH F. JONES, M.B., B.S., F.R.C.S., D.O.

*A. P. FIELD, D.B.O.

Orthopaedic Surgeon	
*Services provided by Surgeons from Boscom	
*Physiotherapist-	
E. O. Joseph,	M.C.S.P.
*Assistant Physic	
E. SIMPSON, M.C.S.P. M.	HUGHES, M.C.S.P.
Speech There	apists:
N. LOUGHRAN (Part-time) V.	ABELSON (Part-time)
Superintendent Health Visite L. E. Roi	
Health Visitors and	
	MULLIGAN
	PEAKMAN M. ROBINSON
	E. SMITH
	M. SORTON
	K. J. STEPHENS
	N. SUCKAMORE
	TRATSART
A. JOHNSON J.	VENN
B. Leadbitter M.	WARD
A. MORTON J.	WILKINSON
Clerk in charge of School H	Health Service Section:
F. J. Go	
Clerks	TAKUTE U
E. G. PAYNE, J.	W. PEAKE,
R. P. SHEPPARD (Part-time), J. S. Guidance C.	
*Employed by the Wessex Regional	Hospital Board.
SCHOOLS AND	SCHOLARS
Number of Primary Schools	31
Number of Secondary Modern School	ols 12
Number of Secondary Grammar Sch	ools 2
Number of Special Schools	1
Average attendance	
Average number on School Registers	16,644

Average number on School Registers

MEDICAL INSPECTION

During recent years, there has been some criticism of the function of the School Medical Officer and a questioning of the value of school medical inspections to the school child.

The origin of these doubts and criticisms undoubtedly lies in the National Health Service Act, which gave to the underprivileged child a free family doctor service available during both health and sickness, whereas before the only "free" medical services available to them were the School Medical Service and the out-patient facilities of local authority and voluntary hospitals.

Many family doctors have now become intensely interested in preventive medicine, and if their visiting lists could be reduced to more reasonable proportions and if sickness and health could receive equal priority in their day's work, it might well be that in the not too distant future the medical care of the school child could safely pass into their hands.

But the work of the school doctor should be far more than the diagnosis of physical ailments and the prevention of illnesses that might jeopardise the child's career.

The School Health Service has always interpreted its functions widely, and at the inception of the Service over 50 years ago the Board (now Ministry) of Education, stated:—

"The fundamental principle of Section 13 of the New Act is the medical examination and supervision, not only known or suspected to be weakly or ailing, but of all children in the Elementary Schools, with a view to adapting and modifying the system of education to the needs and capacities of the child, securing the early detection of unsuspected defects, checking incipient maladies at their onset, and furnishing the facts which will guide Education Authorities in relation to physical and mental development during school life."

The physical, mental and emotional development of the school child therefore come within the purview of the School Medical Officer, not necessarily for treatment (there are Specialists who can do that) but in order that any deviation from the normal can be detected and remedied as early as possible, the implications discussed with teachers and every effort made to obtain the best possible advantage from a liberal education that is compatible with the child's health and happiness.

Prior to 1948, when literally the only medical service available to hundreds of thousands of school children for the treatment of minor ailments, malnutrition and the general medical care of chronic illness, was the School Medical Service, when local authorities organised special heart clinics, orthopaedic clinics, asthma clinics, skin clinics, ear clinics, vaccination and immunisation clinics, and for the removal of tonsils and adenoids, the School Medical Officer's day was so filled by clinical work, that little time was available for non-clinical activities.

The position has now changed, and by allocating a medical officer to a representative group of schools, a close liaison can be maintained with Head Teachers and their staffs, informal discussions and referrals of children with problems can be arranged, and at the same time the medical officer can keep in contact with the many Specialist Agencies maintained by the Regional Hospital Board and others.

Although there have been no major changes in the general pattern of medical inspections described in recent reports, there has been an extension of sight and hearing tests, the programme now being as follows:—

Age General medical examination plus distant vision 5 years test. Test of distant vision, near vision and Audiometry. 7 years Selective Examinations - plus colour, distant and 9-10 years near vision testing and Audiometry. Distant and near vision tests and Audiometry if 12-13 years indicated. School leavers general medical examination in-15 years cluding urine testing, Audiometry and near and distant vision tests.

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".

		1							70000
DEFECTS		Age	dren ed 5	Age	dren d 10	Age	dren d 14 229	Peri Inspe	her odic ctions 52
	Ho b	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin		13	8	7	1	59	5	20	1
Eyes :— (a) Vision (b) Squint (c) Other		23 53 8		34 13 5	$\frac{1}{7}$	208 12 6	1 -3	259 26 12	2 4
Ears:— (a) Hearing (b) Otitis Media (c) Others		2 7 1		11 1 1	4 _	<u>_1</u>	<u>-</u>	3 2 3	<u>-</u>
Nose or Throat		17	95	5	15	5	14	15	44
Speech		19	18	9		6	_	12	2
Glands		-	15	- 1	2	_	2	1	3
Heart		2	29	_	2	1	6	4	9
Lungs		2	12	1	1	2	_	2	1
Developmental :— (a) Hernia (b) Other		7 2	1 2	<u></u>		_ 2	<u></u>	2 16	_
Orthopaedic:— (a) Posture (b) Feet (c) Other		3 25 5	3 4 11	3 17 2	2 _	. 8 29 3	7 4 1	8 15 7	3 2 5
Nervous System :— (a) Epilepsy (b) Other		1 1	=	1	=	1 1	=	1 1	_
Psychological:— (a) Development (b) Stability		4	17	9	3	- 1	2 2	4	2 2
Abdomen		-	-	-	-	-	-	-	-
Other		_	-	_	-	_	-	-	fame :
		195	217	132	43	345	63	413	88

FINDINGS ON MEDICAL INSPECTION

(a) Uncleanliness

81 cases of personal uncleanliness were discovered in 1963 compared with 72 in 1962. They were mainly of a minor character, requiring only informal action and it is remarkable how frequently they were associated with membership of "problem families", poor school attendance, and so on.

Among schoolgirls, lice infestation and nits may be associated with exaggerated hair styles which, for reasons of appearance, are seldom disturbed.

(b) General Condition

Only 3 children seen in 4,058 routine medical examinations were considered to be of "unsatisfactory" physique, a truly remarkable improvement on conditions found in pre-war days.

There are now far more obese and overweight children than under-nourished ones and in fact the number of overweight children begins to pose rather a problem.

(c) Minor Ailments

The number of minor ailments treated during 1963 fell from 240 to 188, but the Minor Ailments Clinics continue to fulfil a useful function in the co-operation that results between school nurses and Head Teachers, and the opportunities for special medical examinations.

(d) Defective Vision

As indicated, routine visual checks have been increased, and 12.9% of all children periodically examined were found to be suffering from defective vision. As regards the three routine age groups, the entrants, the intermediate group and the school leavers, the percentage was 9.8.

Defects of vision are referred either to the Special Eye Clinics or to private oculists, at the parents' choice, and co-operation by parents is extremely good.

During the year 1,754 children attended these Special Ophthalmic Clinics, staffed by Consultants of the Bournemouth and East Dorset Hospital Management Committee, and spectacles were prescribed in 612 cases. Of children attending for the first time, spectacles were prescribed in 154 out of 291 cases.

There were no difficulties over parents failing to agree with recommendations for spectacles or operative treatment.

The Orthoptic Clinic at Avebury dealt with 76 new cases (60 in 1962), and 712 attendances were made. Twenty-eight cases of squint received operative treatment, and were subsequently followed up by the Ophthalmic Surgeons at the Clinics.

Once again attention must be drawn to the fact that cases of squint are often referred too late to preserve the full vision and although operation may improve the appearance of the child, it often cannot improve the vision at this stage.

(e) Defects of the Nose and Throat

246 children received treatment for enlarged tonsils and adenoids, compared with 371 in 1962.

The waiting period for operative treatment varies from three to twelve months according to circumstances.

(f) Treatment of children in Hospital

There is extremely good co-operation between the Consultant Paediatrician and the School Health Service, and any recommendations by the Paediatrician are followed out. Similarly, any child hospitalised for a prolonged period and capable of benefiting from a continuation of his education, can have this arranged through a visiting teacher.

All cases of accidents to school children requiring hospital treatment, whether by admission or by out-patient treatment, are reported by the local hospitals, and an attempt is made to prevent a recurrence.

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

	Group of 1					No. of Children
1.	Infections or Parasitic Diseases					 11
2.	Neoplasms (a) Benign					 1
	(b) Malignant					 -
3.	Allergic, Endocrine, Metabolic a	and I	Nutrition	al		 -
4.	Diseases of blood and blood for	ming	gorgans			
5.	Mental, Psychoneurotic					 _
6.	Diseases of Nervous System and	Spe	cial Sens	ses		 35*
7.	Diseases of Circulatory System a	and I	Lymphat	ics		 4
8.	Diseases of Respiratory System					 270†
9.	Diseases of Digestive System					 58
10.	Genito-Urinary System					 31
11.	Skin and Cellular Tissues					 3
12.	Bones, etc					269
	Accidents, Poisoning and Violen					
13.					/	 122
	*Includes 28 operations for "sq	uint'				
	†Includes 246 cases for tonsillect	omy				

MINOR AILMENTS CLINICS

As recorded on previous occasions, these Clinics show a gradually declining use as the years go by, but particularly when they are located on school premises they give the doctor or nurse an opportunity of discussing children and their problems with the Head Teacher on the spot, and in this way retain some of their former value.

During the year a total of 1,838 attendances were made at Minor Ailments Clinics.

LIST OF CLINICS HELD FOR SCHOOL CHILDREN

	MONDAY	TUESDAY	TUESDAY WEDNESDAY THURSDAY	THURSDAY	FRIDAY
Minor Ailments Clinics. East Howe: Hadow Road	MORNING AFTERNOON — MORNING	1111	TLH	MORNING MORNING MORNING	1111
Dental Clinics Central: 10 Madeira Road	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND	MORNING AND AFTERNOON	MORNING AND AFTERNOON
East Howe: Hadow Road Pokesdown: 896 Christchurch Road Winton: 19 Cranmer Road	Do. Do. Morning	Do. Do.	Do. Do. Morning	Do. Do. Morning	Do. Do. Morning
Eye Clinics Central: 10 Madeira Road West Howe: Cunningham Crescent	AFTERNOON	11	Morning	Morning	Morning
Child Guidance Centre 896 Christchurch Road, Pokesdown	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON

Surgeon's sessions — Friday Mornings Physiotherapy — daily by appointment. Children's Orthopaedic Clinic, 70 Stewart Road

ORTHOPAEDICS

The general arrangements for children with orthopaedic defects have remained as before, a weekly out-patient session being conducted at Stewart Road Clinic by one of the Consultant Orthopaedic Surgeons of the Bournemouth and East Dorset Hospital Management Committee. The Services of whole-time qualified physiotherapists are also available at the Clinic, and consultations and treatments can be arranged without delay.

During the year 11,740 attendances were made, an increase of 340 over 1962, while 505 children attended for individual treatment and 378 children for class treatment. These statistics have been produced by the Orthopaedic Clinic, and include a number of children not necessarily attending the local authority's schools.

In all 883 patients attended the Clinic, 296 being new cases during 1963, the majority of them being referred either by general practitioners or the School Medical Officers.

As will be noted from the details given below, 324 cases or nearly 59% of the total of 553 Bournemouth school children attending the Clinic, did so on account of deformities of the feet.

In previous Reports, reference has been made to the part played by tight socks in infants and young children, and unsatisfactory though "fashionable" footwear among the older children in causing some of these deformities, and these remarks are still pertinent though some of the extremer fashions seem to have been replaced by others less harmful. Many foot deformities, of course, are not caused in this way, but are due to congenital causes, and often some particular defect appears to be perpetuated from one generation to another.

A breakdown of the 324 cases of foot deformities shows that
178 were in Primary School children
122 were in Secondary School children
24 were in Grammar School children

Details of attendances for	the p	ast year	r were	as fol	llows :-	-
Number of scholars seen by th	ne sur	geons				553
Number of new cases						198
Total number of attendances						893
Number of cases discharged						175
Defects found						
Genu Valgum/Genu Varum ar	nd ot	her knee	defec	ts	·	132
Spastic conditions						14
Due to Anterior Poliomyelitis						7
Spinal Curvature and Poor Po	sture					19
Torticollis						5
Deformities of the foot						324
Other conditions						52

SPEECH THERAPY

During 1963 the general arrangements for speech therapy continued as in the previous year, Mrs. N. Loughran giving up to six sessions per week as Senior Speech Therapist and Miss V. Abelson continuing to work on a full-time basis. In addition to treatment sessions in schools, regular clinics were held at "Avebury", Caroline Road Handicapped Centre, West Howe Clinic and at Alma Road Special School.

A total of 247 children were under treatment during this year, and it is pleasing to note the excellent co-operation provided by the parents of these children.

Close co-operation was also maintained with the Child Guidance Centre and a number of extremely difficult and complicated cases were referred for treatment.

B.C.G. VACCINATION

School children born in 1950 were offered protection against tuberculosis by B.C.G. vaccine, in accordance with the Ministry's Scheme, and of 1,551 children tuberculin tested, 1,346 were vaccinated.

CHILD GUIDANCE

Dr. Jeannie Stirrat, Consultant Children's Psychiatrist to the Wessex Regional Hospital Board, has submitted the following account of the work of the Child Guidance Centre during 1963.

CHILD GUIDANCE CENTRE

Our impression from the families seen at the Clinic is that there is a large proportion of (1) families without roots (2) children either fatherless or whose father is totally inadequate or mentally crippled (3) mothers immature and unable to impose discipline. Where the history of the parent is available it is always possible to trace the parental sickness to childhood deprivation. Such parents find it well nigh impossible to offer their own children appropriate personality nourishment. A Child Guidance Clinic is therefore concerned with treatment of both child and parent.

In the Annual Returns the main mass of cases are under the heading of "Behaviour Disorders". In the infant these are usually disturbances of sleep or feeding or over-activity. In the toddler temper tantrums, resistance to toilet training, defiance. Many children have difficulty in adjusting to the new challenge of school and teachers increasingly recognise that the clinging child is telling of anxiety in the mother. From the school may come difficulties in learning, difficulty in the making of relationships, aggressive or unduly withdrawn behaviour.

In early teens, with its physical and bio-chemical changes, problems which have remained dormant from pre-school years can now be triggered into activity. In a physically developing and near adult body there is often an exacerbation of little child muddle which is best seen as a cry for help. Because in puberty a boy or girl is singularly responsive to help, and indeed to hurt, the clinic welcomes the opportunity to play its part in the uprooting of mischief and the shaping and strengthening of the personality. Greedy, aggressive, destructive as well as sexual misbehaviour are all signs of immaturity. Since these young people are the parents of tomorrow and mental health depends upon the quality of parent/child relationships, work in a Child Guidance Clinic is in the interest of the generations which follow.

For children whose circumstances make treatment by weekly sessions at the Clinic impracticable we have mainly made use of

the Day Centre at Westbourne, Leigh House Adolescent Unit, St. James' Hospital Children's Units and residential Special Schools. The Westbourne Day Unit, which began as a much smaller unit beside the Child Guidance Clinic at Boscombe, admirably meets the needs of the child unable to tolerate or be tolerated in his own school. Each member of the Child Guidance team plays his part in the Unit with the awareness that the problem concerns not only the child but also his ability to handle his environment. There is the closest possible mutually rewarding link between the staff of the Day Unit and the Child Guidance team. The Wessex Regional Hospital Board Adolescent Unit, Leigh House, at Chandler's Ford has a number of boys and girls from Bournemouth resident there at present and a small additional number were accepted during 1963. Although education is available this Unit is more a hospital for adolescents with emotional disorders than it is a school. St. James' Hospital, Portsmouth, is our regional hospital for children who need special diagnostic assessment as In-Patients and for children who should be treated in a hospital with teaching facilities.

Difficulties and delays are still experienced in placing children at residential special schools. These include E.S.N. and Open Air Schools as well as schools for the emotionally disturbed. The senior boys have been particularly difficult to place but here it is hoped the proposed residential school for Bournemouth will meet this situation. A small proportion of the young people referred to us present a problem of placement which with present facilities available is virtually insoluble. A special unit, possibly provided by the Regional Hospital Board in addition to Leigh House, is required to meet the need of certain very disturbed adolescents while at the other end of the scale a number of young people with a mild emotional disturbance but an unsympathetic or disturbed family background would benefit greatly from a small hostel situated within the County Borough.

This year again the senior Psychiatric Social Worker has taken students from Southampton University Course in Applied Social Studies and this again has proved very worth while, the students making a valuable contribution to the work of the Clinic.

The Case Conferences have continued and these have been attended by General Practitioners, School Medical Officers, Head Teachers, Probation Officers, Health Visitors, Welfare Officers

and representatives of social agencies interested in the welfare of children. The Conferences have continued to prove of interest and value to those who have come along and helped greatly in explaining and making more widely known the work of the Clinic and its special approach.

Members of the Clinic team are engaged in a variety of activities outside the immediate work of the centre and play an active part in such local organisations as The Bournemouth Branch of the National Association for Mental Health, The Guild of Teachers for Backward Children, The Association of Workers with Maladjusted Children and the Social Services Group, as well as being concerned with their own professional associations. Links with other Child Guidance Clinics are also maintained through a Wessex Regional meeting of Child Psychiatrists and a quarterly meeting of The Wessex Inter-Clinic Conference.

JEANNIE STIRRAT,

Consultant Children's Psychiatrist.

ANNUAL RETURNS FOR YEAR ENDED 31st DECEMBER, 1963 156 New cases referred ... New cases seen ... 129 Total cases uneventuated 13 143 12 373 32 Total cases awaiting psychiatric investigation ... 40 .. (School age) (Pre-school) 16 291 Residential treatment in school/hospital: Maladjusted School 36 7 Treatment waiting list 31 Source of Referrals: School Medical Officers 25 General Practitioners 48 Children's Officer 3 Head Teachers 28 Probation Officers 15 23 7 . . Others.. 3 156 Age Groups of Referrals: Pre-school Primary School Secondary Modern School 11 88 51 Grammar School 5 .. Left 156 Closures: Improved by treatment Parents unable to co-operate Not responsive to treatment Advice only Left School Transferred to other agencies Removed from area. 87 18 2 17 4 9 6 143 Reasons given for referral: Behaviour difficulties Educational problems Psychosomatic symptoms Speech problems Advice only Nervous symptoms 115 4 29 Nervous symptoms 3 156

IMMUNISATION AGAINST INFECTIOUS DISEASES

Arrangements have continued for the protection of children against diphtheria, whooping cough, tetanus, poliomyelitis, smallpox and tuberculosis, in accordance with Schedule P (modified) of the Ministry of Health. This provides for the protection of children in infancy and the continuance of the protection by booster doses through school life as follows:—

Age	Visit	Vaccine	Interval
1-6 months	1 2 3	Diphtheria, Tetanus, Whooping Cough	4-6 weeks 4-6 weeks
7-11 months	4 5	Poliomyelitis (oral vaccine)	4-8 weeks 4-8 weeks
18-21 months	7	Diphtheria, Tetanus, Whooping Cough	
Smallpox	during	the first 2 years, preferably in the second ye	ar
School entry 8-12 years		Diphtheria, Tetanus, Poliomyelitis (oral) Diphtheria, Tetanus, Smallpox re- vaccination	
Over 12 years		Tuberculosis (B.C.G. vaccine)	

Although it is highly desirable that this scheme of protection is commenced during infancy, many children reach school entry without any form of protection.

During the year protection was given as below:-

$\frac{2}{6}$	1,076 16 122
1	13
	$\frac{2}{6}$ $\frac{1}{-}$

Protection against poliomyelitis was given to 1,732 pre-school and school children during the year by the school medical officers, while 1,346 children received B.C.G. protection against tuberculosis in addition to 39 others dealt with as "contacts".

NOTIFICATION OF INFECTIOUS DISEASES

The following relate to school children:-

Dysentery			 6
Encephalitis (Pos	st in	fectious)	 . 1
Food Poisoning			 1
Measles			 866
Meningococcal i	nfect	tion	 1
Pneumonia			 3
Scabies			 2
Scarlet Fever			 16
Whooping Coug	h	1.0	 12
			908
			200

There were also 2 notifications of respiratory tuberculosis.

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.

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

				No.
Eye Defects				162
Ear, Nose and 7	Throa	t condi	tions	64
Skin complaints				61
Uncleanliness				121
Miscellaneous				240

648

Exclusion from School

Scholars were excluded from school during 1963 for the following reasons:—

Behaviour pro	oblems			2
Eye condition	s (Post-o	p.)		5
Impetigo				1
Scabies				2
Uncleanliness				2
			in Land	1

12

Open Air Education

During the year 3 boys (2 asthma and 1 emotionally disturbed) and 1 girl (general debility) were sent to residential open-air schools.

SCHOOL MEALS SERVICE

35 Centres are provided for the provision of meals and the number of children attending on an average day in September was 9,152 out of 15,448 children attending school that day. 629 of these meals were provided free. On the same day, 11,991 children received milk in school (one-third pint each).

STAFF EXAMINATIONS

73 school teachers were examined by the medical staff, as a condition of appointment, also 87 applicants for entry to Training: Colleges. In addition, 20 students were examined on completion of their course at the Bournemouth Municipal College of Art.

EMPLOYMENT OF SCHOOL CHILDREN

A total of 603 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. All were found fit for the purpose. The occupations proposed were :—

Errand Boys	 	 29
News boys	 	 412
News girls	 	 124
Shop assistants	 	 32
Other	 	 6

12 other children were granted medical certificates as being fit to take part in public entertainment.

HANDICAPPED CHILDREN

The number of handicapped children on the Register other than defective speech cases remained practically constant, a total of 482 children (2.89 per cent. of the average number on the school registers) being placed in this category compared with 397 in 1962.

In order of frequency, the disabilities were as follows :-

Defective speech		 185
Educationally subnorm	al	 168
Maladjusted		 48
Physically handicapped		 31
Partially hearing		 19
Delicate		 18
Partially sighted		 4
Blind		 4
Deaf		 3
Epileptic		 2

482

HANDICAPPED PUPILS

	Number Awaiting Placement 23.1.64	-	16
chools*	Number Attending 23.1.64	447411 011 0477	171
Special Schools*	Number Admitted During the Year	1 642 651	43
	Number Recommended During the Year for Admission	1	53
Ascertainment	Number on Register, 31.12.63	4 4 118 118 168 48 48 185 185 185	482
Ascerta	New Cases Ascertained During 1963	1 1 2 4 4 4 4 4 4 4 4 4	169
		::::::::	:
		::::::::	:
	_	:::::::	:
	Category	Blind	:
		ghted :: earing Handic Illy Sub d ective	:
		Blind Partially Sighted Deaf Partially Hearing Delicate Physically Handicapped Educationally Sub-norm Maladjusted Epileptic Speech Defective	:
		Blind Partially Deaf Partially Delicate Physicall Educatio Maladjus Epileptic Speech I	Total

* Includes boarding houses or hostels and independent schools: excludes Hospital Schools.

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944... Number of children reported under Section 57 (4) of the Education Act, 1944...

Annual Report on the School Dental Service—1963

General Observations

The object of the school dental service is to ensure that as many pupils as possible leave school without the loss of permanent teeth, free from dental disease and irregularity, and trained in the care of the teeth.

Complete dental treatment for the children under our care was offered, and many of the special inspections referred to in the statistical table referred to children who were recalled periodically.

There were relatively very few children in the borough who failed to have treatment when necessary, either at one of the local authority clinics or under the National Health Service.

Dental Health Education

Every opportunity was taken to give advice on care of the teeth to children and parents. Films, film strips, posters, models and pamphlets were all used. The time spent in this way will help to prevent much dental trouble in future years, and although this reduced the statistical output to some extent from the preventive aspect much will be gained.

Staffing Position

During the year 1963 three full-time and two part-time dental officers were employed; each was helped by a very capable dental surgery assistant and was also engaged in the Maternity and Child Welfare Dental Service.

Mrs. M. Redfern continued to give her excellent services at the Winton Clinic for five mornings each week and this was supplemented by the part-time help of Mr. M. Gardener, a most efficient and kindly dentist who worked for one afternoon weekly.

Dental Inspections at Schools

All the schools except four were visited during the year for routine dental inspection of the pupils; the four schools referred to above will be visited early in the present year, the delay being due to the illness of two of the school dentists, over several months. Forty-seven per cent. of the pupils inspected were in the care of private dentists under the National Health Service.

New Clinic

On the 16th April the building of a new clinic at East Way in the Charminster area was commenced and it is expected that this clinic will become operative during April 1964; the premises at Winton will then be vacated and the equipment moved to the new clinic.

The new site is within a short distance of the Boys' and Girls' Grammar Schools and the Summerbee Infants', Junior and Secondary Schools, and is thus ideally situated.

Co-operation of Teachers

We received during the year a very high standard of kindly co-operation from Headmasters, Headmistresses and Teachers and I am very grateful for this extremely valuable help to our service.

Many excellent lessons about care of the teeth were given by the teachers, the subject being made interesting by the use of visual aids. The teachers also did a great deal to encourage pupils in need of dental treatment to keep their appointments.

Orthodontic Treatment

This very important branch of children's dentistry had its appropriate place in the dental scheme and as in past years there was close co-operation with Mr. J. D. Hooper, the Orthodontic Specialist at the Royal Victoria Hospital, Boscombe who most willingly gave all the help he could. Details concerning orthodontic treatment provided are included in the statistical part of this report.

Co-operation of Boscombe Hospital Staff

I should like to thank the dental surgeons on the staff of the Royal Victoria Hospital, Boscombe for the most valuable help they gave during the year.

Annual Conference of the British Dental Association

I attended the Annual Meeting of the British Dental Association at Oxford during July and very much appreciated the opportunity of being present at many interesting lectures, discussions and practical demonstrations.

AN INVESTIGATION INTO THE FAILURE RATE OF FILLINGS IN DECIDUOUS TEETH

Our policy is to conserve the deciduous teeth whenever this is likely to prove useful and successful; the conserved teeth should give good service for long periods, ideally until they shed naturally.

Sometimes, one hears doubts expressed as to whether the conservation of deciduous teeth is a worthwhile procedure because the teeth are eventually shed, but the premature loss of deciduous teeth impairs mastication and in many children increases the likelihood of orthodontic treatment being required later through crowding of the dental arches.

A survey was carried out at the dental clinics and at school dental inspections in Bournemouth amongst 289 children with 550 filled deciduous teeth, and the criterion of failure used was when the teeth had to be extracted because of pain or sepsis soon after fillings were inserted.

The teeth which showed the highest failure rate were first molars, particularly those which had compound fillings (more than one surface of the teeth involved). Among 129 first molars, 58 of which had compound fillings, 3 of these teeth each with compound fillings had to be extracted within periods of three months *i.e.* 2.3% of 129 teeth.

408 second molars, 53 of which had compound fillings and 13 canines (no compound cavities) gave no trouble within three months of filling.

Within six months of filling, 5 more first molars gave trouble leading to loss of the teeth, all had compound fillings making a total of 6% loss in 129 teeth.

Also within six months of filling 4 second molars (no compound fillings) gave trouble, making 1% loss in 408 teeth.

Conclusions

Whilst it is appreciated that the numbers of children and fillings involved in the survey were small, and it was not always possible to follow up the case histories, one feels that the investigation confirmed that the filling of deciduous teeth is well worthwhile, as most of the teeth filled can give several years of useful service and in many cases remain until shed naturally.

The fact that in the survey carried out the number of failures in teeth with compound fillings, was double that of teeth which had fillings involving single surfaces, emphasised the importance of the conservation of deciduous teeth being undertaken when decay is minimal whenever possible.

Very special care to avoid failure needs to be taken, particularly when conserving first molar teeth.

A. A. Wood

Medical Inspection and Treatment

Return for Year Ended 31st December, 1963

PART 1 MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A(1)—PERIODIC MEDICAL INSPECTIONS

Age Groups	No. of	Physical Condition of Pupils Inspect					
Inspected			itisfactory	Unsatisfactory			
birth)	Hispected	No.	% of Col. 2	No.	% of Col. 2		
(1)	(2)	(3)	(4)	(5)	(6)		
1959 and later	22	22	100		_		
1958	1122	1120	99.82	2	0.18		
1957	221	221	100		-		
1956	44	44	100	_	-		
1955	23	23	100	-			
1954	41	41	100	-	-		
1953	355	354	99.72	1	0.28		
1952	229	229	100	_	-		
1951	217	217	100	-	_		
1950	57	57	100	-	-		
1949	129	129	100	-			
1948 and earlier	1598	1598	100	-	_		
TOTAL	4058	4055	99-93	3	0.07		

TABLE A(2) —PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding Dental Diseases and Infestation with Vermin)

Age Groups Insp (By year of Bir (1) 1959 and later	th)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part 2 (3)	Total individual pupils (4)
Number of Special Inspe Number of Re-Inspection				1,216 19
		TOTAL		1,235
TABLE C	-INFESTA	ATION WITH	VERMIN	
(a) Total number of ex nurses or other auth			by the school	25 777
b) Total number of ind	ividual pupi	ls found to be i	infested	81
(c) Number of individu notices were issued (ATTT.
(d) Number of individu orders were issued (S				

PART 2
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

	total manipalina	Periodic	Inspections	Special I	nspections
	telegraph of telegraph of	Number	of defects	Number	of defects
Defect Code No.	Defect or Disease	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
4	Skin (1)	(2) 99	(3) 15	(4) 2	(5)
5	Eyes—(a) Vision	524	4	7	-
	(b) Squint (c) Other	104 31	16	1	=
6	Ears—(a) Hearing	16	4	2	11
	(b) Otitis Media (c) Other	11 5	9	_	_
7	Nose or Throat	42	168	2	11
8	Speech	46	20	1	1
9	Lymphatic Glands	2	22	_	4
10	Heart	7	46	_	-
11	Lungs	7	14	1	1
12	Developmental:— (a) Hernia (b) Other	9 32	1 22	17	
13	Orthopaedic:— (a) Posture (b) Feet (c) Other	22 86 17	15 10 17	1 4	1
14	Nervous System :— (a) Epilepsy (b) Other	4 3	=		=
15	Psychological:— (a) Development (b) Stability	17 1	24 4	1 1	=
16	Abdomen	_	-	- >	-
. 17	Other	-	_	-	-

PART 3

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

TABLE A-EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of	
refraction and squint	18
Errors of refraction (including squint)	1782
Total	1800
Number of pupils for whom spectacles were prescribed	612

TABLE B-DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

Received operative treatment :-	Number of cases known to have been dealt with
(a) for diseases of the ear	2
(b) for adenoids and chronic tonsillitis	246
(c) for other nose and throat conditions	6
Received other forms of treatment	16
Total	270
Total number of pupils in schools who are known to have been provided with hearing aids.	tode policy to
(a) in 1963	1
(b) in previous years	6

TABLE C-ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments	576
defects	64
Total	640

TABLE D-DISEASES OF THE SKIN

(excluding uncleanliness for which see Part I—Table C)

THOUSE, PROPER				Number of to have	of cases known been treated
Ringworm—(i) Sca		 			_
(ii) Bo	dy	 			-
		 			3
Impetigo Other skin diseases		 11.			6
			* *		316
Total		 			325

TABLE E-CHILD GUIDANCE TREATMENT

TABLE F-SPEECH THERAPY

Number of cases known to have been treated

Pupils treated by Speech Therapists

TABLE G-OTHER TREATMENT GIVEN

SCHOOL DENTAL SERVICE

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR ENDED 31st DECEMBER, 1963.

I.	Dental and Orthodontic work 1. Number of Pupils inspected by the Authority's Dental Officers	:
	(a) At Periodic Inspections	14281
	(b) As Specials	1503
	Total (1)	15784
	2. Number found to require treatment	5753
	3. Number offered treatment	5220
	4. Number actually treated	3091
II.	Dental work (other than Orthodontics) 1. Number of attendances made by pupils for treatment,	
	avaluding those recorded at III (1) below	7716
	2. Half days devoted to: (a) Periodic (School) Inspections	124
	(b) Treatment	1163
	Total (2)	1339
	3. Fillings: (a) Permanent Teeth	5425
	(b) Temporary Teeth	1051
	Total (3)	6476
	4. Number of Teeth Filled: (a) Permanent Teeth	4889
	(b) Temporary Teeth	937
	Total (4)	5826
	5. Extractions: (a) Permanent Teeth caries 337 orthodontics 329	766
	(b) Temporary Teeth	1125
	Total (5)	1891
	 (a) Number of general anaesthetics given for extractions (b) Number of half days devoted to the administration of general anaesthetics by : 	720
	i. Dentists	NIL
	ii. Medical Practitioners	59
	Total (6)	59
	7. Number of pupils supplied with artificial teeth	24
	8. Other operations: (a) Crowns	3
	(b) Inlays	_
	(c) Other Treatment	2352
	Total (8)	2355
III.	Orthodontics	
	1. Number of attendances made by pupils for orthodontic	
	treatment	626
	2. Half days devoted to orthodontic treatment	52
	 Cases commenced during the year Cases brought forward from the previous year 	41
		60
		48
		10
	8 Number of removable appliance for a	101
	9 Number of fixed appliances fitted	59
	O. Cases referred to and treated by Hospital Orthodondists Output Description:	NIL 60
	The state of the s	CHI

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Public Health

COUNTY BOROUGH OF BOURNEMOUTH

Annual Report

of the

Medical Officer of Health

and

Principal School Medical Officer

For the Year 1964

Public Health Department,
17 St. Stephen's Road,
Bournemouth.
Telephone Bournemouth 22066.





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COUNTY BOROUGH OF BOURNEMOUTH

ANNUAL REPORT

OF THE

Medical Officer of Health for the Year 1964

PUBLIC HEALTH DEPARTMENT,

17 St. Stephen's Road,

BOURNEMOUTH.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health and sanitary conditions of the County Borough of Bournemouth for the year 1964, the eighty-sixth in the series.

Vital Statistics

The Registrar-General's mid-year estimate of population showed an increase from 150,690 to 151,090, and this latter figure forms the basis for the vital statistics that follow.

A total of 1,971 live births were registered, representing a birth rate of 13.05 per 1,000 population, compared with 1,873 live births and a birth rate of 12.43 per 1,000 population in 1963. This is a low birth rate when compared with the rate for England and Wales of 18.4 per 1,000 population, but in terms of live births represents an increase of over 200 births over the average of the past ten years. Included in the total were 242 illegitimate births, or 12.3 per cent of the whole.

Stillbirths numbered 23, giving a stillbirth rate of 11.53 per 1,000 total births, much lower than the national average.

Twenty-nine infants died before their first birthday, compared with 44 in 1963, and the infant mortality rate of 14.71 per 1,000 live births is the lowest ever recorded in the Borough.

There were 2,438 deaths registered, giving a death rate of 16·14 per 1,000 population, and an adjusted death rate (adjusted according to the Registrar-General's formula to take into account the composition of the population) of 10·17 per 1,000 population. Both these rates are lower than in 1963, when the abnormally severe winter weather took a dreadful toll of the elderly in the community.

There were no maternal deaths, but twelve deaths were recorded from pulmonary tuberculosis.

Notifiable Infectious Diseases

There were no epidemics of major infectious disease and no cases of poliomyelitis, diphtheria or cerebrospinal fever. Two cases of typhoid and three cases of paratyphoid fever were notified, as isolated cases having no epidemiological significance.

Tuberculosis

There were forty notifications of pulmonary tuberculosis and five notifications of non-pulmonary disease, compared with thirtyseven cases and ten cases respectively in the previous year.

The arrangements for treatment provided by the Wessex Regional Hospital Board have remained unchanged and there has been excellent co-operation between the Health Department and Dr. W. H. Tattersall, the Board's senior Chest Physician in Bournemouth.

Maternity and Child Welfare

The pattern of maternity and child welfare arrangements has remained unchanged, but during the year an excellent multipurpose clinic was opened in East Way, to serve an area previously relying on rented accommodation for its infant welfare facilities, and a major group of schools accommodating some 4,000 children.

In addition, a new clinic was opened at 844 Wimborne Road, where a major conversion provided accommodation not only for an Infant Welfare Centre, but for a self-contained Child and Family Guidance Centre, and enabled a number of unsatisfactory premises to be closed.

Infant welfare clinic attendances showed a resurgence over the lower figures recorded in 1963 (due to the severe winter), but the one ante-natal clinic remaining at "Avebury," 10 Madeira Road, was finally closed as the attendances had declined progressively over the years and there were ample facilities for ante-natal care

provided by the Royal Victoria Hospital and local general practitioner obstetricians.

Welfare foods continued to be available at all clinics.

Financial support was continued to the Free Church Council's Mother and Baby Home at 11 St. Alban's Avenue, and St. Thomas' Lodge, Charminster Road, and in addition the Health Committee made individual grants to a number of unmarried mothers who were confined in Homes outside the Borough.

The Corporation Day Nursery at 10 Wellington Road continued to work to capacity, and in spite of additional registrations of private nurseries under the Nursery and Child Minders (Regulation) Act, 1948, there was always a long waiting list, and according to the Health Committee's instructions, admissions were restricted to priority cases.

The Domiciliary Services of the Corporation

Domiciliary Midwifery
Health Visiting
Home Nursing
Domestic Help

These services now provide some 60-65 trained nurses and about 130 part-time domestic helps to meet the needs of those who, for one reason or another, remain at home during confinement, illness or old age, rather than go into hospital.

The available staff varies from month to month, with a gain here and a loss there, but their numbers are never sufficient to meet a demand which shows no sign of satiety.

Further details of these services are given at a later stage in the Report, but a statistical record can give but scant indication of the self-sacrificing work of this small band of women and its value to the community.

The Ambulance Service

Following a small decline during 1963, the work of the Ambulance Service once more increased to the highest figures yet recorded, a total of 64,827 patients being transported a distance of 303,256 miles.

Vaccination and Immunisation

Vaccination and immunisation against smallpox, diphtheria, whooping cough, poliomyelitis, tetanus, tuberculosis and yellow fever have continued on the lines recommended by the Ministry

of Health, and in respect of the first five diseases the general practitioner has continued to play an increasing part. None of these diseases can be completely eradicated from the world in the foreseeable future, but so far as this country is concerned they can be contained and controlled if the public accepts the simple protective measures available.

Mental Health Services

Admissions to mental hospitals, arranged by the Council's mental welfare officers, have remained curiously constant over the past few years, averaging about 420. The proportion of readmissions, due to a recurrence of symptoms has, however, continued to rise and in 1964 was some 41 per cent of all admissions.

Arrangements for the treatment of all forms of mental disorder are in the hands of the Wessex Regional Hospital Board and have, in general, worked well and there has been excellent co-operation between individual hospitals and officers of the Health Department.

A second hostel, "Wallfield," 29 Castlemain Avenue, was opened during the year for the accommodation of about sixteen patients, and although there were many staffing difficulties, twenty-five patients were admitted to the two hostels maintained by the Council.

Sanitary Circumstances, Housing and Inspection of Food

Mr. J. Randall, your Chief Public Health Inspector, has reported in detail on these very important aspects of environmental hygiene, and the action that has been taken to deal with factors affecting the public health.

A great deal of the inspectors' time has been spent on Houses in Multiple Occupation, the precise number of which is still unknown, but which represent at a conservative estimate several thousand letting units. Two additional inspectors were each employed for three months to assist with this work.

During the summer months an additional inspector augmented the established staff in the supervision of hotel kitchens, restaurants and food hygiene generally.

A detailed investigation was carried out into the safety of polythene toys imported from Hong Kong, which were discovered by the Acting Borough Analyst to have a very high lead content. Subsequent enquiry by the Home Office suggested that while in normal circumstances these toys would not cause illness, it was most undesirable that the toys should contain any lead at all, and

manufacturers were strongly advised to keep the lead content of their products below a fixed amount.

It remains for me to thank the Chairman and members of the Health Committee for their help and encouragement during the year.

My thanks are also due to my Deputy, Dr. H. C. Jennings, to Mr. J. W. Roberts, my Chief Administrative Assistant, and to all my staff for their loyal co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

WILLIAM FIELDING.

Health Committee and Staff

as at 31st December, 1964

HEALTH COMMITTEE

The Mayor (Alderman H. P. E. Mears, O.B.E., J.P.) Alderman Mrs. M. C. Wall (Chairman) Councillor F. H. Beale, M.A. (Vice-Chairman)

Council Members Alderman F. A. W. Purdy Councillor T. Ashworth		or A. W. Patton Mrs. G. Rees
" L. Brockbank " B. H. Cummins " W. C. Grove " W. P. Mooney Other Members	" " "	C. H. Roberson R. I. Swinnerton, J.P. Mrs. M. A. Webley
L. J. J. Morgan, Esq., LL.B. A. A. F. Shepherd, Esq., L.R.C.P., L.F. C. Heygate Vernon, Esq., F.R.C.S. I. Howard Jenkins, Esq., M.B., B.S., D.		

PUBLIC HEALTH DEPARTMENT					
Medical Officer of Health, Princi- pal School Medical Officer, and Medical Referee to Cremation Authority	William Fielding, B.Sc., M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.				
Deputy Medical Officer of Health, Deputy Principal School Medical Officer, Deputy Medical Referee to Cremation Authority	H. C. Jennings, M.B., Ch.B., D.P.H., D.R.C.O.G.				
Assistant Medical Officers of Health, School Medical Officers	 C. R. Haines, B.A., M.B., Ch.B., D.R.C.O.G. P. K. H. Keating, L.R.C.S.(I), L.R.C.P.(I), L.M., D.C.H. R. B. Killoh, M.B., Ch.B., D.P.H. 				
Acting Principal Dental Officer Dental Officers	M. B. Redfern, L.D.S. H. S. Hooper, B.D.S., L.D.S., R.C.S. F. E. Lockwood, B.D.S. (Univ. L'pool). (One Vacancy)				
Chief Public Health Inspector	Jack Randall, M.R.S.H.				
Deputy Chief Public Health Inspector	G. A. Morgan				
District Public Health and Food Inspectors	H. R. Ambrose A. J. Heslop B. W. Kirkton J. D. Nickells S. M. Payne A. R. Woollard H. B. Frost B. W. Kirkton J. D. Nickells S. Tweedie (1 vacancy).				
District Public Health Inspector	W. Vincent Morris				

Plus 4 Assistants.

Superintendent Health Visitor and	Committee or medianies
Non-Medical Supervisor of Mid-	
wives	L. E. Roberts.
Health Visitors	J. Ager, K. H. Beaumont, D. E.
L DE Sider plant Openings. L Rel L.D.S., R.C.S., L.R.C.P.S., M.B., B.S., D.P.M.	Blundstone, F. Darlington, M. E. Davies, E. Derry, M. H. Dutton, T. Foot, B. Geach, A. Johnson, A.D. Lane, J. Mulligan, M. Peakman, J. M. Robinson, E. Roth, C. M. Sorton, E. B. Stone, G. N. Suckamore, M. N. M. Tratsart, J. Venn, D. L. Vincent, E. M. P. Ward, J. Wilkinson, (3 vacancies).
Municipal Midwives	E. Atha, E. J. Frampton, D. Hoare, B. McBride, C. D. Reid, E. M. Schoch, D. M. A. Sharp.
Superintendent, Home Nursing Service	F. Grindrod.
Senior Nurse, Home Nursing Service	E. Lane.
Home Nurses	J. F. Bilton, M. Burnett, D. G. Collier, M. DaCosta, G. Draper, E. Finne-
	more, M. Fothergill, E. P. Gilbert, R. Guscott, M. M. L. Hemmi,
	M. Higgins, B. Jackson, M. Jones,
	T. M. Jones, C. Langley, M. Large, P. R. May, L. Mist, J. L. H. Pegg,
	E. Rampton, B. M. Rendle, E. E. Souter, G. H. Sutton, J. K. Tolley, D. E. Welch.
Senior Psychiatric Social Worker	H. S. Lovejoy
Psychiatric Social Worker	B. Harrison P. R. Neville, G. M. Parr, A. E. Stalbow
Mental Health Officers	F. H. Lewis, R. Smith P. N. Loweth, W. Vincent Morris (both part-time).
Dental Surgery Assistants	H. Allen, D. M. Cox, F. R. Hickmott B. D. M. Read.
Chief Administrative Assistant and Chief Clerk	J. W. Roberts
Senior Administrative Assistant	H. V. Humberston
Secretary to Medical Officer of Health	B. Tyrer
Section Clerks	F. J. Goode, C. Lockett, P. N. Loweth S. Murphy
Clerks	H. R. Bryan, K. F. Clarke, P. E. Crawford, W. A. Hamer, P. Hawke, W. A. Longman, M. McGovern,
	M. E. Mead, I. Murphy, E. G. Payne, J. W. Peake, M. A. Reeve, R. W. Rowe, J. A. Smith, S. Staniford, S. G. Tarrant, N. Ullithorne.
Home Help Organiser	L. A. Horwood
Assistant Home Help Organiser Ambulance Depot Superintendent Deputy Ambulance Depot Super-	I. M. Clements A. N. Platts
intendent	H. G. Martin

Training Centre	 toriino	C. R. Ashley, K. M. Reeves (Supervisors), W. E. Fisher, G. M. Nott, S. Nott, J. F. Randall, K. Starkie, B. Usher, F. Whild, (One vacancy).
Superintendent veniences and	Con-	W. C. R. Jewell
Rodent Officer		P. L. J. Sibley, plus 4 Operatives.

PART-TIME OFFICERS

Senior Medical Officer for Mental Health	G. J. Bell, L.D.S., R.C.S., L.R.C.P.S., M.B., B.S., D.P.M.
=Chest Physicians	W. H. Tattersall, M.A., M.D. A. C. Craig, B.Sc., M.B., Ch.B. A. T. Hendry, M.B., Ch.B., F.R.F.P.S.
=Consultant Children's Psychiatrist	J. E. Stirrat, M.B., Ch.B., D.P.M.
Public Analyst	H. Dedicoat, F.R.I.C.
Meteorological Registrar	A. J. Mortimer
Deputy Meteorological Registrars	C. Lockett, S. Tweedie
Dental Officer	A. P. J. Williams, L.D.S., R.C.S.

⁼ Employed by Wessex Regional Hospital Board.

General Statistics

Area of the County Borough				11,627 acres
Estimated Civilian Population	-Mid	Year	1964	151,090
Census Population, 1961				154,296
Rateable Value at 1.4.64				£9,704,442
Product of 1d. rate, 1964/65	1			£39,233

Vital Statistics

Live births { Male Legitimate 889, Illegitimate 133 } 840, ,, 109 } 87.7% ,, 12.3%		1971
Birth rate (per 1,000 population)		13.05
Stillbirths { Male Legitimate 8, Illegitimate 2 }		23
Stillbirth rate (per 1,000 total live and still births)		11.53
Total Deaths (Males 1152, Females 1286)		2438
Death Rate (per 1,000 population)		16.14
Adjusted Death Rate (per 1,000 population)		10.17
Maternal Deaths (Sepsis Nil, Other causes Nil)		Nil
Maternal Mortality Rate (per 1,000 total births)		Nil
Number of deaths of infants (under 1 year of age):— Legitimate 25, Illegitimate 4		29
Infant Mortality Rate (per 1,000 live births)		14.71
Number of Neo-natal Deaths (under 4 weeks of age)		24
Neo-natal Mortality Rate (per 1,000 live births)		12.18
Number of Early Neo-natal Deaths (under 1 week of age)		22
Early Neo-natal Mortality Rate (per 1,000 live births)		11.16
Number of Perinatal Deaths (Stillbirths and deaths under 1 week	of	
age)		45
Perinatal Mortality Rate (per 1,000 live and still births)		22.57
Deaths from Whooping Cough, all ages		Nil
Deaths from Measles, all ages		Nil
Deaths from Diarrhoea, under 1 year of age		Nil
Deaths from Pulmonary Tuberculosis (Males 9, Females 3)		12
Death rate from Pulmonary Tuberculosis (per 1,000 population)		0.079
Deaths from Non-Pulmonary Tuberculosis (Males 1, Females 1)		2
Death rate from Non-Pulmonary Tuberculosis (per 1,000 population	on)	0.013
Deaths from Cancer (Males 246, Females 250)		496
Death rate from Cancer (per 1,000 population)		3.28

Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1,971, an increase of 98 on the total for 1963 and nearly 18 per cent higher than the average births in the ten year period 1954-63.

Average number of births, 1954-1963	 1,673		
Births in 1964	 1,971		
Average birth rate, 1954-1963	 11.50 per	1,000	population
Birth rate, 1964			population
Birth rate, England and Wales, 1964	 18.4 per	1,000	population

Stillbirths

There were 23 stillbirths in 1964 compared with 33 in 1963, the majority of them occurring in hospital practice. The rate for 1964 was 11.53 compared with 17.31 in 1963.

Average number of stillbirths, 1954-1963	31
Stillbirths in 1964	23
Average stillbirth rate, 1954-63	18.59 per 1,000 total births
Stillbirth rate, 1964	11.53 per 1,000 total births
Stillbirth rate, England and Wales, 1964	16.3 per 1,000 total births

Illegitimate Births

Illegitimate births accounted for 12.3 per cent of the total births compared with 11.3 per cent in 1963.

Prematurity

(i.e. babies weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of the period of gestation).

During the year 151 premature births were notified, 7.6 per cent of the total births, and 24 less than in 1963. The great majority of these babies (144) were born in hospital, and 17 of them were stillborn.

to show I retain adapt has a	Live	Stillborn	Total
Born at home or in Nursing Homes	7 127	- 17	7 144
	134	17	151

Infant Mortality

Twenty-nine infants died before their first birthday, fifteen fewer than in 1963, and the infant mortality rate of 14·7 per 1,000 live births was the lowest ever recorded in the Borough, compared with the national average of 20·0 per 1,000 live births.

Twenty-two of the twenty-nine infants died before they were a week old, thirteen from prematurity, seven from congenital abnormalities, and two from rhesus incompatibility.

Of the remaining seven babies who survived the neonatal period, three died from congenital abnormalities.

Maternal Mortality

For the sixth consecutive year, no Bournemouth mother died following childbirth.

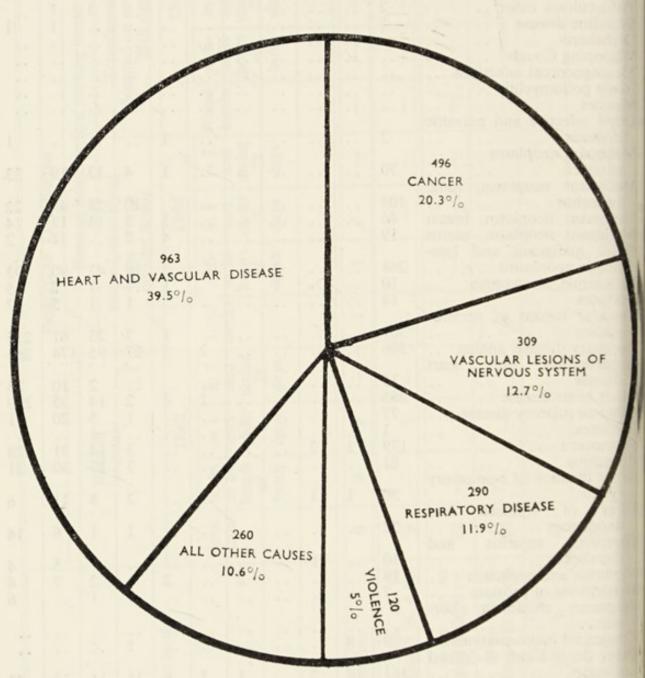
India	PREMATURE	STILLBIRTHS	Born	at home or in a nurs- ing	1		1	1	1	1
	PREM	SHILL	Bc	in hos- pital	5	5	6	1	m	17
		fore		in 7 and under 28 days	1	1		1	1	1
bojb	ome	Transferred to hospital on or before 28th day	Died	in 1 and under 7 days	1	1	1	1	1	1
	Born at home or in a nursing home	Transf spital or 28th		with- in 24 hours of of birth	N.	1	1	1	1	1
	in a nu	hoo		Total births	1	1	1	1	1	1
IRTHS	ome or	at	N.X	in 7 and under 28 days	1	1	1	1	1	1
PREMATURE LIVE BIRTHS	m at ho	Nursed, entirely at home or in a nursing home	Died	in 1 and under 7 days	1	1	1	1	1	1
TATURE	Во	ursed, chome home nursing		with- in 24 hours of birth	1	1	1		1	-
PREM		Z		Total births	1	1	1	1	5	7
			this	in 7 and under 28 days		1	1		1	1
B	Rorn in	hospital	Died	in 1 and under 7 days	1	3	1	1	1	5
	Ror	hos		with- in 24 hours of birth	∞	1	1	1	1	00
				Total births	6	6	22	26	19	127
		Weight at hirth			2 lb. 3 oz. or less	Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	Total

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1964

Causes of Death	All Ages	0—	1-	5—	15—	25—	35—	45—	55-	65—	75—
Ill Causes	2438	29	7	5	9	15	37	113	324	628	1271
'uberculosis, respiratory	12							2	3	3	4
uberculosis, other	2					18110	3.4		1	1	
yphilitic disease	2									1	1
Diphtheria									1	1	
Vhooping Cough											
1eningococcal infections											
cute poliomyelitis									1		
feasles								1		1	
other infective and parasitic		Negative.	10.00				1				
diseases	2		V				1		1	1	1
falignant neoplasm							-				1
stomach	70						1	4	13	19	33
lalignant neoplasm, lung,							-		13	1)	33
bronchus	103							10	28	43	22
Ialignant neoplasm, breast	46						3	2	14	13	14
Ialignant neoplasm, uterus	19						4	2	1 - 1	11	2
ther malignant and lym-	**						7	-		11	2
phatic neoplasms	248			1			3	19	42	90	02
eukaemia, aleukaemia	10			1			1	133	1	2	93
iabetes	14						1	i	1	5	5
ascular lesions of nervous	11							1	1	1 3	/
system	309						1	7	25	61	215
oronary disease, angina	566					2	5	27	95	174	215
ypertension with heart	500					4	3	21	95	1/4	263
diagona	35								2	10	22
than beaut discours	285					i	4	2	2	10	23
then simulates discour	77							1	14	35	229
fluenza	1							1	3	20	51
agumonia	179	i	2						14	21	100
4 1 1	81	1						3	14	31	128
ther diseases of respiratory	01							3	17	30	31
ariatom	30	1	1			1		-	0		
lcer of stomach and	30	1	1			1		2	8	11	6
dua danna	22						90			1	
	22							1	1	6	14
dia nuls a se	10		1		REH	0 2	AN		1		
	18		1		2				1.	5	4
ephritis and nephrosis	7				- 2		2	1	2	7	4
yperplasia of prostate	/								1		6
regnancy, childbirth, abor-							1			1	
ation	.:						1.				
ongenital malformations	9	8						1			
ther defined and ill-defined diseases	161	10	-					100			
Johan malalala a a dila ata	161	18	2		1	3	6	11	14	33	73
otor vehicle accidents	20	.:		3	4	3		1	6	2	1
oll other accidents	64	1	1		2	1	3	6	5	6	39
ricide	35					3	3	7	11	9	2
omicide and operations of						1	1				
war	1					1					

Proportion of Deaths from Principal Causes, 1964





DEATHS FROM PRINCIPAL CAUSES, 1964

Deaths during 1964 totalled 2,438, a decrease of 270 on the high number of deaths recorded in 1963, a year which provided the bitterest winter weather in living memory.

The main reduction was found among those degenerative diseases of the heart and arteries which normally cause some 55 per cent of the total mortality, and which during 1964 accounted for only 52·2 per cent of all deaths. It seems probable that the hard winter of 1962-63 accelerated the demise of a number of elderly people who in easier circumstances would have survived a few years longer, and that if normal climatic conditions return, the pattern of mortality will be re-established.

Deaths from respiratory disease, mainly terminal pneumonia and chronic bronchitis, decreased from 301 to 290, and deaths from bronchitis alone decreased from 130 to 81.

Deaths from cancer increased from 471 to 496, and among individual neoplasms those affecting the stomach and lung increased from 59 and 86 to 70 and 103 respectively, while those affecting the breast and uterus declined from 54 and 25 to 46 and 19 respectively.

Deaths from "violence" increased from 108 to 120, the largest increase being in suicides, from 24 to 35:—

Motor vehicle accidents All other accidents Suicide Homicide and operations of war	 1963 19 62 24 3	1964 20 64 35 1
	108	120
	Contraction and	Designation of the last of the

Notifiable Infectious Diseases, 1964

The Borough was relatively free from serious infectious disease during 1964 and there were no cases of poliomyelitis or diphtheria.

There were 557 cases of measles, a surprisingly high number in what would ordinarily be considered to be a "non-epidemic" year, but the majority of cases were quite mild and free from complications.

Two cases of typhoid fever occurred in a mother and young son, and despite the most widespread enquiries, the source of the infection was never elicited. The evidence suggested the boy was the primary case and infected his mother while she was nursing him before removal to hospital.

Three cases of paratyphoid fever occurred in children belonging to two families, the primary case being a child who had apparently been infected outside the Borough.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED DURING 1964

DUK	IING I	1904		har		0.00	d. lu			
nod from \$4 and 25 to 48 and	E ib i	Nun	nber	of Ca	ises N	Notifi	ed			
5 from 108 to 12b, the largest	At Ages — Years									
Notifiable Disease	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		
Scarlet Fever Whooping Cough	21 78 — 557 10 7 3 2 6 — 3 1	10 	6 38 265 2 1 1	15 24 — 269 — 3 1 1 —	-3 -7 -1 2 1	- 2 - 1 - 1 2 - 1 1 - 1				
Puerperal Pyrexia	$\frac{1}{8}$		1	$-\frac{1}{1}$	2 -	- 3 -	=	1		

Tuberculosis in Bournemouth

During the year forty cases of pulmonary and five cases of nonpulmonary tuberculosis were notified compared with thirty-seven and ten notifications respectively in 1963. These were, of course, new cases of the disease in Bournemouth residents, but during the same period there were fifty-nine inward transfers of cases of tuberculosis notified and treated elsewhere.

It is a commonplace, and indeed it must be expected, that a health resort with a reputation for the treatment of chest diseases will attract sufferers from these illnesses, but it does impose an additional strain not only on treatment facilities but on the many social services involved, including housing.

The general arrangements for the diagnosis, treatment and follow-up of cases of tuberculosis have remained unchanged, and excellent co-operation exists between the Chest Clinic and the Public Health Department. Two health visitors were seconded for full-time duty at the Chest Clinic and for domiciliary visits.

The notifications of new cases and deaths from tuberculosis since 1948 are shown in the accompanying table :—

		New	cases	Dea	aths
			Non-		Non-
		Respiratory	Respiratory	Respiratory	Respiratory
1948		 118	16	67	6
1949		 109	18	54	8
1950		 80	11	46	1
1951		 127	13	37	2
1952		 141	17	33	5 2
1953		 98	17	20	2
1954		 136	16	28	The state of the s
1955		 117	9	12	2
1956		 107	9	14	4
1957		 114	11	10	4
1958		 110	10	11	1
1959	7.	 81	4	7	3
1960		 66	9	5	1
1961		 37	5	6	i
1962	1	 50	4	7	2
1963		 37	10	5	1
1964		 40	5	12	2

Notifications of pulmonary tuberculosis were 22 in males and 18 in females.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

most for zoles; of	111			Tori	F	orma	al N	otif	icati	ions			U NA	de
	Number of Primary Notifications of new cases of Tuberculosis													
Age periods (years)	0 to 1	1 to 2	2 to 5	5 to 10		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	Total (all ages)
Respiratory — Males Females Non-		1.1	1 -	-	-	2 2	1 3	1 1	2 -	5 3	4 2	3 5	3 2	22 18
Respiratory — Males	-	-						- 1	<u>-</u> 1	<u>-</u> 1	1 -	-	1	1 4

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

	Diffes	New	Cases		Deaths				
	Respi	ratory	Non- Respiratory		Respiratory		Non- Respirator		
	M.	F.	M.	F.	M.	F.	M.	F.	
Under 1 year	_		_	_	_	_	_	_	
1–5 years	1	-	-	_	_	_	-	-	
5–15 ,,	-	7-3	-	-	-	-	-	-	
15–25 ,,	3 9 3 3	5	-	-	-	-	-	-	
25–45 ,,	3	1	-	2	-	-	-	-	
45–65 ,,	9	5	1	1	4	1	-	1	
65–75 ,,	3	5 2	-	-	2 3	1	1	-	
75 and upwards	3	2	-	1	3	1	-	-	
Totals	22	18	1	4	9	3	- 1	1	

SECTION 172 OF THE PUBLIC HEALTH ACT, 1936— RELATING TO THE COMPULSORY REMOVAL TO HOSPITAL OF PERSONS SUFFERING FROM TUBER-CULOSIS

No action has been taken.

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

No action has been required.

Dr. J. Stuart Robertson, Medical Director of the Mass Radiography Unit, has provided the following information of the work carried out in Bournemouth.

Report by Dr. J. Stuart Robertson, Medical Director.

MASS RADIOGRAPHY, 1964

The year 1964 has been devoted to a programme of work involving visits to many different sites throughout the large area of Hampshire, Dorset and Wiltshire served by our units. Various surveys by general public sessions and visits to large commercial and factory premises were made within the Borough and a total of 11,965 attended for examination. In addition over 300 staff employed by your authority or prospective employees have attended as part of their general medical examination at sites outside the Borough.

During the year the original 35 mm. unit has been replaced by another 100 mm. unit and vehicle and the old unit has been set up at base headquarters and been made available for an open session for the general public and council staff for a limited period each week.

From the total number examined 41 patients were referred to the appropriate chest clinic for further investigation and 18 to their own doctor. The number of significant cases of tuberculosis noted with approximately the same number of examinations as last year has increased but statistically the numbers are too small for significant comment. In general throughout the country the incidence of new cases continues to decline but the time has not yet come when there should be any relaxation in our effort to eliminate the disease. Unfortunately the incidence of lung cancer continues to show the reverse trend throughout the whole country.

No. 1 Unit (15H 100 mm.)

MASS RADIOGRAPHY SURVEYS CARRIED OUT IN BOURNEMOUTH DURING 1964

Mass Radiography Centre (1.1.64—3.1.64) Bowmaker House, Lansdowne Aerograph de Vilbiss, West Howe Kinson Ensbury Park Winton Pokesdown		Males 229 135 202 593 455 895 1426	Females 260 260 77 829 594 1189 1701 4910	Total 489 395 279 1422 1049 2084 3127
A brief analysis of the results is as follows: Number X-rayed Number referred to Chest Clinic Tuberculosis, requiring hospital treatment Tuberculosis, requiring supervision only Carcinoma Cardiovascular Lesions Other non-tuberculous conditions Not yet classified Not yet classified		8845 29 Males 4 5 1 4 1	Females 3 2 2 2 4 3	Total 3 6 7 1 8 4
		15	14	29
Referred to Doctor=18 Cardiovascular Lesions Other non-tuberculous conditions	2.40 2.40 2.40 2.40	Males 9 1	Females 6 2	Total 15 3

No. 2 Unit (15J 100 mm.)

			Males	Females	Total
The Chemists Supply Co. Ltd., Boscomb	e		20	40	60
Midland Bank, Bournemouth			44	16	60
Bournemouth Corporation Transport De	nartmen	t	75	17	92
Anglo-Continental School of English	paramen		236	157	393
Inland Revenue, Crown Chambers	0		96	101	197
Bassetts & Son, Boscombe			11	49	60
Broglia Press, Winton			33	14	47
CI D III 'II			11	23	34
Challer Dand Hamital			88	233	321
			16	29	45
Poole Road Hospital	11	::	73	16	89
Hunt & Co. (Bournemouth) Ltd.,			4	45	49
Marks & Spencer Ltd., Boscombe					
Co-operative Dairy, Malmesbury Park			50	14	64
George Hartwell, Ltd., Charminster			39	12	51
Normandie Hotel, Bournemouth			32	.41	73
Portchester Road			23	9	32
G.P.O. Brassey Road			39		39
Royal Bath Hotel			73	32	105
Vickers Armstrongs Ltd., West Howe			108	8	116
Boyland & Son Ltd., West Howe			85	13	98
James Drewitt & Son Ltd., West Howe			132	23	155
Durley Hall Hotel			9	17	26
Douglas House Hospital			28	15	43
			1325	924	2249
Number X-rayed			2249		
Number referred to Chest Clinic			0		
Number referred to chest China	c	• •	Males	Females	Total
Tuberculosis, requiring hospital treatmen	t		1		1
Tuberculosis, requiring supervision	1,000		3	1	4
Cardiovascular Lesions			_	î	1
Other non-tuberculous conditions			2		2
Not yet classified	1		_	1	1
				-	
			6	3	9

Static Unit (15K 35 mm.)

Portchester Road (15.12.64—31.12.64) Referred for further investigation = 3	490	381	871
Carcinoma	1	=	1

Maternity and Child Welfare

At the end of 1964 there were 14 Infant Welfare Centres in the Borough providing 22 infant welfare sessions weekly. Clinics formerly held in church premises in Winton, Moordown and Ensbury Park were closed and transferred to new premises at 844 Wimborne Road, a central clinic providing a wide variety of services. In addition, an extra morning session at East Howe Clinic commenced on 15th October.

Infant welfare clinic attendances totalled 53,596 during 1964, compared with 46,546 in the previous year, and although these figures represent a very real upward trend in attendances, the 1963 total had been very adversely affected by the unseasonable weather during the first quarter, and must be compared with 50,817 attendances in 1962. Eight of the 14 clinics at present in operation are owned by, or in the full-time occupation of the Corporation,

ATTENDANCES AT INFANT WELFARE CENTRES, 1964

Clinic	Infants under 1 year	Pre- school Children	Total	Sessional Average
Avebury Boscombe Charminster East Howe (p.m.) East Howe (a.m.) East Way Ensbury Park Iford Kinson Malmesbury Park Moordown Northbourne Pokesdown (a.m.) Pokesdown (p.m.) Strouden Tuckton West Cliff West Howe (a.m.) West Howe (p.m.) Winton (Mon. p.m.) Winton (Fri. a.m.) Winton (Fri. a.m.) Winton (Fri. p.m.) Castle Lane	1459 1607 1258 2118 105 1589 728 1705 1649 1916 535 1358 1374 1439 1141 1201 1229 803 1394 559 304 2177 1811 694	992 1079 914 2316 101 1099 763 1397 1378 1191 590 945 497 537 1285 1391 550 1154 1613 544 265 1146 1104 592	2451 2686 2172 4434 206 2688 1491 3102 3027 3107 1125 2303 1871 1976 2426 2592 1779 1957 3007 1103 569 3323 2915 1286	47 51 42 85 19 54 50 59 57 59 40 44 35 40 46 54 37 39 57 55 26 66 58 46
	30153	23443	53596	50

and there are great advantages in premises open to the public for periods outside the normal clinic hours.

All clinics are supervised by a medical officer, one or two health visitors, and a number of voluntary helpers, the successors of and in many cases former members of the Bournemouth Infant Welfare Voluntary Association, who continue to give magnificent service.

Ultra Violet Light Clinics

A small number of children, 5 in all, made 27 attendances at the Stewart Road Clinic.

Welfare Foods

The sale of welfare foods, which was transferred to local authorities from the Ministry of Food in 1954, has continued at all infant welfare centres, but the demand has steadily fallen, and now represents only about a quarter of the sales in 1955. The reason is undoubtedly the preference most mothers show for the branded article, and although the cost may be a little more, a very wide selection now exists from which to choose.

N.C. ID: INCH	1958	1959	1960	1961	1962	1963	1964
National Dried Milk (tins)	26,288	24,073	20,584	15,801	13,789	11,475	9,865
(bottles)	7,483	7,174	7,312	5,086	2,478	2,256	2,056
Vitamin A and D Tablets (packets) Orange Juice (bottles)	6,151 58,708				3,430 22,265		

Ante Natal Supervision

Former Annual Reports have commented on the declining attendances at the Corporation's ante-natal clinic at "Avebury," 10 Madeira Road. The clinic was finally closed at the end of October, and 174 mothers made 199 attendances during the period January — October.

The Local Medical Committee had been fully informed of the Corporation's decision and agreed that the local general practitioner obstetricians, together with the hospital ante-natal clinics, were fully capable of carrying out all necessary ante-natal supervision.

BIRTHS OCCURRING IN BOURNEMOUTH, 1964

	19	58	19	59	19	60	19	61	19	62	19	63	19	64
	No.	%	No.	%	No.	%								
Domicil- iary Births	533	27-2	559	27.6	616	29.3	601	28.3	499	20-9	365	14	348	12.1
Institu- tional Births	1425	72.8	1464	72.4	1484	70-7	1525	71.7	1894	79.7	2247	86	2523	87-9
Totals	1958	100	2023	100	2100	100	2126	100	2393	100	2612	100	2871	100

During 1964 the following births were notified as occurring in the Borough:

Domiciliary births	348 (365)			
Institutional births	2523 (2247)	Royal Victoria Hospital	1152	(970)
		Aston Grays Maternity Home	424	(430)
		Firs Maternity Home	813	(669)
		Free Church Council Maternity Home	55	(57)
		Private Nursing Homes	79	(121)
			2523	(2247)

Total 2871 (2612)

Figures in brackets indicate corresponding numbers for 1963.

This total is therefore 259 more than in 1963, there having been an increase of 276 in the number of institutional births and a decrease of 17 in the number of domiciliary births.

In addition 51 Bournemouth patients were delivered in the Hospital Management Committee's Maternity Home at Barton-on-Sea and 63 at Poole General Hospital.

Infectious Diseases associated with Childbirth

One case of puerperal pyrexia but no cases of ophthalmia neonatorum were notified during the year.

Nursery and Child Minders (Regulation) Act, 1948

Fifteen premises were registered under the Act, compared with ten in 1963, providing accommodation for 165 children (105 in 1963):—

Address	No. and age of children accepted	Hours of opening
40 Surrey Road	12 2-5 years	9.30 a.m. to 12.30 p.m.
"Clynch", 81 Glenferness Avenue	14 2-5 years	9.30 a.m. to 12.30 p.m., excepting school holidays
172 Seafield Road	4 2-5 years	9.0 a.m. to 4.0 p.m.
2 Snowdon Road	21 2-5 years	8.30 a.m. to 5.30 p.m.
195 Pine Road	6 2-5 years	9.30 a.m. to 12.30 p.m.
8 Warren Edge Road	12 2-5 years	9.15 a.m. to 12.15 p.m.
22 Rosemount Road	10 3-5 years	9.30 a.m. to 12.30 p.m.
42 Grosvenor Road	6 2-5 years	8.0 a.m. to 4.0 p.m.
28 St. Alban's Crescent	10 2-5 years	8.30 a.m. to 5.0 p.m.
149 Parkwood Road	8 2-5 years	8.30 a.m. to 4.30 p.m.
23 Bryanstone Road	25 2-5 years	8.30 a.m. to 4.30 p.m.
Methodist Church Hall, Heron Court Road	14 2-5 years	9.0 a.m. to 12.00 noon
200 Columbia Road	10 2-5 years	8.30 a.m. to 4.30 p.m.
90 Stewart Road	8 2-5 years	8.30 a.m. to 4.30 p.m.
6 Beaufort Road	5 2-5 years	8.30 a.m. to 4.30 p.m.

It will be noted that all registrations are in respect of the toddler

age range only, and there are no premises registered for the reception of children below the age of two years.

The public health inspector and fire prevention officer advised on any matters requiring attention, and the district health visitor made regular visits to all nurseries in her area.

Family Planning

The Family Planning Association held three clinic sessions a week at their premises in Stafford Road, and the local authority made a grant in respect of cases referred on medical grounds.

Mother and Baby Homes

Financial grants were continued by the local authority to the two mother and baby homes maintained by voluntary organisations within the Borough. Eight local girls were admitted to the Free Church Council Home at 11 St. Alban's Avenue compared with eight in 1963. One local girl was admitted to St. Thomas' Lodge as a maternity case, and two as "shelter" cases.

In addition, five Bournemouth girls were provided with accommodation outside the Borough at the expense of the local authority, compared with eleven in 1963.

Day Nursery

The Corporation Day Nursery at 10 Wellington Road had an average daily attendance of 31 babies and young children, compared with 32 in 1963, and in spite of the increase in the number of registered Daily Minders, the waiting list at the Corporation Day Nursery was a formidable one.

Admissions were restricted to the "priority" groups.

Dental Treatment for Mothers and Young Children, 1964

Report by Mrs. M. B. Redfern, L.D.S., Acting Principal Dental Officer

The year 1964 was a sad and difficult year for the School Dental Service. Our Principal Dental Officer, Mr. A. A. Wood, L.D.S., continued in ill-health and in September regretfully retired. He was, unfortunately, unable to enjoy a well earned respite from a lifetime's work and shortly after this retirement he died. Our deepest sympathy goes to his widow and son. Mr. Wood was held in high regard by all his colleagues, and his unfailing courtesy and sense of duty will always be remembered by all who knew him.

Mrs. H. S. Hooper, Dental Officer at Avebury, became seriously ill in May and she too, regretfully had to retire at the end of the year. She was greatly loved by all who came in contact with her and our best wishes go to her for a return to full health.

A skeleton dental service has been maintained at the Central and Pokesdown Clinics mainly through the stalwart efforts of Mr. A. P. J. Williams, a part-time dental officer and we are very grateful to him for the invaluable help he has given us.

Because of the staffing difficulties there was an unavoidable drop in the number of toddlers and expectant and nursing mothers attending for treatment. This is much to be regretted and it is hoped that if, and when, the staffing position improves, we shall be able greatly to extend this very important aspect of our dental services.

Dental Health Education

All mothers attending the ante-natal clinics and mothercraft and relaxation classes were told of the great importance of good dental health, and those who were not under the care of their own dentists were offered appointments for examination and treatment if necessary, at their nearest dental clinic. Inevitably this aspect of our work has declined since dental treatment for expectant and nursing mothers is now exempt from all charges under the National Health Service, and in order to obtain continuity of treatment they are encouraged to seek treatment from their own dentists.

Miss L. E. Roberts, Superintendent Health Visitor, and her enthusiastic team showed great interest in the work of dental health education and their efforts were most valuable. A great deal of useful work in this field was carried out at Ante Natal and Mothercraft Clinics and Infant Welfare Centres, in addition to talks at schools. It is hoped to extend this aspect of dental health as more staff becomes available.

Maternity and Child Welfare

(a) NUMBERS PROVIDED WITH DENTAL CARE

imperior date of the car date	Examined	Needing treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	26	26	22	16
Children under five	671	182	138	138

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	Extractions	Local	Jocal General	FIIIIIBS	and gum treatment	treatment	graphs	Com- plete	Com- plete
Expectant and Nursing mothers	20	6	2	25	6	II.Z	5	2	2
Children under five	77	∞	36	286	2	62	6	Z	II.

The Domiciliary Services Provided by the Corporation

There was no material change in the arrangements whereby nursing and midwifery staff attended patients living in their own homes, either for the purpose of giving advice or for treatment.

Only in domiciliary midwifery has the work declined, owing to the increasing use of general practitioner maternity homes for confinements.

Domiciliary services for the elderly and chronic sick have been required on an increasing scale as the proportion of the elderly in the population increases, and as the hospitals change their role to conform with the "Hospital Plan," and this trend is likely to continue.

Pressure on the geriatric beds provided by the Bournemouth and East Dorset Hospital Management Committee has continued to be extremely heavy, and there still appears to be a shortage of accommodation, as evidenced by long waiting lists for admission. The two full-time geriatric health visitors provided by the Council have confined their activities to hospital liaison, the social assessment of patients on the hospital waiting list and the regular visiting of elderly persons living alone, and in this way have been able to help the hospital authority to ensure that all accommodation is occupied by patients urgently requiring it.

In spite of these activities there continues to be a good deal of distress among elderly residents, some of whom are in straitened circumstances, indifferent health and often without friends or relatives in the area who could advise or help them.

More and more the domiciliary services are directing their energies towards services for the elderly and chronic sick, and in this connection the nursing staff is admirably complemented by the domestic help service.

Domiciliary Midwifery Service

Seven full-time midwives were directly employed by the Council and attended 347 confinements (348 births), compared with 357 confinements in 1963.

This decline in domiciliary confinements appears to be directly connected with the improved facilities for confinement in general practitioner maternity units in the area, and particularly with the opening of the 29-bedded Firs Maternity Home in September, 1961. During the year 813 admissions were made to the Firs Maternity Home compared with 669 in 1963, and the confinements in all general practitioner maternity homes increased from 1,099 to 1,237.

Domiciliary births now only represent 12 per cent of total births, a very low proportion compared with the national average, and while there are obvious advantages to the mother in an institutional confinement, there are perennial staffing problems in all maternity units, often leading to early discharge of the mother and baby.

During the year, 160 early discharges, chiefly from the maternity unit at Poole General Hospital, were taken over by the domiciliary midwives, and their nursing continued until the 14th day following confinement.

Towards the end of 1963 enquiries were made by the Hospital Management Committee as to whether Bournemouth could assist by accepting students from the Part II C.M.B. Training School at Poole General Hospital, and two students commenced duty in September, 1964.

Details of domiciliary confinements attended were :-

Total No. of confine-	Primi-	Multi-		nini	No.	OF PI	REVI	ous	PRE	GNA	ANC	ES	
ments	para	para	1	2	3	4	5	6	7	8	9	10	
347	24	323	126	93	59	28	6	4	4	2	_	1	

			AGE GROU	PS		
15-20	20-25	25-30	30–35	35-40	40-45	
15	98	124	74	32	4	innb's

Gas and air analgesia was given in 291 cases and pethidine in 237 cases.

MATERNITY CASES ATTENDED

	Midw	vives in the	area durin	g 1964
	Do	miciliary Ca	ases	Cases in
	Dr. not Booked	Dr. Booked	Totals	Institu- tions
(i) Midwives employed Authority (ii) Midwives employed	by Vol-	345	347	nemasan Sintato
untary Organisations (a) Under arrangement the L.H.A. in of Section 23	ents with oursuance of the	ola grivi		stantes
National Health		_	_	
(b) Otherwise Hospitals not to to the Minister	ransferred er under	health v		n anT
the National Service Act) iii) Midwives employ	ed by —		Beat many	55
Hospital Manageme mittees or Boards of nors under the	of Gover-			a odd lig
Health Service Act iv) Midwives in Private	Practice -	g simio s		2360
(including Midwives in Nursing Homes)	employed —			79
Totals	2	345	347	2494

MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES ACT, 1951

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

(a)		Domicilia Where the the patie	ne Medic	cal Pr				
		National	Health S	ervice	 	 	 	
Transfer		Others					-	-
		of barion					_	
(b)	For	cases in I	nstitutio	ns	 	 	 	4

Health Visiting

At the end of 1964 the health visiting establishment consisted of a Superintendent and 26 health visitors, but there were three posts vacant at 31st December. Two health visitors were seconded for full-time duty to the Chest Clinic, where in addition to assisting in the clinic and X-ray sessions they undertook contact tracing, housing enquiries and the supervision of patients on domiciliary treatment; and two health visitors were employed full-time as geriatric health visitors, spending most of their time visiting elderly and aged people living alone, assessing the home circumstances of patients recommended for admission to the chronic sick hospitals, and maintaining a close liaison with the almoners at Christchurch Hospital.

The remaining health visitors undertook general duties in the community and in the local authority's schools, staffing the Infant Welfare Centres, visiting expectant mothers and young children, problem families, elderly people who were not specifically visited by the geriatric visitors, undertaking health education in schools, and by advice and example encouraging a healthy mode of life among all sections of the community.

Although the strength of the health visiting staff has been maintained, it has proved extremely difficult to increase the establishment and thereby extend health visiting activities, the visiting of old people, and the supervision of the chronic sick in their own homes. There is a great field for activity here, in accident prevention, in preparation for retirement and the use of leisure time, and in the early detection of physical and mental conditions requiring medical care.

During recent years various schemes have been adopted, mainly in county areas, whereby health visitors are attached to group practices and partnerships of general practitioners, and while considerable success has been claimed for the experiment in some areas, the experience of others has not been so strikingly successful.

Nearly ten years ago a health visitor was attached for part-time duty to a large partnership in the northern part of the Borough, and this has continued although lack of staff has prevented any extension of the arrangement. The success that has resulted from even this partial attachment suggests that in practices of this type there is a good deal to be gained on all sides, but Bournemouth has few large medical partnerships and many single-handed doctors.

While every effort will be made to extend health visitor attachment in suitable cases, it can only be achieved by a full and expanding establishment.

For some years past Bournemouth has been one of the sponsoring authorities of the Health Visitor Training Course at Southampton University, and three student places are reserved for Bournemouth applicants. It is not always possible to appoint three suitable candidates, and during 1964 one student qualified as a health visitor and started duty in Bournemouth, while two students commenced training.

During the year 28,091 interviews and visits were undertaken, compared with 32,500 in the previous year.

Liaison Arrangements

Liaison arangements between the local health authority and the hospitals of the Bournemouth and East Dorset Hospital Management Committee are extremely good, and the health visitors take a prominent part in these arrangements. In addition to the health visitor link with the Chest Clinic and the Geriatric Unit at Christ-church Hospital described above, there is a health visitor liaison officer with the Paediatric Unit at Christchurch Hospital, and a similar arrangement with the Women's V.D. Clinic at the Royal Victoria Hospital.

Infant Welfare Clinics

Two health visitors attended the majority of the 22 Infant Welfare Centre sessions held each week, discussing problems with the mothers, weighing babies where necessary and referring matters requiring further advice to the clinic doctor. The majority of clinics were attended by one of the full-time Assistant Medical Officers of Health employed by the local authority, but a number of part-time medical officers, often retired from the public health service, are called upon in emergency.

Total attendances were 53,596 in 1964 compared with 46,546 the previous year, and there were particularly heavy attendances at Winton, East Howe, Kinson, Malmesbury Park, West Howe and Iford Clinics.

A number of these clinics are held in very unsatisfactory rented premises, and the help of the ladies of the former Bournemouth Infant Welfare Voluntary Association has been greatly appreciated, as they have carried out a wide variety of tasks, often under very trying conditions.

Mothercraft Classes

Mothercraft classes have continued both as a senior school activity, and also for expectant mothers. The eleven series of classes held at Avebury and East Howe Clinics were attended by 377 mothers.

Relaxation Classes

Classes for expectant mothers were held at Avebury, Pelhams, East Howe, Pokesdown and Strouden. There were, in all, 65 courses of 10 lecture/demonstrations each, attended by 648 mothers.

Fathercraft Classes

Ten classes for fathers, chiefly those embarking on parenthood for the first time, were held at Avebury, at which 46 fathers attended.

Visits to the Elderly and Aged

During 1964 a total of 2,190 elderly and aged persons received 5,735 visits, of whom 430 were visited at the request of the Hospital Management Committee regarding their application for admission to a chronic sick bed.

If they need visiting at all, elderly and aged persons need regular and frequent visits if physical and mental deterioration is to be detected in its earliest, treatable stages, and this applies particularly to those living alone. The two full-time geriatric health visitors spend a considerable part of their time with this category of person, but only a fairly substantial increase in health visitor personnel can extend this very necessary form of social service to a wider circle.

Special Services for Elderly and Handicapped Persons

(a) Laundry Service. The laundry service provided draw-sheets, mackintosh sheets, air rings and covers to 70 cases, mainly persons suffering from double incontinence and on the waiting list for Christchurch Hospital. These articles were delivered to the homes of the patients three times per week, and the dirty linen collected and laundered at Christchurch Hospital.

(b) Chiropody Service. The Chiropody service, which is available free of charge to old people, disabled persons and expectant mothers who are unable to make private arrangements, commenced in September, 1957, on the basis of one session per week, and by the end of 1964 an average of four sessions per week were held. The demand is now such that the services of a full-time chiropodist is required, and this arrangement would have the added advantage of day-time sessions, instead of early evening sessions as at present.

CHIROPODY CLINIC 1964

Number of sessions held

radioci of sessions neid				200	
Number of persons treated				654	
Number of treatments given				1,946	
				otal number	
			tre	eatments giv	en
Number of persons receiving	1	treatment	142	142	
" "	- 0.0	treatments	178	356	
,, ,,	3	treatments	179	537	
" "	4	treatments	80	320	
" "	5	treatments	29	145	
" "	6	treatments	14	84	
" "	7	treatments	10	70	
" "	8	treatments	6	48	
",	9	treatments	2	18	
"	10	treatments	5	50	
,, ,,	11	treatments	1	11	
,, ,,	12	treatments	1	12	
,, ,,	13	treatments	2	26	
" "	14	treatments	1	14	
22 22	16	treatments	1	16	
	18	treatments	2	36	

61 treatments

61

1,946

654

Problem Families

The arrangements for helping problem families continued as before, and regular monthly meetings of the Family Case Committee allowed full discussion of current problems and the diversion of assistance and enquiry into the most appropriate channels.

The results of work with problem families are almost invariably disappointing to those who expect substantial improvements. Success is more often measured by the maintenance of the *status quo*.

Health Education

Health education continued during 1964 on the lines described in previous Reports, being a combination of specific instruction in schools, and conversational approaches to individuals and small groups in the Infant Welfare Clinics and elsewhere.

The need for a full-time health education officer has become more and more evident as the years pass, not only to co-ordinate the efforts of a number of officers to whom health education is only a part-time activity, but to bring skilled direction to what should be a really professional job. It is hoped that such an appointment can be made during 1965.

The Deputy Medical Officer of Health carried out an intensive anti-smoking campaign in the schools, with talks, discussions and film shows, using material recommended by the Ministry of Health. The travelling unit sponsored by the Central Council for Health Education and the Ministry of Health also visited Bournemouth for a two-day campaign.

HEALTH VISITING

Ineffective	Visits made by H.Vs.	1	1	1	1	I	1	3,986	4,532	4,488	4,106	3,590	4,701	4,701	6,072	5,981
Visits by	culosis	1		1	1,401	1,607	1,525	1,297	1,562	1,532	1,791	1,877	1,953	2,026	1,712	1,361
Visits to TB house-	in "Other Cases"	1	1	ı	223	190	207	279	230	221	184	124	119	179	84	40
Other Cases	Total Visits	5,360	8,542	6,190	1,657	1,869	1,881	2,705	4,362	4,494	4,384	5,635	6,221	6,081	7,062	6,312
Children between the	Total Visits	12,810	12,893	11,350	11,830	11,460	11,712	12,136	11,920	11,349	10,354	8,307	12,870	11,242	12,139	10,150
n under of age	its Total	7,687	8,262	8,357	8,904	080'6	100'6	8,615	8,247	8,007	7,653	6,823	8,788	8,674	9,631	8,428
Children under 1 year of age	Visits First	1,674	1,601	1,598	1,642	1,592	1,496	1,483	1,513	1,645	1,609	1,609	1,688	1,861	1,849	1,934
ctant	its Total	1,314	1,507	1,457	1,741	1,991	1 972	2,166	2,122	1,963	2,076	2,070	2,450	2,136	1,956	1,840
Expectant	Visits First	743	608	858	806	1,100	1,047	1,117	1,162	1,156	1,130	1,114	1,260	1,132	1,131	1,156
	Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964

THE HOME NURSING SERVICE

The Home Nursing Service, consisting of a Superintendent, a Senior Nurse, 25 full-time and two half-time nurses, made 78,386 visits during 1964, compared with 75,730 visits in the previous year.

As in previous years, about three-quarters of all visits were to elderly and aged people, and the classified list of new patients attended during 1964 shows increases in cases of digestive illnesses, diseases of the nervous system, and cancer, but a reduction in cases of heart disease.

The pattern of illness requiring domiciliary nursing remains broadly unchanged, but injection therapy has become increasingly common, especially the injection of vitamin preparations.

New Patients attended during 1964

In all, 3,478 patients were served during the year, of whom 2,634 were new cases, made up as follows:—

Complaint					Λ	No. of Cases
Tuberculosis	. 12					32
Respiratory system (oth	er tha	an T.B.	.)			200
Heart and Circulatory s	ysten	1				461
						356
Reproductive system .						77
Maryous system						240
Hrinary system						92
Cancer						272
Diabetes						77
Injuries, burns, etc						125
Canility						186
Rheumatism	. 1					97
Leg Ulcers and Skin con	nditio	ns				142
Ear, Nose and Throat c				y Millou		12
Preparation for hospital						201
Miscellaneous condition						64
						2,634
						Description of the last of the

The age distribution of all patients treated in 1964 was:

	110	Pa	itients nursed		
	r ni ai	Male	Female	Total	Percentage
0- 4 years		17	8	25	0.72
5-14 years		12	11	23	0.66
5-24 years		21	47	68	1.96
25-44 years		64	182	246	7.07
5-64 years		225	534	759	21.82
5-74 years		292	624	916	26.34
75- years	1.100	400	1041	1441	41.43
		1031	2447	3478	100-00

Sources of referral of new cases in 1964 were:

			 	1,846
			 	589
			 	160
			 	2
nd Ch	nest Cli	nic	 	37
				2,634

During the year, 2,645 cases were removed from the register owing to:

Admission to	hospita	al	 	 	524
Died			 	 	280
Satisfactory of	outcome	of case	 	 	1,841
					2,645

The Nursing of Sick Children

Just more than one per cent. of patients nursed during 1964 were below the age of 14 years, chiefly for complications of infectious disease and minor medical and surgical conditions. Home nurses attended child patients on their own districts and no special arrangements were necessary.

The Treatment of Visitors

Requests for the continuation of special treatments were received on 178 occasions, and 1,590 visits were made to visitors in hotels, boarding houses and private holiday accommodation.

Injection Therapy

During the year, 33,064 injections were given to 1,369 patients, of which 8,777 were insulin injections.

Daily injections were necessary for 291 patients, and 123 patients received injections twice a day.

Late Visits

The number of visits made between 8.0 p.m. and 8.0 a.m. decreased from 429 in 1963 to 290 in 1964, and were carried out by the home nurse on whose district the request arose.

At the end of the year 833 cases remained under treatment, receiving visits as follows:

Twice Daily	Daily	Alternate days	Twice weekly	Thrice Weekly	Weekly	Fort- nightly	Monthly
10	81	25	134	49	292	129	113

A summary of the year's work and a comparison with previous years, was as follows:

The state of the s								
21 0 11	1957	1958	1959	1960	1961	1962	1963	1964
Number of patients on the Register, 1st Jan.	720	777	761	679	756	766	789	844
Number of new patients attended	3249	3054	2763	2724	2658	2547	2655	2634
Total number of	-			-		-	-	-
patients attended Number remaining on the Register on 31st	3969	3831	3524	3403	3414	3313	3444	3478
December	777	761	679	756	766	789	844	833
Number of Patients taken off the Register Total number of nursing	3192	3070	2845	2647	2648	2524	2600	2645
	83,610 8	30,239	76,086	76,031	78,713	75,541	75,7307	78,386

The illnesses of patients were classified as follows:

	1957	1958	1959	1960	1961	1962	1963	1964
Tuberculosis	 146	139	107	93	86	62	61	42
Pneumonia	 68	58	47	38	42	43	58	42
Miscarriages, etc.	 18	26	18	24	16	36	39	41
Surgical	 427	447	437	394	494	429	395	452
Medical	 3271	3136	2892	2830	2748	2705	2855	2847
Infectious diseases	 39	25	23	24	28	38	36	54
	3969	3831	3524	3403	3414	3313	3444	3478
	-							-

DOMESTIC HELP SERVICE

At the end of the year the Domestic Help Service consisted of an Organiser, an Assistant Organiser, and 125 part-time domestic helps, working over 126,000 hours and serving 1,415 cases.

The case summary shows that as in previous years roughly 75 per cent of all cases were in the category of the elderly and aged, and that this group received practically 80 per cent of all the help provided.

The Domestic Help Service is still far short of requirements, and recruitment of new members is lagging behind the targets fixed in the Ten Year Plan.

In spite of staffing problems, the service continued to give splendid support to the other domiciliary services in many difficult and distressing cases.

SUMMARY OF CASES HELPED

Type of Case	Number	Hours spent	Percentage of Total Hours	Average hours per case
Old age	1054	99,344	78-6	94.3
Illness	239	20,318	16.1	85.0
Tuberculosis	18	1,354	1.1	75.2
Confinements	41	2,132	1.7	52.0
Mental Deficiency	25	2,253	1.8	90-1
Maternity and Child Welfare	37	922	0.7	24.9
Problem Families	1	20	0.0	20.0
TOTALS	1,415	126,343	100-0	89-3

Classification of cases served (by ages).

Under 15 years .		100.50	37	2.6%
15-64 years			324	22.9%
65 years and over			1054	74.5%
			1415	100.0%

Ambulance Service

During 1964 the Ambulance Service was maintained by ten ambulances and four dual-purpose vehicles provided by the local authority, and a variable number of sitting cars controlled by the Hospital Car Service. Ambulances were available on a complete 24 hours a day cover, but sitting cars were used only for daytime hospital work.

There was an increase in the number of patients carried, from 58,652 to 64,827, and the mileage similarly increased over the figure for the previous year, from 281,045 to 303,256.

These increases were almost entirely due to increased attendances at local hospitals, either for in-patient or out-patient treatment, and in spite of vigorous attempts to co-ordinate journeys and to spread over journeys during peak periods, these attempts have not been entirely successful and some delays have occurred. It would seem that the appointment of a hospital liaison officer by the Bournemouth authority, or in collaboration with neighbouring authorities, would be the first step in promoting the most efficient use of existing vehicles and personnel.

TABLE SHOWING PATIENTS CARRIED AND MILEAGES COVERED BY AMBULANCE SERVICE SINCE 1949

Year	Lo Auth		St. J Assoc	John iation	Hos Car S		То	otal
1 car	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage
1949	7,990	82,824	1,736	30,513	7,141	89,997	16,867	203,334
1950	11,937	100,634		31,325	7,438	82,431	21,920	214,390
1951	12,335	103,192		25,401	13,132	82,467		211,060
1952	15,340	110,424		21,391	15,639	71,425		203,240
1953	18,782	127,334	2,159	13,619	17,446	73,258		214,211
1954	20,683	127,975	268	1,228	17,353	71,456	38,304	200,659
1955	23,104	142,991	163	1,131	18,241	69,740	41,508	213,862
1956	27,409	148,584	271	1,430	18,006	72,625	45,686	222,639
1957	30,736	159,511	427	1,487	17,257	70,866	48,420	231,864
1958	31,037	157,235	557	1,264	18,441	82,911	50,035	241,410
1959	35,030	170,938	572	1,777	19,494	89,526	55,096	262,241
1960	35,275	171,315	3,808	13,295	20,385	96,220	59,468	280,830
1961	36,196	173,192	4,639	15,856	21,686	109,518		298,566
1962	35,912	176,452	4,792	15,798	20,589	112,442		304,692
1963	36,266	169,053	3,484	9,917	18,902	102,075	58,652	281,045
1964	42,750	183,068		-	22,077	120,188	64,827	303,256

Radio control has continued to play a major part in reducing the mileage covered per patient, and it is commonplace for an ambulance and crew to be away from the Depot for their whole tour of duty, being directed from one calling place to another through the radio transmitter at Portchester Road.

	Ave	rage miles cover	ed per patient car	rried
Year	Local Authority	St. John Association	Hospital Car Service	Total all Services
1949	10-36	17.57	12.60	12.05
1950	8.43	12.31	11.08	9.77
1951	8.36	8.53	6.27	7.42
1952	7.19	6.76	4.56	5.95
1953	6.78	6.30	4.19	5.58
1954	6.18	4.58	4.11	5.23
1955	6.18	6.94	3.82	5.15
1956	5.42	5.28	4.03	4.87
1957	5.19	3.48	4.11	4.79
1958	5.07	2.27	4.50	4.82
1959	4.88	3.11	4.59	4.76
1960	4.85	3.49	4.72	4.72
1961	4.78	3.42	5.05	4.78
1962	4.91	3.30	5.46	4.97
1963	4.66	2.85	5.40	4.79
1964	4.28		5.44	4.68

THE WORK DONE BY THE SERVICE DURING 1964 IS SHOWN IN THE FOLLOWING TABLE

	Walter	Patient	Patients Carried	Carried	Abortive	Transport of	Fotal	Tran	sport	No. of
	Venicles	Carrying	Aggidant		Sarrica	Analgesia	Mile-	fa	Kaii	Stan
Service	31.12.64)	contineys	or Emergency	Other	Journeys	Midwives, etc.	age	No.	Rail Miles	No. Rail 31.12.64 Miles
Directly provided	Ambulances (10)	5,919	2,460	26,861	421	-	128,657	95	95 13,177	33
	Dual purpose (4)	1,936	147	13,282	157	1	54,411		157 19,680	_
							not bo		1	
Hospital Car Service		6,280	-	22,077	35	1	120,188	1	1	1
		14,135	2,607	62,220	613	1	303,256 252 32,857	252	32,857	33

Vaccination and Immunisation

Protection against smallpox, diphtheria, whooping cough, and poliomyelitis continued through the year under schemes approved by the Ministry, and general practitioners co-operated in carrying out the work. The one change in the pattern followed a recommendation by the Ministry that primary vaccination against smallpox in infants should be carried out during the second year of life instead of during the first year, owing to the smaller danger of serious complications at the later age. Wherever possible protection against tetanus is included in the programme, usually combined with diphtheria and whooping cough immunisation, and thereby avoiding the necessity of giving anti-tetanic serum if the child should subsequently receive treatment as a casualty.

Vaccination against Smallpox

2,120 persons received protection against smallpox, 1,669 by general practitioners and 451 in the local authority clinics. The total included 788 infants under the age of two years.

Immunisation against Diphtheria

A total of 3,091 children received protection against diphtheria, either as a single antigen or combined with other antigens. 1,305 were protected by general practitioners and 1,786 at local authority centres.

Details follow:

	Children born in years							
	1964	1963	1962	1961	1960	1955 —59	1950 —54	Total
A. No. of children who completed a full course of Primary Immunisation in the Authority's Area (incl. temporary residents) during the 12 months ended 31st December, 1964.	806	771	74	10	3	12	5	1681
B. Number of children who received a secondary (reinforcing) injection (i.e. subsequently to primary immunisation at an earlier age), during the 12 months ended 31st December 1964.		236	423	71	57	444	179	1410

Vaccination against Poliomyelitis

During 1964, 2,136 persons completed a course of vaccination and 1,320 persons received booster doses.

Details of the complete vaccination programme from its commencement in 1956 to the end of 1964 are as follows:

Persons who have received four doses 11,990 Persons who have received three doses 37,646 Persons who have received two doses 3,726

i.e., a total of 168,350 doses given to 53,362 persons

The 2,136 persons who completed a course of vaccination this year come within the following age groups:—

 Year of Birth:
 1964
 1963
 1962
 1961
 1943/1960
 1933/1942
 Others

 Number:
 382
 1181
 169
 62
 169
 88
 85

Prevention of Illness-Care and After Care

Arrangements in force during the year included

(1) Tuberculosis

- (a) The seconding of two health visitors for full-time duty at the Chest Clinic and in domiciliary visiting of tuberculous patients.
- (b) The payment of a proportion of the salary of the almoner and occupational therapist employed at the Chest Clinic.
 - (c) Boarding out of child contacts.
- (d) Assistance in rehousing tuberculous patients by recommendation to the Housing Committee. During the year 9 cases were rehoused.
 - (e) Provision of nursing requisites.
- (f) Provision of domestic help, 18 patients receiving 1,354 hours service.
- (g) A grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect of their work in providing cash payments, extra nourishment, bedding, coal and other items for tuberculous patients and their families.
- (h) Occupational therapy for domiciliary patients, 78 cases receiving 910 visits during the year.

(2) Venereal Diseases

A health visitor attended the special clinic at the Royal Victoria Hospital.

(3) Illness generally

Provision was made at rest homes for the convalescence of patients recommended by general practitioners or hospital consultants. During the year 34 persons received recuperative holidays compared with 23 in 1963. The cost to the patient was based on income, but the majority of beneficiaries under the scheme paid little if anything. All patients who had been away in rest homes were visited on their return home by a health visitor, and almost invariably had benefited considerably in health.

Articles of sick room equipment were issued on loan as required at the request of General Practitioners or hospitals. 545 issues were made during the year, those in most frequent demand being mackintosh sheets (64), bed pans (72), commodes (132), wheel chairs (108), urinals (38), bed rings (40).

Mental Health Service

Since October 1963, Bournemouth patients requiring hospitalization for the treatment of mental disorder have been admitted to Herrison Hospital and St. Ann's Hospital in the case of mental sickness, and to Tatchbury Mount and Coldeast Hospitals in the case of mental subnormality. There have been only very occasional departures from these general arrangements, when an admission has been made direct to a subsidiary of a major hospital or a special arrangement has been made to meet special circumstances.

Co-operation with the hospitals has been excellent, and there have been no serious delays in securing the admission of mentally sick patients, although there is a small but persistent waiting list for mentally subnormal patients. The Consultant Psychiatrists and the Physician Superintendents have been untiring in their efforts to admit really urgent cases, and the availability of hospital outpatient clinics for both mental sickness and mental subnormality, together with the free use of domiciliary consultations where necessary, have been instrumental in securing the most advantageous use of hospital facilities.

Admissions to Mental Hospitals, 1964

Admissions to mental hospitals arranged by mental welfare officers of the department were 420 compared with 418 in 1963. Of the 420 cases admitted, 225 were informal admissions, 139 were admitted for observation, and only 41 were admitted as emergencies under Section 29 of the Mental Health Act, 1959, a considerable reduction on previous years.

ADMISSIONS TO MENTAL HOSPITALS DURING LAST 10 YEARS

Year	N.D.	V.	T.	Section 11	Section 14 etc.	Section 20	Total
1955	11	166	10	2	95	42	326
1956	103	80	15	8	98	47	351
1957	98	92	12	6	77	76	361
1958	118	63	16	6	72	103	378
1959	119	28	4	3	18	201	373
1960 1.1.60— 31.10.60	125	eri <u>na</u> erikena aktrau		— Mental	10 Health	196 Act	331*
un fruitze	Inf.		Sect. 60	Sect. 29	Sect. 26	Sect. 25	393
1960 1.11.60— 31.12.60	28		a a tuda	6	4	24	62*
1961	146		1	111	17	175	450
1962	169		4	93	4	155	425
1963	169		4	105	15	125	418
1964	225		3	41	12	139	420

^{*} The new Mental Health Act, 1959, came into operation on 1st November, 1960

It will be noted by reference to the following table that admissions were spread throughout the entire age range, 10-80 plus, and that in the decades between 30-80 years there were no extreme variations in numbers admitted to hospital.

ALL PATIENTS ADMITTED TO HOSPITAL DURING 1964 Under Mental Health Act

	Politic Control	AF III	Males	,		10	I	emale.	S		
Age Group	Inf.	Sect. 26	Sect. 25	Sect. 29	Sect. 60	Inf.	Sect. 26	Sect. 25	Sect. 29	Sect. 60	Total
10-20	-	-	1	1	1	3	_	1	1	-	8
20-30	14	1	8	2	_	16	-	7	_	-	48
30-40	18	-	3	5	-	10	1	11	2	-	50
40-50	16	1	5	7	1	24	3	16	4	-	77
50-60	11	1	4	2	1	24	2	19	3	-	67
60-70	14	1	7	1	_	31	2	9	6	-	71
70-80	8	-	9	1	-	23	-	24	3		68
80+	2	_	4	1	-	11	-	11	2	-	31
ibinite	83	4	41	20	3	142	8	98	21	-	420

Readmissions to Mental Hospitals

One of the most disappointing features of modern therapy is that in certain types of case relapses are frequent, and there were 41.7 per cent of readmissions to mental hospitals during 1964. This is the highest percentage of readmissions so far recorded, as is shown by the following table:—

RE-ADMISSIONS TO MENTAL HOSPITALS

1957	Total admissions	361	Re-admissions	115	Percentage	31.8%
1958	,,	378	,,	120	,,	31.7%
1959	,,	373	,,	131	,,	35.1%
1960 1961	"	393	,,	140	**	35.6%
1962	"	450 425	,,	160 146	,,	35·6% 34·4%
1963	"	418	,,	158	,,	37.8%
1964	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	420		175	",,	41.7%

For one reason or another many patients discharged from mental hospitals fail to grasp the fact that their continued well being depends on regular consultation with their doctor and with the psychiatrist at the out-patient clinic, and that their maintenance dose of tranquilliser or other drug is as essential to them as insulin is to a diabetic.

After-care, as carried out by the department's social workers, has primarily a supportive function, and while rehabilitation to full earning capacity, stability and acceptance by the community represents the high mark of achievement, the maintenance of the status quo and prevention of relapse is no mean achievement in many cases. In any event, we must get our priorities right, and rehabilitation should be gradually built up on solid foundations.

Mental Welfare Officers

There were two full-time and two part-time mental welfare officers maintaining a 24 hour a day service in the admission of patients to hospital, their documentation and travel arrangements. In addition, they made arrangements for the safe keeping of patients' possessions where necessary, kept Receivership accounts, and one of the full-time officers was responsible for the routine visiting of mentally subnormal patients and ordering supplies for the hostels.

Mental Social Workers

The staff of social workers consisted of a senior psychiatric social worker, employed half-time on community care and half-time at the Child Guidance Centre, a psychiatric social worker employed full-time at the Child Guidance Centre, and three social workers employed full-time on community care. All worked under the day by day supervision of the Senior Medical Officer for Mental Health, an experienced psychiatrist.

There has developed a very close liaison between the staff of the department and the staff of the hospitals accepting Bournemouth patients, and attendances at out-patient clinics and case conferences have been a regular feature

Mental Hostels

"Wallfield," Castlemain Avenue, a hostel for about 18 females, was officially opened by His Worship the Mayor of Bournemouth on 12th May, 1964, and together with "Beaufort House," which was opened during 1963, brought the available hostel places to nearly 30.

The Annual Report for 1963 stressed the enormous practical difficulties, particularly staffing, that followed the opening of

"Beaufort House," and which resulted in admissions having to be refused or deferred. These difficulties persisted into 1964, and at the end of the year there were only five patients in "Beaufort House" and seven in "Wallfield."

By the end of 1964, however, it had been possible to appoint housemothers and assistant housemothers for both hostels, and although one or other, or both hostels, were often without either a cook or domestic help, it is to the great credit of the resident staff that they kept things going, at the expense of long duty hours and little time off.

Although there has been no rigid classification of patients, "Beaufort House" has been mainly concerned with subnormal patients, while "Wallfield" has been used as a reception hostel and as a residence for those who have suffered mental illness. It has been found, however, that a judicious mixing of patients is usually permissible and often desirable, and that many of the patients recommended for admission to hostels suffer from multiple disabilities and fail to fit neatly into any one specific category.

There were two admissions to "Beaufort House" during the year and five discharges, leaving five patients in residence at the end of the year. "Wallfield" admitted 23 patients, with 16 discharges, and seven in residence at the end of December.

Mental Subnormality

During the year nineteen new cases of mental subnormality were reported, eight of them being children who were reported by the Education Authority as being unable to benefit from education in normal schools.

The position at the end of the year was that 379 cases of mental subnormality were on the authority's registers, as follows:—

*	In hospitals						 	157
	Attending the Turner Tr	aining	Centre	and	living at	home	 	91
	Living in local authority	hostel					 	4
	Under Guardianship						 	3
	Living at home						 	120
	Resident in private home	es					 	4
								379

^{*} The majority of cases in hospital (approximately 120) were at Coldeast and Tatchbury Mount Hospitals.

Three persons suffering from mental subnormality were admitted to Tatchbury Mount Hospital. Two of these cases were admitted informally, and one under Section 60 of the Mental Health Act, after an appearance before the Bournemouth Magistrates.

In addition, eighteen persons were admitted to hospital for short periods in order to give their parents a short period of freedom from worry, or a holiday.

Three deaths were notified among mentally subnormal persons, all in hospital.

At the end of the year nine cases (five male and four female) awaited urgent hospital admission, and there were twelve less urgent cases on the waiting list.

Arrangements for training mentally subnormal children and adults in the community.

During the year the Turner Training Centre continued to provide training and rehabilitation for 93 persons who were on the register on 31st December. Of this number, two were not subnormal, but were convalescent following mental illness, and were admitted to the Centre on the recommendation of Dr. G. J. Bell, Senior Medical Officer for Mental Health.

	Ma	les	Fem	ales	
No. of children in attendance	Under16	Over 16	Under 16	Over 16	Total
Male Section	2	28	_	-	30
Female and Junior Section	21	-	22	20	63
Totals	23	28	22	20	93

As before, mid-day meals were provided through School Meals Service arrangements, and two special buses brought a large proportion of the children from "picking-up points" reasonably close to their homes. An ambulance was also used for those children suffering from physical or other handicaps requiring special travel arrangements.

The numbers attending the Centre have been gradually increasing, and a few carefully selected cases referred by the Psychiatric Clinics have also been given periods of training, with some success.

Open days, exhibitions and sales of work, and the annual sports day have given not only the Health Committee, but also a considerable number of parents and members of the public an opportunity of seeing what improvement can be achieved by skilled and sympathetic handling of the children, and the staff are to be congratulated on their year's work.

Nursing Homes

At the end of the year 34 nursing homes were registered by the local authority, two fewer than in 1963. Accommodation was provided for 10 maternity and 482 medical and surgical cases.

Bournemouth Crematorium

Since the opening of the Crematorium in 1938, there has been a steady increase in this method of disposing of the dead, the yearly totals being:

1938		 	229
1939			384
1940		 	514
1941			557
1942	1010		584
1943		 	693
1944		 	708
1945		 	742
1946		 	834
1947		 	1026
1948		 	
1949		 	1012
1950		 	1155
		 	1306
1951		 	1484
1952		 	1472
1953		 	1681
1954		 	1770
1955		 	1991
1956		 	2142
1957		 	2207
1958		 	2340
1959		 	2472
1960		 	2609
1961		 	2648
1962		 	2873
1963		 	3171
1964		 	3095

An analysis of the statistics for 1964 showed that 46.9 per cent. of applications for cremation came from within the Borough, while 53.1 per cent. were received from other areas.

The Medical Officer of Health is the Medical Referee to the Crematorium, and in an emergency has two deputies authorised by the Home Office, the Deputy Medical Officer of Health and a retired Assistant Medical Officer of Health.

NATIONAL ASSISTANCE ACT, 1948, Section 47

No action was necessary under this section of the Act.

NATIONAL ASSISTANCE ACTS, 1948 - 1951 — INCIDENCE OF BLINDNESS

The registration of blind persons and the provision of welfare services for this category of disabled persons is carried out by the Welfare Services Committee, and the following information in respect of new registrations has been supplied by the Director of Welfare Services:

(i) Number of cases regis-		Cause of	Disability	
	tered during the year in respect of which para. 7(c) of Forms B.D.8	Cataract	Glaucoma	Retrolental Fibroplasia	Others
	recommends:— (a) No treatment	17	8 -	-	18
	(b) Treatment (Medical, Surgical or Optical)	26	16	_	33
((b) above which on follow-up action have received treatment	18	13		28

Public Health Laboratory Service

REPORT BY Dr. G. J. G. KING, DIRECTOR OF THE BOURNEMOUTH LABORATORY

SPECIMENS RECEIVED FROM BOURNEMOUTH, 1964

Public Health Department

Bloods		 	 17
Faeces and urin	ne	 	 1,173
Nose and throa	at	 	 15
Other human		 	 9
Food and shell	fish	 	 298
Ice-cream		 	 359
Milk		 	 513
Water		 	 758
Other sanitary		 	 146

3,288 c.f.

					3,288	b.f
General	Practitioners					
	Bronchitis			14		
	Faeces and urine	 		275		
	Nose and throat	 		118		
	Sputa	 		11		
	Other human	 		52		
	Food and shellfish	 		4		
	Other sanitary	 		1		
					475	
Bournen	nouth Chest Clinic					
	Laryngeal swabs	 		2,059		
	Pleural fluids	 		3		
	Sputa: Direct			34		
	Culture	 		333		
	Urine	 		16		
	Faeces	 		1		
	Bronchitis	 		111		
					2,557	
Royal N	National Hospital					
	Bronchitis	 		29		
	Laryngeal swabs	 		721		
	Pleural fluids	 		58		
	Sputa: Direct	 		15		
	Culture	 		1,110		
	Urine	 		73		
	Other human	 		20		
	Sera	 		4		
					2,030	
Royal V	Victoria Hospital					
	Faeces and Urine	 		11		
	Phage typing	 		495		
	Sera	 		10		
	Other human	 		184		
	Blood	 		5		
	Water	 		3		
	Nose and Throat	 		504		
	Sputa	 		3	1 215	
					1,215	
			Tota	1	9,565	
			Tota	•	7,505	

REPORT BY A. J. MORTIMER, METEOROLOGICAL REGISTRAR

1964 Summary

The weather of recent years has shown a trend to lower average mean temperatures. Nine of the twelve months of the year gave us temperatures below average. The three months, May, September and November however, adjusted the balance to such good effect that the annual average temperature was only 0.7 degrees below normal.

With memories of a good summer, it is surprising to note that sunshine was $6\frac{1}{2}$ hours below the average figure. The first half of the year, however, although fairly fine, was consistently below normal for sunshine. From July enwards, there was a different picture, with high sunshine figures and a summer which did not appear ever to be coming to an end.

Quickly glancing through the months; January was notable as the most sunless and nearly the driest on record; February was dry and made the winter the driest on record; paradoxically, March provided us with the wettest March day on record, 1.29 inches on the 18th. April's weather was average but spring flowers were late; May was fine and warmer than usual, and yet ranked as the second wettest of the century owing to the development of thunderstorm activity at the end of the month; June did not give us that profusion of sunshine of which the month is capable: July was the turning-point — a truly delightful holiday month, with August keeping up the fine weather, the two months having the lowest recorded rainfall for fifteen years. September was calm and sunny except for a short unsettled period in mid-month. October, although fine and sunny, was cold, the coldest October since 1939. November, too was sunny, milder than usual, with an almost entire absence of high winds and stormy weather, and a complete absence of fog — a most unusual combination. December was a fine sunny month with sunshine well above average, and snow to round off the year.

SUMMARY

Highest temperature recorded
Lowest temperature recorded..
Greatest fall of rain in one day
Total rainfall
Total sunshine
Number of days with sunshine
Number of days with rain . .
Mean temperature

.. 79° on 3rd August .. 18° on 29th December .. 1·29 inches on 18th March

.. .. 24.66 inches (average 31.21 inches) 1719.5 hours (average 1726 hours) ne .. 291

.. 153

. 50·2° (average 50·9°)

BOURNEMOUTH CLIMATOLOGICAL STATION

Latitude 50° 44' N. Longitude 1° 53' W. Height above Mean Sea Level 130 ft.

TABLES OF TEMPERATURE, SUNSHINE AND RAINFALL

1. TEMPERATURE (Degrees Fahrenheit)

		Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	::	40.1	40.5	44.0	48.6	53.8	59.4 57.5	62.4	62.4	58.5	52·2 49·3	46.0	42.3
Absolute Maximum Date	::	52 31st	56 1st	55 21/22	61 24th	70 30th	71 26th	78 17th	79 3rd	75 3rd	67 2nd	59 25th	56 8th
Absolute Minimum Date	::	27 14th	23 7th	27 9th	31 7th	40 15th	42 20th	46 7th	43 20th	41 28th	34 24th	29 30th	18 29th
Mean Range	::	7.7	9.7	8.4	10.5	12.7	11.8 80	14.6	15.1	15.2	14.6	10.2	10.9

Mean Temperature for 1964 — 50·2

Average (Air Ministry) — 50.9.

2. SUNSHINE (Hours)

DO TO	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average 1964	65 31.2	82 63.2	133 83.9	185 142·7	218 211.7	230 182·2	213 255·5	206 227.1	150 233·1	116	71 70.6	57 78·2
Daily Average	1.0	2.2	2.7	4.8	8.9	6.1	8.2	7.3	7.8	4.5	2.4	2.5
Highest amount in one day Date	7.5 30th	8·2 5th	11·1 26th	10.5 8th	14·2 14th	14·3 30th	14.8 1st	13.0 30th	12.4 1st	9-3 3rd	7.8 8th	6.9 15th
Days with sunshine	10	20	22	25	30	26	31	30	30	25	24	18

Total for 1964 — 1719.5.

Average (Air Ministry) - 1726.

3. RAINFALL (Inches)

		Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	::	3.56	2.28 0.93	2.06	2.00	1.90	1.56	2:22 0:74	2.47	2.50	3.46	3.74	3.46
Daily Average	:	0.05	0.03	0.13	0.07	0.13	80-0	0.05	0.05	0.03	80-0	0.07	0-11
Greatest fall in one day Date	::	·14 27th	·35 23rd	1-29 18th	.58 16th	.99 30th	·89 12th	.46 7th	·16 6th	·30 14th	1-14 9th	·50 13th	·53 26th
No. of days with rain	:	14	12	12	16	17	11	8	11	00	14	11	19

Total for 1964 — 24·66

Average (Air Ministry) - 31-21.

Water Supply

The entire Borough, except for that part of Southbourne east of Irving and Clifton Roads, is served by the Bournemouth and District Water Company, the remainder by the West Hampshire Water Company. Throughout the year, both supplies have been satisfactory, both as regards quantity and quality, and 296 samples were submitted to the Public Health Laboratory by the district public health inspectors from the mains supplies, with completely satisfactory bacteriological results.

The bulk of the water supplied to the Borough is drawn from local rivers, particularly the Avon, and there is no traceable content of fluoride in the water as supplied.

I am indebted to the General Manager of the Bournemouth and District Water Company and to the Chief Engineer of the West Hampshire Water Company for the following information:—

		Bournemouth and District Water Co.	West Hants Water Co.
(a)	Quality and quantity of water supply throughout the year.	Satisfactory.	Satisfactory.
(b)	Number of bacteriological examinations of raw water made during the year.	255	313
	Results: Probable number of B. Coli organisms per 100 ml.	Varied from 78 to 220,000	Varied from 50 to 16,000
	Number of samples taken of water going into supply	366	390
	Results:	Standard. All bacteria absent samples.	from 100 ml.
(c)	Plumbo-solvent action	None.	
(d)	Action taken in respect of any form of contamination	(other than	on was necessary sterilisation of s following repair).
(e)	Number of dwelling houses supplied from the public water mains (i) direct to houses	45,365	6,272
	(ii) by means of stand-pipes	None	None

THE BOURNEMOUTH AND DISTRICT WATER COMPANY WATER ANALYSIS

B. Coliform P.N. in 100 r	nl					 0
Agar Cultures 24 hours at	t 37°C					 1
" ,, 48 hours at	t 37°C	OM	0.10	2 0	D M	 2
,, ,, 72 hours at	22°C					 5
Cl. Welchii Reaction				0.0		 Absent from
Colour (Burgess Scale)						 100 mi
Filtrability Index						 _
рН						 7.83
Electrical Conductivity at						 430
Residual NH2CL						 0.10
The state of the s				-		
Results in P.P.M.						
Chlorine in Chlorides						 17-0
Nitrogen in Nitrates						 2.80
Nitrogen in Nitrites						 0.015
Free Ammonia						 0.054
Ammoniacal Nitrogen						 0.045
Albuminoid Ammonia						 0.074
Albuminoid Nitrogen						 0.061
Oxygen Absorbed (4 hours	s at 37	°C)				 0.69
Dissolved Oxygen						 9.9
Free Carbon Dioxide						 6.0
Alkalinity as CaCO3						 197.0
Silica as SiO2						9.0
Phosphates as P2O5						 0.32
Iron as Fe						 0.02
Suspended Solids						_
Total Dissolved Solids						 288-0
Total Hardness						234.0
Carbonate Hardness						 197.0
Noncarbonate Hardness						 37.0

MINERAL ANALYSIS — Parts per Million Sample: Bournemouth Town Supply

Ca	Mg	Na	K	CO3	SO4	CL	NO3	SiO3	Probable Combi	nations
78·80 9·37 1·43	04			118-20	22:50	2.53	STATE OF THE PARTY		Calcium Carbonate Sulphate Chloride Nitrate Magnesium Carbonate	197·00 31·87 3·96
	2.44					7.12			Sulphate Chloride Nitrate	9.56
		4·78 4·59 0·63	2.00			7.35	12-40	1.04	Sodium Carbonate Sulphate Chloride Nitrate Silicate Potassium Carbonate Sulphate Chloride Nitrate Silicate Other Silicates as Si02 Ferric Oxide	12·13 16·99 1·67 3·95 6·65 0·03
55-			Tot	al Solid	ls Dri	ed a	t 180°	C	2002 u est	288.00

THE WEST HAMPSHIRE WATER COMPANY ANALYSIS

WEST HANTS WATER, MAINS WATER, RIVER AVON DERIVED

Chemical Results in Parts per Million.

Appearance: Bright and clear

Colour: 5

pH: 7.7

Electric Conductivity: 425

Chlorine present as Chloride: 20

Free Carbon Dioxide: 7 Hardness: Total: 240 Turbidity: Nil
Odour: Nil

Dissolved Solids dried

at 180°C.: 295 Alkalinity as Calcium

Carbonate: 185

Carbonate: 185

Non-carbonate: 55

Nitrate Nitrogen: 4·2 Nitrite Nitrogen: Absent
Ammoniacal Nitrogen*: 0·01 Oxygen Absorbed: 0·90
Albuminoid Nitrogen*: 0·03 Residual Chlorine: Absent

Metals: Iron, Copper, Lead, Zinc, - Absent

* to convert to Ammonia multiply by 1.21.

SEWERAGE AND SEWAGE DISPOSAL

The Borough Engineer has kindly supplied me with the following information:—

Although relief sewers are still under construction, drainage from the Winton and Moordown areas was diverted away from sea outfalls at the end of 1964. The new Purification Works at Holdenhurst and Berry Hill have been in use since November 1964, and are now producing an effluent of approved standard which is discharged to the River Stour.

The first contract for the coastal intercepting sewer is due to commence in the summer of 1965 and will be followed by a contract for the first length of tunnelled sewer, also pumping installations and the extension of the new Purification Works as required.

Now that main drainage is available in the Wick and Throop areas the number of cesspools is being reduced and further minor schemes are being considered to enable further reductions to be made.

ENVIRONMENTAL HYGIENE

Report by Jack Randall, M.R.S.H., Chief Public Health Inspector

For the Public Health Inspectors' Section the year 1964 was a difficult and unsettled one. Staff shortages and changes were the chief cause of much disturbance of normal routine inspection work. In spite of this, however, a considerable amount was accomplished as will be seen from the following summary of inspections and visits.

Although all essential and urgent matters were given their due priority and adequately dealt with, many ancillary and less important routine duties and responsibilities were not so fully covered as one would wish.

In the autumn the establishment of the Section was increased and by the end of the year was almost up to strength. It is pleasing to record that this re-organisation has already resulted in greater efficiency and more effective administration. One can, therefore, forecast with some degree of confidence that the achievement recorded in the following pages will be considerably exceeded during the current year.

Inspections and Visits

Water								
To obtain samples of	of wat	er for	chem	ical an	d bac	cteriolo	gical	
examination								403
Food Supply								
Hotel and Boarding H	louse 1	kitcher	as					760
Cafes and Restaurants								492
Factory Canteens								43
School Feeding Centre								89
Bakehouses								143
Food Preparation Pres	mises							163
Shops re sale of food								1,824
Stalls and street vendo								47
Dairies and milkshops								805
Shops for other food a								502
Dairies and milk distr	ibutio	n pren	nises					387
Pasteurising plants								26
Premises used for the	manu	facture	of ice	cream				39
Premises used for the			sale of	ice crea	ım			349
Meat markets and col	d stor	es						117
Atmospheric Pollution								
Smoke observations								159
Visits to premises								204

	Housing Conditions					
	Primary inspections of dwellinghous	ses (unde	r Public I	Health	Act	
	1936 and Housing Act, 1957, et					410
	Subsequent inspections of dwellingh	ouses				2,292
	Houses in multiple occupation (Hou	sing Acts	s. 1957 an			1,145
	Overcrowding					35
	Overcrowding	pair, etc.	(Rent Act	, 1957	7)	16
	Caravan dwellings					136
	and the state of t					
	Occupational Conditions					
	Factories					229
	Homes of Outworkers					23
	Shops re Shops Act, 1950					303
	Other business premises (Young Pers	sons (Em	ployment) Act,	etc.)	54
å	pood out monulaises forestal and					
	Infectious Diseases					
	Primary visits after notification					46
	Subsequent visits and visits to contact					336
•	Food poisoning					205
	Ann Internation (Manager 1911)					
(General Sanitary Conditions					
	Comptories aubumations ata					NIL
,	Hairdrossing actablishments				::	166
1	Holiday accommodation					260
	Maica Muicanasa					300
	Muicanaga athan than the above					2,304
	Managina hamas dan managina ata					45
	Offensive trades					NIL
	Paddling Pools					31
						41
	Piggeries and swill-boiling plants					44
						51
	Premises for the examination of drain	ns				
	Old Buildings					1,294
						376
	Private Sanitary Inspections					20
						63
	Dat infastation					2
						2,127
	Refuse accommodation Sale of Poisons					169
	Swimming boths					167
	Varminaua promises					274
	Water courses		**			73
	Miscellaneous					1 046
						1,046

Food Supply

The need for vigilance and a positive approach to food hygiene has been expressed many times in previous annual reports. The outbreak of typhoid fever which occurred during May and June in Aberdeen emphasises that, whilst it may be almost impossible to eliminate entirely the danger of food borne disease, a high standard

of food hygiene practised by educated food handlers in suitable premises can do much to minimise the spread of an outbreak.

It is significant that one of the major tasks faced by the Aberdeen authority during the crucial period involved the education of food-handlers and the general public to raise very appreciably the standard of hygiene practised.

Generally, the desirability of high sanitary standards is appreciated by both traders and the public in Bournemouth but the creation of a yet higher standard, uniform throughout the town and without exceptions, remains one of the major tasks facing your Inspectors. The enforcement of the relevant legislation, the Food and Drugs Act, 1955, and The Food Hygiene (General) Regulations, 1960, is not sufficient in itself to achieve this result. Regular routine visits, when Inspectors are readily available to discuss problems and advise food traders are extremely important and help to further the existing co-operative relationship. It cannot be over-emphasised that the food trade and the local authority have a common interest, the production and sale of clean, safe food of high quality, which is both a credit to the trader and a first-class advertisement for the Borough — all health considerations apart.

During the year, 5,786 visits were made to catering establishments and other food premises. 180 written notifications of contraventions of the Regulations were sent but in no case was it necessary to institute legal proceedings to secure compliance with requirements. Legal action was, however, taken in three instances where food operatives were reported by Inspectors to be smoking whilst handling open food. All the cases were found to be proved and the Magistrates imposed a fine of £10 on each offender.

One additional Inspector was appointed on a temporary basis during the months of July, August and September to assist in the inspection of food premises during the holiday season.

Meat Inspection

The arrangements made with neighbouring authorities, responsible for meat inspection at abattoirs and slaughterhouses, whereby carcases of beef affected with cystic conditions are examined after periods of storage treatment in cold stores within the Borough, continues to operate satisfactorily. 85 such carcases were inspected during 1964 and released by your Inspectors as sound after being marked in accordance with the Meat Inspection Regulations, 1963.

There are no slaughterhouses within the Borough but inspection of meat at the cold stores and meat markets is regularly carried out as an additional check on the detailed inspection of home-killed meat made outside the town and the inspection of imported meat at our ports. 117 visits for this purpose were made during the year.

Milk Supplies

All milk sold in the Borough during 1964 was subjected to pasteurisation or sterilisation. Pasteurised milk distributed in the town is treated and bottled at one of four plants, two located in Bournemouth and two in Poole. Sterilised milk is produced at a dairy plant in Bristol.

A new designation "Untreated" came into use on the 1st October, 1964 to describe milk subject to no heat treatment process. It has not been necessary to issue licences for this type of milk as there are no producer-retailers in the town.

Over 400 visits to supervise the processing and distribution of milk were made to the two pasteurisation plants and 398 milk retailers in the town.

During the year 15 shopkeepers were licensed to sell designated milks as follows:—

Pasteurised				 	15
Tuberculin	Tested	(Pasteuri	sed)	 	4
Sterilised					3

Sampling of milk to ensure its good keeping quality was again carried out on a considerable scale. Of 375 samples of designated milks submitted to the Public Health Laboratory 3 failed the Methylene Blue Test. The failures were followed by investigation at the plants concerned and satisfactory results were afterwards obtained.

From time to time the attention of the Department was drawn to the unsatisfactory condition of milk bottles returned to the Dairies. In many cases cleansing was impossible and bottles had to be destroyed. In some parts of the country experiments in different methods of packing milk have been undertaken with some success. It is now possible to envisage a time when milk will be delivered in non-returnable containers, whilst new treatment processes promise to improve the keeping quality of the product to an extent which will render a daily delivery service unnecessary.

In the meantime, however, it rests with the public to assist milk processors by rinsing milk bottles after use and returning them in a reasonable condition, thus ensuring the maximum protection from the costly and efficient bottle cleansing machines installed in modern plants.

Ice-cream

At the end of 1964 three premises were registered for the manufacture of ice-cream and 679 for its storage and sale. These figures give some indication of the widespread and considerable sale of the commodity in the town. Sampling is therefore maintained at a high rate to ensure that the ice-cream sold is safe and clean, presenting no public health hazard.

In the course of the year, 356 samples were submitted to the Public Health Laboratory and the chart hereunder sets out the results obtained from Methylene Blue Reduction Tests.

Number	of	Samples	Taken	-356
--------	----	---------	-------	------

	Provisional GRADE I	Provisional GRADE II	Provisional GRADE III	Provisional GRADE IV
No. of Samples placed in Grade	243	81	26	6
Percentage of Samples placed in Grade	68%	23%	7%	2%

Grades III and IV are considered unsatisfactory, but it must be emphasised that a failure in the test does not mean that an ice-cream is dangerous to eat. A series of such results from the same supply or selling point however provides a useful warning that full investigation is justified. Unsatisfactory results are followed by inspection of premises when particular attention is paid to methods of sterilization of equipment, the storage and handling of the food and the standard of hygiene practised by the staff. Repeat samples are invariably taken and on no occasion has a succession of unsatisfactory results been obtained from any one selling point.

Prepared Foods

Section 16 of the Food and Drugs Act, 1955, requires among other things, that premises used for the preparation or manufactur

of sausages or potted, pressed, pickled or preserved meat or fish intended for sale, shall be registered. This piece of legislation recognises that such foods are more liable to become vehicles of food poisoning organisms than many others and registration is intended to facilitate the local authority's control over their manufacture.

There are 130 premises in the Borough registered for the manufacture of meat or fish products. During the year 174 samples of these foods were taken for bacteriological examination and all were found to be satisfactory at the Public Health Laboratory. 163 inspections of registered premises were carried out.

Bacteriological Examination of Other Foods

54 samples of a variety of foodstuffs including ice-lollies, cream confectionery, trifles and custards from self-service restaurants, and tinned goods were examined by the Public Health Laboratory. Apart from five ice lollies all were reported as satisfactory.

Foodstuffs Condemned

The following amounts of food were condemned by the Public Health Inspectors during the year :—

Description		Tons	Cwts.	Qtrs.	Lbs.
Fish			7	-	7
Meat		 2	9	2	22
Tinned Goods		 4	12	_	19
Other Foods		 9	18	1	11
	Total	 17	7	1	3
		-			THE REAL PROPERTY.

1,838 Condemnation notes were issued.

Adulteration of Food and Drugs

(a) Milk. 331 bottles of milk in the course of retail distribution were taken as samples and submitted to the Gerber Test by the Public Health Inspectors as follows:—

" Pasteurised " Milk	 	 147
"Channel Islands" Milk	 	 128
"Sterilised" Milk	 	 18
"Homogenised" Milk	 	 38

All were found to comply with the standards prescribed.

(b) Other Food and Drugs. 212 samples of food and drugs were submitted to the Public Analyst as follows:-

	FORMAL	SAMPLES	INFORMAL	Total	
	Found to be genuine	Found to be adulterated	Found to be genuine	Found to be adulterated	Samples Samples
FOOD	8	toning L	176	4	188
Drugs	Ibnums 1	1	18	5	24
TOTAL	8	1	194	9	212

Ten samples were found to be adulterated, a percentage of 4.7.

Details of the adulterated samples and of the action taken are set out hereunder :-

Formal Sample Nature of Adulteration Action Taken Ref. No. Sample 715 Ammoniated Deficient in Ammonia Warning letter sent to Vendor. Tincture Quinine Informal Samples Further formal sample 5 Lemon Curd 24.2% deficient in citric taken, which was found acid satisfactory. Deficient in Ammonia Further formal sample 46 Ammoniated Tincture Quinine and contained an excess taken. of quinine sulphate Deficient in Ammonia Formal sample taken. 47 Ammoniated Tincture Ouinine Informal sample. Deficient in Ammonia Ammoniated 70 Warning letter sent to Tincture Quinine and contained an excess Vendor. of quinine sulphate Found to be sold other Deficient in milk fat Bread "Butter 124 than as described. No Bap" offence. Contained Jerusalem Steps taken to prevent 141 Dried Sage further similar adultera-Sage tions. Vendor withdrew all Deficient in Vitamin 'A' 171 Cod Liver Oil stocks. Capsules 100% deficient in Egg Formal samples sub-Meringue Cases 175 mitted to Analysts and White reported as genuine. Further formal samples Contained 3.4% added 198 Whiskey found satisfactory.

water

Corned Beef

Mention of the Aberdeen Typhoid outbreak has been made elsewhere and it will be remembered that canned corned beef was cited as the vehicle by which the disease was transmitted. As a result it was necessary to ensure that all six-pound cans of the food which bore certain specific code markings were withdrawn from sale or use in the town. To deal satisfactorily with this problem it was necessary to visit all wholesalers and other food premises, including shops, restaurants, hotels and guesthouses, where tins were likely to be lying. This considerable task involved the full attention of the complete inspectorial staff for some days. Appreciation for the ready and complete co-operation of the food trade in the town must also be expressed in this connection.

Atmospheric Pollution

During the year 159 routine observations were made of industrial and commercial chimneys. 21 contraventions of Section 1 of the Clean Air Act, 1956, were detected and 21 smoke nuisances were dealt with and abated after informal action.

New Furnaces and Chimneys

The control of the height of new chimneys to comply with the provisions of Section 10 of the Clean Air Act, 1956, is a matter for close co-operation between the Public Health Department and the Borough Engineer, to whom plans are submitted. The absence of heavy industry in the town means there are seldom clashes between aesthetic and public health considerations since the construction of really high chimneys which would disfigure land-scapes and skylines is seldom contemplated. It is almost invariably possible to agree with architects on chimney heights, acceptable as unlikely to give rise to nuisance and yet capable of incorporation in a design which will meet architectural and town planning requirements.

The heights of eleven chimneys indicated on plans submitted for Byelaw approval were approved, without amendment, whilst in one other case a proposed height was slightly increased after discussion with the developer's architect.

Daily recording of atmospheric pollution

There are three stations established in the Borough at Pokesdown, Cunningham Crescent and St. Stephen's Road, where daily readings are taken to estimate the level of atmospheric pollution by smoke and sulphur dioxide. The results obtained are sent to the Department of Scientific and Industrial Research at the Warren Springs Laboratory to provide data for the National Survey of Air Pollution.

Air Pollution by Internal Combustion Fuel

The department is assisting the Chester Beatty Institute for Cancer Research in investigation into the harm which may be caused to vegetation by the fall-out of toxic substances from atmospheres polluted by exhausts from internal combustion engines.

Two sites have been chosen, one near a main and much used highway, the other some distance from a road. Once a month cuttings of new growth are taken from privet hedges at each site and sent to the Institute.

There are some forty co-operating authorities in the country and it is hoped to contribute useful information as part of the larger research programme which seeks to assess the effect of lead absorbed by plants upon the plants, upon human beings eating the plants and upon animals which may feed upon affected vegetation and whose flesh may afterwards be consumed by man.

Chloride Survey of the British Isles

The Lancaster and Morecambe College of Further Education is conducting a research project into the marine contribution to the presence of chlorides in the atmosphere over the British Isles. A technique has been developed for analysing for chloride content smoke stains which have been produced in the normal daily recording procedure. Smoke stains from one of the town's recording stations are sent monthly to the College to assist in this research work.

Housing

It can be seen from the statistics given below that, whilst it is often necessary to draw the attention of owners to defects which exist at their houses, the number of premises not reasonably suitable for human habitation by Housing Act standards remain extremely low. Thus during the year it was necessary to represent to the Council as unfit for habitation only seven houses and two dwellings, parts of buildings. These premises were dealt with by demolition or closing orders and the small number reflects the generally high standard of housing which exists in the Borough.

Demolition and Closure Number of Demolition Orders made (Housing Act, 1957 Section Number of Closing Orders made (Housing Act, 1957 Section 18) 2 Number of cases where an Undertaking not to use for human Number of cases where an undertaking to repair was accepted ... Certificates of Disrepair Inspections made in connection with applications for issue or revocation of certificates 16 Land Charges Enquiries A total of 6,010 enquiries concerning various properties received attention during 1964. As in many other parts of the country, house owners do not always find it easy to secure the services of a building contractor, who will attend to minor works of repair and maintenance quickly. It is possible that many cases of nuisance would not come to the notice of the local authority if owners could obtain quicker service from jobbing builders who normally appear to be working under considerable pressure and are in great demand. Houses in Multiple Occupation The action taken in connection with flatlet houses and the results achieved, may be summarised as follows: (a) Work carried out 1.145 Number of inspections made (including re-visits) ... Number of premises inspected 11 545 Number of informal notices served 78 Number of cases in which formal action was taken (b) Formal Action taken Housing Act, 1957 Notices served requiring abatement of overcrowding (Section 90) Housing Act, 1961 Management Orders made (Section 12) Notices requiring defects of Management to be remedied NIL (Section 14) Notices requiring provision of satisfactory means of escape

in case of fire (Section 16)

Directions given, varied or revoked (Section 19) ...

10

13

(c)	Results Achieved	
	Number of premises rendered satisfactory	37 112
	discontinued	7
	Improvements Effected	
	Satisfactory means of escape in case of fire provided Cases of Overcrowding in lettings abated Natural and/or Artificial Lighting improved Means of ventilation improved Basement Rooms made to comply with Regulations Personal washing facilities provided or improved (a) in lettings (b) by installation of additional bathrooms or showers (c) by reduction of number of individuals using them Facilities for storage, preparation or cooking of food improved Additional water-closets provided	59 40 22 11 4 46 9 13
	Repairs, etc. carried out	
	Number of premises in which minor repairs and/or redecorations were carried out	83 20 19
	the state of the s	

From experience gained during the survey of houses in multiple occupation up to the present, the following conclusions may be drawn:—

- (1) This is a very useful piece of housing work which should be vigorously pursued.
- (2) Although there is a general need for improvement in this type of premises, very few really badly managed houses with resultant slum conditions have so far been discovered. Furthermore, it is believed that the majority of these few have already received attention.
- (3) There would appear to be a local need for this type of accommodation, most of the lettings being occupied by elderly people living alone, single persons in business, students and temporary hotel workers.
- (4) Most landlords bring their premises up to the local authority's standards when informally requested to do so.
- (5) By allowing a reasonable time for the re-arrangement or reduction of lettings and the execution of works, substantial improvements can be brought about without undue hardship to tenants or landlords.

It is appropriate here to place on record the very considerable assistance and helpful advice received from the Chief Fire Officer and his Fire Prevention Officers in connection with means of escape, and to acknowledge the Borough Engineer's co-operation with regard to Town Planning matters.

Caravan dwellings

At the end of the year 1964 there were thirteen licensed caravan parks in the Borough. On these sites there were 355 residential caravans and 379 caravans for holiday use.

In compliance with the County Borough of Bournemouth Discontinuance of Authorised Use (Wick Farm) No. 3 Order, 1961, the Wick Farm Caravan Site was closed in August, the occupants of seven of the fifteen caravans having been found alternative accommodation by the Council.

From time to time one reads of accidents, sometimes fatal, as a result of fires occurring in caravans. To assist in preventing such accidents, the Health Committee authorised the distribution of a brochure issued by the National Caravan Council relating to fire precautions in caravans. These brochures were delivered to all residential caravan sites, one for each dwelling.

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Occupational Conditions

Factories

Considerable revision of the Factories Register was made during the year. No special difficulty was experienced in the enforcement of those parts of the Act for which the local authority is responsible.

The following three tables set out the information required to comply with the Factories Act, 1961.

Factories Act, 1961. Part I — Inspections.

		Number	Number of				
	Premises (1)		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)		
(i)	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	94	25	100 100 100 100 100 100 100			
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority	662	204	6			
(iii)	Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	T 11	42	- (6) Eli			
	TOTAL	756	271	6	_		

Cases in which defects were found

	Nı	No. of cases in which			
	di luo	P	Refe	prosecu- tions	
Particulars (1)	Found (2)	Remedied (3)	To H.M. Inspctr. (4)	By H.M. Inspctr. (5)	were insti- tuted (6)
Want of cleanliness (S.1) Overcrowding (S.2) Unreasonable temperature	E	=	==	=	=
(S.3) (S.4) Inadequate ventilation (S.4) Ineffective drainage of floors (S.6)		=	=	=	=
Sanitary Conveniences (S.7) (a) Insufficient	<u>-</u>	<u>-</u>		<u>-</u>	=
(c) Not separate for sexes Other offences against the Act (not including offences relat-	_	1	1	_	
Totals	7	7	1	3	=

Outwork (Sections 133 and 134).

	Section 133			Section 134				
Nature of Work	No. of out- workers in August list required by Section 133 (1) (c)	No. of cases of default in send- ing lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices served	Prosecu- tions		
(1)	(2)	(3)	(4)	(5)	(6)	(7)		
Wearing apparel (making, etc.)	51	AL 21925	iomo no		ido va	-		
Curtains & furni- ture hangings	8	DATE IN						
TOTAL	59	10-2017	_	_	_			

Offices, Shops and Railway Premises Act, 1963

The major portion of this piece of legislation became operative on the 1st August, 1964 although, by Order, the Minister of Labour required employers of labour to notify the Local Authority accordingly after the 1st May, 1964.

By the end of the year, 1971 premises had been registered under the Act as follows:—

Offices		Dillion Inch			676
Retail Shops					1,090
Wholesale Sh	nops and V	Varehouses			111
Catering Esta	ablishment	s			93
Fuel Storage	Depots	n enter mol			1

The registrations covered a labour force of 19,540.

The Act controls working conditions in many non-industrial places of employment and deals among other matters with over-crowding in workrooms; the lighting, heating and ventilation of premises; the provision of adequate sanitary accommodation; washing facilities and supplies of drinking water and facilities for the taking of meals. Inspectors must also give attention to general working conditions likely to give rise to danger, to the fencing of exposed machinery and to the dangers which may exist during the cleaning of machinery, particularly by young persons. The First

Aid Order, 1964, sets out in detail the equipment which must be provided in premises to which the Act applies.

42 full inspections were carried out by the end of the year, involving 79 visits, and almost the whole of this work was done during the months of November and December. Before that time, whilst much guidance was received from the Ministry of Labour, detailed orders and recommendations regarding certain requirements were still awaited and some delay was advisable if your Officers were to be in a position to give employers the clearest information as to deficiencies in their premises.

Notification of Accidents

It is now obligatory for employers to notify accidents to workers on their premises if such accidents are fatal or prevent a person carrying out his normal work for more than three days. Twentytwo accidents were notified during the year, none of which was fatal.

Shops

303 visits to shops were made by the Inspectors to enforce the provisions of the Shops Act, 1950, relating to closing hours and the working hours of assistants. Twenty-two contraventions of the Act were noted and twelve notices served. By the end of the year eleven notices had been complied with.

During the year the Council made an Order permitting shops to open from 8.0 a.m. to 7.0 p.m. on each Sunday between 17th May and the 13th September, 1964, for the sale of :—

- (a) any article required for the purpose of bathing or fishing;
- (b) photographic requisites;
- (c) toys, souvenirs and fancy goods;
- (d) books, stationery, photographs, reproductions and post-cards.

Young Persons (Employment) Act, 1938

54 visits were made to premises where young persons are employed in connection with matters controlled by this Act. No contraventions were detected.

General Sanitary Conditions

Infectious Diseases

382 visits were made in connection with notified cases of infectious disease and to contacts of such cases. Disinfections were carried out as follows:—

		No	. of Rooms
(a)	After notifiable disease	 	10
	After non-notifiable disease	 	30
(c)	After tuberculosis	 	7

Drainage Work

For some years the testing of drains on new buildings has been carried out by the Public Health Inspectors, whilst the supervision of the drainage work has been the responsibility of the Borough Engineer. Early in the year effect was given to a decision of the Council whereby the Borough Engineer now arranges for the testing of all new drainage work which is carried out under the supervision of the Building Inspectors. The inspection and testing of drains at existing premises continues to be the responsibility of the Public Health Department.

Drainage work was carried out by the Inspectors and their assistants as follows:—

Drain tests applied		659
Defects found and remedied		161
Number of obstructed drains cleared		177
Number of private sanitary surveys carr	ried	
out		20
Total of fees received for private sanit	ary	
surveys	£76	2s. 6d.

Refuse storage accommodation

169 visits were made to premises in connection with the storage of refuse. 140 new dustbins were provided following informal action by the Department.

Nuisances

880 complaints of nuisances were investigated, 2,304 visits to premises being made in this connection. 540 statutory nuisances were found and, during the year, 529 were abated.

Noise Nuisances

Possibly the most difficult complaints the Department deals with are those relating to noise. During the year several investigations were carried out as a result of complaint. Some indication of the complexity of the problem may be gained from the following brief examples of complaints which received attention.

- (a) Householders in a nearby block of flats complained of noise from an engine providing electricity at a garage.
- (b) Residents were disturbed by the loading of fish boxes in the early hours of the morning at two wholesalers' premises.
- (c) The occupier of a ground floor flat complained of the noise made by a neighbour playing a piano in the first floor flat.
- (d) Neighbours complained of nuisance from dance music at a dancing school.
- (e) In two cases householders complained of noisy hammering at premises where carpentry was carried on.
- (f) The occupants of houses in one area of the town were concerned at the noise from a generator and the hammering of metal at an engineering works.

All cases were fully investigated and observations were made at all hours of day and night. Where possible the necessary action was taken.

Eradication of Insect Pests

98 premises were disinfested during the year to eradicate insect pests such as fleas and cockroaches. In addition 172 wasps' nests were destroyed, a service for which a charge of 7/6d. per nest is made.

Rodent Control

The Rodent Officer and his operatives dealt with a total of 1,429 complaints of rat and mouse infestations in 1964. The routine work of surveying premises to detect infestations continued and 577 visits were made for this purpose. In all 1,502 minor infestations of rats and 9 of mice were discovered in dwelling houses and treated free of charge.

88 rat-infested business premises were also treated by the rodent operators, a charge being made for the work in each case. A total of £208 was derived from this source. 22 other business premises

which were found to be infested with rats were satisfactorily treated by the firms concerned.

Routine work at Corporation establishments to prevent infestation has continued throughout the year and has given satisfactory results, whilst regular inspection and frequent baiting have prevented infestation at the Council's refuse tips.

Sale of Pets and Pet Foods

21 annual licences to conduct pet shops were granted and 41 inspections carried out to ensure the observance of conditions of licence. No contraventions were detected. Ten samples of raw meat, sold as pet food, were submitted to the Public Health Laboratory and, with one exception, were reported as satisfactory.

Public Swimming Baths

Details of these are given below :-

Description of Swimming Bath	Capacity	Source of water used for filling	Method of Treatment	Frequency of changing the water	Bacteriological examinations of water
Pier Approach (owned by Local Authority)	150,000 gallons	Mains	Continuous filtration and chlorination	Every 2— 3 years	Consistently good results.
Stokewood Road (owned by Local Authority)	100,000 gallons	ditto	ditto	Every 3 years	Mainly good results.
Linden Hall (Privately owned)	60,000 gallons	ditto	ditto	Yearly	Consistently good results.

138 samples of water from the above baths were submitted to the Public Health Laboratory and of these 15 were reported not completely satisfactory. Immediate action was taken and further sampling carried out to ensure that unsatisfactory conditions had been remedied.

Private Swimming Baths and Paddling Pools

The waters from baths in 7 private hotels, three schools and a Scout training ground, as well as from public paddling pools,

were also regularly sampled to check on the maintenance of satisfactory conditions.

Hairdressing Establishments

At the end of the year 233 hairdressers were registered to carry on business at premises they occupy, whilst a further 22 registrations apply to persons conducting their business as visiting hairdressers. 166 inspections were carried out during the year and in the very few cases where contraventions of the Byelaws were noted informal action proved sufficient to achieve the necessary improvement.

Sale of Poisons

There are 199 traders, mostly hardware dealers and grocers, registered under the Pharmacy and Poisons Act, 1933, for the retail sale of the poisons scheduled in Part II of the Poisons List.

167 inspections were carried out during the year; no contraventions of the Poisons Rules were detected.

New Legislation

The following Acts and Regulations, which affect the work of the section came into operation during the year:—

Housing Act, 1964.

Riding Establishments Act, 1964.

Young Persons (Employment) Act, 1964.

Childrens' Nightdresses Regulations, 1964.

Dried Milk Regulations, 1964.

Meat (Treatment) Regulations, 1964.

The responsibility for the control of Common Lodging Houses was also placed upon the Department. Previously this control had been exercised by the Chief Constable.

Soft Drinks Regulations, 1964.

Legal Proceedings

The following legal proceedings were taken in 1964.

Pro	ceedings taken under	For	Result		
(1)	Food Hygiene (General) Regula- tions, 1960	Smoking whilst handling open food.	Fined £10.		
(2)	Food Hygiene (General) Regula- tions, 1960	Smoking whilst handling open food.	Fined £10.		
(3)	Food and Drugs Act, 1955	Sale of mouldy sausages	Fined £10 with costs of £8 8s. 0d.		
(4)	Food and Drugs Act, 1955	Sale of unsound brisket of beef	Fined £20 with costs of £8 8s. 0d.		
(5)	Food and Drugs Act, 1955	Sale of unsound ox- heart	Case dismissed by Magistrates		

Public Conveniences

In a seaside resort where a high proportion of the residents are elderly and which at times is crowded with visitors unfamiliar with local facilities, provision of adequate and readily accessible public conveniences is a necessity. The Council has always recognised this fact and there are now in the Borough no less than 176 public conveniences of which 149 are under the control of the Public Health Department.

A staff comprising a van driver, two plumbers and a maximum of 65 cleaners and attendants is employed under the supervision of the Public Conveniences Superintendent for the cleansing and maintenance of these conveniences. It is appropriate here to pay tribute to the loyal and efficient service given by these employees. The attendants, in particular, by their cheerful and courteous demeanour in their dealings with the public do much to create a favourable impression of Bournemouth in the minds of visitors.

The receipts from conveniences under Health Department control during 1964 were as follows:—

Source		Amou	nt	
Coin locks		£	S.	d.
	 	 14,318	10	0
Wash and brush up rooms	 	 337	16	10
"Brylcreem" dispensers	 	 24	17	10

Perfume and hand lotion-dispensers 40 18 0 (The last two amounts are a percentage of the total receipts, the balance being paid to the firms operating the machines).

During the year washing facilities at public conveniences have been further extended and there are now 53 conveniences where a free wash with liquid soap and paper towels may be obtained. In 19 public conveniences facilities are available for the provision of a wash with hot and cold water, soap and a linen towel at a charge of 2d.

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Water									64
Welfare Foods	77.22								25
Trenate I dods						1000	-017	THE REAL PROPERTY.	



COUNTY BOROUGH OF BOURNEMOUTH

EDUCATION COMMITTEE

Annual Report

of the

Principal School Medical Officer

Year 1964

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE,

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting my eleventh Annual Report as Principal School Medical Officer to the Education Committee, the fifty-seventh of a series dealing with the health of children attending your schools.

There has been little serious illness and comparatively few cases of notifiable infectious diseases, but outbreaks of minor illnesses of an infectious character, usually of viral origin, have occurred and can cause considerable disruption of school activities.

The general physical condition of the children continues to be very high indeed, and many of them are superb specimens of young adults, reaching physical maturity far earlier than a generation or two ago. The fact that full mental and emotional maturity often lags behind brings its problems and its complications, and while most children with the help of their parents bridge this gap successfully, some fall by the wayside and more thought should be given to helping children through this often difficult stage.

The employment of a Specialist Health Education Officer would seem to be a hopeful measure, in which the expectant mother, the pre-school child and the adult can hope to benefit equally with those of school age, and such an appointment is envisaged during 1965-6. One difficulty to be overcome will be to find time for extra-curricular activities such as health education in the school syllabus, and it might be a sound investment for the future if health education, including sex education, could be established as a compulsory subject in schools, linked perhaps with general biology as a recognised G.C.E. subject.

It is rather disappointing to note that the continued protection of school children against infectious disease, via "booster" injections, was lower during 1964 than in the previous year, for with the vast increase in international travel diseases to which we have been comparative strangers for many years are liable to be reintroduced into this country. Similarly school children holidaying abroad should be encouraged to obtain full protection against endemic infectious diseases well in advance of their holiday, in particular against smallpox, poliomyelitis and the enteric fevers.

It is noted that a very high proportion of children attending the Orthopaedic Clinic suffer from foot defects and it is important that parents not only avoid purchasing unsuitable types of footwear, but that new shoes are fitted sufficiently often to accommodate the growing feet. Foot infections, chiefly tinea pedis and verrucae, are common during the summer months and in addition to securing adequate treatment for the whole family, children suffering from these conditions should not indulge in communal activities where they are liable to spread the infection.

There still remains great difficulty in obtaining residential special school accommodation for the small number of children suffering from severe handicaps, and the small number of such establishments required by this country as a whole makes it inevitable that some children must travel far from their homes. The regionalisation of special schools must be linked by reciprocal arrangements between local education authorities, and the proposed residential school for maladjusted boys in Bournemouth will, in addition to providing badly needed accommodation for local children, provide a useful medium for exchange arrangements with other authorities providing special accommodation of a different kind.

My thanks are due to all members of the School Health Service and to the Head Teachers of your Schools for their willing cooperation at all times.

I am,

Yours faithfully,

WILLIAM FIELDING.

SCHOOL HEALTH SERVICE STAFF.

(As at 31st December, 1964).

Principal School Medical Officer: WILLIAM FIELDING, M.D., B.SC., D.P.H.

Deputy Principal School Medical Officer:
H. C. JENNINGS, M.B., CH.B., D.OBST.R.C.O.G., D.P.H.

School Medical Officers:

CICELY R. HAINES, M.B., CH.B, D.R.C.O.G.

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

R. B. KILLOH, M.B., CH.B., D.P.H.

Principal School Dental Officer: (Vacancy)

School Dental Officers:
H. S. HOOPER, B.D.S., L.D.S., R.C.S.
F. E. LOCKWOOD, B.D.S.
M. B. REDFERN, L.D.S.

A. P. J. WILLIAMS, L.D.S., R.C.S. (Part-time)

Dental Surgery Assistants:

H. ALLEN, D. M. COX, F. R. HICKMOTT, B. M. READ

Consultant Children's Psychiatrist (Part-time):

*J. STIRRAT, M.B., CH.B., D.P.M.

Psycho-Therapist (Part-time):
B. M. Pechey, M.A.

Educational Psychologists:

B. WORTHINGTON FOXLEY, B.SC., Dip.Psych., A.B.Ps.S. M. HERGETT, D.Phil., A.A.P.S.W.

Psychiatric Social Workers:
H. S. LOVEJOY
B. HARRISON

Ophthalmic Surgeons (Part-time):

*G. G. K. HOLDING-PARSONS, M.A., M.B., B.CH., D.O., M.R.C.S., L.R.C.P.

*RALPH F. JONES, M.B., B.S., F.R.C.S., D.O.

*A. P. FIELD, D.B.O.

Orthopaedic Surgeons (Part-time):

*Services provided by Surgeons from the Royal Victoria Hospital, Boscombe.

*Physiotherapist-in-charge:

E. O. JOSEPH, M.C.S.P.

*Assistant Physiotherapists:

E. SIMPSON, M.C.S.P.

M. HUGHES, M.C.S.P.

Speech Therapists:

N. LOUGHRAN (Part-time)

P. SHEA

Superintendent Health Visitor and School Nurse:

L. E. ROBERTS

Health Visitors and School Nurses:

J. AGER	M. Peakman					
K. H. BEAUMONT	J. M. ROBINSON					
D. E. BLUNDSTONE	N. E. SMITH					
F. DARLINGTON	C. M. SORTON					
M. E. DAVIES	E. STONE					
E. DERRY	G. N. SUCKAMORE					
Т. Гоот	M. Tratsart					
B. GEACH	J. VENN					
A. JOHNSON	M. WARD					
J. MULLIGAN	J. WILKINSON					

Clerk in charge of School Health Service Section: F. J. GOODE

Clerks:

E. G. PAYNE, J. W. PEAKE

*Employed by the Wessex Regional Hospital Board.

SCHOOLS AND SCHOLARS

Number of Primary Schools	 	 31
Number of Secondary Modern Schools	 	 11
Number of Secondary Grammar Schools	 	 2
Number of Special Schools	 	 1
Average attendance	 4	 15,389
Average number on School Registers	 	 16.610

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".

		- 50		-	1361	the girt				
DEFECTS		Children Aged 5 839		Children Aged 10 388		Children Aged 14 1,189		Other Periodic Inspections 1,055		
			Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin			11	3	13	1	21	2	30	7
Eyes:— (a) Vision (b) Squint (c) Other	::		18 21 2	3 _	42 1 5	<u>-</u>	253 5 4	<u>-</u>	209 13 3	<u>-</u>
Ears:— (a) Hearing (b) Otitis Med (c) Other	lia 		3 3	$\frac{1}{2}$	7 1 1	4 _	5 3 3	<u>-</u>	5 3 1	$\frac{3}{3}$
Nose or Throat		ио	17	47	12	9	7	5	30	38
Speech			14	8	6	2	3	3	11	6
Glands			1	11	2	1	_	1	-	7
Heart			2	6	_	3	3	13	2	16
Lungs			1	6	3	-	_	1	3	2
Developmental :- (a) Hernia (b) Other	•		4 4	8	<u>-</u>		1 15		1 18	<u>-</u>
Orthopaedic:— (a) Posture (b) Feet. (c) Other			12 12	5 3 10	3 18 8	3 5	11 26 6	6 11 2	11 24 13	1 7 4
Nervous System :- (a) Epilepsy (b) Other	-:		-		1	=	_	100	1 -	Emple —
Psychological:— (a) Developme (b) Stability	ent	LARS	6	25	11	10	2	3	8 2	18 2
Abdomen			1	-	-	-	-	-	10 10	dame.
Other			1	-	-	-	1	0-0	1	-
			133	138	152	46	369	56	389	127

FINDINGS ON MEDICAL INSPECTION

(a) Uncleanliness

68 cases of personal uncleanliness were discovered in 1964 compared with 81 in 1963. The majority of these cases occurred in primary schools and were of a minor character.

(b) General Condition

Only 2 children seen in 3,471 routine medical examinations were considered to be of "unsatisfactory" physique, a remarkably small proportion and a tribute to the high dietary standard enjoyed by the child of today.

(c) Minor Ailments

The number of cases treated at Minor Ailments Clinics rose from 188 to 227, the majority being of a truly minor nature.

(d) Defective Vision

Routine medical examinations among the entrant, intermediate and leaver age groups discovered 12.9% of children suffering from defective vision, and when to these age groups were added the 7 year old group and the 12-13 year old group, the proportion rose to 15.04%

All cases of defective vision were referred either to the Special Eye Clinics or to private oculist at the parents' choice and cooperation was extremely good. (Only one parent failed to cooperate).

1,916 children attended the Special Eye Clinics during the year and spectacles were prescribed in 729 cases by Consultant Ophthalmic Surgeons of the Bournemouth and East Dorset Hospital Management Committee. 345 children attended for the first time, and 179 were recommended to wear spectacles.

The Orthoptic Clinic at "Avebury" was attended by 60 new cases during the year, while 24 children received operative treatment for "squint," being subsequently followed up by the Ophthalmic Surgeons.

(e) Defects of the Nose and Throat

293 children received treatment for enlarged tonsils and adenoids, compared with 246 in 1963.

(f) Treatment of Children in Hospital

The following information was given in hospital discharge reports received during the year :—

	Group of L	Disease	s			No. of Children
1.	Infections or Parasitic Diseases				 	9
2.	Neoplasms (a) Benign (b) Malignant				 	1
2		·			 	_
3.	Allergic, Endocrine, Metabolic ar			al	 	-
4.	Diseases of blood and blood form	ning o	rgans		 	-
5.	Mental, Psychoneurotic				 	
6.	Diseases of Nervous System and	Specia	al Sens	es	 	56*
7.	Diseases of Circulatory System a					11
8.	Diseases of Respiratory System					319†
9.	Diseases of Digestive System				 	105
10.	Conito Uninous System				 	
	Genito-Urinary System				 	18
11.	Skin and Cellular Tissues				 	4
12.	Bones, etc				 	248
13.	Accidents, Poisoning and Violence	ce			 	81
	*Includes 24 operations for "squ †Includes 293 cases for tonsillect					

There is extremely good co-operation between the Consultant Paediatrician and the School Health Service, and in the case of any child hospitalized for a lengthy period, special educational arrangements have been made through the Chief Education Officer.

MINOR AILMENTS CLINICS

As recorded on previous occasions, these Clinics show a gradually declining use as the years go by, but particularly when they are located on school premises they give the doctor or nurse an opportunity of discussing children and their problems with the Head Teacher on the spot, and in this way retain some of their former value.

During the year a total of 2,280 attendances were made at Minor Ailments Clinics.

LIST OF CLINICS HELD FOR SCHOOL CHILDREN

Minor Ailments Clinics	MONDAY	TUESDAY	WEDNESDAY THURSDAY	THURSDAY	FRIDAY
East Howe: Hadow Road	Morning Afternoon — Morning	1111	1111	AFTERNOON MORNING MORNING	1111
Dental Clinics Central: 10 Madeira Road	MORNING AND	MORNING AND	MORNING AND	MORNING AND	MORNING AND
East Howe: Hadow Road Pokesdown: 896 Christchurch Road Charminster: East Way	AFTERNOON Do. Do. Do.	AFTERNOON Do. Do.	AFTERNOON Do. Do.	AFTERNOON Do. Do. Do.	AFTERNOON Do. Do. Do.
Eye Clinics Central: 10 Madeira Road Charminster: East Way West Howe: Cunningham Crescent	AFTERNOON	111	— Morning	Morning	Morning
Child Guidance Centre 844 Wimborne Road	MORNING AND AFTERNOON	Morning and Afternoon	MORNING AND AFTERNOON	MORNING AND AFTERNOON	MORNING AND AFTERNOON
Speech Therapy Clinics Central: 10 Madeira Road	1		MORNING AND	the s	own sob
Charminster: East Way East Howe: Caroline Road Kinson: Pelhams, Millhams Road Pokesdown: 896 Christchurch Road	AFTERNOON	MORNING AFTERNOON	AFTERNOON MORNING AND	MORNING	MORNING — AFTERNOON
West Howe: Cunningham Crescent Winton & Moordown: 844 Wimborne Rd.	Morning	Morning	AFTERNOON	AFTERNOON	

Children's Orthopaedic Clinic, 70 Stewart Road . . Surgeon's sessions — Friday Mornings. Physiotherapy — daily by appointment.

ORTHOPAEDICS

The weekly Consultant Orthopaedic session at Stewart Road Clinic has continued as in previous years, and full-time physiotherapists are available to carry out treatment throughout the week.

During the year 11,890 attendances were made, the majority by children attending the local authority's schools, but a number from private schools as this is primarily a hospital clinic, though held in local authority premises.

In all, 874 children attended the clinic during 1964, 277 of them being new cases, referred mainly by School Medical Officers or by local general practitioners.

Over 54% of Bournemouth children attending the Orthopaedic Clinic were under treatment for foot deformities.

Details of attendances for the past year were as follows:-

Number of scholars seen by the	20 01110	aons			594
THE REPORT OF THE PARTY AND TH	ie surg	eons			
Number of new cases					 207
Total number of attendances					 944
Number of cases discharged					 190
Defects found					
Genu Valgum/Genu Varum an	nd othe	er kne	e defec	ts	 178
Spastic conditions					 10
Due to Anterior Poliomyelitis					 7
Spinal Curvature and Poor Po	sture				 13
Torticollis					 2
Deformities of the foot					 322
Other conditions					 62

SPEECH THERAPY

During the year Miss Shea was appointed full-time Speech Therapist and Miss Abelson retired after many years' service with Bournemouth school children.

Mrs. Loughran continued as Senior Speech Therapist on a part-time basis, providing 6 sessions per week, and in all 15

sessions per week were devoted to therapy, one session to school visits, and one session to home visiting. The clinic sessions were as follows:—

		Sessions			
Pokesdown Clinic	 		3		
Alma Road Clinic	 		2		
Avebury Clinic	 		2		
East Way Clinic	 		2		
Winton Clinic	 		2		
Caroline Road Clinic	 		2		
Pelhams Clinic	 		1		
West Howe Clinic	 		1		

Mrs. Loughran comments,

"Once again good attendances show the advantages of providing clinic facilities within reasonable distance of home and school as attendances must be made regularly and frequently. Throughout the year there have been visits to schools and homes to assure a personal relationship so essential when helping parents and children with difficulties."

Periodic meetings were held with the Child Guidance team for case discussions and Miss Shea inaugurated one evening class for older stammerers. Case consultations were also held with Paediatricians, Ear, Nose and Throat Surgeons and Specialists in the educational field.

During 1964, the Hospital Management Committee lost their speech therapist, and as an interim measure the School Service has tried to assist by dealing with some of the more difficult hospital cases, mainly during the evenings.

It is hoped that when the School Speech Therapy Service is able to expand, some form of joint-user arrangement with the hospitals will prove possible.

B.C.G. VACCINATION

School children born in 1951 were offered protection against tuberculosis by B.C.G. vaccine, in accordance with the Ministry's Scheme, and of 1,445 children tuberculin tested, 1,237 were vaccinated.

CHILD GUIDANCE

Dr. Jeannie Stirrat, Consultant Children's Psychiatrist to the Wessex Regional Hospital Board, has submitted the following account of the work of the Child Guidance Centre during 1964.

CHILD AND FAMILY GUIDANCE CENTRE

The number of new cases referred in 1964 shows an increase of 49 over last year's figures. This is a relatively large increase but the figures for 1963 were below the average for recent years. The number of new cases seen in 1964 also increased. Figures alone, however, do not give an indication of the complexity of some of the problems presented by individual children and their families. Behaviour difficulties which form the largest category for which children are referred are frequently found on investigation to be indicative of deep-seated and complicated family disturbances in which the parents are frequently themselves emotionally upset. When these difficulties occur in an adolescent the situation becomes acute as the young person is more likely to act out his inner disturbance with the possible outcome of conflict with the law. The number of severely disturbed children is fortunately relatively small but they present a continuing problem requiring support over a long period both for themselves and their families. Children placed at Residential Schools are also a continuing responsibility. The number of new cases, therefore, for any one year has to be viewed in the light of both the complexity of the problems presented about which our help is sought, and our continuing concern for those whose difficulties are of a long-term nature.

During the year there have been a number of changes and additions to the staff. In February. Miss M. Hergett, Ph.D. transferred from her appointment as a Psychiatric Social Worker and took up the duties of Assistant Educational Psychologist. While the post of full-time Psychiatric Social Worker was vacant we were fortunate in securing the services of Mrs. June Higgins, A.A.P.S.W. who came to work on a part-time basis.

In May, Mr. Pechey, M.A., F.B.P.S.S., took up the newly-created appointment of Child Psycho-Therapist. We very much welcomed him as a member of the team, bringing with him as he does considerable experience of psycho-therapeutic work with children and their families. His appointment increases the Centre's potential

for psychological treatment. In August, Miss Berry Harrison, A.A.P.S.W. took up the full-time post of Psychiatric Social Worker. She had formerly worked on research in London and prior to that had been in Child Guidance work in Bristol. At the beginning of the last quarter of the year Dr. Maureen Burrage was appointed by the Regional Board as Clinical Assistant to Dr. Stirrat for one session a week. Dr. Max Honigsberger was also appointed as Clinical Assistant in an honorary capacity.

On Tuesday, August 25th, the Child Guidance Centre moved to its new premises at 844 Wimborne Road, Moordown. The newly decorated and modified building now gives us the long-awaited pleasant and efficient working conditions which are appreciated not only by the staff but also the children attending and their parents. Concurrently with the change of address and new premises came the change of name. We are now "THE CHILD AND FAMILY GUIDANCE CENTRE." We are very pleased that the Committee agreed to this expansion of our title as we consider it expresses much more accurately our function. In our experience the child's disorder is so often a sympton of the family's maladjustment. The parents need to understand the child and the way in which their behaviour affects him as much as the child needs to understand himself and his situation.

The training of Social Workers in the techniques of casework method has continued this year and six men and women from the Applied Social Studies Course at Southampton University have had periods of supervised training here. The senior Psychiatric Social Worker, Mr. H. S. Lovejoy, was responsible for the supervision of three of these Social Workers and during the later part of the year Mrs. June Higgins took on a group of three whose training extends into the following year. The appointment of Mrs. Higgins as a Supervisor on a part-time basis resulted from the co-operation of the Local Authority with Southampton University, Department of Social Studies, the University meeting the cost of her salary.

Case conferences have continued regularly throughout the year and have been attended by General Practitioners, School Medical Officers, Child Welfare Officers, Probation Officers, Educational Welfare Officers, Head Teachers, Health Visitors and other professional people who are interested. We have been very pleased this year to have developed our contact with the Speech Therapists. Their assistance with cases in which there are speech problems has

been invaluable and we look forward to continuing co-operation with them. A very much closer link has been established with the Consultant Paediatrician in the area and this has resulted in fruitful co-operation both in connection with children referred by him and children known to us being facilitated in their admission to a General Hospital children's ward when such an arrangement is in the interest of a particular child and his family.

JEANNIE STIRRAT,

Consultant Children's Psychiatrist.

ANNUAL RETURNS FOR YEAR ENDED 31st DECEMBER, 1964

New Cases referred					205
New Cases seen		 	 		200
Uneventuated					18
Cases closed		 	 		298
Casas ra ananad		 	 		24
Open cases 31.12.64		 	 		341
Awaiting Preliminary Invest	igation	 	 		35
Awaiting Psychiatric Investi		 	 		36
Course of Defounds					
Source of Referrals					
		 	 		49
General Practitioners .		 	 		57
Head Teachers		 	 		38
Parents		 	 		29
Medical Consultants .		 	 		29 13
Destadion Officer		 	 		5
School Psychological Service		 	 		4
Missellangous		 	 		4 5
Wiscentificous		 	 		
					229
Age Group of Referrals					
Pre-school		 	 		24
Primary		 	 		126
Sacandary Madern		 	 		66
Grammar		 	 		13
					229
					-
Reasons for Referrals					
					149
Behaviour difficulties .		 	 	**	60
Psychosomatic symptoms .		 	 		10
NT		 	 		9
C 1 1.1		 			1
Specen problems		 	 		
					229
					-
Closures					
Improved by treatment .		 	 		130
Parents unable to co-operate		 	 		24
Not responsive to treatment		 	 		12
Advice only		 	 		87
Left School		 	 		3
Transferred to other agencie	es	 	 		33
Removed from area		 **	 		9
					298
					270

IMMUNISATION AGAINST INFECTIOUS DISEASES

Arrangements have continued for the protection of children against diphtheria, whooping cough, tetanus, poliomyelitis, small-pox and tuberculosis in accordance with Schedule P (modified) of the Ministry of Health.

The results of propaganda are not entirely satisfactory, for though infant and pre-school immunisation continue at a fairly high level there is a reluctance to accept the "booster" injections that are so necessary to maintain immunity through school life.

During the year protection was given as below :-

Primary	Booster
1	85
7	254
3	247
3	29
	3
3	2
	Primary 1

Protection against poliomyelitis (booster doses) was given to 1,082 school children, while 1,237 children received B.C.G. protection against tuberculosis in addition to 33 others dealt with as "contacts."

NOTIFICATION OF INFECTIOUS DISEASES

The following relate to school children:-

Measles			 269
Whooping Cough			 24
Scarlet Fever			 15
Dysentery		HERD I	 3
Encephalitis (Post	infect	ious)	 1
Food Poisoning			 1
Para-Typhoid			 1
Scabies			 1
Typhoid			 1

316

There were no notifications of tuberculosis.

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 parents and can satisfy herself that treatment has been sought from the general practitioner and his advice carried out.

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

				No.
Eye Defects				129
Ear, Nose and	Throat	condi	tions	41
Skin complaints	S			45
Uncleanliness				90
Miscellaneous				210
				515

Exclusion from School

Scholars were excluded from school during 1964 for the following reasons:—

Behaviour prob	olems		 1
Eye conditions	(Post-	p.)	 17
Impetigo			 2
Uncleanliness			 7
			27

Open Air Education

There was no indication for the admission of any child to a residential open air school during 1964.

SCHOOL MEALS SERVICE

35 Centres are provided for the provision of meals and the number of children attending on an average day in September was 9,707 out of 15,459 children attending school that day. 630 of these meals were provided free. On the same day, 12,246 children received milk in school (one-third pint each).

STAFF EXAMINATIONS

82 school teachers were examined by the medical staff, as a condition of appointment, also 84 applicants for entry to Training Colleges. In addition, 25 students were examined on completion of their course at the Bournemouth Municipal College of Art.

EMPLOYMENT OF SCHOOL CHILDREN

A total of 542 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. All were found fit for the purpose. The occupations proposed were:—

Errand Boys	 	 27
News boys	 	 355
News girls	 	 120
Shop assistants	 	 27
Other	 ·	 13

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

HANDICAPPED CHILDREN

The number of handicapped children on the Register showed a decline from the previous year, 447 (2.69% of children on the school register) compared with 482 (2.89%) during 1963.

In order of frequency, the disabilities were as follows:-

Educationally subnorma	al	 177
Defective speech		 139
Maladjusted		 48
Physically handicapped		 30
Partially hearing		 24
Delicate		 16
Partially sighted		 5
Blind		 3
Deaf		 3
Epileptic		 2

HANDICAPPED PUPILS

	Ascertainment	inment		Special Schools*	hools*	
Category	New Cases Ascertained During 1964	Number on Register, 31.12.64	Number Recommended During the Year for Admission	Number Admitted During the Year	Number Attending 21.1.65	Number Awaiting Placement 21.1.65
Blind Partially Sighted Partially Bartially Hearing Delicate Physically Handicapped Baladjusted Bepileptic Speech Defective	10 0 0 1 1 1 1 2 2 1 2 2 1 2 2 1 3 2 1 3 2 1 3 2 1 3 2 1 3 2 1 3 1 3	3 24 177 177 139	1-111-8-11	33 1 1	20 10 113 34 113	1111110011
Total	127	447	43	40	174	П

* Includes boarding houses or hostels and independent schools: excludes Hospital Schools.

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944.

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Annual Report on the School Dental Service—1964

Owing to the absence for the greater part of the year of two of the staff there has been some unavoidable reduction in the treatment carried out by the School Dental Services this year. Neverthless, all schools but one were inspected and nearly a thousand more children seen than in the previous year, although the number of children actually treated showed a slight drop. In the circumstances, the number of treatments carried out compares favourably with the previous year and there has been a further drop in the number of permanent teeth extracted. Of these, more than half were extracted for Orthodontic purposes. This is very gratifying and places our figures well above the national average.

There was a slight reduction in the number of permanent teeth filled, but an increase in the number of milk teeth filled. General anaesthetics were down by nearly two hundred, indicative of a trend away from general anaesthesia towards local anaesthesia.

There was a decrease in the number of Orthodontic cases under treatment and also in those referred to the Hospital Consultant. This is probably a quite fortuitous drop as all children in need of Orthodontic treatment are offered facilities and there is now keen interest from both parents and children in having treatment. There was close co-operation between the Hospital Orthodontic Department and the Clinics, which we found very helpful.

The general standard of dental care found in our school children continues to improve, although the number of children wholly free of caries is as low as 2%, which is a grave indictment of our national dietary habits. The caries rate in the five-year-old school entrants remains very high and there appears to be a wide-spread lack of parental concern or appreciation of the problem at this age level. This attitude stems from the general and erroneous belief that nothing can or should be done, other than extractions, for the milk teeth.

The national trend for patients to drift away from the School Dental Service to the National Health Service appears to have halted in Bournemouth and statistics show that for the last three years the number of our school children treated by private practitioners remains at about 45%.

With our depleted staff, it has not been possible to devote as much time as we should like to Dental Health Education. We receive valuable help in this field from teachers and Health Visitors but it is hoped in the future to extend this aspect of dentistry, and that it will be possible to place more emphasis on the prevention of dental disease. Dental Health Education on a wide scale, coupled with fluoridation of the nations water supplies, would go far towards eradicating dental decay, thus saving much pain and distress to children and parents alike and providing great economies in the vast sums that the government and local authorities now spend in repairing the ravages of dental disease.

The new East Way Dental Clinic was opened on 12th May, 1964. This is the first purpose-built Dental Clinic within the County Borough and admirably suits its purpose. Situated in close proximity to the schools it serves, it has proved a great asset and has considerably reduced the amount of school time lost by pupils attending for treatment. This is a point to be borne in mind when planning future developments within the School Dental Service.

Finally, I should like to thank all members of the staff whose co-operation and loyalty in a very difficult year have been outstanding. My thanks are also proffered to the staff and Head Teachers of all our schools and to the Superintendent Health Visitor and her staff who have great facilitated our work. I am also very grateful to the Consultants, staff and technicians at the Hospital for their help and advice and the facilities they provide.

M. B. REDFERN,

Acting Principal Dental Officer

Medical Inspection and Treatment

Return for Year Ended 31st December, 1964

Number of pupils on registers of maintained schools in January 1965 and in Direct Grant, Non-maintained and Independent schools (under arrangements made by the Authority) as in —

(i) Form 7 Schools			 	16,627
(ii) Form 7M			 	107
(iii) Form 8b Schools			 	297
(iv) Form 11 Schools			 	_
	TOTA	L		17.031

PART 1

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

TABLE A-PERIODIC MEDICAL INSPECTIONS

	No. of Pupils	Physical of Pupils	Physical Condition of Pupils Inspected	No. of Pupils found not to	Pupils found ing dental	Pupils found to require treatment (exclud- ing dental diseases and infestation with vermin)	nent (exclud- station with
-	received a	Satisfactory	Unsatisfactory	medical	for	for ann	
	examination			Cyammanon	defective	other	Total
		No.	No.		(excluding	recorded	puplis
SEA.	(2)	(3)	(4)	(5)	(9) (9)	(7)	(8)
1960 and later	13	13		1	18	115	121
	252	251	-		2	49	45
	97	97	1	1	5	17	18
	13	13	1	1	7	2	m
	388	387	-	451	42.5	110	134
	240	240	.	289	38	49	72
	158	158	1	1	99	32	70
-	28	28	1	-	11	10	15
	14	14	-	1	9	7	12
1949 and earlier	1415	1415	1	ı	340	126	431
	3471	3469	2	740	522	521	726

Col. (3) total as a percentage of Col. (2) total 99.94%

Col. (4) total as a percentage of Col. (2) total 0.06%

TABLE B-OTHER INSPECTIONS

Number of Special Inspections Number of Re-Inspections						998 24
Number of Re-Inspections						
		Тота	L			1,022
			270/04/2013			
TABLE C-INFES	STATI	ON WI	TH V	ERMI	N	
(a) Total number of examination	s of pu	ipils in	the sch	nools b	y the	
school nurses or other author	ised pe	rsons				23,563
(b) Total number of individual p	upils fo	ound to	be infe	ested		68
(c) Number of individual pupils	in re	spect of	f who	n clear	nsing	
notices were issued (Section 5						NIL
d) Number of individual pupils	in res	spect of	whor	n clear	nsing	
orders were issued (Section 54	(3), E	ducatio	n Act,	1944)		NIL

PART 2

PART II. — DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS DURING THE YEAR

Defect Code	Defect or Disea	ise		1	Periodic Inspections		S	Special
No. (1)	(2)	130		Entrants	Leavers	Others	Total	Inspec- tions
4	Skin		T	11 3	21 2	43 8	75 13	2
5	Eyes—(a) Vision		T	18	253	251	522	7
	(b) Squint		TO	21	5	14	3 40	OE N
	(c) Other	٠.	T	2	4 3	8 15	14 18	1
6	Ears—(a) Hearing		T	3 1 3	5	12	20	2
	(b) Otitis Me	dia	T	3	3	7 4	8 10	_
	(c) Other		TO		3 1	2 3	5 6	=
7	Nose and Throat		T O	17 47	7 5	42 47	66 99	1 1
8	Speech		T	14 8	3 3	17 8	34 19	1
9	Lymphatic Glands		T	1 11	<u>_</u>	2 8	3 20	_
10	Heart		T	2 6	3 13	2 19	7 38	2
11	Lungs		TO	1 6	-	6	7	
12	Developmental :-				1	2	9	_
	(a) Hernia		T	4	_	1	6	=
	(b) Other	• •	T	4 8	15	36	55 19	20
13	Orthopaedic :— (a) Posture (b) Feet		T O T	5 12	11 6 26	14 1 42	25 12 80	$\frac{2}{1}$
	(c) Other		O T O	3 12 10	11 6 2	10 21 9	24 39 21	3

T = Defects found to require treatment.

O = Defects requiring observation only.

Defect Code No. (1)	Defeat on Disease		Periodic Inspections			
	Defect or Disease (2)	Entrants	Leavers	Others	Total	- Inspec- tions
14		T —		2	2	1
15	AND DE COMMENTS		, RETURN	10 = 13	- NEW	=
15	(b) Stability	T 6 25 —	2 3 —	19 28 2 2	27 56 2 2	3
16	Abdomen	T 1 0 -		_	1	=
17		T 1 -	1	1	3	=

T = Defects found to require treatment.

O = Defects requiring observation only.

PART 3

PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A-EYE DISEASES, DEFECTIVE VISION AND SQUINT

	of cases known been dealt with
External and other, excluding errors of	5
refraction and squint	24
Errors of refraction (including squint)	1940
Total	1964
Number of pupils for whom spectacles were prescribed	729

TABLE B-DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

		of cases known been dealt with
Received operative treatment	:	
(a) for diseases of the	ear	2
(b) for adenoids tonsillitis		293
(c) for other nose conditions.		9
Received other forms of treat	ment	51
Total		355
Total number of pupils in are known to have been hearing aids.	schools who provided with	
(a) in 1964		2
(b) in previous years.		8

TABLE C-ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments Pupils treated at school for postural	602
Pupils treated at school for postural defects	59
Total	661

TABLE D-DISEASES OF THE SKIN

(excluding uncleanliness for which see Part I—Table C)

			Number of cases known to have been treated	
Ringworm—(i) Scalp			- mave been treated	
(!!\ D - 1			-	
Scabies			1	
Impetigo			5 406	
Other skin diseases			400	
Total			412	
TABLE E-CHILD	GUIDANCI	E TR	EATMENT	
			Number of cases known to have been treated	
Pupils treated at Child Guid	lance Clinic	s	327	
TABLE F—SPEECH THERAPY				
			Number of cases known to have been treated	
Pupils treated by Speech Th	erapists		251	
TABLE G-OTHE	R TREATM	MENT	GIVEN	
			Number of cases known to have been dealt with	
(a) Pupils with minor ailme	ents		227	
(b) Pupils who received cor	valescent tr	eat-		
ment under School	Health Ser	vice		
arrangements			NIL	
(c) Pupils who received B.C	C.G. vaccina	tion	1270	
(d) Other than (a), (b) ar	nd (c) above	ve		
Obesity cases			16	

1513

Total (a)-(d)



