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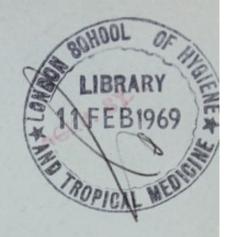
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COUNTY BOROUGH OF BOURNEMOUTH

Annual Report

of the

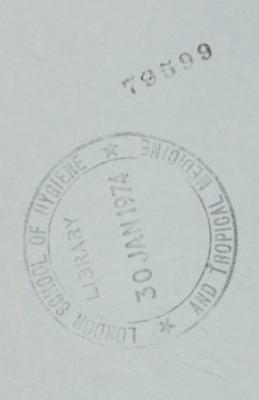
Medical Officer of Health

and

Principal School Medical Officer

For the Year 1965

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 1965

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 1965, the eighty-seventh of the series.

Vital Statistics

The Registrar-General's mid-year estimate of population showed a small decline from 151,090 to 151,050, and this latter figure forms the basis for the vital statistics that follow.

A total of 1,995 live births were registered, representing a birth rate of 13·21 per 1,000 population, compared with 1,971 live births and a birth rate of 13·05 per 1,000 population in 1964. This is a low birth rate compared with the rate for England and Wales of 18·1 per 1,000 population, the reason being that Bournemouth has a far higher proportion of elderly people than is found in the rest of the country. Included in the total were 259 illegitimate births, or 13·0 per cent of the whole.

Stillbirths numbered 22, giving a stillbirth rate of 10.91 per 1,000 total births, much lower than the national average.

Thirty-nine infants died before their first birthday compared with 29 in 1964, giving an infant mortality rate of 19.55 per 1,000

live births. This is slightly over the national average, and is largely accounted for by an increase in the number of babies dying when they were over one month old.

There were 2,529 registered deaths, giving a death rate of 16·7 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 10·2 per 1,000 population. Both these rates are slightly above those of 1964, due chiefly to an increase in deaths from degenerative heart and artery disease among the older age groups.

There was one maternal death, and deaths from pulmonary tuberculosis declined to three.

Notifiable Infectious Diseases

There were no epidemics of major notifiable disease, and no cases of poliomyelitis, enteric fever or diphtheria. Three small outbreaks of food poisoning occurred, involving 21 persons, and there was a largely unexplained increase in the notifications of scabies, to 43, the majority of cases occurring in children and young adults.

Tuberculosis

There were 34 notifications of pulmonary tuberculosis and 7 notifications of non-pulmonary disease, compared with 40 and 5 notifications respectively in the previous year.

Many sufferers from pulmonary tuberculosis, infected elsewhere, come to reside in the Borough each year owing to the climatic advantages it enjoys, and an extension of the B.C.G. vaccination programme as an adjunct to the diagnostic and curative services provided by the Wessex Regional Hospital Board would seem to be the only logical way of eradicating this disease within the fore-seeable future.

The Chest Clinic has been transferred to the Royal National Hospital, which now receives all patients from the Bournemouth area, and it is pleasing to record once again the excellent co-operation that exists 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 and there was once again an increase in the number of infants and young children attending the clinics. It is regrettable that sites for the new clinics proposed at Pelhams and Bear Cross still cannot be found, but meanwhile the present arrangements in these areas are continuing.

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 restrict admissions to "priority" classes, which led to an increase in the registration of private day nurseries under the Nursery and Child Minders (Regulation) Act, 1948.

All nurseries were inspected at regular intervals.

The Domiciliary Services of the Corporation

Domiciliary Midwifery
Health Visiting
Home Nursing
Domestic Help

The national shortage of all categories of medico-social worker has prevented many developments in the Corporation's domiciliary services and it is only with difficulty that existing services have been maintained.

The decline in home confinements has continued, but the increase in early discharges from hospital maternity units has kept all the domiciliary midwives fully employed, particularly as some of them have additional duties in training Part II C.M.B. students, and others assist at the Cervical Cytology Clinics.

It is the services provided by health visitors, home nurses and domestic helps that have suffered most by the inability to recruit additional numbers, and of these the services to old and ailing people, problem families, unmarried mothers, and an extension of general practitioner attachments have been worst hit.

There is always a tendency where resources are limited to concentrate on services where the pattern and the rewards are known, to the exclusion of pioneering ventures which are time-consuming and where the rewards, though potentially great, may be long deferred. This seems a mistake, and it is important that no matter how small the total resources may be, a portion of them should be devoted to carefully selected enterprises where information can be gathered and new methods tested before future full scale development takes place.

The Ambulance Service

There was a small decline from the record figures of 1964, and if this is an indication of a more stable demand, even for the time being, it also suggests that this is the time for consolidation, for improvements in the Depot, the fleet, and the training of ambulance personnel in anticipation of the increased demands on the service that may well occur as the Hospital Programme gains momentum.

Vaccination and Immunisation

The vaccination and immunisation programme was generally well maintained, achieving a considerably higher rate than the national average, but there is an increasing tendency for parents to neglect these simple precautions in respect of diseases to which they have long been strangers. The recrudescence of some of these diseases of recent years in other parts of the country shows, however, the folly of complacency.

Mental Health Services

In previous reports reference has been made to the curious consistency in the number of hospital admissions during the past quinquennial period, and to the increasing number of readmissions following relapse. The year 1965 showed little variation in the numbers admitted, but there was a welcome reduction in readmissions which it is tempting to think may be due in some part to the efforts of the mental social workers in providing aftercare. The two hostels, both of which were largely filled to capacity, must also have played a not insignificant part, and the number of residents who after a period were able to return to the community and often to employment was most encouraging.

The arrangements for the treatment of all forms of mental disorder provided by the Wessex Regional Hospital Board have worked well and there has been excellent co-operation between individual hospitals and officers of the Health Department.

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, or likely to affect, the public health.

As is pointed out, a full staff has enabled him to make substantial improvements in the efficiency of the inspectorial service and to achieve results surpassing those of previous years.

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. J. Beasley, 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, 1965

HEALTH COMMITTEE

The Mayor (Alderman R. S. Morris, J.P.) Alderman Mrs. M. C. Wall (Chairman) Councillor F. H. Beale, M.A. (Vice-Chairman)

Plus 4 Assistants.

Council Members Alderman F. A. W. Purdy Councillor T. Ashworth ,, L. Brockbank ,, B. H. Cummins ,, W. C. Grove ,, G. Knops	" Mı " C. " R.	P. Mooney W. Patton rs. G. Rees H. Roberson I. Swinnerton, J.P. rs. M. A. Webley
Other Members L. J. J. Morgan, Esq., LL.B. A. A. F. Shepherd, Esq., L.R.C. C. Heygate Vernon, Esq., F.R.C. I. Howard Jenkins, Esq., M.B.,	C.S.	
PUBLIC	HEALTH DEPARTM	ENT
Medical Officer of Health, Pri pal School Medical Officer, Medical Referee to Crema Authority	and M.R.C.S., I	ing, B.Sc., M.D., Ch.B., L.R.C.P., D.P.H.
Deputy Medical Officer of Hea Deputy Principal School Med Officer, Deputy Medical Ref to Cremation Authority	lical	B., B.S., D.P.H.
Assistant Medical Officers Health, School Medical Offi	cers L.R.C.P.(I), R. B. Killoh	Keating, L.R.C.S.(I), L.M., D.C.H. n, M.B., Ch.B., D.P.H. L.R.C.P., M.R.C.S.
Principal Dental Officer	M. B. Redferr	i, L.D.S.
Dental Officers	R. B. Mouatt, C. Pugh, L.D.	B.D.S.
Chief Public Health Inspector	Jack Randall,	M.R.S.H.
Deputy Chief Public He	C A Managan	
District Public Health and F Inspectors		A. R. Woollard H. B. Frost B. W. Kirkton
District Public Health Inspector	W. Vincent M	

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, A. Johnson, A. D. Lane, J. Mulligan, M. A. O'Looney, M. Peakman, R. C. Richter, J. M. Robinson, E. Roth, C. M. Sorton, G. N. Suckamore, J. Venn, E. M. P. Ward, J. Wilkinson, (8 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, C. D. Crumpton, M. DaCosta, G. Draper, E. P. Gilbert, R. Guscott, M. M. L. Hemmi, M. Higgins, B. Jackson, M. Jones, T. M. Jones, C. Langley, M. S. McKenney, P. R. May, L. Mist, E. Rampton, B. M. Rendle, R. J. K. Schneiter, E. E. Souter, G. H. Sutton, J. K. Tolley, D. E. Welch, (1 vacancy).
Senior Psychiatric Social Worker Psychiatric Social Worker	H. S. Lovejoy B. Harrison
Social Workers	P. R. Neville, C. J. Parsons, 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	J. W. Roberts
Senior Administrative Assistant	H. V. Humberston
Secretary to Medical Officer of	р т
Health Section Clerks	B. Tyrer
	F. J. Goode, C. Lockett, P. N. Loweth, S. Murphy
Clerks	H. R. Bryan, K. F. Clarke, C. L. Crossland, W. A. Hamer, P. Hawke, M. McGovern, M. E. Mead, I. Murphy, R. T. R. Norcross, E. G. Payne, J. W. Peake, M. A. Reeve, R. W. Rowe, S. R. Savage, S. Staniford, S. G. Tarrant, N. Ullithorne, L. S. F. Wood
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
Health Education Officer	C. N. Gumbley
Training Centre	C. R. Ashley, K. M. Reeves (Supervisors), P. B. Barnes, M. Drurey, W. E. Fisher, G. M. Nott, S. Nott, J. F. Randall, B. Usher, (1 vacancy)
Superintendent of Public Conveniences and Mortuary	W. C. R. Jewell
Rodent Officer	P. L. J. Sibley, plus 4 Operatives.
PART-TIM	IE 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 Public Analyst	J. E. Stirrat, M.B., Ch.B., D.P.M. H. Dedicoat, F.R.I.C. A. J. Mortimer C. Lockett, S. Tweedie

⁼Employed by Wessex Regional Hospital Board.

General Statistics

Area of the County Borough				11,627 acres
Estimated Civilian Population	-Mic	1 Year	1965	151,050
Census Population, 1961				154,296
Rateable Value at 1.4.65				£9,909,780
Product of 1d. rate, 1965/66		7.		£40,109

Vital Statistics

Live births { Male Legitimate 902, Illegitimate 131 } 834, 128 } 87% , 13%	1995
Birth rate (per 1,000 population)	13-21
Stillbirths { Male Legitimate 12, Illegitimate 1 }	22
Stillbirth rate (per 1,000 total live and still births)	10.91
Total Deaths (Males 1176, Females 1353)	2529
Death Rate (per 1,000 population)	16.74
Adjusted Death Rate (per 1,000 population)	10.21
Maternal Deaths (Sepsis 1, Other causes Nil)	1
Maternal Mortality Rate (per 1,000 total births)	0.5
Number of deaths of infants (under 1 year of age) :— Legitimate 35, Illegitimate 4	39
Infant Mortality Rate (per 1,000 live births)	19-55
Number of Neo-natal Deaths (under 4 weeks of age)	30
Neo-natal Mortality Rate (per 1,000 live births)	15.04
Number of Early Neo-natal Deaths (under 1 week of age)	25
Early Neo-natal Mortality Rate (per 1,000 live births)	12-53
Number of Perinatal Deaths (Stillbirths and deaths under 1 week of age)	47
Perinatal Mortality Rate (per 1,000 live and still births)	23.30
Deaths from Whooping Cough, all ages	Nil
Deaths from Measles, all ages	1
Deaths from Diarrhoea, under 1 year of age	Nil
Deaths from Pulmonary Tuberculosis (Males 2, Females 1)	3
Death rate from Pulmonary Tuberculosis (per 1,000 population)	0.02
Deaths from Non-Pulmonary Tuberculosis	Nil
Death rate from Non-Pulmonary Tuberculosis (per 1,000 population)	Nil
Deaths from Cancer (Males 220, Females 262)	482
Death rate from Cancer (per 1,000 population)	3.19

Births

The number of live births allocated to the area after adjustment for inward and outward transfers was 1,995, an increase of 24 on the total for 1964 and over 16 per cent higher than the average births in the ten year period 1955-64.

Average number of births, 1955-1964	 1,714		
Births in 1965	 1,995		
Average birth rate, 1955-1964	 11.7 p	er 1,000	population
Birth rate, 1965			population
Birth rate, England and Wales, 1965			population

Stillbirths

There were 22 stillbirths in 1965 compared with 23 in 1964, the majority of them occurring in hospital practice. The rate for 1965 was 10.91 compared with 11.53 in 1964.

Average number of stillbirths, 1955-1964	30
Stillbirths in 1965	22
Average stillbirth rate, 1955-1964	17.49 per 1,000 total births
Stillbirth rate, 1965	10.91 per 1,000 total births
Stillbirth rate, England and Wales, 1965	15.7 per 1,000 total births

Illegitimate Births

Illegitimate births accounted for 13.0 per cent of the total births compared with 12.3 per cent in 1964.

Prematurity

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

During the year 156 premature births were notified, 7.7 per cent of the total births, and 5 more than in 1964. The great majority of these babies (146) were born in hospital, and 13 of them were stillborn.

Born at home or in Nursing Homes Born in Hospital	10 133	Stillborn — 13	10 146
	143	13	156

Infant Mortality

Thirty-nine infants died before their first birthday, ten more than in 1964, and the infant mortality rate was 19.55 per 1,000 live births compared with the national average of 19.0 per 1,000 live births.

Twenty-five of the thirty-nine infants died before they were a week old, seventeen from prematurity, three from congenital abnormalities, and five from other causes.

Of the remaining fourteen babies who survived the neonatal period, five died from congenital abnormalities, five from asphyxia, three from pneumonia and one from an accident.

Maternal Mortality

There was one death during the year associated with pregnancy, a 39 year old woman dying from bronchopneumonia and septicaemia following a recent abortion. The post-mortem examination did not show any evidence of criminal interference with the pregnancy.

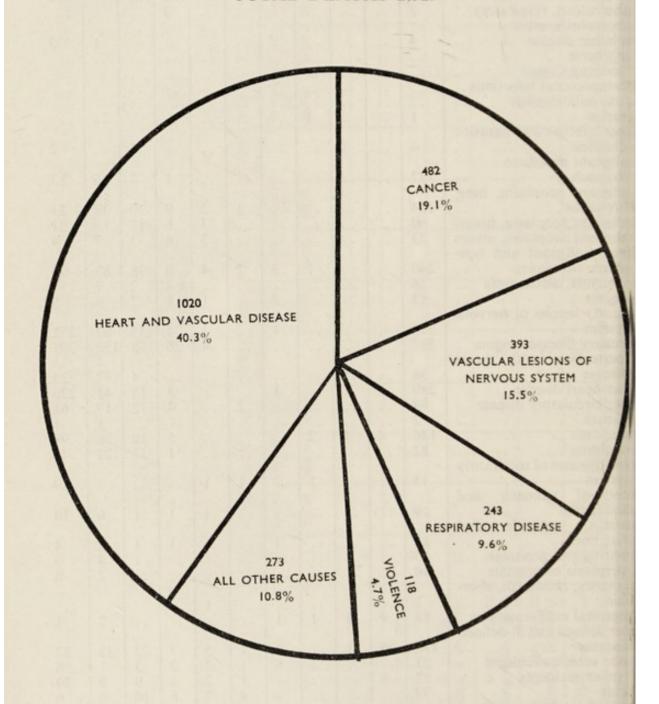
	PREMATURE		ш	at home or in a nurs- ing	1			1	1	
hina	PREMATURE STILL RIPTHS		Born	in hos- pital	5	3	3	-	-	13
		ore		in 7 and under 28 days	1	liefs.		1	1	1
	me	Transferred to hospital on or before 28th day	Died	in 1 and under 7 days	1	Ī	7	F	1	1
	sing ho	Transferred to pital on or bef 28th day	ioni Con	with- in 24 hours of birth		Is	nol	MI	1	1
	Born at home or in a nursing home	hos		Total births	1	1	1	-	1	1
IRTHS	ome or	at		in 7 and under 28 days	1	1	1	1	1	1
PREMATURE LIVE BIRTHS	rn at ho	Nursed entirely at home or in a nursing home	Died	in 1 and under 7 days		1	T	1	1	1
ATURE	Bo	ursed entirely home or in a nursing home		with- in 24 hours of birth	1	1	1	-	1	-
PREM		Z		Total births	-	1	1	2	7	10
				in 7 and under 28 days	1	1	1	- 1	1	1
	.5	ital	Died	in 1 and under 7 days	1	3	-	2	-	∞
	Down in	hospital		with- in 24 hours of of birth	9	1	-	1/1	1	∞
				Total births	6	9	30	31	57	133
					:	up to 4 oz.	up to 6 oz.	up to 15 oz.	up to 8 oz.	:
	Weight 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. and including 4 lb.	Over 4 lb, 15 oz. and including 5 lb.	Total		

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1965

	-				1111					, ,	
	All	0-	1-	5-	15-	25-	35-	45_	55-	65-	75—
Causes of Death	Ages	1					1224				
Il Causes	2529	39	4	8	16	15	39	105	323	619	1361
'uberculosis, respiratory	3							3			
uberculosis, other			1						1		
yphilitic disease	4									i	3
Diphtheria			1			1	1 ::	1 ::	1	1	-
Vhooping Cough			1			1			899	1 ::	
1eningococcal infections			1								
cute poliomyelitis	1		1	10000			**				
leasles	i	1	1	i	1						
ther infective and parasitic	1			1							
diagram	4		1				1		1		2
1alignant neoplasm	-		1						1		-
stomach	37	0.0		1990		la name		1	7	16	13
falignant neoplasm, lung,	31							1	1	16	13
bronchus	104					1	2	9	20	20	22
1alignant neoplasm, breast	60						2		30	39	23
	23						3	6	17	13	21
1alignant neoplasm, uterus	23						3	6	3	7	4
other malignant and lym-	240			,	2	2		0	20	07	01
phatic neoplasms	240			1	3	2	4	9	38	87	96
eukaemia, aleukaemia	18						.:	4	2	7	5
liabetes	13						1	1	2	4	5
ascular lesions of nervous	202	10				17.74	AUTH	100		100	
system	393				1		1	4	33	82	272
oronary disease, angina	597						4	26	88	178	301
ypertension with heart							1		300	0000	100000
disease	36								4	7	25
ther heart disease	289				1			8	13	41	226
ther circulatory disease	98					2		4	12	19	61
nfluenza	2									1	1
neumonia	146	4	1	2				5	10	26	98
ronchitis	82							1	15	22	44
ther diseases of respiratory									325		
system	15			1		1	1			3	9
lcer of stomach and			9			1					
duodenum	19						1	1	1	6	10
astritis, enteritis and	MAR &						1			- 0	
diarrhoea	11				1		1	1	1	3	4
ephritis and nephrosis	15						1		1	4	9
yperplasia of prostate	10									2	8
regnancy, childbirth, abor-	1000	3 3					40		100		
	1						1				
ongenital malformations	15	9	1	1	1	4		1000		2	1
ther defined and ill-defined	No.	1 37					100 Jan	200		-	1
diseases	175	20	1		3	1	5	7	23	33	82
lotor vehicle accidents	27			2	6	3	2	2	3	1	8
Il other accidents	52	6			0	1	2 2 7	1	9	9	24
uicide	39		88			4	7	6	10	6	6
omicide and operations of						7	1	0	10	0	0
war											
			**	* *	4.2						
								1000			

Proportion of Deaths from Principal Causes, 1965

TOTAL DEATHS 2.529



DEATHS FROM PRINCIPAL CAUSES, 1965

Deaths during 1965 totalled 2,529, an increase of 91 on the number recorded in 1964, and it is significant that practically the whole of this increase (1,361 compared with 1,271) was associated with people over 75 years of age. Nearly 54 per cent of all deaths were in people over 75 years of age and over 78 per cent in people in age groups over 65 years.

Degenerative diseases of the heart and arteries were responsible for 1,413 deaths, and there was a significant increase in deaths from those vascular lesions of the central nervous system giving rise to "strokes" (393 compared with 309). Deaths from diseases of the coronary arteries also rose from 566 to 597.

On the other hand, there was a slight reduction in the total cancer deaths from 496 to 482, and in deaths from respiratory disease from 290 to 243.

Malignant disease of the lung and bronchus has now become easily the most common type of cancer to be specifically recorded in these Annual Reports, and was responsible for 104 deaths in 1965 compared with 103 deaths in 1964, over 21 per cent of the total deaths from cancer. The increase in this type of cancer during the last two decades, and its association with cigarette smoking are well known, but there seems to be little evidence of any general desire on the part of the majority of cigarette smokers to rid themselves of this dangerous habit.

Malignant neoplasms of the stomach were responsible for 37 deaths in 1965 compared with 70 deaths in 1964, but cancers of the breast and uterus both showed an increase, from 46 and 19 to 60 and 23 respectively. Both these latter malignancies are responsible for far too many deaths, for these conditions occur in parts of the body where examination is comparatively easy and where the results of early diagnosis and treatment are extremely good.

Deaths from "violence" decreased slightly as is shown in the accompanying table, and a reference to the detailed Causes of

Death on page 15 reveals how many fatal accidents and suicides occur in the older age groups. These are problems of the greatest importance but it is difficult to come to grips with them when health visitors and social workers are in such short supply.

Motor vehicle accidents All other accidents Suicide	::	1964 20 64 35	1965 27 52 39
		120	118

Notifiable Infectious Diseases, 1965

The Borough was free from serious infectious disease during 1965, and there were no cases of enteric fever, poliomyelitis or diphtheria.

An epidemic of measles among pre-school and school children caused 1,861 cases, and while the majority of cases were not severe, there was one death in a spastic child of five years of age.

There were 21 notifications of food poisoning compared with three in 1964, and these involved three outbreaks. A small family outbreak due to staphylococcus aureus was caused by the faulty storage of meat, while two outbreaks were due to Cl. welchii, the one involving reheated meat in a private school, the other due to the use of stockpot gravy in an hotel acting as a convalescent home.

Forty-three cases of scabies were notified, a much larger number than had been reported for many years past, and all occurred in children and young people.

CASES OF INFECTIOUS DISEASE WHICH OCCURRED
DURING 1965

Dek	ING	1903					-			
described Animals College	Number of Cases Notified									
		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 Erysipelas Meningococcal Infection Food Poisoning Puerperal Pyrexia Ophthalmia Neonatorum Scabies	22 13 ——————————————————————————————————	34	845 	14 8 - 958 - 3 2 - - - 1	2 - - 14 - - - - 6 1 - 15	1 - 10 - 2 - 1 - 9 - 10				
Malaria Acute Encephalitis	1	_	1	=	=	=	=	=		

Tuberculosis in Bournemouth

During the year thirty-four new cases of pulmonary tuberculosis and seven cases of non-pulmonary tuberculosis were discovered and notified in the Borough. These are the lowest figures yet recorded, as was the death rate from this disease, and the accompanying table shows how dramatically the prognosis of tuberculous infection has improved during the post-war period.

The general arrangements for the diagnosis, treatment and follow-up of cases of tuberculosis have been centralised in the Royal National Hospital, and full co-operation exists between the Chest Clinic and the Public Health Department, two health visitors being seconded for full-time duty at the Clinic until 30th November, when one retired.

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

		New	cases Non-	Dea	ths 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
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	1
1959	 	81	4	7	3
1960		66	9	5	1
1961		37	5	6	1
1962	 	50	4	7	2
1963	 	37	10	5	1
1964		40	5	12	2
1965	 	34	7	3	-

Notifications of pulmonary tuberculosis were 25 in males and 9 in females.

Cases	of non-pulmon	ary to	ubercu	ulosis	occur	red	as	follows :-
	Genito-urinary	system					4	
	Glands						3	

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

					Fo	rma	l No	otific	atio	ns				
		Nui	mbe	r of	Prir	nary of T	No	tific	atio	ns o	f ne	w ca	ses	
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	45 to 55	55 to 65	65 to 75	75 and up- wards	Total (all ages)
Respiratory — Males Females Non-	1-1		- 2	11	-	2 -	1 1	3 4	1 2	6 -	9 -	2 -	1 -	25 9
Respiratory — Males Females		-	-	1 1	-	1 1	1.1	2 3		- 1	1 1	1 -	avail all	3 4

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

Disposition and		New	Cases		STATE OF	Dea	ths	
	Respi	ratory		on- ratory	Respiratory		No Respir	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year 1–5 years 5–15 ,, 15–25 ,, 25–45 ,, 45–65 ,, 65–75 ,, 75 and upwards							11111111	
Totals	25	9	3	4	2	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, 1965

During the year we have continued to provide a service throughout the large area of Hampshire, Dorset and Wiltshire served by our two units. Due to commitments elsewhere fewer surveys than usual have been carried out within the Borough and the total number attending for examination has been 7,844, a drop of some 3,000 compared to the previous year. In addition we provide a useful facility to your authority as over 600 staff or prospective employees have attended as part of their general medical examination.

From the total number attending 24 patients were referred to their doctor or chest clinic and 7 active cases of pulmonary tuberculosis were noted. The numbers attending are too small for statistical analysis but in general the incidence of the disease continues to decline.

In the coming year the fluoroscopy sessions carried out by the Bournemouth Chest Clinic throughout the town are to be discontinued and will be replaced by our general practitioner referral unit. Seven sites throughout the town have been arranged and routine weekly visits will be made.

Maternity and Child Welfare

At the end of 1965 there were 15 Infant Welfare Centres in the Borough providing 23 infant welfare sessions weekly.

Nine of the centres were in Corporation ownership and were used for a variety of purposes in addition to infant welfare sessions, including mothercraft and relaxation classes for expectant mothers, and speech therapy, chiropody and for health education purposes. In addition four of the Corporation owned clinics had dental units attached to them, where dental services for expectant mothers and pre-school children were available.

It seems clear that future policy should be directed towards the replacement of unsatisfactory rented premises by purpose-built premises serving a wide variety of purposes, giving full-time use to all, or at least a major part of the accommodation available. General practitioner attachment is an obvious consideration in newly built premises, although in a built-up area general practitioners are frequently well established in their own premises and hesitate to make a change. A day nursery unit or a dental unit should cer ainly be considered in new developments, as in the Kinson area, where new clinics at Pelhams and Bear Cross have been in the capital estimates for some time, but have been deferred for lack of a suitable site.

Infant welfare attendances in 1965 totalled 54,999 compared with 53,596 in 1964, more than half the attendances being in infants. All clinics were supervised by a medical officer, one or two health visitors, and a number of voluntary helpers, who continue to give excellent service.

ATTENDANCES AT INFANT WELFARE CENTRES, 1965

Clinic	Infants under 1 year	Pre- school Children	Total	Sessional Average
Avebury	1758	1090	2848	55
Bear Cross	879	922	1801	51
Boscombe	1906	1035	2941	58
Castle Lane	763	939	1702	35
Charminster	1919	1056	2975	57
East Howe (p.m.)	1590	2298	3888	75
East Howe (a.m.)	921	1205	2126	41
East Way	1433	912	2345	46
Iford	1302	1333	2635	51
Malmesbury Park	1359	1078	2437	47
Pelhams (a.m.)	1028	1005	2033	39
Pelhams (p.m.)	1498	1360	2858	55
Pokesdown (a.m.)	1110	502	1612	32
Pokesdown (p.m.)	1478	655	2133	42
Strouden	638	1120	1758	34
Tuckton	1236	1172	2408	50
West Cliff	1468	746	2214	46
West Howe (a.m.)	811	1158	1969	39
West Howe (p.m.)	1267	1629	2896	56
Winton (Mon. p.m.)	1356	1287	2643	55
Winton (Wed. a.m.)	1265	896	2161	42
Winton (Fri. a.m.)	1105	953	2058	40
Winton (Fri. p.m.)	1454	1104	2558	50
	29544	25455	54999	48

Ultra Violet Light Clinics

A small number of children, 6 in all, made 86 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, and the demand has increased slightly over the previous year but still 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.

	1959	1960	1961	1962	1963	1964	1965
National Dried Milk (tins)	24,073	20,584	15,801	13,789	11,475	9,865	10,476
Cod Liver Oil (bottles)	7,174	7,312	5,086	2,478	2,256	2,056	2,177
Vitamin A and D Tablets (packets) Orange Juice (bottles)	6,447 57,763	7,270 55,599			3,168 26,037		

Antenatal Clinics

The local authority does not now conduct any antenatal clinics, all antenatal supervision being in the hands of general practitioners, hospital maternity units and midwives.

BIRTHS OCCURRING IN BOURNEMOUTH, 1965

	19	959	19	60	19	61	19	62	19	63	19	64	19	65
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Domic- iliary Births	559	27.6	616	29.3	601	28.3	499	20-9	365	14	348	12.1	290	10-1
Institu- tional Births	1464	72-4	1484	70-7	1525	71.7	1894	79-1	2247	86	2523	87-9	2576	89.9
Totals	2023	100	2100	100	2126	100	2393	100	2612	100	2871	100	2866	100

During 1965 the following births were notified as occurring in the Borough:

Domiciliary b ths 290 (3 Institutional births 2576 (25		435	(1152) (424) (813) (55) (79)
	HUMBERS OF LOW-ING A BOOKENESS	2576	(2523)

Total 2866 (2871)

Figures in brackets indicate corresponding numbers for 1964.

This total is therefore 5 less than in 1964, there having been an increase of 53 in the number of institutional births and a decrease of 58 in the number of domiciliary births.

In addition 27 Bournemouth patients were delivered in the Hospital Management Committee's Maternity Home at Barton-on-Sea and 91 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

Sixteen premises were registered under the Act, compared with fifteen in 1964, providing accommodation for 195 children (165 in 1964). None of these premises was registered for the reception of children below the age of two years.

As far as possible the standard of accommodation and the absence of fire risk are similar to those obtaining in the Corporation Day Nursery, but as private daily minding accommodation is invariably situated in improvised premises, it is difficult to insist on the very highest standards. Following registration, private day nurseries are regularly supervised by the health visitors, and any variation in the conditions of registration must be authorised by the Health Committee.

Address	No. of children accepted	Hours of opening
40 Surrey Road	12	9.30 a.m. to 12.30 p.m.
"Clynch", 81 Glenferness Avenue	14	9.30 a.m. to 12.30 p.m., excepting school holidays
172 Seafield Road	4	9.0 a.m. to 4.0 p.m.
2 Snowdon Road	21	8.30 a.m. to 5.30 p.m.
195 Pine Road	6	9.30 a.m. to 12.30 p.m.
8 Warren Edge Road	12	9.15 a.m. to 12.15 p.m.
22 Rosemount Road	10	9.30 a.m. to 12.30 p.m.
42 Grosvenor Road	6	8.0 a.m. to 4.0 p.m.
28 St. Alban's Crescent	10	8.30 a.m. to 5.0 p.m.
149 Parkwood Road	8	8.30 a.m. to 4.30 p.m.
23 Bryanstone Road	25	8.30 a.m. to 4.30 p.m.
Methodist Church Hall, Heron Court Road	14	9.0 a.m. to 12.00 noon
90 Stewart Road	8	8.30 a.m. to 4.30 p.m.
6 Beaufort Road	5	8.30 a.m. to 4.30 p.m.
Sutton Road Congrega- tional Church Hall	20	9.0 a.m. to 12.00 noon
St. Peter's Church Hall	20	9.30 a.m. to 5.0 p.m. on Fridays only

Family Planning

The Family Planning Association held three clinic sessions a week at Gloucester Road Hospital, 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. Thirteen local girls were admitted to the Free Church Council Home at 11 St. Alban's Avenue compared with eight in 1964. Five local girls were admitted to St. Thomas' Lodge as maternity cases and two as "shelter" cases.

In addition, four Bournemouth girls were provided with accommodation outside the Borough at the expense of the local authority, compared with five in 1964.

Day Nursery

The Corporation Day Nursery at 10 Wellington Road had an average daily attendance of 29 babies and young children, compared with 31 in 1964, and admissions continued to be restricted to "priority" groups.

From time to time admissions had to be restricted owing to the development coutbreaks of minor infectious disease and temporary staff absences, and a fairly substantial waiting list has been an unfortunate feature throughout the year.

Substantial alterations and improvements to the premises have been authorised which would allow for the training of nursery nurse students, but the resumption of training after a long interval of years would require the provision of a training course by the Municipal College and probably extended practical facilities in day and residential nurseries and in school nursery classes.

Regular medical and dental supervision of the children has continued as before and the staff are to be congratulated on the results achieved.

Dental Treatment for Mothers and Young Children, 1965

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

Despite an acute shortage of staff during the greater part of the year, the dental care of mothers and pre-school children was maintained at the same level as the previous year.

Visits were made to all Infant Welfare Clinics in the Borough at regular intervals during the year, when all children attending on that particular day were dentally inspected and advice on diet and dental care given to each mother. Children at the Day Nursery and Residential Nursery were also inspected. In this way a total of 535 children were seen during the year, but with an annual birth rate of nearly 2,000 in Bournemouth this is only about 5 per cent of the pre-school population in the town. Of course, quite a number of children are taken to see a dentist before their schooldays begin but the neglected state of some of our five year old school entrants shows an urgent need to contact the pre-school group, particularly those from three years of age upwards. It is hoped eventually to reach this age group, perhaps through a third birthday card, informing the mothers of the importance of dental inspections at this age.

A general anaesthetic was administered to 35 pre-school children for an average of two extractions per child. This is a sad reflection on our present day diet and particularly of the widespread use and abuse of vitamin syrups. These syrups do have a part to play in the diet of a baby but once the child is on to a mixed diet they become superfluous. The syrups, however, are so palatable that mothers tend to give them to toddlers and young children far in excess of their daily requirements and often in an undiluted state. This is undoubtedly the cause of early caries together with the iniquitous habit of putting a small child to bed with a bottle of sweetened milk.

The number of expectant and nursing mothers treated nowadays is small, because, in the main, they are catered for under the Nationall Health Service. Nevertheless, all those who requested treatments were seen and made dentally fit.

Expectant mothers attending ante-natal, relaxation and mothercraft classes were told of the great importance of good dental care; both for themselves and for their babies, and films were shown to them stressing the need for a well-balanced diet and the dangers of too many sweets and carbohydrates.

I am grateful to the Health Visiting staff for their help and co-operation in all aspects of Dental Health Education. Invaluable help in this field was given by the new Health Education Officer who joined the staff in November, and it is hoped that the Dental Service will continue to benefit from his enthusiasm and expert guidance.

	Examined	Needing treatment	Treated
Expectant and Nursing Mothers	27	28	12
Children under five	585	173	109

Maternity and Child Welfare

Made Dentally Fit

12

601

	Extractions	Anaes	Anaesthetics	Fillings	Scalings or Scaling	Silver	Dadio	Den	Dentures
		Local	Local General	9	and gum treatment	treatment	graphs	Com- plete	Com- plete
sectant and	12	-	6	50	3	Z	4	5	7
ldren er five	74	3	35	193	2	43	4	Z	Ī

TABLE SHOWING DENTAL CONDITION OF CHILDREN AT THE DAY NURSERY—Year 1965

Total D.F.M.	132	15
Missing Teeth	1+2	1/2
Filled		2
Decayed	120	11
Caries Free Teeth	106 178 87	371
Number Needing Treatment	-21	3
Number Examined	969	20
Age	264	Totals

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, but this decline in the number of confinements attended by the midwives in the patient's home has been largely offset by their attendance as maternity nurses on large numbers of early discharges from the maternity units of the local hospitals. Domiciliary midwives have also taken the cervical smears from patients attending the local authority's Cytology Clinic since August, 1965.

Domiciliary services for the elderly and chronic sick, which involve health visitors, home nurses and home helps in particular, have been required on an increasing scale, and recruitment has been unable to keep pace either with the demands on these services or with the ncreased establishment authorised by the Council under the Ten Year Plan. Additional demands have inevitably required a pruning of services given to individuals, to a reorganisation of districts served by home helps so that their travelling time is minimal and their working time is as great as possible, and these changes have undoubtedly led to hardship and sadness which is sincerely regretted. A great deal of distress exists among the Borough's elderly residents which even if known is beyond the capacity of a small force of professional workers to alleviate, and more voluntary help is needed if the position is not to deteriorate still further.

Domiciliary Midwifery Service

Seven full-time midwives were directly employed by the Council and attended 281 confinements compared with 347 confinements in 1964.

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 881 admissions were made to the Firs

Maternity Home compared with 813 in 1964 and the confinements in all general practitioner maternity homes increased from 1,237 to 1,316.

Domiciliary births now only represent 10 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, 329 early discharges were taken over by the domiciliary midwives, and their nursing continued until the four-teenth day following confinement.

Since September, 1964 we have assisted in the training of Part II C.M.B. students by offering domiciliary training with our midwives for two students from the Training School at Poole General Hospital.

Details of domiciliary confinements attended were :-

Total No. of confine- ments	Primi- para	Multi- para	No. of Previous Pregnancies											
			1	2	3	4	5	6	7	8	9	10		V
281	26	255	90	84	44	18	11	4	-	3	1	-		

AGE GROUPS										
15-20	20-25	25-30	30-35	35-40	40-45					
31	80	95	54	16	5					

Gas and air analgesia was given in 234 cases and pethidine in 178 cases.

MATERNITY CASES ATTENDED

	Number of Deliveries attended by Midwives in the area during 1964						
	Dor	Casas					
	Dr. not Booked	Dr. Booked	Totals	Cases ir Institu- tions			
(i) Midwives employed by the Authority (ii) Midwives employed by Voluntary Organisations:— (a) Under arrangements with the L.H.A. in pursuance of Section 23 of the National Health Service Act	3	278	281				
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) (iii) Midwives employed by Hospital Management Committees or B ards of Gover-	TE PLONE ENDITION OF	u dranci oskidaris sovii za nole zpol		47			
nors under the National Health Service Act	po To	75217011	lemma lemma	2452			
in Nursing Homes)		2	2	41			
Totals	3	280	283	2540			

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 pat	the Med	dical th	Practition maternity	ner had arranged medical services			under the		31
	(ii)										
Total					(o/					_	
(b)	For	cases in	Instituti	ions				1.			8

Health Visiting

At the end of 1965 the health visiting establishment consisted of a Superintendent and 28 health visitors, but there were eight vacancies if the establishment was to be brought to the level of the Ten Year Plan. This is a serious deficiency and makes it almost impossible to realise the intentions of the Council for the development of their personal services as expressed in the plan. Furthermore, the establishment of closer relationships with the general medical practitioner service, by the attachment of health visitors to groups of practitioners, has been still further deferred, although some progress in this direction and some very useful pilot studies will be achieved in 1966.

Although the close relationship with the Chest Clinic that has always existed has been maintained, it has been possible to reduce the number of health visitors attached to the Chest Clinic from two to one, and while the number of full-time geriatric visitors was maintained at two, the increasing number of visits required by old people living alone and by sick persons requiring admission to geriatric hospitals made the appointment of a third geriatric visitor a priority.

The national shortage of health visitors has made their appointment extremely difficult, and it has also proved difficult to find suitable students for secondment to the Health Visitor Training; Course at Southampton University. The local authority, as a sponsoring authority, has the option on three vacancies annually, but it is seldom that all places can be filled, although this was possible for the 1965/66 course. As is well known, health visitor students are already trained nurses possessing at least Part I off their Midwifery Certificate, or the Obstetric Certificate, and the national shortage of health visitors is fundamentally a shortage of trained nurses required by the constantly expanding hospitall and local authority services, industry, and aggravated by an understandably high marriage rate.

During the year 23,776 interviews and visits were undertaken compared with 28,091 in the previous year.

Liaison Arrangements

Liaison arrangements between the local health authority and the hospitals of the Bournemouth and East Dorset Hospitall 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, 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.

As soon as more health visitors are available, it is proposed to extend general practitioner attachments in suitable group practices.

Infant Welfare Clinics

Two health visitors attended the majority of the 23 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 of cers, often retired from the public health service, are called upon in emergency.

Total attendances were 54,999 in 1965 compared with 53,596 the previous year.

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 387 mothers.

Relaxation Classes

Classes for expectant mothers were held at Avebury, Pelhams, East Howe, Pokesdown and East Way. There were, in all, 66 courses of 10 lecture/demonstrations each, attended by 634 mothers.

Fathercraft Classes

Nine classes for fathers, chiefly those embarking on parenthood for the first time, were held at Avebury, at which 67 fathers attended.

Visits to the Elderly and Aged

During 1965 a total of 2,975 elderly and aged persons received 4,876 visits, and 468 of these were visited at the request of the Hospital Management Committee regarding their application to be admitted to a chronic sick bed.

Many of these old people were living under very poor conditions, in lodgings, and require far more frequent visiting if their physical and mental deterioration is to be alleviated.

Many organisations, both statutory and voluntary, are doing their utmost to improve the conditions under which many of these old people live, but where the numbers are so large only a very substantial increase in visitors will make an appreciable impact on the problem.

Special Services for Elderly and Handicapped Persons

(a) Laundry Service. The laundry service provided drawsheets, mackintosh sheets, air rings and covers to 128 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.

The number of cases assisted was nearly double that of 1964.

(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 1965 an average of four sessions per week were held. The demand is now such that a full-time chiropodist has been appointed and will commence his duties on 1st January, 1966.

CHIROPODY CLINIC 1965

	of sessions of persons				o Feel	225 700
	of treatmen			agricio Imigr	n 01.	2,018
						ean ithmesimour
						Total number of treatments given
Number	of persons	receiving	1	treatment	152	152
- 21270	,,	,,		treatments	192	384
	,,	11	3	treatments	194	582
	,,	,,	4	treatments	78	312
	,,	**	5	treatments	41	205
	,,	,,	6	treatments	18	108
	,,	**	7	treatments	10	70
	,,	33	8	treatments	4	32
	**	,,	9	treatments	1	9
	"	,,	10	treatments	1	10
	,,	,,	11	treatments	2	22
	"	,,	13	treatments	1	13
	,,	,,	14	treatments	2	28
	",	,,	16	treatments	1	16
	,,	,,	20	treatments	1	20
		,,	22	treatments	1	22
	"	,,		treatments	1	33
					700	2,018

(c) 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.

(d) Health Education

Health education continued during 1965 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, parent/teacher meetings, and other voluntary meetings.

A full-time Health Education Officer was appointed and commenced his duties on 1st November, and the intention is to correlate all aspects of health education within the Department.

to build up the material resources of the Department, to link up with other similar organisations both local and national, and as soon as possible to mount campaigns, for dental health education, propaganda against smoking, and for the older people, preparation for retirement.

These projects have been discussed with, and approved by the Ministries concerned.

HEALTH VISITING

, Ineffective		I	1	1	1	I	3,986	4,532	4,488	4,106	3,590	4,701	4,701	6,072	5,981	5,874
Visits by	culosis		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	1,758
Visits to TB house-	in "Other Cases"	1	ı	223	190	207	279	230	221	184	124	119	179	84	40	20
Other Cases	Total Visits	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	5,424
Children between the	Total Visits	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	9,314
Children under I year of age	Visits Total	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	7,688
Childre I year	Vi	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	2,014
Expectant Mothers	Visits Total	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	1,350
Expe	Vi: First	608	828	806	1,100	1,047	1,117	1,162	1,156	1,130	1,114	1,260	1,132	1,131	1,156	936
	Year	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965

THE HOME NURSING SERVICE

The Home Nursing Service, consisting of a Superintendent, a Senior Nurse, 25 full-time and two half-time nurses, made 76,399 visits during 1965, compared with 78,386 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 1965 shows increases in cases of heart and circulatory conditions but reductions in diseases of the respiratory system and the nervous system.

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 1965

In all, 3,391 patients were served during the year, of whom 2,558 were new cases, made up as follows:—

Complaint				N	o. of Cases
Tuberculosis				 	29
Respiratory system (o	ther t	han T.B	.)	 	147
Heart and Circulatory	syste	em		 	606
Digestive system				 	348
Reproductive system				 	58
Nervous system				 	149
Urinary system				 	84
Cancer				 	254
Diabetes				 	70
Injuries, burns, etc.				 	93
Senility	**			 	157
				 	114
Leg Ulcers and Skin c				 	173
Ear, Nose and Throat				 	38
Preparation for hospit		eatment		 	211
Miscellaneous condition	ons			 	27
					2,558

The age distribution of all patients treated in 1965 was:

			Patients nursed	THE CONTRACT	The Challing
	Linus !	Male	Female	Total	Percentage
0- 4 years		13	3	16	0.47
5-14 years		8	9	17	0.50
15-24 years		28	44	72	2.13
25-44 years		60	138	198	5.84
15-64 years		231	492	723	21.32
55-74 years		304	593	897	26.45
75- years	mon.	383	1085	1468	43-29
	experie	1027	2364	3391	100-00

Sources of referral of new cases in 1965 were:

General Practitioners					 1,767
Hospitals				74.4	 584
Personal application					 166
Voluntary agencies					 4
Health Department as	nd Cl	nest Cli	nic		 37
					2,558

During the year, 2,498 cases were removed from the register owing to:

Admission to hospital	 	 	523
Died	 	 	289
Satisfactory outcome of case	 	 	1,686
			2,498

The Nursing of Sick Children

Just less than one per cent. of patients nursed during 1965 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 175 occasions, and 1,811 visits were made to visitors in hotels, boarding houses and private holiday accommodation.

Injection Therapy

During the year, 29,143 injections were given to 1,300 patients, of which 6,742 were insulin injections.

Daily injections were necessary for 251 patients, and 109 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 290 in 1964 to 229 in 1965, and were carried out by the home nurse on whose district the request arose.

At the end of the year 893 cases remained under treatment, receiving visits as follows:

Twice Daily	Daily	Alternate days	Twice weekly	Thrice Weekly	Weekly	Fort- nightly	Monthly
13	95	24	125	54	316	155	111

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

	1958	1959	1960	1961	1962	1963	1964	1965
Number of patients on the Register, 1st Jan. Number of new patients	777	761	679	756	766	789	844	833
attended	3054	2763	2724	2658	2547	2655	2634	2558
Total number of	-						-	
patients attended	3831	3524	3403	3414	3313	3444	3478	3391
Number remaining on the Register on 31st								
December	761	679	756	766	789	844	833	893
Number of Patients		1						
taken off the Register	3070	2845	2647	2648	2524	2600	2645	2498
Total number of nursing visits	30,239	76,086	76,031	78,713	75,541	75,730	78,386	76,399

The illnesses of patients were classified as follows:

	1958	1959	1960	1961	1962	1963	1964	1965
Tuberculosis	 139	107	93	86	62	61	42	30
Pneumonia	 58	47	38	42	43	58	42	34
Miscarriages, etc.	 26	18	24	16	36	39	41	19
Surgical	447	437	394	494	429	395	452	370
Medical	 3136	2892	2830	2748	2705	2855	2847	2889
Infectious diseases	 25	23	24	28	38	36	54	49
	3831	3524	3403	3414	3313	3444	3478	3391

DOMESTIC HELP SERVICE

At the end of the year the Domestic Help Service consisted of an Organiser, an Assistant Organiser, and 118 part-time domestic helps, serving 1,556 cases and working nearly 119,000 hours.

A glance at the summary below shows how much this has become a service devoted to the elderly and aged, for nearly 84 per cent of the total hours worked were on behalf of those of 65 years or over, and if chronic illness in late middle age is included practically the whole of the personnel were employed on long-term cases, frequently requiring attendance throughout the year.

In previous Reports attention has been drawn to the difficulty of extending this valuable service beyond a certain point, and in fact both the number of domestic helps and the hours worked in 1965 were slightly less than in the previous year. The amount of help given to individual cases had also to be curtailed, and if in fact a point has be n reached where the total help available has reached its limit, he ever-increasing numbers seeking it must inevitably receive a reduction in help.

Reorganisation which involves human factors and may affect human happiness always tends to be unpopular, but there appears to be no alternative if a static work force has to shoulder an increasing case load.

SUMMARY OF CASES HELPED

Type of Case	Number	Hours spent	Percentage of Total Hours	Average hours per case	
Old age	1,282	98,998	83-2	77-2	
Illness	154	13,566	11.4	88-1	
Tuberculosis	16	885	0.7	55.3	
Confinements	28	1,952	1.7	69.7	
Mental Deficiency	25	1,973	1.7	78.9	
Maternity and Child Welfare	50	1,442	1.2	28.8	
Problem Families	1	115	0.1	115.0	
TOTALS	1,556	118,931	100-0	76-4	

Classification of cases served (by ages).

Under 15 years 15-64 years 65 years and over	 	 50 200 1,306	3·2% 12·9% 83·9%
		1,556	100.0%

Ambulance Service

During 1965 the Ambulance Service was maintained by ten stretcher ambulances and four dual-purpose vehicles provided by the local authority, and approximately twenty sitting cars controlled by the Hospital Car Service. Local authority vehicles were available on a complete 24 hours a day cover, but sitting cars were used only for daytime hospital out-patient work.

The table below shows that the total number of patients fell slightly from the peak figure of 1964, but that the local authority carried more patients than in any previous year.

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

		cal ority	St. John Association		Hosp Car S		Total		
rear	Patients	Mileage	Patients	Mileage	Patients	Milage	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	38,387	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		1,430	18,006	72,625	45,686	222,639	
1957	30,736	159,511	427	1,487	17,257	70,866		231,864	
1958	31,037	157,235		1,264	18,441	82,911	50,035	241,410	
1959	35,030	170,938		1,777	19,494	89,526		262,241	
1960	35,275	171,315		13,295	20,385	96,220		280,830	
1961	36,196	173,192		15,856	21,686	109,518		298,566	
1962	35,912	176,452		15,798	20,589	112,442		304,692	
1963	36,266	169,053		9,917	18,902	102,075		281,045	
1964	42,750	183,068			22,077	120,188		303,256	
1965	43,765	183,547	-	-	17,317	95,218	61,082	278,765	

The reduction in the average miles per patient carried, which is shown in the following table, is in part consequential upon the increase in patients, as routes tend to remain the same, while pick-up points increase. It should not be forgotten, however, how much radio control has aided this process and how essential is the careful compilation of journey sheets to the efficient working of the organisation.

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		
1965	4.19		5.50	4.56		

During the year, in September, it was reported to the Health Committee that certain of the mobile radio receivers were giving rise to concern owing to their falling output, causing not only breaks in transmission and reception but also an increase in the numbers of "blind spots" normally found in certain areas of the Borough. The Health Committee decided to replace the whole radio equipment by supplementary estimate and all ambulance vehicles are now equipped with long-range mobile receivers/transmitters.

During the year all ambulances were also equipped with "Ambu" resuscitators and suction apparatus.

THE WORK DONE BY THE SERVICE DURING 1965 IS SHOWN IN THE FOLLOWING TABLE

	Vahiolog	Patient	Patients Carried	Carried	Abortive	Total	Tran	Transport	No. of
Service	(Number at 31.12.65)	Journeys	Accident or Emergency	Other	Service Journeys	Milicages	No.	Rail Miles	31.12.65
Directly provided	Ambulances (10)	5,966	2,666	27,552	351	130,203	78	11,301	-
	Dual purpose (4)	1,941	142	13,405	157	53,344	174	21,465	} 33
Hospital Car Service		5,204		17,317	09	95,218	- 1	1	1
		13,111	2,808	58,274	568	278.765	252	32,766	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

1,308 children under the age of 16 years received protection against smallpox, 690 by general practitioners and 618 in the local authority clinics. The total included 869 infants under the age of two years.

Immunisation against Diphtheria

A total of 4,896 children received protection against diphtheria, either as a single antigen or combined with other antigens. 1,668 were protected by general practitioners and 3,228 at local authority centres.

Details follow:

		Chil	dren bo	orn in 3	ears		
	1965	1964	1963	1962	1958/ 61	1950/ 57	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, 1965.	856	807	36	14	32	6	1751
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, 1965.		322	530	103	972	1218	3145

Vaccination against Poliomyelitis

During 1965, 1,989 persons completed a course of vaccination and 1,533 persons received booster doses. Of these 1,380 were protected by general practitioners and 2,142 at local authority centres.

Details follow:

	101		Chil	dren bo	orn in 3	ears		Tays
		1965	1964	1963	1962	1958/ 61	1950/ 57	Total
Primary Vaccination		410	1216	145	67	102	49	1989
Booster Doses		_	47	74	41	1276	95	1533

VACCINATION AND IMMUNISATION OF CHILDREN

The following table from the Ministry of Health shows the percentages vaccinated in Bournemouth compared with the equivalent national figures:

	Chil	ldren born in 1	964	Cuallnas
	Whooping Cough	Diphtheria	Polio- myelitis	Smallpox (children under 2)*
England and Wales	70%	71%	65%	33%
Bournemouth	82%	82%	81%	44%

^{*} Includes only children who were vaccinated during 1965 and were under 2 years old at the time, and is calculated as a percentage of children born during 1964. This is considered to give a reasonable estimate of the proportion of young children being vaccinated against smallpox.

Prevention of Illness-Care and After-Care

Arrangements in force during the year included

(1) Tuberculosis

- (a) The seconding of a health visitor 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 11 cases were rehoused.
 - (e) Provision of nursing requisites.
- (f) Provision of domestic help, 16 patients receiving 885 hours service.
- (g) A grant to the Bournemouth Voluntary Tuberculosis Care Committee in respect i 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, 38 cases receiving 582 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 17 persons received recuperative holidays compared with 34 in 1964. 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. 450 issues were made during the year, those in most frequent demand being mackintosh sheets (64), bed pans (70), commodes (108), wheel chairs (58), urinals (41), bed rings (45).

(4) Cervical Cytology Clinic

A special clinic for taking cervical smears to be examined for evidence of cancer of the cervix uteri was opened at Avebury, 10 Madeira Road, in August 1965, all local doctors being informed of the facility and patients being interviewed by appointment. The scheme, which received the approval of the Ministry of Health, involved the taking of smears by domiciliary midwives employed by the Corporation.

The numbers examined were relatively small until the close of the year, but it is pleasant to record the help given to the enterprise by the hospital pathological services.

Mental Health Service

Since October 1963, Bournemouth patients requiring hospitalisation 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 out-patient 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, 1965

Admissions to mental hospitals arranged by mental welfare officers of the Department were 415 compared with 420 in 1964.

Reference to the Table of Admissions to Mental Hospitals during the last ten years shows how curiously consistent have been the total admissions each year since 1962, and how successful have been the efforts to reduce emergency admissions to hospital under Section 29 of the Mental Health Act, 1959.

ADMISSIONS TO MENTAL HOSPITALS DURING LAST 10 YEARS

Year	N.D.	V.	T.	Section 11	Section 14 etc.	Section 20	Total
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	- T		— Mental	10 Health	196 Act	331*
	Inf.	THE REAL PROPERTY.	Sect. 60	Sect. 29	Sect. 26	Sect. 25	>393
1960 1.11.60— 31.12.60	28	Beauti	a lata	6	4	24	62*
1961	146	- ALAH	1	111	17	175	450
1962	169		4	93	4	155	425
1963	169		4	105	15	125	418
1964	225	Boots.	3	41	12	139	420
1965	245		4	50	9	107	415

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

ALL PATIENTS ADMITTED TO HOSPITAL DURING 1965 Under Mental Health Act

	Males Females										
Age Group	Inf.	Sect. 26	Sect. 25	Sect. 29	Sect. 60	Inf.	Sect. 26	Sect. 25	Sect. 29	Sect. 60	Total
10-20	2	-	3	-	-	3	-	_	3	-	11
20-30	7	2	9	3	3	19	_	4	5	-	52
30-40	11	1	7	4	_	14	1	8	2	-	48
40-50	21	_	6	9	_	29	2	13	7	-	87
50-60	13	-	3	1	1	23	1	13	3	-	58
60-70	14	_	6	5	_	16	1	10	-	-	52
70-80	8	1	4	1	_	22	_	11	_	-	47
80+	14	-	3	2	-	29	_	7	5	-	60
	90	4	41	25	4	155	5	66	25	-	415

Readmissions to Mental Hospitals

A large number of patients who are discharged from mental hospitals require long-term supportive treatment from their own doctor and the psychiatrist at the out-patient clinic, together with regular medication, and their wellbeing also depends in no small degree on the help given to them by the social worker employed by the Health Department.

Relapses requiring readmission to hospital unfortunately occur in spite of every precaution, but the possibility of relapse is greatly minimised by efficient and adequate after-care. The shortage of trained social workers, or of people suitable for training in this very important type of social service has proved a great obstacle to the build-up of a really adequate mental after-care service in the Bournemouth area.

In spite of this shortage of social workers, the percentage of relapses requiring readmission to hospital declined from 41.7 per cent in 1964 to 36.1 per cent in 1965.

READMISSIONS 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		160	,,	35.6%
1962	,,	425	,,	146	,,	34.4%
1963	,,	418	**	158	,,	37.8%
1964	,,	420	,,	175	**	41.7%
1965	,,	415	,,	150	,,	36.1%

Mental Welfare Officers

There were two full-time and two part-time mental welfare officers maintaining a 24 hours 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.

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 and Family 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

Two mental hostels, "Wallfield" and "Beaufort House", providing between them about 28 places for female patients, were open throughout the year, and for most of the period were filled to capacity. The enormous practical difficulties of staffing these homes were described in the Annual Report for 1964, and although the staffing position improved it remained precarious and there were periods when both hostels were short of staff.

In spite of these difficulties, there can be no question of the value of the hostels to the community services provided by the

local authority, giving the patients a period of security and stability during which many of them were able to rehabilitate themselves and return to the community and sometimes to employment.

There was no rigid classification of patients, but "Wallfield" was used as a reception hostel and as a residence for those who had suffered from mental illness, while "Beaufort House" mainly admitted those suffering from subnormality. As before, it was found that a judicious mixing of patients was perfectly acceptable, and as the housemothers at both hostels were experienced mental nurses and there was regular visiting by the Senior Medical Officer for Mental Health and the social workers, no difficulties arose in the management of the hostels.

In all there were 19 admissions to "Beaufort House" with 11 discharges, and 36 admissions to "Wallfield" with 28 discharges, the patients remaining at the end of the year being 13 and 15 respectively.

The following tables summarise the activities of the two mental health hostels during the year and give some interesting information about the type of patients accommodated there.

				"Beaufort House"	"Wallfield"
In residence on 31st December,	, 1964			5	7
In residence on 31st December,	, 1965			13	15
ADMISSIONS DURING 1965	5			19	36
Source of admission					
Hospitals				9	18
Inter-hostel transfer				2 8	1
Private address				8	17
Reason for admission					
Rehabilitation		10400		7	19
Accommodation				7	4
Inadequacy				3	7
Inter-hostel transfer				2	1
Temporary crisis				-	5
Age on admission					
Under 20 years				1	1
20-29 years				î	5
30-39 years			- 100	5	8
40-49 years				6	10
50-59 years				_	
60-69 years				6	5
Over 70 years				_	5 5 2

DISCHARGES DURING	1965	 		11	28
To residental empl				1	5
To private address		nent		3	2
To private address				5	15
Inter-hostel transfe				1	2
Return to hospital				1	3
To Guardianship S	ociety	 111	4.4		1
Length of stay in hoste	el				
Under 1 week		 		2	5
1–4 weeks				3	6
1–3 months		 		2	7
		 		3	4
6-9 months		 		1	6
9–12 months		 			

As has been indicated above, although there was no attempt at rigid classification of patients, "Wallfield" acted as the reception hostel and thereafter tended to retain patients suffering from the sequelae of mental illness, while "Beaufort House" accommodated a larger number of patients suffering from subnormality. This difference in function is reflected in the larger proportion of patients admitted for reasons of rehabilitation to "Wallfield", but both hostels had a very good record of success in this direction, and after a period in the hostel a comparatively large number were able to be discharged to private accommodation.

Mental Subnormality

During the year ten new cases of mental subnormality were reported, nine 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 385 cases of mental subnormality were on the authority's registers, as follows:—

*	In hospitals Attending the Turner Training		and	living at	home	e	 156 96
	Living in local authority hoste	1					 4
	Under Guardianship						 3
	Living at home						 123
	Resident in private homes				* *	**	 3
							385

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

Five persons suffering form mental subnormality were admitted to hospitals. All of these cases were admitted informally.

In addition, 22 persons were admitted to hospital for short periods in order to give their parents a short period of freedom from worry, or a holiday, and two to Wallfield Hostel.

Five deaths were notified among mentally subnormal persons, three in hospital and two at home.

At the end of the year three cases (two female and one child) awaited urgent hospital admission, and there were 13 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 96 persons who were on the register on 31st December.

	Ma	les	Fem	ales	
No. of children in attendance	Under 16	Over 16	Under 16	Over 16	Total
Male Section	_	27	_	_	27
Female and Junior Section	26	_	16	27	69
Totals	26	27	16	27	96

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. Ambulances were 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 if any real progress is to be made it is essential that an Industrial Unit for the older children should be provided without delay.

The efforts of the Health Committee in this direction are well known, and the search for a suitable site has proceeded without success, but the fact remains that this is probably the most urgent mental health problem on the agenda at the present time and the inability to provide suitable classification and training facilities at the Alma Road Centre is rapidly causing complete stagnation.

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, often under great difficulties.

Nursing Homes

At the end of the year 34 nursing homes were registered by the local authority, the same number as in 1964. Accommodation was provided for 479 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	1100	 	584
1943		 	693
1944		 	708
1945		 	742
1946		 	834
1947		 	1026
1948		 	1012
1949		 	1155
1950		 	1306
1951		 	1484
1952		 	1472
1953		 	1681
1954		 	1770
1955		 	1991
1956		 4	2142
1957		 	2207
1958		 	2340
1959		 	2472
1960		 	2609
1961		 	2648
1962		 	2873
1963		 	3171
1964		 	3095
1965		 	3192

An analysis of the statistics for 1965 showed that 44.8 per cent. of applications for cremation came from within the Borough, while 55.2 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 three cases during the year, brief details of which were :

Mr. G. L. aged 81 years. Partially blind and in poor health, and living alone under squalid and grossly insanitary conditions in a single room. Admitted to an old people's home under a Magistrate's Order.

- Mrs. B.B. aged 83 years. In poor health and living alone under insanitary conditions in a single room. A son living in the same premises was unable to help. Admitted to Christchurch Hospital under a Magistrate's Order and subsequently transferred to an old people's home.
- Mrs. S. R. aged 68 years. Living alone under insanitary conditions in a small cottage. In poor health following a brain operation. Admitted to Christchurch Hospital under a Magistrate's Order.

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 (b) Treatment	4	2	-	25
(Medical, Surgical or Optical)	21	12	i-	51
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	12	12	250 m	50

Public Health Laboratory Service REPORT BY Dr. G. J. G. KING, DIRECTOR OF THE BOURNEMOUTH LABORATORY

SPECIMENS RECEIVED FROM BOURNEMOUTH, 1965

SPECIMENS RECEIVE	VED	FROM	BOI	JRNE	MOUTH,	1965
Public Health Departme	ent					
Bloods		al and		23		
Faeces and urine				785		
Nose and throat			1000	4		
Other human .				5		
Food and shellfis				306		
Ice-cream .				431		
Milk				949		
Water				1,142		
Other sanitary				471	The Name of Street	
			-		4,116	
General Practitioners						
Bronchitis				20		
Faeces and urine				533		
Nose and throat				111		
Sputa			944	18		
Other human			f.,	70		
Food and shellfish				4		
The state of the s			_		756	
Bournemouth Chest Clini	ic					
Laryngeal swabs				1,796		
Pleural fluids				1		
Sputa : Direct Culture				58		
Urine				271		
Bronchitis				76		
Bronemers				70	2,233	
Poval National Hamital					2,233	
Royal National Hospital						
Bronchitis		1000		90		
Laryngeal swabs				751		
Pleural fluids				77		
Sputa : Direct Culture				1 096		
Faeces and urine				1,086		
Other human		/		113 46		
Other numan				40	2,192	
D			The said	1	2,192	
Royal Victoria Hospital						
Faeces and urine				196		
Phage typing				464		
Sera				17		
Other human				21		
Laryngeal swabs				3		
Nose and throat				4		
Sputa				3		
			-	-	708	
			Total		10,005	
			Total		10,005	

REPORT BY A. J. MORTIMER METEOROLOGICAL REGISTRAR

1965 Summary

The general impression of a year's weather, particularly that of the summer, is largely given by the weather of July, August and September. As this was below average in many ways, it will come as somewhat of a surprise to learn that 1965 was sunnier than may normally be expected and with rainfall only just above average.

The year opened with a sunny January with normal rainfall, followed by a very dry February which was colder than usual. The opening of March sprang a surprise with a severe wintry spell, two inches of snow, and the lowest air temperature of the year; the closing of March brought a minor heatwave with a 68 degree maximum temperature. The month was sunnier than usual. April only departed from the normal weather conditions in that it was colder than is normal. May weather also gave average figures over the whole month but in fact opened brighter and warmer than usual, and was cold and sunless towards the end.

June, although not lacking in sunshine, was cool, while July was a month of extremely disappointing weather. August and September were unsettled, cool, and sunshine was below normal. For the fourth year in succession October provided good weather with a three weeks spell of summer-like conditions and a maximum temperature of 71 degrees. The month's rainfall, too, just escaped being the lowest on record with a fall of 0.29 inches on the last day. An early and severe winter spell was November's notable contribution, but Bournemouth escaped all snow, and the worst of this weather. December was mild, sunny and wet, and brought to a close a year in which the seasons seem to have done their best to change places.

SUMMARY

Highest temperature recorded		75° on 13th August
Lowest temperature recorded	***	17° on 3rd March
Greatest fall of rain in one day		1-11 inches on 7th November
Total rainfall		32.44 inches (average 31.21 inches
Total sunshine		1,766 hours (average 1,726 hours)
Number of days with sunshine		313
Number of days with rain		175
Mean temperature		49·4° (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.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	40.1	40.5	44.0	48.6	53.8	59.4	62.4	62.4	58.5	52·2 54·1	46.0	42.3
Absolute Maximum	52 11th	51 12th	68 30th	63 1st	70 14th	71 30th	71 2nd	75 13th	65 16th	71 5th	59 1st	55 4/5
Absolute Minimum Date	26 5th	26 3rd	17 3rd	34 6/29	34 20th	42 1st	44 17th	48 8/30	41 20th	39 23rd	24 15th	24 28th
Mean Range Humidity %	9.5	9.9	11·8 86	13.9	12:1	13.0	12.4	12.4	12.0	13.8	11.5	11.3

Mean Temperature for 1965 — 49.4 Average (Air Ministry) — 50.9

2. SUNSHINE (Hours)

					:	,				(
	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	65 86.0	82 59·7	133 152·3	185 185-3	218 213.0	230 219.2	213	206 205-5	150	116	71 98.6	57 83·6
Daily Average	2.8	2.1	4.9	6.2	6.9	7-3	5.8	9.9	4.4	4.8	3.3	2.7
Highest amount in one day Date	7.0 4th	8·8 14th	11.4 31st	12:4 30th	14.1	15·1 28th	13.4 17th	13-0 7th	11.3	10-0 5th	8.6 3rd	6.5 7th
Days with sunshine	20	22	24	29	28	27	29	30	29	30	24	21
Total f	Total for 1965 - 1766-0	- 1760	9-9		Ave	rage (Average (Air Ministry)	nistry) -	-1726			

3. RAINFALL (Inches)

	 Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Average	 3.56	2.28	2.92	2.00	1.90	1.56	2.22	2:47	2.50	3.46	3.74	3.46
Daily Average	9111	800·	-094	-061	.050	.085	860.	080-	.123	-028	.162	.155
Greatest fall in one day Date	 ·82	·13 28th	.49 3rd	·33 9th	.28 2nd	.73 16th	.99 111th	·88 2nd	-98 24th	.29 31st	1-11 7th	-62 22nd
No. of days with rain	19	5	16	17	12	13	15	14	17	7	17	23

Total for 1965 — 32-44

Average (Air Ministry) - 31-21

Water Supply

The greater part of the borough 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 424 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.	256	313			
	Results: Probable number of B. Coli organisms per 100 ml.	Varied from 180 to 350,000	Varied from 40 to 18,000			
	Number of samples taken of water going into supply	365	365			
	Results:	Grade I, Ministry of Heal Standard. All coliform type bacteria absent from 100 n samples. (Specimen results of chemic analyses are appended).				
(c)	Plumbo-solvent action	None.	E DIENGER STEELEN			
(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	49,747	6,437			
	(ii) by means of stand-pipes	None	None			

THE BOURNEMOUTH AND DISTRICT WATER COMPANY WATER ANALYSIS

B. Coliform P.N. in 100 ml			160				0
Agar Cultures 24 hours at 3							1
,, ,, 48 hours at 3							2
,, ,, 72 hours at 2							11
CL WILLIAM C							Absent fro
Colour (Burgess Scale)							100 ml
Tille - Lille - L. dan							_
-11							7.85
Electrical Conductivity at 2							435
Residual NH2CL							0.10
Results in P.P.M.	7 1						
Chlorine in Chlorides							19-0
Nitrogen in Nitrates					**		2.51
Nitrogen in Nitrites				**			0.02
							0.05
Ammoniacal Nitrogen							0.04
Albuminoid Ammonia							0.06
							0.05
Albuminoid Nitrogen	270	···					0.68
Oxygen Absorbed (4 hours		()					10.50
Dissolved Oxygen	• •						70000
Free Carbon Dioxide	• •						5.5
Alkalinity as CaCO3							197-0
Silica as SiO2		* *					7.5
Phosphates as P2O5						**	0.44
Iron as Fe							0-03
Suspended Solids							-
Total Dissolved Solids							292-0
Total Hardness							233-0
Carbonate Hardness					* *		197-0
Noncarbonate Hardness							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 Comb	inations
78·80 7·74 3·01		2	en s	118-20	18.58	5.33	216		Calcium Carbonate Sulphate Chloride Nitrate Magnesium	197·00 26·32 8·34
	0·06 2·05				0-24	5.99			Carbonate Sulphate Chloride Nitrate Sodium	0·30 8·04
		4·99 3·78 1·52				7.68	10-20	2.51	Carbonate Sulphate Chloride Nitrate Silicate Potassium Carbonate	12·67 13·98 4·03
			0·56 1·43	AST I			0.90	1.39	Sulphate Chloride Nitrate Silicate Other Silicates as SiO2 Ferric Oxide	1·46 2·82 4·40 0·04
									Terrie Oxide	279-40
	1	W	То	tal Sol	ids Dı	ried a	t 180	°C		292.00

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: 3

pH: 8-0

Electric Conductivity: 395

Chlorine present as Chloride: 20

Free Carbon Dioxide: 4 Hardness: Total: 235 Turbidity: Nil

Odour: Nil

Dissolved Solids dried

at 180°C.: 265 Alkalinity as Calcium

Carbonate: 195

Carbonate: 195

Non-carbonate: 40

Nitrate Nitrogen: 2.6 Nitrite Nitrogen: Absent
Ammoniacal Nitrogen*: 0.00 Oxygen Absorbed: 0.75
Albuminoid Nitrogen*: 0.05 Residual Chlorine: Absent

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

SEWERAGE AND SEWAGE DISPOSAL

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

The new Works at Holdenhurst and Berry Hill have continued to perform satisfactorily, and minor improvements are in progress at the Kinson Purification Works.

The first contract for the coastal intercepting sewer has been completed, and later in 1966 the first of the tunnelling contracts for its continuation should be in progress.

^{*} to convert to Ammonia multiply by 1-21.

ENVIRONMENTAL HYGIENE

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

It is pleasing to report that, so far as the work of the Public Health Inspectors is concerned, 1965 was a very successful year, as the figures which follow clearly demonstrate.

The great improvement upon the previous year's achievement has been due to several factors including the increase to full establishment of the numbers of inspectors and clerks; the reorganisation of the inspectorial districts; the introduction of a more efficient system of reporting and record-keeping and the elimination of the time-consuming duty of routine drain testing at new buildings by a qualified inspectorate. Grateful acknowledgment should also be made of the zest and energy with which the staff have carried out their duties, as these have played no small part in the success of the year's work.

Inspections and Visits

***	A CONTRACTOR OF THE PARTY OF TH					
W	ater					
	To obtain samples of water for chemexamination	nical an	d bac	teriolo	gical	583
Fo	od Supply					
	Hotel and Boarding House kitchens					1,236
	Cafes and Restaurants					592
	Factory Canteens					23
	School Feeding Centres					29
	Bakehouses					161
	Food Preparation Premises					127
	Shops re sale of food					1,614
	Stalls and street vendors' vehicles					102
	Dairies and milkshops for milk samples	**				929
	Shops for other food and drugs samples					494
	Dairies and milk distribution premises					205
	Premises used for the manufacture of ice					68
	Premises used for the storage and sale of	ice area		2:		16
	Mant manifests and sold start	ice crea	m	/		109 115
	Meat markets and cold stores					113
At	mospheric Pollution					
	Smoke observations					205

Housing Conditions Primary inspections of dwellinghouses (under Public Health Act. 529 1.966 Houses in multiple occupation (Housing Acts, 1957, 1961 and 1,386 1964) 46 Applications for certificates of disrepair, etc. (Rent Act, 1957) 19 Caravan dwellings 86 Occupational Conditions Factories 698 28 147 Other business premises (Young Persons (Employment) Act, etc.) Infectious Diseases 103 335 Food poisoning..... 131 General Sanitary Conditions 164 Holiday accommodation 68 Nuisances other than the above ... 191 2,278 Nuisances other than the above ... Nursing homes, day nurseries, etc. ... 19 24 105 Premises for the examination of drains 38 1.033 44 52 13 Public Conveniences Rag Flock and other filling materials .. 2,631 Refuse accommodation .. 266 59 232 105 Verminous premises Water courses 13 1,686 Miscellaneous Cesspools

Food Supply

The need to safeguard the Nation's food supplies from the source to the consumer has been recognised increasingly during the years following the Second World War and a considerable proportion of a Public Health Inspector's time is spent in carrying out the necessary inspections of all places where food is handled.

It is gratifying to be able to say that in Bournemouth a large majority of the food traders recognise the special need for the highest of standards in a holiday town which largely depends upon visitors for its prosperity.

The overall standard of food hygiene in the town is rising year by year and in most premises, during 1965, it has been possible to widen the scope of inspection beyond mere enforcement action, to include suggestions and advice on future developments and improvements. The relationship thus established between the food trade and the Inspectorate must ultimately be of great benefit and it has been long recognised by forward-looking food traders that a high standard of food hygiene, which can be seen to be practised, is an asset to any food business. It should be the aim of both the Council's Inspectorate and the local food trader to ensure that the town enjoys a high reputation for the quality of its food and the manner in which it is presented.

During the year nearly 6,000 visits to food premises were made. The practice of employing temporary inspectors to visit hotel and boarding house kitchens was discontinued, but the number of visits made to such premises increased by over 60 per cent. to 1,236; there was also an increase of about 20 per cent. in the number of inspections of cafes and restaurants. 242 informal written notices were sent drawing attention to contraventions of the Regulations, whilst on 157 occasions verbal notice was given. The extent of the co-operation given to the Inspectorate by the Trade is well illustrated by the fact that in no case was it necessary for the Council to take legal proceedings in respect of dirty or unsuitable premises.

Meat Inspection

on the soundness of meat intended for human consumption in the town. There are no slaughterhouses or abattoirs in Bournemouth so the detailed examination at the time of slaughter is carried out by the Public Health Inspectors employed by other local authorities. Certain carcases of beef affected with Cysticercus Bovis are sent to Bournemouth cold stores to undergo a period of refrigeration before being released as suitable for human consumption. During 1965, 61 such carcases were inspected and released by the Public Health Inspectors.

Milk Supplies

All milk sold in Bournemouth during 1965 was heat treated and designated "Pasteurised" or "Sterilised". The pasteurised milk distributed in the town is treated and bottled at one of four plants, two of which are sited in Bournemouth and two in Poole. Sterilised milk is treated at a dairy plant in Bristol.

Nearly 400 visits to supervise the processing and distribution of milk were made to the two pasteurisation plants and 252 milk retailers in the town.

During the year an additional 52 shopkeepers were licensed to sell designated milk as follows:—

Pasteurised	 	 	 52
Sterilised	 	 	 15

The sampling of milk to ensure its quality was carried out on a considerable scale and whilst in 1964 375 samples of designated milks were submitted to the Public Health Laboratory, in 1965 the number rose to 938, of which 260 were samples of milk distributed to local schools in one-third pint bottles. Seven one pint bottles and seven one-third pint bottles failed the Methylene Blue Test. In cases of failure investigation is carried out at the plants concerned and at the depots, shops and other points in the distribution chain. Satisfactory results have invariably followed such investigations.

Ice Cream

In a seaside resort one can reasonably expect the sale of ice cream to be greater than in a town of comparable size but of different character. Some impression of the amount of ice cream sold in Bournemouth can be gained by the fact that, whilst there are but three premises registered for the manufacture of ice cream 694 retail outlets are registered.

Sampling has always been maintained at a high rate in the town and in 1965 the number of samples taken and submitted to the: Public Health Laboratory increased by 23 per cent over the 1964 figure.

At the Public Health Laboratory samples are submitted to the:

Methylene Blue Reduction Test and the chart hereunder sets out the results obtained:—

Number of Samples Taken — 440

	Provisional GRADE I	Provisional GRADE II	Provisional GRADE III	Provisional GRADE IV
No. of Samples placed in Grade	346	72	19	3
Percentage of Samples placed in Grade	78.6%	16.4%	4.3%	0.7%

It must be emphasised that there is no statutory bacteriological standard for this commodity and that ice creams classified as Provisional Grades III and IV whilst being considered unsatisfactory, are not necessarily dangerous to consume.

An unsatisfactory result is a warning, both to the trader and to the Public Health Inspectorate that the handling of the commodity is not as good as it should be. Investigation always follows an unsatisfactory result and it is found more often than not that the poor result can be directly attributed to some slackness on the part of the retailer, usually in the matter of the sterilisation of equipment, especially ice cream servers.

The work of the Inspectorate in educating food-handlers who sell ice cream can be said to have achieved a very satisfactory result, in that whilst the number of samples taken has risen, the percentage falling into Grades III and IV has dropped from 9 per cent in 1964 to 5 per cent in 1965.

Prepared Foods

There are 155 premises in the Borough registered under Section 16 of the Food and Drugs Act, 1955 for the manufacture of meat or fish products. These types of food are far more liable to convey food poisoning organisms than others and need careful handling by well-trained workers if out-breaks of food-borne illness are to be avoided. The Public Health Inspectors carried out 201 inspections of registered premises during the year and obtained 175 samples of prepared meat and fish foods for bacteriological examination. All except one (a faggot) were found to be satisfactory; a subsequent investigation rectified the unsatisfactory position thus revealed and further samples were satisfactory.

Other Foods

Although samples submitted for bacteriological examination to the Public Health Laboratory are predominantly meat and fish as previously mentioned, a wide variety of other food-stuffs is also sampled including susceptible foods such as ice-lollies, cream cakes and other milk and egg products as well as tinned goods. 45 samples were submitted and reported as satisfactory in the course of the year.

Foodstuffs Condemned

The following amounts of food were condemned by the Public Health Inspectors during the year as a result of voluntary surrender by the traders concerned:—

Description Fish		 Tons	Cwts.	Qtrs.	Lbs.
Meat		 2	8	0	20
Tinned Goods Other Foods		 5	7 9	2	10
Other Tools		 			
	Total	 15	1	1	18

Adulteration of Food and Drugs

(a) Milk. The testing of milk by the Gerber Test to determine its content is carried out by the Public Health Inspectors. During the year samples were taken and tested as follows:—

"Pasteurised" Milk	 	 205
"Channel Islands" Milk	 	 162
"Sterilised" Milk	 	 29
"Homogenised" Milk	200	6

All were found to comply with the prescribed standards.

(b) Other Food and Drugs. 244 samples of food and drugs were submitted to the Public Analyst as follows:—

	FORMAL	SAMPLES	INFORMAL	INFORMAL SAMPLES			
	Found to be genuine	Found to be adulterated	Found to be genuine	Found to be adulterated	Total Samples		
FOOD	6	_	204	8	218		
Drugs	-	1	25	-	26		
TOTAL	6	1	229	8	244		

Nine samples were found to be adulterated, a percentage of 3-7.

Details of the adulterated or unsatisfactory samples and of the action taken are set out hereunder:—

		Formal Sample	
Ref. No.	Sample	Nature of adulteration or Offence	Action Taken
118	'Vitocee' Pellets	Deficient in Vitamin "A"	Manufacturers com- municated with.
		Informal Samples	
33	Milk Bread	Prepared with skimmed milk solids	Baker communicated with.
85	Pure Grape Juice	Colouring Ingredient not declared on label	Manufacturer com- municated with. Label to be altered.
124	Lard	Incorrectly labelled	Matter taken up with packers. Labels amended.
165	Soup Powder	Unsatisfactory odour and flavour, very damp	Matter taken up with retailers, unsatisfactory handling by customers, storage conditions rec- tified.
167	Soup Powder	Bore a misleading label	Manufacturer and dis- tributor communicated with. Label to be amen- ded.
205	Ground Almonds	Mould infested and unfit for human consumption	Stock examined and further samples taken which were satisfactory.
212	Freshly made Dairy Cream Fudge with French Brandy	Deficient of 67% of the minimum required milk fat content	Further formal samples taken which were satisfactory.
213	Freshly made Dairy Cream Fudge with Rum flavouring	Deficienct of 72% of the minimum required milk fat content	Further formal samples taken which were satisfactory.

Antibiotics in Milk

For some time there has been concern in the country regarding the possibility that antibiotics given to milk cows to deal with inflammatory conditions may result in the excretion of penicillin in milk for human consumption. This concern was expressed in a circular from the Ministry of Agriculture, Fisheries and Food, which requested Local Authorities to sample milk arriving in their areas for the detection of the presence of antibiotics. 25 samples were taken in the town of which 2 were found to contain excessive amounts of penicillin. Immediate contact was made with the producers and the dairies concerned.

Atmospheric Pollution

During the year 205 routine observations were made of industrial and commercial chimneys. 3 contraventions of Section 1 of the Clean Air Act, 1956 were detected, one of which was dealt with after informal action whilst the other two necessitated the service of formal notice to secure the abatement of nuisance.

In one case it was necessary to institute legal proceedings against a hotel company for failure to abate a smoke nuisance. The defendants were fined £5 with £5. 5. 0d. costs and no further trouble has since been experienced.

Sixteen plans of new buildings works were examined to check the suitability of proposed chimney heights. In two cases the architects submitting the proposals agreed to amend the height in accordance with a request from the Health Department. The remaining fourteen proposals were approved.

Daily Recording of Atmospheric Pollution

The practice of taking daily readings of pollution by smoke and sulphur dioxide from the three stations established in the Borough continued throughout the year. The results are collated at the Warren Springs Laboratory and form part of the National Survey of Air Pollution. These daily volumetric readings have not yet been taken over a period of years long enough to enable any useful deductions to be drawn from the results obtained.

Housing

The statistics given below indicate that unfit houses are not a major problem in the Borough. During the year it was necessary to represent to the Committee 12 dwellings as being unfit for human habitation; in one case a Demolition Order was made and in the other eleven Closing Orders — 5 under Section 18 and 6 under Section 17 of the Housing Act, 1957.

Demolition and Closure

51

Certificates of Disrepair

Inspections	made	in	connection	with	applicat	ions	for	issue	or	
revocat	ion of	cer	tificates							

19

Land Charges Enquiries

A total of 5,115 enquiries concerning various properties received attention during 1965.

Houses in Multiple Occupation

Press reports in recent years, which quite properly drew attention to appalling conditions in tenement houses in some of our large cities, have tended to encourage the view that all houses in multiple occupation provide a standard of housing comparable to slums.

The truth, as far as Bournemouth is concerned, is very different. During 1965, many of these houses were found which provide a very satisfactory standard of accommodation for certain types of occupiers. It should be remembered when considering the subject of houses in multi-lets that one-room accommodation is very much in demand and is an important part of the housing accommodation in the town. No responsible Public Health Officer would suggest that it is unnecessary to attain the very highest standards for the occupiers of flatlets or "rooms", but it is a mistaken view to suggest that it should be the aim of the local Council to bring to an end the use of this type of accommodation.

The following statistics set out the work carried out by the District Inspectorate during the year and this section of the Public Health Inspectors' duties is supervised by a specialist Housing Inspector.

The number of houses inspected is almost double that inspected in 1964, but the chief source of satisfaction can be found in the increase in the number of premises rendered satisfactory and improved as a result of the action by the Council's Inspectors.

(a) Work carried out

Number of inspections made (including re-visits)	 1,361
Number of Houses in Multiple Occupation inspected	 135
Number of Lettings inspected	 910
Number of Informal Notices served	 128
Number of cases in which Formal Action was taken	 22

(b) Formal Action Taken Housing Act, 1957

Notice requiring abatement of overcrowding (Section 90)	1
Housing Act, 1961	
Management Orders made (Section 12)	3
Notices requiring Defects of Management to be remedied (Section 14)	1
Notices requiring execution of works to render premises reasonably suitable for occupation (Section 15)	1
Notices requiring provision of satisfactory Means of Escape in case of Fire (Section 16)	10
Directions given, varied or revoked (Section 19)	6

Legal proceedings were taken against the owner of one house in multiple occupation for wilful non-compliance with a notice served pursuant to Section 16 of the Housing Act, 1961 requiring him to provide adequate means of escape in case of fire. He was fined £15, and ordered to pay £15. 15. 0d. costs.

(c) Results Achieved

Number of premises found to be satisfactory		16
Number of premises rendered satisfactory		55
Number of premises where use for multiple occupation	tion	
discontinued		6
Number of premises improved		122
Improvements Effected		
Satisfactory Means of Escape in case of Fire provided		77
Overcrowding in Lettings abated		21
Natural and/or Artificial Lighting improved		18
Means of ventilation improved		15
Personal Washing Facilities provided or improved		
(a) in Lettings		26
(b) by Installation of additional bathrooms or show	vers	4
(c) by Reduction of Numbers using them	• •	3
Facilities for storage, preparation or cooking of f	ood	0
improved		8
and all himself or the retired by the Complete land		
Repairs, etc. carried out		
Number of premises in which minor repairs and/or	re-	

Number of premises in which major repairs or alterations

233

10

27

decoration carried out ...

Other defects of Management remedied

Additional water-closets provided ...

Caravan dwellings

At the end of the year there were 12 licensed caravan sites in the Borough, covering a total area of approximately 45 acres. 8 sites cater solely for permanent residential vans, totalling 225, and one site houses 320 mobile dwellings used only as holiday accommodation. The remaining three parks together provide sites for 126 permanent residential and 89 holiday caravans.

One site closed during the year at the expiration of a temporary planning permission.

On two residential sites some of the caravans now have their own water-closets and bathrooms which are connected to the main drainage system.

During the year, 70 inspections of caravan sites were made by the Public Health Inspectors.

Occupational Conditions

Factories

The revision of the Factories Register, commenced in 1964, was completed during the year, together with a change in the system of recording information obtained by the Inspectorate during the field work necessary to carry out the Council's responsibilities under the Factories Act, 1961.

Bournemouth is usually considered as anything but an industrial town and the figure of 709 shown hereunder as the number of factories in the Borough will surprise many. In fact the great majority of such registered premises employ very few persons and may be said to be "factories" by legal definition rather than by the commonly accepted understanding of the meaning of the term.

The following tables set out the information required to comply with the Factories Act, 1961:—

Factories Act, 1961. Part I — Inspections.

		N	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	104	137	5	_	
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority	605	561	31	_	
(iii)	Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	_	_	_	-	
	TOTAL	709	698	36	_	

Cases in which defects were found

	w	No. of cases in which			
		THE PARTY OF THE P	Refe	rred	prosecu- tions
Particulars (1)	Found (2)	Reme- died	To H.M. Inspctr. (4)	By H.M. Inspetr. (5)	were insti- tuted (6)
Want of cleanliness (S.1) Overcrowding (S.2) Unreasonable temperature	2	2	=	=	_
(S.3)	1	1	=	=	=
(S.6) Sanitary Conveniences (S.7) (a) Insufficient	_	_	_	_	_
(b) Unsuitable or defective(c) Not separate for sexesOther offences against the Act	30	21	=	3	_
(not including offences relating to Outwork)	-	- Jun	1	100	0
TOTALS	36	27	1	3	-

Outwork (Sections 133 and 134)

	.5	Section 13.	3	Section 134			
Nature of Work	No. of out- workers in August list required by Section 133	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- whole- some premises	Notices served	Prosecu- tions	
(1)	(1) (c) (2)	(3)	(4)	(5)	(6)	(7)	
Wearing apparel (making, etc.)	45	-	-		-	-	
Curtains and furni- ture hangings	7				_		
TOTAL	52	-	- 401	11-11-10	o'd and	1 44	

Offices, Shops and Railway Premises

The Offices, Shops and Railway Premises Act, 1963, in almost its entirety, came into operation on 1st August, 1964. Although a token effort was made to implement the Council's duties during the last quarter of 1964, it is fair to say that 1965 is the first full year during which the Act was operative.

A great deal of the Inspectors' time has been spent dealing with the varied and detailed provisions of the Act and its Regulations and Orders. 2,682 visits were made and 932 premises received a first general inspection. As a result 1,439 contraventions were detected and were brought to the attention of owners or occupiers of premises. 513 written informal notices were served and verbal notice was given on 88 occasions. In many cases contraventions found were of a minor nature and required no more than the provision of a thermometer or the exhibition of abstracts of the Act to comply with the legislation.

With a comparatively small exception excellent co-operation has been forthcoming from the owners and occupiers approached by the Department and a great deal of work has been carried out to raise the standards of working conditions in non-industrial premises.

At the end of the year, 2,074 businesses were registered, involving a labour force of 8,903 men and 11,005 women.

Detailed figures are given hereunder :-

Class of Premises	Number on Register	Number Employed	Number insp. during 1965
Offices	801	8360	223
Retail Shops	1143	7868	636
Wholesale Shops and Ware- houses	35	1488	32
Catering Establishments open to the public and Canteens	94	2088	40
Fuel Storage Depots	1	4	1

The Minister of Labour called for a special Report on Lighting Standards and the following information was submitted:—

Special Report on Lighting Standards submitted by Bournemouth County Borough Council in accordance with Local Authority Circular 9, (Supplement No. 1), dated 9th August, 1965.

(1) SHOPS

The results obtained from the survey carried out during November 1965 suggest that, generally, lighting standards were inadequate to some degree in approximately half the shops inspected. It was noticeable that there was a very substantial variation in the readings obtained in different parts of the selling areas. Except on rare occasions the pattern clearly points to the installation of lighting facilities with little regard either for standards or the requirements of the worker. In the large majority of premises inspected back-ground lighting in stockrooms was extremely poor, light often being concentrated only at points where it was absolutely essential for efficient working.

OFFICES

On over half the working surfaces measured in offices the readings obtained were below 25 lumens per sq. ft. and, as found in the shops, there was little evidence of planned lighting systems.

It cannot be over emphasised that lighting provision assessed as adequate solely by the unaided eye is unlikely to meet a standard enforced by inspectors using light meters. It is therefore considered essential that a statutory standard be introduced with the necessary publicity and explanation as soon as possible. It would appear essential that employers of labour be acquainted with the need for adequate lighting to maintain maximum efficiency from, and the well-being of, their staffs as well as the need for a more technical approach to the lighting requirements of their buildings.

- (2) In Bournemouth unsatisfactory lighting cannot be associated with any particular trade, although it can be said that unsatisfactory conditions are more often found in smaller and older premises, whilst there is seldom room for serious criticism in the departmental stores. This, however, is a generalisation.
- (3) The Council's Officers have adopted no standard when advising occupiers that lighting requires improvement. Occupiers are advised to consult a reputable lighting contractor. It is considered that the adoption of a local standard, whether higher or lower than any future national standard, must inevitably lead to difficulties when a statutory standard is introduced. The early introduction of a prescribed standard in Regulation form would, therefore, be welcomed.
- (4) Instances of excessive glare have been noted in a few premises. Inspectors have relied on the principles of general inspection to assess glare rather than on a set standard or a system of accurate measurement.

APPENDIX I

Offices — Lighting standards in Lumens per square foot on working surfaces.

No.	of Lumens per sq. ft.		No.	of Readings
(a)	Less than 5	 		2
(b)	More than 5, less than 10	 		7
(c)	More than 10, less than 15	 		21
(d)	More than 15, less than 25	 		43
(e)	More than 25	 		63

The above readings were taken during the survey of 27 separate office premises.

APPENDIX II

Shops — Comparison of standards of lighting in working areas with standards in the selling areas.

Standards in working areas (Lumens per square foot)

per sq. ft.)	o maski	Less than 5	5–10	11–15	16-20	21-25	26-30	31–50	Over 50
(Lumens per	Less than 5	1		Purpos	S.II 10	ienspra ienspra	pidge	ne vas	(d)
(Lui	5-10	M In	1	2	1	pm 3	THE PERSON	A ANN	
eas	11-15	1	4	ac aliq	2	129772	1	micon	
g Ar	16-20	1199	8	3	2	1			
in Selling Areas	21-25	1	. 1	1	2	1	39151	1	
in S	26-30		4		la lia	1		2000	7.00
rds	31-50	3	2	Smine!	3	1	Mit . St	1	in mach
Standards	Over 50	1	1	1	3	3	1		011

NOTE: In all premises surveyed lighting was measured at more than one point in both selling and working areas. In preparing the above chart an average figure was calculated.

SUMMARY

No. of Premises Surveyed	59
No. of Premises where lighting standard in Selling Area exceeds that in Working Area	45
No. of Premises where lighting standard in Working Area exceeds that in Selling Area	8
No. of Premises where equal lighting standards exist in Selling and Working Areas	6

Notification of Accidents

44 employers notified the Council of accidents to their employees. Four accidents involved the use of machinery but, predominantly the injuries brought to the Authority's notice were caused by falls and in the handling of goods. None of the accidents was fatal.

Shops

147 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. 43 contraventions of the Act were noted and dealt 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 6th June and the 3rd October, 1965, 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 postcards.

A further Order was made by the Council, under Section 40 of the Shops Act, 1950, which suspended the obligation imposed upon shop-keepers to close on the weekly half-holiday for the months of June, July, August and September.

On the 5th August, 1965, the Shops (Early Closing Days) Act 1965, came into operation. This Act was passed to enable shop-keepers to choose their own early closing day (formerly known as the weekly half-holiday). It also abolished the power of local authorities to make orders fixing the early closing day, but did not remove their power to make six-day trading orders exempting particular classes of shops from the requirement to observe an early closing day. The occupier of a shop is now required to keep displayed so as to be visible outside the shop at an entrance used by customers, a notice specifying the chosen day. The Act also made certain alterations in the law relating to the changing of early closing days by shop-keepers.

General Sanitary Conditions

Infectious Diseases

569 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
(b)	After non-notifiable disease	 		20
(c)	After tuberculosis	 		2

Drainage Work

The decision of the Council, taken in 1964, to the effect that the Borough Engineer would assume the responsibility for testing new drainage systems laid under the supervision of the Building Inspectors, has raised no practical problems during the course of the year. It has had the effect of saving a considerable amount of time, wasted by qualified inspectors whilst waiting for tests to be prepared, and the general increase in the number of visits carried out by officers reflects the value of this decision to this Department.

The following table sets out the details of drainage work carried out by the Inspectors and their assistants.

No. of Visits in connection with defective drains	561
No. of Visits in connection with choked drains	472
No. of choked drains found and cleared	268
No. of defective drains repaired	48
No. of Visits in connection with cesspools	69
No. of cesspools closed	6
No. of Visits in connection with Private Sanitary	
Surveys	44
No. of Private Sanitary Surveys carried out	16
Total of fees received for Private Sanitary Surveys	£71. 18. 6d.

Refuse Storage Accommodation

266 visits were made to premises in connection with the storage of refuse. 36 new dustbins were provided following informal action by the Department.

Nuisances

709 complaints of nuisance were received and investigated, involving nearly 2,500 visits by the Inspectors. Of these complaints 529 related to defects in houses whilst the remainder concerned

undue noise, atmospheric pollution, the keeping of animals, refuse accumulations and infestations. Notice of the existence of public health nuisance was given to the responsible persons in 363 cases, but it was necessary to serve only 36 formal notices, 5 of which remained outstanding at the close of the year. 11 statutory notices, outstanding at the end of 1964, were complied with early in 1965.

Insect Pests

Treatment at 77 premises was carried out to eradicate insect pests such as fleas and cockroaches. The summer of 1965 saw a large increase in the wasp population and the number of wasps' nests destroyed increased from 172 in 1964 to 536. For this service a charge of 7s. 6d. per nest was made.

Rodent Control

1,243 notifications of rodent infestations were received during the year and as a result 1,086 minor rat infestations and 61 infestations by mice were detected and dealt with.

1,229 premises were inspected for survey purposes and 318 rat infestations and 12 of mice, all minor in character, were detected and dealt with. There was a decrease of nearly 200 in the number of complaints received during the year but the number of premises inspected during survey more than doubled. This is a very satisfactory trend which it is hoped will continue.

The Council carries out disinfestation treatment at both dwelling-houses and business premises; this is a free service at the former, but a charge is made for work at business premises. A total of £160 was derived from this source during 1965.

Frequent baiting is carried out at the Council's refuse tips and infestations have been successfully prevented. The routine preventive measures undertaken at the Corporation establishments were also continued with satisfactory results.

Sale of Pets and Pet Foods

24 annual licences to conduct pet shops were granted and 24 inspections carried out to ensure the observance of conditions of licence. No contraventions were detected. 16 samples of raw meat, sold as pet food, were submitted to the Public Health

Laboratory and, with two exceptions, were reported as free from food-poisoning organisms.

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

179 samples of water from the above baths were submitted to the Public Health Laboratory and of these 9 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 private hotels and schools were sampled on 202 occasions to ensure the maintenance of satisfactory standards; whilst 21 samples of water from paddling pools were also submitted to the Public Health Laboratory.

Hairdressing Establishments

At the end of the year, 237 hairdressers were registered to carry on business at premises they occupy, whilst a further 29 registrations apply to persons conducting business as visiting hairdressers. 164 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 193 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. 59 inspections were carried out during the year; no contraventions of the Poisons Rules were detected.

Legal Proceedings

The following legal proceedings were taken in 1965.

Proceedings taken under	For	Result			
Food Hygiene (General) Regulations, 1960	Smoking whilst handling open food	Fined £10			
Section 2, Food and Drugs Act, 1955	Sale of a mouldy sausage roll	Fined £5, Costs £10. 10. 0d.			
Section 2, Food and Drugs Act, 1955	Sale of a pork sausage containing a plastic finger stall	Fined £20, Costs £15. 15. 0d.			
Section 1, Clean Air Act, 1956	Emitting black smoke from hotel chimney	Fined £5, Costs £5. 5. 0d.			
Section 2, Food and Drugs Act, 1955	Selling a mouldy Shepherd's Pie	Fined £20, Costs £6. 6. 0d.			
Section 2, Food and Drugs Act, 1955	Selling unsound minced beef	Absolute discharge, Costs £11. 19. 0d.			
Section 2, Food and Drugs Act, 1955	Selling unsound chocolate walnut layer cake	Fined £25, Costs £5. 5. 0d.			

Public Conveniences

The receipts from conveniences under Health Department control during 1965 were as follows:—

Source				A	mo	unt		
				£	S.	d.		
Coin locks				14,154	11	3		
Wash and brush up rooms .				281	18	6		
"Brylcreem" dispensers .				4	0	10		
Perfume and hand lotion dispe	ensers			28	10	8		
(The last two amounts are a percentage of the total receipts, the balance being paid to the firms operating the machines).								

No major structural alterations or improvements were carried out to conveniences during the year. New Ladies' and Gents' Conveniences were, however, opened at West Overcliff and at Riverside Walk, Tuckton, in August and November respectively.



COUNTY BOROUGH OF BOURNEMOUTH

EDUCATION COMMITTEE

Annual Report

of the

Principal School Medical Officer

Year 1965

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE

MR. CHAIRMAN, LADIES AND GENTLEMEN,

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

There has been little serious illness and, apart from an outbreak of measles, few cases of notifiable infectious diseases and the general physical condition of the children has remained on the high level noted in previous Reports.

Perhaps the one discordant note is that referrals to the Child and Family Guidance Centre are still maintained at a high level and that children classified as Educationally Subnormal show an increase over 1964. It is difficult to know whether any true increase in these cases has occurred or whether the apparently increased numbers are solely the result of improved recognition of such children. The facilities for diagnosis and help through the Child and Family Guidance Centre, the Day Unit for Maladjusted Children, the School Psychological Service and the Day School for Educationally Subnormal Children have improved enormously over the last few years and in addition to providing the skilled help required by these children, their very existence has stimulated doctors, teachers, child care officers, and others to recognise and search out early cases amenable to treatment.

The staffing position in the School Health Service remains very difficult, particularly as regards those professionally qualified people who are essential for the development of services for handicapped children. Many of these children show considerable improvement with skilled therapy, and though their numbers are comparatively small they require all the help they can get early in school life if they are to achieve their full potential.

During the year the Health Education Officer commenced duty and has already made considerable impact in the Clinics and Schools where his services are most needed.

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 at all times.

I am,

Yours faithfully,

WILLIAM FIELDING.

SCHOOL HEALTH SERVICE STAFF

(As at 31st December, 1965).

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

Deputy Principal School Medical Officer:
J. Beasley, M.B., B.S., D.P.H.

School Medical Officers:

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.
A. S. RAIKES, L.R.C.P., M.R.C.S.

Principal School Dental Officer: M. B. Redfern, L.D.S.

School Dental Officers:
F. E. LOCKWOOD, B.D.S.
R. B. MOUATT, B.D.S.
C. PUGH, L.D.S., R.C.S.

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 Therapist:

P. SHEA

Superintendent Health Visitor and School Nurse: L. E. Roberts

Health Visitors and School Nurses:

K. H. BEAUMONT	M. O'LOONEY
D. E. BLUNDSTONE	M. PEAKMAN
F. DARLINGTON	C. RICHTER
M. E. DAVIES	J. M. ROBINSON
E. Derry	C. M. SORTON
B. GEACH	G. N. SUCKAMORE
A. JOHNSON	J. VENN
J. MULLIGAN	M. WARD
	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	 	 15,358
Average number on School Registers	 	 16,622

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

DEFECTS		Children Aged 5 1,097		Children Aged 10 285		Children Aged 14 1,187		Other Periodic Inspections 1,780	
Care.	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	
Skin		22	4	9	-	36	2	43	5
Eyes:— (a) Vision (b) Squint (c) Other		22 35 10	$\frac{2}{1}$	42 3 2	<u>-</u>	266 -3	_ 18	240 37 10	3 14
Ears:— (a) Hearing (b) Otitis Media (c) Other		<u>-</u>	$\frac{1}{1}$	$\frac{1}{2}$	5 - 2	6 - 2	4 -	12 1 7	3 - 4
Nose or Throat		39	32	8	24	5	9	34	109
Speech		10	7	6	2	3	1	22	9
Glands		3	57	_	4	_	2	2	38
Heart		5	-	-	2	3	11	5	13
Lungs		1	6	_	2	-	1	8	12
Developmental:— (a) Hernia (b) Other		2 5	2 8	1 13	<u>-</u> 9	1 22		2 30	1 14
Orthopaedic :— (a) Posture (b) Feet (c) Other		9 37 4	7 8 1	3 20 7	- 3 2	13 8 6	5 1	16 48 14	4 7 6
Nervous System :— (a) Epilepsy (b) Other		=	=	4	=	=	=	2	<u></u>
Psychological:— (a) Development (b) Stability		10	22	6	6	1 1	2	23 2	13 5
Abdomen		-	-	-	10	=	2	2	1
Other		_	2	-	-	-	-	5	1
		215	164	127	68	376	60	566	263

FINDINGS ON MEDICAL INSPECTION

(a) Uncleanliness

134 cases of personal uncleanliness (which includes evidence of lice infestation) were discovered in 1965 compared with 68 cases in 1964. Fourteen schools showed an increase in cases, the majority of them Infant and Junior Schools, and it is tempting to associate these cases with the large number of working mothers who have fewer opportunities of supervising their children's hygiene. In one school, a senior boys' school, there was an increase from nil in 1964 to 13 in 1965, possibly associated with the prevalent style of hairdressing among adolescent males.

(b) General Condition

Only 14 children seen in 4,349 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. Of this number 8 were in children born in 1960 and coming up for their first routine examination and regrettably some of them showed evidence of neglect and mismanagement.

(c) Minor Ailments

The number of cases treated at Minor Ailments Clinics dropped from 227 to 151, the majority being of a truly minor nature.

(d) Defective Vision

Routine medical examinations among the entrant, intermediate and leaver age groups discovered 12.8% 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 15.2%.

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.

2,012 children attended the Special Eye Clinics during the year and spectacles were prescribed in 610 cases by Consultant Ophthalmic Surgeons of the Bournemouth and East Dorset Hospital Management Committee. 347 children attended for the first time, and 166 were recommended to wear spectacles.

The Orthoptic Clinic at "Avebury" was attended by 68 new cases during the year, while 18 children received operative treatment for "squint," being subsequently followed up by the Ophthalmic Surgeons.

(e) Defects of the Nose and Throat

282 children received treatment for enlarged tonsils and adenoids, compared with 293 in 1964.

(f) Treatment of Children in Hospital

The following information was given in hospital discharge reports received during the year :—

	Group of Diseases			No. of Children
1.	Infections or Parasitic Diseases	 		8
2.	Neoplasms (a) Benign	 		4
	(b) Malignant	 		_
3.	Allergic, Endocrine, Metabolic and Nutritional	 		
	Diseases of blood and blood forming organs			100
	Mental, Psychoneurotic			
	Diseases of Nervous System and Special Senses			35*
	Diseases of Circulatory System and Lymphatics	10,10		5
	Diseases of Respiratory System	 		307†
	Disagrae of Digastiva System	 		74
13.		 		110
	†Includes 282 cases for tonsillectomy.			
11. 12.	Bones, etc	131	::	30 10 198 110

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 1,510 attendances were made at Minor Ailments Clinics.

LIST OF CLINICS HELD FOR SCHOOL CHILDREN

IURSDAY FRIDAY	AFTERNOON — — — — — — — — — — — — — — — — — —	MORNING AND MORNING AND	Do. Do. Do. Do.	MORNING — — — — — — — — — — — — — — — — — — —	MORNING AND MORNING AND AFTERNOON	AFTERNOON — — — — — — — — — — — — — — — — — —
WEDNESDAY THURSDAY		Q	Do.	MORNING	MORNING AND AFTERNOON A	MORNING AND
TUESDAY	1111	MORNING AND	Do.	111	Morning and Afternoon	AFTERNOON
MONDAY	Morning Afternoon Morning	MORNING AND	Do.	AFTERNOON —	MORNING AND AFTERNOON	111
Minor Allmonte Clinice	East Howe: Hadow Road	Dental Clinics Central: 10 Madeira Road	East Howe: Hadow Road Pokesdown: 896 Christchurch Road Charminister: East Way	Eye Clinics Central: 10 Madeira Road Charminster: East Way West Howe: Cunningham Crescent	Child Guidance Centre 844 Wimborne Road	Speech Therapy Clinics Special School: Alma Road Charminster: East Way Pokesdown: 896 Christchurch Road

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 9,780 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, 866 children attended the clinic during 1965, 259 of them being new cases, referred mainly by School Medical Officers or by local general practitioners.

Over 53% 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 surgeons 539 . . Number of new cases 170 Total number of attendances 868 Number of cases discharged 178 Defects found Genu Valgum/Genu Varum and other knee defects . . 143 Spastic conditions 13 Due to Anterior Poliomyelitis ... 4 Spinal Curvature and Poor Posture 31 Torticollis . . 3 Deformities of the foot ... 289 Other conditions . . 56

This is a most useful Clinic, possessing two great advantages: that children are seen with the minimum of delay, and that they are removed from the general hospital atmosphere.

SPEECH THERAPY

The full establishment for Speech Therapists was reached at no time during 1965, and for a considerable period only one therapist (Miss P. Shea) was in post. In consequence diagnostic and treatment sessions were fewer and a reduction had to be made in the amount of time given to the Royal Victoria Hospital.

In spite of these setbacks, every effort was made to maintain the good relations established by Mrs. Loughran (who resigned in June 1965 to go to Glasgow) and Miss Shea with the Child and Family Guidance Centre, the Guild of Teachers of Backward Children and the home teachers of the Education Authority, for many children with speech defects suffer other disabilities as well. In addition a Speech Therapy Student spent three weeks in the Clinics and two final year schoolgirls were taken for a period of observation — good public relations, as there is a grave national shortage of Speech Therapists.

In all 159 children were under treatment at the end of the year, attending 8 different Clinics, and 66 children were discharged from treatment. The total number treated during the year totalled 225.

B.C.G. VACCINATION

School children born in 1952 were offered protection against tuberculosis by B.C.G. vaccine, in accordance with the Ministry's recommendation, and of 1,088 children tuberculin tested, 942 were vaccinated. The number is rather lower than of those tested in 1964 (1,445) mainly because no private schools were included in the programme of 1965.

CHILD AND FAMILY 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 and Family Guidance Centre during 1965.

CHILD AND FAMILY GUIDANCE CENTRE

Annual Report, 1965

The number of children referred to the Centre shows an increase of 34 over 1964 figures.

Since September 1964 I have had to reduce my sessions held at the Centre from eight to seven. This eighth session is now held at Christchurch Hospital and provides a valuable link between the Child and Family Guidance Centre and the Paediatric Department for this area. The establishment of the post for an additional full-time Psychiatric Social Worker is welcomed and it is hoped the appointment will be made before long as the need for social work with families of children residentially placed is acute and the request for liaison with boarding schools and hostels is persistent.

The training of social workers from the Applied Social Studies Course at Southampton University continues and we see this function of the Centre as of increasing importance in the light of the expansion in the field of social work and the projected administrative changes in the care of children. It is anticipated that the Child and Family Guidance Centre will assume more consultative work with other social agencies and this is already noticeable in our close liaison with the Children's Department.

Our case conferences to which other interested departments and social agencies are invited continued during the year. The educational aspects of Mental Health are the concern of all the staff and evening lectures continue to be given to societies and groups in the town.

With more public recognition of the problems of mental health especially in the development of children the demand for more information and more co-operation from both official agencies and voluntary societies increases. Currently the growth of welfare work connected with problems that arise in the family presents a challenge to our professional skills and to the administration of the services we offer. There is no doubt that more unity in this field of work is required but it seems that it will have to evolve as our experience grows through working together.

Jeannie Stirrat, M.B., Ch.B., D.P.M. Consultant Children's Psychiatrist.

ANNUAL RETURNS FOR YEAR ENDED 31st DECEMBER, 1965

							220
New Cases referred						**	239
New Cases seen							209
Uneventuated							32
Cases Closed							232
Cases Re-opened							48
Open cases 31.12.65							317
Awaiting Preliminary Inves							33
Awaiting Psychiatric Invest							10
							315
Total number children seen						* *	313
Saures of Paternals							
Source of Referrals							42
School Medical Officer							
General Practitioners				**			59
Head Teachers							18
Parents							34
Medical Consultants							38
Children's Officer							9
Probation Officer							6
School Psychological Servi							6
Miscellaneous			**	18 90			27
Miscenaneous		• •					
							239
							439
And Comment Deformale							
Age Group of Referrals							32
Pre-school						* *	
Primary							105
Secondary Modern							62
Grammar							17
Left and others							23
							-
							239
						010 10	
Reasons for Referrals							
Behaviour difficulties	100						159
			221		a de		63
Psychosomatic systems							9
Educational problems						**	6
Nervous symptoms							2
Speech problems							-
							220
							239
						100	
Closures							120
						* *	129
Parents unable to co-opera	ite .	 					34
Not responsive to treatmen	nt .			**			2
							39
Left School							8
Terreferred to other agence							14
Transferred to other agenc	103			1			6
Removed from area		 					
							232
							202

IMMUNISATION AGAINST INFECTIOUS DISEASES

Arrangements have continued for the protection of schoolchildren against diphtheria, whooping cough, tetanus, poliomyelitis, smallpox and tuberculosis, in accordance with schedule P (modified) of the Ministry of Health.

As recorded in previous Reports, primary vaccinations are generally well received, but difficulty continues to be experienced in maintaining full immunity through school life by "booster" doses.

The fact that during 1961-5, 83.9% of children were protected against poliomyelitis compared with 51.8% for other immunisations suggests that an oral vaccine possesses an overwhelming advantage over one given by the subcutaneous route.

During the year protection was given as below :-

land bare in fifther constitution.	Primary	Booster
Diphtheria	1	16
Diphtheria/Tetanus	4	1,616
Diphtheria/Whooping Cough and Tetanus Quadrilin (Diphtheria/Whooping Cough/Polio-	32	486
myelitis/Tetanus)	2	84

Protection against poliomyelitis was given to 149 (Primary doses) and 1,285 (booster doses) school children, while 942 children received B.C.G. protection against tuberculosis in addition to 57 others dealt with as "contacts".

NOTIFICATION OF INFECTIOUS DISEASES

The following relate to school children:-

Measles						 958
Whooping Co	ugh					 8
Scarlet Fever			201.10			 14
Dysentery		p Shan	THE REAL	110	Dright	2
Pneumonia		orige at				 3
Meningococca	l Infe	ection	11.00	- 200		 1
Scabies		A Mal	1919	bringer		 10

996

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.

				No.
Eye Defects	83:20	2	Land	117
Ear, Nose and	Throat	condi	tions	40
Skin complaints	90.000	90,900	obsy, lar	51
Uncleanliness	1. 100	matub	the sub	144
Miscellaneous		9.90	project	221
	Ear, Nose and Skin complaints Uncleanliness	Ear, Nose and Throat Skin complaints Uncleanliness	Ear, Nose and Throat condi Skin complaints Uncleanliness	Ear, Nose and Throat conditions Skin complaints

573

Exclusion from School

Scholars were excluded from school during 1965 for the following reasons:—

Behaviour problem	s	 4
Eye conditions (Pos	st-op.)	 14
Uncleanliness	m/b+-(a	 9
		27

_

Open Air Education

Only one child (girl) was recommended for admission to a residential open air school during 1965.

SCHOOL MEALS SERVICE

37 Centres are in use for the provision of meals and the number of children attending on an average day in September was 10,220 out of 16,067 children attending school that day. 670 of these meals were provided free. On the same day, 11,904 children received milk in school (one-third pint each).

STAFF EXAMINATIONS

86 school teachers were examined by the medical staff, as a condition of appointment, also 121 applicants for entry to Train-

ing Colleges. In addition, 34 students were examined on completion of their course at the Bournemouth Municipal College of Art.

EMPLOYMENT OF SCHOOL CHILDREN

A total of 591 children aged 13 or more who wished to be employed outside school hours were medically examined by the School Medical Officers. One was found to be unfit. The occupations proposed were:—

Errand Boys	 	 15
News boys	 	 380
News girls	 	 134
Shop assistants	 	 34
Other	 	 27

1 other child was granted a medical certificate as being fit to take part in public entertainment.

HANDICAPPED CHILDREN

The number of handicapped children on the Register showed an increase from 447 to 475, representing 2.8% of the school population. The majority of these children fell into the categories of educational subnormality, defective speech and maladjustment; all of whom can profit to a greater or lesser extent by special educational arrangements and by skilled handling and treatment. Facilities in the area have improved enormously during the last few years and it is disheartening to report that the parents of some children most in need give the minimum of co-operation to the Authority.

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

		7.7.7	 TOTEL !
Educationally sul	bnorma	al	 193
Defective speech			 159
Maladjusted			 46
Physically handic	apped		 28
Partially hearing	6		 23
Delicate			 15
Deaf			 4
Partially sighted			 3
Blind			 3
Epileptic			 1

HANDICAPPED PUPILS

	Number Awaiting Placement 23.1.66	- - 1440	41
ols*	Number A Attending A 23.1.66 Pl:	120 120 120 1	202
Special Schools*	Number Admitted During the Year	-	29
1918	Number Recommended During the Year for Admission	1 2 4 2	36
inment	Number on Register, 31.12.65	3 23 15 193 46 159	475
Ascertainment	New Cases Ascertained During 1965	1 7 7 10 10 86	146
No.		:::::::::	
91	scena	:::::::::	anlph 6
1		::::::::	:
	Category	Blind Partially Sighted Deaf Partially Hearing Delicate Physically Handicapped Educationally Sub-normal Maladjusted Epileptic Speech Defective	Totals

Number of Handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944. * Includes boarding houses or hostels and independent schools: excludes Hospital Schools.

32

Annual Report on the School Dental Service—1965

Until the last quarter of 1965 the work of the School Dental Service was severely handicapped by an acute shortage of staff. Fortunately, in the autumn we were joined by two new dental officers bringing us up to full establishment for the first time for eight years.

Despite these difficulties the work done compares quite favourably with previous years. There was an unavoidable drop in the number of school inspections, one clinic having to suspend routine school inspections during the first half of the year, but with the improved staff position these arrears have already been remedied. Those clinics where pressure of work has not been so great were able to recall patients for inspection at six-monthly or four-monthly intervals, and this will be the aim of all the clinics during 1966. Of the 14,275 children inspected at school or clinic, 5,062 were referred for treatment. Of the remainder, less than 2% of those over ten years of age were caries-free, and the rest were under the regular care of their own General Dental Practitioner.

There has been a slight but definite improvement in the teeth of the five-year-old school entrants. There was also an appreciable increase in the number of milk teeth filled and a decrease in deciduous extractions, showing, it is hoped, a greater awareness on the part of parents of the importance of the first teeth. The necessity for regular attendance and early treatment of the milk teeth cannot be over-emphasised; not only does preservation of the milk teeth raise health standards and help to prevent over-crowding at a later age, but early treatment carried out as a regular routine creates confidence in the child, so that a visit to the dentist no longer becomes an occasion to dread.

During 1965 we were able to begin a programme of Dental Health Education which it is hoped will eventually cover the whole Borough. The appointment of a Health Education Officer in November has been of great value and has greatly facilitated our efforts. Plans have been laid for a Pilot Dental Health Scheme to be carried out in one school, and it is hoped to carry out an intensive campaign at a future date to arouse the interest of the whole town in raising the standards of Dental Health. In the meanwhile large numbers of leaflets have been distributed to children of all ages

throughout the area. These are attractive and well produced but quite inadequate to counteract the overwhelming force of commercial advertising of sweets and other cario-genic foods. Not until we have a nation-wide and realistic campaign can we expect to reduce the onslaught of dental disease, now said to be the most prevalent disease of modern civilisation. In this context, the Council's rejection of the Health Committee's recommendation to fluoridate the public water supply is much to be regretted, as this is still the most effective, proven and safe method of reducing dental caries.

Finally, I should like to thank all members of the staff for their loyalty and co-operation in every way. My thanks are also proffered to the Head Teachers and staffs of all our schools and to the Superintendent Health Visitor and her staff who have greatly helped our work. I am also grateful to the Consultants, staff and technicians of the Hospital for the facilities they provide.

M. B. REDFERN.

Principal School Dental Officer

Medical Inspection and Treatment

Return for Year ended 31st December, 1965

Number of pupils on registers of maintained primary, secondary, special and nursery schools in January 1966:

(i) Form 7 Schools		 	 16,660
(ii) Form 7M		 	 138
(iii) Form 11 Schools		 	 -
	TOTAL	 	 16,798

PART 1

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

TABLE A—PERIODIC MEDICAL INSPECTIONS

ment (exclud- station with		Total	slidnd	(8)	7	184	143	97	10	109	107	202	22	464	1,116
Pupils found to require treatment (excluding dental diseases and infestation with	vermini)	other	recorded	(7)	7	193	141	77	10	88	71	15	4	147	714
Pupils found ing dental d	-	defective	(excluding	(9) (9)		22	15	nv	1	42	4 7	0 00	21	372	570
No. of Pupils	warrant a	examination		(5)	1	1	1	1 1	1	532	290		1	1	822
Condition Inspected	Unsatisfactory		No.	(4)	1	∞	1.	-	1	-		-	1	2	14
Physical C of Pupils 1	Satisfactory		No.	(3)	29	1,089	638	170	28	284	254	200	45	1,670	4,335
No. of Pupils	received a	examination		(2)	29	1,097	638	13/	28	285	255	2000	45	1,672	4,349
A as Grains	inspected	(by year of Birth)		(1)	1961 and later	1960	1959	1957	1956	1955	1954	1952	1951	1950 and earlier	TOTAL

Col. (3) total as a percentage of Col. (2) total 99:68%

Col. (4) total as a percentage of Col. (2) total 0.32%

TABLE B-OTHER INSPECTIONS

	mber of Special Inspections						863
Nu	mber of Re-inspections						22
			TOTAL				865
	TABLE C-INFE	STATI	ON WI	TH V	ERMI	N	
(a)	Total number of examination nurses or other authorised per		ipils in s	school	ls by sc	hool	25,934
(b)	Total number of individual pu	ipils fo	ound to l	be infe	ested		134
(c)	Number of individual pupils notices were issued (Section 54					nsing	NIL
(d)	Number of individual pupils orders were issued (Section 54						NIL

PART II.— DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS DURING THE YEAR

Defect	Defeat as D'		Letter and	Periodic I	nspections	3	Special
Code No. (1)	Defect or Disea (2)	se	Entrants	Leavers	Others	Total	Inspec-
4	Skin	T	22 4	36	52 5	110 11	-1
5	Eyes—(a) Vision (b) Squint (c) Other	T O T O T	22 2 35 	266 — — — 3 18	282 3 40 	570 5 75 — 25 40	7 1 - -
6	Ears—(a) Hearing (b) Otitis Mo (c) Other	T	- 1 - 1 1	6 4 — 2 —	13 8 1 - 9 6	19 13 1 	4 1 - 2 -
7	Nose and Throat	T	39 32	5 9	42 133	86 174	5 8
8	Speech	T	10 7	3	28 11	41 19	2
9	Lymphatic Glands	T	3 57		2 42	5 101	21
10	Heart	T	5	3 11	5 15	13 26	11
11	Lungs	T	1 6	1	8 14	9 21	11
12	Developmental—: (a) Hernia (b) Other	T O T	2 2 5 8	$\frac{1}{\frac{22}{2}}$	3 1 43 23	6 3 70 33	
13	Orthopaedic :— (a) Posture (b) Feet (c) Other	T O T O T	9 7 37 8 4 1	13 5 8 1 6	19 4 68 10 21 8	41 16 113 19 31 9	al lata

T = Defects found to require treatment.O = Defects requiring observation only.

Defect	Defeat on Disease		1	Periodic Ir	spections		Special
No.	Defect or Disease (2)		Entrants	Leavers	Others	Total	Inspec- tions
14	Nervous System :— (a) Epilepsy (b) Other	T O T O	SPEC	IMA Y	6 1 1	6 -1 1	=
15	Psychological:— (a) Development (b) Stability	T O T O	10 22 	1 2 1	29 19 2 5	40 43 3 8	3 1 —
16	Abdomen	T	=		2	2 3	=
17	Other	T		nol_elle	5	5 3	1

T = Defects found to require treatment.

O = Defects requiring observation only.

PART III

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	19 2,012
Total	2,031
Number of pupils for whom spectacles were prescribed	610

Number of cases known

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

	to have been dealt with
Received operative treatment :-	
(a) for diseases of the ear	5
(b) for adenoids and chronic	
tonsilitis	282
(c) for other nose and throat	0
conditions	9 30
Total	326
Total number of pupils in schools who are known to have been provided with hearing aids.	
(a) in 1965	4
(b) in previous years	13

TABLE C-ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Pupils treated at clinics or outpatients departments	own to treated
patients departments	
(b) Pupils treated at school for postural defects	
Total 601	

TABLE D—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table C of Part I)

				Number of pupils known to have been treated
Ringworm	—(a) Sca (b) Bo		riin	 TA PTIME THE
Scabies		 ****		 6
Impetigo Other skin	diseases	 2 0.0		 299
Total	2,603	 220.1		 306

TABLE E-CHILD GUIDANCE TREATMENT

Pupils treated at Child Guidance clinics ... Number known to have been treated 281

TABLE F-SPEECH THERAPY

Pupils treated by speech therapists ... Number known to have been treated 225

TABLE G-OTHER TREATMENT GIVEN

	Number known to			
(a) Pupils with minor ailments	have been dealt with			
(b) Pupils who received convalescent treat- ment under School Health Service				
	NIL			
(c) Pupils who received B.C.G. vaccination	999			
(d) Other than (a), (b) and (c) above	NIL			
Total (a)-(d)	1,150			
ment under School Health Service arrangements	999 NIL			

SCHOOL DENTAL SERVICE

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR ENDED 31st DECEMBER, 1965.

1 ATTENDANCES & TREATMENT

		Ages 5 to 9	Ages 10 to 14	Ages 15	Total
	First Visit	1,071	1,167	and over	Total 2,610
	0.1	1,554	2,603	762	4,919
	Translation .	2,625	3,770	1,134	7,529
	Additional courses of treatment	2,023		1,134	1,529
	commenced	190	272	67	529
	Fillings in permanent teeth	694	3,118	1,197	5,009
	Fillings in deciduous teeth	1,391	98	1,177	1,489
	Permanent teeth filled	668	2,584	1,159	4,681
	Deciduous teeth filled	1,297	98	.,,	1,395
	Permanent teeth extracted	44	408	82	534
	Deciduous teeth extracted	762	262	NEW PARTY	1,024
	General anaesthetics	266	159	20	445
	Emergencies	202	108	20	330
	Number of Pupils X-rayed				166
	Prophylaxis				399
	Teeth otherwise conserved				214
	Number of teeth root filled				8
	Inlays				2
	Crowns				4
	Courses of treatment completed				2,562
_	ORTHODONTICS				
2	ORTHODONTICS	3			20
	Cases remaining from previous year				38
	New cases commenced during year				46
	Cases completed during year				29
	Cases discontinued during year				8
	No. of removable appliances fitted				57
	No. of fixed appliances fitted	ant.			NIL 51
	Pupils referred to Hospital Consult	ant			31
3	PROSTHETICS	5 to 9	10 to 14	15 and over	Total
	Pupils supplied with F.U. or F.L.				
	(first time)	_	-	_	-
	Pupils supplied with other den-				
	tures (first time)	_	2	_	2
	Number of dentures supplied	_	2	_	2
4		esthetics	administere	d by	20
	Dental Officers				26
5	INSPECTIONS				
2	(a) First inspection at school. N	umber o	f Pupils		13,158
	(b) First inspection at clinic. N	umber o	f Pupils		2 2 2 2
	Number of (a) $+$ (b) found to				
	Number of (a) $+$ (b) offered to				5,062
	(c) Pupils re-inspected at school cl				1,359
	Number of (c) found to require	e treatme	ent		707
				100000000000000000000000000000000000000	
6	SESSIONS				
	Sessions devoted to treatment				1,115.2
	Sessions devoted to inspection	m			105.5
	Sessions devoted to Dental Health	Educatio	on		4.5