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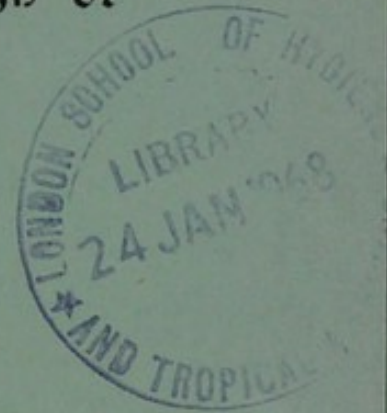


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City and County Borough of



Canterbury
1960



ANNUAL REPORT

OF THE
MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL
OFFICER

Including the Report of the
CHIEF PUBLIC HEALTH INSPECTOR
and the Report of the
Medical Director of the Child Guidance Clinic
for the year
1960

City and County Borough of



Cardiff

1960

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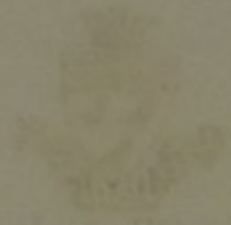
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City of New York
1961



COMMISSIONER OF HEALTH
JACOB V. FROST

1000 Broadway
New York 10018

ANNUAL REPORT

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PRINCIPAL SCHOOL MEDICAL

OFFICER

CHIEF PUBLIC HEALTH INSPECTOR

and the Report of the
Medical Director of the Child Guidance Clinic

for the year

1960

CITY OF CANTERBURY—1961

Mayor :

COUNCILLOR A. V. WILSON

Chairman—Health Committee :

COUNCILLOR H. M. KENNY

Chairman—Education Committee :

COUNCILLOR W. H. THOMAS

Chairman—Sanitary and Licensing Committee :

COUNCILLOR K. G. HILLS

Town Clerk and Welfare Officer :

J. BOYLE, LL.B.

Director of Education :

N. POLMEAR, M.A.

Medical Officer of Health and Principal School Medical Officer :

MALCOLM S. HARVEY, M.B., Ch.B., D.P.H.

Chief Public Health Inspector :

T. L. MARTIN, A.R.S.I., M.S.I.A.

COMMITTEE MEMBERSHIP, 1961

Mayor :

COUNCILLOR A. V. WILSON.

Health Committee :

Chairman : Councillor H. M. KENNY.

City Council Members : Alderman A. W. FOWLER, Alderman MRS. E. M. HEWS, C.B.E., Alderman W. S. BEAN, Councillor B. A. PORTER, Councillor MRS. E. M. ROTHERMELL, Councillor K. G. HILLS, Councillor H. H. RIMELL, Councillor W. THOMAS.

Co-opted or Representative Members : MISS M. SHEEHAN, Matron, Kent and Canterbury Hospital; DR. G. G. M. MILES, Local Medical Practitioner; MR. A. S. HAINES, Kent and Canterbury Executive Council; MR. E. D. PALMER, Canterbury Group Hospital Management Committee; MRS. M. A. SHARPE.

Mental Health Services Sub-Committee :

Chairman : Councillor H. M. KENNY.

City Council Members : Councillor B. A. PORTER, Councillor MRS. E. M. ROTHERMELL, Councillor K. G. HILLS.

Co-opted or Representative Member : DR. G. G. M. MILES.

Sanitary and Licensing Committee :

Chairman : Councillor K. G. HILLS.

City Council Members : Alderman H. P. DAWTON, Alderman A. W. FOWLER, Councillor C. A. L. ASH, Councillor P. BOTTING, Councillor E. E. KINGSMAN, Councillor E. G. SHERSBY, Councillor P. L. WOOD, Councillor H. H. RIMELL, Councillor H. J. BUCKWORTH.

Education Committee :

Chairman : Councillor W. H. THOMAS.

City Council Members : Alderman A. W. FOWLER, Alderman S. H. JENNINGS, O.B.E., Councillor T. E. CARLING, Councillor K. G. HILLS, Councillor H. M. KENNY, Councillor T. McCALLUM, Councillor REV. C. F. PARE, Councillor H. H. RIMELL, Councillor E. G. SHERSBY.

The Right Worshipful the Mayor, the Aldermen and
Councillors of the City and County of Canterbury

The Annual Report required of the Medical Officer of Health is presented for the year 1960. The public health situation one hundred years ago was disclosed by recent researches engendered by the Annual Clinical Meeting of the British Medical Association held in the City in April 1961, which proved to be the centenary of a similar meeting held in 1861, and it may be of interest to preface this report with some of the information gathered. The City did not yet have a Medical Officer of Health as such in 1861. Canterbury had been invited to make such an appointment in 1848. For some reason the letter was delivered to the Magistrates who passed it to the City Council who handed it on to the Guardians of the Poor. As the latter was the only body providing a domiciliary medical service with an appointed medical officer, Dr. T. Sankey Cooper, this move was quite reasonable (see footnote). It is not recorded that Dr. Cooper was appointed Medical Officer of Health, but he made the returns concerning infectious diseases and epidemics to the Board of Health until that body was dissolved. By 1861 Dr. George Rigden of the Canterbury Dispensary was the curator of the public health idea and it is from his discourse at the 1861 British Medical Association meeting that we cull the picture of the City's health a century ago.

Dr. Rigden was an associate of the great William Farr and was credited by him with the first report of diphtheria occurring in England. The population of the City in 1861 was 21,323 of whom an estimated 2,000 were soldiers. It had increased over the previous 10 years by 1,200 civilians and 1,700 military personnel. There had been recent epidemics of cholera and other diarrhoeas, and rheumatism was a very common complaint. The annual death rate was 22 per 1,000, half the male deaths occurring under age 18, and half the female deaths under 22 years.

The water supply came from hill springs piped to the City, from garden wells and from a Water Company which drew from the river. There were two main drains, one discharging into the river in the heart of the City and the other below the mill. In streets running parallel to the river the mortality from zymotic diseases (caused by infecting germs) was very much higher than in houses on higher ground, and bad drainage was a noticeable feature of the humbler dwellings. In the 617 houses in St. Peter's Street, St. Peter's Lane, Duck Lane, Pound Lane and Best Lane area, there was one death per annum to every four houses, while in the more salubrious Wincheap area it was only one in seven.

It is not surprising therefore that in 1865 Dr. T. Sankey Cooper, still Surgeon to the Guardians was made Mayor at a rebellious Mayor-making when the Mayor-elect was not elected, and spent his year of office pushing through the policy to sewer the City to a sewage treatment farm adjoining Sturry Road. In 1867 the Canterbury Water Company opened its Thanington Waterworks which treated water drawn from a deep well source and gave up the storage and distribution of river water.

The schools at that time, besides Kings School and Choir School, were the Blue Coat School in Stour Street (later absorbed by the Simon Langton's), The British School, an Academy at St. Dunstan's, and probably some small unrecorded Church Schools or Classes. The changes of a century have only added 50% to the City population because we escaped the industrial overlay, but it has seen the growth of educational institutions far beyond the City's needs, and in both Authority provision and public schools we are an educational centre of national as well as County importance with a university status in the making. In times when population magnitude appears to be the only virtue in shaping local government it is well to recognise that this City has developed and provided services in line with the social revolution of the century and has done it alone or jointly with the County whichever has best suited the service. There is no virtue in isolation but much in local responsibility and interest. One could go further on this line of thought and others will, but it is my duty to ask you to go further in the reading of this report and to consider Canterbury as it was in 1960.

Your obedient servant,
MALCOLM S. HARVEY.

14 DANE JOHN,
CANTERBURY.
1961.

FOOTNOTE—Minute of the Guardians 14:11:48—"That in the opinion of this Court (Canterbury Incorporation of Parishes for the Poor Law) Mr. Thos. Cooper, the Medical Officer of this Court, is fully competent to undertake and carry out the directions of the Board of Health dated 3rd Nov. instant and the Guardians feeling that the Nuisances Act of 1848 and the order of the Board of Health and the views of the Poor Law Board contemplate the appointment of the Medical Officer of the Guardians to carry the directions issued into effect they feel that the medical officer of the Court is entitled to the appointment."

ANNUAL REPORT, 1960

Local Circumstances, Social and Otherwise.

Further advance was made during 1960 in the development of the City's central shopping area. The clearance and rebuilding of the Military Road houses, a relic of hasty building in the 1850's to meet the needs of the dependents of an increasing military population, shows the development of a pleasant central residential area which includes many units suitable for elderly persons. The Scheme for the Wincheap to London Road ring road for heavy traffic promises some relief for the main street, but places a main highway between the London Road Estate and the City. Further development in this area to achieve a more self-sufficient schooling, shopping and social enclave may be the answer.

The development of more small factories and work places in the Broad Oak area has provided employment, in the main for careful rather than skilled labour and has drawn some female labour from the fields and catering places. We have a good local level of employment as the following figures show, but there is the common enough difficulty of placing those over 55 in jobs. Much interest is shown in the local placement of handicapped persons.

Statistically we do not show up well in youth work, but there is a lively and widening interest on the part of many sections of the community in providing for youth activity, which cannot be expressed in terms of youth leaders or Authority expenditure, but which just needs encouraging and nourishing. Two youth clubs, a number of active church groups, and uniformed youth organisations work for youth in the City and there are well distributed recreation grounds, public or associated with Authority schools, which seem to suit the needs if they are made available. The well equipped secondary modern and secondary grammar schools could provide for the development of old boys or old girls groups.

The Manager of the Ministry of Labour Employment Exchange has kindly supplied the following details on unemployment :

	1960	1959	1958
Male—Mid ...	99	124	107
End ...	160	160	237
Female—Mid ...	25	29	30
End ...	65	45	59

If the City had a seaboard it could be correctly characterised as protean. It is a busy and thriving centre for trade and commerce with more cars in the car parks on Wednesdays than on Saturdays and more people in the streets on Saturdays than on Wednesdays, and a strange ease of movement on Thursday afternoons and Sundays. Religious study and action are not confined to the Cathedral, and the spiritual life of that glorious edifice of praise draws strength from the community around it. Business and professional activity has always been of City status as an East Kent focal point. The Kent and Canterbury Hospital, long established, is ever more firmly placed as the main consultant, specialist, and in future the accident

centre, for this corner of England. The growth of the City as an educational centre goes on, and there is now to be added a teachers' training college, and eventually a University, to the full range of schools and places of further education not least of which is the College of Art and School of Architecture. Its place in the schedule of all international tourists who are part of the City's life, for they wax and wane but are never absent, is firmly established. But despite these many forms the City's population is small enough for the inhabitants to feel a personal concern with all that goes on, and for them to have a voice in local affairs and to use it. This is the joy of the smallest County Borough and the virtue in its independence. It will be a sad day if it loses its virtue to a boundary commission.

Population Statistics.

Population (mid-1960) 30,560.

Area : 4,810 acres.

Inhabited dwellings (on Rate Book at 31.3.61) 9,720, an increase of 170 in the year.

Rateable value : £546,918 (up £13,722).

Penny rate represents £2,223.

Live birth rate per thousand population : 15.3.

Death rate all causes per thousand population : 12.6.

Infant Mortality per thousand live births : 19.2.

Illegitimate live births per cent of total live births : 5.3%.

More detail concerning these statistics is given later in the report.

CURRENT TOPICS

IN THE FIELD OF THE HOME HEALTH SERVICES

(a) Mental Health Services.

WORLD MENTAL HEALTH YEAR

Nineteen sixty was designated as World Mental Health Year by the World Federation for Mental Health, an international organisation founded in 1948 "to promote among all people and nations the highest possible standard of mental health in its broadest biological, medical, educational and social aspects."

The concept of a World Mental Health Year was fully supported by the Ministry of Health and local authorities were asked to make special efforts to advance the cause of mental health and during the year a considerable amount of publicity was given to the subject, both locally and nationally, and the staff of the department were actively engaged in giving talks and showing films to interested voluntary organisations.

The focal point of the whole year however was Mental Health Week held from 11th-16th July when efforts to awaken public interest were intensified. There was a satisfactory response to most of the events which were well reported by the local press.

An Open Day at the Occupation Centre held on the Tuesday afternoon was a very great success. A rainy afternoon marred the proceedings, but it was possible to carry out some outside activity.

A meeting on the Wednesday afternoon on the subject of teenage delinquents held at the Child Guidance Clinic was well supported with some forty persons present, and could well have been a larger meeting if arrangements had been made to hold it elsewhere.

On the Thursday afternoon a meeting in the Frank Hooker School on "School Phobias" was very well supported by teachers and members of the Education Committee as well as by some others including members of the Bench.

A public meeting held in the Baptist Church Hall on the Thursday evening by the local branch of the Society for Parents of Mentally Handicapped Children was attended by over a hundred persons. It was marked by two excellent contributions from Mr. Ellis of the National Association and Dr. Ainslie from St. Augustine's Hospital. The question and answer session which followed the showing of a sound film strip was lively and went on for much longer than expected.

(It is interesting to note that the new Mental Health Act was implemented in Mental Health Year. Whether this was by accident or design is a matter for speculation.)

MENTAL ILLNESS.

Although legislation alters procedures and classifications it does not alter cases and the Mental Welfare Officers (formerly Duly Authorised Officers) carried out 39 investigations during the year concerning 27 cases. Of these cases 19 were admitted to St. Augustine's Hospital, 1 was admitted to Part III accommodation in Middlesex and 1 to a home in Maidstone registered under the National Assistance Act. Only on one occasion was certification necessary. Of the 6 cases remaining one was eventually admitted to St. Augustine's Hospital on an informal basis—returning to relatives at weekends—and in the others official action was either unnecessary or impossible.

During 1960 the arrangements for Health Visitors to supervise selected patients discharged from mental hospitals continued and 52 after-care visits were made. The Council's proposals under the Mental Health Act envisages the appointment of a full-time Social and Mental Welfare Officer to undertake after-care and many other duties imposed by the Act. Such an appointment has now been made.

MENTALLY SUB-NORMAL CASES.

Training.

The Junior Training Centre (formerly known as the Occupation Centre) is a comprehensive centre for a wide age range and provides social training, physical activity, handwork, needlework, housework, gardening and country dancing. During 1961 the Centre is to be developed to provide improved training facilities for adults in attendance. Workshop facilities are to be provided for males and a domestic science room for females. It is also intended to improve the accommodation for the younger pupils by the provision of a nursery.

When development is complete the Centre will be within a maximum capacity of 50 places and will require to be staffed accordingly. The Council has already authorised the appointment of a male instructor and an appointment will be made as soon as workshop facilities are available.

Arrangements for the training of adults whose needs cannot be met by the development of the present Centre can eventually be met by seeking accommodation in centres provided by the Kent County Council or, in certain cases, by voluntary agencies.

Routine medical and dental examination will be continued in the enlarged Centre and the school meals service will continue to provide dinners.

At the end of 1960 the following pupils were in attendance at the Centre :

	Male		Female		Total
	Under 16	Over 16	Under 16	Over 16	
Canterbury	5	2	2	3	12
Kent County Council	0	9	6	2	17
Total ..	5	11	8	5	29

The following table summarises the cases dealt with during the year :

Cases under Supervision (Excluding cases on licence) ..	47
Cases awaiting admission to hospitals ...	4
Cases admitted to hospitals during the year	5
Cases reported by the Local Education Authority ...	2
Total cases ascertained during the year	2
New cases placed under Supervision	2
Cases removed from Supervision	2
Deaths of cases under Supervision	2
Cases admitted to temporary care (Circular 5/52)	3

Day Centres and Social Clubs.

The Council so far has made no direct provision but has made arrangements with the British Red Cross Society to accept mental health after-care cases into their clubs for physically handicapped persons.

Administration.

The Mental Health Act, 1959, the first major statute since the Mental Treatment Act, 1930, was fully implemented on the 1st November, 1961. The Act repeals all previous legislation dealing with mental illness and mental deficiency and provides for compulsory admissions to hospitals on medical testimony only. The Act also provides for admissions to hospitals and mental nursing homes without resort to formal procedures.

The Board of Control, formerly responsible for exercising powers and duties relating to the "liberty of the individual" is dissolved and its function relating to the applications for discharge of patients is exercised by Mental Health Review Tribunals established in each Regional Hospital Board area.

The old terms mental defective, person of unsound mind, etc., are repealed and replaced by the following classifications:—

Mental illness—Arrested or incomplete development of mind, psychopathic disorder and any other disorder or disability of mind.

Severe subnormality—A state of arrested or incomplete development of mind which includes subnormality of intelligence and is of such a nature or degree that the patient is incapable of living an independent life or of guarding himself against serious exploitation, or will be so incapable when of an age to do so.

Subnormality—A state of arrested or incomplete development of mind (not amounting to severe subnormality) which includes subnormality of intelligence and is of a nature or degree which requires or is susceptible to medical treatment or other special care or training of the patient.

Psychopathic disorder—a persistent disorder or disability of mind (whether or not including subnormality of intelligence) which results in abnormally aggressive or seriously irresponsible conduct on the part of the patient, and requires or is susceptible to medical treatment.

(b) **Health Education.**

If this section appears ill-defined in its content this is quite in line with the policy followed, for Health Education is a process that goes on all the time whenever opportunity presents itself, and as an unconscious part of the work of every member of the staff. Information and points of view are fed to the staff and they in turn in their home visits, passing conversations, and personal responses to questions, educate in health matters.

The year opened with a half-day in-service training course on the Effective Use of Posters and Leaflets on Health Education. This was attended by the Health Visitors, Public Health Inspectors, Civil Defence Staff Officer, and Home and Road Safety Organiser. Such courses are provided by the Central Council for Health Education and are run by that organisation's staff in premises arranged locally are greatly appreciated and most valuable.

We have over the years gathered a useful library of film strips and flannelgraphs, and further additions were made to it during the year, particularly on the problems of old people, home safety, and bronchitis. Equipment was provided for the reproduction of sound strips, i.e. film strips with an accompanying long-playing record. This animates the impression of the film strip and gives a much greater impact. Such standard talks or conversations save the time of the

Health Visitor in preparation and leave her free to stimulate group discussion. If production of such sound strips is not continued it is worth considering the taping of talks to suit existing film strips with the production of our own records.

Cancer is not pressed, as a primary subject, but the Cancer Information Association record and slides have been used. Further opportunities were taken to speak to young people about smoking. The talks to 12/13 year old school children to explain B.C.G. vaccination have been found a useful occasion to raise the subject of bronchitis and smokers cough and to lead on to some frank talking on smoking. The Chest Physician campaigns amongst adult audiences and has had good publicity.

The Health Visitors give regular talks to girls in the secondary modern schools on general health and hygiene matters.

Mothercraft talks are given at the Ante-Natal Clinic in conjunction with the Relaxation Classes, and these prove to be popular.

Visits are made by parties of senior school girls to the Child Welfare Clinics and to the Ante-Natal Clinic.

The Medical Officer of Health joins in talks given to the pre-release class at Canterbury Prison, dealing with matters of health and healthy attitudes. He also contributed to youth discussion groups on the subject of personal relations between the sexes.

Several members of the staff, medical, nursing and lay gave talks to Church groups or other Societies on health topics, or took part in Any Questions Sessions. The practice of talking to people is an important part of a health worker's life and we are fortunate in having several members of the staff who are able communicators.

(c) **Chiropody.**

The Council was successful in organising a chiropody service for elderly or handicapped persons, and expectant and nursing mothers, which began at the end of the year. Recognising the value of simplicity in the process of recommendation, assessing charges, and organising payment, the following system has been adopted. The doctor or nurse who recommends gives an assessment form to the patient who sends it with detail of income to the Medical Officer of Health. The proportionate charge is calculated and an attendance card showing what must be paid on each attendance is given to present to the Chiropodist. The Chiropodist sees the patient at her surgery or on a domiciliary visit and claims the residue payable from the Health Department quarterly. A case can be treated five times before renewal of recommendation is required.

(d) **Liaison Arrangements.**

Cross representation between the three branches of the National Health Service is encouraged. The local general practitioners are

represented on the Health Committee, as are the Hospital Management Committee, and the Kent and Canterbury Executive Council. The Council is represented on the local Hospital Management Committees, the Executive Council, and on the local Nursing Committee and has medical representation on the Local Medical Committee, one Group Medical Committee, and the Maternity Liaison Committee.

Liaison arrangements in the clinical field cover domiciliary nurses' continuation treatment, including diabetics and tuberculous cases; nursing procedures preparatory to out-patient examinations; and midwives lying-in care of early discharges from the maternity unit when under pressure. Direct contact between the hospital ward sisters and the health visitors, district nurses, midwives or home help supervisor in taking over the needs of the discharged case is encouraged, and co-operation with the family doctor follows.

The Ante-Natal Clinic, Relaxation Classes and Mothercraft Talks held at the Central Clinic are open to mothers from the surrounding country area as well as to the City mothers in order that expectant mothers including those booked for hospital may enjoy the most convenient arrangement.

The number of sick children nursed at home by the domiciliary nursing service is small but it includes after-care nursing of discharged cases especially surgical cases. The Paediatric unit in Kent and Canterbury Hospital has a happy atmosphere, with few restrictions on visiting, good teaching arrangements for the children, and free liaison with the health visitors and the medical officers in the school and child welfare field.

The maternal and child welfare clinics in the City are attended by midwives in training and by student nurses, and paediatric house physicians who seek such experience sit in on clinics. The student nurses have the opportunity to go out on rounds with the health visitors and district nurses, and trainee health visitors are received into the department to gain experience of various aspects of the local health service.

The intention of Circular 3/59 which encouraged contact between the members of the Child Guidance team and medical and nursing staff of child welfare clinics was implemented by arranging monthly meetings between the health visitors and one of the clinic psychiatrists. It worked satisfactorily for a period until saturation point was reached on cases and problems and has been allowed to lapse into less frequent meetings. Medical contact is close, with the Child Guidance Clinic running as part of the School Health Service and the same medical staff concerned with schools and child welfare. Since the vacancy for a Psychiatric Social Worker at the clinic has now been filled an easier liaison between the Child Guidance team and the health visitors is anticipated.

OTHER HOME HEALTH SERVICES

Care of Mothers and Young Children.

Ante-Natal Clinics (including Post-Natal).

Wednesdays, 2.30 p.m., Central Clinic Stour Street : This clinic also deals with blood tests, poliomyelitis vaccination for expectant mothers, and routine chest X-rays.

Also Barracks M.I. Room (for wives of military personnel booked for the Military Families Hospital, Shorncliffe) on Monday afternoons.

Relaxation Classes, Post-Natal Exercises and Mothercraft Talks.

Wednesdays, 2.30 p.m., Central Clinic, Stour Street.

Priority Dental Care for expectant and nursing mothers and pre-school children, is provided in a dental surgery in the Central Clinic, Stour Street.

The Ante-Natal Clinic is staffed by the domiciliary midwives while the Relaxation and Mothercraft Clinic is run by the health visitors and physiotherapist. Pupil midwives attend each and also the child welfare clinics.

Ante-Natal Clinic Sessions (Central Clinic and Barracks)	76
Mothers in attendance on 1.1.60	16
First attendances during 1960	174
Blood tests carried out	120
Total attendances 1960	525
Post-Natal examinations	27
Mothers still in attendance 31.12.60	52
Relaxation Classes, etc.	
Mothers in attendance during 1960	72
Attendances made	488

Breast Feeding Cases. Health visitors helped 17 cases by test feeds and advice at special clinic interviews. Out of the 214 home delivered babies 145 were completely breast fed at completion of the midwife's care.

Maternity Outfits. The contents are as in the 1958 report. These are supplied free to cases booked for home delivery.

Child Welfare Centres.

1. Monday, 2 p.m.—London Road, May Hooker Memorial Clinic. Doctor and Health Visitors. (Doctor every other week). W.V.S. Voluntary workers assist.
2. Tuesday, 2 p.m.—Hollow Lane (Wincheap Primary School). Doctor and Health Visitor. (Doctor every other week). Voluntary workers assist with records.
3. Thursday, 2 p.m.—Central Clinic, Stour Street. Doctor and Health Visitors. Voluntary workers assist with records.

4. Friday, 2 p.m.—Welfare Hut, Military Road. Doctor and Health Visitor. (Doctor every other week). Voluntary workers assist with records.

5. Friday, 2 p.m.—Central Clinic, Stour Street. Health Visitors only. Voluntary workers assist with weighing.

At all sessions attended by a doctor protective inoculation or vaccination is offered against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis.

Out of the 2,701 attendances made by children over the age of 1 year, 1,292 were made by children between the ages of 2 and 5 years.

Attendances at Clinics.

Infant/Child Welfare Clinic	Age Group	Central Clinic	Wincheap Clinic	Northgate Clinic	London Road Clinic	TOTAL
Children on Clinic Register 31.12.59	Under 1	155	38	53	74	320
	1-5 yrs.	74	49	33	26	182
First attendance during 1960	Under 1	193	64	82	60	399
	1-5 yrs.	14	35	1	18	68
Total No. of Children remaining on Register on 31.12.60	Under 1	170	84	58	110	422
	1-5 yrs.	212	122	75	89	498
Total No. of Attendances made by children during 1960	Under 1	2,675	951	1,112	1,119	5,857
	1-5 yrs.	935	835	347	584	2,701
Doctors' Consultations	Under 1	489	196	285	201	1,171
	1-5 yrs.	199	58	95	122	474

Welfare Foods.

These are sold from the Central Clinic which is also the supply depot to the three other centres.

The amounts of Welfare Foods distributed was as follows :

	1960	1959
National Dried Milk	7,632	8,030
Orange Juice	16,062	18,240
Cod Liver Oil	1,629	1,611
Vitamin A and D	1,789	1,653

Other Nutrients and Supplements.

For the convenience of mothers in attendance at the child welfare clinics a variety of proprietary baby foods and supplements is held. Sale at slightly reduced cost is possible and supply is subject to the guidance of the doctor in attendance. Help is given to the occasional case of financial hardship and where necessary and permissible the free issue of milk foods can be arranged.

Premature Infants.

Some items of equipment for home care of premature babies are available on loan.

Premature births to Canterbury mothers : 24, born at home—4, in hospital—20. Premature stillbirths : 4, at home—2, in hospital—2. Prematurity rate of 60 per 1,000 total births. Previous rates were 73 (1959), 55 (1958), 76 (1957), 67 (1956).

Priority Dental Care.

Eighty three sessions were held in the Central Clinic for the purpose.

Numbers provided with dental care :

	Examined	Needing Treatment	Treated	Made Dentally Fit	Number of Attendances
Expectant and Nursing Mothers	86	85	85	59	338
Children under Five ..	86	84	87	74	121

Forms of dental treatment provided :

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures Provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	213	—	69	47	34	20	20	1	17	22*
Children Under Five	89	—	40	—	—	68	1	—	—	—

* Includes additional teeth added to 1 partial denture

Other Provisions.

A mothers' club runs successfully in conjunction with the London Road Child Welfare Clinic.

The W.V.S. have a Friday afternoon play centre while mothers shop.

Domiciliary Midwifery.

There is a home delivery rate of 45% of births to Canterbury mothers, 213 out of 466, but if one excludes the 25 delivered at the Military Families Hospitals it makes a home delivery rate of 48%.

The confinements in the City during the year totalled 928 and occurred as shown in the following tabulation:—

Births in Canterbury—At Home—

	Doctor and/or Midwife	...	211
	Elsewhere—		
	Hospital	... ..	717
	Total	...	<u>928</u>

Cases of Puerperal Pyrexia—

	Kent and Canterbury Hospital	...	8
	Domiciliary Practice	... ..	—

Cases of Ophthalmia Neonatorum —

Births to Canterbury Mothers in Kent and Canterbury Hospital 199

Births to Canterbury Mothers occurring outside Canterbury 54

Births to Canterbury Mothers in Domiciliary Practice ... 213

“ “ “ “ Privately — —

Total ... 466

The 9 stillbirths occurred as follows:—

In domiciliary practice 2

In Kent and Canterbury Hospital 7

Elsewhere outside the City —

Of the 54 births occurring outside Canterbury 25 occurred at St. Helier's Maternity Home, Tankerton (Canterbury Group H.M.C.) and 25 occurred at the Military Families Hospitals.

Health Visiting.

The staff is unchanged, being four health visitor/school nurses, a shared T.B. health visitor equivalent to $\frac{1}{3}$ full-time, and a part-time clinic nurse.

<i>Visits to Infants and Children—</i>	1959	1960
Under 1 year—First Visits	464	461
Other Visits	1,836	1,370
1-5 years—Total Visits	2,773	2,585
<i>Visits to Expectant Mothers—</i>		
First Visits	97	125
Other Visits	61	45
Child Life Protection Visits	28	31
Visits to Old Persons	320	324
Other Visits, including infectious diseases, T.B. and after care and mental health	1,028	317
The figures for the Tuberculosis Health Visiting are as follows :		
	1959	1960
No. of Clinic Sessions	142	101
No. of Mantoux Test Clinics	20	55
No. of Home Visits	381	551
No. of B.C.G. Clinics	Nil	17

Home Nursing

The Canterbury District Nursing Association has a staff of 5 nurses of whom 3 are Queen's Nursing Sisters. These nurses are centred on the Poor Priests' Hospital (Central Clinic) and work under the direction of the family doctor in attendance.

Types of Case	Medical Cases	Surgical Cases	Cases of T.B.	Others	Cases Nursed	Total Visits	Cases Over 65	Visits to Patients Over 65
The year 1955	565	109	31	2	707	17,383	351	11,444
" " 1956	569	89	19	—	677	17,341	309	11,596
" " 1957	561	120	5	4	690	19,295	294	13,492
" " 1958	569	82	11	2	664	19,187	283	13,366
" " 1959	588	101	6	2	697	14,445	336	12,937
" " 1960	539	80	2	2	623	17,756	372	12,369

Vaccination and Immunisation.

Protection is offered against smallpox, whooping cough, diphtheria, tetanus and poliomyelitis and there is also a scheme for B.C.G. vaccination (see below). The family doctors take part in the former scheme but not in B.C.G. programme. A combined vaccine for diphtheria, whooping cough and tetanus is offered.

SMALLPOX. 352 children under school age were vaccinated for the first time and 17 others, while 17 revaccinations were done to persons up to age 15.

DIPHTHERIA. A total of 426 children were immunised for the first time, 413 of them under school age. Reinforcing inoculations were given to only 240.

WHOOPING COUGH. 425 children received protection against this disease. In the majority of cases this protection was combined in a triple vaccine with that of diphtheria and tetanus.

TABLE VIII

			Under 1	1—4	5 to 15	Over 15	Total
Vaccination Against Smallpox	Primary Vaccination	Clinic	100	9	4	3	116
		Family Dr.	231	12	7	3	253
		Total	331	21	11	6	369
	Revaccination	Clinic	—	1	5	12	18
		Family Dr.	—	4	7	56	67
		Total	—	5	12	68	85
Diphtheria Immunisation	Primary Immunisation	Clinic	138	20	8	1	167
		Family Dr.	222	33	4	—	259
		Total	360	53	12	1	426
	Booster Dose	Clinic	—	12	99	—	111
		Family Dr.	—	25	104	—	129
		Total	—	37	203	—	240
Whooping Cough	No. of Cases Inoculated	360	60	5	—	425	
	Booster Dose	—	5	14	—	19	
Tetanus	No. of Cases Inoculated	334	41	18	1	394	
Canterbury Population Mid-1959			0 — 4	5 — 14		0 — 14	
			2,500	5,700		8,200	
Canterbury Births — 1960 ...			468				
Canterbury Births — 1959 ...			462				

POLIOMYELITIS VACCINATION—PROTECTION PROVIDED IN 1960.

	2nd Injections			3rd Injections		
	Clinic	G.P.s	Total	Clinic	G.P.s	Total
Persons born 1929-1932	532	540	1,072	212	187	399
Others	13	30	43	1	7	8
Children born 1943-60..	190	317	507	297	633	930
Young persons born 1933-42	39	62	101	369	381	750
Expectant Mothers ..	11	79	90	22	157	179
Doctors and Families ..	—	—	—	—	—	—
Ambulance Staff and Families	—	—	—	2	—	2
Hospital Staff	—	—	—	5	—	5
(Vaccine issued to Hospital, not included in figures—193).						
Totals ..			1,813			2,273
Previous year's totals..			8,821			7,312
Grand Total..			10,634			9,585

B.C.G. Vaccination.

This is provided for two groups of persons : (a) the contacts of known cases of tuberculosis and (b) school children and students of 13 years upwards. The scheme extends to the local public schools as well as to all Education Authority establishments.

Only three persons took advantage of the offer to older students.

Contacts—the following work of protecting contacts was carried out at the Chest Clinic.

The work done is summarised :—

Contacts—

No. skin tested	...	...	75
No. found negative	...	...	48
No. vaccinated with B.C.G.	...	...	38

Routine protection—

	13-year-olds	Older age group
No. skin tested
No. found negative
No. vaccinated

**B.C.G. VACCINATION OF SCHOOL CHILDREN,
1959-1960.**

Year	13-yr. School population	Test	No. Tested	% Possible	Test +ve	%	Test -ve	Vacd. B.C.G.
1955	478	Mantoux	396	86	68	17.2	328	325
1956	599	Mantoux	510	85	76	14.9	434	434
1957	618	Mantoux	481	78	48	10.0	433	433
1958	710	Heaf	639	90	56	8.7	583	583
1959	937	Heaf	712	85	81	11.4	631	631
1960	612	Heaf	511	83	37	7	474	474
Total 6 years	3,854		3,249	84.2	366	11.25	2,883	2,880

Ambulance Service.

The demands on this service which is operated by Canterbury and covers the City and contiguous County area continues to increase year by year and will undoubtedly increase still more as hospital facilities in the area are improved and the number of beds is increased. All requests for transport are carefully scrutinized and it is seldom found that the service is being abused. Relations with the hospitals in the area and the medical practitioners are good, although at times the hospital staff are surprised at our reluctance to accept requests for transport at short notice and without sufficient detail as to need. I have often been prompted to suggest that if ward sisters and housemen could each spend at least one day in the Ambulance Station they would appreciate the organisation required to remove, on average, over 130 patients per day (Monday to Friday) and at the same time attempt to maintain some semblance of a time schedule and accident cover.

Despite the increasing demands made on the service, amply illustrated in the table that follows, every endeavour has been made to staff the service economically. During the year however it became increasingly apparent that additional staff was required and the Council authorised the appointment of two additional driver/attendants for day time duties. This has greatly helped at peak periods and has provided limited help to the Station Officer in the Control Room. A high percentage of the over-time incurred is in covering staff absence or holidays, for the demand does not let up.

The vehicle complement remains at 6 ambulances and 3 sitting case cars. During 1960 the Kent County Council replaced 1 sitting case car and the City Council made a similar replacement. Canterbury's second sitting case car was replaced in February, 1961, thus all of the Canterbury vehicles have been replaced in under four years.

The Hospital Car Service and rail transport are used whenever possible to convey patients to destinations over 30 miles distant from Canterbury. If more Hospital Car Service drivers were available it would be of benefit to the service. We are occasionally successful in obtaining escorts from the voluntary organisations (B.R.C.S., St. J.A.B.) for rail journeys but here again if more volunteers were available it would be of benefit to the service.

The following table illustrates the increased demands on the service over 8 years.

	1952	1956	1960
Total Patients Carried	19,315	26,345	33,390
Outpatients	14,899	21,600	27,926
Admissions, Transfers, Accidents, etc.	4,416	4,745	5,712
Mileage	118,515	136,129	157,268

Thus in eight years the work of the Ambulance Service has increased as follows :—

Increases in annual load		% over	4 years to	4 years to
		8 years	1956	1960
	Total patients carried	73%	7,030 : 36%	7,045 : 26%
	Outpatients	87%	6,700 : 45%	6,326 : 29%
	Admissions, Transfers, Accidents, etc. ..	29%	329 : 7.5%	967 : 20%
	Mileage	33%	17,614 : 15%	21,139 : 16%

During the year the Hospital Car Service carried 86 patients for a total mileage of 5,826.

Domestic Health Service.

There was a ten per cent. increase in the number of cases helped. At the end of the year we had a staff of 29 home helps and one Organiser/Supervisor, with some clerical assistance.

The types of cases are : —

Home Help Service	1960	
	Full-time	Part-time
Maternity	3	17
Acute Illness	—	19
Chronic Illness or Infirmity	—	204
Presence of Young Children	1	4
Tuberculosis	—	—
Totals ...	4	244
Total cases	248	

There is a close integration of work between the home nursing midwifery services and the Domestic Help Service. The Foul Laundry Service mentioned in the report of the Chief Public Health Inspector is also linked. The introduction of disposable incontinent pads and drawsheets by the District Nursing Association has helped to reduce the foul linen problem. The services of home helps have been used in difficult cases of problem families, or families in difficulties. We have not defined a separate scheme for these cases, but have certain recognized members of the staff who show a capacity for guiding and supporting. In these cases there is close liaison with the health visitor. The Geriatric service, centred on Nunnery Fields Hospital has a close liaison with the Domestic Help organiser and with the District Nurses on cases discharged home or awaiting admission. Periodic checks are made with the family doctor on the continuing need for the help given and the organiser supervises the staff by a regular surveillance of cases.

Ministry of Health Circular 78/50. Co-ordinating Committee.

Formal meetings of this committee were abandoned during the year and instead the need is met by purposeful case conferences which have served the purpose more fully, and which are called on a particular case or group of cases. We held 2 such conferences in 1960.

Voluntary Organisations.

The Health Department has frequent contact with the following organisations.

Alford Aid Society (also acting for Invalid Children's Aid Association, Save the Children Fund, The Services Aid Associations, and the Council of Social Service).

The Care Committee (Clinic for Diseases of the Chest).

Old People's Welfare Committee.

St. John Ambulance Brigade.

British Red Cross Society.

Women's Voluntary Service (who give great help at our Child Welfare Clinics).
 East Kent and Canterbury Marriage Guidance Council.
 The Canterbury Society for Mentally Handicapped Children.
 The Family Planning Association.
 The Diocesan Moral Welfare Association.
 The Southwark Catholic Rescue Society
 and other Community Service organisations and municipal charities.

Civil Defence.

This voluntary force who represent the corner of clear vision in our scotomatous outlook and, to quote Milton on his blindness, "who also serve who only stand and wait," has an active Ambulance and First Aid Section, ably led by Mr. Wead of St. John Ambulance Brigade, Canterbury, and under the efficient instruction of Mr. A. Poole, Instructor, a member of our Joint Ambulance Service. Their enthusiasm for training and competition work deserves our warmest gratitude. The National Hospital Service Reserve is also well supported by members of St. John Ambulance Brigade, Nursing and Ambulance Divisions and by the British Red Cross Society, and mutual aid is given in training by these two aides of Civil Defence.

National Assistance Act Section 47.

No orders sought during 1960.

Accommodation for Old People.

The accommodation for old persons in the City is provided in :

- (a) Charity almshouses, 7 groups (3 with wardens and 53 places, 4 unwardened with 30 places).
- (b) Old people's bungalows, 104 units.
- (c) Old persons' flats, 72 units.
- (d) Old people's units with wardens, Flats 44, Bungalows 38.
- (e) Homes for elderly and infirm :—
 - 1. Private—one, 4 places.
 - 2. Local Authority—two, 50 places (30 Female, 20 Male).

Total places 313.

The total accommodation for old persons is therefore 10.2 per 1,000 population, of which 6.17 per 1,000 are in supervised units and 4.05 per 1,000 in unsupervised units. Out of the 189 supervised units, 132 are local authority places, 53 charity places and 4 are private.

Blind Persons.

No. of cases notified on Form B.D.8 during 1960 ... 10

	Cataract	Glaucoma	Retrolental Fibroplasia	Others
No Treatment ...	3	3	—	2
Treatment needed ...	1*	1	—	—
Treated on follow-up	—	1	—	—

* General Condition did not permit operative treatment

Nursing Homes.

There is still only one nursing home in the City. This has accommodation for 6 medical cases.

Homes for the Handicapped.

The National Institute for the Deaf has a registered home in Roper House, Canterbury. This provides for 30 persons. Some of those looked after have additional handicaps. The home is under the close and regular supervision of a general medical practitioner.

Infectious Disease Tables.

Cases Notified during 1960.

Disease	Age Group										Quarterly Incidence				
	Under 1	1-2	2-3	3-4	4-5	5-9	10-14	15-24	25+	Total	1st	2nd	3rd	4th	Total
Casles ...	—	6	6	10	6	71	—	1	—	100	1	4	2	93	100
Scarlet Fever	—	1	3	5	2	17	1	—	—	29	16	10	—	3	29
Whooping Cough	1	—	—	3	—	5	—	—	—	9	6	2	1	—	9
Dysentery ...	—	—	—	—	—	1	15	—	—	16	2	1	—	13	16
Dysipelas ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

Other Infectious Diseases Notified.

Diseases	Age Group							Quarterly Incidence				
	Under 5 yrs.	5-14	15-44	45-64	65+	Total	1st	2nd	3rd	4th	Total	
Acute Pneumonia	—	—	—	2	1	3	1	—	1	1	3	
Acute Encephalitis (infective)	—	1	—	—	—	1	—	1	—	—	1	
	Under 5 yrs.	5-14	15-24	25-44	45-64	65+	Total	1st	2nd	3rd	4th	Total
Tuberculosis Respiratory	—	1	1	8	5	4	19	6	3	4	6	19
Other forms ...	1	—	1	1	—	—	3	—	—	2	1	3

Puerperal Pyrexia.

8 cases were notified and the following causes were reported :—

- 1 Reaction to intravenous iron.
- 2 Mastitis.
- 1 Infected haematoma vaginae.
- 1 B. Coli) low grade infections of genital tract
- 1 B. Proteus)
- 1 Wound infection, hysterectomy in toxæmia
- 1 Cause not found.

Mass Radiography Unit Survey.

In October 1960 a mobile unit visited the City, first touring the housing estates and finally stationing on the Watling Street car park. Forty-five per cent of the 3,883 who attended did so on the visits to housing estates spread over nine days; the other 55% attending at the central car park during the four days stationed there. While the numbers show greater response centrally, of those attending in the housing estate survey 27% attended for the first time against only 18% at the central location. Out of the 45% of the total examined who were gathered in on tour, 1 active case and 14 inactive cases of tuberculosis were identified; while out of the other 55% of the total who were examined at the central car park no active cases, 2 inactive cases of tuberculosis, and 2 cases of other lung conditions were identified. There is thus justification for both methods of approach.

No. of Cases on T.B. Register 31.12.1960.

Pulmonary		Non-Pulmonary	
M.	F.	M.	F.
118	69	16	10

Annual Occurrence of Respiratory Tuberculosis over seven years.

	1954	1955	1956	1957	1958	1959	1960
Male ...	13	13	10	5	8	6	12
Female ...	9	6	4	4	1	8	7
	22	19	14	9	9	14	19

Haine Isolation Hospital, Ramsgate, admitted 18 of the 29 notified cases of Scarlet Fever.

Venereal Diseases.

Special Clinics are provided in East Kent at the following hospitals. The V.D. almoner service is run from the clinics under the direction of the Venereologist. An increase in cases of Gonorrhoea was noted.

Canterbury (Kent and Canterbury Hospital)—

Male—Tuesday, 3-4 p.m.

Female—Tuesdays, 2-3 p.m.

Dover (Royal Victoria Hospital)—
 Male—Monday, 4.30-5 p.m.
 Wednesday, 4.30-5 p.m.
 Female—Monday, 4-4.30 p.m.
 Wednesday, 4.4.30 p.m.
 Margate (General Hospital)—
 Male—Friday, 11 a.m.-12 noon.
 Female—Friday, 10-11 a.m.

Laboratory Services.

Public Health Laboratory—Preston Hall, Maidstone.
 Public Analytical Laboratory—South Eastern Laboratory, 33
 New Dover Road, Canterbury.
 Pathological Laboratory Service—Kent and Canterbury Hos-
 pital Laboratory and Preston Hall, Maidstone.

VITAL AND MORBID STATISTICS.

Population : Mid-1960—30,560.

Live Births :	Male	244	Illegitimate : Male	11
	Female	224	Female	14
	Total	468	Total	25

Live birth rate per 1,000 population : 15.3.

Corrected (1.02) for comparison : 15.6. England and Wales : 17.1.

Stillbirths :	Male	3	Illegitimate : Male	—
	Female	6	Female	1
	Total	9	Total	1

Stillbirth rate per 1,000 live and stillbirths : 19.2. England and
 Wales : 19.8.

Total live and stillbirths : 477.

Infant Deaths :	Male	5	Illegitimate : Male	—
	Female	3	Female	—
	Total	8	Total	—

Infant Mortality per 1,000 live births (total) : 17.1. England and
 Wales : 21.9.

Infant Mortality per 1,000 live births (legitimate) : 18.0.

Infant Mortality per 1,000 live births (illegitimate) : —

Infant deaths under 4 weeks : Male 2

Female 2

Total 4

Under 1 week : Male 2

Female 2

Total 4

Neonatal Mortality Rate per 1,000 live births (total) : 8.5.

Illegitimate live births per cent of total live births : 5.3.

Maternal Deaths (including abortions) : Nil.

Maternal Mortality per 1,000 live and stillbirths : Nil.

Deaths : Male 176

Female 211

Total 387

Death rate (all causes) per 1,000 population : 12.6.

Corrected (0.92) for comparison : 11.59. England and Wales :
 11.5.

Infant Deaths—total 8.

	Age	Sex	Cause
Neonatal	1 hour	M	Atelectasis, prematurity
	18 hours	F	— prematurity
	1 day	M	Anencephaly
	3 days	F	Maternal toxæmia, prematurity
Over 1 month	2 months	M	Acute tracheo bronchitis
	"	M	"
	"	F	Broncho pneumonia, severe congenital abnormalities
	7 months	M	Fulminating broncho pneumonia

All Deaths by Age Groups.

	0-1	1-15	15-25	25-45	45-65	65-80	80-90	90+	Total
Male	5	2	—	6	46	77	33	7	176
Female	3	2	1	2	25	89	71	18	211
TOTAL	8	4	1	8	71	166	104	25	387

No.	Causes of Death	1960	1959
1	Tuberculosis of Respiratory System ..	—	—
2	Tuberculosis, Other Forms ...	—	—
3	Syphilitic Diseases ...	—	—
4-9	Other infective and parasitic diseases ...	2	1
10	Malignant Neoplasm, stomach ...	8	6
11	Malignant Neoplasm, lung and bronchus...	12	15
12	Malignant Neoplasm, breast ...	7	5
13	Malignant Neoplasm, uterus ...	3	3
14	Other malignant and lymphatic neoplasms	38	33
15	Leukaemia and Aleukaemia ...	—	4
16	Diabetes ...	4	2
17	Vascular Lesions of Nervous System ...	65	61
18	Coronary Disease, Angina Pectoris ...	66	54
19	Hypertension with Heart Disease ...	13	9
20-21	Other Heart and Circulatory Diseases ...	85	71
22	Influenza ...	1	6
23	Pneumonia ...	8	14
24	Bronchitis ...	16	16
25	Other Diseases of Respiratory System ...	4	3
26	Ulcer of stomach and duodenum ...	1	2
27	Gastritis, Enteritis and Diarrhoea ...	4	—
28	Nephritis and Nephrosis ...	5	3
29	Hyperplasia of Prostate ...	3	1
30	Pregnancy, Childbirth and Abortion ...	—	—
31	Congenital Malformation ...	2	2
32	Other defined and ill defined diseases ...	26	21
33	Motor Vehicle accidents ...	5	3
34	All other accidents ...	5	10
35-36	Suicide, Homicide and War ...	4	7
	TOTAL ...	387	352

REPORT OF THE PUBLIC HEALTH INSPECTOR FOR THE YEAR 1960

Public Health Department,
Canterbury.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting the annual report on the sanitary inspection services carried out in 1960.

The work has mainly followed the pattern of the previous year with meat inspection, housing and food premises claiming most of our time.

The department has suffered from staff shortage throughout the year. In spite of this it has, by dint of many hours of overtime, been possible to maintain at the Abattoir 100% meat inspection at the time of slaughter. Meat inspection is one of the most important public health functions still retained by the local authority. In view of criticism in the national press and elsewhere regarding the standard of meat inspection in some parts of the country, I feel justly proud of our achievements in this sphere and I can confidently say that we are fulfilling efficiently our duties in this branch of public health administration. Perhaps it is not always realised that your Inspectors have had to work late into the evenings, on scores of evenings until 10 p.m. and on a few occasions bordering on midnight and I consider that the time has come, either to employ more Inspectors, or to restrict the hours of slaughter.

It is evident in the report on the various sections of our work that some of these have not had the attention that they should have had. In some of the routine inspections which have been made it has been noticed that there has been a deterioration in standard. Many traders will maintain a reasonable standard once they are put on the right lines. With others the standard attained is dependent on the frequency of inspection.

I should like to record my indebtedness to the Chairman and Members of the Sanitary and Licensing Committee and Housing Committee for the encouragement and sympathetic consideration they have given to the suggestions put before them, and my thanks are due to the Medical Officer of Health and Inspector colleagues, and the staff of the Department for their help and co-operation during the year.

I am,

Your obedient servant,

T. L. MARTIN,

Chief Public Health Inspector.

General Statistics.

Complaints received and investigated 571

	Houses	Food Premises	Factories
Number of visits	1440	477	14
Defects remedied	266	41	—
Informal Notices sent	66	19	—
Formal Notices sent	15	—	—

Prosecutions :—

For disturbing contents of dustbins. Fined 10s.

For selling milk containing added water.

Dairyman fined £100 and £9 9s. 0d. costs.

Housing Acts.

Number of new houses/units erected in 1960 :

1. By the Council	67
2. By private enterprise	115
	182
Houses demolished	37
	145
	Net increase ...

Number of houses in respect of which—

(a) Demolition orders were made	3
(b) Closing orders were made	16
(c) Undertakings not to use them for human habitation were accepted	—
(c) Closing orders were determined after houses had been made fit	3
Houses repaired as a result of informal action	64
Houses repaired after the service of Statutory Notice under Public Health Act	10
Houses repaired after service of formal notice under Housing Act—	
(a) by owners	—
(b) by Council in default of owner	—

No routine inspection of houses apart from that done on clearance areas was done during the year.

There is very little evidence of overcrowding according to the Housing Act Standard.

Thirty-two Notices have been served to improved conditions in houses let in lodgings. This has been done to remove the "spring board" for priority in re-housing. The sub-tenants have been re-housed and the persons controlling the houses can now choose between having no sub-tenants, or doing the work to make the houses fit for habitation. In the latter case the future tenants will have no claim for re-housing on the grounds of bad housing conditions.

Improvement Grants

The applications for Improvement Grants are investigated and the houses inspected to ascertain state of repairs. 55 houses were inspected and in 40 cases the owners were asked to carry out repairs.

Unfit Housing Programme

The list of unfit houses prepared in 1955 comprised 632 houses and at the end of 1960 347 houses had been dealt with. During this period 67 unfit houses not included in the list were also closed for human habitation or demolished.

In 1960 the Minister confirmed the clearance area procedure in respect of 55 houses represented the previous year. The owners of 17 houses appealed on the grounds that the houses were not unfit, and only in one case involving a public house with living accommodation was the appeal upheld by the Minister. In the same area the Minister held that a house with 4 rooms used for living purposes which also had a room used as a shop and some outbuildings used in connection with the business, was not a house. In this instance the owner had not lodged an appeal.

No clearance areas were represented in 1960. Closing order procedure was adopted for 15 individual unfit houses.

Rent Act

	1960	Total to date
No. of applications for certificates	6	140
No. of decisions not to issue certificates	—	1
No. of decisions to issue certificates	6	139
(a) in respect of some but not all defects	5	104
(b) in respect of all defects	1	35
No. of undertakings given by landlords	5	36
No. of undertakings refused by local authority	—	—
No. of disrepair certificates issued	—	94
No. of applications by landlords to local authority for cancellation of certificates	—	42
Objections by tenants to cancellation of certificates	—	14
Decisions by local authority to cancel in spite of tenant's objections	—	—
Certificates cancelled by local authority	—	28
No. of certificates invalid owing to tenant leaving or house demolished	—	40
No. of certificates in operation at end of year	—	26

During the inspections it was found that 57 of the 139 applicants for certificates of disrepair were living in houses which had been included in the Council's list of unfit houses.

Water Supply

The Canterbury and District Water Company own the water undertaking and maintain a very satisfactory supply. For the first time it is possible to report that every house in the City is supplied with town's water.

The public supply is collected from deep wells in the chalk and it receives a minimal dose of chlorine, more to keep the apparatus in first-class working condition for an emergency than because the supply normally requires it.

The total hardness is 278 parts per million of which 240 is temporary (i.e. deposited on boiling).

Five samples of water from houses in various part of the area were sent for bacteriological examination and chemical analysis and all were of excellent quality and the Public Health Laboratory reported that B. Coli presumptive were absent in 100 c.c.s.

A complaint was investigated concerning discoloured water to a building intermittently used only during the daytime. An excessive amount of iron in the form of rust was suspected and samples obtained confirmed this. The Public Health Laboratory reported that B. Coli were absent in 100 c.c.s. but chemical analysis revealed 5.4 parts per million of iron which rendered the water unpalatable and the occupier was advised to have the iron service pipe renewed.

There is no plumbo solvent action in the town's water and the fluorides are insignificant.

Three samples of water were obtained from swimming baths at schools and in each case the bath water was free from B. Coli presumptive in 100 c.c.s.—a most satisfactory state of affairs.

Inspection of Food

The meat from the Council-owned Abattoir is distributed over most of Kent and into adjoining counties.

Although the Inspectors have not been able to give as much attention as I should like to some aspects of our work, it is with some satisfaction that I am able to report again that every carcase and its offal was inspected before it left the Abattoir. The Government's recommendations on the standards for meat inspection are adhered to and furthermore, every animal is inspected at the time of slaughter.

It will be noticed from the following table that there was an increase over the previous year in the number of all types of animals killed, with the exception of sheep of which an abnormally high number were slaughtered in 1959 owing to very dry weather.

	Cattle Exclud- ing Cows	Cows	Calves	Sheep	Pigs
Number killed	5,681	675	1,459	17,148	17,373
Number inspected	5,681	675	1,459	17,148	17,373
(Figures for 1958)	4,570	720	1,317	11,352	20,272
(Figures for 1959)	2,826	505	956	18,664	17,117
All diseases except T.B. and Cysticercus bovis					
Whole carcasses condemned	2	9	30	85	68
Carcasses of which some part or organ was condemned	2,577	272	18	1,212	4,045
Percentage of the number inspected affected with diseases other than T.B. or Cysticercus bovis ...	45.4	41.5	3.3	7.5	23.6
Tuberculosis only					
Whole carcasses condemned	5	3	—	—	—
Carcasses of which some part or organ was condemned	148	29	—	—	530
Percentage number inspect- ed affected with T.B. ...	2.7	4.7	—	—	3.5
Cysticercus bovis					
Whole carcasses condemned	—	—	—	—	—
Carcasses of which some part or organ was condemned	48	2	—	—	—
Percentage of the number inspected affected with Cysticercus bovis ...	0.9	0.3	—	—	—

CARCASES FOUND TO BE UNFIT.

B=bovine, P=pigs, S=sheep, C=calves).

	B	P	S	C
Tuberculosis	8	—	—	—
Septicaemia/Pyaemia	—	12	2	7
Mastitis	—	—	1	—
Septic Peritonitis	—	9	—	—
Septic Pleurisy	—	3	2	—
Septic Pneumonia	—	6	—	—
Septic Metritis	1	—	—	—
Pyelonephritis	—	1	—	—
Oedema and Emaciation	4	17	45	5
Joint—Ill	—	—	—	8
Immaturity	—	2	—	7
Moribund	—	2	5	1
Erysipelas	—	5	—	—
Uraemia	—	1	1	—
Decomposition	—	—	1	—
Jaundice	—	4	—	—
Johnes Disease	1	—	—	—
Pyrexia, Oedema and Emaciation	1	3	4	—
Pleurisy/Peritonitis/Pneumonia/ Pericarditis	2	3	1	1
Tuberculous Emaciation, Nodular Necrosis and Oedema	1	—	—	—
Malignant Tumours	—	—	1	—
Distomatosis	—	—	2	—
Injury with complications	—	2	19	1

Parts of carcasses and offal found to be unfit on account of :—

Tuberculosis	...	...	...	...	...	12,491 lbs.
Distomatosis	...	...	...	...	...	29,396 lbs.
Cirrhosis	...	...	...	...	...	2,743 lbs.
Abscesses	...	...	...	...	...	3,666 lbs.
Pneumonia, pleurisy, pericarditis, peritonitis	...	...	...	...	...	3,628 lbs.
Actinomycosis	...	...	...	...	...	2,972 lbs.
Cysts and Parasites	...	...	...	...	...	6,410 lbs.
Cysticercus bovis	...	...	...	...	...	939 lbs.
Miscellaneous conditions	...	...	...	...	...	12,491 lbs.

Weight of carcasses condemned 74,736 lbs.

Total weight of condemnations 23,896 lbs.

98,632 lbs.

A detailed examination of every bovine carcass was made to discover the presence of cysticercus bovis, which is the larval state of the tapeworm *Taenia saginata* found in man. 50 localised infestations (0.8% of animals slaughtered) were found and an analysis of these cases is as follows :—

	Cows	Heifers	Steer	Bulls
Site of lesion:—				
External Masseter	1	4	17	—
Internal Masseter	—	1	3	—
Heart	1	5	16	—
External Masseter and Heart	—	—	2	—

PERCENTAGE OF ANIMALS AFFECTED BY TUBERCULOSIS.

	Cattle excluding Cows	Cows	Pigs
1960	2.7	4.7	3.5
1959	3.8	15.6	3.6
1958	7.2	26.5	3.6

The percentages regarding tuberculosis relate to all bovines entering the Abattoir and include 101 reactors to the tuberculin test discovered by Ministry veterinary surgeons on farms. Another factor which has a bearing is the considerable number of cattle of Irish origin which were slaughtered. The incidence of tuberculosis in these is higher than in home-produced cattle and if the reactors and Irish cattle were not included in the analysis, the percentage of tuberculosis would show a very marked decrease compared with 1958. The benefit of the tuberculosis eradication scheme is now apparent in cattle entering the Abattoir, but the figures for pigs remain unchanged.

The meat and other food found to be unsound on inspection in food shops amounted to 10,925 lbs.

Meat	...	...	...	...	1,206 lbs.
Canned food	...	...	...	...	9,407 lbs.
Fish	...	...	...	...	312 lbs.

The unsound meat from the Abattoir, with the exception of pork which is converted into fertiliser, is sold to a pig keeper, who has undertaken to boil the meat before feeding it to his pigs. This pig farm is not in the City area, but the local authority concerned is aware of the arrangements. The unsound tinned food and fish is buried on the controlled refuse tip.

Food Hygiene

Types of food premises in the area :—

						Inspections
Restaurants and cafes	...	...	...	90		129
Butchers	...	...	...	31		69
Bakers and confectioners	...	...	...	20		50
Grocers	...	...	...	87		88
Fried fish shops	...	...	...	7		19
Wet fish shops	...	...	...	8		21
Sweet shops	...	...	...	21		4
Public houses	...	...	...	81		3
Greengrocers	...	...	...	23		18
Other food premises	...	...	...	15		7

Number of registered premises :—

Dairies	...	...	...	5	28
Premises from which bottled milk is sold				29	32
For the manufacture and sale of ice-cream				3	32
For the preparation of sausages or processed food	...	...	...	38	39

Steady progress is being made concerning improvements to the many food shops, but progress has been rather slow on account of staff shortage and the time which has to be spent on meat inspection and housing work.

It has been noticed that some of the private grocers have got together to make bulk purchases, presumably so as to obtain lower prices. Unless the shop keepers maintain strict supervision, bulk buying may lead to overstocking and if this occurs and results in congested storage rooms, proper stock rotation cannot be carried out. As is well known the selling of wholesome food is dependent on quick turnover of stock. Prolonged storage causes deterioration and spoilage from insect pests. Such goods obviously offend the purchaser and may lead to legal proceedings.

Nine complaints were received regarding irregularities in food and in each case the person responsible was cautioned.

- (a) Loaf containing a brass screw.
- (b) Mouldy sausages.
- (c) Piece of wire in cake.
- (d) Traces of oil in loaf.
- (e) Margarine showing colour from printing on wrapper.
- (f) Cake mixture infested with *Ephistia*.
- (g) Fudge containing piece of flat metal.
- (h) Cheese containing head of bolt.
- (i) Milk bottle with rust coloured stains on interior.

Food Supplies

Sampling.

The late Mr. C. Harcourt Wordsworth, B.Sc., F.R.I.C., was our Public Analyst throughout the year.

Eighty-four samples and twenty-eight informal samples were submitted for chemical analysis.

Article	No. of samples	
	Formal	Informal
Milk	36	—
Channel Island Milk	8	—
Tinned Cream	—	3
Whisky	9	—
British Wines	4	—
Mineral waters	—	7
Jam	3	—
Soluble coffee	8	—
Ice Cream	—	3
Lollies	—	7
Butter	5	—
Glace Cherries	3	—
Ground Almonds	3	—
Sweets	—	5
Full cream milk chocolate	1	—
Sausage/meat	1	1
Beef hamburger	1	—
Margarine	—	1
Mincemeat	1	—
Herring roes	—	1

All except seven were satisfactory and these were :—

Soluble coffee. Two packers did not label the tins to indicate that the soluble coffee was composed of the dried extracts or soluble solids of coffee. The firms concerned were written to and arrangements were made for the labels to be amended.

Milk. Four churns in a consignment from a dairyman to a distributor contained respectively 41%, 39%, 36% and 42% added water. Dairyman fined £100 and £9 9s. 0d. costs.

Beef sausage meat. Reputed to contain 75% meat. Public Analyst reported 70% meat. The manufacturer's analyst certified 73% meat. Warning letter sent.

Public Health (Preservative in Food) Regulations.

All the samples except whisky in the preceding table were examined under the above Regulations and in no case was there any contravention.

Milk

There are nine milk retailers in the City and 29 general shops are registered for the sale of sterilised and/or pasteurised milk.

All the milk sold by retail, with the exception of a few pints of tuberculin tested sold by a producer/retailer, is either pasteurised or sterilised. The untreated milk comes from an adjoining district, and as the local authority concerned carries out biological sampling, it is not considered necessary for the Canterbury authority to carry out any testing for the presence of tubercle bacilli and *Brucella abortus*.

Three firms are licensed by the City Council to pasteurise milk. Two have H.T.S.T. plants and one a holder type of plant. 108 samples were obtained to check (a) the pasteurising process (Phosphatase test) and (b) the keeping quality of the milk at the point of delivery to the retailer (methylene blue test). All were satisfactory.

Milk in Schools Scheme.

All milk sent to schools under the control of the Education Committee has been pasteurised and the samples obtained satisfied the tests.

Milk (Special Designation) Regulations.

The following licences were granted by the City Council under the above :—

To pasteurise milk	...	...	...	3
To deal in pasteurised milk	...	...	...	20
To deal in sterilised milk	...	...	...	21
To bottle tuberculin tested milk	...	...	...	2
To deal in tuberculin tested milk	...	...	...	3

Ice Cream

There are three premises registered for the manufacture and sale of ice cream, two for the storage of ice cream and 107 for the sale of ice cream. Of them, 84 sell nothing but the pre-packed variety.

Five applications were received in 1960 for the registration of premises for the sale of ice cream.

43 samples submitted to the methylene blue test for bacterial cleanliness were classified as follows :—

Grade			Figures for comparison			
			1960	1959	1958	1957
1	...	16	28	27	18	
2	...	12	6	1	3	
3	...	9	5	1	—	
4	...	5	6	2	—	

(The remaining sample was a chocolate flavoured ice cream which cannot be examined by the methylene blue test).

The results appear to show a deterioration on the previous year, but this is not the case. More selective sampling was done, in fact 18 were from the plant operated by a local manufacturer and 11 of the samples considered to be unsatisfactory (i.e. Grades 3 and 4) came from this plant. The operator does not use any of the proprietary ice cream mixes and serious attempts are being made to isolate the cause of the unsatisfactory samples.

Health Education

The Inspectors have always realised the importance of health education and have done whatever has been possible during visits to food premises and in talks to groups of town's people.

During the early summer the Department was fortunate in having the use of the foyer in a local cinema to stage an exhibition of household insect pests and steps recommended to deal with these problems. There is evidence to show that the exhibition was well received and served a very useful purpose in reviving some of the public interest aroused by the much more ambitious "fly week" held in 1958. It is obvious that the public is now not so apathetic about insect nuisance and is more insistent that control should be carried out by employing insecticides and hygienic measures. Incidentally, it should be mentioned that these steps are complementary if satisfactory results are to be obtained.

As in previous year the Department assisted in a course of lectures at the Canterbury Technical College organised for a particular section of the food industry. On this occasion the lectures were for persons engaged in the licensed victuallers trade. The course was well attended and it was pleasing to the Inspectors to see that the trade organisation and the students attached importance to the public health side of the course.

Shops Act, 1950

The department is responsible for the following matters under the Act : ventilation, heating, sanitary conveniences, lighting, washing facilities and facilities for taking meals.

Owing to staff shortage it was not possible to continue the routine inspection except on a very small scale.

It is now the practise of the department to see all plans of new shops. By doing this it is hoped that any constructional deficiencies under the Act will be put right before building work is

started. The designers of modern shops in some instances pay scant regard to ventilation and in several instances they were asked to provide better ventilation. In other cases the selling space has been made as large as possible by providing very small storage spaces and very cramped or no facilities for the staff to take meals. Also, in small shops it is customary for one W.C. to be provided in the planning stage and it is only after the building has been let that it becomes apparent that two W.C.'s are necessary as males and females are employed.

Clean Air Act, 1956

The Council's Model Byelaws relating to new buildings contain a provision that heating and cooking appliances are to be of a type suitable for the burning of approved fuels.

The City Engineer is responsible for section 10 of the Act which concerns the height of chimneys and close co-operation exists between our departments over this matter.

It was not possible to continue smoke observations on account of staff shortage.

Fertilisers and Feeding Stuffs Act, 1926

Eight samples of animal feeding stuffs were obtained for analysis by the Official Agricultural Chemist and all were satisfactory.

Diseases of Animals Acts

Nine licences granted by the Council under the Diseases of Animals (Waste Foods) Order 1957 for the boiling of waste food for feeding to pigs were in operation at the end of the year. The operators were re-visited and later in the year they were reminded to give strict compliance to the Order, which is designed to prevent the spread of contagious diseases of animals which can be costly to eradicate as considerable numbers of animals can quickly be involved.

No notifications of contagious disease were received during the year.

Rag Flock and other Filling Materials Act, 1951

Two premises are registered under Section 2 of the Act, not so much because new articles are made, but so that they can execute orders for new work in the event of being asked. The business carried on is confined to the repair and renovation of customers' own articles, and the filling materials used for this work are not now subject to control. No samples were taken in 1960.

Dustbins

The scheme adopted in 1950 for the Council to supply dustbins at a rental was continued. Since 1957 the rental has been 7/- per year and at the end of 1960, 2,455 bins had been supplied. During 1960, 184 new dustbins were supplied.

Infectious Diseases, etc.

Forty-seven visits were made and 31 houses were fumigated on account of tuberculosis, poliomyelitis and other diseases.

Foul Linen Service

The part-time rodent operator also assists in the foul linen service which is operated by the Council to help elderly ailing people. The work involved is checking the articles for the laundry; taking the clothing to the Nunnery Fields Hospital Laundry and returning the clean clothing to the owners. 389 bundles of clothing were handled in 1960.

Knackers Yard

One building is licensed by the Council for the slaughter of horses and other animals. Only a small trade is carried on. All animals are slaughtered in a humane manner and the proprietors dispose of the meat uncooked for cat and dog food.

Verminous Houses

Nine Council houses and eight other houses were found to be verminous and were disinfested by the Public Health Department staff.

The scheme put into operation in 1948 to prevent the spread of vermin in Council houses was continued, but owing to staff shortage it was not possible to inspect the furniture and effects of prospective tenants. As in the past each house, whether old or new, is given a precautionary spraying with insecticide before occupation commences and in the year 229 such sprayings were done.

The staff carried out 73 fumigations to rid premises of wasps' nests.

Rodent Control

One part-time rodent operator is employed by the Council and the methods used are those recommended by the Infestation Branch of the Ministry of Agriculture.

Complaints were received from 171 persons; 161 were in respect of infestation in private houses and 10 were from occupiers of business premises. During the investigation of these complaints and in carrying out surveys of the district 26 additional infestations were discovered.

Maintenance treatments of the sewers was carried out in June and it would appear that the number of rats is being kept at a very low level.

The operator, who also assists with other public health work, was kept fully occupied and the following is a summary of the rodent work carried out :—

Visits to houses	...	...	...	...	1,014
Visits to other premises	...	...	...	...	74
No. of premises cleared :—					
<i>Rats</i>					
Houses	...	...	...	...	139
Business premises	...	...	...	...	6
<i>Mice</i>					
Houses	...	...	...	...	47
Business premises	...	...	...	...	5

No charge is made for rodent extermination in house property, but a charge for the work done in business premises based on time spent and cost of materials, is made to the occupier.

FACTORIES ACTS, 1937 to 1959

1. Inspections for purposes of provisions as to health.

Premises (1)	Number on Register (2)	Inspec- tions (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	32	1	—	—
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	175	8	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	—	—	—	—
TOTAL	207	9	—	—

2. Cases in which Defects were Found.

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

PRINCIPAL SCHOOL MEDICAL OFFICER'S REPORT FOR 1960

Mr. Chairman, Ladies and Gentlemen,

During 1960 I am happy to report that 96.3% of the 1,476 children medically examined as a routine were found to be satisfactory in their general health. Nevertheless 943 of this total showed some recorded defect requiring observation or treatment. In the great majority it was a case of keeping the matter under observation but it is noteworthy that 1.7% had hearing defects requiring treatment, and just under 2% had defects of vision requiring treatment and not already receiving attention. These two conditions have a direct bearing on the capacity for education and in themselves justify the process of routine examination. In addition to the 1,476 children "routined" there were 1,663 children seen at special or follow-up inspections of whom 929 required treatment or further observation.

Some thought was given to the needs of older students having in mind the educational facilities in use in the City in the existing colleges as well as possible future developments and a small group of local doctors all concerned with the health of those going through the various educational establishments in the City was formed to discuss student health. This subject is seldom considered early in the planning of educational developments.

Your obedient servant,

MALCOLM S. HARVEY.

Our City School Health Service is based on two main centres, the School Clinic and the May Hooker Centre.

At the School Clinic which is also the records office we run a Dental Centre, a minor ailments clinic, ultra-violet light clinic, and sessions for special inspections, B.C.G. vaccination, and follow-up examinations of vision or hearing. The premises are hardly up to the requirements of any but the Dental Centre, although development has improved the arrangements over the years.

The May Hooker Centre houses the Child Guidance Clinic with its remedial teaching group, and also the lip reading classes.

Minor ailments are also attended to at the medical rooms in two secondary schools. A School Eye Clinic is run with Eye Specialist in attendance, at the Kent and Canterbury Hospital. Kent County Council has a dental centre and speech therapy clinic in the City for children from outside schools. By arrangement with the County School Medical Officer our speech therapy cases attend that centre. This mutual aid is reciprocated for lip-reading, child guidance, medical examinations for training college entry, etc.

General Information.

Number of School Departments:

Primary	...	...	...	...	...	...	9
Secondary	...	...	...	...	...	...	4
All age	...	...	...	...	...	...	1

Number of Scholars on Roll at end of 1960:

Primary	...	...	...	...	...	...	2,487
Secondary	...	...	...	...	...	...	2,319
All age	...	...	...	...	...	...	380

Total ... 5,186

Staff—details are shown in the appendix at the end of the report. The function of Health Visitor is combined with that of School Nurse.

Children given routine medical examination—1,476.

Other special examinations—1,663.

Skin.

12 cases of impetigo were brought under treatment, and 253 other skin cases treated, or referred to the family doctor.

Cleanliness.

47 children were the subject of advice to parents on evidence of infestation or uncleanliness. The necessary treatment and printed instructions on how to deal with the situation were supplied in every case. Such cases were always re-inspected before return to school.

Vision.

Found at Routine Medical Inspections:

Number of children tested	...	...	...	...	1,476
Number found to be suffering from Visual Defects	...	...	...	...	186
Number found to be suffering from Squint	...	...	...	...	29
Number found to be suffering from Other Defects	...	...	...	...	17

Found at Special Inspection:

Number of children found with Visual Defects	...	...	...	...	269
Number of children found with Squint	...	...	...	...	13
Number of children found with Other Defects	...	...	...	...	13

The E card and Hand card are used for school entrants.

Nose and Throat.

Defects in this region were noted in 191 routine and 153 special examinations. 33 of the former and 46 of the latter were considered to need some treatment. 12 children were referred to the consultant after notice to the family doctor and 12 received operative treatment.

Defects of Hearing and Ear Disease.

At Routine Medical Examination:

		Requiring Observation	Requiring Treatment
Hearing defect observed	...	93	24
Middle Ear Disease found	...	22	1
Other Ear Disease found	...	6	3

At Special Inspection:

Hearing defect	...	...	...	71	40
Middle Ear Disease	...	...	...	—	—
Other Ear Disease	...	...	...	3	12

B.C.G. Vaccination.

As before explanatory talks preceded the visits to test and vaccinate. The young people responded with an 83% acceptance. Out of 612 in the age group 511 accepted (83.4%). 37 showed a positive reaction (7%) and 474 were vaccinated. The follow-up is by scar inspection after one year. The School Clinic remains open throughout the school holidays, and a nurse is available to check the progress of vaccinations.

Minor Ailments.

The School Clinic is open for the treatment of minor ailments on the journey to school from 8.30 a.m., and on the way home from school from 3.30-4.30 p.m. Such attendances numbered 4,155.

Ultra Violet Light Clinic.

18 cases attended on the recommendation of the school medical officer or family doctor.

Handicapped Pupils.

	On Register		Newly Ascertained	Attending Special School	Newly Placed	Requiring Placement
	M.	F.				
Blind or Partially Sighted	4	—	—	—	—	—
Deaf	1	—	—	—	—	—
Delicate	17	13	10	6	3	4
Epileptic	—	—	—	1	—	—
Physically Handicapped ..	7	2	—	4	—	—
Maladjusted	4	2	—	4	1	—
Educationally Sub-normal	17	7	1	8	2	3

Section 57, Education Act, 1944.

Children notified under Section 57 (3) or 57 (4) as ineducable	2
Children notified to the Health Committee under Section 57 (5) as requiring supervision after leaving school	2

Speech Therapy.

This is provided at the Kent County Council Clinic which is run in the City.

28 children were referred from Canterbury schools. The cases of 17 children were closed and 11 cases were carried over to 1961.

The cases closed were :—

Satisfactory progress following attendance at the Clinic	14
Little change following treatment	1
Defaulted or left the district	2
Total	17

Lip Reading Tuition.

Classes are held in the May Hooker Centre on Saturday morning by Miss D. M. Vines, qualified in teaching lip reading to the deaf. Cases are accepted from the Kent County area, including young children, and the class runs in two sections. Adult classes are run in the Technical College under the Further Education Scheme and school leavers transfer to the adult group when ready to benefit.

Eight children were attending (five from Kent County area) of whom four were over 10 years of age and four were between 8 and 10 years of age.

School Dental Service.

The Principal Dental Officer reports that in 1960 64.4% of the 5,225 children examined needed some form of treatment and 30.9% of these were treated by the School Dental Service. This shows a slight increase (1.6%) in those needing treatment and a slight fall (1.4%) in those receiving it through the School Dental Service.

Table of Dental Inspection and Treatment.

(1) Number of children inspected by Dentist needing treatment :—

(a) Routine Age Group—Age	3	...	...	...	6
	4	...	...	...	9
	5	...	...	...	302
	6	...	...	...	144
	7	...	...	...	269
	8	...	...	...	264
	9	...	...	...	280
	10	...	...	...	249
	11	...	...	...	310
	12	...	...	...	250
	13	...	...	...	290
	14	...	...	...	398
	15	...	...	...	99
	16	...	...	...	16
	17	...	...	...	2
	18	...	...	...	2
					2,890
(b) Specials	...	...	...	...	496
Total Routine and Special Examinations	...	...	...	...	5,225

Employment of Young Persons.

Examinations by the School Medical Officer were done on the usual number of cases. This gentle introduction into adult work has not lost its attractions.

Milk and Meals.

School Milk—3,915 children. School dinners—3,374. Meals provided free of charge to 229 children.

TABLE S.1.

Condition of Children on Routine Medical Inspection.

Age Group	No. Inspected	Satisfactory		Unsatisfactory	
		No	%	No.	%
Entrants - -	524	520	99.2	4	.8
Intermediates	444	424	95.5	20	4.5
Leavers - - -	387	367	94.8	20	5.2
Others - - -	121	111	91.7	10	8.3
Total - - -	1,476	1,422	96.3	54	3.7

TABLE S.2.

Defects found by Medical Inspection in the year ending
31st December, 1960.

Defect Code No.	Defect or Disease (1)	Periodic Inspections		Special Inspections	
		No. of defects		No. of defects	
		Requiring treatment (2)	Requiring to be kept under observation, but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation, but not requiring treatment (5)
4	Skin	26	33	15	20
5	Eyes (a) Vision	30	160	66	203
	(b) Squint	2	27	12	1
	(c) Other	7	10	6	7
6	Ears (a) Hearing	24	93	40	71
	(b) Otitis Media	1	22	—	—
	(c) Other	3	6	12	3
7	Nose and Throat	33	158	46	107
8	Speech	5	18	12	17
9	Cervical Glands	1	19	—	5
10	Heart and Circulation	4	27	2	6
11	Lungs	2	37	5	17
12	Developmental—				
	(a) Hernia	—	5	—	1
	(b) Other	1	22	24	38
13	Orthopædic—				
	(a) Posture	7	23	3	4
	(b) Flat foot	7	24	2	13
	(c) Other	4	27	15	9
14	Nervous System—				
	(a) Epilepsy	1	2	2	—
	(b) Other	3	12	5	5
15	Psychological—				
	(a) Development	—	17	14	29
	(b) Stability	—	8	10	19
16	Abdomen	5	13	4	8
17	Other	5	13	13	38
Total Number of Children Inspected		1,476		1,663	
Number of Children represented in figures above ..		943		929	

NOTE—All defects noted at medical inspection as requiring treatment are included in this return, whether or not this treatment was begun before the date of inspection.

TABLE S.3

MINOR AILMENTS TREATED

(excluding Uncleanliness shown in Table S.6)

	No. of Defects Treated or under treatment during the year.
SKIN:	
Ringworm—Scalp :	
(1) X-ray treatment	—
(2) Other treatment	—
Ringworm—Body	—
Scabies	—
Impetigo	12
Other skin diseases	253
EYE DISEASE	85
(External and other, but excluding errors, refractions, squint and cases admitted to hospital).	
EAR DEFECTS	45
(Treatment for serious diseases of the ear is not recorded here).	
Miscellaneous	663
	<hr/>
	1,058
	<hr/>
Total number of attendances at Authority's minor ailments clinic	4,155

TABLE S.4

TREATMENT OF DEFECTIVE VISION AND SQUINT

(Excluding Minor Eye Defects treated as Minor Ailments)

Errors of Refraction and Squint dealt with	173
Other Defects or Diseases of the Eye	94
No. of children for whom spectacles were prescribed	117

TABLE S.5

Defects which received operative treatment (through Education Committee arrangements)	12
Defects which received other forms of treatment	2

TABLE S.6

(1) Average number of visits per school made during 1960 by School Nurses	6
(2) Home visits made as School Nurses	363
(3) No. of Individual Children found with nits	49
(4) No. of Individual Children cleansed under Section 54 of the Education Act, 1944	—
(5) No. of cases in which legal proceedings were taken	—

CANTERBURY CHILD GUIDANCE CLINIC

ANNUAL REPORT, 1960

Comment on the Figures and Staff Changes.

Table 1—Sources of Referral. There has been an increase in the number of referrals during the current year, bringing the total up to almost 300.

Table 2—Types of Problem. The type of problem is much the same, behaviour disorders predominating.

Tables 3 and 4—Disposal of New Cases seen and Closures. The trend towards more intensive treatment has continued and as a result fewer cases have been closed during the current year. The results of treatment, however, are much the same. We are pleased to note a decrease in the number of cases which have been unco-operative.

Waiting Lists.

The diagnostic waiting list has now reached the figure of 124 and the treatment waiting list of 77.

Staff.

There has been some improvement towards the end of the current year, principally due to the fact that in September two Educational Psychologists took up their duties. Mr. Joynt was appointed for Canterbury City and Miss Powell by the County, although her work is based on the Clinic. Up to September, we had, however, no Educational Psychologist, though we continued to receive the help of one session a week from Mr. Lindsay. We would have found it very difficult to get along at all without this. We have been able to retain the services of Mr. Davidson for a session of Remedial Teaching on Saturday mornings.

Psychiatric Social Workers. The situation here has been worse than ever. Mr. Ford left us in August 1960 and except for the temporary appointment for two months of Mr. Tatlow (an untrained social worker), we were entirely without during the rest of the year.

Clerical Staff. Miss Drury replaced Mrs. Allen in April 1960 and we are very glad to welcome her. Mrs. Clarke has continued to give us her valuable help for three days a week.

Consultant Psychiatrists: Elizabeth Huband, M.A., M.R.C.S., L.R.C.P., Dip.Psy.; G. C. Turle, M.D., D.P.M.
Educational Psychologists (commenced 1st September 1960): Mr. G. H. Joynt, B.A., Ed.B.; Miss J. M. Powell, M.A., Dip.Ed.
Psycho-Therapist: Miss I. H. Bassom, B.A.
Social Worker (left 31st August 1960): Mr. M. Ford, D.S.A.
Clerical Staff: Miss N. Drury, Mrs. N. Clarke (part-time).

TABLE C.G.1.

SOURCE OF REFERRAL.

1960

1959

	County	City	N.H.S.	Out of Area	County	City	N.H.S.	Out of Area
School Medical Officer ...	66	17	1	—	62	14	—	1
Private Doctor ...	83	10	—	—	46	10	1	—
Court or Probation Officer	6	2	—	—	20	4	1	—
Head Teacher or Education Officer ...	42	7	—	—	22	3	—	—
Parent or Foster Parent	9	—	—	—	10	2	—	—
Other Clinics or Psychiatrists ...	26	4	—	1	22	2	1	—
Miscellaneous Social Agencies, including Children's Officer, Infant Welfare ...	13	—	—	1	19	—	—	—
Educational Psychologist	6	—	—	—	—	1	—	—
	251	40	1	2	201	36	3	1
	294				241			

TABLE C.G.2.

PROBLEMS REFERRED.

1960

1959

	County	City	N.H.S.	Out of Area	County	City	N.H.S.	Out of Area
Nervous Disorders ...	43	3	—	—	25	3	—	—
Habit Disorders...	40	9	—	—	39	11	—	—
Behaviour Disorders ...	149	20	1	2	122	18	1	1
Organic Disorders ...	2	—	—	—	—	1	—	—
Psychotic Behaviour ...	1	—	—	—	3	—	2	—
Educational and Vocational Difficulties	16	8	—	—	11	3	—	—
Unclassified ...	—	—	—	—	1	—	—	—
	251	40	1	2	201	36	3	1
	294				241			

TABLE C.G.3.

DISPOSITION OF NEW CASES SEEN.

	1960				1959			
	County	City	N.H.S.	Out of Area	County	City	N.H.S.	Out of Area
Diagnosis and Advice ...	12	5	—	—	19	2	—	—
Diagnosis and Placement	6	—	—	—	4	—	—	—
Taken on for Treatment	96	10	—	1	83	14	2	1
Taken on for Supervision	49	9	—	1	55	10	1	—
Remedial Coaching ...	7	1	—	—	4	1	—	—
Partial Service ...	29	3	—	—	19	3	—	—
	199	28	—	2	184	30	3	1
	229				218			

TABLE C.G.4.

CASES CLOSED.

	1960				1959			
	County	City	N.H.S.	Out of Area	County	City	N.H.S.	Out of Area
NON-TREATMENT								
Diagnosis and Advice ...	12	5	—	—	19	2	—	—
Diagnosis and Placement	6	—	—	—	4	—	—	—
Withdrawn before examination, no service given	31	5	1	—	21	3	—	—
Withdrawn after Partial Service ...	29	3	—	—	19	3	—	—
Total I	78	13	1	—	63	8	—	—
I TREATMENT								
Adjusted ...	3	1	—	—	5	—	—	—
Improved ...	43	5	—	1	63	15	—	1
Unimproved ...	4	—	1	—	8	5	—	1
Non-co-operative, or Interrupted ...	29	3	—	—	47	11	—	—
Placed ...	19	2	—	—	27	5	—	—
Total II	98	11	1	1	150	36	—	2
Total I and II	176	24	2	1	213	44	—	2
TOTAL FOR YEAR	203				259			

WAITING LISTS—

December 31st, 1960

December 31st, 1959

	County	City	N.H.S.	Out of Area	County	City	N.H.S.	Out of Area
Diagnostic ...	98	26	—	—	73	19	—	—
Treatment or Supervision	63	13	—	1	60	9	1	—

Staff of Home Health and School Health Services :

Medical Officer of Health and Principal School Medical Officer :
MALCOLM S. HARVEY, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health and Assistant School Medical Officer :
MRS. IRENE F. A. BLAKENEY, B.Sc., M.R.C.S., L.R.C.P., M.B., B.S.,
D.C.H., D.P.H.

Dental Surgeon :
MR. ALVIN PRYOR, L.D.S., R.C.S.(Eng.), M.R.S.H.

Chest Physician and Adviser on After Care of Tuberculosis :
O. CLARKE, M.D., M.R.C.S.

Health Visitors and School Nurses :
MISS G. E. MAGUIRE, S.R.N., S.C.M.
MRS. P. E. MATHEWS, S.R.N., S.C.M., H.V.Cert.
MISS J. M. MACKEN, S.R.N., H.V.Cert.
MISS J. C. BARBER, S.R.N., H.V.Cert.

Tuberculosis Health Visitor :
MISS A. J. BLUCK, S.R.N., S.C.M., H.V.Cert.

Other Nurses :
MRS. A. F. HARRIS, S.R.N., S.C.M.
MISS G. E. PEARSON, S.R.N. (Retired 24th May, 1960).

Midwives :
J. A. SOULSBURY, S.R.N., S.C.M.
O. A. ELKINGTON, S.C.M.
L. McKAY, S.R.N., S.C.M.
N. E. THOMAS, S.R.N., S.C.M., Q.D.N.S.

District Nurses (Canterbury District Nursing Association) :
I. PHIPPS, S.R.N., Q.D.N.S. (Retired 30th September, 1960).
B. PEARSON, S.R.N., S.C.M., Q.D.N.S.
J. E. THOMPSON, S.R.N., Q.D.N.S.
M. K. GILLET, S.R.N., S.C.M., Q.D.N.S.
MRS. M. DEAL, S.R.N.

Occupation Centre :
MISS E. FORD (Supervisor).
MRS. E. M. BREAR (Assistant Supervisor).
MRS. W. COOMBES (P/T Assistant Supervisor).

Mental Welfare Officers :
F. FOWLER.
D. PLEDGE.
L. FULLBROOK.

Mental Health Social Worker (Part-time) :
MRS. E. M. BREAR (Child care certificate).

Supervisor of Home Help Service : MRS. J. M. BARTON, M.I.H.H.O.

Child Guidance Clinic :

Consultant Psychiatrists :
ELIZABETH HUBAND, M.A., M.R.C.S., L.R.C.P., Dip.Psy.
G. C. TURLE, M.D., D.P.M.

Educational Psychologists :
MR. G. H. JOYNT, B.A., Ed.B. (Commenced 1st September, 1960).
MISS J. M. POWELL, M.A., Dip.Ed. (Commenced 1st September,
1960).

Psycho-Therapist : MISS I. H. BASSOM, B.A.

Social Worker :
MR. M. FORD, D.S.A. (Resigned 31st August, 1960).

Staff of Public Health Service :

Chief Public Health Inspector :

T. L. MARTIN, A.R.S.I., M.S.I.A.

Deputy Chief Public Health Inspector :

A. R. CLARK, M.A.P.H.I., Meat Inspector's Certificate.

Additional Public Health Inspectors :

F. W. BROMLEY, M.A.P.H.I., Meat Inspector's Certificate.

J. H. TURNER, M.R.S.I., M.A.P.H.I., Meat Inspector's Certificate.
(Resigned 31st July, 1960).

Trainee Public Health Inspector :

G. HOWITT.

Rodent Officer, Disinfecter and General Assistant :

A. C. TOMPKINS.

Administrative and Clerical Staff to above Services :

Administrative Assistant : D. PLEDGE.

Clerical Officers :

MISS J. MASHMAN.

MRS. I. J. SPICE.

Clerical Staff :

MISS L. L. WOOTTEN.

MISS P. R. PHIPPS.

MR. J. POOLE (Retired January, 1960).

MISS E. A. PAXON.

MISS S. WILKINS (School Health) (Resigned 23rd April, 1960).

MRS. H. KELLEY (School Health) (Commenced 11th April, 1960).

MRS. E. M. GREENSTREET (School Health, Dental Clinic).

MRS. S. ALLEN (Child Guidance Clinic) (Resigned 30th April, 1960).

MISS N. DRURY (Child Guidance Clinic) (Commenced 19th April, 1960).

MRS. M. CLARKE (Part-time) (Child Guidance Clinic).

State of Public Health Service

Chief Public Health Inspector: J. H. MANTON, M.D., 1000 ...

Deputy Chief Public Health Inspector: A. H. CLARK, M.D., 1000 ...

Additional Public Health Inspectors: F. W. HINCHLEY, M.A.B.L., 1000 ...

J. H. TUNNICLIFFE, M.A.B.L., 1000 ...

Chief Public Health Inspector: G. HOWITT, 1000 ...

Public Health Inspector and General Assistant: A. C. TOMKINS, 1000 ...

Administrative and Clinical Staff in charge of the ...

Administrative Assistant: D. ...

Chief Officer: MISS J. MASHAM, 1000 ...

MRS. L. ...

Medical Staff: MISS L. ...

MISS P. ...

MR. A. POOLE, 1000 ...

MISS E. A. ...

MISS S. ...

MRS. H. ...

MRS. E. M. ...

MRS. ...

MRS. ...

MRS. ...

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