

**[Report 1964] / Medical Officer of Health, Canterbury Borough / City & County.**

**Contributors**

Canterbury (England). City & County Council.

**Publication/Creation**

1964

**Persistent URL**

<https://wellcomecollection.org/works/ay9e6mam>

**License and attribution**

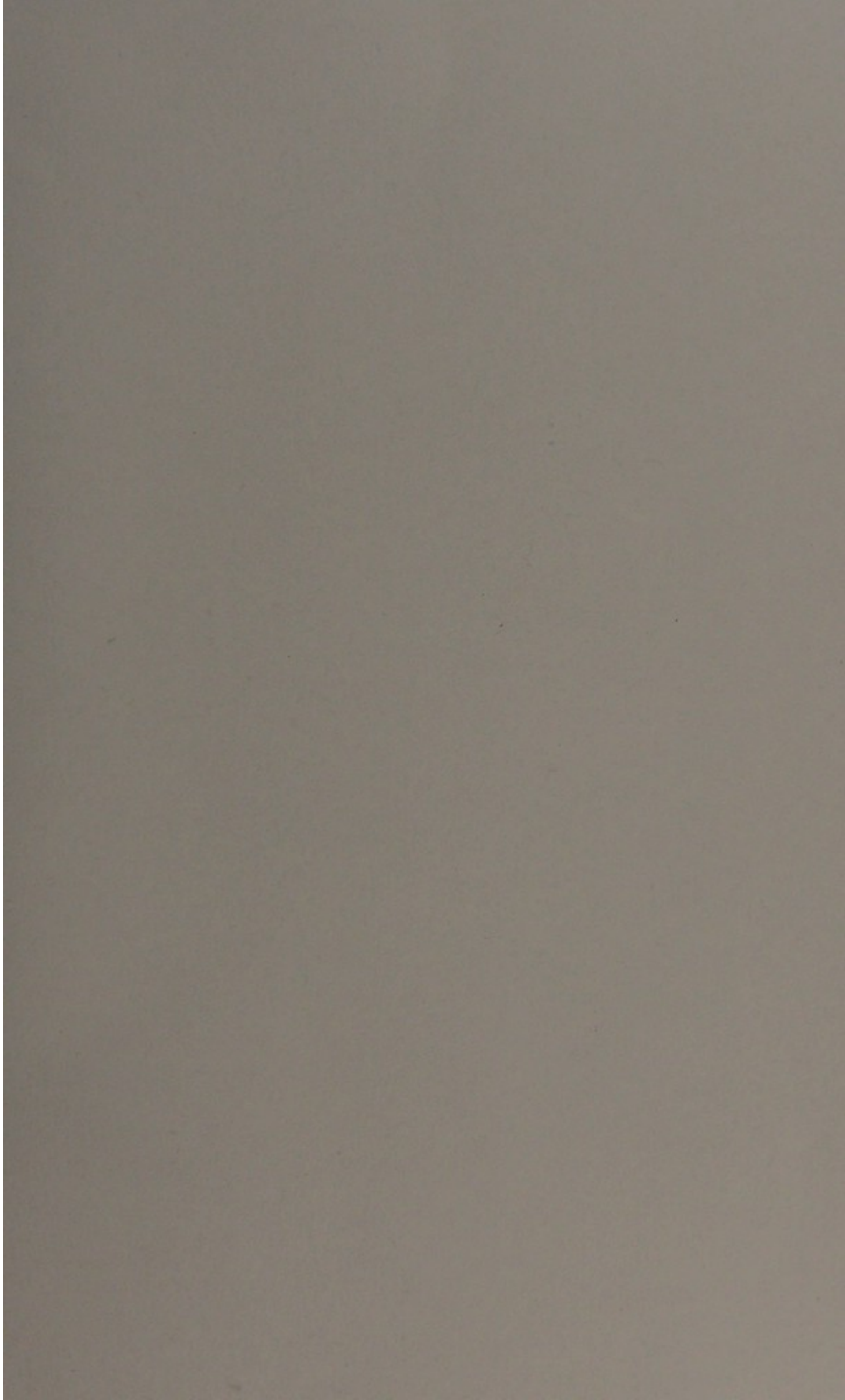
You have permission to make copies of this work under a Creative Commons, Attribution license.

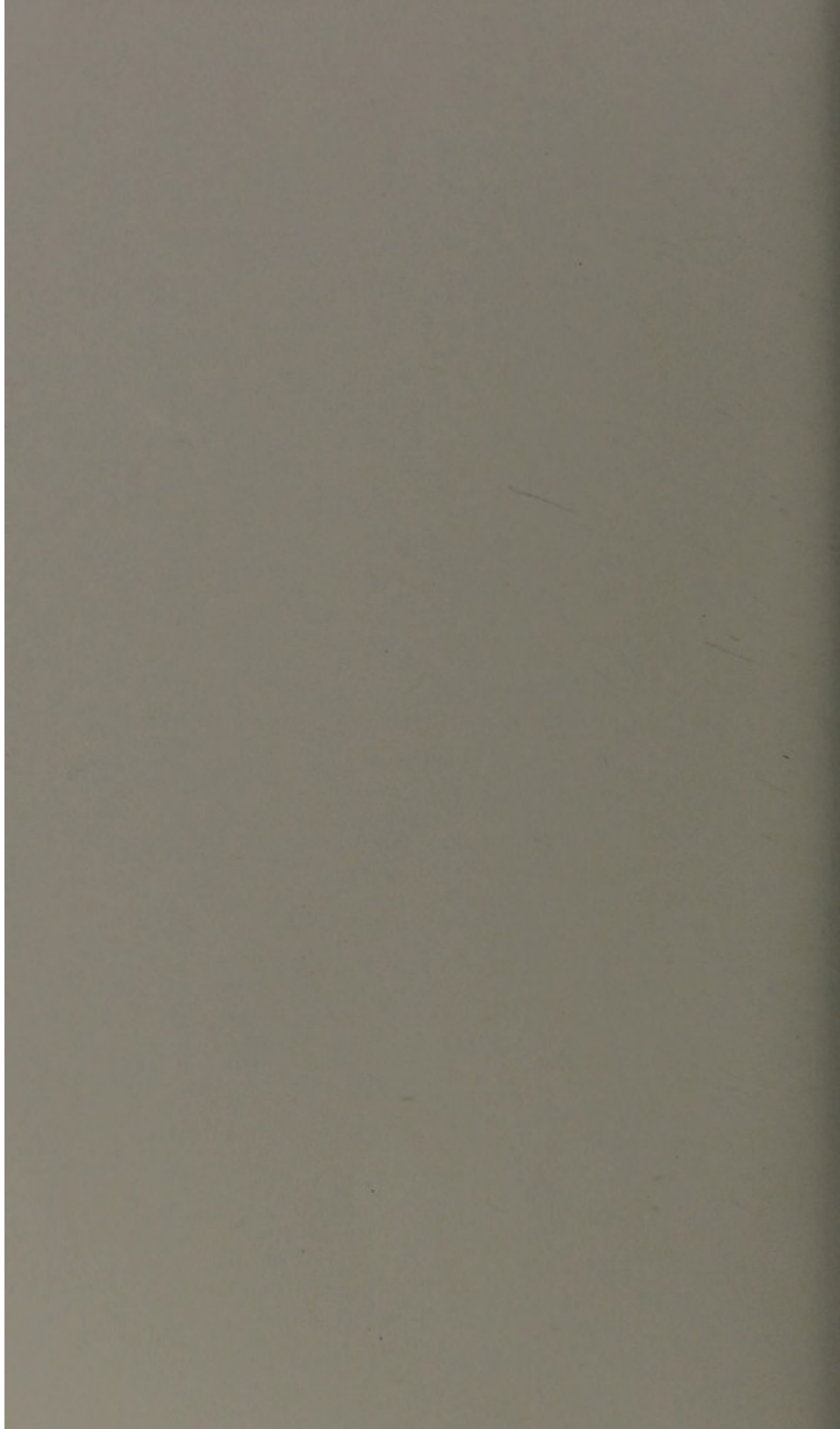
This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>



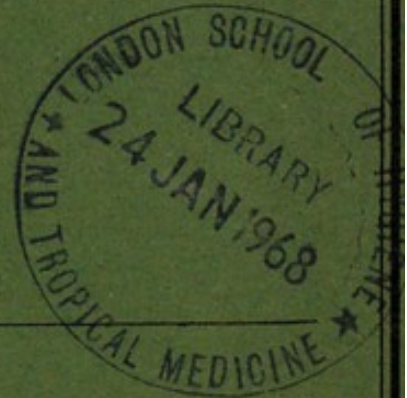




C. 44122  
City and County Borough of



Canterbury  
1964



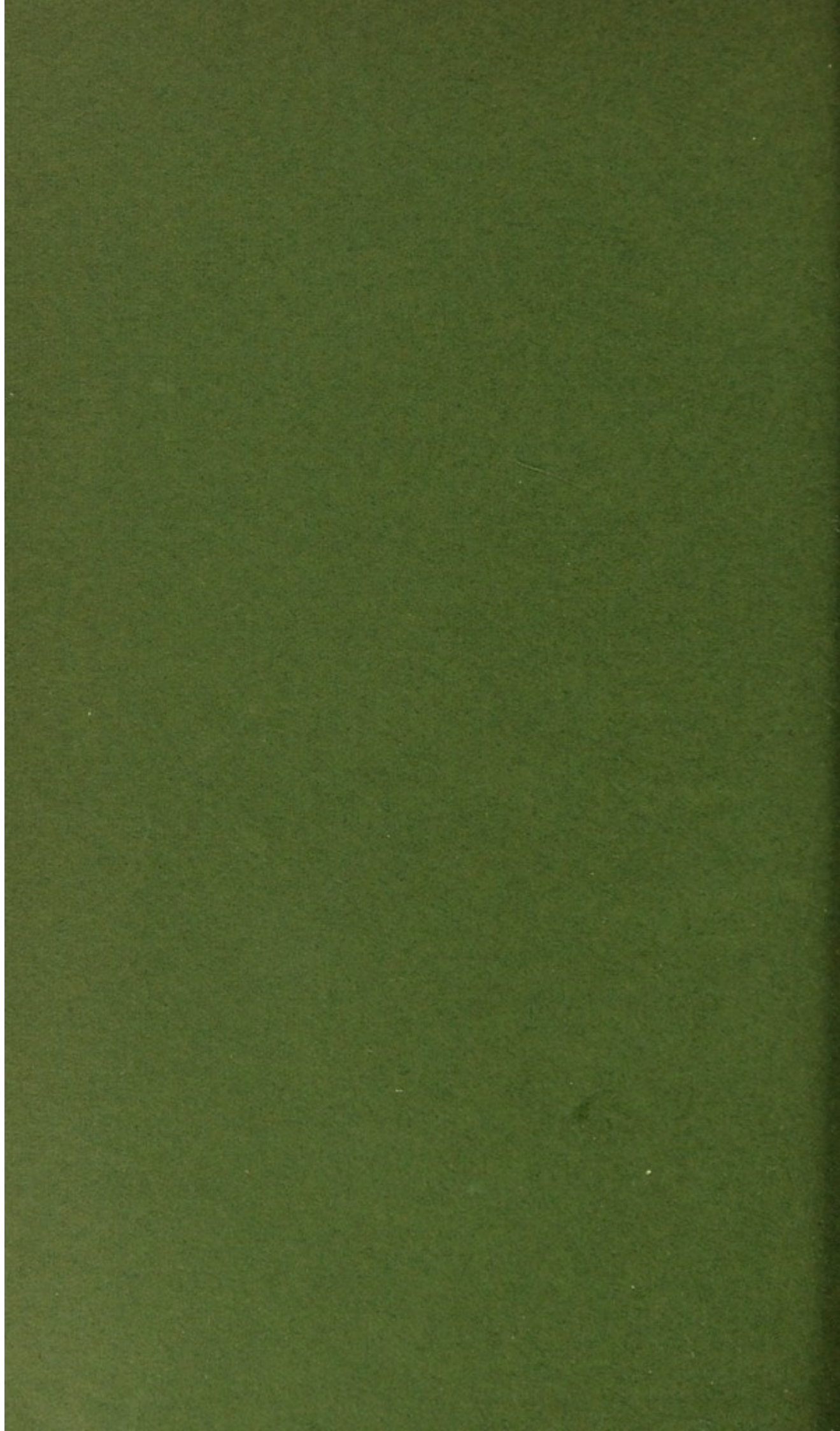
---

# 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  
1964





City and County Borough of



Canterbury

1964

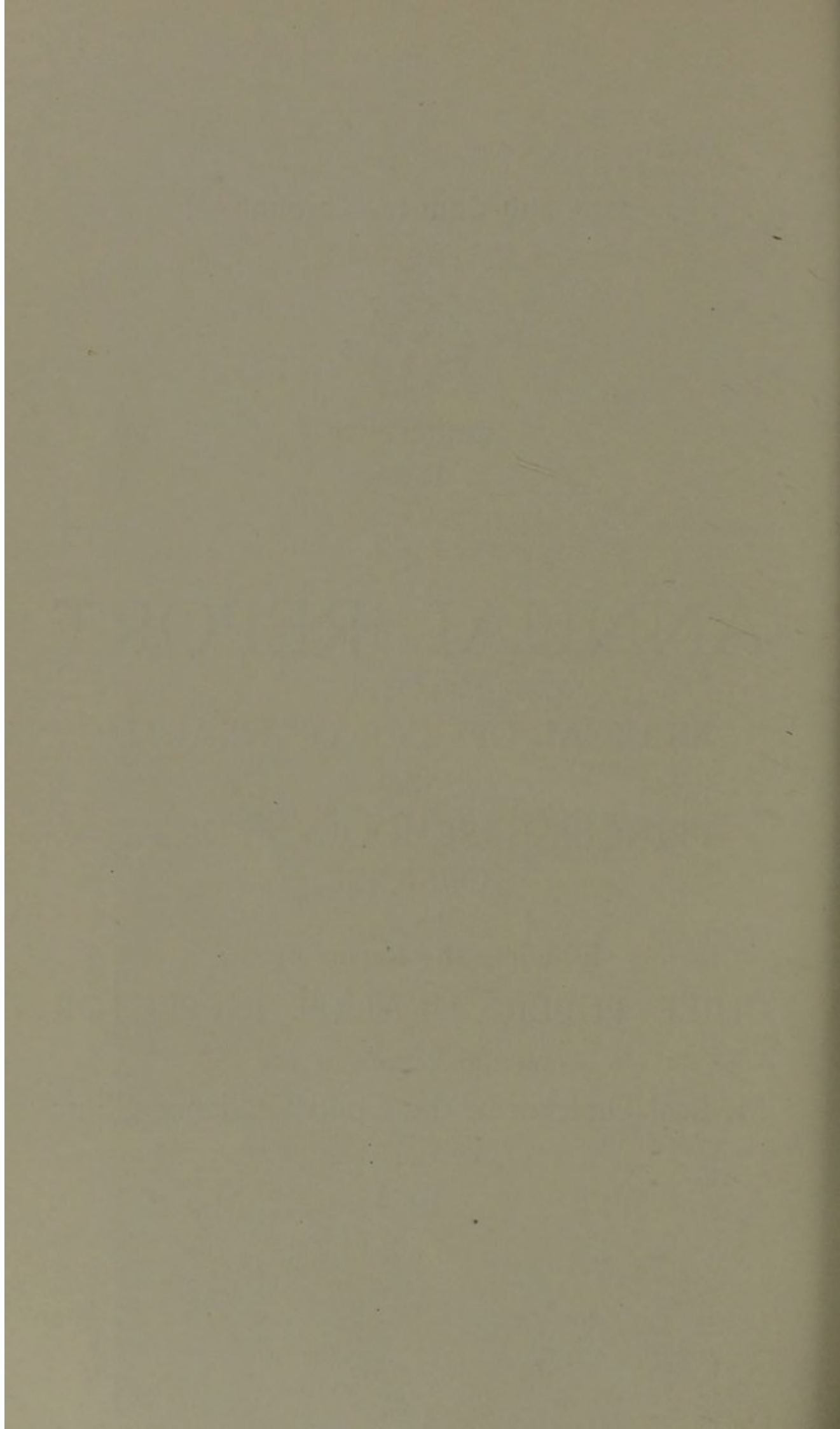
---

# 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  
1964







## **CITY OF CANTERBURY—1965**

---

*Mayor:*

COUNCILLOR E. E. KINGSMAN

*Chairman—Health Committee:*

COUNCILLOR MRS. E. M. ROTHERMEL

*Chairman—Education Committee:*

ALDERMAN S. H. JENNINGS, O.B.E.

*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, 1965

---

### Mayor:

COUNCILLOR E. E. KINGSMAN

### Health Committee:

**Chairman:** Councillor MRS. E. M. ROTHERMEL.

**City Council Members:** Alderman A. W. FOWLER, Alderman T. McCALLUM, Councillor MRS. K. M. ELLIS, Councillor K. G. HILLS, Councillor T. H. KELLEHER, Councillor B. A. PORTER, Councillor F. A. RIPPINGTON, Councillor J. J. ROOK, Councillor E. G. SHERSBY.

**Co-opted or Representative Members:** MISS D. M. LEACHMAN, Matron, Kent and Canterbury Hospital; DR. G. G. M. MILES, Local Medical Practitioner; MR. A. S. HAINES, South East London and Kent Executive Council; MRS. H. V. PAGE, Canterbury Group Hospital Management Committee; MRS. M. INGRAM.

### Mental Health Services Sub-Committee:

**Chairman:** Councillor MRS. E. M. ROTHERMEL.

**City Council Members:** Councillor MRS. K. M. ELLIS, Councillor K. G. HILLS, Councillor F. A. RIPPINGTON.

**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 H. J. BUCKWORTH, Councillor W. J. CLARKE, Councillor J. D. COOMBES, Councillor T. H. KELLEHER, Councillor E. G. SHERSBY, Councillor P. L. WOOD.

### Education Committee:

**Chairman:** Alderman S. H. JENNINGS, O.B.E.

**City Council Members:** Alderman A. W. FOWLER, Alderman T. McCALLUM, Councillor E. C. F. BROWN, Councillor MRS. K. M. ELLIS, Councillor K. G. HILLS, Councillor T. H. KELLEHER, Councillor MRS. E. M. ROTHERMEL, Councillor E. G. SHERSBY, Councillor J. TILLEARD.



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

I have the honour to present the Annual Report for the year 1964 which as is usual, includes the Report of the Chief Public Health Inspector, the Report of the Medical Director of the Child Guidance Clinic and my Report as Principal School Medical Officer for the City. Reference was made in the 1963 report to the influence of the new University which is bound to be experienced in the life of the City and its citizens. During 1964 it was made clear to us that the centres for higher education already established in the City are playing a part in our community life. Not only was this shown by the lighter side of student life but by the contribution to welfare services made by the students. Attention was drawn to the need for a greater interest in students who have come to the City from overseas.

The development of a post graduate Medical Centre which will serve a large part of Kent and is centred on the Kent and Canterbury Hospital is an event of some significance to the health services. The quality of medical care in the general medical services, hospital services, and local health services alike is enhanced by post graduate opportunities for furthering medical knowledge. The catholicity of professional membership which includes dentists and veterinary surgeons as well as medical practitioners widens these opportunities. Too often we are dependent on a return to the training school or to main university centres for vocational stimulus. A peripheral unit such as this one deserves the full support of the professions and the local community alike.

There has been an appreciable pressure of public opinion to develop an exfoliative cytology service and by the end of 1964 it was possible to estimate that the training of the necessary technicians to work under a Consultant Pathologist to carry out the examination of the smear tests will allow the development of this service in 1966. The success of such a service will depend upon the full understanding of its advantages as well as its limitations and the part to be played by the Local Health Authority will be that of providing clinic facilities and staff and of carrying out the health education necessary to ensure beneficial use.

The general medical practitioners have always been and will remain the heart of a good health service and the present discontent with the contract and conditions of service in general practice must be viewed with apprehension. It can sour that precious quality, the mutual respect between patient and doctor which en-



riches care with a confidence that is itself a healing power.

During 1964 the public concern about the general standards of public hygiene, caused by the publicity given to the Aberdeen typhoid outbreak created an opportunity for progress that the Council was willing to grasp. Such a boost can get health and hygiene education off the ground and moving faster than all the patient pressure of the public health inspectors, but it is the constant pressure over a long period by the Public Health Department staff that establishes such progress as a permanent improvement. Thus until we can see permanent benefits in public hygiene from the 1964 furore we shall not be satisfied.

During the year the Health Department moved to new temporary premises that have given improved working conditions for the office staff, which they well deserve, for they serve the Council and the community faithfully and well, and I am happy to record my thanks to the staff for their dogged conscientious work during a disturbed and busy year.

Your obedient servant,

MALCOLM S. HARVEY.

Health Department,  
15A Dane John,  
Canterbury.



## ANNUAL REPORT—1964

---

The City population rose to 32,010 at mid 1964, an increase of over 3% which reflects the anticipated acceleration in growth due to the University and Teachers' Training College development. The area remained the same at 4,810 acres, giving a density per acre of 6.65 persons. The number of inhabited dwellings rose by 252 to 10,387, giving an average of 3.08 persons per dwelling. Out of this total of inhabited dwellings just under 4 per cent are dwellings specially provided for elderly persons, and the number of units of accommodation for elderly persons increased by 80 from my last report.

The clearance of unfit houses continued and is referred to in detail in the Chief Public Health Inspector's report.

The water supply was fully described in the 1963 report, and the question of fluoridation was left in abeyance during 1964.

The scheme for enlargement of the sewage works to meet the needs of growth in City population and the growth of the fringe areas in the surrounding rural district which discharge sewage into the City sewers, made some progress towards a beginning.

### General Statistics

Area: 4,810 acres. Population (mid-1964): 32,010.

Inhabited dwellings (Rate book 31.3.64): 10,387. Increase over the year: 252.

Rateable Value: £1,434,104. Penny rate represents £5,725.

Live births per 1,000 population: 17.2.

Death rate, all causes, per 1,000 population: 13.3.

Infant Mortality per 1,000 live births: 20.6.

Peri-natal mortality per 1,000 live and stillbirths: 12.6.

Illegitimate live births per cent. of total live births: 7.9.

More detail is given at the end of the section of the report dealing with Home Health Services.

### Employment

The state of employment, as indicated by figures kindly provided by the Manager of the Ministry of Labour Employment Exchange showed the usual mid-year level—136 male, 25 female; total 161—mid-1964 (166 mid-1963). These figures are for Canterbury and Bridge-Blean. The year's end figures were 195 male, 47 female—total 242 (1963—196).

### Staff Changes

Dr. James Hunter resigned on taking a commission in the Royal Army Medical Corps and was succeeded as Deputy Medical Officer of Health by Major-General J. Leslie Gordon, O.B.E., M.R.C.S., L.R.C.P., D.P.H., who joined the staff in February, 1965.



## HOME HEALTH SERVICES

### Care of Mothers and Young Children

#### *Infant and Toddler Welfare Clinics:*

Monday, 2 p.m., 51 London Road, May Hooker Memorial Clinic: Doctor, Health Visitor and W.V.S. voluntary workers (London Road Clinic).

Tuesday, 2 p.m., Hollow Lane, Wincheap Primary School: Health Visitor and voluntary workers (Wincheap Clinic) (Doctor once a month for vaccination and immunisation).

Tuesday, 2 p.m., Welfare Hut, Military Road: Doctor, Health Visitors and voluntary workers (Northgate Clinic).

Thursday, 2 p.m., Central Clinic, Stour Street: Doctor, Health Visitors and voluntary workers.

Friday, 2 p.m., Central Clinic, Stour Street: Doctor, Health Visitors and voluntary workers.

#### *Mothercraft and Relaxation Classes:*

Monday, 2 p.m., Central Clinic: Physiotherapist and Health Visitor.

#### *Sewing Classes:*

Tuesday, 2 p.m., Central Clinic (during school term time).

#### *Ante-Natal Clinic:*

Wednesday, 2.15 p.m., Central Clinic: Midwives and Medical Officer.

#### *Dental Clinic (Expectant and Nursing Mothers and Pre-School Children):*

Wednesday, 2 p.m. and Friday, 2 p.m., Central Clinic Surgery (Ground floor). (Some treatment is carried out by appointment at the Dental Surgery in the School Clinic, Northgate.)

### Attendances at Clinics during 1964

#### Infant Toddler Welfare attendances:

|  | Age Group:                         | Central:           | Wincheap: | Northgate: | London Road: | Total |
|--|------------------------------------|--------------------|-----------|------------|--------------|-------|
| (Children on Clinic Register 31.12.63) | Under 1                            | 182                | 60        | 109        | 78           | 429   |
|  | 1-5 years                          | 259                | 97        | 150        | 182          | 688   |
| (Children on Clinic Register 31.12.64) | Under 1                            | 240                | 64        | 64         | 68           | 436   |
|  | 1-5 years                          | 335                | 130       | 94         | 176          | 735   |
|  | First attended during 1964—        | Born in 1964       |           |            |              | 494   |
|  |                                    | Born in 1963/1959  |           |            |              | 1,016 |
|  | Total attendances made by children | Born 1964          |           |            |              | 4,094 |
|  |                                    | Born in 1963/1959  |           |            |              | 6,471 |
|  | Doctors' consultations—            | Children Born 1964 |           |            |              | 593   |
|  |                                    | Born 1963/1959     |           |            |              | 1,216 |



Ante-Natal Clinic attendances:

|                               |     |     |     |     |     |     |
|-------------------------------|-----|-----|-----|-----|-----|-----|
| Sessions...                   | ... | ... | ... | ... | ... | 53  |
| First attendances during 1964 | ... | ... | ... | ... | ... | 118 |
| Total attendances during 1964 | ... | ... | ... | ... | ... | 308 |
| Blood tests taken             | ... | ... | ... | ... | ... | 127 |
| Post-natal examinations       | ... | ... | ... | ... | ... | 7   |
| In attendance 1.1.64          | ... | ... | ... | ... | ... | 52  |
| In attendance 31.12.64        | ... | ... | ... | ... | ... | 17  |

Relaxation Classes:

|  |     |     |     |     |     |     |
|--|-----|-----|-----|-----|-----|-----|
| Sessions held                          | ... | ... | ... | ... | ... | 43  |
| Mothers in attendance                  | ... | ... | ... | ... | ... | 186 |
| Total attendances                      | ... | ... | ... | ... | ... | 872 |
| Mothercraft sessions at Central Clinic | ... | ... | ... | ... | ... | 43  |
| Mothers in attendance                  | ... | ... | ... | ... | ... | 167 |

It is usual for two groups to meet at each session, alternating with the relaxation class.

Priority Dental Care

Numbers provided with dental care:

|   | No. of Persons examined during the year | No. of Persons who commenced treatment during the year | No. of Courses of treatment completed during the year |
|---|---|--|---|
| Expectant & Nursing Mothers ...                               | 39                                      | 58   | 36  |
| Children under 5 and not eligible for school dental treatment | 36                                      | 48   | 38  |

|  | Scaling and Gum Treatment | Fillings | Silver Nitrate Treatment | Crowns and Inlays | Extractions | General Anæsthetics | Dentures Provided   |                        | Radiographs |
|--|---------------------------|----------|--------------------------|-------------------|-------------|---------------------|---------------------|------------------------|-------------|
|  |                           |          |                          |                   |             |                     | Full Upper or Lower | Partial Upper or Lower |             |
| Expectant and Nursing Mothers                                  | 9                         | 29       | 3                        | —                 | 73          | 20                  | 7                   | 7                      | 3           |
| Children under Five and not eligible for School Dental Service | —                         | 2        | 24                       | —                 | 30          | 13                  | —                   | —                      | —           |



One Dental Centre is provided in the Central Clinic under Priority Dental Service arrangements. This is used for School Children as well as for Expectant and Nursing Mothers and pre-school children. Although 116 dental officer sessions were held at this centre the greater number of patients seen were school children.

### Welfare Foods

An improvement in the use of National Dried Milk and Orange Juice is shown which reverses the downward trend of recent years.

|                          | 1964  | 1963  | 1962  |
|--------------------------|-------|-------|-------|
| National Dried Milk ...  | 5,413 | 5,263 | 6,642 |
| Orange Juice ...         | 9,167 | 8,270 | 6,769 |
| Cod Liver Oil ...        | 362   | 448   | 453   |
| Vitamins A and D Tablets | 793   | 939   | 1,002 |

### Premature Infants

There were 40 premature births out of 532 live births to Canterbury mothers. Eight of these were in domiciliary practice, and the other 32 were born in hospital.

### Domiciliary Midwifery

Four domiciliary midwives are employed. The percentage of home deliveries fell to 33%, only possible because of the early discharge of cases delivered in hospital. For this reason the load on the district midwives remained unchanged.

| Live Births in Canterbury (notified)      | 1964  | 1963 |
|---|-------|------|
| Home delivery (Doctor and/or Midwife ...) | 178   | 181  |
| Elsewhere (Hospital) ...                  | 1,160 | 977  |
|   | <hr/> |      |
|   | 1,338 |      |
|   | <hr/> |      |

### Live Births to Canterbury Mothers:

|  |       |
|--|-------|
| Kent and Canterbury Hospital ...             | 294   |
| Domiciliary Practice (City Midwives) ...     | 175   |
| Private Domiciliary Practice (City) ...      | —     |
| Military Families' Hospital, Shorncliffe ... | 24    |
| St. Helier's Maternity Home, Tankerton ...   | 26    |
| Elsewhere ...                                | 13    |
|  | <hr/> |
| Total ...                                    | 532   |
|  | <hr/> |

Stillbirths numbered 8, 6 Kent and Canterbury Hospital, 2 domiciliary practice.

### Breast Feeding

The percentage of mothers still breast feeding their babies on completion of the midwife's care remained at 46%.



## Health Visiting

The staff was increased to six Health Visitors by the sponsored trainee Health Visitor taking up full duty on qualifying.

### *Visits to Infants and Children—*

|                                |     |     |     |     |       |
|--------------------------------|-----|-----|-----|-----|-------|
| Born in 1964—First Visits      | ... | ... | ... | ... | 556   |
| Total                          | ... | ... | ... | ... | 2,264 |
| Born in 1963/1959—First Visits | ... | ... | ... | ... | 1,755 |
| Total                          | ... | ... | ... | ... | 5,040 |

### *Visits to Expectant Mothers—*

|  |     |     |     |     |     |
|--|-----|-----|-----|-----|-----|
| First Visits                                 | ... | ... | ... | ... | 201 |
| Total  | ... | ... | ... | ... | 338 |
| <i>Total Visits to Persons over 65 years</i> | ... | ... | ... | ... | 150 |

### *Other Visits, including infectious diseases, and after care—*

|              |     |     |     |     |     |
|--------------|-----|-----|-----|-----|-----|
| First Visits | ... | ... | ... | ... | 409 |
| Total        | ... | ... | ... | ... | 680 |

The figures for Tuberculosis Health Visiting are as follows:

|                      |     |      |      |
|----------------------|-----|------|------|
|                      |     | 1963 | 1964 |
| Clinic Sessions      | ... | 146  | 115  |
| Mantoux Test Clinics | ... | 49   | 42   |
| Home Visits          | ... | 575  | 482  |
| B.C.G. Clinics       | ... | 33   | 20   |

There were 167 names entered on the 'at risk' register at the end of the year, subject to 'milestones' review.

All Health Visitors are now associated with a General Practice.

## Home Nursing

It is surprising to find that the annual figures show a moderation of pressure on the service.

| 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 1959 | 588           | 101            | 6             | 2      | 697          | 14,445       | 336           | 12,937                     |
| " " 1960      | 539           | 80             | 2             | 2      | 623          | 17,756       | 372           | 12,369                     |
| " " 1961      | 469           | 93             | 3             | 1      | 566          | 18,269       | 353           | 14,753                     |
| " " 1962      | 508           | 78             | 5             | 8      | 599          | 20,043       | 351           | 15,668                     |
| " " 1963      | 498           | 101            | 5             | 2      | 606          | 18,334       | 363           | 14,297                     |
| " " 1964      | 431           | 92             | 2             | —      | 525          | 14,913       | 253           | 11,015                     |



## Vaccination and Immunisation

The need for a pre-school booster inoculation against diphtheria and tetanus was given greater publicity and an improved response resulted.

Smallpox vaccination was not offered at Clinics under the age of 10 months. Some family doctors are still vaccinating against smallpox in the early months. Only three babies under the age of nine months were smallpox vaccinated at clinics, in each case because the family was moving to a smallpox endemic area.

### Vaccination and Immunisation, 1964

| Against Smallpox               |                         | Under 3 Months | 3—6 Mth's | 6—9 Mth's | 9—12 Mth's | 1—4    | 5—15  | Over 15 | Total |
|--------------------------------|-------------------------|----------------|-----------|-----------|------------|--------|-------|---------|-------|
| Primary Vaccination            | Clinic                  | 1              | 1         | 1         | 19         | 81     | —     | 1       | 104   |
|                                | Family Dr.              | 66             | 16        | 9         | 19         | 75     | 2     | 2       | 189   |
|                                | Total                   | 67             | 17        | 10        | 38         | 156    | 2     | 3       | 293   |
| Revaccination                  | Clinic                  | —              | —         | —         | —          | —      | 6     | 1       | 9     |
|                                | Family Dr.              | —              | —         | —         | —          | 3      | 7     | 9       | 19    |
|                                | Total                   | —              | —         | —         | —          | 5      | 13    | 10      | 28    |
| Against Diphtheria             |                         | Born in 1964   |           | 1963 /60  | 1959 /49   | Others | Total |         |       |
| Primary Immunisation           | Clinic                  | 89             |           | 95        | 2          | 2      | 188   |         |       |
|                                | Family Dr.              | 96             |           | 157       | 6          | —      | 259   |         |       |
|                                | Total                   | 185            |           | 252       | 8          | 2      | 447   |         |       |
| Booster Dose                   | Clinic                  | 1              |           | 115       | 119        | —      | 235   |         |       |
|                                | Family Dr.              | —              |           | 69        | 115        | 1      | 185   |         |       |
|                                | Total                   | 1              |           | 184       | 234        | 1      | 420   |         |       |
| Whooping Cough                 | No. of Cases Inoculated | 181            |           | 249       | 6          | —      | 436   |         |       |
|                                |                         | 1              |           | 122       | 65         | 1      | 189   |         |       |
| Tetanus                        | No. of Cases Inoculated | 184            |           | 252       | 11         | —      | 447   |         |       |
| Canterbury Population Mid-1964 |                         | 0 — 4          |           | 5 — 14    |            | 0 — 14 |       |         |       |
|                                |                         | 2,400          |           | 4,500     |            | 6,900  |       |         |       |
| Canterbury Births — 1963       |                         | ... 500        |           |           |            |        |       |         |       |
| Canterbury Births — 1964       |                         | ... 552        |           |           |            |        |       |         |       |



PERSONS RECEIVING POLIOMYELITIS VACCINE IN 1964

| Persons born in                    |     | 1964 | 1963 | 1945/62         | 1935/44 | Special Group | % given at Clinics |
|------------------------------------|-----|------|------|-----------------|---------|---------------|--------------------|
| Salk Vacc.<br>(by injection)       | 1st |      |      |                 |         |               |                    |
|                                    | 2nd | 9    | 16   | 12              | —       | 6             |                    |
|                                    | 3rd | —    | 24   | 22              | —       | 1             |                    |
|                                    | 4th | —    | —    | 17              | —       | 9             |                    |
| Total                              | 116 | 9    | 40   | 51              | —       | 16            | Nil                |
| Sabin Vacc.<br>(oral)              | 1st | —    | —    | —               | —       | —             |                    |
|                                    | 2nd | —    | 1    | 7               | —       | 1             |                    |
|                                    | 3rd | 83   | 258  | 95              | 4       | 8             |                    |
|                                    | 4th | —    | —    | 50              | —       | 7             |                    |
| Total                              | 514 | 83   | 259  | 152             | 4       | 16            | 67%                |
| Course completed with Sabin (oral) | 3rd | —    | —    | 1               | —       | —             |                    |
| Total                              | 1   | —    | —    | 1               | —       | —             |                    |
| Booster 4ths (oral) after 3 Salk   | 4th |      |      | Age 5-12<br>274 |         | 9             |                    |
| Total                              | 283 |      |      | 274             |         | 9             | 72%                |

**B.C.G. Vaccination**

(Section 28 N.H.S. Act; Prevention of Illness)

The programme continued, with case contacts dealt with by the Chest Clinic and routine protection through school health arrangements.

*Contacts—*

|                   |     |     |    |
|-------------------|-----|-----|----|
| Skin Tested       | ... | ... | 74 |
| Found Negative    | ... | ... | 73 |
| B.C.G. Vaccinated | ... | ... | 77 |

*Routine Protection—*

|                            |          |                 |              |
|----------------------------|----------|-----------------|--------------|
| Number in 12/13 Age Group  | —512     | Older Age Group | <i>Total</i> |
| Consents to test           | ... —486 | 53              | 539          |
| Found Negative             | ... —438 | 43              | 481          |
| Vaccinated B.C.G.          | ... —438 | 43              | 481          |
| Found Positive             | ... — 22 | 10              |              |
| Positive (previous B.C.G.) | — 26     |                 |              |



L.E.A. SCHOOLS—B.C.G. VACCINATION SINCE 1955

| Year     | Appropriate School population | Test    | No. Tested | % Possible | Test +ve | %    | Test -ve | Vacc. B.C.G. |
|----------|-------------------------------|---------|------------|------------|----------|------|----------|--------------|
| 1955     | —                             | Mantoux | 396        | —          | 70       | 17.6 | 326      | 325          |
| 1956     | —                             | Mantoux | 510        | —          | 76       | 15.0 | 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       | 7.0  | 474      | 474          |
| 1961     | 801                           | Heaf    | 695        | 86         | 31       | 4.4  | 639      | 634          |
| 1962     | 559                           | Heaf    | 550        | 94         | 50       | 9.9  | 500      | 500          |
| 1963     | 516                           | Heaf    | 401        | 80         | 23       | 4.4  | 378      | 378          |
| 1964     | 512                           | Heaf    | 460        | 90         | 22       | 4.8  | 438      | 438          |
| 10 years |                               |         | 5,355      |            | 494      | 9.0  | 4,836    | 4,830        |

### Ambulance Service

It gives much satisfaction to record that on 24th October, 1964 the Ambulance Service moved from Barton Court to the new Ambulance Station at Old Ruttington Lane. Barton Court was a make shift ambulance station from the beginning, comprising an adapted surface shelter as control room and duty room, four brick-built garages and a lean-to shelter for vehicles. Despite these conditions the staff maintained good morale and a conscientious service. The new Ambulance Station was carefully planned on a site which allows the staff rooms and control room to overlook the yard and garage from a higher level. It provides a high standard of working conditions which the staff both deserve and appreciate. The change over to the new station was effected so smoothly by the careful detailed planning of the Station Officer, that the change was indicated simply by the order that as from 10.20 hours on the above date all vehicles should home on the new Station. The teething troubles came from a quite unexpected direction, the motoring and motor-cycling public who saw in the new station an opportunity for a short-cut and took it with complete disregard of the risk to themselves or our staff. This forced on us the need to close the entrance and to use the forecourt exits also as entrance. The social behaviour of those driving an internal combustion engine is surprisingly selfish.

The staff at the end of 1964 was 23 ambulance driver attendants, 18 on shift rota, 5 on day duty; with 1 control room assistant and the Station Officer. Vehicle strength was 7 stretcher ambulances and 4 sitting case cars. Use is made of the Hospital Car Service and Railway Transport.



## USE MADE OF AMBULANCE SERVICE, 1964

|  | 1961    | 1962    | 1963    | 1964    |
|--|---------|---------|---------|---------|
| Total Patients Carried                   | 34,091  | 33,411  | 33,046  | 37,922  |
| Outpatients                              | 28,675  | 27,917  | 27,443  | 32,001  |
| Admissions, Transfers<br>Accidents, etc. | 5,416   | 5,494   | 5,603   | 5,921   |
| Mileage                                  | 154,039 | 158,106 | 159,235 | 169,209 |

Hospital Car Services: 174 patients; mileage 11,582

The Hospital Car Service was used for 15% more patients and 18% more mileage than in 1963.

### Health Education

The general work on health education continued as described in the previous annual report. A re-arrangement of the Relaxation Classes for Expectant Mothers, moving this to Monday afternoon, was carried out to allow more freedom for the Mothercraft talks.

As mentioned in the preface to the report the opportunity given by the public reaction to the Aberdeen typhoid outbreak was used to promote food hygiene and personal hygiene and to call attention to improvements needed in some of the public conveniences in the city.

The Health Visitors who are school nurses to Secondary Schools are given opportunities by the schools to hold discussion meetings with the older girls for health educational purposes.

Anti-smoking posters were widely distributed during the year. The British Safety Council's Safety digest was also circulated.

The Dental Health Education Trailer of the General Dental Council was borrowed for ten days in March, 1964. It was sited at nine of the schools in the City and at the Central Clinic for public viewing and Ante-Natal Clinic mothers, and received good Press and Southern Television attention. We used the G.D.C. exhibit on "The Evolution and functions of animal teeth and comparison with human dentition", as being a subject that would attract and interest the young people. It is always hard to say how successful an exhibition has been. The inclusion of Apple Club literature which fortuitously included the Beatles made a distinct appeal and was a sell-out. The audiences were selected in that they were pupils from Primary and Secondary Schools. The message was



rather lost on those up to age 8 years but seemed to get over to the older children and to the public. A dental attendant staffed the trailer throughout under the general supervision of the Principal Dental Officer and the Health Visitor/School Nurse of each school visited assisted at her own school. The General Dental Council towed the trailer on to site and thereafter we were responsible for movement, garaging, and return to base at Whipps Cross. It was placed at the disposal of the County Dental Officer for a day on a visit to the Simon Langton Schools.

### Home Help Service

The staff of 2 full-time and 27 part-time staff are directed by 1 full-time organiser (whole-time equivalent—19.3 home helps). The number of cases helped increased to 276. "In service" training of the staff continued, the courses being run for us by the Technical College. It was also arranged that the Home Helps should attend a First Aid and Home Nursing Course (C.D. Training in Nursing Regulations 1963) as being local authority staff in whom such training would be especially valuable. The hours of Home Help Service given increased from 39,428 hours in 1963 to 40,959 in 1964. The foul laundry service which can be looked on as supplementary to both District Nursing and Home Help Services dealt with 287 bundles of foul laundry in the year.

#### HOME HELP TO HOUSEHOLDS FOR PERSONS

| Aged 65 or over | Aged under 65 years  |                     |           |        | Total Cases |
|-----------------|----------------------|---------------------|-----------|--------|-------------|
|                 | Chronic Sick or T.B. | Mentally Disordered | Maternity | Others |             |
| 221             | 17                   | 3                   | 19        | 16     | 276         |

### Chiropody Service

The work continues to be carried out by a private chiropodist on a treatment basis either in his surgery or by domiciliary visits.

The total number of treatments given in 1964 was 821 of which 331 were domiciliary treatments and 490 were surgery attendances.

New cases referred during the year numbered 65 of whom 27 were domiciliary and 38 ambulant. The sources of referral were General Medical Practitioners 43, District Nurses 19 and Health Visitors 3.

Since the inception of the service in 1961, 259 cases have been referred and at the end of the year 173 were receiving treatment.

The following table gives details of referrals during the past three years.



| Classification          | 1962 | 1963 | 1964 | Total |
|-------------------------|------|------|------|-------|
| PHYSICALLY HANDICAPPED  |      |      |      |       |
| Elderly                 | 28   | 17   | 19   | 64    |
| Otherwise               | 4    | 7    | 7    | 18    |
| ELDERLY PERSONS         | 30   | 35   | 39   | 104   |
| EXPECTANT MOTHERS       | Nil  | Nil  | Nil  | Nil   |
| Total                   | 62   | 59   | 65   | 186   |
| SOURCES OF REFERRAL     |      |      |      |       |
| Gen. Med. Practitioners | 50   | 52   | 44   | 146   |
| District Nurses         | 11   | 6    | 18   | 35    |
| Health Visitors         | 1    | 1    | 3    | 5     |
| Total                   | 62   | 59   | 65   | 186   |

## Mental Health

The Mental Welfare Officer who gives three-quarters of his time to Health activity and one-quarter to Welfare, made the following visits on Health Department activity in 1964.

Visits: *Mental Illness*—Enquiries 132, After-care 789, Hospital 14.

Visits: *Mental Subnormality*—222, including routine supervision visits.

The problem of resettling cases recovered from mental illness has become more difficult through the absorption of available lodgings by students at the Colleges of Higher Education. As the future prospects are even more sparse with University demands added the question of providing hostel accommodation was reviewed. The need for accommodation to be made available is clear but the study of experience elsewhere and the estimate of demand from the hospital has led us to go forward warily.

Admissions to hospital during 1964 were as follows:—

|  |     |     |     |     |    |
|--|-----|-----|-----|-----|----|
| Formal—Section 29                                    | ... | ... | ... | ... | 9  |
| Section 25   | ... | ... | ... | ... | 13 |
| Section 26   | ... | ... | ... | ... | 1  |
| Informal admissions involving Mental Welfare Officer |     |     |     |     | 11 |
| After-care—New Cases                                 | ... | ... | ... | ... | 16 |
| Current Cases  | ... | ... | ... | ... | 23 |
| Cases removed from After-care...                     | ... | ... | ... | ... | 5  |



The Canterbury Training Centre provides 50 places for the training of youngsters and adults. The age distribution is as follows:—

|                   | <i>Under 16</i> |               | <i>Over 16</i> |               | <i>Total</i> |
|-------------------|-----------------|---------------|----------------|---------------|--------------|
|                   | <i>Male</i>     | <i>Female</i> | <i>Male</i>    | <i>Female</i> |              |
| Canterbury Cases  | 8               | 5             | 5              | 4             | 22           |
| Kent County Cases | 5               | 4             | 7              | 9             | 25           |
|                   | —               | —             | —              | —             | —            |
| Total             | 13              | 9             | 12             | 13            | 47           |
|                   | —               | —             | —              | —             | —            |

All except one of the Canterbury cases under supervision who are between 5 and 15 years of age attend the Training Centre.

The development of 3 r's work made progress during the year. Admissions to the centre at an earlier age, resulting from the earlier recognition of mental subnormality and acceptance of the value of training has created pressure in the nursery accommodation. This was helped by the appointment of an assistant in the nursery, but it is clear that a separate unit for adults is an early requirement.

*Summary of cases of mental subnormality:—*

|                                    |     |     |     |     |     |     |
|------------------------------------|-----|-----|-----|-----|-----|-----|
| Under supervision                  | ... | ... | ... | ... | ... | 46  |
| Awaiting admission to hospital     | ... | ... | ... | ... | ... | 3   |
| Admitted to hospital during 1964   | ... | ... | ... | ... | ... | Nil |
| Cases reported by L.E.A.           | ... | ... | ... | ... | ... | 4   |
| New cases placed under supervision | ... | ... | ... | ... | ... | 7   |
| Removed from supervision           | ... | ... | ... | ... | ... | 4   |
| Deaths                             | ... | ... | ... | ... | ... | Nil |
| Total visits                       | ... | ... | ... | ... | ... | 158 |
| Cases admitted to temporary care   | ... | ... | ... | ... | ... | 6   |
| Cases under guardianship           | ... | ... | ... | ... | ... | Nil |

Cases supervised: Male—9 under 16 years; 21 over 16.

Female—7 under 16 years; 9 over 16.

Total 46.

**National Assistance Act 1948, Section 47**

No orders were sought for removal of cases to hospital. This gives a false impression of the number of cases which could have come to this pass but for the activity of District Nurse, Social and Mental Welfare Officer, Public Health Inspectors, and others. One particular case brought to our notice by the family doctor was an old lady, well housed, with helpful relatives and district nurse attending who, by her intolerance of help and refusal to rest in bed and constant interference with treatment, having her own ideas



on what was needed, was bringing herself into a sorry and miserable state. One admired her spirit and realised that in the background was a fear and foreboding of going to hospital, which through her own behaviour was the only solution. After days of unsuccessful cajoling the need to seek an order for removal to hospital seemed inevitable. The Geriatric consultant agreed to visit as a preliminary and to our great relief, whether it was the rich warm bedside manner or the gentle promise of his presence I know not, the old lady agreed to go to hospital forthwith, leaving behind her great gratitude that we were spared the hateful process of legal removal. In fact she seemed to win all the way.

### Accommodation for the Elderly

At the end of the year there were 118 old persons' bungalows, 175 old persons' flats (191 old persons' units have wardens available), 51 places in local authority old persons' homes, one registered private old persons' home with 4 places and approximately 80 almshouses. One historic 'hospital' was being modernised, one has been modernised with good amenities provided and two groups of almshouses need and await such treatment which will reduce the number of units.

There are thus 326 supervised old persons units of which 242 are local authority provided.

### Blind and Partially Sighted Persons

The cases notified on Form B.D.8 during 1964 numbered 10.

| <i>Condition present</i> | <i>Cataract</i> | <i>Glaucoma</i> | <i>Myopia</i> | <i>Others</i> | <i>Total</i> |
|--------------------------|-----------------|-----------------|---------------|---------------|--------------|
| No treatment recomb.     | —               | —               | 1             | 4             | 5            |
| Treatment needed ...     | 1               | 1*              | —             | 3             | 5            |
| Treated on follow-up ... | 1               | 1*              | —             | 2             | 4            |

\* Ophthalmic medical supervision only.

We observe our interest in the cases on the register by a periodic enquiry by home visit (Health Visitor) or through the Welfare Department Visitor to the Blind.

### Nursing Homes and Nurses Agencies

There is one private Nursing Home (6 places) and one registered Nurses Agency in the City.

### Nursery and Child Minders

Although there was only one registered Child Minder at the end of 1964 it is known that children are minded by relatives or neighbours, but that few of the cases fall within the definition of



registrable minders. Private fosterings now come under the Child Life Protection supervision of the Children's Department.

Two Pre-School Play Groups (Play Centres) are registered, one run by the W.V.S. for 40 children aged 2-5 years, and one by St. Mary Bredin's Church for children aged 2-5 years. Both receive grants in aid from the Council.

The registered Child Minder runs a Nursery School in the premises in which she lives.

### **Voluntary Organisations**

Two meetings were held with the Voluntary Organisations in 1964, for general discussion on points common to their activity and the Council's Health and Welfare functions. The second meeting was held at the request of the Voluntary Organisations' representatives as they found that the meeting helped them to know what was going on in other fields of voluntary activity just as much as in the Council's affairs.

### **Training Facilities and Visits of Observation**

Two trainee Health Visitors were accepted for two weeks' practical work during the year, and two parties of overseas visitors were received. Student Nurses from Kent and Canterbury Hospital and from St. Augustine's Hospital are attached to the Health Visitors and District Nurses for an observation day. One pupil Midwife is attached from the Part II Training School at Kent and Canterbury Hospital for district training in the City. Lecturers are provided for the Midwifery Part II Training School and Nurses Training School at the Kent and Canterbury Hospital and help is given in arranging visits of observation.

Kent County Health Department has regularly offered facilities to the nurses of Canterbury District Nursing Association to attend meetings of their annual refresher course and this is greatly appreciated by the nurses. The district midwives also enjoy such privileges.

The Mental Welfare Officer attends meetings at St. Augustine's Hospital arranged by the Consultant Psychiatrists when Mental Health work and liaison is discussed.

All members of the nursing staff are sent on refresher courses aiming at once in every four years. Two midwives, two district nurses and one health visitor were sent to courses in 1964. The Principal Dental Officer, the Deputy Medical Officer of Health and Home Help Organiser were also sent on special courses during the year.



## Infectious Disease Tables.

### Cases Notified during 1964

| Disease        | Age Group    |         |     |     |     |     |     |       |       |     |       | Quarterly Incidence |     |     |     |       |
|----------------|--------------|---------|-----|-----|-----|-----|-----|-------|-------|-----|-------|---------------------|-----|-----|-----|-------|
|                | Age Un-known | Under 1 | 1-2 | 2-3 | 3-4 | 4-5 | 5-9 | 10-14 | 15-24 | 25+ | Total | 1st                 | 2nd | 3rd | 4th | Total |
| Measles ...    | —            | 5       | 15  | 14  | 19  | 14  | 76  | —     | —     | —   | 143   | 1                   | 3   | 54  | 85  | 143   |
| Scarlet Fever  | —            | —       | —   | —   | —   | —   | 6   | 1     | 2     | —   | 9     | —                   | 4   | 1   | 4   | 9     |
| Whooping Cough | —            | 6       | 3   | 8   | 10  | 4   | 17  | 3     | 1     | 1   | 53    | 7                   | 20  | 20  | 6   | 53    |
| Dysentery ...  | —            | —       | —   | —   | —   | —   | —   | —     | —     | —   | —     | —                   | —   | —   | —   | —     |
| Erysipelas ... | —            | —       | —   | —   | —   | —   | —   | —     | —     | 2   | 2     | —                   | 1   | —   | 1   | 2     |
| Food Poisoning | —            | —       | —   | —   | —   | —   | —   | —     | —     | 1   | 1     | —                   | —   | 1   | —   | 1     |

### Other Infectious Diseases Notified.

| Diseases                       | Age Group    |              |      |       |       |       |       |       | Quarterly Incidence |     |     |       |       |
|--------------------------------|--------------|--------------|------|-------|-------|-------|-------|-------|---------------------|-----|-----|-------|-------|
|                                | Age Un-known | Under 5 yrs. | 5-14 | 15-44 | 45-64 | 65+   | Total | 1st   | 2nd                 | 3rd | 4th | Total |       |
| Acute Pneumonia                | —            | —            | —    | —     | 2     | 1     | 3     | 2     | 1                   | —   | —   | 3     |       |
| Acute Encephalitis (infective) | —            | —            | —    | —     | —     | —     | —     | —     | —                   | —   | —   | —     |       |
|                                |              | Under 5 yrs. | 5-14 | 15-24 | 25-44 | 45-64 | 65+   | Total | 1st                 | 2nd | 3rd | 4th   | Total |
| Tuberculosis Respiratory       |              | —            | —    | 1     | 4     | 3     | 2     | 10    | 3                   | —   | 3   | 4     | 10    |
| Other forms                    |              | —            | —    | —     | 1     | —     | —     | 1     | —                   | —   | —   | 1     | 1     |

### Tuberculosis

There were 11 cases notified, 10 pulmonary (6 male, 4 female). The T.B. Register showed a reduction of current cases to 98 male, 58 female pulmonary and 19 male, 12 female non-pulmonary. The 1963 *Annual Report* gave 25 years notifications of pulmonary tuberculosis. The rate for 1964 was 3.1 cases per 10,000 population.

The Mass Radiography Unit visited the City in September and



x-rayed 5,533 adults, and 1,178 members of Secondary Schools or Colleges of Higher Education. This was a marked increase on the previous visit and represented the equivalent of 1 in 5 of the population. But it is unfortunate that the other 4 in 5 who could have used the unit failed to turn up.

### **Food Poisoning and Salmonellosis**

There was only one case of food poisoning notified, no cause identified. The suspected food was a meal of crab and spirits.

A limited outbreak of *Salmonella Muenchen* infection was investigated and controlled. The family doctor phoned to say that he had sent a faecal specimen to the laboratory from an 18 week old baby with loose stools, blood and mucus, and a salmonella had been isolated. This was later identified as salmonella muenchen.

Investigation revealed three families all related and frequent visitors to each other, infected with salmonella muenchen; eight out of 14 persons

Household A: All positive stools. M 1.6/12 loose stools onset late May; M. 4/12 loose stools and blood mucus, onset 7/10 June. F mother of these, symptomless+, Grandfather symptomless+, Grandmother symptomless+. No negative residents in household.

Household B 2 Positives—Mother and breast-fed baby 7 weeks old.

2 Negatives—Father, M 1.6/12.

Household C 1 Positive—M 2.6/12.

4 Negatives—Father, mother, f. 5 years, m. 1 month.

It was found that there was close mixing of the families and children, and nappies were interchanged. On first visit the sick child was with three young children from the other households, two of the mothers and grandmother. Other neighbour contacts were investigated without finding other positives. The oldest member of the three households proved very difficult to clear of infection and may have been a persistent carrier from the beginning. As she was employed in the School Meals Service she was of particular interest. She did not give rise to any new infections in the household during her carrier state and the early cases cleared quickly on treatment. This finding of moridity in the young, symptomless state in the adults and persistence of infectivity in the elderly is akin to the experience of salmonellosis in other branches of the animal kingdom, associated especially with close herding such as occurred in these households.

### **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 Hospital Laboratory and Preston Hall, Maidstone.



## Venereal Diseases

Canterbury (Kent and Canterbury Hospital)—

Male—Tuesday, 3-4 p.m.

Female—Tuesday, 2-3 p.m.

Dover (Royal Victoria Hospital)—

Male—Monday, 4.30-5 p.m.

Wednesday, 4.30-5 p.m.

Margate (General Hospital)—

Male—Friday, 11 a.m.-12 noon.

Female—Friday, 10-11 a.m.

The local incidence of venereal disease cannot be clearly defined for the purpose of this report and it must be sufficient to state that new cases of syphilis and gonorrhoea arising in the area were diagnosed at the local centre during 1964, and that there is no room for complacency in this matter. The social worker service is run from the clinic under the direction of the Venereologist.

The need for health education to abate the risks of promiscuity is recognised, but it is also important that those likely to be asked about such matters should give a knowledgeable and helpful answer. Use was made of the Ministries' pamphlet, and it was given a wide distribution amongst those in contact with young women and girls through normal or voluntary work.

## VITAL AND MORBID STATISTICS

**Population:** Mid-1964—32,010.

|                                     |        |     |               |        |    |
|-------------------------------------|--------|-----|---------------|--------|----|
| <b>Live Births:</b><br>(Registered) | Male   | 302 | Illegitimate: | Male   | 21 |
|                                     | Female | 250 |               | Female | 23 |
|                                     | Total  | 552 |               | Total  | 44 |

Live birth rate per 1,000 population: 17.2.

Corrected (1.07) for comparison 18.40: England and Wales: 18.4.

|                     |        |   |               |        |   |
|---------------------|--------|---|---------------|--------|---|
| <b>Stillbirths:</b> | Male   | 5 | Illegitimate: | Male   | 1 |
|                     | Female | 2 |               | Female | — |
|                     | Total  | 7 |               | Total  | 1 |

Stillbirth rate per 1,000 live and stillbirths: 1.25. England and Wales: 16.3.

Total live and stillbirths: 559.

|                       |        |    |               |        |   |
|-----------------------|--------|----|---------------|--------|---|
| <b>Infant Deaths:</b> | Male   | 7  | Illegitimate: | Male   | 1 |
|                       | Female | 5  |               | Female | — |
|                       | Total  | 12 |               | Total  | 1 |

Infant Mortality per 1,000 live births (total): 21.7. England and Wales: 20.0.

Infant Mortality per 1,000 live births (legitimate): 20.6.

Infant Mortality per 1,000 live births (illegitimate): 22.7.



Infant deaths under 4 weeks: Male 5  
 Female 4  
 Total 9

Under 1 week: Male 5  
 Female 2  
 Total 7

Neonatal Mortality Rate per 1,000 live births (total): 12.6.

Illegitimate live births per cent of total live births: 7.9.

Maternal Deaths (including abortions): Nil.

**Deaths:** Male 203  
 Female 224  
 Total 427

Death rate (all causes) per 1,000 population: 13.3.

Corrected (0.76) for comparison: 10.1. England and Wales: 11.3.

### Infant Deaths

| Cause of death showing age and sex      | Under 1 day | 1 week | 1 month | 1 year | Total |
|---|-------------|--------|---------|--------|-------|
| Congenital Defects                      | f           | m      | —       | —      | 2     |
| Respiratory Infection complicating same | —           | —      | —       | f m    | 2     |
| Prematurity                             | m m         | m f    | f       | —      | 5     |
| Atelectasis Neon.                       | —           | m      | —       | —      | 1     |
| Pneumococcal Infection                  | —           | —      | f       | —      | 1     |
| Meningitis                              | —           | —      | —       | m      | 1     |
|   | 3           | 4      | 2       | 3      | 12    |

Since 1960 the Infant Mortality rate has shown a steady rise. It had reached a satisfactory low level of around 13 per 1,000 live births in 1959 but climbed back beyond the national level in the four succeeding years. Although the rate declined in 1964 it is still necessary to avoid complacency. Scrutiny of all infant deaths in the three years 1962, 63, 64, showed a sharp increase in avoidable infant deaths in 1963 in the group of causes associated with infection or neglect. There was also a concentration of such deaths in one locality of the City and as a remedial measure arrangements were made for a Health Visitor to be given greater access to the families and to work closely with the medical officer at the medical centre in that area. There were no avoidable deaths in that area in 1964.



## All Deaths by Age Groups.

|        | Un-<br>der<br>4<br>wks. | 4 wks.<br>and<br>under<br>1 yr. | 1-5 | 5-15 | 15-25 | 25-35 | 35-45 | 45-55 | 55-65 | 65-75 | 75<br>and<br>over | Total |
|--------|-------------------------|---------------------------------|-----|------|-------|-------|-------|-------|-------|-------|-------------------|-------|
| Male   | 5                       | 2                               | —   | 1    | 1     | 2     | 9     | 14    | 35    | 45    | 89                | 203   |
| Female | 4                       | 1                               | —   | —    | —     | 2     | 1     | 8     | 17    | 48    | 143               | 224   |
| TOTAL  | 9                       | 3                               | —   | 1    | 1     | 4     | 10    | 22    | 52    | 93    | 232               | 427   |

| Causes of Death                                | 1963 | 1964 |
|--|------|------|
| Tuberculosis of Respiratory System .. ...      | 1    | —    |
| Tuberculosis, Other Forms ... ..               | —    | —    |
| Syphilitic Diseases ... ..                     | —    | 1    |
| Other infective and parasitic diseases ... ..  | —    | 1    |
| Malignant Neoplasm, stomach ... ..             | 6    | 10   |
| Malignant Neoplasm, lung and bronchus ... ..   | 13   | 21   |
| Malignant Neoplasm, breast ... ..              | 6    | 4    |
| Malignant Neoplasm, uterus ... ..              | 1    | 3    |
| Other malignant and lymphatic neoplasms ... .. | 27   | 28   |
| Leukaemia and Aleukaemia ... ..                | 4    | —    |
| Diabetes ... ..                                | 1    | 3    |
| Vascular Lesions of Nervous System ... ..      | 57   | 67   |
| Coronary Disease, Angina Pectoris ... ..       | 83   | 80   |
| Hypertension with Heart Disease ... ..         | 9    | 13   |
| Other Heart and Circulatory Diseases ... ..    | 84   | 69   |
| Influenza ... ..                               | 4    | —    |
| Pneumonia ... ..                               | 40   | 22   |
| Bronchitis ... ..                              | 21   | 28   |
| Other Disease of Respiratory System ... ..     | 1    | 2    |
| Ulcer of stomach and duodenum ... ..           | 2    | 4    |
| Gastritis, Enteritis and Diarrhoea ... ..      | 2    | 1    |
| Nephritis and Nephrosis ... ..                 | 5    | 8    |
| Hyperplasia of Prostate ... ..                 | 2    | 1    |
| Pregnancy, Childbirth and Abortion ... ..      | —    | —    |
| Congenital Malformation ... ..                 | 4    | 5    |
| Other defined and ill defined diseases ... ..  | 24   | 39   |
| Motor Vehicle accidents ... ..                 | 6    | 3    |
| All other accidents ... ..                     | 7    | 8    |
| Suicide, Homicide and War ... ..               | 5    | 6    |
| TOTAL ... ..                                   | 415  | 427  |



# REPORT OF THE PUBLIC HEALTH INSPECTOR FOR THE YEAR 1964

---

Public Health Department,  
Canterbury.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting the annual report on the health inspection services carried out in 1964.

In previous reports I have referred to the efforts which have been made to persuade owners to instal baths, hot water supplies and indoor W.C. accommodation, etc., where tenants expressed a desire to have these essential amenities and were willing to pay increased rent. Our efforts have been disappointing and the Housing Act 1964 which came into operation in August gives the Council power to require the provision of these amenities.

As was expected the Aberdeen typhoid epidemic aroused considerable interest among purveyors of cooked meat and I should like to mention one point concerning such food. Most of the cooked meat exposed for sale in an unpacked state in the City is kept under refrigerated conditions. There is no legal requirement to demand this and the change in selling practice has been accomplished by persuasion during the last 8 or 9 years.

It was with particular interest that I noted a large-scale distributor of meat pies had begun to "date" his products in a manner for all to read. His enterprise should obviate most, if not all, of the complaints of mouldy pies and, of course, remove the suspicion that roundsmen may take back pies from one shop and supply them to another.

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 ... .. 594

|                              | Houses | Food Premises | Offices and Shops | Factories |
|------------------------------|--------|---------------|-------------------|-----------|
| Number of visits ... ..      | 2,276  | 1,537         | 287               | 75        |
| Defects remedied ... ..      | 215    | 140           | 8                 | 2         |
| Informal Notices sent ... .. | 63     | 77            | 51                | —         |
| Formal Notices sent ... ..   | 4      | —             | —                 | —         |

### *Prosecutions:*

For having in possession unfit food £50 and for 3 contraventions of Food Hygiene (General) Regulations 1960 £30, plus £10 10s. 0d. costs.

For selling a mouldy ham and egg pie. Fined £20 and £2 2s. 0d. costs.

### *Warnings:*

Two to dairy farmers for consigning milk containing antibiotics.  
Four for selling mouldy food.

Two for selling bread containing oil stains.

One for selling bread containing a screw.

Two for contraventions of the Fertilisers and Feeding Stuffs Act 1926.

One for using a milk bottle with stains on interior.

## Housing Acts

Number of new houses/units erected in 1964:

|                          |     |     |     |     |     |              |     |
|--------------------------|-----|-----|-----|-----|-----|--------------|-----|
| 1. By the Council        | ... | ... | ... | ... | ... | ...          | 72  |
| 2. By private enterprise | ... | ... | ... | ... | ... | ...          | 223 |
|                          |     |     |     |     |     |              | 295 |
| Houses demolished        | ... | ... | ... | ... | ... | ...          | 12  |
|                          |     |     |     |     |     |              | 283 |
|                          |     |     |     |     |     | Net increase | 283 |

Number of houses in respect of which:

|   |     |     |     |     |     |     |    |
|---|-----|-----|-----|-----|-----|-----|----|
| (a) Demolition orders were made                                   | ... | ... | ... | ... | ... | ... | —  |
| (b) Closing orders were made                                      | ... | ... | ... | ... | ... | ... | 12 |
| (c) Undertakings not to use for human habitation were accepted    | ... | ... | ... | ... | ... | ... | 5  |
| (d) Closing orders were determined after houses had been made fit | ... | ... | ... | ... | ... | ... | 5  |



|   |        |    |
|---|--------|----|
| Houses repaired as a result of informal action                                | ... .. | 92 |
| Houses repaired after the service of Statutory Notice under Public Health Act | ... .. | 3  |
| Houses repaired after service of formal notice under Housing Act—             |        |    |
| (a) by owners   | ... .. | —  |
| (b) by Council in default of owner...   | ... .. | —  |

Three hundred and seventeen routine housing inspections were made and where the house lacked essential amenities the question of improving the house was discussed with the occupier, but there was little response from owners of rented houses. Sixteen of the houses had items of disrepair and the defects received attention without the service of statutory notices.

A survey was made during the year of the houses which just escaped the first list of unfit houses prepared in 1955 and as a result of this, a second list of 149 unfit houses was compiled. The survey was also used to prepare a list of houses with an expected life not exceeding 15 years, this period being the minimum period for a house to qualify for an improvement grant.

No cases of overcrowding came to light during the year.

There are fortunately no signs of large-scale multiple occupation producing the bad conditions found in some towns. There is on the other hand a substantial amount of letting of one or two rooms and a considerable number of large houses have been split up to provide small units of accommodation. Most of this accommodation is of a good standard.

There are no common lodging houses in the City.

### Improvement Grants

The applications for Discretionary Improvement Grants are investigated and the houses inspected to ascertain state of repair. Twenty-two houses were inspected and in 12 cases the owners were asked to carry out repairs.

Sixty applications for Standard Grants were received during the year.

The Standard Grant scheme is administered by this department and the authority given by the Council for me to approve grants where the statutory conditions are fulfilled has reduced the time between application and approval to a minimum. Approval is usually given within a fortnight.

Forty-eight of the 60 applications for standard grants were in respect of owner-occupied houses. This follows the pattern of previous years. Comment has been made previously that something more than persuasion was necessary if improvements to rented houses are to take place during the tenancy of the present occupiers. The Housing Act 1964 which became operative in August gives power to the Council to require the provision of the 5 basic essentials:—bath, wash hand basin, hot water supply, indoor W.C. and larder, and a start was made in the autumn on visiting some 500



houses in the Martyrs Field Road area to find out the amenities in the houses and the views of the occupiers of those houses lacking essential amenities.

Time will tell whether our fears are justified that the procedure to be followed to secure improvements by means of Improvement Areas is cumbersome and involved. On the other hand this should not deter us from helping those tenants who so much desire modern amenities and are willing to pay increased rent for them.

The Housing Act 1964 also increased in certain cases the maximum amount for a Standard Grant from £155 to £350. One of the conditions for this increased amount is that where it is not practicable to provide a bathroom in the existing dwelling a new structure has to be built to house a bath. This, it is felt, will stimulate the applications for Standard Grants from owners of houses with only two bedrooms.

### **Unfit Housing Programme**

The first list of unfit houses prepared in 1955 contained 632 houses and the second list accepted by the Council in 1964 contained 149 houses, a total of 781. 581 had been dealt with at the end of 1964. As a result of the follow-up detailed inspection of the 581 houses, 29 were reclassified as fit. These were included as "grey" houses in compulsory purchase orders and consequently bought. The detailed inspection of houses mainly adjacent to the 581 referred to indicated in some cases a re-classification in the opposite direction and 99 additional houses have been dealt with under clearance area and closing order procedure. 46 of the houses on which closing orders were placed have been modernised and re-occupied. Most of these have been improved well beyond minimum standards and show what can be done when both ideas and money are adequate.

In 1964, 5 clearance areas involving 34 houses were represented and 14 houses are being dealt with under compulsory purchase order procedure.

In 1964 public inquiries were held in respect of 7 clearance areas involving 59 houses and of which 33 appeals had been lodged. 4 appeals were allowed and 3 of the houses were in 1 area. There were no appeals against 25 houses in 3 other clearance areas and these were confirmed without modification.

Confirmation without modification was also received in 1964 in respect of an appeal held in 1963 concerning 19 houses in an area of 22 houses.

### **Housing**

In the ten year period 1955-1964, 1,032 persons have been rehoused by the Council from some 600 houses dealt with under the Housing Acts. An interesting point is that the density of occupancy of such properties was less than 2 per dwelling as compared with



just over 3 people per dwelling for the City as a whole. Although many of the houses dealt with were occupied by elderly people the percentage of children under 10 of the total number of people was 14%—the same as for the whole City.

|  | <b>Rent Act, 1957</b> | <i>Total<br/>to date</i> |
|--|-----------------------|--------------------------|
| No. of applications for certificates ... ..  | 1                     | 138                      |
| No. of decisions not to issue certificate ...  | —                     | 1                        |
| No. of decisions to issue certificates ...   | 1                     | 137                      |
| (a) in respect of some but not all defects   | 1                     | 102                      |
| (b) in respect of all defects ... ..   | —                     | 35                       |
| No. of undertakings given by landlords ...   | 1                     | 39                       |
| No. of undertakings refused by local authority   | —                     | —                        |
| No. of disrepair certificates issued ... ..  | —                     | 90                       |
| No. of applications by landlords to local authority for cancellation of certificates ... | —                     | 47                       |
| Objections by tenants to cancellation of certificates ... ..                             | —                     | 16                       |
| Decision by local authority to cancel in spite of tenant's objections ... ..             | —                     | —                        |
| Certificates cancelled by local authority ...  | —                     | 34                       |
| No. of certificates invalid owing to tenant leaving or house demolished ... ..           | —                     | 41                       |
| No. of certificates in operation at end of year  | —                     | 15                       |

### Water Supply

The Canterbury and District Water Company own the water undertaking and maintain a very satisfactory supply both as regards quality and quantity. Every house in the area has a piped supply of town's water inside the house.

There is close co-operation between the Water Company and the Public Health Department and anything unusual revealed by Company's sampling would be disclosed.

The Company carry out bacteriological tests three times weekly of the raw water and an independent analyst carries out bacteriological tests monthly and chemical analysis quarterly. All the samples were satisfactory.

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).

Four samples of water from houses in various parts of the area were sent for bacteriological examination and chemical analysis and all were of excellent quality. The bacteriological examinations showed that B. Coli presumptive were absent in 100 c.c.s.

There is no plumbo solvent action in the town's water and the



fluorides are insignificant.

Six samples of water were obtained from the Local Education Authority swimming pools for bacteriological examination and eight for chemical examination—all were satisfactory.

Samples of water from the paddling pool at Westgate Gardens indicated a serious contamination with *B. Coli* of faecal origin. The pool forms part of a disused swimming pool the water supply to which is from a ditch running along the north-west side of the pool. This pool is a much appreciated amenity especially when the weather is good as it was last summer and although it is supposed to be only for paddling, children do in fact bathe in it. The Department thought that there was danger in the continued use of the pool and as a temporary expedient a chemical containing chlorine was added to the water twice daily in an endeavour to kill off *B. Coli*. This, however, had little effect on the degree of contamination. Subsequently in September the Markets and Parks Committee resolved that provision be made in the next year's estimates for improving the condition of the paddling pool, including the provision of a mains water supply and the installation of a chlorination and filtration plant.

Chemical and bacteriological samples of water from a local factory with its own supply indicated that the water should not be used for dietetic purposes. After representations were made to the firm concerned a mains supply was installed.

During the year a water testing apparatus was purchased which enables an "on-the-spot" assessment of the pH value and free chlorine content of swimming bath water to be made. This enables us to judge the efficiency of the filtration and chlorination plant and to give any advice necessary to the operators.

### Food Supplies

Mr. J. H. E. Marshall, M.A., F.R.I.C. was our Public Analyst throughout the year.

Ninety-seven formal samples and 48 informal samples were submitted for chemical analysis.

| <i>Article</i>                 | <i>No. of Samples</i> |                 |
|--------------------------------|-----------------------|-----------------|
|                                | <i>Formal</i>         | <i>Informal</i> |
| Milk ... ..                    | 50                    | 3               |
| Channel Island Milk ... ..     | 13                    | 2               |
| Ice Cream ... ..               | —                     | 5               |
| Dairy Ice Cream ... ..         | —                     | 3               |
| Pork Sausages ... ..           | 5                     | —               |
| Self-raising Flour ... ..      | 6                     | —               |
| Mineral Waters ... ..          | 1                     | 8               |
| Freeze Dried Vegetables ... .. | 1                     | 4               |
| Food Colours ... ..            | —                     | 4               |
| Toffee ... ..                  | 1                     | 3               |
| Fish Cakes ... ..              | 3                     | —               |
| Jam and Marmalade ... ..       | 3                     | 1               |



|                     |     |     |     |   |   |
|---------------------|-----|-----|-----|---|---|
| Tinned Rice Pudding | ... | ... | ... | 1 | 1 |
| Malt Vinegar        | ... | ... | ... | 2 | — |
| Minced Beef         | ... | ... | ... | 5 | — |
| Meat Pies ...       | ... | ... | ... | 3 | — |
| Fruit Squashes      | ... | ... | ... | 2 | — |

and one each of the following:—essence of anchovies, catering mix, drinking chocolate, drugs, wheat cereal, canned chicken, corned beef, currant bun, tinned tongue meat, health drink, egg and chicken delight, minced onion, cream pie filling, canned lotus nuts and pecan nuts.

All except 8 were satisfactory and these were:—

- No. 2055. "Farm" milk, that is, milk sampled in course of delivery to distributor and found to contain penicillin, 0.06 i.u. per m.l. Warning to milk producer.
- No. 2084. Ginger beer. Contained no ginger and insufficient sodium carbonate. Manufacturer cautioned.
- No. 2088. Freeze-dried brussels sprouts sampled informally and found to contain 2,400 parts per million of sulphur dioxide. Followed up by sample No. 2095.
- No. 2095. Freeze-dried brussels sprouts sampled formally and found to contain 2,180 p.p.m. of sulphur dioxide. No further action as it was considered that brussels sprouts were a variety of cabbage and the preservative found did not exceed that permitted in cabbage.
- No. 2104. "Farm" milk found to contain penicillin, 0.06 i.u. per m.l. Producer cautioned.
- No. 2181. "Farm" milk found to contain penicillin 0.06 i.u. per m.l. Warning to milk producer.
- No. 2193. Cream. This was a German product described as a pudding and pie filling and the use of the word "cream" was improper. The substance resembled a vanilla flavoured custard powder. The matter was taken up with the importers and referred to the Ministry of Agriculture, Fisheries and Food Labelling Division.

Miscellaneous:

- No. 67. Pecan Nuts. The Analyst reported "The nuts have been treated with a colouring matter which is not a permitted colour". The matter was under consideration at the end of the year.

In 1964, 57 of the 68 samples of milk submitted for the usual chemical analysis were also checked for the presence of antibiotics and in the deliveries from 3 farms penicillin was present. The amount in each case was 0.06 international units per millilitre.

It has been authoritatively stated that the presence in milk of any antibiotic is undesirable. From the testing referred to above it is obvious that some dairy farmers were not diverting from sale for the recommended period the milk from an animal which has had anti-



biotic treatment for mastitis. Alternatively, there is the possibility that in some cases a cow might secrete milk containing a trace of antibiotics for a longer period than expected. It is not for me to enlarge on whether this can happen, but to mention that the consumption of milk containing antibiotics is undesirable because of the possibility that it could have ill effects on the health of a few people who may be, or who may become, particularly sensitive to antibiotics. There is a further complication in that some of the new antibiotic preparations for treating mastitis in cows now contain chloramphenicol and residues of this in milk are likely to be a greater hazard than even penicillin.

The time for control by regulation is long overdue and prosecutions will no doubt have to be taken if antibiotic free milk is to be maintained.

The average composition of the samples of milk was:—

|   | <i>Fat</i> | <i>Solids<br/>Not Fat</i> |
|---|------------|---------------------------|
| Milk (other than Channel Islands milk) ... .. | 3.79%      | 8.66%                     |
| Channel Island milk ... ..                    | 5.04%      | 9.06%                     |
| The minimum standards are                     |            |                           |
| Milk ... ..                                   | 3.0%       | 8.5%                      |
| Channel Island milk ... ..                    | 4.0%       | 8.5%                      |

### Public Health (Preservative in Food) Regulations

All the samples in the preceding table were examined for preservative and 2 adverse reports were made by the Analyst. These are referred to under samples Nos. 2088 and 2095 on the previous page and no action was taken for the reason stated.

### Food Hygiene

| Types of food premises in the area:— |    | <i>Inspections</i> |
|--------------------------------------|----|--------------------|
| Schools and Works' Canteens ... ..   | 25 | } 411              |
| Restaurants and Cafes ... ..         | 66 |                    |
| Butchers ... ..                      | 32 | 200                |
| Bakers and Confectioners ... ..      | 17 | 70                 |
| Grocers ... ..                       | 83 | 374                |
| Fried Fish Shops ... ..              | 5  | 21                 |
| Wet Fish Shops ... ..                | 8  | 32                 |
| Sweet Shops ... ..                   | 37 | 40                 |
| Licensed Premises ... ..             | 82 | 180                |
| Greengrocers ... ..                  | 22 | 76                 |
| Dairies ... ..                       | 3  | 79                 |
| Other food premises ... ..           | 4  | 54                 |



Number of registered premises:—

|   |     |     |     |     |     |     |     |     |
|---|-----|-----|-----|-----|-----|-----|-----|-----|
| Dairies   | ... | ... | ... | ... | ... | ... | ... | 3   |
| Premises from which bottled milk is sold          | ... | ... | ... | ... | ... | ... | ... | 34  |
| For the manufacture of ice cream                  | ... | ... | ... | ... | ... | ... | ... | 4   |
| For the sale and storage of ice cream             | ... | ... | ... | ... | ... | ... | ... | 113 |
| For the preparation of sausages or processed food | ... | ... | ... | ... | ... | ... | ... | 38  |

The outbreak of typhoid in Aberdeen had its repercussions in Canterbury in that the inspectors paid many visits to food shops and restaurants to trace certain tins of corned beef which the Ministry of Health had advised should be withdrawn from sale. Some such tins were found and were returned to warehouses. Three of the tins were submitted for bacteriological examination but in each case the Public Health Laboratory found no pathogenic organisms.

An opportunity was taken during the year to examine the methods of cleaning and sterilising the knives of meat slicing machines in various establishments. It became obvious that too little attention had been paid to this side of hygiene mainly because it was not a simple operation. The inspectors have given advice on the best methods to use and it has been noted that in some cases, but not all, such advice has been followed.

Investigations were also undertaken into the sale of "hot" pies, that is pies that are warmed up at food premises for immediate consumption. In some cases it was found that the temperature of the meat inside such pies after heating was only around blood heat—a temperature at which bacteria will multiply profusely, obviously a danger particularly if the pies are allowed to remain at such a temperature for any length of time as they often are. A temperature of at least 145° F. should be attained to ensure that there is no danger. Representations made to the firms concerned resulted in improvements being made.

During the year the General Market was started at the Cattle Market. There are several stalls selling foodstuffs. Inspections were carried out to ensure compliance with the relevant paragraphs of the Food Hygiene (General) Regulations 1960. At the time of writing the Regulations dealing with stalls are not nearly as exacting as those applying to ordinary shops. The Government, however, have intimated that new Regulations dealing with food stalls will soon be introduced.

The number of complaints concerning irregularities in food has been increasing in recent years. It is considered that this is not due to any increased carelessness on the part of food manufacturers but rather to a greater awareness on the part of the public. Housewives are no longer prepared to accept mould in meat pies, dark



coloured stains in bread or such like irregularities, but will complain to the Health Department. The resultant investigations with the firms concerned will ultimately it is hoped lead to greater care in food manufacture and less cause for complaint.

1. Fish and chips alleged to contain a cigarette end. The Analyst reported "The object was a cigarette end. The whole object was saturated with oil. Particles adhering to the paper gave a reaction for starch. It would be very difficult to conclude that this cigarette end was cooked in with the fish and chips and to exclude the possibility of the cigarette end having been squashed to the fish and chips afterwards." The fish fryer concerned was interviewed and warned of the serious nature of the complaint, but in view of the Analyst's report no further action was taken.
2. Apple turnover with mould on the fruit. A warning was issued to the retailer concerned.
3. Two mouldy pork pies. Representatives of the manufacturers and retailers were interviewed and improvements in the handling of such pies were made. A warning was issued.
4. Mouldy steak and kidney pie. A warning was issued.
5. Canned steak and kidney pudding. The contents were a mass of mould. No obvious defects in the can could be detected. The matter was taken up with the manufacturers—a well-known firm—for them to investigate.
6. Breakfast cereal containing dark-brown fragments. The Analyst reported that the fragments included a considerable amount of wheat hairs and the outer layers of wheat. No further action was taken.
7. Raspberries suspected of being contaminated with hop spray. The Analyst reported that the raspberries showed small traces of a pesticide but the quantity present was not significant. Consumption of the raspberries would not constitute a health hazard. The complainant was notified accordingly.
8. Punctured tins of corned beef. The tins were punctured by nails when boxed in Australia. The retailer was cautioned that more care must be taken before goods are put on sale



and the importers were notified.

9. Doughnuts containing dark coloured streaks consisting of starch, grease and fine black particles probably derived from machinery. A warning was issued.
10. Sliced bread containing a dark coloured streak. The streak consisted of starch, grease and fine black particles derived from machinery. A warning was issued.
11. Ham and Egg pie affected by extensive mould. Legal proceedings were taken in this case against the retailer who pleaded guilty and was fined £20 with £2 2s. 0d. costs.
12. Fruit pie containing three dark coloured objects resembling mouse droppings. The Analyst reported "The objects are probably fragments of seed coating". The bakers were informed and no further action was taken.
13. Prepacked Madeira cake with traces of mould on paper in which cake had been baked. A warning was issued.
14. Corned beef with large fly embedded in meat. The importers of the tin were notified and they took the matter up with the canners in Bulawayo.
15. Loaf containing a metal bolt approximately half an inch long. A warning was issued.
16. A householder sought advice on meat and fish which was developing a pinkish red colour when stored in his larder. *Chromobacterium prodigiosum* was suspected to be causing the trouble and the householder was advised on the steps to take.
17. Pint bottle of milk with two small black marks on the inside of the bottle. A director of the firm was interviewed and a warning was issued.
18. Part of a small loaf containing a dark coloured area. The Analyst reported that this was dirty machine oil. A warning was issued.
19. Dirty bread rolls. Action was pending at the end of the year.



## Inspection of Food

Meat from the Council owned abattoir is distributed over most of Kent and into adjoining counties.

The abattoir has been officially recognised by the German and Netherland authorities for the export of meat and meat products to the Federal Republic of Germany and the Kingdom of the Netherlands. Carcasses were also sent to France.

The number of animals slaughtered was 3,328 higher than in the previous year, although the number of cattle slaughtered was less, thus reflecting the world shortage of beef.

|   | Cattle<br>Exclud-<br>ing<br>Cows | Cows  | Calves | Sheep  | Pigs   |
|---|----------------------------------|-------|--------|--------|--------|
| Number killed .. ...  | 6,737                            | 1,159 | 1,737  | 22,710 | 19,568 |
| Number inspected ... ..   | 6,737                            | 1,159 | 1,737  | 22,710 | 19,568 |
| Figures for 1963 ... ..   | 7,460                            | 1,035 | 1,746  | 20,921 | 17,421 |
| Figures for 1962 ... ..   | 8,168                            | 1,083 | 2,163  | 19,988 | 20,417 |
| <b>All diseases except T.B. and<br/>Cysticercus bovis</b>   |                                  |       |        |        |        |
| Whole carcasses condemned   | 3                                | 7     | 33     | 135    | 58     |
| Carcasses of which some part<br>or organ was condemned  | 2,440                            | 561   | 24     | 2,877  | 4,597  |
| Percentage of the number<br>inspected affected with<br>diseases other than T.B.<br>or Cysticercus bovis ... | 36.22                            | 48.73 | 3.28   | 13.26  | 23.79  |
| <b>Tuberculosis only ... ..</b>   |                                  |       |        |        |        |
| Whole carcasses condemned   | —                                | 1     | —      | —      | —      |
| Carcasses of which some part<br>or organ was condemned  | 46                               | 44    | 1      | —      | 463    |
| Percentage number inspect-<br>ed affected with T.B. ...   | 0.68                             | 3.88  | 0.06   | —      | 2.36   |
| <b>Cysticercus bovis</b>  |                                  |       |        |        |        |
| Whole carcasses condemned   | —                                | —     | —      | —      | —      |
| Carcasses of which some part<br>or organ was condemned  | 10                               | 2     | —      | —      | —      |
| Percentage of the number<br>inspected affected with<br>Cysticercus bovis ...                                | 0.14                             | 0.17  | —      | —      | —      |



CARCASES FOUND TO BE UNFIT.

(B=Bovines, C=Calves, S=Sheep, P=Pigs).

|   | B  | C  | S   | P  |
|---|----|----|-----|----|
| Tuberculosis ... ..                       | 1  | —  | —   | —  |
| Septicaemia/Pyaemia ... ..                | 2  | 8  | 3   | 18 |
| Septic Pneumonia/Pleurisy/Peritonitis ... | 1  | 2  | 8   | 11 |
| Leukaemia... ..                           | 1  | —  | 4   | —  |
| Emaciation and Oedema... ..               | 6  | 4  | 103 | 18 |
| Decomposition ... ..                      | —  | 3  | —   | —  |
| Immaturity ... ..                         | —  | 11 | 6   | —  |
| Copper Poisoning... ..                    | —  | —  | 1   | —  |
| Extensive Bruising ... ..                 | —  | —  | 1   | 3  |
| Moribund ... ..                           | —  | 5  | 3   | 3  |
| Uraemia ... ..                            | —  | —  | 1   | 1  |
| Pregnancy Toxaemia ... ..                 | —  | —  | 4   | —  |
| Acute Arthritis ... ..                    | —  | —  | —   | 2  |
| Injuries with complications ... ..        | —  | —  | 1   | 1  |
| Jaundice ... ..                           | —  | —  | —   | 1  |
| TOTALS ...                                | 11 | 33 | 135 | 58 |

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

|  |             |
|--|-------------|
| Tuberculosis ... ..                                      | 7,976 lbs.  |
| Fascioliasis ... ..                                      | 35,512 lbs. |
| Cirrhosis ... ..   | 1,969 lbs.  |
| Abscesses ... ..   | 7,934 lbs.  |
| Pneumonia, Pleurisy, Pericarditis and Peritonitis ... .. | 4,339 lbs.  |



|                               |     |     |     |     |             |
|-------------------------------|-----|-----|-----|-----|-------------|
| Actinomycosis                 | ... | ... | ... | ... | 1,431 lbs.  |
| Cysts and parasites           | ... | ... | ... | ... | 11,812 lbs. |
| Cysticercus Bovis             | ... | ... | ... | ... | 282 lbs.    |
| Miscellaneous                 | ... | ... | ... | ... | 8,160 lbs.  |
|                               |     |     |     |     | <hr/>       |
| Weight of carcasses condemned |     |     |     |     | 79,415 lbs. |
|                               |     |     |     |     | <hr/>       |
| Total weight of condemnation  |     |     |     |     | 18,771 lbs. |
|                               |     |     |     |     | <hr/>       |
|                               |     |     |     |     | 98,186 lbs. |

A detailed examination of every bovine carcass was made to discover the presence of cysticercus bovis, which is the larval state of the tape-worm *Taenia saginata* found in man. Twelve localised infestations (0.15% of animals slaughtered) were found and an analysis of these cases is as follows:—

|                   |     |     |     | Cows | Heifers | Steers | Bulls |
|-------------------|-----|-----|-----|------|---------|--------|-------|
| Site of lesion:—  |     |     |     |      |         |        |       |
| External Masseter | ... | ... |     | 2    | 2       | 5      | —     |
| Internal Masseter | ... | ... |     | —    | —       | —      | —     |
| Heart             | ... | ... | ... | —    | 1       | 2      | —     |
| Diaphragm         | ... | ... | ... | —    | —       | —      | —     |

Percentage of animals affected by tuberculosis based on the total number of animals entering the abattoir.

|      |     |     | Cattle<br>excluding<br>Cows | Cows  | Pigs |
|------|-----|-----|-----------------------------|-------|------|
| 1964 | ... | ... | 0.68                        | 3.88  | 2.36 |
| 1963 | ... | ... | 0.25                        | 1.06  | 2.39 |
| 1962 | ... | ... | 0.55                        | 2.22  | 2.94 |
| 1961 | ... | ... | 1.43                        | 10.65 | 2.86 |

During the year 139 cattle which had reacted to the tuberculin test carried out by the Ministry veterinary surgeons were sent in for slaughter. This is a substantial rise over the 59 recorded in the previous year. From enquiries of the Animal Health Division it is learned that this rise was mainly due to a large number of reactors found in four herds which accounted for 80 of the reactors. The remaining 59 came from twenty-one different herds.



The increase in the incidence rate of tuberculosis in bovines is accounted for by the increased number of reactors, if the 139 reactor cattle were excluded from the above figures the rate for normal entry cattle would be:—

Cattle excluding Cows 0.45%. Cows Nil.

Any occurrence of tuberculosis found in cattle other than reactors is telephoned to the Animal Health Division of the Ministry so that an immediate visit can be made to the farm concerned. This co-operation between this department and the Animal Health Division is an important factor in the ultimate object of eradicating completely tuberculosis from cattle in this country.

For some time now the meat inspectors have been co-operating with the London School of Hygiene and Tropical Medicine in an investigation involving a certain type of sarcocysts which at one time were thought to occur only in sheep but are now thought to affect humans as well.

Farmers often seek out the Meat Inspectors to enquire into the incidence of disease in animals they have sent in for slaughter. Co-operation with farmers and veterinary surgeons helps to reduce the incidence of animal diseases. In the past year there has also been co-operation with two organisations in veterinary medicine in matters of research. The abattoir is also used by student health inspectors from Kent and London to gain experience of meat inspection and we are pleased to co-operate with several authorities in this respect. Student veterinary surgeons also come to gain practical experience in meat inspection.

The meat and other food found to be unsound on inspection in food shops amount to 6,503 lbs.

|             |     |     |     |     |     |            |
|-------------|-----|-----|-----|-----|-----|------------|
| Meat        | ... | ... | ... | ... | ... | 835 lbs.   |
| Canned Meat |     | ... | ... | ... | ... | 1,288 lbs. |
| Fish        | ... | ... | ... | ... | ... | 353 lbs.   |
| Canned fish | ... | ... | ... | ... | ... | 70 lbs.    |
| Other foods | ... | ... | ... | ... | ... | 3,957 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.

### Milk

There are 5 milk retailers in the City and 34 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 untreated farm bottled milk sold by a producer-retailer, is either pasteurised or sterilised. The untreated milk comes from an adjoining district, and as the 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*.

One firm using a H.T.S.T. plant is licensed by the City Council to pasteurise milk. Thirty-eight samples were obtained to check (a) the pasteurising process (phosphatase test) and (b) the keeping quality at the point of delivery to the retailer (methylene blue test). All the tests were satisfactory.

Nineteen washed bottles were submitted to bacteriological examination and 3 churn rinses were obtained. The churn rinses and all but one of the washed bottles gave satisfactory results.

The testing of farm milk before delivery to the distributor for the presence of antibiotics was continued and 57 samples were obtained. Three of these samples contained 0.06 international units of penicillin per millilitre of milk and the producers were cautioned. One farmer was much concerned by what had been found, but the other two did not acknowledge the letters. Further reference to penicillin in milk is made under the heading relating to food sampling.

The local dairy which began bulk tank collection of milk in 1963 from Kent farms for part of their supply made further progress in this direction. This method of transferring milk from the producer to the distributor is beneficial in two ways (a) there is no noise from churn handling and (b) bacterial contamination from churns is eliminated.

#### *Milk in Schools Scheme*

All the 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 granted by the City Council were in operation at the end of the year:—

|                             |     |     |     |     |     |    |
|-----------------------------|-----|-----|-----|-----|-----|----|
| To pasteurise milk          | ... | ... | ... | ... | ... | 1  |
| To deal in pasteurised milk | ... | ... | ... | ... | ... | 33 |
| To deal in sterilised milk  | ... | ... | ... | ... | ... | 19 |

#### **Ice Cream**

Of the total of 65 methylene blue samples taken during the year 44 were graded in the category 1 or 2 and 21 in the category 3 or 4. These results were not as good as in the previous year. Eight of the grade 3 or 4 samples were from a local manufacturer and after taking rinse tests of some of the equipment a fault in the cleaning procedure was discovered. When this was corrected much better results were obtained. The other poor samples were due to faults in the cleansing of serving equipment and after advice had been given to the retailers better grades were obtained.

One new soft ice cream plant was installed during the year and there were some initial troubles but after advice and instruction by the inspector concerned good results were obtained.



Classification of the 65 samples submitted to the methylene blue test for bacterial cleanliness was as follows:—

|                | <i>Figures for comparison</i> |      |      |      |
|----------------|-------------------------------|------|------|------|
|                | 1964                          | 1963 | 1962 | 1961 |
| Grade 1 ... .. | 38                            | 33   | 39   | 19   |
| Grade 2 ... .. | 6                             | 7    | 10   | 13   |
| Grade 3 ... .. | 13                            | 1    | 5    | 5    |
| Grade 4 ... .. | 8                             | —    | 4    | 1    |

### **Public Houses**

The unsatisfactory premises were re-visited during the year when attention was given to glass washing, cleanliness and sanitary accommodation. As a result of action taken 12 years ago all the public houses have proper glass washing facilities. On the other hand the improvement of the obsolete and insanitary tarred wall urinal accommodation has been painfully slow and at the beginning of 1964 there were still 34 premises to be improved. The Council called the attention of the Licensing Justices at the Brewster Sessions to the lack of satisfactory urinal accommodation in some of the City's licensed premises and during 1964 improvements were made to eight premises. According to information from brewers, plans have been prepared, or orders placed, for improvements at a further ten houses.

### **Health Education**

The Inspectors, realising the importance of health education, emphasize the most important points during visits to food premises. Food and its protection is always popular in talks to groups of townspeople and no opportunity to take part in these discussions is lost.

In the last eight years exhibitions dealing with flies, food hygiene and improvement grants have been organised. No exhibition was held in 1964 but some preliminary work was done on an exhibition on food hygiene proposed for 1965.

### **Offices, Shops and Railway Premises Act 1963**

The main provisions of the above Act came into force during the year. This Act is designed to make provision for securing the health, safety and welfare of persons employed in office, shop and certain railway premises. The local authority is the responsible authority for enforcing a large part of the Act regarding certain of such premises.

All such premises are required by the Act to be registered and at the end of the year some 620 premises covering some 5,562 persons had been registered. It is anticipated that the final number of such registrations will be in excess of 700.

By the end of the year 170 of the premises had been inspected and various defects and deficiencies found. The most common of these



were absence of thermometers and first aid kits, lack of wash hand basins provided with a constant supply of hot water and insufficient heating.

Under this legislation the local authority is also responsible for ensuring that machinery is adequately protected so that operators are not likely to be injured when using such machinery.

The application of such legislation to offices and shops is entirely new and will initially present problems. It was found, for instance, that guards that were recommended for use on meat slicing machines were not being made at the time the legislation came into force.

### **Noise Abatement Act, 1960**

Some residents nearby a factory working day and night persisted in their complaints, which began in 1962, that the noise emitted from the factory constituted a nuisance. On reflection it is certain that this factory has prompted more complaints and more time has been spent on investigation than any other single cause that I can remember. It is equally certain that the sound level meter which the Council purchased in 1964 has proved invaluable in the investigation and has enabled a scientific assessment of the noise to be made. During the year 155 noise level readings were made at different times of the day, even after midnight and soon after 4 a.m.

The readings at the beginning of 1964 confirmed those obtained in 1963 when a borrowed sound level meter was used that there was no nuisance during the day time, but at night time the readings were only slightly below the noise level when complaints from an ordinarily reasonable person might be expected.

The proprietors of the factory emphasized that it was an economic necessity for day and night working to continue and they carried out the noise suppression measures recommended by their acoustic consultant. The more noisy processes are now only carried on during day time and some of the suspect machinery has been replaced by new machines which are quieter in operation. These measures have shown a reduction in the noise emitted and consequently the gap between this level and the point suggested in the Final Report on Noise (Cmnd. 2056) to be a nuisance has widened. Unfortunately the stage has not yet been reached when the case can be finally closed, in fact, it probably never will be so long as night working continues and it is for this reason that noise measuring from time to time must continue.

Three other complaints were investigated and two were found to be justified. Work was going on at the end of the year to reduce the noise from a refrigeration plant which had been set up out of doors, and in the other complaint, suggestions were made how to reduce the noise from a hop drying plant which works day and night during the picking season. This also will be watched closely when the plant comes into use in 1965

The third complaint concerned the use of spraying machines in hop gardens. Fortunately these only work during day time and there



is a week or so between the sprayings when the occupiers of houses near hop gardens can have comparative peace. I have formed the opinion that some steps will soon have to be taken to reduce the noise from certain types of cyclone sprayers, usually of foreign manufacture, which produce a loud and penetrating noise. As years go by such machines become more powerful and much noisier and if this tendency continues it is inevitable that their use in hop gardens near built up areas will give rise to bitter complaints.

### **Clean Air Act**

Authority was given during the year for expenditure to participate in the national co-operative scheme for the measurement of air pollution. This will be a worthwhile function of the Health Department and will enable us to assess the degree of pollution of the air of Canterbury. It is not often realised that the air consumed each day by each person is six times, by weight, the amount of food and drink consumed.

By the end of the year the necessary arrangements were well in hand and after consultations with the Department of Industrial and Scientific Research it is hoped the scheme will be in operation in the first part of 1965.

Twenty-seven smoke observations were carried out during the year on two industrial chimneys. Contraventions were recorded at both establishments and as a result of warnings issued one firm decided to replace the coal fired boiler with a new oil burning plant and the other firm installed two new chain grate stokers. There has since been a great improvement at both places.

Details of two new boiler installations were received and approved under Section 3 (2).

### **Public Health Act, 1961**

Nine certificates were issued under Section 15 where immediate action was necessary by the Council to open up blocked sewers. In these cases the owners of the premises served by the sewers are responsible for the maintenance of sewers and the certificate referred to dispenses with the need to serve a seven days' notice prior to carrying out work.

### **Diseases of Animals Acts**

Thirteen 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 plant operators were visited and reminded to give strict compliance to the Order.



### **Slaughter of Animals Act, 1958**

The Council issued 15 slaughterman's licences during the year and 3 of the licences include the slaughter of horses.

The requirements of the Act which are designed to eliminate as far as possible cruelty to animals during slaughter are strictly complied with.

No Jewish or Mohammedan methods of slaughter are carried on in the City.

### **Caravans**

There are no licensed caravan sites in the City.

### **Fertilisers and Feeding Stuffs Act, 1926**

Eight samples of animal feeding stuffs were obtained for analysis by the Official Agricultural Chemist and 2 were not satisfactory. A sample of layers pellets had an excess of oil and a sample of layers mash was deficient in protein and had an excess of fibre. Warnings were issued to the distributor.

One sample of shoddy was obtained at the request of the purchaser.

### **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 1964.

### **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 1964, 3,074 bins had been supplied. During 1964, 156 new bins were supplied.

### **Infectious Diseases, etc.**

Fifty-four visits were made and 17 houses were fumigated on account of tuberculosis or scarlet fever.

### **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. Two hundred and eighty-seven bundles of clothing were handled in 1964.



## 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, etc.

Fourteen houses were found to be verminous and were disinfested by the Public Health Department staff.

## Rodent Control

Complaints were received in connection with 263 premises, 196 of which were in respect of private houses, 39 business premises, 26 local authority properties and 2 agricultural properties. During the investigations 16 additional infestations were discovered.

For some years only one part-time Rodent Operator has been employed by the Council and it has been realised for some time that our work in rodent control has not been carried out as efficiently as it should due to lack of labour. Towards the end of the year authority was given for the purchase of another van and the employment of another man for the work of the Health Department. When this is implemented it will allow the rodent operator to spend much more of his time on rodent control and so carry out his duties in this field much more efficiently.

One maintenance treatment of the sewers was carried out and it would appear that the number of rats is still being kept at a low level.

|                              |     |     |     |     |     |     |
|------------------------------|-----|-----|-----|-----|-----|-----|
| Visits to houses             | ... | ... | ... | ... | ... | 752 |
| Visits to other premises     | ... | ... | ... | ... | ... | 268 |
| Number of premises cleared:— |     |     |     |     |     |     |
| <i>Rats</i>                  |     |     |     |     |     |     |
| Houses                       | ... | ... | ... | ... | ... | 196 |
| Business premises            | ... | ... | ... | ... | ... | 39  |
| Other premises               | ... | ... | ... | ... | ... | 28  |
| <i>Mice</i>                  |     |     |     |     |     |     |
| Houses                       | ... | ... | ... | ... | ... | 13  |
| Business premises            | ... | ... | ... | ... | ... | 15  |
| Other premises               | ... | ... | ... | ... | ... | 8   |

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.

## Agriculture (Safety, Health and Welfare Provisions) Act, 1956

Seven farms were inspected and the sanitary accommodation for employees was found to be reasonably satisfactory.



## FACTORIES ACTS, 1961

### 1. Inspections for purposes of provisions as to health.

| Premises<br>(1)   | Number<br>on<br>Register<br>(2) | Inspec-<br>tions<br>(3) | Written<br>notices<br>(4) | Occupiers<br>prosecuted<br>(5) |
|---|---------------------------------|-------------------------|---------------------------|--------------------------------|
| (i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .. .. .                    | 16                              | 17                      | —                         | —                              |
| (ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority .. .. .                    | 139                             | 58                      | 1                         | —                              |
| (iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) .. .. . | 8                               | —                       | —                         | —                              |
| TOTAL .. ..   | 163                             | 75                      | 1                         | —                              |

### Cases in which Defects were Found.

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



**Part VIII of the Act. Outworkers**

| Nature of Work<br><br>(1)           | Section 133   |  |  | Section 134   |                       |                     |
|-------------------------------------|---|--|--|---|-----------------------|---------------------|
|                                     | No. of outworkers in August list required by Section 133 (1) (c)<br>(2) | No. of cases of default in sending lists to the Council<br>(3) | No. of prosecutions for failure to supply lists<br>(4) | No. of instances of work in unwholesome premises<br>(5) | Notices served<br>(6) | Prosecutions<br>(7) |
| Wearing Apparel: Making, etc. ...   | 5   | —  | —  | —   | —                     | —                   |
| Cleaning and Washing ...            | —   | —  | —  | —   | —                     | —                   |
| Lace, lace curtains and nets ...    | —   | —  | —  | —   | —                     | —                   |
| Curtains and furniture hangings ... | —   | —  | —  | —   | —                     | —                   |



# REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER 1964

Mr. Chairman, Ladies and Gentlemen,

The report on the School Health Service with its findings in 1964 is presented. The development of the Child Guidance Clinic service referred to in the 1963 report came to pass, and the Thanet Clinic is now functioning. Dr. Fraser has a few beds available for observation of cases where indicated and it is considered that there is scope for development of such facilities as part of preventive psychiatry.

Modification of the arrangements for routine medical inspection at age 10 years has been carried out, and first impressions suggest that between half and two-thirds of the children will be found not to require this examination. Checks of vision, and especially colour vision are made in all children, nevertheless.

Our thanks are rightly expressed to the head teachers for their co-operation and helpfulness to us in maintaining the supervision of the fitness and progress of the school children. We always find it rewarding to discuss a child with the teachers concerned.

MALCOLM S. HARVEY.

## General Information

*Number of Schools:* Primary 10, Secondary 5.

*Number of Scholars on the Roll at end of 1964:*

|           |     |     |     |     |     |     |     |                 |
|-----------|-----|-----|-----|-----|-----|-----|-----|-----------------|
| Primary   | ... | ... | ... | ... | ... | ... | ... | 2,741           |
| Secondary | ... | ... | ... | ... | ... | ... | ... | 2,537           |
|           |     |     |     |     |     |     |     | Total ... 5,278 |

*Pupils medically examined:*

|            |     |     |     |     |     |     |     |                 |
|------------|-----|-----|-----|-----|-----|-----|-----|-----------------|
| Routine    | ... | ... | ... | ... | ... | ... | ... | 1,632           |
| Special... | ... | ... | ... | ... | ... | ... | ... | 1,044           |
|            |     |     |     |     |     |     |     | Total ... 2,676 |

Details of the findings from such medical inspections are given in Table S.2 below. Tables S.3-S.6 show treatment details and the findings from School Nurses' hygiene inspections. No formal proceedings were necessary in the case of any children.



## Vision

During the year Mr. Robert Crawford, M.D., D.O.M.S., Ophthalmic Consultant, was given access to our records as part of his research on Amblyopia. His results have shown the benefit of early referral to an eye specialist of cases with a defect of eye muscle control, in the prevention of amblyopia. A squint needs to be attended to long before the child comes to school, and the message was well stressed at a meeting of Health Visitors and Doctors on the subject of 'Squint' run by the Kent Postgraduate Medical Centre at the Kent and Canterbury Hospital early in 1965. Out of the 1,632 pupils given routine medical inspection in the year, 53 cases of visual defect requiring attention were identified. Six of these were cases of Squint. One hundred and ninety-eight visual defects and 18 squints were under treatment or observation.

## Hearing

Ninety-three children are listed in the audiometry register for periodic follow-up. Many of these children are or have been under the care of the E.N.T. specialists at Kent and Canterbury Hospital and it may be thought a duplication of effort that we include them in our special follow-up. On the contrary we gather in no small catch of cases that have failed to attend hospital appointments and who need supervision, and for the others satisfy ourselves and the parents that hearing continues at a satisfactory level for learning. One hundred and four children were brought under observation and 5 under treatment from routine medical inspections and 78 were referred for fuller investigation from special inspections. Eleven children are known to use hearing aids in school, about 1 in 500 pupils.

## Speech Therapy

We make use of the Kent County Speech Therapy service at the Whitstable Road Clinic, but it is a field of therapy in which there is a serious shortage of trained workers and the waiting list is heavy.

|                        |     |    |                  |     |    |
|------------------------|-----|----|------------------|-----|----|
| Referrals 1964         | ... | 10 | Cases discharged | ... | 12 |
| Awaiting treatment     | ... | 53 | Closed good      |     |    |
| Taken off waiting list |     | 1  | progress         | ... | 7  |
| Under treatment        | ... | 19 | Left School      | ... | 2  |

## Lip Reading

This service is closely linked with the care of those with hearing difficulties and supplements the help given by a hearing aid. A class is held on Saturday mornings at the May Hooker Centre, 51 London



Road, for Canterbury and County children at which a specialist teacher of the deaf gives instruction. A home teacher of the deaf is not yet available for children, but it is hoped that arrangements may be made for use of the service that has been developed by the County. Such help is particularly important to the pre-school child. Nevertheless, we find that the Consultant at the Audiology Centre, Kent and Canterbury Hospital and the Royal School for the Deaf, Margate, give us much help with any toddler suspected of being hard of hearing.

### **Nose and Throat**

The conservative outlook towards tonsillectomy is growing. Only twelve cases were referred to the E.N.T. Department by the School Health Service after the usual preliminary contact with the family doctor. Altogether 53 pupils were known to have received operative treatment for adenoids or tonsils and 3 for other conditions of nose or throat.

### **U.V.L. Treatment**

We are equipped to give such supplementary therapy, but during 1964 the fashion was against it.

### **Protective Inoculations and B.C.G. Vaccination**

These are reported upon in the M.O.H. section of the report. The need for booster inoculations against diphtheria at school entry had been forgotten by too many parents and arrangements were made to remind parents and to offer facilities at child welfare sessions.

### **Minor Ailments**

There has been no decline in the need to provide this service, which is based on the School Clinic and two of the Secondary Schools. We get our regulars, as with the family doctors, and in the children it is usually less difficult to see the deprivation or emotional stimulus to their frequent attendance. 4,471 attendances were recorded, including a number referred by the family doctor for treatment as directed.

### **Colour Vision**

Colour vision is checked at age 10 or in the Secondary School for those from elsewhere who show no record of testing. This is now done for girls as well as boys.



## Bed Wetting

Electric bell and pad sets are issued on loan after examination and observation of cases over a period of some months. Cases are referred from routine medical inspection and from the family doctors. Following exclusion of any identifiable cause, the Health Visitor/School Nurse visits the home and explains the use of the equipment. She then reports monthly on the progress of the case, withdrawing the equipment at the end of 3 months. 12 cases were loaned a set, 2 failed to improve, 4 improved, 4 were cured, 1 set was returned as unmanageable and 1 continued under treatment.

## Milk and Meals

School Milk: 3,923 pupils. School Dinner: 3,612 pupils. Meals were provided free of charge to 228 children.

## School Dental Service

*Principal Dental Officer:*

Mr. P. B. Taylor, L.D.S., R.F.P.S.G.

### Table of Dental Inspection and Treatment

|   |           |
|---|-----------|
| Number of children inspected by Dentist needing treatment | 4,238     |
| Specials ... ..   | 217       |
| Total Routine and Special Examination                     | 4,455     |
| Found to require treatment                                | 2,440     |
| Offered treatment   | 2,440     |
| Number actually treated                                   | 1,010     |
| Attendances made by children                              | 2,676     |
| Half-days devoted to: Inspection                          | 35        |
| Treatment   | 313       |
| Total   | 348       |
| Fillings: Permanent teeth                                 | 704 (664) |
| (Teeth) Temporary teeth                                   | 50 (50)   |
| Total   | 754 (714) |
| Extractions: Permanent teeth                              | 406       |
| Temporary teeth   | 740       |
| Total   | 1,146     |
| Administration of:  |           |
| General Anaesthetics for extractions                      | 551       |
| Other treatment (scalings, dressings)                     | 788       |



## Dentures

|                           |     |     |     |     |     |    |
|---------------------------|-----|-----|-----|-----|-----|----|
| Partial Dentures provided | ... | ... | ... | ... | ... | 18 |
|---------------------------|-----|-----|-----|-----|-----|----|

## Orthodontic Treatment

|  |     |      |     |     |     |     |
|--|-----|------|-----|-----|-----|-----|
| New cases commenced                              | ... | ...  | ... | ... | ... | 35  |
| Cases carried forward...                         | ... | ...  | ... | ... | ... | 60  |
| Cases completed                                  | ... | ...  | ... | ... | ... | 14  |
| Cases discontinued                               | ... | ...  | ... | ... | ... | 5   |
| Pupils treated with appliances                   | ... | ...  | ... | ... | ... | 29  |
| (Removable appliances                            | ... | 29   |     |     |     |     |
| Fixed appliances                                 | ... | Nil) |     |     |     |     |
| Total attendances                                | ... | ...  | ... | ... | ... | 266 |
| Referred to and treated by Hospital Orthodontics | ... | ...  | ... | ... | ... | 2   |

## Dental Examinations at Training Centre

|   |     |     |     |     |     |    |
|---|-----|-----|-----|-----|-----|----|
| (Under Health Committee)                    |     |     |     |     |     |    |
| Examined                                    | ... | ... | ... | ... | ... | 34 |
| Found fit                                   | ... | ... | ... | ... | ... | 9  |
| Treatment                                   | ... | ... | ... | ... | ... | 13 |
| (Remainder absent or impossible to examine) |     |     |     |     |     |    |
| Treatment completed                         | ... | ... | ... | ... | ... | 11 |
| Full denture provided...                    | ... | ... | ... | ... | ... | 1  |
| Partial denture provided                    | ... | ... | ... | ... | ... | 1  |

TABLE S.1.

## Condition of Children on Routine Medical Inspection.

| Age Group     | No. Med. Examined | Satisfactory |      | Unsatisfactory |     |
|---------------|-------------------|--------------|------|----------------|-----|
|               |                   | No.          | %    | No.            | %   |
| Entrants - -  | 464               | 459          | 98.9 | 5              | 1.1 |
| Intermediates | 451               | 446          | 98.9 | 5              | 1.1 |
| Leavers - -   | 517               | 511          | 98.8 | 6              | 1.2 |
| Other - - -   | 200               | 196          | 98.0 | 4              | 2.0 |
| Total - - -   | 1,632             | 1,612        | 98.8 | 20             | 1.2 |



TABLE S.2.

Defects found by Medical Inspection in the year ending  
31st December, 1964

| Defect Code No.                                    | Defect or Disease<br><br>(1)  | Periodic Inspections           |   | Special Inspections            |   |
|--|-------------------------------|--------------------------------|---|--------------------------------|---|
|  |                               | No. of defects                 |   | No. of defects                 |   |
|  |                               | Requiring treatment<br><br>(2) | Requiring to be kept under observation but not requiring treatment<br><br>(3) | Requiring treatment<br><br>(4) | Requiring to be kept under observation but not requiring treatment<br><br>(5) |
| 4  | Skin .. .. .                  | 3                              | 43  | 1                              | 14  |
| 5  | Eyes (a) Vision .. .. .       | 53                             | 196   | 90                             | 251   |
|  | (b) Squint .. .. .            | 6                              | 18  | 4                              | 17  |
|  | (c) Other .. .. .             | 2                              | 49  | —                              | 12  |
| 6  | Ears (a) Hearing .. .. .      | 4                              | 98  | 7                              | 67  |
|  | (b) Otitis Media .. .. .      | —                              | 4   | —                              | —   |
|  | (c) Other .. .. .             | 1                              | 2   | 3                              | 1   |
| 7  | Nose and Throat .. .. .       | 3                              | 72  | —                              | 22  |
| 8  | Speech .. .. .                | 1                              | 18  | 9                              | 29  |
| 9  | Cervical Glands .. .. .       | —                              | 26  | —                              | 1   |
| 10   | Heart and Circulation .. .. . | 2                              | 16  | —                              | 9   |
| 11   | Lungs .. .. .                 | 2                              | 40  | 1                              | 15  |
| 12   | Developmental—                |                                |   |                                |   |
|  | (a) Hernia .. .. .            | 1                              | 5   | —                              | —   |
|  | (b) Other .. .. .             | —                              | 32  | 1                              | 21  |
| 13   | Orthopædic—                   |                                |   |                                |   |
|  | (a) Posture .. .. .           | 2                              | 15  | 1                              | —   |
|  | (b) Flat foot .. .. .         | 1                              | 27  | 1                              | 8   |
|  | (c) Other .. .. .             | 3                              | 38  | —                              | 10  |
| 14   | Nervous System—               |                                |   |                                |   |
|  | (a) Epilepsy .. .. .          | —                              | 4   | —                              | 10  |
|  | (b) Other .. .. .             | 4                              | 24  | 3                              | 16  |
| 15   | Psychological—                |                                |   |                                |   |
|  | (a) Development .. .. .       | 1                              | 6   | 1                              | 22  |
|  | (b) Stability .. .. .         | —                              | 11  | —                              | 17  |
| 16   | Abdomen .. .. .               | —                              | 7   | —                              | 3   |
| 17   | Other .. .. .                 | 8                              | 178   | 2                              | 47  |
| Total Number of Children Inspected .. .. .         |                               | 1,632                          |   | 1,044                          |   |
| Number of Children represented in figures above .. |                               | 1,016                          |   | 716                            |   |

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)

|  | <i>No. of Defects<br/>Treated or under<br/>treatment during<br/>the year</i> |
|--|--|
| SKIN:  |  |
| Ringworm—Scalp:  |  |
| (1) X-ray treatment ... ..   | —  |
| (2) Other treatment ... ..   | —  |
| Ringworm—Body ... ..   | —  |
| Scabies ... ..   | —  |
| Impetigo ... ..  | 10   |
| Other skin diseases ... ..   | 448  |
| EYE DISEASES ... ..  | 84   |
| (External and other, but excluding errors, refractions, squint and cases admitted to hospital) |  |
| EAR DEFECTS ... ..   | 54   |
| (Treatment for serious diseases of the ear is not recorded here)                               |  |
| Miscellaneous ... ..   | 580  |
|  | 1,176  |
| Total number of attendances at Authority's<br>minor ailments clinics ... ..                    |  |
|  | 4,471  |

TABLE S.4  
TREATMENT OF DEFECTIVE VISION AND SQUINT  
(Excluding Minor Eye Defects treated as Minor Ailments)

|  |     |
|--|-----|
| Errors of Refraction and Squint dealt with ... ..          | 352 |
| Other Defects or Diseases of the Eye ... ..                | 76  |
| No. of children for whom spectacles were prescribed ... .. | 108 |

TABLE S.5

|  |   |
|--|---|
| Defects which received operative treatment (through Education Committee arrangements) ... .. | — |
|--|---|

TABLE S.6  
GENERAL HYGIENE

|  |       |
|--|-------|
| (1) Average number of visits per school made by School Nurses ... ..                       | 67    |
| (2) Home visits made as School Nurses ... ..   | 416   |
| (3) No. of Individual Children found with nits ... ..                                      | 10    |
| (4) No. of Individual Children cleansed under Section 54 of the Education Act, 1944 ... .. | —     |
| (5) No. of cases in which legal proceedings were taken ... ..                              | —     |
| (6) Total individual examinations of pupils in school by School Nurse ... ..               | 8,223 |



### Handicapped Pupils.

|                            | On Register |      | Newly assessed as needing special education treatment | Newly Placed | Newly Placed (Assessed prior Jan. 1964) | Requiring Special Schools |              | Under 5 Requiring Special Schools | Reached 5 Parents refused Special Schools | On Registers - Boarding Schools |                       |                     |
|----------------------------|-------------|------|---|--------------|---|---------------------------|--------------|-----------------------------------|---|---------------------------------|-----------------------|---------------------|
|                            | Male        | Fem. |   |              |   | (a) Day                   | (b) Boarding |                                   |   | Maintained Schools              | Non-Maintained Sch'ls | Independent Schools |
| Blind ...                  | —           | —    | —   | —            | —                                       | —                         | —            | —                                 | —   | —                               | —                     | —                   |
| Partially-sighted ...      | 1           | —    | —   | —            | —                                       | —                         | —            | —                                 | —   | —                               | —                     | —                   |
| Deaf ...                   | 2           | —    | —   | —            | —                                       | —                         | —            | —                                 | —   | 2                               | —                     | —                   |
| Partially-Hearing...       | —           | 1    | 1   | —            | —                                       | (b) 1                     | —            | —                                 | —   | 1                               | —                     | —                   |
| Physically Handicapped ... | 3           | 4    | 2   | 1            | 1                                       | —                         | —            | —                                 | —   | 4                               | —                     | —                   |
| Delicate ...               | 6           | 6    | 1   | —            | —                                       | —                         | —            | —                                 | —   | 2                               | —                     | —                   |
| Maladjusted                | 4           | 1    | —   | —            | —                                       | —                         | —            | —                                 | —   | 2                               | —                     | —                   |
| E.S.N. ...                 | 34          | 17   | 2   | —            | 3                                       | (a) 10<br>(b) 9           | —            | (b) 5                             | 10  | 6                               | —                     | —                   |
| Epileptic...               | 1           | —    | —   | —            | 1                                       | —                         | —            | —                                 | —   | —                               | —                     | —                   |
| Speech Defects ...         | —           | —    | —   | —            | —                                       | —                         | —            | —                                 | —   | —                               | —                     | —                   |

Receiving Home Tuition 2

Referred under S. 57 Education Act 1944 2



# CANTERBURY CHILD GUIDANCE CLINIC

---

## ANNUAL REPORT, 1964

---

The work of the Child Guidance Service continues to expand, in ways which are difficult to describe as statistics. Because the need for guidance to families who do not have an obviously unhappy child in their midst is frequently as pressing as the need of those who do ask for help, we are attempting to make our service more widely available through informal contacts.

Expert help is found by the family to be not interference, but encouragement and assistance to manage for themselves.

The number of social and medical agencies who come in contact with parents of young families is increasing as public knowledge of the need expands, and many of these professional workers are glad of the opportunity to discuss the problems they find in their work.

The Child Guidance Service does not wish to remain aloof until a patient is offered to it for treatment, but to take an active part in the formation of a greater public awareness of the responsibilities the family has to the children and the duties the children have in their turn to each other and to the family group as a whole.

This is being carried out by encouragement of seminars and case discussions with those working in Child Care and related fields, and with student nurses, as well as the continued co-operation with school staff.

The aim throughout is to support and guide the family to become self-supporting emotionally, to restore the confidence of parents and so to spread throughout their children the sense of loving security which constitutes positive mental health.



TABLE C.G.1

## SOURCE OF REFERRAL

|   | 1964   |      |             | 1963   |      |             |
|---|--------|------|-------------|--------|------|-------------|
|   | County | City | Out of Area | County | City | Out of Area |
| School Medical Officer ...  | 17     | 10   | —           | 32     | 11   | 2           |
| Private Doctor ... ..   | 34     | 12   | —           | 38     | 7    | —           |
| Court or Probation Officer<br>Education Officer<br>or Head Teacher ...                                | 21     | 2    | —           | 15     | 1    | —           |
| Parent or Foster Parent   | 12     | 5    | —           | 19     | 5    | —           |
| Other Clinics or<br>Psychiatrists ... ..  | 6      | 2    | —           | 3      | 4    | —           |
| Miscellaneous Social<br>Agencies, including<br>Children's Officer's, In-<br>fant Welfare Clinics, etc | 22     | 4    | —           | 16     | 1    | 1           |
| Educational Psychologist  | 11     | 3    | —           | 14     | —    | 1           |
|   | 8      | 6    | —           | 30     | 8    | —           |
|   | 131    | 44   | —           | 167    | 37   | 4           |
|   | 175    |      |             | 208    |      |             |

TABLE C.G.C.2

## DIAGNOSTIC WAITING LIST

| December 31st, 1964 |      |             | December 31st, 1963 |      |             |
|---------------------|------|-------------|---------------------|------|-------------|
| County              | City | Out of Area | County              | City | Out of Area |
| 20                  | 18   | —           | 36                  | 5    | —           |

TABLE C.G.C.3

## DISPOSAL OF NEW CASES SEEN

|                          | 1964   |      |             | 1963   |      |             |
|--------------------------|--------|------|-------------|--------|------|-------------|
|                          | County | City | Out of Area | County | City | Out of Area |
| Diagnosis and Advice ... | 27     | 2    | —           | 23     | 1    | 1           |
| Taken on for Treatment   | 91     | 21   | —           | 116    | 28   | 3           |
| Remedial Coaching ...    | 2      | 2    | —           | 4      | 2    | —           |
| Partial Service ... ..   | 18     | 5    | —           | 57     | 14   | —           |
|                          | 138    | 30   | —           | 200    | 45   | 4           |
|                          | 168    |      |             | 249    |      |             |



TABLE C.G.C.4

CASES CLOSED

|  | 1964   |      |             | 1963   |      |             |
|--|--------|------|-------------|--------|------|-------------|
| I NON-TREATMENT                                | County | City | Out of Area | County | City | Out of Area |
| Diagnosis and Advice ...                       | 27     | 2    | —           | 23     | 5    | —           |
| Withdrawn before examination, no service given | 10     | 2    | —           | 42     | 3    | —           |
| Withdrawn after Partial Service ...            | 18     | 5    | —           | 57     | 14   | —           |
| Total I  | 55     | 9    | —           | 122    | 18   | 1           |
| II TREATMENT                                   |        |      |             |        |      |             |
| Improved ...                                   | 34     | 17   | —           | 121    | 28   | 1           |
| Unchanged ...                                  | —      | —    | —           | 6      | 1    | —           |
| Unco-operative ...                             | 6      | 2    | —           | 33     | 8    | —           |
| Interrupted or Moved                           |        |      |             |        |      |             |
| Away ...                                       | 9      | 1    | 1           | 23     | 3    | 3           |
| Placed after Supervision                       | 12     | —    | —           | 40     | 7    | —           |
| Transferred to New Clinic ...                  | 40     | —    | —           | 73     | —    | —           |
|  | 101    | 20   | 1           | 296    | 47   | 4           |
| Totals I and II                                | 156    | 29   | 1           | 418    | 65   | 5           |
| TOTAL FOR YEARS                                | 186    |      |             | 488    |      |             |

STAFF

Consultant Psychiatrist and Medical Director:

K. M. FRASER, M.B., Ch.B., D.C.H., D.P.M.

Educational Psychologist:

MR. G. H. JOYNT, B.A., Ed.B. (Resigned April, 1965).

Psychiatric Social Worker:

MISS M. E. CRIPPS, A.A.P.S.W.

Part-Time Psychiatric Social Worker:

MRS. L. K. SAMBROOK.

Part-Time Psycho-Therapist:

MISS I. H. BASSOM, B.A.

Remedial Teacher:

MR. J. WYBORN (Saturday mornings only).

Clerical Staff:

MISS N. DRURY.  
MRS. J. CLARKE (part-time).



## SERVICE INFORMATION

The following section provides general information for those who use or work with the local health services provided by the City Council:

### **Ambulance Service**

The Ambulance Service for the City and around is provided jointly by Canterbury City Council and Kent County Council, and is supplemented by the Hospital Car Service and by use of rail transport. Except in the case of emergencies or accidents, requests are only accepted from medical practitioners and authorised officers of hospitals and local health authorities.

*Canterbury Ambulance Station, Old Ruttington Lane, Canterbury.  
Tel. No. 65001.*

In emergency use 999 and state name, number of telephone speaking from, and the nature and location of the emergency, and do not ring off until the information is checked back.

The obligation resting on the Ambulance Service is **not** to make arrangements for the conveyance of **all** persons suffering from illness but **only** those for whom **special transport** such as the service provides is **necessary**. (a) Patients needing to attend hospital who can reasonably be expected to make their own way there should do so. (b) Walking patients may not be provided with transport if they can be expected without detriment to health to make their way to hospital on foot or by public transport. (c) Patients may not be conveyed to a distant hospital or specialist if the necessary treatment or diagnosis can be obtained nearer home. In such cases arrangements may be made for transport but a charge on the patient or responsible relative is levied.

Questions on ambulance service matters concerning this station area may be made at Canterbury 64411 Ext. 42.

### **District Nursing**

This service is provided by the Canterbury District Nursing Association, affiliated to the Queen's Institute of District Nursing, and is centred on the Central Clinic, Poor Priests' Hospital, Stour Street, Canterbury.

The services of a nurse are obtained through the family doctor under whose clinical direction the nurses work. Nursing requisites are loaned out by arrangements through the nurses. Larger articles may be obtained on loan from the Central Clinic or through British Red Cross Society, St. John Ambulance Brigade, and the Alford Aid Society. Incontinence pads for special cases not being attended by a district nurse may be obtained from the Central Clinic at a charge.

Address: Poor Priests' Hospital, Stour Street (Central Clinic, side door). Tel. Canterbury 64412 Ext. 48.



### *District Nurses:*

MRS. R. B. LEUTNER, S.R.N., S.C.M., Q.N.S. Tel. Stelling Minnis 316.  
MISS M. K. GILLET, S.R.N., S.C.M., Q.N.S. Tel. Canterbury 65763.  
MRS. M. PERCIVAL, S.R.N. Tel. Canterbury 63333.  
MRS. M. E. PERKS, S.R.N., Q.N.S. Tel. Whitstable 4719.  
MISS F. M. DAY, S.R.N. Tel. Canterbury 63555.

### **Domiciliary Midwifery**

Four Domiciliary Midwives provide a service for the delivery of mothers at home. In general the care is provided in conjunction with the general practitioner obstetrician or family doctor, but the midwives are qualified to practice alone if required to do so. *Booking:* A midwife may be booked any forenoon or afternoon (except Thursday and Friday afternoons or Saturday) by calling at the Central Clinic, Stour Street. Mothers are encouraged to book on a Wednesday afternoon when the midwives are in attendance.

#### *Staff:*

MISS J. A. SOULSBURY, S.R.N., S.C.M. Tel. 64714.  
MISS N. E. THOMAS, S.R.N., S.C.M., S.R.F.N., Q.N.S. Tel. 63962.  
MRS. F. M. LIVERSEDGE, S.R.N., S.C.M. Tel. 65356.  
MISS C. H. L. DESAINT, S.R.N., S.C.M. Tel. 65828.

### **Health Visiting**

Six Health Visitors provide a service for the care of mothers, infants and young children and the promotion of health through advice and health education, in the home, amongst school children and through the child welfare clinics. They are concerned in the welfare of the elderly and infirm in their district and are associated with the family doctors by regular contact with their surgeries. They are also concerned with the care and after-care services. *Headquarters:* Central Clinic, Stour Street.

Tel. No. 64412 Ext. 49, 46 or 27.

#### *Staff:*

MISS A. GREY, S.R.N., H.V. Cert. (Senior).  
MRS. P. E. MATHEWS, S.R.N., S.C.M., H.V. Cert.  
MISS J. C. BARBER, S.R.N., H.V. Cert.  
MRS. P. RUSSELL, S.R.N., H.V. Cert.  
MISS B. PEARSON, S.R.N., S.C.M., Q.N.S., H.V. Cert.  
MRS. B. M. RUTKINS, S.R.N., S.C.M., H.V. Cert.

See Annual Report of the Medical Officer of Health for details of Ante-Natal and Child Welfare Clinics.

A special Tuberculosis Health Visitor works from the Chest Clinic, 43 New Dover Road, Canterbury. Tel. 62336.

### **Unmarried Mothers**

Help is provided for the special need of the unmarried mother and assistance is arranged through the Welfare Visitor Tel. No. 63186



(before 10.30 a.m.) at 64 Burgate (Miss U. Miller). Approach for assistance may also be made through the family doctor, health visitor, or by letter to the Medical Officer of Health, Dr. M. S. Harvey, 15a Dane John, Canterbury, marked strictly confidential. The Health Department works with the Diocesan Council for Social Work, and the Southwark Catholic Rescue Society in providing care.

### **Family Planning**

There is a local Branch of the Family Planning Association (see list of Voluntary Societies). The Clinics are held on two evenings each week in accommodation provided in the Central Clinic, Stour Street, Canterbury. Cases are seen by appointments, made through Tel. Canterbury 61267.

### **School Health Service**

This service is staffed by doctors and dentists listed at the end of the report and is based for records, minor ailments treatment, dental treatment and special examinations and clinics on the School Clinic, St. John's Place, Northgate. Tel. 63794.

The Nursing Staff comprises the Health Visitors, and  
School and Clinic Nurse: MRS. A. F. HARRIS, S.R.N., S.C.M.  
Dental Surgery Assistant: MRS. E. M. GREENSTREET.  
Dental Nurse: MRS. J. GOODWIN, S.R.N.  
School Health Service Clerk: MRS. H. KELLEY and 1 part-time Clerk.

*The Child Guidance Clinic Staff* are named in the Annual Report from that clinic which is at 51 London Road, Canterbury. Tel. No. 62733.

### **Priority Dental Service**

This dental service is provided for expectant and nursing mothers and pre-school children and is staffed by the officers of the Dental section of the School Health Service. Expectant mothers in attendance at the Ante-Natal clinic are encouraged to attend the Dental Surgery in the Central Clinic on Wednesday afternoons for dental inspection and advice. Treatment can be obtained through the Priority Service or General Dental Service according to choice.

Birthday dental inspection and advice at age 3 years and 4 years is encouraged and the Dental Surgery in the Central Clinic is open for that purpose on Friday afternoons. *Surgery Centre:* Central Clinic (Ground Floor).

### **Home Help Service**

This service is provided to meet the needs of households in difficulty through illness, maternity or complications of pregnancy, physical handicap or infirmity, or arising from the presence of young



children. Requests for the service are accepted from family doctors, authorised officers of the hospital or local health services and certain social work departments. Each case is assessed for charges.

Home Help Supervisor, Mrs. J. F. Amos, Health Department, 15A Dane John. Tel. No. 64411 Ext. 47.

### **Mental Health Service**

The care and after-care of mentally ill and mentally handicapped persons is provided by the Social and Mental Welfare Officer, Mr. A. Head, 15A Dane John. Tel. No. Canterbury 64411 Ext. 42, backed by two part-time relief Mental Welfare Officers, Messrs. D. Pledge and L. Fullbrook.

The Canterbury Training Centre provides 50 places for junior and adult mentally handicapped persons. Address: Canterbury Training Centre, Woodville Close, Wincheap, Canterbury. Tel. No. Canterbury 64316.

**Supervisor:** MRS. E. M. MONTI.

**Other Staff:** MRS. W. COOMBES, MR. R. GRADY, MRS. R. IRVINE, MRS. L. I. CLARKE, MISS J. BARR, MRS. W. FOWLER.

Applications for admission should be sent to the Medical Officer of Health, 15A Dane John, Canterbury.

**Nursing Requisites** (see under "District Nursing")

### **Special Aids for the Handicapped or Elderly**

The Health and Welfare Departments are each concerned in such help on a case basis. See below.

### **Foul Laundry Service**

A service for the collection of fouled linen, laundering and delivery is provided through the Health Department to assist with the home care of incontinent bedridden patients. A charge is made per article laundered. Cases are referred through the family doctor, hospitals or district nurses. Contact: Health Department. Tel. No. 64412 Ext. 48 (see also District Nursing ref. incontinence pads).

### **Chiropody**

A chiropody service is provided for elderly, physically handicapped, and expectant or nursing mothers. Cases are referred through the family doctor, the local health authority nursing staff, the Ministry of Pensions or the hospital service. Treatment is given at the chiropodist's rooms or by domiciliary visit. The proportion of cost to be paid by the case is assessed on ability to pay but a small minimum charge is payable by all cases at the time of treatment.

The British Red Cross Society provides a corn service for elderly ambulant persons at its Headquarters in Lower Chantry Lane.



### **Care and After-Care**

Ancillary nourishment is provided for tubercular cases on the recommendation of the Chest Physician. In special cases of debility assistance can be given or arranged for recuperative care. Convalescence after hospital treatment is arranged by the hospital service. In other cases help may be arranged by the Health Department in conjunction with the family doctor.

The local nursing, home help and social services are used to assist with the after-care of persons discharged from hospital, particularly the aged, and to help recovery and resettlement back into the community.

### **Prevention of Illness, etc.**

B.C.G. vaccination against tuberculosis is provided for case contacts through the Chest Clinic and for young persons from age 11 upwards by approved Medical Officers. The routine B.C.G. programme is carried out in the secondary schools, local public schools and through the School Clinic for older applicants. Forms of consent are distributed through the schools, but may also be obtained on application to the Health Department, or the Registrars of the College of Art and the Technical College for Students at these Colleges.

### **Vaccination and Immunisation**

The scheme covers protection against Smallpox, Diphtheria, Whooping Cough, Tetanus and Poliomyelitis and such protection is available for children through the local Child Welfare Clinics or the family doctor.

Adult vaccination for those going abroad, and protection against typhoid and paratyphoid, etc., is not dealt with under the local health authority scheme and should be discussed with the family doctor. Authentication of signatures on International Certificates is done in the Health Department (Monday to Friday).

### **Welfare of Elderly and Physically Handicapped**

Enquiries on this service should be addressed to the Welfare Officer, Municipal Buildings, Dane John. Tel. No. 64411, Ext. 24.

### **Children's Officers Department**

Enquiries on matters concerned with the welfare of neglected or deprived children, children in need of care and attention, family guidance problems, children being fostered, etc., should be addressed to the Children's Officer, Arnett House, Hawks Lane, Canterbury. Tel. No. 65514.



## Postal Addresses of Voluntary Societies

British Red Cross Society, Lower Chantry Lane.  
St. John Ambulance Brigade, 40 Guildford Road.  
Alford Aid Society, 43 Old Dover Road.  
T.B. After-Care Committee, Chest Clinic, 43 New Dover Road.  
National Society for the Prevention of Cruelty to Children, 30  
Cherry Garden Road.  
Royal Society for the Prevention of Cruelty to Animals, 60 St.  
Martin's Road.  
Discharged Prisoners' Aid Society, 4 Gas Street.  
Women's Voluntary Service, 3 Castle Street.  
Family Planning Association, 18 Barton Road.  
Canterbury Society for Mentally Handicapped Children, 87  
Tenterden Drive.  
Canterbury Hard of Hearing Club, Hawcroft Farm, Sturry.  
Canterbury Voluntary Association for the Blind, "Brearily",  
Pilgrim's Way.  
Diocesan Association for the Deaf, Lady Wootton's Green.  
Disabled Drivers' Association, 158 Wincheap.  
Diocesan Council for Social Work, Diocesan House, Lady  
Wootton's Green.  
Canterbury Old People's Welfare Committee, c/o Royal Insurance  
Company, 29 High Street.  
Marriage Guidance Council, 1A Castle Street.  
National Institute for the Deaf, Roper House, St. Dunstan's  
Street.  
Society of Friends, Friends' Meeting House, The Friars.  
Toc H., 81 Cherry Drive.

## Medical, Administrative, Clerical Staff

HEALTH DEPARTMENT, 15A Dane John. Tel. No. 64411.  
Pedestrian access from Dane John Gardens, Car Park off Worth-  
gate place.

### Medical Officer of Health and Principal School Medical Officer:

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

### Deputy Medical Officer of Health and School Medical Officer:

JAMES LESLIE GORDON, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

### Principal Dental Officer:

P. B. TAYLOR, L.D.S., R.F.P.S.G.

### Chest Physician and Adviser in After Care:

O. CLARKE, M.D., M.R.C.S.



**Medical and Dental Officers (Part-time):**

DR. F. B. CHEESE, M.B., Ch.B. (Child Welfare).

DR. J. A. CHEESE, M.B., B.S., M.R.C.S., L.R.C.P., C.D.H. (Anaesthetics).

D. F. CROUCH, B.D.S. (Dental Surgery).

MRS. S. PAYNE, L.D.S. (Dental Surgery).

DR. M. B. WATSON, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H., D.Obst., R.C.O.G. (School Medical and Ante-Natal).

**Lay Assistant:** D. PLEDGE.

**Senior Clerk:** MISS J. MASHMAN.

**Clerical Officer:** MRS. J. SPICE.

**Clerical Staff:** MISS B. E. HOWARD.  
MRS. M. E. PEDLEY.  
MISS C. FIRMINER.  
and 2 part-time Clerks.

**Central Clinic Clerk:** MRS. A. BURTON.

**General Assistant:** C. A. EASTLAND.

**Public Health Inspectorate**

**Chief Public Health Inspector:** (Tel. No. 64411)

T. L. MARTIN, F.A.P.H.I.

**Senior Meat Inspector:**

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

**Senior Public Health Inspector:**

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

**Public Health Inspectors and Meat Inspectors:**

H. MALLOY, Cert. R.S.A. (Scotland), M.A.P.H.I., Meat Inspector's Certificate (Scotland).

R. H. CUFF, Cert. P.H.I.E.B., Dip. Inspector of Meat and Other Foods.

T. S. BRUNTON, Meat Inspector's Certificate (Scotland).

**Rodent Officer and General Assistant:**

A. BAUGHAN.

**Section Clerk:**

T. A. RANDALL.







