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THE HEALTH OF CHELTENHAM


1971

T.O.P.D. LAWSON, M.D., D.R.C.O.G., D.P.H.

**MEDICAL OFFICER OF HEALTH AND
SCHOOL MEDICAL OFFICER**

J.F. URSELL, D.P.A., F.A.P.H.I., F.R.S.H.

CHIEF PUBLIC HEALTH INSPECTOR



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Annual Report on the Health of the Borough of Cheltenham for the Year 1971

*To the Worshipful the Mayor, the Aldermen and Councillors of the
Borough of Cheltenham*

Mr. Mayor, Ladies and Gentlemen,

The very satisfactory statistics referred to in my report last year have been very largely repeated during 1971 and in one notable instance, measles notifications, have been appreciably improved. The infant mortality rate remains very similar to last year and below the national average. Unfortunately the number of illegitimate births remains the same as last year, and with a further, though smaller fall in the birth rate, the percentage of illegitimate children is well above the national average. The incidence of infectious disease and its effect on the health of the community has been negligible in recent years but a disturbing feature of this year's report is the increase in venereal disease. Compared with last year the incidence of gonorrhoea in the town has more than doubled. This may be due to recent efforts to publicise treatment facilities but greater efforts will have to be directed once again to the prevention of this disease. The increased incidence is national as well as local.

On the 1st October the one-time welfare services, administered by the Cheltenham Health and Welfare Committee were handed over to the new Social Services Department of the Gloucestershire County Council, the Borough continuing to be a Delegated Health Authority but no longer responsible for the administration of social or welfare services. However the closest co-operation has been maintained between all sections of the two departments and I am confident this will continue, to our mutual advantage and the benefit of the community.

The most useful change in our health services in recent years and of greater benefit to those who use them has been the increasing co-operation with the family doctor and hospital services. Most of our health visitors and a few of our district nurses are already attached to individual medical practices so that the same doctors and nurses look after the same patients. Also we now have a system of interchange between our nursing staff and the hospital nursing staff so that each can appreciate what is happening inside and outside the hospital. Our health visitors also attend several of the consultants' special clinics and follow up patients in their homes.

All our services specifically designed for the prevention of disease are showing the results we would expect and the latest of these, vaccination against Measles and Rubella, have been well received by parents. It is particularly encouraging to see such a large reduction in the number of measles notifications after the temporary setback we experienced two years ago. Although it will be some years before we see the results of Rubella vaccination there is good reason to forecast a reduction in the number of births of mentally and physically handicapped children.

The detailed administration of the proposed new National Health Service is not yet known and the government's White Paper is awaited, also the report of the Hunter Committee on medical administration, and of the two working parties, one on management and one on collaboration with local authorities, set up by the

Secretary of State. The present Local Authority Health Services will bear the brunt of the changes and will be transferred to a new Area Health Board on 1st April, 1974 outside the administration of local government. This is a sad but inevitable change, the local effects of which will, I hope be mitigated by the re-establishment of a very close collaboration between the new local government and new health authorities.

Summary of Statistics.

Infant Mortality. There were seventeen deaths among infants under one year, the same figure as for 1970, giving an infant mortality rate of 17. This rate is below the national average for England and Wales (18). A detailed account of the infant mortality is given later in the Report.

Infectious Disease. The effect of infectious disease on the health of the community no longer requires special report but recent advances in this preventive field should produce promising results in the case of Rubella and Measles. There has been a very noticeable reduction in the incidence of the latter disease during the year.

Tuberculosis. There was a slight fall in the number of notified cases of pulmonary tuberculosis, twelve notifications compared with thirteen in 1970. There was only one death from the disease.

Lung Cancer. The number of lung cancer deaths in 1971 was 40, very much the same as the previous year (42). The national figure is about 25,000.

Cervical Cytology. (Cancer of the Womb). Special clinics for carrying out these tests are well attended and no restrictions are imposed as to the age or parity of the applicants, although priority is given to women over 35 who have had children. However, for those not in this category the waiting time is never more than a few weeks. The overall demand by the public for this test is still below what one would expect.

Other Vital Statistics. There has been another small decrease in the population from 75,720 in 1970 to 75,500 in the current year. There has been a slight decrease in the birthrate from 13.9 per 1000 population in 1970 to 13.6 in 1971. There has been a decrease in the death rate from 12.3 per 1000 in 1970 to 11.2 in the current year. The national birth rate is 16.0 and the death rate 11.6.

I would once again wish to express my thanks to the Chairman and Members of the Health and Welfare Committee for their support throughout the year and to my staff for their loyalty and co-operation. I am particularly indebted to Mr. J.F. Ursell, Chief Public Health Inspector and to my Chief Clerk, Mr. W.H.G. Meakins. I am also grateful again for the support and co-operation which I always receive from the local press.

T.O.P.D. LAWSON,
Medical Officer of Health.

Health Department,
P.O. Box No. 12,
Municipal Offices,
Cheltenham, Glos GL50 1PP

Telephone 21333

HEALTH AND WELFARE COMMITTEE

Alderman R.F. Brookes (Chairman)
Alderman A.J. Bettridge (Vice-Chairman)

Councillor D.G. Aldridge
Councillor F.L. Bowden
Alderman Miss M.N. P. Dent
Councillor Miss D. Favell
Alderman C.W.A. Foster

Councillor A.G.K. Frewin
Councillor C.A. Gomersall
Councillor K.J.S. Hammond
Councillor Mrs. S.A. Hickmore
Councillor C.R.F. Hine

Co-opted Members

Mr. A.F. Nutter Mrs. H. Smith Mrs. M.F. Wakefield Dr. W.A. Watt

SCHOOL HEALTH SERVICE

Special Services and General Purposes Sub-Committee

Councillor Miss D. Favell (Chairman)

Councillor F.L. Bowden
Mr. F.A. Dellar
Alderman Miss M.N.P. Dent
Mr. W.A. Gething
Mr. H.G. Godwin
Councillor C.A. Gomersall
Councillor K.J.S. Hammond

Councillor Mrs. S.A. Hickmore
Councillor C.R.F. Hine
Councillor W.G. Nawton
Councillor R.H.C. Smith
Mr. W. Tiplady
Mr. J.J. Voyce
Councillor A.H. Yates

T.O.P.D. LAWSON,
Medical Officer of Health.

Health Department,
P.O. Box No. 17,
Municipal Offices,
Cheltenham, Glos. GL50 1PW

Telephone 21333

SUMMARY OF GENERAL AND VITAL STATISTICS 1971

Area of Borough	...	...	...	5,146 acres
Population Mid-year 1971 Registrar General's Estimate	...	...	...	75,500
Number of inhabited houses (a) Houses and Flats	...	...	...	25,699
(as at 31.3.72) (b) Hotels, Occupied Shops etc.	...	...	...	5,533
Rateable Value (as at 31.3.71)	...	...	...	£3,775,769
Sum represented by a new penny rate (1971-72)	...	...	...	£37,752

TABULAR STATEMENT OF THE MAIN VITAL STATISTICS
FOR 1971

(with comparative figures for England and Wales)

	M.	F.	Total	Cheltenham	* England and Wales
LIVE BIRTHS					
Legitimate	470	440	910		
Illegitimate	63	57	120		
TOTALS	533	497	1030		
Rate per 1000 population				13.6	16
ILLEGITIMATE LIVE BIRTHS					
Percent of total live births	63	57	120	12%	8%
STILL BIRTHS					
Legitimate	1	2	3		
Illegitimate	—	1	1		
TOTALS	1	3	4		
Rate per 1000 total live and still births				4	12
TOTAL LIVE AND STILL BIRTHS	534	500	1034		
INFANT DEATHS (Deaths under 1 year)					
Legitimate	7	8	15		
Illegitimate	2	—	2		
TOTALS	9	8	17		
INFANT MORTALITY RATES					
Total infant deaths per 1000 total live births				17	18
Legitimate infant deaths per 1000 legitimate live births				16	17
Illegitimate infant deaths per 1000 illegitimate live births				17	24
Neonatal Mortality Rate (deaths under 4 weeks per 1000 total live births)				15	12
Early neonatal Mortality Rate (deaths under 1 week per 1000 total live births)				15	10
Perinatal Mortality Rate (Still births and deaths under 1 week combined per 1000 total live and still births)				18	22
MATERNAL MORTALITY					
(including abortions)		—	—		
Rate per 1000 total live and still births				—	0.17
DEATHS (All ages)	384	464	848		
Rate per 1000 population				11.2	11.6

NOTE: The figures for births and deaths are corrected for inward and outward transfers in order that the statistics may give as true a picture as possible of local conditions.

* Estimated Mid-Year Home Population 48,815,000.

NOTES ON VITAL STATISTICS FOR 1971

Population

The Registrar's estimate of the population of Cheltenham for mid-year 1971 is 75,500 which is 220 less than the estimate for 1970.

Death Rate

The Crude Death Rate was 11.2 a lower figure than that of last year. The corrected Death Rate (Registrar's comparability factor 0.88) was 9.9 which is below the figures for England and Wales.

Birth Rate

Live Births in 1971 totalled 1,030 which is 19 less than the figure for the previous year.

The Birth Rate was 13.6 and is 0.3 lower than the figure for 1970. The Registrar now provides a comparability factor for birth rates. For Cheltenham this factor is 0.98 which gives a rate of 13.3 compared with 16.0 for England and Wales.

The number of Still Births per 1000 live and still births, was 4 (or 3.9 corrected) compared with 12 for England and Wales.

**Causes of Death relating to Cheltenham Residents as given by the Registrar
General for the year 1971:—**

	M	F
Syphilis and its Sequelae	1	—
Other Infective and Parasitic Diseases	1	2
Tuberculosis, respiratory	—	1
Malignant Neoplasm, Buccal cavity, etc.	2	—
Malignant Neoplasm, Oesophagus	3	2
Malignant Neoplasm, stomach	10	9
Malignant Neoplasm, Intestine	14	21
Malignant Neoplasm, Lung, Bronchus	34	6
Malignant Neoplasm, breast	—	15
Malignant Neoplasm, uterus	—	5
Malignant Neoplasm, Prostate	4	—
Other malignant neoplasms	16	21
Benign and unspecified Neoplasms	—	2
Leukaemia	3	—
Diabetes Mellitus	2	2
Other Endocrine etc. diseases	—	2
Anaemias	1	2
Other Diseases of the Blood etc.	1	—
Mental Disorders	—	1
Multiple Sclerosis	1	1
Other diseases of nervous system, etc.	5	2
Chronic Rheumatic Heart Disease	4	7
Hypertensive disease	3	9
Ischaemic Heart Disease	116	124
Other forms of heart disease	20	41
Cerebrovascular disease	38	84
Other diseases of the circulatory system	16	19

	M	F
Pneumonia	17	26
Bronchitis and Emphysema	22	7
Other diseases of respiratory system	4	5
Peptic Ulcer	5	3
Intestinal Obstruction and Hernia	—	1
Cirrhosis of Liver	2	1
Other diseases of the Digestive System	1	10
Nephritis and Nephrosis	—	1
Hyperplasia of Prostate	3	—
Other diseases, Genito-Urinary System	2	2
Other complications of Pregnancy, etc.	—	2
Diseases of Skin, Subcutaneous Tissue	—	1
Diseases of Musculo-Skeletal System	1	2
Congenital Anomalies	1	6
Birth Injury, Difficult Labour, etc.	4	2
Other causes of Perinatal Mortality	4	1
Symptoms and Ill-defined Conditions	—	4
Motor Vehicle Accidents	13	4
All other accidents	7	2
Suicide and self-inflicted Injuries	1	3
All other external causes	2	3
Total All Causes	384	464

DISCUSSION

The birth rate has remained at the same low rate as last year, and the main causes of death are again heart disease and the cancers. Causes of death vary little from year to year and will continue to do so unless there is some dramatic breakthrough in the treatment of ischaemic heart disease (coronary thrombosis) and cancer. This would not appear to be likely in the near future. However there is growing recognition of the role of preventive medicine in both these conditions, such as health screening for the detection of incipient disease followed by treatment where appropriate. This is especially relevant to the detection of early cancers. But more important is the necessity for health education by all possible media and a wider acceptance of a few basic principles, relevant to the attainment of a reasonable standard of fitness. A vast amount of illness, disability and suffering could be prevented for example by attention to such simple matters as eating, drinking, exercise and the avoidance of known health hazards, and yet our most singular failure in health education is the ever increasing number of deaths from lung cancer. Nevertheless, if we are going to see any significant improvement in the future it can only be achieved with the participation of the potential patient and his or her willingness to change or give up habits unusual to health and wellbeing. But to attempt to change behaviour is a most difficult and unrewarding exercise. As a nation we swallow medicine by the gallon and pills by the ton and who can say we are much the fitter? There must be an easier and cheaper way to keep well.

Deaths from accidents. Deaths from all types of accidents (26) showed an increase over the last year. Seventeen of the twenty-six deaths were due to motor vehicles.

Infant Mortality. There were 17 infant deaths during the year, the same number as last year but with a slightly lower number of births the infant mortality rate, i.e. the number of deaths in the first twelve months per 1000 live births, is one point higher

at 17. The national figure is 18.

The causes of the 17 infant deaths were as follows:

			<i>Neonatal</i> 0-4 weeks	4wks-1yr.	Total
Prematurity (stated or considered to be main cause of death)	...	...	7	—	7
Respiratory Disease	...	...	—	1	1
Congenital Defects	...	...	5	—	5
Cerebral Haemorrhage	...	...	2	—	2
Other Causes	...	...	—	1	1
Coroners Inquest - Date of birth and death unknown	...	...	—	—	1*
			14	2	17

* age unknown

The main causes of death were the usual and largely unpreventable conditions of prematurity and congenital defect.

WATER SUPPLY OF THE BOROUGH

The following report has been received from the North West Gloucestershire Water Board:

The Borough of Cheltenham has been supplied mainly from the Tewkesbury source with smaller quantities from Sandford, Northfield and Dowdeswell.

Tewkesbury. 181 samples of raw water were examined from the Tewkesbury source and all contained large numbers of Coliform organisms. 1722 samples of final treated water were examined; of these 23 contained small numbers of Coliform organisms but none contained E.coli.

Sandford. Of 6 samples of raw water examined, only one contained a minimal number of Coliform organisms. All 23 samples of final water examined were free from Coliform organisms.

Northfield. Of 27 samples of raw water examined, 18 contained Coliforms and of these 13 contained E.coli. 31 samples of final water were examined, one contained minimal numbers of Coliform organisms but was free from E.coli.

Dowdeswell. 27 samples of raw water were examined and all contained E. coli. 31 samples of final water were examined and all were free of Coliform organisms.

In Cheltenham 166 samples were drawn from consumers' taps; 16 of these contained non-faecal Coliform organisms and all were cleared on re-examination.

During the year 290 new connections were made to the public water mains.

Flouride. The flouride content of the water supply to Cheltenham has been variable. The range in various sources being as follows:-

Tewkesbury.	0.06 - 0.38 mg/l	Sandford.	0.02 - 0.07 mg/l
Northfield.	0.01 - 0.04 mg/l	Dowdeswell.	0.08 - 0.23 mg/l

Radioactivity. Radioactive examinations of rainfall were continued during the year and remained at a low level representing no hazard to the supply. Rainfall during 1971 (taken at Sandford Waterworks): 63.76 mm.

SEWERAGE AND SEWAGE DISPOSAL

Whilst it would be true to say that the sewage facilities in the Borough are reasonably adequate, schemes are being prepared for the relief of both the Chelt Main and Hatherley Trunk Sewers, which are known to be deficient in capacity, and are prevented from surcharging by numerous overflows. There are also other areas where the sewers are inadequate in capacity, and these are being investigated, and schemes for their replacement are being prepared. A well known one is the Hatherley Sewer, which frequently surcharges near the junction with Heron Close.

With regard to the extensions at the Water Pollution Control Works, these are proceeding satisfactorily, and storm water tanks and sand filters have been brought into operation. The Consultants are now preparing the Contract Documents for the Stage 2 extensions, which deal with sludge treatment.

SWIMMING BATHS

There are two public swimming baths in the town, a covered bath and an open-air pool. In both cases the source of the water used for filling is the mains supply and the method of treatment is filtration and automatic chlorination. In the covered baths there is a complete change of water every four hours, both in the main pool and the instructional pool. In the open air pool there is a complete change every six hours.

Regular samples of water from the swimming baths are submitted for bacteriological examination. They showed that a satisfactory standard had been maintained throughout the year. The Chief Public Health Inspector arranges for the routine collection of samples by the Inspectors. These samples are sent for examination to the Analyst, Mr. Brandon, at Tewkesbury, and reports are submitted to the Public Health Committee.

The new Pittville Swimming Pool, opened by Her Majesty the Queen Mother, in May and which replaces the old Alstone Baths, provides the very latest techniques for the chemical and physical purification of the water. All samples taken for examination have given results of the highest standard.

MILK (SPECIAL DESIGNATION) REGULATIONS

During 1971, licences to use special designations in relation to milk sold within the Borough totalled one hundred and fifty-six.

Samples are taken fortnightly for analysis and the reports are submitted to the Health Committee.

Very few results during 1971 failed to satisfy the standards of the Department of Health.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

The following statement shows the corrected number of cases notified during 1971:— (Tuberculosis is dealt with separately).

Meningitis	...	...	...	...	1
Food Poisoning	...	...	...	...	3
Infective Jaundice	...	...	...	...	4
Measles	...	...	...	...	93
Whooping Cough	...	...	...	...	43

The most notable feature of the above table is the number of measles notifications. The number for the previous year was 631. With the measles vaccination programme

well under way, this figure should be still further reduced. There has been an increase in the number of whooping cough notifications. The vaccine currently in use for the prevention of this disease has been under investigation for assessment of its effectiveness.

VENEREAL DISEASES

The following report has been received from Dr. A.E. Tinkler, M.A., M.D., D.P.H., Consultant Venereologist, South Western Regional Hospital Board.

There was a considerable increase in the number of new patients seen in the Venereal Diseases Clinic, Cheltenham in 1971.

TABLE 1. New Cases. All Conditions - Cheltenham Clinic 1969 - 1971

Year	Syphilis		Gonorrhoea		Other Conditions		M	F.	Total
	M	F	M	F	M	F			
1969	2	2	36	10	156	67	194	79	273
1970	1	—	33	16	153	96	187	112	299
1971	2	2	55	26	209	147	266	174	440

Syphilis

This serious disease remains very rare in the town, only one new case in the early infectious stage of the disease was seen in 1971. There were no cases of congenital syphilis seen during the year.

Gonorrhoea

81 cases of gonorrhoea were seen during the year at the Cheltenham Clinic. These represent a 65% increase over the previous year.

TABLE 2. Gonorrhoea: Cheltenham Clinic 1969 - 1971

Year	Male	Female	Total
1969	36	10	46
1970	33	16	49
1971	55	26	81

A disturbing feature of the national incidence of this disease in recent years has been the disproportionate increase in the number of young female patients requiring treatment. It is encouraging to note that this trend was not apparent in the Cheltenham figures for 1971.

TABLE 3. Gonorrhoea: Cheltenham 1971 - Age Analysis.

	Male	Female	Total
Under 16 yrs.	—	—	—
16 - 17 yrs.	3	2	5
18 - 19 yrs.	7	5	12
20 - 24 yrs.	16	10	26
25 yrs. and over	29	9	38
Total	55	26	81

Contact Tracing

Special clinics are held each week at the local hospital for both male and female patients for the diagnosis and treatment of sexually transmitted diseases.

This work is carried out in the strictest confidence, the tracing of contacts being undertaken by a member of the Public Health Department Staff, cases being referred directly from the Consultant Venereologist.

Sometimes a name is given, though more frequently, a rather vague description of the person and habitat is all that can be obtained, so the tracing requires patience, persistence and some skill in investigation and detection.

Usually people are agreeable to attending the Clinic as they appreciate it is in their interest to do so. Some require considerable persuasion whilst there are those to whom the added inducement of transport is required!!

During the past year only two contacts were "lost". They had been successfully traced initially to the locality but had failed to keep their clinic appointments. On follow up, it was discovered that they were no longer in the district, but were traced at a later date through liaison with another local authority, some distance away.

Contacts are not only traced but are also followed up if they default in their attendance at clinic, and all are given every possible encouragement to keep their clinic appointments.

ANNUAL RETURN OF FOOD POISONING NOTIFICATIONS

There were three notifications of food poisoning during the year.

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS 1952

Notifications of tuberculosis during the period from 1st January to 31st December, 1971:—

Respiratory (Males)	8
Respiratory (Females)	4
Non-Respiratory (Males)	2
Non-Respiratory (Females)	5

Deaths from tuberculosis during the above mentioned period:—

Respiratory (Males)	—
Respiratory (Females)	1
Non-Respiratory (Males)	—
Non-Respiratory (Females)	—

Death Rates

The tuberculosis death rates for Cheltenham during 1971 were as follows:—

Pulmonary Tuberculosis	0.01	) Per 1000 of Population
Non-Pulmonary Tuberculosis	0.00	
Comparative Figures	England and Wales Total	0.01
		0.03

There were 12 new cases of respiratory tuberculosis notified during the year. There were 13 in 1970. There was 1 death from the disease, the same figure as for the previous year. The incidence of the disease in the town and the death rate continues to be very low.

The following report has been received from Dr. F.J.D. Knights, M.D., M.R.C.P., Senior Chest Physician, North Gloucestershire Clinical Area.

In 1971 seventeen new cases of tuberculosis were notified in Cheltenham borough and were handled by the chest clinic services. They are analysed as follows:-

Abdominal, Orthopaedic Cervical glands	Primary or post-primary infection	Minimal phthisis	Moderate phthisis	Advanced phthisis	Total
2	—	6	7	2	17

Six of the cases were referred by their General Practitioners, nine were referred by another hospital department, and two were contacts,

There were two immigrants; from India.

Contact Examinations

Arising out of these notifications, sixty-four adult contacts were called for examination and fifty attended. Forty-one children were called, twenty-five attended, of these fourteen were B.C.G. vaccinated, ten were tuberculin positive, of which eight were clinically well, and two were admitted for further investigations.

HOUSING

The following is the number of cases dealt with during the year:

Number of cases rehoused because of tuberculosis	...	...	Nil	(Nil)
Number of cases rehoused from houses on which a Demolition or Closing Order was operative or certificate of unfitness issued	...	26	(26)	

The 1970 figures are shown in brackets.

REGISTRATION AND INSPECTION OF NURSING HOMES SECTIONS 187 - 194, PUBLIC HEALTH ACT, 1946

At the end of 1971 there were 5 Nursing Homes on the Register.

The total number of beds available at the end of the year was 71: no beds are now available for maternity cases.

Private nursing homes in Cheltenham still provide a most valuable addition to the accommodation available for sick persons.

Many of the homes provide mainly for old persons and help in no small way to solve a problem which yearly becomes more difficult.

Visits were paid to all Nursing Homes on two or more occasions during the year.

The following table shows the numbers attending the Centre during the year:

one since general medical and local authority health services

services in the area. The Centre continues to have daily and convenient provision

the year. Attendance very much increased in the year, and the demand on the medical

There has been a small increase in the attendance at the Health Centre during

also G.M.I. and 14 day treatment, and 14 day treatment, and 14 day treatment.

Health Centres

SECTION 21

two in the year, and 14 day treatment, and 14 day treatment, and 14 day treatment.

General Practitioner	Consultations	Prescriptions	Other Services	Total
1,234	5,678	3,456	2,109	10,477

SECTION II

National Health Services Act, 1946

PERSONAL HEALTH SERVICES

Although there is no lack of demand for Child Health Clinic facilities in the town, the attendance has been dropping over the last few years. The administration and staffing of these clinics is at present under review and changes to meet changing conditions are contemplated in the near future.

Welfare Food Centre

The operation of welfare food, National Milk and vitamin supplements is carried out from the Welfare Food Centre at the rear of the Municipal Offices in Royal Way and from all Child Health Clinics in the Borough.

Family Planning Clinic

This service is provided by the Contraception Branch of the Family Planning Association as the Council's agent. The service is provided free to all applicants for family planning on medical grounds and in approved social circumstances run by

SECTION 21**Health Centres**

There has been a small increase in the attendances at the Health Centre during the year. Attendances vary each year according to the demand on the medical services in the area. The Centre continues to make useful and convenient provision for general medical and local Authority health services.

The following table shows the numbers attending the Centre during the year:—

General Practitioner Consultations	Treatment and Casualties	Child Welfare	Orthopaedic	Total
19,741	3,835	2,952	—	26,528

SECTION 22**Care of Mothers and Young Children****Child Health Clinics**

These are held weekly throughout the town as follows:

St. Michael's Hall, Whaddon Road	...	...	...	Thursday
St. Paul's Hall, Swindon Road	...	...	...	Tuesday
Hesters Way Health Centre	...	...	...	Tuesday and Thursday
Bethesda Church Hall	...	...	...	Wednesday
Highbury Church Hall	...	...	...	Tuesday
Leckhampton Church Hall	...	...	...	Friday
Gloucester Road Methodist Sunday School	...	...	...	Wednesday
Alma Road	...	...	...	Thursday

Toddlers sessions for older children are held separately or in conjunction with these clinics.

Records of attendances are as follows:

No. of Clinics provided	...	...	...	...	8
No. of children born in 1971 who attended a Clinic during the year	...	...	...	...	664
Total No. of children who attended a Clinic during the year	...	...	...	...	2,684

Total attendances made:

Children born in 1971	...	...	...	...	3,751
Children born in previous years	...	...	...	...	8,686

Although there is no lack of demand for Child Health Clinic facilities in the town our clinic attendances have been dropping over the last few years. The administration and staffing of these clinics is at present under review and changes, to meet changing conditions, are contemplated in the near future.

Welfare Food Centre

The distribution of welfare foods, National Dried Milk and vitamin supplements is carried out from the Welfare Food Centre at the rear of the Municipal Offices in Royal Well and from all Child Health Clinics in the Borough.

Family Planning Clinic

This service is provided by the Cheltenham Branch of the Family Planning Association as the Council's agents. The service is provided free to all applicants for family planning on medical grounds and in approved social cases. The clinic is run by

professional staff in modern well-equipped premises and is extensively used, as shown by the following statistics:

157 Sessions were held for General Contraceptives and 47 for I.U.D. only.

733 new patients attended and patient visits throughout the year numbered 4,698, making an increase of 904 over the preceding year.

50 patients were proved financially necessitous for medical and social reasons and made National Health patients.

The attendance of young people under the age of 24 has greatly increased. Two doctors are in attendance at every General Session and cervical smears are taken regularly, also a pregnancy test service is available.

Care of the Unmarried Mother and Child.

This service is provided by the Cheltenham Deanery Association for Social Work who act as the Council's agents. Cases are referred to the Association by Health Visitors, Social Workers and others, and help is provided to cover the ante-natal period, the confinement and after the baby is born.

The number of cases dealt with in Cheltenham during the year was 65. There were 120 illegitimate births out of a total of 1,030 births, a percentage illegitimate birth rate of 12% representing a slight increase on the previous year.

The percentage illegitimate birth rate in the town is almost always above the average for the rest of the country, sometimes appreciably so, as this year. It is too early to see what effect, the newer measures, outside the field of education, such as the Abortion Act and the wider use of, and encouragement to use, contraceptive measures, in particular the contraceptive pill, will have on this figure. One would anticipate an improvement. Morally however, one should be more concerned about the promiscuity rate than the illegitimate birth rate and these newer measures are not likely to have much effect on the former apart from increasing it. The end result may show even less on the credit side if the venereal disease rate increases. This is already happening. Possibly we are spending too much time in treating the symptoms of this permissive age and not directing enough effort through educational methods, to its causes.

Dental Treatment for Expectant and Nursing Mothers

During the year Miss Laister has visited all the Child Health Clinics and the Toddlers Clinic at Hesters Way Health Centre. She also visited several playgroups. At all these visits mothers or organisers are given advice on the care of children's teeth, the importance of diet being particularly stressed.

Mr. Stone has spoken to Young Wives Groups, Social Groups and also regularly visits the School of Nursing attached to the General Hospital to speak to the trainee nurses.

The number of pre-school children inspected and treated during the year remained at its previous low level and is likely to remain so with the existing staffing position. Most of those who do attend have been advised to do so by Health Visitors, have been forced to come for emergency relief of pain (and frequently are not brought back for conservative work) or are the younger siblings of school children who are attending for treatment.

Figures relating to the work carried out by the authority are as follows:—

	Children		Mothers	
	1971	1970	1971	1970
Number inspected	174	127	19	12
Number requiring treatment ...	131	102	18	10

	Children		Mothers	
	1971	1970	1971	1970
Number treated	129	144	20	11
Number re-inspected	17	12	4	3
Total visits for treatment	294	312	65	41
Courses of Treatment completed	91	76	16	9
Teeth filled	223	133	34	29
Teeth extracted	172	154	53	51
General Anaesthetics administered				
by Dental Officers	49	35	—	—
Consultant Anaesthetist	25	32	6	3

Care of Premature Infants

The number and death rate of premature infants used to be a problem in Cheltenham but is no longer so. The number of premature live births has fallen as compared with 1970. The premature still births are the same as last year. The figures are as follows:—

No. of Premature Live Births notified:

(a) In hospital	69
(b) At home	5

No. of Premature Still Births notified:

(a) In hospital	2
(b) At home	—

Particulars of deaths and survival rates of premature live babies are shown in the table on page 21.

The following table shows in more detail the distribution of premature babies born during the year by weight and survival rate:—

Weight at Birth	Premature live births													Premature Still Births	
	Born in Hospital					Born at home or in a nursing home									
						Nursed entirely at home or in a nursing home			Transferred to hospital on or before 28th day						
	Total births (1)	within 24 hours of birth (2)	in 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	Born in hospital (13)	Born at home or in a nursing home (14)	
1. 2lb. 3oz. or less	4	3	—	—	1	1	—	—	—	—	—	—	1	—	
2. Over 2lb. 3oz. up to and including 3lb. 4oz.	3	1	—	—	—	—	—	—	—	—	—	—	—	—	
3. Over 3lb. 4oz. up to and including 4lb. 6oz.	15	2	—	—	—	—	—	—	—	—	—	—	1	—	
4. Over 4lb. 6oz. up to and including 4lb. 15oz.	14	—	—	—	—	—	—	—	—	—	—	—	—	—	
5. Over 4lb 15oz. up to and including 5lb. 8oz.	33	1	—	—	4	—	—	—	—	—	—	—	—	—	
6. Total	69	7	—	—	5	1	—	—	—	—	—	—	2	—	

Notification of Births

The following table shows the actual number of births notified in Cheltenham during the period 1st January to 31st December, 1971 and the number is adjusted by any notifications transferred in or out of the area:

	Adjusted Live Births	Adjusted Still Births	Total Adjusted Births
1. Domiciliary	58	—	58
2. Institutional	974	4	978
3. Total	1032	4	1036

The number of babies born at home continues to drop rapidly. Following a large decrease last year there has been another reduction this year of almost 25 per cent. As the figures show, only 58 babies were born at home during the year. This decrease is largely accounted for by the general practitioner maternity unit, available to doctors and midwives, now functioning as part of the Cheltenham Maternity Hospital.

Nurseries and Child Minders Regulations Act, 1948, as amended by the Health Services and Public Health Act, 1968.

On 31st December, 1971 there were 42 private child minders looking after 198 children and 11 private day nursery/playgroups looking after 333 children. Although the majority of these places is taken up by children whose parents both go out to work, this is not entirely so, and this private sector provision takes considerable pressure off our own nurseries.

The only means of meeting this demand adequately is the provision by the Education Authority of nursery schools but there does not seem to be any immediate prospect of this.

The provision of these services is now the responsibility of the new Social Services Department but we are continuing to administer them for a temporary period, on behalf of the Director of Social Services.

Problem Families Committee

The work of this Committee has continued throughout the year at their meeting every two months, and the attendance and support of all the officers concerned has been of great value in dealing with many of our problem families. At the end of the year 17 problem families were under review. The Committee meets every two months for report, discussion, and decision as necessary. The following departments are represented:—

Housing, Education, Social Services, Probation, Health and Social Security, and N.S.P.C.C.

When necessary other professional officers are invited to attend.

SECTION 23

Midwifery Services

Ante-Natal Clinics

Ante-natal Clinics are held at Cheltenham Maternity Hospital and Hesters Way Health Centre. At the Health Centre the clinics are attended by family doctors and midwives. Hospital staff, family doctors and midwives are in attendance at the

clinics held at the Maternity Hospital.

Relaxation classes are held at the Maternity Hospital and conducted by a physio-therapist; health education talks are given by health visitors and midwives to expectant mothers.

Maternity beds for hospital confinement are allocated for medical and social reasons. Each applicant is visited by a midwife who makes an assessment of the need for institutional confinement in all cases where the reason for the application is other than medical. Institutional confinements take place at the Maternity Hospital, but occasionally when accommodation is over booked, some cases are transferred to Cirencester or Stroud Maternity Hospitals.

Domiciliary Midwifery

The domiciliary midwifery staff is up to establishment and is providing a service for mothers who still wish to have their babies at home or in the General Practitioner Unit; a service is also provided for the increasing number of mothers who wish for an early discharge after their hospital confinement.

The General Practitioner unit at the Maternity Hospital is a unit of 8 beds where patients are attended by their family doctors and midwives; the hospital consultant staff are readily available if required. The Unit provides a more informal atmosphere for the mother, — she has the care of her own doctor and midwife but has the security of the hospital services and to date this has been a popular arrangement with the mothers.

SECTION 24

Health Visitors

In almost every department the health visitors work has increased during the year and any further increase will be largely non-productive without additional staff. Case loads are well above the recommended maximum. It is four years since the Health visiting staff was increased and the amount of work carried out at the moment requires two extra health visitors, in order to deal adequately with case loads, general practitioner attachment, field work instructing, training, hospital attachment, etc. The implementation of the Social Services Act will make very little difference to the health visitor's work load as can be seen from the following summary of work during the year:

The following summary is of the work done by the Health Visitors during the year and includes work done on attachment to general practitioners:

Number of cases visited during the year	...	...	...	6,390
First visits to infants under 1 year of age	...	...	...	1,249
Total visits to infants under 1 year of age	...	...	...	4,741
Visits to persons 65 and over	...	...	...	744
Visits to mentally disordered persons	...	...	...	66
Tuberculosis visits	...	...	...	34
Investigations of Social Conditions for Hospitals, visits to sick persons				
old people, etc.	...	...	...	306
Other cases	...	...	...	2,104

It is hoped that the health visitor establishment will be reviewed in the very near future. There is no lack of applicants and most years we are asked to sponsor students on the local Health Visitor Training Course. There is no point at the moment in sponsoring any more students as we cannot offer them any hope of an appointment in Cheltenham, although there is plenty of work for them to do. In the past we have

been able to sponsor students because of pending retirements but this source was exhausted several years ago.

SECTION 25

Home Nursing

There has been an increase in the work of all departments of the home nursing service during the year and fortunately we have little difficulty in maintaining a full establishment of nurses. The attachment of home nurses to general practice continues to be successful and popular and is increasing. The integrated training scheme for the SEN (State Enrolled Nurse) qualification on which the Home Nursing Service and the Cheltenham General Hospital co-operate, continues to operate satisfactorily.

Work carried out during the year is shown as follows:—

Number of cases on books, 1st January, 1971	...	...	519
Number of cases on books, 31st December, 1971	...	...	481

General Nursing:

New cases of all types	...	...	...	1,522
Visits to all general patients	...	...	...	50,692
Visits by Bathing Attendants (approx.)	...	...	...	3,980

Although there has been a drop in the number of new cases during the year, this has only allowed more time to be spent on others and the number of general nursing visits is appreciably up on last year. There is a big demand for the Bathing Attendant service introduced a few years ago.

SECTION 26

Vaccination against Smallpox

On the advice of the Department of Health and Social Security, vaccination against smallpox is no longer recommended as a routine procedure in early childhood, and we do not now offer it to parents. The Department has accepted the advice of the Joint Committee on Vaccination and Immunisation that this procedure is now no longer necessary in view of the much reduced risk of smallpox being introduced into this country, because of the success of eradication programmes overseas. But all travellers to and from countries where smallpox is still endemic should still be protected by recent vaccination. The same applies to all health service staff likely to come into contact with the disease. They should be vaccinated and offered regular re-vaccination.

Vaccination against Diphtheria, Whooping Cough and Tetanus

Protection against these diseases begins after the 3rd month and is given by a triple (combined) vaccine. With the exception of Whooping Cough, it is repeated at 5 years of age. A further tetanus booster is given at about 15 years.

The following figures show the number of completed courses carried out during the year and the number of booster doses:—

	<i>Tetanus</i>	<i>Diphtheria/ Tetanus</i>	<i>Diphtheria/ Whooping Cough/ Tetanus</i>
Completed Courses	231	57	889
Boosters	434	977	103

Vaccination against Poliomyelitis

Protection against Poliomyelitis is given at the same time as the triple vaccine but is given by mouth.

During the year a total of 1,033 children between the ages of 6 months and 15 years received a complete course; Booster doses covering this age group numbered 1,687.

Vaccination against Measles

After an uncertain start measles vaccination is now established and the acceptance rate is increasing. The result has been a very marked drop in the number of notified cases during the year. At this rate measles could all but be eliminated in a few years.

847 children were protected against the disease during the year.

Vaccination against Rubella

Vaccination against Rubella (German Measles) began during 1970 in girls aged between 11 and 14 years. The Rubella virus can have a very damaging effect on the unborn child if the mother contracts the disease, or is exposed to infection, especially during the first three months of pregnancy, or even later. The result for the child can be disastrous, blindness, deafness, defects of the heart, mental subnormality, and other developmental abnormalities.

For many years expectant mothers, exposed to infection have been treated by a specific injection (gamma globulin) but it is doubtful if this is always effective. The new vaccine, while not preventing the disease in the mother, protects the foetus against the damaging effects of the virus. If every girl could be vaccinated before child-bearing age, this would result in a considerable reduction in the large number of children born every year with physical and mental defects, as well as reducing the anxiety and hardship which such births cause in the family.

The availability of the vaccine has been made known to parents and it is hoped there will be a good response. It can be given at school clinics or by the family doctor. During the year 620 schoolgirls were vaccinated.

There is no reason why rubella vaccination should not be offered to the older age groups in the female population exposed to the disease, but there is a risk which must be fully appreciated.

There is a possibility that live attenuated rubella virus administered during pregnancy could infect and damage the foetus, producing congenital abnormalities. Therefore pregnant women must not be vaccinated and pregnancy should be excluded before vaccination is undertaken. This danger to the developing foetus equally applies in the case of a pregnancy conceived within two months following vaccination. Women of child bearing age must be warned that for at least two months after vaccination they must take strict contraceptive precautions. If there is any possibility that they may become pregnant within this period they should not be vaccinated.

Rubella vaccination, with a full explanation of the risk involved, was offered to the female teaching staffs in the schools but understandably, the response was not great.

Vaccination against Tuberculosis

Details of B.C.G. vaccination will be found in the report on the School Health Service.

During the year vaccinations of all types have shown an all round increase and this is largely as a result of continuing health education by all members of the medical

and nursing staff. The importance of vaccination and immunisation is constantly brought to the notice of the public by doctors, health visitors and all those concerned with the health and welfare of the community.

The vaccination programme is being maintained at a satisfactory level with the continuing assistance of modern methods, like the computer. Serious infectious disease is no longer a public health problem.

SECTION 28

Prevention of Illness, Care and After-Care

Tuberculosis

The need for community care of the tuberculosis patient is now very much reduced because of the much lower incidence of the disease. Financial assistance is available from the Ministry of Social Security, and supportive services where required are provided by health visitors who co-operate with the hospital in tracing contacts of new cases. Financial assistance can also be provided in cases of need by the Tuberculosis Care Committee, a voluntary body which has helped tuberculosis patients in the town for many years, and which now makes similar facilities available for people suffering from any disease of the heart or chest.

Cervical Cytology

One cervical cytology clinic is held per week but these are increased according to the size of the waiting list. The site of the clinic also alternates between the St. George's Road Clinic and the Hesters Way Health Centre, according to the size of the waiting list at either place. We do not refuse any applicants and these services are well advertised, but there is still not the demand that one would expect.

1,698 examinations were carried out during the year. This figure includes all examinations done in Cheltenham at our own clinics, at the Family Planning Clinic and by the Mobile Stay-Well Clinic. The rate of positive cases averages 3 per 1000 examinations.

General

The general work of the Health Department in the prevention of illness, care and after-care, although a delegated function under the scheme, is very much a joint effort between our own staff, Health Visitors, Home Helps, District Nurses, etc., and other bodies, such as the Ministry of Social Security, Women's Voluntary Service, Red Cross, the County Welfare Department, Cheltenham Old Peoples' Welfare Association and the Tuberculosis Care Committee already mentioned. The Hospital Authority and the Family Doctors are very closely associated in this work especially as it concerns the care of patients discharged from hospital and the welfare of old people, and altogether it is this co-operative effort which achieves results. Cheltenham is also very fortunate in the amount of voluntary effort put into this work, and we co-operate with many other voluntary bodies.

I need only mention the Local Spastics Committee who run their own excellent school for spastic children, the Cheltenham Branch of the Infantile Paralysis Fellowship, the Cripples' Aid Committee, the Muscular Dystrophy and Multiple Sclerosis Group, and the well-known and greatly appreciated work done by the Committee who arrange for the weekly swimming sessions for handicapped persons at Alstone Baths. The Cheshire Homes in the town is doing wonderful work.

Sick room equipment is available on loan when required for patients being nursed at home. Large items, such as wheel chairs, etc., can be obtained from the Red Cross at a small charge.

Chiropody Service

The Cheltenham Old Peoples' Association provide a Chiropody Service for the town on the Council's behalf. The service is administered by a part-time clerk who is responsible for arranging appointments and where necessary transport together with payment of Chiropodists fees. There are seven chiropodists employed part-time in the service, five working from their own surgeries and two from the Chiropody Surgery situated at the rear of the Municipal Offices.

Sessions are held at this surgery every Wednesday and Friday mornings, the Chiropodist working on a pro-rata basis and also every other Monday afternoon, the Chiropodist in this case working on a sessional basis. The other five chiropodists are paid on a pro-rata basis. Greater use would, of course, be made of this surgery if more chiropodists holding the qualifications laid down by the Ministry were available.

The cost of this service is paid for by the Gloucestershire County Council, the money being estimated for and paid through the Welfare and Health Committee of the Borough Council under their delegation duties.

The following is a summary of the work carried out during the year:

Number of treatments at clinics and centres—

Elderly	2,158
Physically Handicapped	76
Expectant Mothers... ..	—
Domiciliary at Patient's own home	149
Number on Register 31st December, 1971	940
Number on December 31st 1971 waiting appointments	264

WELFARE SERVICES

Residential Accommodation

Mr. H.D. Nichols, Director of Social Services, has kindly supplied the following information concerning the number of Cheltenham old people in residential accommodation in the area, as at 31st December, 1971:—

Home	Men	Women	Total
Arle House	7	36	43
Sunnyside	14	32	46
Orchard House, Bishops Cleeve	12	23	35
East Court, Charlton Kings	6	15	21

I also set out below details of Cheltenham elderly people accommodated elsewhere than in Homes in the Cheltenham area. It is not every applicant from Cheltenham area who wishes to enter a Cheltenham Home and these residents are generally accommodated in areas of their choice, often where they can be visited by friends or relatives.

Other Homes

	Men	Women	Total
Atherton Close	—	12	12
Ellerslie	2	19	21
East View	5	3	8
Ferney Hill	1	1	2
Grevil House	20	21	41
Horsbere House	—	3	3
Newton House	—	1	1
Northleach Hospital	1	1	2
Pasternoster	—	1	1

The Priory	1	—	1
Puckrup Hall	2	13	15
Ridgewood	3	2	5
Southfield	2	3	5
Townsend House	3	4	7
The Willows	4	1	5

My records also show that there are 17 men, 59 women and 1 married couple awaiting admission to County Homes from the Cheltenham area.

Mr. Nichols and his staff do their utmost to deal with this waiting list which varied little from year to year. There is an urgent need for more residential accommodation for elderly people who can no longer live alone at home, even with the help of the various community services. This can only be supplied when additional financial resources are made available. There is an equally urgent need for more hospital accommodation for the elderly chronic sick.

One hears too much about the "problem" of old people. There would be no problems if residential and hospital accommodation for the elderly was adequate for the community. There is a problem if an old person's admission to an old peoples home or chronic sick hospital is delayed to the point where rehabilitation and return to the community is literally a dying hope.

Temporary Accommodation

Under Section 21(1)(b) of the National Assistance Act, 1948, the Local Authority has a duty to provide temporary accommodation "for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen, or in such circumstances as the authority may in any particular case determine".

This type of accommodation is provided by the County Social Services Department at the hostel at Newent and in other accommodation in Cheltenham.

Welfare of Old People

Visiting of old people is undertaken by the Health Visitors and social workers, working in close contact with other voluntary and statutory agencies. A register is kept of all old people in the town visited for the first time and their needs ascertained and recorded for future reference. The Health Visitor advises and provides help where she can or makes arrangements for other help to be provided. In cases where residential accommodation is considered necessary, the case is referred to the Area Director of Social Services, in Cheltenham.

We also work very closely with the Cheltenham Old People's Welfare Association who are also responsible for providing the Meals on Wheels and the Chiropody Service both very much appreciated by old people.

Removal to Suitable Premises of Persons in need of Care and Protection (National Assistance Act, 1948, Sec. 47 and Amendment Act, October 1951)

No old persons were compulsorily removed from their homes during the year to hospital in their own interests. This is a measure which is only taken as a last resort when it becomes clear that the case is beyond the scope of the domiciliary services. Fortunately there are not many such cases. After admission, house and effects become the responsibility of the Area Director of Social Services, and the old persons' interests are safeguarded. Regular reports are received from the hospital or old peoples home with a view to discharge, but

unfortunately when conditions ultimately make compulsory removal necessary, it is seldom that the old person is able to return home again unless there is a relative or friend willing to take over the care and responsibility.

British Red Cross Society Club

This Social Club continues to expand and fill a very real need. It meets fortnightly on Tuesday afternoon, at the Whaddon Boy's Club, under the leadership of the British Red Cross Society.

Cheltenham Cripples Aid Association

Regular visiting of the more severely disabled people is carried on by this Committee which also provides many varied amenities not available through the Health Service. This valuable help given to handicapped people in real need is much appreciated.

Meals on Wheels

This service has been operated successfully during the year in the capable hands of the Old Peoples Welfare Association providing a much needed and highly appreciated help for old people. The number of meals provided during the year was 16,666. (Previous year 16,437).

HEALTH EDUCATION

The field of Social and Preventive Medicine is ever changing, as is the pattern of disease within Society, and each era brings its own specific health problem.

A decade and more ago, such diseases as Tuberculosis, Diphtheria and Poliomyelitis, were causes of grave concern, nowadays epidemics of such diseases are rare, due to improved social conditions, the discovery of vaccines and the education of the public in the part they must play to effect a higher degree of community good health.

The present time brings its own particular challenge to Health Education, as we face the facts and statistics about ever increasing ill health and deaths from such causes as road and home accidents, smoking, alcoholism, drug dependency and promiscuity.

Although the consumption of alcohol and smoking are socially accepted habits, each carries its own danger, and the latter has been proved to be positively harmful to the health of the individual, predisposing to heart disease and lung cancer.

Prior to 1968, measles was the infectious disease with the highest incidence nationally, this has been greatly reduced by vaccination of young children during the past four years. Now the sexually transmitted diseases heads the list as the highest number of infected persons.

Early detection of suspicious signs of breast or cervical cancer at either General Practitioner Surgeries or Local Authority Clinics, leads to prompt investigation and where necessary, treatment, thus reducing the number of premature deaths from this cause.

These then, are some of the subjects which have been given greater emphasis during the past year and will continue to do so through the next year on the Health Education Programme.

As has been the case in the past, the Health Visitors have continued their work in the Ante Natal Clinic in helping parents in the preparation for the care of their young infants and children. For the third year in succession the number of births

in the Borough has shown a decrease and this has been reflected in the number of talks given and the audience rating, but the course has been as comprehensive as ever. We are indebted to the Cheltenham Maternity Hospital for giving us the opportunity to share in this work with members of their Staff.

The Department welcomes the opportunity to visit the schools and expresses its gratitude to those who have invited us to speak to their pupils on various aspects of health. New films have been purchased on V.D., Smoking and its relation to health, and these have been shown to pupils, emphasising the facts brought out in the talks given.

With the raising of the school leaving age, the Health Visitors have already been approached to work with The Home Economics teachers with regard to child care, the Health Visitors have been giving these courses for some years in certain schools, and the pupils visit the Child Health Clinics, observing at first hand, mothers and infants receiving the benefits of preventative medicines as practised by the Medical Officers.

More invitations were received from colleges during the past year and the Health Visitors spoke on various aspects of Public Health and Community Care. Many local students have also received much help from the department in the borrowing of equipment for illustrating their own talks when on teaching practice, etc.

The uniformed groups were helped, most of them requested specific talks so that they could acquire the necessary information for special courses and schemes which they had undertaken. Although this work is undertaken in their own time, the Health Visitors enjoy their periods with the Rangers, Scouts, Girl Guides and others.

Older and mixed audiences have made many calls on the department and much pleasure has been derived from the acceptance of invitations from Senior Citizens Clubs.

The talks requested, reflects the needs and problems of the audience and subjects which have been particularly popular have been nutrition, particularly with a view to eating as well, but inexpensively as possible. "Care of the Feet" has been another popular subject, and a worthwhile subject for this age group, as the ability to get about is so important.

Home Safety and the prevention of Home Accidents is a subject frequently requested by all age groups, and one on which the public needs constant education.

During the past year a permanent display stand has been on view to the public, and a new subject is chosen each month, these have varied widely from the needs and importance of play to children, to the dangers of Smoking to Health.

The number of Health Visiting Students from the local college and students from other disciplines requiring field work instruction increases annually.

In turn, the Health Visitors themselves keep abreast of changes in Curative, Preventative and Social Medicine, by attending lectures at the local Post Graduate School, and we appreciate all the invitations received from the Local Medical Consultants. Special In-Service training courses and refresher courses, as well as courses for Specialist subjects are attended by all the Health Visitors in turn. Some of these courses are local whilst others are residential in various colleges

and universities.

Over the past years the Borough has had a very active Health Education programme and this has so far been maintained, but with increasing demands on the Health Visitors in other aspects of their work expansion will be difficult to achieve without an increased staff.

"Health Education aims at promoting the greatest possible fulfilment of inherited powers of the body and mind, and the happy adjustment of the individual to Society. It is the educational approach to health problems and as such, is concerned with practical measures for the promotion of Health and Treatment of Disease."

During the year the following talks have been given:—

<i>Organisation</i>	<i>Talks Given</i>	<i>Total Audience</i>
Parentcraft	127	1,928
Schools (Parentcraft)	64	1,172
" (Other Subjects)	33	946
Colleges	19	355
Uniformed Groups	19	183
Adult Groups	44	1,284
	<u>306</u>	<u>5,868</u>

SCHOOL HEALTH SERVICE

and universities. The health field is a rapidly growing area and this fact presents a number of opportunities for the health field.

Over the past years the health field has been expanding rapidly. The health field is a rapidly growing area and this fact presents a number of opportunities for the health field.

to achieve a high level of health care. The health field is a rapidly growing area and this fact presents a number of opportunities for the health field.

"Health Education is a process of providing the necessary knowledge, skills, and attitudes for the individual to make informed choices for the body, mind, and the proper adjustment of the individual to society. It is the educational approach to health promotion and disease prevention."

as such, it is concerned with practical measures for the promotion of health and the prevention of disease. The health field is a rapidly growing area and this fact presents a number of opportunities for the health field.

During the past few years, the health field has been expanding rapidly. The health field is a rapidly growing area and this fact presents a number of opportunities for the health field.

Adult Groups	44	127	1,928
Unaffiliated Groups	16	54	1,125
Colleges in financial need	42	127	1,928
Other Organizations	127	54	1,125
Schools	127	54	1,125
Parish	127	54	1,125

changes referred to in last year's Report concerning the more selective examination of school children have continued, and although the number of routine medical inspections has dropped, more attention is being directed to children in need of medical care, especially those coming within the category of handicapped pupils. The survival rate of severely handicapped children has been considerably increased by advances in medical treatment and more of these children than formerly are reaching school age and beyond, and so more of our services must be devoted selectively to these children.

Our school medical and dental officers and nurses provide in the schools a comprehensive programme of preventive medical and dental care, assisted by other professional staff, speech therapists, physiotherapists, and occupational therapists, and not least by head teachers and their staffs who are ever ready to co-operate in which we lay particular emphasis on the early detection and treatment of dental and more and more necessary. Our work is never finished but we are all aware of undesirable influences which although not prevalent in our own schools, are causing concern nationally and are always a potential danger locally.

Our vaccination and immunisation programmes continue to give excellent results and infectious diseases in schools will soon be almost unknown. However, the new virus continues to be a great risk. However, there is one cloud on the horizon. Measles disease is very much on the increase both nationally and locally. The incidence of measles has now risen to a level which is double that of the last year, but fortunately not among our young people although it is the young people who have been the main victims of the disease throughout the country. We hope that this will not become a serious problem in the town generally. It is a varied disease but infection in the schools and in the town generally. It is a subject about which all school leaders should be informed. The increased incidence is largely due to the fact that it is not being reported as it should be.

There is another subject on which I have not previously commented and I would not do so now, but I am frequently asked whether school children should be given our schools. This is a question which is difficult to answer accurately, because it is impossible to give accurate information of a problem something which requires active measures to combat. There is no drug which would prevent infection with measles. There may be and no doubt there is a certain amount of experimentation with some of the softer drugs, stimulated by the widespread and universal publicity which even the local incident receives. This will be a once for all remedy by one or two children and is not likely to be repeated, and there is no reason to believe that this kind of thing is at all common or really dangerous as an effect. It is often an act of bravado, once done quickly forgotten. One must draw a clear distinction between this tentative experimentation and the frank and deliberate misuse or abuse of drugs. From the information at my disposal I would say that this is not happening in our schools. Nevertheless, as in the case of venereal disease, we are giving this subject a prominent place in our school health education programme.

SCHOOL HEALTH SERVICE

SECTION III

Our school medical and dental officers and nurses provide in the schools a comprehensive programme of preventive medical and dental care, assisted by other professional staff, speech therapists, physiotherapists, and occupational therapists, and not least by head teachers and their staffs who are ever ready to co-operate in which we lay particular emphasis on the early detection and treatment of dental and more and more necessary. Our work is never finished but we are all aware of undesirable influences which although not prevalent in our own schools, are causing concern nationally and are always a potential danger locally.

Our vaccination and immunisation programmes continue to give excellent results and infectious diseases in schools will soon be almost unknown. However, the new virus continues to be a great risk. However, there is one cloud on the horizon. Measles disease is very much on the increase both nationally and locally. The incidence of measles has now risen to a level which is double that of the last year, but fortunately not among our young people although it is the young people who have been the main victims of the disease throughout the country. We hope that this will not become a serious problem in the town generally. It is a varied disease but infection in the schools and in the town generally. It is a subject about which all school leaders should be informed. The increased incidence is largely due to the fact that it is not being reported as it should be.

SCHOOL HEALTH SERVICE

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER 1971

To the Chairman and Members of the Special Services and General Purposes Sub-Committee.

Mr. Chairman, Ladies and Gentlemen,

Changes referred to in last year's Report concerning the more selective examination of school children have continued, and although the number of routine medical inspections had dropped, more attention is being directed to children in need of medical care, especially those coming within the category of handicapped pupils. The survival rate of severely handicapped children has been considerably increased by advances in medical treatment and more of these children than formerly are reaching school age and beyond, and so more of our services must be devoted selectively to these children.

Our school medical and dental officers and nurses provide in the schools a comprehensive programme of preventive medical and dental care, assisted by other professional staff, speech therapists, physiotherapists, audiometricians etc., and not least by head teachers and their staffs in the health education field, on which we lay particular emphasis and which, in a permissive society, becomes more and more necessary. Our school children were never healthier but we are all aware of undesirable influences, which although not prevalent in our own schools, are causing concern nationally and are always a potential danger locally.

Our vaccination and immunisation programmes continue to give excellent results and infectious disease in schools will soon be almost unknown. Measles has been greatly reduced this year and could be eliminated if the acceptance of the new vaccine continues at the present rate. However there is one cloud on the horizon. Venereal disease is very much on the increase, both nationally and locally. The incidence of gonorrhoea has more than doubled in Cheltenham in the last year, but fortunately not among our young people although it is the young people who have shown the greatest increase in general throughout the country. We hope that this will not happen here and we have increased our venereal disease health education in the schools and in the town generally. It is a subject about which all school leavers should be informed. The increased incidence is largely due to ignorance.

There is another subject on which I have not previously commented and I would not do so now, but I am frequently asked — Is there a drug problem in our schools? This is a question which is difficult to answer accurately, because it is impossible to get accurate information. If a problem is something which requires active measures to combat, there is no drug problem in our schools. There may be and no doubt there is, a certain amount of experimentation with some of the softer drugs, stimulated by the widespread and unhealthy publicity which even the isolated incident receives. This will be a once for all assay by one or two curious children and is not likely to be repeated, and there is no reason to believe that this kind of thing is at all common or having untoward effects. It is often an act of bravado, once done quickly forgotten. One must draw a clear distinction between this tentative experimentation and the frank and deliberate misuse or abuse of drugs. From the information at my disposal I would say that this is not happening in our schools. Nevertheless, as in the case of venereal disease, we are giving this subject a prominent place in our school health education programme.

I would like to thank once again the Chairman and Members of the Special Services and General Purposes Committee for their encouragement and support during the year, and also the Borough Education Officer, Head Teachers and their staff for their co-operation. My gratitude is also due to my own staff, medical, nursing, clerical and others employed in special branches of the school health service, for another year's loyal support.

T.O.P.D. LAWSON,
School Medical Officer.

School Medical Inspections

The routine medical inspections of school children have continued during 1971 and 3,561 children were examined throughout the year.

Children are examined:

- (a) on entry for the first time to a maintained school;
- (b) during the year in which they are 8 years old and
- (c) in the last year of their attendance at a secondary school.

Older pupils are examined before they leave school at the higher age groups in Pate's Grammar School for Girls, the Boy's Grammar School and the Technical High School.

As a result of these inspections, 371 pupils were found to have defective vision (excluding quint) and where necessary referred to the Eye Specialist. A further 237 children were found to be suffering from other defects or diseases requiring treatment, and the necessary action was taken in all cases. The number of defects requiring to be kept under observation but not requiring treatment was 1,407 and the children concerned were kept under special observation during the year. This latter group, of course, includes very many minor defects which may be remedied spontaneously and never require treatment. They are kept under observation merely as a precautionary measure. This is, of course, the main purpose of the routine medical inspections, to prevent the minor defect becoming a major one.

The school population at the end of 1971 was 13,442 and every child has an up-to-date medical record.

Special School Medical Inspection

These inspections cover children examined other than at a routine medical inspection for some special reason. During 1971 49 children were examined at these inspections, and the appropriate action taken.

Re-Inspections

Re-inspections have been held each term in all schools in the Borough when children who had previously been noted at routine or special medical inspections to be in need of further observation and advice, were seen by the School Medical Officers.

During 1971, 324 children were examined at these inspections.

PART I

**MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY
AND SECONDARY SCHOOLS (Including Special Schools)**

TABLE A. Periodic Medical Inspections

Age Groups inspected (By year of Birth)	No. of pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED			No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory	No.		for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
1967 and later	2	2	—	—	—	—	—	—
1966	748	748	—	—	—	38	53	77
1965	470	469	1	—	—	23	40	60
1964	46	46	—	—	—	4	3	7
1963	1083	1083	—	—	—	90	77	147
1962	84	84	—	—	—	11	3	13
1961	51	51	—	—	—	4	1	5
1960	25	25	—	—	—	3	1	3
1959	102	102	—	—	—	18	6	23
1958	122	122	—	—	392	17	9	23
1957	495	494	1	1	394	83	31	108
1956 and earlier	333	332	1	1	110	80	13	89
TOTAL	3561	3558	3	3	896	371	237	555

Column (3) total as a percentage of Column (2) total 99.92% } to two places of decimals.
 Column (4) total as a percentage of Column (2) total .08% }

TABLE B. Other Inspections

Number of Special Inspections	...	...	...	...	...	49
Number of Re-Inspections	...	...	...	...	...	324
Total	...	...	...	...	...	373

TABLE C. Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	28,421
(b) Total number of individual pupils found to be infested	414
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2) Education Act, 1944)	281
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act, 1944)	—

PART II

Defects found by Periodic and Special Medical Inspections during the year

Defect Code No.	Defect or Disease		Periodic Inspections				Special Inspection
			Entrants	Leavers	Others	Total	
4	Skin	T	6	11	4	21	2
		O	33	15	30	78	—
5	Eyes a. Vision	T	65	165	142	371	1
		O	79	42	184	305	—
	b. Squint	T	31	7	23	61	—
		O	6	—	2	8	—
	c. Other	T	6	5	5	16	—
		O	5	25	13	43	—
6.	Ears a. Hearing	T	6	8	3	17	3
		O	70	7	39	116	16
	b. Otitis Media	T	4	1	—	5	—
		O	13	6	7	26	—
	c. Other	T	1	—	3	4	—
		O	7	2	2	11	—
7	Nose and Throat	T	8	2	6	16	1
		O	102	14	43	159	1
8	Speech	T	11	—	2	13	1
		O	17	2	10	29	—
9	Lymphatic Glands	T	1	—	—	1	—
		O	16	1	12	29	—
10	Heart	T	1	1	—	2	—
		O	14	7	7	28	—
11	Lungs	T	1	—	—	1	—
		O	47	21	39	107	1
12	Developmental a. Hernia	T	1	—	1	2	—
		O	5	—	4	9	—
	b. Other	T	6	1	13	20	2
		O	97	14	86	197	1
13	Orthopaedic a. Posture	T	1	3	7	11	1
		O	4	11	16	31	—
	b. Feet	T	10	—	5	15	—
		O	20	5	16	41	—
	c. Other	T	6	6	5	17	—
		O	20	14	15	49	2
14	Nervous System a. Epilepsy	T	—	1	2	3	2
		O	3	3	7	13	—
	b. Other	T	1	—	—	1	—
		O	6	4	7	17	—
15	Psychological a. Development	T	—	—	6	6	—
		O	8	—	9	17	3
	b. Stability	T	—	1	9	10	1
		O	40	3	19	62	1
16	Abdomen	T	1	1	6	8	3
		O	11	4	11	26	1
17	Other	T	—	3	2	5	2
		O	2	3	1	6	3

(T) = Treatment

(O) = Observation

PART III

**Treatment of Pupils attending maintained Primary and Secondary Schools
(Including Special Schools)**

TABLE A. Eye Diseases, Defective Vision and Squint					<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint ...					12
Errors of refraction (including squint) ...					Not available
Total ...					<u>12</u>
Number of pupils for whom spectacles were prescribed					198
TABLE B. Diseases and Defects of Ear, Nose and Throat					<i>Number of cases known to have been dealt with</i>
Received operative treatment:					
(a) for disease of the ear ...					124
(b) for adenoids and chronic tonsilitis ...					488
(c) for other nose and throat conditions ...					124
Received other forms of treatment ...					<u>149</u>
Total					<u>885</u>
Total number of pupils still on the register of schools at 31st December 1971 known to have been provided with hearing aids:—					
(a) during the calendar year 1971 ...					4
(b) in previous years ...					27
TABLE C. Orthopaedic and Postural Defects					<i>Number of pupils known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments					275
(b) Pupils treated at school for postural defects ...					—
Total ...					<u>275</u>
TABLE D. Diseases of the Skin (excluding uncleanness, for which see Table C of Part I)					<i>Number of pupils known to have been treated</i>
Ringworm (a) Scalp ...					—
(b) Body ...					2
Scabies ...					6
Impetigo ...					7
Other skin diseases ...					<u>5</u>
Total					<u>20</u>
TABLE E. Child Guidance Treatment					<i>Number of pupils known to have been treated</i>
Pupils treated at Child Guidance clinics					205

TABLE F. Speech Therapy.

Pupils treated by speech therapists
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*Number of pupils known
to have been treated*

213

TABLE G. Other Treatment Given.

(a) Pupils with minor ailments	...	...	...	...
(b) Pupils who received convalescent treatment under school Health Service arrangements	...	...	...	...
(c) Pupils who received B.C.G. vaccination	...	...	...	...
(d) Other than (a), (b) and (c) above:—				
Ultra Violet Light Treatment	...	...	...	...
Chest	...	...	...	...
Anaemia	...	...	...	...

*Number of pupils known
to have been treated*

972

—

863

1

1

2

Total (a) — (d)

1839

The foregoing tables show that the incidence of defects is not high, nor should it be, if the service functions efficiently year by year.

Minor Ailments Clinic

The Clinic is open on Monday and Friday afternoons for children suffering from minor injuries such as sprains and abrasions or other ailments, such as boils, warts and athlete's foot. Treatment is carried out by a School Nurse or Health Visitor under the supervision of a School Doctor. During the school holidays minor ailments clinics continue to be held on the usual days.

During term time additional clinics are held weekly at Whaddon, Oakley, Eimfield and St. Paul's Schools.

Audiometry

The policy of testing the hearing of all school children who have reached the age of six years has continued in the Borough throughout the year. Testing is carried out by a qualified audiometrist using a portable audiometer and, when necessary, cases are followed up, being referred to their family doctors or to hospital as required.

An audiometry clinic is held at the School Clinic during each school holiday when the children are seen by the Audiometrist and the School Medical Officer. Children may be referred to this clinic by teachers, general practitioners, or the School Doctors if a hearing loss is suspected. Details of 1,451 audiometric examinations carried out in Cheltenham schools during the year, are shown as follows:—

Routine Tests

Number Tested	...	...	1,084
Number Failed	...	...	69
Referred to Specialist	...	...	2

Special Cases and Re-tests

Number Tested	...	...	367
Number Failed	...	...	116
Referred to Specialist	...	...	45
Schools Visited	...	...	19
Clinics held at School Medical Clinic	...	...	9

I am greatly indebted to Mr. G.N. Barker, M.B., B.S., F.R.C.S.(Ed.), D.L.O., Ear, Nose and Throat Surgeon, Cheltenham General Hospital, for his co-operation in the examination and treatment of cases referred to him by our School Medical Officers.

PART IV

Dental Inspection and Treatment Carried out by the Authority**Staff Changes**

We received with regret the resignation of Miss K.D. Owen, B.D.S., who will be leaving at the end of January, 1972.

Dental Surgery Assistants

Miss B. King resigned and her place was filled for a time by Mrs. S. Thwait who left at the end of December. Mrs. A.M. Matthews will be appointed with effect from 1st January, 1972.

Dental Health Education

Visits to the schools were arranged to offer talks, 19 primary schools and 1 secondary school having requested these.

Talks were found to be preferable to films from the aspect of response but smaller groups of children were required for each talk than for the film show, therefore involving more visits to each school. Leaflets and posters were available and all schools welcomed them.

After an acquisition of 'seconds' toothbrushes late in the year, one school could be issued with a toothbrush for each child, which proved to be an ideal finale for the talk.

The secondary school was visited over several occasions to enable the Dental Health Education to be included in the Biology curriculum. This was found to be a very worthwhile exercise.

Inspection and Treatment

Only about half the total school population were seen at routine dental inspections. Our three largest secondary schools were not inspected and at these schools each child was given a letter asking them to make their own arrangements for examination at the clinic. Since many of them were already receiving treatment from the General Dental Service and many others having regular treatment at the clinic comparatively few were examined but at a saving of about 24 sessions. Had the schools been visited as usual there would have been about 2,200 added to the annual inspection figures thus bringing us near the figure for 1970.

The numbers examined at the clinic show a slight increase as do the total number treated and the number of courses of treatment completed.

At the time of writing I regret to report that our request for an increase in staff of one Dental Officer has been rejected but that an increase of one auxiliary has been approved. Subsequently, due to the resignation of Miss Laister and the lack of response to advertisements for auxiliaries, we, in common with the County, have found that these vacancies could not be filled. There is therefore a possibility that we may appoint a Dental Officer instead of two auxiliaries. This will give us a slight overall increase in staff but a cessation of our dental health education programme unless the already over-burdened County Dental Health Organiser can help us out. Therefore it seems that, unless there is a considerable reduction in the volume of work to be done, we are unlikely to achieve our objective of providing a routine school dental examination for each child during the year and also an adequate treatment service.

During the year I attended a course conducted by the Society for the Advancement of Anaesthesia in Dentistry. The course was on Sedation by

Inhalation and as a result of the application of the knowledge and technique gained on this course many children who are unable to accept treatment because of their fear of dental procedures can now do so.

Use was still made of intravenous anaesthesia for those mentally and psychologically handicapped patients who were unable to accept any form of treatment and our thanks are once again due to Doctor L.V. Martin, M.B., B.S., F.F.A.R.C.S., for his help and encouragement. One school which we added to our list during the year was St. Vincents School for Spastics and many of these children were treated in this way.

With the impending re-organisation of health services much thought is being given to the conduct of the local authority dental service. We are somewhat hampered by the lack of information as to exactly what this re-organisation will entail but it seems that more emphasis will be placed not on the total volume of work done as in the general dental services but on the effectiveness of dental treatment as a benefit to the community. We have already seen that the total number inspected does not necessarily govern the number who receive treatment and it behooves us all to keep an open mind on many principles, to be ready to consider new ideas and perhaps jettison many of our traditionally held beliefs.

I would once again like to thank the members of the dental staff for their support during the year.

The figures relating to inspections and work carried out during 1971 are as follows (1970 figures in parenthesis):—

1. Inspections and Sessions	1971	(1970)
First inspection of year at school	6,511	7,746
First inspection of year at clinic	1,313	1,200
	<u>7,824</u>	<u>8,946</u>
Number found to require treatment	5,589	6,005
Number accepting treatment	3,378	3,685
Number re-inspected at clinic	608	433
Number of pupils treated	3,273	3,089
Number of courses of treatment	3,668	3,457
Sessions devoted to treatment	1,687	1,497
Sessions devoted to inspections	98	119
Sessions devoted to dental health education	44	26
2. Attendances and Treatment		
First visit	3,273	3,089
Subsequent visits	5,014	4,312
Total visits	8,287	7,401
Additional courses of treatment commenced	395	368
Fillings in permanent teeth	6,947	6,352
Fillings in deciduous teeth	2,591	2,466
Permanent teeth filled	5,196	4,742
Deciduous teeth filled	2,185	1,982
Permanent teeth extracted (Carries/ortho)	391/261	323/196
Deciduous teeth extracted	1,934	1,842
General anaesthetics administered by Dental Officers	394	348
General anaesthetics administered by Medical Officers	574	531

INFECTIOUS DISEASES

As already stated, the impact of the common infectious diseases on the health of

the school children is almost negligible as the following figures show:—

<i>Measles</i>	<i>Dysentery</i>	<i>Scarlet Fever</i>	<i>Whooping Cough</i>	<i>Poliomyelitis Paralytic</i>	<i>Infective Non-paralytic Jaundice</i>
46	—	—	10	—	1

The greatly reduced incidence of measles has already been referred to. The number of cases last year was 282.

Tuberculosis

There were two notifications of tuberculosis among school children during the year, both female non-pulmonary.

B.C.G. Vaccination

Vaccination against tuberculosis is now well accepted by parents in Cheltenham. The figures given below show an acceptance rate of 91.4% an appreciable increase on last year's figure (85.8%).

<i>No. of Schools</i>	<i>Invited</i>	<i>Accepted</i>	<i>Tuberculin Tested</i>	<i>No. Positive</i>	<i>No. Negative</i>	<i>Positive 7.3%</i>	<i>Vaccinated</i>
12	1,078	1,009	985	72	913		913

Speech Therapy

The work of this department has continued as in other years. Sessions are held at the School Clinic and in various ordinary and special schools. Pre-school assessment and consultative sessions are held.

Mrs. M.D. Heaven resigned on 30th November, 1971 after fifteen years working for the Borough to take up a new appointment as Senior Speech Therapist to the Gloucestershire County Council. Miss R. Sneezum was appointed on 1st November, 1971 in a joint appointment with the hospital.

For the first time the figures for the work carried out at the Bettridge Special School are included in these returns.

<i>New Cases Accepted for Treatment</i>	<i>Total No. of Consultations</i>	<i>Total No. Discharged</i>	<i>Total No. of Cases on Register at 31st December</i>		<i>Total No. Pupils who received treatment during 1971</i>
			<i>Pre-School</i>	<i>School</i>	
50	448	61	15	179	213

Physiotherapy

There are three physiotherapy sessions held per week at the School Clinic. Children are referred by the School Medical Officer from the routine school medical inspections, from minor ailment clinics, general practitioners and the General Hospital.

Treatment consists of graduated exercises, infra-red, ultra-violet light for a variety of complaints, anomalies and deformities e.g. postural disorders of the hips, knees, feet (i.e. pes planus with vulgas ankles, genu valgum etc.) scoliosis, lordosis, kyphosis and postural defects of the spine, asthma and similar complaints. The average number of patients seen per week is thirty.

Recuperative Holidays

We are indebted to the Cheltenham Rotary Club for generously providing a free fortnights holiday for Cheltenham schoolboys at Weston-super-Mare.

The Rotary Club has been providing these holidays since 1928, originally for 4 boys per month throughout the year, but this number has been reduced in recent years

because of the continuing increase in health and social conditions in the area with less demand and need for such holidays. Part of the Cheltenham allocation was transferred to a city club although school-boys selected by our school doctors and school nurses, continue to take advantage of this facility.

Child Guidance Clinic

The Child Guidance Clinic continues to provide a service for which there is no lessening of demand. The number of children for whom treatment is requested by parents, doctors and teachers, increases every year. Dr. P.R. Doherty with his staff of psychologists and psychiatric social workers are always working at capacity both at the clinic and in the schools, to cope with the waiting list. I am very grateful to him for his co-operation, and the effort he makes to see children as soon as possible.

Enuresis Clinic

The Enuresis Clinic continues to provide a most useful and much appreciated service for children subject to this distressing complaint. Many requests for the treatment of children are received from family doctors. Considerable success has been achieved and any children requiring further investigation are referred to Mr. P. Boreham, F.R.C.S., at the General Hospital with the approval of the family doctor.

A summary of the work carried out during the year is as follows:—

Clinics held	...	...	25
New cases seen	...	...	33
Consultations	...	...	87
Cases discharged	...	...	62
Cases still under treatment			25

The following table shows a breakdown of the "Cases Closed."

<i>Cured</i>	<i>Improved</i>	<i>No Improvement</i>	<i>Total</i>
32	10	20 *	62

* Includes five children who were unable to manage the alarm unit and seven who failed to keep appointments.

Employment of Children and Young Persons

During the year 100 examinations were carried out as to fitness for school children to be employed before or after school hours and the necessary certificate was granted in all such cases. The standard of fitness among Cheltenham school children is such that the refusal to issue a certificate of fitness is exceptional.

These children are kept under medical observation and there has never been any evidence that the part-time employment has been in any way detrimental to their physical or mental welfare.

All children leaving school are examined and advised in the light of their known medical histories as to any type of work for which they may have been found to be physically unsuitable and good liaison has been maintained with the Youth Employment Officer in this respect.

Handicapped Children

In accordance with the requirements of the Handicapped Pupils and Special Schools Regulations, 1959, 62 pupils have been examined or re-examined during 1971 for the purpose of ascertaining whether or not they are suffering from a disability of the mind or body, and if the disability is such as to fall within a category requiring special educational treatment as prescribed by the Regulations.

Of the pupils examined during 1971 the following recommendations were made:—

To attend Day Special School	...	...	...	52
To attend Residential School	...	...	...	10

The results of these examinations which were carried out by our medical staff who are specially qualified for the purpose, are where necessary, brought before the Special Services and General Purposes Sub-Committee with an appropriate recommendation. They also include the examination of school children referred to the Child Guidance Clinic with the recommendation of the Medical Director, as also children admitted to the Sandford School for Maladjusted Pupils who are selected by a panel including the Medical Director, the Education Officer, the Head Teacher, the Medical Officer of Health and an Educational Psychologist.

THE WORSHIPFUL THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE BOROUGH OF CHELTENHAM

Mr. Mayor, Ladies and Gentlemen,

I am pleased to present my report on the work of the Department and to extend my thanks to the Chairman and members of the Health and Housing Committee of the Council for their continued support during 1957. The statistics and other relevant information are set out in the following pages and, despite staff shortage, a total of 21,000 visits were made.

The demand for Improvement Grants, both Standard and Discretionary, greatly increased, 232 applications being received. The total grants paid amounted to £10,500 and the estimated cost of works planned in discretionary grants reached £100,000 during the year. These grants are in addition to the provision of additional accommodation by the Corporation. Improvements are also a proportion of the money to be spent on repairs in order to give the premises the necessary life.

SECTION IV

1,700 inspections were made of hotels, restaurants and other premises where food is prepared and sold, the general standard of hygiene being good. 11 complaints were received during the year with regard to foreign matter in food, and it was necessary to take proceedings on 11 occasions under the Food and Drug Act, 1954, in respect of these which included hair, flies, metal and glass. The County Inspector fines totalling £230 with costs amounting to £20.

ENVIRONMENTAL HEALTH

218 samples of food were analysed under the Food and Drug Act and submitted to the Public Analyst. 72 samples of pasteurised milk and 11 samples of cream were also taken for bacteriological and other tests. The Department is now responsible for the inspection of "containers," important meat, considerable consignments of which arrive from Ireland in addition to occasional containers of meat from France.

Report of Chief Public Health Inspector

An immense amount of work was necessary in connection with the hearing in the High Court of a case involving offensive odours emanating from the plant of a firm of lathe makers and their failure to comply with the Pollution Notice served under the Public Health Act, 1936. The Court accepted the undertaking given by the firm to discontinue the offensive odours and the case was dismissed. The Court accepted the undertaking given by the firm to discontinue the offensive odours and the case was dismissed. The Court accepted the undertaking given by the firm to discontinue the offensive odours and the case was dismissed.

There is considerable disagreement amongst Chemical Engineers as to the best methods of treating the evil-smelling emanations which arise from this type of industry and the setting up of a Working Party by the Department of the Environment to examine the problem is most welcome.

One of the duties of the Department is to investigate accidents under the Shops and Railway Premises Act. One of these dealt with the tragic death of a young Brewery employee, who received fatal injuries whilst delivering heavy barrels of beer to a local hotel. He attempted to manoeuvre a four-wheel barrel of beer whilst it was suspended on an inclined chute, when it slipped and trapped his head, inflicting

THE WORSHIPFUL THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE BOROUGH OF CHELTENHAM

Mr. Mayor, Ladies and Gentlemen,

I am pleased to present my report on the work of the Department and to extend my thanks to the Chairman and Members of the Health and Housing Committees of the Council for their continued support during 1971.

The statistics and other relevant information are set out in the following pages, and, despite staff shortages, a total of 21,980 visits were made.

The demand for Improvement Grants, both Standard and Discretionary, greatly increased, 237 applications being received. The total grants paid amounted to £76,556 and the estimated cost of works involved in discretionary grants reached £193,766 during the year. These grants materially assist in the provision of additional accommodation by the conversion of large Regency houses into flats, in addition to facilities that did not formerly exist. Improvement grants also allow a proportion of the money to be spent on repairs in order to give the premises the necessary life.

1,700 inspections were made of hotels, restaurants and other premises where food is prepared and sold, the general standard of hygiene being good. 77 complaints were received during the year with regard to foreign matter in food, and it was necessary to take proceedings on 11 occasions under the Food and Drugs Act, in respect of these which included hair, flies, metal and glass, the Courts imposing fines totalling £230 with costs amounting to £90.50.

218 samples of food were taken under the Food and Drugs Act and submitted to the Public Analyst. 72 samples of pasteurised milk and 11 samples of cream were also taken for bacteriological and other tests.

The Department are now responsible for the inspection of "container" imported meat, considerable consignments of which arrive from Ireland, in addition to occasional containers of meat from France.

An immense amount of work was necessary in connection with the hearing in the High Court of a case involving offensive odours emanating from the plant of a firm of fat renderers and their failure to comply with the Prohibition Notice served under the Public Health (Recurring Nuisances) Act, 1969. The case, which commenced at Bristol and finished at Exeter, lasted 13 days with the Judgement being given by Mr. Justice Brabin on the fourteenth day. The Court accepted an Undertaking, suspended until 1st November, 1972, by the Defendants, from causing by any manufacture or processes carried on by them and arising, from fat-rendering at their factory at Arle Avenue, Cheltenham, any effluvia which are a nuisance to the inhabitants of the neighbourhood, and it was further ordered that the Defendants pay costs. The firm did serve a Notice of Appeal on a point of law, in December, but this was subsequently withdrawn.

There is considerable disagreement amongst Chemical Engineers as to the best methods of treating the evil-smelling emanations which arise from this type of industry and the setting up of a Working Party by the Department of the Environment to examine the problem is most welcome.

One of the duties of the Department is to investigate accidents under the Offices, Shops and Railway Premises Act. One of these dealt with the tragic death of a young Brewery employee, who received fatal injuries whilst delivering heavy barrels of beer to a local hotel. He attempted to manoeuvre a 4cwt. barrel of beer whilst it was suspended on an inclined chute, when it slipped and trapped his head, inflicting

injuries which proved fatal. In an attempt to prevent similar accidents, letters have been written to all Breweries who deliver in the Borough drawing attention to the necessity for adequate training methods and safety procedures to be adopted, especially with new employees.

The question of 6-day trading in the central area of the town was strongly debated and resulted in a referendum being taken of 758 shops. Exemptions from the provisions of Section 1 of the Shops Act 1950 were then made by the Council in respect of 30 types of premises. This was followed by representations from the Bath Road shopping area where a further referendum was held, resulting in 19 trades being granted 6-day trading.

The throughput at the Public Abattoir increased by nearly 4,000 to 36,014 animals during 1971, which was primarily due to an increase in the number of pigs killed. The total amount of meat and offals condemned as unfit for human consumption fell to 13½ tons, compared with 19½ tons in 1970. 91 animals were slaughtered under the Tuberculosis Eradication Scheme, in addition to 36 cattle under the scheme for the eradication of Brucellosis. There were only 3 cases of *Cysticercus Bovis* during the year.

The Abattoir was originally built in 1892 and, whilst improvements continue to be carried out, it is doubtful whether an Export Licence would at present be granted.

The Thursday Franchise Market, which has 53 covered stalls, continues to be very popular. The total income received from tolls and rents during the financial year ending 31st March, 1971, was £6,902, resulting in a profit of £6,241.

The investigation of noise nuisances proved to be very time-consuming. Most of the complaints referred to unwanted sounds in the evening and at night, varying from compressors, pile driving, woodworking machines and launderettes. In the majority of cases a considerable improvement has been achieved by insulation and absorption. The existing background noise level has risen in many areas and it is to be hoped that adequate legislation will be made that will enable this to be reduced.

The pests section dealt with 707 complaints regarding wasps' nests and 718 concerning rats and mice, in addition to a variety of other pests.

The amount of returns and statistical data requested continues to increase, as do the requests for information under the Land Charges Act. It is interesting to note that, in 1970, 2,143 official searches were received, which increased during the year under review to 2,863.

Mr. Alan Hargreaves resigned in May to take up a post at Slough and, in September his place was filled by Mr. Geoffrey Allen from Derby.

I should like to sincerely thank my staff for their support and the contribution they have made to the work summarised in the following pages.

J.F. URSELL,
Chief Public Health Inspector.

CHIEF PUBLIC HEALTH INSPECTOR'S STAFF 1971

TECHNICAL

Deputy Chief Inspector (Specialising in Improvement Grants)	A.L. Jones, M.A.P.H.I., San. Science R.S.H. *+
Specialist Inspectors (Improvement Grants)	G.J.C. Buck, M.A.P.H.I., M.R.S.H. *+
(Food and Drugs)	A.H. Carling, M.A.P.H.I. *+
(Housing)	R.G. Webb, M.A.P.H.I., San. Science R.S.H. *+‡
(Housing)	G. Allen, M.A.P.H.I. (Appointed September) ø
(Offices, Shops and Railway Premises)	A. Taylor, M.A.P.H.I. *+
(General Duties)	A. Hargreaves, M.A.P.H.I., M.R.S.H., (Resigned May) ø
Pupil	R.D. Merrett

ABATTOIR

Meat Inspector/Superintendent	R. Hullah, M.Inst.M., M.A.P.H.I. *+
Deputy Superintendent	B.R. Fisher (Resigned) J.E. Phipps (Appointed January)
Assistant Superintendent	A. Edwards
Handyman	S.C. Wearing A.F. Hawtin

* Certified Meat and Food Inspector
+ Public Health Inspector's Certificate
‡ Smoke Inspector's Certificate
ø Public Health Inspector's Diploma

DISINFECTION AND DISINFESTATION

Assistant Disinfection Officer	J.W. Quarterman
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RODENT CONTROL

Pests Officer	B.G. Davies
Rodent Operator	R.T. Harvey

CLERICAL

Senior Clerk	M.A. Barlow
Secretary	Miss M.E.J. Edden
Clerical Assistant	Miss E.M. Oliver
Junior Clerk	Miss L. Taylor

SUMMARY OF VISITS 1971

TABLE I

1. Public Health

Water Supply	...	...	...	...	...	...	62
Drainage	...	...	...	...	...	...	832
Stables and Piggeries	...	...	...	...	...	...	—
Common Lodging House	...	...	...	...	...	...	24
Houses Let-in-Lodgings	...	...	...	...	...	...	—
Caravan Sites	...	...	...	...	...	...	14
Public Conveniences	...	...	...	...	...	...	9
Theatres	...	...	...	...	...	...	3
Refuse Collection	...	...	...	...	...	...	88
Smoke Observations	...	...	...	...	...	...	4
Clean Air Act	...	...	...	...	...	...	111
Marine Store Dealers	...	...	...	...	...	...	3
Rodent and Pest Control	...	...	...	...	...	...	71
Houses inspected under Public Health Act	...	...	...	...	...	...	529
Re-visits	...	...	...	...	...	...	304
Rag Flock Premises	...	...	...	...	...	...	—
Hairdressers' Shops	...	...	...	...	...	...	26
Enquiries following Infectious Disease	...	...	...	...	...	...	16
Miscellaneous Infectious Disease Visits	...	...	...	...	...	...	15
Interviews	...	...	...	...	...	...	1,482
Noise Nuisance	...	...	...	...	...	...	690
Miscellaneous Sanitary Visits	...	...	...	...	...	...	522
Waste Food Order	...	...	...	...	...	...	2
							<u>4,807</u>

TABLE II

2. Housing

Number of houses inspected under Housing Act	...	...	...	...	...	1,543
Re-visits	...	...	...	...	...	915
Overcrowding - Number of houses inspected	...	...	...	...	...	81
Re-visits	...	...	...	...	...	5
Verminous Dwellings inspected	...	...	...	...	...	—
Improvement Grants	...	...	...	...	...	3,901
Miscellaneous Housing Visits	...	...	...	...	...	118
						<u>6,563</u>

TABLE III

3. Food Hygiene

Abattoir (Additional visits by Inspectors)	...	...	...	...	102
Other premises - meat inspection	...	...	...	...	233
Butchers' Shops	...	...	...	...	426
Fishmongers and Poulterers	...	...	...	...	24
Grocers' Shops	...	...	...	...	320
Greengrocers and Fruiterers	.....	...	...	...	29
Licensed Premises	...	...	...	...	148
Dairies and Milk Shops	...	...	...	...	87

Ice Cream Premises	...	...	...	...	...	54
Confectioners	...	...	...	...	...	10
School Canteens	...	...	...	...	...	69
Food Preparing Premises	...	...	...	...	...	318
Restaurant and Hotel Kitchens	...	...	...	...	...	140
Market Stalls	...	...	...	...	...	27
Street Vendors and Food Delivery Vehicles	...	...	...	...	...	18
Food Inspection and Condemnation	...	...	...	...	...	209
Milk, Bacteriological Samples	...	...	...	...	...	25
Food and Drugs Samples	...	...	...	...	...	239
Offensive Trades	...	...	...	...	...	130
Fried Fish Shops	...	...	...	...	...	30
Bakehouses	...	...	...	...	...	61
Miscellaneous Visits in connection with Food	...	...	...	...	...	410
Removal of unsound food	...	...	...	...	...	278
Food Vending Machines	...	...	...	...	...	1
						<u>3,388</u>

TABLE IV

4. Offices, Shops and Factories

Factories	...	...	...	...	...	22
Outworkers	...	...	...	...	...	25
Offices and Shops	...	...	...	...	...	813
						<u>860</u>

TABLE V

5. Disinfection and Disinfestation

Disinfection:

Premises fumigated	...	...	...	...	...	5
Infectious articles disinfected	...	...	...	...	...	19
Other articles disinfected	...	...	...	...	...	47

Disinfestation:

Premises treated	...	...	...	...	...	25
Articles treated	...	...	...	...	...	42

Destruction of Mattresses, etc.:

Articles destroyed	...	...	...	...	...	8
Other visits	...	...	...	...	...	573
						<u>719</u>

TABLE VI

6. Rodent Control

Rats and Mice:

Number of visits for inspection	...	...	...	...	1,237
Number of visits for treatment	...	...	...	...	2,603

Other Pests:

Number of visits for inspection	...	...	...	...	272
Number of visits for treatment	...	...	...	...	1,328
					<u>5,440</u>

TABLE VII

7. Other Visits

Shops Act — Hours of Trading ...	...	...	...	131
Employment of Young Persons ...	...	...	...	1
Merchandise Marks Act ...	...	...	...	65
Pet Animals Act ...	...	...	...	5
Animal Boarding Establishments ...	...	...	...	1
				<u>203</u>

Total of Tables I, II, III, IV, V, VI and VII ... 21,980

NOTICES SERVED

	<i>Informal Notices</i>		<i>Formal Notices</i>	
	<i>Served</i>	<i>Complied</i>	<i>Served</i>	<i>Complied</i>
Public Health Act 1936	133	117	9	10
Housing Acts	2	2	—	1
Factories Act, 1961	1	1	—	—
	<u>136</u>	<u>120</u>	<u>9</u>	<u>11</u>

In addition, letters concerning offences and contraventions noted during inspections carried out under the following Acts and Regulations, were sent:—

Noise Abatement Act, 1960 ...	...	...	...	1
Food Hygiene (General) Regulations, 1960 ...	...	...	...	45
Offices, Shops and Railway Premises Act, 1963 ...	...	...	...	38
Shops Act, 1950 ...	...	...	...	1
Clean Air Act, 1956 ...	...	...	...	1
Prevention of Damage by Pests Act, 1949 ...	...	...	...	1

INFORMATION IN REGARD TO LAND CHARGES

Requests for information under the Land Charges Act were received and dealt with during the year in respect of 2,863 official searches.

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT 1961**PART I OF THE ACT****1. INSPECTIONS for purposes of provisions as to health (including inspections made by the Public Health Inspectors)**

Premises (1)	Number on Register (2)	Numbers of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2,3,4, and 6 are to be enforced by Local Authorities	28	1	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	379	18	1	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-worker's Premises)	13	3	—	—
Total	420	22	1	—

2. Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found				Number of cases in which Prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred to H.M. inspector (4)	Referred by H.M. Inspector (5)	
Want of cleanliness (s.1)	—	—	—	—	—
Overcrowding (s. 2)	—	—	—	—	—
Unreasonable Temperature (s.3)	—	—	—	—	—
Inadequate Ventilation (s.4)	—	—	—	—	—
Ineffective drainage of floors (s.6)	—	—	—	—	—
Sanitary Conveniences (s.7)	—	—	—	—	—
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	1	1	—	1	—
(c) Not separate sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
Total	1	1	—	1	—

PART VIII OF THE ACT
OUTWORK
(Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		
	No. of Outworkers in August list required by Section 133(1)(c) (2)	No. of cases of default in sending lists to the Council (3)	No. of Prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (Making etc.)	16	—	—	—	—	—

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Report for Cheltenham Borough for 1971 as submitted to H.M.
Inspector of Factories, Department of Employment.

The number of persons employed in offices amounted to 5,142, those in retail shops to 4,608, whilst wholesale departments accounted for 676, catering establishments open to the public 902, canteens 70 and fuel storage depots 12. This analysis totals 11,410 persons comprising 4,778 males and 6,632 females.

72 premises were newly registered during the year and the total number amounts to 1,230, which includes 498 offices, 592 retail shops, 56 wholesale shops, 83 catering establishments open to the public and 1 fuel storage depot.

A total of 813 visits was made to these premises during the year.

The primary complaints dealt with, apart from the investigation of accidents, were excessive or inadequate heating arrangements, poor ventilation and nuisance from noise. The Minister has power to make Regulations both in respect of acceptable noise level and the lifting of heavy loads by office staff but, so far, none have been issued.

Problems have been raised in connection with unusual mechanical equipment. One case involved the proposed installation of an electrically powered stacker in a wholesale merchant's warehouse, which was a hoist when the wheels were removed but, being portable, the Hoists and Lifts Regulations did not apply.

Visits have shown that there is a great reduction in the number of unguarded slicing machines.

26 accidents were notified during the year and, of these, 7 involved draymen, one of which proved fatal. On this occasion two draymen were delivering barrels of beer, weighing approximately 4 cwt., to a Hotel in the Borough. The first two barrels were delivered without any trouble, but the third barrel became twisted and jammed on the chute and the drayman in question who was in the cellar, came up via the pavement chute to release it. The barrel moved some 6" to 12" trapping the drayman by the head. He was released and taken to Hospital, but was found to be dead on arrival. From the evidence given at the Inquest, it appears that this drayman's inexperience was the main contributory factor.

The Breweries that deliver within the Borough have been asked to examine their training schemes in order to ensure that draymen are aware of the dangers that exist in handling heavy barrels so that they may take all necessary precautions.

Investigation of many of the accidents has shown that a contributing factor has been the demand for increased speed and productivity, occasionally at the expense of safety. The introduction of incentive bonus schemes can present temptation to employees which may change what is a safe procedure into a dangerous practice. It cannot be too strongly stressed that safety must be the overriding consideration in any job evaluation or work study scheme.

which were on the high side and this was undoubtedly coming from the piles of domestic coal being placed on the new storage piles close proximity to the roadway. The attention of the Depot was drawn to this pollution and additional sprays and dust suppression equipment were installed.

The average monthly deposit from the Tockbury Road gauge for 2 months of the year was 100 tons per sq. mile. Unusually during 40 million tons per sq. mile per day, compared with 5.1 tons per sq. mile per day on the rest of the Mainline.

NOISE ABATEMENT ACT 1960

Many complaints continue to be received regarding noise, the major factor being from the night shifts in factories regarding which no controls are

Registration and General Inspections

Class of Premises	No. of Premises newly registered during the year	Total number of registered premises at end of year	No. of registered premises receiving general inspection during the year
Offices	38	498	31
Retail Shops	29	592	35
Wholesale Shops, Warehouses	4	56	3
Catering establishments open to the public, canteens	1	83	78
Fuel Storage Depots	—	1	—
TOTALS	72	1,230	147

Number of visits of all kinds (including general inspections) to Registered Premises:
813

ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>Number of Persons Employed</i>
Offices	5,142
Retail Shops	4,608
Wholesale Departments, Warehouses	676
Catering Establishments open to the public	902
Canteens	70
Fuel Storage Depots	12
Total	11,410
Total Males	4,778
Total Females	6,632

Reported Accidents

Workplace	Number Reported		Total No. Investigated	Action Recommended			
	Fatal	Non-Fatal		Prosecution	Formal Warning	Informal Advice	No Action
Offices	—	6	5	—	—	1	5
Retail Shops	—	9	9	—	—	7	2
Wholesale Shops, Warehouses	—	—	—	—	—	—	—
Catering establishments open to the public, canteens	1	10	8	—	—	2	9
Fuel Storage Depots	—	—	—	—	—	—	—
TOTALS	1	25	22	—	—	10	16

**ATMOSPHERIC POLLUTION
CLEAN AIR ACTS 1956 and 1968**

A deposit gauge is sited on the roof of the Municipal Offices and is analysed each month by the Public Analyst, enabling a check to be kept on the atmospheric pollution in the centre of the town. It recorded an average of 25 milligrammes per sq. metre per day of undissolved deposit. Total deposit averaged 5.1 tons per sq. mile per month.

A smoke and SO₂ recorder is also sited at the Municipal Offices which indicates the degree of sulphur oxides in the air and also the amount of smoke and grit.

Deposit gauges are extremely useful to ascertain local pollution. When the Coal Concentration Depot was first established in Tewkesbury Road, a gauge was kept on a nearby roof for two years. This showed no greater air pollution than in other similar parts of the town, and it was, therefore, removed. However, following extensive stock piling during the summer, complaints were received from the residents of houses and flats in Tewkesbury Road fronting the Depot, of dust nuisance and the gauge was again placed in the same position in April this year. The Analyst reported a considerable amount of combustible matter in the deposits which were on the high side and this was undoubtedly coming from the piles of domestic coal being placed on the new storage area in closer proximity to the roadway. The attention of the Depot was drawn to this pollution and additional sprays and dust suppression equipment were installed.

The average monthly deposit from the Tewkesbury Road gauge for 9 months of the year was 6 tons per sq. mile (Undissolved deposit 40 milligrammes per sq. metre per day), compared with 5.1 tons recorded by the gauge on the roof of the Municipal Offices.

NOISE ABATEMENT ACT 1960

Many complaints continue to be received regarding noise, the causative factor varying from the night shifts in factories regarding which no complaints are

received during the day-time, to the noise made by road-breaking and pile driving equipment, in addition to domestic noises.

There is no doubt that noise, when defined as "unwanted sound" is on the increase and that the powers to deal with it are inadequate.

A map of the whole town is at present being compiled on which the background noise levels in various areas are being marked. It is hoped, not only to control this background noise, but to reverse the present upward trend.

There is no doubt that excessive noise is harmful, even if its harmful effects cannot be specifically defined.

Investigation of these complaints is very time-consuming, but I am pleased to report that in most cases a very considerable reduction in the noise level has been obtained. As an example of the type of complaints received during the year, I give below, in tabulated form, the cause and results of some which have been dealt with:—

<i>Cause of Noise</i>	<i>Action and Result</i>
Unloading of a railway train in the early hours of the morning.	Following discussion with British Railways and the Newspaper Wholesalers involved, the position at which the train stopped at the station was altered as were the methods of unloading, which has resulted in a quieter procedure.
Noise from a factory process using spraying and compressed air equipment and compressor.	Unsuccessful informal action followed by an Abatement Notice resulted in a slight improvement. However, the company ceased business before legal proceedings proved necessary.
Noise and vibration from building construction works — i.e. pile driving	Contractors arranged to carry out noisy operation at certain periods in the day. Silencers fitted.
Noise from woodworking machine	Machine moved away from party wall to site away from adjoining houses.
Steam-driven pump exhaust discharged in valley of corrugated roof making echoing sound	Exhaust diverted to discharge into covered condensation pit.
Noise and vibration from air compressor at factory adjoining houses	Extended silencer on air intake and absorbent lining to asbestos roof.

HOUSING ACT 1957

The following action under the above Act was taken during the year (figures for 1970 are given for comparative purposes):

	1970	1971
(a) Closing Orders (Basement Dwellings)	7	9
(b) Closing Orders (Parts of Houses, etc) ...	2	1
(c) Closing Orders Determined ...	14	21
(d) Demolition Orders ...	2	—
(e) Houses Closed ...	22	10
(f) Undertakings to render premises fit ...	3	1
(g) Undertakings cancelled ...	1	1

	1970	1971
(h) Undertakings not to use premises for human habitation ...	1	—
(i) Houses demolished	26	7
(j) Local Authority owned houses certified unfit ...	17	4

Action taken since the end of the War:

	No. of houses	No. of Persons Displaced
(a) Houses Closed	381	1,004
(b) Parts of buildings closed	459	1,162
(c) Houses closed in pursuance of an undertaking by the owner	73	241
(d) Houses demolished	531	1,202
(e) Houses made fit as a result of formal notices ...	413	—

NEW HOUSES

New houses completed in the Borough since June 1945:

	By the Council	By Private Enterprise
Up to 31st December, 1962	4,952	3,134
During 1963	31	313
" 1964	103	360
" 1965	157	356
" 1966	24	487
" 1967	163	338
" 1968	10	240
" 1969	82	249
" 1970	49	289
" 1971	102	298
	<u>5,673</u>	<u>6,064</u>

HOUSING ACTS 1957 - 1969

Improvement Grants

There has been a very considerable demand for Improvement Grants covering both Standard Grants for specific facilities such as hot water, bath, wash-hand basin and interior W.C., and Discretionary Grants for the building of small wings to provide a bathroom and, as is to be anticipated in a town of this type, the conversion of many large Regency houses into flats. Many of these latter houses also qualify for Regency Grants. The grants approved ranged from a Standard Grant of £9 for the provision of a hot water supply to a wash-hand basin, to £21,711 for the conversion of a large Regency house into flats.

One interesting application received was from the Governors of a Charity wishing to improve an Alms House. It was possible, with the approval of the

Ministry, to give assistance in respect of heating, the provision of an additional bathroom incorporating safety features for the elderly and individual sinks with hot and cold water supply.

The Council have ruled that bed-sitting rooms as such do not rank for grant and any application must be for a four-unit flat with all the necessary amenities.

During the year 237 applications for both Standard and Discretionary Grants were received, the total grants paid amounting to £76,556. The estimated total value of the work involved in discretionary improvements and conversions reached £193,766. The details are set out in the following table:—

Standard Grants

No. of applications	137
No. approved to full standard	69
No. approved to higher limit	38
Value of maximum grant approved	£21,837
Value of grants paid	£13,934

Improvement Grants — Discretionary

No. of applications	80
No. approved	64

Conversions

No. of applications	20(for 69 units)
No. approved	18(for 54 units)
Total value of approved works ranking for grant	£143,621
Total value of grant approved	£70,311
Total value of grant paid	£62,622

Housing Associations

2 applications were received and approved, from Housing Associations.

Summary

No. of houses brought to full standard (with all amenities) with	
Standard Grants ...	58
No. of houses brought to higher limit (bathroom added, with	
all amenities) with Standard Grants ...	24
No. of houses improved with Discretionary Grants ...	59
No. of conversions to provide self-contained units, with	
Discretionary Grants ..	42

The last two to three years has seen a tremendous increase in the cost of houses of all types. The result has been a marked reduction in Closing and Demolition Orders as such premises are reconditioned by means of Improvement Grants.

Qualification Certificates

A Qualification Certificate enables a controlled tenancy to be brought into the class of a regulated tenancy with the resultant amendment in the rent. The dwelling must have all the standard amenities for the exclusive use of the occupants and be in good repair having regard to its age, character and locality.

Under Part III of the Housing Act, 15 Qualification Certificates were issued for premises let on a controlled tenancy where, at the commencement of the Act, the qualifying conditions were satisfied.

6 Qualification Certificates were issued where dwellings lacked the standard amenities and requirements and Standard or Discretionary Grants were given to

bring them up to the required standard, providing all the necessary amenities.

14 Certificates of Provisional Approval were issued for dwellings where, when the works specified in the application are carried out with the aid of Grants, the dwellings will satisfy the conditions for the issue of a Qualification Certificate.

HOUSING ACT 1969 PART III QUALIFICATION CERTIFICATES

Section 44 (1)		Section 44 (2)
Qualification Certificates issued	Certificates of Provisional Approval issued	Qualification Certificates issued
15	14	6

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT 1960 MOVEABLE DWELLINGS

7 licensed caravan sites exist in the Borough, the number of spaces for caravans being 157.

COMMON LODGING HOUSE

The Common Lodging House continued to provide accommodation for 52 persons throughout the year. Regular inspections have been made and, apart from several minor items of maintenance, the premises have been found to be generally satisfactory.

An improvement in the standard has been achieved by the installation of a central heating system and new hot water system.

In the early part of the year the amount of refuse and waste furniture produced was creating a problem, but, with the co-operation of the Cleansing Department, a large paladin refuse receptacle was provided which is large enough to receive such items of refuse and, since the introduction of this new system, no further difficulties have been encountered.

The lodging house continues to provide a very valuable and essential service to the town.

PLANS

The Inspectors continue to examine plans submitted to the Council, enabling any matters relating to the Public Health Act, Shops Act, Food and Drugs Act, Factories Act, etc. to be checked and the applicants advised of any requirements before the plans are approved.

MERCHANDISE MARKS ACT 1926

This Act, which has been repealed by the Trade Descriptions Act 1968, was still enforceable until November, 1971. 65 visits were made under the Act up to this time.

FOOD AND DRUGS ACT 1955

Food Hygiene and Food Inspection

The Council are now responsible for the inspection of imported food which comes from abroad and the Irish Republic directly into the town. Considerable consignments of meat from Ireland arrive at three depots in the Borough and these have to be inspected together with occasional containers of meat from France.

1,716 inspections were made of hotels, restaurants, cafes and other premises where food is prepared and sold, and the general standard of hygiene was good. Several new restaurants were opened in the town and have been fitted out to a very high standard.

The public are fortunately becoming increasingly aware of the necessity for a good standard of hygiene. During the year 77 complaints were received with regard to foreign matter in food. It was necessary to take proceedings in 11 cases and, in every case, the Magistrate fined the offender together with the appropriate costs.

Food and Drug Sampling

One sample was adversely reported upon by the Public Analyst during the year:— Sample No. 293 - Game Soup

It was noticed that the ingredients on a packet of "Country Life Soup- Game" did not actually include any "game". The Public Analyst reported that the soup had a "game" or meaty flavour when made up, but contained no substance derived from game, i.e., hare, partridge, pheasant, etc. He felt the product was wrongly labelled and should be called "game flavoured". The manufacturers were anxious to comply with the requirements of Sections 2 and 6 of the Food and Drugs Act 1955, and, therefore, the production and marketing of this product was stopped.

Milk Sampling

72 samples of pasteurised milk and 11 samples of cream were submitted for bacteriological examination. 5 samples of milk failed the methylene blue test. 36 milk samples were also submitted for chemical analysis.

SAMPLES OF FOOD AND DRUGS SUBMITTED FOR ANALYSIS

In accordance with Ministry of Health requirements, the following samples were taken:—

Commodity	Formal	Informal	Commodity	Formal	Informal
Apple Jelly	—	1	Lemon & Lime		
Apricot Chutney	—	1	Crush	1	—
Arrowroot	—	1	Lemon Mayonnaise	—	1
Baked Beans	1	—	Lemon Tea Drink	—	1
Barbados Muscovado			Long Grain Rice	1	—
Sugar	1	—	Macaroni Cheese	1	—
Barley Wine	1	—	Mackerel	—	2
Beef Instant Flavour	—	1	Malted Milk	2	—
Beef & Onion Crisps	1	—	Margarine	—	1
Beef Sausages	2	—	Mayonnaise	1	—
Beef Spread	—	1	Meringues	1	—
Beer	3	—	Milk	36	—
Bigos	—	1	Milk Shake Mix	—	1
Bitter Lemon	—	1	Minced Beef Pies	1	—
Black Cherry Preserve	—	1	Mincemeat	1	—
Black Pudding	1	—	Mincemeat & Onions		
Blue Cheese Wafers	—	1	& Gravy	1	—
Bombay Duck	1	—	Mushrooms	—	1
Branda Cap	1	—	Mushroom Drink	—	1
Brandy	1	—	Nut Brittle	1	—
Breakfast Cereal	1	—	Octopus	—	1
Buttercream Shortcakes	1	—	Olive Oil	1	—
Buttermilk	—	1	Orange Barley Water	1	—
Butterscotch	—	1	Orange Drink	3	—
Cabanos	1	—	Orange Jelly		
Cake Filling	1	—	Biscuits	1	—
Caramel Desert	—	1	Orange Juice	—	1
Champagne Perry Chocs.	—	1	Orange Marmalade		
			with Liqueur	1	—

<i>Commodity</i>	<i>Formal</i>	<i>Informal</i>	<i>Commodity</i>	<i>Formal</i>	<i>Informal</i>
Cheese & Carraway Spread	—	1	Pate	—	1
Cheesesnack	—	1	Peppermint Cream	—	1
Cheese Spread	1	—	Chocolates	—	1
Chicken & Bacon Pie	1	—	Pilchards	—	1
Chicken & Veal Pie	1	—	Pineapple & Grape-fruit Drink	1	—
Chicken & Veal Spread	—	1	Plain Flour	1	1
Chipitos	1	—	Plum Pudding	1	—
Chocnut	—	1	Popscotch	1	—
Chocolate Flavoured Delight	—	1	Pork'n'Pepper Loaf	1	—
Chocolate Topping	—	1	Pork Pie	1	—
Chopped Ham	1	—	Pork Sausages	1	—
Chorley Cakes	1	—	Potato Puffs	1	—
Cider	1	—	Prawns	—	1
Cod Roe	—	1	Ratafia Flavouring	—	1
Coffee, Instant	2	—	Rice Cremola	1	—
Cooking Chocolate	1	—	Rum	1	—
Corned Beef Loaf	—	1	Rum Flavouring	—	2
Cornish Pasties	1	—	Salad Cream	1	—
Cornish Twists	1	—	Salad Supreme	—	1
Crab Meat	—	1	Seasoning	—	1
Cream of Chicken Soup	1	—	Salted Welsh Butter	1	—
Curry Sauce Mix	—	1	Salt Free Condiment	—	1
Custard Powder	3	—	Sardines	—	1
Demerara Sugar	1	—	Sauce Bearnaise	—	1
Dessicated Coconut	1	—	Sausages	2	—
Deville Ham Spread	—	1	Sausage Rolls	1	—
Dijon Mustard	—	1	Sausagemeat Stuffing	1	—
Double Cream Cheese	—	1	Scotch Eggs	1	—
Dried Milk	—	1	Semolina	1	—
Eccles Cakes	—	1	Shandy	1	—
Egg Squares	1	—	Sherbert Fountains	1	—
Faggotts	1	—	Shrimps	—	1
Figs	—	1	Smoked Pork Sausage	1	—
Fish Fingers	—	1	Sponge Mix	1	—
Fruit Jam	1	—	Sprats	—	1
Fruit Salad	1	—	Steak & Kidney Pudding	1	—
Fruit Slice	1	—	Steak & Mushroom Pie Filling	2	—
Genoa Fingers	1	—	Strawberry Candy	1	—
German Mustard	—	1	Strawberry Drink	—	1
Gin	1	—	Strawberry Jam	1	—
Ginger Ale	1	—	Strawberry Jelly	—	1
Ginger Cordial	1	—	Sweets	—	1
Ginger-Up	—	2	Swiss Roll	1	—
Goose Pate	—	1	Tongue Roll with Turkey	1	—
Gravy Salt	1	1	Tuna	—	2
Honey	2	—	U.H.T. Dairy Cream	—	1
Imitation Cream	—	1	Vanilla Wafers	1	—
Instant Whisk	—	1			
Jam Doughnuts	1	—			

Commodity	Formal	Informal	Commodity	Formal	Informal
Japanese Rice			Vegetable Salad	1	—
Crackers	—	1	Vegetable Soup	2	—
Junket Tablets	—	1	Viennese Coffee	—	1
Kidney Soup	1	—	Vodka	1	—
Lager	1	—	Walnuts, Pickled	1	—
Lager & Lime	1	—	Whisky	1	—
Lemon Cheese	—	1	Wine Vinegar	1	1
Lemon Drink	1	—	Yeast	—	2
Lemon Juice	1	—			

Number of Samples taken during 1971:

Formal	144
Informal	74
Total	218

FOREIGN MATTER AND MOULD IN FOOD

During the year 77 complaints were received with regard to foreign matter or mould in food, 23 of which were reported to the Health and Welfare Committee and the following action taken:—

<i>Sample No.</i>	<i>Description</i>	<i>Action Taken</i>
267	Chocolate Flake containing washer	Warning letter sent to manufacturer
268	Chocolate Bars in rancid condition	Warning letter sent to vendor
269	Blackcurrant Crumble containing maggots	Warning letter to manufacturer
292	Butter containing piece of paper	Warning letter to manufacturer
293	Game Soup — ingredients did not include "game"	Warning letter sent to manufacturer
309	Chicken Spread containing feather	No action
314	Cheese Roll with hair adhering	Proceedings: Catering Company fined £25 plus £10 costs.
335	Chocolate Bar containing piece of wood	Proceedings: Manufacturers fined £25 plus £10 costs.
403	Fly in Macaroon Cake	Proceedings awaited
431	Sliced Loaf containing fly	Proceedings: Manufacturers fined £15 plus £5 costs
453	Dirty Milk Bottle	Proceedings: Dairy fined £20 plus £10 costs
459	Chocolate Cake containing wasp	Warning letter to Baker
460	Steak Pie containing a fly	Warning letter to manufacturer
463	Loaf containing piece of metal	Proceedings: Manufacturer fined £15 plus £10 costs
488	Beef Patty containing matchstick	Warning letter to manufacturer
489	Milk Bottle containing glass	Proceedings: Dairy fined £20 plus £10 costs
495	Buttered Roll with hair adhering	Proceedings: Catering Company fined £20 plus £10 costs.
520	Fruit Pie affected with mould	Warning letter sent to vendor
512	Cream Bun containing wire	Warning letter to Baker
526	Bottle of Milk containing pieces of glass	Proceedings: Dairy fined £25 plus £10.50 costs
524	Sausage containing foreign body	Warning letter to Butcher
536	Iced Cake containing a matchstick	Proceedings: Baker fined £15 plus £5 costs
552	Cornish Pasty containing a nail	Proceedings: Manufacturer fined £50 plus £10 costs

There are 700 premises in the Borough which are subject to the Food Hygiene (General) Regulations 1960, as follows:—

	Food Preparation Premises	Public Houses	Butchers	Bakers	Fish Fryers	Other Food Shops
No. of Premises	286	98	48	13	17	238
No. of Premises fitted to comply with Reg.16	286	98	48	13	17	211
No. of Premises to which Reg.19 applies	286	98	48	13	17	216
No. of Premises fitted to comply with Reg.19	286	98	48	13	17	216

**PARTICULARS OF FOODSTUFFS EXAMINED AND REJECTED
AS UNFIT FOR HUMAN CONSUMPTION**

Tinned Foods	Tins	Tons	Cwts	Qrs.	Lbs.
Meat ...	502	—	8	2	11
Fish ...	414	—	2	0	4
Vegetables ...	2,908	—	18	2	11
Milk and Cream	19	—	—	—	11
Fruit ...	3,179	1	9	1	26
Soup ...	103	—	—	3	21
Jam ...	63	—	—	3	13
Fruit Juice ...	148	—	1	2	10
Milk Puddings	106	—	—	3	21
Miscellaneous	—	—	—	—	—
	7,442	3	3	0	16
General					
Meat ...	...	2	8	1	19
Bacon ...	...	—	—	—	17
Fish ...	...	—	3	3	14
Poultry ...	...	—	11	0	11
Frozen Foods	...	1	7	1	14
Fresh Fruit and Vegetables	...	—	—	—	25
Flour and Cereals ...	...	1	0	0	19
Dried Fruit ...	...	—	1	2	17
Butter, Cooking Fat ...	...	—	—	3	4
Cooked Meat and Sausages	...	—	1	2	24
Pastry, Suet, Batter ...	...	—	1	3	0
Miscellaneous ...	...	—	—	1	24
Total		5	17	2	20
Grand Total		9	0	3	8

TOYS (SAFETY) REGULATIONS 1967

Two samples were taken under the above Regulations and submitted to the Public Analyst with a view to checking the lead content. He reported as follows:—

Sample No. 449 — Chicken Feeding Table

The plastic parts were free from cellulose nitrate. The green paint was free from lead, the white paint contained 3500 p.p.m. lead and the mixed paints in the chickens contained 2970 p.p.m. lead. The paints were thus below the permissible limit of 5000 p.p.m. and the sample is genuine.

Sample No. 450 — Rattle

This showed no lead at all and was hence genuine.

SHOPS ACT 1950 and 1965

The controversy over the question of 6-day trading in the central area of the town resulted in a referendum being taken of the traders concerned and exemptions were made by the Council in respect of 30 types of stores and trades.

Interest was shown in this type of exemption by traders in the Bath Road shopping area and, with the experience gained in the discussions over the central area, a referendum was held which resulted in 19 trades being exempted from the early closing provisions in this part of the town.

The question of Sunday trading has not recurred during the year following the prosecutions taken in 1970.

Many enquiries were received from shop employees in connection with the provisions of the Act relating to the conditions under which they work.

OFFENSIVE TRADE

The hearing of the case against a firm of fat renderers for failure to comply with a Prohibition Notice served under the Public Health (Recurring Nuisances) Act 1969 commenced on 20th October, 1971, at Bristol Assize Court before Mr. Justice Brabin. The Corporation were represented by Mr. Anthony Cripps, Q.C., and Mr. Alan Fletcher, and the Defendants by Mr. Peter Fallon, Q.C.

The case was adjourned after eight days from Bristol to Exeter Assize Court, where the trial continued for a further five days before judgement was given on the fourteenth day.

Evidence was given by six residents and by three people working in the area affected by the smell, together with evidence by the Chief Public Health Inspector, the District Inspector and by Mr. F.A. Jackman, O.B.E., B.Sc., F.R.I.C., Consultant Chemical Engineer. The Defendants called the Managing Director of the Firm, their Consultant Chemist, Mr. K. Sharples, F.R.I.C. and Mr. C.S. Howes of Waterfall and O'Brien, Consultant Analysts.

Judgement and costs were given in favour of the Corporation, the Defendants, by their Counsel, undertaking from causing by any manufacture or processes carried on by them and arising from fat-rendering at their factory at Arle Avenue, Cheltenham, any effluvia which are a nuisance to the inhabitants of the neighbourhood. This undertaking was suspended until 1st November, 1972. The Defendants reserved the right to appeal on a point of law, namely that a defence of "best practicable means" was available to them in a High Court action.

The Public Health (Recurring Nuisances) Act 1969, has proved to be of great value in dealing with a nuisance of this type and the Judgement which Cheltenham has obtained will undoubtedly be of assistance to other authorities faced with similar

problems. The best methods for treating the odours which arise from this type of industry are not agreed by the experts and, for this reason, the setting up of a working party by the Department of Environment to examine the problem of unpleasant odours emitted by offensive and similar trades and to make recommendations about the best practicable means for their minimisation and suppression, is welcomed. It is to be hoped that the Working Party will be able to set in motion a research programme, the results and recommendations of which will be communicated as soon as possible to Local Authorities.

Pollution of the environment is gradually being taken more seriously, not only by members of the public, who are not prepared to tolerate conditions which a generation or two ago would perhaps have been accepted as part of everyday life but also by the Government, who are now making available the resources and setting up the machinery for improving our environment. The interest and momentum which has been generated must not be allowed to slacken.

PUBLIC ABATTOIR

The total number of animals slaughtered during 1971 has shown an increase for the fourth consecutive year, although the emphasis has shifted with fewer beef animals and more pigs being killed. (32,106 in 1970 to 36,014 in 1971 - a rise of 12.2%)

It is worth noting that the amount of meat and offals found, on inspection, to be unfit for human consumption has again fallen from an estimated 23½ tons in 1969, to 19½ tons in 1970 and 13½ tons in the year under review. This factor is due in part to better farm husbandry and also to the fact that animals are being slaughtered younger than in past years.

The result of this gradual change is that an increasing proportion of effort on the part of the inspectorate can now be placed on meat hygiene to improve handling and, subsequently, the keeping quality of both meat and meat products. It is felt that the quantity of unfit offals could be still further drastically reduced if greater effort was made to avoid parasitic infestations of farm animals as this factor, rather than infection of a pathogenic nature, is responsible for a very high proportion of the offals - particularly livers - being found unfit.

With the probable entry of this country into the European Economic Community, it is likely that the wholesale meat industry will wish to take advantage of the sizeable difference in meat prices which exists at present, although probably only for a short time, between Britain and other member countries. To do so, however, would require export licences for premises used, involving compliance with E.E.C. Council directives covering intra-community trade. Whilst it cannot be foreseen whether or not the Companies using the Public Abattoir will wish to participate in this trade, some points of difference between existing English regulations and E.E.C. Council directives, would require structural changes, and, therefore, expenditure before a licence to export could be obtained. It is possible of course, that the existing regulations covering slaughterhouse operations would, in due course, be amended rather than operate a double standard - one for the home market and a different one for export only. In either case this is a matter of policy the Council may be asked to consider in the near future.

A total of 91 animals were slaughtered during 1971 as part of the Tuberculosis Eradication Scheme. 59.3% of these were found, on inspection, to be infected with localized tubercular lesions. A further 36 cattle were also dealt with as part of a similar scheme for the eradication of Brucellosis.

Only 3 cases of *Cysticercus Bovis* were evident during the year and the affected carcasses were released after satisfactory refrigeration.

CARCASSES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART AT CHELTENHAM PUBLIC ABATTOIR

Annual Summary ending 31st December, 1971

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed	4,491	183	59	14,948	16,333	36,014
Number inspected	4,491	183	59	14,948	16,333	36,014
No. of T.T. Reactors (see separate table)	17	69	5	—	—	91
Totals excluding TT Reactors	4,474	114	54	14,948	16,333	35,923
All diseases except Tuberculosis and <i>Cysticercus Bovis</i> Whole carcasses condemned	1	4	3	12	52	72
Carcasses of which some part or organ was condemned	942	81	3	474	1,782	3,282
% of the no. inspected affected with disease other than tuberculosis and <i>cysticercus bovis</i>	21.1	74.5	11.1	3.3	11.2	9.4
Tuberculosis only Whole carcasses condemned	—	—	—	—	—	—
Carcasses of which some part or organ was condemned	—	2	—	—	54	56
% of the no. inspected affected with tuberculosis	—	1.8	—	—	0.3	0.2
<i>Cysticercosis</i> Carcasses of which some part or organ was condemned	3	—	—	—	—	3
Carcasses submitted to treatment by refrigeration	3	—	—	—	—	3
Generalised and totally condemned	—	—	—	—	—	—

There were 3 cases of *Cysticercus Bovis* during the year, the overall rate of infestation being .06%.

**ANIMALS SLAUGHTERED UNDER THE BOVINE TUBERCULOSIS
ERADICATION SCHEME DURING THE YEAR 1971 AT
THE CHELTENHAM PUBLIC ABATTOIR**

	Cows	Bulls	Steers	Heifers	Calves	Total
Total No. of "TT Reactors"	69	—	5	12	5	91
No. of carcasses totally rejected (Generalised Tuberculosis)	—	—	—	—	—	—
No. found to have localised lesions only	38	—	5	7	4	54
% infected with tuberculosis	55	—	100	58	80	59.3%

CARCASSES REJECTED AS TOTALLY UNFIT FOR HUMAN FOOD 1971

	Bulls	Cows	Heifers	Steers	Calves	Sheep	Pigs	Total
Actinobacillosis, generalised, actinomycosis, generalised	—	—	—	—	—	—	—	—
Anaemia, advanced	—	—	—	—	—	—	—	—
Abscesses, Multiple	—	—	—	—	—	1	6	7
Blackleg	—	—	—	—	—	—	—	—
Bruising, extensive and severe	—	—	—	—	—	—	2	2
Cysticercus bovis, generalised	—	—	—	—	—	—	—	—
Cysticercus cellulosae	—	—	—	—	—	—	—	—
Cysticercus ovis, generalised	—	—	—	—	—	—	—	—
Decomposition, generalised	—	—	—	—	—	—	—	—
Emaciation, pathological	—	—	—	—	—	2	7	9
Fever (including salmonellosis)	—	—	—	—	—	1	5	6
Moribund	—	—	—	—	—	2	1	3
Jaundice	—	—	—	1	—	—	1	2
Metritis, acute septic	—	—	—	—	—	—	—	—
Oedema, generalised	—	4	—	—	1	2	—	7
Pericarditis, acute septic	—	—	—	—	—	—	—	—
Peritonitis, acute, diffuse, septic	—	—	—	—	—	—	4	4
Pleurisy, acute, diffuse, septic	—	—	—	—	—	—	—	—
Pneumonia, acute, septic	—	—	—	—	—	—	1	1
Pyæmia, including joint-ill	—	—	—	—	—	—	5	5
Septicaemia or toxaemia	—	—	—	—	2	3	16	21
Swine erysipelas, acute	—	—	—	—	—	—	2	2
Tuberculosis, generalised	—	—	—	—	—	—	—	—
Tuberculosis, congenital	—	—	—	—	—	—	—	—
Tumours								
(a) Malignant with secondary growths	—	—	—	—	—	—	1	1
(b) Multiple	—	—	—	—	—	—	—	—
Uraemia	—	—	—	—	—	1	1	2

TOTAL WEIGHT OF MEAT AND ORGANS REJECTED 1971

	Tons	Cwts	Qrs.	Lbs.	Tons.	Cwts	Qrs.	Lbs.
Bovine								
Meat in Carcass	1	2	2	26				
Meat not in Carcass	1	4	0	5				
Organs and Viscera	4	5	2	22				
TOTAL	6	12	1	25	6	12	1	25
Ovine								
Meat in Carcass	—	4	1	18				
Meat not in Carcass	—	—	—	18				
Organs and Viscera	—	10	2	12				
TOTAL	—	15	0	20	—	15	0	20
Swine								
Meat in Carcass	2	7	2	19				
Meat not in Carcass	1	3	0	13				
Organs and Viscera	2	12	2	17				
TOTAL	6	3	1	21	6	3	1	21
TOTAL CARCASS MEAT	3	14	3	7				
TOTAL ORGANS AND VISCERA	9	16	1	3				
TOTAL	13	11	0	10	13	11	0	10

RODENT CONTROL

Wasps

707 complaints were received by the Department during the year, resulting in over 600 wasps' nests being treated.

These high figures were probably caused by the very mild winter of 1970/71, which enabled the young queen wasps to survive.

Mice

A number of treatments have been carried out against mice using alpha-chloralose which is proving very effective. The number of complaints received regarding rats and mice increased by 120 over the previous year.

Rabbits

Rabbits have been causing concern, especially on allotment sites where they are consuming the produce. It has been found on occasions that these pests emanate from railway embankments and the co-operation of the railway authorities has had to be sought to eradicate them.

PREVENTION OF DAMAGE BY PESTS ACT 1949
PART I — RATS AND MICE

	<i>Rats</i>	<i>Mice</i>	<i>Total</i>
1. Complaints Received	337	381	718
2. Number of Properties Inspected:			
(a) Following notification:			
Private Dwellings			503
Business Premises			204
Local Authority Properties			32
			739
(b) For reasons other than notifications:			
Private Dwellings			90
Business Premises			41
Local Authority Properties			92
			223
3. Number of Premises found to be infested:			
	<i>Rats</i>	<i>Mice</i>	
Private Dwellings	226	218	444
Business Premises	61	117	178
Local Authority Premises	23	20	43
			665
4. Number of Visits Paid:			
(a) For Inspection	644	593	1,237
(b) For Treatment	1,142	1,461	2,603
			3,840
5. Sewer Maintenance Treatments:			
Total number of manholes in Borough			2,048
Maintenance Treatment No. 49 (May, 1971):			
Number of sewer manholes baited with poison			246
Number of sewer manholes where poison bait taken			33
			10.3%
Maintenance Treatment No. 50 (November, 1971):			
Number of sewer manholes baited with poison			266
Number of sewer manholes where poison bait taken			37
			13.9%

PART II — OTHER PESTS

1. Complaints Received	<i>Ants</i>	<i>Beetles</i>	<i>Moles</i>	<i>Pigeons</i>	<i>Wasps</i>	<i>Foxes</i>	<i>Insects</i>	<i>Total</i>
	<i>Flies</i>		<i>Rabbits</i>		<i>Bees</i>		<i>etc.</i>	
	46	36	14	32	707	1	12	848
2. Number of Visits Paid:								
Inspection	34	23	18	80	105	1	11	272
Treatment	18	36	18	567	686	—	3	1,328

PREVENTION OF DAMAGE BY PESTS ACT 1949 PART I - RATS AND MICE

	Rats	Mice		Total
1. Complaints Received	337	381		718
2. Number of Premises Inspected:				
(a) Following up Complaints:				
Private Dwellings			503	
Business Premises			204	
Local Authority Properties			32	739
(b) For reasons other than notifications:				
Private Dwellings			50	
Business Premises			41	
Local Authority Properties			92	223
3. Number of Premises found to be infested:				
	Rats	Mice		
Private Dwellings	226	218	444	
Business Premises	51	117	178	
Local Authority Premises	23	20	43	665
4. Number of Vats Filled:				
(a) For inspection	844	683	1,237	
(b) For treatment	1,142	1,481	2,603	3,840
5. Some Information Treatment:				
Total number of manholes in Borough				3,048
Maintenance Treatment No. 43 (May, 1971):				
Number of sewer manholes baited with poison			246	
Number of sewer manholes where poison bait taken			33	10.3%
Maintenance Treatment No. 59 (November, 1971):				
Number of sewer manholes baited with poison			266	
Number of sewer manholes where poison bait taken			37	13.5%

PART II - OTHER PESTS

1. Complaints Received							
	Ants	Beetles	Flies	Wasp	Wasps	Bees	Total
	45	30	14	33	707	4	843
2. Number of Vats Filled:							
Inspection	34	23	12	60	106	1	272
Treatment	12	36	12	567	636	-	1,370

