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# Health and Welfare Services

CORNWALL 1969



### CORNWALL COUNTY COUNCIL

### ANNUAL REPORT

OF THE

### COUNTY MEDICAL OFFICER OF HEALTH 1969

H. BINYSH, M.D., B.S., D.P.H., D.T.M.&H., Barrister at Law

CORNWALE COUNTY COUNCIL

## ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH 1969

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### HEALTH COMMITTEE

(as constituted at 31st December, 1969)

### Chairman:

### MRS. KATHLEEN DALE

### Vice-Chairman:

R. F. SMITH

### Members:

A. ANDREW

H. BRAY

S. J. L. CHUBB

S. CLYMA

Dr. D. G. W. CLYNE

J. J. DANIEL

Mrs. L. GARSTIN, M.B.E.

W. F. GLUYAS

F. L. HARRIS, O.B.E.

Mrs. J. M. HART

A. D. R. HENDY

D. B. E. HOCKING

R. J. JULYAN

D. L. LANG

P. G. LOBB

R. C. MATTHEWS

J. C. PENBERTHY

L. RODDA

M. R. SCOTT

J. M. TAMBLYN

Mrs. E. V. TOWNSEND

Mrs. D. E. TREFFRY

H. C. WILLIAMS

Mrs. M. F. WILLIAMS, O.B.E.

Mrs. D. M. WILLS

### Co-opted Members:

Dr. D. HOOKER

Dr. W. L. STEWART

Dr. E. B. HUGHES

British Red Cross Society

St. John Ambulance Brigade

Local Medical Committee

### Ex-Officio:

The Chairman of the County Council
The Vice-Chairman of the County Council
The Chairman of the Finance Committee

The work of the Health Committee is largely done through the following Sub-Committees:

Ambulance Sub-Committee

Estate Management Sub-Committee

General Sub-Committee

Maternity and Child Welfare Sub-Committee

Welfare Sub-Committee

To the Chairman and Members of the Cornwall County Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report on the health of the County of Cornwall in 1969.

The main virtue of a report such as this is the opportunity which it presents to survey briefly the achievements of the past year, to assess how closely the realities matched the targets and to attempt in some measure to assess future trends.

In retrospect, this has been a year of happy achievement for all the classical statistical indicators moved in the right direction — the birth rate rose — the death rate fell — the infant mortality rate remained below the national rate for England and Wales and best of all the perinatal mortality rate also fell to an all time low. This perinatal mortality rate (a rate combining stillbirth rate and deaths in the first week of life) is a sensitive indicator of the quality of care given to the expectant mother antenatally and at delivery and it is therefore most pleasing to record that the rate is now below the national figure for the first time in ten years. A great deal of effort has been made to improve conditions generally in the County and a large factor in these improved results relates to the hospital facilities at the Royal Cornwall Hospital Treliske — both the Princess Alexandra Maternity wing and the work of the Special Care Baby Unit.

Deaths from Tuberculosis again fell to a new low level so that infectious disease has apparently ceased to be of significance in this age. However, at the time of writing there are reports of a resurgence of Cholera (El Tor variety) in the Middle East, so that the importance of these diseases can never be entirely dismissed.

The number of reported cases of human brucellosis rose somewhat this year, possibly because of better hospital notification arrangements, but the number of animals found to be infected was reduced, in spite of an intensified milk sampling campaign. The brucellosis eradication scheme, together with the closer control of producer retailers has begun to bring this disease under control, so that at last veterinary surgeons and farmers can look forward to an end of this menace to their health. Thanks are due to the Sampling Officers of the Weights and Measures Department, who undertake a great deal of the work of milk sampling at the farms.

An unhappier statistic is the continuing rise in the number of illegitimate births which this year reached a total of 424 (394 in 1968). Towards the end of the year, the County Council Mother and Baby Home at St. Austell was opened and now provides excellent purpose built accommodation, well sited and in close relation to the Penrice Maternity Hospital. A Home such as this affords girls the

opportunity to consider the future for themselves and their infants in a calm sympathetic environment, where they are able to make sensible long term decisions. On the opening of Rosewood House, the West Penwith Girls' Association closed the existing Home at Penzance, but it is hoped that this may re-open in the future to provide long stay accommodation in flatlets for a number of unsupported mothers.

Another County project which really got under way in 1969 was the Industrial Therapy Unit at Drump Road, Redruth, and its associated hostel. These units were first opened at the end of 1968 and during the year fulfilled the highest expectations. The building complex included a new adult training centre which has done excellent work in training the mentally retarded and has made possible a withdrawal of adults from the Curnow School. In turn, the additional space available at the Curnow School has made it possible to improve the standard of teaching of these handicapped children by provision of domestic science and craft rooms and has allowed the commencement of special care classes for children with mixed physical and mental handicaps. The Industrial Therapy Unit has accommodated young people with a wide range of disabilities and its training in a variety of trades has restored to the trainees self-confidence and an ability to face the world, so that a surprising number of trainees have been able to find outside competitive employment. The hostel has proved a boon to those who required a stable background from which to go to work at the Unit or work in local employment before they were fully fit to tackle their problems. These Units have been greatly admired by many visitors and point the way to the future of the mental health service both locally and more widely.

The physically handicapped, too, have not been forgotten for the Cornwall Association for the Care of the Disabled has with the financial help of the Department of Employment and Productivity and the County Council, provided an excellent new workshop in the grounds of the City Hospital, Truro — giving opportunities for employment for many more physically disabled.

Another landmark in the development of the County Services is the figure of over 2,000 persons registered with the County Chiropody Scheme at the end of the year. Indeed, with the help of the voluntary organisations, a total of 3,590 people were treated during the year, receiving some 16,000 treatments, a figure some 2,000 greater than in 1968.

The number of ladies who came forward seeking examination under the cervical cytology scheme, however, was rather less than expected. In some part difficulties during the year relating to availability of laboratory facilities have stopped full operation of the scheme, but it remains a tragic fact that only about one quarter of those who could benefit from these examinations are seeking the reassurance that a clear result brings for themselves and their families. It is difficult to be sure as to the reason for this reluctance, perhaps it stems from fear of

the unknown, perhaps fear of knowing that something requires treatment, perhaps bashfulness at the thought of an examination, perhaps family commitments or even simple lack of knowledge of the facilities available.

Lack of knowledge of the simplest rules of health is surprisingly widespread, and a reluctance to use the knowledge even when imparted is even more common. Accordingly, it is clear there is virtually unlimited scope for the activities of the health educators and the report mentions some of the training which they have undertaken among the County Staff and the public, and the displays arranged, including that at the County Show. With the ever changing picture of health needs and availability of new services, health education will assume a growing importance.

Once again the Ambulance Service has had a busy year — it is extraordinary but true that the emergency service now carries in its quietest months the same number of emergencies as in the peak periods ten years ago. The work of the service is still growing and it is greatly indebted to the Hospital Car Service, who undertake much of the routine non-urgent transport of patients to Hospital Out-Patient Departments.

During the year, national arrangements were laid down for training of ambulance personnel — some of our drivers have been sent to six week out-County Courses and our own series of fortnightly in service courses have been continued. The value of the training is beyond doubt and has been reflected in the substantially improved level of first aid and emergency skills which are now evident in the service. The fleet of ambulance vehicles has been strengthened by purchase of a number of larger six cylinder vehicles which have proved their value in providing more comfortable riding conditions for the patients, particularly over the longer journeys.

Each year appears to be one of doubt and uncertainty at the time and 1969 was no exception in this respect. The long debate regarding the future of the health service continued; the one theme which received general approval was that of "unification" but the manner by which this ideal was to be reached generated much debate, the end of which is still not in sight. There was equal controversy regarding the Seebohm report and the future organisation of the social services. This has now been resolved (in 1970) by the passage of the Social Services Act and the future pattern of services has now become clear.

The basic fact which confronts the health services and social services is that of the enormous range of tasks which need to be tackled both of illness and in satisfaction of social needs. Staff, buildings and finance cannot, at present, or in the foreseeable future satisfy all the demands and accordingly a system of closely reasoned priorities must be established. Within the health services, it has already been argued that it is far more economical and humane to treat patients at home wherever possible than to concentrate medical treatment in large and ever more expensive hospitals. Similar considerations apply to the care of the old and

the handicapped by the social services and the two services are indissolubly linked over the body of the patient, who may need simultaneously, or in turn, doctor, nurse, social worker, home help; followed by ambulance, hospital bed, physiotherapist, old persons' home, occupational therapist, etc. The need for linkage of these services is obvious and it would be nothing less than tragedy if the present well integrated arrangements in Cornwall for patients needing medical nursing and social care were to suffer as a result of this latest scheme. The projected reorganisation may well help to improve liaison within the various branches of the social services but this must not prejudice continued co-operation with the National Health Service. Reorganisation should provide a springboard for both health and social services but in the long term advances must depend on adequate finance to provide facilities to meet the growing needs.

Once again I must record my thanks which are owed to the Chairman and Members of the Health Committee for their courtesy and kindness when considering new schemes to benefit the health of the County and their eagerness to pursue every possible improvement. It is also appropriate to record the great assistance given to the health department by many voluntary bodies and other departments of the County Council.

Finally, it is my continuing pleasure to accord my sincere and grateful thanks to all the members of the Health Department for their loyal and diligent work over the year. This report can only hope to give the briefest summary of the many ways in which the professional, technical, administrative and clerical staff all continue their efforts for "One and All".

I am, Your obedient Servant,

> H. BINYSH, County Medical Officer.

County Hall, Truro.

September, 1970

### CORNWALL COUNTY COUNCIL

### REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH FOR THE YEAR 1969

### PUBLIC HEALTH OFFICERS:

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

H. BINYSH, M.D., B.S., D.P.H., D.T.M. & H., Barrister at Law

### Deputy County Medical Officer and Deputy Principal School Medical Officer:

G.W. WARD, M.B., Ch.B., D.P.H.

### Health Area Medical Officers:

Area 1 (Penzance)
D.L. JOHNSON, M.R.C.S., L.R.C.P., D.P.H.

Area 2 (Camborne) J.A.W. REID, M.B., Ch.B., D.P.H.

Area 3 (Truro) C.W.J. HINGSTON, M.R.C.S., L.R.C.P., D.P.H., D.T.M. & H.

Area 4 (St. Austell)
J. McGOVERN, M.B., B.Ch., D.P.H.

Area 5 (Wadebridge)

\* J. REED, M.B., Ch.B., B.Sc., D.P.H.

Area 6 (Launceston)

\* W. PATERSON, M.B., Ch.B., D.P.H.

Area 7 (Liskeard) P.J. FOX, M.B., B.Ch., D.P.H.

\* Also School Medical Officer

### Senior School Medical Officer:

E.P. JAMES, M.R.C.S., L.R.C.P., D.Obst.R.C.O.G.

### School Medical Officers:

MARGOT M. COOK, M.D., D.T.M. & H. W. JACKSON, M.B., B.Ch. MAIR L. JENKINS, B.Sc., M.B., Ch.B. JEAN D. McMILLAN, B.M., B.Ch., D.P.H. M.D.H. MYHILL, B.M., B.Ch., D.P.H. J.S.R.R. OLD, M.B., Ch.B.

### School Medical Officers (continued):

- \* W. PATERSON, M.B., Ch.B., D.P.H.
- \* J. REED, M.B., Ch.B., B.Sc., D.P.H. F.H.N. SMITH, M.B., Ch.B., D.Obst.R.C.O.G. (comm. 3.2.69) P.R. WILSON, L.R.C.P. & S.I.
  - \* Also Assistant County Medical Officer

### Chief Dental Officer:

C.A. REYNOLDS, L.D.S.

### Dental Officers:

### Whole-time

W.T. ARMSTRONG, L.D.S.

A.G. BILLINGS, L.D.S.

C.J. BOOTH, L.D.S. B.D.Sc. (left 31.10.69)

K.J. CAWLEY, L.D.S.

R.A. CURRIE, L.D.S.

R.A. DUNCAN, B.D.S., L.D.S. (left 22.9.69)

Mrs. M.E. GOODYEAR, L.D.S.

W.A. GRUNWELL, L.D.S.

J.E. KENNY, L.D.S.

M.G.V. LARKIN, B.D.S.

Mrs. A.M. METREWELI, B.D.S. (comm. 18.8.69)

D.J. WHEELER, B.D.S.

M.F.H. WILLIS, L.D.S.

### Dental Auxiliaries:

Mrs. J.W. GLASSON, G.D.C.Prof.Cert. Mrs. E.A. GREENAWAY, G.D.C.Prof.Cert.

### County Public Health Officer:

W.R. SAUNDERS, F.R.S.H., M.A.P.H.I.

### Assistant County Public Health Officer:

A. ROWE, M.A.P.H.I.

### County Nursing Officer, Non-medical Supervisor of Midwives and Superintendent Health Visitor:

Miss E.M. TEAGUE, S.R.N., S.C.M., H.V.Cert., Q.N.S.

### Deputy County Nursing Officer, etc.

Miss G.I. JESS, S.R.N., S.C.M., H.V.Cert., Q.N.S. (left 10.8.69) Miss A. WILLIAMS, S.R.N., S.C.M., H.V.Cert., Q.N.S. (from 11.8.69)

### **Assistant County Nursing Officers:**

Miss V.M. COVENTRY, S.R.N., S.C.M, H.V.Cert., Q.N.S.
Miss V.E. GRAHAM, S.R.N., S.C.M., H.V.Cert., Q.N.S.
Mrs. D.A.J. PERRY, S.R.N., S.C.M, H.V.Cert. (comm. 1.9.69)
Miss K.A. PURKISS, S.R.N., S.C.M., H.V.Cert., Q.N.S.
Miss A. WILLIAMS, S.R.N., S.C.M., H.V.Cert., Q.N.S. (to 10.8.69)

### Senior Social Caseworker:

Mrs. W.M. GRAVES

### County Home Help Organiser:

Miss D.J. BLIGHT, Dip.Inst. of H.H. Orgs.

### County Ambulance Officer:

W.H. MAYCOCK, O.St.J., F.I.A.O.

### Transport Officer:

J.J. PEARCE, O.St.J.

### Training Officer (Ambulance):

F. POLKINGHORNE, O.St.J. (left 23.10.69) C.D. MITCHELL (comm. 15.12.69)

### Principal Mental Health and Welfare Officer:

F.E. PASCOE, R.O's Cert., Ltr.Rcgn.C.T.S.W.

### Deputy Principal Mental Health and Welfare Officer:

Miss J.S. MATHIESON, A.A.P.S.W. (from 1.10.69)

### Assistant Principal Mental Health and Welfare Officers:

Miss J.S. MATHIESON, A.A.P.S.W. (comm. 1.2.69) (to 30.9.69) W.C. ODGERS

### Health Education Officer:

Miss M.A. STORAH, S.R.N., S.C.M., H.V.Cert., Dip.H.Ed.

### Senior Educational Psychologist:

P.F. PORTWOOD, B.Sc., Dip.Psych,, A.B.Ps.S.

### **Education Psychologists:**

Miss M.H. BROWN, M.A., M.Ed. (comm. 1.9.69) A.B. COCKRANE, MA., Dip.Ed.Psych. (left 10.5.69)

### Education Psychologists (continued):

Miss S.J. GREGG, B.A.Hons.Psych. (comm. 25.8.69) Mrs. P. KEEN, B.A.Hons., Dip.Ed.Psych. (comm. 8.9.69) H.C. MACFIE, MA. Miss L. MULROY, M.Sc., B.Ed. (left 20.6.69)

### Head Psychiatric Social Worker:

Mrs. C.A. AMOS, B.A., A.A.P.S.W.

### Child Guidance Social Workers:

Mrs. S. DAVIDSON
Miss M.J. HOSKING
M.C. STONE, H.O.Ltr. of Recg.

### Remedial Developments Officer:

R. BROWN, M.Ed., B.Sc., A.R.C.S.T.

### Organiser of Training of the Mentally Handicapped:

Mrs. R.M. BLAKE, N.F.U., Dip.N.A.M.H.

### Welfare Officer for the Deaf:

Rev. N.C. DYSON, D.W.Cert., Ltr.Recg., C.T.S.W.

### Chief Clerk:

W.S. HOOPER, D.M.A.

### PART-TIME OFFICERS:

### Chief Inspector under the Food and Drugs Act:

G.J. HANNIBALL, M.I.W.M.A. (also Chief Inspector of Weights and Measures)

### Public Analyst:

ERIC VOELCKER, A.R.C.S., F.R.I.C.,
Analytical Laboratory, Stuart House, 1 Tudor Street, London, E.C.4.

### Chest Physicians: (provided by the Regional Hospital Board):

B.A.G. JENKINS, M.D., M.R.C.P. R.L. RAY, M.B., B.S. J.J.Y. DAWSON, M.C., M.D., B.S., M.R.C.P.

### Advisors on Mental Health:

J.F. DONOVAN, M.R.C.S., L.R.C.P., D.P.M. (Consultant Psychiatrist)
J.E. DESSART, M.B., B.S., D.P.M., (Consultant Psychiatrist Child Guidance)
Regional Hospital Board Staff

### STATISTICS AND SOCIAL CONDITIONS

Area of the County	876,296 acres
Population 1969 (R.G's mid-year estimate)	360,200
Population 1961 Census	340,013
Population 1951 Census	343,248
Censal Decrease	3,235
Percentage Decrease	0.99
Number of private dwellings (1961 Census)	116,819
Rateable Value	£12,495,097
Sum represented by 1d. rate	£49,926

The Registrar General's mid-year estimate of the population for the Urban and Rural areas during each of the five years 1965-69 is shown in the following table:-

	1965	1966	1967	1968	1969
Urban Districts	197,250	199,230	201,030	198,780	200,660
Rural Districts	149,900	151,930	153,210	158,930	159,540
Administrative County	347,150	351,160	354,240	357,710	360,200
Increase or decrease over previous year	+ 2,270	+ 4,010	+ 3,080	+ 3,470	+ 2,490

Table 1 at the end of the Report shows the estimated population and number of births and deaths for 1969 in each of the County Districts in the County, whilst Table II gives a summary of these statistics for recent years.

### Births and Birth Rate

Live Births	Male	Female	Total
Legitimate	2,522	2,384	4,906
Illegitimate	204	• 220	424
Total	2,726	2,604	5,330
Birth rate per 1	,000 of the popula	ntion - 14.8	
Still Births	Male	Female	Total
Legitimate	30	30	60
Illegitimate	4	2	6
Total	34	32	66
Still birth rate p	er 1,000 total bir	ths - 12	Day and the Control of

This compares with a rate of 13 for England and Wales.

The Birth Rate of 14.8 compares with a rate of 14.4 in 1968. The following are the rates for recent years:-

		Cornwall	England & Wales
1960		 14.7	17.1
1961		 14.5	17.5
1962		 15.3	17.9
1963		 15.2	18.1
1964		 15.8	18.4
1965	200	 15.6	18.1
1966		 15.3	17.7
1967		 14.6	17.2
1968		 14.4	16.9
1969		 14.8	16.3

### Deaths and Death Rate

Deaths registered in or belonging to the County during the year were as follows:-

Males		2,537
Females		2,526
Total	al	5,063

This gives a death rate of 14.1 compared with 14.8 in 1968. The following are the death rates for recent years:-

		Cornwall	England & Wales
1960		 13.7	11.5
1961	***************************************	 14.3	11.9
1962		 14.3	11.9
1963		 15.2	12.2
1964		 13.8	11.3
1965		 14.3	11.5
1966		 14.3	11.7
1967	95	 13.8	11.2
1968	300	 14.8	11.9
1969		 14.1	11.9

### Infant Mortality

There were 85 infant deaths registered during the year, giving an infant mortality rate of 16 per 1,000 live births. This compares with a rate of 17 in 1968 and a 1969 rate of 18 for England and Wales.

### **Perinatal Mortality**

The combined stillbirths (66) and deaths of infants in the first week of life (50) expressed as a rate per thousand total births, gives a perinatal mortality rate of 22. This compares with a rate of 23 for England and Wales.

### NATIONAL HEALTH SERVICE ACTS

### **ADMINISTRATION**

There were no changes in the administrative arrangements described in earlier Reports. The County continues to be divided into seven Health Areas which are constituted as follows:-

Area No.	Area Office Address	County Districts	Area in Acres	Estimated Population
1	Bellair,	Penzance M.B.	3,155	18,790
	Alverton,	St. Ives M.B.	4,287	8,920
	Penzance	St. Just U.D.	7,634	3,410
		West Penwith R.D.	59,792	17,930
			74,868	49,050
2	Rectory Road,	Helston M.B.	4,014	9,860
	Camborne	Camborne-Redruth U.D.	22,062	38,380
		Kerrier R.D.	90,839	22,930
			116,915	71,170
3	The Leats,	Falmouth M.B.	1,880	17,350
	Truro	Penryn M.B.	829	5,140
		Truro City	2,634	14,590
		Truro R.D.	108,316	29,060
7		ed to neighbor to the absolu	113,659	66,140
4	Moorland Road,		4,599	12,420
	St. Austell	St. Austell with Fowey M.B.	21,358	29,900
		St. Austell R.D.	85,545	24,530
			111,502	66,850

Area No.	Area Office Address	County Districts	Area in Acres	Estimated Population
5	Brooklyn,	Bodmin M.B.	3,312	7,950
	Wadebridge	Wadebridge with Padstow R.D.	91,573	17,540
			94,885	25,490
,	I	Vorrantzienen	2.100	4.700
6	Launceston	Launceston M.B.	2,180	4,700
		Bude-Stratton U.D.	4,296	5,330
		Camelford R.D.	52,544	6,910
		Launceston R.D.	85,122	7,090
		Stratton R.D.	56,220	4,710
			200,362	28,740
7	Westbourne,	Liskeard M.B.	2,704	4,890
	Liskeard	Saltash M.B.	5,386	8,800
		Looe U.D.	1,691	4,070
		Torpoint U.D.	988	6,160
		St. Germans R.D.	48,533	15,110
		Liskeard R.D.	104,803	13,730
	CHOICE MINISTER		164,105	52,760

### CARE OF MOTHERS AND YOUNG CHILDREN

Section 22 of the National Health Service Act, 1946 places a duty upon the Local Health Authority to make arrangements for the care, including in particular dental care, of expectant and nursing mothers and of children who have not attained the age of five years and are not attending primary schools maintained by a Local Education Authority.

### Ante-Natal Care

The care of pregnant women has been undertaken as in previous years and during 1969, 1,381 women made 7,884 attendances at the Local Authority's clinics for relaxation purposes, these classes being run by the Domiciliary Midwives.

Mothers' Clubs continue to attract good attendances and these, in general, were as before based on clinic premises. Health Education programmes are arranged by small committees of mothers in collaboration with the Health Visitors and these courses remain very popular.

### Maternity Accommodation

The Redruth General Practitioner Maternity Unit opened in September 1969, and in the last quarter of the year, 110 deliveries were recorded. The total number of deliveries at Penrice, St. Austell was 528 and Bolitho Maternity Unit, Penzance, 486, the overall proportion of hospital confinements in the County having now risen to 82%, having doubled in the last decade. The Staff Committees of the General Practitioner Units have regular meetings and inline with the recommendations of the Royal College of Obstetricians and Gynaecologists, there is close co-operation and integration with specialist units and the Consultants in Obstetrics and Paediatrics.

### Maternal Deaths

One maternal death occurred in the County in 1969, giving a maternal mortality rate of 0.19 per 1,000 births. The following table gives the rate over the past decade:-

	Number of	Rate per 1,000 Total Births		per of Rate per 1,000 Total	
Year	Deaths	Cornwall	England and Wales		
1961	5	1.01	0.33		
1962	1	0.19	0.35		
1963	1 1	0.19	0.28		
1964	2	0.36	0.25		
1965	3	0.54	0.25		
1966	1	0.18	0.26		
1967	1	0.19	0.29		
1968	4	0.77	0.24		
1969	1	0.19			

By meticulous selection of patients for delivery at suitably staffed and equipped units and with early recognition of obstetric and social at-risk groups, the maternal death rate will be reduced to the absolute minimum.

The following table shows the number of births in the County (including those which occurred in Plymouth) together with the percentages of births occurring at the patient's home and in hospitals, maternity units and nursing homes.

	Number of	Percentage of Births occurring in:-			
Year	Births Registered	Patient's Home	Hospital and Maternity Homes	Nursing Homes	
1961	4,902	49.9	48.2	1.9	
1962	5,206	49.7	48.6	1.7	
1963	5,137	44.5	53.2	2.3	
1964	5,451	40.6	58.3	1.1	
1965	5,401	33.9	66.1	Spirit Park	
1966	5,362	30.1	66.9		
1967	5,179	25.5	74.5	- September 1	
1968	5,132	20.0	80.0	-	
1969	5,063	18.0	82.0 *	DISTANCE OF STREET	

### **Perinatal Mortality**

For the first time in a decade the perinatal rate in Cornwall is below that for England and Wales, 22 as against 23. Among the multiple factors involved in producing this satisfactory state of affairs must be mentioned the most gratifying results of the first complete year's figures from the special care baby unit at Treliske Hospital under the direction of the Consultant Paediatrician - Dr. M.A. Voyce, which halved the previously recorded 100% mortality of premature infants less than 1,000 grams, and the fact that 82% of mothers are delivered in hospital units after careful selection by the Obstetric Consultants and the General Practitioners.

### Perinatal Mortality Rate

	Peri	inatal Deat	hs	Perinatal Mor	tality Rates
Year	Still- births	First Week	Total	Cornwall	England and Wales
1961	123	69	192	38	32
1962	124	65	189	35	31
1963	116	54	170	32	. 29
1964	112	73	185	32	28
1965	99	66	165	30	27
1966	108	48	156	29	26
1967	85	47	132	25	25
1968	93	53	146	28	25
1969	66	50	116	22	23

### Premature Babies

Four portable incubators, two provided by the County Council and two by the West Cornwall Hospital Management Committee are in use in the County. The incubators were used on twenty-two occasions during this year, as follows:-once at Liskeard, eight times at Penzance, seven times at Truro and six times at St. Austell.

### Child Health Clinics

During the year 7,713 children attended these clinics and 2,660 of these were for the first time. The Child Health Clinics are the centres for education in the management of children, where parents may obtain screening examinations of their new born and an assessment of the development of their pre-school child. The clinic is an essential part of the continuance of child care from ante-natal clinic to school leaving examinations.

### The Ascertainment of Handicapped Young Children

The purpose of this ascertainment is to provide the optimum physical and mental health of all children, to make the diagnosis and institute effective treatment of handicapping conditions of body, mind and personality at the earliest possible time and to attempt to discover the cause of these conditions and eventually how to prevent them.

Assessment and ascertainment of the young child is a continuous process, commencing with an examination at birth, followed by observation by Health Visitors or Doctors of the child's development and investigations by the Paediatrician and Development Assessment team.

The final diagnosis is not merely of the handicapping conditions but includes a prognostication of the child's potential and a realistic approach to treatment, which will best assist him to become an integrated happy individual.

### Assessment of Hearing in Infants and Young Children

Hearing Assessment Clinics are now held on a monthly basis throughout the County.

Infants and Children who fail their initial hearing assessment or where there is any doubt on hearing acuity, are referred for expert testing and E.N.T. appraisal by the Medical Officer.

Areas	Number Screened	Number Referred
1	441	4
2	1,203	26
3	818	21
4	872	22
5	448	5
6	362	15
7	730	18
	4,874	111

### Accidents to Young Children

An increased number of accidents to children were reported during the year particularly those due to physical trauma. Accidents to infants involving fractures of limbs and skull are of particular importance with growing awareness of the battered babies syndrome. Although only a minute portion of the total injuries and accidents to infants and children are wilfully inflicted by their parents or guardians, it is a grave responsibility for those involved in Child Care both medically and socially, to detect such cases, and protect these children from further attack. The infliction of injury to the child is a manifestation of psychological and/or social maladjustment of the adult, and investigation and treatment must proceed along these lines. However, the vital and initial problem is the protection of the child, this must not be forgotten in the zeal to assist the family unit, the child must not be allowed to become a therapeutic chopping block for inadequate personalities. Avoidable accidents particularly burns and poisonings occur daily and in total account for a far greater proportion of the morbidity and misery, than the more emotive 'Battered Baby' syndrome. Preventative education, awareness of the hazards in the home and an increased responsibility of those in charge of children, are the only methods of reducing this wastage.

### Welfare Foods

The issues over the past seven years are as follows:-

Year	National Dried Milk (Packets)	Cod Liver Oil (Bottles)	Vitamin Tablets (Packets)	Orange Juice (Bottles)
1963	99,468	6,947	6,910	72,234
1964	94,910	6,339	6,052	74,649
1965	85,988	6,383	5,633	77,783
1966	69,560	5,614	5,117	87,037
1967	65,499	5,209	4,210	88,033
1968	50,787	5,118	3,372	86,172
1969	45,605	4,400	3,743	96,593

A scheme has been introduced which allows a distributor 5% on sales. Since the ban on the use of cyclamates there has been a noticeable increase in the sales of orange juice, which after a slight fall in 1968 continue to increase.

Tribute must again be paid to the Women's Royal Voluntary Service and to the shopkeepers at the 120 centres in Cornwall without whose help the service could not be maintained.

### Child Care Co-ordinating Meetings

These continued throughout the year at both Member and Officer level, with representation from the Health and Welfare, Children's, Education and Probation services. Discussions ranged over many problems including those of homeless families, the "at risk" register, and the geographical areas of field workers. The Report of the Seebohm Committee was discussed, a Child Care In-Service training course was arranged, and a Directory of Information on statutory and voluntary social service agencies in the County was produced.

### Nurseries and Child Minders

The Nurseries and Child Minders Regulation Act of 1948 was amended by the National Health Service and Public Health Act of 1968, and as a result of this and of the public becoming more "playgroup minded" during 1969, there has been a rapid increase in the number of playgroups and child minders in the County, and also in the number of sessions which are held each week.

It is now the duty of the Local Health Authority to lay down minimum acceptable standards for playgroup premises, especially standards of lighting, heating, sanitation, fire precautions, etc. Regular visiting by staff of the Health Department has been arranged to ensure that the health and welfare of the children attending are satisfactory. 88 playgroups with 1,680 places were operating during the year, and a further 11 playgroups with 226 places were awaiting registration at the year end. 69 child minders were operating with 149 places during the year, and a further 8 child minders with 15 places were awaiting registration at the end of the year.

Several meetings between Area Organisers of the Cornish Association for the Pre-School Child and members of the Health Department staff have taken place at the central and Area offices throughout the year. Very considerable benefit was obtained by all concerned following wide-ranging discussion and planning for the future expansion of the playgroup activities. It is hoped that one important result of the meetings will be that in future more socially deprived and handicapped children will obtain free places in many of the playgroups. It is also hoped that transport will be arranged for those children living in isolated places who will benefit socially when they are able to take part in the numerous activities of the groups with children of their own ages.

The second training course for playgroup supervisors at the Cornwall Technical College, Camborne, commenced in the autumn and a further 16 ladies attended. It is hoped that in the autumn of 1970 arrangements can be made in conjunction with the Education Department for similar courses to be held in various centres throughout the County.

The County Fire Brigade has given the Department every support, and have inspected all playgroup and child minder premises regarding the implementation of proper fire precautions. In all but a few isolated cases their recommendations have been carried out. All new applicants for registration as playgroups and child minders have to certify that the Fire Officer's recommendations have been carried out before a certificate of registration is issued. All playgroups will be re-inspected during 1970 and the visiting Fire Officers will make suitable recommendations for fire drill practice.

### Care of the Unsupported Mother and her Child

The work in this field continues to grow, in 1969 303 new cases were referred and 190 cases from 1968 received continuing help and support. 78 admissions were arranged to Mother and Baby Homes and 38 to foster homes, both in and out of the County.

Morwenna, the voluntary Home at Penzance closed on November 3rd, 1969. It is hoped by the controlling body to convert this house at Penzance into flatlet accommodation for six unsupported mothers and their children. The need for this accommodation is also rising in the area and it is hoped that the Association for Girls' Welfare will soon have sufficient funds to start the conversion.

A 12 bedded purpose-built local authority Mother and Baby Home was opened at St. Austell on the 3rd November. Mrs. Gibbons, the Matron of Morwenna, was appointed as Matron at the new Home. During the period up to the 31st December there were 14 admissions. The opening of this Home has reduced pressures on Social Workers cutting down travelling time considerably and provided facilities for better casework. The girls and their families are extremely appreciative.

In the hope of preventing the increasing numbers of pregnancies in the 16/17 year old group more discussions have taken place in Schools. Counselling continues in Newquay and a Caseworker is now in attendance for one day per week in Penzance.

The help and co-operation of hospital staff, general practitioners and health visitors was much appreciated by the Case Workers and staff of the Home.

### **Family Planning**

The Family Planning Association has continued to receive financial aid on a per capita basis for those referred on medical need and in other special cases. The free use of clinic premises continues.

Patients are referred by the Hospital Service, General Practitioners, Health Visitors, District Nurses, County Council Social Workers and the Marriage Guidance Council. The statistics for the year are shown below:-

Clinic	Total Number of attendances to see the Doctor	Number of new cases
	attendances to see the Doctor	new cases
Bodmin	152	28
Bude	495	86
Camborne	638	123
Falmouth	544	74
Helston	369	86
Launceston	856	136
Penzance	650	100
Redruth	975	112
St. Austell	956	121
Truro	775	126
Wadebridge	341	52
	6,751	1,044

### Cervical Cytology

Screening has been carried out at fifteen centres throughout the County, but it is disappointing to find that fewer women have taken the opportunities to undergo examination. The value of these clinics is not limited to the detection of cancer, and in every case a total gynaecological survey and urinalysis is made.

Clinics were held at Penzance, St. Ives, Hayle, Helston, Redruth, Camborne, Truro, Falmouth, Newquay, St. Austell, Wadebridge, Camelford, Launceston, Liskeard and Saltash and during the year 2,946 women were screened and 1,143 were the subject of observations. Where necessary these were referred to their general practitioners.

### DENTAL SERVICE

### Report of the Chief Dental Officer

### Staffing

At the start of 1969 there was one vacancy to be filled in Truro; then in August the service was staffed to the establishment limit but this lasted for only a very short time and at the end of the year with 12 dental officers in post there were vacancies for 4 dental officers taking into account the increase, from December, of one to the establishment. Two dental auxiliaries continue to be employed. Approval for a third appointment originally asked for in September was deferred until January, an unfortunate time in that by January newly trained auxiliaries are already in post and very unlikely to move.

### **Expectant and Nursing Mothers**

Of the 129 mothers inspected 121 were found to require treatment and 120 offered treatment. The number treated including some whose treatments were not completed in 1968, was 147, which is nineteen less than in the previous year. Surprisingly, there was a slight increase in the total of conservative treatment carried out but the number of dentures supplied was smaller and the number of mothers supplied with dentures for the first time was just half that of the previous year.

### Pre-School Children

An encouraging and pleasing aspect of the toddlers part of the work is that more are being brought along for inspection before treatment is needed. Two thirds of those inspected required no treatment and this is a good pointer to an increasing awareness on the part of mothers to the importance of getting their children used to the surgery surroundings and to get treatment carried out as early as possible so that it is minimal.

In November the County Council approved the principle of fluoridation and agreed to funds being available to start this in the 1970/71 financial year. Our very young children will be the first to benefit fully from this when it comes into operation and will continue to benefit throughout their lives.

### Mental Health Establishments

During the year, 68 children from the Curnow and Doubletrees junior departments were inspected, of these 38 required treatment, 33 were referred and 27 accepted treatment. In all 16 permanent teeth and 13 temporary teeth were filled, slightly less than last year but nevertheless encouraging. No permanent teeth required extraction; 10 temporary teeth were extracted for seven children, 4 of whom were treated under general anaesthetic.

### Dental Services for Expectant and Nursing Mothers and Children under 5 years

		Children 0-4 (inc		Expectant a Jursing Mot	
A.	Attendances and Treatment	107 131	minomo?	Mo Diem	
	No. of visits for treatment during year				
	First Visit	564		147	
	Subsequent Visits	666		300	
	that Nummy Officer, mer the General Practicano	1,230		447	
	No. of Additional Courses of Treatment other				
	than the First Course commenced during year	105		18	
	Treatment provided during year -	No.			
	No. of Fillings	942		257	
	Teeth Filled	844		233	
	Teeth Extracted	424		170	
	General Anaesthetics given	187		17	
	Emergency Visits by Patients Patients X-Rayed	27		35	
	Patients A-Rayed Patients treated by Scaling and/or	le boir		33	
	removal of stains from the teeth				
	(Prophylaxis)	157		67	
	Teeth Root Filled	HIE SH		2	
	Inlays	alge age		s as really	
	Crowns			-	
	Number of courses of treatment				
	completed during the year	454		106	
B.	Prosthetics				
	Patients supplied with full upper or lower (first t	ime)	5		
	Patients supplied with other dentures	100101	7		
	Number of Dentures supplied		28		
C.	Anaesthetics				
	General Anaesthetics administered by dental off	icers	<u>70</u>		
D.	Inspections .				
in	No. of patients given first inspections during year	r	A.926	D.129	
	No. of patients in A and D above who required trea	atment	B.627	E.121	
	No. of patients in B and E above who were offer treatment	ed	C. <u>598</u>	F. <u>120</u>	
E.	Sessions				
			20 3202		

No. of Dental Officer Sessions (i.e. Equivalent Complete Half Days)
Devoted to Maternity and Child Welfare Patients:

For Treatment	255
For Health Education	.17

### THE NURSING SERVICE

### Report of the Chief Nursing Officer

The year's most important task was the preparation for complete "attachment" of Community Nursing Staff to General Practitioners throughout Cornwall, starting on October 1st, 1969. The County Medical Officer of Health met all the nursing staff to answer their queries and fears of change - after all many of the staff had worked in the same geographical areas for 20 or 30 years. Then the County Medical Officer, with the Chief Nursing Officer, met the General Practitioners in groups and again answered questions and discussed the meaning and objects of attachment.

After this the Nursing Officers met small groups of Nurses and Health Visitors to get down to detailed planning, and to use local knowledge to try to match Nurse to General Practitioner in such a way as to get the best possible service. It was found that the equivalent of one triple worker to one doctor was needed in most areas.

All this ground work paid dividends for "attachment" day went fairly smoothly. Since then there have been criticisms to meet from a few doctors and further discussions with those doctors were arranged. Adjustments were made which, it is hoped, will prove satisfactory and give the best possible service to the public which is, after all, the object of the whole exercise.

Tribute is paid here to the effort the Nursing Staff have put into making attachment a living workable arrangement with the active co-operation of the General Practitioners.

It will be interesting to see another year what difference this new way of working will make to the Nurses and Health Visitors work. It must mean more travelling in a County like Cornwall but, where attachment works in other Counties, there has been a gradual rationalization of general practitioners boundaries, reducing travelling again for the nurses and health visiting staff.

The permanent staff at 31st December, 1969, was as follows:-

### Administrative Staff

Chief Nursing Officer	 	 1
Principal Nursing Officer	 	 1
Area Nursing Officers	 	 4
		6

### Whole-time Health Visitors

"Queen's" Nursing Sisters, S.C.M., H.V.Cer (3 doing Tuberculosis and general Health V State Registered Nurses, S.C.M, H.V.Cert. (5 doing Tuberculosis and general Health V Field Work Instructor	isiting)		19 24 1
			44
			-
District Nurse-Midwife/Health Visitors			
"Queen's" Nursing Sisters, S.R.N., S.C.M., I	H.V.Cert.		38
State Registered Nurses, S.C.M., H.V.Cert.			8
State Registered Nurse, H.V.Cert.	A STATE OF THE STA		1
"Queen's" Nursing Sisters, S.R.N., S.C.M.	and the later		3
State Certified Midwives, S.E.N.			2
District Nurse-Midwives			
"Queen's" Nursing Sisters, S.R.N., S.C.M.			17
State Registered Nurses, S.C.M.			22
State Certified Midwives, S.E.N			7
District Nurses			
"Queen's" Male Nurse	entred ma		1
State Registered Nurses	. Holmob s		10
State Enrolled Nurses	e ull me io		2
District Midwife			
State Certified Midwife			1112
			112
Part-time Staff			
Health Visitor			1
"Queen's" Nursing Sisters, S.R.N.		***	2
"Queen's" Nursing Sisters, S.R.N., S.C.M.		***	2
State Registered Nurse, S.C.M, H.V.Cert.		***	1
State Registered Nurses		***	19
State Registered Nurses, S.C.M.		***	5
State Enrolled Nurses	-	***	10
Nursing Auxiliary		***	1
Trusting Adminis		***	-
promise to the second section .			41

### Sickness

One Nurse was off the whole of the year with a terminal illness (she died on the 3rd January, 1970). Apart from this Nurse, 2,292 days have been lost, the equivalent of 6 full-time staff. Where there has been long term illness part-time workers have been employed temporarily.

### Transport

The County Transport Officer and his staff by their help and support have given our Service another worry free year.

### Housing

Two nurses moved out of District Council houses (which had been let to the County Council to sub-let to the nurses) into their own accommodation, and one house was rented in another area. There are 27 nurses occupying houses provided by the County Council 11 of which are rented from the local District Councils. Ten of these houses are let furnished to the nurses.

### Midwifery

With the increasing number of expectant mothers being delivered in hospital, more are going home before the tenth day to be nursed by the domiciliary midwives. In 1969 1,475 mothers went home before the tenth day, of these, 355 were discharged within 48 hours; all of these were not planned early discharges however. The domiciliary births now account for only about 18% of all Cornish births. This leaves some domiciliary midwives dangerously low in experience and a close watch is being kept on the situation.

It has been agreed to train up to six Part II pupil midwives at one time. This is still an essential part of midwifery training, except in one or two parts of the Country where the Central Midwives Board is trying out experiments in one year's continuous training. This may be done in Cornwall one day instead of the two separate six months training - Part I and Part II.

During the year 212 Midwives notified their intention to practise in the County.

Domiciliary, Co	ornwall Co	ounty Council	 	118
Domiciliary in	private pra	actice	 	1
Institutional			 	93
				212

### Deliveries attended by Domiciliary Midwives

	Doctor not booked		Total
Cornwall C.C. Midwives	26	886	912

They accompanied 361 patients to hospital by ambulance or car.

### Visits paid by County Council Midwives

Ante-natal visits to domiciliary cases			12,118
Ante-natal visits to hospital booked cases			5,890
Midwifery visits			14,472
Visits to hospital booked cases discharged	before th	e 10th day	9,270

### Medical Aid forms sent in respect of:

Mothers during ante-natal period	 	72
Mothers during labour	 	272
Mothers during puerperium	 	43
Infants	 	39

### Other Statutory Notifications from all sources were received as follows:

Stillbirths			 	68
Death of Mother	r		 d	1
Liability to be a	Source	of Infection	 	8

### Attendance at Clinics by Midwives

General Practitioner Ante-Natal Clinics	 2,095
Midwives Ante-Natal and Relaxation Classes	 192
Special Clinics for Health Education and Relaxation	 532

### Refresher Courses

During the year 17 Midwives attended Midwifery Refresher Courses demanded by the Central Midwives Board and two non-Medical Supervisors of Midwives attended a Post Graduate Course for Supervisors of Midwives. Eleven Health Visitors attended Health Visitor Refresher Courses and five State Registered Nurses attended District Nursing Courses. One Area Nursing Officer attended a Management Appreciation Course.

In July an in-service training course was held at St. Austell. The subjects were "Drugs, Alcohol and Smoking" and "Good Parenthood - the key to mental health".

### Health Visiting

With attachment of Health Visitors to General Practitioners starting this year, Health Visitors have had to take over the care of many families previously unknown to them. This has taken extra time and 105,341 visits to all children from 0 to 5 years were paid against 108,918 in 1968. Varying use is being made of the Health Visitors by the General Practitioners, but it is expected that, with more understanding of their function, the General Practitioners will make a greater use of their services, so that the Health Visitors will be more truly family workers.

The following figures show the work of the Health Visitors:

First visits to childre		4,966	
Total visits to childr		105,341	
Total number of chi	1	23,871	
Visits to persons over		14,657	
Social visits to other	'S		11,223
Mental Health visits			550
Infectious disease visits			252
Hearing tests			4,874

### Attendances at Clinics, etc.

Child Health Clinics			1,902
Mothercraft and Relaxation	Classes	1	608
Mothers Clubs			106
Immunisation Sessions			1,275
Lectures and talks given, wi	th demonst	rations	1,476
Attendances at School Med	ical Session	s	1,510
Attendances at School Hyg	iene Session	ıs	991
Reinspection			225
Follow-up Visits			1,833

### Students

Students continue to come for experience to Cornwall. We were pleased to welcome the Chief Nursing Officer, Ministry of Health, Israel, for a week, amongst others.

Besides the usual student nurses from the local hospital, health visitor students come from different training centres in the country. Letters of appreciation have been received about the experience they were given.

### Home Nursing

There is a growing demand for Home Nursing, and this will increase with attachment. 795 more patients were given care than in 1968, the nurses paying 7,904 extra visits. The expense of hospital care will also bring more patients to be nursed at home.

Nursing equipment is provided for the patient as necessary, the long term and terminal cases sometimes finding great comfort from the loan of a ripple bed.

### Work done by District Nurses

Surgical cases	ro live be	or lollongil	 1,968
Medical cases	1 m	True and the se	 6,526
Miscarriages	100	sol valle alle	 246
Tuberculosis			 50
			8,790
General visits paid			 241,511
Number of children nursed under 5			 198
Number of persons nursed over 65			 4,847

### AMBULANCE SERVICE

### Report of the County Ambulance Officer

In my report last year I pointed out that as more modern methods of patient care and treatment are introduced into hospital it must be anticipated that greater demands will be made on the Ambulance Service.

This year has proved no exception, and the Ambulance Service conveyed 189,218 patients and travelled 2,066,806 miles, an increase of 8,772 patients and 133,602 miles. This means that the Ambulance Controls at Truro and Bodmin are organising journeys by either Ambulance, Dual-purpose vehicle or Hospital car, for some 518 patients a day.

14,066 accident and emergency calls were dealt with by the Controls, an average of 38.5 calls a day. The number of patients injured or requiring urgent removal to hospital as a result of these calls was 14,644, an increase of 2,253 over last year.

These accident and emergency calls are classified as follows:-

	1968	1969
Road accidents	1,502	1,627
Home accidents	484	395
Other accidents	1,249	1,492
Emergencies	8,535	10,552
	11,770	14,066

While it is encouraging to note that there has been a reduction in the number of accidents in the home, the figures for road and other accidents, i.e. in industry, on farms, etc. are not so encouraging. It means that on average ambulances are answering 9 accident calls a day for patients requiring treatment and removal to hospital.

All these calls necessitate dispatching an ambulance immediately to the scene and often entail a re-arrangement of the patients which the vehicle was booked to take to hospital for treatment.

#### Hospital Car Service

The Hospital Car Service had a very busy year conveying 69,267 patients, an increase of 9,853 over last year. This Service plays an important part by taking to hospital patients who do not require the skilled attention of ambulance drivers, thus releasing them for other essential duties. There are 224 Hospital car drivers in the County and I would take the opportunity of thanking them for their cooperation with the Ambulance Controls and their patience, particularly when they are waiting for long periods at hospitals while their patients receive treatment.

#### Training

In-Service training has been carried out during the year by holding two Courses, of two weeks duration. These have been attended by 22 Control staff and drivers. We were also pleased to have three drivers from Plymouth at the Courses.

Circular N.M.192A relating to the wage structure and qualification of ambulance drivers was received in June. According to the requirements of the Circular new entrants will be expected to attend a six-week training course at one of the centres approved by the Department of Health and Social Security; drivers with two to five years' service will attend a two-week course normally at one of these centres, while drivers with more than five years' service can be assessed as qualified. We were fortunate in that the Local Government Training Board recognised the courses held in Cornwall during the year as suitable qualification for drivers in the two to five year category. This means that it was not necessary to send eight drivers out of the County for training periods of two weeks.

#### **Voluntary Associations**

On eight of the fourteen County Stations members of the St. John Ambulance Brigade assist in manning ambulances at nights and weekends. Previously this was carried out entirely by these voluntary members but following discussions with the Trade Union representatives of the full-time drivers, they now undertake this duty on alternate weeks. There are also eleven voluntary ambulances in the County operated by either St. John Ambulance Brigade or British Red Cross Society members. These are not situated in the same towns as the County vehicles and, therefore, provide additional cover for the County, but this is mainly confined to nights and weekends when volunteers are available for this purpose.

#### Out-of-County Transport

	1968	1969
Number of patients transported by road	20	29
Number of patients carried by air	1	4
Number of patients carried by rail	642	761

It will be noted from the table that during the year four journeys by air were arranged for patients who were seriously ill. The patients concerned, all visitors to the County, all sustained fractures of the cervical region of the spine which resulted in severe hemiplegia and quadraplegia, through diving into water which was too shallow. One of these incidents occurred in June, and the other three during August, and as beds became available, they were transferred to Spinal Injuries Units at Stoke Mandeville, Oswestry, Southport, and Wakefield. In each instance a fixed wing aircraft was used because not only are they less expensive to hire, but the patient is not subjected to the noise, vibration, and other difficulties associated with helicopters. In order to maintain traction, it was also necessary for each patient to be transferred on an M.S.A. Turning Frame, and we are indebted to the Royal Naval Hospital at Devonport for the loan of their Frame for each of these cases.

The majority of the patients travelling by rail were accompanied by an escort from the British Red Cross Society or St. John Ambulance Brigade, and I am most grateful to them for giving up so much of their time in order to undertake these journeys.

I would also like to thank my colleagues, particularly in London, Plymouth and Bristol for arranging ambulance transport to meet these patients when they detrain and taking them to their destinations.

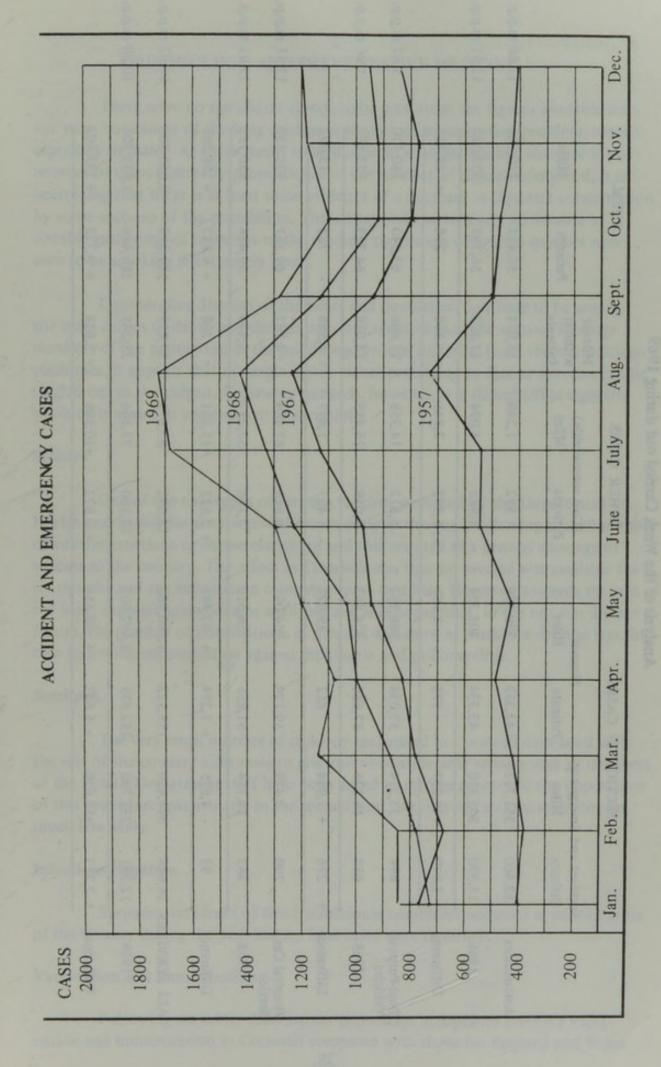
### Vehicle Replacement

This year's replacement programme was six ambulances, each capable of taking two stretcher patients, and four Dual-purpose ambulances primarily designed to take sitting patients but which can be adapted to take one stretcher patient.

# **Ambulance Stations**

(Ambulance Stations operated by the County Council)

	G		Ambulance	Veh	nicles
Station	Station Officer	Head Driver	Driver/ Attendants	Ambulances	Dual-Purpose
Penzance	1	-	7	4	2
Redruth	-	1	10	4	4
Falmouth	-	1	8	3	3
Truro	1	-	11	7	6
Newquay	-	1	3	1	2
St. Austell	-	1	7	3	2
Bodmin	-	1	8	4	3
Launceston	-	1	5	2	2
Camelford	MAN INTO I	SA DETAIL	2	1	
Bude	MANAGE III	The last	3	1	1
Liskeard	3 1p n _ 921	1	5	3	2
Looe		1	2	.1	-
Torpoint	-	1	2	1	Townson Townson
Saltash		1	3	1	1
	2	9	76	36	28



# Analysis of the Work Carried out during 1969

Accident and Emergency         Normal Patients         (Cost recoverable) without Patients         Miles         Patients         Miles         Miles         Patients         Miles         Miles         Patients         Miles         Mi			SECTION	SECTION 27 CASES		OTHER CASES	CASES		IC	TOTAL	
351,717         42,359         399,779         592         1,249         18,071         56,411         770,816           302,510         43,334         408,334         1,985         4,094         17,253         56,709         732,387           449,207         - 975         - 8,751         - 1,393         - 2,845         + 818         - 298         + 38,429           23,214         57,034         306,992         5,612         14,958         15,606         63,540         360,770           16,126         57,686         326,863         6,019         16,855         14,018         64,323         373,862           + 7,088         - 652         - 19,871         - 407         - 1,897         + 1,588         - 783         - 13,092           9,479         59,129         854,091         9,848         67,468         4,182         69,267         935,220           14,154         51,855         756,610         7,176         52,217         3,974         59,414         826,955           - 4,675         + 7,274         + 97,481         + 2,672         +15,251         + 9,853         + 108,26           384,410         158,852         1,560,862         16,052         83,675         35,245	8	Accident and Patients	1 Emergency Miles		ormal Miles	(Cost reconstrents)	overable) Miles	Mileage without Patients	Patients	Miles	
302,510         43,334         408,334         1,985         4,094         17,253         56,709         732,387           +49,207         - 975         - 8,751         - 1,393         - 2,845         + 818         - 298         + 38,429           23,214         57,034         306,992         5,612         14,958         15,606         63,540         360,770           16,126         57,686         326,863         6,019         16,855         14,018         64,323         373,862           + 7,088         - 652         - 19,871         - 407         - 1,897         + 1,588         - 783         - 13,092           9,479         59,129         854,091         9,848         67,468         4,182         69,267         935,220           14,154         51,855         756,610         7,176         52,217         3,974         59,414         826,955           - 4,675         + 7,274         + 97,481         + 2,672         +15,251         + 208         + 9,853         + 108,265           332,790         152,875         1,492,003         15,180         73,166         85,245         180,446         1,933,204           +51,620         + 5,647         + 872         + 10,509 <t< td=""><td>Ambulances</td><td>13,460</td><td>351,717</td><td>42,359</td><td>399,779</td><td>592</td><td>1,249</td><td>18,071</td><td>56,411</td><td>770,816</td><td>13.66 m.p.i</td></t<>	Ambulances	13,460	351,717	42,359	399,779	592	1,249	18,071	56,411	770,816	13.66 m.p.i
449,207       - 975       - 8,751       - 1,393       - 2,845       + 818       - 298       + 38,429         23,214       57,034       306,992       5,612       14,958       15,606       63,540       360,770         16,126       57,686       326,863       6,019       16,855       14,018       64,323       373,862         + 7,088       - 652       - 19,871       - 407       - 1,897       + 1,588       - 783       - 13,092         9,479       59,129       854,091       9,848       67,468       4,182       69,267       935,220         14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 872       + 10,509       + 2,614       + 8,772       + 133,602	1968	11,390	302,510	43,334	408,334	1,985	4,094	17,253	56,709	732,387	12.91 m.p.
23,214       57,034       306,992       5,612       14,958       15,606       63,540       360,770         16,126       57,686       326,863       6,019       16,855       14,018       64,323       373,862         + 7,088       - 652       - 19,871       - 407       - 1,897       + 1,588       - 783       - 13,092         9,479       59,129       854,091       9,848       67,468       4,182       69,267       935,220         14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	Difference	+ 2,070	+49,207		-	- 1,393	- 2,845	100	- 298		
16,126       57,686       326,863       6,019       16,855       14,018       64,323       373,862         + 7,088       - 652       - 19,871       - 407       - 1,897       + 1,588       - 783       - 13,092         9,479       59,129       854,091       9,848       67,468       4,182       69,267       935,220         14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	Dual-Purpose	894	23,214	57,034	306,992	5,612	14,958	15,606	63,540	360,770	5.67 m.p.
+ 7,088       - 652       - 19,871       - 407       - 1,897       + 1,588       - 783       - 13,092         9,479       59,129       854,091       9,848       67,468       4,182       69,267       935,220         14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         451,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	1968	618	16,126	57,686	326,863	6,019	16,855	14,018	64,323	373,862	5.96 m.p.
9,479       59,129       854,091       9,848       67,468       4,182       69,267       935,220         14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	Difference		+ 7,088				- 1,897	+ 1,588	- 783	- 13,092	
14,154       51,855       756,610       7,176       52,217       3,974       59,414       826,955         - 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	Hospital Car	290	9,479	59,129	854,091	9,848	67,468	4,182	69,267	935,220	13.51 m.p.
- 4,675       + 7,274       + 97,481       + 2,672       +15,251       + 208       + 9,853       + 108,265         384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	1968	383	14,154	51,855	756,610	7,176	52,217	3,974	59,414	826,955	13.91 m.p.
384,410       158,522       1,560,862       16,052       83,675       37,859       189,218       2,066,806         332,790       152,875       1,492,003       15,180       73,166       35,245       180,446       1,933,204         +51,620       + 5,647       + 68,859       + 872       +10,509       + 2,614       + 8,772       + 133,602	Difference	- 93	- 4,675	+ 7,274		+ 2,672	+15,251		+ 9,853	+ 108,265	
12,391 332,790 152,875 1,492,003 15,180 73,166 35,245 180,446 1,933,204 + 2,253 +51,620 + 5,647 + 68,859 + 872 +10,509 + 2,614 + 8,772 +133,602	ALL SERVICES	3 14,644	384,410	158,522	1,560,862	16,052	83,675	37,859	189,218	2,066,806	10.92 m.p.
+ 2,253 +51,620 + 5,647 + 68,859 + 872 +10,509 + 2,614 + 8,772	1968	12,391	332,790	152,875	1,492,003	15,180	73,166	35,245	180,446	1,933,204	10.70 m.p.
	Difference	+ 2,253	+51,620	+ 5,647			+10,509	+ 2,614	+ 8,772	+133,602	

#### EPIDEMIOLOGY AND PREVENTATIVE MEDICINE

There were no significant trends to be seen from the figures available for the year, but cancer of the lung continues to present an increasing problem, more especially in males. As there seems to be no doubt that the marked increase in the number of cases is directly proportional to the number of cigarettes smoked, it is heartening that there is at least some evidence of a decrease in cigarette consumption by some sections of the population. This situation is particularly noticeable in sizeable gatherings of members of the medical profession where the number now seen to be smoking is extremely small.

Degenerative diseases of the heart and circulation continue to be among the main causes of death and though constant research into the reasons for large numbers of the population in the middle-age groups suffering from these conditions continues, it appears that no single factor either pertaining to diet or exercise can be singled out as the culprit. Following research, however, it is thought that cigarette smoking is again, to some extent, responsible.

#### Measles

One of the two types of measles vaccine, provided by the Department of Health and Social Security was withdrawn early in the year, following a small number of adverse reactions to its use elsewhere and this resulted in a general shortage of vaccine in the country. The effect in Cornwall was that no vaccine was available for six months and the vaccination campaign came to a halt. However, towards the end of the year, supplies again became available and it is hoped that, in the not too distant future, the number of notifications of measles will show as marked a drop as was the case following immunization against diphtheria and poliomyelitis.

#### Smallpox

The very small number of children vaccinated in Cornwall compared with the rest of the country continues to give rise to considerable anxiety and all members of the Health Department staff have been asked to inform parents of the importance of this procedure, particularly in the second year of life when serious reactions are much less likely.

#### Infectious Hepatitis

Sporadic outbreaks of this troublesome complaint occurred in various areas of the County during the year but no fatal cases were reported.

#### Vaccination and Immunization

Following are tables showing the percentage acceptance rates for vaccination and immunization in Cornwall compared with those for England and Wales.

As mentioned previously the extremely low smallpox vaccination rate is a matter for concern and demonstrates the need to intensify efforts to educate parents about the dangers of complacency on this subject. The very satisfactory high rates of protection against other diseases are thought to result from more complete returns since the introduction of item of service payments to general practitioners and to more accurate statistics since the keeping of records in this field of work has been done by computer.

win resignate of refere		dren b			dren b		molicle sales of
promised or terminors	Whooping Cough	Diphtheria	Poliomyelitis	Whooping Cough	Diphtheria	Poliomyelitis	Smallpox (Children under 2)
England and Wales	81	83	80	66	67	65	31
Cornwall	84	85	79	91	91	89	16

# Number of children (in age groups) given primary protection during the year:

		All Park	Year of	f Birth		Die bur	Tatal
aldebes are salars	1969	1968	1967	1966	1962 -65	Others under 16	Total
Poliomyelitis	1,287	3,040	247	102	340	62	5,078
Diphtheria, Whooping Cough, and Tetanus	1,352	2,870	193	69	221	61	4,786
Measles	3	206	529	497	797	855	2,887

Year	Live Births	Vaccination ag	ainst Smallpox	Total Primary Vaccinations
	Ham terminated	Under 1	1 - 4	under 16
1960	4,938	1,531	905	2,789
1961	4,850	1,380	1,116	2,916
1962	5,178	1,525	3,176	15,328
1963	5,189	451	419	1,266
1964	5,391	367	1,507	2,217
1965	5,415	210	2,253	2,668
1966	5,384	266	2,676	3,152
1967	5,207	284	2,132	2,703
1968	5,134	114	2,076	2,428
1969	5,330	28	1,730	2,070

#### Tuberculosis

The fall in the number of notifications of tuberculosis continues steadily though less dramatically than in the first half of the decade, but 1969 saw a sharp rise in the number of non-respiratory cases notified. For the first time deaths from non-respiratory forms outnumbered those from respiratory but, with two exceptions, these deaths, which include late effects of the disease, were in persons over 65 years of age.

New Notifications of Tuberculosis

	F	Respirator	ry	No	n-Respira	tory		All Form	S
	Male	Female	Total	Male	Female	Total	Male	Female	Total
1960	108	45	153	13	12	25	121	57	178
1961	77	40	117	9	14	23	86	54	140
1962	79	40	119	7	3	10	86	43	129
1963	63	39	102	11	9	20	74	48	122
1964	68	32	100	12	8	20	80	40	120
1965	49	28	77	4	8	12	53	36	89
1966	46	22	68	3	9	12	49	31	80
1967	33	16	49	3	11	14	36	27	63
1968	35	19	54	7	5	12	42	24	66
1969	34	7	41	6	14	20	40	21	61

Analysis of Notifications of Tuberculosis

Age					Ye	ar				
Group	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
0-14	20	. 9	13	10	8	8	7	8	7	4
15-24	9	17	12	18	11	9	8	4	7	10
25-64	122	97	82	81	84	52	45	43	36	40
65+	27	17	22	12	17	20	20	8	16	7
Totals	178	140	129	122	120	89	80	63	66	61

		Deaths	Mortal	ity from	Tubercu	losis	De	ath Rate	s
	C	ORNWA	LL	C	ORNWA	LL	ENGLA	AND & W	ALES
	Respi- ratory	Other Forms	All Forms	Respi- ratory	Other • Forms	All Forms	Respi- ratory	Other Forms	All Forms
1960	20	2	22	0.06	0.005	0.06	0.07	0.01	0.08
1961	19	4	23	0.06	0.01	0.07	0.07	0.01	0.08
1962	16	4	20	0.05	0.01	0.06	0.06	0.01	0.07
1963	25	2	27	0.07	0.005	0.075	0.055	0.01	0.06
1964	18	1	19	0.05	0.003	0.05	0.01	0.01	0.05
1965	16	2	18	0.05	0.006	0.05	0.042	0.006	0.048
1966	12	3	15	0.03	0.000	0.043	0.043	0.005	0.048
1967	6	5	11	0.02	0.014	0.031	0.037	0.005	0.042
1968	15	4	19	0.04	0.011	0.053	0.09	0.013	0.042
1969	5	9	14	0.01	0.025	0.036			

#### Tuberculin Testing and B.C.G. Vaccination

As in previous years Heaf Testing and B.C.G. vaccination were offered to all children who had attained the age of 11 years, and also to students at the Cornwall Technical College not previously tested. During the year of 4,763 children tested, 4,067 were found to be tuberculin negative, of whom 4,037 were B.C.G. vaccinated.

In addition 259 contacts were found to be negative reactors and of these 194 were vaccinated.

#### Chiropody

At the end of the year, the following patients were registered under the three classes for whom this service is now in operation:

Class A	-	Persons over the age of 65 years and confined to the house by reasons of foot disabilities which are amenable	
		to treatment.	1,672
Class B	04	Physically handicapped persons (any age) who are housebound.	137
Class C		Persons liable to ulceration of the	
		feet by reason of systemic disorder	
		(such as Diabetes or Circulatory or Neurological disorder).	296

These figures show a steady increase over those for the previous year which gave a total of 1,299 housebound patients and 95 with systemic disorders and there is no evidence at present that the increase of 700 per year is likely to diminish appreciably in the near future.

In the absence of special circumstances, treatments are limited to 6 per year and no provision is at present made for expectant mothers although this is a group recommended for priority by the Department of Health.

# Number of persons treated during the year

500 100 100 500 1 500 100 100 500 1	By Local Authority	By Voluntary Organisation	Total
Persons over 65 years of age	2,425	628	3,053
Others	506	31	537
Total	2,931	659	3,590

#### Number of treatments given during the year

by Marian in the test and the month of the said in process which is not the said in the sa	By Local Authority	By Voluntary Organisation	Total
In Clinics	-	269	269
In Patients' Homes	8,486	247	8,733
In Old People's Homes	4,026	493	4,519
In Chiropodists' Surgeries	1,269	1,240	2,509
Total	13,781	2,249	16,030

Reference is also made in the Welfare Section of the report to the arrangements made for chiropody in the Council's Residential Homes, and to the support given to voluntary organisations providing this form of service.

#### HEALTH EDUCATION

One of the principles affecting Health Education practice, set out by the World Health Organisation, is: "To equip people with the knowledge and skills that they can use to solve their health problems". During the past 12 months, the demand for the services of the Health Education Section has increased considerably and it will be necessary to expand the section if Health Education is to fulfill the role of providing effective information on all matters relating to health behaviour. There is a real danger that present efforts will become piecemeal without co-ordinated organisation and effective follow-up and evaluation.

Difficulties have been experienced in meeting the requests for speakers for evening meetings owing to shortage of lecturers who are prepared to undertake this form of education.

The value of contact made with all groups within the community should not be underestimated since the majority of the members and, in particular, the women's groups have some influence on family health matters.

Whether we like it or not, the fact remains that Health Education is one of the few weapons left to use in combating modern health hazards and every member of Health Department staff in contact with the public must recognise the importance of their roles as health educators.

Part-time clerical assistance has been available to the Health Education Officer for the last nine months and will be increased to full-time in the next twelve months.

A summary of the work undertaken by the Health Education Officer is given below:

#### Lectures and Talks

Secondary Schoolchildren		H150	 27
Parent Teachers Associations	3		 7
Youth Clubs			 5
Parents' Groups (Parentcraft	Educa	tion)	 7
Women's Groups			 3
Student Groups			 1
Army Cadets			 1
Nursing Staff			 6
Head Teachers' Association			 2
Adult Smoking Groups			 6
Others			 9
			74

Of these, 34 were evening meetings.

Films for Ante-Natal Clinics Groups were shown on 26 occasions.

# **In-Service Training**

Two members of the Health Education Council gave a 2½ day course at St. Austell in July. The programme included Drugs Dependence, Education for Parenthood and a half-day's course for Home Helps on Nutrition for the Elderly.

Invitations were extended to other departments and a total of 216 attended, made up of the following groups:

Nursing Staff		 	66
Health Area Medical Office	rs	 	2
School Medical Officers		 	2
Teaching Staff		 	52
Children's Department Staf	f	 	10
Probation Officers		 	3
Home Helps and Welfare St	aff	 	81
annecodal disease the contract of			216

# **Anti-Smoking Courses**

Two 3-night courses were held, at Truro and Newquay. A total of 189 people attended.

#### Health Education in Schools

In addition to the talks to children of 11-18, the Health Education Officer continued to advise and support teachers with their programmes on Health Education, particularly in senior schools, where the emphasis is on education in Personal Relationships, Venereal Disease, Nutrition and Smoking and Health.

Several Parent Teacher Associations invited the Health Education Officer to their discussions on the setting up of programmes on Responsibility in Personal Relationships and the increased interest of parents is most welcome.

The number of Primary Schools starting their own programmes on Human Biology and Sex Education is increasing, again with parental support and co-operation.

#### Parentcraft Education

This continued to be carried out by the Health Visitors, and Midwives. 9 Health Visitors have also been involved in Hygiene and Parentcraft Teaching in Secondary Schools and in one school 12 girls were prepared for the Examination in Child Care of the National Association of Maternal and Child Welfare.

#### Display and Exhibition Material

Posters are issued monthly and other material, when requested, to Health Area Nursing staff. A start has been made on the building up of display material and the first small exhibit on Smoking and Health was in use at the Newquay Anti-Smoking Course and has since been on loan to two Secondary Schools Other small exhibitions are in the process of construction on the subjects of Nutrition and Firework Safety.

The Health Department again put on an exhibition in the County Council Stand at the Royal Cornwall Show in June. The theme was the work of the Mental Health and Welfare Service. 4 trainees from the Adult Training Centes at St. Austell and Redruth operated the machines used in their work - a wood lathe and an electric welding machine. Also on display was a collection of components assembled on contract, by the trainees, for firms in the County.

#### Audio Visual Aids Course

A course on the use of the 16 m.m. and 35 m.m. projectors was started in November in two areas in the County. A total of 10 Health Visitors and Midwives took part and when more visual aid equipment becomes available for use in the areas next year, it should enable them to have access to more effective teaching aids.

#### DOMESTIC HELP SERVICE

During the year the Women's Royal Voluntary Service continued to carry out the day-to-day organisation and supervision of the Service. One of the longest-

serving members of the W.R.V.S. retired but she is continuing to assist her successor for the time being, and so the Service has not been disrupted in any way. One voluntary Organiser died and has been replaced by another voluntary Organiser. From this it will be seen that a great deal of effort is put into the Service by the W.R.V.S. and thanks are due to Lady Carew Pole and the members. It is envisaged that the Home Aid (Good Neighbour) Scheme will be absorbed into the Home Help Service in 1970. Many of the W.R.V.S. Organisers already run both the Home Help and Home Aid Services.

During the year the Night Sitter Service helped 15 households and the Neighbourly Help Service assisted 53.

The County Home Help Organiser attended a week-end school at Swansea in September. Speakers covered a wide range of subjects and the course proved to be very helpful and instructive.

Women suffering from toxaemia of pregnancy and other conditions requiring complete bed-rest prior to confinement continued to have free Home Help. This free Service has been given to mothers expecting twins.

The following table shows the present position:-

	Home	Help Em	ployed		Cases	Helped		K
Area	Whole Time	Part Time	Spare Time	Chronic Sick & T.B.	Under Mentally Disordered	65 Mater- nity	Others	Over 65
1	1	8	79	27	7	12	19	308
2	-	11	55	29	4	16	23	249
3	8	9	74	40	8	. 24	22	334
4	1929	5	59	27	2	8	21	211
5	-		28	4	OUR HIMAGO	2	8	86
6	To Take	3	43	10	uni è solution	4	8	103
7	233 340	2	81	31	1	13	18	170
Resident	1	1111200	1	-	1	15	4	-
Totals	10	38	420	168	23	94	123	1,461
lotais		468		1		1,869	100	

The following table shows the work over the past five years:-

Maria III	dend a bus, no	and and add	Under	65	HOPE TO	CONTRACTOR	100
Year	Equivalent No. of Whole Time Home Helps	Chronic Sick & T.B.	Mentally Disordered	Mater- nity	Others	Over 65	Total
1965	147.6	108	5	150	109	1,099	1,471
1966	146.0	101	5	140	123	1,107	1,476
1967	156.6	111	10	98	102	1,235	1,556
1968	158.9	138	15	78	103	1,437	1,771
1969	163.0	168	23	94	123	1,461	1,869

#### MENTAL HEALTH AND WELFARE SERVICES

#### 1. Administration

1969 has been the first full year of operation of the combined Mental Health and Welfare Services, and a clearer pattern of the unified approach has emerged. Whilst staffing shortages and changes have given rise to some problems, both at Headquarters and at Field Level, the general standard of services to the community has been improved.

#### (a) Committees

A Welfare Sub-Committee of the Health Committee is responsible for the combined service, and quarterly meetings are held. Special Sub-Committees are formed from time to time to consider specific aspects of the work, and the Chairman is readily available for discussion in matters of urgency.

# (b) (i) Staff

The professional staff structure at Headquarters has been increased during the year by the appointment of a Supervisor of Residential Homes. The establishment for this post became essential with 19 Homes for the Elderly and 4 Hostels for the Mentally disordered. In addition, the duties of the Supervisor cover the regular inspection of 43 privately run Homes and the in-service training of staff. Present Headquarters staff is as follows:-

Principal Mental Health and Welfare	Officer	 1
Deputy Principal Mental Health and	Welfare Officer	 1
Assistant Principal Mental Health and	Welfare Officers	 2
Senior Social Worker for the Deaf	,	 1
Supervisor of Training Services		 1
Supervisor of Residential Homes		 1

The Social Work Staff, deployed in five area teams thoughout the County, are settling down into viable units of generic case work. These teams are very much on the lines of the recommendation of the Seebohm Report, and a further great advantage is that each team works in the same clinical area as a Consultant Psychiatrist. This is a tremendous advantage as far as Mental Health aspects are concerned, and bridges Hospital and Local Authority services at client level. Social Work staff is as set out below:-

Senior Mental Health and We	lfare Off	icers	 5
Mental Health and Welfare O	fficers		 28
Social Workers for the Blind			 6
Family Welfare Workers			 17

The amalgamation of the Mental Health and Welfare Services has provided a very useful pre-Seebohm exercise. A great deal of trouble was taken over organisation of staffing and, in general, the social work teams were formed with a minimum of difficulty. The essential pre-requisite of a generic approach - accommodating staff under one roof - was also achieved, both centrally and in the areas. Without this very basic element, and one which can be surprisingly difficult to attain, combined services can exist on paper only.

# (ii) Training of Staff

The policy of secondment of staff to undertake training for the Certificate in Social Work has continued. During the year, one member of the staff returned to duty having obtained the qualification and two commenced training. Two further members have been promised places in September, 1970. The balance sheet, to date, shows that 9 of our Social Work staff have been seconded, 7 have returned qualified and 2 are still under training. Of the total of 9, only 1 has left the employment of the County Council, mainly due to a policy of planned promotion within our own service. To offset this, we have recruited 3 staff from outside the County, who were already in possession of the Certificate in Social Work at the time of appointment.

#### MENTAL HEALTH

# 1. (a) Co-ordination with Regional Hospital Board and Hospital Management Committees

Each year the scope for liaison between the Local Authority and the Hospital Services widens. It is not only in the field of mental disorder that the close co-operation, which has developed over many years, is contributing to a more effective use of existing sources. The services for the elderly and the physically handicapped, too, are constantly under review at regular discussions held at all levels, between local authority and the Management Committees

A social worker from each of the five mental health and welfare teams continues to spend a day a week in the social work department of St. Lawrence's Hospital. Bi-monthly conferences, between the medical staff, Chief Nursing Officer of St. Lawrence's Hospital and all the Local Authority Mental Health and Welfare Officers, are still proving to be a most valuable forum for frank discussion on future joint policies and clinical provision.

Clinics for the mentally handicapped are held fortnightly in Cornwall by a Consultant Psychiatrist of the Royal Western Counties Hospital who works closely with the Mental Health and Welfare Officers involved with the families. On a monthly basis a psychiatric social worker on the staff of the County Council spends two days at The Royal Western Counties Hospital, Starcross, attending case discussions, visiting Cornish patients, and participating in the group therapy sessions at the Prentice Villa, Langdon Hospital. This personal contact helps patients to feel they are not totally cut off from their families, even though many of them are over a hundred miles from home.

#### (b) Duties delegated to Voluntary Associations

In Cornwall no statutory duties are delegated to the Voluntary Associations, but the contribution the West and East Cornwall Societies for the Mentally Handicapped make to the provision of additional amenities for the benefit of the mentally handicapped in the community is invaluable. The building of a swimming pool, completed this year, on the site of the Adult Training Centre and Industrial Unit at Redruth, was made possible largely by the generosity of the West Cornwall Society. The trainees at the two centres were able to enjoy this new facility well into October and many who had never ventured into the water before were delighted with the confidence they acquired under the instruction of the Head Instructor of the Centre, who is a fully qualified life saver.

The two Societies bring together parents with common interests and problems, and they help to stimulate interest in the community in the services for the mentally handicapped. A warm welcome is always extended to the wardens of hostels and to the field social workers at the Societies' meetings and social functions.

# 2. Account of work undertaken in the Community

# (a) Prevention of Mental Illness, Care and After-care

The hypothesis that the annual admission rate of Cornish patients to psychiatric hospitals, excluding the Charles Andrew Clinic, is levelling off at around 1,450 to 1,500 is supported by the 1969 figures. The admission rate of psycho-geriatric patients to the Charles Andrew Clinic, the assessment and treatment unit, is similar to that of last year and the movement of patients in the West Cornwall Clinical Area has been usually satisfactory, so far. In the past year, the Day Centre provision has proved its value in relieving the home situation for

relatives of the confused elderly. There is evidence, however, that the County Council will need more psycho-geriatric long stay accommodation in the immediate future.

The Psychiatric Social Clubs at Falmouth and Penzance functioned well for another year. The Club at Redruth has been wound up pro tem due to lack of members. All former members have been integrated into other local voluntary organisations such as the Women's Institute, etc., or have been transferred to the Falmouth Club. A watching brief is being kept on the needs of the Redruth area and if there is a demand again the Club will be reconstituted. However, at the present time, the social workers with the help of the voluntary organisations, are able to continue channelling patients into existing social organisations.

#### (b) Initial proceedings by Mental Welfare Officers

In 1969 the Mental Welfare Officers admitted 1,056 patients to psychiatric hospitals, 725 informally.

The case loads of the Mental Health and Welfare Officers are heavy, and every social worker is working at full capacity to meet the needs of an evolving service. In addition to coping with mental health problems on a 24 hour basis the duty officers deal with homelessness and any other family crises. The staff deserve full credit for the magnificent way in which they maintain this service which, all too often, must interfere considerably with their family lives.

# (c) The Sub-normal and Severely Sub-normal

# (i) Ascertainment and Community Care during the year

20 children were reported as unsuitable for education at School and 24 school leavers were referred for supervision and guidance. New referrals of mentally handicapped persons from General Practitioners, the Children's Department and the Youth Employment Service numbered 77. 889 mentally handicapped and severely mentally handicapped children and adults were receiving voluntary supervision from the Mental Health and Welfare Officers.

Since 1967, 97 cases have been seen by the social worker responsible for the counselling scheme for the parents of pre-school age mentally handicapped children. The majority of the referrals have come through the hospital paediatric services. Six children have been absorbed into ordinary schools at the appropriate age, 35 are attending special schools (Junior Training Centres) and 24 have entered hospital or have left the County. Currently, 32 families are receiving support and guidance from the social worker. The value of this service is evident in the improvement in the mental and physical health of the young parents who no longer feel socially isolated and who benefit from early contact with the teachers of the schools (Junior Training Centres) and from meeting other parents facing similar difficulties.

For the second year in succession there has been a slight increase in the number of patients on the waiting list for hospital but, through the co-operation of the Consultants at the Royal Western Counties Hospital, all emergency cases have been accommodated promptly. Building will commence on a new 30 bedded Hospital Unit for Children at St. Blazey in March 1970, and the opening date is scheduled for March 1971. This unit is situated in close proximity to the Local Authority School (Junior Training Centre) and Hostel, thus providing the Kushlick concept of total community care for this part of the County.

#### (ii) Training

The number of children and adults receiving training at the end of the year in the schools (Junior Training Centres) and Adult Training Centres was 330. The large increase in the number of mentally handicapped children attending the Curnow School (Junior Training Centre) is the result of the completion of the adaptations of that building following the transfer of the adult trainees to the new Adult Training Centre opened earlier in the year. The Special Care Unit with provision for 15 children has already shown that much can be done to help very severely handicapped children make limited, but nevertheless noticeable, progress. With this type of provision it must be noted that its prime value is in the relief it brings to the parents. In the east of the County the Doubletrees School will be extended next year by the addition of two classrooms.

The new Adult Training Centre at Redruth and the Blantyre Centre at St. Austell continue to operate with a reasonable balance between industrial projects and the social and educational aspects of training.

Adjoining the Adult Training Centre is the new Industrial Unit, opened in the last few weeks of 1968. It caters for high grade mentally handicapped and mildly mentally ill men and women. Some physically handicapped have been integrated, also. With a potential capacity of 100 trainees and with the co-operation of local industry it has been possible to develop a wide variety of industrial projects. At the end of the year, 36 men and women, in the age range 16 to 50 years, were attending on a daily basis and a further 14 were resident in the 25 bedded hostel which supports the Unit. Emphasis is on the re-habilitation to a working environment and so far 16 trainees have been placed successfully in open employment out of a total of 70. Payment is on an incentive bonus basis. A committee, representative of and elected by the trainees, meets the Manager monthly to discuss matters relating to the workshop. Since September two Mental Health and Welfare Officers have each led a weekly discussion group with eight trainees. Attendance at the groups has been on a voluntary basis and the further development of groups has been restricted only by the pressure of other work on the social workers' time. There appears to be little doubt that the younger trainees, particularly, welcome the opportunity of discussing their fears and emotional difficulties in the security of a small group.

The success of this unit in the first year is attributed firstly to the staff who have adapted the work to the needs of individual trainees and secondly to the selection procedure which has been adopted. All new applicants are interviewed by the Manager of the Unit and, if hostel accommodation is required, by the Warden of the Hostel. The cases are then discussed at a monthly conference attended by the staff of the Unit, the social worker presenting the applicant, the Principal Mental Health and Welfare Officer and the Consultant Psychiatrist who advises the County Council in psychiatric matters.

Many of the initial teething troubles of this new venture have now been overcome and we look forward to extending further the choice of work and to increasing the number of trainees.

#### (iii) Hostels

Essentially, the Hostels cater for the children and adults who are unable to travel to the School (Junior Training Centre) and Centre on a daily basis owing to distance. They also provide a home for those for whom no alternative exists. However, the contribution of the Hostels is much more than just providing a home for the residents. The training programme can be carried over into Hostel life, reinforcing the skills and attitudes learned in the School and in the Centre.

This year the Health Committee decided that the three residential hostels, which support the School (Junior Training Centre) at St. Blazey and the Adult Training Centre in St. Austell, should remain open throughout the year. Most of the residents went home during the holidays as usual. Because of this it was possible to use the Hostels for short term temporary care for children and adults from the community. This gave relief to parents and also provided a valuable period of assessment particularly for the younger children. It is hoped to make use of this facility still further in the future by bringing from Hospital, for a one or two week period, children and adults whose relatives are unable to accommodate them at home but who can manage to visit them and take them out for trips.

The new Residential Hostel, which supports the Industrial Unit, at Redruth, has had a most successful first year. Fourteen residents attend the Industrial Unit and in addition one young man and five young women live in the hostel and are in open employment. During the year four men have obtained work in local industry and lodgings in the area. They continue to join in the social life of the Hostel. Out of five young women, who have left the Hostel, **tw**o have found suitable employment in their own home towns, two have returned home to help care for parents and one has married.

In the Hostel the residents are responsible for keeping their own rooms neat and tidy and for helping with the general chores at weekends. Once a month, with the Warden, they discuss any problems which arise and plan future activities. The social activities are numerous and there is keen competition in the P.E. sessions held

one evening a week in the well equipped gymnasium at the Adult Training Centre. The new swimming pool provided a wonderful outlet for the energies of the residents in the beautiful late summer weather. Liaison with the community is excellent. For example, the young residents raised £25 on their stall at the Summer Fete of the Guild of Friends of the Home for the elderly confused in Redruth. On special occasions, such as birthdays, all the Hostel residents go out to a local restaurant to a supper dance laid on at very favourable prices by the proprietors. The young people have gained considerable confidence from participating in these functions.

In our Hostels we are most fortunate in having Wardens who are enthusiastic and imaginative in their work with the mentally handicapped and the mentally ill and very close liaison exists between the residential staff and the field staff.

Mental Health Statistics at 31st December, 1969

(The figures in brackets indicate the numbers at 31.12.1968)

A. Hospital Care

(a) Mental Illness

(i) Admissions during the year by Mental Welfare Officers

Name of Hosnital	Informal	nal F	Section 25 M F	25 F	Section 29 M F	129 F	Section 26 M F	26 F	Court Cases M F	ases F	Total	F
ence's	266 (276)	456 (505)	(9)	52 (43)	92 (105)	153 (134)	(3)	2 (6)	(1)	- <u>T</u>	384 (394)	664 (688)
Moorhaven Hospital, Devon	=======================================	1	- ①	1 ①	1 ①	- ①	1 ①	- 1	- 1	13	(3)	- I
Charles Andrews Clinic, Barncoose Hospital, Redruth	1 (8)	(8)	3	(2)	(3)	2 (4)	Ξ			of some spin	(13)	4 (14)
	267 (285)	267 458 (285) (513)	21 (10)	52 (45)	94 (108)	155 (138)	4 (4)	2 (6)	2 (1)	- ①	388 (408)	(702

Total admissions during 1969 by Mental Welfare Officers: 1,056 (1,110)

(ii) Admissions of Cornish patients during the year from all sources

Name of Hospital	Informal	nal F	Section 25 M F	25 F	Section 29 M F	1 29 F	Section 26 M F	26 F	Court Cases M F	ases	Total M	tal F
Ct Laurence's	407	869	20	cs	94	153	4	6		-	528	906
	(407)	(749)	6	(43)	(105)	(138)	(5)	(8)	(2)	1	(528)	(938)
Moorhaven	2	3	1	1	1	1	1	1	1	3	3	3
Hospital, Devon	(5)	(1)		<u>-</u>	(-)	<u> </u>			1	1	(5)	(3)
Charles Andrews	84	175	-		2	4	1	-	1	-	98	181
Clinic, Barncoose(111) Hospital, Redruth	(111) h	(173)	=	(2)	(3)	(4)	(1)	1		1	(116)	(179)
	493	876	21	52	96	157	4	3	3	2	617	1,090
	(523)	(923)	(10)	(45)	(108)	(142)	(9)	(8)	(2)	(-)	(649)	(1,118)

Total admissions during 1969 of Cornish patients: 1,707 (1,767)

(iii) Admissions of Cornish Patients aged 65 years and over to St. Lawrence's Hospital during the year

								To the second	
Informal M F	Section 25 M F	Section 29 M F	Section 26 M F	26 F	Court	Court Cases M F		M	T
107 180 (97) (198)	5 13 (1) (18)	20 28 (20) (29)	(3)	1 (2)	1 1	- (1)		132 (119)	222 (247)
		The December of the Paris of th	1969		1				
(iv) Number of Name of Hospital	(iv) Number of Cornish patients in Hospitals at 31st December, 1707 e of Hospital	ospitals at 31st December	061, 1707			M	(H		Total
St. Lawrence's Hospital, Bodmin	spital, Bodmin					431 (455)	(689)		1,108
Moorhaven Hospital, Devon	tal, Devon					3 (4)	10 (14)		13 (18)
Charles Andrews	Charles Andrews Clinic, Barncoose Hospital, Redruth	pital, Redruth				4 (9)	25 (16)		29 (25)

1,150 (1,157)

712 (689)

438 (468)

(b) Subnormality and severe subnormality

(i) Admissions during the year

Name of Hospital	Informal M	nal F	Sections 25 & 29 M F	5 & 29 F	Section	Section 26 M F	Court Cases M F	Cases	Total M	al F
Royal Western Counties Hospital Group	6	6	-	ı	-	1	13	7	23	5
Hospitals for the Sub-Normal in Cornwall	7	-	1	-	1	1	P	-	7	7
Other Hospitals and Approved Homes	-	-	-	10	T	1	T and	1	-	-
T TO THE OWNER OF THE OWNER OWN	12 (18)	5 (14)	1 3	1-3	13	13	13	25	26	8

Total admissions during 1969: 34 (40) (In addition to these figures 14 males and 6 females were admitted for temporary care)

# (ii) Patients in Hospitals (including patients on leave)

Name of Hospital	M	F	Total
Royal Western Counties Hospital Group	173	94	267
Hospitals for Sub-normal in Cornwall	82	98	180
Other Hospitals	51	31	82
	306	223	529
	(317)	(232)	(549)

# (iii) Patients awaiting admission to Hospitals

		Classification	M	F	Total
(1)	Over	the age of 16			
	(a)	Cot and Chair cases	4-1	_	-
	(b)	Ambulant Low Grade cases	1	-	1
	(c)	Medium Grade cases	4	6	10
			(4)	(4)	(8)
	(d)	High Grade cases	- 1	1	1
			(-)	(1)	(1)
(2)	Und	er the age of 16			
	(a)	Cot and Chair cases	9	10	19
	3		(11)	(8)	(19)
	(b)	Ambulant Low Grade cases	7	1	8
			(4)	(1)	(5)
	(c)	Medium Grade cases	3	-	3
			(3)	(1)	(4)
	(d)	High Grade cases	- 1	-	-
	100	2	24	18	42
			(22)	(15)	(37)

(These figures include 7 males and 8 females of cot and chair grade and 1 male of ambulant low grade under the age of 16 years at present in an Approved Home. Nine of these patients are over age for transfer).

# B. Community Care

(a) Mental Illness

	M	F	Total
Receiving after care visitation	183	357	540
	(167)	(410)	(577)

# (b) Subnormality and severe subnormality

(i) Number of new cases reported during the year.

	How reported	M	F	Total
(1)	Notified by the Education Committee: Education Act, 1944	ASSET AND		ENGIO.
	(a) Children unsuitable for education at school	12 (20)	8 (14)	20 (34)
	(b) School leavers reported informally	12 (8)	12 (15)	24 (23)
(2)	Reported from other sources	48 (39)	29 (17)	77 (56)
10	a integral to par flower	72 (67)	49 (46)	121 (113)
	(ii) Number of patients under care on	31.12.19	69.	
	AND ASSESSMENT OF STREET	М	F	T . 1
	Summary of the summar	IVI	2002	Total
(1)	Under Informal care	485 (453)	404 (382)	889 (835)
(1)	Under Informal care Under Guardianship	485	404	889
		485	404	889 (835)

(iii) Number of patients receiving training at 31.12.1969

	M	F	Total
Curnow Training School, Redruth	43	35	78
Committee   married	(31)	(22)	(53)
Adult Training Centre, Redruth	25	38	63
	(26)	(34)	(60)
Industrial Unit, Redruth:			
(a) Day Trainees	21	15	36
	(4)	(4)	(8)
(b) Hostel Residents	11	3	14
	(8)	(-)	(8)
Blantyre Training Centre, St. Austell:			
(a) Day Trainees	17	12	29
	(18)	(11)	(29)
(b) Hostel Residents	19	17	36
	(17)	(18)	(35)
Doubletrees Training School, Penarwyn, St.	Blazey:		
(a) Day Trainees	23	20	43
	(19)	(19)	(38)
(b) Hostel Residents	12	16	28
1	(14)	(16)	(30)
Home Teaching cases	-	-	-
Training Centres run by other Authorities	2	1	3
	173	157	330
	(137)	(124)	(261)

<sup>\*</sup>In addition, 1 man and 5 women live in the Redruth Hostel and go out to daily employment.

#### WELFARE SERVICES

#### The Aged and Infirm

# 1. Accommodation for the Elderly

Although no new Homes for the Elderly have been completed during 1969 the new Homes at Pengover Road, Liskeard and on the site of the old Cattle Market at Callington are now nearing completion. Most of the equipment for these Homes has been ordered and it is expected that the residents in the Part III Block at Lamellion Hospital, Liskeard will be happily installed in these new Homes during the Spring of 1970. The additional places provided will help to reduce, at least temporarily, the large Waiting List in the east of the County.

No new building has commenced during 1969 but the new Home at Trengrouse Way, Helston is about to begin. The new Home at Longstone, Carbis Bay should also commence building in the Spring of 1970. Planning is also going ahead for the proposed new Home at Weeth, Camborne, where building should commence early in 1971. When these Homes have been completed they should go far to meet the ever-growing need for such accommodation in West Cornwall.

The Committee has approved an increase in the staffing ratio in Homes for the Elderly during the years 1969/70 and 1970/71. When this has been fully implemented it should go all or most of the way to relieve the heavy burden which our existing staff have borne in coping with the increasingly frail type of resident now being admitted to our Homes.

The number of elderly people applying for short stay accommodation in 1969 exceeded 150 and, of these, 140 were found suitable vacancies in County Council Homes. Unfortunately it was not possible to help the remainder, mainly because of the excessive demand at Bank Holiday periods.

The 5 Voluntary Homes in the County are still proving a most useful complement to the Homes provided by the County Council.

Return of residents on 31st December, 1969.

Establishment	Men	Women	Total
Lamellion Hospital, Liskeard	29	29	58
County Council Homes		1000	operation
St. Michael's, Penzance	12	26	38
Carew House, Hayle	20	17	37
Headlands, Carbis Bay	, 7	26	33
Cliffe House, Falmouth	21	22	43
Blackwood House, Camborne	19	41	60
The Green, Redruth	8	39	47
Endsleigh, Newquay	27	2 11 22 2 11 11	27
Penberthy House, Newquay	11	33	44
Woodland House, St. Austell	17	31	48
Athelstan House, Bodmin	13	35	48
St. Breock, Wadebridge	14	34	48
Polvellan, Looe	9	24	33
St. Anne's, Saltash	10	28	38

Establishment	Men	Women	Total
County Council Homes (cont.)			
	22		22
St. Hilary, Bude	22	11	33
Miller House, Launceston	12	35	47
The Epiphany Home, St. Agnes	23	22	45
Mountford House, Truro	10	38	48
	255	462	717
Voluntary Homes	100 201 221		
Bude Eventide Home	1	12	13
Caprera, St. Austell	7	17	24
Liskeard Eventide Home		14	14
Perran Bay Hotel, Perranporth	8	25	33
Rosewin Home, Truro	-	13	13
Langholme, Falmouth	2	13	2
Belvedere Home, Kent	3	AL PHINADA	3
Terrill House, Clifton, Bristol		The same of	1
Singholm Home, Walton-on-Naze	Tanamili 20	1	1
Southall-Norwood Eventide Home		1	1
Salvation Army Home, Dunmore	1	British Service	1
Greenmeadows, Freshwater, Isle of Wight	THE REAL PROPERTY.	1	1
Welch House, Bermondsey		1	1
Ridgemead House, Egham	COM INTE	1	1
Moor House, Staines	-	1	1
Nazareth House, Cheltenham	1	_	1
			Marier A
Blind Homes			Mission I
Malabar Home for the Blind, Truro	2	27	29
Torr Home for the Blind, Plymouth	min Mari	5	5
The same of the sa	25	120	145
Epileptic Colonies	0 1	comist see	Pont -
760	1	2	2
Chalfont, Buckinghamshire David Lewis, Cheshire	1	dun Z	1
Maghull Homes, Liverpool	1	the party of	1
Magnuti Homes, Elverpoor	1	THE NAME OF	Handley .
Special Homes for the Handicapped			STORES OF THE STORES
Ponds Home, Beaconsfield	110- 6	2	2
St. Teresa's, Penzance	13	14	27
Cann House, Tamerton Foliot	1	1	2
Astor Hall, Plymouth	1	1	2
			14

Establishment	Men	Women	Total
Special Homes for the Handicapped (cont.)			
Rockleaze, Yelverton	Manage .	2	2
Elphick House, Bristol	1	- Mount	1
Court Grange, Newton Abbot	1	- hadde	1
British Legion, Maidstone	-	1	1
Horder Centres for Arthritics	-	1	1
Gladys Holman House, Camborne	2	1	3
Clivedon, Plymouth	0.700	1	1
Athol House, Upper Norwood	1	-auto	1
	22	27	49
Homes provided by other authorities		1100	
Monmouth C.C.	1	or marked and	1
Devon C.C.	2	- Distill	2
Plymouth C.B.C.	2	- 080	2
Northumberland C.C.	-	1 Indiana	1
Bedfordshire C.C.	hin-oth	1 took	1
Ealing L.B.C.	-	1999	1
Surrey C.C.	_	2	2
Wiltshire C.C.	1	_	1
	6	5	11
TOTAL	337	643	980
Less Chargeable to other authorities	4	11	15
TOTAL	333	632	965

Age groups of persons in Residential accommodation in the County on 31st December:

Age Group	Males	Females	Total
Under 30	4	3	7
30-49	6 :	12	18
50-64	27	47	74
Total Under 65	37	62	99
65-74	76	105	181
75-84	156	263	419
85 and over	62	208	270
Total Over 65	294	576	870
Total All Ages	331	638	969

Major Disabilities of Persons in Residential Accommodation in the County on 31st December.

#### 1. Persons under 65 years of age

Major	Disability	Total
	Blind	7
	Deaf	3
	Epileptic	6
	Physically Handicapped	46
	Mentally Sub-normal	12
	Others	13
		99

#### 2. Persons 65 years and over

92
35
9
126
608
870

2. Private and Voluntary Homes registered with the County Council, under Section 37 of the National Assistance Act, 1948.

As at 31st December, 1969, the numbers were:-

	Voluntary	Private	Total
No. of Homes	9	34	43
No. of Residents	244	312	556

# 3. Special Housing for Old People

As it will be observed from the following figures, the Sheltered Housing Scheme is continuing to expand and it is pleasing to note that the more recent schemes, generally speaking, are being built to improved standards which provide a much more convenient type of dwelling with additional amenities to enhance the comfort of the elderly persons for whom they are intended.

The following list of District Councils and Voluntary Bodies shows the number of units approved by the County Council:

Housing Authority	No. of Units
West Penwith R.D.C.	225
Penzance Borough	24
St. Ives Borough	71
West Cornwall Housing Association	17
Abbeyfield (St. Ives) Society	7
St. Just U.D.C.	18
Camborne-Redruth U.D.C.	42
Kerrier R.D.C.	44
Abbeyfield (Redruth) Society	6
Truro City	235
Truro R.D.C.	214
Falmouth Borough	18
Penryn Borough	11
Abbeyfield (Falmouth) Society	13
St. Austell with Fowey Borough	137
St. Austell R.D.C.	107
Newquay U.D.C.	83
Wadebridge and Padstow R.D.C.	86
Launceston Borough	43
Launceston R.D.C.	46
Camelford R.D.C.	30
Bude-Stratton U.D.C.	19
Liskeard Borough	108
Saltash Borough	72
Torpoint U.D.C.	35
Liskeard R.D.C.	10
Henry Poad Trustees (Menheniot)	12
	1,733

The total of 1,733 approved units is again an increase over the previous years, viz:

1966		1,069
1967		1,253
1968	THE REAL PROPERTY.	1,451

# Temporary Accommodation and Homeless Families

Homelessness continues to present its problems to the Social Workers, particularly at certain times of the year when families who have taken "winter lets" have to make way for holidaymakers. Due to the strenuous efforts on the

part of the Field Staff, many of these are helped successfully to find alternative accommodation, so that the Council's Temporary Accommodation can be utilized for those families who need some positive form of rehabilitation prior to rehousing.

The Welfare Sub-Committee has recently considered the problems connected with Homelessness and a new approach to District Councils is to be made. A series of local conferences are to be held in early 1970, when specific proposals for dealing with Homelessness will be made. During 1969, it has proved possible to work much more closely with some District Councils, and as a result twelve families were admitted to Temporary Accommodation during the year and nineteen families discharged. At the end of the year there were twenty-seven families consisting of twenty-five men, twenty-nine women and ninety-seven children in accommodation provided by the County Council.

4. Meals on Wheels centres were opened in Liskeard, Calstock, Millbrook and Callington, during the year.

As the result of these additional centres and the re-opening of those centres temporarily closed in 1968, the total number of meals served rose in 1969 to 41,706. (35,311 in 1968).

A total number of 24 centres were operating at the end of the year.

5. Chiropody continues to be provided in the Council's Residential Homes on the basis of one or two sessions a month. During the year 789 people received 4,026 treatments.

Old People's Welfare Committees continue to receive grants from the Council where the service of a qualified Chiropodist is provided. During the year 659 people received 2,249 treatments under this scheme.

# 6. Old People's Clubs

A recent survey carried out by the Cornwall Old People's Welfare Committee, shows that there are a total of 69 Old People's Clubs in the County of which 45 are run by the W.R.V.S. and 9 run by the Red Cross.

# Holidays for Children from Families with Special Difficulties

This scheme has been in operation since 1966, and the cost is met entirely from voluntary contributions. Many Rotary Clubs, some private individuals and other organisations have contributed during the year, enabling us to pay £2.10s.0d per week to the holiday foster-parents.

The holidays are normally of one week's duration during the School Summer Holidays, but several foster-parents have maintained contact with the children throughout the year, having them for occasional weekends. 63 children were able to have a holiday in the Summer of 1969: the majority of these children are members of families supported by Family Welfare Workers. Many foster-parents take the same children year by year, and maintain a contact with them at Christmas and birthdays etc. We think this is a most worthwhile scheme of great benefit to the children.

#### **Handicapped Persons**

During the year we have continued to help handicapped people by way of adaptations to homes and the loan of equipment. There seems to be an increasing demand for aids on loan, particularly smaller items such as commodes, walking frames, etc.

The County Council has no home for young physically handicapped people, but elderly frail ambulant people of both sexes are catered for at Blackwood House, Camborne. Holiday periods have been arranged at the St. Teresa's Cheshire Home at Marazion and also at the Homes run by the Plymouth and District Disabled Fellowship, to give patients' families some respite. I am grateful to the staff of these Homes for their continued help and co-ordination.

The County Council took over the Domiciliary Occupational Therapy Service on the 1st April, 1968. At the end of 1969 there were one full-time and two part-time Occupational Therapists on the staff and it is obvious that an adequate service cannot be provided until more staff are available. The hope and aim is to have one Occupational Therapist attached to each of the five Social Work teams, but the present limit on the rate of growth, makes it difficult to foresee when the money will be available to do this.

I give below details of the register of physically handicapped people as at the 31st December.

		Males			Females		
Classificati	on	16- 29	30- 49	Over 50	16- 29	30- 49	Over 50
A/E (1)	Amputation	2	5	51	0 200	2	21
F (2)	Arthritis and rheumatism	2	6	108	1	7	336
G (3)	Congenital Malformations and deformities	6	6	4	3	6	11
H/L (4)	Diseases of the digestive and genito-urinary system; of the heart or circulatory system; of the respiratory system; (other than T.B.); and of the skin	8	7	115	7	9	43
Q/T (5)	Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than T.B.) of the upper and lower limbs and of the spine	11	15	68	6	14	72
V (6)	Organic nervous diseases — epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica etc.	27	59	171	22	56	215
U/W (7)	Neuroses, psychoses and other nervous and mental disorders not included in		T land			on her	
V (0)	V(6)	2	1	12	origi.	1	6
X (8) Y (9)	Tuberculosis (non-	100	6	9	100 101	1	36
1 (9)	respiratory)	2	1	5	_	-	3
Z (10)	Diseases and injuries not specified above	1	-	19	3		34
		61	106	562	42	96	741
			729	THE REAL PROPERTY.		879	

# REPORT OF THE CORNWALL ASSOCIATION FOR THE CARE OF THE DISABLED

This report deals briefly with the Association's main functions.

#### The Occupational Therapy Service

This service was transferred from the Association to the County Council in April 1968 since when the Association has acted as agents for the County Council in maintaining records of visits, maintaining stocks of raw materials for the Occupational Therapists and selling the finished craftwork.

#### Social Clubs

This side of the Association's work continues to expand. Seven clubs are now holding regular monthly meetings and together providing opportunities for social activities for some 200 disabled people, many of whom are homebound for the rest of the month. Transport is one of the big problems and whilst acknowledging with gratitude the help given by voluntary drivers, many more are urgently needed.

#### Holidays

As in other years two simultaneous holiday schemes were organised in 1969. Thirty-six disabled men and women had a week's holiday at Falmouth in the spring while twenty-two more seriously disabled people spent a week at the special disabled persons holiday camp at Westward Ho. It would have been impossible to arrange this but for the co-operation of many organisations and voluntary helpers. The Welfare Department assisted financially.

# Workshop for the Disabled

The hope expressed in earlier reports that a new and larger workshop would take the place of the present inadequate building whilst not fulfilled in 1969 will reach fruition in 1970. Work was begun in August and it is anticipated that it will be completed by midsummer. This venture is being financed with substantial grants from the Ministry of Employment and Productivity and the County Council without which it would have been beyond the resources of the Association. It will provide employment in sheltered conditions for additional disabled persons while retaining our traditional output of surgical footwear and appliances with the existing staff. Meanwhile the output in the existing workshop has been maintained despite sickness and other staffing difficulties.

#### BLIND AND PARTIALLY SIGHTED PERSONS

The total number of blind persons on the register at 31st December, 1969, was 977:

New admissions during the year		
Transfers of registered blind people from other areas	17	

Deaths	119
Transfers of registered blind people to other areas	12
Decertifications due to improved visual acuity	3

# Home Teaching and Social Work Service

The Staff at 31st December, 1969, consisted of five qualified Social Workers for the Blind. There is one vacancy.

# Register of Blind Persons

Age Group	Males	Females	Total
0	0	0	0
1	0	0	0
2	1	1	2
3	1	0	1
4	1	0	1
	1	0	10 21 24 0
5-10	4	4	8
11-13	3	3	6
16-20	6	2	8
21-29	12	4	16
30-39	17	13	30
40-49	20	22	42
50-59	40	40	80
60-64	25	34	59
65-69	36	53	89
70-79	90	172	262
80-84	48	99	147
85-89	35	109	144
90 and over	18	64	82
	357	620	977

The total number of partially-sighted persons on the register at 31st December, 1969 was 261:

New admissions during the year	58
Transfers into the County from other areas	7
Deaths	28
Transfers to the Blind Register and Decertifications	
due to improved visual acuity	17
Transfers out of the County to other areas	8

# Register of Partially-Sighted Persons

Age Group	Males	Females	Total
0- 4	0	0	0
5-15	9	8	17
16-20	5	2	7
21-49	14	20	34
50-64	9	16	25
65 and over	50	128	178
	87	174	261

Of the new admissions to the Blind Register, 26 were below the age of 65, and 94 were over that age. Of the new admissions to the Partially-Sighted Register, 14 were below the age of 65, and 44 were over that age.

Education, Training and Employment of Blind Persons, aged 16 and upwards

Males	Females	Total
2	0	2
1	0	1
2	0	2
5	0	5
tions	nagini 2000 att 20	Derived Townson
3	0	3
9	0	9
tions 21	3	24
33	3	36
	2 1 2 5 tions 3 9	2 0  1 0 2 0  5 0  tions 3 0 9 0 tions 21 3

Of those employed in Workshops for the Blind, one is a machine tool operator, one is a basket maker and one is a production process worker. The Home Workers' Scheme consists of one music teacher, one braille copyist, two basket makers, one chair seater, and four piano tuners. In open employment there are four masseurs, one music teacher, one industrial executive, one writer and one architect, one typist, two telephone operators, one salesman, three farmers, three engaged in animal husbandry and poultry keeping, two machine tool operators, two inspectors, one piano tuner and one miscellaneous worker in local authority employment.

During the year handicraft classes for the blind and partially-sighted have been held in twelve different centres throughout the county. There are two social

centres. Five blind ex-servicemen enjoy the privileges and benefits of St. Dunstan's.

# WELFARE OF THE DEAF

Welfare Services for the Deaf can be divided into three main fields.

- (a) Assisting the deaf to make full use of the Services provided by the government and local authorities for example: National Health Service, Department of Employment and Productivity, Social Security, Rent Rebate Schemes etc.
- (b) Providing special services where deaf people are unable to make use of normal facilities, i.e. Religious services and Social Activities.
- (c) Acting as Advisor and Counsellor to deaf people with personal problems.

During 1969, 608 visits were made to the homes of deaf people. Assistance was given with such problems as:

- (a) Employment
- (b) Housing Accommodation
- (c) Domestic problems
- (d) Legal difficulties
- (e) Interpretation in Hospitals, Surgeries, Law Courts, Employment and Tax Departments, Opticians and other services.

During the year, 24 Religious Services, undenominational in character, and 36 Social Club gatherings have been held.

Perhaps the most important event was the founding of a new Social Club in Truro, where attendances have been very encouraging.

We are indebted to the Truro British Legion Branch for allowing us to use their premises.

Social Clubs are also in being at Camborne and Falmouth.

Outings and parties have been arranged during the year, and out thanks are due to the Cornwall Association for the Deaf and Dumb for their financial aid.

All the deaf people on the register were sent Christmas Greetings, and 78 Pensioners were given £1 each at the same time.

Television sets, T.V. licences, baby alarms, visual door bells, assistance with clothing, rent arrears, purchase and repairs of hearing aids has been given to various deaf people.

Efforts to form Hard of Hearing Clubs have met with no success at all.

One specialist welfare officer cannot possibly cover the whole area of Cornwall. As an inevitable result, the deaf living in isolation cannot be visited as regularly as is necessary until such time as the staff can be increased, and more attention paid to the eastern part of the County.

The numbers on the register at the end of the year were:-

Deaf with Speech	45
Deaf without Speech	88
Hard of Hearing	117

#### FOOD AND DRUG ADMINISTRATION

# Report of Chief Inspector under the Food and Drugs Act, 1955

The County Council is the Food and Drug Authority for the whole of the County and is responsible for administering the part of the Food and Drugs Act and the numerous Regulations made thereunder which protects the purchaser in regard to the purity, quality, composition, labelling and advertising of food and drugs. In practise this is achieved by:-

- (a) the selective sampling of articles of food and medicines offered for sale on retail premises and food ingredients which are used in the manufacture of food.
- (b) The examination of labels to ensure that goods are labelled in accordance with the detailed statutory requirements.
- (c) the examination of labels and advertisements to detect false claims as to the properties of particular foods or medicines.

It is possible to combine work under this heading with other consumer protection work and to deal with the description of products controlled by several Acts and Regulations together, thereby reducing enforcement costs and avoiding unnecessary hindrance to traders and manufacturers. The following variety of samples were obtained during the year:-

# Food and Drugs Sampling and Analysis

568 samples were analysed by the Public Analyst and 2,075 samples were tested locally in the Department's Laboratory. 28 samples were found to be adulterated or otherwise open to objection. The list below indicates the numbers and groups of articles sampled during this year:-

Milk and Milk Products	1,864
Meat and Fish Products	309
Flour Confectionery	54
Sugar Confectionery-	31
Fruit and Vegetable Products	106
Edible Fats	80
Intoxicating Liquors	38
Soft Drinks	82
Drugs	7
Miscellaneous	72
	2,643

The results of sampling show that the general standard of food sold in the County is extremely good and that the numerous legal requirements are being satisfactorily complied with by food manufacturers. Only one prosecution was undertaken regarding sub-standard food and this was in the case of a sample of milk containing 22% of added water. In the case of the other 27 samples reported on adversely by the Public Analyst, the cause of comment was in relation to labelling or descriptive matters and in all cases the manufacturers were advised to amend their labelling.

Whilst the results of routine sampling are satisfactory, the number of justified complaints received from members of the public concerning food containing foreign bodies, or perishable food found to be mouldy has increased again during the year. In the case of mouldy food, this has almost invariably been caused by the retailer failing to rotate his stocks properly. In some cases no stock rotation system existed at all and in others the retailer relied on the deliveryman to examine stocks and up lift out-of-date food for him. This arrangement does not always prove satisfactory and affords little defence to the retailer should he be let down by his supplier. Retailers are advised, therefore, to reconsider their stock rotation arrangements and, if necessary, to apply code marks to perishable foods in their own interest.

# Labelling and Advertising

Considerable Inspector's time was spent on examining labels on food and associated advertising literature. New Regulations which were due to come into force in 1971 have now been revoked in favour of similar but more complicated Regulations which will come into force at the end of 1972. Meanwhile the Department continues to give advice to food manufacturers on the requirements of the food labelling laws with a view to avoiding unnecessary costs to manufacturers at a later date.

#### Milk

Results of sampling of milk sold in the County show the quality to be well up to standard and whilst the legal minimum fat content of ordinary milk is 3.0% the average for the County of samples taken during the year was 3.69%. In

the case of milk from Channel Islands and South Devon herds the average fat content of samples was 4.49% compared with the minimum requirement of 4.0%. The results, I consider are to the credit of the dairy and farming industries.

## Preservatives in Food

54 samples of food were tested during the year for preservatives. Many foods are permitted to contain added preservatives and in the case of some foods the addition of a preservative has to be declared either on the container or brought to the notice of the purchaser at the time of sale. In one instance only were legal requirements contravened.

# Artificial Sweeteners in Food Ban on Use of Cyclamates

After considering new evidence from the United States, the Government banned the use of the artificial sweetener, cyclamate, in food or drink from 1st January, 1970. In doing so the Government explained that there was no evidence that cyclamates had caused any harm to human beings but because of the results of experiments which have been carried out on animals in the United States, it has been decided to ban the use of cyclamates in this country until the results of long-term research are known. Following this announcement by the Government, all food manufacturers in this County were advised of these requirements. Prior to 1st January, 1970 the use of cyclamate was controlled only in soft drinks and ice-cream.

#### Pesticide Residues in Foodstuffs

Sampling of foods for the determination of pesticide residues continued and 23 samples were obtained and examined by the Public Analyst for this purpose. No trace of pesticides was found in any of the samples. Whilst this comparatively small number of samples taken may by itself be of little value, the results when fitted into the pattern of national sampling has some merit and the sampling scheme is being continued.

# Milk Sampling - Milk (Special Designations) Regulations

For the second year the department's milk sampling programme included sampling under these Regulations from roundsmen, shops and other retailers who sell pasteurised, sterilised, ultra-heat treated or untreated milk. The County Medical Officer is responsible for this work and the results of sampling are reported by him. As a matter of practical convenience the arrangements whereby samples are collected for checking for both quality and bacteriological testing on the same occasion affords economy in enforcement costs and avoids unnecessary inconvenience to traders.

# Sampling of Milk at Farms for Brucella Abortus

Sampling at farms of raw milk which is sold to the consumer untreated also continued during the year again on behalf of the County Medical Officer. The nature of work involves attending at farms at irregular hours and the sampling is carried out by unqualified staff of the department.

# Prosecutions under the Food and Drugs Act, 1955

No.	Trader	Nature of Offence	Result
1.	Farmer	Selling milk containing added water	Fined £ 5. 0s.0d. Costs £ 9. 4s.6d.
2.	Dairy	Selling a bottle of milk containing mould spores and hyphae	Fined £ 5. 0s.0d. Costs £ 4.14s.0d.
3.	Retailer	Selling a cottage cheese contaminated with mould	Fined £20. 0s.0d. Costs £ 9.19s.0d.
4.	Cash & Carry Store	Selling a tin of mustard the contents of which were black and solidified	Fined £ 3. 0s.0d. Costs £ 3. 3s.0d.
5.	Retailer	Selling crumpets contaminated with mould	Fined£15. Os.Od. Costs £ 5. Os.Od.
6.	Retailer	Selling crumpets contaminated with mould	Case dismissed
	Baker	(Cited as actual offender)	Fined £10. 5s.0d.
7.	Retailer	Selling butter contaminated with mould	Fined £10. Os.Od. Costs £ 9. Os.Od.

#### SANITARY CIRCUMSTANCES

# Report of the County Public Health Officer

#### MILK AND DAIRIES ADMINISTRATION

The changing pattern of milk production and distribution in this County can be seen clearly by studying the trend over the past seven years.

During that period the annual milk yield has increased by 20%, but the actual number of dairy farms has fallen by approximately one-third, with a similar reduction in the number of producer-retailers who sell raw milk to the public.

Statistical details of the changes which have taken place over this seven year period are as follows:-

	1963	1964	1965	1966	1967	1968	1969
No. of registered dairy herds in	PART I	evenil in	le ercela	19.130	lo agraya	nik I manua di	611
Cornwall	6,098	5,788	5,572	5,405	5,202	4,998	4,761
Annual milk yield							
(million gallons)	66.668	65.08	67.187	69.233	70.557	77.96	79.98
No. of producer-							
retailers	402	378	363	356	341	299	251

The County Council licence all milk distributors except producer-retailers and are also responsible for making sure that milk from animals suffering from certain specified diseases is not sold for human consumption. The grades of milk that may be sold by retail are Untreated, Pasteurised, Sterilised, and Ultra Heat Treated, and the total number of milk licences issued by the County Council and operative at the end of the year totalled 1,506, an increase of 251 over the previous year.

Samples of milk purchased from dairymen or taken from processing plants are examined by the Director of the Public Health Laboratory at Truro, who has reported on all samples taken during 1969 as follows:-

Grade of Milk	No. of samples	Phosph		Methy Blue		Turb			olony nt test	Percentage of failures
Name of the Owner, where the Person of the P		S	F	S	F	S	F	S	F	
Pasteurised	924	924		882	42	11/211	12	To Land	11/21	4.38%
Untreated	84			47	28		May 1		1149	33.33%
Sterilised	121		1144	-		121		-		Nil
Ultra Heat Treated	5			11/10	TVI A	34	PPA Nema	5	# = # O	Nil

S = Satisfactory F = Failed

Phosphatase and Turbidity Tests indicate whether the pasteurising and sterilising processes have been properly carried out. The Methylene Blue Test determines keeping quality, the Colony Count is prescribed for Ultra Heat Treated Milk.

The small percentage of Pasteurised milk samples failing the statutory test demonstrates the efficient methods of milk processing adopted by the dairy industry in this County.

Its exceptionally high quality can perhaps only be truly judged by comparison with the Untreated Grade where one out of every three samples failed the keeping quality test. An average of 40,130 gallons of milk per day was pasteurised and bottled at the seven licensed processing plants in Cornwall — an increase of 2,000 gallons per day over the figure for the previous year. The quantity of milk subjected to the sterilisation process remained unchanged at 1,000 gallons per day, of which only 300 g.p.d. was retailed within the County. Every stage of pasteurisation and sterilisation is carefully checked at frequent intervals by the County Public Health Officer, and samples of milk from the production lines and bottles from the washing machines are submitted for examination at the Public Health Laboratory, Truro.

#### Antibiotics

Medical authorities consider the presence of any antibiotic in milk as being undesirable because of possible ill-effects on persons who are sensitive to these products. To obviate this risk, dairy farmers are recommended not to sell for human consumption any milk taken from a cow that has undergone antibiotic treatment until at least 48 hours after such treatment has been concluded. During 1969, 8,054 samples of milk were examined for antibiotics and of these 14 were reported as exceeding the limit recommended by the Ministry of Agriculture, Fisheries and Food. In each case, a warning letter was sent to the dairy farmer concerned.

#### Brucellosis

Brucellosis is a disease contracted by man either through contact with, or drinking raw milk from infected animals. It is routine practice in this County for samples of milk from the dairy herds of producer-retailers to be examined in the laboratory at least once every six weeks. During the year, 253 dairy herds were investigated in this manner, and of these 23 were found to contain a total of 33 infected cows. When samples of milk show any cow or cows to be diseased, a ban is imposed on the sale of Untreated milk from the whole herd until the District Medical Officer is satisfied that the infected animals have been removed and the remaining cattle are free from infection.

The hospital authorities reported eleven human cases of brucellosis during the year, of whom all but one either regularly drank raw milk or had contact with infected animals. The source of infection in the remaining case could not be traced.

The Brucellosis (Accredited Herds) Scheme introduced by the Ministry of Agriculture, Fisheries and Food in May 1967, was the first positive effort in the country to eradicate this disease in cattle. Since that date 250 dairy herds in Cornwall, including those of 50 milk producer-retailers, have been registered as Accredited under this scheme.

#### SCHOOLS

#### School Canteens and Central Kitchens

The School Meals Service supplies cooked mid-day meals to nearly 8 out of every 10 pupils, showing clearly that in this County parents recognise the excellent value of the "school dinner".

It is a basic rule of any successful catering organisation that the food should always be of best quality and be prepared under strict hygienic conditions. The School Meals Service is no exception to this rule, and once again it is a pleasure to record that every canteen and kitchen inspected conformed with the requirements of the Food Hygiene Regulations, and with few minor exceptions all food examined was satisfactory.

Providing and maintaining kitchens in first class condition is expensive and during the year cost the Education Authority £58,400. Of this amount £29,500 was spent on four new kitchens, £16,000 on improvements and redecoration, and £12,900 on additional and replacement kitchen equipment.

#### Milk in Schools

Pasteurised milk in one-third pint bottles is available to every child in Primary and Junior Schools, and in these age groups a high proportion of children continue to take this drink daily. As a result of the Government decision to limit school milk to the under-11 year olds as from 1st September, 1968, the cost of this service has now fallen by approximately 22%. In 1967, when school milk was available to every pupil, the total cost in Cornwall was £85,000; in 1968 this figure dropped to £70,000, and in 1969, the first full year of the Government's economy measure, the total has been further reduced to £66,000.

Samples of school milk are tested for keeping quality, and of those examined during the year all but eight proved satisfactory. Each sample failure was traced to a minor breakdown in the milk treatment or distribution arrangements of the dairies concerned; in no case was the school authority responsible.

# Water Supply in Schools

The private water supply to Trythall School was replaced during the year by a piped supply from public mains. Only two schools in the County, Trewidland and St. Wenn C.P., are now without mains water.

The bacteriological quality of all school water supplies is tested periodically at the Public Health Laboratory at Truro. One of the samples examined during 1969 was reported unsatisfactory, and was due to a borehole being slightly

contaminated by surface water.

# **Swimming Pools**

The policy decision taken by the County Council in 1968 to suspend grants for school swimming pools has put a brake on the number of new pools constructed. During 1969 only one 12,000 gallon pool was completed, at Cape Cornwall School, although work commenced on an 8,000 gallon unit at Gorran. This compares with 7 completed in 1968. At Bosvigo School the existing pool was totally enclosed by a clear PVC structure; as a result the swimming season has been extended by about two or three months and instruction can now continue during inclement weather.

Thirty-four schools in the County have their own pools, whilst pupils from 24 more share these facilities. Children at 87 other schools receive swimming instruction either at public or privately owned baths, or local beaches.

The Public Health Department carried out some experimental work on water sterilisation using chlorinating crystals instead of drip-feed chlorination. This method has the advantage of not requiring any special dosing equipment, but the cost of the chemical made it more expensive. However, from a sterilisation point of view the tests were successful, and the experiment will be continued over a wider range of pools during 1970 using a slightly different type of crystal.

An essential part of swimming pool maintenance is that the filtration and chlorinating plant should be completely overhauled at the end of each season, and be put into proper working order the following Spring. During the latter part of 1969 the County Public Health Officers carried out research into the winter protection of swimming pools, and devised a method whereby this service could be undertaken by the Public Health Department with the co-operation of the existing education staff. This maintenance programme will be in operation before the start of the 1970 season.

# **Foot Inspection**

Athlete's: Foot and Verrucae are infective skin conditions that can spread rapidly from person to person, particularly when barefoot activities are carried out on damp, rough and improperly cleansed floor surfaces. Control measures to prevent the spread of these conditions at schools in Cornwall include special floor cleansing techniques, prohibiting the interchange of footwear and towels, and excluding infected pupils from barefoot activities until certified free from infection by a Doctor. School Nurses examine feet of every child in Infant and Junior Schools, and children showing any evidence of either condition are referred to their family doctor for treatment.

During the year 24,183 children were examined and 118 cases of Verucca and 22 of Athlete's Foot were identified and confirmed. (Corresponding figures for the previous year were Verruca 70, Athlete's Foot 75).

# WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL

The Rural Water Supplies and Sewerage Acts require the County Council and the Ministry of Housing and Local Government to contribute towards the cost of certain schemes carried out in rural localities. In practice, the grant paid by the County Council is equal to that made by the Ministry. The County Council also give financial assistance under Section 56 of the Local Government Act, 1958, towards sewerage schemes carried out by District Councils whose net sewerage rate exceeds 1s.6d. in the £. The total amount paid during 1969 was £159,307, and the cumulative financial effect of this grant policy is demonstrated diagrammatically on page 98.

It should be borne in mind that the County Council's contribution towards each scheme is usually in the form of an annual payment over a loan period which may be up to 40 years, and consequently there cannot be any early reduction in this particular rate burden, in fact bearing in mind that many costly projects have yet to be undertaken it is quite clear that the peak has not been reached.

The estimated cost of schemes approved by the County Council during 1969 totalled £722,483, of which £131,555 was for water supply and £590,928 for sewerage and sewage disposal.

#### WATER SUPPLIES

Water supply and distribution functions in Cornwall are undertaken by five Water Boards. Water supplied by these Boards during the year averaged 19,728,051 gallons per day, an increase of 1,219,051 gallons per day over the corresponding figure for the previous year. This ever-increasing demand is one of the major problems facing water undertakings not only in Cornwall but throughout the whole country; it is one that usually can be resolved only by considerable capital expenditure on developing new sources of supply. Some idea of the sums involved can be obtained by looking at the cost of one scheme completed by the East Cornwall Water Board during 1969. A new river regulating reservoir capable of increasing the water resources of the Board by 4.5 million gallons per day cost approximately £700,000.

Water undertakers have a statutory duty to supply their consumers with wholesome water, and this obligation is met by protecting the raw water from contamination, and also subjecting it to chemical treatment to remove or destroy potentially harmful organisms. Only 100,000 of the 19.7 million gallons supplied

through public mains each day is not treated or chlorinated before distribution. These unchlorinated supplies are usually taken from small local sources where the raw water is uncontaminated. The natural fluoride present in Cornish waters barely exceeds 0.1 to 0.25 parts per million which is far short of the optimum level of one part per million recommended by medical and dental authorities. In November 1969, the County Council approved the principle of fluoridation, and on the understanding that the County Council would be responsible for the costs involved invited the five Boards to consider fluoridating the water supplies in their respective areas. The North and Mid Cornwall Water Board subsequently re-affirmed its previous decision to include fluoridation as part of their water treatment process and preliminary discussions on the technical aspects of treatment have been held with the Senior Engineering Inspector and a Chemical Inspector of the Ministry of Housing and Local Government. A detailed scheme is being prepared and will be submitted for the County Council's consideration during the coming year. The remaining four Boards in the County decided against fluoridation.

A brief description of each water undertaking in the County together with a list of the major improvements carried out during 1969 is given below:-

#### West Cornwall Water Board

Area of Supply: Boroughs of Penzance and St. Ives, Urban District of

St. Just; and West Penwith Rural District excluding

the Parish of Gwinear-Gwithian.

Statutory Area: 106.03 square miles

Population: 47,150

Estimated Numbers of In houses: 46,150 Population supplied: By stand-pipe: 1,000

Water Consumption: Maximum: 3,418,000 galls. per day (1968: 3,185,000)

Average: 2,695,000 galls. per day (1968: 2,628,000) Minimum: 2,393,000 galls. per day (1968: 2,365,000)

Number of new

connections to mains: 424

The Board has nine sources of water supply comprising two impounding reservoirs, a stream and mine adits. Water from the four principal sources is fully treated by chemical coagulation, pressure filtration, chlorination, and the addition of lime to correct acidity. Water from four of the minor sources is chlorinated and pH adjusted, and one mine supply chlorinated only.

Major improvements schemes completed or in progress at the end of the year include:

- (i) A 4,300 yard extension of 3" and 4" diameter pipe to serve 33 houses and 9 farms in the Trencrom and Lelant Downs area.
- (ii) 8,500 yards of 3" and 4" diameter pipe to supply 40 properties in the locality of Newmill and Madron.
- (iii) 450 yards of 3" diameter pipe to serve 3 bungalows, one farm and building sites at Tregender Hill, Crowlas.
- (iv) 800 yards of 3" pipe to supply mains water to 4 houses in the locality of Castallack, Paul.

#### South Cornwall Water Board

Area of Supply: City of Truro: Boroughs of Falmouth, Helston and

Penryn; Urban District of Camborne-Redruth; Rural Districts of Kerrier and Truro excluding the Parish of Newlyn; and the Parish of Gwinear-Gwithian in West

Penwith Rural District.

Statutory Area: 390 square miles

Population: 137,000 (1968: 135,000)

Water consumption: Maximum: 8,007,537 galls. per day (1968: 8,341,000)

Average: 7,179,051 galls. per day (1968: 6,780,000) Minimum: 6,733,930 galls. per day (1968: 5,700,000)

Number of new

connections to mains: 1,660

The Board has seventeen sources of supply comprising four impounding reservoirs, ten river or stream intakes, two mine adits or shafts, and a spring. Of the total quantity of water supplied, 96.15% is fully treated, 3.84% chlorinated only and 0.01% untreated.

Major improvements schemes completed or in progress at the end of the year include:

- (i) 2,280 yards of 6" diameter pipe to link the old Camborne-Redruth Distribution system at Troon with the Kerrier Council's trunk main at Nine Maidens, and also supply 28 properties with mains water for the first time.
- (ii) 650 yards of 8" and 1,900 yards of 6" diameter pipe to augment existing supplies in Tregye, Carnon Downs, and Penelewey, and provide 15 properties with mains water for the first time.
- (iii) 6,000 yards of 8" and 6" diameter trunk main from Crelly to Truthall to augment the existing water supply in the Helston area, and also provide 26 properties at Trenear with mains water for the first time.

(iv) Reinforcement mains from Tregew to Flushing, and from Threemilestone to Gloweth to augment existing water supplies in the Flushing and Truro areas.

#### North and Mid Cornwall Water Board

Area of Supply: Boroughs of Bodmin and St. Austell-with-Fowey;

Urban District of Newquay; Rural Districts of Camelford, St. Austell, and Wadebridge and Padstow; and the

Parish of Newlyn East in Truro Rural District.

Statutory Area: 419 square miles

Population: 100,400 (1968: 99,190)

Water consumption: Maximum: 8,050,000 galls. per day (1968: 7,900,000)

Average: 6,280,000 galls. per day (1968: 5,670,000) Minimum: 5,300,000 galls. per day (1968: 5,000,000)

Number of new

connections to mains: 1,003

The Board's water sources consist of four river intakes, one of which is augmented by an impounding reservoir at Porth; two mine shafts; five boreholes, and fourteen supplies from springs and mine adits of which six are used to meet peak demands only. Approximately 85% of the water is fully treated, 14% is chlorinated only and 1% untreated.

Major improvement schemes in progress or completed during the year include:-

- (i) 2,500 yards of 12" trunk main from Keybridge to Helland to augment water supplies in the Bodmin area.
- (ii) Approximately 20 miles of mains up to 10" diameter laid as water main extensions to serve rural areas, reinforcement of existing mains or as extensions for housing development. These schemes will reinforce existing supplies in the Newquay, Mawgan Porth, Tintagel, and Rock districts and also provide mains water for the first time to some 263 dwellings in the rural areas of Wadebridge and St. Austell.

#### East Cornwall Water Board

Area of Supply: Boroughs of Liskeard, Launceston and Saltash: Urban

Districts of Looe and Torpoint: and Rural Districts of Liskeard, St. Germans, and Launceston excluding the

Parish of Boyton.

Statutory Area: 367 square miles

Population: 63,350 (1968: 62,800)

Estimated numbers of

population supplied: 54,500

Water consumption: Maximum: 3,428,000 galls. per day (1968: 3,237,000)

> 2,875,000 galls, per day (1968: 2,839,000) Average: 2,642,000 galls. per day (1968: 2,624,000) Minimum:

Number of new

connections to mains:

941

The Board's water sources comprise two stream impounding reservoirs: one spring impounding reservoir; three boreholes; two springs; three river or stream intakes; two mine adits; and bulk supplies of 450,000 gallons per day and 6,600 gallons per day from Plymouth City and North Devon Water Board respectively. Approximately 80% of all water supplied is fully treated and the remainder chlorinated only.

Major improvement schemes completed or in progress at the end of the year include:-

- A river regulating reservoir on the Siblyback Brook designed to increase (i) the combined reliable yield of the Board's existing sources of supply at Bastreet and Trekievesteps to 4,500,000 gallons per day.
- (ii) A new intake, treatment works, and one million gallon service reservoir at Bastreet to replace the existing installation and raise the maximum output from one to two million gallons per day.
- Approximately 16,800 yards of 12" 6" diameter trunk main from Bas-(iii) treet to Launceston as part of the Board's major water re-organisation programme. This scheme which was completed during the year will augment the water supply in Launceston Borough and Launceston Rural District by some 800,000 gallons per day and will enable the existing Borough source of supply at Bray Down to be discontinued.
- The Menheniot-Antony-Millbrook Trunk Main. This scheme which in-(iv) volves laying nearly twelve miles of 12", 8" and 6" diameter pipe will augment water supplies in Torpoint and the south-eastern part of Cornwall.
- Approximately 11/4 miles of 10" to 3" diameter pipe as Stage II of the (v) Calstock Water Improvement Scheme.
- 4,600 yards of 4" diameter pipe to augment supplies in the Landrake (vi) area and serve fourteen existing houses with mains water for the first time.

In addition to the foregoing contracts, approximately twelve miles of 12" down to 3" diameter pipe was laid as extensions to building estates or mains renewal.

## North Devon Water Board

Area of Supply in

Bude-Stratton Urban District, Stratton Rural District

and the Parish of Boyton within Launceston Rural

District.

Water consumption:

Average 699,000 galls. per day (1968: 692,000 galls.)

No. of new

Cornwall:

connections to mains

in Cornwall:

233

Sources of Supply:

Water is obtained from river intakes at Prewley and Belstone in Devon, and from the Tamar Lake impounding reservoir in Cornwall. All water supplied by the Board

is fully treated.

During the year the Board installed a new booster at the Venn Treatment Works in order to increase water pressure in the mains within the Bude Urban District and improve supply particularly during the peak holiday periods.

# **Future Proposals**

Schemes of water supply submitted under the Rural Water Supplies and Sewerage Acts during 1969 were as follows:-

Water Authority	Scheme	Estimated Cost £	Action taken by County Council
South Cornwall Water Board	Tregye, Carnon Downs & Penelewey Water Main Extension.	10,030	Approved, subject to conditions
	Betty Adit Water Main Extension	2,755	Approved
	Truro Hill to Bellevue Cottages Penryn, Water Main Extension		Approved, subject to conditions
	Allet Common Water Main Extension	559	Approved
	Threemilestone to Newbridge Water Main Extension	1,419	Approved

Water Authority	Scheme I	Estimated Cost £	Action taken by County Council	
North & Mid Cornwall Water Board	Enniscaven Water Scheme	8,600	Approved	
	Hellandbridge Water Scheme	4,319	Approved	
	Pengrugla Water Main Extension	9,702	Approved	
	Seaview Terrace, Fraddon, Wat Main Extension	ter 1,043	Approved	
	Gover Valley Water Main Extension	1,477	Approved	
	Trebudannon Water Main Extension	3,938	Approved	
	Sweetshouse to Lanhydrock Water Main Extension	10,000	Approved	
East Cornwall Water Board	Antony to Millbrook Water Reinforcement Scheme	48,000	Approved	
	Blunts to Landrake Water Augmentation Scheme	10,000	Approved, subject to conditions	
North Devon Water Board	Wembley Cross to Bush and Ivyleaf Water Main Extension	17,500	Approved, subject to conditions	
	15 Schemes	131,555	land our	

#### SEWERAGE AND SEWAGE DISPOSAL

Government restrictions on capital expenditure appears to have been effective in slowing down the preparation of schemes for providing modern drainage systems in the unsewered or inadequately sewered parts of the County. Only ten schemes with a total estimated cost of £590,928 were submitted to the County Council during the year compared with 17 costing over £1,000,000 in 1967. There is an urgent public health need for new and improved sewerage and sewage disposal facilities in many Cornish towns and villages. At present, sewage treatment arrangements in some areas are so unsatisfactory that the County Planning Committee have been compelled to impose an embargo on further building development until proper treatment plants have been provided. It is hoped that financial restrictions on this very essential work will be eased at the earliest possible date.

Schemes in progress or completed during 1969 are described briefly in

TABLE 1

Local Authority	Scheme	Estimated Cost £	Remarks
Camelford Rural District	Helstone Sewerage and Sewage Treatment	10,810	15% completed
	Tresparret Sewage Treatment	2,850	50% completed
	Construction of new treatmen works at Delabole	t 45,000	75% completed
Kerrier Rural District	The Lizard: Ruan Minor and Cadgwith Sewerage and Sea Outfall	195,000	Completed
	Stithians and Ponsanooth Sewerage and Sewage Treatment	265,000	50% completed
Launceston Rural District	North Petherwin Sewerage and Sewage Treatment	19,000	60% completed
St. Austell Rural District	Quintrell Downs Sewerage	70,000	60% completed
Stratton Rural District	Whitstone Sewerage and Sewage Treatment	15,378	Completed
Truro Rural District	Perranporth Sewerage Improvement	60,900	Completed
	Threemilestone Sewerage	39,300	60% completed
	Veryan Sewerage and Sewage Treatment	30,690	95% completed
Wadebridge and Padstow Rural Dist.	St. Minver Sewerage and Sewage Treatment	171,206	50% completed
West Penwith Rural District	Long Rock Industrial Site Sewerage	14,650	90% completed
Newquay Urban District	St. Anne's Road relief sewers	27,000	Completed
Total	14 schemes	£966,784	

# TABLE 2

Schemes of sewerage and sewage disposal submitted during 1969 for grant under:-

# A. Rural Water Supplies and Sewerage Acts

Local Authority	Scheme	Estimated Cost £	Action taken by County Council
Kerrier Rural District	Sewer extension to Angrouse, Mullion and duplication of sea outfall sewer		Approved subject to conditions
St. Austell Rural District	St. Columb Sewerage and Sewage Treatment	273,000	Approved subject to conditions
	Luxulyan Sewerage and Sewage Treatment	29,200	Approved
Truro Rural District	Wheal Kitty, St. Agnes Sewer Extension	8,100	Approved
	Trevaunance Road, St. Agnes Sewer Extension	1,700	Approved
	Ladock Valley Sewerage and Sewage Treatment	159,770	Approved subject to conditions
	Perranporth Sewerage — Extensions to Bolingey and the outlying areas of Perranpo	51,530 orth	Approved subject to conditions
	Frogpool Sewerage and Sewage Treatment	11,900	Approved subject to conditions
Wadebridge and Padstow Rural Dist.	St. Minver Sewer Extension	1,169	Approved
Total	9 schemes	£556,216	O Lovick United
B. Local Government	Act, 1958, Section 56	DECEMBER OF STREET	The service of the se
Local Authority	Scheme	Estimated Cost	Action taken by County Council
Newquay Urban District	Watergate Bay Sewerage	34,712	Approved

# MINISTRY OF HOUSING AND LOCAL GOVERNMENT INQUIRIES

The following schemes of sewerage and sewage disposal were investigated by Engineering Inspectors of the Ministry of Housing and Local Government: the County Public Health Officer attended these Inquiries and gave evidence on behalf of the County Council.

Liskeard Rural District	(i)	St. Cleer Sewage Treatment Improvement
St. Austell Rural District	(i)	Sticker Village Sewerage and Sewage Treatment.
	(ii) (iii)	Lostwithiel Sewerage and Sewage Treatment St. Columb Sewerage and Sewage Treatment
Launceston Rural District		Tregadillet Sewerage and Sewage Treatment
Truro Rural District	(i)	Shortlanesend Sewerage and Sewage Treat- ment
	(ii)	Cubert and Holwell Sewerage
	(iii)	Feock Sewerage and Sewage Treatment
Newquay Urban District	(i) (ii)	Crantock and West Pentire Sewerage Watergate Bay Sewerage.

#### REFUSE DISPOSAL

The 27 District Council in Cornwall dispose of domestic and trade refuse by tipping on to land or into disused quarries. At the end of the year 35 separate tips were being operated in the County, of which 23 were properly controlled in accordance with recommendations made by the Ministry of Housing and Local Government. The remainder vary from partially controlled tips to crude dumps, methods which to say the least are totally undesirable.

In previous annual reports, reference has been made to the efforts of Public Health and Planning Officers to acquire large areas in various parts of the County which could be used for properly controlled refuse disposal by groups of local authorities. It is hoped that one such site for Bodmin Borough and St. Austell Rural District will come into operation early in 1970, and that planning permission will be granted before the end of that year for at least three other areas to serve a total of 10 district councils.

The number of tips in operation within the County has been reduced by 8 during the year; details of those remaining are as follows:-

landamay). I	0 Boroughs	7 Urban Districts	10 Rural Districts	Total all districts
Controlled tipping according to Minist Recommendations	try	6	12	23

	10 Boroughs	7 Urban Districts	10 Rural Districts	Total all districts
Partially controlle tipping	d –	1	3	4
Uncontrolled tipping	1	1	6	8

#### CARAVAN SITES FOR GYPSIES

Part II of the Caravan Sites Act, 1968, which comes into operation in April, 1970, requires the County Council to provide caravan sites for gypsies and persons having a nomadic habit of life. A survey carried out some time ago by the Police suggested that the number of families for which provision ought to be made was well over 100. However, a recent review of this survey has shown that many of the families were not travelling gypsies but settled families or homeless people not provided for under Part II of the Act. A number of meetings between officers of the County Council and District Councils has been held during the year in an effort to determine the number and location of sites needed to meet the County Council's statutory obligations, and a detailed report will be submitted to the County Council during 1970. At this stage it appears that about 3 sites will be needed.

# MEAT INSPECTION

Slaughter of animals for human consumption is carried out in abattoirs sited in 18 of the 27 county districts in Cornwall. Every animal is subjected to a detailed post-mortem inspection by the officers of the authorities concerned, and any diseased carcase or organ is condemned.

The number of cattle, sheep and pigs killed during 1969 was 545,501 of which 3,170 were condemned as being unfit for human consumption and 84,216 required condemnation of some part or organ. Compared with the previous year there was an overall reduction of approximately 10% in the number of animals slaughtered.

The statistical information given in the following table has been collated from information made available by courtesy of the District Medical Officers of Health and Public Health Inspectors of the local authorities in the County who have abattoirs in their areas.

THE RESERVE OF THE PARTY OF THE	CA	TTLE		L. COLOR	
Year ending 31st December 1969	Cattle (excl. Cows	Cows	Calves	SHEEP and LAMBS	PIGS
Number killed	31,362	15,889	29,176	209,528	259,546
Number inspected	31,362	15,889	29,176	209,528	259,546
All diseases except cysticercosis and tuberculosis					
(a) Whole carcase condemned	96	366	307	1,725	668
(b) Carcase of which some part or organ was condemned	12,342	7,591	227	30,557	29,511
Tuberculosis only	112 1911	1998	MINTED !	CH SHOWN	
(a) Whole carcase condemned	1	4	-	-	1
(b) Carcase of which some part or organ was condemned	45	139	1		3,589
Cysticercosis only					- Baban
(a) Whole carcase condemned	-	2	-	-	-
(b) Carcase of which some part or organ was condemned	178	35		1	-
Gross weight of meat condemned	37	2 tons	3 cwts	1 qr.	12 lbs

#### HOUSING

The total number of new houses completed during 1969 was 3,073 of which 723 were built by District Councils, 5 by other public authorities, and 2,345 by private enterprise. This total is 408 fewer than the number for the previous year.

The annual rate of house completion since 1951 is demonstrated graphically on page 99; the chart shows clearly how the building industry has expanded over this period and in particular it depicts the rapid rise in the proportion constructed by private enterprise during the past decade. Altogether 41,156 new houses and flats have been built in the County during the post-war period, of which 16,857 have been constructed by Local Authorities and 24,299 by private enterprise, Government departments, and housing associations.

District Councils have a statutory duty to secure demolition or closure of old worn out houses that are no longer fit for human habitation, and 207 dwellings were dealt with in this manner during the year.

Detailed statistical information on the number of new houses built and unfit houses demolished in each Local Authority's area is given in the table on page 94.

# Housing (Financial Provisions) Act, 1958 - County Council Contributions

Where an exchequer contribution of the special standard amount is made by the Ministry of Housing and Local Government to District Councils principally in respect of houses for the agricultural population, then the County Council is also required to make a contribution.

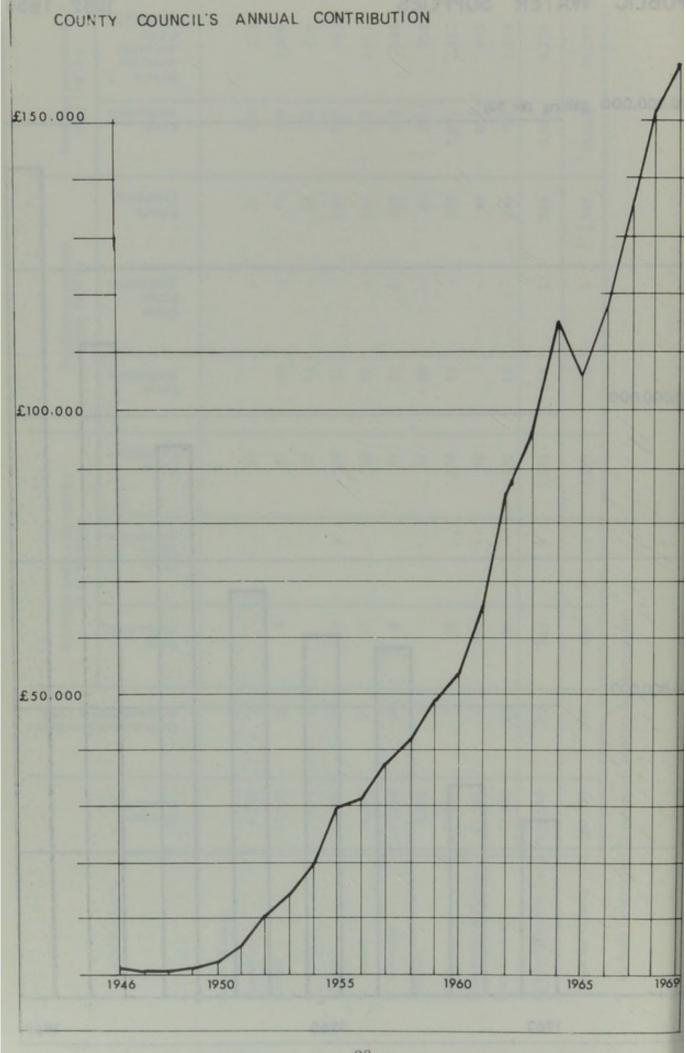
These contributions are payable for a period of 60 years at varying rates of £1; £1.10s.0d.; or £2.10s.0d. per house according to the date when the schemes are approved by the Ministry. In 1969, the County Council paid £1,492.10s.0d. to 18 District Councils.

Dwellings completed since 1945 by	Local Authorities Private * enterprise and other Public Authorities	100	701 783	944 1,002	541 1,006	280 310	532 312	355 328	977 168	1,729 2,630	417 713	460 977	1,202 891	8,052 9,728
C Gason	Private Enterprise	- Topic	92	58	127	28	54	27	39	309	15	106	74	929
Dwellings completed during 1969 by	Other Public Authorities		1	-			2	1	-		-		1	2
Dwd	Local Authorities		125	170	1	10	74	8	- de	29	20	1	18	454
ction	Private Enterprise		95	27	157	9	∞	27	62	116	48	253	158	756
s under construction 31.12.69 by	Other Public Authorities		,	1	-	1	1		1	-	1	2	1	2
Dwellings under at 31.1.	Local Authorities		34	T	17	28	1	1	38	12	,	15	1	144
	Unfit houses of the control of the c	-	1	7	-	2	9	1	32	22	-		22	92
	Estimated Population		7,950	17,350	098'6	4,700	4,890	5,140	18,790	29,900	8,920	8,800	14,590	130,890
	Local Authority	Boroughs	Bodmin	Falmouth	Helston	Launceston	Liskeard	Penryn	Penzance	St. Austell with Fowey	St. Ives	Saltash	Truro City	11 Boroughs: Total

DELEGATION TO SENSO	pulling 11'0%	Local Authority Estimated Population	Urban Districts	Bude-Stratton 5,330	Camborne-Redruth 38,380	Looe 4,070	Newquay 12,420	St. Just 3,410	Torpoint 6,160	6 Urban Districts: Total 69,770
		Unfit houses o		1	19		3	t	-	22
	Dwellings	Local Authorities	2	1	47	1	99	15	39	157
	Dwellings under construction at 31.12.69 by	Other club, of the	7	1	16	1	1	1	1	91
Year	uction	Private Enterprise	16	30	446	27	80	4	1	591
-	Dwe	Local Authorities	R	1	48	21	45	12	1	105
	Dwellings completed during 1969 by	Other Public Authorities		2	- 1	1	1	1	-	2
25	1001	Private Enterprise	122	44	294	9	109	4	41	498
	Dwellings since 1	Local Authorities	3	206	1,447	144	626	96	402	2,921
	Dwellings completed since 1945 by	Private * enterprise and other Public Authorities	1881	428	2,588	541	1,401	49	331	5,338

	Local Authority	Rural Districts	Camelford	Kerrier	Launceston	Liskeard	St. Austell	St. Germans	Stratton	Truro	Wadebridge & Padstow	West Penwith	10 Rural Districts: Total	Totals for County
	Estimated Population	250	016'9	22,930	7,090	13,730	24,530	15,110	4,710	29,060	17,540	17,930	159,540	360,200
demolished	Unfit houses of the control of the c		-	28	9	3	15	14	1	7	9	13	93	207
Dwelling	Local Authorities			8	- 1	10	33	∞	-	28	40	36	163	464
Dwellings under construction at 31.12.69 by	Other Public Authorities		1	-	1	4	1	100	1	1	-		4	22
uction	Private Enterprise		37	97	22	139	149	87	21	274	80	135	1,041	2,589
Dwd	Local Authorities		1	40	13	21	27	29	10	12	-	12	164	723
Dwellings completed during 1969 by	Other Public Seitinotitues		1	1	1	1	-	1		1	-	1	1	5
pa	Private Enterprise		21	73	44	147	142	165	18	159	49	100	918	2,345
Dwelling since	Local Authorities		316	700	148	589	774	578	195	1,097	689	198	5,884	16,857
Dwellings completed since 1945 by	* strivate * contemporate conte		223	1,546	219	787	1,031	944	224	2,312	873	1,074	9,233	24,299

\* Includes Government Departments and Housing Associations



RURAL WATER SUPPLIES & SEWERAGE ACTS

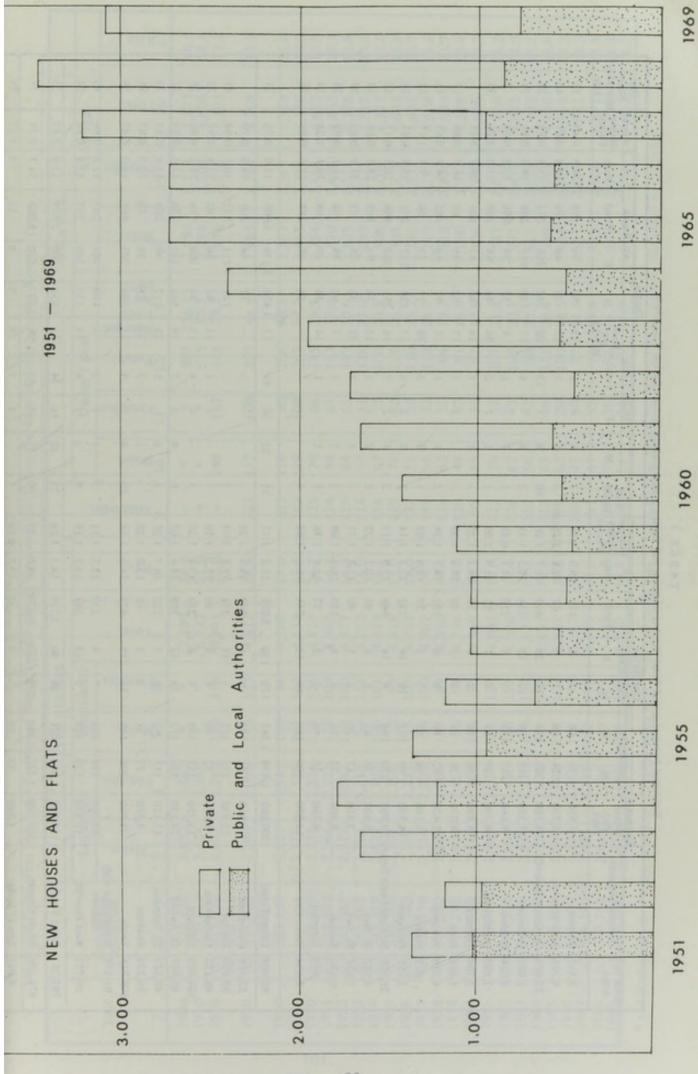


TABLE I

Estimated Population and Total Number of Births and Deaths in each County District for the Year 1969

		Potimona			Live	Live Births									Deaths			۱		Davi.
Area in		Home	Legitimate	mate	Illegitimate	mate		9		Celli		Unde	Under 1 year	-		ALB	At all ages		Compar	Natal
Acres	County Districts	Pop. 1969.	M	F	M	F	Total	Rate a	Factor F		M	Œ.	Total	Rate OOO LB	M	н	Total	Rate	Factor	8
3,312	Bodmin	7,950	75	89	3	5	151	19.0	1.15	1	-	4	5	33	66	66	198	24.9	0.40	13
4,296	Bude-Stratton	5,330	35	53	1	3	19	12.6	1.25	2	1	1	1	115	31	48	19	14.8	19.0	43
22,062	Camborne-Redruth	38,380	301	279	32	28	640	16.7	1.06	10	00	2	13	20	245	268	513	13.4	0.88	23
1,880	Falmouth	17,350	112	95	12	115	234	13.5	1.15	2	4	1	4	17	134	114	248	14.3	0.81	21
4,014	Helston	9,860	1117	113	3	5	238	24.1	0.81	1	1	1	1	4	52	54	106	10.8	0.84	00
2,180	Launceston	4,700	27	27	1	-	99	6.11	1.09	1	1	1	2	36	44	64	108	23.0	0.56	35
2,704	Liskeard	4,890	36	26	2	9	70	14.3	1.20	1	1	1	1	14	40	19	101	20.7	0.47	-
1,691	Looe	4,070	26	27	3	2	58	14.3	1.39	-	1	1	-	17	33	35	39	16.7	09'0	17
4,599	Newquay	12,420	92	92	6	9	183	14.7	1.24	2.	-	1	-	2	97	88	185	14.9	0.62	91
829	-	5,140	38	34	2	3	77	15.0	1.02	1	3		3	39	27	23	80	9.7	1.11	51
3,155	Penzance	18,790	66	103	16	14	232	12.3	1.14	3	2	2	4	17	124	147	172	14.4	0.81	56
21,358		y 29,900	230	196	00	14	448	15.0	1.13	2	5	2	7	91	251	243	464	16.5	0.75	13
4,287	St. Ives	8,920	36	45	9	00	95	10.7	1.22	2	2	3	5	53	72	93	165	18.5	0.64	52
7,634	St. Just	3,410	17	20	2	-	40	11.7	1.11	1	1	-	-	25	38	35	73	21.4	0.80	25
5,386	Saltash	8,800	73	70	1	4	148	16.8	1.09	3	1	1	1	7	09	38	86	11.1	0.88	26
886	Torpoint	6,160	25	44	1	3	73	11.9	1.36	1		1	1	4	36	28	64	10.4	1.24	14
2,634	Truro City	14,590	100	111	18	12	241	16.5	1.03	4	-	-	-	1	96	80	184	12.6	68'0	91
93,009	Urban Totals	200,660	1,438	1,363	120	130	3,051	15.2	1111	35	33	18	51	17	1,479	1,526	3,005	15.0	0.75	21
52,544	Camelford	6,910	55	42	4	9	107	15.5	1.24	1	1	1	,	1	57	44	101	14.6	0.70	1.
90,839	Kerrier	22,930	133	122	5	111	271	11.8	1.09	3	1	1	1	1	121	1111	232	10.1	0.94	===
85,122	Launceston	7,090	32	40	4	4	80	11.3	1.10	-	1	1	-	13	42	40	82	11.6	0.94	25
104,803	Liskeard	13,730	113	109	6	00	239	17.4	1.20	3	1	4	4	17	94	100	194	14.1	98.0	25
85,545	St. Austell	24,530	155	172	20	112	359	14.6	1.07	9	4	3	7	19	191	135	396	12.1	0.94	27
48,533	St. Germans	15,110	1115	92	00	7	222	14.7	1.25	-	5	1	5	23	1117	92	500	13.8	0.82	22
56,220	Stratton	4,710	27	31	2	-	19	13.0	1.25	-	1	-	2	33	25	28	53	11.3	0.87	91
108,316	Truro	29,060	206	181	91	61	422	14.5	1.18	10	4	5	6	21	204	203	407	14.0	0.82	35
91.573	Wadebridge with Padstow	17,540	118	103	7	6	237	13.5	1.11	2	-	-	7	00	100	107	207	11.8	0.86	13
59,792	West Penwith	17.930	130	129	6	13	281	15.7	1.15	2	6	-	4	14	137	140	277	15.4	98.0	24
783,287	Rural Totals	159,540	1,084	1,021	84	8	2,279	14.3	1.14	31	18	91	34	15	1,058	1,000	2,058	12.9	0.87	23
876,296	Whole County	360,200	2,522	2,384	204	220	5,330	14.8	1.13	99	51	7.	85	91	2,537	2,526	5,063	14.1	0.79	21
4,041	Isles of Scilly	1.980	11	11	1	1	35	17.7	0.92	-	1	-	-	59	1	90	15	7.6	1.17	28
					Birt	Birth and De	Death Rates Calculated per 1,000 Population	s Calcul	ated per	1,000	Populati	no								

TABLE II

Estimated Population and Total Number of Births and Deaths in Cornwall (excluding the Isles of Scilly) during Recent Years

	$\overline{}$		_				_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	
		ZRate	16.5	13.2	13.7	15.0	14.0	13.8	14.3	17.8	13.2	13.2	13.8	13.7	13.3	13.7	13.4	13./	14.2	14.3	15.2		14.3			14.8
7	ages	lstoT≅	5,271	4,193	4,269	4,924	5,186	4,672	4,863	4,376	4,515	4,517	4,674	4,629	4,504	4,630	4,528	4,606	4,769	4,852	5,173	4,750	4,955	5,022	4,871	5,309
S	At all	N. Females	2,773	_	2,284	2,567	2,721	2,418	2,493	2,271	2,322	2,209	2,370	2,337	2,287	2,318	2,332	2,300	2,432	2,459	2,558	2,361	2,526	2,475	2,408	2,641
DEATHS		≥ Males	2,498	1,978	1.985	2,357	2,465	2,254	2,370	2,105	2,193	2,308	2,304	2,292	2,217	2,312	2,196	2,306	2,337	2,393	2,615	2,389	2,429	2,547	2,463	2,668
		Rate per 1,000 Live- live- ouths	126.33	9.5	51.3	48.3	52.5	29.5	33.0	30.6	27.0	20.8	26.7	23.2	24.7	19.3	6.91	17.6	21.8	20.1	19.1	20.4	18.5	14.4	14.6	16.7
	1 year	Total	985	416	237	206	267	145	163	149	128	100	118	110	118	94	81	87	107	105	86	111	100	77	9/	86
	Under	Lemales	* *	167	100	06	108	99	65	65	51	33	42	55	52	32	32	32	37	43	42	46	38	30	35	36
		⊆Males	* *	249	137	116	159	19	86	84	11	19	92	55	99	62	49	55	70	62	56	. 65	62	47	41	50
	SI	driidliit2°	+ +	+	225	163	183	125	114	115	118	158	129	132	149	129	126	66	123	124	116	112	66	108	85	93
		ofe A <sup>∞</sup>	24.3	22.0	14.8	13.0	12.5	14.2	14.3	14.3	14.0	14.1	13.0	14.0	14.1	14.4	14.0	14.7	14.6	15.4	15.1	15.8	15.6	15.3	14.6	14.3
		[ETOT	7,799	166'9	4,622	4,268	4,633	4,819	4,865	4,877	4,752	4,819	4,418	4,751	4,769	4,870	4,734	4,949	4,902	5,206	5,137	5,451	5,401	5,362	5,179	5,132
RYTHS	Illegitimate	Eemales	* *	158	123	96	132	126	109	100	134	101	68	107	100	88	66	90	124	152	123	172	162	178	192	177
LIVE BIRTHS	Illegi	Males	* *	190	123	100	161	124	129	116	94	100	113	115	94	107	80	116	135	148	150	147	192	171	192	204
	nate	eslema1	3,842	3,240	2,096	1,945	2,125	2,236	2,321	2,282	2,218	2,198	2,108	2,231	2,225	2,205	2,155	2,303	2,239	2,400	2,330	2,473	2,486	2,489	2,331	2,278
	Legitimate	w Males	3,957	3,403	2,280	2,127	(a) 2,215	2,333	2,306	2,379	2,306	2,420	2,108	2,298	2,350	2,469	2,400	2,440	2,404	2,506	2,534	2,659	2,561	2,524	2,464	2,460
		Estimated Population.	320,420	(a) 317,970				(c) 339,999	338		(c) 341,463	(c) 341,350	(c) 339,760	338	(c) 338,770	(c) 337,380	337	(c) 337,110	(c) 333,700	(c) 339,110	(c) 341,110	344	347	351	354	(c) 357,710 (c) 360,200
	R	Year I	1900		1930 (3	1940		1950 (6				100	_	_												1968
_								10	)1.																	_

\* not distinguished - + not available - (a) for birth rate - (b) for death rate - (c) total population (including non-civilians stationed in County)

# TABLE III

# Causes of Death at Specified Ages

R.G's.	: :	IIV	9		1-		5.		15-	2	25-	35-		45-		55-		-59	7	75-		Totals
Code	Cause of Death	Ages	M	H	M	H	M	F	A F	×	F	M	F	M	H	M	F M	A F	M	F	M	F
B 1	Cholera		.:															-				
	Typhoid Fever							,														
B 3	Bacillary dysentery and	-																				
70	amoebiasis																				-	
B 4	Enteritis and other					7																
	diarrhoeal diseases	2		1	-			,									,				-	
B 5	Tuberculosis of respiratory																				-	
	system	5						,				1	-			1			2		5	
B 6	Other tuberculosis,																					
	including late effects	6		-							1						1	3 .	4		7	
	Plague															,						
	Diphtheria					,																•
B 9	Whooping Cough		-				-								15.0						•	-
B 10	Streptococal sore throat																					
	and Scarlet Fewer			,										,		,	,		•			-
B 111	Meningococcal infection																					
8 12	Acute poliomyelitis																					
8 13	Smallpox																					
B 14	Measles				,			,										-				
8 15	Typhus and other																					
	rickettsioses							,				-		,				*				
B 16	Malaria				100																	
3 17	Syphilis and its sequelae	2								-		-							-		-	
B 18	All other infective and										1								1		•	
	parasitic diseases	12	,						, ,		0	-				-			-	-	7	
B 19*	Malignant neoplasms, in-	-						-	*		4	•					-		-	-	0	
	cluding neoplasms of			I																		
	lymphatic and			1																		
	haematopoietic tissue	984							2 3	4	3	17	36	23	55	10 11	104	124	135	146	505	470
B 20	Benign and unspecified										1	-	4.7	00	00	1	17	-	-	140	200	-
	neoplasms	14	-				,	,							,		*	2	2	0	4	3
B 21	Diabetes mellitus	49									-	7.1					00			40	33	36
B 22	Avitaminoses and other														7	0	7	13	=	0	67	7
	nutrional deficiency	2					100									15		*			-	
B 23	Anacmias	14											233							. 0		7.
200		-																				

	21	61	286	-	175	520	11	124		4	12	19		14	9	10				-	6	,	9	0	0	29	243	20	71		14	10	2,534
	17	40	735	1	135	328	00	100		141	21	-		6	00	13	24				21	-	20	,	0	18	232	29	39		31	6	2,544
	7	33	358		140	365	4	86		13	=	2		10		4									9	28	138	3	42		1	-	,413
	2	16	267	-	82	167	2	57		38	1			3		2	22				2					17	103	3	6		-	7	1 196
	00	19	163	1	27	106	7	22		17	-	-		0	2	3											53	6	13		4	2	614
	9	16	248	1	33	103	4	24		64	6	-	)	5	2	4										-	76	1	4		S	2	817
	4	7	57	-	00	37		00		7					3	2										-	26		7		9	3	294
	7	2	160		11	45	-	12		32	4			-	3	2	2				1						32	3	4		5	3	459
	2	2	4			=		4		4				-												-	10	2	3		-	-	103
180		3	46		4	00	-	2		3					7	3									•	-	6	3	2		6	-	137
			4			-				2					-											,	3		-		-	-	39
	2		10	- 5	2	2		-		2	,	,			-						2						2	-	3		2		52
			-																	-							2	1			-		12
			-			2	,			-	1					-					-							2	9		9		25
																-							,					2				-	90
																-											2	14	4		3	-	30
			*					-		1	,	10														,	-	3	1	4			6
						1				-													,			,	-	2	3				00
		,	,																							,	3		3			-	7
						1																					1		2			,	4
	4.							3													6		9	0	0		7		1				35
		,						-													15		20	,	0	,	. 9		2				51
	38	101	1,321		310	848	19	224		185	33	4	200	23	14	23	24			-	30	,	26		14	47	475	49	110		45	19	8,078
Active rheumatic fever	Chronic rheumatic	Hypertensive disease	Ischaemic heart disease	Other forms of heart	disease	Cerebro-vascular disease	Influenza	Pneumonia	Bronchitis - emphysema	and asthma	Peptic ulcer	Appendicitis	Intestinal obstruction	and hernia	Cirrhosis of liver	Nephritis and nephrosis	Hyperplasia of prostate	Abortion	Other complications of	pregnancy, etc.	Congenital abnormalities	Birth injury, difficult	labour, etc.	Other causes of perinatal	mortality	defined conditions	All other diseases	Motor vehicle accidents	All other accidents	Suicide and self-	inflicted injuries	All other external causes	† TOTALS
B 25	B 26	B 27	B 28	B 29		B 30			B 33		B 34		B 36		B 37	B 38	B 39	B 40	B 41		B 42	B 43		B 44	D 46	D +3	B 46	BE47	BE48	BE49		BESO	

\* See Analysis Overleaf

† Including 15 Deaths in the Isles of Scilly

				M	F	T
B.19	(1)	Malignant neoplasm:	buccal cavity etc.	7	4	11
	(2)	-do-	oesophagus	22	12	34
	(3)	-do-	stomach	68	47	115
	(4)	-do-	intestine	64	84	148
	(6)	-do-	lung, bronchus	157	40	197
	(7)	-do-	breast		94	94
	(8)	-do-	uterus	-	49	49
	(9)	-do-	prostate	41		41
	(10)	Leukaemia		16	11	27
	(11)	Other malignant neop	lasms	130	138	268
				505	479	984



