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THE HEALTH AND SOCIAL SERVICES OF DORSET

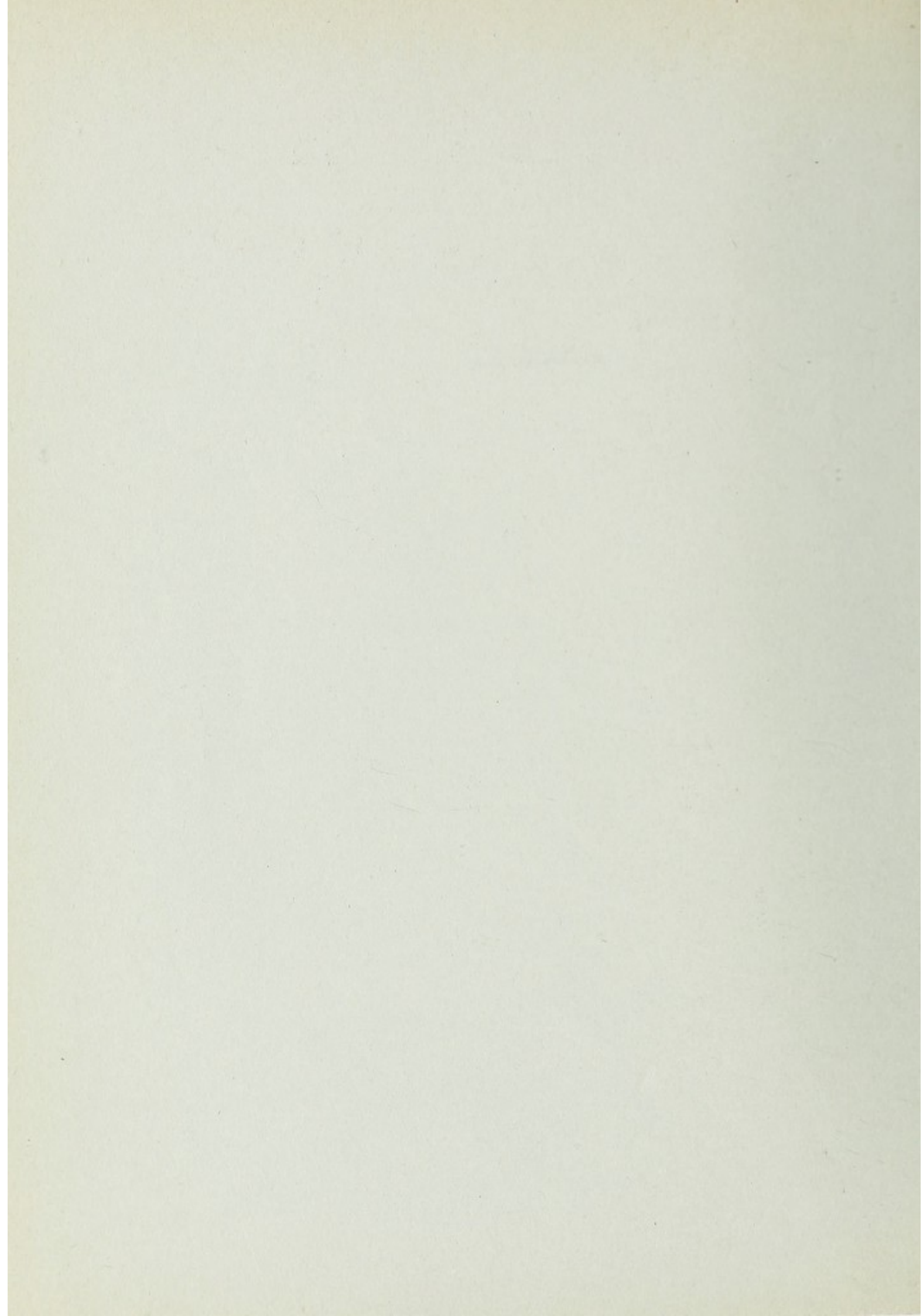


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ANNUAL REPORT of the County Medical Officer of Health for the year **1964**

A. F. TURNER, M.B., B.Ch., D.P.H.




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FOREWORD

The general statistical summary and the vital statistics for the County again illustrated the trends in health and disease which have become established during the 1960's. There was a slight decrease in total births which numbered 5,197, the infant mortality rate of 16.3 was the lowest ever recorded in the County, and once again there was only one maternal death during the year. The adjusted death rate per 1,000 population was 10.5 and compares with the National figure of 11.3. The steady upward trend over the past decade in deaths from cancer of the bronchus and coronary heart disease showed a slight fall and, although the figures are not statistically significant, they hold out a hope that the peak may have been reached in the incidence of these two serious diseases. Deaths from tuberculosis showed a slight rise of six cases but again the total figures are so small that they are not statistically significant.

Mental Health

Five years after the passing of the Mental Health Act solid progress is evident in the services for the care of the mentally subnormal. The number of training centres has doubled from two to four, the number of places has more than doubled and there are now 265 pupils in daily attendance. The residential hostel for subnormals has been used to capacity since it was opened and steps have been taken to open another in 1965. This alternative accommodation in Local Authority hostels has indirectly helped the hospital services where training of the more severe types has progressed far beyond the limits that was believed possible only a few years ago.

In the more complex field of mental illness progress has been slower but plans are now well ahead for a hostel for the elderly mentally infirm which will be a useful addition to the total number of residential places available for the care of the aged and infirm. Recruitment and training of mental health officers continues steadily, but as a full-time course of two years is required this is necessarily a slow process. A good start has been made and the after-care services are steadily improving in quality and quantity with the passage of the years and the provision of an after-care hostel for the mentally ill is receiving high priority.

Welfare

Steady progress is being made with the provision of new Part III accommodation but up to the present new building has only been keeping abreast with the reduction of beds in the old Public Assistance Institution buildings which are being closed down. Consequently, the present shortage of beds is very acute.

The new mobile clinic was started during the year and has been most useful in rural areas where suitable accommodation is not available for this type of work. A full report of its use is in the body of the report.

Staff Changes

There were a large number of staff changes during the year. Dr. G.F. Willson, who had previously held a similar appointment with Oxford City, took up his appointment as Deputy County Medical Officer of Health early in the year. Drs. Lawrence, Armit, O'Keeffe and Alice Ward all reached retiring age, and it was possible to fill the three district vacancies but considerable difficulty was experienced in replacing Dr. Ward as Deputy Medical Officer in Weymouth. Drs. Meadows and Hadden were promoted to District Medical Officers at Bridport and Swanage and Dr. Adams was appointed to Dr. Lawrence's vacancy in Dorchester. Mr. J.S. MacLachlan took up his duties as Chief Dental Officer on the retirement of Mr. Pretty who had served the County faithfully and well for thirty-two years. He was Chief Dental Officer over the difficult years after 1948 when staff was very hard to attract to the local authorities and it was, therefore,

largely by his efforts that Dorset was able to maintain an adequately staffed service. Mr. W.G. Thompson retired after fifteen years service as County Ambulance Officer and Mr. H.L. Hutchings, Chief Clerk, retired after forty-nine years unbroken service in the department except for a few years during the First World War. Mr. Hutchings was the "centre-half", backing up the medical staff with all his accumulated experience and then falling back to help the newest recruit with some simple clerical procedure. He is greatly missed and everyone in the department wishes him a very happy retirement.

I would like to thank all the staff for their help and encouragement. Many of the health services have expanded immensely during the past few years and the senior administrative staff in the health department are now fewer than when the department review was completed in 1952. This burden has fallen most heavily on the Mental Health and Welfare sections.

I would also like to take this opportunity of thanking my Chairman, Mr. Sidney J. Gale and all the members of the Health and Social Services Committee for their help and advice during the year.

A. F. TURNER

County Medical Officer of Health

Health Department,
County Hall,
Dorchester,
Dorset.

June, 1965.

HEALTH DEPARTMENT ESTABLISHMENTS

Central Staff

(as at 31st December, 1964)

COUNTY MEDICAL OFFICER OF HEALTH

A.F. Turner, M.B., B.Ch., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH

G.F. Willson, M.D., D.P.H.

CHIEF ADMINISTRATIVE ASSISTANT

V.W.V. Clarke, D.P.A.

SENIOR MEDICAL OFFICERS

W.H. Simonds, M.A., M.D.

Mary Townsend, M.B., B.S., M.R.C.P.,
D.Ch.

ASSISTANT COUNTY MEDICAL OFFICERS OF HEALTH

Jill C. White, M.B., B.S., M.R.C.S.,
L.R.C.P., D.P.H., D.Ch.

Vacancy (1)

DISTRICT MEDICAL OFFICERS OF HEALTH AND SENIOR ASSISTANT COUNTY MEDICAL OFFICERS OF HEALTH

Blandford Forum Borough, Wimborne Urban District, Blandford and Wimborne Rural Districts

G.B. Hopkins, M.B., Ch.B., D.P.H.

Bridport and Lyme Regis Boroughs, Beaminster and Bridport Rural Districts

J.G. Meadows, M.B., Ch.B., D.P.H.

Dorchester Borough, Dorchester Rural District

K.J. Adams, M.R.C.S., L.R.C.P., D.P.H.

Shaftesbury Borough, Sherborne Urban District, Shaftesbury, Sherborne and Sturminster Rural Districts

N.F. Pearson, M.R.C.S., L.R.C.P., D.P.H.

Wareham Borough, Swanage Urban District, Wareham and Purbeck Rural District

W.E. Hadden, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

CONSULTANT CHEST PHYSICIAN

A. Clarke, M.D., M.R.C.P.

CHIEF DENTAL OFFICER

J.S. MacLachlan, L.D.S., R.C.S.Eng.

DENTAL OFFICERS (7)

COUNTY PUBLIC HEALTH ENGINEER

F.M.W. King, F.S.E., F.R.S.H.,
F.I.P.H.E.

ASSISTANT COUNTY PUBLIC HEALTH OFFICER

A.H. Parry, M.R.S.H., M.A.P.H.I.

COUNTY AMBULANCE OFFICER

C.D. Legg, D.P.A.

SENIOR OFFICER FOR MENTAL HEALTH AND CARE AND AFTER CARE

H. Paling, D.P.A., D.M.A., M.S.M.W.O.

ADMINISTRATIVE ASSISTANT-SOCIAL SERVICES

R.H. Le Breton, D.P.A.

SENIOR DISTRICT WELFARE OFFICERS (3)

DISTRICT WELFARE OFFICERS (6)

COUNTY NURSING OFFICER

Irene F. Ranklin, S.R.N., S.C.M., H.V.Cert.

DEPUTY COUNTY NURSING OFFICER

Joan E. Flex, S.R.N., S.C.M., H.V.Cert.

ASSISTANT COUNTY NURSING OFFICER (1)

LIAISON HEALTH VISITOR (1)

HEALTH VISITORS (23)

NURSES AND MIDWIVES (51)

DOMESTIC HELP ORGANISER

Margaret F. Gibson, S.R.N., S.C.M.,
H.V. Cert.

HOME TEACHERS FOR THE BLIND (5)

South Dorset Area Staff

AREA MEDICAL OFFICER

E.J.G. Wallace, M.B., Ch.B., D.P.H.

DENTAL OFFICERS (3)

HEALTH VISITORS (8)

NURSES AND MIDWIVES (13)

ASSISTANT DOMESTIC HELP ORGANISER

Mary G. Brawley

ASSISTANT COUNTY MEDICAL OFFICER OF

P.M. Fea, M.B., Ch.B., D.P.H.

Delegate District - Poole Borough Staff

BOROUGH MEDICAL OFFICER OF HEALTH

J. Hutton, M.D., D.P.H.

DEPUTY BOROUGH MEDICAL OFFICER OF

HEALTH

A. McCutcheon, M.B., Ch.B., D.P.H.

BOROUGH SENIOR DENTAL OFFICER

F.E.R. Williams, L.D.S.

DENTAL OFFICERS (3)

ADMINISTRATIVE ASSISTANT FOR MENTAL

HEALTH AND WELFARE SERVICES

J. Wickens

SENIOR MENTAL WELFARE OFFICER (1)

K.W. Bamford

MENTAL WELFARE OFFICERS (2)

WELFARE OFFICERS FOR THE BLIND (3)

ASSISTANT MEDICAL OFFICERS OF HEALTH (4)

Kathleen M. Cairns, M.B., B.S., M.R.C.S.,

L.R.C.P. (Part-time)

H.C. Williamson, M.B., B.Ch., D.P.H.

Rosa Strunin, M.D., D.P.H.

Vacancy (1)

DOMESTIC HELP ORGANISER

Laura M. Thickett

BOROUGH NURSING OFFICER

Vacancy

LIAISON HEALTH VISITORS (3)

HEALTH VISITORS (12)

MIDWIVES (WHOLE-TIME) (11)

HOME NURSES (WHOLE-TIME) (17)

(PART-TIME) (2)

ASSISTANT NURSES (2)

COMMITTEES

Health and Social Services

Composition - Thirty ordinary members, Chairman and Vice-Chairman of the Council and Chairman or Vice-Chairman of the Education Committee and of the Finance Committee, ex-officio; seven co-opted Members - Total 41.

Sub-Committees of the Health and Social Services Sub-Committee

Ambulance Service Sub-Committee;

Mental Health Sub-Committee;

Public Health Sub-Committee;

Nurses Acts Sub-Committee;

Health Services Sub-Committee;

South Dorset Area Health Sub-Committee;

Social Services Sub-Committee;

Nursing Homes and Nurseries and Child-Minders
Sub-Committee.

Delegation of Functions to Councils of County Districts - Poole Borough Council

In accordance with a delegation scheme made under section 46 of the Local Government Act, 1958, Poole Borough Council administer a wide range of health and welfare services on behalf of the County Council.

GENERAL STATISTICAL SUMMARY OF THE COUNTY

The following is a summary of the vital statistics for the administrative county :-

Area in acres	..	..	..	..	..	..	..	..	..	..	..	..	623,746
Population	..	..	..	..	..	..	..	..	..	Urban	201,160		
										Rural	126,090	327,250	
Rateable value as at 1st April, 1964	..	..	..	..	..	..	..	..	..	..	..	£12,649,493	
Estimated product of a penny rate	..	..	..	..	..	..	..	..	..	..	..	£51,174	
Live Births										Male	Female	Total	
Legitimate	..	..	..	..	..	..	..	..	..	2,524	2,351	4,875	
Illegitimate	..	..	..	..	..	..	..	..	..	171	151	322	
Total live births	..	..	..	..	..	..	..	..	..	2,695	2,502	5,197	
											Dorset	England & Wales	
Birth rate per 1,000 population (recorded)	..	..	..	..	..	..	..	..	..	..	15.9		
Birth rate per 1,000 population (as adjusted by comparability factor 1.14)	..	..	..	..	..	..	..	..	..	..	18.1	18.4	
Illegitimate live births per 100 total live births	..	..	..	..	..	..	..	..	..	..	6.2		
Stillbirths													
Number (Legitimate 83, Illegitimate 7)	..	..	..	..	..	..	..	..	..	..	90		
Rate per 1,000 total live and still births	..	..	..	..	..	..	..	..	..	..	17.0	16.3	
Total live and still births	..	..	..	..	..	..	..	..	..	..	5,287		
Deaths													
Infant deaths (deaths under one year)	..	..	..	..	..	..	..	..	..	..	85		
Infant Mortality Rates :-													
Total infant deaths per thousand total live births	..	..	..	..	..	..	..	..	..	..	16.3	20.0	
Legitimate infant deaths per thousand legitimate live births	..	..	..	..	..	..	..	..	..	..	15.4		
Illegitimate infant deaths per thousand illegitimate live births	..	..	..	..	..	..	..	..	..	..	31.0		
Neo-natal mortality rate (deaths under four weeks per thousand total live births)	..	..	..	..	..	..	..	..	..	..	11.0		
Early neo-natal mortality rate (deaths under one week per thousand total live births)	..	..	..	..	..	..	..	..	..	..	9.2		
Perinatal mortality rate (still births and deaths under one week combined per thousand total live and still births)	..	..	..	..	..	..	..	..	..	..	26.1		
Maternal Mortality (including abortion) :-													
Number of deaths	..	..	..	..	..	..	..	..	..	..	1		
Rate per thousand total live and still births	..	..	..	..	..	..	..	..	..	..	0.19		
Total deaths (Actual)	..	..	..	..	..	..	..	..	..	..	3,982		
Death rate per thousand population (Actual)	..	..	..	..	..	..	..	..	..	..	12.2		
Death rate per thousand population (as adjusted by comparability factor 0.86)	..	..	..	..	..	..	..	..	..	..	10.5	11.3	

COMMENTS ON VITAL STATISTICS

Birth Rate

The recorded birthrate per thousand population was 15.9 compared with 16.4 the previous year and 14.2 in 1954. After correction for differences in population structure between Dorset and the country as a whole the rate is 18.1 which is slightly below the national figure of 18.4.

Stillbirth Rate

The stillbirth rate for 1964 was 17.0 compared with 18.4 the previous year and 23.2 in 1954.

Infant Mortality Rate

The infant mortality rate continued to fall and was 16.3 per thousand live births compared with 17.2 the previous year and 22.8 in 1954.

Death Rate

The recorded rate was 12.2 per thousand compared with 13.9 in 1963 and 11.4 in 1954. The rate is higher than the national figure of 11.3 on account of the high proportion of old people in Dorset's population. After correction the rate is 10.5.

INFECTIOUS DISEASE

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Diphtheria :-										
No. of cases notified	-	-	1	-	1	1	-	-	-	-
No. of deaths	-	-	-	-	-	-	-	-	-	-
Scarlet Fever :-										
No. of cases notified	72	107	113	147	227	140	55	53	61	57
No. of deaths	-	-	-	-	-	-	-	-	-	-
Measles :-										
No. of cases notified	4,944	1,653	2,663	2,604	3,350	1,702	5,431	606	5,255	1,595
No. of deaths	-	-	-	-	1	-	1	-	-	-
Whooping Cough :-										
No. of cases notified	591	373	870	262	161	110	238	38	111	156
No. of deaths	-	1	1	-	-	-	-	-	-	-
Typhoid and Para-typhoid Fever :-										
No. of cases notified	16	1	1	-	1	3	-	2	3	2
No. of deaths	-	-	-	-	-	-	-	-	1	-
Food Poisoning :-										
No. of cases notified	63	191	29	210	48	24	45	17	12	7
No. of deaths	-	-	2	-	-	-	-	-	-	-
Dysentery :-										
No. of cases notified	13	63	2	4	112	238	28	8	148	7
No. of deaths	-	-	-	-	-	-	-	-	-	-
Poliomyelitis (including Polioencephalitis) :-										
No. of cases notified	50	11	10	8	3	1	-	-	-	1
No. of deaths	3	1	1	-	1	-	-	-	-	-
Meningococcal Infection:-										
No. of cases notified	5	7	5	3	4	1	-	-	1	2
No. of deaths	1	1	-	-	-	2	-	1	-	1

Scarlet Fever

The incidence of scarlet fever remained very low, fifty-seven cases being notified compared with sixty-one the previous year.

Measles

One thousand five hundred and ninety-five cases were notified compared with 5,255 in the epidemic year of 1963.

Whooping Cough

There were 156 cases notified compared with 111 the previous year. The striking diminution in the prevalence of this disease is shown by the yearly average for the last five years which is 133 compared with an average of 1,149 cases only a decade ago. During the last decade there have been only two deaths attributed to whooping cough compared with nineteen deaths in the previous decade.

Diphtheria

For the fourth successive year no cases were notified. There have been only three notifications during the past ten years.

Poliomyelitis

One case was notified, the first for four years. This was a retrospective diagnosis in a man who had not been immunised against poliomyelitis and who presented with weakness in one leg. This was related to an illness of doubtful etiology which had occurred five months previously and was therefore presumed to have been poliomyelitis.

Typhoid and Paratyphoid Fever

One case of infection with *Salmonella typhi* and one of infection with *Salmonella paratyphi* B. were notified in Poole during the year.

Bacillary Dysentery

Seven cases of infection with *Shigella sonnei* were notified compared with 148 cases the previous year. All were resident in East Dorset.

Food Poisoning

There were only seven cases notified, the lowest number since notification began in 1949. In two cases the organism was not identified. Of the remaining infections two were due to *Staphylococcus aureus*, two to *Salmonella larochelle* and one to *Salmonella typhi-murium*.

Tuberculosis

Sixty-seven pulmonary and 12 non-pulmonary cases were notified during the year compared with 72 and 18 respectively in 1963. The accompanying graph compares the number of deaths from pulmonary tuberculosis during the past twenty years with those from cancer of the lung and bronchus.

PUBLIC HEALTH LABORATORY SERVICE

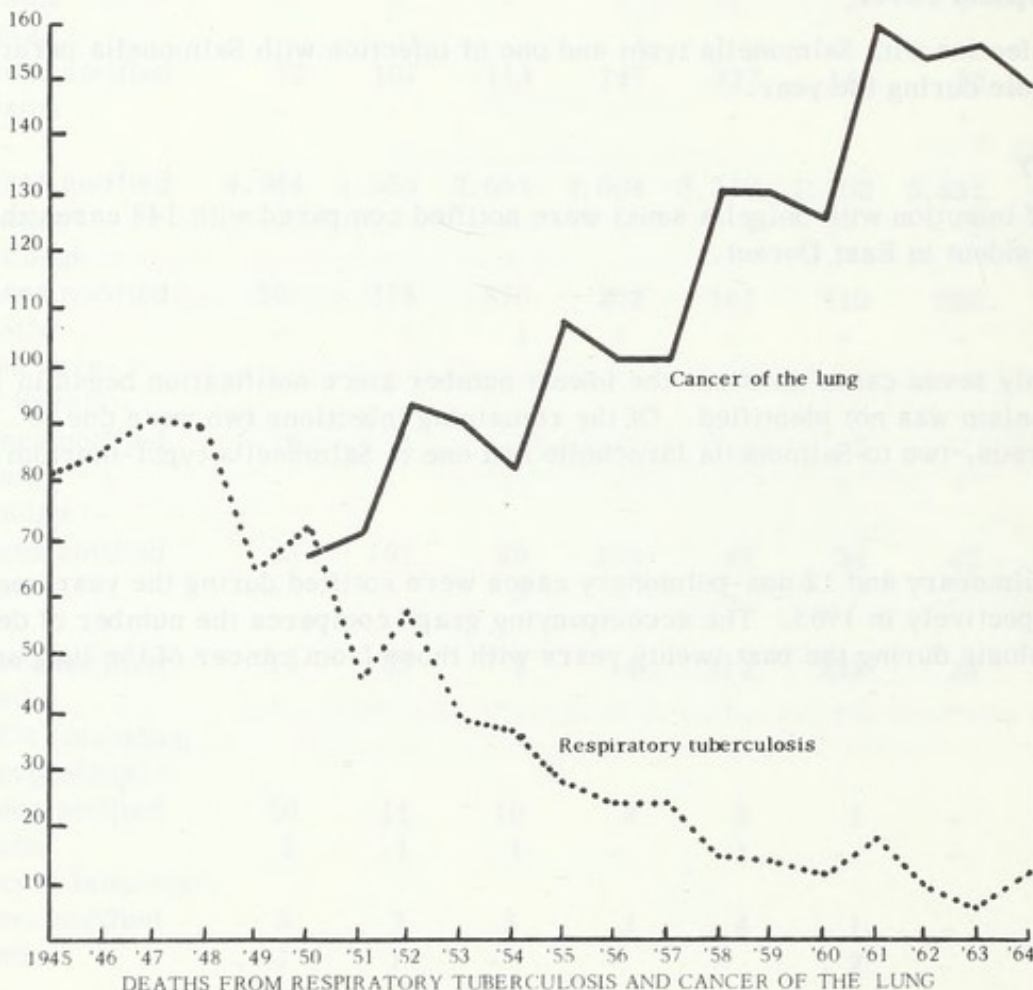
The service provided by the Medical Research Council is closely linked with the prevention of illness and the detection of infectious disease. The routine laboratory work of this service is mainly concerned with the bacteriological examinations of specimens from general practitioners, infectious diseases hospitals and local authorities and all specimens from local or food authorities. The laboratories of the service normally do not undertake work which is rightly the province of the hospital or clinical pathologist. The closest co-operation exists between the laboratory service and medical officers of health, especially with regard to epidemiological problems which arise from time to time.

The work in Dorset is covered by two laboratories, one in Dorchester and one in Boscombe, and we are most grateful for the help and advice readily given by their staffs.

Statistics

Specimens received and examined during 1964

Laboratory	Nose and throat swabs	Sputum	Faeces and Urine	Water	Milk	Ice cream	Miscellaneous	Totals
Dorchester	323	47	318	2,927	5,439	550	3,579	13,183
Boscombe	490	56	593	782	348	88	3,266	5,623
Totals	813	103	911	3,709	5,787	638	6,845	18,806



NATIONAL HEALTH SERVICE ACT, 1946

CARE OF MOTHERS AND YOUNG CHILDREN (SECTION 22)

Ante-Natal Clinics

Midwives ante-natal clinics were held in the Borough of Poole only and the attendances continued to fall. During the year, 448 women attended compared with 598 in the previous year.

	Number of women in attendance		Number of Sessions held by				Total number of sessions
	For ante-natal examination	For post-natal examination	Medical Officers	Midwives	G.P's on a sessional basis	Hospital medical staff	
1963	598	-	-	311	-	-	311
1964	448	-	-	256	-	-	256

Mothercraft and Relaxation Classes

These classes continue to be popular and there was a slight increase in the total attendances during the year with no change in the number of sessions. In the Wareham area, following complaints about the premises used for these sessions, arrangements were made to rent the doctor's surgery premises once a week. This was done after full consultation with the other doctors practising in the area, and the change was made towards the end of the year. The arrangement is working well and is a great help in fostering co-operation between the general practitioners concerned and the local authority.

Number of women attending during year

	Institutional Booked	Domiciliary Booked	Total	Total Attendances
1963	628	190	878	4,596
1964	720	155	875	5,042

Care of unmarried mothers

The arrangement with the Salisbury Diocesan Moral Welfare Association for the care of the unmarried mothers continues although there is a lessening demand for accommodation in mother and baby homes. The illegitimate births rose from 296 in 1963 to 322 in 1964, yet we were only asked to maintain twenty-seven girls in mother and baby homes compared with fifty-two in 1963.

Welfare Centres

The child welfare service has been extended during the year by the purchase of a mobile caravan and station-wagon type land rover. The caravan is well equipped and contains a consulting room and a waiting room which will hold four mothers and babies at a time.

The caravan started operation in September and is used where the clinics were held in unsuitable halls and where there has been no clinic previously. Where numbers justify it halls

are used for waiting purposes. Health visitors find that this clinic saves time preparing halls and the mothers like the clean clinical conditions. A comparison of the use of child welfare clinics in the county area during the three months September-December, 1964, with the corresponding three months in 1963, shows that the total number of attendances was down by 176 although the numbers seen by medical officers rose by 295. This result was achieved in spite of an overall reduction of nine child welfare sessions and indicates that a more efficient service was being operated.

By the end of the year the mobile clinic was used in conjunction with a hall at Corfe Mullen, Handley, Lytchett Matravers, Lytchett Minster, Sandford, Thorncombe and Lulworth Camp. It also visited Martinstown, Broadmayne, Hazelbury Bryan, Hampreston and Holt, Bradford Abbas, Briantspuddle, Winfrith and Wool.

As in previous years, the child welfare clinics place most stress on the routine examination of healthy babies to pick out defects early, immunisation procedures and health education. The attendances generally showed a slight rise over the year.

Number of children who attended during the year					No. of Sessions held by				Total No. of sessions	No. of children referred	No. on "at risk" Register
Born in year of report	Born in previous year	Other Pre-school children	Total	M.O.	H.V.	G.P.	Hosp.				
1963	3,450	3,503	3,831	10,784	1,129	829	-	-	1,958	208	887
1964	3,449	3,543	4,405	11,397	1,164	892	-	-	2,056	191	1,734

Handicapped Babies

(a) Assessment of babies with possible handicaps

The special clinic run by Dr. Vulliamy (the Consultant Paediatrician) and Dr. Townsend at Dorchester was continued throughout the year. Twenty-one sessions were held at which twenty new cases were seen, several of these being referred direct to the clinic by the general practitioners and others being transferred from Dr. Vulliamy's out-patient session at the hospital.

The Griffiths method of testing the general level of ability in children aged 0-2 years continues to be of great help in assessing these children. During the year twenty-seven children were tested by this method, fourteen of them having attended the clinic, eight being tested at the request of the Children's Officer in connection with adoptions, and most of the rest being tested at Dr. Vulliamy's request. In addition, three older children were assessed by the Stanford Binet test.

(b) Handicapped Babies' Register

A register has now been started of all handicapped children under five years of age. This includes all mentally and/or physically handicapped babies and the health visitors are asked to report all such babies in their area as soon as they become aware of them.

The purpose of this register is to make sure that these children have all the help they need, and that the mentally handicapped are introduced to the training centre early. A report is obtained from the health visitor at intervals and, if necessary, intelligence testing is carried out later in order to assess the probable educational needs of these children before they reach school age.

(c) Congenital Abnormalities present at birth

The birth notification card has been altered to allow for the insertion of details of any congenital abnormalities present at birth. At the request of the Ministry of Health forms are completed for each baby concerned and returned to the Ministry at monthly intervals. This is in order to bring to light any increase of congenital abnormalities (such as occurred with the use of thalidomide) at the earliest possible time.

Contraceptive Clinics

The County Council have continued to hold these clinics in Poole and South Dorset, but towards the end of the year arrangements were made for the work in South Dorset to be taken over by the Family Planning Association as in the rest of the county area.

Clinic	Number of sessions		First Attendances		Total Attendances	
	1963	1964	1963	1964	1963	1964
Poole	72	70	125	93	831	767
Portland	18	5	42	12	78	19
Weymouth	38	25	137	111	233	133
Total	128	100	304	216	1,078	983

Premature Infants

Prematurity continues to be a major cause of stillbirths and neonatal deaths. This year, although there was an improvement in the percentage of babies surviving beyond the first month, there was an increase in the percentage of stillbirths among premature infants.

	Total Births	Total prem. births	Percent- age of prem. births	Total live births	Percent- age of prem. still births	No. live prem. babies surviving 28 days	Percent- age of live prem. babies surviving 28 days	No. prem. infants born at home	Percentage of total prem. infants born at home
1962	5,174	347	6.7%	297	16.8%	250	85.5%	59	17.0%
1963	5,388	329	6.1%	279	15.2%	246	88.2%	55	16.7%
1964	5,287	335	6.3%	281	16.4%	253	90.0%	41	12.2%

Day Nurseries

The only day nursery run by the County Council is in the Borough of Poole. There are fifty places and the average daily attendance over the year rose from thirty in 1963 to forty-two in 1964.

Distribution of Welfare Foods

The demand for all welfare foods with the exception of concentrated orange juice continues to drop steadily. The service runs satisfactorily through the help kindly given by the Women's Voluntary Service and other voluntary helpers. Efforts are made to keep distribution centres available within easy reach of as many of the population as possible.

	N.D.M.	C.L.O.	A. & D.	Orange Juice
1962	50,407 Tins	5,584 Bottles	6,477 Packets	54,725 Bottles
1963	45,642 "	4,667 "	5,689 "	55,605 "
1964	38,994 "	4,177 "	4,929 "	56,786 "

MIDWIFERY (SECTION 23)

Full-time midwives are employed only in Poole and the South Dorset area, the midwives elsewhere being also district nurses. Staff recruitment continued to be difficult and at the end of the year there were three district nurse/midwife vacancies in the county area. By employing part-time state registered or state enrolled nurses to help with the general work, an effort has been made to relieve the district nurse-midwives and to leave them time to do midwifery over a wider area. Co-operation between general practitioners and midwives continues to be good.

During the year there were 1,378 domiciliary confinements attended by county council midwives, which shows a decrease of 169 deliveries from the preceding year. In addition there were 632 early discharges from hospital needing the services of the domiciliary midwives. Twenty-nine pupil midwives completed their Part II training in 1964 compared with forty-three pupils trained in 1963, and there were ten still in training at the end of the year. For the last three months of the training the pupils work on the district with County Council midwives in all areas of the county.

	Number of domiciliary confinements attended by midwives under N.H.S. arrangements			No. of early discharges attended by midwives	Cases in which medical aid was summoned
	Dr. booked	Dr. not booked	Total		
1963	1,537	10	1,547	571	257
1964	1,372	6	1,378	632	197

Comparison between hospital and domiciliary confinement 1963-64

	Poole		S. Dorset Area		Rest of County		Whole County	
	1963	1964	1963	1964	1963	1964	1963	1964
1. Total live births during year	1,614	1,568	1,150	1,110	1,917	1,887	4,681	4,565
2. Percentage of notified live births which took place in hosp. or nursing home.	66%	72%	74%	74%	64%	67%	67%	70%
3. Percentage of domiciliary confinements.	34%	28%	26%	26%	36%	33%	33%	30%

The figures show a steadily increasing percentage of hospital confinements this trend being most marked in the Poole area, where the bed position has improved in recent years.

Loss of life associated with childbirth

There was again one maternal death during the year. This was a woman of thirty-two who died as a result of an anaesthetic given for a Caesarian section. The baby was born alive.

Neonatal Deaths

There were forty-eight neonatal deaths during the year compared with sixty-two deaths in 1963. The highest percentage of deaths was due to prematurity, but there were a considerable number due to congenital defects and atelectasis.

Cause of Death	Number	Percentage of Total	Percentage in 1963
Prematurity	20	41.7	43.5
Congenital Defects	9	18.8	19.4
Birth Injury	5	10.4	16.1
Atelectasis	7	14.5	8.1
Resp. Infection	2	4.2	4.8
Rhesus Factor	0	0.0	1.6
Others	5	10.4	6.5
	48	100 (48 deaths)	100 (62 deaths)

HEALTH VISITING (SECTION 24)

The number of health visitors, who also act as school nurses, has remained up to the establishment for most of the year. Help is given to the health visitors from the part-time staff, particularly in routine school work. The health visitors continue to visit all babies aged 0-5 years, those elderly people who need visits and of whom the health visitor is aware and the physically handicapped of all ages. They also do routine Heaf tests (to detect those children who have been in contact with tuberculosis) and vision testing at school entry, phenylketonuria tests on all new babies before the age of six weeks, and hearing tests on all babies as near the age of seven months as possible and in any case before the baby becomes one year.

In connection with the hearing tests, a two day course was held at Dorchester in November by Professor Sir Alexander and Lady Ewing and was attended by twelve health visitors. This means that practically all the health visitors in the County and the South Dorset areas have been trained to screen babies and young children for defective hearing. All babies found by the health visitors whose hearing is suspect are referred to Miss Andress for further assessment. In this way we hope to diagnose the deaf child as early in life as possible so that he may be given the maximum help in overcoming his disability.

Cases visited by Health Visitors

	1963	1964
Children born in year of report	5,419	5,324
Children born in preceding year	6,624	6,013
Other pre-school children	12,001	11,782
Total Children 0-5 years	24,044	23,119

Cases visited by Health Visitors (Cont'd.)

	1963	1964
Persons aged 65 or over	3,010	2,788
Number of these who were visited at the special request of general practitioner or hospital	656	669
Mentally disordered persons	78	31
Number of these who were visited at special request of general practitioner or hospital	19	13
Persons discharged from hospital (other than mental hospital)	525	586
Number of these who were visited at special request of general practitioner or hospital	143	284
Number of T.B. households visited by district health visitors	254	243
Number of T.B. households by T.B. Health Visitors	658	343
Number of households visited on account of other infections	34	17

These figures show a slight reduction in the number of cases visited but over the county area the total number of visits paid by health visitors to children aged 0-5 years increased by 4.8 per cent and to people over sixty-five increased by 15.2 per cent.

HOME NURSING (SECTION 25)

Staff recruitment continues to present a difficulty, particularly with district nurse/midwives and at the end of the year there were three vacancies in the county area. By using the part-time services of married State Registered or Enrolled nurses it has been possible to cover vacancies in most areas.

During the year 7,018 cases were nursed of whom 58.4 per cent were over sixty-five years.

	1963	1964
Total number nursed during year	7,000	7,018
Number under five at first visit in year	336	458
Number over sixty-five	4,305	4,090

IMMUNISATION AND VACCINATION (SECTION 26)

The recommended programme of prophylactic procedures has not been altered this year and is as follows :-

Triple antigen is given at three, four and five months of age
(Whooping cough, diphtheria and tetanus)

A booster of triple antigen is given about seventeen months

A booster of diphtheria and tetanus antigen is given at about five years of age

Poliomyelitis vaccination (usually oral) is given at six, seven and eight months of age

A booster of polio vaccine is given in the first term of school

Smallpox vaccination is given during the second year

The number of primary immunisations with triple antigen and polio vaccine continues to rise slowly as do the number of booster injections of the triple antigen. Poliomyelitis vaccine boosters are less this year due to the fact that a great effort was made during 1963 to see that all school children received a booster and, therefore, fewer were given in 1964.

The smallpox vaccination figures for this year show an improvement over last year in the number of vaccinations performed in the 1-4 year group. This indicates that many parents are having their children vaccinated in the second year. The total number of vaccinations performed remains below the 1961 level although much better than last year.

Number of children who completed primary course of immunisation and polio vaccination

	Diphtheria	Whooping cough	Tetanus	Polio (oral)	Polio Inject.	Polio oral and inject.	Total polio
1962	3,477	4,255	5,275	3,834	4,749	4,622	13,165
1963	4,004	3,829	5,726	5,259	944	825	7,028
1964	4,653	3,940	6,066	5,838	208	241	6,287

Number of children receiving secondary (booster) doses

	Diphtheria	Whooping cough	Tetanus	Polio (oral)	Polio Inject.	Total polio
1962	3,914	1,853	2,581	1,778	1,001	2,779
1963	4,396	1,725	3,751	6,194	356	6,550
1964	5,570	2,054	5,425	4,774	27	4,801

Number of children receiving smallpox vaccination

	Primary Vaccination			Re-vaccination
	0-1 year	1-4 years	Total of all ages	All ages
*1961	1,098	1,888	3,488	498
1963	470	967	1,774	876
1964	393	2,189	2,842	990

*1961 figures are used instead of 1962 as the numbers vaccinated in 1962 were abnormally high because of the smallpox outbreak.

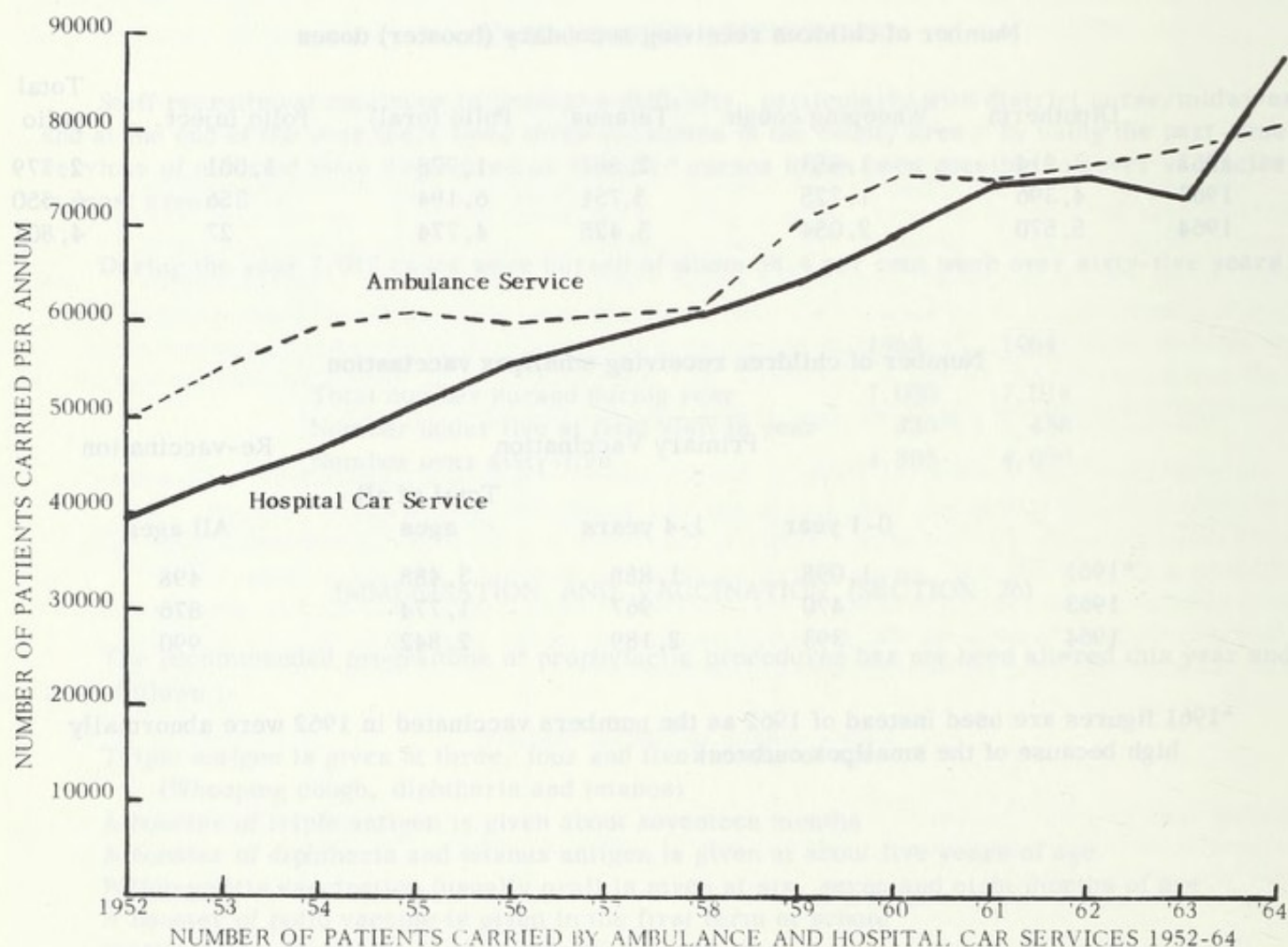
Organisation and Control of the Service

The service is centrally controlled by staff in the health department at Dorchester by day, from 8 a.m. to 10 p.m., and by the Fire Service at night, with local sub-controls at Poole and Weymouth. No changes have been made during the year.

Conveyance of Patients

1. By road - During 1964, the service conveyed 169,857 patients a total of 1,378,021 miles, an increase of 11.8 per cent and 10.3 per cent respectively compared with 1963. Most of the increased work was absorbed by the hospital car service. The large increase in the number of cases conveyed is partly explained by the fact that fewer patients were conveyed during the first three months of 1963 owing to the weather conditions existing at that time. Even allowing for this fact, however, the figures do indicate a substantial rise in demands on the service, particularly in respect of out-patient, physiotherapy and training centre attendances.

The following graph shows the number of patients conveyed by the ambulance and hospital car services since 1952.



2. By rail - Two hundred and ninety-six patients were conveyed a total of 39,404 rail miles during the year compared with 326 patients conveyed a total of 39,872 rail miles during 1963.
3. By air - During the year arrangements were made for one patient from a Poole hospital to be conveyed by helicopter to the Atkinson Morley Hospital at Wimbledon.

This responsibility for making arrangements for patients to travel by air in circumstances of critical emergency was placed on local health authorities by the Minister of Health on the 14th October, 1964. Following the receipt of the Minister's circular dealing with this matter, detailed instructions as to procedure and action to be taken were issued to all ambulance and Control staff. These instructions and the question of landing sites were discussed with the Officer in Charge of the Helicopter Base at Portland.

Staff

On the 31st October, 1964, Mr. W.G. Thompson, O.B.E., retired after fifteen years service as County Ambulance Officer and was succeeded by Mr. C.D. Legg who, for a number of years, had been senior clerk in the ambulance section.

Establishment - Two additional full time drivers were appointed at Poole during December and the staff establishment of the service as at 31st December, 1964, was as follows :-

County Ambulance Officer	1
Clerical and operational staff	6
Supervisor, Deputy Supervisor and head drivers	12
Full time driver/attendants	39
Part time and voluntary staff (to equivalent full time)	19
Total	77

Training - For a number of years great importance has been attached to the training of ambulance staff and another course in advanced first aid was organized during the year and was well attended. The report of the Working Party set up by the Minister of Health to consider staff training and other matters is eagerly awaited.

Vehicles

Establishment - The establishment of vehicles as at 31st December was as follows :-

Ambulances	20
Dual purpose vehicles	14
Buses	4
Total	38

Replacement of Vehicles - During the year six vehicles were replaced. The average age of these vehicles was nine years eight months and the average mileage run 175,367 miles. This replacement of ambulances always poses for local authorities the question of obtaining suitable vehicles. The vehicles at present available are constructed on ordinary or slightly modified commercial chassis and it is to be hoped that the Minister of Health's Working Party will give serious consideration to ways of improving their design and construction.

Stations

The service continues to be provided from fourteen stations, including two administered by agency bodies. No new premises were built during the year.

Radio Communications

In order to comply with G.P.O. requirements, arrangements were made for the 50 Kc/s base equipment at Poole and Weymouth ambulance stations to be replaced by 25 Kc/s equipment. This new equipment has just been installed.

Comparative Mileage Table

Year	Ambulance Service		Hospital Car Service		Both Services Combined	
	Mileage for year	Increase (+) or decrease (-) on previous year	Mileage for year	Increase (+) or decrease (-) on previous year	Mileage for year	Increase (+) or decrease (-) on previous year
1955	459,421	+ 24,762	471,308	+ 51,077	930,729	+ 75,839
1956	443,576	- 15,845	501,109	+ 29,801	944,685	+ 13,956
1957	448,778	+ 5,202	482,494	- 18,615	931,272	- 13,413
1958	461,046	+ 12,268	577,098	+ 94,604	1,038,144	+ 106,872
1959	487,746	+ 26,700	612,880	+ 35,782	1,100,626	+ 62,482
1960	487,922	+ 176	640,262	+ 27,382	1,128,184	+ 27,558
1961	527,136	+ 39,214	714,147	+ 73,885	1,241,283	+ 113,099
1962	518,983	- 8,153	740,794	+ 26,647	1,259,777	+ 18,494
1963	512,242	- 6,741	737,551	- 3,243	1,249,793	- 9,984
1964	524,387	+ 12,145	853,634	+ 116,083	1,378,021	+ 128,228

Efficiency Table

Year	Ambulance Service		Hospital Car Service	
	Average mileage per patient	Average number of patients per journey	Average mileage per patient	Average number of patients per journey
1955	9.37	1.97	9.61	3.00
1956	9.36	2.02	9.49	3.07
1957	8.98	2.23	9.83	3.00
1958	9.18	2.32	9.70	3.02
1959	8.35	2.66	9.77	3.02
1960	7.65	2.81	9.30	3.18
1961	8.37	2.63	9.82	3.24
1962	8.37	2.59	10.16	3.14
1963	8.28	2.62	10.02	3.10
1964	8.32	2.60	9.71	3.14

Civil Defence

Ambulance and First Aid Section - The total strength of the section at the end of the year was 368, an increase of forty since December, 1963.

Training has continued wherever possible.

It must be reported that much planning needs to be done. With the approval of a new control structure and system for the county it will be necessary to plan the deployment of the section and its integration with the peace-time service. It would, however, be premature to make these plans until it is known what the Regional Hospital Board proposals are for the hospital services in the county. The consequential detailed planning for the mobilization of volunteers and the earmarking of premises must also be held in abeyance for the time being.

PREVENTION OF ILLNESS, CARE AND AFTER CARE (SECTION 28)

The County Council continued to utilise the valuable services of the Dorset Branch of the British Red Cross Society in meeting the requirements of persons whose needs were attributable to illness. Where necessary care and after-care services were provided for patients discharged from hospital and homebound invalids including the aged and chronic sick.

Liaison health visitors co-operated with the hospitals and other services to assess the needs of persons due for discharge and arrangements were made for the provision of medical equipment or nursing aids if required.

During the year arrangements were made for the admission of ten patients to holiday homes for periods of rest and recuperation and charges in these cases were assessed in relation to the patient's needs.

Tuberculosis

In accordance with the Public Health (Tuberculosis) Regulations, 1952, a central register is maintained at the county health department. Close co-operation is maintained between the district medical officers, health visitors and chest physicians, appropriate supervision being arranged for each case.

The Dorset Branch of the British Red Cross Society continues to provide a useful after-care service to meet the needs of tuberculosis patients.

Grants for free milk are issued to necessitous cases by the county health department but this service has contracted in recent years, as few new patients are off work long enough to need it, although it remains a help to the long-term case.

B.C.G. Vaccination of Schoolchildren

All children starting school are given a tuberculin skin test and the families of any children with positive reactions are investigated in an effort to determine the source of the infection. During the year 2,211 children were tested of whom only thirty-one (1.4 per cent) gave a positive reaction.

A total of 3,713 thirteen year old children were also Heaf tested and 8.9 per cent were found to be positive reactors compared with 11.5 per cent in 1963. The positive reactors were all

X-rayed but none were found to have any active lesion. A total of 3,201 negative reactors were given protection by means of B.C.G. vaccination.

Mass Miniature Radiography

As in previous years mass miniature radiography has been undertaken in the county by the Dorset, West Hampshire and South Wiltshire unit of the Wessex Regional Hospital Board and I am indebted to the medical director for details of the work in this area.

	1962	1963	1964
Total number of cases examined by 35 mm. and 100 mm. units	27,615	16,936	31,255
Number of cases of T.B. referred for hospital treatment	12	12	10
Number of cases of T.B. referred for domiciliary treatment	8	7	5
Number of cases of T.B. requiring supervision	54	47	23
Total	74	66	38
Number of cases of carcinoma of lung	29	27	29
Number of cases of cardiovascular lesion	63	48	54
Number of cases of non-tuberculous conditions	200	123	147
Number of cases not yet classified	5	15	14

Venereal Disease

The 281 Dorset patients dealt with for the first time at treatment centres in 1964 are classified in the following table. The figures in brackets relate to the previous year.

Treatment Centre	Syphilis	Gonorrhoea	Other conditions	Totals
Bournemouth	- (-)	12 (7)	43 (50)	55 (57)
Dorchester	- (2)	1 (2)	21 (17)	22 (21)
Poole	2 (3)	28 (18)	82 (75)	112 (96)
Salisbury	- (-)	2 (-)	3 (4)	5 (4)
Yeovil	- (-)	- (-)	2 (-)	2 (-)
Weymouth	- (1)	6 (10)	79 (57)	85 (68)
Totals	2 (6)	49 (37)	230 (203)	281 (246)

HEALTH EDUCATION

Personal contact between mothers and medical and nursing staff in the homes and clinics still remains the most fruitful field for health education, but during the year a considerable amount of formal health education was undertaken.

In March there was a four-day local government exhibition in which all sections of the department were represented and two films on health education were included in a selection of films on various aspects of local government.

In June a dental caravan supplied by the General Dental Council was stationed at the Royal Counties Show for four days. During this time, the members of the Dorset dental staff were

present to answer questions from the general public.

The intensive campaign against smoking carried out at the end of 1963 in the schools of the Blandford and Wimborne areas was followed up by talks and film shows by the district medical officer in the same schools. Talks and films on the same subject were also shown in schools in other parts of the county.

Another new venture was a lecture on emergency childbirth given to the police force in various parts of the county by the County Nursing Officer and Dr. Townsend. The lecture was illustrated in each case by the film "My First Baby". This was done at the request of the Chief Constable and seems to have been appreciated. The County Nursing Officer also gave lectures on the same subject to County Ambulance staffs.

The following talks and films were presented during the year :-

	Number of Talks and/or Films	Total Audiences
Child Care and Mothercraft	136	1,899
Dental Hygiene	71	4,917
Smoking	23	1,564
Home Nursing	21	311
Home Safety	15	4,059
Vaccination and Immunisation	14	4,066
First Aid	13	637
Welfare Services	9	210
Personal Hygiene	6	141
Food Hygiene	6	202
Care of the Elderly	3	104
Physically Handicapped	3	426
Mental Health	3	142
Medical (Specialist Audience)	1	30
Totals	324	18,708

Material used during year :	Leaflets	16,950
	Posters	1,720
	Booklets	1,855

CHIROPODY

This service, other than at Weymouth, continued to be provided on the Council's behalf by the Dorset Branch of the British Red Cross Society at the Council's clinics and other premises throughout the county, a grant being made to the Society to meet the cost.

The extremely efficient manner in which the Society have continued to organise the arrangements and the valuable work so freely undertaken by those engaged in the service is again worthy of the highest praise.

Patients are seen by appointment and a nominal charge of 2s.6d. is made towards the cost of the chiropodists' fees, dressings, etc. Free transport is arranged when necessary and priority

is given to elderly and physically handicapped persons and expectant mothers. The service is widely appreciated and by the end of the year sessions were held as follows :-

Town or Village	No. of 3-hourly Sessions per Quarter	No. of Patients Registered	Waiting List
Beaminster	6	29	1
Blandford	48	238	-
Bridport	38	216	-
Charmouth	9	67	-
Dorchester	36	282	-
Ferndown	9	70	4
Gillingham	26	106	-
Hamworthy	26	142	-
Lyme Regis	7	52	-
Maiden Newton	13	92	1
Marnhull	6	28	-
Poole	100	551	16
Shaftesbury	15	80	-
Sherborne	19	86	-
Shillingstone	8	27	2
Stalbridge	6	24	-
Sturminster Newton	11	50	-
Swanage	48	287	-
Verwood	14	102	-
Wareham	21	110	-
Wimborne	14	96	12
Total	475	2,735	36

In Weymouth, where a part-time chiropodist is directly employed by the County Council, a total of 1,389 attendances were made at sessions during the year, and there were 322 patients on the register at the end of 1964.

DOMESTIC HELP SERVICE (SECTION 29)

The number of cases assisted in 1964 was 1,855 compared with 1,922 in 1963. There was a decrease in those assisted in South Dorset while in the County area the figure was increased by 110. The greatest need for the service continues to be for the aged and while no one is refused help, a certain number of people do not accept it because of the cost.

The full charge to the patient is 4s.7d. per hour and application of the scale for recovery of charges means that persons in receipt of National Assistance are required to contribute 2s.6d. per week towards the cost. The total cost per case in the County during 1963/64 was £29.14s.0d., an increase of 15s.0d. on the previous year, compared with an average of £35.17s.0d. for all English counties.

In many parts of the county, bus services are negligible and it is found increasingly difficult to recruit suitable women who are willing to cycle or walk the considerable distances which may be involved when visiting cases. Consequently, it is essential that staff able to travel in their own cars are available if all persons living in inaccessible areas or requiring

urgent help are to be visited promptly. Although weekend help, evening assistance and the night sitting service continue to need expansion, the need in such cases is being met wherever possible.

In order to improve the supervision of staff and the day to day organisation of the service, it was decided that more district organisers should be appointed. In April, therefore, responsibility in the Wimborne/Wareham/Swanage area was divided by appointing one whole-time organiser for the Wimborne area and one half-time organiser for Wareham and Swanage. For the time being the County Organiser continues to be responsible for the service in Dorchester and the area to the west although it is extremely difficult to exercise adequate supervision over the peripheral area. It is hoped that it will eventually prove possible to appoint a part-time organiser for the west of the County.

The types of case helped were as follows :-

Aged 65 or over at first visit	1,456
Aged 65 or under at first visit	
Chronic sick	121
Maternity	135
Mentally Disordered	3
Others	140
Total	1,855

MENTAL HEALTH

(MENTAL HEALTH ACT, 1959)

The Mental Health Sub-Committee is responsible for the mental health services apart from the non-residential services in Poole which are delegated to the Borough Council and liaison between the two authorities is maintained by the senior officer for mental health. The statistics given in the tables to follow relate to the whole County, including Poole.

Visiting Committees are appointed for each of the training centres and the hostel. Although they have no executive powers they are able to consider matters relating to day-to-day administration and make recommendations to the Mental Health Sub-Committee.

Apart from patients in the Lyme Regis area who were admitted to the Digby-Wonford Hospital, Herrison Hospital accepted the majority of the mentally ill. Subnormal patients continued to be admitted to the Coldeast, Tatchbury Mount and Royal Western Counties Hospitals and we are grateful for the help given by the staffs of all the hospitals mentioned.

In addition to the senior officer for mental health there are four senior district welfare officers, seven district welfare officers and a trainee. For the purposes of administering the domiciliary services the County is divided into four areas, each staffed by a team of district officers with a senior officer in charge. Those working solely in the County (excluding Poole) also have duties relating to general welfare under the National Assistance Act, but the officers in Poole are whole-time mental welfare officers.

During the year one trainee district welfare officer completed her two year course of training for the Certificate in Social Work at the North-Western Polytechnic, London, and another officer continued a similar course at the Bristol College of Commerce. In September, a district welfare officer commenced a two year course in Croydon, a trainee being appointed to undertake his duties in his absence.

Also during the year one senior district welfare officer attended a refresher course at Bristol University, one attended a study course in London and one attended a residential conference of mental welfare officers and psychiatric social workers in Reading.

The great volume of mental health work undertaken by the district welfare officers during the year can be seen from the following table which shows the total number of visits made by them.

To persons suffering from mental illness	2,312
To persons suffering from mental subnormality	3,749
After care visits	3,710
Other visits	3,014
	12,785

In October the Chairman and Vice-Chairman of the Mental Health Sub-Committee together with its officers met the Mental Health Committee of the Wessex Regional Hospital Board and representatives of Herrison Hospital Management Committee to discuss the plans for the future development of the mental health services in the area. This type of liaison is clearly of the greatest value in co-ordinating the development of the hospital and local authority services and it was decided that a further meeting should take place in the summer of 1965.

MENTAL ILLNESS

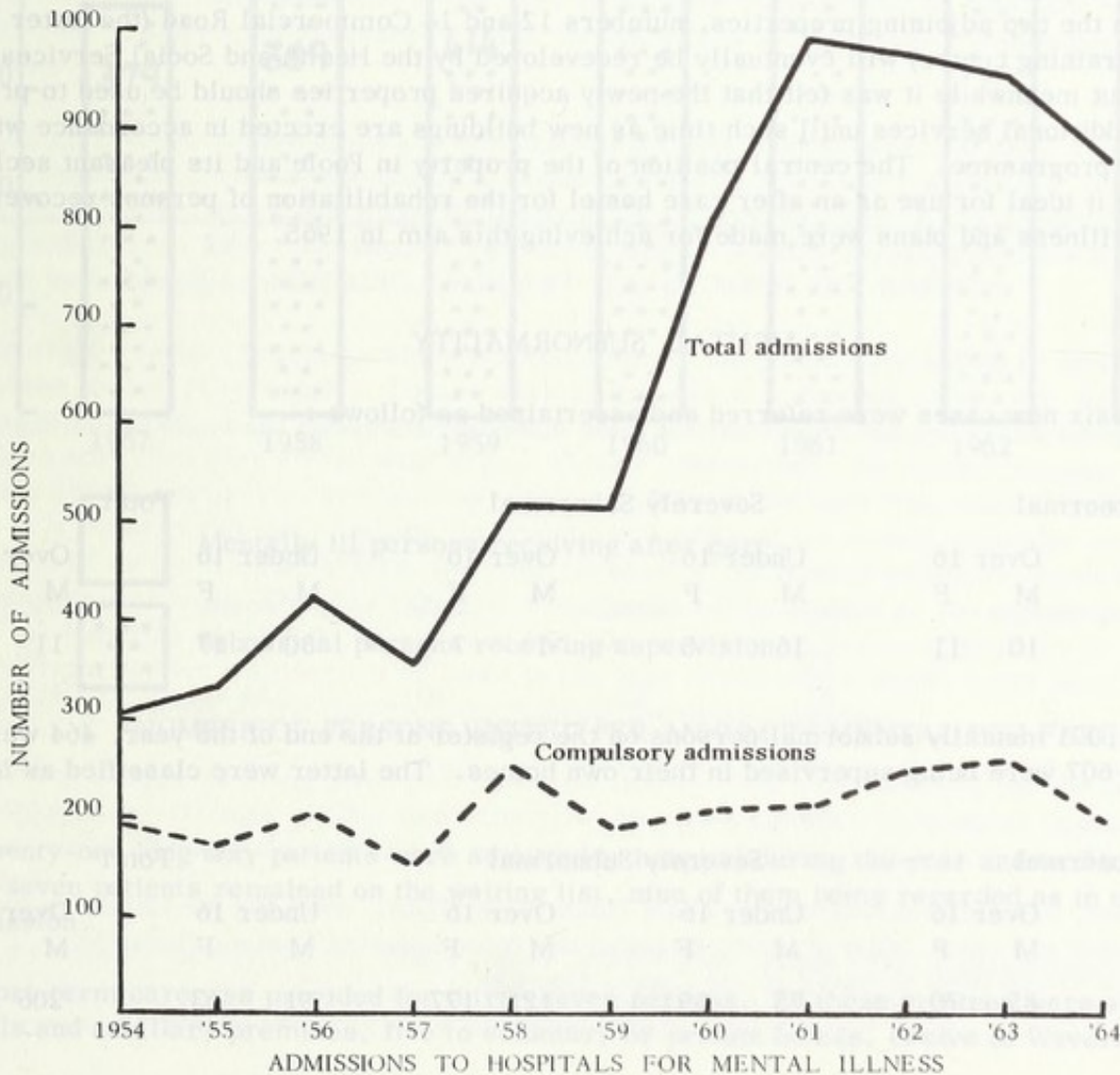
Admissions to Hospital

The following table shows the number of patients admitted to hospital through the agency of the mental welfare officers :-

Year	Informal		Observa- tion (Sect. 25)		Treatment (Sect. 26)		Emergency (Sect. 29)		Court Orders		Total		Grand Total
	M	F	M	F	M	F	M	F	M	F	M	F	
1964	233	433	37	71	9	21	19	38	7	-	305	563	868
1963	250	440	23	73	14	14	49	85	7	-	343	612	955
1962	278	442	17	34	18	33	62	90	4	-	379	599	978

The number of patients admitted to hospital diminished for the third year running, although still remaining half as many again as in 1960. Of the 868 admissions, 202 were under compulsion compared with 265 the previous year. This is the smallest proportion of compulsory admissions so far recorded being 23.2 per cent compared with 27.8 per cent in 1963 and 69.6 per cent in 1953.

Three hundred and thirty of the admissions were known to have received hospital treatment for mental illness on previous occasions this being 38.0 per cent of the total compared with 33.6 per cent the previous year.



Care and After Care

There was again a rise in the number of cases requiring after care following discharge from hospital, 355 patients being referred for follow-up, compared with 338 in 1963. This was the highest annual figure since the scheme was introduced and altogether 3,710 after care visits were paid by the mental welfare officers. The problem of the additional clerical work resulting from the growing case loads of the mental welfare officers which was mentioned in last year's report intensified during the year, although relief for some of the officers was provided at its close. Arrangements have since been made for clerical assistance to be provided for the remainder.

Copies of all after care reports submitted by the officers continued to be passed to the hospital doctors and general practitioners for their information.

The weekly Social Club at Branksome Clinic, Poole, continued to play a useful role in the rehabilitation of patients and use was also made of the club facilities provided at Blackdown Day Hospital, Weymouth, which is administered by Herrison Hospital.

Regular weekly case conferences were held at Herrison Hospital and attended by the mental welfare officers who were able to discuss with the responsible medical officers the needs of patients about to be discharged. Similar case conferences were also held weekly at St. Anne's Hospital, Canford Cliffs and attended by the Poole Officers.

After care hostel

During the year the purchase was completed of a house at 10 Commercial Road, Poole. This together with the two adjoining properties, numbers 12 and 14 Commercial Road (the latter being the present training centre) will eventually be redeveloped by the Health and Social Services Committee but meanwhile it was felt that the newly acquired properties should be used to provide temporary additional services until such time as new buildings are erected in accordance with the development programme. The central position of the property in Poole and its pleasant secluded garden make it ideal for use as an after care hostel for the rehabilitation of persons recovering from mental illness and plans were made for achieving this aim in 1965.

MENTAL SUBNORMALITY

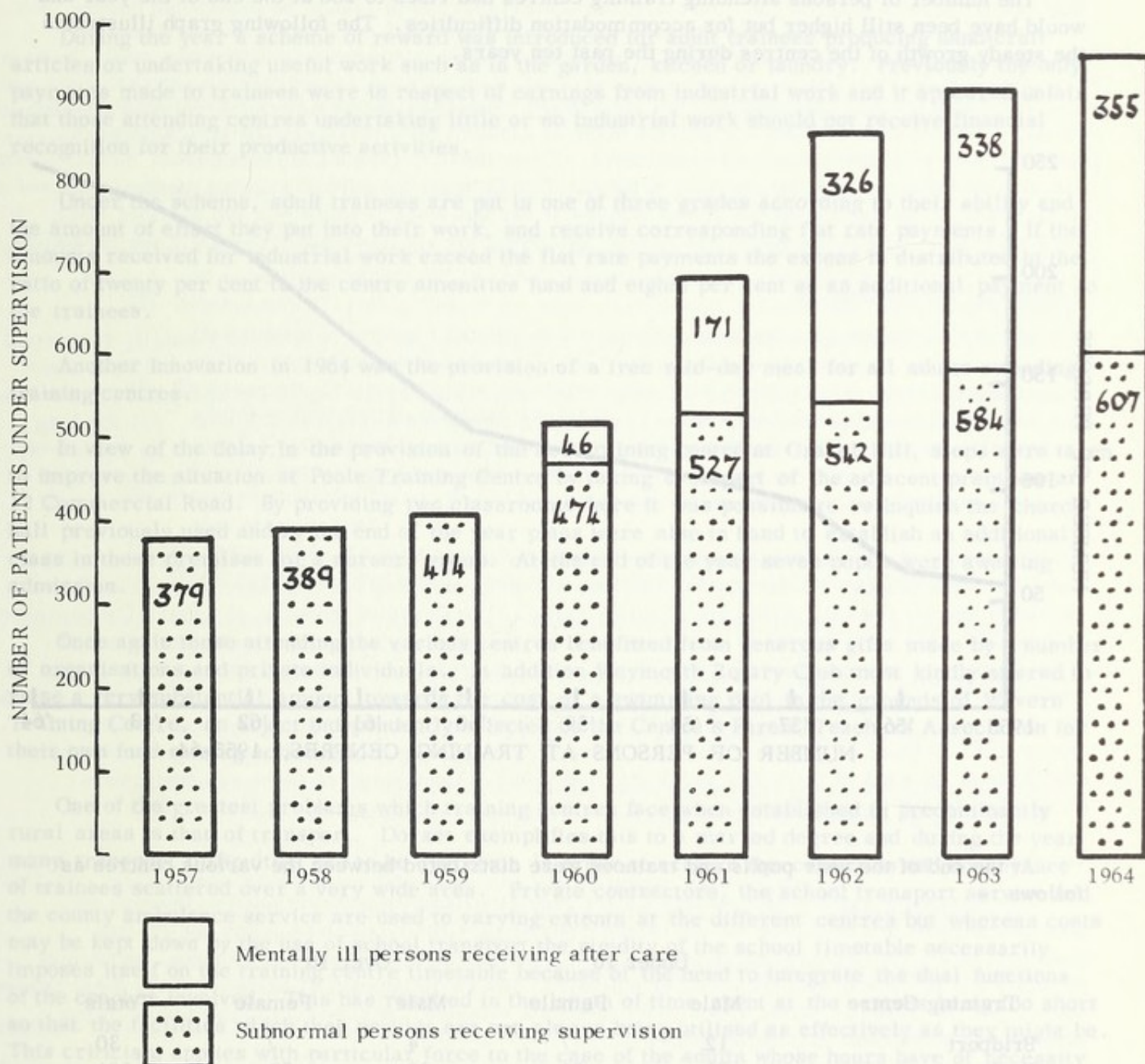
Seventy-six new cases were referred and ascertained as follows :-

Subnormal				Severely Subnormal				Total			
Under 16		Over 16		Under 16		Over 16		Under 16		Over 16	
M	F	M	F	M	F	M	F	M	F	M	F
14	9	10	11	16	8	1	7	30	17	11	18

Of the 1,071 mentally subnormal persons on the register at the end of the year, 464 were in hospital and 607 were being supervised in their own homes. The latter were classified as follows :-

Subnormal				Severely Subnormal				Total			
Under 16		Over 16		Under 16		Over 16		Under 16		Over 16	
M	F	M	F	M	F	M	F	M	F	M	F
16	8	85	70	75	55	121	177	91	63	206	247

During the five complete years since the passing of the Mental Health Act, 1959, there has been a steady and substantial increase in the number of subnormal persons in the community who are receiving advice and guidance from the mental welfare officers. The following diagram indicates the ever-increasing demands being made upon these officers.



NUMBER OF PERSONS VISITED PER ANNUM BY MENTAL WELFARE OFFICERS

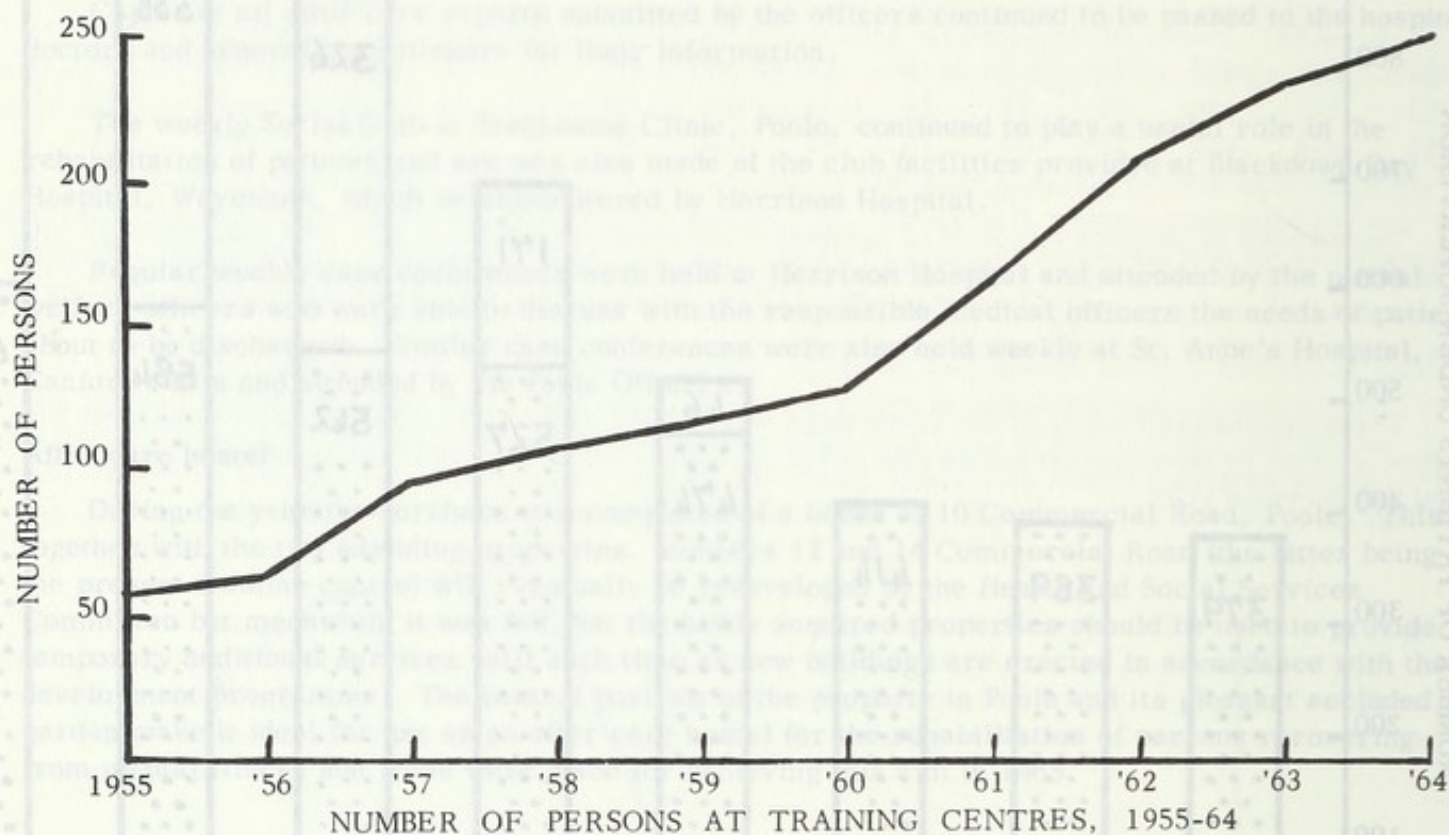
Twenty-one long stay patients were admitted to hospital during the year and on 31st December twenty-seven patients remained on the waiting list, nine of them being regarded as in urgent need of admission.

Short-term care was provided for thirty-seven persons. Of these eighteen were admitted to hospitals and ancillary premises, five to voluntary or private homes, twelve to Wyvern House

Hostel and two to hostels run by other local authorities.

Training Centres

The number of persons attending training centres had risen to 250 at the end of the year and would have been still higher but for accommodation difficulties. The following graph illustrates the steady growth of the centres during the past ten years.



At the end of the year pupils and trainees were distributed between the various centres as follows :-

Training Centre	Under 16		Over 16		Totals
	Male	Female	Male	Female	
Bridport	12	7	4	7	30
Poole	21	21	30	29	101
Weymouth	27	22	14	24	87
Sturminster Newton	10	2	12	8	32
Totals	70	52	60	68	250

In addition, two children resident at Field Place, New Milton, attended the Christchurch Training Centre and seven other children attended the Poole Spastics Centre, financial responsibility having been accepted by the County Council.

A number of training centre staff attended courses and conferences. Three members attended a residential course at Urchfont Manor, one attended a National Association for Mental Health refresher course at Westhill Training College, Birmingham, one attended a residential course at Dillington House and one went to the Annual Conference of Mental Health Workers.

During the year a scheme of reward was introduced for adult trainees producing handicraft articles or undertaking useful work such as in the garden, kitchen or laundry. Previously the only payments made to trainees were in respect of earnings from industrial work and it appeared unfair that those attending centres undertaking little or no industrial work should not receive financial recognition for their productive activities.

Under the scheme, adult trainees are put in one of three grades according to their ability and the amount of effort they put into their work, and receive corresponding flat rate payments. If the amounts received for industrial work exceed the flat rate payments the excess is distributed in the ratio of twenty per cent to the centre amenities fund and eighty per cent as an additional payment to the trainees.

Another innovation in 1964 was the provision of a free mid-day meal for all adults attending training centres.

In view of the delay in the provision of the new training centre at Gravel Hill, steps were taken to improve the situation at Poole Training Centre by taking over part of the adjacent premises at 12 Commercial Road. By providing two classrooms here it was possible to relinquish the church hall previously used and by the end of the year plans were also in hand to establish an additional class in these premises for a nursery group. At the end of the year seven pupils were awaiting admission.

Once again those attending the various centres benefitted from generous gifts made by a number of organisations and private individuals. In addition Weymouth Rotary Club most kindly offered to raise a very substantial amount towards the cost of a swimming pool in the grounds of Wyvern Training Centre, an object independently selected by the Centre's Parent/Teachers Association for their own fund raising activities.

One of the greatest problems which training centres face when established in predominantly rural areas is that of transport. Dorset exemplifies this to a marked degree and during the year many transport difficulties had to be overcome in order to achieve the collection and conveyance of trainees scattered over a very wide area. Private contractors, the school transport service and the county ambulance service are used to varying extents at the different centres but whereas costs may be kept down by the use of school transport the rigidity of the school timetable necessarily imposes itself on the training centre timetable because of the need to integrate the dual functions of the coaches involved. This has resulted in the length of time spent at the centres being too short so that the facilities which they provide are not always being utilised as effectively as they might be. This criticism applies with particular force to the case of the adults whose hours have of necessity been the same as those of the juniors through using the same transport.

Now that thought is being given to the introduction of more contract work for the adults it is clear that the long summer holiday is an anachronism which can be a substantial impediment to the gaining of such contracts as many firms will not accept a six week break in the flow of work from the centre.

In the case of the juniors the long summer holiday also causes certain disadvantages, in particular the interruption of the training programme in which the children participate at the centres and the strain imposed on many parents and their families by having a severely subnormal child at

home continuously for a long period.

These important issues were discussed in detail by the Mental Health Sub-Committee before the end of the year and it was agreed that the pattern of working hours and holidays should be revised and that, as far as was practicable, more appropriate arrangements should be introduced during 1965.

Home Teaching

The home teacher continued to visit forty-eight subnormal persons in Poole and West Dorset. Of these, twenty-five resided at a private home at Lytchett Matravers and the residents were provided with a constant supply of handicrafts. Occasionally, persons suffering from mental illness are also included in the home teaching scheme. Profits from the sale of articles made are passed on to the makers and their products are on display at various fetes, exhibitions and sales of work. A very successful Christmas party was held at Wimborne for all those participating in the scheme.

Residential Accommodation

In 1964 Wyvern House, the County Council's first hostel for the care of the mentally subnormal situated in the grounds of Wyvern Training Centre, Weymouth, completed its first full year since being opened in July, 1963. During the year it accommodated seven long term residents (five women and two children) and twelve short term residents (nine women and three children). All the long term residents attended the nearby training centre apart from two who were able to go out to work from the hostel. Apart from one woman transferred from Coldeast Hospital, all were admitted from their own homes.

In addition to the residential care provided in the hostel, use was made of five private homes, financial responsibility for the cost of maintenance being accepted for the short term care of five residents and for the long term care of thirty-three. The Cheshire Home at Hawthorn Lodge, Dorchester, was most helpful in providing residential care for children up to eleven years and eight Dorset cases were resident there at the end of the year. Considerable use is made of this home by other local health authorities and during the year four children admitted from areas outside the county also received training at the Weymouth Training Centre. A private home at Lytchett Matravers continued to provide residential care for twenty-five subnormal women, most of whom are between the ages of forty-five and sixty-five years. Twenty-two of these residents were maintained by the County Council.

Voluntary Bodies

The Weymouth and District Society for the Mentally Handicapped continued to flourish and provided support and help both for the handicapped and for their relatives. The society has continued to use the Wyvern centre for its Youth Club meetings and for regular social gatherings of pupils and parents during the summer holidays. The establishment at Bridport of the West Dorset Society for the Mentally Handicapped now provides a valuable contribution to the welfare of the handicapped in another part of the county.

The Parent/Teachers Associations at Poole, Sturminster Newton and Weymouth also continued to make valuable contributions to the welfare of the pupils by gifts, outings and other social events.

Five subnormal children continued to enjoy the special facilities provided primarily for educable spastic children by the Bournemouth, Poole and District Spastics Society at their Centre in Poole.

The Cheshire Home for Mentally Handicapped Children at Hawthorn Lodge, Dorchester, continued its valuable work and was of great assistance in providing both long term and short term care for several severely subnormal children who would otherwise have had to remain at home

owing to lack of hospital vacancies.

THE TEN YEAR DEVELOPMENT PLAN FOR MENTAL HEALTH SERVICES

1964 was a year of frustration and disappointment, no new projects being completed or even started. Two years will soon have passed since the opening of the Wyvern Training Centre without any fresh building operations being put in hand, with the inevitable result that the forecasts for successive years are being telescoped together producing a congested programme impractical to execute with the staff available.

The following summary shows the development plan as it stands at present.

- | | |
|---------|--|
| 1965/66 | <ul style="list-style-type: none">(1) Hostel for fifteen subnormal men at Weymouth (previously 1963/64). Adaptation of existing premises (St. Aubyn's) expected to open June, 1965.(2) Replacement Training Centre for eighty subnormal children and 100 adults at Poole (previously 1963/64). Further delay because of decision of planning authority to build a road through the site.(3) Replacement Training Centre for thirty subnormal children and thirty subnormal adults at Bridport (previously 1964/65). The proposed site is considered too small for both centres and will now be used only for the junior centre. No site has yet been found for the adult centre.(4) Home at Poole for thirty-five elderly mentally infirm (previously 1963/64). Building may start in 1965.(5) Hostel at Poole for thirty subnormal adults (previously 1964/65). Site not yet found.(6) Home for thirty-five elderly mentally infirm at Weymouth. Site available. |
| 1966/67 | <ul style="list-style-type: none">(1) Replacement after care hostel at Poole for twenty-five persons who have been mentally ill. Site available.(2) Hostel for twenty-five subnormal women at Weymouth. This will release Wyvern House for the sole use of subnormal children. Site not yet found.(3) Hostel for twenty-five subnormal persons in east Dorset. Site not yet found. (Brought forward from 1973/74).(4) Training Centre in Weymouth for eighty adult subnormal persons. Site available. This will take the adults from the Wyvern Centre which will then be used solely for children. |
| 1967/68 | <ul style="list-style-type: none">(1) Hostel at Poole for fifteen subnormal children. Site available.(2) Replacement Training Centre for thirty subnormal children and thirty adults at Sturminster Newton. Site available.(3) Hostel in Weymouth for the after care of fifteen persons who have been mentally ill. Site not yet found. |
| 1968/69 | Long term hostel at Weymouth for thirty-five persons suffering from mental illness. |
| 1969/70 | Home for thirty-five elderly mentally infirm at Dorchester. |
| 1970/71 | Long term hostel in east Dorset for persons suffering from mental illness. |
| 1971/72 | Long term hostel in Dorchester for thirty-five persons suffering from mental illness. |
| 1972/73 | Hostel in South Dorset for twenty-five older subnormal persons. |
| 1973/74 | Hostel in Weymouth for fifteen subnormal children (To replace Wyvern House). Site available. |
| 1974/75 | Hostel in Weymouth for twenty-five subnormal men (To replace St. Aubyn's). |

It must be remembered that these projects are for the most part completely new developments showing great diversity not only in aim and function but also in the types of person who will use them. Lack of previous experience in dealing with the particular problems involved means that a tremendous amount of time needs to be spent in the forward planning. The extent of the different needs has to be assessed as accurately as possible and the projects ranged in order of priority. Much can be learned from the experience of others and visits to similar projects in other parts of the country can be of the greatest value. The obtaining of suitable sites, the preparation of schedules of accommodation, the detailed examination and discussion of the plans prepared by the architect, the problems of staffing the various homes and their day-to-day supervision after they are established are extremely time consuming. So far this work has been undertaken by the present officers without any increase in establishment, the tasks enumerated above having to compete for time with all the pressing day-to-day work of the section. This can only result in delays and sometimes in hasty decisions being made on matters which merit the very closest attention to detail and it has therefore been decided that all the work and organisation of the section be examined during 1965 with a view to overcoming these difficulties.

WELFARE SERVICES

(NATIONAL ASSISTANCE ACT, 1948)

Residential Accommodation

During the year progress continued to be made with the provision of purpose-built accommodation and the Council's fifth new Home, River House, Wareham, was completed in September. This fifty-five bed Home replaced accommodation at Christmas Close, Wareham, a former Public Assistance Institution which had been jointly used with the hospital authority who now wholly occupy the premises. Work commenced on the construction of a further fifty-five bed Home at Coles Avenue, Hamworthy, and the extension of Maiden Castle House, Dorchester. The latter scheme will increase the number of places at the Home from forty-one to fifty and relieve overcrowding. It will also include the installation of a lift, improvements to the kitchen and other facilities and the provision of a new bungalow for the Matron and her family. By the end of the year the commencement of work on the extension of Chalbury Lodge, Weymouth, to provide accommodation for an additional thirty-eight residents was also imminent.

The Council's Ten Year Development Programme was again reviewed and extended to include the year 1974/75 when it is proposed to provide a new fifty-five bed Home in Dorchester to maintain an appropriate proportion of places to the population of the area. The acquisition of sites for projects included in the development plan has continued.

The staffing position at the Homes was reviewed having regard to the heavy demands arising from the increasingly high proportion of more infirm residents. Substantial improvements were approved providing for appropriate additional staff including adequate full-time night attendants and an overall flexibility to permit the ready employment of those categories of staff required to meet changing needs. The employment of clerical help was also approved to relieve the Matrons and enable them to devote more time to the personal problems and interests of the residents.

At the end of the year accommodation for 674 residents was being provided in twelve establishments in the County but there was a growing waiting list of nearly 300 elderly persons many of whom were in urgent need of admission. The vacancies occurring in the Homes however are barely sufficient to provide accommodation in situations of immediate emergency which usually concern old people not already on the waiting list. It was also becoming impossible to accommodate old persons for short term care to enable their relatives to rest or take occasional holidays and this inability to help contributes towards situations necessitating the permanent accommodation of old people whose care by relatives might have been continued. In these circumstances it had become apparent by the end of the year that the pace of the development programme should be quickened and that fresh means should be introduced to provide for emergency needs and short term care.

During the year residents once again enjoyed entertainment, outings and a variety of amenities to which reference has been made in previous reports.

The Council continued to be indebted to the various organisations and the many individual members who take an interest in the Homes and give invaluable help in very many ways.

Statistics relating to residential accommodation are set out in Table 11 on page 61.

Temporary Accommodation

The nine units of temporary accommodation for problem and homeless families continued to be managed by the Children's Department under the arrangements previously reported. At the end of the year twelve adults and twenty-three children were being accommodated.

Special Housing for the Elderly

During the year District Councils continued to make a most valuable contribution to the welfare of the elderly through the provision of special dwellings suited to their needs. This is encouraged by the County Council's scheme for financial assistance of which details have previously been reported.

The value of special housing of this kind as a means of enabling old people to continue to enjoy the independence of their own homes and of avoiding the possible necessity for their admission to old people's Homes was strikingly illustrated by research carried out during the year by the Housing Manager of the Sturminster Rural District Council. The investigation related to fifty-six warden serviced dwellings in four groups which had been in use from eleven to seventeen years and concerned the ninety-seven old people who had left the dwellings during that time. It was revealed that thirty-seven of these old people had remained at the dwellings until their death. A further twenty-nine had remained until within eight weeks of their death in hospital or with relatives and of the others who had gone to hospital or with relatives nine had died within from two to six months of leaving the dwellings. There had been only three admissions to County Council Old People's Homes from the dwellings and in the same period there had been three admissions from the Homes to the dwellings.

By the end of the year the 474 dwellings had been approved for contribution purposes subject to the conditions relating to occupancy and structural welfare and warden facilities.

Further enquiries and requests for financial help in respect of accommodation for the elderly were also received from Alms House Trusts and housing societies. By the end of the year annual contributions to trusts and societies of this kind were being made in respect of accommodation of various kinds for approximately a hundred old people.

Meals on Wheels

Thanks to the invaluable work of the Women's Voluntary Service and the understanding co-operation of the school meals section of the County Education Department, the meals on wheels service continued to expand during the year. 51,647 meals were served, an increase of 12,152 on the figure for the previous year. Detailed statistics are set out in Table 13 on page 62.

Social Welfare

The old people's clubs run by the Dorset Branch of the British Red Cross Society, the Women's Voluntary Service, Local Old People's Welfare Committees and other organisations have continued to play a most valuable part in providing for the Social Welfare of the elderly. The effort which the voluntary workers concerned put into the running of these centres and the many activities associated with them is most praiseworthy as there is no doubt that the facilities provided bring enjoyment and interests to many old people and do much to prevent the loneliness and depression which may lead to further demands on the statutory services.

The Council continued to offer financial contributions to old people's clubs providing a meals service but only one club took advantage of this during the year. At this club about forty-five meals are served weekly. These are provided from a local County Council school kitchen and are

delivered to the club by the Women's Voluntary Service. The club receives a County Council grant at the rate of one shilling per meal served and the arrangement has proved to be most successful. As a result many old people who might be disinclined to prepare adequate meals for themselves are able to enjoy nourishing meals in the companionship of others in warm and pleasant surroundings. It is to be hoped that more voluntary organisations will be able to make similar arrangements.

Registration and Inspection of Disabled Persons' and Old Persons' Homes

During the year six applications for the registration of private homes were granted. At the end of the year there were thirty-four registered homes in the County providing accommodation for 405 persons.

The registered homes continued to be inspected periodically to ensure that satisfactory standards were maintained and the notice of proprietors was drawn to any matters requiring attention.

Premises which were the subject of application for registration were inspected to determine their suitability. Details of proposed improvement works, staffing arrangements etc., were obtained.

Welfare of the Blind and Partially Sighted

Close liaison continued with the Western Regional Association for the Blind, the Dorset County Association for the Blind and other voluntary organisations to ensure that blind and partially sighted persons in the county could benefit from all the facilities available.

On the 31st December, 1964, there were 869 persons on the blind register and 139 registered as partially sighted. The majority of newly certified cases fall in the older age groups and many have other physical handicaps.

Of the 131 newly registered blind cases 112 were over sixty-five years of age. There was one case under the age of five and eighteen between the ages of twenty-one and sixty-four.

The home visiting and teaching continued to be carried out by seven fully qualified Home Teachers for the Blind, two being employed in the Borough of Poole and five for the remainder of the County. Persons with seriously defective vision were helped to overcome the effects of their disability, and lead as normal a life as possible. Handicraft classes, socials, outings, sales, exhibitions and holidays were arranged in co-operation with the Dorset County Association for the Blind. Lessons in reading and writing embossed type and instruction in handicrafts continued to be given to pupils in their own homes.

Arrangements continued for the employment of one basket maker at the Bristol Royal Workshops for the Blind, two flat machine knitters and one brush maker at the Royal Workshops for the Blind, Leatherhead, and one brush maker at the Yorkshire School for the Blind. One woman completed training during the year and is employed in the Bristol Workshops for the Blind, and one man entered the Incorporated Association for Promoting the General Welfare of the Blind, Luton Workshops as a process worker in soap manufacturing.

Thirty-nine blind men and five women were employed in open industry in Dorset at the end of the year.

Six men and five women were supervised by the Bristol Royal Workshops under the Home Workers Scheme on the County Council's behalf. One braille copyist was being supervised by the

National Library for the Blind as a part-time worker.

Some difficulty was experienced in marketing saleable articles made by the blind owing to cheap importations.

The high standard of handicrafts was evident from the success achieved at the Dorset Arts and Crafts Exhibition, Bristol Blind Gardeners' Show and the Poole Show. A total of seventy-three awards were gained.

At the end of the year 123 blind persons over the age of sixteen were living in hospitals and homes. Forty-seven were in the care of Regional Hospital Boards, thirty-nine in homes for the blind, twenty in homes provided under Part III of the National Assistance Act, 1948 and the remaining seventeen in privately run homes.

The registers of the blind and partially sighted were maintained in close co-operation with the Western Regional Association for the Blind.

Statistics relating to the number of blind and partially sighted persons registered with the Council during the year are as follows :-

Blind	Dorset (exc. Poole)	Poole	Totals
Number on Register 31.12.63	561	299	860
New Cases	84	47	131
Transfers In	28	11	39
Transfers Out	21	29	50
Deaths	64	43	107
Transferred to Partially Sighted Register	-	-	-
Number on Register 31.12.64	584	285	869

Partially Sighted	Dorset (exc. Poole)	Poole	Totals
Number on Register 31.12.63	79	52	131
New Cases	13	5	18
Transfers In	10	4	14
Transfers Out	3	1	4
Deaths	8	3	11
Transferred to Blind Register	4	5	9
De-certified	-	-	-
Number on Register 31.12.64	87	52	139

Welfare of the Deaf, Dumb and Hard of Hearing

Welfare Services for the deaf and/or dumb and hard of hearing continued to be administered through an agency arrangement with the Salisbury Diocesan Association for the Deaf and Hard of

Hearing. All cases applying for assistance were visited by officers of the Association.

Services provided included interpretation in manual language, lip reading instruction, routine visiting and visiting of the sick in hospital. Assistance was also given, in co-operation with the Ministry of Labour, to individuals seeking employment.

Social centres for the deaf continued to be run at Poole, Sherborne and Weymouth and hard of hearing clubs met regularly at Bridport, Dorchester and Poole.

Last year was the fourth complete year that the scheme for the ascertainment of deafness in school and pre-school children had been running. This service ensures that an ever increasing number of children who would otherwise be hampered by slight deafness are being detected at the earliest opportunity and when corrective treatment is given the hearing is restored to normal in a great many cases. If it is found that the deafness is either of such a type that operative treatment is inadvisable or that deafness persists after treatment, the child can be given special educational treatment and auditory training under the provisions of the Handicapped Pupils Regulations of the Education Act, 1944.

During the last four years the audiometrician, who is also a fully trained teacher of the deaf, has carried out full hearing assessments on 1,863 children in the County (excluding Poole) and of those, 526 have been referred to the E.N.T. Specialist with the approval of the family doctor concerned. The figures for 1964 were 603 and 158 respectively.

The established pattern of the assessment service for deafness amongst children continues throughout the County, excluding the Borough of Poole. All infants are given an elementary hearing test by the local health visitor and any who appear to have defective hearing are referred to hearing assessment clinics which are held at regular intervals throughout the county. At these clinics, the audiometrician investigates these children, patients referred from other sources, and those who have failed the school screening tests. Both consultants and the school medical officers utilise the service freely.

All infant entrants to county schools are screened at the age of six years and those children who fail this test are further investigated as described in the preceding paragraph. During the last four years in the county (excluding Poole) 13,163 children have been screened and of these 1,158 have been referred to a clinic for further investigation. The figures for 1964 are 3,146 and 372 respectively.

The year was noteworthy in that there was an all round increase in cases referred to the audiometrician both from school health and other sources. It might have been anticipated that after four years the results obtained from the 'sweep' tests would have remained at a constant level but, in fact, of just over 3,000 children screened this year 372 failed. This compares with 4,900 children tested in 1963 of which 267 failed the screening test. This rise could be attributed to the high incidence of colds and catarrh which was met with in the course of the 'sweep' testing programme and a high proportion of those re-tested will be re-checked during 1965 when it is hoped that they will be seen during a cold-free period.

Cases referred to the hearing assessment clinics also showed a heavy increase. 603 children were tested against 421 in 1963, an increase of approximately thirty per cent. This includes a fifty per cent increase in the proportion referred from sources outside the immediate school health services such as hospital specialists. General practitioners have recognised the need for this particular service which the local authority is admirably suited to carry out.

The percentage of children needing treatment was roughly the same as in the previous year. In 1964, 158 children out of 518 failed audiometric tests and were referred to an E.N.T. specialist, eighty-eight receiving some form of treatment, usually tonsillectomy or adenoidectomy. In 1963 out of a total of 133 referred to the E.N.T. specialist, eighty-six received operative treatment.

It is hoped that in the coming year new equipment will be available to the audiometrician to enable her to carry out a bone conduction test which will expand the scope of the services especially where an audiogram is requested by an E.N.T. specialist or a general practitioner as both bone and air conduction tests should be available.

Partially hearing children who may benefit by attending ordinary schools receive help from peripatetic teachers of the deaf who give them regular instruction in the use of their hearing aids and in lip reading, if necessary. Seventy children received such help during 1964.

Two day special classes for partially hearing children are attached to ordinary schools in Poole and these may be attended by any suitable children living within travelling distance.

Deaf and partially hearing children who require residential treatment are graded under the Handicapped Pupils Regulations and, subject to the parents' consent, are placed at a suitable school. The education authority pays the whole of the fees for such a placement.

Any cases of suspected deafness in children who present particular problems are referred to a panel of specialists who meet periodically either at Poole or Weymouth. All aspects of child health and education are represented on the panel and the child and parents are interviewed and advice given on the treatment and management of the case.

The following table shows the number of persons both deaf and hard of hearing registered with the authority on the 31st December, 1964, and sets out the statistics in respect of services provided :-

	Dorset (excl. Poole)	Poole	Totals
Deaf	117	41	158
Hard of Hearing	155	50	205
Number of cases for whom services provided	339	139	478
Attendance at Social Clubs	3,799	1,246	5,045
Attendance at Church Services	824	238	1,062
Visits by missionaries	1,832	845	2,677

Physically Handicapped (General Classes)

The routine visiting of the physically handicapped in the County continued to be carried out by health visitors whilst the specialist liaison health visitor explored means by which the most effective help might be given in cases presenting particular problems.

There was an increase in the amount of specialised equipment supplied, and in the number of cases in which adaptations were carried out to the homes of handicapped persons.

The Dorset Branch of the British Red Cross Society continued to act as agents for certain aspects of the work which included the supply of aids and gadgets, instruction in handicrafts, assistance with the purchase of materials, and the sale of the finished articles.

A grant was again given to the Dorset Association for the Disabled to assist them in their activities for the promotion of the general welfare of the handicapped.

Co-operation with the Disablement Resettlement Officers of the Ministry of Labour was maintained in connection with the training and employment of disabled persons.

Four handicapped persons from the county were employed in sheltered workshops, one man on light engineering and one woman on assembly work in the Dorincourt Estates, one woman on fabric printing in the Yalety Industries and one woman was engaged on fine needlework in the School of Stitchery.

The following table shows the number of physically handicapped persons, (General Classes) registered with this authority on the 31st December, 1964 :-

	Dorset (exc. Poole)	Poole	Totals
Number on Register at 31.12.63	688	240	908
New Cases	222	69	291
Transfers In	4	6	10
Transfers Out	24	5	29
Deaths	48	19	67
Removed from Register	5	2	7
Number on Register at 31.12.64	817	289	1,106

Removal to suitable premises of persons in need of care and attention

It was not necessary for action to be taken under the provisions of Section 47 of the Act during the year.

Temporary protection of property of persons admitted to hospital, etc.

The storage of property continued to be arranged, where necessary, in pursuance of Section 48 of the Act.

REGISTRATION OF NURSING HOMES

Periodic inspections of the registered homes in the County are carried out and before any application for a certificate of registration is granted, full enquiry is made as to the suitability and qualifications of the person in charge and the state of the premises.

Although the number of homes at the end of the year 1964 was one less than in 1963, the number of non-maternity beds provided was increased by four. The only maternity home (St. Monica's Home in Poole run on behalf of the Salisbury Diocesan Committee for Moral Welfare), closed at the end of the year.

	Number of Homes	Number of beds provided		
		Maternity	Other	Total
Homes first registered during the year	2	-	23	23
Homes whose registrations were withdrawn during year	3	12	50	62
Homes on register at end of year	15	-	205	205

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

All applications for registration as day nursery or child minder are investigated thoroughly with inspection of all premises concerned. There have been increasing numbers of such requests many of which are for play groups rather than day nurseries. It has been felt that such play groups should be registered as day nurseries to ensure that the premises are suitable.

Premises registered at end of year

	Day Nurseries		Child Minders	
	1963	1964	1963	1964
Number	4	7	6	12
Number of places and number of children minded at end of year	53	111	56	176

ENVIRONMENTAL HYGIENE

WATER SUPPLIES AND SEWERAGE

The remarks under this heading last year were concluded by a reference to the close link which exists between public health engineering and building development; in other words, the strong relationship between the ample provision of piped water and main drainage, and economic growth.

In many respects this has been high-lighted during 1964 and the need for the closest possible co-operation and collaboration between those responsible for planning, on the one hand, and public services on the other has been emphasized. For many years there has been consultation when water supply, sewerage and sewage disposal schemes are submitted to the County Council to try to ensure that what was proposed would be adequate to meet the foreseeable needs of the future. In many cases the results of this collaboration appears to have been wholly satisfactory but there have been instances where the building rate has been much greater than was envisaged when, for example, main drainage schemes were designed.

The extent to which the provision of public services has opened up land for development has, in some parts of Dorset, been considerable and measures will have to be taken in the future to explore the potential in even greater detail than has been the case in the past. It is never easy to know where to draw the line in providing for the future in the construction, for instance, of a sewage disposal works. The capital cost per head varies between £15 and £20, depending upon the capacity of the plant but if, when construction takes place, it is not economically possible to provide for the maximum future population it is clearly necessary to envisage what this is likely to be and plan for it at the design stage.

There was a time - not many years ago - when the provision of a joint sewage works was not favoured either by the Ministry or by the County Council because of the relatively high cost of laying trunk sewers and pumping mains to convey sewage from one drainage area, or from one nearby village to another. However, because of the rate at which building has taken place and even more, perhaps, because of the revised grant procedure outlined in Circular 15/61, the provision of one large sewage works instead of two or three smaller ones is now becoming increasingly popular. This tendency will have the effect of increasing the County Council's rate burden on sewerage very appreciably because, whereas they are not required to give financial assistance towards sewage disposal works constructed under the Rural Water Supplies and Sewerage Acts, the cost of pumping mains and/or outfall sewers does attract grant.

The County Council have not been influenced by this financial consideration and there is no reason to believe that they will not support the provision of a joint sewage works in the future if it is considered that this is right technically and the policy likely best to serve the county districts' and the county's interest in the long run. Quite apart from economic considerations the amenity aspect must not be overlooked and nothing is to be gained by having numbers of sewage disposal works dotted throughout the county, large works being more easily supervised and maintained than small disposal plants.

One of the biggest needs in a rural county such as Dorset is to attract light industry and a paramount consideration here is the availability of ample water. Because of its geology, Dorset fortunately has immense underground resources, the full extent of which will only be revealed when the hydrological survey which is to be made under the Water Resources Act, 1963, has been completed. The conduct of this will be the responsibility of the newly constituted river authorities and the survey will take some years to carry out. It was, however, apparent from a report which

was prepared in 1963 in conjunction with the engineers of the statutory water undertakers that the post-war schemes had been designed with foresight and that the sources which had been developed were capable of further development if the need arose.

This may well be a key factor to the future prosperity of this county. The value of the regrouping of water undertakings which has so far been carried out has already been shown and the need for an amalgamation of the remaining water authorities with the West Dorset Water Board as quickly as possible is as clear as its effect in future years may be far-reaching.

In July a public inquiry was held by an engineering inspector of the Ministry of Housing and Local Government to hear objections to the Minister's Draft Order providing for an expansion of the statutory water area of the West Dorset Water Board to include the undertakings of the Weymouth Waterworks Company and the Dorchester Corporation, the Portland Urban District Council and the Dorchester Rural District Council with the exception of the Piddle Valley parishes which are to form part of the statutory area of the Poole and East Dorset Water Board.

In December, the Minister, having considered the report by his inspector on the inquiry, announced that with minor exceptions, he saw no reason why the Draft Order should be varied. He accepted, though, the contention that the title the South and West Dorset Water Board more closely described the area to be served than the Central Dorset Water Board, as proposed in the Draft Order.

The Weymouth and Dorchester Corporations and the Dorchester Rural District Council, however, decided to maintain their opposition to the Order by invoking Parliamentary procedure and it is likely to be some time before the outcome is known. At the public inquiry the Weymouth and Dorchester Corporations had pressed the Minister to amend the Draft Order in favour of one water board for the major part of Dorset by a merger between the existing West Dorset Water Board and the four South Dorset undertakings with the Poole and East Dorset Water Board. The Dorchester Rural District Council's objections were principally on economic grounds.

The County Council are in support of regrouping in accordance with the Minister's Draft Order but whichever way this is to be brought about it is to be hoped that there will be no undue delay; otherwise it would seem inevitable that progress on the West Dorset Water Board's regional scheme will be held up.

Much has been done during 1964 in the provision of main drainage, particularly in the Wimborne and Cranborne rural district. The completion of the Palmers Ford sewage works in December was a major achievement; this plant has been designed to serve a population of 11,350 in the Ferndown and West Moors area, the contract sum being £169,420. Furthermore, sewerage contracts amounting in all to about £330,580 were completed during the year and the work of carrying out house connections is in hand. The total cost of the Ferndown and West Moors sewerage scheme is about £710,000 and to date it is the biggest scheme ever to be embarked upon in a rural district in Dorset.

In September a start was made on the construction of a sewage disposal works to serve the major part of the parish of Corfe Mullen and by December this was about ten per cent finished. The contract sum for this work was £110,000 and the total estimated cost of the scheme is £327,000.

Realising the importance of main drainage in a rapidly developing rural area where ground conditions do not favour the wide-scale use of septic tanks and cesspools, the Wimborne and Cranborne Rural District Council have instructed their engineer to prepare an outline scheme for the parish of Verwood. To speed up this work, an aerial survey was carried out in the autumn and various alternatives were considered for sewage treatment. One possibility is the use of low lift,

screw-type pumps to convey sewage for treatment at the Palmers Ford plant. This would be in accord with the increasing popularity of joint sewage disposal works and, dependent upon the results of the survey, a decision on this aspect of the Verwood scheme is likely to be reached early in 1965.

Another instance of the probable adoption of a combined scheme is for the parishes of Lytchett Matravers, Bere Regis, Bloxworth and Morden in the Wareham and Purbeck rural district. Here again an aerial survey has been carried out and the Council's engineer is preparing a scheme based on a works site at Bloxworth Heath. This plant will be designed to deal with the total estimated future population of the four villages concerned but the intention is to sewer only Bere Regis and Lytchett Matravers at the outset. In these villages the need for main drainage is urgent; Bloxworth and Morden have a much lower priority.

There is considerable satisfaction over the approval by the Minister of Housing and Local Government of a scheme, estimated to cost £109,800, for the main drainage of Studland which is to be carried out in conjunction with the Poole and East Dorset Water Board's scheme for the provision of an adequate piped water supply to this village at an estimated cost of £39,708. Work has already commenced and there is the possibility that the new waterworks might be brought into use during the latter part of the summer of 1965. Serious water shortages have occurred at this popular seaside village for many years and the lack of a main drainage scheme has also created difficulties. It is good to see the Wareham and Purbeck Rural District Council and the Water Board getting together over the solution of what is undoubtedly a major problem.

A joint scheme has also been approved, in principle, for the construction of a sewage disposal works to deal with the borough of Wareham and the neighbouring parishes of Sandford, Stoborough and Ridge in the Wareham and Purbeck rural district. This scheme is estimated to cost £113,530 and it is expected that the Minister of Housing and Local Government will hold an Inquiry or Local Investigation in the New Year into both the scheme as such and the application which has been made to him for a compulsory purchase order in respect of the land on which the joint sewage works is to be constructed.

In December, the Minister approved a tender in the sum of £93,044.9s.5d. for the Portesham and Abbotsbury sewerage and sewage disposal scheme in the Dorchester rural district. This is also to be based upon a joint sewage disposal works situated about midway between the two villages.

It is hoped that before long a scheme will be approved by the Minister, following a local investigation held in October, for the provision of main drainage and an inland sewage disposal works for Chideock. Here, for many years, sewage has been discharged virtually untreated into the River Winniford and in summer the pollution has been so great as to create a nuisance which was likely to be prejudicial to public health. This was due to the ponding back of the river water by shingle on the beach at Seatown where the river enters the sea. In spite of a warning notice, children visiting the beach use this pool for paddling and it is fortunate that no illness directly attributable to this cause has so far been known to occur. As an alternative to inland treatment, consideration was given to the construction of a submarine pipeline in U.P.V.C. pipe extending at least one mile out to sea. Although provisional estimates indicated that the cost of this work might be less than that of a conventional sewage plant, it was not possible to draw a true comparison without carrying out a full-scale hydrographical survey. To do this would have meant a delay of up to a year and, with the need for the Chideock scheme as urgent as it was, the County Council supported the Bridport Rural District Council's proposals which are estimated to cost £85,875.

It is good, also, to report progress on the sewerage of two other villages in the county - Yetminster, in the Sherborne rural district, and Broadwindsor, in the rural district of Beaminster. The capital costs of these schemes are likely to be £76,763 and £25,000 respectively.

The Bridport Joint Sewerage Scheme, upon which comment was made in some detail in the Annual Reports of 1962 and 1963, was submitted to the Ministry of Housing and Local Government in the autumn. This scheme is based upon a 24-inch submarine pipeline extending about one mile out to sea at West Bay and is designed to serve a population of about 26,000 from the borough of Bridport, the parishes of Symondsbury, Bradpole, Loders and Askerswell in the Bridport rural district, and Beaminster and Netherbury in the Beaminster rural district. This joint scheme is estimated to cost £340,000 and the running costs are put at £29,180 per annum.

If separate works were constructed for the disposal of sewage locally, as an alternative to the joint scheme utilising marine disposal, the total capital cost would be likely to amount to £401,800 and the annual costs, including running costs, would amount to about £536,325. Thus, the estimated savings are £61,800 on capital costs and £7,145 on annual costs in favour of the joint scheme.

The Minister of Housing and Local Government has intimated that it is his intention to hold a local investigation or public inquiry early in 1965.

Once again it can be said that Dorset's achievement in the field of public health engineering is one of which both the county district councils, the water boards and the County Council may feel proud. A great deal still remains to be done, however, especially as far as main drainage is concerned, before the needs of the present and of the future can be met with confidence.

In the table below is a summary of the schemes which were (i) submitted to the County Council for consideration under the Rural Water Supplies and Sewerage Acts; (ii) commenced; and (iii) completed during the year.

Schemes Submitted, Commenced and/or Completed during 1964

Authority	Scheme	Approximate costs of Schemes		
		Submitted	Commenced	Completed
	Water Supplies	£	£	£
Poole and East Dorset Water Board	East Stoke and East Holme	32,935	-	-
	Studland	-	39,708	-
	Worth Matravers	30,333	30,333	-
West Dorset Water Board	Regional Scheme :-			
	Mains - Uploders: Contract No. 30	-	-	26,650
	Reservoir No. 25 - Hooke Park: Contract No. 32	-	-	8,995
	Trunk main - Litton Cheney - Reservoir No. 6 - Dottery: Contract No. 37	-	119,920	-
	Mains - Bowood - Whitchurch: Contract No. 38	-	54,410	-
	Pumping Plant - Litton Cheney: Contract No. 39	-	24,370	-
	Inlet valve house at Dottery: Contract No. 40	-	1,155	-
	Pumping Station - Litton Cheney:	-	23,610	-

Authority	Scheme	Approximate costs of Schemes		
		Submitted	Commenced	Completed
	Water Supplies Cont'd.	£	£	£
West Wilts Water Board	Ashmore	-	-	3,383
	Bourton - Stage II	4,660	4,660	-
	Bourton - Stage II (a)	760	-	-
	Motcombe - Isolated Properties	380	-	-
	Sewerage and Sewage Disposal	£	£	£
Beaminster Rural	Corscombe	-	-	15,468
	Salway Ash	-	-	16,931
Blandford Rural	Durweston and Stourpaine Joint	-	103,396	-
Sherborne Rural	Yetminster	-	79,763	-
Sturminster Rural	Broad Oak and Sturminster Common	-	17,300	-
	Kings Stag - Extension of sewers	-	1,809	-
Wimborne and Cranborne Rural	Corfe Mullen: Contract No. 15	-	110,000	-
	Ferndown and West Moors: Contract No. 11	-	-	169,420
	Contract No. 12	-	-	37,823
	Contract No. 16	-	58,204	-
	Contract No. 18	-	19,638	-
Bridport Borough				
Bridport Rural	Joint Scheme	255,000	-	-
Beaminster Rural				
Wimborne Minster Urban	Disposal works - Additions	29,400	-	-

THE PREVENTION OF RIVER POLLUTION

Each year the pollution of Dorset's rivers by sewage gets less and less because of the completion of main drainage schemes. As soon as possible progress will be made with the Bridport Joint Sewerage Scheme which will remove the most serious cases of pollution which remains - that of the Rivers Brit and Askers. There is also every hope, as already reported, that the Chideock Sewerage and Sewage Disposal Scheme will be commenced during 1965 and this will free the River Winniford of the heavy pollution load it has been carrying for far too long.

The County Health Department has continued to work in close liaison with the Fisheries and Pollution Department of the Avon and Dorset River Board, and once again it is desired to express appreciation of the co-operation received from Mr. J.D. Brayshaw, M.A., the Fisheries and Pollution Inspector.

THE DISPOSAL OF SEWAGE INTO THE SEA

Little can be added to what was said in the Annual Report for 1963 on this subject which is, and probably always will be a very controversial one. Indeed, it was because of the pressure of public opinion that the Medical Research Council set up in 1953 a committee to investigate the medical and bacteriological aspects of the disposal of sewage into the sea. The results of this survey were published on 1st December, 1959, and the Committee's studies suggested that, with the possible exception of a few aesthetically revolting beaches round the coasts of England and Wales, the risk to health of bathing in sea water into which sewage was discharged could, for all practical purposes, be ignored. Beaches do, of course, become 'aesthetically revolting' if a sewage outfall terminates too close to a shore or if sufficient regard had not been taken during its planning to the effect of tides, currents and on-shore winds.

The new technique of laying long submarine pipelines makes it possible in most cases to discharge sewage at the point which detailed hydrographical surveys show to be the most suitable and where the risks of the contamination of bathing beaches are negligible.

Submarine pipelines are normally constructed of steel with elaborate protection against corrosion internally and externally. Steel outfalls are generally pulled out to sea by barge and winch but other methods, e.g. floating into position, can be used where the local conditions require. A steel submarine pipeline extending two miles out to sea has been in use in Dorset since 1959 to convey radioactive waste from the Atomic Energy Establishment at Winfrith into the English Channel off Arish Mell. This pipeline was designed to discharge up to 0.4 million gallons a day of active effluent and 1.1 million gallons a day of non-active effluent but the quantity discharged per annum has been considerably less than that permitted under the official authorisation. There is no reason to believe that the discharge has given rise to any nuisance or difficulty whatever; furthermore, the pipeline itself has been inspected from time to time by divers and its condition has been found to be satisfactory.

Whether steel will continue to be the automatic choice for submarine pipelines is, however, open to doubt; although excellent in many ways, the measures necessary to protect steel against corrosion are very costly. Investigations which the County Public Health Engineer has carried out in connection with the proposed 24-inch submarine pipeline upon which the Bridport Joint Sewerage Scheme is based have shown up aluminium and unplasticised P.V.C. pipes in a very good light; both these materials are corrosion-resistant and relatively little affected by abrasion from, for example, the grit usually found in sewage. It is important, in the case of aluminium, that the right alloy is used since certain aluminium alloys are attacked by salt water. Unplasticised P.V.C. is at present the cheapest material for this class of work and considerable attention will be focussed on the scheme in which it is being used, with the approval of the Minister of Housing and Local Government, at Hunstanton, in Norfolk. This 10-inch pipeline is likely to be laid during the spring of 1965.

The one doubt which there would seem to be about the use of unplasticised P.V.C. is related to the extreme buoyancy of this material and the special problems which would arise in securing such a pipeline to the sea bed. However, firms who specialise in this type of work do not envisage undue difficulty in this connection, having regard to the fact that the usual policy is to entrench the pipe through the surf zone regardless of the material used. Aluminium would seem to have all the properties which are required but it is relatively expensive even allowing for the cost of the internal and external protection which, for example, steel would require.

It might be felt that any form of sea outfall was very much a 'second-best' to the full treatment of sewage inland, but when all factors are taken into account this is not strictly true. It must not be overlooked that treatment at a biological sewage disposal works by no means guarantees that the effluent will be free from disease-carrying organisms. Indeed, a recent survey carried out at the

Public Health Laboratory at Hull revealed that Salmonella bacteria (the group which includes the causative organisms of typhoid and para-typhoid fever) were isolated from just under one-third of the 200 individual samples of treated sewage effluent which were taken. Bearing in mind that it is the general practice to turn the effluent from a sewage disposal works into a stream or river, the risks from the feeling of false security which might arise cannot be ignored. The question must be considered in proper perspective but there is generally no comparison between the amount of dilution available in the sea and that which exists in a small stream or river.

The saving in capital costs by using a submarine pipeline is considerable, but it is the reduction in operating costs which makes this means of disposal of sewage so economic. The County Council have suggested this method to county district councils as worthy of careful consideration whenever problems of sewage disposal affecting coastal areas have to be faced.

INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY

The Milk (Special Designation) Regulations, 1963

On 1st October, 1964, the above Regulations became operative in full and the Milk (Special Designation) Regulations, 1960, which they re-enact with amendments, were revoked. The prescribed special designation in respect of raw milk is now 'Untreated' and replaces the words 'Tuberculin Tested'.

Food and Drugs Act, 1955 - Weymouth Borough

In accordance with the provisions of Section 83(1)(c) of the Food and Drugs Act, 1955, Weymouth Borough, which had a population of 41,045 according to the census published on 30th April, 1963, became a food and drugs authority as from 1st April, 1964.

Pasteurised Milk

During the year one Dealer's (Pasteuriser's) Licence was issued and one was cancelled so that at 31st December the number of licensed pasteurising establishments in the county remained at ten. Two are in the borough of Poole, the Corporation being a food and drugs authority, and all milk sampling and supervision of milk pasteurisation in the borough is undertaken by the local public health inspectors. On 1st April, Weymouth borough public health inspectors assumed responsibility for supervising a pasteurising establishment in the borough.

In the case of the remaining seven dairies in the county administrative area, supervision - which includes milk sampling - is carried out by the county health department. Particular attention is given to the cleansing of pasteurising and ancillary equipment and during the year 293 rinses and swabs of cleaned equipment were examined at the public health laboratory of which 214 indicated a satisfactory standard.

To check the efficiency of milk pasteurisation, frequent visits of inspection have been made and 1,070 samples were obtained for laboratory testing of which 1,053 passed the test for efficient heat treatment. Of the 958 specimens submitted to the methylene blue test 954 satisfactorily complied whilst 112 samples were not tested because the atmospheric shade temperature exceeded the statutory maximum of 70°F. on the days when they were obtained.

Most of the pasteurised milk sold for consumption in Dorset is processed at the licensed pasteurising establishments situated in the county, two of which distribute a considerable quantity of bottled pasteurised milk in adjoining counties. In total, a very large number of bottles is handled daily at the pasteurising establishments and in most cases up-to-date equipment is installed to deal with the bottle-washing and filling processes. The dairy managements are fully aware of their responsibilities for ensuring that milk is filled into clean bottles and in some cases they have adopted special measures in an effort to prevent an unsatisfactory bottle escaping detection on its way to the filling machine. Even so, it does occasionally happen that a complaint is received regarding a dirty bottle of milk and in such cases a full investigation is made and appropriate action taken.

Close attention has been given to the cleansing of bottles at the licensed pasteurising establishments and in the course of the year the county health department submitted 1,188 rinses of washed bottles for laboratory examination of which 181 were not of a satisfactory standard.

Towards the end of the year a producer/retailer in the Beaminster rural district decided to buy bottled pasteurised milk for his retail business and this means that, with the exception of some remote hamlets, this grade of milk is now obtainable throughout the county.

Section 37, Food and Drugs Act, 1955

It was found necessary to take action under the provisions of the above-mentioned Section of the Food and Drugs Act, 1955. At 31st December there were in force seven Consents granted by the Minister of Agriculture, Fisheries and Food to producers enabling them to sell undesignated raw milk to nearby householders.

The Milk (Special Designation) Regulations, 1963

Sixty-six licenses were issued during the year authorising the sale by retail of designated milk, seventy-five licences were cancelled and the position at the end of the year was as follows:-

Type of Licence	No. of Licences in Force
Dealer's (Untreated)	19
Dealer's (Pasteuriser's)	8
Dealer's (Steriliser's)	-
Dealer's (Pre-packed Milk)	407
Total	434

Section 31, Food and Drugs Act, 1955

Prohibition of sale of milk from diseased cows

Since all milk herds in the county are attested there is now little risk of milk infected with tubercle bacilli being sold for human consumption. Nevertheless, as a precautionary measure, samples of raw milk have been submitted for biological examination and particular attention has been given to milk sold by retail. Three hundred and seventy-seven specimens have been examined and all were negative for tubercle bacilli.

Milk-borne tuberculosis has been virtually eliminated but there are other diseases which can be conveyed by milk, notably undulant fever. Although the number of human cases of this disease occurring annually in the county is small - there were three in 1964 - it cannot be dismissed as unimportant. Indeed, brucellosis received some publicity during the year and

mention was made of the need for a drive to eliminate excretors of the causative organism, brucella abortus, from dairy herds.

By arrangement with the Director of the Public Health Laboratory, Dorchester, samples of raw milk obtained during the year for routine testing have been screened by the milk ringprobe test and those specimens giving a 3+ result have been submitted to a biological examination. In addition, special sampling of raw milk for possible brucella infection has been carried out, and of 318 specimens examined three, involving two producers, gave a positive result. The necessary investigatory work was undertaken and in one case the infected cow was sold for slaughter whilst in the other instance the producer was advised to heat treat any of the milk intended for human consumption and to contact his veterinary officer in respect of the affected animal.

Three further cases of brucella-infected milk were notified by the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food following herd checks of two producers. In both cases the milk was being sent to a creamery where it was subjected to heat treatment.

Antibiotics in Milk

During the year 1,145 ex farm and producer/retailer milk samples have been tested for the presence of an antibiotic and seventy-six gave a positive reaction. The degree of contamination ranged from 1.5 to 0.01 units per ml. No legal proceedings were instituted but letters were sent to the producers concerned. Towards the end of the year there was a marked decrease in the number of positive milk samples.

The sampling of milk for antibiotic contamination, undertaken by the county health department, has been in accord with the recommendations contained in Circular FSH 15/64 of the Ministry of Agriculture, Fisheries and Food.

Milk

Laboratory Reports on Milk Samples

Sampling Point	Statutory Tests		
	Satisfactory	Unsatisfactory	Total
Pasteurising Establishments	1,053	17	1,070
Schools :-			
Maintained	838	46	884
Private	122	7	129
Canteens	358	16	374
County Homes and Hospitals	117	5	122
Retailers and Producer/Retailers	950	38	988
Totals	3,438	129	3,567

In addition to the sampling to which reference is made elsewhere in this report, samples have been taken in respect of grant-aided water supplies and sewage disposal works; water supplied to county properties, school swimming pools and in connection with special investigations. Details of these samples are as follows :-

Milk - Brucella investigation	318
- Antibiotic investigation	1,148
- Compositional quality	52
Water - Mains and wells	701
- Swimming baths	507
Sewage effluents	153
Miscellaneous	77
Total	2,956

MEAT AND OTHER FOODS

Except in the case of one bacon factory slaughterhouse, a one hundred per cent meat inspection service has been maintained at the seventeen licensed slaughterhouses in the county. Credit for this achievement must go to the public health inspectors of the district councils in whose areas the slaughterhouses are situated. They have had to overcome many difficulties and inconveniences in carrying out this work, much of which has to be done outside normal office hours including week-ends.

The Manufacture and Sale of Ice Cream

Five hundred and fifty samples of ice cream were submitted by the district council's public health inspectors for methylene blue testing at the Public Health Laboratory, Dorchester. The majority of the samples were of ice cream produced by manufacturers having a national distribution and ninety-two per cent were within the provisional grades 1 and 2.

FOOD AND DRUGS

Adulteration and Compositional Quality

The following particulars relate to samples taken during the year by the weights and measures inspectors of the County Council :-

Name of Sample	Corr.	Incorr.	Total	Samples submitted to Public Analyst	Samples examined in Dept's Laboratory
Milk	349	5	354	12	342
Milk Appeal to Cow	2	-	2	2	-
Cream	11	-	11	-	11
Bread	-	5	5	-	3
Pork Luncheon Meat	-	1	1	-	1
Button in Biscuit	-	1	1	-	1
Evaporated Milk	-	1	1	-	1
Fish Finger	-	1	1	-	1
Rissoles	-	1	1	-	1
Potable Spirits	14	-	14	-	14
Other Foods	158	32	190	190	-
Drugs	27	1	28	28	-
Totals	561	48	609	234	375

CLEAN AIR

There are no serious problems in Dorset in respect of atmospheric pollution. The county is predominantly agricultural and only in the Poole area is there any concentration of industry consuming large quantities of raw fuel. These include an electricity generating station, gas works, and brick, pipe and pottery manufacturies. For the purposes of the Clean Air Act they are controlled by the Alkali Inspectorate with whom the borough public health inspectors maintain a close liaison.

CARAVANS AND CAMPING

The attractions of camping and caravanning continue to grow and the many licensed sites in Dorset have become extremely popular. The largest is at Rockley Sands, Poole, where over a thousand caravans can be accommodated, but there are also sites of a substantial size at Swanage, Durdle Door (near Lulworth), Weymouth, Burton Bradstock, Bridport (West Bay), Seatown, Charmouth and Lyme Regis. The layout of these sites is controlled by the planning authorities in conjunction with the county district councils whose officers ensure that the requirements in respect of water supply and sanitation are satisfactory.

Attention has been drawn for some years past to the extensive fouling of lay-bys, hedgerows and spinneys by human excrement and garbage. During 1964 the situation in Dorset worsened considerably and there is no evidence yet to suggest that any improvement may be expected in 1965. It is, however, encouraging to learn of the steps which have been taken by the County Councils Association, in collaboration with the County Surveyors' Society and by the Urban District Councils' and the Rural District Councils' Associations, which it is hoped will be successful in persuading the Government to accept some financial responsibility at least for the provision of public conveniences along trunk roads. This would make a major contribution to a problem of great magnitude but any action along these lines would need to be augmented by the provision of transit caravan sites equipped with adequate washing and sanitary facilities. The County Council have agreed to play a part in this connection by providing financial assistance towards the establishment of transit caravan sites which will be available for a maximum of ten caravans on the understanding that no caravan may remain on such a site for more than two nights. A contribution of fifty per cent of the capital cost of suitable transit camps has been approved, subject to a maximum contribution of £400 per site. This policy was approved some time ago and it is hoped that it will soon be implemented, especially along the A.35 where conditions are particularly bad.

Another problem and one by no means divorced from that on which comment has just been made is the question of litter. Although the public are now more conscious than they were of the necessity either to use bins or to take litter away with them, many people appear to have no regard at all to the condition of the countryside or beaches. Local authorities have done excellent work in the provision and emptying of litter-bins, but clearly a national campaign is called for, preferably using the medium of television, in an endeavour to educate the public further on the question of litter.

HOUSING

The position regarding new house construction in Dorset during 1964 is given in the following table, the figures being obtained from the Ministry of Housing and Local Government returns for the year.

Housing Authority	Position as at 31st December, 1963				Position as at 31st December, 1964			
	Under construction		Completed		Under construction		Completed	
	By Council	Privately	By Council	Privately	By Council	Privately	By Council	Privately
Boroughs :-								
Blandford Forum	-	21	352	66	20	4	356	92
Bridport	-	29	368	199	12	48	368	272
Dorchester	42	66	504	541	-	60	546	655
Lyme Regis	412	9	201	191	-	7	201	210
Poole	-	598	4,009	6,230	363	706	4,173	6,798
Shaftesbury	12	8	138	85	-	5	147	176
Wareham	-	35	168	200	6	7	174	242
Weymouth and Melcombe Regis	60	139	1,794	2,101	74	106	1,794	2,274
Urban Districts :-								
Portland	-	10	452	134	28	26	452	166
Sherborne	31	15	350	95	-	31	381	127
Swanage	-	35	230	557	-	39	246	598
Wimborne Minster	-	6	216	95	-	20	216	106
Rural Districts :-								
Beaminster	6	22	366	233	8	22	376	260
Blandford	20	28	558	410	18	39	578	470
Bridport	30	34	263	450	36	42	283	494
Dorchester	-	105	567	725	34	117	571	827
Shaftesbury	34	44	443	304	-	39	477	339
Sherborne	2	19	258	262	7	36	260	292
Sturminster	9	22	832	215	7	37	841	248
Wareham and Purbeck	63	118	898	1,287	72	112	941	1,942
Wimborne and Cranborne	8	231	835	3,357	27	415	857	3,824
Totals	729	1,594	13,802	17,737	712	1,918	14,238	19,912

During the year the district councils built 436 houses of which 164 (37.6 per cent) were in Poole. The next highest achievement was by the Wareham and Purbeck Rural District Council who completed forty-three houses and they were closely followed by Dorchester Borough Council who built forty-two. No houses were completed during the year by Bridport, Lyme Regis and Weymouth Borough Councils, and the Urban District Councils of Portland and Wimborne. Bridport had twelve houses under construction at the end of the year and Weymouth were building seventy-four.

Considerable private development has continued in Poole borough and the surrounding areas of the Wimborne and Cranborne rural district, and not surprisingly these two councils again lead in the number of houses which have been built for private ownership during the year. Five hundred and sixty-eight dwellings were completed in Poole and 467 in the Wimborne and Cranborne rural district, and this meant that forty-seven per cent of the new private enterprise houses in Dorset during 1964 were in the areas of these two councils.

The Housing (Financial Provisions) Act, 1958

The Improvement of Dwellings - rural districts

The total number of applications received during the year in respect of grants to private persons was 187 and the number of schemes approved was 180 affecting 211 properties. Beaminster and Shaftesbury again had schemes approved in respect of council-owned property, sixteen dwellings being improved in the Shaftesbury scheme.

Seven of the nine rural district councils had an increased number of applications compared with 1963, the biggest increase being in Sherborne. Both Beaminster and Sturminster received fewer applications.

Since the introduction in August, 1949, of the provisions for discretionary improvement grants, the total number of applications in respect of private property received by the rural district councils up to 31st December, 1964, was 1,113 and the number of dwellings improved was 3,371.

The House Purchase and Housing Act, 1959 (Part II)

The Housing Act, 1964 (Part III)

Standard Grant Improvements - rural districts

Two hundred and forty-eight applications were received during the year for standard grants to private persons of which 223 were approved affecting 228 dwellings. In addition, six council-owned dwellings in the Beaminster rural district and two in Bridport were improved under standard grant schemes.

The total number of applications received in 1964 was almost the same as for 1963 but sixteen fewer dwellings were improved.

Housing Accommodation for Old People

Fifty-six dwellings for old people have been built by the rural district councils during the year and at 31st December the total number of post-war dwellings of this type was 888. The greatest number have been built by the Sturminster Rural District Council, who have 307, and the next highest achievement is by Shaftesbury with 106.

The total number of applicants on the councils' waiting lists increased by sixty-six during the year to 547, more than a quarter of this number being in the Dorchester rural district. This council propose to build sixty-eight bungalows and thirty-six flats for old people in 1965 and if they are successful in completing this programme by the end of the year the 163 applicants on their waiting list at 31st December, 1964, will be considerably reduced.

The Housing Act, 1957

Clearance Areas and Individual Unfit Houses

The work undertaken by the district councils in connection with clearance areas and individual unfit houses is given in the following table, the figures being obtained from the Ministry of Housing and Local Government returns for the year.

Housing Authority	Houses in Clearance Areas and Unfit Houses Elsewhere			Houses in Clearance Areas and Unfit Houses Elsewhere		
	Included in orders confirmed 1.1.55- 31.12.63	Demolished or closed 1.1.55-30.9.63		Included in orders confirmed 1.1.55- 31.12.64	Demolished or closed 1.1.55-30.9.64	
		In clearance areas	Elsewhere		In clearance areas	Elsewhere
Boroughs :-						
Blandford Forum	-	3	53	-	3	59
Bridport	44	27	80	44	32	86
Dorchester	93	90	113	93	95	123
Lyme Regis	6	7	16	6	7	16
Poole	772	574	118	778	699	144
Shaftesbury	8	16	8	8	16	8
Wareham	-	-	10	-	-	15
Weymouth and Melcombe Regis	40	42	110	40	42	117
Urban Districts :-						
Portland	-	-	37	-	-	40
Sherborne	36	58	-	45	58	-
Swanage	-	-	1	-	-	1
Wimborne Minster	92	87	25	92	93	29
Rural Districts :-						
Beaminster	10	22	74	10	22	75
Blandford	-	-	91	-	-	118
Bridport	10	2	6	10	2	12
Dorchester	8	8	184	8	8	197
Shaftesbury	-	9	103	-	9	105
Sherborne	-	4	38	-	4	39
Sturminster	-	12	45	-	15	49
Wareham and Purbeck	-	-	75	-	-	84
Wimborne and Cranborne	-	-	121	-	-	143
Totals	1,119	961	1,308	1,134	1,105	1,460

During the year 144 houses in clearance areas were either demolished or closed and of this number 125 were in the borough of Poole. A total of 152 individual unfit houses was similarly dealt with, the greatest number being in the Blandford rural district where twenty-seven dwellings were involved. Poole Borough Council came next with twenty-six, followed by Wimborne and Cranborne Rural District Council who dealt with twenty-two houses.

TABLE 1
VITAL STATISTICS

Area : 623,746 Acres	1956	1957	1958	1959	1960	1961	1962	1963	1964
Population :-									
Urban Districts	188,400	188,700	187,500	189,600	192,540	195,330	197,780	198,800	201,160
Rural Districts	115,700	116,400	116,500	117,900	118,750	120,250	122,020	123,260	126,090
Whole County	304,100	305,100	304,000	307,500	311,290	315,580	319,800	322,060	327,250
Rateable Value	£3,660,710	£3,564,262	£3,606,673	£3,917,475	£4,043,967	£4,129,179	£4,243,358	£12,146,034	£12,649,493
Estimated Product of a Penny Rate	£14,593	£14,102	£14,366	£15,574	£16,286	£16,750	£17,332	£49,394	£51,174
Births :-									
Still Births	93	91	80	85	100	102	103	99	90
Live Births	4,213	4,312	4,485	4,518	4,817	4,823	5,071	5,289	5,197
Legitimate	4,014	4,121	4,299	4,292	4,584	4,558	4,771	4,993	4,875
Illegitimate	199	191	186	226	233	265	300	296	322
Totals	4,306	4,403	4,565	4,603	4,917	4,925	5,174	5,388	5,287
Live Birth Rate (per 1,000 population)	13.8	14.1	14.7	14.6	15.4	15.2	15.8	16.4	15.9
Still Birth Rate (per 1,000 total births)	22.6	20.7	17.5	18.4	20.3	20.7	19.9	18.4	17.0
Live Birth Rate (England & Wales)	15.7	16.1	16.4	16.5	17.1	17.4	18.0	18.2	18.4
Deaths :-									
Total Deaths (all ages)	3,790	3,653	3,833	3,840	3,902	4,077	4,270	4,466	3,982
Death Rate (per 1,000 population)	12.5	11.9	12.6	12.4	12.5	12.9	13.3	13.9	12.1
Death Rate (England & Wales)	11.7	11.5	11.7	11.6	11.5	12.0	11.9	12.2	11.3
Infant Mortality :-									
Deaths under 1 year of age	103	86	84	79	96	96	111	91	85
Legitimate	97	79	79	73	89	91	105	87	75
Illegitimate	6	7	5	6	7	5	6	4	10
Mortality Rate (per 1,000 Legitimate live births)	24.2	19.2	18.4	17.0	19.1	19.9	22.0	17.4	15.4
Mortality Rate (per 1,000 Illegitimate live births)	30.2	36.7	26.9	26.5	30.0	18.8	20.0	13.5	31.0
Mortality Rate (per 1,000 live births)	24.5	20.0	18.7	17.4	19.9	19.9	21.8	17.2	16.3
Mortality Rate (England & Wales)	23.8	23.1	22.5	22.0	21.7	21.4	21.4	21.1	20.0
Maternal Mortality :-									
Maternal Deaths	2	-	3	2	2	2	3	1	1
Maternal Mortality Rate (per 1,000 births)	0.47	-	0.6	0.43	0.4	0.4	0.5	0.18	0.19
Tuberculosis									
Deaths :-									
All forms	27	29	19	16	15	19	12	8	14
Death rate per 1,000 population	0.08	0.09	0.06	0.05	0.04	0.06	0.03	0.025	0.043
Pulmonary	24	24	15	14	12	18	10	6	12
Death rate per 1,000 population	0.07	0.07	0.04	0.04	0.03	0.05	0.03	0.018	0.037
Non-Pulmonary	3	5	4	2	3	1	2	2	2
Death rate per 1,000 population	0.009	0.01	0.01	0.006	0.009	0.003	0.006	0.006	0.006
Notifications :-									
All forms	214	166	148	151	141	96	94	90	77
Pulmonary	184	148	136	131	116	82	80	72	65
Non-Pulmonary	30	18	12	20	25	14	14	18	12
Notification Register as at 31st December :-									
All forms	1,719	1,775	1,817	1,886	1,905	1,868	1,815	1,778	1,724
Pulmonary :-									
Males	835	867	902	928	961	934	908	881	838
Females	657	693	707	749	746	739	713	708	699
Non-Pulmonary :-									
Males	105	97	94	94	89	84	84	84	80
Females	122	118	114	115	109	111	110	105	107

TABLE 2

VITAL STATISTICS IN ADMINISTRATIVE AREAS

Causes of Death	Totals U.D.'s		Totals R.D.'s		Totals whole County 1964	Comparable Totals 1963	Blandford Forum M.B.		Bridport M.B.	
	M	F	M	F			M	F	M	F
1. Tuberculosis, respiratory	6	-	5	1	12	6	-	-	1	-
2. Tuberculosis, other	2	-	-	-	2	2	-	-	-	-
3. Syphilitic disease	3	2	2	-	7	2	-	-	-	-
4. Diphtheria	-	-	-	-	-	-	-	-	-	-
5. Whooping cough	-	-	-	-	-	-	-	-	-	-
6. Meningococcal infections	1	-	-	-	1	-	-	-	-	-
7. Acute poliomyelitis	-	-	-	-	-	-	-	-	-	-
8. Measles	-	-	-	-	-	1	-	-	-	-
9. Other infective and parasitic diseases	-	5	2	3	10	8	-	-	-	-
10. Malignant neoplasm, stomach	38	32	11	15	96	100	-	2	2	1
11. Malignant neoplasm, lung, bronchus	79	18	41	9	147	155	1	-	1	-
12. Malignant neoplasm, breast	-	58	-	31	89	83	-	3	-	1
13. Malignant neoplasm, uterus	-	21	-	11	32	28	-	-	-	1
14. Other malignant and lymphatic neoplasms	122	136	90	57	405	419	2	4	5	6
15. Leukaemia, aleukaemia	7	8	4	6	25	23	-	-	-	1
16. Diabetes	6	8	7	5	26	32	-	1	-	1
17. Vascular lesions of nervous system	138	210	87	111	546	619	1	5	6	17
18. Coronary disease, angina	304	208	186	99	797	814	6	5	11	11
19. Hypertension with heart disease	16	19	6	13	54	78	-	-	1	-
20. Other heart disease	81	194	46	110	431	625	3	6	4	14
21. Other circulatory disease	62	67	35	38	202	203	-	-	3	1
22. Influenza	-	2	-	2	4	18	-	-	-	-
23. Pneumonia	80	82	61	72	295	344	1	-	4	4
24. Bronchitis	73	9	40	7	129	197	4	-	2	-
25. Other diseases of respiratory system	13	10	10	6	39	36	-	1	-	-
26. Ulcer of stomach and duodenum	12	4	8	5	29	40	-	-	-	-
27. Gastritis, enteritis and diarrhoea	2	12	3	7	24	18	-	-	-	-
28. Nephritis and nephrosis	10	9	4	5	28	23	-	-	-	-
29. Hyperplasia of prostate	27	-	11	-	38	28	3	-	3	-
30. Pregnancy, childbirth, abortion	-	1	-	-	1	-	-	-	-	-
31. Congenital malformations	8	9	12	6	35	45	-	-	1	-
32. Other defined and ill-defined diseases	83	116	40	60	299	328	-	1	2	4
33. Motor vehicle accidents	19	12	17	5	53	51	-	-	-	-
34. All other accidents	24	27	16	19	86	93	1	-	2	2
35. Suicide	8	16	10	6	40	45	-	1	1	2
36. Homicide and operations of war	-	-	-	-	-	2	-	-	-	-
All causes	1,224	1,295	754	709	3,982	4,466	22	29	49	66
Deaths of infants under 1 year :-										
Total	28	24	17	16	85	91	-	-	-	1
Legitimate	23	22	16	14	75	87	-	-	-	1
Illegitimate	5	2	1	2	10	4	-	-	-	-
Live Births :-										
Total	1,681	1,503	1,014	999	5,197	5,289	41	32	42	31
Legitimate	1,571	1,395	953	956	4,875	4,993	39	29	39	30
Illegitimate	110	108	61	43	322	296	2	3	3	1
Still Births :-										
Total	34	21	18	17	90	99	1	-	4	-
Legitimate	30	20	16	17	83	94	1	-	2	-
Illegitimate	4	1	2	-	7	5	-	-	2	-
Estimated 'Home' population, 1964 (which includes non-civilians)	201,160		126,090		327,250	-	3,630		6,510	
Estimated 'Home' population, 1963 (which includes non-civilians)	198,800		123,260		-	322,060	3,480		6,450	

TABLE 2 (Cont'd.)

Dorchester M.B.		Lyme Regis M.B.		Portland U.D.		Shaftesbury M.B.		Sherborne U.D.		Swanage U.D.		Wareham M.B.		Weymouth and Melcombe Regis M.B.		Wimborne Minster U.D.		Poole M.B.		Beaminster R.D.		Blandford R.D.		Bridport R.D.		Dorchester R.D.		Shaftesbury R.D.		Sherborne R.D.		Sturminster R.D.		Wareham and Purbeck R.D.		Wimborne and Cranborne R.D.	
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	4	-	1	-	-	-	-	-	1	-	-	-	2	-	-	-	1	1	-	-
1	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1	3	1	3	4	1	-	-	2	2	2	1	2	-	5	7	1	1	18	11	1	1	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	
7	-	3	1	-	-	1	1	2	-	6	2	1	1	14	4	4	-	39	9	1	-	2	-	4	-	6	1	4	1	2	1	-	2	2	3	3	
-	5	-	1	-	3	-	-	-	1	-	3	-	1	-	10	-	-	-	30	-	1	-	2	-	4	-	7	-	3	2	3	8	-	12	3		
-	1	-	-	-	1	-	3	-	2	-	1	-	-	-	1	-	-	11	-	-	2	-	4	-	1	-	1	-	3	-	2	-	4	-	5		
5	10	1	1	3	8	2	4	3	4	9	3	5	6	16	24	5	5	66	61	7	7	9	3	12	2	6	9	5	5	4	3	6	2	10	7	31	
1	-	-	-	-	-	-	-	1	-	-	-	-	-	2	3	-	-	3	3	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-		
1	2	-	-	-	1	-	-	-	-	-	-	-	-	2	1	-	-	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
18	18	3	3	6	6	1	-	7	10	3	13	2	5	24	40	3	6	64	87	5	8	9	6	8	11	20	28	6	12	4	2	4	10	14	12		
16	12	1	7	18	7	5	2	7	4	14	8	6	2	63	40	5	4	152	106	10	3	16	9	10	3	29	13	12	9	5	11	12	9	27	14		
1	4	1	1	1	1	-	-	-	-	2	3	-	-	-	2	-	-	10	8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
4	9	2	4	5	9	1	2	-	1	6	11	5	2	12	31	2	1	37	104	5	8	3	11	2	10	10	25	3	9	1	4	5	11	9	11		
4	4	3	1	1	1	2	4	1	3	4	3	2	-	13	7	2	3	27	40	5	2	-	1	-	4	2	4	5	5	1	2	8	6	5	8		
5	6	2	3	1	2	-	1	3	-	6	3	7	8	18	21	-	-	33	34	10	8	3	-	4	4	20	36	4	2	2	1	3	6	5	5		
4	-	1	-	4	2	1	-	1	-	4	1	1	-	16	1	2	-	33	5	2	-	1	1	1	4	4	3	5	1	3	-	4	-	10	-		
2	1	1	-	-	-	-	-	1	2	2	1	-	-	-	4	-	1	10	-	-	1	2	-	-	1	1	-	1	-	3	-	4	-	10	1		
3	-	-	1	-	-	-	-	-	1	-	-	1	-	2	-	-	-	5	3	-	2	1	-	1	-	1	1	-	2	-	-	-	1	1	5		
1	1	-	-	-	1	-	1	2	-	1	-	-	-	3	-	1	2	6	-	-	-	-	-	1	1	1	1	-	1	-	-	1	3	1	1		
3	-	-	-	1	-	-	-	2	-	1	-	-	-	5	-	1	-	8	-	3	-	-	-	-	-	2	-	1	-	-	-	-	2	2	-		
-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
1	1	-	-	2	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
6	7	4	2	3	6	-	3	7	5	6	4	-	3	23	26	1	5	31	50	11	4	3	5	2	5	7	17	2	2	4	4	1	3	3	7		
2	-	-	-	-	1	-	-	1	1	-	1	2	-	4	5	-	-	10	4	-	-	-	-	1	3	-	-	-	2	-	1	-	3	2	6	2	
2	-	-	1	4	-	-	-	-	2	2	1	-	-	2	3	2	-	9	18	1	1	2	2	3	8	1	2	-	1	-	-	-	2	2	4		
-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	1	-	4	9	-	-	-	-	-	1	1	2	1	-	1	4	-	1	2	1		
85	87	23	30	53	50	14	23	39	41	67	64	35	28	231	241	29	27	577	609	64	49	60	45	52	53	120	168	53	58	33	39	58	56	111	86		
1	1	-	-	3	-	-	2	1	1	2	-	1	1	6	9	-	2	14	7	-	2	-	-	-	-	-	1	-	1	2	-	3	-	7	2		
1	1	-	-	2	-	-	2	1	1	1	-	1	1	5	8	-	2	12	6	-	2	1	2	-	-	-	1	-	1	2	-	3	-	6	1		
-	-	-	-	1	-	-	-	-	-	1	-	-	-	1	1	-	-	2	1	-	-	-	-	-	-	-	-	-	1	2	-	-	1	1	5		
106	92	20	15	109	87	46	20	39	43	46	54	34	20	350	364	51	39	797	706	66	60	80	98	46	33	139	126	78	72	65	53	65	69	215	211		
102	86	19	13	107	82	45	19	36	38	39	48	31	20	327	343	48	35	739	652	64	55	75	94	44	31	133	123	73	70	62	53	63	66	201	200		
4	6	1	2	2	5	1	1	3	5	7	6	3	-	23	21	3	4	58	54	2	5	5	4	2	2	6	3	5	2	3	2	3	14	11	22	13	
1	-	-	-	1	2	-	-	2	-	1	-	-	-	8	5	1	-	15	12	4	3	1	-	-	2	1	2	-	-	-	1	-	3	5	3		
1	-	-	2	1	2	-	-	2	-	1	-	-	-	8	4	1	-	13	12	4	3	1	-	-	2	1	2	-	-	-	1	-	3	5	3		
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-		
13,200	3,330	11,800	3,440	7,440	7,530	3,250	42,130	4,130	94,770	8,370	11,820	7,820	18,280	9,830	6,350	10,070	22,780	30,770																			
12,890	3,470	11,600	3,290	7,250	7,470	3,180	41,840	4,130	93,750	8,290	11,520	7,810	18,240	9,730	6,140	9,930	22,290	29,310																			

TABLE 3

NOTIFICATIONS OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Scarlet Fever	72	107	113	147	227	140	55	53	61	57
Whooping Cough	591	373	870	262	161	110	238	38	111	156
Diphtheria (including Membranous Group)	-	-	1	-	1	1	-	-	-	-
Measles (excluding Rubella)	4,944	1,653	2,663	2,604	3,350	1,702	5,431	606	5,255	1,595
Acute Pneumonia (Primary or Influenzal)	166	141	173	124	190	89	90	76	123	51
Meningococcal Infection	5	7	5	3	4	1	-	-	1	2
Acute Poliomyelitis)										
Acute Polioencephalitis)	50	11	10	8	3	1	-	-	-	1
Acute Encephalitis	3	2	3	4	-	1	1	3	3	1
Dysentery	13	63	2	4	112	238	28	8	148	7
Ophthalmia Neonatorum	7	2	6	1	4	6	5	1	12	-
Puerperal Pyrexia	65	60	59	51	50	62	87	118	72	49
Smallpox	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever	16	1	-	-	-	2	-	1	1	1
Enteric or Typhoid Fever (excluding Paratyphoid)	-	-	1	-	1	1	-	1	2	1
Food Poisoning (excluding Dysentery, Typhoid and Paratyphoid)	63	191	29	210	48	24	45	17	12	7
Erysipelas	50	33	22	37	19	23	15	13	9	20
Malaria - Believed to be contracted in this country	-	-	-	-	-	-	-	-	-	-
Malaria - Believed to be contracted abroad	4	5	2	1	-	-	-	-	1	2
Malaria - Induced in Institutions	-	-	-	-	-	-	-	-	-	-
Anthrax	-	-	-	-	-	-	-	-	-	-
	Not notifiable until 1960									

TABLE 4

ATTENDANCES AT WELFARE CENTRES, 1964

Centre	Number of Openings	New Cases Born In				Total Attendances Including new cases	Average Attendance per session
		1964	1963	1959-62	Total		
Beaminster	23	35	43	59	137	774	33.6
Blandford	23	79	64	72	215	1,141	49.1
Blandford Camp	48	61	70	70	201	1,713	35.7
Bovington Camp	21	56	68	18	142	679	32.3
Bridport	50	30	33	48	111	572	11.4
Colehill	12	32	36	26	94	403	33.5
Corfe Mullen	24	40	47	46	133	591	24.6
Dorchester	75	181	222	119	522	2,472	32.9
Ferndown	24	43	30	47	120	650	27.1
Gillingham	51	37	66	85	188	1,399	27.4
Handley	12	15	15	26	56	246	20.5
Lyme Regis	18	33	44	28	105	178	9.9
Lytchett Matravers	8	12	18	26	56	206	25.7
Sandford	8	20	15	46	81	323	40.3
Shaftesbury	46	64	22	40	126	745	16.2
Sherborne	42	109	127	69	305	1,492	35.5
Sturminster Newton	42	26	45	25	96	641	15.2
Swanage	50	100	100	159	359	1,825	36.5
Upton	15	27	49	53	129	577	38.4
Verwood	24	32	51	48	131	611	25.4
Wareham	50	88	117	164	369	2,030	40.6
West Moors	23	39	21	37	97	431	18.7
West Parley	10	3	12	5	20	49	4.9
Wimborne	31	85	55	54	194	1,185	38.2
Wool	16	19	58	44	121	388	24.2
Poole							
Branksome	119	224	225	529	978	5,568	46.8
Broadstone	52	96	92	92	280	2,122	40.8
Canford Magna	9	2	3	8	13	32	3.5
Central Clinic	148	168	108	388	664	3,101	20.9
Creekmoor	24	27	43	58	128	464	19.3
Hamworthy	77	115	146	208	469	2,817	35.2
Newtown	47	109	117	192	418	2,174	46.2
Oakdale	51	139	178	280	597	3,307	64.8
Old Town	53	92	128	234	454	1,767	33.3
Rossmore	47	72	88	107	267	2,011	42.7
Wallisdown	52	120	114	235	469	2,464	47.4
Waterloo	38	32	58	53	143	930	24.5
South Dorset Area							
Broadwey	30	41	49	33	123	711	23.7
Chickerell	24	16	26	21	63	517	21.5
Lanehouse	24	30	34	27	91	585	24.4
Littlemoor	24	33	20	20	73	451	18.7
Portland Tophill	49	106	94	86	286	2,223	45.3
Portland Underhill	52	85	81	79	245	2,038	39.2
Preston	23	51	44	54	149	727	31.6
Southill	28	33	37	55	105	648	23.1
Spa	20	46	21	5	72	511	25.5
Weymouth	104	304	267	112	683	4,608	44.3
Wyke Regis	78	96	111	57	264	2,273	29.1
Totals	1,919	3,303	3,512	4,327	11,142	63,370	

TABLE 5
DOMICILIARY MIDWIFERY STAFF

Employed by	Administrative and Supervisory Staff			Domiciliary Midwives		
	Whole-time	Part-time	Whole-time equivalent of	Whole-time	Part-time	Whole-time equivalent of
The Authority	-	4	1 $\frac{1}{3}$	13	43	21.5
Voluntary organisations acting as agents for the Authority	-	-	-	-	-	-
H.M.C. or B.G.	-	-	-	-	-	-
Number of midwives approved as teachers included above					23	

TABLE 6
HOME NURSING - STAFF

Number of S.R.N's., R.S.C.N's., and R.F.N's not employed solely on administrative and supervisory duties	Male	2
	Female	69
Number of state entrolled nurses		2
Number of nurses who have completed a course of district training		38
Number of student district nurses in training at end of year		-

TABLE 7
HEALTH VISITING - STAFF

	Whole-time staff	Part-time staff	Whole-time equivalent of part-time staff
Number of health visitors	3	41	30.45
Number of group advisors	-	-	-
Number of health visitor tutors	-	-	-
Number of qualified staff engaged solely on tuberculosis visiting	(a) Qualified health visitors (b) Qualified tuberculosis visitors only		1 -
Number of health visitors and tuberculosis visitors acting under dispensation	(a) Engaged solely on tuberculosis visiting (b) Others		- -

TABLE 8

AMBULANCE SERVICE STATISTICS - 1964

Depots.

Item	Blandford	Brildport	Dorchester	Ferndown	Gillingham	Lyme Regis	Poole	Shaftesbury	Sherborne	Sturminster Newton	Swanage	Wareham	Weymouth	Wimborne	Total
Patients Carried															
Emergency															
Maternity	73	82	106	38	11	32	313	11	17	23	21	84	197	64	1,072
Road Accident	99	83	193	80	32	18	442	73	49	38	15	135	206	188	1,651
Other Accident	86	8	49	26	33	20	1,058	-	39	22	53	46	298	120	1,858
Other Emergency	125	297	465	27	19	36	1,083	33	19	18	16	54	903	22	3,117
Total Emergency	383	470	813	171	95	106	2,896	117	124	101	105	319	1,604	394	7,698
Routine															
Hospital Admissions	256	341	241	285	116	131	734	247	292	214	295	343	749	433	4,677
Hospital Discharges	137	172	330	131	14	23	1,476	21	105	60	180	154	626	305	3,734
Inter-Hospital Transfers	109	185	401	33	18	53	1,982	88	83	40	134	147	599	98	3,970
Out-Patient Attendances :-															
Physiotherapy	16	2,038	1,686	125	22	38	1,172	-	500	1	55	85	5,655	346	11,739
Other	320	1,344	3,198	342	36	129	10,522	43	1,075	148	254	556	4,322	583	22,872
Corpses	1	9	13	3	-	4	45	-	1	2	7	3	9	8	105
Training Centre Attendances	-	4	-	-	-	-	11,962	-	-	-	-	-	-	13,112	25,078
Other Patients	18	39	150	34	15	10	802	2	436	16	25	27	287	57	1,918
Total Routine	857	4,132	6,019	953	221	388	28,695	401	2,492	481	950	1,315	12,247	14,942	74,093
Total Patients	1,240	4,602	6,832	1,124	316	494	31,591	518	2,616	562	1,055	1,634	13,851	15,336	81,791
Journeys															
Patient Carrying	639	1,545	3,318	524	221	323	6,241	394	903	330	551	733	5,145	921	21,788
Training Centres	-	-	-	-	-	-	786	-	-	-	-	-	-	757	1,543
Other Journeys	15	381	488	182	18	10	264	16	59	104	13	34	173	138	1,895
Total Journeys	654	1,926	3,806	706	239	333	7,291	410	962	434	564	767	5,318	1,816	25,226
Mileage															
Patient Carrying	29,761	42,740	46,911	20,193	10,715	12,730	94,476	11,952	24,282	18,723	17,551	41,435	67,111	33,415	471,995
Training Centres	-	-	-	-	-	-	14,193	-	-	-	-	-	-	23,241	37,434
Other Mileage	170	2,489	2,255	1,221	197	246	1,981	125	1,041	861	67	973	1,332	2,000	14,958
Total Mileage	29,931	45,229	49,166	21,414	10,912	12,976	110,650	12,077	25,323	19,584	17,618	42,408	68,443	58,656	524,387
Night Journeys (between 1800 - 0900 hours)	199	203	354	118	52	73	1,606	114	102	63	97	200	867	222	4,270
Stretcher Cases	842	693	1,294	654	212	313	7,218	431	491	348	783	1,042	2,484	1,296	18,101
Sitting Cases - Walking	280	3,177	4,202	184	65	103	21,590	67	1,925	130	172	472	10,242	13,433	56,042
Not Walking	118	732	1,336	286	39	78	2,783	20	200	104	100	120	1,125	607	7,648
*Patients per Journey	1.94	2.98	2.06	2.14	1.43	1.53	3.14	1.31	2.89	1.76	1.91	2.23	2.69	2.41	2.60
*Miles per Patient	24.0	9.29	6.87	17.96	33.91	25.77	4.81	23.07	9.28	32.17	16.64	25.36	4.84	15.02	8.32

*Excluding mentally subnormal persons

TABLE 9
HOSPITAL CAR SERVICE STATISTICS, 1964

Item	Area										Total
	Blandford	Bridport	Dorchester	Gillingham	Poole	Shaftesbury	Sherborne	Wareham	Weymouth	Wimborne	
Number of Patients carried											
Hospital admissions	183	202	103	47	103	73	38	193	68	146	1,156
Hospital discharges	199	195	155	21	250	68	37	175	210	82	1,392
Inter-hospital transfers	6	15	68	-	45	8	8	2	30	3	185
Out-Patient attendances :-											
Physiotherapy	1,658	2,671	652	415	6,779	567	503	3,612	903	3,926	21,686
Other	8,159	3,804	3,198	1,802	9,958	1,962	1,200	6,644	4,520	6,988	48,235
Training centre attendances	-	1,272	-	-	1,018	-	285	-	365	1,438	4,378
Education, Immunisation, Social Services	1,046	559	499	675	4,892	415	204	836	51	1,705	10,882
Other Patients	16	11	11	6	25	7	2	17	15	42	152
Total Patients	11,267	8,729	4,686	2,966	23,070	3,100	2,277	11,479	6,162	14,330	88,066
Number of Journeys											
Patient Carrying (excluding training centre journeys)	3,820	2,872	1,927	816	5,022	1,099	745	4,162	1,649	4,544	26,656
Training centre journeys	-	154	-	-	376	-	149	-	350	178	1,207
Other journeys	125	76	58	22	71	25	21	158	39	112	707
Total Journeys	3,945	3,102	1,985	838	5,469	1,124	915	4,320	2,038	4,834	28,570
Mileage											
Patient carrying (excluding training centre mileage)	138,828	95,338	70,619	31,812	115,900	32,865	24,318	133,559	53,015	116,597	812,851
Training centre mileage	-	10,396	-	-	2,375	-	3,289	-	7,748	10,257	34,065
Other mileage	1,321	736	700	209	672	152	289	1,726	261	652	6,718
Total Mileage	140,149	106,470	71,319	32,021	118,947	33,017	27,896	135,285	61,024	127,506	853,634
*Patients per journey	2.95	2.60	2.43	3.63	4.39	2.82	2.67	2.76	3.51	2.84	3.14
*Miles per patient	12.32	12.78	15.07	10.72	5.25	10.60	12.21	11.63	9.14	9.04	9.71

*Excluding mentally subnormal persons

TABLE 10

DOMESTIC HELP SERVICE - YEAR ENDED 31.12.64

Area		Home help to households/or persons												Helps employed at 31.12.64		
		Aged 65 or over on first visit in 1964		Aged under 65 on first visit in 1964										Full-time	Part-time	Spare-time	Total
Old	New	Chronic sick and T.B. Old	New	Mentally dis-ordered Old	New	Maternity Old	New	Others Old	New	Total Old	New					
Beaminster	9	-	1	-	-	-	-	-	-	-	10	-	-	-	2	2
Blandford	36	13	5	1	1	-	1	-	-	3	43	18	-	3	7	10
Bridport	34	17	2	5	-	-	-	-	-	3	36	25	-	1	6	7
Dorchester	50	32	4	2	-	-	-	6	2	7	56	47	-	2	10	12
Lyme Regis	3	5	-	-	-	-	-	-	-	1	3	6	-	-	1	1
Poole	260	194	21	2	1	-	4	51	17	70	303	317	-	41	21	62
Shaftesbury	55	22	4	1	-	1	-	6	2	3	61	33	-	2	18	20
Sherborne	17	20	4	4	-	-	-	1	-	5	21	30	-	1	8	9
South Dorset	264	133	15	25	-	-	2	32	-	2	281	192	-	49	1	50
Sturminster	41	21	2	2	-	-	-	3	-	1	43	27	-	3	13	16
Swanage	18	17	1	-	-	-	1	2	-	1	20	20	-	-	7	7
Wareham	35	23	1	6	-	-	-	5	-	6	36	40	-	5	3	8
Wimborne	88	49	7	6	-	-	-	20	2	15	97	90	-	7	24	31
Totals	910	546	67	54	2	1	8	127	23	117	1010	845	-	114	121	235

Equivalent full-time helps = 109.3

TABLE 11

PERSONS RESIDENT ON 31st DECEMBER, 1964 IN ACCOMMODATION PROVIDED UNDER PART III OF THE
NATIONAL ASSISTANCE ACT, 1948

Establishment	No. of Beds	Not Materially Handicapped				Blind				Deaf				Epileptic				Other Physical Handicap				Mentally Handicapped				Grand Total		
		Aged		Not aged		Aged		Not aged		Aged		Not aged		Aged		Not aged		Aged		Not aged		Aged		Not aged				
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
Chalbury Lodge, Preston, Weymouth	17	4	4	-	-	-	-	-	-	4	-	-	-	-	-	-	-	1	2	-	-	-	2	-	-	5	12	17
James Day Memorial Home, Swanage	50	8	2	-	-	3	1	1	-	-	-	-	1	1	-	-	5	16	-	-	1	11	-	-	-	19	31	50
Belmont Court, Parkstone	37	-	-	-	-	5	20	-	1	1	7	-	-	1	-	-	-	1	-	1	-	-	-	-	-	6	31	37
The Lawns, Weymouth	50	8	10	-	-	1	-	-	-	-	-	-	-	-	-	-	9	20	-	-	-	1	-	-	-	18	31	49
Maiden Castle House, Dorchester	41	10	9	1	-	-	1	-	-	-	4	-	-	-	-	-	2	11	-	1	-	1	-	-	-	13	27	40
St. Martin's, Gillingham	49	9	19	-	1	-	3	-	-	-	3	-	-	-	-	-	3	7	-	-	1	3	1	-	-	14	36	50
Alexandra House, Parkstone	50	1	2	-	-	1	5	-	-	-	-	-	-	-	-	-	8	25	-	-	1	8	-	-	-	11	40	51
Castleman House, Blandford	51	-	-	-	-	-	-	-	-	2	4	-	-	-	-	-	11	15	-	-	4	6	3	-	-	20	25	45
River House, Wareham	50	10	5	-	-	1	-	-	-	4	4	1	-	1	1	-	4	4	2	1	7	2	-	1	30	18	48	
Stour View House, Sturminster Newton	109	4	3	-	1	-	2	1	-	-	4	-	-	2	1	-	3	19	25	1	2	5	21	3	5	35	67	102
Stoke Water House, Beaminster	115	17	7	1	1	-	1	1	-	-	-	1	-	-	1	1	20	31	7	3	6	7	3	3	57	54	111	
Elizabeth House, Poole	55	3	13	-	1	-	-	-	-	-	2	-	-	1	1	1	3	12	13	1	-	1	2	2	-	21	35	56
Totals (County Homes)	674	74	74	2	4	11	33	3	1	7	32	2	-	4	4	3	8	94	170	11	8	26	64	12	9	249	407	656
Voluntary Homes	6	20	-	-	-	-	3	1	-	2	1	-	-	-	-	2	3	3	10	6	8	-	-	-	-	20	45	65
Other Authorities' Homes	5	10	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	7	11	18	
Totals	85	104	3	4	11	36	4	1	9	33	2	-	4	4	5	11	97	180	17	16	27	65	12	9	276	463		
	189	7			47	5			42	2			8	16			277	33			92	21			739		739	
		196				52				44				24				310				113						

Persons included in above accommodation on behalf of other authorities 12

The difference of eighteen between the number of residents in the Council's homes on 31st December and the 674 places provided is accounted for by temporary absences in hospital, on holiday and vacancies in process of being taken up.

TABLE 12

**ADMISSIONS TO AND DISCHARGES FROM THE COUNTY COUNCIL'S RESIDENTIAL
ACCOMMODATION DURING THE YEAR ENDED 31st DECEMBER, 1964**

Admissions		Discharges	
From own home, lodgings, relatives, etc.	198	To own home, lodgings, relatives, etc.	94
From hospital	173	To hospital	197
Transfers	101	Transfers	100
Return from holidays	169	To holidays	182
		Deaths	65
Totals	641		638

TABLE 13

MEALS ON WHEELS SERVICE

Areas in which service operating in 1964										Meals Supplied During 1964	No. of persons who received meals during 1964
Alderholt (commenced February 1964)	..	..	..	..	..	..	..	..	..	246	6
Beaminster	..	..	..	..	..	..	..	..	..	358	14
Blandford Borough and Rural	..	..	..	..	..	..	..	..	..	4,843	123
Bridport Borough and Rural	..	..	..	..	..	..	..	..	..	4,693	77
Broadmayne	..	..	..	..	..	..	..	..	..	966	14
Chalbury	..	..	..	..	..	..	..	..	..	538	7
Charminster	..	..	..	..	..	..	..	..	..	791	11
Corfe Castle	..	..	..	..	..	..	..	..	..	177	2
Corfe Mullen	..	..	..	..	..	..	..	..	..	879	14
Cranborne (ended April, 1964)	..	..	..	..	..	..	..	..	..	30	2
Dorchester	..	..	..	..	..	..	..	..	..	1,419	43
Evershot	..	..	..	..	..	..	..	..	..	298	10
Ferndown	..	..	..	..	..	..	..	..	..	1,117	27
Fontmell Magna (commenced January 1964)	..	..	..	..	..	..	..	..	..	402	11
Gillingham	..	..	..	..	..	..	..	..	..	1,005	20
Lyme Regis	..	..	..	..	..	..	..	..	..	812	12
Lytchett Matravers (commenced September 1964)	..	..	..	..	..	..	..	..	..	6	3
Lytchett Minster	..	..	..	..	..	..	..	..	..	1,158	21
Marnhull	..	..	..	..	..	..	..	..	..	958	17
Martinstown (ended January 1964)	..	..	..	..	..	..	..	..	..	9	1
Piddlehinton	..	..	..	..	..	..	..	..	..	284	6
Poole	..	..	..	..	..	..	..	..	..	10,391	183
Portesham (commenced February 1964)	..	..	..	..	..	..	..	..	..	356	11
Portland	..	..	..	..	..	..	..	..	..	1,953	39
Puddletown (commenced August 1964)	..	..	..	..	..	..	..	..	..	52	4
Shaftesbury (commenced January 1964)	..	..	..	..	..	..	..	..	..	1,649	44
Sherborne Borough	..	..	..	..	..	..	..	..	..	2,060	36
Sherborne Rural (ended January, re-commenced September)	..	..	..	..	..	..	..	..	..	32	2
Shillingstone	..	..	..	..	..	..	..	..	..	523	9
Stour Provost (commenced May 1964)	..	..	..	..	..	..	..	..	..	97	3
Swanage Urban and Rural	..	..	..	..	..	..	..	..	..	2,402	54
Verwood (suspended September 1964)	..	..	..	..	..	..	..	..	..	232	9
Wareham	..	..	..	..	..	..	..	..	..	1,473	26
Weymouth	..	..	..	..	..	..	..	..	..	8,863	202
Wimborne and Pamphill	..	..	..	..	..	..	..	..	..	551	22
Wimborne St. Giles (commenced November, 1964)	..	..	..	..	..	..	..	..	..	24	3
Totals	..	..	..	..	..	..	..	..	..	51,647	1,088

In this, my first annual report, it is fitting that I pay a tribute to my predecessor, Mr. P.J. Pretty, who served the County faithfully and well for over 32 years. When he was appointed in 1931, all the dental treatment in the County was carried out by two dental officers, working single-handed with portable equipment in village halls and school classrooms. When he left the establishment had been increased to fifteen dental officers and dental surgery assistants, a dental auxiliary and three dental hygienists. Fifteen fixed surgeries had been provided as well as six mobile dental clinics.

Staff

On 31st December, 1964, there were twelve full-time dental officers on the staff, a decrease of one compared with the position on 31st December, 1963. The number of part-time officers increased from three to four giving a total whole-time equivalent of 1.8 dental officers. The average staff level throughout the year, estimated on the total number of sessions worked shows an equivalent of twelve dental officers, a decrease of five per cent as compared with 1963.

Treatment

As will be seen from the figures for the year fewer patients were treated in an apparently greatly increased number of sessions. This is due in part to a more realistic method of calculating the time devoted to Maternity and Child Welfare Work, which is now based on the average attendance per session; and in part to the fact that it proved possible to provide more conservative treatment for pre-school children, fillings being increased by twenty-eight per cent and extractions having decreased by thirty-three per cent.

As it would appear from a small pilot study into the incidence of dental caries in Dorset that about seventy per cent of children require some form of treatment during their first year of school life, it is disappointing to note that only about five per cent of these pre-school children seek dental treatment before they enter school. Every opportunity is taken of advising parents of the necessity of seeking dental treatment for their children at the age of two and a half, so that their first impression of a dentist will be of a kindly individual who examines their teeth and gives them a ride in the chair, rather than that of an ogre, smelling of anaesthetic and brandishing a pair of forceps. In this connection, mention must be made of the admirable work being performed by the dental auxiliary who is doing much to introduce very young children to dental treatment in the pleasantest possible way.

The dental needs of the priority classes in a predominantly rural area such as Dorset can only be met by regular visits of dental officers to all the larger villages for the inspection and treatment of those pre-school children and expectant and nursing mothers not already under the care of a dental practitioner. Ideally this service should be provided at the same time as the routine visit to schools but, due to staff shortages, it has not been possible to offer regular six-monthly appointments to school children and the time lag between visits varies considerably. It is hoped that, as more dental officers are employed, this time lag will be so reduced as to make it possible for a regular six-monthly visit to be made to all centres of rural population, so that an adequate treatment service may be provided for all those entitled to it. At present most of the treatment for the priority classes is carried out at the fixed clinics in Weymouth, Poole and Dorchester, and staff shortages at the latter have rendered the provision of a full and comprehensive service impossible.

Dental Health Education

During the year talks on dental health education were given to twelve groups of adults, mainly Young Wives' Groups, comprising a total of 276 persons.

The General Dental Council made arrangements for their mobile dental health education unit to attend at Canford Magna during the four days of the Royal Counties Show and this proved a great attraction to children, some 2,000 visiting the unit during the four days. Instruction on dental health education was provided by members of the dental staff and a large quantity of literature was given away.

Dental Treatment - Numbers of Cases

	Number of persons examined during the year		Number of persons who commenced treatment during the year		Number of Courses of treatment completed during the year	
1. Expectant and Nursing mothers	267	(264)	214	(215)	159	(175)
2. Children aged under 5 and not eligible for school dental service	687	(674)	463	(505)	334	(393)

Dental Treatment Provided

	Scalings and gum treat- ment	Fill- ings	Silver Nitrate treat- ment	Crowns and Inlays	Extrac- tions	General anaes- thetics	Dentures Provided Full Partial upper upper or or lower lower		Radio- graphs
1. Expectant and nursing mothers	80 (57)	378 (464)	2 (2)	- (2)	344 (318)	39 (75)	22 (20)	43 (42)	34 (28)
2. Children aged under 5 years and not eligible for school dental service.	14 (23)	550 (397)	100 (64)	- (-)	367 (545)	189 (244)	- (-)	- (-)	1 (7)

Number of Premises and Sessions

Number of dental officer sessions (i.e. equivalent complete half days) devoted to maternity and child welfare patients during the year.	302 (207)
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Figures for 1963 are shown in brackets

