

**[Report 1970] / Medical Officer of Health, Dudley County Borough.**

**Contributors**

Dudley (England). County Borough Council.

**Publication/Creation**

1970

**Persistent URL**

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

**License and attribution**

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

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

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

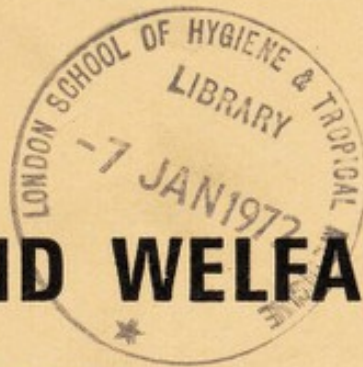



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>



**County Borough of Dudley**

**HEALTH AND WELFARE  
SERVICES 1970**





Digitized by the Internet Archive  
in 2017 with funding from  
Wellcome Library

<https://archive.org/details/b29171350>



COUNTY BOROUGH OF DUDLEY

---

# ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

PRINCIPAL SCHOOL MEDICAL OFFICER

DIRECTOR OF WELFARE SERVICES

*G. M. REYNOLDS, M.B., B.Ch., B.Sc., D.P.H.*

## PRINCIPAL CONTENTS

Constitution of Committees .. .. .	3
Staff .. .. .	5
Vital Statistics .. .. .	13
Congenital Malformations .. .. .	16
Infectious Disease .. .. .	17
Venereal Disease .. .. .	20
National Health Service Act 1946—	
Care of Mothers and Young Children .. .. .	21
Nurseries and Child Minders .. .. .	22
Nursing Services .. .. .	25
Midwifery .. .. .	26
Health Visiting .. .. .	30
District Nursing .. .. .	33
Vaccination and Immunisation .. .. .	35
Ambulance Service .. .. .	38
Prevention of Illness, Care and After-Care .. .. .	40
Health Education .. .. .	40
Chiropody .. .. .	40
Cervical Cytology .. .. .	41
Home Help Service .. .. .	42
Housing on Medical Grounds .. .. .	42
Medical Examinations of Staff .. .. .	43
Chief Veterinary Officer's Report .. .. .	44
Welfare Services .. .. .	47
Luncheon Clubs and Meals on Wheels .. .. .	49
Care of Physically Handicapped .. .. .	49
The Deaf .. .. .	51
The Blind .. .. .	51
Sheltered Workshops .. .. .	51
Remedial Aids and Adaptations .. .. .	52
Care of Mentally Disordered .. .. .	53
School Health Service .. .. .	55
Chief Public Health Inspector's Report .. .. .	85
Housing .. .. .	97
Water .. .. .	101
Factories .. .. .	104
Noise Abatement .. .. .	112

**Constitution of Committees for the year 1970/71****HEALTH COMMITTEE**

Councillor J. D. Kendall (Chairman)

Councillor J. F. O'Neill (Vice-Chairman)

The Mayor	Councillor Mrs. S. M. Griffiths
The Deputy Mayor	Councillor F. Overton
Alderman W. G. K. Griffiths	Councillor J. Payne
Alderman J. W. R. Roe	Councillor Dr. K. C. Rogers
Councillor A. Crowe	Councillor J. D. Skelding
Councillor Mrs. M. Ellis	Councillor E. H. Williams
Councillor S. Fairfold	Councillor Mrs. E. D. Winship

(Members of the Council)

Dr. R. J. H. Guy	}	Appointed by Dudley Executive Council
Dr. F. G. Lewis		
Mr. T. E. Bennett		
Mrs. D. Crump		
		Appointed by Local Hospital Management Committee
Dr. R. J. H. Guy		Appointed by Dudley Local Medical Committee
Mrs. S. Fairfold	and	Mrs. W. D. Meredith

(Co-opted Members)

**WELFARE COMMITTEE**

Councillor Miss M. A. Moss (Chairman)

Councillor J. W. Beech (Vice-Chairman)

The Mayor	Councillor Mrs. R. E. Dangerfield
The Deputy Mayor	Councillor J. W. Garratt
Alderman J. P. Fithern	Councillor Mrs. S. M. Griffiths
Alderman H. N. Hayden	Councillor F. Hadden
Alderman Mrs. L. Hingley	Councillor P. A. G. Hollins
Alderman F. J. Williams	Councillor P. L. R. Horseman
Councillor J. L. Billingham	

(Members of the Council)

Mrs. W. A. Allport	Mr. S. Grange
Mrs. M. Baker	Mrs. J. G. Rowley
Mrs. E. A. Duesbury	Mrs. F. T. Webb

(Co-opted Members)

**(EDUCATION) SCHOOLS AND SPECIAL SERVICES  
SUB-COMMITTEE**

The Mayor	Councillor Mrs. F. Homer
The Deputy Mayor	Councillor Mrs. R. E. Dangerfield
Alderman W. G. K. Griffiths	Councillor J. Jones
Alderman D. Harty	Councillor J. T. Wilson
Alderman E. Morris	Councillor R. J. Griffiths
Councillor Mrs. M. Ellis	Councillor J. D. Kendall
Councillor M. J. C. Elwell	

(Members of the Council)

Mr. R. Handley	Canon Stevens
Mr. W. J. Love	Reverend Fisher
Mr. R. G. Hough	Reverend Timlin

**HEALTH AND WELFARE STAFF**  
**as at 31st December, 1970**

Medical Officer of Health .. ..	G. M. Reynolds, M.B., B.Ch., B.Sc., D.P.H.
Deputy Medical Officer of Health	J. A. McKinnon, M.D., M.B., Ch.B., D.P.H.
First Senior Medical Officer ..	M. Kerrigan, B.A., M.B., B.Ch., B.A.O., D.P.H.
Senior Medical Officers .. ..	D. E. George, M.B., Ch.B. A. Shukla, M.B., B.S., D.C.H.
Medical Officers .. .. .	M. Passi, M.B., B.S., D.P.H. J. R. B. Gibson, L.R.C.P., L.R.C.S., L.R.F.P.S. B. Clarke, M.B., Ch.B. G. J. O'Connor, M.B., B.Ch., B.A.O., N.U.I. P. J. Edwin, M.B., Ch.B. R. Harrison, M.B., Ch.B.
Ear, Nose and Throat Consultant ..	G. O. Clarke, F.R.C.S.
Consultant Chest Physician ..	A. W. B. MacDonald, B.Sc., M.D.
Consultant Child Psychiatrist ..	D. T. Maclay, M.D., D.P.M.
Consultant Ophthalmologists ..	L. H. G. Moore, M.B., Ch.B., D.O.M.S. J. A. Cox, M.N., B.S., D.O.
Consultant Orthopaedic Surgeon	J. A. O'Garra, M.Ch., Orthop., F.R.C.S.
Consultant Obstetrician .. ..	J. A. Nagle, M.B., B.Ch., B.A.O., D.P.H.
Chief Dental Officer .. ..	Mrs. J. P. McEwan, L.D.S., R.F.P.S.
Senior Dental Officers .. ..	Miss J. Caswell, B.D.S., L.D.S., R.C.S. P. M. Cross, B.D.S. D. J. Prince, B.D.S. A. T. Prince, B.D.S.



Dental Officers .. .. .	P. M. Harrison, B.D.S. A. W. Parkes, M.B., Ch.B., B.D.S. E. B. Cheffins, L.D.S. M. Baguant, L.D.S., R.C.S. D. C. Martin, B.Ch.D., L.D.S.
Dental Auxiliaries .. .. .	2
Dental Surgery Assistants	
(Full-time) .. .. .	5
(Part-time) .. .. .	7
Principal Nursing Officer .. .. .	Miss M. Le Manquais, S.R.N., R.F.N., S.C.M., M.T.D., H.Vs.Cert.
Superintendent Health Visitor .. .. .	Miss A. Lamb, S.R.N., S.C.M., H.Vs.Cert.
Combined Health Visitors and School Nurses (Full-time) .. .. .	23
Combined Health Visitors and School Nurses (Part-time) .. .. .	10
School/Clinic Nurses (Full-time)	12
Tuberculosis Health Visitor .. .. .	1
Student Health Visitors .. .. .	2
Non-Medical Supervisor of Mid- wives .. .. .	Miss G. M. Davies, S.R.N., S.C.M., Prem.Baby Cert.
Domiciliary Midwives (Full-time)	22
Domiciliary Midwives (Part-time)	4
Superintendent Home Nurse .. .. .	Miss P. Lawton, S.R.N., Queen's Nurse
District Nurses (Full-time) .. .. .	25
District Nurses (Part-time) .. .. .	5
Nursing Auxiliaries (Part-time)	6
Domestic Help Organiser .. .. .	Miss D. M. Cassere
Assistant Organiser .. .. .	1
Domestic Helps .. .. .	the equivalent of 97 (full-time)
Chief Chiropodist .. .. .	R. G. Matthews
Chiropodist (Full-time) .. .. .	1
Chiropodists (Part-time) .. .. .	8

Senior Speech Therapist .. ..	Mrs. G. M. Stuffins
(Part-time)	
Speech Therapist (Full-time) ..	1
Speech Therapist (Part-time) ..	1
Orthoptist (Part-time) .. ..	1
Audiology Technician (Full-time)	1
Audiology Technician (Part-time)	1
Chief Welfare Officer .. ..	J. Berry
Casework Organiser .. ..	1
Senior Social and Mental Welfare Officers .. .. .	2
Social and Mental Welfare Officers .. .. .	5
Home Teacher for the Blind ..	1
Welfare Officer for the Deaf ..	1
Trainee Welfare Officers .. ..	7
Welfare Assistants .. ..	2
Occupational Therapists/ Handicraft Instructresses ..	2
Homes Officer .. .. .	1
Matrons of Residential Homes ..	10
Assistant Matrons .. ..	7
Training Centre Head Teacher/ Supervisors .. .. .	
Dixons Green .. ..	Mrs. I. M. Cooper
Audnam .. .. .	C. M. Kelcey
Supervisors and Instructors ..	28
Chief Veterinary Officer .. ..	D. Howie, M.R.C.V.S., D.V.S.M.
Meat Inspectors .. .. .	6
Principal Administrative Assistant	J. W. Trinder
Deputy Principal Administrative Assistants .. .. .	2
Senior Administrative Assistants	2
Other Administrative and Clerical Staff .. .. .	43 (Full-time) 11 (Part-time)

Chief Public Health Inspector	..	..	..	W. Parker, M.R.S.H., M.A.P.H.I., M.Inst.P.C., Cert.S.I.B.
Deputy Chief Public Health Inspector	..	..	..	W. H. Bowman, M.R.S.H., M.A.P.H.I., Cert.S.I.B.
Assistant Chief Public Health Inspector	..	..	..	C. H. Crawford, M.A.P.H.I.
Chief Divisional Public Health Inspector	..	..	..	H. R. Fry, M.A.P.H.I., M.R.S.H., A.C.I.S.
Divisional Inspectors	..	..	..	3
District Inspectors	..	..	..	6
Housing Inspectors	..	..	..	3
Food Inspectors	..	..	..	3
Additional Inspector	..	..	..	1
Meat Inspector	..	..	..	1
Technical Assistant	..	..	..	1
Pupil Public Health Inspectors	..	..	..	2
Administrative and Clerical Staff	..	..	..	9

## FOREWORD

The estimated mid-year population of the Borough was 182,420, which is an increase of 1,040 over the previous year. The number of live births was 3,450, which gives a rate per 1,000 of 16.3 compared with the national rate of 16.0. The infant mortality rate of 18 was the same as the national rate, but the peri-natal mortality rate of 27 compared unfavourably with the national rate of 23.

The five most common causes of death were: Ischaemic heart disease 399, Cerebral vascular disease 297, pneumonia 129, bronchitis and emphysema 119, and cancers of the lung and bronchus 116. These conditions were the causes of death in 1,060 people out of a total of 1,891. 22 deaths were due to motor vehicle accidents, and 41 to other accidents. There were 8 suicides compared with 3 in 1969.

Analysis of the immunisation of all children born in 1968 who were living in the County Borough at the end of 1970 shows that 80% (81%) had been protected against Diphtheria, 77% (79%) against Whooping Cough, and 79% (79%) against Poliomyelitis. In addition, 80% had been protected against Tetanus, 58% against Smallpox and 42% against Measles. The national figures, where available, are shown in brackets. In addition, immunisation against Rubella was offered to girls between their twelfth and fourteenth birthdays and a total of 1,514 were vaccinated.

The cost of the Health and Welfare Services for the financial year 1970/71 was £1,045,718, an increase of £175,281 over the previous year, the money being allocated to the various services in the following way:—

Personal Health	..	..	..	£576,199
Welfare Services	..	..	..	£210,493
Environmental Health	..	..		£132,201
School Health Service	..	..		£126,825

A number of new buildings were opened during the year, the largest being an Old People's Home with 48 places, which started admitting in January. A new Training Centre was also opened at Russells Hall, which catered for the needs of 180 mentally handicapped children. As a result, the unsatisfactory building at Dixons Green was closed, and the pressure on the Audnam Training Centre was relieved when a number of mentally handicapped were transferred to the new Centre.

Another building formerly used as a small Old People's Home was adapted and extended to accommodate up to ten mentally handicapped young adults, together with a resident Warden and Matron. All ten places were taken up within a few weeks of the opening in May. The building of two other major projects was commenced, namely an Old People's Home at Sedgley and a Handicraft Centre at Wellington Road.

Other projects in the Capital Building Programme for the period 1970-74 included an Adult Training Centre, two Health Centres by the extension of existing Clinics, 1 Clinic capable of extension to a Health Centre at a later date, a purpose-built Health Centre at Brierley Hill, and residential accommodation for the elderly mentally confused.

The Dawson Committee in 1920 which was set up by the Government of the day to advise on the future of medical service, recommended that General Practice would best be conducted from Health Centres "where are brought together various medical services, preventive and curative, so as to form one organisation". Since then the General Practitioner services and the Local Authority services have developed along their own separate ways and only in recent years have they started to come together. On the whole it has taken Family Doctors a long time to overcome their reluctance to work together with statutory authorities. There has been an understandable resistance by General Practitioners and the attitude of many Local Health Authorities has not been in the least bit helpful. Doctors have thought that their practice would lose its individuality or that the relationship with the patient would suffer, or that there would be some form of clinical direction, or even that withdrawal from the National Health Service would be more difficult. Whatever the reason, it shows a reluctance and a fear by General Practitioners which, although in my view not justified, is real enough to the Doctor himself.

Although Health Centres are planned for the Borough, there will not be one in operation until the end of 1971. However, 14 General Practitioners out of a total of 60 for whom Dudley Executive Council is responsible, have a tenancy arrangement with the Local Authority and hold their surgeries in Health Department Clinics. Two other Doctors' practices are temporarily accommodated in Local Authority premises and they have expressed a desire to practise from Health Centres.

The "Annis Gillie" Committee Report in 1963 on "The Field of Work of the Family Doctor" pointed out that the development of the Health and Welfare Services of the Local Authority is bound up with the future of the General Practitioner Service and that the one will interact with the other and that both in future should be considered together. It went on to say that full co-operation could be secured best by the attachment of fieldworkers—Nurses, Midwives and Health Visitors—to individual practices and that this must become general. Where an attachment or liaison scheme works well there is a more comprehensive coverage of patients' needs which has resulted from a closer working relationship between the General Practitioner, the Health Visitor, the District Nurse and the Midwife. There is also a continuity of care and treatment which can only result in an improved service. By the end of the year all Health Visitors and Domiciliary Nurses were attached to General Practitioners.

Early in 1970 a second Green Paper on the Future Structure of the National Health Service was published and since then a Consultative Document on National Health Service Re-Organisation has also been produced. Both documents stress the need for a unified Health Service and they have some decisions in common. Firstly that the National Health Service would be administered by Area Health Authorities and not Local Government; secondly that the Area Health Authority will be co-terminous with the boundaries of the new Local Authorities; and lastly that Health Services and Social Services will be administered by separate Authorities.

The damaging effects of the tri-partite system have for a very long time been only too obvious, and there can be few who work in the Local Health Authority or Executive Councils or in the Hospital Service who do not see the advantages of a unified service. This does not mean that an administrative change in the service will cure all its ills, but it does mean that an attempt is being made to use our present resources to the best advantage.

As a result of the Local Authority Social Services Act, 1970, a Social Services Department is to be established in every County Borough and County Council in England and Wales on 1st April, 1971, and by the time this report is published these new Departments will have been in operation for some eight months. They will be under the control of a Director of Social Services and, broadly speaking, the services to be administered by the new Department are those formerly dealt with by the Children's Department, by the Welfare Department, and by the Mental Welfare Section of Health Departments, with the addition of the Home Help Service and the supervision of Day Nurseries and Child Minders. There is now a unified profession of Social Workers, and it is hoped that eventually they will have a common training.

We should appreciate the motives and aspirations of Social Workers, who have since the publication of the Seebohm Report worked hard for the unification of their service. This development was sensible and inevitable, and now that they have an integrated service, they will work it successfully, despite initial difficulties and restrictions imposed by staff and financial shortages. Unfortunately in 1974 Social Services Departments will remain with Local Authorities, while the Health Service will be unified into Area Health Authorities. This means that these two services, which should work closely together, are going to be administered by two separate Authorities. How much better would it have been to have one Authority responsible for all medical, nursing and social work.

The upward trend in the school population continued, reaching a maximum of 31,306 during the year compared with 30,084 for 1969. With this continued increase there will inevitably be a lack of accommodation for medical inspections in School until the

School Building Programme for extensions and new buildings is completed. This difficulty was emphasised during the year when several Headteachers made a plea for routine medical inspections, which are normally carried out in Schools, to take place in Clinics because of a lack of facilities and accommodation.

The educational progress and general welfare of children can be adversely affected by a variety of defects, and close co-operation between teaching staff and members of the School Health Service is essential for the early ascertainment and treatment of handicapping conditions. To improve this co-operation a booklet was prepared and distributed to all Headteachers throughout the Borough giving a summary of the facilities offered by the School Health Service and the routine procedures involved.

For a number of years I have commented on the subject of Fluoridation. The position in 1970 remains unchanged, in that the Council adhered to their previous decision not to agree to the fluoridation of public water supplies within the County Borough.

I am grateful to the Chairman and Members of the Health, Welfare and Education Committees and their Sub-Committees for their continued support, interest and encouragement.

*G. M. Reynolds.*

Medical Officer of Health  
Director of Welfare Services and  
Principal School Medical Officer

October, 1971

**VITAL STATISTICS**

Population—Registrar General's estimate 1970 ..	182,420
Rateable Value (at 1st April 1970) .. ..	£8,282,827
Estimated Product of 1d Rate (1970/71) .. ..	£34,400

**Live Births:**

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate .. ..	1723	1576	3299
Illegitimate .. ..	81	70	151
	<hr/>	<hr/>	<hr/>
	1804	1646	3450

Rate per 1,000 population .. ..	16.3
	*(16.0)
Illegitimate live births per cent of total live births	4

**Stillbirths**

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate .. ..	22	30	52
Illegitimate .. ..	3	1	4
	<hr/>	<hr/>	<hr/>
	25	31	56

Rate per 1,000 total live and still births ..	16
	*(13)

**Total Live and Still Births:**

<i>Male</i>	<i>Female</i>	<i>Total</i>
1829	1677	3506

**Infant Deaths (Deaths under 1 year):**

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate .. ..	30	27	57
Illegitimate .. ..	2	3	5
	<hr/>	<hr/>	<hr/>
	32	30	62

**Infant Mortality Rates:**

Total infant deaths per 1,000 total live births ..	18
	*(18)
Legitimate infant deaths per 1,000 legitimate live births .. ..	17
	*(17)
Illegitimate infant deaths per 1,000 illegitimate live births .. ..	33
	*(26)
Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births) .. ..	14
	*(12)
Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births) .. ..	11
	*(11)



Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths) .. .. .	27 *(23)
Maternal mortality (including abortion)	
Deaths .. .. .	—
Rate per 1,000 total live and stillbirths ..	—

**Deaths:**

<i>Male</i>	<i>Female</i>	<i>Total</i>
1055	836	1891

**Death Rate per 1,000 population:** 12.6  
\*(11.7)

\*The National Rates are shown in brackets

<b>Deaths from all causes:</b>	<i>M.</i>	<i>F.</i>	<i>Total</i>
Enteritis and other diarrhoeal diseases ..	2	—	2
Tuberculosis of respiratory system ..	2	1	3
Late effects of respiratory tuberculosis ..	2	—	2
Other tuberculosis .. .. .	2	—	2
Menigococcal infection .. .. .	—	1	1
Other infective and parasitic diseases ..	—	1	1
Malignant neoplasm, buccal cavity, etc. ..	5	1	6
Malignant neoplasm, oesophagus ..	2	2	4
Malignant neoplasm, stomach .. ..	18	18	36
Malignant neoplasm, intestine .. ..	25	28	53
Malignant neoplasm, larynx .. .. .	3	—	3
Malignant neoplasm, lung, bronchus ..	103	13	116
Malignant neoplasm, breast .. .. .	—	30	30
Malignant neoplasm, uterus .. .. .	—	17	17
Malignant neoplasm, prostate .. .. .	21	—	21
Leukaemia .. .. .	8	8	16
Other malignant neoplasms .. .. .	47	40	87
Benign and unspecified neoplasms ..	3	2	5
Diabetes mellitus .. .. .	5	12	17
Avitaminoses, etc. .. .. .	—	1	1
Other endocrine, etc., diseases .. ..	1	5	6
Anaemias .. .. .	3	4	7
Other diseases of blood, etc. .. .. .	—	1	1
Mental disorders .. .. .	1	—	1
Meningitis .. .. .	3	—	3
Multiple sclerosis .. .. .	—	2	2
Other diseases of nervous system .. ..	10	5	15
Chronic rheumatic heart disease .. ..	9	22	31
Hypertensive disease .. .. .	23	21	44
Ischaemic heart disease .. .. .	242	157	399
Other forms of heart disease .. .. .	35	48	83

	<i>M.</i>	<i>F.</i>	<i>Total</i>
Cerebrovascular disease .. .. .	137	160	297
Other diseases of circulatory system ..	31	47	78
Influenza .. .. .	14	13	27
Pneumonia .. .. .	75	54	129
Bronchitis and emphysema .. .. .	101	18	119
Other diseases of respiratory system ..	8	3	11
Peptic ulcer .. .. .	6	1	7
Appendicitis .. .. .	—	1	1
Intestinal obstruction and hernia .. ..	4	5	9
Cirrhosis of liver .. .. .	1	5	6
Other diseases of digestive system ..	10	9	19
Nephritis and nephrosis .. .. .	6	1	7
Hyperplasia of prostate .. .. .	6	—	6
Other diseases, genito-urinary system ..	8	1	9
Diseases of skin, subcutaneous tissue ..	—	1	1
Diseases of musculo-skeletal system ..	4	8	12
Congenital anomalies .. .. .	10	11	21
Birth injury, difficult labour, etc. .. ..	15	6	21
Other causes of perinatal mortality ..	5	6	11
Symptoms and ill defined conditions ..	2	7	9
Motor vehicle accidents .. .. .	13	9	22
All other accidents .. .. .	15	26	41
Suicide and self-inflicted injuries .. ..	6	2	8
All other external causes .. .. .	3	2	5
	<hr/>	<hr/>	<hr/>
	1055	836	1891
	<hr/>	<hr/>	<hr/>

## Deaths

There were 1,891 deaths giving a death rate of 12.6 compared with the national rate of 11.7.

The five most common causes of death were as follows:

Ischaemic heart disease .. .. .	399
Cerebrovascular disease .. .. .	297
Pneumonia .. .. .	129
Bronchitis and emphysema .. .. .	119
Malignant neoplasm, lung, bronchus .. ..	116

22 deaths—one more than in the previous year—were due to motor vehicle accidents and 41 to other accidents. There were 8 suicides compared with 3 in 1969.

## Birth Rate

There were 3,299 legitimate live births, an increase of 9 over the previous year, and 151 illegitimate live births during the year. The birth rate of 16.3 is just over the national rate of 16.0.

### Infant Mortality and Stillbirths

Deaths of infants under one year of age totalled 62, giving an infant mortality rate of 18, the same as the national rate.

There were 56 stillbirths, giving a stillbirth rate of 16 compared with the national rate of 13.

### Premature Infants

During 1970 there were 267 premature live births and 33 premature stillbirths, compared with 231 and 32 respectively in the previous year.

Nine premature infants born at home were nursed entirely at home whilst 5 were transferred to hospital. The balance of 253 were born in hospital. Seventeen died within the first 24 hours, and a further 11 between the second and seventh days.

### Congenital Malformations Observable at Birth

Congenital malformations were reported in 57 live births and 10 stillbirths. The number of malformations notified was 81 and these were classified as follows:—

Central nervous system	..	..	..	25
Eye and ear	..	..	..	2
Alimentary system	..	..	..	11
Heart and circulatory system		..	..	2
Urino-genital system	..	..	..	4
Limbs	..	..	..	26
Other parts of musculo-skeletal system		..		3
Other systems	..	..	..	4
Other malformations	..	..	..	4
				<hr/>
				81
				<hr/>

## INFECTIOUS DISEASE

Notifications of infectious disease were received during 1970 as follows:—

	Numbers Notified		Admitted to Hospital
	M.	F.	
Scarlet Fever .. .. .	7	9	—
Whooping Cough.. .. .	28	11	1
Measles .. .. .	223	246	4
Pneumonia .. .. .	—	—	—
Dysentery .. .. .	6	7	1
Food poisoning .. .. .	8	7	3
Meningitis .. .. .	—	1	1
Ophthalmia neonatorum.. .. .	1	1	1
Infective Jaundice .. .. .	9	9	1
Typhoid .. .. .	—	—	—
Post Infective Encephalitis .. .. .	—	—	—

No cases of Poliomyelitis or Smallpox.

There were no major infectious disease problems in 1970. The figures for dysentery fell from their high level in 1969 of 628 cases to a more normal figure of 15 cases.

It is of interest, however, to note the number of cases of measles notified, which showed a considerable increase on those for 1969. Most of these cases occurred during the summer months, whereas in the past measles outbreaks have occurred during the winter months. Until the introduction of immunisation against measles, the disease followed a two-year cycle of high and low figures, and when immunisation was introduced in Dudley in 1968 the anticipated epidemic did not occur in the early part of 1969. However, during 1969 the vaccine produced by one manufacturer had to be withdrawn, the consequent shortage of vaccines and the publicity given to the circumstances leading to its withdrawal, had adverse effects on public response for some time and it could well be that this was a factor in producing the summer epidemic of 1970.

### **Typhoid Fever**

There were no cases of typhoid during the year. The typhoid carrier reported in my Annual Report for 1969 moved away from Dudley in 1970 and the Medical Officer of Health in whose area she went to live was informed.

### Tuberculosis

The number of notifications of Tuberculosis during the last five years is as follows:—

				Respiratory	Non-Respiratory	Total
1970	..	..	..	35	13	48
1969	..	..	..	48	11	59
1968	..	..	..	27	10	37
1967	..	..	..	43	13	56
1966	..	..	..	35	6	41

### New Cases Notified

	0-	1-	5-	15-	45-	65-	Total (all ages)
Respiratory:							
Males .. ..	—	—	2	11	7	1	21
Females .. ..	—	2	—	9	1	2	14
Non-Respiratory:							
Males .. ..	—	—	1	8	1	—	10
Females .. ..	—	1	—	1	1	—	3

Forty-eight new cases of Tuberculosis were notified during the year as shown above. In addition three patients who were originally diagnosed as having the disease when living elsewhere in the country moved into the County Borough to live. Of the new notifications, 16 occurred in Asian immigrants.

During the year there were 17 outward transfers, 62 were removed from the register as cured, and 12 died, leaving a total of 910 on the register at the end of the year.

The number of persons on the register on 31st December is given for the last five years:—

				Respiratory	Non-Respiratory	Total
1970	..	..	..	774	136	910
1969	..	..	..	828	125	953
1968	..	..	..	854	127	981
1967	..	..	..	881	125	1006
1966	..	..	..	903	118	1021

The following is an analysis of deaths due to Tuberculosis:—

<i>Age Groups</i>	0—	1—	5—	15—	45—	65—	<i>Total (all ages)</i>
Respiratory:							
Males .. ..	—	—	—	1	2	6	9
Females .. ..	—	—	—	—	2	—	2
Non-Respiratory:							
Males .. ..	—	—	—	1	—	—	1
Females .. ..	—	—	—	—	—	—	—

In addition three patients on the register died from other causes.

One Tuberculosis Visitor continued to be responsible for visiting all cases of Tuberculosis and she worked in very close co-operation with the Consultant Chest Physician's staff. Intensive follow-up and tracing contacts is undertaken, including contacts at home, at the place of work, and at school. When necessary, arrangements are made with the Mass Miniature Radiography Unit for contacts to be x-rayed.

Immigrants were offered Heaf tests and, where necessary, B.C.G. vaccination. If not already x-rayed on entry to the country, an x-ray of the chest was offered if Heaf test was refused. All immigrants were given information on the use of the National Health Service and were encouraged to register with a General Practitioner. In addition, all babies born to Asian families were offered B.C.G. at the age of six weeks.

During the year 159 immigrants gave their destination as Dudley but it was not possible to trace 19 of these (in 6 instances it was found that the place of residence was not in the Dudley area). In addition, 5 immigrants were discovered who had not given Dudley as their place of residence on entering the country.

The following table gives further details:

#### JANUARY — DECEMBER, 1970

Advice Notes received .. .. .	159
Number traced .. .. .	140
Heaf test accepted .. .. .	40
B.C.G. given .. .. .	24
Number x-rayed in Dudley .. .. .	32
Number already x-rayed on entry .. .. .	14
Number pregnant .. .. .	5
Student Nurses in Hospital (given x-rays at the Hospital) .. .. .	3
Number who did not attend for x-ray or Heaf tests .. .. .	16
Number refused any check up .. .. .	4
Asian babies given B.C.G. vaccination .. .. .	105
West Indian babies given B.C.G. vaccination .. .. .	22

### VENEREAL DISEASE

The figures showing the incidence of venereal disease for the last four years are set out below :

	1967	1968	1969	1970
Syphilis .. .. .	6	5	16	10
Gonorrhoea .. .. .	34	48	67	68
Non-venereal and undiagnosed conditions..	120	167	199	181

The Treatment Centre is situated at the Guest Hospital under the direction of Dr. C. R. Mayou and the Hospital Management Committee are responsible for the provision of these facilities.

Dr. Mayou's staff and the Local Authority staff work very closely together in the follow-up of patients who do not keep appointments for treatment. The defaulting female patients are followed-up by the Local Authority Health Visitors, and a former member of the Treatment Centre staff, paid by the Local Authority, deals with male defaulters.

Discussions continued between representatives of the West Midland County Boroughs and Birmingham Regional Hospital Board, with a view to appointing Contact Tracers and provision was made in the financial estimates for such an appointment to be made early in 1971.

**NATIONAL HEALTH SERVICE ACT, 1946**  
**CARE OF MOTHERS AND YOUNG CHILDREN**

**Ante Natal Clinics**

Ante Natal Clinics staffed by Domiciliary Midwives continued to be held at 8 centres and in addition Miss J. Nagle attended once a week at Bayer Hall Clinic.

Attendances were as follows :

	1968	1969	1970
Number of expectant mothers ..	1099	814	746
Number of attendances .. ..	5047	3587	3277
Number of Clinic sessions ..	448	448	445

**Mothercraft and Relaxation Classes**

Midwives and Health Visitors jointly conducted weekly classes at 9 centres.

Number of expectant mothers attending :

	1968	1969	1970
(a) Institutional booked ..	694	692	828
(b) Domiciliary booked ..	378	201	109
Total number attendances ..	3919	3763	3924

In addition relaxation classes are held at the Obstetric Unit, Wordsley Hospital.

**Maternity Packs**

All mothers booked for home confinements continued to be supplied with a maternity pack. Those mothers who were delivered in hospital but discharged home early to the care of the domiciliary Midwife were issued with a smaller standard pack. Maternity packs are carried in all ambulances for use in an emergency.

**Infant Welfare Clinics**

There are fifteen Infant Welfare Clinics, of which nine are purpose-built. Welfare foods are sold at all the Clinics.

Attendances during the year were as follows :

	Total attendances
Children born in 1970 .. ..	21,168
Children born in 1969 .. ..	19,464
Children born in 1965-68 .. ..	6,725
	47,357

1,287 infant welfare sessions were held during the year and the total number of children up to the age of five years attending was 8,081.



### Family Planning Clinics

Advice and treatment continued to be provided by the West Midland Branch of the Family Planning Association at Central, Holly Hall and Ladies Walk Clinics. The Local Authority have made Clinic premises available for this service free of charge since 1959.

In 1967, following the National Health Service (Family Planning) Act, the Council agreed that the Family Planning Association should act as their Agent in the provision of Family Planning facilities for all persons over the age of sixteen. Because of financial restrictions, however, it was not possible to make an adequate grant to the Family Planning Association to enable them to provide a comprehensive service.

However, as a result of a decision to authorise expenditure under the Urban Programme, it became possible to arrange that as from January, 1971 the Family Planning Association would provide free consultation and free appliances to patients who required family planning on medical grounds, and free consultation for other patients. It was estimated that the cost of this service would be in the region of £3,800 for a full year.

### Nurseries and Childminders

The following table shows the rise in numbers of premises and persons registered at the end of the year :

	1967	1968	1969	1970
Day Nurseries (Voluntary) ..	3	4	4	4
Child Minders .. .. .	—	5	25	42
Playgroups .. .. .	8	17	25	27

Two new playgroups and 17 childminders were registered including one mainly for handicapped children. These gave an increase of 108 places. The number of places, however, does not show the actual number of children who attend as in many cases different children attend the playgroups each day.

In 1971 responsibility for the Nurseries and Childminders will no longer remain with the Health Department but will be transferred to the department of the Director of Social Services. It would seem more appropriate for this work to have become the responsibility of the Education Department, who already provide education in nursery classes and schools.

The greatest demand comes from the newly-built residential areas and the number of playgroups is largely governed by the number of suitable premises available.

Because of an increase in this work, it is intended to appoint a full-time Supervisor of Nurseries and Childminders in the near future.

## Care of Unmarried Mothers

As from 1st April, the Worcester Diocesan Association for Family and Social Service and the Lichfield Diocesan Association for Moral Welfare merged to form the Churches Family and Social Service for the County Borough of Dudley.

Unmarried mothers needing to be accommodated for their confinement are found places in hostels outside the County Borough and, where necessary and appropriate, the Local Authority assists financially with their maintenance.

During the year 54 new cases were dealt with.

## Dental Care

Expectant mothers, nursing mothers and babies under one year old and children under 5 years of age are eligible for dental examination and treatment at Clinics.

A Dental Auxiliary gave talks on oral hygiene at Junior and Infants' Schools.

### A. Attendance and Treatment

	Children under 5 years	Expectant and Nursing Mothers
Number of visits for treatment during the year:		
First Visits	264	111
Subsequent visits	190	228
Total visits	<u>454</u>	<u>339</u>
Number of additional courses of Treatment other than the first course commenced during the year	8	10
Treatment provided during the year:		
Number of fillings	413	237
Teeth filled	335	210
Teeth extracted	433	213
General anaesthetics given	167	14
Emergency visits by patients	56	20
Patients x-rayed	4	8
Patients treated by scaling and/or removal of stains from the teeth (Prophylaxis)	9	51
Teeth otherwise conserved	21	—
Teeth root filled	—	—
Inlays	—	—
Crowns	—	1
Number of Courses of treatment completed during the year	229	73

B. Prosthetics			
Patients supplied with Full Upper or Full Lower (first time)			11
Patients supplied with other dentures			13
Number of dentures supplied			37
C. Anaesthetics			
General anaesthetics administered by Dental Officers			—
D. Inspections			
	Children under 5 years	Expectant and Nursing Mothers	
Number of patients given first inspections during year	406	124	
Number of patients who required treatment	297	122	
Number of patients who were offered treatment	289	122	
E. Sessions			
Number of Dental Sessions (i.e. equivalent complete half days) devoted to Maternity and Child Welfare patients :			
For treatment	.. .. .	.. .. .	115
For health education	.. .. .	.. .. .	1

### Ophthalmic Clinic

Errors of refraction including squint	.. .. .	.. .. .	131
External and other	.. .. .	.. .. .	26
			<hr/>
			157
			<hr/>
Spectacles prescribed	.. .. .	.. .. .	28

### Orthopaedic

#### Massage :

Total number treated	.. .. .	.. .. .	119
Total number of treatments	.. .. .	.. .. .	522

#### Orthopaedic :

Seen by Surgeon	.. .. .	.. .. .	255
New Cases	.. .. .	.. .. .	62
Total attendances	.. .. .	.. .. .	278

### Ear, Nose and Throat

Number seen by E.N.T. Consultant	.. .. .	.. .. .	4
Number referred for operation	.. .. .	.. .. .	—

## NURSING SERVICES

In January, the Department of Health and Social Security invited the attention of the Authority to a report of a Working Party under the Chairmanship of Mr. E. L. Mayston, set up in consultation with the Local Authority Associations, to review Senior Nursing Structure in the Community Nursing Service. The Working Party was appointed in the Autumn of 1968 and its terms of reference were to consider the extent to which the principles of the Salmon Report on Senior Nursing Staff Structure in the Hospital Service were applicable to the Local Authority nursing services, and what changes in the structure of senior posts and changes in the definitions of posts might be required.

For the Hospital nursing service, the Salmon Committee had identified three principal levels of management, namely Top (policy), Middle (programming) and First-tier (executive). The Mayston Working Party considered that such a structure would also be appropriate for the community nursing service, although it was recognised that the Public Health Nurse was often required to work in isolation with little support from management, and that to discharge her duties satisfactorily she required a special sense of initiative and responsibility.

In August, Circular 30/70 was received from the Department of Health and Social Security, in which the Secretary of State commended the Report and recommended to Councils that it should receive early consideration. Local Authorities were asked to re-examine their existing nursing staff structure as a matter of urgency in the light of the Working Party's recommendations.

By the middle of the year, the Hospital Management Committee had approved a new structure for their nursing services and had appointed a Chief Nursing Officer. A manpower structure for the Dudley Local Authority nursing service was accepted by the Health Committee in October, but unfortunately a decision on the whole question of nursing management was deferred by the Establishment Committee in November, 1970, to obtain further information on managerial responsibility at the three levels recommended.

The Principal Nursing Officer, Superintendent Health Visitor, and Superintendent District Nurse, visited every General Practice in the Borough to discuss the implications of the attachment of District Nurses and Health Visitors. The majority of Doctors welcomed the opportunity to meet the Nursing Officers and by the end of the year arrangements had been made for the attachment of all District Nurses and Health Visitors. Some Midwives were already attending ante-natal sessions at Doctors' surgeries, and it is proposed to extend this facility during the coming year.

During the year several long-serving members of staff retired, including 4 Health Visitors, 2 School Clinic Nurses, 1 Midwife, and 1 District Nurse. The Nurse with the longest service was a Midwife who had worked for thirty-three years in one area, and the Nurse giving the shortest period of service was a District Nurse with twenty-one years' service. There were no changes during the year in the establishment of the four Senior Nursing Staff.

## MIDWIFERY

During the year 71 Midwives notified their intention to practise within the Borough. Of these, 27 were employed by the Local Authority, and 44 by the Dudley and Stourbridge Hospital Management Committee.

Four part-time Midwives employed by the Local Authority assisted with nursing the ever-growing number of women discharged early from hospitals and with ante-natal clinics.

Recruitment to the domiciliary service remained fairly satisfactory for most of the year, although the full establishment was never realised.

In December, staffing difficulties became apparent at Wordsley Obstetric Unit and, as at that time the domiciliary service was fairly adequately staffed, arrangements were made for one Midwife, who would normally have been on call for deliveries at home, to undertake night duties at the Hospital. As these Midwives had to be completely off duty during the day, the remaining staff were working under some pressure. The Midwives who worked in the Hospital, although they would not have wished this arrangement to continue indefinitely, enjoyed caring for more women in labour than they would have done had they practised on the district alone. The closer working relationships benefitted all the Midwives and should aid integration of the Midwifery Service in due course.

The pocket radio telephones remained well used and were particularly useful during the periods of low staffing and while the Midwives were assisting in the Hospital.

Large disposable packs containing all the sterilised equipment required for a delivery, other than instruments, continued to be used, giving a high standard of sterility and saving Midwives' time in preparing equipment at home. Smaller packs were provided for the use of mothers discharged from institutions within the first few days of delivery.

### **Deliveries Conducted by Domiciliary Midwives**

The total number was 522 compared with 694 in 1969. This was a further fall on previous years, and represented 14.8% of all confinements.

Out of the total number of home confinements, a Doctor was present at 33 deliveries and 152 women were visited by their General Practitioners during labour. Midwives were, therefore, totally responsible for 337 mothers in labour.

Some difficulties have been encountered by Midwives obtaining the services of a Doctor when required, because of the long distance some of the Doctors employed by a locum service have to travel.

Seventy-two mothers originally booked for home confinements were transferred to Hospital for the following reasons :

Premature labour	..	..	..	..	..	12
Delay in first stage	..	..	..	..	..	10
Ante partum haemorrhage	..	..	..	..	..	10
Miscarriages	..	..	..	..	..	8
Retained placenta	..	..	..	..	..	6
Pre eclamptic toxæmia	..	..	..	..	..	6
Abnormal presentation	..	..	..	..	..	5
Delay in second stage	..	..	..	..	..	5
Other conditions	..	..	..	..	..	5
Foetal distress	..	..	..	..	..	3
Post partum haemorrhage	..	..	..	..	..	1
Post partum eclampsia	..	..	..	..	..	1

Twelve babies were admitted to hospital.

Under the rules of the Central Midwives Board, medical aid was summoned 212 times for the mother and 64 times for the baby. These figures are higher than usual, probably due to the recruitment of a number of newly trained staff who felt the need of the support of the General Practitioner. Although these forms are unnecessary for the purpose for which they were originally designed, they give useful information as to the abnormalities and difficulties arising in the Midwives' practice.

The total number of births occurring in the Borough increased from 3,489 in 1969 to 3,506 in 1970, and as a higher proportion of these took place in hospitals, more patients were discharged home early for nursing care. In 1968 and 1969 there was an increasing trend towards discharge from hospital between the first and the fifth day, but this was reversed in the year under review and an increasing number of mothers stayed in hospital on the third, fifth and sixth days. There seems to be no obvious reason why this should have happened and it would seem better to discharge mothers either about forty-eight hours after delivery or about the seventh day.

The following table shows the number of women confined in Hospitals and maternity homes, and the days of the puerperium on which they were discharged :

	1968	% <i>inc.</i> or <i>dec.</i> over 1967	1969	% <i>inc.</i> or <i>dec.</i> over 1968	1970	% <i>inc.</i> or <i>dec.</i> over 1969
Up to 24 hrs. after delivery ..	39	14.7	56	49.9	12	(78.5)
2 days after delivery ..	304	3.7	371	22.0	296	(20.4)
4 days after delivery ..	289	3.5	435	50.5	582	33.7
4 days after delivery ..	140	11.0	258	84.3	256	(0.7)
5 days after delivery ..	152	(36.4)	202	32.2	301	49.0
6 days after delivery ..	484	(7.9)	473	(2.2)	573	21.1
7 days after delivery ..	626	8.1	511	(18.3)	533	4.3
8 days after delivery ..	212	(0.9)	120	(43.3)	111	(7.5)
9 days after delivery ..	89	14.1	69	(22.4)	61	(11.5)
10 days after delivery ..	60	25.0	40	(33.3)	47	17.5
Total ..	2,395		2,534		2,772	

(% decreases shown in brackets)

Because the prospect of total midwifery care, including the delivery, is an incentive for women entering the domiciliary midwifery field, some compensation in job satisfaction must be provided. The majority of women expecting a normal confinement only desire to have their baby in an institution until domestic help can be mobilised at home, so that they can return as soon as possible after. It would, therefore appear to be in the best interests of the mother, baby, family and Midwife, if the Domiciliary Midwife could care for the expectant mother during the ante-natal period, deliver her in a maternity institution and nurse her at home on discharge.

Owing to the lack of an effective Maternity Liaison Committee, no system of planned 48-hour discharge is in being. However, where it is discovered that a 48-hour booking has been made, a Domiciliary Midwife is allocated to make ante-natal visits. The same Midwife will endeavour to visit the mother on discharge.

### **Obstetric Flying Squad**

This service based on the Women's Hospital, Wolverhampton, and Birmingham Maternity Hospital, was called on three occasions, each time for a retained placenta.

### **Drugs and Analgesia**

All Midwives are equipped with Entonox apparatus for the administration of gas and oxygen, although some Midwives still use Trilene on occasions. 227 women received gas and oxygen: 34 had Trilene: 271 injections of Pethilorfan were given.

Only half the women delivered at home received inhalation analgesia and a small number only had Pethilorfan or Welldorm tablets. All Midwives carry Vandid and Oxygen sparklets for infant resuscitation.

During the year a new improved type portable incubator was purchased. This has a double glazed dome and can be plugged into the mains while at a house as well as in the ambulance. This was found to be necessary as in the high-rise flats the incubator could be away from its source of heat for 10 to 15 minutes, in which time the internal air fell below the temperature required.

### **Tests for Phenylketonuria**

In 1966 a scheme for testing of urine of all babies at the age of 10-14 days and again at six weeks, by Health Visitors using the Phenistix method, was introduced. Since then a more sophisticated test has become available and the Guthrie test was commenced in February. This test is performed in the Laboratory on blood collected from a prick on the heel of each baby on the sixth day of life. Results are more reliable and an earlier detection of this rare metabolic disorder can be made, so that urgent dietary treatment can be commenced. This test is now carried out by Midwives, and since the introduction of the new arrangements 1,475 such tests have been carried out. The incidence of this condition is 1 in 20,000 births. During the year no tests were positive.

### **British Birth Survey**

In 1958 the National Birthday Trust Fund carried out a peri-natal survey of all babies born during one week and all peri-natal deaths occurring over a period of three months. The results of the survey were of wide interest.

A second survey was carried out under the auspices of the National Birthday Trust Fund and the Royal College of Obstetricians and Gynaecologists in the week commencing at midnight on Sunday, 5th April, and for those deliveries carried out at home the Domiciliary Midwives completed a questionnaire. In all sixty-five forms asking for detailed information were completed by the Midwives in the Borough.

### **Training**

Four Teaching Midwives remained on the staff and 6 Pupil Midwives undertook their District training in Dudley.

Four Midwives attended statutory Refresher Courses and 2 attended courses in Teaching Preparation for Parentcraft.

Midwives and Health Visitors attended a lecture and film giving instruction on taking blood for Guthrie testing.

Three Midwives attended an induction course for nursing staff with less than 1 year's experience in the Local Authority service.



## HEALTH VISITING

The staff at the end of the year consisted of 1 Superintendent Health Visitor, 2 Group Advisers, 1 Fieldwork Instructor and the full-time equivalent of 23.6 Health Visitors. This was 5 Health Visitors below establishment. In addition 12 State Registered Nurses assisted with School and Clinic work. One State Registered Nurse was employed in the vaccination and immunisation team and another as a Tuberculosis Health Visitor.

Dudley is affected by the national shortage of Health Visitors and only 2 part-time members of staff were recruited during the year. It is also difficult to obtain suitable Student Health Visitors and only 2 out of a large number of applicants proved to have acceptable academic standards and these were sent for training. Two others successfully obtained the Health Visitors' Certificate and returned to work in the Department.

State Registered Nurses continued to be employed in a supporting role to the Health Visitors. In the main their work took them into Schools but in addition they are employed at Child Welfare Centres where during 1970, in addition to the routine work, some of the Nurses undertook immunisation procedures under the direction of a Doctor. It is intended to extend this scheme to all Clinics to enable the medical staff to devote more time to the examination, by appointment, of children on the observation register.

By the end of the year all Health Visitors had been attached to the practices of General Practitioners. This arrangement worked very smoothly and in the period of change there were no major difficulties. The Seebom Report and the period of uncertainty which followed, together with the decision to form new Social Services Departments, caused some apprehension as to the future of Health Visiting. However, the close working relationship now established between General Practitioners and Health Visitors should go some way to allaying this fear. General Practitioners are turning to Health Visitors for assistance with social problems and relying on them when necessary to refer patients to the appropriate service or agency.

Over the years Health Visitors have developed a good relationship with the public and they find ready acceptance into most homes where there are young children. They are therefore in a position to judge any deterioration in the care of the family or home, which is often indicative of medical, matrimonial, emotional or other difficulties and, together with the General Practitioner, they should be able to mobilise help at an early stage.

Health Visitors have continued to carry out hearing screening tests on babies at between 7 and 8 months of age. 3,937 mothers were invited to bring their babies but after repeat invitations had been sent only 2,634 attended. Out of these 114 babies were re-tested and 7 were referred to Medical Officers for further investigation.

In February the Guthrie Test for Phenylketonuria which is performed on the sixth day of life was substituted for the less reliable Phenistix method previously carried out by Health Visitors. The majority of these tests are performed by Midwives, but Health Visitors take any tests requested after the tenth day of life. The 2 children discovered to be suffering from this rare malady in 1968 are reported to be developing normally on special dietary treatment.

One Senior Health Visitor continued to visit the Paediatric Clinic at the Guest Hospital and was able to transmit much useful background information to the Paediatrician and to gain much that was valuable to General Practitioners and Health Visitors. In addition she acted in a liaison capacity on occasions with Health Visitors in neighbouring Authorities.

The names of children whose development is thought to be at special risk are kept on an "observation" register. At the end of the year there were 1,945 such children. Of these 791 were examined by appointment at Clinics but 937 who failed to attend, despite repeat invitations to parents, were specially visited at home and their progress assessed by Health Visitors.

Visits made by Health Visitors during the year are given in the following table:

Children born in 1970 .. .. .	10,281
Children born in 1969 .. .. .	8,558
Children born in 1965/68 .. .. .	14,239
Persons 65 years and over .. .. .	1,608
Mentally disordered persons .. .. .	218
Hospital discharges .. .. .	39
Tuberculosis and other infectious disease households.. .. .	125
Other cases .. .. .	938

As in all the services for the elderly provided by the Local Authority, there was a rise in the number of visits paid to these persons. These visits are very time-consuming and the problems presented often involve contact with a variety of agencies. In an effort to obtain a better analysis of the Health Visitors' work the monthly statistical returns were changed. It was discovered that during the year 1,461 referrals to other agencies were recorded and these are detailed below:

General Practitioners .. .. .	323
Family Planning Association .. .. .	232
Children's Officer .. .. .	216
Welfare Officer .. .. .	163
Chiropodists .. .. .	158
Hospital Special Department .. .. .	75
Home Help Organiser .. .. .	52
Medical Officer of Health .. .. .	50
Public Health Inspectors .. .. .	39
Women's Royal Voluntary Service .. .. .	35
Moral Welfare .. .. .	29
Hospitals .. .. .	29
Executive Council.. .. .	13

The Tuberculosis Visitor made 2,684 visits to 694 households. A large amount of her time was spent contact tracing but in addition she also visited newly arrived immigrants to encourage them to register with a General Practitioner and to persuade them to accept chest x-rays. In addition she arranged B.C.G. vaccination within the first few weeks of life of babies of tuberculous households and babies of immigrant mothers.

### **Training**

Five Health Visitors attended Refresher Courses and 8 were trained in the technique of Hearing Screening testing.

Four School Clinic Nurses attended a refresher course at the West Midlands Post Registration Centre and two new members of staff attended an induction course at the same centre.

The Superintendent Health Visitor attended a course on Health Education at Cambridge.

Thirty-five Student Nurses spent a day of observation with a Health Visitor, and 3 Student Health Visitors from the Oxford Training Centre spent a week observing work typical of an urban area. Students from other disciplines have also had contact with Health Visitors regarding a variety of projects as part of their training.

## DISTRICT NURSING

The establishment of District Nurses was 1 Superintendent and a full-time equivalent of 30 Nurses and 3 Nursing Auxiliaries.

Recruitment was good and by the end of the year arrangements had been completed for the attachment of all District Nursing staff to General Practitioners. In addition to working more closely with the General Practitioners, the Nurses continued to meet daily at the three District Clinics. It was felt that this meeting was important to prevent professional isolation and to enable the Senior Nursing Officer to meet her staff frequently for discussions and instruction.

The number of patients and the visits made by the District Nurses are shown in the following table:

	1969		1970	
	Cases	Visits	Cases	Visits
Medical Cases .. ..	1,787	64,101	1,917	65,876
Surgical cases .. ..	439	11,213	476	9,266
Tuberculosis cases ..	11	690	18	814
Maternal complications ..	52	541	61	480
Other cases .. ..	2	85	4	81
Total ..	2,291	76,630	2,476	76,517

The number of medical cases has risen slightly but, although the number of surgical cases has risen, the number of visits has decreased. This was probably partly due to the use of more modern dressing techniques.

There is no difficulty in recruiting trained Nurses for domiciliary work but there does appear to be a persistent shortage of nurses in Hospitals. One way to improve the service, therefore, would be for selected patients to be discharged home for nursing care. Very little of this is done at the present time in this Borough.

Almost all the District Nurses possess a National Certificate of District Nursing and new recruits are sent for training soon after appointment. The Training Centre is organised jointly by the 5 County Boroughs in the West Midlands and during the year 6 Nurses successfully gained the National Certificate of District Nursing. In addition 2 Nurses already holding the Certificate

attended a course of training for Practical Work Instructors, 2 Nursing Auxiliaries attended a course specially arranged for them, 1 Nurse, recently appointed, attended an induction course, and 4 other Nurses attended refresher courses organised by the Queen's Institute of District Nursing. In addition other members of staff attended study days and lectures in nearby Authorities, as well as those organised by the Regional Hospital Board, and by the Health Department.

Thirty-five Student Nurses from the Guest Hospital spent a day with a District Nurse during the third year of training to gain an introduction to the community nursing service. Practical Work Instructors also arranged visits of observation for Pupil Midwives and Student Social Workers.

Nursing Auxiliaries attended 363 patients, entailing 8,044 visits, which is an increase of 113 patients and 1,100 visits over the 1969 figures. In addition to the visits paid by Nursing Auxiliaries, visits were made at least monthly by a trained Nurse to see if further help or treatment was required.

The demand for an incontinent pad service mainly by the elderly increased during the period up to 1969 but during the year under review fewer incontinent patients were nursed. The number of articles issued is shown below:

		1968	1969	1970
Incontinent pads..	..	36,184	43,548	32,074
Waterproof pants	..	48	125	221
Disposable liners	..	12,155	17,503	22,752
Nappie rolls	.. ..	120	570	1,043

Five Nurses remain on the panel of the Marie Curie Nursing Service, which arranges nursing care for terminal cases of cancer. Nineteen patients, involving 99 visits, were helped during the year.

## VACCINATION AND IMMUNISATION

The Schedule of Immunisation recommended by the Joint Committee on Vaccination and Immunisation and which was adopted late in 1968 continued to be used during 1970. This schedule is as follows:—

Age 3 months	—	First triple, first polio
Age 4½ months	—	Second triple, second polio
Age 9 to 10 months	—	Third triple, third polio
Age 12 months	—	Measles
Age 15 months	—	Smallpox
Age 5 years	—	Diph/Tet. booster, polio booster and smallpox revaccination
Age 12 years	—	B.C.G. vaccination
Age 15 years or on leaving School	—	Tetanus booster, polio booster and Smallpox revaccination

The scheme for vaccination and immunisation by appointment at Clinics, which was introduced during 1967, continued in operation throughout the year, and the results achieved have been satisfactory. The immunisation state of all children born in 1968 who were resident in the County Borough at the end of 1970 has been analysed and shows that 80% (81%) had been protected against Diphtheria, 77% (79%) against Whooping Cough, and 79% (79%) against Poliomyelitis. In addition, 80% had been protected against Tetanus, 58% against Smallpox and 42% against Measles. The national figures, where available, are shown in brackets.

### German Measles

During 1970 the Joint Committee on Vaccination and Immunisation recommended that immunisation against Rubella should be offered to girls between their 11th and 14th birthday, but that initially protection should be given to the older girls, i.e. those in their 14th year. This recommendation was adopted by the Department of Health and Social Security and approval given for vaccination to commence.

At this time, however, arrangements had been completed for clinical trials of Wistar vaccine to be carried out in the County Borough. With the approval of the Department of Health and Social Security, it was decided to go ahead with these trials, protection being offered to all girls between their 12th and 14th birthdays.

Vaccinations were carried out in Schools during October, when a total of 1,514 girls were vaccinated as follows:

(a) Cendehill strain vaccine provided by the Department of Health and given with syringe and needle	.. .. .	505
(b) Wistar vaccine given by syringe and needle	..	514
(c) Wistar vaccine given with the needleless injector (Porton)	.. .. .	495

Serological finger prick blood testing was carried out immediately before vaccination and repeated some six weeks later. Each girl was asked to complete a reaction card and these completed cards, together with blood samples, were sent on to the manufacturers of the vaccine.

Details of all vaccinations and immunisations carried out during the year are given in the following tables:

### VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1970

Table 1 — Completed Primary Courses

Type of vaccine or Dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963- 1966		
1. Quadruple DTP .. .. .	—	—	—	—	—	—	—
2. Triple DTP .. .. .	420	2,202	193	13	22	5	2,855
3. Diphtheria/Pertussis .. .. .	—	—	—	—	—	—	—
4. Diphtheria/Tetanus .. .. .	14	120	6	1	260	264	665
5. Diphtheria .. .. .	—	—	—	—	9	4	13
6. Pertussis .. .. .	—	—	—	—	—	—	—
7. Tetanus .. .. .	—	1	1	—	298	372	672
8. Salk .. .. .	—	—	—	—	—	—	—
9. Sabin .. .. .	431	2,311	228	18	289	726	4,003
10. Measles .. .. .	—	1,422	999	198	693	12	3,324
11. Rubella .. .. .	—	—	—	—	—	1514	1,514
<b>SUMMARY:</b>							
Immunised against:							
Diphtheria .. .. .	434	2,322	199	14	291	273	3,533
Whooping Cough .. .. .	420	2,202	193	13	22	5	2,855
Tetanus .. .. .	434	2,323	200	14	580	641	4,192
Poliomyelitis .. .. .	431	2,311	228	18	289	726	4,003

Table 2 — Reinforcing Doses

Type of Vaccine or Dose	Year of Birth					Others under age 16	Total
	1970	1969	1968	1967	1963- 1966		
1. Quadruple DTP .. .. .	—	—	—	—	—	—	—
2. Triple DTP .. .. .	—	43	110	46	129	2	330
3. Diphtheria/Pertussis .. .. .	—	—	—	—	—	—	—
4. Diphtheria/Tetanus .. .. .	—	2	18	22	1,718	2,456	4,216
5. Diphtheria .. .. .	—	—	—	1	13	18	32
6. Pertussis .. .. .	—	—	—	—	—	—	—
7. Tetanus .. .. .	—	—	2	5	14	1,142	1,163
8. Salk .. .. .	—	—	—	—	—	—	—
9. Sabin .. .. .	—	43	115	64	1,853	3,703	5,778
<b>SUMMARY:</b>							
Immunised Against:							
Diphtheria .. .. .	—	45	128	69	1,860	2,476	4,578
Whooping Cough .. .. .	—	43	110	46	129	2	330
Tetanus .. .. .	—	45	130	73	1,861	3,600	5,709
Poliomyelitis .. .. .	—	43	115	64	1,853	3,703	5,778

**SMALLPOX VACCINATION** — Persons under age 16

	<i>Age at Date of Vaccination</i>							<i>Total</i>
	<i>0-3 months</i>	<i>3-6 months</i>	<i>6-9 months</i>	<i>9-12 months</i>	<i>1 year</i>	<i>2-4 years</i>	<i>5-15 years</i>	
Number Vaccinated	15	9	6	26	1,786	195	128	2,165
Number Re-vaccinated	—	—	—	—	1	15	3,245	3,261



## AMBULANCE SERVICE

During 1970 the Ambulance Service showed an increase in the number of patients moved to and from hospitals and clinics. This increase would have been far greater but for the industrial dispute which lasted six weeks when only emergency cases were being transported.

A significant fact in statistics for 1970 shows that, although the number of patients increased, the number of miles reduced. This was due to re-organisation in Control which took place early in the year.

One Station Officer was seconded to Hampshire Ambulance Training School for two weeks as an Instructor and this proved to be very beneficial to the training of the Dudley Ambulance staff.

In May, 1970 a team from Dudley was entered in the Regional Ambulance Competition held at Telford in Shropshire. The attendant was judged overall winner and then went forward to the National Competition at Stoke Mandeville but, unfortunately, failed to obtain a winning place.

**Table 1—Establishment**

<i>Establishment</i>								<i>Authorised</i>	<i>Actual</i>
Assistant Ambulance Officer	..	..	..	..	..	..	..	1	1
Ambulance Control Officer	..	..	..	..	..	..	..	1	1
Station Officers	..	..	..	..	..	..	..	4	4
Shift Leaders	..	..	..	..	..	..	..	8	8
Leading Drivers	..	..	..	..	..	..	..	8	8
Ambulance Drivers	..	..	..	..	..	..	..	38	33
Sitting Car Drivers	..	..	..	..	..	..	..	3	3
Total	..	..	..	..	..	..	..	63	58

**Table 2—Vehicles**

<i>Vehicles</i>								
Ambulances	..	..	..	..	..	..	..	8
Dual Purpose	..	..	..	..	..	..	..	12
Staff Car	..	..	..	..	..	..	..	1
Total	..	..	..	..	..	..	..	21

**Table 3**—Calls dealt with from January to December, 1970

	<i>Patients</i>	<i>Miles</i>
Ambulance cases .. .. .	13,164	85,122
Sitting car cases .. .. .	57,426	315,898

The above includes 886 ambulance cases involving 6,679 miles and 2,472 sitting car cases involving 21,920 miles, conveyed on behalf of neighbouring Authorities.

During the period under review seven resignations were received, one Station Officer died, one transferred to Flintshire Ambulance Service, and six men were recruited.

A total of 21 lectures, talks and demonstrations were given to various organisations in the Borough.

## **PREVENTION OF ILLNESS, CARE AND AFTER CARE**

### **Health Education**

A Health Education Officer was included in the original establishment following the enlargement of the County Borough on 1st April, 1966, but this appointment was not agreed to by the Establishment Committee at that time, and has been rejected on two occasions since then. At the present time, therefore, only a limited amount of health education work can be undertaken and the responsibility for the organisation of this service remains with the Superintendent Health Visitor and is in addition to her normal duties.

In May the Health Education Council visited the town with their new Mobile Health Education and Exhibition Caravan. A 2-day in-service training on Cancer Prevention was given to a number of staff, who manned the caravan and conducted a Health Education Campaign for the remaining three days of the week. The caravan was parked on three strategic sites in the town and the public and factory workers were encouraged to visit it. Pupils from 10 Secondary Schools were brought to the exhibition and special emphasis was laid on the dangers of smoking.

Health Visitors and Midwives have jointly conducted weekly classes at 9 centres on Preparation for Labour and Parentcraft.

Health Education in Schools has increased during the year and regular sessions are now conducted in 11 Senior Schools and talks and discussions on special subjects have been held at other Schools on request.

Three Youth Clubs have been visited in the evenings where talks and discussions on subjects requested by club members have been dealt with. These have included such subjects as Parentcraft, Family Planning, Venereal Disease, Drug Dependence, Smoking and its Dangers.

During the year 318 talks were given in Clinics, 289 in Schools, and 75 to other groups.

### **Chiropody Service**

The day to day running of this service is under the supervision of the Chief Chiropodist. As from 1st July, the establishment was increased by 2 to a total of 6 full-time Chiropodists. All attempts to recruit additional full-time staff were unsuccessful and at the end of the year the complement consisted of 2 full-time Chiropodists and 8 sessional Chiropodists, and was under strength to the extent of 8 sessions a week.

The service continued to operate from 10 of the 15 Clinics in the County Borough. The demand continued to grow but the Waiting List had been reduced by the end of the year. The service is still limited to the elderly, physically handicapped and expectant mothers. Treatment is given at the Clinics and patients normally

travel by public transport, although for certain cases ambulance transport is provided. Housebound patients are visited at home and regular visits are made to Old People's Homes.

Voluntary organisations providing chiropody services for the elderly and employing part-time Chiropodists, are given financial assistance through the Welfare Committee.

Details of the work carried out are given below :

	1969	1970
Number of persons treated, not including those in Old People's Homes .. ..	2162	2472
Number of treatments given :		
In Clinics .. .. .	9176	9818
In patient's home .. .. .	1270	1307
In Old People's Home .. .. .	410	637

### **Population Screening for Cancer of the Cervix**

This service has now been in operation since January, 1967. The provision generally is for women between the ages of 25 and 65 and sessions are held at six Clinics throughout the Borough.

During the year an extension of this service was commenced whereby the staff of the Health Department undertook the administrative work involved in arranging for appointments to be made to enable General Medical Practitioners to hold Clinics at their surgeries for their own patients.

By the end of the year one General Practitioner had taken part in the scheme and 280 of his patients had been seen. This service proved so successful that a number of General Practitioners asked to be included in the arrangements.

Towards the end of the year the service was further extended by the inclusion of breast palpation and blood and urine testing.

Figures relating to this service are given below :

	1968	1969	1970
Number of Clinics held .. .. .	81	79	56
Number of women who attended	1422	1281	908
Results of tests :			
Normal cells .. .. .	1264	1165	679
Suspicious .. .. .	12	9	4
Positive .. .. .	6	4	—
Specimens unsatisfactory	9	1	4
Other .. .. .	131	102	221

### Recuperative Holidays

The demand for this service continued to decrease and only 3 patients were sent on a recuperative holiday as a result of recommendations from General Practitioners.

### Home Help Service

At the end of the year 193 part-time Home Helps and neighbourly helps were employed, giving a whole-time equivalent of 97 Home Helps. As the following table illustrates, the number of cases assisted has increased over the last four years:

	1967	1968	1969	1970
Cases over 65 years of age	818	878	1084	1162
Mentally disordered ..	6	4	3	7
Chronic sick .. ..	49	92	31	21
Maternity .. .. .	45	45	22	47
Others .. .. .	46	63	28	7
	<u>964</u>	<u>1082</u>	<u>1168</u>	<u>1244</u>

### HOUSING ON MEDICAL GROUNDS

During the year, 1,065 cases were investigated and in 115 of these additional housing points were recommended on medical grounds. Exchange of Council accommodation was recommended in 458 cases and in 27 cases immediate priority for re-housing was recommended.

The weekly meeting of Officers from the Housing, Health and Welfare Departments to discuss difficult housing cases continued.

## MEDICAL EXAMINATIONS

The screening procedure using a medical questionnaire for candidates being admitted to either the superannuation scheme or the sick pay schemes continued to be used. This avoided the need to examine all new employees and medical examinations were arranged only for those with a history of ill health.

During the year 912 Statements of Medical History were completed by candidates and of these 14 were referred for full medical examination. Out of this number 3 candidates were found to be medically unsatisfactory.

The Motor Vehicles (Driving Licences) Regulations which came into force on 1st June, prescribed conditions which persons with controlled epilepsy have to satisfy before being granted a driving licence. A recommended procedure was laid down by the Ministry of Transport under which Local Taxation Departments refer applications to the Medical Officer of Health. The applicant is then required to answer questions on the form of application for a driving licence and is asked to indicate whether or not he consents to medical information being obtained from his Family Doctor. If he does not consent a licence is not granted.

If consent is given, the applicant completes a further form which is sent by the Medical Officer of Health to the Family Doctor. When the completed form is returned from the Doctor concerned, the Medical Officer of Health, after seeking any local Consultant advice necessary, recommends to the Licensing Authority whether or not a driving licence should be granted.

Between June and the end of the year 17 applications were received and in 5 of these the Local Taxation Authority were recommended not to grant a driving licence. In addition 6 other cases in which a medical condition was involved were referred to the Medical Officer of Health, and in 4 of these the recommendation was that a licence be not granted.

## REPORT OF THE CHIEF VETERINARY OFFICER

The number of pigs inspected fell from the 1969 total of 210,138 to 202,256, a drop of 7,882. The reduction occurred in the first part of the year as a result of an excessive slaughter of breeding stock for sale to the Continent where there was a shortage of pig meat. This was restricted by Government control and by the final quarter of the year pigs were being killed at the rate of 225,000 per annum.

Products were exported to Bahrein, Belgium, Cyprus, Gibraltar, Hong Kong, Malta, Sierra Leone, and Singapore. These consisted of:

17,497 Smoked sides of bacon	51,058 sides of pork
10,162 Round-cut gammons	21,434 Defatted gammon
4,087 Smoked bacon middles	130 York hams
2,875 Smoked gammons	2,697 Cases sausage and pies
4,958 Smoked collars	32,588 Dry-salted gammons
780 Pork bellies	51,428 Pork shoulders
200 Parma hams	

Veterinary certificates were sent to farmers on request for the examination of 3,003 pig lungs.

Two hundred and sixty-one pigs died in transit and 107 in the factory lairage.

The meat condemned amounted to 219 tons, 2 cwts., 3 qtrs., 11 lbs., and reasons for the rejection are listed as follows:





## PIGS—continued

Disease	Car-cases	Heads	Lungs	Hearts	Livers	Stom-achs	Spleens	Kidneys	In-testines	Parts	Total	% of kill
Mastitis ..	1	1	1	1	1	1	1	2	1		1	0-00049
Metaplasia ..									66		66	0-033
Metritis ..	4	4	4	4	4	4	4	8	4		4	0-0019
Nephritis ..	18	18	18	18	18	18	18	36	18		18	0-0089
Odour ..	2	2	2	2	2	2	2	4	2		2	0-00099
Oedema ..	1	1	1	1	1	1	1	2	2		2	0-00099
Pericarditis ..	27	27	27	5804	27	27	27	54	27		5804	2-86
Peritonitis ..	70	70	70	70	5153	4610	4610	140	4610		5153	2-53
Pleurisy ..	471	471	14747	471	471	471	471	942	471		14747	7-34
Pyæmia ..	396	396	396	396	396	396	396	782	396		396	0-196
Septicæmia ..	13	13	13	13	13	13	13	26	13		13	0-0064
Swine Paratyphoid ..	1	1	1	1	1	1	1	2	1		1	0-00049
Telangiectasis ..	4	3467	25	25	25	4	4	8	2168		3467	1-71
Tuberculosis ..	1	1	1	1	1	1	1	2	1		1	0-00049
Tumour ..	4	4	4	4	4	4	4	8	4		4	0-0019
Uraemia ..												
Total ..	1386	6083	19048	7459	16111	5856	5856	14011	8885	135 fores 926 hinds		
Percentage of Total ..	0-68	3-08	9-42	3-68	7-95	2-85	2-85	3-45	4-39	0-33 fores 0-23 hinds		

## WELFARE SERVICES

The Local Authority Social Services Act received the Royal Assent in May, 1970 and it was therefore necessary to devote a considerable amount of time to planning the changes which were to take place in April 1971 in the Social and Welfare Services of the Authority. The Department had also to continue its normal work during the year, and in January the latest Old People's Home—Wallbrook House, Coseley—was opened. Forty-eight residents were admitted, most from the urgent waiting list, but also some who otherwise would have been admitted to geriatric units and hospitals for the mentally sick.

Because of the difficulties in recruiting experienced staff, an in-service training scheme was instituted prior to the opening of the Home so that the staff were familiar with their duties by the time the residents arrived.

The opening of Wallbrook House resulted in a reduction in the numbers on the waiting list, but the total was still higher than is desirable and the building of a further forty-eight place Old People's Home was commenced at Arcal Lodge in Sedgley.

The following table shows the admissions, discharges, deaths and number of residents in the Old People's Homes as at the 31st December, 1970:

<i>Home</i>	<i>No. of Residents 1.1.1970</i>	<i>Ad- missions</i>	<i>Dis- charges</i>	<i>Deaths</i>	<i>No. of Residents 31.12.1970</i>
New Bradley Hall ..	49	42	32	10	49
Wallbrook House	7	107	58	12	44
Dibdale .. ..	39	39	19	12	47
Lawnwood House	33	62	43	12	40
The Woodlands ..	23	14	15	—	22
Albert House ..	22	6	5	1	22
Primrose House ..	10	5	7	—	8
Rose Cottage ..	9	13	12	—	10
Broadfield House ..	14	17	17	—	14
Roseland House ..	10	4	4	—	10
Herriotts, Droitwich Kelvedon, Wednesbury ..	—	1	—	—	1
Silvertrees, Tipton	3	1	—	—	4
Ivy House, Cannock	1	—	—	—	1
The Limes, Aldridge	1	—	—	—	1
The Viewlands, Wightwick ..	1	—	—	—	1
Summerhill Grange Claremont, Wolverhampton ..	8	—	1	—	7
West Midlands Cheshire Home ..	2	—	—	1	1
Cheshire Home ..	6	—	—	—	6
Embankment Fellow- ship, London ..	1	1	1	—	1
Chalfont Colony, Bucks. .. ..	1	1	—	—	2
Woodlarks Work- shop, Farnham ..	1	—	—	—	1
Royal School for the Blind, Leatherhead	1	—	—	—	1
Malvern Deaf Home	1	—	—	—	1
Fen Place, Sussex	1	—	—	—	1
British Polio Fellow- ship, Surrey ..	1	—	—	—	1
<b>Total .. ..</b>	<b>246</b>	<b>313</b>	<b>214</b>	<b>48</b>	<b>297</b>

## Community Services

Once again I have to report an extension in the Meals-on-Wheels Service and the Luncheon Clubs. A total of 39,268 meals were served during the year and it is intended that these services should be further extended in 1971.

This service could not be provided without the work of the County Borough Organiser of the Women's Royal Voluntary Service and her helpers, and again our thanks are extended to them, as well as to Messrs. Ewarts Limited and Messrs. Desmo Limited, who have continued to provide a number of meals for this service from their canteens.

## CARE OF THE PHYSICALLY HANDICAPPED

Work was started during the year on the construction of a new centre for the physically handicapped at Wellington Road. When it is completed it will be possible to provide facilities for the co-ordination of the work of the various organisations for the physically handicapped, both voluntary and those run by this Department. As the centre has been specifically designed for use by the physically handicapped, many of the difficulties resulting from inadequate buildings and facilities experienced in the past should disappear.

The two existing centres will be closed when Wellington Road is opened and the staff and the physically handicapped people concerned will be transferred to the new centre.

The Establishment Committee have approved a staffing structure which will enable us for the first time to deal adequately with the problem of home tuition of the house-bound physically handicapped.

The Chronically Sick and Disabled Persons Act became law during 1970, but its impact had not been adequately assessed by the end of the year as much of the information necessary for planning had to await the completion of a survey of those affected by this legislation.

At the end of the year the numbers of people on the physically handicapped registers as compared with 1969 were as follows:

	<i>Blind</i>	<i>Partially Sighted</i>	<i>Deaf</i>	<i>Hard of Hearing</i>	<i>General Classes</i>	<i>Total</i>
1970	310	51	137	252	819	1,569
1969	307	49	133	241	753	1,483
Increase	3	2	4	11	66	86

The following tables show the numbers in the various age groups and the general classifications within the definitions laid down by the Department of Health and Social Security:

<i>Register at 31st Dec., 1970</i>	<i>Under 16 years</i>	<i>16-64 years</i>	<i>65 and over</i>	<i>Total</i>
Male .. ..	8	212	154	374
Female .. ..	9	233	203	445
Total .. ..	17	445	357	819

<i>Major Handicaps</i>	<i>Age</i>					<i>Total (6)</i>
	<i>Under 16 (1)</i>	<i>16-29 (2)</i>	<i>30-49 (3)</i>	<i>50-64 (4)</i>	<i>65 or over (5)</i>	
1. Amputation .. .. .	—	1	7	13	37	58
2. Arthritis or rheumatism ..	—	2	9	59	137	207
3. Congenital malformations or deformities .. .. .	6	10	9	12	3	40
4. Diseases of the digestive and genito-urinary systems, of the heart or circulatory system, of the respiratory system (other than tuberculosis) or of the skin .. .. .	—	4	17	58	65	144
5. Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than tuberculosis) of the upper and lower limbs and of the spine	3	7	14	31	41	96
6. Organic nervous diseases— epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc. .. .. .	6	25	37	71	59	198
7. Neuroses, psychoses, and other nervous and mental disorders not included in line 6. .. .. .	2	10	12	12	5	41
8. Tuberculosis (Respiratory)	—	—	9	1	2	12
9. Tuberculosis (Non-Respiratory) .. .. .	—	1	7	2	1	11
10. Diseases and injuries not specified above .. .. .	—	1	1	3	7	12
11. Total .. .. .	17	61	122	262	357	819

During the year holidays were arranged for the blind, the deaf and for the physically handicapped. Such holidays require much careful planning beforehand and supervision of the handicapped on the holiday, and credit must be given to the staff responsible for them.

### The Deaf

The number of deaf people referred to the Department for general help and for casework service continued to increase. Our Welfare Officer for the Deaf continued to run Social Clubs and these are particularly successful with the young adult deaf.

The table given below gives an analysis of the caseload of deaf persons in age groups:

<i>Register at 31st Dec., 1970</i>	<i>Children under 16</i>		<i>Persons aged 16-64</i>		<i>Persons aged 65 and over</i>		<i>Total</i>
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	
Deaf persons with speech .. ..	11	8	23	22	6	5	75
Deaf persons without speech .. ..	4	3	19	25	4	7	62
Hard of hearing ..	3	5	32	43	72	97	252
<b>Total .. ..</b>	<b>18</b>	<b>16</b>	<b>74</b>	<b>90</b>	<b>82</b>	<b>109</b>	<b>389</b>

### The Blind

The Workshops for the Blind and the sheltered Workshops at Sedgley which are run conjointly by this Authority, the County Borough of Wolverhampton, and the Institute for the Blind, have continued to do well in the face of increasing competition and rising prices. The modernisation of the buildings and the working techniques has continued and the Workshops are now capable of undertaking most of the jobs required in light engineering and assembly work. Whilst this is a better choice of employment for the blind than the more traditional crafts, it must be remembered that there are many small firms carrying out the same type of work in the Black Country and consequently competition in this field is fierce.

Whilst the blind are prepared to compete on equal grounds with workers in open industry, there are particular difficulties arising from the fact that the Workshops do have to provide employment for those suffering from other forms of physical handicap. Many of this latter group are not capable of working in the whole range of skills necessary in the Workshop.

Nevertheless, these Workshops do show a satisfactory financial return as against the national averages.

An age analysis of the blind population as at 31st December, 1970 is as follows:

Age in years	Blind			Partially Sighted		
	Male	Female	Total	Male	Female	Total
0 to 15 ..	9	6	15	2	6	8
16 to 20 ..	2	2	4	1	3	4
21 to 39 ..	10	6	16	2	2	4
40 to 59 ..	25	19	44	8	1	9
60 to 64 ..	12	10	22	—	2	2
65 to 69 ..	17	16	33	3	1	4
70 to 79 ..	29	61	90	5	5	10
80 to 89 ..	12	53	65	1	7	8
90 and over ..	5	16	21	1	1	2
Total ..	121	199	310	23	28	51

### Remedial Aids and Adaptations

We have continued to provide various aids for the handicapped and have carried out adaptations in their homes to assist them in their daily lives.

The effect of the Chronically Sick and Disabled Persons Act has not yet been felt in this particular field but since we have had a continuing programme over a number of years the impact may not be so noticeable as in some other areas. However, the provision of such additional services as are envisaged by this Act will require the provision of additional finances. Again it is difficult to estimate the requirements until a survey has been completed.

Where the patient lives in Council accommodation, the Housing Department acts as our agent in carrying out necessary adaptations, and our thanks are due to the Housing Manager and his staff for their co-operation.

### Burials, National Assistance Act, 1948, Section 50

The Department carried out ten funerals during the year of persons dying within the boundaries of the Borough where it appeared that no suitable arrangements for disposal of the bodies had been or were being made.

### Transport

In my report for 1969 I made reference to the ever increasing demands for transport resulting from the growth in our services for the physically handicapped. These demands have continued to increase during 1970 and the Welfare Committee has agreed to the provision in 1971 of two further specially built passenger vehicles in addition to the one already in service. It is hoped that these vehicles will provide adequate cover for this service.

### The Care of the Mentally III

A psychiatric unit was opened at Burton Road Hospital in 1970 and this it is hoped will be the nucleus of a locally based psychiatric service. Until now no in-patient facilities were provided within the Borough and patients requiring such facilities had to travel fairly long distances, as did their relatives and friends on visiting days. In addition there was an extension of the out-patient services within the Borough.

A new training centre was opened on 7th October 1970 at Russells Hall, providing 180 places for the mentally handicapped. One hundred of these are for children aged from 6 years to 16 years, and there is a nursery unit for very young children. Forty places are at present occupied by those over 16 but this is a temporary measure until the completion of the new proposed centre for adults in Lower Gornal.

Particular difficulties are experienced by the families of those suffering from multiple handicaps both physical and mental, and a special care unit with 20 places has been provided for such cases.

The old Junior Training Centre at Dixons Green has been closed down following the transfer of the staff and the pupils to the Russells Hall Centre.

Proposals are near completion for the extension of "Albert House," an Old People's Home, to provide 10 places for the elderly mentally ill. As the number of those within the community requiring residential care increases, further accommodation can be provided in "Albert House" with a consequent reduction in the number of ordinary places.

The following table gives the number of referrals to the Department during 1970 under the Mental Health Act 1959. Not all of these were new cases, some having been referred after a breakdown or for further treatment.

<i>Referred by</i>	<i>Mentally ill and Psychopathic</i>	<i>Subnormal and Severely subnormal</i>	<i>Total</i>
General Practitioners ..	56	15	71
Hospitals .. .. .	485	69	654
Local Education Department .. .. .	—	38	38
Police Courts .. .. .	12	2	14
Other sources .. .. .	156	176	332
Total .. .. .	709	300	1,009

A hostel for the mentally handicapped was opened at "Lupin House" in May, 1970. This building was formerly used as a small Old People's Home, but after extension now accommodates ten mentally handicapped young adults and a resident Warden and Matron. All ten places were occupied immediately and this hostel can only be regarded as the beginning of a service which must increase.



The following table gives the number of mentally subnormal patients requiring special aid or residential facilities:

	<i>Subnormal</i>				<i>Severely subnormal</i>				<i>Total</i>
	<i>Under age 16</i>		<i>16 and over</i>		<i>Under age 16</i>		<i>16 and over</i>		
	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	
Attending Training Centre	4	5	11	22	66	32	40	38	218
Awaiting entry to Training Centre, Baby Units or Special Care Unit ..	-	-	6	4	2	2	2	2	18
Resident in Local Authority Home/Hostel .. ..	-	-	5	2	-	-	1	1	9
Resident in other Local Authority Hostels ..	-	-	-	-	-	-	1	-	1
Attending day hospital ..	-	-	-	-	-	-	-	-	-
Number resident in Voluntary Homes.. ..	-	-	1	1	-	-	-	-	2

During the year holidays were arranged at Tan-y-Bryn, North Wales, for the adults attending Dixons Green and Audnam Training Centres.

The holiday home at Rhyl, which belongs to the Dudley Voluntary Association for Mental Welfare, was again used throughout the summer to provide holidays for parents of mentally handicapped children who would not normally be able to get away from home.

## ANNUAL REPORT OF PRINCIPAL SCHOOL MEDICAL OFFICER

### School Accommodation and Attendance

Education is provided in 75 primary schools, 18 secondary modern schools and 5 grammar schools (one for boys, one for girls and three mixed schools). In addition, there are 3 day schools for educationally subnormal children and 5 nursery schools. The average numbers on the roll at the end of the year are given in the table set out below.

The total school population increased during 1970 from 30,084 to 31,306.

During 1970 2 new nursery schools, Park Nursery and Wren's Nest Nursery, were opened providing a total of 120 additional places. Also during this period 3 new schools were opened, Pensnett Infants' School, Foxyards Primary School and the Brier Day Special School—providing a total of 580 places.

During the year Cotwall End Primary School was re-organised into an Infant and a Junior School. Park Primary, St. James's Infants', St. Thomas's C.E. Primary and Jessons Junior Schools combined to form two separate schools, namely Jessons Infants' and Jessons Junior.

The amalgamation of Rosland Secondary School and the Blue Coat School formed the Blue Coat Secondary Modern Mixed School under one headship and Dormston Secondary Mixed School was the result of the amalgamation of Dormston Boys' Secondary School and Dormston Girls' Secondary School.

The new schools helped to absorb the increase of 1,222 in the school population and also accepted pupils transferred from those which were overcrowded.

<b>Infants' Schools</b>						Average No. on Roll
Belle Vue .. .. .	..	..	..	..	..	263
Bird's Meadow .. .. .	..	..	..	..	..	114
Brockmoor .. .. .	..	..	..	..	..	218
Bromley .. .. .	..	..	..	..	..	220
Bromley Hills .. .. .	..	..	..	..	..	239
Christ Church .. .. .	..	..	..	..	..	134
Cotwall End .. .. .	..	..	..	..	..	167
Dudley Wood .. .. .	..	..	..	..	..	163
Glynne .. .. .	..	..	..	..	..	227
Hawbush .. .. .	..	..	..	..	..	156
Holly Hall .. .. .	..	..	..	..	..	229
Jessons C.E. .. .. .	..	..	..	..	..	346
Mount Pleasant (Quarry Bank) .. .. .	..	..	..	..	..	66
Pensnett .. .. .	..	..	..	..	..	101
Priory .. .. .	..	..	..	..	..	231

Quarry Bank	..	..	..	..	214
Queen Victoria	..	..	..	..	210
Red Hall	..	..	..	..	298
Roberts	..	..	..	..	199
Russells Hall	..	..	..	..	204
Saltwells	..	..	..	..	144
St. Chad's C.E.	..	..	..	..	78
The Straits	..	..	..	..	246
Wall Heath	..	..	..	..	119
Wren's Nest	..	..	..	..	174
Yew Tree Hills	..	..	..	..	149
					<hr/>
					4,909
					<hr/>

### Infants' and Junior Schools

					Average No. on Roll
Alder Coppice	..	..	..	..	348
Blowers Green	..	..	..	..	385
Bramford	..	..	..	..	342
Brierley Hill	..	..	..	..	236
Dawley Brook	..	..	..	..	257
Fairhaven	..	..	..	..	213
Kate's Hill	..	..	..	..	353
Lawnswood	..	..	..	..	262
Maidensbridge	..	..	..	..	364
Mount Pleasant, Coseley			..	..	382
Northfield Road	..	..	..	..	341
Parkes Hall	..	..	..	..	286
Portway	..	..	..	..	234
St. Chad's R.C.	..	..	..	..	204
St. Edmund's C.E.	..	..	..	..	245
St. John's C.E.	..	..	..	..	252
St. Joseph's R.C.	..	..	..	..	254
St. Mary's C.E. (Kingswinford)			..	..	310
St. Mary's C.E. (Coseley)			..	..	326
St. Mary's R.C.	..	..	..	..	126
Foxyards	..	..	..	..	134
Sledmere	..	..	..	..	430
Sycamore Green		..	..	..	264
The Brook	..	..	..	..	392
The Dingle	..	..	..	..	282
Thorns	..	..	..	..	222
Tudor	..	..	..	..	259
Wallbrook	..	..	..	..	224

**Junior Schools**

Belle Vue .. .. .	262
Bowling Green .. .. .	445
Brockmoor .. .. .	306
Bromley .. .. .	329
Bromley Hills .. .. .	254
Christ Church (Coseley) .. .. .	171
Church of Ascension .. .. .	189
Cotwall End .. .. .	252
Glynne .. .. .	376
Hawbush .. .. .	237
Jessons C.E. .. .. .	266
Mount Pleasant .. .. .	114
Netherton C.E. .. .. .	197
Priory .. .. .	369
Quarry Bank .. .. .	340
Queen Victoria .. .. .	336
Red Hall .. .. .	387
Roberts .. .. .	236
Russells Hall .. .. .	278
St. Mark's C.E. .. .. .	228
The Straits .. .. .	287
Woodside .. .. .	323
Wren's Nest .. .. .	292
Sutton E.S.N. Mixed .. .. .	118
Woodsetton E.S.N. Mixed .. .. .	114
The Brier .. .. .	54
	<hr/>
	14,687
	<hr/>

**Secondary Modern and Grammar Schools**

		Average No. on Roll
Audnam Secondary	(Mixed) ..	326
Bishop Milner R.C.	(Mixed) ..	468
Blue Coat	(Mixed) ..	458
Brierley Hill	(Mixed) ..	677
Coseley	(Mixed) ..	438
Dormston Secondary	(Mixed) ..	605
Ellowes Hall	(Mixed) ..	649
Hillcrest	(Mixed) ..	410
Holly Hall	(Mixed) ..	495
Kingswinford	(Mixed) ..	369
Mount Pleasant	(Mixed) ..	261
Park	(Boys) ..	254
Park	(Girls) ..	239
Pensnett	(Mixed) ..	447
Quarry Bank	(Mixed) ..	360
Saltwells	(Mixed) ..	298
Summerhill	(Mixed) ..	493
Wren's Nest	(Mixed) ..	526

Brierley Hill Grammar	(Mixed)	..	1,018
Dudley Grammar	(Boys)	..	531
Dudley High	(Girls)	..	563
High Arcal Grammar	(Mixed)	..	942
Sir Gilbert Claughton Grammar/Technical	(Mixed)	..	476
			<hr/>
			11,303
			<hr/>

**Grand Total**

Primary, Secondary and Grammar	..	30,899
		<hr/>

**Nursery Schools**

Netherton Park	..	..	..	..	56
Park Nursery	..	..	..	..	87
Pensnett	..	..	..	..	74
Priory	..	..	..	..	102
Wren's Nest Nursery	..	..	..	..	62
					<hr/>
					381
					<hr/>

**MEDICAL INSPECTIONS**

Periodic medical inspections are carried out on school entrants and school leavers and, in addition, selective examinations for pupils in the years following the first medical examination are arranged as follows:—

**(1) Hearing**

Audiometricians are employed to carry out routine screening at 5, 7 and 9 years. Any doubtful results are brought to the notice of a Senior Medical Officer who arranges for the condition to be further investigated.

**(2) Vision Testing**

Vision testing is carried out by School Nurses and the first test takes place prior to the entrant medical examination. Subsequent testing using a Keystone Vision Screener is arranged at the age of 6 years and every second year after that up to the age of 12. A final vision test is carried out at the age of 15. These tests are for visual acuity, strabismus and colour vision.

(3) All new entrants to any school in the Borough are automatically brought forward for examination.

(4) Special medical examinations are arranged for pupils referred by Headteachers, parents, nursing staff and others.

The following table shows the number of children examined by years of birth and the number of individual pupils found to require treatment (excluding dental diseases and infestation with vermin).

Age Groups Inspected (By year of Birth)	No. of Pupils Inspected	Physical Condition of Pupils inspected		Pupils found to require treatment (excluding Dental Disease and infestation with vermin)		
		Satisfactory	Unsatisfactory	For Defective Vision (excluding Squint)	For any other Condition	Total Individual Pupils
1965 and later ..	1489	1489	—	40	211	251
1964 ..	1380	1378	2	40	149	189
1963 ..	190	189	1	6	19	25
1962 ..	88	88	—	3	11	14
1961 ..	70	70	—	5	8	13
1960 ..	68	68	—	1	3	4
1959 ..	55	54	1	4	5	9
1958 ..	70	70	—	2	5	7
1957 ..	77	77	—	1	8	9
1956 ..	825	825	—	17	25	42
1955 .. and earlier	2001	2000	1	66	77	143
TOTAL ..	6313	6308	5	185	521	706

As will be seen the total number of children examined this year (6,313) is an improvement on last year (5,087). The main reason for this is that up until September there was a full establishment of Medical Officers. It was also possible to resume the medical examination of school leavers.

Of the 6,313 examined, 5 (0.08%) were considered to be of unsatisfactory general condition compared with 18 for the previous year. The classification of "Satisfactory" and "Unsatisfactory" condition rests on the view of the examining Doctor and as standards differ slightly some variation in classification is to be expected.

Those pupils considered to be of unsatisfactory general condition were seen frequently and, in addition to advice given to the parents concerning their medical and social care, arrangements were made with the family Doctor for them to receive any treatment thought to be necessary.

### Presence of Parents at Periodic Medical Inspections

Age Group Inspected	No. of Pupils Inspected	Percentage of Parents Present
		1970
Entrants .. ..	3059	91.1
Other Periodics .. ..	428	76.4
Leavers .. ..	2826	19.5

The attendance of parents at routine medical examination of school entrants remains on the whole very good, but in the senior age group the attendance leaves much to be desired. Unfortunately, it is usually in the cases where parents do not attend that there is the most need for consultation between Doctor and parent.

### Defects Found by Periodic Medical Inspections during the Year

Defect Code No.	Defect or Disease	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		T	O	T	O	T	O	T	O
4	Skin .. ..	13	168	12	114	—	40	25	322
5	Eyes:								
	(a) Vision ..	92	116	80	328	13	30	185	474
	(b) Squint ..	10	53	1	24	1	10	12	87
	(c) Other ..	5	51	3	45	—	9	8	105
6	Ears:								
	(a) Hearing ..	48	95	18	42	2	11	68	148
	(b) Otitis Media	17	99	11	45	1	11	29	155
	(c) Other ..	4	71	3	17	—	17	7	105
7	Nose and Throat	18	646	3	209	1	103	22	958
8	Speech .. ..	23	106	1	22	2	36	26	164
9	Lymphatic Glands	6	263	1	26	—	23	7	312
10	Heart .. ..	37	127	18	64	1	23	56	214
11	Lungs .. ..	16	163	2	53	2	50	20	246
12	Development:								
	(a) Hernia ..	9	24	—	1	1	—	10	25
	(b) Other ..	10	133	4	22	1	17	15	172
13	Orthopaedic:								
	(a) Posture ..	5	29	1	36	1	7	7	12
	(b) Feet ..	88	317	8	72	9	29	105	418
	(c) Other ..	17	113	5	55	4	24	26	192
14	Nervous System:								
	(a) Epilepsy ..	1	10	2	13	—	6	3	29
	(b) Other ..	8	53	—	7	1	8	9	68
15	Psychological:								
	(a) Development	5	51	1	59	4	96	10	206
	(b) Stability ..	14	129	1	29	2	33	17	191
16	Abdomen .. ..	4	31	2	11	—	2	6	44
17	Other .. ..	31	255	17	136	9	79	57	470
	Totals .. ..	481	3103	194	1420	55	664	730	5117

T—Defect requiring treatment

O—Defect requiring observation

It is not possible to draw any general conclusions from these figures as the definitions "requiring treatment" and "requiring observation" vary with different Medical Officers. Those under observation include many defects which may be corrected spontaneously, never require treatment and are kept under observation as a precautionary measure only.

<b>Other Inspections</b>		<b>1970</b>	<b>1969</b>
Number of Special Inspections ..		318	256
Number of Re-Inspections .. ..		1,336	1,190
		<u>1,654</u>	<u>1,446</u>

### Summary of Defects Found at the Foregoing Inspections

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
4	Skin .. .. .	7	86
5	Eyes:		
	(a) Vision .. .. .	6	89
	(b) Squint .. .. .	1	29
	(c) Other .. .. .	2	25
6	Ears:		
	(a) Hearing .. .. .	14	35
	(b) Otitis Media .. .. .	—	29
	(c) Other .. .. .	—	39
7	Nose and Throat .. .. .	7	256
8	Speech .. .. .	17	40
9	Lymphatic Glands .. .. .	1	95
10	Heart .. .. .	4	102
11	Lungs .. .. .	7	114
12	Development:		
	(a) Hernia .. .. .	—	10
	(b) Other .. .. .	15	63
13	Orthopaedic:		
	(a) Posture .. .. .	—	12
	(b) Feet .. .. .	33	97
	(c) Other .. .. .	2	56
14	Nervous System:		
	(a) Epilepsy .. .. .	—	21
	(b) Other .. .. .	8	37
15	Psychological:		
	(a) Development .. .. .	6	37
	(b) Stability .. .. .	12	49
16	Abdomen .. .. .	—	33
17	Other .. .. .	67	193



A total of 1,654 children were seen at these special inspections, 318 of these at various Clinics at the request of parents, General Practitioners, Headteachers, School Nurses or Education Welfare Officers. Parents of children requiring continued supervision were advised and their children referred to their General Practitioner or the appropriate Specialist after discussion with the General Practitioner.

The remaining 1,336 pupils were seen at re-inspections in all schools in the Borough. These children were noted at previous periodic medical inspections to be in need of further observation, treatment or advice. These inspections are found to be of particular value in bringing to light those pupils who, owing to one cause or another, have failed to attend either the specialist clinic or their Medical Practitioner.

### Special Medical Clinics

Special medical examinations are carried out at clinics throughout the Borough. These clinics are arranged so that children seen at routine medical inspections at schools and considered by the Medical Officer to require a more detailed examination with their parents present, could be offered an appointment at the clinic nearest their home.

In addition to these pupils, the special clinics were also of value in seeing those children referred by Headteachers and others, the appointments at the clinics being arranged according to priority.

A total of 321 pupils were seen at these clinics, including those cases referred by the Director of Education for absenteeism, behaviour problems and other miscellaneous reasons. The following figures give details of children seen at the request of the Director of Education :—

Unfit for School	..	..	..	..	31
Fit for School	..	..	..	..	59
					— 90

### Recommendations :

	1970	1969
Unfit for School—General Practitioners notified and pupils kept under review	31	13
Fit for School	28	46
	—	—
	59	59
	—	—

**Other Recommendations:**

Restricted activities .. .. .	5
To attend ordinary school .. .. .	7
General cleansing .. .. .	2
Transfer to another school .. .. .	7
Recommended to attend Open Air School	3
Referred for assessment .. .. .	1
To receive special attention in School ..	1
Referred to Physiotherapist .. .. .	1
To attend full-time Nursery School ..	1
	<hr/>
	28
	<hr/>
Failed to attend .. .. .	3

**Work of the School Nurse**

Health Visitors and School Nurses continued to work together in all branches of the School Health Service.

**School Visits**

Routine and special inspections (with Medical Officer) .. .. .	643
Cleanliness Surveys .. .. .	592
Other reasons (including vision inspections, diphtheria immunisations, B.C.G. vaccination and miscellaneous sessions) .. .. .	1,415

**Home Visits:**

Cases of uncleanliness .. .. .	519
Other reasons .. .. .	1,475

**In attendance at Clinic Sessions** .. .. . 848

**Foot Inspections:**

During the year 592 periodic inspections of pupils' feet were carried out by Nurses at Schools and cases of verrucae or fungal infection were discovered. The total number of such cases is given below:—

Verrucae .. .. .	968
Fungal .. .. .	303
	<hr/>
	1,271
	<hr/>

**Enuresis Alarms**

Enuresis alarms continued to be available from Clinics throughout the Borough. During the year 148 appliances were issued and 64 pupils were cured of this condition.

## **School Health Education 1970**

Health Visitors continued a regular Health Education programme in 11 senior schools and several other schools requested talks on a variety of subjects.

During the year 289 talks were given in schools.

Two schools continue to take the Child Care examination of the Child Welfare Association and some participated in the Duke of Edinburgh Award Scheme.

A 16 m.m. projector was acquired during the year which is proving an asset to the service. The 16 m.m. film "Smoking and You", which is suitable for use in all senior schools, was also purchased.

The Mobile Unit of the Health Education Council visited the Borough for one week in May and a total of 254 pupils from 10 secondary schools were invited to attend the exhibition on the dangers of smoking and the prevention and early detection of cancer.

Visual Aids used to explain the subject of cancer education included charts, posters, leaflets, 16 m.m. film slides, flannelgraphs and video-tape recorded interviews, some of which were made by our own staff during the period of in-service training earlier in the year.

There continued to be a steady demand from schools for project information and material on the Health and Social Services.

## **Vaccination and Immunisation**

### **B.C.G. Vaccination of School Children**

The annual B.C.G. programme normally carried out during the Autumn term was cancelled this year following notification from the Department of Health and Social Security that Rubella vaccine was immediately available and advising that girls between their 12th and 14th birthday should be offered protection against Rubella infection before they reached child-bearing age. The B.C.G. programme was carried out in the Spring of the following year.

### **Investigation following B.C.G. Vaccination**

At the general meeting of the Regional Advisory Committee on Chest Services, it was reported that a high percentage of pupils at school who had received B.C.G. vaccination, were found on testing two years later to be Heaf Negative. It was agreed to carry out a small pilot survey in Dudley and children were Heaf tested in 5 schools towards the end of the year.

In 3 of the schools children had been B.C.G. vaccinated using a needle and syringe in 1966 and 1967, and in 2 of the schools they had been vaccinated using the "dermo-jet" in 1968 and 1969.

Although there were more negative results after using B.C.G. with "dermo-jet" than by needle and syringe, the number of pupils involved was too small to allow any conclusions to be drawn from this survey. It is therefore proposed to continue this investigation during the coming year.

### Smallpox Vaccination

During 1970 the programme of vaccination against smallpox in schools was continued. The numbers vaccinated were as follows:—

	1970	1969
Primary vaccination .. .. .	—	—
Re-vaccination .. .. .	3,005	2,171

### Diphtheria/Tetanus

Initial protection against these two diseases is normally covered by one course of injections. During 1970 the following were carried out:—

Primary Courses completed .. .. .	517
Re-inforcing doses given .. .. .	3,795

### Diphtheria

Primary Courses completed .. .. .	13
Re-inforcing doses given .. .. .	30

### Tetanus

Primary Courses completed .. .. .	363
Re-inforcing doses given .. .. .	1,104

### Measles

Primary Courses completed .. .. .	428
-----------------------------------	-----

### Poliomyelitis

The number of children protected against Poliomyelitis during the year was as follows:—

Primary Courses completed .. .. .	978
Re-inforcing doses given .. .. .	5,061

### Typhoid

The number of children protected against Typhoid before travelling abroad was as follows:—

Primary Courses completed .. .. .	511
Re-inforcing doses given .. .. .	—

### Rubella

For the first time, Rubella vaccine was introduced and 1,514 girls received this protection. Of these 505 received Cendehill vaccine, 514 Wistar vaccine by injection, and 495 Wistar vaccine by needleless injector.

**Infectious Disease—School Children**

				<i>Male</i>	<i>Female</i>	<i>Total</i>
Scarlet Fever	..	..	..	5	5	10
Measles	..	..	..	100	124	224
Dysentery	..	..	..	1	3	4
Food poisoning	..	..	..	3	—	3
Tuberculosis (Pulmonary)	..			2	—	2
Tuberculosis (Non-Pulmonary)				1	—	1
Infective Jaundice	..	..		6	3	9
Whooping cough	..	..		17	6	23

No cases of poliomyelitis or diphtheria were notified and no deaths were recorded as a result of infectious disease.

**Protection of Children from Tuberculosis**

A joint Circular 18/67 from the Ministry of Health and Home Office made recommendations on the frequency of chest x-rays for persons whose work brought them into close contact with groups of children.

As from January, 1969 all persons employed by the Authority who were in close contact with children were invited to attend for x-ray examination of the chest. This will be repeated at 3-yearly intervals. The figures below indicate the work undertaken during the year:—

Total number of appointments offered	..	242
Total number of x-ray results received	..	226

Of this number 8 showed evidence of abnormality and were investigated with the following results:—

No further action necessary	..	..	..	7
Abnormality requiring further examination	..			1

**Tuberculosis**

As a result of information received from hospital concerning three children, two of whom were attending a primary school in the Borough, it was considered necessary to Heaf test children, teachers and school meals assistants in this school.

Heaf testing was carried out on 292 pupils of whom 3 were found to give a positive result. Two of these were reacting to B.C.G. given earlier and in the case of the third child no information could be elicited from the family by the Health Visitor. He was therefore referred for x-ray, which showed that there was evidence of previous infection. He was kept under surveillance.

Of the 12 members of the teaching staff, 4 were found to give positive results. Of the 8 members of the kitchen staff, 3 were found to give positive results. X-rays of these 7 adults were found to be normal.

### Diseases of the Skin

During the year 26 families were referred to Central Clinic as being in need of treatment for scabies. These families included 46 adults, 26 children under five and 54 children of school age, compared with 28 adults, 15 children under five and 26 children of school age in 1969.

							<i>Number of Cases known to have been treated</i>
Ringworm :							
(a) Scalp	..	..	..	..	..	..	—
(b) Body	..	..	..	..	..	..	—
Scabies	..	..	..	..	..	..	54
Impetigo	..	..	..	..	..	..	—
Other Skin Diseases	..	..	..	..	..	..	—
							54

The increase in the number of cases of scabies probably reflects a true increase in the incidence of the disease in the Borough.

Treatment is given to all affected school children—a bath followed by the application of quellade for babies and young children and benzyl benzoate emulsion for the school child and adults. The children are excluded from school until certified free from infection by a Medical Officer. Members of the family under and above school age are also encouraged to attend for treatment.

Although the majority attend voluntarily, there are those who refuse to co-operate and the children having been treated and cleansed of infection, are re-infested.

### Specialists' Clinics

The service continues to be indebted to the Regional Hospital Board and Hospital Management Committee for providing consultant services on our own premises. This offers advantages to both patients and parents, and is a convenience to Consultants who have school medical records available, together with relevant notes on past medical history including Infant Welfare Records.

### Ophthalmic Clinic

Routine medical inspections in schools revealed 205 children requiring treatment for eye conditions (185 for errors of refraction ; 20 for squint and other conditions) and 666 were noted for future observations.

Consultant Ophthalmic Clinics continued throughout the year. Dr. L. H. G. Moore continued his ophthalmic work at the Central Clinic and Dr. J. A. Cox carried out clinic work at Brierley Hill, Sedgley, Coseley and Kingswinford. A total of 184 sessions was arranged in respect of these clinics, when 665 children were examined for the first time and 862 children previously examined were reviewed. Spectacles were provided for 880 children.

	<i>Number of cases known to have been dealt with</i>
External and other excluding errors of refraction and squint .. .. .	111
Errors of refraction including squint .. .. .	1291
	1402
Number of children for whom spectacles were prescribed .. .. .	880

During the year under review the Ishihara test for colour-blindness yielded the following results:—

	<i>School leaving age group</i>
Children found colour blind .. .. .	58 boys 1 girl

Where the examining Medical Officer considered it advisable, these children were referred to a Consultant Ophthalmologist, and the Youth Employment Officer was informed in each case.

### **Ophthalmic Inspections in Schools by School Nurses**

Health Visitors and School Nurses carry out a screening survey of all children at school, when 5-year-old entrants are tested by using traditional methods—"E", Hand Test and Snellin type test. The Keystone Vision Screener is used for testing the sight of school children in the following age groups:—

Age: 6, 8, 10, 12 and 15

These inspections continue to prove their value in detecting defects of vision which may develop between routine medical inspections and also ensure a follow-up of those children who, for a variety of reasons, fail to attend for periodic review by the Eye Specialist.

The following table gives a summary of the work done:—

Number of children inspected .. .. .	12,206
Number found to have visual defects .. .. .	1,243
Of this number (1,243)	
Number referred to Eye Clinic .. .. .	753
Number already given appointment .. .. .	131
Noted for observation .. .. .	338
Seen previously and discharged .. .. .	16
Left district, made own arrangements or did not attend .. .. .	5

### Orthoptic Clinic

Throughout the year the visiting Orthoptist continued to carry out 6 sessions monthly at the Central Clinic and the following are details of the work done:—

New Cases	..	..	..	..	..	..	106
Old cases:							
For treatment	..	..	..	..	..	59	
For occlusion	..	..	..	..	..	12	
For test and observation	..	..	..	..	..	8	
For periodic check-up	..	..	..	..	..	18	
Miscellaneous visits	..	..	..	..	..	50	
						—	147
							<hr/>
Total attendances	..	..	..	..	..	..	253
							<hr/>
Discharges:							
Cured by Orthoptic treatment	..	..	..	..	..	..	17
Cured by Orthoptic and operative treatment	..	..	..	..	..	..	1
Transferred to hospital for operative treatment..	..	..	..	..	..	..	8
Good cosmetic result	..	..	..	..	..	..	1
Failed to attend	..	..	..	..	..	..	17

### Orthopaedic Clinic

During 1970, Mr. J. A. O'Garra, F.R.C.S., continued his fortnightly visits, the Orthopaedic Clinic remaining under the direction of the Dudley, Stourbridge and District Hospital Group. A Registrar also assisted at the Clinic and this reduced the waiting time for patients.

The number of pupils treated, 380, showed an increase of 103 as compared with the preceding year. The 820 children noted at routine medical inspections as having orthopaedic defects included 79 who required treatment and they are included in the total of 380 referred to above. The remaining 741 were kept under observation.

### Physiotherapy

This Clinic continued to function under the direction of the Dudley, Stourbridge and District Hospital Group, with a trained Physiotherapist holding sessions at Central Clinic each day. As in previous years, pesplanus and genu valgum of varying degree of severity accounted for the great majority of cases.

### Ear, Nose and Throat Clinics

Mr. G. O. Clark, F.R.C.S., continued clinics in the Brierley Hill, Sedgley and Kingswinford areas. The number of children receiving operative treatment for the removal of tonsils and adenoids was 102. In addition, 7 children received operative treatment for other conditions.

During the year at medical inspections 106 children were noted as requiring treatment as compared with 104 in 1969. The total kept under observation, 1,729, also showed an increase on last year.



## Treatment

	<i>Number of cases known to have been dealt with</i>
Received operative treatment :	
(a) for disease of the ear.. .. .	7
(b) for adenoids and chronic tonsillitis ..	102
(c) for other nose and throat conditions ..	7
Received other forms of treatment .. .. .	4
	120
Number of school children seen by E.N.T. Specialist	48
Number of school children for whom hearing aids were prescribed .. .. .	2

## Audiology/Screening for Hearing

The audiometric service available in the Department is directed towards the early detection of hearing defects in children. Apart from the routine hearing screening test carried out in early infancy, routine audiometric screening of school children is undertaken by a full-time qualified Audiometrician before entry to school if necessary, soon after their admission to school at 5 years of age, and again at the ages of 7 and 9. This service is also available for any child referred by Doctors, teachers or parents between periods of routine screening tests. It is encouraging to see that direct referrals of children to the school Audiometric Service is being made by General Practitioners much more frequently than in the past.

The need for an additional member of staff to carry out routine screening at schools became apparent, and in December a part-time Trainee Audiometrician was appointed.

Of the 7,385 children tested by "pure tone" audiometer, 507 were referred for further audiometer testing and clinical examination by the First Senior Medical Officer or Consultant Surgeon. A further 41 were also referred by the Medical Officers at schools or clinics, General Practitioners and Headteachers.

Details of audiometry carried out at various clinics throughout the Borough are given below :—

First attendances .. .. .	189
Re-examinations .. .. .	101
	290
Failed to attend .. .. .	122
	412

Of the 290 seen at the clinics, 20 were referred for specialist opinion.

Apart from visits to schools for routine testing, other visits were carried out as follows:—

Children receiving instruction with speech trainer	5
Children in Junior and Secondary Schools receiving hearing aid instruction .. ..	6
Children receiving hearing aid instruction at home	14
Children given special hearing test in school ..	235
Children given special hearing test at home ..	32
Children given special hearing test at clinics ..	5
Speech/Hearing tests given to children in Schools	2

### **Child Guidance Clinic**

Dr. D. T. Maclay, Consultant Child Psychiatrist, continued his weekly sessions at the Central Clinic. I am indebted to him for the following comments on the working of the Child Guidance Clinic during the year 1970.

"The situation of the Child Guidance Clinic is that work has continued throughout the past year without highlight or any unusual difficulties, except of course that no replacement was made for Dr. Castor, Clinical Assistant, who left during the year. Again I refer to the small number of pre-school children who are referred to the Clinic. I believe that by help at such an early age and advising their parents, one could produce adjustments which would save trouble later on."

During the year Dr. Maclay's book, "Treatment for Children," was published by George Allen and Unwin Ltd. Much of the work on which the book is based was done in Dudley.

Drawing on many years' experience as a Therapist, Dr. Maclay outlines the methods used in helping emotionally disturbed children and their parents, explains the causes of psychological stress and discussed the symptoms and treatment of neurosis, delinquency and educational and personal problems.

Although many books dealing with the treatment of children have been written by Analysts, few Psychologists and Psychiatrists who treat children are analytically trained. For this reason a book written by a non-Analyst with wide experience of therapy may be particularly welcome to Psychiatrists, Psychologists, Social Workers at child guidance clinics, Paediatricians, School Medical or Welfare Officers and General Practitioners who are regularly confronted with children's problems, but who have no analytical training. It should also be of interest to parents, teachers, Social Workers and play leaders who are not especially concerned with problems of children but who wish to deepen their understanding of child behaviour. It may contain something of value for Probation Officers, for Child Care Officers and for the staff of residential schools and homes for children.

Among other topics, Dr. Maclay discusses nervousness, anxiety, psychosomatic and emotion-linked illnesses, sexual development and the relationship of children to the family and society. He also gives a large number of case histories and examples of treatment which should be extremely valuable for those who work in child guidance clinics.

The sources of referral to Child Guidance Clinics during 1970 were as follows:—

General Practitioner, Medical Officer or Consultant, Teacher or Education Welfare Officer .. .. .	41
Children's Officer, Juvenile Court or Probation Officer	2
Parents direct .. .. .	2
Others.. .. .	6
	—
	51
	—

The following is an analysis of new cases:—

Organic or constitutional .. .. .	6
Anxiety .. .. .	18
Psychosomatic .. .. .	2
Problems related to education .. .. .	6
Behaviour disorder and delinquency .. .. .	15
Family, social and sexual .. .. .	4
	—
	51
	—

During the year 98 children admitted to the Remand Home at Saltwells House were referred to Dr. Maclay by the Courts.

Total number of interviews:—

Psychiatrist .. .. .	418
----------------------	-----

### Handicapped Children

There have been suggestions in the past that the medical care now available for children under the National Health Service Act renders the School Health Service superfluous. In Dudley, experience has proved that the one service acts reciprocally on the other. Co-operation between local General Practitioners and Hospitals over the past years has always been encouraged and we now have a closer working relationship than ever before. The results and recommendations of all ascertainments carried out by Medical Officers are passed to the child's General Practitioner, and a good working arrangement exists with Hospitals in the area.

Special Schools or home teaching will always be required for children who cannot be educated satisfactorily in ordinary schools. Many children will need some form of community care all their lives and the care and consideration shown for such children throughout their school life must be available when they leave school. By special examination prior to leaving school, a handicapped child is referred for care or guidance through the direction of the Welfare and Youth Employment Services.

Handicapped children are seen on every visit to the school by the Medical Officers and for those at residential schools arrangements are made for them to be seen at the Clinic nearest their home during school holidays.

The following section of the Report gives details of children attending Special Day or Residential Schools according to their need, as well as the number of children ascertained during the year and found to be in need of special educational treatment.

**Blind Pupils**—"that is to say, pupils who have no sight or whose sight is, or is likely to become, so defective that they require education by method not involving the use of sight"

As at 31st December, 1970, there were five children in Residential Special Schools.

No pupils were ascertained as blind during the year.

**Partially-Sighted Pupils**—"that is to say, pupils who by reason of defective vision cannot follow the normal regime of ordinary schools without detriment to their sight or to their educational development, but can be educated by special methods involving the use of sight."

As at 31st December, 1970, there were 8 children in Residential and one child in Day Special School. This includes 2 children who were admitted to Residential School during the year, one of whom was transferred from a Day Special School and the other had been attending a Sunshine Home for Blind Babies and having attained school age was transferred to a Residential School. No pupils were ascertained as partially sighted during the year.

**Deaf Pupils**—"that is to say, pupils who have no hearing or whose hearing is so defective that they require education by methods used for deaf pupils without naturally acquired speech or language"

As at 31st December, 1970, there were 4 children in Day Special Schools and 5 in residential schools. This includes 2 children who were admitted to Residential Schools for the deaf during the year, one of whom had been awaiting a place from the preceding year and the other was a child who was also educationally sub-normal and had been attending a Day Special School for pre-school auditory training.

**Partially Deaf Pupils**—"that is to say, pupils who have some naturally acquired speech and language but whose hearing is so defective that they require for their education special arrangements or facilities, though not necessarily all the educational methods used for deaf pupils"

As at 31st December, there were 9 children in Day Special Schools, 2 children attending Stow Heath Unit for Hearing Impaired Children at Willenhall, and 3 children attending Residential Special Schools.

Three children were ascertained as partially deaf during the year.

One child who is attending the Longwill Day Special School was re-examined and the recommendation was that she remain at the Day Special School. Another child who is attending Braidwood School for the Deaf was re-examined and recommended for transfer to a school for the partially deaf. The third child who was recommended for admission to Stow Heath Unit was admitted in November. One child who was attending Stow Heath left the district.

**Educationally Sub-Normal Pupils**—"that is to say, pupils who by reason of limited ability or other conditions resulting in educational retardation require some specialised form of education, wholly or partly in substitution for the education normally given in ordinary schools"

As at 31st December, 1970, 4 children were attending the following Day Special Schools (other than Sutton, Woodsetton and Brier Schools) :—

William Baxter School, Cheslyn Hay, Walsall	..	..	1
Fitzwilliam School, Tipton	..	..	3

At the same date 7 children were attending Residential Special Schools as follows :—

St. John's School, Walpole Road, Brighton	..	..	1
St. Mary's, Horam, Sussex	..	..	1
Crowthorn, Edgworth, Near Bolton	..	..	3
Puddlestone Court, Near Leominster	..	..	1
Walton Hall, Staffordshire	..	..	1

One child was ascertained as educationally sub-normal during the year. He was attending the Royal School for the Deaf and recommended for admission to Larchmoor School as he requires specialised educational approach. One child was admitted to Crowthorn School during the year.

280 ascertainment were carried out during the year by approved Medical Officers. Most of these examinations were held at Clinics, but some were carried out in the schools and, in special cases, in the child's home. The following recommendations were made:—

### Ascertained Educationally Subnormal

To attend Day Special School .. .. .	82	
To remain at Ordinary School .. .. .	24	
Residential School for E.S.N. .. .. .	1	
	—	107
Re-ascertained—to receive voluntary care and guidance after leaving school .. .. .		57

### Other examinations

Unsuitable for education in ordinary school, to attend Junior Training Centre .. .. .	11	
Children attending Junior Training Centres re-ascertained .. .. .	3	
Not educationally sub-normal .. .. .	12	
Deferred for further ascertainment under Section 34, Education Act, 1944 .. .. .	68	
Children attending Day Special School re-ascertainment examinations .. .. .	8	
To leave school without supervision .. .. .	14	
	—	116
		<hr/> 280 <hr/>

During the year 82 appointments for the examination or ascertainment of handicapped pupils were not kept.

At the end of the year there were 119 ascertained educationally sub-normal pupils at Sutton Day Special School, 113 at the Woodsetton School (Dudley County Borough being responsible for 66 of these), 52 at The Brier School, 4 at Day Special Schools outside the Borough, 7 at Residential Special Schools and 170 awaiting places at Day or Residential Special Schools for educationally sub-normal pupils.

**Epileptic Pupils**—"that is to say, pupils who by reason of epilepsy cannot be educated under the normal regime of ordinary schools without detriment to themselves or other pupils"

No pupils were ascertained as epileptic during the year.

**Maladjusted Pupils**—"that is to say, pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or education re-adjustment"

As at 31st December, 1970, 16 pupils were attending the following schools:—

Allerton Priory, Woolton, Liverpool .. .. .	1
Ashley House, Near Market Drayton .. .. .	2
Bodenham Manor, Hereford .. .. .	2
Chaigeley School, Thelwall, Near Warrington ..	1
Childscourt Co-Educational School, Near Wincanton Somerset .. .. .	1
Cicely Houghton School, Wetley Rocks, Stoke- on-Trent .. .. .	1
Cotswold Chine School, Box, Stroud, Gloucester	2
Overseal Manor, Near Burton-on-Trent .. .. .	1
Pitt House School, Torquay .. .. .	1
Shotton Hall, Harmer Hill, Shrewsbury .. .. .	1
St. Gorran's, Near Helston, Cornwall .. .. .	1
Tudor Grange, Solihull .. .. .	1
Bladon House School .. .. .	1

Six children were ascertained as maladjusted during the year. Two of these children were referred to Dr. Maclay, Consultant Child Psychiatrist, one was placed in a Residential School for maladjusted children, leaving three children at the end of the year still awaiting placement. (One child attending a Residential School was admitted to an ordinary school. One child refused to return to Residential School after the Summer holidays).

**Physically Handicapped Pupils**—"that is to say, pupils not suffering from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools"

Throughout the year 5 children attended Carlson House School, Harborne, Birmingham, daily.

Six children were at Residential Schools as follows:—

Bethesda Hospital School, Cheadle, Cheshire ..	1
Wightwick Hall, Compton, Wolverhampton ..	4
Exhall Grange Special School.. .. .	1

105 examinations of children already ascertained as physically handicapped were carried out during the year as follows:—

To receive home tuition on a permanent or semi- permanent basis .. .. .	20
Re-examinations (routine medical inspections etc. of children at Residential Schools) .. .. .	62
Ascertained as delicate or physically handicapped	20
Ascertained physically handicapped for admission to Residential or Day Special Schools .. .. .	3

Of the 3 recommended for admission to Residential or Day Special Schools, one child has been admitted to a Day Special School, one child is still awaiting admission, and one child is receiving home tuition prior to admission.

**Pupils suffering from Speech Defects**—"that is to say, pupils who, on account of defect or lack of speech, not due to deafness, require special educational treatment"

No pupils were ascertained in this category but many who had speech defects were treated at Schools and at various Clinics by the Speech Therapist.

The establishment of Speech Therapists is 1 Senior Speech Therapist and 2 Speech Therapists. Staff in post at the end of the year were 1 Senior Speech Therapist working two-thirds full-time and one part-time Speech Therapist working four sessions. Details of the work done for the year are as follows:—

Number of attendances for treatment	..	1,936	
Number of attendances for interview	..	206	
Number of attendances for review	..	426	
		—	2,568
Number of referrals	.. .. .		512
Reasons for referral:			
Dyslalia	.. .. .	473	
Stammer	.. .. .	29	
Others	.. .. .	10	
		—	512
Sources of referral:			
Headteachers	.. .. .	388	
Medical Officers	.. .. .	76	
Others	.. .. .	4	
Health Visitors	.. .. .	44	
		—	512
Numbers discharged during the year:			
Cured	.. .. .	90	
Maximum Improvement	.. .. .	16	
Others	.. .. .	22	
		—	128
Number on Waiting List at end of year	..		403

The number of children referred during the year doubled compared with 1969 but the numbers treated and discharged has only altered slightly. For this reason the number on the Waiting List increased from 263 in December, 1969 to 403.

Towards the end of the year the two Speech Therapists visited a Centre where intensive treatment was carried out on children who are selected only after a comprehensive assessment of language and articulation. It was felt that this system could usefully be introduced in Dudley and arrangements were made for the special equipment to be bought and training given to the Speech Therapists.



**Delicate Pupils**—"that is to say, pupils not falling under any other category who, by reason of impaired physical condition, need a change of environment or cannot, without risk to their health or educational development, be educated under the normal regime of an ordinary school"

There were 5 children in this category in the following Schools:—

Beacon School, Lichfield (one boy who is also educationally sub-normal) .. .. .	1
Mounon House School, Chepstow, Monmouthshire..	2
Kingswood O.A.S., Wolverhampton .. .. .	2

### **Children Unsuitable for Education in School**

During the year 11 children were ascertained and recommended as being suitable for admission to the Junior Training Centre. 3 children were re-assessed and recommended to remain at the Junior Training Centre.

### **Tuition in Hospital**

39 Dudley school children between the ages of 5 and 15 years were given tuition in the Dudley Guest Hospital and 45 children of the same age group also received tuition at Wordsley Hospital in accordance with Section 56 of the Education Act, 1944.

One teacher is employed at the Guest Hospital for two-hourly sessions per day on Mondays, Tuesdays, Thursdays and Fridays, and the teacher employed at Wordsley Hospital is employed for two and a half hours on similar days.

### **Conditions Requiring Hospital Treatment or Investigation**

	1970
Dental .. .. .	5
Chest condition .. .. .	15
Ear, nose and throat condition .. .. .	114
Skin condition .. .. .	2
Surgical treatment .. .. .	107
Orthopaedic and rheumatic condition.. .. .	44
Appendicectomy .. .. .	33
Investigations .. .. .	129
Accidents and Casualties .. .. .	84

I am grateful for the continued co-operation of hospitals in sending details of admissions and discharges of school children. This improves liaison between the General Practitioner and the Health and Welfare Department, assists in the maintenance of complete school medical records and facilitates the visiting of children upon discharge from the hospital.

## **REPORT OF THE CHIEF DENTAL OFFICER**

The staffing position varied throughout the year. On average 6.2 Dentists were employed out of an establishment of 8. One Senior Dental Officer attended a full-time course on Orthodontics at the Eastman Clinic, London, from September, 1969 to September, 1970, followed by a further three months at the Dental Hospital, Birmingham.

One Dental Auxiliary worked with the Dental Officers at Sedgley and Brierley Hill, where there are double surgeries.

### **Dental Health Education**

Again thousands of pamphlets and booklets were distributed free to the children at school inspections.

I am reassured by the School Meals Service that slices of raw carrot (when carrots are of good quality) are still supplied to children after school dinners. Most tuck shops are restricted to the sale of savouries and nuts rather than sweets and sweet biscuits. Consumption of sweet refined food is undoubtedly the main cause of the prevalence of dental caries in our country.

The Dental Auxiliary spent 38 sessions in the year giving instruction on oral hygiene to Junior and Infants' Schools. These talks were given whilst some of the Dental Officers were examining the children in School. In addition Health Visitors gave oral hygiene talks to senior girls.

The noticeboards at all Clinics are devoted solely to Dental Health Education for two months of the year.

Beginners at school were presented with a coloured plastic mug, tooth brush, tooth paste and a letter of advice on oral hygiene to the parents from the Chief Dental Officer.

### **Fluoridation of Water Supply**

I regret to report that the Council have again this year rejected the proposal for fluoride to be added to the water supply. Though fluoride is available in other forms, none of these is as efficacious as fluoride added to the water supply.

The film "Out of the Mouths" was shown to an audience of Student Teachers from Dudley Training College, Health Visitors and 2 Headteachers, to enlist help in teaching good eating habits and oral hygiene to school children.

### **Dental Inspections and Treatment**

- 16,125 were inspected at school
- 2,219 were inspected at clinics
- 1,496 were re-inspected at school or clinic
- 12,929 required treatment
- 10,173 were offered treatment
- 6,695 were treated, during 14,835 attendances

The following Table gives a Summary of the work carried out:

Attendances and Treatment:								
First Visits	..	..	..	..	..	..	..	6,695
Subsequent Visits	..	..	..	..	..	..	..	8,140
Total Visits	..	..	..	..	..	..	..	14,835
Additional Courses of treatment commenced	..	..						231
Fillings in permanent teeth	..	..	..	..	..	..	..	11,858
Fillings in deciduous teeth	..	..	..	..	..	..	..	4,832
Permanent teeth filled	..	..	..	..	..	..	..	9,775
Deciduous teeth filled	..	..	..	..	..	..	..	4,262
Permanent teeth extracted	..	..	..	..	..	..	..	1,066
Deciduous teeth extracted	..	..	..	..	..	..	..	4,270
General Anaesthetics	..	..	..	..	..	..	..	1,236
Emergencies	..	..	..	..	..	..	..	578
Number of pupils X-rayed	..	..	..	..	..	..	..	369
Prophylaxis	..	..	..	..	..	..	..	1,550
Teeth otherwise conserved	..	..	..	..	..	..	..	665
Number of teeth root filled	..	..	..	..	..	..	..	36
Inlays	..	..	..	..	..	..	..	—
Crowns	..	..	..	..	..	..	..	21
Courses of treatment completed	..	..	..	..	..	..	..	5,249
Orthodontics:								
Cases remaining from previous year	..	..	..					62
New cases commenced during the year	..	..	..					103
Cases completed during the year	..	..	..	..	..	..	..	81
Cases discontinued during the year	..	..	..	..	..	..	..	9
Number of removable appliances fitted	..	..	..	..	..	..	..	111
Number of fixed appliances fitted	..	..	..	..	..	..	..	1
Pupils referred to Hospital Consultant	..	..	..	..	..	..	..	14
Prosthetics:								
Pupils supplied with F.U. or F.L. (first time)	..	..						—
Pupils supplied with other dentures (first time)	..	..						24
Number of dentures supplied	..	..	..	..	..	..	..	29
Anaesthetics:								
General anaesthetics administered by Dental Officers	..							6
Inspections:								
(a) First inspection at school—number of pupils	..							16,125
(b) First inspection at clinic—number of pupils	..							2,219
Number of (a) plus (b) found to require treatment								11,783
Number of (a) plus (b) offered treatment	..	..						10,173
(c) Pupils re-inspected at school or clinic	..	..						1,496
Number of (c) found to require treatment	..	..						1,166
Sessions:								
Sessions devoted to treatment	..	..	..	..				2,660
Sessions devoted to inspection	..	..	..	..				155
Sessions devoted to Dental Health Education	..	..						38

### **Infestation with Vermin**

Each term, hygiene inspections are carried out in schools by the Nurses. If a child is found to be verminous or infested with nits, a letter is sent to the parents informing them of the condition together with details of cleansing procedure. If for any reason the cleansing routine cannot be carried out at home, arrangements are made for this to be done at one of the Clinics, but in most cases when the child is re-examined the School Nurse finds no evidence of infestation. If, however, infestation is still present, a cleansing notice is issued to the parent giving an appointment at the School Clinic and the Medical Officer may issue a cleansing order, in which case the child will be compulsorily cleansed.

Those children heavily infested and excluded from school are re-admitted as soon as their condition is found to be satisfactory.

61,874 inspections were carried out during the year and arrangements made to ensure that the 425 pupils found to be infested were cleansed.



In addition, children were also examined in accordance with the Bye-Laws made under the Children and Young Persons Act, 1933, as amended by the Education Act, 1944, to undertake employment outside school hours. The number examined during the year was 241 and all children were found to be medically fit to carry out the following occupations:—

Shop Assistants	..	..	..	..	136
Newspaper delivery	..	..	..	..	81
Hairdressers	..	..	..	..	4
Others	..	..	..	..	20
					<hr/>
					241
					<hr/>

### **Astley Burf Camp**

As in previous years, approximately 40 pupils from various schools throughout the Borough were in residence at the Camp each week during the Summer term. They were accompanied by teachers and most classes were held in the open air.

The Camp, which is under the control of the Education Committee, is situated in the open country not far from the River Severn near Stourport.

When necessary, children are medically examined at school or clinic before going to the Camp School.

The curriculum allows the children attending the Camp School to take full advantage of the surrounding countryside and they are taken on visits to places of local interest. Special recreational activities are arranged in the evening by the teachers in charge of these parties.

### **Rotary Boys' House, Weston-Super-Mare**

We are again indebted to Dudley Rotary Club for providing a free fortnight's holiday for twenty boys at Weston-Super-Mare.

The boys eligible are convalescent or debilitated children or those whose parents would not be able to provide them with a recuperative holiday by the sea. The continuing difficulty experienced over the last year or two in finding boys coming within this category has made it very apparent that the reasons for selecting these children are now more social than medical and this reflects favourably on the health of the school children in Dudley.

### Deaths of School Children

Eight deaths occurred in children attending schools maintained by the Authority. The following are brief details:—

- Case 1. A girl aged 6 years  
Cardiac failure. Severe red cell anaemia. Congenital heart disease
- Case 2. A boy aged 10 years.  
Sarcoma of spine
- Case 3. A boy aged 14 years.  
Fractured skull—misadventure
- Case 4. A boy aged 4 years.  
Acute broncho-pneumonia.  
Hydrocephalus.
- Case 5. A girl aged 11 years.  
Acute myeloid leukaemia
- Case 6. A boy aged 14 years.  
Pneumococcal meningitis
- Case 7. A boy aged 6 years.  
Gastro-intestinal haemorrhage.  
Acute leukaemia.
- Case 8. A boy aged 5 years.  
Heart failure. Myocarditis. Aortic stenosis and incompetence.

### Surveys

During the year we co-operated with the Department of Social Medicine, Oxford University, in the investigation of childhood cancers.

A survey was undertaken at the request of the Department of Education and Science on all physically handicapped pupils attending ordinary schools. 61 children were examined and a questionnaire was completed in each case. Out of this number, 13 were considered to come within the categories of pupils defined by the Regulations as being physically handicapped.

### Medical Examinations of Teachers and Entrants to Courses of Training for Teachers

During the year 167 candidates were examined for admission to Training Colleges and a medical report completed in each case and forwarded with Forms 13 TT to the appropriate College Authority. Each candidate agreed to x-ray examination and it was possible to pass all as fit for admission to a course of training.

Entrants to the teaching profession completing an approved course of training continue to be examined by the College Doctor, but in other cases the medical examination is arranged by the Principal School Medical Officer of the appointing Authority. These examinations require the completion and forwarding of Form 28 RQ together with the medical report to the Department of Education and Science and an x-ray examination is compulsory. During the year 26 medical reports were completed and all candidates were successful in passing the medical and x-ray examination.

**ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH  
INSPECTOR AND CLEANSING SUPERINTENDENT FOR  
THE YEAR ENDED 31st DECEMBER, 1970**

To the Mayor, Aldermen and Councillors,  
of the County Borough of Dudley.

Mr. Mayor, Ladies and Gentlemen,

This Annual Report is the first of a new decade—the 1970's. It is also a report of work done during a year which was a special one for conservancy. People are becoming increasingly aware of the need for better environmental conditions and, quite rightly, look to Central and Local Government for the means to improve those conditions, and the will and drive to use the means provided. Even so, there are many frustrations along the way when efforts are being directed towards improvement.

**Housing**—The record of the Dudley Authority during the past 25 years for dealing with unfit houses is second to none. The larger areas of unfit houses have disappeared, and attention is now focussed on the small groups, and the individual unfit dwellings. There is also a change of emphasis, especially with the introduction of the Housing Act, 1969.

Although the grossly unfit dwellings have disappeared there are many houses which, for the 1970's, are unsatisfactory. There are houses without baths, hot water, internal sanitation, and in some instances requiring substantial repair. Generous improvement grants are available, but it is disappointing that only 132 houses were improved during the year. Out of this number only 52 were tenanted dwellings, despite the fact that a tenant can make representation to the Local Authority requiring action to be taken for improving the house. It seems strange that it is the Local Authorities Officers who are having to exert the pressure to bring about house improvement.

There is no General Improvement Area in the Borough, although your Committee approved such an area in principle some time ago. I am disappointed that it has not been possible to make better progress towards the declaration of an Order.

It will be noted that there are 130 known houses in multi-occupation. This is a small number out of the total dwellings in the Borough, but the time required in endeavouring to maintain a reasonable standard is out of all proportion to the rest of the housing problems.

**Food and Food Premises**—Britain was once described as a nation of shop-keepers, and certainly the number of food shops gives support to this description. There are also restaurants, snack bars, hotel kitchens, mobile food vendors, slaughterhouses and manufacturers etc.



Attention is given to premises, and their contents, right across the whole spectrum of food preparation and distribution. It is not enough to require premises to be brought up to a requisite standard—deterioration can be quite rapid without good management and supervision. The turnover in staff in food shops, etc., is quite high, and this calls for regular education from Public Health Inspectors during the course of visits.

**General District Work**—More specialised knowledge is being called for to deal with the growth of the number of complaints being made which involve manufacturing premises. It does not seem a long time ago when it was practically unknown for people to complain of nuisance from noise. Nowadays such complaints are on the increase, and careful measurements followed by analysis have to be taken before any approach can be made to Management. It speaks well of the awareness and co-operation of Management that solutions are found without recourse to statutory action.

The investigation into some of the more complicated noise sources is time absorbing and exacting, involving usually the spending of considerable time during part of the day and night. The difficulty may be that steps taken to reduce the level of noise does not necessarily entirely satisfy the complainant. In the absence of statutory standards the department takes account of the Wilson Report on noise and the British Standard 4142.

The complaints about atmospheric pollution also vary greatly from those of some years ago. One can remember the complaints concerning black smoke which now very rarely occur. The present day complaints concern dust, grit and fumes. The remedies for black smoke usually resulted in greater fuel economy and the offender very often was gratified by the work done being a means of reduction in fuel costs. The remedy for present day complaints are often difficult of application, are costly to perform, but create no saving in processing costs. Nevertheless I am of the opinion that industry generally is very much aware of its responsibilities, and when approaches are made, arrangements for improvements are usually agreed. Much more difficult are the finding of adequate solutions for some of the major problems of atmospheric pollution.

**Sewage Disposal**—I am indebted to Mr. B. Hartley, Manager to the Upper Stour Main Drainage Authority for the information about present and future plans for the improvement in sewage disposal. The completion of the Roundhill works will be of great value to those parts of the County Borough it will service.

**Conclusion**—The preparation of the various sections of the Report have been done by the Divisional Inspectors, Messrs. Dodd, D. Hunt and H. Hancox, together with the Chief Divisional Inspector, Mr. H. R. Fry. I consider their work and that of the Inspectors in the various divisions is of a high standard, and I wish to record my thanks for all the help and support I receive from them. The record would be incomplete if I did not also mention Mrs. Bennett and her clerical colleagues.

Mr. Bowman, Deputy Chief Public Health Inspector and Mr. Crawford, Assistant Chief Public Health Inspector also seem to cope with my demands, and many idiosyncracies, for which they deserve my many thanks.

Finally, to the Chairman and members of the Health Committee I record my thanks for the support, the confidence, and courtesy which has, at all times, been accorded me.

I am, Ladies and Gentlemen,

Yours obediently,

W. PARKER

Chief Public Health Inspector  
and Cleansing Superintendent

## INSPECTION OF MEAT

The following table gives particulars of carcasses and organs unfit for consumption and tabulates causes for condemnation.

### Carcasses Inspected and Condemned

	<i>Cattle</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
Number killed .. .. .	7,288	100	22	32,959	15,368
Number inspected .. .. .	7,288	100	22	32,959	15,368
<b>All diseases except tuberculosis and cysticerci:—</b>					
Whole carcasses condemned ..	1	—	—	12	3
Carcasses of which some part or organ was condemned ..	780	20	—	577	1,270
% of the number inspected affected with disease other than tuberculosis and cysticerci .. .. .	10.7%	20%	—	1.8%	7.9%
<b>Tuberculosis only:—</b>					
Whole carcasses condemned ..	—	—	—	—	—
Carcasses of which some part or organ was condemned ..	—	—	—	—	50
% of the number inspected affected with tuberculosis ..	—	—	—	—	.33%
<b>Cysticercosis:—</b>					
Carcasses of which some part or organ was condemned ..	7	—	—	—	—
Carcasses submitted to treatment by refrigeration .. .. .	7	—	—	—	—
Generalised and totally condemned .. .. .	—	—	—	—	—

### Meat Condemned

	<i>Cattle</i>	<i>Cows</i>	<i>Sheep</i>	<i>Pigs</i>	<i>Total</i>
Carcasses .. .. .	1	—	12	3	16
Livers .. .. .	545	—	529	747	1,821
Lungs .. .. .	348	—	41	522	911
Plucks and Frys .. .. .	—	—	25	145	170
Heads .. .. .	8	—	—	53	61
Kidneys .. .. .	3	—	—	5	8
Hearts .. .. .	8	—	3	37	48
Legs .. .. .	—	—	2	2	4
Hindquarters .. .. .	2	—	—	1	3
Skirt .. .. .	2	—	—	—	2
Spleens .. .. .	3	—	—	—	3
Flanks .. .. .	2	—	—	—	2
Feet .. .. .	—	—	—	1	1
Forequarters .. .. .	—	—	1	—	1
Hocks .. .. .	—	—	—	4	4

**DISEASES**

	<i>Cattle lbs</i>	<i>Cows lbs</i>	<i>Sheep lbs</i>	<i>Pigs lbs</i>	<i>Total lbs</i>
Abscesses .. .. .	3,558	—	5	164	3,727
Actinomycosis .. .. .	168	—	8	—	176
Arthritis .. .. .	—	—	—	12	12
Bruising .. .. .	16	—	84	35	135
C. Bovis .. .. .	6	—	—	—	6
Cirrhosis .. .. .	158	—	—	2,175	2,333
Congestion .. .. .	—	—	6	159	165
Contamination .. .. .	4	—	22	—	26
Emaciation .. .. .	—	—	152	—	152
Fasciola .. .. .	2,215	—	1,038	—	3,253
Fatty Infiltration .. .. .	22	—	—	3	25
Fever .. .. .	240	—	—	—	240
Gangrene .. .. .	—	—	20	—	20
Hydatids .. .. .	399	—	119	25	543
Hydronephrosis .. .. .	3	—	—	4	7
Natural death .. .. .	—	—	220	115	335
Necrosis .. .. .	12	—	—	—	12
Oedema .. .. .	80	—	48	—	128
Papiloma .. .. .	—	—	—	15	15
Pericarditis .. .. .	19	—	4	35	58
Peritonitis .. .. .	15	—	4	470	489
Pleurisy .. .. .	2,352	—	—	448	2,800
Pneumonia .. .. .	7	—	17	877	901
Putrifaction .. .. .	20	—	—	—	20
Rupture .. .. .	6	—	—	—	6
Septicaemia .. .. .	—	—	—	173	173
Telangiectasis .. .. .	24	—	—	—	24
Tuberculosis .. .. .	—	—	—	389	389

Total weight of meat condemned—7 tons 4 cwts 42 lbs.

Visits to slaughterhouses—3,434

**Disposal of Condemned Food**

Meat offal and tinned foods are disposed of by incineration at Lister Road Depot. Carcase meat, after staining, is sold to a firm of fertiliser manufacturers.

**Poultry Inspection**

There are no poultry processing premises within the Borough.

## SUPERVISION OF FOOD PREMISES

The following visits were made to food establishments during the year:—

General food shops .. .. .	834
Food preparing premises subject to registration ..	94
Canteens .. .. .	433
Restaurants .. .. .	319
Fried fish premises .. .. .	342
Butchers .. .. .	201
Licensed premises .. .. .	458
Licensed premises with catering facilities ..	156
Bakehouses .. .. .	196
Food vehicles and stalls .. .. .	360
Other food preparing premises .. .. .	93

As a result of these visits 471 notices have been served and 228 notices complied with. 50 premises were brought up to the standard required by the Food Hygiene Regulations.

Premises registered under Section 16 of the Food and Drugs Act, 1955:—

Premises registered for the preparation or manufacture of sausages only .. .. .	7
Premises registered for the preparation or manufacture of potted, pickled, or preserved food	32
Premises registered for the preparation or manufacture of sausages and potted, pickled or preserved food .. .. .	9

333 premises are registered under Section 16(1) (b) and are classified as follows:—

Premises registered for the manufacture of ice cream .. .. .	9
Premises registered for the sale and storage of ice cream .. .. .	342

During the year 280 visits were made by Inspectors to registered ice cream premises for inspection purposes or the procuring of samples for bacteriological examination or for chemical analysis.

## INSPECTION OF OTHER FOODS

During the year the District Inspectors have made 834 visits to food premises for the purpose of food inspection other than meat inspection.

### Food Condemned:

	Total		Total
Baked beans (tins) ..	267	Milk (tins) .. ..	1094
Baby Food (tins) ..	237	Milk (cases) .. ..	1
Baby foods (boxes) ..	166	Milk powder (lbs) ..	310
Baby food (jars) ..	48	Milk puddings (ass.)	20
Baby food (pkts) ..	3580	Mincemeat (jars) ..	11
Beetroot (jars) .. ..	3	Mint sauce .. ..	3
Bengers food (pkts) ..	1	Mousse (pkts) .. ..	508
Biscuits (pkts) .. ..	301	Mustard (jars) .. ..	2
Biscuits-dog-(lbs) ..	56	Nesquick (lbs) .. ..	1990
Blancmange (pkts) ..	1	Nesquick (cases) ..	79
Butter (lbs) .. ..	52	Nestea (lbs) .. ..	69
Buttermilk .. ..	16	Nestea (cases) .. ..	24
Cakes (pkts) .. ..	100	Noodles (pkts) .. ..	132
Cakes (frozen) .. ..	56	Olives .. ..	1
Cake Mix (pkts) .. ..	2	Pastry (pkts) .. ..	254
Cereal (pkts) .. ..	43	Pearl Barley (lbs) ..	24
Cheese (boxes) .. ..	208	Peanut butter .. ..	1
Cheese (lbs) .. ..	91	Pies (tins) .. ..	98
Chicken fillets (jars) ..	3	Pies (frozen) .. ..	101
Chickens (frozen) .. ..	6	Pie fillings .. ..	73
Chicken roll (tins) ..	11	Pickles (jars) .. ..	114
Chips (frozen) .. ..	317	Pork pies .. ..	302
Chips (tins) .. ..	5	Pork roll (tins) .. ..	4
Chocolate drink (lbs) ..	354	Potatoes (tins) .. ..	159
Coffee-instant-(lbs) ..	29	Potatoes (instant) ..	7
Cooked meat (lbs) .. ..	50	Potatoes-instant-(lbs)	57
Cooking oil (galls) ..	1	Potato salad .. ..	1
Cornish pasties (pkts)	25	Puddings (tins) .. ..	92
Cornish pasties (singles)	185	Puddings (pkts) .. ..	3
Cream (tins) .. ..	141	Ready dinners .. ..	5
Crisps (pkts) .. ..	41	Rice pudding (tins) ..	85
Crisps (boxes) .. ..	1	Salad cream .. ..	92
Curry (pkts) .. ..	3	Salt (boxes) .. ..	5
Custard powder (lbs) ..	2	Sauce (bottles) .. ..	131
Egg-frozen-(lbs) .. ..	56	Sausage rolls (single)	80
Fat (lbs) .. ..	1	Sausage rolls (pkts) ..	3152
Fish (tins) .. ..	135	Snack meals .. ..	305
Fish (frozen) .. ..	2177	Spaghetti .. ..	44
Fish and Chips (frozen)	39	Spreads (jars) .. ..	2128
Fish cakes .. ..	80	Soup (tins) .. ..	5797
Fish cakes (pkts) .. ..	25	Soup (pkts) .. ..	54
Flour (lbs) .. ..	11	Soup (cases) .. ..	9
Fruit (tins) .. ..	1833	Steak & Kid. Pies (fresh)	140
Fruit juice (cans) .. ..	226	Steak & kidney pies (pkts)	27
Fruit and nut roll .. ..	13	Steak & kid. pies (frozen)	110
Grills (tins) .. ..	1	Stewed steak (tins) ..	7

Ham roll (tins) .. ..	1	Stock tablets (ass. pkts)	18
Honey .. ..	1	Suet (pkts) .. ..	14
Horlicks .. ..	1	Sugar (lbs) .. ..	38
Ice cream (ass. pkts) ..	222	Sweets & choc. (pkts)	1993
Irish stew (tins) .. ..	34	Tomatoes (tins) ..	1065
Jam (jars) .. ..	31	Trifles (frozen) ..	46
Jelly .. ..	15	Unlabelled tins ..	17
Lentils (pkts) .. ..	2	Unlabelled tins (tea chests)	5
Lollies (fruit) .. ..	13	Veal Sorento .. ..	4
Macaroni (tins) .. ..	16	Vegetables (tins) ..	805
Macaroni cheese (tins)	11	Vegetables (frozen) ..	1656
Marmalade .. ..	3	Vinegar (bottles) ..	3
Meat (tins) .. ..	753	Yoghurt .. ..	308
Meat (frozen) .. ..	1122	Yorkshire pudding (pkts)	40

The actual samples taken during the year were as follows :—

<i>Commodity</i>	<i>In-formal</i>	<i>For-mal</i>	<i>Commodity</i>	<i>In-formal</i>	<i>For-mal</i>
Alcoholic drinks ..	17	—	Lollies .. ..	1	—
Baby Foods .. ..	2	—	Marzipan .. ..	1	—
Beer .. ..	2	—	Meat .. ..	46	—
Beverages .. ..	12	—	Milk (canned) .. ..	11	—
Biscuits .. ..	4	—	Non-brewed condiment	3	—
Bread .. ..	4	—	Pasta .. ..	1	—
Cereals .. ..	2	—	Pasties and Pies ..	12	—
Cheese .. ..	14	—	Pickles .. ..	4	—
Coconut .. ..	1	—	Preserves .. ..	3	—
Confectionery .. ..	11	—	Rice .. ..	1	—
Cooking oils .. ..	2	—	Sandwiches (pkts) ..	1	—
Cream .. ..	2	—	Sauces .. ..	6	—
Curry .. ..	4	—	Sausages .. ..	25	—
Custard Powders, etc.	1	—	Soft drinks .. ..	16	1
Drugs .. ..	57	—	Soup .. ..	4	—
Fish products .. ..	6	—	Spices .. ..	2	—
Fish (canned) .. ..	4	—	Spirits .. ..	—	6
Flour .. ..	2	—	Spreads .. ..	13	—
Food colours .. ..	5	—	Sweets .. ..	14	—
Food flavours .. ..	7	—	Treacle .. ..	1	—
Fruit (canned) .. ..	4	—	Vegetables (canned) ..	12	—
Fruit (dried) .. ..	2	—	Vegetables (dried) ..	2	—
Ice Cream .. ..	6	—	Yeast .. ..	1	—
Jellies .. ..	2	—	Yogurt .. ..	1	—

### SAMPLING FOR CHEMICAL ANALYSIS

During the year 7 formal samples and 332 informal samples of food and 57 samples of drugs were taken. Adverse reports were received on 10 samples, details of which are as follows:—

<i>Name of article</i>	<i>Result of Analysis</i>	<i>Remarks and action taken</i>
Rum and butter sweets	Made with butter but not rum.	Letter sent to Manufacturer
Cydrax	Contained deposit—yeast cells and mould hyphae.	Manufacturer contacted. Reply pending.
Fruit drink	No significant amount of fruit present.	Fruit drink withdrawn from sale.
Orange flavoured drink	Low in sugar content.	Letter sent to Manufacturer
Compound Thiamine tablets—strong.	Date after which tablets not to be used not declared	Pharmacist contacted.
Fruit drink	Low in sugar and fruit content.	Manufacturer contacted. Product re-labelled.
Mango squash	Contaminated with yeast and fermented.	Manufacturer contacted. Stocks withdrawn.
Grated cheese	Should be described as full fat hard cheese.	Retailer has re-labelled stocks.
Sausage—pork	Contained 58% total meat—should contain at least 65%.	Formal sample taken.
Steak and kidney pie	Contained 12% total meat—should contain at least 18.2%.	Formal sample taken.

#### MILK AND DAIRIES (GENERAL) REGULATIONS, 1959

#### MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1963

The number of premises registered under the Milk and Dairies Regulations at the end of the year 1970 was 7.

Dealers licences in force under the Milk (Special Designations) Regulations, 1963 were as follows:—

Pasteurised	..	..	..	..	60
Sterilised..	..	..	..	..	243
Ultra Heat Treated	..	..	..	..	6

At the end of 1970 there were 262 milk distributors registered with the Local Authority.

#### MILK SUPPLIES—BRUCELLA ABORTUS

No raw milk is sold in the Borough and sampling for this organism was therefore unnecessary.



**BACTERIOLOGICAL EXAMINATION OF MILK**

Designation	Total Number of samples taken	Methylene Blue Tests		Phosphatase Tests		Turbidity Tests		Colonies per 1 ml of milk
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	
Sterilised ..	17	—	—	—	—	17	—	—
U.H.T. ..	5	—	—	—	—	—	—	Nil (Satisfactory)
Pasteurised	47	47	—	47	—	—	—	—
Totals ..	69	47	—	47	—	17	—	—

**THE LIQUID EGG (PASTEURISATION) REGULATIONS, 1963**

There are no plants in the County Borough affected by these Regulations.

**FOOD AND DRUGS ACT, 1955  
LABELLING OF FOOD ORDER, 1953**

Three samples of food were found to be unsatisfactorily labelled. The Manufacturers in each case agreed to re-label their products.

**ICE CREAM AND ICED LOLLIPOPS**

During the year 219 samples of ice cream and 15 iced lollipops were submitted for bacteriological examination.

It must be noted that 14 samples were considered unsatisfactory. They were all investigated. Probable causes were (a) careless storage, (b) mis-use of sterilents, (c) faulty plant. Some of the samples were from a retailer who purchased his supplies from outside the Borough. The neighbouring Authority carried out an investigation of the plant and further samples were found to be satisfactory.

**BACTERIOLOGICAL EXAMINATION OF ICE CREAM**

Provisional Grade	Soft Ice Cream	Ice Cream Mix	Hard Ice Cream
1	78	67	49
2	2	9	4
3	3	3	1
4	2	—	1
Totals	85	79	55

## COMPLAINTS REGARDING UNFIT OR CONTAMINATED FOOD

252 visits were made during the year investigating 90 complaints of unfit food or food not of the nature, substance or quality demanded by the purchaser.

In 5 instances successful legal proceedings were instituted with the following results:—

1. A retailer fined £25 for sale of mouldy pork pie.
2. A retailer fined £30 for the sale of mouldy chicken pie.
3. Dairy fined £15 for selling bottle of pasteurised milk having larvae adhering to internal surfaces.
4. A retailer fined £30 for sale of mouldy apple pie.
5. Dairy fined £10 for sale of bottle of sterilised milk with mould growth attached to internal surface.

### Nature of Complaint

Moulds, sourness, rancidity, smell ..	30
Insects .. .. .	10
Various objects .. .. .	11
Etching or leaking cans .. .. .	5
Oiled or dirty dough in bread ..	4
Dirty milk bottle .. .. .	4
Insufficient evidence or complaint not justified .. .. .	26

Faulty stock rotation by retailers is still the greatest single cause of complaint leading to mould growth etc., which in the case of wrapped goods is not noticed at time of sale.

Various objects were found in food, some of which are itemised below:—

Selection of objects found:—

1. Child's rubber ball in can of meat.
2. Rolled up paper in bottle of milk.
3. Bandage in tin of apricots (Canner no longer in business).
4. Piece of string in black pudding.

**BACTERIOLOGICAL EXAMINATION OF OTHER FOODS**

Sample	No. Taken	No. Unsatisfactory
Meat Pies .. .. .	10	—
Sliced meats .. .. .	29	3
Flour confectionery .. .. .	4	—
Fresh cream .. .. .	6	1
Synthetic cream .. .. .	44	1
Milk .. .. .	69	—

In the cases of the unsatisfactory samples investigation into the handling and storage of the products were undertaken.

**FOOD AND DRUGS ACT, 1955****FOOD HYGIENE (GENERAL) REGULATIONS, 1960**

The number of premises in the Borough affected by these regulations are as follows:—

<i>Premises</i>	<i>Number</i>	<i>Wash hand basins provided in accordance with Regulation 17</i>	<i>Premises to which Regulation 19 apply</i>	<i>Premises provided with sinks in accordance with Regulation 19</i>
Fried Fish .. .. .	73	73	73	73
Restaurants, Cafes and Snack Bars .. .. .	54	54	54	54
Licensed premises—full catering .. .. .	29	29	29	29
Licensed premises only .. .. .	334	334	334	334
Large canteens and clubs	140	140	140	140
Registered ice cream manufacturers .. .. .	7	7	7	7
Registered sausage manufacturers .. .. .	8	8	8	8
Registered sausage and potted and preserved meat manufacturers .. .. .	8	8	8	8
Registered potted, pickled or preserved food manufacturers .. .. .	34	34	34	34
Bakehouses .. .. .	12	12	12	12
Slaughterhouses .. .. .	10	10	10	10
General food shops .. .. .	321	321	321	321
Butchers .. .. .	132	132	132	132
Grocers .. .. .	90	90	90	90
Greengrocers .. .. .	80	80	80	80
Wet fish shops .. .. .	14	14	14	14
Confectioners .. .. .	39	39	39	39

## HOUSING

The position at the end of the year in respect of those dwellings dealt with in Clearance Areas was as follows:—

1. Outstanding from the representation stage:—

Rosehill, Quarry Bank ..	1 area involving	5 unfit houses
Vicarage Road West, Coseley	1 area involving	7 unfit houses
High Street, Wallheath ..	1 area involving	4 unfit houses
Brockmoor, Brierley Hill ..	5 areas involving	54 unfit houses
Gornal Wood, Lower Gornal	7 areas involving	119 unfit houses

2. The Council made the following Orders during 1970:—

The Ridgeway, Sedgley Clearance Order	involving 9 unfit houses
Pearson Street, Brierley Hill Compulsory Purchase Order	involving 4 unfit houses
Fenton Street, Brierley Hill five Compulsory Purchase Orders	involving 50 unfit houses

3. The following Orders were confirmed during 1970 with the results as shown:—

	Represented	Confirmed
Bank Street, Brierley Hill Compulsory Purchase Order .. ..	19	19
West Street, Lower Gornal Compulsory Purchase Order .. ..	7	7
The Ridgeway, Sedgley Clearance Order .. .. .	9	9

### Demolitions

During the year 140 unfit properties in Clearance Orders or Compulsory Purchase Orders were demolished. A further 45 fit houses in Compulsory Purchase Orders and 173 properties subject to Demolition Orders were also demolished making a total of 358 properties demolished during the year.

### Rehousing

945 lettings became available during the year. This figure excludes any properties utilised for exchange or transfer purposes.

The lettings can be classified as follows:—

New houses .. .. .	180
Re-lets .. .. .	765

Of this total 204 houses were allocated to families living in unfit properties of all categories. A further 10 families were rehoused from fit properties in Compulsory Purchase Orders, making a total of 214 families rehoused for Clearance purposes.

**Individually Unfit properties**

Number of Demolition Orders made (Section 17)	..	62
Number of Closing Orders made (Section 17)	..	13
Number of Closing Orders made (Section 18)	..	5
Number of houses demolished pursuant to Demolition Orders..	.. .. .. .	173
Number of houses made fit and Orders determined	..	6
Number of persons displaced :—		
(a) Individuals	.. .. .	714
(b) Families	.. .. .	295

**Housing Visits**

The following visits were made during the year :—

Clearance Area inspections	.. .. .	56
Individually unfit inspections	.. .. .	77
Clearance Area re-inspections	.. .. .	126
Individually unfit re-inspections	.. .. .	92
General inspections	.. .. .	339
Improvement Area visits	.. .. .	310
Improvement grant visits	.. .. .	1,702
Housing visits for medical reasons	.. .. .	20
Dangerous structures	.. .. .	15
Miscellaneous	.. .. .	866
Mapping visits	.. .. .	39
Rent Act visits	.. .. .	9
Houses in mortgage to the Corporation	.. .. .	310
Visits where no access gained	.. .. .	488

**Land Charge Searches**

During the year enquiries were made with regard to 2,618 applications for official searches.

**Housing Act, 1964****Improvement of houses by Improvement Area procedure**

Four Areas have been declared under the above Act, and routine work is still being carried out to secure compliance with Immediate Improvement notices. Checks are also made on properties affected by Suspended Notices and in several instances a change of occupancy has been found necessitating service of the Final notice.

No General Improvement Areas have yet been declared.

**Improvement Grants****STANDARD**

	Owner- occupiers Standard 5 point	Tenanted Standard 5 point
1. Number of applications approved..	43	12
2. Number of dwellings improved ..	47	15
3. Amount paid in grants ..	£5,730 4. 7d.	£3,203. 1. 0d.
4. Average grant per house ..	121 19. 0d.	213. 10. 9d.
5. Number of amenities provided :—		
(a) fixed bath .. .. .	20	12
(b) shower .. .. .	—	—
(c) wash hand basin .. ..	15	14
(d) Hot water supply (to any fittings) .. .. .	45	14
(e) water closet—within dwelling or accessible from dwelling	42	15
(f) sinks .. .. .	3	5

**DISCRETIONARY**

	Owner- Occupiers	Tenanted
1. Number of applications approved..	70	26
2. Number of dwellings improved ..	33	37
3. Amount paid in grants ..	£13,139. 1. 7d.	£19,386 15. 9d.
4. Average grant per house ..	£398. 3s. 9d.	£523. 19s. 3d.

**Dwellings outside Improvement Areas**

1. Number of representations made since 1966 .. .. .	165
2. Representations made by tenants during the year ..	3
3. Preliminary notices served during the year .. ..	3
4. Undertakings accepted during the year .. .. .	Nil
5. Immediate Improvement notices served during the year	5
6. Final notices served during the year .. .. .	2
7. Such dwellings improved during the year :—	
(a) full standard .. .. .	21
(b) reduced standard .. .. .	Nil

## HOUSES IN MULTIPLE OCCUPATION

It can never be said that there has been spectacular achievement when dealing with houses in multiple occupation. Rather it is a battle to contain such houses to the reasonable number we have in Dudley, and to prevent the nucleus of poorly managed properties from falling into a state where control by the Local Authority becomes the only solution. There are faults on both sides, wilful damage by some tenants in an endeavour to highlight their unsatisfactory living condition, and minor harassments by the Landlord in an effort to force unsatisfactory tenants to other accommodation. Fortunately for the tenants there is the protection offered by the Rent Tribunals, but in my experience there are a limited number of cases where the owner should have equal protection.

The table below sets out in detail action taken during the year so far as it affects houses in multiple occupation :—

1. Total number of houses known to be in multiple occupation .. .. .	130
2. Number of houses estimated to need attention under Housing Act, 1961 .. .. .	110
3. Number of houses on which notices of Intention have been served for—	
Directions on overcrowding (Section 19) .. .. .	16
4. Number of houses on which have been made—	
(a) Management Orders .. .. .	3
(b) Directions on overcrowding .. .. .	11
5. Number of notices served—	
(a) to make good neglect of proper standards of management (Section 14) .. .. .	2
(b) to require additional services of facilities (Section 15) .. .. .	Nil
(c) where work has been carried out in default .. .. .	Nil
6. Number of prosecutions in respect of—	
(a) management .. .. .	Nil
(b) directions .. .. .	Nil
(c) overcrowding (Section 90 Housing Act, 1969) .. .. .	Nil
7. Number of control orders made (Housing Act, 1969)	Nil
8. Number of control orders terminated .. .. .	Nil
9. Number of notices under Section 90 (Housing Act, 1957)	3

101 inspections and 482 re-inspections were made during the year.

## **SANITARY ADMINISTRATION**

### **Particulars of Inspection**

During the year 469 inspections and 473 re-inspections were made under the Public Health Act, 1936.

The number of preliminary notices served was 86, and the number complied with was 58. Statutory notices numbered 24 and 29 were complied with.

### **DOMESTIC WATER SUPPLY**

The water supply to the County Borough of Dudley is derived from pumping stations situated outside the boundaries of the Authority. Chlorination is practised in all cases.

During 1970, 1,013 samples of chlorinated water were examined, 1,012 of which were free from coliform bacteria.

258 samples of raw water were also examined, 257 of which were free from coliform bacteria.

101 samples of water prior to treatment at Hampton Loade gave an average coliform bacteria content of 135 per ml. and 52 from Sandfields 29 per ml.

None of the supplying stations contain any significant amount of fluoride. The fluoride content at Coseley in 1970 was 0.06 p.p.m., at Dudley Nil, and at Netherton 0.01 p.p.m.

Samples were examined within the County Borough from:—

- Cawney Hill Reservoirs Nos. 1 and 2
- Sedgley Tanks Nos. 1 and 2
- Sedgley Reservoir
- Shavers End Reservoirs Nos. 1 and 2
- Shavers End Re-pumping Station
- Springsmire Reservoir
- Turners Hill Tank
- The Library, Brierley Hill
- Police Station, Coseley
- 44, Abberley Street, Dudley
- 12, Oak Street, Kingswinford
- Waterman's House, Netherton
- Waterman's House, Sedgley

93 samples from the reservoirs and tanks and 11 from Shavers End re-pumping station were all free from coliform bacteria.

11 tap samples from Brierley Hill, 12 from Coseley, 15 from Dudley, 11 from Kingswinford, 12 from Netherton and 11 from Sedgley were all free from coliform bacteria.

The waters are not liable to plumbo-solvency, all the tap samples being free from any significant amount of lead.



## MAINS WATER SUPPLY

24 samples of mains water have been taken for analysis. All were satisfactory chemically and bacteriologically.

### WATER SUPPLY

No. of premises (excluding Council Houses) having a private water supply (estimated) .. ..	47,288
Council Houses .. .. .	27,260
No. of premises having common water supplies (estimated) .. .. .	650

## SEWERAGE AND SEWAGE DISPOSAL

The construction of the Roundhill Waste Water Purification Plant is now nearing completion, and it will be operative in August/September, 1971. The cost of the scheme is approximately £1.5 million and the works will deal with a dry weather flow of  $3\frac{3}{4}$  m.g.d. and a maximum flow of  $22\frac{1}{2}$  m.g.d. This works will treat sewage and trade waste from the Brierley Hill, Pensnett, Kingswinford, Wall Heath and Wordsley parts of Dudley, together with most of the Borough of Stourbridge.

The Drainage Authority have submitted to the Ministry of the Environment several other capital schemes including the following-

- (a) The 100% extension to the Freehold Works at Lye;
- (b) Several large trunk sewers in the Stour valley between Dunns Bank and Lye;
- (c) Twin pumping mains from Freehold Works to the Roundhill Works;
- (d) A new and modern sludge treatment plant at the Roundhill Works.

These latter schemes are estimated to cost £3.2 millions and work should be commenced on them early in 1972.

A new 18" and 10" diameter twin syphon sewer is being constructed in the Straits Area of Lower Gornal to relieve the surcharge conditions in the existing sewer. The works are currently under construction and will cost £34,420. This scheme will relieve the flooding and pollution of Bobs Brook during storm conditions.

The Drainage Authority have instructed consulting engineers to prepare a comprehensive report on the combined western drainage area, which includes Lower Gornal, central Dudley, the former Brierley Hill area and the Borough of Stourbridge. The report will include recommendations on capital works for trunk sewers and sewage treatment works required up to the year 2000. It is expected that this report will be received in July or August, 1971.

**INFECTIOUS DISEASE**

640 visits were made during the year.

**RODENT CONTROL**

Two sewer treatments were carried out during the year. The following is a table of work carried out under this heading during the year:—

	Type of property	
	Non-Agricultural	Agricultural
1. Number of properties in district ..	70,961	18
2. (a) Total number of properties (including nearby premises) inspected following notification	1,639	—
(b) Number infested by (i) rats	1,064	—
(ii) Mice	282	—
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification .. .. .	—	—
(b) Number infested by (i) Rats	—	—
(ii) Mice	—	—

**FACTORIES ACT, 1961****PART 1 OF THE ACT**

1.—Inspections for purposes of provisions as to Health (including inspections made by Public Health Inspectors).

<i>Premises</i> (1)	<i>Number on register</i> (2)	<i>Number of</i>		
		<i>Inspections</i> (3)	<i>Written notices</i> (4)	<i>Occupiers prosecuted</i> (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .. ..	99	5	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. ..	566	120	31	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises) .. .. .	3	—	—	—
Total .. ..	668	125	31	—

2.—Cases in which DEFECTS were found—

<i>Particulars</i> (1)	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i> (6)
	<i>Found</i> (2)	<i>Remedied</i> (3)	<i>Referred</i>		
			<i>To H.M. Inspector</i> (4)	<i>by H.M. Inspector</i> (5)	
Want of cleanliness (S.1) ..	5	—	—	—	—
Overcrowding (S.2) .. ..	—	—	—	—	—
Unreasonable temperature (S.3) .. .. .	—	—	—	—	—
Inadequate ventilation (S.4)	2	—	—	—	—
Ineffective drainage of floors (S.6) .. .. .	—	—	—	—	—
Sanitary conveniences (S.7)					
(a) Insufficient .. ..	1	—	—	2	—
(b) Unsuitable or defective ..	7	—	—	1	—
(c) Not separate for sexes ..	—	—	—	1	—
Other offences against the Act (not including offences relating to outwork) ..	—	—	—	—	—
Total .. ..	15	—	—	4	—

**PART VIII OF THE ACT****Outwork****(Sections 133 and 134)**

<i>Nature of Work</i> (1)	<i>No. of outworkers in August list required by Section 133(1) (c)</i> (2)	<i>No. of cases of default in sending lists to the Council</i> (3)	<i>No. of prosecutions for failure to supply lists</i> (4)	<i>No. of instances of work in unwholesome premises</i> (5)	<i>Notices served</i> (6)	<i>Prosecutions</i> (7)
Carding of buttons etc.	151	—	—	—	—	—

## SMOKE CONTROL ORDERS

During the year three Orders became operative and at the end of the year 6,822 acres involving 32,043 houses within the Borough were covered by Smoke Control Orders.

The following visits were made during 1970 to Smoke Control Areas or proposed areas:—

Number of visits re survey	..	..	..	..	60
Number of visits in confirmed areas	..	..	..	..	1,455
Number of visits in operative areas	..	..	..	..	224
Number of visits to advise householders	..	..	..	..	322
Adaptations completed..	..	..	..	..	670

Progress towards the completion of smoke control in the Borough was interrupted during the year by the decision to defer the operative date of two proposed areas until October, 1972. These areas surveyed in 1969 are ready for submission to the Ministry for confirmation at the appropriate time, and in consequence very few survey visits for other areas were carried out during the year.

Over one half of the dwellings in the Borough are now included in Smoke Control Areas which have been introduced since the Clean Air Act, 1956 first enabled Local Authorities to create them. The number of houses which are capable of complying with Orders when introduced is of course much higher due to recent demands for more efficient methods of home heating and in particular the rapid spread of piped fuels. In spite of the major changes in domestic heating arrangements, however, it has recently been estimated that 75% of the air pollution in this country may be attributed to this source and much remains to be done. Recent surveys of houses for the purposes of establishing smoke control areas indicate that over 50% of houses in the private sector already burn smokeless fuels, and although the figure for Council owned dwellings is lower, it is still very significant.

The clearance of older homes also contributes to the reduction in domestic air pollution, since new homes built to rehouse displaced families must be capable of burning smokeless fuel and often piped fuels are used.

During the year widespread anticipated shortages of solid smokeless fuel were forecast, and some Local Authorities suspended existing smoke control areas and deferred the introduction of new ones. The situation in Dudley was kept constantly under review during the latter part of the year, and close consultation with local representatives of the solid smokeless fuel industry was maintained. Assurances were given by the Chairman of the Health Committee at a meeting with solid fuel merchants that the Council would act quickly to prevent hardship in the event of shortages should they arise locally and the Ministry of Housing

and Local Government made emergency plans for dealing with requests from Local Authorities for the suspension of Orders. The Government took steps to increase the supply of solid smokeless fuel including the importation of supplies and the conversion of some Local Authority installations which previously used solid smokeless fuel. At the end of the year none of the operative orders in the Borough had been suspended, and the mild weather which heralded winter made it unlikely that this drastic step would need to be taken. It was perhaps difficult to understand why during a period of anticipated shortage there appeared in the mass media, advertisements which not only recommended the installation of heating systems designed to burn solid smokeless fuel, but also offered convenient credit terms for their purchase.

The delivery of coal in smoke control areas persists in spite of the changes introduced by the Clean Air Act, 1968, and no doubt further contraventions will become apparent. The solid fuel trade in general is co-operative, although some merchants possibly not members of the trade associations, no doubt profit from the reluctance of bone fide members to front the law. There was clear evidence that transport operators from outside the Borough were bringing in supplies of fuel for sale door to door in smoke control areas, particularly at week-ends, and no doubt supplementing their regular income by diverting sales away from merchants only willing to offer solid smokeless fuel. Rigorous enforcement and plentiful supplies of solid smokeless fuel will no doubt deter these people, provided that suitable penalties are incurred on conviction.

### **INDUSTRIAL AIR POLLUTION**

Industry has made great strides towards the elimination of pollution from fuel burning installations over the past decade, and the smoking chimney is now the exception rather than the rule, except in certain industries which still present technical problems.

Recently proposed legislative changes, and the introduction of the Clean Air Act, 1968 indicate a shift of emphasis during the next decade away from visible pollution from smoke towards a substantial reduction in the emission of grit and dust. Grit and dust emission often results from industrial processes which do not involve the combustion of fuel and the majority of visits carried out during this year confirm this pattern. Again the trend in industrial heating away from solid fuels no doubt helps in this connection particularly in the smaller industrial units. Where solid fuel is used in large installations grit arrestation equipment of fairly high efficiencies and capital cost are normally employed.

Capital investment in industry has been depressed in recent years, and unhappily this has coincided with a period when conservation and pollution have become major issues. On the other hand the merging into larger industrial units of small firms often results in old and troublesome plants becoming obsolete. The newer industries products of technological change, are often

less likely to create visible pollution, and do benefit from past research and experience. The restrictions on development in this region must reduce air pollution in total, but it may be that the price is too high to pay.

In spite of difficulties local industry is normally willing to co-operate in remedying complaints which are brought to their attention, and in general relationships between officers of the department and managements are good. Persuasion, co-operation and understanding rather than law enforcement still produces more satisfactory results, and it was not found necessary to resort to legal action in terms of industrial pollution during the year.

As expected, the changes which resulted from the introduction of the Clean Air Act, 1968 in relation to the emission of dark smoke from trade or industrial premises other than from chimneys was noticeable, and there were nineteen recorded contraventions of the relevant provisions. The greatest impact has been felt in the scrap metal trade and the deliberate firing of motor vehicles for metal recovery is now prohibited. This has produced problems for the small trader in particular, but there are clear indications of a willingness to co-operate in preventing smoke emission from this source. Generally they are not organised in trade associations so that the changes have to be explained individually often at the time a contravention has been recorded. It is perhaps more of a problem in the West Midlands than in other areas, because of the proximity of large numbers of foundries and steelworks for whom recovered scrap is a basic raw material.

There are twenty registered premises controlled solely now by the Alkali Inspectorate under the Alkali Works Order, 1966. The majority of these works are ceramic works, but in addition there are two premises registered for the manufacture of steel, three ironworks, and two aluminium works. One premises used for the recovery of aluminium from greasy scrap, a scheduled process, was referred to the local inspector during the year in consequence of industrial surveys carried out by the department. Complaints in respect of scheduled processes which arise from time to time are referred to the District Alkali Inspector, and close liaison is maintained with the local inspector responsible for those works in the Borough.

712 observations were made of smoke from industrial chimneys as a consequence of which 154 visits were made to various premises. In addition, 214 visits were made with regard to the emission of grit and dust.

### **CHIMNEY HEIGHTS**

53 notifications of intention to install new furnaces were received during the year.

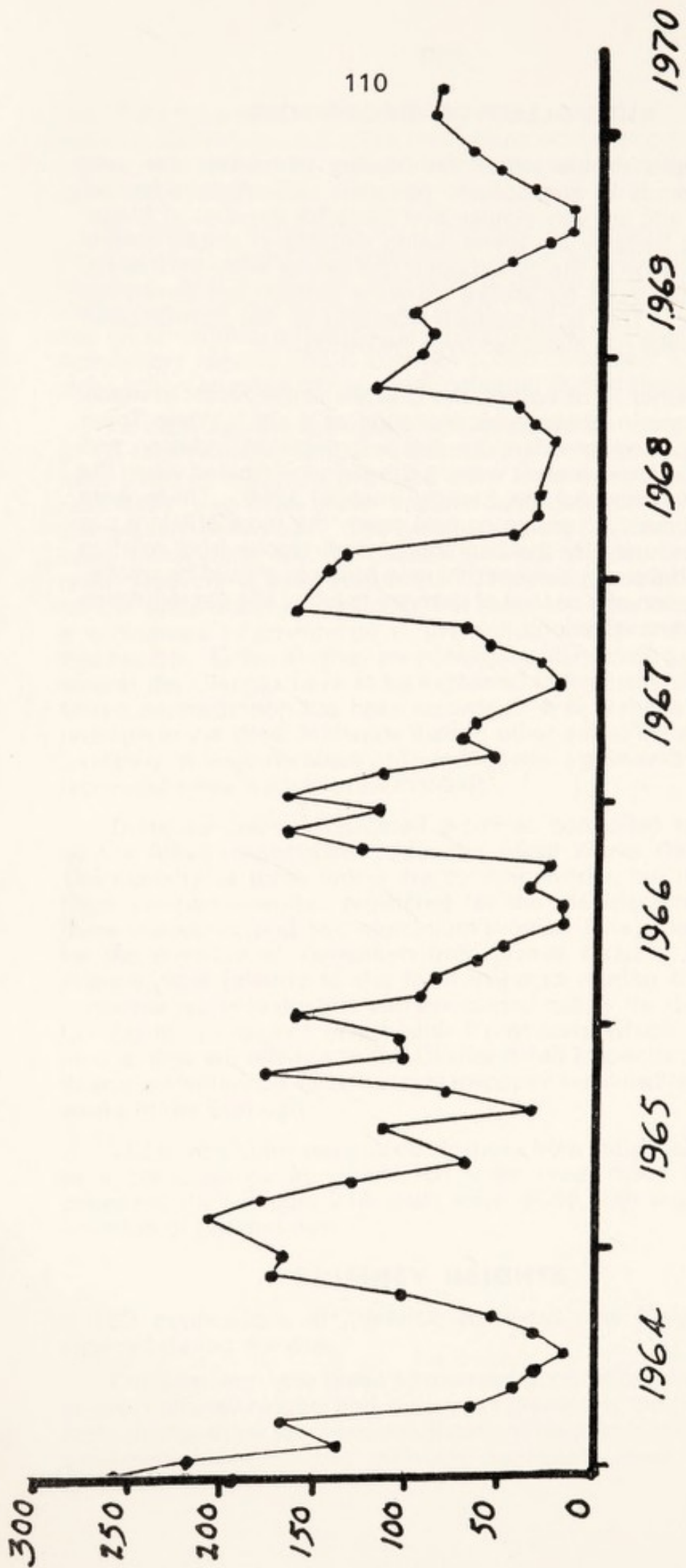
Consideration was given to fourteen applications for approval of new chimney heights and eight were granted without modification. In the other six cases modifications were requested, and on agreement being reached with the applicants these were also approved.

## AIR POLLUTION RECORDING

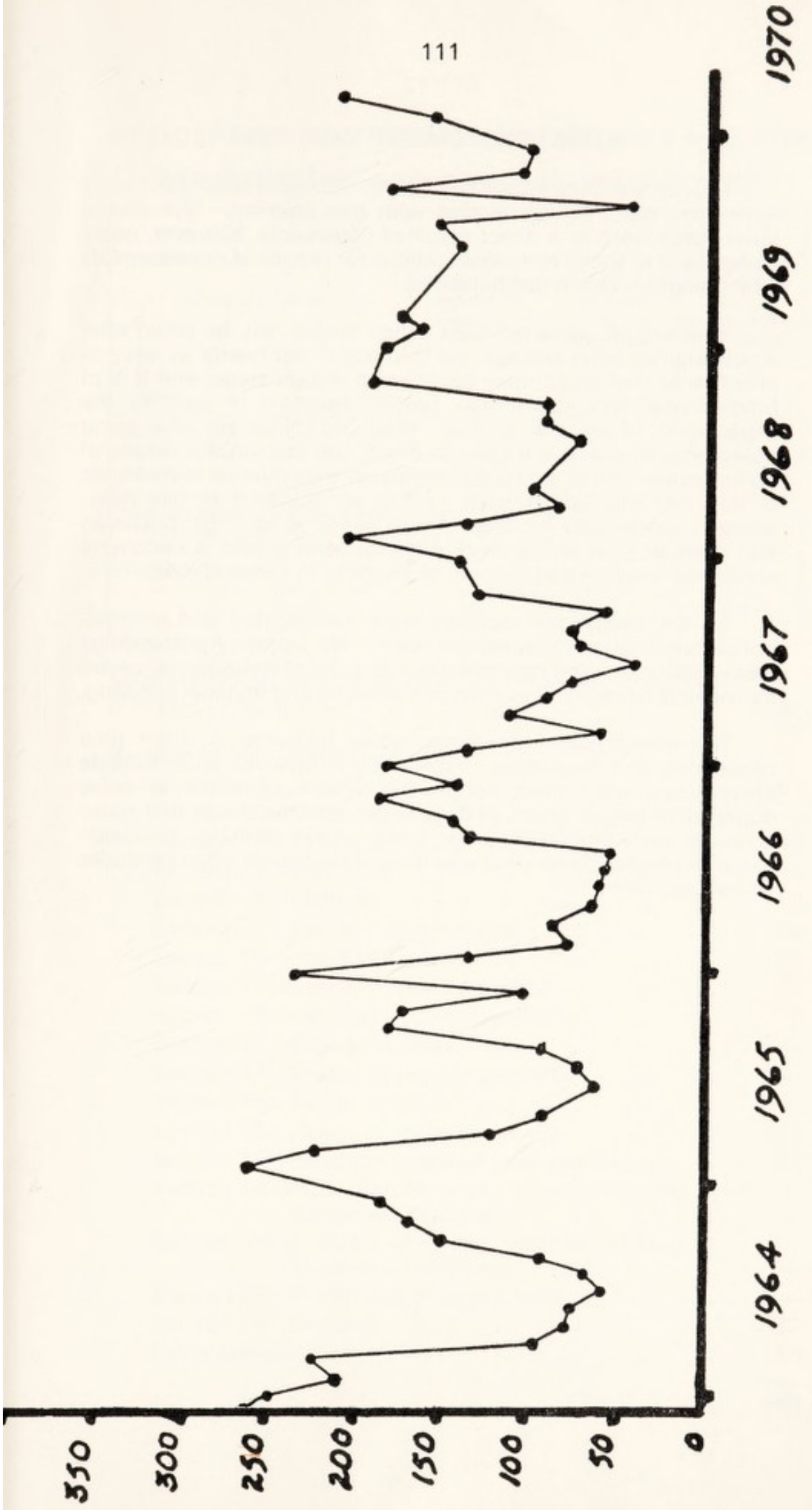
The graphs shown are of the Coseley (Roseville) site, and show the trends in atmospheric pollution. The figures for the Brierley Hill site are very similar, and those for the sites at Kingswinford and Sedgley are lower, being situated in smoke control areas on the edge of the conurbation and further away from heavy industry. The trend for smoke shows a gradual but consistent improvement. This is particularly pleasing as the consumption of fuel generally has increased over the period.

The weather is, of course, the greatest single factor in determining change in atmospheric pollution at a site. While Town Planning has had its effect by the re-location of industry, and causes for the improvement were in the main anticipated when the Clean Air Act reached the Statute Book in 1956. These were the establishment of smoke control areas, the more efficient use of fuel by industry by the banning of dark smoke from existing furnaces and the requirement that new furnaces should be smokeless in operation, the control of chimney heights, and the regulation of grit and dust emissions.





SMOKE CONCENTRATION - MICROGRAMS / C.C.M.



SULPHUR DIOXIDE CONCENTRATION - MICROGRAMS Co/m.

**NOISE ABATEMENT ACT, 1960**

Twenty-six complaints have been received, and 656 visits have been made in connection with this problem. Not all the visits made were as a direct result of complaints, however, many being made to frame recommendations for proposed developments which might create noise nuisance.

In nearly all cases remedial action which may be taken after a building has been erected and is in use is not nearly as easy or effective as that which may be taken at design stage, and it is of fundamental importance that proper attention is paid to the suppression of noise at source. Many machines are now being designed with noise reduction in mind, and less noisier means of doing certain works are being employed, e.g., the use of hydraulic or vibratory pile driving and modern air powered mobile compressors acoustically housed. Much needs to be done, however, and there is clear evidence that the general public is becoming somewhat intolerant at the rate of progress in certain fields.

All the complaints received were investigated and informal notices were served in nineteen cases. No statutory proceedings were instituted. The most frequent sources of noise nuisance are mechanical extraction systems, compressors and material handling.

The investigation of alleged noise nuisance is often time consuming and frustrating. Frequently it involves work outside office hours since most people are more susceptible to noise during their leisure hours, and there can be little doubt that noise is now a major problem in urban areas. As in all things standards rise with progress, and what was formerly accepted often produces complaints now.

**OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963**  
**REGISTRATION AND GENERAL INSPECTIONS**

<i>Class of premises</i>	<i>No. of premises registered during the year</i>	<i>Number of registered premises at end of year</i>	<i>Number of premises receiving a general inspection during the year</i>
Offices .. .. .	22	324	51
Retail shops .. .. .	9	804	414
Wholesale shops, warehouses ..	6	55	15
Catering establishments open to the public, canteens .. ..	1	291	225
Fuel storage depots .. ..	—	6	1
Totals.. ..	38	1,480	706

Total number of visits of all kinds by Inspectors to registered premises under the Act .. .. . 831

Number of contraventions found:—

Section 4—Cleanliness .. .. .	61
Section 5—Overcrowding .. .. .	—
Section 6—Temperature .. .. .	55
Section 7—Ventilation .. .. .	8
Section 8—Lighting .. .. .	18
Section 9—Sanitary conveniences .. .. .	87
Section 10—Washing facilities .. .. .	66
Section 11—Supply of drinking water .. .. .	—
Section 12—Clothing accommodation .. .. .	2
Section 13—Sitting facilities .. .. .	—
Section 14—Seats (Sedentary workers) .. .. .	—
Section 15—Eating facilities .. .. .	—
Section 16—Floors, passage and stairs.. .. .	117
Section 17—Fencing—exposed parts machinery .. .. .	11
Section 18—Protection of young persons working at dangerous machinery .. .. .	—
Section 19—Training of young persons working at dangerous machinery .. .. .	—
Section 23—Prohibition of heavy work .. .. .	—
Section 24—First Aid .. .. .	83
Other matters .. .. .	50
Total .. .. .	558

## Reported accidents

Workplace	Number reported		Total number investigated	Action recommended			
	Fatal	Non-fatal		Prosecution	Formal warning	In-formal advice	No action
Offices .. .. .	—	—	—	—	—	—	—
Retail Shops .. .. .	—	24	4	—	—	—	—
Wholesale shops, warehouses .. .. .	—	1	—	—	—	—	—
Catering establishments open to public, canteens .. .. .	—	3	—	—	—	—	—
Fuel storage depots .. .. .	—	—	—	—	—	—	—
Total .. .. .	—	28	4	—	—	—	—

## Analysis of reported accidents

	Offices	Retail shops	Wholesale warehouses	Catering establishments open to public, canteens	Fuel storage depots
Machinery .. .. .	—	4	—	—	—
Transport .. .. .	—	—	—	—	—
Falls of persons .. .. .	—	11	1	3	—
Stepping on or striking against object or person .. .. .	—	—	—	—	—
Handling goods .. .. .	—	2	—	—	—
Struck by falling object .. .. .	—	4	—	—	—
Fires and explosions	—	—	—	—	—
Electricity .. .. .	—	—	—	—	—
Use of hand tools .. .. .	—	3	—	—	—
Not otherwise specified .. .. .	—	—	—	—	—

**CARAVAN SITES AND CONTROL OF  
DEVELOPMENT ACT, 1960**

	Privately owned sites Residential
Number of site licences operating as to 31st December, 1970:—	
(a) individual .. .. .	5
(b) multiple (more than 3) .. .. .	2
Total number of caravans .. .. .	54
Number of prosecutions—Section 1 (i.e. unauthorised sites) .. .. .	—
Number of appeals to Courts against site licence conditions .. .. .	—
In respect of separate licence conditions— the number of—	
(a) variations .. .. .	—
(b) cancellations.. .. .	—
Number of contraventions—Section 9—	
(a) remedied informally .. .. .	—
(b) prosecutions.. .. .	—
(c) convictions .. .. .	—
Number of sites made subject to conditions for reducing caravans during the year .. .. .	—
Number of sites made subject to Section 20 (termination of use of existing site).. .. .	—

**MISCELLANEOUS**

**SLAUGHTER OF ANIMALS ACT**

The number of licensed slaughtermen at the end of the year was 49.

**PHARMACY AND POISONS ACT**

3 applications for entry on the poisons list were made.

**PET ANIMALS ACT, 1951**

9 premises are licensed under this enactment.

**DISEASES OF ANIMALS ACTS**

Fortunately little or no action was necessary during the year.

### **HAIRDRESSERS**

37 inspections of hairdressers premises were carried out during the year.

### **FERTILISERS AND FEEDING STUFFS ACT, 1926**

23 samples of fertilisers and 5 samples of feeding stuffs have been taken for analysis. 4 samples were reported as not correct within the limits of variation. No legal action was taken, but manufacturers were contacted in order that their processes could be checked.

### **SWIMMING BATHS**

Within the County Borough are 3 public swimming baths controlled by the Local Authority, and one privately owned outdoor swimming bath. There are also 9 school swimming baths. All are regularly visited for the purpose of estimating clarity, testing Ph value, and for testing chlorine content. Throughout the year they have operated smoothly, and regular sampling for bacteriological examination has shown that all the 122 samples taken were satisfactory.





