

[Report 1971] / Medical Officer of Health, Dudley County Borough.

Contributors

Dudley (England). County Borough Council.

Publication/Creation

1971

Persistent URL

<https://wellcomecollection.org/works/ep72ph7b>

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.

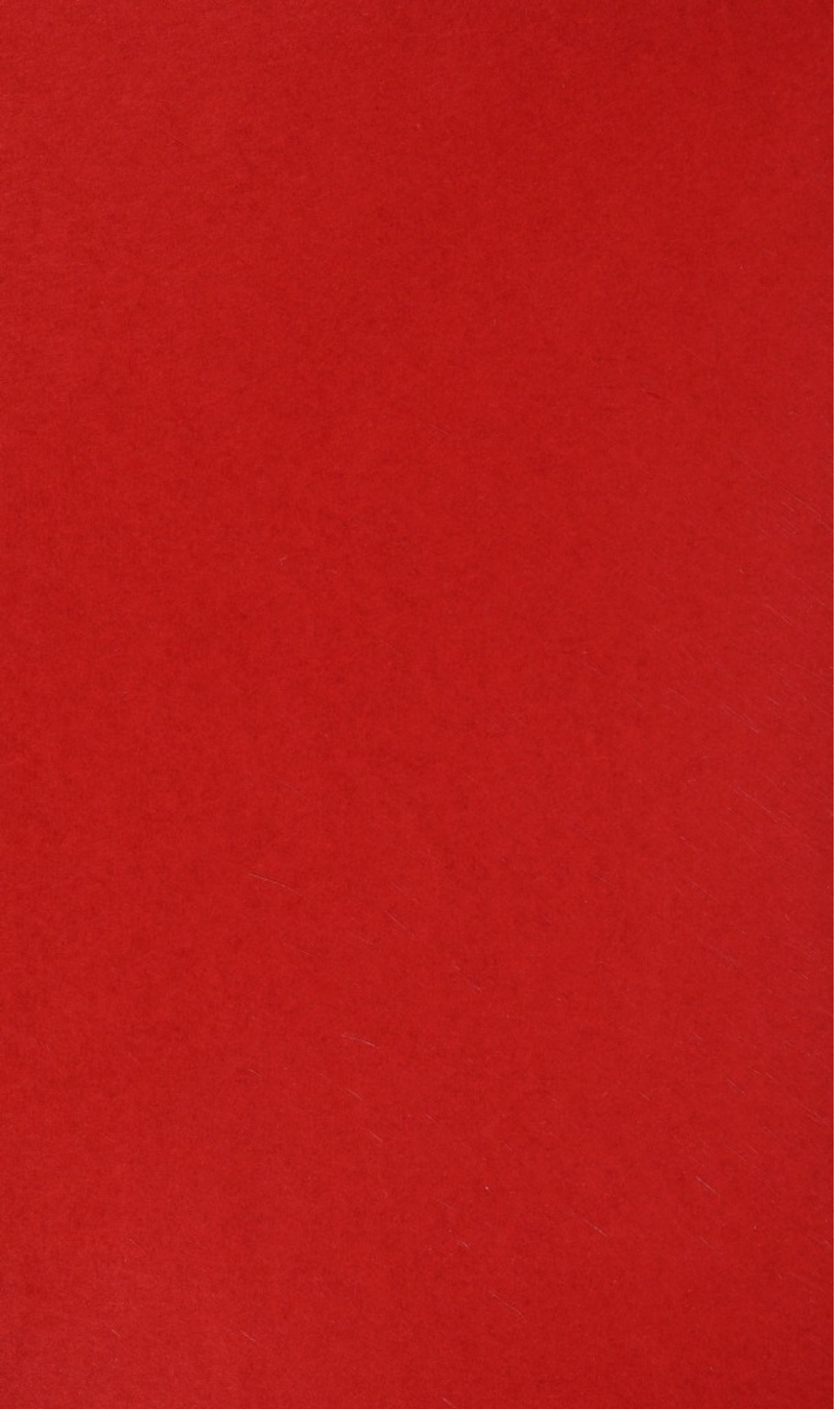


Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>



County Borough of Dudley

HEALTH SERVICES 1971





COUNTY BOROUGH OF DUDLEY

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

PRINCIPAL SCHOOL MEDICAL OFFICER

PRINCIPAL CONTENTS

Constitution of Committees	3
Staff	4
Vital Statistics	9
Congenital Malformations	12
Infectious Disease	13
Sexually Transmitted Disease.. .. .	16
National Health Service Act 1946—	
Care of Mothers and Young Children	17
Nursing Services	21
Midwifery	22
Health Visiting	25
Home Nursing Service	28
Vaccination and Immunisation	31
Ambulance Service	33
Prevention of Illness, Care and After-Care	35
Health Education	35
Chiropody	35
Cervical Cytology	36
Housing on Medical Grounds	37
Medical Examinations of Staff	38
Chief Veterinary Officer's Report	39
School Health Service	42
Chief Public Health Inspector's Report	80
Housing	94
Water	98
Factories	101
Noise Abatement	107

Constitution of Committees for the year 1971/72

HEALTH COMMITTEE

Councillor Mrs. M. J. Pargeter (Chairman)

Councillor J. D. Skelding (Vice-Chairman)

The Mayor

Councillor A. Hadlington

The Deputy Mayor

Councillor Mrs. C. McNichol

Councillor R. E. Abbiss

Councillor Miss M. E. Moss

Councillor G. W. Atkins

Councillor F. Overton

Councillor J. W. Beech

Councillor R. A. Pendleton

Councillor A. Crowe

Councillor W. T. Smith

Councillor S. Fairfold

Councillor W. H. Webb

Councillor Mrs. S. M. Griffiths

Councillor E. H. Williams

(Members of the Council)

Dr. R. J. H. Guy

Dr. F. G. Lewis

Reverend C. Elliott

Mrs. D. Crump

}

Appointed by Dudley
Executive Council

Appointed by Local Hospital
Management Committee

Dr. R. J. H. Guy

Appointed by Dudley Local
Medical Committee

Mrs. P. Crowe

and

Mrs. A. Hughes

(Co-opted Members)

(EDUCATION) SCHOOLS AND SPECIAL SERVICES

SUB-COMMITTEE

The Mayor

Councillor Mrs. G. Homer

The Deputy Mayor

Councillor J. Jones

Alderman D. Harty

Councillor A. R. Pearson

Councillor G. W. Atkins

Councillor R. A. Pendleton

Councillor D. M. Gaunt

Councillor W. T. Smith

Councillor J. D. Davies

Councillor Mrs. M. J. Wall

Councillor D. J. Flavell

Councillor J. T. Wilson

(Members of the Council)

Dr. Sachs

Canon R. C. Stevens

Mr. W. J. Love

Reverend Fisher

Mr. R. G. Hough

Reverend Timlin

(Co-opted Members)

HEALTH STAFF
as at 31st December, 1971

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. 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. T. J. Henry, M.B., B.Ch., B.A.O. V. W. Nimbkar, M.B., B.S. M. Wilson, M.B., Ch.B., D.Obst.R.C.O.G.
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. M. Ali, M.B., B.Ch., 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.
Orthodontist/Senior Dental Officer	Miss J. Caswell, B.D.S., L.D.S., R.C.S.
Senior Dental Officers	D. J. Prince, B.D.S. A. T. Prince, B.D.S.

Dental Officers	..	..	..	Miss A. Twardy, L.D.S. Miss F. D. Richards, B.D.S. Mrs. D. N. Reshamwala, M.D.S. P. M. Cross, B.D.S. E. B. Cheffins, L.D.S. A. W. Parkes, M.B., Ch.B., B.D.S. D. C. Martin, B.Ch.D., L.D.S.
Dental Auxiliaries	..	..	..	2
Dental Surgery Assistants				
(Full-time)	..	..	..	7
(Part-time)	..	..	..	6
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)	..			16
Combined Health Visitors and School Nurses (Part-time)	..			13
School/Clinic Nurses (Full-time)				12
Tuberculosis Visitor	..			1
Vaccination and Immunisation Nurse (Part-time)	..	..		1
Student Health Visitors	..	..		4
Non-Medical Supervisor of Mid- wives	..	..	..	Miss G. M. Davies, S.R.N., S.C.M., Prem.Baby Cert.
Domiciliary Midwives (Full-time)				18
Domiciliary Midwives (Part-time)				3
Superintendent Home Nurse	..			Miss P. Lawton, S.R.N., Queen's Nurse
Home Nurses (Full-time)	..			28
Home Nurses (Part-time)	..			6
Nursing Auxiliaries (Part-time)				10
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 Veterinary Officer	D. Howie, M.R.C.V.S., D.V.S.M.
Senior Meat Inspector	1
Meat Inspectors	6
Principal Administrative Assistant	J. W. Trinder
Deputy Principal Administrative Assistants	2
Senior Administrative Assistant	1
Other Administrative and Clerical Staff	30 (Full-time) 9 (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 for the Borough was 185,390, which is an increase of 2,970 over the previous year. Since 1966, when the Borough boundary was extended, the population has increased by 8,700. The number of live births was 3,281, which gives a rate of 15.2 per thousand population, compared with the national rate of 16.0. The infant mortality rate of 19 was a little up on the national rate of 18 infant deaths per thousand total live births. The perinatal mortality rate, that is stillbirths and deaths under 1 week per thousand total live births, showed an improvement over the previous year. The rate is now 24 compared with the national rate of 22.

The five most common causes of death were: Ischaemic heart disease 420, Cerebrovascular disease 272, Pneumonia 119, Bronchitis and emphysema 116, and Cancer of the Lung and Bronchus 98. These conditions were the cause of death in 1,026 people out of a total of 1,837 deaths. 19 deaths were due to motor vehicle accidents and 36 to all other accidents. There were 8 deaths due to suicide and self-inflicted injuries.

The net cost of the Health Services for the financial year 1971/72 was £716,172, the money being allocated to the various services in the following way:—

Personal health	..	..	..	£442,627
Environmental health	..	..	..	£131,683
School health	..	..	..	£141,862

The Welfare Services which were part of the budget for the Department in 1970 are now the responsibility of the Director of Social Services, together with the Home Help Service, mental health and the supervision of day nurseries and childminders. This unification of the Social Services was a logical step to take, but it is unfortunate that this service will be separated from the unified Health Service in 1974, as the former will remain the responsibility of the new Local Authorities and the latter will be under the control of Area Health Authorities. Both these Authorities will have boundaries which will be co-terminous and this will aid co-operation, but this separation can only be a serious disadvantage for the Community.

A number of Health Centres are included in the Capital Building Programme of the Authority. By the end of the year one was almost ready for occupation and two others were in the planning stage. In addition a Clinic capable of being extended into a Health Centre had been approved by the Department of Health and Social Security, and it was anticipated that a tender would be negotiated early in 1972. The cost of these projects, together with the Ambulance Station to be built on a site next to the District General Hospital, is £398,400. The total cost of the capital building programme planned up to 1976 is £960,293.

There are 60 General Practitioners for whom Dudley Executive Council is responsible, and of these 16 held their surgeries in Local Health Authority premises. Although all the services of a Health

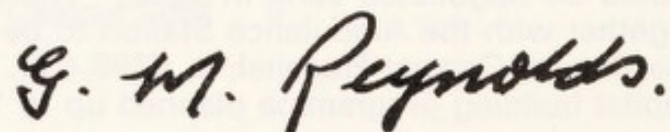
Centre are not at present in these Clinics, the nursing staff and the General Practitioners work very closely together, especially as all the Home Nursing Sisters and Health Visitors are attached to the practices of Doctors. Co-operation between the Department's services and the General Practitioner service is very good.

In December, 1970 the Health Committee reviewed the Dental Services being provided by the Authority and once again the question of fluoridation of the water supply was considered. It was resolved that, with a view to reducing the incidence of dental decay, particularly in children, the Council agree to the fluoridation of the water supplies within the County Borough. Unfortunately, however, the Council at its meeting in January, 1971 once again rejected this advice.

Since the introduction early in 1965 of a Register of children born within certain groups likely to require supervision throughout infancy and school life, there has developed in association with General Medical Practitioners and the Hospital Service, a system of keeping under medical observation those children at risk of developing handicapping conditions, either physical or mental. This arrangement starts soon after birth so that children requiring medical and educational treatment are ascertained at an early age. This applies especially in the case of mentally handicapped children and, although after April, 1971 the education of these children, which had been the responsibility of the Health Department, became a function of the Education Department, the system remained the same and is working well.

The integration of the Child Health Service with other medical services continued to be the subject of much discussion both at local and national levels. In the interests of the child, the integration of the Child Health Service with Health Services as a whole has much to commend it. It is imperative, however, to ensure that, when the Health Services of the area are re-organised, the close liaison which at present exists between Health and Education Services is maintained, so that an agreed decision can be made about the future educational needs of a child who is handicapped. The uncertainty regarding the future of the staff working in the School Health Service has naturally created some unrest. Despite this the team spirit which has always existed in the Department continued throughout the year and, as will be seen from my report, a considerable amount of work was undertaken including extension to some of the existing services.

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

A handwritten signature in black ink, reading "G. M. Reynolds." The signature is written in a cursive, flowing style with a large, prominent 'R'.

Medical Officer of Health and
Principal School Medical Officer

VITAL STATISTICS

Population—Registrar General's estimate 1971	..	185,390
Rateable Value (at 1st April 1971)	.. ..	£8,481,062
Estimated Product of 1p Rate (1971/72)	.. ..	£85,000

Live Births:

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	.. ..	1570	1565	3135
Illegitimate	.. ..	83	63	146
		<hr/>	<hr/>	<hr/>
		1653	1628	3281

Rate per 1,000 population 15.2 (16.0)

Illegitimate live births per cent of total live births 4.0 (8.0)

Stillbirths

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	.. ..	22	19	41
Illegitimate	.. ..	3	2	5
		<hr/>	<hr/>	<hr/>
		25	21	46

Rate per 1,000 total live and still births .. 14.0 (12.0)

Total Live and Still Births:

<i>Male</i>	<i>Female</i>	<i>Total</i>
1678	1649	3327

Infant Deaths (Deaths under 1 year):

		<i>Male</i>	<i>Female</i>	<i>Total</i>
Legitimate	.. ..	32	25	57
Illegitimate	.. ..	2	2	4
		<hr/>	<hr/>	<hr/>
		34	27	61

Infant Mortality Rates:

Total infant deaths per 1,000 total live births .. 19 (18)

Legitimate infant deaths per 1,000 legitimate live births 18 (17)

Illegitimate infant deaths per 1,000 illegitimate live births 27 (24)

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 (10)

Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths) 24 (22)

Maternal mortality (including abortion)

Deaths —

Rate per 1,000 total live and stillbirths .. —

Deaths:

<i>Male</i>	<i>Female</i>	<i>Total</i>
1016	821	1837

Death Rate per 1,000 population: 12.0 (11.6)

(The National Rates are shown in brackets)

Deaths from all causes:	<i>M.</i>	<i>F.</i>	<i>Total</i>
Enteritis and other diarrhoeal diseases ..	1	3	4
Tuberculosis of respiratory system.. ..	3	1	4
Other tuberculosis	1	—	1
Other infective and parasitic diseases ..	1	—	1
Malignant neoplasm, buccal cavity, etc. ..	3	1	4
Malignant neoplasm, oesophagus	9	—	9
Malignant neoplasm, stomach	26	15	41
Malignant neoplasm, intestine	28	18	46
Malignant neoplasm, larynx	3	1	4
Malignant neoplasm, lung, bronchus ..	85	13	98
Malignant neoplasm, breast	—	32	32
Malignant neoplasm, uterus	—	15	15
Malignant neoplasm, prostate	16	—	16
Leukaemia	5	6	11
Other malignant neoplasms	37	50	87
Benign and unspecified neoplasms ..	6	—	6
Diabetes mellitus	5	12	17
Other endocrine, etc., diseases	2	5	7
Anaemias	1	5	6
Mental disorders	1	3	4
Meningitis	1	—	1
Multiple sclerosis	1	2	3
Other diseases of nervous system	7	5	12
Chronic rheumatic heart disease	11	25	36
Hypertensive disease.. .. .	35	27	62
Ischaemic heart disease	262	158	420
Other forms of heart disease	47	51	98
Cerebrovascular disease	127	146	273
Other diseases of circulatory system ..	32	30	62
Influenza	1	5	6

	<i>M.</i>	<i>F.</i>	<i>Total</i>
Pneumonia	58	61	119
Bronchitis and emphysema	92	24	116
Asthma	—	2	2
Other diseases of respiratory system ..	12	5	17
Peptic ulcer	8	1	9
Appendicitis	1	—	1
Intestinal obstruction and hernia	2	4	6
Cirrhosis of liver	2	5	7
Other diseases of digestive system ..	6	10	16
Nephritis and nephrosis	2	3	5
Hyperplasia of prostate	2	—	2
Other diseases, genito-urinary system ..	5	4	9
Diseases of skin, subcutaneous tissue ..	—	2	2
Diseases of musculo-skeletal system ..	5	10	15
Congenital anomalies	6	14	20
Birth injury, difficult labour, etc.	10	5	15
Other causes of perinatal mortality ..	8	6	14
Symptoms and ill defined conditions ..	5	7	12
Motor vehicle accidents	16	3	19
All other accidents	13	23	36
Suicide and self-inflicted injuries	5	3	8
All other external causes	1	—	1
	<hr/> 1016	<hr/> 821	<hr/> 1837

Deaths

There were 1,837 deaths giving a death rate of 12.0 compared with the national rate of 11.6.

The five most common causes of death were as follows:

Ischaemic heart disease	420
Cerebrovascular disease	273
Pneumonia	119
Bronchitis and emphysema	116
Malignant neoplasm, lung, bronchus	98

Nineteen deaths—3 less than in the previous year—were due to motor vehicle accidents and 36 to other accidents. There were 8 suicides, the same number as for the previous year.

Birth Rate

There were 3,135 legitimate live births, 164 fewer than the previous year, and 146 illegitimate live births during the year. The birth rate of 15.2 is just less than the national rate of 16.0.

Infant Mortality and Stillbirths

During 1971 deaths of infants under one year of age totalled 61 giving an infant mortality rate of 19 per 1,000 live births, compared with the national rate of 18 per 1,000 live births.

There were 46 stillbirths, giving a stillbirth rate of 14 compared with the national rate of 12 per 1,000 total live and stillbirths.

Premature Infants

During 1971 there were 239 premature live births and 26 premature stillbirths, compared with 267 and 33 respectively in the previous year.

Six premature infants born at home were nursed entirely at home, whilst 1 was transferred to hospital. The balance of 232 were born in hospital. Fifteen died within the first 24 hours, and a further 8 between the second and seventh days.

Congenital Malformations Observable at Birth

Congenital malformations were reported in 43 live births and 7 stillbirths. The number of malformations notified was 63 and these were classified as follows:

Central nervous system	..	..	..	19
Eye and ear	..	..	..	1
Alimentary system	..	..	..	4
Urino-genital system	..	..	..	3
Limbs	..	..	..	23
Other parts of musculo-skeletal system	..			4
Other systems	..	..	..	3
Other malformations	..	..	..	6
				<hr/> 63 <hr/>

INFECTIOUS DISEASE

Notifications of infectious disease were received during 1971 as follows:—

				Numbers Notified		Admitted to Hospital
				M.	F.	
Scarlet Fever	..	..	..	4	9	—
Whooping Cough	..	..	..	12	13	—
Measles	..	..	..	375	332	1
Dysentery	..	..	..	12	10	2
Food poisoning	..	..	..	2	4	1
Meningitis	..	..	..	1	—	1
Infective Jaundice	..	..	..	7	5	2

There were no major problems relating to infectious disease during the year. No cases of typhoid or poliomyelitis were reported.

Early in the year suspected diphtheria was reported among residents at a caravan encampment in the town. Immediate steps were taken to isolate possible contacts but fortunately the suspected diphtheria was not confirmed.

Tuberculosis

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

				Respiratory	Non- Respiratory	Total
1971	..	..	..	29	8	37
1970	..	..	..	35	13	48
1969	..	..	..	48	11	59
1968	..	..	..	27	10	37
1967	..	..	..	43	13	56

New Cases Notified

Age Groups		0—	1—	5—	15—	45—	65—	Total (all ages)
Respiratory:								
Males	—	3	2	11	7	—	23
Females	—	—	—	6	—	—	6
Non-Respiratory:								
Males	—	—	—	5	—	—	5
Females	—	—	2	1	—	—	3

Thirty-seven new cases of Tuberculosis were notified during the year as shown above. In addition eight 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, 11 occurred in Asian immigrants.

During the year there were 10 outward transfers, 492 were removed from the register and 9 died, leaving a total of 444 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
1971	..	..	..	391	53	444
1970	..	..	..	774	136	910
1969	..	..	..	828	125	953
1968	..	..	..	854	127	981
1967	..	..	..	881	125	1006

The considerable reduction in numbers on the register is the result of a very detailed examination of all our records and those held at the Chest Clinic. This check resulted in the removal of the names of many patients who had died of causes other than Tuberculosis and also of some cases who had recovered.

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	—	—	—	—	2	3	5
Females ..	—	—	—	—	—	1	1
Non-Respiratory:							
Males	—	—	—	—	—	—	—
Females ..	—	—	—	—	—	—	—

In addition five 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 of 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 131 immigrants gave their destination as Dudley but it was not possible to trace 2 of these. In four instances it was found that the place of residence was not in the Dudley area. In addition, three immigrants were discovered who had not given Dudley as their place of residence on entering the country.

The following table gives further details for the period from January to December, 1971 :—

Advice notes received	..	..	..	..	131
Number traced	..	..	..	..	129
Heaf test accepted	..	..	..	..	37
B.C.G. given	..	..	..	..	16
Number x-rayed in Dudley	..	..	..	..	30
Number already x-rayed on entry	..	..	..	..	19
Number pregnant	..	..	..	..	4
Student Nurses in Hospital (given x-rays at the Hospital)	..	..	..	..	7
Number who did not attend for x-ray or Heaf tests					10
Number refused any check up	..	..	..	..	6
Asian babies given B.C.G. vaccination	..	..	..	..	62
West Indian babies given B.C.G. vaccination	..	..	..	..	20

SEXUALLY TRANSMITTED DISEASE

The figures returned by the Physician in Charge of the Treatment Centre at Dudley Guest Hospital and relating to Dudley are as follows. The equivalent figure for the previous year, where available, is shown in brackets.

							<i>Number of new cases in the year</i>
Syphilis..	..	..	..	..	..	..	7 (10)
Gonorrhoea	..	..	..	..	..	..	74 (68)
Other genital conditions	..	..	..	..	..	..	129
Other conditions	..	..	..	..	..	..	162
Total	..	..	..	..	..	..	372

The Treatment Centre is under the direction of Dr. C. R. Mayou and is situated at Dudley Guest Hospital. The Hospital Management Committee is responsible for the provision of these facilities. Dr. Mayou's staff and that of the Local Health Authority co-operate closely in following up patients who fail to keep their appointments.

A contact tracer based at the Guest Hospital Treatment Centre was appointed towards the end of the year. The Officer concerned is employed by the Hospital Management Committee, but the cost of his salary and travelling expenses is apportioned between the Local Health Authorities in whose area he works. This arrangement was agreed as a result of a memorandum on Venereal Disease Control prepared by the Standing Medical Advisory Committee of the Department of Health and following discussions which had taken place between the Regional Hospital Board, Consultant Venereologists, and the Medical Officers of Health of the West Midland County Boroughs.

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:

	1969	1970	1971
Number of expectant mothers ..	814	746	536
Number of attendances	3587	3277	2621
Number of Clinic sessions ..	448	445	447

Mothercraft and Relaxation Classes

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

Number of expectant mothers attending:

	1969	1970	1971
(a) Institutional booked ..	692	828	952
(b) Domiciliary booked ..	201	109	65
Total number of attendances ..	3763	3924	4026

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 1971	20,544
Children born in 1970	19,812
Children born in 1966-69	6,255
	<hr/>
	46,611
	<hr/>

1,253 infant welfare sessions were held during the year and the total number of children up to the age of five years attending was 7,869.

Family Planning Clinics

In Dudley the Local Authority responsibilities for Family Planning are undertaken on an agency basis by the West Midland Branch of the Family Planning Association and Clinic premises are made available by the Local Health Authority free of charge.

Free consultation and supplies are restricted to medical cases and consultation only is provided free of charge for non-medical cases.

Department of Health Circular 36/71 asked all Local Authorities not providing a comprehensive family planning service to review their provision and to develop the services to the extent that resources permitted, concentrating primarily on those people most in need of family planning advice.

Following receipt of this Circular, the whole question of family planning facilities in the Borough was discussed with officers of the West Midland Family Planning Association. As a result of these discussions it was agreed that an additional family planning clinic session should be provided in the Priory area and that one of the two weekly sessions held at Holly Hall Clinic should be transferred to Cottage Street Clinic, Brierley Hill. When this re-arrangement has been completed, family planning facilities will be available at the Centres and times listed below:—

Monday	Central Clinic Hall Street, Dudley	7.00—8.30 p.m.
Tuesday	Holly Hall Clinic, Stourbridge Road, Holly Hall, Dudley	7.00—8.30 p.m.
Wednesday	Ladies Walk Clinic, Ladies Walk, Sedgley, Dudley	10.00—11.30 a.m.
Thursday	Brierley Hill Clinic, Cottage Street, Brierley Hill	6.30—8.30 p.m.
Friday	Priory Clinic, Cedar Road, Dudley	10.00—11.30 a.m.

Dental Care

Expectant and nursing mothers and children up to the age of five years are eligible for dental examination and treatment at Clinics. The number of under-fives examined increased from 264 in 1970 to 426 in 1971, but the number of expectant and nursing mothers seen fell from 111 to 75.

A. Attendance and Treatment

	Children under 5 years	Expectant and Nursing mothers
Number of visits for treatment during the year:		
First visit	426	75
Subsequent visits	417	198
Total visits	<hr/> 843 <hr/>	<hr/> 273 <hr/>
Number of additional courses of treatment other than the first course commenced during year	59	8
Treatment provided during the year:		
Number of fillings	1049	248
Teeth filled	942	234
Teeth extracted	327	138
General anaesthetics given	121	9
Emergency visits by patients	33	11
Patients x-rayed	4	2
Patients treated by scaling and/or removal of stains from the teeth (prophylaxis)	36	57
Teeth otherwise conserved	49	—
Teeth root filled	—	1
Inlays	—	1
Crowns	—	1
Number of courses of treatment completed during the year	347	64

B. Prosthetics

Patients supplied with full upper or full lower (first time)	—	7
Patients supplied with other dentures	—	12
Number of dentures supplied	—	29

C. Anaesthetics

General anaesthetics administered by Dental Officers	2
---	---

D. Inspections

	Children under 5 years	Expectant and Nursing mothers
Number of patients given first inspections during year	757	71
Number who required treatment	434	68
Number who were offered treatment	423	68
Number of patients re-inspected during year	59	8

E. Sessions

Number of Dental Officer sessions
(i.e. equivalent complete half days)
devoted to maternity and child
welfare patients:

For treatment	206
For health education	13

Ophthalmic Clinic

	1971	1970
Errors of refraction including squint	276	131
External and other	2	26
	<hr/> 278	<hr/> 157
Spectacles prescribed ..	40	28

Orthopaedic

	1971	1970
Physiotherapy:		
Total number treated ..	77	119
Total number of treatments	383	522
Orthopaedic:		
Seen by Surgeon	226	255
New cases	64	62
Total attendances	263	278

Ear, Nose and Throat

Number seen by E.N.T.		
Consultant	8	4
Number referred for operation	—	—

NURSING SERVICES

During the last few years there has been a continuing process of change in the Local Authority Nursing Services, and in 1971 the management structure was re-organised in accordance with the recommendations of the Mayston Report. In April, discussions were held with representatives from the Department of Health and Social Security on the future management structure and subsequently the Department and the Health and Establishment Committees agreed to the proposals put forward and to their phased implementation.

The service will be controlled by a Director of Nursing Services and three Area Nursing Officers. The areas of the latter are functional in that one each is responsible for the Health Visiting, Home Nursing and Midwifery services. At a later date the areas will become geographical with an Area Nursing Officer controlling all nursing disciplines in the area. Below this level of management, the Borough has been divided into two geographical areas and in each of these areas there will be three functional First Line Managers. They will direct the day to day work at field level and keep the Area Nursing Officers informed so that they will then be in a position to identify the needs of their services and to work with the Director in formulating policy for these services.

The Northern area contains Burton Road Hospital, Rosemary Ednam Maternity Home and the Guest Hospital. It includes Sedgley, Lower Gornal, that part of Coseley now in Dudley Borough, and the old County Borough of Dudley with the exception of Holly Hall and Dudley Wood. The Southern area contains Wordsley Hospital with the Obstetric and General Practitioner Maternity Units. It includes the old Urban District of Brierley Hill, together with Dudley Wood and Holly Hall.

The Director of Nursing Services and the three Area Nursing Officers were appointed during 1971 and the Nursing Officers who will act as First Line Managers are to be appointed in April, 1972. When these appointments have been made, there will be a definite line of management responsibility, giving better opportunities for promotion, for deployment of staff and, consequently, improved patient care.

The most important change at field level has been the attachment of Nurses to the practices of Family Doctors. In the past Home Nurses and Health Visitors have worked in geographical areas and consequently their patients have been drawn from a number of general practices. Attachment to General Practitioners has meant that a better relationship is established between the Doctor and the Local Authority Nurse in providing continuity of care for the patient.

A number of Midwives have assisted at some ante-natal sessions in General Practitioners' surgeries and at the end of the year discussions were being held about proposals for a re-organisation of the institutional and community midwifery services in the Borough.

Our Home Nurses have visited a number of patients in hospital before discharge to ensure continuity of care and a number of Consultants have given lectures to the Home Nurses on their specialised subjects.

A matter of concern for some years has been the workload of our more highly qualified staff, and during the year we have made a beginning in the development of nursing teams consisting of State Registered Nurse, State Enrolled Nurse and Nursing Auxiliary.

We are most grateful to members of the public who have donated various items of equipment for the nursing services, often in memory of relatives, and this was a new development as far as Local Authority Nursing Services were concerned.

MIDWIFERY

During the year 83 Midwives notified their intention to practice within the Borough. Of these 28 were employed in the Health Department and 55 by the Dudley, Stourbridge and District Hospital Management Committee.

At the beginning of the year the domiciliary service provided one Midwife per night to assist in Wordsley Obstetric Unit during a period of staffing difficulties. Unfortunately in February this help had to be withdrawn as three Domiciliary Midwives resigned to work in other areas and it was difficult to maintain a satisfactory service. During this short period in hospital the Midwives were responsible for 18 deliveries. By the end of the year the Domiciliary Midwives had not been replaced and the service continued under some difficulty.

Four part-time Midwives assisted with nursing mothers and babies discharged from hospital within a few days of confinement. They also took part in ante-natal clinics and parentcraft and relaxation classes.

Large maternity packs containing every requirement for a confinement, except instruments, continued to be used and smaller packs were issued to patients discharged early from hospital for nursing.

Deliveries Conducted by Domiciliary Midwives

Midwives delivered 389 mothers at home, compared with 522 in 1970 and 694 in 1969. The total births for the Borough fell by 159. The percentage of home births was 11.7% compared with 14.8% in 1970. Although the numbers were steadily falling it was still necessary to provide a viable domiciliary service. In 93.8% of all confinements the attention of a Domiciliary Midwife was required after delivery. Additionally, the Midwives have been spending more time in ante-natal work and teaching in parentcraft classes.

The following table shows the number of women delivered in Hospitals and Maternity Homes and the days of the puerperium on which they were discharged:—

	% inc or dec over 1967		% inc or dec over 1968		% inc or dec over 1969		% inc or dec over 1970	
	1968	1967	1969	1968	1970	1969	1971	1970
Up to 24 hours after delivery ..	39	14.7	56	49.9	12	(78.5)	6	(50.0)
2 days after delivery ..	304	3.7	371	22.0	296	(20.4)	291	(1.6)
3 days after delivery ..	289	3.5	435	50.5	582	33.7	710	22.0
4 days after delivery ..	140	11.0	258	84.3	256	(0.7)	275	7.4
5 days after delivery ..	152	(36.4)	202	32.2	301	49.0	293	(2.6)
6 days after delivery ..	484	(7.9)	473	(2.2)	573	21.1	565	(1.3)
7 days after delivery ..	626	8.1	511	(18.3)	533	4.3	380	(2.8)
8 days after delivery ..	212	(0.9)	120	(43.3)	111	(7.5)	97	(12.6)
9 days after delivery ..	89	14.1	69	(22.4)	61	(11.5)	73	19.6
10 days after delivery ..	60	25.0	40	(33.3)	47	17.5	63	34.4
Total ..	2,395		2,534		2,772		2,753	

(% decreases shown in brackets)

The greatest proportion of mothers were discharged on the third or fourth day of the puerperium. It would be better if an increasing number of mothers were discharged within 48 hours or on the seventh or eighth day in order that good feeding patterns can be established or maintained either before or after the upheaval of discharge.

53 mothers originally booked for home delivery were transferred to hospital for the following reasons:—

Foetal distress ..	..	..	..	..	..	5
Premature labour ..	..	..	..	..	..	14
Abnormal presentation ..	..	..	..	..	..	5
Twins ..	..	..	..	..	..	3
Delay in labour ..	..	..	..	..	..	5
Post-partum haemorrhage ..	..	..	..	..	..	3
Pre eclamptic toxæmia ..	..	..	..	..	..	6
Ante-partum haemorrhage ..	..	..	..	..	..	7
Post maturity ..	..	..	..	..	..	5

In addition Midwives took other patients to hospital as follows: 8 miscarriages, and 14 mothers who were booked for hospital but whose labours were so advanced that Midwives were called out by Ambulance personnel. 24 babies were admitted to hospital.

Under the rules of the Central Midwives Board, Domiciliary Midwives summoned medical help on 115 occasions for the mother and 65 times for the baby.

During the year the Maternity Liaison Committee began to meet regularly and more frequently.

Obstetric Flying Squad

This service, based at New Cross Hospital and Birmingham Maternity Hospital, was called out 3 times, once for a miscarriage and twice for post partum haemorrhage. One of these cases was booked for a Maternity Home but a Midwife was called because labour was too far advanced to move the patient.

Drugs and Analgesia

All Trilene machines were withdrawn during the year and all Midwives are now using Entonox.

Out of 389 confinements, 196 women received Entonox. 174 Pethilorfan injections were given. Mothers do not appear to need or demand analgesia as frequently as before probably due to improved ante-natal preparation.

During the year the new portable incubator has been well used, particularly for transporting babies from Wordsley Hospital to Special Care Units at other hospitals.

Guthrie Tests for Phenylketonuria

1971 was the first full year when testing for the presence of phenylketonuria was performed by the Guthrie method. This involved collecting a small blood sample on to a special test paper by pricking the heel of each baby on or about the sixth day of life.

For convenience of checking, all test papers from maternity institutions within the Borough were channelled through the Health Department for transmission to the laboratory. In all, 3,171 tests were made. One repeat specimen was requested. No case of phenylketonuria was discovered.

As the test is now normally carried out before the final visit of the Domiciliary Midwife, or the baby's discharge from hospital, a higher proportion of babies were tested. Sometimes when the phenistix method was used it was difficult to obtain urine specimens at the correct time.

Training

At the end of the year there were 2 approved Teaching Midwives, but this number will be increased when the Part II Midwifery Training School becomes fully operative in 1972. Both Midwives attended the Practical Works Instructors Course at the West Midlands Post Graduate Training Centre.

Six Pupil Midwives from Birmingham Maternity Hospital completed three months District Training in Dudley and all successfully qualified as Midwives.

Three Midwives attended statutory Refresher Courses and 5 attended an induction course for new members of staff and a course on Teaching Techniques.

At staff meetings discussions were held on the future of the Service as it was considered important that Midwives should share in decisions made regarding any changes in their working pattern. Various films were shown and discussed.

HEALTH VISITING

The staff at the end of the year consisted of 1 Area Nursing Officer (Health Visiting), 2 Group Advisors, 14 Health Visitors working full-time and 13 working part-time to a full-time equivalent of 7.5. In addition, 14 State Registered Nurses were employed, 12 as School/Clinic Nurses, one as a Tuberculosis Visitor and another in the Vaccination and Immunisation team. As in past years, Dudley has been affected by the national shortage of Health Visitors and, as Student Health Visitors cannot be recruited in sufficient numbers, posts remain vacant. Ten applicants for training as Health Visitors were interviewed, but only 4 Nurses were considered to meet the required educational and personality standards.

During the year the policy of attachment of all Health Visitors to General Practitioners' practices was extended. The advantages of attachment are to be found largely in the closer co-operation between Doctor and Nurse which has resulted in eliminating duplication of visiting and other work, in more selective visiting, and on the whole more job satisfaction for the Health Visitor. Weighed against these advantages must be the increased time spent in travelling and the loss of identity which a Health Visitor had with an area. She no longer has the intimate knowledge of the neighbourhood she once had because her patients are now scattered throughout the Borough. However, the advantages of this system outweigh the disadvantages and, as General Practitioners in an urban area such as this tend to localise the area of their practice, even these disadvantages will ultimately not apply.

Health Visitors are supported in their work by State Registered Nurses who are employed in the School Health Service and in Clinics. Here they assist Health Visitors and are responsible for most immunisation procedures, provided that there is a Doctor on the premises. This allows Health Visitors more time to interview mothers, and Doctors the opportunity to examine more children whose names are on the "Observation Register." These Nurses, as well as attending Local Authority Clinics, have also assisted General Practitioners holding screening clinics for women. Appointments for this service are made by the Health Department, which carries out all the clerical work. The screening service includes a cervical smear, breast examination, blood testing and urine analysis.

Health Visitors assisted by the School/Clinic Nurses, have continued hearing screening tests on babies. 3,855 mothers were invited to bring their children but after repeated invitations only 2,535 attended. Out of these, 161 babies were re-tested and 12 were referred to Medical Officers for further investigation.

During 1970 the Guthrie Test for phenylketonuria was substituted for the Phenistix test. In 1971 most of the Guthrie tests were performed by Midwives before the tenth day of the puerperium, but a few were tested at a later date by Health Visitors.

The Senior Health Visitor responsible for liaison continued to attend the paediatric clinic and ward rounds at the Guest Hospital. In addition to transmitting much useful information to General Practitioners, Health Visitors in Dudley and the Paediatric Consultant, she was able to liaise with Health Visitors in neighbouring Health Authorities.

An "Observation Register" was maintained of all children whose normal development was thought to be in jeopardy. At the end of the year the Register contained 2,221 names. 692 children were examined by appointment at Clinics, but 777 failed to attend after several invitations had been sent to parents. These were specially visited at home and progress was assessed by Health Visitors.

At the age of $2\frac{1}{2}$ years the name of any child showing a deviation from normal was transferred to the "Handicapped Register." The child was then assessed as frequently as the handicap required in order that a decision could be made as early as possible as to subsequent care and education.

Visits made by Health Visitors during the year were as follows :

Children born in 1971	..	..	..	..	10,269
Children born in 1970	..	..	..	..	8,339
Children born in 1966/69	..	..	..	..	15,012
Persons aged 65 years and over	..	..	..	..	1,813
Mentally disordered	..	..	..	..	293
Hospital discharges	..	..	..	..	48
Tuberculous and other infectious households					133
Other cases..	..	..	..	..	1,268

There was an increase of 1,169 visits over those of 1970.

1,613 referrals were made, of which 365 were for speech therapy, housing, chiropody, and home nursing; 465 referrals were made to the Social Services Department; and 783 to other agencies, including General Practitioners, Hospitals, Family Planning Association and Diocesan Family Service.

Visits to the elderly increased in number, as expected. Health Visitors working closely with General Practitioners uncovered a variety of problems at an earlier stage than would have been the case prior to the attachment scheme. Supporting services were arranged and in some cases this halted deterioration in health and living conditions.

The Tuberculosis Visitor maintained close contact with the Chest Clinic. 2,546 visits were made to 401 households. Much time was spent contact tracing, and 743 persons were referred to the Mass Radiography Unit. All newly arrived immigrant families were visited to advise them of the Health Services available and to ensure that as many as possible attended for Chest x-ray. 124 visits were made for this purpose. 229 babies from immigrant or tuberculous families received B.C.G. vaccination.

Health Visitors and Midwives have worked closely together conducting weekly classes in preparation for labour and parentcraft at nine centres. Each course consisted of 7 sessions. The family planning content of the classes was increased and films were shown on occasions. Some evening sessions were held to enable prospective fathers to attend.

Eight Health Visitors attended a course on Hearing Screening tests in which technique most of the staff are now qualified. Health Visitors also attended courses on Family Planning, Psychiatry, and on the Assessment of Supervised Practice. Five School/Clinic Nurses attended the West Midland Post Registration Training Centre for a School Nurses Course and an Induction Course.

Twenty-nine Student Nurses and 6 Pupil Midwives spent a day with Health Visitors. We also received 3 students from the Oxford Health Visitor Training Centre, for one week's observation of work in an industrial urban area.

HOME NURSING SERVICE

At the end of the year the staff consisted of: 1 Area Nursing Officer (Home Nursing), 24 State Registered Nurses and 3 State Enrolled Nurses working full-time, and 6 State Registered Nurses and 10 Auxiliaries working part-time. This was three members of staff below the establishment.

The staffing situation remained very stable. Two nurses retired and two left because of family commitments, but at no time was there a serious shortage.

During the year all General Practitioners had a Home Nursing Sister attached to their practice. In one group where there was a heavy workload a team consisting of 1 State Registered Nurse, 1 State Enrolled Nurse and 1 Nursing Auxiliary was established.

A number of Nursing Sisters undertook work in Doctors' surgeries such as dressings, injections, venepuncture and checking of blood pressure. It is hoped to further this system and, as the opportunity arises, to form more teams of nurses with varying responsibilities.

A detailed appraisal of this new pattern of working has not yet been made. Job satisfaction, however, follows good patient care, and in this respect the system has been successful.

It had been hoped to commence a Night Relief Service for relatives nursing patients through long or terminal illness. Unfortunately the agreed establishment of Nursing Auxiliaries had to be transferred to the Social Services Department when the Social Services Act was implemented. The duties of night sitters, who in the Social Services Department will be employed as part of the Home Help Service, are very different from those envisaged had they become an extension of the Home Nursing Service and, if Community Nursing is to be comprehensive, then some form of night nursing service will have to be part of the future pattern.

The following shows the number of patients and the number of visits made by Home Nurses:—

	1969		1970		1971	
	<i>Patients</i>	<i>Visits</i>	<i>Patients</i>	<i>Visits</i>	<i>Patients</i>	<i>Visits</i>
Medical cases	1,787	64,101	1,917	65,876	2,278	76,676
Surgical cases	439	11,213	476	9,266	491	9,610
Tuberculosis cases ..	11	690	18	814	12	525
Maternal complications	52	541	61	480	75	556
Other cases	2	85	4	81	3	104
Total	2,291	76,630	2,476	76,517	2,859	83,471

The number of medical cases rose substantially and this reflects the increased amount of care given to the elderly in the community.

The number of patients with surgical conditions who were nursed at home increased by 15 only and this is disappointingly low. While recognising that earlier discharge may result in some extra pressure within the hospitals, many patients could with benefit to themselves and their relatives be discharged at an earlier post-operative stage of their illness, and certainly at less cost to the Health Service.

Home Nurses are gradually visiting more patients in hospital before discharge in an effort to provide some continuity of care. Unfortunately progress is slow because discharges are frequently not notified to the Department until immediately before or after the patient has left the Hospital.

The rising trend in the number of "maternal complications" visited is accounted for by the increase in the number of iron injections given in the early months of pregnancy after the Midwife has ceased to visit.

The Nursing Auxiliaries were attached to groups of Nursing Sisters whom they assisted with heavy cases. They also relieved them of work not requiring the skills of trained nurses. At one time this section of the Nursing Service was most unstable, but resignations are now rare. During the year one Auxiliary resigned to undergo training as a State Enrolled Nurse at a local hospital. All the Auxiliaries attended a part-time training course at the West Midland Post Registration Training Centre. The increasing amount of work which they carried out is shown below:—

	<i>Patients</i>	<i>Visits</i>
1969	210	6,904
1970	363	8,044
1971	424	11,103

Almost all the Home Nursing Sisters hold the National Certificate of District Nursing and new recruits are sent on a training course soon after their appointment. During the year 4 State Registered and 1 State Enrolled Nurse successfully completed the course held at the West Midland Post Registration Training Centre. Four State Registered Nurses attended a part-time Refresher Course and 1 State Enrolled Nurse a full-time course at the same centre. In addition, two State Registered Nurses attended an induction course for new recruits to the Local Authority service. Two State Registered Nurses attended Refresher Courses organised by the Queens Institute of District Nursing.

Post registration education was given to staff by local Consultants, as a result of which regular weekly clinical rounds were arranged with one of the surgeons at the Guest Hospital. Staff have attended lectures arranged by the Regional Hospital Board and by other Local Authorities.

29 Student Nurses from the Guest and Wordsley School of Nursing spent a day with Home Nursing Sisters and 6 Pupil Midwives also paid visits of observation.

Marie Curie Day and Night Nursing Service for Cancer Patients

Three Nurses and 1 Auxiliary remained on the panel for this service. During the year they attended 17 patients entailing 70 visits. Two patients were supplied with bed linen and clothing which was urgently required to give extra comfort and aid nursing.

Loan of Nursing Equipment

The following articles were issued on loan. The figures do not include articles already out on loan from the previous year:

Beds	6
Mattresses	6
Air cushions	112
Ripple beds	111
Sheepskins	9
Back rests	140
Bed pans	158
Commodes	83
Urinals	92
Feeding cups	13
Cradles	68
Lifting poles and chains	9
Wheelchairs	64
Fireguards	3
Walking aids	83
Walking sticks.. .. .	28
Miscellaneous.. .. .	3

During the year the Badley Nursing Trust and members of the public donated between them:

2 ripple beds
6 bed tables
6 commodes
4 sheepskins
3 foot suction apparatus
10 walking aids
8 wheelchairs

It will be noticed that the main items of equipment issued were those used mainly in the care of the elderly, the numbers of whom are continuously rising. As many of these are long term loans a constant review of this equipment is required in order to meet the demand.

VACCINATION AND IMMUNISATION

During 1971 the recommendation of the Joint Committee on Vaccination and Immunisation that vaccination against smallpox need not now be recommended as a routine procedure in early childhood, was accepted and these vaccinations were discontinued. At the same time the Schedule for Immunisation was reviewed to provide for the commencement of protection with triple vaccine and poliomyelitis vaccine at the age of six months, instead of at three months as before.

The amended Schedule, operative from October, 1971, is as follows:—

Age 6 months	—	First triple and first polio
Age 7½ months	—	Second triple and second polio
Age 12½ months	—	Third triple and third polio
Age 14 months	—	Measles
Age 5 years	—	Dip/Tet booster and polio booster
Age 12 years	—	Heaf test and B.C.G. immunisation
Age 13 years	—	Rubella (girls only)
Age 15 years or on leaving school	—	Tetanus booster and polio booster

The scheme for vaccination and immunisation by appointment at Clinics which was introduced during 1967 continued in operation throughout the year, and results achieved have been satisfactory. The immunisation state of all children born in 1969 and resident in the County Borough at the end of 1971 has been analysed and shows that 85% (80%) had been protected against Diphtheria, 82% (78%) against Whooping Cough, and 85% (80%) against Poliomyelitis. In addition, 84% had been protected against Tetanus and 54% against Measles. The national figures, where available are shown in brackets.

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 1971

Table 1 — Completed Primary Courses

Type of vaccine or Dose	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964- 1967		
1. Quadruple DTP	—	—	—	—	—	—	—
2. Triple DTP	424	2,122	132	27	17	3	2,725
3. Diphtheria/Pertussis	—	—	—	—	—	—	—
4. Diphtheria/Tetanus	13	136	10	7	169	161	496
5. Diphtheria	—	—	—	—	13	2	15
6. Pertussis	—	1	—	—	—	—	1
7. Tetanus	—	—	—	1	—	429	430
8. Salk	—	—	—	—	—	—	—
9. Sabin	432	2,267	149	46	227	681	3,802
10. Measles	—	1,428	404	173	493	4	2,502
11. Rubella	—	—	—	—	—	—	—
SUMMARY:							
Immunised against:							
Diphtheria	437	2,258	142	34	199	166	3,236
Whooping Cough	424	2,123	132	27	17	3	2,726
Tetanus	437	2,258	142	35	186	593	3,651
Poliomyelitis	432	2,267	149	46	227	681	3,802

Table 2 — Reinforcing Doses

Type of Vaccine or Dose	Year of Birth					Others under age 16	Total
	1971	1970	1969	1968	1964- 1967		
1. Quadruple DTP	—	—	—	—	—	—	—
2. Triple DTP	—	—	—	—	—	—	—
3. Diphtheria/Pertussis	—	28	63	11	137	4	243
4. Diphtheria/Tetanus	—	6	6	4	2,625	214	2,855
5. Diphtheria	—	—	—	—	24	4	28
6. Pertussis	—	—	—	—	—	—	—
7. Tetanus	—	1	3	6	9	1,625	1,644
8. Salk	—	—	—	—	—	—	—
9. Sabin	—	31	68	14	2,777	1,777	4,667
SUMMARY:							
Immunised Against:							
Diphtheria	—	34	69	15	2,786	222	3,126
Whooping Cough	—	28	63	11	137	4	243
Tetanus	—	35	72	21	2,771	1,843	4,742
Poliomyelitis	—	31	68	14	2,777	1,777	4,667

AMBULANCE SERVICE

During 1971 the Ambulance Service continued to show the usual trend of expansion notably in respect of routine treatment cases.

All staff have now received training as recommended in the Millar Report, that is new entrants to the Service attend a six weeks course and other staff attend a two weeks refresher course every three years. This instruction is given at the Birmingham Training School.

In-service training is carried out at every opportunity under the direction of the Ambulance Training Instructor.

During the year, Entonox was introduced on the accident and emergency vehicles and this has proved to be an improvement in the service for both patients and Ambulance crews.

Four new general purpose ambulances were received during the year: these vehicles were built to our own specifications and from reports received staff and patients consider them to be the most comfortable and efficient ambulances ever used in the County Borough Ambulance Service. These vehicles are also fitted with a more efficient type of heater which is independent of the heat from the engine, thus ensuring a constant heat in the saloon of the Ambulance.

During the period under review one Driver/Attendant died, four resigned and eight were recruited.

Twenty-six lectures and demonstrations were given to various organisations in the Borough involving 240 people.

Table 1—Establishment

<i>Establishment</i>							
						<i>Authorised</i>	<i>Actual</i>
Assistant Ambulance Officer	..	..	..	..	..	1	1
Ambulance Control Officer	..	..	..	..	..	1	1
Station Officer	..	..	..	..	..	4	4
Shift Leader	..	..	..	..	..	8	8
Leading Driver	..	..	..	..	..	8	8
Ambulance Driver	..	..	..	..	..	38	33
Sitting Car Driver	..	..	..	..	..	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, 1971

					<i>Patients</i>	<i>Miles</i>
Ambulance cases	..	..	..	..	13,616	82,746
Sitting car cases	..	..	..	..	62,888	223,786

The above includes 685 ambulance cases involving 6,362 miles and 2,185 sitting cases involving 18,804 miles conveyed on behalf of neighbouring Authorities.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Health Education

Thirteen Health Visitors were involved in conducting regular courses in 13 schools, mainly with secondary school girls. With the increased awareness of the hazards of smoking, drugs and venereal disease, these subjects should be included in a carefully structured preventive Health programme, which can be offered to secondary schools. Unfortunately, no full-time Health Education Officer is employed by this Authority and there are insufficient other staff available with teaching experience to make this possible. Talks on health topics have been introduced into one Junior school and, had the manpower been available, this would have been extended to other schools.

16 mm. films have been purchased as part of the programme of building up a library of Health Education material which is frequently in demand.

375 talks were given at Parentcraft classes. 308 were given in schools and 74 to other groups.

Chiropody Service

The demand for chiropody continued to increase and the number of persons treated at Clinics, in their own homes, and at the Old People's homes, all show an increase over the previous year. This increase was partly due to the inability of some of the Old People's Voluntary Organisations to continue to provide a chiropody service for their members.

The staff position remained difficult. Although provision was made in the financial estimates for the full authorised establishment of six full-time Chiropodists, it was not possible to recruit any additional full-time staff. At the end of the year the staff consisted of 2 full-time Chiropodists and 7 sessional Chiropodists, giving a full-time equivalent of only 4.5.

Chiropody sessions were provided at ten Clinics. Although every effort is made to keep to a minimum the number of people treated in their own homes, the number of patients where it was found necessary to carry out a domiciliary visit showed an increase on the previous year.

Details of the work are given below:—

	1970	1971
Number of persons treated (not including those in Old People's Homes)	2472	2538
Number of treatments given:		
At Clinics	9818	11061
In patients' homes	1307	1561
In Old People's Homes	637	806

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 6 Clinics throughout the Borough.

During the year the health screening programme was extended in co-operation with a number of General Practitioners, the tests offered being Cervical Cytology, palpation of the breast for cancer, testing of urine for albuminuria and glycosuria, and a blood haemoglobin test for anaemia.

The tests are carried out by the General Practitioner in his own surgery, but this Department has provided all clerical and administrative services including the initial approaches to women in the appropriate age group on the Practitioner's list, making appointments, and advising patients of the results.

By the end of the year four General Practitioners were participating in the scheme and two practices had been completed.

Arrangements were in hand for these extended screening services to be made available in the Local Authority Clinics and these commenced early in 1972.

Figures relating to screening services are given below :

Local Authority Clinics

Cervical Cytology				1968	1969	1970	1971
Number of Clinics held	..			81	79	56	50
Number of women who attended	..	..	..	1422	1281	908	762
Results of tests:							
Normal cells	..	..		1264	1165	679	516
Suspicious	..	..		12	9	4	3
Positive	..	..	..	6	4	—	—
Specimens unsatisfactory				9	1	4	—
Other	..	..	..	131	102	221	243

General Practitioner Services

Cervical Cytology				1970	1971
Number of women who attended	..	..		249	935
Results of tests:					
Normal cells	..	..		203	754
Suspicious	..	..		1	6
Positive	..	..	..	—	1
Specimens unsatisfactory				—	—
Other	..	..	..	45	174

Examination of Breasts				1970	1971
Number of women examined	..	..		267	1083
Results:	Normal	..	..	267	1075
	Treatment required	..		—	8

Blood Tests for Anaemia

Number of women examined	..	..		270	1052
Results:	Normal	..	..	220	965
	Treatment required	..		50	87

Urine Test

Number of women examined	..	..		—	1082
Results:	Normal	..	..	—	1079
	Treatment required	..		—	3

HOUSING ON MEDICAL GROUNDS

During the year 1,188 cases were investigated and in 139 of these additional housing points were recommended on medical grounds. Exchange of Council accommodation was recommended in 502 cases and in 32 cases immediate priority for re-housing was recommended.

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

MEDICAL EXAMINATIONS

The continued use of the medical questionnaire for candidates being admitted to either the Superannuation Scheme or Sick Pay Scheme 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 836 Statements of Medical History were completed by candidates and of these only 3 were referred for full medical examination. These were all passed fit to take up the posts applied for. In addition 23 persons were medically examined in connection with employment as School Crossing Patrols and of these 22 were passed as fit for this type of employment.

All 49 persons applying for registration as Child Minders were passed as medically fit.

As a result of the Report of the Home Office Committee set up to review medical standards in the Fire Service, the following medical examinations of Fire Service personnel were carried out:

3-yearly Reviews:

Number of medicals carried out	..	9
Number passed	.. .. .	8
Number failed (eye-sight below standard To continue duties only where breathing apparatus is not required)	.. ..	1

New Entrants:

Number of medicals carried out	..	6
Number passed	.. .. .	6

The Motor Vehicles (Driving Licences) Regulations prescribe conditions which persons with controlled epilepsy and certain other medical conditions must satisfy before being granted a driving licence.

During the year a total of 41 such applications were received and investigated. In three cases the Licensing Authority was recommended to withhold driving licences because of epilepsy, and in three other cases a similar recommendation was made where other medical conditions were involved.

392 Corporation employees attended for chest x-ray under the three-yearly review scheme. This scheme was introduced in 1968 to implement the Department of Health's request that all staff in regular contact with children should be x-rayed every three years. This is, of course, in addition to x-ray examination at the time of appointment.

REPORT OF THE CHIEF VETERINARY OFFICER

The number of pigs inspected, 242,776, was an increase of 40,320 on that of 1970 and the highest since 1962.

Products were exported to Australia, Belgium, Cyprus, Gibraltar, Hong Kong, Malta, Maserah, Singapore and Sierra Leone, and were as follows:

20,295	Smoked sides of bacon
4,223	Smoked bacon middles
2,094	Smoked gammons
2,104	Smoked collars
1,111	Sides of pork
460	Pork middles
1,040	Cases sausages and pies
14,618	Gammons
33,128	Defatted gammons
12,233	Cross-cut pork shoulders
2,659	Defatted shoulders
10,684	Dry salted shoulders
52	York hams

Veterinary certificates were sent to farmers for the examination of 2,728 lungs.

Two hundred and eighty-eight pigs died in transit and 132 in the lairage.

The weight of meat found unfit for food amounted to 233 tons, 15 cwts, 2 qtrs and 26 lbs. The reasons for rejection are listed as follows:

PIGS **Number of animals killed — 242,776**

<i>Disease</i>	<i>Car- cases</i>	<i>Heads</i>	<i>Lungs</i>	<i>Hearts</i>	<i>Livers</i>	<i>Stom- achs</i>	<i>Spleens</i>	<i>Kidneys</i>	<i>In- testines</i>	<i>Other Parts</i>	<i>Total</i>	<i>% of kill</i>
Abscesses	2	999	2	2	2	11	11	4	11		999	0.41
Anaemia	2	2	2	2	2	2	2	4	2		2	0.0008
Arthritis	131	131	131	131	131	131	131	262	131	513 fores	644	0.26
Bone Fracture ..												
Bruising	1	1	1	1	1	1	1	2	1	7 hinds 2 fores	7	0.003
Carcinoma	1	1	1	1	1	1	1	2	1	394 hinds	394	0.16
Cirrhosis												
Congestion			3038	4	9880						9880	4.06
Contamination ..	66	53	455	455	455						3038	1.25
											455	0.19
Echinococcosis ..	3	3	3	3	3	3	3	6	3		3	0.0012
Emaciation	1	1	1	1	1	1	1	2	1		1	0.0004
Emphysema												
Enteritis	5	5	5	5	5	5	5	10	11		11	0.0044
Fever	21	21	21	21	21	21	21	42	592		592	0.24
Fatty Infiltration ..												
Gangrene	1	1	1	1	1	1	1	2	1		1	0.0004
Hydronephrosis ..												
Jaundice	7	7	7	7	7	7	7	11497	7		11497	2.37
								14			7	0.0028

PIGS—continued

Disease	Car- cases	Heads	Lungs	Hearts	Livers	Stom- achs	Spleens	Kidneys	In- testines	Other Parts	Total	% of kill
Metaplasia ..	1	1	1	1	1	1	1	2	34		34	0.014
Metritis ..	86	86	86	86	86	86	86	172	1		1	0.0004
Nephritis ..	4	4	4	4	4	4	4	8	86		86	0.036
Oedema ..	1	1	1	1	1	1	1	2	6	2 hinds	6	0.0036
Orchitis ..	39	39	39	39	39	39	39	78	1		1	0.0004
Pericarditis ..	74	74	74	74	5909	6011	6011	148	39		7154	2.96
Peritonitis ..	445	445	445	445	445	445	445	890	6011		6011	2.49
Pleurisy ..	383	383	383	383	383	383	383	766	445		17568	7.23
Pyæmia ..	5	5	5	5	5	5	5	10	383		383	0.16
Pyelonephritis ..	16	16	16	16	16	16	16	32	5		5	0.002
Septicaemia ..	52	52	52	52	52	52	52	102	16		16	0.0065
Swine Erysipelas ..	22	2388	24	22	22	22	22	44	52		52	0.021
Telangiectasis ..	1	1	1	1	1	1	1	2	1	2 fores	1	0.0004
Tuberculosis ..									2262		2388	0.99
Tumour ..									1		1	0.0004
Total ..	1370	4720	21922	8878	8252	7250	7250	14096	10033	149 fores 1092 hinds		
Percentage of Total ..	0.56	1.94	9.03	3.66	7.93	2.99	2.99	2.60	4.10	0.003 fores 0.25 hinds		

ANNUAL REPORT OF PRINCIPAL SCHOOL MEDICAL OFFICER

School Accommodation and Attendance

Education is provided in 78 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, 1 day school for severely retarded 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 1971 from 31,306 to 32,692.

The only alteration in the schools' structure during the year was the amalgamation in September, 1971 of Mount Pleasant Junior and Mount Pleasant Infants' Schools, Quarry Bank.

Infants' Schools

Average No.
on Roll

Alder Coppice	160
Belle Vue	203
Bird's Meadow	102
Brockmoor	220
Bromley	211
Bromley Hills	283
Cotwall End	168
Dudley Wood	183
Glynne	213
Hawbush	154
Holly Hall	248
Jessons C.E.	332
Pensnett	115
Priory	236
Quarry Bank	202
Queen Victoria	202
Red Hall	280
Roberts	206
Russells Hall	181
Saltwells	162
St. Chad's C.E.	61
The Straits	264
Wall Heath	109
Wren's Nest	184
Yew Tree Hills	142

4,821

Infants' and Junior Schools

					Average No. on Roll
Ashwood Park .. .. .	..	..	..	..	190
Blowers Green .. .. .	..	..	..	..	385
Bramford .. .. .	..	..	..	..	348
Brierley Hill .. .. .	..	..	..	..	230
Christ Church (Coseley) .. .. .	..	..	..	..	294
Dawley Brook .. .. .	..	..	..	..	305
Fairhaven .. .. .	..	..	..	..	289
Foxyards .. .. .	..	..	..	..	159
Kates Hill .. .. .	..	..	..	..	373
Highfields .. .. .	..	..	..	..	87
Lawnswood .. .. .	..	..	..	..	265
Maidensbridge .. .. .	..	..	..	..	356
Mount Pleasant (Coseley) .. .. .	..	..	..	..	360
Mount Pleasant (Quarry Bank) .. .. .	..	..	..	..	166
Northfield Road .. .. .	..	..	..	..	373
Parkes Hall .. .. .	..	..	..	..	268
Portway .. .. .	..	..	..	..	234
St. Chad's R.C. .. .. .	..	..	..	..	226
St. Edmund's C.E. .. .. .	..	..	..	..	237
St. John's C.E. .. .. .	..	..	..	..	233
St. Joseph's R.C. .. .. .	..	..	..	..	238
St. Mary's C.E. (Kingswinford) .. .. .	..	..	..	..	337
St. Mary's C.E. (Coseley) .. .. .	..	..	..	..	308
St. Mary's R.C. .. .. .	..	..	..	..	130
Sledmere .. .. .	..	..	..	..	430
Sycamore Green .. .. .	..	..	..	..	259
The Brook .. .. .	..	..	..	..	410
The Dingle .. .. .	..	..	..	..	293
Thorns .. .. .	..	..	..	..	293
Tudor .. .. .	..	..	..	..	268
Wallbrook .. .. .	..	..	..	..	255

Junior Schools

Alder Coppice .. .. .	..	..	..	..	234
Belle Vue .. .. .	..	..	..	..	240
Bowling Green .. .. .	..	..	..	..	491
Brockmoor .. .. .	..	..	..	..	314
Bromley .. .. .	..	..	..	..	338
Bromley Hills .. .. .	..	..	..	..	277
Church of Ascension .. .. .	..	..	..	..	197
Cotwall End .. .. .	..	..	..	..	267
Glynne .. .. .	..	..	..	..	361
Hawbush .. .. .	..	..	..	..	238
Jessons C.E. .. .. .	..	..	..	..	301
Netherton C.E. .. .. .	..	..	..	..	208
Priory .. .. .	..	..	..	..	372
Quarry Bank .. .. .	..	..	..	..	334
Queen Victoria .. .. .	..	..	..	..	358
Red Hall .. .. .	..	..	..	..	394
Roberts .. .. .	..	..	..	..	254

Russells Hall	..	..	..	..	313
St. Mark's C.E.	..	..	..	..	257
The Straits	..	..	..	..	314
Woodside ..	..	..	..	..	353
Wren's Nest	..	..	..	..	311

20,146

Day Special Schools

Sutton—mixed	..	..	..	..	120
Woodsetton—mixed	..	..	..	..	114
The Brier—mixed	..	..	..	..	84
Old Park—mixed..	..	..	..	..	108

426

Secondary Modern and Grammar Schools

		Average No. on Roll
Audnam Secondary	(Mixed)	.. 380
Bishop Milner R.C.	(Mixed)	.. 451
Blue Coat	(Mixed)	.. 455
Brierley Hill	(Mixed)	.. 605
Coseley	(Mixed)	.. 493
Dormston Secondary	(Mixed)	.. 639
Ellowes Hall	(Mixed)	.. 655
Hillcrest	(Mixed)	.. 417
Holly Hall	(Mixed)	.. 508
Kingswinford	(Mixed)	.. 377
Mount Pleasant	(Mixed)	.. 311
Park	(Boys)	.. 259
Park	(Girls)	.. 231
Pensnett	(Mixed)	.. 491
Quarry Bank	(Mixed)	.. 382
Saltwells	(Mixed)	.. 306
Summerhill	(Mixed)	.. 552
Wren's Nest	(Mixed)	.. 538
Brierley Hill Grammar	(Mixed)	.. 1,042
Dudley Grammar	(Boys)	.. 543
Dudley High	(Girls)	.. 572
High Arcal Grammar	(Mixed)	.. 989
Sir Gilbert Cloughton		
Grammar/Technical	(Mixed)	.. 493

11,689

Grand Total

Primary, Secondary and Grammar	..	32,261
--------------------------------	----	--------

Nursery Schools

Netherton Park	60
Park Nursery	100
Pensnett	91
Priory	99
Wren's Nest Nursery	81
	<hr/>
	431
	<hr/>

MEDICAL INSPECTIONS

Periodic medical inspections were carried out as described in last year's report-school entrants, school leavers and, in addition, selective examinations for pupils in the years following the first medical examination. These 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 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).

<i>Age Groups Inspected (By year of Birth)</i>	<i>No. of Pupils Inspected</i>	<i>Physical Condition of Pupils inspected</i>		<i>Pupils found to require treatment (excluding Dental Disease and infestation with vermin)</i>		
		<i>Satisfactory</i>	<i>Unsatisfactory</i>	<i>For Defective Vision (excluding Squint)</i>	<i>For any other Condition</i>	<i>Total Individual Pupils</i>
1967 and later ..	279	279	—	—	30	23
1966 ..	1676	1673	3	38	168	178
1965 ..	1611	1609	2	48	167	182
1964 ..	166	166	—	3	13	16
1963 ..	45	45	—	1	2	3
1962 ..	29	28	1	2	4	6
1961 ..	13	13	—	—	2	2
1960 ..	9	9	—	1	1	2
1959 ..	5	5	—	—	—	—
1958 ..	—	—	—	—	—	—
1957 ..	140	140	—	1	6	6
1956 .. and earlier	747	747	—	22	25	42
TOTAL ..	4720	4714	6	116	418	460

The total number of children examined at routine medical inspections this year (4,720) compared to the total number examined in 1970 (6,313) shows a decrease of 1,593. This was largely due to an additional 3-month B.C.G. vaccination programme in early Spring, which had been transferred from Autumn 1970. It had been necessary to postpone the B.C.G. programme at that time to introduce rubella vaccination.

A further contributory factor was the reduction in medical officers' sessions from March until September when it was possible once again to bring the medical staff up to full establishment.

Of the 4,720 examined, 6 (0.13%) were considered to be of unsatisfactory general condition compared with 5 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
		1971
Entrants	3499	94.5
Other Periodics	334	94.6
Leavers	887	19.8

As will be seen, the attendance of parents at routine medical examinations of school entrants remains as in previous years, very good.

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	15	181	4	21	2	23	21	225
5	Eyes:								
	(a) Vision ..	89	135	23	85	3	7	116	227
	(b) Squint ..	40	78	1	1	1	8	42	87
	(c) Other ..	1	32	1	18	—	10	2	60
6	Ears:								
	(a) Hearing ..	31	151	3	13	3	11	37	175
	(b) Otitis Media	7	147	5	16	—	14	12	177
	(c) Other ..	2	63	1	11	—	10	3	84
7	Nose and Throat	18	678	4	90	2	68	24	836
8	Speech	17	124	—	6	3	22	20	152
9	Lymphatic Glands	4	126	—	10	—	8	4	144
10	Heart	17	157	—	22	1	23	18	202
11	Lungs	7	130	—	9	—	18	7	157
12	Development:								
	(a) Hernia ..	5	31	—	1	1	3	6	35
	(b) Other ..	10	129	1	—	3	32	14	161
13	Orthopaedic:								
	(a) Posture ..	11	37	2	15	—	2	13	54
	(b) Feet ..	74	225	5	39	22	47	101	311
	(c) Other ..	30	140	1	19	6	23	37	182
14	Nervous System:								
	(a) Epilepsy ..	2	27	—	3	1	3	3	33
	(b) Other ..	7	159	—	1	4	10	11	170
15	Psychological:								
	(a) Development	3	57	—	8	—	11	3	76
	(b) Stability ..	3	135	—	5	1	24	4	164
16	Abdomen ..	2	23	—	4	—	5	2	32
17	Other	28	275	4	26	2	79	34	380
	Totals	423	3240	55	423	55	461	534	4124

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.

Other Inspections

Number of Special Inspections ..	282
Number of Re-Inspections	1,335
	<hr/>
	1,617
	<hr/>

Summary of Defects Found at the Foregoing Inspections

Defect Code No.	Defect or Disease						Special Inspections	
							Requiring Treatment	Requiring Observation
4	Skin						1	57
5	Eyes:							
	(a) Vision						15	39
	(b) Squint						4	12
	(c) Other						1	11
6	Ears:							
	(a) Hearing						7	24
	(b) Otitis Media						—	17
	(c) Other						1	11
7	Nose and Throat						3	179
8	Speech						7	29
9	Lymphatic Glands						2	45
10	Heart						1	102
11	Lungs						3	88
12	Development:							
	(a) Hernia						1	8
	(b) Other						4	81
13	Orthopaedic:							
	(a) Posture						1	13
	(b) Feet						32	117
	(c) Other						7	42
14	Nervous System:							
	(a) Epilepsy						1	12
	(b) Other						17	59
15	Psychological:							
	(a) Development						6	31
	(b) Stability						8	64
16	Abdomen						—	10
17	Other						41	137

A total of 1,617 children were seen at these special inspections, 282 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 1,335 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 sessions 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, can 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 282 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	..	..	..	..	21
Fit for School	..	..	..	..	30
					— 51

Recommendations:

Unfit for School—General Practitioners notified and pupils kept under review	21
Fit for School	20
	—
	41
	—

Other Recommendations:

Restricted activities	5
Transfer to another school	2
Referred to Physiotherapist	2
To attend school part-time	1
	<hr/>
	10
	<hr/>
Failed to attend	4

Work of the School Nurse

The School Clinic Nurse carries out the major part of the nursing role in the School Health Service and each is responsible for approximately ten schools.

During the year they have attended the following:—

School Visits

Routine and Special Medical Inspections with a Medical Officer	474
Hygiene Inspections	844
Preparation sessions for Routine Medicals	57
Keystone Vision Screening	252
Heaf Test and B.C.G. Sessions with Medical Officer	142
Vaccination and Immunisation Sessions	120
Miscellaneous Visits to Schools	373
	<hr/>
Total	2,262

Home Visits:

Unsatisfactory Hygiene	607
Scabies Infestation	178
Enuretic Alarms	149
Vision Defects	71
Orthopaedic Cases	36
Ascertainments	57
Miscellaneous Visits	915
	<hr/>
Total	2,013

Attendance at Clinic Sessions

Ophthalmic	199
Ear, Nose and Throat	9
Medical Officers Special Clinic	363
Audiometry with Medical Officer	25
Enuretic Alarm Sessions	65
Miscellaneous	82
	<hr/>
Total	743

Foot Inspections

During the year 304 periodic inspections of pupils' feet were carried out by Nurses at Schools and the total number of children suffering from verrucae or fungal infection is given below :—

Verrucae	..	..	..	..	1,388
Fungal	..	..	..	..	352
					<hr/> 1,740 <hr/>

Enuresis Alarms

Enuresis alarms continued to be available from Clinics throughout the Borough. During the year 119 appliances were issued and 61 pupils were cured of this condition.

School Health Education 1971

Health Education continued in schools throughout the year, 12 Senior Schools and 1 Junior School were visited this year and a total of 308 talks were given on Health Education. These were part of a basic course introducing child care extended to bring in human relationships, the risks of infectious diseases, dangers of smoking and other health abuses.

Generally, these talks are conducted by Health Visitors and they are given in the main to groups of senior girls. Requests from Headteachers for this service have increased but we have reached the limits of what can be done within our present staff establishment.

Provision of Milk in Schools

Department of Education and Science Circular 12/71 dated 26th August, 1971, amended the regulations concerning the provision of milk in schools.

As from the 1st September, 1971, the Authority had a duty to provide free school milk only for the following classes of pupils in maintained schools :—

- (a) Pupils in Special Schools
- (b) Pupils in Infants' and Nursery Schools
- (c) Other pupils between the ages of 7 and 12 years where the medical officer certifies that the pupil's health requires that he should be provided with milk.

A letter was sent to all parents of children in the Junior Schools and the Junior end of the Primary school, requesting them to state if any of their children attending school required milk daily for health reasons. Of 14,750 letters sent, only 475 parents replied. 44 of the children were already outside the age group, leaving 431 to be considered.

The medical records of the 431 children were scrutinised and 167 were authorised free milk without medical examination because of poor physical medical history. The remaining 264 were offered appointments to be medically examined. Out of the 77 who actually attended for examination, 43 were considered to require milk daily.

The following is a summary of certificates issued authorising daily free milk in school:—

School children qualified automatically to have milk for the following reasons:

Number of pupils in Special Schools (Woodsetton, Sutton, The Brier, Old Park)	493
Number of handicapped pupils attending ordinary schools	109
Total ..	602

Children authorised free milk for other reasons:

Number of children of known problem families ..	32
Children with history of poor health	167
Children examined and considered to require milk daily	43
Total ..	242

Examination of all new entrants to school in the future

The medical officer will make recommendations on the School Medical Card of those children whom it is considered may need to be reviewed in their last year in the Infants' School for provision of free milk between the ages of 7 and 12 years.

Vaccination and Immunisation

B.C.G. Vaccination of School Children

Ministry of Health Circular 19/64 gives information and recommendations on vaccination against tuberculosis.

The arrangements, as well as providing for the vaccination of contacts of cases of tuberculosis, included the vaccination of children of 13 years of age and over. In addition, children between 10 and 13 can be offered vaccination at the discretion of the Local Authority as well as pupils over 14 years of age, students at Universities, Teachers' Training Colleges, Technical Colleges or other establishments of Further Education.

All children in their second and subsequent year at a Secondary School and students attending the Teachers' Training Colleges were offered Heaf Test and, where necessary, vaccination or chest X-ray. The figures below indicate the work undertaken during the year.

School Children

Number offered skin test	5,132
Number of consents received	4,482
Number of skin tests (first time)	3,885
Number retested (absentees and doubtfuls)	511
	<hr/> 4,396
Number with positive reaction	473
Number with negative reaction	3,875

3,874 pupils with a negative reaction were vaccinated, 134 children were found unsuitable for vaccination on medical and other grounds as follows:—

Having course of injections	6
Already had B.C.G. at Chest Clinic ..	21
Under medical treatment	6
Consent for skin test only	1
To receive B.C.G. in 1972	97
(absent from school during B.C.G. Programme)	
Left Area	3
	<hr/> 134

Investigation following B.C.G. Vaccination

As stated in last year's report, at the 1970 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 negative. It was agreed to carry out a survey to review the position in Dudley and in that year a small pilot survey was introduced and carried out by Dr. M. Kerrigan, Principal Medical Officer. The number of pupils involved was considered too small to allow for any conclusions to be drawn and it was proposed to continue this investigation during 1971. The results obtained are as follows:—

Vaccination was carried out by one of two methods:

- (a) Dermojet — Autoclaved
- (b) Needle and syringe — disposable, pre-sterilised

B.C.G. vaccine material was supplied by Glaxo. The vaccine count was within the range $4-9 \times 10^6$ /ml.

Heaf testing solution—P.P.D. 2 mg./ml. (100,000 T.U.)

In the first quarter of 1971, 2,000 children in the age group 13-14 years in Dudley Schools were B.C.G. vaccinated after testing. About half were vaccinated using the Dermojet method and the other half using the traditional needle and syringe method.

Between 8 and 10 weeks later, 874 of these children were Heaf Tested for the second time. Of the total, 465 had been B.C.G. vaccinated using the Dermojet method and the remaining 409 using the needle and syringe method.

The following results were obtained :

A. DERMOJET METHOD

Schools	No. of Pupils Heaf Tested	No. of Total Conversion	No. of Partial Conversion	Negative or No Reaction
Dudley Girls' High	96	36	40	20
Brierley Hill Grammar	95	51	34	10
Brierley Hill Secondary	83	27	27	29
High Arcal Grammar	111	14	51	46
Ellowes Hall Secondary	80	19	22	39
Totals	465	147	174	144
Percentage		31.6%	37.4%	30.9%

B. NEEDLE AND SYRINGE METHOD

Schools	No. of Pupils Heaf Tested	No. of Total Conversion	No. of Partial Conversion	Negative or No Reaction
Dudley Grammar	68	32	28	8
Quarry Bank Secondary	46	3	16	27
Kingswinford Secondary	63	5	22	36
Summerhill Secondary	68	6	28	34
Saltwells Secondary	48	28	17	3
Hillcrest Secondary	49	30	16	3
Holly Hall Secondary	67	41	22	4
Totals	409	145	149	115
Percentage		35.4%	36.2%	28.1%

The reactions were divided into (a) total conversion, (b) partial conversion, and (c) negative or no reaction. The standard for classification was as follows:—

- (a) Negative or no reaction .. no papule
- (b) Partial conversion .. 1 to 3 papules
- (c) Total conversion .. 4 or more papules, or a greater reaction.

The percentage of total conversions using the Dermojet method, that is 31.6% compares favourably with the number of conversions using the needle and syringe method, 35.4%, and the comparable number of negative reactions are also very similar, 30.9% and 28.1%.

However, the two Medical Officers carrying out the work noticed towards the end of the survey that the Dermojet did not consistently deliver a full dose of 1 ml. This was judged by the size of the intradermal lesions, which varied from 5 mms. in diameter to less than 2 mms. As a result, the Dermojets were tested, when it was found that only one delivered the correct amount of vaccine. The other five jets delivered as follows:—

2 dermojets	—	0.06 ml./per dose
2 dermojets	—	0.04 ml./per dose
1 dermojet	—	0.025 ml./per dose

This is a fault which was reported in the 'Medical Officer' on 13th November, 1970, when Waind and Burland reported as follows:—

"The diameters of the weals at the time of 'Panjet' vaccination, even after excluding the injections that failed because of vaccinator error, were very significantly smaller than those produced by syringe ($p=0.001$). This indicated that less vaccine was being injected intradermally by 'Panjet' and was reflected in the lower figures for mean diameters of the reactions and tuberculin tests at six weeks."

At first sight, therefore, it would appear that there is not much to choose between the Dermojet and the needle and syringe method of B.C.G. vaccination. However, if the mechanical fault in the Dermojet can be eradicated, then this method should give better conversion results and in addition it has the advantage of being easier to administer and is more acceptable to pupils.

The 874 pupils in this group will now be Heaf tested annually for the next few years and a similar survey will take place in early 1972.

Vaccination and Immunisation in Schools—1971**Smallpox***

Primary	..	..	..	..	—
Re-vaccination	..	..	..	..	1,641

*Re-vaccination against Smallpox was discontinued in mid 1971

Diphtheria/Tetanus

Initial	..	..	..	..	322
Re-inforcing	..	..	..	..	2,468

Diphtheria Only

Initial	..	..	..	..	15
Re-inforcing	..	..	..	..	24

Tetanus Only

Initial	..	..	..	..	424
Re-inforcing	..	..	..	..	1,587

Measles

Initial	330
---------	----	----	----	----	-----

Poliomyelitis

Initial	..	..	..	..	864
Re-inforcing	..	..	..	..	4,043

Typhoid

Initial	..	..	..	..	45
Re-inforcing	..	..	..	..	3

Infectious Disease—School Children

				<i>Male</i>	<i>Female</i>	<i>Total</i>
Scarlet Fever	..	..	..	4	6	10
Measles	..	..	..	175	145	320
Dysentery..	..	..	..	8	8	16
Food Poisoning	..	..	..	1	—	1
Tuberculosis (Pulmonary)	..			1	—	1
Tuberculosis (Non-Pulmonary)				—	3	3
Infective Jaundice	..	..		1	2	3
Whooping Cough	..	..		4	6	10
Meningococcal Meningitis	..			1	—	1

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

During the year 30 families were referred to Central Clinic as being in need of treatment for scabies. These families included 51 adults, 18 children under five and 51 children of school age, compared with 46 adults, 26 children under five and 54 children of school age in 1970.

Treatment is given to all affected school children—a bath followed by the application of quellada 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 at home.

Specialists' Clinics

The service continues to be indebted to the Regional Hospital Board and Hospital Management Committee for providing 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 160 children requiring treatment for eye conditions (116 for errors of refraction, 44 for squint and other conditions) and 374 were noted for future observation.

The 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 at Brierley Hill, Sedgley, Coseley and Kingswinford.

We were fortunate to obtain the services of an additional Consultant Ophthalmologist, Dr. M. Ali, who was appointed on 16th November, 1971, to carry out ophthalmic work at Central, Brierley Hill, Sedgley, Coseley and Kingswinford Clinics.

A total of 203 sessions was arranged in respect of these Clinics, when 773 children were examined for the first time and 1,074, previously examined, were reviewed.

Spectacles were provided for 870 children.

As will be seen, the statistics for ophthalmic work show an overall increase and it has been possible, with the services of an additional ophthalmologist, to reduce the waiting list of review cases, from 12 months to 3 months.

	<i>Number of cases known to have been dealt with</i>
External and other excluding errors of refraction and squint	45
Errors of refraction including squint	1730
	1775
Number of children for whom spectacles were prescribed	870

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 ..	10 boys

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 Snellen 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	12,113
Number found to have visual defects	1,091

Of this number (1,091)

Number referred to Eye Clinic	495
Number already given appointment	76
Noted for observation	505
Seen previously and discharged	7
Left district, made own arrangements or did not attend	8

Orthoptic Clinic

Throughout the year the visiting Orthoptist continued to carry out 4 sessions monthly at the Central Clinic and the following are details of the work done:—

New Cases	..	..	..	..	..	..	118
Old cases:							
For treatment	..	..	..	..	..	123	
For occlusion	..	..	..	..	..	14	
For test and observation	..	..	..	..	..	12	
For periodic check-up	..	..	..	..	..	11	
Miscellaneous visits	..	..	..	..	..	45	
						—	205
Total attendances	..	..	..	..	..	..	323
Discharges:							
Cured by Orthoptic treatment	..	..	..	..	..	..	27
Cured by Orthoptic and operative treatment	..	..	..	..	..	..	—
Transferred to hospital for operative treatment..	..	..	..	..	..	..	2
Good cosmetic result	..	..	..	..	..	..	1
Failed to attend	..	..	..	..	..	..	12

Orthopaedic Clinic

During 1971, Mr. J. A. O'Garra, F.R.C.S., continued his fortnightly visits, the Orthopaedic Clinic remaining under the direction of the Dudley and Stourbridge District Hospital Group.

The number of pupils treated, 488, showed an increase of 108 as compared with the preceding year. The 698 children noted at routine medical inspections as having orthopaedic defects included 151 who required treatment and they are included in the total of 488 referred to above. The remaining 547 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 107. In addition, 8 children received operative treatment for other conditions.

During the year at medical inspections 87 children were noted as requiring treatment and 1503 kept under observation.

Treatment

	<i>Number of cases known to have been dealt with</i>
Received operative treatment:	
(a) for disease of the ear	11
(b) for adenoids and chronic tonsillitis ..	107
(c) for other nose and throat conditions ..	8
Received other forms of treatment	—
	126
Number of school children seen by E.N.T. Specialist	61
Number of school children for whom hearing aids were prescribed	6

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. General practitioners continue to refer children direct to the school Audiology Service.

Of the 19,739 children tested by "pure tone" audiometer, 956 were referred for further audiometer testing and clinical examination by the Principal Medical Officer or Consultant Surgeon. A further 18 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	188	
Re-examinations	19	
	—	207
Failed to attend		41
		—
		248
		—

Of the 207 seen at the clinics, 15 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	22
Children in Junior and Secondary Schools receiving hearing aid instruction	5
Children receiving hearing aid instruction at home	12
Children given special hearing test in school ..	189
Children given special hearing test at home ..	11
Children given special hearing test at clinics ..	1
Speech/Hearing tests given to children in Schools	—

Child Psychiatric Services

Child Guidance facilities were available at Central Clinic throughout the year. There is undoubtedly a shortage of doctors in the field of psychiatric medicine as it has not been possible to obtain a replacement for the clinical assistant who left during 1970, and Dr. D. T. Maclay, Consultant Child Psychiatrist, worked single-handed during the year to deal with a heavy case load of new and old cases. A further setback was the resignation in early December of the Psychiatric Social Worker. By the end of the year this post had not been filled.

Despite staff shortage, Dr. Maclay carried out his weekly sessions and saw as many patients as time allowed.

The sources of referral to Central Clinic Child Guidance Service during 1971 were as follows:—

General Practitioner, Medical Officer or Consultant, Teacher or Education Welfare Officer	68
Childrens' Officer, Juvenile Court, or Probation Officer	5
Education Psychologist	10
Others.. .. .	2

The following is an analysis of new cases:—

Organic or constitutional	8
Anxiety	24
Psychosomatic	5
Problems related to education	4
Behaviour disorder and delinquency	37
Family, social and sexual	5
Autistic	2

During the year 40 children admitted to the Remand Home at Saltwells House were referred to Dr. Maclay by the Courts.

Total number of interviews:—

Psychiatrist	315
----------------------	-----

Child Psychiatric Services in the Black Country have been the topic for much discussion over the years, and in 1970 the Department of Health gave authority for a new appointment of a Consultant Child Psychiatrist to provide a service in the Dudley, West Bromwich, Walsall and Warley County Boroughs, this to include work in the Child Guidance Clinics and schools for the maladjusted. Provision was made in Dudley for six hospital beds to be available in the Paediatric Department, together with supporting outpatient facilities.

Dr. Helen Lloyd, Consultant Child Psychiatrist, was appointed to this post in February, 1971, and accommodation was made available for her in Burton Road Hospital.

As Dr. Lloyd's accommodation in Dudley is in a hospital, it is envisaged that children from outside Dudley County Borough would be seen there and that these, in the main, would come from Warley and parts of West Bromwich.

The task of establishing the services outlined in the original proposals occupied most of Dr. Lloyd's time during the year, when she prepared and submitted a report to the Regional Hospital Board on the setting up of a Child Psychiatric Service in the West Midlands, together with a plan for the formation of a working party representing the various Local Authorities and the Regional Hospital Board, who would assist in co-ordinating the work of the various disciplines: medical, social and educational, and in developing the services at present offered by the various institutions within the Borough, so that they would complement each other. Initially the working party would be set up for a period of 3 years and would report to the Board on the general progress of the Child Psychiatric Services.

13 Children were seen by Dr. Lloyd toward the end of the year. All these cases were classified as Psycho-neurotic or behaviour disorders or combination of both. The sources of referral were as follows:—

- 8 were referred by the G.P's
- 1 was referred by a Consultant Physician
- 1 was referred by a Consultant Paediatrician
- 1 was referred by a Consultant Orthopaedic Surgeon
- 1 was referred by the Medical Officer of Health
- 1 was referred by the Social Services Department

Handicapped Children

Pre-school assessment of the handicapped child has now become an established part of the Child Health Service. These children are seen at clinics or, when necessary, in their own home, at frequent intervals throughout early infancy until such time assessment is possible for their early placement in a suitable school.

The results and recommendations of all ascertainties carried out by medical officers are passed to the child's general practitioner. Good working arrangements continued to exist between general practitioners and hospitals throughout the year.

Handicapped children are seen on every visit to the school by the medical officers and, for those at residential school, 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, 1971, there were five children in residential special schools.

One pupil was ascertained as blind during the year and awaiting placement at the end of 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, 1971, there were seven children in residential and two in day special schools.

Two pupils were ascertained as partially sighted during the year, one of whom was admitted to the George Auden Day School for Partially Sighted Pupils and the second child has been accepted as suitable for admission to the same school and is awaiting a vacancy. One child left residential school having attained school leaving age.

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, 1971, there were five children in day special schools and four pupils in residential special schools.

No pupils were ascertained as deaf during the year.

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, 1971, there were nine children in day special schools, three children attending Stow Heath Unit for Hearing Impaired Children at Willenhall and two children attending residential special schools.

Two children were ascertained as partially deaf during the year. One child was admitted to the Braidwood Day School and the other was recommended for transfer from the Braidwood Day School for a trial period in an ordinary school.

One child left residential school during the year having attained school leaving age.

One child was admitted to Stow Heath Unit for Hearing Impaired Children during the year.

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, 1971, three children were attending the Fitzwilliam Day School, Tipton. One child left the William Baxter School, Cheslyn Hay, Walsall, during the year having attained school leaving age.

At the same time, nine children were attending Residential Special Schools as follows:—

David Lewis School, Coldhurst, Bromsgrove	..	..	1
Pudleston Court, Near Leominster	..	..	2
St. John's School, Brighton	..	..	1
St. Mary's School, Horam, Sussex	..	..	1
Walton Hall, Staffordshire	..	..	1
Crowthorn, Edgworth, Nr. Bolton	..	..	3

Three children were ascertained as educationally subnormal during the year. One child who is also an epileptic was transferred from Sutton Day Special School to the David Lewis School, Cheshire, during the year. One child who was awaiting admission at the end of last year was admitted to the Pudleston Court School. Two children, both of whom have been accepted as suitable candidates for the Hilton Grange School for Educationally Subnormal pupils were awaiting admission at the end of the year.

234 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 schools, and, in special cases, in the child's home. The following recommendations were made:—

Ascertained Educationally Subnormal

To attend Day Special School	100	
To remain at Ordinary School	23	
Residential School for Educationally Subnormal	3	
	<hr/>	126
Re-ascertained—to receive voluntary care and guidance after leaving school		42

Other examinations

Unsuitable for education in ordinary school, to attend the Old Park School	10	
Children attending the Old Park School, re-ascertained	1	
Not educationally subnormal	18	
Deferred for further ascertainment under Section 34, Education Act, 1944	29	
Children attending Day Special School re-ascertainment examinations	1	
To leave school without supervision	7	
	<hr/>	66
		<hr/>
		234
		<hr/>

During the year 37 appointments for the examination or ascertainment of handicapped pupils were not kept.

At the end of the year there were 120 ascertained educationally subnormal pupils at Sutton Day Special School, 114 at the Woodsetton School (Dudley County Borough being responsible for 77 of these), 84 at The Brier School, 3 at Day Special Schools outside the Borough, 9 at Residential Special Schools and 180 awaiting places at Day or Residential Special Schools for educationally subnormal 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 educational re-adjustment."

As at 31st December, 1971, eighteen pupils were attending the following schools:—

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

Eight children were ascertained as maladjusted during the year. One child was admitted to the Pudleston Court School, Nr. Leominster. One child was admitted to The Brier Day Special School pending admission to a Residential Special School and the other six children were awaiting admission to schools at the end of the year.

One child was transferred to Dudley from Warley County Borough and continued to attend Shenstone Lodge School, West Bromwich. One child who was awaiting admission to a Residential School at the end of last year, was admitted to the Allerton Priory School. One child who attained his sixteenth birthday during the year and was due to leave school is to remain at Ashley Residential School until Easter, 1972.

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 seven children attended the following day schools:—

Carlson House School for Spastics, Harborne ..	4
Victoria School, Bell Hill, Northfield, Birmingham	2
Wightwick Hall School, Wolverhampton	1

One child attended Carlson House School until July, 1971, when it was recommended that he be transferred to an ordinary school.

Six children were at Residential Schools as follows:—

Bethesda Hospital School, Cheadle, Cheshire ..	2
Wightwick Hall, Wolverhampton	4

One child who was attending Exhall Grange Special School died in February, 1971, following an accident at school.

66 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	16
Re-examinations (routine medical inspections etc. of children at residential schools)	43
Ascertained as delicate or physically handicapped ..	2
Ascertained physically handicapped for admission to residential or day special schools	5

Of the five pupils recommended for admission to Residential or Day Special Schools two have been admitted to The Victoria School, Bell Hill, Northfield, Birmingham. One child has been admitted to the Bethesda Hospital School, Cheadle, Cheshire, and two are awaiting vacancies at Special Schools.

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.

During the year under review, staff in post were: One Senior Speech Therapist, working 7 sessions and one full-time Speech Therapist. A further part-time Speech Therapist re-commenced her duties in September after a period of illness, for 2 sessions per week.

A total of 1.9 Speech Therapists is engaged to serve a school population of 32,692. The recommended staff ratio is one therapist per 10,000 school children.

Mrs. Stuffins, Senior Speech Therapist, comments on the service as follows:—

"The present staff is stretched to the limit treating children on a $\frac{1}{2}$ hour per week basis at Health Centres/Clinics. This means that children attending special schools are not receiving the attention they need. The headteachers of these schools have been requesting specialised help for the children with speech and language difficulties. In the hope of achieving a faster rate of improvement, we instituted a new approach to treatment.

In September we held the first Intensive Speech Therapy Group Session at Red Hall Infants' School. The results were very encouraging indeed and subsequent review of cases has shown no regression. The newly purchased Reynell Language Scales and the Illinois Test for Psycholinguistic Abilities proved invaluable in assessing these children with language difficulties. We used many tests at the beginning of the 3 week session and carefully charted the results. The Renfrew Articulation Assessment was the one test we were able to apply at both beginning and end of the Course and this gave us a measured improvement percentage. The other results in language use, attitude to communication both in the group and in the classroom, were remarked upon by teachers and parents.

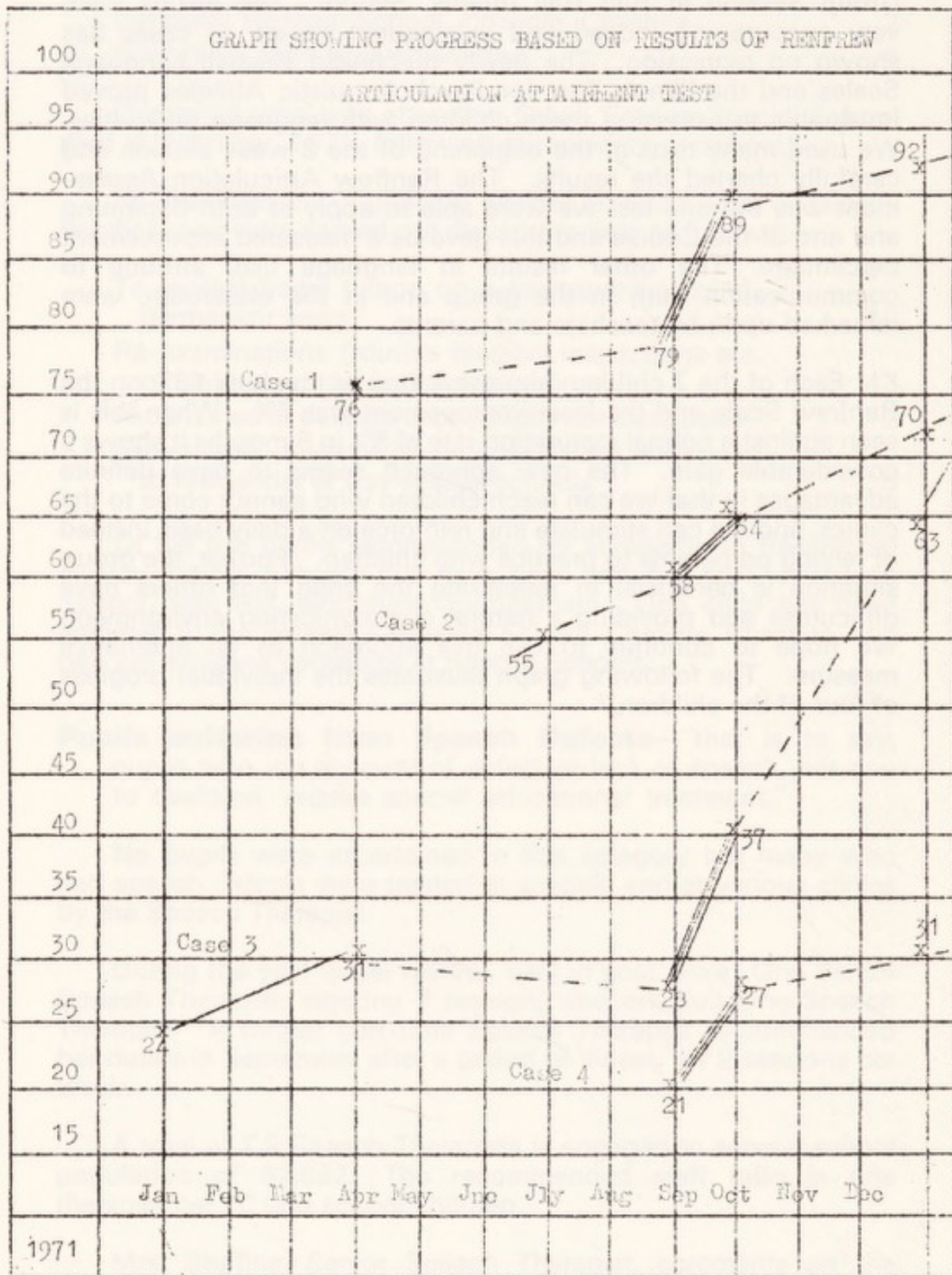
Each of the 7 children improved, one as much as 18% on the Renfrew Scale and the least improvement was 6%. When this is seen against a normal maturation rate of 5% in 6 months it shows a considerable gain. The new approach seems to have definite advantages in that we can reach children who cannot come to the clinics, and we can stimulate and reinforce on a daily basis instead of relying on parents to practice with children. Further, the group situation is beneficial in reassuring the child that others have difficulties and providing a natural communicating environment. We hope to continue to use this approach as an alternative measure. The following graph illustrates the individual progress of four of the children."



Graph showing individual progress of four children on the Renfrew Scale over a 12 week period.

The graph shows that all four children showed improvement over the 12 week period. The child who started at the highest level (45) showed the most improvement, reaching 95 by week 12. The child who started at the lowest level (15) showed the least improvement, reaching 45 by week 12.

The graph also shows that the children's progress was not linear. Some children showed rapid improvement in the first few weeks, while others showed more gradual improvement over the 12 week period.



NOTES ON GRAPH SHOWING PROGRESS ON THE RENFREW
ARTICULATION ATTAINMENT TEST.

- indicates $\frac{1}{3}$ hour per week treatment
 ----- no treatment
 ===== Intensive treatment

Case 1.

A shy, inhibited child. Substituted 't' and 'd' for many sounds. Responded very well to intensive treatment and her personality and classwork improved considerably. She has had persistent tonsillitis since infancy. Matured sufficiently to be discharged since.

Case 2.

A stubborn, immature child. Speech unintelligible at first. Early history of chronic tonsil enlargement and catarrh making her a mouth breather. Great improvement during the first intensive session both in speech and classwork. Her mother and teacher were impressed with the change in her social behaviour and level of play maturity.

Case 3.

A very withdrawn child. Delayed language development and unintelligible speech which showed slight regression on school entry in September, 1971. Showed great improvement during intensive treatment which continued to mature afterwards on a rapid scale. He improved socially and was more alert to stimulation.

Case 4.

Her hearing was recently tested and shown to be very poor. She is now receiving treatment for her chronic catarrh and enlarged tonsils and adenoids. She is now 7 years old and has suffered from this condition since infancy. Further improvement will be very limited until she receives satisfactory treatment for her E.N.T. condition.

Summary

1 child needed no further treatment.

2 children have E.N.T. conditions and need further treatment.

1 child is maturing rapidly and may require more treatment.

In each case improvement was retained and further maturation took place.

The Intensive treatment has proved valuable in each of these four cases. The rate at which a child's articulation normally develops is 5% in six months on this scale. The children can be seen to do this in the areas where no treatment is given.

I feel that Intensive treatment has saved time for both the child and therapist and given great encouragement to mature further towards the norm.

The Annual figures show a much lower referral rate because the school survey was carried out the previous year.

The attendance for treatment is much higher and other figures are somewhat improved. We are seeing the benefit of Mrs. Giles working full-time this year.

Visits to Reynell Course lasting 2 days in Birmingham were made by Mrs. Giles and myself in April. I visited a Day Lecture Course in Leeds in October at my own expense and in my own time. We continue to have a good relationship with speech therapists in Warley and they have visited us. Three prospective speech therapists have visited clinics, one is now a Student at Leicester College of Speech Therapy. We hope that sometime in the future we may see them working for Dudley."

Details of the work done for the year are as follows:—

Number of attendances for treatment	..	3,197	
Number of attendances for interview	..	303	
Number of attendances for review	..	454	
		<hr/>	3,954
Number of referrals	.. .. .	171	
Reasons for referral:			
Dyslalia	.. .. .	144	
Stammer	.. .. .	16	
Others	.. .. .	11	
		<hr/>	171
Sources of referral:			
Headteachers	.. .. .	37	
Medical Officers	.. .. .	64	
Others	.. .. .	4	
Health Visitors	.. .. .	65	
		<hr/>	170
Numbers discharged during the year:			
Cured	.. .. .	100	
Maximum Improvement	.. .. .	54	
Others	.. .. .	6	
		<hr/>	160
Number on Waiting List at end of year	..		206

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 nine children in this category in the following schools:—

West Kirby Children's Convalescent Home and School, Cheshire	.. .. .	2
The Beacon School, Lichfield (one boy who is also educationally subnormal)	.. .. .	1
Kingswood Open Air School, Wolverhampton	..	6

Two children who were attending Mouton House School, Chepstow, Monmouthshire, were discharged by the school as being fit to attend ordinary schools. Four children were admitted to Kingswood Open Air School, Wolverhampton, during the year.

Children Unsuitable for Education in School

During the year ten children were ascertained and recommended as being suitable for admission to the Old Park School. One child was re-assessed and recommended to remain at the Old Park School and be re-assessed in one year's time.

Tuition in Hospital

72 Dudley school children between the ages of 5 and 15 years were given tuition in the Dudley Guest Hospital and 52 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

Dental	16
Chest condition	34
Ear, Nose and Throat condition	121
Skin condition	6
Surgical treatment.. .. .	123
Orthopaedic and Rheumatic condition	28
Appendicectomy	40
Investigations	61
Accidents and Casualties	68

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 Health 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 7.4 dentists were employed out of an establishment of 8. The Chief Dental Officer attended a part-time Course at The Birmingham Dental Hospital three days per week from October onwards.

The only auxiliary on the staff resigned for family reasons in October, 1971, and has not yet been replaced.

Dental Health Education

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

I am reassured by the School Meals Service that slices of raw carrot (when carrots are of good quality) are still being given to children after school meals as detergent food. Most tuck shops in schools 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 dental decay in this Country. (The British head the World's sweet eating league table with a consumption of 8 oz. per head per week).

The dental auxiliary spent only 4 sessions at schools this year but dental officers devoted the equivalent of 9 sessions talking about oral hygiene at the chairside. In addition health visitors gave talks on oral hygiene to senior girls.

Pierre the Clown visited 35 schools (Primary, Junior and Infants') and gave 20 minute talks on oral hygiene.

A Film on prevention of tooth decay was shown to 3 senior schools.

Fluoridation of Water Supply

I regret to report that the Council still rejects the proposal to add fluoride 1 ppm to the water supply. The report by Beal and James from a Survey on the state of the teeth of 5 year old children in Dudley which has no fluoride, and Birmingham which has, indicates the benefits which Dudley children are denied.

Dental Inspection and Treatment

- 14,221 were inspected at school
- 2,582 were inspected at clinics
- 1,171 were re-inspected at school or clinic
- 12,279 required treatment
- 10,114 were offered treatment
- 7,464 were treated, during 16,952 attendances

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

Attendance and Treatment	
First Visit	7,464
Subsequent Visits	9,488
Total Visits	16,952
Additional courses of treatment commenced	715
Fillings in permanent teeth	13,538
Fillings in deciduous teeth	7,294
Permanent teeth filled	11,231
Deciduous teeth filled	6,659
Permanent teeth extracted	1,120
Deciduous teeth extracted	4,272
General anaesthetics	778
Emergencies	437
Number of pupils X-rayed	508
Prophylaxis	1,997
Teeth otherwise conserved	930
Number of teeth root filled	55
Inlays	—
Crowns	34
Courses of treatment completed	5,847
Orthodontics:	
New cases commenced during the year	151
Cases completed during the year	78
Cases discontinued during the year	4
Number of removable appliances fitted	153
Number of fixed appliances fitted	7
Pupils referred to Hospital Consultant	7
Prosthetics:	
Pupils supplied with F.U. or F.L. (first time)	—
Pupils supplied with other dentures (first time)	22
Number of dentures supplied	29
Anaesthetics:	
General anaesthetics administered by Dental Officers	28
Inspections:	
(a) First inspection at School—number of pupils	14,221
(b) First inspection at Clinic—number of pupils	2,852
Number of (a) plus (b) found to require treatment	11,312
Number of (a) plus (b) offered treatment	10,114
(c) Pupils re-inspected at School or Clinic	1,171
Number of (c) found to require treatment	967
Sessions:	
Sessions devoted to treatment	2,904
Sessions devoted to inspection	128
Sessions devoted to Dental Health Education	9

Head Infestation

Contrary to the national trend, there was a slight decrease in the number of children found to be infested during 1971.

74,120 inspections were carried out; 1,099 individual cases of infestation were reported. This represents an infestation rate of 1.48% against 1.68% last year.

532 cleansing notices were issued and 607 parents were visited.

Persistent vigilance, and education of both children and parents to an increased awareness of the problem, was the procedure throughout the year. Each term hygiene inspections were carried out in schools by nurses.

The parents of those children found to be verminous or infested with nits were informed of this by letter, together with details of the cleansing procedure. If, for any reason, the cleansing procedure could not be carried out at home, arrangements were made for this to be done at one of the clinics. If, however, infestation was still present, a cleansing notice was issued to the parents, giving an appointment at the clinic. In cases where the children are still heavily infested, the Medical Officer issues a cleansing order, and the child is compulsorily cleansed. I am pleased to report that during 1971, no compulsory cleansing orders were issued.

During the year a new cleansing product was introduced—"Prioderm" lotion, which is the only product so far effective in the destruction of nits. The lotion was given a trial in areas in the Borough where the incidence of infestation was highest and results so far have been encouraging. Its success, however, still depends upon the total family acceptance of treatment to avoid re-infestation.

Employment of School Children

108 children were examined as school leavers and Forms Y.9 or Y.10 completed where necessary and sent to the Youth Employment Officer indicating the type of work for which the Medical Officer considered the child to be unsuitable.

It was found necessary to exclude 78 children from one or more of the following categories of work:—

Number of Children Excluded	1. Heavy Manual work	2. Sedentary work	3. Indoor work	4. Prolonged standing etc.	5. Exposed to bad weather	6. Wide changes in temperature	7. Work in damp atmosphere	8. Work in dusty atmosphere	9. Much stooping	10. Work near moving machinery or moving vehicles	11. Work at heights	12. Normally acute vision	13. Normal colour vision	14. Normal use of hands	15. Handling or preparing food	16. Work requiring freedom from damp hands or skin	17. Normal hearing
1					+			+									
17												+					
4							+	+									
8																	
5																	
2				+										+			
6	+																
20													+				
1							+	+							+		
1																	
1	+			+								+					
1																	
1																	
1	+			+	+	+	+	+									
1																	
1	+			+	+	+	+	+	+	+							
1	+			+	+	+	+	+	+	+							
1									+								
1												+					
1																	
1																	
1	+																+

Total Children—78

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 189 and all children were found to be medically fit to carry out the following occupations:—

Shop Assistants	..	..	..	..	104
Newspaper Delivery	..	..	..	..	72
Hairdressers	..	..	..	..	—
Others	..	..	..	..	13
					<hr/> 189 <hr/>

Astley Burf Camp

As in previous years, approximately 40 pupils went to this Camp each week from Monday to Friday throughout the Summer months, boys and girls alternating weekly. They were accompanied by teachers and their 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 two 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 of Dudley.

Deaths of School Children

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

- Case 1. A boy aged 6 years
Haemopneumothorax due to a road accident
- Case 2. A boy aged 8 years
Haemolytic Uraemia syndrome
- Case 3. A boy aged 11 years
Brain Injuries. Road Accident
- Case 4. A boy aged 12 years
Multiple Injuries (Misadventure)
- Case 5. A girl aged 6 years
Drowning. Misadventure
- Case 6. A boy aged 15 years
Cerebral Tumour
- Case 7. A boy aged 11 years
Toxaemia, acute bronchitis, severe muscular dystrophy
(This child was known to us for some time and was attending a residential school for physically handicapped children)

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

During the year 171 candidates were examined for admission to Training Colleges and a medical report completed in each case and forwarded with Forms 13TT 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 28RQ 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, 1971**

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

Mr. Mayor, Ladies and Gentlemen,

The year under review has to a considerable extent been one of consolidation and sustained effort on the part of the staff, and I am glad to be able to say that in spite of pressure it has not been necessary to neglect any section of the department's responsibilities.

Pollution of the environment in all its many forms is becoming a major issue in the minds of the people, and there is an increasing demand for the advice and aid of the department.

Housing

Work on clearing the remaining unfit houses in the County Borough continued during the year, and there are now no large areas remaining in the County Borough. Most of the unfit properties still to be dealt with are in isolated pockets, and dealing with them will create problems which did not exist in the large areas. Considerable progress was made during the year in the actual demolition of the unfit properties.

The number of discretionary grants approved during the year was 200 as compared with 96 in 1970, and the number of houses actually improved was 142 as against the 1970 figure of 70. This increase is to be welcomed, but I still feel that full advantage is not being taken of grant facilities, and I would urge all owners of property capable of improvement to give serious consideration to the modernisation of their property, particularly in the case of tenanted houses.

No special problems were encountered during the year with regard to houses in multi-occupation. The number of houses so used in the County Borough is relatively small, and shows a tendency to decrease.

**Supervision of Food Premises and Meat and Food
Inspection**

A large proportion of time is spent in the routine inspection of food premises to maintain a high standard of hygiene. These inspections also present the opportunity for instruction in food hygiene to be given to the food handler. Where large numbers can be grouped together formal teaching has been carried out, and this year has seen such teaching extended to the staff from canteens, food kitchens, bakehouses, and large food stores. In some cases it has been possible to contribute to the training programme of the firms concerned, and in others it has been a new experience. I feel that with the adequate training of the food handler in all the aspects of food hygiene, progress will be slow, and the time spent by Inspectors in this cause is time well spent.

Meat inspection still absorbs a large amount of time of the department. It is interesting to note that there has been an increase this year of 20% in the number of animals killed, but as in previous years, 100% inspection has been maintained. It has been difficult to cope with an increase of this size and to sustain the high standard of inspection carried out. The fact that this has been done reflects great credit on the staff.

This year has seen a number of complaints of unsatisfactory food sold to the public increased by 23% above last year's figure, and can be attributed to the growing awareness of the value of complaint by the public. A number of these complaints have necessitated prosecution, which leading to publicity has stimulated public interest. Justifiable complaints often lead to self criticism by the firms concerned which can mean the adoption of new methods. A satisfactory end product to complaint is its non recurrence. This is why complaint is welcomed and fully investigated.

General District Work

The number of complaints received which necessitated inspections under the provisions of the Public Health Acts continues to fall as is to be expected with the acceleration of the clearance or improvement of older houses. Complaints received to-day however, reflect an increasing desire for higher standards on the part of members of the general public or perhaps a degree of intolerance caused by urban pressures. In consequence such complaints are often more time consuming, and difficult than work which was primarily concerned with housing defects and often offer no convenient remedy.

Noise complaints continue to increase rapidly as may be seen in the main body of the report devoted to this subject. Noise and air pollution are often attributed to industry and recent publicity in connection with all forms of pollution may be in danger of producing a backlash from industrialists. In general they are co-operative and do not wish to cause nuisance or pollution. With all the current pressures, however, there is considerable danger with so much being required to be done, that spreading all their resources over too wide an area will produce too little improvement or too slow a rate of progress in any one direction.

Houses are being built in areas where given greater freedom town planners would not have them. Unfortunately the need for more houses can only accelerate this trend. People will buy these houses and then having done so become dissatisfied with their environment.

It is becoming increasingly common to hear of people who having bought such houses turn to Local Authorities or other bodies to help them with problems which they themselves should have foreseen.

The work of administration in connection with the Offices, Shops and Railway Premises Act highlighted again the possibility of a lack of knowledge on the part of employers. It seems strange that with so many premises covered by this Act in the Borough that only twenty two notifiable accidents occurred during the year.

Sewage Disposal

I am again indebted to Mr. B. Hartley, Manager to the Upper Stour Main Drainage Authority for information about present and future plans for improvements in sewage disposal.

Conclusion

I would again like to record my thanks to all members of the staff for the efforts which they have made during the year. The "team spirit" and loyalty in the department are very high, and they have contributed in no small measure to a successful year's work.

I would wish particularly to thank the Chairman and members of the Health Committee for their continued interest and support throughout the year.

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	7,257	33	45	37,043	22,562
Number inspected	7,257	33	45	37,043	22,562
All diseases except tuberculosis and cysticerci:—					
Whole carcasses condemned ..	1	—	—	4	7
Carcasses of which some part or organ was condemned ..	891	—	—	651	1,417
% of the number inspected affected with disease other than tuberculosis and cysticerci	12.3%	—	—	1.75%	6.28%
Tuberculosis only:—					
Whole carcasses condemned ..	—	—	—	—	—
Carcasses of which some part or organ was condemned ..	1	—	—	—	26
% of the number inspected affected with tuberculosis ..	—	—	—	—	.11%
Cysticercosis:—					
Carcasses of which some part or organ was condemned ..	—	—	—	—	—
Carcasses submitted to treatment by refrigeration	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Meat Condemned

	<i>Cattle</i>	<i>Cows</i>	<i>Sheep</i>	<i>Pigs</i>	<i>Total</i>
Carcasses	1	—	4	7	12
Livers	503	—	528	1,110	2,141
Lungs	414	—	44	1,071	1,529
Plucks and Frys	—	—	12	471	483
Shoulders	—	—	2	—	2
Heads	10	—	—	57	67
Kidneys	—	—	—	1	1
Hearts	6	—	1	112	119
Legs	—	—	—	6	6
Hindquarters	2	—	—	1	3
Spleens	2	—	—	—	2
Hocks	—	—	—	7	7
Foreleg	—	—	—	1	1
Intestines	—	—	—	1	1

DISEASES

	<i>Cattle lbs</i>	<i>Cows lbs</i>	<i>Sheep lbs</i>	<i>Pigs lbs</i>	<i>Calves lbs</i>	<i>Total lbs</i>
Abscesses	4,216	—	15	113	—	4,344
Actinomycosis and Actino Bacillosis ..	219	—	1	—	—	220
Arthritis	—	—	—	31	—	31
Bruising	210	—	—	13	—	223
Cirrhosis	85	—	—	1,378	—	1,463
Congestion	12	—	12	639	2	665
Contamination ..	42	—	15	48	—	105
Echinococcus Cysts ..	160	—	19	26	—	205
Fascioliasis	1,017	—	113	—	8	1,138
Fatty Infiltration ..	24	—	—	—	—	24
Fever	12	—	—	—	—	12
Gangrene	—	—	—	24	—	24
Jaundice	—	—	118	100	—	218
Moribund	—	—	45	205	—	250
Oedema	300	—	—	—	—	300
Other Parasites ..	239	7	1,009	2,559	—	3,814
Pericarditis	19	—	—	1,036	—	1,055
Peritonitis	27	—	—	1,012	—	1,039
Pneumonia	8	—	32	1,105	—	1,145
Pleurisy	2,556	—	—	1,198	—	3,754
Pyæmia	—	—	—	80	—	80
Septicæmia	—	—	—	160	—	160
Telangiectasis ..	24	—	—	—	—	24
Tuberculosis ..	25	—	—	457	—	482

Total weight of meat condemned—9 tons 6 cwts 74 lbs.

Visits to slaughterhouses—3,127

It was found necessary to institute legal proceedings on two separate occasions against the occupier of a slaughterhouse in the Borough as follows:—

Slaughter of Animals (Prevention of Cruelty) Regulations, 1958

Regulation 3. Inadequate lairage (overcrowding 2 counts)

Regulation 6. No supply of water in lairs (3 counts)

Regulation 10. Horned cattle not kept apart and not restrained (3 counts).

Slaughterhouses (Hygiene) Regulations, 1958

Regulation 4. Arrangement of lairs not such that animals diseased or suspected may be kept apart from other animals (3 counts).

Total fines £185 and £20 costs.

Regulation 42. Waste offal not being removed within 48 hours.
Fined £25.

SUPERVISION OF FOOD PREMISES

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

General food shops	489
Food preparing premises subject to registration	134
Canteens	393
Restaurants	229
Fried fish premises	285
Butchers	248
Licensed premises	302
Licensed premises with catering facilities ..	128
Bakehouses	222
Food vehicles and stalls	566
Other food preparing premises	73

As a result of these visits 379 notices have been served and 194 notices complied with. 87 premises were brought up to the standard required by the Food Hygiene Regulations.

Market Stalls and Delivery Vehicles Regulations, 1966

On 3 occasions it was found necessary to institute legal proceedings with the following results:—

1. A bakery Company fined £50 and £25 costs.
2. A mobile ice cream retailer fined £40.
3. A mobile caterer fined £50.

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

Premises registered for the preparation or manufacture of sausages only	6
Premises registered for the preparation or manufacture of potted, pickled, or preserved food	35
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	7
Premises registered for the sale and storage of ice cream	349

During the year 312 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 489 visits to food premises for the purpose of food inspection other than meat inspection.

Food Condemned:

	Total		Total
Almonds (ground-pkts)	3	Mincemeat (jars) ..	1
Baked beans	249	Marmalade (jars) ..	30
Baby food (tins) ..	13	Mustard (jars) ..	1
Baby food (jars) ..	20	Milk puddings (ass.)	16
Baby food (pkts) ..	468	Margarine (lbs) ..	145
Butter (lbs)	180	Nesquick (lbs) ..	1101
Buttermilk (cartons) ..	7	Nestea (pkts)	17
Beetroot (jars)	21	Puddings (tins) ..	112
Beer (tinned)	1	Puddings (pkts) ..	19
Cream (tins)	300	Pastry (frozen) (pkts)	375
Chocolate drinks ..	22	Potatoes (tins) ..	182
Chickens (frozen) ..	113	Potatoes (instant-pkts)	17
Chips (frozen-pkts) ..	204	Pie fillings (tins) ..	91
Chips (tins)	3	Pie filling (lbs) ..	700
Cakes (frozen)	102	Pies (assorted) ..	88
Cheese (boxes)	7	Pies (tins)	2
Cheese (lbs)	604	Pies (frozen)	531
Custard Powder (pkts)	3	Pork Pies (singles) ..	195
Custard Powder (tins) ..	2	Pork Pies (lbs) ..	64
Coffee (instant)	257	Pickles (jars)	14
Crisps (pkts)	88	Rice Pudding (tins) ..	126
Cereals (pkts)	405	Ready dinners (frozen)	202
Curry (pkts)	4	Ravioli	3
Curry (tablets)	69	Soup (tins)	1593
Cornish pasties	275	Soup (pkts)	46
Cooked meat (lbs) ..	33	Spaghetti	79
Cake (Pudding Mix-pkts)	817	Spreads (jars)	66
Dried fruit (pkts) ..	12	Sauce (bottles) ..	4
Fish (tins)	153	Sauce mixes (pkts) ..	68
Fish (frozen)	2172	Sweets & Choc. (boxes)	296
Fruit (tins)	1528	Sausage rolls (singles)	101
Fruit juice (cans) ..	123	Sausage rolls (pkts) ..	13
Flour (lbs)	76	Salad cream (jars) ..	73
Fish and Chips (frozen)	13	Steak & kidney pies ..	3127
Gherkins (jars)	3	Sugar (lbs)	454
Grills-tasty spreads (tins)	2	Stewed steak (tins) ..	55
Honey	27	Suet (pkts)	15
Herbs (pkts)	12	Sausages (tinned) ..	3
Irish stew	40	Tomatoes (tins) ..	785
Ice cream (boxes) ..	10	Tomato puree	28
Ice cream (singles) ..	155	Trifles (frozen) ..	306
Iced lollies (boxes) ..	28	Turkeys (frozen) ..	10
Jam	45	Unlabelled tins (cartons)	2
Jellies	3	Unlabelled tins (tea chests)	12
Milk (tins)	6556	Unlabelled tins (boxes)	8
Milk Powder (lbs) ..	124	Vegetables (tins) ..	980

Meat (frozen)	2401	Vegetables (frozen) ..	2453
Meat (tins)	770	Vegetables (dried-pkts)	42
Macaroni	1	Veal Sorrento	1
Macaroni cheese	2	Yogurt	142
Mousse (frozen)	650	Yorkshire puddings ..	108

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 ..	7	—	Meat (canned)	11	—
Beer	9	—	Meat products	12	1
Beverages	4	—	Milk	12	—
Biscuits	6	—	Milk (canned)	3	—
Bread	6	—	Mincemeat	4	—
Butter	8	—	Non-brewed condiment	4	—
Cereals	2	—	Pancake Mixture ..	1	—
Cheese	5	—	Pickles	1	—
Coconut	3	—	Preserves	10	—
Coffee	1	—	Rice	6	—
Confectionery	13	—	Sauces	6	—
Cooking oils	4	—	Sausages	27	5
Cream	5	—	Soft drinks	20	—
Custard Powders, etc.	3	—	Soup	4	—
Drugs	4	—	Spices	7	—
Fish products	4	—	Spirits	—	4
Fish (canned)	3	—	Spreads	6	—
Flour	9	—	Suet	1	—
Food colours	2	—	Sugar	2	—
Food flavours	5	—	Sugar substitutes ..	1	—
Fruit (canned)	2	—	Sweets	20	—
Fruit (dried)	11	—	Vegetables (canned) ..	6	—
Ice Cream	11	—	Vegetables (dried) ..	8	—
Jellies	1	—	Yogurt	2	—
Lollies	3	—			

SAMPLING FOR CHEMICAL ANALYSIS

During the year 10 formal samples and 301 informal samples of food and 4 samples of drugs were taken. Adverse reports were received on 19 samples, details of which are as follows:—

<i>Name of article</i>	<i>Result of Analysis</i>	<i>Remarks and action taken</i>
Chopped Ham	Consisted of sausage	Agreement with Manufacturer to change recipe
Milk	Contained a foreign object.	Complaint sample. Legal proceedings instituted.
Milk	Contained a foreign object.	Complaint sample. Legal proceedings instituted.
Milk loaf	Insufficient whole milk solids present.	Formal sample to be taken.
Pineapple	No pineapple present contrary to Soft Drinks Regulations.	Product has been taken off sale
Redi Milk	Contained excess moisture and protein decomposition.	Complaint sample. Legal proceedings instituted.
Ice Cream Lollie	Contained 4.2% fat. Should be not less than 5%.	This article has been withdrawn from sale.
Milk	Excessive bacteria present.	Articles submitted because of complaint. Letters sent to Dairy.
Milk	Contaminated with rust	
Pork Sausage	Total meat 60%. Lean meat 27%. Pork sausage must contain at least 65% meat including 32.5% lean meat.	Formal sample taken.
Pork sausage	Total meat 51%. Lean meat 21%. Deficient in meat.	Formal sample taken.
Pork sausage	Total meat 72%. Lean meat 29%. The lean meat of pork sausage must be at least 32.5%.	Formal sample taken.
Bread	Contained foreign matter consisting of a dark gelatinous matter.	Complaint sample.
Bread	Contained foreign matter consisting of starchy matter containing some mineral oil, carbonaceous matter and trace of iron.	Complaint made. Legal proceedings instituted.
Pork sausage	Total meat 49%. Pork sausage must contain at least 65% meat.	Formal sample taken.
Pork sausage	Lean meat 28%. Should be at least 32.5% lean meat.	Legal proceedings instituted.
Fresh Cream Sandwich	Cream layer contained fat foreign to cream.	Legal proceedings pending.
Sausage	Contaminated with sandy matter, vegetable fibres and iron.	Complaint sample. Warning letter sent to Manufacturers.
Smokers set—milk chocolate	Contained inedible objects having the appearance of chocolate, but made from mineral oil.	Warning letter sent to Importers and Retailer.

Regulation 5—Sausage and Other Meat Products Regulations, 1967

Legal proceedings were instituted concerning one routine sample of pork sausage. The Manufacturer/retailer was fined £10 and £10 costs for the sale of pork sausage with a lean meat content not complying with the above Regulations.

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 1971 was

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

Pasteurised	55
Sterilised	147
Ultra Heat Treated	6

At the end of 1971 there were 151 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 ..	21	—	—	—	—	21	—	—
Pasteurised	46	46	—	46	—	—	—	—
Totals ..	67	46	—	46	—	21	—	—

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

Advice from this department is generally sought by local manufacturers on the labelling of food products. Draft labels are submitted for approval before the produce is marketed. This co-operation is welcomed. Regular sampling continues as a check of foods manufactured outside and inside the Borough.

ICE CREAM AND ICED LOLLIPOPS

149 samples of ice cream and 31 samples of iced lollipops have been submitted for bacteriological examination. All the lollipops were reported as satisfactory. 9 samples of ice cream were considered unsatisfactory. All were investigated and advice given and follow-up samples undertaken.

Two manufacturers of ice cream in the district have ceased to produce ice cream mixes. Regular visits were made to remaining manufacturers for the purpose of weekly sampling and a checking of production methods. Numerous soft ice cream vendors operate in the Borough, and it was found necessary to institute legal proceedings against one vendor for contravention of the Markets, Stalls and Delivery Vehicles Regulations, 1966.

BACTERIOLOGICAL EXAMINATION OF ICE CREAM

<i>Provisional Grade</i>	<i>Soft Ice Cream</i>	<i>Ice Cream Mix</i>	<i>Hard Ice Cream</i>
1	26	53	43
2	3	5	10
3	2	1	1
4	3	1	1
Totals	34	60	55

COMPLAINTS REGARDING UNFIT OR CONTAMINATED FOOD

293 visits were made during the year concerning 111 complaints of unfit food or food not of the nature, substance or quality demanded by the purchaser.

In 16 instances legal proceedings were instituted with the following results:—

1. Retailer fined £5 for the sale of unfit bacon.
2. Retailer fined £5 and £5 costs for the sale of unfit cod roe.
3. Dairy fined £25 and £5 costs for the sale of a bottle of milk with a sliver of glass inside.
4. Dairy fined £50 and £5 costs for the sale of a bottle of milk with a sliver of glass inside (second offence).
5. Dairy fined £25 and £10 costs for the sale of a bottle of milk containing a rubber object covered with paint.
6. Dairy fined £20 and £5 costs for the sale of a bottle of milk with a foreign object (not identified but resembling an udder wart).
7. Dairy fined £10 for the sale of a bottle of milk with a mould growth.

8. Dairy fined £30 for not ensuring that every vessel for containing milk was in a state of thorough cleanliness (black spots consisting of mould growth in the bottle).
9. Dairy fined £12 and £5 costs for the sale of milk with extraneous black particles.
10. Bakery fined £10 for the sale of a sliced loaf with a ball of paper inside.
11. Bakery fined £50 and £5 costs for the sale of a dairy cream sandwich which contained both synthetic cream and fresh cream.
12. Bakery fined £20 and £10 costs for the sale of a mouldy loaf.
13. Retail roundsman fined £10 for the sale of a mouldy steak and kidney pie.
14. Retailer fined £25 and £5 costs for the sale of a mouldy skinless pork sausage.
15. Retailer fined £10 and £5 costs for the sale of a mouldy fruit pie.
16. Retailer fined £20 and £5 costs for the sale of rancid skimmed milk powder. (3 years old).

Nature of Complaint

Mouldy foods	25
Unfit or old foodstuffs with signs other than mould	9
Insects in food	9
Foreign objects.. .. .	22
Contaminated foodstuffs	7
Insufficient evidence or complaint not justified	39

By the above table mould in food stuffs and the sale of old foodstuffs is the greatest source of complaint. Investigation often shows that the retailer has little knowledge of the age of his stocks. They are not aware of the codes used by the manufacturer to indicate expiry of shelf life or packing date, and often these codes are most difficult to interpret correctly.

The main methods of coding practiced by the food industry are (1) the printing of letters and numbers to signify the expiry date or the date of manufacture; (2) series or minute holes punctured in the wrapper to form a date code, and (3) minute cut-outs of the sides of labels which when matched with a master card indicate the significant date.

This fear by the manufacturer, expressed by the steps that they take to prevent the consumer knowing what is fresh when the foodstuffs are wrapped, is probably the prime cause of old food stuffs on retailers shelves. Only a few retailers use their own system of marking, many rely on the delivery men to stock their shelves, and to remove old foodstuffs. It is certainly time all wrapped perishable food stuffs were marked with an expiry date which can easily be interpreted by the public.

Many objects were reported found in food stuffs e.g., glass splinters and a rubber object in milk bottles necessitating legal action. Some objects could perhaps be considered natural hazards of the food industry which can only be prevented by care and efficient inspection, e.g., a wasp in a tin of fruit salad or a piece of metal in sliced meat from a defective tin opener.

BACTERIOLOGICAL EXAMINATION OF OTHER FOODS

56 samples of food products have been taken for bacteriological examination, 4 of which were reported as not entirely satisfactory. The largest number of samples were taken from an imitation cream plant. Regular sampling from such a plant is a check that correct sterilising procedures are being used. The following table illustrates the types of produce sampled:—

<i>Sample</i>					<i>No. Taken</i>	<i>No. Unsatisfactory</i>
Meat pies	..	..	..	..	5	—
Sliced meat	..	..	..	..	11	2
Liquid egg	..	..	..	..	4	—
Flour confectionery	..	..	..	..	4	—
Fresh cream	..	..	..	..	9	1
Imitation cream	..	..	..	..	24	1
Shell fish	..	..	..	..	2	—
Boiled roe	..	..	..	..	1	—
Cooked chicken	..	..	..	..	4	—

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 Regu- lation 17</i>	<i>Premises to which Regulation 19 apply</i>	<i>Premises provided with sinks in accor- dance with Regulation 19</i>
Fried Fish	72	72	72	72
Restaurants, Cafes and Snack Bars	60	60	60	60
Licensed premises—full catering	29	29	29	29
Licensed premises only ..	330	330	330	330
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, pickled and pre- served meat manufacturers	8	8	8	8
Registered potted, pickled or preserved food manu- facturers	35	35	35	35
Bakehouses	12	12	12	12
Slaughterhouses	9	9	9	9
General food shops ..	329	329	329	329
Butchers	126	126	126	126
Grocers	96	96	96	96
Greengrocers	86	86	86	86
Wet fish shops	10	10	10	10
Confectioners	45	45	45	45

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
Brockmoor, Brierley Hill ..	5 areas involving	54 unfit houses
Gornal Wood, Lower Gornal	7 areas involving	119 unfit houses
Bilston Street, Sedgley ..	1 area involving	12 unfit houses
Shaw Road, Dudley ..	1 area involving	4 unfit houses
Tipton St./Gate St. Sedgley	4 areas involving	33 unfit houses
Turner St./Clifton St. Dudley	2 areas involving	17 unfit houses
Park Road, Netherton ..	1 area involving	17 unfit houses

2. The Council made the following Orders during 1971:—

Church Road (Coseley) Clearance Order involving	9 unfit properties
High Street, Wall Heath Compulsory Purchase Order involving	4 unfit properties.

3. The following Orders were confirmed during 1971 with the results as shown:—

	Represented	Confirmed
Fenton Street, Brierley Hill Compulsory Purchase Order.. ..	80	80
Pearson Street, Brierley Hill Compulsory Purchase Order.. ..	4	4

Demolitions

During the year 210 unfit properties in Clearance Orders or Compulsory Purchase Orders were demolished. A further 20 fit houses in Compulsory Purchase Orders and 147 properties subject to Demolition Orders were also demolished making a total of 377 properties demolished during the year.

Rehousing

956 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	120
Re-lets	836

Of this total 235 houses were allocated to families living in unfit properties of all categories. A further 26 families were rehoused from fit properties in Compulsory Purchase Orders, making a total of 261 families rehoused for Clearance purposes.

Individually Unfit properties

Number of Demolition Orders made (Section 17) ..	57
Number of Closing Orders made (Section 17) ..	9
Number of Closing Orders made (Section 18) ..	2
Number of houses demolished pursuant to Demolition Orders	147
Number of houses made fit and Orders determined ..	4
Number of persons displaced :—	
(a) Individuals	193
(b) Families	81

Housing Visits

The following visits were made during the year:—

Clearance Area inspections	19
Individually unfit inspections	53
Clearance Area re-inspections	36
Individually unfit re-inspections	62
General inspections	236
Improvement Area visits	155
Improvement grant visits	1,922
Housing visits for medical reasons	9
Dangerous structures	10
Miscellaneous	521
Mapping visits	11
Rent Act visits	9
Houses in mortgage to the Corporation	817
Visits where no access gained	531

Land Charge Searches

During the year enquiries were made with regard to 4,101 applications for official searches.

Improvement Grants**STANDARD**

	Owner- occupiers Standard 5 point	Tenanted Standard 5 point
1. Number of applications approved ..	29	3
2. Number of dwellings improved ..	31	5
3. Amount paid in grants	£3,779.10p	£317.79p
4. Average grant per house	£129.90p	£63.56p
5. Number of amenities provided:—		
(a) fixed bath	9	1
(b) shower	—	—
(c) wash hand basin	19	3
(d) hot water supply (to any fittings)	47	4
(e) water closet—within dwelling or accessible from dwelling	26	1
(f) sinks	3	—

DISCRETIONARY

	Owner- occupiers	Tenanted
1. Number of applications approved ..	175	25
2. Number of dwellings improved ..	119	23
3. Amount paid in grants	£44,344.17p	£11,256.85p
4. Average grant per house	£372.64p	£489.42p

Dwellings outside Improvement Areas

1. Number of representations made since 1966	169
2. Representations made by tenants during the year ..	1
3. Preliminary notices served during the year	1
4. Undertakings accepted during the year	Nil
5. Immediate Improvement notices served during the year	1
6. Final notices served during the year	Nil
7. Such dwellings improved during the year:—	
(a) full standard	7
(b) reduced standard	Nil

HOUSES IN MULTIPLE OCCUPATION

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	135
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)	15
4. Number of houses on which have been made:—	
(a) Management Orders	1
(b) Directions on overcrowding	3
5. Number of notices served:—	
(a) to make good neglect of proper standards of management (Section 14)	7
(b) to require additional services or 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

76 inspections and 450 re-inspections were made during the year.

SANITARY ADMINISTRATION

Particulars of Inspection

During the year 327 inspections and 457 re-inspections were made under the Public Health Act, 1936.

The number of preliminary notices served was 55, and the number complied with was 22. Statutory notices numbered 15, and 6 were complied with.

DOMESTIC WATER SUPPLY

The supply to the County Borough of Dudley is derived from pumping stations situated outside the boundaries of the Authority. The main source of supply is provided by the South Staffordshire Waterworks Company and the following extracts; are taken from the Annual Report of that Body.

"During 1971, 655 samples of chlorinated water were examined, 651 of which were free from coliform bacteria.

250 samples of the raw water from underground sources were also examined, 249 of which were satisfactory. 100 samples of water prior to treatment at Hampton Loade gave an average coliform bacteria content of 109 per 100 ml. None of the supplying stations contain any significant amount of naturally occurring flouride.

Samples were examined from within the County Borough from:—

- Cawney Hill Reservoirs
- Sedgley Tanks
- Sedgley Reservoir
- Sedgley Beacon Reservoir
- Shavers End Reservoirs
- Shavers End Repumping Station
- Springsmire Reservoir
- Turners Hill Tank
- The Library, Brierley Hill
- Police Station, Coseley
- 44, Abberley Street, Dudley
- 12, Oak Street, Kingswinford
- Watermans House, Netherton
- Watermans House, Sedgley

186 samples from the reservoirs and tanks and 11 from Shavers End Repumping Station were all free from coliform bacteria.

11 tap samples from Brierley Hill, 13 from Coseley, 12 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

16 samples of mains water have been taken for analysis. All were satisfactory chemically and bacteriologically. 6 samples from wells situated in the Borough were taken and reported as satisfactory.

WATER SUPPLY

No. of premises (excluding Council Houses) having a private water supply (estimated)	48,191
Council Houses	27,250
No. of premises having common water supplies (estimated)	500

SEWERAGE AND SEWAGE DISPOSAL

The Roundhill Waste Water Purification Plant was completed during the year. The cost of the scheme was approximately £1.5 millions. 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 from Brierley Hill, Pensnett, Kingswinford, Wallheath, Wordsley, and most of the Borough of Stourbridge. The Drainage Authority have instructed their consulting engineers to design a 100% extension of this works to be completed within five years.

The new 18 ins. and 10 ins. diameter twin syphon sewers in the Straits, Lower Gornal were completed during the year.

A contract has been let for the construction of a relief sewer in Brick Kiln Lane, Lower Gornal, which will overcome the troubles associated with minor flooding during storm conditions.

Construction work has already commenced on the building of a new sludge pumping station at the Freehold and Caledonia Works, together with twin 8 ins. diameter pumping mains from Lye to Roundhill. Tenders will be invited towards the end of next year for the construction of large trunk sewers in tunnel along the main Stour valley upstream of Pedmore Road.

A tender has been accepted for a new and modern sludge treatment plant at the Roundhill works, and construction work should be commenced during 1973.

The consulting engineers have been instructed to design a 100% extension of the Freehold Sewage Treatment Works to be completed within five years.

The Authority have approved two comprehensive reports dealing with the capital works which will be required throughout the district to deal with future increased population, and industrial expansion up to the end of the year 2000. These capital works schemes for the next five years have already been approved by the Department of the Environment, and the consulting engineers have been instructed to proceed with the design.

INFECTIOUS DISEASE

929 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 ..	73,549	17
2. (a) Total number of properties (including nearby premises) inspected following notification	2,203	—
(b) Number infested by (i) rats	1,201	—
(ii) Mice	553	—
(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	56	4	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	643	114	8	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises)	3	—	—	—
Total	702	118	8	—

2.—Cases in which DEFECTS were found—

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecu- tions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	by H.M. Inspector (5)	
Want of cleanliness (S.1) ..	8	—	—	2	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	1	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective ..	1	—	—	—	—
(c) Not separate for sexes ..	—	—	—	—	—
Other offences against the Act (not including offen- ces relating to outwork) ..	—	—	—	—	—
Total	10	—	—	2	—

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.	167	—	—	—	—	—
Altering wearing apparel	1	—	—	—	—	—
Total	168	—	—	—	—	—

SMOKE CONTROL ORDERS

No new orders became operative during the year so that the situation remained as it was at the end of 1970. There are 6,822 acres involving 32,043 houses within the Borough covered by Smoke Control Areas or proposed areas:—

Number of visits re survey	2,203
Number of visits in confirmed areas	25
Number of visits in operative areas	133
Number of visits to advise householders	28
Adaptations completed	18

Progress towards the completion of the smoke control programme recommenced during the year as the number of visits made in connection with smoke control surveys above indicates. One of the Orders deferred in 1970 was submitted to the Department of the Environment in November in its original form and two others are in the course of preparation. The last two areas contain a larger number of properties than most areas previously tackled so that with their completion it is hoped to make up for the break in programme. Although the decision to defer making the Orders referred to in 1970, was not taken because of the possibility of fuel shortages, their progress, had it been maintained, would probably have been delayed for this reason. Such a shortage became apparent towards the end of 1970, and in some parts of the country Smoke Control Orders were suspended, and others due to be introduced were delayed. The situation was kept under review in the Borough, but with the help of considerable fuel stocks held locally, and a mild winter, it was not found necessary to take such drastic action. The Government's decision to import solid smokeless fuels to counteract the national shortage prompted further additions to the growing list of authorised fuels so that the choice in future for people wishing to use solid fuel should be wide.

The increase in stocks of solid smokeless fuel which became apparent towards the middle of the year prompted the Department of the Environment to circularise all Local Authorities urging them, particularly in black areas, to energetically recommence their programme. The rapid decrease in the use of coal for gas making and the resultant shortage of one of the bi-products, coke, has been one of the major reasons for the difficulties which have been encountered. Happily planned increases in the manufacturing capacity of the National Coal Board and other producers have materialised, so that no further shortages are envisaged.

During the year the first coal burning room heater designed to burn coal with a minimum of smoke to be manufactured for general distribution was granted a certificate of exemption by the Department of the Environment, and may now be installed in smoke control areas. The appliance is designed to burn washed singles which are in ample supply, and which will be pre-packed prior to

sale to avoid confusion. It is too early to gauge what impact, if any, the introduction of this type of appliance will have on future patterns of fuel useage in any Smoke Control Areas. In areas such as Dudley the increasing desire for piped fuels such as gas and electricity mainly for convenience may outweigh any loyalty to the open fire or coal. In mining areas where such a loyalty is very real and often poses a serious threat to the introduction of a domestic smoke control programme such appliances have much to offer if anything is to be done to reduce visible smoke pollution.

INDUSTRIAL AIR POLLUTION

Perhaps the most significant indication of the progress which has been made towards the reduction of visible smoke pollution by industry is the absence of the smoking factory chimney. Progress in this respect in Dudley has been no less than elsewhere, and during the year only six contraventions of the Clean Air Act, 1956 which prohibits the emission of dark smoke from chimneys were recorded. In most cases the emission which prompted the contravention was caused by mechanical failure or faulty operation, and was quickly corrected. However, in one case certain adaptations to the furnaces were suggested, together with the provision of smoke density alarms, and these proposals were being considered by the Company at the end of the year. Visible smoke emissions from cupola furnaces remain a problem, and although the maintenance of combustion in the shaft by suitable operation of the cupola or by the provision of an independent flame may reduce the emissions, only the replacement of this method of melting iron will eliminate them.

Alternative methods of doing this are available and in use, but the traditional method prevails. Rising costs, particularly of the metallurgical coke used in cupolas may make alternative methods more attractive in future. There has been a reduction in the number of iron foundries in recent years, and the concentration of production in larger units does offer the opportunity for more efficient gas cleaning equipment to be used. On the other hand if this equipment fails to meet its design specifications more nuisance may be experienced by residents as a direct result of concentrating production in larger plants.

The emission of dark smoke from industrial or trade premises other than from a chimney was prohibited with certain exceptions by the Clean Air Act, of 1968. After a suitable period of education and some enforced changes in methods, particularly in relation to the recovery of scrap metal, 1971 saw two successful prosecutions for offences under this Section. Altogether there were twenty six recorded contraventions during the year.

Regulations prescribing the maximum quantities of grit and dust from boilers and certain types of industrial furnaces were introduced during the year. To assess whether or not the emission of grit and dust from a particular chimney will meet these standards it will be necessary of course to undertake detailed measurements. This, a Local Authority would not require to be undertaken lightly, and until all possible causes of grit and dust deposition have been eliminated.

During the year one chimney gave trouble over a period of weeks, and measurements were contemplated. Some of the preliminary checks carried out prior to sampling however, revealed the cause of the problem, so that by the end of the year no measurements had been taken in the Borough.

There were eleven recorded contraventions of the Clean Air Act, 1956 in connection with the emission of grit and dust from furnaces. These were mainly confined to cupolas, and were overcome by the replacement of the existing arrestors, or by alterations in the methods of operation. Approval for new arrestment plant was sought by three Companies, again all foundries, and these were approved.

Complaints concerning the emission of grit and dust from industrial processes not involving combustion continue to form the major part of work in this field. Such processes may involve the preparation, storage or disposal of raw or waste materials, the cleaning, grading or crushing of minerals, and the cleaning and dressing of metals. Complaints of pollution from sources other than combustion processes will no doubt continue to increase as people demand higher standards, and they become more noticeable as the work of reducing pollution from combustion processes proceeds. The control will involve more widespread investigations and a greater attention to detailed maintenance and good house-keeping than has hitherto been apparent in many factories.

The Alkali Etc., Works Order, 1971, which came into operation during the year amended the list of premises controlled by the Alkali Inspectorate and resulted in a net gain of one to the Council. Three firms engaged in the recovery of aluminium from scrap, a process previously scheduled, were de-registered, whilst two mineral works previously controlled by the Local Authority now pass to the Alkali Inspectorate. With the change to gas firing in certain brickworks the number of premises registered under the Alkali Act in the Borough continues to fall, and the responsibility for the control of air pollution at these works passes to the Local Authority. Complaints which arise in connection with scheduled processes are referred to the District Alkali Inspector and fairly close liaison is being maintained.

539 observations were made during the year in connection with the control of industrial air pollution, and 227 visits were made by Inspectors to various premises either in connection with complaints which had been received, or the routine work of air pollution control. In addition 355 visits were made with regard to the emission of grit and dust.

CHIMNEY HEIGHTS

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

Consideration was given to ten applications for approval of the height of new chimneys. Nine applications were granted approval after modifications had been requested in two cases, and one was rejected.

38 visits were made to premises in connection with proposals for erecting new chimneys.

Of the ten applications made for chimney height approval, 5 installations were oil fired, two were gas fired, and the remaining 3 were all conventional coke fired cupolas.

AIR POLLUTION MEASUREMENT

The measurement of smoke and sulphur dioxide was carried out at six sites with daily volumetric machines, one of which is of the 8 port type. Due to alterations at Portway School, Kingswinford, during the year which made it impossible for further measurements to be taken, it was necessary to move one of the instruments. Fortunately a new site was found close at hand at Standhills Clinic, Kingswinford, so that the overall trend should remain reasonably accurate.

As in former years the graphs used are for the Coseley (Roseville) site. They comprise winter and summer means for smoke and sulphur dioxide. The gradual downward trend in smoke continues as is to be expected with the increase in the number of dwellings covered by smoke control orders, and the changes which have occurred in industrial and domestic installations since 1965. The general trend of sulphur dioxide shows a slight fall, and this is particularly encouraging in view of the increase in the amount of fuel used. This is no doubt due in part to the fact that modern installations are more efficient.

The figures for the Brierley Hill site are very similar, whereas those for the sites at Kingswinford and Sedgley are lower, being situated in smoke control areas on the edge of the conurbation.

NOISE ABATEMENT ACT, 1960

94 complaints have been received in respect of 43 alleged cases of noise nuisance. All the cases were investigated and the table below indicates the type of premises or work which prompted the complaints, together with an indication of the finding and progress which was made during the year. The total number of visits made in connection with noise during the year was 728. Not all of the visits were made in connection with complaints however, many were made to assess existing background levels, and the possibility of future nuisances from proposed development. In addition a survey of noise levels was carried out in conjunction with other Authorities in the West Midlands under the auspices of the Midlands Joint Advisory Council for Clean Air and Noise Control. Exercises of this type provide extremely useful information for compiling existing methods of rating industrial noise.

<i>Number of</i>	<i>Industrial premises</i>	<i>Commercial premises</i>	<i>Roadworks Construction etc.</i>	<i>Total</i>
Complaints received	78	11	5	94
Cases complained of	31	7	5	43
Cases investigated	31	7	5	43
Nuisance confirmed	13	5	4	22
Nuisance remedied informally	9	5	4	18
Abatement notices served	—	—	—	—

Four cases of noise remain unabated at the end of the year. In two cases the Companies concerned have employed specialist advice, and proposals for overcoming the problem are awaited. In one other case extensive alterations to the interior of the factory are planned, and these may well have a significant effect on existing noise levels. The Company concerned are aware that they have a problem and the extensions are being planned with a view to mitigating it. In the final case the outlook is not so encouraging. The Company are engaged in the manufacture of large pressure vessels, and although some respite for nearby residents has been achieved by alterations in the pattern of working, and proposals to install new machinery do promise further improvement, it has to be admitted that noise levels in this vicinity will remain high. Short of a complete change in the technology of the process it is difficult to see any considerable improvement.

The most frequent sources of noise nuisance are mechanical extraction systems, compressors, and the handling of materials.

There were less complaints arising concerning discotheques although one complainant did object to a music licence being renewed before the Licensing Magistrates. This type of complaint is often difficult to substantiate, being so dependent upon local circumstances at the time. The procedure adopted by this complainant does perhaps represent the best remedy.

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	18	338	54
Retail shops	33	810	253
Wholesale shops, warehouses ..	5	59	15
Catering establishments open to the public, canteens	1	290	113
Fuel storage depots	—	6	—
Totals.. ..	57	1,503	435

Total number of visits of all kinds by Inspectors to registered premises under the Act 779

Number of contraventions found:—

Section 4—Cleanliness	5
Section 5—Overcrowding	—
Section 6—Temperature	26
Section 7—Ventilation	—
Section 8—Lighting	9
Section 9—Sanitary conveniences	25
Section 10—Washing facilities	14
Section 11—Supply of drinking water	—
Section 12—Clothing accommodation	1
Section 13—Sitting facilities	—
Section 14—Seats (Sedentary workers)	—
Section 15—Eating facilities	—
Section 16—Floors, passage and stairs.. .. .	23
Section 17—Fencing—exposed parts machinery	2
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	32
Other matters	33
Total	170

Reported accidents

Workplace	Number reported		Total number investigated	Action recommended			
	Fatal	Non-fatal		Prosecution	Formal warning	In-formal advice	No action
Offices	—	—	—	—	—	—	—
Retail Shops	—	14	6	—	—	—	—
Wholesale shops, warehouses	—	3	2	—	—	—	—
Catering establishments open to public, canteens	—	5	2	—	—	—	—
Fuel storage depots ..	—	—	—	—	—	—	—
Total	—	22	10	—	—	—	—

Analysis of reported accidents

	Offices	Retail shops	Wholesale warehouses	Catering establishments open to public, canteens	Fuel storage depots
Machinery	—	1	1	—	—
Transport	—	—	—	—	—
Falls of persons ..	—	6	—	3	—
Stepping on or striking against object or person	—	4	—	—	—
Handling goods ..	—	2	2	2	—
Struck by falling object	—	1	—	—	—
Fires and explosions	—	—	—	—	—
Electricity	—	—	—	—	—
Use of hand tools ..	—	—	—	—	—
Not otherwise specified	—	—	—	—	—

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

	Privately owned site Residential
Number of site licences operating as to 31st December, 1971 :—	
(a) individual	4
(b) multiple (more than 3)	2
Total number of caravans	13
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)	—

M I S C E L L A N E O U S

SLAUGHTER OF ANIMALS ACT

The number of licensed slaughtermen at the end of the year was 43.

PHARMACY AND POISONS ACT

Two 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.

FERTILISERS AND FEEDING STUFFS ACT, 1926

25 samples of fertilisers and 3 samples of feeding stuffs have been taken for analysis. One sample of fertiliser was reported as not correct within the limits of variation. No legal action was taken, but the manufacturers were contacted in order that their processes could be checked.

SWIMMING BATH WATER

103 samples of water have been taken from swimming baths in the Borough. All were reported as satisfactory.

**RAG FLOCK AND OTHER FILLING MATERIALS ACT,
1951**

2 samples of filling material have been taken and reported by the prescribed Analyst as satisfactory.

