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COUNTY OF SURREY  
BOROUGH OF EPSOM AND EWELL

# Annual Report

of the

**MEDICAL OFFICER OF HEALTH**

and

**SCHOOL MEDICAL OFFICER**

for the Year

**1968**

*Incorporating a Report by the Chief  
Public Health Inspector on the work  
of the Health Inspectors throughout  
the year*

# Annual Report

OF THE

SCHOOL MEDICAL DIVISION

1908

THE BOARD OF HEALTH  
CITY OF NEW YORK  
1908

# BOROUGH OF EPSOM AND EWELL

## PUBLIC HEALTH COMMITTEE AS CONSTITUTED AT

31st DECEMBER, 1968

*Chairman* : Alderman W. J. CLARK, F.I.A.S., F.R.S.A., F.R.S.H.

*Vice-Chairman* : Councillor Mrs. L. D. RINGSDORE

Alderman J. R. GALE ; Councillors M. N. ARTHUR, A.I.O.B., M.R.S.H., W. R. CARPENTER, N. F. COLYER, M.A., W. J. M. CROSLAND, Mrs. D. J. FENDER, Mrs. D. M. HARRISON, L. F. C. MILLER, A.C.I.S., R. W. SMITH, E. J. VERYARD, L. F. WOOLCOTT

### Ex Officio Members

THE MAYOR (Councillor T. G. HOLLAND, J.P.)

DEPUTY MAYOR (Councillor J. A. G. WEBB)

## STAFF OF THE HEALTH AND WELFARE DEPARTMENT

AT 31st DECEMBER, 1968

### Medical Officer of Health

D. J. SHEERBOOM, M.B., B.S., D.P.H.

### Deputy Medical Officer of Health

DAPHNE M. KIRKMAN, M.B., B.S., D.C.H., D.P.H.

### Assistant Medical Officer

JILL M. E. CORBETT, M.B., CH.B.

### Dental Officers

GODFREY ASHWORTH, L.D.S., H.D.D., F.D.S.

MRS. A. ROBERTSON, L.D.S. (*Part-time*)

### Chief Public Health Inspector

L. H. GRACE, F.R.S.H., M.A.P.H.I.

### Deputy Chief Public Health Inspector

WM. C. ALDER, A.R.S.H., M.A.P.H.I.

### Public Health Inspectors

W. H. GRAY, M.A.P.H.I.

M. G. ILLMAN, M.A.P.H.I.

D. R. JOHNSON, M.A.P.H.I.

### Pupil Public Health Inspector

F. M. SEABRIGHT

### Borough Nursing Officer

Miss J. DORRINGTON, S.R.N., S.C.M., H.V.CERT.



## **Domiciliary Nurses and Midwives**

### **(a) Whole-Time**

Miss K. M. DUNCOMBE, S.R.N., S.C.M., Q.N. (Senior Nurse)	Miss J. HENDERSON, S.R.N., S.C.M., Q.N. Mrs. D. E. HOUSE, S.R.N. Mrs. G. MACKAY, S.E.A.N. Miss J. MILLS, S.R.N., S.C.M., Q.N. Mr. L. C. PRETTY, S.R.N., Q.N. Mrs. J. TOWNEND, S.R.N.
Mrs. M. M. KEENAN, S.R.N., R.M.N. Mrs. M. MCGREGOR, S.R.N. Mrs. S. PARKER, S.R.N., Q.N. Miss A. M. B. SIMPSON, S.R.N., S.C.M. Miss T. WILLIAMS, S.R.N., S.C.M., Q.N.	

### **(b) Part-Time**

Mrs. T. W. BENT, S.R.N. Mrs. V. J. CLARKE, S.R.N. Mrs. B. HIRST, S.R.N.	Mrs. E. BLATCHLEY, S.R.N., S.C.M. Mrs. M. GIBSON, S.R.N. Mrs. M. C. JONES, S.R.N.
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### **(c) Nursing Auxiliaries**

Mrs. J. POTTER	Mrs. R. COKER
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## **School and Clinic Nurses**

Mrs. D. M. CLARK, S.R.N. Mrs. E. MACDONALD, S.R.N.	Mrs. N. R. COPLAND, S.E.N. Mrs. D. PRETTY, S.R.N.
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## **Health Visitors**

Mrs. J. M. BAILEY, S.R.N., H.V.CERT. Mrs. C. C. COTTON, S.R.N., S.C.M., H.V.CERT. Miss W. M. EVERS, S.R.N., R.M.N., H.V.CERT. Miss J. M. HEADLEY, S.R.N., S.C.M., H.V.CERT. Mrs. D. A. SHARPE, S.R.N., S.C.M., H.V.CERT. Mrs. C. WALL, S.R.N., S.C.M., H.V.CERT.	Mrs. C. CHALUPKA, S.R.N., H.V.CERT. Mrs. S. E. DONOVAN, S.R.N., S.C.M., H.V.CERT. Miss F. M. GOLTON, S.R.N., S.C.M., H.V.CERT. Mrs. B. J. HEWETT, S.R.N., H.V.CERT. Miss E. H. SPENCER, S.R.N., S.C.M., H.V.CERT. Mrs. E. Y. WRIGHT, S.R.N., S.C.M., H.V.CERT.
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## **Medical Social Worker**

Miss G. M. WISE, A.M.I.A.

## **Home Help Supervisor**

Mrs. D. E. TAPPING

## **Area Mental Welfare Officer**

J. SALLIS

## **Mental Welfare Officer**

A. PALLETT

## **Home Teacher for the Blind**

Miss M. FRANKLIN

*Diploma of College of Teachers of the Blind and the  
Declaration of Recognition of Experience in Social Work*

## **Social Worker for the Physically Handicapped**

Mrs. M. COWLES, B.SC.(SOC.)

## **Welfare Officer to the Deaf**

C. M. J. DAVIS

## **Chiropodists**

Mrs. A. DEARLOVE, M.CH.S. Miss M. B. WARRICK, M.CH.S. (Part-time)	J. P. COLEMAN, M.CH.S. (Part-time) B. H. BARR, M.CH.S. (Part-time)
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## **Physiotherapist**

Mrs. B. GILBERT, M.C.S.P.

## **Welfare Assistant**

Mrs. M. T. MUIL

## **Dental Surgery Assistants**

Mrs. J. HOLLADAY

Miss D. M. JOPP

## **Matron of Day Nursery**

Mrs. R. HYLAND, S.R.N.

(Waltham House Day Nursery)

## **Clerical Staff of the Medical Officer of Health**

(Administrative Assistant) R. A. STAY Mrs. P. A. V. DAVIES Mrs. K. F. DICKSON Miss S. M. J. MATTHEW Miss W. WARWICK (Part-time) Miss A. FRANKLIN, A.C.I.I.	R. E. THORPE, A.R.S.H. (Senior Clerk) Miss T. LONGHURST Miss R. BARNETT Mrs. M. POOLE Miss L. WIGGAN Mrs. F. M. BLACK
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## **Clinic Clerks**

(Part-time) Mrs. M. J. G. FOREMAN	Mrs. J. STOUT (Part-time)
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## **Chief Public Health Inspectors' Clerical Staff and Outdoor Staff**

(Chief Clerk) W. J. JENKINS Mrs. A. LUKER (General Assistant) J. CLISSOLD	Miss Y. JAMES Miss A. MITCHELL A. BAWDEN (Rodent Operative)
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**To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell**

MR. MAYOR, LADIES AND GENTLEMEN,

I have much pleasure in presenting the Annual Report on the state of the public health and welfare in Epsom and Ewell for 1968. The Report is in the form as requested by the Ministry of Health.

The Registrar General's estimated population was 72,300 a decrease of 20 on 1967. The number of deaths from all causes decreased from 1,110 to 1,096 giving a crude death rate of 15.2. The live birth rate was 12.1 compared with 11.7 in the previous year.

Except for the first few weeks of the year when 'flu struck, the health of the Borough was generally very good. No unexpected outbreaks occurred in either the general public or in the schools. Additionally by the end of the year the anticipated "Hong Kong" 'flu outbreak had not occurred. Last year I stated that it was anticipated that Measles Vaccination might commence during 1968. The campaign did in fact commence in May directed against the 4 to 7 year olds. Later this was relaxed to include all ages up to 16 years. Unfortunately response to vaccination was not as good as one had hoped. During the year the Infective Jaundice Regulations 1968 and in October the Health Services and Public Health Act 1968 became law and the immediate result of which was to alter and clarify the notification of certain Infectious Diseases.

The "Well Women" Clinic held at the Church Street Health Centre and also the Clinics for the Elderly which are held weekly both at Ewell Court and Church Street Clinics have been well attended.

It is hoped that during the coming year some form of "Well Men" Screening Clinic might be started.

Because of increasing demand an Incontinent Laundry Service was started on 1st April. This was possible due to the kind co-operation of the West Park Hospital Management Committee who allow my Department to use the West Park Hospital Laundry. This Service has greatly helped District Nurses and Home Helps, quite apart from anxious relatives.

Mention was made of a Smoking Advisory Clinic held in October 1967. In April 1968 a questionnaire was sent to all participants to see whether after six months the preliminary good results were being maintained. Of the original 60 members who attended the Clinic, only 37 replied. Of these 13 had still managed to give up smoking completely and 2 had changed over to cigars rather than cigarettes. These figures compare favourably with the results of other anti-Smoking Clinics.

It had been hoped that by the end of the year the new Nurses' Home in Alexandra Road, to be known as Anderson House, would be ready for occupation. Unfortunately, due to various circumstances, the Nurses and Midwives will not be able to move in until January 1969.

Towards the end of the year the Seebohm Report and the Green Paper were published which are at present causing much discussion as to the future of Health Departments. Probably no decision will be taken until the Report of the Royal Commission on Local Government is published.

It is with deep regret that I have to report the death of the Public Analyst, Mr. Daniel D. Moir, which took place in January 1968. Mr. Moir had served this Authority for a number of years and his unexpected death was a great sorrow to all his colleagues. He held a distinguished position within his profession and was always keen to support and promote our joint interests. However we do welcome Mr. J. A. Palgrave, who has been appointed as our new Public Analyst, for he had indeed been Mr. Moir's partner for many years.

I should like to record my appreciation of the support and encouragement I have received from the Chairman and Members of the Public Health Committee, to Mr. L. H. Grace, the Chief Public Health Inspector, and his staff, and for the friendly co-operation I have received from all other Departments.

Once again I should like to give my sincere thanks to all Members of the Health and Welfare Department for their loyal and efficient service during the year.

I am, Mr. Mayor, Aldermen and Councillors, Your obedient Servant,

*D. J. SHEERBOOM,  
Medical Officer of Health.*



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## PART ONE

# GENERAL AND STATISTICAL



# ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1968

## VITAL STATISTICS FOR THE YEAR

Area (acres) . . . . .	8,427
Population (Census 1961) . . . . .	71,159
Population (estimated mid-year 1968) . . . . .	72,300
Density (persons per acre) . . . . .	8.58
Number of inhabited houses at 31.12.68 . . . . .	22,497
Rateable value at 31.12.68 . . . . .	£4,074,446
Product of Penny Rate . . . . .	£16,648

<b>Live Births</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate . . . . .	374	444	818
Illegitimate . . . . .	25	30	55
	<hr/> 399	<hr/> 474	<hr/> 873

Live birth rate per 1,000 population . . . . .	12.1
Standardised birth rate . . . . .	13.8
Illegitimate live births per cent of total live births . . . . .	6.3

<b>Still Births</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate . . . . .	2	8	10
Illegitimate . . . . .	2	—	2
	<hr/> 4	<hr/> 8	<hr/> 12

Still birth rate per 1,000 live and still births . . . . .	13.6
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<b>Deaths</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Private Residents . . . . .			716
Patients in Mental Hospitals . . . . .			380
	<hr/> 490	<hr/> 606	<hr/> 1,096

Crude death rate . . . . .	15.2
Standardised death rate . . . . .	9.3

<b>Deaths of Infants under 1 year of age</b>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate . . . . .	2	8	10
Illegitimate . . . . .	1	—	1
	<hr/> 3	<hr/> 8	<hr/> 11

<i>Infant mortality rate per 1,000 live births :</i> Total . . . . .	12.6
Legitimate . . . . .	12.2
Illegitimate . . . . .	18.2

<b>Neonatal Mortality</b>	
Number of deaths of infants under 4 weeks of age . . . . .	8
Neonatal mortality rate per 1,000 live births . . . . .	9.2
<i>Early Neonatal Mortality</i>	
Number of deaths of infants under 1 week of age . . . . .	5
Early neonatal mortality rate per 1,000 live births . . . . .	5.7
<i>Perinatal mortality</i>	
Still births and deaths under 1 week per 1,000 live births . . . . .	19.5

<b>Maternal Mortality</b>	
Maternal deaths (including abortions) . . . . .	Nil



## POPULATION

The Registrar General's estimate of population for 1968 was 72,300 and this figure has been used for statistical purposes in the preparation of this Report. The estimate is 20 lower than in the previous year.

The number of deaths exceeds the number of live births by 223. This apparently high proportion of deaths is in part accounted for by the large number of elderly patients in the five mental hospitals in the Borough. The number of occupied beds in the mental hospitals was 6,460 compared with 6,639 in 1967.

### Births

Live births totalled 873 representing a birth rate of 12.1 per thousand population. The Registrar General, by providing a comparability factor (1.13 for Epsom), makes adjustments in respect of each area having regard to variations in age and sex distribution of population and the influence on the birth rate of the large institutions in this district. By applying the comparability factor to the crude birth rate the standardised birth rate of 13.8 is obtained compared with the figure of 16.9 for England and Wales in 1968.

### Deaths

The number of deaths assigned by the Registrar General was 1,096 compared with 1,110 in 1967. Of this total 380 occurred in the local mental hospitals in patients whose stay exceeded six months. Where death occurred within six months of admission the death was assigned to the district from which the patient had come. The crude death rate was 15.2 per 1,000 total resident population. By applying the Registrar General's comparability factor, 0.61, to the crude death rate a standardised death rate of 9.3 is obtained compared with the figure of 11.9 for England and Wales in 1968.

#### *Causes of Death*

The causes of death are classified in Table III, the total deaths amounting to 1,096. The commonest killer is disease of the heart and blood vessels (548). Respiratory diseases, especially bronchitis and pneumonia in the elderly, and malignant disease are the two other major causes of death.

#### *Accidental Deaths*

Road accidents involving motor vehicles accounted for 11 deaths—8 more than in 1967.

#### *Accidents other than Road Accidents*

Of these 11 deaths, 3 were due to drowning, 2 to suffocation due to inhalation of food, 2 to injuries received when an aircraft crashed, one to head injuries in an elderly person, one to carbon monoxide poisoning, one to an overdose of drugs, one to crushing injury of chest and one to accidental hanging.

#### *Suicide*

The number of suicides was 3 compared with 9 in 1967.

#### *Infant Mortality*

The infant mortality rate (i.e. deaths of infants under one year per 1,000 live births) was 12.6 for the Borough compared with 18.0 for England and Wales. Of the 11 infant deaths, 8 occurred during the first 4 weeks. Three of the deaths were due to congenital malformations, 3 to prematurity, 3 to atelectasis, one to pneumonia and one to gastro-enteritis.

#### *Maternal Mortality*

There were no maternal deaths in 1968.



TABLE I

COMPARATIVE BIRTH, DEATH AND MATERNAL MORTALITY RATES, AND  
INCIDENCE RATES OF INFECTIOUS DISEASE FOR THE YEARS 1967 AND 1968

<i>Rates per 1,000 Population</i>	1967	1968
<b>Births</b>		
Live birth rate (crude)	11.7	12.1
<b>Deaths</b>		
All causes (crude)	15.3	15.2
Typhoid and Paratyphoid	—	—
Whooping Cough	—	—
Diphtheria	—	—
Tuberculosis	0.04	—
Influenza	—	0.27
Smallpox	—	—
Poliomyelitis	—	—
Pneumonia	1.85	2.3
Measles	—	—
<b>Incidence of Infectious Diseases</b>		
Typhoid	—	—
Paratyphoid	0.01	—
Meningococcal Infections	—	0.01
Scarlet Fever	0.22	0.14
Whooping Cough	0.22	0.32
Diphtheria	—	—
Erysipelas	0.03	0.06
Smallpox	—	—
Measles	8.07	2.3
Pneumonia	0.03	0.03
Poliomyelitis: Paralytic	—	—
Non-Paralytic	—	—
Food Poisoning	0.11	0.1
Dysentery	1.72	0.15
Tuberculosis: Respiratory	0.19	0.13
Non-Respiratory	0.07	0.13
Puerperal Pyrexia	0.01	—
Infective Jaundice	—	0.06
<b>Infant Mortality</b>		
<i>Rates per 1,000 Live Births</i>		
Under 1 year of age	10.7	12.6
Under 4 weeks of age (neonatal)	7.1	9.2
Under 1 week of age (early neonatal)	4.7	5.7
<i>Rates per 1,000 Total (Live and Still) Births</i>		
Still Births	8.2	13.6
Perinatal Mortality	13.0	19.5



**TABLE II**  
**COMPARATIVE BIRTH, DEATH AND MORTALITY RATES 1881-1968**

	BIRTH RATE PER 1,000 POPULATION		DEATH RATE PER 1,000 POPULATION*		MORTALITY RATES PER 1,000 LIVE BIRTHS OF CHILDREN UNDER ONE YEAR OF AGE	
	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>	<i>England and Wales</i>	<i>Epsom and Ewell</i>
1881 - 1890	32.4	26.2	19.1	14.5	142.0	107.0
1891 - 1900	29.9	22.9	18.2	13.7	153.0	121.0
1901 - 1910	27.2	24.9	15.4	11.7	128.0	93.0
1911 - 1920	21.8	18.2	14.3	11.5	100.0	71.0
1921 - 1930	18.3	16.1	12.1	9.8	72.0	49.0
1931 - 1940	14.9	12.6	12.3	7.3	58.0	41.0
1941 - 1950	16.9	14.2	12.3	9.4	43.1	28.4
1951 - 1960	15.8	10.4	11.6	15.0	24.8	19.1
1961	17.4	11.4 (13.6)	12.0	14.0 (9.5)	21.6	23.8 (19) <i>deaths</i>
1962	18.0	12.5 (14.7)	11.9	15.4 (10.2)	21.6	13.7 (12) <i>deaths</i>
1963	18.2	12.6 (14.2)	12.2	15.8 (9.9)	20.9	27.0 (24) <i>deaths</i>
1964	18.4	12.8 (14.5)	11.3	14.7 (9.3)	20.2	18.5 (17) <i>deaths</i>
1965	18.1	13.0 (14.7)	11.5	15.0 (9.45)	19.0	15.0 (14) <i>deaths</i>
1966	17.7	13.5 (15.2)	11.7	15.3 (9.48)	19.0	19.5 (19) <i>deaths</i>
1967	17.2	11.7 (13.2)	11.2	15.3 (10.1)	18.3	10.7 (9) <i>deaths</i>
1968	16.9	12.1 (13.8)	11.9	15.2 (9.3)	18.0	12.6 (11) <i>deaths</i>

\* *Deaths of patients in mental hospitals included from 1953. From 1956 the standardised death rate allows for the high mortality in residential institutions, such as hospitals for mental illness.  
(Bracketed figures represent standardised rates)*

**TABLE III**  
**CAUSES OF DEATH IN THE BOROUGH OF EPSOM AND EWELL**

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Enteritis and other Diarrhoeal Diseases . . . . .	—	1	1
Other Tuberculosis, including late effects . . . . .	1	3	4
Syphilis and its sequelae . . . . .	3	—	3
Other Infective and Parasitic Diseases . . . . .	1	—	1
Malignant neoplasm, stomach . . . . .	6	4	10
Malignant neoplasm, lung, bronchus . . . . .	35	12	47
Malignant neoplasm, breast . . . . .	—	15	15
Malignant neoplasm, uterus . . . . .	—	3	3
Leukaemia . . . . .	3	2	5
Other Malignant neoplasms, etc. . . . .	41	43	84
Diabetes Mellitus . . . . .	6	6	12
Avitaminoses, etc. . . . .	—	1	1
Other Endocrine, etc., Diseases . . . . .	—	2	2
Anaemias . . . . .	2	—	2
Mental Disorders . . . . .	1	10	11
Other Diseases of Nervous System, etc. . . . .	10	11	21
Chronic Rheumatic Heart Disease . . . . .	6	4	10
Hypertensive Disease . . . . .	16	21	37
Ischaemic Heart Disease . . . . .	138	138	276
Other forms of Heart Disease . . . . .	9	47	56
Cerebrovascular Disease . . . . .	41	73	114
Other Diseases of Circulatory System . . . . .	20	35	55
Influenza . . . . .	8	12	20
Pneumonia . . . . .	71	93	164
Bronchitis and Emphysema . . . . .	29	15	44
Asthma . . . . .	1	1	2
Other Diseases of Respiratory System . . . . .	3	2	5
Peptic Ulcer . . . . .	5	2	7
Intestinal Obstruction and Hernia . . . . .	—	4	4
Cirrhosis of Liver . . . . .	—	1	1
Other Diseases of Digestive System . . . . .	1	8	9

*(Table continued on next page)*



(Table III continued)

	Males	Females	Total
Nephritis and Nephrosis . . . . .	2	2	4
Hyperplasia of Prostate . . . . .	2	—	2
Other Diseases, Genito-Urinary System . . . . .	1	6	7
Diseases of Musculo-Skeletal System . . . . .	—	4	4
Congenital Anomalies . . . . .	2	5	7
Birth injury, difficult labour, etc. . . . .	1	1	2
Other Causes of Perinatal Mortality . . . . .	1	—	1
Symptoms and ill-defined conditions . . . . .	5	9	14
Motor Vehicle Accidents . . . . .	7	4	11
All Other Accidents . . . . .	8	4	12
Suicide and self-inflicted injuries . . . . .	2	1	3
All Other External Causes . . . . .	2	1	3
Total	490	606	1,096

### SERVICES UNDER THE PUBLIC HEALTH ACTS

#### Water Supply

The source of the Borough's water supply remains unchanged. Epsom, including the local hospitals, is supplied from the deep chalk wells of the Council's undertaking in East Street. It is the routine practice for the Borough Water Engineer to send weekly samples of raw water to the County's Public Health Laboratory in London. Reports throughout the year were satisfactory. In addition 198 samples of raw water from this source were submitted to the Public Health Laboratory in Epsom and all were found to be satisfactory. Ewell is supplied mainly from the Sutton District Water Company's chalk wells in Carshalton Road, Sutton, and in Woodmansterne. Monthly samples were submitted to the County's Public Health Laboratories. A part of the Borough in the Stoneleigh and Worcester Park area (population 7,029) is supplied by the Metropolitan Water Board (River Thames). The quality control at the Water Board's Laboratories was carried out by means of daily sampling and 100 per cent samples of treated water were negative for Bact. coli (Type I). Part of West Park Hospital supply, about 50,000 gallons per day, is pumped from a deep well on the site—36 samples of raw water from the well proved satisfactory.

Chlorination of all raw water was carried out before it was put into supply. Of 316 samples of tap water going into supply, all gave a satisfactory report.

The chemical analyses of the water from the Borough's undertaking and from the Sutton District Water Company were reported on at regular intervals and below are given typical results.

	Epsom and Ewell Corporation	Sutton District Water Company
Appearance . . . . .	Clear and Bright	Bright with a slight white deposit of minute particles of calcium carbonate particles
Colour . . . . .	Nil	Nil
Odour . . . . .	Nil	Nil
pH . . . . .	7.3	8.8
Electric Conductivity . . . . .	510	280
Dissolved solids dried at 180°C . . . . .	360	215
Chlorine as Chloride . . . . .	20	23
Free Carbon Dioxide . . . . .	25	Absent
Alkalinity as Calcium Carbonate . . . . .	240	45
Hardness: Total . . . . .	280	120
Carbonate . . . . .	240	45
Non-Carbonate . . . . .	40	75
Nitrate Nitrogen . . . . .	7.2	11
Nitrite Nitrogen . . . . .	Absent	Less than 0.01
Ammoniacal Nitrogen . . . . .	Nil	0.16
Oxygen absorbed . . . . .	Nil	Nil
Albuminoid Nitrogen . . . . .	Nil	Nil
Residual Chlorine . . . . .	Nil	0.20
Metals: Iron . . . . .	Absent	Absent
Zinc . . . . .	Absent	Absent
Copper . . . . .	Absent	Absent
Lead . . . . .	Absent	Absent

The fluoride content in the Sutton District Water Supply was reported to be 0.1 part per million or less, in the Thames 0.3 parts per million and to be not more than a trace in the Epsom Wells supply. No serious shortage of water was reported throughout the year. Every house in the built-up areas in the Borough is supplied direct from mains. One house isolated in the middle of a wood, was dependent on rain water storage. The occupants of 40 caravans were supplied from stand-pipes.



## Fluoridation of the Public Water Supply

In June 1968, a further Circular No. 24/68 was received in which the then Minister of Health again strongly urged all local health authorities, who had not already done so, to adopt this measure at the earliest possible date. Although this was approved by the Public Health Committee, the Council, after a very full debate, were opposed to the addition of fluoride to the public water supplies in the Borough. This confirmed their previous decision taken in 1965.

## Cesspools

There were 43 cesspools in the Borough. Pail closets were in use at 40 caravans and at 7 other premises.

## Sewage and Sewage Disposal

The sewage from the Borough is piped to the disposal works administered by the Hogsmill Valley Joint Sewage Board in the Royal Borough of Kingston-upon-Thames. This arrangement works satisfactorily and prevents any untreated sewage effluent being discharged into local streams.

## Land at Lower Cox Lane, West Ewell

Continued progress has been maintained during the year. All the caravans have been moved on to hard standings and fencing has now been placed around each site. The Council's present policy of re-housing caravan families from the housing list at the appropriate time or whenever there are strong medical implications plus their strict rule that no further caravans are being admitted on to the site, is now having its effect. The total number of caravans present has dropped to 31 and there are now many vacant plots. It is hoped that in due time all will be re-housed.

However, as was stated last year, although the environment is continuing to improve, the social problems and the health, welfare and educational needs of the remaining families require constant attention.

The photographs facing page 24 show how conditions have improved over the past eighteen months.

## Swimming Baths and Pools

The Municipal Baths were open from April to October. The total attendances were 108,431. The swimming bath is well maintained and the system of continuous filtration and chlorination renders the water safe as far as communicable disease is concerned. Samples of water from two privately owned open-air swimming pools were sent for bacteriological examination and the owners advised if the amount of chlorine needed to be increased. Satisfactory reports were received from the Pathology Laboratory on samples of water from the school bathing pools.

## Housing

I am indebted to the Borough Engineer for information about the number of new dwellings erected during the year.

Erected by the Local Authority . . . . .	230
Erected by private enterprise . . . . .	225

At the end of the year 705 applicants were on the Council's waiting list for re-housing.

The scope of the Health Inspector's work dealing with housing, the improvement of houses under the Housing Act 1964 and the clearance of properties which are unfit for human habitation is detailed in the Chief Public Health Inspector's Report.

## Sanitary Inspection of the Area

The work carried out by the Health Inspectors on the sanitary supervision of the District is detailed in the Report of the Chief Public Health Inspector.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

### Notifiable Infectious Disease

During the year the Joint Committee on Vaccination and Immunisation of the Ministry of Health produced recommendations regarding a revised schedule for Immunisation. The Ministry hoped that this schedule would become recognised all over the country and replace the various official and semi-official schedules at present in use. The main differences in relation to the previous schedule adopted locally are as follows and were implemented as from September 1st:

1. The insertion of Measles Vaccination between the ages of 1 and 2 years.
2. Discontinuing the booster Diphtheria/Pertussis/Tetanus and Poliomyelitis Vaccinations at 18 months.
3. Similarly discontinuing the booster Diphtheria/Tetanus immunisation between 8 and 12 years.
4. Stressing the importance of booster Diphtheria/Tetanus with oral Poliomyelitis and Smallpox re-Vaccination at school entry and oral Poliomyelitis, Smallpox re-Vaccination and Tetanus booster at age 15 or school leaving age.

On October 1st the Sections of the new Health Services and Public Health Act 1968 dealing with Notifiable Diseases and Food Poisoning came into operation and the following are the principal changes:

1. The following diseases were no longer to be notified: Acute primary pneumonia—acute influenzal pneumonia—acute rheumatism—puerperal pyrexia—erysipelas—membranous croup.
2. Tetanus—Yellow Fever and Leptospirosis to be notifiable.
3. Infectious Hepatitis was added to the List of Notifiable Diseases, although this had already become a notifiable disease on the 15th June under the Public Health (Infective Jaundice) Regulations 1968.



4. The Notification Fee was increased to five shillings.

Table I includes death rates and incidence rates of the notifiable infectious diseases, with the figures for the previous year for comparison. Table IV shows the number of cases of infectious diseases notified during 1968. Table V shows the incidence of notifiable infectious diseases classified according to age and sex, with the exception of tuberculosis which is dealt with in Tables VI and VII.

### Smallpox

No cases were reported during the year.

#### *Vaccination against Smallpox*

Vaccination as before was available either through the family doctor or at the clinics throughout the Borough. During the year 584 primary vaccinations and 119 re-vaccinations were notified. Of these 209 and 99 were carried out by the family doctors in their own surgeries. Unfortunately, these figures show a decrease on those for 1967.

It cannot be stated too strongly that the possibility of another outbreak such as was experienced in 1961/62 is always a possibility in these days of air travel and the increasing numbers of persons, both true immigrants and visitors entering the country from smallpox endemic areas. Primary vaccination carried out between the ages of 1 and 2 years with re-vaccination at school entry is very much better than sudden mass panic measures, with all its attendant risks, at the time of a possible epidemic.

### Diphtheria

No cases were notified during 1968 and therefore no cases have occurred in this Borough for 15 years. Immunisation is again carried out both by family doctors and in the clinics and as from 1st September 1968 the new schedule has been generally adopted, whereby primary immunisation is carried out between the 6th and 12th month, and booster doses only being given at school entry. In the majority of cases, the primary inoculations are given combined with Tetanus and Whooping Cough.

#### *Immunisation Procedures Carried Out*

<i>Inoculations</i>	<i>Carried out by General Practitioners</i>	<i>Carried out at Schools and Clinics</i>
<i>Primary</i>		
Triple (Diphtheria, Whooping Cough and Tetanus) . . . . .	214	449
Combined (Diphtheria and Tetanus) . . . . .	12	9
Tetanus only . . . . .	52	12
<i>Reinforcing</i>		
Triple (Diphtheria, Whooping Cough and Tetanus) . . . . .	125	372
Combined (Diphtheria and Tetanus) . . . . .	120	1,051
Tetanus only . . . . .	41	10

### Poliomyelitis

It is pleasing to report that it is 8 years since the last case of paralytic Poliomyelitis was reported in the Borough. Primary vaccination was carried out in 701 persons under 16 years as compared to 778 in 1967. In addition 840 persons received reinforcing doses. It is of interest to note that all these vaccinations were by the oral method and no injections were given at all. Close watch will be kept that the high inoculation state, which has been obtained in this Borough, and which is so vital in preventing any possible outbreak, is not allowed to slowly decrease.

### Typhoid and Paratyphoid

No cases of Typhoid or Paratyphoid Fever were reported during 1968.

### Food Poisoning

Once again the number of notified cases fell from 8 in 1967 to 7 in 1968 and they were all isolated incidents. This is a most satisfactory state of affairs and speaks well for all the multiple shop-keepers, food-handlers, hotels, restaurants, canteens, etc., in the Borough. The Public Health Inspectors are, however, ever vigilant to see that a high standard of hygiene is maintained.

### Dysentery

I am pleased to be able to report that during 1968, there were only 11 cases of Sonne Dysentery notified as against 119 in 1967. They were all isolated incidents and only 2 were reported from the local hospitals. One can but hope that this satisfactory position continues but as was stated last year, epidemics are always a possibility and present-day knowledge is not yet adequate in either preventing or controlling them.

### Influenza

Owing to the number of staff off duty after Christmas 1967 due to influenzal-type illnesses, the Council decided that all the staff be offered Influenza Vaccine to try and prevent a similar situation in the winter of 1968/69. Thus in November, 250 members of the Council's staff were



vaccinated with the "old type" vaccine, with few immediate reactions. It is too early to say if this has had any beneficial effect. At the end of the year it was anticipated that supplies of the new "Hong Kong" vaccine would soon become available.

### Scarlet Fever

There was a fall this year in the number of cases, only 10 being notified as against 16 the previous year. Once again these were clinically mild.

### Measles

167 cases had been notified by the end of the year as compared to 581 cases in 1967. All were mild and there were no deaths. In the early part of the year the Minister of Health made the long anticipated decision that Measles Vaccination should be offered on a large scale by Local Authorities. Because of the shortage of vaccine at the commencement of the scheme, he advised that at first all children between their fourth and seventh birthdays be vaccinated in May, June and July. A rush programme was thus organised and all the Infant Schools in the Borough were visited in June and July and all children whose parents had consented, were vaccinated. The response was not quite as good as one had hoped. Later in the year, with vaccine more readily available, the older age groups up to 15 years were entitled to be vaccinated and by the end of the year the position had been reached whereby the vaccination was being offered to all children in the second year of life, according to the new Immunisation schedule and any child up to 15 years was also being vaccinated at the parents' request.

By the end of the year 1,265 vaccinations had been given by both the family doctors and in the clinics and schools. It is too early yet to know whether this will make much difference to the number of notifications in 1969.

### Whooping Cough

23 cases were notified as compared to 16 in 1967. Although these figures are still small in number and fortunately no deaths occurred, it is disturbing indeed to note that in 13 cases, all had received their full primary immunisation and that 4 of these 13 had received a booster injection as well. Thus, although no doubt, immunisation against Whooping Cough prevents the majority of children from contracting the disease, there are a few cases in which either the immunity in the child is lost very quickly against a particular type of the virus and thus can become clinically ill, or else the vaccine was never able to produce sufficient immunity in the first place.

### Infective Jaundice

This disease first became notifiable in June, and was later included in the list of Notifiable Diseases in the new Public Health Act 1968 which came into force in October. Jaundice is, of course, only a symptom, and can be due to many causes, but one of the main reasons for making the infective type notifiable, was to allow the Medical Officer of Health to make further enquiries as to whether any particular case was due to drug addiction so that appropriate action could be taken. Unfortunately, many drug addicts, who take their drugs by injection, use dirty and unsterile syringes, needles and water and these can indeed lead to a type of Infective Jaundice, regrettably sometimes fatal.

Since the disease became notifiable, 4 cases have been notified in this Borough and in the one notified by a local hospital, the patient had in fact been injecting himself and sharing a syringe with others.

### Tuberculosis—Register of Tuberculous Persons

During the year the names of 24 persons were added to the Tuberculosis Register, and 51 were removed. Details of these alterations are as follows:

<i>Additions to Register</i>		<i>Removals from Register</i>	
Primary notifications relating to private residents already residing in this district . . . . .	10	By removals to other districts:	
Primary notifications of persons residing in institutions:		(a) Private residents . . . . .	12
(a) already resident . . . . .	6	(b) Patients in mental institutions . . . . .	5
(b) on admission . . . . .	Nil	By recovery:	
Transfer of private residents notified in other areas, now residing in this district . . . . .	1	(a) Private residents . . . . .	22
Transfer of persons notified in other areas now residing in institutions in this district . . . . .	1	(b) Patients in mental institutions . . . . .	Nil
Number of cases (previously removed) restored to Register during the year . . . . .	4	By death:	
Posthumous Notifications:		(a) Private residents . . . . .	5
(a) in private households . . . . .	1	(b) Patients in mental institutions . . . . .	7
(b) in institutions . . . . .	1		
	24		51



Of the 12 names removed from the Register because of death three were certified as due to tuberculosis.

At the end of the year the number of names on the Register totalled 305 distributed as follows :

	<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
In private residences . . . . .	96	60	8	18
In institutions . . . . .	98	17	4	4
	<hr/> 194	<hr/> 77	<hr/> 12	<hr/> 22

#### *Notifications of Tuberculosis*

Eighteen notifications were received from medical practitioners of persons certified, so far as is known, for the first time, to be suffering from tuberculosis. In Table VI these cases are classified by sex and age and sub-divided into pulmonary and non-pulmonary types of disease. In Table VII the number of notifications received in previous years is given for purposes of comparison.

#### *Extra Nourishment*

Provision of special nourishment in the form of milk was granted to 14 selected cases for varying periods during the year.

#### *B.C.G. Vaccination against Tuberculosis*

This protection is available at Chest Clinics to close contacts who are Mantoux negative and to children who are approaching school-leaving age. Consent forms were sent to parents of school-leavers. There was a high acceptance rate and the results are shown below :

Number tested . . . . .	448
Number Mantoux positive . . . . .	35 (equivalent to 7.8%)
Number of children vaccinated . . . . .	399

74 pupils at Epsom College were given B.C.G. vaccination and 24 children who missed vaccination in previous years.

#### *Mass Radiography Service*

From 4 to 4.45 p.m. every Friday, the Mass X-Ray Unit is sited outside the "Spread Eagle" in Epsom High Street. During the year 1,749 persons attended for Chest X-ray examination. The Unit also visited Epsom College where 180 pupils and staff were X-rayed. The Unit visited the Stoneleigh area where 1,250 members of the public were X-rayed and various factories, etc., in the Borough where 940 persons were X-rayed.

I am very pleased to be able to report that no cases of active pulmonary Tuberculosis were discovered. However, 4 cases of Lung Cancer were found, 3 male and 1 female, and referred for appropriate treatment.

#### *Public Health Laboratory Service*

Bacteriological investigations were carried out by the Public Health Laboratory, West Park Hospital, Epsom, under the direction of Dr. D. R. Gamble, to whom grateful acknowledgment is made. Specimens may be submitted by doctors, veterinarians, dentists, persons acting on behalf of medical officers of health, such as health inspectors and health visitors, or by representatives of official bodies. Specimens cannot be accepted from private persons. The routine specimens examined fall under two main headings :

- (a) medical specimens ;
- (b) sanitary specimens from local or food authorities or, by arrangement, from commercial undertakings.

### **SERVICES UNDER THE FOOD AND DRUGS ACT 1955**

The wide range of duties of the Health Inspectors in this field is detailed in the Report of the Chief Public Health Inspector.

#### **Poultry Inspection**

There are no poultry processing premises within the Borough.



**TABLE IV**  
**NOTIFICATION OF INFECTIOUS DISEASES**

	<i>Notifications of Diseases occurring in Private Houses</i>	<i>Notifications of Diseases occurring in Hospital</i>	<i>Total</i>
Typhoid Fever . . . . .	—	—	— (—)
Paratyphoid Fever . . . . .	—	—	— (1)
Meningococcal Infections . . . . .	1	—	1 (—)
Scarlet Fever . . . . .	10	—	10 (16)
Whooping Cough . . . . .	23	—	23 (16)
Diphtheria . . . . .	—	—	— (—)
Erysipelas . . . . .	3	1	4 (2)
Smallpox . . . . .	—	—	— (—)
Measles . . . . .	167	—	167 (581)
Pneumonia . . . . .	2	—	2 (2)
Poliomyelitis : Paralytic . . . . .	—	—	— (—)
Non-Paralytic . . . . .	—	—	— (—)
Food Poisoning . . . . .	6	1	7 (8)
Dysentery . . . . .	9	2	11 (124)
Malaria : Contracted abroad . . . . .	—	—	— (—)
Indigenous . . . . .	—	—	— (—)
Tuberculosis : Respiratory . . . . .	4	5	9 (14)
Non-Respiratory . . . . .	7	2	9 (5)
Puerperal Pyrexia . . . . .	—	—	— (1)
Tetanus . . . . .	—	—	— (—)
Yellow Fever . . . . .	—	—	— (—)
Leptospirosis . . . . .	—	—	— (—)
Infective Jaundice . . . . .	3	1	4 (—)

*Under the Health Services and Public Health Act 1968 from 1st October 1968, the following diseases need no longer be notified :*

*Acute primary pneumonia, acute influenzal pneumonia, acute rheumatism, puerperal pyrexia, erysipelas and membranous croup.*

*Now have to be notified : Tetanus, Yellow Fever and Leptospirosis.*

*From 15th June 1968 Infective Jaundice has to be notified.*

REFERENCE FOR TABLES IV AND V

TABLE V—NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX (FOR TUBERCULOSIS SEE TABLE VI)

	Under 1 year		1 - 2		3 - 4		5 - 9		10 - 14		15 - 24		25 - 44		45 - 64		65 years and over		All Ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Typhoid Fever . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Paratyphoid Fever . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(1)
Meningococcal Infections . . . . .	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	(—)
Scarlet Fever . . . . .	—	—	1	—	1	—	4	3	—	—	1	—	—	—	—	—	—	—	6	4	10 (16)
Whooping Cough . . . . .	1	2	1	1	3	4	5	5	—	—	—	—	1	—	—	—	—	—	11	12	23 (16)
Diphtheria . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Erysipelas . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	4	—	4 (2)
Smallpox . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Measles . . . . .	3	2	19	20	37	28	28	25	1	—	1	—	—	3	—	—	—	—	89	78	167 (581)
Pneumonia . . . . .	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1	1	2 (2)
Poliomyelitis : Paralytic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Non-Paralytic . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Food Poisoning . . . . .	—	—	2	2	1	—	—	—	—	—	—	—	1	—	1	—	—	—	3	4	7 (8)
Dysentery . . . . .	—	—	—	1	—	1	1	6	—	—	—	—	—	—	1	—	1	1	1	10	11 (124)
Malaria . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Puerperal Pyrexia . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(1)
Tetanus . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Yellow Fever . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Leptospirosis . . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	(—)
Infective Jaundice . . . . .	—	—	—	—	—	—	—	—	—	—	1	1	1	—	1	—	—	—	2	2	4 (—)



**TABLE VI**  
NOTIFICATION OF TUBERCULOSIS BY AGE AND SEX

Year	Private Residents				Mental Hospital Patients				Total	
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary			
	M	F	M	F	M	F	M	F	M	F
Under 1 year	—	—	—	—	—	—	—	—	—	—
1 - 4	—	—	—	—	—	—	—	—	—	—
5 - 9	—	—	1	—	—	—	—	—	1	—
10 - 14	—	—	—	—	—	—	—	—	—	—
15 - 19	—	—	—	—	—	—	—	—	—	—
20 - 24	—	—	—	—	—	—	—	—	—	—
25 - 34	—	—	—	1	—	—	—	—	—	1
35 - 44	1	1	—	—	—	—	—	—	1	1
45 - 54	—	2	—	—	1	—	—	1	1	3
55 - 64	2	—	—	1	3	—	—	—	5	1
65 and over	—	1	—	1	1	—	—	1	1	3
Total	3	4	1	3	5	—	—	2	9	9

**TABLE VII**  
TUBERCULOSIS INCIDENCE AND MORTALITY RATES 1934-1968  
(QUINQUENNIAL AVERAGES 1934-1963)

Year	Primary Notifications	Notification Rate per 1,000 Population	Deaths	Death Rate per 1,000 Population
1934 - 1938	44	0.78	18	0.35
1939 - 1943	67	1.11	33	0.52
1944 - 1948	75	1.15	26	0.36
1949 - 1953	66	0.96	19	0.28
1954 - 1958	53	0.78	14	0.20
1959 - 1963	34 (16)	0.49	4 (2)	0.05
1964	41 (15)	0.57	3 (—)	0.04
1965	15 (5)	0.21	1 (—)	0.01
1966	22 (7)	0.31	2 (—)	0.03
1967	19 (5)	0.26	2 (2)	0.03
1968	18 (7)	0.25	3 (2)	0.04

*Figures relating to patients in mental hospitals situated in the district are included in the total. They are also shown separately in the bracketed figures*





## PART TWO

## PERSONAL

## HEALTH SERVICES



## PERSONAL HEALTH SERVICES

### "Well-Women" Clinic

The "Well-Women" Clinic sessions continued throughout the year at the Church Street Clinic. I am grateful to Mr. H. A. Milne, Consultant Gynaecologist, who conducts the Clinic and to Dr. M. Levene, Consultant Pathologist at St. Helier Hospital, who reports to us the results of the cervical smears.

The statistics for 1968 are as follows :

Number of Clinic Sessions . . . . .	53
Number of Attendances :	
First appointments . . . . .	834
Re-examinations . . . . .	62
	896

It is pleasing to report that all of the results were either normal or showed only minor changes.

### Ante-Natal Care

Ante-Natal sessions are held at the Health Clinics in Ewell and Epsom. At Ewell a weekly session is conducted by a Consultant Obstetrician from Epsom District Hospital assisted by a Medical Officer of the Borough Council. The Midwives hold a session twice weekly at Ewell Clinic and once weekly at Epsom Clinic.

Details of attendance at these sessions are given below :

<i>Clinic</i>	<i>Sessions held by</i>	<i>Number of Women who attended during the year</i>	<i>Total Number of attendances during the year</i>
Ewell	Obstetrician and Medical Officer .	167	1,130
Ewell	Midwives . . . . .	135	684
Epsom	Midwives . . . . .	60	297

In addition 81 women attended at Ewell Clinic for post-natal examination.

Expectant mothers attended as under at Ewell and Epsom Clinics for Mothercraft (Health Visitors) and Relaxation Exercises (Physiotherapist).

	<i>Number of women who attended</i>	<i>Number of new cases</i>	<i>Total attendances</i>	<i>Sessions per month</i>
Ewell . . . . .	166	153	638	4
Epsom . . . . .	52	45	231	4

### Midwifery Service

The proportion of domiciliary confinements in 1968 was as follows :

<i>Total Births Live and Still</i>	<i>Domiciliary Confinements</i>	<i>Percentage of Domiciliary Confinements</i>
879	134	15.2

Details of the work of the domiciliary midwives in 1968 was as follows :

Confinements :

(a) Doctor booked . . . . .	134
(b) Doctor not booked . . . . .	Nil
(c) Miscarriages . . . . .	Nil

Number of visits paid by Midwives :

Ante-natal visits . . . . .	1,085
Visits during labour/puerperium/post-natal and visits to cases discharged from hospital before end of 10th day . . . . .	2,647

Based on a 10-day lying-in period, hospital beds are provided for approximately 65 per cent of all confinements. The shortage of maternity beds has necessitated a large number of "early discharges" (48 hours after delivery). When the expectant mother first attends the Hospital Ante-Natal Clinic, the Obstetrician will base his decision whether or not she is to be booked for hospital confinement :

- (a) on her medical history ;
- (b) on home conditions as reported by the domiciliary midwife.

If she is considered suitable for "early discharge", the Borough Nursing Officer ensures that a District Midwife will accept the care of the mother and infant during the remainder of the lying-in period while the Home Help Supervisor makes the necessary arrangements for domestic help.



## Analysis of Notified Births

	Live Births	Still Births	Total
Born at Home (Local Authority Midwives)	133	1	134
Born in Hospitals	734	9	743
Born in Nursing Homes	2	—	2
Total	869	10	879

### Prematurity (i.e. babies weighing 5½lb. or less at birth)

Equipment is provided by this Department for the care of premature infants born at home and adequate provision is available in hospital.

#### (a) Number of premature infants notified

Place of Birth	Live Births	Still Births
Own home	—	—
Maternity Homes	—	—
Hospital	38	6
	38	6

#### (b) Deaths of premature infants within 28 days

In Hospital	4
At Home	—
	4

### Phenylketonuria

I reported last year that it was probable that the Phenistix Test would be replaced by the more reliable Guthrie blood test sometime during the year. Epsom District Hospital adopted this Test on all new babies from 1st January and it was decided that as from 1st March my Department would also adopt this method. Prior to this date several consultations took place with Dr. R. L. Newman, the Consultant Pathologist for Queen Mary's Hospital for Children, and I am grateful to him for coming and demonstrating the practical side of the Test to all the Midwives and Health Visitors concerned and for his valuable advice during this period.

The Test is now carried out either in the Epsom District Hospital or in cases of early discharge or home confinements by the Midwife on the 6th day. All Tests being sent to the Laboratory at St. Ebba's Hospital for examination. In any case where there is any element of doubt that a Guthrie Test has not been performed, the Health Visitor carries out a Phenistix Test between the 10th and 15th day and again at 12 months.

During 1968 no case of Phenylketonuria was discovered.

It was reassuring to receive in October a Report by a Working Party of the Medical Research Council who recommended that all Authorities replace the Phenistix Test by the Guthrie Test.

### Congenital Malformations

Local Health Authorities are required to report to the Registrar General all congenital malformations noted at birth. During the year there were 14 notifications representing 1.6 per cent of total births. The malformations came under the following headings:

Central Nervous System	5
Alimentary System	3
Other Malformations	3
Deformities of Limbs	2
Uro-genital Deformities	1
Total	14

All cases of congenital malformations are kept under observation and, if necessary, added to our Register of Handicapped Children.

### The Unmarried Mother and her Child

The welfare of Unmarried Mothers and their Children continued in the hands of the Social Workers of the Epsom Deanery Association and the Southwark Catholic Children's Society. During the year 8 girls, ages ranging from 18 to 26 years, were admitted to Voluntary Homes or to the Surrey County Council Home at Dorincourt, Woking. Seven of these mothers kept their babies and the other mother had her baby adopted.



## Child Welfare Clinics

These were held in the afternoons at :

*Average attendance  
per Session*

Ewell Court :	
Mondays, Wednesdays and Thursdays . . . . .	73
Church Hall, Dell Lane, Stoneleigh :	
Tuesdays . . . . .	31
Church Hall, Northey Avenue, Cheam :	
Wednesdays . . . . .	35
Church Street, Epsom :	
Mondays and Wednesdays . . . . .	70
Wells Social Centre, Epsom :	
1st, 3rd and 5th Tuesdays . . . . .	40
Church Hall, Rosebery Road, Epsom Downs :	
2nd and 4th Tuesdays . . . . .	30

## Clinic Attendance

<i>Clinic</i>	<i>Number of children attending clinics born in</i>			
	1968	1967	1966-63	<i>Total</i>
Ewell Court . . . . .	395	386	846	1,627
Dell Lane . . . . .	57	73	202	332
Northey Avenue . . . . .	42	49	142	230
Epsom . . . . .	278	294	464	1,036
Wells House . . . . .	33	50	77	160
Epsom Downs . . . . .	22	24	64	110
Total . . . . .	827	876	1,795	3,498

## Welfare Foods

National dried milk, orange juice, cod liver oil and vitamin tablets are obtainable during clinic sessions for the use of expectant and nursing mothers, children up to the age of five years and handicapped children. In addition a large variety of proprietary foods are on sale at all clinics at reduced prices. This service is run by voluntary helpers.

## REPORT OF THE SENIOR DENTAL SURGEON

### The Dental Care of Mothers and Pre-School Children

Some 36 mothers were inspected and treatment carried out when necessary. Few mothers are seen suffering from neglected mouths—evidence of the maintained care by private practitioners or by the public services.

Of the pre-school children, the number inspected was 297, and those receiving treatment was 125. Both figures show an increase over the previous year. Most of these children attended the Clinic, but inspections were also carried out at the Nursery Classes of two Ewell Schools at the Waltham House Day Nursery and at the Wells House Residential Nursery.

### Promotion of Dental Health

In their approach to parents, the dental and medical staff at the Clinics constantly endeavour to encourage these parents to take responsibility themselves for the care of their children's teeth. This can be effected by observing sensible rules of diet and hygiene in the home and by insisting on regular dental inspections from an early age.

### Summary of Treatment

(a) *Number provided with dental care*

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>	<i>Made Dentally Fit</i>
Expectant and Nursing Mothers . . . . .	36	34	42	26
Children under 5 years . . . . .	297	150	125	109



(b) *Forms of dental treatment provided*

	<i>Scaling and Gum Treatment</i>	<i>Fillings</i>	<i>Silver Nitrate Treatment</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Dentures Provided</i>		<i>X-rays</i>
						<i>Full</i>	<i>Partial</i>	
Expectant and Nursing Mothers	21	88	—	19	6	1	5	4
Children under 5 years	—	302	25	94	48	—	—	1

Two Dental Treatment Centres were in use for services shown above and the equivalent of 67 Dental Officer Sessions were devoted to Maternity and Child Welfare patients during the year.

(c) *Attendance for dental inspection and treatment*

Expectant and Nursing Mothers	129
Children under 5 years	324

### **Audiological Service**

In accordance with accepted practice, all babies have a hearing test at the age of 7 months and any case requiring further investigation is referred to the County Audiologist. A further test is done on every child "at risk" at 2½ years. During the year 824 children had screening tests for hearing and 27 were referred as above. Again, I would stress the importance of the ascertainment of severe deafness before the child's first birthday and certainly before the second. At this early age the specialist teacher is able to get the maximum response from the child's residual hearing and so to teach him to watch for speech and to develop speech and language.

### **Recuperative Holidays**

Holidays are arranged for patients who have been ill in their own homes or in hospital and who require a period of recuperation without nursing or medical care.

Particulars of cases dealt with during the year are as follows :

	<i>Recommended by Hospital Departments</i>	<i>Recommended by General Practitioners</i>	<i>Total</i>
Number of Patients	2	11	13

### **Medical Arrangements for Long-Stay Immigrants**

The medical examination and surveillance of long-stay Immigrants was continued in accordance with the Ministry of Health's advice. During the year we confirmed that 66 immigrants had taken up residential posts in our local hospitals where they had the usual health checks. Health Visitors called on 15 other immigrants, advised them on how to make best use of our Health Services and gave each an appointment to attend at Epsom Chest Clinic for X-ray and B.C.G. Vaccination if necessary.

From 1st January 1965 to the end of 1968 we had been notified of 372 persons who had taken up long-term residence in the Borough and the three chief countries of origin were Spain, the Caribbean area and Hong Kong.

### **Medical Examinations**

For many years all superannuation and other medical examinations of the Borough Council Staff had been carried out by a local General Practitioner. Upon his retirement the Council agreed that as from the 1st November 1968 the Medical Officer of Health should undertake all these examinations and during the last two months of the year 30 examinations were carried out.

### **Home Nursing**

At the end of the year we were up to our full establishment of the equivalent of 15 full-time District Nurses/Midwives. In addition we were employing two part-time Nursing Auxiliaries in order to relieve the qualified staff of unskilled nursing duties.

Two Nurses attended Refresher Courses at The Royal College of Nursing and 3 attended Courses at Glyn House, Ewell.

Below are given particulars of patients nursed during the year :

<i>Age Group</i>	<i>Number of Patients</i>	<i>Number of Visits</i>
Under 5 years	9	85
Between 5 and 64 years	398	4,172
65 years and over	720	25,744

### **Pads for the Incontinent**

Incontinence Pads and protective undergarments are supplied to patients, free of charge, on the recommendation of a Medical Practitioner or a member of the Borough Nursing Staff. During the year 98 incontinent patients came under the care of the District Nurses and approximately 6,000 pads were supplied.



### *Disposal of Soiled Pads*

In homes where there is an open fire or a solid fuel boiler disposal is easy. Where no facilities exist for burning, the soiled pads are placed in specially made waterproof paper bags supplied by the Public Health Department which arranges for collection and disposal by incineration.

### **Incontinent Laundry Service**

Due to the kind offices of the West Park Hospital Management Committee it was possible to commence this Laundry Service on 1st April, for which there had been a definite demand for some time. The procedure is that at the same time as soiled laundry is collected so fresh sheets are supplied. The soiled articles are then taken straight to the Laundry in West Park Hospital. A small reserve of clean sheets is kept at Ashley House. So far during the last nine months of the year this service was given to 15 persons.

### **Epsom Day Nursery, Waltham House**

Waltham House is a Training Nursery of 50 places. The staff at the Nursery, excluding domestic staff, consists of Matron, Deputy Matron, Warden, six Nursery Nurses and four Students. This conforms with the standards for the staffing of Day Nurseries laid down by the Ministry of Health in 1965.

During the course of the year we were very sorry to lose the services of Mrs. M. Smith, who has given such excellent services as Deputy Matron, and the post has been filled by Miss H. Shannon, who has proved herself to be a most efficient and conscientious Deputy.

The average daily attendances each month during 1968 were :

<i>Month</i>	<i>Children Aged</i>		<i>Total Average Daily Attendances</i>
	<i>0-2</i>	<i>2 - 5</i>	
January . . . . .	11.9	15.6	27.5
February . . . . .	15.6	19.7	35.3
March . . . . .	13.7	18.2	31.9
April . . . . .	14.6	18.3	32.9
May . . . . .	17.1	21.1	38.2
June . . . . .	13.9	22.9	36.8
July . . . . .	13.3	26.3	39.6
August . . . . .	9.6	20.4	30.0
September . . . . .	12.9	19.0	31.9
October . . . . .	14.0	22.9	36.9
November . . . . .	12.4	17.9	30.3
December . . . . .	13.8	21.6	35.4

The average daily attendance for the year was 34.5.

### **Nurseries and Child Minders Regulation Act 1948 as amended by Health Services and Public Health Act 1968**

Ever since 1948, the Council has been responsible for the registration and supervision of Day Nurseries and of persons who receive children into their homes for financial gain, under the powers in the Nurseries and Child Minders Regulation Act 1948. Recently there has been criticism that these powers were not adequate and so in Section 60 of the new Health Services and Public Health Act 1968, which came into force on 1st November 1968, these powers were amended and strengthened.

At about the same time the Minister produced Circular 37/68 which gives guidance to Local Authorities regarding the various standards which should apply to the Day Care of pre-school children, and which is applicable to the new Act.

The main changes may briefly be summarised as follows :

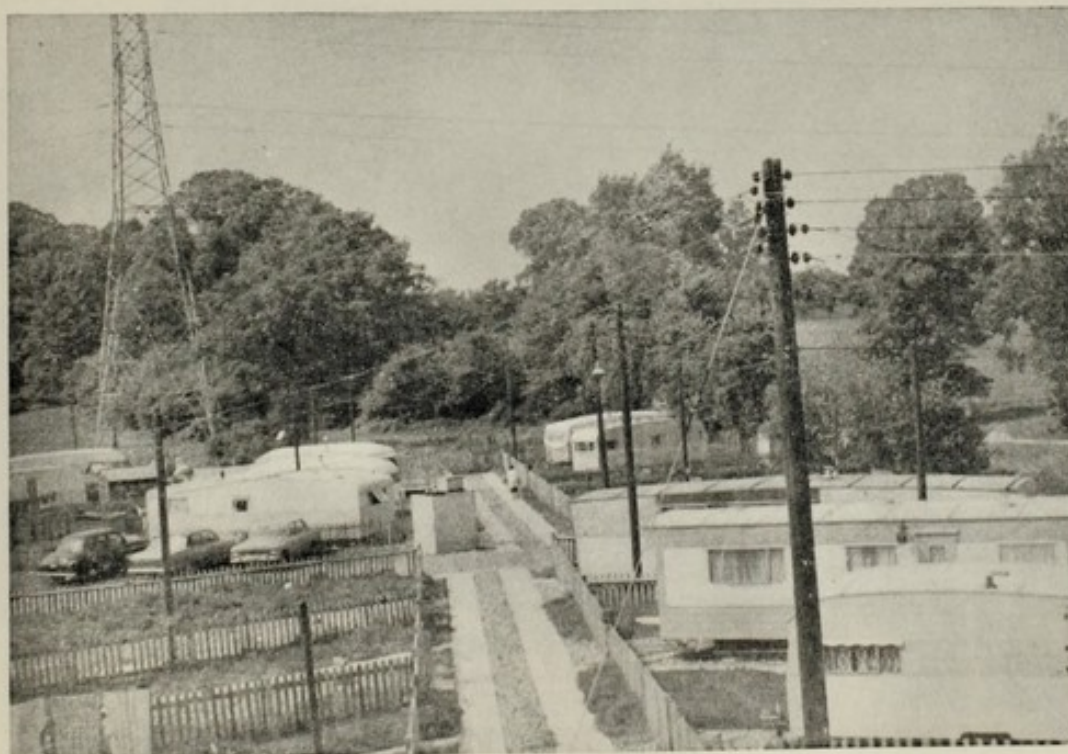
1. The minimum period of care for which registration is required is a period of two hours in the day (or an aggregate of two hours). This is the first time that a specific period in hours has been laid down.
2. It is an offence for an unregistered person, for reward, to look after in her own home *one* or more children, to whom she is not related. Under the previous Act it was *two* or more children.
3. Much greater power is now given to the Local Authority to refuse registration. The factors taken into consideration include the condition, construction or size of the premises, the equipment used, the health of the Minder or of other persons living in the house, the safety, feeding and diet of the children and the keeping of records. The maximum number of children received can be definitely imposed and is now related to the number of children already in the home. The qualifications and experience of the persons looking after the children are considered, and in all cases the question of safety from fire.



LAND AT LOWER COX LANE

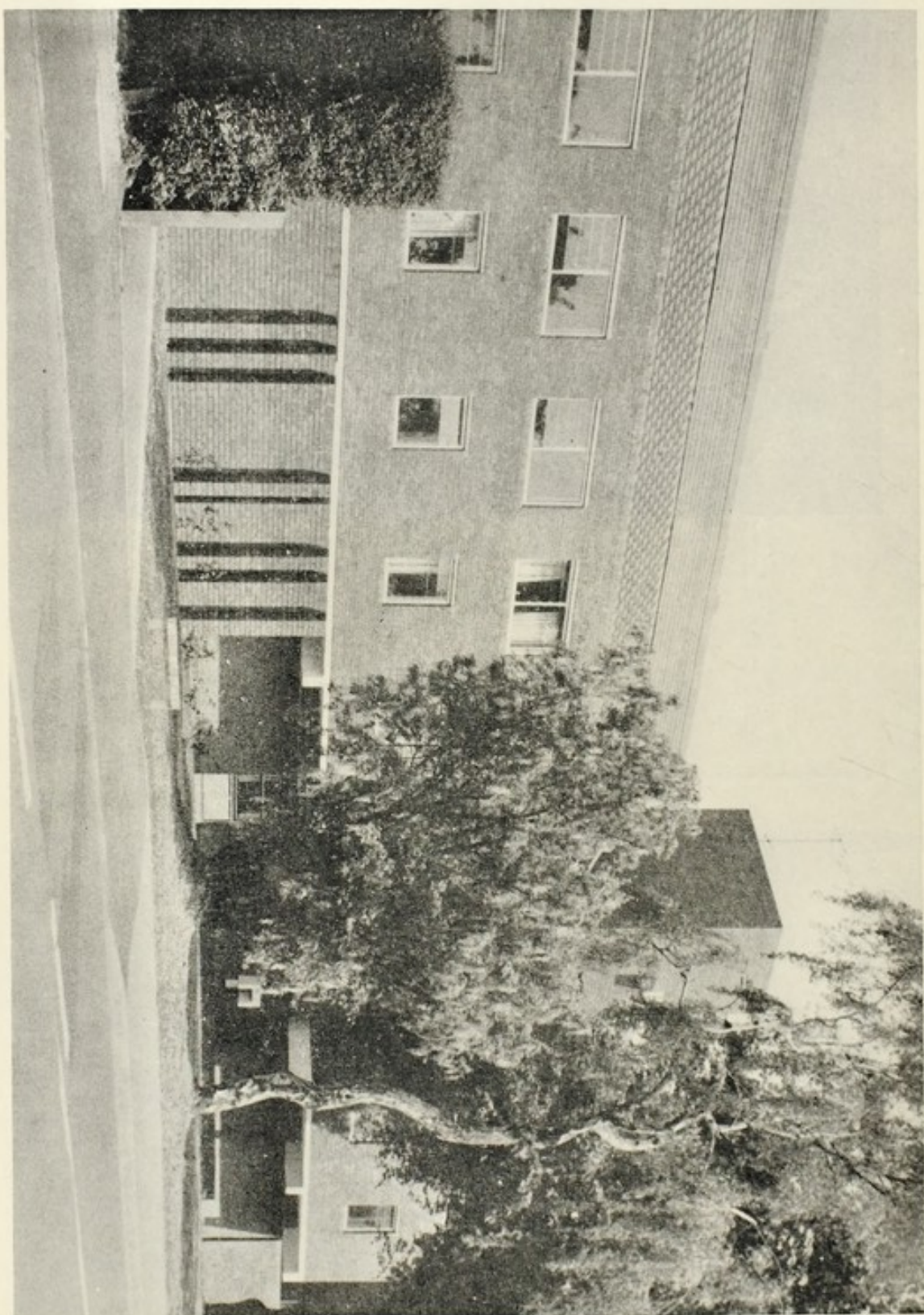


1967



1969





**Anderson House**—*The New Nurses Home, Alexandra Road, Epsom*



4. Persons authorised by the Local Health Authority may enter at a reasonable time the home of a registered person and inspect it and the children present. (Previously this power only existed in the case of premises.)
5. There are increased punishments for offences under the Act.

In practice, the first procedure under the new Act will be to find out and visit all persons in the Borough who are minding only one child, and who up until now have not been required to register. This will take place early in the New Year, and then when all have been registered, it is hoped that the previously registered Minders and Premises will be visited in due course with the object of trying to improve their standards where necessary by voluntary action.

At the end of the year the number of premises and child minders registered was as under :

	<i>Number registered as at 31.12.68</i>	<i>Number of children looked after</i>
Nursery premises . . . . .	16	519
Child Minders . . . . .	14	119

I am also indebted to Mrs. Barclay, Therapist at the Epsom Child Guidance Clinic, for arranging a further Course of Lectures during the year for those interested in running or working in Play Groups. These were held at Epsom Clinic and I am sure served a very useful purpose.

### **Nursing Homes Act and Regulations 1963**

The Nursing Homes Act 1963 and the relevant Regulations provide for sufficient and competent staffing, adequate space, furnishing and nursing equipment with sufficient sanitary and washing facilities, light, heating and ventilation. During the course of the year one Nursing Home closed down, leaving only one Home in the Borough. This Home provides 17 beds for geriatric patients. It is regularly inspected by the Medical Officer of Health and the Borough Nursing Officer and is always maintained at a high standard.

### **National Assistance Act 1948**

#### **National Assistance (Amendment) Act 1951**

Under Section 47 of the 1948 Act power is given to the Councils of County Boroughs and County Districts to apply to a Court of Summary Jurisdiction for an Order for removal and detention in a suitable hospital or other place :

of persons who are suffering from grave chronic diseases, or being aged, infirm or physically incapacitated are living in insanitary conditions, and of persons who are unable to devote to themselves, and are *not* receiving from other persons, proper care and attention.

During the year only one case was dealt with under this Act—an old lady of 85 years who was removed to St. Anne's Home, Redhill, and remained voluntarily after the expiration of the Order.

### **Ambulance Facilities**

The public ambulance service is under the control of the Surrey County Council and the main ambulance control station is situated at Walton Lodge, Banstead (telephone Burgh Heath 53491). There is a sub-station in Church Street, Epsom.

In accidents in the home or elsewhere or in case of sudden illness in streets or public places any responsible person may call an ambulance, telephone 999.

Where there is doubt about the maternity patient's fitness for the journey, the decision must be made by the doctor in charge or by a certified midwife who should accompany the patient in the ambulance to hospital. The removal of cases of illness or accident will be arranged by the hospital concerned, or by the medical practitioner in charge of the patient.

### **Family Planning**

The same arrangements have continued during this year as before, namely the Council providing a Family Planning Service indirectly through the Family Planning Association, whose local branch conducts Clinics at :

Epsom District Hospital—twice a week  
Epsom Health Clinic—twice a week  
Ewell Court Health Clinic—once a week

One of the sessions at the Epsom Clinic is devoted to the use of the intra-uterine device.

At these sessions the Regional Hospital Board and the Borough Council provide accommodation and clinic facilities free of charge.

### **Venereal Disease**

Press and posters give information to persons, who think they may be suffering from venereal disease, about Hospital Centres where free treatment under conditions of privacy may be obtained. Evening Clinics were available for both sexes at St. Helier Hospital, Carshalton, and St. Thomas' Hospital, London. Below are given particulars of new cases at St. Helier Hospital :

	<i>Syphilis</i>		<i>Gonorrhoea</i>		<i>Other Conditions</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male*</i>	<i>Female*</i>
Epsom and Ewell	—	—	6	2	34	15

\* The majority of these conditions are not venereal



## Health Visitor Service

During the year 3 new Health Visitors were appointed to this Department :

Mrs. J. Bailey, who replaced Miss J. Lowe, resigned.

Mrs. J. Hewett, to fill a vacancy for an additional Health Visitor on general duties.

Mrs. C. Chalupka, for an additional post of Geriatric Health Visitor.

These appointments brought our establishment of Health Visitors up to the full approved total of 12 :

6 based at Ewell Court Clinic

3 based at Epsom Clinic

2 Geriatric Health Visitors (one attached to Group Practices of General Practitioners)

1 Tuberculosis Health Visitor attached to the Chest Department of Epsom District Hospital

The average case load of families per Health Visitor on general duties was 416.

Number of children visited by Health Visitors during the year :

<i>Born in 1968</i>	<i>Born in 1967</i>	<i>Born in 1963-66</i>	<i>Total</i>
901	948	2,934	4,783

### *Clinic Attendances made by Health Visitors*

(a) Child Welfare Sessions . . . . .	404
(b) Immunisation and Vaccination Sessions . . . . .	4
(c) Health Education (including Mothercraft) . . . . .	154
(d) Geriatric Sessions . . . . .	154

The Tuberculosis Health Visitor is responsible for the community care of patients suffering from tuberculosis and other chest conditions. At the end of the year 252 patients were under her care.

## Chiropody

Chiropody was available throughout the year to elderly persons, physically handicapped (including the blind and partially-sighted) and expectant mothers.

1. By approved private Chiropodists who practise in their own Surgeries.
2. By Chiropodists employed by the Council, one full-time and three part-time who do a total of 10 sessions per week.

In every case the maximum charge is 3s. 0d. per treatment.

The Council make no charge for this service to any person who is in receipt of a supplement to pension from the Ministry of Social Security or whose means are so limited that to pay such a charge would be likely to render him eligible to receive a supplement to pension.

Domiciliary treatment is provided for any person who is physically unable to make the journey. This service, much appreciated and rapidly expanding, helps to keep the old person ambulant.

Details of treatment given are shown below :

1. <i>In the Surgeries of Chiropodists approved by the Council</i>	
Number treated during 1968. . . . .	862
Number of treatments given in Surgeries . . . . .	4,666
Number of treatments given at homes of patients . . . . .	672
2. <i>Council Chiropodists</i>	
Number treated during 1968. . . . .	928
Number of treatments given at Clinics and Old People's Homes . . . . .	2,906
Number of domiciliary treatments . . . . .	1,886

## Home Help Service

During the year it was considered that the experience of the Home Helps themselves might well be put to good use in improving the Service. Thus it was decided that a "Brains Trust" should be held and that the Home Helps put questions to a "Panel" and that out of it might come useful ideas for the future or would show up certain weaknesses either in the Service itself or in its relation to others. This was duly held in October and I am most grateful to the various members of the Panel for attending. They consisted of a local General Practitioner, the Group Medical Social Worker from the Epsom District Hospital and the Home Help Supervisor. The questions were varied and sensible and illustrated very clearly the keen interest shown by the Home Helps in their work. All the Home Helps attended as well as many persons from other statutory and voluntary bodies and in view of its apparent success it is hoped that a further meeting will be arranged at a later date. I am certain that it is only by creating interest within the Service itself that satisfactory recruitment is maintained.

As each year passes, the Home Help Service is becoming more closely integrated with all other fields of domiciliary work, because it is only in this way that the maximum care and benefit will be given to the people who ask for our help.



The establishment for the Borough is the equivalent of 21 full-time Helps.

Helps employed at the end of the year

Whole-time Home Helps employed . . . . .	9
Part-time Home Helps employed . . . . .	25
Equivalent full-time Home Helps . . . . .	20.35
Number of cases assisted during the year	
Aged 65 years and over . . . . .	295
Chronic sick and tuberculous . . . . .	49
Mentally disordered . . . . .	3
Maternity . . . . .	93
Others . . . . .	83

523

Average hours of help given per case . . . . . 60

### Welfare Services Provided Under the National Assistance Act 1948

#### (a) Blind and Partially-Sighted Persons

The Borough is served by a full-time qualified Home Teacher for the Blind who visits the blind persons and their families in their homes and she is available at Ashley House by appointment. Lessons in Braille and Moon (a less difficult embossed type) are given to registered blind and partially-sighted persons. Arrangements are made for the provision of this type of literature.

A handicraft class is held once a week, the transport being provided by voluntary helpers. At the Class itself, helpers make tea, undertake sewing up and assist with industrial work.

Registration is not compulsory but certain benefits are available to registered blind persons. Travel concessions are arranged, talking book machines and wireless sets obtained, and, through the services of the Surrey Voluntary Association for the Blind, persons qualifying receive holiday grants.

In addition to those persons registered with the Borough, blind persons from other areas and those in the various hospitals, may ask for the services of our Home Teacher for the Blind.

During the Borough Show there was an exhibition of apparatus for and articles made by the blind.

#### *Incidence of Blindness*

Number registered as blind during year . . . . .	12
Number registered as partially-sighted during the year . . . . .	6

#### *Registration of Blind*

Blind persons on Register at 31st December 1967 . . . . .	190
Number registered during year . . . . .	12
Number transferred in from other areas . . . . .	10
Number re-certified . . . . .	Nil
	22

212

Number who died during year . . . . .	18
Number transferred to other areas . . . . .	5
Number de-certified . . . . .	Nil

23

189

#### *Age groups of blind persons as at 31st December 1968*

	Male	Female	Total
Under 5 . . . . .	—	—	—
Aged 5-15 . . . . .	—	1	1
Aged 16-29 . . . . .	3	1	4
Aged 30-49 . . . . .	9	3	12
Aged 50-69 . . . . .	14	43	57
Aged 70 and over . . . . .	31	84	115
	57	132	189

At 31st December 1968 there were 56 blind persons in Swail House.

Swail House is administered by the London Association for the Blind, but the Borough Home Teacher for the Blind visits and helps these blind people in the same way as other blind residents in Epsom and Ewell Borough.



There were 100 "C" cases—these are Blind Persons in Hospital and Homes in this area who are on the register of other authorities but may receive assistance from our Home Teacher for the Blind.

There was one blind Home Worker—a chair seater—whose earnings were augmented by the Local Authority.

No blind persons were employed in sheltered workshops but there is one blind person from this Borough at Leatherhead School for the Blind.

#### *Partially-Sighted*

Number of partially-sighted on register at 31st December 1968 :

Male . . . . .	16
Female . . . . .	14
	<hr/>
	30

#### **(b) Deaf and Hard of Hearing Persons**

The Social Worker for the deaf visits adults in hospital and in the community and keeps in touch with parents of deaf and partially-deaf pupils of school age. His work is mainly with deaf persons over the age of 16 years, some of whom are dumb. He assists in placing deaf men and women in suitable employment and maintaining regular contact with them. Because of language difficulties his help is needed in problems associated with employment, income tax, national health insurance and any other matters not readily understood. He is needed for the interpretation of any information which the deaf person might wish to communicate in hospital, clinic, police station or law court.

The number of persons on the Register of Deaf and Hard of Hearing at 31st December 1967 was as follows :

Number of adults in the community . . . . .	27
Number of adults in hospitals . . . . .	39
Number of children up to school-leaving age . . . . .	17
	<hr/>
	83

#### **Hearing Aid Distribution Centre**

The South-West Metropolitan Regional Hospital Board, through the St. Helier Hospital Management Committee, inaugurated a Hearing Aid Distribution Centre at St. Helier Hospital, Carshalton, which opened on 2nd December. Issues of new instruments can be obtained on Mondays to Fridays, 9 a.m. to 5 p.m. by appointment, only if the patient is referred by his Ear, Nose and Throat Consultant. Repairs, however, are carried out on Tuesdays and Thursdays between 10 a.m. and 12 noon with no prior appointment. A postal repair service is also available.

#### **(c) Physically Handicapped**

The disabled were visited in their homes by a trained Social Worker and a Welfare Assistant, who procured aids and advised them on house adaptations. The County Council Occupational Therapy Unit at Fetcham purchased the aids and assisted with the adaptations. Articles costing less than £10 are free on loan ; over that figure the patient makes a contribution according to his means. During the year the Council supplied 326 aids to 178 persons and assisted with home adaptations.

The Epsom and Ewell Club for the Physically Handicapped continued to meet on alternate Tuesday afternoons at the Congregational Church Hall, Ewell. Due to increasing membership the Club now hires a coach to transport members to the Club while the Surrey County Council still provide special transport for the more severely handicapped. During the year the Club had a membership of approximately 35 physically handicapped persons. Last year the Club raised over £200 for the cost of coach outings and a Christmas lunch held at a well-known hotel in Reigate. A group from the Club went to the Nyetimber Holiday Camp, Bognor, for a week in May.

The Borough sent 24 physically handicapped persons away to special holiday placements with the help of the Voluntary Association for the Surrey Disabled.

Three physically handicapped persons were sponsored by the Local Authority at Sheltered Workshops.

Number of Physically Handicapped persons on the Register at 31st December 1967	315
Number of Physically Handicapped persons added during 1968 . . . . .	138
Number of Physically Handicapped persons removed during 1968 . . . . .	71
Number of Physically Handicapped persons on the Register at 31st December 1968	382



	<i>Under 16</i>	<i>16-29</i>	<i>30-49</i>	<i>50-64</i>	<i>65 or over</i>	<i>Total</i>
(1) Amputation . . . . .	—	—	—	2	10	12
(2) Arthritis or Rheumatism . . . . .	—	—	5	20	125	150
(3) Congenital malformations or deformities . . . . .	9	7	4	3	3	26
(4) Diseases of the digestive and genito-urinary system, of the respiratory system (other than tuberculosis) or of the skin . . . . .	—	—	1	6	30	37
(5) Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than tuberculosis) of the upper and lower limbs and of the spine . . . . .	—	2	5	3	14	24
(6) Organic nervous diseases, epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc. . . . .	1	6	10	44	60	121
(7) Neuroses, psychoses, and other nervous and mental disorders not included on line 6 . . . . .	—	—	1	1	—	2
(8) Tuberculosis (respiratory) . . . . .	—	—	—	—	—	—
(9) Tuberculosis (non-respiratory) . . . . .	—	—	—	—	—	—
(10) Diseases and injuries not specified above . . . . .	1	—	—	6	3	10
<b>Total . . . . .</b>	<b>11</b>	<b>15</b>	<b>26</b>	<b>85</b>	<b>245</b>	<b>382</b>

### Families at Risk

In reviewing the last year's work with families who have multiple problems, it becomes very obvious that these families are going to need continuous care for a considerable length of time.

Their difficulties mainly arise through their own physical mental or emotional disabilities. The cases that can be quickly helped by a material or environmental change are not really classified as "Families at Risk".

In many cases it is only possible to help families come to terms with their environment and to assist them to obtain their rights in the community and help them understand their obligations to their neighbours and society in general.

Unfortunately in recent years marriages have taken place where one or both parties are very immature, or a baby is on the way and the young couple mistakenly think that they can make amends to the child by ensuring that it is not given the stigma of illegitimacy. These marriages drift on for a few years, but after the arrival of three or four children the parents have not the stamina to resist their desire to run away. The pattern is for the man to leave the family and probably drift toward another partner only too similar to the wife he has abandoned, and one is continually reminded of Barrie's Play, "Dear Brutus".

The deserted wife needs a great deal of help at this time. Her desire to be away from the struggle often results in her requesting that the "State" take the children, as she feels inadequate to carry on. She will need every help to make her feel able to shoulder the responsibility of the family. Very probably her parents are not there to help, as she had married against their wishes, and she is determined not to let them know of her unhappiness.

That they make a tolerable success of their efforts is very much to their credit and to the credit of our schools, who do so much to support these children in their formative years.

At the end of the year, 31st December 1968 :

Number of problem families under supervision . . . . .	71
Number of children in these families . . . . .	220
Number of children of these families in the care of the Local Authority . . . . .	4

### Health Education

The programme of Health Education was very similar to last year. Relaxation and Mothercraft Courses were held by the Physiotherapist and Health Visitors, to some of which husbands were invited. Husbands and wives were also invited to parentcraft evenings which were held in both main Clinics.

Many talks were given to various voluntary organisations and in schools by the Borough Nursing Officer and Health Visitors, and talks and film shows given to groups of elderly persons by Miss Evers, a Geriatric Health Visitor, on the dangers in the home, etc.



Courses of Lectures were also given by the Borough Nursing Officer to the St. John Ambulance Brigade, to students at Ewell Technical College taking a Home Office Course for House-Fathers and House-Mothers, also to groups of girls in connection with the Duke of Edinburgh Award Scheme.

Leaflets and Posters on all subjects were constantly on display in the Clinics and on Notice Boards and towards the end of the year special campaigns were carried out by Health Visitors in both Clinics on "The importance of flame-proof material" and "Suitable toys for the under-fives". I should like to thank Mr. J. Workman, the Borough Safety Officer, for the help he gave in these displays.

During the year the Home Safety Committee asked if I would approach all field workers in this Department, the General Practitioners and the local Hospitals and enquire if they could advise as to the most common causes and types of home accidents seen in the Borough—what age group was most commonly involved—whether they had come across any unusual accidents or had any suggestions for the Committee regarding future policy. I am most grateful to all concerned for their helpful replies and advice.

Nothing very new arose out of this enquiry but everyone agreed that children and the elderly were most commonly involved. The most frequent causes of accidents were falls, medicines and tablets within reach of children, poor electrical fittings, and saucepans badly placed on the cooker. Three subjects, which many felt could be more actively brought to the attention of the Public, were:

1. Dangers of children throwing sand (both in private sand-pits and on the beach).
2. Dangers of ladders in home decorations.
3. Dangers from Insecticides, weed-killers, etc.

### **Smokers' Advisory Clinic**

I reported last year that this Clinic had been held during one week in October 1967. Sixty members of the public attended, 39 regularly, and that the immediate results appeared to be good. In April this year a questionnaire was sent to all 60 members to see whether the results six months after the Clinic was held were as satisfactory. Briefly, the replies showed that 13 persons had still given up smoking completely and that 2 had changed over from cigarettes to cigars. The chief reasons put forward for continuing the habit were lack of will-power and social reasons.

These figures do seem to compare favourably with other larger Clinics but there is obviously a long way to go yet to convince the public of the dangers of smoking.

### **Care of the Elderly**

Both voluntary and statutory organisations have again been busy throughout the year in trying to deal with the comforts and problems of the elderly. As was anticipated last year a Visiting Organiser was appointed by the Old People's Welfare Committee in March and she has already organised a force of 40 voluntary visitors for regular visiting as well as groups of young people available for shopping, decorating, gardening, etc. Regular visiting to the elderly is a very important service since it is usually impossible for the various statutory workers to be employed simply to visit and yet it is often all that is required to cheer up the old person and prevent the ever present problem of loneliness.

The Old People's Welfare Committee have continued their various Services, such as supporting all the Old People's Clubs, sending out 131 Christmas parcels, arranging for over 100 elderly people to enjoy a holiday at Selsey, and amongst other commitments arranging for 140 Meals-on-Wheels to be cooked and despatched each day. These meals are cooked at the Cedars Central Kitchen and delivered by both the W.R.V.S. and voluntary drivers of the Old People's Welfare Committee. The Day Centre for the elderly housebound, now known as the Anderson Club, has continued to meet weekly in Myers Hall. In November, a new Organising Secretary was appointed to the Committee and we wish her every success. By the time this Report is published, the Old People's Welfare Committee will in fact be celebrating their twenty-first anniversary and they are to be congratulated on all the work they have managed to do for the elderly during this time.

The two Geriatric Health Visitors attached to General Practitioners in Epsom have continued to be very busy in dealing with the multiple medical and medico-social problems of the elderly in Epsom and in December we were fortunate to be able to appoint a new Geriatric Health Visitor to Ewell who had had considerable experience in dealing with the elderly.

The number of Aids supplied to the elderly and handicapped such as bath seats, walking frames, hand-rails, etc., are increasing all the time and this Service now appears to be more well known.

The housing position for the elderly remained more or less the same during the year but the Council is very alive to this need and it is to be hoped that their plans for the next few years are allowed to go ahead unhindered.

### **Welfare Clinics for the Elderly**

We have continued to hold Clinics for the elderly at both Epsom and Ewell Court Welfare Centres in order to try and prevent or defer the various medical and social problems occurring in this age group.



Each session is under the general direction of Health Visitors supported by helpers from voluntary organisations, and each elderly person can discuss his general, medical and social problems as well as having tests taken for vision, hearing, blood pressure and anaemia, etc., apart from routine weighing. Advice is given re diet, etc., and welfare foods (e.g. Ovaltine) and vitamin supplements are available at cost price.

A Physiotherapist attends regularly and gives group instruction and exercises in order to promote better breathing, mobility and posture. This is, however, only given with the family doctor's consent. Chiropody is provided and hearing tests are carried out in appropriate cases, and arrangements made for the supply of a hearing aid.

These Sessions are not held in any sense in competition with the services provided by family doctors, but rather to help elderly people to remain well and active both in mind and body for as long as possible.

The total attendance figure for both Clinics for 1968 was 1,236

## **Mental Health**

One of the most important developments in Mental Health in regard to Epsom and Ewell was the commissioning by the South-West Metropolitan Regional Hospital Board of Miss Isabel Menzies, a distinguished Social Research Worker, from the Tavistock Institute of Human Relations, to carry out a Survey on the interaction between the community and the five psychiatric hospitals within the Borough. This was in view of the increasing difficulties which have been developing between the community and the hospital patients particularly when the latter were visiting the town.

Miss Menzies carried out her survey between May and October and she interviewed many townspeople, hospital staffs and patients, as well as making her own observations both in the town and within the hospitals concerned.

The outcome of her survey should be known sometime in the New Year and no doubt some appropriate action will take place as a result.

No other changes took place during the year regarding the care of the mentally ill in the Borough. The Mental Health Social Workers continued to work from Ashley House and they maintained good liaison with all the local Hospitals and Consultants as well as dealing with the multiple social problems of the persons under their care. It is unfortunate that Epsom and Ewell residents who become mentally ill still have to be admitted to the Netherne Hospital, Coulsdon, which is a very difficult journey away.

One of the most difficult problems facing the Social Workers, and others, is when any patient, either mentally ill or mentally sub-normal, from one of the five hospitals whose catchment area is well outside the Borough, is discharged and wishes to live locally. The town is not a good one for furnished, cheap accommodation and great difficulty is found in trying to find them suitable places in which to live, quite apart from finding any possible suitable employment. One hopes that most would return to the area from which they came, but they have, of course, every right to remain here in Epsom.

## **Provisions for the Sub-Normal**

The Junior Training School at Old Schools Lane, Ewell, continues to provide 65 day places for sub-normal children aged 2-16 years. This includes 15 children of 2-5 years in the Nursery Section at Forty Foot Hall, Forty Foot Road, Leatherhead.

The Special Care Unit, which was opened at the School in September 1967, has proved to be a marked success. This Unit caters specially for children with multiple handicaps and so far 5 children have been admitted.

Summer holidays are organised by the Surrey County Council each summer for boys and girls of 7-16 years wishing to participate. The holidays are for a two-week period and are held at Winterton-on-Sea near Yarmouth.

## **Day Centre**

This Centre in Waterloo Road, run by trained staff appointed by Surrey County Council, has had a satisfactory year. The aims of the Centre are twofold. Firstly to assist the mentally ill toward complete recovery by organising suitable occupational therapy in order to encourage them back into the "work habit" and secondly to organise recreational and hobby activities to give them the necessary confidence to manage their own affairs and to take an active part in community life. The average attendance is 25 per day but the Centre is able to accept up to 45 persons.

A Consultant attends the Centre for a discussion group each week.

## **Voluntary Organisations**

(1) The voluntary helpers of the Handshake Social Club (run by the Epsom League of Friends for Mental Health) work harmoniously with the Day Centre professional staff and share the same premises. The voluntary helper realises that in the interests of the patient she must work under the guidance and supervision of the trained worker.

(2) The Industrial Therapy Organisation (Epsom) Ltd., Stones Road. This organisation, with the financial support of the Department of Employment and Productivity, has continued to supply a very necessary service in the field of mental health. During the year 51 trainees were



placed in open employment, an increase of one over the previous twelve months. Travelling expenses, lodging and training allowances have continued to be paid. In the not too distant future it is hoped that some form of Hostel accommodation might be found where trainees could live and which would help them in their recovery.

## Mental Health—Statistics

### (a) Mental Illness—Mental Health Act 1959

#### CASES DEALT WITH INSIDE THE LOCAL (MENTAL) HOSPITALS

	Males	Females	Total
Section 25 (Observation Order) . . . . .	130	145	275
Section 26 (Treatment Order) . . . . .	77	58	135
Total . . . . .	207	203	410

#### HOSPITAL ADMISSIONS FROM ADDRESSES IN EPSOM AND EWELL

	Males	Females	Total
Section 5 (Informal*) . . . . .	18	15	33
Section 29 (Emergency Observation—3 day Order) . . . . .	14	14	28
Section 25 (Observation Order—28 days) . . . . .	3	3	6
Section 26 (Treatment Order) . . . . .	—	—	—
Section 60 (Court Order—One year) . . . . .	—	1	1
Section 136 (Police Order—3 days Place of Safety) . . . . .	—	—	—
Total . . . . .	35	33	68

\* This figure represents the number of patients admitted informally by the Mental Welfare Officer. A larger number are admitted informally by medical practitioners and from psychiatric clinics but we have no record of this figure.

### (b) Care and After-Care

Total number receiving Community Care as at 31st December 1968 :

Males . . . . .	27
Females . . . . .	46
Total . . . . .	73

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

#### POSITION AT END OF 1968

	Males	Females	Total
Number of children attending Junior Training School . . . . .	7	6	13
Number of adults attending Adult Technical Training Centres . . . . .	10	7	17
Total . . . . .	17	13	30
Number of children in community care of Health Visitor . . . . .	7	7	14
Number of adults in community care of Health Visitors and Mental Health Officers . . . . .	33	18	51
Total . . . . .	40	25	65

## Health Centres

The proposed Health Centre in Ewell, which has been discussed for several years now, was no nearer being built by the end of the year. In fact the plans themselves had still to negotiate several important Committees, but it is to be hoped that all these difficulties will be overcome and that good progress might be achieved next year.

## LOCATION AND TIME-TABLE OF CLINICS

### ANTE-NATAL CLINICS

Epsom District Hospital . . . . .	Mon., Thurs. . . . .	2.00 p.m.
Church Street, Epsom . . . . .	Fri. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell . . . . .	Mon. . . . .	9.30 a.m. - 12 noon
	Tues. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.
	Fri. (Midwives) . . . . .	2.00 p.m. - 4.00 p.m.



# CHILD WELFARE CLINICS

Church Street, Epsom . . . . .	Mon., Wed. . . . .	2.00 p.m. - 4.00 p.m.
Ewell Court, Ewell . . . . .	Mon., Wed., Thurs. . . . .	1.30 p.m. - 4.00 p.m.
Dell Lane, Stoneleigh . . . . .	Tues. . . . .	2.00 p.m. - 4.00 p.m.
St. Stephen's Church Hall, Rosebery Road, Epsom Downs	2nd & 4th Tues. in month	2.00 p.m. - 4.00 p.m.
Community Centre, Wells Estate, Epsom . . . . .	1st, 3rd & 5th Tues. in month	2.00 p.m. - 4.00 p.m.
St. Paul's Church Hall, Northey Avenue, Cheam	Wed. . . . .	2.00 p.m. - 4.00 p.m.

# DENTAL CLINICS

Church Street, Epsom . . . . .	<i>By Appointment</i>
Ewell Court, Ewell . . . . .	<i>By Appointment</i>

# EYE CLINICS

Church Street, Epsom . . . . .	<i>By Appointment</i>
Ewell Court, Ewell . . . . .	<i>By Appointment</i>

# GERIATRIC CLINICS

Church Street, Epsom . . . . .	Tues. . . . .	9.30 a.m. - 12 noon
Ewell Court, Ewell . . . . .	Wed. . . . .	9.30 a.m. - 12 noon

# IMMUNISATION AND VACCINATION CLINICS

Church Street, Epsom . . . . .	Fri. . . . .	9.30 a.m. - 12 noon
Ewell Court, Ewell . . . . .	Fri. . . . .	9.30 a.m. - 12 noon

# FAMILY PLANNING ASSOCIATION

Epsom District Hospital . . . . .	Tues., Fri. . . . .	7.00 p.m. - 8.00 p.m.
Church Street, Epsom . . . . .	Thurs. . . . .	9.30 a.m. - 12 noon
Ewell Court, Ewell . . . . .	Tues. . . . .	9.30 a.m. - 12 noon

# CHEST CLINIC

Epsom District Hospital . . . . .	Mon., Tues. . . . .	2.00 p.m.
	Thurs. . . . .	9.30 a.m.
	1st Thurs. (B.C.G.)	2.00 p.m.
	Fri. . . . .	9.30 a.m.

# MINIATURE X-RAY CLINIC

Epsom District Hospital . . . . .	Mon. . . . .	2.00 p.m. - 3.00 p.m.
	Tues. . . . .	10.30 a.m.-11.30 a.m.

# \*VENEREAL DISEASES CLINIC

St. Helier Hospital . . . . .	<i>Males :</i> Mon. . . . .	9.30 a.m. - 1.30 p.m.
	Wed. . . . .	4.00 p.m. - 6.00 p.m.
	Thurs. . . . .	4.00 p.m. - 6.00 p.m.
	<i>Females :</i> Tues. . . . .	4.30 p.m. - 6.30 p.m.
	Wed. . . . .	2.00 p.m. - 4.00 p.m.
	Fri. . . . .	2.00 p.m. - 4.00 p.m.

*\*(And at the Out-Patients Department of many London Hospitals)*







AREA UNIT TO WITHDRAWN YOUNG MEN'S DEPARTMENT  
TOWN HALL, THE PARADE, KIRBY  
May 1960

Mr. Mayor, Ladies and Gentlemen,  
I beg to submit my Annual Report on the work of the Public Health Department for the year ended 31st December 1959 in accordance with the Public Health Officers Regulations 1957.

The report and improvement of houses occupies a major part of the Department's work. Good progress has been maintained in the promotion of improvement schemes which the number of primary inspections has risen from 523 in 1957 to 633 this year.

That part of the report dealing with the general report, the investigation of complaints which led to 3 prosecutions in the last year, the investigation of a stillbirth under the new Food Hygiene (Miscellaneous) Regulations, the modern presentation of food in self-service shops with a marked increase in the use of refrigerated display cabinets and the pre-washing of open food is leading to a higher general quality of food presented for sale. The county-wide survey to ascertain possible hazards in foodstuffs is a new and very necessary addition to our work, where the use of pesticides as an aid to insect control is being encouraged.

The administration of the Offices, Shops and Railway Premises Act, 1957, is continuing to be carried out in a satisfactory manner. The Act is generally very good, although it was necessary to take two by-laws in 1959 to deal with certain points.

In respect of Air Pollution the position continues to improve, where the most dangerous form of pollution is concerned. I would draw attention to the fact that the number of vehicles registered in the Borough has increased by 1,000 in 1959.

I would not attempt here to comment further on the contents of this report, but I am sure it will be of interest.

I would like to record my appreciation to the Members of the Council for their continued support and particularly to Alderman W. J. Clark, F.R.S.A., F.R.S., Chairman of the Public Health Committee, for the help and guidance provided for the Department and to the Medical Officer of Health, to the Officers of other Departments for their co-operation and to the staff of the Department for their continuing loyal support.

I am, Ladies and Gentlemen, Your obedient servant,  
J. H. GLENN  
Chief Public Health Officer

Mr. Mayor, Ladies and Gentlemen,  
I am, Ladies and Gentlemen, Your obedient servant,  
J. H. GLENN  
Chief Public Health Officer



May 1969

**To the Mayor, Aldermen and Councillors of the Borough of Epsom and Ewell**

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit my Annual Report on the work of the Public Health Inspectors for the year ended 31st December 1968 in accordance with the Public Health Officers Regulations 1959.

The repair and improvement of houses occupies a major part of the Inspectors' duties. Very good progress has been maintained in the promotion of Improvement Areas, where the total number of primary inspections has risen from 553 in 1967 to 633 this year.

That part of the report dealing with Food and Food Hygiene illustrates the diversity of work accomplished from the general inspections of food premises, sampling—for bacteriological and chemical analysis, the investigation of complaints which led to 9 prosecutions, to the first prosecution of a stallholder under the new Food Hygiene (Market Stalls and Delivery Vehicles) Regulations. The modern presentation of food in self-service shops with a marked increase in the use of refrigerated display cabinets and the pre-wrapping of open food is leading to a much higher general quality of food presented for sale. The country-wide survey to ascertain pesticide residues in foodstuffs is a new and very necessary addition to our work, where the use of pesticides as an aid to increasing the output of foods needs to be watched in case such use is detrimental to health.

The administration of the Offices, Shops and Railway Premises Act, 1963, continued smoothly where there are now 758 premises registered; compliance with the Act is generally very good although it was necessary to take two prosecutions during the year.

In respect of Air Pollution the position continues to improve, where the use of bituminous coal is rapidly diminishing in favour of smokeless fuels. I would draw attention to the new compulsory powers to enforce reluctant authorities to promote smoke control areas and the position which may obtain in this Borough.

I would not attempt here to comment further on the contents of this report, but trust it will be read with interest.

I would like to record my appreciation to the Members of the Council for their continued support and particularly to Alderman W. J. Clark, P.P.I.A.A.S., F.R.S.A., F.R.S.H., Chairman of the Public Health Committee, for the help and guidance proffered by Dr. D. J. Sheerboom, Medical Officer of Health, to the Officers of other Departments for their co-operation and to the staff of the Department for their continuing loyal support.

I am, Ladies and Gentlemen, Your obedient servant,

L. H. GRACE  
*Chief Public Health Inspector*



# SANITARY INSPECTION OF THE AREA

## Summary of Inspections and Visits

Dwelling Houses :	
Under P.H. Act and Housing Acts . . . . .	633
Multiple Occupation . . . . .	31
Reinspections . . . . .	1,322
Other Premises :	
Under P.H. Acts 1936 and 1961 . . . . .	57
Caravans . . . . .	28
Reinspections . . . . .	203
Complaints investigated (excluding rats and mice) . . . . .	531
Drainage :	
Inspections . . . . .	800
Water, Smoke and Air Tests. . . . .	387
Cesspools inspected . . . . .	53
Animal Boarding Establishments Act 1963 . . . . .	6
Betting, Gaming and Lotteries Acts 1963-64 . . . . .	13
The Nightdress (Safety) Regulations 1967 . . . . .	14
Clean Air Act 1956 :	
Smoke Observations or Air Pollution . . . . .	34
Visits for Measurement of Air Pollution . . . . .	353
Epsom Downs . . . . .	77
Factories :	
With Power . . . . .	188
Outworkers . . . . .	29
Food :	
Inspection of Premises . . . . .	1,490
Visits re Unsound Food . . . . .	336
Hairdressing Establishments. . . . .	47
Heating Appliances and Fireguards . . . . .	21
Infectious Diseases—Enquiries and Visits . . . . .	146
Insect Pests . . . . .	130
Keeping of Animals or Poultry . . . . .	15
Noise Abatement Act 1960 . . . . .	97
Offices, Shops and Railway Premises Act 1963 :	
Offices . . . . .	70
Shops . . . . .	702
Pet Animals Act 1951—Licences, etc. . . . .	10
Public Conveniences . . . . .	35
Rats or Mice Infestations . . . . .	102
Refuse Collection, Dustbins, etc. . . . .	207
Riding Establishments Act 1964 . . . . .	33
Rivers and Streams . . . . .	114
Schools—Sanitary Accommodation, Disinfestation, etc. . . . .	80
Scrap Metal Dealers Act 1964 . . . . .	8
Shops Act 1950—Hours, etc. . . . .	584
Stables and Piggeries . . . . .	71
Swimming Pools . . . . .	25
Theatres, Cinemas, Halls, etc. . . . .	2
Vacant Land, Dumps, etc. . . . .	151
Verminous Premises or Articles . . . . .	8
Visits—Chalk Pit, etc. . . . .	759
Visits—Miscellaneous . . . . .	228
	<hr/>
	10,230



## COMPLAINTS

The following is a summary of complaints received during the year

Choked or defective drains . . . . .	54
Dirty Milk Bottles . . . . .	4
Dogs Fouling Footpaths, etc. . . . .	12
Flooding . . . . .	25
Insanitary Condition of Premises . . . . .	157
Insect Pests . . . . .	37
Keeping of Animals . . . . .	8
Noise . . . . .	10
Offensive Accumulations . . . . .	25
Offensive Smells . . . . .	38
Pigeons . . . . .	9
Public Conveniences . . . . .	3
Refuse Disposal . . . . .	14
Scrap Metal Dealers . . . . .	2
Smoke . . . . .	34
Squirrels . . . . .	3
Stables and Riding Establishments . . . . .	13
Unsound Foods . . . . .	59
Miscellaneous . . . . .	24
	<hr/> 531
Additionally 634 complaints were received in respect of Rats and Mice Infestations . . . . .	634
	<hr/> 1,165

## NOTICES

Number of Notices served under the following Acts

Public Health Act 1936 (Section 93) Statutory. . . . .	16
Public Health Act 1936 (Informal) . . . . .	105
Factories Act 1961 (Informal) . . . . .	5
Food and Drugs Act 1955 (Informal) . . . . .	72
Offices, Shops and Railway Premises Act 1963 (Informal) . . . . .	12
	<hr/> 210

## FACTORIES ACT 1961

Prescribed Particulars on the Administration of the Factories Act 1961

(1) *Inspections for purpose of provision as to health (including inspections made by Public Health Inspectors)*

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities . . . . .	—	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority . . . . .	153	188	5	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) . . . . .	—	—	—	—
Total . . . . .	153	188	5	—



## (2) Cases in which defects were found

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

## (3) Outwork (Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		
	No. of outworkers in August list required by Section 133(1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failing to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel (making etc. cleaning & washing)	10	—	—	—	—	—
Packing of inert goods	2	—	—	—	—	—
Painting pictures on tapestries	1	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	1	—	—	—	—	—
Lampshades	1	—	—	—	—	—
Total	15	—	—	—	—	—

## HOUSING

## I. Inspection of dwelling-houses during the year

1(a)	Total number of dwelling-houses inspected under the Public Health or Housing Acts	633
(b)	Number of inspections or re-inspections	1,322
2.	Number of dwelling-houses found not to be in all respects reasonably fit for human habitation	105

## II. Number of defective dwelling-houses rendered fit

(a)	After Informal Notice	80
(b)	After service of Formal Notice	11
(c)	Number of Notices outstanding at end of year	14



### III. Proceedings under the Housing Act 1957

#### *Individual Unfit Houses*

Number of dwelling-houses found unfit for human habitation and represented under Section 16(1)	1
Closing Orders made (one represented in 1967)	2

#### **Clearance Areas**

##### *No. 1 Clearance Area 1965*

Comprising seven dwellings ; Order for Demolition made and confirmed by Ministry of Housing and Local Government on 15th November 1966.

All tenants have now been rehoused.

##### *No. 1 Clearance Area 1967*

Comprising seven dwellings ; Area declared and submitted to Ministry.

No tenants have yet been rehoused.

#### **Slum Clearance—Progress**

Since 1955, which was the year of national survey for slum clearance, 138 properties have been dealt with as the result of Clearance Areas, the making of Demolition or Closing Orders and the reconditioning of Unfit Houses. In the majority of cases, the displaced families have been rehoused by the Corporation.

An assessment of progress, taken on information available to the Department as to the condition of houses not yet formally inspected, shows that approximately 120-140 properties may require action to secure their demolition, closure or reconditioning.

The problem is not a large one as judged by the total number of dwellings in the Borough (20,000 approximately—Census 1961).

#### **Improvement of Houses**

The Housing Act 1964, gives power to local authorities to require in certain circumstances, the improvement of tenanted dwellings which were built before the end of 1944, or provided by conversion before the 3rd October 1961 or pre-1945 buildings.

The improvements relate to the provision of the Standard Amenities, which in full are :

- (a) a fixed bath or shower, which, if reasonably practicable, is to be in a bathroom ;
- (b) a wash-hand basin ;
- (c) a hot and cold water supply at a fixed bath or shower and at a wash-hand basin and at a sink ;
- (d) a water closet which must, if reasonably practicable, be in and readily accessible from the dwelling ; and
- (e) satisfactory facilities for storing food.

The improvement of houses under this Act is of real value to the community, in that it brings properties affected up to the standard of amenity which is enjoyed by the other residents in the Borough.

To date four Improvement Areas have been declared as follows :

*No. 1 Improvement Area declared 1965.* Chessington Road and Oakdale Road, West Ewell. Area comprised 54 houses of which 11 were tenanted and capable of improvement.

*No. 2 Improvement Area declared 1966.* Upper Court Road and Horton Footpath, Epsom. Area comprised 210 houses of which 48 were tenanted and capable of improvement.

*No. 3 Improvement Area declared 1967.* Hook Road and Miles Road, Epsom. Area comprised 298 houses of which 64 were tenanted and capable of improvement.

*No. 4 Improvement Area declared 1968.* Horton Hill, Epsom. Area comprised 118 houses of which 75 were tenanted and capable of improvement.

*No. 1 Area.* All works have been completed with the exception of one property which has become the subject of a Suspended Notice and will be reviewed in 1970.

*No. 2 Area.* 28 Immediate Improvement and 14 Suspended Improvement Notices served.

At 13 properties the works have been completed.

*No. 3 Area.* 31 Immediate Improvement and 30 Suspended Improvement Notices served.

At 3 properties the works have been completed.

*No. 4 Area.* Preliminary Improvement Notices being served.

In relation to the improvement of houses outside Improvement Areas, 7 applications to date have been received from tenants for the Council to exercise their powers to improve the dwellings to the Full Standard. The same basic administrative procedures are applied as if the premises were contained within Improvement Areas.

During the year 71 Standard Grants and 2 Discretionary Grants were approved by the Council, and of this number are included those in respect of properties coming within the Compulsory Improvement Scheme.



## Houses in Multiple Occupation

The work of inspection and control of premises coming within the definition of Houses in Multiple Occupation, which commenced in 1963, continued during the year and the present position is as follows :

Number of inspections during 1968 . . . . .	31
Number of premises known to be in use at the end of 1968 . . . . .	17

No undue delay has been experienced in securing the improvements necessary to satisfy the standards adopted by the Council, and no action has been necessary to make Control Orders (Control Orders allow Local Authorities to take multi-occupied houses into their stewardship for a period in order to deal with the worst cases of squalor).

## Rent Act 1957—Certificates of Disrepair

One application was received for a Certificate of Disrepair.

The following is a summary of the position with regard to applications on the 31st December 1968 :

Total number of applications received . . . . .	117
Resulting action :	
Undertakings (Form K) received from Landlords . . . . .	87
Certificates of Disrepair issued . . . . .	21
Applications for Certificates as to remedying defects . . . . .	6
Applications for Certificates not approved . . . . .	3
Applications under consideration . . . . .	—
	117
Certificates of Disrepair cancelled . . . . .	8

## FOOD AND DRUGS ACT 1955

### Inspections and Supervision of Food

This section of the Report deals with those aspects of food and drugs administration which are the concern of the local authorities and details of the work carried out in connection therewith are found as follows :

#### *Food Hygiene (General) Regulations 1960*

The aim of the Regulations is to set a practical standard of food hygiene and centres on three main aspects ; the structural condition of the premises, the construction and cleanliness of articles and equipment with which food may come into contact and the cleanly practices of food handlers themselves while they are preparing or handling the food. They apply, broadly speaking, throughout the food and catering trades embracing both retail and wholesale businesses, and to the supply of food in clubs, schools, residential establishments, staff canteens and ships.

#### *Food Hygiene (Market, Stalls and Delivery Vehicles) Regulations, 1966, and Amendment Regulations*

These Regulations came into operation on the 1st January 1967 and their effect is generally to improve the standards of hygiene of stalls and delivery vehicles so that they may more closely relate to those of fixed premises.

In particular, their application in the Borough is directed to Epsom Market and the food stalls, tents, etc., which are found on Epsom Downs during the Race Meetings.

The number of food premises in the Borough, grouped in categories of trade are listed below :—

Bakehouses and Bakers' Shops . . . . .	18
Butchers . . . . .	30
Cafes . . . . .	40
Clubs . . . . .	11
Confectioners . . . . .	63
Dairies and Milk Depots . . . . .	3
Fishmongers and Fried Fish Shops . . . . .	16
Greengrocers (Wholesale and Retail) . . . . .	37
Grocers (Wholesale and Retail) . . . . .	67
Kitchens :	
Factory . . . . .	13
Hotel . . . . .	10
Hospital and Nursing Home . . . . .	9
School—Public . . . . .	18
School—Private . . . . .	11
Multiple Food Stores (Supermarkets) . . . . .	10
Public Houses and Off-licences . . . . .	62
Total . . . . .	418



All these premises are fitted with wash-hand basins and sinks together with hot and cold water supplies, as required by Regulations 16 and 19 of the Food Hygiene (General) Regulations.

Of the preceding premises, 186 are registered under Section 16 of the Food and Drugs Act 1955 as follows :—

Manufacture of Ice-cream . . . . .	1
Retail sale of Ice-cream . . . . .	125
Preparation or manufacture for sale of sausages or potted, pressed pickled or preserved food . . . . .	60

The inspection of Food Premises is a constant duty imposed by the Regulations. The number of inspections made during the year is shown in the following table :

Type of Premises and Vehicles	No. of Inspections and Visits
Bakehouses . . . . .	20
Bakers and confectioners . . . . .	25
Butchers . . . . .	100
Cafes, Canteens and Kitchens . . . . .	266
Dairies and Milk Shops . . . . .	35
Fishmongers and Poulterers . . . . .	49
Fried Fish Shops . . . . .	16
Greengrocers and Fruiterers . . . . .	100
Grocery and Provision Stores . . . . .	236
Ice-Cream Manufacturers . . . . .	37
Ice-Cream Retailers . . . . .	79
Ice-Cream Vehicles . . . . .	45
Licensed Premises . . . . .	110
Market Stalls and Food Vehicles . . . . .	139
Sweets and Sugar Confectionery . . . . .	133
Visits, miscellaneous (not included above) . . . . .	100
Total	1,490

#### Informal Action

Arising from the 1,490 inspections and visits to food premises, action to secure compliance with the Regulations was obtained through verbal or written Informal Notices with 113 items receiving attention.

#### Formal Action

One prosecution was taken under the Food Hygiene (Market Stalls and Delivery Vehicles) Regulations, 1966, in respect of a stall in Epsom Market, where the defendant pleaded guilty on five counts as follows :

	Fined
Failure to provide overalls . . . . .	£10 9
Smoking while serving open food . . . . .	£10 - 8 (e)
Food exposed less than 18 in. from ground . . . . .	£5 - 7 (c)
Absence of name and address on stall . . . . .	£2 13
Absence of first-aid kit . . . . .	£2 17
Costs amounting to £10. 10s. were awarded.	

## MILK

### Milk Production

There is only one milk producer in the Borough. The supply is sold to a large milk company where it is pasteurised.

### Milk Supply

All milk sold is retailed by a few large Dairy Companies, being mainly produced in distant areas and transported to large processing plants within the London Region.

The sale of untreated milk has steadily declined during the post-war years and is now of negligible amount.

Control in respect of the distribution and types of milk sold in the Borough is obtained under the following Regulations :

#### (a) Distribution

Milk and Dairies (General) Regulations 1959 :

Milk Distributors registered in this area . . . . .	3
Premises registered as Dairies . . . . .	3

#### (b) Licensing

Milk (Special Designation) Regulations 1963 and the Milk (Special Designation) (Amendment) Regulations 1965.



Dealers (Pre-packed) Milk Licences valid for a maximum period of five years expiring on the 31st December 1970 are in force in respect of the following milks :

Homogenised . . . . .	1
Untreated . . . . .	8
Pasteurised . . . . .	25
Sterilised . . . . .	22
Ultra Heat Treated . . . . .	13

### Milk Sampling

During the year 125 samples of milk were taken from milk distributors, including supplies to local hospitals and schools, and submitted for bacteriological examination.

The following summary gives details of the grade of milk samples and results of the examinations :—

Grade	No. of Samples
Farm Bottled . . . . .	1
Pasteurised . . . . .	116
Sterilised . . . . .	5
Ultra-Heat Treated . . . . .	3

### Results of Tests

	Methylene Blue	Phosphatase	Turbidity	Brucella Ring	Colony Count
Farm Bottled . . . . .	—	—	—	1	—
Pasteurised . . . . .	116	116	—	—	—
Sterilised . . . . .	5	—	5	—	—
Ultra-Heat Treated . . . . .	—	—	—	—	3

All the tests were satisfactory for the purposes applied.

In addition the milk produced at Horton Farm, Epsom, was tested for Brucella infection on behalf of the Ministry of Health, 28 samples being taken.

### Ice-Cream

#### Registration

There are 125 premises registered for the sale and storage of ice-cream and of this number one is also registered for the manufacture, in accordance with Section 14 of the Food and Drugs Act, 1955. With the exception of the one manufacturer, all retailers obtain their supplies from outside the Borough. It should be noted that mobile vans selling ice-cream are not registerable, but are controlled through the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966.

#### Bacteriological Sampling

During the year 100 samples of ice-cream were taken for bacteriological examination. The provisional grading showed the following results :

		Soft	Wrapped
Grade I . . . . .	83	21	62
Grade II . . . . .	9	4	5
Grade III . . . . .	3	—	3
Grade IV . . . . .	5	4	1
	100	29	71

In assessing the bacteriological standard of ice-cream, Grade III and IV results are regarded as not having satisfied the test based on the decolouration of methylene blue. It should be emphasised that this standard has no statutory enforcement.

The results show a big improvement from 1967, where of the 91 samples taken that year, 23 were graded III and IV. The figure this year of 8, from a total of 100 samples, reflects mainly the increasing use of the sterile mix and a general improvement in hygiene.

#### Chemical Sampling

One sample was submitted to the Public Analyst and found to comply with the required standards.



## Pesticide Residues in Foodstuffs

The national survey commenced in 1966, which is aimed at a systematic enquiry as to the extent of contamination of foodstuffs by toxic chemicals, concluded its field work in July 1968.

This Authority has co-operated in the taking of samples of food, which during 1968 were of bacon, butter and cucumber.

The Report on the first year's results from the 1st August 1966 to the 31st July 1967 of the Joint Survey of Pesticide Residues in Foodstuffs sold in England and Wales has now been published.

The Report indicates that there is no evidence of contamination sufficiently serious to be of significance to public health in the short term. None of the samples revealed gross contamination.

The Report however, stresses that it is an interim one covering only the results obtained in the first year, before any statistical examination has been made. Any conclusions drawn must necessarily be tentative and subject to modification or even reversal when, at the end of the second year, the combined results are statistically analysed.

## The Public Analyst

Mr. Daniel D. Moir, M.Sc., F.R.I.C., died early in 1968. He had been the Council's Public Analyst for many years and was both a friend and adviser to the Department. He held a distinguished position within his profession and his last major work was to undertake the preliminaries leading up to the formulation of the Pesticide Residues in Foodstuffs survey.

His partner, Mr. J. A. Palgrave, B.Sc., F.R.I.C., has been appointed his successor.

## Sampling for Chemical Analysis

During the year 108 samples were submitted for chemical analysis and it will be seen from the following summary that a wide range of commodities was covered :

COMMODITY	NUMBER OF SAMPLES EXAMINED			REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY		
	Formal	Informal	Pesticide	Formal	Informal	Pesticide
Bacon . . . . .	—	—	1	—	—	—
Beef, mixed . . . . .	—	1	—	—	—	—
Blackcurrant drink . . . . .	2	2	—	2	1	—
Butter . . . . .	1	—	1	—	—	—
Buttermilk . . . . .	—	1	—	—	—	—
Cakes, fresh cream . . . . .	—	2	—	—	—	—
Caramel top dessert . . . . .	—	1	—	—	—	—
Cheese . . . . .	1	3	—	—	—	—
Cheesecake . . . . .	—	1	—	—	—	—
Cider . . . . .	—	1	—	—	—	—
Coffee, instant . . . . .	—	1	—	—	—	—
Corned beef loaf . . . . .	—	1	—	—	—	—
Cucumber . . . . .	—	—	1	—	—	—
Dairy cream . . . . .	—	3	—	—	—	—
Egg and Chicken delight . . . . .	—	1	—	—	—	—
Flour . . . . .	—	1	—	—	—	—
Food colours . . . . .	—	1	—	—	1	—
Garlic Sausage . . . . .	—	1	—	—	1	—
Ginger beer shandy . . . . .	—	1	—	—	—	—
Honey . . . . .	—	1	—	—	—	—
Horseradish . . . . .	—	1	—	—	—	—
Ice-cream . . . . .	—	1	—	—	—	—
Ice-cream powder . . . . .	—	1	—	—	—	—
Jam . . . . .	—	1	—	—	—	—
Jelly . . . . .	—	3	—	—	—	—
Lembena . . . . .	—	1	—	—	—	—
Liqueur chocolates . . . . .	—	1	—	—	—	—
Lychees . . . . .	—	1	—	—	—	—
Margarine . . . . .	1	2	—	—	—	—
Meat tenderiser . . . . .	—	1	—	—	—	—
Milk . . . . .	9	8	—	—	—	—
Milk, condensed . . . . .	—	1	—	—	—	—
Milk powder . . . . .	—	1	—	—	—	—
Mint Sauce . . . . .	—	2	—	—	1	—
Mussels . . . . .	—	1	—	—	—	—
Onion powder . . . . .	—	1	—	—	—	—

(Table continued on next page)



(continued from previous page)

COMMODITY	NUMBER OF SAMPLES EXAMINED			REPORTED ADULTERATED OR OTHERWISE GIVING RISE TO IRREGULARITY		
	Formal	Informal	Pesticide	Formal	Informal	Pesticide
Orange drink . . . . .	—	2	—	—	—	—
Pepper, black . . . . .	—	1	—	—	—	—
Pickle . . . . .	—	1	—	—	—	—
Pie filling, cherry . . . . .	—	1	—	—	—	—
Pies, chicken . . . . .	—	2	—	—	—	—
Pudding, meat . . . . .	—	2	—	—	—	—
Rum essence, imitation . . . . .	—	1	—	—	—	—
Salad cream . . . . .	—	1	—	—	—	—
Salmon, smoked . . . . .	—	1	—	—	—	—
Sauce, tartare . . . . .	—	1	—	—	—	—
Sausage rolls . . . . .	—	1	—	—	—	—
Sausages, pork . . . . .	9	—	—	1	—	—
Soup . . . . .	—	1	—	—	—	—
Spread, savoury . . . . .	—	2	—	—	—	—
Steak, stewed . . . . .	—	1	—	—	—	—
Sweet corn . . . . .	—	1	—	—	—	—
Sweets . . . . .	—	6	—	—	1	—
Tea . . . . .	—	1	—	—	—	—
Tea-mix . . . . .	—	1	—	—	—	—
Tomatoes . . . . .	—	1	—	—	—	—
Vinegar . . . . .	—	2	—	—	—	—
Whisky . . . . .	1	—	—	—	—	—
Yogurt . . . . .	—	1	—	—	—	—
Grand total . . . . .	24	81	3	3	5	—

Of the 108 samples, eight were reported as unsatisfactory in relation to labelling irregularities. Details are as follows :

<i>Sample No. and Description</i>	<i>Irregularity</i>
<i>Sample No. 3—Mint Sauce</i>	Colouring matter, i.e. tartrazine, was not declared as a permitted colouring matter as required by the Labelling of Food Order 1953. Informal action secured compliance.
<i>Sample No. 4—Pork Sausages</i>	The preservative, sulphur dioxide, was slightly in excess of the prescribed maximum. (Preservatives in Food Regulations, 1962.) The offence was not considered serious enough to warrant formal action.
<i>Sample No. 6—Blackcurrant Health Drink</i>	This drink was described as "Triple Vitamin C Enriched", which was liable to mislead in the absence of a statutory standard and as to the quality of the drink. Informal action secured the re-labelling of the product.
<i>Sample Nos. 23 and 33 — Blackcurrant Drink</i>	Formal and Informal samples showed a slight excess of sulphur dioxide (The Preservatives in Food Regulations, 1962). Informal action resulted in a correction of manufacturing process.
<i>Sample No. 72—Garlic Sausage</i>	One of the ingredients "caseinate" was incorrectly described on the label (Labelling of Food Order 1953). Informal action resulted in a new label being printed.
<i>Sample No. 91—Rum Truffles</i>	The analysis showed that the article should have been labelled "rum flavoured truffles." Informal action secured the necessary correction.
<i>Sample No. 92—Food Colourings</i>	The sample of permitted colouring matter was not labelled in accordance with the Colouring Matters in Food Regulations, 1966. Informal action resulted in the reprinting of the label.



## SUMMARY OF ALL SAMPLES

### Food and Drugs

#### *Chemical Analysis* (including ice-cream, milk and water)

Pesticide . . . . .	3
Formal . . . . .	24
Informal . . . . .	81

108

#### *Bacteriological Analysis*

Ice-cream :      Wrapped . . . . .	71
Soft . . . . .	29

100

Milk :            Pasteurised . . . . .	116
Sterilised . . . . .	5
Ultra-heat Treated . . . . .	3
Farm Bottled . . . . .	1
Horton Farm (Brucella) . . . . .	28

153

Sundry Foods . . . . .	70
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70

Water :            Domestic . . . . .	158
Mental Hospitals :	
Deep Well . . . . .	51
Mixed Supply . . . . .	44
Mains Supply . . . . .	184
Swimming Baths and Pools . . . . .	26

463

786

894

## MEAT AND OTHER FOODS

### Slaughterhouses

There are no licensed slaughterhouses in the Borough.

### Condemned Meat and Other Foods

The following meat and other foods were inspected at shop and food stores within the Borough and found to be unfit for human consumption.

<i>Commodity</i>	<i>No.</i>	<i>lbs.</i>	<i>No. Tins or Jars</i>	<i>No. Packets or Cartons</i>
Baby foods, tinned . . . . .	—	—	38	—
Fats and Butter . . . . .	—	14	—	—
Fish, fresh . . . . .	—	141	—	—
Fish, tinned . . . . .	—	—	133	—
Frozen foods . . . . .	—	—	—	4,157
Fruit, tinned . . . . .	—	—	3,188	—
Ice-cream products . . . . .	200	—	—	—
Meat, fresh . . . . .	—	400	—	—
Meat, tinned . . . . .	—	2,347	—	—
Meat, tinned . . . . .	—	—	194	—
Milk products, tinned . . . . .	—	—	144	—
Soups, tinned . . . . .	—	—	171	—
Sugar . . . . .	—	—	—	151
Vegetables, tinned . . . . .	—	—	913	—
Sundry foodstuffs . . . . .	—	—	—	314

### Butchers' Shops

There are 30 butchers' shops in the Borough, all of which have been periodically inspected during the year, 100 visits being made.

The high standard of cleanliness and equipment which has for many years characterised this type of food shop was maintained.



## Bakehouses

Twenty inspections and visits were made during the year to the five bakehouses which, however, supply only a small proportion of the bread and confectionery sold, the remainder being produced by the large Companies outside the Borough and distributed through food shops and by mobile vans.

## Complaints

During the year 40 (65) complaints were received in respect of food generally with 4 (12) specifically in respect of milk and milk bottles. The figures in brackets are for 1967.

With the exception of those which were of a minor nature, all complaints were reported to the Public Health Committee for their consideration.

Resultant action was that 9 prosecutions were authorised, details of which are as follows :

- |                    |   |
|--------------------|---|
| <i>Case No. 1.</i> | Mouldy Chocolate Roll—Defendants pleaded guilty—fined £20 with £7. 7s. costs.             |
| <i>Case No. 2.</i> | Mouldy Chocolate Gateaux—Defendants pleaded guilty—fined £10 with £7. 7s. costs.          |
| <i>Case No. 3.</i> | Grease in Loaf—Defendants pleaded guilty—fined £12 with £7. 7s. costs.                    |
| <i>Case No. 4.</i> | Bolt in Bread—Defendants pleaded guilty—fined £10 with £5. 5s. costs.                     |
| <i>Case No. 5.</i> | Label in Loaf—Defendants pleaded guilty—fined £10 with £7. 7s. costs.                     |
| <i>Case No. 6.</i> | Mouldy Liver and Bacon Croquettes—Defendants pleaded guilty—fined £20 with £5. 5s. costs. |
| <i>Case No. 7.</i> | Cigarette end in Loaf—Defendants pleaded guilty—fined £30 with £5. 5s. costs.             |
| <i>Case No. 8.</i> | Mouldy Sponge Roll—Defendants pleaded guilty—fined £20 with £5. 5s. costs.                |
| <i>Case No. 9.</i> | Glass in Milk Bottle—Defendants pleaded guilty—fined £25 with £5. 5s. costs.              |

## THE IMPORTED FOOD REGULATIONS 1968

The Regulations came into operation on the 1st August and replaced the Public Health Imported Food Regulations 1937 and 1948. Part 1 of the Regulations, among other matters, specifies the authorities by whom the Regulations are to be enforced. These will normally be the Port Health Authority through which the food is imported, but may in certain circumstances be an Inland Local Authority.

The change which is taking place in the way in which imports are coming into the country, namely by bulk container, will now mean in certain circumstances that Inland Local Authorities to which districts the containers are sent will, for the first time, be required to enforce the Food Regulations.

Parts 2 and 3 deal with the fitness of food for human consumption and with certain meat and meat products which require to have an official certificate from the country of origin.

The new Regulations strengthen the existing law and should result in a noticeable improvement in the quality and soundness of imported food.

## THE FISH AND MEAT SPREADABLE PRODUCTS REGULATIONS 1968

The Regulations do not come into operation until 1971. They have been made in advance of this date in order that the trade may have full knowledge of their requirements which relate to description, composition, labelling and advertisement of meat paste and fish paste.

## SHOPS ACT, 1950

The Council is the authority responsible for the enforcement of the provisions of the Act as they relate to Hours of Closing and Sunday Trading.

The General Closing Hours are 8 o'clock with 9 o'clock on the late day. No Orders as to closing hours or the early closing day have been made by the Local Authority. Wednesday is generally recognised as the early closing day, but the strict observance of this weekday for half-day closing is decreasing.

Inspections and visits relating to shop hours and the posting of notices numbered 584.



# OFFICES, SHOPS AND RAILWAY PREMISES ACT 1963

The following report on work of administration of the Act during the year has been submitted to the Ministry of Labour.

TABLE A  
REGISTRATIONS AND GENERAL INSPECTIONS

<i>Class of Premises</i>	<i>No. premises registered during year</i>	<i>Total No. premises registered end of year</i>	<i>Premises receiving inspection during year</i>
Offices . . . . .	17	234	35
Retail shops . . . . .	11	447	436
Wholesale shops, warehouses . . . . .	2	18	3
Catering establishments open to the public, canteens . . . . .	—	58	58
Fuel storage depots . . . . .	—	1	1
Totals . . . . .	30	758	533

TABLE B  
NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES — 772

TABLE C  
ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of Workplace</i>	<i>Number of Persons employed</i>
Offices . . . . .	3,060
Retail shops . . . . .	2,172
Wholesale departments, warehouses . . . . .	130
Catering establishments open to the public . . . . .	402
Canteens . . . . .	51
Fuel storage depots . . . . .	1
Total . . . . .	5,816
Total Males . . . . .	2,925
Total Females . . . . .	2,891

TABLE E  
PROSECUTIONS

Two prosecutions were undertaken in respect of non-compliance with the provisions of the Act:

1. *Hairdresser*—fines amounting to £45 with £5. 5s. costs were awarded in respect of four counts.
2. *Horticulturist*—concerning 6 infringements when the defendants were fined £2 on each count with £5. 5s. costs.

There has been a good and uniform acceptance by those concerned as to the requirements of this new legislation, and the routine inspection of offices and shops now forms a part of the Public Health Inspectors' normal duties.

Seven accidents were reported during the year. Each was investigated and a quarterly return thereon was submitted to the Ministry of Labour.



## Complaints

Thirty-four complaints were received during the year in connection with smoke nuisances. These were dealt with informally.

## Measurement of Air Pollution

Following the decision of the Council to join the National Scheme organised by the Department of Scientific and Industrial Research, Warren Spring Laboratory, for the measurement of air pollution, the first Station was put into operation in the Science Laboratory of Stoneleigh Secondary School, Vale Road, Ewell, on the 25th June 1963. The Station is known as Ewell No. 1. A second Station, Epsom No. 1, came into service on the 27th October 1964 and has been established in the Public Health Department, at the Town Hall, Epsom.

There are few industrial chimneys in this Borough and it is fair to say that the small amount of smoke now recorded comes from the chimneys of private houses.

## Smoke Control Policy

With the coming into force of the Clean Air Act 1956, certain areas of the country were designated by the Ministry of Housing and Local Government to be "black areas" where with the promotion of smoke control areas, the local authorities are empowered to give grants towards the provision of appliances to burn smokeless fuels, and thereby in these areas the burning of bituminous coal is prohibited.

An area around London was so designated but not properly defined, and in this area, the Borough of Epsom and Ewell was included.

The Council have never accepted that the Borough should have been so designated, but have at the same time not hesitated to encourage householders to burn smokeless fuels. Indeed during the past six to seven years the process of voluntary conversion has been rapid with a marked increase during the past two years.

It is fair to say that the amount of smoke, measured in microgrammes per cubic metre, as shown in the following tables, was not large in 1963/64 (when readings were first taken) in comparison with other areas of the country properly designated "black areas", and a glance at the average readings in the following years shows a dramatic fall in the amount of smoke recorded at the two Stations.

In 1966 the Council informed the Ministry of their views and subsequently were invited to submit a memorandum setting out the reasons with statistical and other information which this Authority consider relevant to the claim that the Borough should not be classified as a "black area".

During the year Parliament passed the Clean Air Act 1968 and the Minister of Housing and Local Government made the Clean Air Act 1968 (Commencement No. 1) Order 1968, which brings into force certain sections of the Act on the 1st April 1969. Of immediate interest are Sections 2, 6 and 8 dealing with Emission of Grit and Dust from Furnaces, Height of Chimneys and the Power of the Minister to require the creation of Smoke Control Areas, respectively. It will be of interest to see whether the Minister sees fit to implement his compulsory powers under Section 8 in the light of the Council's contention that the Borough has wrongly been classified as a "black area".

## London and Home Counties Clean Air Advisory Council

This Council, which had been in existence for many years and had proved of sterling worth to the Local Authorities forming its membership, decided at a Special Meeting on 29th November 1968 that the Council be dissolved, which decision was accepted by the representatives of the Local Authority members in the realisation that in recent years the excellent progress which had been made in London and the South-East in the promotion of smoke control areas, and the momentum whereby householders have voluntarily changed to gas, oil, electricity and solid smokeless fuels, had reduced the need for such an Advisory Body.

This is one instance where the dissolution of such a Body can be rightly claimed to have resulted from the success of its activities.



EWELL NO. 1

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT  
STONELEIGH WEST SECONDARY MODERN SCHOOL, VALE ROAD, STONELEIGH

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	N	105	71	30	17	N	N	16	23	79	93	62
	1966	86	39	54	N	15	9	N	14	33	36	58	52
	1967	65	47	16	30	16	12	8	12	20	16	83	83
	1968	63	68	31	26	62	14	15	16	17	22		
Highest daily reading	1965	367	280	243	79	48	44	34	56	51	226	228	302
	1966	175	104	139	57	32	31	22	43	80	80	165	267
	1967	173	136	32	57	37	25	21	42	40	37	307	230
	1968	150	226	88	71	151	51	32	49	47	66	176	271
Lowest daily reading	1965	10	22	14	9	7	3	4	4	6	10	10	10
	1966	21	10	9	1	3	3	4	3	5	6	9	9
	1967	18	14	3	10	3	3	3	3	4	6	13	9
	1968	3	7	6	6	21	3	5	6	5	2	8	11

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	N	290	271	109	92	N	N	56	82	220	225	183
	1966	258	213	171	N	93	77	N	76	147	234	201	155
	1967	323	184	120	183	163	99	105	65	176	149	313	216
	1968	229	265	197	131	132	78	70	44	87	124		
Highest daily reading	1965	545	647	562	338	170	333	142	142	194	452	411	470
	1966	407	526	376	214	164	282	104	209	458	570	350	591
	1967	503	439	342	427	479	182	225	174	508	339	553	581
	1968	936	556	444	441	291	198	103	132	367	316	552	462
Lowest daily reading	1965	92	41	42	30	66	129	18	18	35	60	40	44
	1966	58	75	62	36	52	42	40	15	44	117	50	44
	1967	33	69	58	90	76	65	57	23	22	50	130	54
	1968	48	83	58	33	27	24	45	0	26	38	114	176

N — indicates that insufficient results were obtained



EPSOM NO. 1

READINGS TAKEN FROM DAILY SMOKE AND SULPHUR DIOXIDE RECORDING APPARATUS AT  
THE TOWN HALL, THE PARADE, EPSOM

Smoke Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	72	102	52	26	16	20	11	17	18	63	70	48
	1966	74	31	37	28	14	10	10	14	30	31	66	46
	1967	52	49	17	37	13	13	9	13	19	14	79	83
	1968	61	74	35	22	66	15	15	14	16	28		
Highest daily reading	1965	214	299	184	76	45	113	28	72	37	158	190	193
	1966	148	83	136	75	28	32	27	42	61	79	154	168
	1967	162	151	33	64	39	27	20	51	40	34	209	243
	1968	171	220	86	70	154	53	25	29	48	82	151	228
Lowest daily reading	1965	7	14	10	6	3	2	4	5	7	10	7	8
	1966	11	3	7	7	4	3	5	3	4	3	18	14
	1967	14	7	7	10	0	5	2	2	5	3	11	10
	1968	7	10	7	5	14	2	8	4	3	6	9	7

Sulphur Dioxide Concentration (Microgrammes per cu. metre)

	YEAR	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.
Average daily reading	1965	163	243	138	87	69	137	37	38	41	126	141	88
	1966	170	92	97	102	67	35	31	48	85	71	115	88
	1967	111	88	67	120	61	59	61	50	28	16	77	74
	1968	78	76	70	34	31	27	24	10	22	26		
Highest daily reading	1965	355	562	319	255	213	298	73	74	101	266	331	237
	1966	402	237	205	198	134	137	54	110	231	187	262	442
	1967	295	253	108	203	128	94	157	390	58	51	191	166
	1968	448	209	175	91	66	46	39	35	40	130	63	143
Lowest daily reading	1965	32	82	29	42	27	48	12	12	20	39	41	24
	1966	46	24	37	45	24	12	18	18	37	30	53	48
	1967	33	37	31	69	37	22	21	25	6	0	12	4
	1968	19	24	13	6	0	13	6	0	11	5	6	14



## EPSOM DOWNS

### Sale of Food

The sale of food on Epsom Downs at Race Meetings is controlled by the Food Hygiene (Market Stalls and Delivery Vehicles) Regulations 1966 and in the main traders in recent years have responded to the improvements required by the Regulations.

Special arrangements are made for a piped water supply to be made available and traders provide their own means of heating water for refreshments and cleansing.

Regular inspection of the stalls is carried out and, in addition, samples of water, ice-cream, and other foods are taken during the Race Meetings and throughout the summer.

### Temporary Sanitary Accommodation

This provision is for the periods covered by the four Race Meetings. The Corporation provides and staffs the five mobile conveniences which are connected to the sewers and have a piped water supply. The Epsom Grand Stand Association Limited augment the accommodation by the erection of tent lavatories furnished with Elsan Closets.

### Permanent Sanitary Accommodation

The building of the long awaited convenience on Epsom Downs was commenced toward the end of the year and should be ready for the Spring Meeting in 1969.

### Cleansing

The cleansing of the Downs during and after Race Meetings is carried out under the direction of the Epsom Grand Stand Association Limited. Of recent years there has been a marked improvement in this service and the work is completed more quickly after the Meetings.

At other times the cleansing of the Downs is the responsibility of the Conservators.

## RODENT CONTROL

### Prevention of Damage by Pests Act 1949

In accordance with requirements of the above Act, occupiers of land or buildings are under an obligation to notify the Local Authority in writing, of the presence of rats or mice in substantial numbers. It is also the duty of every Local Authority to take such steps as may be necessary to secure, as far as practicable, that their district is kept free from rats and mice. They are empowered to make inspections and enforce owners and occupiers to carry out such operations as may be necessary for this purpose.

Advice and assistance are given to persons who report any such infestation or apply for information as to preventive measures. Such advice is based on methods of destruction recommended by the Infestation Control Division of the Ministry of Agriculture, Fisheries and Food.

One full-time Rodent Operative is employed in the Department and the following is a summary of the work carried out :

<i>Number of</i>	1966	1967	1968
Complaints investigated . . . . .	736	648	723
Inspections and visits. . . . .	4,345	3,760	3,826
Premises found infested . . . . .	562	546	534
Treatments carried out by the Rodent Operative at:			
Private premises . . . . .	662	711	594
Business premises . . . . .	109	84	93
Rats known to have been caught and destroyed by the Rodent Operative . . . . .	401	375	288

In assessing the number of rats killed, a conservative estimate would be formed by using a factor of 5 to every rat actually found dead as the use of Warfarin poison, a blood anti-coagulant, causes the rat affected to seek cover before it dies.

### Sewer Rat Control

Results over the past few years show that there is a steadily reducing rat population in the sewers principally due to these control methods.

## DISINFECTION

### Clothing

In order to assist Nationals of Spain, Italy, East Germany and other Central European Countries to comply with Postal and Customs Regulations concerning the transit of clean, second-hand clothing, disinfection was carried out in respect of 27 items of clothing arising from four applications.

### Library Books

The disinfection of library books as a result of contact with infectious disease, is carried out as a routine measure. Details of work done are as follows :

Reference from Borrowers—3 requests . . . . . 10 books



## INSECT AND OTHER PESTS

With the overall improvement in living conditions, the incidence of bug or flea infestation of houses is now very rare and even the post war infestation by moth and carpet beetle has fallen, judged by the number of complaints received.

### Mosquito Control

The ponds and pools on Epsom Common and in other parts of the Borough were sprayed as in previous years, which control measure helps to reduce nuisance from mosquitoes.

### Destruction of Wasps' Nests

This service is carried out on request at a charge of 5s. per nest destroyed (no extra charge for additional nests treated at the time of visit).

During the year 73 nests were so treated in comparison with 171 in 1967, and the receipts amounted to £18. 5s.

### Feral Pigeons—Control

A limited control of Feral Pigeons is exercised by trapping the birds where they infest public places, 85 being caught by this method.

## MORTUARY

The use of the Council's Mortuary for post-mortem purposes ceased in 1964, and until the new joint accommodation is ready at the Epsom District Hospital, the Board has agreed to undertake this work. The charge made for the service is £2. 2s. per body, and the cost for 1968 was £180. 12s.

## HAIRDRESSERS' AND BARBERS' ESTABLISHMENTS

Bye laws are in force for the purpose of securing :

- (a) the cleanliness of premises on which a hairdresser's or barber's business is carried on and of the instruments, towels, materials and equipment used therein ; and
- (b) the cleanliness of the hairdressers or barbers working in such premises in regard to both themselves and their clothing.

In that connection 47 visits and inspections were made, with 4 Informal Notices being served.

## MISCELLANEOUS

### Pet Animals Act 1951

The Act provides that no person shall keep a pet shop except under licence granted by the local authority. Three applications were received and granted during the year.

### Animal Boarding Establishments Act 1963

The Act makes provision for licensing premises when cats and dogs are boarded. Three applications were received and granted during the year.

### Riding Establishments Act 1964

The Act provides for a system of yearly licensing by local authorities.

Briefly, in considering the application for a licence, a local authority must have regard to the suitability and qualification of the applicant and a report from a Veterinary Surgeon or Veterinary Practitioner of an inspection of the premises. The suitability of the horses kept at any such establishment is also a determining factor.

The Council re-appointed their Veterinary Surgeon (first appointed under the Act of 1939) and five riding establishments were licensed during the year.

### Betting, Gaming and Lotteries Act 1963-64

Fourteen applications for permits for the provision of amusements with prizes were made and granted in respect of the following premises :

Public Houses . . . . .	12
Cafes . . . . .	2

The permits are for a period of 3 years and at the end of the year 42 were in force as follows :

Public Houses . . . . .	33
Cafes . . . . .	8
Cinemas . . . . .	1

### Consumer Protection Act 1961

Under this Act, the Secretary of State is empowered to make regulations imposing requirements, in respect of any prescribed class of goods, to prevent or reduce risk of death or personal injury.



### **Nightdresses—Safety from Fire**

The Nightdresses (Safety) Regulations 1967, made under this Act, came into operation on 1st September 1967. They revoke the Children's Nightdresses Regulations 1964, and whilst imposing additional safety standards for children's nightdresses, bring all nightdresses within the scope of the Regulations.

Inspections of 14 shops have shown that stock held complied with the Regulations.

### **Fire Guards**

Regulations in force under this Act require that fireguards to gas fires, electric fires and oil heaters shall be robustly made and comply with certain specified standards of construction and fitting. No complaints were received ; 8 routine visits were made.

### **Oil Heaters—Construction**

Standards of construction of Oil Heaters are prescribed in the Oil Heaters Regulations 1962 as amended by the Oil Heaters Regulations, 1966.

No complaints were received in respect of these Regulations in 1968 and the 21 visits to premises did not reveal any infringements.

### **Toys—Safety Provisions**

The Toys (Safety) Regulations 1967 made under the above-mentioned Act, came into operation on 1st November 1967.

The Regulations prohibit the use of celluloid in toys other than ping pong balls and impose restrictions in relation to the paint which may be used on toys.

Thirteen visits to shop premises were made during the year.

### **Noise Abatement Act, 1960**

Ten complaints were received all being dealt with informally.

As indicated in my report for 1967, a publicity campaign to reduce neighbourhood noise was mounted in the Spring of this year in accordance with Circular 22/67 of the Ministry of Housing and Local Government.

This was achieved in the main by exhibiting suitable posters on public notice boards, at all schools, in factories, large offices and shops with accompanying press publicity.

The Public Health Inspectors made numerous visits in connection therewith, drawing attention to neighbourhood noise, such as blaring television sets, transistor radios and gramophones, loud parties/dances, shouting with friends outdoors, revving car engines aimlessly, unmuffled motorcycle engines, slamming doors, repair and decorative work late at night, etc.

It is hard to judge whether the effort succeeded, as there has been little comment from the public. I am of the opinion that any work directed to this end is worthwhile in that unwanted noise is becoming a major nuisance of the latter half of this century.

### **Rag Flock and Other Filling Materials Act, 1951**

There are no premises in the Borough which are subject to registration under the provisions of this Act ; four samples of toys containing foam crumb were submitted for analysis, with no adverse reports.

### **Scrap Metal Dealers Act, 1964**

This Act makes provision for the local registration of all scrap metal dealers and every local authority is required to maintain a register of persons carrying on business in their area as scrap metal dealers.

There is no discretion to refuse registration, which can be effective for three years, and will be cancelled unless application is received for its renewal.

Apart from the registration by the local authority the dealer is required to keep a record of his dealings in scrap metal and this record is subject to scrutiny by the Police.

Eight premises are so registered ; being a reduction of fourteen.

This drop was accounted for by the redevelopment of the land at West Ewell, now housing caravans, and the expiry of the first 3-year period of registration.



# EDUCATION COMMITTEE

Report of the School Medical Officer for the Year 1908

## PART FOUR

# SCHOOL HEALTH SERVICE



# BOROUGH OF EPSOM AND EWELL

## EDUCATION COMMITTEE

### Report of the School Medical Officer for the Year 1968

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the following Report after my first full year as School Medical Officer.

There was an increase of 323 pupils this year coming within the scope of the School Health Service giving a total of 8,804. I am pleased to report that the general health of the children was good and that there were no unforeseen epidemics. Only 11 cases of Sonne Dysentery occurred and even by the end of the year the number of cases of Measles had not yet begun to rise. Once again no case of Diphtheria or Poliomyelitis was reported but as has so often been stated this happy state of affairs is entirely dependent on a satisfactory level of immunisation. On the subject of immunisation, I should like to pay tribute to all the Head Teachers for the co-operation they show to all my Staff in view of the number of visits that we have to make to the Schools in order to carry out the necessary schedules. This was particularly shown by the Heads of Infant Schools when in the Summer the Minister of Health asked for a rush campaign of measles vaccination against the four to seven year olds. The percentage of pupils examined and found to require treatment decreased slightly from 17.4 per cent to 16.2 per cent and these were for minor conditions only.

A full investigation was carried out on the whole of one School during the year, due to the fact that unfortunately one of the Staff had developed Tuberculosis. I am pleased to report that no further cases were found in either Staff or Pupils.

One subject, which is causing concern in some Schools in the country, notably in large cities, that of drug taking, does not appear to be occurring in this Borough. Constant watch is, however, being kept to try and catch any early signs of such a problem.

More and more attention is being paid to all handicapped pupils, both mental and physical, to make sure that appropriate education is not only being supplied but is also planned for in advance. At the end of the year, the number of pupils ascertained in need of special education was 262. Table III shows the provision made for this special educational treatment.

Last year mention was made concerning the bad condition of the children's teeth and although a good deal of this could be improved by better diet and oral hygiene, I know that the School Dental Officers regret that the Borough Council does not yet favour fluoridation in principle, even though it might be several years before it could be implemented. Increasing health education is, however, being carried out especially to the younger age groups regarding all preventive measures.

The protection of the health of the school child often involves many persons or organisations, for example in the case of the deaf or partially deaf child, the Health Visitor, the Audiometrician, the Audiologist, the Speech Therapist, the Hospital Consultant, the General Practitioner, the Home Teacher for the Deaf, the Partially-Hearing Unit at Riverview School, and so on. With chest conditions, particularly in cases of Asthma, the Chest Physician, the General Practitioner, the Health Visitor, the Social Worker, the Physiotherapist, the School Medical Officer and the Head Teacher. I am very pleased to be able to report that in every case where co-operation is needed there is an excellent relationship between all concerned.

I should like to thank the Members of the Education Committee for their encouragement and also to take this opportunity of thanking all who co-operate with us especially the Borough Education Officer and his Staff and the Head Teachers. I should also once again like to pay a warm tribute to the medical, nursing and clerical staffs, who are responsible for running the Service.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient Serrant,

*D. J. SHEERBOOM*  
*School Medical Officer*



## School Population

The maintained school population at the end of the year was as follows :—

Primary . . . . .	5,125
Secondary . . . . .	3,572
Special . . . . .	27
Nursery . . . . .	80
	<hr/>
	8,804

The number of maintained school departments in the Borough on 31st December 1968 was :—

Primary . . . . .	18
Secondary . . . . .	6
Special (Partially Hearing Unit and The Lindens, St. Ebba's Hospital)	2
Nursery Classes (West Ewell and Cuddington Croft Schools)	2
	<hr/>
	28

## Routine Medical Inspection

Routine medical inspection by age groups is carried out as follows :—

Primary	(i) On entry . . . . .	Complete medical examination
	(ii) During year in which age of 8 is reached	Eye and hearing test only
Secondary	(iii) On entry . . . . .	Complete medical examination
	(iv) During year in which age of 13 is reached (if more than a year since last routine examination)	Eye test only
	(v) During year in which age of 15 is reached	Complete medical examination
	(vi) During year in which age 17 is reached (if more than a year since last routine inspection)	Eye test only

## General Physical Condition

At each routine medical inspection School Medical Officers are required to assess the general physical condition of the children and to record the assessment under the headings "satisfactory" or "unsatisfactory".

Without exception the condition of the children was recorded as satisfactory.

## Cleanliness Inspections

During the year 1,816 individual examinations of pupils were carried out by Health Visitors. Eight pupils were found to have nits in the hair.

Materials to treat the verminous condition were supplied to the parents concerned.

## Defects found at Routine Medical Inspections

Number of pupils examined . . . . .	3,762
Number of pupils found to require treatment . . . . .	609
Percentage of pupils in need of treatment . . . . .	16.2
Number of defects requiring observation . . . . .	1,051
Number of defects requiring treatment . . . . .	628

## Parents present at Inspections

Parents were present at 1,006 routine medical inspections, a percentage of 26.7.

## DENTAL INSPECTION AND TREATMENT

REPORT OF MR. G. B. ASHWORTH, F.D.S., SENIOR DENTAL OFFICER

### Report on the Dental Services within the Borough of Epsom and Ewell for the Year 1968

The work of the two Dental Clinics in the Borough has been maintained throughout the year. One of the part-time Dental Officers at Ewell resigned at the end of November and has not yet been replaced. Otherwise, the Staff has remained at the same strength as during the previous year. The County Specialist has continued to undertake most of the orthodontic treatment and the number of children in her care has markedly increased. This, in turn, has necessitated a considerable amount of X-ray work being carried out at the Epsom Clinic for orthodontic patients, drawn from a wide area of the district. General anaesthetic sessions have been held regularly at both Clinics.

The services provided were made available to all school children, to pre-school children and to expectant and nursing mothers.



## **The School Dental Service**

The number of children examined at the Schools was 6,440, a further 1,155 school children attended voluntarily at the Clinics for additional inspections. Some 1,939 children received treatment during the year. These included physically or mentally handicapped children attending the Ewell Training Centre, the School for the Autistic at St. Ebba's Hospital and at similar centres in the district. The inspection and dental care of those so handicapped is regarded as a most important service.

The following is a summary of some of the treatment provided :

Number of fillings in permanent teeth . . . . .	2,570
Number of fillings in temporary teeth . . . . .	1,349
Number of permanent teeth extracted . . . . .	261
Number of temporary teeth extracted . . . . .	576
Number of children receiving orthodontic treatment . . . . .	314

## **Employment of Children**

School Medical Officers carried out 61 examinations of children in order to ascertain their fitness to undertake part-time employment. All were found to be fit.

## **Child Guidance**

During 1968, children of a wide age range have continued to be referred to the Epsom Child Guidance Unit from Schools, medical and psychological services, Juvenile Courts and increasingly by parents themselves. Though referred for individual emotional disturbance, these children have increasingly been seen together with other members of the family for treatment. Relatively fewer children have therefore had individual psychotherapy, but where this has extended over a long period, their class teachers have been invited to case conferences at intervals throughout such treatment.

Clinical work in the preventive field has continued, through a Psychotherapist's interest in Playgroups and the training of their Supervisors. This Psychotherapist has subsequently linked up with such children's infant School Teachers to supplement the School Psychological Service.

The urgent need for a day-class for maladjusted children in this area continues to actively concern us. Since these children largely remain in the ordinary day class, it is proposed to offer further help to Teachers in a group setting. It is proposed to offer a similar group facility to Health Visitors, who already have access to Psychotherapists for individual consultation.

Consultation by individual Speech Therapists with Psychiatric Social Workers has continued, but consultation by Child Care Officers, their Area Officers, and the Adoption Officers has lapsed. Regular meetings once a term with representatives of one Divisional Education Office and the Medical Officer of Health with the Clinic Staff have been established.

It is proposed to give more attention in the future to the (preventive) therapeutic needs of all young children in families expecting a new baby or suffering a bereavement.

## **Clayhill Remedial Centre, West Hill, Epsom**

The Centre, now in its seventh year, continues to provide remedial education for children of average intelligence who are failing to make satisfactory progress in the ordinary School. Children come mainly from the Primary Schools and attend 4-5 half-days a week, but in the past year a small group of six children with spelling difficulties from Secondary Schools attend for one half-day a week. After leaving the Centre, children are followed up one year later and if necessary for a longer period.

This year 48 children have attended, 24 in the mornings and 24 in the afternoons. Twelve of these children come from Schools within this Borough. This has necessitated the appointment of another Teacher, making a total of four full-time and one part-time. The part-time Teacher works mainly in remedial work in ordinary Schools and attends the Centre only one half-day a week.

Selection of children depends on the combined efforts of Head Teachers, Educational Psychologists and the Teacher-in-Charge at Clayhill, and it is considered that no child requiring this Service in this area is overlooked.

## **Speech Therapy**

The general administration of this Service is controlled by the County Medical Officer. Mrs. C. M. Young is employed on a part-time basis at the Ewell Clinic and Miss A. Cooper is part-time at the Ewell and Epsom Clinics and the Riverview School Partially-Hearing Unit having taken over from Mrs. P. A. Cole and Mrs. S. M. Bowen, who left the Service during the year.



Details of the work carried out by the Speech Therapists during the year are given below. Six pupils were on the waiting list at the end of the year.

	<i>Epsom Clinic</i>	<i>Ewell Clinic</i>	<i>Riverview Partially- Hearing Unit</i>
Number of treatment sessions . . . . .	72	69	21
Number of consultation sessions with parents and teachers . . . . .	3	1	—
Number of children discharged during the year :			
(a) cured . . . . .	12	11	2
(b) improved . . . . .	3	2	—
(c) other reasons . . . . .	13	6	7
Number under treatment at end of year . . . . .	16	25	12
Number under supervision at end of year . . . . .	19	18	14

### Convalescent Homes

Any delicate child who attends a school maintained by the Local Education Authority may be provided with convalescent home treatment, free of charge. Such treatment may be recommended for periods up to 4 weeks.

During 1968, 15 school children were sent for convalescent holidays by the Council.

### School Eye Clinics

Ophthalmic Surgeons visited the Ewell Court and Epsom Clinics regularly throughout the year and below is given a summary of work carried out :

Number of sessions . . . . .	63
Number of children who attended during the year . . . . .	701
Number of attendances during the year . . . . .	920
Number of examinations for errors of refraction (including squint) :	
(a) Glasses ordered or re-ordered . . . . .	259
(b) Glasses not ordered . . . . .	661
Number referred for orthoptic or surgical treatment of squint . . . . .	10
Number referred to hospital for treatment unobtainable at Clinic . . . . .	2

### Postural Defects

A qualified Physiotherapist attended at the two main Clinics to conduct remedial exercise classes for children with orthopaedic defects relating to posture and feet.

Number of sessions . . . . .	141
Number of children treated in 1968 . . . . .	114
Number of attendances . . . . .	249
Number of new cases admitted during the year . . . . .	39
Number of cases discharged . . . . .	63

### Bedwetting

In the course of the year 7 children were loaned electric enuresis alarms, with varying degrees of success.

### Early Diagnosis and Treatment of the Deaf Child

The aim of the Health Visitors and School Medical Officers is to ascertain all young deaf children and make plans for their special treatment before they enter School at the age of 5 years.

To ensure that no deaf children have been missed, all pupils aged 6-7 years are given a routine pure-tone audiometer test in School. In 1968, 888 pupils were so tested and of these 58 (or 6.5 per cent.) showed significant hearing defect (see Table VI).

At the end of the year the ascertained hard of hearing children were :

(a) At Special Schools :	
Partially deaf . . . . .	7
Totally deaf . . . . .	4
(b) In ordinary Schools and under supervision by Medical Officers and Teachers of the Deaf . . . . .	8
(c) Under school age and under medical supervision . . . . .	3

### Hearing Aid Provided

In age groups : 0-5 . . . . .	3
5 and over . . . . .	19



## Infectious Disease—Tuberculosis

In July 1968 we received notification that a member of the teaching staff of one of our Schools had developed Tuberculosis. Below are given details of the investigation carried out at the School :

Age range of pupils tested . . . . .	5 to 7 years
Number Tuberculin tested . . . . .	200 children 7 teachers
Number Tuberculin negative . . . . .	187 children 1 teacher
Number Tuberculin positive . . . . .	13 children 6 teachers
Number Tuberculin positive given X-rays . . . . .	13 children 6 teachers
Results of X-rays . . . . .	All Clear

## Protection against Tuberculosis

With the active co-operation of Head Teachers, the Scheme was continued for the protection of School-leavers (age groups 13-14) by inoculation with B.C.G. vaccine: 399 children were inoculated compared with 456 in 1967. 35 children were tuberculin positive (7.8 per cent). In addition 24 older children were inoculated.

## School Meals and Milk

The following is a summary showing the number of children taking meals and milk on a day in September 1968 :

Category	Total No. in Attendance	MEALS			MILK	
		Free	Full Cost	% of total taking meals	No. taking milk	% of total taking milk
Infant	1821	51	1508	85.6	1762	96.7
Junior	2887	188	2296	86.0	2701	93.5
Secondary	3420	214	2612	82.6	—	—
Totals	8128	453	6416	84.5	4463	—

## Deaths of School Children

Deaths of children of school age during the year were as follows :

- Girl aged 9 years—Cancer
- Boy aged 13 years—Accidental hanging
- Boy aged 7 years—Road traffic accident

## Handicapped Pupils

Table III sets out by categories the handicapped pupils ascertained as at 31st December 1968 and shows what provision was made for their special educational treatment.

## The Lindens Day Unit for Disturbed Children, St. Ebba's Hospital, Epsom

Autism is a serious mental disturbance found in children. They are withdrawn and do not communicate although they are not deaf and have normal intelligence. Unless treated appropriately a child may become permanently affected.

The Unit was opened three years ago to provide educational treatment for these children. A Consultant Psychiatrist is in charge of the Unit and Mrs. B. Furneaux is the Teacher-in-Charge. Other children with disturbed behaviour are admitted to the Unit if they can be helped by similar educational methods.

During 1968 the children have been taken on several day outings to places of general interest, including Chessington Zoo, Madame Tussaud's, The Planetarium and the Portsmouth Dockyard. The children were also taken on holiday to Osborne House at Hastings, the Queen Mary's Hospital for Children Holiday Home.

There are 26 children on the Register and in the past year 3 children have left the Unit to attend Special Schools for Educationally Sub-Normal children and 5 more to attend normal School. One child has had to be placed in a long-stay hospital for care.

During the year only 5 children from Epsom and Ewell attended the Unit.



**TABLE I**  
**A. Periodic Medical Inspections**

<i>Age Groups Inspected (by years of birth)</i>	<i>Number of Pupils Inspected</i>	<i>Pupils Found to Require Treatment</i>		
		<i>For defective vision (excluding squint)</i>	<i>For any other condition recorded on Table II</i>	<i>Total individual pupils</i>
1964 and later . . . . .	47	2	1	3
1963 . . . . .	705	24	45	66
1962 . . . . .	91	2	10	12
1961 . . . . .	19	—	2	1
1960 . . . . .	657	71	1	72
1959 . . . . .	34	3	1	4
1958 . . . . .	20	4	—	4
1957 . . . . .	320	47	17	59
1956 . . . . .	283	33	13	42
1955 . . . . .	580	111	1	112
1954 . . . . .	67	10	1	11
1953 and earlier . . . . .	939	211	18	223
<b>Totals . . . . .</b>	<b>3,762</b>	<b>518</b>	<b>110</b>	<b>609</b>

**B. Other Inspections**

*Notes*

A special inspection is one that is carried out at the request of a parent, doctor, nurse, teacher or other person.

A re-inspection is a follow-up inspection arising from one periodic medical inspection or out of a special inspection.

Number of special inspections . . . . .	718
Number of re-inspections . . . . .	429
<b>Total . . . . .</b>	<b>1,147</b>

**C. Infestation with Vermin**

- (i) Number of individual examinations of pupils in Schools by Health Visitors 1,816
- (ii) Number of individual pupils found to be infested . . . . . 8
- (iii) Number of individual pupils in respect of whom cleansing notices were issued . . . . . Nil



TABLE II

## Return of Defects found in the Course of Medical Inspection in 1968

Defect or Disease	Periodic Inspections		Special Inspections	
	Requiring treatment	Requiring to be kept under observation	Requiring treatment	Requiring to be kept under observation
Skin . . . . .	21	65	—	—
Eyes :—				
(a) Vision . . . . .	518	419	198	385
(b) Squint . . . . .	8	7	—	—
(c) Other . . . . .	1	57	—	1
Ears :—				
(a) Hearing . . . . .	7	52	30	18
(b) Otitis media . . . . .	1	16	—	—
(c) Other . . . . .	3	10	—	—
Nose and Throat . . . . .	4	77	—	2
Speech . . . . .	10	31	32	8
Cervical Glands . . . . .	1	7	—	2
Heart and Circulation . . . . .	1	24	—	1
Lungs :				
(a) Pulmonary tuberculosis (definite)	—	—	—	—
(b) Other lung diseases . . . . .	3	28	1	1
Development :				
(a) Hernia . . . . .	2	3	—	—
(b) Other . . . . .	9	52	—	2
Nervous System :				
(a) Epilepsy . . . . .	1	1	—	—
(b) Other conditions . . . . .	—	28	3	1
Orthopaedic :				
(a) Posture . . . . .	6	34	1	1
(b) Foot defects . . . . .	9	25	—	1
(c) Other . . . . .	12	74	4	11
Psychological :				
(a) Development . . . . .	7	5	4	1
(b) Stability . . . . .	3	11	10	2
Other Diseases . . . . .	1	25	3	1
Totals . . . . .	628	1,051	286	438



TABLE III

Handicapped Pupils as Ascertained at 31st December, 1968

Category	<i>At ordinary school under medical supervision</i>	<i>At special school or Hospital School</i>	<i>Attending Speech Clinic</i>	<i>Attending Child Guidance Clinic</i>	<i>At ordinary school—on waiting list for special school</i>	<i>Home teaching provided</i>	<i>Under school age and under medical supervision</i>	<i>At ordinary school—on waiting list for Speech and Child Guidance Clinics</i>	<i>At home awaiting admission to special school</i>	<i>Total</i>
Blind and partially sighted .	—	2	—	—	—	—	—	—	—	2
Deaf and partially deaf .	8	11	—	—	—	—	3	—	—	22
Delicate . . . . .	5	4	—	—	—	—	1	—	—	10
Physically handicapped .	14	12	—	—	—	—	3	—	—	29
Educationally sub-normal .	5	40	—	—	1	—	—	1	—	47
Epileptic . . . . .	6	2	—	—	—	—	3	—	—	11
Maladjusted . . . . .	—	6	—	21	—	—	—	5	—	32
Speech . . . . .	—	1	102	—	—	—	—	6	—	109
Totals . . . . .	38	78	102	21	1	—	10	12	—	262



TABLE IV

## Treatment of Pupils attending Maintained Primary and Secondary Schools

(a) *Diseases of the Skin*

		Number of cases treated or under treatment during year
Ringworm—(i) Scalp . . . . .		—
(ii) Body . . . . .		2
Scabies . . . . .		4
Impetigo . . . . .		—
Other skin diseases . . . . .		19
Total . . . . .		25

(b) *Eye Diseases, Defective Vision and Squint*

External and other, excluding errors of refraction and squint . . . . .	11
Errors of refraction (including squint) . . . . .	913
Total . . . . .	924
Number of pupils for whom spectacles were prescribed . . . . .	252

(c) *Diseases and Defects of Ear, Nose and Throat*

Received operative treatment for adenoids and chronic tonsillitis . . . . .	7
Received other forms of treatment . . . . .	4
Total . . . . .	11

(d) *Orthopaedic and Postural Defects*

(a) Pupils treated at Clinics or Out-patient Departments . . . . .	114
(b) Pupils treated at school for postural defects . . . . .	35
Total . . . . .	149

(e) *Other Treatment Given*

Cervical Glands . . . . .	1
Heart and circulation . . . . .	1
Lungs . . . . .	21
Development : (a) Hernia . . . . .	2
(b) Other . . . . .	9
Nervous : (a) Epilepsy . . . . .	12
(b) Other . . . . .	3
Miscellaneous Minor Ailments . . . . .	—
Total . . . . .	49



**TABLE V**  
**Dental Inspection and Treatment**

1.	Number of pupils inspected . . . . .	7,595
2.	Number found to require treatment . . . . .	2,810
3.	Number treated at school dental clinics . . . . .	1,939
4.	Number of attendances made by pupils for treatment . . . . .	5,708
5.	Number of half-days devoted to inspections . . . . .	44
6.	Number of half-days devoted to treatment . . . . .	839
7.	Number of permanent teeth extracted . . . . .	261
8.	Number of permanent teeth filled . . . . .	2,126
9.	Number of temporary teeth extracted . . . . .	576
10.	Number of temporary teeth filled . . . . .	1,232
11.	Total number of teeth filled . . . . .	3,358
12.	Number of administrations of general anaesthetics . . . . .	347
13.	Number of pupils X-rayed . . . . .	172
14.	Number of scalings and gum treatments . . . . .	93
15.	Number of teeth conserved with silver nitrate . . . . .	78
16.	Number of teeth root filled . . . . .	7
17.	Courses of treatment completed . . . . .	996
18.	Orthodontics :	
	Cases remaining from previous year . . . . .	289
	New cases commenced during year . . . . .	73
	Cases completed during year . . . . .	41
	Cases discontinued during year . . . . .	7
	Number of removable appliances fitted . . . . .	128
	Number of fixed appliances fitted . . . . .	6
	Pupils referred to hospital consultant . . . . .	4
19.	Prosthetics :—	
	Number of pupils supplied with full upper or full lower denture . . . . .	—
	Number of pupils supplied with partial denture . . . . .	7

**TABLE VI**  
**Audiometry**

	<i>Routine Examinations</i>	<i>Retests and Specials</i>	<i>Total</i>
(1) Number of children tested . . . . .	888	132	1,020
(2) Number of children who failed test . . . . .	58	48	106
(3) Result of investigations by School Medical Officers :—			
(a) No significant hearing loss . . . . .	13	19	32
(b) No significant hearing loss but child appears to be mentally retarded	—	—	—
Deafness due to :—			
(c) catarrhal conditions . . . . .	23	9	32
(d) old otitis media . . . . .	10	4	14
(e) injury . . . . .	—	—	—
(f) other cause . . . . .	9	4	13
(g) undetermined causes . . . . .	3	10	13
(h) untraced or left the district . . . . .	—	1	1
(i) already supplied with hearing aids . . . . .	—	—	—
(j) investigations remaining to be carried out	—	1	1
	58	48	106
(4) Recommendations :—			
(a) No action required . . . . .	10	12	22
(b) For observation only . . . . .	26	11	37
(c) Referred to Audiology Clinic . . . . .	12	15	27
(d) Referred to General Practitioner . . . . .	6	2	8
(e) Referred to Ear, Nose and Throat Consultant	4	3	7
(f) Special position in Class . . . . .	3	5	8
(g) Hearing Aid and supervision by Teacher of Deaf	—	—	—



TABLE VII

## Notification of Communicable Diseases by Head Teachers during 1968

(a) *Infectious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Infection at Home</i>	<i>Total Exclusions</i>
Smallpox . . . . .	—	—	—	—
Diphtheria . . . . .	—	—	—	—
Scarlet Fever . . . . .	8	—	—	8
Enteric Fever . . . . .	—	—	—	—
Measles . . . . .	21	—	—	21
Whooping Cough . . . . .	10	1	—	11
German Measles . . . . .	281	—	—	281
Chickenpox . . . . .	166	—	—	166
Mumps . . . . .	76	—	—	76
Jaundice . . . . .	—	—	—	—
Other . . . . .	9	—	—	9
Totals . . . . .	571	1	—	572

(b) *Contagious Diseases*

<i>Disease</i>	<i>Suffering</i>	<i>Excluded on Suspicion</i>	<i>Total Exclusions</i>
Ringworm . . . . .	2	—	2
Impetigo . . . . .	—	—	—
Scabies . . . . .	4	—	4
Other . . . . .	19	—	19
Totals . . . . .	25	—	25



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