11

BOROUGH OF GILLINGHAM

THE HEALTH

OF

GILLINGHAM

IN

1971

BOROUGH OF GILLINGHAM

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1971

HELEN E. MAIR, M.B., Ch.B., D.P.H.

Health Department,
Municipal Buildings,
Gillingham, Kent.

Telephone : Medway OME 4 50021

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October 1972.

To the Mayor, Aldermen and Councillors of the Borough of Gillingham.

1971 came and went with little more than a nod in the direction of the new Social Services Department in Kent and the establishment of a social service area of Gillingham. Throughout the year, although delegation of the welfare section of the Health & Welfare services of the borough were revoked in October 1971, the department has continued to be responsible for the home help, mental health and welfare section of the new Social Services Department while the old Children's Department with the newly appointed Area Director of Social Services for Gillingham has remained based in Chatham.

So that the future health and social services in Gillingham do not suffer unduly from the split of social work and health functions it is essential that a continuity of care be maintained until the new department can function as an integrated social work department as conceived by the Seebohm Committee and the Social Services Act 1970.

We welcome the new Area Director of Social Services for Gillingham and hope that his present preoccupation with the child care services will soon be lessened to enable the full range of social services to be brought together under his direction and increasing staff and time be made available within the Social Services Department for the after care of the mentally ill, the domiciliary services for the handicapped and the elderly. At the end of 1971 we see little hope of a rosy future and still a long struggle ahead to staff and equip a new office and department in the town.

It is even more essential at the birth of a new service for the old responsibilities to be continued and the new department supported and helped, and I hope that we shall not be thought to have closed an old door before the new one had opened - the phrase is apt because the political lobbying that went before the implementation of the Social Services Act maintained that the new departments thus established would be the "one door" through which the public could go to receive support, advice and help on all aspects of family life from the cradle to

the grave. So far, at the end of 1971, we have to report only an increase in the number of doors, and it is essential to refute the concept that as social work leaves the direct executive control of the Medical Officer of Health, the Health Department loses interest or involvement in the care of the mentally ill, the chronic sick, the handicapped or the elderly. It is, and will remain, the responsibility of the Medical Officer of Health and his successor in the future unified National Health Service to play an advisory role in all these fields.

In the report I give the figures of the year of the work undertaken by the social workers in the departments which will finally be passed to the Social Services Department in Kent in April 1972.

The statistics for the town are little changed except in the figures for infant mortality and I would like to draw your attention to the total number of stillbirths and neonatal deaths which are lower than have previously been recorded and, better still, only one death occurred in infants between 1 month and 1 year when for the past ten years the figure has ranged between 7 - 15 and these are recorded against a rise of 70 in the total number of live births in the borough. The overall mortality rates per 1,000 births is therefore the lowest on record with an infant mortality rate of only 9 in 1,000 births. The national infant mortality rate is 18 per 1000 births.

It would be nice to think that we could find cause and effect in these figures but whether we can or not it is good to report that the close liaison that has been developed over the last few years between the hospital maternity and paediatric services and the midwifery and child health services in the community is increasing showing such profitable results.

There is so little to comment on in the figures of infectious disease which remain nominal only in all but measles where there were 166 cases notified during the year, all of which are now preventable by immunisation procedures and continued emphasis must be placed on the complete protection of all children against this unnecessary disease which in itself and its complications can cause long lasting handicapping effects on children. However, even this figure is a great improvement on previous years, showing a sixfold decrease.

The environmental health services, under the diligent care of the Chief Public Health Inspector, have continued to expand particularly in giving new life to the older parts of the town.

1971 was a year in which the Public Health Inspectors' section gave as much time as possible to the improvement of the older houses in the borough, but when the next area now under survey is completed there will still be 900 houses in the older areas of the town which must be surveyed and inspected in detail before it is possible to continue the policy of the Council to improve the older houses and to ensure the prescribed life of thirty years for many of these and thus to enable the grant procedure to continue and new Improvement Areas to be determined.

It is necessary to report an unsatisfactory state of food hygiene control in the town in 1971, during which only 417 inspections of food premises were possible, and to maintain food hygiene standards a figure of 1600 should be attainable, and it will be given first priority by an increased public health inspectorate in 1972.

The delegated child health and school health services must increasingly be seen as a unified service which is responsible for the child from birth to school leaving and, hopefully, in a future expanded service to the young adult. It is no longer the routine advisory service that it once was, but is becoming a highly developed speciality and, if closely allied to the curative role of the hospital paediatrician, it can give continuing advice and support to the handicapped child and family in the home and in the school. As we evolve the new concepts of developmental paediatrics and behavioural problems of the growing child and put them into practice in the child and school health clinics, so we are providing a new and strong service allied to that of the diagnostic and curative aspects of hospital medicine and in constant contact with the family doctor service.

This new and increasing contact with the family practitioner is strengthened by the attachment of all the nursing services to the doctors in the town, starting as we did with the district nurses and then the midwives, we are now able to provide attachment or close liaison of all health visiting staff to the practices and we hope to see a fruitful and expanding partnership develop in the next few years, particularly in the domiciliary care of the young and the elderly.

In 1971 work of the medical officer in department responsible for domiciliary care of the old people threw more light on the problems that are still not being tackled by any of the present services. It is easier to identify needs than to meet them, but without this basic knowledge we cannot make provisions and plans for the future health, social and local authority services.

As we look to a future unified health service outside, but allied to, local government with its continuing responsibility for social services and environmental

health, we must forge strong and effective links that will stand the testing time ahead and still continue to provide the services that the public need, and I would like to thank the Health Committee and the staff in the department for their continuing support and help.

PUBLIC HEALTH, SCHOOL HEALTH SERVICE, AND COUNTY COUNCIL DELEGATED HEALTH SERVICES STAFF

Medical Officer of Health

Helen E. Mair, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health

B.H.Gooch, M.A., M.B., B.Ch., L.M.S.S.A., D.P.H.
(Commenced 1.4.71)

Senior Medical Officer in Department

L.M.Corall, M.B., B.S., D.P.H.

Medical Officers in Department

F.S.Linton, M.B., B.S., D.G.O., L.M., D.Obst., R.C.O.G.M.M.S.A.
L.M.Hogg, M.B.E., M.B., B.S.
J.B.Griffiths, M.B., Ch.B.

Ophthalmologist : (S.H.S.)

K.N.Thomas, M.B., Ch.B., B.A.O., D.O.(part time)

Dental Surgeons (S.H.S)

E.D.Gimson, B.D.S.,
K.Bharrucha, B.D.S. (part time)
S.E.Brown, L.D.S., (part time)

Dental Surgery Assistants (S.H.S.)

A.E.Turner
S. Gillespie (resigned 31.3.71)
L. Stone (commenced 29.3.71)

Chief Public Health Inspector :

K.E.Sewell, M.R.S.H., M.I.P.H.E., M.A.P.H.I.(a,c,d,e)

Deputy Chief Public Health Inspector

N. Smith, M.A.P.H.I (a,c,d,e) (died 27.8.71)

Public Health Inspectors:

P.J.Brewer, M.A.P.H.I. (a,c,d)
B.J.Naylor, (a,c)
R. Nethercott (b)
M.J.Rivers, M.A.P.H.I. (b)

a. Public Health Inspectors Certificate
b. Public Health Inspectors Diploma
c. Meat and Other Foods Certificate
d. Smoke Inspectors Certificate
e. Diploma in Sanitary Science

Student Public Health Inspector:

R.M.Manktelow

Technical Assistants:

R. Taylor
B.C.Woodward

Area Superintendent Health Visitor:

M.M.Byrne, S.R.N., S.C.M., Health Visitor's Certificate

Health Visitors (D.H.S/S.H.S):

D.M.Bradley, S.R.N., S.C.M., Health Visitor's Certificate (commenced 20.9.71)
W.Clements, S.R.N., S.C.M., Health Visitor's Cert.(resigned 23.6.71)
R. Cowling, S.R.N., S.C.M., Health Visitor's Certificate
L.J.Hewett, S.R.N., S.C.M., Health Visitor's Cert. (commenced 20.9.71)
J.A.Hewitt, S.R.N., S.C.M., Health Visitor's Certificate (part time) (resigned 29.10.71)
C.H.Hicks, S.R.N., S.C.M., Health Visitor's Cert.(commenced 28.6.71)
M. Lyons, S.R.N., S.C.M., Health Visitor's Certificate
J. Manson, S.R.N., S.C.M., Health Visitor's Certificate
J.M.Oliver, S.R.N., S.C.M., Health Visitor's Cert.(commenced 20.9.71)
V. Porter, S.R.N., S.C.M., Health Visitor's Cert.(resigned 1.7.71)
D.G.Purt, S.R.N., S.C.M., Health Visitor's Certificate
J. Reddington, S.R.N., S.C.M., Health Visitor's Cert.(commenced 19.4.71)

R.M.Tatham, S.R.N., S.C.M., Health Visitor's Certificate
F.M.Tomlin, S.R.N., S.C.M., Health Visitor's Certificate (part time) (resigned 29 10.71)
E.C.Tomlinson, S.R.N., S.C.M., Health Visitor's Cert.(resigned 26.2.71)
E.M.Turner, S.R.N., S.C.M., Health Visitor's Certificate
M. Wignall, S.R.N., S.C.M , Health Visitor's Certificate

Midwives: (D.H.S)

B. Bassadona, S.R.N , S.C.M.,
M. Clayton, S.R.N., S.C.M.,
S. Craddock, S.R.N., S.C.M. (resigned 10.9.71)
D. Delisser, S.R.N., S.C.M., (commenced 24.5.71)
L.A.Farrar, S.R.N., S.C.M., (commenced 13.9.71)
B.E.Foote, S.R.N., S.C.M.,
J.C.Hammond, S.R.N., S.C.M., (resigned 30.4.71)
K. Lowry, S.C.M.,G.M.McGregor, S.R.N., S.C.M.
B. Peters, S.R.N., S.C.M.,
M.M.Shorey, S.R.N., S.C.M.,
S.I.Shorey, S.E.N., S.C.M.
V.C.Sullivan, S.R.N., S.C.M. (commenced 1.5.71)
M.E.White, S.C.M.,

District Nurses:

E.C.Bassant, S.R.N. (commenced 5.4.71)
K. Burton, S.R.N., S.C.M.,
E.M.Chambers, S.R.N.,
J.P.Davis, S.R.N.
M.M.Ellis, S.R.N.,
O. Fenske, S.R.N.,
A.J.A.Finnis, S.R.N. (resigned 26.3.71)
E.J.Flynn, S.R.N.
B.D.Frapple, S.E.N.
J.M.Howard, S.R.N. (temp. commenced 8.11.71)
E.M.Masson, S.R.N.
M.H.Rayner, S.R.N., S.C.M.
S.R.Stenhouse, S.R.N.,
K.T.Stoves, S.R.N.,
M. Turpin, S.R.N.
K. Wales, S.R.N., S.C.M.

District Nurses (contd.)

I. Read, S.R.N.,
E.B.Willoughby, S.R.N.,

Principal Welfare Officer :

P.E.King

Welfare Officers :

J.S.Terry
R.A.Pearson
N.A.Schwartz (temp.)(resigned 30.6.71)

Craft Instructors :

M.H.Lipscombe
C.J.Daws (part time)

Social Welfare Officer for the Blind :

A.J.Smith

Welfare Officer for the Deaf :

A.B.Masson

Chiropodist :

M.Miller, S.E.N.,S.R.Ch., L.Ch.,

Home Help Organisers :

M. Sharp
M.Higgins

Old People's Liaison Officer :

F.S.Booker

Chief Administrative Assistant :

S.Pett, T.D.

Senior Administrative Assistant :

M.M.McKeen

Clerks:

R.C.Thomas (S.H.S.)
B. Taylor
A.D.Frost
P. Rome (D.H.S.)
A.L.McCullock
A. Wyatt (D.H.S.)
M.E.Drury (D.H.S.)
V. Buttfield (D.H.S.)
J.O'Connor (D.H.S.)
L.S.Palmer
J. Loft (D.H.S.)
J. Bunyan
N. Pett (clinic clerk - D.H.S.)
B. Clarke (clinic clerk - D.H.S.)

M.O.H. Secretary :

V. Mortlock

Shorthand typist :

P.J.Deacon

N.B. D.H.S. - Delegated Health Service
S.H.S. - School Health Service

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area in acres (land, inland water and foreshore)..	11,123
Rateable value (April 1971)	£3,202,097
The sum represented by a penny rate (1971/72)	£ 31,680

In 1971/72 the total rate was 72.2p and the water rate 8p in the £

Extracts from vital statistics:

Total population (Registrar-General)	88,480

Live births:

Number of live births	1,760
Rate per 1,000 of the estimated civilian population ..	19.9
Illegitimate live births per cent of total live births	5

Stillbirths:

Number of stillbirths	18
Rate per 1,000 total live and stillbirths	10
Total live and stillbirths	1,778
Infant deaths (deaths under 1 year)	15

Infant Mortality Rates:

Total infant deaths per 1,000 total live births	9
Legitimate infant deaths per 1,000 legitimate live births	8
Illegitimate infant deaths per 1,000 illegitimate live births ..	21

Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births)	8
Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	7
Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths ..	17

Maternal Mortality (including abortion):

Number of deaths	-
Rate per 1,000 total live and stillbirths	0.0

Deaths (all causes):

Rate per 1,000 of the estimated civilian population 9.4

	Males			Females		
	Total	Legit.	Illegit.	Total	Legit.	Illegit.
Live births	895	847	48	865	817	48
Stillbirths	8	8	-	10	10	-
Deaths of Infants						
Under 1 year of age ..	10	9	1	5	4	1
Under 4 weeks of age ..	9	8	1	5	4	1
Under 1 week of age ..	8	7	1	4	4	-

Analysis of Infant Deaths during 1971

Cause of Death	Age at Death	
	Total under 1 month	Total under 1 year
Congenital malformations	2	3
Meningitis	1	1
Birth injury, difficult labour, etc. ..	5	5
Other respiratory diseases	1	1
Other causes	5	5
Total	14	15

Deaths of infants under 1 year numbered 15 which represents an infant mortality rate of 9 per 1,000 live births.

The rate for England and Wales was 18 per 1,000 relative live births.

Death rate of infants under 1 year per 1,000 live births for Gillingham from 1967 - 71 :

	No.	Rate per 1,000	England and Wales Rate per 1,000
1967	21	13	18
1968	29	18	18
1969	35	21	18
1970	31	18	18
1971	15	9	18

Maternal mortality :

There were no deaths associated with pregnancy.

Causes of deaths for the year 1971 as provided by the Registrar General:

Causes of Death	Male	Female	Total
Enteritis and other Diarrhoeal diseases	-	1	1
Tuberculosis of Respiratory System	2	-	2
Other Tuberculosis	1	-	1
Malignant neoplasm, buccal cavity, etc. ..	-	1	1
Malignant neoplasm, oesophagus	4	2	6
Malignant neoplasm, stomach..	12	6	18
Malignant neoplasm, intestine..	15	13	28
Malignant neoplasm, larynx	1	-	1
Malignant neoplasm, lung, bronchus	36	9	45
Malignant neoplasm, breast	-	13	13
Malignant neoplasm, uterus	-	2	2
Malignant neoplasm, prostate..	11	-	11
Leukaemia	4	4	8
Other malignant neoplasms	25	19	44
Benign and unspecified neoplasms	1	1	2
Diabetes Mellitus	2	7	9
Other endocrine etc. diseases	-	1	1
Anaemias	1	-	1
Meningitis	1	1	2
Other diseases of Nervous system	3	3	6
Chronic rheumatic heart disease	5	5	10
Hypertensive disease	12	17	29
Ischaemic heart disease	129	77	206
Other forms of heart disease	12	21	33
Cerebrovascular disease	43	69	112
Other diseases of circulatory system	12	19	31
Influenza	1	1	2
Pneumonia	26	31	57
Bronchitis and Emphysema	39	13	52
Asthma	1	-	1
Other diseases of respiratory system	4	2	6
Peptic ulcer..	8	-	8
Intestinal obstruction and hernia	4	4	8
Cirrhosis of Liver	1	1	2
Other diseases of digestive system	3	5	8
Nephritis and nephrosis	3	2	5

Causes of Death	Male	Female	Total
Hyperplasia of Prostate	2	-	2
Other Diseases, Genito-urinary System	3	7	10
Diseases of Skin, subcutaneous tissue	1	-	1
Diseases of Musculo-Skeletal System	1	1	2
Congenital anomalies	2	2	4
Birth injury, Difficult labour, etc.	3	2	5
Other causes of Peri natal Mortality	3	1	4
Symptoms and ill defined conditions	1	3	4
Motor vehicle Accidents	12	3	15
All other Accidents	6	1	7
Suicide and Self-Inflicted Injuries	6	2	8
All other External Causes	1	-	1
Total All Causes	463	371	834

Natural Increase of Population:

Year	Natural Increase of Population
1962	528
1963	549
1964	651
1965	661
1966	757
1967	751
1968	697
1969	829
1970	819
1971	926

Cancer:

	Cancer Death Rate	Percentage of Total deaths
1962	2.2	19.6
1963	1.9	16.7
1964	2.1	20.0
1965	2.0	18.6
1966	2.2	22.5
1967	2.1	21.3
1968	1.9	18.6
1969	1.7	17.5
1970	2.0	20.9
1971	2.0	21.5

Violence:

Deaths from motor vehicle and road accidents have doubled this year from 7 in 1970 to 15 this year- 8 deaths were due to suicide and 7 from all other accidents

ANALYSIS OF BIRTHS AND INFANT DEATHS FOR THE YEARS 1962 TO 1971

	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Number of stillbirths	26	35	19	17	25	21	23	24	24	18
Number of neo-natal deaths	17	16	16	18	14	13	20	23	24	14
Total number of stillbirths and neo-natal deaths	43	51	35	35	39	34	43	47	48	32
Number of deaths of infants 1 to 12 months of age	10	15	10	10	8	8	9	12	7	1
Number of live births	1363	1425	1476	1537	1580	1563	1630	1702	1696	1760
Number of stillbirths	26	35	19	17	25	21	23	24	24	18
Total live and stillbirths	1389	1460	1495	1554	1605	1584	1653	1726	1720	1778

MORTALITY RATES CALCULATED PER 1,000 BIRTHS

Stillbirths	19	24	13	11	15	13	14	14	14	10
Neo-natal deaths	12	11	11	12	9	8	12	14	14	8
Perinatal deaths	30	33	21	22	24	19	10	11	11	7
Deaths of infants 1 to 12 months of age	7	10	7	6	5	5	5	7	4	0.6
Stillbirths and all deaths up to 1 yr.	39	45	30	29	29	27	31	35	32	19
Infant mortality per 1,000 births	20	22	18	18	14	13	18	21	18	9

Prevalence of, and Control over Infectious and Other Diseases

Table showing:- (a) The distribution in age groups of infectious disease cases notified during 1971

(b) The number removed to hospital

Notifiable Disease	CASES NOTIFIED (Diagnosis Corrected)							Removed to Hospital
	Years							
	All Ages	Under 5	5 - 14	15 - 44	45 - 64	65 & Over	Age Unknown	
Food Poisoning	2	1	-	1	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-
Infective Jaundice	4	-	-	1	2	-	1	-
Typhoid Fever	1	-	-	1	-	-	-	1

Table showing:- (a) The distribution in age groups of infectious disease cases notified during 1971.
(b) The number removed to hospital.

Notifiable Disease	CASES NOTIFIED (Diagnosis Corrected)								Age Unknown	Removed to Hospital
	Years									
	All Ages	Under 1	1-2	3-4	5-9	10-14	15-24	25 and Over		
Scarlet fever	16	-	-	2	7	5	2	-	-	-
Whooping cough	28	5	3	10	8	2	-	-	-	-
Measles	166	12	30	46	68	3	5	-	2	-
Acute meningitis ..	-	-	-	-	-	-	-	-	-	-

Particulars of patients from the Gillingham area dealt with at the Chest Clinic during 1971.

(These figures were kindly supplied by Dr. G. I. Rees-Jones, Consultant Chest Physician).

	Adults		Children		Total	
	M.	F.	M.	F.	M.	F.
Tuberculosis:						
Pulmonary	1	7	1	1	2	8
Non-pulmonary	-	-	-	-	-	-
Total	1	7	1	1	2	8

Total attendances numbered 1264

Public Health (Tuberculosis) Regulations, 1930

	Pulmonary	Non-Pulmonary	Total
Number on Register at 1st January, 1971	351	77	428
Number on Register at 31st December, 1971	335	77	412

Notifications:

Table compiled from local records, giving details with regard to sex, age, etc. of notified new cases during 1971.

Age Periods	New Cases			
	Respiratory		Non-Respiratory	
	M	F	M	F
Under 5 years	-	-	-	-
5 - 14 years	1	1	-	-
15 - 24 years	1	-	-	-
25 - 44 years	3	3	1	-
45 - 64 years	2	3	-	-
65 and over	2	1	-	-
Total	9	8	1	-

Tuberculosis Death Rate

The following table is inserted for the purposes of comparison:

Year	Death Rates per 1,000 of Population		
	All Forms	Pulmonary	Non-Pulmonary
1962	0.05	0.04	0.01
1963	0.08	0.05	0.03
1964	0.01	0.00	0.01
1965	0.11	0.11	0.00
1966	0.05	0.05	0.00
1967	0.01	0.01	0.00
1968	0.04	0.04	0.00
1969	0.01	0.01	0.00
1970	0.01	0.01	0.00
1971	0.03	0.02	0.01

Venereal Diseases

I am indebted to Dr. C .D.Routh, Director of the Medway and Gravesend Hospital Management Committee's Special Clinic in Rochester, for the following figures:

New Patients - Gillingham

Syphilis	1
Gonorrhoea	67
Other Genital Conditions	76
Other Conditions	54
Total	198

Nursing Homes - Public Health Act, 1936.

There was 1 nursing home on the register at the end of the year, which provided 32 beds for aged persons.

National Assistance Act, 1948 (Section 47)

During the year there were no persons removed to hospital under this section of the Act.

Venereal Diseases

I am indebted to Dr. C. D. Routh, Director of the Medway and Gravesend Hospital Management Committee's Special Clinic in Rochester, for the following figures:

	New Cases			
	New Patients - Gillingham			
	Respiratory		Non-Respiratory	
	M	F	M	F
Syphilis	-	-	-	-
Gonorrhoea	-	-	-	-
Other Genital Conditions	1	-	-	-
Other Conditions	1	-	-	-
Total	3	3	1	-
	3	3	-	-
	2	1	-	-

Nursing Homes - Public Health Act, 1936.

There was 1 nursing home on the register at the end of the year, which provided 32 beds for aged persons.

National Assistance Act, 1948 (Section 47)

During the year there were no persons removed to hospital under this section of the Act.

Age Periods		
Under 5 years	1	
5 - 14 years	67	
15 - 24 years	76	
25 - 44 years	54	
45 - 64 years		
65 and over		
Total	198	

Environmental Health Services

ENVIRONMENTAL HEALTH SERVICES

The establishment of the public health inspectorate during the year was inadequate to deal effectively with the duties imposed on the Council and the inspectors involved. Over a quarter of the time of the four inspectors in post was spent on housing improvement with the result that it was only possible to undertake a minimum of routine inspections of food premises and factories, and only a small area could be surveyed by detailed inspection with regard to future improvement. The vacancy caused by the death of Mr. N.Smith in August was not filled during the year, and at the end of the year a number of grant enquiries and applications were outstanding.

Urgent matters relating to infectious diseases, food complaints, noise complaints and, in fact, all urgent items were dealt with promptly, but the standard of the environmental health service is set by equally important routine inspections in the fields of food hygiene, general housing inspections and factory inspections.

PUBLIC HEALTH INSPECTION OF THE DISTRICT

Purpose and Number of Visits made during the Year

Housing:

General Housing Purposes	1951
Houses in multiple occupation	48
Overcrowding	24
Improvement Grants	3529

Food Control:

Food Hygiene Requirements	417
Food Sampling	116
Unsound Food	193
Food Complaints	98
Milk	16
Ice Cream	32

Atmospheric Pollution

Smoke Control	108
Water	79
Offices, shops etc.	673
Factories	18
Consumer protection	24
Rodent and Pest control	999
Drainage etc.	2001
Noise	285
Infectious diseases	256
Public Health nuisances	1447
Public Conveniences	120
Pet Animals	30
Scrap Metal Dealers	4
Caravans	61
Riding Establishments, Piggeries etc.	18
Diseases of Animals	27
Number of Complaints investigated	2845
Miscellaneous	50

Notices served during the year:

Informal:

Housing	61

Formal:

Housing Acts	6
Public Health Acts	123
Gillingham Corporation Act	18

HOUSING

The preliminary survey of the housing stock of the borough made in 1967 revealed the need for detailed house to house inspection of the older areas of the town and surveys of the worst areas were made in 1967 and 1968.

The Council delegated to the Health Committee all duties under the Housing Act 1969, and the administration of improvement grants passed to the Health Department on 1st January 1970.

The work of the department in relation to the older houses in the private section falls conveniently under four headings although all four are in varying degrees related to each other, these are improvement grants, area surveys, general improvement areas and slum clearance.

Improvement Grants

129 applications for standard grants and 168 for improvement (discretionary) grants, a total of 297, were received during the year; this total would have been greater, probably in the region of 360, had it been possible to deal with the large number of grant enquiries that were outstanding during the last quarter of the year. The feature of the applications in 1971 as compared with 1970 was the marked increase in discretionary grants for improvements to a higher standard with a reduction in standard grants. This followed the national pattern.

I list below details of recent years:

	Standard	Discretionary	Total
1967 (completed)	22	34	56
1968 (completed)	25	26	51
1969 (completed)	37	30	67
1970 (applications)	162	120	282
1970 (completed)	126	95	221
1971 (applications)	129	168	297

Analysis of Grant Applications for 1970:

	Standard	Discretionary	Total
Number of Applications	162	120	282
Improvements completed	126	95	221
Grant refused	-	1	1
Cancelled by Applicant	7	12	19
Time extended (awaiting completion)	2	7	9
Time expired	17	4	21
Awaiting approval (requirements not complied with)	10	1	11

A number of the grant applications made in 1970 were associated with applications by landlords for provisional qualification certificates, in some cases with tenants declining to have the improvements made, and the grant approval expired after one year.

Area Surveys.

A detailed house to house inspection of one hundred and ninety dwellings in the Fox Street Area commenced and was almost completed at the end of the year.

When this survey is completed there will still be over nine hundred houses in the older areas on the town in need of urgent survey to determine their state of repair and the provision of amenities. It seems probable that most of these older houses will be worth improving but until these areas have been surveyed in detail it is not possible for grant purposes to certify that the houses will provide suitable housing accommodation for the prescribed periods of thirty years for a discretionary grant and fifteen years for a standard grant.

General Improvement Areas.

The St. Mary's area consisting of 151 houses and 9 shops with living accommodation was surveyed in detail in 1969. A public meeting was held in June 1970 to discuss the proposed general improvement area following which a questionnaire asking for comments on a number of proposals for environmental improvement prepared by the Borough Architect was delivered to all residents. The Council declared the St. Mary's General Improvement Area on 22nd September 1970 following a recommendation from the Health Committee. The Department of the Environment made the order stopping up the roads and also approved the expenditure on the environmental improvements towards the end of 1971.

I reported jointly with the Borough Architect to the Health Committee in November 1971 recommending that consideration be given to future areas. The area to the north of and adjoining the St. Mary's area being the most suitable for both housing improvement and environmental improvement, the area contains approximately 550 dwellings and the physical layout makes planning the area comprehensively essential. We considered that future areas should contain 250 - 300 houses and recommended that half the area be dealt with in 1972/73 and the remainder 1973/74. The Health Committee recommended that the necessary surveys be undertaken. I hope this will commence during 1972.

Slum Clearance

During the year I represented 2 small clearance areas, the Platform Cottages Clearance Order containing 7 houses was subsequently confirmed by the Secretary of State for the Environment and the Council resolved to make the Nile Cottages Clearance Order relating to a terrace of 4 houses.

General

Representations were made in respect of 18 individual unfit houses or parts of houses, 2 demolition orders and 13 closing orders were made. 7 closing orders were determined after the houses had been made fit for human habitation.

29 applications were received during the year for qualification certificates or provisional qualification certificates - all the dwellings were inspected, some several times. 30 qualification certificates and 13 provisional certificates were issued in accordance with the provisions of Part III of the Housing Act 1969.

Houses in Multiple Occupation

48 inspections were made during the year and any necessary improvements we obtained by informal action. There were no cases where the conditions were so bad as to require the service of a management order, a direction order or a control order.

Overcrowding

15 complaints were received, all were fully investigated and in 3 cases overcrowding was confirmed and the necessary steps were taken to abate the overcrowding.

Repairs and General Housing Matters

Houses needing repairs were mainly discovered as a result of the investigation of complaints but in many cases the need for repairs was found during an inspection made following an application for an improvement grant or for a qualification certificate or during a visit for some other purpose.

A summary of the housing work carried out during the year is given as follows:

Inspection of Dwelling houses during the year

Number of houses inspected for housing defects ..	236
Number of inspections made for the purpose	1,451
Number found to be unfit for habitation	15
Number found not to be in all respects reasonably fit for habitation	146

Remedy of Defects by informal action:

Number of houses rendered fit as a consequence of informal action	1

Action under Statutory Powers:

(a) under the Public Health Acts

Number of houses in respect of which notices were served 123

Number of houses in which defects were remedied after service of formal notice:

By owners	40
By local authority	83

(b) under the Housing Acts:

Number of demolition orders made	2
Number of closing orders made	13
Houses demolished as a result of formal action ..	45
Closing orders determined	7

Common Lodging Houses

There are no common lodging houses in the borough.

CONTROL OF FOOD AND FOOD PREMISES

Food Hygiene

There are 592 premises in the borough from which food is sold classified in the following main categories:

Type of Business	Number of Premises	Inspections Made
Public Houses and Off Licences	102	34
Cafes, Restaurants	35	115
Fishmongers	29	14
Baker/Bakehouses	19	15
Butchers	45	50
Grocers	167	138
Fruiterers, etc.	45	19
Canteens	39	7
Confectioners and Tobacconists	91	25
Chemists	20	-

I regret to report that it was possible for only 417 inspections of food premises to be made during the year; this is quite inadequate. To improve and maintain the standard of food hygiene in the borough it is necessary for about 1600 inspections to be made annually.

The following number of inspections were made in the years 1966 - 1970:

1970	708
1969	1047
1968	664
1967	502
1966	630

There are 97 premises in the borough registered under the Food and Drugs Act 1955, Section 16, for the manufacture of sausages or potted, pressed, pickled or preserved food.

Visits were also made to various fairs, fetes and sports meetings to ensure that the catering arrangements were satisfactory from the hygiene point of view.

Food and Drugs - Sampling, etc.

113 samples of various foods and 2 samples of medicine and drugs were taken and submitted to the public analyst for examination.

The main classification of the samples with results is given as follows:-

	Total	Unsatis-factory		Total	Unsatis-factory
Dairy products	11	-	Drugs	2	-
Fruit & Fruit products	17	-	Meat products	20	1
Cereals & Cereal products	9	-	Vegetable products	29	1
Sugar products	9	-	Soft drinks	5	-
Fermentation products	2	-	Fish products	7	-
Coffee, Cocoa, Tea	3	-	Spices	1	-

The following samples were found to be unsatisfactory:

(1) Beef sausages contained permitted preservative without the required declaration. The retailer was advised and a suitable notice was provided in the shop.

(2) Tomato paste the label of which did not include an appropriate designation of the food as required by the Labelling of Food Regulations. The importer was informed and the label will be amended.

Ice Cream

There were 7 manufacturers and 224 retailers of ice cream on the register at the end of the year and 32 visits were made specifically in connection with the manufacture, storage and sale of this product. This is in addition to general inspections of food premises made under the Food Hygiene (General) Regulations 1960 and 1970.

32 samples were taken for bacteriological examination, the results were as follows:-

Grade 1	= 25	Grade 3	= Nil
Grade 2	= 7	Grade 4	= Nil

Food Poisoning and Associated Infections

2 cases of food poisoning were notified early in the year and 3 further cases were ascertained during the investigation, 4 of these cases arose directly from the party in a restaurant referred to in my 1970 annual report; the other, an infant, was a secondary case, her parents having attended the party.

Food Complaints

There was a slight decrease in the number of food complaints received during the year, 39 compared with 42 in 1970.

In 5 cases the food was found to be satisfactory, the remaining 34 were all fully investigated and the 3 detailed below were of a sufficiently serious nature to warrant consideration by the Health Committee.

(1) Stale and mouldy portion of veal, ham and egg pie, the retailer was fined £15 with £8 costs.

(2) Insects in a box of instant baby food, the retailer was found not guilty.

(3) Cake containing a bolt, the manufacturer was fined £20.

Milk

All the milk distributed in Gillingham is produced and bottled outside the borough. There are 3 depots and 153 other distributors such as retail shops.

At the end of the year 316 licences issued under the Milk (Special Designation) Regulations 1963/1965 were in operation.

Pasteurised milk	135
Sterilised milk	117
Ultra heat treated milk	64

16 samples of pasteurised milk supplied to the public from machines were taken and submitted for bacteriological examination; 2 failed the methylene blue test, following which the vending machine was overhauled.

Milk supplies - Brucella Abortus

No premises in the borough are licensed under the Milk (Special Designation) Regulations 1963 to sell untreated milk. No untreated milk was sold in the borough during the year, and no samples of this type of milk were taken.

Poultry Processing

There are no poultry processing establishments in the borough.

Unsound Food

During the year 5 tons of various foods were inspected and found to be unfit for human consumption.

ATMOSPHERIC POLLUTION

The Council has already agreed in principle to include the whole of the borough in smoke control areas and the provisional date for completing the programme was 1970. The programme has been held up at various times for several reasons such as the shortage of suitable solid smokeless fuels, public inquiries on areas 4 and 5 and financial restrictions.

The Council were advised that no assurances could be given regarding adequate supplies of solid smokeless fuel during the winter 1970-71, and to avoid hardship to residents application for suspension of all 5 Smoke Control Areas was made to the Department of the Environment. Similar applications were made by the City of Rochester and the Borough of Chatham.

The Clean Air (Suspension of Smoke Control - Borough of Gillingham) Order 1970 came into operation on the 23rd December 1970 and suspended all 5 orders until the 30th April 1971.

The Department of the Environment announced during the summer that the construction of additional plant had assured adequate supplies of solid smokeless fuels for the future.

The progress made to date is shown below:

Area No.	Acres	Houses	Date of Operation
1	812	6040	1st November 1962
2	1946	1814	1st November 1963
3	1002	1741	1st November 1965
4	292	1477	1st July 1967
5	4261	2067	1st July 1970

108 visits were made during the year for the inspection of industrial installations following complaints and for routine observations in smoke control areas.

5 new furnace and boiler installations were given approval during the year under the Clean Air Act 1956, Section 3.

SHOPS, OFFICES, FACTORIES

Offices, Shops & Railway Premises Act 1963

There were 509 premises on the register at the end of 1971. Inspections are made for the registration of new premises, registration following changes in occupation, routine re-inspections and accident investigation. Contraventions were brought to the attention of occupiers and owners and co-operation was again very good; in no case was it necessary to institute legal proceedings and no exemption was issued. A total of 673 inspections and visits were made during the year.

Registrations and General Inspections

Class of Premises	Number registered during the year	Total No. registered at end of year	No. Receiving general inspection
Offices	14	139	87
Retail Shops	16	334	246
Wholesale shops, Warehouses	1	7	5
Catering establishments	4	28	24
Fuel Storage premises	1	1	1
Totals	36	509	363

nalysis by Workplace of Persons Employed in Registered Premises at the end of the ear:

Class of Workplace	No. of Persons Employed
Offices	962
Retail Shops	1852
Wholesale shops, Warehouses	161
Catering establishments, Canteens	345
Fuel Storage Depots	8
Total	3328
Total Males	1102
Total Females	2226

ccidents in Offices, Shops, etc.

Three accidents were reported during 1971, the figures for the previous hree years being: 1970 - 8; 1969 - 7; 1968 - 10.

Two cases warranted detailed investigation, and in one of these the fault vas considered to lie with the manufacturers of a particular machine. This was aken up with the H. M. Factory Inspectorate, the manufacturers, and the employers.

Summary of Accident Statistics for 1971

Type of Premises	No. of Accidents		No. investi-gated	No. due to con-traven-tion	No. fatal
	Males	Females			
Offices	-	-	-	-	-
Retail shops	1	1	1	1	-
Wholesale shops, Warehouses	1	-	1	-	-
Catering establishments, canteens	-	-	-	-	-
Fuel Depots	-	-	-	-	-
Totals	2	1	2	1	Nil

Summary of Contraventions Found

Contraventions	Offices	Shops (Retail)	Wholesale Shops and warehouses	Catering Establishments	Fuel Stores etc.	Totals
Thermometers	2	8	-	1	-	11
First-aid Requirements	9	29	-	5	-	43
Hot or Warm Water	1	7	-	-	-	8
Washbasin and sinks	-	1	-	-	-	1
Sanitary conveniences	-	-	-	-	-	-
Repairs or markings of S.C	-	3	-	-	-	3
Heating	-	4	-	-	-	4
Lighting	-	1	-	-	-	1
Ventilation	1	4	-	-	-	5
Overcrowding	-	1	-	-	-	1
Guards on machinery	-	2	-	-	-	2
Seating facilities	-	1	-	-	-	1
OSRG Notices	11	23	-	4	-	38
Handrails	-	3	-	-	-	3
Cleanliness/Redecorations	1	13	-	-	-	14
Drinking water supply	-	-	-	-	-	-
Disposal Bins	-	1	-	-	-	1
Lifts and hoists	-	1	-	-	-	1
Soap and towels	-	3	-	-	-	3
Total contraventions	25	105	-	10	-	140

Summary of Contraventions outstanding at end of Year

Contraventions	Offices	Shops (Retail)	Wholesale Shops and warehouses	Catering Establishments	Fuel Stores etc.	Totals
Thermometers	1	1	-	-	-	2
First-aid Requirements	2	9	1	-	-	12
Hot or Warm water	-	2	-	-	-	2
Washbasin and sinks	-	-	-	-	-	-
Sanitary Conveniences	-	-	-	-	-	-
Repairs or markings of S.C	1	1	-	-	-	2
Heating	-	1	-	-	-	1
Lighting	-	-	-	-	-	-
Ventilation	-	-	-	-	-	-
Overcrowding	-	-	-	-	-	-
Guards on machinery	-	-	-	-	-	-
Seating facilities	-	-	-	-	-	-
OSRG Notices	2	6	1	1	-	10
Handrails	-	1	-	-	-	1
Cleanliness/Redecorations	1	3	1	-	-	5
Drinking water supply	-	-	-	-	-	-
Disposal Bins	-	-	-	-	-	-
Lifts and hoists	-	-	-	-	-	-
Soap and towels	-	-	-	-	-	-
Total contraventions	7	24	3	1	-	35

Factories

The staffing position allowed only 18 inspections to be made during the year, compared with 28 in 1970 and 223 in 1969.

Regular routine inspections are essential if the standard is to be maintained and improved, with 213 factories on the register something in the region of 450 inspections a year are necessary.

The tables prescribed by Circular 1/72 are given below:

Prescribed Particulars on the Administration of the Factories Act, 1961

Part I of the Act

1 - Inspection for purposes of provisions as to health (including inspections made by public health inspectors)

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by local authorities	2	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the local authority	196	18	-	-
(iii) Other premises in which Section 7 is enforced by the local authority (excluding outworkers' premises)	15	-	-	-
Total	213	18	-	-

2 - Cases in which defects were found

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted.
			Referred		
	Found	Remedied	To H.M. Inspect.	By H.M. Inspect.	
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	4	3	-	-	-
(c) not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
Total	4	3	-	-	-

Outworkers

53 outworkers were on the August list as required by Section 133 of the Factories Act and all were engaged in the making of wearing apparel.

RODENT AND PEST CONTROL

Rodents

There was a major increase in the number of complaints and notifications of both rats and mice during 1971 compared with previous years as follows:-

	Rats	Mice	Total
1971	291	431	722
1970	123	184	307
1969	225	188	413
1968	229	138	367
1967	272	144	416

From 1967 to 1970 there was a decrease in the number of rat complaints and an increase in mouse complaints in 1969.

Warfarin is effective against rats, and Warfarin resistant rats have not yet been detected in the borough. The latest reports indicate that the nearest are still five miles from the southern boundary.

Warfarin resistant mice are now so widespread in the area that this rodenticide is no longer used for their control; the narcotic alphachloralose has given good results in the older parts of the town but is not really effective in centrally-heated houses where a narcotised mouse can recover at a higher temperature. Alternative baits and poisons are being used with varying results.

A ship (black) rat was caught in a warehouse near the river during December, the first to be found in the area for many years, and was sent to the Ministry of Agriculture, Fisheries & Food for detailed examination. Trapping and baiting was carried out and no further evidence of ship rats was found.

The number of premises inspected and treated following complaints and notifications was as follows :-

Non-Agricultural	No. Infested Rats	No. Infested Mice.	Negative
776	189	352	235
Agricultural			
9	8	Nil	1

Apart from notifications, premises and land tracts were regularly surveyed where rodents are suspected, with the following results :-

Premises Surveyed	No. Infested Rats	No. Infested Mice	Negative
118	29	59	30
Land Tracts			
89	27	31	31

The main public sewers have received several treatments since 1969 with fluoracetamide which has proved very effective. 224 sewer manholes were test baited and then treated early in the year with this rodenticide with negative results.

The satisfactory condition of these sewers made further treatment unnecessary and allowed more time for the rodent operator to deal with the increased number of complaints from private houses and shops.

The total number of visits made during 1971 for rodent control purposes, inspections, surveys, treatment and revisits was 4,340 compared with 3,000 in 1970 and 2,688 in 1969.

Other Pest Control.

The department gave advice and assistance on various other pests as follows:-

Ants	16	Cockroaches	6
Fleas and bugs	58	Other pests	19
Pigeons	5		

GENERAL PUBLIC HEALTH MATTERS

Swimming Pools

Nine swimming pools in schools and the Strand paddling pool were in regular use during the season and frequent bacteriological samples were taken. Eleven slightly unsatisfactory results were obtained due to a low residual chlorine content and adjustments quickly gave the necessary improvement.

The following is a summary of the results obtained from samples taken :-

Source	No. of Samples	No. of samples showing		
		Coliform Bacilli	E. Coli	High Plate Count
Strand Bath	12	3	1	-
Strand Paddling Pool	12	3	-	-
Fairview School	12	2	2	-
Grammar School	4	-	-	-
Wakeley Road School	5	1	1	-
Upbury Manor School	4	-	-	-
Westbrook School	8	2	2	-
Orchard Street School	4	-	-	-
Hempstead School	6	-	-	-
Medway Hospital	2	-	-	-
Total	69	11	6	-

Drainage

A summary of the work carried out in this field during the year is given below :-

Inspections - public sewers	690
Inspections - drains	498
Reinspections	465
Smoke tests	41
Water tests	149

(contd.....

Drains repaired, altered or reconstructed	4
Sewers repaired, altered or reconstructed	10
Cesspools emptied	231
Cesspools - number of loads removed	552
Choked drains and sewers cleansed	1,533

Infectious Disease

Notification was received on 12th November that typhoid had been confirmed in a Gillingham resident who had been an in-patient in a local hospital for three weeks and the patient was transferred to an isolation hospital the next day.

Investigations concerning the contacts of this case were commenced immediately, the patient's immediate family was isolated and five faecal specimens taken from each at the appropriate intervals were all negative. Full information concerning the patient, his family, work contacts and contacts in the hospital was passed to all general practitioners and the medical officers of health of neighbouring authorities.

There were approximately 1,100 contacts of the patient, nearly all of them contacts at and through the hospital. The hospital took specimens from their staff and the Health Department dealt with all other contacts in the borough. All results taken in Gillingham were negative, and I was able to pronounce the case clear on the 4th December.

Infective Hepatitis

4 cases of infective hepatitis were notified during the year compared with 40 in 1970 and 41 in 1969.

Gastroenteritis

256 visits were made for the purpose of investigating notified cases of infectious disease and suspected gastroenteric infections; a large number of these visits were in connection with the case of typhoid fever.

Diseases of Animals

Responsibility for the routine administration of Diseases of Animals reverted to the Council on 1st April 1969. There were no suspected or confirmed outbreaks of notifiable diseases during the year. 2 licences for the movement of swine were issued by other authorities, and in both cases the premises in the borough to which the animals were moved were visited by a public health inspector.

There are 9 piggeries and other premises in the borough, the occupiers of which are licensed to operate plant under the Diseases of Animals (Waste Foods) Order, 1957. All were inspected and found to be kept in a satisfactory condition.

Rabies

Britain has been completely free since 1922, other than in dogs in quarantine or released from quarantine.

A total of 27 visits were made under the Diseases of Animals Acts during the year.

Keeping of Animals, etc.

There are no riding establishments in the borough.

9 pet shops licensed under the Pet Animals Act 1951 were on the list at the end of the year. These were visited regularly and were kept to the required standard.

1 premises licensed under the Animal Boarding Establishments Act 1963 was listed at the end of the year and was inspected by both the Veterinary Surgeon and the Public Health Inspector.

Scrap Metal Dealers Act, 1964

There were 2 dealers on the register at the end of the year

Caravans

Gypsies occasionally pull their caravans on to sites on the outskirts of the borough. They are liable to cause both a public health nuisance and annoyance to local residents. 61 visits were made by inspectors during the year and the gypsies were usually persuaded to move fairly quickly.

Noise Abatement

The Noise Abatement Act 1960 amends the Public Health Act 1936, and makes certain nuisances from noise or vibration statutory nuisances. Complaints are received from the occupiers of houses and offices in close proximity to industrial premises and various other premises where mechanical equipment is in use. Investigation of noise complaints can be difficult and time consuming, but in most cases a reduction in noise emission was rapidly achieved by co-operation with the management concerned. 285 visits were made in connection with Noise Control in 1971 compared with 140 in 1970.

The Noise Advisory Council published the report NEIGHBOURHOOD NOISE in 1971. This report considered the working of the Noise Abatement Act 1960 and, in particular, the deficiencies in the Statute. The report included an outline of suggested provisions for a new noise abatement act including the new conception of noise abatement zones.

SEWERAGE AND SEWAGE DISPOSAL

Sewerage

The arrangements for sewerage and sewage disposal in the borough are reasonably adequate. Against new development, schemes are undertaken as the need for them arises. There is some deficiency in storm water drainage in the older parts of the town, schemes for the rectification of wh ich are in preparation.

Sewage disposal

The following information has been provided by the General Manager of the Rochester, Chatham and Gillingham Joint Sewerage Board:

The population draining to the Board's Works at Motney Hill has now exceeded the design figure of 200,000 and investigations are being made into future trends of development within the Medway Towns area, and will be the subject of a report to the Board, to assist in its assessment of future programmes.

It has been decided to provide chemical treatment and sludge pressing plant; the design is completed and the equipment should be in use during the year ahead.

WATER

The public water supply of the area is provided by the Medway Water Board and is satisfactory both in quality and quantity.

The following information has been provided by the chemist and bacteriologist of the Medway Water Board.

SUMMARY OF RESULTS OF BACTERIOLOGICAL ANALYSES

Source of Samples	No. of Samples	No. of Samples showing	
		Coli Aerogenes	E. Coli
Gore P.S. - untreated water	41	None	None
Gore P.S. - treated water	44	None	None
Luton P.S. - untreated water	64	13	5
Luton P.S. - treated water	65	None	None
Matts Hill P.S. - untreated water	97	58	54
Matts Hill P.S. - treated water	97	None	None
Rainham P.S. - untreated water	45	None	None
Rainham P.S. - treated water	46	None	None
Snodhurst P.S. - untreated water	48	1	1
Snodhurst P.S. - treated water	48	None	None
Belmont Scheme - treated water	50	None	None

CHEMICAL ANALYSES
(Results in mg/litre where appropriate)

	Gore Treated	Luton Treated	Matts Hill Treated	Rainham Treated	Snodhurst Treated	Belmont Treated
Appearance	Bright & Clear	Bright & Clear	Bright & Clear	Bright & Clear	Bright & Clear	Bright & Clear
Turbidity	Nil	Nil	Nil	Nil	Nil	Nil
Colour	Nil	Nil	Nil	Nil	Nil	Nil
pH	7.1	7.1	7.2	8.2	7.1	7.1
Electric conductivity	645	565	490	425	525	505
Alkalinity (as $CaCO_3$)	280	265	265	210	270	270
Temp. hardness	266	252	248	33	252	250
Perm. hardness	70	52	32	13	40	36
Total hardness	336	304	280	46	292	286
Chloride (as Cl)	28	28	19	27	23	21
Ammoniacal N.	Nil	Nil	Nil	0.33	Nil	Nil
Albuminoid N.	Nil	Nil	Nil	Nil	Nil	Nil
Nitrate N.	7.5	7.9	3.5	Nil	3.8	4.1
Nitrite N.	Nil	Nil	Nil	Nil	Nil	Nil
$KMnO_4$ oxygen	0.10	0.12	0.12	0.12	0.14	0.08
Residual chlorine	0.10	0.08	0.05	0.05	0.05	0.05
Iron (as Fe)	Nil	Nil	Nil	Nil	Nil	Nil
Fluoride (as F)	Nil	Nil	Nil	0.27	Nil	Nil
Number of samples examined during 1971	4	4	6	4	4	4

All the Board's sources of supply have been examined specifically for plumbo-solvent action and in no instance was a tendency to be plumbo-solvent found.

With the exception of Rainham and Snodhurst where marginal chlorination is carried out, the remaining sources are super-chlorinated and dechlorinated after a period of contact before distribution.

Any pollution detected at the Board's sources is investigated and the cause eliminated. The entire population of the borough is on a direct mains supply.

Fluoridation of Water Supplies

At the end of 1971 the County Health Committee is reconsidering its policy, and it is hoped that the recommendation for the fluoridation of water supplies will be accepted.

Delegated Health Services

DELEGATED HEALTH SERVICES

DELEGATED HEALTH SERVICES

The following sections of the National Health Service Act will continue to be administered by the delegated health services in Gillingham :

National Health Service Act 1946

Section 22	.. .. ..	Care of Mothers and Young Children
23	.. .. ..	Midwifery
24	.. .. ..	Health visiting
25	.. .. ..	Home Nursing
26	.. .. ..	Vaccination and Immunisation
28	.. .. ..	Prevention of Illness, Care and After Care

The Social Services Act 1970 revoked as from October 1971 Section 29 of the National Health Service Act 1946 relating to the Home Help Service and the Mental Health Act 1959 relating to the social work support of the mentally handicapped and mentally ill and the National Assistance Act Section 29 relating to the welfare arrangements for the blind, deaf and handicapped, and the Nurseries & Child Minders Regulation Act 1948, but the health department remained responsible for its administration throughout the year.

THE NURSING SERVICES

January 1971 saw the introduction to the borough and county of an integrated nursing service on the lines recommended in the Mayston Report. This was a necessary preliminary move towards the fully integrated health service scheduled for April 1974.

The district nursing and midwifery staff have been attached to all general practices for the past six years, and in the two or three instances where it has been possible to complete the community team with a health visitor it has been obvious that a more efficient and co-ordinated service resulted; it follows, therefore, that the 1971 priority was to extend these complete nursing team attachments throughout the borough.

The health visiting staffing position this year improved with the appointment of three experienced health visitors in response to advertisements and three newly qualified staff from the Medway College of Technology. These additions to staff enabled us to undertake the complex task of general practitioner/health visitor attachment, and to state with some confidence that it should be completed by mid-1972.

Miss D. Purt undertook a course in field work instruction at the Medway College of Technology, and is presently responsible for the practical training of two students. We anticipate that, as in the past, this function will be a constant source of health visiting staff replacement and recruitment.

Hospital Liaison

Miss J. Reddington, health visitor, took over the responsibility of liaison with the maternity and paediatric units at All Saints' Hospital.

In December the Area Nursing Officer and several district nurses visited the Medway Hospital to arrange a similar service in the wards there. At this introductory meeting between senior hospital staff and the domiciliary staff the aims and objectives of the scheme were discussed and ward sisters and district nurses met together, January 4th, 1972 was fixed as the commencing date for the scheme.

As in the past, at three monthly intervals a week's programme on the

Community Aspects of Disease were arranged for third year student nurses from the Medway Group of hospitals, followed by the usual symposium at the School of Nursing.

Health Education

Courses in ante-natal relaxation and parentcraft education were given at 4 centres in the town by midwifery staff with additional help in some aspects of child care by the health visitors.

Increasing demands are being met by the latter in health education in schools, particularly at Rainham Campus and Upbury Manor.

Members of all three disciplines, keen to enhance their expertise in this field, will be able to attend a course of eight weekly evening lectures on Health Education Techniques at the Adult Education Centre, Gardiner Street, commencing on Tuesday, January 4th, 1972.

We extended an invitation to our colleagues in County area 5 to join us in this venture, and to date 24 have enrolled.

We are greatly indebted to the Centre's principal for his active help in planning this course.

Domiciliary Midwifery

In accordance with the national trend for confinement in hospital there has been a decrease in the number of home confinements during the year. Hospital delivery is followed by a period of short term care, the mother and baby frequently being discharged home 48 hours after delivery. The role of the domiciliary midwife is therefore changing to deal with the increase in post natal nursing care. The midwives are also increasingly involved in the ante-natal care and education of all expectant mothers in the general practice to whom they are attached, and they are becoming increasingly involved particularly in the case of teaching midwives in introducing the students to the wider aspects of community care.

The 13 midwives in the borough attended 507 home confinements during the year and paid 1577 visits to 290 patients who had been confined in hospital and discharged home before the tenth day.

Relaxation and Mothercraft Classes

There continues to be a large demand for ante-natal education classes for expectant mothers.

At four centres, Balmoral Gardens, Holding Street, Twydall and Wigmore, relaxation classes for expectant mothers are held at regular intervals by the department's midwives. These classes establish contact between the midwife and mother before the birth of her child and enable the midwives to teach mothercraft and to introduce material in the health education field; visual aids such as films are used in this work.

Relaxation classes are held by appointment at clinics as follows :-

The Clinic Balmoral Gardens Gillingham	Monday and Wednesday a.m.
The Clinic Holding Street Rainham	Friday a.m.
The Clinic Twydall Green Gillingham	Thursday a.m.
St.Matthew's Community Hall Wigmore	Monday p.m.

There were 2198 attendances by antenatal patients at relaxation classes during the year.

CHILD HEALTH SERVICES

The attendances at the child health clinics continued to increase by 2000 to 20,377 during the year.

The child health clinics in the borough are as follows :-

Clinic	Sessions held	Times sessions held
The Clinic Balmoral Gardens, Gillingham	Weekly	Monday and Thursday p.m.
The Clinic Holding Street Rainham	Weekly	Tuesday and Thursday p.m.
The Clinic Twydall Green Gillingham	Weekly	Monday and Wednesday p.m.
Parkwood Baptist Church Hall	Weekly	Tuesday and Thursday p.m.
Hempstead Village Hall	3rd in the month	Friday p.m.

The total attendances at child health clinics during the year were 20,377 covering 4,696 children; of these 1,894 under one year of age attended for the first time during this period. This rise, added to the very great increase that occurred in 1970, means that attendances rose by 10,000 in two years, and this figure is an indication of the need for continuing community child care that is not being met by the general practitioner or hospital services and depends for its success on the special skills and the techniques of developmental paediatricians.

Attendances at clinics were as follows :-

Clinic	Average Attendance per Session	New Cases				Total Attendances	Sessions
		Born In					
		1971	1970	66-69	Totals		
Balmoral Gardens	44	528	488	589	1605	6234	141
Holding Street	43	561	227	344	1132	4424	103
Twydall	40	409	151	193	753	3911	99
Hempstead	15	29	24	52	105	300	20
Parkwood	54	367	380	354	1101	5508	102
Total		1894	1270	1532	4696	20377	465

Special Care of Premature Infants

During the year notifications were received of 89 babies who weighed 5½ lbs or less at birth. Details of these are given in the following tabulation.

Notifications were received relating to 13 premature stillbirths and details of these are also given in the following table.

Weight at birth	Premature live births												Prem. still births	
	Born at home or in a nursing home													
	Born in hospital				Nursed entirely at home or in a nursing home				Transferred to hospital on or before 28th day				Born	
	Total births	Died			Total births	Died			Total births	Died			in hospital	at home or in a nursing home
		within 24 hours of birth	in 1 and under 7 days	in 7 and under 28 days		within 24 hours of birth	in 1 or under 7 days	in 7 and under 28 days		within 24 hours of birth	in 1 and under 7 days	in 7 and under 28 days		
1. 2lb. 3oz. or less	-	-	-	-	-	-	-	-	-	-	-	-	4	-
2. 2lb. 3oz. up to and inc. 3lb. 4oz.	11	5	-	-	-	-	-	-	-	-	-	-	2	1
3. Over 3lb. 4oz. up to and inc. 4lb. 6oz.	12	1	1	-	-	-	-	-	-	-	-	-	4	1
4. Over 4lb. 6oz. up to and inc. 4lb. 15oz.	16	1	-	-	3	-	-	-	-	-	-	-	1	-
5. Over 4lb. 15oz. up to and inc. 5lb. 8oz.	26	-	-	-	21	-	-	-	-	-	-	-	-	-
6. Total	65	7	1	-	24	-	-	-	-	-	-	-	11	2

Health Visitor's Visits.

The following are details of the number of visits carried out during the year :

To expectant mothers	111
To children under 1 year	9,094
To children aged 1 and under 2 years ..	3,803
To children aged 2 and under 5 years ..	7,642
To patients with tuberculosis	184
Other visits (hospital care, care of old people, children at risk, etc.)	3,672
Total visits	24,506

Screening Tests of Hearing

Screening tests of hearing were carried out by health visitors on 1,502 children under 5 years of age during 1971; 5 were referred for further investigation.

HOME NURSING SERVICE

At the 31st December 1971 there were 17 district nurses employed in the borough.

		Patients who were 65 or over at the time of the first visit in 1971	Children who were under 5 at the time of the first visit in 1971
No. of patients attended	1,639	930	37
No. of nursing attendances made by district nurses	32,230	20,277	231

CHILDREN AT RISK

In 1971 there were 1,631 children under five years of age on the At Risk Register: 539 under one year; 1,092 from 1 to 5 years.

Initially children 'at risk' are seen frequently by the medical officers and consultations between hospital and general practitioner undertaken to ensure that any handicapping abnormality is diagnosed, its degree recognised, and all forms of help given to the child and the parents.

If there is no apparent abnormality in these children they are seen at 7 months and 1 year to exclude any deafness or other defect and after 1 to 2 years are taken off the At Risk Register.

It follows therefore that there will be fewer children in the older age group still on the register but they will be those with defects or problems stemming from their congenital or neonatal abnormalities.

At 304 developmental paediatric sessions there were 3,648 reviews carried out.

SPECIAL CARE CLINIC, TWYDALL

This well established service to the handicapped children of pre-school age has now completed its sixth year.

42 individual children attended weekly during 1971.

The centre continues to provide a necessary and useful service for handicapped children of pre-school age.

Since this venture started in 1965 the constant difficulty has been the provision and maintenance of a suitable vehicle for transporting the children to and from the centre.

This was solved on May 15th of this year by the very welcome gift of a brand new Mini bus by the Lions Club of Gillingham. It was received on behalf of the children by the Mayor, and Chairman of the Health Committee, Cllr.R.Jones, at the Club's first Charter Dinner.

From money raised by the parents' club, and staff, we were able to entertain 20 children to a party at the clinic the Saturday before Christmas, where they were treated to a fascinating display of conjuring by Mr. Paul Freeman, and each child received a gift from Father Christmas.

IMMUNISATION

Immunisation against diphtheria, whooping cough and tetanus
Vaccination against smallpox, poliomyelitis, measles and rubella

Set out below are the figures for diphtheria, whooping cough and tetanus immunisation (triple antigen) and for smallpox, poliomyelitis, measles and rubella vaccination for 1971 :

Triple Antigen Immunisation
(Diphtheria, Whooping Cough, Tetanus)

Age at Date of Immunisation	Primary Immunisation	Reinforcing Dose
Under 1 year	41	-
1 - 4 years	1,649	4
5 - 14 years)	51	1,495
15 yrs.& over)	-	-
Total	1,741	1,499

3,240 persons were thus immunised or re-immunised by triple antigen injections by general practitioners and local health authority medical officers.

Poliomyelitis Vaccination

The following table gives the number of third doses and fourth doses of oral vaccine given during the year ended 31st December 1971 :

Age at date of Vaccination	Third	Fourth
Under 1 year	48	-
1 - 4 years	1,598	3
5 - 14 years)	30	1,560
15 years & over)	-	-
Total all ages	1,676	1,563

Vaccination Against Smallpox

Age at date of Vaccination	Vaccinated
Under 1 year	110
1 - 4 years	488
5 - 14 years 15 years and over }	8

Vaccination Against Measles

Age at date of Vaccination	Vaccinated
Under 1 year	-
1 - 3 years	916
4 - 7 years	85
Over 7 years	4
Total	1,005

Vaccination Against Rubella

Following the Department of Health & Social Security Circular No. 11 of July 1970 vaccination against rubella was continued.

398 girls between their 11th and 14th birthdays were vaccinated during the year.

B. C. G. Vaccination

This vaccination to protect against tuberculosis is offered after preliminary testing to all persons of 13 years of age or over who are in full time attendance at schools and educational establishments, as well as persons known to have been in close contact with patients suffering from tuberculosis. By the end of the year 909 school children had been vaccinated by medical officers in department.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Cytology Clinic

The district nurses have conducted regular cytology clinics according to public demand for this service. The cervical smear test has indeed picked up several patients in need of treatment, though not all of a serious nature.

Number of sessions	20
Number of attendances	379

Results:

Negative	379
Positive	-
Abnormalities referred to G. P. s	84

Repeat Results:

Negative	-
Further letters to G. P. s	-

T. B. Care and After-Care - Provision of Extra Foods

14 recommendations were made for patients to receive extra nourishment and 14 were approved.

Illness Generally - Recuperative Care

1 recommendation was made under the County Council's scheme for recuperative care which is now restricted to children under 16 years of age.

Recommendations for medical loans have again increased this year and some 323 persons were supplied with 532 items.

Chiropody

It has still not proved possible to fill the vacancy on establishment for 1 full time chiropodist or to obtain anyone even on a sessional basis. Mrs. Miller continued to undertake 6 sessions weekly but it is not possible to reduce the waiting list of patients without additional staff.

During 1971 there were 158 new applicants for chiropody treatment, of which 157 were old age pensioners, 1 expectant mother. The total number of attendances for treatment was 2, 277 of which 651 (including 535 domiciliary visits) were made by private chiropodists and 1, 626 by the chiropodist appointed by the County Council to work on a sessional basis in Gillingham.

HEALTH SERVICE FOR THE ELDERLY

During the past year over 300 visits have been made to cases referred to the medical officer appointed to deal with the elderly. Referrals came initially from the Home Help Department but as the year progressed an increasing number were referred by health visitors attached to medical practices within the borough; district nurses; welfare officers; voluntary agencies and relatives of elderly persons with particular problems, and the table which follows shows the problems that were dealt with.

The type of problem met with on the home visits began to show a pattern of social and medical need of varying degrees and many of the problems encountered were of immediate urgency. It became obvious that the size of the problem affecting the elderly in the borough is very extensive and the needs are not being met by the present services.

There has been considerable publicity during the past year showing the national situation and attention has been drawn to needs of the elderly by television programmes and all forms of mass media. The difficulties in solving this problem have not as yet been met because of the shortage of places available in welfare homes, nursing homes and hospitals. It is realised this cannot of course be solved quickly, but many local authorities and University research departments are presently undertaking surveys both to show the social and medical requirements of this increasingly large age group and to look to the future to prevent a deteriorating situation.

In Gillingham every effort is made by co-operation with local medical practitioners; welfare officers and geriatric hospital services, the Housing Department and voluntary agencies and wherever possible individual cases are dealt with by all these means. The greatest problem of all is amongst a large number of elderly persons in their eighties either living alone and finding it increasingly difficult to cope or in a number of cases cared for by a husband, wife or relation in the same age group. When individual situations are investigated a very real and sometimes distressing problem is encountered for which a solution cannot always be found.

Health Clinic for the Elderly

It is obvious from the above report there is a great need for this type of clinic within local health services. The main aim of the Clinic is to detect and deal with problems during early stages and prevent them becoming serious emergencies later. It has been shown in other areas this type of clinic is invaluable. An important finding is that a considerable number of elderly persons just accept as part

of old age such conditions as cataracts, deafness, arthritis and varying degrees of anaemia which is sometimes seen at an advanced stage.

One of the greatest benefits of the Clinic has been the attendance there of the Welfare Officer of the Deaf who undertakes hearing tests on the elderly and makes necessary adjustments to hearing aids, and this has given great relief and pleasure to many old people who had not realised how seriously their hearing had deteriorated.

The Old People's Liaison Officer attends the Clinic and is available to help with transport of the more seriously handicapped and to deal with social problems and referral to the necessary social agencies. The district nurses undertake routine testing and are present at the Clinic on a rota basis so that there can be continuous contact through the district nurses with the general practitioners to whom they are attached in their practices.

There is a need for a chiropodist to attend the Clinic at the same time as the other medical and social services, as referral in the present circumstances of shortage of staff makes delays inevitable, but we hope that with the appointment of a new chiropodist in the near future this will be remedied.

The attendances so far have shown a need for a physiotherapy session to give group teaching on general exercises and on the maintenance of movement and for the limitation of arthritic problems. In clinics where this service is available the need for breathing and chewing exercises and advice on other minor muscular weaknesses which develop with old age have been shown to be of great benefit.

The greatest problem as with all services for the elderly is that of transport and the difficulty of bringing the most needy to the Clinic.

The general practitioners are informed of all the findings, and as the function of the Clinic in the role of keeping the elderly as fit as possible and preventing further deterioration and meeting social needs is becoming better understood by the old people themselves, the voluntary services with whom they are in touch and general practitioners, the response is increasingly encouraging.

HEALTH CLINIC FOR THE ELDERLY

Summary of Sessions held from 26th May - 31st December 1971

Age	Male	Female	Total	Total Number of Attendances	Ref. for Hearing	Ref. for Chiropody	Ref. to G. P.	Ref. to Home Help	Ref. to Welfare	Ref. to Hospital	Seen by Ministry of Social Security
60 - 70	8	12	20	31	2	1	4	1	2	1	-
70 - 80	6	54	60	91	14	6	28	3	-	4	2
80+	4	10	14	33	4	2	8	-	1	2	3
Total	18	76	94	155	20	9	40	4	3	7	5

OLD PEOPLE'S LIAISON OFFICER'S REPORT

The Old People's Liaison Officer reports that during the year the formation of the new Department of Social Services and the consequent changes in staff and roles has raised certain problems, largely through persons not fully understanding the implications of the new department.

The past year has again shown that we in Gillingham have a considerable number of retired persons at risk amongst our elderly population. Unfortunately the assistance we are able to give in most cases is limited. The greatest need continues to be for accommodation, particularly sheltered or purpose-built. There are far too many elderly persons who require a degree of nursing which precludes them for consideration for residential accommodation and are not ill enough to require hospital treatment.

There continues to be an increase in the number of enquiries from persons requesting assistance in getting aged relations into homes on a short-term basis in order to give a rest to those who have the burden of looking after them. There is also a steady increase in the numbers requiring residential care, both hospital and homes, on a permanent basis. Fortunately we are able to recommend private nursing homes to many of these. Those who are not able to afford private home fees have to take their turn with others already on the list and unless their need is very urgent, may be on the waiting list for a considerable time.

There are at last signs that the information services we sponsor throughout the voluntary agencies are having some effect. This is evident by the number of enquiries we receive asking about facilities available for retired persons and the increase by enquiry the clubs and fellowships receive for particulars about joining. In the period under review there have been significant increases in membership of all groups who offer recreational or leisure time activities to retired persons. This is certainly true of the work going on at the Borough Adult Education Centre where a large number of retired persons are registered for a wide variety of classes. We have also started a Thursday morning series of talks for this age group in addition to the Wednesday Plan which had become too large in numbers to control. The new group will soon be at capacity then we may have to think of starting a further class. These two gatherings of retired persons each week have been of great assistance to us, they have been able to help in practical terms with some of those who are less active than themselves.

Transport is still one of our major problems, not only in getting the less active to places for recreation or to take advantage of a service being provided, but to make certain those who are still active are able to keep so. The increase in the cost of public transport has made it impossible for those living on a minimum income to come into town from the fringes and we are getting little pockets of retired persons living on the edge of the borough who are having to give up a lot of their recreational activities due to the cost and eventually becoming less active earlier than usual and are then subject to complications that arise with the reduction of their interest. We are able to introduce some of these into clubs for retired persons and fellowships near their homes but this does not appeal to everyone and it is those who are giving up some of their activities for reasons of cost and not replacing them who will possibly become housebound earlier than they would had they been able to continue with their community interests. Although there are a good number of car owners who assist by transporting elderly persons when required, we could use more volunteers for this worthwhile work.

We still obtain many enquiries in person, by letter and telephone on a wide variety of problems affecting the elderly, in most cases due to the high level of liaison between our statutory and voluntary colleagues, we are able to give some satisfaction. With the setting-up of the new Social Services Department we hope to see an increase in what we are able to offer in the way of help to those who require it most. Some indication of the work involved is given in the following figures.

STATISTICS - 1st JANUARY - 31st DECEMBER 1971 (INCLUSIVE)

Home Calls on elderly persons or on individuals in their interest	688
Visits to Clubs, Luncheon and Social	475
Meetings and Talks - Old People's Welfare Council and Constituent Members ..	108
Conferences - Old People's Welfare, National and County	17
Training Meetings	6
Total ..	1,294

WELFARE AND MENTAL HEALTH SERVICES

The figures relating to the following services are given for information.

Mentally Ill

50 patients were referred to the mental welfare officers for admission to hospital. 26 cases were referred, and 14 cases were on the care and after care register as at 30.9.71.

The Subnormal and Severely Subnormal

21 patients were admitted for 27 periods of 'short term care'. 4 patients remained on the waiting list for suitable hospital accommodation. Friendly oversight is available to 72 males and 66 females.

Handicapped Persons

355 persons registered as at 30th September 1971
33 persons supplied with personal aids
15 persons had adaptations carried out to their homes
20 persons went on holiday
13 new persons issued with car badges, making a total of 52
73 persons received craft service; 1407 home visits were made
40 persons attending the day work centre as at 31.12.71
4 telephones installed and rentals undertaken
7 telephone rentals undertaken

Blind and Partially Sighted

Number on blind and partially sighted register as at 30.12.71 were as follows :-

BLIND			PARTIALLY SIGHTED		
Male	Female	Total	Male	Female	Total
62	88	150	23	51	74

Nurseries and Child Minders (Regulation) Act 1948

At the end of the year the following premises were registered as nurseries or persons registered as child minders under the Act.

Type of care (all day or sessional) provided by premises and persons :-

	Premises providing all day care	Premises providing sessional care	Persons providing all day care	Persons providing sessional care
Number of premises or persons	9	12	57	13
Number of children permitted	382	348	113	106

HOME HELP SERVICE

During 1971 a total of 540 old people have had domestic help.

Confinements

49 applications were received and 26 cases served.

Family Care Service

This service was provided for five families.

Night Service

18 cases referred were for aged patients who were living alone.

Nurseries and Child Minders (Regulation) Act 1968

A return of the number of the following premises were registered as nurseries or persons registered as child minders under the Act. Given for information.

Type of care (all day or sessional) provided by premises and persons :-

	Premises providing all day	Premises providing sessional	Persons providing all day	Persons providing sessional
Number of premises or persons	9	12	67	18
Number of children permitted	283	388	106	143

The Subnormal and Severely Subnormal

21 patients were admitted for 27 periods of 'short term care'. 4 patients remained on the waiting list for suitable hospital care.

HOME HELP SERVICE

Friendly oversight is available to 72 males and 86 females.

During 1971 a total of 540 old people have had domestic help.

Handicapped Persons

Confinements

336 persons registered as at 30th September 1971

49 applications were received and 36 cases served.

15 persons had adaptations carried out to their homes

20 persons went on holiday

Family Care Service

13 new persons issued with car badges, making a total of 62

73 persons received home help for five families

40 persons attending the day work centre as at 31.12.71

Night Service

4 telephones installed and rentals undertaken

7 telephone rentals undertaken

18 cases referred were for aged patients who were living alone.

Blind and Partially Sighted

Number on blind and partially sighted register as at 30.12.71 were as follows :-

BLIND			PARTIALLY SIGHTED		
Male	Female	Total	Male	Female	Total
62	88	150	23	51	74

School Health Service

SCHOOL HEALTH SERVICE

Gillingham is an "excepted district" under the provisions of the Education Act of 1944. The Committee for Education is responsible to the Kent County Education Committee and works to an agreed scheme of divisional administration.

The full programme of school health work applies to all children who attend schools under the control of Gillingham's Committee for Education. This programme includes medical and dental inspections of children of different age groups in schools; the referral from these inspections of children with defects to the school clinics for consultation and the follow-up in the clinics of all school children with special problems or for special examinations, e.g. for employment, and the provision of a diagnostic ascertainment and advice service for handicapped children from the age of two years.

Handicapped Pupils

Handicapped pupils are defined in Part II of the Handicapped Pupils and Special Schools Regulations 1959 as pupils who require special educational treatment by reason of their being

(a) Blind
(b) Partially sighted
(c) Deaf
(d) Partially hearing
(e) Educationally subnormal
(f) Epileptic
(g) Maladjusted
(h) Physically handicapped
(i) Pupils suffering from speech defect
(j) Delicate

The Education Act of 1944 places on the education authority the responsibility of ascertainment, examination and classification of educationally subnormal children. These ascertainments and examinations are the responsibility of the school medical officers and educational psychologists who can recommend to the local education authority the educational needs of the child.

All handicapped children are assessed by medical officers in department and recommendations made for the children's education. These medical officers have specific postgraduate training in the ascertainment of educational subnormality and by their recent training in developmental paediatrics and their attendance at courses on the needs of handicapped children.

To cover the needs of the children in the borough there are two classes within the Marlborough Road Unit for educationally subnormal children for the further assessment of those with educational subnormality who may go on to Danecourt Educationally Subnormal School or to the Schools for the Severely Subnormal at Bobbing and Strood. These two schools have now been taken over by the County Education Department from the County Health Department under the Education Act 1970.

The needs of the older physically handicapped children between the ages of 8 and 11 are now being met by the Junior Physically Handicapped Unit at the Twydall Junior School.

The two units for the partially hearing continue to meet a need for the children in the Medway Towns with hearing defects and reports on all these units are given later by the teachers and the medical officers concerned.

Total number of children attending special schools and units in Gillingham from Gillingham, Medway and Sittingbourne :

	No. of Pupils
Danecourt Day E.S.N.School	152
Partially Hearing Units:	
(1) Woodlands Road C.P.Infants' School	8
(2) Fairview C.P.J.M.School	14
Physically Handicapped Unit, Richmond Road	10
Physically Handicapped Junior Unit, Orchard Street	10
Special subnormal units, Marlborough Road	21

Number of Gillingham children admitted to special schools and units during 1971 :

Danecourt Day Special School:E.S.N.	17
Glencoe Special Classes, Chatham, E.S.N.	1
Special subnormal units, Marlborough Road	15
Residential special school: E.S.N.	1
Residential special schools:Physically handicapped	-
Physically Handicapped Unit, Richmond Road	1
Physically Handicapped Junior Unit, Orchard Street	1
Residential special schools: Deaf	2
Residential special schools: Partially hearing	-
Residential special schools: Speech	-
Partially Hearing Units:	
(1) Woodlands C.P.Infants	4
(2) Fairview C.P.Junior Mixed	-
(3) Highfield Secondary Chatham	1
Residential schools: Delicate	2
Residential schools: Blind	-
Residential schools: Partially sighted	-
Residential schools: Maladjusted	3
Hospital Special School	1
Severely subnormal schools	2

No. of Gillingham children of school age on 31. 12. 71 formally ascertained as handicapped pupils requiring special educational treatment	Blind	Partially sighted	Deaf	Partially hearing	Delicate	Physically handicapped	E. S. N.	Maladjusted	Epileptic	Speech defect	Dual defect	TOTAL
Attending day special school/units	-	-	-	9	-	9	113	-	-	-	* 59	* 190
Awaiting placement in day special school/units	-	-	-	2	-	1	10	-	-	-	-	13
Attending residential special schools	-	3	11	2	6	4	10	11	-	-	-	47
Awaiting placement in residential special school	-	2	-	-	1	-	1	6	-	1	-	11
Total number of children of school age requiring special educational treatment	-	5	11	13	7	14	134	17	-	1	* 59	* 261
Children of school age on register of handicapped pupils but not requiring special educational treatment and attending ordinary school	-	7	-	+ 102	64	64	-	78	29	71	* 59	474

+ Many of these children only require occasional help from the teacher of the partially hearing.

* Included in total

In addition to the previous table, 25 children were ascertained during 1971 and found not to be E. S. N. but required special help. Children ascertained but not E. S. N. and not requiring special school help - 12. The total number of children who were on the register of handicapped pupils but not ascertained as E. S. N. was 81.

UNDER FIVE HANDICAPPED

(Ministry of Education Classification - not including severely subnormal)

	Blind	Partially sighted	Deaf	Partially hearing	Delicate	Physically handicapped	E. S. N.	Maladjusted	Epileptic	Speech defect	Dual effect *	Total
Children aged 2 - 5 years on 31. 12. 71 formally ascertained as handicapped pupils requiring special educational treatment												
Receiving	1	-	1	-	-	12	5	-	1	13	5	38
Awaiting	1	-	1	3	-	5	-	-	-	12	7	29
Not formally ascertained but may require special education	-	-	-	-	2	46	1	-	3	-	8	60

* included in total

REPORTS FOR SPECIAL SCHOOLS AND UNITS

Danecourt Day Special School

The provision of a mobile classroom at Danecourt during the year enabled a greater number of children requiring special education to be admitted than had hitherto been possible. The catchment area includes Sittingbourne as well as Gillingham, and a total of 27 children (11 County and 16 Gillingham) were accepted. In addition, 6 pupils, being of suitable age and ability, were transferred from the Marlborough Road Unit. 4 children left the area, and 2 Gillingham children were transferred to Residential Special Schools. 3 children (1 County and 2 Gillingham) were also transferred to Day Special Schools for Severely Subnormal pupils as they were unable to benefit from the educational programme at Danecourt.

As diagnostic, theraputic and educational techniques improve, greater demands are made on the services involved in enabling children to overcome specific handicaps associated with subnormality. Verbal communication is often a major problem and frequently causes frustration and other emotional difficulties. The weekly visits to the school by the speech therapist are an invaluable aid to the children requiring therapy and the staff who have to teach them. Where necessary parents are also interviewed and advised on their approach to speech problems in the home.

Several children also benefit from the bi-weekly group physiotherapy sessions, as many have poor muscular control and co-ordination. 5 children were under the supervision of the visiting teacher of the partially hearing, and detailed analysis of their hearing difficulties and subsequent advice to teachers and parents enabled the children to gain maximum benefit from their education.

Regular school medical inspections and hearing tests are carried out by the school medical officer, and the school Ophthalmic and Dental clinics provide their specialist help when necessary.

The educational psychological service plays an increasing important role in assessment of those children who have specific learning difficulties due to organic or psychological factors, and helps to formulate an educational programme suited to their individual needs. When necessary, children with severe emotional problems are referred to the Child Guidance Clinic at Chatham.

There is still insufficient accommodation for all these ancillary services to function at the school, but the Headmaster and his staff, who are very co-operative, often greatly inconvenience themselves in making the necessary adjustments to enable this specialised work to continue. The three welfare assistants give the children considerable attention and affection, and help to maintain the relaxed and friendly atmosphere at the school.

Employment prospects for the 13 school leavers unfortunately reflected the national trend and were not as good as in previous years. This was disappointing as the final year pupils partake in a work training programme, and are given ample opportunity to develop initiative and independence before they leave school, and several would be reliable employees if placed in work situations within the limits of their ability.

A proportion of the increasing numbers of children of school age will inevitably require special education and provision will have to be made for them if long waiting lists are to be avoided in the future. That this type of schooling for the educationally handicapped has proved its worth is beyond dispute. Danecourt goes a long way towards training its pupils to the levels where society can more readily orientate itself to accepting them in its midst.

Gillingham Partially Hearing Unit.

The Partially Hearing Units provide help for children with all types and degrees of hearing losses between the ages of 3 and 11 years. In some cases children have remained at the Junior Unit for a further year until transfer to a Secondary School.

There are three classes. At Woodlands C.P. Infant School there is a Nursery Class and an Infant Class. There are four children in the Nursery with known hearing losses of varying degrees and four children with normal hearing. Three children with hearing losses are waiting to be admitted when the work on the Nursery toilets has been completed. The inclusion of normal hearing children has been as an experiment during the past year. The hearing children were carefully chosen so that they would not present any additional problems. On the whole the experiment has been successful. There are definite advantages as far as social training and providing a 'normal' hearing environment is concerned. The level of maturity reached by the partially hearing children is far below that

of the particular group of hearing children. It would be better to admit much younger hearing children in the future.

The Infant class has only four children with an age spread of three years. Both classes occupy specially treated rooms within the school and, as mentioned above, the nursery will shortly have its own toilet accommodation. This has been found to be necessary to cope with the young partially hearing children who are not yet toilet trained.

The Junior unit is based at Fairview C. P. Junior School. There are six children who are receiving full time special education under the care of a teacher who is not a teacher of the Deaf. They also have individual Auditory training and remedial help, and a proportion of their class lessons with a teacher of the deaf. The other twelve children attached to the Junior Unit are based in normal classes an return to the Unit for auditory training and remedial help from the teacher of the deaf at set times each week.

The Junior Unit has one specially treated room and one other room which is used for tutorial work and as an office.

During the year one child left and now attends a normal secondary school with periodic help from the teacher of the deaf (County Services). One boy was admitted to the Mary Hare Grammar School for Deaf Children at Newbury. One other child at present at Fairview has taken the entrance examination for the same school. One child from the nursery class is being transferred to Newcastle on Tyne Three children have been admitted to the Junior Unit, one from another Unit and the other two from normal schools. Of the children at present attending the Units thirteen come from outside the borough and seventeen from the borough.

Screening tests have been carried out on the first year Junior children in normal classes and some of the second year children who were not tested last year. There are about four children who will need further investigation.

The teacher in charge continues to report to the Maidstone Hearing Assessmen Panel, and is present at meetings when children attending the Unit are discussed.

The teacher in charge resigned at the end of the Summer Term to take

up another post as a Visiting Teacher, and an acting teacher in charge was appointed. The permanent appointment was made during the Autumn Term. In September a newly qualified teacher of the deaf returned to Fairview after a year's secondment to London University and joined the Unit staff. Two teachers went to London University to train in October but one has since resigned. At present there are two teachers of the deaf and two qualified teachers and a nursery assistant on the Unit staff.

Physically Handicapped Units

The two day physically handicapped units in Gillingham continued to serve the Gillingham, Medway and Sittingbourne areas. A total of 20 children being on the roll at the end of the year. The Richmond Road Infants' Unit catered for children in the 5 - 7 age range, and the children from 7 - 11 years were at the Junior Unit attached to Orchard Street Junior School for the first two terms and then transferred to Twydall Junior School in September.

During the year 3 children transferred from the Richmond Road Infants to the Junior Unit, and one was admitted to ordinary school enabling 1 County and 2 Gillingham children to be admitted. At the end of the year one severely handicapped child with cerebral palsy was transferred from the Junior Unit to a Residential Physically Handicapped School. The numbers on the register at the end of the year were as follows:-

	County	Gillingham
Infants	4	6
Juniors	7	3

The Junior Unit transferred to permanent premises at Twydall Junior School in September and, although only the basic requirements were available initially, the children soon settled in their new environment and were rapidly accepted by the pupils of the ordinary school. Great credit is due for this successful transition to the Headmaster and his staff, the Unit teacher and two welfare assistants who had to surmount numerous practical difficulties involved in the care of immobile children while alterations proceeded and equipment arrived.

The structure of the school is well suited to integration of the handicapped in a considerable part of the ordinary school routine, and the unit children soon used this to advantage, widening their contacts and experiences and, in turn, enabling the other pupils to be aware of the less fortunate minority in their midst.

The Unit at Richmond Road Infants' School continued to provide its high standard of education and care, the Unit teacher having the necessary qualifications for her specialised work in teaching children with varying handicaps and levels of intelligence. A second welfare assistant was appointed to help with the practical day-to-day care of the children who are in the main immobile and incontinent, making full or part time integration in ordinary school for most pupils impossible.

Physiotherapy is an essential part of the school programme for physically handicapped children and the two Units are fortunate that both their physiotherapists combine expertise with a deep understanding of each child's individual physical and emotional problems and the improvements achieved in physical performance often exceed all expectations. The present number of physiotherapy sessions, 3 a week at the Infant Unit and 2 a week at the Junior Unit, is proving insufficient as some cerebral palsy and spina bifida children need a great deal of help. It is hoped to improve on this next year if the physiotherapists are available as unfortunately, as in so many paramedical services, there is a shortage and by and large the physiotherapists can only work part time due to their own family commitments.

As part of the multidisciplinary team involved the County speech therapy service gives assistance in selected cases, and the children are assessed by the Educational Psychologist so that their intellectual ability, often marked by physical handicap, can be developed and educational aids used to their best advantage. The school medical officer sees the children and their parents frequently, and liaison with the school staff and Borough Education Department is closely maintained.

Despite the existence of two Units there is still a waiting list for admission at the statutory school entry age, and it is also obvious that admission at 4½ or even 4 years to a nursery unit would be of great benefit to the physically handicapped children who often lead a very restricted existence. More are surviving infancy and the catchment area is extensive so that the pressure for places at the Units is likely to increase. Also, no provision has yet been made in the Medway area as a whole for physically handicapped children of secondary school age.

Expansion of facilities at the Gillingham Units, where experience and equipment have built up over the years, will be necessary if these children and their parents are to receive the service they deserve for their very special case.

Types of defects admitted:

Spina bifida	6
Cerebral palsy	8
Spastic Diplegia	1
Congenital Heart Disease	1
Hypoparathyroidism	1
Hydrocephalus Scoliosis	1
Rheumatoid Arthritis	1
Werdnig Hoffman's Disease	1

There were 22 children within the two Units during the year, i. e.

Cerebral Palsy	10
Spina Bifida	6
Haemophilia	-
Congenital Heart Disease (Pulmonary Atresia)	1
Hydrocephalus Meningo Myelocoele	1
Idiopathic Hypoparathyroidism	1
Pseudo Hypertrophic Muscular Dystrophy	1
Rheumatoid Arthritis and Congenital Cataract	1
Spina Muscular Atrophy	1

Marlborough Road Unit

The Marlborough Road Unit continued to provide special educational facilities for the 5 - 7 age group for the Medway, Gillingham and Sittingbourne areas. The pressure for places continues and 21 children (6 County and 15 Gillingham) were on the register at the end of 1971. The increase in population and earlier ascertainment of children with educational handicaps will not ease the situation and unfortunately it is not possible either to open a Nursery Group which would be so beneficial to both children and their parents.

During the year 5 County and 15 Gillingham children were admitted, and 1 child, after a short absence, returned to the area and was readmitted.

Transfers included 7 to Danecourt and 2 from the Medway area to Bradfields Special School, and another Gillingham child, awaiting suitable placing, was transferred to a residential school for the deaf. The specialised help provided at the Unit enabled 2 children to be transferred to ordinary schools and, after a trial period, were considered capable of continuing their education at these schools. Had they commenced ordinary school at 5 years it would have been unlikely that sufficient specialised help could have been provided to enable them to overcome their initial learning and social difficulties.

The staff coped successfully with children who, in some instances, presented considerable management problems, e.g. epileptic fits, hyperactivity and one child who made numerous unsuccessful attempts to truant. The skill and patience of the headmistress and teachers and welfare assistants, enabled several children who would otherwise not have been able to cope with school to receive specialised education and social training and were able to give their parents some respite and a great deal of useful advice on management at home. The necessary support from the County Speech Therapy Service and School Psychological Service continued to be of great value and the Visiting Teacher of the Partially Hearing supervised one profoundly deaf child who was at the school for a period awaiting suitable residential placement.

There is obvious need for increasing the number of places for educationally subnormal children at infant school age, and as their intellectual development is delayed a nursery group would facilitate early training and produce better potential eventually when they are school leavers.

During the year:-

7 children have gone to Danecourt
2 children have gone to Bradfields Day E. S. N. School, Chatham
2 children were transferred to ordinary school
1 child transferred to residential school for deaf

Medical Inspection of Pupils Attending Maintained and Assisted Primary and Secondary Schools

Periodic Medical Inspections

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected	
		Satisfactory	Unsatisfactory
1967 and later	75	73	2
1966	755	749	6
1965	713	710	3
1964	129	128	1
1963	38	37	1
1962	14	14	-
1961	10	9	1
1960	66	65	1
1959	753	735	18
1958	375	366	9
1957	597	589	8
1956 and earlier	971	959	12
Total	4496	4434	62

Percentage satisfactory - 98.66

Percentage unsatisfactory - 1.34

The number of children called for re-inspection depend very much on the individual wishes of the doctors examining them, but the number inspected were decreased by 549 over the previous year.

Other Inspections

Number of special inspections	1651
Number of re-inspections	1199
Total	2850

Pupils Found to Require Treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth)	For Defective Vision (excluding squint)	For any of the other conditions recorded	Total individual Pupils
1967 and later	-	1	1
1966	17	111	120
1965	18	96	114
1964	3	8	11
1963	1	-	1
1962	1	1	2
1961	1	1	2
1960	5	9	13
1959	62	35	95
1958	42	24	60
1957	69	19	88
1956 and earlier	115	63	170
Total	334	368	677

Defects found by medical and special inspections during the year

Defect Code No.	Defect or Disease	Periodic Inspections								Special Inspections	
		Entrants		Leavers		Others		Total			
		T	O	T	O	T	O	T	O	T	O
4	Skin	22	20	26	13	15	16	63	49	17	11
5	Eyes -										
	a. Vision	35	91	184	107	115	71	334	269	173	37
	b. Squint	30	20	-	2	12	19	42	41	23	7
	c. Other	6	3	2	2	3	1	11	6	2	8
6	Ears -										
	a. Hearing	11	160	4	28	2	34	17	222	109	243
	b. Otitis media	8	17	3	-	3	11	14	28	6	3
	c. Other	-	4	2	1	1	-	2	5	15	7
7	Nose and throat	52	133	10	22	9	29	71	184	37	36
8	Speech	5	59	-	1	-	5	5	65	22	23
9	Lymphatic glands	2	12	-	1	-	4	2	17	-	-
10	Heart	5	29	2	18	-	9	7	56	8	12
11	Lungs	11	43	1	13	3	15	15	71	9	39
12	Development -										
	a. Hernia	3	8	-	-	-	-	3	8	1	2
	b. Other	3	57	-	1	3	11	6	69	11	22
13	Orthopaedic -										
	a. Posture	-	1	3	12	-	7	3	20	1	2
	b. Feet	9	34	9	35	14	45	32	114	5	10
	c. Other	2	12	10	13	7	7	19	32	17	34
14	Nervous system -										
	a. Epilepsy	-	2	3	3	4	8	7	13	5	8
	b. Other	3	26	-	4	3	10	6	40	4	10
15	Psychological -										
	a. Development	-	27	1	3	-	7	1	37	1	91
	b. Stability	1	15	1	7	-	7	2	29	6	38
16	Abdomen	11	18	2	5	1	8	14	31	5	10
17	Other	7	70	3	43	-	61	10	174	2	29

T = Treatment O = Observation

Eye Diseases, Defective Vision and Squint

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	13
Errors of refraction (including squint) ..	1004
Total	1017
Number of pupils for whom spectacles were prescribed	409

Ophthalmic Clinics

Ophthalmic clinics are held at the School Clinic at Balmoral Gardens and conducted by a consultant working on a sessional basis. The work of the clinic may be summarised thus :

Sessions	57
Number of children examined for first time..	218
Number of children re-examined	894
Total attendances	1112
Glasses prescribed	409
Glasses not required or no change necessary..	703
Referred to hospital	13

Diseases and Defects of Ear, Nose and Throat

	Number of cases known to have been dealt with
Received operative treatment	
(a) for diseases of the ear	-
(b) for adenoids and chronic tonsillitis ..	45
(c) for other nose and throat conditions ..	21
Received other forms of treatment ..	10
Total	76
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1971	9
(b) in previous years	30

Orthopaedic and Postural Defects

	Number of cases known to have been dealt with
(a) Pupils treated at clinics or out-patients departments	6
(b) Pupils treated at school for postural defects	58
Total	64

Diseases of the Skin

	Number of cases known to have been treated
Ringworm - (a) Scalp	-
(b) body	-
Scabies	-
Impetigo	-
Other skin diseases	4
Total	4

Child Guidance Clinic

In an attempt to cope with the large number of children being referred to the Child Guidance Clinic, and to cover the longer waiting period such numbers enforced , while, in addition, being able to maintain closer contact with the Clinic, it was decided one of the medical officers would attend the Clinic. For about a year he attended once a week, and later once a fortnight, and this arrangement continued till Dr. Dennehy left the Clinic. The M.O. sat in at the psychiatrist's diagnostic sessions, attended group conferences, was able to discuss those cases being dealt with by him and obtain advice on their management. He was able to establish a useful contact with the psychotherapist, psychiatric social workers and the educational psychologists dealing with Gillingham children.

This arrangement has led to a reduction in the numbers otherwise referred directly to the Clinic. The M.O. concerned has no formal psychiatric training. He acts as a screen determining the urgency of cases for referral, offers some support to the families concerned and, in some cases, is able to help resolve the problems without their having to be referred further.
During the year the work done was as follows :-

Number of cases seen and still attending the CGC	23
Number of cases referred awaiting to be seen ..	8

Cases seen in Gillingham :

1. Total Attendances:

	Appointments	
	Given	Kept
Old cases	77	62
New cases	101	94
Total	178	156

2. Old Cases

Referred to C. G. C.	2	Pre-school	0	
Defaulted: out of area etc.	7	Infants	2	
Brought to Court	1+	Juniors	20	
Closed as "Improved"	15	Total	22	- Boys 15. Girls 7
Continuing in 1972	8	Sec. Modern	9	
Total	33	Independent	2	
		Total	11	- Boys 11. Girls 0

+ plus one who defaulted

3. New Cases

No. of Attendances	Nos.	Ref. CGC	Defaulted: out of area etc.	Closed as "Improved"	Continuing
1	25	5	2	5	13
2	22	1	3	8	10
3	7	-	1	2	4
4	1	-	-	-	1
55 with 94 attendances		6*	6	15	28

* In 1969 44 referred by us. In 1970 31 referred by us. In 1971 8 referred by us.

3. New Cases (contd..)

Pre-school	1	
Infants	8	
Juniors	24	
Total	33	- Boys 22. Girls 11.
Secondary	22	- Boys 15. Girls 7.

In addition, 12 Gillingham children are in Residential Schools for the maladjusted and another 4 are awaiting admission to such schools.

The work done by the school health service obviously has had a useful effect. In the Annual Report of 1969 it was recorded that in the twelve months previous to the Report 302 children were referred to the CGC, 162 had been seen and 91 were awaiting an appointment (this includes Gravesend figures)

Special Tuition Group.

This unit was established by the psychiatrist in consultation with the medical officer of health, educational psychologist and the Chatham and Gillingham education authorities for the treatment and rehabilitation of school refusers. It has served an extremely useful purpose, and a need now exists to have a unit of our own in Gillingham.

Speech Therapy

A speech therapy clinic is held at Marlborough Road at which 92 cases were treated in the year. In addition a speech therapist worked in some of the schools, particularly Danecourt Day E.S.N. School.

There is a waiting list of 21 school and pre-school children needing speech therapy. The waiting period is six months for the first interview, and the urgency of the need for regular speech therapy is ascertained by the speech therapist.

Other Treatment Given

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	65
(b) Pupils who received convalescent treatment under School Health Service arrangements	1
(c) Pupils who have received B.C.G. vaccination	871
(d) Other than (a), (b) and (c) above	-
Total (a) - (d)	937

Provision of Milk

Milk was provided free of charge to all primary school children and Danecourt Day Special School only. During 1971 4,075 children were supplied with milk each day.

107 children were recommended free milk between September and December 1971.

Summary of Health Visitors' Work in Schools in Gillingham during 1971

(1) Total visits to schools	93
(2) Attendances at routine medical inspection	12
(3) Attendances at clinics	65
(4) Visits to homes	178
(5) Examination of heads and bodies re cleanliness ..	9178
(6) Notices sent re nits (children not excluded from school)	39
(7) Notices sent re nits and vermin (children excluded from school)	21

Audiometry

The health visitors have for some years been carrying out audiometric tests on school children when a teacher, school medical officer or general practitioner has expressed a wish for this to be done for a particular child.

The importance of routine checks has been emphasised by results obtained from screen testing all children as early as eight months.

As well as tests made on request, audiometric sweeps are now carried out on certain age groups particularly at 7 years. The time needed to carry out these special surveys is available to the health visitors since the more routine duties of health visitors at medical inspections are now undertaken by the lay health assistants.

During the year 435 tests were carried out.

Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	9178
(b) Total number of individual pupils found to be infested	147
(c) Numbers of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act 1944) ..	-
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act 1944)	-

CONSULTATION CLINICS

During the year 1002 children were seen by the school medical officers at their consultation sessions, 450 by home, office and school appointments and 53 attendances were made at the nurses' sessions. Attendances at the various clinics were as follows :

Gillingham	513
Rainham	366
Twydall	123
Total	1002

Attendances at Treatment Clinics

132 children made attendances for inspection and treatment of minor ailments.

Employment of Children

93 pupils were examined for fitness for employment out of school hours and certificates were given for all those children.

Staff Medical Examinations

The following medical examinations were carried out and X-ray arrangements made in respect of the following during 1971 :

School meals service staff ..	45
Caretakers and cleaners ..	46
Prospective student teachers ..	67
Teachers	31
Clerical and other staff ..	24
Total ..	213

DENTAL SERVICES

During the past year, as in previous years, there has been a great demand in the dental clinics for conservative treatment, and a two months' waiting time for appointments developed in Balmoral Gardens Clinic.

This, of course, means that there is still no improvement in the frequency with which school inspections can be carried out. From the Balmoral Gardens Clinic it is still only possible to visit schools once every two years instead of the annual visit which is normally considered necessary.

This situation is even worse in the Rainham and Twydall Clinics, both of which only operate part time. The number of sessions worked at Rainham have however been increased recently since Mr. O.B.Heyward joined the staff as a part time dental officer. Mr. Heyward had previously been employed for a number of years by the County as a full time school dental officer.

There is still a great demand at all three of our clinics for orthodontic treatment and at each clinic there is always a waiting list for this service. We are very fortunate to have available the assistance of the two County orthodontists who regularly visit all three of our clinics to carry out the diagnosis and treatment planning of the more difficult cases.

Attendances and Treatment.

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	909	464	70	1443
Subsequent visits	2028	1323	195	3546
Total visits	2937	1787	265	4989
Additional courses of treatment commenced	135	35	4	174
Fillings in permanent teeth ..	477	833	159	1469
Fillings in deciduous teeth ..	1554	70	-	1624
Permanent teeth filled ..	425	716	130	1271
Deciduous teeth filled ..	1247	70	-	1317
Permanent teeth extracted ..	9	72	10	91
Deciduous teeth extracted ..	383	124	-	507
General anaesthetics ..	77	30	2	109
Emergencies	188	52	21	261

Number of pupils X-rayed	152
Prophylaxis	158
Teeth otherwise conserved	529
Number of teeth root filled	3
Inlays	1
Crowns	2

Orthodontics

New cases commenced during year ..	19
Cases completed during year	12
Cases discontinued during year	6
No. of removable appliances fitted ..	23
No. of fixed appliances fitted	-
Pupils referred to hospital consultant ..	1

Prosthetics

	Age Groups			
	5 - 9 years	10 - 14 years	15 years and over	Total
Pupils supplied with F.U. or F.L. (first time)	1	-	-	1
Pupils supplied with other dentures (first time)	-	3	3	6
Number of dentures supplied ..	1	3	3	7

Anaesthetics

General anaesthetics administered by dental officers .. .. Nil

Inspections :

(a) First inspection at school - number of pupils	3073
(b) First inspection at clinic - number of pupils	396
Number of (a) + (b) found to require treatment ..	1376
Number of (a) + (b) offered treatment	1156
(c) Pupils re-inspected at school or clinic ..	129
Number of (c) found to require treatment	82

Sessions

Sessions devoted to treatment	440
Sessions devoted to inspection	27
Sessions devoted to dental health education ..	1

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
Pupils supplied with F.U. or F.E. (first time)				
First visit	909	434	70	1443
Subsequent visits	2028	1323	195	3546
Total visits	2937	1757	265	4989
Pupils supplied with other dentures (first time)				
Additional courses of treatment commenced	135			
Number of dentures supplied				
Fillings in permanent teeth ..	477	833	159	1469
Fillings in deciduous teeth ..	1554	70		1624
Permanent teeth filled ..	1247	70		1317
Deciduous teeth filled ..	9	72	10	91
Permanent teeth extracted ..	383	124		507
Deciduous teeth extracted ..	77			77
General anaesthetics	188			188
Emergencies				

Anaesthetics

General anaesthetics administered by dental officers

Inspections

(a) First inspection at school - number of pupils

(b) First inspection at clinic - number of pupils

Number of pupils X-rayed 152

Prophylaxis 159

Teeth scaled and cleaned .. .. .. 3,[illegible]

Number of teeth filled 1

Inlays 2

Crowns .. .. .. -

Orthodontics

New cases commenced during year ..	440
Cases completed during year ..	27
Cases discontinued during year ..	1
No. of removable appliances fitted ..	-
No. of fixed appliances fitted	1
Pupils referred to hospital consultant ..	

Number of (a) + (b) found to require treatment ..	1376
Number of (a) + (b) offered treatment ..	1156
(c) Pupils re-inspected at school or clinic ..	129
Number of (c) found to require treatment	82

Sessions

Sessions devoted to treatment	440
Sessions devoted to inspection	27
Sessions devoted to investigation, health education	1