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BOROUGH OF GOSPORT



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

DIVISIONAL MEDICAL OFFICER

I. D. M. NELSON

M.B., B.CH., B.A.O., D.P.H., F.R.S.H.

1966

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BOROUGH OF GOSPORT

HEALTH AND WELFARE DEPARTMENT, TOWN HALL, GOSPORT.

TO THE MAYOR, ALDERMEN AND COUNCILLORS,

I am happy to report that the health of the community is apparently good if one looks at the vital statistics but these are only part of the index of "health". It is easily evident that the death rate from lung cancer continues to rise. How much, one wonders, is cigarette smoking in the Borough a reflection of the easy way the Royal Navy in these parts encourages young men and women to start the habit.

Not revealed in vital statistics is the increased demand for help from mental welfare officers for those townspeople who are mentally ill and the continued demanding work of the Co-

ordinating Committee.

Gosport was chosen during 1965 as the Pilot Study Area by the Central Office of Information who had been asked by the National Corporation for the Care of Old People to enquire into the needs of the elderly. This pilot survey was completed in 1966 and the National Corporation decided to continue their survey on a wider basis elsewhere. The Health and Welfare Department were pleased to take part in this research and the impartial views of experienced observers about our services were good for us all. We wait with interest the publication of the

final report.

During the year contractors put together a housing estate on the former Grange Airfield. The houses, industrialised units built for Royal Naval personnel, began to be occupied in the Autumn. It was known there would eventually be 2,000—3,000 houses on the estate. The Local Health Authority, General Practitioners and the Architects for the project had been discussing how best to provide surgeries and clinics for the area for some time without much success when a recently built Church Hall in the area came up for sale. The hall was acquired by the Local Health Authority and four groups of General Practitioners practising in that part of the town agreed to work from a Health Centre which was to be fashioned out of the hall.

It is hoped that this first Health Centre in the Borough will

be in use by this time next year.

It will be recalled that I mentioned last year an experimental Hovercraft Service from Gosport to the Isle of Wight. This appears to have become a permanent and speedy way of travel to the Isle but, as with most new things, there are drawbacks and we have had complaints about noise. The operators are sensitive about this and have re-routed their craft to help.

The world's first Hovercraft Show was held in the Borough in June and as further developments in local Hovercraft Services are contemplated, it was good to see from the stands at this Show that engineers are constantly striving to cut down the noise of this type of craft and have made improvements in propeller design. It is hoped these improvements will soon be seen in new craft coming along, for travel by Hovercraft will certainly be accepted locally if the noise of running the craft can be diminished.

Another matter of local and national interest is cervical cytology. The department have had many requests from individuals and women's organisations for local service. The possibility of this depends on two things: available technicians to examine the slides and doctors who will carry out this work in a Local Authority clinic. The Senior Pathologist (Dr. E. M. Darmady) of the Portsmouth and Isle of Wight Pathological Service, and his staff, hope that the money for this service and technicians to man it will soon be available and they are doing all they can to help but finding doctors to staff a Local Authority clinic is not easy and I have been unable to find a suitable doctor; meantime the local General Practitioners are giving a service to those who request it.

My last comment is about Health Education and reference to this section of the report will show that this work has been successfully expanded. One Health Visitor has certainly made tremendous strides here in getting the co-operation of school teachers. Due to her drive Local Authority doctors and Health Visitors are now being regularly accepted in local schools and are taking their place alongside the teaching staff. It is a great step forward when we are no longer thought of as "routine medical inspectors" and Head Teachers readily invite us to come into their schools to help them.

I. D. M. NELSON, Medical Officer of Health and Divisional Medical Officer.

HEALTH AND WELFARE COMMITTEE

Chairman: Alderman J. A. Wheeler, I.S.M., J.P. Vice-Chairman: His Worship the Mayor (Councillor H. W. Cooley).

ALDERMAN C. W. L. GILES.
ALDERMAN H. T. ROGERS, O.B.E.
COUNCILLOR MRS. E. C. M. C. BOULIND.
COUNCILLOR H. A. GRIGG.
COUNCILLOR MRS. J. K. L. HAYWARD.
COUNCILLOR E. T. W. LANDER.
COUNCILLOR H. R. PINK.
COUNCILLOR R. C. MARTIN.

COUNCILLOR P. V. PRITCHARD, M.D., F.R.C.P., F.R.F.P.S., D.P.H.

COUNCILLOR MRS. G. M. SKIPPER.

COUNCILLOR A. F. TAVENER.

Co-opted Members :-

MRS. I. Adams (British Red Cross Society).
A. J. Eales, Esq., J.P. (Portsmouth Group Hospital Management Committee).
MRS. I. G. Cowan (Women's Voluntary Services).
DR. I. A. Buchanan (Gosport Medical Committee).
MRS. D. L. RIDDELL (St. John Ambulance Brigade).
MISS B. M. ROGERS (Child Welfare Centre Voluntary Workers).

STAFF

Medical Officer of Health and Divisional Medical Officer	I. D. M. NELSON, M.B., B.CH., B.A.O.,
Deputy Medical Officer of Health and	
Deputy Divisional Medical Officer	D.OBST.R.C.O.G., D.P.H.
Departmental Medical Officer	G. T. Balean, M.B., B.S., M.R.C.S.,
Control of the contro	L.R.C.P., D.T.M. & M.
Departmental Medical Officers	R. Bradmore, M.B., CH.B., D.C.H., C.P.H.
(part-time)	A D Manusco M. D. OM. D. C.H., C.F.H.
	A. D. Munro, M.B., CH.B.
Chest Physician (part-time)	J. C. Hesketh, M.B., B.S., M.R.C.S.,
	L.R.C.P.
Consultant Child Psychiatrist (part-time)	I. Hadfield, B.M., B.CH., D.P.M.
Area Dental Officer	H. J. MILLER, L.D.S., R.C.S.
CITED IN THE INT.	H. C. Copp. opp. p.c.s.
Chief Public Health Inspector	H. G. Cope, cert.r.s.i.,
	Meat and Foods, Sanitary Science.
Area Nursing Officer (part-time)	MISS W. M. MACKIE, S.R.N.,
	S.C.M., H.V.CERT., Q.N.
Home Help Organiser	Mrs. D. Moore.
Malron Doddo House Day November	
Matron, Podds House Day Nursery	MISS J. A. TOWNSEND, N.N.E.B.
Mental Welfare Officers	K. Harwood, S.R.N., R.M.N., Q.N.
	T. J. D. SMITH, S.R.N., R.M.N.
Chief Administrative Assistant	B. Bayford.
J MILLO IZOUGHUM III	DI DILITORDI

SECTION 1

EXTRACTS FROM VITAL STATISTICS

Area				6,7	70 acres
Estimated Population	(Mid-Year 196	36)			73,610
Rateable Value				£2	,622,121
Product of Penny Rat	e (Estimated	1966-67)			€10,750
Estimated Number of					21,400
					England
			GOSI		& Wales
			1965	1966	1966
Live Births:			1 101	1 100	050 000
Number				18.6	850,000 17.7
Rate per 1,000 Popu			19.2	10.0	17.7
Number			106	91	
Percentage of Total				6.20	1/0
Stillbirths:			,	0	0
Number			15	19	13,300
Rate per 1,000 Total				12.8	
Total Live and Stil	l Births		1,506	1,479	863,300
Total Deaths			648	642	563,626
Death Rate per 1,000			10.8		11.7
Infant Deaths (Deaths at Ages Un	der 1 Year)		33	30	16,147
Infant Mortality Ra					
Total Infant Deaths					
per 1,0 Legitimate Infant I	000 Total Live Deaths	Births	22.1	20.5	19.0
per 1,000 Le	egitimate Live	Births	20.2	19.7	
Illegitimate Infant per 1,000 Ille	egitimate Live	Births	47.2	33.0	
Neonatal Mortality					
Deaths at Ages Uno		TD: /1	10.5	0.0	10.0
	000 Total Live		10.7	8.2	12.9
Early Neonatal Mo		:			
Deaths at Ages Unc per 1,0	000 Total Live	Births	8.7	6.9	11.1
Perinatal Mortality	Rate:				
Stillbirths and De One Week per 1 Still Births	aths at Ages		18.6	19.6	26.3
	10000				

Maternal Mortality:				England
I I g X 75 let le le le le		GOSI	PORT	& Wales
		1965	1966	1966
Number of Maternal Deaths		Nil	Nil	223
Rate per 1,000 Total Live and Still	Births	Nil	Nil	0.26

Area Comparability Factors: Births 0.94

Deaths 1.24

Population Trends:

1956	 63,160	1962	 68,850
1958	 65,220	1964	 72,240
1960	 65,760	1966	 73,610

DEATHS FROM CANCER (Rate per 1000 Pop.)

			GO	SPO	RT	E	ngland	& Wales	
Lung/Bronchus	Year 1963 1964 1965 1966	M. 20 21 23 33	F. 7 6 5 6	Ttl. 27 27 28 39	Rate .483 .467 .468 .657	M. 20,742 21,476 22,231 22,606	3,895 4,168	Ttl. 24,422 25,371 26,399 27,019	Rate .519 .535 .553 .562
All Other Cancer	1963 1964 1965 1966	45 40 47 46	49 47 57 43	94 87 104 89	1.681 1.505 1.738 1.499	34,438 34,771 35,233 35,959	44,706	77,958 79,327 79,939 81,123	1.658 1.674 1.674 1.687

Infectious Diseases:

6 1 2	3 2 3
1 2	2 3
2	3
1	
1	1
_	1
1,023	557
2	1
_	1
_	1
13	7
_	1
1	2
27	13
18*	24
3	3
6	18
	2 - 13 - 1 27 18* 3

^{*}Mass Radiography Unit visited Gosport April-May, 1965.

DEATHS IN ORDER OF MAGNITUDE.

			4 weeks	1	0	cı	-	35	65	cc.	3	6/	Total	Conne
Diseases of	Sex	Under 4 weeks	and under	to 4	to 14	to 24	34	44	54	2 75	74	Over	lotal	Total
Circulatory System	M.				-	_		es =-	10	34	38	31	117	220
Neoplasms	M.			-	2		67	4	0	19	29	18	79	100
	Н			15		_	1	7	3	13	91	CI	43	071
Dispasses of	N			-	-	1		-	2	6	10	16	38	-
Nervous System	(T					-	-	-	7	7	14	41	59	97
Discoso of	M		11	-	-	-	-	-	-1	10	16	17	52	
Discases Of Respiratory System	1		67					-	27	3	6	21	37	68
Other Defend and	M		-	-	-	-	-	-	2	1	4	0	17	
Other Defined and III-Defined Diseases	T.	- 10		1	-		67	2	01	2	2	10	30	47
A consideration	M			-	-	00	-	-	1		1	3	17	
Accidents	E E			-				-		1	1	2	00	25
,	3.1			-	-	-	-					2	3	
Diseases of	M.		6					-		-	1	3	7	10
				-	-	-	-			-	cr	-	ıc	
Suicide	E N						67	1	_				4	6
				-	-	-	-	-			-	-	4	
Diseases of Genito-Urinary System	F.							-					-	10
Congenital Malformations	M.	2 -	1						_		n h		4-	ıc
Homicide	M.		1	3								-	- 4	c
Infective and	M.			-			_							- 5
A discount of the second	M.	9	14	2	8	10	7	6	22	69	102	94	338	649
Totals	(T	9	4	9	-	-	0	9	12	25	74	164	304	1
Crawn Toware		19	81	00	4	11	12	15	34	94	176	258	642	

Note: 67.6% (434) of the total deaths (642) occurred at ages 65 and over.

EMPLOYMENT IN GOSPORT IN 1966

Mr. P. Allerton, Manager of the local office of the Ministry of Labour, has kindly let me have the following commentary on the town's employment position during the year:—

"There was little change in the industrial pattern of the area although limited expansion took place in the engineering and clothing industries.

The year started with a high level of demand for both men and women in most occupations, with skilled workers at a premium. This position remained unchanged until early autumn when the Government measures, taken in an effort to stabilise the country's economy, began to have an effect. Vacancies for women factory workers became almost nonexistent and unskilled men becoming unemployed had increasing difficulty in finding alternative work other than in Government establishments. The number of unfilled vacancies notified by local employers fell from 389 Men and 211 Women in January to 217 Men and 29 Women in December. It was also known that local manufacturing firms would be introducing short-time working for women employees immediately after Christmas as a result of reduced production programmes. Nevertheless, despite the adverse last quarter of the year, the average unemployment of 192 persons was very low and, in fact, was slightly better than the previous year's figure which had been the lowest since the end of World War II. The largest group of men unemployed at the end of the year consisted of unskilled building workers and difficulty was also being found in placing building craftsmen-many of whom had previously been working on a self-employed basis. Also despite the fall-off in placing activity during the last quarter of the year, work was found locally for 1,356 Men and 805 Women-the highest yearly total placed by Gosport Employment Exchange since 1955.

The introduction in October of the Earnings Related Supplement Scheme gave increased financial help to many unemployed persons. The supplements are also paid to trainees under the vocational training scheme, trainees for sheltered employment and persons attending courses of industrial rehabilitation. The "cushion" provided by these earnings related supplements (which can be as much as £7 per week) enables unskilled workers to undertake training without a sharp drop in income.

Local employers have continued to afford employment to handicapped persons and work was found for 71 registered disabled persons during the year. The rate of unemployment among registered disabled persons remained at just over 20 for most of the year but rose to 41 in December when local labour demands were reduced.

Since the introduction of the Industrial Training Acts opportunities for young persons have been considerably enhanced and increasing use has been made of the facilities offered for first year full-time apprenticeship training at centres set up for this purpose. During the 12 months ended September 1966, the Youth Employment Office placed 540 young persons in employment, and for most of the year very few young people were registered as unemployed."

SECTION 2

PROVISION OF HEALTH SERVICES FOR THE AREA

Care of	Mothers	and	Young	Children
---------	---------	-----	-------	----------

Live Births	Males	Females	Total 1966	Total 1965
Legitimate	 710	659	1,369	1,385
Illegitimate	 52	39	91	106
Total	 762	698	1,460	1,491
Still Births				
Legitimate	 9	8	17	15
Illegitimate	 1	1	2	
Total	 10	9	19	15

Infant Mortality

There were 30 deaths of children aged under 1 year, giving a rate of 20.5. Ten of the deaths occurred during the first week of life, resulting in a perinatal mortality rate of 19.6, that is the number of infant deaths under one week plus stillbirths per 1,000 total live stillbirths. Two deaths occurred between the ages of 1 week and 4 weeks, and the remaining 18 deaths between the ages of 4 weeks and 1 year.

The causes of 30 infant deaths were :-

Pneumonia				11
Bronchitis				1
Other Respirat	tory Dise	ase		1
Congenital Ma	lformatio	ns		4
Gastritis, Ente	ritis and	Diarrhoe	a	2
Homicide				1
Other Defined	& Ill-De	efined Dis	seases	10

TABLE OF BIRTHS AND INFANT MORTALITY RATES.

Year		ve ths		till- ths		ant aths		natal eaths		inatal aths
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
1959	1,337	19.8	24	17.6	31	23.2	22	16.4	43	31.6
1960	1,414	20.9	18	12.5	18	12.8	12	8.5	29	20.2
1961	1,477	21.6	19	12.7	24	16.2	20	13.5	34	22.7
1962	1,511	21.5	23	15.0	30	19.8	19	12.5	40	26.1
1963	1,484	19.9	17	11.3	26	17.5	14	9.4	28	18.6
1964	1.596	20.7	22	13.6	44	25.9	23	13.5	41	23.8
1965	1,491	19.2	15	10.0	33	22.1	16	10.7	28	18.6
1966	1,460	18.6	19	12.8	30	20.5	12	8.2	29	19.6

Maternal Mortality

Again no Gosport woman died in childbirth—the last recorded case was in 1960.

PLACES OF BIRTH. LIVE AND STILL BIRTHS.

			DOMICILIARY	JAR	A	II	INSTITUTIONAL	LION	AL		TOTAL	AL	
		Total 19	8	Still 19	Births 165	Total 19	Live &	Still 18	Births 965	Total 19	Live &	Still 19	Births
		No.	of	No.	% of No. Total	No.	% of % of No. Total	No.	% of Total	No.	% of % of No. Total	No.	% of Total
At Home Blake M.H	::	465	465 31.4%	502	33.3%	360	24.3%	418	27.8%	46 5 360	31.4% 24.3%	502 418	33.3% 27.8%
Total		465	465 31.4%	502	33.3%	360	24.3%	418	27.8%	825	55.7%	920	61.1%
Outside Gosport St. Mary's Hospital Blackbrook M.H. Others		-	.1%		a sallest	608 19 26	41.1% 1.3% 1.8%	506 58 22	33.6% 3.8% 1.5%	608 19 27	41.1% 1.3% 1.9%	506 58 22	33.6% 3.8% 1.5%
Total	:	1	.1%			653	44.2%	586	38.9%	654	44.3%	586	38.9%
Totals	:	466	466 31.5%	502	33.3%	1013	68.5%	1004	66.7%	1479		1506	

Compared with 1965;

BEFORE 10TH DAY Total Live & Still Births decreased (1506—1479)

Home Confinements Decreased (502—466 and 33.3%—31.5%)

Confinements in Maternity Hospitals & Homes increased (1004—1013 and 66.7%—68.5%)

Confinements in Maternity Pospitals & Homes increased (1004—1013 and 66.7%—68.5%) 276 BEFORE 10TH DAY BEFORE 48 HOURS Early Discharges

(not detailed prior to 1966) 1966

Premature Infants

Born in	Hospital	 	65	(58	in	1965)
Born at	-	 	6	(7	in	1965)
Total		 	71	(65	in	1965)

Of those born in hospital, 3 died within 24 hours and another died before 7 days; none of the 6 born at home was required to be transferred to hospital and none of them died within 28 days.

In addition, 10 of the total 19 stillbirths in the year were premature, 9 occurring in hospital and 1 at home.

Congenital Abnormalities

There is full co-operation with general practitioners, hospitals and maternity homes for the notification of congenital defects apparent at birth. Birth notification cards record these defects and, where necessary, a questionnaire about details is completed. Monthly returns are made to the Registrar General.

Twelve cases were notified (compared with 17 in 1965); 1 was still-born, 1 died within 10 minutes, 1 within 24 hours, 1 within 8 days, and 1 before 1 year old. The death of a 45 year old man was also attributed to congenital malformation.

The Notification Rate per 1,000 Live and Still Births was 8.11 compared with 11.28 in 1965 and also compares favourably with the Registrar General's statistics for 1965 (last year available) for other parts of Hampshire and for England and Wales:—

			Nun	nber	Rate p Live & St	er 1000 till Births
			1965	1966	1965	1966
GOSPORT			17	12	11.28	8.11
Portsmouth C.B.			52	ole	14.68	ele e
Hampshire Administ	rative C	County	265	a	14.86	वि
Hampshire (inc. Cour	nty Bor	oughs)	430	a.	15.79	available
England & Wales		1	6,580	available	18.92	av
Bournemouth C.B.			38		18.94	4
Southampton C.B.			75	not	19.43	not

Ante-Natal Clinics

Clinics continued to be held by General Practitioners at their own surgeries with the assistance of group-attached Midwives and Health Visitors.

Ante-Natal Relaxation Classes

Classes continued to be held at The Gables, Spring Garden Lane (Tuesday afternoons and evenings) and at Rowner C.W.C., (Friday afternoons). A total of 16 Classes were held:—

		Total Wo Hospital Bookings			Total Att.
The Gables (afternoons)	51	14	31	45	259
The Gables (evenings)*	35	6	8	14	104
Rowner C.W.C. (afternoons)	48	12	56	68	449
	134	32	95	127	812

^{*} Owing to lack of demand, Evening Class was discontinued after August.

Child Welfare Centres

Alverstoke	Brodrick Hall,			Friday	
	Clayhall Road			fternoon	
Bridgemary	Hall of Christ t	the King	, Т	hursday	У
	Wych Lane.		a	fternoon	S
Elson	Blake Materni	ty Home		Tuesday	
	Ham Lane.		morning	gs & afte	ernoons
Forton	Crossways Ha	11,	1	`hursday	y
	The Crossway.		at	ternoon	S
Lee-on-Solent	Lowry Memor	ial Hall		Fuesday	
	High St., Lee-			fternoon	
Rowner	Rowner Healt			ednesda	av
	Brune Lane.		morning		
Town	2 Stoke Road,			ednesda	
	Gosport.		morning		
				,	
Sessions at all Cent	res attended by	7:		1966	1965
Medical Officer				405	395
Health Visitor				110	112
Total Sessions at al				515	507
			(5.50)		
First Attendances				1 107	1 970
Children Born					
Children Born		20\		1,004	
	1961-64 (1960-6	33)	***	505	376
Total Attendances	at all Centres			24,133	28,683
Average Attendance	e per Session			47	56
Total Number of Cl	nildren Seen by	Medical	Officer	5,871	5,606
Total Number of	Children refer	red for	special		
	dvice to G.P.				
				133	185
*					
Number of Children				201	079
-		_		291	273
Total Number of In	mm. and Vacc.	Doses g	iven at	2	
all Centres				4,315	3,927

Dental Treatment

187 Dental Officer Sessions (182 for Treatment and 5 for Health Education) were devoted to Expectant and Nursing Mothers and Children under 5.

Actions and children ander o.	Children Under 5	
Attendances:		
First Attendances	412	29
Subsequent Attendances	743	57
	1,155	86
Inspections:		
First Inspections	570	24
Requiring Treatment	292	22
Offered Treatment	290	22
Treatments:		
Fillings	919	59
Teeth Filled	803	53
Teeth Extracted	212	33
General Anaesthetics (Dental		
Anaesthetist)	103	2
Emergency Visits by Patients	37	2 5
Patients X-Rayed	3	3
Patients Treated by Scaling		
and/or Removal of Stains	358	24
Teeth Otherwise Conserved	167	4
Teeth Root Filled	2	
Courses of Treatment additional		
to First Course	119	4
Courses of Treatment Completed	418	25
Prosthetics:		
Full Dentures supplied		1
Partial Dentures supplied		3

Mother and Baby Homes

There are none in the Borough. Financial responsibility is accepted for cases sent to Homes elsewhere but there were no cases in 1966.

No field worker is employed for the Care of Illegitimate Children—there is full co-operation between Health Visitors, County Children's Officers, Welfare Officers, and Diocesan Moral Welfare Workers who occupy local authority accommodation and work closely with our officers.

Welfare Foods

National Welfare Foods are sold at Child Welfare Centres when open, except Stoke Road where there is a Welfare Foods Centre. Up to November the latter Centre was open daily Mondays to Fridays and then opening was curtailed to Wednesdays only (the same day as the Child Welfare Centre is held there). Any emergency requests for the supply of National Welfare Foods were dealt with at the Health Department.

		e Foods		Welfare ntres		otal
Sales:	1966	1965	1966	1965	1966	1965
National Dried Milk (tins)	3,465	4,128	6,349	5,211	9,814	9,339
Orange Juice (bottles)	5,664	6,215	13,079	12,326	18,743	18,541
Cod Liver Oil (bottles)	404	405	823	853	1,227	1,258
Vitamin Tablets (packets)	490	701	848	945	1,338	1,646

Proprietary Welfare Foods continue to be sold at Child Welfare Centres and sales in the financial year 1966-67 amounted to £2,882 compared with £3,565 in 1965-66.

Day Nursery

Podds House, 185 Brockhurst Road, is a non-residential Day Nursery with 55 approved places and a staff of Matron, Warden, 3 Staff Nursery Nurses, 7 Nursery Assistants, and 4 Domestics.

It may be remembered from last year's report that a scheme was being worked out for improving accommodation at this Nursery and there had been discussions between the Hampshire County Council and the Ministry of Health about this. These discussions followed the revised standards of accommodation which were set out in Circular 5/65 from the Ministry. Owing to the Government financial restrictions no progress was made in improving the Nursery but plans are being made to do this.

		iority ases		Priority ses	Т	otal
On Register at End of Year	1966	1965	1966	1965	1966	1965
	62	64	5	17	67	81
Total Half-Day Attendances	23,968	21,329	2,513	6,194	26,481	27,523
Average Half-Day Attendances		42	5	12	52	54

Registered Nurseries and Daily Minders

There are now 7 large registered Nurseries in the Borough :-

ROWNER CHURCH HALL,	Thursday	70 children
Brune Lane, Rowner.	9.30 to noon	(0-5 years)
LOWRY MEMORIAL HALL,	Thursday	50 children
High Street, Lee-on-Solent.	9.30 to 12.30	(0-5 years)
ROYAL SAILORS' REST,	Monday-Friday	24 children
Founders Way, Bridgemary.	9 to noon	(3-5 years)
G.C.A. Music Room,	Monday—Friday	24 children
Bury House, Bury Road.	9 to noon	(3-5 years)
NICHOLSON MEMORIAL HALL,	Monday—Friday	16 children
Stoke Road, Gosport.	9 to noon	(2-5 years)

BRIDGEMARY COMMUNITY CEN.	Monday-Friday	16 children
Brewers Lane.	9 to noon	(3-5 years)
ST. THOMAS'S CHURCH HALL,	Monday—Friday	30 children
Elson Road.	9 to noon	(2-5 years)

The number of Minders who are looking after children in their own homes have now risen to 10 compared with 4 last year and the total number of children minded at Registered Nurseries and Daily Minders is now 296.

A departmental Medical Officer and Health Visitors regularly inspect these premises and as far as possible we request that the children be immunised against the usual childhood diseases and vaccinated against smallpox. Each child is entitled to one-third of a pint of Milk free per day if the Minders apply to the Ministry of Health for this concession and most of them have done so.

Midwifery

There was no change in the combined establishment of Midwives and Nurses. Two full-time midwives resigned and three full-time appointments were made—the third to replace two part-time midwives.

Five of our midwives are approved teachers. Pupil Midwives from Training Courses at Royal Hants. County Hospital, Winchester, and Battle Hospital, Reading, are normally accepted for the regulation Part II three-months district training; during the year 13 pupils completed such training and 4 were undergoing training at the end of the year. By special arrangement with the Central Midwives Board, one pupil was accepted in September for the whole six-months of her Part II training—district training under our midwives' supervision and, by the kind co-operation of the Medical Officer of Health, Portsmouth, tutorial training at Portsmouth. This was the first time such Part II training procedure had been used in the borough and the pupil was successful in Part II midwife's examination.

Compared with 1965, work of the domiciliary midwives was much the same in total, a decrease in home confinements being accompanied by an increase in early hospital discharges and in attendances at clinics:—

Home Confi	nements:			1966	1965
Doctor	Booked			 475	505
Doctor	Not Booke	ed		 1	5
Total				 476	510
Early Hosp	ital Discha	rges:			
Before	48 Hours			 181	(not)
48 Hou	rs and Bef	ore 10th	n Day	 95	(recorded)
Total				 276	223

Attendances at Ante-Natal Clinics	1966	1965
(at G.P. Surgeries)	1,113	972
Attendances at Relaxation Classes	28	10
Total Midwifery Visits	14,770	15,322

The increasing tendency for early hospital discharges is clearly shown:—

1963—153 1964—181 1965—223 1966—276

i.e.—Progressive increases of 28 (18.3%), 42(23.2%) and 53(23.8%) with a total increase of 123(80.4%) from 1963 to 1966. Also, in 1966, the discharges before 48 hours (181) were 65.6% of the total (276) and were equal to the total early discharges in 1964.

Health Visiting

There was no change in the establishment and the only change in personnel was the replacement of one of the part-time School and Clinic Nurses.

Health Visitors/School Nurses ... 10 Whole-Time Tuberculosis, School and Clinic Nurse ... 1 Whole-Time School and Clinic Nurses ... 3 Part-Time

Time spent on Health Education continued to increase. The one Health Visitor specialising in Health Education increased the proportion of her time to about one-third, almost doubling her 1965 proportion. In addition, most of the other health visitors were instructed in the use of the cine-talkie-projector and increased their total time on Health Education Sessions from 10 in 1965 to 41 in 1966. The total sessions devoted to Health Education Talks, etc., were 204 in 1966 compared with 104 in 1965. There were also increases in the total sessions for Hygiene, Vision Testing, Hearing, Home Visiting, B.C.G. Vaccination, Ante-Natal Relaxation Classes, Child Welfare Centres, and G.P. Surgeries:—

Sessional Division	n of T	ime				Sess	ions
Schools:						1966	1965
Selection Visits						73	81
School Medical	Inspect	tions				431	$469\frac{1}{2}$
Hygiene	-					1541	71
				***		294	201
Local Health Aut	hority:						
Ante-Natal Rel						127	79
Child Welfare (1,324	1,108
Special Immun		& Vaccin	nation A	Authority (linics	66	61
Chest						116	193
B.C.G.				***		125	57
Hearing			***			991	64
G.P. Surgeries						546	3281
Health Educat		ks, etc.				204	104
General:							
Courses						67	99
Home Visits						2,028	1,8971
Other Sessions		dinating	Cttee.,	Meetings,	etc.)	133	1451

C	ases Visited by Health Vi	isite	ors	Ca	ses	Tota	l Visits
	Children Under 5:			1966	1965	1966	1965
	Born in 1966 (1965)			1,380	1,547		
	Born in 1965 (1964)			1,111	1,079		
	Born in 1961-64 (1960-63)			1,326	1,534		
	Total			3,817	4,160	10,900	10,810
	Aged 65 and Over:						
	Total Cases			113	110	375	461
	Visited at request of G.P.	or	Hospital	69	79		
	Mentally Disordered:						
	Total Cases			29	21	86	116
	Visited at request of G.P.	OF	Hospital	11	11		
	Hospital Discharges						
	(other than Maternity or Me	nta	Hosp.):				
	Total Cases			6	6	21	9
	Visited at request of G.P.			4	3		
	Tuberculous Households			17	33	45	104
	Households for Other Infect	ious	Diseases	15	_	18	
			to School	Children		505	456
			to Epectar			41	32
			to Social I			123	157
			s to Handi			15	9

Home Nursing

No change in combined establishment for Nurses and Midwives, but a decrease in the pressure of work for Nurses enabled the part-time relief to be partly used for midwifery services. Compared with 1965, there was an all-round decrease in Cases attended by the Home Nurses; this was most marked in the Cases Aged 65 and over and in the Number of Visits for Injections Only:—

Cases Under 5 years	5:		1966	1965
New Cases			 15	16
Total Cases			 16	17
Cases Aged 65 and	Over:			
New Cases			 350	488
Total Cases			 496	626
Others:				
New Cases			 190	215
Total Cases			 220	252
Total New Cases			 555	719
Total Cases			 732	895
Total Visits			 21,405	22,700
Total Visits for Inje	ections C	nly	 7,073	8,215

Vaccination and Immunisation

Records continued to be required only in respect of children under 16 years of age. Choice of operator also continued as in previous years (i.e. family doctor or, in appropriate cases, L.A. medical staff at child welfare centres, day nursery and junior training centre).

(a) Smallpox	Age at Date of			Number Revaccinated		
	Vaccination Under 1 year 1 year	1966 90 727		1966	1965	
	2—4 years 5—15 years	263 146	111 27	29 280	43 192	
	Total	1,226	1,066	309	235	

Prior to 1963, the policy was that children should be vaccinated before they were a year old, but in November 1962 (M.H.Circ.M.L.10/62) the Ministry of Health recommended that children should preferably be vaccinated in the second year of life.

Since 1957, percentages of children vaccinated (a) in first year of life and (b) in second year, have been:—

	Percentage	es Vaccinated		Percentage	es Vaccinated
		Second Year			Second Year
Year	of Life	of Life	Year	of Life	of Life
1957	76%	4%	1962	72%	15%
1958	70%	3%	1963	17%	17%
1959	71%	4%	1964	14%	38%
1960	59%	5%	1965	11%	47%
1961	60%	11%	1966	6%	49%
	10.1		-		

1957—61: Downward Trend.

1962: Revival—effect of Outbreaks of Smallpox in

Midlands and S. Wales.

1963 onwards: Shows gradual change over from "first year" to

"second year." Also large decrease emphasises comparative complacency following no local incidence and, particularly no doubt, no further

major outbreaks.

(b) DIPHTHERIA, TETANUS, WHOOPING COUGH, POLIOMYELITIS

						Othe	rs		
		Year of Birth				Under			
Primary Courses:	1966	1965	1964	1963	1959-62	16	Total	1965	
Quadrilin	6	21	1	-	1	_	29	91	
Triple Antigen	507	652	55	21	21	13	1,269	1,297	
Diphtheria/Tetanus	-	1	1		2	4	8	8	
Poliomyelitis	294	797	109	44	119	31	1,394	1,288	
Total Diptheria	513	674	57	21	24	17	1,306	1,397	
Total Tetanus	513	674	57	21	24	17	1,306	1,396	
Tl. Whooping Cough	513	673	56	-21	22	13	1,298	1,388	
Total Poliomyelitis	300	818	110	44	120	31	1,423	1,379	

	4	15	0	-			
1		1.07	4	2		23	27
	128	265	71	552	74	1,091	837
	4	5	3	135	24	171	190
-		-		2	-	2	2
-	20	33	37	847	111	1,048	1,159
1	136	285	76	691	98	1,287	1,056
1	136	285	76	689			1,054
1	132	280	73	554	74	1,114	864
	24	48	39	849	111	1,071	1,186
	1 1 1 1 -	- 4 - 20 - 1 136 1 136 1 132	- 4 5 - 20 33 1 136 285 1 136 285 1 132 280	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	- 4 5 3 135 - 20 33 37 847 1 136 285 76 691 1 136 285 76 689 1 132 280 73 554	- 4 5 3 135 24 - 20 33 37 847 111 1 136 285 76 691 98 1 136 285 76 689 98 1 132 280 73 554 74	- 4 5 3 135 24 171 - 2 - 2 - 2 - 20 33 37 847 111 1,048 1 136 285 76 691 98 1,287 1 136 285 76 689 98 1,285 1 132 280 73 554 74 1,114

(c) DIPHTHERIA AND POLIOMYELITIS

(i) Primary Courses:—Immunisation against Diphtheria commenced in Gosport in 1938 for children under school leaving age, but Immunisation against Poliomyelitis only commenced with the introduction of the national scheme in 1956 which was only on a limited scale until late 1958. Since 1957, the percentages of children under 16 years of age who had completed primary courses at the end of the year have been:—

There has been gradual improvement to quite a good acceptance rate but, as Immunisation is *free* and its efficacy has been proved by the very marked decrease in the incidence of these diseases since immunisation against them was introduced, and *maximum protection* can only be achieved by a 100% acceptance rate, there is every reason why an even higher acceptance rate should be attained.

Parents should guard against complacency and a false sense of security induced by no local incidence and the greatly reduced national incidence of these diseases in recent years.

(ii) Reinforcing Doses:—For immunisation to remain effective it is essential that, in addition to primary courses in infancy, reinforcing doses should be given—against diphtheria at school entry age and again after 8 years of age, and against poliomyelitis at school entry age. Our records for reinforcing doses are considerably lower than they should be:—

There is obvious need for considerable improvement here. Again, parents should guard against "primary course complacency" and maintain the protection of their children by seeing that all advised Reinforcing Doses are given. Advise is always readily available from family doctors, welfare centre doctors, health visitors, and at the health department.

Prevention of Illness, Care and After-care. Tuberculosis

NOTIFICATIONS.

]	Puln	nona	ary	_	_	Non-Pulmonary							
	Under 5	5 to 14	15 to 24	25 to 44	45 to 64	65 & Over	Total	Under 5	5 to 14	15 to 24	25 to 44	45 to 64	65 & Over	Total	Grand
1957	1		8	16	6	1	32	1-		3	1	1		5	37
1958*	_	1	9	22	18	3	53	-	-	2	3	1	-	6	59
1959		_	6	6	8	1	21	-	_	-	-	-	-	-	21
1960*	-3	_	6	21	6	7	43	-	_	2			1	3	46
1961	_	_	9	5	5	2	21	-	_	_	_	-	-	-	21
1962	_		4	6	7	2	19	-		_	1	-	-	1	20
1963*	_		1	10	14	1	26	-	1	_		1	1	3	29
1964	1	1	5	3	6	8	24	1-	-	1	_	1	1	3	27
1965*	1	_	5	5	5	2	18	-	-	-	1	1	1	3	21
1966	_	-	_	3	2	2	7			_	-	1	-	1	8

^{*}Mass Radiography Unit visited Gosport in these years.

Extra Nourishments (Milk and Eggs) were approved for 7 cases recommended by the Chest Physician in 1966; the total cost was £99 8s. 7d.

B.C.G. Vaccination

Vaccinations under the Contact Scheme are done by followups at the Chest Clinic and the Chest Physician reports for 1966:—

Contacts: Skin Tested 20
Positive —
Negative 20
Vaccinated 20

Under the School Children Scheme, all senior schools except one where visited during the year for the purpose of offering vaccination to 13—14 year-olds. The one school omitted should have been visited towards the end of the year but—owing to priority being given to an early second visit to one of the other schools where, at the first visit, out of a total of 127 boys tested 81 proved positive—we were unable to fit in the visit until early in 1967.

School Children:		1966	1965	1964
Skin Tested	 	 742	695	270
Positive	 	 273	164	51
Negative	 	 437	515	219
Vaccinated	 	 429	506	219

Absentees are followed-up and, where possible, included in next visit to school.

Medical Loan Equipment

Medical aids and equipment, for issue on loan to patients treated at home, are provided through the British Red Cross

Society as agents for the Local Health Authority. By arrangement with the County Welfare Officer, medical aids for handicapped persons are also supplied in this way. Allowances for these services are made in the County Council's annual grant to the Society.

Articles are loaned on production of a covering medical certificate. No charge is made for the first six weeks of loan; thereafter a hiring fee is charged (ranging from 6d. to 3/- per week according to cost of article).

The Society have six Medical Loan Depots in the Borough :-

B.R.C.S. Headquarters, 175 Elson Road. B.R.C.S. Centre, Beach Rd., Lee-on-Solent.

Town ... 36 St. Edward's Road. Clayhall, Alverstoke 109 Clayhall Road. Brockhurst, Elson 119 Albemarle Avenue.

Rowner, Bridgemary Rowner Lodge, Rowner Lane.

Some medical aids and equipment are also independently available from the St. John Ambulance Brigade.

Special items of equipment such as bed hoists, bath hoists, ripple beds, sleyrides, are available from the County Health Department on approved medical recommendation.

Incontinence Pads and Pants

General Practitioners continued to make full use of this service. During the year 15,700 small size and 2,700 large size pads were purchased at a cost of £552 (£546 in 1965).

Disposal of soiled pads continued at Gosport W.M. Hospital by kind co-operation of the Matron.

It was arranged to supply incontinence pants and disposable linings for the use of ambulant patients. An initial supply of 18 pants and 1,000 linings was purchased for £30 but they were not available until January, 1967.

Chiropody

This service for the elderly, expectant mothers and handicapped persons, continues to be operated by the British Red Cross Society and the Hampshire Council of Social Service as agents for the Local Health Authority who make grants for this purpose to both organisations.

Chiropodists attend the following Clinics in the Borough:— British Red Cross Society:

175 Elson Road

Thursdays (except first Thursday in month) all day. The Gables, Spring Garden Lane
Tuesdays and Fridays 1.0 p.m. to 3.0 p.m.

Bridgemary Community Centre

Mondays 5.0 p.m.

Beach Road Centre, Lee-on-Solent

Fourth Monday and following Friday week, 1.0 p.m.

W.R.V.S. for Hampshire Council of Social Service:

19 Bury Road

Thursdays by appointment.

Arrangements are made, when necessary, for transport of patients to Clinics and also for domiciliary visits by the chiropodists.

Returns on Chiropody Treatment were kept from 1st October 1966 and the following details for the three-months October— December were received from the two voluntary organisations:—

Persons Treated:	B.R.C.S.	W.R.V.S.	Total
Aged 65 and Over	 572	73	645
Blind	 1	Walter State	1
	573	73	646
Treatments Given:			
At Clinics	 728	104	832
Domiciliary	 420	_	420
	1,148	104	1,252
Health Education			

All members of the Health Department, especially professional and technical staff, are engaged in Health Education in the normal course of their duties.

The cine-projector played an increasing important part and it is, I think, of interest to note its use throughout the year:—

					A	udiences	
		S	essions Held-	444	School	Youth	
1	Morn.	A'noon.	Evng.	Ttl.	Children	Clubs	Adults
January	1	6	3	10	4	_	6
February		8	1	9	4	-	5
March	2	14	1	17	11	1	5
April	1	3	2	6	2	1	3
May	1	4	1	6	3	1	2
June	-	4	1	5	3	-	2
July	-	2		2	1	-	1
August	2	1	1	4	_	-	4
September	2	6	3	11	1	-	10
October	5	6	1 (+ 1 Sat, 1 Sun) 14	4	1	9
November	1	8	1	10	6	-	4
December		5		5	-		5
Total	15	67	15 (+ 1 Sat, 1 Sun	99	39	4	56
Loaned to F'ham area	a —	29	12 (+ 1 Sat)	42	2	101	40
	15	96	27 (+ 2 Sat, 1 Sun	141	41	4	96

In addition, the projector was used for in-service training for staff of the department. Films showing modern thinking and techniques on appropriate subjects were obtained on loan from official sources and from commercial firms.

Health Education "Poster Stations" are now established in the Borough at :—

Seven Child Welfare Centres
Podds House Day Nursery
The Gables Clinic, Spring Garden Lane
Town Hall Reception
Town Hall Health Department
Gosport Community Centre
H.M. Detention Centre, Haslar.
Gosport Open-Air Swimming Pool (summer season only)

At all stations except Swimming Pool and Detention Centre, similar posters on the same theme are exhibited at the same time and the theme changed at two-monthly intervals by a member of staff of the department. At the Swimming Pool only appropriate themes (e.g. Water Safety, Accidents) are used. Similarly, selected themes are used at the Detention Centre (for youths aged 17—21 years) where, in consultation with officials of the Centre, apt themes have been Smoking, Personal Hygiene, Venereal Diseases.

The department organised a "Home Safety Fortnight," 14th—28th October. The County Council loaned five illuminated stands, complete with a selection of appropriate leaflets which the public were invited to take away free, and the stands were permanently sited for the period at:—

Doctors' Surgery, Forton Road Gosport Community Centre, Bury Road Out-Patients Department, Gosport W.M. Hospital Ritz Cinema Foyer, Walpole Road Ultra Factory Canteen, Fareham Road

The Southern Electricity Board co-operated with an exhibition in the Town Hall Reception of "good" and "bad" electric appliances and wiring. The Gosport Chamber of Trade arranged distribution of appropriate posters to traders for exhibition in shops.

There is, of course no tangible measure of the results of such an exercise but, from observations at the time, I am sure the effort could be regarded as worth while and I would express appreciation of the ready co-operation of all who contributed in any way.

Home Help Service

Full use was made of the service, particularly by general practitioners and hospital authorities, and the excellent liaison with all statutory and voluntary social welfare services continued as before.

CASES HELPED		1966	1965	1964
Aged 65 or over on first visit		398	411	354
Aged under 65 on first visit :				
Maternity		42	50	66
Emergency Sickness		45	34	28
Post-Hospital		52	52	45
Child Care		_		1
Mentally Disordered		1	1	1
Chronic Sick		37	43	87
Tuberculous		8	9	10
Special Case (Problem Far	nily)	1	1	1
		584	601	593
				-

The total number of cases supplied with help (584) was less than in 1965 and 1964, but the average weekly case-load (344 in 1966) was only slightly less than the 350 in 1965 and more than the 330 in 1964. This means that, on average, cases are being helped for longer periods and is illustrative of the continuance of this service as an integral part of our social services, particularly in the care of the elderly in their own homes and as a help and financial saving to the hospital service, enabling earlier discharges by the supply of home help to post-hospital cases.

Home Help Hours	Year 1966		% of Total Hours
Hours actually worked o	100 505	1,990	86.4%
Hours Travelling Time between Cases .	4,465	86	3.7%
TT C' 1 D	107,972 7,600 4,309	2,076 146 83	90.1% 6.3% 3.6%
	119,881	2,305	
Average Cases Hel Average Weekly I			ours

Report on Special Case

Over the years there have been many cases of elderly people in the borough, particularly those elderly living alone, where the provision of a home help has been the means of keeping them in their own homes for the last years of their lives whereas, without the service, it would have been necessary to remove them to institutional care with a consequent far greater cost.

One case is worth noting. In May, 1964, home help was provided for an 85-year-old widow and her 46-year-old sub-normal son. The family, even in the lifetime of the father, were for many years known to welfare workers as a problem family. When the father died the bad home conditions further deteriorated so much so that most serious consideration had to be given to removal of the mother to institutional care and consequent institutional accommodation for the adult son. To keep mother and son together it was decided to try home help. To detach them from their most unsatisfactory home conditions and give them a "clean" start they were allocated a pre-fabricated bungalow. To avoid removing any of their old environment to their new home, furnishings were provided with the help of the County Welfare Department, the W.R.V.S. and the B.R.C.S. The Organiser and a Home Nurse took mother and son from their old house to bath them at Northcott House, an Old Peoples' Home, and attention included hair-cutting and nail-trimming. Then they were taken to their new pre-fab home. A specially selected home help then took charge with special daily supervision by the Organiser for a few weeks. At first the home help literally did everything for them, including bathing the adult son. No praise can be too high for the work done by this home help, eventually getting them to something approaching a normal life, sleeping in clean conditions which were unknown to them before, eating regular and substantial meals and even getting the son to bath himself regularly and to take some pride in his personal conditions. A peak was reached when she took him to a gents outfitters to buy his own new personal clothing for the first time in his life.

The mother died in July 1966 at the age of 87 and then, of course, came the problem of the 48-year-old subnormal son being left on his own. The home help, who had "mothered" him through the loss of his mother, requested to be allowed to try and keep him in his own home. Such was the confidence inspired by the results of her efforts that it was decided to try this. And such has been the success of this further effort that, with the assistance of the home help, whose time on the case we have been able gradually to reduce to the present one-and-a-half hours daily, this man is still living happily in reasonable conditions in his own home and able to mix reasonably well in the community.

The satisfaction of successfully keeping these two persons together for the latter years of the mother's life and the further satisfaction of keeping a subnormal 48-year-old man without a family in his own home in the community are, of course, immeasurable. There is also, of course, the considerable material saving of the cost of institutional care.

This result is a fine tribute to a grand home help.

Mental Health Service

The system of attachment of the two Mental Welfare Officers to groups of General Practitioners continued to work well. The excellent liaison established with General Practitioners is illustrated by the continued increase in their use of the service as shown by the following:—

REFERRA	ALS OF	MENT	ALLY ILL (CASES	BY GENE	RAL PI	RACTIT	IONERS
						1964	1965	1966
Numbe	er					158	198	253
Percen	tage of	Total	Referrals	of Men	tally Ill	43.5	54.9	56.7
Referr	als per	1,000	populatio	n		2.2	2.7	3.4
TOTAL R	REFERR	ALS O	F MENTAL	LY IL	L CASES			
					1964	196	35	1966
Popula					72,240	73,0	10	73,610
Total !					363	36	31	446
Referr	als per	1,000	Populatio	n	5.0		4.9	6

MENTAL HEALTH SERVICE

Total Referrals of All Cases

ters 74 179 3 1 - from In-Patient or Day 6 12 34 78 - Authorities 34 78 34				
1-Patient 28 66 — 1 1. 34 78 — 1 1. 29 6 12 — 1 1. 29 6 12 — 1 1. 29 14 78 — 1 1. 29 14 78 — 1 1. 29 14 78 — 1 1. 29 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 — 1 1. 20 14 78 14 78 14 78 — 1 1. 20 14 78 1		Under 16 & 16 M. F. M. F.	Under 16 & 16 M. F. M. F.	Grand Total
tor Day 6 12 — 1 34 78 — 1			3 1 74 182	260
		1 11	28 66 6 12 8 78	112
7.	-	1 1	2 2 - 1	5
Fonce and courts 14 0	9		- 1 14 6	21
Other Sources 21 40 1		1 1	1 1 22 42	99
Total 143 303 4 3 1	4	2 2 - 1	6 5 144 309	464

Visits by Mental Welfare Officers.

Visits by Mental Welfare	Officers.				
•		To other 1	Perso	ns	
	To	and Ser	vices	in	
	Patients	connection	on wi	th	Total
		Patie	nts		
19	966 (1965)	1966 (1	965)	1966 (1965)
In Connection with :-					
Admission to Hospital	515(327)	463(300)	978	8(627)
Mentally Ill and Psycho-	, ,				
pathic Patients20	015(1912)	1023(896)	3038(2808)
Subnormal Patients		288(802	2(951)
General Liaison Visits and					
Other Visits (not about					
an Individual Patient)		238(189)	238	8(189)
To Training Centres		84	(87)	84	(87)
Committees and Case Con-					
ferences Attended				13	30(67)
Lectures and Talks				-	— (7)
(figures for 196	5 are given	ı in brack	ets)		
Admissions to Hospital.					
				1966	1965
	Informal			101	74
	For Obser			6	13
	For Treat			7	14
	Emergeno			71	60
	Recapture			11	3
	Justice's	Warrant		1	_
				197	164
Patients Placed in Empl	ovment			1966	1965
Initial Placement:	Subnorma	al		3	4
Illitiai I lacement.	Mentally			5	4
Re-Placement:	Subnorma			3	4
Ke-r lacement.	Mentally			10	8
	Montally				
				21	20

The total referrals to the Section numbered 464 (381 in 1965) and the total visits by Mental Welfare Officers numbered 5270 (4736). A staff ratio of 1 Mental Welfare Officer to 30,000 population is felt to be sub-optimal and, in Gosport, our present establishment is one Mental Welfare Officer to 36,805 population. Not only has there been an increase in total referrals but an increase in the referrals per 1,000 population. The officers are, therefore, working under considerable strain.

St. Francis Junior Training Centre

Twenty-nine children under 16 from Gosport attended the Centre in 1966 (25 in 1965). One Gosport child was transferred to Cliffdale Junior School, Portsmouth, during the year and another child left to enter Foxbury School in the January term 1967. At the end of the year there were 22 children under the age of 5 for whom it is probable that the facilities of the Centre will be needed and who were not yet attending.

Twenty-eight Gosport children were again able to go on holiday to Hayling Island under the expert care of the Centre staff. The cost per head for 2 weeks was 14 guineas and parents were asked to pay £9.

The Voluntary Committee made up the difference and, as in previous years, continued their admirable support for this yearly holiday. Without their aid it would probably have been impossible for all the children to go. The Committee continued their fund raising. A July Fete raised £150 and a Christmas Fair raised £120.

The Centre activities continue to be loyally supported by the members of the H.M.S. Sultan Club.

The staff of Littlewoods Stores repeated their Christmas party for the children in their staff canteen and again this was a great success thoroughly enjoyed by all and needless to say very much appreciated. This entertaining of the children outside their usual environment is especially beneficial to them.

Prior to Mental Health Week in June, all Gosport schools were approached suggesting they might like to invite some of the Centre children to spend a day at their school and a circular letter was enclosed to assist in the preparation for such a visit, as follows:—

"A Letter to Children from their Local Health Department Dear Children,

I expect you have seen children who have difficulty in walking because their legs are stiff and awkward (something called cerebral palsy) or who are nearly blind, or who cannot hear unless they wear a hearing aid. But, have you ever met a child who is mentally handicapped?

Mentally handicapped children are just like you in many ways; they like to go visiting and playing games and drawing and painting and listening to records; they adore some foods and don't like others; they are good and helpful sometimes and mischievous and naughty sometimes. The girls like smart clothes and the boys like kicking a football about. But their brains haven't grown up as fast as the rest of them. It is as if your little brother at home had suddenly got as big as you but went

on behaving as he does now inside a big body. When you think of all the things you know about which your little brother doesn't and all the things you can do which little brother can't you realise that, although in many ways it is nice to be little, it is really rather sad for somebody's brain not to grow up along with their bodies. You want to help mentally handicapped children as much as you would help your little brother and be prepared to amuse them and play with them sometimes, just as you do with him.

Youngsters who have never thought about mentally handicapped children sometimes laugh to see children who are as big as they are behaving like little children and some mentally handicapped people do look a little unusual to you and me. But never forget that they have feelings like we have. We never want to hurt people's feelings or make them feel unhappy about something they can't help and we do hurt people's feelings if we laugh at t'em or say they look funny and different in front of them.

So when you meet mentally handicapped children behave towards them just as you would to your little brother. Be kind and patient with them. Show them how to do things they can't manage. Don't encourage them to show off or allow them to do silly things. Then you will be their kind friend.

Yours sincerely,

THE MEDICAL OFFICER OF HEALTH"

This approach resulted in a total of 22 children being invited to either Brockhurst Baptist, St. Mary's R.C., Stone Lane or Woodcot Schools and some were even included in swimming parties from the schools. This co-operation was most valuable for the children. The Head Teachers of the schools were afterwards invited to give us their comments and one wrote: "The (school) children were made aware of the fact that there were such mentally handicapped children and I am sure learned a standard of behaviour towards them which they would not otherwise have done." The small response to our invitation is, perhaps, an indication of the need to work on community acceptance of the mentally handicapped.

Adult Training Centre

Twenty-nine trainees from Gosport attended the Hampshire Training Industries (Fareham Branch). Four Gosport trainees were successful in obtaining outside employment during the year.

Nursing Homes.

There were three Registered Nursing Homes at the end of the year.

year.		
Registered Number of Beds:		
Arosmor, 50 Marine Parade West, Lee-on-the-Solent	Maternity (other 10
Langdale, 7 The Avenue, Alverstoke	The thirt is	12
Thalassa, 79 Western Way, Alverstoke	_	23
Hospitals.	Telephone	No.
Blackbrook Maternity Home, Fareham	Fareham 227	5
Blake Maternity Home, Ham Lane, Gospo	ort Gosport 8166	32
	Portsmouth 2	1711
Gosport War Memorial Hospital, Bury Roa	d, Gosport 8122	5
	Portsmouth 2	2351
The state of the s	Wickham 227	1
Queen Alexandra Hospital, Portsmouth	Portsmouth 2 Cosham 7945 Portsmouth 2	1
	Fareham 233	8
	Portsmouth 3	35211
St. Mary's Hospital, Portsmouth	Portsmouth	22331

Ambulance Facilities.

The Ambulance Station in the Borough is situated in Privett Road and is one of the five stations (Fareham, Gosport, Havant, Hedge End, Petersfield) in the South-Eastern Division of the County Ambulance Service. The work of these stations is coordinated at the Main Station at Fareham. Written requests for transport should be sent to the County Ambulance Station, Fareham, and verbal requests telephoned to Winchester 61644.

The Local Health Authority is not under obligation to make arrangements for the conveyance of all persons suffering from illness, but only for those for whom special transport, such as the Ambulance Service provides, is necessary. Under normal circumstances, therefore, transport can be provided only on the authority of a doctor, but in an emergency an ambulance can be obtained by anyone using the "999" system provided by the Post Office telephone service.

Venereal Diseases Clinic.

St. Mary's Hospital, Milton Road, Portsmouth. Tel. Portsmouth 22331.

Monday Tuesday Wednesday Thursday Friday

Males 9.30 to noon 4.30 to 7 p.m. 9.30 to noon 4 to 6.30 pm 4.30 to 7 p.m.

Females 4.30 to 7 pm

2 to 6.30 pm

9.30 to noon

Laboratory Facilities.

Public Health Laboratory Service, Milton Road, Portsmouth

(Tel. Portsmouth 22331)

Public Analyst's Laboratory, Trafalgar Place, Clive Road, Portsmouth

(Tel. Portsmouth 23641)

SECTION 3

DELEGATED WELFARE SERVICES

Physically Handicapped

The County Welfare Services deploy one Welfare Officer for Physically Handicapped Persons in this area. This officer is the Gosport representative on the Welfare Committee of the Portsmouth & District Multiple Sclerosis Society and the Portsmouth & District Disablement Advisory Committee of the Ministry of Labour.

Medical aids and equipment are supplied through the Medical Loan Depots of the British Red Cross Society. Financial aid is given in approved cases for any necessary adaptations in the home, the case contributing to the cost according to an assessment scale. In cases of adaptations to Council houses the cost is shared equally between the Health & Welfare and Housing Committees.

Apart from the provision of handrails costing £13 in 2 Council houses work during the year has been in the continued visiting of the disabled and in the provision of the smaller aids and gadgets to help them become more independent in their homes.

Fourteen New Cases were added to the Register in 1966 and, allowing for removals and deaths, the total increased by 3 from 146 to 149:—

				-Age G	roups-		
Major Handicaps			16-29	30-49		65 & Over	Total
The state of the s				1	4	4	9
Amputation				î	12		46
Arthritis or Rheumatism	Defen	mitian	4	â	1		8
Congenital Malformations or Diseases of Digestive, Ge	enito-Ur	inary,	4	3			Ü
Heart, Circulatory or Respi than T.B.) Systems or of the	o Skin	(Other	2	1	2	12	17
Injuries of Head, Face, Neck, 7 men, Pelvis or Trunk and	Thorax,	Abdo-	_		nen t		
Diseases (other than T.B.)	of Limb	s and					
Spine			1	4	4	5	14
Organic Nervous Diseases			8	13	11	13	45
Tuberculosis Respiratory			_	1		1	2
Non-Respiratory				_	-	2	2
Other Diseases and Injuries			1	. 1	3	1	6
	Tot	al	16	25	37	71	149
	Ma	les	14	14	13	18	59
		nales	2	11	24	53	90

Car Badges for Severely Disabled Drivers

These badges, of a national pattern and colour to assist ready identification, are issued in approved cases to disabled drivers suffering from a permanent and substantial disability which causes severe difficulty in walking. They are for identification purpose only and confer no legal rights. The Borough Council, however, has approved free parking for disabled drivers only (not with passengers) displaying badges at Stokes Bay and Lee-on-Solent municipal car parks where parking fees are charged during the summer season.

Badges are valid for one year and reminders are sent to current holders prior to renewal date. At the end of 1966 there were 22 residents holding current badges.

Blind and Partially Sighted

This service is administered by Hampshire Association for the Care of the Blind as agents for the Local Health Authority. The Health and Welfare Committee has representation on the Executive and Appointments Committees of the Association and there is a Local Committee of Management of the Association's Home at Mansfield House, Lee-on-Solent. The Association appoints a Home Teacher for the Blind for whole-time service in the Borough.

During 1966, the total number of Registered Blind Persons in the Borough rose from 127 (39 males, 88 females) to 128 (39 males, 89 females), there being 15 new registrations and 14 removals. Registered Partially Sighted increased from 35 (13 males, 22 females) to 38 (16 males, 22 females), with 10 new registrations and 7 removals.

The registered blind boy who left the Royal School for the Blind, Bristol, on becoming 16 in June 1966, was admitted to R.N.I.B. Vocational Assessment Centre, Hethersett, Reigate, on 5th January 1967; the Hampshire & Isle of Wight Educational Trust for the Blind helped him with weekly pocket-money.

The 19 year old man referred to in my 1965 Report was accepted to read Economics at London University where he is now in residence and has the help of a Guide Dog.

In September 1966 a registered blind 20-year-old man was appointed as a shorthand-audio-typist in the Town Clerk's Department, where he is giving satisfactory service.

There were 9 registered blind persons in full-time employment, 2 under sheltered conditions in special workshops and 7 under ordinary conditions.

Registered Blind Persons	Males	Females	Total
Aged 16—64:			
Attending Special School	1	-	1
Employed Under Sheltered Conditions	1	1	2
Employed Under Ordinary Conditions	6	1	7
Training for Sheltered Employment	1		1
Traning at University	1		1
Not Employed	5	16	21
Aged 65 and Over:	24	71	95
Not Employed	27		
	39	89	128
Blind Persons in Residential Accommod.	2	13	15
Blind with Other Defects:			
Physically Defective	6	28	34
Doof (with Crossb)	_	2	2
	3	5	8
Hard of Hearing Physically Defective and Hard of	J	U	O
	1	3	4
Hearing	1	0	-1
mental formation of the property of the source of the	10	38	48
men level et alle et al. et al			
Registered under Disabled Persons			
(Employment) Act 1944	9	3	12
Registered Partially Sighted Person	ıs		
Aged 5—15:			
Attending Special Schools	2	1	3
Attending Other Schools	2	1	3
Not at School	1	-	1
Aged 16—64:			
Near and Prospectively Blind	1	1	2
Mainly Industrially Handicapped :			-
	5	1	6
Employed	0	1	1
Not Employed		1	1
Requiring Observation only	_	1	1
Aged 65 and Over:			
Near and Prospectively Blind	4	8	12
Requiring Observation only	1	8	9
The state of the small title and society and			
	16	22	38
Registered under Disabled Persons			
(Employment) Act 1944	5	1	6

Age Groups

		MA	LES			FEM	ALES			To	TAL	
				tially				rtially				rtially
	В	lind	Sig			lind				lind		ghted
Age		% of		% of		% of		% of		% of		
Group	No.	Total	No.	Total	No.	Total	No.	Total	No.	Total	No.	Total
5-15	-	-	5	13.16	_	_	2	5.26	-	-	7	18.42
16-20	4	3.12	1	2.63	-	_	-		4	3.12	1	2.63
21-29	1	.78	-		-	_		-	1	.78	_	_
30-39	2	1.56	_		4	3.12	_		6	4.68	-	_
40-49	3	2.34	4	10.53	3	2.34	2	5.26	6	4.68	6	15.79
50-59	2	1.56		_	8	6.25		-	10	7.81	-	-
60-64	3	2.34	1	2.63	3	2.34	2	5.26	6	4.68	3	7.89
65-69	2	1.56		-	4	3.12			6	4.68	_	_
70-79	11	8.60	_	_	21	16.41	-	-	32	25.01	-	
80-84	7	5.47		_	25	19.54		-	32	25.01	_	_
85-89	3	2.34	-	_	15	11.72	-	-	18	14.06	_	-
90 &												
Over	1	.78	5	13.16	6	4.68	16	42.11	7	5.46	21	55.27
	39	30.47	16	42.11	89	69.53	22	57.89	128		38	

Home Teacher for the Blind

Following the resignation at the end of 1965 of Miss J. Palmer as whole-time Home Teacher for the Borough, and pending the appointment of a qualified successor, Mrs. M. Wale a clergyman's widow from the Isle of Wight was temporarily appointed as a visitor to the blind. Although not a qualified home teacher, Mrs. Wale had many years of practical experience of dealing with blind people and she was helped by Miss S. B. Hall, Assistant Secretary of the Association, who is a qualified home teacher. From February to July, 609 Domiciliary Visits were made.

Miss J. M. Wintle of Cosham, a newly qualified home teacher, was appointed full-time for the Borough from the 1st August and up to the end of the year she made 606 Domiciliary Visits giving 25 lessons in Braille and 5 in Moon-embossed type. During the year 18 Handicraft Classes were held with a total attendance of 616.

With the valuable and much appreciated aid of the Local Voluntary Committee, Mrs. M. M. Ireton continuing as Hon. Secretary, 26 Socials with a total attendance of 781 and a Summer Outing and a Xmas Party, each with 80 blind and partially sighted persons participating, were organised during the year.

Deaf and Dumb and Hard of Hearing

The Missioner Welfare Officer for the Hampshire, Isle of Wight and Channel Islands Association for the Deaf—who is seconded to the County Council for these services—reports that in Gosport there are 25 persons in the following age groups and categories:—

						Т	otal
						Males	Females
1		3	1		1	4	2
	1	3	5	1	-	4	6
	1	1	5	_	1	1	7
-	-	1	-	-	_	1	
1	2	8	11	1	2	10	15
	with Males 1	- 1	with Speech without Males Females Males 1 — 3 — 1 3 — 1 1	with Speech without Speech Males Females Males Females 1 — 3 1 — 1 3 5 — 1 1 5	with Speech without Speech He Males Females Males Females Males 1 — 3 1 — — 1 3 5 1 — 1 1 5 —	with Speech without Speech Hearing Males Females Males Females Males Females 1 — 1 — 1 3 1 — 1 — 1 3 5 1 — — 1 1 5 — 1	with Speech without Speech Hearing T Males Females Males Females Males Females Males Females 1 — 3 1 — 1 4 — 1 3 5 1 — 4 — 1 1 5 — 1 1 — — 1 — — 1

SECTION 4

ENVIRONMENTAL HEALTH SERVICES

Sewerage

I am indebted to the Borough Engineer and Surveyor, Mr. C. Thomas, for the following information on the Town Sewerage System:—

FLOODING RELIEF MEASURES. The final stage of the £260,000 Flooding Relief Scheme, commenced in 1963, was begun during 1966 and involved the construction of a new Sewage Pumping Station in Grove Road to replace the overloaded underground sewage ejector and the reconstruction and conversion from compressed air ejection to electrical pumping of the underground sewage stations in Village Road, Alverstoke, and at the Cambridge Road/Brockhurst Road Junction.

SEA OUTFALL SCHEME. Tenders were accepted for the construction of the two main Sewage Pumping Stations at Stokes Bay and Elmore, Lee-on-the-Solent, and the fabrication and laying of the 3,000-ft. long Outfall into the Solent. Work was begun on all three items during the year and it is hoped to have the complete scheme operative by the end of 1967.

GENERAL

- (a) Sewer investigation work was continued towards the modernisation of the underground sewage ejector stations and a tender for the first stage of the scheme, amounting to over £100,000 was accepted towards the end of the year with a view to commencing work in the Spring of 1967.
- (b) A length of surface water drainage was laid along Elmore Road and Elmore Avenue, Lee-on-the-Solent, primarily to drain the housing area being constructed at Court Barn.
- (c) A high-pressure sewer jetting machine was purchased during the year and carried out considerable descaling work on both foul and surface water sewers.

Water-Public Supply

No complaints were received about the quality of the water.
Reports on samples taken by the Water Company in all the
districts served by it were received from their Chemist and
Bacteriologist. These covered the whole year and showed satisfactory results.

Two samples were taken by the Public Health Inspectors for bacteriological examination. Both were satisfactory.

Swimming Baths and Pools

Protective walling and other improvements were made to the Stokes Bay paddling pool. These resulted in an improvement in the bacteriological standard of samples taken.

The seepage of spring water into and around the swimming pool at Lee-on-the-Solent was investigated. Samples taken were unsatisfactory and the Open Spaces Committee were considering proposals for dealing with this difficult problem. The chlorination and filtration plant ensured satisfactory bacteriological standards in the pool.

None of the baths and pools is covered. They are open only

in spring and summer.

Twenty-one samples were taken; 13 were satisfactory and 8 unsatisfactory.

Clean Air

There were complaints about one factory chimney. The occupiers were advised to call in consultants. Later it was decided to raise the height of the stack and carry out other work to abate the nuisance.

Installations at two Admiralty establishments gave cause for complaint. Remedial action was taken which it is hoped will prove effective.

Bituminous coal is still used by the majority of private householders who use solid fuel. Cost, not efficiency, is the prime reason.

Forty-seven informal visits were made.

Infectious Diseases

Several cases of Salmonella Typhi Murium were reported early in the year. The primary cases were all young children and associated with an outbreak in another area. One family outbreak which was reported in the summer was found to have been contracted abroad during a camping holiday.

There were a few cases of Sonne Dysentery but no connecting link was found between the families concerned.

Rodent and Pest Control

Special attention was given to a major rat infestation at the Borough Council refuse tip. Much of the land adjacent to the tip was swampy and therefore difficult to inspect thoroughly but the tip treatment gave satisfactory results.

The relaying of main foul and storm sewers made any largescale sewer treatments impracticable but test baiting on short lengths revealed no evidence of rat infestation. During survey and block control work, a number of cases were found where stoppers were missing from the rodding eye in drainage inspection chambers. Should there be rats in the adjacent sewers this would give them easy access to house drains and gardens and occupiers were advised to get the stoppers replaced.

When talking to various groups on Environmental Health matters, it was found that it was not generally known that mouse infestations are treated free of cost; some did not know that the Local Authority deals with mice at all.

The Rodent Operators made 6419 inspections and visits as well as 45 visits by Public Health Inspectors. Treatments were carried out at 754 premises. Business premises are charged but dwellings are treated free.

In the field of Pest Control the most frequent operation was precautionary treatments of older Council houses vacated prior to improvements. There were 170 such houses.

Thirty-two other premises were treated, mainly for flea infestation. On investigating one complaint of fleas these proved to be springtails, small wingless insects which can jump several inches vertically and could, therefore, be mistaken for fleas. They

are not a serious pest and are usually found outdoors.

Complaints and requests for help were also received about ants, wasps, earwigs, woodlice and birds in roof spaces. Usually the noise made by the last-named was mistaken for that of rodents.

Offices, Shops and Railway Premises Act, 1963

The inspection of premises continued throughout the year and improvements were achieved at a number of them. Minor contraventions were often remedied on verbal advice but in all cases where work was required to be done, written notices were served. The matters covered by these are given below and the number of times each occurred is also shown.

Sanitary Accommodation	(22)	Washing Facilities	(28)
Thermometers	(22)	Repair & Redecoration	(21)
Abstracts of Act	(27)	First Aid Outfits	(9)
Artificial Lighting	(13)	Temperature	(4)
Drinking Water	(3)	Accommodation for	
Seating	(1)	Outdoor Clothing	(2)

Various problems arose about the provision of adequate toilet facilities and with the ventilation needs at some shops. The needs for each place were assessed individually as no standards exist and it would be well-nigh impossible to adopt a scientific approach to this problem; some shops have doors open all the working day, others have doors which are opened and closed by each customer. In the latter case, the number of air changes per hour is related to the number of customers.

Artificial lighting was improved at some workplaces, although the absence of any recommendations about minimum acceptable standards meant that this work was done on advice and suggestions. It was surprising to note that some professional people tolerated very poor lighting in their offices. In two instances the overall illumination at desk level did not exceed 10 lumens per square foot; this was from a single pendant lamp badly sited.

Although the Act had been in force since May 1964, a number of premises were found which should have been registered. In nearly every case ignorance of this requirement was pleaded.

None of the eight accidents reported involved serious injury but it is felt that not all accidents were reported due to ignorance of the obligation to do so.

No prosecutions for infringements of the Act were taken during the year but consideration was being given to such action in two cases which had not been resolved when the year ended. No exemptions were granted or applied for during 1966.

It will be some time yet before all offices, shops and other premises in the Borough have reached a satisfactory standard.

Registered Premises and Persons Employed

Registered Premises	and Per	Sons Er	npioyeu	pr regis	No. of emises stered at
Class of Premises				end	of 1966
Offices					77
Retail Shops					410
Wholesale Shops, Wareh	ouses				3
Catering Establishments	open to	the Publ	ic, Cante	ens	77
Fuel Storage Depots					1
total della entit la				a pal	568
No. of Persons En	nployed in	n each Cla	ass of Wor	kplac	е
Offices					506
Retail Shops					1874
Wholesale Departments,					76
Catering Establishments	open to	the Publ	ic		410
Canteens					2
Fuel Storage Depots					7
1 402 011-0-1					0077
					2875
		Total	Males		975
		T O COL	Females		

Noise Abatement Act, 1960

Investigations were made about noise sources which had been the cause of previous complaints and action. Although the noise level in several cases had been reduced to a point at which it could not possibly be considered a statutory nuisance, the continuance of it at all was unacceptable to some people. This problem is one not easy to resolve.

Complaints were received about two new noise sources. In each case the noise continued throughout the night and arose from industrial machinery. The need for all-night work ended at one site within three days and has not recurred. At a factory a baffle wall was built and other measures taken to reduce the noise level.

Immigrants

Notification of the arrival of 7 long-term immigrants was received during the year, 5 from the Commonwealth and 2 from other countries. Each one was visited and advised as to the health services available. In some cases this could be done directly but in others it had to be through an interpreter.

Mosquito Control

There was again, as in 1965, no large-scale mosquito infestations. Though much credit for this must be given to the operators who did the spraying, other factors helped. The clearing by the Ministry of Defence of ditches on its land and the realignment of the River Alver resulted in an improved flow of water and a consequent reduction in the size of swampy areas.

The moat at Fort Gomer was filled in as part of the private housing redevelopment in that area, thus eliminating another breeding source.

The decrease in the size of the areas to be treated enabled more frequent attention to be given where most needed.

Regular treatment of Ministry of Defence land by our own men during the past two years has undoubtedly contributed to a reduction in the mosquito problem. The cost of this work is defrayed by the Ministry.

The Standards for School Premises Regulations

Inspections and revisits were continued.

The interchange of information and views on school environment jointly by School Health, School Staff and a Public Health Inspector has been helpful.

The reports are discussed with the Schools Maintenance Surveyor and summaries are sent to the Borough Education Officer.

This scheme resulted in a number of improvements.

Public Conveniences

Work started on new conveniences at Haslar, Walpole Park and Lee-on-the-Solent. A new convenience was also built at Elson Recreation Ground but extensive wilful damage done to it almost before it was finished prevented it being opened to the public.

To reduce the amount of wilful damage some of the conveniences were closed at night. A man was employed to do this and a decrease in damage was noted. It is too much to hope that it will or can be stopped altogether.

A new scheme for the cleaning of conveniences was discussed which would combine efficiency with economy. The very heavy cost of cleaning was becoming prohibitive and a different method had to be found but this was still being debated by the end of the year.

Caravan Sites and Control of Development Act, 1960

Some progress was made in the preparation of land for a new site to replace the caravan site at Stokes Bay.

The existing site, which is the only one open to the public,

takes 72 residential and 59 tourist caravans.

The Admiralty have a large caravan site at Grange Lane. This is for Service personnel only and is not controlled by the Local Authority.

Factories Act 1961.

A.—HEALTH INSPECTIONS.			
Premises	No. on Register	Ins- pections	Written Notices
1.—Factories in which law about cleanliness, overcrowding, temp- erature, ventilation and drainage of floors is enforced by Local		nosali	
Authorities 2.—Factories not included in (1) in		5	NA -
which law about sanitary conveniences is enforced by Local Authorities 3.—Other premises in which law about sanitary conveniences is	131	135	3
enforced by Local Authorities (excluding outworkers)	4	4	more and
B.—Cases in which Defects	WERE FO	UND.	
Unsuitable or Defective Sanitar	ry Conven	iences	3
Other Offences			2
C.—Outworkers. There were	32.		

Other Visits and Inspections	by Pul	blic Heal	th Inspe	ectors.
Defects at Houses				2967
Drainage				395
Nuisances, excluding houses				132
Verminous Persons/Premises				94
Offensive Trades, Piggeries,				21
Temporary Buildings and Ca				50
				164
Other Visits				185
				100
Notices.				
Informal Notices: under Pu	blic Hea	alth, Food	and	
Drugs and Factories Acts				212
Statutory Notices				33
Notices Complied with				194
Defects and Contraventions Defects:				476
In Houses				
About Drainage				36
Concerning Water Closets		• • • •		49
Offensive Accumulations				5
Contraventions : Food Premises				99
				33
Stables and Piggeries Factories				1
ractories				10
Shops Act and Young Perso	ns (Em	ploymer	it) Act.	
Visits				1596
HOU	SING			
Action Taken				
	nformal	action		19
No. of Houses made fit by i				43
No. of Houses made fit by f	ormar a	Ction	***	8
Closing Orders Demolition Orders	•••	•••		6 Nii
Demontion Orders				Nil

In addition to the "houses-made-fit" shown above, major improvement work was carried out voluntarily at a number of other properties. This was done in consultation with the department.

Houses which were the subject of applications for Improvement Grants were visited and inspected and reports made in conjunction with the Borough Engineer's Department which deals with the costing and supervision of the building work. There were 44 applications and 37 were approved; all were made by owner/occupiers.

Overcrowding

A number of complaints of overcrowding were received and investigated but in only one case was legal overcrowding found to exist. The complainant in nearly every case was the occupant of part of a house.

Housing Progress

	During	Total
Housing Units Built:	1966	Post-War
Permanent (by Local Authority)	76)	8,391
Permanent (by Private Enterprise)	342	
Temporary (prefab) by Local Authority	_	600
War destroyed Houses Rebuilt	_	170

Houses in Multiple Occupation

At the end of the year the number of houses known to be in "multiple occupation" was 5. Informal action was taken in respect of one house and conditions were improved by a reduction in the number of families in that property. No legal overcrowding was found.

Some large houses have been converted into self-contained flats but such properties do not come within the scope of the law covering multiple occupation.

INSPECTION AND SUPERVISION OF FOOD

Milk

Premises registered: 1	Dairy 62 I	Distribut	ors	
Licences:				
Pasteurisers				1
Dealers (Prepacked)	(Pasteurised)			53
	(Sterilised)			27
	(Untreated)			7
	(Ultra heat tre	eated)		6

Milk Sampling (Bacteriological)

	No. of Samples	Tests	Passed	Failed
Pasteurised	42	Phosphatase	42	_
		Methylene Blue	40	2
Channel Island		Phosphatase	5	_
Pasteurised	5	Methylene Blue	5	_
Sterilised	9	Turbidity Test	9	
Untreated	9	Methylene Blue	9	
		Ring Test	9	-
Raw (taken on		Methylene Blue	27	1
delivery to dairy) 28	Ring Test	24	4
Ultra Heat Treated	2	Colony Count	2	_

The Ring Test on raw milks is to find out if the Brucella abortus organism is present. The test gives presumptive evidence only of the presence of this organism and can give a false positive if it coincides with a vaccination programme on adult cows. For this reason whenever a Ring Test gives a positive result, the laboratory carries out biological and cultural tests. These will show conclusively whether the milk contains living Brucella organisms.

The colony count for Ultra Heat Treated milk indicates the

efficiency of the heat treatment.

		ug Sampl enuine		sfactory	T	`otal
]	Formal	Informal	Formal	Informal	Formal	Informal
Milk Other		70	_	1		71
	ls 13	64	_	5	13	69
Drugs	-	6	_	1	_	7
	13	140	1011-	7	13	147

Six samples of milk were below the presumptive limits of the Sale of Milk Regulations but were reported genuine. In each case the deficiency was in the solids-not-fat content. This the Analyst attributed to the natural condition of the cows, having ascertained that it was not due to added water.

Action Taken re Unsatisfactory Samples

Lancashire Cheese (Pre-packed)	The label failed to give the address of the packer.	Referred to packer.
Instant Full Cream Milk Crystals	The statutory declaration and the equivalent pints appeared in type less than 1/8in. in height.	Referred to importer who agreed to amend the label.
Milk	Contained at least 11.4% added water.	Milk sold in cafe and heated by steam in- jection. Vendor advised
Bread	Contained a piece of flat crescent-shaped metal.	Dealt with informally.
Chopped Ham and Pork (canned)	Faulty area of lacquering on inside of can had caused corrosion of metal and con- sequent staining of meat.	Vendor advised.
Dried Whole Milk	Declaration of equivalent pints and designation not given in the prescribed form on the package.	Firm advised to amend label.
Vitrellae Amyl Nitrite	Vitrellae exploded on break- ing and where deficient of the stated proportion of amyl nitrite.	Letter sent to manufacturers.

Pesticide Residues in Foodstuffs

The possibility of contamination of foodstuffs from increased use of pesticides in horticulture and agriculture has been a public concern. The Local Authority Associations and Association of Public Analysts prepared jointly a scheme of sampling for the detection of pesticide residues. To avoid over-lapping each Food and Drugs Authority in a given zone was allocated certain products to sample. The scheme started late in the year and four samples of rice were submitted for examination. The reports were satisfactory.

Food-Complaints

Sixteen complaints were received and investigated. In no case was formal action necessary. Some of the complaints were of alleged unfitness for consumption, others about foreign matter.

In the first category was Tinned Chicken Mince used in a school canteen kitchen. Two cans had been used in the making of pasties. One batch of baked pasties was said to have an unpleasant smell and taste. No raw chicken mince remained and the lacquer inside the cans was in excellent condition. One of the cans was of recent date, the other had been in stock some months. No entirely satisfactory explanation was found but it is probable that the smell came from the natural sulpher compounds present in poultry. This was not noticed when the can was opened. Bacteriologically the food was satisfactory.

In the foreign matter category, a penny was found in the middle of a loaf of bread. The !oaf was an unwrapped sandwich one and a close inspection showed that the penny appeared to have been pushed edgewise into the side of it. By experiment it was shown that this occurred after the bread was baked.

Ice Cream

Premises Registered:

For Manufacture and	d Sale	 	2
For Sale Only		 	215

Results of Samples					Percentage				
	Total						Grade One or Two		
1966	78	48	14	3	13	61.5%	79.5%	3.8%	16.7%
1965	64	36	14	6	8	56%	78%	9%	13%

The grading is indicative of the bacteriological content of ice-cream as shown by the time taken to decolourise Methylene Blue. Grades 1 and 2 are satisfactory, Grades 3 and 4 unsatisfactory.

All the samples graded as 3 and 4 were of soft ice-cream. The most likely reason for this was inefficient cleansing of the machines in which the ice-cream is made. Advice was given in the case of all unsatisfactory samples which were from a number of different vendors.

Fifteen Iced Lolly samples were examined. Results showed that, bacteriologically, these confections—whether with a milk or a water base—compared favourably with ice-cream.

Food Control Duties by Public Health Inspectors

Visits to food premises about hygienic stands	ards	 1813
Visits about (1) Food and Drugs Sampling		 148
(2) Bacteriological Work		 139
Inspections of Food		 219
Visits about the Merchandise Marks Act		 12

Meat and Other Foods Condemned as Unfit for Human Consumption

Fish		186	lbs.	388 pkts.	57	tins	
Meat at Retail Shops		51	lbs.				
Canned Meats					184	tins	
Fruit & Vegetables		137	lbs.	439 pkts.	1781	tins	
Cooked Meat & Meat 1	Products	68	lbs.	109 pkts.	40	tins	
Other Foods				344 pkts.	211	tins	18 bottles

Food Hygiene

Regular visits are made to food premises by Public Health Inspectors and contraventions associated with hygiene are drawn to the attention of the person responsible and the person in charge.

Visits cannot be made as often as could be wished and much more complementary action could be taken by members of the public when they see undesirable practices taking place.

A complaint will be accepted courteously by most of those whose duties are managerial. If not, then complain to this department.

Instances of the kind referred to are the handling of food unnecessarily, smoking, licking the fingers, dirty hands or clothing, cuts and sores not properly dressed, dirty cutlery or china, cracked cups.

Health Education by lectures and films touches only the fringe of the problem. If the personal standard of hygiene of a shop assistant is low then this may well be reflected in his or her attitude to hygiene when working; important enough when the workplace is *not* a foodshop but much more so when it is.

SECTION 5

CO-ORDINATING COMMITTEE

There was a change in the procedure of this Committee. It was becoming too big and members were wasting time waiting until "their family" was discussed. It was generally agreed that there should be:—

- a Co-ordinating Committee with a small membership who should discuss general policy and improvement in services.
- (ii) a Case Conference Meeting dealing with the actual families.

The Co-ordinating Committee consisted of :—
Medical Officer of Health or Deputy
Area Children's Officer or Deputy
Senior Area Welfare Officer
Area Nursing Officer
A Mental Welfare Officer
Senior Housing Assistant
N.S.P.C.C. Inspector
Ministry of Social Security Representative

The Committee met 4 times during the year and the Case Conference met about every 6 weeks when 15-20 families were discussed at pre-arranged times so that "social" workers could come and go as necessary.

The Chairman of the Case Conference Committee was a Senior Officer from one of the services, usually the Medical Officer of Health, Deputy Medical Officer of Health, Area Children's Officer or Senior Area Welfare Officer.

These new arrangements were working well by the end of the year and all found them more acceptable than the previous organisation.

It is important to add that as well as arranged meetings there were many ad hoc case conferences where two or three gathered together and resolved action to help some family. The only stipulation was that some member of these small meetings informed the Area Children's Officer of any decision so that one place had all the information about all the families.

SECTION 6.

SCHOOL HEALTH SERVICE.

GOSPORT COMMITTEE FOR EDUCATION.

SOCIAL SERVICES SUB-COMMITTEE.

HIS WORSHIP THE MAYOR (COUNCILLOR H. W. COOLEY).

Chairman: MR. G. V. MASTERMAN.

Vice-Chairman: ALDERMAN C. W. L. GILES.

Alderman: C. B. Osborn.

MRS. F. B. BEHRENDT. COUNCILLORS:

> W. A. CHIDLOW. J. D. S. GUEST. A. J. J. GUNTER. P. W. O'DELL.

Dr. P. V. Pritchard.

REVD. W. CULLEN, B.A. Miss M. N. B. Tyrrell.

Mr. L. A. Saunders.

SCHOOL PROVISION.

Number of school children on the school registers at end of vear: 11.565.

		ber of chools	Average Number of Children Attending
Primary Schools	County	19	5525
	Voluntary	6	1439
Secondary Schools	County	3	2124
St. Mary's R.C. (All ages)	Voluntary	1	309
Grammar School Comprehensive	County	1	816
School	County	1	1283
Nursery School	County	1	37
Foxbury Special Scho	ool County	1	92

CLINICS

School Clinic

This clinic is held on alternate Monday mornings at 3 Spring Garden Lane and served by the Assistant Medical Officer, is a Diagnostic or Special Investigation Clinic. Children are referred for special medical examinations and supervision. It is used for sorting out cases who may need to be passed on to other more specialised Clinics. School children are examined for suitability for part time employment and adults, mainly students and teachers, for suitability for training and superannuation.

The statistics of the work carried out at this clinic are set out below:—

Number of Children examined for employment		504
Number of children for special observation		24
Number of students examined for admission	to	
Training College		69
Number of teachers examined		10

Enuretic Clinic

The department holds a stock of eight bell alarm apparatus, three being purchased during the year. The time individual cases have had the alarm has ranged from two to six months. If cure has not been achieved within six months, the alarm is withdrawn, as it is felt that no further improvement can be looked for. A futher trial at a later date is not precluded.

NUMBER OF NEW CASES INVITED	TO CLINIC	48
Source of Referral: S.M.O.	39	
G.P.	5	
Other	4	
Number of Cases where Alarm	ISSUED	10
(a) Treatment Completed		4
Outcome: Cured	3	
Improved	—	
Failed	1	
(b) Treatment Incomplete		6
NUMBER OF CASES AWAITING ALA	RM	5
NUMBER OF CASES TREATED BY C	THER METHOD	s 11
(a) Treatment Completed		5
Outcome: Cured	1	lo referrible
Improved	3	
Failed	1	
(b) Treatment Incomplete		6
NUMBER OF CASES NOT TAKEN ON	FOR TREATM	ENT 22
NUMBER OF CASES WAITING TO BE	SEEN (31/12/	66) 7

In 1966 no record was kept of the number of children who failed to attend for a first appointment but three attended too infrequently for treatment to be maintained. The use of the alarm apparatus is more onerous for parents in the initial stages than is the child's bed-wetting, the management of which has become a matter of unwanted but accustomed daily routine. Treatment by drugs has no such disadvantage for the parent and it is, therefore, understandable that five cases amongst those not taken

on preferred to receive this type of treatment from their General Practitioners, with the possibility that they will return for the bell alarm at a later date. Another five underwent spontaneous cure while on the waiting list. Enuresis cures itself, given time, in the majority of cases and the alarm apparatus only speeds up the process to the relief of parent and child alike.

Special Clinics

The following Clinics are held at 3 Spring Garden Lane:—
CHILD GUIDANCE

Psychiatrist: Tuesday and Wednesday all day.

Psychologist: As required.

Psychiatric Social Worker: Tuesday and Wednesday all day. Children seen by appointment only.

SPEECH THERAPY

Tuesday and Friday all day, Wednesday mornings. Children seen by appointment only.

A Speech Therapist from the County staff works in Gosport for two-and-a-half days each week at the Health Clinic, 3 Spring Garden Lane. It is the practice for all children referred to her by Head Teachers, School Medical Officers and General Practitioners to have hearing tests before they can have assessment and possible treatment.

Work done:		
Number of Sessions		159
Number of Consultations		77
Number of Children Admitted to Register	and	
Treatment Begun		75
Number of Children Discharged		51
Number of Appointments Made		1137
Number of Treatments Given		1113
Number of new Children referred during year		82
Number of Children on Register at end of year	:	
Boys 33		
Girls 10		43
Number of Children on Waiting List		24

AUDIOMETRIC CLINIC

Thursday afternoons, weekly.

Children seen by appointment only.

The major source of cases seen at this Clinic were children referred because they had failed preliminary "sweep test" carried out by the school nurses. Children given these tests are those who School Medical Officers, Health Visitors, School Nurses or Teachers have felt may possibly be deaf and the object of this preliminary test is to diagnose the presence of normal hearing. Failure to pass the test does not necessarily mean that the child has hearing

loss. It is the purpose of the Audiometric Clinic to diagnose significant hearing loss and repeated attendances may be necessary to establish this. Cases showing clinical urgency are sometimes referred without preliminary testing, straight to the Clinic at the request of the doctor (40 in 1966). At the present time the School Nurses are getting into school less often than is desirable for hearing testing purposes because of their many other commitments.

Combined clinics with the Teacher of the Deaf are held at roughly two-monthly intervals at which the cases likely to need her special services are reviewed. These combined clinics suffered a sad interruption during 1966 owing to the death of the Teacher but were re-started in the autumn when the new Teacher took up her duties.

detection.				
Number of New C				40
Source of Referi	ral of New Cases	: (i) G.P.		3
		(ii) S.M.		37
		(iii) Hosp		Nil
		(iv) Othe	r	Nil
Number of Cases r	eferred to Genera	al Practition	ner	8
Number of Cases r	eferred to Hospit	al by us		13
Outcome of Hos	pital Referral:	(i) No tre	atment	
		(ii) Treatr	nent	9
Number of re-exar	ninations Seen	(11) 1100001	nent	198
Total Attendances	at Clinic			238
Age Distribution o		•••		200
		202000000000000000000000000000000000000		
Age Group	Number	Number	Failed	Sweep
(years)	Tested		Test	
5	5		5	
6	18		16	
7	6		2	
8	2 3		1	
9			1	
10	3		1	
11	1			
12	1		1	
13	_			
14	1		-	
15	1 - 1 - 1 - 1			
	-		_	
	40		27	

HEARING AIDS

Number of children in ordinary schools at 31/12/66 known to have been provided with Hearing Aids 10
Ordinary Schools 5
Wallisdean County Primary—Partially Hearing Unit 5

Two children over the age of 2 years were supplied with Commercial Hearing Aids during the year as the Medresco aid was found insufficiently powerful to give them adequate help.

Hospital Board Special Clinics

OPHTHALMIC

3 Spring Garden Lane. Wednesday afternoon, weekly Wednesday 1st and 3rd mornings in month. (Children seen by appointment only)

CHEST CLINIC (Patients of All Ages)
Gosport War Memorial Hospital

Wednesday all day.

PERIODIC MEDICAL EXAMINATIONS.

Number of Children examined:

Age Groups Inspected	Number	of Pupils	Inspected
(By year of birth)	Boys	Girls	Total
1960 and later	178	141	319
1960	358	356	714
1959	41	45	86
1958	19	21	40
1957	18	15	33
1956	14	9	23
1955	6	6	12
1954	7	10	17
1953	6	8	14
1952	112	124	236
1951 and earlier	503	418	921
Totals:	1262	1153	2415
	(1000)	(1000)	(0100)
	(1060)	(1060)	(2120)

Periodic Inspection of Leavers:

Full Periodic Medical Inspection			87
Partial Medical Inspection for Particu	ılar De	fects	185
Interview only (not examined)			848

TOTAL: 1120

(559)

Physical Condition of Children examined:

		Satisf	actory	Unsatisfactory		
		No.	%	No.	%	
Boys		1254	99.37	8	.63	
Girls		1152	99.91	1	.09	
TOTAL	:	2406	99.63	9	.37	
		== (2110)	===			

The totals in brackets are the corresponding totals for 1965.

OTHER EXAMINATION.

Special Examinations ... 760 Re-Inspections 2752

> TOTAL: 3512

RESULT OF INSPECTIONS.

The following table shows the defects found at periodic and special

	Periodic Inspections						Special Inspec-			
Defect or Disease	Er	ntrants						otal	ti	ons
	1	0	T	0	T	0	T	0	T	0
Skin	26	44	12	21	3	1	41	66	6	5
Eyes (a) Vision	50	58	28	13	13	9	91	81	13	12
(b) Squint	26	17	2	3	7	2	35	22	_	
(c) Other	2	26		4	1	1	3	31	2	4
Ears (a) Hearing	18	77	3	6		5	21	88	7	10
(b) Otitis Media	1	82	1	5	_	2	2	89	_	1
(c) Other	2	13	1	_	1	_	4	13	4	6
Nose and Throat	30	213	2	8	2	7	34	228	_	19
Speech	12	71	_	3	3	3	15	77	16	9
Lymphatic Glands	2	92	1	2	2	5	5	99		_
Heart	_	25	2	3		1	2	29	_	2
Lungs	4	47	4	4		_	8	51	1	2
Developmental :-								0.1		-
(a) Hernia	3	10	_	_	_	1	3	11	_	
(b) Other	1	82	_	2	1	2	2	86		4
Orthopaedic :-	1	-		-	•	-	-	00	7	-
(a) Posture	5	22	4	4	_	6	9	32		3
(b) Feet	12	55	4	16	3	5	19	76	1	8
(c) Other	10	45	7	14	2	5	19	64		12
Nervous System :	1.0		•	• •	-	0	10	04		12
(a) Epilepsy	1	5	1	2		2	2	9		2
(b) Other	1_	42	î	~	2	3	3	45	1	7
Psychological :		12	•	21/65	4	0	0	40	1	,
(a) Development	2	13	_	2		6	2	21		4
(b) C4. L:1:4	5	44		6		8	5	58	4	18
Abdomon	1	13	3	2		5	4	20	1	
Other	5	43	5	11		5	10	59	2	4
Menstruation	-	-	3	12	1	_	4	12	_	33
Totals:	214	1139	84	153	41	84	343	1167	58	167

Handicapped Pupils Category		Number on Register at 31/12/66
Blind	 	1
Partially Sighted	 	1
Deaf	 	2
Partially Hearing	 	16
Delicate	 	8
Physically Handicapped	 	11
Educationally Subnormal	 	57
Maladjusted	 	13
Epileptic	 	1
Speech Defective	 	10
	 	INCHAR
		110

SECTION 7

SCHOOL DENTAL SERVICE

Dental Staff

The Dental Staff in Gosport has been maintained at full strength according to the establishment figures. With the growth of Gosport it will soon be necessary to increase the establishment.

Following the policy of keeping staff up-to-date with the modern trends of Dentistry, two members of the dental nursing staff passed the examination which offers a qualification endorsed by the British Dental Nurses and Assistants Society. A series of lectures to assist in this training was given through the year and a member of the Gosport Dental Staff took part in this project.

Building and Equipment

In the past few years it has been possible to install a quantity of first class equipment. A small amount was added during 1966 to bring one of the older surgeries up to date.

Dental equipment is expensive and over the years has been getting more complex. One of the problems is proper maintenance and Gosport has joined with the County in a maintenance scheme. All dental and anaesthetic equipment is checked twice a year.

Treatment

3,949 School Children were treated at the School Dental Clinics. This is an increase over 3,297 for the previous year. The amount of orthodontic treatment given shows an increase. The time which can be found to offer patients this type of treatment indicates that slightly less conservation treatment was found necessary and this is reflected in the figures given for conservation work.

One of the very encouraging features of the School Dental Service is very evident in one of the clinics where the surgery is actually in the school building. Dentistry is organised as a normal part of school routine and from this a small section of the school community seems to derive a great deal of help and encouragement.

Whilst this report is predominantly about school children, the service is also responsible for pre-school children and every effort is made to persuade children from the age of two years onwards to be brought to the clinics. Often a small amount of dentistry carried out at these early ages can prevent a great deal of the difficulties which arise later. Even to accustom a small child to attend a Dental Surgery on a regular basis gives an immeasurable advantage. Juvenile dentistry differs from adult

dentistry because the factors affecting growth and development of the teeth and supporting tissues must be considered. These factors commence at birth and therefore the importance of early supervision of the developing teeth cannot be over-stressed.

Much of the work of the Dental Health Service lies in preventive treatment and lectures about the care of teeth continue in schools and clinics. This is valuable, but, even more so where it is supported by individual advice given in the surgery and particularly at the earliest age possible.

Dental Inspection and Treatment of School Children.

1.—Number of pup	oils inspected	today and			
(a) Periodic Ag(b) Specials (in		7,631 1,394			
2.—Number found	to require tre	atment			6,314
3.—Number offered	d treatment				6,249
4.—Number actual	ly treated				3,949
5.—Number of atte		reatment			12,029
6.—Half-days devo					,
T					65
Treatment					1,495
7.—Fillings:					
Permanent Tee	th				5,492
Temporary Tee					3,218
8.—Number of teet	th filled:				
Permanent Tee	th				4,578
Temporary Tee					2,931
9.—Extractions:					
Permanent Tee	th				*545
Temporary Tee	22.5				2,994
	226 for ortho	odontic rea	asons).		
10.—Number of ca	ases for extr	actions 11	nder gen	eral	
anaesthetics					1,119

11.—Orthodontics:

(a) Cases commenced					162
(b) Cases carried forw	year		212		
(c) Cases completed of			50		
(d) Cases discontinue			11		
(e) Cases transferred			40		
(f) Removable applia			76		
(g) Total attendances	;				2,101
12.—Number of pupils su 13.—Other operations:	pplied	d with artifici	ial den	tures	24
Permanent Teeth					
	• • • •	•••			591
Temporary Teeth	• • • •	•••			960
Patients X-rayed					317
Prophylaxis					2,132
Gum Treatment					418
Teeth otherwise conserved					826
Root fillings					21
Inlays					
Crowns					37







