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COUNTY BOROUGH OF GRIMSBY

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1962



INCLUDING REPORT ON THE

SCHOOL HEALTH SERVICE





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SCHOOL HEALTH SERVICE

Richardsons & Coppin Ltd., Victoria Street, Grimsby.

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GRIMSBY COUNTY BOROUGH HEALTH COMMITTEE

(as constituted on 31st December, 1962)

Chairman

ALDERMAN F. G. GARDNER

Deputy Chairman

The Worshipful the Mayor

(ALDERMAN E. W. MARSHALL, J.P.)

Aldermen

A. H. CHATTERIS	M. LARMOUR
J. H. FRANKLIN	A. C. PARKER
Mrs. M. LARMOUR	C. H. WILKINSON, M.B.E., J.P.

Councillors

A. H. BARKER	A. W. KENNINGTON
GEORGE R. BERRETT	Miss J. B. B. McLAREN
GRAHAM H. BERRETT	P. MUNNINGS
A. BRADLEY	J. P. MURPHY
W. R. BRUMBY	F. B. PARKES
R. BURTON	F. J. SHINNER
T. M. DAVISON	T. W. SLEEMAN
B. FAULDING	Mrs. L. TRAYER
Mrs. F. E. FRANKLIN, J.P.	W. E. WILKINS

and the following Co-opted Members :—

Mr. R. C. BELLAMY	Dr. E. A. ROBERTSON
Dr. J. COTTRELL, J.P.	Mr. C. W. SPENDELOW
Mr. A. LILES	

SUB-COMMITTEES OF THE HEALTH COMMITTEE

MENTAL HEALTH :—

COUNCILLOR MRS. FRANKLIN (*Chairman*) ; ALDERMAN MRS. LARMOUR (*Deputy-Chairman*) ; ALDERMEN GARDNER, M. LARMOUR, MARSHALL AND PARKER ; COUNCILLORS G. H. BERRETT, G. R. BERRETT, BRADLEY, AND MRS. TRAYER.*Co-opted Members* :—MESDAMES H. L. R. BONTOLT, M. CRESSWELL, L. NICHOLLS AND A. B. TURNER ; DR. P. D. CROWLEY.

PERSONAL HEALTH :—

ALDERMAN WILKINSON (*Chairman*) ; ALDERMAN MARSHALL (*Deputy-Chairman*) ; ALDERMEN GARDNER, MRS. LARMOUR, M. LARMOUR AND PARKER ; COUNCILLORS G. H. BERRETT, FAULDING, MISS McLAREN, AND MRS. TRAYER.*Co-opted Members* :—MESDAMES M. CRESSWELL AND A. B. TURNER ; MESSRS. A. LILES AND J. SULLIVAN ; DR. T. BARROWMAN.

PUBLIC HEALTH :—

ALDERMAN GARDNER (*Chairman*) ; ALDERMAN MARSHALL (*Deputy-Chairman*) ; ALDERMEN M. LARMOUR AND PARKER ; COUNCILLORS G. H. BERRETT, BRUMBY, BURTON, KENNINGTON, SLEEMAN AND MRS. TRAYER.*Co-opted Members* :—MRS. H. L. R. BONTOLT ; MESSRS. A. CUCKSON, M. HOOLE, N. HOPPER AND T. HUNT.

STAFF OF THE HEALTH DEPARTMENT, 1962.

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER

R. GLENN, M.B., B.Ch., B.A.O., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER

S. R. W. MOORE, M.B., B.Ch., B.A.O., D.P.H.

ASSISTANT MEDICAL OFFICERS OF HEALTH AND SCHOOL MEDICAL OFFICERS

J. G. J. COGHILL, M.B., Ch.B.

EILEEN M. PRIOR, L.R.C.P., M.R.C.S.

J. L. T. GRAHAM, L.R.C.P., L.R.C.S., L.M.

CHIEF PUBLIC HEALTH INSPECTOR.

H. PARKINSON, 1, 2.

PUBLIC HEALTH INSPECTORS

A. MANSON, 1, 2, (*Deputy Chief Inspector*)

W. W. REED, 1, 2, (*Senior Inspector*).

S. F. BURKITT, 1, 2. (resigned 16.5.62).

S. MASTIN, 1, 2.

J. HUFFORD, 1, 2.

J. WOOD, 1, 2, (resigned 26.1.62).

C. R. WILSON, 1, 2, (from 1.4.62).

D. C. VANSON, (Pupil)

L. SAUNBY (Pupil).

M. HUTCHINSON (Pupil).

HEALTH VISITORS

Mrs. I. HALDANE, 3, 4, 5. *Superintendent.*

Miss I. R. ADAMSON, 3, 4, 5.

Miss M. C. BAGG, 3, 4, 5.

Miss J. BELL, 3, 4, 5.

Miss H. BRAGG, 3, 4, 5.

Mrs. M. DAWSON, 3, 4, 5.

Mrs. J. HAVERCROFT, 3, 4, 5*. 10.10.62

Mrs. M. B. KOZLOWSKI, 3, 4, 5.

Miss K. L. SPENCER, 3, 4, 5.

Mrs. I. M. STOREY, 3, 4, 5.

Miss E. M. TIPPLER, 3, 4, 5.

Miss J. D. M. VARRIE, 3, 4, 5.

TUBERCULOSIS VISITORS

Miss D. ATKIN, 3, 4, 5.

Mrs. R. DONSON, 3, 4.*

CLINIC NURSES

Mrs. M. COLEMAN, 3.

Mrs. J. W. R. MASON, 3.

Mrs. I. M. MILLS, 3, 4 (to School Health Service on 1.4.62.)

HOME NURSING SERVICE

Miss F. ENGLEDOW, 3, 4, 5. *Superintendent.*

and staff of 14 nurses.

MUNICIPAL MIDWIVES

Miss F. ENGLEDOW, *Non-Medical Supervisor.*

Miss E. BAXTER, 3, 4.

Miss G. A. BAXTER, 3, 4.

Mrs. C. BEDFORD, 3, 4.

Mrs. K. M. BIRKETT, 3, 4.

Mrs. C. E. CALTHORPE, 3, 4.

Miss D. M. DAWSON, 3, 4.

Miss H. M. FAWCETT, 3, 4.

Mrs. K. G. GILMOUR, 3, 4.

Miss J. ORREY, 3, 4.

Mrs. P. SWABY, 3, 4.

Mrs. C. WESTACOTT, 3, 4.

Mrs. J. YEOMANS, 4.

Miss D. G. Inkpen, 3, 4* (from 26.10.62.)

Mrs. S. M. Higson, 3, 4* (from 27.11.62.)

MENTAL WELFARE OFFICERS

Miss E. M. WOULD, *Chief*.
 Mr. G. W. A. MACKENZIE
 Mr. L. C. RACKHAM.

Mrs. J. V. STRINGER.
 Mrs. M. TWIDALE*.
 Miss J. D. TEMPLEMAN

JUNIOR TRAINING CENTRE

Miss E. PATERSON, *Supervisor*.
 Miss H. M. BARKER.
 Mrs. A. E. GORRINGE.

Mrs. A. Y. WESTWOOD (from 1.5.62).
 Mrs. L. A. WILLERTON.
 Miss P. M. WRIGHTAM.

AMBULANCE SERVICE

E. BROWN, Ambulance Officer, and staff of 31.

DOMESTIC HELP ORGANISER

Miss L. BLACKBURN.

SOCIAL WORKER

Miss B. A. CROSS (resigned 31.8.62).
 Mrs. M. PENDLEBURY (from 22.10.62).

CLERICAL STAFF

W. R. GALE *Chief Clerk*.
 D. AMERY.
 M. WILKINSON (resigned 18.9.62).
 P. T. KITCHING.

Mrs. J. E. KNIGHT.
 Miss S. HORN.
 Mrs. C. M. CHIDWICK (from 10.9.62).

Public Health Inspector's Sub-Department.

S. NASH.
 T. H. R. JOHNSON.

Miss M. BRYSON.

Maternal and Child Welfare Service.

Mrs. J. A. POTTER.
 Miss S. WILLING (to 30.9.62).
 Mrs. M. KIEDRON.
 Mrs. R. EARLEY.
 Mrs. E. DUMELOW* (from 24.9.62).

Mrs. I. SMITH.
 Mrs. I. E. LONGSTAFF (resigned 29.7.62).
 Mrs. F. M. MILKINS (from 30.7.62 to 23.11.62).
 Mrs. D. REDDING (from 19.11.62).

Mental Health Service.

Miss L. E. HUTSON.
 Mrs. J. M. DUNK (resigned 30.11.62).

Mrs. P. L. REID (from 26.11.62).

Domestic Help Service.

Miss B. N. DOUGHTY (resigned 10.10.62).
 Miss D. BOSLEY (from 1.1.62 to 5.10.62)

Miss S. M. PERKINS (from 2.8.62).
 Miss D. SIMMONS (from 1.10.62).

Ambulance Service

Miss F. FIELDS

Home Nursing Service

Miss N. M. WELLS (resigned 28.4.62).
 Miss C. BURTON (from 20.8.62).

Miss B. M. NORTON (from 7.5.62 to 21.8.62)

* Part-time appointment.

1. Public Health Inspector's Certificate.
2. Meat Inspector's Certificate.
3. State Registered Nurse.
4. State Certified Midwife.
5. Health Visitor's Certificate.

INTRODUCTION

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

I have the honour to present the statutory Annual Report on the Health of the Borough for the year 1962.

Once again, it can be confidently stated that on the whole the vital statistics indicate a very healthy town. The mid-year estimate of the population shows a net increase of 260, but the birth rate was the highest since 1947 and is well above the national average. The illegitimacy rate is only slightly increased, which is satisfactory for a port area. However, the infant mortality is slightly above the national average and there must be no complacency while this is so. To offset this, the neo-natal, early neo-natal, stillbirth and perinatal mortality rates (especially the latter) have all gone down appreciably. This denotes good obstetrics in the hospital and domiciliary services.

In contrast, the general death rate has risen, but on analysis the increase is entirely among the older age groups, sixty per cent. of the total deaths being in persons 70 years of age and over. Fifty-six per cent. of the total deaths registered in the borough occurred in hospitals. Deaths from all forms of cancer are slightly below the national average, but those due to cancer of the lung showed an increase of one. The national publicity which ensued from the statement of the Royal College of Physicians has made some people think, but very few give up smoking. One sees more pipes and cigars being smoked by the more mature, but the teenager still prefers a 'gasper'.

There were no serious epidemics during the year. A very high incidence of chicken pox complicated the smallpox scare and excessive demands were made on the health department for vaccination. As the lymph was in short supply the Director of the Public Health Laboratory at Lincoln issued it only to this department. All genuine contacts and those forced to travel into the epidemic area received vaccination.

There was a slight increase in the number notified as suffering from tuberculosis, while the number of deaths from this disease has again gone down. If the new cases could be likewise reduced then all would be well. The visit of the mass miniature radiography unit did not detect a large number of new cases, but no doubt did mostly account for the increased notifications. The public fear of tuberculosis has largely disappeared and this leads to a more careless attitude towards it, which will delay the complete eradication of the disease. There were no outbreaks in the schools, but there was a definite connection among five cases notified from a public office.

I visited one hundred and twelve patients on the chronic sick waiting list. Although this represented eight less than the previous year the number requiring urgent admission has gone up in that almost half were in category 'A' sociologically. Thirty-seven would have justified hospitalisation but due to pressure on the bed state could not be admitted. Eighteen were able to cope given local authority services, while three had died before the visit. Many cases are still frail on discharge and continue to need supervision by the health visitor or the social worker. These constitute a great burden to relatives, neighbours, the district nursing and home help services. Section 47 of the National Assistance Act was not invoked, although I was prepared to do so (if found necessary) in three cases which were referred to me by the Chief Public Health Inspector.

The Mental Health section is hard pressed with not only cases referred from the psychiatric unit, but most of those discharged from St. John's Hospital. Only frequent skilled supportive visiting is keeping many patients out of hospital. This is exacting and time consuming work which quite often is disappointing. The successful cases are unrecorded but the failures advertise themselves. A most encouraging aspect was the opening of the Special Care Unit. This extension to the Junior Training Centre was due to the magnificent effort of the local branch of the National Society of Parents of Mentally Handicapped Children, who paid for the building. Already it has more than justified its need and it is possible to give some help to many harassed parents when it is most necessary.

The relationship of the Health Department with the other Services in the area is excellent and I am most grateful for the willing co-operation received. Especially noteworthy is the further development in the Paediatric Service whereby a health visitor not only attends the out-patient clinics, but does a ward round with the Paediatrician.

It is a pleasure to pay tribute to the sympathetic consideration given by the Chairman and members of the Health Committee and its sub-committees to the matters placed before them. Grateful thanks are also due to the other departments for unstinting help at all times, while the work in this report could not have been achieved without a conscientious and loyal staff.

R. GLENN,
Medical Officer of Health.

HEALTH DEPARTMENT,
1 Bargate, Grimsby.

June, 1963.

PART I.—STATISTICS AND SOCIAL CONDITIONS.

SUMMARY OF STATISTICS.

Area (in acres)—excluding foreshore	5,864
Registrar General's estimate of population, mid-1962	96,780
No. of inhabited houses (end of 1962) according to Rate Books ..	29,983
Rateable value	£1,248,833
Sum represented by a penny rate	£5,228
Live births :—	
Males	
Females	
Total	
Legitimate	967
Illegitimate	77
	1,044
	908
	79
	156
	2,031
Live birth rate per 1,000 population	21.0
Adjusted live birth rate (area comparability factor 1.00)	21.0
Illegitimate live births (per cent. of total live births)	7.6
Stillbirths :—	
Legitimate	15
Illegitimate	2
	17
	9
	26
Stillbirths rate per 1,000 total live and still births	12.6
Total live and still births	2,057
Infant deaths :—	
Legitimate	34
Illegitimate	1
	35
	12
	1
	46
	2
	48
Infant Mortality rates :—	
Total infant deaths per 1,000 total live births	23.6
Legitimate infant deaths per 1,000 legitimate live births ..	24.5
Illegitimate infant deaths per 1,000 illegitimate live births ..	12.8
Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births)	13.3
Early Neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	11.3
Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births)	23.8
Maternal mortality (including abortion) :—	
Number of deaths	Nil
Rate per 1,000 total live and still births	Nil
Deaths (Males 593 ; Females 560)	1,153
Death rate	11.9
Adjusted death rate (area comparability factor 1.12)	13.3

	<i>Number</i>	<i>Rate</i>
Deaths from measles	—	—
„ „ whooping cough	—	—
„ „ diphtheria	—	—
„ „ respiratory tuberculosis	6	0.06
„ „ other tuberculous diseases	1	0.01
Total tuberculosis deaths	7	0.07
Deaths from cancer	196	2.02
„ „ influenza	7	0.07

Population.—(Table 1, page 56). The Registrar General's estimate of the home population of Grimsby at mid-year 1962 was 96,780, an increase of 260 on his estimate for the previous year. The natural increase of the population i.e., the excess of live births over deaths, was 878.

Births.—(Tables 1 and 2, pages 56 & 57). There were 2,031 live births (1,044 males and 987 females), giving a birth rate of 21.0 per thousand of the population, which is the highest recorded since 1947, compared with 18.0 for England and Wales.

One-hundred and fifty-six (7.6 per cent.) of the live births were illegitimate, the illegitimacy rate being 76.8 per thousand live births. The corresponding rate for 1961 was 67.4.

Stillbirths.—Twenty-six stillbirths were registered, giving a rate of 0.27 per thousand of the population. The rate expressed per thousand total (live and still) births was 12.6 ; for England and Wales it was 18.1.

Deaths.—(Tables 3 and 4, pages 57 and 58). There were 1,153 deaths (593 males and 560 females), equal to a death rate of 11.9.

The adjusted death rate for Grimsby (calculated by multiplying the crude rate by the Registrar General's area comparability factor of 1.12) was 13.3, compared with 11.9 for England and Wales.

Seven hundred and seventy-one persons—comprising residents and non-residents—died in institutions in the borough, equivalent to 56 per cent. of the total deaths (1,376) registered.

Deaths of residents at 70 years of age and upwards totalled 696 (581 last year), the number at age periods being :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Between 70 and under 75 years	86	73	159
„ 75 „ „ 80 „	95	128	223
„ 80 „ „ 85 „	77	108	185
„ 85 „ „ 90 „	31	58	89
90 years and over	17	23	40

This is equal to 60 per cent. of the total deaths, compared with 56 per cent. in 1961.

Table 4 gives the causes of death in age periods and has been compiled from figures supplied by the Registrar General.

Infant Mortality.—There were 48 deaths under one year of age, giving an infant mortality rate of 23.6 per thousand live births. For England and Wales the rate was 21.4.

The infant deaths are classified by cause in Table 5 (page 59).

Neo-Natal Mortality.—Twenty seven of the 48 deaths recorded above were of infants under 4 weeks, equivalent to a rate of 13.3 per thousand live births. The corresponding rate for England and Wales was 15.1.

The early neo-natal mortality rate for Grimsby—there were 23 deaths of infants under one week of age—was 11.3 per thousand live births.

Perinatal Mortality.—The combined number of stillbirths and deaths of infants under one week of age was 49, which gives a rate of 23.8 per thousand total live and still births.

Maternal Mortality.—No deaths from pregnancy, childbirth or abortion occurred during the year.

State of Employment.—The Manager of the Employment Exchange has kindly furnished particulars regarding the number of registered unemployed persons in the Grimsby Exchange area, which covers Grimsby, Cleethorpes and the Grimsby Rural District. Separate figures are not available.

Total live register in January, 1962	
(males 1,219 ; females 168)	.. 1,387
Total live register in July, 1962	
(males 1,101 ; females 123)	.. 1,224
Total live register in December, 1962	
(males 2,115 ; females 197)	.. 2,314

These figures include temporarily stopped claimants.

The number of residents known to have left Grimsby permanently to take up employment in other areas (excluding daily travel) was 29 (males 20 ; females 9).

Rainfall.—The total rainfall recorded during the year was 21.32 inches (24.45 in 1961), the heaviest fall being 1.38 inches on the 7th August.

PART II.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

NOTIFIABLE INFECTIOUS DISEASES.

The incidence of notifiable diseases (other than tuberculosis) was as follows :—

Diseases	Total Cases notified.	Cases admitted to Hospital.	Total Deaths
Scarlet fever	24	4	—
Whooping cough	6	—	—
Measles	337	—	—
Acute poliomyelitis — Paralytic	3	3	—
Meningococcal infection	1	1	—
Dysentery	396	14	—
Ophthalmia neonatorum	1	—	—
Puerperal pyrexia	3	1	—
Acute pneumonia	10	2	47
Food poisoning	3	—	—
Erysipelas	1	—	—
Acute rheumatism	2	1	—
Chicken pox	1,593	8	—
Totals	2,380	34	47

No notifications were received of other notifiable diseases not specified in the table above, e.g., diphtheria, smallpox, etc., and Table 6 on page 60 gives the age and sex distribution of the total cases notified.

Scarlet Fever.—24 cases (11 males and 13 females) were notified, compared with 44 in 1961. Four of the patients were treated in hospital.

Whooping Cough.—6 notifications (2 males and 4 females) were received compared with 40 the previous year. No case was treated in hospital.

Measles.—337 cases (167 males and 170 females) were reported compared with 3,148 the previous year. None of the cases were admitted to hospital and there were no deaths.

Acute Poliomyelitis.—3 cases of paralytic poliomyelitis were notified in the month of June, a male of 7-months and two females, aged 2 and 5 years respectively. All were treated in hospital and none had received any immunising vaccine.

There was no relationship between any of the cases and they occurred in different wards in the town. Although no source of infection was discovered, all the cases suffered from Virus Type 1 infection.

Meningococcal Infection.—One case occurred in an adult female and was treated in hospital.

Dysentery.—Notifications of this disease totalled 396 (189 males and 207 females) compared with 78 the previous year. The majority of these were due to *Shigella Sonnei*, but a few cases, caused by *Salmonella* infections, were strongly resistant to the usual antibiotics. Some patients with sensitive cultures did not respond, continuing to excrete the organism for several months.

Ophthalmia Neonatorum.—One case of this disease was reported. The patient was treated at home and the services of a district nurse were offered by the local authority.

Puerperal Pyrexia.—Three notifications were received, one of the women being treated in hospital. The services of a district nurse were offered by the local authority in all cases nursed at home. The attack rate per thousand total births was 1.45.

Acute Pneumonia.—10 cases (5 of primary and 5 of influenzal pneumonia) were reported, two being admitted to hospital. Forty-seven deaths were ascribed to all forms of pneumonia, giving a death rate of 0.48.

Food Poisoning.—Three cases (a male and two females) were notified at the commencement of the year, and three further cases (a male and two females) were 'otherwise ascertained'. All were relatives of the same family who had dined together on Christmas Day. The agent identified was *Salmonella* St. Paul, and details of these cases were fully reported in pages 47 and 48 of the Report for 1961.

Erysipelas.—Only one case of this disease was reported.

Acute Rheumatism.—The Acute Rheumatism Regulations require the notification of cases of acute rheumatism in persons under 16 years of age occurring in certain specified parts of England, and two such cases (a boy aged 10 years, and a girl, aged 3 years and 9 months) were reported.

Each case is finally referred to the consultant cardiologist for assessment and placing in the appropriate category under a scheme devised by the Royal College of Physicians. The cases were thus duly confirmed.

Chicken Pox.—Notifications totalled 1,593 (785 males and 808 females) compared with 201 the previous year. Eight cases were treated in hospital.

Influenza.—Although this is not a notifiable disease unless complicated by pneumonia, 7 deaths (6 males and 1 female) were certified as due to influenza, compared with 5 in 1961.

Public Health (Infectious Diseases) Regulations, 1953.—It was not necessary to take any action under these Regulations during the year.

Cases, Contacts or Carriers of Infectious Disease.—A notice was sent to employers of 29 cases (14 males and 15 females) of infectious disease who were engaged in the handling of food, informing them that the person concerned should not resume his/her employment until the medical officer of health certified that it was safe to do so.

Certificates of exclusion from work under Ministry of Health Circular 115/48 were issued to 109 contacts or carriers (54 males and 55 females) also engaged in the handling of food.

CANCER

The total deaths due to cancer was 196 (115 males and 81 females), giving a local death rate from this cause of 2.02 compared with 2.17 for England and Wales. The corresponding rates for the previous year were 2.10 and 2.16 respectively.

Of the total deaths from cancer 55 (50 males and 5 females) were ascribed to cancer of the lung and bronchus, equal to a rate of 0.57 per thousand population for Grimsby ; for England and Wales it was 0.51. The rates for last year were 0.56 and 0.49 respectively.

Other cancer death rate was 1.45 (England and Wales 1.66) compared with rates of 1.54 and 1.67 respectively for 1961.

TUBERCULOSIS

Notifications.—(Tables 7 and 8, page 61). Notifications under the Public Health (Tuberculosis) Regulations, 1952 totalled 69, compared with 59 the previous year. A further 12 cases of pulmonary tuberculosis already notified in other areas moved into the borough.

Deaths.—(Tables 7 and 8). The following shows the number of deaths and the death rate from tuberculosis per thousand of the population :—

		<i>Grimsby</i>	<i>England and Wales</i>
		<i>Number</i>	<i>Rate</i>
Respiratory	.. .. .	6	0.062
Other forms	.. .. .	1	0.010
		<hr/>	<hr/>
Totals	..	7	0.072
		<hr/>	<hr/>

The total tuberculosis death rates in each year of the Decennium (1953—1962) was :—

	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
England and Wales	0.19	0.17	0.14	0.11	0.10	0.10	0.08	0.07	0.07	0.06
Grimsby	0.27	0.23	0.19	0.19	0.12	0.16	0.12	0.08	0.10	0.07

Revision of Register.—The names of 79 notified persons were removed from the register during the year, these consisting of :—

Diagnosis not established	.. .. .	3
Recovered	.. .. .	32
Died	.. .. .	7
Died from causes other than tuberculosis	.. .. .	7
Left district	.. .. .	20
Not found after adequate search	.. .. .	1
Not desiring further public medical treatment	.. .. .	9

On 31st December, 1962, there were 768 cases on the register of the Medical Officer of Health, 694 pulmonary and 74 non-pulmonary patients.

Mass Radiography.—The Lincolnshire Mass Radiography Unit carried out a chest survey of the adult population in Grimsby during the summer months, and the following information is available :—

Miniature films taken	..	..	..	..	12,905
Recalled for large film	..	..	..	..	190
Referred to (a) Chest Clinic	..	..	..	..	68
(b) own doctor	..	..	..	..	14

Cases of pulmonary tuberculosis requiring

(a) close clinic supervision or treatment	17
(b) occasional supervision	1
Post primary inactive pulmonary tuberculosis	25
Bronchiectasis	1
Sarcoidosis	1
Carcinoma of bronchus	3
Cardiac abnormality	1
Still under observation at Chest Clinic	13

Chest Clinic.—The following information has been supplied by Dr. J. Glen, consultant chest physician, and is a general analysis of the work carried out in regard to Grimsby patients at this clinic during 1962.

New cases examined (excluding contacts) : *Total*

(a) Definitely tuberculous	56	}	..	2,720
(b) Diagnosis not completed	..	..	73	
(c) Non-tuberculous	..	..	2,591	

Contacts examined :

(a) Definitely tuberculous	11	}	..	920
(b) Diagnosis not completed	..	..	54	
(c) Non-tuberculous	..	..	855	

Cases written off Clinic Register, including 3,482 non-tuberculous .. 3,545

Cases on Clinic Register as at 31st December, 1962 :

(a) Definitely tuberculous	805	}	..	934
(b) Diagnosis not completed	129			

Total attendances at Clinic, including contacts	..	..	..	7,735
Consultations with medical practitioners	..	..	..	8,188
Home visits by nurses	..	..	..	2,762
X-ray examinations :—Radiographic film	..	..	..	3,779
Fluorographic screen	..	..	..	1,538

The number of new cases of tuberculosis diagnosed increased by 6 as compared with the previous year and consisted of 48 pulmonary and 8 non-pulmonary. The increase was partly due to an extended visit by the Miniature Mass Radiography Unit in the area, and to the splendid response of the public in attending sessions. In view of the method of discovery a number of these cases of early tuberculous disease were eminently treatable without too much disruption of the patient's life.

As a result of the increase in the new patients, more contacts were dealt with, the total being 920. From this source 11 new pulmonary cases were discovered—6 adults and 5 children.

The number of deaths from all forms of tuberculosis during 1962 was 7 (6 respiratory and 1 non-respiratory), thus the exceptionally low figure in recent years has not only been maintained but has actually reduced, demonstrating the treatability of the disease as we know it at the present time. During 1941 some 65 deaths from this condition were reported; 10-years later the mortality figure had reduced to 55. The figure for 1962 emphasises the vast changes that have taken place in the successful modern methods of treatment and co-operation in all branches of the hospital service.

Non-tuberculous conditions requiring special investigation referred to the chest clinic and either diagnosed there or through in-patient treatment in the chest hospital during the year were as follows :—

	<i>Adult males</i>	<i>Adult females</i>	<i>Children</i>
Cancer	50	4	—
Bronchiectasis	4	7	1
Asthma	14	14	14
Atypical pneumonia	3	—	1
Unresolved pneumonia	12	5	2
Lung abscess	—	2	—
Non-tuberculous effusions	3	—	1
Spontaneous pneumothorax	6	1	—
Foreign bodies	1	—	—
Empyema	1	—	—
Cystic disease	2	2	—
Cardiac	20	3	1
Diaphragmatic hernia	—	1	—
Other conditions	6	5	5
Totals ..	122	44	25

Cancer.—There has been a definite increase in the number of cases suffering from this disease. The figure is slightly higher than in the previous year, and it must be remembered there are other sources of diagnosing the condition in the town. There is a tendency for more cases to be dealt with at Springfield Hospital than in the past.

Bronchiectasis.—Little change has been noted in the incidence of this condition during 1962.

Asthma.—There has again been a reduction in the number of this type of case seen at the chest clinic. In certain instances skin-testing is carried out and positive reactors are either desensitised during a spell of in-patient treatment in the chest hospital or the required injections are given by the patient's private doctor, to whom the solutions are forwarded. Where there has been need for a series of booster injections to a particular case, these have been given in a similar manner.

We have had a particular interest in this condition for some years and many cases previously referred have been dealt with and now attend at intervals for review.

Unresolved Pneumonia.—There has been a decrease in the number of cases of this form of illness referred to the clinic. The co-operation of general practitioners remains high.

Cardiac Conditions.—This figure remains much as in the previous year. There is still quite a number of cases of Cor Pulmonale appearing as new individuals and these constitute a large mass of the cardiac conditions with which we have to deal.

Number of New Cases referred to the Chest Clinic by General Practitioners, Institutions, Clinics, etc., in recent years.

<i>Year</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
1958	999	1,690	372	3,061
1959	813	1,601	321	2,735
1960	1,072	1,429	282	2,783
1961	845	1,581	316	2,742
1962	888	1,600	232	2,720

Preventive Care.—This branch of the work embraces many sections but perhaps one outstanding example is on the institutional side of treatment for tuberculosis. In an endeavour to reduce the possibility of serious blood spread in the very young child, say under four years, with a positive tuberculin test, but who is apparently well and symptomless, I have resorted to institutional anti-tuberculous drug treatment as a preventive measure.

It is gratifying to find that no child under clinic supervision in this category has had any serious tuberculous condition and no case of tuberculous meningitis has arisen during the year in the children under our care.

The B.C.G. Vaccination campaign continues on a very satisfactory basis and contacts of all ages, including those at work, have opportunities for examination, tuberculin testing and radiological examination. The investigation into infant contacts has been continued to a marked degree. Experience has shown that there is no contra-indication or lack of effectiveness in carrying out vaccination in small infants and staff are particularly watchful in performing this protection in the case of contact babies born in the maternity hospitals in the area.

The number of successful vaccinations has once again increased during the year. As I said before, this can be a variable figure and is largely dependent on the number of diagnosed cases of tuberculosis.

	<i>A.M.</i>	<i>A.F.</i>	<i>M.C.</i>	<i>F.C.</i>
Contacts	12	24	148	143
On behalf of local authority ..	—	1	14	12
Hospital in-patients	—	—	11	7
Hospital staffs	—	18	—	—
Total ..	12	43	173	162

The number of contacts seen through the clinic reflects the vigilance of health visitors in bringing them along for investigation. The majority of the contacts diagnosed as having tuberculosis, which I mentioned previously, would have escaped detection for a long while but for the facilities available for contact testing. The ascertainment of such cases is particularly important as they are often found to have a minor degree of tuberculous disease which is sometimes treatable without hospitalisation or even, in certain cases, without disturbance of the person's day to day life.

B.C.G. Vaccination is given at birth in two maternity hospitals in the area when there is family history of tuberculosis. The babies are later seen at the chest clinic to ascertain that the vaccination has been successful. This is an arrangement I would like extended for all babies born in the maternity hospitals where parents are agreeable to the protection being given. It would involve little additional work in these hospitals or to the staff administering the vaccination.

Another important point in preventive care work is good and adequate housing accommodation for the patient and family. In this respect there is complete co-operation between the local authority and the chest clinic for necessitous cases, mostly of the infectious type, to receive alternative accommodation, whilst those living in overcrowded conditions or where a separate bedroom cannot be set aside for the case are also assisted. As in the previous year the Housing Committee has been very helpful indeed.

It has now been possible to absorb the chronic bronchitic patients into the routine sessions. The use of chemotherapy and other drugs has proved of great benefit to patients, although the problem of dealing with this class of case still remains.

A separate evening session is also held for cases in need of physiotherapy, breathing exercises and postural drainage. Sessions are held periodically by Mr. R. C. Barclay, F.R.C.S., part of which are devoted to the assessment of bronchiectatic cases suitable to surgery, as well as the follow-up of his operative cases in this area. This arrangement has been found to be very helpful in the assessment of difficult patients.

Employment Conditions.—Facilities for the sheltered employment of tuberculosis cases in this area do not exist. The present method of treatment of these cases enables a high percentage to return to their previous occupation and the need for sheltered employment is not particularly acute. In certain instances where it is not advisable for the patient to return to a former occupation, the co-operation of the Ministry of Labour is sought whereby the case can be assessed and, if considered suitable, trained under the Industrial Rehabilitation Scheme of that department.

Follow-up of Cases.—As the one full-time and one part-time Tuberculosis Health Visitors also carry out duties as clinic nurses and radiographers there is a complete follow-up of patients. This is a satisfactory arrangement as any case showing retrogression, under chemotherapy, etc., is immediately re-visited at home. In this way the nurses are fully aware of what is happening and this tends to more a intimate touch between patient and the clinic staff.

VENEREAL DISEASES

The Special Treatment Centre at 38 Queen Street, Grimsby, is under the administrative control of the Grimsby Hospital Management Committee, and the times at which sessions are held with the venereologist in attendance are :—

Males :—Mondays, 10 a.m. and 4.30 p.m. ; Wednesdays, 2 p.m.

Females :—Mondays, 2 p.m. ; Thursdays, 10 a.m. and 4.30 p.m.

The Centre is open for intermediate attendance from Monday to Friday from 10 a.m. to 12 noon and 2 to 7 p.m., also on Saturday from 10 a.m. to 12.30 p.m.

During the year 407 Grimsby residents attended this centre for the first time, the classification of these cases being :—

<i>Condition</i>					<i>Males</i>	<i>Females</i>	<i>Total</i>
Syphilis..	..	..	..	..	5 (2)	2 (2)	7 (4)
Gonorrhoea	..	..	..	..	64 (35)	11 (10)	75 (45)
Other Conditions	..	..	..	..	290 (103)	35 (20)	325 (123)
Totals					359 (140)	48 (32)	407 (172)

(Note.—The brackets show the figures for 1961.)

The Port Health Inspectors continued to circulate to shipping information about the location and times of sessions of the Centre.

PART III. LOCAL HEALTH SERVICES.

CARE OF MOTHERS AND YOUNG CHILDREN.

Infant Welfare Centres.—Eight infant welfare sessions are held at six centres, as follows :—

Hope Street Welfare Clinic	Tuesday and Thursday, 2 p.m.
Watkin Street Welfare Clinic	Tuesday and Thursday, 2 p.m.
Milton Road Welfare Clinic	Wednesday, 2 p.m.
Old Clee Church Hall	Friday, 2 p.m.
St. Alban's Church Hall, Longfield Road	Tuesday, 2 p.m.
Louth Road Methodist Church Hall	Friday, 2 p.m.

The total number of attendances both in children under 1 year and those between the age of 1 and 5 was 19,451, an increase of 993 over 1961. There were 16,556 attendances of those under one year, 1,125 more than last year. In the 1 to 5 group, there were 2,895 attendances, 132 less than the previous year. Children in this group usually attend Toddlers' Clinics.

Baby scales for test feeding and weighing are available to all mothers. Seventy-five cases with breast feeding problems were investigated and 47 continued to breast feed successfully.

There was an increase in attendances at all clinics, but it was most marked at the Milton Road and Louth Road clinics which serve areas of newer housing development.

The immunisation and vaccination programme at clinics has continued, and was extended to include Watkin Street in February, and Old Clee in June.

The numbers immunised and vaccinated at clinics are shown in the following table, the figures in brackets being those for the previous year :—

	<i>Number of children</i>		
	<i>Vaccinated for smallpox</i>	<i>Immunised against</i>	
		<i>Whooping cough Diphtheria and Tetanus</i>	<i>Poliomyelitis</i>
Hope Street	199 (122)	477 (348)	242 (5)
Watkin Street	82 (—)	166 (—)	102 (—)
Milton Road	118 (50)	251 (81)	140 (60)
Old Clee	12 (—)	53 (—)	40 (—)
Louth Road	67 (62)	204 (192)	284 (147)
Longfield Road	60 (47)	173 (235)	221 (153)
Totals	538 (281)	1,324 (856)	1,029 (356)

The numbers benefiting from this service has increased in the year, and it is greatly appreciated by mothers.

Toddlers' clinics.—Transfer from infant welfare to toddlers' clinics takes place at 15 to 18 months old. The child attends the toddlers' clinic by a special appointment system at 18 and 21 months, 2, 2½, 3, 3½, 4 and 4½ years. Thus, a child is under surveillance from birth until cared for under the School Health Service.

Distribution of Welfare Foods and Nutritives.—Sales for the central office in Victoria Street and infant welfare clinics were as follows :—

	1961	1962
National Dried Milk, tins	52,375	53,016
Orange juice, bottles	26,839	16,804
Cod Liver oil, bottles	3,811	2,218
A & D vitamin tablets, packets	4,063	2,802

Mothercraft.—Attendances at mothercraft classes totalled 1,875, and there were 290 new cases. Classes are held at Hope Street on Mondays at 2.30 p.m., Watkin Street on Wednesdays at 2.30 p.m., and a joint class for mothers attending the Milton Road clinic and the Grimsby Maternity Hospital is held at the out-patient department of the Hospital on Wednesdays at 2.30 p.m.

There were 728 attendances at the Parents' Club at Watkin Street. A varied programme was completed, activities of the club are fifty per cent educational.

Ante-natal clinics.—1,115 cases, including 978 new cases, made a total of 3,700 attendances. 3,136 of these were to see the midwife, and 564 to see the clinic medical officer.

Most of the visits to the clinic medical officer have been for blood testing at the request of the patient's family doctor. Very few patients attend for the full ante-natal care.

Three Grey Wedge Photometers—instruments for the estimation of various blood components and, in particular, haemoglobin—were acquired in July. One is placed at each of the three main clinics (Hope Street, Watkin Street and Milton Road), where they may be used at any time by midwives, health visitors and medical officers. This is a rapid and accurate method of haemoglobin estimation. The instrument and method of use are as recommended by the Medical Research Council.

Only 17 patients did not book a general practitioner obstetrician for confinement during the year.

Post-natal clinics.—Twenty-four patients attended. They were seen at the end of ante-natal sessions.

Notification of Births.—There were notified 1,990 live births and 44 still births as compared with 1,839 and 43 last year.

Infant Mortality.—There was an increase in the infant mortality rate from 21.6 to 23.6. Of the 48 deaths notified, 27 were neo-natal. Twenty-one cases were over the age of one month at the time of death, the causes being :—

Respiratory diseases	11	Pneumonia	6
Congenital malformations ..	3	Enteritis and diarrhoea ..	1

The neo-natal mortality rate was 13.3 as compared with 14.6 in 1961.

The 27 neo-natal deaths were due to :—

Prematurity	12	Pemphigus & Sepsis of new-born	2
Post natal asphyxia & atelectasis	3	Haemolytic disease of newborn	1
Injury at birth	3	Bronchitis	1
Congenital malformations ..	3	Enteritis & diarrhoea ..	1
Other causes	1		

Prematurity.—Premature live births notified numbered 176, 37 more than the previous year.

One hundred and forty one of these were born in hospital, 35 in their own home, and 91.5 per cent. survived 28 days. The percentage of those surviving 28 days was (a) born in hospital—90 ; (b) born at home—100 ; and (c) born at home and nursed in hospital—87.5.

Weight at birth	Premature Live Births								
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital before 28th day		
	Total (1)	Died in 24 hrs. (2)	Survived 28 days. (3)	(1)	(2)	(3)	(1)	(2)	(3)
3-lb. 4-ozs. or less ...	14	10	4	—	—	—	1	1	—
Over 3-lb. 4-ozs. up to and including 4-lb. 6-ozs. ...	24	3	21	3	—	3	3	—	3
Over 4-lb. 6-ozs. up to and including 4-lb. 15-ozs. ...	27	—	27	1	—	1	2	—	2
Over 4-lb. 15-ozs. up to and including 5-lb. 8-ozs. ...	76	—	75	23	—	23	2	—	2
Totals	141	13	127	27	—	27	8	1	7

Stillbirths.—Enquiries made into the 44 cases of stillbirths notified (21 of these being outward transfers) showed that 3 cases occurred at home, the remainder in hospital. Cases associated with prematurity totalled 21, and 18 were macerated.

Contributory causes were :—

Congenital defects	16	Abnormality of cord	2
Ante-partum haemorrhage ..	7	Post maturity	2
Pre-eclamptic toxæmia	7	Abnormal presentation	2
Rhesus incompatibility	4	Foetal asphyxia	1
Unknown	3		

The following tables indicate the period of gestation and weight of foetus.

<i>Period of gestation</i>				<i>Weight of foetus</i>			
28 weeks	..	..	1	Under 3 lbs.	..	..	4
29	..	..	2	3 lbs. and under 4 lbs.	..	..	7
30	..	..	3	4 lbs. and under 5 lbs.	..	..	12
31	..	..	3	5 lbs. and under 6 lbs.	..	..	7
32	..	..	3	6 lbs. and under 7 lbs.	..	..	6
33	..	..	1	7 lbs. and under 8 lbs.	..	..	3
34	..	..	4	8 lbs. and under 9 lbs.	..	..	3
35	..	..	1	9 lbs. and under 10 lbs.	..	..	1
36	..	..	3	11 lbs. and under 12 lbs.	..	..	1
37	..	..	5				
38	..	..	2				
39	..	..	2				
40	..	..	7				
41	..	..	3				
43	..	..	1				
44	..	..	1				
45	..	..	1				
48	..	..	1				

Twenty per cent. of the total stillbirths notified occurred in first pregnancies and 61 per cent. were admitted to hospital as emergencies.

Care of Unmarried Mothers.—The Local Health Authority accepted financial responsibility for the care of two cases during the year.

Maternal Mortality.—There was no maternal death during the year under review.

Ophthalmic treatment.—Thirty-two cases were referred from maternal and child welfare centres and received treatment.

Ophthalmia and Pemphigus Neonatorum.—No case was notified.

Orthopaedic.—Forty-five cases were referred from maternal and child welfare centres for orthopaedic treatment compared with 31 the previous year.

Child-Minders.—One person is registered under the Nurseries and Child-Minders Regulation Act, 1948.

Children in Care.—Sixteen children were medically examined at the request of the Children's Officer prior to being placed with foster parents.

Children for Adoption.—The Lincoln Diocesan Board for Social Work referred eight babies to clinics for medical examination before adoption.

Cancer and Leukaemia Survey.—The survey of deaths in children from cancer was continued in the early part of the year. This was a nation wide survey conducted by the Department of Social Medicine, Oxford University, in association with the Medical Research Council.

The survey covered the investigation of the case and family histories of children who died from cancer and leukaemia, and that of healthy children of the same age and sex and who lived under similar social circumstances. Five cases and five controls were investigated.

DENTAL TREATMENT

Numbers provided with dental care :—

	Examined.	Needing treatment.	Treated.	Made dentally fit.
Expectant and Nursing Mothers	168	154	120	79
Children under five	340	289	241	219

Forms of dental treatment provided :—

	Scalings and Gum treatment	Fillings	Silver Nitrate treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radiographs
							Full upper or lower	Partial upper or lower	
Expectant and nursing mothers	72	197	—	1	305	73	33	21	5
Children under five	28	30	17	—	409	190	—	—	—

MIDWIFERY

During the year, 713 confinements were attended by municipal midwives and in only 17 cases was no general practitioner obstetrician booked. Out of a total of 696 cases who booked a general practitioner obstetrician, in only 101 confinements was a doctor actually present at the time of delivery. One hundred and fourteen additional cases were booked but for various reasons were taken into the Grimsby Maternity Hospital for delivery. However, 21 of these were discharged on the 2nd and 3rd day to the midwives for home nursing.

2,199 visits were paid to 645 cases discharged from hospital, as compared with 1,710 visits to 402 cases in 1961.

There were twelve full time midwives. Provision was made for an additional midwife. As it was not possible to make an appointment, two part-time midwives were temporarily engaged in October. One midwife postponed her date of retirement or the situation regarding staff would have been serious, as another had been off duty due to illness since the 8th October.

The Supervisor and two midwives attended statutory refresher courses. A new system of off-duty commenced in May, giving midwives more consecutive days and nights off, an arrangement which they appreciate.

Eleven pupils completed Part II training, a greater number than for some considerable time.

Trilene apparatus was used by all midwives. Analgesia was given to the majority of cases, although in 118 cases no inhalation analgesia was given for the following reasons :—

Not sufficient time	..	32	Not necessary	..	..	19
Baby born before arrival		29	No medical certificate	..		6
Refusal by patient	..	27	Medical grounds	..	..	5
Pethilorfan only			was administered to		28 cases	
Gas and air			"	"	11	"
Pethilorfan and gas and air			"	"	3	"
Trilene			"	"	277	"
Trilene and Pethilorfan			"	"	276	"

Co-operation with general practitioners continues to be good. Medical aid was called in by midwives to 53 cases, as follows :—

			<i>Midwifery cases</i>	<i>Maternity cases</i>	<i>Hospital Discharges</i>
During the ante-natal period	..	..	1	7	—
In Labour	..	..	1	10	—
During the puerperium	..	..	2	12	3
To attend to the baby	..	..	1	11	5
			—	—	—
			5	40	8
			—	—	—

HEALTH VISITING

There was a staff of 10 full-time and 1 part-time health visitors. The death of the part-time health visitor in September, after a short illness, was keenly felt by all her colleagues. She did splendid work on a housing estate, particularly noted for its share of problem families. Her area was subsequently shared by the two health visitors working on adjacent areas.

The staff has also helped the midwifery service on many occasions for varying periods of time by visiting hospital discharges on the 8th instead of the 10th day.

One health visitor trainee took up studies at the Oxfordshire Training School for Health Visitors in September.

Visits to the elderly continue to make a demand upon the health visitors' time. The majority of elderly people have definite views and decided likes and dislikes. They find it difficult to adapt to any change in circumstances, and in these cases the health visitor plays an important supportive role.

Patients discharged from hospital are followed up by health visitors. The department is notified of the discharge by the almoner a few days in advance. Where necessary, other services, e.g. home help, are made available. Help with rehabilitation is given to the elderly and chronic sick. Eighty-six new cases were referred during the year. Many of these people live alone and loneliness in itself is trial enough, but when accompanied by sickness and infirmity, skilful and sympathetic management of the situation by the health visitor is required.

Invaluable co-operation and much benefit is derived from the health visitors continued attendance at the paediatric out-patient clinic sessions. Having followed a child's progress in hospital, it is so much easier for the health visitor to help in the convalescent period at home.

The total number of visits to children under 5 was 22,604 as compared with 26,062 in 1961. In addition, 3,848 ineffective visits were made.

The health visitor is becoming increasingly accepted by the general practitioner, but no definite arrangements for the health visitor to work with a firm of practitioners has been arranged. The initiative in most cases comes from the health visitor in contacting the general practitioner. One health visitor assisted a general practitioner in a special survey of the incidence of anaemia in old people, and it is hoped that the results of this will be published in one of the medical journals.

Problem families.—As from January, the Case Workers Co-ordinating Committee met monthly at the Milton Road School Health and Welfare Clinic. The Health Department representatives were the Superintendent Health Visitor, the health visitor concerned with the particular family, the Home Help Organiser, the Social Worker and the Deputy Medical Officer of Health. Close and friendly relations exist between social workers from many other departments, who meet under the chairmanship of the Children's Officer. Duplication of visiting is avoided and information from various sources is shared, so that all work to the same end without conflict of aims or ideas.

The Deputy Medical Officer of Health made visits with, and at the request of, officers of the National Society for the Prevention of Cruelty to Children and the Children's Department to the homes of problem families, in addition to visits at the request of health visitors and other sources.

HOME NURSING.

The staff position in this Service at the end of the year was :—

Whole-time

- 1 Superintendent (S.R.N., S.C.M., H.V., Q.N.)
- 1 Senior Nurse (S.R.N.)
- 2 Queen's Nurses (including one male)
- 1 District Trained Male Nurse
- 7 State Registered Nurses
- 3 Enrolled Assistant Nurses

During the year a State Registered Nurse attended a refresher course arranged by the Queen's Institute of District Nursing, and student nurses continued to make visits with the district nurses.

The number of nursing visits has again shewn an increase, there being 2,655 more than last year. This was partly due to the fact that it was not possible to remove from the books a number of old people who are frail and are living alone, and who also need at least a weekly blanket bath. Eighty-five of the patients nursed suffered from cancer, 74 being new cases.

It is stressed that many of the patients nursed are very ill ; some heavy chronic cases require considerable attention at each visit by the nurse.

The following table shows the work done :—

Cases being nursed on 1st January 263

New cases nursed during the year :—

Adults	749
Children 5 to 15 years of age	16
Children under 5 years of age	6
	<hr/> 771

Total 1,034

The figures given below show the total cases and number of visits compared with the previous two years :—

Year	New Cases	Total Cases	Visits
1960	851	1,053	35,620
1961	811	1,067	39,263
1962	771	1,034	41,918

Summary of New cases nursed

ADULTS

Notifiable diseases :—

Tuberculosis	41
Pneumonia	4
Others	5

Maternal :—

Post-Natal pyrexia	13
Miscarriage	1
Others	13

Surgical :—

Acute	38
Chronic	47

Medical :—

Diabetes	12
Broncho-pneumonia	15
Bronchitis	33
Other chest conditions	9
Rheumatic conditions	16
Cerebral haemorrhage — under 60	6
„ „ — over 60	67
Cancer	74
Ear, nose and throat	4
Gynaecological	11
Cardiac disease	67
Disseminated sclerosis	7
Senility	91
Enemata	69
Others	106

749

CHILDREN 5 to 15 YEARS OF AGE

Medical	..	..	..	..	..	..	12
Surgical	..	..	..	..	..	..	4

CHILDREN UNDER 5 YEARS OF AGE

Medical	..	..	..	..	..	..	5
Surgical	..	..	..	..	..	..	1

Total	771
-------	----	----	----	----	----	----	-----

Injections :—The nursing staff gave injections to patients in their homes, as follows :—

Diabetics (insulin)	..	..	..	..	..	..	13
Antibiotics	..	..	..	..	..	..	85
Diuretics	..	..	..	..	..	..	24
Liver preparations	..	..	..	..	..	..	29
Cortisone	..	..	..	..	..	..	3
Other special injections	..	..	..	..	..	..	28

Out of the above total of 182 patients receiving injections during the year, 18 also required general nursing care.

Co-operation with general medical practitioners remains good and all treatment carried out is under their instructions.

VACCINATION AND IMMUNISATION

General.—Two important changes occurred this year in regard to the immunisation programme :—

- (i) Circular No. 3/62 was issued in February and provided for routine vaccination against poliomyelitis by ORAL vaccine.
- (ii) Circular No. 27/62 issued in November recommended that smallpox vaccination should be given to children aged one year instead of at about 4-months old.

It was not considered necessary to make any change in the monthly routine immunisation sessions especially as this service is also available at infant welfare clinics.

Happily there were no cases of smallpox or diphtheria, but there were three cases of paralytic poliomyelitis and only six cases of whooping cough.

Diphtheria immunisation.—A total of 1,492 children received the complete course of inoculations—a figure which is low in comparison with the previous year. The chief reason for this decrease was caused by the intensive drive on poliomyelitis immunisation which interfered with the intervals between doses and, in certain instances, the diphtheria programme had to be postponed. In October, full use was made of the Ministry's publicity material and towards the end of the year diphtheria immunisation programmes were back to normal. The percentage immunised in the 0—14 age group was 65 as compared with 64 last year. The following shows the immunisation state for the past five years.

PRIMARY IMMUNISATION

Year		Under 5 yrs.	5—15 yrs.	Total
1958	.. ..	1,204	268	1,472
1959	.. ..	1,227	309	1,536
1960	.. ..	1,331	339	1,670
1961	.. ..	1,637	444	2,081
1962	.. ..	1,302	190	1,492

Re-inforcing injections were given to 1,594 children as compared with 1,976 last year.

Whooping cough immunisation.—Children were mainly immunised with Triple Antigen and the figures for the past five years are as follows :—

	1958	1959	1960	1961	1962
By General Practitioners ..	550	615	748	828	635
By Health Department ..	641	634	605	858	685
Totals ..	1,191	1,249	1,353	1,686	1,320

The percentage of children under the age of one year who were immunised in relation to the registered live births was 61.

Smallpox vaccination.—The total number of primary vaccinations was 2,702 compared with 1,025 the previous year. This large increase was undoubtedly due to outbreaks of the disease in the country. During this period of national concern about the spread of the disease vaccine lymph was in short supply and had to be controlled by the Health Department to meet the many requests from general medical practitioners.

Details of the number of vaccinations over the past five years are as follows :—

Year	PRIMARY VACCINATIONS AGE PERIOD				RE-VAC- CINATIONS	
	Under 1	1—4	5—15	Adults	Total	All Ages
1958	402	247	68	96	813	279
1959	501	158	24	77	760	119
1960	480	144	31	66	721	111
1961	634	262	37	92	1,025	144
1962	504	840	524	834	2,702	2,224

The percentage of children under the age of one year who were vaccinated in relation to the registered live births was 24, compared with 32 for 1961.

Post Vaccinal Encephalitis.—This is the first time that a case of post vaccinal encephalitis has been reported in the annual returns. A male patient, aged 36, was vaccinated with American vaccine at the surgery of a general practitioner on the 15th February, and was admitted to hospital eleven days later as a typical case of encephalitis—irrational with high pyrexia and squint. He was eventually discharged from hospital in May.

Eczema Vaccinatum.—On the 16th July a boy, aged two, was seen at hospital by a consultant surgeon, who noted that the child was suffering from a severe napkin rash. The next day a postular eruption was found on the buttocks and a consultant dermatologist was asked to see the case. The condition was diagnosed as vaccinal rash and the patient was transferred to another hospital on the 18th July. On admission he was ill and fretful, but there was no history of vaccination. The child's six-month old sister was vaccinated on the 19th January, 1962, but on inspection it was found to be a normal primary take. It was later thought that since the patient had not been vaccinated there was a possibility that the mother conveyed the vaccinia virus from the baby to the older child.

Poliomyelitis vaccination.—The introduction of Oral Vaccine in February prepared the way for a special campaign to be conducted in schools, and within a month of the receipt of Circular No. 3/62 arrangements were made to effect a changeover from Salk to the new Sabin vaccine. Full advantage was taken of press publicity with suitable photographs of Grimsby's first child receiving the 'sugar lump', and during the summer months many additional sessions were held in clinics and at schools. This effort resulted in 90 per cent. of the 0—15 year age group being protected against poliomyelitis.

Many general medical practitioners were supplied with publicity material and co-operated extremely well by holding special afternoon sessions in their surgeries.

The figures for the year are as under, followed by a table which shows the position in regard to poliomyelitis vaccination since 1956 :—

				SALK VACCINE	SABIN VACCINE	
				2 injections	Completed 3 doses	Total
CHILDREN						
Under 5 years	..	..		284	1,476	1,760
5—15 years	..	..	..	118	2,068	2,186
				402	3,544	3,946
Adults (1933—1942)	..	..		125	602	727
Others	..	..	..	174	777	951
Total				701	4,923	5,624
Third doses	..	..	..	1,444	2,600	4,044
Fourth doses	..	..	..	93	2,877	2,970

POLIOMYELITIS VACCINATION.

<i>Age at date of completed primary course</i>	1956	1957	1958	1959	1960	1961	1962	Total
Under 1 year	—	—	85	133	114	140	102	Under 5 years 5,621
1—2 years	—	—	834	925	762	976	1,057	
2—3 years	16	6	859	421	195	355	300	
3—4 years	56	73	863	375	59	176	159	
4—5 years	44	107	735	310	55	134	142	
5—6 years	84	122	673	309	55	104	150	5 to 15 years 16,943
6—7 years	74	244	630	283	48	84	262	
7—8 years	84	650	502	312	48	75	269	
8—9 years	91	703	297	267	48	51	275	
9—10 years	94	796	256	235	35	79	310	
10—11 years	—	764	284	244	30	72	290	
11—12 years	—	—	305	228	37	53	304	
12—13 years	—	—	1,207	296	27	41	134	
13—14 years	—	—	973	227	12	36	85	
14—15 years	—	—	1,045	96	20	48	60	
15—16 years	—	—	857	172	13	56	47	Adults 20,308
Adults	—	—	1,072	7,649	2,527	2,716	1,678	
Totals	543	3,465	11,477	12,482	4,085	5,196	5,624	42,872
No. of persons given third doses	—	—	3,134	14,016	8,099	4,009	4,044	33,302
No. of children given fourth doses	—	—	—	—	—	5,381	2,970	8,351

AMBULANCE SERVICE

The returns for this Service show yet another increase in the number of patients carried. The rise was so steep at the beginning of the year that it was felt some action must be taken to prevent any possible breakdown should the increase continue at the same rate. A choice of two alternatives was possible—to add to the driving staff or to install radio telephony. Radio telephony was already known as a method to be adopted to improve efficiency, but although appreciated it had not previously been given serious consideration because of the ease vehicles could be located owing to the siting of hospitals in the borough. This situation had now changed; vehicles were either fully loaded or could not be found at hospitals when urgently required. The number of patients waiting for transport began to mount, and it was felt that if only vehicles could be contacted as soon as needed much time would be saved and greater loads carried.

An offer to install radio telephony on a trial basis for three months was accepted. Only a few weeks after installation and long before the trial period had elapsed, it became clear that a marked increase in the efficiency of the Service had been effected, and on this count alone it was decided to purchase the equipment. By the end of the year its value had been proved. The number of patients carried had risen by more than nine per cent. No extra overtime had been necessary and no undue strain experienced by any member of the staff. The mileage covered by the vehicles had risen proportionately with the

number of patients, but the number of journeys involved in carrying those patients had actually fallen. Moreover, this radio link between station and vehicles has proved to be of exceptional value to the Control staff, who previously had been subjected to much pressure in coping with emergency calls during the peak periods of the day.

It is almost certain that the number of patients carried by the Service will continue to increase over the next few years. More and more hospitals are being modernised, new buildings erected and equipped, and new hospitals planned. There is already a much quicker turn round in hospital beds, patients being discharged to home care whilst still incumbent. Better equipped out-patient departments have a bigger intake. Each and all of these developments point to a rising demand for the ambulance service. How much more work can be absorbed with its present staff is a matter for conjecture, but a close watch will be kept and any undue strain reported.

During the year 27,506 calls were received. Of these 127 originated in places outside the borough and were transmitted to the appropriate authority. 34,357 patients were transported and 164,356 miles were covered by the vehicles. Rail transport accounted for 73 journeys, nine more than last year. Of the number of patients carried 3,056 were accident or other type of emergency cases.

Use of the railways in transporting patients is still being made wherever possible. Not only is it a quicker form of transport but much more comfortable for travelling over the longer distances. It also frees both staff and vehicles for pressing needs at home.

Three new vehicles were brought into service during the year, two were replacements for twelve years old ambulances, and the third, a sitting case car, to replace one of about the same age. Only one old vehicle now remains and this will be replaced early in 1963, after which it will be possible to initiate replacement at a given mileage.

Statistical tables are given below, the figures in brackets correspond with the previous year :—

CALLS			JOURNEYS IN DISTANCES		
Accidents ..	1,292	(1,541)	Under 50 miles	7,042	(7,141)
Other Emergency	1,322	(1,202)	50—100 miles	288	(221)
Removals ..	24,375	(21,700)	Over 100 miles	204	(181)
Miscellaneous ..	517	(659)			
Total	27,506	(25,102)			

OPERATIONAL					
Type of Case	Patients		Journeys		
Accident	1,546	(1,724)	1,286	(1,541)	
Other emergency ..	1,510	(1,257)	1,318	(1,202)	
Removals (Local)	28,481	(26,445)	3,924	(3,830)	
Removals (Others)	1,705	(1,081)	616	(513)	
Miscellaneous ..	1,115	(771)	390	(567)	
Total	34,357	(31,278)	7,534	(7,653)	

ANALYSIS OF ALL JOURNEYS							
Type	Patients		Journeys		Mileage		
EMERGENCY							
Ambulances ..	2,098	(2,000)	1,738	(1,827)	10,162	(9,611)	
Sitting Case Vehicles ..	958	(981)	866	(916)	5,361	(5,567)	
GENERAL							
Ambulances ..	19,987	(15,633)	2,636	(2,385)	76,630	(62,447)	
Sitting Case Vehicles ..	11,314	(12,664)	2,155	(2,388)	67,596	(68,186)	
ABORTIVE AND SERVICE							
Ambulances ..	—	(—)	119	(108)	809	(544)	
Sitting Case Vehicles ..	—	(—)	125	(113)	1,679	(975)	
CIVIL DEFENCE							
Ambulances ..	—	(—)	—	(—)	—	(—)	
Sitting Case Vehicles ..	—	(—)	98	(124)	2,119	(2,780)	
Totals ..	34,357	(31,278)	7,737	(7,861)	164,356	(150,110)	
BY RAIL ..	75	(64)	73	(64)	9,835	(8,008)	
VEHICLE STATISTICS							
	Miles		Petrol (galls.)		m.p.g.		
Ambulances ..	70,204	(65,667)	5,777	(5,593)	12.15	(11.74)	
Dual Purpose Vehicles ..	37,429	(44,999)	2,139	(2,125)	17.41	(21.18)	
Sitting Case Vehicles ..	56,723	(39,444)	2,478	(1,950)	22.88	(20.23)	
AVERAGES							
	Miles per patient ..		4.73	(4.79)			
	Miles per journey ..		21.24	(19.09)			

PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

During the year the social worker saw 117 new patients and continued casework for 180 patients already being assisted. Office interviews totalled 113, and 619 home visits were made.

These figures show an increased number of new patients and home visits made, but the other figures have fallen slightly.

Help was given with personal and family problems and with advice on obtaining financial aid and other services available to the community. Some cases required convalescence after an illness, whilst many others had the support of the social worker to see them through a period of stress and strain.

Referrals came mainly from medical practitioners, health visitors and district nurses, but quite a number were also received from other statutory and voluntary organisations. In a few cases the patients themselves came for aid.

Central Care Council.—The General Care Committee of this Council gave financial assistance to 53 new patients and their families in 1962, and this showed an increase on the previous year. Fares have been paid in 16 cases; extra nourishment grants made to 7 patients; nursing aids supplied to 6 patients; extra fuel supplied to 6 cases; debts cleared in 8 cases, while miscellaneous items totalled 10. Regimental Associations have helped in 2 cases and the National Society for Cancer Relief made extra nourishment grants to 7 new cases as well as continuing grants for a further 3 patients.

The Grimsby Tuberculosis Care Committee was formed in 1925, and from those early days, when its main expenditure was in the provision of extra nourishment to cases, it has kept abreast of the times until its activities are now many and varied. In dealing with the needs of patients close contact is maintained with the officers of the National Assistance Board to avoid duplication of help and yet at the same time enable both parties to grant the maximum of essential aid.

The provision of convalescent home treatment to selected patients has been continued, the voluntary funds being financially responsible for maintenance charges, travelling and pocket money grants. Christmas grants were made to patients under domiciliary supervision from the Chest Clinic and to those in the chest hospital.

Apart from the daily supply of extra nourishment, cases under domiciliary supervision are assisted in a variety of ways—provision of clothing and bedding, groceries, payment for fuel supplied (including electricity and gas), repair of television sets, provision and fixing of aerials, television licences, etc.

During 1962 much assistance was given to patients in the Springfield Hospital. At this chest hospital the needs of the entertainment of adult patients were not forgotten and much money was expended in this direction. Various alterations and renewals were carried out connected with television and radio facilities.

B.C.G. Vaccination.—The School Health Service Section (Part IX) of this report gives detailed information on the year's work in this field. The following shows the number of persons vaccinated during the past five years :—

YEAR	CONTACT SCHEME	SCHOOL CHILDREN SCHEME
1958	225	456
1959	294	573
1960	374	2,204
1961	298	926
1962	327	1,091

Yellow Fever Vaccination.—This service commenced on the 1st January at The Clinic, 34 Dudley Street, at which 127 persons were vaccinated and issued with an international certificate.

Chiropody Service.—I am grateful to Miss K. G. Waldram, M.B.E., M.A., County Borough Organiser, for the following report on this service, which has continued to be run under the auspices of the Grimsby Old People's Committee and the Women's Voluntary Services :—

" Patients are dealt with in three private surgeries and in two rooms lent to the Committee (one by the Welfare Services Department, the other by a church). In addition, two chiropodists carry out four sessions of home visits per week.

" The total hours worked by the various chiropodists averages 32 per week. The number of treatments given totalled 2,687, 2,296 at the clinics and 391 by home visits, and the number of patients dealt with was 708 "

The comparable figures for 1961 were (i) No. of treatments 2,352, (ii) No. of patients dealt with 547, from which it will be seen that the peak demand for this Service has not yet been reached.

HEALTH EDUCATION

The local health authority subscribes to the Central Council for Health Education and to the Royal Society for the Prevention of Accidents, making full use of the publicity material issued by these organisations. The monthly distribution of Better Health journals through the usual channels has continued.

A total of 21 lectures and talks were given to local organisations on various aspects of Public Health and Health Education, 14 by the Medical Officer of Health, 4 by the Deputy Medical Officer of Health and 3 by the health visitors. Attendances at these meetings totalled 766.

Schools.—Talks on a wide variety of health education subjects, supported by strip and sound films, were given by health visitors and school nurses to pupils of three secondary modern schools during the year.

Arrangements were also made for the pupils of these schools to visit the nearest infant welfare centre, an outing which proved both interesting and enjoyable to pupils and staff alike.

Smoking and Health.—Two film strips—"Problems of Lung Cancer" and "To Smoke or not to Smoke"—both supported by talks, were shown to 34 boys and girls in a senior school. Questioning revealed that four or five of the boys in the 14—15 age group smoked from 4 to 10 cigarettes a day; that their parents smoked; and that they agreed to having a very liberal amount of pocket money. Posters displayed in this school about a week before the talk and film show was given were taken down almost immediately afterwards.

Two Young Wives' Groups continue to make and serve tea at the Hope Street Infant Welfare Clinic on Thursday afternoons, and the mothers attending had been in the habit of having a cigarette with their cup of tea if they so desired. A talk was given to these mothers about smoking and health and an announcement made that after a two weeks' warning period, notices of 'No Smoking' would be displayed in the clinic.

Strong comments were made by one mother, who smoked ten cigarettes a day. She disagreed with everything and quoted three members of her family circle who were non-smokers and who had died from lung cancer! A second mother who also smoked ten cigarettes a day, purely for something to do, gave serious thought to the matter. Others were attentive but at the same time disbelieving, adopting an "it did not concern them" attitude. A non-smoking mother stated that after witnessing her parents suffer agony trying to stop smoking, she decided not to begin.

Two weeks later a second talk followed and the Central Council for Health Education film strip on "Problems of Lung Cancer" was shown. This was a most interesting session; the young mother who had previously disagreed with everything mentioned in the first talk, was only too willing to listen and participate in discussion both during and after the showing of the film.

Three months later a follow-up showed that none of the mothers who smoked had actually stopped, but that all had tried and two had reduced the number each day. However, one of the husbands had ceased smoking, allegedly through the influence of his wife.

In accordance with a letter from the Ministry of Health, dated 25th May, 1962, 340 posters on the relationship between smoking and lung cancer were distributed throughout the County Borough, a copy being sent to all the main offices of the town, the Hospitals, the Chest Clinic, the Transport Service, the Water Board, the Public Libraries, and the General Post Office.

Mothercraft.—Three Relaxation and Mothercraft Classes continue to be held at the clinics, with the work of one still being shared by hospital staff and health visitors. The advantages of this liaison are many, but particularly so for the expectant mother who is booked for hospital confinement. A visit to the maternity hospital is always included in the syllabus.

Parents' Club.—A health visitor, with her usual personal contribution, gives the time and supervision necessary for the successful running of this club. The programme is very carefully planned to maintain the fifty per cent. educational level, and among the interesting films shown this year have been "Mouth-to-Mouth Resuscitation"; "Housework through the Ages"; and "Nutrition".

A long programme of health talks given during an infant welfare session was found to be unpopular, but topical subjects for two or three weeks at a time will hold the interest of the mothers.

DOMESTIC HELP

The number of applications received for this service was 439. Upon investigation 224 were provided with help, 497 being carried over from 1961.

The type of cases dealt with are aged and infirm, chronic sick, tuberculous, blind, maternity and emergency, and these generally have been referred through the usual sources.

The number of cases attended weekly has again risen, the average being 432 compared with 422 last year.

During the winter months the main problem has been the increasing demand for daily visiting to the aged and infirm, many of whom are unable to light their own fires, prepare a mid-day meal, etc., and considerable strain is put upon the home help in such cases.

Eighty-four maternity cases were dealt with, three more than in the previous year. The majority of these were for part-time assistance, but applications for full-time help have steadily decreased in the past few years.

Only three applications were received for the soiled laundry service, the total number of working hours being 18½.

Recruitment of home helps in 1962 has not been too difficult, 135 being employed as against 134 the previous year.

The following relates to the working of the scheme :—

Administrative staff on 31st December, 1962 :—

Organiser	1	}	3
Clerks (full-time)	2		

Home Helps employed at 31st December, 1962 :—

Whole-time	10	}	135
Part-time	125		

Cases assisted :—

Maternity (including expectant mothers)	84	}	721
Tuberculous	1		
Chronic sick, aged and infirm	596		
Others	40		

The following figures show the amount of service given in a representative week, when 476 cases were dealt with :—

- 21 patients received 2 hours but less than 3 hours on any one day.
- 277 patients received 3 hours but less than 4 hours on any one day.
- 93 patients received 4 hours but less than 5 hours on any one day.
- 1 patient received 5 hours on any one day.

(Included in the above are 15 patients where a home help called for approximately 1-hour daily.)

The remaining 81 patients received two or more half days per week, and included in this figure are 6 cases where a home help called for approximately 1-hour daily. Three confinement cases were dealt with in this particular week.

Payment for Service.—Of the 721 cases assisted, the charges were distributed in the following way :—

	<i>Free of cost</i>	<i>Part cost</i>	<i>Full cost</i>
Maternity	—	51	33
Tuberculous	1	—	—
Chronic sick, aged and infirm ...	486	96	14
Others	12	16	12
Totals	499	163	59

The standard charge has remained at 4s. 0d. an hour and no alteration was made in the supervision and conditions of service of home helps.

MENTAL HEALTH

Administration.—The Mental Health Sub-Committee consists of 16 members, of whom five are co-opted. The Chief Mental Welfare Officer is responsible to the Medical Officer of Health for the service provided by this section and, together with the two Senior Mental Welfare Officers, for arranging admission of patients to hospital. These three officers and three female Mental Welfare Officers carry out whatever visiting is needed by all types of patients. The Consultant Psychiatrist receives the agenda of the Mental Health Sub-Committee and attends when he feels it necessary.

A number of follow-up clinics are held at the Psychiatric Unit at the Scartho Road Hospital, the Chief or a male Senior Mental Welfare Officer attending these sessions as required. Case histories are provided for new patients attending the clinic.

The provision of psychiatric services has been consolidated during the year but the club opened last year for women patients discharged from the mental hospital has fulfilled its function, most of the members attending having now moved on to ordinary clubs or social activities in the community. This club has served as a very useful pilot scheme to the staff and may point the way to future activities of this kind. At the moment accommodation is being sought to open a similar club in another part of the town.

The Supervisor and two Assistant Supervisors at the Training Centre hold the Diploma of the National Association for Mental Health. Three other assistants, who were formerly supply teachers, are in full-time employment at the Centre and, together with two part-time workers, complete the teaching staff.

The Chief Mental Welfare Officer attends a special clinic held by the Paediatrician to advise and support parents in the care of babies who are retarded. In this connection the North Lincolnshire Society for Mentally Handicapped Children has built at their expense a Special Care Unit adjoining the Training Centre. This has been equipped and is staffed by the local authority, who have appointed a qualified nursery nurse. This special care unit would seem to provide an excellent example of co-operation between the local authority and voluntary effort. In addition to providing the fabric of the building, various members of the Society spend a few hours there on a rota system. This has proved of great value to children, staff and parents.

Some of the children attending the Unit are able to travel on the special buses serving the Training Centre, others being brought by their parents. The majority of those children attending the Training Centre travel on two buses; two are conveyed by the Ambulance Service, and a mini-bus brings some of the children from the rural area of the Lindsey County Council.

A Senior Mental Welfare Officer acts as instructor to a special woodwork class held twice weekly at the Training Centre, which has on occasions proved very beneficial in placing boys in suitable employment.

There is no voluntary association for mental health in the area, but a very close co-operation exists between the local authority and the North Lincolnshire Society for Mentally Handicapped Children. This group runs a boys' and a girls' club, the latter being supplementary to the one run by the local authority staff for higher grade girls, most of whom are in employment.

Patients are escorted to and from hospital as required and reports on home conditions or progress are provided when requested for all categories. The provision of short stay care for subnormal patients has again increased, but the need for such provision at times other than the summer holidays still presents a difficulty. The Chief Mental Welfare Officer has been responsible for transporting the majority of cases requiring short stay care.

Account of Work undertaken in the Community.—Under Section 28 of the National Health Service Act, 1946, patients are visited as often as necessary. Many are referred by their general medical practitioners or relatives. Members of the staffs of other services have also referred similar cases. Psychiatric treatment is available as needed without delay and the consultant psychiatrist and his specialist assistant are available for domiciliary visits.

The mental welfare officers are particularly grateful to officials of the Ministry of Labour, who co-operate with the department very fully when interviewing patients needing employment, and also for similar co-operation from officers of the National Assistance Board.

Mental Health Act, 1959.—The Chief Mental Welfare Officer and the two male Senior Mental Welfare Officers are responsible for emergencies at whatever hour this is required and for arranging admission and transport to hospital. The three female mental welfare officers share with them the visiting of patients in their own homes, the escort of female patients to hospital and in some few cases the escort of patients to the psychiatric clinic. Almost all patients discharged from hospital attend a follow-up clinic held at the psychiatric unit one morning each week. There the consultant psychiatrist advises the workers on any special problems which may arise, and also at intervals holds a case conference for all the mental welfare officers, at which problems of general interest or especial difficulty are discussed.

The following shows the number of admissions to St. John's Hospital, Lincoln, during the year :—

	Males	Females	Total
Section 25	24	32	56
Section 26	7	12	19
Section 29	13	3	16
Section 60	2	—	2
Informal	11	10	21
Court Order	—	—	—
Totals ..	57	57	114

Cases have been dealt with by mental welfare officers as follows :—

Chief Mental Welfare Officer—4, plus 12 calls with no action taken under the Mental Health Act, 1959.

Mr. Rackham—32, plus 39 calls with no action taken under the Mental Health Act, 1959.

Mr. Mackenzie—59, plus 25 calls with no action taken under the Mental Health Act, 1959.

The following figures relate to cases dealt with under this Act :—

	Males	Females	Total
(a) Mentally ill (Under 16 years of age)	—	—	—
(Aged 16 years and over)	114	211	325
(b) Psychopath (Under 16 years of age)	1	—	1
(Aged 16 years and over)	15	7	22
(c) Subnormal (Under 16 years of age)	2	6	8
(Aged 16 years and over)	134	142	276
(d) Severely (Under 16 years of age)	24	22	46
Subnormal (Aged 16 years and over)	33	32	65
Totals ..	323	420	743

The majority of subnormal and severely subnormal patients were referred by the School Health and Maternal and Child Welfare Services, a few others by the paediatrician, medical practitioners and relatives.

The Mental Welfare staff give any information they may have to the approved medical officers completing the form on behalf of school children referred for ascertainment. Children leaving school who are reported for supervision are visited as necessary by the mental welfare officers. No patients were placed under guardianship during the year.

The School Dental Service provided treatment for 22 patients.

Psychiatric Unit, Scartho Road Hospital :—

Out-Patient Department

New Patients	438
Old Patients	2,425
Attending for E.C.T.	945
Total out-patients	3,808

(This does not include patients seen at the Louth County Hospital)

In-Patients

Admissions	..	..	..	..	..	..	..	..	343
Discharges	..	..	..	..	..	..	..	..	341

Number of Out-Patient Clinics (weekly) :—

E.C.T.	..	..	..	..	..	..	..	..	2
New	..	..	..	..	..	..	..	..	2
Old (Non E.C.T.)	..	..	..	..	..	..	..	..	5

Girls' Club.—The Club has continued to function under the leadership of the Chief and Junior Mental Welfare Officers, two of them alternating each week. One member of the North Lincolnshire Society for Mentally Handicapped Children attends to assist with the country dancing and thanks to this lady are well merited. The usual summer outing took place, all the girls paying their own expenses. One girl from the club married and another has ceased to attend, but one new member was enrolled. Two girls were admitted as a temporary measure, one of whom was placed in work in the town from a hostel some 80 miles away, the other, during a period of trial before discharge, was still attending at the end of the year. In addition to the usual club activities, the girls were invited to a play given by members of a Church Dramatic Society, and the usual Christmas party and mime were held.

Junior Training Centre.—There are 50 children attending the Centre, including three part-time, of which 19 are over the age of 16 years. There are also 20 attending from the adjoining area of the Lindsey County Council. In addition to the usual subjects, special attention is directed towards suitable crafts for the older boys, including woodwork and rubber link mat making. Toys are made, many of which are used in the Centre, the remainder finding a ready sale among the parents, and efforts are now being made to develop these activities.

A tuberculin survey was carried out in October when a case of pulmonary tuberculosis occurred in an eighteen year old girl who attended the Centre, and contacts were immediately investigated. Fifty-eight pupils were Heaf tested and eventually seven were x-rayed and one male was admitted to Springfield Hospital showing signs of the disease.

PART IV.—SANITARY CIRCUMSTANCES.

Harold Parkinson, Chief Public Health Inspector, reports :—

Staff.—As in recent years there were vacancies for qualified inspectors, but the department had a full complement of pupil inspectors (3). Arrangements were also made for pupils from other authorities to receive training in certain aspects of public health work.

Water Supply.—The North-East Lincolnshire Water Board's piped supply available throughout the town was satisfactory in quality and adequate for the needs of all users. The water is hard and not subject to plumbo-solvent action.

Certain firms also used water for commercial and industrial purposes taken from their private bore holes.

The results of 312 bacteriological and chemical examinations of the town's supply were satisfactory.

The number of houses without internal water supplies was gradually reduced by the demolition of unfit houses, the installation of a piped supply and sinks after the service of notices under the Grimsby Corporation Act, and also in the comparative small number of houses improved by the help of grants made under the Housing Act.

Sewerage and drainage : Rivers, streams and ponds.—The Humber estuary received all the town's sewage from the two Corporation pumping stations in Riby Street and Pyewipe.

Work continued on new sewerage for the Great Coates and Pyewipe areas and it is expected that the foul effluent from the fish meal works will discharge into the new sewer instead of grossly polluting the present water course at Pyewipe.

Following the service of notices, cesspools were abolished and drainage systems at 9 houses connected to the new sewer in Rydal Avenue and Windermere Avenue on the outskirts of the town. Very few premises now remain with cesspools.

Public Cleansing.—The Cleansing Superintendent (Mr. E. Austin) has supplied the following information :—

House and trade refuse collected amounted to 37,165 tons and apart from 1,844 tons which were salvaged and sold for £16,679 18s. 0d., the remainder was disposed of by controlled tipping at Little Coates and Macaulay Lane. The Council has no incinerator.

The scheme started in 1950 under Section 75 (3) of the Public Health Act, 1936 continued to operate and 1,188 new ashbins were supplied to houses in 1962.

Sanitary Inspections

Accumulations.. .. .	188	Animals	19
Caravans	19	Complaints received and	
Dirty and verminous houses		investigated	2,187
and persons	33	Drainage	4,719
Drain tests	118	Factories and outworkers ..	41
Infectious disease enquiries ..	416	Lodging houses	39
Miscellaneous matters	3,712	Offensive smells	188
Offensive trades	32	Passages and yards	617
Piggeries and stables	17	Rats and mice	132
Rooms disinfected after		Smoke observations	119
infectious disease	21	Water supply	75

Housing inspections

Houses, defects and nuisances (Public Health Act)	.. .. .	2,473
Houses (Housing Act)	.. .. .	343
Overcrowding (Housing Act)	.. .. .	14

Notices

Informal notices served	.. .. .	603
Statutory notices served (408 Public Health Acts, 8 Grimsby Corporation Act)	.. .. .	416

Work in default was carried out by the Corporation at the cost of the owners in respect of 164 notices.

In court proceedings, the Magistrates made a Nuisance Order respecting the remedy of defects at one house ; the owner later complying with the terms of the notice. Proceedings in four cases were withdrawn when the necessary repairs had been completed before the date of the Court hearing.

A Nuisance Order was also made regarding offensive accumulations and conditions in a fire gutted warehouse. When complaint was made to the Court that the defendant had failed to comply with the Magistrates Order the case was dismissed because of a legal technicality (which had no bearing on the conditions prevailing at the premises). After visiting the warehouse the Justices advised the owner to make an effort to clean up the premises.

Paving of passages.—Action taken principally under Section 56 of the Public Health Act, 1936, secured the renewal of paving of common passages in the older parts of the town. In all instances the work was carried out in default by private contractors on behalf of the Corporation.

Apportionment of the costs to be recovered by the Corporation (without resort to Court) is often most difficult and involved in attempts to satisfy every owner that the apportionment is just and equitable.

Offensive trades :—

Tripe dresser	.. .. .	1	Hide and skin dealers	.. .. .	2
Fish meal maker	.. .. .	1	Gut scraper	.. .. .	1
Fat melters	.. .. .	2	Rag and bone dealers	.. .. .	4
Fish curers	.. .. .	4			

One company closed its fish curing premises (which were still unoccupied at the year end) and a firm of hide and skin dealers transferred their business to premises out of town.

The remaining fish meal factory in the County Borough was only used occasionally during peak periods.

Fish and offal transport.—In addition to the sending of written warnings about foul discharges on to the public highway, court proceedings were taken and fines of £5 were imposed in two cases by the Magistrates.

Pest and Vermin Control.—When dealing with the following infestations the usual D.D.T. insecticides again proved effective and no resistance was noted in the vermin :—

40 of beetles	(including 3 Council houses)
5 of ants	(including 2 Council houses)
6 of bugs	(including 1 Council house)
11 of earwigs	(all Council houses)
2 of silver fish	(all Council houses)
1 of weevils	(Council house)
1 of mites	(Council house)
3 of fleas	
2 of flies	
1 of crickets	
1 of spiders	
9 of woodworm	

Two major infestations of rats and mice were found on the premises occupied by the same man.

The reported large increases in the rat population in Lincolnshire rural districts fortunately did not occur in the County Borough—in fact, the steady day to day routine work of the Health Department, together with the co-operation of most of the firms and householders, enabled infestations to be kept down to a minimum.

Sections of the public sewers (where infestations could be considered possible) were treated and the results indicated the sewers to be comparatively free from rats.

Cleansing of persons.—The new station was only used very occasionally in 1962.

Atmospheric Pollution.—During the year the Minister gave provisional approval for the Council to proceed with its proposals for the first Smoke Control Area at Fairfield.

An outline scheme for future smoke control areas for the whole of the town was prepared.

Following observations by inspectors warning letters were sent to firms about the discharge of excessive and dense exhaust fumes from their road vehicles.

Swimming baths.—With the opening of the new swimming bath in Scartho Road in December, the Council decided to close the Orwell Street bath.

Samples of water taken from the Eleanor Street and Orwell Street baths gave satisfactory results on bacteriological examination.

Factories Act.—See statistical report (Table 9 on pages 62-63).

Places of entertainment.—Apart from minor defects there was no cause for complaint. One large dance hall was completely remodelled providing increased and far better sanitary arrangements.

Rag Flock and Other Filling Materials Act and Regulations.—Premises registered for the use of filling materials—4.

Shops Act.—The usual procedure of ascertaining that the provisions of this Act were complied with when making inspections at shops under the various other Acts and Regulations, continued in 1962.

Noise Abatement Act.—The number of complaints received was considerably reduced—although nearby residents of a food factory expressed annoyance about the clatter from the dropping of metal containers in the early morning hours and during the night shifts at the peak of the pea season.

The necessary day time sleep of shift workers was disturbed by the "sound effects" of itinerant salesmen during the hours permitted by the Act.

Even when the "chimes" were not used the noise from the compressors working on ice cream vehicles as they parked outside houses was the cause of complaints.

An ice cream vendor was fined £1 for using the "chimes" during prohibited hours, whilst a charge of using a loud speaker for advertising against a newspaper man was dismissed, as he claimed he had received permission from the police in an adjoining district.

The customary protests from householders about noise were made to the Council about the Statute Fairs being held near houses in Cromwell Road.

The major complaints were about vibration and noise caused by pile driving for new factory premises, which, whilst it lasted, was a source of great annoyance and trouble to the occupiers and owners of nearby houses in Stortford Street. This state of affairs was an embarrassment to certain members and officers of the Council, as the Reconstruction Committee had encouraged a firm to expand, the Planning Committee had approved the plans and sanctioned the starting of building operations before the houses at the other side of the street could be dealt with under a Clearance Order, and the Housing Committee at that time was unable to provide alternate housing accommodation. As usual in such situations the public health inspectors had to take the brunt of the complainants' wrath.

PART V—HOUSING.

The Chief Public Health Inspector reports :—

New houses built	.. .. .	318
Houses demolished	.. .. .	229

Slum Clearance.—The re-housing of tenants from houses in the confirmed East Marsh and Riby Street Compulsory Purchase Orders and the Kent Street Clearance Orders was the major part of the work in the Council's programme in 1962.

Pending the completion of re-housing mentioned above the Council agreed in principle for a Compulsory Purchase Order to be made incorporating properties bounded by John Street, Albion Street, Albert Street, Oxford Street and Victor Street.

Near the end of the year preliminary reports were also submitted on proposed Compulsory Purchase Orders for properties in Stanstead Street and on an area with boundaries in Garibaldi Street, Albion Street and Duncombe Street, for action in 1963.

A review of the whole of the Council's slum clearance programme for the years 1963/1981 was undertaken for the statutory review of the Town's Development Plan made under the Town and Country Planning Act, 1947.

The suggested programme for the period 1969/1981 was in outline only, indicating in the broadest terms the likely districts of the town where Clearance Areas or Compulsory Orders may be necessary. Circumstances and standards prevailing at the time will be the determining factors in the action to be taken in the years ahead.

Individual unfit houses—Section 16 :—

(a) Demolition Orders made—1. (9 Church Street).

(b) Closing Orders made—11.

25b Convamore Road	115 Ravenspurn Street.
17 & 106 Garibaldi Street	30 Railway Street
5 Hilda Street	47 Stirling Street
47, 49, 51 Pasture Street	9 Taylor's Terrace

(c) Owners scheme of repairs accepted—23 and 25 Garibaldi Street.

One owner/occupier—who had bought a house on which a Closing Order had been made (but without consulting the Local Authority or engaging a Solicitor)—appealed to the County Court before the order became operative on the grounds that it was not unfit. The Judge dismissed the appeal after inspecting the house.

Successful court proceedings were taken when two vacant houses had been re-occupied in contravention of existing Closing Orders.

Rent Act.—Certificates of Disrepair.—5 applications were received and granted ; two undertakings were accepted.

Caravans.—There is no caravan site in the town. As usual showmen parked in the paddock of the Cattle Market and adjacent open land during the two statute fairs.

Only very occasionally was a caravan found in use in the town and when the occupiers were warned about the provisions of the Grimsby Corporation Act the caravans left Grimsby.

Common Lodging House.—Following the closure and demolition of the Salvation Army Hostel in Central Market at the beginning of 1962, the western wing of the former Brighowgate Children's Home was opened on a temporary basis as a common lodging house. The premises were visited regularly and considering the difficulties encountered were kept in a satisfactory manner.

As the works of adaptation progressed the Salvation Army decided to close the lodging house during the autumn, and at the end of the year there was no common lodging house in Grimsby.

The Council considered two proposals to provide accommodation for vagrants and other men who were known to be living "rough"—neither of which proved to be acceptable. The first because the situation and condition of the suggested premises were considered by the committee to be unsuitable, and the building in the second project would only be available for use for a limited period before its demolition and the Salvation Army was unable to accept the Council's offer. The Salvation Army expressed its willingness to open a lodging house on a permanent basis in the future for the men excluded from using Brighowgate Hostel by the High Court decision, if the Council could provide suitable premises.

Seaman's Lodging House.—The hostel of the Royal National Mission to Deep Sea Fishermen continued to provide good accommodation throughout the year.

PART VI.—INSPECTION & SUPERVISION OF THE FOOD SUPPLY

Mr. Harold Parkinson, Chief Public Health Inspector, is responsible for this section of the work :—

Inspections.

Bakehouses	41	Confectioners shops	64
Dairies and milk vendors	24	Fish curers	15
Fish shops	10	Food preparers	137
Fried fish shops	92	Greengrocers	37
Grocers	221	Ice cream makers and vendors	38
Markets	226	Meat shops and stores	210
Restaurants and cafes	84	Slaughterhouses	934
Sweet shops	22	Other matters	199

Slaughterhouses.—7,255 beasts, 20,127 sheep, 653 calves and 17,114 pigs were slaughtered in the Public Abattoir, which is owned by the Corporation and under the management of the Chief Public Health Inspector.

On the appointed day (1.7.1962) one of the remaining two private slaughterhouses, where sheep and calves only had been killed, went out of use. The other private slaughterhouse was brought up to the standard of the 1958 Regulations and during the year 3,532 pigs were slaughtered in it.

Meat Inspection.—Statistics about carcasses and offals inspected and the resultant condemnations are set out below :—

	Cattle excluding cows	Cows	Calves	Sheep and lambs	Pigs	Horses
Number killed	6,747	508	680	20,294	20,646	—
Number inspected	6,747	508	680	20,294	20,646	—
<i>All diseases except Tuberculosis and Cysticerci.</i> Whole carcasses condemned	4	6	10	39	25	—
Carcasses of which some part or organ was condemned	1,947	218	11	912	9,579	—
Percentage of the number in- spected affected with dis- ease other than tuber- culosis and cysticerci	28.92	44.09	3.09	4.68	46.52	—
<i>Tuberculosis only</i> Whole carcasses condemned	—	—	—	—	1	—
Carcasses of which some part or organ was con- demned.	8	2	—	—	1,177	—
Percentage of the number inspected affected with tuberculosis	0.12	0.39	—	—	5.61	—
<i>Cysticercosis</i> Carcasses of which some part or organ was condemned	31	1	—	6	—	—
Carcasses submitted to treat- ment by refrigeration	31	1	—	6	—	—
Generalised and totally condemned	—	—	—	—	—	—

Tuberculosis.—When evidence of tubercle was found in any beast on post mortem examination in the abattoir the Divisional Veterinary Surgeon was notified immediately—giving him details of the extent and location of the disease, the beasts identification numbers and the place and date of purchase.

Cysticercus bovis.—The carcasses and organs of every beast were examined in accordance with the Ministry instruction and 32 infestations found ; in every instance the freezing treatment was applied and later the meat passed for human food.

Other diseases and unsound conditions found in slaughterhouses included :—

Abscesses, acetonaemia, actinomycosis, arthritis, bruising, cirrhosis, *C. bovis*, and *C. ovis* cysts, congestion, contamination, distomatosis, echinococcus cysts emaciation, emphysema, endocarditis, enteritis, erysipelas, fever, hepatitis, hydronephrosis, hydraemia, infarcts, injuries, Johnes disease, jaundice, lymphosarcoma, mastitis, metritis, melanosis, necrosis, nephritis, oedema, parasites, pericarditis, petechii, peritonitis, pleurisy, pneumonia, pyaemia, tuberculosis and telangiectasis.

Weight of meat condemned—39 tons, 9 cwts. 3 qrs., 18 lbs.

Inspection of other foods :—

	tons	cwts.	qrs.	lbs.
Meat, including sausages and bacon	—	18	2	25
2,618 tins, 453 bottles, 686 packets of various foods ..	1	3	1	11
Cheese and fats	—	2	2	4
Other foods	—	—	2	11
Total weight ..	2	5	—	23

Disposal of unsound meat and other foods.—Diseased meat in the Public Abattoir and the private slaughterhouse was dyed green before transit to an approved processing plant at Killingholme.

Livers affected only with distomatosis were kept separate after condemnation, most of them sold for pharmaceutical purposes to an approved processor—a few were sold to a mink farmer after the livers had been discoloured with green dye.

Unsound tins and other foods were buried in the Corporation tips as no incinerator was available.

Horse flesh for human consumption was not sold or dressed in Grimsby.

Export certificates.—Following inspections at curing houses, factories and cold stores certificates to meat import regulations of the countries concerned were issued as follows :—

Fish inspection.—2,341 bales of dried salted fish (from Grimsby's remaining factory carrying on this trade) consigned to Beira, Cristobal, Funchal, Luanda, Madeira, Miami, Ponta Delgada and Rio-de-Janerio.

4,629 cartons of frozen fish consigned to Italy, Leopoldville and Benghazi.
288 cartons of fish products to Benghazi, Malta, Australia and Sweden.
416 cartons of other foods to Austria, Sweden and Malta.

Milk Supply.—Most of the milk sold in Grimsby was heat treated in two local dairies before distribution to the public (See comment below about the very small amount of raw milk sold in the town).

Wholesalers of milk	2
Retailers of milk (chiefly shopkeepers)	379
Licensed pasteurisers of milk (high temperature short time) ..	2
Licensed to use designation Tuberculin Tested (Pasteurised) Milk	2
Supplementary and dealers licences for sale of Pasteurised milk ..	21
Supplementary and dealers licences for sale of Tuberculin Tested (Pasteurised) Milk	2
Licences to produce Sterilised milk	2
Licences to sell Sterilised milk (mostly for shop keepers)	372
Licences to sell raw Tuberculin Tested milk	2

All the samples of Pasteurised (24), T.T. Pasteurised (22) and Sterilised (15) Milk passed the prescribed tests.

After repeated warnings about complaints of "foreign bodies" found in the bottled milk one Grimsby firm pasteurising milk was fined a total of £60 on three charges for supplying milk to schools, two in a bottle which contained splinters of glass, and an old drinking straw in another, and for using a dirty bottle of milk supplied to a local retailer.

Tuberculin Tested Raw milk produced in the Lindsey County Council area and sold in Grimsby gave cause for complaint. Of the 8 samples from one farm 4 failed the Methylene Blue test and 4 samples from two other farms gave unsatisfactory test results. The appropriate officers of the Ministry of Agriculture and the County Health Department were informed about the unsatisfactory results for action to be taken at the farm.

There were no positive guinea pig tests after 19 tests had been applied to ascertain the presence of tubercular organisms in milk.

Ice Cream.—

Premises registered for ice cream making	6
Premises registered for sale of ice cream (chiefly for pre-packed ice cream)	482

Samples taken of bulk, wrapped and "soft" ice cream reached the required grade after Methylene Blue tests.

The number of vans traversing the town and used for retailing "soft" ice cream increased in 1962.

Food Hygiene.—From the nature of the complaints received about unsound and contaminated food and "foreign bodies" found in food the human element is still the most decisive and somewhat intractable factor in any advance towards a higher standard of hygiene being consistently practiced in the production and distribution of food. Hygienic premises and equipment with adequate cleansing facilities are essential, but the unhygienic ways of thoughtless and ignorant persons in the food industry, including a tiny minority of persistent non-co-operators, upset well intentioned working arrangements.

Warnings were given to producers, shop keepers and food workers after reports had been considered and discussed by the members of the Public Health Sub-Committee, and Court proceedings were also authorised in the following cases :—

Metal hook in a large jar of black currants. Producer fined £25.

Partly smoked cigarette in a brown loaf—Bakehouse employee fined £7 10s. 0d.

Not having hot water supply on a baker's delivery van and for alleged smoking in a confectioner's van—after legal arguments on the Food Hygiene Regulations pleas of "no case to answer" were accepted by the Magistrates.

Complaints received of contaminated and unsound food produced or bought in the county area were referred to the County Council.

Food Poisoning.—Apart from the family outbreak referred to in last year's report, it is pleasing to record that there were no further cases notified in 1962. It is necessary, however, to comment that a few cases of dysentery (which are usually transmitted by careless and unhygienic food handlers—often in the home) were notified each week throughout the year, but at no time was there an epidemic.

Sampling and examination of foods.—486 tests, including bacteriological, biological, histological and chemical examinations, were applied to a wide variety of foods.

The contents of certain pre-packed foods were also checked to ascertain if the contents complied with the descriptions on the wrappers.

Unsatisfactory samples taken under the Food and Drugs Act included :—

Cream cheese.—Two informal samples were deficient in milk fat. After representations made to the producer, a subsequent formal sample reached the standard required.

Milk.—Following the taking of a sample which was 5.2% deficient in fat, "Appeal to Cow" samples were taken at the request of the farmer. The results indicated that inadequate "bulking" of the total supply from each milking was the cause of the deficiency in certain churns and the farmer was advised to send out a "balanced" supply.

Potted meat.—The Public Analyst considered that five samples contained too much water. The Committee decided to warn the makers about reducing the moisture content.

Vinegar.—An inexperienced shopkeeper was warned about selling dilute acetic acid (coloured with caramel) as vinegar.

Public Health (Preservatives etc., in Food) Regulations.—All the samples examined complied with the Regulations.

Chemical Analyses.—The Public Analyst, Mr. Hugh Childs, B.Sc., F.R.I.C., undertook the chemical analysis of samples submitted under the Food and Drugs Act and Fertilisers and Feeding Stuffs Act.

Bacteriological, Histological and Biological Examinations.—These continued to be undertaken in the Department of Pathology, Grimsby General Hospital.

Fertilisers and Feeding Stuffs.—Of the 15 samples taken, two were unsatisfactory when 2 samples of fish meal contained oil in excess of the guarantee. The firms concerned were warned about complying with the Act.

PART VII.—ADDITIONAL INFORMATION.

NATIONAL ASSISTANCE ACTS : INCIDENCE OF BLINDNESS.

At the end of 1962 the total number of blind persons in the Borough was 147 (males 67, females 80). The number of partially-sighted persons was 52 (males 21, females 31).

Twenty-two Forms B.D.8 were received during the year. As a result of examinations carried out by the ophthalmic surgeons 13 persons were certified as blind and 9 as partially-sighted. There were no cases of retrolental fibroplasia.

Follow-up of Registered Blind and Partially Sighted persons.

(i) Number of cases registered during the year in respect of which Form B.D.8 recommends:—	Cause of disability			
	Cataract	Glaucoma	Retrolental fibroplasia	Others
(a) No treatment ...	5	2	—	5
(b) Treatment (medical surgical or optical)	4	3	—	3
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment ...	2	2	—	3

One case of ophthalmia neonatorum was notified during the year. There was no impairment of vision.

PERSONS IN NEED OF CARE AND ATTENTION.

It was not necessary during the year to take any action under Section 47 of the National Assistance Act, 1948.

EPILEPTICS AND SPASTICS

From such information as is available the incidence of epilepsy and cerebral palsy in Grimsby is as follows :—

Epileptics

		Under 5	5-15	16 and over	Total Number
At ordinary school ...	Males	—	7	—	7
	Females	—	9	—	9
At special school ...	Males	—	—	—	—
	Females	—	—	—	—
At training centre ...	Males	—	3	2	5
	Females	—	5	—	5
*In employment ...	Males	—	—	22	22
	Females	—	—	6	6
At home ...	Males	1	—	22	23
	Females	1	—	2	3
TOTALS ...		2	24	54	80

Spastics

			<i>Under 5</i>	<i>5-15</i>	<i>16 and over</i>	<i>Total number</i>
At ordinary school	...	Males	—	1	—	1
		Females	—	1	—	1
At special school	...	Males	—	2	—	2
		Females	—	1	—	1
At training centre	...	Males	—	5	6	11
		Females	1	10	2	13
*In employment	...	Males	—	—	8	8
		Females	—	—	3	3
At home	...	Males	2	—	3	5
		Females	2	—	3	5
TOTALS			5	20	25	50

*Per Disablement Resettlement Officer, local office of Ministry of Labour.

MEDICAL EXAMINATIONS.

Medical examinations for superannuation purposes were carried out on 217 employees during the year, 207 by medical staff of the department and 10 by requests to other local authorities. Of these 2 were found unfit for entry into the superannuation scheme.

Five employees for retirement on medical grounds were referred to the medical referee, and the Medical Officer of Health investigated and made special reports on 12 employees who had been absent from duty for a period of three months and over.

Ninety-four candidates for admission to training colleges were also examined by the medical staff. Examinations for entry into the teaching profession numbered 74, fourteen of these by requests to other authorities, and all received x-ray examination of the chest before appointment. These candidates were found to be fit for entry into the profession.

During the year 60 persons were examined for employment in the School Meals Service of the Local Education Authority. This examination, which includes tests for carrier conditions, is a valuable protection against the risk of food poisoning and fully justifies the time and trouble taken. None of the candidates were found to be unfit for such employment.

Thirteen firemen were also examined by the medical staff in accordance with the provisions of the Fire Services (Appointments and Promotions) Regulations, 1950, and all were found fit for entry into the Service.

The above represents a total of 463 medical examinations during the year, 434 of which were performed by medical staff of the department, compared with 418 and 399 respectively in 1961.

As recommended in Ministry of Health Circular 64/50—Protection of Children from Tuberculosis—61 employees of the local authority whose work brings them into contact with young children were referred for x-ray examination of the chest.

BLOOD DONORS.

The Sheffield Regional Transfusion Team is offered the use of the local authority's clinics to hold taking sessions, the Watkin Street Clinic being placed at their disposal on two occasions during the year.

LABORATORY FACILITIES.

A total of 2,538 specimens were submitted by the health department for examination in the pathological laboratory at the Grimsby General Hospital.

GRIMSBY CREMATORIUM.

The Medical Officer of Health and his Deputy act as Medical Referee and Deputy Medical Referee respectively to the Grimsby Crematorium, which opened on the 5th August, 1954.

The following gives the number of cremations which have taken place in the past five years :—

<i>Year</i>	<i>Grimsby residents</i>	<i>Residents from other areas</i>	<i>Total</i>
1958	365	589	954
1959	409	666	1,075
1960	436	747	1,183
1961	459	883	1,342
1962	554	1,005	1,559

The above represents a total of 463 medical examinations during the year 1931 of which were performed by medical staff of the department, commencing with 418 and 305 respectively in 1930.

As recommended in Ministry of Health Circular 3450—Protection of Children from Tuberculosis—61 employees of the local authority whose work brings them into contact with young children were referred for X-ray examination of the chest.

1931	1930
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
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81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

The Sheffield Hospital Transfusion Team is offered the use of the local authority's clinics to hold blood sessions. The Warren Street Clinic being placed at their disposal on two occasions during the year.

1931	1930
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
23	23
24	24
25	25
26	26
27	27
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99	99
100	100

A total of 2,528 specimens were submitted by the health department for examination in the pathological laboratory at the General Hospital.

1931	1930
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98	98
99	99
100	100

The Medical Officer of Health and his Deputy act as Medical Referee and Deputy Medical Referee respectively to the County Crematorium, which opened on the 15th August, 1931.

1931	1930
1	1
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96	96
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98	98
99	99
100	100

The following table shows the number of cremations which have taken place at the crematorium since its opening on the 15th August, 1931.

1931	1,342	1,000	750	500	250	100	50	25	10	5	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Total	1,342	1,000	750	500	250	100	50	25	10	5	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

During 1931 new crematorium buildings were erected at a cost of £10,000. The new crematorium buildings will contain 10 crematoriums, and will be completed in 1932. The new crematorium buildings will be situated on the site of the old crematorium buildings, and will be situated on the site of the old crematorium buildings.

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During 1931 the crematorium buildings were erected at a cost of £10,000. The new crematorium buildings will contain 10 crematoriums, and will be completed in 1932. The new crematorium buildings will be situated on the site of the old crematorium buildings, and will be situated on the site of the old crematorium buildings.

Table 1.—Vital Statistics of the whole Borough during 1962 and previous Years.

YEAR	Total Popula- tion estimated to middle of each year	Births			Total Deaths Registered in the District		Transferable Deaths		Nett Deaths belonging to the District			
		Un- corrected Number	Nett		Number	Rate	of Non- residents registered in the District 8	of Resid- ents not registered in the District 9	Under 1 Year of Age		At all Ages	
			Number	Rate					Number	Rate per 1,000 Nett Births	Number	Rate
1	2	3	4	5	6	7	8	9	10	11	12	13
1901	63,430	—	2048	32.4	1065	16.8	27	—	379	185	1038	16.4
1911	74,950	—	2128	28.4	1109	14.8	61	44	328	154	1092	14.5
1921	82,330	—	2173	26.4	980	11.9	55	55	222	102	980	11.9
1931	92,280	1634	1650	17.8	1126	12.2	53	37	100	61.0	1110	12.0
1941	78,680	1398	1403	17.8	1195	15.1	148	61	80	57.7	1108	14.0
1951	93,250	1655	1751	18.7	1276	13.6	215	66	60	34.2	1127	12.0
1952	93,200	1591	1693	18.1	1150	12.3	195	85	58	34.2	1040	11.1
1953	93,300	1517	1647	17.6	1176	12.6	207	53	55	33.3	1022	10.9
1954	93,670	1606	1700	18.1	1271	13.5	247	63	42	24.7	1087	11.6
1955	94,560	1639	1755	18.5	1186	12.5	204	84	49	27.9	1066	11.2
1956	95,400	1673	1791	18.7	1236	12.9	246	73	69	38.5	1063	11.1
1957	96,050	1710	1846	19.2	1254	13.0	247	65	35	18.9	1072	11.1
1958	96,380	1724	1829	18.9	1226	12.7	267	85	46	25.1	1044	10.8
1959	97,110	1800	1858	19.1	1156	11.9	248	104	41	22.0	1012	10.4
1960	97,030	1857	1909	19.6	1211	12.5	270	91	48	25.1	1032	10.6
1961	96,520	1821	1989	20.6	1236	12.8	280	82	43	21.6	1038	10.7
1962	96,780	2013	2031	21.0	1376	14.2	321	98	48	23.6	1153	11.9

Population at Census of 1951 ... 94,557 Population at Census of 1961 ... 96,665

Table 2.—England and Wales and Grimsby, 1945–1962.**Birth Rates.**

Year	Number of Births	Grimsby		England and Wales Birth Rate
		Birth Rate	Adjusted Birth Rate	
1945	1686	21·6	—	16·1
1946	2118	24·5	—	19·1
1947	2183	24·4	—	20·5
1948	1911	20·9	—	17·9
1949	1872	20·5	—	16·7
1950	1702	18·2	18·9	15·8
1951	1751	18·7	19·1	15·5
1952	1693	18·1	18·7	15·3
1953	1647	17·6	18·1	15·5
1954	1700	18·1	18·3	15·2
1955	1755	18·5	18·7	15·0
1956	1791	18·7	18·9	15·7
1957	1846	19·2	19·2	16·1
1958	1829	18·9	18·9	16·4
1959	1858	19·1	19·1	16·5
1960	1909	19·6	19·6	17·1
1961	1989	20·6	20·8	17·4
1962	2031	21·0	21·0	18·0

Table 3. England and Wales and Grimsby, 1945–1962.**Death Rates.**

Year	Nett Deaths	Grimsby		England and Wales Death Rate
		Death Rate	Adjusted Death Rate	
1945	1036	13·2	*	11·4
1946	1028	11·9	*	11·5
1947	1175	13·1	*	12·0
1948	991	10·8	*	10·8
1949	1125	12·3	13·0	11·7
1950	1052	11·2	11·9	11·6
1951	1127	12·0	12·6	12·5
1952	1040	11·1	11·7	11·3
1953	1022	10·9	11·4	11·4
1954	1087	11·6	12·1	11·3
1955	1066	11·2	11·8	11·7
1956	1063	11·1	12·6	11·7
1957	1072	11·1	12·6	11·5
1958	1044	10·8	12·2	11·7
1959	1012	10·4	11·8	11·6
1960	1032	10·6	11·9	11·5
1961	1038	10·7	12·0	12·0
1962	1153	11·9	13·3	11·9

* Area comparability factor suspended by Registrar General.

Table 4.—Causes of and Ages at Death during the Year 1962

(as compiled from figures supplied by the Registrar General)

Causes of Death.	All Ages.			Under 1 year	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and under 75.	75 and upw'ds
	Total	Males	F'm'les								
All Causes { Certified ...	1153	593	560	48	4	4	10	30	229	291	537
{ Uncertified ...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis, respiratory ...	6	6	...	...	...	...	...	1	3	2	...
Tuberculosis, other ...	1	1	...	...	...	...	1	...	...	...	...
Syphilitic disease ...	4	...	4	...	...	...	...	...	...	3	1
Diphtheria ...	...	...	...	...	...	...	...	...	...	...	...
Whooping cough ...	...	...	...	...	...	...	...	...	...	...	...
Meningococcal infections ...	...	...	...	...	...	...	...	...	...	...	...
Acute poliomyelitis ...	...	...	...	...	...	...	...	...	...	...	...
Measles ...	...	...	...	...	...	...	...	...	...	...	...
Other infective and parasitic diseases ...	5	5	...	3	...	...	1	...	1	...	...
Malignant neoplasm, stomach	21	13	8	...	...	...	...	3	5	10	3
Malignant neoplasm, lung, bronchus	55	50	5	...	...	...	...	4	29	14	8
Malignant neoplasm, breast ...	21	...	21	...	...	...	...	1	10	5	5
Malignant neoplasm, uterus ...	9	...	9	...	...	...	...	2	3	2	2
Other malignant and lymphatic neoplasms...	86	50	36	...	...	...	...	1	36	18	31
Leukaemia, aleukaemia ...	4	2	2	...	...	...	...	...	1	1	2
Diabetes ...	6	1	5	...	...	...	...	...	3	...	3
Vascular lesions of nervous system	150	60	90	...	...	...	...	...	19	45	86
Coronary disease, angina ...	275	144	131	...	...	...	...	4	47	87	137
Hypertension with heart disease	42	19	23	...	...	...	...	...	4	13	25
Other heart disease ...	121	53	68	...	...	...	1	6	11	20	83
Other circulatory disease ...	45	11	34	...	...	...	...	...	5	6	34
Influenza ...	7	6	1	1	...	...	...	...	3	1	2
Pneumonia ...	47	23	24	6	...	...	...	...	2	8	31
Bronchitis ...	69	53	16	2	1	...	...	1	17	27	21
Other diseases of respiratory system	10	7	3	6	...	...	...	1	...	...	3
Ulcer of stomach and duodenum	11	4	7	...	...	...	...	...	1	3	7
Gastritis, enteritis and diarrhoea	6	5	1	2	...	...	...	...	3	...	1
Nephritis and nephrosis ...	3	2	1	...	...	...	...	...	1	1	1
Hyperplasia of prostate ...	6	6	...	...	...	...	...	...	...	...	6
Pregnancy, childbirth, abortion ...	...	...	...	...	...	...	...	...	...	...	...
Congenital malformations ...	10	4	6	6	...	...	1	...	2	1	...
Other defined and ill-defined diseases ...	87	43	44	22	...	...	...	3	14	16	32
Motor vehicle accidents ...	10	7	3	...	1	...	2	1	3	2	1
All other accidents ...	25	12	13	...	2	4	1	1	4	4	9
Suicide ...	10	6	4	...	...	...	2	1	2	2	3
Homicide and operations of war	1	...	1	...	...	...	1	...	...	...	...
TOTALS ...	1153	593	560	48	4	4	10	30	229	291	537

Table 5.—Infantile Mortality during the year 1962.

Nett Deaths from stated Causes at various Ages under 1 Year of Age.

CAUSES OF DEATH				Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	1—3 months.	3—6 months.	6—9 months.	9—12 months.	Total Deaths under 1 Year.
All Causes	Certified ...	...	...	23	3	1	—	27	11	4	4	2	48
	Uncertified ...	...	...	—	—	—	—	—	—	—	—	—	—
Pneumonia ...				—	—	—	—	—	2	1	3	—	6
Bronchitis ...				—	1	—	—	1	—	—	1	—	2
Other respiratory diseases ...				—	—	—	—	—	6	3	—	1	10
Enteritis and diarrhoea ...				—	1	—	—	1	1	—	—	—	2
Congenital malformation of heart ...				—	—	—	—	—	—	—	—	1	1
Other congenital malformations ...				2	1	—	—	3	2	—	—	—	5
Injury at birth ...				3	—	—	—	3	—	—	—	—	3
Post-natal asphyxia and atelectasis ...				3	—	—	—	3	—	—	—	—	3
Pemphigus and sepsis of newborn ...				1	—	1	—	2	—	—	—	—	2
Haemolytic disease of newborn ...				1	—	—	—	1	—	—	—	—	1
Immaturity ...				12	—	—	—	12	—	—	—	—	12
All other causes ...				1	—	—	—	1	—	—	—	—	1
Totals ...				23	3	1	—	27	11	4	4	2	48

Live Births in the year—

	Males	Females	Total
Legitimate ...	967	908	1,875
Illegitimate ...	77	79	156

Totals 1,044 987 2,031

Nett Deaths in the year—

	Males	Females	Total
...	34	12	46
...	1	1	2

35 13 48

Table 6.—Cases of Infectious Diseases notified during the year 1962

Notifiable Disease	All ages			Under 1 year		1—2 years		2—3 years		3—4 years		4—5 years		5—10 years		10—15 years		15—20 years		20—25 years		25—35 years		35—45 years		45—65 years		65 years and over		Total cases admitted to Hospital
	M	F	Total	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Scarlet Fever	11	13	24	—	—	1	—	—	1	1	1	7	7	2	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	4
Whooping Cough	2	4	6	—	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	167	170	337	3	6	15	17	20	14	23	20	21	18	83	85	2	8	—	1	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis (Paralytic)	1	2	3	1	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3
Meningococcal Infection	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Dysentery	189	207	396	11	4	18	13	25	22	13	10	11	11	43	51	17	22	5	7	5	7	15	31	12	11	11	11	3	7	14
Ophthalmia Neonatorum	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Puerperal Pyrexia	—	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Acute Pneumonia	8	2	10	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	1	—	—	—	4	—	2	—	2
Food Poisoning	1	2	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—
Erysipelas	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Rheumatism	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Chicken pox	785	808	1593	40	43	60	53	64	62	66	85	83	79	416	422	35	43	11	7	1	3	7	6	2	—	—	—	—	—	8
Totals	1166	1214	2380	55	54	96	85	109	100	102	119	116	109	551	567	57	73	16	17	6	12	23	39	15	19	15	12	5	8	34

TABLE 7—GRIMSBY, 1962.

TUBERCULOSIS—Age Groups of New Cases and Deaths.

Age Periods.	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ...	—	—	—	—	—	—	—	—
1—2 years ...	—	—	—	—	—	—	—	—
2—5 years ...	—	4	—	—	—	—	—	—
5—10 years ...	—	1	—	1	—	—	—	—
10—15 years ...	1	1	—	—	—	—	—	—
15—20 years ...	1	1	1	—	—	—	1	—
20—25 years ...	3	3	—	—	—	—	—	—
25—35 years ...	3	4	—	—	1	—	—	—
35—45 years ...	8	5	3	—	—	—	—	—
45—55 years ...	11	—	—	1	1	—	—	—
55—65 years ...	9	—	1	—	2	—	—	—
65—75 years ...	4	1	—	—	2	—	—	—
75 and upwards	1	—	—	1	—	—	—	—
Totals ...	41	20	5	3	6	—	1	—

Table 8—Grimsby 1953—1962.

Tuberculosis.—Notifications and Deaths.

Years	Notifications			Deaths		
	Pul-monary	Non-Pul-monary	Total	Pul-monary	Non-Pul-monary	Total
1953	92	14	106	24	2	26
1954	87	20	107	21	1	22
1955	64	11	75	16	2	18
1956	78	15	93	18	1	19
1957	80	22	102	11	1	12
1958	68	15	83	15	1	16
1959	57	6	63	11	1	12
1960	65	16	81	6	2	8
1961	49	10	59	8	2	10
1962	61	8	69	6	1	7

Table 9—Factories Act, 1961.

Annual Report of the Medical Officer of Health in respect of the Year 1962 for the County Borough and Port of Grimsby in the County of Lincolnshire.

Prescribed particulars on the administration of the Factories Act, 1961.

PART I OF THE ACT.**1—INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	331	508	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	561	587	12	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	63	118	1	—
TOTAL ...	955	1,213	14	—

2.—CASES IN WHICH DEFECTS WERE FOUND.

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases.")

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1.)	145	139	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	1	—	—	—
Inadequate ventilation (S.4) ...	3	3	—	—	—
Ineffective drainage of floors (S.6.)	24	23	—	—	—
Sanitary Conveniences (S.7.)—					
(a) Insufficient	2	1	—	2	—
(b) Unsuitable or defective ...	70	71	—	1	—
(c) Not separate for sexes ...	3	3	—	—	—
Other offences against the Act (not including offences relative to Outwork)	79	65	—	—	—
TOTAL ...	326	306	—	3	—

PART VIII OF THE ACT.

OUTWORK

(Sections 133 and 134)

Nature of Work	Section 133			Section 134		
	No. of out-workers in August list required by Section 133 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel Making, etc.	2	—	—	—	—	—
Nets, other than wire nets	154	5	—	—	—	—
TOTAL	156	5	—	—	—	—

SCHOOL HEALTH SERVICE

Report of the Principal School Medical Officer for the year 1963

To the Chairman and Members of the Education Committee.

It is pleasing to report that the health of the school population remains very satisfactory. Apart from a few minor infectious diseases there have been no serious outbreaks. The number of poliomyelitis cases reported in a child who had not been immunised was one.

PART IX

Child welfare was maintained during the year and it is hoped that this simple and safe procedure will be universally accepted by doctors and patients alike.

For the first time in the history of school medical inspection not a single child was considered to be nutritionally unsatisfactory. All the major state of affairs can be maintained at the level of better supervision than the welfare of the child will have been maintained. It is hoped that they will be maintained in all instances.

SCHOOL HEALTH SERVICE.

The number of children found with one or other signs of vitamin deficiency in all time has been 1125. Great credit must be given to the nurses and others for careful vigilance.

The various consultants' clinics are providing a most excellent service. An interesting observation is that the number of a new paediatrician has been improved upon the previously good co-operation schemes with the hospital services.

Students will be familiar with the annual complaint of the scarcity of school dental officers. This year is no exception and the former Principal Dental Officer has succumbed to the temptation of general practice. A considerable list of enquiries for making the service more acceptable, but in essence this authority was already doing most of them.

The Child Guidance Centre continues to meet the ever increasing demands made upon it, and as all child work is also undertaken here must have both psychologists fully occupied. Its value is now recognised by most people.

SCHOOL HEALTH SERVICE

Report of the Principal School Medical Officer for the year 1962

To the Chairman and Members of the Education Committee.

It is pleasing to report that the health of the school population remains very satisfactory. Apart from chicken pox the other infectious diseases were even lower than the previous year. The single case of poliomyelitis occurred in a child who had not been immunised.

Oral vaccine was introduced during the year and it is hoped that this simple and safe procedure will be universally accepted by doctors and patients alike.

For the first time in the history of school medical inspections not a single child was considered to be nutritionally unsatisfactory. If this happy state of affairs can be maintained in the face of rising unemployment then the welfare state will have been fully justified. Outbreaks of dysentery still occur but thanks to the good co-operation by all concerned they were controlled in all incidences.

The number of children found with nits or other signs of vermin represented an all time low level of 1.25%. Great credit must be given to the nurses and others for careful vigilance.

The various consultants' clinics are providing a most excellent service. An interesting observation is that the advent of a new Paediatrician has even improved upon the previously good co-operation schemes with the hospital services.

Members will be familiar with the annual complaint of the scarcity of school dental officers. This year is no exception and the former Principal Dental Officer has succumbed to the temptations of general practice. A circular from the Ministry gave a list of suggestions for making the service more acceptable, but in essence this authority was already doing most of these.

The Child Guidance Centre continues to meet the ever increasing demands made upon it, and as all clinic work is also undertaken here must have kept both psychologists fully occupied. Its value is now recognised by most people

and it is a great personal pleasure to be so closely associated. Speech therapy is regrettably at a standstill as it has not yet been possible to fill the vacancy left by Miss Roberts who resigned on the 12th May. Physical education makes steady progress in all directions.

It is always a pleasure to pay tribute to the courtesy and help invariably received from the staff of the Education Department, and for the sympathetic manner which the Committee gives to the matters placed before them.

R. GLENN,

Principal School Medical Officer.

HEALTH DEPARTMENT,

1 Bargate, Grimsby.

April, 1963.

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R. E. RICHARDSON, M.Sc., Ph.D.

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"	Mrs. E. G. JEFFERSON		Mrs. N. TROUGHT

STAFF OF SCHOOL HEALTH SERVICE*Medical Officer of Health and Principal School Medical Officer* :—

ROBERT GLENN, M.B., B.Ch., B.A.O., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :—

SAMUEL R. W. MOORE, M.B., B.Ch., B.A.O., D.P.H.

School Medical Officers—

JOHN G. J. COGHILL, M.B., Ch.B.

EILEEN M. PRIOR, L.R.C.P., M.R.C.S.

JAMES L. T. GRAHAM, L.R.C.P., L.R.C.S., L.M.

Principal Dental Officer—

GEOFFREY S. WATSON, B.D.S., L.D.S. (app. 1.2.62)

Dental Officer—

CHARLES B. G. MAJOR, B.D.S., L.D.S., R.C.S. (Eng.)

Part-time Dental Officers—

DONALD W. HUNT, L.D.S., R.C.S. (Eng.)

DAVID U. E. MILLER, L.D.S., R.C.S. (Eng.)

Superintendent Health Visitor/School Nurse—

Mrs. I. HALDANE

Health Visitors/School Nurses—

Miss M. TIPPLER, Miss M. BAGG, Miss J. D. M. VARRIE, Mrs. M. KOZLOWSKI, Miss J. BELL, Miss K. SPENCER, Miss I. ADAMSON, Mrs. M. DAWSON, Mrs. I. STOREY, Miss H. BRAGG.

School Nurses—

Miss H. M. SCARLETT, Mrs. A. C. NICHOLSON, Mrs. J. MARSH, Mrs. E. HEWSON, Mrs. M. WALMSLEY, Mrs. M. MAULTBY (part-time).

Clinic Nurses—

Mrs. G. WHITEHALL, Mrs. I. D. MILLS, Mrs. M. COLEMAN (part-time), Mrs. W. MASON (part-time).

Dental Staff—

Mrs. M. AYLOTT (Clerk), Mrs. M. FINNIE, Miss S. M. CASH, Mrs. J. HARNIESS (res. 30.9.62), Miss N. WELLS (app. 10.9.62).

Clerical Staff—

Miss A. ROBERTS, Mrs. M. DRINKELL (res. 31.10.62), Miss B. DRESCHER (app. 25.10.62), Miss J. OAKES.

GENERAL INFORMATION

Home population at all ages (estimated at 30th June, 1962) 96,780
 Estimated Child population (30th June, 1962)

Under 1 year	..	..	1,970
1 to 4 years inclusive	..	..	7,330
5 to 14 years inclusive	..	..	15,600
Total under 15 years	..	..	<u>24,900</u>

Primary Schools

Number on Rolls

Number of schools	..	..	19	
Number of departments	..	..	35	10,038

Secondary Schools

Number of schools	..	..	6	
Number of departments	..	..	11	4,059

Secondary Grammar and Technical Schools

Grimsby Wintringham Boys' Grammar School	..			615
Grimsby Wintringham Girls' Grammar School	..			613
Havelock School	..	..	..	898
Technical School	..	..	..	647

Special School

Carnforth Day Special School	117
------------------------------	----	----	----	-----

Nursery School

Nunsthorpe Nursery School	46
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Total number of pupils on rolls (January, 1963)	..			<u>17,033</u>
---	----	--	--	---------------

FINDINGS OF MEDICAL INSPECTIONS

Nutrition.—The average nutrition of school children was maintained at a satisfactory level throughout the year.

Classification of those medically examined is now made under the designation 'physical condition'. This includes general condition and physique, replacing the older classification of general condition only.

'Physical condition' is assessed under two headings—satisfactory and unsatisfactory. All the 4,863 children medically examined were classified satisfactory (100%).

At the end of the year 6,169 children were paying for school dinners and 569 were receiving them free. The number of children drinking school milk was 13,889 each day.

Uncleanliness.—Examinations are carried out at regular intervals at the various schools by the school nurses, statutory notices being issued to parents where indicated.

Facilities are available at the school clinics for disinfesting those children who repeatedly attend school in a verminous condition. A nurse is in daily attendance, and D.D.T. preparation is issued free to parents with full instructions as to how to carry out the necessary treatment.

Inspections totalled 37,461 : the number of individual children found to be unclean being 581, while at routine school medical inspections 61 children out of 4,863 examined showed evidence of louse infestation.

Diseases of the Skin.—The incidence of scabies and all skin diseases found at routine medical inspections during the last few years is given in the following table.

Disease	<i>Routine Medical Inspections.</i> Incidence per 1,000 inspections.					
	1957	1958	1959	1960	1961	1962
All skin diseases ...	5.9	5.9	5.4	6.9	3.4	4.1
Scabies ...	—	—	0.1	0.1	0.1	—

A further table shows the number of cases of the chief infectious skin diseases seen by the Medical Officer and treated at the school clinic during the same six years.

Disease.	1957	1958	1959	1960	1961	1962
Ringworm (scalp) ...	—	—	—	—	—	—
Ringworm (body) ...	—	—	—	—	—	—
Scabies ...	2	—	1	25	12	8
Impetigo ...	46	22	19	16	20	11

School Clinics.—There are two school clinics—one in Milton Road and the other at 34 Dudley Street—and both are open daily from 8.40 a.m. to 5.30 p.m. Minor ailment sessions are held each morning and the school medical officer attends three sessions per week. New cases seen by clinic nurses were 433 and total attendances numbered 9,137.

Special clinics are held as follows :—Ophthalmic—weekly ; Cardiac—monthly or by arrangement ; and Orthopaedic—fortnightly.

In addition, the school medical officers carry out the examination of candidates for admission to training colleges and entrants to the teaching profession.

Defects of Vision and Diseases of the Eye.—Refraction was carried out on 235 children (61 new cases), and glasses were prescribed for 201. Attendances numbered 396 and no cases of eye disease were referred from the school clinic during the year.

Diseases of the Ear, Nose and Throat.—

(a) **Audiometry.**—During the year 1962 hearing tests by the sweep method were carried out in schools and the results were as follows :—

Number tested	648
Number found satisfactory	641
Number referred to the school clinic for special examination and final disposal	7

(b) **Nose, and Throat Defects.**—The number of cases found to require treatment at routine and special inspections was 11. These were classified as follows :—

Chronic tonsillitis	2
Adenoids only	—
Chronic tonsillitis & adenoids	4
Other conditions	5

Appropriate treatment was carried out by the clinic nurse in suitably selected cases as advised by the medical officers.

(c) **Diseases of the Ear.**—20 new cases of otitis media and 3 old were examined at the school clinic. Of the 23 cases seen, 5 were referred to the E.N.T. Specialist on account of deafness.

The clinic nurse carried out special treatment advised by the E.N.T. Specialist in 3 new cases of otitis media.

Heart Diseases and Rheumatism.—Four consultative clinics were held at the school clinic. 18 cases (of which 5 were new) made a total of 19 attendances.

Orthopaedic Clinic.—During the year 21 consultative clinics were held at the school clinic. 150 cases (of which 22 were new) made a total of 172 attendances.

HANDICAPPED PUPILS AND SPECIAL SCHOOLS REGULATIONS, 1959.

(As on January 20th, 1963.)

Categories of Handicapped pupils	Number at ordinary school.	Number at special school.	Number not at school.
Blind	—	1	—
Partially sighted ...	—	4	—
Deaf	—	5	—
Partially deaf ...	—	2	—
Educationally sub-normal ...	14	104	—
Epileptic	17	4	—
Maladjusted ...	1	7	—
Physically handicapped	—	2	3*
Speech defect ...	—	—	—
Delicate	—	3	—

* receiving home tuition.

Infectious Diseases.—No school or department was closed on account of communicable disease during 1962.

The incidence of notifiable diseases in children aged 5 to 15 years was as follows, the figures in brackets indicating the numbers notified in 1961 :—

Scarlet fever 16 (30) ; measles 178 (1,228) ; whooping cough 1 (8) ; chicken-pox 916 (118) ; poliomyelitis 1 (1) ; dysentery 133 (26) ; pneumonia 1 (1) ; acute rheumatism 1 (1) ; and erysipelas 1 (—).

In addition 4 children of school age were notified under the Public Health (Tuberculosis) Regulations, 1952, as suffering from tuberculosis—3 pulmonary and 1 non-pulmonary. Last year there were 5 cases notified of pulmonary tuberculosis.

B.C.G. vaccination.—The only alteration made in the B.C.G. programme was to offer this service to second year pupils attending secondary schools. Hitherto B.C.G. vaccination was offered to children aged 13 years and for administrative ease this change was made. Since the scheme commenced in May, 1954 the number of children vaccinated each year is as follows :—

<i>Year</i>								<i>Number vaccinated</i>
1954	..	..	..	..	..	..	..	320
1955	..	..	..	..	..	..	..	297
1956	..	..	..	..	..	..	..	400
1957	..	..	..	..	..	..	..	408
1958	..	..	..	..	..	..	..	456
1959	..	..	..	..	..	..	..	573
1960	..	..	..	..	..	..	..	2,204
1961	..	..	..	..	..	..	..	926
1962	..	..	..	..	..	..	..	1,091

Tuberculin survey in schools.—In December a tuberculin survey had to be undertaken at a junior department where a teacher was reported as suffering from pulmonary tuberculosis. This resulted in 150 pupils and staff being Heaf tested and later 26 persons were x-rayed at the Chest Clinic. One adult was further investigated.

Protection against diphtheria.—Special diphtheria immunisation sessions were conducted at school premises in conjunction with the medical inspections, and of the following details 137 primary and 1,393 maintenance injections were undertaken in schools.

<i>Primary immunisation</i>		<i>Reinforcing injections-</i>	
Under 5-years	1,302	Under 5-years	27
5—15 years	190	5—15 years	1,567
Total	<u>1,492</u>	Total	<u>1,594</u>

The total primary immunisations for last year was 2,081 and re-inforcing injections numbered 1,976.

Poliomyelitis vaccination.—On 1st February the Minister of Health issued Circular No. 3/62 which provided for routine vaccination against poliomyelitis by ORAL VACCINE. Preparations were made to effect this change-over with suitable publicity in the local press and a campaign was launched in

primary schools to improve the immunity. It is estimated that about 90 per cent. of the child population is now protected against poliomyelitis, and the number of children to receive immunisation this year was as follows :—

	<i>Salk Vaccine</i> <i>Two injections</i>	<i>Sabin Vaccine</i> <i>Three doses</i>	<i>Total</i>
Under 5-years ..	284	1,476	1,760
5—15 years ..	118	2,068	2,186
Total	402	3,544	3,946
Third doses ..	747	1,300	2,047
Fourth doses ..	93	2,877	2,970

Employment Certificates.—During the year certificates were issued to 291 school children who were engaged in particular employment after school hours.

Provision of Clothing.—Clothing was supplied to 284 children at a cost of £1,515.

DENTAL SERVICE

Mr. Geoffrey S. Watson, B.D.S., L.D.S., Principal Dental Officer, presents the following report :—

The Dental Service provided by the County Borough of Grimsby for the inspection and treatment of the priority classes totalling approximately 30,000 persons has been sadly understaffed during 1962. The present professional staff includes two full-time and two part-time dental surgeons, together with the services of one-part time medical anaesthetist. At the time of writing the part-time assistance has been reduced to the level of two sessions per week, or the equivalent of one-fifth of a full-time dental officer. Even more disturbing is the possible resignation of one full-time operator in the future.

Assuming that no additional professional staff join the service within, say, the next year, then this Authority faces the possibility of having but one full time operator in the not too distant future, instead of the establishment of five to attempt to provide a service for the priority classes. Clearly this will be utterly impossible, and is indeed a grave reflection upon the national policy, since similar conditions apply, and have applied for many years in most parts of the country. It would appear that a remedy to this problem could be a discrimination in eligibility for treatment in this service, unsatisfactory as that may be.

The recruitment of full-time professional staff is the major problem confronting this Authority's School Dental Service, and that of the country. With adequate, or near adequate staff, this report could be a gratifying account of work accomplished, in terms of children made dentally fit, coupled with the realisation that progress was being made towards the control of dental disease. As it is the statistics of work done can only be presented as a contribution by an understaffed service to the great amount of work that is necessary and waiting to be carried out.

These hard facts lead the writer to suggest one method of recruitment to the School Dental Service, which could within a few years considerably revitalise the present state of affairs. It is suggested that grants awarded to dental students by their respective Authorities be made on the understanding that the successful applicant, upon qualification, shall work in their own or some other school dental service for a period of one or two years. The Armed Services, which are a real branch of National Government, offer the most attractive terms to dental students, including full payment of training expenses, together with a salary whilst a student in exchange for a specified period of service and a progressive future upon qualification.

The teaching profession has a similar obligation to the Authority that contributed financially towards their training, and the writer suggests that a year or two years service to the School Dental Service would be a tangible means for students to show their appreciation of the financial aid given during their training, quite apart from the considerable benefit derived from the professional experience.

At the same time it would introduce young full-time operators into the School Dental Service, a service which has an unduly large percentage of older practitioners in its ranks—a state of affairs which is typical of the dental profession as a whole. It could also result in some graduates deciding to make the School Dental Service their career after serving the year or two years.

This suggestion with such modifications as no doubt will be needed could, if the broad principles were firmly placed on a National level, make a worthwhile contribution enabling an Act of Parliament to be carried out with some chance of success and a sense of direction.

The publication in the summer of 1962 of a Government report on "The conduct of the fluoridation studies in the United Kingdom, and the results achieved after five years" marks the most important event of the year, as far as dentistry is concerned, and is of particular relevancy to the school Dental Service. It is hoped that the knowledge to be obtained will be applied as quickly as possible and the benefits of the reduction in dental decay conferred upon the population.

Arrangements are well in hand to equip and open a new dental clinic at Nunsthorpe but in order to provide a service here it will be necessary to close Watkin Street clinic until more dentists become available. Plans are being

carried out for the addition of a surgery, X-ray room, reception office, and alternative waiting room, to the existing clinic in Dudley Street, placed approximately in the centre of the town and readily accessible from all areas by public transport.

The writer was gratified to receive the memorandum from the Ministeries of Health and Education, issued in August 1962, concerning the School Dental Service ; whereas some Authorities had perhaps reason to examine their premises and equipment through new eyes, Grimsby has been beyond criticism in this respect, and I would like to express my sincere appreciation to the Education and Health Departments of this borough for their willing assistance and co-operation during my first year in this office.

It is respectfully submitted however that the Government must now direct its efforts to the staffing problem of this service if it is to survive in any worthwhile measure or expand and develop its potentialities.

In conclusion, my sincere thanks are due to my colleagues and staff for their diligent assistance during a year which has been full of interest and plans for the future.

CHILD GUIDANCE SERVICE

Dr. M. J. Tyerman, Educational Psychologist, submits the following report for the year ending 31st December, 1962.

PART ONE

General review :

This year, more children than in any previous year were referred to the child guidance centre. Other figures are comparable.

More than 700 pupils attended remedial classes, and 526 were taught in hospital.

In all more than 1600 Grimsby children were dealt with.

During the session, the number of children increased but the staff decreased. The assistant psychologist resigned and removed to Bristol. This means that until his successor is appointed some children do not get as much attention as they need, and that improved facilities cannot be offered. However, it seems likely that a new appointment will soon be made.

1.—In the child guidance centre first appointments are not delayed despite the pressure of cases even though full treatment may have to be postponed. Parents who are worried want advice at once, not at some distant date.

Fortunately most of the children attending the centre can be helped by occasional interviews and advice rather than by intensive and frequent treatment sessions. This not only saves time but lessens the burden placed on the mother. It is often very difficult for a harrassed and overburdened parent to dress two or three young children for outdoors, catch a bus—often in the rain—and then walk to a centre, surgery or clinic. The social services must always try and lessen the mothers' difficulties not increase them. Her health and morale are of the first importance for she is the key to the family's happiness.

The school and the family are the two main social influences on the child, and in Grimsby the psychologist's time tends to be divided about equally between school and clinical work. This service is an integral part of the authority's system and provision, and its first duty is therefore to school-children and the education service: but it is also part of a national service that includes doctors, nurses, probation officers and many others. It is therefore pleasing to report that the happiest of relationships exist between this child guidance service and the administrative officers of Grimsby and Lindsey, the heads and class-teachers, the general practitioners, the consultants and the hospital service. Their support is gratefully acknowledged. Special thanks are due to Dr. Richardson and Dr. Glenn, Dr. Hunter the paediatrician and Dr. J. F. R. Goodlad our consultant psychiatrist.

2.—Within the hospitals, the teachers in the children's wards are doing invaluable work that is greatly appreciated by the medical staffs. There has not been any substantial change in these classes during the year, yet every day the work is different. Almost every morning new patients arrive, old ones leave, and even the condition of an individual child changes from day to day. There are endless demands on the teachers' sympathy, ingenuity and awareness yet the efforts of Mrs. Blackburn and Mrs. Ingham are untiring.

In one hospital there were two children just turned two years of age. Both suffered from congenital disease of the hip and were confined to special beds where they were able to move only their hands. One was in hospital for seven weeks and the other for twelve.

At the opposite end of the age scale were four teenagers who wrote and acted plays that were full of medical terms and hospital life, and another who was helped with her G.C.E. studies.

All the Christmas decorations for one ward were made by the under ten year olds and they put on a striking exhibition of children's art.

For little children the main problem is homesickness but often the teacher can distract a child from this. This is the main value of the work: the stimulus and change it gives the child. It also of course prevents his falling behind in his school work.

To ensure that children continue to receive any special attention they require on leaving hospital, each of the teachers notifies the educational psychologist of all children admitted or discharged from their wards and how long they are likely to be absent from school.

The ties with the hospital service are further strengthened by the lectures given to nurses by the educational psychologist. He lectures to student nurses preparing for state registration and to the trained nurses who are studying for the Diploma in Nursing of the University of London. Grimsby is the only place in the provinces preparing students for this examination. Lectures have also been given to parents, youth leaders and at the University of Hull to teachers.

By this means it is hoped to prevent some difficulties from arising rather than merely deal with them after they have occurred. But often one feels that those who attend do not need the advice and those who need it do not attend.

3.—The remedial classes are doing a very worthwhile job and about 250 children are admitted each year. The discharge rate is similar.

Remedial education is a necessary part of an educational service where classes are small and is even more necessary where classes in the ordinary schools are large. Grimsby was one of the first authorities to recognise this and to develop a system which is now general throughout the country. Unfortunately, few new classes can be started because of the shortage of teachers : but the need exists—in some secondary schools as well as primary.

The remedial classes are particularly useful for children of limited ability and impoverished backgrounds, and also for brighter children who through illness, many changes of school and adjustment problems have fallen behind in their school work.

But some children's learning powers are so limited that the remedial class with its special help for half-an-hour or so each day is of little use. They need full-time help. And for these children a place at Carnforth School is available if the parents so wish.

4.—During 1962, 24 children were recommended for special educational treatment. Such a recommendation is not a rigid permanent decision but an opinion on what the child seems to need at the time of examination. Later developments may alter the opinion. Because of this, in selected cases, Dr. Glenn and Dr. Richardson support the practice of giving a child a trial at the special school or training centre without formal ascertainment, and encourage parents to ask for a reassessment at any time.

It is hoped that this will help parents to feel that their anxieties are appreciated and their wishes understood. This is particularly important when a child is handicapped for such parents and children need all the help they can get.

PART TWO

1.—Staff. Full-time members of staff at the Child Guidance Centre are Dr. M. J. Tyerman, Educational Psychologist in charge ; Miss M. E. D. Pearson, Social Worker ; Mr. T. D. MacKenzie, Remedial Teacher/Psychological Tester, and Miss K. L. Nocton, Secretary-Receptionist. Mr. G. E. Bookbinder, Assistant Psychologist, resigned in September 1962. Mrs. M. N. Green, a remedial teacher, attends the Centre six sessions a week, and spends the remaining time in school.

By arrangement with the Sheffield Regional Hospital Board, Dr. J. F. R. Goodlad, consultant psychiatrist of Lincoln, has continued to attend for two sessions each week. Occasionally Dr. D. J. Buchanan, his senior assistant psychiatrist has attended. Their help, co-operation and continued support are greatly appreciated.

2.—Summary of statistics :

Number of :

children in the area under 17 years (approx.)	..	..	..	..	27,000
children referred during 1962	..	..	..	..	278
children dealt with during 1962 at the child guidance centre : (old and new cases)	..	..	..	..	387
children dealt with during 1962 in remedial classes	..	..	..	..	728
children dealt with during 1962 in hospital classes	..	..	..	..	506
Total	..	..	..	..	1,621

3.—Detailed statistics :

Number of children referred to the child guidance centre since the Service was inaugurated :—2,605.

Number of children referred by year :

1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
116	124	127	105	143	174	250	236	200	192	190	244	226	278

A. Cases closed, current and awaiting interview :

Number of cases dealt with in 1962	..	..	..	..	272
Number of cases closed during 1962	..	..	..	..	227
Number of cases current on 31st December 1962			..	..	212
Number of children awaiting initial interview	..	..	..		9

B. Particulars of children referred in 1962 :

1. Number (excluding those submitted for remedial work in school) 278

2. Age at time of referral :

Below 5 years	Pre-school	..	..	22
5 but not 7..	Primary (Infant) School			48
7 „ „ 11..	Primary (Junior) School			92
11 „ „ 15..	Secondary School	..		98
15 and above	..	..	..	18

3. Sex

Boys	..	..	..	..	..	..	..	173
Girls	..	..	..	..	..	..	..	105

4. Reasons given for referral :

	Boys	Girls	Total
Mental or personality assessment..	87	36	123
Difficult behaviour	40	24	64
Emotional problems	13	13	26
Educational guidance	16	22	38
Habit disorders	15	8	23
Failure to progress at school	2	2	4

5. Source of referral :

Parents (direct or through school)	..	..	..	..	..	33
Headteachers .. .. .	..	..	..	..	..	138
M.O.H. and his staff .. .. .	..	..	..	..	..	21
Director and his staff .. .. .	..	..	..	..	..	35
General Practitioners or Consultants .. .. .	..	..	..	..	..	30
Children's Officer and Magistrates (through M.O.H.) .. .. .	..	..	..	..	..	17
Probation Officers .. .. .	..	..	..	..	..	2
Other .. .. .	..	..	..	..	..	2

6. Cases from previous years dealt with in 1962 164

Number of children referred in 1961 but not interviewed until 1962 9

Number of children interviewed in 1961 and still current on 1st January

1962 155

C. Details of referral interviews held :

1. Number	..	..	..	..	..	..	..	272
2. Recommendations made at the time of first interview :								
(a) Regular treatment interviews	..	..	..	..	..	..	..	59
(b) Occasional supportive interviews	..	..	..	..	..	..	..	22
(c) Report or advice (excluding 'd')	..	..	..	..	..	..	..	183
(d) Special educational treatment required	..	..	..	..	..	..	..	8

D. Analysis of Interviews :**1. Interviews with children by :**

Educational Psychologist	..	..	..	..	..	..	..	331
Assistant Psychologist	..	..	..	..	..	..	..	262
Psychiatrist	..	..	..	..	..	..	..	93
Social Worker	..	..	..	..	..	..	..	175
Remedial Teachers	..	..	..	..	..	..	..	998

Total 1,859

2. Interviews with parents by :

Educational Psychologist	..	..	..	..	..	..	..	377
Assistant Psychologist	..	..	..	..	..	..	..	127
Psychiatrist	..	..	..	..	..	..	..	114
Social Worker	..	..	..	..	..	..	..	354
Remedial Teachers	..	..	..	..	..	..	..	237

Total 1,209

3. School Visits by :

Educational Psychologist	..	..	..	..	..	..	..	119
Assistant Psychologist	..	..	..	..	..	..	..	33
Social Worker	..	..	..	..	..	..	..	2
Remedial Teachers	..	..	..	..	..	..	..	294

Total 448

4. Home Visits by :

Educational Psychologist	..	..	..	..	..	..	..	189
Assistant Psychologist	..	..	..	..	..	..	..	36
Social Worker	96
Remedial Teachers	4

Total 325

Grand Total 3,841

1. Total Number	227
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(a) No treatment required. Diagnosis followed by report.

- F. Composition of Case Load on 31st December 1962 :**

- ### PART THREE

Statutory Examinations under Sections 34 or 57 of the Education Act.

1.		2	3	4	5	6	7	8	9	10	11	12	13	14
	Number of													
	children	1	1	1	—	2	6	7	3	12	1	1	—	—
2.	Sex :	.. 27 Boys, 8 Girls.										Total : 35		
3.	Recommendation :													
	Day special school for educationally subnormal children (Carnforth School)	..	..	..	..	..	..	..	..	..	..	..	..	24
	Training Centre or institution for mentally handicapped children	..										8		
	Residential special school for maladjusted children	..										1		
	Special educational treatment in the ordinary schools	..										1		
	Special school for children with defective speech (Moore House)	..										1		

PART FOUR

Remedial Teaching Groups in Schools :

During 1962, 526 children received remedial help in the following Grimsby Schools : South Parade, St. John's, Nunsthorpe P. Boys', Welholme Boys', Edward, Old Clee, St. Mary's, Little Coates, Weelsby Boys', Weelsby Girls' and Strand.

Of these 526 children, 296 were discharged during the year : 221 were reading satisfactorily, 27 transferred to secondary schools, 40 left the district, and 8 seemed unable to profit from the teaching. 432 were still in the remedial classes at the beginning of 1963.

During the year 164 visits were made and 83 group tests and 12 individual tests given to assist the remedial teachers. Special help was also given at Nunsthorpe Junior Girls' School where the remedial groups are supervised but not organised as part of the Service.

PART FIVE

Education of Children in Hospital :

	<i>Scartho</i>	<i>G. & D.</i>	<i>Total</i>
Number of pupils during 1962 ..	133	393	526
Number of pupils since class formed	468	669	1,137
Number of sessions during 1962 ..	192	211	403

PHYSICAL EDUCATION

(Report by Mr. L. R. G. Welham, Organiser of Physical Education)

The expansion of physical activities carried out in the educational establishments of the Borough during recent years was maintained during 1962. Facilities for indoor and outdoor activity were extended and a wider range of equipment provided. The shortage of teachers continued to present difficulties in some schools, but it was most pleasing to note the position with regard to specialised teachers of physical education in secondary schools was much more satisfactory.

The increased facilities and a wider range of equipment for physical education enabled a great expansion of this work to take place. This was particularly so in the case of activities carried out during the dinner break and after school. These were generally arranged on a House or Club basis and enabled many pupils to take part in activities which were difficult to arrange during normal physical education periods.

Primary Schools. The programme of activity carried out in the primary schools maintained the pattern established during the last few years. The children responded well to modern teaching methods, good use being made of the facilities and apparatus. Imagination, initiative and physical achievement were

developed to a high standard and, generally, good progress was made. The completion of the remodelling at Edward Primary Junior School and the acquisition of a new hall at South Parade Primary Junior School resulted in a further improvement in the provision for the indoor physical education lesson. Both of these school halls were equipped with a new type of climbing apparatus which proved to be very satisfactory.

On the opening of the Grange Primary Infants' School there was a decrease in the number of children attending Yarborough Primary Infants' School and Worsley Primary Infants' School which enabled their halls to be used again for physical activities after a long period of use as temporary classrooms.

Most schools took part in the B.B.C. "Music and Movement" lessons broadcast throughout the year.

As in previous years, a full programme of competitive sport was undertaken, some on the traditional league and knock-out principle and others on a "friendly-fixture" basis.

For the first time, a swimming competition was arranged for junior schools. This was held at the Orwell Baths and proved to be a successful new venture. Run on non-championship lines, over 200 competitors took part.

During the summer, the Country Dance Party for junior schools was again held on the quadrangle at Nunsthorpe Primary Girls' School. In addition to the usual programme of national dances, a special feature of Maypole dancing was included. This added colour and interest to the entertainment. Nine teams comprising approximately 150 children took part.

Junior school netball continued to prove a very popular winter game for girls, the culmination of this game being the annual Junior School Netball Competition. As usual, this was held on one evening at Clee Fields. Seventeen teams played in three sections, the winners were Little Coates Primary Junior School and runners-up, Western Primary Junior "A" team. The Junior Netball League Competition resulted in Little Coates Primary Junior School team winning Division I, Western Primary Junior "B" team winning Division 2 (Western Section), and Holme Hill Primary Junior and Edward Primary Junior Schools being joint winners of Division 2 (Eastern Section).

Nineteen primary school football teams played regularly in the three junior school leagues. Little Coates Primary Junior School won Division 2 (West) competition, but our Cleethorpes neighbours, Bursar Street and Reynolds Street Junior Schools took the honours in Division 1 and 2 (East). The Asher Cup was won by Little Coates Primary Junior School.

The Primary Schools Athletics Competition was held on a cold and windy day on Clee Fields: these conditions adversely affected the competitors and no new records were established. It was necessary to hold two heats' evenings to eliminate the 500 finalists from the 1,350 children who had entered. Fifteen

Grimsby schools and 4 Cleethorpes schools took part. Nunsthorpe Primary Boys' and Primary Girls' schools won the two sections of the competition for larger schools and Macaulay Primary Junior and Reynolds Street Primary Junior School (Cleethorpes) won the two sections for smaller schools.

Friendly fixtures for cricket were arranged by several schools, the new grass playing areas now at some of these schools being well used for this purpose.

The older pupils in some schools were given instructions in the skills of hockey and tennis so that a basis of these games could be established before proceeding to the secondary schools.

Secondary Schools. Many developments took place in the physical education curriculum taken in the secondary schools during the year and it was in many respects an excellent year. This was made possible, in part, by the more favourable position regarding the staffing of the schools with specialist teachers of physical education, and also in the use made of facilities of the schools. The cumulative improvements and additions made to these facilities during the recent years, together with the gradual development in the new schools' building programme provided adequate scope for expansion. A notable feature was the increase in activity taken after school hours. In addition to the competitive sports programmes for boys and girls which were arranged by school organisations and in which many hundreds of children participated, there were many activities held for the less apt or skilful pupils. The competitive element, being small or non-existent resulted in many children "playing the game for the game's sake"—a most welcome feature. These activities included dancing, ballet, badminton, table tennis, archery, sailing, six-a-side soccer, swimming, tennis, weight training and circuit training. Most of these were held on a school club basis and took place at lunch time, after afternoon school, in the evenings, on Saturdays and occasionally during the school holidays. These activities would not have been held but for the enthusiasm of the teachers, all of whom gave up many hours of their own time in the interest of their pupils.

There is still much scope for an increase in this work, particularly in the older schools. The inadequate and sub-standard facilities at the Armstrong, Harold, Havelock and Welholme Schools created difficulties, problems and frustrations for pupils and staff, and one can only look to the future as patiently as possible to the time when pupils of these schools will be able to take part in a fuller and less restricted programme of physical activity.

St Mary's R.C. Secondary School regained the use of its gymnasium after many years use as a classroom, otherwise there were no additions to the indoor facilities of the schools.

Period taken in the gymnasium or hall maintained a variety of work and purpose. Lessons involving the use of portable and fixed apparatus were used to challenge the skill, courage and initiative of both boys and girls. The gymnasium also served as a training ground for the practice and development

of skills needed for games and activities, many of which were subsequently played indoors or on the playing fields as part of the general scheme of work.

Regular inspection of apparatus and equipment was carried out in all schools and repairs were effected when necessary.

Weather conditions during the summer did not favour athletic achievements but all schools managed to hold their sports days and many of these sent teams to compete in the Secondary School Athletics Championships held on Clee Fields. In an exciting competition, Clee Grammar School won the Boys' Championship and Havelock School won the Girls' Championship.

A new Athletics Championship Meeting was inaugurated early in the summer term. This was held mainly to select the Borough's representatives for the County Sports Meeting. Subsequently, in these championships held at Scunthorpe, our teams put up only a moderate performance, but two pupils were selected for the national event.

As usual, an extensive programme of competitive sport was arranged for other games. This usually developed, through the House system, to competitions played on a league or knock-out basis. Many schools ran 4 or 5 teams, thus enabling a higher proportion of the more skilful players to take part in the competition each time. Played in conjunction with the Cleethorpes schools, 40 teams in 4 leagues, competed in the football competitions held during the two winter terms. A full programme of soccer was also arranged for those schools competing in the Lincolnshire Grammar Schools Competition. The annual six-a-side soccer competition was held at Hereford Avenue, Chelmsford Secondary Boys' School being the winners.

Rugby football continued to increase in popularity and several schools now include this as an alternative game to soccer.

Cross-country running formed part of the winter programme for boys. This popular sport progressed from training runs to school competitions, with selected school teams competing against each other at the annual inter-school event. Held at Weelsby Woods, Beacon Hill School (Cleethorpes) were the team winners for the second year running. A Junior Team for under fifteens representing the Borough competed in the County event held at Lincoln and were placed 5th. Special mention should be made of the dedication shown to this sport by teams from Wintringham Boys' Grammar School. Under the supervision of Mr. Taylor, himself a first-rate performer, these runners engaged in weight and circuit training sessions after school and covered up to 30 miles in training runs each week, including sessions on Sundays taken in the Wolds. Competing mainly in senior events, this team ran with distinction in many parts of the county.

The weather conditions during the summer adversely affected the standard of cricket, but many enjoyable games were played. Seven schools took part in the league competition and 9 teams entered for the Joe Cooper Knock-out Competition in which Chelmsford Secondary Boys' School beat St. James' School.

Following the provision of basket-ball equipment to several schools, this game quickly developed and soon took a major place in the indoor activity of schools with suitable accommodation. Progress was such that a full competitive programme was planned for 1963.

Netball maintained its place as the most played winter game for girls. The standard of play continued to rise and a faster and more open game resulted as skill in applying the revised rules developed. Armstrong Secondary Girls' team, who had such a wonderful record during the first half of the netball season (September—December, 1961) continued to maintain their form in the second half (January—March, 1962). They finished as undefeated champions of the senior league. In the current half-year's competition, both senior and junior teams are undefeated. In March they reached the final of the East Midlands League Netball Tournament held at Nottingham and lost by only one goal, the scores being 4—3. Other schools which showed outstanding standards of play were those of Western Secondary Girls' School and Wintringham Girls' Grammar School. In the County Tournament held at Lincoln, the Western Secondary Girls' under thirteen years team were convincing winners by 15—2 and their 15A team were runners-up, losing 8—7. In a similar competition, held at Grimsby, the Wintringham Girls' Grammar School won the senior section.

The better facilities now available for playing hockey resulted in more play of a higher standard taking place. Many more girls equipped themselves with hockey boots and suitable clothing, but weather conditions frequently restricted games or made it undesirable to attempt to play for all except those suitably attired. A competitive programme was held against school teams from the district and from towns in North Lincolnshire, whilst the Wintringham Girls' Grammar School teams also competed in the North Lincolnshire Hockey Tournament.

Tennis, athletics and rounders formed the main summer activities for girls. Of the three, tennis showed the greater increase and continued to grow in popularity. The restriction in the facilities available for playing this game still remains the major problem. The introduction of new athletic events for girls brought further interest and training into their athletics programme. It may be several years before a good standard is reached, but a start has been made and the girls worked hard at the techniques.

Carnforth Special School carried out an active programme during the year, competing in a series of games against other teams from local schools. The St. Hugh's Special School, Scunthorpe visited Grimsby and took part in a potted-sport athletics competition, 36 pupils from each school taking part.

College of Further Education. For several years it had been difficult to arrange for suitable and adequate activity for students attending the College of Further Education. This position changed in September when the sports hall was completed and opened for use. It quickly became a popular centre of

activity and it is evident that this branch of the College will develop and may well become an impressive centre of sport and recreation for North Lincolnshire.

Appointments of man and woman specialist physical education teachers were made, the male teacher taking up his duties on the opening of the sports hall, to be followed in January, 1963 by his woman colleague. The inclusion of this new branch of the College work took place smoothly, and soon began to establish itself as an integral part of College life. It is early days yet, but there were encouraging signs that development in this branch will be swift.

The remainder of the playing field has now been completed and should be in full use in 1963. It is expected that the hard tennis courts will also be completed during 1963 enabling a wider choice of times for use by students, who hitherto have used courts at Barrett Recreation Ground.

Several members of staff from other branches of the College assisted in running games and, together with representatives of the Students Union, teams were formed for soccer, cricket, hockey and netball. These took part in local leagues or on a "friendly-fixture" basis.

School Camp Humberston. The camp for schools was again held at the Y.M.C.A. premises at Humberston. Several improvements had taken place since the previous year, the provision of hot running water in the ablutions and extension of electric lighting in the camp being particularly welcomed. Poor weather prevented maximum benefit being obtained, but grumbles were few and many children obtained experience of living a communal life in rural surroundings. Approximately 400 children in groups of up to 50 attended each week from Yarborough Primary Girls', Weelsby Primary Boys', St. John's Voluntary Primary Junior, Macaulay Primary Junior, Edward Primary Junior, Western Primary Junior, Strand Primary Junior, Nunsthorpe Primary Boys', South Parade Primary Junior, Harold Secondary Boys' and Western Secondary Boys' Schools.

It was no mean task to be responsible for children throughout the week and thanks should be given to the teachers in charge and to others who helped in various ways in making the camp a worth-while and beneficial venture.

Swimming. As usual, the facilities at the Orwell and Eleanor Street Baths were well used by schools. There were few regrets at the permanent closing of the Orwell Bath in December. For many years it had served a purpose very different from its original intention, but in spite of its defects many Grimsby children and parents will look back with thanks to the day when they learned to swim in "the Orwell's".

Once again the year's results in swimming were good. Two thousand, four hundred and sixty-six children's names were included in the swimming registers. A total number of children able to swim was 2,070 and of this number 1,423 learned to swim during the year.

Seven hundred 1st grade, 285 2nd grade and 43 3rd grade badges were awarded. Twenty awards were made for successes in the advanced tests set by the English Schools' Swimming Association.

In addition to the primary schools' competition, three swimming galas were held during the year at the Orwell Baths. A noteworthy achievement was that of Harold Secondary Boys' School, who won every trophy open to them.

In the County Swimming Gala held at Scunthorpe, the Grimsby team won the two trophies for the highest aggregate of points for boys and girls. Five pupils also represented Lincolnshire in a competition held at Dewsbury against the Yorkshire team.

Playing Fields. Further progress was made in a provision of new playing fields and in improving the playing surfaces of others. Work which commenced the previous year at Western Secondary Boys' School, Scartho Primary Junior School and the College of Further Education was completed, and bituturf pitches or batting areas were put down on the Havelock, Welholme and Chelmsford Secondary Boys' Schools. Work started on the additional land opposite to the Harold Schools and when completed, will provide a useful addition to the limited facilities available for these schools.

As previously foreshadowed, the area of land used at Hereford Avenue for many years by schools and youth organisations ceased to be used in this capacity in September owing to building progress for the new school. Other arrangements were made for teams who previously used this area.

Teachers' Courses. During the spring term a basketball course attended by eleven men teachers in secondary schools, was held at Chelmsford Secondary Boys' School.

Teachers from primary schools attended a series of lessons showing infants at work during physical education periods, 48 attended at Hilda Infants' School, 62 at Old Clee Infants' School and 69 at Macaulay Infants' School during the summer term.

A short demonstration and course of instruction was given over a period of several weeks on the latest method of artificial respiration. Using the Borough's model "Resusci-Anne", several hundred teachers and auxilliary staff obtained realistic experience of this effective and simple method of life-saving. In some schools, similar demonstrations and practice were given to pupils.

During the autumn term, a short course on the teaching of hockey was held at Cleethorpes by Lindsey Education Authority. Eight women teachers from Grimsby schools attended by invitation.

Conclusion. I would like to thank the Director of Education and the Medical Officer of Health and their staffs, whose advice and assistance have always been readily available.

I would also like to thank those teachers who helped at the school camp, trained teams and refereed matches and who gave their time to running clubs and other out-of-school activities. I am also grateful to the Grimsby, Cleethorpes and District School Sports Association for the extensive sports programmes arranged throughout the year.

**PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS
(Including Nursery and Special Schools)**

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1958 and later	195	195	100	—	—
1957	903	903	100	—	—
1956	363	363	100	—	—
1955	18	18	100	—	—
1954	9	9	100	—	—
1953	55	55	100	—	—
1952	50	50	100	—	—
1951	1,015	1,015	100	—	—
1950	492	492	100	—	—
1949	15	15	100	—	—
1948	57	57	100	—	—
1947 and earlier	1,691	1,691	100	—	—
TOTAL	4,863	4,863	100	—	—

TABLE A. (continued)—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth)	For defective vision (excluding squint) (7)	For any of the other conditions recorded in Part II (8)	Total individual pupils (9)
1958 and later	3	23	23
1957	2	181	169
1956	1	74	71
1955	—	3	3
1954	—	1	1
1953	1	14	15
1952	2	11	12
1951	41	134	168
1950	25	58	76
1949	1	1	2
1948	2	9	9
1947 and earlier	61	150	200
TOTAL	139	659	749

TABLE B.—OTHER INSPECTIONS

Number of Special Inspections ...	29
Number of Re-inspections ...	2
TOTAL ...	31

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ...	37,461
(b) Total number of individual pupils found to be infested ...	581
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ...	116
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ...	41

PART II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

TABLE A.—PERIODIC INSPECTIONS

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS							
		ENTRANTS		LEAVERS		OTHERS		TOTAL	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4	Skin ...	4	40	7	44	30	70	41	154
5	Eyes—								
	a. Vision ...	4	19	63	289	72	206	139	514
	b. Squint	6	35	1	29	6	77	13	141
	c. Other ...	1	6	1	9	2	12	4	27
6	Ears—								
	a. Hearing	—	4	1	14	2	8	3	26
	b. Otitis								
	Media	2	14	1	14	1	18	4	46
	c. Other ...	—	3	—	2	2	7	2	12
7	Nose and								
	Throat	6	111	—	33	3	83	9	227
8	Speech ...	—	20	—	15	—	32	—	67
9	Lymphatic								
	Glands	1	24	—	1	1	10	2	35
10	Heart ...	2	11	1	26	1	22	4	59
11	Lungs ...	2	19	—	27	—	30	2	76
12	Develop- mental—								
	a. Hernia...	4	4	—	1	—	2	4	7
	b. Other ...	1	36	—	21	—	71	1	128
13	Orthopaedic								
	a. Posture	—	2	—	7	—	7	—	16
	b. Feet ...	9	11	2	21	2	28	13	60
	c. Other ...	10	48	3	62	5	81	18	191
14	Nervous System—								
	a. Epilepsy	1	1	—	7	—	12	1	20
	b. Other ...	—	5	1	7	—	9	1	21
15	Psychological								
	a. Develop- ment ...	1	4	—	2	—	53	1	59
	b. Stability	3	38	2	7	5	144	10	189
16	Abdomen ...	—	4	—	3	1	5	1	12
17	Other ...	1	1	—	2	—	2	1	5

TABLE B.—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin	24	—
5	Eyes— <i>a.</i> Vision	16	—
	<i>b.</i> Squint	1	—
	<i>c.</i> Other	5	—
6	Ears— <i>a.</i> Hearing	—	—
	<i>b.</i> Otitis Media	—	—
	<i>c.</i> Other	—	—
7	Nose and Throat	2	2
8	Speech	—	3
9	Lymphatic Glands	—	—
10	Heart	3	1
11	Lungs	—	—
12	Developmental—		
	<i>a.</i> Hernia... ..	—	1
	<i>b.</i> Other	—	1
13	Orthopaedic—		
	<i>a.</i> Posture	—	—
	<i>b.</i> Feet	4	1
	<i>c.</i> Other	—	2
14	Nervous system		
	<i>a.</i> Epilepsy	—	—
	<i>b.</i> Other	3	1
15	Psychological—		
	<i>a.</i> Development	—	—
	<i>b.</i> Stability	—	—
16	Abdomen	—	—
17	Other	—	—

**PART III—TREATMENT OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY
AND SPECIAL SCHOOLS)**

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	4
Errors of refraction (including squint)	2,424
Total	2,428
Number of pupils for whom spectacles were pres- cribed	1,867

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	11
(b) for adenoids and chronic tonsillitis	312
(c) for other nose and throat conditions	10
Received other forms of treatment	18
Total	351
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1962	—
(b) in previous years	2

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients depart- ments	222
(b) Pupils treated at school for postural defects	—
Total	222

TABLE D.—DISEASES OF THE SKIN
(excluding uncleanness, for which see Table C of Part 1)

	Number of cases known to have been treated					
Ringworm—(a) Scalp	—					
(b) Body	—					
Scabies	8					
Impetigo	11					
Other skin diseases	9					
Total						28

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated	
Pupils treated at Child Guidance Clinics	427	

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated	
Pupils treated by speech therapists	No figures available	

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with	
(a) Pupils with minor ailments	135	
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	—	
(c) Pupils who received B.C.G. vaccination ...	1,091	
(d) Other than (a), (b) and (c) above.		
Please specify :		
1—Respiratory System	9	
2—Cardio-Vascular System	8	
3—Alimentary System	106	
4—Central Nervous System	5	
5—Genito-Urinary System	16	
6—Other conditions not speci- fied.	18	
Total (a)—(d)		1,388

**PART IV—DENTAL INSPECTION AND TREATMENT
CARRIED OUT BY THE AUTHORITY DURING
THE YEAR ENDED 31st DECEMBER, 1962.**

(a) Dental and Orthodontic work.

1. Number of pupils inspected by the Authority's Dental Officers—				
1. At Periodic Inspection	...	...	...	1,686
2. As Specials	...	...	...	2,508
			Total (1)	4,194

2. Number found to require treatment	...	3,310
3. Number offered treatment	...	3,310
4. Number actually treated	...	2,584

(b) Dental work (other than orthodontics) NOTE : Figures relating to orthodontics should not be included in Section (b)

1. Number of attendances made by pupils for treatment, <i>excluding</i> those recorded at (c) 1 below	...	6,117
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2. Half-days devoted to :		
1. Periodic (School) Inspection	...	13
2. Treatment	...	1,039
	Total (2)	1,052

3. Fillings :		
1. Permanent Teeth	...	2,760
2. Temporary Teeth	...	90
	Total (3)	2,850

4. Number of teeth filled :		
1. Permanent Teeth	...	2,164
2. Temporary Teeth	...	90
	Total (4)	2,254

5. Extractions :		
1. Permanent Teeth	...	1,491
2. Temporary Teeth	...	2,413
	Total (5)	3,904

6. Administration of general anaesthetics for extraction	...	1,906
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7. Number of pupils supplied with artificial teeth	...	83
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8. Other operations :		
1. Permanent Teeth	...	3,074
2. Temporary Teeth	...	82
	Total (13)	3,156

(c) Orthodontics :

1. Number of attendances made by pupils for orthodontic treatment	...	874
2. Half days devoted to orthodontic treatment	...	85
3. Cases commenced during the year	...	55
4. Cases brought forward from previous year	...	150
5. Cases completed during the year	...	18
6. Cases discontinued during the year	...	6
7. Number of Pupils treated by means of appliances	...	50
8. Removable appliances fitted	...	92
9. Number of Fixed appliances fitted	...	3



