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COUNTY BOROUGH OF GRIMSBY

ANNUAL REPORT

OF THE

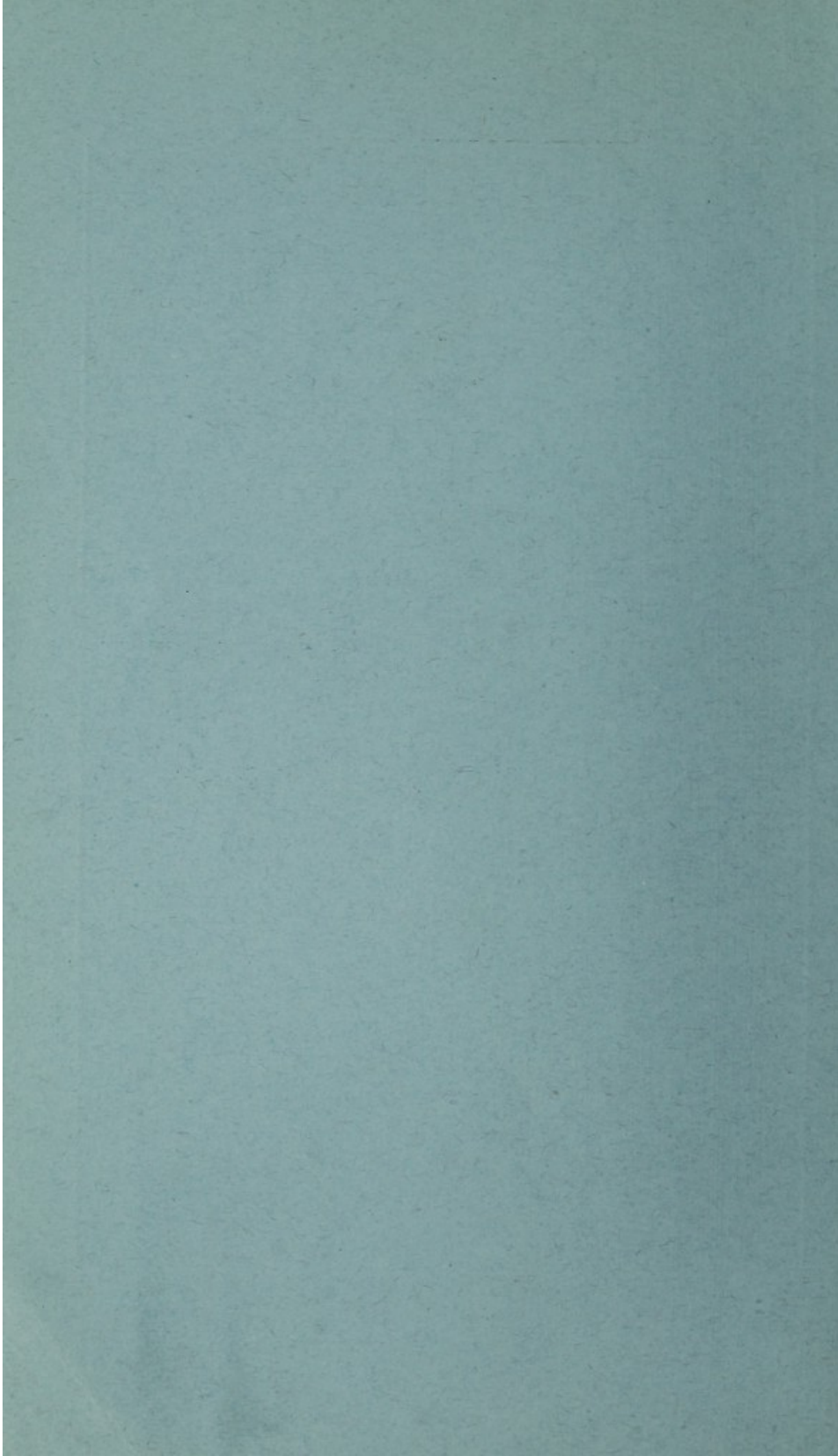
Medical Officer of Health

FOR THE YEAR

1965

INCLUDING REPORT ON THE

SCHOOL HEALTH SERVICE





COUNTY BOROUGH OF GRIMSBY

ANNUAL REPORT

OF THE

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FOR THE YEAR

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SCHOOL HEALTH SERVICE

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GRIMSBY COUNTY BOROUGH HEALTH COMMITTEE

(as constituted on 31st December, 1965)

The Worshipful the Mayor
(Alderman D. E. Petchell, C.B.E., J.P.)

Chairman

ALDERMAN F. G. GARDNER

Deputy Chairman

ALDERMAN E. W. MARSHALL

Aldermen

A. H. CHATTERIS

J. H. FRANKLIN

MRS. M. LARMOUR

Councillors

George R. Berrett

A. W. Kennington

Graham H. Berrett

Miss J. B. B. McLaren

A. Bradley

Mrs. L. Trayer

Mrs. F. E. Franklin, J.P.

Mrs. M. E. Tuxworth

L. Gostelow

J. A. Winn

I. C. Hanson

SUB-COMMITTEES OF THE HEALTH COMMITTEE

MENTAL HEALTH :—

COUNCILLOR MRS. FRANKLIN (*Chairman*); ALDERMAN MRS. LARMOUR (*Deputy-Chairman*); ALDERMEN CHATTERIS, GARDNER AND MARSHALL; COUNCILLORS G. R. BERRETT, BRADLEY, GOSTELOW, MRS. TRAYER AND MRS. TUXWORTH.

Co-opted Members:—MRS. M. CRESSWELL AND MR. S. MOSS.

PERSONAL HEALTH :—

ALDERMAN MARSHALL (*Chairman*); COUNCILLOR MRS. TUXWORTH (*Deputy-Chairman*); ALDERMEN CHATTERIS, GARDNER AND MRS. LARMOUR; COUNCILLORS G. H. BERRETT, BRADLEY, MISS McLAREN, MRS. TRAYER AND WINN.

Co-opted Members:—MRS. M. CRESSWELL; MESSRS. A. LILES AND F. J. SHINNER; DR. T. BARROWMAN.

PUBLIC HEALTH :—

ALDERMAN GARDNER (*Chairman*); ALDERMAN MARSHALL (*Deputy-Chairman*); ALDERMAN MRS. LARMOUR; COUNCILLORS G. H. BERRETT, BRADLEY, MRS. FRANKLIN, GOSTELOW, KENNINGTON, MRS. TRAYER AND WINN.

Co-opted Members:—MESSRS. P. BARKER, A. CUCKSON, T. HUNT, AND P. WILLING.

STAFF OF THE HEALTH DEPARTMENT, 1965.

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. (to 11.12.65)

ASSISTANT MEDICAL OFFICERS OF HEALTH AND SCHOOL MEDICAL OFFICERS

J. G. J. COGHILL, M.B., Ch.B. (retired 31.10.65)

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

MARGARET F. SMITH, M.B., Ch.B.

J. BUCKINGHAM, M.B., Ch.B. (from 1.11.65)

CHIEF PUBLIC HEALTH INSPECTOR.

HAROLD PARKINSON, 1, 2.

PUBLIC HEALTH INSPECTORS

A. MANSON, 1, 2. (<i>Deputy Chief Inspector</i>)	A. H. Bellamy (<i>Authorised Meat Inspector</i>)
W. W. REED, 1, 2. (<i>Senior Inspector</i>)	(from 1.5.65)
S. MASTIN, 1, 2.	M. HUTCHINSON (Pupil)
J. HUFFORD, 1, 2. (to 10.1.65)	L. SAUNBY (Pupil)
C. R. WILSON, 1, 2, 3. (to 31.12.65)	T. H. R. JOHNSON (<i>Drainage Assistant</i>)
L. KIRBY, 1, 2.	E. A. MILLER (<i>Technical Assistant</i>) (to 17.7.65)
B. HAGUE, 1, 2. (to 30.10.65)	R. W. CRAMPTON (<i>Technical Assistant</i>) (from
D. ANDERSON (<i>Authorised Meat Inspector</i>)	12.4.65)
	M. J. DAVIE (<i>Pupil and Technical Assistant</i>)
	(from 1.9.65)

HEALTH VISITORS

MRS. I. HALDANE, 4, 5, 6. *Superintendent.*

MISS I. R. ADAMSON, 4, 5, 6.	MISS H. C. NUNNS, 4, 5, 6.
MISS M. C. BAGG, 4, 5, 6.	MISS K. L. SPENCER, 4, 5, 6.
MISS J. BELL, 4, 5, 6.	MRS. I. M. STOREY, 4, 5, 6.
MISS H. BRAGG, 4, 5, 6.	MISS E. M. TIPPLER, 4, 5, 6.
MRS. M. DAWSON, 4, 5, 6.	MISS J. D. M. VARRIE, 4, 5, 6.
MRS. M. B. KOZLOWSKI, 4, 5, 6.	MISS E. M. WEBSTER, 4, 5, 6.

TUBERCULOSIS VISITORS

MISS D. ATKIN, 4, 5, 6.

MRS. M. E. POUT, 4*

CLINIC NURSES

MRS. M. COLEMAN, 4. (to 1.1.65)	MRS. A. FLEMING (from 3.5.65)
MRS. I. D. MILLS, 4, 5. (to 13.11.65)	MRS. E. J. GUILLIATT, 4. (from 6.12.65)

HOME NURSING SERVICE

MISS F. ENGLEDDOW, 4, 5, 6. *Superintendent,*
and staff of 16 nurses and 1 part-time bathing attendant.

MUNICIPAL MIDWIVES

MISS F. ENGLEDDOW, *Non-Medical Supervisor.*

MISS E. BAXTER, 4, 5.	MRS. K. G. GILMOUR, 4, 5.
MISS G. A. BAXTER, 4, 5.	MRS. M. JOHNSON, 4, 5.
MRS. C. BEDFORD, 4, 5.	MISS J. ORREY, 4, 5.
MRS. C. E. CALTHORPE, 4, 5.	MRS. D. M. STEPHENSON, 4, 5.
MISS C. CULLUM, 4, 5.	MRS. C. WESTACOTT, 4, 5.
MISS H. M. FAWCETT, 4, 5.	MRS. J. YEOMANS, 5.

MENTAL WELFARE OFFICERS

MISS E. M. WOULD, *Chief*.
 G. W. A. MACKENZIE (to 1.2.65)
 L. C. RACKHAM
 MRS. J. V. STRINGER
 E. H. NUTTER (from 3.5.65)

MRS. M. TWIDALE*
 MRS. C. M. A. PRESTON*
 E. M. P. FRANKLIN (to 24.9.65)
 MISS J. C. FRIDLINGTON* (*Trainee*) (from 29.11.65)
 E. TILLING (*Instructor*)

JUNIOR TRAINING CENTRE

MISS E. PATERSON, *Supervisor*.
 MISS H. M. BARKER
 MRS. P. BERRY* (to 31.7.65)
 MRS. J. M. BRYANT

MRS. A. E. GORRINGE
 MISS J. LAURENCE
 MRS. C. M. WARD (from 1.8.65)
 MRS. A. Y. WESTWOOD

AMBULANCE SERVICE

E. BROWN, Ambulance Officer (retired 31.10.65)
 J. A. WHITE, Ambulance Officer (from 1.10.65) and staff of 32.

DOMESTIC HELP

MISS L. BLACKBURN (*Organiser*)
 MRS. H. KIRK (*Deputy Organiser*) (from 1.4.65)

SOCIAL WORKER

MRS. M. PENDLEBURY

CLERICAL STAFF

W. R. GALE, *Chief Clerk*
 D. AMERY
 P. T. KITCHING
 MRS. J. E. KNIGHT (to 2.3.65)

MISS A. ROBINSON (from 8.3.65)
 MRS. B. C. DARNILL
 MRS. S. TEANBY (to 30.9.65)
 MISS L. LEAK (from 8.11.65)

Public Health Inspector's Sub-Department

S. NASH
 MISS M. BRYSON

MISS S. C. BARBER
 MISS E. SMITH

Maternal and Child Welfare Service.

MRS. J. A. POTTER
 MISS S. WILLING
 MRS. R. EARLEY
 MRS. I. SMITH

MRS. E. DUMLOW*
 MRS. M. D. RUDD*
 MISS W. F. MOODY

Mental Health Service.

MISS L. E. HUTSON (to 10.7.65)
 MISS E. M. ROEBUCK (to 31.1.65)

MRS. M. K. FOSTER (from 18.1.65)
 MISS C. OWEN (from 12.7.65)

Domestic Help Service.

MRS. S. M. BANKS

MRS. A. M. DADD

Ambulance Service.

MRS. P. BEALEY

Home Nursing Service.

MRS. G. C. HILL

* Part-time appointment.

1. Public Health Inspector's Certificate.
2. Meat Inspector's Certificate.
3. Smoke Inspector's Certificate.
4. State Registered Nurse.
5. State Certified Midwife.
6. 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 County Borough for 1965.

The vital statistics indicate a satisfactory state of affairs with the birth rate, although less than the very high figure of last year, still above the national average. The death rate was slightly below that for England and Wales.

Once more, the Registrar General's estimate of the population shows a decrease of 150 despite an excess of 748 births over the number of deaths. This steady loss of population to the surrounding districts has been occurring for several years.

The infant mortality was slightly higher than 1964, but still well below the national average. A raised perinatal rate also indicates that all our midwifery services must maintain their efforts to reduce the stillbirth rate.

There were no deaths due to infectious diseases excepting three from tuberculosis. The notifications of new cases of tuberculosis showed an increase and although half of this was accounted for in one family, it is too soon to feel complacent. No cases died that were not previously known, which indicates that the Chest Clinic is still doing a good follow up of all contacts.

Deaths from all forms of cancer were slightly above the national average. The lung type is still increasing and is a little above the average for England and Wales. The smoking habits of the citizens do not seem to alter much.

There were no serious epidemics during the year and the influenza which spread over the country did not affect Grimsby as much as some other towns.

The most depressing figures are those from the Special Treatment Clinic which unhappily indicate a sharp increase in gonorrhoea. There is no evidence that this increase is among teenagers, but would appear to be the usual type of patient found in ports.

During the year a Consultant Geriatrician was appointed, and there has been an increase in chronic sick accommodation. This has meant an improvement in the waiting period for the worst cases, but it will be seen from the home nursing figures that the number being nursed at home has risen. A most noteworthy feature has been the establishment by the local health authority of a special laundry for the washing and drying of foul linen. A van has also been provided for the collection and delivery of same. This is a great help in several homes where there is a doubly incontinent patient, or where amenities are poor.

There were more than the usual staff changes and mention must be made of Dr. Coghill, Senior School Medical Officer, and Mr. Brown, Ambulance Officer since 1946. Dr. Coghill joined us fifteen years ago and has retired after two extended years service. Mr. Brown played a large part in building up the present ambulance service, and we wish them both a long and happy retirement.

The Deputy Medical Officer of Health (Dr. Moore) left to take up a similar post in Hull. Both the medical posts were only filled after considerable difficulty and many advertisements.

The Mental Health Section has had another busy year, and the number receiving after-care means a very heavy case load. Fewer patients are removed under certificate, but there was an increase in attempted suicides. The latter need intensive follow up as it is difficult to know how serious the attempt might be.

It is disappointing to have to record that this Authority has not seen fit to accept the Minister's advice about increasing the amount of fluoride in the local water supply to the desired amount. Meantime, the distressing state of children's teeth is a blot on our health service and there is little likelihood of any increase in dental officers. One has to admit that the false alarms put about by those opposed to the scheme have so far outweighed the best medical evidence that has ever been produced on any aspect of preventive medicine.

The co-operation from all other departments and other sections of the community is greatly appreciated.

It is gratifying to pay tribute to the help and guidance given by all the local authority committees in dealing with health matters. This, with a loyal and willing staff, makes life more pleasant and gives the ratepayer a better service.

R. GLENN,
Medical Officer of Health.

HEALTH DEPARTMENT,
1 Bargate, Grimsby.
May, 1966.

PART I.—STATISTICS AND SOCIAL CONDITIONS.

Table 1.—Vital Statistics of the whole Borough during 1965 and previous Years.

YEAR	Total Popula- tion estimated to middle of each year 2	Births		Total Deaths Registered in the District		Transferable Deaths		Nett Deaths belonging to the District				
		Un- corrected Number 3	Nett		Number 6	Rate 7	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 4	Rate 5					Number 10	Rate per 1,000 Nett Births 11	Number 12	Rate 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
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
1963	96,350	2017	1939	20.1	1284	13.3	308	101	37	19.1	1077	11.2
1964	95,300	2037	1960	20.5	1280	13.4	293	112	30	15.3	1099	11.5
1965	95,150	1890	1834	19.3	1283	13.5	297	100	31	16.9	1086	11.4

Population at Census of 1951

94,557

...

Population at Census of 1961

...

96,665

SUMMARY OF STATISTICS.

Area (in acres)—excluding foreshore	5,963
Registrar General's estimate of population, mid-1965	95,150
No. of inhabited houses (end of 1965) according to Rate Books ..	29,720
Rateable value at 1st April, 1965	£3,533,972
Sum represented by a penny rate product, 1965/66	£14,319

Live births :—	Males	Females	Total
Legitimate	815	821	1,636
Illegitimate	98	100	198
	<hr/>	<hr/>	<hr/>
	913	921	1,834
	<hr/>	<hr/>	<hr/>

Live birth rate per 1,000 population	19.3
Adjusted live birth rate (area comparability factor 1.02)	19.6
Illegitimate live births (per cent. of total live births)	10.8

Stillbirths :—			
Legitimate	18	10	28
Illegitimate	2	2	4
	<hr/>	<hr/>	<hr/>
	20	12	32
	<hr/>	<hr/>	<hr/>

Stillbirths rate per 1,000 total live and still births	17.1
Total live and still births	1,866

Infant deaths :—			
Legitimate	15	13	28
Illegitimate	2	1	3
	<hr/>	<hr/>	<hr/>
	17	14	31
	<hr/>	<hr/>	<hr/>

Infant mortality rates :—

Total infant deaths per 1,000 total live births	16.9
Legitimate infant deaths per 1,000 legitimate live births ..	17.1
Illegitimate infant deaths per 1,000 illegitimate live births ..	15.1
Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births)	13.1
Early Neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	11.4
Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births)	28.4

Maternal mortality (including abortion) :—

Number of deaths	—
Deaths (Males 577; Females 509)	1,086
Death rate	11.4
Adjusted death rate (area comparability factor 1.08)	12.3

								<i>Number</i>	<i>Rate</i>
Deaths from measles	..	..	..	..	..	..	..	—	—
" " whooping cough	..	..	..	..	..	..	..	—	—
" " diphtheria..	..	..	..	..	..	..	..	—	—
" " respiratory tuberculosis	..	..	..	..	..	..	3	0.03	
" " other tuberculosis diseases	..	..	..	..	..	..	—	—
Total tuberculosis deaths	..	..	..	..	..	..	3	0.03	
Deaths from cancer	..	..	..	..	..	..	216	2.27	
" " influenza	..	..	..	..	..	..	—	—

Population.—(Table 1, page 10). The Registrar General estimated the home population of Grimsby County Borough at mid-year 1965 to be 95,150, which is 150 less than his estimate for the previous year. The natural increase of the population, i.e., the excess of live births over deaths, was 748.

Births.—(Table 1, page 10). The number of live births registered was 1,834 (913 males and 921 females), giving a birth rate of 19.3 per thousand of the population, compared with 18.0 for England and Wales.

The following table records the birth rates for Grimsby for the last decennium, compared with those for England and Wales:—

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
England and Wales	15.6	16.1	16.4	16.5	17.1	17.4	18.0	18.1	18.4	18.0
Grimsby	18.7	19.2	18.9	19.1	19.6	20.6	21.0	20.1	20.5	19.3

The adjusted birth rate for Grimsby County Borough (calculated by multiplying the crude rate by the Registrar General's area comparability factor of 1.02) was 19.6.

One hundred and ninety-eight (10.8 per cent) of the live births were illegitimate, the illegitimacy rate being 108 per thousand live births, compared with 92 for the previous year.

Stillbirths.—There were 32 stillbirths registered, which gives a rate of 0.33 per thousand of the population. The rate expressed per thousand total live and still births was 17.1; for England and Wales it was 15.7.

Deaths.—(Tables 1 and 2, pages 10 & 14). Deaths of Grimsby residents^s totalled 1,086 (577 males and 509 females), equal to a death rate of 11.4, compared with 11.5 for England and Wales.

Table 2 records the causes of death in age periods compiled from figures supplied from the Registrar General while the following gives the death rates for Grimsby for the last decennium, compared with those for England and Wales:—

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
England and Wales	11.7	11.5	11.7	11.6	11.5	11.9	11.9	12.2	11.3	11.5
Grimsby	11.1	11.1	10.8	10.4	10.6	10.7	11.9	11.2	11.5	11.4

The adjusted death rate for Grimsby (calculated by multiplying the crude rate by the Registrar General's area comparability factor of 1.08) was 12.3.

The number of persons — residents and non-residents — who died in institutions in the borough totalled 668, equivalent to 52 per cent of the total deaths (1,283) registered. Last year the percentage was 55.

Six hundred and thirteen (56.5 per cent) of the deaths of Grimsby residents related to persons 70 years of age and upwards, compared with 640 and 58 per cent respectively in 1964, the numbers at age periods being:—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Between 70 and under 75 years	72	66	138
" 75 " " 80 " " " "	90	85	175
" 80 " " 85 " " " "	73	88	161
" 85 " " 90 " " " "	32	65	97
90 years and over	9	33	42

Infant Mortality.—(Table 3, page 15). There were 31 deaths under one year of age, giving an infant mortality rate of 16.9 per thousand live births; for England and Wales it was 19.0. The infant mortality rate per thousand legitimate live births was 17.1, and illegitimate live births 15.1.

Neo-Natal Mortality.—Twenty-four of the 31 deaths recorded above were of infants under four weeks, equivalent to a rate of 13.1 per thousand live births, compared with 13.0 for England and Wales.

The early neo-natal mortality rate (there were 21 deaths of infants under one week) was 11.4 per thousand live births.

Perinatal Mortality.—The perinatal mortality rate is the combined number of stillbirths and deaths of infants under one week expressed as a rate per thousand total live and still births.

In 1965 there were 32 stillbirths and 21 deaths in the first week of life, giving a perinatal mortality rate of 28.4; for England and Wales it was 26.9.

The following table gives a summary of the various infant mortality rates for the past ten years:—

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Infant Mortality	38.5	18.9	25.1	22.0	25.1	21.6	23.6	19.1	15.3	16.9
Neo-natal Mortality	25.1	11.9	17.5	13.4	15.2	14.6	13.3	11.3	9.7	13.1
Early Neo-natal Mortality	17.3	11.9	14.7	12.9	12.0	13.5	11.3	9.8	7.6	11.4
Perinatal Mortality	55.8	37.9	40.0	34.7	40.2	31.6	23.8	29.3	22.6	28.4
Stillbirth	39.1	26.3	25.5	22.1	28.5	18.2	12.6	19.7	15.0	17.1

Maternal Mortality.—There were no deaths of Grimsby residents from pregnancy, childbirth or abortion during the year.

Statement of Employment.—The Manager of the Ministry of Labour 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, 1965

(males 1,363; females 264) .. 1,627

Total live register in July, 1965

(males 853; females 148) .. 1,001

Total live register in December, 1965

(males 1,421; females 194) .. 1,615

These figures exclude severely disabled persons requiring employment under sheltered conditions, but include youth employment and temporarily stopped claimants.

Rainfall.—The total rainfall recorded during the year was 27.21 inches (17.70 in 1964), the heaviest fall being 0.89 inches on the 28th September.

Table 2.—Causes of and Ages at Death during the Year 1965
(as compiled from figures supplied by the Registrar General)

[illegible]

Table 3.—Infantile Mortality during the year 1965.

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	21	2	—	1	24	1	4	1	1	31
Other infective and parasitic diseases	—	—	—	—	—	—	1	—	—	1
Pneumonia	—	1	—	1	2	—	2	—	—	4
Other respiratory diseases	—	—	—	—	—	1	—	—	—	1
Other intestinal obstruction	—	—	—	—	—	—	1	—	—	1
Congenital malformation of heart	—	1	—	—	1	—	—	—	—	1
Congenital malformation of digestive system	1	—	—	—	1	—	—	—	—	1
Other congenital malformations	2	—	—	—	2	—	—	1	1	4
Injury at birth	4	—	—	—	4	—	—	—	—	4
Post-natal asphyxia and atelectasis	10	—	—	—	10	—	—	—	—	10
Immaturity without mention of disease	3	—	—	—	3	—	—	—	—	3
Lack of care	1	—	—	—	1	—	—	—	—	1
Totals	21	2	—	1	24	1	4	1	1	31

The age and sex distribution of the total cases of notifiable diseases (other than tuberculosis) reported during 1965 is set out in Table 4 on page 18.

The following table gives the number of cases of notifiable diseases, after correction of diagnosis, reported during each of the last ten years:—

†Notifiable as from 1st December, 1960. *Believed to be contracted abroad.

Deaths from infectious diseases over the same period were as follows:—

[illegible]

Whooping Cough.—Sixty-seven notifications (28 males and 39 females) were received, compared with 34 the previous year. One case was admitted to hospital.

Measles.—926 cases (467 males and 459 females) were reported, compared with 1,962 last year. Nine cases were treated in hospital, and there were no deaths.

Dysentery.—Notifications of this disease totalled 151 (66 males and 85 females) compared with 180 in 1964. Most of these were again due to *Shigella* Sonnei. Fourteen cases were treated in hospital and there were no deaths.

Acute Pneumonia.—Eighteen cases (16 of primary and 2 of influenzal pneumonia) were reported, one being treated in hospital. Forty-eight deaths were ascribed to all forms of pneumonia, giving a death rate of 0.50.

Acute Rheumatism.—The Acute Rheumatism Regulations require the notification of cases of acute rheumatism in persons under 16 years of age occurring in specified parts of England, and nine such cases relating to 3 boys and 6 girls were reported in the year under review.

Each case is finally referred to the Consultant Paediatrician for assessment and placing in the appropriate categories under a scheme devised by the Royal College of Physicians, and all the cases were thus confirmed.

Four children (1 male and 3 females) were classified as having rheumatic pains and/or arthritis without heart disease; two males rheumatic heart disease with polyarthritis; two females rheumatic heart disease with chorea; and one female rheumatic chorea alone.

Cases, Contacts or Carriers of Infectious Diseases.—A notice was sent to employers of 20 cases (7 males and 13 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 in accordance with Ministry of Health Circular 115/48 were issued to 36 contacts or carriers (14 males and 22 females) also engaged in the handling of food.

Table 4.—Cases of Infectious Diseases notified during the year 1965.

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	40	40	80	1	—	1	1	4	1	4	5	4	21	27	4	4	1	—	—	1	—	—	—	—	—	—	—	—	—	—
Whooping Cough	28	39	67	—	5	4	4	4	4	9	6	8	5	10	8	4	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	467	459	926	28	31	80	83	96	87	75	74	69	114	104	3	3	5	1	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	66	85	151	4	5	4	3	3	6	8	7	2	7	14	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Pneumonia	14	4	18	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Rheumatism	3	6	9	—	—	—	—	—	—	—	—	—	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox	174	124	298	4	3	10	7	13	11	18	14	11	97	69	8	2	3	5	1	1	2	1	—	3	—	—	—	—	—	—
Totals	792	757	1549	37	44	99	98	120	109	114	106	96	103	227	26	21	4	10	4	6	12	14	8	10	9	4	5	5	34	—

CANCER

Deaths due to cancer totalled 216 (128 males and 88 females), giving a local death rate from this cause of 2.27 compared with 2.22 for England and Wales. The rates for the previous year were 2.24 and 2.20 respectively.

The number of the above deaths ascribed to cancer of the lung and bronchus was 56 (53 males and 3 females), equal to a rate of 0.59 per thousand population for Grimsby; for England and Wales it was 0.55. The corresponding rates for 1964 were 0.53 respectively.

Other cancer death rate was 1.68 (England and Wales 1.67) compared with rates of 1.71 and 1.67 respectively for last year.

TUBERCULOSIS

Notifications.—(See tables below) — Notifications under the Public Health (Tuberculosis) Regulations, 1952 totalled 53, compared with 47 last year. A further 9 cases of tuberculosis already notified in other areas moved into the borough.

Deaths:—(See tables below) — The following shows the number of deaths and the death rate from tuberculosis per thousand of the population, compared with those for the previous year:—

	<i>Number</i>	<i>Grimsby Rate</i>	<i>England and Wales Rate</i>
Respiratory ..	3 (6)	0.03 (0.06)	0.042 (0.047)
Other forms ..	—(1)	— (0.01)	0.006 (0.006)
	<u>3 (7)</u>	<u>0.03 (0.07)</u>	<u>0.048 (0.053)</u>

No case died from tuberculosis which had not been previously notified.

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	—	—	—	—	—	—	—
1—2 years ...	—	—	—	—	—	—	—	—
2—5 years ...	2	4	—	—	—	—	—	—
5—10 years ...	3	3	—	—	—	—	—	—
10—15 years ...	2	1	—	—	—	—	—	—
15—20 years ...	1	1	—	—	—	—	—	—
20—25 years ...	1	—	—	1	—	—	—	—
25—35 years ...	4	1	—	1	—	—	—	—
35—45 years ...	3	4	1	1	—	—	—	—
45—55 years ...	7	1	—	—	—	1	—	—
55—65 years ...	7	—	—	1	1	—	—	—
65—75 years ...	1	—	1	—	1	—	—	—
75 and upwards	—	—	—	—	—	—	—	—
Totals ...	32	15	2	4	2	1	—	—

Tuberculosis.—Notifications and Deaths, 1956—1965.

Years	Notifications			Deaths		
	Pul-monary	Non-Pul-monary	Total	Pul-monary	Non-Pul-monary	Total
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
1963	34	12	46	5	3	8
1964	39	8	47	6	1	7
1965	47	6	53	3	—	3

Revision of Register.—The names of 86 notified persons were removed from the register during the year, these consisting of:—

Died	3
Left district	19
Recovered or Cured	50
Diagnosis not established	2
Died from causes other than tuberculosis	11
Not desiring further public medical treatment	1

Cases on register

	Males	Females	Total	
			1965	1964
Respiratory	404	292	696	678
Non-respiratory	19	38	57	62

Mass Radiography.—The Lincolnshire Mass Radiography Unit visited Grimsby during the month of August, and the following information is available:—

Miniature films taken	4,696
Recalled for large films	39
Referred to Chest Clinic	21
Cases of pulmonary tuberculosis requiring	
(a) close supervision or treatment	2
(b) occasional supervision	6
Bronchial Carcinoma	3

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 1965.

<i>New cases examined (excluding contacts):</i>					<i>Total</i>	
(a) Definitely tuberculous	..	..	..	38	}	.. .. 2,837
(b) Diagnosis not completed	..	..	..	80		
(c) Non-tuberculous	..	..	..	2,719		
<i>Contacts examined:</i>						
(a) Definitely tuberculous	..	..	..	16	}	.. .. 647
(b) Diagnosis not completed		..	..	32		
(c) Non-tuberculous	..	..	..	599		
Cases written off Clinic Register, including 3,398 non-tuberculous					..	3,483
<i>Cases on Clinic Register as at 31st December, 1965:</i>						
(a) Definitely tuberculous	..	..	..	758	}	.. .. 873
(b) Diagnosis not completed	..	..	..	115		
Total attendances at Clinic, including contacts					..	6,943
Consultations with medical practitioners					..	8,223
Home visits by nurses					..	3,320
X-ray examinations: —Radiographic film					..	5,133
—Fluorographic screen					..	5

The number of new diagnosed cases again showed a decrease as compared with 1964 and consisted of 32 pulmonary and 6 non-pulmonary patients. Perhaps the most heartening feature is that no child was diagnosed as a non-pulmonary case, either in those referred by private doctor, through contact examination or from other hospitals, clinics, etc.

The B.C.G. vaccination campaign has now been in existence for a number of years, and on the whole has been directed mainly to those under the age of 15 years so far as this clinic is concerned. It is felt that the results of this form of immunity are now apparent in the ever lessening number of new cases of the disease in this particular age group. New cases discovered are gratifyingly low in number, and those few that do occur were probably incubating the disease at the time of vaccination.

The number of deaths from tuberculosis was three respiratory, thus the exceptionally low figure in recent years has been maintained. This again 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	38	10	—
Bronchiectasis	2	2	—
Asthma	5	4	4
Unresolved Pneumonia	13	9	2
Non-tuberculous Effusions	4	3	—
Spontaneous Pneumothorax	1	1	—
Simple Tumours of Lung	1	—	—
Cystic Disease	—	1	—
Cardiac	14	9	—
Diaphragmatic Hernia	—	1	—
Sarcoidosis	—	1	—
Other Conditions	5	6	2
TOTALS	83	47	8

Generally speaking there has been little change in the recorded number of other conditions referred to in the above table.

Number of new cases referred to the Chest Clinic by general practitioners, institutions, clinics, etc., in recent years:—

<u>Year</u>	<u>Men</u>	<u>Women</u>	<u>Children</u>	<u>Total</u>
1961	845	1,581	316	2,742
1962	888	1,600	232	2,720
1963	914	1,640	229	2,783
1964	840	1,551	191	2,582
1965	869	1,735	233	2,837

Cancer.—The following are details of new cases diagnosed through the chest service in recent years:—

				<u>Males</u>	<u>Females</u>
1961	..	..	..	37	8
1962	..	..	..	50	4
1963	..	..	..	34	8
1964	..	..	..	34	3
1965	..	..	..	38	10

It is felt that the decreasing figure for this condition in recent years could not be maintained. It will be seen that there is a considerable increase of carcinoma of the lungs among females. This is in keeping with the national pattern and while the incidence of adeno-carcinoma is relatively common in the female this condition does not appear to be related to smoking. Some of the cases are undoubtedly due to increase in cigarette smoking among females in the 30's and 40's.

There is a small increase in carcinoma of the lung in the male, but the pattern is changing in that the disease is occurring in older patients and is becoming commoner in the 60's and 70's.

This picture is compatible with a relationship between smoking and cancer of the lung, but it is difficult to understand why the 60 to 40 age group has ceased to increase. The incidence of cancer of the lung arising in the older group presents great difficulties with regard to treatment. Patients in this group are often poor surgical risks because of deterioration of their cardiovascular and respiratory systems.

Surgery at the moment remains the most effective method of dealing with the disease, although encouraging reports in certain histological types with the use of antimetabolic drugs are accumulating.

Preventive Care.—This branch of the work embraces many sections and 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 and will continue to do so.

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.

The B.C.G. vaccination scheme 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 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. I will welcome the day when this preventive measure can be offered to all children and become a routine vaccination at birth, instead of at 13 years of age.

The great reduction of acute tuberculosis in both sexes at age group 14-25 is continued evidence of the efficacy of the B.C.G. scheme.

The number of successful B.C.G. vaccinations was as follows:-

	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
Contacts	6	20	264	290
On behalf of local authority	7	7	19	33
Hospital staffs	1	8	—	9
	14	35	283	332

The number of contacts seen through the clinic reflects the vigilance of health visitors in bringing them along for investigation. The majority of contacts diagnosed as having tuberculosis (two men, one woman and thirteen children) would have escaped detection for a long while but for the facilities available for this form of testing. The ascertainment of such cases is important as they are often found to have a minor degree of 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 of the Hospital Management Committee and in a private nursing home where there is a maternity wing. The babies are later seen at the chest clinic to ascertain that vaccination has been successful.

For many years a separate session has been devoted to the routine chest x-raying of expectant mothers, the cases being referred by general practitioners, maternity hospitals, ante-natal clinics, etc.

I feel that consideration will soon have to be given as to whether the service should be considerably modified, if not totally abandoned. The 'pick-up' rate of new cases of pulmonary tuberculosis under the age group concerned is very low indeed. There are many factors to account for this, but undoubtedly one of the main is that practically all young people (26 years of age and under) have received B.C.G. vaccination at school.

During 1965 a total of 970 such cases were x-rayed.

Another important point is good and adequate housing accommodation for patient and family. As ever the Housing Committee has been very helpful indeed in dealing with cases of pulmonary tuberculosis for there is complete co-operation between the Medical Officer of Health, the Committee and myself in this important matter.

An evening session is held for cases in need of physiotherapy, breathing exercises and postural drainage. Sessions are also held periodically by Mr. R. C. Barclay, F.R.C.S., part of which are devoted to the assessment of bronchiectatic cases suitable for surgery, as well as the follow-up of his operative cases. 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 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 a more 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 only:—Mondays and Wednesdays, 2 to 5.30 p.m.

Males and Females:—Tuesdays, 2 to 6.30 p.m. Thursday, 10 a.m. to 12.30 p.m. and 2 to 6.30 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 308 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 (5)	7 (3)	12 (8)
Gonorrhoea	80 (31)	21 (12)	101 (43)
Other Conditions.. .. .	129 (124)	66 (27)	195 (151)
Totals	214 (160)	94 (42)	308 (202)

(Note.—The brackets show the figures for 1964.)

The Port Health Inspectors continued to circulate to shipping details of the location and time of sessions of the Special Treatment Centre, and all the public conveniences display notices giving similar information.

PART III. LOCAL HEALTH SERVICES CARE OF MOTHERS AND YOUNG CHILDREN.

Infant Welfare Centres.—Eight infant welfare sessions were 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.
St. Michael's Church Hall, Littlecoates Road	Tuesday, 2 p.m.
Milton Road Welfare Clinic	Wednesday, 2 p.m. and 2nd & 4th Monday, 2 p.m.
Louth Road Methodist Church Hall	Friday, 2 p.m.
Old Clee Church Hall	Friday, 2 p.m.

Attendances both in children under 1 year and those between the age of 1 and 5, totalled 18,311, an increase of 550 on last year. There were 16,389 attendances of those under 1 year, 273 more than the previous year. In the 1 to 5 group, there were 3,661 attendances, 582 more than in 1964. Children in this group usually attend Toddlers' Clinics.

Baby scales for test feeding and weighing are available to all mothers. Fourteen cases with breast feeding problems were investigated and six continued to breast feed.

The immunisation and vaccination programme continued at all clinics.

Toddlers' Clinics.—There were 1,739 attendances at these clinics held twice weekly at Hope Street and Watkin Street, and weekly at Milton Road with additional clinics on alternate weeks.

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

	1964	1965
National dried milk, tins	43,668	35,865
Orange juice, bottles	18,474	18,064
Cold liver oil, bottles	1,554	1,614
A & D vitamin tablets, packets	2,311	2,195

Mothercraft.—The total attendances at mothercraft classes was 2,037 and there were 343 new cases. Classes are held at Hope Street on Mondays at 2.30 p.m. and at Watkin Street on Wednesdays at 2.30 p.m., while 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.

Attendances at the Parents' Club at Watkin Street numbered 979. A varied programme was again completed, the activities of the club being fifty per cent educational.

Ante-natal clinics.—Mothers attending these clinics totalled 643, 438 making 521 attendances to see the clinic medical officers. Most of the visits to the latter have been for blood testing at the request of the patient's family doctor. Very few patients attend for the full ante-natal care.

Only 2 patients did not book a general practitioner obstetrician for their confinement during the year.

Owing to lack of demand in this area, the clinic at Watkin Street was cancelled in February, patients being referred to the other two clinics.

Post-natal clinics.—The seventeen patients who attended were seen at the end of ante-natal sessions.

Notification of Births.—872 live births and 46 stillbirths were notified compared with 2,053 and 53 respectively last year.

Infant Mortality.—There was an increase in the infant mortality rate over the previous year from 15.3 to 16.9 per thousand live births. Twenty-four of the 31 deaths occurring were neo-natal, while seven cases were over the age

of one month at the time of death, the causes of the latter being:—

Other congenital malformations	2	Other infective and parasitic disease	1
Pneumonia	2	Other respiratory disease	1
Other intestinal obstruction		1	

The neo-natal mortality rate was 13.1 per thousand live births, compared with 9.7 in 1964. The 24 neo-natal deaths were due to:—

Post natal asphyxia and atelectasis	10	Pneumonia	2
Injury at birth	4	Congenital malformations of heart	1
Immaturity	3	Congenital malformations of digestive system	1
Other congenital malformations	2	Lack of care	1

Prematurity.—The number of premature live births notified was 125, seven less than last year. One hundred and sixteen of these were born in hospital and 9 in their own home; 87.2 per cent survived 28 days. The percentage of those surviving 28 days was (a) born in hospital—88.0; (b) born at home—100; and (c) born at home and nursed in hospital—33.3.

Weight at birth	Premature live births											
	Born in hospital				Born at home or in a nursing home							
					Nursed entirely at home or in a nursing home				Transferred to hospital on or before 28th day			
					Died				Died			
	Total Births	within 24 hours of birth	in 1 and under 7 days	in 7 days and under 28 days	Total births	within 24 hours of birth	in 1 and under 7 days	in 7 days and under 28 days	Total births	within 24 hours of birth	in 1 and under 7 days	in 7 days and under 28 days
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
1. 2lb. 3oz. or less	1	1	—	—	—	—	—	—	—	—	—	—
2. Over 2lb. 3oz. up to and including 3lb. 4oz. ...	9	4	—	—	—	—	—	—	1	1	—	—
3. Over 3lb. 4oz. up to and including 4lb. 6oz. ...	29	3	1	1	2	—	—	—	—	—	—	—
4. Over 4lb. 6oz. up to and including 4lb. 15oz. ...	21	2	1	—	4	—	—	—	2	1	—	—
5. Over 4lb. 15oz. up to and including 5lb. 8oz. ...	56	—	1	—	—	—	—	—	—	—	—	—
6. Totals ...	116	10	3	1	6	—	—	—	3	2	—	—

Stillbirths.—Enquiries made into the 46 cases of stillbirths notified (17 of these being outward transfers) showed that one case occurred at home, the remainder in hospital. Cases associated with prematurity totalled 25, and 17 were macerated.

Contributory causes were:—

Congenital defects	10	Abnormal presentation ..	4
Ante-partum haemorrhage ..	8	Placental insufficiency ..	3
Abnormality of cord	7	Rhesus incompatibility ..	1
Pre-eclamptic toxæmia	5	Toxæmia	1
Prematurity	4	Unknown	3

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

<i>Period of gestation</i>				<i>Weight of foetus</i>			
30 weeks	2	Under 3 lb.	10				
31	5	3 lb. and under 4 lb. ..	8				
32	3	4 lb. 5 lb. ..	5				
33	4	5 lb. 6 lb. ..	7				
34	2	6 lb. 7 lb. ..	7				
36	5	7 lb. 8 lb. ..	6				
37	5	8 lb. 9 lb. ..	3				
38	5						
39	3						
40	6						
41	2						
42	2						
43	1						
44	1						

Maternal Mortality.—There were no maternal deaths during the year.

The "At Risk" Groups.—There were 1,721 children on the register, 537 being made "at risk" in 1965.

Notification of Congenital Malformations apparent at birth.—There were 22 notifications during the year, as follows:—

Talipes	5	Cleft palate	1
Anencephalus	4	Cleft palate with cleft lip ..	1
Hypospadias	2	Intestinal atresia	1
Spina bifida	1	Other defects of hand	1
Anencephalus with spina bifida ..	1	Vascular defects of skin ..	1
Hydrocephalus with spina bifida ..	1	Anencephalus with	
Defects of spinal cord with		Exomphalus	1
talipes	1	Congenital heart disease ..	1

Care of Unmarried Mothers.—Financial responsibility was accepted for the care of nine mothers.

Ophthalmic treatment.—Twenty-eight cases referred from the maternal and child welfare centres received treatment.

Ophthalmia and Pemphigus Neonatorum.—No notifications were received.

Orthopaedic.—Cases referred from maternal and child welfare centres for orthopaedic treatment numbered 34, compared with 46 the previous year.

Nurseries and Child-Minders Regulation Act, 1948.—At the end of the year 5 persons and 4 premises were registered under this Act to care for 37 children.

Children in Care.—Thirty-seven children were medically examined at the request of the Children's Officer prior to being placed with foster parents, 15 less than in 1964.

Children for Adoption.—The Lincoln Diocesan Board for Social Work referred 18 babies to clinics for medical examination before adoption.

Surveys.—(1) The survey of deaths in children from cancer was continued throughout the year. This was a nation-wide survey conducted by the Department of Social Medicine, Oxford University, in association with the Medical Research Council.

(2) The National Child Development Study requested assistance to follow up and determine the educational and physical development of the "perinatal survey" children born between 3rd and 9th March, 1958. This involved the completion of a parental questionnaire covering aspects of the child's general development over the past seven years, school and pre-school experience, social class of parents, accommodation occupied by the household and a detailed medical history.

The medical questionnaire covered the special senses, height, weight, laterality and speech, as well as a general medical examination. In all, 26 children were examined.

(3) In March, the Ministry of Health (National Survey of Health and Development), asked for co-operation in interviewing a national sample of 5,000 people born in March, 1946, to provide a continuous record of childhood health, hospital admissions, school records, family background and early employment history.

(4) At the request of the School of Dental Surgery, Liverpool University, 83 questionnaires were completed in a survey of diet and dental caries in young children.

DENTAL TREATMENT

Numbers provided with dental care:—

	Examined	Treatment commenced	Treatment completed
Expectant and Nursing Mothers	118	96	70
Children under five	258	205	229

Forms of dental treatment provided:—

	Scalings and Gum treatment	Fillings	Silver Nitrate treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radio-graphs
							Full upper or lower	Partial upper or lower	
Expectant and nursing mothers	37	133	—	2	258	31	27	11	5
Children under five	—	26	9	—	426	192	—	—	—

MIDWIFERY

The establishment of this service consists of 12 full-time and one part-time midwives. Two attended refresher courses during the year, while 6 pupils completed Part II training on the district.

A total of 419 confinements were attended by municipal midwives, and in only two was no general practitioner obstetrician booked. The number of mothers who booked a general practitioner obstetrician was 417, but in only 45 confinements was a doctor actually present at the time of delivery. Eighty-two additional cases were booked but for various reasons were taken into the Grimsby Maternity Hospital for delivery, and 40 of these were discharged on the 2nd and 3rd day to the midwives for home nursing.

A total of 6,242 visits were paid to 1,250 cases discharged from hospital, compared with 2,416 and 1,243 last year.

Trilene apparatus is used by all midwives. Analgesia was given to the majority of cases, although in 75 no inhalation analgesia was given for the following reasons:—

Refused by patient ..	32	Not necessary ..	7
Not sufficient time ..	17	No medical certificate ..	5
Born before arrival ..	9	Medical grounds ..	4
Psychoprophylactic training		1	

Pethilorfan only was administered to 34 cases

Trilene was administered to 160 cases

Trilene and Pethilorfan was administered to 185 cases

Medical aid was called in by midwives to 87 cases, as follows:—

	Maternity cases	Hospital discharges
During the ante-natal period	7	—
In labour	26	—
During the puerperium	10	9
To attend to the baby	12	23
	<hr/> 55	<hr/> 32

Co-operation with general practitioners remains excellent.

Psychoprophylaxis.—A weekend course for psychoprophylaxis was arranged at Milton Road Clinic for local midwives under instructors from the National Birthday Trust. Eight midwives attended from Grimsby County Borough, and the remainder will be instructed at subsequent courses. Two sessions per week are available for expectant mothers wishing to benefit from this service.

HEALTH VISITING

There was no changes in staff during 1965. Twelve full-time, all-purpose health visitors cover the Borough and practice selective visiting. Visits found to be most time consuming are to mothers, babies and infants up to two years; mental health problems; the elderly; and problem and pre-problem families.

The number of visits to children under five totalled 28,163, compared with 27,142 the previous year. In addition, 5,439 ineffective visits were made (6,174 in 1964).

Every effort is made to obtain the maximum number of tests for phenylketonuria and this has created a good deal of repetitive visiting.

One health visitor attends a general practitioner's surgery once weekly' and another bi-monthly, each passing information to colleagues working in the different areas of the town. In other instances the general practitioners and health visitors contact each other by telephone. Whilst the requests for help are chiefly for the elderly, visits to other age groups are increasing in variety and numbers.

The health visitors' continued weekly attendance at the Paediatrician's clinic and to the children's ward contributes to the existing good liaison between the departments. Time saving verbal reports are made possible in this way and used with great advantage.

As in previous years, student nurses from the local School of Nursing spent two days with the health visitors. A varied practical programme of social and preventive medicine is introduced to them during this time.

The health visitors participated in three of the surveys previously mentioned, viz:—(i) Society of Medical Officers of Health (Dental Group), (ii) National Child Development Study, and (iii) Leukaemia Survey.

Problem and Pre-Problem families.—Here, teamwork and concerted effort by all agencies is called for and made possible by the regularly held meetings of the Case Workers Committee. The rehabilitation of a particular family at Brentwood Recuperative Centre was tried during this year. Their needs were studied as well as their suitability for such a scheme, and their co-operation was obtained. The social worker from the centre visited the family during the preparatory period. Arrangements were made to transfer the children to other schools at Brentwood and reports were sent. The local hospital co-operated by admitting the male partner for long awaited surgery at a time most suitable and thought to cause the least worry to the family. Their dog was cared for by the R.S.P.C.A., and all appeared ready. The health visitor chiefly concerned accompanied the mother and children on their journey to Brentwood, staying overnight to help them settle in.

Unfortunately, after a few days, the mother became homesick and travelled home alone; the children were collected a few days later by both parents.

HOME NURSING

The establishment of 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.)
- 3 Queen's Nurses (including one male)
- 1 District Trained Male Nurse
- 9 State Registered Nurses
- 2 Enrolled Assistant Nurses

Part-time

- 1 Bathing Attendant.

During the year two nurses attended refresher courses organised by the Queen's Institute of District Nursing, while a further State Registered Nurse took a District Nurse Training Course arranged by the Lindsey County Council, being successful in obtaining the National Certificate of the Ministry of Health and Certificate of the Queen's Institute of District Nursing. Student nurses from the area of the Grimsby Hospital Management Committee continue to pay visits with the district nurses.

It will be noted that while there was a decrease of 17 in the number of new cases, the number of visits and the total patients nursed showed an increase of 13 and 8 respectively over the previous year. The increase in visits was due to the additional number of patients requiring twice daily attendances.

During the year the appointment of a Consultant Geriatrician and an increase in the beds allocated for chronic sick patients have resulted in the worse cases being admitted more promptly.

Incontinence Pads Service.—Incontinence pads have again been provided in selected cases, but it has been found difficult to dispose of them. On a few occasions it has been possible to burn them in an old dustbin with the aid of paraffin, but in all-electric houses and the multi-storied flats the Cleansing Department has agreed to collect soiled pads if placed in a suitable container. In practice this has rarely been done.

The following shows the work done:—

Cases being nursed on 1st January 333

New cases nursed during the year:—

Adults 	798	
Children 5 to 15 years of age ..	4	
Children under 5 years of age ..	10	812
	<hr/>	<hr/>
Total 	1,145	

The figures given below show the total cases and number of visits for the past five years:—

<i>Year</i>	<i>New Cases</i>	<i>Total Cases</i>	<i>Visits</i>
1961	811	1,067	39,263
1962	771	1,034	41,918
1963	833	1,142	44,261
1964	829	1,137	44,154
1965	812	1,145	45,167

Summary of New cases nursed

ADULTS

Notifiable diseases :—

Tuberculosis	23
Pneumonia	—
Others	13

Maternal :—

Post-Natal pyrexia	..	..	..	..	..	1
Miscarriage	..	..	..	..	..	1
Others	..	..	..	..	..	11

Surgical :—

Acute	38
Chronic	52

Medical :—

Diabetes	12
Broncho-pneumonia	10
Bronchitis	18
Other chest conditions	5
Rheumatic conditions	23
Cerebral haemorrhage — under 60	9
„ „ — over 60	59
Cancer	94
Ear, nose and throat	3
Gynaecological	11
Cardiac disease	74
Disseminated sclerosis	10
Senility	129
Enemata	75
Others	127

CHILDREN 5 to 15 YEARS OF AGE

Medical	..	..	..	..	..	..	3
Surgical	..	..	..	..	..	..	1

CHILDREN UNDER 5 YEARS OF AGE

Medical	..	..	..	..	..	9
Surgical	..	..	..	..	..	1

Total	812
-------	----	----	----	-----

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

Diabetics (insulin)	..	..	..	..	..	13
Antibiotics	..	..	..	..	..	48
Diuretics	..	..	..	..	..	24
Liver preparations	..	..	..	..	..	45
Cortisone	..	..	..	..	..	9
Other special injections	..	..	..	..	..	48

Out of the above total of 187 patients receiving injections during the year, 16 also required general nursing care

VACCINATION AND IMMUNISATION

General.—Towards the end of 1959 vaccination and immunisation of infants was first introduced into the sessions at the infant welfare clinics. At that time it was felt that an excellent opportunity for vaccination and immunisation afforded itself at infant welfare clinics and that mothers who did not usually attend would make an appearance, seeking this advice at clinics, with an accumulative benefit all round. Over the years this method has gained popularity and proved to be most successful. However, it became apparent that some alteration was needed in view of the fact that attendances at normal immunisation sessions at the three clinics had been decreasing. It was therefore decided to cancel the six sessions as from 1st November and substitute the following two sessions at the DUDLEY STREET CLINIC to include all immunising procedures:—

- (1) First Thursday in month between 9.30 and 11 a.m.
- (2) Third Thursday in month between 9.30 and 11 a.m.

The Ministry of Health issued Circular No. 19/65 on the 6th September concerning the desirability of offering active immunisation against ANTHRAX to workers who were particularly exposed to the risk of contracting this disease. Arrangements are made for H.M. District Inspectors of Factories to submit to local authorities a list of firms where anthrax immunisation is indicated.

Diphtheria immunisation.—A total of 1,767 children received the complete course of inoculations as against 1,710 the previous year, and the following shows the immunisation state for the past five years:—

<i>Year</i>				<i>Under 5 years</i>	<i>5-15 years</i>	<i>Total</i>
1961	..	..	..	1,637	444	2,081
1962	..	..	..	1,302	190	1,492
1963	..	..	..	1,426	309	1,735
1964	..	..	..	1,517	193	1,710
1965	..	..	..	1,503	264	1,767

Re-inforcing injections were given to 2,170 children (1,949 last year).

Whooping cough immunisation.—A total of 1,520 children received whooping cough immunisation as compared with 1,528 the previous year. The number of cases of whooping cough has been kept at a low level since 1959.

Smallpox vaccination.—The number of children to receive primary smallpox vaccination was 637 as compared with 746 the previous year. Of the total 373 were in the one-year age group.

The number of children to receive re-vaccination was 29 and it would seem that there is very little demand for re-vaccination in the absence of a small outbreak occurring in the country.

Poliomyelitis vaccination.—The use of oral vaccine is quite agreeable and acceptable and presents no difficulty in administration. The number of children immunised totalled 1,588 as compared with 1,512 in 1964. The figures for the past five years are as follows:—

<u>Year</u>				<u>Under 5 years</u>	<u>5-15 years</u>	<u>Total</u>
1961	..	..	..	1,781	699	2,480
1962	..	..	..	1,760	2,186	3,946
1963	..	..	..	1,238	80	1,318
1964	..	..	..	1,457	55	1,512
1965	..	..	..	1,504	84	1,588

In a letter in September the Chief Medical Officer to the Ministry of Health referred to recent developments in poliomyelitis immunisation and the following was agreed by a Sub-Committee on Poliomyelitis Vaccination:—

- (a) the recommendation contained in the booklet "Active Immunisation against Infectious Disease" that an interval of three weeks should be allowed after a dose of oral vaccine before any other immunising procedure is undertaken could no longer be sustained, and should be withdrawn;
- (b) the simultaneous administration of oral poliomyelitis vaccine with triple vaccine for primary immunisation or with diphtheria and tetanus vaccine at school entry could be recommended at the discretion of the doctor concerned;
- (c) alternatively, a single dose of vaccine incorporating potent inactivated poliovirus antigens, diphtheria toxoid and tetanus toxoid would provide adequate reinforcement at school entry to children who had received primary immunisation against these diseases in infancy;
- (d) there was no need to delay tonsillectomy, when this operation was indicated, because of the season of the year or because of recent administration of oral vaccine.

AMBULANCE SERVICE

The returns for this service show a considerable increase in patients carried and miles travelled, the total increase in patients being 6,560 and in mileage 11,283. There was also an increase of 79 patients travelling by rail.

During the year 34,972 calls were received; 40,710 patients were transported and 183,278 miles covered by the vehicles. Of the total number of patients carried, 3,271 were accident and emergency cases, an increase of 39 over the previous year.

Co-operation between Lindsey County Council Ambulance Service Headquarters at Scunthorpe and the Grimsby Control ensures a strict economy in the use of vehicles as by using this method of control there is no chance of a journey being duplicated.

More patients are now visiting hospitals and clinics outside the area of the County Borough. These journeys are putting a great strain on the service both in manpower and vehicles, and if this trend continues an increase in staff and vehicles is inevitable.

Hospitals have made every effort to assist in moving patients, but owing to changes in hospital staff new members are not fully aware of the difficulties experienced by both the Ambulance Service and the Hospital Authorities. Weekly visits by the Ambulance Officer to hospitals and clinics have helped to overcome some of these.

The establishment of the service was increased by one driver/attendant in August, and the Town Council also approved a similar addition to the staff to cover the introduction of the 40-hour working week on the 3rd January, 1966. A new ambulance was received as a replacement.

The statistical tables are given below, the figures in brackets being those for last year:—

		CALLS		JOURNEYS IN DISTANCES		
Accidents	..	1,500	(1,472)	Under 50 miles	7,010	(6,643)
Other emergency		1,401	(1,333)	Under 100 miles	324	(302)
Removals	..	31,471	(24,647)	Over 100 miles	300	(305)
Miscellaneous		600	(529)			
Total	.. ..	34,972	(27,981)			

OPERATIONAL

<i>Type of Case</i>	<i>Patients</i>		<i>Journeys</i>	
Accident ..	1,787	(1,713)	1,497	(1,472)
Other emergency	1,484	(1,519)	1,311	(1,333)
Removals (Local)	33,103	(26,575)	3,416	(3,217)
Removals (Other)	4,146	(2,124)	1,201	(825)
Miscellaneous ..	190	(2,219)	209	(403)
Totals	40,710	(34,150)	7,634	(7,250)

ANALYSIS OF ALL JOURNEYS

<i>Type</i>		<i>Patients</i>		<i>Journeys</i>		<i>Mileage</i>	
EMERGENCY							
Ambulances	..	2,572	(2,352)	2,111	(1,999)	10,801	(10,697)
Sitting Case Vehicles	..	699	(880)	523	(804)	3,581	(4,467)
GENERAL							
Ambulances	..	12,170	(17,881)	2,200	(2,250)	74,900	(72,888)
Sitting Case Vehicles	..	25,269	(13,037)	2,611	(2,059)	92,758	(82,344)
ABORTIVE & SERVICE							
Ambulances	..	—	(—)	107	(113)	297	(592)
Sitting Case Vehicles	..	—	(—)	82	(96)	941	(1,007)
CIVIL DEFENCE							
Ambulances	..	—	(—)	—	(—)	—	(—)
Sitting Cases Vehicles	..	—	(—)	—	(—)	—	(—)
Totals	..	40,710	(34,150)	7,634	(7,321)	183,278	(171,995)
BY RAIL							
	..	192	(113)	180	(104)	34,909	(13,199)

VEHICLE STATISTICS

	<i>Miles</i>		<i>Petrol (galls)</i>		<i>M.P.G.</i>	
Ambulances ..	80,200	(77,723)	6,619	(6,366)	13.0	(12.21)
Dual Purpose Vehicles ..	69,169	(56,366)	3,542	(2,917)	20.0	(19.32)
Sitting Case Vehicles ..	33,909	(37,906)	737	(1,275)	30.0	(29.73)

AVERAGES

Mileage per patient	4.5	(5.03)
Mileage per journey	24.0	(23.49)

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

During the year the Social Worker saw 154 new cases and continued casework for 79 cases already being assisted. There were 105 office interviews and 1,279 home visits were made. The total number of cases helped show a slight decrease on the previous year, but many of the cases referred were of the type needing much more intensive individual work than hitherto.

The majority of referrals again came from the general medical practitioners, and these ranged from requests for convalescence and financial assistance to the need for active moral support to enable a family to overcome period of strain.

Many individuals have applied personally for assistance for themselves or their families following, in some cases, the advice of persons previously helped, and there have been a number of telephone requests from persons in some sort of trouble who feel the need to discuss their problem with someone who can offer an impartial opinion and advice.

Central Care Council.—The General Care Committee assisted 67 new cases and continued help to several persons already receiving assistance.

Fuel was again the biggest problem for the chronic sick, the elderly sick and those who had been off work for some time. Coal was supplied to fifteen cases and thirteen patients had gas or electricity accounts paid for them.

Fares to attend out-patient clinics or to visit relatives in hospital out of town were given in six cases. Some nursing aids were purchased for loan to patients who could not otherwise obtain them. Convalescent holidays were paid for in three cases who were unable to go to an ordinary convalescent home. Grants from other Associations included help with payment of debts and the provision of articles unable to be supplied to patients. The National Society for Cancer Relief gave extra nourishment grants to seven new cases and continued help in eleven cases. They again sent a Christmas gift to each patient.

The Grimsby Tuberculosis and Chest Care Committee continued to provide for the needs of all the patients who have attended the Chest Clinic or were treated in the Springfield Hospital, and who needed subsequent after-care.

B.C.G. Vaccination.—Detailed information of the year's work in this field is recorded in the School Health Service section (Part IX) of this report. The number of persons vaccinated in the past five years was:—

YEAR			CONTACT SCHEME	SCHOOL CHILDREN SCHEME
1961	..	..	298	926
1962	..	..	327	1,091
1963	..	..	248	1,062
1964	..	..	253	1,015
1965	..	..	287	1,405

Yellow Fever Vaccination.—The number of persons vaccinated and issued with an international certificate was 191, compared with 139 last year.

Chiropody Service.—This service is administered by the Welfare Services Committee of the Corporation, and I am indebted to the Director of Welfare Services for the following information:—

Four chiropodists were employed during the year, one full-time and three on a part-time sessional basis, at a clinic provided in the offices of the Welfare Services Department for 4½ days a week and as required on a sessional basis at the premises of the part-time chiropodists.

Patients dealt with in clinics, excluding residents in old people's homes, totalled 970 (950 over retirement age, 13 registered handicapped and seven registered blind persons); in addition, 263 persons over retirement age were treated at home.

The number of treatments carried out was 6,521, 3,365 at sessions held at the Welfare Services Department, 1,269 at the sessional basis clinics and 1,887 to residents in old people's homes. Domiciliary visits to other than residents in Part III Accommodation totalled 1,248.

Fluoridation of the Public Water Supply.—The Grimsby County Borough Council recommended in September, 1962 that fluorine be added to the public water supply, but in July, 1963, due to various anti-fluoridation propaganda, reversed the decision.

The circular letter from the Minister of Health, dated 9th November, 1965 was considered by the Health Committee, when it was recommended by a narrow majority that no action be taken. This resolution was confirmed by the Council without any further comment.

HEALTH EDUCATION

Full use has again been made of the publicity material of the Central Council for Health Education and of the Royal Society for the Prevention of Accidents, the local health authority subscribing to both bodies, and Better Health journals were distributed monthly through the usual channels.

A total of 14 lectures and talks were given to local organisations on various aspects of Public Health and Health Education, eight by the Medical Officer of Health, 2 by the Deputy Medical Officer of Health and 4 by the Superintendent Health Visitor. Attendances at these meetings totalled 436.

Schools.—A very varied programme of health education is undertaken by the health visitors in two secondary girls' schools. A half day weekly is allowed, with additional sessions if required. All pupils in their first year are given talks on personal and general hygiene, films, filmstrips and other educational media being used.

Mothercraft is introduced in the fourth year, particularly in the C and B streams. Sex education is also introduced at this stage of the programme, together with a wider variety of subjects and a visit to an infant welfare clinic. In one school a film was shown to fourth year girls on Venereal Disease, while Smoking and Lung Cancer films were shown in both schools.

Question time is always a lively one; these girls usually have boy friends and ask very frank and direct questions about every conceivable aspect of life. After the film on venereal disease, silence and thought prevailed; there were hardly any questions, but it was suggested that the film be shown to third-year pupils. A few fourth-year girls smoke the odd cigarette, lack of cash being the strongest deterrent at the moment.

Parents' Club.—While this club continues to attract members from all parts of the town, it has, unfortunately, no attraction for the problem families in the area. A health visitor continues with her guidance and support to a very energetic committee of mothers.

This same health visitor has a large comprehensive school in her district, and her reception in the school has improved and her activities developed considerably since the Club invited the Headmaster to be a guest speaker. He was very surprised at the wide variety of the work of the health visitor and of the keenness of the mothers.

Mothercraft and Psychoprophylaxis.—Evenings for fathers are held regularly; they are very keen attenders and most interested. Quite a number ask to be present at the birth and whilst this presents no difficulty with a domiciliary confinement, only a small number attend the hospital delivery.

No special programmes were carried out during the year on venereal disease or the risks of smoking, apart from posters from the Central Council for Health Education being displayed at the various clinics and in the offices of the local authority.

Advice on both subjects is being introduced in schools where the head teachers are willing to allocate part of the curriculum for this purpose.

DOMESTIC HELP

The increasing demand on this service has continued, the aggregate number of cases attended being 838 compared with 804 in the previous year. After investigation of the 495 applications received, 257 were provided with help. The number of cases carried over from last year was 581.

The number of maternity cases dealt with showed a decrease, 35 being attended against 45 the previous year, but there has been an overall increase of 44 in the other categories. The type of cases dealt with have all been referred through the usual sources.

The number of cases attended weekly has again risen, the average being 559 (522 in 1964).

During the winter months the problem has been the demand for daily visiting to the aged, many of whom are unable to light fires, prepare meals, etc., and this presents many problems in the administration of the Service, as well as putting a strain on the home help.

The Supplementary Service has proved useful in dealing with certain types of cases, but the demand for this is very limited. After investigation six cases were provided with help under this scheme.

The recruitment of home helps is becoming more difficult, due no doubt to the many industries offering more lucrative part-time employment in the town and surrounding areas. The number employed at the end of the year was 161, one less than in the previous year, but it can be pointed out that the majority of the home helps individually are now working more hours per week.

Since the appointment of a Deputy Organiser in April it has been possible to evolve a better system of routine visiting, resulting in the exercising of more supervision.

The following relates to the working of the scheme:—

Administrative staff on 31st December, 1965:—

Organiser	1	}	4
Deputy Organiser	1		
Clerks (full-time)	2		

Home Helps employed at 31st December, 1965:—

Part-time	161
Whole-time equivalent of part-time staff	59.5

Cases assisted during the past three years:—

	1963	1964	1965
Maternity (including expectant mothers) ..	40	45	35
Aged 65 or over	625	676	712
Chronic sick and tuberculous	49	43	49
Mentally disordered	Nil	Nil	Nil
Others	30	40	42
Totals	744	804	838

The following figures show the amount of service given in a representative week, when 617 cases were dealt with:—

23 patients received 2 hours but less than 3 hours on any one day.

382 patients received 3 hours but less than 4 hours on any one day.

118 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 91 patients received two or more half days per week, and included in this figure are ten cases where a home help called for approximately 1-hour daily. Two confinement cases were dealt with in this particular week.

Payment for Service.—The standard charge has remained at 4s. 6d. an hour, and of the 838 cases assisted the charges were distributed in the following way:—

	Free of cost	Part cost	Full cost
Maternity	—	11	24
Aged 65 or over	599	92	21
Chronic sick and Tuberculous ...	35	13	1
Mentally disordered	—	—	—
Others	23	9	10
Totals	657	125	56

MENTAL HEALTH

The Mental Welfare Service falls naturally into two sections, viz:— provision for the care of subnormal patients and the mentally ill, although the two overlap to some extent. The chief Mental Welfare Officer is responsible to the Medical Officer of Health for this section of the Health Services and with three senior mental welfare officers for arranging the admission of patients to hospital at whatever hour the need may arise. These officers, assisted by two part-time female mental welfare officers and one trainee, carry out the visits required by all types of patients, and act as escorts whenever necessary. A great deal of help is needed from time to time with family budgeting and a small kitchen has been provided on the office premises to instruct patients in cooking and other domestic problems.

The Women's Club continues to function one afternoon each week in a large room on the office premises. A hand sewing machine has been provided and there is some interest in sewing and knitting of simple garments. The women combined with members of the Girls' Club to hire a 'bus for day's excursion to Doddington Hall and this proved to be an enjoyable outing in spite of very inclement weather.

A Girls' Club was established in 1948 for high grade girls on licence or living with their families and this Club, run by the women mental welfare officers, continues to provide an outlet for many of the original members. Some of the girls are in employment and so must attend on leaving work. Two of them come along from a factory and take a bath on arrival. The group is very stable and some members have formed enduring and helpful friendships. The year's activities ended with the Christmas Party, which proved as popular as ever, many of the girls inviting a guest.

During the year membership of the small group of Alcoholics Anonymous was depleted still further by the removal of three members to other areas, and towards the end of the year a tape recorder was provided on which the members could hear tapes recorded by other groups.

Under Section 28 of the National Health Service Act, 1946 visits are paid to the homes of any patients in need of help or supervision. Many are referred by general medical practitioners, but members of staff from other services, together with relatives and friends, refer particular problems as these arise. Psychiatric treatment is available without delay when necessary, the Consultant Psychiatrist paying domiciliary visits as requested by general medical practitioners. Two follow-up clinics are held weekly in the Psychiatric Unit of the Scartho Road Hospital, at each of which two mental welfare officers are in attendance, and the majority of patients discharged from hospital attend one of these clinics. The Consultant Psychiatrist also advises the officers on any special problems arising in the community care of the patient and they provide him with regular reports on the progress of each case.

The following is the number of patients admitted to St. John's Hospital, Lincoln, during the year:—

						<i>Males</i>	<i>Females</i>	<i>Total</i>
Section 25	..	..	..	..	..	9	15	24
Section 26	..	..	..	..	..	2	1	3
Section 29	..	..	..	..	..	16	30	46
Section 60	..	..	..	..	..	—	1	1
Informal	..	..	..	..	..	15	19	34
						—	—	—
				Totals	..	42	66	108
						—	—	—

The number of cases dealt with by the mental welfare officers totalled 147, but in 39 instances it was not necessary to take action under the Mental Health Act, 1959.

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

						<i>Males</i>	<i>Females</i>	<i>Total</i>
(a) Mentally ill	(Under 16 years of age)	..	—			—	1	1
	(Aged 16 years and over)	..	100			214	314	
(b) Psychopath	(Under 16 years of age)	..	—			—	—	—
	(Aged 16 years and over)	..	4			11	15	
(c) Subnormal	(Under 16 years of age)	..	—			2	2	
	(Aged 16 years and over)	..	26			68	94	
(d) Severely	(Under 16 years of age)	..	19			23	42	
Subnormal	(Aged 16 years and over)	..	13			22	35	
			—			—	—	—
		Totals	..	..		162	341	503
						—	—	—

The majority of severely subnormal children have been referred by the School Health and Maternal and Child Welfare Services or by the Consultant Paediatrician, and a few by medical practitioners. The staff pass on any information they may have regarding the families of school children due for ascertainment under Section 57 of the Education Act, 1944, to the approved Medical Officers completing the statutory forms. The School Dental Service provided treatment for 27 patients.

Requests for Short Stay Care for subnormal patients are growing and a number of the children can be accommodated in August but there is great need for similar provision to be available at other times during the year, particularly during family emergencies. A week's holiday for ten patients, mainly from the Training Centre, was arranged during the summer term at the Mablethorpe Holiday Camp and this gave a great deal of pleasure to the children.

There is no voluntary association for mental health in this area, but very active co-operation is maintained with the local branch of the North Lincolnshire Society for Mentally Handicapped Children. This Society runs a boys' club one evening each week as well as a similar club for younger girls.

Close co-operation is maintained with officers of both National and Local Government Social Services, and the staff is particularly grateful to the Women's Voluntary Service for their help with clothing in necessitous cases. Special mention is also made of the help given by members of the Grimsby Borough Police whenever this is needed.

Training Centres.—The pilot scheme for an Adult Training Centre continues to develop in spite of insufficient space and use is now being made of the interviewing room to break down radio and television sets into their component parts. Several patients from the mental hospital or clinic have passed through the group, four or five having re-established themselves in outside work.

The Supervisor and two assistants at the Junior Training Centre hold the diploma of the National Association for Mental Health, and with three other assistants make up the teaching staff there. The Special Care Unit, attached to this Centre, is staffed by a qualified nursery nurse, an older girl from the Centre spending much of her time assisting with occasional relief help from the Centre staff. Two Corporation buses carry the majority of the pupils to and from the Centre each day, four others being carried by the Ambulance Service. A mini-bus conveys those children attending from the rural area of the Lindsey County Council. Those attending the Special Care Unit are escorted by their parents or travel by means mentioned above.

All but four of the older boys now attend the Adult Centre in Silver Street, returning with their Instructor to the Junior Centre for their midday meal.

A number of pupils of both sexes attend the swimming baths twice weekly with a teacher of each sex in charge as instructors. Some of them have become quite proficient, one boy having won several life-saving certificates.

The outing to the Marineland Zoo at Cleethorpes proved very popular and groups of children have been taken to the market and to various shops during the year.

There are now eight children attending the Special Care Unit, some for two or three days each week, and others for the full five days.

PART IV.—SANITARY CIRCUMSTANCES.

Harold Parkinson, Chief Public Health Inspector, reports:—

Staff.—At the end of the year there were vacancies for qualified public health inspectors.

Two butchers with the required educational and trade qualifications were trained in meat inspection, passed the examination and qualified as Authorised Meat Inspectors, and the Council appointed them full-time officers at the public abattoir.

A former R.A.M.C. Hygiene Assistant was accepted as a pupil public health inspector and he commenced his practical training in the department.

Two other pupils continued their training and expect to take the final examination in 1966.

Pupils from adjoining districts were also given help in their practical training.

Water Supply.—The piped supplies from the North-East Lincolnshire Water Board continued to be adequate in quantity for the needs of the town.

Two-hundred and thirty-four samples of water taken from the outgoing main and house taps were examined for bacteriological content and found to be satisfactory.

The natural fluoride content of the water was 0.1 part per million.

The water supply for the occupants of all the houses within the County Borough was from the public supply. In the older parts of the town, in which there are clearance and redevelopment schemes, the occupants of many houses still took their supplies from stand pipes in back yards. Where such houses were expected to be occupied for a number of years notices were served on owners under the Grimsby Corporation Act requiring the provision of internal water supplies.

Set out below are results of examinations made of drinking water taken from a house tap.

Chemical Analysis

Physical characters

Suspended matter	..	..	..	..	..	..	none
Appearance of a column 2 ft. long	..	..	..	..	..	..	Clear; colourless
Taste	..	..	..	..	..	..	normal
Odour	..	..	..	..	..	..	none

Chemical examination

							Parts per million
Total solids dried at 180 deg. C.	..	..	..	..	..	..	354.0
Chlorides in terms of Chlorine	..	..	..	..	..	..	25.0
Equivalent to Sodium Chloride	..	..	..	..	..	..	41.2
Nitrites	..	..	..	..	..	..	None
Nitrates as Nitrogen	..	..	..	..	..	..	2.48
Poisonous metals (Lead etc.)	..	..	..	..	..	..	None
Total hardness	..	..	..	..	..	..	282.0
Temporary hardness	..	..	..	..	..	..	220.4
Permanent hardness	..	..	..	..	..	..	61.6
Oxygen absorbed in 4 hours at 80 deg. F.	..	..	..	..	..	..	0.08
Ammonical Nitrogen	..	..	..	..	..	..	0.020
Albuminoid Nitrogen	..	..	..	..	..	..	0.032
Free Chlorine	..	..	..	..	..	..	0.06
pH Value	..	..	..	..	..	..	7.5

Bacteriological

B. Coli Test (MacConkey's) Bile Salt Lactose Broth.

Probable number of coliform organisms per 100 ml. 0

(Signed) Hugh Childs for John Evans

(A. H. Allen & Partners).

Bacteriological examination

Plate Count: 3 days at 22 deg. C. aerobically — 4 cols. per ml.

2 days at 37 deg. C. aerobically — 2 cols. per ml.

Coliform Test: Probable number of coliform bacilli — None per 100 ml.

Cl. Welchi: None present in 50 ml. of sample.

(Signed) H. Lawry

Bacteriologist.

Sewerage and drainage.—The town's sewage was discharged into the Humber estuary after passing through the Corporation's two pumping stations.

Public Cleansing.—All the town's refuse was disposed of by tipping. The problem of finding suitable land for this purpose became more acute and at the end of the year a final decision had not been made as to the type of plant to be installed for disposing of the refuse other than by tipping. This question now needs to be resolved, otherwise the Corporation will be in great difficulty for the proper disposal of refuse in the future.

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

House and trade refuse collected amounted to 32,620 tons and apart from 2,234 tons which were salvaged and sold for £22,418, the remainder was disposed of by controlled tipping at Little Coates.

The scheme started in 1950 under Section 75 (3) of the Public Health Act, 1936 continued to operate and 2,264 new ashbins were supplied to houses in 1965. A total of 25,036 premises in the Borough have been issued with municipal dustbins since the scheme came into operation in 1950.

Sanitary Inspections.

Accumulations.. .. .	180	Animals	46
Caravans	34	Complaints received and	
Dirty and verminous houses		investigated	2,363
and persons	103	Drainage	4,341
Drain Tests	77	Factories & outworkers	57
Infectious disease enquiries	3,525	Lodging houses	4
Miscellaneous matters	2,959	Offensive smells	119
Offensive trades	19	Passages and yards	283
Piggeries and stables	36	Rats and mice	69
Rooms disinfected after		Smoke observations	129
infectious disease	5	Water supply	78
Noise nuisance			

Housing.—

Houses, defects and nuisances (Public Health Act)	.. .. .	3,643
Houses (Housing Act)	.. .. .	2,512
Overcrowding (Housing Act)	.. .. .	113

Notices.—

Informal notices served	.. .. .	564
Statutory notices served (397 Public Health Act, 11 Grimsby Corporation Act, 13 Noise Abatement Act)	.. .. .	421

Work in default was carried out by the Corporation at the cost of the owners in respect of 189 notices.

It was necessary to obtain abatement orders from magistrates for the remedy of defects at three houses after action had been taken under section 93.

Offensive Trades.—Complaints continued to be received about the premises of one fat melter and the firm have agreed with the Corporation to transfer their business to premises to be erected on a site in the Corporation's industrial area on the Humber bank.

Fish and offal transport.—One firm was fined £3 for spilling offensive liquid on to the public highway from one of their lorries transporting fish.

Because of the reduced facilities for rail transport there was a change to road transport. Several surveys were made at certain junctions of main roads out of the town and it was necessary to discuss with the fish merchants and transport contractors the necessity of taking effective measures to prevent the discharge of foul liquid on to the highway. In the main the response to the requests made could be considered satisfactory.

Pests and Vermin Control.—The Corporation disinfectors (using D.D.T. insecticides) dealt effectively with the following infestations:—

54 of cockroaches	(including three Council Houses)
5 of bugs	(including two Council Houses)
7 of ants	(including three Council Houses)
5 of earwigs	(including four Council Houses)
2 of mites	(both Council Houses)
6 of fleas	(including one Council House)
12 of woodworm	
3 of silver fish	(including two Council Houses)

During the summer his services were continually in demand to destroy wasp nests.

There was no major rat or mice infestations found in the town and Warfarin continued to be used successfully.

Cleansing of Persons.—The Corporation's cleansing station was only used occasionally for cleansing verminous men.

Laundry for incontinent patients.—At the end of the year the cleansing station was equipped as a small laundry for the washing of sheets, clothing, etc., from incontinent patients nursed at home. A twice weekly service is given in needy cases, free of cost.

From comments made by families it seems that this has been a boon. The laundry has yet to be used to capacity.

Atmospheric Pollution.—The contents of the deposit gauges at Hainton Square and Bradley Woods were examined monthly.

Complaints were received about the emission of grit and fumes from a metal smelting furnace, which had been set up without previous approval of the Council, and either under the Clean Air Act or the Town and Country Planning Act it was decided to take appropriate action.

The main atmospheric pollution in the town is from dwellings.

Warning letters continued to be sent about excessive and dense fumes emitted from motor exhaust pipes.

Swimming Baths.—Bacteriological examinations of water taken continued to be satisfactory.

Places of entertainment.—Premises subject to annual licences were inspected from time to time and only minor defects were noted.

Offices, Shops and Railway Premises Act.—At the end of the year 1,186 premises (employing 7,903 persons) were on the register and it had been possible to complete full inspections of 1,009 premises (655 shops, 229 offices, 66 warehouses, 58 catering premises and 1 fuel store). 157 of these premises were found to comply with the Act in all respects, and at 852 one or more of the provisions of the Act had not been observed and in consequence written notices were sent about the following matters:—

Not displaying Regulations	..	..	..	..	..	608
Without adequate first aid boxes	..	..	..	..	..	348
Without thermometers	..	..	..	..	..	351
Without proper hot water supplies	..	..	..	..	..	187
Without wash hand basin	..	..	..	..	..	79
Defects (floors, roofs etc.)	..	..	..	..	..	196
Inadequate heating	..	..	..	..	..	20
Inadequate seating	..	..	..	..	..	7
Without facilities for hanging outdoor clothing	..	..	..	..	..	26
Water closets not marked for sexes	..	..	..	..	..	55
Premises requiring cleansing	..	..	..	..	..	142
Premises requiring decoration	..	..	..	..	..	158
Premises inadequately ventilated	..	..	..	..	..	120
Without adequate water closet accommodation	..	..	..	..	..	19
Unguarded machinery	..	..	..	..	..	13
Inadequate lighting of water closet	..	..	..	..	..	114
Inadequate lighting of premises	..	..	..	..	..	20
Handrails	..	..	..	..	..	27
Floor coverings	..	..	..	..	..	30
Disposal of sanitary dressings	..	..	..	..	..	9
Without drinking water	..	..	..	..	..	11

After the receipt of the notices at the request of employers inspectors met them, and at times their contractors, on the premises and advised on the works necessary to comply with the Act.

Towards the end of the year it was possible to start re-inspecting some of the premises where notices had been served and it was necessary to send further notices for failing to comply fully with the terms of the notices.

Plans of new buildings, the use of which would come within the terms of the Act, continued to be scrutinized and the applicants informed about the requirements of the Act.

During the year notifications were received about accidents such as cuts, bruises, burns and one broken arm, and on investigation none of these were found to arise from defects at the premises.

Light meter readings were taken at many of the premises inspected and in general the standards of lighting, both natural and artificial, were found to be reasonable.

Noise Abatement Act.—Four ice cream vendors were fined by the magistrates for breaches of the Act for using chimes and bells after 7 p.m.

Very few complaints were received about transport of peas and containers to a food processing factory during the pea season. The firm had experimented with purpose-made reinforced rubber containers, and there was also an improvement in the arrangements for securing the metal containers on the lorries to prevent the clanging noises which had disturbed the sleep of householders in the streets used by the vehicles throughout the night. The firm reviewed the arrangements after the season had ended and it was considered that the reinforced rubber tanks, which had cost a considerable amount, had not stood up to the rigours of the process, so for the 1966 season it was intended to concentrate on improved arrangements for the adequate securing of the traditional type of metal tanks.

Two statutory notices were served regarding noises caused by the activities of "beat" groups. Sound level readings were taken and complainants interviewed, but at the end of the year it had not been necessary to take court action.

A petition was received from a number of householders about noise from the activities of a transport firm whose premises were being used without planning permission. This matter was referred to the Planning Committee for action.

A few complaints were received from nearby householders complaining about the barking of dogs. Appropriate informal action was taken and no further complaint was received.

The abatement of noise nuisances in spite of the provisions of the Act is much more complicated than the general public appreciate. However, informal action taken had ensured better arrangements for the unloading of fish early in the morning, the suppression of noisy machinery, and one "beat" group ceased to use a loft over a garage for practice purposes.

Table 9—Factories Act, 1961.

Annual Report of the Medical Officer of Health in respect of the Year 1964 for the County Borough and Port of Grimsby in the County of Lincolnshire.

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	336	663	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	560	763	4	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ...	94	110	—	—
TOTAL ...	990	1,536	6	—

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.)	167	131	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—	—
Inadequate ventilation (S.4) ...	4	—	—	—	—
Ineffective drainage of floors (S.6.)	13	13	—	—	—
Sanitary Conveniences (S.7.)—					
(a) Insufficient	4	3	—	2	—
(b) Unsuitable or defective ...	75	55	—	2	—
(c) Not separate for sexes ...	1	1	—	—	—
Other offences against the Act (not including offences relating to Outwork)	27	22	—	—	—
TOTAL ...	291	225	—	4	—

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.	1	—	—	—	—	—
Nets, other than wire nets	116	—	—	—	—	—
TOTAL	117	—	—	—	—	—

PART V.—HOUSING.

The Chief Public Health Inspector reports:—

New dwellings built (209 Private enterprise, 352 by the Town Council). . . 561

Unfit houses

- (a) A Public Inquiry was held regarding the Grimsby (Robinson Street West) Clearance Area, 1965, which involved 94 houses and the Grimsby (Upper Burgess Street No. 8) Clearance Area, 1965 involving 2 houses.

At the end of the year the Ministry had not given a decision nor had a decision been received in connection with the Wellington Street Compulsory Purchase Order submitted in 1964.

- (b) Other areas represented and Orders confirmed without objection were:—
- | | |
|--|-----------|
| Grimsby (Kent Street No. 5) Clearance Area, 1965 . . | 5 houses |
| Grimsby (Albert Street No. 6) Clearance Area, 1965 . . | 11 houses |
| Grimsby (Harrison Street No. 1) Clearance Area, 1965 | 8 houses |

Again it was necessary to delay the proposals for certain clearance areas and compulsory purchase orders because the Council had not sufficient and suitable accommodation for rehousing the tenants, as required by Section 42 of the Housing Act, 1957.

Individual houses dealt with under Section 16 included:—

61, 65, 67, 69, 71, 73, 75, 77	Albert Street.
37	Burgess Street
63, 65, 67, 69, 71, 79, 81, 85	Church Street
1, 2, 3, Naval Bungalows,	Clee Road
96	Heneage Road
21	Newmarket Street
122	Ravenspur Street
34/42	Thesiger Street
134	Victor Street
7	Worsley Street

Rent Act.—Only 3 applications for Certificates of Disrepair were received and granted.

Caravans.—There was only one occasion when itinerant caravan dwellers were found using a vacant site, which happened to be owned by the Corporation, and shortly after a warning being given the caravans were taken out of the borough.

On the appointed day for the national survey arranged by the Ministry of Housing and Local Government about gipsies and other travellers, a "Nil" return was submitted.

Common Lodging Houses.—No progress was made in the acquisition of the hostel in Riby Square for use as a municipal common lodging house because of the Government's financial restrictions. The need for such a common lodging house was just as pressing as in recent years.

Both the Salvation Army's Brighowgate Hostel and the Queen Mary Hostel of the Royal National Mission to Deep Sea Fishermen provided good accommodation and during routine visits were found to be well maintained and managed.

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	80	Confectioners shops ..	54
Dairies and milk vendors ..	30	Fish curers	11
Fish shops	55	Food preparers	73
Fried fish shops	112	Greengrocers	62
Grocers	286	Ice cream makers & vendors	61
Markets	231	Meat shops and stores ..	305
Restaurants and cafes ..	316	Slaughterhouses	490
Sweet shops	44	Other matters	484

Slaughterhouses.—In the Corporation owned Public Abattoir 5,631 beasts, 13,607 sheep, 291 calves and 22,633 pigs were slaughtered.

In the only private slaughterhouse 2,696 pigs were killed.

Meat Inspections.—Statistics about carcasses and offals inspected and condemned are set out below:—

	Cattle excluding cows	Cows	Calves	Sheep and lambs	Pigs	Horses
Number killed	5,521	110	291	13,607	25,329	—
Number inspected ...	5,521	110	291	13,607	25,329	—
<i>All diseases except Tuberculosis and Cysticerci.</i>						
Whole carcasses condemned	4	5	2	25	60	—
Carcasses of which some part or organ was condemned	1,475	45	4	743	8,181	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	26.81	45.45	2.06	5.64	30.96	—
<i>Tuberculosis only</i>						
Whole carcasses condemned	—	—	—	—	2	—
Carcasses of which some part or organ was condemned.	—	—	—	—	659	—
Percentage of the number inspected affected with tuberculosis	—	—	—	—	2.61	—
<i>Cysticercosis</i>						
Carcasses of which some part or organ was condemned	11	—	—	25	—	—
Carcasses submitted to treatment by refrigeration	11	—	—	25	—	—
Generalised and totally condemned	—	—	—	—	—	—

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

Cysticercus bovis.—There was a distinct reduction in the number of infestations found. The infested carcasses were given the prescribed freezing treatment and then the meat was passed for human food.

Diseases and unsound conditions found in slaughterhouses included:—actinomycosis, arthritis, bruising, cirrhosis, *C. Bovis* cysts, *C. Ovis*, contamination, emaciation, emphysema, enteritis, erysipelas, fascioliasis, fevered, gangrene, hepatitis, hydatidosis, hydronephrosis, immaturity, infarcts, injuries, jaundice, Johnes disease, leukaemia, mastitis, metritis, melanosis, necrosis, nephritis, oedema, parasites, pericarditis, petechii, peritonitis, pleurisy, pneumonia, pyaemia, rheumatism, tuberculosis, tumours, telangiectasis, uraemia.

Weight of meat condemned—3 tons, 6 cwts., 3 qrs., 11 lbs.

Inspection of other foods resulted in the condemnation of:—

Condemnations	tons	cwts.	qrs.	lbs.
Bacon and sausages	—	—	2	12
4,515 tins, 1,630 packets and 164 bottles of various foods	2	15	3	19
	2	16	2	3

Disposal of unsound meat and other foods.—The same arrangements continued as in previous years for diseased meat to be processed at Killingholme factory.

Certain livers were kept separate after condemnation and sold for pharmaceutical purposes. A few were sold to a mink farmer after the livers had been discoloured with green dye.

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

Fish Inspection and Export Certificates.—This year because of a change in the distribution arrangements of a large frozen food firm there has been a great increase in the number of export certificates issued.

The usual inspections have been made at factories, curing houses and cold stores and 315 certificates have been issued concerning dried salted fish and quick frozen foods dispatched to:—

Algeria, Arabia, Australia, Bermuda, Ceylon, Cyprus, Denmark, Dutch West Indies, Fiji, France, Gold Coast, Greece, Holland, Hong Kong, Iraq, Italy, Japan, Jordan, Kenya, Kuwait, Liberia, Libya, Majorca, Malaya, Malta, Mozambique, Netherlands, New Guinea, Nigeria, Persia, Persian Gulf, Rio de Janeiro, Saudi Arabia, Sierra Leone, South West Africa, Spain, Sweden, Tripolitania, West Indies.

Milk Supply.—Apart from a minute quantity all the milk sold in Grimsby was heat treated in the two local dairies before sale to the public. Two firms commenced homogenizing a proportion of the town's supply of pasteurised milk.

Wholesalers of Milk	2
Licenced pasteurisers of milk (high temperature short time) ..	2
Licenced to use designation Tuberculin Tested (Pasteurised) Milk	2
Supplementary and dealers licences for sale of Pasteurised Milk ..	2
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)	272
Licences to sell raw Tuberculin Tested milk	2

Forty-nine out of 51 samples of Pasteurised, 22 Sterilised Milk and 21 Tuberculin Tested Milk passed the prescribed tests.

Brucella Abortus.—Nine samples of raw milk (taken from Vending Machines) were examined for the presence of *Brucella Abortus*, two of which were found positive.

The Medical Officer of Health for the area in which the producers' premises are situated was informed and the necessary action taken.

Ice Cream.—

Premises registered for ice cream making	6
Premises registered for sale of ice cream (chiefly for pre-packed ice cream)	353

Of the 10 samples submitted for the Methylene Blue test only one gave unsatisfactory results.

Food Hygiene (General) Regulations, 1960

Type of premises	(i)*	(ii)**	(iii)†	(iv)††
1. Bakehouses	24	24	24	24
2. Bakers & Confectioners shops	34	34	34	34
3. Butchers shops	76	74	76	74
4. Cafes, restaurants, canteens & kitchens, snack bars	83	81	83	82
5. Sweet shops and sweet manufacturers ..	72	66	70	66
6. Fish curers	4	4	4	4
7. Preparation of shell fish	1	1	1	1
8. Wet and Fried Fish Shops	68	65	68	66
9. Food manufacturers	10	10	10	10
10. Fruiterers and Greengrocers	40	39	36	35
11. Grocers	249	242	240	235
12. Ice Cream makers	5	5	5	5
13. Hotels and licensed premises	91	88	85	82
14. Mineral water manufacturers	4	4	4	4
15. Pickle makers	1	—	1	1
Totals	762	737	741	723

* (i) the number of premises.

** (ii) the number of premises fitted to comply with Regulation 16 (i.e. a wash basin with hot and cold water supplies — for hand washing).

† (iii) the number of premises to which Regulation 19 applies.

†† (iv) the number of premises fitted to comply with Regulation 19 (i.e. a sink with hot and cold water supplies — for washing of food and equipment).

Food Hygiene.—Certain large processors of food continued their own internal schemes for training of workers in food hygiene.

Members of the public continued to make complaints about food containing "foreign matter" and the mouldy condition of pre-packed foods. In such instances the Committee issued warnings to the firms concerned, except in eight cases where court proceedings were taken. In three cases the firms concerned were fined £3 each, two firms were fined £20 each, two firms at £10 each and one case concerning a mouldy pork pie was dismissed by the Magistrates.

One ice cream vendor was fined £2 for failing to have hot water and his name and address on the vehicle used for the sale of ice cream, and another was fined £5 for failing to have a hot water supply on his vehicle.

When cases of Sonne Dysentery were investigated all food handlers with any contact with members of the family suffering from Sonne Dysentery were excluded from work until two negative specimens had been produced from the persons who had been found to be infected with the organism.

Sampling and examination of foods.—539 tests which included bacteriological, biological, histological and chemical examinations were applied to a variety of foods. The contents of prepacked foods were also checked to ascertain if correct description of the contents had been printed on the wrappers.

One informal sample of milk was found deficient in milk fat to the extent of 20.6% and was also slightly deficient in milk solids other than milk fat. The freezing point (Hortvet) test showed the presence of added water. Follow up sample to be taken.

The filling of an informal sample of cream buns contained 31.5% fat, of which 6% was butter fat. The Public Analyst reported that the filling was not cream filling and the sample should not have been described as cream buns. A formal sample taken later proved to be genuine. A warning letter was sent to the firm concerned.

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 at the Grimsby General Hospital.

Fertilisers and Feeding Stuffs.—Thirty samples were taken. Three informal samples of fertilisers showed slight deficiencies in soluble phosphoric acid. Two of these contained an excess of insoluble phosphoric acid and one was deficient in insoluble phosphoric acid. Three repeat official samples of these fertilisers were taken and their composition differed by more than the prescribed limits of variation.

Letters of warning were sent to the firms concerned and as these samples came from firms in other areas the appropriate officer was notified so that the necessary action could be taken at the places of production.

PART VII.—ADDITIONAL INFORMATION.
NATIONAL ASSISTANCE ACTS: INCIDENCE OF BLINDNESS

Forty-two Forms B.D.8 were received during the year. As a result of examinations carried out by the ophthalmic surgeons 17 persons were certified as blind and 24 as partially-sighted, the remaining one being neither blind nor partially-sighted. No cases of retrolental fibroplasia were reported.

The total number of blind persons in the Borough at the end of the year was 139 (59 males, 80 females). The number of partially-sighted persons was 74 (32 males, 42 females).

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 ...	4	—	—	8
(b) Treatment (medical surgical or optical)	15	3	—	11
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment ...	10	3	—	9

No cases of ophthalmia neonatorum were notified.

PERSONS IN NEED OF CARE AND ATTENTION

It was necessary during the year to take action under Section 47 of the National Assistance Act, 1948, to remove two females, both aged 80 years, to chronic sick accommodation.

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	—	13	—	13
	Females	—	20	—	20
At special school ...	Males	—	—	—	—
	Females	—	—	—	—
At training centre ...	Males	—	2	1	3
	Females	—	2	1	3
*In employment ...	Males	—	—	22	22
	Females	—	—	6	6
At home ...	Males	1	—	14	15
	Females	9	—	—	9
TOTALS ...		10	37	44	91

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	—	3	—	3
At special school	...	Males	—	2	—	2
		Females	—	1	—	1
At training centre	...	Males	—	2	—	2
		Females	—	1	—	1
*In employment	...	Males	—	—	14	14
		Females	—	—	5	5
At home	...	Males	1	—	5	6
		Females	—	—	1	1
TOTALS			1	10	25	36

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

MEDICAL EXAMINATIONS

Medical examinations for superannuation purposes were carried out on 205 employees during the year, 188 by medical staff of the department and 17 by requests to other local authorities. Of these 4 were found unfit for entry into the superannuation scheme, and 7 were deferred for a probationary period.

Six employees for retirement on medical grounds were referred to the Medical Referee, and the Medical Officer of Health investigated and made special reports on 18 employees who had been absent from duty for a period of three months and over.

One hundred candidates for admission to training colleges were also examined by the medical staff. Examinations for entry into the teaching profession numbered 57, seven 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 106 persons were examined for employment in the School Meals Service of the Local Education Authority. This examination includes tests for carrier conditions and none of the candidates were found to be unfit for such employment.

Fourteen firemen were also examined by the medical staff in accordance with the provisions of the Fire Services (Appointments and Promotions) Regulations, 1950; 1 was found to be unfit for entry into the Service, but was later accepted on re-examination.

The above represents a total of 488 medical examinations during the year, 458 of which were performed by medical staff of the department, compared with 537 and 503 respectively in 1964.

As recommended in Ministry of Health Circular 64/50 — Protection of Children from Tuberculosis — 39 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 2,259 specimens were submitted by the health department for examination in the pathological laboratory at the Grimsby General Hospital, compared with 2,128 in 1964.

GRIMSBY CREMATORIUM

The Medical Officer of Health and his Deputy act as Medical Referee and Deputy Medical Referee respectively to the Grimsby Crematorium.

The number of cremations which have taken place in the past five years is as follows:—

<i>Year</i>	<i>Grimsby residents</i>	<i>Residents from other areas</i>	<i>Total</i>
1961	459	883	1,342
1962	554	1,005	1,559
1963	587	1,165	1,752
1964	625	1,122	1,747
1965	616	938	1,554

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1942

It is pleasing to know that the general health and nutrition of the Grimsby school child continues to be most satisfactory.

There were no serious epidemics and again not a single case of poliomyelitis. There were, however, more cases than usual of primary tuberculosis. Although the increase was largely accounted for by four children from one family it should serve as a warning that the threat of tuberculosis is not yet eliminated. As a result, a future arrangements have been made for all children who are tuberculin positive to have a chest X-ray.

There were no outbreaks of food poisoning and again a small number of dysentery cases only. This is mostly due to good supervision and attention to hygiene in the school.

Emphasis on poliomyelitis prevention has been put up, with particular

SCHOOL HEALTH SERVICE.

The statutory medical inspections were completed and there was no special increase in defects discovered. However, there was a significant increase in the number of cases of scabies. These were mostly confined to a few 'hard' core families who eventually had to have assistance from the clinic nurse in treating their children. The percentage incidence of vermin was even lower than last year's very low record.

The consultant clinics are continuing a most useful service and co-operation all round is excellent, which greatly improves the service to the school child.

Despite every effort, including a specially increased entry grade, no applications have been received for a post which is now more than two years vacant. The number of speech defects needing help may be comparatively small, but the magnitude of the problem for those concerned is great. Our thanks are extended to the Lindsey County Council for helping out by allowing their therapist to treat cases at Cleethorpes. Others have been referred to a hospital at Lincoln under Mr. Spencer Harrison.

The position of Senior Psychologist has also not been filled since the absence of a suitable applicant. Mr. Ruxton has continued to keep the service running, but with the ever increasing emotional problems of modern children there is work for two psychologists at least.

SCHOOL HEALTH SERVICE

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1965

To the Chairman and Members of the Education Committee.

It is pleasing to record that the general health and nutrition of the Grimsby school child continues to be most satisfactory.

There were no serious epidemics and again not a single case of poliomyelitis. There were, however, more cases than usual of primary tuberculosis. Although the increase was largely accounted for by four children from one family it should serve as a solemn warning that the threat of tuberculosis is not yet eliminated. As a result, in future, arrangements have been made for all children who are tuberculin positive to have a chest X-ray.

There were no outbreaks of food poisoning and again a small number of dysentery cases only. This is mostly due to good supervision and attention to hygiene in the schools.

Immunisation programmes were continued without let up, with particular emphasis on poliomyelitis, diphtheria, and B.C.G. vaccination.

The statutory medical inspections were completed and there was no special increase in defects discovered. However, there was a significant increase in the number of cases of scabies. These were mostly confined to a few 'hard core' families who eventually had to have assistance from the clinic nurse in treating their children. The percentage infestation of vermin was even lower than last year's very low record.

The consultants' clinics are continuing a most useful service and co-operation all round is excellent, which greatly improves the service to the school child.

Despite every effort, including a specially increased salary grade, no applications have been received for a post which is now more than two years vacant. The number of speech defects needing help may be comparatively small, but the magnitude of the problem for those concerned is great. Our thanks are extended to the Lindsey County Council for helping out by allowing their therapist to treat cases at Cleethorpes. Others have been referred to a hospital at Lincoln under Mr. Spencer Harrison.

The position of Senior Psychologist has also not been filled, again because of the absence of a suitable applicant. Mr. Rubery has continued to keep the service running, but with the ever increasing emotional problems of modern civilisation there is work for two psychologists at least.

The school dental situation continues to fluctuate between zero and the famous few. Although all the recommendations for recruitment mentioned in Ministry of Education Circular 8/62 have long since been carried out, the number of dental officers has not increased.

It is with sincere thanks that the Health Department acknowledges the willing help from our opposite numbers in the Education Department. The Committee, as always, has been most sympathetic to all items placed before them and I am grateful for their help.

R. GLENN,

Principal School Medical Officer.

HEALTH DEPARTMENT,

1 Bargate, Grimsby.

April, 1966.

GRIMSBY COUNTY BOROUGH EDUCATION COMMITTEE*The Worshipful the Mayor*—Alderman D. E. PETCHELL, C.B.E., J.P.*Chairman*—Alderman J. H. FRANKLIN,*Vice-Chairman*—Councillor Miss J. B. B. McLAREN,

Alderman	A. H. CHATTERIS,	Councillor	A. NEILSON,
"	Mrs. M. LARMOUR,	"	G. H. PEARSON,
"	Mr. M. LARMOUR,	"	W. PEARSON,
"	W. J. MOLSON,	"	A. PETERS, J.P.
"	C. J. MOODY,	"	K. PRESCOTT,
"	J. P. MURPHY,	"	P. J. C. SHEMWELL,
Councillor	W. J. BAILEY,	"	A. SHEPHERD,
"	T. N. BAXTER,	"	A. W. STEADMAN,
"	G. H. BERRETT,	"	Mrs. M. E. TUXWORTH,
"	G. R. BERRETT,	"	W. E. WILKINS,
"	A. BRADLEY,	"	J. A. WINN,
"	Mrs. O. G. DEER,		
"	Mrs. M. ELLIOTT,		Mrs. M. M. BARKER,
"	Mrs. D. A. EMPTAGE,		Mr. M. B. LLOYD, M.A.
"	Mrs. F. E. FRANKLIN, J.P.		Mr. G. W. RADGE, M.Sc.,
"	L. GOSTELOW,		Mr. E. SMITH,
"	I. C. HANSON,		Mrs. F. SMITH,

Director of Education—R. E. RICHARDSON, M.S., Ph.D.**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., F.R.S.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. (res: 11.12.65)

School Medical Officers—

JOHN G. J. COGHILL, M.B., Ch.B. (res: 31.10.65)

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

MARGARET FISHER SMITH, M.B., Ch.B.

J. BUCKINGHAM, M.B., Ch.B. (appt: 1.11.65)

Principal Dental Officer—

GEOFFREY S. WATSON, B.D.S., L.D.S.

Dental Officer—

PAUL W. GENNEY, B.D.S.

Part-time Dental Officers—

DONALD W. HUNT, L.D.S., R.C.S., (Eng.) (res: 31.5.65)

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

CHARLES B. G. MAJOR, L.D.S., R.C.S., (Eng.) (res: 30.6.65)

Part-time Specialist Anaesthetist—

F. M. MACDONAGH, M.R.C.S., L.R.C.P.

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, Miss H. NUNNS, Miss E. WEBSTER.

School Nurses—

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

Clinic Nurses—

Mrs. G. WHITEHALL, Mrs. I. MILLS (res: 13.11.65), Mrs. W. MASON, Mrs. A. FLEMING (appt: 3.5.65), Mrs. E. J. GUILLIATT (appt: 6.12.65).

Dental Attendants—

Mrs. M. FINNIE, Miss S. M. CASH, Miss P. WILES, Mrs. J. HARNIESS (part-time).

Clerical Staff—

Miss A. ROBERTS, Miss J. OAKES (res: 14.8.65), Miss L. HUTCHINSON, Miss J. WARRENDER (appt: 1.9.65), Mrs. M. AYLOTT (Dental).

GENERAL INFORMATION

Home population at all ages (estimated at 30th June, 1965) 95,150.

Estimated child population (30th June, 1964).

Under 1 year	..	..	1,850
1 to 4 years inclusive	..	..	7,550
5 to 14 years inclusive	..	..	15,600
			<hr/>
Total under 15 years	..	..	25,000
			<hr/>

Primary Schools*Number on Rolls*

Number of schools	..	..	20	10,406
Number of departments	..	..	37	

Secondary Schools

Number of schools	..	..	5	3,083
Number of departments	..	..	8	

Secondary Grammar and Technical Schools

Grimsby Wintringham Boys' Grammar School	..	553
Grimsby Wintringham Girls' Grammar School..	..	576
Havelock School .. .. .	..	897
Technical School .. .. .	..	599
Hereford Comprehensive School	973

Special School

Carnforth Day Special School	..	140
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Nursery School

Nunsthorpe Nursery School	..	45
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Total number of pupils on rolls (January, 1966)	..	17,272
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**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 who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED	
		Satisfactory	Unsatisfactory
		No.	No.
(1)	(2)	(3)	(4)
1961 and later	76	76	—
1960	895	893	2
1959	563	563	—
1958	99	99	—
1957	12	12	—
1956	65	64	1
1955	51	51	—
1954	1,164	1,164	—
1953	571	570	1
1952	66	66	—
1951	402	402	—
1950 and earlier	1,324	1,324	—
TOTAL	5,288	5,284	4

Col. (3) total as a percentage of Col. (2) total 99.92 per cent
 Col. (4) total as a percentage of Col. (2) total 0.08 per cent

} to two places
 of decimals.

TABLE A. — PERIODIC MEDICAL INSPECTIONS — (continued)

No. of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
	for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
(5)	(6)	(7)	(8)
—	—	—	8
—	1	118	100
—	1	115	105
—	—	13	13
—	—	6	5
—	—	7	7
—	—	2	2
—	57	175	211
—	26	79	102
—	—	—	—
—	28	17	42
—	66	136	187
—	179	668	782

TABLE B.—OTHER INSPECTIONS

Number of Special Inspections	360
Number of Re-inspections	39
TOTAL	399

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	28,269
(b) Total number of individual pupils found to be infested	496
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	90
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	46

**PART II—DEFECTS FOUND BY PERIODIC AND SPECIAL
MEDICAL INSPECTIONS DURING THE YEAR**

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 ...	11	60	24	35	46	62	81	157
5	Eyes—								
	a. Vision ...	2	12	94	220	83	177	179	409
	b. Squint ...	10	49	3	18	5	46	18	113
	c. Other ...	4	9	2	1	—	10	6	20
6	Ears—								
	a. Hearing ...	6	2	3	7	2	10	11	19
	b. Otitis Media ...	3	27	—	11	2	19	5	57
	c. Other ...	—	7	—	8	—	3	—	18
7	Nose and Throat	21	206	3	47	9	101	33	354
8	Speech ...	2	35	—	4	—	36	2	75
9	Lymphatic Glands	8	59	2	10	—	17	10	86
10	Heart ...	4	8	3	10	4	20	11	38
11	Lungs ...	4	53	—	28	1	43	5	124
12	Develop-mental—								
	a. Hernia...	—	3	—	—	—	4	—	7
	b. Other ...	1	16	2	10	3	30	6	56
13	Orthopaedic								
	a. Posture ...	—	—	—	—	—	3	—	3
	b. Feet ...	15	22	—	7	3	26	18	55
	c. Other ...	2	41	2	24	3	44	7	109
14	Nervous System—								
	a. Epilepsy ...	2	11	—	8	—	13	2	32
	b. Other ...	—	6	—	2	—	4	—	12
15	Psychological								
	a. Develop-ment ...	—	8	—	2	—	3	—	13
	b. Stability ...	—	21	—	5	—	139	—	165
16	Abdomen ...	3	7	—	3	2	13	5	23
17	Other ...	2	9	2	18	3	10	7	37

PART II—(continued) SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)
4	Skin	27	—
5	Eyes— <i>a.</i> Vision	1	—
	<i>b.</i> Squint	1	—
	<i>c.</i> Other	—	—
6	Ears— <i>a.</i> Hearing	1	—
	<i>b.</i> Otitis Media	2	—
	<i>c.</i> Other	—	—
7	Nose and Throat	—	5
8	Speech	—	2
9	Lymphatic Glands	—	—
10	Heart	—	1
11	Lungs	—	—
12	Developmental—		
	<i>a.</i> Hernia... ..	—	—
	<i>b.</i> Other	—	5
13	Orthopaedic—		
	<i>a.</i> Posture	—	—
	<i>b.</i> Feet	2	—
	<i>c.</i> Other	—	3
14	Nervous system—		
	<i>a.</i> Epilepsy	—	—
	<i>b.</i> Other	—	—
15	Psychological—		
	<i>a.</i> Development	—	—
	<i>b.</i> Stability	—	—
16	Abdomen	—	—
17	Other	6	—

**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	14
Errors of refraction (including squint)	340
Total	354
Number of pupils for whom spectacles were pres- cribed	252

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	12
(b) for adenoids and chronic tonsillitis	312
(c) for other nose and throat conditions	38
Received other forms of treatment	16
Total	378
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1965	3
(b) in previous years	1

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients depart- ments	185
(b) Pupils treated at school for postural defects	—
Total	185

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	18
Impetigo	6
Other skin diseases	6
Total	30

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	400

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	538
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	—
(c) Pupils who received B.C.G. vaccination ...	1,405
(d) Other than (a), (b) and (c) above.	
Please specify :	
1—Respiratory System ...	6
2—Cardio-Vascular System ...	17
3—Alimentary System ...	109
4—Central Nervous System ...	12
5—Genito-Urinary System ...	43
6—Other conditions not speci- fied.	32
Total (a)—(d)	2,162

**PART IV—DENTAL INSPECTION AND TREATMENT
CARRIED OUT BY THE AUTHORITY DURING
THE YEAR ENDED 31st DECEMBER, 1965**

1. ATTENDANCES & TREATMENT

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	1,557	1,914	463	3,934
Subsequent visits	871	2,734	709	4,314
Total visits	2,428	4,648	1,172	8,248
Additional courses of treatment commenced	71	104	24	199
Fillings in permanent teeth	414	2,758	1,369	4,541
Fillings in deciduous teeth	194	60	—	254
Permanent teeth filled	333	2,077	984	3,394
Deciduous teeth filled	164	45	—	209
Permanent teeth ex- tracted	294	1,235	398	1,927
Deciduous teeth ex- tracted	2,496	911	—	3,407
General anaesthetics	1,116	723	97	1,936
Emergencies	794	421	44	1,259
Number of Pupils X-rayed ... ..	...	...	...	162
Prophylaxis ... ..	...	...	...	512
Teeth otherwise conserved ... ..	...	...	...	38
Number of teeth root filled ... ..	...	...	...	46
Inlays ... ..	...	...	...	6
Crowns ... ..	...	...	...	54
Courses of treatment completed ... ..	...	...	...	3,359

2. ORTHODONTICS

Cases remaining from previous year	...	...	...	48
New cases commenced during year	...	...	...	95
Cases completed during year	...	...	...	44
Cases discontinued during year	...	...	...	2
No. of removable appliances fitted	...	...	...	139
No. of fixed appliances fitted	...	...	...	1
Pupils referred to Hospital Consultant	...	...	...	2

3. PROSTHETICS ... 5 to 9 10 to 14 15 and over Total

Pupils supplied with F.U. or F.L. (first time)	—	2	1	3
Pupils supplied with other dentures (first time)	4	52	35	91
Number of dentures supplied	4	61	45	110

4. ANAESTHETICS

General Anaesthetics administered by Dental Officers	...	441
--	-----	-----

5. INSPECTIONS

(a) First inspection at school. Number of Pupils	...	6,902
(b) First inspection at clinic. Number of Pupils	...	1,640
Number of (a) + (b) found to require treatment	...	4,873
Number of (a) + (b) offered treatment	...	4,871
(c) Pupils re-inspected at school clinic	...	184
Number of (c) found to require treatment	...	124

6. SESSIONS

Sessions devoted to treatment	...	970
Sessions devoted to inspection	...	39
Sessions devoted to Dental Health Education	...	—

MEDICAL INSPECTIONS

General condition of pupils inspected.—Of the 5,288 children medically examined, 5,284 (or 99.92%) were classified as satisfactory, and 4 (0.08%) as unsatisfactory.

The number of pupils paying for school dinners was 7,676 and 610 were receiving them free. The number of children taking school milk was 13,745 each day.

Uncleanliness.—Cleanliness inspections are carried out at regular intervals at various schools by school nurses, with statutory notices being issued to parents where indicated. Facilities are available at both school clinics for children's hair to be treated by a trained nurse in cases who repeatedly attend school in a verminous condition. A clinic nurse is in daily attendance at both School Clinics and D.D.T. preparation is issued free to parents with full instructions as to how to carry out the necessary treatment.

The following gives the details of inspections with a comparison shown in brackets for the previous year:—

Total inspections	28,269	(34,450)
Number of individual pupils found to be infested	496	(685)
Number of pupils found to be unclean at the time of routine medical inspections	41	(63)

Diseases of the skin.—The incidence per one thousand inspections of all skin diseases found at routine medical inspections during the last five years is as follows:—

	1961	1962	1963	1964	1965
All skin diseases	3.4	4.1	4.3	2.6	8.1
Scabies	0.1	—	—	0.1	—

The following shows the number of cases of the contagious skin diseases seen by the Medical Officer and treated at the School Clinics during the same period:—

	1961	1962	1963	1964	1965
Scabies	12	8	12	1	18
Impetigo	20	11	11	17	6

No cases of ringworm of scalp or body came to notice in this five yearly period.

School Clinics.—There are two school clinics — one in Milton Road, Nunsthorpe and the other at 34 Dudley Street — 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 1,201 and attendances totalled 5,876.

Special clinics were 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 304 children (143 new cases), and glasses were prescribed for 252. Attendances numbered 447 and no cases of eye disease were referred from the school clinic.

Diseases of the Ear, Nose and Throat.—

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

Number tested	603
Number found satisfactory	596
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 33. These were classified as follows:—

Chronic tonsillitis	25
Adenoids only	1
Chronic tonsillitis and adenoids	1
Other conditions	6

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

(c) **Diseases of the Ear.**—Twenty-seven new cases of otitis media and 7 old were examined at the School Clinic. Of the 34 cases seen, 5 were referred to the E.N.T. Specialist on account of deafness.

Heart Diseases and Rheumatism.—Ten consultative clinics were held at the Milton Road Clinic, at which 48 cases (7 new) made a total of 52 attendances.

Orthopaedic Clinic.—Sixteen consultative sessions were held at the Dudley Street Clinic, where 129 cases (33 new) made a total of 126 attendances.

HANDICAPPED PUPILS AND SPECIAL SCHOOLS REGULATIONS, 1959.

(As on January 28th, 1966.)

Categories of Handicapped pupils	Number at ordinary school.	Number at special school.	Number not at school.
Blind	—	2	—
Partially sighted ...	—	3	—
Deaf	—	6	—
Partially hearing ...	—	1	—
Educationally sub-normal ...	9	114	—
Epileptic	20	1	—
Maladjusted ...	—	3	2
Physically handicapped	—	6	2*
Speech defect ...	—	—	—
Delicate	—	1	—

* receiving home tuition.

Infectious Diseases.—No school or department was closed on account of communicable disease during 1965.

The incidence of notifiable disease in children aged 5 to 15 years was as follows, the figures in brackets indicating the numbers notified in 1964.

Scarlet fever 53 (36); measles 226 (765); whooping cough 21 (10); chickenpox 179 (173); dysentery 43 (57); pneumonia 1 (2); acute rheumatism 9.

In addition 10 children of school age were notified under the Public Health (Tuberculosis) Regulations, 1952, as suffering from pulmonary tuberculosis. Unfortunately this is an unusually high figure especially as four of these children were from the same family. The normal average is about 4 per year and in 1964 there were 3 notified cases of pulmonary tuberculosis.

B.C.G. Vaccination.—This work continued in the normal way with routine vaccination being offered to pupils over the age of 12 years, and the number to receive B.C.G. vaccination was 1,405. The scope of the school B.C.G. programme has now been extended to provide for children with positive skin test reactions to be given an opportunity for X-ray examination at the Chest Clinic. On Heaf testing it is found that the number of positives is gradually decreasing and represents at the present time about 8 per cent. The number of children dealt with during the past five years was as follows:—

<i>Year</i>							<i>Number Vaccinated</i>
1961	..	..	..	..	..	..	926
1962	..	..	..	..	..	..	1,091
1963	..	..	..	..	..	..	1,062
1964	..	..	..	..	..	..	1,015
1965	..	..	..	..	..	..	1,405

Tuberculin survey in schools.—This year was particularly bad in that there were 10 children of school age notified suffering from tuberculosis. In one family there were 4 cases and consequently tuberculin surveys were undertaken. In January a junior school was surveyed and all class contacts were negative, and in September three schools were investigated with the result that 3 children out of 116 were referred to the Chest Clinic for X-ray examination.

Diphtheria immunisation.—Special diphtheria immunisation sessions were conducted at school premises in conjunction with medical inspections and of the following details 177 primary and 1,944 maintenance injections were carried out in schools.

<i>Primary immunisation</i>		<i>Reinforcing injections</i>	
Under 5 years	1,503	Under 5 years	81
5 to 15 years	264	5 to 15 years	2,089
	<hr/> 1,767		<hr/> 2,170

The total primary immunisations for the previous year was 1,710 and reinforcing injections numbered 1,949.

Poliomyelitis vaccination.—The number of children to receive the complete course of ORAL vaccine was as follows:—

Under 5-years	..	..	..	..	..	..	1,504
5 - 15 years	..	..	..	..	..	..	84
Total							<hr/> 1,588 <hr/>

Reinforcing doses	..	..	..	..	..	564
The total primary immunisations for the previous year was	..	..	..	..	..	1,512

It is also pleasing to report that once again there was no case of poliomyelitis reported during the year.

Employment Certificates.—Certificates were issued to 227 school children who were engaged in particular employment after school hours.

Provision of Clothing.—Clothing was supplied to 416 children at a cost of £2,058.

DENTAL SERVICE

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

This year has seen a further reduction in professional staff through the resignation of two part-time dental officers. The present staff constitutes two full-time dental officers, including the writer, and one part-time dental officer who provides one morning session per week.

However, an encouraging step has been taken by this authority in allowing participation in general practice out of duty hours, and it is to be hoped that next year will see an increase in the staffing position through the improvement in the conditions of service.

During the past year 6,902 pupils have been inspected at 16 primary and 3 secondary schools. Together with 1,640 inspections at the clinics, the pre-school age children and nursing and expectant mothers, a total of 8,918 were inspected. Almost half of the school children of Grimsby thus received an inspection.

As a result of the school inspections more children in the primary school age groups were treated than the previous year when mainly school children in the secondary schools were treated. Generally speaking, as far as conservation is concerned, it is found that less can be accomplished per visit as the age of the child decreases.

It has been encouraging to note at the school inspections that the general dental health of school children is improving, and that more children are seeking and obtaining dental treatment. Compared with some 14 years ago, there has been a definite improvement in child dental health in Grimsby, and that this improvement has become more noticeable over the last five or six years. However, there is still much room for improvement, especially in the 5-9 year age groups. This group, as can be imagined, calls for much patience and time if it is to be introduced to dentistry successfully.

In the treatment returns, as requested by the Department of Education and Science, there are operations which are not listed, and these items become lost as a record of time spent by being entered as 'miscellaneous' items. Such items as apicectomies, surgical extractions and the treatment of fractured incisors are to name some of these treatments. Associated with the latter item is the number of crowns fitted during the year, and most of these were of the porcelain jacket type.

These items of treatment are outside the general run of day-to-day dentistry in that they are more time consuming and intricate in their execution. As school dental officers it is incumbent upon us to provide these treatments to our young patients for their benefit when necessary, and more so in these times as a result of the fairly recent outstanding improvements in materials and equipment.

It is regretted that this Authority has not found it possible to fluoridate the drinking water in spite of the evidence in support of such a public health measure.

My thanks are due to the Health and Education Department of Grimsby, and to the members of my staff.

CHILD GUIDANCE SERVICE

Dr. W. G. K. Rubery, Assistant Educational Psychologist, submits the following report for the year ending 31st December, 1965.

1.—Staff: The full-time members of staff at the Child Guidance Centre are Mr. W. G. K. Rubery, Assistant Educational Psychologist, Mr. T. D. MacKenzie, Remedial Teacher/Psychological Tester, Mrs. M. N. Green, Remedial Teacher and Mrs. D. M. Tomlinson, Secretary-Receptionist.

By arrangement with the Sheffield Regional Hospital Board, Dr. J. F. R. Goodlad, Consultant Psychiatrist and Medical Superintendent of the Lawn Hospital, Lincoln, has attended the Centre for two sessions each week. On occasions Dr. D. J. Buchanan, his senior assistant, has attended.

2.—General Comment: The Child Guidance Service provides a psychological service for the schools and a child and family psychological and psychiatric service. During the year 215 new cases were referred, this figure being roughly comparable with the figure for 1964. In addition, 186 old cases were dealt with during the year. This figure shows a decrease on the figure for 1964 when 202 old cases were seen. This decrease, however, does not necessarily indicate any significant reduction in the quantity of work to be undertaken.

Despite staff shortages every effort is being made to ensure that advice and treatment are given as soon as possible. If a child has a problem then the parents naturally want help without delay. This we try to supply. The efficiency of this service depends on close co-operation with the schools, the School Health Service, family doctors and consultants and the Probation and Children's Departments. Special mention should be made of the support and help afforded by Dr. R. E. Richardson, Director of Education, Dr. Glenn, Medical Officer of Health, Grimsby and their colleagues. This makes our task much easier.

3.—Summary of Statistics:

Number of children referred during 1965	..	..	..	215
New cases dealt with at the centre during 1965	..	..	..	214
Old and new cases dealt with in 1965	..	..	..	400
Children dealt with during 1965 in remedial classes	..	..	..	707
Children dealt with during 1965 in hospital classes	..	..	..	483

A. Cases closed, current and awaiting interview

No. of cases current on 31st December 1965	..	..	..	199
No. of cases closed in 1965	..	..	..	207
No. of children awaiting initial interview	..	..	..	6

B. Particulars of children referred in 1965

1. Total number of new cases	..	..	..	..	..	..	..	215
2. Ages at time of referral:								
Below 5	..	..	..	..	..	..	..	13
5 but not 6	..	..	..	..	..	..	..	11
6 " " 7	..	..	..	..	..	..	..	32
7 " " 8	..	..	..	..	..	..	..	23
8 " " 9	..	..	..	..	..	..	..	20
9 " " 10	..	..	..	..	..	..	..	23
10 " " 11	..	..	..	..	..	..	..	19
11 " " 12	..	..	..	..	..	..	..	18
12 " " 13	..	..	..	..	..	..	..	14
13 " " 14	..	..	..	..	..	..	..	14
14 " " 15	..	..	..	..	..	..	..	17
15 and over	..	..	..	..	..	..	..	11

Details of work at the Child Guidance Centre during 1965

Of the 215 new cases referred during the year 66% of the children were aged under 11 years. This trend towards earlier age of referral is an encouraging sign, for in general, difficulties are more easily dealt with before they have had too much time to become more firmly established. The age range 6-7 years provide the largest number of cases in an age group.

C. Sex

Boys	..	..	..	..	..	..	..	..	147
Girls	..	..	..	..	..	..	..	..	68

As in previous years, twice as many boys as girls were referred to the Centre. It would not, however, be true to infer from this that boys are twice as prone to psychological difficulties as are girls. The children seen here are a selected group, they are seen to have difficulties, and the more likely explanation is that the problems with boys are more likely to attract attention and that girls with difficulties are more likely to be overlooked.

4. Reasons for referral

	Boys	Girls	Total	%
Mental or personality assessment	35	22	57	27
Difficult behaviour	59	17	76	35
Emotional problems	14	13	27	13
Educational guidance	11	7	18	8
Habit disorders	16	6	22	10
Failure to progress at school	9	5	14	6
Other	—	1	1	1

The reason given at the time of referral in general provides only a very rough indication of the difficulties discovered when seen by the staff of the Centre. The categories are not mutually exclusive, for example, a boy referred for difficult behaviour may well have an emotional problem and it may well be that he is also failing to make satisfactory progress at school.

5. Source of referral

		%
Parents	18	8
Headteachers	107	50
M.O.H. and his staff	12	6
Director and his staff	15	7
General practitioners or consultants	31	14
Children's Officer and Magistrates	26	12
Probation Officers	2	1
Other	3	2

Again the source of referral gives an indication of the educational bias of this service, 57% of all new cases having been referred either by the head teachers or by the Director of Education and their staff. Parents were responsible for referring children in 8% of cases and in addition children were often referred after the parent had discussed the problem with either the head teacher or with the doctor.

6. Cases from previous years dealt with in 1965

Number of children referred in 1964 but not interviewed until 1965	5
Number of children interviewed in 1965 who had been interviewed in previous years	186

D. Analysis of Interviews

1. Interviews with children by:

Assistant Educational Psychologist	537
Psychiatrist	124
Remedial Teacher	1,335

2. Interviews with parents by:

Assistant Educational Psychologist	525
Psychiatrist	152
Remedial Teachers	690

3. School visits by:

Assistant Educational Psychologist	75
Remedial Teachers	336

4. Home visits by:

Assistant Educational Psychologist	33
Remedial Teachers	113

E. Closures during 1965

1. Total Number	207
2. Reason for closure:	
(a) No treatment required. Diagnosis followed by report or advice	69
(b) Child transferred	24
(c) Parents did not accept offer of treatment	15
(d) Problem cleared by time of interview	6
(e) Cases given regular treatment interviews, supportive treatment or advice and when followed up were found to be suitable for closure because:	
Condition Satisfactory	54
Improvement	39
No change	—

Of the 207 cases closed during the year, 69 were cases closed after advice had been given to the parents, no treatment having been needed. This gives some indication of the advisory function of the Centre. If we consider that we have failed to help those 15 cases in which parents did not accept offer of treatment and we include those with cases closed after regular treatment then the success rate is as follows:—

50% of cases closed satisfactory

36% of cases closed improved

14% of cases closed no change

F. Composition of Case Load on 31st December 1965

1. Total number of children	199
2. (a) Number awaiting initial interview	6
(b) Number whose progress requires following up	62
(c) Number being treated by:	
Assistant Educational Psychologist	67
Psychiatrist	28
Remedial Teachers	36
3. Number referred before 1st January 1965 and still current on 31st December 1965	85
Number referred in 1965 and still current (including "follow-ups" and "waiting appointments")	114

PART THREE**Special Educational Treatment****Statutory Examinations under Sections 34 or 57 of the Education Act**

1. Age:	2	3	4	5	6	7	8	9	10	11	12	13	14
Number of Children	2	—	—	4	1	3	7	3	3	3	1	—	1

2. Sex:

Boys: 15 Girls: 13 Total: 28

3. Recommendation:

Day Special school for educationally sub-normal children (Carnforth)	18
Junior Training Centre or institution for mentally handicapped children	9
Residential special school for psychologically disturbed children	1

PART FOUR

Remedial Teaching in Schools

This service exists to help children of limited ability with impoverished background, also brighter children who through illness, many changes of school or adjustment problems, have fallen behind with their school work. Without such help many of these children would find it difficult, if not impossible, to profit from normal class teaching.

During 1965, 707 children received remedial help in the following Grimsby schools:—

St. John's Junior School	Mrs. Coop	— 5 sessions
South Parade Junior School	Mrs. Coop	— 5 „
Nunthorpe Junior Boys' School	Mrs. West	— 4 „
Welholme Junior Boys' School	Mrs. West	— 3 „
Edward Junior School	Mrs. West	— 3 „
Old Clee Junior School	Mrs. Howe	— 5 „
Welholme Senior Girls' School	Mrs. Somerville	— 2 „
Little Coates Junior School	Mrs. Lawley	— 5 „
Weelsby Junior Boys	Mrs. Walsham	— 1½ „
Weelsby Junior Girls' School	Mrs. Walsham	— 1½ „
St. Mary's Junior School	Miss Hall	— 3 „
Grange Junior School	Mrs. Leake	— 5 „

These children are accounted for as follows:—

Total Number of children now receiving remedial teaching ..	461
Discharges — reading to capacity	200
— transferred to Secondary Schools	20
— left district	21
— low innate ability	5
	<hr/> 707

Staff

In the Borough there are two full-time teachers and six part-time teachers. Mrs. West and Mrs. Coop are employed full-time and Mrs. Howe, Mrs. Walsham, Miss Hall, Mrs. Somerville and Mrs. Leake part-time. Mrs. Lawley resigned in December.

PART FIVE

Education of Children in Hospital

	Scartho	G. & D.	Total
Number of pupils during 1965 ..	143	340	483
Number of sessions during 1965 ..	172	243	415

The hospital teachers, Mrs. E. Blackbourne and Mrs. F. Ingham, continue to provide help for children in the hospitals, both to prevent them from losing ground in their work because of absence from school and to occupy them, thus reducing boredom and homesickness.

PHYSICAL EDUCATION

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

The year was one of progress in every sphere of physical activity undertaken in the schools. Improvements in facilities enabled many more pupils to obtain the benefits associated with modern buildings and playing areas.

The overall pattern of physical education undertaken remained substantially the same as that carried out during recent years. At primary level the emphasis was placed on the experimentation of movement using percussion instruments, piano, radio, dance/drama and small and large apparatus to assist in this. This gave way to a more specialised approach at secondary level with emphasis on the provision of a wide range of games and activities, some demanding a high degree of individual skill and prowess and others suitable for the great majority of pupils possessing only average ability.

Close liaison was maintained with the Youth Service and the successful sharing of facilities and equipment between schools and clubs continued. Whilst the link between schools and L.E.A. youth clubs has now been firmly established, there is still little evidence of a real link-up with adult clubs by either the older pupils attending school or others of the sixteen to twenty-one age group. This is a national problem, and current thought favours more centralised activity areas where the general population can meet for games, sports and activities. This would enable a natural transference from junior to senior activity and with it a bridging of the seventeen to twenty-one years 'gap'.

Once again there were outstanding results achieved in swimming, now firmly established in the curriculum of every primary junior and secondary school. This Authority might well become the first to claim 'every child a swimmer'.

Primary Schools.—The main emphasis in the infant departments was on activity which allowed a wide range of movement, incorporating experience in time, weight and space. Full use was made on the climbing apparatus to assist in the development of more movement shapes whilst at the same time developing self-confidence, strength and mobility. Most schools included the music and movement lessons broadcast by the B.B.C. These still remain a popular feature of infant activity. Good use was made of the piano, record player or percussion instruments for other lessons.

The junior schools widened the scope of the primary school physical education by improving and increasing the number of skills taken in the infant departments and by participation in a series of sports competitions.

Secondary Schools.—Most schools carried out an all round training of physical activities for their younger pupils and most of them gave an optional choice of activity to the pupils in the upper part of the school. This was in keeping with the Newsom Report, 1963, paragraph 407: "Variety of provision, a degree of choice, both in the activity undertaken and in the amount of time given to physical education, are all desirable for the older pupils, but not easy to contrive".

For a number of years our schools have been giving their pupils training in a comprehensive selection of games and activities. This feature was carried on during 1965 and conforms with the Newsom Report, paragraph 402: "The essential needs in physical education for many older pupils could perhaps be summed up in the words variety, choice, better facilities, and links with adult organisations".

A selection from thirty or more different physical activities was taken by most schools, most development being shown in basketball, trampolining and swimming. It was noticeable that there was a renewed and growing interest in pure gymnastics, once the acme of physical training. Once again a great deal of physical education was carried on out of school hours. Most schools had clubs which the pupils attended during lunch time or after school. In some cases lack of specialist staff restricted this work. If it is to extend fully much more help is needed from other members of staff for, under present arrangements, the physical education teachers cannot coach and supervise all activities. This, again, is a national problem and will need to be solved before all pupils will be enabled to take part in many activities of their choice.

Although a wider range of activities was held the major games still continued to be popular. Many competitions were organised at a low level standard which enabled very many pupils to participate. Many schools used to the full the house system for competition and all schools produced selected teams which took part in inter-school competitions. Our schools again competed in a number of country competitions held annually. An innovation this year was the holding of the Inter-Secondary School Athletic Sports on the King George V Athletic Track. Unfortunately, the weather conditions spoilt what could have been a very enjoyable occasion.

Cross country running figured prominently in the winter programme for secondary school boys.

Tennis maintained a growing interest with both boys and girls, and although the weather conditions often proved a hindrance many school and inter-school fixtures took place.

Netball also continued to hold first place in the winter games for girls. Schools competed in two sections in the local leagues and Western Secondary Girls' School, who were runners-up in the Lincolnshire Schools' Netball Tournament, were chosen to represent Lincolnshire in an Inter-County Tournament held at Lincoln.

The playing of hockey depends to a great degree on the state of pitches and although further progress was made in several of the schools, this game would probably increase in popularity if regular training could be ensured. A hard surface playing area would enable this to take place. Interest in hockey for boys was shown and this might figure in future winter games for some boys.

The steady supply of trampolines either to schools or on loan to schools resulted in popularising this activity and all schools reported great enthusiasm for this sport.

Camping, sailing and canoeing were undertaken at some schools. These informal outdoor pursuits again depended largely on the willingness of members of staff to give freely of their time. In recent years there has been a striking national development in this type of activity which does not necessarily require

the co-ordinated skills associated with many team games. It is hoped to implement a pilot scheme for these and other activities in the physical education programme of pupils at the Hereford School, and it is expected that this scheme will have a wide appeal to many pupils.

Swimming.—A survey of primary schools taken on 1st June, 1965 showed that over 82% of all pupils in their fourth year could swim, and another survey taken on the same date showed that 78% of all pupils attending secondary schools could swim.

Approximately four thousand pupils receive swimming instruction during a full week.

1,594 pupils were taught to swim (1,320 primary, 374 secondary).

All suitable pupils entered for the awards of the Amateur Swimming Association, the record being as under:—

Personal Survival Awards of the A.S.A.

Bronze Award:	Primary	332	
	Secondary	548	
		—	880
Silver Award:	Primary	98	
	Secondary	332	
		—	430
Gold Award:	Primary	10	
	Secondary	155	
		—	165
Grand Total			1,475

It was considered that in addition to pupils being trained to look after themselves by personal survival, it would be beneficial if they were trained to help others in distress. The awards of the Royal Life Saving Society were, therefore, introduced, the record being as under:—

Royal Life Saving Society Awards

Elementary Award:	Primary	93	
	Secondary	580	
		—	673
Intermediate Award:	Primary	—	
	Secondary	62	
		—	62
Bronze Medallion:	Primary	—	
	Secondary	15	
		—	15
Grand Total			750

At the end of the Summer Term, many of the secondary schools held their own swimming galas at the Grimsby Swimming Pool. These galas were held with great enthusiasm and since many pupils were able to take part on each occasion, this type of competition has been encouraged.

For the more competent swimmers, the usual inter-school galas were organised.

The primary schools, too, held a very successful inter-schools gala at the end of the Summer Term. The high standard of performance of the swimmers showed that great progress has been made during the year.

School Camp, Humberston.—The Y.M.C.A. Humberston Camp was again used during the Summer Term for parties of children from primary and secondary schools. In groups of 65, they attended weekly for eight weeks from Mondays to Fridays.

At present approximately five hundred pupils obtain the benefits of this camp each year. Started as an experiment in 1959, the camp is now regarded by many schools as a very desirable permanent feature of their summer programme. Request from schools to attend have risen each year and although the number of allocations have been increased, it may be necessary to consider the possibility of hiring this camp throughout the Summer Term in order to meet all requirements.

Headteachers have continually expressed the value of this week's camp from social, moral and physical aspects. The recent improvements carried out at the camp have enabled this experience in communal life to be undertaken in very satisfactory conditions.

Playing Fields and Other Facilities.—Whenever weather conditions allowed, all grass playing fields were well used, but on occasions matches had to be cancelled both during normal games periods and after school. This causes annoyance and frustration. The use of all-weather surfaces would greatly alleviate this position. It has been announced that the Department of Education and Science is shortly to produce a Bulletin on these matters and an extension in the use of these all-weather surfaces for many games will, I feel, be advocated.

At the end of the summer term, many of the secondary schools held their own swimming gala at the City of London Swimming Pool. These galas were held with great enthusiasm and some many points were made in the past few days. On this occasion, this type of competition has been restricted.

For the independent swimming, the annual inter-school galas were arranged. These galas were held at the City of London Swimming Pool. The primary schools, too, held a very successful inter-school gala at the end of the summer term. The high standard of performance of the swimmers shows that great progress has been made during the year.

School Camp, Humberston.—The Y.M.C.A. Humberston Camp was again used during the summer term for parties. Children from primary and secondary schools. In groups of 25, they attended weekly for eight weeks from Monday to Friday.

At present approximately five hundred pupils obtain the benefits of this camp each year. Started as an experiment in 1912, the camp has since expanded by many schools as primary, secondary, and grammar. Regular reports from schools to the camp have been made each year and although the numbers of children have been increased, it may be necessary to consider the possibility of using the camp throughout the summer term in order to meet all requirements.

Headteachers have continually expressed the value of this work's camp from social, moral and physical aspects. The recent improvements carried out at the camp have enabled the camp to be continued in the summer term in very satisfactory conditions.

Playing Fields and Other Facilities.—Wherever weather conditions allowed, all grade playing fields were well used, but on occasions matches had to be cancelled both during normal games periods and after school. This caused annoyance and frustration. The use of all-weather surfaces would greatly assist in this situation. It has been suggested that the Department of Education should consider the possibility of providing all-weather surfaces for all schools. This would be a great help to all schools and would be a great improvement.

Primary Schools		Secondary Schools		Total
Year	Number	Year	Number	
1912-13	10	1912-13	10	20
1913-14	15	1913-14	15	30
1914-15	20	1914-15	20	40
1915-16	25	1915-16	25	50
1916-17	30	1916-17	30	60
1917-18	35	1917-18	35	70
1918-19	40	1918-19	40	80
1919-20	45	1919-20	45	90
1920-21	50	1920-21	50	100
1921-22	55	1921-22	55	110
1922-23	60	1922-23	60	120
1923-24	65	1923-24	65	130
1924-25	70	1924-25	70	140
1925-26	75	1925-26	75	150
1926-27	80	1926-27	80	160
1927-28	85	1927-28	85	170
1928-29	90	1928-29	90	180
1929-30	95	1929-30	95	190
1930-31	100	1930-31	100	200
1931-32	105	1931-32	105	210
1932-33	110	1932-33	110	220
1933-34	115	1933-34	115	230
1934-35	120	1934-35	120	240
1935-36	125	1935-36	125	250
1936-37	130	1936-37	130	260
1937-38	135	1937-38	135	270
1938-39	140	1938-39	140	280
1939-40	145	1939-40	145	290
1940-41	150	1940-41	150	300
1941-42	155	1941-42	155	310
1942-43	160	1942-43	160	320
1943-44	165	1943-44	165	330
1944-45	170	1944-45	170	340
1945-46	175	1945-46	175	350
1946-47	180	1946-47	180	360
1947-48	185	1947-48	185	370
1948-49	190	1948-49	190	380
1949-50	195	1949-50	195	390
1950-51	200	1950-51	200	400
1951-52	205	1951-52	205	410
1952-53	210	1952-53	210	420
1953-54	215	1953-54	215	430
1954-55	220	1954-55	220	440
1955-56	225	1955-56	225	450
1956-57	230	1956-57	230	460
1957-58	235	1957-58	235	470
1958-59	240	1958-59	240	480
1959-60	245	1959-60	245	490
1960-61	250	1960-61	250	500
1961-62	255	1961-62	255	510
1962-63	260	1962-63	260	520
1963-64	265	1963-64	265	530
1964-65	270	1964-65	270	540
1965-66	275	1965-66	275	550
1966-67	280	1966-67	280	560
1967-68	285	1967-68	285	570
1968-69	290	1968-69	290	580
1969-70	295	1969-70	295	590
1970-71	300	1970-71	300	600
1971-72	305	1971-72	305	610
1972-73	310	1972-73	310	620
1973-74	315	1973-74	315	630
1974-75	320	1974-75	320	640
1975-76	325	1975-76	325	650
1976-77	330	1976-77	330	660
1977-78	335	1977-78	335	670
1978-79	340	1978-79	340	680
1979-80	345	1979-80	345	690
1980-81	350	1980-81	350	700
1981-82	355	1981-82	355	710
1982-83	360	1982-83	360	720
1983-84	365	1983-84	365	730
1984-85	370	1984-85	370	740
1985-86	375	1985-86	375	750
1986-87	380	1986-87	380	760
1987-88	385	1987-88	385	770
1988-89	390	1988-89	390	780
1989-90	395	1989-90	395	790
1990-91	400	1990-91	400	800
1991-92	405	1991-92	405	810
1992-93	410	1992-93	410	820
1993-94	415	1993-94	415	830
1994-95	420	1994-95	420	840
1995-96	425	1995-96	425	850
1996-97	430	1996-97	430	860
1997-98	435	1997-98	435	870
1998-99	440	1998-99	440	880
1999-00	445	1999-00	445	890
2000-01	450	2000-01	450	900
2001-02	455	2001-02	455	910
2002-03	460	2002-03	460	920
2003-04	465	2003-04	465	930
2004-05	470	2004-05	470	940
2005-06	475	2005-06	475	950
2006-07	480	2006-07	480	960
2007-08	485	2007-08	485	970
2008-09	490	2008-09	490	980
2009-10	495	2009-10	495	990
2010-11	500	2010-11	500	1000

