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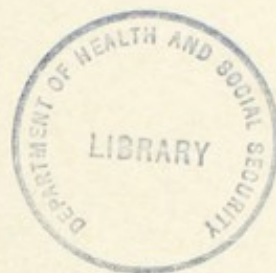
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HEREFORDSHIRE COUNTY COUNCIL



# ANNUAL REPORT


OF THE

COUNTY MEDICAL OFFICER

OF HEALTH

FOR THE YEAR

1968



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# Annual Public Health Report for 1968

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To the Chairman and Members of the Health Committee.

I have the honour to present my Report for 1968.

The estimated population was 141,990. The birth rate was 16.2 per 1,000 population, the death rate was 11.0 per 1,000 population, the infant mortality rate was 13.9 per 1,000 live births and the still birth rate was 16.3 per 1,000 live and still births.

Over the years, the County Health Service has developed. Changing need led to increases in some branches of the work and reduction in others. This is as it should be. In retrospect, we see the forward progress and have reason to be proud of it. We now provide an extensive range of personal health services. In the future doubtlessly there will be changes in the organisation and administration of the local health services but let us remember that the Health Committee have never looked upon the persons using the services merely as a collection of interesting statistics. Instead the Committee have seen them as individuals caught up with various problems requiring some assistance which the Committee are able to give them—indeed, to which the persons are entitled.

The co-ordination and co-operation of the County Health Department's services with the hospital and family doctor services has been maintained on much the same lines as in previous years. There have been limited attachment and liaison schemes between the County Health Department's domiciliary staff and family doctors.

Changes have taken place in the maternity services. The Herefordshire Hospital Management Committee provides accommodation for mothers where there is a probability of obstetric abnormality, for mothers with their first baby or fourth or more, or where their home social conditions are unsatisfactory. We now find that mothers want to stay in hospital only for 48 hours. Some are suitable for early discharge and care by the domiciliary midwifery service and this is arranged accordingly. With shorter stays in hospital theoretically more hospital accommodation should be available. In the future perhaps all mothers wishing to be admitted to hospital for confinement can be so admitted. The County Hospital, Hereford, is approved as a Part II Midwifery Training Centre. The staff of the County Health Department give lectures and practical district training for this course.

The National Health Service (Family Planning) Act, 1967, was implemented after a meeting between representatives of the County Council, the Severn and Wye Branch of the Family Planning Association and the Hereford, Leominster and Ross-on-Wye Family Planning Associations. It was decided that the County Council should accept full financial responsibility for social as well as medical cases.

We have continued the scheme by which the County Health Department is notified of congenital defects at birth. No definite patterns have emerged but the information given is of some help in giving such children closer supervision. The account of the 'at risk' register in the body of the Report makes interesting reading.

Adaptations were carried out to a house for a patient with a kidney machine. These were done so that the patient could have the sole use of a room with walls and ceiling to be made crack free and washable, large enough to contain a bed, dialysis equipment, a sink and storage space for one month's supply of sterile dressings. These were done under Section 28 of the National Health Service Act, 1946, the patient contributed on the basis of the Welfare Committee's approved assessment scheme.



The mental welfare officers provide a care and after care service for mentally disordered persons. They keep in close contact with them and their families, working closely with the family doctors and with the consultant psychiatrists. The community mental health services include Barrs Court Junior Training Centre, the Rockfield Road Adult Training Centre, the Special Care Unit at the Health Clinic, Gaol Street, Hereford, a Social Club for mentally disordered persons and residential accommodation for young men at Ivy House.

We do not find many early cases of pulmonary tuberculosis by miniature mass radiography. We have found quite a few women attending the cervical cytology clinic who require further investigation. This scheme has now passed through its experimental stage and is a useful procedure which, in certain cases, leads on to effective treatment.

No action has been taken on the fluoridation of the public water supplies.

Care of the elderly is of increasing importance. Not only are there more elderly, but an increasing number need support and can then remain in their own homes. Perhaps surprisingly, we have little demand for night attendants.

Chiropody for the elderly preserves their mobility and reduces need for residential care. We are able to cope with the demand and only several weeks elapse before the first appointment.

Consideration was given to the Seebohm Committee on Local Authority and Allied Personal Social Services. It was decided that it was impracticable to implement any of the major recommendations of the Committee at the present time pending the Report of the Royal Commission on Local Government. Preliminary consideration was given to the Green Paper on the Administrative Structure of Medical and Related Services in England and Wales, and arrangements were made for a joint meeting with the Herefordshire Executive Council and the Herefordshire Hospital Management Committee, to see if any formula could be decided upon for Herefordshire.

The Sheldon Report on Child Welfare Centres, made by a Sub-Committee of the Standing Medical Advisory Committee of the Central Health Services Council to the Ministry of Health, made a number of recommendations about the development of the child health services. A meeting of domiciliary nursing staff and the members of the voluntary committees of the Infant Welfare Centres was held and arrangements were made to implement many of the recommendations.

An interesting change during the year was the discontinuation of the Maternal and Child Health, Mental Health and Care Sub-Committees. Their work was transferred to the Health Committee. However, I do feel that I must not fail to mention the work and enthusiasm of the chairmen and members of these sub-committees.

I thank members of the County Council for their support and the staff for their hard work during 1968.

J. S. COOKSON,

*County Medical Officer.*

COUNTY HEALTH DEPARTMENT,  
35, BRIDGE STREET,  
HEREFORD.

## THE HEALTH COMMITTEE

(as at 31st December, 1968)

ALDERMAN MRS. A. J. PASKE  
(Chairman)

COUNCILLOR R. F. S. CLARKE  
(Vice-Chairman)

### *Aldermen:*

T. W. BARNES  
MISS S. G. DUNNE, J.P.  
LT.-COMMDR. G. GLENTON  
R. H. K. JOYCE

S. T. LAYTON  
W. D. PORTER  
S. R. SOUTHALL

### *Councillors:*

MRS. M. BRIERLEY  
R. B. BURKE  
MRS. S. P. CHANDLER  
J. DAVIES  
F. W. GREEN  
T. B. INGRAM  
S. T. JONES  
COMMANDER D. LAMPEN

E. L. LEWIS  
V. T. PREECE  
MRS. J. PRENDERGAST  
R. H. W. SKERRETT  
T. R. STEPHENS  
DR. D. C. VAUGHAN  
MISS R. G. VIRGO

### *Education Committee Representatives:*

COUNCILLOR E. W. G. BALLINGER

ALDERMAN MRS. A. J. PASKE

### *... Herefordshire Hospital Management Committee Representatives:*

MRS. P. SHELTON

MISS M. A. SMALLDON

### *Local Executive Council Representatives:*

DR. H. PARKES

J. P. WILLIAMS

### *Hereford City Council Representatives:*

COUNCILLOR E. E. HUNT

COUNCILLOR I. WILLIAMS

COUNCILLOR M. K. PRENDERGAST

(ONE VACANCY)

### *Co-opted Members:*

BRIG. H. S. J. BOURKE, D.S.O., O.B.E., M.C.,  
MRS. J. B. SENIOR

BRIG. D. D. ZVEGINTZOV, C.B.E.

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## THE PUBLIC HEALTH AND HOUSING COMMITTEE

(as at 31st December, 1968)

COUNCILLOR S. R. SOUTHALL  
(Chairman)

ALDERMEN S. T. LAYTON  
(Vice-Chairman)

### *Aldermen:*

T. W. BARNES  
K. V. JAMES-MOORE  
W. D. PORTER, J.P.

P. P. J. POWELL, J.P.  
T. L. STOKES  
L. J. WEST, J.P.

### *Councillors:*

MRS. M. BRIERLEY  
W. CHINN  
R. F. S. CLARKE  
J. T. DAVIES  
O. EDWARDS  
P. L. HUGHES

T. B. INGRAM  
E. L. LEWIS  
F. L. MALLESON  
N. M. POWELL  
B. H. TOWNSEND  
DR. D. C. VAUGHAN

## STAFF

### *County Medical Officer:*

J. S. COOKSON, M.A., M.D., D.P.H., Barrister-at-Law.

### *Deputy County Medical Officer:*

\*I. F. MACKENZIE, M.D., D.P.H., D.T.M. & H.

### *Assistant County Medical Officers:*

\*W. HOGG, M.B., B.S., D.P.H. (retired 7.6.68).

\*G. D. K. NEEDHAM, M.R.C.S., L.R.C.P., D.P.H.

J. G. HUNT, M.B., B.S., M.M.S.A.

VIVIEN P. HELME, M.B., CH.B., D.(OBST.), R.C.O.G.

H. M. KENT, M.B., CH.B., D.(OBST.), R.C.O.G.

\*J. SLEIGH, M.B., CH.B., D.P.H. (appointed 1.9.68).

### *Principal Dental Officer:*

O. S. BENNETT, L.D.S., R.C.S.ENG.

### *Supervisor of Midwives and Principal Nursing Officer:*

MISS E. O. ROBERTS, S.R.N., S.C.M., M.T.D., H.V.

There is an Assistant Nursing Officer.

### *Nursing Staff:*

A total establishment of 84 staff covers the domiciliary nursing, midwifery and health visiting services as combined duties in rural areas and mainly as specialised duties in urban areas including Hereford City.

### *Chief Administrative Officer:*

K. J. WILLIAMS.

\*Also District Medical Officers of Health.

This table shows the areas covered by the four District Medical Officers of Health:—

Dr. G. D. K. Needham, Westfield Walk, Leominster, Hfds. Tel. Leominster 2049	Dr. J. Sleigh, Chepstow House, Ross-on-Wye, Hfds. Tel. Ross-on-Wye 2214	Dr. I. F. MacKenzie, Town Hall, Hereford. Tel. Hereford 3021	Dr. R. Wood Power, 1, Ledbury Road, Hereford. Tel. Hereford 5457
Bromyard R.D.C.  Kington U.D.C.  Kington R.D.C.  Leominster Borough  Leominster and Wigmore R.D.C.  Weobley R.D.C.	Dore & Bredwardine R.D.C.  Ledbury R.D.C.  Ross-on-Wye U.D.C.  Ross & Whitchurch R.D.C.	Hereford City	Hereford R.D.C.



# GENERAL STATISTICS

Area of County ... 539,165 acres

	1967	1968		
	<i>Population</i>	<i>Live Births</i>	<i>Deaths</i>	<i>Population</i>
<b>URBAN</b>				
Bromyard ...	1,710	—	—	—
Hereford City (M.B.) ...	46,120	904	479	47,140
Kington ...	1,900	20	33	1,910
Ledbury ...	3,730	—	—	—
Leominster (M.B.) ...	6,930	98	99	6,970
Ross-on-Wye ...	6,390	96	77	6,520
Total Urban Districts ...	66,780	1,118	688	62,540
<b>RURAL</b>				
Bromyard ...	6,870	106	123	8,610
Dore and Bredwardine ...	7,740	127	91	7,820
Hereford ...	20,030	266	245	20,030
Kington ...	4,340	58	56	4,330
Ledbury ...	7,990	168	129	11,740
Leominster and Wigmore ...	9,540	146	106	9,680
Ross and Whitchurch ...	11,790	141	144	11,540
Weobley ...	5,680	106	80	5,700
Total Rural Districts ...	73,980	1,118	974	79,450
Total County ...	140,760	2,236	1,662	141,990
England and Wales ...	48,390,800	822,000	577,000	48,593,000

On 1.4.68 Bromyard U.D. was amalgamated with, and became part of Bromyard R.D. Similarly Ledbury U.D. with Ledbury R.D. Births and deaths in Bromyard U.D. and Ledbury U.D. during the period 1.1.68—31.3.68 have been included in Bromyard R.D. and Ledbury R.D. respectively.

**Note**—The population figures shown are the Registrar-General's estimated population at the 30th June.



# VITAL STATISTICS

										1967	1968
HEREFORDSHIRE											
Live births	...	...	...	...	...	...	Male	...	1,237	1,119	
							Female	...	1,190	1,117	
							Total	...	2,427	2,236	
Live birth rate per 1,000 population							...	...	18.3*	16.2*	
Illegitimate live births per cent of total live births							...	...	8.0	7.9	
Still births	...	...	...	...	...	...	Male	...	25	17	
							Female	...	21	20	
							Total	...	46	37	
Still birth rate per 1,000 live and still births							...	...	18.6	16.3	
Total live and still births	...	...	...	...	...	...	Male	...	1,262	1,136	
							Female	...	1,211	1,137	
							Total	...	2,473	2,273	
Infant deaths							...	...	43	31	
Infant mortality rate per 1,000 live births	...	...	...	...	...	...	Total	...	17.7	13.9	
							Legitimate	...	18.4	14.1	
							Illegitimate	...	10.4	11.3	
Neo-natal mortality rate per 1,000 live births (first four weeks)							...	...	13.6	7.2	
Early neo-natal mortality rate per 1,000 live births (first week)							...	...	9.9	6.7	
†Perinatal mortality rate							...	...	28.3	22.9	
Maternal deaths (including abortion)							...	...	2	1	
Maternal mortality rate per 1,000 live and still births							...	...	0.8	0.4	
Death rate per 1,000 population							...	...	9.5*	11.0*	
ENGLAND AND WALES											
Live birth rate							...	...	17.2	16.9	
Still birth rate							...	...	14.8	14.0	
Infant mortality rate							...	...	18.3	18.0	
Crude death rate							...	...	11.2	11.9	

\* The local crude birth and death rates have been multiplied by the area comparability factor so that they are comparable with the crude rate for England and Wales.

† The perinatal mortality rate is the number of still births and deaths under 1 week combined per 1,000 total live and still births.

## Infant Mortality Rate

HEREFORDSHIRE				ENGLAND & WALES— <i>Rate per</i> 1,000 <i>live</i> <i>births</i>
<i>Year</i>	<i>Live births</i>	<i>Infant deaths</i>	<i>Rate per</i> 1,000 <i>live</i> <i>births</i>	
1959	2,062	51	24.7	22.2
1960	2,231	35	15.7	21.9
1961	2,236	32	14.3	21.6
1962	2,279	37	16.2	21.6
1963	2,347	60	25.6	21.1
1964	2,402	55	22.9	19.9
1965	2,424	51	21.0	19.0
1966	2,416	51	21.1	19.0
1967	2,427	43	17.7	<b>18.3</b>
1968	2,236	31	13.9	18.0

## Perinatal Mortality

The perinatal mortality rate of 22.9 compares with 28.3 in 1967 and the rate of 25.0 for England and Wales.

There were 37 still births compared with 46 last year. Of these, 13.5% were illegitimate as compared with 2.2% in 1967.

15 babies died during the first week compared with the 1967 figure of 24. 6.7% were illegitimate as compared with 4.2% in 1967.

## Congenital Malformations

Number notified in respect of infants born during the year.

Central nervous system	...	...	...	24
Eye and ear	...	...	...	3
Alimentary system	...	...	...	4
Heart and great vessels	...	...	...	1
Respiratory system	...	...	...	2
Uro-genital system	...	...	...	4
Limbs	...	...	...	16
Other skeletal	...	...	...	5
Other systems	...	...	...	3
Other malformations	...	...	...	6
TOTAL				68
				—
Number of infants	...	...	...	38

## HEALTH CENTRES

A formal request was received from the Herefordshire Executive Council for a Health Centre, with accommodation for General Practitioners, to be provided at Ross-on-Wye.

Approval was given, in principle, to the proposal and negotiations for the acquisition of a suitable site were commenced.

Two Health Centres, at Ross-on-Wye, Hereford or Leominster were included in the capital building programme submitted to the Department of Health and Social Security. This programme contained the projects for which it is expected that loan sanction would be sought during the period 1969-1972.

The Ross Road Health Centre, Hereford, continues to provide excellent facilities for residents in the City living south of the River Wye.

## CARE OF MOTHERS AND YOUNG CHILDREN

### Ante-Natal Mothercraft and Relaxation Classes

470 mothers attended relaxation/mothercraft classes. Four evening classes for prospective parents, held in Hereford, were attended by 127 parents.

Number of centres	...	...	...	...	...	...	8
Number of women who attended:							
(a) Institutional booked	...	...	...	...	...	...	381
(b) Domiciliary booked	...	...	...	...	...	...	89
							<hr/>
TOTAL	...	...	...	...	...	...	470
							<hr/>
Total number of attendances	...	...	...	...	...	...	2,482

### Child Welfare Centres

Number of centres	...	...	...	...	...	...	27
Number of children who attended:							
(a) Born in 1968	...	...	...	...	...	...	1,259
(b) Born in 1967	...	...	...	...	...	...	1,298
(c) Born in 1963-66	...	...	...	...	...	...	1,195
							<hr/>
TOTAL	...	...	...	...	...	...	3,752
Number of sessions held by:							
(a) Medical officers	...	...	...	...	...	...	309
(b) General practitioners	...	...	...	...	...	...	402
							<hr/>
TOTAL	...	...	...	...	...	...	711
							<hr/>
Number of children referred elsewhere	...	...	...	...	...	...	148
Number of children on clinic "at risk" registers at end of year	...	...	...	...	...	...	279

Two additional centres at Wellington and Burghill, were opened during the year but the centre at Whitchurch was closed. The mobile clinic now visits 13 centres. A conference for voluntary workers was arranged.

### Child Guidance

Dr. D. T. Maclay, M.D., D.P.H., the Child Psychiatrist, informs me that 13 children under the age of 5 years were referred to the child guidance centre during the year. This compares with 14 the previous year.



## " At Risk " Register

The names of children who have some factor in their family, pre-natal, peri-natal or post-natal history, which may put them at risk for some handicapping condition, are put on the register.

If they are found to be developing normally by the age of 18 months or 2 years they are removed from the register. The others are kept under observation until they are found to be normal or definitely handicapped.

The latter receive medical or surgical treatment and supervision at various hospitals and, if necessary, home training, until such time as special educational provision is required. They are then administratively "ascertained" as having a certain type or mixed types of handicap. These educational assessments are often delayed, except in the case of some blind and deaf children, until the age of 4—5 years or even later, so that their particular needs can be more accurately determined.

Therefore, the distribution of the different types of handicap among those remaining on the register is not yet revealed in the annual statistics.

				<i>Year of birth</i>		
				1966	1967	1968
Number placed on register	...	Male		128	144	138
		Female		103	113	116
		TOTAL		231	257	254
Number of live births	...	...	...	2,416	2,427	2,236
Number on register per 100 live births	...			9.6	10.6	11.4
Number taken off register:-						
(a) Normal development	...	...		94	35	—
(b) Mild handicap	...	...		—	—	—
(c) Ascertained as handicapped	...			1	—	—
(d) Unsuitable for education at School				—	—	—
(e) Death	...	...	...	23	23	9
(f) Left County	...	...	...	31	23	13
(g) Appointments persistently failed	...			3	1	2
		TOTAL		152	82	24
Number remaining under observation:-						
(1) With anticipated placement						
(a) Normal development	...	...		41	53	1
(b) Mild handicap	...	...		8	5	—
(c) Handicapped	...	...		12	8	—
(d) Unsuitable for education at School				2	2	—
(2) Placement undecided	...	...		16	107	229
		TOTAL		79	175	230
Type of ascertained handicap						
Deaf	...	...	...	1	—	—

## Welfare Foods

The arrangements for the distribution of welfare foods from 82 centres throughout the county have continued to work smoothly and are still carried out largely by voluntary effort. In only nine of the main centres are paid staff employed.

Total issues during 1968:

National dried milk	...	...	...	32,682 tins
Cod liver oil	...	...	...	1,344 bottles
Vitamin A. and D. tablets	...	...	...	1,313 packets
Orange juice	...	...	...	26,313 bottles

## Day Nurseries

St. Martin's Day Nursery maintained by the Authority under Section 22 of the National Health Service Act, 1946, provides 35 places for children under the age of 5 years. Priority is given to the admission of children coming within the following groups:

- (a) Mother is unable to look after the child owing to illness.
- (b) Mother is unable to look after the child, e.g. mother unmarried.
- (c) On medical grounds—the child requires to be with other children.

The daily average attendance during the year was 27.12. 35 children were on the register at the end of the year and 15 children were on the priority waiting list.

A visit of inspection of the nursery was made during the year by the Public Health Nursing Officer of the Ministry of Health and one of H.M. Inspectors of the Department of Education and Science. Following this, the nursery was approved as a training establishment for N.N.E.B. students.

A site is available for a new nursery and this project is included in our capital building programme for 1969/70, but so far the Ministry has been unable to approve the inclusion of this scheme in the programme.

## Mother and Baby Homes

The Authority accepted financial responsibility for 38 cases admitted to mother and baby homes outside the County.

## Private Nursing Homes

There are two private nursing homes in the county registered by the County Council under sections 187 to 194 of the Public Health Act, 1936, as amended by the Nursing Homes Act, 1963. These provide a total of 16 beds for chronic medical sick.

## Nurseries and Child-Minders

Premises and persons registered under Section 1 of the Nurseries and Child Minders' Regulation Act, 1948; as amended:

	<i>Registered premises</i>			<i>Registered persons</i>
	<i>Factory</i>	<i>Other</i>	<i>Total</i>	
Number of premises or persons registered at end of year ... ..	1	20	21	9
Number of children permitted ... ..	20	410	430	109

Type of care (all day or sessional) provided by premises and persons included in above table.

	<i>Premises providing</i>		<i>Persons providing</i>	
	<i>all day care</i>	<i>sessional care</i>	<i>all day care</i>	<i>sessional care</i>
Number of premises or persons ... ..	3	18	1	8
Number of children permitted ... ..	50	380	6	103



## Dental Treatment

Details of the examination and treatment of expectant and nursing mothers and children under five are shown in the table below:

	<i>Expectant and Nursing Mothers</i>	<i>Children under five</i>
Examined ... ..	5	12
Requiring treatment ... ..	5	4
Offered treatment ... ..	5	4
Completed treatment ... ..	5	4
Treatment provided—		
Number of fillings ... ..	8	—
Teeth filled ... ..	8	—
Teeth extracted ... ..	9	9
General anaesthetics given ... ..	—	4
Scalings ... ..	—	—
Teeth otherwise conserved ... ..	—	—
Patients supplied with dentures—		
Full upper or lower ... ..	1	—
Partial upper or lower ... ..	2	—
Patients X-rayed ... ..	—	—

## Principal Dental Officer's Report

Although treatment carried out during the year for this category of patient shows a slight increase, the demand and response to offers of treatment is insignificant.

Much of it is done by practitioners in the General Dental Service.

## Puerperal Pyrexia

Notifications during year ... .. 5

### CAUSES—

(a) Uterine ... .. 1  
 (b) Extra-uterine ... .. —  
 (c) Indefinite ... .. 4

### CONFINEMENTS

(a) Delivered and isolated at home ... .. 3  
 (b) Delivered and isolated in hospital ... .. 2  
 (c) Delivered at home and transferred to hospital ... .. —

### COURSES

All these pyrexias responded to treatment satisfactorily without known spread of infection.

As from 1.10.68, under the Public Health (Infectious Diseases) Regulations 1968, puerperal pyrexia is no longer notifiable.

## Ophthalmia Neonatorum

One case, the first since 1957, was notified during the year.



## MIDWIFERY

### Notification of Intention to Practise

1. Domiciliary	(a) District nurses	...	...	...	...	...	...	55
	(b) Independent	...	...	...	...	...	...	2
	(c) Midwives living in adjacent counties and taking occasional cases in Herefordshire	...	...	...	...	...	...	—
	(d) Practised in emergency	...	...	...	...	...	...	—
								57
2. Institutions	(e) Hospitals	...	...	...	...	...	...	25
	(f) Nursing homes	...	...	...	...	...	...	—
								25
Grand Total								82

### Ante-Natal Care

Home visits by midwives	...	...	...	...	...	...	8,749
Surgery sessions	...	...	...	...	...	...	453

### Deliveries attended by Domiciliary Midwives

Doctor not booked	...	...	...	...	...	...	29
Doctor booked	...	...	...	...	...	...	567
Total	...	...	...	...	...	...	596

### Post-Natal Care

Nursing visits—Home deliveries	...	...	...	...	...	...	11,607
Nursing visits—Hospital deliveries	...	...	...	...	...	...	9,573
Surgery sessions	...	...	...	...	...	...	4

There was a considerable decrease in home confinements during 1968 resulting in only 26% of all confinements taking place at home. The exception was in Hereford City where home confinements have remained without any decrease over the past three years. This is fortunate since this is the only place where midwives are employed in full time midwifery duties, (as distinct from midwifery combined with general nursing sometimes with additional health visiting and school nursing).

During the year two rural areas with declining case loads were merged with others on retirement of staff.

An increasing number of mothers are applying ante-natally for discharge by arrangement at approximately 48 hours after confinement. That there was no subsequent complication in mother or baby associated with any of these early discharges is evidence of the satisfactory result of ante-natal planning for post-natal home care.

### Attachments to General Practices

There was no expansion of midwifery attachment schemes to groups of family doctors. We remain with nine doctors in three group practices having a total of one nurse-midwife in full-time attachment and five midwives in partial attachment combined with geographical areas.

### Co-operation with the Hospital Service

This is extremely good with easy personal contact between local authority staff and hospital staff. More information was given regarding early midwifery discharges and there was good co-operation over advance notice of discharges. In the ante-natal planning of home preparation for early discharge good support was given in referring hospital booked mothers to the County Health Department and to the local authority midwives.

Use of the new Post Graduate Medical Centre for midwives' meetings and for local authority staff meetings has the effect of bringing together (in one aspect) the two services.

## Telecommunications

There was no increase in the number of automatic telephone message recording machines supplied to nurses and midwives. The two machines on trial were retained and have proved their worth.

## Pupil Midwives

Three pupil midwives successfully completed midwifery training during the year. This figure was down on the previous year due to lack of recruitment. Subject to recruits being forthcoming the second part scheme works very smoothly in conjunction with the County Hospital.

## Training

Twelve nurse students were given a sight of domiciliary midwifery as part of their obstetric experience. Nine midwives attended approved residential refresher courses.

## HEALTH VISITING

Cases visited by health visitors:

(a) Children born in 1968	...	...	...	...	...	...	2,295
(b) Children born in 1967	...	...	...	...	...	...	2,964
(c) Children born in 1963—66	...	...	...	...	...	...	7,426
(d) TOTAL	...	...	...	...	...	...	12,685
(e) Persons aged 65 or over	...	...	...	...	...	...	1,055
(f) Number included at (e) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	169
(g) Mentally disordered persons	...	...	...	...	...	...	29
(h) Number included at (g) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	4
(i) Persons excluding maternity cases, discharged from hospitals (other than mental hospitals)	...	...	...	...	...	...	41
(j) Number included at (i) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	14
(k) Number of tuberculous households visited	...	...	...	...	...	...	128
(l) Number of households visited on account of other infectious diseases	...	...	...	...	...	...	460
(m) Other cases	...	...	...	...	...	...	2,094
(n) Total number of cases	...	...	...	...	...	...	16,492

Home visiting was well maintained based on children under five years of age and extending to the welfare of the entire family. Supervision of the elderly showed some increase, this being quite distinct from nursing care. It is shown constantly that problems of health are linked with social problems through cause or effect and it is here that the all round training of the health visitor is of such value.

## Deafness in Children

There was a great increase in this work despite a period of depletion in health visitors with special training. Two additional health visitors have now trained in Manchester so that the county is covered by five for screening tests of hearing in infants, follow up of children with deaf aids, and generally supplementing the work of peripatetic teachers of the deaf. They do this in conjunction with their general health visiting duties.

## Amblyopia ex Anopsia

Screening tests of vision for 4 year olds were continued throughout the year. Testing in infant welfare sessions were substituted for time consuming home visits. Here the advantage of having a medical officer on the spot appeared to be offset by distraction and noise.



### Attachments to General Practices

There was no extension during the year beyond a health visitor attached to each of two group medical practices. Unfortunately one was affected by long term illness but an improvement is anticipated in 1969. Plans are in hand for the addition of a health visitor to one practice to the equivalent of half time.

In spite of interruptions there is no doubt as to the value of a health visitor working in attachment to a group medical practice providing her function is understood and her office accommodation is adequate.

### Co-operation with the Hospital Service

This continues well with increasing contact particularly in the paediatric field. Information is received and relayed to health visitors regarding admission of children under five years, as well as children of that age attending as casualties in home accidents. Medical-social workers obtain information on home conditions for the paediatric ward sisters as well as written reports for the paediatrician's records.

Health Visitors and nurses are free to visit wards at any reasonable time and to have access to certain ward office records if they so wish.

### Training

One health visitor successfully completed training at Leicester, returning to nurse-midwife/health visitor duties. Her final three months' supervised field work was undertaken in this Country.

Three health visitors attended approved post graduate residential courses additional to the two health visitors taking the special course in screening tests of hearing.

Staff attended conferences, on invitation, in Gloucestershire and Worcestershire as well as a joint conference with social workers in Hereford.

Forty-seven nurse students from the Hereford Nurse Training School attended for observation sessions with health visitors.

## HOME NURSING

Number of persons nursed during the year ... ..	3,667
Number of visits ... ..	69,624
Number of persons aged under 5 at first visit in 1968 ... ..	198
Number of persons aged 65 or over at first visit in 1968 ... ..	2,192
Surgery sessions ... ..	272

During the year there was a considerable increase in home nursing particularly in Hereford City. Home nursing of the elderly accounted (as usual) for most of the work. Surgery nursing sessions for nurses working in group medical attachment were organised on a regular basis.

### Attachment to General Practices

This continues without change, with one district nurse-midwife and two district (general) nurses in attachment. In one instance surgery premises have been improved so as to provide a treatment room for surgery nursing sessions.

### Co-operation with the Hospital Service

There was a considerable increase in patients referred after discharge from hospital. That this accounted for no additional visiting compared with 1967 was due to the large number of post operative patients so near to complete recovery that they required very little nursing care. It is doubtful that home nursing at this stage has any appreciable effect in shortening a patient's stay in hospital. In some cases perhaps there is some moral support in one or two visits by a district nurse after return home. Certainly there is very little demand on the technical skill of district nurses made by the hospitals at the present moment. There was some contact with the geriatric medical-social worker in connection with discharge home of elderly patients but the number of these was small.

### Training

47 student nurses from the Hereford Nurse Training School spent home visiting sessions with district nurses, 10 of them for a full day instead of a half day as formerly.

3 district nurse students from Birmingham stayed each with a rural district nurse for two days for a sight of rural nursing, midwifery, and health visiting.

Two nurses attended approved residential refresher courses arranged by the Queens Institute.



## VACCINATION AND IMMUNISATION

### Diphtheria Immunisation

2,237 children under the age of 16 years were primarily immunised, the majority being immunised with triple antigen. 3,722 children received reinforcing doses either diphtheria/tetanus when they had received triple antigen in infancy or, if not, diphtheria antigen. No case of diphtheria was reported during the year.

### Measles Vaccination

Vaccination against measles, either by general practitioners or local health authority staff, was offered during the year to children who were susceptible to an attack because they had neither been immunised nor had natural measles. It is proposed that for routine immunisation in early childhood, vaccination should be given in the second year of life after completion of the basic course of immunisation against diphtheria, tetanus, whooping cough and poliomyelitis. 1,825 children were vaccinated.

### Poliomyelitis Vaccination

Oral vaccine (Sabin) is in the main used for poliomyelitis vaccination. Three doses are given at intervals of 4-8 weeks. A small number of children received injection type vaccine (Salk) and others received oral vaccine at the same time as triple antigen (diphtheria/tetanus/whooping cough). 2,224 children under 16 years completed primary courses during the year and a further 2,133 received reinforcing doses. Clinics were held regularly at Hereford, Leominster and Ross-on-Wye. Children unable to attend clinics were given oral vaccine at home by health visitors. No case of poliomyelitis was notified during the year.

### Smallpox Vaccination

The following table shows the number of persons under the age of 16 vaccinated, or re-vaccinated:

<i>Children aged</i>				<i>Vaccinated</i>	<i>Re-vaccinated</i>
Under 1	...	...	...	259	—
Aged 1	...	...	...	729	—
2—4	...	...	...	222	20
5—15	...	...	...	131	275
Total	...	...	...	1,341	295
1967	...	...	...	1,399	193

No case of smallpox was reported during the year.

### Tetanus Immunisation

2,303 children were immunised against tetanus mainly by triple antigen. A further 3,069 received reinforcing doses, mainly in the form of diphtheria/tetanus.

### Whooping Cough Immunisation

1,959 children were immunised against whooping cough mainly by triple antigen. 528 were given reinforcing doses.

# VACCINATION OF PERSONS UNDER AGE 16

## Completed Primary Courses

Type of Vaccine	YEAR OF BIRTH					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
1. Quadruple ... ..	—	—	—	—	—	—	—
2. Triple ... ..	743	1,016	77	28	30	39	1,933
3. Diphtheria/Whooping cough ... ..	6	10	3	1	2	4	26
4. Diphtheria/Tetanus ...	7	67	3	4	112	79	272
5. Diphtheria ... ..	1	2	—	—	3	—	6
6. Whooping cough ...	—	—	—	—	—	—	—
7. Tetanus ... ..	1	3	1	—	3	90	98
8. Salk ... ..	1	8	5	1	2	1	18
9. Sabin ... ..	451	1,389	185	50	106	25	2,206
10. Measles ... ..	22	239	252	224	1,028	60	1,825
11. Lines 1 + 2 + 3 + 4 + 5 (Diphtheria) ... ..	757	1,095	83	33	147	122	2,237
12. Lines 1 + 2 + 3 + 6 (Whooping Cough) ...	749	1,026	80	29	32	43	1,959
13. Lines 1 + 2 + 4 + 7 (Tetanus) ... ..	751	1,086	81	32	145	208	2,303
14. Lines 1 + 8 + 9 (Poliomyelitis) ...	452	1,397	190	51	108	26	2,224

## Reinforcing Doses

Type of Vaccine	YEAR OF BIRTH					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
1. Quadruple ... ..	—	—	—	—	—	—	—
2. Triple ... ..	—	98	148	36	173	47	502
3. Diphtheria/Whooping cough ... ..	6	10	3	1	2	4	26
4. Diphtheria/Tetanus ...	—	7	34	4	1,362	1,017	2,424
5. Diphtheria ... ..	—	1	—	—	46	723	770
6. Whooping cough ...	—	—	—	—	—	—	—
7. Tetanus ... ..	—	2	4	—	22	115	143
8. Salk ... ..	1	8	10	1	8	1	29
9. Sabin ... ..	—	85	127	36	1,678	178	2,104
10. Measles ... ..	—	—	—	—	—	—	—
11. Lines 1 + 2 + 3 + 4 + 5 (Diphtheria) ... ..	6	116	185	41	1,583	1,791	3,722
12. Lines 1 + 2 + 3 + 6 (Whooping Cough) ...	6	108	151	37	175	51	528
13. Lines 1 + 2 + 4 + 7 (Tetanus) ... ..	—	107	186	40	1,557	1,179	3,069
14. Lines 1 + 8 + 9 (Poliomyelitis) ...	1	93	137	37	1,686	179	2,133



## AMBULANCE SERVICE

### Personnel

The establishment of personnel in the County Ambulance Service remains unchanged and is as follows:—

County Ambulance Officer.

Operations Officer.

				Senior Drivers	Driver/attendants
Hereford	...	...	...	4	24
Leominster	...	...	...	1	5
Ross-on-Wye	...	...	...	1	5

There is a caretaker and a cleaner at the Hereford Station, the latter undertaking all laundry requirements.

Workshop personnel consists of one senior mechanic, two mechanics and one semi-skilled workshop assistant.

At Ledbury and Kington a service is still provided by volunteers and retained staff.

### Vehicles

There has been no increase in the establishment of ambulance vehicles, but one ambulance and two dual purpose vehicles were replaced. In addition a former Civil Defence ambulance was acquired and will be used in connection with major accident procedures.

### Training

During the year 4 drivers attended residential courses of two weeks duration at the Birmingham training school.

In accordance with the recommendations of the Ambulance Service Working Party a senior driver attended a six week experimental training course at the Birmingham school followed by an instructor's course at the former Easingwold Civil Defence Training School. His assessment was satisfactory.

As far as possible the recommendations of the Working Party have been implemented including the provision of additional equipment.

### Civil Defence

On the directions of the Government, all activities in this field have been suspended.

### Statistics

The following table shows how the number of patients carried and the annual mileage have increased over the past years:

<i>Year</i>	<i>Full-time drivers</i>	<i>Annual mileage</i>	<i>Patients carried</i>
1959	22	283,594	28,796
1960	26	294,864	30,260
1961	29	306,003	33,100
1962	29	313,446	34,382
1963	33	336,651	36,632
1964	38	351,862	42,074
1965	39	355,715	42,386
1966	40	359,944	44,877
1967	40	365,406	46,081
1968	40	390,976	49,469



The following table shows the number of patients carried, mileage travelled, and the journeys made by ambulances from the various stations during the year.

<i>Station</i>	<i>PATIENTS CARRIED</i>			<i>Mileage</i>	<i>Journeys</i>
	<i>Stretcher</i>	<i>Sitting</i>	<i>Total</i>		
Hereford ... ..	6,082	32,013	38,095	236,449	5,375
Kington ... ..	243	508	751	8,545	256
Ledbury ... ..	217	74	291	6,378	259
Leominster ... ..	1,084	4,797	5,881	81,191	1,070
Ross-on-Wye ... ..	1,235	3,216	4,451	58,413	1,290
TOTAL ... ..	8,861	40,608	49,469	390,976	8,250

In addition 54 patients were conveyed mainly by rail, saving approximately 9,974 road miles.

### Hospital Car Service

By means of this service many suitable patients can be conveyed and thus alleviate demands on the ambulance service. The following table shows the mileage covered, journeys made and patients carried.

	<i>Mileage</i>	<i>Journeys</i>	<i>Patients carried</i>
January ... ..	17,133	413	824
February ... ..	17,894	439	881
March ... ..	14,351	389	785
April ... ..	17,213	419	847
May ... ..	16,577	453	856
June ... ..	13,836	346	653
July ... ..	17,417	392	711
August ... ..	16,729	390	747
September ... ..	16,703	425	859
October ... ..	19,620	466	949
November ... ..	16,571	419	859
December ... ..	15,107	345	707
TOTAL ... ..	199,151	4,896	9,678
1967 ... ..	216,889	5,601	10,755

## PREVENTION OF ILLNESS, CARE AND AFTER CARE

### Tuberculosis

	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
Number of notifications:				
Pulmonary ... ..	11	7	—	18
Non-Pulmonary ... ..	2	—	3	5
Number of deaths:				
Tuberculosis of respiratory system ...	5	—	—	5
Other Tuberculosis, including late effects ...	1	1	—	2
Death rate per 1,000 population:				
COUNTY				
Tuberculosis of respiratory system ... ..	...	...	0.035	
Other ... ..	...	...	0.014	
ENGLAND AND WALES				
Tuberculosis of respiratory system ... ..	...	...	0.030	
Other ... ..	...	...	0.013	

## Physicians' Report

There has been a significant further decrease in notification of all forms of tuberculosis. It is disturbing, however, to note that in 3 patients, tuberculosis, a potentially curable disease, caused death. In one, the patient would not co-operate with treatment and although there was some improvement with each repeated hospital admission, failure to persevere with recommended drug therapy resulted in relapse after relapse. In one of the other patients the condition was unsuspected finding at autopsy, and in the third patient chronic non-tuberculous lung disease was a potent contributing factor to his death.

Late diagnosis of tuberculosis most commonly occurs in the elderly where the condition may be masked by the ageing process and the possibility of tuberculosis occurring sporadically in the elderly without any contact history must still be borne in mind.

Positive reactions to tuberculin among child contacts remain at about 7% of the total. None of these "positive" contacts have shown any evidence of tuberculous activity.

Number skin tested	...	...	...	...	91
Number found positive	...	...	...	...	6
Number found negative	...	...	...	...	85
Number vaccinated	...	...	...	...	80
Number of infants vaccinated at birth	...	...	...	...	3

## Occupational Therapy

During the year 109 patients were visited of whom 55 were fresh cases. Four patients were referred for Medical Rehabilitation, three to Farnham Park, Buckinghamshire, and the other to the Passmore Edwards Medical Rehabilitation Centre, Clacton-on-Sea, Essex. Three patients were referred for industrial rehabilitation to Industrial Rehabilitation Units in Birmingham, Coventry and Egham respectively. One was referred for training to Finchdale Abbey, Durham, two to the Glenton Lodge Occupation Centre and eight returned to full employment.

Outwork was supplied by Haigh Engineering Company Ltd., Ross-on-Wye, the County Library, Hereford, and The Herb Farm, Stoke Lacy.

## Convalescence

Patients are recommended for short periods of recuperative convalescence under Section 28 of the National Health Service Act, 1946, by general medical practitioners, house surgeons of hospitals and medical officers of health. Only those persons who do not require medical or nursing care, but merely rest, change of air and good food, are accepted under the scheme. Patients are expected to contribute towards the total cost of the service in accordance with their means.

24 persons proceeded to convalescent homes for periods ranging from two to four weeks—19 women and 5 men.

## Adaptations of Homes to Install Artificial Kidney Machines

Early in the year a circular letter was received from the Ministry of Health giving general approval to local authorities under section 28 of the National Health Service Act, 1946 for the adaptation of any dwelling, or the provision of any additional facilities which may be necessary, for installing by hospital authorities of artificial kidney machines for the treatment of chronic renal failure.

One application was dealt with during the year. This was received from the East Birmingham Hospital in respect of a married woman patient. The house was owned by the husband, who was asked to make a contribution calculated on the same scale as is used by the Council when adaptations are made in the homes of handicapped persons.

## Medical Arrangements for Long-stay Immigrants

The visiting of newly arrived long stay immigrants by health visitors has continued. The purpose of these visits is to help overcome the special problems which could arise with immigrants who often do not know of the scope and arrangements of the National Health Service.

Health visitors call on immigrants, other than those who come to work at local hospitals, and urge them to register with a general medical practitioner as soon as possible.

Notifications were received from port health authorities of the arrival of the following immigrants:—



From Australia	...	...	...	1
Barbados	...	...	...	2
Canada	...	...	...	1
Guyana	...	...	...	2
Hong Kong	...	...	...	5
India	...	...	...	5
Italy	...	...	...	2
Mauritius	...	...	...	1
New Zealand	...	...	...	1
Pakistan	...	...	...	6
South Africa	...	...	...	1
Spain	...	...	...	2
Tanzania	...	...	...	3
TOTAL				32

Of this number, nine came to join the medical or nursing staff at the Hereford Hospitals. Three did not arrive at the addresses given.

No case of tuberculosis occurred in immigrants.

### Cervical Cytology

In an effort to persuade more women to take advantage of the smear test a letter was sent to all establishments in the county who employ six or more women offering to make arrangements for employees to have the smear test. Several employers took advantage of the offer and arrangements were made for staff aged 25 years and over to attend at their nearest clinic with little or no disruption to normal work or production. Health visitors have also made an important contribution by persuading housewives in the high risk groups to register for the test.

Every patient and her family doctor is informed of the test result. Patients whose cervical smears are reported to be positive are referred, via their general practitioners, to the consultant gynaecologist for further investigation. In cases where the test is reported by the Pathologist to be suspicious, the patient is kept under periodic review at the clinic.

A total of 3,446 cervical smears were examined in the Pathology Department of the County Hospital during the year and it is pleasing to note that general medical practitioners have taken a larger proportion of the smears which were submitted for examination as follows:—

General medical practitioners	...	...	...	848
Hospital staff	...	...	...	943
Family planning association clinics	...	...	...	461
Local health authority clinics	...	...	...	1,194
TOTAL				3,446

Of the 1,194 women who attended the local health authority clinics 1,019 were new patients and 175 attended for repeat tests. Of new patients 4 were found to have positive smears and 6 suspicious smears.

The results were as follows:—

	<i>First Attendance</i>	<i>Re-Tests</i>
Number with negative smears	1,019	172
Number with suspicious smears requiring investigation	6	3
Number with positive smears	4	—
Number called for interview by the medical officer only	—	1

The following conditions were noted:—

Trichomonas infection	...	...	...	...	39
Monilia infection	...	...	...	...	3
Cervical polypi	...	...	...	...	25
Erosion of cervix	...	...	...	...	28
Retroversion of uterus	...	...	...	...	3
Leptothrix infection	...	...	...	...	3
Cervicitis	...	...	...	...	2

## **Chiropody**

This service is available to the elderly, the physically handicapped and expectant mothers. Sessional work is also undertaken by one of the Council's chiropodists on behalf of the Herefordshire Hospital Management Committee at the Hospital Diabetic Clinic.

During the year, 1,183 patients made 3,886 attendances at clinics held in the market towns and villages throughout the county. In addition 392 visits were made to patients requiring domiciliary treatment. Owing to staffing difficulties these figures show a slight drop in attendance and treatments. Two full-time chiropodists resigned and there was considerable delay before the vacancies were filled. At the end of the year a vacancy for a full-time senior chiropodist remained unfilled.

Since the issue of Ministry of Health Circular 11/59 the establishment of the chiropody service has extended considerably. The County Council Scheme commenced in April, 1960, using part time chiropodists working at three County Council Clinics. There are now two full-time and one part-time chiropodist working at fifteen clinics throughout the County. Domiciliary treatments were commenced in 1965 with a total of 34 patients requiring home visits and in the year under review the number of patients has risen to 108. There are waiting lists at most of the larger clinics and the service has been greatly curtailed due to difficulties in appointing whole time chiropodists.

## **Medical Loan**

The demand for the larger items of medical loan equipment, beds, mattresses, lifting poles, walking aids etc., continues to increase rapidly. Two young men who were permanently disabled through spinal injuries following road accidents were supplied with electrically operated turning beds and other special equipment to assist with their nursing care.

Small items of medical loan equipment are held by district nurses—each nurse is supplied with essential items of equipment for emergency use—and by the British Red Cross Society at depots situated in towns and villages throughout the County.

## **Health Education**

One of the most difficult tasks facing health educators to-day is to effectively persuade young people that there is a very considerable health risk associated with cigarette smoking.

In less than sixty years the number of infant deaths has been reduced from 216 in a year to just over 30. Annual deaths from tuberculosis have been cut from 121 in 1910 to less than ten. Diphtheria and poliomyelitis have been effectively brought under control and it is many years since a case was last reported in this county. Unfortunately, the position with regard to lung cancer is not so encouraging. In 1950, 25 people died from lung cancer and last year there were 62 deaths from this disease, 53 males and 9 females. All the evidence available points to the fact that there is a remarkably close relationship between cigarette smoking and lung cancer.

Whilst we continue to offer our help and advice to schools about smoking and health hazards, it is becoming increasingly obvious that if we are to achieve more positive results, then a much greater degree of co-operation from parents themselves must be forthcoming. Young people are influenced very considerably by parental example as well as by what they learn at school.

We have been able to maintain a satisfactory response from women registering for cervical cytology. This is yet another challenge to health educators; it is not easy to persuade those women we know to be 'at risk' to come forward for examination. Employers have been most co-operative in releasing staff to attend clinics for this screening test.

There has been an increasing interest in accident prevention in the home especially by women's institutes. During 1968, 182 children under the age of 5 years were admitted to hospital as a result of accidents in the home. 58 of these accidents were due to falls, 45 to swallowing foreign bodies, such as aspirin, and 24 were scalding casualties. Some of these accidents could easily have been avoided if only parents had taken reasonable precautions. Young children are naturally curious, many are unable to read and are unaware of possible dangers, it is therefore all the more necessary to protect them from gaining access to lavatory cleaners and detergents.



## DOMESTIC HELP

Number of cases where domestic help was provided during the year:

Aged 65 or over on first visit in 1968	...	...	...	675
Aged under 65 on first visit in 1968:				
(a) Chronic sick and tuberculous	...	...	...	57
(b) Mentally disordered	...	...	...	8
(c) Maternity	...	...	...	36
(d) Others	...	...	...	52
TOTAL	...	...	...	828

This represents an increase of 64 cases over the previous year, with a continued rise in the number of persons over 65 receiving help. Maternity cases show a further drop in numbers.

The full standard charge has remained at 6s. 3d. per hour. Persons unable to meet this charge are assessed and pay according to their financial circumstances. Cases in receipt of supplementary pensions or allowances receive help free of charge.

The equivalent of 102 full-time home helps (instead of 97) were employed as from April 1st. The National Joint Council's rates of pay and conditions are in force.

An in-service training course was held in Leominster in the autumn, lasting four days, and twelve home helps attended. The lectures and demonstrations covered a wide range of subjects relevant to the work of the home helps.

### Night 'Sitters-in' Scheme

This service was used on six occasions during the year, and four night-sitters were available for duties if required.

## MENTAL HEALTH

### Staff

There have been no changes in staff during the year.

## MENTAL SUBNORMALITY

### Junior Training Centres

Barrs Court Centre continues to provide general training for 32 children. A small additional number, supernumerary to the maximum normally allowed, has been arranged to facilitate the admission of new referrals. The nursery group arrangements have been consolidated so that the Centre can now cater for children who are younger on admission than has previously been possible. The swimming pool was out of use during a substantial part of the year due to deterioration in the roof timbers caused by excessive condensation. The first meeting of parents was held when staff explained the various aspects of training. Students have continued to attend from the courses arranged by the National Association for Mental Health.

The temporary Centre at Leominster is held on 5 mornings weekly, all children being conveyed by contract transport from various parts of the North of the county. The Ministry of Health has given approval to the revised scheme for the new Leominster Junior Training Centre and at the end of the year specifications were ready for tender.

The Government now confirm that the education of mentally handicapped children is to become the responsibility of the Department of Education and Science although the precise details and appointed day are yet to be announced.



### **Adult Training Centre**

Rockfield Road Centre provides training and diversionary occupation for 32 trainees and has eight vacancies. New admissions are now principally from Barrs Court Centre, with only a very small number of potentially employable trainees from other sources. New machinery has been acquired thereby adding to the capacity for sub-contract work. Parents of children due to transfer from Barrs Court Centre were invited to the centre to see something of the work undertaken and to discuss their children's future. A covered storage area for timber has now been completed which also helps to improve the working conditions of trainees engaged in outside activities. Three trainees left to go into open employment.

### **Ivy House**

There has been a small turnover of residents at the Hostel, although the maximum number of 17 has been maintained. Occasionally, in special circumstances, a supernumerary resident has been admitted for short periods. Of the 17 residents, 10 are in full-time employment, 5 attend the Adult Training Centre, and 2 are occupied at the Hostel. Two of those working have been submitted for establishment in the industrial grade of the Civil Service. There has been a change of clinical medical officer. Improvements have been made to the house, including the installation of a new fire alarm system. Social activities organised by the mental health staff, and evening classes in reading and writing, continue to be held. The annual holiday at Blackpool was again a success.

### **Special Care Unit**

The Unit is held on four days each week with an average attendance of 14, which is about the maximum possible in the existing limited accommodation. In addition to the mini-bus, contract transport is now used to bring children from more distant parts of the county. This has meant that younger children can attend and social and habit training commence at an earlier age. Transfer of those children who show sufficient progress is to the nursery group at Barrs Court Centre. Members of the British Red Cross continue to provide voluntary escort duty.

### **Community Care**

The number of subnormal and severely subnormal persons known to the Department shows little change. Young children are being referred earlier to the subnormality clinic, some from the "At Risk" register, and an increasing number of these go on to various hospitals for investigation and diagnosis.

Home teaching continues relatively unchanged and, together with the two classes at Bromyard and Ross-on-Wye respectively, provides training for 23 persons. The arrangements for the day care of certain patients at Dean Hill Hospital, Ross-on-Wye, have continued.

During the year the usual social activities have been held, in particular the monthly social club which is very successful. Some of the costs incurred have again been met by the Society for Mentally Handicapped Children who also generously provided gifts for hospital patients.

## **MENTAL ILLNESS**

### **Community Care**

The steady increase previously reported in the number of patients referred for community care continues. The welfare officers carried out this work in close co-operation with out-patient clinics and hospital staff, and with a wide range of other medical and social agencies. The arrangement with St. Mary's Hospital started in 1967 for the provision of social work services has, following review, been continued for a further period. For the second year two post-graduate psychiatric social work students were placed with the Department for 10 weeks during the summer.

The monthly meeting of the psychiatric social club have attracted a good number of patients who appear to derive benefit from the individual and collective contacts they are able to make. Financial help, although at a reduced level, has again been available from a local organisation.

The Report of the Seebohm Committee on Local Authority and Allied Personal Social Services, published during the year, recommended that the mental health services should, together with other social services, be combined in one unified Department. The Government has announced its acceptance in principle of this recommendation but intend to await the Report of the Royal Commission on Local Government before considering implementation.



## Mental Health Week

The third in the series of three Mental Health Weeks was held from 9th—15th June. The principal event was a one-day conference at St. Mary's Hospital in co-operation with the Hospital Management Committee and Executive Council, which was directed towards personnel in medicine, nursing, social work, and other related professions, and which followed the theme of the Week "Targets for Tomorrow." During the spring, the Senior Mental Welfare Officer gave talks on the theme of "Mental Health" at a number of secondary schools in the county.

The number of patients receiving care from the mental health staff was as follows:—

Mental illness	...	...	...	133
Subnormal/severely subnormal	...	...	...	331
Psychopaths	...	...	...	2
Elderly mentally infirm	...	...	...	13

## BLIND AND PARTIALLY-SIGHTED PERSONS

The County Welfare Officer maintains the registers of the blind and partially-sighted persons and is responsible for the provision of welfare services. Seven social welfare officers carry out regular domiciliary visiting for the purposes of teaching Braille, Moon and other embossed literature, together with handicrafts wherever possible. These officers are also responsible for the organisation of social activities, such as clubs and outings, in co-operation with the Herefordshire County Association for the Blind.

Forty-three persons were certified as blind during 1968 and at the 31st December, the total on the register was 330.

The causes of blindness are shown to be:

Cataract, 36; Cataract and other causes, 22; Glaucoma, 33; Glaucoma and other causes, 8; Macular degeneration, 68; Trauma, 10; Congenital, hereditary and developmental defects, 12; Myopic error, 19; Diabetic retinopathy, 9; Optic atrophy, 4; Retinitis pigmentosa, 13; Diabetes, 2; Other causes, 87; Unknown, 7.

The following table shows the age of onset of blindness.

	<i>New cases 1968</i>	<i>Cases on Register 31/12/68</i>
Under 1 ...	1	28
1—4 ...	—	2
5—10 ...	—	1
11—15 ...	1	3
16—20 ...	—	4
21—29 ...	1	10
30—39 ...	—	15
40—49 ...	1	19
50—59 ...	1	22
60—64 ...	5	29
65 and over ...	33	185
Unknown ...	—	12
Total ...	43	330

The causes of blindness of the cases certified in 1968 were:

Cataract	...	...	...	...	6
Cataract and other causes	...	...	...	...	2
Glaucoma	...	...	...	...	1
Glaucoma and other causes	...	...	...	...	2
Macular degeneration	...	...	...	...	12
Diabetic retinopathy	...	...	...	...	3
Retinitis pigmentosa	...	...	...	...	2
Myopia	...	...	...	...	2
Other causes	...	...	...	...	13

All the cases involving cataract and glaucoma were over 70 years of age.

Ninety-four were registered as partially-sighted at the end of 1968, of whom 54 were regarded as prospective blind, 14 industrially handicapped, and 9 requiring observation. The remainder were children.

Two cases were admitted to the blind register because of deterioration of vision.

The causes of defective vision were as follows:

Cataract, 16; Cataract and other causes, 6; Myopic error, 12; Congenital, hereditary, and developmental defects, 5; Diabetic retinopathy, 3; Macular degeneration, 14; Nystagmus, 5; Optic atrophy, 6; Glaucoma, 6; Other causes, 21.

During the year twenty-one new cases were certified in the following age groups:

2—4 years	...	...	...	...	—
5—15 years	...	...	...	...	1
16—20 years	...	...	...	...	—
21—49 years	...	...	...	...	1
50—64 years	...	...	...	...	—
65 and over	...	...	...	...	19

The causes of defective vision were as follows:

Cataract and other causes, 4; Glaucoma and other causes, 4; Senile macular degeneration, 8; Retinitis pigmentosa, 2; Other causes, 3.

Treatment of cases is carried out for the most part at the Victoria Eye Hospital, Hereford, but a few patients attend hospitals at Worcester and Gloucester. The co-operation between the Welfare Department and the hospital is very close and every endeavour is made to persuade patients to avail themselves of the treatment recommended.

### Follow-up of Registered Blind Persons

(i) Number of cases registered during the year in respect of which Section F. of Forms B.D.8 recommends:	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	5	1	—	26
(b) Treatment (medical, surgical or optical)	3	2	—	6
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	2	2	—	5



## FOOD AND DRUGS ACT, 1955

### Milk (Special Designations) Regulations 1963, as amended

The County Council is responsible, as Food and Drugs Authority, for the licensing of premises and shops where milk is sold. The number of licences issued at the end of the year was as follows:—

Dealer's licence to use the special designation 'Untreated' ...	2
Dealer's (Pre-packed milk) licence to sell:	
'Untreated' milk ...	1
'Pasteurised' ...	58
'Sterilized' ...	4
'Ultra Heat Treated' ...	3
'Untreated and Pasteurised' ...	2
'Pasteurised and Sterilized' ...	13
'Untreated, Pasteurised and Sterilized' ...	2
	—
TOTAL Dealer's (Pre-packed milk) licences:	83

**Note:** This table does not include producers/retailers which are licensed by the Ministry of Agriculture, Fisheries and Food or dealers in Hereford City which is a separate Food and Drugs Authority.

Premises are visited to ensure that the conditions under which the milk is stored are maintained in a satisfactory manner.

### County Analyst's Report

The number of samples examined for the County Council and for the District Authorities within the County during 1968 was 757, made up as follows:—

Food and drugs ...	334
Fertilisers and feeding stuffs ...	64
Drinking waters ...	11
Sewages and effluents ...	76
Antibiotics in milk ...	257
Miscellaneous ...	15
	—
TOTAL ...	757
	—

The 334 samples submitted by County Inspectors were made up of 247 milks, other foodstuffs, 87. Of these, 35 samples were found to be unsatisfactory, equivalent to 10.5%. The variety of food samples tested is shown in the table below:

<i>Nature of Samples</i>	<i>No. Examined</i>	<i>No. Irregular</i>
Apples ... ..	4	—
Bacon ... ..	2	—
Beefburgers ... ..	1	—
Cream confectionery ... ..	1	1
Cream, double ... ..	3	1
Cream, single ... ..	4	1
Fish, canned ... ..	1	—
Fruit, fresh soft ... ..	9	—
Fruit, juice ... ..	3	—
Gin ... ..	2	—
Milk ... ..	233	28
Milk, appeal-to-cow ... ..	14	—
Milk, skimmed, dried ... ..	1	—
Meat and vegetable pies ... ..	2	2
Meat pies ... ..	6	—
Pork meat ... ..	2	—
Potatoes ... ..	2	—
Preserves ... ..	14	1
Rissoles ... ..	1	—
Sausages, beef ... ..	4	—
Sausages, pork ... ..	4	—
Sausage rolls ... ..	2	—
Shandy ... ..	3	1
Soft drinks ... ..	9	—
Steak in gravy, canned ... ..	2	—
Steak, canned ... ..	1	—
Tomato juice ... ..	1	—
Vegetables, fresh ... ..	3	—
<b>TOTAL ... ..</b>	<b>334</b>	<b>35</b>



## Milk

<i>Number of Samples</i>		<i>Average Quality</i>	
<i>Examined</i>	<i>Unsatisfactory</i>	<i>Fat per cent.</i>	<i>Solids-not-fat per cent.</i>
233	(10)	3.75	8.60
		Percentage unsatisfactory—12.0	

The Sale of Milk Regulations 1939, prescribe minimum presumptive limits of 3.0% fat and of 8.5% milk solids-not-fat for genuine milk. The figures in parenthesis indicate Channel Islands milk samples, for which an absolute minimum fat content of 4.0% is prescribed. The fat content of the 10 samples of Channel Island milk examined ranged from 3.45 to 6.10%.

A total of 28 samples were found to be unsatisfactory, 13 contained extraneous water, 9, including Channel Islands samples, were deficient in fat and 6 contained extraneous water and were deficient in fat.

## Antibiotics in Milk

Penicillin and related antibiotics are used to treat mastitis in milch cows and for a period after treatment some residual penicillin contaminates the milk. It is recommended that such milk should be withheld from delivery to the dairy for at least two clear days after treatment. 5 samples showed the presence of penicillin, two of which were insignificant traces.

## Fertilisers and Feeding Stuffs

A total of 64 samples (60 feeding stuffs, 4 fertilisers) were examined under the Fertilisers and Feeding Stuffs Act, 1926. New regulations introduced during the year provide for the declaration of various trace elements and medicaments such as coccidiostats and hormones. The checking of such additives adds considerably to the analytical work which has to be carried out on each sample. Only a proportion of them is covered by suitable methods of analysis and experimental work on the remainder is in hand.

24 feeding stuff samples and 1 fertiliser sample failed to agree with the guaranteed figures, but in most cases the discrepancies were not serious.

## Consumer Protection

3 samples were examined for compliance with the requirements of the Toys (Safety) Regulations, 1967. All were satisfactory.

## Pesticide Residues in Foodstuffs

The results of the first year's work (August 1966—July 1967) carried out under the aegis of the County Council Association and other Local Authority associations have now been published. These indicate that there is no evidence of contamination sufficiently serious to be of significance to public health in the short term. None of the samples revealed gross contamination. On the other hand a large proportion of the samples examined contained traces of pesticides. A total of 2,400 samples were examined nationally.

A further report is to be published on the second year's work for which the types of foodstuff sampled were varied in order to widen the scope of the inquiry. All the results will be subjected to a statistical analysis from which it is hoped definite conclusions can be drawn.

Although the experimental work for the survey has now been completed, it is obvious that, as far as Herefordshire is concerned, the testing of fruit, vegetables, etc. for pesticides must continue on a routine basis.

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