

[Report 1971] / Medical Officer of Health, Herefordshire / County of Hereford County Council.

Contributors

Herefordshire (England). County Council.

Publication/Creation

1971

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HEREFORDSHIRE COUNTY COUNCIL



ANNUAL REPORT


OF THE

County Medical Officer

and

Principal School Medical Officer

1971



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Annual Public Health and School Health Services

Report for 1971



To the Chairman and members of the Health and Education Committees.

I have the honour to present the Annual Report on the Public Health and School Health Service of the County Council for the year ended 31st December, 1971.

My predecessor, Dr. J. S. Cookson, retired on 23rd May after more than 25 years in office as County Medical Officer and Principal School Medical Officer. This report, therefore, reflects in part some of the work the Department undertook during his last few months with the Council.

As in last year's Report, this relates to the relevant services provided by both the Health and Education Committees.

Legislation which has been implemented during the year and has affected the work of the Department includes the Local Authorities Social Services Act (1970) and the Education (Handicapped Children) Act (1970). The implementation of the provisions of these Acts has incurred much extra work in the Department in ensuring a smooth transition of responsibilities.

During the year further consideration was given to the recommendations of the Working Party on Management Structures in Local Authorities Nursing Services with a view to recommending the Committee to implement these in 1972.

Other legislation as it affects the work of the Department is referred to under the appropriate headings.

We welcome the appointment of Dr. M. K. E. Allington as Senior Medical Officer, charged with special responsibility for co-ordinating work with handicapped children. She commenced her duties in September, 1971.

In late 1971, the basic administration of a comprehensive Child Health and Development Service was begun. I have to thank all my medical, nursing and administrative staff for their support and forbearance in the upheaval that this has obviously produced. The rationale of such a service lies in the following five proposals :

1. The early detection of handicap and deviation from normal development.
2. The early involvement of medical and allied staff who are or are likely to be concerned with such children.
3. The continuing involvement of such professional people with head teachers and parents.
4. The continuing assessment of such children using any or every aspect of this "multi professional" approach.
5. The more accurate discharge of our responsibilities to parents, teachers, etc. because of this comprehensive assembly of information.

Handicaps or deviations from normal development rarely occur in isolation and the basic planning of the new service will recognise the fact that team-work is absolutely essential. Much however remains to be done including the advanced training of both medical and nursing staff.

The organisation of a comprehensive Anti-Smoking Campaign was begun towards the end of August and it is hoped to commence activities in May, 1972. In the meantime the depressing facts concerning the relationship of smoking to ill-health continue to accumulate at an ever-increasing rate. The consequences of tobacco smoking both medical, social and economic are now so blatant and widespread that to commence smoking or to continue excessive smoking is an act of the highest degree of irresponsibility. It is a matter for great encouragement for my staff and myself to record the whole-hearted and tangible support that I have had from the Committees and Council in this matter.

There is relatively little venereal disease in the County and contact tracing, where indicated, is performed by a medical officer in the case of males and female contacts by the supervisory nursing staff.

One further group practice entered the County liaison scheme with the domiciliary staff of the Health Department. Discussions with two further group practices have resulted in firm commitments for health visitor and district nurse attachments in 1972.

The position regarding the fluoridation of public water supplies in Herefordshire remains static and will be so for some considerable time owing to prevailing attitudes and the mechanical difficulty in instrumenting such a decision in a situation of multiplicity of origins.

Notification of congenital defects has resulted in an enquiry into the local preponderance of anencephalics which is being conducted on behalf of the Office of Population Censuses and Surveys by the County Health Department. Any light which can be shed on this distressing problem will be welcomed. A multifactorial approach is being adopted.

It is pleasing to record that the 'consumer demand' for such services as chiropody, occupational therapy, speech therapy, cervical cytology, etc. continues at an unabated pace which, I feel, is reflective of the high standard of service offered. Special medical examinations of the staff for fitness for employment, superannuation schemes, driving licences, firemen, etc. have increased to the point where an overhaul of our arrangements has become necessary to make best use of scarce professional time.

Finally I must record my sincere appreciation of the way in which the staff have readily accepted in the short space of time I have been here the extra burdens placed on them—their example has been most edifying. I would wish also to record my thanks for the ready co-operation extended to us by the Council's Chief Officers and Staff and of course for the support and interest of the Health and Education Committees.

I have the honour to be

Your obedient servant,

P. J. C. WALKER,

*County Medical Officer and
Principal School Medical Officer.*

County Health Department,
35, Bridge Street,
Hereford.

THE HEALTH COMMITTEE

(as at 31st December, 1971)

ALDERMAN MRS. A. J. PASKE
(Chairman)

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

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E. L. LEWIS
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MRS. V. A. PRICE
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MISS R. G. VIRGO

Education Committee Representatives:

COUNCILLOR P. G. B. POWELL

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Herefordshire Hospital Management Committee Representatives:

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MR. J. P. WILLIAMS

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COUNCILLOR F. M. MILES

COUNCILLOR M. K. PRENDERGAST
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MRS. J. B. SENIOR

MRS. H. T. FOLEY

THE PUBLIC HEALTH AND PROTECTION COMMITTEE

(as at 31st December, 1971)

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(Vice-Chairman)

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E. L. LEWIS
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V. T. PREECE
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(as at 31st December, 1971)

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COUNCILLOR W. R. GRIFFIN, J.P.
(Vice-Chairman)

Aldermen:

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W. D. PORTER, J.P.
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COUNCILLOR J. D. CHATLAND
COUNCILLOR H. J. EVANS

COUNCILLOR MRS. N. E. RICHARDS
COUNCILLOR M. H. THOMAS
COUNCILLOR D. H. P. WHEELER

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REV. PREB. C. J. GUSTERSON
MRS. M. E. HUNT
REV. CANON W. O'CONNOR

MR. D. S. PAICE
REV. G. R. M. WEBSTER
MR. H. WEBSTER
REV. R. WHITEHEAD

EDUCATION SPECIAL SERVICES SUB-COMMITTEE

(as at 31st December, 1971)

MISS S. G. DUNNE, J.P.
(Chairman)

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MRS. J. E. CARTER
MRS. S. P. CHANDLER
MAJOR J. S. B. GASKELL
MR. W. R. GRIFFIN, J.P.
MRS. A. L. GROVES
MRS. M. E. HUNT

MRS. A. J. PASKE
MR. P. G. B. POWELL
MR. V. T. PREECE
MRS. N. E. RICHARDS
MR. T. R. STEPHENS
MR. M. H. THOMAS
MR. H. WEBSTER
REV. R. WHITEHEAD

Ex-Officio Members:

MRS. A. M. BARNEBY, J.P.
MR. R. B. BURKE

BRIG. A. F. L. CLIVE, J.P.
MR. W. D. PORTER, J.P.

PRINCIPAL STAFF

(as on 31st December, 1971)

County Medical Officer and Principal School Medical Officer:

P. J. C. WALKER, M.B., Ch.B., M.R.C.S., L.R.C.P., M.F.C.M., (R.C.P.U.K.), D.P.H.

Deputy County Medical Officer and Deputy Principal School Medical Officer:

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

Senior Medical Officer:

M. K. E. ALLINGTON, B.A., M.R.C.S., L.R.C.P., M.B., B.Ch., D.Ch., D.P.H.

Medical Officers in Department and School Medical Officers:

*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.

Principal Dental Officer:

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

Senior Dental Officer:

R. J. IZON, B.D.S.

School Dental Officers:

A. G. DAVIDSON, L.D.S., R.C.S., (EDIN).

P. G. WORTHING, B.D.S., L.D.S., R.C.S., (ENG.)

Chief Nursing Officer:

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

Principal Nursing Officer:

MISS E. POWELL, S.R.N., S.C.M., H.V.

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 65457
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

	1970	1971		
	<i>Population</i>	<i>Live Births</i>	<i>Deaths</i>	<i>Population</i>
URBAN				
Hereford City (M.B.) ...	46,640	768	404	46,920
Kington	1,970	38	31	1,920
Leominster (M.B.)	6,940	115	83	7,070
Ross-on-Wye	6,570	95	87	6,370
Total Urban Districts ...	62,120	1,016	605	62,280
RURAL				
Bromyard	8,560	112	111	8,520
Dore and Bredwardine ...	7,710	125	83	7,170
Hereford	20,590	314	202	19,040
Kington	4,240	61	58	3,950
Ledbury	11,640	147	142	11,370
Leominster and Wigmore ...	9,650	137	102	9,720
Ross and Whitchurch ...	11,460	142	146	11,380
Weobley	5,650	79	63	5,640
Total Rural Districts ...	79,500	1,117	907	76,790
Total County	141,620	2,133	1,512	139,070
England and Wales	48,987,700	783,165	567,345	48,815,000

Note—The population figures shown are the Registrar General's estimated population at the 30th June and those for 1971 take account of the preliminary results of the 1971 census.

VITAL STATISTICS

HEREFORDSHIRE	1970	1971
Live births Male ...	1,091	1,104
Female ...	1,014	1,029
Total ...	2,105	2,133
Live birth rate per 1,000 population	15.3*	15.8*
Illegitimate live births per cent of total live births	7.6	6.6
Still births Male ...	20	11
Female ...	14	10
Total ...	34	21
Still birth rate per 1,000 live and still births	15.9	9.7
Total live and still births Male ...	1,111	1,115
Female ...	1,028	1,039
Total ...	2,139	2,154
Infant deaths	28	41
Infant mortality rate per 1,000 live births Total ...	13.3	19.2
Legitimate	13.4	18.6
Illegitimate	12.1	28.4
Neo-natal mortality rate per 1,000 live births (first four weeks) ...	10.9	12.7
Early neo-natal mortality rate per 1,000 live births (first week) ...	10.0	10.3
† Perinatal mortality rate	25.7	20.2
Maternal deaths (including abortion)	1	Nil
Maternal mortality rate per 1,000 live and still births	0.4	—
Death rate per 1,000 population	11.3*	10.5*
ENGLAND AND WALES		
Live birth rate	16.0	16.0
Still birth rate	13.0	12.5
Infant mortality rate	18.2	17.5
Crude death rate	11.7	11.6

* 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— Rate per 1,000 live births
Year	Live births	Infant deaths	Rate per 1,000 live births	
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	18.3
1968	2,236	31	13.9	18.3
1969	2,286	40	17.5	18.0
1970	2,105	28	13.3	18.2
1971	2,133	41	19.2	17.5

Perinatal Mortality

The perinatal mortality rate of 20.2 compares with 25.7 in 1970 and the rate of 22.3 for England and Wales.

There were 21 still births compared with 34 last year. Of these four were illegitimate.

22 babies died during the first week, one more than last year, and, of these, one was illegitimate.

Congenital Malformations

Number notified in respect of infants born during the year.

Central nervous system	...	...	...	14
Eye and ear ...	...	...	...	1
Alimentary system	...	...	...	5
Heart and great vessels	...	...	...	2
Respiratory system	...	...	...	—
Uro-genital system	...	...	...	2
Limbs	...	...	...	14
Other skeletal	...	...	...	—
Other systems	...	...	...	1
Other malformations	...	...	...	4
			TOTAL	43
				—
Number of infants	...	...	...	33

HEALTH CENTRES

The result of the Public Local Enquiry held on 27th October, 1970 into the Council's application for planning permission to erect a Health Centre on land between Sussex Avenue, Kent Avenue and Alton Street, Ross-on-Wye was received in March.

Briefly the application was turned down on the grounds that it was preferred to keep the site an open space, that it would lead to increased traffic congestion and, rather surprisingly, that demand for a Health Centre had not been proven.

The site was chosen by the Health Committee after careful consideration and investigation of fifteen alternative sites. One further site was suggested during the year but was not considered suitable as it was too far away from the town centre.

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Mothercraft and Relaxation Classes

438 mothers mostly hospital booked attended relaxation/mothercraft classes.

Number of centres	...	...	...	...	...	...	...	7
Number of women who attended :								
(a) Institutional booked	...	...	...	...	...	...	...	416
(b) Domiciliary booked	...	...	...	...	...	...	...	22
TOTAL	...	...	...	...	...	...	...	438
Total number of attendances	...	...	...	...	...	...	...	2,456

The centre at Kington was closed for lack of attendances.

Child Welfare Centres

Number of centres	...	...	...	...	...	...	...	28
Number of children who attended :								
(a) Born in 1971	...	...	...	...	...	...	...	1,301
(b) Born in 1970	...	...	...	...	...	...	...	1,271
(c) Born in 1966-69	...	...	...	...	...	...	...	1,491
TOTAL	...	...	...	...	...	...	...	4,063
Number of sessions held by :								
(a) Medical officers	...	...	...	...	...	...	...	438
(b) General practitioners	...	...	...	...	...	...	...	303
TOTAL	...	...	...	...	...	...	...	741

A child welfare centre was opened in Leintwardine in February. The centre is held once monthly in the mobile clinic which is parked alongside the Village Hall which serves as a waiting room, etc. The mobile clinic now visits fourteen centres. The annual conference of voluntary workers was held and was well attended.

“At Risk” Register

The names of children who had some factor in their family, pre-natal, birth or early post-natal history which might put them at risk of some handicapping condition were put on the Register (if they survived the first week of life). The names of children who before the age of one year had certain serious illnesses or were reported to have developed important defects or to have marked delay in development were also put on the Register.

In the light of continued experience with the Register there has been a revision of the selection factors used and re-definition and omission of some has caused a fall in the numbers put on the Register since 1968.

If the children were found to be developing normally by the age of 18 months or 2 years, their names were removed from the Register. The others are kept under observation, by means of periodic developmental assessments, until they are found to be normal or frankly handicapped. Most of these assessments have been carried out in the children's own homes.

Where necessary the children receive medical or surgical treatment and supervision at various hospitals and in some cases training at home until such time as special educational provision is required. They are then administratively “ascertained” as having a certain type or mixed types of handicap, after which their names, too, are removed from the Register. These educational ascertainments are often delayed, except in the case of children who are blind or deaf or have language difficulties, until the age of four or five years or even later, so that their particular needs can be more accurately determined.

The children who were born in 1966 became of school age in 1971, so more children in this age group have had their educational needs ascertained or carefully considered in anticipation of suitable placement. The different types of handicap are shown in the figures, which require two comments. Firstly, of the ascertained speech defects, one case had severe language disorder not associated with mental retardation (1966), 3 cases had language delay associated with mental retardation (2 in 1966 and 1 in 1967) and the rest were cases of delay in language or articulation with otherwise normal development. Secondly, all the children shown as delicate have congenital heart conditions; some of these will be able to attend ordinary school pending further investigations and after any necessary surgery.

The keeping of the “At Risk” Register will cease in 1972, as it will become absorbed into the new comprehensive, developmental screening system, which will then be introduced.

				Year of Birth					
				1966	1967	1968	1969	1970	1971
Number placed on register	...	Male	...	130	147	152	93	80	58
			Female	105	118	131	123	73	71
			TOTAL	235	265	283	216	153	129
Number of live births	...	...	...	2,416	2,427	2,236	2,286	2,105	2,133
Number on register per 100 live births	...	...	...	9.7	10.9	12.2	9.4	7.2	6.0
Number taken off register :-									
(a) Normal development	...	...	...	135	153	151	89	33	4
(b) Mild handicap	...	...	...	6	3	—	—	—	—
(c) Ascertained as handicapped	...	...	...	22	13	6	3	—	—
(d) Death	...	...	...	23	25	15	13	4	6
(e) Left County	...	...	...	35	38	31	28	11	10
(f) Appointments persistently failed	...	...	...	5	5	6	3	3	—
			TOTAL	226	237	209	136	51	20
Number remaining under observation :-									
(1) With anticipated placement									
(a) Normal development	...	...	...	—	6	39	24	5	2
(b) Mild handicap	...	...	...	3	6	7	4	—	—
(c) Handicapped	...	...	...	6	13	11	7	—	—
(2) Placement undecided				...	...	...	...	...	...
			TOTAL	9	28	74	80	102	109
Type of handicap :-									
A=Ascertained B=Anticipated									
				A	B	A	B	A	B
Blind	...	...	...	—	—	1	—	—	—
Partially sighted	...	...	...	1	—	—	1	—	—
Deaf	...	...	...	1	—	1	—	2	—
Partially hearing	...	...	...	2	—	—	—	—	—
Educationally sub-normal	...	...	...	5	4	3	6	2	4
Epileptic	...	...	...	—	—	—	—	—	—
Physically handicapped	...	...	...	1	—	3	1	1	2
Speech defect	...	...	...	9	—	6	—	2	1
Delicate	...	...	...	—	2	—	6	—	5
Multiple	...	...	...	3	—	—	—	2	—

Welfare Foods

The number of centres for the distribution of welfare foods has decreased during the past year to 66. Paid staff are employed in ten of the main centres, the remainder of the work being carried out by voluntary effort.

The sale of cod liver oil was discontinued during the year and a new preparation for children containing Vitamins A, D and C was introduced from April.

Total issues during 1971 :

National dried milk	...	...	...	6,584 packets
Cod liver oil	...	...	...	592 bottles
Vitamin A. and D. tablets	...	...	...	891 packets
Vitamin A., D. and C. drops	...	...	...	1,040 bottles
Orange juice	...	...	...	28,671 bottles

Dental Treatment

As in previous years the demand for dental treatment from this category of patient remains very low. Effort directed towards stimulating demand produces negligible response. Details of treatment provided are shown in the table below.

	<i>Expectant and Nursing Mothers</i>	<i>Children under five</i>
Examined	2	25
Requiring treatment	2	10
Offered treatment	2	10
Completed treatment	2	9
Treatment provided—		
Number of fillings	8	18
Teeth filled	8	15
Teeth extracted	—	4
General anaesthetics given	—	2
Scalings	1	—
Teeth otherwise conserved	—	—
Patients supplied with dentures—		
Full upper or lower	—	—
Partial upper or lower	—	—
Patients X-rayed	—	—

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.

MIDWIFERY

Notification of Intention to Practise

1.	Domiciliary	(a) District nurses	...	...	...	...	...	...	...	44
		(b) Independent	...	...	...	...	...	...	...	2
										46
2.	Institutions	(c) Hospitals	...	...	...	...	...	...	...	20
										20
										66
					Grand Total	...	...	...	...	66

Ante-Natal Care

Home visits by midwives	...	...	...	...	...	...	...	...	5,722
Surgery sessions	...	...	...	...	...	...	...	...	454

Deliveries attended by Domiciliary Midwives

Doctor not booked	...	...	...	...	...	...	...	...	11
Doctor booked	...	...	...	...	...	...	...	...	262
Total	...	...	...	...	...	...	...	...	273
"Flying Squad" Calls	...	...	...	...	...	...	...	...	5

Post-Natal Care

Nursing visits—Home deliveries	...	...	...	...	...	...	...	...	5,535
Nursing visits—Hospital deliveries	...	...	...	...	...	...	...	...	13,975
Surgery sessions	...	...	...	...	...	...	...	...	138

The decline in home confinements continued balanced by a corresponding increase in home care of mothers and babies delivered in hospital. Attendance of midwives at ante-natal and post-natal surgery sessions also increased.

Hospital co-operation continues as before with a good system of notification of mothers and babies for follow-up by domiciliary midwives.

Discussions were held with a view to a pilot scheme of deliveries in the General Practitioner Unit by City domiciliary midwives taking effect in January, 1972.

General practice attachments remained unchanged as regards full-time midwives, with no likelihood of extension beyond the six City midwives in liaison with two group practices. They combine these with geographical areas for any home midwifery and hospital follow-up visits.

In the rural areas, however, general practitioner requests for attachment resulted in one full-time and one part-time District Nurse-Midwife appointment during the year.

Telephone answering apparatus continued to be increased in number.

The pupil midwife training scheme continued to operate on a small scale in conjunction with the Hereford Hospital. Plans were made and approved for the revised syllabus of training due to be put into effect in March 1972. This will include an insight into Community Care to be provided with the assistance of nurses and health visitors. Removal of the statutory requirement of a minimum number of district deliveries for pupil midwives will solve an increasingly difficult problem.

HEALTH VISITING

Cases visited by health visitors :

(a) Children born in 1971	...	...	...	...	...	...	2,050
(b) Children born in 1970	...	...	...	...	...	...	2,325
(c) Children born in 1966-69	...	...	...	...	...	...	5,961
							<hr/>
(d) TOTAL	...	...	...	...	...	...	10,336
(e) Persons aged 65 or over	...	...	...	...	...	...	735
(f) Number included at (e) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	63
(g) Mentally disordered persons	...	...	...	...	...	...	10
(h) Number included at (g) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	2
(i) Persons excluding maternity cases, discharged from hospitals (other than mental hospitals)	...	...	...	...	...	...	29
(j) Number included at (i) visited at the special request of a G.P. or hospital	...	...	...	...	...	...	10
(k) Number of tuberculous households visited	...	...	...	...	...	...	90
(l) Number of households visited on account of other infectious diseases	...	...	...	...	...	...	347
(m) Other cases	...	...	...	...	...	...	1,364
(n) Total number of cases	...	...	...	...	...	...	12,911

There was a slight decrease in health visiting reflecting a reduction in the number of births and generally in children under five years of age. The character of the work remained as promotion of health at all ages through an advisory service in homes and in clinics as well as health education of groups and of individuals.

April 1st, 1971 saw the loss of Day Nurseries, Play Groups, and Child Minders to registration and supervision under the new Social Services Department. This had hitherto linked closely with the health visitor's care of children under five years so that there was naturally some regret at its passing. In all aspects of its work liaison with the Social Services Department was in embryo at the year end.

Although little other change occurred there was a briefing of health visitors and all others concerned on forthcoming change due to be implemented in the sphere of Child Health and Development.

Screening tests continued in the form of the Guthrie Test for Phenylketonuria carried out in early infancy by midwives, and screening tests of hearing in later infancy done by health visitors at home and in the Hearing and Speech Centre.

Health Education by group teaching mainly in schools was well maintained and greatly assisted by developments in the library of visual aids within the health education section.

Liaison with the hospitals remained as before at the Chest Clinic, the Diabetic Clinic, and in home accidents or illness of children under five years. In all these the health visitor paid follow up home visits and supplied reports on home conditions of babies and young children. Where required she had immediate access to the Ward Sister and supported her in teaching mothers at home to carry out instruction given in hospital.

Liaison with family doctors was good on an informal basis but health visitor attachment remained at the level of three health visitors to two group practices.

HOME NURSING

Number of persons nursed during the year ...	...	...	...	...	...	...	3,726
Number of visits	...	...	...	...	...	...	78,897
Number of persons aged under 5 at first visit in 1971	...	...	...	...	...	...	146
Number of persons aged 65 or over at first visit in 1971	...	...	...	...	...	...	2,198
Surgery sessions	...	...	...	...	...	...	1,298

The total number of home nursing visits continued to rise with emphasis on care of the aged and on after care of patients discharged from hospital.

The increased number of nursing sessions held in doctors' surgeries reflected partly the increase in nurses working in attachment to general practice.

Hospital liaison continued as before with notification usually beforehand of patients requiring nursing care after discharge. There is probably still room for reducing the frequency of return to out-patient departments and to wards for dressings and injections which could be carried out at home.

Regular invitation is extended to domiciliary staff to attend the excellent programme of post graduate lectures at the hospital. Unfortunately the comparatively late hour at which they are held reduces the number of those who would otherwise like to attend.

General practice attachment was extended during the year by two full-time and one part-time home nurses involving two group practices and one single practice.

VACCINATION AND IMMUNISATION

Diphtheria Immunisation

1,834 children under the age of 16 were primarily immunised, the majority were immunised with triple antigen. 3,250 received re-inforcing doses.

Measles Vaccination

1,377 children were vaccinated against measles.

Poliomyelitis Vaccination

1,733 children under the age of sixteen were vaccinated, a further 1,820 received re-inforcing doses. 14 adults were vaccinated, 3 were given booster doses.

Rubella Vaccination

Vaccination against rubella was offered to all girls aged 13. 678 girls were vaccinated during the year.

Smallpox Vaccination

The Department of Health and Social Security now advise that vaccination against smallpox need not be recommended as a routine procedure in early childhood but all travellers to and from areas of the world where smallpox is endemic or countries where eradication programmes are in progress should be protected by recent 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	36	—
Aged 1	503	—
2—4	178	9
5—15	79	178
Total	796	187
1970	1,085	225

No case of smallpox was reported during the year.

Tetanus Immunisation

1,870 children were immunised against tetanus mainly by triple antigen. A further 3,350 were given booster doses.

Whooping Cough Immunisation

1,656 children were immunised against whooping cough mainly by triple antigen. 347 were given reinforcing doses.

VACCINATION OF PERSONS UNDER AGE 16

Completed Primary Courses

Type of Vaccine	YEAR OF BIRTH					Others under age 16	Total
	1971	1970	1969	1968	1964-67		
1. Quadruple	—	—	—	—	—	—	—
2. Triple	107	1,176	298	32	33	10	1,656
3. Diphtheria/Whooping cough	—	—	—	—	—	—	—
4. Diphtheria/Tetanus ...	5	3	2	7	124	33	174
5. Diphtheria	—	—	—	—	2	2	4
6. Whooping cough ...	—	—	—	—	—	—	—
7. Tetanus	—	1	2	2	3	32	40
8. Salk	—	—	—	—	—	—	—
9. Sabin	86	1,178	181	213	50	25	1,733
10. Measles	9	459	400	189	281	39	1,377
11. Rubella	—	—	—	—	—	678	678
12. Lines 1+2+3+4+5 (Diphtheria)	112	1,179	300	39	159	45	1,834
13. Lines 1+2+3+6 (Whooping Cough) ...	107	1,176	298	32	33	10	1,656
14. Lines 1+2+4+7 (Tetanus)	112	1,180	302	41	160	75	1,870
15. Lines 1+8+9 (Poliomyelitis) ...	86	1,178	181	213	50	25	1,733

Reinforcing Doses

Type of Vaccine	YEAR OF BIRTH					Others under age 16	Total
	1971	1970	1969	1968	1964-67		
1. Quadruple	—	—	—	—	—	—	—
2. Triple	—	1	42	16	244	44	347
3. Diphtheria/Whooping cough	—	—	—	—	—	—	—
4. Diphtheria/Tetanus ...	—	1	6	4	1,717	1,128	2,856
5. Diphtheria	—	—	—	—	32	15	47
6. Whooping cough ...	—	—	—	—	—	—	—
7. Tetanus	1	1	—	5	30	110	147
8. Salk	—	—	—	—	—	—	—
9. Sabin	—	5	46	21	1,599	149	1,820
10. Lines 1+2+3+4+5 (Diphtheria)	—	2	48	20	1,993	1,187	3,250
11. Lines 1+2+3+6 (Whooping Cough) ...	—	1	42	16	244	44	347
12. Lines 1+2+4+7 (Tetanus)	1	3	48	25	1,991	1,282	3,350
13. Lines 1+8+9 (Poliomyelitis) ...	—	5	46	21	1,599	149	1,820

AMBULANCE SERVICE

Personnel

Following the re-organisation last year it has become apparent that the new scheme has been of benefit to the Service. Some further alteration was made to the rota of ambulancemen to provide for additional cover at night at the Hereford Headquarters and to cover the loss of day time working the appointment of two part-time drivers, on split duty arrangement, was made. This was an innovation inasmuch as these appointments were female and they are giving very satisfactory service. The ranks now read :—

			Chief Ambulance Officer, Superintendent		
			<i>Station Officers</i>	<i>Leading Ambulancemen</i>	<i>Ambulancemen</i>
Hereford	...	...	4	4	20 plus 2 part time
Leominster	...	...	1	1	4
Ross-on-Wye	...	...	1	1	4

One senior mechanic, two mechanics, one semi-skilled workshop assistant, one caretaker and one cleaner are employed at the Hereford Station.

Volunteers continue to provide a service at Ledbury and Kington.

Stations

It is known that in 1972 the Fire Station at Ledbury will become available to this Service when the replacement premises are available to the Fire Service. I have looked at various sites in the Bromyard and Kington areas for purpose built stations and have agreed that a suitable site is available on the former Kington Railway Station. Bromyard, however, has presented greater difficulty and although various sites have been investigated, none has proved to be entirely to my satisfaction. However, I am persisting in my search.

Enquiries are continuing with a view to providing a suitable vehicle wash at the Hereford Headquarters placed in a proper position so that there can be a proper flow through of vehicles without the necessity for reversing etc.

Vehicles

The three vehicles which were ordered on the 1970/71 estimates were delivered in the early part of the year followed by the delivery of the 1971/72 vehicles, making a total of six delivered during the year. All these vehicles were Bedford C.F chassis with bodies by Lomas. This new model, while suffering from one or two teething troubles has proved to give an excellent ride to the patient and is, by comparison, extremely economical on fuel. Five obsolete ambulances were disposed of and one sitting case ambulance retained to increase the fleet.

Radio-Telephone Communications

During the year a circular was issued by the Department of Health and Social Security on radio communications for the Ambulance Service. This circular advised all Ambulance Authorities to re-equip with multi channel, switchable, radio sets in the High Band range of frequencies and operated on frequency modulation. One of the channels will be reserved for a national emergency frequency. The purpose behind this scheme is to enable communications to be established with neighbouring authorities during comparatively local operations and for the national emergency frequency to be used in cases of major civil accidents or where help is urgently needed when travelling through the areas of distant authorities. Negotiations have taken place with several radio manufacturers and radio surveys have been carried out from several sites. Progress towards a final scheme is well advanced and it is hoped to obtain quotations early in 1972.

Training

In view of the superior facilities provided at the Wrenbury Hall Central Training School in Cheshire it has been decided that, in future, ambulancemen for their initial training course and three yearly revisionary courses will attend this school.

One recruit and one experienced ambulanceman were sent for the basic six weeks course, both of whom received first class reports on the work they undertook. The purpose of the latter attending this course was to enable him to undertake an Instructors Course at a later date.

A further ambulanceman successfully undertook an examination for the Graduate Diploma of the Institute of Ambulance Officers. This brings the total of people holding this Diploma to seven.

Instructors of the Service have given many and varied courses of instruction in first aid and other matters connected with the Ambulance Service.

Statistics

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

<i>Year</i>	<i>Annual mileage</i>	<i>Patients carried</i>
1962	313,446	34,382
1963	336,651	36,632
1964	351,862	42,074
1965	355,715	42,386
1966	359,944	44,877
1967	365,406	46,081
1968	390,976	49,469
1969	376,203	51,542
1970	395,750	56,286
1971	405,436	58,313

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	5,905	38,515	44,420	235,118	5,934
Kington	265	293	558	9,136	244
Ledbury	382	661	1,043	15,930	528
Leominster	1,056	5,935	6,991	86,774	1,004
Ross-on-Wye	1,499	3,802	5,301	58,478	1,288
TOTAL	9,107	49,206	58,313	405,436	8,998

In addition 39 patients were conveyed mainly by rail, saving approximately 8,632 road miles.

Hospital Car Service

The Hospital Car Service continues to give valuable assistance in the work of the County Ambulance Service and again mileage and patients moved shows an increase.

There are still many areas in the county where additional volunteers would be very welcome, particularly in the east and northern parts of the county.

The following table shows the mileage covered, journeys made and patients carried.

	<i>Mileage</i>	<i>Journeys</i>	<i>Patients carried</i>
January	26,814	564	2,095
February	24,527	618	1,929
March	28,303	541	2,634
April	28,202	563	2,064
May	28,102	556	2,131
June	29,211	599	2,045
July	27,987	509	2,023
August	21,894	361	1,604
September	28,540	532	2,074
October	26,860	479	1,843
November	31,583	597	2,120
December	27,042	526	1,964
TOTAL	329,065	6,445	24,526
1970	273,621	6,053	21,203

PREVENTION OF ILLNESS, CARE AND AFTER CARE

Tuberculosis

	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Total</i>
Number of notifications :				
Pulmonary	8	4	1	13
Non-Pulmonary	2	3	1	6
Number of deaths :				
Tuberculosis of respiratory system ...	1	2	—	3
Other Tuberculosis, including late effects ...	1	—	—	1
Death rate per 1,000 population :				
COUNTY				
Tuberculosis of respiratory system ... ..	...	...	0.022	
Other ... ..	...	...	0.007	
ENGLAND AND WALES				
Tuberculosis of respiratory system ... ..	...	...	0.019	
Other ... ..	...	...	0.010	

The number of new notifications of tuberculosis has remained almost at the same level for the last three successive years. Three of the cases notified in 1971 were found as a direct result of routine contact tracing procedures. The high proportion of young child contacts who produced a positive reaction to the skin test was significantly higher than in recent years. This was partly due to improvements in our contact tracing procedure and also to the relatively large number of child contacts of two active cases of tuberculosis notified during the year. All child contacts who produce positive reactions to the skin test are kept under periodic review by the Consultant Chest Physician.

Number of child contacts skin tested	...	...	98
Number found positive	...	...	14
Number found negative	...	...	84
Number vaccinated	...	...	80
Number of infants vaccinated at birth	...	...	8

B.C.G. Vaccination

B.C.G. vaccination is offered to all children aged 13 and over. Children who were vaccinated in 1970 and were still attending school were re-tested; those again producing negative results being re-vaccinated.

Number offered test and vaccination if necessary	...	...	1,727
Number accepted	...	...	1,378 80%
Number tested during the year	...	...	1,237
Number found to be negative and vaccinated	...	...	1,057 85.4%
Number found to be tuberculin positive	...	...	180 14.6%
Number referred to Chest Physician	...	...	4
Number vaccinated with B.C.G. in 1970 and re-tested 1971	...	...	1,091
Number found to be negative and re-vaccinated	...	...	58
Number found to be positive	...	...	1,022

In addition to the above 173 first year students at the College of Education were tested of whom 36 were subsequently vaccinated.

Occupational Therapy

Throughout the year 101 patients have been visited, of whom 36 were fresh cases. Of these, 20 were visited for specific treatment, 11 for assessment regarding future employment, 19 for assessment in the home regarding adaptations and aids to daily living, 29 who were on factory outwork, supplied by Haigh Engineering Company of Ross-on-Wye, and five on home industries.

Patients included five children of whom three were subnormal. Disabilities of adult patients of whom 75% were men, included: 17% diseases of the chest, 16% rheumatoid and osteo arthritis and 9% strokes.

During the year, one patient was referred to Passmore Edwards Medical Rehabilitation Unit, Clacton, and has now returned to his previous occupation; one patient was referred to the Industrial Rehabilitation Unit, Cardiff, and has since been placed in employment; one patient was settled at Kyre Park Residential Home for Spastics, Tenbury Wells and three patients returned direct to normal employment.

Adaptations to Homes to install Artificial Kidney Machines.

One case was dealt with under this scheme during the year. The patient was a young woman aged 20 years living in an isolated country area. Fortunately there was a satisfactory public water and electricity supply to the home but it was estimated that alterations to the structure of the premises to enable an artificial kidney machine to be installed would be very costly. The problem was overcome by providing a Portakabin Dialysis Unit on the lawn adjacent to the house. The whole cost of providing and connecting the Portakabin Unit to the services was met by the County Council.

A patient for whom adaptations were made in 1969 has had a kidney transplant performed and is progressing satisfactorily. He will retain his dialysis equipment until the possibility of 'rejection' is considered unlikely.

Medical Arrangements for Long-stay Immigrants

There was a considerable fall in the number of notifications received during the year from Port Health Authorities concerning the arrival of long-stay immigrants. Arrangements for the visiting by health visitors of newly arrived long stay immigrants continue. The purpose of visiting new immigrants is to help overcome the special problems which could arise with those who do not know of our National Health Service arrangements.

Notifications were received from Port Health Authorities of the arrival of the following immigrants :—

From Australia	...	...	1
Hong Kong	...	...	6
India	...	...	1
Jamaica	...	...	2
New Zealand	...	...	1
Pakistan	...	...	1
Spain	...	...	3
United Arab Republic	...	...	1
			—
	TOTAL	...	16
			—

Two of the immigrants listed above came to join the medical staff at the Hereford hospitals and two were student nurses. Three of the others had left the county again within a day or two of arrival.

While no case of Tuberculosis occurred in immigrants, a male immigrant from Hong Kong who came to work as a cook at a Restaurant was found by the emigration authorities to have an intestinal parasitic infection.

The district medical officer of health immediately followed up this case and the man was not allowed to work in the Restaurant until the medical officer was satisfied that treatment had cleared the infection.

Cervical Cytology

The number of cervical smears examined at the Pathology Department at the County Hospital, submitted from the various clinics in the county, showed a further increase over last year. This increase is accounted for to a certain extent by the routine procedure which is being adopted, of taking annual smear tests from women taking the oral contraceptive.

Special clinic sessions for the purpose of taking smear tests continued to be held at Hereford, Ledbury, Leominster and Ross-on-Wye. Attendance at these special clinic sessions continued to be very good.

The following table shows the number of tests performed during the year :-

By General Medical Practitioners	...	...	1,470
At: Family Planning Association Clinics	...	...	1,611
County Hospital (Out-Patients)	...	...	817
County Hospital (In-Patients)	...	...	51
Other Hospitals	...	...	23
Local Health Authority Clinics	...	...	1,007
			—
	TOTAL	...	4,979
			—

Of the 1,007 women who attended the Local Health Authority Clinics, 345 attended for a first test and 662 for re-tests. This is almost a complete reversal of the proportions of the previous year. It is not without significance that there was a corresponding fall in the proportion of positive cases discovered among the patients screened at Local Authority Clinics. Only one was Grade IV (positive) and five results were Grade III (suspicious of malignancy).

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 own doctor to the Consultant Gynaecologist for further investigation. In cases where the test is reported to be 'Suspicious' the patient is either kept under periodic review or referred for further investigation.

Chiropody

This service is available to the elderly, the physically handicapped and expectant mothers. Sessional work is undertaken for the Herefordshire Hospital Management Committee and for the Social Services Department at Hospitals and Old Peoples Homes.

The demand for this service continues to increase and clinics are now held at the following towns and villages in the County :-

Almeley	Hereford (2)
Bromyard	Kington
Clehonger	Ledbury
Clifford	Leominster
Cradley	Ross-on-Wye
Cusop	Walford
Dilwyn	Weobley
Dorstone	Weston-under-Penyard
Eardisley	Whitney-on-Wye

During the year a total number of 9,785 treatments were carried out on patients attending clinics. In addition to this 1,002 visits were made to patients requiring domiciliary treatment.

Four full-time Chiropodists are employed. There are waiting lists for treatment at all clinics and, since the scheme was extended to cover home chiropody treatment, the demand for this service among the crippled and bedridden has greatly increased.

Medical Loan

Requests for the loan of nursing aids to assist with the care of patients being nursed in their own homes continued to increase. A large variety of aids ranging from hydraulic patient lifts to simple urinals were loaned to 260 new patients; some patients requiring the loan of a number of items. Requests for equipment are received from hospital consultants and medical social workers prior to the discharge of patients from hospital. The greatest demand, however, is from family doctors and district nurses. Aids for the prevention or treatment of decubitus ulcers are increasingly requested, while the need for hospital type beds fitted with lifting poles is ever present.

The larger items of equipment required for long-term use are supplied on free loan from the county health department. Various smaller items of nursing equipment for short-term loan are obtainable from the British Red Cross Society depots situated in the main centres throughout the County. The Society make a small hire charge to cover the operating cost of the service.

HEALTH EDUCATION

Now that the epidemics of diphtheria and poliomyelitis and other infectious diseases we experienced years ago have been brought under control it appeared to be an appropriate time to determine what steps ought to be taken to deal with the major causes of ill health today. I refer of course to heart disease, bronchitis, lung cancer, obesity and dental caries. After a searching examination of all the many factors involved it was decided to launch a comprehensive campaign against smoking. In my opinion, there is no doubt whatsoever, that a great deal of suffering and eventual death could be avoided if only we could concentrate more effort into preventive measures. Having decided to launch a campaign of this nature, the medical, nursing and teaching professions were consulted at an early stage and it was clear that we had a large measure of support from our colleagues in the hospital and general practitioner branches of the service and from the nursing, midwifery and health visiting professions. Plans were made to launch this exhibition during 1972 and I trust we will be able to enlist the support of the voluntary organisations and the general public.

We have had a greatly increased interest in health education on the part of schools; several talks have been given about sexually transmitted diseases and instruction in emergency first aid has attracted much more attention. It is also pleasing to record that we arranged three very successful first aid courses for teachers and I understand such courses are to become a regular annual event.

Last year my predecessor reported that the Health Education Officer and his Assistant attended 169 sessions in schools and elsewhere. This year, the number of sessions attended has increased to a record of 205 involving a total audience of 5,941. To this joint effort must be added the work undertaken by the medical officers, health visitors, nurses and midwives involving as it does talks, on a wide variety of health topics, child care and mothercraft courses, relaxation classes and so on.

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:	
'Pasteurised' milk	51
'Ultra Heat Treated'	13
'Untreated and Pasteurised'	3
'Pasteurised and Sterilized'	37
'Untreated, Pasteurised and Sterilized'	4
'Ultra Heat Treated and Sterilized'	1
'Ultra Heat Treated and Pasteurised'	5
'Ultra Heat Treated, Pasteurised and Sterilized'	7
'Ultra Heat Treated, Pasteurised, Sterilized and Untreated'	1
TOTAL Dealer's (Pre-packed milk) licences:	122

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 during the year is shown below :-

Food and Drugs Act.	Milk	...	...	435
	Other foods			77
Antibiotics in Milk	...	...	...	389
Fertilisers	...	...	...	7
Feeding Stuffs	...	...	...	47
Trades Description Act	...	...	...	4
Consumer Protection Act	...	...	...	3
Drinking Waters	...	...	...	8
Effluents and Sewages	...	...	...	71
Miscellaneous	...	...	...	12
			TOTAL	1,053

Milk

During the year, 435 samples of milk were analysed for compositional quality under the provisions of the Food and Drugs Act, 1955. The average fat and solids-not-fat figures are as follows :

	<i>Number Examined</i>	<i>Fat per cent</i>	<i>Solids-not-fat per cent</i>
All milks	435	3.75	8.72
Channel Islands Milks	41	4.58	9.04
Milks other than Channel Islands	394	3.66	8.68

The Sales of Milk Regulations, 1939 prescribe presumptive limits of fat 3.0 per cent, solids-not-fat 8.5 per cent. Up to about 1930 the only method of judging whether water had been added to or fat abstracted from milk was to compare the chemical analysis of the samples obtained from the churns with that of the milk given by the cows at the farm when Inspectors supervised the milking. The value of this so called 'Appeal-to-Cow' test lies in the fact that the percentage of fat and solids-not-fat of the milk given by a herd of cows does not vary to any great extent from day to day, so that if there is a considerable difference between the analyses there is little doubt that the original deficiencies cannot be attributed to natural causes.

For the last forty years, however, the Freezing Point Test has been instrumental in distinguishing between solids-not-fat deficiencies due to natural causes and those due to the presence of extraneous water. The great advantage of this method lies in the power it gives of discrimination between a good quality milk which contains extraneous water and naturally poor quality milk. The solids-not-fat content of genuine milk, i.e. as it comes from the cows, may vary considerably—one herd may consistently give milk containing say 8.0% whilst another herd's milk might contain 9.0%. At first sight, the former might be considered to be adulterated, but, if the freezing point depression is within the normal range, the farmer may be at once absolved from blame.

In the case of fat deficiencies—which may be due to partial skimming of the cream, the Freezing Point Test is of no assistance, and the 'Appeal-to-Cow' procedure must be followed.

The farm samples having been analysed, the solids-not-fat and fat percentages and the freezing point depressions are compared with the corresponding figures for the original churn samples, and it is on the basis of the seriousness or otherwise of the discrepancies that decisions on legal proceedings are taken.

The bulk tanker system of collecting milk from farms has much in its favour from the point of view of hygiene and efficiency. But from the sampling angle it does mean that such a tank sample has to be taken at each farm whereas churn samples are either taken from the lorry in transit or on delivery at the dairy. Often the latter are taken informally, in view of the large numbers involved, and official samples are taken as repeats of 'suspect' samples. Tank samples must on the other hand be taken officially as a routine, and these samples are subjected to rather more stringent testing in view of the large volumes involved.

Of the total of 435 examined, the following numbers were returned as unsatisfactory.

	<i>Number</i>	<i>Per cent</i>
Samples deficient in fat	29	6.6
Samples containing extraneous water	22	5.1
Samples deficient in fat and containing extraneous water	2	0.4
	<hr/> 53 <hr/>	<hr/> 12.1 <hr/>

Antibiotics in Milk

Antibiotics of the penicillin type are commonly used to treat mastitis in milch cows, being applied as an intra mammary injection. Cows so treated will continue to pass antibiotic residues in the milk for some two to three days and for this period such milk should be withheld from sale.

During the year 389 samples of milk were tested for penicillin and other antibiotic residues. Seven samples gave positive indications, of which only two, containing respectively 0.10 and 0.15 International Units of penicillin per millilitre of milk, were above what is regarded as the reportable level, i.e. 0.05 I.U.s per millilitre of milk.

Foods other than Milks

Sixty-two samples were submitted as purchase samples under the Food and Drugs Act, 1955, in addition to fifteen samples which were received as complaints from members of the public. Three prosecutions were instituted in respect of three complaint samples which were found to be unfit for consumption.

Trade Descriptions Act, 1968

Four samples were examined during the year. These included a sample of gin which was found to contain only 52.1° of Proof Spirit instead of the declared content of 70°. This represents the addition of 25 per cent of water. The Landlord was prosecuted.

Consumer Protection Act

Three samples of children's toys were tested for compliance with the Safety of Children's Toys Regulations, with respect to toxic metal levels in the paint coatings. All were satisfactory.

Drinking Waters and Sewage Effluents

Eight samples of drinking waters and 71 samples of sewage effluents were submitted by the various district councils in the County. The latter are tested for conformity with the recommendations of the Royal Commission on Sewage Disposal and the requirements of the River Authority.

Miscellaneous

Twelve samples of various commodities were examined on behalf of private individuals during the year. Five of these related to the alleged poisoning of dogs.

One dog was proved to have died of strychnine poisoning. Under the Cruel Poisons Regulations the only legitimate use of strychnine is for the destruction of moles.

SCHOOL HEALTH

MEDICAL INSPECTION

Primary Schools	105	...	...	...	14,378 pupils
Secondary ..	20	...	...	...	9,331 ..
Special ..	3	...	...	...	132 ..
Nursery ..	1	...	...	...	35 ..
Nursery Classes	2	...	...	...	60 ..
TOTAL ...					23,936

Routine medical inspection continued as in previous years, namely :—

Entrants, i.e. children admitted for the first time to a primary school.

Secondary entrants—during their first year in the secondary school.

Leavers—during their last year in school.

General medical practitioners continue to carry out some of the routine school medical inspections. Fourteen doctors are now engaged on this work.

82 children attending 1 school not maintained by the authority were medically examined under Section 78(2) of the Education Act, 1944.

PERIODIC MEDICAL INSPECTIONS

Age Groups inspected	No. of Pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED		No. of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition	Total individual pupils
		No.	No.				
1967 & later	173	173	—	—	2	15	13
1966	904	904	—	—	19	44	60
1965	1,135	1,135	—	—	39	65	94
1964	269	269	—	—	6	14	20
1963	104	104	—	—	9	5	14
1962	61	61	—	—	4	3	7
1961	69	69	—	—	4	6	9
1960	509	509	—	—	15	26	38
1959	699	699	—	—	28	32	57
1958	463	463	—	—	22	15	36
1957	480	480	—	—	15	26	37
1956 & earlier	1,259	1,259	—	—	42	60	101
TOTAL	6,125	6,125	—	—	205	311	576

Number of special Inspections ... 1,143

Number of Re-inspections ... 651

TOTAL ... 1,794

Defects found by Periodic and Special Medical Inspections during the year

DEFECTS OR DISEASES	PERIODIC INSPECTIONS				SPECIAL INSPECTIONS
	Entrants	Leavers	Others	Total	
Skin T	2	27	1	30	—
	O 4	13	—	17	—
Eyes :					
(a) Vision ... T	66	120	17	203	14
O 176	186	12	374	31	
(b) Squint ... T	19	6	1	26	—
O 76	2	—	78	—	
(c) Other ... T	3	2	—	5	—
O 2	1	—	3	—	
Ears :					
(a) Hearing ... T	7	5	2	14	1
O 94	23	9	126	—	
(b) Otitis Media T	2	1	—	3	—
O 10	1	—	11	—	
(c) Other ... T	1	8	—	9	—
O 1	—	—	1	—	
Nose & Throat ... T	17	6	1	24	—
O 58	4	3	65	—	
Speech T	38	3	2	43	—
O 42	13	1	56	—	
Lymphatic Glands T	2	—	—	2	—
O 15	1	—	16	—	
Heart T	1	2	1	4	—
O 13	7	1	21	—	
Lungs T	7	6	1	14	1
O 40	13	3	56	—	
Developmental :					
(a) Hernia ... T	7	3	—	10	—
O 2	3	—	5	—	
(b) Other ... T	4	6	—	10	1
O 17	20	2	39	—	
Orthopaedic :					
(a) Posture ... T	2	3	—	5	—
O 12	39	—	51	1	
(b) Feet ... T	2	6	—	8	—
O 57	63	7	127	1	
(c) Other ... T	4	8	—	12	—
O 22	14	1	37	—	
Nervous System :					
(a) Epilepsy ... T	—	2	3	5	—
O 5	10	1	16	—	
(b) Other ... T	1	1	—	2	—
O 7	6	1	14	—	
Psychological :					
(a) Development T	8	5	1	14	—
O 17	7	2	26	2	
(b) Stability ... T	6	2	—	8	—
O 18	8	—	26	1	
Abdomen T	6	10	1	17	—
O 11	1	—	12	—	
Other T	6	48	—	54	—
O 6	17	1	24	1	

T—Requiring Treatment

O—Requiring Observation

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	No. of cases known to have been dealt with.
External and other (excluding errors of refraction and squint)	15
Errors of refraction (including squint)	826
TOTAL	841

No. of children for whom spectacles were prescribed 256

97 children are known to have received operative treatment for squint.

Forms for the replacement or repair of spectacles were issued on behalf of 272 children.

A colour vision survey was made of boys examined as 'leavers'. Of 658 pupils, 43 or 6.5% were found to have defective colour vision, and are divided into the following categories.

Red/Green blindness (complete)	24
Red/Green blindness (incomplete)	5
Red blindness	2
Green blindness	5
Indeterminate	7
Total	43

8 four year old children were screened for amblyopia at the parents' request, 2 subsequently being referred to the Eye Specialist.

The vision of all new entrants to primary schools continue to be checked by school nursing staff as soon as possible after admission. 1,666 children were tested during the year, of which 78 were referred to school medical officers for further investigation. 43 were found to be already attending the Victoria Eye Hospital.

DISEASES OF EAR, NOSE AND THROAT

	No. of cases known to have been treated.
Received operative treatment for :	
(a) diseases of the ear	4
(b) adenoids and chronic tonsillitis	16
(c) other nose and throat conditions	6
Received other forms of treatment	46
TOTAL	72

Total number of pupils in schools who are known to have been provided with hearing aids :

(a) in 1971	14
(b) in previous years	49

HEARING AND SPEECH CENTRE

AUDIOLOGY

A part-time audiology technician visited schools to test all children between their sixth and seventh birthdays and such other children, of all ages, when it appeared to be necessary.

Of 2,183 children tested by pure tone audiometer, 285 failed. These were checked again after an interval of about 2—3 weeks and children failing the second time were referred for further investigation. Of these 156 children were seen at the Hearing and Speech Centre; 20 of whom were referred on to the Consultant Ear, Nose and Throat Surgeon.

During the past year the programme of testing pre-school and school age children at the Centre has continued with six sessions now being held a week.

The three full-time Peripatetic Teachers of the Deaf were joined by a fourth part-time Teacher of the Deaf in March of this year.

The Auditory Training equipment of the Centre has been increased and it is now possible for all parents of pre-school deaf and partially hearing children to be loaned an Auditory Trainer for use in the home.

Commercial hearing aids continue to be provided to those young deaf children who will benefit from them, subject always to the approval of the Ear, Nose and Throat Consultant having been received beforehand.

No. of pre-school children tested by Health Visitors :	Passed	...	...	432
	Failed	...	...	100
			TOTAL	532

No. of children investigated :

under 5	...	...	...	107
5—15	...	...	...	187

No. of children referred to E.N.T. Consultant :

under 5	...	...	...	12
5—15	...	...	...	39

SPEECH TRAINING

Number of children treated	...	...	...	...	396
Number of attendances	...	...	...	...	4,449

During the year regular clinics have been held at the following centres :—

HEREFORD	Hearing and Speech Centre, Nelson Street, Hereford. Health Centre, Ross Road, Hereford.
BROMYARD	Nunwell House, Bromyard.
KINGTON	Cottage Hospital, Kington.
LEDBURY	Old Council Offices, Church Lane, Ledbury.
LEOMINSTER	Clinic, Westfield Walk, Leominster.
ROSS-ON-WYE	Clinic, Chepstow House, Ross-on-Wye

and at certain schools.

The demand for advisory visits to schools has increased this year and many Head Teachers have asked for treatment to be arranged in the schools. Although this has been organised in four schools where enough cases justified a full session and accommodation was adequate, it was not possible to arrange elsewhere mainly due to pressure of clinical work.

SCHOOL CLINICS

School clinics have been held at the addresses shown below. These clinics are used for the special examination of children.

139 children who wished to be employed out of school hours were examined by school medical officers and granted certificates. In addition, 195 entrants to Teachers Training Colleges, etc., and 78 teachers were medically examined.

HEREFORD.	Gaol Street, Hereford. Monday and Wednesday, 9.30 a.m.—12 noon.			
	Ross Road, Hereford. By appointment.			
LEOMINSTER.	Westfield Walk, Leominster. Friday, 10 a.m.—11 a.m.			
ROSS-ON-WYE.	Chepstow House, Ross on Wye. Monday, 10 a.m.—11 a.m.			
Total number of attendances at school clinics				1,313

DISEASES OF THE SKIN

(excluding uncleanliness)

	<i>No. of cases known to have been treated.</i>				
Ringworm :—					
(a) Scalp	—
(b) Body	5
Scabies	2
Impetigo	—
Other skin diseases	14
					—
			TOTAL	...	21
					—

INFESTATION WITH VERMIN

School hygiene inspections were carried out by health visitors at the beginning of each school term. These were limited to primary schools with the exception of three secondary schools in special circumstances.

Total number of examinations in schools	...	...	...	45,999
Total number of pupils found infested	...	...	...	254
Number of cleansing notices issued (Education Act, 1944, Section 54(2))				Nil
Number of cleansing notices issued (Education Act, 1944, Section 54(3))				Nil

In spite of an increase in the number of examinations carried out there was a decrease in the number of children found infested. Marked infestation was confined to a very small number of schools, primary and secondary, in urban areas and these required supervision at intervals throughout the term. Only one small rural school showed persistent infestation associated with one or two "problem" families living in unhygienic home circumstances. Where needed, a good deal of home follow up work was done by the health visitor of the area in which the children live.

INFECTIOUS DISEASES IN SCHOOLS

During the year no schools were closed on account of infectious disease.

HANDICAPPED PUPILS

During the year ended 31st December, 1971, the following were newly ascertained as requiring education at special residential schools:—

Blind	...	...	...	...	1
Partially Sighted	...	...	...	...	2
Deaf	...	...	...	...	1
Partially Hearing	...	...	...	...	—
Educationally Sub-Normal	...	...	...	...	13
Epileptic	...	...	...	...	1
Maladjusted	...	...	...	...	14
Physically Handicapped	...	...	...	...	—
Speech Defect	...	...	...	...	2
Delicate	...	...	...	...	5
Multiple Defects	...	...	...	...	5
					—
				TOTAL	44
					—

During the year a total of 34 Herefordshire pupils were admitted to special residential schools and 33 were discharged.

The number of pupils ascertained at the 31st December is shown in the following table:—

CATEGORY	<i>In Special Schools</i>		<i>In Main-tained Schools</i>		<i>In Independent Schools</i>		<i>Not at School</i>		<i>Total</i>	
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>
(a) Blind	3	3	—	—	—	—	—	1	3	4
(b) Partially Sighted	3	1	5	—	—	—	—	—	8	1
(c) Deaf	6	—	—	—	—	—	—	1	6	1
(d) Partially Hearing	1	2	17	29	1	—	2	1	21	32
(e) Educationally Sub-Normal	53	18	76	49	—	—	4	5	133	72
(f) Epileptic	—	2	1	2	—	—	1	—	2	4
(g) Maladjusted	18	7	9	3	1	—	—	—	28	10
(h) Physically Handicapped	2	2	7	9	1	1	4	4	14	16
(i) Speech Defect	—	—	234	81	6	3	63	32	303	116
(j) Delicate	6	11	24	10	1	—	3	2	34	23
(k) Multiple Defects	16	14	23	16	—	—	5	2	44	32
TOTAL	108	60	396	199	10	4	82	48	596	311

On 1st April, 1971, the two former junior training centres in the County were vested as day special schools for educationally sub-normal children. On 31st December, 1971, the position was:—

Barrs Court Day Special School, Hereford	...	25 Boys	22 Girls
Westfield Day Special School, Leominster	...	16 Boys	13 Girls

CASES REPORTED TO LOCAL HEALTH AUTHORITY

During the past year the undermentioned children were notified :—

Under Education Act, 1944, section 57(4)	3
For informal supervision after leaving school	10

The Education (Handicapped Children) Act 1970, with effect from the 1st April, 1971, transferred to the educational system those severely subnormal children who had previously been reported to the Local Health Authority in accordance with Section 57 of the 1944 Act as being unsuitable for education in schools.

CHILD GUIDANCE

The staff of the child guidance service consists of one part-time children's psychiatrist (on the staff of the Birmingham Regional Hospital Board), two educational psychologists and two social workers.

Number of children seen :

by child guidance team	88
by educational psychologists	430

Number of children treated at child guidance clinic :

under 5	—
5—15	54

Number of attendances at child guidance clinic : 1,078

The work of the Child Guidance Clinic has been helped during the year by the efforts of our voluntary committee—The Friends of the Child Guidance Clinic. Six families (involving 8 adults and 22 children) were sent on holiday to Borth and Weston-super-Mare for 2 weeks each, and 6 boys to camp in Guernsey for 8 days each. The Friends also provided a picnic outing at Goodrich Castle for 44 children in September, and have given assistance where necessary with school clothing, games equipment, etc., and provided items which were outside the resources of the Local Authority. Forty families in need, and known to the clinic, received Christmas hampers.

ORTHOPAEDIC AND POSTURAL DEFECTS

Number of children treated :

at clinics	679
at school	850

TOTAL ... 1,529

Number of attendances 8,690

One full-time and two part-time physiotherapists are employed on this work.

Number of children known to be treated at hospital out-patient departments ... 19

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

With the appointment of Mr. Worthing in January 1971, the dental staff has been maintained at four full-time dental officers throughout the year. By comparison with many other Local Authorities our staffing position must be regarded as satisfactory, moreover there are reasonable grounds for believing it has a permanent basis.

In a small authority it is not easy to introduce intermediate grades of dental staff between dental officer and principal dental officer. Nevertheless it was considered that the staff career structure should be improved by introducing the grade of senior dental officer. Accordingly, after interviewing two candidates an appointment on this grade was made with effect from April 1st.

The work of the Department of Dental Surgery varies little from year to year, being predominantly engaged in the conservation of the teeth both deciduous and permanent. It is interesting to record that for the year under review the total number of fillings inserted was 8,716, which is the greatest number ever accomplished. Similarly, in the field of orthodontics an all time record was attained with 24 new cases accepted for treatment and 25 appliances fitted. It would be reasonable to suppose that this upsurge in orthodontic treatment is a direct result of attendance at a post-graduate course in this aspect of dental surgery by two members of the dental staff.

Over the years the number of teeth requiring removal has consistently declined. In 1965 the ratio of permanent teeth filled to permanent teeth extracted stood at 11 : 1. This ratio has now increased to 20 : 1. The significance of this improvement is readily apparent.

The major part of the work of the dental staff continues to be done in our mobile surgeries; their value now being firmly established, in the rural areas and some parts of the City of Hereford.

Consultant services in the fields of orthodontics, oral surgery and general anaesthesia continue as before. Dental health education is largely in the hands of the health education officer with some assistance from the dental staff.

Details of dental inspection and treatment provided during the year are shown in the following table.

DENTAL INSPECTION AND TREATMENT

				Number of pupils			
				Inspected	Requiring Treatment	Offered Treatment	
First inspection—school	...	...	...	18,800	} 7,665	} 5,586	
First inspection—clinic	...	...	840				
Re-inspection—school or clinic	...	...	128	77			
TOTALS ...				19,768	7,742	5,586	
Visits				5 - 9	10 - 14	15 and over	Total
First visit	...	...	...	1,251	1,469	65	2,785
Subsequent visits	...	...	...	1,323	2,114	119	3,556
Total visits	...	...	...	2,574	3,583	184	6,341
Courses of Treatment							
Additional course commenced	...	...	11	14	—	—	25
Total courses commenced	...	...	1,262	1,483	65	—	2,810
Courses completed	...	...	...	...	...	...	2,184
Treatment							
Fillings in permanent teeth	...	...	1,465	4,591	220	—	6,276
Fillings in deciduous teeth	...	...	2,197	243	—	—	2,440
Permanent teeth filled	...	...	1,029	3,572	178	—	4,779
Deciduous teeth filled	...	...	1,778	218	—	—	1,996
Permanent teeth extracted	...	...	34	246	25	—	305
Deciduous teeth extracted	...	...	337	150	—	—	487
Number of general anaesthetics	...	...	91	26	4	—	121
Number of emergencies	...	...	21	30	2	—	53
Number of pupils X-rayed	...	...	...	...	...	...	2
Prophylaxis	...	...	...	...	...	...	77
Teeth otherwise conserved	...	...	...	...	...	...	16
Teeth root filled	...	...	...	...	...	...	4
Inlays	...	...	...	...	...	...	—
Crowns	...	...	...	...	...	...	1

Orthodontics

New cases commenced during the year	...	...	...	...	...	...	24
Cases completed during the year	...	...	...	...	...	...	8
Cases discontinued during the year	...	...	...	...	...	...	2
Number of removable appliances fitted	...	...	...	...	...	...	25
Number of fixed appliances fitted	...	...	...	...	...	...	—
Number of pupils referred to Hospital Consultants	...	...	...	...	...	...	2

Dentures

Number of pupils fitted with dentures for the first time :—	5-9	10 - 14	15 and over	Total
with full denture	—	—	—	—
with other dentures	—	4	—	4
Total	—	4	—	4
Number of dentures supplied	—	4	—	4

Anaesthetics

Number of general anaesthetics administered by Dental Officers	—
--	-----	-----	-----	---

Sessions

Inspections at School	...	...	242.5
Treatment	...	...	1,459.5
Dental Health Education	...	...	—
Total Sessions	...	...	1,702

PROVISION OF SCHOOL MEALS AND MILK

3,732,158 meals were provided by the School Meals Service during 1971. The Education (Milk) Act, 1971 was introduced this year, as a result of which from September, 1971, milk was only supplied to primary school children aged 7 years and younger, and to certain pupils on health grounds. Milk however, is still provided at special schools to pupils of all ages.

During the year self-contained canteens were opened at the Minster School, Leominster, St. Michael's V.A. School, Bodenham, St. Owen's C.P. School, and the Authority has continued to improve existing canteens.

The supply of meals to the Meals-on-Wheels Service has expanded, and meals are now provided in some 17 areas.

Special diets are provided for pupils in various schools on the recommendation of the Principal School Medical Officer.

Training courses have continued for school meals staff and particular attention has again been paid to matters of hygiene.

The practice of referring school meals staff who may have been a health risk and who come into direct contact with food and children, to the Principal School Medical Officer has continued during the year.

Close attention has been paid to ensure the consistent provision of nutritious, protein-balanced meals in reasonable variety, in certain cases special diabetic gluten free and reducing diets were also made available.

Free meals continue to be awarded in accordance with the Department of Education and Science regulations.

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