

**[Report 1964] / Medical Officer of Health, Northampton County Borough.**

**Contributors**

Northampton (England). County Borough Council.

**Publication/Creation**

1964

**Persistent URL**

<https://wellcomecollection.org/works/buzuvknj>

**License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>



THE  
HEALTH  
OF  
NORTHAMPTON  
1964

Library


ANNUAL REPORT of Medical Officer of Health,  
Principal School Medical Officer, and  
Welfare Administrator





THE  
HEALTH  
OF  
NORTHAMPTON  
1964

ANNUAL REPORT of Medical Officer of Health,  
Principal School Medical Officer, and  
Welfare Administrator



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library



JUNIOR TRAINING CENTRE  
March, 1965





ADULT TRAINING CENTRE  
March, 1965





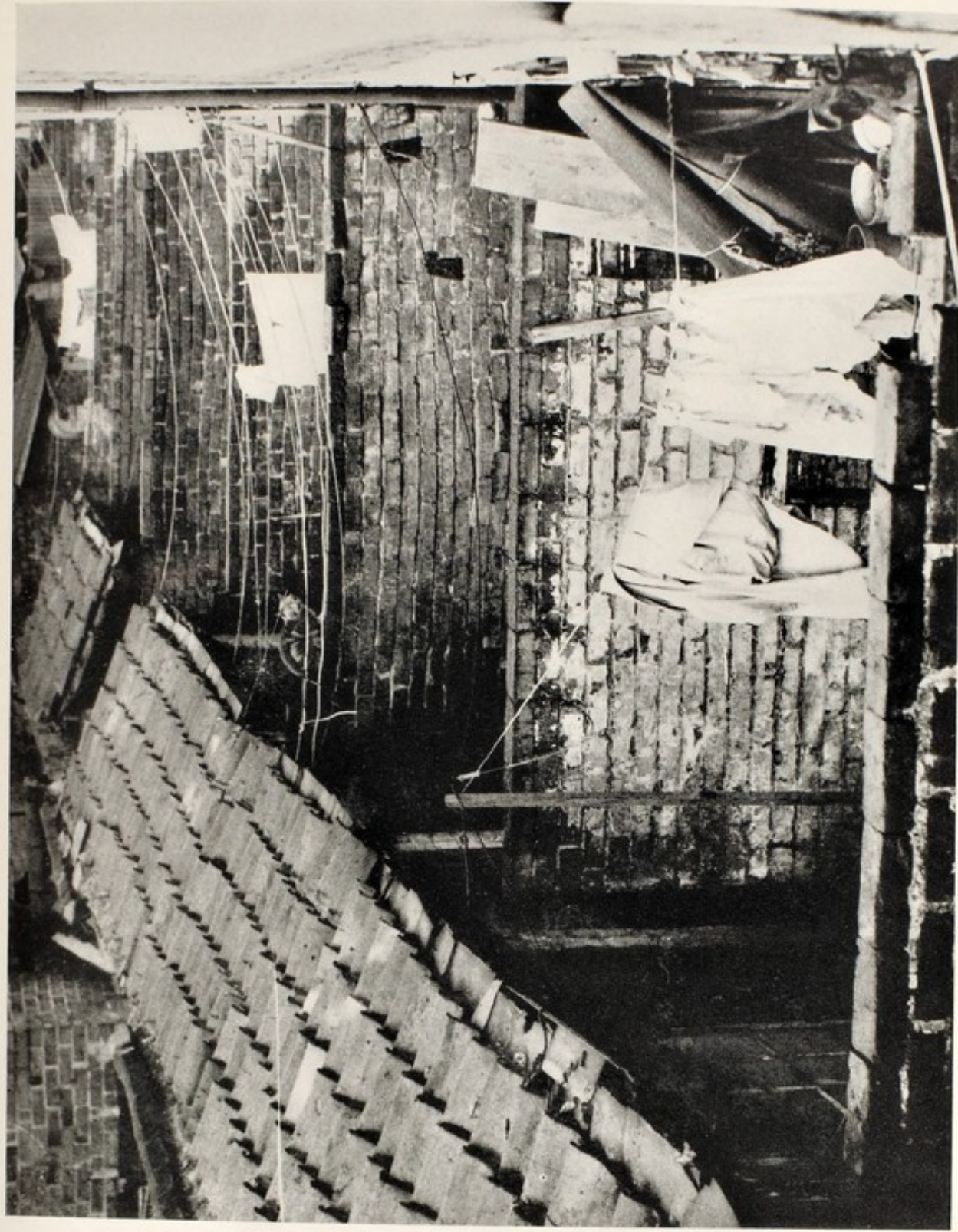


One standpipe shared by two houses and situated in a hole in the yard wall is the only means of water supply to some houses in Northampton.

MOUNT GARDENS

March, 1965





Typical of many houses encountered in Clearance Area inspections are these with small yards and tall buildings at the rear, which restrict the air space. Clothes drying is a problem.

MOUNT GARDENS  
March, 1965



## CONTENTS

<b>PREFACE</b>		<i>page</i> 5
<b>HEALTH COMMITTEE</b>		8
<b>STAFF OF THE HEALTH DEPARTMENT</b>		9
<b>SECTION 1</b>	<b>Statistics and Social Conditions</b> (Vital Statistics, Population, Births, Deaths, State of Employment)	11
<b>SECTION 2</b>	<b>Infectious and Other Diseases</b> (Dysentery; Erysipelas; Food Poisoning; Measles; Pneumonia; Puerperal Pyrexia; Scarlet Fever; Whooping Cough; Venereal Diseases; Vaccination and Immunisation; Tuberculosis)	17
<b>SECTION 3</b>	<b>Maternity and Child Welfare</b> (Live and Stillbirths; Mortalities; Child Welfare Centres; Voluntary Work; Midwifery; Health Visiting; Ante and Post Natal Care; Unmarried Mothers; Welfare Foods; Dental Care)	28
<b>SECTION 4</b>	<b>Mental Health</b> (Education; Illness; Departmental Function; Statistics and Trends; Subnormality; Care; Hospital Services; Special Clinic; Training Centres; After Care; Voluntary Work)	37
<b>SECTION 5</b>	<b>Environmental Health</b> (Housing; Food; Water; Drainage and Sewerage; Cleansing; Smoke Abatement and Atmospheric Pollution; Swimming Baths; Disinfestation; Factories; Licensed Trades; Noise Abatement; Offices, Shops and Railway Premises)	44
<b>SECTION 6</b>	<b>Domiciliary and Other Services</b> (Treatment Centres and Clinics; Home Nursing; Health Education; Chiropody; Ambulance Service; Convalescence; Nursing Homes; Domestic Help; Children's Homes)	66
<b>SECTION 7</b>	<b>Welfare Services</b> (Residential Accommodation; Deaf and Dumb; Handicapped Persons; Meals for the Elderly; Mother and Baby Homes; Disabled Drivers; Blind and Partially Sighted; Handicrafts; Holidays)	70

## SECTION 8 The School Health Service

81

(Preface; Education Committee; Staff; General Information; Medical Inspections; School Clinic; School Nurses; Cleanliness; Scabies; Ringworm; Hygiene Inspection of Schools; Enuresis Alarms; E.N.T., Refraction, Child Guidance, Speech and Orthopaedic Clinics; Spastic Unit; Northgate School; Open-air Recovery School; Nursery Schools; Immunisation and Vaccination; Handicapped Pupils; Employment of Children; School Meals; Non-maintained Schools; the School Dental Service; Medical Inspection Returns)

## PREFACE

In introducing my first annual report, I would wish to pay tribute to my predecessor, Dr. Payton, Medical Officer of Health of Northampton for the past 19 years, who laid so carefully and successfully the foundations of the present health and welfare services in the Borough, and wish him well in his years of retirement.

The health of the town, as judged by the principal vital statistics, shows a continued improvement. There has been an increase in population to 106,120, representing an additional 700 persons. Although the birth-rate remains at 19.0, the 2,020 total live births is 16 higher than last year, the number of stillbirths remaining the same.

Compared with 1963, the total deaths, 1,311, fell by nearly 100 and the death-rate from 13.3 to 12.4. Significant falls occurred in deaths from pneumonia, heart disease and coronary thrombosis. Slight but important increases occurred in deaths from suicide and accidental causes and to a lesser degree in deaths from cancer of the lung and uterus. The perinatal mortality (stillbirths and infant deaths under one week), a sensitive index of the standard of antenatal and obstetric care, fell to a new low level of 22.9. Four additional deaths in the first year of life from pneumonia, congenital defects (2) and whooping cough raised the infant mortality rate from 17 to 18.8.

The continuing shortage of Health Visitors prevented the full introduction of the scheme for testing infants for phenylketonuria and the undertaking of routine hearing tests in infancy which are so important in the early detection of hearing loss.

In November the Council approved the provision of four multi-purpose clinics in the five-year capital programme to cater for the needs of the maternity and child welfare, school health and general welfare services for the aged, including chiropody, and agreed in principle to the inclusion of surgery accommodation for general practitioners in these centres. The first clinic is included in the capital programme for the next financial year and towards the end of the year preliminary discussions had been held with the Local Medical Committee.



The construction of the new Adult Training Centre commenced in February. This Centre, which will accommodate 80 trainees, should be ready for occupation in September, 1965. The emphasis will be upon "employment" on contract work of various kinds within the capacity of the trainee. A fully equipped laundry will be provided which will deal initially with the laundry from the residential homes for the elderly. A laundry service to supplement the use of disposable pads for incontinent patients being nursed at home will also be provided.

At the end of the year, overcrowding in the Joint Training Centre was so acute that arrangements were being made to transfer the adults to temporary premises, thus enabling the 14 children on the waiting list to be admitted to the Junior Centre.

A Special Care Unit has been included in next year's capital programme to provide day care for severely mentally and physically handicapped children to supplement the valuable work which has been going on since 1962 in the Special Clinic for Handicapped Children.

In the field of environmental health, the acute shortage of Inspectors, associated with the introduction of the policy of 100 per cent. meat inspection, left considerably less time available than one would have liked for other work in this section. The appointment of an Authorised Meat Inspector offset to some extent the time being devoted by Public Health Inspectors to this task. The completion during March of the report by the Chief Public Health Inspector on the survey of some 16,806 substandard houses, including 2,838 potentially unfit houses, enabled the Council to embark in July upon a realistic five-year programme for systematic slum clearance. The Princes Street Clearance Area was represented to the Health Committee in December.

The construction of the Social Centre for the Physically Handicapped commenced in June and it should be ready for occupation at the end of next year. This is a long awaited development and will provide not only social services for the handicapped, but also traditional occupational crafts and contract work of various types according to the inclinations and abilities of the individual handicapped person.

A Home for the more infirm elderly is included in the capital programme for next year. Work on the scheme for adaptation and extension to the existing Old Persons' Home at "Lalgates" commenced on the 20th June, 1964, and should be completed by November, 1965.

Arising out of the Draft Northampton Order, 1964, and the possible extension of the Borough boundary on 1st April next, numerous discussions had taken place with colleagues in the County and the adjacent District Councils by the end of the year with regard to the transfer of services and "patients" on the appointed day. Revision of the establishment of the Health and Welfare Departments to cater for the anticipated increase in services and responsibilities had also been completed. I would wish to express my gratitude to my colleagues in the County for their wholehearted co-operation and assistance with this time-consuming task.

Finally, I would wish to record my appreciation to the Chairmen and Members of the Health Committee for their tolerance, understanding and encouragement during my first few months in office, to the staff of the Department for their loyal support and to those many individuals who have co-operated so generously with the Department during the year and trust that their help has been reciprocated in some degree.

WILLIAM EDGAR,

*Medical Officer of Health.*

Health Department,  
Guildhall,  
Northampton,  
March, 1965.

Telephone: Northampton 34881.

**HEALTH COMMITTEE**  
(as constituted on 31st December, 1964)

---

*Ex-officio*

The Worshipful the Mayor  
(COUNCILLOR J. B. CORRIN, J.P.)

*Chairman*

ALDERMAN G. J. HACKETT

*Deputy-Chairman*

COUNCILLOR T. H. DOCKRELL, M.B., F.R.C.S.I.

*Alderman*

MRS. K. M. GIBBS

*Councillors*

M. O. ALDRIDGE  
M. J. B. AMEY  
MRS. G. BROWN  
R. P. DILLEIGH  
MRS. G. E. FITZHUGH

MRS. J. C. J. KNIGHT, M.B.E.  
J. T. LEWIS  
J. S. PICKERING  
MRS. E. E. WILKINSON

**SUB-COMMITTEES OF THE HEALTH COMMITTEE**

**Health Services**

ALDERMAN HACKETT (*Chairman*); COUNCILLOR MRS. WILKINSON (*Deputy-Chairman*);  
COUNCILLORS AMEY, DILLEIGH, DOCKRELL, and MRS. KNIGHT.

*Non-Council Members*—MESDAMES E. DAVIES, C. E. GIBSON, and C. I. PEACH,  
and DR. P. G. DALGLEISH.

**Sanitary Services**

COUNCILLOR MRS. BROWN (*Chairman*); COUNCILLOR DOCKRELL (*Deputy-Chairman*);  
ALDERMAN HACKETT, COUNCILLORS ALDRIDGE and PICKERING.

**Welfare Services**

ALDERMAN MRS. GIBBS (*Chairman*); COUNCILLOR MRS. WILKINSON (*Deputy-Chairman*);  
ALDERMAN HACKETT; COUNCILLORS ALDRIDGE, MRS. BROWN and  
MRS. FITZHUGH.

*Non-Council Members*—MESDAMES E. BATCHELOR, C. I. PEACH and H. V. PELL.

*Each of the above Committees meets monthly.*

## STAFF OF HEALTH DEPARTMENT, 1964

---

*Medical Officer of Health, Principal School Medical Officer, and Welfare Administrator—*

CARRICK G. PAYTON, M.D., CH.B., D.P.H. (Retired 2/5/64)

WILLIAM EDGAR, M.B., CH.B., D.P.H., D.C.H. (Commenced 4/5/64)

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

JOHN J. HOLLOWAY, M.B., B.CH., L.M., D.P.H.

*Senior Assistant Medical Officer—*

MRS. M. MARTIN WILLIAMS, M.B., CH.B.

*Assistant Medical Officers of Health and School Medical Officers—*

MARGARET O'CONNOR, L.R.C.P., L.R.C.S.

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

JAMES W. BOTTOMS, M.B., B.S., M.R.C.S., L.R.C.P.

RONALD H. MARTIN, M.A., B.M., B.CH., M.R.C.S., L.R.C.P.

*Public Analyst\*—*

H. C. MACFARLANE, A.R.T.C.S., F.R.I.C.

*Dental Surgeon†—*

P. W. J. L. THOMPSON, L.D.S., R.C.S. Eng. (*Principal School Dental Officer*)

*Dental Officers (Part Time)—*

C. K. WILSON, L.D.S., R.C.S. (Retired 6/8/64)

MRS. L. A. B. ELLIOTT, L.D.S., R.C.S. (Full time from 2/11/64)

*Public Health Inspectors—*

A. ROBINSON (1, 2, 8) (*Chief Inspector*)

T. M. KILYON (1, 2, 8) (*Deputy Chief Inspector*) (Resigned 12/7/64)

G. HARRISON (1, 2, 8) (*Deputy Chief Inspector*) (Commenced 10/8/64)

1 MEAT AND FOOD INSPECTOR (Resigned 22/11/64)

1 AUTHORISED MEAT INSPECTOR

5 DISTRICT INSPECTORS

1 ASSISTANT HOUSING INSPECTOR

2 STUDENT INSPECTORS

1 DISINFESTATION OFFICER

1 GENERAL MANUAL ASSISTANT AND MOTOR DRIVER

2 RODENT OPERATIVES

*Health Visitors‡—*

MISS E. M. LEAHY (3, 4, 5) (*Superintendent*) (Commenced 9/4/64)

7 HEALTH VISITORS (including 1 part time)

3 STUDENT HEALTH VISITORS

*Clinic Nurses—*

7 TEMPORARY CLINIC NURSES

*Organiser of Domestic Help—*

MRS. M. E. SMITH

*Senior Mental Welfare Officers —*

R. H. JOHNSON (6)

MRS. K. M. WARD (6)

1 MENTAL WELFARE OFFICER

*Junior Training Centre Supervisor—*

MRS. J. P. LUCK

*Welfare Officer—*

MISS V. M. HARRISON (7)

4 SOCIAL WELFARE OFFICERS

1 WELFARE ASSISTANT

*Superintendent, Kings Heath Home of Rest—*

M. MULLIGAN

*Superintendent, "The Priory"—*

MRS. P. WILLIAMS

*Superintendent, "Barnfield"—*

H. LATTAWAY (Resigned 30/9/64)

MRS. M. J. EVANS (Commenced 26/10/64)

*Superintendent, "Nicholls House"—*

MRS. S. CRIST

*Superintendent, Whiston Road Home—*

MISS E. STAVELEY

*Superintendent, "Hillcrest"—*

W. W. WYMAN

*Superintendent, "Lalgates"—*

MISS K. M. SAVAGE

*Clerks—*H. T. BOSWELL (*Administrative Assistant*)L. W. GARNER (*Senior Clerk*)A. J. PEARCE (*Statistical Clerk*) (Commenced 1/1/64)

12 CLERKS

2 WELFARE FOOD ASSISTANTS

---

The following Officers on the staff of the Oxford Regional Hospital Board rendered part-time service to Northampton County Borough Council :—

ERNEST T. W. STARKIE, M.A., M.B., B.CH., M.R.C.S., L.R.C.P. (*Consultant Chest Physician*)JAMES M. H. McMURRAY, M.R.C.S., L.R.C.P. (*Chest Physician*)MISS H. S. REDDISH (*Social Worker*)

---

\*Part-time appointment.

†Mainly for School Dental work; part time devoted to Maternity and Child Welfare work.

‡Health Visitors also undertake school work and tuberculosis visiting under a co-ordinated scheme.

1 Public Health Inspector's Certificate.

2 Meat and Food Inspector's Certificate.

3 State Registered Nurse.

4 State Certificated Midwife.

5 Health Visitor's Certificate.

6 Trained in Mental Deficiency and Lunacy.

7 Home Teacher's Certificate of College of Teachers of the Blind.

8 Smoke Inspector's Certificate.

## STATISTICS AND SOCIAL CONDITIONS

TABLE 1  
VITAL STATISTICS DURING 1964 AND PREVIOUS YEARS

Year	ESTIMATED Total Population to Middle of each Year	Live Births			Total Deaths registered in the District		Transferable Deaths		Net Deaths belonging to the District			
		Uncor- rected Number	Net		Number	Rate	Non- resi- dents regis- tered in the District	Resi- dents not regis- tered in the District	Under One Year		At all Ages	
			Number	Rate					Number	Rate per 1,000 live Births	Number	Rate
1901	87096	2345	2345	26.9	1269	14.6	62	9	334	142.4	1216	14.0
1911	90152	1930	1931	21.4	1240	13.8	86	46	250	129.5	1200	13.3
1921	92300	1924	1881	20.4	1022	11.1	123	65	124	65.9	964	10.4
1931	92970	1307	1233	13.3	1243	13.4	205	53	87	70.6	1091	11.8
1941	108930	2101	1282	11.8	1776	16.3	450	69	91	52.9	1395	12.8
1946	102760	2847	2111	20.5	1571	15.3	399	59	97	45.9	1231	12.0
1947	104480	3000	2283	21.9	1606	15.4	363	43	76	33.3	1286	12.3
1948	104380	2518	1825	17.5	1543	14.8	401	54	68	37.3	1196	11.5
1949	104300	2377	1646	15.8	1581	15.2	414	92	49	29.8	1259	12.1
1950	105490	2497	1502	14.2	1547	14.7	397	113	28	18.6	1263	12.0
1951	103700	2510	1514	14.6	1668	16.1	391	137	45	29.7	1414	13.6
1952	103700	2583	1467	14.1	1489	14.4	358	91	32	21.8	1222	11.8
1953	104000	2592	1506	14.5	1650	15.9	346	36	35	23.2	1340	12.9
1954	103700	2536	1386	13.4	1566	15.1	376	48	28	20.2	1238	11.9
1955	102800	2472	1353	13.2	1570	15.3	390	56	24	17.7	1236	12.0
1956	101800	2612	1409	13.8	1640	16.1	411	60	34	24.1	1289	12.7
1957	101000	2736	1514	15.0	1581	15.7	408	48	25	16.5	1221	12.1
1958	100700	2864	1573	15.6	1625	16.1	416	118	30	19.1	1327	13.2
1959	100300	2959	1625	16.2	1635	16.3	403	115	38	23.4	1347	13.4
1960	101180	3256	1686	16.7	1606	15.9	431	124	34	20.2	1299	12.8
1961	104320	3469	1797	17.2	1795	17.2	444	121	48	26.7	1372	13.2
1962	104910	3608	1945	18.5	1697	16.2	462	115	30	15.4	1350	12.9
1963	105420	3800	2004	19.0	1758	16.7	464	112	34	17.0	1406	13.3
1964	106120	4137	2020	19.0	1708	16.1	504	93	38	18.8	1311	12.4

This Table is arranged to shew the gross births and deaths in Northampton County Borough and the births and deaths properly belonging to the town, with the corresponding rates.

Non-civilian deaths are excluded during the years 1939 to 1949.

### Summary of Statistics

Position: Latitude ..... 52° 14' North ; Longitude ..... 0° 54' West

Highest point above sea level is Kettering Road on the County

Borough Boundary ..... 400 feet

Lowest point above sea level is lower part of Bridge Street ..... 193 feet

Elevation of Guildhall above mean sea level ..... 252 feet

Area ..... 6,201 acres (9.7 square miles)

#### Population :—

Census 1961 ..... 105,421

Registrar-General's Estimated Home Population (all ages)

as at 30th June, 1964, including members of Armed

Forces stationed in area ..... 106,120

#### Number of Separate Dwellings Occupied :—

Census 1961 ..... 35,045

According to Rate Books (31st December, 1964) ..... 36,097

Number of unoccupied dwellings (inhabitable) ..... 469

Number of Private Households (Census 1961) ..... 35,501

Rateable Value (31st December, 1964) ..... £4,504,157

Penny Rate product 1964/65 ..... £17,953

#### Net Revenue Expenditure for year ended 31st March, 1964:—

Public Health ..... £26,585

Local Health Authority ..... £121,027

Welfare ..... £64,665

---

£212,277

---

## Principal Vital Statistics—1964

	MALES	FEMALES	TOTALS	
Live Births	Legitimate	948	882	1,830
	Illegitimate	100	90	190
	Totals	1,048	972	2,020
Live Birth-rate per 1,000 Population .....			19·0	
Adjusted Birth-rate (Area Comparability Factor 1·06) .....			20·1	
Illegitimate Live Births per cent. of Total Live Births .....			9·4	
	MALES	FEMALES	TOTALS	
Stillbirths	Legitimate	14	9	23
	Illegitimate	1	2	3
	Totals	15	11	26
Stillbirth-rate per 1,000 Live and Stillbirths .....			12·7	
Total Live and Stillbirths .....			2,046	
	MALES	FEMALES	TOTALS	
Deaths .....	656	655	1,311	
Death-rate per 1,000 Population .....			12·4	
Adjusted Death-rate (Area Comparability Factor 0·91) .....			11·3	
Infant Deaths (under One Year of Age) .....			38	
Infant Mortality-rate per 1,000 Live Births—Total (38 deaths) ...			18·8	
Infant Mortality-rate per 1,000 Live Births—Legitimate .....			16·3	
			(33 deaths)	
Infant Mortality-rate per 1,000 Live Births—Illegitimate .....			2·5	
			(5 deaths)	
Neonatal Mortality-rate (first Four Weeks) per 1,000 Live Births ...			12·4	
			(25 deaths)	
Early Neonatal Mortality-rate (first week) per 1,000 Live Births				
(21 deaths) .....			10·4	
Perinatal Mortality-rate (stillbirths and deaths under one week				
combined) per 1,000 Live and Stillbirths .....			22·9	
Maternal Deaths (including Abortion) .....			0	
Maternal Mortality-rate per 1,000 Live and Stillbirths .....			0·00	
Cancer Deaths .....			276	
Cancer Mortality-rate per 1,000 population .....			2·6	

**Population.** (Table 1, page 11). The Registrar-General estimated the home population at all ages of Northampton County Borough as at 30th June, 1964, to be 106,120, which is 700 more than his estimate for mid-year 1963.

The natural increase of the population, *i.e.* the surplus of registered live births over deaths, was 709, or 6·68 per thousand living.

Table 1 gives the population figures from 1901 onwards.



**Births.** 2,020 live births (1,048 males, 972 females) were registered, giving a birth-rate of 19.0 per thousand of the estimated civilian population, compared with 18.4 for England and Wales.

Table 2 gives the birth-rates for the last decennium compared with those for England and Wales.

TABLE 2  
LIVE BIRTH-RATES IN EACH YEAR OF THE DECENNIUM

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
England and Wales ...	15.0	15.7	16.1	16.4	16.5	17.1	17.4	18.0	18.2	18.4
Northampton .....	13.2	13.8	15.0	15.6	16.2	16.7	17.2	18.5	19.0	19.0

The adjusted birth-rate for Northampton County Borough (calculated by multiplying the crude rate by the Registrar-General's area comparability factor of 1.06) was 20.1.

190 (9.4 per cent.) of the live births were illegitimate. In England and Wales the percentage was 7.2. The percentages for the last ten years are shewn in Table 3.

TABLE 3  
ILLEGITIMATE LIVE BIRTHS EXPRESSED AS A PERCENTAGE OF TOTAL LIVE BIRTHS

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
England and Wales ...	4.5	4.6	4.6	4.9	5.1	5.4	5.9	6.6	6.9	7.2
Northampton .....	6.3	6.1	6.4	7.1	6.9	7.2	6.2	8.7	9.7	9.4

**Deaths.** 1,311 deaths (656 males, 655 females) were registered, equal to a death-rate of 12.4, compared with 11.3 for England and Wales. Table 4 gives the local and national death-rates for the last ten years.

TABLE 4  
DEATH-RATES IN EACH YEAR OF THE DECENNIUM

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
England and Wales ...	11.7	11.7	11.5	11.7	11.6	11.5	12.0	11.9	12.2	11.3
Northampton .....	12.0	12.7	12.1	13.2	13.4	12.8	13.2	12.9	13.3	12.4

960 (73.3 per cent.) of the deaths related to elderly persons aged sixty-five years and upwards.

The adjusted death-rate for Northampton County Borough (calculated by multiplying the crude rate by the area comparability factor of 0.91) was 11.3.

Table 5 gives the causes of death in age-periods, compiled from information supplied by the Registrar-General.

**State of Employment.** The favourable conditions which prevailed at the end of 1963 continued throughout 1964 with no signs of any diminution in activity. Unemployment remained low and the high level of labour demand was maintained. The demand for female labour especially remained as strong as ever, particularly in the engineering and clothing industries.

By the end of the year, the number of outstanding vacancies for men was 323 and for women 316, whereas at the beginning of the year the demands had been for 189 men and 393 women.

Throughout the year the numbers of workers without employment declined. In January these were 494 men and 98 women and in December these were 251 men and 42 women. The December total was the lowest December figure since 1955.

The percentage rate of unemployment at the end of 1964 was 0.4 and compared very favourably with the National percentage which was 1.5 at the same date.

TABLE 5  
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING THE YEAR 1964

CAUSES OF DEATH	NETT DEATHS AT THE SUBJOINED AGES (IN YEARS) OF " RESIDENTS " WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT												
	ALL AGES		0-	1-	5-	15-	25-	35-	45-	55-	65-	75-	
	Total	M.	F.										
1. Tuberculosis, respiratory .....	6	4	2	—	—	—	1	1	2	—	—	1	
2. Tuberculosis, other .....	—	—	—	—	—	—	—	—	—	—	—	—	
3. Syphilitic disease .....	1	1	—	—	—	—	—	—	—	—	—	1	
4. Diphtheria .....	—	—	—	—	—	—	—	—	—	—	—	—	
5. Whooping cough .....	1	1	—	—	—	—	—	—	—	—	—	—	
6. Meningococcal infections .....	—	—	—	—	—	—	—	—	—	—	—	—	
7. Acute poliomyelitis .....	—	—	—	—	—	—	—	—	—	—	—	—	
8. Measles .....	—	—	—	—	—	—	—	—	—	—	—	—	
9. Other infective and parasitic diseases .....	1	—	1	—	—	—	—	—	—	—	—	—	
10. Malignant neoplasm, stomach .....	33	16	17	—	—	—	—	—	1	6	12	14	
11. Malignant neoplasm, lung, bronchus .....	59	48	11	—	—	—	1	4	3	21	25	8	
12. Malignant neoplasm, breast .....	21	—	21	—	—	—	—	—	—	—	—	6	
13. Malignant neoplasm, uterus .....	5	—	5	—	—	—	—	—	—	—	—	1	
14. Other malignant and lymphatic neoplasms .....	152	76	76	—	1	3	1	4	17	28	49	48	
15. Leukæmia, aleukæmia .....	6	2	4	—	—	—	—	—	—	2	3	—	
16. Diabetes .....	8	3	5	—	—	—	—	—	—	2	2	4	
17. Vascular lesions of nervous system .....	182	86	96	—	—	1	—	—	—	15	51	108	
18. Coronary disease, angina .....	258	150	108	—	—	—	—	4	16	43	86	109	
19. Hypertension with heart disease .....	34	12	22	—	—	—	—	—	—	—	—	—	
20. Other heart disease .....	170	46	124	—	—	—	—	1	3	11	29	126	
21. Other circulatory disease .....	37	16	21	—	—	—	—	—	—	—	—	—	
22. Influenza .....	2	1	1	—	—	—	—	—	—	—	—	—	
23. Pneumonia .....	59	34	25	—	—	—	—	—	—	3	13	35	
24. Bronchitis .....	59	44	15	—	—	—	—	—	—	9	27	19	
25. Other diseases of respiratory system .....	9	5	4	—	—	—	—	—	—	—	—	—	
26. Ulcer of stomach and duodenum .....	11	8	3	—	—	—	—	—	—	—	—	—	
27. Gastritis, enteritis and diarrhœa .....	7	5	2	—	—	—	—	—	—	—	—	—	
28. Nephritis and nephrosis .....	5	2	3	—	—	—	—	—	—	—	—	—	
29. Hyperplasia of prostate .....	2	2	—	—	—	—	—	—	—	—	—	—	
30. Pregnancy, childbirth, abortion .....	—	—	—	—	—	—	—	—	—	—	—	—	
31. Congenital malformations .....	11	6	5	—	—	—	—	—	—	—	—	—	
32. Other defined and ill-defined diseases .....	99	51	48	23	2	—	3	3	2	13	20	32	
33. Motor vehicle accidents .....	15	11	4	—	—	6	1	—	—	—	—	—	
34. All other accidents .....	30	9	21	—	—	—	—	—	—	—	—	—	
35. Suicide .....	27	16	11	—	—	—	—	—	—	—	—	—	
36. Homicide and operations of war .....	1	—	—	—	—	—	—	—	—	—	—	—	
Totals .....	1311	656	655	38*	8	3	14	8	28	73	179	370	590

## INFECTIOUS AND OTHER DISEASES

JOHN J. HOLLOWAY, M.B., B.CH., L.M., D.P.H., *Deputy Medical Officer of Health*

The following diseases are "notifiable" in Northampton—acute poliomyelitis, anthrax, diphtheria, dysentery, encephalitis, erysipelas, food poisoning, measles, meningococcal infection, ophthalmia neonatorum, paratyphoid, pneumonia, puerperal pyrexia, scarlet fever, typhoid, whooping cough, malaria, smallpox and plague.

In 1964, 614 notifications were received in the Department and Table 7 on page 20 shows the incidence of the various infections during the year. It will be noted that there were no cases of diphtheria or acute poliomyelitis.

The incidence of infectious diseases over the last decade is illustrated in Table 8.

The year passed uneventfully in that the town was fortunate in avoiding any epidemic of the more serious infectious diseases but this leaves no room for complacency and strenuous efforts are maintained by the Department to keep the immunised proportion of the population at as high a level as possible.

During the year the Department authenticated 845 International Certificates of Vaccination.

Public Health Inspectors made 40 visits and 6 re-visits in connection with cases or suspected cases of food poisoning, dysentery or typhoid. Today most of the field work in connection with infectious diseases is confined to those that are food-borne. The incidence of food-borne diseases is related to the standard of personal and food hygiene practised in the community.

General practitioners and doctors from the Health Department submitted approximately 400 specimens to the Public Health Laboratory in connection with bowel infections. The Public Health Laboratory continued to work in close liaison with the Department and thanks are expressed to its director, Dr. Leslie Hoyle, for his prompt reporting on specimens.

### Dysentery

Cases 2      Deaths 0

This is a decrease from the previous year, when 86 cases were notified. It is predominantly a disease of young children. Cases often go unnotified as the symptoms are sometimes mild and medical advice is frequently not sought.

### Erysipelas

Cases 7      Deaths 0

This disease is one of the many manifestations of streptococcal infection in the community and there has been a gradual fall in the number of cases over the last decade.

### Food Poisoning

Cases 1      Deaths 0

There was only one case notified compared with two in 1963. Here again cases may have gone unnotified as the symptoms may have been mild and transitory and medical advice not sought.

**Measles**

Cases 479      Deaths 0

This was a considerable reduction when compared with 1,899 cases in 1963. Epidemics of measles usually occur every two years and mainly affect children under 7 years. Complications are most common in the second or third year of life.

It is hoped that a suitable vaccine will soon be available as some of the neurological complications of measles may be serious.

**Pneumonia**

Cases 12      Deaths 59

Twelve cases of primary or post influenzal pneumonia were notified compared with 13 in 1963. Notifications of pneumonia have generally tended to fall over the last decade but a severe or prolonged winter increases the incidence of this disease particularly amongst the elderly in whom it may be fatal. 59 deaths were ascribed to all types of pneumonia during the year.

**Puerperal Pyrexia**

Cases 7      Deaths 0

Seven cases were notified compared with 13 in 1963. Table 8 illustrates the great reduction in this disease over the last decade.

**Scarlet Fever**

Cases 34      Deaths 0

This compares with 38 cases in 1963. This disease is another manifestation of streptococcal infection. Its incidence has considerably diminished during the last decade and this may be due to a general improvement in health and social circumstances. The age group most commonly affected is between four and six years; it is rare in babies under twelve months.

**Whooping Cough**

Cases 72      Deaths 0

This compares with 76 cases for 1963. The natural incidence of this disease had been gradually falling but the incidence in Northampton has been fairly consistent since 1959. The year previous to this was an all time low with only eight notifications.

**Venereal Diseases**

A special Clinic for Venereal Diseases is held at Northampton General Hospital under the administrative control of the Northampton and District Hospital Management Committee.

The Clinic serves an area including Northampton County Borough, the administrative County of Northampton and North Buckinghamshire.

The Clinic is held at the following times:—

Males:	Wednesdays 2—3 p.m.	Fridays 5—6.30 p.m.
Females:	Mondays 5.15—6.30 p.m.	Fridays 2.15—3.30 p.m.

During the year the Clinic treated 180 new cases from the County Borough including one person for syphilis (female) and 36 persons for gonorrhoea (7 females, 29 males).

Table 6 illustrates the incidence of syphilis and gonorrhoea in the town during the last decade:—

TABLE 6  
INCIDENCE OF NEW CASES OF VENEREAL DISEASES 1955-1964

		<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other Venereal Diseases</i>
1955	...	7	29	75
1956	...	2	21	67
1957	...	10	33	56
1958	...	6	38	73
1959	...	3	36	64
1960	...	10	41	84
1961	...	3	50	99
1962	...	10	49	107
1963	...	3	58	129
1964	...	1	36	143

It will be noted from this Table that the number of new cases of syphilis during 1964 was the lowest for the last ten years and the incidence of gonorrhoea gradually rose until 1964 when there was a steep decline to 36 cases. This, in fact, reflects generally the national pattern for the same period.

TABLE 7  
CASES OF NOTIFIABLE DISEASES DURING THE YEAR 1964

NOTIFIABLE DISEASES	NUMBER OF CASES NOTIFIED												Not Known	
	ALL AGES	AGES (IN YEARS)												
	0-	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-	65-		
Dysentery .....	2	—	—	1	—	—	—	1	—	—	—	—	—	
Erysipelas .....	7	—	—	—	—	—	—	—	—	—	1	6	—	
Food Poisoning .....	1	—	—	—	—	—	—	—	—	—	1	—	—	
Measles .....	479	22	50	81	61	182	6	4	2	—	—	—	—	
Pneumonia .....	12	—	—	—	—	2	1	—	1	—	3	5	—	
Puerperal Pyrexia .....	7	—	—	—	—	—	—	1	4	1	—	—	1	
Scarlet Fever .....	34	—	2	7	8	13	2	—	—	—	—	—	—	
Whooping Cough .....	72	13	5	8	13	17	6	4	—	—	—	—	—	
Tuberculosis : —														
Respiratory .....	30	1	2	—	—	1	—	2	6	3	11	2	1	
Other Forms .....	8	—	—	—	—	—	—	—	3	3	1	—	1	
TOTALS .....	652	36	58	81	97	82	215	15	12	16	7	17	13	3

The above figures allow for corrections in diagnosis and include non-civilian cases.  
No notifications were received of other notifiable diseases not specified in the Table above (e.g., diphtheria, malaria, smallpox).

TABLE 8  
INFECTIOUS DISEASES, 1955—1964

DISEASE	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Acute Poliomyelitis (Paralytic) ... (non-paralytic)	5	1	1	4	1	1	—	1	—	—
Anthrax .....	—	—	—	—	—	—	2	1	—	—
Diphtheria .....	—	—	1	—	—	—	—	—	—	—
Dysentery .....	332	53	4	5	153	191	38	25	86	2
Encephalitis .....	—	—	—	—	—	—	—	—	—	—
Enterica .....	—	—	—	—	—	—	—	—	—	—
Erysipelas .....	23	26	15	23	8	13	5	6	7	7
Food poisoning .....	13	157	25	19	18	13	1	3	2	1
Measles .....	2,003	461	1,162	1,462	202	29	3,309	60	1,899	479
Meningococcal Infection .....	—	1	—	—	—	—	1	—	—	—
Ophthalmia Neonatorum .....	2	2	—	—	—	1	—	—	2	—
Paratyphoid .....	—	2	2	—	—	—	1	—	—	—
Pneumonia .....	53	58	40	34	69	18	37	21	13	12
Puerperal Pyrexia .....	134	106	80	94	53	54	18	29	13	7
Scarlet Fever .....	147	115	126	93	134	100	43	25	38	34
Typhoid .....	—	—	—	—	—	1	—	1	1	—
Whooping Cough .....	224	30	360	8	81	98	26	49	76	72



## VACCINATION AND IMMUNISATION

In recent years the numbers and types of antigens available for vaccination and immunisation purposes have considerably increased. In fact, research in this field has been so fruitful that protection against poliomyelitis can now be administered either by injection or by mouth. Considering the numbers of vaccines involved there is understandably an increasing tendency where possible to combine vaccines and thus reduce the number of necessary injections to a minimum.

To assist parents and to avoid any confusion, a personal letter from the M.O.H. is delivered to every mother by the health visitor when she first visits the home on, or soon after, the ninth day of the baby's life. This letter explains the schedule for vaccination and immunisation in use in the Health Department and if it is not suitable for any particular child the parent is advised to discuss the matter with their family or clinic doctor. Further, the parents are provided with a personal record card for their retention which records particulars relative to the vaccinations and immunisations their child is receiving.

**Vaccination against Smallpox**

Vaccination against smallpox is carried out by doctors at infant welfare centres and by general practitioners in the child's second year of life. In 1964 485 children received primary vaccination against smallpox.

**Immunisation against Diphtheria**

During 1964 1,661 children received a full course of primary immunisation and 954 received booster doses against diphtheria. Table 9 illustrates the age groups concerned.

TABLE 9  
DIPHTHERIA IMMUNISATION

Children born in the years:—	Full course of Primary Immunisation	Secondary (Re-inforcing) Injection	Total
1964	689	—	689
1963	751	53	804
1962	69	209	278
1961	23	93	116
1960	15	39	54
1955-59	103	536	639
1950-54	11	24	35
TOTAL	1,661	954	2,615

### Immunisation against Whooping Cough

The following table gives details of whooping cough immunisations carried out during 1964:—

TABLE 10  
WHOOPING COUGH IMMUNISATION

Year of Birth	Number of Children
1964	685
1963	751
1962	69
1961	23
1960	15
1955-59	83
1950-54	12
<b>TOTAL</b>	<b>1,638</b>

### Poliomyelitis Immunisation

The following table gives the number of immunisations carried out during 1964:—

TABLE 11  
POLIOMYELITIS IMMUNISATION

Age Group	Number of Persons who have received :									Total
	One Dose		Two Doses		Three Doses			Four Doses		
	Oral	Injec- tion	Oral	Injec- tion	Oral			Oral	Injec- tion	
					After 2 Oral	After 2 Injec- tions	Injec- tion			
1943-1964	16	3	10	3	511	—	38	699	6	1,286
1933-1942	10	11	1	1	7	—	11	—	—	41
1920-1932	1	—	1	—	3	—	8	—	—	13
<b>Totals</b>	<b>27</b>	<b>14</b>	<b>12</b>	<b>4</b>	<b>521</b>	<b>—</b>	<b>57</b>	<b>699</b>	<b>6</b>	<b>1,340</b>

It is calculated that since poliomyelitis immunisation commenced in 1956, the following percentages in the specified age groups have received a complete course of immunisation :—

Age group	Percentage of Age group Immunised
1943—1964	81·9
1933—1942	55·8
1920—1932	27·9
All age groups	60·1

#### TUBERCULOSIS

I am indebted to Dr. E. T. W. Starkie, Consultant Chest Physician, for the following account of the work undertaken at the Chest Clinic during the year.

**General Remarks.** This report is written just twenty years after the discovery of Streptomycin. Such has been the dramatic impact on the problems relating to public health by the use of this and other preparations, that it is now difficult to realise the degree of ill-health, physical incapacity and the resulting social degradation which was in our midst before this discovery.

The number of new cases found by the mass X-ray may be used as a yardstick for assessing the degree of success which has attended the introduction of measures to eliminate tuberculosis.

During the first mass X-ray survey in Northampton which was held in 1945-46, five new cases of tuberculosis were discovered amongst each 1,000 persons examined. In the 1961-2 survey the discovery rate had fallen to only one case amongst every 3,000 persons examined.

In 1945 the average expectation of life for the newly discovered cases was probably less than three years. Today practically every new case has an excellent chance of complete cure if they will only undertake their treatment conscientiously.

Comparatively small as the problem is today, when compared with that of twenty years ago, there are still some rather disturbing facts which should not be concealed. One such disturbing factor is that in the last five years the percentage of tuberculin positive reactors amongst school children has not decreased at the rate which might have been expected. Another finding which should be investigated is that very few of the people born and who grew up in Northampton have developed tuberculosis during the last five years. Of the new cases notified in the Borough during this period an unduly high proportion have been in persons not born locally but who have come to work and live in Northampton. More work will have to be done to ascertain whether these patients have contracted phthisis before coming to Northampton, or if there are certain conditions which render these people especially liable to infection when once they have moved into the Borough.

The following tables give a clear indication of the present state regarding tuberculosis in the County Borough of Northampton.

**Chest Clinic.** Details of the sessions held at the Chest Clinic are given on page 66.

The following relates to some of the anti-tuberculosis work during 1964 :—

Consultations .....	6,360
New out-patients .....	4,050
Number of contacts of new cases examined .....	142
Contacts examined of patients previously notified .....	443
Mantoux positive children found at school .....	104
Mantoux tests .....	335
X-ray examinations: Radiographic film .....	6,194
Pathological specimens .....	1,832
Home visits: By health visitors .....	41
By medical staff .....	192
Total number of attendances by patients .....	7,523

**Notifications.** (Tables 13 to 16, pages 26 and 27). During the year, 38 persons were notified for the first time as suffering from tuberculosis. Of these, 30 cases were respiratory and 8 non-respiratory. Their age groups and classification are shewn in Tables 14 and 15. In addition, 5 cases already notified in other areas came into the County Borough.

Table 16 gives the occupations of new cases of respiratory tuberculosis.

**Deaths.** (Tables 12 to 14, pages 25 and 26). The number of deaths and the death-rates from tuberculosis per thousand of the population were as follows :—

	NO. OF DEATHS	DEATH-RATES
Respiratory tuberculosis .....	6	0.06
Other forms .....	—	0.00
<b>Totals</b> .....	<b>6</b>	<b>0.06</b>

The death-rate for all forms for England and Wales was 0.06 (respiratory 0.05, other forms 0.01), which is the lowest recorded.

Table 12 gives the total tuberculosis death-rates for Northampton and for England and Wales during the last ten years.

TABLE 12

TOTAL TUBERCULOSIS DEATH-RATES IN EACH YEAR OF THE DECENNium

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
England and Wales ...	0.15	0.12	0.11	0.10	0.09	0.08	0.07	0.07	0.06	0.06
Northampton .....	0.13	0.22	0.11	0.11	0.11	0.12	0.03	0.10	0.05	0.06

TABLE 13  
TUBERCULOSIS NOTIFICATIONS AND DEATHS

YEARS	NOTIFICATIONS			DEATHS		
	RESPIRATORY	NON-RESPIRATORY	TOTALS	RESPIRATORY	NON-RESPIRATORY	TOTALS
1955	83	13	96	12	1	13
1956	65	12	77	20	2	22
1957	52	8	60	8	3	11
1958	51	5	56	10	1	11
1959	32	8	40	11	—	11
1960	31	7	38	12	—	12
1961	27	3	30	2	1	3
1962	35	10	45	9	1	10
1963	25	11	36	3	2	5
1964	30	8	38	6	—	6

TABLE 14  
TUBERCULOSIS. AGE GROUPS FOR NEW CASES AND DEATHS

AGE PERIODS	NEW CASES				DEATHS			
	RESPIRATORY		NON-RESPIRATORY		RESPIRATORY		NON-RESPIRATORY	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year .....	1	—	—	—	—	—	—	—
1—4 years .....	1	2	—	—	—	—	—	—
5—9 years .....	—	1	—	—	—	—	—	—
10—14 years .....	—	—	—	—	—	—	—	—
15—19 years .....	1	1	—	—	—	—	—	—
20—24 years .....	1	2	—	—	—	—	—	—
25—34 years .....	1	1	2	2	1	—	—	—
35—44 years .....	4	—	1	1	1	—	—	—
45—54 years .....	4	1	—	—	1	1	—	—
55—64 years .....	4	2	—	1	—	—	—	—
65 and upwards .....	3	—	1	—	1	1	—	—
Totals .....	20	10	4	4	4	2	—	—

TABLE 15  
TUBERCULOSIS. CLASSIFICATION OF NEW CASES

CLASSIFICATION	NOTIFIED CASES			DEATHS OF CASES NOT NOTIFIED		
	M.	F.	TOTAL	M.	F.	TOTAL
RESPIRATORY TUBERCULOSIS .....	20	10	30	1	1	2
OTHER FORMS :—						
Meninges and Brain .....	—	—	—	—	—	—
Peritoneum and Intestines .....	—	2	2	—	—	—
Bones and Joints .....	1	—	1	—	—	—
Glands .....	—	1	1	—	—	—
Other Organs .....	3	1	4	—	—	—
Totals .....	24	14	38	1	1	2

TABLE 16  
RESPIRATORY TUBERCULOSIS. OCCUPATIONAL INCIDENCE

OCCUPATION	NEW CASES	OCCUPATION	NEW CASES
Shoe Operatives :—		Housewife .....	5
(a) Clicker .....	—	Infant .....	4
(b) Laster .....	1	Labourer .....	2
(c) Finisher .....	—	Licensee .....	1
(d) Roughstuff and Pressman ...	—	Lorry Driver .....	1
(e) Warehouse and General ...	—	Medical Practitioner.....	1
(f) Female Worker .....	1	Plasterer .....	1
		Retired .....	3
Bank Clerk.....	1	Road Sweeper .....	1
Bricklayer .....	1	Schoolgirl .....	1
Bus Driver .....	1	School Meals Employee .....	1
Butcher .....	1	Sheet Metal Worker.....	1
Checker .....	1	Storeman .....	1
Haulage Contractor .....	1	Student Nurse .....	1
		Total .....	32*

\* 30 new cases plus 2 discovered post mortem.

**B.C.G. Vaccination.** During the year, 981 persons (tuberculin negative) were vaccinated with B.C.G. vaccine. 143 of these were contacts, and 838 were school children.

B.C.G. vaccination continued to be available to the following groups :—

- (i) children between their thirteenth and fourteenth birthdays;
- (ii) children who are approaching 13 years of age and can conveniently be vaccinated along with others of that age;

- (iii) children of 14 years of age and older;
- (iv) children aged 10 years or more with the intention of permitting B.C.G. vaccination at an earlier age than 13 years where this appeared to be justified by the risk of tuberculous infection during later school life; and
- (v) students attending universities, teacher training colleges, technical colleges or other establishments of further education.

## MATERNITY AND CHILD WELFARE

MARJORIE M. WILLIAMS, M.B., CH.B.

Senior Assistant Medical Officer

**Registration of Births.** 2,020 live births were registered, the birth-rate being 19.0, compared with 18.4 for England and Wales.

TABLE 17

### REGISTERED LIVE BIRTHS AND STILLBIRTHS

	Males	Females	Totals
Live Births Registered .....	1,048	972	2,020
Stillbirths Registered .....	15	11	26
* Total Births Registered .....	1,063	983	2,046

\* 1,602 of the total registered births occurred in institutions.

4,137 live births were notified during the year.

**Stillbirths.** Of the 26 stillbirths recorded, fifteen were born prematurely and ten weighed less than 3½ lbs. at birth. All but one stillbirth occurred in hospital.

26 stillbirths were registered, giving a rate of 12.7 per thousand total births (including stillbirths) registered, compared with 16.3 for England and Wales. 24 stillbirths were investigated and the findings shown in Table 18. 5 of these occurred in primigravida. In 15 cases labour was premature.

**Perinatal Mortality.** The perinatal mortality (i.e. stillbirths and infants dying in the first week of life) has been closely studied. Anoxia and congenital abnormalities appear to be the most common causes and the first 24 hours of life the most hazardous. A detailed analysis of perinatal deaths is given in Table 18.

TABLE 18

### PERINATAL MORTALITY (Analysis of deaths)

#### A. Neonatal deaths.

Cause	Atelectasis	...	6
	Prematurity	...	2
	Atelectasis and prematurity	...	2
	Cerebral haemorrhage	...	4
	Congenital	...	4
	Asphyxia	...	2



PERINATAL MORTALITY *continued*

Age of infant	Under 12 hours	...	10
	12—24 hours	...	2
	1—2 days	...	5
	3—7 days	...	3
Weight	Under 2lbs. 3 oz.	...	6
	2.3 oz. under 3.4 oz.	...	3
	3.4 oz. under 4.6 oz.	...	3
	4.6 oz. under 4.15 oz.	...	1
	4.15 oz. under 5.8 oz.	...	0
	over 5 lbs. 8 oz.	...	7
No. of pregnancies	1st	...	8
	2nd	...	6
	3rd	...	1
	4th	...	2
	5th	...	3
Obstetric history	APH	...	2
	Placenta praevia	...	2
	P.E.T.	...	3
	Diabetic	...	1
	Poor Ante-natal care	...	2
	Others	...	10
<b>B. Stillbirths</b>			
Cause	APH	...	7
	Toxaemia	...	3
	Others	...	7
	Not known	...	7
Maturity	Under 30 weeks	...	2
	30—32 weeks	...	2
	33—34 weeks	...	2
	35—36 weeks	...	3
	37—38 weeks	...	4
	39—40 weeks	...	6
	40 weeks plus	...	5
No. of pregnancies	1st	...	5
	2nd	...	5
	3rd	...	4
	4th	...	5
	5th	...	5
Weight	Up to 2.3 oz.	...	4
	3.4 oz.	...	6
	4.6 oz.	...	1
	4.15 oz.	...	1
	5.8 oz.	...	2
	7.8 oz.	...	8
	Over 7.8 oz.	...	2

**Late Neonatal Mortality.** There were three deaths in infants aged 1 week to 1 month as follows:—

- Congenital heart
- Broncho-pneumonia
- Meningitis and septicaemia.

**Post Neonatal Mortality.** Thirteen deaths occurred in infants aged 1 month to 12 months from the following causes:—

- 1 Subdural haemorrhage, epilepsy
- 2 Interstitial pneumonitis
- 2 Interstitial and sickle of cell haemoglobin
- 5 Bronchopneumonia (including 1 following whooping cough)
- 1 Congenital malformations
- 1 Asphyxia.

**Infant Mortality.** There were 38 deaths under one year of age, the infant mortality being 18·8 per thousand live births registered. The corresponding figure for England and Wales was 20·0. Table 19 gives the infant mortality for England and Wales and Northampton for the last ten years.

The infant deaths are classified by cause in Table 18.

TABLE 19  
INFANT MORTALITY RATES, 1955—1964

	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
England and Wales ...	24·9	23·8	23·0	22·5	22·0	21·7	21·4	20·7	21·1	20·0
Northampton .....	17·7	24·1	16·5	19·1	23·4	20·2	26·7	15·4	17·0	18·8

**Mortality in Pre-school Children.** There were eight deaths in children aged 1 to 5 years as follows:—

- 1 Lymphatic leukaemia
- 3 Congenital malformations
- 2 Road accidents
- 1 Burns
- 1 Bronchopneumonia.

**Child Welfare Centres.** A summary of the 1964 statistics is given below:—

Number of children who first attended a centre of this Local Health Authority and who at their first attendance were under one year of age .....	1,897
Total number of children under five years of age who attended	4,501
Total attendances .....	47,083

Attendances were 3,703 more than during 1963.

Fifteen Child Welfare Centres are held each week, four in the St. Giles' Clinic and eleven in temporary premises in various parts of the town.

During the year 4,501 children attended, of these 1,897 were under 1 year.

We are indebted to our Voluntary Association members who give so much help keeping attendance registers, selling baby foods and above all, maintaining the warm and friendly atmosphere so much appreciated by the mothers.

A Special Clinic for young handicapped children is held each Thursday afternoon. This is proving most helpful to the mothers and the children and much useful information is being compiled with regard to the special needs of these children. Again we are indebted to the voluntary help and support in this venture.

**Voluntary Work.** The Northampton Maternity and Infant Welfare Voluntary Association has 156 members. One of their main activities is to help at the fifteen Child Welfare Centres.

The Association is also responsible for the Mothers' Club which is held on Tuesday and Thursday evenings from September to April, and has very good attendances. The mothers, who pay a small fee for each session of twelve weeks, are taught dressmaking and other crafts. Coffee mornings and Bring and Buy Sales are held in addition to an Exhibition of Work done at the Club.

**Maternity Homes.** There are three registered maternity homes. Thirty-one visits of inspection were paid by the Senior Assistant Medical Officer.

**Midwives.** 50 midwives were practising in Northampton County Borough on 31st December, 1964, as follows:—

Domiciliary (including 2 administrative staff) .....	9
St. Edmund's Maternity Unit .....	11
Barratt Maternity Home .....	27
Other maternity homes .....	3
	<hr/>
Total .....	50
	<hr/>

**Administration of Inhalational Analgesics.** All the above midwives held a certificate of competence in the use of gas-air analgesic apparatus.

Out of the 443 district cases, analgesics were administered in 376 (84.9 per cent.). There are six sets of apparatus for district use.

#### HEALTH VISITING

Owing to the small number of health visitors on the staff, as at 31st December 1 Superintendent and 6 health visitors against an establishment of 1 Superintendent and 20 health visitors, many aspects of their work have inevitably been neglected.

Selective visiting has been undertaken to make the best use of these highly trained and experienced nurses. Priority is always given to mothers with a new baby, parents with a handicapped child (whether this be physical or mental), problem families and those families requiring special help and guidance—preventive measures for possible 'problems' of the future.

The health visitor is encouraged to communicate freely with the doctor and other members of the social welfare and health teams.

A register is kept of the children born 'at risk'. From very careful observation of these children it is hoped to detect and treat any handicap which becomes manifest at an earlier age than would otherwise have been possible.

Their work is summarised below:—

<i>Cases Visited by Health Visitors</i>	<i>Number of Cases</i>
1 Children born in 1964 .....	2,129
2 Children born in 1963 .....	1,967
3 Children born in 1959—62 .....	3,637
4 Total number of children in lines 1—3 .....	7,733
5 Persons aged 65 or over.....	26
6 Number included in line 5 who were visited at the special request of a general practitioner or hospital	19
7 Mentally disordered persons .....	—
8 Number included in line 7 who were visited at the special request of a general practitioner or hospital	—
9 Persons, excluding maternity cases, discharged from hospital (other than mental hospitals) .....	—
10 Number included in line 9 who were visited at the special request of a general practitioner or hospital	—
11 Number of tuberculosis households visited .....	35
12 Number of households visited on account of other infectious diseases .....	41

The shortage of health visitors has prevented any arrangements for them to work in conjunction with general medical practitioners.

**Clinic Nurses.** Owing to the shortage of health visitors and the difficulty in recruiting, clinic nurses have been appointed. Seven full-time clinic nurses were on the staff at the end of 1964. Valuable help is given by the clinic nurses, each of whom is attached to a health visitor and carries out duties with schools, clinics and homes in her area.

Any extension of the health visitors' work beyond the mothers and children under five has been impossible, but in the normal course of their duties they pay particular attention to problem families.

#### DOMICILIARY MIDWIFERY

The Northampton Branch of the Queen's Institute of District Nursing undertake domiciliary midwifery on behalf of the County Borough Council.

All cases are booked by general practitioner obstetricians.

Northampton is fortunate in being able to provide hospital accommodation for 78·5% of all confinements. This figure is well above that recommended by the Cranbrook Report.

Applications for admission to the General Practitioner Unit at St. Edmund's Hospital continue to increase. During 1964 almost 1,000 applications were dealt with, 129 were refused. Unfortunately, not all who apply can be accepted. Patients admitted to this Unit remain under the care of their family doctor as they would if delivered in their own home. Priority is given on social grounds—when the expectant mother is sharing a house or when the rooms available are unsuitable for delivery. Primipara or mothers with large families are also booked when accommodation has not been available at the Barratt Maternity Home.

Close liaison is maintained by the Health Department with the Barratt Maternity Home, St. Edmund's Maternity Unit and the Superintendent of Domiciliary Midwives. Patients who are attended by their own doctor carry a record card to ensure continuity of ante-natal and obstetric care.

To reduce complications to a minimum good ante-natal care for all expectant mothers is essential. Unfortunately there are still some women who fail to realise the necessity for regular visits to their doctor or midwife.

A clinic is held weekly at St. Giles' Street to which mothers can be referred for the necessary blood tests during pregnancy. This includes Rh. grouping and Hb. estimations. These tests are important and should be carried out on all pregnant women. During the year 2,020 tests were carried out at the clinic.

Mothercraft and Relaxation Classes are held throughout the year for all women living in the County Borough. The number of sessions is increasing and during 1964, 568 women made 2,347 attendances. Talks and demonstrations are given by the health visitor in charge and in addition the early requirements of the baby and the services available to mother and baby are explained.

No maternal deaths were recorded during 1964.

During the year 443 live births and 1 stillbirth took place at home. 16 mothers were primipara and 35 were mothers with more than 4 children; the latter were opposed to leaving their own homes for confinement in spite of medical advice to the contrary.

In Northampton the Queen's Institute of District Nursing operates an "On Call Night Rota" System. This rota is revised each day and midwives called out during the night are given time off the following day if this is at all practicable.

The Institute is a Part II training school for midwifery pupils. 16 pupils were trained during the year, of whom 14 were successful in passing the examinations.

**Early Discharges from Maternity Units.** Generally the necessity for early discharges is recognised and the system whereby the hospital staff contact the domiciliary midwives works fairly smoothly.

During the year 189 mothers were discharged from the Barratt Maternity Home and 6 from St. Edmund's Maternity Unit within 48 hours of delivery. These mothers were visited by the district midwife before admission to ensure suitable home conditions and preparations if discharged early.

District midwives made 3,621 visits during the year to mothers discharged from hospitals before their tenth day.

**Ante-natal and Post-natal Work.** Domiciliary cases are attended by their family doctor and under the instruction of the doctor the midwives undertake certain clinical work. There were 206 clinical sessions, when 3,995 attendances were made by 1,108 expectant mothers.

A special clinic attended by the Senior Assistant Medical Officer gives one session per week for special cases:—

Ante-natal cases .....	6
Post-natal cases .....	—
Blood tests .....	2,020

All cases booked for confinement at the Barratt Maternity Home receive their ante-natal care at the Barratt Clinic. Patients booked for St. Edmund's Maternity Unit attend the Ante-natal Clinic at that hospital; these Ante-natal Clinics are under the control of the Northampton and District Hospital Management Committee.

**Care of Premature Infants.** There were 132 premature births during 1964, 19 fewer than 1963. Of the 14 born at home, all survived the first week of life. Most small premature babies born at home or in St. Edmund's are transferred to the Premature Baby Unit at the Barratt Maternity Home for special care and nursing.

This Unit was very hard pressed during the year but a new department which can cope with 36 premature infants is nearing completion and the Unit will be transferred to these new and excellent premises early in 1965.

The splendid work done by this Unit is evident from the decrease in the mortality figures amongst premature babies. These are shown in Table 20.

TABLE 20  
PREMATURITY  
(Loss of Infant Life)

Birth Weight	Premature live births	Deaths within 24 hours	Deaths within 28 days	Deaths within 28 days per 1,000 live prem. births	Premature Still births	Premature Stillbirths per 1,000 live and still prem. births
All babies of 5 lb. 8 oz. and less .....	132	8	7	53.0	12	83.9
Under 2 lb. 3 oz. ....	7	3	1	142.8	3	300.0
2.3 oz. and under 3.4 oz....	9	2	3	333.3	3	250.0
3.4 oz. and under 4.6 oz....	23	3	2	87.0	2	80.0
4.6 oz. and under 4.15 oz....	25	—	—	nil	1	38.4
4.15 oz. to 5.8 oz. ....	68	—	1	14.9	3	42.2

Cots, bedding, blankets, hot water bottles, and clothing are available on loan for such infants nursed at home.

**Care of Unmarried Mothers and Their Children.** Special arrangements are made for each individual case and the health visitors advise as necessary.

**Nurseries and Child Minders.** At the end of 1964, 25 daily minders (providing for 228 children) were on the register kept under the Nurseries and Child Minders Regulation Act, 1948. Regular visits were paid by members of the staff.

**Distribution of Welfare Foods.** The distribution of national dried milk, cod liver oil, vitamin A and D tablets, and orange juice is operated from a Main Distribution Centre at the St. Giles' Street Welfare Centre, and also at twelve outlying welfare centres. Two whole-time assistants are employed at the Main Centre and voluntary workers, with occasional help from the staff of this Department, carry out the distribution from the other welfare centres. All ordering, accounting, etc., is carried out in the Health Department.

During 1964, the following quantities of welfare foods were issued to beneficiaries :—

COMMODITY	MAIN CENTRE	OUTLYING CENTRES	TOTAL
National dried milk (tins) .....	14,609	8,904	23,513
Cod liver oil (bottles) .....	1,179	1,312	2,491
Vitamin A and D tablets (packets) ...	1,681	964	2,645
Orange juice (bottles) .....	13,665	12,123	25,788

#### DENTAL CARE

Expectant and nursing mothers and pre-school children receive free dental care. One session is devoted each week to this work. A summary of the work undertaken during the year is given in Table 21.

TABLE 21  
SUMMARY OF DENTAL WORK

	EXPECTANT AND NURSING MOTHERS	CHILDREN UNDER 5 YEARS	TOTALS
<i>Number of Patients provided with Dental Care :—</i>			
Examined .....	9	133	142
Commenced treatment during year .....	8	99	107
Courses of treatment completed during year.....	6	130	136
<i>Numbers of Dental Treatments provided :—</i>			
Scalings and gum treatment ...	6	4	10
Fillings .....	10	149	159
Silver nitrate treatment .....	1	359	360
Crowns or inlays .....	—	—	—
Extractions .....	11	118	129
<i>Dentures provided :—</i>			
Full upper or lower .....	—	—	—
Partial upper or lower .....	2	—	2
Radiographs .....	—	—	—
General anæsthetics .....	4	59	63

**MENTAL HEALTH**

RONALD H. MARTIN, M.A., B.M., B.CH. *Assistant Medical Officer of Health*

Mental health is of importance not only to each individual but to the community as a whole. General health and community services provide for the physical and mental well-being of each individual but, for those who are born with some mental disability or who become mentally ill, specialised services are provided.

Mental health education is of importance if the community is to be well informed on the subject and willing to help. A public awareness of some of these problems has already been aroused by church, voluntary and education programmes which owe much to informed local opinion including that of psychiatrists, paediatricians, public health workers, and others.

It is necessary to extend the scope of mental health education and training and plans are already being drafted with this in mind.

Mental health work includes:—

- (1) The fostering of the mental health needs. A great deal of work is done in this field by the maternity and child welfare, school health and child guidance services and by health visitors, educational psychologists and other medical and social workers, as well as by other statutory and voluntary services.
- (2) The care of the mentally disordered. In this the general practitioner, the hospital services and the mental health department combine.

Mental disorder can be subdivided into (a) mentally handicapped people, i.e. mental subnormality; and (b) mental illness. The services provided for these groups are given later in the report.

The staff of the Mental Health Department comprises:—

- Medical Officer
- Two Senior Mental Welfare Officers
- One Mental Welfare Officer

In addition, there are five doctors who are approved by the Local Authority under Section 28 of the Mental Health Act to examine and recommend compulsory admission where necessary. Consultant psychiatrists are similarly approved but, in general, admission to psychiatric hospitals is on an informal basis.

There is a need in such a department for a wide variety of schemes. Some already exist, others are being planned and further schemes will be needed in the future. The new Adult Training Centre is proceeding well and it is hoped to open this late in 1965. A Manager has already been appointed.

Early in 1965 the adults will be moved from the present combined centre to temporary accommodation in order to relieve the overcrowding which exists and enable young children on the waiting list to be admitted. Thanks are due to the Northampton Society for Mentally Handicapped Children for allowing their rooms to be rented for this purpose. Plans for



a purpose-built hostel for the mentally disordered were awaiting Ministry approval at the end of the year. Plans for the conversion of Whiston Road Home into a special Day Care Centre for young children with severe physical and mental handicaps were approved by the Health Committee for inclusion in next year's capital programme.

Research of a simple, practical nature is essential to any mental health programme, and this is particularly important as the town is enlarged and replanned. Small surveys could furnish valuable information, e.g.:—  
 the causes of acute mental ill-health in the aged,  
 the needs of parents of young handicapped children, and  
 the needs of those who have remained unemployed for more than one year.

### MENTAL ILLNESS

This term covers all forms of mental disorder except mental sub-normality.

Those who are mentally ill may need support from many services. They can only receive proper care as this is well co-ordinated.

The main services are general practitioner, hospital and out-patient, mental health and general welfare of the Local Authority, child and family guidance and other statutory and voluntary services.

A good liaison already exists between these services and it is hoped to extend this in the future.

Certain groups of people are under special stress, e.g., expectant mothers, unmarried mothers, widows, old people, parents of handicapped children, and support is given to them where possible. The health visitors, mental and social welfare visitors and some church organisations provide useful support in times of need and may help to prevent or limit mental illness.

Good facilities exist for diagnosis and, whenever necessary, cases are given immediate support. The general practitioner is informed and he in turn can obtain Consultant advice at the General Hospital Out-Patient Department or in the patient's home.

### **Mental Health Department**

This is essentially a liaison body to co-ordinate, as well as provide, some of the various services or care of the mentally disordered. Community Care is a vital part of mental welfare work.

A 24 hour service is provided to deal with emergencies. Home visiting is frequent and is given at the request of the Consultant or general practitioner, particularly to those patients who agree to "after-care" on leaving hospital.

Requests of many kinds are received in the office and interviews with patients and others are frequent.

Special groups such as homeless families, problem families, drug addicts, vagrants, socially inadequate persons and children at risk of ill treatment or gross neglect cause considerable work to many departments and further study of these might well be repaid.

In time more attention could profitably be given to these groups.

### Future Trends

The volume of the work is increasing, particularly as patients rarely stay in hospital for long periods. In addition, the proposed Borough extension will increase the number and the length of journeys made by staff. There is also the need to enhance liaison with the hospital and family doctors, and various proposals are under discussion to ensure improved administration and better care for the patient.

### MENTAL ILLNESS—STATISTICS

**Admissions:** The following table summarises the formal admissions during 1964.

		<i>Males</i>	<i>Females</i>	<i>Totals</i>
St. Crispin Hospital	Section 25	61	101	162
	Section 26	3	2	5
	Section 29	5	6	11
St. Andrew's Hospital	Section 25	2	6	8
	Section 26	2	4	6
	Section 29	—	1	1
St. John's Hospital, Stone	Section 25	—	1	1
		73	121	194

The above tabulation includes action taken in the case of 42 persons over the age of sixty-five years, 14 males and 30 females admitted to St. Crispin Hospital and 2 females to St. Andrew's Hospital.

### Community Care:

Number of first visits .....	268
Number of subsequent visits .....	1,453
Total visits paid .....	1,721
Number of interviews at Office, Home, etc. ....	469

### After-care:

Referrals for after-care following discharge from St. Crispin Hospital numbered 140, involving 71 males and 58 females. Of these it was found necessary to subsequently re-admit 20 males and 15 females.

### MENTAL SUBNORMALITY

The care, supervision and training of mentally handicapped persons involves medical and social services, both statutory and voluntary. Health education is important and national and local attempts are encouraging an enlightened, practical understanding of those who have some mental handicap, to ensure that the community does its best to assist the mentally handicapped to attain as full a life as possible,

Talks and visits to the Training Centre and the Special Clinic for Handicapped Children were arranged for student nurses from St. Andrew's Hospital, for pupil midwives, for a church group and for medical practitioners taking the Diploma in Child Health.

### **“At Risk” Register**

Any infant known to be at risk of mental handicap by virtue of inheritance, severe birth injury, severe illness or other cause is seen regularly and the parents are advised on the facilities for diagnosis and treatment in cases where this is found to be necessary.

Preliminary observations are usually made by the parents, the health visitor or clinic medical staff, and good facilities exist for full diagnosis by Consultant Paediatrician and by Consultants in mental subnormality who visit regularly. Diagnosis is not always easy, and much patience is needed by parents and medical staff before full and accurate assessment is possible.

Potential cases of subnormality and severe subnormality become known to the Department mainly through the maternity and child welfare staff, Paediatricians, general practitioners and Local Education Authority.

### **Care of Children Under Five Years**

Pre-school children have a preliminary documentation in the Department and detailed notes are kept at the Special Clinic. This is done after consultation between the Senior Medical Officer in the Child Welfare Section and the Medical Officer in the Mental Health Section. The progress of each child is followed in a detailed way. Some attend the Special Clinic or ordinary clinics, others require home visits by health visitors, mental welfare officers or Medical Officer. Routine care is by the general practitioner. Consultant services include regular visits from the Medical Director of Pewsey Hospital; short-term hospital care at Pewsey and Bradwell Grove Hospitals; nursery-type care for half-days at John Greenwood Shipman Home for children whose handicap includes spastic limbs. Short-term care for one patient was provided at a new centre for spastic children at Nottingham and included an attempt at assessment.

### **Care of Children Over Five Years of Age**

These children are ascertained by Medical Officers approved for this work and detailed medical, social and educational reports are compiled before full assessment takes place.

Various services are available for these children:—

- (a) The Junior Training Centre.
- (b) Trial in the E.S.N. School or nursery schools.
- (c) Specialist hospitals for long-term care.
- (d) Home, particularly where special care is needed.
- (e) Short-term care in hospital.

A few cases require regular home visiting, particularly those who are also physically handicapped. A close watch is kept by the staff on those attending the Training Centre and, where problems are found to exist, interviews are arranged and help given.

### **Care of Adults**

After 16 years of age most cases attend the Training Centre, some are at work, others are at home requiring home visiting, and a few have been placed in hospital care.

Day-to-day problems are frequent and often difficult. These come to notice from parents, practitioners, staff of the Training Centre or place of work, and much effort is exerted by the mental welfare officers and others in dealing satisfactorily with them. Office and home interviews and liaison with various branches of the health and social services and with voluntary agencies are all necessary. Parent help and guidance is essential.

### **Hospital Services**

There are three kinds of services provided:—

(a) Advice on difficult cases from the Medical Director of Pewsey Hospital. Periodic consultations are held in the Department or in the patient's home and are of great value in cases where expert advice is needed.

(b) Short-term hospital care. This care is important in cases of stress or the mother ill or in hospital.

(c) Long-term hospital care. This is made difficult by a grave shortage of hospital beds for mentally subnormal patients and this sometimes makes community care very difficult. There is a waiting list of ten patients and in addition, nine men and twenty-five women await transfer from St. Crispin Hospital to hospitals for the mentally subnormal. The Consultants do all that they can to assist in this difficult situation and every addition to the town's facilities, i.e. hostels, Adult and Junior Training Centres, Special Care Units and periods of Nursery care, make matters easier.

About a third of the mentally subnormal persons are receiving hospital care. Some of these are given leave to visit their homes.

The mental welfare officers are in constant touch with the various hospitals and, where necessary, homes are visited before the patient is allowed home and other interviews and visits are made to deal with hospital problems.

Parents visiting the hospitals have long, difficult journeys and transport is arranged by a senior mental welfare officer. This is much appreciated by the parents.

### **"Special Clinic"**

Young mentally handicapped children and their parents require special consideration and help. In 1962 a Special Clinic was established on Thursday afternoons at St. Giles' Welfare Centre to study the needs of these children and their families, and to advise and help in every way possible.

The staff consists of voluntary helpers, health visitors and a medical officer. Children are brought by their parents, transport being provided where necessary.

There are facilities for play and observation and, whilst the children play, the mothers are free to talk with other parents, the nurses and the voluntary helpers.

The medical officer is available to give parent guidance and to undertake co-ordination of the medical, social and training needs of the child. Close liaison exists with the general practitioners, consultants, psychologist and staff of Nurseries, Schools, the Training Centre and Maternity and Child Welfare Section.

Each child's progress is carefully recorded and followed in detail, without adding further burdens to the parent or child.

Research in Glasgow published this year has confirmed the need for clinics similar to the one in Northampton, to co-ordinate and assist in the care of the young handicapped child. Similar provision has now been advocated on a national scale.

The clinic work confirms that full or part-time day care for severely handicapped children is urgently needed, that specialised facilities for the young deaf are important, and that facilities for the severely handicapped cerebral palsy child are also vital.

### **Junior Training Centre**

The average attendance throughout the year was 89.1 per cent. of the 58 on the combined register at the end of the year, of whom 56 trainees were attending the Centre all day and were provided with a midday meal. There were 14 boys and 13 girls attending at the end of the year. On the 31st December, 1964, there was a waiting list of 14 children and 2 adults.

Each trainee was medically examined during the year and an assessment taken of his or her progress. Parents attended most of the interviews and problems and progress were discussed.

The scheme for contract work continues satisfactorily although limited by the shortage of space.

During the year we were able to place 1 male and 1 female trainee in employment. They had attended the Centre for 11 years and 21 years, respectively.

A party of 20 seniors and 4 juniors, in the charge of the Supervisor and 2 members of the staff, travelled by coach to Clacton for 1 week's holiday.

A Harvest Festival Service was held at the Training Centre on 15th October. Many parents and friends attended. The gifts of flowers, fruit, etc., were distributed to mentally handicapped persons confined to their homes and to elderly people, and were greatly appreciated.

The Christmas Party held on the 17th of December was for both adults and children.

### **Adult Training Centre**

In September, 1964, a Manager was appointed and commenced his duties on 1st December.

Preparations were made for the opening early in 1965 of a separate Adult Training Centre in temporary premises where the trainees will have the advantage of a more work-like atmosphere. There were 15 males and 16 females attending the present Centre at the end of the year.

### **After-Care Committee**

Some of those who attend the Northgate School for E.S.N. pupils need care and friendly supervision after they leave school. The Northampton After-care Committee exists for this purpose and, when requested, the mental welfare officer arranges this.

Eight severely subnormal children were admitted to the John Greenwood Shipman Home for one week during the summer to enable their parents to have a rest. This voluntary action was greatly appreciated by the parents.

### Northampton Society for Mentally Handicapped Children

The Society has continued the Wednesday Evening Social which has been well supported. A senior mental welfare officer and a member of the Training Centre Staff attend, and transport is provided by them and by members and friends of the Society.

#### MENTAL SUBNORMALITY—STATISTICS

##### *Cases on Register:—451*

	<i>M</i>	<i>F</i>	<i>Total</i>
In Hospital	61	72	133
Under Home Supervision	159	159	318
	<hr/> 220	<hr/> 231	<hr/> 451

##### *New Cases Placed Under Friendly Supervision*

From Local Education Authority	5
From other sources	20
	<hr/> 25

##### *Hospital Admissions*

Pewsey Hospital	7
Borocourt Hospital	1

##### *Waiting List of Urgent Cases*

	<i>M</i>	<i>F</i>	<i>Total</i>
At Home	6	5	11
Awaiting transfer from St. Crispin Hospital	9	25	34
	<hr/> 15	<hr/> 30	<hr/> 45

### Short-term Hospital Care

Seventeen cases were admitted to Pewsey and Borocourt Hospitals for short-term care.

### Summer Holidays

Holidays for ten adults were arranged by the Brighton Guardianship Society and others.

## ENVIRONMENTAL HEALTH

A. ROBINSON, M.A.P.H.I., *Chief Public Health Inspector*

### Staff

Mr. T. M. Kilyon, deputy chief public health inspector, resigned to take up an appointment as senior public health inspector to the Urban District of Gainsborough and his successor, Mr. G. Harrison, took up his appointment in August. Four district public health inspectors and the meat inspector resigned during the year. Although it was not found possible to recruit sufficient replacements, one student obtained his Diploma and was appointed to fill one post of district public health inspector; one district public health inspector and one authorised meat inspector took up their appointments.

In spite of shortage of staff, a considerable amount of work was carried out and I should like to express my appreciation to all concerned.

### HOUSING

At the beginning of the year the results of the survey of all the houses in the town were correlated and the final report was submitted to the Council. Subsequently, a five-year slum clearance programme was declared based on the findings of the survey. During the period 1946-1962 a total of 244 houses were represented in Clearance Areas and in the same period 753 houses were dealt with as individual unfit properties. In December, 1963, 203 houses in the Adelaide Street, Alliston Gardens and Gladstone Terrace Clearance Area were represented and a Compulsory Purchase Order was made in the following January. In October a Public Inquiry was held by the Ministry of Housing and Local Government to consider objections to the Order. In December, 82 houses in the Princes Street Clearance Area were represented and inspections of the houses in the Wellington Street area were started.

During the year, 15 individual unfit houses were dealt with.

Northampton has a housing problem but it is true that there is little of the squalor traditionally associated with "slums". Many of the condemned dwellings are occupied by respectable citizens who are fighting a losing battle against the discomforts and inconveniences of nineteenth century housing standards and progressive decay of the building fabric. It is estimated that there are still over 7,000 houses with non-flush closets, situated in external compartments very often quite a distance from the house. Large numbers of worn out houses are still to be found in Northampton.

The task of dealing with this problem to enable families to find a pleasanter and healthier life in modern housing conditions is one of the more challenging aspects of our work.

Notwithstanding the demolition or closure of unfit dwellings, repair of other houses has been continued and this still forms a very important part of our work.

Three applications for certificates of disrepair were received during the year.

**Housing Statistics.** The particulars for 1964 are set out below :—

1.—*Inspection of Dwellinghouses.*

(1) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) .....	961
(2) Number of dwellinghouses found to be unfit for human habitation and incapable of repair at reasonable expense .....	15
(3) Number of unfit Corporation owned houses in respect of which Certificates of Unfitness were submitted .....	0
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .....	213

2.—*Remedy of Defects without Service of Formal Notices.*

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers .....	53
--	----

3.—*Action under Statutory Powers.*

A.—Proceedings under Public Health Acts :—

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied .....	62
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—	
(a) By owners .....	48
(b) By Local Authority in default of owners .....	0

B.—Proceedings under Sections 16, 17 and 35 of the Housing Act, 1957 :—

(1) Number of dwellinghouses in respect of which Demolition Orders were made .....	3
(2) Number of dwellinghouses demolished in pursuance of Demolition Orders .....	58
(3) Number of dwellinghouses in respect of which Closing Orders were made .....	9
(4) Number of dwellinghouses in respect of which Closing Orders were substituted for Demolition Orders .....	0
(5) Number of dwellinghouses in respect of which Undertakings to repair were accepted .....	0

C.—Proceedings under Section 18 of the Housing Act, 1957 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made .....	0
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .....	0



4.—*Housing Act, 1957.—Part IV.—Overcrowding.*

A.—(1) Number of dwellings overcrowded at the end of the year .....	0
(2) Number of persons dwelling therein .....	0
B.—Number of new cases of overcrowding discovered during the year .....	2
C.—(1) Number of cases of overcrowding relieved during the year .....	3
(2) Number of persons concerned in such cases .....	27
D.—Particulars of any cases in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding .....	Nil
E.—Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report .....	Nil

**Rent Act, 1957.**

Number of applications for Certificates of Disrepair .....	3
Number outstanding from previous year .....	0
Number of applications withdrawn .....	0
Number of schedules of disrepair prepared .....	2
Number of Certificates of Disrepair issued .....	0
Number of Undertakings accepted .....	2
Number outstanding at end of year .....	1
Number of Certificates of Disrepair cancelled during year...	0

**Overcrowding.** Complaints of overcrowding continue to be brought to notice. On investigation these are usually found to be not statutorily overcrowded by the standards of the Housing Act, 1957.

**Repairs to Property.** Table 27 gives particulars of the work of the public health inspectors relative to housing.

**Council Houses.** The present position of the municipal housing schemes is given below :—

Number of Council houses completed during 1964 .....	56
Total number of houses erected for the Corporation up to 31st December, 1964 (exclusive of 250 temporary bungalows, and houses sold to tenants) .....	8,653

**Other Houses.** The following private building operations relating to housing, plans for which had been approved by the Council, were carried out during the year :—

New dwellinghouses (private enterprise) .....	487
Conversion of houses into flats (number of family units) .....	11
Alterations and extensions to dwellinghouses .....	248
New private garages .....	231
Shops with flats over .....	6
New flats .....	15

**Individual Unfit Houses.**

Number of Demolition Orders made in respect of houses represented during year .....	3
Number of Demolition Orders substituted for Closing Orders .....	0
Number of Closing Orders made in respect of houses represented during year .....	9
Number of houses represented during year, but no order made .....	3
Number of houses where action was under consideration at end of year .....	3
	<hr/>
Total number of houses represented during year .....	15
Number of houses outstanding from previous years .....	33
	<hr/>
Total number of houses to be dealt with .....	48

*Number dealt with during year*

(a) Closing Orders revoked .....	2†
(b) Demolished .....	10
(c) Closed .....	8
(d) Undertakings not to re-let accepted .....	1
(e) Total .....	— 21
	<hr/>
Number remaining to be dealt with .....	27

† Closing Orders were revoked in respect of two houses closed prior to 1964.

*Position at end of year of houses remaining to be dealt with*

(a) To be demolished .....	3
(b) To be closed .....	22
(c) Total .....	— 25

**Unfit Corporation Owned Houses.**

Number submitted during year .....	1
Number of houses outstanding from previous years .....	8
	<hr/>
Total number to be demolished .....	9
Number demolished during year .....	2
Transferred to Clearance Area .....	1
	<hr/>
Number remaining to be demolished at end of year .....	6

*Position at end of year of houses remaining to be demolished*

(a) Number closed pending demolition .....	4
(b) Number still occupied .....	2
(c) Total .....	— 6

**Slum Clearance.** The following tabulations shew the position at the end of the year relative to slum clearance:—

*Northampton C.B. (Fort Street and Moat Street) Clearance Area, 1960*

Houses demolished during year .....	5
Houses closed during year, pending demolition .....	0
Houses closed in previous years, not yet demolished .....	0
Houses still occupied at end of year .....	0
Houses demolished in previous years .....	70
Total number of houses in Clearance Area .....	<u>75</u>

*Northampton C.B. (Little Cross Street) Clearance Area, 1960*

Houses demolished during year .....	3
Houses closed during year, pending demolition .....	0
Houses closed in previous years, not yet demolished .....	0
Houses still occupied at end of year .....	0
Total number of houses in Clearance Area .....	<u>3</u>

*Northampton C.B. (St. James' Street) Clearance Area, 1961*

Houses demolished during year .....	19
Houses closed during year, pending demolition .....	5
Houses closed in previous years, not yet demolished .....	11
Houses demolished in previous years .....	10
Houses still occupied at end of year .....	1
Total number of houses in Clearance Area .....	<u>46</u>

*Northampton C.B. (Russell Terrace) Clearance Area, 1961*

Houses demolished during year .....	21
Houses closed during year, pending demolition .....	0
Houses closed in previous years, not yet demolished .....	0
Houses still occupied at end of year .....	0
Total number of houses in Clearance Area .....	<u>21</u>

TABLE 22

SLUM CLEARANCE 1946-64

Year	Clearance Areas		Individual Houses	
	No. Represented	No. Demolished	No. Represented	No. Demolished
1946-54	—	—	287	127
1955	—	—	51	29
1956	15	—	32	48
1957	56	15	101	19
1958	28	1	98	33
1959	—	19	35	10
1960	78	60	48	1
1961	67	6	57	13
1962	—	6	34	18
1963	203	70	17	11
1964	82	48	15	10
	<u>529</u>	<u>225</u>	<u>775</u>	<u>319</u>

**Rehousing.** The following shews the rehousing carried out during 1964:—

	<i>Persons</i>	<i>Families</i>
Rehoused from individual unfit houses .....	18	8
Rehoused from unfit Corporation owned houses .....	7	1
Rehoused from Clearance Area houses .....	16	6
	—	—
Totals .....	41	15
	—	—

#### FOOD INSPECTION

It is regretted that due to the shortage of staff and other commitments it was not possible for an adequate number of inspections to be made of the food premises in the town. A number of very important developments in this field have, however, taken place. A large modern dairy to replace three of the smaller and older dairies was built during the year and this will come into operation early in 1965. Construction of a large modern slaughterhouse to replace two of the older slaughterhouses was started and this will come into operation in the middle of 1965.

One small slaughterhouse closed during the year and by the Appointed Day under the Slaughterhouses Act, 1958, there will be three slaughterhouses in the town, all of which will comply fully with the Slaughterhouse Hygiene Regulations. It is interesting to recall that 25 years ago there were 44 slaughterhouses in Northampton. Even so, the implementation of the Meat Inspection Regulations with 100 per cent. inspection of all animals has meant that over 1,000 hours overtime were spent on meat inspection duties by the public health inspectors. For the first time for many years a meat inspectors' course was started at the Northampton College of Technology, in September. This was made possible by the co-operation of the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food in providing lecturers to assist members of the Department's staff.

By the end of the year plans were complete for a series of lectures on Food Hygiene to members of the food trades which will be held at the College of Technology, commencing in January, 1965.

**Sampling of Food and Drugs.** 256 samples (79 formal, 177 informal) were taken by the public health inspectors under the Food and Drugs Act, 1955. This work is done on a rota and samples are taken on a basis of 3 per 1,000 population, at least one-third being milks; notwithstanding the shortage of staff, the programme was maintained for the first time for many years.

Sampling includes enforcement of the provisions of the Labelling of Food Order and the various food standards regulations.

The nature of the samples submitted to the Public Analyst is given in Table 24 in the Appendix. 8 samples (3.1 per cent.) were found to be not genuine.

**Complaints and Contraventions.** 21 infringements, 16 resulting from complaints, were reported to the Committee, details of which are contained in Table 23 in the Appendix.

**Milk and Dairies.** At the end of 1964, the following entries were in the register kept under the Milk and Dairies (General) Regulations, 1959:—

Dairy premises .....	3
Milk dealers .....	170

All the dealers are licensed to use the special designation Pasteurised or Sterilised.

139 samples of milk were submitted for examination, *viz.* 106 pasteurised and 33 sterilised.

All the pasteurised samples were submitted to the phosphatase test and all reached the required standard. All the samples of sterilised milk were subjected to the turbidity test and were satisfactory.

**Tubercle Bacilli in Milk.** No samples of ordinary raw milk were submitted for the presence of tubercle bacilli.

**Meat Inspection.** There was an overall decrease of 11,517 animals in the slaughterhouse throughput compared with 1963. The numbers of cattle, cows, calves, and sheep and lambs decreased by 3,405, 17,341 and 10,381 respectively, whilst the number of pigs increased by 2,627. Details are shown in Table 25 in the Appendix.

**Slaughterhouses.** There were five slaughterhouses on the register *viz.*—

Cattlemarket	Ransome Road
14 Military Road	St. Andrew's Hospital
1A Oliver Street	

All are in regular use except St. Andrew's Hospital which closed in March.

The appointed day under the Slaughterhouses Act, 1958, for the County Borough is 1st July, 1965.

In addition to the meat produced from these slaughterhouses, there are four depots from which home killed and imported meat and offal is distributed:—

Abington Square (2 depots)  
Wellingborough Road  
Main Road, Far Cotton

**Slaughter of Animals.** At the end of 1964, the names of 21 slaughtermen were on the register kept under the Slaughter of Animals Acts, 1954 to 1958.

**Unsound Food.** There were no seizures, but 2,796 surrender notes were issued—1,432 for meat, etc., from slaughterhouses and 1,364 for tins, etc., of food (see Table 26 in the Appendix).

**Bakehouses.** 16 visits were paid to bakehouses of which there are 15 on the register. More time should have been devoted to this work, but the shortage of staff made it impossible.

**Ice Cream.** At the end of 1964, the following registrations of ice cream premises under Section 16, Food and Drugs Act, 1955, were in operation :—

GROUP I.	Storing and selling prepacked ice cream .....	546
GROUP II.	Storing and selling bulk ice cream .....	46
GROUP III.	Manufacturing, storing, and selling cold mix ice cream .....	8
GROUP IV.	Manufacturing, storing, and selling hot mix ice cream .....	3
	Total .....	<u>603</u>

**Food Poisoning.** During the year 15 samples of food were submitted to the Public Health Laboratory. One case of food poisoning was notified under Section 26 of the Food and Drugs Act, 1955.

#### DISTRICT INSPECTION

Table 27, in the Appendix, summarises the work of the public health inspectors. 8,127 inspections and visits were made during 1964.

**Water Supply.** The water undertaking is managed by the Mid-Northamptonshire Water Board, of which Northampton County Borough is a constituent authority.

It must be made quite clear, however, that under Section 28 of the Water Act, 1945, it is the duty of every local authority to take from time to time such steps as may be necessary for ascertaining the sufficiency and and wholesomeness of water supplies within their district, etc.

94 samples collected from various points of supply within the County Borough were submitted to the Public Health Laboratory for bacteriological examination and a satisfactory report was received in 92 instances. Two unsatisfactory samples were later reported as very satisfactory after recommended action had been taken.

The average daily consumption of water in the County Borough is estimated to be 47 gallons per head of the population.

Only eleven houses are not supplied direct from the public mains.

**Drainage and Sewerage.** Chiefly as a result of rat complaints, existing drains are tested and repaired under the supervision of the district public health inspectors, new drainage and reconstructions being the responsibility of the Borough Engineer, as is sewage disposal.

There are still a few properties on the outskirts of the County Borough not connected to the main sewerage system.

It is estimated that there are over 7,000 dwellinghouses with non-flush closets in the County Borough.

**Public Cleansing.** This continues to be efficiently carried out under the direction of the Borough Engineer. Collections of household refuse and salvage are made twice weekly.

Dustbins are provided by the Local Authority for the use of householders, free of charge, under Section 75 (3) of the Public Health Act, 1936.

**Smoke Abatement and Atmospheric Pollution.** During the past year it has not proved necessary to take any formal action in respect of the emission of dark smoke or grit. As the occasion demanded, visits were made to various industrial premises and improvement effected by interviews and discussions with the management and their employees about their problems. Advice was offered and accepted. Installation of mechanical stokers in connection with the burning of bituminous fuel and conversion of plant for the burning of oil have greatly assisted in the reduction of smoke emitted to the atmosphere.

Eight plans deposited with the building inspector, giving information of intended installation of new fuel burning appliances in connection with industrial premises, have been examined.

A large percentage of the smoke emitted to the atmosphere during the winter months is from domestic appliances and will so continue until effectually controlled.

A daily SO<sup>2</sup>/smoke recorder has been installed in the Health Department and it is hoped to complete the installation of four more recorders in various parts of the town in the early part of next year.

**Swimming Baths.** Northampton has adequate swimming facilities, both indoor and open-air. The Public Baths, Upper Mounts, is a modern establishment, whilst the open-air swimming pool, known as Midsummer Meadow Baths, is a large sheet of water with pleasant surroundings.

The method of treatment at the Upper Mounts (indoor) Baths is by pressure sand filters with a turnover period of three hours with chlorination and chemical treatment. At the Midsummer Meadow (open-air) Baths, heated water from the nearby Electricity Power Station is drawn through a Micro Strainer giving an approximate turnover period of twelve hours; chlorination and chemical treatment is also adopted.

There is also an indoor bath at Barry Road School and a private open-air bath at the Town and County Grammar School for Boys.

**Disinfestation Service.** Insect problems of all types are dealt with by the Municipal Disinfestation Service. Gammexane, D.D.T. and other compositions are used and applied by a 30 lb. pressure spray and powder blower. Bedding, etc., is dealt with in a steam disinfector.

In March it was decided by the Council that all treatments carried out in dwellinghouses should be free of charge. Treatment of business premises is carried out by contract or after survey and estimate of cost has been prepared for special solutions which may have to be purchased or made up to deal with the particular problem.

During 1964, infestations of bed bugs were found in five privately owned houses, none of which related to tenants prior to removal to a Council house. The work of disinfection is carried out by the disinfection officer under the supervision of the public health inspectors and remedial measures are explained to tenants when premises are treated so as to prevent re-infestation.

**Factories.** Table 28, in the Appendix, gives particulars of premises on the register and work done under the Factories Act, 1937, in the form prescribed by the Ministry of Labour.

**Offensive Trades.** At the end of December, 1964, there were three names on the list of proprietors of offensive trades (Section 107, Public Health Act, 1936), viz :—

Fat melter .....	1
Rag and bone dealer .....	1
Tripe boiler, fat melter, and gut scraper .....	1

**Tents, Vans, Sheds, etc.** There are no licensed sites in the County Borough. The only problem which arises from time to time is that created by scrap dealers and others who live in caravans and park on vacant land.

**Rag Flock and Other Filling Materials.** No flock is manufactured in Northampton, but eleven premises where flock is used are registered under the Rag Flock and Other Filling Materials Act, 1951. No samples were taken.

**Pet Animals.** Eleven shops were licensed as pet shops. Each licence specifically states the types of animals allowed to be sold. The premises were visited by the public health inspectors and reported on regarding accommodation and general welfare of the animals.

**Fertilisers and Feeding Stuffs.** Due to staff shortage this work has been temporarily undertaken by the Chief Inspector of Weights and Measures.

**Rodent Control.** Two full-time rodent operatives work under the supervision of the Chief Public Health Inspector. Their advice and help are at the service of the occupier of any dwellinghouse or business premises, free of charge.

Only poisons approved by the Ministry of Agriculture, Fisheries and Food are used.

2,208 visits were made by the rodent operatives in addition to 98 visits by public health inspectors. There were 490 poison baitings and 954 rat bodies were picked up.

Table 31, in the Appendix, gives details of this work.



**Noise Abatement.** Only isolated complaints were received during the year of nuisances occurring under the Noise Abatement Act, 1960. These were either dealt with informally or the persons making the complaint were advised to take independent action where an inspector was unable to prove that a nuisance did exist.

**Offices, Shops and Railway Premises Act, 1963.** The above Act came into force during the year and a considerable amount of work has been carried out in establishing administrative procedure and registration of premises. Due to the great number of premises affected, and to avoid duplication of effort, very close liaison was established with the Fire Service.

All premises in the town likely to come within the scope of the Act were visited by the Fire Officers and registration forms distributed. The appropriate section of the registration form was then forwarded to H.M. Factory Inspector or to the Health Department. Details of premises and employees are given in Table 29, in the Appendix. It will thus be seen that 1,816 premises are contained in the Register and inspections will commence in the early part of next year. It is considered that all premises affected by the Act have now been registered.

All plans submitted to this Local Authority are inspected by a public health inspector in order that appropriate comments may be made concerning matters within the purview of the Department. This, of course, now includes the provisions of this Act and, where necessary, advice is given to the applicants.

**Staff.** Due to the shortage of public health inspectors, the Council have agreed to appoint an unqualified inspector to work in the Department. He will work under the supervision of the Chief Public Health Inspector.

**Accidents.** Six accidents were reported during the year, none of which was fatal or required further action.

**Exemptions.** One exemption from the First Aid Requirements was granted.

## APPENDIX

TABLE 23

FOOD AND DRUGS ACT, 1955	REMARKS
Curry Powder containing more than the statutorily prescribed content of lead	No action possible owing to difficulty in tracing source. Further sample satisfactory.
"Bestonik" tablets, improperly labelled	Manufacturer's observations sought.
Pork pie containing mould	No further action.
Milk containing a foreign object, believed to be a fibre milk token	No further action possible. Proceedings instituted. Case dismissed.

TABLE 23—*continued*

FOOD AND DRUGS ACT, 1955	REMARKS
A piece of sour pork containing no lean meat Date and walnut cake containing a piece of metal Sausage roll containing mould	No further action taken. Warning letter to manufacturer. Proceedings instituted. £15 fine, 3 guineas costs.
Black pudding containing mould	Warning letter to manufacturer.
Packet of breakfast cereal containing foreign matter	Warning letter to manufacturer.
Milk being sold in bottles labelled "Pasteurised" on analysis was found to be grossly under pasteurised. Also bottling was being carried out on premises not registered for that purpose	Proceedings instituted. Case dismissed.
Proprietress of a shop refused access to a Public Health Inspector	Not proceeded with. Defendant left the town.
Bottle of milk containing extraneous matter	Proceedings instituted. Fined £20.
Meat pasty found to contain mould	Warning letter to vendor.
Steak and kidney pie containing a cricket	Warning letter to manufacturer.
Pork pie containing mould	Proceedings instituted. Not proceeded with. Defendant left the town.
Cigarette smoking by a shop proprietor in the presence of unwrapped food (fish)	Proceedings instituted. Fined £1, 2 guineas costs.
Milk bottle containing extraneous matter	Warning letter to producer.
Bag of sugar containing extraneous matter	After careful investigation, no further action taken.
Sliced loaf containing a dead fly	Warning letter to manufacturer.
Milk bottle containing dirt	Warning letter to producer.
Complaint concerning the condition of pre-packed frozen poultry purchased from a local store	Warning letter sent to vendor. Letters sent to local stores re conditions to be observed in connection with the sale of poultry from refrigerated containers.

TABLE 24  
FOOD AND DRUGS. SAMPLES TAKEN FOR ANALYSIS

NATURE OF SAMPLE	FORMAL		INFORMAL	
	TOTAL NUMBER	NO. NOT GENUINE	TOTAL NUMBER	NO. NOT GENUINE
Butter .....	—	—	1	—
Buttermilk .....	—	—	1	—
Cheese, Parmesan .....	—	—	2	—
Cheese, Processed .....	—	—	6	—
Coconut, Desiccated.....	—	—	1	—
Coffee .....	—	—	2	—
Colouring .....	—	—	3	—
Confectionery, Flour .....	—	—	6	1
Cream .....	—	—	3	—
Drinking Chocolate .....	—	—	1	—
Drugs, Tonics .....	—	—	10	1
Fish .....	—	—	5	—
Flavourings .....	—	—	8	—
Fruit, Canned .....	—	—	4	—
Fruit, Dried .....	—	—	3	—
Glucose .....	—	—	1	—
Ice Lolly Syrup .....	—	—	1	—
Margarine .....	—	—	5	—
Meats and Chicken .....	—	—	6	—
Meats and Chicken, Canned .....	—	—	20	1
Milk .....	78	1	—	—
Milk, Canned.....	—	—	3	—
Milk, Condensed .....	—	—	2	—
Milk Tops .....	—	—	1	—
Pastes, Spreads, Meat and Fish ...	—	—	17	—
Pearl Barley .....	—	—	1	—
Pies, Pasties, Puddings, Meat .....	—	—	7	—
Preserves.....	—	—	9	—
Saccharin .....	—	—	1	—
Salt .....	—	—	1	—
Sauces, Spices .....	1	1	14	1
Sausages .....	—	—	6	1
Soft Drinks .....	—	—	6	—
Soups .....	—	—	2	—
Sugar .....	—	—	1	—
Table Jellies/Creams.....	—	—	5	1
Vegetables, Canned .....	—	—	5	—
Vegetables, Fresh and Dried .....	—	—	5	—
Vinegar .....	—	—	2	—
Totals .....	79	2	177	6

TABLE 25

## CARCASSES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	CATTLE EXCLUD- ING COWS	COWS	CALVES	SHEEP AND LAMBS	PIGS	HORSES	TOTALS
Number killed	6,086	1,297	659	25,498	21,939	—	55,479
Number inspected ...	6,086	1,297	659	25,498	21,939	—	55,479
<i>All diseases except Tuberculosis and Cysticerci :—</i> Whole carcasses condemned	2	1	6	7	2	—	18
Carcasses of which some part or organ was condemned .....	1,202	624	28	805	2,296	—	4,955
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci .....	19.6	48.2	5.2	3.2	11.4	—	9.0

TABLE 25—continued

	CATTLE EXCLUD- ING COWS	COWS	CALVES	SHEEP AND LAMBS	PIGS	HORSES	TOTALS
<i>Tuberculosis</i> <i>only</i> :— Whole carcasses condemned	—	—	—	—	—	—	—
Carcases of which some part or organ was condem- ned .....	31	16	1	1	436	—	485
Percentage of the number inspected af- fected with Tuberculosis	0.5	1.4	.15	.004	2.0	—	0.87
<i>Cysticercosis</i> :— Carcases of which some part or organ was condem- ned .....	37	3	—	—	—	—	40
Carcases sub- mitted to treatment by refrigeration	8	1	—	—	—	—	9
Generalised and totally con- demned .....	—	—	—	—	—	—	—

TABLE 26

## UN SOUND FOOD VOLUNTARILY SURRENDERED

NATURE OF FOOD	WEIGHT			
	TONS	CWT.	QR.	LB.
Beef, home killed .....	5	3	1	11
Mutton, home killed .....	—	11	3	6
Offal, home killed .....	18	4	0	16
Offal, imported .....	—	—	—	—
Pork, home killed .....	3	2	3	5
Veal, home killed .....	—	6	0	21
Bacon .....	—	—	—	22
Frozen Egg .....	—	—	1	0
<b>TOTAL</b> .....	<b>27</b>	<b>8</b>	<b>2</b>	<b>25</b>

8,426 tins and jars of food were also surrendered.

2,796 surrender notes were issued in connection with the above unsound food.

There were no seizures.

TABLE 27

## SUMMARY OF ROUTINE WORK OF THE PUBLIC HEALTH INSPECTORS

NATURE OF VISIT, INSPECTION, ETC.	Number of Visits, etc.
<i>General Sanitation</i>	
Water supply .....	85
Drainage .....	1487
Stables and piggeries, etc. ....	7
Offensive trades .....	0
Houses let in lodgings .....	93
Tents, vans, sheds, etc. ....	0
Factories .....	25
Workplaces .....	0
Outworkers .....	1
Public conveniences .....	0
Cinemas, theatres, etc. ....	4
Accumulations of refuse, etc. ....	42
Rodent control .....	98
Smoke abatement .....	58
Schools .....	2
Shops .....	6
Swimming baths .....	0
Canal boats .....	0
Miscellaneous sanitary visits .....	1332
Pet animals .....	24
Noise abatement .....	32
<i>Housing</i>	
Under Public Health Acts :—	
Houses inspected .....	404
Revisits .....	544
Under Housing Acts :—	
Houses inspected .....	138
Revisits .....	202
Under Rent Act, 1957:—	
Houses inspected .....	4
Revisits .....	1
Overcrowding :—	
Houses inspected .....	33
Revisits .....	7
New cases of overcrowding discovered .....	2
<i>Disinfestation</i>	
Verminous houses treated .....	7
Revisits to above houses .....	15
<i>Notifiable Diseases</i>	
Inquiries into cases .....	40
Revisits .....	6

Continued on next page.

TABLE 27—continued

NATURE OF VISIT, INSPECTION, ETC.	Number of Visits, etc.
<i>Meat and Food Inspection</i>	
Inspection of meat :—	
Visits to slaughterhouses .....	1875
Visits to shops and stalls .....	42
Visits to other premises .....	99
Visits to :—	
Restaurants, canteens, etc. ....	136
Licensed premises .....	3
Ice cream premises .....	4
Food preparing premises .....	15
Market stalls .....	19
Dairies and milk distributors .....	9
Fried fish shops .....	13
Bakehouses .....	16
Street vendors and hawkers .....	3
Retail Shops .....	326
Miscellaneous food visits .....	0
Diseases of Animals (Waste Foods) Order, 1957 .....	0
Seizure certificates issued .....	0
Surrender notes issued .....	2796
<i>Samples Taken</i>	
Food and drugs .....	192
Milk (Statutory tests) .....	208
Milk for tubercle bacilli .....	0
Ice cream .....	0
Other food for bacteriological examination .....	9
Swabs of equipment in food premises .....	0
Fertilisers and feeding stuffs .....	2
Swimming bath water .....	0
Water from Town mains .....	85
Water from wells .....	0
<i>Notices Served</i>	
Informal notices :—	
Served .....	126
Complied with .....	101
Outstanding at end of year .....	66
Statutory notices :—	
Served .....	82
Complied with .....	68
Outstanding at end of year .....	103
<i>Summary</i>	
Total number of inspections and visits .....	8127



TABLE 28

## ADMINISTRATION OF THE FACTORIES ACT, 1937

1.—*Inspections made by the Public Health Inspectors for purposes of provisions as to health*

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
Factories in which Sections 1, 2, 3, 4, and 6 are enforced by the Local Authority ...	32	—	—	—
Factories not included above in which Section 7 is enforced by the Local Authority .....	647	25	—	—
Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises, but including electrical stations, institutions, and sites of building operations and works of engineering construction) .....	7	2	—	—
<b>TOTALS</b> .....	<b>686</b>	<b>27</b>	<b>—</b>	<b>—</b>

TABLE 28—continued

## 2.—Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3) .....	—	—	—	—	—
Inadequate ventilation (S.4) .....	—	—	—	—	—
Ineffective drainage of floors (S.6) .....	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient .....	—	—	—	—	—
(b) Unsuitable or defective .....	7	7	—	2	—
(c) Not separate for sexes .....	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) .....	—	—	—	—	—
<b>TOTALS</b> .....	7	7	—	2	—

## 3.—Outwork (Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of outworkers in August list	Cases of default in sending lists	Prosecutions for failure to supply lists	Instances of work in unwholesome premises	Notices served	Prosecutions
Making, etc., of wearing apparel	63	—	—	—	—	—
<b>TOTALS</b> .....	63	—	—	—	—	—

## OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

TABLE 29

## REGISTRATIONS AND GENERAL INSPECTIONS

(1) Class of Premises	(2) No. of premises registered during year	(3) Total No. of registered premises at end of year	(4) No. of registered premises receiving a general inspection during the year
Offices	651	651	1
Retail shops	916	915	
Wholesale shops, warehouses	131	131	
Catering establishments and canteens	114	114	
Fuel storage depots	5	5	

Visits of all kinds by Inspectors to Registered Premises

5

TABLE 30

## ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

(1) Class of Workplace	(2) No. of Persons Employed
Offices	5,893
Retail shops	5,255
Wholesale departments	1,569
Catering establishments	1,166
Canteens	65
Fuel storage depots	37
Total	13,985
Total males	6,438
Total females	7,547

Prosecutions

Nil

No. of Inspectors appointed under Section 52 of the Act

7

No. of other staff employed for most of their time on work in connection with the Act

Nil

**TABLE 31**  
**PREVENTION OF DAMAGE BY PESTS ACT, 1949**

	TYPE OF PROPERTY			
	(1) Local Authority	(2) Dwelling Houses (including Council Houses)	(3) All Other (including Business) Premises	(4) Total
Total number of properties inspected as a result of notification	21	301	86	408
Number of such properties found to be infested by:—				
Rats	19	261	61	341
Mice	2	40	25	67
Total inspections carried out—including re-inspections	77	1,424	707	2,208
Number of infested properties treated	21	301	86	408
Total treatments carried out—including re-treatments	51	949	471	1,471

### DOMICILIARY AND OTHER SERVICES

**Treatment Centres and Clinics.** A list is given below of clinics, etc., in Northampton County Borough on 31st December, 1964 :—

**DENTAL CLINIC**

School Clinic, King Street. By appointment.

**EYE CLINIC**

School Clinic, King Street. By appointment.

\* **ORTHOPTIC CLINIC**

Northampton General Hospital. School cases referred by Ophthalmic Surgeon.

\* **EAR NOSE AND THROAT CLINIC**

Northampton General Hospital. By appointment.

\* **ORTHOPÆDIC CLINIC**

Northampton General Hospital. By appointment.

**SPEECH CLINIC**

28 Billing Road. By appointment.

**CHILD GUIDANCE CLINIC**

28 Billing Road. By appointment.

\* **CHEST CLINIC (TUBERCULOSIS)**

Chest Clinic, 11 St. Matthew's Parade.

Routine sessions: Tuesdays, Wednesdays and Fridays from 9 a.m. to 12.30 p.m. and 2 to 4 p.m. and Mondays from 2 to 4 p.m.

Session for workers: Mondays from 5.30 to 7 p.m.

Sessions for diagnosis cases: Tuesdays, Wednesdays and Fridays from 9 a.m. to 12.30 p.m.

Sessions for contacts, etc.: Tuesdays, Wednesdays and Fridays from 2 to 4 p.m.

Session for B.C.G. vaccinations: Fridays from 2 to 4 p.m.

Sessions for miniature X-ray examination (to which any member of the public can be admitted) :—

Tuesdays, 11.15 a.m. to 12.15 p.m.

Wednesdays, 6 to 7.30 p.m.

Fridays, 9 to 10 a.m.

Domiciliary visits: By arrangement with the Consultant Chest Physician.

\* **VENEREAL DISEASES**

Treatment Centre, Northampton General Hospital.

Males—Wednesdays 2 to 3 p.m.; Fridays 5 to 6.30 p.m.

Females—Mondays 5.15 to 6.30 p.m.; Fridays 2.15 to 3.30 p.m.

\* Clinics under the control of the Northampton and District Hospital Management Committee.

**Home Nursing.** This service is provided by the Northampton Branch of the Queen's Institute of District Nursing on behalf of the Council under Section 25 of the National Health Service Act, 1946. There were 11 whole-time and 7 part-time nurses on the staff at the end of the year.

Total number of cases .....	891
Total number of visits by nurses .....	45,713
Number of injections given .....	16,800
Number of visits to persons over 65 years of age .....	34,314
Number of visits to children aged five years and under .....	60

**Health Education.** In accordance with the Minister's request in paragraph (7) of circular 1/64, the following information is given relative to health education:—

Mothers attending child welfare clinics are instructed and advised by doctors and health visitors of the Health Department staff on a variety of health education subjects.

Lectures and talks are also given by members of the staff for the benefit of groups of interested persons or organisations.

**Chiropody Service.** The Northampton Old People's Welfare Voluntary Committee provide this service on an agency basis for this County Borough. The service is confined to elderly people who receive four treatments per year.

The Chiropodist's fee is 9s. 0d. per treatment at the surgery, the recipient paying 3s. 0d. and the Local Authority paying the remaining 6s. 0d. Domiciliary treatment costs 15s. 0d., the patient paying 5s. 0d. and the Authority 10s. 0d.

Each patient must consult his or her own doctor in the first instance and accept his advice as to the necessity for chiropody treatment.

During the year there has been no major development in the service, but since its inception in April 1960, it has gradually expanded as the following table illustrates:—

Year	Number of Elderly Persons Treated
1961	736
1962	785
1963	786
1964	880

An arrangement is also in being between local chiropodists and the Local Authority whereby expectant mothers pay the full charge subject to this being waived or reduced in any individual cases where hardship can be proved.

**Ambulance Service.** This service is undertaken on behalf of the Health Committee by the Watch and Fire Service Committee and the officer in charge is the Chief Fire Officer. The service covers infectious disease cases as well as general ambulance work and accidents and the following summarises the work carried out:—

	AMBULANCES	CARS	TOTALS
Vehicles on 31/12/64 .....	10	1	11
Journeys .....	11,455	8,671	20,126
Patients carried .....	23,801	21,682	45,483
Accidents and other emergency journeys included above .....	1,176	237	1,413
Total mileage .....	79,939	80,207	160,146

Of the total mileage of 160,146, journeys within the County Borough amounted to 112,565 miles and those to destinations outside to 47,581. There were 426 journeys of 50 miles or more which accounted for 40,576 miles of the 47,581.

The 1964 mileage of 160,146 compares with 141,944 in 1963.

The average monthly mileage in 1964 was 13,345, compared with 11,829, in 1963.

On 31st December, 1964, the paid whole-time drivers and attendants numbered 17, plus one Ambulance Station Officer.

Three of the ten ambulances mentioned above can be used either as ambulances or as sitting case cars.

Whenever possible, railway facilities were used for the longer journeys. There were 49 such journeys in 1964, totalling 4,757 miles.

There were 395 persons conveyed by motor ambulance or sitting case car at the request of the Ministry of Pensions or the Ministry of Health to artificial limb and appliance centres, mainly at Leicester, involving 78 journeys and a mileage of 6,006.

**Convalescence.** In accordance with the Council's scheme under Section 28 of the National Health Service Act, 1946, four persons each received recuperative convalescence for two weeks. They were assessed to contribute towards the cost according to their means. Cases were sent to the following homes :—

Hertfordshire Sea-side Convalescent Home, St. Leonard's-on-Sea .....	1
St. Joseph's Convalescent Home, Bournemouth .....	1
Lloyd Memorial Convalescent Home, Deal .....	1
"The Armitage," Worthing .....	1

**Nursing Homes.** On 31st December, 1964, five nursing homes were on the register kept under Section 187 of the Public Health Act, 1936, *viz.*:—

HOME	REGISTERED FOR
St. Matthew's Nursing Home, 29/31 St. Matthew's Parade	22 patients (not more than 4 to be maternity cases)
London Adoption Society, "Elmleigh," 114 Harlestone Road	16 maternity patients
"Parkdale" Nursing Home, 475/477 Wellingborough Road	14 patients
Abington Park Nursing Home, 435/437 Wellingborough Road	12 patients
St. Saviour's Home, 103 Harlestone Road	15 maternity patients

**Domestic Help.** The following information relates to the working of the Domestic Help Scheme under Section 29 of the National Health Service Act, 1946 :—

Administrative staff on 31st December, 1964 :—

Organiser .....	1	}	2
Clerk .....	1		

Home helps employed on 31st December, 1964 :—

Whole time (permanent staff) .....	4	}	72
Part time (temporary staff) .....	70		

Cases helped :—

Maternity (including expectant mothers) ...	66	}	537
Tuberculosis .....	1		
Chronic sick .....	185		
Elderly.....	211		
Registered blind .....	25		
Acute illness and others .....	49		

Visits by Organiser .....

387

Under the approved scheme, help can be provided for households where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age. Application is made to the Medical Officer of Health. Charges appropriate to the means of the user are made in accordance with a local scale.

**Children's Homes, etc.** The following work was performed by the Health Department for the Children Committee :—

Visits by Medical Officers to Children's Homes .....	12
Number of examinations of children in Homes .....	134



## WELFARE

MISS V. M. HARRISON, A.I.S.W., *Welfare Officer*

Comprehensive welfare services are provided under the National Assistance Act, 1948.

The responsibilities of the Local Authority fall under four main headings:—

- (1) Residential accommodation for the aged and infirm and physically handicapped persons.
- (2) Welfare services for blind and partially sighted persons.
- (3) Welfare services for deaf and dumb persons.
- (4) Welfare services for other physically handicapped persons.

Implementation of these services brings social welfare officers in touch with hundreds of elderly or handicapped persons and others who are in difficulties.

### **Residential Accommodation**

At the present time there are six residential Homes for the Elderly, one of which is being extended to accommodate more residents. These Homes, however, do not meet the present needs and the waiting list is constantly growing. The policy of the Council is to provide one additional Home each year, but the land available within the Borough for such projects is very limited. The great need at the moment is to provide a Home for the more infirm, this means more specialised accommodation and a greater number of staff than in the present Homes.

The residents greatly enjoy the monetary gifts and outings (made possible by the Northampton Borough Voluntary Social Committee) and also the shows, concerts, visits to pantomimes, circuses and outings made possible by people of all ages who give up their valuable time to entertain and transport them.

### **Blind and Partially Sighted Persons**

Blind persons and partially sighted persons enjoy comprehensive welfare services. In addition to home visitation, advice and help is given on problems of employment, rehabilitation and domestic matters. Instruction is given in Braille, Moon and handicrafts and there is provision for a free Braille and Talking Book Library Service. Help is also given in obtaining specialised apparatus.

The Northamptonshire Town & County Association for the Blind run two Homes, one for women at "Darsdale", Raunds, and the other for both men and women at "Wardington Court", Northampton. They also run a workshop on behalf of the Local Authority employing 31 blind, 9 sighted and 2 sighted/disabled persons.

### **Deaf, Dumb Persons**

The welfare services for the deaf or dumb are carried out on behalf of the Local Authority by the Northamptonshire and Rutland Mission to the Deaf.

### **Physically Handicapped Persons**

It is hoped that the Centre for the Physically Handicapped in Gladstone Road will be completed by the end of 1965. This is a combined effort between the many voluntary bodies and the Local Authority and will serve a long-standing need as a meeting place open each day of the week for all those who are physically handicapped. The Local Authority is financing the building and basic equipment. A special fund from voluntary sources will go towards additional equipment and specialised items.

During the year the Council, jointly with the Ministry of Health, have provided garage facilities for severely handicapped persons. The Council has also paid for structural alterations to enable handicapped persons concerned to live more independently in their own homes. Another service greatly appreciated is the advice given by social welfare officers on the gadgets and equipment available, which make for greater independence.

The work of the Local Authority would not be so effective without the help of voluntary bodies.

The Women's Voluntary Service run the Meals-on-Wheels service on behalf of the Local Authority and this enables elderly people to have at least two hot meals a week. It is hoped in the future to provide meals more often.

The Northampton Council of Social Service, with the help of a grant from the Local Authority, operate a chiropody service for the elderly which is invaluable, often enabling some to continue living in their own homes.

A more recent project by the Council of Social Service has been the running of a Work Centre for the Elderly in the former licensed premises "Britannia Inn", Lady's Lane.

In due course it will be necessary to find other premises and the Local Authority is hoping to provide a suitable site for the erection of a purpose-built Work Centre with Northampton Council of Social Service meeting the capital cost of erecting and equipping the Centre.

Homeless families are not such a problem in Northampton as in some Authorities, nevertheless it has been agreed that a new approach be made to the problem of rehabilitating homeless and problem families; by the Health Committee acquiring tenancies of some substandard houses for housing selected families under the supervision of the Medical Officer of Health. It is hoped to appoint a family caseworker for this task. When these properties become available, Whiston Road Home will no longer be used for the accommodation of problem families.

The majority of people coming to the notice of the Department are anxious to remain in their own homes and it is the aim of the Welfare Department to make this possible. This can only be achieved with the help of the voluntary organisations plus extended services, e.g. Meals-on-Wheels, Home Help services, the opening of Day Centres, etc. If this ideal was attained it would then only be necessary to provide residential accommodation for the more infirm.

## RESIDENTIAL ACCOMMODATION

**(1) Provided by the Local Authority**

(a) **KINGS HEATH HOME OF REST.** This Home, built specially for elderly persons, provides accommodation for 33 (16 men and 17 women).

On 31st December, 1964, 33 persons (16 men and 17 women) were in residence.

(b) **"BARNFIELD," 127 HARLESTONE ROAD.** This Home provides accommodation for 26 aged persons (13 men and 13 women).

On 31st December, 1964, 25 persons (12 men and 13 women) were in residence.

(c) **"THE PRIORY," 260 BILLING ROAD EAST.** This Home provides accommodation for 24 men.

On 31st December, 1964, 24 men were in residence.

(d) **"NICHOLLS HOUSE," 9, 10 AND 11 ST. GEORGE'S AVENUE.** This home provides accommodation for 38 aged persons (18 men and 20 women).

On 31st December, 1964, 37 persons (18 men and 19 women) were in residence.

(e) **"HILLCREST," 67 AND 69 QUEEN'S PARK PARADE.** This home provides accommodation for 51 aged persons (16 men and 35 women).

On 31st December, 1964, 49 persons (15 men and 34 women) were in residence.

(f) **"LALGATES," 119 HARLESTONE ROAD.** The house stands in approximately two acres of ground and when extensions are made it is hoped to accommodate 55 aged persons of either sex.

On 31st December, 1964, 10 women were in residence.

(g) **GENERAL.** The standard charge at these homes is £6 11s. 3d. per week.

The residents are encouraged to work and provision is made for them to receive a monetary recompense not exceeding 10s. 6d. per week.

A chiropody service is available free of charge to residents.

(h) **WAITING LIST FOR RESIDENTIAL ACCOMMODATION.** On 31st December, 1964, 55 men and 94 women (total 149) were awaiting admission to Residential Accommodation. 28 of these were at St. Crispin Hospital, 35 at St. Edmund's Hospital, 12 in other hospitals, and 74 at home.

**(2) Provided (not directly) by Local Authority**

(a) **NAZARETH HOUSE.** This Home is situated in Northampton.

Arrangements are in operation whereby eighteen beds are available. The County Borough Council pay an agreed sum per resident per week, less payments made by the residents.

Five men and twelve women were in residence under this scheme on 31st December, 1964.

## (b) OLD PERSONS' HOMES OUTSIDE NORTHAMPTON.

On 31st December, 1964, the Council had undertaken financial responsibility for residents in the following homes:—

	MALES	FEMALES	TOTALS
Danetre Hospital, Daventry .....	3	—	3
Salvation Army Home, Netherfield House, Stanstead Abbots .....	1	—	1
Eileen Goodenday House, London, S.W.5	1	—	1
Pentecostal Eventide Home, Ripon, Yorks.	—	1	1
“Rossmore,” Leamington Spa .....	—	1	1
St. John's Convalescent Home, Weston Favell .....	1	2	3
Totals .....	<u>6</u>	<u>4</u>	<u>10</u>

(c) SPECIAL ACCOMMODATION. On 31st December, 1964, the Council had accepted responsibility for handicapped persons in the following homes:—

	MALES	FEMALES	TOTALS
“Wardington Court” Home for the Blind, Northampton .....	3	1	4
David Lewis Manchester Epileptic Colony .....	—	1	1
Amphill Cheshire Home .....	—	1	1
Chalfont Epileptic Colony, Chalfont St. Peter, Bucks. ....	—	1	1
“Crossway,” Edgbaston, Birmingham ...	—	1	1
Totals .....	<u>3</u>	<u>5</u>	<u>8</u>

## (3) Private

A list is given below of residential accommodation in Northampton for elderly and handicapped persons:—

HOME	ACCOMMODATION
Nazareth House, 116 Harlestone Rd.	82 old persons, either sex
Oakwood Home, 8 The Drive .....	14 old persons, either sex
“Roseland,” 41 Park Avenue South	12 old persons, either sex
St. Christopher's, Abington Park Crescent .....	33 old persons, either sex
St. George's Homestead, 25/26 St. George's Avenue .....	22 aged women
“The Briers,” 69 Collingwood Road	9 old persons, either sex
“Wardington Court” Home for the Blind, Welford Road .....	20 disabled and old persons, either sex
Parkway Geriatric Home, 133/135 Birchfield Road .....	15 aged persons, either sex
“The Ingle,” 25 Abington Park Crescent .....	9 aged persons, either sex
“Lynwood,” 144 Kingsthorpe Grove	6 persons, either sex
“Springfields,” 45 Queen's Park Parade .....	10 persons either sex

These eleven homes, with accommodation for 232 persons, are all registered under Section 37 of the National Assistance Act, 1948.

Two other homes are exempt from registration, viz :

HOME	ACCOMMODATION
Bethany Homestead, Kingsley Road	In cottages: 40 persons In nursing home and rest rooms: 46 persons
Methodist Homestead, Homestead Way .....	In cottages: 20 persons

There is thus residential accommodation in these two homesteads for 106 persons.

Accommodation for short periods is also available at St. John's Convalescent Home, Weston Favell, Northampton.

#### Total Residential Accommodation

(1) Provided by the Local Authority	182
(2) Provided (not directly) by the Local Authority	36
(3) Private	316 *
TOTAL ... ..	534

\*Excludes 22 already counted in (2).

**Temporary Accommodation.** The following temporary accommodation is provided under Section 21 (i) (b) of the National Assistance Act, 1948:—

**WHISTON ROAD HOME.** This Home provides temporary accommodation for mothers and children. Every effort is made to rehabilitate these families and all the domestic work, cooking, laundry, etc., is done by the mothers under the supervision of a Superintendent and Assistant Superintendent.

The number of mothers and children accommodated throughout the year fluctuated from a maximum of 21 to a minimum of 4.

On 31st December, 1964, 3 mothers and 4 children were in residence.

#### DEAF AND DUMB PERSONS

A scheme for the provision of welfare services for the deaf or dumb was approved by the Minister of Health in 1955. The Northamptonshire and Rutland Mission to the Deaf carry out these duties on an agency basis for the Local Authority.

The persons to whom the scheme applies can be divided into three groups, viz :—

- (1) *Deaf without speech.* Those who have no useful hearing and whose normal method of communication is by signs, finger spelling or writing.
- (2) *Deaf with speech.* Those who (even with a hearing aid) have little or no useful hearing but whose normal method of communication is by speech and lip-reading.

- (3) *Hard of hearing.* Those who (with or without a hearing aid) have some useful hearing and whose normal method of communication is by speech, listening and lip-reading.

Registration is voluntary. The numbers on the registers on 31st December, 1964, were as follows :—

	MALES	FEMALES	TOTALS
Deaf without speech .....	23	25	48
Deaf with speech .....	4	2	6
Hard of hearing .....	4	7	11
	—	—	—
Totals .....	31	34	65
	—	—	—

In a statement supplied by the Chaplain-Secretary of the Northants. and Rutland Mission to the Deaf the following activities are recorded as having been carried out by the Mission:—

As most of the deaf persons resident in the County Borough attended the Mission building regularly, some as often as three times a week, no regular visitation was done except for a special reason. Those unable to attend were visited on an average of once a month, and more frequently when necessary.

Church Services were held twice on Sundays. The evening service is usually followed by tea, television viewing, etc.

A Social Club was held twice weekly, on Wednesdays and Saturdays.

A Deaf-Blind Social was held once a month.

A Whist Drive was also held twice a month, with some "hearing" players present to help in the play.

There have been five large parties during the year, and four trips to various places.

Guides and transport were provided where necessary in connection with all the above functions.

Help in interpreting, etc., was provided for deaf persons at doctors' and dentists' surgeries, hospitals, etc.

The Hard of Hearing Club has met twice a month since June and will continue.

Lip-reading classes were held twice monthly during November and December and will be continued.

#### HANDICAPPED PERSONS

A scheme for the provision of services for handicapped persons other than the blind, partially sighted and deaf and dumb was approved by the Minister of Health in 1961. A register of handicapped persons has been compiled and on 31st December, 1964, there were 178 names (91 males, 87 females) on the register.

The Centre for the Physically Handicapped in Gladstone Road was commenced during the year. The estimated cost of the building is £93,900 plus £8,000 for furniture and equipment. Certain specialist equipment will be met from the Trust Fund raised to establish the Centre. It is hoped that the Centre will be ready for use by the end of 1965.

### CAR BADGES FOR SEVERELY DISABLED DRIVERS

Arrangements have been made, in accordance with Ministry of Health Circular 17/61, for the issue of badges to identify the vehicles of severely disabled drivers.

The following drivers may be regarded as eligible to participate in the Scheme :

- (a) Drivers of invalid vehicles supplied by the Ministry of Health ;
- (b) Drivers of vehicles specially adapted for persons with defects of locomotion ; and
- (c) Drivers with amputations which cause considerable difficulty in walking or who suffer from a defect of the spine or central nervous system which makes control of the lower limbs difficult.

At the end of 1964, ten badges were in current use.

**Epileptics.** Sixteen are known to this Department:—

	MALES	FEMALES	TOTALS
In Colonies .....	—	2	2
In Residential Accommodation .....	2	1	3
School children ( <i>See</i> page 94) .....	5	3	8
On register of handicapped persons .....	3	—	3
	—	—	—
Totals .....	10	6	16
	—	—	—

**Meals for the Elderly.** The “ meals on wheels ” service was inaugurated in September, 1950. The Women’s Voluntary Services, on behalf of the Local Authority, deliver the meals on five days a week— Mondays to Fridays. Different areas are served on the five days, thus enabling more old people to participate. The recipients paid 1/- per meal and the Local Authority subsidised to the extent of 1s. 3d.

9,270 meals were served during 1964, and the cost to the Local Authority was £579 7s. 6d.

**Persons in Need of Care and Attention.** It was necessary in one case to take action under Section 47 of the National Assistance Act, 1948.

**Burial of the Dead.** It was necessary for the Local Authority to arrange six burials in accordance with Section 50 of the National Assistance Act, 1948. One was a full charge and one a part charge on the Local Authority but in the other four cases the full costs were recovered.

**Admissions to Mother and Baby Homes.** 3 applications for admission to mother and baby homes under Section 21, National Assistance Act, 1948, and Section 22, National Health Service Act, 1946, were received and financial responsibility accepted for admission. Applicants are assessed to contribute toward the cost.

**Temporary Protection of Property.** A store at "The Priory" has been provided to meet the obligations of the Local Authority to take reasonable steps to prevent or mitigate loss or damage to movable property of persons admitted to hospital, etc.

These premises are also utilised for the storage of bedsteads, bedding, etc., in connection with temporary accommodation to meet exceptional circumstances, such as flooding, or to provide shelter for other persons in urgent need in circumstances which cannot reasonably be foreseen.

#### BLIND AND PARTIALLY SIGHTED PERSONS

A "blind person" is defined as a person so blind as to be unable to perform any work for which eyesight is essential. At the end of 1964 the number of blind persons registered in Northampton County Borough was 265, classified as follows:—

	MALES	FEMALES	TOTALS
In Sunshine Home .....	—	—	—
At schools for the blind .....	3	—	3
In homes for the blind .....	3	2	5
In other residential accommodation .....	3	13	16
In psychiatric hospitals .....	3	3	6
In other hospitals .....	2	12	14
Mentally disordered persons at home ...	—	—	—
Employed in open industry .....	12	1	13
Employed in sheltered industry .....	16	8	24
Unemployed but capable of and available for work .....	3	1	4
Not available for employment .....	53	124	177
Children under school age .....	2	1	3
Totals .....	100	165	265

7 of the above were trained at St. Dunstan's and 39 were registered under the Disabled Persons (Employment) Act, 1944.

50 men and 123 women (total 173) were over sixty-five years of age.

20 persons were newly registered as blind during 1964 after examination and certification by an ophthalmologist of consultant status. Registration is voluntary.

**Partially Sighted Persons.** Persons appropriate for designation as "partially sighted" are those who, although not blind within the meaning of the Act, 1948, are nevertheless certified after examination to be substantially and permanently handicapped by congenital defective vision; or to be suffering from defective vision of a substantial and permanently handicapping character caused by illness or injury; or, in the case of children, to have such bad vision that they cannot follow the ordinary school curriculum without detriment to their sight or to their educational development, but they can be educated by special methods involving the use of sight.



In the approved scheme provision was made for the promotion of the welfare of partially sighted persons. Admission to the register is dependent upon a certificate from a consultant ophthalmologist. Registration is voluntary. The register contained the names of 35 persons on 31st December, 1964, made up as follows:—

	MALES	FEMALES	TOTALS
Class A—Persons near and prospectively blind (aged 16 years and over) .....	6	12	18
Class B — Persons mainly industrially handicapped (16 years and over) ...	4	5	9
Class C—Persons requiring observation only (16 years and over) .....	3	3	6
Class D — Children aged 5 and under 16 years .....	1	1	2
	—	—	—
Totals .....	14	21	35
	—	—	—

Nine of the above persons were newly registered as partially sighted during 1964. Table 34 on page 80 shews, in age groups, the number of newly registered partially sighted persons since 1952.

**Handicraft Class.** A Handicraft Class for the blind and partially sighted is held on Thursday afternoons at St. Michael's Church Rooms, at which there was an average attendance of 45. One half-day outing to Burnham Beeches was arranged during the year for persons attending the class. An annual party was also held.

**Holiday Scheme.** Under the Holiday Scheme to assist blind and partially sighted persons in taking a holiday, 27 blind and partially sighted persons and 18 guides spent a very enjoyable week at Weymouth during May, 1964. Financial assistance was provided if requested and 22 persons were helped in this way. The Northamptonshire Town and County Association for the Blind contribute half towards the deficit.

**Incidence of Blindness.** Two notifications of ophthalmia neonatorum were received in 1964.

TABLE 32

## REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

Number of new cases registered during the year in respect of which Section F of Form B.D.8 recommends :— (a) No treatment (b) Treatment (medical, surgical, or optical)	CAUSE OF DISABILITY			
	CATARACT	GLAUCOMA	RETROLENTAL FIBROPLASIA	OTHERS
(a) No treatment	5	—	—	10
(b) Treatment (medical, surgical, or optical)	4	—	—	1
Number of cases at (b) above which on follow-up action have received treatment .....	—	—	—	—

Table 32<sup>3</sup> shews the number of blind and partially sighted persons registered since blind welfare was undertaken by the Local Authority and Table 32<sup>4</sup> shews, in age groups, the numbers of new registrations since 1950.

TABLE 33

## INCIDENCE OF BLINDNESS

1949—1964

PERIOD ENDING	NUMBER OF NAMES ON REGISTERS	
	BLIND	PARTIALLY SIGHTED
31-3-49	198	—
31-3-50	203	—
31-3-51	224	—
31-3-52	222	7
31-12-52	232	14
31-12-53	239	13
31-12-54	248	26
31-12-55	254	29
31-12-56	262	36
31-12-57	268	38
31-12-58	276	37
31-12-59	288	38
31-12-60	290	34
31-12-61	281	31
31-12-62	278	34
31-12-63	282	35
31-12-64	265	35

TABLE 34

## AGE GROUPS OF NEW REGISTRATIONS OF BLIND AND PARTIALLY SIGHTED PERSONS

1950—1964

PERIOD ENDING	AGE GROUPS								TOTALS	
	0-15		16-49		50-64		65+		B.	P.S.
	B.	P.S.	B.	P.S.	B.	P.S.	B.	P.S.		
31-3-50	1	—	2	—	3	—	13	—	19	—
31-3-51	2	—	2	—	3	—	24	—	31	—
31-3-52	2	—	—	—	5	—	17	—	24	—
31-12-52	—	—	—	2	4	3	10	3	14	8
31-12-53	1	—	1	—	3	1	20	3	25	4
31-12-54	—	1	—	1	9	2	25	11	34	15
31-12-55	—	1	—	—	2	—	26	7	28	8
31-12-56	1	4	2	1	1	1	29	3	33	9
31-12-57	1	1	2	1	1	1	26	5	30	8
31-12-58	1	—	—	1	4	—	30	4	35	5
31-12-59	—	—	2	1	2	—	26	6	30	7
31-12-60	2	—	3	1	3	—	21	2	29	3
31-12-61	1	—	4	1	10	1	18	4	33	6
31-12-62	4	3	1	—	2	1	22	2	29	6
31-12-63	1	—	—	1	1	2	29	6	31	9
31-12-64	1	—	2	3	7	1	10	5	20	9

B.—Blind. P.S.—Partially Sighted.

Note: Registration of partially sighted persons did not commence until 1952.

NORTHAMPTON COUNTY BOROUGH  
EDUCATION COMMITTEE



THE  
SCHOOL HEALTH  
OF  
NORTHAMPTON  
1964

WILLIAM EDGAR, M.B., CH.B., D.P.H., D.C.H.

*Principal School Medical Officer*

WORTHINGTON COUNTY EDUCATIONAL DISTRICT



THE  
SCHOOL HEALTH  
OR  
NORTHAMPTON  
1964

WORTHINGTON COUNTY EDUCATIONAL DISTRICT  
1964

## THE SCHOOL HEALTH SERVICE

This Service owes its origin to the poor physical health of school children at the beginning of this century. In 1907 the Education (Administrative Provision) Act made it obligatory for every Local Education Authority to inaugurate a system of medical inspections of school children. The physical health of school children has now greatly improved and in Northampton has never been better. Approximately 5,000 school children were examined during the year of whom 99.5% were classified as "satisfactory" under the heading "physical condition." School children were also found to be cleaner than ever before and the incidence of infestation (0.7%) was extremely low. Notifications of infectious diseases among school children numbered 261 compared with 417 in 1963; measles 28, german measles 5, mumps 55, chickenpox 153, scarlet fever 10 and whooping cough 10. During the year 54 school children attended the School Clinic with plantar warts compared with 79 in 1963. This decrease is possibly the result of an intensive foot hygiene campaign by school doctors and nurses during the previous year.

There were three deaths amongst school children compared with six in 1963. The causes of death were carbon monoxide poisoning (accidental), leukaemia and lymphosarcoma.

Under the terms of circular 249 of the Ministry of Education, the school medical officers examined 101 entrants to courses of training for teachers and for the teaching profession and a further 96 persons were examined in connection with major awards.

The new Northgate School for E.S.N. pupils, which absorbed the waiting list of 24 children in 1963, was full during the year and a short waiting list had appeared at the end of 1964.

School medical officers examined and ascertained 82 children with the following recommendations—20 were recommended for and admitted to Northgate School, 4 were recommended for residential E.S.N. schooling and 7 were admitted to the Junior Training Centre.

During the year three lady doctors from the Department gave 25 lectures on sex biology to girl school leavers. It is hoped in the future to incorporate these lectures in the wider field of general health education.

One disquieting feature was our inability to fill the post of speech therapist, vacant since October 1963. This probably reflects the national shortage.

The number of children referred to the Child Guidance Clinic by the School Health Service was 13. This low figure is due to the fact that referral to child guidance is made via many channels, e.g., teachers, probation officers, general practitioners and parents, who may approach the Child Guidance Clinic directly without referral to the Principal School Medical Officer.

The School Health Service continued to work closely with the general practitioner and hospital services. In consultation with the Local Medical Committee, the general practitioner is sent a brief résumé of each school leaver's medical history and a record of all immunisations and vaccinations carried out during school life. The final school medical inspection which includes colour vision testing has been extended to include B.P. readings and urine analysis.

During the year school medical officers attended clinics and case conferences at Northampton General Hospital and a close liaison was maintained with hospital medical staff.

Continued difficulty was experienced in finding suitable residential placements for maladjusted and E.S.N. pupils. This again represents a national shortage of this type of provision.

It is pleasing to conclude this preface by referring to the Committee's decision to establish during the coming financial year a special integrated unit for partially hearing children at Vernon Terrace School. This will enable many children with partial hearing to remain in the security of their own homes. Heretofore it was necessary for young children with partial loss of hearing to attend special residential schools in the London or Birmingham areas. The principle of a special integrated unit is experimental and, if successful, may well be extended to other special groups.

I wish to record my appreciation of the assistance and consideration received from members of the teaching staffs in the schools, without whose co-operation the School Health Service could not hope to function. I am indebted to my deputy, Dr. J. J. Holloway, for the preparation of this Report.

WILLIAM EDGAR,

*Principal School Medical Officer.*

HEALTH DEPARTMENT,  
GUILDHALL,  
NORTHAMPTON.  
*March, 1965.*

Telephone : Northampton 34881.

**EDUCATION COMMITTEE**  
(as constituted on 31st December, 1964)

---

*Chairman*

ALDERMAN F. TOLLIT

*Deputy-Chairman*

ALDERMAN ARTHUR L. CHOWN

*Aldermen*

J. V. COLLIER, O.B.E., J.P.  
MRS. K. M. GIBBS  
G. J. HACKETT  
G. NUTT

*Councillors*

R. P. DILLEIGH  
T. H. DOCKRELL, M.B., F.R.C.S.I.  
R. P. DOLMAN  
H. FRUISH  
R. GREGSON  
R. S. HORSLEY  
S. T. KINCH  
MRS. J. C. KNIGHT, M.B.E.  
A. T. MELLOR  
D. A. WALMSLEY

*Co-opted Members*

MRS. E. M. COLLIER  
MRS. M. A. HACKETT  
MISS P. HENNINGS, M.B.E., B.A.  
MR. S. W. HUTCHINS  
MRS. F. K. SMITH  
MR. R. SPENCER

---

**Primary Education and Special Services Sub-Committee**

ALDERMAN MRS. GIBBS (*Chairman*); ALDERMEN COLLIER and TOLLIT;  
COUNCILLOR DOCKRELL; MRS. COLLIER, MRS. HACKETT, MR. HUTCHINS,  
MRS. SMITH and MR. SPENCER.



## STAFF OF SCHOOL HEALTH SERVICE, 1964

<i>Principal School Medical Officer</i>	...	CARRICK G. PAYTON, M.D. CH.B., D.P.H. (Retired 2/5/64)
		WILLIAM EDGAR M.B., CH.B., D.P.H., D.C.H. (Commenced 4/5/64)
<i>Deputy Principal School Medical Officer</i>	... ..	JOHN J. HOLLOWAY, M.B., B.CH., L.M., D.P.H.
<i>School Medical Officers</i>	... ..	MARGARET O'CONNOR, L.R.C.P., L.R.C.S. EILEEN L. PARKINSON, M.R.C.S., L.R.C.P. JAMES W. BOTTOMS, M.B., B.S., M.R.C.S., L.R.C.P. RONALD H. MARTIN, M.A., B.M., B.CH., M.R.C.S., L.R.C.P.
<i>Principal School Dental Officer</i>	...	P. W. J. L. THOMPSON, L.D.S., R.C.S.
<i>Dental Officer</i>	... ..	MRS. L. A. B. ELLIOTT, L.D.S., R.C.S.
<i>Dental Auxiliary</i>	... ..	1 DENTAL AUXILIARY
<i>Consultant Psychiatrist*</i>	... ..	K. STEWART, M.B., CH.B., D.C.H., D.P.M.
<i>Educational Psychologist*</i>	... ..	MISS D. V. SCOTT, M.A.
<i>Assistant Educational Psychologist*</i>		V. M. CROWLEY
<i>Social Worker*</i>	... ..	F. D. PAYNE
<i>Speech Therapist</i>	... ..	VACANT
<i>Clerks</i>	... ..	C. A. JONES ( <i>Senior Clerk</i> ) 2 CLERKS
<i>Dental Surgery Assistants</i>	... ..	3 ASSISTANTS

\* Under a joint scheme with Northamptonshire Education Authority.  
Health Visitors and Clinic Nurses (*see page 33*) give part-time assistance in the school health service under a co-ordinated scheme.

## GENERAL INFORMATION, 1964

Home Population at all Ages (estimated at 30th June, 1964) ... 106,120

Estimated Child Population (30th June, 1964) :—

Under 1 year	...	...	...	...	...	...	2,100
1—4 years inclusive	...	...	...	...	...	...	7,100
5—14 years inclusive	...	...	...	...	...	...	14,300

Total under 15 years	...	...	...	...	...	...	23,500
----------------------	-----	-----	-----	-----	-----	-----	--------

## PRIMARY SCHOOLS

*Number on Roll*

Number of Schools	...	...	...	...	...	24
Number of Departments	...	...	...	...	...	33
Number on Roll	...	...	...	...	...	9,204
Average Attendance	...	8,329	(90.5 per cent.)	...	...	...

## SECONDARY MODERN SCHOOLS

Number of Schools	...	...	...	...	...	11
Number of Departments	...	...	...	...	...	11
Number on Rolls	...	...	...	...	...	4,398
Average Attendance	...	4,026	(91.5 per cent.)	...	...	...

## SECONDARY GRAMMAR AND TECHNICAL SCHOOLS

Grammar School for Boys (Town and County)	...	...	...	...	...	970
Grammar School for Girls	...	...	...	...	...	586
Trinity High School—Mixed	...	...	...	...	...	688

## SPECIAL SCHOOLS

Northgate	...	...	...	...	...	101
Open Air	...	...	...	...	...	94
Manfield Orthopædic Hospital	...	...	...	...	...	16
John Greenwood Shipman Home	...	...	...	...	...	30
Harborough Road Hospital	...	...	...	...	...	20

## NURSERY SCHOOLS

Silver Street	...	...	...	...	...	80
Bush Hill	...	...	...	...	...	40
Gloucester	...	...	...	...	...	40
Victoria Park	...	...	...	...	...	40
Wallace Road	...	...	...	...	...	40

Total Number of Pupils on Roll	...	...	...	...	...	16,347
--------------------------------	-----	-----	-----	-----	-----	--------

## COST OF SCHOOL HEALTH SERVICE

Total Nett Cost (Year 1963/64)	...	...	...	...	£	s.	d.
	...	...	...	...	20,964	19	1

**Medical Inspections.** During the year, 4,970 school children received routine medical inspections. These have continued to run smoothly, the aim being to examine every school child at least three times during school life. Children found to be unsatisfactory are kept under observation by a school medical officer and where necessary are referred back to their own doctor or to the hospital for further investigation. Referral to the hospital is always done in full liaison with family doctors. (See table A on page 99). Parent attendance at these medical inspections varies with the age of the child. The high parent attendance rate for infants (76%) contrasts sharply with leavers (40%). The leaver's inspection is undoubtedly an important one and the presence of the parent could be most helpful to the examining doctor.

**School Clinic.** In 1964, 1,973 children (an increase of 165 over 1963) attended the clinic, making a total of 4,179 visits.

The minor ailment clinic continued to be held every morning with a clinic nurse in attendance and on two afternoons each week a doctor was also present.

Minor ailments include such defects and diseases as can properly be treated in a school clinic by simple treatment and careful nursing, e.g., ringworm, scabies, impetigo, cuts, septic spots, minor eye and ear conditions.

The school clinic serves five main purposes:—

- (1) The medical examination of special cases.
- (2) A treatments centre for minor ailments.
- (3) Special clinics, e.g., ophthalmic, vaccination, enuresis clinic, etc.
- (4) The administrative centre for the School Health Service.
- (5) Dental treatment.

**School Nurses.** Seven school nurses helped to staff the School Health Service during the year. Their work was mainly concerned with the following:—

- (1) Preparation of pupils for medical inspections, weighing, measuring heights and vision testing.
- (2) Assisting school medical officers at routine medical inspections.
- (3) Periodic inspections of school children for cleanliness.
- (4) Helping at special clinics, e.g., vaccination clinics, ophthalmic clinics, etc.
- (5) Home visiting.

**Cleanliness.** The percentage of uncleanliness found during the last decade is of interest:—

1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
2.2	2.1	1.8	1.4	1.0	0.5	0.5	0.8	0.8	0.7

This table illustrates a satisfactory downward trend in the number of infested children but there still remains a hard core of families in which children are found to be repeatedly in need of treatment. The appropriate treatment for these children is available at the school clinic. School nurses and health visitors make every effort to help and advise these families and it is hoped that the numbers will decrease even further.

**Scabies.** The number of cases totalled eleven compared with ten in 1963, and all were treated at the school clinic. When a school child has scabies it is probable that other members of the family will also be infested. Accordingly, the whole family may have to be treated simultaneously under proper supervision. The prevention of scabies is best attained by unceasing vigilance, early diagnosis and rapid treatment in every case.

**Ringworm of the Scalp.** No cases of ringworm of the scalp were reported.

**Hygiene Inspection of Schools.** Routine hygiene inspections of schools, carried out by school medical officers, showed a reasonably high standard of hygiene in the majority of schools. In a few of the older schools the toilet accommodation was considered inadequate but these buildings are earmarked for reconstruction and improvement.

**Enuresis Alarm Units.** These are alarm buzzers and are used in selected cases of bed-wetting on the recommendation of school medical officer or general practitioner concerned. During the year 15 school children used these units with satisfactory results.

#### SPECIAL CLINICS

**Ear, Nose and Throat Clinic.** This clinic is held at Northampton General Hospital and school children found to be suffering from appropriate defects are referred to the E.N.T. Consultant, in close liaison with general practitioner concerned. During 1964, 249 school children (all from primary and secondary schools) were operated upon for tonsils and adenoids compared with 223 in 1963.

At the request of the Principal Medical Officer of the Department of Education and Science, school medical officers at the periodic medical inspections record the names of all children who have undergone tonsillectomy at any time previously. Table B on page 102 tabulates these figures.

**Refraction Clinic.** By arrangement with the Oxford Regional Hospital Board, the Ophthalmic Consultant and the Senior Hospital Medical Officer of Northampton General Hospital attend the School Clinic each week to examine children whose vision was considered to be unsatisfactory.

All children entering infant school are tested for normal vision and routinely every year afterwards. Any departure from normal vision, tested by the "E" card for non-readers and by Snellen's test with letters for readers, is noted, and the child referred to the Eye Clinic.

During the year 503 children were referred as follows:—

Maintained primary and secondary schools	459
Maintained special schools	15
Non-maintained schools	3
Pre-school children	18

An Orthoptic Clinic is held at Northampton General Hospital to which cases are referred, when necessary, by the Ophthalmic Consultant.

**Child Guidance Clinic.** The name of this clinic is considered by many to be a misnomer and some local authorities now call it a "child and family guidance clinic".

Typical problems like the following require careful investigation and where necessary treatment:—

1. Behaviour disorders which become manifest by extremes of behaviour—the delinquent and excessively aggressive child or the solitary, extremely shy, withdrawn child.
2. Excessive anxieties and fears which may be manifestations of early neurosis, e.g., night terrors.
3. Nervous habits which include such conditions as bed-wetting, loss of bowel control, stammering, nervous twitches.
4. Certain physical conditions like asthma, psoriasis or migraine which may have an emotional association.
5. Difficulties in learning which may be one of the prominent features in a disturbed child.

The aim of the Child Guidance Clinic is to provide some improvement in the relationships which exist in the home or school. This requires insight and co-operation from the parents. If this is not forthcoming, it may be necessary to remove a seriously disturbed child to the less demanding atmosphere of a residential hostel or school.

The Service is shared between the Northampton County Council and Northampton County Borough. The staff establishment is one whole-time consultant psychiatrist, one part-time psychiatrist, three educational psychologists and one social worker.

A total of 78 cases were referred to the Clinic, of whom 41 were seen by a psychiatrist. The School Health Service referred 13 children after consultation with their general practitioners.

**Speech Clinic.** The School Health Service did not have the services of a therapist during 1964.

**Orthopaedic Clinic.** 49 Northampton children were under treatment at Manfield Orthopaedic Hospital or at the John Greenwood Shipman Home during 1964 and, of these, 13 children attended the latter Home as day scholars. 297 children were treated as out-patients at Manfield Orthopaedic Clinic which is situated in Hazelwood Road.

**Spastic Unit.** This Unit (at the John Greenwood Shipman Home) caters for 20 spastic children, day and residential. One child was admitted during 1964 and at the end of the year 13 school children were attending. The children receive education, physiotherapy and any other treatment considered necessary.

## SPECIAL SCHOOLS

**Northgate School.** This day school which was built in 1963 caters for 100 E.S.N. pupils. The school is at present full and a short waiting list had begun at the end of 1964. A school medical officer attends the school once fortnightly when cases are reviewed and any special points discussed with the teachers. In addition, 51 pupils were examined at routine medical inspections and three visits were paid by school nurses for the purpose of cleanliness inspections.

**Open-Air School.** This provides places for 100 delicate and physically handicapped children and the following table illustrates the type of handicapped children that attended during 1964:—

<i>Type of Handicap</i>	<i>Number of Children</i>
General debility	25
Asthma	13
Epilepsy	10
Bronchitis	6
Nervous debility	5
Congenital hearts	5
Maladjusted	2
Residual motor paralysis	3
*Others	22

\*Includes diabetes, spina bifida, migraine, chronic sinusitis, Huntington's chorea, muscular dystrophy and mesenteric adenitis.

School medical officers paid 21 visits to the school for the purpose of examining and reviewing certain cases. In addition, 38 children were examined at routine medical inspections. School nurses paid three visits for the purpose of cleanliness inspections.

**Nursery Schools.** There are five Nursery Schools catering for 240 children between the ages of two and five years in addition to a Nursery Class of 29 at Bective Infants' School.

Frequently children are admitted to these nurseries for social or medical reasons and close liaison is maintained with the Chief Education Officer and his staff.

School medical officers visited all the Nursery Schools during the year, carrying out 268 routine medical inspections and 52 re-examinations. School nurses also paid 15 visits for the purpose of cleanliness inspections.

## IMMUNISATION AND VACCINATION

**Diphtheria and Tetanus.** Primary immunisation against diphtheria, tetanus and whooping cough, by means of triple vaccine, is normally carried out in infancy. The booster dose given at school entry consists of diphtheria and tetanus vaccine combined. This is repeated at ten years of age.

During 1964, 36 children, not previously protected against diphtheria and tetanus, were given a full primary course and 136 children received booster doses. In addition, 555 school children received full primary courses against tetanus.

**Poliomyelitis.** It is calculated that 83.2 per cent. of all persons under 21 years have been vaccinated against poliomyelitis.

One booster dose of oral vaccine is now given to all school entrants who have received a primary course in infancy.

**Tuberculosis.** The acceptance rate for B.C.G. vaccination in 1964 for children approaching their 13th birthday was 73 per cent. B.C.G. vaccination is also available to school children of 14 years and over who were not previously vaccinated, children aged 10 years or more who appear to be at special risk to tuberculosis, and students attending universities, teacher training colleges, technical colleges or other places of higher education.

B.C.G. vaccination is preceded by a special skin test known as a "tuberculin test". If the child reacts positively to this test, vaccination is not necessary. During the year 942 school children received a tuberculin test and 104 were found to be positive reactors. These 104 school children were referred to the Chest Clinic for chest X-ray, and all were found to be satisfactory. The remaining 838 negative reactors received B.C.G. vaccination.

#### HANDICAPPED PUPILS

(Children having a disability of mind or body necessitating education by special methods. Each Local Education Authority has a statutory duty to discover children in their area who have attained the age of two years and require special educational training).

Nowadays there is a demand for better and more comprehensive care for the handicapped child with a view to fitting him for a full life with all its psychological, social and economic implications. Accordingly, early ascertainment of handicapped children has become one of the most important aspects of the work of the school medical officer. The School Health Service must ensure that children who deviate from the normal receive the special educational treatment best suited to their physical and mental needs.

The number of handicapped children in special schools during the last ten years is shown in the following table.

<i>Year</i>	<i>Blind</i>	<i>Partially Sighted</i>	<i>Deaf</i>	<i>Partially Hearing</i>	<i>ESN</i>	<i>Epileptic</i>	<i>Maladjusted</i>	<i>PH</i>	<i>Speech</i>	<i>Delicate</i>	<i>Total</i>
1955	2	—	8	5	71	4	8	50		70	218
1956	1	5	7	4	79	5	6	51		66	226
1957	1	5	7	2	78	4	13	47		77	234
1958	3	3	6	2	85	4	10	60		74	247
1959	2	4	6	3	91	4	12	64		73	259
1960	2	3	6	2	75	2	4	25		79	198
1961	2	4	7	3	71	8	6	24		71	196
1962	3	4	7	3	79	10	7	20		77	210
1963	3	5	4	4	104	8	14	15		72	229
1964	4	2	7	5	107	9	17	60		52	263

Under the Handicapped Pupils and Special Schools Regulations, 1959, and the amending Regulations of 1962, the following *ten* categories of handicapped pupils are defined.

**1. Blind Pupils**

"Pupils who have no sight or whose sight is, or is likely to become, so defective that they require education by methods not involving the use of sight."

Number of blind pupils newly assessed as needing special educational treatment	1
Number of blind pupils admitted to Special Schools during the year	1
Number of blind pupils awaiting admission to residential schools	1
Total number of blind pupils in Special Schools for the Blind on 31st December, 1964	4

**2. Partially Sighted Pupils**

"Pupils who by reason of defective vision cannot follow the normal régime of ordinary schools without detriment to their sight or to their educational development but can be educated by special methods involving the use of sight."

Number of partially sighted pupils newly assessed as needing special educational treatment	Nil
Number of partially sighted pupils admitted to Special Schools during the year	Nil
Total number of partially sighted pupils in Special Schools for partially sighted children on 31st December, 1964	2
Number of partially sighted pupils attending ordinary schools	1

**3. Deaf Children**

"Pupils with impaired hearing who require education by methods suitable for pupils with little or no naturally acquired speech or language".

Number of deaf pupils newly assessed as needing special educational treatment	Nil
Number of deaf pupils admitted to Special Schools during the year	2
Total number of pupils in Special Schools for the Deaf on 31st December, 1964	7

**4. Partially Hearing Pupils**

"Pupils with impaired hearing whose development of speech and language, even if retarded, is following a normal pattern and who require for their education special arrangements or facilities though not necessarily all the educational methods used for deaf children".

Number of partially hearing pupils newly assessed as needing special educational treatment	Nil
Number of partially hearing pupils admitted to Special Schools during the year	Nil
Total number of pupils in Special Schools for partially hearing children on 31st December, 1964	5
Number of partially hearing pupils attending normal schools on 31st December, 1964	2



### 5. E.S.N. Pupils

"Pupils who, by reason of limited ability, or other condition, resulting in educational retardation, require some specialist form of education, wholly or partly in substitution for the education normally given to ordinary children".

Number of E.S.N. children newly assessed as needing special educational treatment	24
Number of E.S.N. children admitted to Northgate Special School during the year	20
Number of E.S.N. children admitted to Special Boarding Schools for E.S.N. children during the year	3
Number of E.S.N. children awaiting admission to residential schools	1

### 6. Epileptic Pupils

"Pupils who by reason of epilepsy cannot be educated under the normal régime of ordinary schools without detriment to themselves or other pupils".

Number of epileptic pupils newly assessed as needing special educational treatment	1
Number of epileptic pupils admitted to Special Schools during the year	1
Total number of epileptic pupils in Special Schools for epileptic children on 31st December, 1964	1
Number of epileptic children awaiting admission to residential schools	1

### 7. Maladjusted Children

"Pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social and educational readjustment".

Number of maladjusted pupils newly assessed as needing special educational treatment	2
Number of maladjusted pupils admitted to Special Schools for maladjusted children during the year	2
Total number of maladjusted pupils in Special Schools	12
Total number of maladjusted pupils at Holyrood and Rostrevor Hostels	6
Number of maladjusted pupils awaiting admission to residential schools	5

### 8. Physically Handicapped Pupils

"Pupils not suffering solely from a defect of sight or hearing who by reason of disease or by crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal régime of ordinary schools".

Number of physically handicapped pupils newly assessed as needing special educational treatment	1
Number of physically handicapped pupils admitted to Special Residential Schools during the year	1
Total number of physically handicapped pupils in Special Residential Schools on 31st December, 1964	1

### 9. Pupils Suffering from Speech Defect

“Pupils who on account of defect or lack of speech not due to deafness, require special educational treatment”.

Number of pupils with speech defect newly assessed as needing special educational treatment	Nil
Number of pupils with speech defect admitted to Special Schools during the year	Nil
Total number of children with speech defect in Special Schools as at 31st December, 1964	Nil

### 10. Delicate Pupils

“Pupils not falling under any other category who by reason of impaired physical condition need a change of environment, or cannot without risk to their health or educational development be educated under the normal régime of ordinary schools”.

Number of delicate pupils newly assessed as needing special educational treatment	Nil
Number of delicate pupils admitted to Special Open Air Schools during the year	12
Total number of delicate pupils in residential Open Air Schools as at 31st December, 1964	Nil

### EMPLOYMENT OF CHILDREN

Children undertaking part-time employment have to be medically examined in accordance with bye-laws made under the Children and Young Persons Act, 1933 (as amended by Education Act, 1944).

Children of compulsory school age are allowed to undertake early morning work for up to one hour as well as doing work after school hours.

126 school children were examined by school medical officers during the year to ensure that no child is employed at work that might be prejudicial to his health or interfere with his education.

The number of school children seeking part-time employment during the past ten years is shown by the number of medical examinations carried out as follows:—

1956	...	125
1957	...	101
1958	...	147
1959	...	92
1960	...	123
1961	...	157
1962	...	136
1963	...	118
1964	...	126

## OTHER EXAMINATIONS

Medical examinations of the following groups were carried out by school medical officers during the year:—

Teachers	38
Training College Candidates	63
Major Award Candidates	96
Boarded out Children	7

## SCHOOL MEALS SERVICE

The following particulars relate to the number of children in attendance and the number of meals provided:—

Approximate number of children in receipt of meals	7,000
Number of children in receipt of free meals	436
Total number of meals supplied	881,560
Number of free meals supplied	59,655

## NON-MAINTAINED SCHOOLS

**Notre Dame Preparatory School**

This School was visited during the autumn of 1964 by a school medical officer who examined 30 children.

**Notre Dame High School for Girls**

This school was visited in the spring of 1964 by a school medical officer who examined 174 children.

## SCHOOL DENTAL SERVICE

P. W. J. L. THOMPSON, L.D.S., R.C.S.

*Principal School Dental Officer*

The year saw many changes, the most outstanding being the acquisition of a "Kingston" Dental Caravan which was delivered on 9th April. Many preparations had been made and these were completed by 20th May when the first patients were attended to in the Caravan on the first of its sites at Bective Secondary Modern School.

The usefulness of the Caravan and its popularity with teachers, parents and children have made the extra work worthwhile.

The Principal Dental Officer worked in the Caravan at first to discover how best to organise the routine of a Mobile Surgery and to iron out any teething troubles.

The vacant Surgery at King Street then became available for the Dental Auxiliary, who previously had been employed in producing an excellent range of posters and giving dental health talks to children at school.

The year under review saw some staff changes. Since 1959 two part-time Dental Officers have worked in the second surgery at the School Clinic. On the occasion of the retirement of one of the officers we were fortunate to be able to obtain the full-time services of the other, who has subsequently undertaken to work the School Dental Caravan.

A word of praise is due to Mr. C. K. Wilson, who achieved the remarkable distinction of retiring after he had completed sixty years' practising dentistry in his own town. He deserves a long and happy retirement.

The staff position at the year end was: 1 Principal School Dental Officer; 1 Dental Officer; 1 Dental Auxiliary and 3 Dental Surgery Assistants, the largest staff ever in the School Dental Service.

The statistical returns are shown overleaf. These figures demonstrate that the policy of saving teeth by fillings rather than by widespread extractions is fulfilled in that the ratio of fillings/extractions reached a value of 2.5—1.

School inspection figures show a 50 per cent. increase. Attendances for treatment have also risen indicating more work done to each patient. This results from extending inspection and treatment to some Secondary Modern Schools which had not previously been visited. Further staff will be necessary to provide a comprehensive service. At present the effects of dental health education should impress on the entrants to Grammar and Secondary Modern Schools the importance of attending the School Clinic or dental practitioner.

In November Mr. Potter, Dental Officer to the Department of Education & Science and Ministry of Health reported on his visit to the School Dental Service. His report was very favourable and endorsed the policy of concentrating resources on to the primary and pre-school children together with the special schools and priority groups. The output of clinical work is greater than the national average in school clinics.

Increase in demand will put greater pressure on staff, and it is hoped that the proposed expansion of Northampton will attract young and keen dental surgeons to the School Service.

## DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's Dental Officer :—		
(a) At Periodic Inspections .....		5,107
(b) As Specials (at Clinic) .....		1,271
Total (1) .....		<u>6,378</u>
(2) Number found to require treatment .....		4,110
(3) Number offered treatment .....		3,808
(4) Number actually treated .....		1,642
(5) Number of attendances made by pupils for treatment, excluding those recorded at heading 11 (h) below .....		<u>6,363</u>
(6) Half-days devoted to :		
(a) Periodic (School) Inspection .....		44
(b) Treatment .....		803
Total (6) .....		<u>847</u>
(7) Fillings :		
(a) Permanent teeth .....		2,984
(b) Temporary teeth .....		1,442
Total (7) .....		<u>4,426</u>
(8) Number of teeth filled :		
(a) Permanent teeth .....		2,488
(b) Temporary teeth .....		1,271
Total (8) .....		<u>3,759</u>
(9) Extractions :		
(a) Permanent teeth .....		436
(b) Temporary teeth .....		1,329
Total (9) .....		<u>1,765</u>
(10) Administration of general anæsthetics for extraction .....		<u>411</u>
(11) Orthodontics :—		
(a) Cases commenced during the year .....		39
(b) Cases carried forward from previous year .....		14
(c) Cases completed during the year .....		17
(d) Cases discontinued during the year .....		20
(e) Pupils treated with appliances .....		53
(f) Removable appliances fitted .....		53
(g) Fixed appliances fitted .....		—
(h) Total attendances .....		597
(i) Half-days devoted to Orthodontic Treatment .....		<u>52</u>
(12) Number of pupils supplied with artificial dentures .....		<u>23</u>
(13) Other operations :		
(a) Crowns .....		14
(b) Inlays.....		—
(c) Other Treatment .....		2,228
Total (13) .....		<u>2,242</u>

The work under the Maternity and Child Welfare Scheme is summarised in Table 21, page 36.

## MEDICAL INSPECTION RETURNS 1964

### MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age groups inspected (By year of Birth)	No. of pupils who have received a full medical examination	Physical Condition of Pupils Inspected		No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		Total individual pupils
		Satisfactory	Unsatisfactory		For defective vision (excluding squint)	For any other condition recorded at Part 2	
(1)	(2)	No.	No.	(5)	(6)	(7)	(8)
1960 and later	282	280	2	—	5	20	18
1959	823	818	5	—	9	111	102
1958	324	314	10	—	7	43	43
1957	75	74	1	—	4	18	18
1956	689	689	—	—	20	54	62
1955	614	611	3	—	20	93	97
1954	173	173	—	—	4	25	26
1953	31	30	1	—	3	4	6
1952	80	80	—	—	3	29	29
1951	168	168	—	—	6	24	28
1950	694	692	2	—	36	77	100
1949 and earlier	1,017	1,017	—	—	60	152	169
<b>Totals</b>	<b>4,970</b>	<b>4,946</b>	<b>24</b>	<b>—</b>	<b>177</b>	<b>650</b>	<b>698</b>

TABLE B.—OTHER INSPECTIONS

Number of Special Inspections .....	1,075
Number of Re-inspections .....	3,239
	<hr/>
Total .....	4,314
	<hr/>

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons .....	37,677
(b) Total number of <i>individual</i> pupils found to be infested ...	247
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944) .....	247
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) .....	—

TABLE D  
DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS  
DURING THE YEAR

Defect Code No.	Defect or Disease	Periodic Inspections								Special Inspections	
		Entrants		Leavers		Others		Total		Requiring Treat.	Observ.
		Requiring Treat.	Observ.	Requiring Treat.	Observ.	Requiring Treat.	Observ.	Requiring Treat.	Observ.		
4	Skin .....	12	77	28	102	14	82	54	261	149	84
5	Eyes— <i>a.</i> Vision	49	106	103	127	43	117	195	350	364	116
	<i>b.</i> Squint	16	55	2	3	5	18	23	76	2	3
	<i>c.</i> Other...	21	15	27	22	1	8	49	45	36	40
6	Ears— <i>a.</i> Hearing	6	94	3	7	7	22	16	123	4	17
	<i>b.</i> Otitis Media	4	37	3	10	2	13	9	60	1	1
	<i>c.</i> Other...	3	11	4	18	3	10	10	39	4	5
7	Nose & Throat ...	26	195	13	40	28	125	67	360	2	1
8	Speech .....	17	39	1	1	2	13	20	53	3	18
9	Lymphatic Glands .....	—	56	1	5	6	14	7	75	1	2
10	Heart .....	7	37	5	48	6	20	18	105	4	1
11	Lungs .....	6	114	4	16	4	52	14	182	—	10
12	Developmental— <i>a.</i> Hernia	—	6	—	—	1	1	1	7	—	—
	<i>b.</i> Other...	8	81	7	13	7	68	22	162	8	9
13	Orthopædic— <i>a.</i> Posture	40	26	4	12	38	27	82	65	—	4
	<i>b.</i> Feet ...	57	57	27	23	30	26	114	106	46	19
	<i>c.</i> Other ...	16	45	6	28	8	27	30	100	1	—
14	Nervous System— <i>a.</i> Epilepsy	1	1	—	—	1	8	2	9	4	—
	<i>b.</i> Other ...	9	19	3	14	8	21	20	54	8	7
15	Psychological— <i>a.</i> Development	6	29	—	12	3	22	9	63	18	3
	<i>b.</i> Stability .....	5	67	6	18	12	46	23	131	42	20
16	Abdomen .....	3	10	1	12	1	6	5	28	1	4
17	Other .....	4	31	5	27	6	21	15	79	1	4



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

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ...	100
Errors of refraction (including squint) .....	797
Total .....	897
Number of pupils for whom spectacles were prescribed .....	244

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

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear .....	—
(b) for adenoids and chronic tonsillitis .....	249
(c) for other nose and throat conditions .....	—
Received other forms of treatment .....	—
Total .....	249
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1964 .....	1
(b) in previous years .....	10

TABLE C.—ORTHOPÆDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments .....	47
(b) Pupils treated at school for postural defects .....	263
Total .....	310

TABLE D.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table C on Page 100)

	Number of cases known to have been treated
Ringworm— (i) Scalp .....	—
(ii) Body .....	—
Scabies .....	9
Impetigo .....	16
Other skin diseases .....	124
Total .....	149

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics .....	41

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by Speech Therapists .....	—

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments .....	728
(b) Pupils who received convalescent treatment under School Health Service arrangements .....	—
(c) Pupils who received B.C.G. vaccination .....	838
<b>Total</b> .....	<b>1566</b>

## INCIDENCE OF NOTIFIABLE DISEASES

Notifiable Disease	Cases amongst Children of School Age
Dysentery .....	—
Erysipelas .....	—
Food Poisoning .....	—
Measles .....	188
Pneumonia .....	3
Scarlet Fever .....	5
Whooping Cough .....	23
Tuberculosis—	
Respiratory .....	1
Other Forms .....	—





