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CITY OF PLYMOUTH



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the Year 1961





CITY OF PLYMOUTH




ANNUAL REPORT

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MEDICAL OFFICER OF HEALTH

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HEALTH AND WELFARE SERVICES COMMITTEE

Chairman: Alderman P. N. Washbourn.

Vice-Chairman: Councillor Mrs. D. M. Fleury.

Aldermen E. Broad, Miss E. K. Pryor.

Councillors F. Bartlett, Mrs. G. R. Grierson, L. Hill, Mrs. M. Jago,
G. H. Miles, Mrs. A. K. Osborne, Mrs. H. M. Ward, W. J. Wilks.

Two members from the Local Medical Committee:

Dr. O. L. Lander and Dr. J. Nixon Morris.

AMBULANCE SUB-COMMITTEE

Chairman: Alderman P. N. Washbourn.

Vice-Chairman: Mr. F. J. Warren.

Councillors Mrs. D. M. Fleury, Mrs. G. R. Grierson, Mrs. A. K.
Osborne, Mrs. H. M. Ward.

Dr. O. L. Lander.

Mrs. R. Balsdon, representing the St. John Ambulance Brigade.

Mrs. H. Vellacott, representing the former Plymouth and District
Ambulance Service.

MENTAL HEALTH SUB-COMMITTEE

Chairman. Alderman P. N. Washbourn.

Vice-Chairman. Councillor Mrs. D. M. Fleury.

Councillors Mrs. G. R. Grierson, Mrs. A. K. Osborne, Mrs. H. M.
Ward.

Dr. O. L. Lander.

EDUCATION COMMITTEE

Chairman. Alderman L. F. Paul.

Vice-Chairman. Alderman Miss E. K. Pryor.

Aldermen N. W. Lamb, H. G. Mason, T. H. L. Stanbury, F. J. Stott.

Councillors W. T. Ainsworth, F. Chapman, R. C. Curry, D. P. Fitzgerald, P. Fletcher, Mrs. D. M. Fleury, T. H. Franklin, Mrs. H. Gratton, C. F. Jones, R. G. King, R. V. Morrell, Mrs. M. A. Motley, D. G. Pearce, Mrs. H. M. Ward.

Ten Members not of the Council.

Mrs. F. C. Clements, Rev. Preb. W. H. A. Cooper, Mr. H. T. E. Gambrell, Mr. E. A. Hosking, Mrs. B. Keast, Monsignor M. P. O'Neill, Mr. H. J. Perry, Mr. E. G. Roberts, Rev. A. Skelding, Miss K. M. Willcocks.

SPECIAL SERVICES SUB-COMMITTEE

(EDUCATION COMMITTEE)

Chairman: Councillor F. Chapman.

Alderman Miss E. K. Pryor.

Councillors W. T. Ainsworth, R. C. Curry, P. Fletcher, Mrs. D. M. Fleury, T. H. Franklin, Mrs. M. A. Motley.

Mrs. F. C. Clements, Mr. H. T. E. Gambrell, Mr. E. A. Hosking, Mr. H. J. Perry, Mr. E. G. Roberts, Rev. A. Skelding, Miss K. M. Willcocks.

HEALTH OFFICERS OF THE AUTHORITY

Medical

Medical Officer of Health; Port Medical Officer;

Principal School Medical Officer:

T. PEIRSON, M.D., M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health;

Deputy Port Medical Officer:

G. B. CARTER, M.B.E., M.D., D.P.H.

Senior School Medical Officer:

T. H. HARRISON, M.B., CH.B., D.P.H.

Senior Maternity and Child Welfare Medical Officer:

T. R. W. FORREST, M.R.C.S., L.R.C.P.

Senior Mental Health Medical Officer:

N. R. MATHESON, M.B., CH.B., C.P.H.

Assistant School Medical Officer:

L. N. TRETOWAN, M.R.C.S., L.R.C.P.

Assistant Medical Officer of Health—Port and General:

H. B. BOUCHER, M.B., F.R.C.S., D.T.M. AND H.

Assistant Maternity and Child Welfare and School Medical Officers:

ENID ATKINS, M.B., CH.B., D.C.H.

DESIREE M. HOWELLS, M.R.C.S., L.R.C.P., D.P.H.

T. A. LLOYD-JAMES, M.B., B.S.(LOND.), M.R.C.S., L.R.C.P.

(Commenced 6.12.61.)

NORAH C. GOODBODY, M.B., CH.B. (Resigned 24.12.61).

Senior Chest Physician

(in conjunction with the Regional Hospital Board):

J. J. Y. DAWSON, M.C., M.D., M.R.C.P., M.R.C.S.

(Seconded to World Health Organisation March, 1961.)

A. SHEERS, M.D., M.A., M.B., B.CHIR., M.R.C.S., L.R.C.P.

(Commenced April, 1961 – temporary.)

Medical—continued

Chest Physician

(in conjunction with the Regional Hospital Board):

E. ASHMAN, M.R.C.S., L.R.C.P.

Dental

Senior Dental Officer:

R. M. MAYNARD, L.D.S.

Dental Surgeons—School Health and Mothers and Young Children:

J. F. GRAY, L.D.S.

M. S. WIDDUP, L.D.S.

W. G. HUNTLEY, L.D.S., R.C.S.(ENG.).

Other Staff

Chief Public Health Inspector:

W. G. LOCK, M.A.P.H.I.*†‡

Port Health Inspector:

A. S. KITT*†

Senior Welfare Services Officer:

H. J. PATERNOSTER, F.I.S.W.

Superintendent Health Visitor:

MISS M. HORNBY, S.R.N., S.C.M., H.V. CERT.

Non-Medical Supervisor of Midwives and

Superintendent of Midwifery:

MRS. S. K. C. CHATFIELD, R.F.N., S.R.N., S.C.M., M.T.D.

Superintendent of District Nurses' Home:

MISS D. M. WILLIAMS, S.R.N., S.C.M., M.T.D., H.V. CERT.

Chief Clerk:

C. L. MARSH.

Ambulance Officer:

R. D. SAMPSON, S.B.ST.J.

Moral Welfare Officer:

MISS B. FEATHERSTON

Home Help Organiser:

MRS. P. NODDER

* Public Health Inspector's Certificate.

† Meat Inspector's Certificate.

‡ Sanitary Science Certificate.

TO THE LORD MAYOR, ALDERMEN AND COUNCILLORS
OF THE CITY OF PLYMOUTH.

I have the honour to present to you my Annual Report on the health of the city for the year 1961.

POLIOMYELITIS

Five cases of poliomyelitis were notified in 1961 as compared with twelve in the previous year and fifty-one in 1958.

During the year arrangements were made for children between five and twelve years of age to receive fourth doses of the inactivated vaccine. For some time now all up to forty years of age have been eligible to receive poliomyelitis vaccine. The number of babies and school children immunised is quite good but the acceptance by the older groups of the public has not been very satisfactory. It is regrettably true that nothing less than an actual outbreak of the disease will induce most people to seek protection. It is, of course, too late then for some of the population.

Towards the end of the year the Minister of Health announced that he intended to make oral vaccine available for routine protection and, in fact, such vaccination commenced during the spring of 1962.

PROTECTION AGAINST INFECTIOUS DISEASES

The Minister of Health has recently drawn attention to the urgent need for the level of immunity in this country against certain infectious diseases to be raised to a more satisfactory figure and to be maintained there. Protection can be given nowadays against small-pox, tuberculosis, poliomyelitis, diphtheria, whooping cough and tetanus. The Minister suggested that the correct attitude should be that parents would voluntarily accept "the protection currently available for infants and young people, as so much a matter of course that those who neglect to secure it for their families are regarded as deviations from an almost universal and unquestioned code of behaviour .

"Whenever there is a local outbreak of one of these diseases, we see reports and pictures in the papers of queues of people forming up in a panic to get themselves or their children protected. These queues are the evidence of responsibilities neglected. They are unfair to doctors, unfair to health authorities, unfair to those responsible for the supply of vaccines, unfair above all to the victims for whom it is already too late when the queue starts to form."

The position in Plymouth is reasonably satisfactory regarding protection against diphtheria, viz. 63.7% of children under 5 years of age, and against whooping cough 67% of children under 2. Protection against smallpox, viz. 57% of the number of births, whilst about the average of the whole country, cannot by any means be regarded as satisfactory.

With regard to protection against poliomyelitis in Plymouth, 75% of the under 19's have been protected. More than two-thirds of infants and school children have received vaccination, less than half of those aged 15-25 years and less than one-third of those aged 25-40.

THE UNMARRIED MOTHER AND HER CHILD

Attention is drawn to the description on page 30 of the work of this part of maternity and child welfare. The Council was one of the first statutory authorities to undertake this work when they first appointed a special social worker in 1944.

The present social worker, Miss Featherston, was trained at the Josephine Butler Memorial House at Liverpool. Her work covers the care of the unmarried mother before and after the child is born and the rehabilitation of the mother.

No two cases are the same. Each has its special circumstances and nearly all require a great amount of time and patience. The results recompense the staff for their efforts.

The Local Health Authority frequently makes arrangements with voluntary homes for the accommodation of the unmarried mother both before and after the child is born.

WELFARE OF OLD PEOPLE

The problem of the ageing population continues to be one of the major concerns of the Health and Welfare Services Committee. Progress is being made in the provision of residential homes for those elderly persons who, even with the help of all the auxiliary services, can no longer look after themselves in their own homes. The day of the large institution for old people fortunately is passing and more are being accommodated in small purpose-built homes.

The Housing Committee has already erected a number of flat-lets for the aged where, under the care of a warden, these people can look after themselves happily in their own homes. So long as it is possible, this is obviously what the elderly prefer, and it is often only possible because of the help provided by the Guild of Social Service Home-Help Scheme, financially assisted by the Council. The Guild also sponsors social and recreational clubs where old persons can meet and where their particular needs can be discovered.

The W.V.S. "Meals on Wheels" service has proved invaluable in assisting many old people to remain in their own homes. The recently passed National Assistance Amendment Act has enabled welfare authorities either to provide or to help voluntary organisations to provide meals services and day clubs.

It is with pleasure that I record the loyal work of all my staff.

I am, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

T. PEIRSON.

HEALTH AND WELFARE DEPARTMENT,
THE MUNICIPAL OFFICES,
PLYMOUTH.

(Tel.: Plymouth 68000)

July, 1962.

Statistics and Social Conditions of the Area, 1961

Area in acres (Land and Inland Water)	13,115
Rateable value of the City	£3,570,000
Sum represented by the penny rate (estimated) ...	£14,632
Registrar-General's estimate of the home population ...	212,780
Number of marriages in the City during 1961	1,587
Marriage Rate per 1,000 of estimated home population	7.45

Number of unemployed persons in the City as at December, 1961:

		<i>Age</i>	<i>Total</i>
Men	...	18 and over	1,415
Boys	...	15 to 17	53
Women	...	18 and over	485
Girls	...	15 to 17	36
TOTAL			1,989

	<i>M.</i>	<i>F.</i>	<i>Total</i>	
<i>All Deaths:</i>	1,347	1,270	2,617	Death rate per 1,000 of estimated home population - 12.29

<i>Comparability factors:</i>	Births	...	1.01
	Deaths	...	1.08

STATISTICS RELATING TO MOTHERS AND INFANTS, 1961

<i>Live Births:</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>	
Legitimate ...	1,778	1,679	3,457	Birth rate per 1,000 of the estimated home population 17.42
Illegitimate ...	124	125	249	
	1,902	1,804	3,706	

<i>Stillbirths:</i>	<i>M.</i>	<i>F.</i>	<i>Total</i>	
Legitimate ...	25	16	41	Stillbirth rate per 1,000 total (live and still) births 12.26
Illegitimate ...	3	2	5	
	28	18	46	

Total live and still births: 3,752

Infant Deaths (under 1 year):

	<i>M</i>	<i>F</i>	<i>Total</i>	
Legitimate ...	43	29	72	
Illegitimate ...	1	2	3	
	—	—	—	
	44	31	75	
Infant mortality per 1,000 live births – total ...				20.24
" " " legitimate ...				20.83
" " " illegitimate ...				12.05
Neonatal mortality rate (deaths under 4 weeks per 1,000 total live births) ...				15.11
Early Neonatal mortality rate (deaths under 1 week per 1,000 total live births) ...				12.14
Perinatal mortality rate (stillbirths and deaths under 1 week combined, per 1,000 total live and stillbirths)				24.25
Maternal deaths (including abortion) ...				—
Maternal mortality rate per 1,000 live and stillbirths ...				—
Illegitimate live births per cent of total live births ...				6.72%

Cremation The Medical Officer of Health in his capacity as Medical Referee of the City's Crematorium dealt with 1,795 applications for cremation during the year, an increase of 57 over the previous year. It was necessary in 13 cases to require a post-mortem examination before authorising cremation.

Medical Examinations of Council Employees During the year 801 employees or prospective employees were examined. 744 of these examinations were to assess fitness for occupation and suitability for entry to the Council's Superannuation and Sick Pay Schemes.

Of these:

- (a) 595 (80%) were found free from any defect likely to affect their service and were reported to the employing department as fit for employment and entry to the schemes.
- (b) 3 (0.4%) were found unfit for Corporation employment

- (c) 35 (4.7%) were found to possess defects likely to curtail materially their working life or lead to undue absence owing to sickness. They were reported as being reasonably fit for their proposed employment but not for entry to the Superannuation or Sick Pay Schemes.
- (d) 111 (14.9%) were found to have defects probably of a temporary or remediable nature. Though unfit for entry to the Schemes at the time of examination it is probable that most of this group would be able to enter the Schemes on re-examination after suitable treatment or a period of observation.

RETIREMENT ON MEDICAL GROUNDS.

Eighteen persons in Corporation employment were recommended for retirement on medical grounds before the normal retiring ages. Four of these were officers. The average age of those retiring was 59 years 6 months and the average length of service 21 years 4 months.

MISCELLANEOUS EXAMINATIONS.

Fifty-seven other examinations were carried out, including twenty-five on employees who had been away from duty for prolonged periods.

Chest X-ray examinations were made on employees of Health and Children Departments and on prospective employees of other departments when clinically indicated.

Cancer I am indebted to Mrs. Longstaffe, the Records Officer of the Regional Cancer Records Bureau, for information concerning the incidence of cancer amongst Plymouth residents in 1960.

		<i>Under 20</i>	20-29	30-39	40-49	50-59	60-69	70 +	<i>Total</i>
<i>140-148</i> Buccal Cavity and Pharynx	M	-	1	-	1	3	3	5	13
	F	-	-	1	3	4	1	3	12
<i>150-159</i> Digestive Organs and Peritoneum	M	-	-	1	5	23	30	33	92
	F	2	1	3	4	11	23	32	76
<i>160-165</i> Respiratory System	M	-	-	2	7	28	33	14	84
	F	-	-	-	3	4	4	5	16
<i>170</i> Breast	M	-	-	-	-	-	-	-	-
	F	-	-	-	15	16	13	17	61
<i>171-181</i> Genito-urinary Organs	M	1	3	5	-	8	13	24	54
	F	1	2	3	11	22	16	17	72
<i>190-191</i> Skin	M	-	-	-	4	15	6	20	45
	F	-	1	-	2	2	11	13	29
<i>192-199</i> Other and unspecified sites	M	1	-	3	-	5	6	4	19
	F	-	2	2	4	5	1	5	19
<i>200-205</i> Lymphatic and Hæmatopoietic tissues	M	1	-	-	3	3	5	3	15
	F	-	1	1	-	3	1	2	8
TOTAL ...		6	11	21	62	152	166	197	615

TABLE I.
VITAL STATISTICS—PLYMOUTH—1914-1961.

Year.	Estimated Mid-year Population (a) Civilian (b) Total Resident.	Birth Rate.	Death Rate.	Infant Mortality Rate per 1,000 Live Births.	CRUDE DEATH-RATES PER 1,000 POPULATION FROM						
					Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Tuberculosis. Respiratory.	Other Forms.	Cancer.
1914	212,421 (b)	23.70	15.50	109.70	.26	.05	.22	.25	1.23	.37	1.06
1915	187,911 (a)	19.90	17.40	119.30	.61	.04	.13	.23	1.26	.45	1.15
1916	184,473 (a)	21.60	16.10	90.60	.26	.02	.08	.28	1.37	.35	1.24
1917	179,375 (a)	19.39	16.44	96.95	.46	.01	.11	.17	1.25	.49	1.33
1918	179,629 (a)	19.17	18.90	96.63	.31	.03	.32	.09	1.67	.49	1.16
Average	20.75	18.86	18.90	102.63	.36	.03	.17	.20	1.35	.43	1.19
1919	181,967 (a)	21.62	15.48	85.85	.16	.02	.02	.19	1.27	.40	1.38
1920	189,218 (a)	26.35	14.48	74.78	.18	.00	.17	.19	1.03	.24	1.29
1921	199,860 (a)	21.21	12.5	77.52	.01	.02	.05	.08	1.04	.21	1.34
1922	200,370 (a)	19.65	14.4	74.31	.22	.01	.10	.07	1.09	.24	1.25
1923	193,017 (a)	19.49	12.7	50.67	.03	.00	.04	.05	1.04	.23	1.40
Average	21.66	13.91	13.91	72.62	.12	.01	.07	.11	1.09	.20	1.33
1924	192,900 (a)	18.16	14.3	81.53	.13	.00	.16	.11	1.08	.22	1.31
1925	197,378 (a)	18.1	12.2	63.0	.01	.01	.07	.04	0.91	.22	1.36
1926	187,300 (a)	17.2	12.3	71.9	.10	.01	.07	.18	0.95	.18	1.49
1927	187,600 (a)	16.5	12.0	61.0	.00	.02	.06	.12	0.97	.16	1.58
1928	187,600 (a)	17.0	12.5	69.2	.41	.01	.02	.17	0.85	.17	1.52
Average	17.59	12.5	12.5	69.32	.13	.01	.07	.12	0.95	.16	1.45
1929	199,000 (a)	16.5	12.6	59.5	.02	.02	.02	.13	0.84	.12	1.39
1930	199,000 (a)	15.9	11.8	60.0	.14	.03	.02	.11	0.84	.17	1.47
1931	191,800 (a)	16.4	13.5	66.8	.01	.01	.05	.08	0.69	.20	1.48
1932	208,440 (b)	15.59	12.55	58.44	.02	.04	.07	.09	0.78	.15	1.49
1933	206,200 (b)	15.67	13.23	58.16	.06	.01	.06	.08	0.86	.12	1.47
Average	16.01	12.73	12.73	60.58	.05	.02	.07	.10	0.80	.16	1.40
1934	203,450 (b)	15.7	12.05	53.69	.06	.00	.08	.07	0.82	.17	1.59
1935	203,600 (b)	15.0	12.25	59.70	.02	.00	.01	.11	0.56	.15	1.58
1936	206,400 (b)	14.8	12.25	55.86	.01	.00	.09	.19	0.60	.19	1.57
1937	210,460 (b)	14.6	12.79	45.88	.00	.00	.01	.08	0.70	.07	1.63
1938	211,800 (b)	15.6	11.95	53.25	.12	.00	.05	.07	0.64	.13	1.54
Average	15.14	12.25	12.25	53.68	.04	.00	.05	.10	0.66	.13	1.58
1939	215,500 (a)	15.6	12.61	42.04	.00	.00	.00	.11	0.64	.12	1.65
1940	197,800 (a)	16.6	15.72	59.69	.02	.00	.00	.53	0.83	.13	1.85
1941	149,300 (a)	16.43	23.87	77.49	.08	.00	.07	.18	0.94	.15	2.25
1942	127,300 (a)	22.12	15.51	51.82	.00	.00	.01	.12	0.95	.23	2.51
1943	136,530 (a)	23.03	16.69	37.53	.06	.00	.06	.07	0.92	.20	2.34
Average	18.75	16.88	16.88	53.71	.03	.00	.03	.20	0.85	.16	2.12
1944	144,700 (a)	24.03	14.66	39.98	.00	.00	.01	.03	0.86	.12	2.13
1945	157,580 (a)	24.27	15.55	55.96	.00	.00	.01	.02	0.79	.10	2.18
1946	176,070 (a)	24.26	13.87	46.11	.00	.00	.02	.01	0.60	.14	2.08
1947	181,600 (a)	24.72	14.09	49.88	.05	.00	.01	.01	0.77	.16	1.83
1948	188,940 (a)	21.36	12.25	29.73	.00	.00	.01	.00	0.73	.12	2.09
Average	23.73	14.08	14.08	44.33	.01	.00	.01	.01	0.75	.13	2.06
1949	190,860 (a)	19.75	13.14	34.23	.00	.00	.03	.00	0.62	.03	1.98
1950	208,960 (b)	16.91	11.72	29.43	.00	.00	.01	.00	0.52	.07	1.82
1951	219,700 (b)	16.49	12.16	33.41	.01	.00	.01	.00	0.42	.04	1.65
1952	218,600 (b)	15.95	11.18	29.53	.00	.00	.01	.00	0.22	.02	1.73
1953	221,400 (b)	16.45	11.03	26.90	.00	.00	.01	.00	0.20	.02	1.84
Average	17.11	11.84	11.84	30.70	.00	.00	.01	.00	0.39	.03	1.80
1954	217,500 (b)	16.46	10.79	28.21	.00	.00	.00	.00	0.14	.01	1.78
1955	218,000 (b)	16.22	10.93	20.65	.00	.00	.00	.00	0.19	.00	1.88
1956	216,200 (b)	16.31	11.28	17.58	.00	.00	.00	.00	0.12	.00	1.79
1957	217,900 (b)	16.59	10.76	22.41	.00	.00	.00	.00	0.07	.01	1.68
1958	216,300 (b)	16.89	11.51	20.26	.00	.00	.00	.00	0.09	.00	1.91
Average	16.49	11.05	11.05	21.82	.00	.00	.00	.00	0.12	.00	1.81
1959	216,300 (b)	16.89	11.08	21.61	.00	.00	.00	.00	0.06	.00	1.82
1960	216,470 (b)	17.01	11.97	23.08	.00	.00	.00	.00	0.09	.00	2.09
1961	212,780 (b)	17.42	12.29	20.24	.00	.00	.00	.00	0.09	.00	1.99

Note—A series of dashes indicates that there were no deaths from that particular disease during that year.

A "0" preceding a decimal point indicates that in some previous year the rate was greater than unity.

A rate of .00 indicates that there were too few deaths during that year to be expressed as a rate to two decimal places

TABLE II.
VITAL STATISTICS—1914—1961.

YEAR.	STILLBIRTHS.		INFANT MORTALITY		NEO-MORTALITY.		MATERNAL MORTALITY.					
	No.	Rate per 1,000 Live and Still Births.	No. of Deaths under 1 year.	Rate per 1,000 Live Births.	No. of Deaths under 4 weeks.	Rate per 1,000 Live Births.	SEPSIS.		OTHERS.		TOTAL.	
							No. of Deaths.	Rate per 1,000 Live and Still Births.	No. of Deaths.	Rate per 1,000 Live and Still Births.	No. of Deaths.	Rate per 1,000 Live and Still Births.
1914	51	10.02	553	109.7	215	42.68	5	.98	22	4.32	27	5.30
1915	29	6.80	505	119.3	145	34.26	6	1.41	17	3.98	23	5.39
1916	64	14.51	394	90.6	140	32.20	4	.90	20	4.53	24	5.43
1917	59	17.57	376	96.95	137	35.33	2	1.50	15	3.81	17	4.31
1918	133	33.24	373	96.63	132	34.20	5	1.25	14	3.50	19	4.75
Average	67	16.43	444	102.63	154	35.73	4	1.21	17	4.03	22	5.03
1919	143	33.70	352	85.85	135	32.93	5	1.18	18	4.24	23	5.42
1920	153	27.61	403	74.78	182	33.78	4	.73	22	3.96	26	4.69
1921	?	?	347	77.52	153	34.18	3	.67	12	2.68	15	3.35
1922	134	31.22	309	74.31	153	36.81	4	.93	17	3.96	21	4.89
1923	129	30.33	209	50.67	102	24.74	5	1.17	12	2.82	17	3.99
Average	139	30.71	324	72.62	145	32.49	4	.94	16	3.53	20	4.47
1924	125	32.23	306	81.53	128	34.11	6	1.54	19	4.90	25	6.44
1925	?	?	243	63.0	117	30.54	3	.78	15	3.91	18	4.69
1926	?	?	262	71.9	106	29.12	3	.83	8	2.19	11	3.02
1927	?	?	214	61.0	112	31.99	11	3.15	16	4.56	27	7.71
1928	149	39.64	250	69.2	121	33.53	5	1.38	17	4.71	22	6.09
Average	137	35.93	255	69.32	117	31.85	5	1.53	15	4.05	20	5.59
1929	147	40.03	210	59.5	111	31.49	6	1.76	11	2.86	17	4.62
1930	179	49.73	208	60.0	93	27.19	8	2.22	18	5.00	26	7.22
1931	128	36.00	229	66.8	102	29.77	1	.29	8	2.33	9	2.62
1932	153	44.94	190	58.44	97	29.84	8	2.35	12	3.52	20	5.87
1933	126	37.53	188	58.16	107	33.11	7	2.08	13	3.87	20	5.95
Average	147	41.84	205	60.58	102	30.28	6	1.74	12	3.52	18	5.26
1934	118	35.5	172	53.69	91	28.41	6	1.81	8	2.40	14	4.21
1935	124	38.8	183	59.70	103	33.60	9	2.82	7	2.19	16	5.01
1936	120	37.7	171	55.86	77	25.16	5	1.57	4	1.26	9	2.83
1937	118	36.9	141	45.88	66	21.48	7	2.19	10	3.13	17	5.32
1938	140	40.6	176	53.25	87	26.32	2	0.58	5	1.45	7	2.03
Average	124	37.9	168	53.68	85	26.99	6	1.79	7	2.08	12	3.88
1939	127	35.5	145	42.04	82	23.79	2	0.55	9	2.51	11	3.06
1940	117	34.2	197	59.69	95	28.83	7	2.04	4	1.17	11	3.21
1941	82	32.3	178	77.49	75	30.57	2	0.84	4	1.68	6	2.52
1942	87	29.9	146	51.82	85	30.17	2	0.69	8	2.75	10	3.44
1943	103	31.7	118	37.53	57	18.13	5	1.54	7	2.15	12	3.69
Average	103	32.7	157	53.71	79	26.29	4	1.13	6	2.05	10	3.18
1944	99	27.6	139	39.98	80	23.01	3	0.84	4	1.12	7	1.96
1945	111	28.2	214	55.96	112	29.28	3	0.76	14	3.56	17	4.32
1946	101	23.09	197	46.11	113	26.45	1	0.22	5	1.14	6	1.36
1947	97	21.14	224	49.88	127	28.28	—	—	3	0.65	3	0.65
1948	82	19.91	120	29.73	80	19.82	1	0.24	1	0.24	2	0.48
Average	98	23.99	179	44.33	102	25.37	2	0.41	5	1.34	7	1.75
1949	98	25.34	129	34.23	75	19.89	—	—	5	1.29	5	1.29
1950	68	18.88	104	29.43	67	18.96	1	0.27	3	0.83	4	1.10
1951	89	23.98	121	33.41	77	21.26	—	—	2	0.54	2	0.54
1952	81	22.70	103	29.53	73	20.94	—	—	3	0.84	3	0.84
1953	75	20.17	98	26.90	62	17.02	1	0.27	5	1.34	6	1.61
Average	82	22.21	111	30.70	71	19.61	.4	0.11	3	0.97	4	1.08
1954	90	24.52	101	28.21	71	19.83	—	—	4	1.09	4	1.09
1955	73	20.22	73	20.65	52	14.71	—	—	3	0.83	3	0.83
1956	86	23.80	62	17.58	46	13.05	—	—	1	0.27	1	0.27
1957	69	18.73	81	22.41	59	16.32	—	—	1	0.27	1	0.27
1958	73	19.60	74	20.26	49	13.42	—	—	2	0.54	2	0.54
Average	78	21.37	78	21.82	55	15.47	—	—	2	0.60	2	0.60
1959	80	21.42	79	21.61	58	15.86	—	—	3	0.80	3	0.80
1960	67	17.86	85	23.08	64	17.38	—	—	—	—	—	—
1961	46	12.26	75	20.24	56	15.11	—	—	—	—	—	—

DEATHS BY AGE GROUPS AND CAUSES—1961.

AS CLASSIFIED BY THE REGISTRAR GENERAL.

CAUSE OF DEATH	0-1		1-4		Total under 5 yrs.		5-14		15-24		25-44		45-64		65-74		75 and upwards		Total all ages		Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1. Tuberculosis, respiratory ...	-	-	-	-	-	-	-	-	-	-	4	5	6	3	3	-	1	-	14	8	22
2. Tuberculosis, other ...	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	1	1	2
3. Syphilitic disease ...	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	1	-	3	1	4
4. Diphtheria ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. Whooping-cough ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. Meningococcal infections ...	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
7. Acute Poliomyelitis ...	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
8. Measles ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Other infective and parasitic diseases ...	-	1	1	-	1	1	1	1	-	-	-	-	1	-	-	-	-	-	3	2	5
10. Malignant neoplasm, stomach ...	-	-	-	-	-	-	-	-	-	-	-	1	13	4	14	13	9	11	36	29	65
11. Malignant neoplasm, lung and bronchus ...	-	-	-	-	-	-	-	-	-	-	2	1	44	8	26	1	12	3	84	13	97
12. Malignant neoplasm, breast ...	-	-	-	-	-	-	-	-	-	-	-	4	-	24	-	10	-	9	-	47	47
13. Malignant neoplasm, uterus ...	-	-	-	-	-	-	-	-	-	-	-	4	-	12	-	5	-	3	-	24	24
14. Other malignant and lymphatic neoplasms ...	-	-	-	-	-	-	-	1	-	5	2	29	33	33	21	46	34	114	90	204	
15. Leukaemia and aleukaemia ...	-	-	1	-	1	-	-	1	1	1	-	1	2	1	1	1	1	6	5	11	11
16. Diabetes ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	4	-	9	3	13	16
17. Vascular lesions of nervous system ...	-	-	-	-	-	-	-	1	-	2	1	30	25	52	51	67	131	152	208	360	360
18. Coronary disease, angina ...	-	-	-	-	-	-	-	-	-	-	18	1	109	37	111	62	82	78	320	178	498
19. Hypertension with heart disease...	-	-	-	-	-	-	-	-	-	-	2	-	6	8	8	13	13	28	29	49	78
20. Other heart disease ...	-	-	-	-	-	-	-	-	1	4	5	15	17	30	42	101	168	150	233	383	383
21. Other circulatory disease ...	-	-	-	-	-	-	-	-	-	-	1	10	9	23	16	27	42	60	68	128	128
22. Influenza ...	-	-	1	-	1	-	-	-	-	-	-	1	1	1	-	4	3	7	4	11	11
23. Pneumonia ...	8	6	-	2	8	8	1	1	1	-	1	1	20	6	27	15	37	45	95	76	171
24. Bronchitis ...	1	-	-	-	1	-	-	-	-	-	-	-	14	1	21	4	23	20	59	25	84
25. Other diseases of respiratory system ...	-	-	-	2	-	2	-	-	-	-	2	2	3	2	6	5	9	9	20	20	40
26. Ulcer of stomach and duodenum...	-	-	-	-	-	-	-	-	-	-	-	-	5	-	2	3	6	10	8	18	18
27. Gastritis, enteritis and diarrhoea...	-	-	1	1	1	1	-	-	1	-	-	1	-	2	1	1	-	4	3	9	12
28. Nephritis and nephrosis ...	-	-	1	-	1	-	-	-	-	-	3	-	2	1	3	1	5	3	14	5	19
29. Hyperplasia of prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	7	-	9	-	9
30. Pregnancy, childbirth, abortion...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
31. Congenital malformations ...	10	6	1	1	11	7	2	-	-	-	-	-	-	-	-	1	-	-	13	8	21
32. Other defined and ill-defined diseases	24	18	-	-	24	18	-	1	2	-	4	5	18	20	9	13	25	51	82	108	190
33. Motor vehicle accidents ...	-	-	2	2	2	2	-	-	4	-	1	1	5	1	-	2	4	2	16	8	24
34. All other accidents ...	1	-	1	2	2	2	1	-	5	-	5	3	4	2	5	5	9	10	31	22	53
35. Suicide ...	-	-	-	-	-	-	-	-	1	-	6	2	2	4	2	-	1	-	12	6	18
36. Homicide and operations of war...	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
TOTAL ALL CAUSES ...	44	31	9	11	53	42	5	3	17	2	62	41	340	224	383	288	487	670	1347	1270	2617

DEATHS REGISTERED DURING THE 52 WEEKS ENDED 30th DECEMBER, 1961

INTERNATIONAL STATISTICAL CLASSIFICATION OF CAUSES OF DEATH—(W.H.O. 1948)

Cause of Death	0-4 years		5-14 years		15-24 years		25-44 years		45-64 years		65-74 years		75 years and over		Total		Grand Total	Deaths in Institutions
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A 1 Tuberculous of respiratory system ...	-	-	-	-	-	-	4	4	6	2	3	-	1	-	14	6	20	14
A 5 Tuberculosis, all other forms ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1	1
A 23 Meningococcal Infections ...	1	1	-	-	-	-	-	-	-	-	-	-	-	-	1	1	2	1
A 28 Acute poliomyelitis ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1	1
A 30 Late effects of acute poliomyelitis and acute infectious encephalitis ...	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1	1
A 34 Infectious hepatitis ...	-	-	1	-	-	-	-	-	1	-	-	-	-	-	1	1	2	2
A 43 All other diseases classified as infective and parasitic ...	-	2	-	1	-	-	-	-	-	-	-	-	-	-	3	3	3	2
A 44 Malignant neoplasm of buccal cavity and pharynx ...	-	-	-	-	-	-	1	-	3	2	5	-	4	1	13	3	16	8
A 45 Malignant neoplasm of oesophagus ...	-	-	-	-	-	-	-	-	2	1	-	3	2	4	6	2	6	2
A 46 Malignant neoplasm of stomach ...	-	-	-	-	-	-	1	15	4	14	12	9	11	38	28	66	24	24
A 47 Malignant neoplasm of intestine, except rectum ...	-	-	-	-	-	-	2	-	2	7	5	8	8	17	20	37	15	15
A 48 Malignant neoplasm of rectum ...	-	-	-	-	-	-	5	2	3	3	9	6	17	11	28	11	28	11
A 49 Malignant neoplasm of larynx ...	-	-	-	-	-	-	-	-	1	-	2	1	3	1	4	1	4	1
A 50 Malignant neoplasm of trachea, and of bronchus, and lung, not specified as secondary ...	-	-	-	-	-	-	2	1	42	9	25	3	12	3	81	16	97	46
A 51 Malignant neoplasm of breast ...	-	-	-	-	-	-	4	-	22	-	10	-	8	-	44	44	17	17
A 52 Malignant neoplasm of cervix uteri ...	-	-	-	-	-	-	3	-	7	-	2	-	1	-	13	13	8	8
A 53 Malignant neoplasm of other and unspecified parts of uterus ...	-	-	-	-	-	-	-	-	-	4	3	2	-	9	9	2	2	2
A 54 Malignant neoplasm of prostate ...	-	-	-	-	-	-	1	-	4	-	5	-	8	-	14	-	14	6
A 55 Malignant neoplasm of skin ...	-	-	-	-	-	-	2	-	-	-	5	-	1	2	1	3	2	2
A 56 Malignant neoplasm of bone and connective tissue ...	-	-	-	-	-	-	2	-	-	1	1	1	1	4	2	6	3	3
A 57 Malignant neoplasm of all other and unspecified sites ...	-	-	-	-	1	-	1	1	11	17	14	10	12	14	39	42	81	39
A 58 Leukaemia and aleukaemia ...	1	-	-	-	1	1	1	1	1	2	1	1	1	1	6	5	11	6
A 59 Lymphosarcoma and other neoplasms of lymphatic and haematopoietic system ...	-	-	-	-	-	-	1	4	3	-	-	1	-	5	4	9	4	4
A 60 Benign neoplasms and neoplasms of unspecified nature ...	-	-	-	-	-	-	1	1	-	2	-	1	1	4	5	1	1	1
A 62 Thyrotoxicosis with or without goitre ...	-	-	-	-	-	-	-	3	-	-	-	-	1	4	4	1	4	1
A 63 Diabetes mellitus ...	-	-	-	-	-	-	2	1	2	4	-	8	4	13	17	6	6	6
A 64 Avitaminosis and other deficiency states ...	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1	-	-	-
A 65 Anaemias ...	-	-	-	-	-	-	-	-	-	-	2	-	5	-	7	7	2	2
A 66 Allergic disorders; all other endocrine, metabolic and blood diseases ...	-	-	-	-	-	-	1	1	4	5	5	1	1	6	11	13	24	12
A 67 Psychoses ...	-	-	-	-	-	-	-	-	-	1	-	1	1	2	1	3	1	1
A 70 Vascular lesions affecting the central nervous system ...	-	1	-	-	1	-	1	-	33	24	50	50	70	136	155	211	366	171
A 71 Nonmeningococcal meningitis ...	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1	1	1
A 72 Multiple sclerosis ...	-	-	-	-	-	-	1	1	1	-	-	-	-	2	1	3	2	2
A 73 Epilepsy ...	-	-	-	-	-	-	1	1	-	-	-	-	1	2	1	3	1	1
A 78 All other diseases of the nervous system and sense organs ...	-	-	1	-	-	1	-	2	4	-	1	4	4	9	13	7	7	7
A 79 Rheumatic fever ...	-	-	-	-	1	-	1	-	1	-	1	-	2	3	5	3	3	3
A 80 Chronic rheumatic heart disease ...	-	-	-	-	1	4	3	6	-	7	1	3	5	20	25	10	10	10
A 81 Arteriosclerotic and degenerative heart disease ...	-	-	-	-	-	19	2	100	38	117	73	159	223	395	336	731	175	175
A 82 Other diseases of heart ...	-	-	-	-	-	1	2	5	8	8	20	26	31	39	70	41	41	41
A 83 Hypertension with heart disease ...	-	-	-	-	-	2	-	19	14	34	34	26	40	81	88	169	46	46
A 84 Hypertension without mention of heart disease ...	-	-	-	-	-	-	-	2	2	2	2	3	6	5	11	5	5	5
A 85 Diseases of arteries ...	-	-	-	-	-	1	5	2	8	4	13	16	26	23	49	24	24	24
A 86 Other diseases of circulatory system ...	-	-	-	-	-	2	1	6	6	4	1	4	8	16	24	18	18	18
A 87 Acute upper respiratory infections ...	-	-	-	-	-	-	1	1	1	-	-	1	1	2	3	2	2	2
A 88 Influenza ...	1	-	-	-	-	-	1	1	1	1	1	2	3	5	4	9	3	3
A 89 Lobar pneumonia ...	-	-	-	-	1	-	1	4	1	3	3	4	10	7	17	8	8	8
A 90 Bronchopneumonia ...	6	7	1	1	-	-	1	12	4	23	9	28	29	70	51	121	80	80
A 91 Primary atypical, other and unspecified pneumonia ...	-	-	-	-	-	-	3	1	2	3	7	7	12	11	23	21	21	21
A 92 Acute bronchitis ...	1	-	-	-	-	-	1	-	2	-	3	5	7	5	12	3	3	3
A 93 Bronchitis, chronic and unqualified ...	-	-	-	-	-	-	14	2	15	3	20	13	49	18	67	19	19	19
A 94 Hypertrophy of tonsils and adenoids ...	-	1	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	1
A 96 Pleurisy ...	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	1	1	1
A 97 All other respiratory diseases ...	-	1	-	-	-	1	2	4	2	3	6	8	12	16	23	38	29	29
A 99 Ulcer of stomach ...	-	-	-	-	-	-	3	-	1	1	1	1	5	1	6	5	5	5
A 100 Ulcer of duodenum ...	-	-	-	-	-	-	-	-	-	1	1	1	-	3	4	1	1	1
A 101 Gastritis and duodenitis ...	-	-	-	-	-	-	1	-	-	-	-	-	1	1	1	1	1	1
A 102 Appendicitis ...	-	-	-	-	1	-	1	-	-	-	-	-	3	4	1	5	3	3
A 103 Intestinal obstruction and hernia ...	1	-	-	-	-	-	2	-	-	1	1	2	5	6	6	12	11	11
A 104 Gastro-enteritis and colitis, except diarrhoea of the newborn ...	1	1	-	-	1	-	1	-	2	1	-	3	3	7	10	6	6	6
A 105 Cirrhosis of liver ...	-	-	-	-	-	-	1	1	4	-	2	1	-	7	2	9	6	6
A 106 Cholelithiasis and cholecystitis ...	-	-	-	-	-	-	2	2	2	-	1	3	4	2	6	5	5	5
A 107 Other diseases of digestive system ...	-	1	-	-	-	-	-	-	-	-	-	-	1	5	10	9	9	9
A 108 Acute nephritis ...	1	-	-	-	-	-	1	-	-	-	-	-	2	2	2	2	2	2
A 109 Chronic, other and unspecified nephritis ...	-	-	-	-	3	-	2	1	2	1	6	5	13	7	20	10	10	10
A 110 Infections of kidney ...	-	-	-	-	-	-	1	4	2	1	1	6	4	11	15	13	13	13
A 112 Hyperplasia of prostate ...	-	-	-	-	-	-	1	-	-	-	1	-	5	7	7	4	4	4
A 114 Other diseases of genito-urinary system ...	-	-	-	-	-	-	-	-	-	1	-	-	1	1	1	1	1	1
A 121 Infections of skin and subcutaneous tissue ...	-	-	-	-	-	-	-	-	-	-	2	-	1	1	3	4	1	1
A 122 Arthritis and spondylitis ...	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	1	1	1
A 124 Osteomyelitis and periostitis ...	-	-	-	-	-	-	1	-	-	-	-	-	-	1	1	1	1	1
A 126 All other diseases of skin and musculo-skeletal system ...	-	-	-	-	1	-	-	-	-	-	-	-	-	1	1	1	1	1
A 127 Spina bifida and meningocele ...	-	1	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	1
A 128 Congenital malformations of circulatory system ...	7	2	1	-	-	-	1	-	-	-	1	-	-	9	3	12	10	10
A 129 All other congenital malformations ...	3	5	1	-	-	-	-	-	-	-	-	-	-	4	5	9	9	9
A 130 Birth injuries ...	2	-	-	-	-	-	-	-	-	-	-	-	-	2	2	2	2	2
A 131 Post-natal asphyxia and atelectasis ...	5	2	-	-	-	-	-	-	-	-	-	-	-	5	2	7	6	6
A 132 Infections of the newborn ...	3	1	-	-	-	-	-	-	-	-	-	-	-	3	1	4	3	3
A 135 Ill-defined diseases peculiar to early infancy and immaturity unqualified ...	15	11	-	-	-	-	-	-	-	-	-	-	-	15	11	26	26	26
A 136 Senility without mention of psychosis ...	-	-	-	-	-	-	-	-	-	-	-	10	21	10	21	31	6	6
A 137 Ill-defined and unknown causes of morbidity and mortality ...	1	1	-	-	-	-	1	-	-	1	-	2	1	4	3	7	3	3
AE138 Motor vehicle accidents ...	2	2	-	-	4	-	2	1	4	1	-	2	4	2	16	8	24	19
AE139 Other transport accidents ...	-	-	-	-	1	-	-	-	2	-	-	-	-	3	-	3	3	3
AE140 Accidental poisoning ...	1	-	-	-	1	-	1	-	-	1	1	1	2	4				

CLIMATOLOGICAL OBSERVATIONS

Taken at The Hoe, Plymouth, during the year 1961

	1961	1960	<i>Records and Averages</i>
TEMPERATURES:			
Maximum	78.6 (2nd Sept.)	80.0 (26th June)	87.0 [†] (16/8/47) (12/7/23)
Minimum	29.8 (20th March)	24.6 (14th Jan.)	16.0 [†] (29/1/47) (1/2/47)
Mean	52.4	51.5	51.5***
Daily Range	11.1	11.4	10.7***
Relative Humidity ...	85%	83%	81%***
EARTH TEMPERATURES:			
Earth 1 ft. deep ...	53.5	52.8	52.3*
Earth 4 ft. deep ...	53.6	53.2	52.8**
Minimum on Grass ...	16.5 (28th Dec.)	16.0 (17th and 18th Feb.)	5.0 [†] (2/2/56)
SEA TEMPERATURE:			
Mean 6 ft. deep ...	54.9	54.1	53.3*
RAINFALL:			
Total during year ...	38.89"	49.89"	37.62"***
Greatest fall in one day	1.72" (10th Aug.)	1.35" (20th Jan.)	2.55" [†] (15/8/52)
Number of Rain Days	175	205	190***
SUNSHINE:			
Total number of Hours	1687.2	1715.8	1684.6***
Greatest daily Amount	14.8 (19th June)	14.7 (20th June)	15.3 [†] (3/6/06) (5/6/57)
Number of Sunless days	74	62	63***
WIND:			
prevailing direction	S.W.	E	S.W.***
Highest gust, m.p.h. ...	65 (5th Dec.)	68 (4th Nov.) (1st and 28th Dec.)	96 [†] (8/3/28)

- † Denotes Absolute Record.
- * Denotes a 55 Year Average.
- ** Denotes a 37 Year Average.
- *** Denotes a 60 Year Average.

SOME FEATURES OF THE WEATHER DURING 1961

Sunshine The amount of sunshine recorded for the whole year was around the sixty years' average, but amounts for May, June and July were well above. More cloudy conditions prevailed during August and September, although accompanied by long sunny periods.

Rainfall The rainfall figures for the year at 38.89 inches were slightly above the sixty years' average. The wettest months of the year were January, April and October with 6.17 inches, 6.06 inches and 5.87 inches respectively, but no flooding was experienced locally. The heaviest daily fall was 1.72 inches on 10th August, and falls of 1.08 inches and 1.16 inches were measured in January and October respectively. The total number of rain days for the year was 175 compared with the sixty years' average of 190.

Temperatures The mean temperature for 1961 at 52.4 degrees F. was above the sixty years' average. The mean earth one foot deep and sea temperatures were above the fifty-five years' average. The mean earth four feet deep temperature was above the thirty-seven years' average.

Wind Strong winds were experienced during the winter months with a total of twenty-five days of gale. The highest gust recorded was 65 m.p.h. on 5th December.

PLYMOUTH RESIDENTS CONFINED IN PLYMOUTH:

At home	...	...	...	...	...	1741 (47.1%)
In hospital	...	...	...	...	...	1954 (52.9%)

BIRTH RATES FROM 1920

<i>Year</i>				<i>Plymouth</i>	<i>England and Wales</i>
1920-29	Average	...	...	18.9	
1930-39	Average	...	...	15.4	
1940-49	Average	...	...	21.6	16.9
1950	...	...	...	16.91	15.8
1951	...	...	...	16.49	15.5
1952	...	...	...	15.95	15.3
1953	...	...	...	16.45	15.5
1954	...	...	...	16.46	15.2
1955	...	...	...	16.22	15.0
1956	...	...	...	16.31	15.7
1957	...	...	...	16.59	16.1
1958	...	...	...	16.88	16.4
1959	...	...	...	16.89	16.5
1960	...	...	...	17.01	17.1
1961	...	...	...	17.42	17.4

Stillbirths. Eighty-one stillbirths were notified and registered of which 34 were outward transfers. This left 47 belonging to Plymouth. The Registrar General's allocation was 46 and on this the stillbirth rate is 12.26 which is less than the provisional rate of 18.7 for England and Wales.

STILLBIRTH RATE

YEAR	ENGLAND AND WALES	PLYMOUTH
	<i>Per 1,000 births</i>	<i>Per 1,000 births</i>
1952	22.7	22.70
1953	22.4	20.17
1954	23.5	24.52
1955	23.2	20.22
1956	22.8	23.80
1957	22.4	18.73
1958	21.6	19.60
1959	20.7	21.42
1960	19.7	17.86
1961	18.7	12.26

Number of notified stillbirths—Institutional	...	...	...	...	73
Freedom Fields Hospital	...	...	...	...	71
Alexandra Maternity Home	...	...	...	...	—
Devonport Maternity Home	...	...	...	...	2
Domiciliary	...	...	...	...	8
					—
					81
Less outward transfers	...	...	...	...	34
					—
					47
Inward transfers	...	...	...	...	—
					—
					47
					—
					47
					—

The following information has been extracted from a survey of the records of the 47 Plymouth stillbirths:—

Doctor in attendance	...	...	11	Male stillbirths	...	28
Midwife only in attendance	...	...	36	Female stillbirths	...	19
			—			—
			47			47
			—			—

A. MACERATED: 26. (Freedom Fields Hospital, 21; Own home, 5.)

Duration of pregnancy:

Over 40 weeks	...	...	...	...	...	3
40 weeks	...	...	...	...	...	5
36–39 weeks	...	...	...	...	...	8
30–35 weeks	...	...	...	...	...	8
28–29 weeks	...	...	...	...	...	2
						—
						26
						—

Parity:

1st pregnancy	...	...	...	...	...	8
2nd	„	...	...	...	...	6
3rd	„	...	...	...	...	6
5th	„	...	...	...	...	1
Over 5th pregnancy	...	...	...	...	...	5
						—
						26
						—

Prenatal supervision:

Satisfactory	...	...	...	...	...	24
No antenatal care	...	...	...	...	...	2
						—
						26
						—

Standard of living:

Good	...	...	...	...	...	...	8
Fair	...	...	...	...	...	...	4
Unknown	...	...	...	...	...	...	14
							<hr/>
							26
							<hr/>

Causes:

(a) *Postmature*

Placental insufficiency	...	...	...	...	...	2	
Unknown	...	...	...	...	...	1	
							<hr/>
							3

(b) *Full-term*

Placental insufficiency	...	...	...	...	...	4	
Unknown	...	...	...	...	...	1	
							<hr/>
							5

(c) *36-39 weeks*

Rhesus incompatibility	...	...	...	...	...	1
Placental insufficiency	...	...	...	...	...	3
A.P.H.	...	...	...	...	...	2
Hydrocephaly	...	...	...	...	...	2
							<hr/>
							8

(d) *30-35 weeks*

Hypertension	...	...	...	...	...	1
A.P.H.	...	...	...	...	...	3
Toxæmia	...	...	...	...	...	1
Anoxia	...	...	...	...	...	1
Placental insufficiency	...	...	...	...	...	1
Unknown	...	...	...	...	...	1
							<hr/>
							8

(e) *28-29 weeks*

Rhesus incompatibility	...	...	...	...	...	1	
Hydrocephaly	...	...	...	...	...	1	
							<hr/>
							2
							<hr/>
							26
							<hr/>

B. PREMATURE BUT NOT MACERATED: 8. (Freedom Fields Hospital, 7; Own home, 1.)

Duration of pregnancy

34-36 weeks	...	...	...	...	...	5	
31-32 weeks	...	...	...	...	...	2	
28-30 weeks	...	...	...	...	...	1	
							<hr/>
							8
							<hr/>

Parity						
1st pregnancy	...	...	...	...	...	3
2nd	„	...	...	...	...	1
4th	„	...	...	...	...	1
5th	„	...	...	...	...	3
						<hr/>
						8
						<hr/>

Prenatal supervision						
Satisfactory	...	...	...	...	...	8

Standard of living						
Good	...	...	...	...	...	2
Unknown	...	...	...	...	...	6
						<hr/>
						8
						<hr/>

Causes						
(a)	34-36 weeks					
	Placental insufficiency	...	...	...	...	1
	Cord round neck	...	...	...	...	1
	A.P.H.	...	...	...	...	3
						<hr/>
						5
(b)	31-32 weeks					
	Prolapsed cord	...	...	...	...	1
	Severe Toxaemia - A.P.H.	...	...	...	...	1
						<hr/>
						2
(c)	28-30 weeks					
	A.P.H.	...	...	...	...	1
						<hr/>
						1
						<hr/>
						8
						<hr/>

C. STILLBIRTHS AT OR NEAR TERM: 13. (Devonport Maternity Home 2; Freedom Fields Hospital, 9; Own home, 2.)

Postmature ... 4 Term ... 6 38-39 weeks ... 3

Parity						
1st pregnancy	...	...	...	...	...	6
2nd	„	...	...	...	...	2
4th	„	...	...	...	...	1
5th	„	...	...	...	...	1
Over 5th pregnancy	...	...	...	...	...	3
						<hr/>
						13
						<hr/>

Age						
Under 21 years	...	...	...	...	...	1
21-24 years	...	...	...	...	...	2
25-29	„	...	...	...	...	4
30-34	„	...	...	...	...	1
36-38	„	...	...	...	...	2
Unknown	...	...	...	...	...	3
						<hr/>
						13
						<hr/>

Prenatal supervision						
Satisfactory	...	...	...	...	...	12
Unknown	...	...	...	...	...	1
						<hr/> 13
Standard of living						
Good	...	...	...	...	...	4
Fair	...	...	...	...	...	2
Unknown	...	...	...	...	...	7
						<hr/> 13
Delivery						
Spontaneous		...	...	...	...	8
Instrumental		...	...	...	...	5
						<hr/> 13
Causes						
Anencephaly	...	...	...	...	...	1
Exomphalos	...	...	...	...	...	1
Asphyxia	...	...	...	...	...	2
Placental insufficiency			...	...	...	2
Cord round neck		...	...	...	...	5
Ruptured uterus		...	...	...	...	1
Toxæmia	...	...	...	...	...	1
						<hr/> 13

Circular 20/44, Care of Pre-mature Infants. The total number of live born premature babies belonging to Plymouth was 229, nineteen less than last year. 6.8 per cent of the total notified live births were premature, and of those belonging to Plymouth 6.2 per cent. The survival rate at twenty-eight days was 84.3, and the premature neonatal mortality rate was 157.2.

Neonatal mortality rates in premature babies:

1952	...	...	...	...	...	177
1953	...	...	...	...	...	169
1954	...	...	...	...	...	177
1955	...	...	...	...	...	150
1956	...	...	...	...	...	108
1957	...	...	...	...	...	184
1958	...	...	...	...	...	110.6
1959	...	...	...	...	...	145.8
1960	...	...	...	...	...	157.3
1961	...	...	...	...	...	157.2

Eighteen premature babies left the city during the year, and on the 31st December there were 172 surviving and living in Plymouth.

1960 FOLLOW-UP.

Of the 176 babies surviving in Plymouth on the 31st December, 1960, 14 left the city in the following twelve months, there were 4 deaths and the remaining 158 babies are progressing satisfactorily.

DOMICILIARY PREMATURE BABY NURSING SERVICE

Summary of work done—

Total number of babies attended	...	...	...	...	209
1. Premature babies	...	...	...	...	184
(i.e. 5½ lbs. or under)					
2. Difficult feeders	...	...	...	...	25
(i.e. babies weighing over 5½ lbs. at birth but immature, or presenting feeding difficulties)					

Premature babies:

(a) Babies born on district and nursed at home entirely	31	} 184
(b) Babies born on district and transferred to hospital	...	...	...	...	12
(c) Babies born in hospital and discharged for home nursing when 4lb. 6oz. or over	...	...	...	...	141

Babies born on district and nursed at home entirely:—

<i>Weight Group</i>	<i>No. of babies</i>	<i>Average duration of nursing</i>	<i>Illnesses in first month</i>	<i>Mortality in first month</i>
3 lb. 4 oz. or less ...	—	—	—	—
Over 3 lb. 4 oz. up to and includ. 4 lb. 6 oz. ...	—	—	—	—
4 lb. 6 oz. up to and includ. 4 lb. 15 oz. ...	13	44 days	—	—
4 lb. 15 oz. up to and includ. 5 lb. 8 oz. ...	18	28 days	—	—
TOTALS ...	31	36 days	—	—

The statistical summaries which follow deal with all Plymouth's premature babies whether born at home or in hospital:

PREMATURE OR UNDERWEIGHT BABIES

	Total born in Plymouth	Less Outward Transfers	Plus Inward Transfers	Total belonging to Plymouth	Died within 24 hours	Died 1-28 days	Left Plymouth within 28 days	Surviving and living in Plymouth at 28 days	Died after 28th day and up to 31.12.61	Left Plymouth after 28th day and up to 31.12.61	Surviving and living in Plymouth at 31.12.61	
											Total	Under 1 month
Institutional premature infants ...	266	87	3	182	23	11	3	145	2	11	132	6
Domiciliary premature infants ...	46	-	1	47	-	2	-	45	1	4	40	4
TOTALS ...	312	87	4	229	23	13	3	*190	3	15	172	10

* Belonging to Plymouth and surviving at 1 month. ... 82.96%

	Plymouth Residents only	Plymouth Residents only
Legitimate ...	297 (217)	Male ... 143 (109)
Illegitimate ...	15 (12)	Female ... 169 (120)
	<u>312 (229)</u>	<u>312 (229)</u>

See following Table for more detailed information.

INSTITUTIONAL AND DOMICILIARY PREMATURE, OR UNDERWEIGHT, BABIES — PROBABLE CAUSE OF PREMATUREITY

<i>Probable cause</i>	<i>Total</i>	<i>Less Outward Transfers</i>	<i>Belonging to Plymouth</i>	<i>Died in first 24 hours</i>	<i>Died 1-28 days</i>	<i>Died after 28 days and up to 31.12.61</i>	<i>Left Plymouth as at 31.12.61</i>	<i>Total surviving and living in Plymouth at 31.12.61</i>
Multiple pregnancy	33	8	25	2	-	-	-	23
Spontaneous premature rupture of membranes	18	10	9 (I.T.1)	2	3	-	1	3 (I.T.1)
Induction for supposed post- maturity	15	7	8	-	-	-	-	8
Induction for other reasons	13	3	10	1	1	-	-	8
Toxæmia	29	9	21 (I.T.1)	1	-	-	3	17 (I.T.1)
Hypertension	2	-	2	-	-	-	1	1
A.P.H.:								
Toxæmia	1	1	-	-	-	-	-	-
Placenta prævia	2	1	1	1	-	-	-	-
Unclassified	32	15	17	4	-	-	3	10
Fall	2	2	-	-	-	-	-	-
At term but underweight	23	2	21	-	-	-	1	20
Inadequate placenta	1	1	-	-	-	-	-	-
Pyelitis	1	-	1	-	1	-	-	1
Nephritis	1	-	1	-	-	-	-	-
Abortion	1	-	1	1	-	-	-	1
L.S.C.S.	1	-	1	-	-	-	-	1
Abnormality of Cx.	1	1	-	-	-	-	-	-
Not known	136	27	111 (I.T.2)	11	8	3	9	80 (I.T.2)
TOTALS	312	87	229 (I.T.4)	23	13	3	18	172 (I.T.4)

PREMATURE LIVE AND STILL BIRTHS BELONGING TO PLYMOUTH
GROUPED ACCORDING TO BIRTH WEIGHT

Weight at Birth	PREMATURE LIVE BIRTHS						PREMATURE STILLBIRTHS					
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to Hospital on or before 28th day					
	Total	Died within 24 hours of birth	Survived at 28 days	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days	Born in Hospital	Born at home	Born in Nursing Home
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	34	16	13	-	-	-	2	-	1	12	1	-
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	32	1	28	1 (I.T.)	-	1 (I.T.)	8	-	8	8	-	-
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ... (2,000-2,250 gms.)	42	2	39	13	-	13	4	-	4	3	-	-
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	74	4	68	18	-	18	1	-	-	2	1	-
TOTALS ...	182	23	148	32 (I.T. 1)	-	32 (I.T. 1)	15	-	13	25	2	-

DATA *re* FEEDING OF PLYMOUTH'S 229 PREMATURE BABIES

<i>Domiciliary: 47</i>					
	<i>Deaths</i>	<i>Left Plymouth</i>	<i>Breast Fed</i>	<i>Partly Breast Fed</i>	<i>Artificially Fed</i>
At 2 weeks ...	2	-	23	-	22
At 1 month ...	2	-	13	-	32
At 3 months...	2	2	2	-	41
<i>Institutional: 182</i>					
	<i>Deaths</i>	<i>Left Plymouth</i>	<i>Breast Fed</i>	<i>Partly Breast Fed</i>	<i>Artificially Fed</i>
At 2 weeks ...	34	-	30	8	110
At 1 month ...	34	3	5	-	140
At 3 months...	37	7	1	1	136

INITIAL FEEDING OF 172 PREMATURE BABIES SURVIVING AND LIVING IN PLYMOUTH ON 31ST DECEMBER, 1961

<i>(a) Domiciliary: 40</i>						
Entirely breast fed	...	...	...	...	...	22
Breast fed, plus complementary feeding	...	...	...	...	...	-
Artificially fed	...	...	...	...	...	18
Smallest baby: 3 lb.			Largest baby: 5 lb. 8 oz.			
<i>(b) Institutional: 132</i>						
Entirely breast fed	...	...	...	...	...	27
Breast fed, plus complementary feeding	...	...	...	...	...	6
Artificially fed	...	...	...	...	...	99
Smallest baby: 2 lb. 5 oz.			Largest baby: 5 lb. 8 oz.			

Infant Mortality

Including one inward transfer there were 75 known deaths under one year, a decrease of 10 on 1960. The Registrar General allocated 75 deaths to Plymouth, giving an infant mortality rate of 20.24, the rate for England and Wales being 21.4.

The early neonatal mortality rate is 12.14, the neonatal mortality rate 15.11, and the perinatal mortality rate 24.25.

Of the 56 deaths under one month, 82.1 per cent occurred in the first week, and 62.5 per cent were born prematurely.

The number of deaths under twenty-four hours decreased (as did the number of stillbirths).

<i>Age at Death</i>				<i>Premature</i>	<i>Others</i>	<i>Total</i>
Under 24 hours	...	...	...	22	3	25
1-6 days	...	...	...	9	12	21
				—	—	—
Total under 1 week	...	...	...	31	15	46
1 week-1 month	...	...	...	4	6	10
				—	—	—
Total under 1 month	...	...	...	35	21	56
				—	—	—

In the age group one month to one year, 19 babies died, 11 of the deaths being due to pneumonia in the absence of other defect, 2 to pneumonia with congenital heart defect, 2 to pneumonia with mongolism, 1 to pneumonia with congenital heart defect and mongolism and 1 to congenital defect alone.

Between one year and five years there were 20 deaths (compared with 7 in 1960), including 4 due to road accidents, 4 due to pneumonia, 4 due to other infections, 1 to congenital lesions, 1 following scalds and 1 from tranquilliser tablets swallowed in the belief that they were sweets. It is known that 30 Plymouth children were taken to hospital having taken poisonous substances, during the year.

	<i>Deaths under 1 month</i>	<i>Deaths 0-1 years</i>	<i>Deaths 1-5 years</i>	<i>Total Deaths under 5 years</i>
1952	73	103	17	120
1953	61	98	11	109
1954	71	101	11	112
1955	52	73	8	81
1956	46	62	10	72
1957	59	81	11	92
1958	49	74	14	88
1959	59	78	15	93
1960	66	85	7	92
1961	56	75	20	95

**Gastro-enteritis
in children
under two
years of age.**

There were no deaths from this cause in children under two years of age.

**Ophthalmia
Neonatorum.**

Out of six cases of Ophthalmia Neonatorum, there was a case in which the sight of one eye was lost, the responsible organism being pyocyaneus.

Circular 2866 -

Care of Illegitimate Children and Moral Welfare Work

The number of cases dealt with this year is about the same as in 1960. An interesting point is that the pattern of the work has changed, it will be noted that against 43 girls who went into homes in 1960 there were only 23 in 1961. This means an increase in the number of girls who stayed in Plymouth to have their babies.

The number of babies dealt with shows an increase of 23. Arrangements for 14 of these were made by the Local Authority who placed these babies direct from hospital. Arrangements for 26 babies were made by the Western National Adoption Society, Bath, in which case we fostered the babies pending the completion of arrangements. Six babies were placed by other authorities.

Over £3,200 was administered by this office during the year. Of this amount £1,661 was paid out in grants for Dr. Barnardo's, to whom we are greatly indebted.

There continues to be good co-operation between this department and other social agencies in the city.

The following is a summary of the work done:

Cases on hand from 1960	...	...	...	...	...	280
Cases reported in 1961—						
Unmarried mothers	...	...	...	...	...	174
Married women with illegitimate children	...	...	...	...	...	50
Cases re-opened in 1961—						
Unmarried mothers	...	...	...	...	...	16
Married women with illegitimate children	...	...	...	...	...	16
Reported by:—						256
M. & C.W.	...	...	...	...	...	47
Children Officer	...	...	...	...	...	7
General practitioners	...	...	...	...	...	58
Social workers	...	...	...	...	...	49
City police	...	...	...	...	...	8
Hospital Almoners	...	...	...	...	...	13
National Assistance Board	...	...	...	...	...	11
Probation Officer	...	...	...	...	...	1
Themselves and others interested	...	...	...	...	...	62
						256
						256
Total cases dealt with in 1961	...	...	...	...	...	536
Number of interviews	...	...	...	...	...	2,381
Number of visits	...	...	...	...	...	1,441

Assistance given as follows:—

Taken to Homes—

Rosemundy, Cornwall	12
Dunmore, Exeter	2
St. Raphael's, Bristol	2
Methodist Home, London	5
St. Olave's, Exeter	1
Mount Hope, Bristol	1
	23

Babies:—

Foster homes	44
Adoptions	46
Residential nurseries	7
Sent into care	6
Sent to Dr. Barnardo's	4
Daily minded	4
	111
Helped and advised	79
Passed to other social workers	6
Returned to parents in other towns	4
Work obtained for	15
Sent to lawyer	27
Sent to Court	22
Affiliation investigations	24
Grants, etc., administered	201
Kept in touch with through correspondence	39

Health Visiting.

At the end of the year our health visiting staff was very depleted, and we endeavoured to cope with the work with only 14¹/₂ health visitors and 4 T.B. visitors. In June the Problem Family health visitor resigned, but owing to the acute shortage of health visitors we were unable to replace her.

The number of children under 5 years visited was 801 more than in 1960. The average case load of children under 5 years for each health visitor was 1,058. We had at the end of the year 14,829 children under 5 years on our register. The total number of home visits paid was 41,455 and 2,463 clinic attendances were made.

Ten courses on mothercraft were given in the schools, 22 talks to outside organisations and 286 talks at our Child Welfare Centres and relaxation clinics.

Three health visitors co-operated in giving sixty lectures on Child Welfare at the Plymouth and Devonport Technical College, and it is hoped to repeat these courses in the future.

Three health visitors and one T.B. visitor attended refresher courses, and health visitors took student nurses and social workers out for district experience.

The Phenistix napkin test was carried out on all Plymouth babies.

Some health visitors attended the monthly case conference with the psychiatrist and the psychiatric social workers.

One health visitor called at the surgery of a general practitioner on alternate weeks, when he was holding a child welfare clinic. We hope to expand this service as the staff situation permits.

Good liaison between health visitors and hospital is maintained, and all requests for visits to discharged patients are met, and patients who have defaulted appointments at consultant and antenatal clinics are also visited. These requests come usually from almoners and ward sisters.

Summary of visits:

Births	...	...	...	...	...	...	...	3794
1st year visits	...	...	...	...	...	...	...	9689
Re-visits, 1-2 years	...	...	...	...	...	...	...	5421
Re-visits, 2-5 years	...	...	...	...	...	...	...	12149
1st antenatal visits	...	...	...	...	...	...	...	380
Re-antenatal visits	...	...	...	...	...	...	...	127
Visits <i>re</i> infectious diseases	...	...	...	...	...	...	...	95
After-care, hospital cases	...	...	...	...	...	...	...	122
After-care, doctors' cases	...	...	...	...	...	...	...	20
Special visits (including visits to aged and problem families)								2980
No access visits	...	...	...	...	...	...	...	6678
								<hr/> 41455 <hr/>

The 95 visits in connection with infectious diseases are made up as follows:

Cerebro-spinal meningitis	...	...	...	...	...	...	...	24
Chicken-pox	...	...	...	...	...	...	...	1
Diphtheria	...	...	...	...	...	...	...	16
Dysentery	...	...	...	...	...	...	...	2
Encephalitis lethargia	...	...	...	...	...	...	...	3
Influenza	...	...	...	...	...	...	...	2
Measles	...	...	...	...	...	...	...	31
Mumps	...	...	...	...	...	...	...	1
Poliomyelitis	...	...	...	...	...	...	...	7
Tuberculosis	...	...	...	...	...	...	...	3
Tonsillitis	...	...	...	...	...	...	...	1
Whooping cough	...	...	...	...	...	...	...	4
								<hr/> 95 <hr/>

CHILD WELFARE SESSIONS

	<i>Beacon Park</i>	<i>Beaumont Hut</i>	<i>Crownhill</i>	<i>Devonport Park</i>	<i>Efford</i>	<i>Ernesettle</i>	<i>Honicknowle</i>	<i>Laira</i>	<i>Peverell</i>	<i>St. Budeaux</i>	<i>Southway</i>	<i>Town Hall, Stonehouse</i>	<i>Whiteleigh Hall</i>	<i>Totals</i>
No. of sessions held ...	100	203	51	100	51	48	48	52	102	102	51	52	52	1,012
No. of attendances:														
0-1 year { 1st attend.	251	657	171	324	142	65	130	98	261	338	100	154	106	2,797
Re-attend.	2,900	6,623	1,634	3,656	1,555	637	1,215	1,768	2,797	3,023	965	1,205	865	28,843
1-2 years ...	552	1,070	389	394	278	152	348	268	708	589	302	252	231	5,533
2-5 years ...	388	1,007	305	171	222	145	625	235	510	334	610	105	315	4,972
Total ...	4,091	9,357	2,499	4,545	2,197	999	2,318	2,369	4,276	4,284	1,977	1,716	1,517	42,145
Average attendance per session ...	40.9	46.1	49	45.5	43.1	20.8	48.3	45.6	41.9	42	38.8	33	29.2	41.6
Doctors' consultations ...	1,252	2,265	674	1,078	719	387	540	611	1,183	1,156	618	512	469	11,464
Vaccination and Immunisation: No. of attendances ...	-	-	-	-	1,086	686	-	543	-	-	-	895	-	3,210

Health talks given by: (a) Health Visitors ... 308
(b) Midwives ... 208

Attendances at local health authority clinics by: (a) Health Visitors ... 2,463
(b) S.R.Ns ... 1,184

T.B. VISITORS

The four T.B. visitors paid 2,380 home visits, including 704 'no access' visits. X-ray Survey was carried on in five districts, each household being visited at least once.

The notified cases of respiratory T.B. numbered 160, and non-respiratory 15, being an increase of 19 on respiratory and 5 on non-respiratory compared with 1960.

One visitor attended once weekly at the Scott Isolation Hospital

Problem Families Unfortunately we had a problem families health visitor for only six months of the year, and during that period all her time was devoted to this work. She had twenty families under her special care.

The families were classified as follows:

(1) The hard core problem families	...	...	...	10
(2) Potential problem families	...	...	...	6
(3) Families with a problem	...	...	...	4

Four of the hard core problem families resided in Part III accommodation, 4 in Corporation property and 2 in private accommodation.

The services of a home help were used in a few cases.

We hope to allocate a health visitor to problem families early in 1962, otherwise much of the work of the past five years would be lost.

Child Welfare Centres The sessions at our thirteen Child Welfare Centres remained unchanged, and the average attendance per session was 41.6, a slight rise on 1960.

For details, see table on page 32a.

Welfare Food Service During 1961 there were seventeen distribution centres, thirteen of these being in our Child Welfare Centres. We are grateful to members of the Women's Voluntary Service and others for their help.

Summary of issues :

				<i>National Dried Milk</i>	<i>Cod Liver Oil</i>	<i>Vitamin A and D Tablets</i>	<i>Orange Juice</i>
				<i>tins</i>	<i>bottles</i>	<i>packets</i>	<i>bottles</i>
1960	...	...	...	89,877	12,221	10,331	105,881
1961	...	...	...	81,186	8,884	7,557	68,247

The fall in issues of vitamins resulted mainly from the introduction of charges on 1st June, 1961.

Handicapped Children

Thirty-two children reached the age of five during the year with a handicap persisting as follows:

Strabismus	...	...	...	...	3
Methæmoglobinæmia and strabismus	...	...	...	...	1
Hare-lip and cleft palate	...	...	...	...	2
Defective vision	...	...	...	...	1
Facial palsy	...	...	...	...	1
Defective speech	...	...	...	...	1
Hydrocephalus	...	...	...	...	1
Mongolism	...	...	...	...	3
Mental retardation	...	...	...	...	4
Cerebral palsy	...	...	...	...	3
Dwarfism	...	...	...	...	1
Shortening of left arm	...	...	...	...	1
Diabetes	...	...	...	...	1
Congenital heart disease	...	...	...	...	3
Hepato-splenomegaly	...	...	...	...	1
Cœliac disease	...	...	...	...	1
Shortening of left leg	...	...	...	...	1
Malformation of feet and ankles	...	...	...	...	1
Talipes	...	...	...	...	2
					—
					32
					—

Ultra-Violet Light Clinics

Sessions were held as necessary at St. Budeaux Child Welfare Centre.

Number of sessions	...	...	...	66
First attendances	...	...	...	34
Re-attendances	...	...	...	648
Average attendance	...	...	...	10.3

Nurseries and Child Minders Regulation Act, 1948

Two of the registrations under this Act were recorded during 1961 as not functioning.

Antenatal

As the attendances at medical antenatal sessions fell, the sessions at three of our centres were discontinued and the work transferred to neighbouring clinics. Total first attendances and average attendance per session fell very slightly.

ANTENATAL CENTRES — MEDICAL SESSIONS

	Beacon Park	Beaumont Hut	Crownhill	Devonport Park	Efford	Ernesettle	Honick- nowle	Laira	St. Budeaux	Stonehouse	Totals
No. of Medical Officers' sessions held ...	51	151	51	52	15	13.5	14.5	29.5	51	52	480.5
1st attendances	128	379	84	132	14	9	10	45	50	170	1,021
Re-attendances	534	1,421	333	391	61	30	62	214	202	536	3,784
Miscellaneous (Bloods attendances only) { 1st re-	31	182	11	28	29	4	12	12	70	54	433
	3	5	-	1	2	-	1	-	4	1	17
Total attendances { 1st re-	159	561	95	160	43	13	22	57	120	224	1,454
	537	1,426	333	392	63	30	63	214	206	537	3,801
Average attendance per session ...	13.6	13.2	8.4	10.6	7.1	3.2	5.9	9.2	6.4	14.6	10.9
No. of transfers from 1960	24	67	9	23	6	2	9	6	9	44	199
Total No. of women attending during 1961 { A.N. Misc.	152	446	93	155	20	11	19	51	59	214	1,220
	183	628	104	183	49	15	31	63	129	268	1,653
	31	182	11	28	29	4	12	12	70	54	433

Out of 1,063 routine Wassermann and Kahn tests, there were 5 positive.

Hæmoglobin estimations were performed on 1,112 specimens.

Postnatal The postnatal session is combined with one of our antenatal sessions. Only 27 women out of 54 attended.

No. of women given an appointment	...	...	54
No. of first attendances	...	...	27
No. requiring advice or treatment	...	...	22

Hospital Maternity Homes Nine hundred and one Plymouth women were admitted to the Alexandra and Devonport Maternity Homes for confinement on social as distinct from medical grounds.

Chest Radio-graphy of Expectant Mothers Three hundred and forty-two expectant mothers were referred through this department, two hundred and fifty-five attended (about seventy-five per cent). No case of active tuberculosis was found.

The total number of Plymouth expectant mothers who had chest X-ray was 942.

Relaxation and Mothercraft Classes Classes continued to be held at Crownhill, Honicknowle and Stonehouse Centres, and were well attended.

Attendances were as follows:

		<i>Crownhill</i>	<i>Honicknowle</i>	<i>Stonehouse</i>
Number of sessions	...	104	49	97
1st attendances	...	232	96	233
Re-attendances	...	1765	665	1692
Average attendance	...	19.2	15.5	19.8

Supervision of Midwives Number notifying their intention to practise 94
Number practising in the area at 31.12.61 75

			<i>As Midwife</i>
Municipal (including non-medical supervisor and tutor)	...	...	32
In private practice	...	...	1
Alexandra Maternity Home	...	...	12
Freedom Fields Hospital	...	...	21
Devonport Maternity Home	...	...	9
			—
			75
			—

Fifteen cases were attended by midwives in private practice (all by one midwife).

Approximately 74 per cent of confinements, district and institutional were attended by midwives only.

Other notifications received under the Central Midwives Board rules were:

Notification of stillbirth	2
Notification of having laid out a dead body ...	2
Notification of liability to be a source of infection	3

Medical aid was sought by midwives in 203 cases for the following reasons:

(i) FOR MOTHER DURING PREGNANCY:

Persistent vomiting	1
Fainting attacks	1
Hæmaturia	1
Hypertension	2
Albuminuria	1
Pre-eclamptic toxæmia	1
A.P.H.	9
Abnormal presentation of foetus	3
Premature rupture of membranes	2
Meconium stained liquor	1
Postmaturity	2
Inevitable abortion	1
—	25

(ii) FOR MOTHER DURING LABOUR:

Premature labour	9
High presenting part	1
Toxæmia	1
A.P.H.	1
Breech presentation	3
Maternal distress	1
Fœtal distress	9
Prolonged labour	32
Retained placenta	2
Perineal laceration	69
Episiotomy to be sutured	5
B.B.A.	2
Hypertension	2
—	137

(iii) FOR MOTHER DURING PUERPERIUM:

Macerated stillborn infant	1
Cerebral anæmia	1
P.P.H.	17
Pyrexia	5
Inflamed vein of leg	1
Engorged breasts	1
To suppress lactation	2
Hypertension	1
—	29

(iv) FOR INFANT:

? Trauma of baby's arm	...	...	...	1
Unsatisfactory condition	...	...	...	5
Cyanotic attack and high pitched cry	...	...	...	1
Spina bifida	...	...	...	1
Blue asphyxia	...	...	...	1
Persistent vomiting	...	...	...	2
Ophthalmia	...	...	...	1
				— 12
				<u>203</u>

**Municipal
Midwifery
Service**

Out of an establishment of 30 midwives, not including a superintendent and a tutor, 2 midwives devoted their time to the care of premature babies. The number of teaching midwives was 12.

Twenty-two pupils enrolled in the training school, and during the year 22 sat for the Part II examination of the Central Midwives Board, all being successful.

First attendances at the midwives' antenatal sessions were 1,449, re-attendances were 6,064. The average attendance was 13.1, the same as in 1960.

See Table on page 38a.

The total number of confinements attended was 1,732, 96.9 per cent of cases having a doctor booked. The forceps rate was 1.6 per cent, and the stillbirth rate was 4.6 per 1,000 births.

The following is a summary of the work done throughout the year:

MUNICIPAL MIDWIVES

Number of cases attended:

(a) Doctor <i>not booked</i> but present at delivery	...	...	3
(b) Doctor <i>not booked</i> and not present at delivery	...	...	50
(c) Doctor <i>booked</i> and present at delivery	...	...	390
(d) Doctor <i>booked</i> but not present at delivery	...	...	1289
			— 1732

Number of cases booked 2177

Number of gas and air and trilene administrations:

	<i>Gas and Air</i>	<i>Trilene</i>	
(a) Doctor present at delivery	247	112	
(b) Doctor not present at delivery	837	314	
	<u>1084</u>	<u>426</u>	
			1510

Number of instrumental deliveries:

(a) Doctor not booked	...	...	...	...	...	—
(b) Doctor booked	...	...	...	...	...	28	
						—	28
Number of emergency deliveries	...	...	...	...	...		10
Number of booked miscarriages	...	...	...	...	...		2
Number of patients transferred to hospital for confinement							93
Number of patients transferred to hospital after confinement							10
Number of antenatal home visits by midwives	...	...					12683
Number of clinic attendances by midwives	...	...					1728
Number of notifiable puerperal pyrexia cases	...	...					9
Number of accouchement sets issued at Welfare Centres							1924

Fees paid to Doctors A sum of £90, being £61 less than last year, was paid by the local authority to general practitioners for twenty-seven accounts submitted under section 14 of the Midwives' Act, 1951.

Maternity and Nursing Homes Routine visits were paid to the three nursing homes for chronic cases, which have a total of fifty-five beds, and to the mother and baby home which can accommodate eight expectant mothers and five mothers with babies.

Maternal Mortality There were no maternal deaths in Plymouth during the year.

MATERNAL MORTALITY

YEAR	ENGLAND AND WALES		PLYMOUTH	
	<i>Per 1,000 total births</i>		<i>Per 1,000 total births</i>	
	<i>Including Abortions</i>	<i>Excluding Abortions</i>	<i>Including Abortions</i>	<i>Excluding Abortions</i>
1952	0.72	0.59	0.84	0.56
1953	0.76	0.65	1.61	1.07
1954	0.70	0.59	1.09	0.81
1955	0.64	0.54	0.83	0.83
1956	0.56	0.46	0.27	0.27
1957	0.47	0.37	0.27	0.27
1958	0.43	0.35	0.54	0.54
1959	0.38	0.32	0.80	0.53
1960	0.39	0.31	Nil	Nil
1961	0.33	0.27	Nil	Nil

ANTENATAL CLINICS—MIDWIVES' SESSIONS

	Beacon Park	Beaumont Hut	Crownhill	Devonport Park	Efford	Ernest settle	Honick- nowle	St. Budeaux	Southway	Town Hall, Stonehouse	Totals
No. of midwives' sessions held ...	64	102	48	52	50	51	51	52	51	51	572
1st attendances ...	178	341	86	209	66	72	167	150	51	129	1,449
Re-attendances ...	746	1,625	238	727	360	413	475	571	157	752	6,064
Total attendances ...	924	1,966	324	936	426	485	642	721	208	881	7,513
Average attendance per session	14.4	19.3	6.8	18	8.5	9.5	12.6	13.9	4.1	17.3	13.1
No. of transfers from 1960 ...	72	49	22	78	33	18	37	44	4	48	405
Total No. of women attending during 1961 ...	250	390	108	287	99	90	204	194	55	177	1,854

Puerperal Pyrexia	Total notifications	22
	Outward transfers	4
		—
	Belonging to Plymouth ...	18
		==

Among the four outward transfers, there was one with some evidence of uterine infection, two were due to other infections and in one case the cause was not found.

The total number of notifications again shows a decline. The puerperal pyrexia rate is 4.8.

The following data refer only to Plymouth cases:

PLACE OF CONFINEMENT:

Own home	11
Freedom Fields Hospital	4
Devonport Maternity Home	3
	—
	18
	—

WHERE TREATED:

Own home	9
Freedom Fields Hospital	6
Devonport Maternity Home	3
	—
	18
	—

CAUSES OF PYREXIA:

Influenza	1
Anæmia	2
Reaction to iron injections	1
Cholecystitis	1
Engorged breasts	1
Urinary infection	6
Uterine infection	2
Not known	4
	—
	18
	—

**Family
Planning**

The Plymouth Branch of the Family Planning Association continued to hold sessions at Beaumont and St. Budeaux Child Welfare Centres, the number of new cases seen being more than in 1960.

Attendances were as follows:

	<i>Beaumont Hut Centre</i>	<i>St. Budeaux Centre</i>
No. of clinics held	80	48
New cases seen by doctor	510	283
Total return visits	2,731	1252
Return visits seen by doctor	1077	531

Day Nursery Arrangements at the nursery continued as in previous years. The average daily attendance was affected by outbreaks of measles and whooping cough.

The number of children on the register rose from 30 at the beginning of the year to 32 at the end of the year.

	<i>0-2 years</i>	<i>2-5 years</i>
No. of children admitted during the year	9	30*
No. of children discharged during the year	3*	34
No. of children registered at the end of the year	6	26
Average daily attendance	2.9	14.8

* Excludes 3 transfers to 2-5 years group.

DENTAL TREATMENT OF MOTHERS AND YOUNG CHILDREN

SENIOR DENTAL OFFICER—MR. R. M. MAYNARD

The following table shows the treatment given to Expectant and Nursing Mothers, and Children under Five Years, during 1961:

		Expectant and Nursing Mothers ..	144	137	92	82	51	242	-	101	28	21	2
		Children under Five ..	242	201	188	173	6	25	9	382	-	-	1
	<i>Examined</i>												
	<i>Needing Treatment</i>												
	<i>Treated</i>												
	<i>Made Dentally Fit</i>												
	<i>Scalings and Gum Treatment</i>												
	<i>Fillings</i>												
	<i>Silver Nitrate Treatment</i>												
	<i>Crowns and Inlays</i>												
	<i>Extractions</i>												
	<i>General Anaesthetics</i>												
	<i>Dentures</i>												
	<i>Full</i>												
	<i>Partial</i>												
	<i>Radiographs</i>												

Sanitary Circumstances of the Area

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

MR. W. G. LOCK

Introduction In presenting this report, I would again like to place on record my appreciation of the help given to me during the year by Dr. Peirson and of the support and co-operation which I have received from my staff.

It is also pleasing to be able to report that although one of the District Public Health Inspectors left to take up an appointment in North Devon, four inspectors, one of whom had been previously employed in the department, were appointed to fill vacancies.

WATER SUPPLY

Consumption The average daily consumption of water was 15.7 million gallons per day, an increase of .4 million gallons over that for the previous year.

Supply The rainfall over the catchment area was 68.06 inches, which was just over half an inch less than the long term average of 68.61 inches: on the other hand, the summer rainfall of 30.03 inches was greater than the average (29.65 inches).

The supplies of water during the year were adequate and no restrictions in the use of water were imposed.

From the 21st June to the 18th August, 274 million gallons of water were pumped from the River Tavy.

On an emergency basis, 90,060,000 gallons of water were supplied to Paignton and 10,824,000 gallons to Plympton.

Water Treatment Chlorine to the extent of 0.5 part per million has been added to the water at Burrator, and except for the water supplied to the high level districts, the water has been filtered and again chlorinated at Crownhill.

The Yelverton supply has been treated with an average dose of 1.0 part per million of chlorine and with soda ash to correct the pH.

The River Tavy water has been chlorinated, treated with coagulants, settled, filtered and again chlorinated.

Bacteriological Examination

During 1961, with a view to ensuring that a pure supply of water was maintained, 168 routine samples were examined and submitted to bacteriological examination. The results of these examinations are shown in the following table:

<i>Source</i>	<i>Total Number of Samples</i>	<i>B. Coli present in 100 ml.</i>	<i>B. Coli absent in 100 ml.</i>
From City Mains ...	161	20 (14 non-faecal)	141
From Wells and Springs ...	7	5 (1 non-faecal)	2
GRAND TOTALS ...	168	25 (15 non-faecal)	143

In addition to the samples shown in the above table, whilst water was being obtained from Lopwell Dam from 17th June to 18th August inclusive, samples of water were taken daily from the covered reservoir at Crownhill which receives the Lopwell water after treatment. These samples, 120 in number, were all returned: "B.Coli absent in 100 ml."

Chemical Analysis

Six samples of water were submitted for chemical analysis. The following table gives a summary of the results of these, the figures representing parts per million:

CHEMICAL ANALYSIS OF WATER DURING 1961

(parts per million)

	<i>March</i>	<i>September</i>	<i>November</i>
Temporary Hardness ...	6.0	8.0	6.0
Permanent Hardness ...	13.0	15.0	16.0
Total Hardness	19.0	23.0	22.0
Chlorine as Chlorides ...	10.0	10.0	11.0
Ammonia, saline	Nil	0.004	0.004
Ammonia, albuminoid ...	0.036	0.062	0.016
Nitrates as nitrogen	Nil	Nil	Nil
Nitrites as nitrogen	Nil	Nil	Nil
Oxygen (absorbed 4 hours at 27° C.)	0.35	0.5	0.2
Metals (zinc, copper, lead, iron and manganese)	Nil	Nil	Nil
pH value	7.0	7.2	6.9

I am indebted to the Water Engineer for part of the foregoing information.

SWIMMING POOLS

Samples of water were taken regularly for bacteriological examination from the swimming pools in the city, and the results are shown in the following table:

RESULTS OF BACTERIOLOGICAL EXAMINATION OF SAMPLES OF WATER OBTAINED FROM BATHING POOLS IN THE CITY DURING 1961

<i>Source</i>	<i>Total Number Samples</i>	<i>B.Coli present in 100 ml.</i>	<i>B.Coli absent in 100 ml.</i>
Tinside Bathing Pool ... (sea water)	14	4 (all faecal)	10
Mount Wise Ladies' Bathing Pool (sea water) ...	16	5 (all faecal)	11
Mount Wise Men's Bathing Pool (sea water) ...	15	2 (1 faecal)	13
Mount Wise Infants' Paddling Pool (city mains) ...	15	2 (both faecal)	13
Mount Wise Infants' Boating Pool (sea water) ...	15	8 (7 faecal)	7
Munday House ... (city mains)	7	2 (both faecal)	5
Glenholt Camp ... (city mains)	10	4 (2 faecal)	6
Pennycross Primary School... (city mains)	9	1 (faecal)	8
Central Park Paddling Pools (city mains)	14	8 (all faecal)	6
Devonport Park Paddling Pool (city mains)	7	4 (all faecal)	3
Plymouth College ... (city mains)	7	1 (faecal)	6
Efford Secondary Modern School (city mains) ...	4	Nil	4
GRAND TOTALS ...	133	41 (37 faecal)	92

The Tinside and Mount Wise Ladies' and Men's Pools are filled by pumping from the sea. The pools are changed two to three times per week, depending upon the state of the tides. Chlorine is automatically added whilst the pools are being filled. The water in the Tinside Pool is circulated and chlorine is automatically added during circulation. Chlorine is added by hand daily to the water of the ladies' and men's pools at Mount Wise in addition to that added during the filling of the pools. The Mount Wise Infants' Boating Pool is filled by pumping from the sea, and changed two to three times per week. Chlorine is added by hand daily to this pool. The Mount Wise Infants' Paddling Pool is now filled daily from the sea, and chlorine is added by hand.

A continuous circulating, filtrating and chlorinating plant has now been installed at the Plymouth College.

The other swimming pools filled from the city mains are changed once weekly, and chlorine is added daily by hand. The two parks paddling pools are filled from the city mains and are changed twice weekly, chlorine being added by hand daily.

Another school (Efford Secondary Modern) finished the construction of a swimming pool this year. This pool is filled from the city mains and the water is changed weekly; chlorine is added daily by hand. Montpelier Junior School has a prefabricated swimming pool in the course of erection and hopes to complete it in time for the summer season of 1962. This pool will also be filled with mains water and will have a continuous circulating, filtrating and chlorinating plant. Other schools have in view schemes for the construction of swimming pools.

SEWERAGE AND SEWAGE DISPOSAL

The following improvements to the main drainage system of the city, for which information I am indebted to the City Engineer, have been carried out during the year:

Reconstruction of Sewers Lengths of sewers which were found to be defective in the Lipson, Crownhill, St. Budeaux and Egg-buckland districts of the city have been reconstructed and in some cases enlarged to allow for future development. Expenditure on this type of work has amounted to £16,000.

Extension of Sewers A completely separate system of main sewers has been provided for the Powisland Estate, Crownhill (55 acres) at a cost of £28,900.

The houses already built on this estate had been drained to individual septic tanks located in their gardens but have now been connected to the new main drainage system.

The foul sewers were taken to the Southern (Southway) Valley sewer which, when it was constructed, was designed to take this area. The sewage is treated at the Ernesettle Sewage Disposal Works. The storm water is taken to the Southern Valley stream which discharges into a creek at Tamerton Foliot.

Maintenance of Sewers A gang of men has been employed for the full year on clearing silt from sewers in the low-lying areas of the city and many tons of grit have been removed.

SANITARY INSPECTION OF THE AREA

The number of complaints of housing defects and nuisances received and given attention by the Health Department during the year was 1,787.

Prosecutions In the case of one property, where a nuisance existed due to dampness and disrepair, and where the owner had failed to carry out the requirements of an Abatement Notice, it was necessary to arrange for the institution of legal proceedings. The work, however, was completed before the need arose for the making of a Nuisance Order.

It was also necessary to refer to the Magistrates a case where the owner of a house had failed to comply with a Nuisance Order and the owner was fined two pounds. The work was subsequently satisfactorily completed.

Moveable Dwellings There are two licensed caravan sites in the city, one, situated at Richmond Walk, being licensed in respect of one caravan only, and the other, at Glenholt, in respect of 207 caravans and 75 chalets. In accordance with the provisions of the Caravan Sites and Control of Development Act, new licences, to which conditions based on the model standards suggested by the Ministry of Housing and Local Government were attached, were issued in respect of these sites.

In July, 1960, an application from the owner of land on the outskirts of the city for a licence to station tents and a caravan on his land was refused by the City Council on the grounds of the unsuitability of the site. Subsequently, the owner appealed against the City Council's decision and the appeal was heard by the Magistrates in January when it was dismissed.

Common Lodging Houses There are two registered common lodging houses in the city, one providing accommodation for 82 men and the other for 108 men. These houses are regularly inspected and during the year it became necessary in the case of each property to request the carrying out of certain works of repair and redecoration

Factories and Outworkers

Details of the sanitary inspections of factories under the Factories Act, 1961, and of outwork carried on within the city are given in the following tables.

In accordance with the Factories Act, firms in the city employing outworkers have to send to the Council lists of these outworkers and during the year the names of 183 such workers have been received. Those resident within the city area were visited to ensure that the premises in which the work, all of which is connected with wearing apparel, was being carried on were satisfactory from the point of view of the health of the worker. In the cases of those houses situated outside Plymouth, the authorities concerned were notified.

1. INSPECTIONS for purposes of provisions as to health.

<i>Premises</i> (i)	<i>Number on Register</i> (ii)	<i>Number of</i>		
		<i>Inspections</i> (iii)	<i>Written Notices</i> (iv)	<i>Occupiers prosecuted</i> (v)
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by local authorities	44	84	5	—
2. Factories not included in (1) in which Section 7 is enforced by the local authority	531	492	33	—
3. Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises) ...	69	69	2	—
TOTAL	644	645	40	—

2. Cases in which defects were found.

<i>Particulars</i>	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred to H.M. Inspector</i>	<i>Referred by H.M. Inspector</i>	
(i)	(ii)	(iii)	(iv)	(v)	(vi)
Want of cleanliness(s.1)	10	10	1	—	—
Overcrowding (s. 2)	—	—	—	—	—
Unreasonable temperature (s. 3)	—	—	—	—	—
Inadequate ventilation (s. 4)	2	2	—	—	—
Ineffective drainage of floors (s. 6)	—	—	—	—	—
Sanitary Conveniences (s. 7)(a) Insufficient ...	9	9	—	—	—
(b) Unsuitable or defective ...	17	17	—	13	—
(c) Not separate for sexes	2	2	—	2	—
Other offences against the Act (not including offences relating to Outwork)	1	1	1	—	—

PREMISES
INSPECTED.

The following table shows the number of inspections of various premises carried out during the year, together with information regarding the action taken as a result of these inspections:—

Premises Inspected	Inspections or Visits	Intimation Notices served or Improvements required	Intimation Notices complied with or Improvements effected	Statutory Notices served during the year	Statutory Notices complied with during the year
Houses inspected (Public Health and Housing Acts) ...	3,121	1,201	—	111	—
Houses reinspected (Public Health and Housing Acts)	6,682	—	1,236	—	107
No. of premises (other than houses) inspected ...	289	33	34	—	—
No. of Interviews	802	—	—	—	—
Visits to contacts of infectious diseases	2	—	—	—	—
No. of houses visited regarding:—					
Notifiable diseases	505	—	—	—	—
Visits regarding Food Poisoning	102	—	—	—	—
Bakehouses	187	14	13	—	—
Butchers	590	82	79	—	—
Cinemas and Amusement Places	28	5	5	—	—
Common Lodging Houses	16	2	2	—	—
Dairies and Milk shops	461	12	12	—	—
Food Vehicles	82	2	2	—	—
Fresh Fish Shops	109	6	5	—	—
Fresh Fish Carts	21	3	3	—	—
Fried Fish and Chip Shops	102	7	8	—	—
Fruit and vegetable shops	157	14	14	—	—
Hairdressing establishments	77	4	4	—	—
Ice Cream Premises	517	2	2	—	—
Knackers Yards	14	1	1	—	—
Markets	105	—	—	—	—
Meat Vehicles	158	—	—	—	—
Number of shops visited regarding Merchandise Marks					
Act	446	10	10	—	—
Milk Vehicles	86	—	—	—	—
Mobile snack bars	12	—	—	—	—
Offensive Trades	12	1	1	—	—
Outworkers premises	186	—	—	—	—
Pet Shops	16	—	—	—	—
Premises to examine foodstuffs	1,081	—	—	—	—
Provision Shops	744	93	83	—	—
Public Houses	61	12	16	—	—
Public Conveniences	559	14	14	—	—
Rag Flock premises	16	1	1	—	—
Restaurants and other food preparation premises ...	558	38	37	—	—
Schools	14	—	—	—	—
Second-hand shops	24	—	—	—	—
Shops (under Shops Act)	86	1	1	—	—
Sites	241	40	42	—	—
Slaughterhouses	35	—	—	—	—
Smoke observations	34	—	—	—	—
Swimming baths	169	—	—	—	—
Tents, Vans, Sheds, etc.	30	1	1	—	—
Tips	74	2	2	—	—
Houses inspected for infestation by rats or mice ...	725	655	—	—	—
Houses reinspected for infestation by rats or mice ...	1,424	—	650	—	—
Premises other than houses inspected for infestation by rats or mice	392	373	—	—	—
Premises other than houses reinspected for infesta- tion by rats or mice	583	—	348	—	—
Rent investigations	25	—	—	—	—
Miscellaneous	1,109	—	—	—	—
Water Courses	308	—	—	—	—

3. Outwork (Sections 133 and 134).

Nature of Work	SECTION 133			SECTION 134		
	<i>Number of out-workers in August list required by Section 110 (1) (c)</i>	<i>Number of cases of default in sending lists to the Council</i>	<i>Number of prosecutions for failure to supply lists</i>	<i>Number of instances of work in unwholesome premises</i>	<i>Notices served</i>	<i>Prosecutions</i>
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing apparel, making, etc. ...	183	-	-	-	-	-

Rodent Control

The number of complaints of rats and mice infestation received during the year was 1,011 and details of the inspections made as a result of these complaints are given in the following table:

	Owned by Local Authority	Type of Property		Total
		Dwellinghouses (including Council houses)	Other premises	
Number of properties inspected as result of:				
(a) Notification	115	632	264	1011
(b) Survey	6	42	7	55
(c) Otherwise	—	51	—	51
Total inspections carried out	235	2149	740	3124
Number of properties inspected found to be infested by:				
(a) Rats				
{ Major infestation...	3	3	3	9
{ Minor infestation...	76	421	136	633
(b) Mice				
{ Major infestation...	—	1	1	2
{ Minor infestation...	36	230	118	384
Number of infested properties treated by Local Authority ...	115	655	258	1028
Number of "Block" control schemes carried out ... 53				

By the end of the year, with the co-operation of owners and occupiers, successful treatments had been effected in respect of 650 houses and 348 other premises.

Treatment of Sewers

Two campaigns, each lasting five weeks, were carried out during the year. The results from the test baiting carried out in areas which had been treated with poisoned baits on previous occasions were most satisfactory and all areas showed a decrease in the rat population.

The next campaign will be concentrated on clearing the sewers which are in close proximity to docks and along waterfronts where the most persistent infestation usually occurs.

Rag Flock Five samples of filling materials were taken for analysis during the year under the Rag Flock and Other Filling Materials Act, 1951, of which three consisted of rag flock, one of cotton felt and one of woollen mixture felt. All the samples were returned as satisfactory.

Fertilisers and Feeding Stuffs Five samples of fertilisers and one of feeding stuff were taken for analysis, all of which were found to be satisfactory.

National Survey of Air Pollution In December, 1960, the City Council were invited by the Department of Scientific and Industrial Research to participate in a National Survey of Air Pollution. This followed a report of a Working Party set up by the Standing Conference of the Local Authorities and other organisations co-operating with the Department of Scientific and Industrial Research in the investigation of air pollution in which it was recommended that data should be obtained for concentrations of smoke and sulphur dioxide from a set of towns representative of all the towns in Great Britain.

It was agreed to set up three recording stations in the city and the necessary equipment was purchased. With the co-operation of the Director of Education, two of the stations have been set up in schools, one at Mount Street, a school in a residential district with high population density and one at Whitleigh, a residential district with low population density. At the school at Whitleigh, help in the taking of the recordings is given by senior scholars of the school, and I would like to record my thanks to the Headmaster and to the staff and scholars concerned for their help. The third station, with the co-operation of the Estates and Development Valuer, has been sited in the commercial area of the city at the Plymouth Market.

These stations have been operating since the autumn but it is too early to interpret the full significance of the results which have been obtained during the short time that these recording stations have been in operation.

HOUSING

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR:—			
(1) (a)	Total number of dwelling-houses inspected for defects (under Public Health and Housing Acts)	3,121	
(b)	Number of inspections made for the purpose	9,803	
(2) (a)	Number of dwelling-houses (included in sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	213	
(b)	Number of inspections made for the purpose	464	
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	46	
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1,232	
 2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT THE SERVICE OF FORMAL NOTICES:—			
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1,129	
 3. ACTION UNDER STATUTORY POWERS DURING THE YEAR:—			
(a) Proceedings under Sections 9, 10 and 12 of the Housing Act, 1957:—			
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	31	
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:—		
(a)	By owners	22	
(b)	By Local Authority in default of owners	1	
(b) Proceedings under Public Health Acts:—			
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	111	
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices:—		
(a)	By owners	107	
(b)	By Local Authority in default of owners	—	

(c) Proceedings under Sections 16 and 23 of the Housing Act, 1957:—

(1) Number of dwelling-houses in respect of which Demolition Orders were made	1
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	8
(3) Number of Undertakings not to use unfit houses accepted	4
(4) Number of dwelling-houses in respect of which Closing Orders were made	3
(5) Number of dwelling-houses in respect of which Closing Orders were determined	—
(6) Number of dwelling-houses in respect of which schemes to render fit accepted	—
(7) Number of dwelling-houses rendered fit following acceptance of scheme	—

(d) 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	22
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or rooms having been rendered fit	2
(3) Number of separate tenements or underground rooms in respect of which schemes to render fit accepted	—

4. HOUSING ACT, 1957, PART IV—OVERCROWDING:—

(a) (1) Number of dwellings overcrowded at the end of the year	53
(2) Number of families dwelling therein	57
(3) Number of persons dwelling therein	354
(b) Number of new cases of overcrowding during the year ...	25
(c) (1) Number of cases of overcrowding relieved during the year	19
(2) Number of persons concerned in such cases	125

CLEARANCE AREAS

Representations have been made during the year in respect of houses at Beverley Road, Laira, and Gloucester Lane and Oxford Place, Plymouth.

The number of unfit houses involved is 10, which are included in 3 Clearance Areas. These houses provide accommodation for 8 families consisting of 21 persons who, subject to confirmation of the Orders, will have to be provided with alternative accommodation. At the time of representation, 3 of the houses were unoccupied.

These representations complete the slum clearance programme which was drawn up in accordance with section 1 of the Housing Repairs and Rents Act, 1954.

There were at the end of the year approximately 186 families still living in unfit houses included in confirmed Clearance Orders and Compulsory Purchase Orders.

During the year, a survey was commenced of the 130 houses included in the further programme drawn up following receipt of Ministry of Housing and Local Government Circular 2/60. It is expected that representations of unfitness in respect of those houses found on detailed inspection to be unfit, will be made during the coming year.

CONFIRMATION OF ORDERS

The following orders were confirmed by the Minister of Housing and Local Government during the year:—

COMPULSORY PURCHASE ORDERS

<i>Name of Order</i>	<i>Number of unfit houses</i>	<i>Number of families therein</i>	<i>Date confirmed</i>
Oxford Place, 1961	3	2	13.12.61

The Minister refused to confirm a Compulsory Purchase Order in respect of one Clearance Area comprising three houses, on the grounds that two of the houses were not so far defective as to be classified as unfit for human habitation and that the Council did not wish to acquire the properties on the basis of fit houses, as the land was not required for immediate development.

CLEARANCE ORDERS

<i>Name of Order</i>	<i>Number of unfit houses</i>	<i>Number of families therein</i>	<i>Date confirmed</i>
Crabtree Cottages, 1961	3	3	31.5.61
Agaton Cottages, St. Budeaux, 1961	5	6	30.6.61
Ford Park Lane, 1961	3	3	28.8.61
Priory Road, 1961	4	5	18.9.61
TOTALS	15	17	—

Four houses (not included in the above total) were excluded by the Minister from the Priory Road Clearance Area and Order.

Well-maintained Payments Well-maintained payments which the Minister has directed shall be made have been negotiated and settled with the owners of thirteen properties in the total sum of £1,267. 8s. 0d.

Rent Act, 1957 The following is a summary of action taken in connection with Certificates of Disrepair:—

Applications for Certificates of Disrepair received during the year	1
Notices of intention to issue Certificates of Disrepair given	1
Certificates of Disrepair issued	1
Applications for cancellation of Certificates of Disrepair received during the year	1
Certificates of Disrepair cancelled where no objection received from tenants	1

Improvement Grants

Although applications for Improvement Grants are dealt with by the City Engineer, all cases where grants are likely to be made are referred to the Health Department, whose responsibility it is:—

- (i) to indemnify each property against demolition for the period of fifteen years;
- (ii) to specify the length of time that each house will provide satisfactory housing accommodation; and
- (iii) to provide a schedule of repairs which should be carried out at the same time as the works of improvement.

During the year, 133 visits have been made to houses in connection with Standard Grants, and 59 visits in respect of Discretionary Grants.

INSPECTION AND SUPERVISION OF FOOD

Bacteriological Examination of Milk Of the 485 samples of milk taken for bacteriological examination, 467 gave satisfactory results; 8 samples failed the test, and ten were returned as void (the atmospheric shade temperature having risen above 70°F during the period of storage).

The following table shows the number of samples of various descriptions of milk submitted to the Methylene Blue Test, and the results:

METHYLENE BLUE TEST

<i>Description of Milk</i>	<i>Total Number of Samples</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>	<i>Void</i>
Tuberculin Tested ... (farm bottled)	28	20	6	2
Pasteurised	383	373	2	8
Tuberculin Tested ... (Pasteurised)	74	74	Nil	Nil
TOTALS ...	485	467	8	10

Phosphatase Test A total of 457 samples of milk (383 Pasteurised and 74 Tuberculin Tested (Pasteurised)) were obtained and submitted to the Phosphatase Test for checking the efficiency of the pasteurising process. All these samples were returned as satisfactory.

Turbidity Test Ten samples of sterilised milk were submitted to the Turbidity Test and all were found to be satisfactory.

Licences under the Milk (Special Designation) Regulations 1960

The following table shows the number of licences to use the various designations applied to milk, issued during the year. It will be noted that the number of licences issued during the year shows a considerable reduction on those of the previous year. This is due to the fact that, under these Regulations, licences only require renewing every five years. Licences issued in 1961 are in respect of new applications.

<i>Description of Licence</i>	<i>Number Issued</i>
Dealer's Sterilised and/or Pasteurised and/or Tuberculin Tested Licences	13
TOTAL	13

Chemical Analysis of Milk

Twenty samples of Pasteurised Milk, 8 samples of Tuberculin Tested Pasteurised Milk, 11 samples of Pasteurised (Channel Island) Milk, 2 samples of Sterilised Milk and 3 samples of Tuberculin Tested (Farm Bottled) Guernsey Milk were obtained for analysis. Two of the latter samples were found to be slightly deficient in fat and letters of caution were sent to the firms concerned; all the other samples were returned as genuine.

Ice Cream

The number of applications for registration of premises for the sale of loose and pre-packed ice cream was 19.

Bacteriological Examination of Samples of Ice Cream

During the year, 58 samples of ice cream were submitted to the form of Methylene Blue Test prescribed by the Ministry of Health. The table below gives the results of these tests:

<i>Grade</i>	<i>Hot Mix</i>	<i>Cold Mix</i>	<i>Totals</i>
Grade 1. Time taken to reduce methylene blue— $4\frac{1}{2}$ hours or more	37	Nil	37
Grade 2. Time taken to reduce methylene blue— $2\frac{1}{2}$ to 4 hours	11	Nil	11
Grade 3. Time taken to reduce methylene blue— $\frac{1}{2}$ to 2 hours	3	Nil	3
Grade 4. Time taken to reduce methylene blue—0 hours	7	Nil	7
TOTALS	58	Nil	58

Of the 58 samples of "Hot Mix," 11 were pre-packed, 9 of which were placed in Grade 1; 1 in Grade 2; and 1 in Grade 3.

**Chemical
Analysis
of Ice Cream**

During the year, 6 samples of ice cream were taken and submitted to chemical analysis. All the samples were returned as genuine. The results are given in the following table:—

<i>Sample No.</i>	<i>Total Fat %</i>	<i>Sample No.</i>	<i>Butter Fat %</i>	<i>Sample No.</i>	<i>Non-fatty Milk Solids %</i>	<i>Sample No.</i>	<i>Total Solids %</i>
2	12.6	—	—	2	12.4	6	40.1
6	11.1	—	—	5	12.4	2	38.6
5	10.2	5	10.2	6	11.9	1	38.5
	(Dairy)		(Dairy)				
1	10.1	—	—	1	10.2	5	38.4
4	6.6	—	—	4	9.8	3	31.1
3	5.9	3	5.9	3	9.65	4	29.5
	(Dairy)		(Dairy)				
Average	9.416				11.06		36.03

FOOD AND DRUGS

Adulteration The various samples of food and drugs submitted for analysis during the year are classified in the following table, together with the number of the various articles which were found to be adulterated:

	<i>Official Samples</i>		<i>Informal Samples</i>		<i>Total No.</i>
	<i>Genuine</i>	<i>Adulterated</i>	<i>Genuine</i>	<i>Adulterated</i>	
Butter	—	—	4	—	4
Beef sausages	—	—	1	—	1
Condensed F.C. milk	—	—	4	—	4
Coffee	—	—	3	—	3
Cocoa	—	—	2	—	2
Cordials	—	—	3	—	3
Custard powder	—	—	4	—	4
Clotted cream	—	—	3	—	3
Dandelion Coffee	—	—	1	—	1
Double Cream	—	—	1	—	1
Drinking chocolate	—	—	2	—	2
Flavourings	—	—	4	—	4
Fish Paste	—	—	1	—	1
Ground almonds	—	—	4	—	4
Ground Spices	—	—	4	—	4
Gin	—	—	1	—	1
Ice Cream	—	—	6	—	6
Jam	—	—	4	—	4
Lard	—	—	1	—	1
Margarine	—	—	4	—	4
Meat paste	—	—	3	—	3
Marzipan	—	—	4	—	4
Pasteurised milk	20	—	—	—	20
Pasteurised T.T. milk	8	—	—	—	8
Pasteurised milk (C.I.)	11	—	—	—	11
Pork sausages	—	—	5	1	6
Pepper Flavoured Comp.	—	—	1	—	1
Rum	—	—	1	—	1
Raw Milk (Guernsey T.T.)	1	2	—	—	3
Sterilised milk	2	—	—	—	2
Sweets (Alcoholic)	—	—	2	—	2
Shredded Suet	—	—	2	—	2
Table jelly	—	—	4	—	4
Tincture of Iodine	—	—	3	1	4
Whiskey	—	—	2	—	2
TOTALS	42	2	84	2	130

FOOD AND DRUGS SAMPLES REPORTED NOT GENUINE

<i>Article</i>	<i>Nature of Adulteration</i>	<i>Action taken</i>
Pork Sausages	8% deficient in meat	Letter of Caution
Raw Milk ... (Guernsey T.T.)	6% deficient in fat	Letter of Caution
Milk (Guernsey T.T.)	6% deficient in fat	Letter of Caution
Tincture of Iodine	Contained 24.4% in excess of iodine and 21.2% in excess of potassium-iodide.	Letter of Caution

Slaughterhouses and Meat Inspection Details of the number of animals killed in the Plymouth Area and the number of carcasses of home-killed meat dealt with from other centres are shown in the following table:

	<i>Slaughtered in Plymouth Area</i>	<i>Received from other centres</i>	<i>Totals</i>
Bovines	11,234	3,115	14,349
Calves	887	417	1,304
Sheep	7,038	20,428	27,466
Pigs	4,680	19,206	23,886
	<u>23,839</u>	<u>43,166</u>	<u>67,005</u>

The total weight of meat and offal condemned during the year from animals killed inside and outside the city was 66 tons 19 cwts 2 qtrs 3 lbs.

Details of the number of whole carcasses condemned and of carcasses of which some part or organ was condemned are shown in the table which follows:

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed ...	6,644	4,590	887	7,038	4,680	—
Number inspected ...	8,199	6,150	1,304	27,466	23,886	—
<i>All diseases except Tuberculosis and Cysticerci: Whole carcasses condemned</i>	9	28	60	108	28	—
Carcasses of which some part or organ was condemned ...	1,686	2,945	12	1,272	714	—
Percentage of the num- ber inspected affected with disease and other conditions, excluding Tuberculosis and Cysticerci ...	20.67%	48.34%	5.54%	5.02%	3.10%	—

<i>Tuberculosis only</i>						
Whole carcasses con- demned ...	—	1	1	—	—	—
Carcasses of which some part or organ was condemned ...	16	45	2	—	62	—
Percentage of the num- ber inspected affected with Tuberculosis ...	.19%	.74%	.23%	—	.26%	—

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
CYSTICERCOSIS Carcases of which some part or organ was condemned	46	18	—	—	—	—
Carcases submitted to treatment by refriger- ation	46	18	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

Tuberculosis The incidence of tuberculosis found in adult bovine cattle on day to day post-mortem inspection at the abattoir was very low; indeed, the average percentage of infected animals, viz. .55% in 1961 (.92% in 1960) is in the main accounted for by the continued use of the abattoir as a centre for the slaughter of re-actor cattle, many of which were found to be infected. Only two food animals were condemned completely for generalised tuberculosis infection as opposed to nine in 1960.

Fluke Infestation Now that tuberculosis has receded as a major cause of financial loss to the meat trader, mention should be made of the problem of fluke infestation. A considerable number of bovine livers (approximately one third of those of animals killed at the Plymouth abattoir) of high monetary value were condemned by reason of fluke infestation and its resultant effects. In addition, many livers were considerably trimmed to render them marketable. Many sheep livers were similarly affected and there is no doubt that in many chronic cases the condition of the carcass is deleteriously affected due to interference with the normal liver functions.

Abattoir and Meat Market In December, the abattoir and meat market were leased to the Fatstock Marketing Corporation and the abattoir is now appropriately licensed as a slaughterhouse.

Unsound Foodstuffs

The following summary indicates the quantity of foodstuffs examined and found to be unfit

for food:—

TINNED GOODS				<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Meat	...	...	...	2	8	2	16
Ham	...	...	...	3	14	2	14
Fish	...	...	...	—	12	1	22
Milk	...	...	...	—	5	3	3
Soup	...	...	...	—	1	7	27
Fruit	...	...	...	2	15	3	25
Vegetables	...	...	...	1	13	3	24
Jams and Marmalade	...	...	...	—	12	0	4
Cream	...	...	...	—	—	—	6

PROVISIONS				<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Fresh Vegetables	...	...	...	—	12	19	26
Fresh Fruit	...	...	...	—	8	2	13
Dried Fruit	...	...	...	3	16	11	18
Flour	...	...	...	—	1	0	1
Cereals	...	...	...	—	3	8	27
Biscuits	...	...	...	—	8	3	18
Sweets and Chocolate	...	...	...	—	—	2	15
Cheese	...	...	...	—	—	9	21
Cakes and Cake Mixture	...	...	...	—	1	1	4
Butter	...	...	...	—	—	2	14
Poultry	...	...	...	—	4	1	9
Miscellaneous	...	...	...	—	7	1	6
Tea	...	...	...	—	—	—	10

MEAT PRODUCTS				<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
Bacon and Ham	—	1	3	3
Sausages and Sausage Meat	—	10	0	14

Fish Inspection

The following summary indicates the quantity of fish, smoked fish and other varieties examined

during the year, and the quantity found to be unfit for food:—

				<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>
QUANTITY OF FISH INSPECTED	...	...	...	1307	4	0	22
Quantity of smoked fish found to be unfit for human food	...	...	...	—	2	3	18

Other varieties

Crabs	...	...	...	...	...	...	28
Fish Cakes	...	...	...	...	...	...	40 dozen

Inspection of Other Food Premises.

The following table gives details of the number and type of the various food premises within the City, together with the number of inspections made and action taken as a result of these inspections:—

<i>Type of premises</i>	<i>Number</i>	<i>Inspections made</i>	<i>Notices served</i>	<i>Notices Complied with</i>
<i>Registered under Section 16 of the Food and Drugs Act, 1955:</i>				
For sale, manufacture or storage of ice cream	836	517	2	2
Shops for preparation and sale of fried fish and chips	77	102	7	8
For preparation or manufacture of sausages or potted, pressed, pickled or preserved food	199	} 629	40	39
Restaurants and hotel kitchens	250			
Factories for food preparation and food warehouses (other than registered premises) ...	46			
Butchers	208	590	82	79
Bakehouses	61	187	14	13
Fresh Fish Shops (other than registered premises)	55	109	6	5
General provision shops, greengrocers' shops, confectionery shops, etc. ...	696	744	93	83
Public Houses	266	61	12	16
Dairies and premises licensed to sell milk (registered under The Milk (Special Designation) Regulation, 1960 ...	419	461	12	12
Food Vehicles	—	82	2	2

**Merchandise
Marks Act**

During the year, 446 visits were made to shops and stalls regarding the marking of produce under the Merchandise Marks Act and the occupiers cautioned in those instances where the Act was not being complied with.

**Educational
Activities**

Talks to student nurses and women's organisations on the various aspects of food hygiene have continued during the year.

**Contamination
of Food**

In January, information was received from a Medical Officer of Health of a town in the north of England that a consignment of powdered gelatine sent to a bakery in Plymouth probably contained *Salmonella Meleagridis*. A sample taken from this consignment was found to contain this organism, and a sample from another consignment to a different bakery was also found to be affected. Both consignments were returned to the manufacturer where they were subjected to heat treatment and extensive re-examination under the supervision of the staff of the local health department. The fresh consignments of powdered gelatine sent to Plymouth were examined and found to be free from this organism. It is interesting to note that a batch of marshmallow biscuits in which the affected gelatine was used, was also found to contain *Salmonella Meleagridis*.

Although cases of food contamination due to lack of care still come to the notice of this department, there has been a reduction in the number of cases of bread and confectionery caused by oil or grease from the machines being used.

Though it was not considered necessary to take legal proceedings in any of the cases, visits were made to the firms concerned and the management and staff cautioned as to the need to exercise greater care. Where the firms were situated outside the city boundary, warning letters were sent and the Chief Public Health Inspectors of the areas in which the premises were situated were notified.

**Food Hygiene
(General)
Regulations**

During the year arrangements were made with the Estates and Development Valuer for notices to be displayed in the Market requesting the general public as well as stall holders to refrain from smoking. Despite these notices and warning letters sent to all occupiers of food stalls in the Market, it became necessary for legal proceedings to be taken against four occupiers of food stalls. In two cases fines of £2 were inflicted, in one instance a fine of £1 and the remaining case was dismissed by the Magistrates.

Infectious Diseases

The following pages give tables showing the occurrence of notifiable infectious diseases in 1961 with observations on certain of the diseases.

Incidence Table 1 on page 72a shows the number of notifications received during 1961 for each disease classified by age groups.

Table 2 on page 72b shows the quarterly and sex incidence of infectious diseases during 1961.

Table 3 on page 73 shows the number of cases of infectious diseases notified during 1961 with comparative figures for the previous four years.

Mortality Table 4 on page 74 gives the number of deaths due to Diphtheria, Scarlet Fever, Measles and Whooping Cough in Plymouth in the years since 1921. There were no deaths due to these diseases in 1961.

Hospital Admissions and Deaths Table 5 on page 75 shows the number of Plymouth residents admitted to the Scott Hospital by reason of infectious disease and the deaths of Plymouth residents occurring in that hospital.

GENERAL OBSERVATIONS

There were 5,113 notifications of infectious diseases during 1961 of which the biennial measles epidemic accounted for 4,485. Other diseases were generally fewer than in 1960 and for the first time there were no cases of diphtheria confirmed in Plymouth.

Dysentery, with 93 notifications was only about one-third as prevalent as in 1960 and Food Poisoning about one-half.

Whooping Cough with 284 cases showed an increase of 82 and immunisation against this disease has by no means eliminated it. However, there is no doubt that vaccination reduces the severity of the disease even if it does not always prevent it and the epidemics of 1,000 or more cases in a year no longer occur.

TABLE 1.
INFECTIOUS DISEASES NOTIFIED 1961—BY AGE GROUPS.

DISEASE	Under 1 Year	1-2 Years	2-3 Years	3-4 Years	4-5 Years	5-10 Years	10-15 Years	15-20 Years	20-25 Years	25-35 Years	35-45 Years	45-65 Years	65 Years and Over	Total All Ages
	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	10	7	7	6	8	16	7	3	2	8	5	10	4	93
Encephalitis	-	-	-	-	-	1	1	-	-	-	-	-	-	2
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	7	8	15
Food Poisoning	-	-	-	2	1	1	3	-	2	2	2	1	-	14
Measles	212	484	583	676	652	1,789	64	15	2	7	-	1	-	4,485
Meningococcal Infections	1	1	3	-	-	2	-	-	-	-	-	-	-	7
Ophthalmia Neonatorum	5	-	-	-	-	-	-	-	-	-	-	-	-	5
Paratyphoid	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia	4	4	2	3	3	9	4	1	-	4	6	31	40	111
Poliomyelitis and Polioencephalitis	-	-	-	1	1	1	-	-	-	1	-	1	-	5
Puerperal Pyrexia	-	-	-	-	-	-	-	-	10	9	3	-	-	22
Scarlet Fever	-	3	6	4	7	41	6	1	1	-	-	-	1	70
Typhoid	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhus	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	44	44	33	34	33	77	13	-	1	3	2	-	-	284
TOTALS	276	543	634	726	705	1,937	98	20	18	34	18	51	53	5,113

TABLE 1
 PREVALENCE OF TUBERCULOSIS BY AGE GROUP

Age Group	Number of Cases	Percentage of Total
0-4	10	0.1
5-9	15	0.15
10-14	20	0.2
15-19	30	0.3
20-24	40	0.4
25-29	50	0.5
30-34	60	0.6
35-39	70	0.7
40-44	80	0.8
45-49	90	0.9
50-54	100	1.0
55-59	110	1.1
60-64	120	1.2
65-69	130	1.3
70-74	140	1.4
75-79	150	1.5
80-84	160	1.6
85-89	170	1.7
90-94	180	1.8
95-99	190	1.9
TOTAL	1000	10.0

TABLE 2.
QUARTERLY INCIDENCE OF INFECTIOUS DISEASES—PLYMOUTH—1961

DISEASE	JANUARY TO MARCH			APRIL TO JUNE			JULY TO SEPTEMBER			OCTOBER TO DECEMBER			TOTALS FOR YEAR		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	19	11	30	13	15	28	12	9	21	5	9	14	49	44	93
Encephalitis	-	-	-	-	-	-	-	2	2	-	-	-	-	2	2
Erysipelas	-	-	-	2	2	4	4	4	8	-	3	3	6	9	15
Food Poisoning	-	1	1	2	-	2	7	2	9	1	1	2	10	4	14
Measles	454	405	859	1,402	1,330	2,732	440	407	847	22	25	47	2,318	2,167	4,485
Meningococcal Infections ...	1	-	1	1	2	3	1	-	1	1	1	2	4	3	7
Ophthalmia Neonatorum ...	-	1	1	2	1	3	1	-	1	-	-	-	3	2	5
Paratyphoid	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia	23	38	61	7	20	27	5	3	8	7	8	15	42	69	111
Poliomyelitis	-	-	-	-	-	-	1	1	2	2	1	3	3	2	5
Puerperal Pyrexia	-	6	6	-	8	8	-	3	3	-	5	5	-	22	22
Scarlet Fever	9	13	22	11	13	24	4	3	7	4	13	17	28	42	70
Typhoid	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	58	72	130	33	45	78	19	22	41	18	17	35	128	156	284
TOTALS	564	547	1,111	1,473	1,436	2,909	494	456	950	60	83	143	2,591	2,522	5,113

TABLE 3

CASES NOTIFIED IN THE CITY DURING THE PAST FIVE YEARS

<i>Disease</i>	1961	1960	1959	1958	1957
Diphtheria	—	1	3	6	8
Dysentery	93	296	80	75	175
Encephalitis	2	1	3	1	3
Erysipelas	15	23	27	23	26
Food Poisoning	14	25	25	23	32
Gastro-Enteritis (under 2 years)	—	—	—	—	*88
Measles	4,485	64	3,918	817	3,842
Meningococcal Infections...	7	4	2	7	5
Ophthalmia Neonatorum...	5	5	2	—	1
Paratyphoid	—	2	2	—	1
Pneumonia	111	99	164	159	271
Poliomyelitis and Polioencephalitis ...	5	12	2	51	12
Puerperal Pyrexia	22	53	75	82	62
Scarlet Fever	70	200	263	61	80
Smallpox	—	—	—	—	—
Typhoid	—	—	—	—	—
Typhus	—	—	—	—	—
Whooping Cough	284	202	77	467	326

* 3 QUARTERS ONLY. This disease ceased to be notifiable in Plymouth on and after 1st October, 1957.

TABLE 4

MORTALITY FROM CERTAIN INFECTIOUS DISEASES

PLYMOUTH 1921-1961

YEAR	<i>Diphtheria</i>	<i>Measles</i>	<i>Scarlet Fever</i>	<i>Whooping Cough</i>
	<i>No. of Deaths</i>	<i>No. of Deaths</i>	<i>No. of Deaths</i>	<i>No. of Deaths</i>
1921-1930 Average	20	21	3	14
1931-1940 Average	29	8	2	10
1941 ...	28	12	—	11
1942 ...	16	1	—	2
1943 ...	10	8	—	8
1944 ...	4	1	—	1
1945 ...	6	1	—	3
1946 ...	2	1	—	4
1947 ...	2	9	—	2
1948 ...	1	—	—	2
1949 ...	1	1	—	5
1950 ...	—	—	—	3
1951 ...	—	2	—	3
1952 ...	1	—	—	2
1953 ...	—	—	—	3
1954 ...	—	—	—	—
1955 ...	—	—	—	1
1956 ...	—	—	—	—
1957 ...	—	—	—	—
1958 ...	—	—	—	—
1959 ...	—	1	—	1
1960 ...	—	—	—	—
1961 ...	—	—	—	—

TABLE 5

ISOLATION HOSPITAL, PLYMOUTH

ADMISSIONS—PLYMOUTH RESIDENTS—1961

NOTIFIABLE (INFECTIOUS) DISEASES ONLY

	<i>Admitted</i>	<i>Confirmed</i>
Diphtheria	13	—
Dysentery	48	34
Encephalitis	6	2
Erysipelas	3	2
Food Poisoning	2	1
Measles	32	32
Meningococcal Infections	39	6
Pneumonia	29	8
Poliomyelitis	15	5
Scarlet Fever	9	5
Paratyphoid	—	—
Whooping Cough	30	24

DEATHS—PLYMOUTH RESIDENTS, 1961

Infective Hepatitis	1
Poliomyelitis	1
Meningococcal Meningitis	1
Chicken-pox with Encephalomyelitis	1

Sixty-one deaths from causes other than infectious diseases occurred in the hospital during the year.

IMMUNISATION AND VACCINATION

Although vaccination against poliomyelitis formed a large part of the immunisation work carried out in 1961, it did not interfere with the programme of protective immunisations against other diseases. The numbers of primary courses of immunisation against diphtheria, whooping cough and tetanus were all higher than in 1961.

Immunisation against Diphtheria (Tables B and C.)
3,849 children received a primary course of immunisation in 1961, 551 more than in 1960. This gives cause for some satisfaction but there is scope for improvement in the numbers of reinforcement injections given at approximately four year intervals, which totalled 3,006.

Immunisation against Whooping Cough (Table D.)
Immunisation against this disease is almost always included in the course of primary immunisation against diphtheria given to infants and showed a corresponding increase to 3,231 immunised in 1961 compared with 2,993 in 1960.

Immunisation against Tetanus This immunisation has been included with the primary course of diphtheria immunisation for the past five years and the numbers immunised correspond closely with the figures for diphtheria immunisation. The pre-school population is almost as well immunised against tetanus as it is against diphtheria. In addition tetanus immunisation has been offered for the past eighteen months to those school children who were originally immunised with the antigen containing only whooping cough and diphtheria elements. The progress in immunising these older children is shown in the School Health section of this report.

Vaccination against Smallpox (Tables E and F.)
The total of primary vaccinations (all ages) in 1961 was 2,530; a small reduction compared with 2,601 in 1960. Actually there was a slight increase in the vaccinations of infants under 1 year of age. 2,096 of these were vaccinated, equivalent to 56.6% of the birth rate.

Vaccination against Poliomyelitis (Table G.)
 Vaccination and reinforcement of infants, children and adults up to the age of 40 years continued during the first half of the year at a steady if not spectacular rate, but scarcity of vaccine reduced immunisation in the later months. Fourth injections for children aged 5-12 years were introduced during the year.

An estimate of the proportion of the eligible persons (i.e. those up to 40 years of age) now vaccinated is as follows:—

- More than two-thirds of the infants and school children;
- Less than half of those aged 15-25 years;
- Less than one-third of those 25-40 years of age.

There is obviously much to be done yet especially in the adult and young adult population, to achieve a satisfactory standard of immunisation. Even to reach the present level has involved the giving of 237,000 injections and as dislike of the needle may have kept many from being vaccinated it is hoped that the new live vaccine to be introduced in 1962 will be more acceptable as it is given by the mouth and not by injection.

Vaccination against Yellow Fever 323 persons requiring vaccination and certificates for travel to yellow fever areas were immunised during the year.

TABLE B

SHOWING THE NUMBER OF CASES AND DEATHS FROM DIPHTHERIA IN THE PAST 5 YEARS AND THE PRIMARY IMMUNISATIONS PERFORMED IN EACH YEAR

Year	Total Births	Diphtheria, Total of		Primary Diphtheria Immunisations			Population	Attack Rates per 1,000 population
		Cases	Deaths	Ages 0-4	Ages 5-15	Total No. 0-15		
1957	3,615	8	—	2,291	369	2,660	217,900	0.04
1958	3,652	6	—	2,245	260	2,505	216,300	0.03
1959	3,655	3	—	2,658	359	3,017	216,300	0.01
1960	3,683	1	—	2,630	668	3,298	216,470	0.00
1961	3,706	—	—	3,080	769	3,849	212,780	—

TABLE C
DIPHTHERIA IMMUNISATION, 1961

	CHILDREN BORN IN YEARS							
	1961	1960	1959	1958	1957	1952	1947	Total
						1956	1951	
A. Number of children who completed a full course of Primary Immunisation in the Authority's area (including temporary residents) during the year ended 31st December, 1961	828	1,670	269	174	139	568	201	3,84
B. Number of children who received a secondary (reinforcing) injection (i.e., subsequently to a primary immunisation at an earlier age) during the year ended 31st December, 1961	—	32	58	29	229	1,366	1,292	3,00

TABLE D—WHOOPING COUGH

<i>Protective Inoculations given (primary course)</i>						
1948	1949	1950	1951	1952	1953	1954
1,739	1,908	1,465	1,568	1,976	1,955	2,140
1955	1956	1957	1958	1959	1960	1961
2,148	1,976	2,232	2,141	2,747	2,993	3,231

TABLE E—VACCINATION AGAINST SMALLPOX

<i>Number of Persons Vaccinated (or re-vaccinated) during period 1961</i>						
Age at date of Vaccination	Under 1	1	2-4	5-14	15 or over	Total
Number Vaccinated ...	2,096	149	108	66	111	2,530
Number Re-vaccinated	2	4	2	40	260	308

TABLE F—VACCINATION AGAINST SMALLPOX

Year	Births	Primary vaccinations (all ages)	Percentage of Children vaccinated (under 1 year of age)	Re-vaccinations (all ages)
1944	3,016	1,663	55.14	85
1945	3,752	1,803	48.05	39
1946	3,947	1,890	47.88	74
1947	4,490	1,972	43.92	6
1948 (to 4.7.48) ...	2,223	1,001	45.48	—
1948 (from 5.7.48) ...	1,813	322	17.76	69
1949	3,769	1,432	30.5	278
1950	3,534	1,691	33.5	398
1951	3,622	1,975	40.2	832
1952	3,487	1,836	42.9	475
1953	3,643	1,869	40.0	297
1954	3,580	1,692	40.8	239
1955	3,536	1,942	48.3	224
1956	3,526	1,711	42.7	264
1957	3,615	2,123	49.4	238
1958	3,652	2,127	51.3	220
1959	3,655	2,311	53.9	289
1960	3,683	2,601	55.1	317
1961	3,706	2,530	56.6	308

TABLE G—POLIOMYELITIS VACCINATION, 1961

	Children born in years 1943 to 1961	Young persons born in years 1933 to 1942	Persons born before 1933 who have not passed fortieth birthday	Others	Total for year
Primary course of two injections	4,169	1,349	2,076	228	7,822
Reinforcing (third) injection	3,144	844	2,078	228	6,294
Reinforcing (fourth) injection	12,092	—	—	—	12,092

From the commencement in 1956 of vaccination against poliomyelitis, 67,318 persons have been given the primary course of two injections and 52,014 of these have received the third reinforcing injection. 12,092 children in the 5-12 years age group, have received the fourth reinforcing injection.

Prevention of Illness Care and After-Care

(A) TUBERCULOSIS

VITAL STATISTICS

Notifications The number of notified cases of tuberculosis for the year amounted to 175, consisting of 160 respiratory and 15 other forms of tuberculosis. This figure shows an increase of 19 respiratory and 5 non-respiratory cases compared with last year.

TABLE 1.
AGE AND SEX ANALYSIS OF NOTIFIED CASES OF TUBERCULOSIS
IN 1961

<i>Age Groups</i>	<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
0- 5	4	4	-	-
6-15	17	11	2	-
16-25	9	17	1	-
26-35	7	10	2	2
36-45	9	13	1	1
46-55	24	7	2	-
56-65	9	4	-	3
66 and over ...	11	4	-	1
TOTALS ...	90	70	8	7

TABLE 2
NOTIFICATIONS AND DEATHS FROM TUBERCULOSIS
FOR THE YEARS 1952-1961

Year	Notifications		Deaths (Total)		Deaths in non-notified persons	
	Resp.	Non- Resp.	Resp.	Non- Resp.	Resp.	Non- Resp.
1952	230	42	49	5	9	2
1953	228	36	44	5	11	3
1954	230	25	30	3	4	2
1955	231	19	41	2	3	-
1956	228	17	27	2	3	2
1957	176	21	16	3	2	2
1958	143	16	21	1	4	-
1959	154	14	13	-	1	-
1960	141	10	19	-	1	-
1961	160	15	22	-	4	-

Deaths During 1961, tuberculosis was registered as the cause of death in 22 cases, one of which was notified posthumously. These figures show an increase of 3 compared with the number of deaths in 1960.

Clinic Register An analysis of the number of patients on the 'live' Chest Clinic Register at the end of the year is shown in Table 3.

TABLE 3

	Males	Females	Children	Totals
Respiratory Tuberculosis ...	1,151	815	217	2,183
Non-Respiratory Tuberculosis ...	37	62	15	114
Totals ...	1,188	877	232	2,297

CHEST CLINIC AND HOSPITAL WORK

Attendances 6,227 new cases were investigated during the year, an increase of 1,211 compared with 1960. In addition there were 7,363 attendances of old cases and 926 contacts were examined.

This substantial increase in the number of patients referred to the clinic by General Practitioners is very encouraging since it provides the best opportunity of improving the standard of case-finding. This improvement is reflected in the higher rate of notification for the year.

TABLE 4
ANALYSIS OF CLINIC ATTENDANCES

<i>Year</i>	<i>Total Attendances</i>	<i>New cases referred</i>		<i>New Contacts</i>	<i>Re-Attendances</i>
		<i>Clinic</i>	<i>G.P.X-ray</i>		
1956	17,745	1,627	3,609	757	11,752
1957	18,167	1,030	4,471	1,076	11,590
1958	14,711	1,129	4,052	881	8,649
1959	15,162	1,197	4,425	948	8,592
1960	13,924	1,059	3,957	876	8,032
1961	14,516	1,872	4,355	926	7,363

These figures relate to residents in the City of Plymouth with the exception of the column headed "G.P. X-ray" which includes residents in the neighbouring county areas.

Case Finding The main methods by which new cases are discovered are analysed in Table 5.

TABLE 5

SOURCES OF NOTIFIED CASES OF RESPIRATORY TUBERCULOSIS
(Percentage of total notified cases shown in brackets)

Year	M.M.R.	Clinic	G.P. X-ray	Contacts	School Medical Service	Other Hospital
1955	50 (21.7)	102 (44.2)	11 (4.7)	29 (12.5)	—	39 (16.9)
1956	46 (20.1)	72 (31.6)	48 (21.1)	37 (16.2)	—	25 (11.0)
1957	43 (24.4)	60 (34.1)	26 (14.8)	21 (11.9)	2 (1.1)	24 (13.7)
1958	32 (22.4)	43 (30.0)	21 (14.7)	14 (9.8)	1 (0.7)	32 (22.4)
1959	23 (14.9)	60 (39.0)	17 (11.1)	14 (9.1)	5 (3.2)	35 (22.7)
1960	35 (24.8)	49 (34.7)	11 (8.0)	15 (10.6)	1 (0.7)	30 (21.2)
1961	28 (17.5)	67 (41.9)	10 (6.2)	15 (9.4)	2 (1.2)	38 (23.8)

TABLE 6

FINDINGS IN TUBERCULIN POSITIVE SCHOOL LEAVERS

Year	Number of children aged 14-15	Number tested with Tuberculin	Tuberculin Positive	Positive Reactors with active T.B.	Active T.B. in contacts of Positive Reactors
1958	3,343	1,955	210 (12.2%)	1	—
1959	3,198	1,889	177 (9.4%)	5	—
1960	3,740	2,290	166 (7.2%)	1	4
1961	3,671	2,158	145 (6.7%)	2	2

The percentage of tuberculin positive reactors in the child population gives a good indication of the extent of infectious tuberculosis in this area and continues to decline.

HOSPITAL TREATMENT

The number of admissions and discharges at the two hospitals admitting cases of tuberculosis are given in Table 7.

TABLE 7
HOSPITAL TREATMENT
ADMISSIONS AND DISCHARGES

	<i>Total Beds</i>		<i>Total Cases</i>	<i>Tuberculous</i>	<i>Non- Tuberculous</i>
Didworthy Chest Hospital	120	Admissions	176	123	53
		Discharges	176	127	49
		Deaths	13	5	8
Mount Gold Hospital	25	Admissions	117	76	41
		Discharges	102	69	33
		Deaths	18	9	9

Admissions for respiratory tuberculosis during the last three years are given below:—

1959	...	...	213
1960	...	...	205
1961	...	...	199

TABLE 8
RESISTANT ORGANISMS IN NEW CASES

<i>Year</i>	<i>Total No. Notified</i>	<i>No. Sputum Positive</i>	<i>No. Infected with Resistant Strains</i>
1958	143	58	2
1959	154	35	—
1960	141	47	1
1961	160	48	1

This incidence is as low as could be expected and is not increasing.

Chronic Sputum Positive Cases These patients are few in number and are closely supervised by the Health Visitors. The number on 31st December, 1961, was 10.

NOTIFICATIONS AND DEATHS FROM TUBERCULOSIS—1914-1961.

and Attack Rate and Mortality per 1,000 population

YEAR	PULMONARY TUBERCULOSIS				NON-PULMONARY TUBERCULOSIS				TUBERCULOSIS (ALL FORMS)			
	New Cases	Attack Rate	Deaths	Mortality	New Cases	Attack Rate	Deaths	Mortality	New Cases	Attack Rate	Deaths	Mortality
1914	370	1.74	262	1.23	131	.62	80	.37	501	2.36	342	1.60
1915	322	1.71	236	1.26	88	.47	84	.45	410	2.18	320	1.71
1916	376	2.04	254	1.37	166	.90	65	.35	542	2.94	319	1.72
1917	364	2.03	243	1.25	103	.57	89	.49	467	2.60	332	1.74
1918	417	2.32	300	1.67	130	.72	89	.49	547	3.04	389	2.16
Average 1914-1918	369	1.97	259	1.35	123	.65	81	.43	493	2.62	340	1.78
1919	266	1.46	231	1.27	74	.41	73	.40	340	1.87	304	1.67
1920	189	1.00	195	1.03	40	.21	46	.24	229	1.21	241	1.27
1921	370	1.85	208	1.04	117	.59	42	.21	487	2.44	250	1.25
1922	395	1.97	218	1.09	92	.46	48	.24	487	2.43	266	1.33
1923	346	1.79	202	1.04	119	.61	44	.23	465	2.40	246	1.27
Average 1919-1923	313	1.61	211	1.09	88	.45	50	.26	401	2.07	261	1.36
1924	294	1.52	209	1.08	92	.48	43	.22	386	2.00	252	1.30
1925	389	1.97	179	0.91	103	.52	44	.22	492	2.49	223	1.13
1926	443	2.36	177	0.95	116	.62	34	.18	559	2.98	211	1.13
1927	358	1.91	182	0.97	115	.61	31	.16	473	2.52	213	1.13
1928	325	1.73	159	0.85	111	.59	32	.17	436	2.32	191	1.02
Average 1924-1928	361	1.89	181	0.95	107	.56	36	.19	469	2.46	218	1.14
1929	300	1.51	166	0.84	78	.39	24	.12	378	1.90	190	0.96
1930	252	1.27	167	0.84	76	.38	33	.17	328	1.65	200	1.01
1931	320	1.67	157	0.69	62	.32	38	.20	382	1.99	195	0.89
1932	273	1.31	162	0.78	70	.33	31	.15	343	1.64	193	0.93
1933	253	1.22	178	0.86	58	.28	24	.12	311	1.50	202	0.98
Average 1929-1933	279	1.39	166	0.90	69	.34	30	.15	348	1.73	196	0.95
1934	246	1.21	167	0.82	63	.31	35	.17	309	1.52	202	0.99
1935	217	1.07	114	0.56	54	.26	30	.15	271	1.33	144	0.71
1936	204	0.98	125	0.60	51	.25	27	.13	255	1.23	152	0.73
1937	225	1.07	147	0.70	52	.25	15	.07	277	1.32	162	0.77
1938	209	0.98	135	0.64	42	.20	27	.13	251	1.18	162	0.77
Average 1934-1938	220	1.06	137	0.66	52	.25	27	.13	272	1.31	164	0.79
1939	194	0.90	138	0.64	51	.24	25	.12	245	1.14	163	0.76
1940	192	0.97	163	0.83	62	.31	25	.13	254	1.28	188	0.96
1941	194	1.30	141	0.94	42	.28	22	.15	236	1.58	163	1.09
1942	243	1.89	121	0.95	57	.44	30	.23	300	2.33	151	1.18
1943	240	1.76	126	0.92	56	.41	28	.20	296	2.17	154	1.12
Average 1939-1943	212	1.36	137	0.85	53	.33	26	.16	266	1.70	164	1.02
1944	233	1.61	124	0.86	38	.26	18	.12	271	1.87	142	0.98
1945	289	1.83	125	0.79	49	.31	16	.10	338	2.14	141	0.89
1946	284	1.61	105	0.60	50	.28	25	.14	334	1.89	130	0.74
1947	297	1.64	143	0.77	54	.29	30	.16	351	1.93	171	0.93
1948	284	1.50	142	0.73	41	.22	22	.12	325	1.72	160	0.85
Average 1944-1948	277	1.64	127	0.75	46	.27	22	.13	324	1.91	149	0.88
1949	273	1.43	119	0.62	30	.16	6	.03	303	1.59	125	0.65
1950	299	1.43	108	0.52	49	.23	15	.07	348	1.66	123	0.59
1951	251	1.14	92	0.42	45	.20	10	.04	296	1.34	102	0.46
1952	230	1.05	49	0.22	42	.19	5	.02	272	1.24	54	0.24
1953	228	1.03	44	0.20	36	.16	5	.02	264	1.19	49	0.22
Average 1949-1953	256	1.22	82	0.40	40	.19	8	.04	296	1.40	90	0.43
1954	236	1.09	30	0.14	26	.12	3	.01	262	1.20	33	0.15
1955	231	1.06	41	0.19	19	.09	2	.00	250	1.15	43	0.19
1956	228	1.05	27	0.12	17	.08	2	.00	245	1.13	29	0.12
1957	176	0.81	16	0.07	21	.09	3	.01	197	0.90	19	0.08
1958	143	0.66	21	0.09	16	.07	1	.00	159	0.73	22	0.09
Average 1954-1958	203	0.93	27	0.12	20	.09	2	.00	222	1.02	29	0.12
1959	154	0.71	13	0.06	14	.06	—	—	168	0.77	13	0.06
1960	141	0.65	19	0.09	10	.05	—	—	151	0.70	19	0.09
1961	160	0.75	20	0.09	15	.07	1	.00	175	0.82	21	0.09

A rate of .00 indicates that there were too few deaths during that year to be expressed as a rate to two decimal places

NOTIFICATION AND ATTACHMENT

Case No.	Applicant Name	Address	Occupation	Income	Assets	Liabilities	Remarks
1001	Mr. A. B. C.	123 Main St.	Teacher	\$15,000	\$20,000	\$5,000	Good
1002	Mr. D. E. F.	456 Elm St.	Engineer	\$20,000	\$30,000	\$10,000	Good
1003	Mr. G. H. I.	789 Oak St.	Doctor	\$30,000	\$40,000	\$15,000	Good
1004	Mr. J. K. L.	101 Pine St.	Lawyer	\$25,000	\$35,000	\$12,000	Good
1005	Mr. M. N. O.	202 Cedar St.	Architect	\$18,000	\$25,000	\$8,000	Good
1006	Mr. P. Q. R.	303 Birch St.	Scientist	\$22,000	\$32,000	\$10,000	Good
1007	Mr. S. T. U.	404 Spruce St.	Historian	\$12,000	\$18,000	\$6,000	Good
1008	Mr. V. W. X.	505 Willow St.	Artist	\$8,000	\$12,000	\$4,000	Good
1009	Mr. Y. Z. A.	606 Poplar St.	Writer	\$10,000	\$15,000	\$5,000	Good
1010	Mr. B. C. D.	707 Hickory St.	Musician	\$6,000	\$10,000	\$4,000	Good

**B.C.G.
Vaccination**

The following table shows the number of cases vaccinated against tuberculosis in 1961:—

TABLE 9

School children (under 14)	...	2,013
School children (over 14)	... ..	150
Contacts	... ..	457

Re-Housing

The Housing Committee co-operate in the re-housing of patients found to be living in unsatisfactory conditions.

To the 22 cases awaiting re-housing on the 31st December, 1960, were added a further 35 recommended by the Medical Officer of Health. 13 families were re-housed and 5 removed from the list for various reasons, leaving 39 still to be re-housed on 31st December, 1961.

**Voluntary
Organisations**

The Plymouth Tuberculosis Care and After-Care Voluntary Committee continue to act as agent of the Local Authority for the welfare of the tuberculous patient and a grant for these services was maintained at £600.

Total expenditure for the year amounted to £1,333, of which sum £1,096 was devoted directly to the assistance of patients and grants to hospitals. The majority of the applications, as in previous years, was in respect of clothing and bedding but the Committee also assisted patients with hire-purchase debts, fuel and light bills. Cheap milk was granted to patients, an item accounting for expenditure amounting to £542.

Amenities were also provided for the hospitals and two additional television sets were presented to Didworthy Chest Hospital.

(B) OTHER ILLNESS

Health Education 1961 saw a general intensification of health education publicity, a larger number of talks being given to mothers at child welfare centres, to senior school children and to women's organisations and a greater use being made of a wider variety of posters on public notice boards and in departments and clinics. In addition, more leaflets and booklets dealing with many aspects of this subject were distributed from all our clinics and offices and by health visitors and district nurses.

Particular attention was directed to the following:—

Accidents in the home.

Poliomyelitis vaccination.

Diphtheria immunisation.

Smallpox vaccination.

Smoking and lung cancer.

(C) VENEREAL DISEASES

I am indebted to Dr. D. F. Johnstone, the Consultant Venereologist, for the following report:—

During the year, 752 new patients presented themselves at the Clinic for diagnosis and treatment, a slight increase (21) over the previous year.

Of these, 664 cases from Plymouth, and the remainder from areas adjacent to the City.

There were 5,670 attendances. Of the total number of new cases, 259 were found to be free of disease, after a period of observation and tests. There were 29 cases of Syphilis, 125 of Gonorrhoea, 125 of non-specific Urethritis in males, and 214 other conditions closely associated with venereal disease, which required treatment.

Latterly, considerable reference to the incidence of venereal disease has been made in the press and on television, and it may therefore be of interest to the public to know something of the history and work that goes on in these centres and especially the one dealing with the Plymouth Clinical Area, situated at Freedom Fields Hospital.

The development of a service solely for the prevention and treatment of venereal disease is of comparatively recent origin. In 1916, local authorities were asked to submit schemes for treatment centres to the Ministry of Health and, if approved, these would qualify for exchequer grant.

However, it was not until 1919 that the first of the clinics were started in the great towns, and their immediate success soon led to the establishment of a chain of centres throughout the country, so that almost everyone was in reasonable reach of advice and treatment.

The original idea of these clinics was to give advice and treatment in cases of venereal disease and so successful was this, that gradually, prevention and educational aspects were encouraged, so that in these days much of the time is devoted to prevention as well as curative measures.

The function of the modern clinic then, is to give advice, and if necessary, treatment to all cases who suspect they may be suffering from venereal disease, or who have run the risk of contracting these diseases. All this must be done with the strictest secrecy and no information whatever must be given without the patient's written consent. All patients are known by a code number and no names are ever used. All contacts must be traced wherever possible, either through the patient, or by tactful enquiry outside. This is where the great importance of staffing comes in. Each member of the staff must be trained, not only in the clinical side of the work, but in tact, patience and absolute secrecy, even in the most awkward situations.

It is for this reason that staff must be permanent and not interchanged with others. This is particularly important with the Sister-in-Charge who at this Centre is responsible, not only for the smooth running of both the in-patient and out-patient department, but is also required to do domiciliary visiting where it is found necessary. This is a very delicate aspect of the work and requires much tact and skill when tracing contacts or defaulters.

During this last year, no fewer than 55 infectious cases were traced and persuaded to attend, and all this was done with the utmost secrecy and discretion. Of these 55, 34 were notified by the Medical Officer of Health, who had received complaints from those who had contracted the disease as a result of casual relationship. Of these, 28 were traced and treated, a very creditable number where description and localities are often vague.

To sum up then, the centre must be regarded as a service, where any man, woman or child, can be seen the same day, or at the most within twenty-four hours of developing symptoms, either bodily or mental, for it must be appreciated that anxiety can well be worse than physical disease and relief is profound when in many cases it is shown that "fears may be liars".

To provide this service, a considerable number of clinics are required and in Plymouth there are eleven per week, four of which are held in the evenings, to suit those who are working, though it must be conceded that of recent years many prefer to attend during working hours.

In addition, arrangements must be made to treat seamen at any time, and during this last year 102 seamen of no less than thirteen nationalities received advice and care at this centre.

There is a small in-patient department which is staffed by the same nurses who deal with the out-patients—an ideal arrangement as patients get to know the staff and trust their integrity and skill should admission be required. It must be stressed that this is not solely a V.D. ward, but one where many conditions akin to venereal diseases are diagnosed and treated.

The chief types of patient admitted are those coming from a long distance who cannot attend as out-patients, expectant mothers requiring intensive treatment, seamen, infectious cases, particularly from Remand Homes and other Institutions, and those who have no homes.

A good deal of comment has occurred in the press on the morals of the "teenager". My view is that morals have not changed much over the years, and I think any apparent change is due to the differing social awareness.

From an interest point of view, I took the cases of males and females under the age of 20, who attended in two random years, 1938 and 1960.

In 1960, 32 males of this group attended, and in 1938, 45 attended. With regard to females, I find that 79 came to the clinic in 1960, and 75 in 1938.

However, I should say that there is a change in the attitude of the young patient. At one time fear, and sometimes indeed the police, encouraged them to attend. Now, many of them are sufficiently informed to request advice on their own problems without the least diffidence.

I think there has been a slight increase in the number of boys and girls of school ages attending voluntarily and very often these boys and girls come from Secondary Modern or Grammar Schools.

In my view this is a good thing and very often the assistance given helps them considerably.

Great care is taken to see that these young patients obtain the greatest possible privacy.

The only way to deal with these problems is by education and instruction in sex matters. I might add that discipline is often lax in the home, and a tightening up of this aspect on the part of the parents would do much good.

Finally, the only way that venereal disease can be kept in check is by constant propaganda by the local authority, urging the necessity of early advice and treatment at a specialised clinic.

In this aspect Plymouth is fortunate as there has always been the closest co-operation between the Medical Officer of Health's department and the preventive medical and social side of the National Health Service.

It is interesting to note that Plymouth was one of the first cities to establish one of these special centres, and since it opened in March, 1919, no less than 45,545 new cases have been treated and there have been close on half a million attendances.

The virtual disappearance of ophthalmia neonatorum, the tremendous reduction in congenital and acquired syphilis, and the great advances made in the treatment of every type of venereal disease, has been sufficient testimony to the usefulness of these centres.

It has been recently suggested that diagnostic clinics should be held, apart from the routine clinics, to exclude the possibility of venereal disease in unmarried mothers-to-be. An excellent idea which will have the full co-operation of this centre when the time comes.

Progress in all these fields will continue, but it will be many years before such clinics become redundant, human nature being what it is.

Contacts of patients attending this or any other Clinic who were persuaded to attend by the Social Worker.

<i>Syphilis</i>		<i>Gonorrhoea</i>		<i>Soft Chancre</i>		<i>Non-V.D.</i>	
<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
-	-	-	16	-	-	-	12

TABLE " B " NEW CASES FOR THE YEAR 1961,
EXCLUSIVE OF TRANSFERS.

Year	Syphilis			Gonorrhoea			Totals
	Male	Female	Total	Male	Female	Total	
1957 ...	19	16	35	105	21	126	161
1958 ...	24	15	39	75	22	97	136
1959 ...	24	14	38	62	18	80	118
1960 ...	19	19	38	128	31	159	197
1961 ...	11	15	26	88	24	112	138

Home Nursing

Superintendent: MISS D. M. WILLIAMS

Staff The establishment was thirty-eight and one-third (including students).

The staff on 31st December was:

- 1 Superintendent
- 2 Assistants
- 30 Queen's Nurses (including 8 males)
- 3 Queen's Nurses (part-time)
- 1 State Registered Nurse (part-time)
- 1 State Enrolled Assistant Nurse (part-time)
- 5 Students

Transport

- 11 Corporation cars
- Car allowances to 24 car owners
- Allowances to 2 owners of autocycles

Accommodation Five administrative, one Queen's staff, three students, fourteen midwifery and four domestic staff were resident in the Home at the end of the year.

Training During the year eight students took the Queen's course; five for the staff and three for Cornwall.

Postgraduate Course One administrator and two Queen's nurses attended a postgraduate course recognised by the Ministry of Health.

Hospital Training Lectures are given to both the General and Special Hospital students on the Social Aspects of Disease, and all the students spend one day with the district nurse. This includes the students from Moorhaven Hospital.

Work The statistics shew that during the year more patients have been nursed although the number of visits paid was slightly lower than last year. This indicates that longer time is spent with each patient, and this is borne out by the fact that the hours of duty by the staff have been consistently high. It must be remembered that there are virtually no private nurses in Plymouth, so that all home nursing is undertaken by the district nurses and there is a shortage of geriatric beds in Plymouth.

WORK DONE

Patients on books beginning of year 1961		893
New Patients during the year:		
Medical	3,169	
Surgical	581	
Infectious Diseases	6	
Tuberculosis	37	
Maternal Complications	60	
Total New Patients ...		3,853
Total Patients Nursed ...		4,746

New Patients (included above) who were:

Old Aged Pensioners		1,852
Children under 5 years		256
Patients who have had more than 24 visits during the year		1,852

Number of visits to all patients:

Medical		111,147
Surgical		21,397
Infectious Diseases		38
Tuberculosis		3,023
Maternal Complications		451
Miscellaneous Calls (no nursing procedure carried out)		2,457
Total Visits ...		138,513

Visits (included above) to:

Old Aged Pensioners		99,207
Children under 5 years		1,535
Patients who have had more than 24 visits during the year		110,059

Home Help Service

Organiser: MRS. P. NODDER

The Local Health Authority's scheme has continued much the same as in the previous year.

It is interesting to note that in a few cases of sickness of mothers, by co-operation with Education Welfare Officers, it has been possible to provide the services of a home help and as a consequence prevented continuation of absence from school of an older child of a family.

The following is a summary of the work undertaken:

Visits by Organiser	2,183	}	282
Number of Cases assisted:								
Confinements	...	...	...	...	...	134
Tuberculosis	...	...	...	...	...	1
Chronic Sick, including aged and infirm	...	...	...	...	...	29
General Sickness	...	...	...	...	...	113
Toxæmia	5	}	282
Average number of Helpers Employed Weekly	...	...	...	...	...	28
Total number of Hours Worked by Helpers	31,664½		
Amount Recovered from Householders	£2,029		
Number of Cases of Full Recovery	46	}	282
Number of Cases of Part Recovery	...	...	...	...	...	185
Number of Cases Free	...	...	...	...	...	51

The Plymouth Guild of Social Service has continued to provide a service for old people with financial assistance from the Local Health Authority towards administrative expenses.

I am indebted to the Guild for the following details of work done:

Average number of homes visited at any given time during the year (i.e. persons helped)	...	...	729
Average number of Home Helps employed at any given time during the year	...	...	151
Total hours per week of work being provided at peak	...	...	3,505

Mental Health

Senior Assistant Medical Officer

DR. N. R. MATHESON

ADMINISTRATION

There has been no change since the Report of 1960. In connection with the institution of the Community Mental Health Centre a sociologist from the Medical Research Council has been collecting statistics concerning referral of patients to Out-patient departments, and the use that is being made now, before the Centre functions, of some parts of the Mental Health Service. The department has been co-operating in this work.

SUBNORMAL AND SEVERELY SUBNORMAL PATIENTS

There has been a slow decrease in the number of patients awaiting hospital admission. Nevertheless, many patients have been waiting for several years. New urgent cases continually have to be given priority over older ones. A number of patients have had short term spells in hospital thanks to the ready co-operation of the Royal Western Counties Hospital.

The Junior Training Centre is working to capacity. Last year it was noted that an increasing number of young children were looking for places in the special care unit, which we have hitherto called the creche. Recent research has established that the improvement in medical care has led to a vastly increased survival rate among severely subnormal children. This confirms our suspicion that we have more such children in the city than we estimated when "Highbury" was established. The need to increase the accommodation and staff is pressing. An extension to the premises has been sanctioned, and plans are in preparation.

Social work in the community has proceeded, and with help from the mental welfare officers, patients discharged from hospital have found suitable employment.

THE MENTALLY ILL

The department has been called upon to deal with an increased number of mentally ill patients who required admission to hospital. Of all patients admitted to hospital, a little over one quarter were dealt with by Plymouth mental welfare officers. Though compulsory powers were needed for more patients, the proportion of informal admission to compulsory was increased. A big majority of patients elect to stay in hospital informally once they have been admitted.

	<i>Admissions through M.W.O's</i>	<i>With Compulsion</i>	<i>Without Compulsion</i>
1958 ...	194	149	45
1959 ...	202	145	57
1960 ...	238	159	79
1961 ...	283	165	118

The mental welfare officers try to keep in touch with their patients and in many cases provide after-care after discharge from hospital. Whereas in 1959 we provided this service for only 15 patients, the figure has now risen to 110.

PROGRESS IN THE PROVISION OF MENTAL HEALTH SERVICES

The main progress during the year has been in the closer relation of the social worker staff with their patients and the psychiatrists. Our officers do far more than investigate cases and arrange their removal to hospital where necessary. Attendance at hospital conferences, and meetings with the hospital medical staff and social workers have helped to make their work more worth while and interesting.

The projects mentioned in former reports, the Community Mental Health Centre, the Adult Training Centre, an extension to the Junior Training Centre and the Hostel for subnormal persons are much nearer realisation.

STATISTICS

SUBNORMAL AND SEVERELY SUBNORMAL

<i>New Cases notified:</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
As unsuitable for education at school ...	9	9	18
As requiring help after leaving school ...	5	—	5
From other sources	4	9	13
	<hr/>	<hr/>	<hr/>
	18	18	36

<i>These were dealt with as follows:</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Provided with Community Care	17	17	34
Admitted to Hospitals	1	1	2

22 other patients were admitted to Hospitals.

59 other patients ceased to be under care.

7 other patients died.

On behalf of the Royal Western Counties Hospital, 23 patients were supervised whilst on leave in Plymouth.

The Local Health Authority were responsible for 961 patients at 31st December, 1961, comprised as follows:

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Receiving Community Care	308	272	580
In Hospital	204	177	381
	<hr/>	<hr/>	<hr/>
	512	449	961

MENTALLY ILL PATIENTS

Admissions to Hospital under the Mental Health

<i>Act, 1959:</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Section 25 } (Observation	25	36	61
Section 26 } and Treatment)	2	1	3
Section 29 (Emergency)	35	62	97
Section 60 (Hospital Orders through the Court)	4	—	4
Informal	53	65	118
	<hr/>	<hr/>	<hr/>
	119	164	283

Welfare Services

Senior Welfare Services Officer

H. J. PATERNOSTER, F.I.S.W.

Accommodation The accommodation now provided under Part III of the National Assistance Act, 1948, is:

				<i>Part III Accommodation</i>	<i>R.H.B. Accommodation</i>
Wolseley Home	...	...	108 males	55 females	62 females
"Glenfield"	...	...	27 females		
"Brightside"	...	...	26 males		
"Ingleside"	...	...	35 females		
"Lakeside"	...	...	36 mixed		
Cross Park House	...	...	32 mixed		
Whitleigh Home	...	...	41 mixed		

During the year all the above Homes have been practically filled to capacity, with the exception of the male accommodation at Wolseley Home where there is always an average of approximately twenty vacancies.

Admissions from Waiting List	...	...	...	85
Admissions (Emergencies)	...	...	...	51
Number of persons on Waiting List for admission as at 31.12.1961	...	...	...	51

Registration of Homes Under Section 37 of the National Assistance Act, 1948, all Old Persons' and Disabled Persons' Homes must be registered with the Local Authority. The under-mentioned Homes are so registered:

St. Joseph's Home, Hartley	...	Accommodation	100 residents (mixed)
"Rosemont," Wingfield Villas	...	,,	18 residents (mixed)
Torr Home for the Blind	...	,,	72 residents (mixed)
2 Thorn Park Terrace, Mannamead		,,	14 females
The Mount, Lipson	...	,,	31 females
Widey Grange, Widey Lane, Crownhill		,,	14 females
8 Apsley Road, Mutley	...	,,	18 residents (mixed)
5 Ford Park Road, Mutley	...	,,	14 females
10 Radford Road, West Hoe	...	,,	12 males
21 Mount Gold Road	...	,,	18 females
11 Gleneagle Road	...	,,	7 residents (mixed)
Astor Hall for the Disabled, Stoke		,,	25 residents (mixed)
Cann House, Tamerton Foliot, Plymouth (Cheshire Foundation Home for the Sick)	...	,,	26 residents (mixed)

The Homes are visited and inspected at regular intervals to ensure that conditions of registration are being observed.

Boarding-out Scheme

The Boarding-out Scheme of the Plymouth Guild of Social Service is still providing a most useful contribution in overcoming the waiting list of persons awaiting admission to the Council's Homes. At present 129 people are boarded-out.

WELFARE OF THE BLIND

Under Section 29 of the National Assistance Act, 1948, it is the duty of the Local Authority to make arrangements for promoting the welfare of blind persons who are resident in this area. During the year, 33 persons were newly registered blind and 12 partially sighted. It will be observed from the table following that the great majority of the registered blind are now over the age of 50 years.

There are three sighted Home Teachers of the Blind who work from the Health and Welfare Department office at "Seven Trees," and are the direct employees of the Plymouth City Council. During the course of the year, especially in the summer, many private outings are arranged for the blind, and there are also weekly handicraft classes throughout the year for the blind and the partially sighted. Each week there is a social and handicraft class at the Blind Institution on Wednesday afternoons, and for the blind population who live in the Crownhill, St. Budeaux, Whitleigh and Ernesettle districts, the British Legion Hall at Crownhill is used every Monday afternoon alternatively for handicraft and social gatherings for the people in this area.

A Social and Handicraft Centre for the Partially Sighted in the Devonport area was opened last year at the Pilgrim Congregational Church Hall in St. Levan Road, and this continues to work most successfully.

At the Blind Institution, North Hill, there are 21 journeymen, 1 journeywoman, and 3 trainees employed, and the future of this building is at present under consideration. Most of the journeymen employed there are now getting quite elderly, and it is unlikely that the number will increase in view of the present policy of trying to place blind persons in open industry.

There are 4 Home Workers for the blind in Plymouth (1 female, 3 males) and the men are all employed as piano tuners. The contract which the Plymouth City Council grants the Blind Institution for the tuning of pianos in their schools is most valuable in this respect. The female Home Worker is a Braille Copyist.

WELFARE OF THE BLIND—REGISTRATION

Year ended 31st December, 1961

TABLE I—AGE PERIODS OF REGISTERED BLIND PERSONS

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90 and over	Un-known	Total
M	-	-	-	-	1	1	3	3	4	7	6	32	20	15	43	8	14	2	-	159
F	-	-	1	-	-	-	2	-	5	8	19	24	22	20	62	31	23	18	-	235
T	-	-	1	-	1	1	5	3	9	15	25	56	42	35	105	39	37	20	-	394

FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY
SIGHTED PERSONS

CIRCULAR 2/53

	CAUSE OF DISABILITY			
	<i>Cataract</i>	<i>Glaucoma</i>	<i>Retrolental Fibroplasia</i>	<i>Others</i>
(i) Number of cases registered during the year in respect of which Sect. F of Forms B.D.8 recommends :	13	8	—	24
(a) No treatment ...	—	—	—	10
(b) Treatment (medical surgical or optical) ...	12	8	—	13
(c) Educational ...	1	—	—	1
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	9	7	—	12

OPHTHALMIA NEONATORUM

Total number in 1961	...	...	...	6
Number (a) vision lost	..	..	..	Nil
(b) vision impaired	..	..	..	1
(c) treatment continuing at the end of the year	..	..	..	Nil

WELFARE OF THE PHYSICALLY HANDICAPPED

The Register The number of new cases reported to the department together with the numbers on the register for the last three years are as follows:

	1959	1960	1961
New Cases 	44	78	100
Register at 31st December 	483	525	588

Analysis of the new cases and the total register for 1961 are shown in Tables I and II respectively.

Home Visiting 205 new and old cases were seen during the year, relating to problems requiring special attention, and involved 660 visits.

The following table shows the numbers and types of problems dealt with during the year:

Housing 	33
Residential Accommodation 	13
Training and Employment 	6
Readjustment, including handicrafts and social activities	26
Social problems 	8
Modifications, aids and adaptations 	115
Financial and material assistance 	10
Other general problems 	25
	236

Aids and Modifications 69 cases were assisted with aids and modifications during the year. As in previous years these varied from small aids costing a few shillings to extensive modifications costing £50 or more, although in the latter type of case there was normally a recovery of a proportion of the cost from the individual. The estimated cost of all this kind of assistance given during the calendar year was £588 of which £121 was recoverable.

**Diversional
Employment**

At the end of the year, 120 cases were receiving occupational therapy and handicraft instruction

as follows:

In own homes	...	...	...	50
In handicraft classes	...	...	...	23
In Old People's Homes	...	...	...	47

Every effort is made to arrange for severely disabled persons, who would normally be considered as housebound, to attend the handicraft classes as a method of obtaining social as well as occupational activity. Three sessions weekly were maintained at "Highbury" on Monday, Wednesday and Friday afternoons.

The total value of sales of articles completed under diversional employment was £633 for the calendar year, this being an increase of nearly £200 on the previous year. About half of this amount was as a result of sales at the shop at Frankfort Gate, the remainder being sales made by the handicapped persons themselves. Of the £633 - £475 represented recovery of cost of materials - the remaining £158 being profit returned to the patients.

**Remunerative
Employment**

Nine persons were employed on leatherwork preparation and the making of plywood bases for canework during the year. Although the articles produced were in the main used in the diversional employment scheme, it was possible towards the end of the year to circularise local hospitals and voluntary organisations inviting orders for plywood bases. The first order was received at the end of December, this being for five dozen bases.

The estimated value of all the articles produced was £200, whilst payments to individuals at piece rates totalled £53, these figures relating to the calendar year.

**Residential
Accommodation**

At the end of the year twenty-six handicapped persons, including seven epileptics and two spastics were being maintained in local and national residential centres. This is in addition to twenty-five registered handicapped persons maintained in the Council's own homes. The number of persons in the Council's homes, who have some handicap, is of course greater than this, but their admission was usually necessary for some reason other than the handicap.

Voluntary Organisations

Personal contact was maintained with all the voluntary organisations dealing with the handicapped, and frequent approach was made to the Welfare Officer for advice and assistance. Visits were maintained to the centres providing social and occupational activities, such as Trengweath and Astor Hall.

TABLE I
NEW CASES ADDED TO THE REGISTER OF HANDICAPPED PERSONS DURING 1961

DISABILITY CATEGORIES	EMPLOYMENT CAPABILITIES										TOTALS	
	Ordinary Conditions		Sheltered Workshops		Home Employment only		Incapable of Work		Children under 16		M	F
	M	F	M	F	M	F	M	F	M	F		
Amputation	1	-	1	-	-	-	2	-	-	-	4	-
Arthritis	-	-	-	-	-	-	4	30	-	-	4	30
Congenital malformations ...	-	-	2	-	-	-	-	3	-	-	2	3
General diseases of the chest, heart, digestive system, etc. ...	-	-	-	-	-	-	9	5	1	-	10	5
General physical injuries ...	-	-	-	-	-	-	4	6	-	-	4	6
Organic nervous diseases ...	-	-	1	1	-	-	6	16	-	1	7	18
Nervous disorders	-	-	1	-	-	-	-	1	-	-	1	1
Respiratory Tuberculosis ...	-	-	-	-	-	-	1	1	-	-	1	1
Non-respiratory Tuberculosis ...	2	-	-	-	-	-	-	1	-	-	2	1
TOTAL	3	-	5	1	-	-	26	63	1	1	35	65

REGISTER OF HANDICAPPED PERSONS AS AT 31ST DECEMBER, 1961

DISABILITY CATEGORIES	EMPLOYMENT CAPABILITIES										TOTALS			
	Ordinary Conditions		Sheltered Workshops		Home employment only		Incapable of work		Children under 16					
	M	F	M	F	M	F	M	F	M	F	M	F		
Amputation ...	2 (1)	-	8 (4)	-	2	-	20	6	-	-	-	-	32	6
Arthritis ...	3 (2)	-	3 (1)	-	9	8	24	74	-	-	-	-	39	82
Congenital malformations ...	5 (3)	-	6 (1)	2 (1)	2	1	5	10	-	-	-	-	18	13
General diseases of the chest, heart, digestive system, etc. ...	8 (4)	-	7 (1)	2	7	3	32	15	1	-	-	-	55	20
General physical injuries ...	5 (2)	3	5 (1)	-	4	2	16	14	-	-	-	-	30	19
Organic nervous diseases ...	13 (12)	2	8 (5)	5 (4)	30	12	65	69	-	1	-	-	116	89
Nervous and mental disorders ...	4 (1)	-	1	-	3	-	11	3	-	-	-	-	19	3
Respiratory Tuberculosis ...	4	-	2	-	-	-	10	1	-	-	-	-	16	1
Non-respiratory Tuberculosis ...	5	-	1	-	1	-	1	2	-	-	-	-	8	2
Other diseases and injuries ...	-	-	1	-	-	-	13	6	-	-	-	-	14	6
TOTALS ...	49	5	42	9	58	26	197	200	1	1	347	241		

Figures in brackets show the numbers recorded as being employed

WELFARE OF THE DEAF AND DUMB

The Mission premises which for some time now have been inadequate for the type of service to be rendered to the deaf and dumb, will be vacated during the forthcoming year. Alternative accommodation has been obtained in Seymour Road, Mannamead. It is anticipated when these premises become available and the adaptations completed, the Deaf and Dumb Mission in Plymouth will have first class accommodation for all the amenities and welfare relating to their needs.

DEAF AND DUMB REGISTER

<i>Under 16</i>		<i>16-64</i>		<i>65 and over</i>		<i>Total</i>	
Male	Female	Male	Female	Male	Female	Male	Female
14	17	64	69	12	8	90	94
						184	

NATIONAL ASSISTANCE ACTS, 1948 & 1951

REMOVAL OF PERSONS NEEDING CARE AND ATTENTION

Among the many requests made for assistance to the Health and Welfare Department in the care and attention of elderly people, 20 cases (7 males, 13 females) gave special difficulty owing to illness or mental deterioration, often coupled with insanitary conditions and lack of co-operation by the individual needing help.

By careful consideration of each case it was usually possible eventually to reach a satisfactory solution to the problem and the patience and tact of the Welfare Visitors contributed greatly to achieving this. 8 patients were admitted voluntarily to hospital, 1 to a Nursing Home, 1 boarded-out and 1 went to relatives. 7 were enabled to carry on at home by the provision of Home Nurses and Home Helps. In only 1 case of which details are given below was it necessary to invoke legal action to ensure that a person received adequate care and attention.

ACTION UNDER SECTION 47, NATIONAL ASSISTANCE ACTS, 1948 AND 1951

CASE REPORT

A woman aged 82 years, living alone, had suffered from chronic bronchitis for many years. Eventually she became bedfast and it became impossible to deal with the insanitary conditions which arose. Her rapid physical deterioration necessitated admission to hospital, which she refused, and an application was made to a Magistrate for her urgent admission for a period of three weeks. This was granted and subsequently extended on further application, for a period of three months. Application for further extensions have not been necessary as she became content to remain in a geriatric hospital.

CHIROPODY SERVICE

The Local Authority Scheme began in August, 1960. Treatment is given in existing clinics and by domiciliary visits when necessary by local chiropodists employed by the session.

Those eligible for treatment are men aged 65 years and over and women aged 60 and over, whose incomes do not exceed the amount of the national retirement pension or who receive a National Assistance allowance. The patient is charged 3/6 for a treatment at a clinic and 4/6 for a treatment at home.

During the first twelve months operation of the service, 196 patients received 1,018 treatments at clinics and 133 patients received 798 treatments in their homes.

There was only a slow increase during 1961 in those using the service and undoubtedly the age and income restrictions and the charges made tend to curb expansion. Nevertheless, the scheme provides a satisfactory service for, and appears to be appreciated by, those eligible persons who use it.

Ambulance Service

Ambulance Officer

MR. R. SAMPSON

Use of the Service

Again I have to report an increase in the total number of patients carried and miles travelled amounting to 3,424 patients and 10,531 miles. The increase of patients was due entirely to the number of "Welfare" patients.

On three occasions it was necessary, owing to medical urgency, to send patients by helicopter to hospitals at Birmingham, Aylesbury and Bristol. On what was one of the heaviest Saturdays of the year for holiday traffic an urgent case was transferred by road from Plymouth to a Bristol Hospital. With the valuable help of the Police in Devon, Somerset and Bristol, who in turn each provided a patrol car as escort, the journey was completed in excellent time. Such assistance as this is very much appreciated. Similar help is given by the Plymouth City Police when the need arises.

Co-operation with Devon and Cornwall Local Health Authorities is maintained on a very satisfactory basis.

Thanks are again tendered to British Railways for their ready co-operation but rail transport for patients is getting more difficult as the modern type of coach will not accommodate stretchers satisfactorily and therefore we are restricted as to the number of trains available for this particular form of transport.

TOTAL PATIENTS AND MILEAGE

	PLYMOUTH	DEVON	CORNWALL	TOTAL
ROAD JOURNEYS				
(a) Ordinary Removals ...	60,945	202	70	61,217
Mileage ...	215,022	7,525	2,453	225,000
(b) Accidents and Emergencies ...	3,485	11	—	3,496
Mileage ...	15,567	145	—	15,712
(c) Welfare Patients ...	8,478	448	—	8,926
Mileage ...	18,676	1,022	—	19,698
Total Patients ...	72,908	661	70	73,639
Total Mileage ...	249,265	8,692	2,453	260,410
RAIL JOURNEYS ...	256	12	15	283
Approximate total rail mileage travelled by patients 43, 451				

TABLE SHOWING AVERAGE ROAD MILES PER PATIENT

1951	...	...	...	4.450
1956	...	...	...	3.932
1961	...	...	...	3.420

Vehicles A further three new ambulances were received early in the year. Once again these were fitted with Diesel engines and fibre glass bodies, making a total of six of this type of vehicle. These have all proved very satisfactory, both from a running and maintenance point of view and are economical in the use of fuel. A further two ambulances of this type are on order, together with a large dual-purpose vehicle which is being specially built to take stretchers and wheel chairs. The vehicles will have special lifting equipment to facilitate the loading of patients in wheel chairs and will also accommodate sitting cases.

The strength of the fleet is now fourteen ambulances and five dual-purpose vehicles.

Radio Tele-Communication The change-over from the high wave band referred to in my report of last year has now been completed and all vehicles in the service are working on the band.

Staff At the beginning of the year the weekly hours of driver-attendants were reduced from forty-four to forty-two in accordance with a national agreement. Consequently, it was necessary to increase the number of staff by two, bringing the total to forty-four.

The voluntary assistance rendered by members of the St. John Ambulance Brigade has again proved of great value; particularly, the Nursing members who so often travel considerable distances escorting patients by train, at times at extremely short notice. Both Ambulance and Nursing personnel also assist with the staffing of ambulances locally.

The total voluntary service so given amounted to 1,258 hours for men and 2,013 for women.

Civil Defence Twenty-two recruits were enrolled in the Ambulance and First Aid Section. Of these, thirteen qualified in first aid. Fifteen volunteers received Home Office Proficiency Badges for taking part in exercises and for having completed further special training.

Two exercises with other sections were held at the Cornwall County Civil Defence Training Centre at Bodmin. Apart from exercises on the ground advantage was taken of imparting further training in the movement of vehicles in convoy.

In September a full scale exercise was held in Plymouth in conjunction with the South West Regional Hospital Board who set up a Forward Medical Aid Unit. Casualties were faked to simulate injuries and these were then treated by First Aid Personnel, and transported from three sites in the Devonport area to the Forward Medical Aid Unit situated at Peverell. After treatment a large number of casualties were taken to a 'hospital' at Tavistock.

Ambulances were brought in from as far away as Gloucester in order to make up for the equivalent of an Ambulance Company, i.e. seventy-two four-berth ambulances. Approximately two hundred Civil Defence Volunteers, together with members of the Voluntary Aid Societies and the full-time staff of this service took part in the exercise.

TABLE SHOWING TOTAL PATIENTS AND MILEAGE LAST FIVE YEARS

YEAR	PLYMOUTH		DEVON		CORNWALL		TOTAL	
	<i>Patients</i>	<i>Mileage</i>	<i>Patients</i>	<i>Mileage</i>	<i>Patients</i>	<i>Mileage</i>	<i>Patients</i>	<i>Mileage</i>
1957	61,823	213,505	483	14,806	67	3,298	62,373	231,609
1958	65,048	213,276	430	13,900	61	2,955	65,539	230,131
1959	63,848	219,560	299	9,314	79	3,418	64,226	232,292
1960	69,860	239,789	285	7,188	70	2,902	70,215	249,879
1961	72,908	249,265	661	8,692	70	2,453	73,639	260,410

Plymouth Port Health Authority

Deputy Port Medical Officer

DR. G. B. CARTER

General This Report is in the form and sequence prescribed for Annual Reports of Medical Officers of Port Health Authorities by the Ministry of Health, Form Port 20, dated October, 1952.

A detailed report was made in 1960 and where there has been no change in arrangements in 1961 this is indicated under the appropriate section.

The number of vessels entering the Port in 1961 was 2,099, an increase of 135 over 1960. The tonnage also increased by 330,000 during the year.

The decision of the French Line to discontinue regular calls at Plymouth was received with regret, but the reduction in liner traffic will be offset by the welcome announcement that a number of ships of the P. & O. Company will resume their calls at Plymouth in 1962 after a break of many years.

SECTION I - STAFF

TABLE A

NO CHANGE

SECTION II

AMOUNT OF SHIPPING ENTERING THE DISTRICT DURING THE YEAR

TABLE B

<i>Ships from</i>	<i>Number</i>	<i>Tonnage</i>	<i>Number inspected</i>		<i>Number of ships reported as having, or having had during the voyage, infectious disease on board</i>
			<i>By the Medical Officer of Health</i>	<i>By the Public Health Inspector</i>	
Foreign Ports	736	1,388,982	91	608	9
Coastwise	1,363	878,927	—	821	—
Total	2,099	2,267,909	91	1,429	9

SECTION III
CHARACTER OF SHIPPING AND TRADE DURING THE YEAR

TABLE C

Passenger Traffic	Number of passengers INWARDS ...	9,994
	Number of passengers OUTWARDS ...	3,621

The total number of passengers remaining on board passenger-carrying vessels entering the Port of Plymouth (exclusive of those shown above) was 20,584.

**Cargo
Traffic**

Principal IMPORTS

Foreign

- Fertilisers from Antwerp and Hamburg.
- Phosphates from Sfax, Bona, Antwerp and Rouen.
- Potash from Hamburg, Antwerp, Bremen and Wismar.
- Basic Slag from Rouen and Dunkirk.
- Onions from Rotterdam and Amsterdam.
- Fresh Fruit from Holland and France.
- Preserved Meat from Holland.
- Timber from Vancouver, Antwerp, Gothenburg, Kotka and Kemi.
- Grain from Vancouver, Antwerp, Rouen and Rotterdam.
- Fuel Oil from Curacao and Trinidad.
- Agricultural Machinery from Holland.

Coastal

- Basic Slag from Grimsby.
- Coal from South Wales and North-East ports.
- Vaporising Oil, Gas Oil, Petrol, Kerosene and Paraffin from Fawley, Hamble, Swansea and Falmouth.
- Fertilisers and Phosphates from Middlesbrough, London and Immingham.
- Cement and Asphalt from London.
- Grain from Avonmouth, Newport (I.o.W.) and Cardiff.
- Potatoes from Belfast and Londonderry.
- Fish from deep-sea fishing grounds.
- Margarine, Cooking Fats, Tinned Fruit, Biscuits, Tinned Vegetables and Sugar from Liverpool.

Principal EXPORTS

- China Clay and Granite Chippings.

PRINCIPAL PORTS from which ships arrive:

<i>Asia and Australasia</i>	<i>Europe</i>	<i>America</i>	<i>Africa</i>
Hong Kong	Amsterdam	Buenos Aires	Beira
Rangoon	Antwerp	Curacao	Cape Town
Brisbane	Bremen	Kingston (Ja.)	Casablanca
Abadan	Brest	Philadelphia	Sfax
Bombay	Calais	Valparaiso	
	Delfzyl		
	Gibraltar		
	Gothenburg		
	Kotka		
	Le Havre		
	Rotterdam		
	Rouen		

SECTION IV

INLAND BARGE TRAFFIC

There is no inland barge traffic at the Port.

SECTION V

WATER SUPPLY

NO CHANGE

SECTION VI

PUBLIC HEALTH (SHIPS) REGULATIONS, 1952

NO CHANGE

SECTION VII

SMALLPOX

(1) *Isolation Hospitals available.*

The first case or cases would be admitted to the Smallpox Hospital, Liskeard, Cornwall (Telephone: Liskeard 2385), staffed from the Scott Isolation Hospital, Beacon Park Road, Plymouth (Telephone: Plymouth 64311 and 61437). Physician-Superintendent: Dr. D. Johnstone.

Should it appear likely that more extensive accommodation would be required, arrangements would be made for the Lee Mill Smallpox Hospital, at present used for geriatric cases, to be re-opened as a Smallpox Hospital.

(2) *Arrangements for the transport of cases to hospital.*

The launch *Argus* of the Plymouth Port Health Authority, based at Millbay Docks, Plymouth (Telephone: Plymouth 68000, Ext. 2229 by day, and Plymouth 68000, Ext. 2129 at night and weekends) is available to transport cases from ship to shore. The launch is equipped with a radio transmitter and receiver linked to the Plymouth Ambulance Headquarters

Ambulances of the Plymouth City Council's Ambulance Service (Telephone: Plymouth 64101) are available to transport cases to hospital.

(3) *Smallpox Consultants*

Devon and Cornwall: Dr. W. A. Lister, 10 The Crescent Plymouth. (Telephone: Plymouth 61875 and 51040.)
Resigned December, 1961.

There now appear to be no practitioners in Devon and Cornwall designated to assist Medical Officers of Health in the diagnosis of smallpox. The nearest listed practitioner is Dr. J. Macrae (Telephone: Bristol 31165), Ham Green Isolation Hospital, Bristol.

(4) *Facilities for the Laboratory Diagnosis of Smallpox.*

Materials for the collection of specimens from suspected cases are always available at the Port Health Office, Plymouth.

Specimens are forwarded to the Virus Reference Laboratory, Central Public Health Laboratory, Colindale Avenue, London N.W.9.

SECTION VIII

VENEREAL DISEASE

Location of facilities for the diagnosis and treatment of venereal disease, and days and hours of attendance.

NO CHANGE

During the year 71 British and 41 foreign seamen (Total 112, compared with 97 in 1960) were treated at the Venereal Diseases Clinic.

The Nationalities were as follows:

British	...	...	71
Spanish	...	...	14
Dutch	...	...	9
German	...	...	3
Maltese	...	...	3
Norwegian	...	...	2
Yugoslav	...	...	2
Greek	...	...	2
Fijian	...	...	2
Estonian	...	...	1
Swedish	...	...	1
Danish	...	...	1
Indian	...	...	1

SECTION IX

CASES OF NOTIFIABLE AND OTHER INFECTIOUS DISEASES ON SHIPS

TABLE D

<i>Category</i>	<i>Disease</i>	<i>Number of cases during the year</i>		<i>Number of ships concerned</i>
		<i>Passengers</i>	<i>Crew</i>	
Cases landed from ships from foreign ports	Mumps ...	1	—	1
	Pneumonia ...	1	—	1
Cases which have occurred on ships from foreign ports but have been disposed of before arrival	Mumps ...	1	1	2
	Measles ...	3	—	3
	Malaria ...	—	1	1
	Pneumonia ...	—	2	1
Cases landed from other ships	—	—	—	—

SECTION X

OBSERVATIONS ON THE OCCURRENCE OF MALARIA IN SHIPS

There were no cases of malaria brought to notice in ships arriving at Plymouth during the year.

SECTION XI

MEASURES TAKEN AGAINST SHIPS INFECTED WITH OR SUSPECTED FOR PLAGUE

No plague-infected or suspected ships entered the Port during the year.

SECTION XII

MEASURES AGAINST RODENTS IN SHIPS FROM FOREIGN PORTS

- (1) All ships arriving at the various wharves are boarded by the Port Health Inspector and Rodent Operator. Enquiries are made of the officers and crew as to evidence of rat infestation. Foremen Stevedores are also questioned as to the presence of rats. Where rat infestation is found, trapping or poisoning is carried out by the Rodent Operator.
- (2) All rats caught are destroyed, and specimens submitted to the Public Health Laboratory, South Devon and East Cornwall Hospital, Greenbank, Plymouth.
- (3) Deratting of ships is carried out by fumigation with hydrocyanic acid gas. These fumigations are carried out by private firms under the supervision of the Port Health Authority.

The names of Commercial Contractors who have carried out the fumigation of vessels at this Port are:

1. Fumigation Services Ltd., Barking, Essex.
2. London Fumigation Co., London E.C.3.

Small infestations are dealt with by the Local Authority's Rodent Operator, using "Warfarin".

It is pleasing to note that rat-proofing principles have been adopted in the construction of new vessels.

TABLE E

Rodents destroyed during the year in ships from foreign ports.

NIL

Rodents destroyed in docks, quays, wharves and warehouses:

<i>Category</i>				<i>Number</i>
Black rats	...	...	...	-
Brown rats	...	...	...	29
Sent for examination	...	...	...	-
Infected with plague	...	...	...	-

Number of rats presumed killed, based on amount of poison bait taken: 205.

Number of mice destroyed by poisoning: 195.

TABLE F

DERATTING CERTIFICATES AND DERATTING EXEMPTION CERTIFICATES ISSUED DURING THE YEAR FOR SHIPS FROM FOREIGN PORTS

<i>No. of Deratting Certificates issued</i>					<i>Number of Deratting Exemption Certificates issued</i>	<i>Total Certificates issued</i>
<i>After fumigation with</i>		<i>After trapping</i>	<i>After poisoning</i>	<i>Total</i>		
<i>HCN</i>	<i>Other fumigant (state method)</i>					
1	2	3	4	5	6	7
-	-	-	-	-	61	61

PREVENTION OF DAMAGE BY PESTS ACT, 1949

(APPLICATION TO SHIPPING) ORDER, 1951

No Rodent Control Certificates were issued to coastal vessels during the year.

The majority of vessels entering the Port carried a Deratting Exemption Certificate.

SECTION XIII
INSPECTION OF SHIPS FOR NUISANCES
TABLE G
INSPECTIONS AND NOTICES

<i>Nature and Number of Inspections</i>	<i>Notices served</i>		<i>Result of serving Notices</i>
	<i>Statutory Notices</i>	<i>Other Notices</i>	<i>Complied with</i>
1,215 vessels	—	5	4

SECTION XIV
PUBLIC HEALTH (SHELL-FISH) REGULATIONS, 1934 & 1948
NO CHANGE

SECTION XV
MEDICAL INSPECTION OF ALIENS

Paragraphs (1), (2) and (3): NO CHANGE.

Paragraphs (4): During the year the number of incoming aliens was 3,655. The number of out-going aliens was 860.

Paragraph (5): NO CHANGE

Reports and certificates for aliens medically examined:

	<i>Nature of Report or Certificate</i>	<i>Total number of reports and certificates issued</i>	<i>Aliens not permitted to land</i>
A	Unsound mind or mentally defective	—	—
B (1)	Undesirable for medical reasons ...	—	—
B (2)	(a) Inability to support ...	—	—
	(b) Likely to require medical treatment	3	1
	(c) Inability to support and likely to require medical treatment ...	—	—
C	Conditionally landed for further medical examination ...	—	—
	TOTALS ...	3	1

SECTION XVI

MISCELLANEOUS

Arrangements for the burial on shore of persons who have died on board ship from infectious disease.

NO CHANGE

Food Inspection During the year 342 vessels were dealt with under the Public Health (Imported Food) Regulations, 1937 and 1948.

There were 273 from foreign ports, and 69 coastwise.

The total amount of foodstuffs voluntarily surrendered and condemned as unsound, unwholesome and unfit for human consumption consisted of:

	<i>tons</i>	<i>cwts.</i>	<i>qrs.</i>	<i>lbs.</i>	<i>ozs.</i>
Pork Luncheon Meat ...		18	0	0	0
Corned Beef ...			1	20	12
Lard ...			2	0	0
Evaporated Milk ...				23	10
Tinned Fruit (various) ...			2	19	9
Grapefruit Juice ...				13	8
Pineapple Juice ...				19	13
Tomato Juice ...				9	3
Orange Juice ...				2	6
Cooked Ham ...				10	4
Tinned Tomatoes ...				7	14
Tinned Salmon ...					7
Tinned Pilchards ...					5
Spanish Rice ...					15
TOTAL	1	0	1	16	10

No action was taken under the Public Health (Imported Milk) Regulations, 1926, and the Public Health (Preservations, Etc., in Food) Regulations, 1925 and 1958.

The following specimens were submitted to the Public Health Laboratory, Greenbank, Plymouth, for examination:

<i>Nature of Specimen</i>	<i>From</i>	<i>Examined for</i>	<i>Result</i>
Oysters (2 samples)	Yealm Oyster Fisheries	B. Coli.	Fæcal Type E Coli not isolated

Infectious Diseases

No major infectious disease occurred within the area of the Authority during 1959.

Cases landed at the Port

Two cases of infectious disease were landed, and thirteen cases of non-infectious disease or injury.

Admission to hospital was required in fourteen of these fifteen cases.

School Health Service

Senior Medical Officer

DR. T. H. HARRISON

During 1961 there were no changes in the arrangements for medical inspection, and children in three age groups in the ordinary schools were given a periodic medical inspection at school, viz. Entrants to school life, Intermediates between the ages of 9-plus and 10-plus years, and School Leavers. All children at special schools were also given their annual medical inspection.

The health of the children was satisfactory and only eight of the 9,902 children inspected at the periodic medical inspections were considered to be in an unsatisfactory physical condition and to need following up regarding home conditions, diet at home, milk and meals at school, etc. Six of the eight children were Entrants

The numbers of children per 1,000 inspected at the periodic medical inspections found requiring treatment for defective vision and for all other defects, were similar to those for the two preceding years, but in the Intermediate age group very few children were found with new defects requiring treatment which were not under treatment, as has been the case for several years. As the children examined as Intermediates had last been given a periodic medical inspection four years previously, it seems that the routine inspections at this age could now be discontinued as suggested by the Ministry of Education, and replaced by a system of selective inspections of children at Junior Schools.

The overall percentage of parents attending for their children's periodic medical inspections was 50.2 per cent. For Entrants 77.9 per cent of the parents attended and for Leavers 16.7 per cent.

In addition to the 9,902 children given a periodic medical inspection at school, 8,858 other medical inspections of children were carried out, mainly in the school clinics, for various purposes. Included in these other medical inspections were children referred by the Director of Education because of frequent or prolonged absence from school for medical reasons, the absences mainly being covered by medical certificates. Special arrangements were made for the examination of these cases at the Central School Clinic and towards the end of the year arrangements were made for one of the

School Medical Officers to be available at the Central School Clinic on one morning a week for regular consultation with the Education Welfare Officers, who were encouraged to bring forward these cases to the medical officer for discussion and advice at an early stage in their absence from school. It was also arranged that this medical officer would act as liaison medical officer with general practitioners, who were notified of the arrangements, and the indications are that this is going to prove very useful and lead to greater co-operation between the School Health Service and general practitioners.

The standard of cleanliness of the children was the same as in 1960 and 1.1 per cent of the children were again found to be infested with vermin in some degree. The school nurses made over 172,000 examinations of children for cleanliness during the year.

The number of children treated by the school nurses at the school clinics for minor ailments and the number given ultra violet light treatment again decreased and it seems probable that the daily attendance of the nurses at some of the school clinics will soon be unnecessary.

Less children were treated at the Speech Therapy Clinics because the vacancy which occurred when one of the two Speech Therapists resigned in April could not be filled until the end of the year. On the other hand, the vacancy for a Psychiatric Social Worker at the Child Guidance Clinic which had existed since April, 1960, was filled in October, 1961.

All the schools were visited by the dental officers during the year and all children in attendance at the time of their visits inspected. Although the number of dental officers employed throughout the year averaged 4.4, out of an establishment of five dental officers, it was not possible either to offer dental treatment to all children found requiring it, or to do all the fillings required, when parents were offered and accepted treatment, without a delay of several months. An increase in the establishment of dental staff to allow for the appointment when available of one Dental Auxiliary, who would undertake certain filling work, was approved during the year, but it would need an establishment of eleven dental officers to give the ratio of one dental officer per 3,000 children suggested by the Ministry of Education as necessary to do all the dental treatment required and it would be impossible to obtain the dental officers to fill the posts if they were created.

The number of children vaccinated with B.C.G. at the school clinics was greater than in the previous two years, while the percentage of children found on testing for suitability for vaccination to have been previously infected with tuberculosis continued to decline and was only 6.7 per cent for the 1947 age group.

More than twice as many children completed a full primary course of immunisation against diphtheria at the school clinics than in 1960 and more than three times as many a full primary course of immunisation against tetanus. The latter resulted from the bringing into use at the beginning of the year of a new consent form for immunisation, in which parents gave consent to immunisation as necessary against diphtheria, tetanus and poliomyelitis.

The erection of the new combined Maternity and Child Welfare and School Health Service Clinic at Stonehouse was commenced during the year, and completed and put into use on the 26th March, 1962. It was formally opened by the Lord Mayor on the 3rd May, 1962. The two services have their own accommodation, including waiting rooms and medical officers' rooms, which enables each to have sessions at the same time. The arrangements are a considerable improvement on those at the previous new clinic, completed at Honicknowle in 1955, and result from the experience gained in its use. At Honicknowle Clinic there is only one medical officers' room and one waiting room for the use of both services.

A start had already been made on the building of the new Community Mental Health Centre in which the new Child Guidance Clinic will be accommodated in the grounds of Seven Trees, at the time of writing this report, and work on the new combined Central Clinic at Seven Trees will be commenced when the first building has been completed.

Staff The number of staff employed on School Health Service duties during 1961, in terms of whole-time officers, was approximately the same as in 1960.

At the end of 1961 the numbers in the various sections were as follows:—

MEDICAL, ETC.					
Medical Officers	...	...	...	...	4.29
School Nurses	...	...	...	...	10.72
Speech Therapists	...	...	...	...	1.00
DENTAL					
Dental Officers	...	...	...	...	4.41
Dental Surgery Assistants	...	...	...	...	4.41
CHILD GUIDANCE					
Psychiatrists	...	...	...	...	0.70
Educational Psychologists	...	...	...	...	0.50
Psychiatric Social Workers	...	...	...	...	2.00

It was not until December, 1961, when Dr. T. A. Lloyd-James was appointed that the vacancy for an Assistant Medical Officer of Health and School Medical Officer, which had existed since October, 1960, was able to be filled on a permanent basis. In the meantime a temporary medical officer was employed.

The School Nursing Service was carried on under some difficulty from September to December, 1961. During this period three of the eleven school nurses left to take a Health Visitors' course at Oxford on being granted bursaries by the Health Committee, three nurses left to take other appointments and Nurse M. B. Roach retired after thirty years' service. A further nurse was on sick leave for nearly the whole of 1961 as a result of a road accident. The vacancies were able to be filled as they occurred, by the appointment of State Registered Nurses, but the work was considerably interrupted by the changes.

One of the two Speech Therapists, Miss I. S. R. Powling, resigned in April, 1961, and no suitable applications were received for the vacancy until December, 1961, when Miss K. J. Nixon was appointed, to commence duty on the 1st February, 1962.

There were no changes among the four whole-time dental officers, but the vacancy for the fifth was unable to be filled by a whole-time officer and part-time officers were engaged on a sessional basis to fill the vacancy as far as possible. Two of the five Dental Surgery Assistants resigned during the year and were replaced as the vacancies occurred.

An increase in the establishment of dental staff was approved by the Authority in September, 1961, to allow for the appointment when available of one Dental Auxiliary, a new kind of ancillary dental worker trained to undertake dental treatment of a simple nature of children, including filling work, under the direction of a dental officer in a local authority dental clinic.

The vacancy for a Psychiatric Social Worker, which had existed since April, 1960, was filled in October, 1961, by the appointment of Mr. S. E. Webb, to complete the establishment of two Psychiatric Social Workers at the Child Guidance Clinic.

Medical Inspection

The full statistical tables relating to medical inspection are given at the end of this report.

1. PERIODIC MEDICAL INSPECTION

There were no changes in the arrangements for medical inspection during the year and children in three main age groups in the ordinary schools were medically inspected, viz. Entrants, Intermediates at the age of 9-plus to 10-plus years, and Leavers. All the children at special schools were also inspected. The numbers of children inspected in the various groups are as follows:—

NUMBER OF PERIODIC MEDICAL INSPECTIONS, 1961

1. Entrants (1957 to 1952 age groups)	3,023
2. Intermediates (1951-1948 age groups)	2,731
3. Leavers (1947 and earlier age groups)	3,833
4. Pupils at Special Schools	315
	<hr/>
TOTAL	9,902
	<hr/>

The total of 9,902 compares with 9,823 in 1960 and 11,603 in 1959.

A. *Physical condition of the children*

Only eight of the 9,902 children inspected (0.08 per cent) were considered to be in an unsatisfactory physical condition. This compares with five children (0.05 per cent) in 1960 and fourteen (0.12 per cent) in 1959.

Six of the eight unsatisfactory children in 1961, were Entrants. In 1960, three of the five unsatisfactory were Entrants and in 1959, eight of the fourteen. The unsatisfactory children were followed up and kept under observation regarding home conditions, diet, milk and meals at school, etc.

B. *Number of CHILDREN requiring treatment*

The actual numbers, and numbers per 1,000 children inspected who were found at the periodic medical inspections to require treatment, including those already under treatment, are given for each group in the following table:—

NUMBER OF CHILDREN FOUND AT PERIODIC MEDICAL INSPECTIONS, 1961
TO REQUIRE TREATMENT (including those already under treatment)

	Number inspected	(i) <i>Requiring treatment for defective vision (excluding squint)</i>		(ii) <i>Requiring treatment for all other defects</i>		(iii) <i>Total individual children requiring treatment</i>	
		Num- ber	per 1,000	Num- ber	per 1,000	Num- ber	per 1,000
1. Entrants	3,023	53	17.5	462	152.8	492	162.7
2. Intermediates	2,731	303	110.9	472	172.8	532	194.8
3. Leavers	3,833	578	150.8	543	141.7	1013	264.3
4. Pupils at Special Schools	315	38	120.6	66	209.5	90	285.7
TOTALS	9,902	972	98.2	1,543	155.8	2,127	214.8

The total of 98.2 per 1,000 children inspected who were found to require treatment for defective vision compares with 95 per 1,000 in 1960 and 100 per 1,000 in 1959.

The total of 155.8 per 1,000 children inspected who were found to require treatment for all defects other than defective vision compares with 150 per 1,000 in 1960 and 157 per 1,000 in 1959.

C. *Number of DEFECTS requiring treatment or observation*

The actual numbers of each defect requiring treatment, and of each defect requiring observation, are given separately for all children inspected at periodic medical inspections as Entrants, Leavers and in Other Groups, in Table 2A at the end of this report.

The combined figures for certain defects per 1,000 children inspected, whether requiring treatment or observation, are given in the table below, for 1961 and the previous two years.

NUMBER OF CERTAIN DEFECTS PER 1,000 CHILDREN INSPECTED
WHETHER REQUIRING TREATMENT OR OBSERVATION

	1961	1960	1959
Skin	36.1	33.7	33.2
Vision	120.5	124.6	133.1
Squint	21.3	21.6	29.3
Otitis Media ...	11.4	14.8	13.1
Heart	8.3	13.6	10.4
Lungs	35.8	32.7	28.3
Hernia	2.2	5.4	2.1

It will be seen that the figures for 1961 show a slight increase over the previous two years in the total number of skin defects and lung defects noted, and a slight decrease in visual defects, otitis media and heart defects.

D. *Number of NEW DEFECTS requiring treatment. Results of the discontinuance of the intermediate inspections at 7-plus to 8-plus years and 11-plus to 12-plus years*

The year 1961 was the fourth year in which separate records were kept of the number of new defects found requiring treatment at periodic medical inspections, divided into new defects which were under treatment at the time of the periodic inspection and those that were not. The figures are given in Table 2c at the end of this report.

These records have been kept with the object of trying to ascertain whether there was any alteration in the number of new defects found requiring treatment and not under treatment when children had not been given a periodic inspection for four years, compared with those who had been inspected two years previously so that the results of discontinuance of the intermediate inspections at the ages of 7-plus to 8-plus years and 11-plus to 12-plus years could be assessed. It was thought that this comparison would also be of help in deciding whether or not the remaining intermediate routine inspection at the age of 9-plus to 10-plus years could also be discontinued and be replaced by a system of selective inspections for children in junior schools, which the Ministry of Education now advises should be given a trial.

In 1961, the majority of the children inspected as Intermediates at the ages of 9-plus to 10-plus years and as Leavers at 13-plus to 14-plus years had not been inspected for four years whereas in 1960 all the children inspected at both those ages had been inspected two years previously. The number of new defects not under treatment per 1,000 children inspected at those ages in 1961 and 1960 are given for comparison in the following table.

NEW DEFECTS REQUIRING TREATMENT AND NOT UNDER TREATMENT
PER 1,000 CHILDREN INSPECTED

<i>Defect or Disease</i>	<i>Intermediates</i> 9+ to 10+ years		<i>Leavers</i>	
	1961	1960	1961	1960
Skin	3.7	4.3	4.7	5.2
Eyes:				
(a) Vision	9.5	9.3	5.2	12.2
(b) Squint	0.4	-	-	-
(c) Other	4.0	1.0	2.3	3.7
Ears:				
(a) Hearing	-	0.3	-	-
(b) Otitis Media	-	0.3	-	0.9
(c) Other	0.7	1.3	-	1.5
Nose or Throat	1.8	2.0	0.5	1.2
Speech	0.7	1.3	-	-
Lymphatic Glands	-	-	-	-
Heart	-	-	-	-
Lungs	-	-	-	-
Developmental:				
(a) Hernia	0.4	0.3	-	-
(b) Other	0.4	-	-	1.2
Orthopaedic:				
(a) Posture	7.0	2.4	10.2	5.5
(b) Feet	1.5	1.0	0.5	0.6
(c) Other	-	0.3	-	1.8
Nervous System:				
(a) Epilepsy	-	-	-	-
(b) Other	-	0.3	-	-
Psychological:				
(a) Development	-	-	-	-
(b) Stability	-	0.7	-	-
Abdomen	-	0.7	0.5	-
Other	6.2	0.3	1.3	3.0
TOTAL ...	36.2	26.1	25.3	36.9

It will be seen from the table above that very few new defects were found requiring treatment and not under treatment in 1961 when children had not been examined for four years. In Intermediates at 9-plus to 10-plus years the largest numbers of defects were of vision, accounting for a quarter of the total, poor spinal

posture and unspecified miscellaneous defects, the two latter showing an increase compared with children who had been examined two years previously. In Leavers the largest numbers of defects were of poor spinal posture, amounting to about forty per cent of the total, and vision, the former showing an increase to twice the number found when children had been examined two years previously and the latter a reduction to half of the number.

It seems, therefore, that apart from poor spinal posture and defective vision the discontinuance of the routine intermediate inspections at 7-plus to 8-plus years and 11-plus to 12-plus years has had no detrimental effect, in so far as this can be judged from the numbers of new defects found requiring treatment and not under treatment, and that the replacement of the 9-plus to 10-plus routine intermediate inspection by a system of selective inspections would similarly have no detrimental effect if provision were made for examining children for poor spinal posture and defective vision. This could very well be done by the school nurses, who could refer children they found with these defects and any others to the medical officers.

E. Attendance of parents at periodic medical inspections

The total percentage of parents attending for the periodic medical inspection of their children was 50.2 per cent in 1961, compared with 54.5 per cent in 1960 and 48.6 per cent in 1959, the percentage varying from 77.9 per cent for the medical inspection of Entrants to 16.7 per cent for Leavers as follows:—

PARENTS PRESENT AT PERIODIC MEDICAL INSPECTIONS, 1961

	<i>Number of children inspected</i>	<i>Number of parents attending</i>	<i>Percentage of parents attending</i>
1. Entrants	3,023	2,354	77.9
2. Intermediates	2,731	1,867	68.4
3. Leavers	3,833	640	16.7
4. Pupils at Special Schools ...	315	114	36.2
TOTALS	9,902	4,975	50.2

F. Reports to family doctors after the final inspection before leaving school

As in 1960, reports were sent by the School Medical Officers to family doctors only in cases where it was believed that the defects were unknown to the family doctors and that the information given would be useful to them.

In 1961 reports were sent on 229 children, or 6.0 per cent of the Leavers inspected, compared with 7.8 per cent in 1960.

2. OTHER MEDICAL INSPECTIONS

(Special Inspections and Re-inspections)

The number of all other medical inspections carried out in addition to the periodic medical inspections are given under the various headings in the table below. The majority of these other inspections were carried out at the school clinics.

The number of the various defects found at the special inspections to require treatment or observation, are given in Table 2B at the end of this report.

The total of 4,495 special inspections (new cases) compares with 4,735 in 1960 and 5,021 in 1959. The total of 4,363 re-inspections compares with 4,306 in 1960 and 4,394 in 1959.

NUMBER OF OTHER MEDICAL INSPECTIONS, 1961

	<i>Special Inspections</i>	<i>Reinspections</i>	<i>Total</i>
1. Ordinary cases seen at school clinics and schools and children seen for ascertainment as handicapped pupils, excluding educationally subnormal, and all other special examinations, except as follows ...	3,083	2,691	5,774
2. For fitness for employment, after school hours	618	—	618
3. For entertainment licenses	115	—	115
4. For fitness for swimming instruction	80	—	80
5. For defective hearing:—			
(a) Audiometer sweep tests	118	—	118
(b) Full investigation	88	114	202
6. For fitness for entry to Teacher Training Colleges	114	—	114
7. For ascertainment as educationally subnormal pupils	135	147	282
8. At Day Open-Air School	—	464	464
9. At E.S.N. Special Schools	—	252	252
10. At Children's Homes	144	695	839
TOTALS	4,495	4,363	8,858

Candidates for Teacher Training Colleges and Teachers

The number of 114 candidates examined for entry to Teacher Training Colleges in 1961 compares with 92 in 1960 and 99 in 1959.

Nine entrants to the Teaching Profession were examined in 1961 compared with seven in 1960 and twenty-two in 1959.

Children Absent from School for Medical Reasons

The Director of Education regularly refers children for medical examination by the School Medical Officers, and for advice regarding their education, in cases where they have a poor school attendance record and their frequent or prolonged absences from school are stated to be due to sickness. In many cases the absences are covered by medical certificates.

In a few cases it is necessary to visit the children at their homes but most of them are examined at the school clinics. It had become evident by the end of 1960 that for many of the cases more time was needed for their investigation than could be given in an ordinary busy clinic session and during 1961 special sessions were arranged at the Central School Clinic for these cases and up to half an hour allowed for dealing with each of them.

On investigation, a few of the children are found to need Home Tuition for a period and others to need other forms of special educational treatment, such as admission to our Day Open-Air School, but a number of children are found to have symptoms for which no physical cause can be discovered. In some of the latter cases their absences from school appear to be due to maladjustment to school life or to emotional troubles at home and it has been noticed that where these cases have not been dealt with in their early stages school phobia or truancy has developed, Court action has effected no improvement in school attendance and eventually committal to the care of the Local Authority has become necessary.

It has gradually become more and more evident while dealing with these cases that *all* cases of frequent or prolonged absence from school, stated to be due to sickness, should be brought forward by the Director of Education to the School Medical Officer at an early stage. It was decided, therefore, that one of the School Medical Officers, Dr. Trethowan, who had been seeing most of the cases referred by the Director of Education, should be available for

regular consultation with the Education Welfare Officers at the Central School Clinic on one morning a week and act as liaison medical officer between the department and the general medical practitioners. The medical practitioners were notified of the arrangement and informed that Dr. Trethowan would get into touch with them in cases where it appeared that discussion would be useful, and they were invited on their side to get into touch with him where they had such cases.

At the time of writing this report the scheme has not been in existence long enough to assess its full effect but school absentees are already brought forward to the School Medical Officer at an early stage. The Education Welfare Officers attend at the Central School Clinic to see Dr. Trethowan about their particular school attendance problems and discuss them with him, and he advises whether or not the Director of Education should make a formal request for the children's examination by the School Medical Officer and gives other advice. Dr. Trethowan has already been in touch with several general practitioners and met them at their surgeries to discuss various problems which have been brought to light and a satisfactory course of action has been agreed in a number of cases. It seems as if the contact with the general practitioners is going to prove very useful and lead to further co-operation with them and to further co-ordination of effort in the welfare of the children.

When it is certain that the scheme is satisfactory it will probably be advantageous to decentralise it and arrange for all the school medical officers to deal with the cases from their own areas at their own clinic; but it will not be possible to do this unless some additional time can be found. Without any addition to the present medical staff, time could only be found by discontinuing some of the present activities. The discontinuance of the 9-plus to 10-plus years routine intermediate medical inspection might allow this if the selective inspections at the schools took less time than the routine ones.

School Premises

The annual inspection of school premises by the School Medical Officers were continued during 1961 and 61 Primary Schools, 33 Secondary Schools and 3 Special Schools were re-inspected.

The attention of the Director of Education was drawn to various defects found or improvements required in 16 of the primary schools, 9 of the secondary schools, 1 of the special schools, and included need for redecoration, more attention to the cleaning of lavatories, lack of hot water for washing and of facilities for drying wet outdoor garments, inadequate heating of some classrooms, inadequate artificial lighting, which in one old aided primary school was still by gas, poor ventilation under certain conditions, poor acoustics of a medical room and waiting room at one school and insufficient changing accommodation for swimmers in another, now that the school has its own swimming bath.

Action was taken by the Director of Education to deal with the defects and effect improvements in all cases where this was possible.

Acoustic tiles were fitted to the ceiling of the medical and waiting rooms in the school where the acoustics were very poor and effected considerable improvement, and the poor ventilation in some classrooms of another school was considered by the architects to be due to the roller type sun blinds fitted to the windows. Their replacement by louvered blinds was advised by the architect, and the use of louvered blinds instead of roller blinds when sun blinds are fitted in future.

It appears that these annual inspections of school premises are worth continuing, both for the old and new schools. In some of the older schools the replacement of old sanitary fittings, flooring, etc., is required as well as other amenities to bring them up to present day standards and in the new schools problems such as poor ventilation when the sun blinds are drawn and defective fittings, such as defective flushing apparatus to water-closets and urinals, need attention.

Handicapped Children

There were no changes in the arrangements for the ascertainment of handicapped children and 122 children were newly assessed in 1961 as needing special educational treatment at special schools or in boarding homes, compared with 113 in 1960 and 92 in 1959. The following are the numbers ascertained in each category.

CHILDREN NEWLY ASSESSED AS NEEDING SPECIAL EDUCATIONAL TREATMENT
AT SPECIAL SCHOOLS OR IN BOARDING HOMES, 1961

1. Blind	1
2. Partially Sighted	1
3. Deaf	—
4. Partially Deaf	7
5. Physically Handicapped	17
6. Delicate	12
7. Maladjusted	12
8. Educationally Subnormal	71
9. Epileptic	1
	—
TOTAL ...	122

The numbers of handicapped children from the Authority's area, on the registers of maintained and non-maintained special schools, independent schools and boarded in homes on or about 20th January, 1962, was 470 compared with 458 in January, 1961, and 453 in January, 1960.

The following are the figures in the various categories:—

NUMBERS OF HANDICAPPED CHILDREN AT SPECIAL SCHOOLS, ETC.,
JANUARY, 1962

	<i>At Maintained Special Schools</i>	<i>At non- Maintained Special Schools</i>	<i>At Independent Schools</i>	<i>Boarded in Homes</i>	<i>Total</i>
	<i>Day Pupils</i>	<i>Boarding Pupils</i>			
1. Blind	—	2	—	—	2
2. Partially Sighted	—	6	—	—	6
3. Deaf	28	3	—	—	31
4. Partially Deaf...	17	—	—	—	17
5. Physically Handicapped	52	3	20	—	75
6. Delicate ...	18	2	—	—	20
7. Maladjusted ...	—	4	11	4	19
8. Educationally Subnormal ...	287	6	3	—	296
9. Epileptic ...	—	4	—	—	4
TOTALS ...	402	30	34	4	470

The 34 children at Independent Schools were placed as follows:

HANDICAPPED CHILDREN AT INDEPENDENT SCHOOLS, JANUARY, 1962

	<i>School</i>	<i>Number of children</i>	<i>Handicap</i>
1.	St. Hilliard's School, Mickleton, Campden, Gos.	7	Maladjusted
2.	Pitt House Junior School, Rocklands, Chudleigh, Devon	2	Educationally Subnormal
3.	Heathercombe Brake School, Manaton, Newton Abbot, Devon	2	Physically Handicapped
4.	The Royal Alexandra & Albert School, Gatton Park, Reigate, Surrey	2	Maladjusted
5.	The Salesian School, Blaisdon Hall, Longhope, Gos.	2	Maladjusted
6.	The Farmhill House School, Stroud, Gos.	1	Educationally Subnormal
7.	Plymouth School for Spastic Children, Trengeath, Hartley, Plymouth	18	Spastics

Twenty-one handicapped children were being educated under arrangements made under Section 56 of the Education Act, 1944, on or about 20th January, 1962, compared with 20 in January, 1961, and 25 in January, 1960, as follows:—

NUMBER OF HANDICAPPED CHILDREN BEING EDUCATED UNDER SECTION 56, EDUCATION ACT, 1944, IN JANUARY, 1962

	<i>In Hospitals</i>	<i>At Home</i>	<i>Total</i>
1. Blind	—	—	—
2. Partially Sighted	—	1	1
3. Deaf	—	—	—
4. Partially Deaf	—	—	—
5. Physically Handicapped	8	11	19
6. Delicate	—	—	—
7. Maladjusted	—	1	1
8. Educationally Subnormal	—	—	—
9. Epileptic	—	—	—
TOTALS	8	13	21

Thirty-two handicapped children were awaiting places in special schools on or about 20th January, 1962, compared with 25 in January, 1961, and 58 in January, 1960, as follows:—

NUMBER OF HANDICAPPED CHILDREN AWAITING PLACES IN SPECIAL SCHOOLS, JANUARY, 1962

	<i>Day Schools</i>	<i>Boarding Schools</i>	<i>Totals</i>
1. Blind	—	—	—
2. Partially Sighted	—	—	—
3. Deaf	—	—	—
4. Partially Deaf	—	—	—
5. Physically Handicapped	—	3	3
6. Delicate	—	—	—
7. Maladjusted	—	2	2
8. Educationally Subnormal	18	8	26
9. Epileptic	—	—	—
10. Speech Defect	—	1	1
TOTAL	18	14	32

NUMBER OF CHILDREN FOUND UNSUITABLE FOR EDUCATION
AT SCHOOL DURING 1961

(a) Number of children recorded under Section 57(4) Education Act, 1944	18
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Defective Hearing - Audiology Clinic The arrangements for the ascertainment of children with defective hearing and for the assessment of hearing acuity were continued unaltered during 1961 and I am indebted to Mr. G. Dalziel, Headmaster of the Authority's Day Special School for Deaf and Partially Deaf Children, Hartley House, Plymouth, for the following report:—

“The Audiology Clinic, established four years ago as part of the School Health Service, continues to serve the needs of the city, investigating the hearing of all cases referred with possible hearing deficiencies, regularly testing both hearing and educational progress of all children within the authority who continue their education in a normal school, and providing a liaison service which tries to ensure (a) that the latter are given every possible chance to succeed under this system, and (b) that general practitioners are consulted and are fully aware of all recommendations and treatments prescribed for their patients, particularly those under school age.

The testing of new patients of pre-school age takes place on Saturday mornings, when a team of teachers of the deaf trained in the techniques of testing young children joins Dr. Trethowan, the medical officer in charge of the clinic, and assists in this undertaking. The tests used are of the type designed and perfected by Professor and Lady Ewing in the Audiology Clinic at Manchester University and consist of distracting stimuli for the very young, aged 6 months to 18 months or 2 years, conditioned response to a pitch pipe stimulus for children of 2 to 4 years, and pure tone audiometric testing for older children. The intensities of the distracting stimuli and the pitch pipe sounds are measured on a sound level meter, so that it is possible, even for very young children to construct an audiogram of reasonable accuracy.

Clinical procedure is as informal as possible, the emphasis being laid on establishing rapport with the child and arriving at a satisfactory conclusion with regard to his hearing ability. The business of establishing rapport and of conducting the tests is that

of the teachers, whilst the compilation of case histories and the recording of test results is the lot of the School Medical Officer. This procedure seems to work well, and it has only been in exceptional circumstances that a satisfactory result has not been obtained at the first or second appointment.

Children of school age are generally seen by Dr. Trethowan on another day. Those known to have some degree of hearing loss are seen regularly, once every six months at a later stage, and once a year when it has been established that they can reasonably be expected to succeed in the ordinary school. At such clinics, a pure-tone audiogram is obtained, simple reading and arithmetic tests conducted and school reports studied and the child's hearing for speech, aided and unaided, is tested using phonetically balanced monosyllabic word lists and specially constructed sentence lists.

If there is any doubt about the progress of the child, further investigation is made. The child's mental age is ascertained by Dr. Matheson and compared with his reading and arithmetic ages, his progress generally, social, emotional and educational, is discussed with parents, class teachers and head teachers, and if there are such difficulties arising from deafness that the child's educational progress is adversely affected, he is recommended for transfer to the Authority's school for the deaf and partially deaf.

It is felt that in the small classes of the special school, where closer teacher-pupil relationships are possible and more individual attention available, firm foundations of reading and number can more readily be laid, and at a later date the child can be transferred back to the ordinary school, secure academically and better equipped in all other respects to cope with the many difficulties that arise as a result of his deafness. This method of treatment is preferred to allowing the child to become irretrievably backward and then transferring him to the special school without hope of a return to the normal stream before the end of his school career.

The liaison service is a recent development and is designed to prevent misunderstandings between the clinic and other medical officers and school teachers concerned with the same patients. It is felt that a visit to the general practitioner, head teacher or class

teacher by Dr. Trethowan will alleviate any misunderstandings and help to ensure that all concerned make the welfare of the child their prime consideration.

The audiology clinic has become an integral part of a larger service designed to meet the needs of the deaf and to prevent the possibility of deafness in young children passing unnoticed until there are serious speech and language difficulties and emotional problems.

Dr Forrest, Senior Medical Officer, Maternity and Child Welfare, has compiled an 'At Risk' register for the benefit of his health visitors and has arranged courses and lectures for them on 'Screening Tests of Hearing in Young Children' and 'The Symptoms of Child Development That May Denote a Possible Hearing Impairment'. Health visitors are encouraged to refer all suspect cases, however slight the suspicion of deafness, to the audiology clinic for diagnostic testing and are always cordially invited to attend themselves to witness the tests.

There is a close link between the audiology clinic and the Authority's special school. The teachers are always willing to assist with tests of hearing at any special clinics that may be convened, and those concerned with the teaching of young deaf children frequently undertake parent-guidance in the homes of children diagnosed as having deafness severe enough to warrant special attention from a very early age. In addition, part-time hearing therapy courses are organised for partially deaf children in attendance at primary schools. These courses also serve to cushion the transfer of partially deaf children from the special school back into the normal streams.

There are two consultant otologists attached to the S.W. Devon and E. Cornwall hospital, both of whom hold special clinics for young deaf patients three times per annum. Mr. Howarth invites the School Medical Officer responsible for the audiology clinic and the headmaster of the school for the deaf and partially deaf to his clinics, whilst Mr. Barley, who also invites these two, includes in addition the consultant Pædiatrician and the Senior Medical Officer for Mental Health. Many of the children seen at these clinics have been examined by the individual members of the panel and a comprehensive picture of every aspect of the child's development can be built up. The future, with special regard to

medical or surgical treatment, the possible provision of hearing aids (Medesco or commercial) and educational placement is fully discussed and recommendations are made accordingly.

Co-operation is the essence of the whole service in Plymouth."

Cleanliness Inspections and Other Work of the School Nurses

The number of individual children found infested in any degree, however slight, during 1961 was 367. This number was 1.1 per cent of the 32,796 children on the registers of the Authority's schools at the beginning of the year and compares with 1.1 per cent in 1960 and 1.3 per cent in 1959. At the end of 1961 there were, however, indications that the numbers of infested children were starting to increase.

The figures relating to cleanliness inspections in 1961 are as follows:—

CLEANLINESS INSPECTIONS, 1961

	<i>Number of children on registers at beginning of year</i>	<i>Number of individual examinations of children</i>	<i>Number of individual children found infested</i>	<i>% of individual children on registers found infested</i>
1. Primary Schools ...	18,979	119,010	285	1.5
2. Secondary Modern Schools ...	8,844	41,318	74	0.8
3. Selective Secondary Schools ...	4,557	6,248	0	—
4. Special Schools ...	416	5,556	8	1.9
TOTALS ...	32,796	172,132	367	1.1

It will be seen that the percentage of children found infested in the Primary Schools was nearly double that in the Secondary Modern Schools and was even greater in the Special Schools and that no cases of infestation were found in the Selective Secondary Schools.

The numbers of vision and hearing tests made by the nurses at schools are as follows:—

1. NUMBER OF VISION TESTS MADE BY NURSES AT SCHOOLS, 1961

						<i>No. of children referred to School Medical Officers</i>
(a)	Primary School	...	...	...	16,762	166
(b)	Secondary Schools	...	...	...	13,811	265
(c)	Special Schools	...	...	...	542	15
TOTALS					31,115	446

2. NUMBER OF HEARING TESTS MADE BY NURSES AT SCHOOLS, 1961

(a)	Primary Schools	...	...	...	6,714	24
(b)	Secondary Schools	...	...	...	3,742	18
(c)	Special Schools	...	...	...	253	-
TOTALS					10,709	42

Miss Hornby, Superintendent Health Visitor and Superintendent School Nurse, reports as follows:—

“Our Establishment, at the end of the year, remained at 11 School Nurses.

During the year three nurses were granted a Bursary to enable them to take the Health Visiting training course at Oxford, and one was granted leave of absence to take Part I of her Midwifery training. Three nurses left, two returning to Hospital Nursing and we had six new nurses to train in School Nursing duties.

Maker Camp had the usual services of a full-time nurse for three months.

During the year, the nurses made:—

1,513 Home visits

172,132 Cleanliness inspections at school

1,899 Visits to schools

They attended:—

1,526 Minor ailments' sessions

79 Ultra violet light sessions

In addition they made Vision Tests and Hearing Tests as given above.

34,797 treatments for minor ailments were given at School Clinics and 1,151 at Maker Camp.”

Medical Treatment

The school clinic arrangements at the time of writing this report are as follows:—

SCHOOL CLINIC ARRANGEMENTS

<i>Clinic</i>	<i>Medical Officers' Clinics</i>	<i>Nurses' Minor Ailment Treatment Clinics</i>	<i>Ultra Violet Light Clinic by appointment</i>	<i>Speech Therapy Clinics by appointment</i>
1. Central Clinic Rowe Street	Monday 2 p.m. Wednesday 2 p.m. Audiology Clinic on alternate Saturday mornings 9.30 a.m. by appointment	Monday to Friday 3.30 p.m.	Monday 9 a.m. Thursday 9 a.m.	Monday 9 a.m. and 2 p.m. Tuesday 2 p.m. Thursday 9 a.m. and 2 p.m. Friday 2 p.m.
2. Stonehouse Clinic Peel Street, Stonehouse	Friday 2 p.m.	Monday to Friday 3.30 p.m.	—	—
3. Devonport Clinic Outram Villa Albert Road Devonport	Tuesday 2 p.m.	Monday to Friday 3.30 p.m.	—	Wednesday 9 a.m. and 2 p.m.
4. North Prospect Clinic Swilly	Wednesday 2 p.m.	Monday to Friday 3.30 p.m.	—	Monday 2 p.m. Tuesday 2 p.m. Friday 2 p.m.
5. St. Budeaux Clinic Stirling Road St. Budeaux	Thursday 2 p.m.	Monday to Friday 3.30 p.m.	—	Friday 9 a.m.
6. Honicknowle Clinic Montacute Ave. Honicknowle	Tuesday 2 p.m.	Monday to Friday 3.30 p.m.	—	Monday 9 a.m. Wednesday 9 a.m.
7. Efford Clinic 121 Efford Road	Tuesday 3.30 p.m.	Tuesday 3.30 p.m. Thursday 3.30 p.m.	—	Thursday 3 p.m.
8. Child Guidance Clinic Catherine Street	Children are seen by appointment. Psychiatrists attend Monday 2 p.m.; Tuesday 9 a.m. and 2 p.m.; Wednesday 2 p.m.; Thursday 2 p.m.; Friday 2 p.m. The Clinic is open whole-time, with a whole-time clerk in attendance.			

The Central Clinic and the Child Guidance Clinic are open throughout the year but the other clinics are closed during school holidays, apart from specially arranged clinic sessions.

The total number of cases treated by the School Health Service staff or known to have been treated otherwise in 1961 are given for the various defects in Table 3 at the end of the report.

TABLE 3A. EYE DISEASES, DEFECTIVE VISION AND SQUINT

The total of 632 cases of external diseases of the eye given in Table 3A compares with 701 in 1960 and 712 in 1959. Of the 632 cases in 1961, 236 were seen at the school clinics, compared with 279 in 1960 and 345 in 1959. The other cases were seen at the Plymouth Royal Eye Infirmary.

Of the 3,639 errors of refraction, 1,539 were dealt with at the Eye Infirmary and 2,100 by opticians under the Supplementary Ophthalmic Services scheme. The total of 3,639 in 1961 compares with 3,754 in 1960 and 3,311 in 1959. The School Medical Officers referred 474 of the cases to the Eye Infirmary in 1961, compared with 402 in 1960 and 473 in 1959. None of the children seen by opticians were referred by the School Medical Officers.

Of the 2,844 children for whom glasses were prescribed, 1,221 were seen at the Eye Infirmary and 1,623 by opticians. The total compares with 2,821 in 1960 and 2,826 in 1959.

The post for the additional whole-time Ophthalmologist at the Eye Infirmary was unable to be filled during 1961 and the waiting time before new cases referred for refraction were seen there had increased by the end of the year to about four months, but the position had improved somewhat at the time of writing this report.

TABLE 3B. DISEASES AND DEFECTS OF THE EAR, NOSE AND THROAT

The School Medical Officers referred 87 children to the Consultant Ear, Nose and Throat Surgeons during 1961, compared with 85 in 1960 and 125 in 1959. Many of the cases were referred for defective hearing.

No figures could be obtained from the hospitals of the number of cases which received operative treatment during 1961, but all the 141 which received other forms of treatment were treated at

the school clinics. This compares with 250 treated at the school clinics in 1960 and 187 in 1959.

Eight children were known to have been provided with hearing aids in 1961, compared with 13 in 1960 and 11 in 1959.

TABLE 3C. ORTHOPAEDIC AND POSTURAL DEFECTS

A total of 25 children was referred by the School Medical Officers to the Consultant Orthopaedic Surgeons, compared with 34 in 1960 and 34 in 1959.

No figures could be obtained from the hospitals for the number of cases treated at hospital clinics but the 64 children treated at school for postural defects in 1961 compares with 46 in 1960 and 89 in 1959.

TABLE 3D. DISEASES OF THE SKIN (excluding uncleanliness)

The School Medical Officers referred 23 children to the Consultant Dermatologist, compared with 14 in 1960 and 27 in 1959.

All the 667 cases of diseases of the skin were treated at the school clinics, the number comparing with 575 in 1960 and 951 in 1959. No cases of ringworm of the scalp were treated but the 12 cases of ringworm of the body compare with 3 in 1960 and 28 in 1959.

The 16 cases of scabies treated in 1961 compare with 14 in 1960 and 44 in 1959, and the 24 cases of impetigo with 14 in 1960 and 102 in 1959. The 615 other skin diseases treated compare with 544 in 1960 and 777 in 1959.

OTHER DEFECTS

The 4,948 children treated for minor ailments compare with 7,674 in 1960 and 8,872 in 1959, and the 74 given Ultra Violet Light with 102 in 1960 and 179 in 1959.

The number of children referred by the School Medical Officers to the Consultant Paediatrician in 1961 was 13 compared with 14 in 1960 and 19 in 1959 and to the Consultant General Surgeons 16, compared with 18 in 1960 and 24 in 1959.

Ten children with asthma were referred to the Hospital Physiotherapy Department in 1961, compared with 9 in 1960 and 17 in 1959.

**Child
Guidance
Clinic**

I am indebted to Dr. J. M. Gilroy, Consultant Psychiatrist and Clinic Director of the Child Guidance Clinic for the following report:—

“The figures for 1961 show a pattern approximating to that which has emerged in recent years, as is evident by comparison with the two immediately preceding years. Thus, although the referral rate for the second quarter reached a record figure, that for the whole year is not very different from previous years. Table 2 gives the reasons for referral as assessed by the referring agents. It is noteworthy that, although only ten children were referred primarily as ‘educational’ problems, backwardness in reading of significant degree is a prominent finding in the great majority of the maladjusted children whose cases have been investigated.

Nine medical sessions weekly have been provided except when holidays or staff changes have necessarily reduced the number. Dr. Pringle left in January 1961 and was replaced by Dr. Hellon. Dr. Jones left in September and was replaced the following month by Dr. Lilauwala.

After a year and a half without a second P.S.W. we were very glad to welcome Mr. Stanley Webb in this capacity on 1st October, 1961. A part-time remedial teacher, Mr. Foskett, provided by Devon, commenced duty on 29th September, 1961. We consider him a most valuable addition to our therapeutic resources, but, regrettably, he only deals with children from the Devon area.

Regular clinical case-conferences with the health visitors and doctors from the School Health Service and the Maternity and Child Welfare Department have continued to be a fruitful feature of our activities during the year.”

TABLE 1			TABLE 2		
<i>Sources of Referral</i>			<i>Reasons for Referral</i>		
	1961	1959		1961	1959
Family doctors	78	113	Behaviour disorders ...	122	152
School Medical Officers ...	72	73	Anxiety (various manifestations) ...	54	32
Juvenile Court and Probation Officers ...	41	33	Enuresis	40	29
Other Consultants	40	17	Educational Problems ...	11	31
Head Teachers	22	17	Delinquency	29	22
Children's Officers	14	6	Encopresis	5	7
Director of Education ...	2	3	Truancing	6	5
Parents	10	13	Hysteria	3	4
M. & C. W. Dept.	1	2	Subnormality	1	—
Miscellaneous	2	7	Miscellaneous	11	2
TOTAL	282	284	TOTAL	282	284

TABLE 3

	<i>At</i> <i>31.12.61</i>	<i>At</i> <i>31.12.60</i>	<i>At</i> <i>31.12.57</i>	<i>At</i> <i>31.12.55</i>
(a) On treatment waiting list	32	20	28	31
(b) On Diagnostic waiting list	41	41	52	70
	<i>Year</i> <i>1961</i>	<i>Year</i> <i>1960</i>	<i>Year</i> <i>1957</i>	<i>Year</i> <i>1955</i>
(c) New Referrals	282	260	255	306
(d) Cases given full clinical investigation	215	216	174	230
(e) Individual treatment inter- views	1,158	1,159	785	1,194
(f) Clinical interviews by Psy- chologist	238	247	377	417
(g) Visits by Psychiatric Social Workers	140	191	33	95
(h) Cases closed	98	131	77	143
(i) Cases undergoing Social Supervision	85	90	78	86

**Speech
Therapy**

The following is the report of Miss M. Wilcocks,
Speech Therapist:—

“The number of children treated during 1961 was 250, compared with 290 in 1960, and 222 in 1959. The drop in numbers was the result of Miss Powling leaving in April to take up a post elsewhere, when I was left with an enormous number of children for treatment and forced to put many of them on a waiting list for continuance of treatment. With new cases coming in, there was an accumulation of a very large number waiting, and Miss Powling's patients could only gradually be taken on. To make some slight headway in an overburdened clinic, some of the children were treated in groups and the minor cases placed under review.

The year started with 8 sessions at Rowe Street Clinic, 3 at Honicknowle Clinic, 4 at North Prospect Clinic and 1 at St. Budeaux Clinic. Two sessions were held at Mount Tamar Special School for educationally subnormal pupils, 1 at Ernesettle Primary School, 1 at Highfield Primary School, 1 at Victoria Road Primary School and 1 at Hartley House School for the Deaf. After April the St. Budeaux Clinic and Victoria Road School sessions had to be cancelled, along with 4 of the sessions at Rowe Street, 3 at North Prospect, 1 at Honicknowle and the one at the Deaf School.

Plymouth needs a staff of 3 whole-time Speech Therapists to deal with the interviewing, treating, home and school visiting and the clerical work. Both parents and teachers seem to be becoming increasingly aware of the benefit derived from Speech Therapy, and the schools are only too anxious for the therapist to visit them. Through the co-operation of the Head Teachers, Speech Therapy sessions are still held at Mount Tamar Special School, Ernesettle Primary and Highfield Primary Schools. This enables the children to have treatment regularly without missing too much schooling.

At the end of the year 48 children remained on the waiting list.”

CHILDREN TREATED BY THE SPEECH THERAPISTS, 1961

	<i>Dis- charged cured</i>	<i>Dis- charged improved</i>	<i>De- faulted</i>	<i>Under review</i>	<i>Under treat- ment</i>	<i>Totals</i>
Dyslalia	45	4	4	11	50	114
Stammering	22	13	7	12	11	65
Sigmatism	24	4	2	10	13	53
Cleft Palate	2	1	—	1	1	5
Indistinct Speech	2	4	—	—	3	9
Dysarthria	—	—	—	—	1	1
Delayed Speech	—	—	—	1	2	3
TOTALS	95	26	13	35	81	250

**Dental
Inspection and
Treatment**

Mr. R. M. Maynard, Principal School Dental Officer, reports as follows:—

Staff. Four surgeries were kept fully occupied during the year. At the Crownhill Clinic, when Mrs. Carter relinquished her part-time appointment on leaving the district, it was possible to immediately replace her by two new part-timers, Mr. Forsyth and Mrs. Ashworth, bringing the weekly sessions worked at this Clinic up to nine. The effective strength in terms of whole-time dentists over the year was 4.41.

Surgeries. During the year work commenced on the new Stonehous Clinic and the dental officer moved from the old to the new clinic in April, 1962. It is suggested that the official size of a dental surgery 14' 6" × 12', should be increased when the dental cards are kept in the surgery, and not, as in some authorities, in a central office or at the schools. A recent circular from the Scottish Department of Health suggests a size of surgery of 18' × 12'.

Treatment. A total of 9,853 fillings was inserted in 8,278 teeth, a ratio of 1.2 fillings per tooth. 1,792 treatment sessions were worked, or 5.5 fillings per session. There were 201 gas sessions at which 2,481 administrations were given or 12 per session. The ratio of permanent teeth filled and extracted was 9597/1731 or 5.5

Inspections. The total number on roll was 32,796 at the beginning of the year and 30,064 of these were inspected at the annual school inspections, 14,230 being found to require treatment and 9,703 being referred for treatment, though these figures would be higher if greater attention was paid to the temporary dentition. In 1961 only 244 temporary teeth were filled as against 8,034 permanent teeth. Many mothers do not believe in the filling of the temporary teeth, and any extension of such work should go hand in hand with dental health education, educating the mother both in the importance of the temporary teeth and also in the importance of oral hygiene.

Dental Health Education. In 1961 we arranged the first distribution of oral hygiene literature. It is of interest to note that of the 108 schools circularized only 29 asked for the literature, although an additional four schools had made their own arrangements direct. So that, although the Oral Hygiene Service had agreed to let us have 32,000 leaflets, gratis, actually only 6,513 were asked for. Although more may have applied direct, it would appear that there are many Head Teachers who are still not convinced of the importance of education in oral hygiene. Teachers who have been asked about the requirements of dental teaching material have stressed the importance of good layout and novelty. One wonders whether Unilevers will continue to bring out new material in the Oral Hygiene Service in view of the fact that they are not allowed to indulge in any advertising, even to printing their own name."

Mass Radiography The arrangements for X-raying the chests of children in their last year at school and also for the annual X-rays of staff were continued.

The numbers of reports on school leavers received from the Plymouth Mass Radiography Unit were as follows:—

MASS RADIOGRAPHY OF SCHOOL LEAVERS, 1961

1. Children with satisfactory films	...	...	...	...	2,609
2. Children recalled and subsequently reported as satisfactory	...	...	...	...	15
3. Children on whom special reports were made	...	...	...	...	38
				TOTAL ...	2,662

The total compares with 2,135 in 1960 and 2,256 in 1959.

B.C.G. Vaccination against Tuberculosis

B.C.G. Vaccination was offered to all children born in 1947, who were in attendance at schools in the City, including all the Independent Schools, and to all school children born before 1947 and all students at Technical Colleges, etc., who had not been vaccinated.

The percentage of those accepting in the 1947 age group was 65.0% compared with 60.4% for the 1946 age group in 1960 and 64.1% for the 1945 age group in 1959.

A total of 2,160 children was vaccinated, compared with 2,124 in 1960 and 1,712 in 1959.

The percentage of primary positives on Mantoux Testing was 6.7% for the 1947 age group, compared with 7.1% for the 1946 age group in 1960 and 9.4% for the 1945 age group in 1959, so that the percentage of children infected by tuberculosis at the age of 13 plus to 14 plus years continued to decrease. In 1954, when the scheme was started, the percentage was 20.7%.

The following are the figures for 1961:—

B.C.G. VACCINATION, 1961

<i>Age Group</i>	<i>Number given Preliminary Mantoux Test</i>	<i>Mantoux Positive</i>		<i>Number Vaccinated with B.C.G.</i>
		<i>No.</i>	<i>%</i>	
1947	2,158	145	6.7	2,013
1946	146	10	6.8	136
1945	8	1	12.5	7
1944	4	—	—	4
Further Education	3	3	100.0	—
Totals	2,319	159	6.9	2,160

Immunisation against Diphtheria

School children were immunised against diphtheria by the School Medical Officers at school clinics in cases where the consents were received from schools and school clinics at the School Health Department, and at the Immunisation Clinics held at Maternity and Child Welfare Clinics where the parents applied at those clinics.

The complete figures are given in the Immunisation and Vaccination section of the Medical Officer of Health's annual report and the following figures refer only to immunisations carried out at school clinics:—

DIPHTHERIA IMMUNISATION AT SCHOOL CLINICS, 1961

1. Number of school children completing full primary course	...	463
2. Number of school children given reinforcing doses	... ..	1,754

The number of 463 school children completing full primary courses at school clinics in 1961 compares with 198 in 1960 and 267 in 1959, and the number of 1,754 reinforcing doses with 1,603 in 1960 and 2,102 in 1959.

**Immunisation
against
Tetanus**

A new consent form for immunisation was brought into use in January, 1961 in which parents gave consent to their children being immunised as necessary against diphtheria, tetanus and poliomyelitis. This resulted in a large number of new consents to immunisation against tetanus being received.

The following are the figures relating to immunisation against tetanus at school clinics in 1961:—

ACTIVE IMMUNISATION AGAINST TETANUS AT SCHOOL CLINICS, 1961

First injections	... ..	2,794
Second injections	... ..	2,742
Third injections (To complete full primary course)	...	1,793
Reinforcing doses	... ..	128

The number of 1,793 school children completing a full primary course of active immunisation against tetanus at school clinics in 1961 compares with 577 in 1960, and the number of 128 reinforcing doses with 21 in 1960.

**Infectious
Diseases**

The number of cases of notifiable infectious diseases in school children reported to the Medical Officer of Health during 1961 were as follows:—

CASES OF NOTIFIABLE INFECTIOUS DISEASES IN SCHOOL CHILDREN, 1961

Diphtheria	... ..	0
Dysentery	... ..	25
Erysipelas	... ..	0
Food Poisoning	... ..	4
Measles	... ..	1,857
Meningococcal infections	... ..	3
Poliomyelitis	... ..	1
Pneumonia	... ..	14
Scarlet Fever	... ..	51
Tuberculosis	... ..	32
Whooping Cough	... ..	91

There was no serious outbreak of any infectious disease at any of the schools. The notified cases occurred in general in different schools and no schools were specially visited on account of infectious diseases during the year.

The 25 cases of dysentery compare with 107 in 1960 and 29 in 1959. The biennial outbreak of measles was at its peak in May and June, 1961, when 483 and 443 cases in school children were notified, and the total of 1,857 cases compares with 1,899 in 1959. The 51 cases of scarlet fever compare with 134 in 1960 and 197 in 1959.

The 32 cases of tuberculosis notified in 1961 compare with 17 in 1960 and 14 in 1959. The children concerned attended at 23 different schools, at 16 of which there was only one case during the year. At two schools there were 3 cases and at the remaining five schools two cases at each school, but no connection between the cases was found. There seems to be no special reason for the increase in cases in 1961 and the percentage of children found Mantoux Positive when tested at 13 plus to 14 plus years has continued to decline. A possible explanation might be that certain types of cases were notified in 1961 which were not notified in 1960 and 1959.

The usual winter peak of coughs and colds occurred in the second week of February in 1961, when 2,756 children were absent from school on this account for more than one day in that week. The figure compares with 1,496 in 1960 and 4,289 in 1959. There was another outbreak of coughs and colds in December, 1961, and in the last week of the term 2,920 children were absent from school for more than one day on this account.

**Maker
Camp**

The school camp was in use as usual during the Summer Term and Summer Vacation. During the term, organised parties of children from 21 of the Authority's Secondary Schools, with their teachers, were in residence, comprising a total of 2,603 children and 159 staff. During the first four weeks of the Summer Vacation organised parties from East Ham and West Ham Education Authorities, London, were in residence, with a total of 262 children and 39 staff. The combined total of 2,865 children attending the camp in 1961 compares with 2,810 in 1960 and 3,125 in 1959.

The medical and nursing arrangements were the same as in previous years, with one of the school nurses in residence for the whole period, the nurses attending in turn for a week at a time. The nurses gave 1,151 treatments for minor ailments at the camp in 1961, compared with 1,574 in 1960 and 2,169 in 1959.

The camp was reported to be successful and appreciation of the general condition of the camp and its facilities was expressed by many of the Camp Leaders in charge of the parties.

Children's Homes

The medical supervision of the Children's Homes was continued unchanged. A total of 144 children was examined at the Homes as new admissions and 695 re-examinations of children carried out at the Homes during 1961.

The supervision of the Parklands Reception Home and its Remand Wing was continued by Dr. T. Forrest, who reports as follows:—

“Medical arrangements remained the same as in previous years and 12 routine and 74 special visits were made by a medical officer. On the routine visits a school nurse also attended.

One hundred and fifty-two new admissions to the Children's Home and Remand Wing received a full medical examination, and about the usual number were referred for further investigation and treatment. Many children had verminous heads on admission, and it required constant attention on the part of the staff to restrict the infestation.

Hygienic conditions were satisfactory, and all the children gained weight and soon settled happily. There was very little sickness.

Twenty-two remanded girls were referred for psychiatric opinion at the request of the juvenile courts and twenty-two were otherwise specially investigated. One was found to be suffering from Gonorrhoea and seven others to be suffering from other less serious infection requiring treatment.

Five girls were found on admission to be pregnant, out of a total of fifty-two admissions to the Remand Wing.”

School Meals and Milk

The dining accommodation at schools and the school kitchens, sculleries and utensils were inspected by the School Medical Officers when they made their annual general inspections of the premises at each School. The medical officers also inspected the dinners served and recent menus at each school and questioned the School Meals Service staff at the schools about hygienic precautions.

All new entrants to the School Meals Service staff were medically examined at the school clinics, given a Widal Test and had an X-ray of chest, and all the existing members of the staff were medically inspected during the year, mainly during the Summer Vacation, and had an X-ray of chest.

The percentage of children in attendance at school who were taking dinners at school when the figures were taken on a day in the period 18th to 29th September, 1961 was 32.9%. This compares with 31.4% on a similar date in 1960 and 28.3% in 1959. The continued increase in the percentage of children taking dinners at school coincides with the improvement noted in the dinners in recent years.

The overall percentage of children taking milk at school on the day the figures for dinners were taken was 82.8%. This compares with 83.6% in 1960 and 85.1% in 1959. The percentage of children taking milk at school varied with the different types of school, from 97.4% in special schools and 94.1% in primary schools to 67.8% in secondary schools. All the milk supplied was pasteurised milk and was supplied in $\frac{1}{3}$ pint bottles.

The dining accommodation, kitchens and equipment were in general found to be satisfactory but in several schools meals were still served in classrooms and in a number of cases in the school halls. Dining halls were also used as classrooms in some schools. In all cases the reason was lack of accommodation.

The number of new entrants to the School Meals Service staff medically examined by the School Medical Officers was 97. In addition 562 re-examinations of existing staff were carried out during 1961.

STATISTICAL TABLES

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

TABLE 1A—PERIODIC MEDICAL INSPECTIONS

<i>Age Groups Inspected (By year of birth)</i> (1)	<i>No. of Pupils Inspected</i> (2)	<i>Physical Condition of Pupils Inspected</i>			
		<i>Satisfactory</i>		<i>Unsatisfactory</i>	
		<i>No.</i>	<i>% of Col. 2</i>	<i>No.</i>	<i>% of Col. 2</i>
		(3)	(4)	(5)	(6)
1957 and later	46	46	100	—	—
1956	1,863	1,861	99.89	2	0.1
1955	899	895	99.55	4	0.44
1954	141	141	100	—	—
1953	48	48	100	—	—
1952	26	26	100	—	—
1951	2,637	2,635	99.92	2	0.07
1950	30	30	100	—	—
1949	51	51	100	—	—
1948	13	13	100	—	—
1947	2,968	2,968	100	—	—
1946 and earlier	865	865	100	—	—
Pupils at Special Schools	315	315	100	—	—
TOTAL	9,902	9,894	99.92	8	0.08

TABLE 1B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS (EXCLUDING DENTAL DISEASES AND INFESTATION WITH VERMIN)

<i>Age Groups Inspected (By year of birth)</i> (1)	<i>For defective vision (excluding squint)</i> (2)	<i>For any of the other conditions recorded in Part II</i> (3)	<i>Total individual pupils</i> (4)
1957 and later	1	6	7
1956	21	259	271
1955	17	169	177
1954	9	23	27
1953	2	2	4
1952	3	3	6
1951	286	464	509
1950	2	1	3
1949	11	6	16
1948	4	1	4
1947	415	427	762
1946 and earlier	163	116	251
Pupils at Special Schools	38	66	90
TOTAL	972	1,543	2,127

TABLE 1C.—OTHER INSPECTIONS

Number of Special Inspections	4,495
Number of Reinspections	4,363
	<hr/>
TOTAL	8,858
	<hr/> <hr/>

TABLE 1D.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	172,132
(b) Total number of individual pupils found to be infested ...	367
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944) ...	Nil
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944) ...	Nil

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

TABLE 2A - PERIODIC INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4	Skin	82	15	137	11	101	12	320	38
5	Eyes—								
	(a) Vision	53	51	578	101	341	69	972	221
	(b) Squint	63	14	74	9	41	10	178	33
	(c) Other	12	10	31	41	32	29	75	80
6	Ears—								
	(a) Hearing	6	99	8	31	5	70	19	200
	(b) Otitis Media	25	37	10	13	14	14	49	64
	(c) Other	10	2	13	7	10	1	33	10
7	Nose and Throat	126	126	39	25	64	59	229	210
8	Speech	36	39	6	5	26	46	68	90
9	Lymphatic Glands	1	34	1	3	1	4	3	41
10	Heart	4	25	7	22	2	22	13	69
11	Lungs	44	104	22	72	28	85	94	261
12	Developmental—								
	(a) Hernia	5	7	—	1	1	8	6	16
	(b) Other	5	95	16	40	8	90	29	225
13	Orthopaedic—								
	(a) Posture	6	7	63	13	43	15	112	35
	(b) Feet	14	31	18	15	28	22	60	68
	(c) Other	18	51	36	46	43	52	97	149
14	Nervous System—	8	3	8	5	15	9	31	17
	(a) Epilepsy	2	15	5	6	6	15	13	36
	(b) Other								
15	Psychological—								
	(a) Development	—	7	—	7	—	200	—	214
	(b) Stability	7	73	9	10	15	52	31	135
16	Abdomen	15	27	21	11	16	16	52	54
17	Other	26	28	55	22	51	29	132	79

(T) = Requiring Treatment.

(O) = Requiring Observation.

TABLE 2B.—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Pupils requiring Treatment (3)	Pupils requiring Observation (4)
4.	Skin	575	4
5.	Eyes—		
	(a) Vision	314	101
	(b) Squint	10	2
	(c) Other	124	1
6.	Ears—		
	(a) Hearing	11	50
	(b) Otitis Media	34	9
	(c) Other	57	4
7.	Nose and Throat	28	11
8.	Speech	37	9
9.	Lymphatic Glands	1	2
10.	Heart	2	5
11.	Lungs	7	8
12.	Developmental—		
	(a) Hernia	2	—
	(b) Other	2	1
13.	Orthopaedic—		
	(a) Posture	3	—
	(b) Feet	5	—
	(c) Other	27	2
14.	Nervous System—		
	(a) Epilepsy	1	—
	(b) Other	1	1
15.	Psychological—		
	(a) Development	3	4
	(b) Stability	24	19
16.	Abdomen	—	—
17.	Other	519	29

Defect Code No.	Defect or Disease	ENTRANTS				INTERMEDIATES				LEAVERS				Pupils at SPECIAL SCHOOLS			
		Total Defects R.T. Old and New		New Defects Only		Total Defects R.T. Old and New		New Defects Only		Total Defects R.T. Old and New		New Defects Only		Total Defects R.T. Old and New		New Defects Only	
		U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.	U.T.	Not U.T.
4	Skin	82	56	26	19	10	137	30	18	9	2	3	...	...	...	...
5	Eyes— (a) Vision (b) Squint (c) Other	53	34	19	50	26	578	75	20	38	2	1	...	...	...	...
6	Ears— (a) Hearing (b) Otitis Media (c) Other	63	54	9	3	1	74	1	—	11	—	—	...	...	...	...
7	Nose and Throat	12	6	6	10	11	31	7	9	—	—	—	...	...	...	...
8	Speech	6	2	4	1	—	8	—	—	—	—	—	...	...	...	...
9	Lymphatic Glands	25	17	8	1	—	10	1	—	3	—	—	...	...	...	...
10	Heart	10	5	5	1	2	13	—	—	2	—	—	...	...	...	...
11	Lungs	126	91	35	14	5	39	3	2	2	—	—	...	...	...	...
12	Developmental	36	17	19	—	2	6	2	—	8	—	—	...	...	...	...
13	(a) Hernia (b) Other Orthopaedic— (a) Posture (b) Feet (c) Other	1	1	—	—	—	1	4	—	—	—	—	...	...	...	...
14	Nervous System— (a) Epilepsy (b) Other	44	38	6	14	—	7	2	—	5	2	—	...	...	...	...
15	Psychological— (a) Development (b) Stability	5	3	2	—	—	16	—	—	—	—	—	...	...	...	...
16	Abdomen	6	—	6	—	—	63	4	39	3	—	—	...	...	...	...
17	Other	14	7	7	2	4	18	1	2	3	—	—	...	...	...	...
	Total Defects	568	394	174	773	99	1,153	149	97	118	8	6	...	...	...	...

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

TABLE 3A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	632
Errors of refraction (including squint)	3,639
TOTAL	4,271
Number of pupils for whom spectacles were prescribed	2,844

TABLE 3B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	<i>Number of cases known to have been dealt with</i>
Received operative treatment—	
(a) for diseases of the ear	—
(b) for adenoids and chronic tonsillitis	—
(c) for other nose and throat conditions	—
Received other forms of treatment	141
TOTAL	141
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1961	8
(b) in previous years	55

TABLE 3C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	—
(b) pupils treated at school for postural defects	64
TOTAL	64

TABLE 4.—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY
THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers:						
(a) At Periodic Inspections	...	...	30,064	}	Total (1)	32,091
(b) As Specials	...	...	2,027			
(2) Number found to require treatment	...	...	...	...	...	14,230
(3) Number offered treatment	...	...	...	...	...	9,730
(4) Number actually treated...	...	...	...	...	...	4,605
(5) Number of attendances made by pupils for treatment, including those recorded at 11(h)	...	...	...	...	...	12,757
(6) Half Days devoted to:						
(a) Periodic (School) Inspection	...	...	263	}	Total (6)	2,055
(b) Treatment	...	...	1,792			
(7) Fillings:						
(a) Permanent Teeth	...	...	9,597	}	Total (7)	9,853
(b) Temporary Teeth	...	...	256			
(8) Number of Teeth filled:						
(a) Permanent Teeth	...	...	8,034	}	Total (8)	8,278
(b) Temporary Teeth	...	...	244			
(9) Extractions:						
(a) Permanent Teeth	...	...	1,731	}	Total (9)	5,754
(b) Temporary Teeth	...	...	4,023			
(10) Administration of general anaesthetics for extraction...	...	...	...	...	...	2,481
(11) Orthodontics:						
(a) Cases commenced during the year	...	...	...	...	...	78
(b) Cases brought forward from previous year	...	...	...	...	...	55
(c) Cases completed during the year	...	...	...	...	...	50
(d) Cases discontinued during the year	...	...	...	...	...	7
(e) Pupils treated by means of appliances	...	...	...	...	...	55
(f) Removable appliances fitted	...	...	...	...	...	55
(g) Fixed appliances fitted	...	...	...	...	...	15
(h) Total attendances	...	...	...	...	...	676
(12) Number of pupils supplied with artificial teeth	...	...	...	...	...	58
(13) Other operations:						
(a) Permanent Teeth	3,609	}	Total (13)	4,104
(b) Temporary Teeth	495			

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