

[Report 1965] / Medical Officer of Health, Rotherham County Borough.

Contributors

Rotherham (England). County Borough Council.

Publication/Creation

1965

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THE HEALTH OF ROTHERHAM ^{c B} 1965



**ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
AND
ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER**



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COUNTY BOROUGH OF ROTHERHAM

REPORT
BY THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1965

ROTHERHAM:
HENRY GARNETT & CO, LTD., "ADVERTISER" OFFICE
1966

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HEALTH COMMITTEE

MEMBERSHIP

(as at 31st December, 1965)

HIS WORSHIP THE MAYOR (Alderman W. Beevers.)

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COUNCILLOR K. BARKER	COUNCILLOR MRS. D. WIDDOP

ROTHERHAM EDUCATION COMMITTEE

(as at 31st December, 1965)

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Chairman: ALDERMAN M. W. YOUNG

Vice-Chairman: COUNCILLOR G. MILBURN

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COUNCILLOR MRS. G. ROEBUCK	MR. A. WYNNE

Director of Education:
R. BLOOMER, B.Com.

STAFF

(as at 31st December, 1965)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER :

R. J. Donaldson, M.B., Ch.B., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER:

J. M. Howell, M.B., B.S., M.R.C.S.,
L.R.C.P., D.C.H., D.P.H.

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Mary Jackson, M.B., Ch.B., D.L.O.
F. B. G. Wood, M.B., Ch.B.

PRINCIPAL DENTAL OFFICER:

H. R. Heald, L.D.S.

DENTAL OFFICERS:

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J. O. Lofthouse, L.D.S.
G. W. Lowe, L.D.S.
Isabel L. Ross, B.D.S.
Joyce Stocks, L.D.S.

EDUCATIONAL PSYCHOLOGIST:

T. Lee, B.A.

CHIROPODIST (part-time):

L. Aldam, M.Ch.S., S.R.Ch.

SPEECH THERAPIST:

Miss M. Wareing, L.C.S.T.

PHYSIOTHERAPIST (part-time):

P. J. G. Nightingale, M.C.S.P.

CONSULTING STAFF (part-time):

OPHTHALMOLOGY:

T. Stafford Maw, M.B., Ch.B., D.O.M.S.
D. B. Bannerjee, M.B., B.S., D.C.H.
N. M. Watters, M.B., Ch.B.

EAR, NOSE AND THROAT:

Romola D. Dunsmore, M.B., B.S.,
F.R.C.S.

PSYCHIATRY:

Vacant

OBSTETRICS AND GYNAECOLOGY:

D. Ballantine, M.B., Ch.B., F.R.C.S.,
F.R.C.O.G., L.M.

TUBERCULOSIS:

A. C. Morrison, M.D., D.P.H.

ORTHODONTICS:

J. H. Gardiner, B.D.S., L.D.S. (Manch.)

ORTHOPAEDICS

H. L. McMullen, B.A., M.B., B.Chir.,
F.R.C.S.

PUBLIC ANALYST (part-time):

H. Childs, B.Sc., F.R.I.C.

LAY ADMINISTRATIVE OFFICER:

G. H. Biggin

SENIOR CLERK:

G. T. Longden

MEDICAL OFFICER OF HEALTH'S SECRETARY:

Miss J. Caseldine

GENERAL OFFICE: CLERICAL STAFF:

Six Clerks

CHIEF PUBLIC HEALTH INSPECTOR:

L. Eastwood, M.A.P.H.I., A.M.Inst.P.C.,
(1), (2), (3), (4).

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR:

T. E. Snape, M.R.S.H., (1), (2).

PUBLIC HEALTH INSPECTORS:

G. C. Harrison, M.A.P.H.I., (2).
W. James
K. Jones, M.A.P.H.I., (1), (4).
W. G. Smith, M.A.P.H.I., (1), (2).
(Three Vacancies)

PUBLIC HEALTH INSPECTOR'S SECTION:

Three Pupil Health Inspectors
Two Clerks
One Technical Assistant
One Disinfecter (one vacancy)
One Ratcatcher

QUALIFICATIONS :

- (1) Certificate, Meat and Other Foods Inspector
- (2) Certificate, Smoke Inspector
- (3) Testamur, Institute of Public Cleansing (Honours)
- (4) Building Construction Certificate

SUPERINTENDENT HEALTH VISITOR:

Miss E. G. Taylor, S.R.N., S.C.M.

DEPUTY SUPERINTENDENT HEALTH VISITOR:

Miss E. Keeton, S.R.N., S.C.M.

HEALTH VISITOR/SOCIAL WORKER:

(Vacant)

HEALTH VISITORS:

Miss C. M. Cullen, S.R.N., S.C.M.
Miss M. Fleming, S.R.N., S.R.F.N.,
S.C.M.
Miss G. Gorman, S.R.N., S.C.M.
Miss E. M. Jeffs, S.R.N., S.C.M.
Mrs. R. McHugh, S.R.N., S.C.M.
Mrs. A. B. Payling, S.R.N., S.C.M.
Miss S. M. Savidge, S.R.N., S.C.M.
Mrs. G. J. Spearing, S.R.N., S.C.M.
(Five vacancies)

SCHOOL NURSES:

Mrs. E. M. Catley, S.R.N.
Miss F. M. Clark, S.R.N.
Mrs. M. Gaskell, S.R.N., S.C.M.
Mrs. M. Hunton, S.R.N.
Mrs. M. Leeson, S.R.N., S.C.M.
Mrs. M. Mossman, R.S.C.N.
Mrs. E. A. S. Hoyle, S.R.N., S.C.M.
(Part-time)

CLINIC NURSES:

Miss S. Greenway, S.R.N.
Mrs. M. Measures, S.R.N.
Mrs. F. M. Buxton, S.R.N. (Part-time)
Mrs. A. Ketton, S.R.N. (part-time)
Mrs. J. Marshall, S.R.N. (part-time)
Mrs. A. Naylor, S.R.N., R.S.C.N.
(part-time)
Mrs. V. Pingree, S.R.N. (part-time)
Mrs. S. Sanderson, R.S.C.N. (part-time).

**MATERNITY AND CHILD WELFARE SECTION:
SENIOR CLERK:**

Miss N. H. Platts
Seven Clerks

WELFARE FOOD SHOP:

One Shop assistant (full-time)
Three Shop assistants (part-time)

**SCHOOL HEALTH SECTION:
SENIOR CLERK:**

Miss W. M. Cooper
Five Clerks
Two Dental Clerks
Four Dental Attendants
Two Dental Technicians

**HOME NURSING SERVICE:
SUPERINTENDENT:**

Miss V. M. McCarthy, S.R.N., S.C.M.,
Q.N.

DEPUTY SUPERINTENDENT:

Miss B. M. Colton, S.R.N., S.C.M., Q.N.
Twenty Nurses (full-time)
Five Nurses (part-time)

HOME HELP SERVICE:

**HOME HELP ORGANISER AND
GERIATRIC SOCIAL WORKER:**

Mrs. R. E. Wales, M.I.H.H.O., A.I.S.W.

DEPUTY HOME HELP ORGANISER:

Mrs. G. Stevenson, M.I.H.H.O.
180 Home helps (part-time)
Six Visitors (full-time)
One Visitor (part-time)

OCCUPATIONAL THERAPIST :

Mrs. K. Birkinshaw

SENIOR CLERK:

Miss S. Handley-Street
Three Clerks
Three Clerks (part-time)

DISTRICT MIDWIVES SERVICE:

NON-MEDICAL SUPERVISOR OF MIDWIVES:

Mrs. I. McGann, S.R.N., S.C.M.

ASSISTANT TO NON-MEDICAL SUPERVISOR OF
MIDWIVES:

Mrs. G. Hewitt, S.R.N., S.C.M.

DISTRICT MIDWIVES:

Mrs. P. M. Abbott, S.R.N., S.C.M.
Mrs. R. Addison, S.C.M.
Miss E. Atkinson, S.R.N., S.C.M.
Mrs. H. M. Clarke, S.R.N., S.C.M.
Mrs. N. Edwards, S.C.M.
Mrs. B. Ellis, S.C.M.
Mrs. P. M. Fox, S.R.N., S.C.M.

DISTRICT MIDWIVES—*contd.*:

Mrs. E. Hawley, S.C.M.
Mrs. M. Hughes, S.C.M.
Miss E. D. Jeyes, S.C.M.
Mrs. J. M. Rowan, S.C.M.
Miss B. D. Walker, S.R.N., S.C.M.
Mrs. G. L. Willoughby, S.C.M.
(One vacancy)

MENTAL HEALTH OFFICER:

W. R. Sidaway, D.M.H.

ASSISTANT MENTAL HEALTH OFFICERS:

N. Kell, S.R.N., R.M.N.
K. Coxon
Miss G. Calam, Mental Health Social
Worker

JUNIOR TRAINING CENTRE:

SUPERVISOR:

Mrs. V. Redfern

DEPUTY SUPERVISOR:

Mrs. F. Crossley
Two Assistant Supervisors (female)

ADULT TRAINING CENTRE:

ACTING SUPERVISOR:

E. Harcourt
Two Assistant Supervisors (female)

HEALTH DEPARTMENT,
MUNICIPAL OFFICES,
ROTHERHAM.

Telephone 2121.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH AND EDUCATION
COMMITTEES OF THE COUNTY BOROUGH OF ROTHERHAM

I have pleasure in submitting the report on the health of Rotherham for 1965.

The estimated mid-year population of the County Borough was 86,780. The birth rate per thousand population for the year was 18.65 compared with 19.77 in 1964 and the death rate was 10.97 compared with 10.73 in 1964.

Twenty-five infants under one year died in the County Borough during the year and 13 of these were premature babies, the infantile mortality rate being 15.44 as compared with 21.62 in 1964. It is gratifying to note that this is the lowest infantile mortality rate ever recorded in the County Borough.

The programme of smoke control areas has been accelerated in order to achieve our target of a smoke-free Rotherham in the early 1970's. At present there are 5,654 houses in smoke control areas out of a total of 28,798. Our experience is that the public are becoming more aware of the benefits of using smokeless fuels and are finding it a very acceptable form of heating. Where difficulties arise it is because of either the cost of the fuel or problems related to the older and less efficient forms of "approved" appliances.

There were 741 cases of measles notified as compared with 720 in the previous year. No deaths occurred from the disease and 11 cases were treated in hospital. There was an increase in the number of cases of scarlet fever notified, 111 cases as compared with 95. Seven cases of food poisoning were notified, six received treatment in hospital and one case died. There were 37 cases of puerperal pyrexia as against 33 in 1964 and 77 cases of whooping cough were notified, as against 47 in 1964, four cases being admitted to hospital. There was one case of malaria and four cases of paratyphoid fever. There was no case of poliomyelitis during the year.

B.C.G. vaccination against tuberculosis was continued for the 13 plus age group. Of 1,375 children of this age attending school in the County Borough, consent was received from the parents of 1,115, an acceptance rate of 81.09 per cent. As a result of the Mantoux tests 1,057 children were subsequently vaccinated during the year with B.C.G. The percentage of children tested who were positive was 22.42 per cent and 185 children received B.C.G. vaccination in 1965 under the B.C.G. scheme for contacts. Of these, 28 were done during their stay in Listerdale Maternity Home, the remainder were given at the Chest Clinic. Two babies were admitted to Oakwood Grange Nursery for a period of isolation following B.C.G. vaccination. Some 7,145 doses of Sabin oral poliomyelitis vaccine were administered by the end of the year.

The 603 maternity cases delivered on the district represented 37.0 per cent of the total confinements for the County Borough. This is a decrease as compared with the previous year and a reduction of 130 cases in the last five years. On the other hand the number of cases discharged early from hospital and nursed by the domiciliary midwives has increased from 276 cases in 1961 to 626 in 1965. The use of sterile supplies by midwives has allowed us to experiment with different types of midwife's bags and a design was accepted this year which has proved popular and satisfactory.

Plans were made for the establishment of further play groups based on infant welfare clinics and other premises. Mothers are responsible for the organisation and administration and this is an excellent example of self-help which has much to commend it.

The illegitimate birth rate of 6.42 per cent is the highest recorded in Rotherham and is part of the national trend. The complicated and complex causes which bring

about this sad state of affairs have been commented on at length in the previous report. It is quite clear that there is not an easy answer and one must cast a wide net to obtain help in dealing with it.

During 1965, 2,075 cases were nursed by the Home Nursing Service, which is 50 more than the previous year, and a total of 73,743 visits were paid to these patients, which represents an average of 202 daily visits paid to sick people by home nurses during the year. The Children's Nursing Unit attended 160 cases, which was an increase of 36 cases.

The work of the Home Help Service continues to be closely integrated with the home nurse, so that the functions undertaken by the home help become more specialised. It is quite evident that the helper is now an indispensable member of the domiciliary health service team. The proposed extension of the occupational therapy service will fill a need for the care of the old people at home.

With plans approved for the construction of a new senior training centre, the town should have a comprehensive and modern mental health service. It has been somewhat disappointing that the hostel for the younger mentally-disordered should continue to be under-occupied. Whilst it is true that the criteria for admission have been fairly strict it is difficult to believe that there are not the numbers of persons who would benefit from a short stay in such an establishment.

The principles of health screening clinics have already been dealt with but the importance of the health education aspect is sometimes overlooked. This occasion provides an opportunity for pressing home a positive health programme linked with test procedures. It is, for example, easier to modify deeply ingrained habits and attitudes, like cigarette smoking and over-eating, when early warning signs of incipient disease are discovered.

The last paragraph in this introduction is always devoted to acknowledgments and thanks to various people for their help throughout the year. Repetition, however, in this case does not denote insincerity. One must acknowledge first of all the consistent work done by members of this Department and the help received from other Corporation Departments. In the case of the School Health Service particular men-

tion should be made of the close working arrangement there is with the Education Department. We are most grateful for the continued close liaison with the general medical practitioners and hospital staff. The occasion also gives the opportunity to thank the chairmen and members of the Health and Education Committees for their help and guidance at all times, both in committee and outside it.

R. J. DONALDSON,

Medical Officer of Health and Principal School Medical Officer.

STATISTICS OF THE AREA

GENERAL STATISTICS

Area (in acres)	..	..	..	..	..	..	..	..	..	9,255
Population (census) 1961	..	..	..	..	..	..	..	..	..	85,346
Population (estimated civilian) 1965	..	..	..	..	..	..	..	..	..	86,780
Number of inhabited houses	..	..	..	..	..	..	..	..	..	28,798

VITAL STATISTICS

Live Births (846 Male, 773 Female)	..	..	..	..	..	..	..	..	1,619
Live birth rate per 1,000 population	..	..	..	..	..	..	..	..	18.65
Adjusted birth rate per 1,000 population (area comparability factor 0.99)	..	..	..	..	..	..	..	..	18.46
Illegitimate live births	..	..	..	..	..	..	..	..	104
Illegitimate live births per cent of total live births	..	..	..	..	..	..	..	..	6.42
Still Births	..	..	..	..	..	..	..	..	26
Still birth rate per 1,000 live and still births	..	..	..	..	..	..	..	..	15.8
Total live and still births	..	..	..	..	..	..	..	..	1,645
Infant deaths (Deaths under 1 year)	..	..	..	..	..	..	..	..	25
Infant Mortality Rate per 1,000 live births—Total	..	..	..	..	..	..	..	..	15.44
„ „ „ „ „ „ —Legitimate	..	..	..	..	..	..	..	..	14.52
„ „ „ „ „ „ —Illegitimate	..	..	..	..	..	..	..	..	28.84
Neo-natal Mortality Rate (Deaths under 4 weeks per 1,000 total live births)	..	..	..	..	..	..	..	..	9.26
Early Neo-natal Mortality Rate (Deaths under 1 week per 1,000 total live births)	..	..	..	..	..	..	..	..	8.65
Perinatal Mortality Rate (Still births and deaths under 1 week combined per 1,000 total live and still births)	..	..	..	..	..	..	..	..	24.32
Maternal Mortality (including abortion)	..	..	..	..	..	..	..	..	-
Maternal mortality rate per 1,000 live and still births	..	..	..	..	..	..	..	..	-
Deaths (548 Male, 404 Female)	..	..	..	..	..	..	..	..	952
Death rate per 1,000 population	..	..	..	..	..	..	..	..	10.97
Adjusted death rate per 1,000 population (area comparability factor 1.18)	..	..	..	..	..	..	..	..	12.94

The following table gives details of birth rate, death rate, infantile mortality rate and estimated population during the last 50 years.

Year	Birth Rate	Death Rate	Infantile Mortality Rate	Estimated Population
1916	27.60	15.55	130	65,300
1917	24.79	13.90	97	65,300
1918	24.91	19.61	132	65,300
1919	22.75	13.19	91	72,800
1920	27.77	11.45	100	72,800
1921	28.54	13.13	86	68,045
1922	25.45	12.06	86	69,100
1923	23.85	11.30	100	70,000
1924	23.88	12.75	96	70,260
1925	22.27	11.74	83	70,300
1926	21.82	10.34	65	70,600
1927	20.76	13.46	90	70,080
1928	19.05	10.58	71	70,530
1929	20.01	12.13	83	70,790
1930	18.72	10.50	74	70,390
1931	18.18	12.03	92	70,130
1932	18.11	11.15	70	69,820
1933	16.53	12.06	84	69,370
1934	17.30	10.30	49	68,900
1935	17.01	11.53	69	68,700
1936	16.98	11.98	71	74,965
1937	16.99	11.42	50	75,740
1938	17.82	10.54	52	76,430
1939	16.88	10.86	53	76,960
1940	18.01	12.39	62	75,740
1941	17.86	11.43	66	75,770
1942	18.08	10.31	50	75,040
1943	18.81	12.12	65	74,250
1944	23.28	11.68	60	75,260
1945	20.09	11.73	56	75,630
1946	22.49	10.96	51	78,610
1947	23.87	10.86	57	79,920
1948	20.11	10.50	70	81,450
1949	18.69	10.63	53	82,030
1950	17.44	10.33	50	82,800
1951	17.61	11.91	28	81,670
1952	16.25	10.46	32	81,800
1953	16.16	10.10	32	82,070
1954	16.50	10.68	22	82,260
1955	16.02	11.00	26	82,530
1956	17.22	10.58	24	82,850
1957	16.95	10.83	25	83,350
1958	18.04	11.20	22	84,030
1959	17.35	11.08	21	84,560
1960	18.31	10.96	20	85,070
1961	18.12	11.14	30	85,440
1962	18.80	11.76	28	86,220
1963	19.20	11.24	27	86,660
1964	19.77	10.73	22	86,510
1965	18.65	10.97	15	86,780

In the following table the causes of death at different periods of life, as supplied by the Registrar-General, with death rates, are given for the year :

Cause of Death	Sex	Total All Ages	Under four weeks	Four weeks and under one year	Age in Years										Death Rate per 1,000 Pop.
					1-	5-	15-	25-	35-	45-	55-	65-	75-		
1. Tuberculosis, respiratory	M	2	-	-	-	-	-	-	-	-	1	1	-	0.04	
	F	1	-	-	-	-	-	-	-	-	-	-	1		
3. Syphilitic disease ..	M	2	-	-	-	-	-	-	-	1	-	-	1	0.02	
	F	-	-	-	-	-	-	-	-	-	-	-	-		
6. Meningococcal infections	M	-	-	-	-	-	-	-	-	-	-	-	-	0.01	
	F	1	-	1	-	-	-	-	-	-	-	-	-		
9. Other infective and parasitic diseases ..	M	-	-	-	-	-	-	-	-	-	-	-	-	0.01	
	F	1	-	-	-	-	-	-	-	1	-	-	-		
10. Malignant neoplasm, stomach ..	M	26	-	-	-	-	-	1	6	5	8	6	-	0.35	
	F	4	-	-	-	-	-	-	-	1	1	2	-		
11. Malignant neoplasm, lung bronchus ..	M	31	-	-	-	-	1	-	8	9	10	3	-	0.44	
	F	7	-	-	-	-	-	-	-	1	4	2	-		
12. Malignant neoplasm, breast ..	M	-	-	-	-	-	-	-	-	-	-	-	-	0.18	
	F	16	-	-	-	-	1	2	2	3	3	5	-		
13. Malignant neoplasm, uterus ..	F	6	-	-	-	-	-	-	-	1	3	2	-	0.07	
14. Other malignant and lymphatic neoplasms	M	45	-	-	-	-	-	2	5	10	23	5	-		
	F	36	-	-	-	-	1	1	4	5	11	14	-	0.93	
15. Leukaemia, aleukaemia	M	3	-	-	-	-	1	-	-	1	1	-	-		
	F	2	-	-	-	-	-	-	-	1	1	-	-	0.06	
16. Diabetes ..	M	1	-	-	-	-	-	-	-	-	-	1	-		
	F	4	-	-	-	-	-	-	-	1	2	1	-	0.06	
17. Vascular lesions of nervous system ..	M	75	-	-	-	-	-	1	2	8	28	36	-		
	F	70	-	-	-	-	1	1	1	3	14	50	-	1.67	
18. Coronary disease, angina ..	M	117	-	-	-	-	1	3	11	36	36	30	-		
	F	66	-	-	-	-	-	1	2	7	25	31	-	2.11	
19. Hypertension with heart disease ..	M	6	-	-	-	-	-	-	1	1	3	1	-		
	F	10	-	-	-	-	-	-	-	3	4	3	-	0.18	
20. Other heart disease ..	M	45	-	-	-	-	1	2	2	6	7	27	-		
	F	45	-	-	-	-	1	2	2	4	8	28	-	1.04	
21. Other circulatory disease	M	19	-	-	-	-	-	-	1	2	5	11	-		
	F	20	-	-	-	-	-	-	-	1	2	17	-	0.45	
22. Influenza ..	M	2	-	-	-	-	-	-	-	1	-	1	-		
	F	1	-	-	-	-	-	-	-	-	-	1	-	0.04	
23. Pneumonia ..	M	38	-	5	-	-	-	1	1	6	7	18	-		
	F	25	2	1	1	-	-	-	1	-	3	17	-	0.73	
24. Bronchitis ..	M	60	-	-	-	-	-	1	5	14	25	15	-		
	F	19	-	-	-	-	-	-	2	4	4	9	-	0.91	
25. Other diseases of respiratory system ..	M	5	-	-	-	-	-	-	-	-	2	3	-		
	F	3	-	1	-	-	-	-	-	-	-	2	-	0.09	
26. Ulcer of stomach and duodenum ..	M	3	-	-	-	-	-	-	2	1	-	-	-		
	F	1	-	-	-	-	-	-	-	-	-	1	-	0.05	
27. Gastritis, enteritis and diarrhoea ..	M	1	-	-	-	-	-	1	-	-	-	-	-		
	F	8	-	1	-	-	-	-	-	-	5	2	-	0.10	
28. Nephritis and Nephrosis	M	5	-	-	-	-	-	-	-	2	2	-	1		
	F	1	-	-	-	-	-	-	-	-	-	1	-	0.07	
29. Hyperplasia of prostate	M	2	-	-	-	-	-	-	-	-	-	-	2		
31. Congenital malformations ..	M	5	2	-	-	-	2	-	-	1	-	-	-	0.07	
	F	1	-	-	-	-	1	-	-	-	-	-	-		
32. Other defined and ill-defined diseases ..	M	18	5	-	1	-	-	1	1	1	4	5	-	0.62	
	F	36	6	-	-	2	-	-	3	5	8	12	-		
33. Motor vehicle accidents	M	12	-	-	1	-	3	3	1	1	-	2	1	0.18	
	F	4	-	-	-	-	-	1	1	2	-	-	-		
34. All other accidents ..	M	16	-	1	-	-	1	-	-	-	4	-	10	0.31	
	F	11	-	-	-	-	1	-	-	-	1	-	9		
35. Suicide ..	M	8	-	-	-	-	-	1	-	2	4	1	-	0.13	
	F	3	-	-	-	-	-	1	-	-	-	2	-		
36. Homicide and operations of war ..	M	1	-	-	-	1	-	-	-	-	-	-	-	0.03	
	F	2	-	-	-	1	-	-	1	-	-	-	-		
Total all causes ..	M	548	7	6	2	1	7	7	14	52	112	163	177	10.97	
	F	404	8	4	1	3	3	4	10	19	42	101	209		

INFANTILE MORTALITY.

The following table gives details of the deaths registered during the year which were under one year of age :—

R.G's Code No.	Cause of death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	Total under 4 wks	4 wks to 3 mths	3-5 mths	6-8 mths	9-11 mths	Total under one year
6	Meningococcal infections	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
23	Pneumonia	-	-	-	1	-	-	-	-	-	1	2	1	5	-	-	8
25	Other diseases of respiratory system	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
27	Gastritis, En- teritis and Diarrhoea	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
31	Congenital malformations	-	-	2	-	-	-	-	-	-	-	2	-	-	-	-	2
32	Other defined and ill-defined diseases	7	3	-	-	1	-	-	-	-	-	11	-	-	-	-	11
34	All other Accidents	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
		7	3	2	1	1	-	-	-	-	1	15	2	6	-	2	25

CANCER

The following table gives the localisation of the disease, the number of deaths and the death rate per 1,000 population annually for the past ten years :—

	1956		1957		1958		1959		1960		1961		1962		1963		1964		1965	
	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate	No.	Death rate
Stomach and duodenum	23	0.28	19	0.23	27	0.32	26	0.31	18	0.21	24	0.28	28	0.32	18	0.21	28	0.32	30	0.35
Lung, bronchus	35	0.42	34	0.41	41	0.49	31	0.37	59	0.69	47	0.55	42	0.49	46	0.53	40	0.46	38	0.44
Breast	11	0.13	14	0.17	13	0.16	17	0.20	15	0.18	19	0.22	14	0.16	17	0.20	11	0.13	16	0.18
Uterus	1	0.01	7	0.08	7	0.08	15	0.17	7	0.08	7	0.08	4	0.05	4	0.04	6	0.07	6	0.07
Other sites	87	1.05	90	1.08	89	1.05	87	1.03	82	0.96	73	0.85	78	0.90	88	1.01	92	1.06	81	0.93
Total deaths and death rates from cancer	157	1.89	164	1.97	177	2.10	176	2.08	181	2.12	170	1.99	166	1.92	173	1.99	177	2.04	171	1.97
Total deaths and death rates all causes	877	10.58	903	10.83	941	11.20	937	11.08	932	10.96	952	11.14	1014	11.76	974	11.24	928	10.73	952	10.97
Proportion, cancer deaths to total deaths, - 1 in	5.59		5.51		5.32		5.32		5.15		5.6		6.11		5.63		5.24		5.57	

ENVIRONMENTAL HEALTH

During the year we had a reminder that the elimination of one source of danger in a food supply does not reduce the risk of infection from other causes.

The tuberculin testing of dairy herds and the slaughter of reactors has given us a tubercle-free milk supply and has reduced the loss of meat by condemnation to a fraction of the former total. The public health benefits of this work have been of great value.

The knowledge that our milk supply is tuberculin tested has led to a certain complacency and "untreated" milk is considered to be "safe." The fact that untreated milk is not "safe" was clearly demonstrated by the outbreak of paratyphoid fever which occurred during the summer due to infection of a milk supply at a coastal town. Having regard to the number of raw milk samples found to contain *brucella abortus* there must also be a suspicion that many mild cases of undulant fever escape detection.

Pasteurisation of all milk would ensure that the public would not be exposed to risk and, in particular, would protect families taking meals outside their own homes where they have no control of the type of milk supplied. It is difficult to understand why heat treatment of all milk supplies has not been made compulsory.

Enforcement of much health legislation is not the simple procedure which it seems to be. When new measures are brought into force, the local authority must be reasonable and not take precipitate action which may antagonise a section of the community and do more harm than good. On the other hand too much latitude cannot be allowed to the extent that the tardy appear to be favoured. Such a situation has now arisen in the enforcement of the Offices, Shops and Railway Premises Act, 1963. The majority of occupiers have complied with notices sent concerning breaches of the requirements, but a substantial minority have overlooked these matters in spite of reminder letters. Some of the notices relate to relatively trivial matters such as failure to exhibit an abstract of the Act for the benefit of staff. Nevertheless, these are requirements of the Act which we are charged to enforce and there is a limit to the number of revisits and reminder letters which can be afforded with a depleted staff. Unfortunately, but unavoidably, it may be necessary to take proceedings in some cases to avoid further wasted time.

As will be seen from the report, in spite of a shortage of staff, and primarily due to the willingness of existing staff to accept constant changes of emphasis, a great deal of useful work has been done. Every person has a different idea of what the priorities

are, and any officer deciding day to day priorities is open to criticism, it is hoped that, in all the circumstances, it will be felt that a reasonable apportionment of attention has been made.

WATER

45 samples of drinking water and 20 samples of swimming bath water were taken for examination. One sample of swimming bath water was unsatisfactory, to which the attention of the Baths Manager was drawn.

5 samples were taken from the paddling pool in Clifton Park in June, July, August and September. 4 were satisfactory and revealed adequate chlorination. The attention of the Parks Superintendent was drawn to the unsatisfactory sample.

SANITARY ACCOMMODATION

(a) HOUSE DRAINAGE.

1,945 visits were made in connection with drain tests, defective drains and drainage appliances.

The Building Works Department cleared 6 private drains and repaired 5 sewers involving twenty-three houses at our request and costs were recovered from the owners concerned. This together with the clearing service provided by the Borough Engineer for those combined drains, which are now technically sewers, enabled us to reduce nuisance from this source very substantially.

(b) STANDARD GRANTS.

The sixth year of operation of the Standard Grant provisions of the House Purchase and Housing Act, 1959, produced 168 enquiries from prospective applicants. Of these, 129 applied for grants and 124 of these were approved during the year, one was deferred. Details are as follows :

Grant approved	124
(owner occupiers)	102
(landlords)	22
Grants refused	4
Works completed and grant paid	99
Total grant	£8,468 14s. 8d.
Amenities provided	
Bath	66
Washbasin	72
Hot water supply	66
Water closet	91
Food Store	1

(c) LICENSED PREMISES, CINEMAS.

42 inspections were made of the sanitary accommodation at licensed premises and cinemas.

Sanitary accommodation repaired	4
Sanitary accommodation cleansed	2
Intervening ventilated space to water closets provided	3

OFFENSIVE TRADES

No complaints of nuisance were received in connection with the 5 offensive trades now registered.

FACTORIES

406 factory inspections were made as follows :

Premises	Number on Register	Number of		
		Inspec- tions	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	39	20	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	299	384	79	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	2	2	—	—
Total ..	340	406	80	—

Factories in which defects were found :

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences					
(a) Insufficient	1	1	—	—	—
(b) Unsuitable or defective	80	66	—	5	—
(c) Not separate for sexes	—	—	—	—	—
Total ..	81	67	—	5	—

OUTWORKERS

One outworker carrying out alterations to clothing was notified in Rotherham during the year.

CANAL BOATS

Canal boats inspected	..	..	..	..	..	..	2
Persons on board :							
Male adults	..	..	..	..	..	..	2
Female adults	..	..	..	..	..	..	—
Cases of infectious disease	..	..	..	..	..	..	—
Infringements observed	..	..	..	..	..	..	—
Notices served	..	..	..	..	..	..	—
Notices complied with	..	..	..	..	..	..	—
Notices outstanding	..	..	..	..	..	..	—
Legal proceedings taken	..	..	..	..	..	..	—

HOUSING

(a) NUISANCE AND DISREPAIR.

997 complaints of nuisance and disrepair were received during the year. 1,732 houses were involved in the total nuisances found as a result of complaints or during inspection of the district.

2 applications for certificates under the provisions of the Rent Act, 1957, were received.

(b) DEMOLITION AND CLOSURE.

2 clearance areas involving 29 houses were declared during the year. 7 individual unfit houses were the subject of closing or demolition orders.

This appears to present a depressing picture of slum clearance in Rotherham. When it is considered in relation to the huge clearance of sub-standard houses for the St. Ann's redevelopment and the inner bypass scheme, where several hundred houses are being demolished, it will be seen that the bulk of our housing effort has been in relation to potential slum clearance.

(c) HOUSE PURCHASE.

Many enquiries are still being received from would-be house purchasers requiring information as to the slum clearance position of individual houses. 288 such enquiries were dealt with.

196 houses were visited in connection with applications for mortgages to ensure that the period of repayment and probable life of the house were properly related.

(d) IMPROVEMENT AREAS.

A survey of the proposed St. Ann's improvement area was made during the year. In view of the many problems which will arise from formal declaration of the area, an advisory pamphlet is being prepared dealing with the rights and obligations of landlord and tenant and giving advice on bathroom layouts and grants or loans available.

SUMMARY OF HOUSING ACTION

1. Inspection of dwelling houses:

(1) Number of houses inspected for housing defects under Public Health or Housing Acts	413
(2) Number of houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations	85
(3) Number of houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	85
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found to be not in all respects reasonably fit for human habitation	328

2. Remedy of defects during the year without service of formal notice:

(1) Number of dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers (including houses with minor defects)	271
--	-----

3. Action under statutory powers:

A. Proceedings under Section 9 and 10 of the Housing Act, 1957.

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which formal notices were served requiring defects to be remedied	144
(2) Number of dwelling houses in which defects were remedied after service of formal notices :	
(a) By owners	56
(b) By Local Authority in default of owners	1

C. Proceedings under Sections 16, 17 and 18, Housing Act, 1957.

(1) Number of dwelling houses in respect of which demolition orders were made	...	...	...	...	...	...	...	...	9
(2) Number of dwelling houses in respect of which closing orders were made	...	...	...	...	...	...	...	...	—
(3) Number of individual unfit houses demolished	...	...	...	...	...	...	...	...	9
(4) Number of dwelling houses in respect of which undertakings as to future user were accepted and which ceased to be used as dwellings	...	...	...	...	...	...	...	...	—
(5) Number of houses included in clearance or compulsory purchase orders	...	...	...	...	...	...	...	...	29
(6) Number of houses included in confirmed clearance or compulsory purchase orders demolished	...	...	...	...	...	...	...	...	86
(7) Number of local authority houses closed or demolished	...	...	...	...	...	...	...	...	—

DETAILS OF LEGAL PROCEEDINGS UNDER THE PUBLIC HEALTH ACT, 1936

Case No.	Date	Default or offence	Result	Penalty
1	28.1.65	Non-compliance with Notice under Section 39	Fined	£5
2	4.2.65	Non-compliance with Abatement Notice and Notice under Section 39	Withdrawn, work done	—

HOUSES IN MULTIPLE OCCUPATION

These houses in Rotherham do not represent the problem to be found in our larger towns and cities. They need not be any problem at all if our immigrant landlords would confine their lettings to men without families who, taking main meals at work, do not require the facilities of a family. Unfortunately they appear to be unable to resist the temptation to install two or three families, usually non-immigrant, and create a need for additional facilities to be provided.

As the lettings and occupation of rooms frequently change it is not practicable for the local authority to install facilities in default, and legal proceedings become necessary for enforcement. One person having control of a house was fined £30 for non-compliance with a notice. It is unfortunate that there is no continuing daily penalty and that new notices must be served to take further action. This is an example of legislation badly designed for the work it has to do.

CARAVANS

The number of caravans in the County Borough is now fairly constant. Licences have been issued as follows:

Licences issued	Total	Actual
for 1 caravan — 8	8	8
„ 2 caravans— 7	14	12
„ 4 „ — 2	8	4
„ 5 „ — 1	5	5
„ 9 „ — 1	9	8
„ 12 „ — 1	12	—

VERMINOUS PREMISES

1,126 inspections of Corporation houses and the houses of prospective tenants were made. Evidence of vermin was found on 5 occasions.

It is sixteen years since the regular inspection of vacant corporation houses and the houses of prospective tenants was instituted. In 1950, 67 instances of vermin were found in 828 inspections, approximately 8 per cent, in 1965 this figure was reduced to 0·5 per cent. New insecticides have helped to bring about this reduction but a higher standard of personal hygiene is also apparent.

The incidence of infestation in all premises treated was as follows:

	Bugs	Cockroaches	Other pests	Total
Corporation Houses ..	21	94	22	137
Private Premises	22	56	35	113
	—	—	—	—
	43	150	57	250
	—	—	—	—
Percentage of infestation in all premises	17%	60%	23%	

PHARMACY AND POISONS ACT

100 licences were issued authorising the sale of poisons included in Part 2 of the Poisons List.

RATS AND MICE DESTRUCTION

	Type of Property				Total
	Local Authority	Dwelling houses	Agricultural	Business etc.	
Complaints received	45	729	2	180	956
Other inspections made	49	76	31	45	201
Properties found to be infested by rats ..	57	425	5	90	577
Properties found to be infested by mice ..	14	128	—	56	198
Notices served for structural work ..	—	14	—	2	16

The above details have been extracted from the annual report required by the Ministry of Agriculture, Fisheries and Food:

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The following report was made to the Minister of Labour on the operation of the Act in Rotherham.

Apart from a small number of shops and offices which are being vacated for road proposals and redevelopment, all registered premises have now been inspected and most have received a second visit.

The number of premises in a bad condition was small. Offices, in particular, were better than had been expected, many of the other premises were previously inspected for other purposes.

Local lighting standards have not been fixed in anticipation of national standards, a few notices have been served in respect of serious cases of defective lighting in working areas or staircases and many notices have been sent concerning the absence of lighting in conveniences. Apart from these it was felt that a local standard could only

create confusion when standards were laid down by regulation. Of some 800 notices sent to occupiers concerning defects approximately 500 have been complied with. The information to employees—regulation and provision of thermometers tend to be considered trivialities and problems of enforcement by prosecution seem bound to arise.

Details of defects found may be of interest and are appended.

DEFECT

Abstract	446	Guard Stairs, etc.	87
First Aid Box	307	Washing facilities	52
Lighting	202	Hot water supply	112
Mark Conveniences, etc.	78	Sanitary Dressings	12
Provide Conveniences, etc.	31	Obstructions	17
Cleanliness	193	Clothing, etc.	21
Handrail	140	Drinking water, etc.	5
Thermometer	289	Ventilation	21
Seating	17	Overcrowding	7
Guard Machines	14		

ACCIDENTS.

14 accidents reported during the year were all of a minor nature. Related to the employment of 6,462 persons for a whole year this leads to the assumption that Rotherham is remarkably accident free or that many accidents are not reported.

SPECIAL REPORT ON LIGHTING STANDARDS

RELATING TO THE LAST THREE MONTHS OF 1965

The general impression with relatively few exceptions was that the standard of lighting, both natural and artificial, in offices and shops, including staircases, corridors, washplaces, etc., visited was reasonable.

EXAMPLES OF UNSATISFACTORY LIGHTING.

- 42 cases of unsatisfactory lighting in sanitary conveniences were all due to lack of suitable artificial lighting. They related to 41 external water closets and 1 internal water closet.
- 1 case of unsatisfactory lighting in a storeroom was found. This was due to the low power of the electric light.
- 2 cases of unsatisfactory lighting on staircases were due to lack of suitable artificial lighting.

No specific standards of lighting in terms of lumens have been recommended. It was felt that any recommendation might lead to confusion when official standards were announced.

No instances of excessive glare were noticed.

DETAILED INFORMATION

PREMISES INSPECTED DURING THE MONTH OF NOVEMBER, 1965

Number of office premises found where lighting, either natural or artificial in lumens per square foot measured at the working place (or working plane) where work is done was :

(a) less than 5 lumens	1
(b) more than 5 but less than 10 lumens	6
(c) more than 10 but less than 15 lumens	17
(d) more than 15 but less than 25 lumens	42
(e) more than 25 lumens	79
	<hr/> 145

The figure of 145 refers to individual rooms in 37 office premises.

November was a particularly dark month and artificial lighting was in use for long periods during daylight hours.

STANDARDS OF LIGHTING IN LUMENS PER SQUARE FOOT.

									Working areas of shops	Selling areas of shops
(a)	less than 5	..	..	..	..	..	..	..	31	6
(b)	more than 5 but less than 10	..	..	..	..	..	..	..	83	16
(c)	more than 10 but less than 15		..	..	..	..	..	..	42	26
(d)	more than 15 but less than 20	..	..	..	..	..	..	..	66	69
(e)	more than 25	..	..	..	..	..	..	..	82	128
									—	—
									304	245
									—	—

(213 shop premises inspected contained 304 working areas and 245 selling areas).

(a) REGISTRATIONS AND GENERAL INSPECTIONS.

Class of premises	Number of premises registered during the year	Total number of registered premises at end of year	Number of registered premises receiving a general inspection during the year
Offices	25	211	198
Retail shops	128	548	513
Wholesale shops, warehouses ..	4	29	20
Catering establishments open to the public, canteens ..	15	79	84
Fuel storage depots	—	1	—

(b) NUMBER OF VISITS OF ALL KINDS BY INSPECTORS TO REGISTERED PREMISES.

2,015

(c) ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE.

Class of workplace	Numer of persons employed
Offices	2,374
Retail shops	3,160
Wholesale departments, warehouses ..	299
Catering establishments open to the public	582
Canteens	46
Fuel storage depots	1
Total	6,462
Total Males	2,088
Total Females	4,374

(d) EXEMPTIONS.

Class of premises	Granted during year	Failed during year
PART I—Space	Nil	
PART II—Temperature	Nil	
PART III—Sanitary Conveniences		
Retail shops		1
PART IV—Washing Facilities		
Retail shops		2
Wholesale shops, warehouses		1

MILK

(a) SPECIAL DESIGNATIONS.

All milk sold in Rotherham is now either "Pasteurised," "Sterilised" or "Untreated." Processing is done in plants situated in other districts and the bulk of the milk consumed is produced in other areas. The number of cases of dirty milk bottles gave rise to some concern and prosecutions were undertaken in six cases. In five cases in the West Riding fines of £10 for each offence were imposed. In the other case, heard in Sheffield, a fine of £20 was imposed.

The following licences, which are valid until the year ending 1970 were issued in connection with the Milk (Special Designation) Regulations, 1963:

DEALERS' LICENCES.

Untreated	..	..	..	..	..	..	22
Pasteurised	..	..	..	..	..	..	107
Sterilised	..	..	..	..	..	..	199

(b) BACTERIOLOGICAL EXAMINATION.

88 samples of milk were taken for examination as to cleanliness and efficacy of heat treatment, with the following results:

						Samples		
						Tested	Passed	Failed
Untreated	..	..	..	..	..	3	3	—
Tuberculin Tested Pasteurised (Homogenised)						8	8	—
Pasteurised	..	..	..	..	..	46	43	3
Sterilised	..	..	..	..	..	27	27	—

There are only four small milk producers in the County Borough two of whom farm-bottle. No samples were taken at the farms during the year.

ICE CREAM

51 samples of ice cream were submitted for bacteriological examination with the following results:

Satisfactory		Unsatisfactory	
Grade 1	Grade 2	Grade 3	Grade 4
42	7	2	—

ICED LOLLIES

4 samples of iced lollies submitted for bacteriological examination proved to be satisfactory.

SHELLFISH

All consignments of mussels inspected during the year had been submitted to an approved cleansing process.

FOOD PREMISES

The following list of premises and record of visits gives a picture of the types of food trades in the district and the time given to inspection:

UNREGISTERED PREMISES

Type	Number	Inspections
Bakehouses	35	31
Cafes	31	54
Clubs and licensed premises	133	73
Confectioners	70	54
Factory canteens	44	35
Fish friers	58	32
Fishmongers	30	26
Fruiterers and Greengrocers	129	35
Grocers	289	228
Mineral water factories	2	-
School kitchens	21	3
Sweet factories	1	-
Tripe purveyors	3	-

REGISTERED PREMISES

Type	Number	Inspections
Butchers	104	132
Food preparing premises	73	57
Hawkers	14	3
Ice cream factories	2	3
Ice cream shops or stores	267	275
Pickle factories	1	-
Tripe boilers	1	-
Dairies and milk distributors	292	261

Improvements made in food premises during the year :

Additional wash basins provided	13
Hand washing notices displayed	11
Hot water supplies provided	20
Premises cleansed or repaired	84
Accommodation for clothing provided	6
Name and address of food stalls	2
Provision of suitable waste storage	7
First Aid materials provided	30
Pre-packed foods only to be sold	1

FOOD POISONING

No major outbreak of food poisoning arose during the year. 7 sporadic cases were found all due to *S. Typhi murium*. Several paratyphoid carriers were found as a result of notification of people at risk due to an infected milk supply at a coastal town. They were isolated and kept under observation until free from infection.

MEAT

The following details of animals slaughtered at the public abattoir were supplied by the Markets Superintendent:

Cattle	Cows	Calves	Sheep	Pigs	Total
7,089	838	46	22,900	12,494	43,367

The estimated weight of fresh killed meat and offals condemned at the public abattoir during the year was:

All causes	..	..	..	..	..	20 tons 13 cwt.
Tuberculosis only	..	..	..	..	..	2 tons 5 cwt.

The percentages of animals found to be diseased are given in the following table:

				Cattle excluding cows	Cows	Calves	Sheep	Pigs
Number killed Number inspected	}	..	..	7,089	838	46	22,900	12,494
All diseases except tuberculosis and cysticerci :								
Whole carcasses condemned	..	..		2	3	9	37	20
Carcasses of which some part or organ was condemned	..	..	..	1,202	268	—	609	490
Percentage affected	..	..	..	16.98	32.34	19.56	2.82	4.10
Tuberculosis only :								
Whole carcasses condemned	..	..		—	1	—	—	—
Carcasses of which some part or organ was condemned	..	..	..	31	—	—	—	275
Percentage affected	..	..	..	0.43	—	—	—	2.20
Cysticercosis :								
Carcasses of which some part or organ was condemned	..	..	..	64	1	—	—	—
Carcasses submitted to treatment by refrigeration	..	..	..	64	1	—	—	—
Generalised and totally condemned	..			—	—	—	—	—
Percentage affected	..	..	..	.90	.10	—	—	—

All animals slaughtered at the private slaughterhouse were examined as follows:

Number killed Number inspected }	303	-	-	1,134	-
All diseases except tuberculosis and cysticerci :					
Whole carcasses condemned	-	-	-	-	-
Carcasses of which some part or organ was condemned	17	-	-	19	-
Percentage affected	5.6	-	-	1.6	-
Tuberculosis only :					
Whole carcasses condemned	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	-
Percentage affected	-	-	-	-	-

	Cattle			Cows	Calves	Sheep	Pigs
	excluding cows						
Cysticercosis :							
Carcases of which some part or organ							
was condemned	-	-	-	-
Carcases submitted to treatment by							
refrigeration	-	-	-	-
Percentage effected	-	-	-	-

The estimated weight of meat condemned was:

All causes	2 cwts. 7 lbs.
Tuberculosis only	—

MERCHANDISE MARKS ACT, 1926

2 visits were made in connection with the marking of food. The Marking Orders refer to the correct labelling of such food as apples, tomatoes, currants, ham, meat, dead poultry, margarine, malt products, frozen and chilled salmon and sea trout and honey.

SAMPLING OF FOOD AND DRUGS

271 samples of food and drugs were submitted to the Public Analyst for examination.

Details of all samples taken are given in the following table:

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
1	Almond flavour	-	1	-	-
1	Almond marzipan	-	1	-	-
1	Aspirin tablets	-	1	-	-
2	Bacon	-	2	-	-
1	Baking powder	-	1	-	-
1	Black beer	-	-	-	1
2	Blackcurrant drink	-	2	-	-
1	Blancmange powder	-	1	-	-
2	Butter	-	2	-	-
1	Butter scotch	-	1	-	-
1	Castor oil	-	1	-	-
1	Cheese spread	-	1	-	-
1	Children's cooling powders	-	1	-	-
1	Chocolate orange fingers	-	1	-	-
1	Chocolate rolls	-	1	-	-
1	Chopped chicken in jelly	-	-	-	1
1	Christmas pudding	-	1	-	-
1	Cider apple vinegar	-	1	-	-
1	Cleansing herbs	-	1	-	-
1	Cocktail cherries	-	1	-	-
1	Coffee (instant)	-	1	-	-
1	Coffee (pure)	-	1	-	-
1	Condensed skimmed milk sweetened	-	1	-	-
1	Cornflour	-	1	-	-
1	Cream (fresh double)	-	1	-	-
1	Creamery butter	-	1	-	-

No.	Nature of sample	Genuine		Not reported as genuine	
		Formal	Informal	Formal	Informal
1	Creamed rice	-	1	-	-
1	Cream of tartar	-	1	-	-
2	Cream of tomato soup ..	-	2	-	-
1	Currants	-	1	-	-
2	Curry powder	-	2	-	-
1	Custard powder	-	1	-	-
1	Cut mixed peel	-	1	-	-
1	Dairy cream	-	1	-	-
1	Damson jam	-	1	-	-
1	Dates	-	1	-	-
2	Dessicated coconut	-	2	-	-
1	Fish cakes	-	1	-	-
1	Friars balsam	-	1	-	-
1	Full cream evaporated milk ..	-	1	-	-
1	Fruit sauce	-	1	-	-
1	Ginger cordial (non-alcoholic)	-	1	-	-
1	Glace cherries	-	1	-	-
1	Glucose fruit flavoured drops	-	1	-	-
1	Glycerine	-	1	-	-
1	Golden syrup	-	1	-	-
1	Granulated gelatine	-	1	-	-
1	Ground almonds	-	1	-	-
1	Ground cinnamon	-	1	-	-
1	Ground ginger	-	1	-	-
1	Gums	-	1	-	-
1	Honey	-	1	-	-
56	Ice cream	-	56	-	-
2	Ice cream lollies	-	2	-	-
3	Iced lollies	-	3	-	-
1	Icing sugar	-	1	-	-
1	Indian tonic water	-	1	-	-
1	Jellied beetroot	-	1	-	-
1	Lard	-	1	-	-
1	Lemonade powder	-	1	-	-
2	Lemon curd	-	2	-	-
1	Lemon flavour	-	1	-	-
2	Lemon juice	-	2	-	-
2	Liquid paraffin	-	2	-	-
1	Madeira cake mix	-	1	-	-
1	Malt vinegar	-	1	-	-
2	Margarine	-	2	-	-
1	Marmalade	-	1	-	-
77	Milk	76	-	1	-
1	Milk chocolate tea cakes ..	-	1	-	-
1	Minced chicken in jelly ..	-	1	-	-
1	Granulated sugar	-	1	-	-
1	Mincemeat	-	1	-	-
1	Mint in vinegar	-	1	-	-
1	Mustard powder	-	1	-	-

No.	Nature of sample		Genuine		Not reported as genuine	
			Formal	Informal	Formal	Informal
1	Mustard (ready mixed)	..	-	1	-	-
1	Nutmegs	.. ..	-	1	-	-
1	Oil of eucalyptus	.. ..	-	1	-	-
1	Olive oil	.. ..	-	1	-	-
1	Orange barley water	.. ..	-	1	-	-
1	Orange squash	.. ..	-	1	-	-
1	Oxtail soup	.. ..	-	1	-	-
1	Peanut butter	.. ..	-	1	-	-
1	Pearl barley	.. ..	-	1	-	-
1	Parrish's chemical food	..	-	1	-	-
1	Pineapple juice	.. ..	-	1	-	-
1	Pineapple rings in syrup	..	-	1	-	-
1	Plain white flour	.. ..	-	1	-	-
1	Pork dripping	.. ..	-	1	-	-
1	Potato crisps	.. ..	-	1	-	-
1	Powdered nutmeg	.. ..	-	1	-	-
1	Prunes	.. ..	-	1	-	-
1	Pure corn oil	.. ..	-	1	-	-
1	Pure maize oil	.. ..	-	1	-	-
1	Quick dried peas	.. ..	-	1	-	-
1	Rice	.. ..	-	1	-	-
1	Rose hip syrup	.. ..	-	1	-	-
1	Saccharin tablets	.. ..	-	1	-	-
1	Salad cream	.. ..	-	1	-	-
1	Salmon spread	.. ..	-	1	-	-
1	Sausage (beef)	.. ..	-	1	-	-
1	Seedless raisins	.. ..	-	1	-	-
1	Self raising flour	.. ..	-	1	-	-
1	Senna pods	.. ..	-	1	-	-
1	Shredded beef suet	.. ..	-	-	-	1
1	Soda mints	.. ..	-	1	-	-
1	Spanish juice	.. ..	-	1	-	-
1	Spirit of sal volatile	.. ..	-	1	-	-
2	Sponge puddings	.. ..	-	2	-	-
1	Sultanas	.. ..	-	1	-	-
1	Syrup of figs	.. ..	-	1	-	-
1	Table jelly	.. ..	-	1	-	-
1	Table salt	.. ..	-	1	-	-
2	Tea	.. ..	-	2	-	-
1	Tinned pork and ham	.. ..	-	1	-	-
1	Tomatoes (tinned)	.. ..	-	1	-	-
2	Tomato juice	.. ..	-	2	-	-
1	Tomato ketchup	.. ..	-	1	-	-
1	Tomato soup powder	.. ..	-	1	-	-
2	White pepper	.. ..	-	2	-	-
1	Yeast	.. ..	-	1	-	-
1	Yoghurt	.. ..	-	1	-	-
1	Zinc ointment	.. ..	-	1	-	-
<hr/>			<hr/>		<hr/>	
271			76	191	1	3

FERTILISERS AND FEEDING STUFFS ACT, 1926

6 samples of fertilisers and 6 of feeding stuffs were taken for analysis. All were satisfactory, with the exception of one sample of feeding stuffs which varied from the statutory statement.

OTHER FOOD

In the following table details are given of food surrendered.

	Number	Lb.		Number	Lb.
Bacon	3 pkts.		Legs of mutton ..		71
Blanched almonds ..	2 bags	—	Lemon sole fillets ..	—	17½
Bottles	1	—	Mackerel	—	84
Cheese parings ..	—	161	Meat pies	13	—
Chicken	36	—	Packets	471	—
Cooked meats ..	—	203	Pears	20 boxes	—
Croquettes	12 doz.	—	Pork	—	49
Custard powder ..	2 drums, 7 pkts.	—	Pork pies	16	—
Dried fruit	—	45	Potatoe cakes ..	24	—
Frozen foods ..	322 pkts.	—	Salt	3 drums	—
Frozen kidneys ..	—	25	Sausage	—	156½
Ham	—	2½	Sugar	—	52
Jars	23	—	Tins	2,381	—
			Tomatoes	—	720

CLEAN AIR

718 visits were made in connection with atmospheric pollution including smoke observations at factories and inspections relating to smoke control areas. One new smoke control area was declared and four more were in course of preparation at the end of the year.

The new arrangements for payment of grant ensure that householders have a free choice of type of appliance and, as the amount of grant payable is accordingly increased, there is now no reason why anyone should be dissatisfied with the choice of appliance and assistance available.

Apart from the question of cost, it is difficult to see any valid reason for delay in the implementation of smoke control in the black areas. There is a marked trend away from the open fire towards central heating and switch-on appliances in all areas and it is only necessary to look at the new houses being built to realise what people now want. Smoke control is simply accelerating a demand which is already there for more comfort and convenience.

A source of great satisfaction is that people living in smoke control areas are now commenting that their neighbourhood is cleaner than it was. This realisation can be expected to grow as smoke control is extended.

Industrial smoke does not now represent a problem except in a handful of cases, all of which are under the control of the Alkali Inspectorate. This central control does not mean that the local authority has no interest in these cases and, in fact, a great deal of time and effort has been given to these problems.

One fact clearly emerges from our experience in large scale gas cleaning plants. The fact that large capital sums are spent on dust arrestment devices does not automatically ensure that no further nuisance arises. At the local power station, where new plant was fitted eighteen months ago, extensive damage due to abrasion was found after our deposit gauge, which is sited to monitor emissions from the power station, began to show substantial increases in solid deposits. More attention is now being given to maintenance on a routine basis, and it is hoped that no further nuisance will arise from this source.

Fume nuisance from the electric arc furnaces of a local steelworks has been a source of great concern to this authority and our Sheffield neighbours. Here again, the problem of maintenance of plant has been found to be much greater than was anticipated when the plant was commissioned. Other difficulties relating to temperatures much higher than expected are gradually being solved and further improvement can be expected during the coming year.

During the winter months a fluorine analysis of deposit gauge material is being carried out at the request of the Chief Alkali Inspector and we are also, in co-operation with the Warren Spring Laboratory, taking samples of air by the volumetric apparatus installed at Greasbrough Road for gaseous and particulate fluorine estimation.

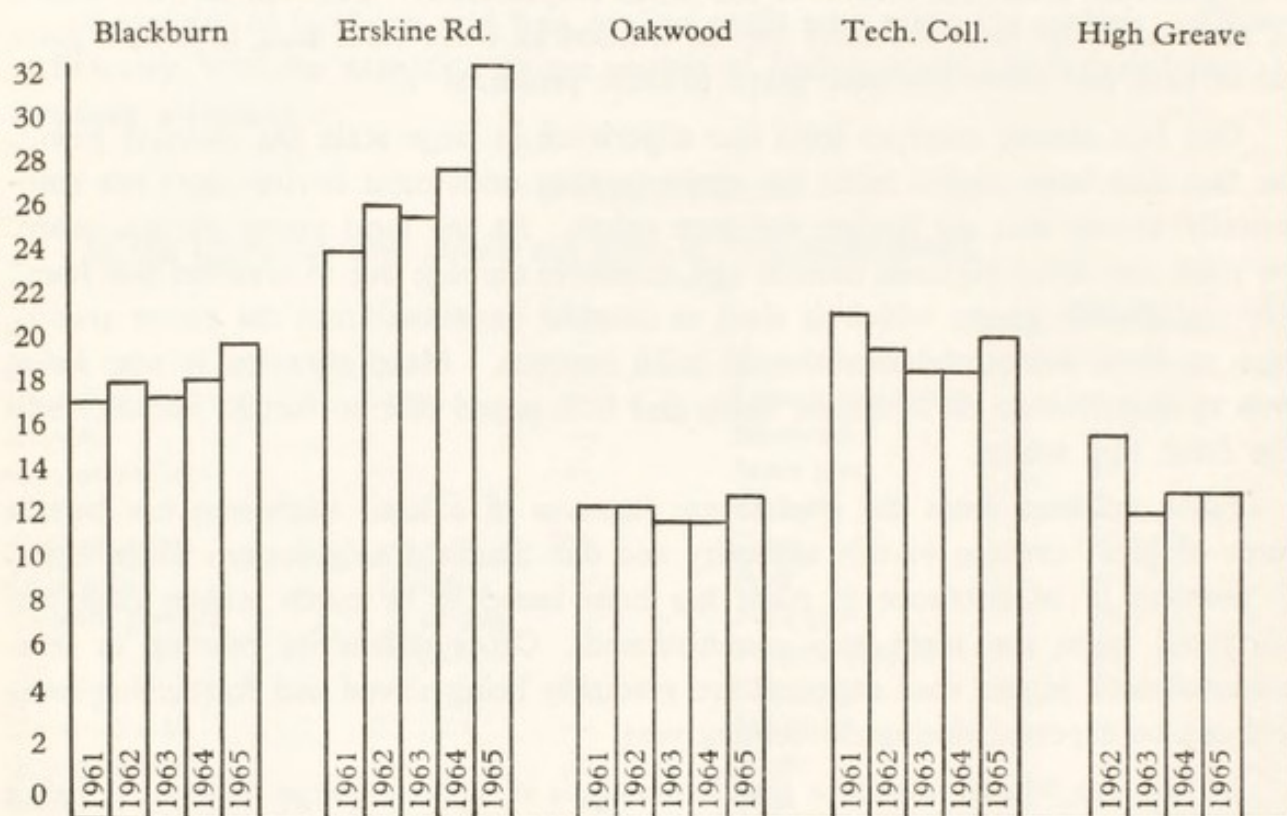
Details of the yearly results for deposit and sulphur gauges are to be found on page 36.

CLERICAL WORK

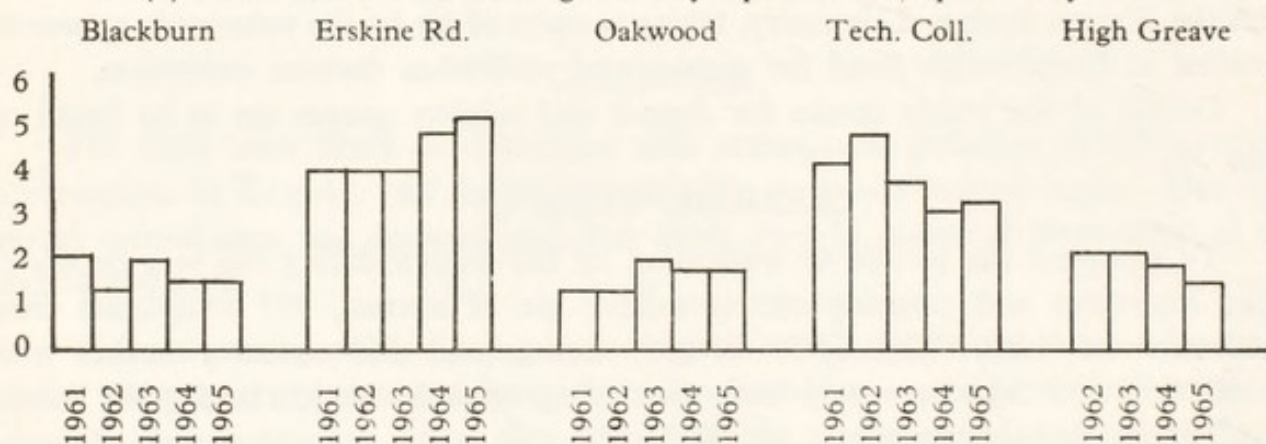
To complete the picture of work done by the section during the year details of office interviews and outgoing correspondence are of interest, 997 complaints from residents were dealt with. 1,075 informal notices and 144 statutory notices were served, and 455 licences were issued. Including reminder notices and other letters, 4,197 postal packages were sent out during the year.

1. STANDARD DEPOSIT GAUGES.

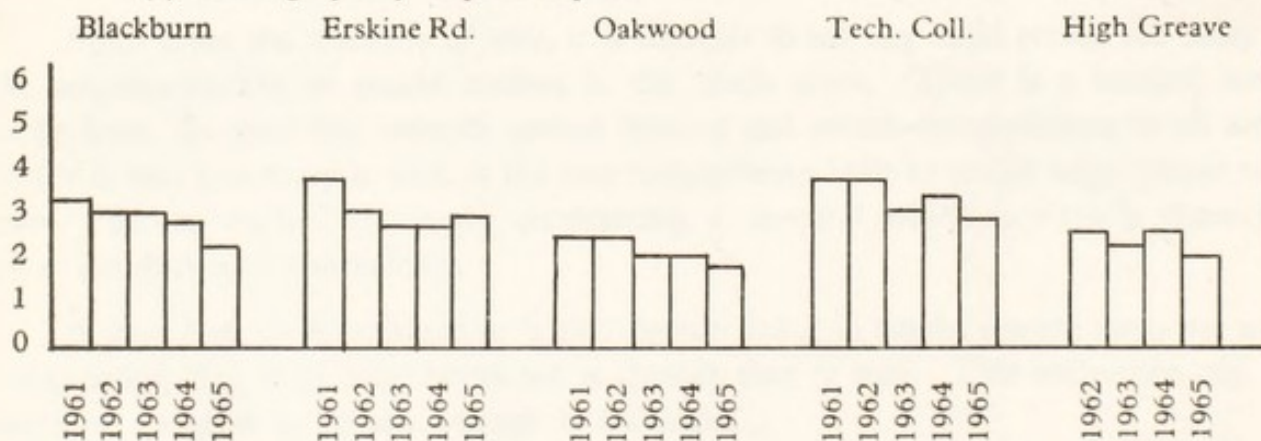
(a) Average monthly deposit for years 1961-1965.



(b) Iron oxide content of average monthly deposit in tons/sq. mile for years 1961-1965



(c) Average yearly sulphur deposit.



**SUMMARY OF PUBLIC HEALTH INSPECTORS' VISITS AND NOTICES
SERVED DURING THE YEAR ENDING 1965.**

Disease of animals	5	Number of Offices, Shops and Railway	
Merchandise Marks Act	2	premises notices served	828
Water supply	13	Number of Offices, Shops and Railway	
Drainage	1,669	premises notices complied with	441
Fried fish shops	32	Re-visits to houses inspected under	
Houses let in lodgings	68	Public Health Acts	1,683
Tents, vans and sheds	72	Number of houses inspected under	
Canal boats	1	Housing Acts	105
Factories	386	Re-visits to above houses	28
Workshops	20	Overcrowding re-visits	3
Drain tests	276	Verminous premises	228
Bakehouses	18	Re-visits to verminous premises	6
Poisons	63	Miscellaneous housing visits	290
Licensed premises	42	Infectious disease inquiries	165
Interviews	1,128	Miscellaneous infectious disease visits	322
Pet animals	6	Visits to slaughterhouses	273
Rats and mice	127	Visits to:	
Atmospheric pollution	718	Butchers	132
Offices, shops and Railway premises ..	930	Canteens	35
Re-visits offices, shops and railway		Dairies and milk distributors	261
premises	1,085	Fishmongers and poulterers	26
Miscellaneous sanitary visits	2,602	Food preparing premises	57
Hairdressers	39	Grocers	228
Matters to other departments	154	Ice cream premises	35
Number of houses inspected under		Restaurants	54
Public Health Acts	681	Street vendors and hawkers carts	3
Schools (hygiene)	3	Greengrocers and fruiterers	35
Sweetshops	54	Number of nuisances found	1,507
Fairground	17	Number of nuisances abated	962
Licensed premises	73	Number of verbal notices served	350
Bakeries (hygiene)	31	Number of verbal notices complied	
Visits in connection with sampling:		with	272
Milk—bacteriological	88	Number of informal notices served	725
Ice cream	51	Number of informal notices complied	
Food and drugs samples	271	with	493
Fertilisers and feeding stuffs	9	Number of statutory notices served	144
Water samples	70	Number of statutory notices complied	
Miscellaneous food visits	190	with	130

1. STANDARD DEPOSIT GAUGES

(a) Water—insoluble deposit in tons per square mile per month.

	Blackburn		Erskine Road		Oakwood		Technical College		High Greave	
Month	1964	1965	1964	1965	1964	1965	1964	1965	1964	1965
Jan	9.82	8.79	15.78	21.95	6.30	4.73	9.19	11.04	6.98	4.74
Feb.	—	4.35	12.55	11.20	4.73	5.13	8.20	15.65	7.51	6.06
March	11.94	13.24	16.96	16.78	7.48	7.44	12.56	12.81	6.25	6.12
April	8.86	10.92	21.33	27.54	6.20	7.11	8.55	19.87	7.08	10.40
May	9.17	8.52	15.29	18.60	6.43	6.03	12.21	11.75	11.46	6.16
June	8.11	8.48	28.24	7.63	8.55	4.52	17.32	19.27	6.91	5.23
July	6.77	5.75	18.48	45.22	6.91	8.15	11.00	14.20	7.31	6.25
August	8.93	6.06	14.36	39.29	6.57	6.00	10.57	3.80	6.06	4.97
Sept.	14.13	7.46	23.47	23.24	7.04	6.81	10.86	13.48	5.50	6.62
October	11.53	11.36	23.72	17.09	5.26	2.71	9.19	5.43	8.30	3.26
Nov.	9.38	9.17	25.56	10.12	4.86	3.92	12.42	10.58	6.52	4.84
Dec.	10.44	14.34	21.99	30.21	6.57	4.26	13.24	6.74	5.60	4.87
Monthly Average	9.91	9.36	19.81	22.40	6.40	5.56	11.27	12.05	7.12	5.79

(b) Water—soluble deposit in tons per square mile per month.

	Blackburn		Erskine Road		Oakwood		Technical College		High Greave	
Month	1964	1965	1964	1965	1964	1965	1964	1965	1964	1965
Jan.	5.61	17.90	8.08	13.35	4.09	9.32	5.57	11.85	4.74	9.18
Feb.	—	5.00	7.32	6.62	5.57	1.91	5.71	5.39	5.33	4.71
March	16.73	9.92	11.10	9.19	7.71	6.87	10.40	8.23	9.38	7.11
April	5.85	7.56	7.84	9.26	4.53	5.53	5.47	6.18	4.84	5.27
May	3.56	6.78	5.58	9.48	2.15	6.54	2.91	6.92	3.56	6.22
June	10.88	9.10	9.16	10.68	6.27	6.77	9.83	9.76	6.81	8.36
July	5.10	7.39	7.77	9.16	6.07	5.83	6.57	4.93	4.12	6.16
August	6.06	7.94	6.31	7.01	4.46	4.83	3.73	3.05	4.74	4.97
Sept.	4.93	12.29	7.28	15.33	4.46	12.20	5.71	13.24	5.07	10.67
October	8.49	8.69	8.32	8.60	4.69	4.96	7.03	6.49	6.02	4.35
Nov.	8.62	17.79	10.27	18.66	3.69	12.77	6.99	11.85	8.46	8.63
Dec.	14.58	13.38	9.85	12.45	8.93	8.15	10.40	9.72	7.14	8.43
Monthly Average	8.21	10.31	8.24	10.81	7.07	7.14	6.69	8.13	5.83	7.00

(c) Total deposit in tons per square mile per month.

	Blackburn		Erskine Road		Oakwood		Technical College		High Greave	
Month	1964	1965	1964	1965	1964	1965	1964	1965	1964	1965
Jan.	15.43	26.69	23.86	35.30	10.39	14.05	14.76	22.89	11.72	13.93
Feb.	—	9.34	19.87	17.83	10.29	7.04	13.91	21.05	12.84	10.76
March	26.76	23.17	28.06	25.98	15.19	14.32	22.96	21.05	15.64	13.23
April	14.71	18.48	29.17	36.80	10.73	12.64	14.02	26.06	11.92	15.67
May	12.73	15.30	20.88	28.09	8.58	12.57	15.12	18.67	15.01	12.38
June	18.99	17.59	37.40	18.31	14.82	11.30	27.15	29.03	13.73	13.60
July	6.77	13.14	26.25	54.38	12.98	13.89	17.57	19.13	11.42	12.41
August	14.99	14.00	20.66	46.30	11.03	10.83	14.30	6.85	10.80	9.94
Sept.	19.06	19.74	30.76	38.57	11.50	19.01	16.57	26.72	10.57	17.28
October	20.02	20.05	32.04	25.70	9.96	7.68	16.22	11.92	14.32	7.60
Nov.	18.00	26.97	35.82	28.78	8.55	16.70	19.41	22.43	14.98	13.46
Dec.	25.01	27.72	31.84	42.66	15.49	12.41	23.64	16.47	12.74	13.30
Monthly Average	17.49	19.34	28.05	33.22	11.62	12.70	17.96	20.18	12.97	12.79

2. SULPHUR DETERMINATION (LEAD PEROXIDE CANDLE)

	Blackburn		Erskine Road		Oakwood		Technical College		High Greave	
Month	1964	1965	1964	1965	1964	1965	1964	1965	1964	1965
Jan.	3.41	3.29	3.61	5.71	2.75	2.53	4.48	4.07	3.33	3.30
Feb.	3.23	2.36	2.82	2.60	2.44	2.26	3.31	4.15	2.85	2.78
March	2.23	3.16	1.70	2.95	1.77	1.76	2.91	3.02	1.90	2.28
April	2.65	2.29	2.75	2.61	1.85	1.91	3.24	2.56	2.74	2.24
May	2.15	2.27	3.40	2.23	1.46	1.51	3.08	2.29	2.10	2.27
June	1.97	1.72	2.40	2.29	1.25	1.16	2.22	2.13	1.78	1.31
July	1.79	1.52	2.07	2.10	1.13	1.13	1.88	1.77	1.81	1.61
August	1.50	1.49	2.08	1.75	1.22	1.05	1.95	1.63	1.52	1.21
Sept.	2.19	1.84	2.88	2.59	1.59	1.52	2.72	2.73	1.75	2.09
October	2.30	2.43	1.89	2.33	1.93	1.30	3.69	2.38	2.06	1.86
Nov.	2.78	1.07	4.02	3.17	1.92	2.02	4.16	3.55	5.10	2.58
Dec.	3.08	3.40	—	3.77	2.16	2.23	4.50	2.73	3.62	3.09
Monthly Average	2.44	2.23	2.46	2.84	1.78	1.69	3.17	2.75	2.54	2.21

Milligrammes of SO₃/day collected by 100 square centimetres.

AGED AND INFIRM PERSONS

No application was made under Section 1 (3) of the National Assistance (Amendment) Act, 1951, for a removal order during the year.

PUBLIC MORTUARY

	1964	1965
Bodies received (including 83 from outside the County Borough)	286	265
Post-mortems	279	250
Total number of days bodies held in mortuary ..	1,186	1,091

SUMMARY OF ADMISSIONS—1965

Brought in by :

Borough Ambulance	—from home	..	..	..	..	37
	„ street	..	..	..	..	30
	„ works	..	..	..	..	6
	„ railway	..	..	..	..	1
West Riding Ambulance	— „ home	..	..	..	..	3
	„ street	..	..	..	..	7
	„ works	..	..	..	..	2
Private Ambulance	—	..	..	..	..	1
Mortuary vehicle	— „ home	..	..	..	..	68
	„ hospital	..	..	..	..	108
	„ river	..	..	..	..	1
	„ street	..	..	..	..	1
						<u>265</u>

MONTHLY ADMISSIONS

January	..	..	23	July	..	..	17
February	..	..	24	August	..	..	17
March	..	..	23	September	..	..	19
April	..	..	32	October	..	..	13
May	..	..	18	November	..	..	32
June	..	..	18	December	..	..	29
							<hr/> 265

CAUSES OF DEATH.

	County Borough	Outside County Borough	Total
Medical and surgical conditions ..	132	56	188
Murder	3	—	3
Suicide	13	2	15
Works accidents	1	2	3
Road accidents	9	13	22
Home accidents	18	10	28
Other accidents	6	—	6
			<u>182</u> <u>83</u> <u>265</u>

Details of suicides in the County Borough.

Cause of Death						Sex	Age
Coal gas poisoning	..	..	..	..	..	F	74
"	..	..	..	..	..	F	67
"	..	..	..	..	..	F	38
"	..	..	..	..	..	M	65
"	..	..	..	..	..	M	63
"	..	..	..	..	..	M	63
"	..	..	..	..	..	M	60
"	..	..	..	..	..	M	57
"	..	..	..	..	..	M	30
"	..	..	..	..	..	M	26
Barbiturates	..	..	..	..	..	M	61
"	..	..	..	..	..	M	46
Railway	..	..	..	..	..	M	45

INFECTIOUS DISEASES AND TUBERCULOSIS

The prevalence of the infectious diseases notifiable in the county borough is shown in the following table:—

Disease	1961	1962	1963	1964	1965
Acute encephalitis—Infective	—	—	—	—	—
Post-infectious	—	—	—	—	—
Acute poliomyelitis—Paralytic	1	—	—	—	—
Non-paralytic	—	—	—	—	—
Diphtheria	—	—	—	—	—
Dysentery	64	60	37	43	112
Encephalitis lethargica	—	—	—	—	—
Erysipelas	5	6	2	2	8
Food poisoning	4	1	14	3	7
Malaria	—	—	—	—	1
Measles	1019	27	2112	720	741
Meningococcal infection	—	2	1	1	1
Ophthalmia neonatorum	—	—	—	—	—
Pemphigus neonatorum	—	—	—	—	—
Pneumonia	26	25	18	27	17
Puerperal pyrexia	57	27	40	33	37
Relapsing fever	—	—	—	—	—
Scarlet fever	72	69	124	95	111
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	—	—	—	—	4
Typhus fever	—	—	—	—	—
Whooping cough	13	2	191	47	77
Tuberculosis—respiratory	22	27	27	23	29
other forms	6	7	5	5	3
Totals	1289	253	2571	999	1148

In the following table details are given of the age and ward distribution of the notifications received, together with the numbers of cases removed to hospital and the deaths occurring :

Notifiable disease	No. of cases notified													Total cases notified in each ward of the borough										Total cases removed to hospital	Total deaths	
	At ages—years																									
	At all ages	Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 years and over													Age Unknown
Acute encephalitis—infective
Post infectious
Acute poliomyelitis—paralytic
Non-paralytic
Diphtheria ..	112	7	4	9	9	5	48	9	2	12	3	2	2	..	10	4	10	4	17	10	..	33	10	11	..	
Dysentery ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Encephalitis lethargica ..	8	..	..	..	..	..	1	..	1	..	2	4	..	..	..	..	..	..	1	1	2	1	1	6	..
Erysipelas ..	7	1	..	..	..	..	1	..	..	1	1	2	1	..	..	1	1	1	1	..	1	1	1	1	..
Food poisoning ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Malaria ..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles ..	741	39	105	113	113	106	261	2	2	..	..	1	..	..	18	21	119	46	57	85	59	134	55	11	..
Meningococcal infection ..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..
Ophthalmia neonatorum ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pemphigus neonatorum ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia ..	17	..	..	..	..	1	1	1	2	1	1	3	7	..	4	2	1	2	..	2	2	1	4	22	..
Puerperal pyrexia ..	37	..	..	..	..	..	..	..	2	28	7	..	..	..	2	1	1	1	3	1	1	4	5	34	..
Relapsing fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet fever ..	111	..	5	5	10	14	62	12	..	2	1	..	..	..	8	14	6	11	9	3	3	16	5	..	..
Smallpox ..	4	..	..	..	..	1	..	1	1	..	..	1	..	..	..	..	..	..	..	..	1	1	..	..	..
Typhoid and paratyphoid fevers ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhus fever ..	77	15	10	6	13	11	21	..	..	..	3	1	4	..	1	5	1	9	2	10	7	18	1	4	..
Whooping cough ..	20	..	..	..	..	..	..	2	..	4	2	9	..	..	1	2	..	..	4	1	3	1	5	9	..
Tuberculosis : respiratory, males ..	9	..	..	..	..	..	..	..	..	3	2	1	1	..	..	..	..	..	3	1	1	..	..	1	..
.. .. females ..	3	..	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	1	1	..	..	..	3	..
.. .. other forms, males ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	1148	62	124	134	145	138	395	27	10	52	22	24	15	..	44	60	34	156	87	98	114	81	209	100	84	2

The following table gives details of the notifications received monthly throughout the year: —

Notifiable disease	January	February	March	April	May	June	July	August	September	October	November	December	Total
Acute encephalitis—infective ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Post infectious ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis—paralytic ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-paralytic ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	9	20	43	19	7	8	3	3	-	-	-	-	112
Encephalitis lethargica ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	1	-	1	-	-	-	-	1	2	1	1	1	8
Food poisoning	1	-	-	1	-	-	-	-	-	5	-	-	7
Malaria	-	-	-	-	-	-	-	-	-	1	-	-	1
Measles	74	177	151	93	35	20	34	22	7	17	76	35	741
Meningococcal infection ..	-	-	-	-	-	-	-	-	-	-	1	-	1
Ophthalmia neonatorum ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Pemphigus neonatorum ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia	-	3	2	3	2	-	-	-	1	1	2	3	17
Puerperal pyrexia	6	3	-	2	2	1	4	5	4	3	5	2	37
Relapsing fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet fever	11	20	21	11	10	8	12	3	1	6	1	7	111
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	2	-	2	-	-	4
Typhus fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	10	7	7	12	10	6	2	9	6	4	-	4	77
Tuberculosis: respiratory, males	6	1	3	1	-	2	2	-	1	1	3	1	21
females ..	7	-	-	-	-	-	-	-	-	-	1	-	8
other forms, males	1	-	-	-	-	-	-	-	-	2	-	-	3
females ..	-	-	-	-	-	-	-	-	-	-	-	-	-
Totals	126	231	227	142	67	45	57	45	22	43	90	53	1148

During the year 84 cases of notifiable disease were notified from or removed to hospitals in the district, and the following table gives the distribution:

Disease	Infectious Diseases Hospitals			Other Hospitals			Total
	Lodge Moor Sheffield	Doncaster Isolation Hospital	Kendray Hospital, Barnsley	Moorgate General Hospital	Rotherham Hospital	Other Hospitals	
Dysentery	11	—	—	—	—	—	11
Food Poisoning	6	—	—	—	—	—	6
Malaria	1	—	—	—	—	—	1
Measles	10	—	—	—	1	—	11
Meningococcal Infection	—	—	—	—	—	—	—
Paratyphoid Fever	1	—	—	—	—	—	1
Pneumonia	—	—	—	2	1	—	3
Puerperal Pyrexia	—	—	—	34	—	—	34
Scarlet Fever	—	—	—	—	—	—	—
Tuberculosis	1	—	—	—	—	12	13
Whooping Cough	4	—	—	—	—	—	4
Total ..	34	—	—	36	2	12	84

In addition to these cases, 62 patients were admitted to Lodge Moor Hospital, Sheffield, for observation and were ultimately diagnosed as follows:

Admitted for observation for	Final Diagnosis																	TOTAL
	Aneurysm	Broncho-Pneumonia	Cardiac Failure	Cerebral Neoplasm	Cong. Cardiac Failure	Drug Rash	Enteritis	Feeding Difficulty	Gastritis	Gastro-Enteritis	Glandular Fever	Headache	Infectious Hepatitis	Lobar Pneumonia	Non-specific Diarrhoea	Non-specific Diarrhoea and Gastro Enteritis	Non-specific Diarrhoea and Pneumonia	
Cardiac and Bronchitis	—	—	1	—	—	—	2	—	—	—	—	—	—	—	4	1	—	1
Diarrhoea and Vomiting	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Enteritis	—	—	—	—	1	—	—	—	—	2	—	—	—	—	2	—	—	5
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Gastro Enteritis	—	1	—	—	—	—	6	1	1	5	—	—	—	—	10	—	—	26
Glandular Fever	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	4
Infective Hepatitis	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	2
Jaundice	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Measles	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Meningitis	1	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	6
Pneumonia	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
P.U.O.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Quinsy	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Renal Colitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Virus Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Whooping Cough and Bronchitis	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Total ..	1	3	1	1	1	1	8	1	1	7	2	1	3	1	16	1	1	62

In amplification of the foregoing tables the following observations are made on the number of notifiable diseases.

There were no cases of diphtheria or acute poliomyelitis notified during the year by general medical practitioners.

Of the 112 cases of dysentery notified, 11 were treated in hospital.

8 cases of erysipelas were reported, all of whom remained at home.

741 cases of measles were reported during the year and 11 cases were treated in hospital. No deaths occurred from this disease.

77 cases of whooping cough were notified, and 4 were treated in hospital.

37 notifications of puerperal pyrexia were received, 34 of which were reported from hospital.

111 notifications of scarlet fever were received. No deaths occurred.

7 notifications of food poisoning were received during the year, six were treated in hospital, and one death occurred.

Of 17 cases of pneumonia reported, 1 died and 3 were admitted to hospital.

32 cases of tuberculosis were notified and 13 cases were admitted to hospital.

There was one case of malaria reported from hospital.

4 cases of paratyphoid fever were notified, one of which was reported from hospital.

TUBERCULOSIS

NEW CASES AND MORTALITY DURING 1965

NOTIFICATION AND DEATHS.—The following table gives details of the number of primary notifications received during the year :

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
20	9	3	—	32

In addition, the following cases were brought to notice other than by formal notification :

	Pulmonary	Non-pulmonary
Death returns from local registrars ..	3	—
Transferable deaths from Registrar General ..	—	—
Posthumous notifications	—	—

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :

Age period Years	New cases*				Deaths			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ..	—	—	—	—	—	—	—	—
1-2	—	—	—	—	—	—	—	—
2-5	—	—	—	—	—	—	—	—
5-10	—	—	—	—	—	—	—	—
10-15	—	2	—	—	—	—	—	—
15-20	—	—	—	—	—	—	—	—
20-25	—	2	1	—	—	—	—	—
25-35	4	1	—	—	—	—	—	—
35-45	3	2	2	—	—	—	—	—
45-55	3	—	—	—	—	—	—	—
55-65	6	1	—	—	1	—	—	—
65-75	3	1	—	—	—	—	—	—
75 and upwards ..	1	—	—	—	1	1	—	—
Totals ..	20	9	3	—	2	1	—	—

* Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1965 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death:

Notification	Pulmonary	Non-pulmonary
After death	-	-
Within one month	-	-
1—3 months	-	-
4—6 months	-	-
7—12 months	-	-
1—2 years	1	-
2—3 years	-	-
3—4 years	-	-
4—5 years	-	-
Over 5 years	1	-
From death returns	1	-
Total number of deaths from tuberculosis	3	-
Causes other than tuberculosis	13	1

No action was required for cases of wilful neglect or refusal to notify.

MASS RADIOGRAPHY SURVEY

The Sheffield Mass Radiography Unit visited Rotherham in conjunction with the multi-screening clinic. The number of patients referred to their own doctors was 138, and 22 were referred to the Chest Clinic ; of this latter total 3 were found to be suffering from active tuberculosis.

The following table summarises the attendances when the unit visited the town :—

Attendances for:	Male	Female	Total
Miniature film examination:			
General Public	1,399	3,138	4,537
Doctor's Patients	14	14	28
Booked Groups	1	4	5
Ante-Natal Patients	—	3	3
	1,414	3,159	4,573
Large film recalls	44	47	91
	1,458	3,206	4,664
Total attendances ..			

Of the 4,573 persons attending, 91 were recalled for re-examination by large film. Of these, 44 were males and 47 females.

The following table gives details of the persons who were referred to their own doctor, the Chest Clinic, or to hospital, etc :

	Males	Females	Total
Chest Clinic	10	12	22
Patient's own doctor	78	60	138
	88	72	160

The provisional diagnoses of the persons referred to the Chest Clinic were as follows :—

Provisional diagnosis	Males	Females	Total
Active tuberculosis	—	3	3
Inactive tuberculosis	1	2	3
Sarcoidosis	—	2	2
Bronchiectasis	2	1	3
Pneumoconiosis	2	—	2
Acute inflammatory disease	3	1	4

Provisional diagnosis	Males	Females	Total
Unilateral emphysema	1	1	2
Chronic bronchitis and emphysema	1	—	1
Small pulmonary cyst	—	1	1
Pulmonary fibrosis	—	1	1
	—	—	—
Total ..	10	12	22
	—	—	—

The following table shows some other abnormalities found during the survey:—

Abnormality	Males	Females	Total
Inactive tuberculosis	1	2	3
Bronchitis and emphysema	18	8	26
Pneumoconiosis	25	—	25
Bronchiectasis	1	3	4
Acute inflammatory disease	1	—	1
Heart disease	10	26	36
Eventration of diaphragm	1	2	3
Hiatus hernia	—	1	1
Post inflammatory diaphragm	1	2	3
Post radiation fibrosis	—	1	1
	—	—	—
Total ..	57	44	101
	—	—	—

VENEREAL DISEASE

The following table gives the number of new cases of gonococcal infection occurring in the County Borough :

Year	15-19 years		20 years and over		Total
	Male	Female	Male	Female	
1960	—	1	35	3	39
1961	2	5	63	9	79
1962	1	2	32	3	38
1963	—	1	23	13	37
1964	1	1	21	5	28
1965	—	—	14	4	18

CARE OF MOTHERS AND YOUNG CHILDREN

CHILD WELFARE CENTRES

The following table shows the usage of the clinics :

Centre	Sessions held		New registrations			Total children attending			Total attendances			Medical consultations		
	Dr.	H.V.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.
Ferham House ...	98	-	320	16	19	511	156	186	2867	787	472	1828	403	130
Cranworth Road ...	98	-	278	24	21	439	145	185	2511	660	636	1643	407	203
Thorpe Hesley ...	22	26	37	4	5	69	19	57	599	165	233	125	29	14
Greasbrough ...	25	27	68	6	3	131	62	87	1112	292	202	387	74	52
Canklow ...	48	-	101	10	12	132	51	81	709	239	208	423	141	104
Blackburn ...	24	28	68	5	8	116	44	71	923	222	222	332	67	47
Highgreave ...	24	28	75	2	4	117	38	41	752	193	120	373	75	44
Broom Valley ...	23	26	100	7	8	146	43	62	920	218	156	271	78	27
Wheatley Road ...	52	48	216	11	12	360	147	248	2431	725	740	769	212	124
Broom Lane ...	52	49	220	11	10	382	196	179	2373	965	556	841	492	149
Total 1965 ...	466	232	1483	96	102	2403	901	1197	15197	4466	3545	6992	1978	894
Total for 1964	469	278	1453	92	73	2330	924	1212	15338	4380	3428	6784	2009	969

In all, 4,501 children made 23,208 attendances during 1965 as compared with 4,466 children making 23,146 attendances during 1964.

In addition to the child welfare clinics the following pre-school children were referred during 1965 to the specialist and other treatment clinics held on centre premises.

							Cases	Total Inspections
Orthopaedic .. .. .	..	..	..	..	..	..	34	72
Physiotherapy .. .. .	..	..	..	..	..	..	8	539
Aural treatment .. .. .	..	..	..	..	..	..	117	161
Ophthalmic .. .. .	..	..	..	..	..	..	34	61
Chiropody .. .. .	..	..	..	..	..	..	10	11
Dental .. .. .	..	..	..	..	..	..	321	442
Minor ailment treatment .. .. .	..	..	..	..	..	..	30	80
Speech Therapy .. .. .	..	..	..	..	..	..	16	125

At the Ophthalmic clinic 27 children under 5 years of age were submitted for refraction. In 21 cases glasses were prescribed.

Multiple Screening Clinic

DIABETES



Diabetic detection

HEALTH EDUCATION.

Eleven talks were given to outside organisations. Posters and displays in show cupboards were used in child welfare clinics to depict subjects appertaining to health.

The film "To Janet a Son," was shown to expectant mothers and their husbands at three evening sessions when more than 100 people attended on each occasion. This film is very popular and is in great demand.

A request was made for a health visitor to attend a secondary school where she gave talks and mothercraft demonstrations to senior pupils.

CONGENITAL DEFECTS

The following analysis shows the number of children notified to have been live or still-born during the year 1965 with the listed congenital defects.

Congenital defect						Number of births
Congenital heart disease	..	..	..	..	..	3
Anencephaly	..	..	..	..	..	3
Supernumerary digits	..	..	..	..	..	2
Talipes	..	..	..	..	..	2
Epispadias	..	..	..	..	..	1
Hypospadias	..	..	..	..	..	1
Ectopia vesicae	..	..	..	..	..	1
Hydrocephalus	..	..	..	..	..	1
Meningocele	..	..	..	..	..	1
Microcephaly	..	..	..	..	..	1
Congenital dislocation of hips	..	..	..	..	..	1
						<u>17</u>

REGISTER OF POTENTIALLY HANDICAPPED CHILDREN UNDER FIVE

This register provides a brief medical summary on those children who are handicapped or potentially handicapped. It is used to facilitate periodic review of treatment and guidance given, as an indication of the need for special education and for planning purposes.

At the end of the year 116 children were on the register and an analysis of the main reasons for inclusion is shown below:

Retardation	..	..	..	..	..	..	29
Spina bifida, meningocele, hydrocephalus	..	..	..	..	..	..	16
Congenital heart disease	..	..	..	..	..	..	13
Epilepsy	..	..	..	..	..	..	9
Cleft, palate harelip	..	..	..	..	..	..	7
Disorders of vision	..	..	..	..	..	..	6
Cerebral palsy	..	..	..	..	..	..	5
Abnormalities of urinary system	..	..	..	..	..	..	4
Severe deafness	..	..	..	..	..	..	3
Congenital dislocation of hip	..	..	..	..	..	..	3
Talipes	..	..	..	..	..	..	3
Reduction deformities	..	..	..	..	..	..	2
Other conditions	..	..	..	..	..	..	<u>16</u>
							116

Our local paediatrician, Dr. C. C. Harvey, gives invaluable help in the compilation and maintenance of this register.

DENTAL TREATMENT 1965

FOR MATERNITY AND CHILD WELFARE PATIENTS

The number of patients referred for dental treatment from the maternity and child welfare clinics during 1965 continued to fall ; 189 fewer individuals were seen in the year, 42 being from the child welfare and 147 being from the maternity clinics. These decreases have been going on for the past four years though from 367 infants treated in 1961 to 321 in 1965 it would seem that dental treatment for this group of the population is still largely carried out in Local Authority clinics. The drop in treatment for mothers is from 366 in 1961 to 154 in 1965, these being from 1,592 and 1,740 births respectively, which only emphasises this falling off in treatment at the Local Authority clinics. Since these clinics were originally opened to provide care and attention for those people who could not otherwise obtain it and because the standard of dental health is now better than ever before, regardless of whether the incidence of dental disease is greater or less, it is obvious that more of these mothers are in fact obtaining dental treatment from private practitioners. This was ensured by the National Health Service Act of 1946 and that it has taken so long to become apparent is due mainly to the fact that the number of dentists is only slowly increasing and that people are also slow in changing their views on dental health and treatment and appreciating the facilities available to them. Dentists working in Local Authority clinics can only treat expectant and nursing mothers and to expect a woman who is attending her private dentist regularly to leave one with whose careful treatment she is quite satisfied, and visit one whom she may not know at the clinic, is plainly ridiculous. It might well be pointed out here that a similar situation arises when children who have received careful attention and treatment throughout their school lives are told that, much as the school dental surgeon regrets it, they must find another dentist, i.e. a private practitioner to continue their dental care, if they are able to find one. If they do not do so for a few years, much of the work done in previous years is wasted. To avoid this situation arising an increasing number of parents do take their children to their own dentist and thus ensure continuity of treatment on leaving school. However, at the present stage of evolution of the National Health Service there is still an important part to be played by the Local Authority dental clinics in routine inspections and what is airily known as dental health education which consists essentially of inculcating in mothers the idea of taking their children for regular dental inspection and preventive advice and treatment.

It would seem a waste of time, which at present can be put to more beneficial use, to spend hours on dental health education while the benefits of fluoridation of the water supplies, in those areas which are deficient naturally, are still withheld from the general public.

The aim of the entire dental profession is to see that the maximum number of the population enjoy freedom from dental disease, and the local authority service and the private practitioner service should be complementary to each other until such time as a more satisfactory way is found of providing a dental service for everybody. The National Health Service Act, 1946, brought sudden, great changes to the dental services then available, but to suppose that these were ideal or unalterable in the light of future developments is incorrect and does less than justice to their originator—even though he did disregard the only existing free services ! In all the arguments as to how the dental—and for that matter, the medical—services could be improved it should be remembered that the fundamental consideration is that the patient goes to the dentist, be he in a local authority clinic or a private surgery, for advice and treatment and not to become a figure in a statistical return, a card in a file or a point on a graph. The individual whatever his age, social or mental condition should receive the utmost skills of which the practitioner is capable, and in dentistry, where the patient is normally at best apprehensive, to maintain a high standard probably constitutes a greater strain on the nervous and physical resources of the operator than is generally realised.

While, obviously, records have to be kept and statistical returns compiled, from which much can be learned and nearly anything proved, the tendency for the paper work to expand disproportionately to the actual treatment should be guarded against. When this does occur additional staff must be made available or the patient and dentist do not get the chairside service they are entitled to expect.

The details of the treatment given to the child welfare and maternity patients during the year can be seen in the appended tables. It should be emphasised that these patients are treated, along with school children, at both clinics throughout the week and that these clinics are open during school holidays. This report on the dental work should therefore be read along with that to the Education Committee to get a complete picture of the local authority dental clinics.

The following table gives details of the treatment given at the dental clinics to expectant and nursing mothers and to young children under 5 years of age, during 1965.

	Children under five years	Expectant and nursing mothers	Total 1965	Total 1964
Total attendances	442	555	997	1186
Number of individuals treated	321	154	475	546
Extractions—permanent teeth	—	440	440	466
—temporary teeth	580	1	581	550
Fillings —permanent teeth	—	88	88	181
—temporary teeth	41	—	41	37
Anaesthetics—local	5	85	90	117
—general	267	77	344	345
Other operations	134	425	559	804
Number of patients supplied with dentures ..	7	71	78	80

Details of denture work done for expectant and nursing mothers and for young children under 5 years of age in 1965 are as follows:

	Maternity		Child Welfare		Total	
	Dentures	Patients	Dentures	Patients	Dentures	Patients
Full upper and full lower dentures	36	18	—	—	36	18
Full upper or full lower dentures	11	11	2	2	13	13
Full upper or full lower dentures along with partial lower or partial upper dentures ..	16	8	4	2	20	10
Partial upper and partial lower dentures	30	15	—	—	30	15
Partial upper or partial lower dentures	19	19	3	3	22	22
	112	71	9	7	121	78

CARE OF THE PREMATURE INFANT

All infants weighing $5\frac{1}{2}$ lb. or less at birth are regarded as premature babies irrespective of the period of gestation.

The following table gives details of the premature births during the year :

		Total births	Premature births	Percentage
Live births	.. .. .	1619	117	7.23
Still-births	.. .. .	26	18	69.21
Total		1645	135	8.2

Of the 135 premature births, 78 live births and 18 still-births occurred in hospital; 39 live births occurred at home of which 7 were transferred to hospital.

Details of the birth weights of these babies are given in the following table which also gives the numbers who died within 24 hours of birth and those surviving at the end of 28 days.

Weight at birth	PREMATURE LIVE BIRTHS												PREMATURE STILL BIRTHS	
	Born in hospital				Born at home or in a nursing home								Born in hospital	Born at home or in a nursing home
					Nursed entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days	Total births	Died within 24 hours of birth	Died in 1 and under 7 days	Died in 7 and under 28 days		
2 lb. 3 oz. or less	3	2	1	-	-	-	-	-	-	-	-	-	5	-
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	6	2	1	-	-	-	-	-	3	3	-	-	7	-
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	7	1	-	-	3	-	-	-	3	-	1	1	2	-
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	23	-	-	-	9	-	-	-	-	-	-	-	3	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	39	-	-	-	20	-	-	-	1	-	-	-	1	-
Totals	78	5	2	-	32	-	-	-	7	3	1	1	18	-

The Premature Baby Nurse attended 129 babies during the year and made 2,589 visits.

There were no deaths among the infants attended but 5 were admitted to hospital, 4 because of infection and 1 required a blood transfusion. All made a good recovery and are thriving. One baby developed hydrocephalus and had a Spitz-Holter valve inserted at the Sheffield Children's Hospital and is now making good progress.

There were 11 sets of twins among the children attended.

The special clinics for the estimation of haemoglobin levels of babies born at home were continued. There were twelve sessions and the number of tests carried out was 193.

The number of babies other than prematures attended by the nurse was 17, and the number of visits made in this connection was 162. Other visits for any reason were 268.

Details of the babies cared for during 1965 were as follows:

	Premature babies	Weakly babies other than premature	Total
In care at the beginning of the year	8	3	11
New cases, 1965	129	17	146
Total infants ..	137	20	157
Infants discharged from care as:			
adjusted	115	16	131
died	—	—	—
transferred out	6	—	6
admitted to hospital	7	4	11
Infants remaining in care at end of the year ..	9	—	9
Visits paid	2,589	162	2,751

ANALYSIS OF CAUSES OF INFANT DEATHS

Age	Cause of death	Number
0-7 days	Birth trauma	1
	Prematurity	11
	Congenital abnormalities	2
		14
1-4 weeks	Respiratory Infection	1
1-12 months	Respiratory infection	5
	Congenital abnormality	2
	Enteritis	1
	Accident	1
	Prematurity	1
		10
		—
		25
		—
All infants	Respiratory infection	6
	Birth trauma	1
	Prematurity	12
	Congenital abnormality	4
	Enteritis	1
	Accident	1
		—
		25
		—

CHILDREN'S COMMITTEE—RESIDENTIAL NURSERY AND CHILDREN'S HOMES

All children were examined on admission and discharge from the nursery and a medical inspection of all children took place each month.

Children given triple antigen (diphtheria, whooping cough and tetanus)	9
Children vaccinated against poliomyelitis	22
Medical examinations	430
Visits made by medical officers	59
Visits made by health visitors	14

WELFARE COMMITTEE—TEMPORARY ACCOMMODATION

Four families consisting of 5 adults and 11 children were in temporary accommodation at the beginning of the year, 2 new families were accommodated during the year and 2 families consisting of 2 adults and 4 children remained in temporary accommodation at the end of the year. They were evicted from other property for non-payment of rent and they maintain a fair standard of hygiene.

SALE OF WELFARE FOODS

The following table gives details of the sales of Welfare Foods in the County Borough during the last five years :

	1961	1962	1963	1964	1965
National dried milk	35,734	35,024	32,015	26,578	23,618
Cod liver oil ..	3,913	1,671	1,170	1,049	1,071
A and D tablets ..	5,209	3,388	2,681	2,254	2,042
Orange juice ..	35,323	19,177	16,189	15,556	17,019
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	80,179	59,260	52,055	45,437	45,715
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

MATERNITY SERVICES AND THE DOMICILIARY MIDWIVES SERVICE

MATERNITY SERVICES

The following table shows the number of confinements amongst women normally resident in the County Borough:—

A.	SERVICES PROVIDED WITHIN	1961	1962	1963	1964	1965
	THE COUNTY BOROUGH :—					
	Moorgate General Hospital	432	425	472	490	518
	Private nursing homes	35	43	50	42	22
	Domiciliary confinements	722	722	706	642	589
B.	SERVICES PROVIDED OUTSIDE					
	THE COUNTY BOROUGH :—					
	The Jessop Hospital, Sheffield ..	26	26	23	33	37
	Listerdale Maternity Home	337	364	374	443	404
	Hallamshire Maternity Home ..	15	14	9	15	15
	Private nursing homes and other					
	Institutions	13	32	30	28	36
	Domiciliary confinements	10	6	5	12	7
	Total confinements	1590	1632	1669	1705	1628

The following table gives a picture of the maternity work undertaken in the County Borough:—

Year	Confinements occurring in						Total
	Hospitals Maternity Homes		Private Maternity Homes		Domiciliary arrangements		
	Number	Per cent	Number	Per cent	Number	Per cent	
1958	640	42·39	60	3·97	810	53·64	1,510
1959	668	45·17	57	3·85	754	50·98	1,479
1960	758	48·59	61	3·91	741	47·50	1,560
1961	810	50·94	48	3·02	732	46·04	1,590
1962	829	50·80	75	4·59	728	44·61	1,632
1963	878	52·61	80	4·79	711	42·60	1,669
1964	981	57·54	70	4·10	654	38·36	1,705
1965	974	59·83	58	3·56	596	36·61	1,628

The following statement gives the number of applications for hospital confinement investigated by the midwives and appropriate recommendations made:

	1958	1959	1960	1961	1962	1963	1964	1965
Total number of Rotherham patients confined in Hospital and maternity homes	640	668	758	858	904	958	1051	1032
Priority applications reported upon ..	141	229	325	258	224	150	188	235

DOMICILIARY MIDWIVES SERVICE

Mrs. P. J. Cloke left the service on 14th July to take a district nurse/midwife post in Cornwall.

The annual inspection of midwives' records and drugs was carried out by Mr. D. Ballantine, F.R.C.S., F.R.C.O.G., L.M., Consultant Obstetrician and Medical Supervisor of Midwives.

Four midwives helped to staff the cervical cytology section of the Health Screening Clinic which was held from 12th to 22nd October.

During the year films have been seen by midwives in connection with midwifery, premature and sick babies and congenital abnormalities of babies.

A new all-purpose nursing bag for midwives was brought into use in September.

The Non-Medical Supervisor of Midwives gave instruction relating to midwifery and Local Authority Health Services to third year nurses in general training at the local hospitals, also to ambulance personnel. She also attended meetings of the Maternity Liaison Committee.

Reviewing the domiciliary midwifery services of the County Borough during the same period, which are provided by the Maternity Services Scheme of the Executive Council and the Domiciliary Midwives Scheme of the County Borough Council, the following table gives details of the bookings of patients confined and includes the few non-residents who had their confinement in the County Borough:

Year	Doctor NOT booked for confinement		Doctor booked for confinement		Total
	Number	Per cent	Number	Per cent	
1958	197	24.14	619	75.86	816
1959	144	18.92	617	81.08	761
1960	106	14.27	637	85.73	743
1961	79	10.78	654	89.22	733
1962	59	8.03	676	91.97	735
1963	41	5.75	672	94.25	713
1964	37	5.72	610	94.28	647
1965	24	3.98	579	96.02	603

It will be seen that whereas in 1958 75.86 per cent of the women confined at home booked their confinement with a doctor, during subsequent years this has progressively increased until in 1965 the percentage has increased to 96.02 per cent. Bookings for a midwife only show the reverse by decreasing from 24.14 per cent in 1958 to 3.98 per cent in 1965.

The effect of the increased bookings by doctors upon the work of the District Ante-natal Clinics is reflected in the decrease in the numbers of women attending and in the total attendance made:

				1958	1959	1960	1961	1962	1963	1964	1965
				<u>284</u>	<u>238</u>	<u>209</u>	<u>175</u>	<u>141</u>	<u>111</u>	<u>99</u>	<u>71</u>
Women attending	...	...	...	284	238	209	175	141	111	99	71
Attendances	...	...	...	567	504	418	386	296	247	206	141

Attendances at clinics attended by district midwives:

				1958	1959	1960	1961	1962	1963	1964	1965
				<u>2948</u>	<u>3004</u>	<u>3246</u>	<u>3488</u>	<u>3673</u>	<u>3649</u>	<u>3534</u>	<u>3377</u>
Attendances	...	...	...	2948	3004	3246	3488	3673	3649	3534	3377

The midwives refer all their booked cases to the district ante-natal clinics which are attended by the consultant obstetrician who acts as the Corporation's Obstetric Officer. Reports of his examination are sent to the patient's own doctor and sometimes result in the cases being booked by the doctor. Midwives hold sessions at the clinics at which their own booked cases and cases booked by a doctor attend with the doctor's permission.

A further obligation which the Domiciliary Midwives Service has undertaken in recent years is the nursing care of hospital maternity cases who have been discharged home before the tenth day. The following table gives details:

	1958	1959	1960	1961	1962	1963	1964	1965
Total (County Borough) hospital confinements	640	668	758	810	829	878	981	974
Hospital discharges before the 10th day ...	541	586	429	276	367	404	549	626
Percentages ...	84.5	87.7	56.59	34.07	44.27	46.01	55.96	64.27

Patients who were booked and delivered by midwives were encouraged to attend for examination at the post-natal clinic held jointly with the district ante-natal clinic, and the details of midwives cases delivered, and cases attending and attendances at the post-natal clinic, are as follows:

Year	Midwives bookings delivered	Midwives cases attended post-natal clinic		Post-natal attendances
		Number	Per cent	
1958	197	62	31.5	71
1959	144	54	37.5	67
1960	106	51	48.1	57
1961	79	30	37.9	35
1962	59	36	61.0	41
1963	41	21	51.2	25
1964	37	15	40.5	22
1965	24	16	66.6	18

Domestic help is provided to maternity cases under the Act and the following table summarises the assistance rendered by the Home Help Service during the years 1958-1965.

Year	Number of domiciliary confinements	Maternity cases served by Home Helps		Hours of service rendered	Average hours per case
		Number	Per cent		
1958	810	144	17.7	11,914	82.7
1959	754	128	16.9	11,319	88.4
1960	741	135	18.2	11,443	84.8
1961	732	138	18.8	11,441	82.9
1962	732	144	19.6	10,945	76.0
1963	712	176	24.7	13,469	76.5
1964	647	164	25.3	13,383	81.6
1965	603	208	34.5	14,781	71.0

The domestic assistance given by relatives during the lying-in period should not be overlooked and many cases receive help from this source. The services of the home help during the ante and post-natal periods which are provided on medical certificate, are included in the above figures.

EXPECTANT AND NURSING MOTHERS.

Of the 327 expectant mothers who attended mothercraft and relaxation classes 62 were booked for home confinement. A total of 2,172 attendances were made, compared with 432 women making 3,103 attendances in 1964.

DISTRICT ANTE-NATAL AND POST-NATAL CLINICS.

The following table gives details of the attendances at the consultant ante-natal clinics during 1965 :

Clinics	Sessions held	New cases		Total women attending		Total attendances	
		A.N.	P.N.	A.N.	P.N.	A.N.	P.N.
Ferham House ..	12	29	4	31	5	52	5
Cranworth Road ..	22	27	9	29	9	66	11
Wheatley Road	12	8	2	11	2	23	2
Total ..	46	64	15	71	16	141	18

POST GRADUATE COURSES.

Post graduate courses were attended by Mrs. H. M. Clarke from 28th March to 2nd April at Stoke-on-Trent and by Mrs. G. L. Willoughby from 5th September to 11th September at Cheltenham.

PUPIL MIDWIVES.

Five pupil midwives completed their district training, four passed the examination and one takes her examination in February, 1966.

HOSPITAL LIAISON.

Maternity liaison meetings have been attended during the year and frequent visits have been made by the Non-Medical Supervisor of Midwives to Moorgate General Hospital and Listerdale Maternity Home to discuss hospital priority and 48 hour discharges.

District midwives and home nurses attended 626 mothers discharged from local maternity hospitals and maternity homes before the tenth day, equal to a saving of 3,846 patient days. A number of these cases were booked with the domiciliary service, but were admitted to hospital for medical reasons or in emergency, and returned home to the care of the midwife concerned as soon as the emergency was over. 370 patients were discharged from hospitals on the first or second day as compared with 261 in 1964.

The following table shows the number of maternity patients who were discharged from hospital prior to the tenth day:

Hospital or Maternity Home	Discharged on the (day)										TOTAL
	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	
Moorgate General ..	34	137	18	20	15	6	9	20	20	1	280
Listerdale Maternity ..	-	189	4	11	4	10	24	17	34	8	301
Hallamshire Maternity ..	-	-	-	-	-	-	1	-	1	-	2
Jessop, Sheffield ..	-	4	4	1	1	3	14	1	-	-	28
City General, Sheffield	-	5	-	-	1	1	3	3	-	-	13
Nether Edge, Sheffield ..	-	-	-	-	-	1	-	-	-	-	1
Halifax Hospital ..	1	-	-	-	-	-	-	-	-	-	1
TOTAL ..	35	335	26	32	21	21	51	41	55	9	626

VISITS BY MIDWIVES TO ASSESS HOME ENVIRONMENT

(a) For admission to hospital

The midwives completed reports on 235 applications for hospital admission. Taking into account the environmental conditions 206 cases were recommended for hospital confinement (41 for ten days stay and 165 for early discharge), and 29 were suitable for home delivery. This work required 279 visits.

(b) For discharge from hospital.

Of 304 patients who were visited to ascertain their suitability for discharge 48 hours after confinement in Listerdale Maternity Home or Moorgate General Hospital 18 were not so recommended. 611 visits were made.

MATERNITY EMERGENCY UNIT

The unit was called upon three times during the year. One occasion was for ante-partum haemorrhage, when blood and plasma were given and the patient removed to hospital. The other two occasions were for post-partum haemorrhage (one was a premature labour and one a retained placenta). These patients were transfused in their own homes, then removed to hospital, and they and their babies made a good recovery.

ANALGESIA

Analgesia was administered to patients by the use of gas and air, Trilene, Pethidine and Pethilorfan. Minnitt's gas and air machines were serviced quarterly and a Trilene machine yearly.

	Doctor NOT booked	Doctor booked	TOTAL
Analgesia—Number of cases who were delivered with :			
Gas and air only ..	—	1	1
Pethilorfan only ..	—	31	31
Trilene only	5	216	221
Pethidine and Trilene ..	5	103	108
G/A and Pethilorfan ..	—	—	—
Pethidine only	2	9	11
Pethilorfan and Trilene	4	181	185
Pethilorfan, Pethidine and Trilene	—	1	1
Cases delivered without analgesia ..	8	37	45
TOTAL ..	24	579	603

PREMATURE BABY COTS.

Cots were loaned on eight occasions for the use of sick or premature babies.

MIDWIVES CASE LOAD.

	1961	1962	1963	1964	1965
Number of domiciliary cases attended by					
Municipal midwives	733	735	713	647	603
Private Midwives	—	—	—	—	—
Number of cases delivered in Institutions, but attended by domiciliary mid- wives on discharge from Institu- tions before the 10th day	276	367	404	549	626
Number of days service to such cases representing a similar saving of patient days in institutions	1091	1680	2255	3022	3846

Of 603 cases attended by midwives, 596 had booked their confinement with the service, there was one miscarriage and 7 cases were delivered in emergency.

Of the 579 cases in which a doctor was booked the midwife delivered 568 of the patients, making a total of 591 cases delivered by midwives. Midwives acting in the capacity of maternity nurses attended 161 patients.

Two cases were handed over to the Home Nursing Service during the illness of the mothers.

The following table gives details of the domiciliary confinements during the year:

	Doctor NOT booked	Doctor booked	TOTAL
Midwives booked cases ..	19	576	595
Emergencies	4	3	7
Miscarriages	1	—	1
TOTAL ..	24	579	603
Deliveries by doctors (included in above totals)	—	11	11

MATERNAL DEATHS.

There were two maternal deaths during the year, both in Moorgate General Hospital. One patient was from Treeton and one from Dinnington, both living outside the County Borough.

MIDWIVES CLINICS.

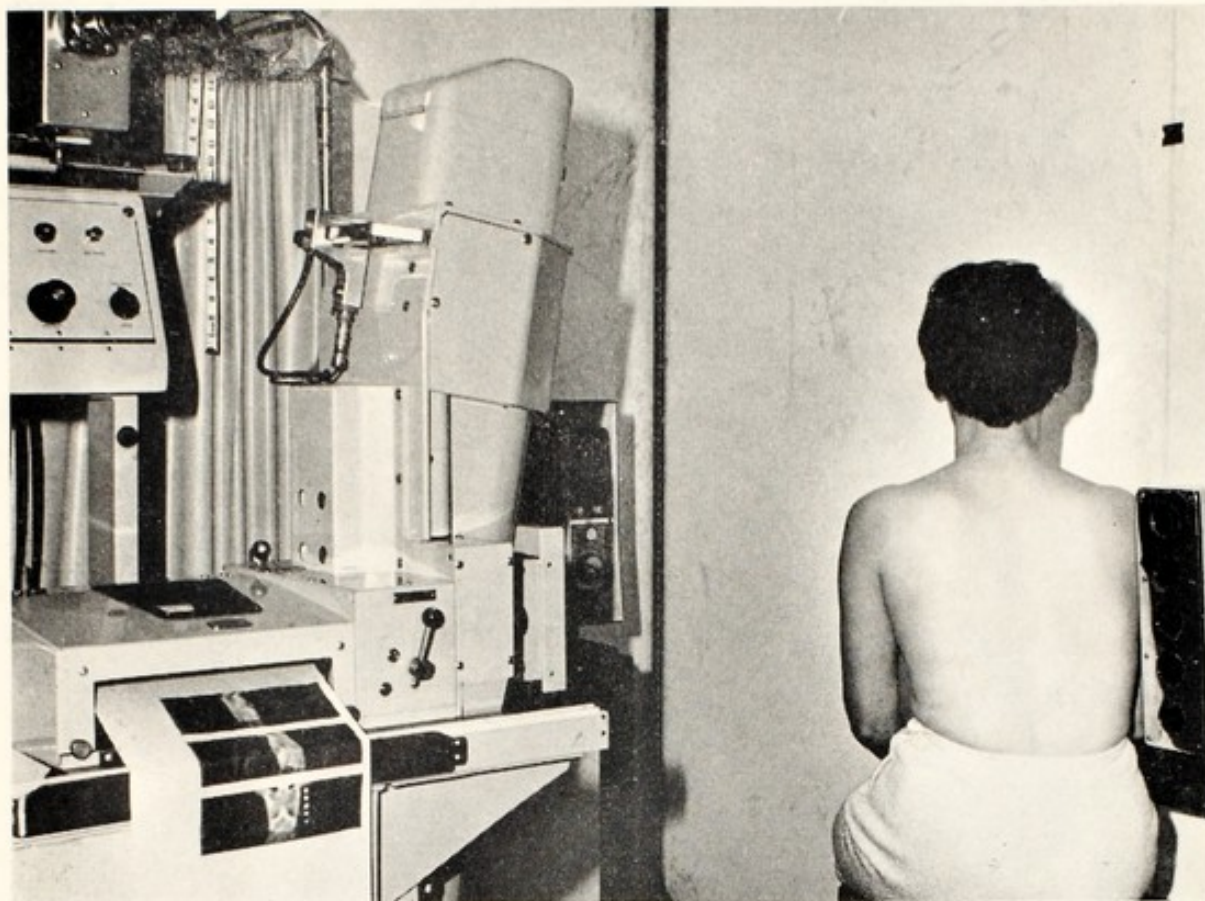
The number of attendances at midwives ante-natal clinics held at centres during the year is as follows:

	Ferham House	Cranworth Road	Broom Lane	Greasbrough	Wheatley Road	Total
Number of sessions held ..	199	156	52	12	104	523
Number of new cases attending	271	256	80	30	117	754
Re-attendances ..	1012	765	222	48	452	2499

FAMILY PLANNING ASSOCIATION.

A branch of the Family Planning Association was formed in Rotherham in February, 1956. The following statistics are given for the year 1965, the figures for the preceding year are given in brackets:

Number of new patients	...	...	...	...	266	(231)
Number of second visits	...	...	...	...	177	(236)
Number of check visits	...	...	...	...	652	(743)
Number of transfers	...	...	...	...	25	(31)
Attendances for supplies only	...	...	...	...	607	(778)
Total number of attendances made	...	...	...	...	1918	(1988)
Patients buying by Post	...	...	...	...	282	(266)
Patients recommended by Health Committee	...	...	...	...	42	(19)
Patients supplied with oral contraceptive	...	...	...	...	91	(28)



Breast Cancer Test—"Pyroscan"

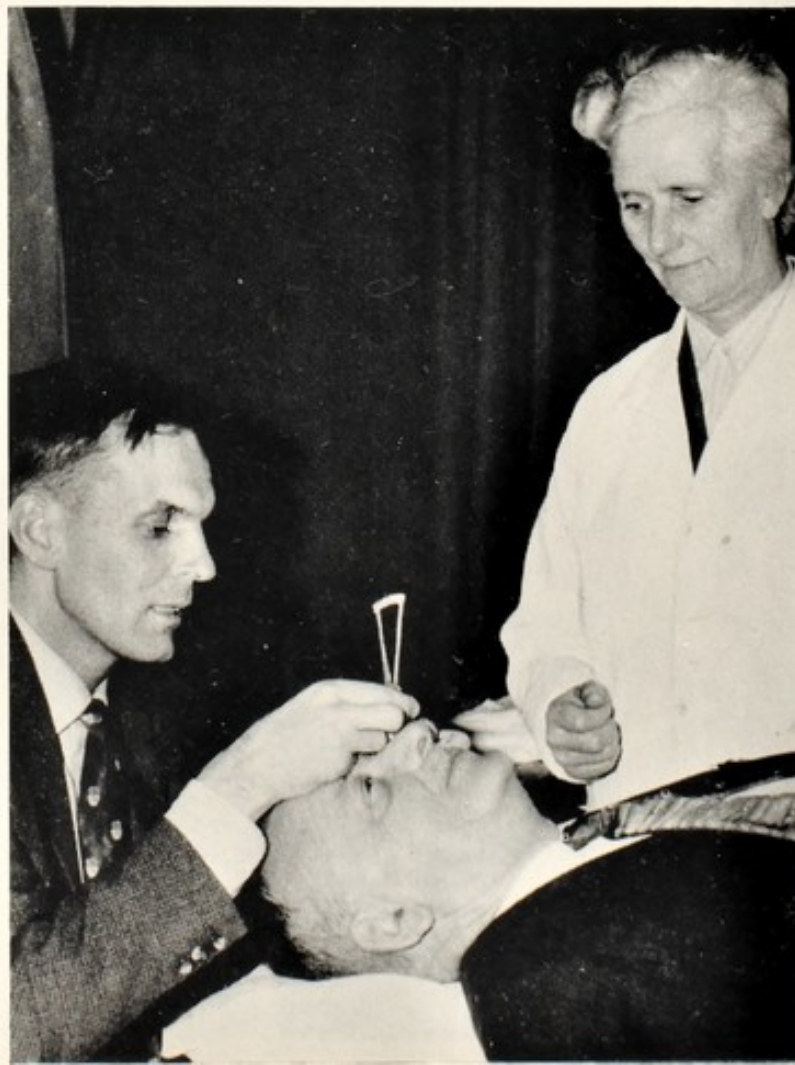


Lung Function—The Wright Peak Flow Meter

Multiple Screening Clinic



Master Vision Screener



HEALTH VISITING

HEALTH VISITORS AND SCHOOL NURSES

Miss C. McLoughlin, Health Visitor, completed her contract with this Authority in July, 1965, and she left the Department to take up duties overseas.

Miss G. Gorman and Miss S. M. Savidge, Health Visitors, returned from training at Leeds University in August, 1965. Mrs. E. A. S. Hoyle, School Nurse, retired in October, 1965.

83 children attended the Play Centre during the year and made 545 attendances. Two Play Groups have been formed, one in a Church Hall and another in a private household. These have been approved under the Nurseries and Child Minders Regulation Act, 1948.

Plans are going ahead for the formation of two Play Groups at clinic premises, one at Broom Lane and the second at Wheatley Road. These will be run entirely by the mothers of the children who attend and will be supervised by a member of this department.

Special arrangements were made with the Children's Department for 8 children who were to be adopted to have blood specimens taken and Phenistix tests done.

Routine phenylketonuria tests were done on 1,501 babies during the year. One baby born in November, 1965, was admitted to the Children's Hospital, Sheffield, for further tests and was found to have a positive reaction. The family removed from the County Borough before the child was discharged from hospital. This is the second child of the same family found to be suffering from phenylketonuria. The number of tests made since the commencement in February, 1960, was 8,188.

The case load for 1965 was:

Infants under 1 year on visiting list	..	..	..	1,516
Infants 1-2 years	..	..	..	1,640
Infants 2-5 years	..	..	..	4,444
Tuberculous patients	..	..	..	378
Diabetics	..	..	..	118
Gastrics	..	..	..	72
Chronic sick	..	..	..	104

SCHOOL NURSING.

The school nurses have carried out the duties in connection with school work generally, with the help of clinic assistants and clinic nurses.

The total case load for 1965 was as follows:

Number of school population	..	..	..	15,152
Number of nursery schools	..	..	..	1
Number of schools with nursery classes	..	..	..	3 (4 classes)
Number of voluntary primary schools	..	..	..	2
Number of primary schools	..	..	..	18
Number of general secondary schools	..	..	..	6
Number of voluntary secondary schools	..	..	..	1
Number of secondary grammar schools	..	..	..	2
Number of special schools:				
Open air school	..	..	..	1
Educationally subnormal school junior and senior	1			2

SOCIAL CASE WORK

CARE OF THE UNMARRIED MOTHER.

One hundred and eleven illegitimate babies were born, 71 to 71 single girls and 40 to 40 married women, as compared with 50 to 50 single girls and 39 to 38 married women in 1964. 14 girls were admitted to Mother and Baby Homes, the local authority accepting financial responsibility. Seven of their babies were adopted, 2 were placed in the Children's Homes and five remained with their mothers. Sixteen single girls were cohabitees, 14 had their confinements in hospital and 2 were confined at home. One baby was adopted, one was admitted to a children's home, one baby died and 13 remained with their mothers. Of the remaining 41 single girls 35 had their confinements in hospital and 6 were confined at home.

One girl mentioned above was confined in her fifteenth year and 3 others were confined in their sixteenth year.

Of the 40 married women 29 were cohabiting, 4 were separated from their husbands, 5 were widows and 2 were divorced ; 38 kept their babies, 1 baby was adopted and 1 baby died.

PREVENTION OF BREAK-UP OF FAMILIES.

PROBLEM FAMILIES.

These families continue to create new problems. However, during the past 10 months a more acceptable method of birth control has been made available and 14 women have co-operated satisfactorily. This should help in relieving the burden of producing more children in households where the care is totally unsatisfactory.

One problem family was evicted for non-payment of rent and the 4 children, all under 5 years of age, were admitted to the Children's Homes. Another family removed from the County Borough.

PRE-PROBLEM FAMILIES.

Fifteen families received extra supervision during the year. Eleven of the women accepted birth control and it is hoped there will be an improvement in their standards as the size of the families is controlled.

MULTIPLE SCREENING CLINIC, OCTOBER 1965

Multiple screening is the use of two or more simple laboratory tests, examinations or procedures, applied rapidly and on a mass basis to determine presumptive evidence of unrecognised disease. It will be recalled that the first clinic was held in October, 1964, and as a result of its successful outcome thoughts swung almost immediately towards a possible second, more extensive clinic to be held the following autumn. It might be of interest to record the steps in planning such an extensive undertaking.

Initially this involved a broad consideration of aims, which were defined as the prevention of sickness, chronic ill health, absence from work and impaired performance; or, in wider terms, raising the general level of health of the community. A list was

drawn up of diseases which might be considered worthy of inclusion in the clinic. Discussions followed within the department and with general practitioners, both as individuals and in the Local Medical Committee, on epidemiological factors, about the clinical methods to be used and on the ethical and administrative procedures to be followed. Local consultants were approached informally and contact was established with acknowledged experts in the various subjects. The next stage was to secure the assistance of pathologists to undertake the laboratory work and to involve them in choosing the right clinical procedures.

Staff were allotted to the various sections and trained in their individual tasks. Detailed arrangements were made for the adaptation of the premises for clinical use ; this involved the use of 'Dexion' black polythene sheeting for privacy, special lighting and elaborate sign-posting.

Appropriate forms, over 40 in all, were drafted for recording and reference of patients for further investigation. A multi-card was designed with serial numbered tear-off sections for each test, thus avoiding the necessity for repetition of personal details. A booklet was produced for members of the public, setting out in simple terms the principles of multiple screening, together with details of the tests available. These were finally chosen to be the five tests from the previous year plus tonometry for glaucoma, vision screening by 'Mavis,' lung function by the Wright Peak Flow Meter and thermography by Pyroscan for breast cancer.

At the entrance point a registration station was manned by members of the Rotherham Branch of the Ladies' Circle who gave valuable voluntary assistance, and members of the Health Department staff acted as guides and supervisors. The enthusiasm shown by the staff was such that they gave their services until late in the evening without a single request for overtime payment.

ANAEMIA.

This test depends upon the ability of a single drop of blood obtained from a prick in the lobe of the ear to fall into a copper sulphate solution of known density. The drop which fails to sink represents a level of haemoglobin below the acceptable normal. The persons failing this test numbered 119 ; a sample of venous blood was then taken and subject to detailed analysis at the Moorgate Hospital Laboratory and the result forwarded to the general practitioner. Confirmation of anaemia was obtained in 66 cases, all but 2 of them female.

BREAST CANCER.

The outlook for a woman with breast cancer is dependant on the stage at which it is diagnosed. When the lump is tiny and confined to the breast tissues there is a 75 per cent chance of being alive 5 years later ; when the growth has spread the outlook is not nearly so good.

The women attending were first shown a film which portrayed the need for regular self-examination of the breasts. The test itself was carried out by a new electronic instrument known as Pyroscan, which measures the infra-red heat emitted

from the breasts and produces a thermal pattern for each patient. Because even quite small tumours give out increased amounts of heat, these show up on the thermograph. The test was followed by confirmatory clinical examination of the breasts.

This was the first time that Pyroscan had been used for screening normal women outside hospital. Unfortunately at the time of writing the final results are not known, but at least two definite diagnoses of breast cancer were made.

CERVICAL CANCER.

The smear test for pre-cancer of the neck of the womb is now well established as an efficient tool in preventive medicine. During the painless internal examination cells are lightly smeared from the neck of the womb onto a glass slide. They are then stained and examined microscopically. Eleven positive smears were obtained from 2,099 examinations ; all the women concerned have been treated at the hospital by arrangements made by family doctors.

DIABETES.

A different approach was used on this occasion in an endeavour to discover a higher proportion of diabetics. A pleasantly flavoured glucose drink was offered to each person and an envelope containing a Clinistix was handed out, with a time recorded when the urine should be tested. It was also possible to take home the conventional packets for members of the family over 10 years of age who were unable to attend themselves. 290 tests were reported positive (3.25 per cent) and after a further check 81 (0.90 per cent) were referred to the hospital for a glucose tolerance test. Finally 12 (0.13 per cent) were reported as diabetics ; general practitioners were notified and treatment secured.

GLAUCOMA.

Glaucoma is a disease of the eye which often ends in blindness. The test is for one form of glaucoma called chronic simple glaucoma which is characterised by the raised pressure in the eye. By the time symptoms occur it is often too late to avoid blindness, but if the raised pressure is detected early enough the condition can be treated and the serious outcome avoided. A drop of local anaesthetic is placed on the eye. After lying down an accurately calibrated instrument touches the surface of the eye and measures the tension within. Of the 2,280 persons examined, 102 failed the test and were referred to hospital. So far 5 new cases of chronic simple glaucoma and 10 of closed angle glaucoma have been confirmed and a further 35 persons are remaining under surveillance.

HEARING.

The only modification this year was that the sound proofing of the box was improved and a noise-excluding head set containing earphones was worn. 60 persons were referred for possible treatment from 1,637 examined, and doctors were informed of the result in 87 other cases.

LUNG FUNCTION.,

As an adjunct to the chest x-ray, men under 45 years were offered a test of lung

function, which consisted of blowing three times through a Wright Peak Flow Meter. Those who recorded average peak flows less than 500 litres per minute were invited to complete the Medical Research Council's questionnaire on chronic bronchitis. 4.9 per cent of men recorded less than 400 litres per minute and a further 15.6 per cent were in the doubtful range, 400 to 500 litres. As a result of the questionnaire, 76 reports were furnished to general practitioners, 52 of these relating to men with early signs and symptoms of chronic bronchitis. It is firmly hoped that early and effective treatment will be instituted in many of these cases, so as to prevent the development of disabling disease. Thirty-five men were advised to stop smoking ; this is a most important preventive measure.

VISION.

The instrument known as 'Mavis' examines by standardised techniques acuity of vision in a variety of test situations and also the correct balance of the eye muscles, including the ability of the two eyes to function together. There are 14 checks in all. About one fifth of those who had never worn spectacles were referred for possible correction and about a quarter of those already wearing spectacles were advised to seek re-examination for possible improvement.

X-RAY.

The Mass Radiography Unit has kindly provided the summary table below :

SUMMARY OF SURVEY HELD DURING ROTHERHAM HEALTH FORTNIGHT 12th—28th October, 1965

PROVISIONAL DIAGNOSIS OF PATIENTS REFERRED TO CHEST CLINIC

	Male	Female	Total
Active tuberculosis	—	3	3
Inactive tuberculosis	1	2	3
Sarcoidosis	—	2	2
Bronchiectasis	2	1	3
Pneumoconiosis	2	—	2
Acute inflammatory disease	3	1	4
Unilateral emphysema	1	1	2
Chronic bronchitis and Emphysema	1	—	1
Small pulmonary cyst	—	1	1
Pulmonary fibrosis rheumatoid lung	—	1	1

SOME OTHER ABNORMALITIES DISCOVERED

	Male	Female	Total
Inactive tuberculosis	1	2	3
Acute inflammatory disease	1	—	1
Bronchitis and emphysema	18	8	26
Bronchiectasis	1	3	4
Pneumoconiosis	25	—	25
Heart disease	10	26	36
Hiatus hernia	—	1	1
Eventration of diaphragm	1	2	3
Post inflammatory fibrosis	—	1	1
Post radiation fibrosis	—	1	1

CONCLUSION.

The service aims to discover cases of chronic non-communicable disease in the pre-symptomatic stage. A complete evaluation of such a service would be quite impossible ; improvements in health are difficult to measure and the economic considerations are complicated. The cost to the Health Department has been surprisingly low: 2/- per person attending for the five test clinic in 1964 and 7/- per person in the nine test clinic in 1965. Each test must stand or fall on its own merits but in a town there are definite advantages in bringing together a comprehensive series of tests in central premises, using specially trained personnel and elaborate equipment if necessary. Ideally doctors should not be involved in the practical techniques of screening, most of which can be mastered by ancillary or nursing staff. On the other hand, only the general practitioner can decide what to treat and what to ignore and his views on the interpretation of results are always sought.

SUMMARY OF PRELIMINARY RESULTS

			Male	Female	Total	Comment
Total attendance	..	..	1,580	3,942	5,522	
Anaemia	..	..	945	2,849	3,794	119 failed screening test, 66 cases of anaemia confirmed.
Breast cancer:						
Clinical examination and						
Pyroscan	..	..	—	416	1,346	Final results not yet available, 2 definite cases of breast cancer.
Clinical examination only	..	..	—	930		
Cervical Cytology	..	..	—	2,099	2,099	11 cases of pre-cancer = 5.2 per 1,000.
Diabetes:						
Attended clinic	..	..	1,206	3,052	4,258	12 diabetics discovered.
Family packets given	..	..			4,698	
Glaucoma	..	..	698	1,580	2,278	8 definite glaucoma 21 ocular hypertension 14 doubtful 10 closed angle glaucoma.
Hearing	..	..	557	1,080	1,637	60 referred for possible treatment.
Lung function	..	..	796	—	796	93 failed (min. 500 litres per min.) 52 of these thought to be early cases of chronic bronchitis.
Vision	..	..	833	1,812	2,645	264 without spectacles failed 344 with spectacles referred.
X-Ray	..	..	1,414	3,159	4,573	6 cases of T.B.

ANTI-SMOKING CLINICS

Two further anti-smoking clinics have been held during the year but neither was so well attended as the original course and the results from the last clinic were slightly less satisfactory.

No. of persons	November 1964	Course May 1965	October 1965
Completing course	108	39	57
Cured	44 (41%)	17 (44%)	19 (33%)
Improved	35 (32%)	13 (33%)	14 (25%)
Unchanged	13 (12%)	4 (10%)	8 (14%)
Did not reply or attend reunion	16 (15%)	5 (13%)	16 (28%)

A survey by questionnaire carried out one year after the original course showed that 33 per cent of those who had completed the treatment were still non-smokers.

RESULTS OF FIVE-DAY SMOKING TREATMENT

November 1964, May 1965 and October 1965 combined

NUMBER OF CIGARETTES SMOKED PER DAY BEFORE AND AFTER THE 5-DAY TREATMENT

Pipe smokers and those failing to reply not included.

		AFTER TREATMENT					TOTAL
		35+	25-34	15-24	5-14	0 - 4	
BEFORE TREATMENT	35+	1	3	6	0	3 (2)	13
	25-34	0	1	8	4	12 (11)	25
	15-24	0	0	9	29	51 (44)	89
	5-14	0	0	0	14	23 (20)	37
	0 - 4	0	0	0	0	0 (0)	0
	TOTAL	1	4	23	47	89 (77)	164

(Figures in brackets refer to non-smokers alone)

GENERAL STATISTICS

The following is a summary of the work performed by health visitors and clinic nurses under Sections 22, 24, 26, 28 and 51 of the National Health Service Act, 1946:

EXPECTANT MOTHERS

First visits to expectant mothers ..	230
Revisits	57
Contacts with social agencies on behalf of mothers	69
Arranging convalescence	8
Visits to maternity wards	52

YOUNG CHILDREN (first visits paid after the birth of the child)

Still births:

Hospital and nursing home confinements	27
Domiciliary confinements ..	2

Live births:

Hospital and nursing home confinements	.. .. .	860
Domiciliary confinements	.. .. .	526

CHILDREN UNDER 1 YEAR

Premature babies—nurses' supervisory visits	..	..	..	2,589
General routine visits	..	..	..	5,383
Illegitimate	..	..	..	240
Ill-cared for	..	..	..	152
Death enquiries	..	..	..	25

CHILDREN 1-5 YEARS

General routine visits	1-2 years	..	4,083
	2-5 years	..	6,909
Illegitimate,	1-2 years	..	83
	2-5 years	..	148
Ill-cared for	1-2 years	..	63
	2-5 years	..	124
	over 5 years	..	158
Found on the area (and not known to have been visited before)		..	536
Contacts with social agencies		..	168

SOCIAL ENQUIRIES FOR ALMONERS,
SHEFFIELD HOSPITALS

First visits	..	..	..	..	48
Revisits	..	..	..	..	40

FOLLOW-UP VISITS, HOSPITAL PATIENTS OTHER THAN CHILDREN

First visits	..	..	..	..	42
Revisits	..	..	..	..	27

TUBERCULOSIS

First visits to patients	..	..	32
Revisits	..	..	389
Attendances at Chest Clinic	..		33
Contacts	..	..	335

OTHER INFECTIONS AND INFESTATIONS

Total visits	..	..	..	258
Contact swabbing	..	..	..	24

HOSPITAL FOLLOW-UP—CHILDREN

0-15 YEARS

First visits	..	..	..	..	308
Revisits	..	..	..	..	347
Attendances at paediatric clinics	..				76

SOCIAL CASE WORK

Visits paid to homes	..	..	80
Cases referred to N.S.P.C.C.	..	..	36
Other social contacts	..	..	16
Interviews, etc.	..	..	442
Attendances, V.D. clinic	..	..	20
Visits, V.D. follow-up	..	..	57

MISCELLANEOUS

Ineffective visits	..	..	..	3,492
Other visits not included above	..			1,436
Nursery classes	..	..	..	12
Child guidance clinics	..	..	..	13
Psychiatric visits	..	..	..	82
Home visits—school children	..			54

DUTIES DELEGATED BY THE CHILDREN'S COMMITTEE

Visits to Oakwood Grange Nursery 12

DUTIES DELEGATED BY THE WELFARE COMMITTEE

Hygiene surveys—temporary accommodation at The Mount	1
Visits paid to separate families in accommodation	3

HEALTH EDUCATION

Mothercraft and Health Education talks, clubs, clinics, and schools . .	324
Talks to outside organisations . .	11

HOME NURSING

STAFF.

During the year seven student district nurses completed training and were successful in the examination. Two of the students were trained for Doncaster Health Department. Two more students have completed training and are waiting to take the examination in January, 1966.

The following table gives details of the nursing staff employed in the Home Nursing service during the past five years:

	Number of staff employed on 31st December				
	1961	1962	1963	1964	1965
FULL-TIME STAFF :					
Superintendent	1	1	1	1	1
Assistant Superintendent	1	1	1	1	1
Queen's Nursing Sisters—Female	14	12	16	16	19
Male	1	1	1	—	—
Queen's Nursing Students—Female	2	1	3	1	2
State Registered Nurses—Female	1	2	1	1	1
SUB-TOTALS ..	20	18	23	20	24
PART-TIME STAFF :					
Queen's Nursing Sisters—Female	6	3	2	3	3
State Registered Nurses—Female	2	2	3	2	2
State Enrolled Assistant Nurses—Female	1	1	—	—	—
SUB-TOTALS ..	9	6	5	5	5
TOTAL STAFF	29	24	28	25	29
Equivalent to full-time staff	26	22	26·3	23·3	27·3

GENERAL NURSING.

There has been an increase in the number of patients nursed during the year. At the commencement of the year 415 cases were brought forward and 1,660 were referred making a total of 2,075 patients nursed.

The 1,660 new cases reported during the year were of the following types :

Medical	1,169	Maternal complications	10
Surgical	376	Maternity cases—mothers	—
Infectious diseases	4	babies	2
Tuberculosis	17	Others	82

They were referred by:

General Practitioners	1,276	Health Dept. Services	22
Hospitals	240	Personal Applications	122

The total cases nursed during the year was 2,075, which was 50 more than those nursed in 1964, and the total of 73,743 visits paid during the year was a decrease of 4,577.

At the end of the year 380 cases were carried forward and during the year 1,695 patients were removed from the register for the following reasons :

Convalescent	1,100	Transfers to other districts ..	58
Died	198	Removed for other causes ..	33
Hospital admissions	246		

The following is a summary of the cases nursed and visits paid during the last five years:

	Total cases nursed	Visits	Average daily visits paid
1961	2,293	79,129	216.8
1962	2,205	80,635	220.9
1963	2,164	82,320	225.5
1964	2,025	78,320	214.0
1965	2,075	73,743	202.0

The classification and age of all cases nursed and visits paid during the last year were as follows:

					AGE GROUPS					Total cases			
					Under 1 year	1-4 years	5-14 years	15-64 years	65 yrs. & Over				
CASES :													
Medical	..	..	..	..	32	37	34	597	794	1,494
Surgical	..	..	..	..	8	15	23	264	120	430
Infectious diseases			..	..	1	2	1	-	-	4	
Tuberculosis		..	..	..	-	-	-	40	4	44
Maternal complications	..		..		-	-	-	10	-	10
Maternity (babies)		..	..		2	-	-	-	-	2	
Others	..	..	..	..	3	1	1	19	67	91
TOTAL CASES NURSED					46	55	59	930	985	2,075	
VISITS PAID :													
Medical	..	..	..	..	311	436	354	18,716	30,871	50,688
Surgical	..	..	..	..	91	126	315	7,436	6,068	14,036
Infectious diseases			..	..	16	14	7	-	-	37	
Tuberculosis		..	..	..	-	-	-	7,268	635	7,903
Maternal complications	..		..		-	-	-	111	-	111
Maternity (babies)		..	..		32	-	-	-	-	32	
Others	..	..	..	..	16	15	2	136	767	936
TOTAL VISITS					466	591	678	33,667	38,341	73,743

CHILDREN'S NURSING UNIT.

At the beginning of the year five sick children under the age of 15 years were brought forward ; there were 155 new children during the year, making a total of 160, an increase of 36 cases as compared with last year. The total number of visits paid was 1,735 as against 1,610 the previous year, an increase of 125 visits.

During the year 146 cases were removed from the register when convalescent, 8 went to hospital, 3 removed to other districts, 1 child of 13 years died from an incurable disease, and 2 children remained on the books at the end of the year.

MATERNITY CASES.

Two healthy babies were attended during the illness of the mothers.

CARE OF THE AGED.

The number of aged sick has decreased during the year. There were 265 remaining from 1964 and 720 new cases, making a total of 985 patients nursed with 38,341 visits paid, a decrease of 30 patients and 4,893 visits.

Reasons for removal from the register:

Convalescent	385	Removed for other causes ..	50
Hospital admissions ..	158	Remaining	237
Died	155		

VACCINATION AND IMMUNISATION

SMALLPOX VACCINATION.

During the year records were received of 485 persons who were vaccinated or re-vaccinated. Details of these are given in the following table :

	Under 1 year	1 to 2 years	2 to 4 years	5 to 16 years	Total
Vaccinations ..	14	305	96	34	449
Re-vaccinations ..	-	-	10	26	36

Of these the records of 147 persons were received from private medical practitioners and the remainder from the Corporation's medical officers at the various clinics in the borough.

No cases were reported during the year of generalised vaccinia or post-vaccinal encephalomyelitis, nor were there any deaths from complications of vaccination.

DIPHTHERIA, WHOOPING COUGH AND TETANUS IMMUNISATION.

The following table gives details of the immunisations carried out during the year :

Children who completed their primary immunisation :

Triple antigen (diphtheria, whooping cough and tetanus) ..	1336
Diphtheria and tetanus antigen	91
Tetanus only	594
Diphtheria and pertussis	-
Total ..	2021
Stimulation doses	734

473 records of immunisation and stimulating doses were received from general practitioners.

DIPHTHERIA

The age groups of the children at the time of immunisation were as follows :

	Under 1 yr.	1-4 yrs.	5-15 yrs.	Total
Number of children who— completed a full course of primary immunisation ..	1265	104	58	1427
received a secondary (re- inforcing) injection ..	—	142	585	727

The position at the end of the year in Rotherham regarding immunisation in relation to the child population is given in the following table which gives details of all children who had completed a course of immunisation at any time before that date :

Age at 31.12.65 i.e. born in year	Under 1 yr. 1965	1-4 yrs. 1964-1961	5-9 yrs. 1960-1956	10-15 yrs. 1955-1950	Under 16 yrs. total
Last complete course of injections whether primary or booster.					
1961-1965	640	4906	3542	557	9645
1960 or earlier	—	—	2060	6115	8175
Estimated mid-year child popu- lation	1600	6500	14740		22840
Immunity Index	40·0	75·5	27·8		42·2

WHOOPING COUGH

At the end of the year 13,346 children under 16 years had been immunised against whooping cough. The following table gives details of the age groups of these children.

1950 — 641	1956 — 858	1961 — 527
1951 — 628	1957 — 855	1962 — 629
1952 — 705	1958 — 908	1963 — 1256
1953 — 814	1959 — 921	1964 — 1217
1954 — 823	1960 — 1058	1965 — 638
1955 — 868		
Totals — 10-15 years 4,479	5-9 years 4,600	0-4 years 4,267

B.C.G. VACCINATION.

B.C.G. vaccination against tuberculosis was continued to the 13 plus age group. Of 1,375 children of this age attending school in the County Borough consent was received from the parents of 1,115, an acceptance rate of 81.09 per cent. As a result of the Mantoux tests 1,057 children were subsequently vaccinated during the year with B.C.G. The percentage of children tested who were positive was 22.42. 185 children received B.C.G. vaccination in 1965 under the B.C.G. scheme for contacts. Of these, 28 were done during their stay in Listerdale Maternity Home, the remainder were given at the Chest Clinic. Two babies were admitted to Oakwood Grange Nursery for a period of isolation following B.C.G. vaccination.

ROUTINE B.C.G. VACCINATION OF SCHOOL CHILDREN.

Number of eligible children	1375
Total consents received	1115
Acceptance rate	81.09%
Of those 260 children for whom consent was not obtained 19 were known to have had B.C.G. or attended the Chest Clinic as contacts or cases.	
Number of children negative to Heaf test	820
Number of children positive to Heaf test	237
Percentage of positive reactors	22.42%
Of the 237 Heaf positive children 5 were found to have had B.C.G. or attended the Chest Clinic as contacts.	
Number of children given B.C.G.	819
Total number of absentees	58

Miniature X-Ray examinations at the Sheffield Mass X-Ray Centre were offered to 184 positive children (160 from 1964 and 24 from 1965), and 150 were X-rayed. All were found to be free from tuberculosis.

POLIOMYELITIS VACCINATION.

Sabin (Oral) Vaccine (commenced in March, 1962)

Dose	Year of birth				Expectant mothers	Total
	1965-59	1958-48	1947-43	Before 1943		
First	6,228	866	121	1,517	23	8,755
Second	5,697	742	104	1,267	21	7,831
Third	6,570	1,354	250	4,013	22	12,209
Fourth	739	2,683	114	119	—	3,655
Fifth	1	191	1	—	—	193
	19,234	5,836	590	6,916	66	32,643

Number of doses of oral vaccine given in 1965 :

Children born 1965-59	5772
Persons born 1958-48	777
Persons born 1947-43	106
Persons born before 1943	483
Expectant mothers	7
Total	7145

AMBULANCE SERVICE

In the year under review, the Ambulance Service has been called upon to deal with a total of 29,831 cases, involving a total mileage of 119,942 miles.

Type of case	Number of cases	Mileage involved
Emergency cases :		
Works accidents	243	117033
Street accidents	792	
Emergency illnesses	1457	
General illness cases :		
Admission to hospitals	3171	
Outpatients—stretcher	3089	
—sitting cases	20927	
Midwives transport	151	697
Assistance to other authorities	301	2212
Totals ..	29831	119942

The cases dealt with within the Borough averaged 339 per thousand of the population with an average mileage of 3.9 miles per case. The average miles per case for other authorities has been 7.3 per case.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

HOSPITAL LIAISON

INVESTIGATIONS OF HOME CONDITIONS.

The following table gives details of the work performed by Health Visitors and Home Help Visitors under the arrangements made with the Rotherham and Mexborough Hospital Management Committee for the furnishing of home reports where necessary for inclusion in the patient's hospital record. All discharges from hospital are notified and follow-up visits are paid to the homes of children, old people, and other cases where a request for this has been made:

				Hospital	Number of visits	
					Health Visitors	Home Help Visitors
Visits to hospitals, etc.						
Paediatric clinics and wards	..	..		Rotherham Hospital	76	—
				Moorgate General Hospital		
Maternity wards	..	..	..	Moorgate General Hospital	52	—
Geriatric wards	..	..	..	Moorgate General Hospital	—	100
				Badsley Moor Lane Hospital	—	42
				Oakwood Hall Hospital	—	—
				Rotherham Hospital	—	99
				Rosehill Hospital	—	—
General wards	..	..	..	Rotherham Hospital	—	99
				Moorgate General Hospital		100
Chest Clinic	..	..	..		33	—
Investigation of home conditions.						
'A' forms for children admitted to hospital and including special reports requested by Paediatrician or Chest Physician from health visitor attending clinic	..	..	..	Moorgate General Hospital	308	—
				Rotherham Hospital		
				Oakwood Hall Hospital		
'A' forms for aged sick admitted plus any special reports asked for by Physician				Moorgate General Hospital	—	682
				Badsley Moor Lane Hospital	—	15
				Rotherham Hospital	—	559
				Rosehill Hospital	—	—
Aged persons surveys of home conditions for future care	..	..	..	Moorgate General Hospital	—	682
				Badsley Moor Lane Hospital	—	15
				Rotherham Hospital	—	559
'A' Forms, for aged sick and others	..			Moorgate General Hospital	108	75
				Rotherham Hospital		
				Oakwood Hall Hospital		
Tuberculosis survey visits	..	..		Oakwood Hall Hospital	32	—
Enquiries from almoners of Sheffield hospitals re home conditions	..			Sheffield Royal Hospital	88	64
				Sheffield Royal Infirmary	(all sources)	
				Sheffield National Centre for Radiotherapy		

	Hospital	Number of visits	
		Health Visitors	Home Help Visitors
Reports on social conditions re applications for hospital confinement ..	Moorgate General Hospital Listerdale Maternity Home Hallamshire Maternity Home	890	—
Supervisory visits to patients on discharge from hospital			
‘B’ forms and special requests for children	Moorgate General Hospital Rotherham Hospital Oakwood Hall Hospital		
‘B’ forms and special requests for aged	Moorgate General Hospital Badsley Moor Lane Hospital Rotherham Hospital	— — —	326 1 453
‘B’ forms and special requests for others including tuberculosis	Moorgate General Hospital Rotherham Hospital Oakwood Hall Hospital	92	40

PAEDIATRIC CLINICS.

The number of attendances made by children at these clinics was as follows:

	Moorgate General Hospital	Doncaster Gate Hospital
Children under 5 years	99	178
Children 5 years and over	92	215

The Consultant Paediatrician held 2 special development progress clinic sessions at Child Welfare Centres during the year.

MATERNITY DEPARTMENT, MOORGATE GENERAL HOSPITAL.

Regular visits have been made by health visitors to the Maternity Department of the Moorgate General Hospital:

Number of visits made	52
Number of mothers interviewed	444

CHEST CLINIC.

Thirty-two cases of tuberculosis were notified in 1965 and home background reports were submitted to the Chest Physician in each case. Of the 335 persons in contact with tuberculosis all attended the Chest Clinic for examination. Health visitors made 421 visits to tuberculous households during the year. 33 liaison visits were made to the Chest Clinic.

HOME ACCIDENTS.

There was an increase of 377 home accidents on the previous year. However, many were minor injuries and did not really warrant attendance at hospital. The majority of people do not have simple first aid dressings in their homes, consequently for the slightest injury they attend hospital for dressings to be applied. The practice of visiting all children under 5 years of age where a home accident has occurred still continues ; parents are warned and advised about the prevention of such accidents.

The following table gives a summary of persons who were treated at Doncaster Gate Hospital as a result of home accidents:

	Total number of accidents to persons				Number of accidents causing scalds to persons				Number of accidents causing burns to persons			
	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total	Under 5 yrs.	5-64 yrs.	65 yrs. and over	Total
January												
1965	81	434	28	543	6	8	-	14	10	3	-	13
1964	63	387	28	478	3	2	-	5	4	12	1	17
February												
1965	88	466	21	575	3	6	-	9	9	7	1	17
1964	73	406	22	501	3	4	-	7	2	6	-	8
March												
1965	107	468	32	607	2	10	1	13	6	12	1	19
1964	94	421	27	542	4	11	-	15	4	5	-	9
April												
1965	110	560	28	698	6	5	-	11	4	10	-	14
1964	115	512	24	651	7	2	-	9	5	10	-	15
May												
1965	140	614	30	784	3	4	-	7	7	7	2	16
1964	134	603	38	775	9	8	-	17	7	9	-	16
June												
1965	131	602	28	761	3	3	-	6	4	11	1	16
1964	123	573	25	721	7	6	-	13	5	11	1	17
July												
1965	129	562	33	724	1	3	-	4	1	9	1	11
1964	126	587	40	753	3	10	1	14	4	11	-	15
August												
1965	184	579	40	803	5	8	-	13	4	9	-	13
1964	116	544	34	694	3	7	1	11	2	11	-	13
September												
1965	147	521	35	703	4	3	-	7	2	9	-	11
1964	147	561	35	743	2	5	-	7	3	5	1	9
October												
1965	110	569	36	715	3	3	1	7	2	13	-	15
1964	101	488	26	615	2	2	-	4	3	8	-	11
November												
1965	78	420	32	530	6	3	-	9	5	12	-	17
1964	77	480	23	580	3	3	-	6	7	9	-	16
December												
1965	72	405	44	521	6	5	-	11	7	16	-	23
1964	67	428	39	534	4	6	1	11	6	10	-	16
Total												
1965	1377	6200	387	7964	48	61	2	111	61	118	6	185
1964	1236	5990	361	7587	50	66	3	119	52	107	3	162

TUBERCULOSIS

During the year 32 new cases of tuberculosis were notified or came to the notice of the Medical Officer of Health. 335 persons were examined as contacts at the contact clinic. Persons who failed to keep their appointments were re-visited and urged to attend.

In every household where there was a known case of tuberculosis, parents of young children were informed of the benefits of B.C.G. vaccination and 185 children were vaccinated during 1965.

The health visitors paid 421 visits and re-visits to patients during 1965 and made 33 attendances at the Chest Clinic for the purpose of exchanging information regarding cases or contacts of the disease. 44 cases were nursed at home by the Home Nurses, who made 7,903 nursing visits. Details of these cases will be found in the Home Nursing Section of this report.

TUBERCULOSIS CARE COMMITTEE

The work of the Rotherham Tuberculosis Care Committee has continued on the lines indicated in previous reports. The area covered by the Committee is that of the Rotherham Chest Clinic area comprising the County Borough of Rotherham and the surrounding West Riding districts of Maltby and the Rawmarsh Urban District Councils, and the Rotherham and Kiveton Park Rural District Councils.

The scheme of care and after-care is operated through the Rotherham Chest Clinic and all recommendations for assistance are made by the Chest Physician. Secretarial assistance and other sundry expenses are provided by the Rotherham Corporation.

Grants of clothing, bedding and extra nourishment were made to patients. The scheme of Christmas grants to patients on leave from hospital was continued, together with gifts to those necessitous patients receiving treatment at the Chest Clinic or in receipt of assistance from the Committee.

DOMESTIC HELP

The demand for the Home Help Service has continued with a marked increase in the hours of service provided in maternity cases. The assistance given to the aged is still responsible for three quarters of the service provided.

The following table gives details of the 1,156 homes assisted by home helps during 1965 :

	Brought forward from 1964		New cases		Total cases		Total
	Days	Nights	Days	Nights	Days	Nights	
Maternity	9	—	199	—	208	—	208
Other sickness	23	—	36	1	59	1	60
Old age	559	1	192	4	751	5	756
Tired mothers	—	—	1	—	1	—	1
Sick children	—	—	1	—	1	—	1
Evening Service ..	130	—	—	—	130	—	130
Total ..	721	1	429	5	1,150	6	1,156

An analysis of the hours of service rendered by home helps during 1965 is given in the following table:

	Day (Hours)	Evening (Hours)	Night (Hours)	Total (Hours)
Maternity	14,781	—	—	14,781
Tuberculosis	—	—	—	—
Other sickness	11,383	—	24	11,407
Old age	165,744	15,609	210	181,563
Tired Mothers	109	—	—	109
Sick children	4	—	—	4
Washing Centre ..	5,866	—	—	5,866
Training	2,521	—	—	2,521
Total ..	200,408	15,609	234	216,251

EVENING AND NIGHT SERVICE.

Looking ahead it is reasonable to foresee further expansion in these services. Assistance is provided particularly to aged people living alone who have no friends or relatives to help them. This means much to the health and happiness of frail old people who look forward to the visits of their helpers to prepare them for bed.

HOME HELP RECRUITMENT.

The position regarding the availability of home helps is as reported in previous years. Women are selected after recommendation by present home helps.

There is a decrease in the number of home helps employed, and at the end of 1965 the number was 180.

CARE OF THE AGED.

When the question of adequate care for old people arises, flexibility is often restricted by economics. During the year under review many problems have evolved and been resolved, but some, which are a direct result of disintegration of family life, cannot possibly be fully solved by the application of the domiciliary services. The value of this service is the ability to give help in the home, to improve living conditions and extend to the elderly a foster relationship which helps them to appreciate they are still important members of society.

In considering the resources available in the Home Help Service and the needs of old people in differing situations, all of whom, naturally have a tendency to think that theirs is a need of priority, it must be appreciated that the real priority of need for this service is the home-bound old person living entirely alone who experiences more difficulties and hardships. More attention was focussed on this group during 1965, and there evolved an urgent need for an early morning service. To provide this additional service within the present economy, it was necessary to call for greater effort from all personnel concerned. To achieve this, group discussions were arranged between the Home Help Organiser and the helpers, and as a result an early morning service was introduced. Each home help agreed to work daily from 8.00 a.m. to 9.00 a.m. on group work, making six calls each to make fires and morning tea. This early morning service is being received by the old people with warm approval. One old lady of 88 years said, "ee by gum luv if our Reg ad knowd abart thee and these cups of tea and fire tha maks, id never a gone, ee wore allus freeghtened to deeath to miss owt," ("Reg" being her dear departed). It is evident from this successful experiment that it is necessary to use imagination and adjust services in the light of local needs.

HOSPITAL LIAISON.

In the sphere of hospital liaison, the consultations held between social workers and the medical staff at the respective hospitals have resulted in continuity of care. The social worker's survey on home circumstances has become a permanent feature of hospital priorities. 1965 stands out as a period of immense activity and the liaison has acquired a greater urgency. A more concentrated effort has also been made to persuade sons and daughters to make more practical contributions towards the care of their parents.

A serious attempt has been made by Dr. A. M. Cantor, Geriatrician at Moorgate General Hospital, and the Local Health Authority, to set out guide lines for the future

in this very important field of social work. The hospital waiting list for geriatric cases at the end of 1965 was 1 male and 1 female.

709 casualty visits have been made by the social workers and, as reported in previous years, the average age of the patients remains at 80 years.

The following figures show an increase in the work performed by the social workers :

	Hospital				Miscellaneous including Sheffield hospitals
	Doncaster Gate	Moorgate General	Badsley Moor Lane	Oak-wood	
No. of visits to hospital	99	100	42	9	—
No. of interviews in hospital ..	432	479	14	9	—
No. of home visits	559	682	15	75	64
No. of cases for supervision by Social Worker on discharge ..	453	326	1	40	39
No. of Home Helps arranged for patients on discharge	77	67	—	3	6
No. of casualty visits	709	—	—	—	—

Total number of visits for year — 4,278

Persons discharged from hospital have been supplied with home helps according to their degree of disability and home circumstances. 153 home helps have been provided during the year under review.

The closest possible attention has been given to the case load of the social workers in the Local Health Authority care and after-care service, and evidence supports the need for further recruitment to allow more emphasis to be concentrated upon case work and consultation.

OCCUPATIONAL THERAPY SERVICE

Many old people have a great fear of becoming inactive so they welcome the provision of the Occupational Therapy Service. It helps to overcome physical disability and prevent the threat to their independence.

The following figures show the number of people participating in this service and are an indication of their appreciation :

	60-70 (Years)	70-80 (Years)	80-90 (Years)	90 and over (Years)	Total
Females	240	358	69	25	692
Males	—	2	—	—	2
Total	240	360	69	25	694

The annual sale of work which was held in the Town Hall was opened by His Worship the Mayor, Alderman W. Beevers, supported by Councillor A. Wilde, Chairman of the Health Committee and Councillor P. C. Wright, Chairman of the Old People's Welfare Committee, prizes were presented by the Mayoress.

DOMICILIARY MEALS SERVICE.

Improvement in the health of old people has been made possible by the provision of extra meals and malnutrition has been prevented. Appreciation of the helper who prepares the meal in an old person's own home is expressed in many letters received in the department.

Research into the meals service proves the need for more effort to be concentrated nationally upon the problem of rising costs which play havoc with old people's pensions and savings.

6,797 meals were prepared by home helps in 1965. Thanks must again be given to Councillor P. C. Wright, Chairman of the Old People's Welfare Committee, for his personal interest and help in the problem of monetary difficulties experienced by old people.

WASHING CENTRE.

The framework laid down in previous years seems to be filling in and the assistance given to the Home Help Service is becoming more complete. The value of this service is reflected in recruitment. It has an effect upon the attitude of the women towards becoming home helps and makes a substantial contribution towards the economy of the service.

The home nurses are very grateful for the provision of clean linen.

Number of washes 11,313.

Number of articles 96,425.

MATERNITY.

It is pleasing to note that there has been an increase of 1,398 hours' service given to this group and mothers have been provided with the necessary assistance to help them through a difficult period.

HOME SAFETY.

The work of the home help in home safety continues and a number of fireguards were issued in 1965.

NURSING EQUIPMENT.

Medical equipment supplied on loan is as follows :

Articles	Number Loaned							
Rubber sheets	112
Draw sheets	135
Bed pans	209
Bottles	136
Back rests	108
Air rings	147
Wheel chairs	31
Walking sticks	17
Crutches	30
Bed tables	1
Bed cages	42
Mattresses	4
Commodes	16
Feeding cups	15
Sputum mugs	3
Tripods	7
Ferrules	53
Fracture boards	9
Total number of articles issued								1,075
Total number of articles returned								813
Total number of articles dealt with during the year								1,888

CHIROPODY SERVICE.

During 1965 this service has worked to capacity and additional sessions have been held at Cranworth and Ferham clinics. New premises have been provided at Kimberworth Park and a new clinic has been opened at Canklow.

CHIROPODY

Clinic	Males			Females			Totals		
	Patients		Treatments	Patients		Treatments	Patients		Treatments
	New	Old		New	Old		New	Old	
Redscope	6	41	164	15	95	425	21	136	589
Cranworth	19	106	419	42	248	992	61	354	1,411
Ferham	18	93	369	48	245	871	66	338	1,240
Greasbrough	5	49	144	7	90	269	12	139	413
Domiciliary	35	67	379	48	187	1013	83	254	1,392
Blind Domiciliary	—	2	8	—	—	49	—	12	57
Canklow	4	7	22	7	23	69	11	30	91
Totals						254	1,263	5,193	
							1,517		

IN SERVICE TRAINING SCHEME.

Three courses were held in 1965 and consisted of sixteen two-hourly sessions. This scheme was fully reported in 1964. At the request of the home helps, group discussions have been increased. This enables a helper to understand how her work fits in to an advanced Social Service.

AN APPRECIATION.

The following is an example of conditions under which some home helps are called upon to work and the Local Health Authority should indeed be most grateful to this class of worker, who is prepared to work at risk.

A very belligerent old gentleman, aged 79 years, lives alone in a house consisting of four rooms, bathroom and outside toilet.

Back Bedroom 1 double bedstead leaning on wall.
 1 single bed (iron hospital type)
 2 square mattresses—both ripped, flocks falling out
 1 wooden wash stand.
 The door of the bedroom leaning on wall.
 3 chairs.

Room very dirty and neglected. Dirty curtains up to the window. No floor covering.

Front Bedroom (In which old gentleman sleeps)

1 $\frac{3}{4}$ iron bedstead. 1 bedroom chair.
1 wooden wash stand. No floor covering.
Dirty long net curtains and half way curtain to window.

When the bed was stripped, the following were found (working from the top down to the springs) :

- 1 green eiderdown—in good condition.
- 4 army blankets sewn together with string (3 blankets in fair condition but very dirty and one needed to be destroyed.)
- 1 dirty flannelette sheet.
- 1 single mattress, flocks falling out, also moth eaten.
- 1 single mattress, torn, but otherwise in good condition.
- 1 pegged hearth rug.
- 1 piece of coconut matting.
- 1 large hessian bag.
- 2 very thick pieces of tarpaulin.

Wedged between the bottom of the mattresses, etc., and the foot of the bed were two coats—one moth eaten and dirty, the other a gaberdine, can be cleaned and worn. Thrown over the foot of the bed was another eiderdown, very moth eaten and dirty.

Living Room

- 1 dirty kitchen table littered with various dirty pots, pans and food.
- 1 dresser in dirty condition, littered with cigarette ends.
- 2 kitchen chairs.
- 2 small fireside chairs put together to form some sort of bed.
- No floor covering.
- Yorkshire range—damper cracked and unusable.

Kitchen	Empty apart from bits of wood ready for the fire. Appears to have no kettle or decent cooking equipment. Gas ring.
Bathroom	Bath, certainly not used, contained gardening equipment. On a string clothes line over the bath were 2 shirts, a towel and vest which must have been there for months.
Outside Toilet	Covered in faeces, the door rotten where the old man had constantly urinated.

DAY CARE SCHEME.

Excellent progress has been made with the Day Care Scheme provided by the Welfare Department under the expert administration of the Chief Welfare Officer. The scheme, which ensures protection against malnutrition and loneliness, provides care for old people in one of the Welfare Department homes during the day and transports them to their own homes each night. Discussion has taken place between the Home Help Organiser and the Chief Welfare Officer and the following active support has been given by the Home Help Service.

Home helps call on old people in their own homes each morning to help them to get ready for day care, and visit them again in the evening to make a fire and hot drink before they retire for the night. The part of the scheme which involves the Home Help Service operates only for old people living alone without relatives who are able to give assistance. There is no doubt that this joint service should be expanded. Obviously such a scheme needs to be handled with discretion. It should be remembered that old people cannot be fitted into a rigid programme. Continued success will depend upon the co-operation of all concerned, and a much closer working arrangement should be encouraged between the officers of both departments for the benefit of the old people who accept this type of care.

HYPOTHERMIA.

It is important to bear in mind the danger to old people of the effect of cold weather, and efficient forms of room heating are essential if hypothermia is to be avoided. An elderly person must have a kitchen or living room at a temperature of not less than 65 deg. F., the night clothes and the bed should be warm and the chill taken off the bedroom. Insufficient importance has been put upon the need to provide central heating in old people's dwellings.

GENERAL MEDICAL PRACTITIONER AND SOCIAL WORKER ATTACHMENT.

The introduction of the Social Worker attachment to the General Medical Practitioner has enabled closer unity and effective contact in domiciliary care. The ever-widening range of social need points to daily consultations to promote active and positive support to this need.

It is premature to give assurances that this arrangement will succeed. The emphasis must be on experiment and the hope that the efficient organisation centred around the patient will eventually find the most successful solution to the problems.

MENTAL HEALTH

Mr. K. Coxon was appointed to fill the vacancy of Assistant Mental Health Officer following upon the resignation of Mr. P. Kirby.

Mr. W. R. Sidaway, Mental Health Officer, received the declaration of recognition of experience from the Council for Training in Social Work.

TRAINING COURSES.

Mr. E. A. Harcourt of the Adult Training Centre staff attended the 1964/5 training course organised by the National Association for Mental Health in Birmingham.

In September, Mrs. J. E. Bruce of the Junior Training Centre staff, commenced the Association's 1965/66 course held in Sheffield.

JUNIOR TRAINING CENTRE. (Number on register 20 males and 17 females).

Since greater emphasis was placed on training in self help, communication, socialisation and occupation, much progress has been made at this Centre.

Success in reading, using Dr. C. Gattegno's method, is very evident. Although it would be foolish to make exaggerated claims, there are four or five children in the older group who have improved considerably since this method was introduced.

The physical training apparatus, which now includes a trampoline, has, in addition to giving the children untold pleasure, improved their muscular co-ordination and confidence quite a lot.

The weekly session at the Swimming Baths continues to function satisfactorily and, although as yet no child has succeeded in swimming, progress has been made and the instructor is confident that two or three will do so eventually.

A film entitled "Another Kind of School," was produced in the Centre, demonstrating modern methods of teaching and training the mentally sub-normal child. It depicts the every-day activities of this Centre and has a running time of 25 minutes.

Attendances at the Centre for the year totalled 12,478 half days out of a possible 14,699 giving a percentage attendance of 84.89.

ADULT TRAINING CENTRE. (Number on register 23 males and 25 females).

The contract work of carding combs and assembling nursing packs continues at the Centre. Three further contracts were obtained during the year—the stamping of doctors' National Health Insurance prescription pads and medical certificates; assembling pipettes and boxing bottle screw-caps for a local glass-works; and assembling nursing packs for another local hospital.

The contract work now undertaken is the maximum amount possible in view of the short hours of attendance and the lengthy holiday periods.

Re-organisation of staff, hours of attendance and holidays are at the moment under review and it is anticipated that re-adjustment of these will take place early in 1966.

Attendances for the year numbered 19,104 half days out of a possible 20,736 giving a percentage attendance of 92.13.

Details of the contract work completed for the year are as follows :

1.	Pre-packed Dressing Contract	Packed
	(a) Home Nursing Service	
	Large packs	5,458
	Small packs	6,112
	(b) Rotherham Hospital	
	Large packs	9,216
	Small packs	16,632
	(c) Moorgate General Hospital	
	Large packs	12,822
	Small packs	34,716
		<hr/>
	Total	84,956
		<hr/>
2.	Comb Contract,	Combs Carded, 3,470 gross
3.	Prescription and Medical Certificate Pads Stamped,	1,669
4.	Glass Works Contract	
	(a) Pipettes	Assembled, 1,190 gross
	(b) Screw caps	Boxed, 1,253 gross

OPEN DAY—JUNIOR AND ADULT TRAINING CENTRES.

Open Day at both Centres was held on Wednesday, 8th December, 1965. The Centres remained open throughout normal Centre hours, and the attendance at both was quite good.

Only a small amount of handicraft work was on display, this being entirely due to the new teaching methods at the Junior Training Centre, and the volume of contract work now being undertaken at the Adult Centre.

PARENT TEACHER ASSOCIATION.

This Association continued to function satisfactorily and spent £85 in providing extra amenities for both the Junior and Adult Training Centres.

MENTAL HEALTH HOSTEL (Park Lea, Doncaster Road)

Officially opened in November, 1964, to function as a transitional service with a strong emphasis on rehabilitation and a return to normal living, the hostel has achieved a measure of success. The securing of employment for the residents, most of whom are schizophrenic, has not proved to be as big an obstacle as at first thought.

This has been largely overcome by full and frank explanations to prospective employers, with the assurance that they would have the full co-operation of the Mental Health Service on any issue which may arise.

Just as important as work is the supervision and regularity of medication. The effect of this is very noticeable and it would appear that work and medication together make for reasonably good rehabilitation.

The finding of accommodation for residents considered suitable to live in the community has been rather disappointing but this is not altogether surprising in view of the fact that many working people experience the same difficulty. Is it because we are living in an affluent society and there is now no need to take in lodgers to subsidise the household income? At the commencement of the year there were three males and four females in residence and during the year twelve males and seven females were admitted. Discharges during the year numbered seven males and four females.

The following table summarises the rehabilitation of residents at the Park Lea Mental Health Hostel :

	Male	Female	Total
In residence on 31st December, 1964	3	4	7
Working	2	3	5
Unemployed	1	1	2
Attending rehabilitation course..	—	—	—
Admitted during 1965	13	7	20
Returned home to or alternative accommodation	7	2	9
Readmitted to hospital	2	1	3
In residence on 31st December, 1965	8	7	15
Working	8	6	14
Unemployed	—	1	1
Attending rehabilitation course..	—	—	—

Employment was found for 8 males and 5 females, including one male who was found employment after a course at the Industrial Rehabilitation Unit in Sheffield.

SHORT TERM CARE (Ministry of Health Circular 5/52).

Cases were admitted into hospital for periods of short term care. Details are as follows:—

	Male	Female	Total
Thundercliffe Grange Hospital, Rotherham	7	2	9
Dronfield Hospital, Dronfield	2	—	2
St. Catherine's Hospital, Doncaster	3	—	3
Whittington Hall Hospital, Chesterfield	—	3	3
Total 1965 ..	12	5	17
Total 1964 ..	17	2	19

COMMUNITY CARE OF THE SUB-NORMAL AND SEVERELY SUB-NORMAL CASES

The following statistics relate to the number of sub-normal and severely sub-normal cases who were receiving community care as at 31st December, 1965 :

	Under 16 years		Over 16 years		Total
	Male	Female	Male	Female	
Severely sub-normal under guardianship ..	—	—	—	2	2
Severely sub-normal and sub-normal receiving community care	22	16	75	85	198
Totals for 1965 ..	22	16	75	87	200
Totals for 1964 ..	27	18	75	89	209

With the exception of the two cases under guardianship (supervised by the Brighton Guardianship Society) the community care of the above cases was carried out by officers of the Mental Health Service. The number of routine visits made in connection with this category of patients totalled 820 compared with 1,021 for the year 1964. In addition to the routine visits made, numerous visits were made to various agencies on behalf of or in the interests of these cases.

WAITING LIST—SUB-NORMAL AND SEVERELY SUB-NORMAL PATIENTS.

A survey of cases awaiting admission into hospital as at 31st December, 1965, shows that 21 cases were awaiting admission. Details are as follows :

	URGENT				NON-URGENT				Total
	Under 16		Over 16		Under 16		Over 16		
	Male	Female	Male	Female	Male	Female	Male	Female	
Cot and Chair cases ...	-	-	-	-	-	1	2	-	3
Low Grade (ambulant) ...	-	-	3	1	-	1	9	4	18
High Grade (ambulant) ...	-	-	-	-	-	-	-	-	-
Total for 1965 ...	-	-	3	1	-	2	11	4	21
Total for 1964 ...	3	7	-	2	-	1	11	3	27

For the first time for many years little difficulty has been experienced in obtaining hospital accommodation. It will be observed that the waiting list has been reduced by five and in addition three emergency cases were admitted making eight admissions in all.

GUARDIANSHIP CASES.

The Brighton Guardianship Society continues to supervise on behalf of the Rotherham Health Authority two severely sub-normal adult females who are under the guardianship of this authority.

REFERRED FOR CARE (SUB-NORMAL AND SEVERELY SUB-NORMAL CASES).

The following cases were referred for care during 1965:

	Male	Female	Total
(1) Referred by Local Education Authority under the provisions of Section 57(4) Education Act, 1944	—	1	1
(2) Referred informally under the provisions of Section 28, National Health Service Act, 1946 (Special school leavers)	9	4	13
(3) Transferred from other authorities	4	3	7
Total 1965	13	8	21
Total 1964	10	18	28

As in previous years the majority of cases referred for care were notified by the Local Education Authority.

MENTAL HEALTH ACT, 1959 (SUB-NORMAL AND SEVERELY SUB-NORMAL SECTION).

The following table gives details of sub-normal and severely sub-normal patients who were in hospital on 31st December, 1965:

	Male	Female	Total
St. Catherine's Hospital, Doncaster	28	28	56
Grenoside Hospital, Sheffield	8	3	11
Whittington Hall Hospital, Chesterfield	—	5	5
Stoke Park Hospital, Bristol	2	1	3
Thundercliffe Grange Hospital, R'ham.	7	4	11
Rampton Hospital, Retford	3	1	4
St. Joseph's Home, Sheffield	—	3	3
Fir Vale Hospital, Sheffield	—	2	2

	Male	Female	Total
Aughton Court Hospital, Sheffield ..	-	3	3
Borocourt Hospital, Reading ..	1	-	1
Victoria Hospital, Mansfield ..	1	-	1
The Manor Hospital, Epsom ..	1	-	1
Dronfield Hospital, Dronfield ..	1	1	2
Glenfrith Hospital, Leicester ..	1	-	1
Ridgeway Hospital, Derbyshire ..	1	-	1
Balderton Hospital, Newark ..	1	-	1
Hollowmeadows Hospital, Sheffield .	2	-	2
Middlewood Hospital, Sheffield ..	1	-	1
Total	58	51	109

The total number of cases shows an increase of eight from the previous year. During the year seven males and two females were admitted and one male was discharged.

Twenty-eight cases granted holiday leave were escorted from and to hospitals by officers of the Mental Health Service.

MENTAL HEALTH ACT, 1959 (MENTALLY ILL)

(1) HOSPITAL ADMISSIONS.

The following table gives details of cases referred to the Mental Welfare Officers and the resultant action taken with comparable figures for the previous year.

Disposal of cases referred :	1965	1964
Admitted to hospital, Section 5, Mental Health Act, 1959	79	52
Admitted to hospital, Section 29, Mental Health Act, 1959	38	44
Admitted to hospital, Section 25, Mental Health Act, 1959	35	14
Admitted to hospital, Section 26, Mental Health Act, 1959	2	-
Admitted to hospital, Section 60, Mental Health Act, 1959	4	1
Hospital admission not necessary	25	15
	183	126

The total number of hospital admissions shows an increase of 47 over the previous year. Mental Welfare Officers were called out on 28 occasions outside normal office hours.

(2) AFTER CARE (SECTION 28, NATIONAL HEALTH SERVICE ACT, 1946/SECTION 6, MENTAL HEALTH ACT, 1959).

At the commencement of the year 158 cases were receiving after-care following discharge from psychiatric hospitals. The number of cases referred during the year totalled 106, an increase of 11 over the previous year.

The total number of cases under this heading receiving after-care is now 162. During 1964, 1,484 visits were made as compared with 1,223 for this year. The decrease in the number of visits can be accounted for by the resignation of one of the Mental Welfare Officers and sickness. Visits to psychiatric out-patient clinics (four), the interviewing of patients in hospital pending discharge and regular visits to the Mental Health Hostel were maintained through the year despite staffing difficulties.

(3) LOCAL AUTHORITY—PREVENTIVE AND AFTER CARE CLINICS.

This service continues to operate each Friday afternoon, Dr. R. J. Kerry, Consultant Psychiatrist, Middlewood Hospital, being in attendance.

During the year 37 sessions were held and 234 patients were treated as compared with 42 sessions held and 297 patients treated last year.

WELFARE

In accordance with Circular 1/54 of the Ministry of Health dealing with the subjects for inclusion in the Annual Reports of Medical Officers of Health the following items are included :

NATIONAL ASSISTANCE ACTS 1948 AND 1951

The Welfare Committee is responsible for the carrying out of the Council's Schemes under the above Act.

A joint sub-committee dealing with the Care of the Aged was formed in March, 1951, with three members each from the Health and the Welfare Committees of the Council. These are the Committee's Chairmen and Vice-Chairmen and one other member from each committee.

BLIND PERSONS

The number of blind persons registered in the Borough at the 31st December, 1965, was 198. There was a decrease of 16 from the previous year, and the following table gives details of the age and sex of the cases remaining on the register :

Age groups	Males	Females	Total
Under 5 years	1	1	2
Over 5 years and under 16 years	2	3	5
Over 16 years and under 20 years	2	—	2
Over 20 years and under 30 years	2	3	5
Over 30 years and under 40 years	3	3	6
Over 40 years and under 50 years	6	8	14
Over 50 years and under 60 years	13	6	19
Over 60 years and under 70 years	17	24	41
Over 70 years	32	72	104
Totals	78	120	198

Details of the employability of the cases over 16 years are as follows :

	Males	Females	Total
Employed	12	1	13
Trained, but unemployed	1	—	1
Training	—	—	—
Trainable	1	—	1
Unemployable	61	115	176
Totals	75	116	191

The following table gives details of the occupation of the persons employed, or trained but unemployed:

Occupation	Employed		Trained, but unemployed	
	Males	Females	Males	Females
Basket Maker	1	-	-	-
Braille copyist	1	-	-	-
Brush Maker	4	-	-	-
Knitter	-	1	-	-
Mat Maker	1	-	-	-
Physiotherapist	1	-	-	-
Piano Tuner	-	-	1	-
Poultry Keeper	1	-	-	-
Telephonist	1	-	-	-
Working Proprietor	1	-	-	-
Labourer	1	-	-	-
Totals	12	1	1	-

In 1965 each new case was examined by the Consultant Ophthalmologists, Miss M. A. C. Jones or Mr. T. S. Maw, and Form B.D.8 completed. 54 reports on this form were received during 1965: 18 were in respect of persons certified blind; 14 were partially sighted; 11 were re-examined, of these 6 were transferred from the partially sighted to the blind register, 5 remained on the partially sighted register, 3 of these to be re-examined in a year's time, 1 in 18 months and the other in two years; 11 cases were found to be not blind.

A study of these reports shows the following conditions obtained:

Condition	Blind	Partially sighted	Re-examined	Not blind
Anophthalmos	-	-	-	1
Cataract	6	4	4	3
Cataract and Macular Degeneration	-	1	-	-
Central Choroido-Retinal Atrophy and Cataract	-	1	-	-
Central Retinal Artery Occlusion and Corneal Leucoma	1	-	-	-
Central Corneal Dystrophy	1	-	-	-
Central Choroidal Sclerosis	1	-	1	-
Central and Peripheral Choroido Retinal Atrophy	-	1	-	-
Choroido and Retinal Atrophy	-	-	2	-
Choroidal Sclerosis	-	-	1	-
Chronic Glaucoma	1	-	-	-
Detached Retina	-	-	-	1
Disciform Degeneration	2	1	-	-
Early Cataract and Corneal Leucoma	-	-	-	1

Condition	Blind	Partially-Sighted	Re-Examined	Not Blind
Fuchs Corneal Dystrophy	-	1	-	-
Glaucoma	1	-	-	-
High Myopia and Cataract	-	1	-	-
Keratitis	-	-	-	1
Lens Opacities	-	-	-	1
Macular Degeneration	1	-	-	-
Macular Degeneration and Cataract	-	1	-	-
Macular Degeneration and Obliterative Vascular Sclerosis	-	-	-	1
Myopia	1	1	-	1
Optic Atrophy	1	-	-	-
Phthisis Bulbi and High Myopia	1	-	-	-
Perforating Keratitis and Endophthalmitis	-	1	-	-
Retinitis Pigmentosa	1	-	1	-
Retinopathy and Cataract	-	1	-	-
Retinopathy	-	-	1	-
Retinal Detachment and Cataract	-	-	1	-
Sublimated Cataract	1	-	-	-
No Disease	-	-	-	1
Totals ..	18	14	11	11

The following observations are made in amplification of the above table:

ANOPHTHALMOS.

One case examined and found to be not blind—no treatment recommended.

CATARACT.

Six cases registered blind, two requiring medical supervision, one surgical treatment and three no treatment recommended.

Four cases examined and found to be partially-sighted, two requiring ophthalmic medical supervision, one surgical treatment at early convenience, one no treatment recommended.

Four cases re-examined, three being transferred to the Register of Blind Persons. One no treatment recommended.

Three cases examined and found to be not blind, one to have surgical treatment at early convenience, and the other two cases no treatment recommended.

CATARACT AND MACULAR DEGENERATION.

One case examined and found to be partially-sighted. No treatment recommended.

CENTRAL CHOROIDO-RETINAL ATROPHY AND CATARACT.

One case examined and found to be partially-sighted, medical treatment recommended.

CENTRAL RETINAL ARTERY OCCLUSION.

One case examined and registered blind—no treatment recommended.

CENTRAL CORNEAL DISTROPHY.

One case examined and registered blind—no treatment recommended.

CENTRAL CHOROIDAL SCLEROSIS.

One case re-examined and transferred to Register of Blind Persons, no treatment recommended.

CENTRAL AND PERIPHERAL CHOROIDO-RETINAL ATROPHY.

One case examined and found to be partially-sighted, no treatment recommended.

CHOROIDO AND RETINAL ATROPHY.

Two cases re-examined, one transferred to Register of Blind Persons, ophthalmic medical supervision recommended, the other also requiring medical supervision.

CHOROIDAL SCLEROSIS.

One case re-examined requiring ophthalmic medical supervision.

CHRONIC GLAUCOMA.

One case examined and registered blind—no treatment recommended.

DETACHED RETINA.

One case examined and found to be not blind—no treatment recommended.

DISCIFORM DEGENERATION.

Three cases examined, two were registered blind and the other one was found to be partially-sighted. No treatment recommended.

EARLY CATARACT AND CORNEAL LEUCOMA.

One case examined and found to be not blind—no treatment recommended.

FUCHS CORNEAL DISTROPHY.

One case examined and found to be partially-sighted, requiring ophthalmic medical supervision.

GLAUCOMA.

One case examined and registered blind, no treatment recommended.

HIGH MYOPIA AND CATARACT.

One case examined and found to be partially-sighted, no treatment recommended.

KERATITIS.

One case examined and found to be not blind—no treatment recommended.

LENS OPACITIES.

One case examined and found to be not blind—no treatment recommended.

MACULAR DEGENERATION.

One case examined and registered blind, no treatment recommended.

MACULAR DEGENERATION AND CATARACT.

One case examined and found to be partially-sighted, no treatment recommended.

MACULAR DEGENERATION AND OBLITERATIVE VASCULAR SCLEROSIS.

One case examined and found to be not blind—medical treatment recommended.

MYOPIA.

Three cases examined, one registered blind requiring optical treatment, one found to be partially-sighted—ophthalmic medical supervision recommended, and the other found to be not blind—no treatment recommended.

OPTIC ATROPHY.

One case examined and registered blind, no treatment recommended.

PHTHISIS BULBI AND HIGH MYOPIA.

One case examined and registered blind—no treatment recommended.

PERFORATING KERATITIS AND ENDOPHTHALMITIS.

One case examined and found to be partially-sighted, no treatment recommended

RETINITUS PIGMENTOSA.

One case examined and registered blind—no treatment recommended. One case re-examined, no change in category and no treatment recommended.

RETINOPATHY AND CATARACT.

One case examined and registered partially-sighted, surgical treatment recommended.

RETINOPATHY.

One case re-examined and transferred to Register of Blind Persons, medical treatment recommended.

RETINAL DETACHMENT AND CATARACT.

One case re-examined, ophthalmic medical supervision recommended.

SUBLIMATED CATARACT.

One case examined and registered blind, ophthalmic medical supervision recommended.

One case examined and found to be not blind.

The following cases of epilepsy are known to the Welfare Department:

INSTITUTIONAL:	Males	Females	Total
“Rotherstoke”			
(Part III accommodation) ..	2	—	2
“Rookwood”			
(Part III accommodation) ..	1	—	1
David Lewis Colony, Manchester	—	2	2
AT HOME:	1	—	1
On Handicapped Persons Register	19	15	34
	<u>23</u>	<u>17</u>	<u>40</u>

Eleven cases of Cerebral Palsy are also known to that Department, and details of these are as follows:

INSTITUTIONAL:	Males	Females	Total
“Kirk House”, Rotherham			
(Part III accommodation) ..	—	1	1
(Huddersfield C.B. case)			
The Bedford Home, Buxton ..	—	1	1
AT HOME:			
On Handicapped Persons Register	5	4	9
	<u>5</u>	<u>6</u>	<u>11</u>

COUNTY BOROUGH OF ROTHERHAM
(EDUCATION COMMITTEE)



REPORT
OF THE
PRINCIPAL
SCHOOL MEDICAL
OFFICER
FOR THE YEAR
1965

COUNTY BOROUGH OF ROTHERHAM.

GENERAL STATISTICS.

Population—Registrar-General's estimate as at mid-year 1965	...	...	...	...	...	...	...	...	86,780
School population—	...	...	...	...	...	...	...	...	15,152
Area (acres)	...	...	...	...	...	...	...	...	9,255
Nursery Schools :									
Number of schools	...	...	...	...	...	...	...	...	1
Number of departments	...	...	...	...	...	...	...	...	1
Total number on roll	...	...	...	...	...	...	...	...	110
Primary Schools :									
Number of schools	...	...	...	...	...	...	...	...	18
Number of departments	...	...	...	...	...	...	...	...	29
Total number on roll	...	...	...	...	...	...	...	...	8,382
General Secondary Schools :									
Number of schools	...	...	...	...	...	...	...	...	6
Number of departments	...	...	...	...	...	...	...	...	7
Total number on roll	...	...	...	...	...	...	...	...	4,296
Voluntary Primary Schools :									
Number of schools	...	...	...	...	...	...	...	...	2
Number of departments	...	...	...	...	...	...	...	...	2
Total number on roll	...	...	...	...	...	...	...	...	603
Voluntary Secondary Schools :									
Number of schools	...	...	...	...	...	...	...	...	1
Number of departments	...	...	...	...	...	...	...	...	1
Total number on roll	...	...	...	...	...	...	...	...	449
Secondary Grammar Schools :									
High School for Girls—Number of pupils	...	...	...	...	...	...	...	...	546
Grammar School for Boys—Number of pupils	...	...	...	...	...	...	...	...	545
Special Schools :									
Newman School—Number of pupils	...	...	...	...	...	...	...	...	136
Abbey School (Educationally sub-normal children)—									
Number of pupils	...	...	...	...	...	...	...	...	85

SCHOOL CHILD POPULATION ACCORDING TO AGE

Age				Boys	Girls	Total
Under 3	..	..	..	20	27	47
3 years	..	..	..	39	27	66
4 years	..	..	..	257	266	523
5 years	..	..	..	745	710	1455
6 years	..	..	..	685	693	1378
7 years	..	..	..	727	699	1426
8 years	..	..	..	665	648	1313
9 years	..	..	..	676	666	1342
10 years	..	..	..	621	632	1253
11 years	..	..	..	671	633	1304
12 years	..	..	..	654	635	1289
13 years	..	..	..	652	613	1265
14 years	..	..	..	652	627	1279
15 years	..	..	..	386	351	737
16 years	..	..	..	133	125	258
17 years	76	81	157
18 years	35	22	57
19 years	3	-	3
Totals ..				7697	7455	15152

SUMMARY OF WORK

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A.	Medical Officers at schools :								
	Routine inspections in schools	3,648
	Special inspections in schools	462
	Re-inspections in schools	..	..	..	..	..	..	..	2,516
B.	Medical Officers at clinics :								
	Routine inspections of children's homes and boarded-out children	..	..						233
	Inspections at clinics	..	..	..	..	..	..	..	898
	Re-inspection at clinics	..	..	..	..	..	..	..	256
	Inspections under employment of children byelaws	..	..	..	..	..	..	..	113
	Miscellaneous	..	..	..	..	..	..	..	346
C.	Consultants at clinics :								
	Special inspections at clinics	..	..	..	..	..	..	..	1,586
	Re-inspection at clinics	..	..	..	..	..	..	..	5,709
D.	Dental Officers :								
	Routine inspections at schools	..	..	..	..	..	..	..	13,081
	Special inspections (school children)	..	..	..	..	..	..	..	597
	Special inspections (non-school cases)	..	..	..	..	..	..	..	475
	Attendances for treatment (school children)	..	..	..	..	..	..	..	14,761
	Attendances for treatment (non-school cases)	..	..	..	..	..	..	..	997
E.	School Nurses:								
	Visits to schools	..	..	..	..	..	..	..	1,722
	Examinations for cleanliness in schools	..	..	..	..	..	..	..	25,344
	Visits to homes	..	..	..	..	..	..	..	795
	Treatment of minor ailments in clinics (school children)	..	..	..	..	..	..	..	5,083
								(pre-school children)	86
	Treatment of aural defects in clinics (school children)	..	..	..	..	..	..	..	1,504
								(pre-school children)	135
F.	Speech Therapist :								
	Treatments for speech training (school children)	..	..	..	..	..	..	..	1,071
								(pre-school children)	125
								(adults)	-
G.	Chiropodist :								
	Attendances for treatment (school children)	..	..	..	..	..	..	..	1,025
								(pre-school children)	11
H.	Physiotherapist :								
	Attendances for treatment (school children)	..	..	..	..	..	..	..	2,978
								(pre-school children)	539

CLINIC ATTENDANCES

The following table summarises the work done at the several school clinics during the year :—

Work undertaken	Ferham House		Cranworth Road		Thorpe Hesley		Greasbrough		Newman School		Blackburn		Abbey School		High Greave Road		St. John's Green		Canklow		Totals						
	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	School cases	Non-School cases	Cases	Attendances	Cases	Attendances	All cases
Minor ailment and general	387	503	1101	1857	265	359	15	18	97	1745	41	74	60	84	823	1023	113	122	8	8	2880	5707	30	86	2910	5793	
	395	1095	389	936	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	750	1970	34	61	784	2031	
Ophthalmic	385	768	328	721	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	596	1328	117	161	713	1489	
	3057	9237	2243	6521	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4825	14761	475	997	5300	15758	
Child guidance	534	713	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	273	381	261	332	534	713	
	249	523	261	513	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	500	1025	10	11	510	1036	
Speech therapy	108	779	14	77	-	-	-	-	16	230	-	-	13	110	-	-	-	-	-	-	135	1071	16	125	151	1196	
	51	51	62	62	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	113	113	-	-	113	113	
Employment	57	998	59	959	-	-	-	-	58	1560	-	-	-	-	-	-	-	-	-	-	166	2978	8	539	174	3517	
	5223	14667	4457	11646	265	359	15	18	171	3535	41	74	73	194	823	1023	113	122	8	8	10238	29334	951	2312	11189	31646	
Total																											

MEDICAL INSPECTION AND TREATMENT

For the purposes of school medical inspection, each school medical officer is responsible for most of the schools within an appropriate section of the Borough. In this way a more personal liaison is established with the teaching staff. The medical officer's duties at the child welfare clinics of the same locality also ensures both a greater background knowledge of the families consulting him and more continuity of child care.

During 1965 routine medical examinations were carried out in respect of 3,881 children compared with 3,880 children in 1964.

Special and re-inspections totalled 11,850 against 17,446 in 1964.

These figures include children in the children's homes and boarded-out children.

SCHOOL LEAVERS

A precis of school medical history is sent, with the co-operation of the Health Executive Council, to the family doctors in respect of each child about to leave school. During 1965 a total of 1,318 such reports were issued.

PHYSICAL CONDITION

The following table shows the classifications of children at the routine examinations.

No. of children examined		Satisfactory	Unsatisfactory
1965	3,881	99·97	·03
1964	3,880	99·97	·03

HEIGHTS AND WEIGHTS

Random test samples of 50 children inspected at the larger schools and the actual number (if under 50 children inspected) at the other schools, revealed the following average heights and weights. Comparative figures are given in brackets for 1964.

Groups	Number of children	Average height in.	Average weight lb.
Entrants	Boys 684 (441)	44·00 (43·91)	45·16 (43·46)
	Girls 670 (466)	43·53 (43·47)	43·33 (43·13)
Intermediates .. Age 9	Boys 337 (365)	52·68 (52·69)	66·59 (67·19)
	Girls 303 (374)	52·78 (52·70)	62·25 (67·04)
Leavers	Boys 241 (100)	65·00 (64·30)	118·49 (116·48)
	Girls 243 (108)	55·33 (62·84)	116·65 (113·57)

INFESTATION

The number of children examined was 25,344, slightly less than the 1964 figure of 29,150. Children found to be infested with lice and/or nits, numbered 1,112, compared to 2,895 in 1964. This represents a welcome reduction of over 50 per cent and appears to justify the stricter measures introduced in the previous year, which involved the simultaneous examination of each child under a good light by two members of the nursing staff and the exclusion of all children whose hair contained nits or lice, however mild the infestation.

A new method of treatment was distributed widely. This consists of a shampoo which is extremely lethal to head lice and is at the same time pleasant to use and readily acceptable to all members of the family.

However, it cannot be claimed that the measures so far used have made any great difference to the degree of cleanliness among children from families who, over the years, have been persistent offenders. During the year the Education Committee decided, in accordance with Section 54(6) of the Education Act, 1944, that legal proceedings might be instituted against the parents of children who are found to be re-infested.

OPHTHALMIC SERVICE

Visual acuity tests are carried out routinely in schools at ages 5, 7, 9, 11 and 14. The following table analyses the results of routine vision testing in 1965:

Ages					Number routinely tested	Number requiring treatment	Percentage
5	..	..	..	..	1552	86	5.5
7	..	..	..	..	1041	121	11.6
9	..	..	..	..	763	127	16.6
11	..	..	..	..	967	180	18.6
14	..	..	..	..	844	141	16.7
Other ages					626	86	13.7
Totals					5793	741	12.8

Special eye clinics were attended by an ophthalmic surgeon on 76 occasions. The appended tables give an analysis of the work:

		Refractions			Re- inspections
		Inspected	Refracted	Spectacles prescribed	
School children	.. ..	750	632	499	518
Pre-school children	..	34	27	21	—
Totals		784	659	520	518

The conditions found at the examinations were as follows:

						School children	Pre-school children
Emmetropia	..	..	..	..	..	63	3
Hypermetropia	..	..	..	..	..	47	2
Hypermetropic astigmatism	..	..	..	..	..	254	15
Myopia	..	..	..	..	..	104	—
Myopic astigmatism	..	..	..	..	..	53	—
Mixed astigmatism	..	..	..	..	..	78	—
Concomitant strabismus	..	..	..	..	..	41	21
Nystagmus	..	..	..	..	..	1	—
Amblyopia	..	..	..	..	..	35	—
Cataract	..	..	..	..	..	4	—
Epicanthus	..	..	..	..	..	—	2

EAR, NOSE AND THROAT SERVICE

Children are referred to the Ear, Nose and Throat Consultant from both general practitioners and school medical officers. Approximately 45 per cent of all new cases referred were children in whom a hearing loss had been detected in school.

The work of the clinic is summarised in the following tables:

	Ferham House		Cranworth Road		Total	
	School children	Children under 5	School children	Children under 5	School children	Children under 5
Number of new cases referred to						
Ear, Nose and Throat Consultant	280	55	238	41	518	96
Total number of cases attending ..	321	64	275	53	596	117
Total number of attendances made	690	78	638	83	1328	161

Particulars of the conditions found are given in the following table:

	Ferham House		Cranworth Road		Total	
	School children	Children under 5	School children	Children under 5	School children	Children under 5
Number of cases attending ..	321	64	275	53	596	117
Ear conditions—Suppurative ..	98	14	112	10	210	24
Non-suppurative	120	26	61	10	181	36
Nose conditions	40	6	44	9	84	15
Throat conditions	63	18	58	24	121	42

Suitably trained nurses sweep test the hearing of all school children at the ages of 5, 7, and 11 years, using portable transistorised pure tone audiometers. Those children failing this test at 25 d.b.s. are retested in school and referred to the Ear, Nose and Throat Consultant if failing a second time.

Results of routine hearing tests:

Age	Number tested	Failed 1st test	Failed 2nd test
5 years	1658	107	53
8 years	592	48	25
11 years	1149	66	21
Totals ..	3399	221	99

The total number of children with a hearing loss referred from routine medical inspection and special audiometric surveys at 5, 7 and 11 years was 328.

The Ear, Nose and Throat Consultant's findings of these children are as follows:

	Ferham House		Cranworth Road		Total	
	School	Children	School	Children	School	Children
	children	under 5	children	under 5	children	under 5
Findings:						
Chronic suppurative otitis media	1	—	4	—	5	—
Acute suppurative otitis media ..	11	5	14	7	25	12
Wax	18	2	26	3	44	5
Foreign bodies	1	1	1	1	2	2
No defects	14	—	7	—	21	—
Recommendations:						
Removal of tonsils and adenoids	26	6	14	4	40	10
Removal of adenoids	14	3	8	11	22	14
Removal of tonsils	6	—	7	—	13	—
Myringotomy and suction clearance	17	1	9	—	26	1
Antrum washout	10	—	14	—	24	—
Hearing aids	1	—	1	1	2	1
Removal aural polypus	1	—	1	—	2	—

ORTHOPAEDIC SERVICE

ORTHOPAEDIC CONSULTATIONS.

Twenty sessions were held by the Orthopaedic Consultant during the year.

Details are given below:

	First	Total
	inspections	inspections
School children	142	313
Pre-school children	34	72
	—	—
Total	176	385
	—	—

PHYSIOTHERAPY SERVICE

REPORT OF THE PHYSIOTHERAPIST.

During the year 174 infants and school children were administered 3,517 treatments. This varied from an individual having one or two treatments for recent injuries to others being treated consistently throughout the year.

The small group of physically handicapped children from the Newman School has continued the weekly visit to the public swimming baths. Unfortunately when the weather is cold a number of the smaller children cannot attend; due to their slow movements they are unable to keep warm when they leave the baths. This again emphasises the need for these children to have their own pool on the school premises, where hydrotherapy could be regularly practiced to their ultimate benefit.

The number of children referred for treatment with postural defects of varying degree has again increased slightly over the past year, thus showing the necessity for the inclusion of bilateral postural exercises in the general physical exercise programme at school.

The following table gives the details of the number of cases attending and total number of treatments given for the year :

Clinic	School children		Pre-school children	
	Cases	Treatments	Cases	Treatments
Ferham House	52	722	5	276
Cranworth Road	56	696	3	263
Newman School	58	1,560	—	—
Totals	166	2,978	8	539

Details of conditions treated are given in the following table. In some cases one child has attended for two or more conditions during the same period of treatment.

Asthma	25
Bronchitis	4
Other respiratory conditions	8
General poor posture	17
Scoliosis	17
Kyphosis	2
Flat feet	14
Valgus deformity of ankles	11
Pes cavus	2
Hallux valgus	1
Genu valgum	1
Other lower leg conditions	21
Talipes	2
Athetosis	7
Spastic haemiplegia	10
Spastic quadriplegia	4
Spastic diplegia	1
Spastic monoplegia	1
Anterior poliomyelitis	13
Recent injuries	5
Conditions of spine	3
Conditions of knee	1
Conditions of shoulder	2
Conditions of hip	1
Perthe's disease	1
Hydrocephalus	2
Rheumatoid arthritis	1

Epilepsy	2
Spina bifida	2
Acne vulgaris	2
	<hr/>
	183
	<hr/>

CHEST CLINIC

The Chest Consultant examined 43 new school children during the year, two were referred by school medical officers and 41 by general practitioners. Two cases of respiratory tuberculosis were notified in school children during 1965.

PAEDIATRIC SERVICE

As stated in previous reports, children are referred direct to the hospitals for examination and reports are received from the Consultant Paediatrician on all children seen by him. This arrangement continues very satisfactorily.

CHIROPODY SERVICE

REPORT OF THE CHIROPODIST.

The Chiropody Clinic was held on fifty-three sessions during the year, 500 school children attended for treatment and 1,025 treatments were given. Ten pre-school children made eleven attendances. A list of the cases treated is appended.

The ravages caused by recent shoe styles are now presenting ; almost all cases of corns and nail conditions were caused by incorrect footwear. Advice given was followed in most instances but there were however, some difficult problems, such as the mother of a seven and a half year old girl who said that if her child wanted fancy shoes then she could have them.

Defects	School children		Pre-school children	
	Cases	Attendances	Cases	Attendances
Verrucae	339	864	—	—
Corns	134	134	7	7
Foreign body in foot	6	6	—	—
Nail conditions	11	11	3	4
Chilblains	3	3	—	—
Bursitis	2	2	—	—
Hallux Valgus	3	3	—	—
Hyperhidrosis	2	2	—	—
Totals ..	500	1025	10	11

MINOR AILMENTS

A total of 1,971 minor ailments were dealt with during the year, the figure for 1964 being 2,384.

There were two cases of scabies treated during 1965.

CHILD GUIDANCE SERVICE

Since the end of March the clinic has lacked a permanent child psychiatrist and this has enforced some radical changes in the staffing and working arrangements.

With little hope of the Regional Hospital Board providing another psychiatrist in the immediate future, we were fortunate in securing the services, in an advisory capacity, of Dr. A. C. Woodmansey, Consultant Child Psychiatrist to the United Sheffield Hospitals.

From July to the year end, seven case advisory conferences were held with the staff of the clinic. Owing to multiple commitments elsewhere, Dr. Woodmansey was not able to take on a personal case-load.

The medical consultations and counselling in the clinic were taken over by a school medical officer with previous experience in the psychiatric field, and the educational psychologist was able to enlarge his own substantial case-load. Cross reference between doctor and psychologist, where appropriate, has proved to be a strong point of the present arrangement.

Because the three doctor's sessions have had to be reduced to one per week, this has inevitably meant some delay for new consultations and less frequent review of current cases. All children requiring urgent help have been promptly treated, the psychologist being immediately available.

One advantage arising from the present arrangements is that many head teachers appear to appreciate the direct and intimate liaison possible with the clinic doctor, when this role is occupied by a school medical officer whom they are used to consulting on other issues, and who has first hand knowledge of local circumstances. By the same token, an easy relationship can exist between educational psychologist and doctor when both have been continuously engaged on similar problems working within the same authority.

A large proportion of children can be adequately treated in this way but the more severely disturbed child and the diagnostic problems are proving difficult to deal with and all possible influence is, therefore, being brought to bear on the Regional Hospital Board to appoint a psychiatrist for regular sessions.

The tables below show that referrals from medical sources constitute two-thirds of all cases treated and that referrals from head teachers account for only one fifth of the total (14/66). Furthermore these 14 children represent only nine schools and it must be recorded that in the case of 17 children not referred by their head teachers the signs of behavioural disturbance were both immediately obvious and of long standing. In three of these pupils, associated educational failure was so dramatic as to constitute cause for referral in itself. It cannot be too highly stressed that the teacher

is in an excellent position for detecting behavioural or developmental anomalies and for suggesting or initiating the necessary action. The disturbed pupil cannot be a good pupil and may well become tomorrow's delinquent. Treatment delayed means problems exacerbated, possibly beyond the point of no return.

REFERRAL AGENCY	PROBLEM	BOYS	GIRLS	TOTAL
School Medical Officer .. 30	Anxiety States	4	4	8
Head Teachers 14	Enuresis	3	1	4
General Practitioners .. 10	Encopresis	2	—	2
Hospital 2	Attempted Suicide	—	3	3
Other Agencies .. 10	Delinquency	5	—	5
—	Maladjustment	24	13	37
Total .. 66	Sexual Misbehaviour	1	1	2
—	Autism	—	1	1
	Educational	4	—	4
		—	—	—
	Total	43	23	66
		—	—	—

	School Children	Pre-school Children	Total
No. of individual children who have attended	273	2	275
No. of attendances made to see:			
(a) Psychiatrist up to 31st May, 1965	119	2	121
(b) Psychologist	205	—	205
(c) School Medical Officer (from June, 1965)	57	—	57
No. of individual parents who have attended	256	3	259
No. of attendances made to see:			
(a) Psychiatrist up to 31st May, 1965	115	3	117
(b) Psychologist	158	—	158
(c) School Medical Officer	54	—	54
No. of new cases referred in 1965	73	1	74
No. of new cases taken on for treatment	65	1	66
No. of new cases seen by Psychiatrist	36	1	37
No. of new cases seen by Psychologist	20	—	20
No. of new cases seen by School Medical Officer	9	—	9
No. of cases discharged	77	1	78
No. recommended for residential treatment	1		
Waiting list at 1.1.65	—		
Waiting list as at 31.12.65.	—		
No. of home visits by Social Worker	52		
No. of clinic sessions	139		

DENTAL SERVICE

REPORT OF THE PRINCIPAL DENTAL OFFICER.

During 1965 the Rotherham Local Authority dental clinics have had a full complement of staff, i.e. six full-time dentists. Mr. J. Dean left at the end of September to go into private practice and Miss I. Ross commenced on the 11th October.

After writing reports on dental work in one area for the past 36 years it becomes difficult to find anything interesting to mention, indeed if there is anything it should have been included some 30 years or so ago ! Obviously there are technical improvements and refinements in materials and equipment used, such as acrylic resins and the air rotor drills, but the aim of the school dental service that all children should leave school with their own teeth in a sound and healthy condition remains the same. There has undoubtedly been a great improvement in the dental health of school leavers, though unless detailed charting of the teeth is recorded at each inspection it is impossible to prove this statement statistically.

This detailed charting has been done at the Grammar School and apart from the actual inspecting taking about seven times as long, the clinical time involved to obtain any useful overall figures is quite fantastic and under present staffing conditions impossible to implement for all the schools in the borough. A computing machine would seem to be necessary. It may well be asked "what good will this do to any child's teeth ?" or, for that matter, "what good arises from detailed inspections and chartings of teeth ?" They merely serve to underline what dentists have been saying for many decades, namely, that dental decay and disease can be largely prevented and that what does arise can be treated and the natural teeth retained. To know and preach this for all one's professional life and get nowhere or at least not very far is, to say the least, very depressing and exasperating. It is probably time to say that any measures proposed to minimise the onset of dental decay will not be adopted because of economic factors or on the grounds of prejudice and interference with individual freedom. The solution of the problem thus lies in a greater amount of reparative dental work being done and this can only be carried out by educating mothers to take their children for regular inspection and treatment from the age of three years onwards. Any mother who does this will also be sure to see that the child's teeth are brushed and that sweets, etc., are eaten sparingly and at reasonable times. Lest it may be thought that the above remarks are those of a disillusioned and ageing idealist I would like to include the following comments from Miss Joan Egan, one of the three lady dental surgeons on the Local Authority staff. The school dental service would seem an ideal vocation for such qualified people or is it just that we have been very fortunate in those appointed in Rotherham ?

"It has been stated that the future function of the school dental officer might well be in the field of dental health education since the changing pattern of dentistry with its emphasis on prevention rather than on treatment will enable him to spend less time at the chairside and more in the education of young people in dental care. Presumably this will take place in the schools.

"Let us then consider this carefully. A dental surgeon is a highly trained person, trained to perform intricate operations in the mouth. Is he therefore to waste his training to become an indifferent teacher endeavouring to instruct children without the necessary experience. Some may acquit themselves well but the shortage of dentists being as it is, this type of instruction is better presented by those trained to teach and with the knowledge of the vocabulary and methods to be used with the very young. This would seem to be a good case for ancillary help ; the New Cross ancillary workers would be well employed in this work directed by a health education officer who would ensure that dental health education was considered not in isolation but as a part of general health education.

"It is usually assumed that the school is a suitable place for this type of instruction, but this is merely scratching at the surface. It is true that children can be instructed in the rudiments of oral hygiene, but this is quite inadequate, when at home they are fed on high carbohydrate diet and are subject to the full pressure of advertising by the confectionery manufacturers.

"A complete re-education of the public, starting with the mother, is needed before any marked reduction in the incidence of dental caries is apparent.

"In 1933, W. Price examined the teeth of the inhabitants of a then isolated Swiss Valley, the Lotscheutal. He found that the caries rate in St. Moritz was approximately nine times greater than in the Lotscheutal Valley. The diet in the Lotscheutal consisted of wholemeal rye bread, cheese and milk, meat being taken only once per day. In centres of communication for instance, St. Moritz, as the availability of refined carbohydrate increased so did the caries rate. Such are the blessings of civilization that on a recent visit to the Lotscheutal, which in the intervening years has acquired a road and a regular post 'bus service, it was apparent to the writer, even without a detailed clinical inspection, that the caries rate of the inhabitants of the Lotscheutal is now the same as that of the remainder of Western Europe.

"Whilst not advocating a return to a diet of whole meal ryebread, milk and cheese, it would be pertinent to consider in which ways changes in dietary habits could be effected.

"The most important approach is the education of the mother and in this sphere the help of the health visitors is essential.

"Rampant caries, particularly in the very young, is a scandal and this must be impressed upon the mother until she realises that the remedy is very largely in her hands.

"A well balanced diet in pregnancy lays a good foundation for the deciduous dentition and whilst cases of frank undernourishment are rarely seen today it is interesting to speculate how many undetected subclinical dietary deficiencies there are. It has been said that one of the possible reasons for the greater percentage of still births in the north than in the south may be of a dietary origin and some investigation on the correlation between the percentage of still and premature births, diet and dental caries may be a fruitful field of research.

"Heredity has been suggested as a possible factor in the incidence of caries, but it would be difficult to separate this from the environmental factor and it would appear that lack of oral hygiene habits and a high carbohydrate diet which prevail in family are the most important reasons for differences in caries incidence which exist between families.

"Mothers must be educated to know that children should not be rewarded with sweets and thus conditioned to like them. Even on clinic premises young children are seen with toffees and chocolates which have been given to keep them quiet whilst their mothers are elsewhere.

"So many well intentioned actions which are detrimental to the teeth occur, the dinky feeder and the nightly bedtime drink, to mention only two. To quieten a child, and to provide it with additional vitamin C the feeder is filled with rosehip syrup and placed in the mouth. The child sucks out the contents and the palatal surfaces of the upper teeth are bathed in this syrup for a considerable period, and the resultant extensive caries is distributed on the surfaces of those teeth in contact with the syrup. The sweet nightly bedtime drink given perhaps in response to the advertisements to promote sound sleep, remains in the mouth undiluted by saliva and undisturbed by the cheek muscles, giving an excellent medium for the development of cariogenic organisms.

"The high carbohydrate diet becomes a habit. A diet of such composition gives a feeling of satisfaction for a short time only. Hunger soon asserts itself and as more carbohydrate, perhaps cake or biscuits, is eaten to assuage it, a vicious circle is created. In view of the increase of obesity in the young, a vigorous propaganda programme on the improvement of dietary habits would seem to be an important part of any health education programme.

"Children receiving a high protein breakfast should not require a mid morning snack of biscuits. In this direction it is important that the co-operation of the schools should be obtained. It is farcical to talk about dental health education in school when many of these schools provide biscuits at the mid morning break. These are sold even on mornings of school dental inspections ; the inspection after break being hampered by the layer of soft biscuit covering the teeth. Apart from the fact that secondhand food in a mouth is not the most pleasant of sights, it is extremely difficult to say with certainty whether or not cavities exist.

"So often a mother says that her child does not eat many sweets but she is quite oblivious of the many other cariogenic agents. Iced lollies, dissolving into a solution containing citric acid and sugar are in contact with the teeth for ten minutes ; slowly dissolving boiled sweets bathe the teeth in glucose and sucrose and toffees stick up the mouth for a long period. Chocolate is probably the least potent offender as it is relatively quickly eaten and swallowed.

"We in the dental profession are not a collection of kill joys. No one who has seen rampant caries, particularly in a young child, can remain unmoved by the fact that much of this is caused by a faulty diet. A change in the dietary habits will cer-

tainly bring about a reduction in the caries rate and, together with the fluoridation of the water supply, may result in its near eradication."

The exact details of the treatment carried out in the dental clinics during the year can be seen in the various appended tables. The ratio of teeth filled to teeth extracted may be considered rather low but it should be remembered that many sound (or saveable) teeth are taken out to balance the extraction of carious lower molars, or to allow what would otherwise be prominent carious to erupt into the upper arch. If these teeth were not extracted the resulting sets of teeth would be overcrowded and caries even more likely to occur in them in later life. Small fillings in these teeth would have boosted the "number of teeth filled" and proportionately decreased "the number of teeth extracted," but taking the long view this may well be dentistry of a lower standard than where the ratio of teeth filled to extracted is lower. The results of unbalanced extraction of six year old molars can often be observed at routine school inspections, and it is possible that this technique is not brought to the notice of students at all dental schools. In 95 five year old children, chosen at random, for whom detailed charting was done, at routine inspections it was found that 81 teeth had already been lost and another 83 were regarded as unsaveable, while of 174 which required filling only 9 had been so treated. In 56 six year olds, 84 teeth had been lost, a further 19 were unsaveable and 72 needed filling of which only 1 had been done. Of 58 seven year old, 219 teeth had been lost, 16 plus 1 permanent tooth were unsaveable, while 83 required filling (of which 6 only done) and 7 permanent teeth also needed fillings. It should be noted that the teeth missing includes those shed naturally and that while 49 had received treatment at the clinics 40 appeared to have gone to private practitioners. These numbers are too small to be of any great value but, as said earlier, the clerical work involved precludes doing these enquiries on any large scale.

The form given out at a routine school inspection has been slightly altered, and it is now particularly requested that the detachable slip signed by the parent is returned to the head teacher saying whether the child will attend either the Local Authority clinic or a general practitioner. It is hoped in this way that with the help and co-operation of the teacher a little gentle pressure may be brought to bear, especially on those characters who used to dispose of any notice to their parents down the first drain on the way home.

The orthodontic treatment continues steadily and 436 children were receiving such care during the year. Despite the statement that the majority of such work is carried out by the private dentists under the National Health Service, it would seem that, if there is any future envisaged for the School Dental Service, orthodontic treatment should be carried out therein.

The dental clinics are open during school holidays and on Saturday mornings, and treatment is given at all sessions to pre-school children and expectant and nursing mothers as well as school children, so that the report on maternity and child welfare patients should be read along with this, to get a complete picture of the dental treatment done during the year.

Details of the denture work done and the types of orthodontic appliances made is listed below:

					1965	1964
Technician's half-day sessions	..	..	..	..	478	480
Assistant technician's half-day sessions	..	..	..	..	490	492
Full upper and lower dentures	..	..	Maternity	..	36	52
Full upper and part lower dentures	..	..	Maternity	..	16	24
			Schools	..	—	4
			Pre-school	..	4	4
Full upper or full lower dentures	..	..	Maternity	..	11	11
			Schools	..	—	1
			Pre-school	..	3	1
Part upper and part lower dentures	..	..	Maternity	..	30	30
			Schools	..	12	6
Part dentures	..	..	Maternity	..	19	12
			Schools	..	117	110
			Pre-school	..	2	1
Relines and repairs to dentures	..	..	Maternity	..	44	3
			Schools	..	41	32
			Pre-school	..	5	—
Jacket or post crowns	..	..	Maternity	..	—	1
			Schools	..	18	20
Inlays	..	..	Schools	..	14	16
No. of orthodontic appliances made (fixed and removable)	..	..	Schools	..	555	507
Fixed appliances	—Johnson twin arch	..	..	..	—	1
	Lower lingual bow	..	..	..	3	12
	Local pin and tube	..	..	..	4	5
	Inclined planes	..	..	..	22	6
Removable appliances—	Oral screen	..	..	..	1	1
	Schwartz plate	..	..	..	66	91
	Norwegian plate	..	..	..	3	3
	Badock screw plate	..	..	..	11	8
	Finger spring plate	..	..	..	187	129
	Retention plates	..	..	..	25	22
	Robert's retractors	..	..	..	4	6
	Canine retraction plates	..	..	..	66	55
	Modified Jackson plates	..	..	..	46	43
	Chin cap	..	..	..	2	2
	Apron spring plates	..	..	..	26	22
	Lateral arm plates	..	..	..	7	1
	Tongue barrier plates	..	..	..	1	7
	Sved plates	..	..	..	—	5
	Y plates	..	..	..	4	3
	Landin screw plates	..	..	..	71	76
	Extra oral traction	..	..	..	6	—
	Repairs to orthodontic plates	..	..	..	49	—

The following table shows the details of the treatment given at the different clinics :

Clinic	Total atten- dances	No. of indiv- iduals treat- ed	Extractions		Fillings				Anaesthetics		Other opera- tions	No. of patients sup- plied with dentures
					Perm.	teeth	Temp.	teeth				
			Perm. teeth	Temp. teeth	No. of fill- ings	No. of teeth filled	No. of fill- ings	No. of teeth filled	Local	Gen- eral		
Cranworth Road ...	6521	2243	1121	2309	2749	2378	311	290	1096	1467	2919	83
Ferham House	9237	3057	1697	3313	2919	2572	362	333	1310	2005	4275	95
Total 1965 ..	15758	5300	2818	5622	5668	4950	673	623	2406	3472	7194	178
Total 1964 ..	16446	5196	2918	5222	5899	5069	605	542	2415	3224	9233	169

The following table gives details of treatment for the different groups of patients :

Group	Total attendances	No. of individuals treated	Extractions		Fillings				Anaesthetics		Other operations	No. of patients supplied with dentures
			Perm. teeth	Temp. teeth	Perm. teeth		Temp. teeth		Local	General		
					No. of fillings	No. of teeth filled	No. of fillings	No. of teeth filled				
School children ..	14761	4825	2378	5041	5580	4868	632	583	2316	3128	6635	100
Pre-school children ..	442	321	—	580	—	—	41	40	5	267	134	7
Maternity ..	555	154	440	1	88	82	—	—	85	77	425	71
Total 1965 ..	15758	5300	2818	5622	5668	4950	673	623	2406	3472	7194	178
Total 1964 ..	16446	5196	2918	5222	5899	5069	605	542	2415	3224	9233	169

		1965	1964
Number of school children x-rayed .. ..	.. ..	493	606
Number of x-ray films taken .. ..	.. ..	1090	1065
Number of maternity patients x-rayed .. ..	.. ..	15	10
Number of x-ray films taken .. ..	.. ..	19	12
Number of pre-school children x-rayed .. ..	.. ..	—	6
Number of x-ray films taken .. ..	.. ..	—	6

Table showing the results of routine inspections in age groups and of the 15 year olds at the different secondary schools:

AGE —	5	6	7	8	9	To- tal 5-9	10	11	12	13	14	To- tal 10- 14	15+	15+		
														High and Grammar	Oakwood	Other secondary schools
Inspected	829	1203	1311	1221	1222	5786	1130	1050	1160	1079	1120	5539	1756	968	840	3112
Sound	302	411	331	200	147	1391	152	154	195	169	202	872	370	349	191	382
Percentage Sound	36.4	34.1	25.2	16.4	12.0	24.0	13.4	14.6	16.8	15.6	18.0	14.9	21.1	36.0	22.7	12.8
Sound at present	144	244	353	311	252	1304	163	117	74	50	13	417	21	18	15	105
Referred for Treatment	383	548	627	710	823	3091	815	779	891	860	905	4250	1365	601	634	2625
Percentage Referred	46.2	45.6	47.9	58.1	67.3	53.4	72.1	74.2	76.8	79.7	80.8	76.7	77.7	62.1	75.5	84.3

Orthodontic treatment

Dentist	Number of patients	Commenced 1965	Carried forward from 1964	Completed	Under treatment	Lapsed
A.	95	35	60	38	42	15
B.	64	25	39	10	33	21
C.	59	37	22	33	18	8
D.	91	41	50	34	44	13
E.	72	41	31	20	30	22
F.	55	26	29	24	14	17
Total	436	205	231	159	181	96

HANDICAPPED PUPILS

The ascertainment and care of handicapped children residing within the County Borough continues within the framework of the Education Act, 1944, and the School Health Service and Handicapped Pupils Regulations, 1953.

The following table shows the number of handicapped pupils of the various categories on the register at 31st December, 1965:

	In Residential Special Schools	In Day Special Schools	In Ordinary Day Schools	Not at school	Total
Blind	8	—	—	—	8
Partially sighted	—	3	1	—	4
Deaf	10	1	—	1	12
Partially hearing	—	5	14	1	20
Educationally sub-normal	7	85	31	—	123
Epileptic	1	3	—	—	4
Maladjusted	—	19	1	—	20
Physically handicapped ...	3	44	4	1	52
Speech defects	—	4	104	—	108
Delicate	1	52	2	—	55

BLIND PUPILS.

Two boys and two girls attend the Sheffield School for Blind Children. One boy and one girl attends the Royal Normal College for the Blind, Shrewsbury, and one boy attends Condover Hall School, Shrewsbury. One boy attends Henshaws School for the Blind, Manchester.

PARTIALLY SIGHTED CHILDREN.

Three partially sighted children attend the Newman School, Rotherham.

DEAF PUPILS.

Six children attend the Yorkshire Residential School for the Deaf, Doncaster, one boy and two girls attend the Maud Maxfield School for the Deaf, Sheffield. One boy at St. John's School for the Deaf, Boston Spa, took up residence in Rotherham during the year.

PARTIALLY HEARING PUPILS.

Five children attend the Newman School, Rotherham, and six children are attending ordinary schools. Fourteen children wear hearing aids.

EDUCATIONALLY SUB-NORMAL PUPILS.

As in previous years, children brought forward by Head Teachers and School Medical Officers as requiring ascertainment, together with those recommended for review, were examined during the year. 64 such children were examined and the following recommendations made :

	1965	1964
Reported to Local Authority as unsuitable for education at school	3	7
Recommended informal admission to Junior Training Centre	2	—
Recommended to continue attendance at Junior Training Centre	3	—
Special day school for E.S.N. pupils	4	20
Special day class for infant E.S.N. pupils	4	—
Further observation in ordinary day school	10	14
Remain at special day school	1	7
Remain at Newman School	5	—
Examined prior to leaving special school—for informal supervision	10	6
Examined prior to leaving special school—no supervision required	4	5
Not E.S.N.	4	—
Referred Child Guidance Clinic	1	1
Ordinary school with special tuition	13	21

Two boys attend the Rossington Hall Special School for Educationally Sub-Normal Pupils, Nr. Doncaster, one boy attends Crowthorne School, Edgworth, Bolton. One girl was admitted to Hilton Grange School, Old Bramhope, Nr. Leeds, during the year and one boy continues to attend at this school. One girl remains at Camphill House School, Aberdeen. One boy was admitted to Aldwark Manor School, Hull, in September, 1965, being transferred there from the Abbey Special Day School, Rotherham.

ABBEY DAY SCHOOL FOR EDUCATIONALLY SUB-NORMAL PUPILS

During the year, the junior school at Scholes and the senior school at Kimberworth, moved into temporary residence at the old Park Street Secondary School. The school hopes to remain in these premises until the new school is built on the old site of the senior school at Kimberworth.

In January, 1965, 98 pupils were on the roll of the Abbey School.

During the year, 17 pupils, 8 girls and 9 boys, left on reaching their 16th birthday, one boy and one girl were transferred to residential schools for educationally sub-normal pupils, one boy left the district and unfortunately one girl died.

There were 8 new admissions to the school in 1965, bringing the total on the roll in December, 1965, to 85 pupils, consisting of 43 boys and 42 girls.

The general physical health of the children continues to improve.

EPILEPTIC PUPILS.

One girl was admitted to St. Elizabeth's School, Much Hadham, Herts, during 1965. Two boys and one girl attend the Newman School, Rotherham.

MALADJUSTED PUPILS.

Eleven boys and nine girls were on the register of the Newman School, Rotherham, at the end of 1965.

PHYSICALLY HANDICAPPED PUPILS.

One girl continues at the Welburn Hall School, Kirbymoorside, and one boy at the Hesley Hall Special School, Tickhill. One girl was admitted to Hesley Hall School during the year.

Twenty-three boys and twenty-one girls were on the register of the Newman School, Rotherham, at the end of the year.

DELICATE PUPILS.

One boy continues to attend Netherside Hall School, Skipton-in-Craven.

The number of delicate pupils on the register of the Newman School, Rotherham, at the year end was 33 boys and 19 girls.

NEWMAN SCHOOL

The following table records details of admissions and discharges during 1965:

	Epileptic		Delicate		Physic'y handic'd		Partially sighted		Partially hearing		Mal- adjusted		Speech		E.S.N.		Total
	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	Bys.	Gls.	
Admitted 1965	1	2	4	2	8	3	-	-	-	-	5	1	1	-	-	-	27
Discharged 1965	-	1	8	9	2	2	-	-	-	-	3	-	-	-	-	1	16
Remaining on register at year end	2	1	33	19	23	21	3	-	3	2	11	8	3	1	-	-	130

The trend towards the admission of fewer delicate children has continued and there is now an increasing proportion of younger children. Towards the end of the year this led to definite overcrowding in the nursery class and five children remained on the waiting list pending reorganisation of Classes 1 and 2 after Christmas. Again there are more maladjusted children on the roll. When considering the possible admission of such children, favourable consideration is likely to be given to placement at the Newman School only if the child will fit into the life of the school without unreasonable demands or upsets to the other pupils.

The Speech Therapist and Physiotherapist now attend for two sessions each per week and the doctor for one or two sessions. The Welfare Assistant, appointed in the previous year, has proved her worth and is a considerable help to nurse, to the physiotherapist and to the teaching staff. Without her, it is doubtful whether some of the more severely handicapped children could be accommodated.

A reducing diet was introduced early in the year and proved quite popular. Most of the dozen or so children have lost weight ; those who have not done so are not permitted to continue the special lunch.

Functional assessment of school leavers has begun. Because it affords a realistic appraisal of abilities and limitations, it is much appreciated by the Youth Employment Officers. It is completed at the last of the yearly medical examinations, six to fifteen months before the pupil leaves school.

To meet an individual child's needs in the most appropriate way, considerable thought and ingenuity are often required. Thus whilst most children communicate by speech and pen, others may be unable to do so. One girl (who, it must be sadly recorded, died shortly after the end of the year) could express herself only by typing on an electric typewriter. One of the older boys can only keep pace in mathematics by using a calculating machine, simply because he cannot write figures with sufficient speed. Various aids to walking and to relaxation have been manufactured to individual design in the school workshop.

I still hear the school spoken of as an "Open Air School." Perhaps an appropriate moment for dropping this term will come, once and for all, when the corridor is enclosed. Unfortunately neither this work, the provision of ramps nor the construction of a hydrotherapy pool could be proceeded with during this year.

HOME TUITION

One child was receiving home tuition at the end of the year.

SPEECH THERAPY SERVICE

REPORT OF THE SPEECH THERAPIST.

Work in the Speech Therapy Department has continued smoothly throughout the year. The weekly half day treatment session has continued at Abbey School and the session at Newman School has been increased to one full day each week.

The following tables show the attendances made during the year and it will be noticed that 14 pre-school children were referred. It is always helpful to have children with a severe speech defect referred to us as early as possible, in order that the cause of their difficulties may be ascertained and the necessary treatment decided upon. This may take the form of regular weekly visits to the clinic, or occasional attendances so that progress may be checked and advice given to parents. The child is thus helped to develop intelligible speech before commencing school, and much frustration and unhappiness is avoided.

CASES AND ATTENDANCES.

			Pre-school children	School children	Adults	Total
Total number of cases on register at 1.1.65	..	..	2	94	2	98
Total number of new cases referred	..	..	14	41	1	56
Total number of cases discharged	..	..	2	27	2	31
Total number of attendances	..	..	125	1,071	—	1,196
Number of school visits	..	..	..	..	..	74

CLASSIFICATION OF DEFECTS TREATED

Dyslalia:

Multiple	..	..	..	..	..	11	80	1	92
Simple—One sound	..	..	..	..	..	—	1	—	1
Rhotacism	..	..	..	..	..	—	1	—	1
Lateral sigmatism	..	..	..	..	..	—	5	—	5
Interdental sigmatism	..	..	..	..	..	—	6	—	6
Autistic	..	..	..	..	..	—	1	—	1
Cleft Palate	..	..	..	..	..	—	1	—	1
Hypernasality	..	..	..	..	..	—	2	—	2
Hypernasality and Dyslalia	..	..	..	..	..	—	2	—	2
Hyponasality	..	..	..	..	..	—	1	—	1
Dyseneia	..	..	..	..	..	—	3	—	3
Dysarthria	..	..	..	..	..	—	6	—	6
Dysarthria and Hearing Loss	..	..	..	..	..	—	1	—	1
Dysarthria and Dyslalia	..	..	..	..	..	1	—	—	1
Dysphonia	..	..	..	..	..	—	1	1	2
Stammer	..	..	..	..	..	1	23	1	25
Stammer and Dyslalia	..	..	..	..	..	—	2	—	2
Not yet assessed	..	..	..	..	..	—	2	—	2

DETAILS OF DISCHARGES

Speech normal	..	..	..	..	..	1	18	1	20
Maximum possible improvement	..	..	..	..	..	—	5	1	6
Failed appointments	..	..	..	..	..	—	2	—	2
Not needing treatment	..	..	..	..	..	—	1	—	1
Left area	..	..	..	..	..	1	1	—	2

INFECTIOUS DISEASES, IMMUNISATION AND B.C.G. VACCINATION

The appended table gives the numbers of the common infectious diseases in children between the ages of 5 and 15 years and shows the quarterly distribution of the cases. The totals for all ages are also given.

Disease	Cases occurring in 1965				Total 5 to 15 years	Total all ages
	1st quarter	2nd quarter	3rd quarter	4th quarter		
Acute encephalitis :						
Infective	-	-	-	-	-	-
Post infectious	-	-	-	-	-	-
Acute poliomyelitis :						
Paralytic	-	-	-	-	-	-
Non-paralytic	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-
Dysentery	32	23	2	-	57	112
Encephalitis lethargica	-	-	-	-	-	-
Erysipelas	-	-	1	-	1	8
Food poisoning	-	1	-	-	1	7
Measles	153	30	16	64	263	741
Meningococcal infection	-	-	-	-	-	1
Pneumonia	1	-	1	-	2	17
Scarlet fever	36	20	10	8	74	111
Typhoid and paratyphoid fevers	-	-	1	-	1	4
Whooping cough	8	7	2	4	21	77
Tuberculosis :						
Respiratory	2	-	-	-	2	29
Other forms	-	-	-	-	-	3

DIPHTHERIA IMMUNISATION.

During the year, 58 school children received primary immunisation and 585 received booster injections.

At the end of the year 12,274 children between the ages of 5 and 16 years had been immunised. Of these, 4,099 had been immunised or received booster doses during the past five years.

No case of diphtheria in school children has been reported in the County Borough since March, 1952.

B.C.G. VACCINATION.

During the year 1965 B.C.G. vaccination was offered to all 13-year-old children. The following table gives the results:

Number of eligible children	1,375
Total consents received	1,115
Acceptance rate	81.09 per cent
Number of positive reactors to tuberculin testing	237
Number of non-reactors to tuberculin testing	820
Percentage of positive reactors	22.42 per cent
Number of children given B.C.G.	819
Total number of absentees	58

CHILDREN'S HOMES AND BOARDED-OUT CHILDREN

MEDICAL RESPONSIBILITY.

All children are medically examined by a school medical officer on admission to and discharge from the Children's Homes. A certificate of fitness is issued to the Children's Officer in respect of any child who is to be boarded-out. A private medical practitioner continues to be responsible for the general medical services in respect of all the children.

113 children were seen during the year for periodic medical inspection and 126 examinations were made. Treatments were advised where necessary.

One child was admitted to Moorgate General Hospital, Rotherham, and one to the Middlewood Hospital, Sheffield, during the year. One child who was admitted to King Edward VII Hospital, Sheffield, in 1964 was discharged in 1965.

The general health of the children continues to be satisfactory.

BOARDED-OUT CHILDREN.

120 boarded-out children were examined during 1965.

Defects were accorded appropriate treatment where necessary.

One child was admitted to Moorgate General Hospital, Rotherham, one to City General Hospital, Sheffield, and one to the Sheffield Children's Hospital during the year.

CHILDREN AND YOUNG PERSONS ACT

36 children were examined during the year prior to admission to a remand home or approved school.

EMPLOYMENT OF CHILDREN

During the year 96 boys and 16 girls were granted certificates of fitness for employment. The figures for 1964 were 55 and 10 respectively. One boy was not granted a certificate.

COLLEGE ENTRANTS

In 1965, 85 candidates for admission to various training colleges and 17 candidates applying for employment as teachers, were examined by school medical officers. All candidates were found to be medically fit.

SCHOOL JOURNEYS

During 1965, 130 children were examined prior to taking part in school journeys.

CLINICS AND TREATMENT CENTRES

The following is a list of the school clinics and treatment centres provided, together with the sessional times: —

Address of clinic and sessions held	Times of sessions
FERHAM HOUSE CLINIC, Kimberworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.0 noon. Medical sessions—Mondays.
Ophthalmic.	Specialist's session — Tuesdays, 9.0 a.m. to 12.0 noon. Nurses re-inspection—as required.
Ear, nose and throat.	Specialist's session—Mondays, 2.0 p.m. to 5.0 p.m. Nurses treatment sessions — Mondays, Wednesdays and Fridays, 2.0 to 5.0 p.m.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.0 noon and 2.0 to 5.0 p.m. ; Saturdays, 9.0 a.m. to 12 noon.
Child guidance.	School Medical Officer—Tuesdays, 9.0 a.m. to 12.0 noon. Educational Psychologist—Tuesdays, 9.0 a.m. to 12.0 noon and 2.0 to 5.0 p.m. Wednesdays, 9.0 a.m. to 12.0 noon. Thursdays, 9.0 a.m. to 12.0 noon and 2.0 to 5.0 p.m. Additional sessions arranged as required.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.0 noon.
Speech therapy.	Mondays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m. Thursdays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m. Fridays, 9.0 a.m. to 12.15 p.m. and 1.45 to 5.0 p.m.
Physiotherapy.	Wednesdays, 9.30 a.m. to 12.30 p.m. Fridays, 9.0 a.m. to 10.30 a.m.
Immunisation.	Tuesdays, 2.0 to 4.30 p.m.
CRANWORTH ROAD CLINIC, Cranworth Road, Rotherham.	
Minor ailment, general inspection and treatment.	Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.0 noon. Medical sessions—Mondays.

Address of clinic and sessions held	Times of sessions
Ophthalmic.	Specialist's session — Saturdays, 9.0 a.m. to 12.0 noon. Nurses re-inspections—as required.
Physiotherapy.	Mondays, 9.0 a.m. to 12.30 p.m. Tuesdays, 9.0 to 10.0 a.m. Wednesdays, 9.0 to 9.30 a.m. Thursdays, 9.0 to 10.0 a.m. Fridays, 10.30 a.m. to 12.0 noon.
Ear, nose and throat.	Specialist's session—Fridays, 10.45 a.m. to 12.30 p.m. Nurses treatment sessions—Mondays, Wednesdays and Fridays, 9.0 a.m. to 12.0 noon ; Saturdays, 9.0 a.m. to 12.0 noon.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.0 p.m. ; Saturdays, 9.0 a.m. to 12.0 noon.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.0 noon.
Speech therapy.	Tuesdays, 1.45 to 5.0 p.m.
Immunisation.	Wednesdays, 2.0 to 4.15 p.m.
THORPE HESLEY CLINIC, Thorpe Hesley Primary School, Upper Wortley Road, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions — 2nd and 4th Tuesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Fridays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Tuesday in the month, 2.0 to 5.0 p.m.
Speech therapy.	Fridays, 10.15 a.m. to 12.15 p.m.
GREASBROUGH CLINIC, Public Hall, Greasbrough, Rotherham.	
Minor ailment, general inspection and treatment.	Medical sessions—1st and 3rd Wednesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions —Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	1st and 3rd Wednesday in the month, 2.0 to 5.0 p.m.
BLACKBURN CLINIC, Blackburn Primary School, Baring Road, Blackburn, Rotherham.	
Minor ailment, general inspection and treatment.	Medical Sessions—2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m. Nurses treatment sessions—Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m.

Address of clinic and sessions held	Times of sessions
<p>HIGH GREAVE CLINIC, High Greave Primary School, High Greave Road, East Herringthorpe, Rotherham. Minor ailment, general inspection and treatment.</p>	<p>Nurses treatment sessions—Mondays and Fridays, 9.0 a.m. to 12.0 noon.</p>
<p>NEWMAN SCHOOL Whiston, Rotherham. Minor ailment, general inspection and treatment. Immunisation. Physiotherapy. Speech therapy</p>	<p>Medical sessions—as required. Nurses treatment sessions—Mondays to Fridays, 9.0 a.m. to 12.0 noon and 1.30 to 4.0 p.m. As required—at medical sessions. Tuesdays and Thursdays, 10.0 a.m. to 12.30 p.m. Wednesdays, 9.0 a.m. to 12.30 p.m. and 2.0 p.m. to 4 p.m.</p>
<p>ABBEY SCHOOL Junior and Senior Departments, Park Street, Rotherham. Minor ailment, general inspection and treatment. Speech therapy.</p>	<p>Medical sessions—as required Nurses treatment sessions—Mondays, 2.0 p.m. to 3.30 p.m. Tuesdays, 9.0 a.m. to 12.15 p.m.</p>
<p>ST. JOHN'S GREEN CLINIC, Kimberworth Park, Rotherham. Minor ailment, general inspection and treatment. Immunisation.</p>	<p>Medical sessions—Wednesdays, 9.0 a.m. to 12.30 p.m. Nurses treatment sessions—Wednesdays, 9.0 a.m. to 12.0 noon. As required—at medical sessions.</p>
<p>CANKLOW CLINIC, Canklow, Rotherham.</p>	<p>Medical sessions—Tuesdays, 2.0 p.m. to 4.0 p.m.</p>

SCHOOL MEALS SERVICE

ORGANISER OF SCHOOL MEALS: MISS N. TAYLOR.

The analysis set out below shows the number of school dinners consumed during each quarter of the year. This number increases each year, and the pattern for 1965 shows a marked increase in Junior and Infant Schools.

For these age groups we have ten schools with kitchen and dining accommodation within the school. Kitchens are working to full capacity serving dinners in two sittings. In addition, the Cook-Supervisors prepare meals for other schools and send them out in containers. To improve these transported meals, a number of schools have had their meal transported in family unit containers. Nine units fit into one rectangular container, which means some days eight containers for each department. The only disadvantage with this system is that women drivers are handling very heavy loads.

Schools without kitchens and dining rooms have really had a difficult time ; classroom feeding and assembly halls create many school problems.

Dining accommodation for Alma Road Junior and Infant School has changed during the year. Oaklea was adapted for dining and washing up. The advantage gained is that it is nearer the school and saves the children crossing a busy main road. The dinner numbers are such that each room is packed to full capacity twice daily.

The Abbey School was transferred to the former Park Street School this year ; their conditions have never been so good as they now have a kitchen and dining room on the premises. The children are settling down very well to a meal served in the family unit method.

Arnold Road Nursery washing-up facilities have been improved, a sterilizing unit was installed and also an electrically heated hot cupboard for warming plates. Dinners are prepared at Badsley Moor Lane School Kitchen and wheeled across in an electrically heated trolley.

Wingfield School Kitchen was opened in January and has run very smoothly from the start. There are about 400 meals served in the school dining room. In addition meals are prepared for Roughwood Junior and Infant School, making a total of 760.

South Grove School Kitchen was opened in June. This is a 400 meals kitchen, dining in two sittings. Meals are also prepared for the Adult Training Centre and transported to Downs Row.

The Secondary School Kitchens opened within the past two years have all been equipped with stainless steel tableware, modern style cutlery, meat dishes, water jugs, gravy jugs and polished aluminium vegetable dishes. The dining tables are of mahogany plastic finish. The dining halls when set for dinner look well, and in each case the quality of the meal served is in keeping with the appearance of the room. There is no doubt that this service is of real educational value.

Staffing is now a real problem ; to maintain a high standard and work to the Department of Education and Science regulations concerning staffing ratios is difficult. The rate of labour turnover is high and few of the new recruits are really keen on training and the acquisition of qualifications.

1965	Number of Meals
January-March	540,049
April-June	426,049
July-September	307,025
October-December	502,398
	<hr/>
	1,775,521
	<hr/>

JUNIOR AND ADULT TRAINING CENTRES.

1965	Number of Meals
January-March	5,008
April-June	4,037
July-September	2,869
October-December	4,595
	<hr/>
	16,589
	<hr/>

The following table shows the number of meals supplied since 1955:

1955—1,215,617	1961—1,348,906
1956—1,263,553	1962—1,401,488
1957—1,111,848	1963—1,525,101
1958—1,212,734	1964—1,594,493
1959—1,242,702	1965—1,775,521
1960—1,288,816	

The figures of actual attendance compared with the dinner numbers show that over the year 70 per cent of the children now have a school dinner.

1965	Average School attendance per day	Percentage of number on roll	Average Number of Meals per day	Percentage
September	13,676·1	93·2	9,482	69·3
October	13,652·2	92·5	9,540	69·9
November	13,470·1	91·0	9,463	70·3
December	13,348·9	90·3	9,501	71·2
Average	13,536·8	91·7	9,497	70·2
1964	13,369·6	91·6	8,584	64·2

PHYSICAL EDUCATION

ORGANISERS: MISS G. ELSWORTH, MR. J. BAILEY.

The year 1965 saw the fulfilment of a dream of over 25 years—the completion of facilities for gymnastics in each secondary school, whilst additions were also made to facilities for agility work in some primary schools.

PRIMARY SCHOOLS.

Work continued normally throughout the year. Fixed climbing apparatus has been installed at four primary schools: Blackburn, Broom Valley, Coleridge Road and Thornhill, and is much appreciated and enjoyed. It affords a challenge which can never be provided with portable apparatus.

During May, a short course on "The Application of Movement Training to Creative Dance in the Primary School," was taken by Miss J. Chorlton, Lecturer, Lady Mabel College of Physical Education, and attended by 30 men and women teachers. It is hoped that this will serve to stimulate experiment in this aspect of physical education.

SECONDARY SCHOOLS.

The opportunities offered by the facilities of the new Wingfield Secondary School, which replaced Park Street Secondary School, and the new block comprising hall, gymnasium and changing rooms at Kimberworth Secondary School have been much appreciated and enjoyed throughout the year.

At South Grove Secondary School, disadvantage eventually turned to advantage when, in the second phase of building, the upper gymnasium was added before the lower one was brought into use. Whilst this delayed the use of the lower one, it allowed both to be completed by the end of the year and the choice of apparatus for the lower one to be such as to afford maximum use for games training as well as gymnastic work. Unfortunately, changing accommodation is not yet available, a fact which causes considerable inconvenience. The distant siting of the main hall away from other physical education facilities is also a disadvantage.

It is hoped that the provision of new halls, offering better space and a more aesthetic setting will encourage the development of a wide scheme of dance in secondary schools. A programme of dances by The West Riding Movement Study Group, arranged by the South Yorkshire Physical Education Association and held in the new hall of Kimberworth School in the Spring, may have helped to stimulate this.

An attempt was made to hold a series of meetings of specialist women teachers, but after two sessions, a practical one at Old Hall School and a demonstration at Oakwood Girls' School, it proved impossible to choose a suitable day.

SWIMMING.

The programme of blocked swimming sessions for eleven primary schools already

involved in this scheme was continued. The total of Education Committee Certificates awarded to schoolchildren was:

Grade	I	II	III	IV
	1,242	368	135	3

In January, Miss H. Elkington, National Technical Officer of the Amateur Swimming Association, gave a lecture demonstration of a lesson for a class of mixed ability, which was attended by 32 teachers.

To encourage a better use of the facility offered by the Baths Committee at Main Street Baths, each day from 4.30 to 5.30 p.m., a new scheme was introduced as from September. Schools were offered the opportunity to work for the Bronze Medallion, Intermediate Certificate or Survival Awards of the Royal Life Saving Society, term by term, and this has already resulted in an increase in the number of awards gained over the year, 124 in all. As a further result of this, 13 girls and 73 boys were awarded free swimming vouchers. Two awards of the English Schools Swimming Association for Physically Handicapped pupils were gained by boys from Newman School. 48 Safety Awards of the Amateur Swimming Association were gained by Secondary School pupils. Two girls, Delta Sutor (High School) and Brenda Duke (Oakwood Girls') passed the Amateur Swimming Association Teacher's Certificate examination, at a course held in Doncaster.

ORGANISED GAMES AND ATHLETICS.

Use of Herringthorpe Playing Fields continued as before. The erection of a pavilion adjacent to the Stadium should encourage greater use of this area in the future.

Boys from Wingfield Secondary School were accommodated at Barker's Park for football each week.

In a very wet year, the Dri-pla area at Kimberworth Secondary School proved invaluable. Light use of the field at this school was made in summer and autumn and the school held its 1st Annual Athletics' meeting for girls and boys on the site.

The Foljambe field, the off-site playing fields for Spurley Hey Secondary School, came into use during the Summer Term.

One level of tennis courts at Old Hall Secondary School was re-surfaced, now allowing the siting of four tennis and three netball courts. Artificial practice cricket wickets, permanent throwing areas for athletic field events and additional jumping pits were added to the outdoor provision at the school and were extensively used during the summer.

OUTDOOR PURSUITS.

Boys and girls at Old Hall School were engaged in the numerous activities in the Duke of Edinburgh's Award Scheme. In September, Commander David Cobb, R.N, Secretary of the Boys' Scheme, presented four Gold, twelve Silver and fifteen Bronze Awards to pupils of the school. The school also held its annual camp at Malham.

A new and successful venture at South Grove School was an Association Football tour in Scotland during the Easter Holidays. Pupils at the school have commenced the building of a number of canoes and a club has been formed. Unfortunately some difficulty is being experienced in finding suitable open water on which to use the finished products.

Oakwood Boys' School toured Germany with Association Football teams at Easter.

At Kimberworth and Wingfield Schools a number of walks in the Peak District were organised during the year.

YOUTH COMMITTEE.

In addition to competitions in soccer, cricket and five-a-side football, recreational activities included physical education and keep-fit classes, rugby, basket ball, badminton, tennis, weight-lifting and judo.

As part of their training for Bronze, Silver and Gold Awards, boys taking part in the Duke of Edinburgh's Award Scheme engaged in expeditions involving light-weight camping, field work and athletics together with many individual pursuits and projects and a wide variety of activities in the Public Service section.

A residential weekend was organised by one youth organisation which invited members and guests from other clubs to share a programme consisting of various outdoor pursuits, lectures and group discussions at Birchfield, Hope, Derbyshire.

The following coaching groups were organised during the year :

- | | |
|------------------------------|--------------------------------------|
| 1. Association football. | 5. Principles of self defence. |
| 2. Judo. | 6. Tennis. |
| 3. Rugby football. | 7. Duke of Edinburgh's Award Scheme. |
| 4. Swimming and life saving. | |

ROTHERHAM AND DISTRICT SCHOOLS' ATHLETIC ASSOCIATION.

The Association enjoyed a very active year. The usual inter-schools competitions were organised throughout the seasons. The Schools' Association Football XI had a very successful season reaching the quarter-final round of the English Schools' Trophy Competition, and were winners of the Yorkshire Schools' Wylie Shield Competition. The Athletics Section organised the Yorkshire Schools' Cross-Country Championships in Clifton Park in February and held their own Secondary Schools' Championships on Herringthorpe Stadium in July. For the first time the primary schools held athletics meetings at the Stadium.

The Rotherham Boys' Cricket XI had a successful season after using the indoor nets at Spurley Hey School during the winter months.

The Senior Girls' Games Section organised successful inter-schools knock-out competitions and rallies in netball. For the first time, a hockey rally and tennis tournament were also arranged, both proving worthwhile events.

Performances at the Inter-Schools' Swimming Gala continue to improve. In July the Swimming Section organised the Yorkshire Schools' Minor 'B' Gala at Sheffield Road Baths.

DEPARTMENT OF EDUCATION AND SCIENCE
MEDICAL INSPECTION AND TREATMENT

year ended 31st December, 1965.

PART 1

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

TABLE A—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected. (Year of birth)	No. of Pupils Inspected.	Physical Condition of Pupils Inspected	
		Satisfactory	Unsatisfactory
1961 and later	96	96	—
1960	763	763	—
1959	789	789	—
1958	206	206	—
1957	73	73	—
1956	211	211	—
1955	552	551	1
1954	159	159	—
1953	120	120	—
1952	68	68	—
1951	114	114	—
1950 and earlier	730	730	—
Total ..	3881	3880	1

Percentage satisfactory .. 99·97
Percentage unsatisfactory .. ·03

TABLE A—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (Year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Part 11	Total individual pupils
1961 and later	5	6	11
1960	42	133	160
1959	44	141	160
1958	16	51	62
1957	4	27	29
1956	33	47	75
1955	94	80	149
1954	30	41	66
1953	23	33	47
1952	13	23	26
1951	20	31	44
1950 and earlier	121	140	238
Total ..	445	573	1067

TABLE B—OTHER INSPECTIONS.

Number of special inspections	3369
Number of re-inspections	8481
Total	11850

TABLE C—INFESTATION WITH VERMIN.

Total number of examinations in the school by the school nurses or other authorised persons	25344
Total number of individual pupils found to be infested	1112
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	284
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	173

PART II

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

TABLE A—PERIODIC INSPECTIONS.

Defect or disease	PERIODIC INSPECTIONS						TOTAL (including all other age groups inspected)	
	Entrants		Leavers		Others		Re- quiring treat- ment	Re- quiring observa- tion
	Re- quiring treat- ment	Re- quiring observa- tion	Re- quiring treat- ment	Re- quiring observa- tion	Re- quiring treat- ment	Re- quiring observa- tion		
Skin ...	24	44	55	18	38	21	117	83
Eyes—Vision ...	91	170	141	82	213	176	445	428
Squint ...	30	17	2	—	22	9	54	26
Other ...	3	2	1	1	3	1	7	5
Ears—Hearing ...	42	47	4	14	37	50	83	101
Otitis media	14	19	6	3	8	10	28	32
Other ...	3	1	1	1	4	2	8	4
Nose and throat ...	54	79	10	13	30	46	94	138
Speech ...	15	18	3	—	18	12	36	30
Lymphatic glands	16	57	2	7	9	24	27	88
Heart ...	4	11	3	7	2	15	9	33
Lungs ...	7	28	—	13	16	26	23	67
Developmental—								
Hernia ...	3	4	—	—	4	2	7	6
Other ...	7	95	14	12	17	70	38	177
Orthopaedic—								
Posture ...	7	9	3	3	26	6	36	18
Feet ...	15	9	43	7	37	21	95	37
Other... ...	21	14	19	11	28	17	68	42
Nervous system—								
Epilepsy ...	4	3	3	2	4	—	11	5
Other ...	4	2	1	7	7	14	12	23
Psychological—								
Development	4	45	—	39	13	67	17	151
Stability ...	2	10	—	5	5	22	7	37
Abdomen ...	8	20	5	6	3	16	16	42
Other ...	19	83	13	4	23	20	55	107

TABLE B—SPECIAL INSPECTIONS.

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring treatment	Requiring observation
Skin	1106	50
Eyes—Vision	1018	490
Squint	15	7
Other	134	9
Ears—Hearing	209	40
Otitis media... ..	63	8
Other	114	9
Nose and throat	505	101
Speech	113	20
Lymphatic glands	26	66
Heart	2	13
Lungs	38	33
Developmental—		
Hernia	4	9
Other	9	55
Orthopaedic—		
Posture	22	3
Feet	20	8
Other	104	24
Nervous system—		
Epilepsy	8	—
Other	2	12
Psychological—		
Development	13	15
Stability	3	12
Abdomen	38	18
Other	1239	177

PART III

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

(including Nursery and Special Schools)

TABLE A—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ..	118
Errors of refraction (including squint)	632
Total	750
Number of pupils for whom spectacles were : Prescribed	499

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

	Number of cases known to have been dealt with
Received operative treatment :	
(a) for diseases of the ear	45
(b) for adenoids and chronic tonsillitis	208
(c) for other nose and throat conditions	16
Received other forms of treatment	239
Total	508
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1965	3
(b) in previous years	11

TABLE C—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated
Pupils treated at clinics or out-patient departments	122
Pupils treated at school for postural defects	24
Total	146

TABLE D—DISEASES OF THE SKIN (excluding uncleanness, for which see Table C of Part 1).

							Number of cases known to have been treated
Ringworm : (1) Scalp	..	..	..	..	..	..	—
(2) Body	..	..	..	..	..	..	—
Scabies	..	..	..	..	..	..	2
Impetigo	..	..	..	..	..	..	17
Other skin diseases	..	..	..	..	..	..	1040
Total	..	..	..	..	..	..	1059

TABLE E—CHILD GUIDANCE TREATMENT

			Number of cases known to have been treated
Number of pupils treated at child guidance clinics	..	..	273

TABLE F—SPEECH THERAPY.

			Number of cases known to have been treated
Number of pupils treated by speech therapist	..	..	135

TABLE G—OTHER TREATMENT GIVEN.

						Number of cases known to have been dealt with
Pupils with minor ailments	..	..	..	..	..	922
Pupils who received convalescent treatment under School Health Service arrangements	..	..	..	..	..	273
Pupils who received B.C.G. vaccination..	..	..	..	..	..	819
Other treatments :						
Foot conditions	..	..	..	..	..	157
General condition	..	..	..	..	..	4
Bronchitis	..	..	..	..	..	32
Epilepsy	..	..	..	..	..	8
Total	..	..	..	..	..	2215

FORM 28M

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

ATTENDANCES AND TREATMENT

					Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	..	..	..	..	2,107	2,040	676	4,823
Subsequent visits	..	..	..	..	2,447	5,645	1,846	9,938
Total visits	..	..	..	..	4,554	7,685	2,522	14,761
Additional courses of treatment commenced					86	133	40	259
Fillings in permanent teeth	..	..			682	3,276	1,622	5,580
Fillings in deciduous teeth	..	..			579	53	—	632
Permanent teeth filled	..	..	..		573	2,856	1,439	4,868
Deciduous teeth filled	..	..	..		534	49	—	583
Permanent teeth extracted	..	..			440	1,585	353	2,378
Deciduous teeth extracted	..	..			3,905	1,136	—	5,041
General anaesthetics	..	..	..		1,795	1,159	176	3,130
Emergencies	..	..	..	..	773	398	67	1,238
Number of pupils x-rayed	..	..	..	..	..	..	..	493
Prophylaxis	..	..	..	..	..	..	..	1,381
Teeth otherwise conserved	..	..	..	..	..	..	..	15
Number of teeth root filled	..	..	..	..	..	..	..	10
Inlays	..	..	..	..	..	..	..	9
Crowns	..	..	..	..	..	..	..	14
Courses of treatment completed	..	..	..	..	..	..	..	4,374

ORTHODONTICS

Cases remaining from previous year	..	..	..	..	..	..	..	231
New cases commenced during year	..	..	..	..	..	..	..	205
Cases completed during year	..	..	..	..	..	..	..	159
Cases discontinued during year	..	..	..	..	..	..	..	96
No. of removable appliances fitted	..	..	..	..	..	..	..	526
No. of fixed appliances fitted	..	..	..	..	..	..	..	29
Pupils referred to Hospital Consultant	..	..	..	..	..	..	..	131

PROSTHETICS

					5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time)					3	—	—	3
Pupils supplied with other dentures (first time)	..	..	..	..	8	53	36	97
Number of dentures supplied	..	..			15	61	43	119

ANAESTHETICS

General anaesthetics administered by Dental Officers	3,130
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INSPECTIONS

(a) First inspection at school. Number of pupils	13,081
(b) First inspection at clinic. Number of pupils	1,337
Number of (a) + (b) found to require treatment	..	..	..	..	..	..	11,081
Number of (a) + (b) offered treatment	..	..	..	..	..	..	8,334
(c) Pupils re-inspected at school clinic	..	..	..	..	..	..	706
Number of (c) found to require treatment	..	..	..	..	..	..	385

SESSIONS

Sessions devoted to treatment	..	..	..	..	..	..	2,073
Sessions devoted to inspection	113
Sessions devoted to Dental Health Education	-

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