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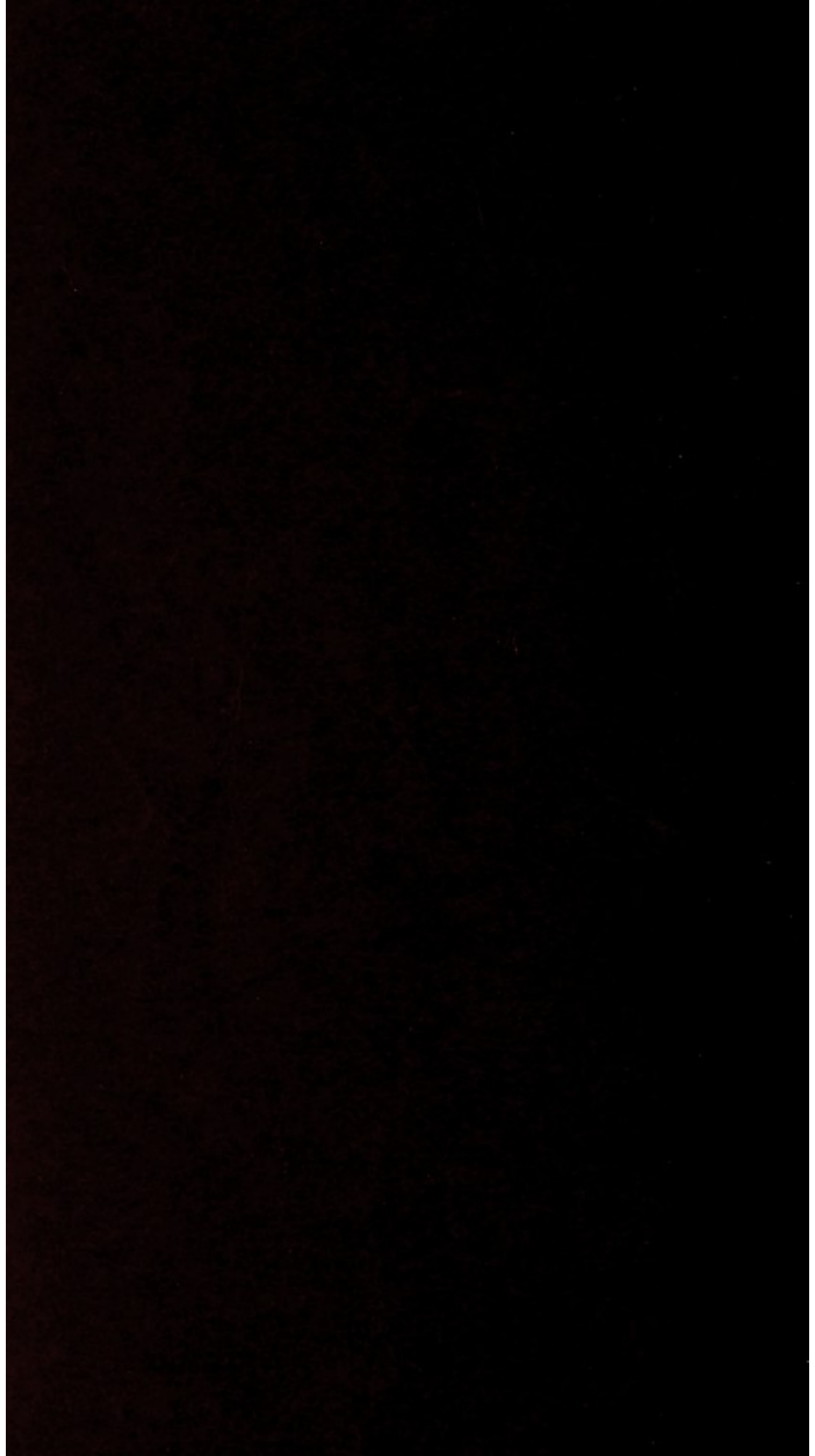
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County Borough of Smethwick

Annual Report

OF THE

Medical Officer of Health

FOR

1963

RICHARD J. DODDS, M.B., B.S., D.P.H.

**Medical Officer of Health, Chief Welfare Officer,
Principal School Medical Officer.**

W. L. KAY, F.A.P.H.I., M.R.S.H.

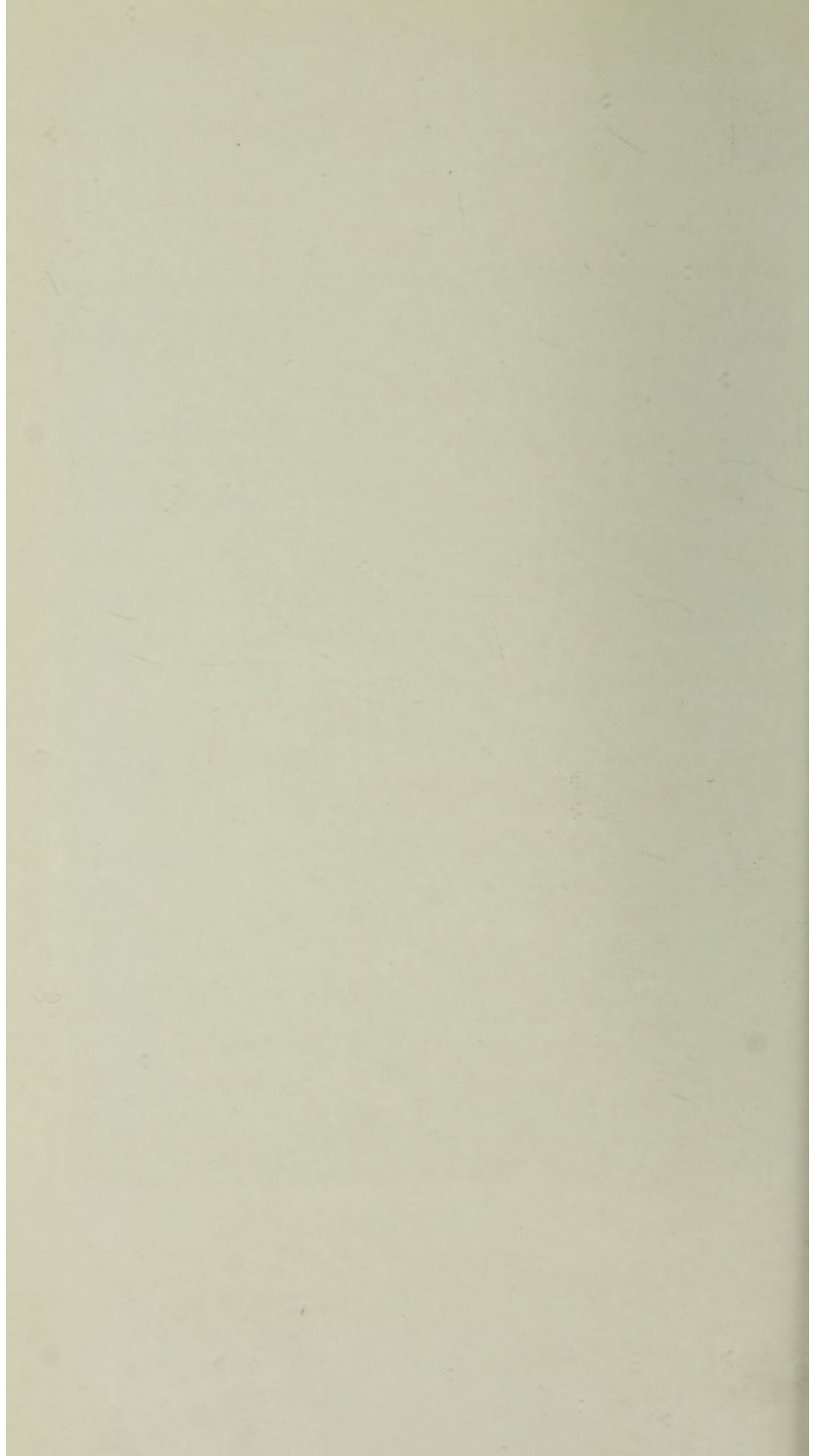
Chief Public Health Inspector.

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“ ADULT OCCUPATIONAL THERAPY ”



County Borough of Smethwick

COMMITTEES, 1963-1964

Health Committee:

Chairman: Alderman R. L. Pritchard

Vice-Chairman: Councillor Mrs. F. L. Wheatley

The Mayor: Councillor

H. Bone, J.P.

Councillor Mrs. L. V. Adams

Councillor H. V. Jackson

Councillor Mrs. E. M. Kontowska

Councillor W. G. Mason

Councillor D. A. Finney

Councillor D. K. Newman

Co-opted Members for the purpose of Maternity and Child Welfare:

Mrs. W. Cooper

Mrs. B. A. Jones

Mrs. S. Deeley

Miss S. C. Wright, M.B.E.

Co-opted Member for National Health Services:

Dr. J. G. Briant

Mental Health Sub-Committee:

All Members of the Health Committee:

with Mr. J. M. Adair

Dr. J. G. Briant

Dr. I. A. MacDonald

Chairman: Alderman R. L. Pritchard

Welfare Sub-Committee:

All Members of the Health Committee:

Chairman: Alderman R. L. Pritchard

"The Hollies" and Day Nursery Sub-Committee:

All Members of the Health Committee:

Chairman: Alderman R. L. Pritchard

Health and Education Joint Sub-Committee:

Representing Health Committee:

Alderman R. L. Pritchard

Councillor Mrs. F. L. Wheatley

Councillor W. G. Mason

Representing Education Committee:

Alderman Mrs. E. M. Farley, O.B.E., J.P.

Councillor R. Badham

Councillor D. K. Newman

Tuberculosis After-Care Committee:

All Members of the Health Committee:

Mr. G. A. Green

Mr. T. L. Griffiths

Mr. C. Short

Dr. R. J. Dodds

Dr. A. Wilson Russell

Miss M. Wainwright

Hon. Secretary: Mr. F. D. Hipkiss

Houses in Multiple Occupation Sub-Committee:

Chairman: Alderman R. L. Pritchard

Councillor Mrs. F. L. Wheatley Councillor D. A. Finney

HEALTH DEPARTMENT STAFF

Medical Officer of Health, Chief Welfare Officer and
Principal School Medical Officer:

Richard J. Dodds, M.B., B.S., D.P.H.

Deputy Medical Officer of Health and Deputy Principal
School Medical Officer:

Vincent A. Lloyd, M.B., Ch.B., L.R.C.P., M.R.C.S., D.P.H.

Assistant Medical Officers:

F. Constance Myatt, M.B., Ch.B., D.P.H., D.I.H.

Christina J. McLeay, M.B., Ch.B., (to 31.5.63)

Romola I. Wootton, M.B., Ch.B. (from 1.7.63)

Chest Physician (part-time):

A. Wilson Russell, M.D., Ch.B., D.P.H.

Principal Dental Officer:

T. Lucas, L.D.S., R.C.S. (Eng.)

Assistant Dental Officers:

Mrs. M. E. Hiscock, B.D.S. (to 31.10.63)

Mrs. E. Sampson, L.D.S., R.C.S.

The work of the dental staff is divided between Education and Health
Committees.

Chief Public Health Inspector:

(*abcdef*) William L. Kay, F.A.P.H.I., M.R.S.H.

Deputy Chief Public Health Inspector:

(*abc*) R. G. Evans, M.A.P.H.I.

Public Health Inspectors:

- | | |
|--|---|
| (abcd) W. F. Ball, M.A.P.H.I. | (abc) G. O. Wright, M.A.P.H.I. |
| (ab) D. G. Hobday, M.A.P.H.I. (to 30.4.63) | (ab) A. A. Johnson, M.A.P.H.I. (to 9.6.63) |
| (ab) T. P. Jones | (ab) A. W. Reeves, M.A.P.H.I. |
| (ab) R. G. Puffitt (from 1.1.63) | (ab) B. J. Pritchard (from 5.6.63) |
| (ab) B. D. Wildman (from 10.6.63) | |

Pupil Public Health Inspectors:

- | | |
|--|--------------|
| Miss L. A. Kerr | J. N. Oakley |
| a Public Health Inspector's Certificate of the R.S.H. and S.I.E. Joint Board. | |
| b Meat and Food Inspector's Certificate of the R.S.H. | |
| c Smoke Inspector's Certificate of the R.S.H. | |
| d Certificate in Sanitary Science of the R.S.H. | |
| e Liverpool University Meat Inspector's Diploma. | |
| f Liverpool School of Hygiene Smoke Inspector's Certificate. | |

Administrative and Clerical Staff:

Chief Administrative Assistant: F. D. Hipkiss, A.R.S.H.

Deputy Chief Administrative Assistant: G. A. Fox, D.P.A.

- | | |
|-------------------------------|---|
| W. H. Bellshaw | —Mental Welfare Officer |
| F. T. Brookes, S.R.N., R.M.N. | —Mental Health Officer |
| F. A. Collett | —Welfare Officer |
| Mrs. D. J. Nuttall | —Assistant Welfare Officer (from 1.7.63) |
| Miss M. G. Parkes | —Assistant Welfare Officer (to 14.2.63) |
| G. Bitson | —Welfare Assistant (to 1.9.63) |
| K. M. Linge | —Welfare Assistant (from 14.10.63) |

Clerical Staff:

- | | |
|---|---|
| S. de Wit—Senior Clerk | Miss A. Pinson |
| Mrs. C. L. Beddows | Miss E. D. Priest |
| Miss P. J. Bevington (from 28.10.63) | Mrs. E. M. Roe (to 24.6.63) |
| Mrs. D. Cooper | Miss O. J. Salmon |
| Mrs. M. E. Cudd (from 8.7.63) | Miss J. A. Stanton (from 15.7.63) |
| Miss S. M. Davies (from 7.8.63) | Mrs. V. Styles (from 8.4.63—part-time) |
| Miss O. M. Duberley | Miss D. C. Tipping |
| Miss K. M. Dunnaker | Miss R. A. Vaughan (to 20.10.63) |
| Mrs. F. D. Dyke | Mrs. C. M. Walker |
| Mrs. L. Gregory | Miss M. L. Whitehouse |
| Mrs. D. Marshall | Miss V. H. Willetts (to 7.7.63) |
| Mrs. S. N. Oakley (from 28.10.63) | |

Trainees:

G. F. Dyer, Welfare Officer (from 13.3.63).
J. Seward, Administrative Assistant.

Nursing Staff:

*Superintendent Nursing Officer: Miss M. Wainwright.
*Deputy Superintendent Nursing Officer: Mrs. D. Grainger
(from 1.10.63).

*Health Visitors:

Group Advisor: Mr. D. Grainger (to 30.9.63)
Miss D. Hunt (from 1.12.63)

| | |
|--------------------------------|---------------------------|
| Miss M. Adams | Mrs. H. M. Hoy |
| Miss K. E. Barlow | Mrs. M. Stark (part-time) |
| Miss K. E. C. Biggs | Miss M. E. Tench |
| Mrs. I. Cowell | Miss E. M. M. Williams |
| Mrs. D. H. Daniels (part-time) | Miss F. Zierler |

* All qualified S.R.N., S.C.M., H.V. Cert.

Student Health Visitors (from 1.10.63):

Mrs. A. G. Child, S.R.N., S.C.M. Mrs. M. F. Peters, S.R.N.,
Miss G. Simpkins, S.R.N., S.C.M. S.C.M., O.N.C.

Clinic Nurses:

| | |
|--|--|
| Mrs. R. A. McInerney, S.R.N., R.F.N. (née Cassidy) (to 30.11.63) | Mrs. E. M. Gibbs, R.S.C.N. Miss G. Simpkins, S.R.N., S.C.M. (from 1.4.63 to 30.9.63) |
| Mrs. A. G. Child, S.R.N., S.C.M. (to 30.9.63) | Mrs. H. M. Warner, S.E.N. Miss L. Webb, S.E.N. (to 31.1.63) |
| Mrs. G. M. Broad (from 28.10.63) | |
| Mrs. P. A. Griffin (from 3.12.63) | |

The work of Health Visitors and Nurses is divided between the
Health and Education Committees.

Municipal Midwives:

| | |
|--|---|
| Mrs. A. Grosvenor, S.R.N., S.C.M. | Mrs. E. M. Mahood, S.R.N., S.C.M. |
| Mrs. D. G. Hepburn, S.C.M. | Miss E. A. Cheetham, S.R.N., S.C.M. (from 19.6.63) |
| Mrs. L. Jacques, S.R.N., S.C.M., Q.I.D.N. | Miss P. M. Snaith, S.R.N., S.C.M. |
| Miss M. A. King, M.B.E., S.R.N., S.C.M. | Mrs M. A. Street (née Stockton) S.R.N., S.C.M. |

| | |
|--|----------------|
| Firs Clinic, Firs Lane, Smethwick | SMethwick 1461 |
| Superintendent Nursing Officer | SMethwick 0996 |
| Midwifery Service (general enquiries) | |
| Health Visitors | |
| Chest Clinic | SMethwick 1080 |
| Dental Clinic | SMethwick 1461 |
| Welfare Foods | SMethwick 1461 |
| Cape Clinic, Cape Hill, Smethwick | SMethwick 0659 |
| Chiropody Clinic | |
| Occupational Therapy Centre | |
| Dental Clinic | |
| Holly Lane Clinic, Holly Lane, Smethwick | SMethwick 2895 |
| Chiropody Clinic | |
| Ultra Violet Light Clinic | |
| Principal Dental Officer and Dental Clinic | |
| Eye Clinic | |
| Stanhope Road Clinic, Stanhope Road, Smethwick | BEARwood 3962 |
| Dental Clinic | |
| " The Hollies " Children's Home and Day Nursery | SMethwick 0763 |
| Albert Bradford Centre, Holly Lane, Smethwick | SMethwick 2560 |
| Edward Cheshire Nurses' Home, 2 Bearwood Road, Smethwick | SMethwick 0953 |
| Deputy Superintendent Nursing Officer and Supervisor of Home Nurses | |
| Residential Accommodation provided under Part III of National Assistance Act, 1948 | |
| " Garden Lodge ", Little Moor Hill, Smethwick | SMethwick 2807 |
| " Hill Crest ", Little Moor Hill, Smethwick | SMethwick 0173 |
| " Beech Croft ", Salop Road, Warley, Oldbury (opened in 1964) | BEARwood 2993 |
| " Parkdene ", 31 Park Hill, Moseley, Birmingham. | SOUth 1385 |
| Ambulance Station, Londonderry Lane, Smethwick | SMethwick 0673 |

CLINICS AND TREATMENT CENTRES

INFANT WELFARE CLINICS

2 p.m. to 4 p.m.

| | |
|----------------------|-----------------------|
| Firs Clinics | Monday and Thursday |
| Cape Clinic | Tuesday and Thursday |
| Holly Lane Clinic | Wednesday and Friday |
| Stanhope Road Clinic | Tuesday and Wednesday |

CHIROPODY CLINICS

Cape Clinic, Holly Lane Clinic—by appointment.

CHEST CLINIC

| | | |
|-------------|-----------|------------------------------|
| Firs Clinic | Monday | Adults: 5.30 to 7.30 p.m. |
| | Wednesday | 2.00 to 4.00 p.m. |
| | Friday | 2.00 to 4.00 p.m. |
| | Tuesday | Children: 10.00 to 12.0 noon |
| | Thursday | 10.00 to 12.0 noon |

DENTAL CLINICS for children of all ages and expectant or nursing mothers are held daily at all clinics.

ULTRA VIOLET RAY CLINIC

| | | |
|-------------------|----------|-------------------|
| Holly Lane Clinic | Tuesday | 2.00 to 4.00 p.m. |
| | Thursday | 9.00 to 11.0 a.m. |

EYE CLINIC

| | | |
|-------------------|----------|-------------------|
| Holly Lane Clinic | Monday | 9.30 to 12.0 noon |
| | Monday | 2.00 to 4.30 p.m. |
| | Tuesday | 9.30 to 12.0 noon |
| | Thursday | 2.00 to 4.30 p.m. |

PSYCHIATRIC CLINIC

Firs Clinic—by appointment

PUBLIC HEALTH DEPARTMENT,
COUNCIL HOUSE,
SMETHWICK, 40,
STAFFS.
Telephone No.
SMETHWICK 1461.

**To the Mayor, Aldermen and Councillors for the
County Borough of Smethwick.**

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting my ninth Annual Report which has been prepared in accordance with the requirements of the Public Health Officers' Regulations, 1959, and the Ministry of Health Circular 1/64.

THE YEAR

The opening of 1963 was something of a contrast to the previous year which had been fraught with the dangers to public health consequent upon the importation of smallpox. While many hundreds, indeed thousands, of people were vaccinated in Smethwick in 1962 the demand for vaccination against smallpox and poliomyelitis fell off sharply so that at the end of March, 1963, the Saturday morning open poliomyelitis vaccination clinics which had been held since May, 1961, at the Firs Clinic were discontinued. At the request of the Ministry of Health a special register was started at the beginning of the year, the aim of which is to ensure that children who are specially liable to develop or suffer from a condition needing medical advice or guidance are kept on a so-called "at Risk Register" and under close supervision to ensure that their health, development or schooling do not suffer because of any of a great many detrimental factors which might be operative. These factors include a number of illnesses or disabilities in the family as well as certain pre, peri- and post-natal influences.

In January, 1963, a deputation composed of representatives of the Local Health Authority, the Local Medical Committee and the Local Executive Council visited the Regional Hospital Board and discussed the possible provision of General Practitioner hospital beds and also the need for a new general hospital in the area of the proposed new County Borough of Warley. It is probable that Warley will be the only County Borough in the country without a general hospital within its boundaries. One of the major difficulties in the way of the provision of a hospital would be the allocation of a suitable site but in my view every effort should be made to find a possible site, and to press the Regional Hospital Board to earmark it for hospital development, when capital funds can be made available.

POPULATION CHANGES AND VITAL STATISTICS

The Registrar General has had to revise future population estimates because of certain changes which were not foreseen when projections of the future population were made after the war. The recent

increase in births is not wholly attributable to the fact that people are marrying younger, they are also having more children. The number of people of working age and the number over pensionable age will increase roughly in step maintaining a ratio of about 4 to 1 respectively; the number of children however will increase more rapidly. Though these increases will undoubtedly have their effects on the social services and the housing resources in the country they are more cheering than the rather gloomy forecasts which were current ten years ago of an ageing nation in which fewer and fewer working people would be supporting more and more pensioners.

There has been a slight fall in the estimated mid-year population of Smethwick from 68,680 to 68,510; having regard to the method of calculation of this mid-year estimate a variation of this magnitude is of little or no significance. There has been a further but somewhat smaller rise in the number of births in Smethwick, 1,355 children being born compared with 1,307 last year and 1,207 the previous year. The birth rate at 19.77 per thousand compared with 19.03 in 1962 was the highest for some years. There was a rise in the still birth rate which stands at 0.50 per thousand population compared with 0.39 last year and 0.44 the previous year. Fewer people died, there being 831 deaths as against 864 the previous year; the death rate was 12.3 per thousand population. The infant mortality rate was 22.88 per thousand live births an improvement on the figure of 23.72 last year. The perinatal mortality rate which is calculated from the number of still births plus the numbers of deaths in the first week of life expressed per thousand total births, was 33.12 compared with 34.48 and 40.60 the previous years. The causes of death were not without interest, there were only four deaths from pulmonary tuberculosis compared with no less than 46 from lung cancer. This is the highest number of deaths from lung cancer ever known in Smethwick. There were 106 illegitimate births giving a rate of 8.11% as compared with 9.7% illegitimate births last year.

The Registrar General's provisional figures for deaths from lung cancer and pulmonary tuberculosis are available for 1963. The trend shown by these figures over the last three years shows an interesting contrast.

Deaths in England and Wales

| | 1961 | 1962 | 1963 (Provisional figures) |
|------------------------|--------|--------|-------------------------------|
| Lung Cancer ... | 22,810 | 23,779 | 24,422 |
| Pulmonary Tuberculosis | 3,002 | 2,774 | 2,613 |

Each year the Institute of Municipal Treasurers and Accountants and the Society of County Treasurers jointly produce analyses of local authority statistics. Their analysis of Local Health Services statistics for 1962-63, as usual, provides information of interest. If the financial statistics for Smethwick are compared with the average for County Boroughs over the same period it shall be seen that Smethwick is spending less than the average for its Day Nurseries, on Mother and Baby Homes, on the Midwifery Service, Health Visiting and on Home Nursing. Conversely we are spending more than average on Child

Welfare Clinics, Vaccination and Immunisation, the Ambulance Service, Training Centres, Tuberculosis Care and After-care and the Home Help Service.

CARE OF MOTHERS AND YOUNG CHILDREN:

The midwifery service enjoyed another year of full staffing the midwives attending the largest number of domiciliary deliveries since 1949. Of the 1,355 births which took place to Smethwick mothers during the year 63% were confined in hospital. The largest number of these (81%) were in St. Chad's Hospital, followed by 12% in Dudley Road Hospital, the remaining births being divided between a number of other maternity units. There were 113 premature births, a smaller proportion of the total births than last year. The health visiting service continued very much as in previous years though a change in the method of recording their work, made at the request of the Ministry of Health, has resulted in an apparent fall in the number of infants visited and an apparent increase in the visits to children aged between 1—5 years. There was a slight reduction in the number of attendances at the infant welfare clinics due to the smaller than usual numbers coming to the centres during the first three months of the year when the weather was, of course, unusually cold.

HOME NURSING SERVICE:

The resignation of Miss High, the Supervisor of the Home Nursing Service, at the end of September necessitated some re-organisation of the supervision of the service. The Health Committee decided that the supervision of the home nursing service should become the responsibility of a Deputy Superintendent Nursing Officer and Mrs. Grainger, Group Advisor, who for many years acted as deputy to the Superintendent Nursing Officer, was given these new duties. It was felt that the new arrangements would make for even closer co-ordination of the nursing services of the Borough. During the year, 910—an increase of about 30—patients were under treatment by the home nurses involving over 30,000 visits by the home nurses; 49 incontinent patients were helped by the free special laundry service. We continue to be indebted to the Baths Department for their help with the laundering which enables this most worth while service to be carried on. It is perhaps surprising that even less use is made of the free loan service for sick room aids, there being only 480 issues during the year compared with 537 in 1962.

AMBULANCE SERVICE:

The work of the Ambulance Service continues to grow; during the year 3,500 more patients were carried and nearly 10,000 more miles travelled. There was also an increase in street accident calls from 258 in 1962 to 326. During the year a new electrically operated premature baby unit was purchased. This enables a premature baby to be conveyed by ambulance in a special carrying unit in which the temperature is carefully controlled and extra oxygen is supplied as necessary. Finally on this subject, as this is a matter which often causes difficulty, I would draw attention to the methods of calling an ambulance which are outlined on page 31.

HEALTH EDUCATION:

I am asked by the Ministry of Health to make special mention of any development in health education activity in respect of smoking and venereal diseases. It is not, of course, suggested that these two social evils are in anyway related and they will, therefore, be dealt with separately.

I have already written about smoking in my Annual Report as Principal School Medical Officer, the same ground will therefore not be covered. In February, we had a visit from the Mobile Unit of the Central Council for Health Education. Talks and demonstrations were given in several Secondary Schools and in a large industrial canteen. One of the lecturers also spoke at the Smethwick Rotary Club. One is not in a position to estimate how much impact was made by this three-day visit. It appears that the adult public as a whole are not sufficiently interested in their future health to go so far as to stop smoking. There are however noticeably fewer doctors who smoke now than was the case a dozen years ago. Teenagers and school children show more interest and if the "Beatles" could be persuaded to announce that they were non-smokers, it would probably have more impact than all the posters and exhibitions put together.

Health Education on venereal diseases is a particularly difficult matter. The posters issued up to now leave much to be desired and probably make little impression on the problem. Talks to groups of young people undoubtedly are better but have not been embarked upon on any scale.

The general health educational activities of the health visitors have continued and been augmented. Plans are under way for the establishment of a health education workshop at the Firs Clinic so that more ambitious display material and lecturing aids can be prepared by health visitors and others interested. When it is in operation notable progress will, I am confident, be made.

INFECTIOUS DISEASES AND THEIR PREVENTION:

The incidence of tuberculosis shows little variation compared with last year, 77 new cases including inward transfers being added to the register, three fewer than last year. No less than 14 of these patients suffered from non-pulmonary disease. At the end of the year only four known infectious cases remained at home, the corresponding figure for 1962 was nine. Once more it is satisfactory to note from Dr. Wilson Russell's report (which is reproduced on a later page) that sanatorium treatment is immediately available and advisable for the early stages of treatment of newly diagnosed cases of the disease. The incidence of tuberculosis among immigrants again increased, 35 of the 63 new cases arising in Smethwick and 6 of the inward transfers were immigrants totalling 50% of the additions to the register. Details of the nationalities of these immigrants can be found in Dr. Russell's report. In expressing my thanks to Dr. Russell for his interesting report I would echo his remarks on the paramount importance of housing in combating tuberculosis. In view of the continued activity of the disease in Smethwick and other similar areas it is perhaps un-

fortunate that it has not proved possible for some form of x-ray of immigrants to this country to be undertaken. It is realised that the practical difficulties are considerable and that the value of the single x-ray examinations is limited, but nevertheless the case for action on these lines remains strong.

There is little to report of any unusual incidence of the acute infectious diseases during the year. Perhaps the most disturbing trend was the further rise in the incidence of venereal disease seen at the clinic; there was an increase of 22 new cases of gonorrhoea making 72 in all. It is disquieting that the group of sexually transmitted diseases should continue to increase and it is obviously of importance that the existing facilities for the diagnosis and proper treatment of these conditions should be maintained at full strength. It is customary for Smethwick patients suffering, or who think they may be suffering from venereal diseases to attend the special clinic at the General Hospital in Birmingham.

There was a marked fall in the number of infants and young children vaccinated against smallpox as was fully expected following the advice which has been given by the Ministry of Health on technical grounds that the best age for this vaccination is between one and two years old rather than in the early months of infancy. It is to be hoped that there will be a recovery from this setback, for there is little doubt that mothers are less anxious to have their lusty toddlers vaccinated than they are their infants in arms. Thus any benefits, which are marginal and not universally accepted, obtained by postponing vaccination are clearly more than outweighed by the large number of children who are not being presented for vaccination in their second year of life.

Vaccination of 13 year old children against tuberculosis continued, B.C.G. vaccine being used. There was a rather disturbing rise in the proportion of Mantoux positive children, 11.66% of the 13 year olds were Mantoux positive and therefore not given B.C.G. vaccine. Last year the percentage was 10.97%. The significance of the state of Mantoux positivity is as an indication that the children had been in contact with tuberculous infection previously which of course is not the same thing as saying they had suffered from tuberculosis. In nearly all such Mantoux positive cases the infection has been overcome without the children or their parents being aware of the happening and the children have been left with a worth while resistance against the disease. The increased proportion of Mantoux positive children is in part due to the fact that 24 out of the 41 Indian and Pakistani children who were tested were found to be Mantoux positive. The percentage of Mantoux positive children among the non-Asiatic children was 8.9% which is nearer to the expected level.

ENVIRONMENTAL HEALTH

A good deal of time is spent in the department, particularly by my colleague, Dr. Lloyd, on the medical assessment of priorities for rehousing of people already housed by the Corporation because of medical reasons. There are many people who wish to transfer to other areas for good and sometimes urgent medical reasons. There are other

people who look for a medical reason to facilitate their transfer to a more desirable part of the town. Dr. Lloyd has kindly contributed a note on the subject later in the report.

On the subject of housing one might mention that efforts are very regularly made through the Children's Welfare Committee to assist families who are in difficulties including those families who are often referred to as problem families. All too frequently arrears of rent accumulate but through the efforts of the members of the staff concerned in one or other of the departments and voluntary agencies who assist and co-operate in this matter money is collected week by week and the rent payments maintained and the arrears reduced. In this way a number of evictions are avoided.

FLUORIDATION OF WATER SUPPLIES

Unfortunately no progress has been made during the year towards remedying the deficiency of fluoride in the water supply in Smethwick. Nearly all the houses in the Borough are supplied by the South Staffordshire Water Works Company who also supply many other authorities. Presumably therefore agreement of all authorities involved will be necessary before steps can be taken to implement this overdue protective measure for the teeth of our children.

CARE OF THE ELDERLY

Many of the local health domiciliary supportive services provided under the National Health Service Act are increasingly devoted to the care of the elderly and handicapped. The Home Help Service which so often provides a foundation on which the other services can be built is almost exclusively devoted to caring for the elderly. Home Nurses spend a large proportion of their time looking after old people. In this way the elderly are enabled to continue to live in their own homes long after they would otherwise have had to be admitted to an old people's home or a geriatric unit. Towards the end of the year, plans were well advanced for expanding the mobile meals service by the provision of an additional vehicle. The number of meals one vehicle can deliver at a reasonable time of day and in a reasonable way is limited, and, therefore, this service is not a cheap one to run. It is, however, a great boon for elderly housebound residents, who would be unable to cook themselves a meal and might otherwise do without proper nourishment if a Home Help or a neighbour could not provide a hot meal.

It is increasingly realised by those who have responsibilities for the care of the elderly that continued function depends on continued use; in other words, the moment an old person ceases to go shopping or visit friends he quickly becomes less able to walk any distance outside. In practice, one of the most important reasons why the elderly find it increasingly difficult to get about it because their feet hurt—a painful corn or overgrown toe nail may, in fact, be just as disabling as a much more serious organic condition. This applies particularly to women who, after a lifetime of wearing unsuitable shoes, are far more affected by deformed and painful feet than men. It is, therefore, with regret that I have to report that owing to the continued shortage

of staff there has been a steady fall in the number of patients treated in our chiropody clinics over the last year or two. The total treatments have shown a reduction from over 8,000 in 1960 to less than 4,700 in 1963. It is hoped that because of an improved staffing position, the figures for 1964 will show a substantial rise.

During the year our new fifty place home provided as residential accommodation under Part III of the National Assistance Act was being built. This home, to be known as "Beech Croft" will provide a very much needed increase in the places available for those in need of care and attention which is not otherwise available. The staffing of the home is being planned so that infirm residents can be cared for more readily, because it is undoubtedly true that intake of new residents are not only much older—the 80 to 84 age group being the commonest one for new admissions these days, but also new admissions are less able to care for themselves than formerly.

CARE OF THE HANDICAPPED

There have been several developments in this field during the year. The Minister of Health accepted recommendations by his Advisory Committee on the health and welfare of handicapped persons which have had the effect of making certain administrative changes in the care of partially sighted persons. Those who have useful sight and are likely to retain it may, as a result of the changes introduced, be treated in the same way as other groups of handicapped people and be provided with all the services available to those with other disabilities.

During the year the Birmingham Royal Institution for the Blind gave notice that their home workers scheme was being wound up with effect from the 31st March, 1964. It had proved no longer practicable to continue because of the withdrawal of many local health authorities which formerly participated in the scheme. In the future, any home workers will have to be looked after by our own welfare staff, though the Royal Institution have indicated that they will be pleased to offer technical advice.

As mentioned in the body of the Report, the Occupations Officer was able to devote the whole of her time during the last four months of the year to occupational therapy with handicapped adults and it is hoped this will herald a steady expansion of these services.

DR. HUGH PAUL

It is with great regret that I have to record the death of Dr. Hugh Paul which occurred on 13th May, 1964, before this Report appeared in print. Dr. Paul was Medical Officer of Health from 1927 to 1955 and gave wonderful service to the Borough. His reputation as an author and speaker extended beyond these islands and it is fitting that his major work "The Control of Diseases" which was a completely revised and enlarged second edition of a work published some years earlier should have become available only a few months before his death.

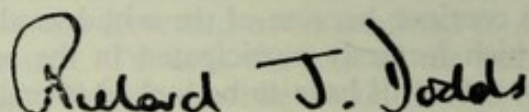
STAFFING MATTERS AND ACKNOWLEDGMENTS

There was a number of staff changes during the year, we were sorry to lose the services of Dr. Christina McLeay, who retired at the end of May. She had worked in Smethwick for some 19 years with a break of 10 years. Miss Jennie High resigned at the end of September, having given the people of Smethwick 23 years excellent work, first as a Health Visitor and for many years as Supervisor of Home Nurses with which post she at first combined the supervision of the Home Help Service. I should like to mention the retirement of Mrs. Evelyn Roe after 33 years of notable service to the Corporation for the past 25 years of which she was Secretary to the Medical Officer of Health. All these ladies gave splendid service to the department and the people of Smethwick and they deserve our gratitude.

Once again it is a pleasure to express my thanks to the Chairman and Members of the Health Committee as well as to other Chief Officers and Heads of Departments for their co-operation and interest shown in the work of the department throughout the year. I should like to thank most warmly all members of my own staff for their excellent work during the year. My thanks are also due to Mr. Hipkiss and to Mr. Fox and other staff members for their help in preparing the body of the text of this annual report. I am indebted to Dr. Lloyd for his note on medical examinations and housing and to Miss Wainwright for information of Health Educational developments and other matters.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

A handwritten signature in dark ink, reading "Richard J. Dadds". The signature is written in a cursive style with a large, prominent 'R' and 'D'.

Medical Officer of Health.

ANNUAL REPORT

1963

DEMOGRAPHIC STATISTICS

Area: 2,500 acres.

Population: Census, 1961: 68,372.

Estimated civilian population 1963 (mid-year): 68,510.

Rateable value: £2,656,829 (April, 1964)

Estimated Product of a Penny Rate: £10,400
(April, 1964).

Rates in the £: 10/- (April, 1964).

Estimated Number of Houses and Shops in the Borough,
22,912

Information
from
Borough
Treasurer

EXTRACTS FROM VITAL STATISTICS (supplied by Registrar General)

| | | 1963 | 1962 |
|---------------|--|-------|-------|
| Live Births: | Male | 689 | 684 |
| | Females | 666 | 623 |
| | Total | 1,355 | 1,307 |
| | Illegitimate Births included in above total | 116 | 106 |
| | Percentage of illegitimate live births in total of live births... | 8.56% | 8.11% |
| | Birth-rate per 1,000 population | 19.77 | 19.03 |
| | Comparability Factor (births) | 1.05 | 1.00 |
| | Birth-rate as adjusted by Factor | 20.76 | 19.03 |
| Still Births: | Males | 19 | 11 |
| | Females | 15 | 16 |
| | | 34 | 27 |
| | Illegitimate still births included in above total | 6 | 4 |
| | Still birth-rate per 1,000 population | 0.50 | 0.39 |
| | Rate per 1,000 total births ... | 24.47 | 20.24 |
| | Total live and still births ... | 1,389 | 1,334 |
| Deaths: | Males | 442 | 460 |
| | Females | 389 | 404 |
| | | 831 | 864 |

| | | | |
|----------------------------|---|-------|-------|
| | | 1963 | 1962 |
| Deaths: | Death rate per 1,000 population | 12.13 | 12.58 |
| | Comparability Factor (Deaths) | 1.09 | 1.05 |
| | Death-rate adjusted by Factor | 13.22 | 13.21 |
| Infant Deaths: | Male—legitimate | 15 | 13 |
| | illegitimate | 2 | 1 |
| | Female—legitimate | 13 | 13 |
| | illegitimate | 1 | 4 |
| | | <hr/> | <hr/> |
| | | 31 | 31 |
| | | <hr/> | <hr/> |
| Infantile Mortality Rates: | | | |
| | Legitimate infants per 1,000 legitimate live births | 22.60 | 21.65 |
| | Illegitimate infants per 1,000 illegitimate live births | 25.86 | 47.17 |
| | All infants per 1,000 live births | 22.88 | 23.72 |
| | Deaths of infants under 1 year | 31 | 31 |
| | Deaths of infants under 4 weeks | 14 | 23 |
| | Deaths of infants under 7 days | 12 | 19 |
| | Neo-natal mortality rate | 10.33 | 17.60 |
| | Early neo-natal mortality rate | 8.86 | 14.54 |
| | Perinatal Mortality (i.e. still births plus deaths during 1st week of life) per 1,000 total births | 33.12 | 34.48 |
| Maternal Mortality: | | | |
| | Maternal deaths | 1 | 1 |
| | Maternal death-rate per 1,000 total births... | 0.72 | 0.75 |

PRINCIPAL CAUSES OF DEATH

| | | | | Number of Deaths | | Rate per 1,000 Population | |
|------------------------------------|-----|-----|-----|------------------|------|---------------------------|------|
| | | | | 1963 | 1962 | 1963 | 1962 |
| Pulmonary Tuberculosis | ... | ... | ... | 4 | 9 | 0.06 | 0.13 |
| Other Tuberculosis | ... | ... | ... | — | 2 | — | 0.03 |
| Cancer—lung, bronchus | ... | ... | ... | 46 | 40 | 0.67 | 0.58 |
| other main sites | ... | ... | ... | 119 | 122 | 1.43 | 1.78 |
| Diabetes | ... | ... | ... | 5 | 6 | 0.07 | 0.09 |
| Vascular lesions of nervous system | ... | ... | ... | 118 | 120 | 1.72 | 1.75 |
| Diseases of heart and circulation | ... | ... | ... | 277 | 297 | 4.04 | 4.32 |
| Influenza | ... | ... | ... | 4 | 10 | 0.06 | 0.15 |
| Pneumonia | ... | ... | ... | 57 | 50 | 0.83 | 0.73 |
| Bronchitis | ... | ... | ... | 71 | 77 | 1.04 | 1.12 |
| Ulcer of stomach | ... | ... | ... | 10 | 10 | 0.15 | 0.15 |
| Gastritis, Enteritis and diarrhoea | ... | ... | ... | 4 | 4 | 0.06 | 0.06 |
| Pregnancy, childbirth, abortion | ... | ... | ... | 1 | 1 | 0.01 | 0.02 |
| Congenital malformations | ... | ... | ... | 8 | 8 | 0.12 | 0.12 |
| Motor vehicle accidents | ... | ... | ... | 5 | 9 | 0.07 | 0.13 |
| All other accidents | ... | ... | ... | 17 | 20 | 0.25 | 0.29 |
| Suicide | ... | ... | ... | 10 | 9 | 0.15 | 0.13 |

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF SMETHWICK, 1963

| CAUSES OF DEATH | Sex | Under 4 wks. | | YEARS | | | | | | | | | | | | 75 & over |
|--|-----|--------------|----------------------|-------|----|-----|-----|-----|-----|-----|-----|-----|----|---|---|-----------|
| | | All ages | 4 wks. & under 1 yr. | 1- | 5- | 15- | 25- | 35- | 45- | 55- | 65- | | | | | |
| 1. Tuberculosis, (respiratory) | M | 3 | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 2. Tuberculosis, (other) | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 3. Syphilitic disease | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 4. Diphtheria | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 5. Whooping Cough | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 6. Meningococcal infections | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 7. Acute poliomyelitis | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 8. Measles | M | 3 | — | — | 3 | — | — | — | — | — | — | — | — | — | — | |
| | F | 1 | — | — | 1 | — | — | — | — | — | — | — | — | — | — | |
| 9. Other infective, and parasitic diseases | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | 1 | — | — | — | — | — | — | — | — | — | — | — | — | 1 | |
| 10. Malignant Neoplasm (stomach) | M | 13 | — | — | — | — | — | — | — | 1 | 5 | 4 | 3 | — | — | |
| | F | 8 | — | — | — | — | — | — | — | — | 1 | 4 | 3 | — | — | |
| 11. Malignant Neoplasm (lung bronchus) | M | 42 | — | — | — | — | — | — | 2 | 4 | 15 | 18 | 3 | — | — | |
| | F | 4 | — | — | — | — | — | — | 1 | 1 | — | — | — | — | 2 | |
| 12. Nalignant Neoplasm (breast) | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | 16 | — | — | — | — | — | — | 2 | 2 | 5 | 5 | 2 | — | — | |
| 13. Malignant Neoplasm (uterus) | F | 3 | — | — | — | — | — | — | — | — | 2 | — | — | — | 1 | |
| 14. Other Malignant and lymphatic neoplasm | M | 44 | — | — | — | — | 1 | 1 | 5 | 14 | 13 | 10 | — | — | — | |
| | F | 35 | — | — | — | — | 2 | — | 2 | 7 | 14 | 10 | — | — | — | |
| 15. Leukaemia, Aleukaemia | M | 1 | — | — | — | — | — | — | — | 1 | — | — | — | — | — | |
| | F | 1 | — | — | — | — | — | — | — | — | — | — | — | — | 1 | |
| 16. Diabetes | M | 3 | — | — | — | — | — | — | — | — | 1 | 2 | — | — | — | |
| | F | 2 | — | — | — | — | — | — | — | — | 1 | — | — | — | 1 | |
| 17. Vascular Lesions of nervous system | M | 44 | — | — | — | — | — | — | — | 4 | 4 | 16 | 20 | — | — | |
| | F | 74 | — | — | — | — | — | — | — | 1 | 6 | 24 | 43 | — | — | |
| 18. Coronary disease, angina | M | 85 | — | — | — | — | — | — | 3 | 7 | 24 | 26 | 25 | — | — | |
| | F | 50 | — | — | — | — | — | — | — | 3 | 4 | 18 | 25 | — | — | |
| 19. Hypertension with heart disease | M | 4 | — | — | — | — | — | — | — | — | 2 | 1 | 1 | — | — | |
| | F | 8 | — | — | — | — | — | — | — | — | — | 3 | 5 | — | — | |
| 20. Other heart disease | M | 35 | — | — | — | — | 1 | — | 3 | 6 | 10 | 15 | — | — | — | |
| | F | 70 | — | — | — | — | — | — | 1 | 1 | 3 | 18 | 47 | — | — | |
| 21. Other circulatory disease | M | 13 | — | — | — | — | — | — | 3 | 1 | 4 | — | 5 | — | — | |
| | F | 12 | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 22. Influenza | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | 4 | — | 1 | — | — | — | — | — | — | 1 | 1 | — | — | — | |
| 23. Pneumonia | M | 32 | — | 5 | 1 | — | — | — | 1 | 1 | — | 9 | 15 | — | — | |
| | F | 25 | — | 5 | — | — | — | — | — | — | — | 4 | 16 | — | — | |
| 24. Bronchitis | M | 46 | — | — | — | — | — | — | 1 | 3 | 16 | 15 | 11 | — | — | |
| | F | 25 | — | — | — | — | — | — | — | 1 | 6 | 11 | 7 | — | — | |
| 25. Other diseases of respiratory system | M | 5 | — | — | — | — | — | — | — | — | 1 | 2 | 2 | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 26. Ulcer of stomach and duodenum | M | 9 | — | — | — | — | — | — | — | — | 2 | 4 | 3 | — | — | |
| | F | 1 | — | — | — | — | 1 | — | — | — | — | — | — | — | — | |
| 27. Gastritis, Enteritis and Diarrhoea | M | 4 | — | 2 | — | — | — | — | — | 1 | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 28. Nephritis and Nephrosis | M | 4 | — | — | — | — | — | — | 1 | — | — | 1 | 2 | — | — | |
| | F | 1 | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| 29. Hyperplasia of prostate | M | 5 | — | — | — | — | — | — | — | — | — | — | — | — | 5 | |
| 30. Pregnancy, childbirth, abortion | F | 1 | — | — | — | — | — | — | 1 | — | — | — | — | — | — | |
| 31. Congenital malformations | M | 4 | 1 | — | — | — | 2 | 1 | — | — | — | — | — | — | — | |
| | F | 4 | 2 | — | — | — | — | — | — | 1 | — | — | — | — | 1 | |
| 32. Other defined and ill-defined diseases | M | 23 | 7 | — | — | — | 1 | — | — | 1 | 1 | 4 | 9 | — | — | |
| | F | 30 | 4 | — | — | — | — | — | — | — | 5 | 12 | 8 | — | — | |
| 33. Motor Vehicle accidents | M | 3 | — | — | — | — | 3 | — | — | — | — | — | — | — | — | |
| | F | 2 | — | — | — | — | — | 1 | — | — | — | — | — | — | 1 | |
| 34. All other accidents | M | 10 | — | 2 | — | — | — | 1 | — | — | — | 3 | 4 | — | — | |
| | F | 7 | — | 2 | — | — | — | — | — | — | — | 1 | 4 | — | — | |
| 35. Suicide | M | 7 | — | — | — | — | 1 | 1 | — | 1 | 3 | 1 | — | — | — | |
| | F | 3 | — | — | — | — | — | — | — | — | 2 | — | — | — | — | |
| 36. Homicide and operations of war | M | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| | F | — | — | — | — | — | — | — | — | — | — | — | — | — | — | |
| TOTALS—All causes | M | 442 | 8 | 9 | 4 | 7 | 5 | 12 | 34 | 99 | 130 | 134 | — | — | — | |
| | F | 389 | 6 | 8 | 1 | — | 4 | 5 | 14 | 45 | 120 | 186 | — | — | — | |
| | | 831 | 14 | 17 | 5 | 7 | 9 | 17 | 48 | 144 | 250 | 320 | — | — | — | |

NATIONAL HEALTH SERVICE ACT

MOTHERS AND YOUNG CHILDREN

NOTIFICATION OF BIRTHS

The number of live births and still births notified during the past three years under Section 203 of the Public Health Act, 1936, as adjusted by transferred notification, are given below:—

| | | | 1961 | 1962 | 1963 |
|--------------|-----|-----|-------------|-------------|-------------|
| Live births | ... | ... | 1,277 | 1,349 | 1,380 |
| Still births | ... | ... | 32 | 25 | 35 |
| | | | <hr/> 1,309 | <hr/> 1,374 | <hr/> 1,415 |

CARE OF EXPECTANT AND NURSING MOTHERS

A full range of services was provided for expectant and nursing mothers during the year.

Total attendances for the ante-natal clinics at the Firs decreased.

| | No. of women who attended | Total Attendances |
|-------------|------------------------------|----------------------|
| 1963 | 1,120 | 3,097 |
| 1962 | 1,375 | 3,349 |
| 1961 | 1,107 | 3,372 |

Two sessions were held weekly for women to be confined in St. Chad's Hospital and these were attended by hospital midwifery staff and a health visitor. Two ante-natal clinic sessions each week were conducted by departmental midwives for women being confined at home. Mothers confined in hospital or delivered at home are examined post-natally by a general practitioner six weeks after the baby's birth and health visitors continued to call on patients who failed to keep ante- and post-natal appointments with their private doctors, in attempts to ensure that future appointments would be kept.

Relaxation classes are held weekly for expectant mothers, those being confined in St. Chad's Hospital attend afternoon classes at the Firs Clinic while evening classes are held for mothers having babies at home. Weekly mothercraft classes at the Firs Clinic were taken by Mrs. D. Grainger, Deputy Superintendent Nursing Officer and these classes continued to be well attended.

As in previous years the Health Committee made a grant to the Birmingham Diocesan Council for Family and Social Welfare; in addition financial responsibility was accepted for the maintenance of six unmarried expectant mothers in hostels and maternity homes outside Smethwick.

DENTAL TREATMENT

Mr. T. Lucas, Principal Dental Officer, has provided the following report upon Dental services for mothers and young children:—

"It is my pleasure to present my fourth report on the Dental Service given to expectant and nursing mothers and children under five.

There was a slight increase in the numbers seen, but it is depressing to record a substantial increase in teeth requiring extraction

in the under five group. It cannot be stated too often that gross dental decay in very young children is nearly always the result of an excessive consumption of sweet substances and a lack of oral hygiene. One cause, which is not always apparent to mothers, is the use of sweetened fruit juices, jam, honey and rose hip syrup on dummies, dinky feeders and propped bottles.

If a baby feels the psychological need to suck its thumb, a dummy should be substituted as soon as possible. The thumb sucking habit is difficult (some say dangerous) to break and persists for many years, producing unsightly, protruding front teeth. A baby will probably keep a dummy about a year or so and this will do no harm providing it is kept clean and not used coated with the decay producing substances already mentioned. Mothers being issued with fruit juices and rose hip syrup in our clinics should remember this.

There would also have been a drop in the number of extractions if these children had received the benefit of fluoridated water over the past five years. The sooner this deficiency in our diet is rectified, the better.

As the priority dental service has never really flourished here, perhaps it would be appropriate to consider the usefulness of a service that seeks to care for a woman during pregnancy and for twelve months after her confinement, and then loses sight of her; and to care for children under five, only to lose them among the mass of treatment needs for their fellow school children, when they get to school age.

An expectant mother who is aware of the importance of dental health will have a dentist of her own choosing that she is in the habit of visiting. There is no need for her to come to us, both services provide free treatment and indeed a change is unwelcome. Mothers that have not been going regularly to their own dentist and that can now be persuaded to seek treatment will probably decide to contact a dentist under the General Dental Services, since they know they will have to visit one anyway when their treatment time with us expires. We are left with a small number that find it more convenient to come to the clinic and a large number that cannot be persuaded to care, except to visit us when they have toothache. I suppose we must keep trying with our dental health education and our service justifies its existence as one which is there for mothers to use for routine treatment or just emergency, as they think fit.

The children under five present a different problem. If we are to care for these properly, we should see them very four months. Milk teeth (the important ones that are shed at about 10 years of age) go decayed very quickly and adequate control can only be achieved at the toddler stage by inspections at this interval. Unfortunately, if we saw them every four months, there would not be time to treat the older school age children. It is frequently and correctly stated that every effort should be made to get these toddlers dentally fit but this effort is wasted unless the fitness can be maintained throughout school life. Indeed if a child has one surface of a tooth filled and later develops decay on another surface and this decay is left untreated because the child cannot be seen often enough, the parent very often blames the resultant trouble on the perfectly sound original filling

and refuses further fillings as a result. Here I have found it profitable to concentrate on children from the age of nine onwards making a special effort to see that they leave school dentally fit. They appreciate this far more than if they had been cared for as small children and neglected later. For the toddlers we do what fillings we can and ensure that they are not kept in pain and this justifies the existence of the service.

The real answer to the problem of coping with the volume of work that adequate conservation of the deciduous teeth entails, is in the employment of dental auxiliaries. They are girls trained to do simple fillings and extractions under the supervision of a dentist. I hope that this authority will recognise the usefulness of these auxiliaries and employ them wherever possible.

The service suffered a set back with the resignation of Mrs. M. E. Hiscock in October. Mrs. Hiscock had been with us nearly three years and the work she was doing was first-class, but unfortunately she moved to Stourbridge and found the journey too tedious. With less than three dentists to cover four clinics, this meant a curtailment of the service. Reluctantly it was decided to only work Stanhope Road Clinic one day a week and more or less go back to the system in operation before this clinic was opened.

My thanks are due to Miss Wainwright and her staff for their pleasant co-operation at all times and I would assure them of my appreciation of their efforts to persuade mothers of the importance of dental health."

(a) Numbers provided with Dental Care

| | Examined | Treated | Made Dentally fit |
|----------------------------------|----------|---------|----------------------|
| Expectant and Nursing Mothers... | 137 | 125 | 64 |
| Children under five | 286 | 206 | 123 |

(b) Forms of Dental Treatment provided

| | Extractions | General Anaesthetics | Fillings | Scalings and Gum Treatment | Silver Nitrate Treatment | Dentures Provided | | Gold Inlays | Radiographs |
|--|-------------|-------------------------|----------|-------------------------------|-----------------------------|----------------------|---------|-------------|-------------|
| | | | | | | Complete | Partial | | |
| Expectant and Nursing Mothers | 301 | 29 | 165 | 22 | 5 | 41 | 17 | — | 3 |
| Children under five | 306 | 129 | 185 | 1 | 71 | — | — | — | 1 |

DOMICILIARY MIDWIFERY

For the third year in succession I am happy to report that a full complement of midwives has been maintained, the continued successful operation of a night rota for midwives played no small part in the maintenance of a full staff. Between the hours of 6 p.m. and 6 a.m. expectant mothers are told to contact the Ambulance Station if the services of a midwife are required. At other times the midwife is telephoned directly.

The table below gives details of 491 deliveries attended by midwives, the largest number since 1949 when 531 deliveries were recorded.

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|-------------------------|--------|--------|-------|--------|--------|
| Number of bookings ... | 490 | 529 | 650 | 604 | 616 |
| Ante-natal visits ... | 1,234 | 1,318 | 2,444 | 1,939 | 1,904 |
| Deliveries attended ... | 393 | 433 | 432 | 480 | 491 |
| Nursing visits ... | 10,423 | 10,575 | 9,343 | 10,462 | 10,688 |

All the midwives are authorised to give gas and air analgesia, which was used for 299 deliveries.

Health Visiting staff continued to help St. Chad's Hospital with the allocation of maternity beds when social conditions made home confinements difficult. A proportion of these cases are immigrants and unmarried women who fail to make any preparations and only approach their doctors when birth is imminent. In such cases the hospitals are usually fully booked and an appeal has to be made to St. Chad's Hospital or the Birmingham Regional Hospital Board for assistance. Despite many difficulties and by exercise of great patience, officers of the Board and Hospital have always been able to accommodate urgent cases, often at very short notice.

CARE OF PREMATURE INFANTS

Domiciliary midwives look after the majority of premature infants born at home during the first ten days of life, afterwards the welfare and progress of the infants become the responsibility of the Health Visitor, for whom the medical and specialist services are available when required. Local Hospitals co-operate with the midwifery service, and no difficulty is experienced securing immediate admission to hospital, when necessary, of any premature infant born at home. New equipment was made available for the conveyance of premature infants to hospital. It is kept for immediate use at the Ambulance Station.

During the year, 113 babies weighing $5\frac{1}{2}$ lbs. or less were born to mothers normally resident in the borough. Of these 14 were born and nursed at home, 9 transferred to hospital and 90 born in hospital. Twenty-two premature still births were notified, 21 born in hospital and 1 at home. The table on page 24 gives details of all premature births during the year.

| Weight at Birth | Premature Live Births | | | | | | | | | | | | | Premature still births | |
|---|-----------------------|-------------------------|-----------------------|------------------------|-----------------------------------|-------------------------|-----------------------|------------------------|---|-------------------------|-----------------------|------------------------|-------------|------------------------------|--|
| | Born in hospital | | | | Born at home or in a nursing home | | | | Transferred to hospital on or before 28th day | | | | | | |
| | Died | | | | Died | | | | Died | | | | | | |
| | Total births | Within 24 hrs. of birth | in 1 and under 7 days | in 7 and under 28 days | Total births | Within 24 hrs. of birth | in 1 and under 7 days | in 7 and under 28 days | Total births | Within 24 hrs. of birth | in 1 and under 7 days | in 7 and under 28 days | In hospital | At home or in a Nursing Home | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| 2 lb. 3 oz. or less | 3 | 2 | 1 | — | — | — | — | — | 1 | — | — | — | 2 | 1 | |
| Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ... | 3 | 1 | 1 | — | — | — | — | — | — | — | — | — | 7 | — | |
| Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. ... | 13 | — | 1 | — | — | — | — | — | 3 | — | — | — | 7 | — | |
| Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.... | 22 | 1 | 1 | 2 | 1 | — | — | — | 5 | — | — | — | 3 | — | |
| Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ... | 49 | — | — | 1 | 13 | — | — | — | — | — | — | — | 2 | — | |
| Total | 90 | 4 | 4 | 3 | 14 | — | — | — | 9 | — | — | — | 21 | 1 | |

HEALTH VISITING

Health Visitors work for the Local Health Authority and as School Nurses for the Local Education Authority. This arrangement provides continuity of service from ante-natal care of the mother, throughout a child's early years, school days, and again when maturity is reached and a new generation is on the way. In recent years health visitors have spent more time with the aged and also with the mentally ill. Out of a potential establishment of twenty, only ten full-time and two part-time health visitors were employed, working under the direct supervision of the Superintendent Nursing Officer. As in previous years health visitors who use cars whilst on duty are paid a "casual users" allowance which permits greater mobility and thus helps to alleviate difficulties associated with a staff which is below strength.

Details of visits made by health visitors during the past five years are shown below:—

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|--|-------|-------|-------|-------|--------|
| Expectant Mothers: ... | 501 | 486 | 719 | 688 | 631 |
| Children born in 1963* ... | 6,198 | 6,418 | 6,664 | 7,698 | 5,777 |
| Children born 1958-1962*... | 9,835 | 8,405 | 8,630 | 9,024 | 12,104 |
| To Other sections of the Population: ... | 5,800 | 3,911 | 3,070 | 1,862 | 3,936 |

* Before 1963 visits to children have been recorded thus; "under one year of age" and "aged one and under five years of age." This change made at the request of the Ministry of Health makes comparison with previous years difficult.

INFANT WELFARE CENTRES

Eight infant welfare sessions are held weekly in four purpose built clinics where mothers may obtain advice from the medical and nursing staff about their infants and pre-school children. 1,009 infants born in 1963 attended a centre for the first time which represents 73% of the total notified live births in the town. Total attendances during the year were 18,118 compared with 20,433 for 1962; the first three months of 1963 were notable for extremely cold weather and clinic attendances during this period were much lower than the seasonal average. Details of attendances during the past five years are shown below:

| | | | Under 1 year | Over 1 year but under 5 years | Total |
|------|-----|-----|--------------|----------------------------------|--------|
| 1959 | ... | ... | 12,895 | 4,473 | 17,368 |
| 1960 | ... | ... | 13,107 | 4,360 | 17,467 |
| 1961 | ... | ... | 13,085 | 4,272 | 17,357 |
| 1962 | ... | ... | 16,031 | 4,402 | 20,433 |
| | | | Born 1963 | Born 1958 to 1962 | |
| 1963 | ... | ... | 8,418 | 9,700 | 18,118 |

When a child becomes three years old an invitation to attend the Infant Welfare Centre is sent to parents to bring the child for medical examination. These examinations are important because a large number of defects, most of them of minor character but many remediable, are revealed. Children who are found to need investigations or treatment are referred to their General Practitioners. The special toddlers' sessions held monthly at the Firs Clinic continued to be well attended.

EXAMINATION OF TODDLERS

| | No. of Children Examined | No. with Defects | No. of Defects referred | |
|----------------------|--------------------------|------------------|-------------------------|-----------------|
| | | | For Treatment | For Observation |
| Under two years ... | 303 | 106 | 19 | 123 |
| Over two years ... | 217 | 145 | 53 | 174 |
| Over three years ... | 341 | 215 | 44 | 281 |
| Over four years ... | 35 | 25 | 12 | 34 |

Nature of Defects found:—

| | | | | | |
|--------------------------------|-----|-----|-----|-----|-----|
| Uncleanliness ... | ... | ... | ... | ... | 3 |
| Teeth ... | ... | ... | ... | ... | 68 |
| Skin ... | ... | ... | ... | ... | 77 |
| Eyes—(a) Vision | ... | ... | ... | ... | 8 |
| (b) Squint | ... | ... | ... | ... | 19 |
| (c) Other | ... | ... | ... | ... | 8 |
| Ears—(a) Hearing | ... | ... | ... | ... | 2 |
| (b) Otitis Media—R | ... | ... | ... | ... | 7 |
| L | ... | ... | ... | ... | 2 |
| (c) Other | ... | ... | ... | ... | 3 |
| Nose or Throat | ... | ... | ... | ... | 62 |
| Speech ... | ... | ... | ... | ... | 18 |
| Enlarged Lymphatic Glands ... | ... | ... | ... | ... | 103 |
| Heart and Circulation ... | ... | ... | ... | ... | 13 |
| Lungs ... | ... | ... | ... | ... | 23 |
| Development —(a) Hernia | ... | ... | ... | ... | 21 |
| (b) Other | ... | ... | ... | ... | 57 |
| Orthopaedic —(a) Posture | ... | ... | ... | ... | 11 |
| (b) Flat Foot | ... | ... | ... | ... | 117 |
| (c) Other | ... | ... | ... | ... | 27 |
| Nervous System—(a) Epilepsy | ... | ... | ... | ... | 4 |
| (b) Other | ... | ... | ... | ... | 5 |
| Psychological —(a) Development | ... | ... | ... | ... | 24 |
| (b) Stability | ... | ... | ... | ... | 43 |
| Others ... | ... | ... | ... | ... | 13 |
| TOTAL | | ... | ... | ... | 738 |

SUPPLY OF DRIED MILK AND OTHER FOODS

(a) Proprietary Foods

Proprietary brands of dried milk and other foods continued to be sold at Infant Welfare Centres. Almost all these commodities are handled by voluntary workers, to whom we are most grateful for their excellent work during the year.

(b) Ministry of Health Welfare Foods.

The distribution of Ministry of Health Welfare Foods continued daily from the Firs Clinic and each Infant Welfare session. Shown below are details of the food sold during 1963 and 1962.

| National Dried Milk: | 1963 | 1962 |
|--|--------|--------|
| Full Cream (tins) | 22,583 | 19,106 |
| Half Cream (tins) | 655 | 584 |
| Orange Juice (bottles) | 12,004 | 10,680 |
| Cod Liver Oil (bottles) | 1,687 | 1,486 |
| Vitamins A and D Tablets (packets) ... | 867 | 840 |

CHILDREN'S WELFARE COMMITTEE

This co-ordinating committee met every other month throughout the year with additional special meetings of some of its members when necessary. Membership of the committee is drawn from various Corporation Departments—the Children's, Education, and Health and on occasions the Estates Department; with voluntary services — the National Society for Prevention of Cruelty to Children, the Women's Voluntary Service and representatives of the local offices of the National Assistance Board, the Ministry of Pensions and National Insurance, the Probation Office together with the Welfare Worker of the Birmingham Diocesan Council for Family & Social Welfare. Care of children from problem families in the area is discussed confidentially to determine the best course of action for each case. Wherever possible action is taken to secure the most effective rehabilitation of the family. Committee action often effects an improvement but with some cases it takes all resources to prevent further deterioration of the existing unsatisfactory standards. I am pleased to report that with the full co-operation of the departments and organisations represented, it was possible to raise the standard of care of children in many families during 1963.

HOME NURSING SERVICE

During 1963 Home Nurses made 31,655 visits to all patients and 910 patients were treated.

The special laundry service which was introduced in December, 1958, for the care of incontinent patients again proved most useful. At present linen is collected and delivered by the Baths Department and laundered at Rolfe Street. Thanks to the very willing co-operation given by the Baths Superintendent and his staff the service works very well and during the year 49 new patients used the facilities, for which there is no charge.

The following table shows details of the Home Nursing Service during the past five years:—

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|-----------------------------|--------|--------|--------|--------|--------|
| New patients | 790 | 770 | 687 | 688 | 679 |
| Died | 133 | 134 | 140 | 117 | 99 |
| Remaining at end of year | 211 | 224 | 196 | 217 | 189 |
| Visits made during year ... | 34,814 | 33,460 | 30,135 | 30,728 | 31,655 |

Requests for the Home Nursing Service are usually made by general practitioners or hospitals, and the following table gives some idea of the type of cases attended:—

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|----------------|------------|------------|------------|------------|------------|
| Medical | 820 | 707 | 709 | 688 | 714 |
| Others | 172 | 166 | 172 | 194 | 196 |
| TOTALS | 992 | 873 | 881 | 882 | 910 |

PROTECTION AGAINST INFECTIOUS DISEASE

VACCINATION AGAINST SMALLPOX

Shown below are numerical details of records received of vaccinations carried out in 1963 and it will be noticed that there is information of only 279 children under two years of age being vaccinated (20% of live births notified). The Ministry of Health now recommends that primary vaccination be deferred until a child's second year of life and the recession indicated by the figures should only be temporary.

Smallpox Vaccination 1963

| | | | | Vaccinated | | Re-vaccinated | |
|-----------------------|--|--|--|---------------|------------|---------------|-----------|
| | | | | General | | General | |
| | | | | Practitioners | Clinics | Practitioners | Clinics |
| 0—months | | | | 9 | 7 | — | — |
| 3— „ | | | | 65 | 76 | — | — |
| 6— „ | | | | 23 | 23 | — | — |
| 9— „ | | | | 12 | 14 | — | — |
| 1 year and over ... | | | | 9 | 41 | — | — |
| 2-4 years | | | | 3 | 15 | — | 1 |
| 5-14 years | | | | 3 | 4 | — | — |
| 15 years and over ... | | | | 6 | 16 | 14 | 69 |
| | | | | 130 | 196 | 14 | 70 |

VACCINATION AGAINST DIPHTHERIA, WHOOPING COUGH AND TETANUS

Protection against these three diseases is now almost always given by inoculating the infant with a primary course of triple vaccine, 981 such courses were given in 1963. Reinforcing doses particularly against diphtheria are injected at later ages, and 1,546 children re-

ceived this additional protection. Eighteen children had primary injections against diphtheria alone.

VACCINATION AGAINST POLIOMYELITIS

Vaccination against poliomyelitis continued. Oral vaccine of the Sabin type which dispenses with the necessity for preparation of needles and equipment is generally preferred. Furthermore it is simpler to induce a child to swallow a "dosed" sugar cube than submit passively to the needle!

The following tables show details of courses given during 1963

| | | | | | Courses of Injections | Courses of Oral doses |
|--------------------------|-----|-----|-----|-----|--------------------------|--------------------------|
| Born 1963 | ... | ... | ... | ... | 5 | 86 |
| Born 1962 | ... | ... | ... | ... | 17 | 492 |
| Born 1961 | ... | ... | ... | ... | 66 | 112 |
| Born 1943—1960 | ... | ... | ... | ... | 49 | 53 |
| Born 1933—1942 | ... | ... | ... | ... | 24 | 25 |
| Others | ... | ... | ... | ... | 10 | 34 |
| 3rd injections and doses | ... | ... | ... | ... | 171 | 137 |
| 4th injections and doses | ... | ... | ... | ... | 57 | 259 |

VACCINATION AGAINST TUBERCULOSIS

It is gratifying to report that the acceptance rate for B.C.G. vaccination in 1963, was even higher than in previous years. Of the number of children eligible, i.e. school children in the 13 + age group, 81.1% had the offer of vaccination accepted by their parents. Unfortunately the percentage of positive reactors once again showed a further slight increase to 11.66%. One case of active tuberculosis was again found following further investigation. This was of non-pulmonary type and the patient, an Indian child, was admitted to the Limes Children's Sanatorium.

The bulk of the children referred to the Chest Clinic had clear lung fields on x-ray examination and the remainder, although considered non-tuberculosis were given further appointments for follow up examination and subsequent observation.

| | 1961 | 1962 | 1963 |
|--|-------|--------|--------|
| No. of children eligible for vaccination | 1,171 | 1,037 | 921 |
| No. of children whose parents consented to vaccination | 893 | 816 | 747 |
| Percentage acceptance | 76% | 78.6% | 81.1% |
| No. of known Mantoux positive before skin testing | 10 | 7 | 11 |
| No. of children Mantoux tested | 883 | 802 | 733 |
| No. of children Mantoux positive | 66 | 88 | 85 |
| Percentage Mantoux positive | 7.47% | 10.97% | 11.66% |
| No. of children vaccinated with B.C.G. | 816 | 712 | 644 |
| No. of children referred to Chest Physician | 66 | 88 | 85 |

AMBULANCE SERVICE

AMBULANCE VEHICLES

The Ambulance Station at Londonderry Lane is equipped to carry out all vehicle repairs, except engine re-boring and large body repairs.

In addition, maintenance is carried out to two Meals on Wheels Service vehicles, one vehicle of the Smethwick Club for the Handicapped and seven Civil Defence vehicles of all types.

Vehicles on strength at end of year and related statistics:—

| Make | Cubic Capacity of Engine (c.c.) | Type | Capacity of Vehicles | Year |
|----------------|---------------------------------|------------------------------------|-------------------------------------|------|
| Morris SHA 960 | 4197 | N.V.S. Ambulance (held in reserve) | 2 stretchers/or 1 stretcher/5 seats | 1952 |
| Morris VHA 7 | 1476 | J. Sitting Case Ambulance | 8 seats | 1954 |
| Morris YHA 831 | 2199 | L.C.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1954 |
| Morris WHA 620 | 2199 | L.C.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1955 |
| Morris 230 CHA | 2199 | L.D.1. Dual-Purpose Ambulance | 2 stretchers/or 10 seats | 1956 |
| Morris 5 JHA | 2199 | L.C.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1959 |
| Morris 80 LHA | 1489 | J.2. Ambulance | 1 stretcher or 10 seats | 1959 |
| Morris 4644 HA | 2220 | L.D.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1961 |
| Morris 7214 HA | 2220 | L.D.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1962 |
| Morris 8077 HA | 2220 | L.D.5. Ambulance | 2 stretchers/or 1 stretcher/5 seats | 1963 |
| Morris PHA 405 | 918 | 5 cwt. Van | — | 1951 |

EQUIPMENT IN AMBULANCES

Each vehicle is capable of handling any type of call and carries the following equipment:—

| | |
|---|------------------------|
| 2 Canvas Stretchers | 1 Feeding Cup |
| 1 Canvas Carrying Sheet | 1 Urine Bottle |
| 1 "Liolye" Chair | 1 Bed Pan |
| 2 Pillows and Cases | 1 Set of Splints |
| 1 Rubber Sheet | 4 Sandbags |
| 3 Incontinence Sheets | 1 Vomit Bowl |
| 3 Face Masks | 2 Hot Water Bottles |
| 6 Blankets | 1 Drinking Water Flask |
| Complete First Aid Kit including Mouth to Mouth Resuscitator Apparatus. | |

SPECIAL EQUIPMENT HELD AT STATION

The equipment shown below is carried according to type of case being handled, and returned to Station after use.

- 1 Stephenson Minuteman Resusitator (Gas Poisoning and Electrocution).
- 1 Novox—1 Novita Resusitator (Gas Poisoning and Electrocution).
- 2 Rocking Stretchers.
- 6 Red Domed Flashing Lamps for accident work.
- 1 Specially Adapted Chair for Multi-storey Flat use.
- 1 Premature Baby Unit and 2 Baskets.
- 1 Disinfection Kit plus 3 changes of clothing for infectious cases.

The ambulance service is manned by paid staff from 6.30 a.m. to 7.30 p.m. Monday to Fridays, from 6.30 a.m. to 2.30 p.m. on Saturdays, and at all other times by volunteers from the British Red Cross and St. John Ambulance Brigade Organisations.

REQUESTS FOR AMBULANCE — Telephone No. SMethwick 0673/4 or 999 in emergency.

Considerable frustration and confusion is caused by ignorance of the methods for "calling an ambulance". Ignorance of proper procedure can cause loss of life and the undermentioned directions should be followed:—

- (i) Any member of the public may call an ambulance if involved in or witness to an accident that occurs, either in the street, home or factory, by dialling 999 and requesting Ambulance Service. It is important to give **full** particulars of the incident, location and type of accident; the last is important to enable the situation to be handled correctly. The details should be given when calling an ambulance.
- (ii) When obtaining an ambulance to take a maternity case into hospital the following information should be given. (a) Name and address of patient and direction to house, (b) the frequency of the labour pains, (c) how many children has the expectant mother borne and, (d) most important; the name of the hospital to which the patient is to be admitted.
- (iii) In the event of sudden illness at home it is necessary for the patient to be seen by a doctor before an ambulance is called. Members of the public should always remember that if in any doubt they may telephone the Ambulance Station for advice.

The following tables give details of the work of the Ambulance Station during 1963 and 1962:—

| (A) | Totals | |
|---------------------------------------|--------|--------|
| | 1963 | 1962 |
| No. of journeys | 7,052 | 7,464 |
| Patients carried | 24,730 | 21,278 |
| Miles travelled | 95,949 | 86,116 |
| Motor Spirit Consumed (Galls.) | 6,142 | 6,075 |

(B)

Categories and Number of Patients Conveyed.

Accidents and Emergencies:—

| | 1963 | 1962 |
|---|--------|--------|
| (a) Street | 326 | 258 |
| (b) Home | 214 | 260 |
| (c) Works | 91 | 95 |
| (d) School | 51 | 44 |
| (e) Street Fighting | 46 | 178 |
| (f) Recreational Accidents | 74 | 310 |
| (g) Street Collapse | 96 | 175 |
| (h) Suicides (or attempted) | 16 | 25 |
| Maternity Care | 624 | 545 |
| Out-Patients | 20,299 | 16,308 |
| Hospital Admissions | 1,965 | 1,875 |
| Hospital Discharges | 772 | 777 |
| Others (i.e. House to House and Hospital to Hospital transfers) | 156 | 905 |

(C)

| | | |
|----------------------------------|--------|--------|
| Number of Stretcher Cases | 3,352 | 2,320 |
| Number of Sitting Cases | 21,378 | 18,958 |

**“THE HOLLIES” DAY NURSERY AND
CHILDREN’S CONVALESCENT HOME**

Total attendances at the Day Nursery section of “The Hollies” were 4,771, a decrease of 596 on the previous year. There has been no change in the priorities for admission to the Nursery and applications are classified in order of priority:—

- (1) Where there is no father, and the mother must work to support her children.
- (2) Where the father or mother of the child is seriously ill and confined to bed, either temporarily or permanently, at home or in hospital.
- (3) Where the mother is expecting another child and is due to go into hospital. Consideration is also given to temporary admission of children if the mother is to be confined in her own home.
- (4) Where the housing conditions of the family are so bad that normal life is impossible.
- (5) Where the mother finds that she must work to supplement the father’s wages.

The residential part of “The Hollies” is used as a convalescent home for debilitated children, and as a short stay home for children taken into care by the Children’s Departments of Smethwick and other local authorities. The Smethwick Children’s Committee retain eight beds, for “short stay” children but further beds were available to them when necessary. The average number of children in residence

during the year was 18.85 and the total number of patient days was 6,881. These figures show a decrease when compared with those in 1962 which were 19.54 and 7,631 respectively.

Details of children accommodated during 1963 are shown below:-

| Condition | In-Patients at 1.1.63 | ADMITTED | | DISCHARGED | | Remaining at 31.12.63 |
|------------------------|--------------------------|------------------------|---------------|------------------------|---------------|--------------------------|
| | | Under School Age | School Age | Under School Age | School Age | |
| Bronchitis ... | 1 | — | — | — | 1 | — |
| Convalescence ... | 2 | — | 5 | — | 2 | 5 |
| General Care ... | — | 6 | — | 3 | — | 3 |
| Children's Committees— | | | | | | |
| Smethwick ... | 7 | 29 | 16 | 27 | 15 | 10 |
| Birmingham ... | 8 | 12 | 6 | 14 | 7 | 5 |
| West Bromwich | — | — | 1 | — | 1 | — |
| Totals: | 18 | 47 | 28 | 44 | 26 | 23 |

CHIROPODY SERVICE

The Chiropody Service in Smethwick was acquired in 1948 when the Ministry of Health agreed to its continuation and approved the requisite proposal under Section 28 of the National Health Service Act. Since that date the service has been available free of charge to all residents in the Borough, irrespective of age.

Throughout the whole of 1963 the service was dependent upon one full-time Chiropodist and private practitioners who undertook locum sessions. Attendances have steadily declined from 8,088 in 1960 (the last year with full-time staff) to 4,672 in 1963. Early in 1964 another Chiropodist was appointed and it is to be hoped the future service will be improved.

Compared with the previous three years the total attendances at the clinic showed a continued decline. Details of the past 4 years are shown below:—

| | 1960 | 1961 | 1962 | 1963 |
|--------------------------------------|-------|-------|-------|-------|
| Children under five years of age ... | — | 1 | 1 | 1 |
| Children of school age ... | 18 | 6 | 36 | 86 |
| Expectant and Nursing Mothers ... | 1 | — | 3 | — |
| Other Patients: | | | | |
| Male ... | 1,073 | 798 | 797 | 689 |
| Female ... | 6,996 | 5,536 | 4,676 | 3,896 |
| | 8,088 | 6,341 | 5,513 | 4,672 |

Since 1955 a limited Chiropody Service has been provided for persons in their homes who, because of serious illness or crippling defects, cannot make their way to the Clinics. There is a heavy and expanding demand for home chiropody and each application is carefully considered; in the majority of cases a member of the Health Visiting staff calls upon the patient before the application is approved. During 1963 the Chiropodists made 305 domiciliary visits to patients, a decrease of 56 compared with the previous year.

CONVALESCENT CARE

Recommendations for recuperative convalescence, i.e. convalescence involving no treatment for patients, are usually made by the general practitioner or the hospital almoner, and the normal period of stay at convalescent homes is two weeks. Patients are assessed according to their ability to pay for convalescent home fees; transport charges to and from the home may be paid by the Corporation so that needy cases are not deterred from accepting treatment for financial reasons.

| | | Jan | Feb | Mar | Apr | May | Jun | July | Aug | Sep | Oct | Nov | Dec | Total |
|--|----------|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|-----|-----|-------|
| Recommendations for convalescence received | for 1963 | 1 | — | 5 | 8 | 8 | 19 | 15 | 7 | 8 | 1 | 1 | 1 | 74 |
| | 1962 | 4 | 1 | 4 | 9 | 13 | 14 | 16 | 9 | 8 | 2 | 3 | 1 | 84 |
| Patients admitted to convalescent Homes | 1963 | 1 | — | — | 6 | 6 | 3 | 9 | 10 | 6 | 3 | — | 1 | 45 |
| | 1962 | — | 1 | 1 | 3 | 1 | 8 | 8 | 12 | 7 | 9 | 3 | — | 53 |

LOAN OF SICK ROOM EQUIPMENT

Throughout the year medical loan equipment is available on the recommendation of general practitioners and hospital doctors; issues are made from the Edward Cheshire Nurses' Home, 2 Bearwood Road, between the hours of 9 a.m. and 11 a.m., Mondays to Fridays, inclusive. No hire charge is made for equipment, a nominal deposit only being required which is refunded when borrowed articles are returned in good order; no deposits are required from old age pensioners. During 1963, a total of 480 articles were issued, compared with 537 in 1962.

| | Number of articles issued |
|---------------------|------------------------------|
| Air Rings | 40 |
| Bed Pans | 103 |
| Bed Rests | 56 |
| Mackintosh Sheeting | 62 |
| Urinals | 60 |
| Bed Cradles | 23 |
| Wheelchairs | 34 |
| Feeding Cups | 9 |
| Commodes | 38 |
| Dunlopillo Rings | 4 |
| Beds | 6 |
| Mattresses | 11 |
| Lifting Pulleys | 1 |
| Air Bed | 1 |
| Bed Linen | 3 |
| Bed Tables | 2 |
| Fracture Boards | 8 |
| Miscellaneous | 19 |
| | 480 |

HOME HELP SERVICE

It is interesting to note that the number of cases attended in 1963 was 546 compared with 300 in 1953, an increase of 82% and there is no evidence to suggest that the demand for this service is likely to decrease for some time to come.

Again during 1963 it was at the homes of people over 65 years of age that most time was spent—87% of our cases coming in this category. There is an increasing need for daily service especially where the aged persons are also physically handicapped but from the letters of appreciation received during the year it is plain to see that the visits of the Home Help minimise fears of loneliness. Many of the aged persons not only rely on the "Help" for the general cleaning of the home but entrust her with their shopping and quite often the collection of their pensions.

The difficulty of recruiting satisfactory staff over the year again varies from time to time. It was noticeable that when the demand for female labour in the local factories lessened the applications for posts of Home Help increased. Fortunately the "old guard" of long service members of the staff formed a sound nucleus to deal with more difficult cases. It is only by appointing persons who become devoted to the Service that we shall be able to continue to build up and maintain the high standard required of this service.

During the year to improve Staff efficiency two courses of lectures and practical work were arranged which included cooking for patients on diet, bed making for invalid patients, Home Safety, food hygiene and general care of the Aged and Physically Handicapped. The lectures and demonstrations were given by the Superintendent Nursing Officer, the Supervisor of Home Nurses, the Welfare Officer, a Public Health Inspector and a Domestic Science Tutor. The courses were most useful and interesting to the Home Helps selected to attend and it is hoped to repeat them during 1964.

The table below gives details of the cases assisted during 1963 with comparisons shown for the previous four years.

SUMMARY OF ALL CASES ATTENDED 1959-1963

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|----------------------------|-----------|-----------|-----------|-----------|--------------|
| New cases of all types ... | 180 | 237 | 189 | 217 | 223 |
| Aged and infirm ... | 384 | 443 | 447 | 473 | discontinued |
| *Aged 65 years and over... | — | — | — | — | 475 |
| *T.B. and Chronic sick ... | — | — | — | — | 29 |
| *Mentally disordered ... | — | — | — | — | 1 |
| T.B. ... | 2 | 4 | 3 | 2 | discontinued |
| Maternity ... | 27 | 22 | 37 | 28 | 24 |
| Others ... | 13 | 30 | 2 | 23 | 17 |
| | <hr/> 426 | <hr/> 499 | <hr/> 489 | <hr/> 526 | <hr/> 546 |

* New classification started on 1st January, 1963.

MENTAL HEALTH SERVICE

CARE AND AFTER CARE OF MENTAL ILLNESS

Dr. E. Jacoby, Consultant Psychiatrist at Highcroft Hospital, continued to see out-patients living in Smethwick, at St. Chad's Hospital afternoons and on alternate Friday evenings at the Firs Clinic. The clinics formed a useful link between the mental hospital and the local authority staffs. In addition weekly consultation clinics at Highcroft Hospital were attended by the Mental Health and Welfare Officers. Close co-operation was maintained with the general practitioners, who frequently sought the assistance of the mental welfare officers about patients who needed treatment for mental disorders.

During the year 190 Smethwick patients were admitted to mental hospitals, a decrease on the previous year's total. The Mental Health staff arranged the admission of 61 patients and 129 were admitted by their general practitioners or from the hospital out-patients clinics. Admission arranged by the Public Health Department were by application of Sections 25, 26 and 29 of the Mental Health Act, 1959. Of 190 patients admitted, 181 were finally classified as informal patients.

Manner of Admission:

| | 1961 | 1962 | 1963 |
|--|-----------|-----------|-----------|
| Treatment under Section 26 Mental Health Act, 1959 | 2 | 3 | 4 |
| Observation under Section 29 or 25 Mental Health Act, 1959 | 49 | 47 | 55 |
| Court Order Section 60, Mental Health Act, 1959 ... | 1 | — | 3 |
| Informal | 115 | 147 | 128 |
| | <hr/> 167 | <hr/> 197 | <hr/> 190 |

Final Classification:

| | | | |
|--|-----------|-----------|-----------|
| Treatment under Section 26 Mental Health Act, 1959 | 4 | 7 | 6 |
| Court Order Section 60, Mental Health Act, 1959 ... | — | 1 | 3 |
| Informal | 163 | 189 | 181 |
| | <hr/> 167 | <hr/> 197 | <hr/> 190 |

One old person was admitted under Section 26 for treatment and the following table shows the final classification of persons aged 70 years and over during the past five years.

| | 1959 | 1960 | 1961 | 1962 | 1963 |
|--|----------|----------|----------|----------|----------|
| Treatment | — | — | — | 1 | 1 |
| Discharged within period of observation ... | 1 | 1 | — | — | — |
| Voluntary/Informal ... | 28 | 31 | 25 | 44 | 34 |
| | <hr/> 29 | <hr/> 32 | <hr/> 25 | <hr/> 45 | <hr/> 35 |

The mental health and welfare officers continued to deal with the after-care of male patients discharged from mental hospital. The Superintendent Nursing Officer and health visitors were responsible for the after-care of female patients. This work continued to increase, particularly with the male patients, a greater number of evening visits were made to see those who had returned to work following their discharge. The mental health and welfare officers made 957 visits and health visitors 91 visits to patients' homes during the year.

There were 63 patients receiving after-care at the beginning of the year; 100 new cases were added during the year and 101 were closed, leaving 62 patients at the end of the year. Of the 101 cases closed the results were as follows:—

| | |
|--|----|
| Full recovered or stabilized | 62 |
| Returned to Mental Hospital for further treatment | 10 |
| Left the area | 12 |
| Died | 17 |

The table below gives details of hospital discharges during the year:—

| | |
|-----------------------------------|-----------|
| Accepted After-care | 100 |
| After-care not necessary | 53 |
| Discharged to another area | 6 |
| Died | 28 |
| | <hr/> 187 |

TRAINING CENTRE

The Albert Bradford Centre, a combined junior and adult training establishment for the mentally sub-normal has been open since October, 1959.

Expansion of activities in the wood and metal workshops continues while female pupils are taught the rudiments of domestic science. Basket work, rug making and needlework are taught by a qualified occupational therapist. Training in the junior section includes much communal activity such as plays, pantomimes and dancing displays performed on parents' days.

Most of the pupils are carried to and from the Centre by coach and during the summer many of them spend a week at Smethwick School Camp, Ribbesford, by arrangement with the Education Committee.

| | Junior Section | Adult Section |
|--|----------------|---------------|
| No. of pupils at 1st January, 1963 ... | 35 | 38 |
| No. of pupils at 31st December, 1963 | 41 | 38 |
| Average number of pupils attending | | |
| During the year | 34 | 32 |

PREVENTION OF SUB-NORMALITY

The practice of testing infants for signs of phenylketonuria was continued; health visitors and midwives tested all infants born in 1963 with negative results.

HOSPITAL ACCOMMODATION

The list below shows the numbers of mentally disordered patients from Smethwick accommodated in various hospitals at the 31st December, 1963.

| | | | | |
|-----------------------------------|-----|-----|-----|-----|
| Highcroft (Birmingham) | ... | ... | ... | 129 |
| St. Matthew's (Burntwood) | ... | ... | ... | 103 |
| All Saints' (Birmingham) | ... | ... | ... | 3 |
| Hollymoor (Birmingham) | ... | ... | ... | 3 |
| Broadmoor (Crowthorne) | ... | ... | ... | 2 |
| St. Edward's (Cheddleton) | ... | ... | ... | 6 |
| Buryhill & Holme Lacy (Hereford) | ... | ... | ... | 6 |
| Goodmayes (Ilford) | ... | ... | ... | 4 |
| St. George's (Stafford) | ... | ... | ... | 1 |
| St. Cadoc's (Caerleon) | ... | ... | ... | 1 |
| Monyhull (Birmingham) | ... | ... | ... | 26 |
| St. Margaret's (Birmingham) | ... | ... | ... | 21 |
| Coleshill Hall (Birmingham) | ... | ... | ... | 3 |
| Lea Hospital (Bromsgrove) | ... | ... | ... | 8 |
| Stallington Hall (Stoke-on-Trent) | ... | ... | ... | 3 |
| Stoke Park (Bristol) | ... | ... | ... | 3 |
| Chelmsley (Birmingham) | ... | ... | ... | 3 |
| Middlefield Hall (Solihull) | ... | ... | ... | 2 |
| Beechs (Ironbridge) | ... | ... | ... | 1 |
| Dean Hill (Ross-on-Wye) | ... | ... | ... | 1 |
| Moss Side (Manchester) | ... | ... | ... | 1 |
| Royal Earlswood (Redhill) | ... | ... | ... | 1 |
| Rampton (Retford) | ... | ... | ... | 1 |
| Weston Hospital (Nr. Leamington) | ... | ... | ... | 2 |

DISCHARGES AND DEATHS—MENTAL HOSPITALS, 1963

| Length of Stay | Sex | Aged Under 20 | 20-29 | 30-39 | 40-49 | 50-59 | 60-69 | Aged 70 and over | TOTAL |
|-----------------------|-----|------------------|-------|-------|-------|-------|-------|---------------------|-----------|
| Under 3 Months | M | — | 7 | 8 | 17 | 10 | 14 | 4 | 147 |
| | F | 2 | 7 | 13 | 12 | 22 | 14 | 17 | (12 Died) |
| 3—6 Months | M | — | — | — | — | — | 1 | 2 | 11 |
| | F | — | — | 1 | 1 | — | 1 | 5 | (4 Died) |
| 6—9 Months | M | 1 | 1 | — | — | 1 | — | 1 | 7 |
| | F | — | — | 1 | — | — | 1 | 1 | |
| 9—12 Months | M | — | — | — | — | 1 | — | — | 4 |
| | F | — | — | — | 1 | — | — | 2 | (1 Died) |
| 12 Months and over | M | — | 3 | — | 2 | 3 | 1 | 2 | 18 |
| | F | — | — | 1 | — | 1 | 1 | 4 | (11 Died) |
| TOTALS | | 3 | 18 | 24 | 33 | 38 | 33 | 38 | 187 |
| | | | | | | | | | (28 Died) |

ADMISSIONS TO MENTAL HOSPITALS DURING 1963

| Classification | Sex | Aged Under 20 | 20-29 | 30-39 | 40-49 | 50-59 | 60-69 | Age 70 and over | TOTAL all ages |
|---|-----|------------------|-------|-------|-------|-------|-------|--------------------|-------------------|
| Sec. 25 Mental Health Act | M | — | — | 1 | — | — | 1 | — | 2 |
| | F | 1 | — | 1 | — | — | — | 2 | 4 |
| Sec. 26 Mental Health Act | M | — | — | — | — | — | — | — | — |
| | F | — | — | — | 2 | — | 1 | 1 | 4 |
| Sec. 29 Mental Health Act | M | — | 4 | 5 | 7 | 1 | 3 | 2 | 22 |
| | F | 2 | 3 | 2 | 4 | 6 | 3 | 7 | 27 |
| Magistrate's Court Order, Sec. 60 Mental Health Act | M | — | — | — | — | 2 | — | — | 2 |
| | F | — | — | — | — | — | 1 | — | 1 |
| Informal | M | — | 7 | 4 | 10 | 11 | 11 | 2 | 45 |
| | F | 2 | 4 | 13 | 7 | 19 | 16 | 22 | 83 |
| Total Admissions During 1963 | M | — | 11 | 10 | 17 | 14 | 15 | 4 | 71 |
| | F | 5 | 7 | 16 | 13 | 25 | 21 | 32 | 119 |

CONTROL OF INFECTIOUS DISEASES

1. TUBERCULOSIS

The consultant Chest Physician, Dr. A. Wilson Russell, has kindly let me have the following report on the work of the Chest Clinic during 1963.

During the year 77 new cases were added to the Register, 63 arising in the town, the same number as last year, and 14 were transferred in from outside areas. 128 were removed from the Register, 78 as recovered, 19 by death and 31 were transferred out to other areas leaving 517 on the Register as compared with 568 at the end of 1962, a reduction of 51.

The 63 new Smethwick cases were found as follows:—

| | | | |
|-------------------------------------|-----|-----|----|
| Referred by General Practitioners | ... | ... | 22 |
| Referred by Hospitals | ... | ... | 18 |
| Contact Examinations | ... | ... | 10 |
| Mass Radiography—Doctors' cases | ... | ... | 4 |
| " "—Surveys | ... | ... | 5 |
| Others (Factory and School Doctors) | ... | ... | 4 |

Of the 77 additions to the Register, 41 were men, 21 were women and 15 were children and of these 14 were non-respiratory, 7 men, 3 women, and 4 children. (The non-respiratory figure for 1962 was 12). Only 12 of the 49 new respiratory cases were sputum positive. During the year 38 of all the patients on the Register were sputum positive. At the end of the year 6 had died, 9 were still in hospital, 17 were back home and sputum negative and 2 had left the town leaving only 4 known infectious patients at home. (The "infectior pool" at the end of 1962 was 9).

Attendances at the Chest Clinic in 1963 were 4,667 compared with 5,191 in 1962. The number of new persons seen for the first time was 987 about the same as 994 last year. Re-examinations fell from 3,220 to 2,943. X-ray examinations went up to 3,950 from 3,018. With the services again of a full-time radiographer we were able to resume X-ray work for Oldbury patients. 2,627 Smethwick patients were X-rayed and 1,323 were done for Langley Chest Clinic.

There has been no change in the arrangements for hospital treatment. Male and female patients normally go to Prestwood Chest Hospital which accepts other chest conditions as well as tuberculosis. Children are admitted to The Limes Children's Sanatorium at Himley, but in 1964 it is probable that they too will go to Prestwood where a ward is being adapted to take children. Admission can be arranged immediately with no waiting. Both Smethwick patients and myself appreciate the skilful medical care of Dr. Sheldon given at Prestwood and The Limes and at Smethwick Chest Clinic on my holiday relief.

During 1963 the average bed occupancy could be estimated as under:—

| | |
|---------------------------|---------------------|
| Prestwood, Stourbridge | Children 7 |
| The Limes, Himley | Males 16, Females 4 |
| Heath Lane, West Bromwich | Males 2 |

The special Midland 'Red' 'bus for visitors to Prestwood and The Limes leaves Windmill Lane at 1.10 p.m. on Wednesday and Sunday picking up at only the main 'bus stops in High Street and Oldbury Road. If fit to travel by 'bus, new admissions are sent in by the Visitors' 'bus. Some go in by private car and visitors can go by private car for evening visiting on other days of the week. The help of Smethwick Ambulance for patients not fit to travel by 'bus or car is much appreciated.

With the usual satisfactory response to medical treatment with drugs, surgical treatment of respiratory tuberculosis is now seldom required but the Chest Surgeons, Mr. McHall and Mr. Stephens, from Yardley Green Hospital are available for consultation. Dr. Bourne, Radiologist from West Bromwich visits the Chest Clinic regularly for X-ray consultations. Hallam Hospital laboratory undertake examination of sputa and other investigations including drug resistance of positive culture tests. A national register of drug resistant cases has been set up to record and study those cases in which the patient has tuberculosis organisms resistant to the usual 3 standard anti-tuberculosis drugs.

Nearly all new persons seen at the Chest Clinic in 1963 had routine tuberculin skin tests as part of the examination. Many more persons perviously given B.C.G. at school have been seen at the Clinic and although they too have a routine test they are excluded (along with others who have had B.C.G.) from the following table which gives the findings:—

| Age | Positive | Negative | Total | % Positive | | |
|-------|----------|----------|-------|------------|------|------|
| | | | | 1963 | 1962 | 1961 |
| 0—5 | 14 | 138 | 152 | 9.2 | 9.1 | 8.5 |
| 6—10 | 10 | 48 | 58 | 17.2 | 23.1 | 17.9 |
| 11—15 | 16 | 32 | 48 | 33.3 | 44.9 | 35.4 |
| 16—20 | 16 | 19 | 35 | 45.7 | 33.3 | 32.6 |
| 21—30 | 71 | 50 | 121 | 58.7 | 60.5 | 55.3 |
| 31—40 | 76 | 22 | 98 | 77.5 | 74.0 | 80.0 |
| 41—50 | 82 | 35 | 117 | 70.1 | 78.7 | 82.0 |
| 51—60 | 60 | 21 | 81 | 74.1 | 79.7 | 80.0 |
| 61—70 | 38 | 23 | 61 | 62.3 | 48.9 | 72.8 |
| 71—80 | 8 | 9 | 17 | 47.1 | 42.8 | 53.3 |
| 81 + | 0 | 1 | 1 | 0 | 0 | 50.0 |
| TOTAL | 391 | 398 | 789 | 49.5 | 51.1 | 55.9 |

While the figures are a little better than in 1962, those for school children and under 5 are still too high for complacency regarding the incidence of primary tuberculosis. Up to 10 years 11.4% are positive as compared with 16.3% in 1962 and up to age 20 years 19.1% compared with 22.7%. The figures for 1963 are almost the same as for 1961 when the rise was noted after a steady decline in preceding years. From the results obtained by the School doctors testing 13—14 year old school children preparatory to B.C.G. vaccination, 85 out of 729 (11.7%) were positive. 644 negative children were vaccinated by the School Medical Officer. As regards contact children tested at the Chest Clinic, 71 out of 198 were positive (35.9%) and 69 contact children received B.C.G. vaccination. I only give B.C.G. if the tuberculin test is negative (1:100 as well as 1:1000). This has been my routine practice since B.C.G. vaccination started because I think it ensures that the child really needs the vaccination and it avoids any excessive reactions at the vaccination site. Many of the Indian children are negative to 1:1000 test but positive to 1:100. Out of 127 contacts negative to 1:1000 only 69 were negative 1:100 and these were given B.C.G.

In 1963 no case of tuberculosis was found in a person known to have previously received B.C.G. but routine tests show that tuberculin sensitivity given by B.C.G. disappears in 3 to 5 years. I have come to the conclusion that a severe reaction to B.C.G. in a negative 1:1000 person or a strongly positive test in a B.C.G. vaccinated subject indicated natural primary infection although this may be the only evidence.

Tuberculosis in immigrants rose again in 1963, 35 of the 63 new Smethwick cases and 6 of the inward transfers were immigrants. 53.2% of the 77 new additions to the Register and 45.4% of the 63 new Smethwick cases occurred in immigrants.

The Nationalities of the new immigrant cases were as follows:—

| Nationality | Smethwick Residents | Transfers in | Total |
|--------------|---------------------|--------------|-----------|
| Indian | 23 | 2 | 25 |
| Pakistani | 8 | 1 | 9 |
| Irish | 2 | 3 | 5 |
| Jamaican | 1 | 0 | 1 |
| Persian | 1 | 0 | 1 |
| TOTAL | 35 | 6 | 41 |

My impression is that there are more West Indians in the town but fewer Pakistanis and now that the wives and children of Indians

have joined their menfolk, the Indians and West Indians have settled down extremely well to lead normal family lives in separate family units, in so far as this is possible in the present housing situation. The number of adult Asiatics requiring hospital treatment has fallen to the former average of about $\frac{1}{3}$ of the beds. They are good patients both in hospital and at home and in 1963 it has been much easier to get them back to work in suitable jobs. This is probably because there are fewer adult males. Tuberculosis is comparatively uncommon in West Indians but is common in Asiatics, who present glandular as well as respiratory disease.

Overcrowding and multi-occupation in immigrant households has been less noticeable in 1963, partly because of the action taken by Smethwick Council to prevent this, but mainly because of the strong desire of the Indians for normal family lives in separate households.

In the prevention of tuberculosis the abolition of poverty, starvation and poor housing are basic Public Health measures. Good standards of diet and personal hygiene have been attained in "the affluent society" but good housing has still not been fully achieved. Considerable progress in redevelopment of poor housing areas has been made and many tuberculous families have been rehoused during the year but many families still live in sub-standard houses in overcrowded conditions. In my view housing is even more important than schools and hospitals.

During the year about 130 patients received a daily free pint of milk through the After-Care Scheme of Smethwick Health Committee. These patients are mostly children with primary disease and some adults after coming home from Sanatorium until they are fit to resume work.

Some male patients have been sent to the Government Rehabilitation Unit and a few to the Training Centre, but fewer than in the past. This is probably due to the higher age of tuberculous patients and the increasing willingness of employers to find a niche for old employees. It has been easier to get the Indians back to work after treatment because employers are more ready to re-engage them and the number of adult male Indians is much less. There is still difficulty with men over 55 and there is a small core of men quite unfit for employment in any normal job, but rehabilitation has been easier in 1963.

During 1963 the Chest Clinic had its normal staff complement. Sister O'Connor attended all the Clinic Sessions and carried out 931 home visits. Miss Underhill performed all the Secretarial duties including 3,139 reports to doctors regarding their patients. Mrs. Stokes did all the X-ray work taking 3,950 radiographs. We are a small but happy team and it gives me much pleasure to record my sincere thanks to these three ladies for their cheerful and willing co-operation throughout the year.

A. WILSON RUSSELL.

RETKIN SHOWING THE WORK OF THE DISPENSARY DURING THE YEAR 1963

| | PULMONARY | | | NON-PULMONARY | | | TOTAL | | | Grand Total |
|--|-----------|-----|----------|---------------|----|----------|--------|-----|----------|-------------|
| | Adults | | Children | Adults | | Children | Adults | | Children | |
| | M. | F. | | M. | F. | | M. | F. | | |
| A. (1) Number of definite cases of Tuberculosis on the Dispensary Register at the beginning of the year | 306 | 141 | 64 | 28 | 20 | 9 | 324 | 161 | 83 | 568 |
| (2) Transfers from Authorities of areas outside that of the Council or Board during the year | 9 | 5 | — | — | 1 | — | 9 | 5 | — | 14 |
| (3) Lost-sight-of cases returned during the year | — | — | — | — | — | — | — | — | — | — |
| B. Number of new cases diagnosed as Tuberculosis during the year:— | | | | | | | | | | |
| (1) Class T.B. Minus | 16 | 10 | 11 | 7 | 3 | 4 | 23 | 13 | 15 | 51 |
| (2) Class T. B. Plus | 9 | 3 | — | — | — | — | 9 | 3 | — | 12 |
| C. Number of cases included in A and B written off the Dispensary Register during the year as:— | | | | | | | | | | |
| (1) Recovered | 31 | 26 | 7 | 2 | 2 | 1 | 33 | 28 | 8 | 69 |
| (2) Dead (all causes) | 15 | 4 | — | — | — | — | 15 | 4 | — | 19 |
| (3) Removed to other areas | 15 | 9 | 6 | — | 1 | — | 15 | 10 | 6 | 31 |
| (4) For Other Reasons | 7 | 1 | — | — | 1 | — | 7 | 2 | — | 9 |
| D. Number of definite cases of Tuberculosis on the Dispensary Register at the end of the year | 272 | 119 | 62 | 33 | 19 | 12 | 295 | 138 | 84 | 517 |

2. COMMON INFECTIOUS FEVERS AND NOTIFIABLE DISEASES

There were no cases of smallpox, diphtheria or poliomyelitis reported in Smethwick during the year. There were 32 scarlet fever notifications compared with 24 last year. In general scarlet fever today is a very mild type and bears little resemblance to the form of disease seen years ago. Eighteen cases of pneumonia were reported to the Department during the year, but in 57 instances pneumonia was the certified cause of death of residents in the Borough.

There were no cases of enteric fever and 7 cases of dysentery were notified during 1963 compared with 53 last year; of the 1963 cases 2 were confirmed bacteriologically. One case of food poisoning was notified during the year as against 2 in 1962.

| | | Cases notified: | | | Remarks |
|-------------------|-----|-----------------|------|------|---|
| | | 1961 | 1962 | 1963 | |
| Smallpox | ... | — | — | — | No case notified since 1928 No deaths since 1894 |
| Diphtheria | ... | — | — | — | No case notified since 1954 No deaths since 1946 |
| Poliomyelitis | ... | 2 | — | — | No deaths since 1961 |
| Scarlet Fever | ... | 18 | 24 | 32 | |
| Pneumonia | ... | 25 | 13 | 18 | 57 certified as cause of of death |
| Puerperal pyrexia | | 1 | — | 2 | |
| Dysentery | ... | 22 | 53 | 7 | 2 confirmed bacteriologically |
| Food Poisoning | | 3 | 2 | 1 | |

3. VENEREAL DISEASES

Statistical information about Smethwick patients attending for the first time at the Treatment Centre, Birmingham General Hospital, has again been supplied by the Consultant Physician in charge. Details of such attendances during the past five years are given in the table below:—

| | | | 1959 | 1960 | 1961 | 1962 | 1963 |
|------------------|-----|-----|-----------|-----------|-----------|-----------|-----------|
| Syphilis | ... | ... | 4 | 1 | 9 | 6 | 6 |
| Gonorrhoea | ... | ... | 26 | 46 | 65 | 50 | 72 |
| Other conditions | ... | ... | 82 | 79 | 110 | 86 | 117 |
| | | | <hr/> 112 | <hr/> 126 | <hr/> 184 | <hr/> 142 | <hr/> 195 |

NURSING HOMES

Under the Public Health Act, 1936, and the Conduct of Nursing Homes Regulations, 1963, homes have to be registered. In Smethwick there is only one home and this provides accommodation for twenty patients; regular statutory inspections are made by the Superintendent Nursing Officer.

REPORT ON MEDICAL RECOMMENDATIONS FOR RE-HOUSING

From 1st January — 31st December, 1963

The Municipal Housing Policy for the borough indicates that the Housing Manager shall be authorised to grant transfers to alternative accommodation where the tenant desires a change of district or dwelling on the grounds that his present district or dwelling is detrimental to the health of one or more members of the household. Such transfer must, however, be recommended by the Medical Officer of Health on grounds peculiar to the particular tenant.

Information regarding medical grounds for transfer may be provided in the first instance by the Housing Manager himself who has been approached by the applicant or persons may apply to the Public Health Department, often supporting their applications by a note from their medical attendants. Further sources of information in most cases include reports from health visitors and public health inspectors. Every case is therefore considered on its merits and an appropriate recommendation made to the Housing Manager concerning the degree of priority and sometimes also, when necessary, the most suitable type of dwelling required. The total number of applications received was higher than last year but the number of applications supported was lower and clearly some medical reasons are stronger than others. The process of investigation and consideration is extensive and means a fair proportion of officers' time is spent on this work.

Applications not supported (Insufficient medical grounds) ... 52

TABLE "A"

Applications where support given and type of dwelling concerned

| | | | | | | |
|--|-----|-----|-----|-----|-----|-----|
| Transfer from flat | ... | ... | ... | ... | ... | 23 |
| Transfer from maisonette | ... | ... | ... | ... | ... | 15 |
| To expedite transfer from house in clearance area | ... | ... | ... | ... | ... | 5 |
| Overcrowding with medical grounds in addition | ... | ... | ... | ... | ... | 2 |
| Transfer from old property | ... | ... | ... | ... | ... | 8 |
| Exchange of council dwelling | ... | ... | ... | ... | ... | 25 |
| Transfer from Council house to Old Persons Bungalow | ... | ... | ... | ... | ... | 8 |
| Transfer from Council house to flat | ... | ... | ... | ... | ... | 6 |
| Transfer from old property to Old Persons Bungalow | ... | ... | ... | ... | ... | 4 |
| Applications by sub-tenants of Council and other property... | ... | ... | ... | ... | ... | 9 |
| Total: | | | | | | 105 |

TABLE " B "

Type of Medical Condition to which applicants have drawn attention:

| | | | | | | |
|---|-----|-----|-----|-----|-----|-----|
| Psychoneurotic conditions | ... | ... | ... | ... | ... | 15 |
| Nervous debility (not included above) | ... | ... | ... | ... | ... | 9 |
| Asthma and Bronchitis | ... | ... | ... | ... | ... | 21 |
| Heart and circulatory conditions | ... | ... | ... | ... | ... | 24 |
| Other physical handicaps | ... | ... | ... | ... | ... | 12 |
| Tuberculosis (other than open cases in contact with children) | ... | ... | ... | ... | ... | 8 |
| Arthritis | ... | ... | ... | ... | ... | 8 |
| Gastric and Intestinal conditions | ... | ... | ... | ... | ... | 2 |
| Epilepsy | ... | ... | ... | ... | ... | 3 |
| Cancer | ... | ... | ... | ... | ... | 1 |
| Mentally handicapped child in family | ... | ... | ... | ... | ... | 2 |
| Total: | | | | | | 105 |

| | | | | | | |
|---|-----|-----|-----|-----|-----|----|
| Applications received where grounds for change of dwelling mainly social | ... | ... | ... | ... | ... | 23 |
| Structural defects of house (referred to Chief Public Health Inspector) | ... | ... | ... | ... | ... | 11 |

Reference to Table " A " indicates that the number of flat dwellers seeking alternative accommodation on medical grounds is still quite high, though not quite so many applications were received this year from people living in flats as were received last year. Most of these applicants prefer a house with a garden to a flat. In table " B " psychoneurotic and nervous conditions are still some of the most frequent reasons given for a desire to transfer to another dwelling being on a par with those from applicants suffering from heart conditions, chest conditions and miscellaneous physical handicaps.

The applications not supported this year because of insufficient medical grounds were higher, being 52 as against 40 last year.

V. A. LLOYD.

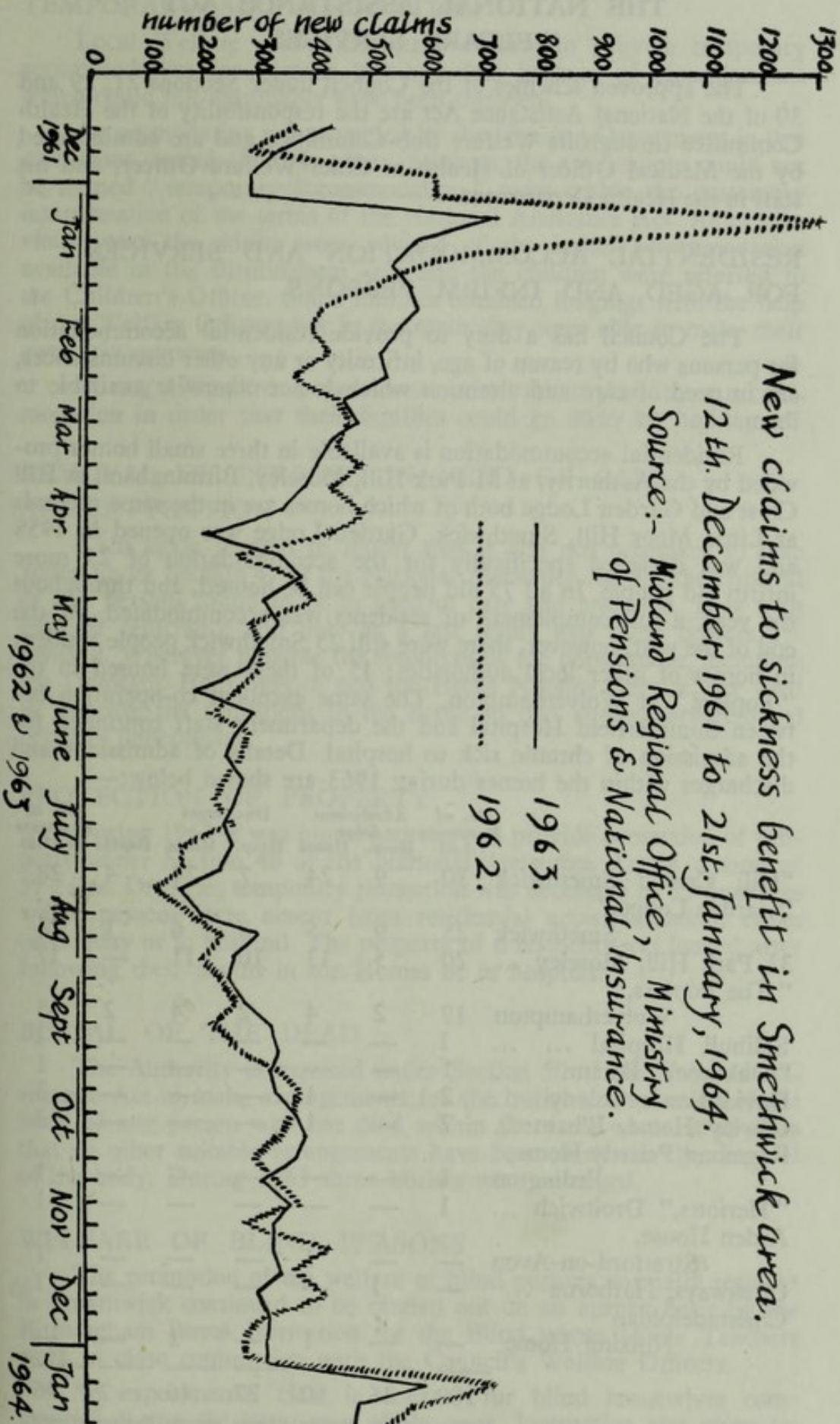
INCIDENCE OF ILLNESS IN THE WORKING POPULATION:

General morbidity statistics giving a measure of the incidence of illness in the population are not readily available to the Medical Officer of Health. The graph on page 49 prepared from the figures supplied weekly by the Ministry of Pensions and National Insurance shows the number of new claims for sickness benefit during 1963 and 1962.

New claims to sickness benefit in Smethwick area.

12th. December, 1961 to 21st. January, 1964.

Source:- Midland Regional Office, Ministry of Pensions & National Insurance.



THE NATIONAL ASSISTANCE ACT WELFARE SERVICES

The approved schemes of the Council under Sections 21, 29 and 30 of the National Assistance Act are the responsibility of the Health Committee through its Welfare Sub-Committee and are administered by the Medical Officer of Health as Chief Welfare Officer, and his staff in the Health Department.

RESIDENTIAL ACCOMMODATION AND SERVICES FOR AGED AND INFIRM PERSONS

The Council has a duty to provide residential accommodation for persons who by reason of age, infirmity or any other circumstances, are in need of care and attention which is not otherwise available to them.

Residential accommodation is available in three small homes provided by the Authority, at 31 Park Hill, Moseley, Birmingham, at Hill Crest and Garden Lodge both of which homes are in the same grounds at Little Moor Hill, Smethwick. Garden Lodge was opened in 1958 and was designed specifically for the accommodation of 25 more infirm old people. In all 75 old people can be housed, and throughout the year, a full complement of residents was accommodated. At the end of the year, however, there were still 25 Smethwick people resident in homes of other local authorities; 15 of these were housed in the "Poplars" at Wolverhampton. The same excellent co-operation between Summerfield Hospital and the department staff continued for the admission of chronic sick to hospital. Details of admissions and discharges within the homes during 1963 are shown below:—

| | No. of Residents 1.1.63 | Admissions from | | Discharges to | | Deaths | No. of Residents 31.12.63 |
|-------------------------------------|-------------------------------|--------------------|------|------------------|------|--------|---------------------------------|
| | | Hosp. | Home | Hosp. | Home | | |
| "Hill Crest," Smethwick | 30 | 9 | 24 | 7 | 24 | 4 | 28 |
| "Garden Lodge," Smethwick | 25 | 9 | 5 | 8 | 6 | 1 | 24 |
| 31 Park Hill, Moseley ... | 20 | 5 | 13 | 10 | 11 | — | 17 |
| "The Poplars," Wolverhampton | 17 | 2 | 4 | 2 | 4 | 2 | 15 |
| Solihull Hospital ... | 1 | — | — | — | — | — | 1 |
| "Oakdene," B'ham. ... | 1 | — | — | — | — | — | 1 |
| David Lewis Colony ... | 2 | — | 1 | — | — | — | 3 |
| Cowley Home, B'ham ... | 2 | — | 1 | — | — | — | 3 |
| Raymond Priestly Home, Erdington | 1 | — | — | — | — | — | 1 |
| "Heriotts," Droitwich ... | 1 | — | — | — | — | — | 1 |
| Arden House, Stratford-on-Avon | — | — | 1 | — | — | — | 1 |
| Crossways, Harborne ... | — | 1 | — | — | — | — | 1 |
| Christadelphian Nursing Home | — | — | 1 | — | 1 | — | — |
| | 100 | 26 | 50 | 27 | 46 | 7 | 96 |

TEMPORARY ACCOMMODATION

Local Welfare Authorities have a duty to provide temporary accommodation for persons left homeless because of circumstances which could not reasonably have been foreseen.

Accommodation was provided by the Housing Department in two such cases during 1963. In other instances, the applications could not be termed "temporary accommodation" cases within the customary interpretation of the terms of the National Assistance Act. As in previous years the adults were advised of the hostel accommodation available in the Birmingham area and the children were referred to the Children's Officer. Some families obtained lodgings with the help of my Welfare Officers but in the main they were able to make their own arrangements.

During 1963 three persons were admitted to short term accommodation in order that their families could go away on holiday.

REMOVAL OF PERSONS IN NEED OF CARE AND ATTENTION

I am again pleased to report that it was not necessary to take action under Section 47 of the National Assistance Act for the removal of any persons found to be in need of care and attention. It is with extreme reluctance and only as a last resort that these powers are invoked. Wherever possible the resources of the department, including the Domestic Help Service and the Home Nursing Service, are used to improve the conditions in the home so that compulsory removal becomes unnecessary.

PROTECTION OF PROPERTY

During 1963 it was found necessary to provide protection of property under Section 48 of the National Assistance Act in a total of 57 cases. Of these, temporary protection was necessary in 51 instances where persons were absent from residential accommodation, either on holiday or in hospital. The property of 6 residents was looked after following their deaths in the Homes or in hospital.

BURIAL OF THE DEAD

The Authority is required under Section 50 of the National Assistance Act to make arrangements for the burial or cremation of the body of any person who has died within the area, where it appears that no other suitable arrangements have been made for the disposal of the body. During 1963 three burials were arranged.

WELFARE OF BLIND PERSONS

The promotion of the welfare of blind persons normally resident in Smethwick continued to be carried out on an agency basis by the Birmingham Royal Institution for the Blind whose Home Teachers work in close conjunction with the Council's Welfare Officers.

An experimental class in cookery for blind housewives commenced during the latter part of the year. Instruction was given by

the Institution's Home Teacher at the Cape Hill Adult Handicapped Centre where special equipment was made available. The classes, which are intended to assist the "plain" cook housewife in her endeavours to introduce a greater variety of meals in her own home, were very popular and well attended.

The classification of the Register of the Blind at the 31st December, 1963, was as follows:—

| | Males | Females | Total |
|--|----------|----------|-----------|
| Workshop Workers | 12 | 4 | 16 |
| Workers in Open Employment | 7 | — | 7 |
| Unemployable at home | 38 | 49 | 87 |
| Unemployables in Regional Board Hospitals | 2 | 2 | 4 |
| Attending Residential Course at Training Centre | — | 1 | 1 |
| At Residential School for Children | 1 | — | 1 |
| Unemployed in Cowley Home | — | 3 | 3 |
| Child in hospital | — | 1 | 1 |
| | <hr/> 60 | <hr/> 60 | <hr/> 120 |

WELFARE OF OTHER HANDICAPPED PERSONS

The appointment of a full-time Handicraft Instructress at the Albert Bradford Centre in September, 1963, meant that the Occupations Officer was able to undertake full-time duties in the service of other handicapped persons.

The twice weekly half-day handicraft classes, at the Cape Hill Centre, were extended to two days a week and a Rehabilitation Kitchen class, held one day a week, was inaugurated in October.

The Occupations Officer and the Assistant Welfare Officer, in dealing with the needs of other handicapped persons, were able to devote more time to the increasing numbers of the registered home bound disabled. This was reflected in the number of gadgets and adaptations provided during the last quarter of the year.

The year commenced with a total of 166 persons on the register of Handicapped Persons. There were 36 new cases and 11 deaths occurred during the period under review. The classification of the Register on the 31st December, 1963, was as follows:—

| | |
|---|-----------|
| Amputation | 17 |
| Arthritis and Rheumatism | 68 |
| Congenital malformation | 7 |
| General diseases | 11 |
| Injuries | 7 |
| Organic Nervous diseases | 72 |
| Other Nervous and Mental Disorders | 12 |
| Other diseases and injuries | 5 |
| Hard of Hearing | 2 |
| | <hr/> 201 |

The success of the pilot scheme for the provision of holidays for 21 severely disabled persons in 1962 encouraged the Council to provide for a larger party during the period under review. A party of 40 handicapped persons and their escorts enjoyed a week's stay at a Miner's Welfare Centre at Skegness early in June. The camp is situated on the sea front with a ramp to the beach and easy access to the promenade. The management and staff were very co-operative and assisted in every way to make the stay an enjoyable one. I am indebted to the Smethwick firms who were kind enough to release volunteers to assist my officers. The party was catered for, en route, by various voluntary organisations in the Grantham area.

MEALS ON WHEELS SERVICE

The operation of the Mobile Meals Service continued smoothly, despite the extremely rigorous weather during the first quarter of the year. The number of meals provided since the inception of the service, to the 31st December, 1963, totalled 9,712. I am pleased to report that arrangements for the extension of the service to 75 meals per day were finalised in December. Messrs. Evereds and Incandescent Heat Ltd., have kindly agreed to provide 25 meals each on two days per week to augment the 50 daily meals already prepared by Messrs. Mitchells & Butlers.

The Committee have purchased another Mobile Meals Van, also to be driven by a corporation employee. It has been decided to appoint two paid attendants to deliver the meals from the van to the recipients houses. This will enable the W.V.S. who plate the meals, to concentrate on work in the three canteens during the week. We are most grateful for the assistance provided by the three firms in question, and by the Women's Voluntary Service.

SMETHWICK CLUB FOR THE HANDICAPPED

The continued success of the Club was again evident by the increased membership in 1963. During this period several new members, whose special needs created problems for the transport section, were obliged to wait for many weeks before their introduction to the Centre could be accomplished. There is no doubt that the club's continuing need for more voluntary help from car owners is a limiting factor in the further growth of certain sections of the club.

The "hard core" of fourteen volunteer car owners and the drivers of the two minibuses (one is very kindly lent by Messrs. Guest, Keen & Nettlefolds) are to be congratulated on their fine effort over the past years.

The minibus, given by the British Cycle Corporation Social Club, has been of the utmost value, indeed it has been possible for the club to assist many voluntary organisations, both in Smethwick and in neighbouring towns, with their difficulties in transporting seriously disabled persons. The vehicle accompanied the physically disabled on their annual holiday to Skegness, (which was arranged by the Corporation), where it provided a "bus service" from the camp to the amenities in the town.

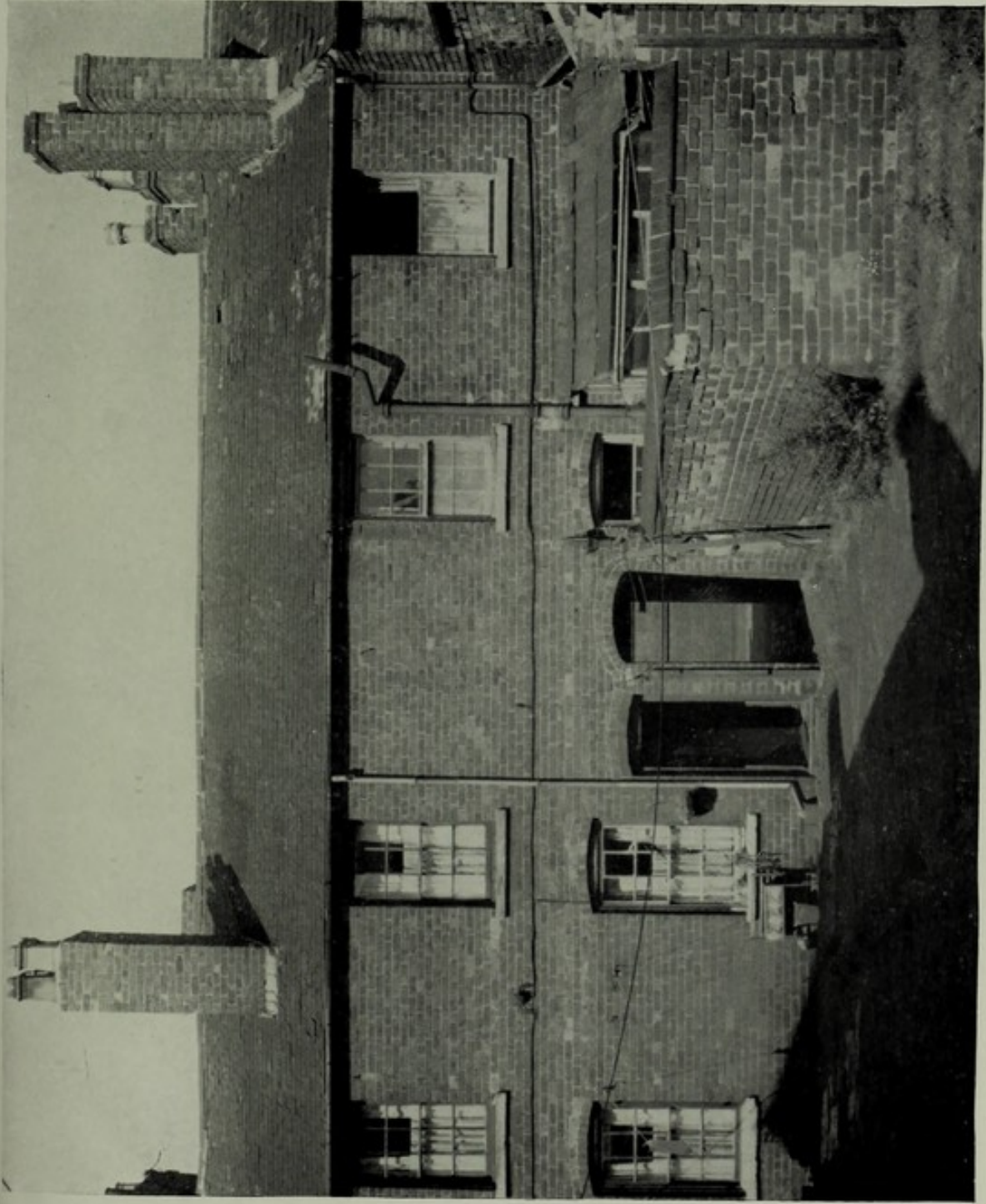
Excellent financial support continues to be given to the Club from

the Corporation, local firms, private individuals, and charitable organisations, without which the club would be unable to maintain its high standard of social activities. Due credit must also be given to the organisers and helpers of the five sections for their loyalty and hard work during the year. A number of ambitious programmes were successfully accomplished by dint of their efforts.

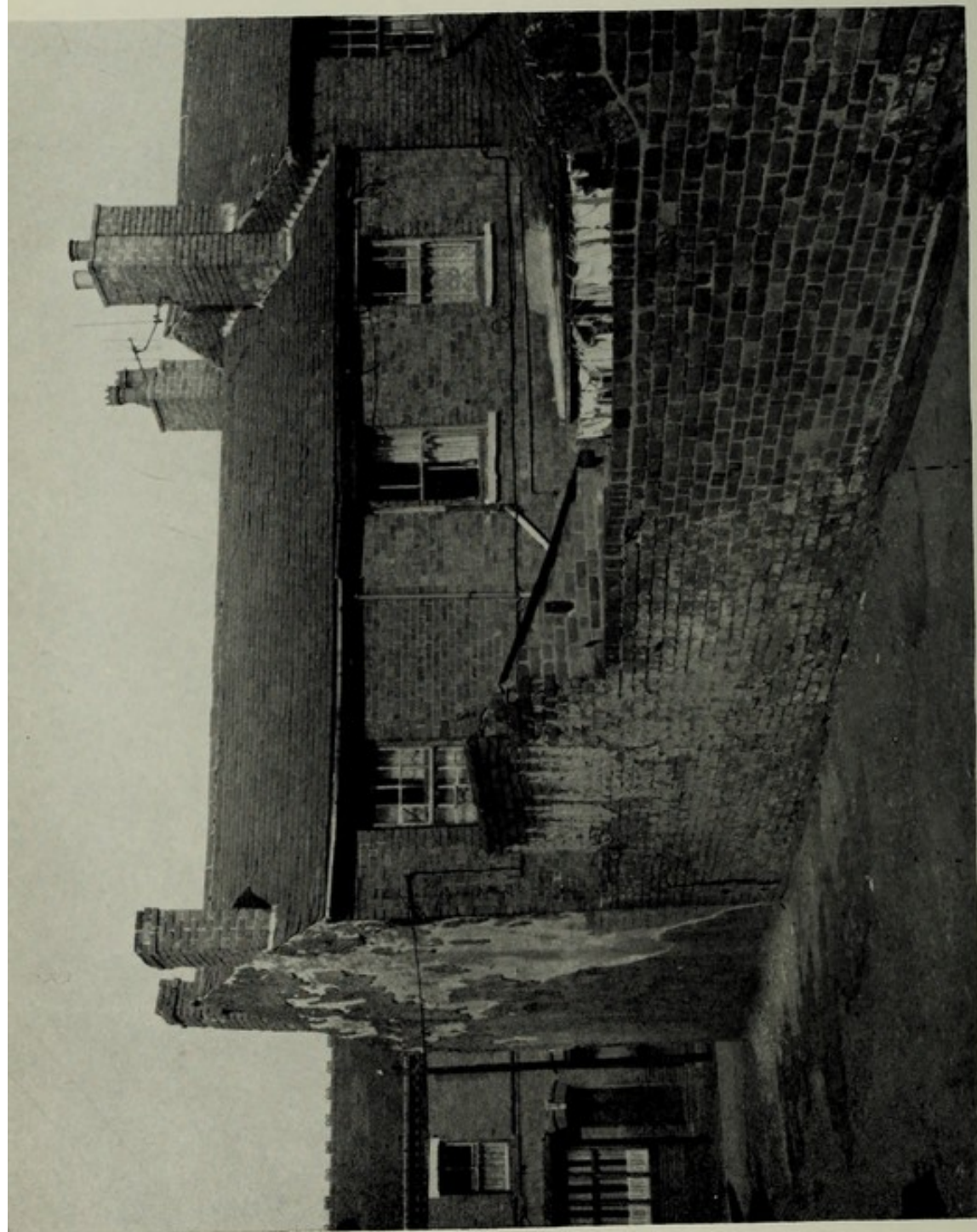
Two members of the Controlling Committee, Miss M. Parkes and Mr. J. Cox, resigned early in the year. They had both rendered yeoman service to the club. The loss of Miss Parkes, who had been Secretary since the formation of the club, was felt particularly by her colleagues who held her in the highest regard.

MEDICAL EXAMINATIONS, 1963

| Department | | | Number Examined |
|--|----------------------|-----|--------------------|
| Borough Engineer ... | ... | ... | 37 |
| | Special Examination | ... | 1 |
| | Re-examinations | ... | 1 |
| Borough Librarian ... | ... | ... | 8 |
| | Special Examinations | ... | 2 |
| Borough Treasurer ... | ... | ... | ... |
| Building & Maintenance | ... | ... | 27 |
| | Special Examinations | ... | 9 |
| Children's ... | ... | ... | ... |
| Education: | | | 10 |
| Teachers ... | ... | ... | 96 |
| | Special Examination | ... | 1 |
| Training College ... | ... | ... | 28 |
| School Meals Staff | ... | ... | 81 |
| | Special Examination | ... | 1 |
| School Caretakers | ... | ... | 1 |
| School Cleaners ... | ... | ... | 27 |
| Staff Examinations | ... | ... | 37 |
| Estates: | | | 272 |
| Baths ... | ... | ... | ... |
| Cemetery ... | ... | ... | 10 |
| Parks ... | ... | ... | 5 |
| | Special Examination | ... | 21 |
| | Re-examination | ... | 1 |
| Fire Services... | ... | ... | ... |
| Housing ... | ... | ... | 11 |
| | Special Examination | ... | 1 |
| Local Taxation | ... | ... | ... |
| Magistrate's Clerks ... | ... | ... | 5 |
| | Special Examination | ... | 1 |
| Public Health | ... | ... | ... |
| Town Clerk's | ... | ... | ... |
| Weights & Measures | ... | ... | ... |
| Examinations carried out for other Authorities ... | ... | ... | ... |
| | | | 548 |



“ URBAN BLIGHT ”



“URBAN BLIGHT”

COUNTY BOROUGH OF SMETHWICK

Annual Report of the Chief Public Health Inspector on
the Sanitary Administration of the Borough, for the
year ended 31st December, 1963.

To the Mayor, Aldermen and Councillors of the
County Borough of Smethwick

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting my Eleventh Annual Report:

ATMOSPHERIC POLLUTION

INDUSTRIAL—It is perhaps not generally appreciated how much work is involved in connection with certain of the industrial provisions of the Clean Air Act. I refer to such matters as chimney heights and new furnace plants. The question of chimney heights invariably causes a distinct cleavage of opinion between public health officers concerned with the effective dispersal of combustion products and planning officers, whose thinking is dominated by aesthetic considerations. It was, therefore, with very great pleasure that we welcomed in May, 1963, Circular 25/63 and the accompanying memorandum on Chimney Heights, issued by the Ministry of Housing and Local Government. Here was an authoritative guide to the determination of chimney heights, which has proved of very great assistance.

DOMESTIC—Ever since the inception of the Clean Air Act, 1956, which gave local authorities increased powers to rid the skies of aerial sewage, this Council has vigorously pursued a policy, designed to achieve clean air in Smethwick in our time. At the time of writing, 457 acres containing 4,266 premises, almost one-fifth of the Town, was subject to Smoke Control Orders. No serious opposition to the Council's plans for achieving a Smoke Free Town by 1979 has been encountered. This is possibly due to the way in which the Act has been administered. 100% grants were made in five cases of proved hardships. So far in Smethwick, despite the rapid technological changes in the gas industry, affecting the future production of gas coke, no supply difficulties have been experienced. However, the trend towards the use of gas room heating, to which I drew attention in my report for 1962, is continuing to develop at an ever increasing rate. Indeed the swing from the traditional open fire is well illustrated by the following figures relating to present forms of heating in our latest smoke control area. Gas room heaters accounted for 21.26%, direct acting electric fires for 6.9% and solid fuel room heaters for 37%. Whilst accepting that the probable reason for this trend is either convenience or increased heating efficiency, nevertheless, it does indicate that in Smethwick our people are anticipating the changes foreshadowed in the White Paper (Cmd. 2231) "Domestic Fuel Supplies and the Clean Air Policy."

CONSUMER PROTECTION

The following up of complaints received from the Public, in respect of foodstuffs purchased by them, has a most salutary effect on those responsible for food production and handling at all stages. Reference to the body of the report will show that eleven cases, concerning foodstuffs, were taken under the Food and Drugs Act, 1955, fines totalling £197 being imposed. In addition, it was necessary to take four cases for infringements of the Food Hygiene (General) Regulations, 1960.

It is unfortunate that only when incidents like the recent Aberdeen Typhoid outbreak occur, does the public become really interested in food hygiene. Yet all the time the regular routine inspection of food and food premises must continue if food borne infections are to be avoided.

HOUSES IN MULTI-OCCUPATION

1963 saw a determined drive to deal with the great social problem created by Houses-let-in Multi-Occupation. The table in the body of the report gives some indication of the volume of notices of all kinds, which it was found necessary to serve. Once again the bulk of the work had to be done in the evenings. This is especially necessary where legal proceedings for the abatement of overcrowding are involved. It may be of interest to refer to the many difficulties involved in bringing a case before the courts. The preparation for the hearing of cases brought under Section 90 of the Housing Act, 1957, requires that: (1) Every effort must be made to obtain the information which is to be given at the hearing from the prospective defendant and from him alone. It may be in certain circumstances that information can be taken from a person acting as the agent of the proposed defendant, but this raises the problem of establishing to the satisfaction of the Court that the agent is indeed acting as an agent and with the authority of the defendant. (2) Clear records have to be available to show (a) what information has been obtained; (b) when it was obtained; (c) from whom it was obtained. (3) When evidence is being obtained the public health inspectors must take such steps as they can, to satisfy themselves that the proposed defendant knows precisely what he is being asked, since on certain occasions, defendants have indicated to the Court that they have not really understood. (4) Defendants are increasingly trying to set up a defence that all the persons in the house at the date of the alleged offence are relations. After all this effort, the highest fine imposed has been £10. I state this as a fact and without comment. Whilst welcoming the new Housing Bill, especially the penal provisions for failure to comply with Sections 15 and 16 of the Housing Act, 1961, which will perhaps be on the Statute Book by the time this report appears in print, I am of the opinion that it still does not go far enough. I feel that general standards of hygiene, particularly of the exterior of houses, could be considerably improved if the Management Regulations were applied automatically to all houses found to be in Multiple Occupation and not, as at present, after giving notice under Section 12 of the Housing Act, 1961, in individual cases.

SLUM CLEARANCE

In pursuance of the five year plan, 258 houses in the Park Avenue, Spon Lane and Broomfield areas were represented during the year, as

being unfit for human habitation. It would appear to be taking approximately twelve months between the submission of an Order to the Minister for confirmation and the actual receipt of confirmation. Two examples will serve to illustrate this. The Smethwick (Spon Lane Ward Clearance Area No. 1) Compulsory Purchase Order, 1961, was submitted to the Minister in January, 1962, a public local inquiry was held in May, 1962, but it was not until January, 1963, that confirmation of the Order was received. In the case of the Smethwick (Spon Lane Ward Clearance Areas 6-20) Compulsory Purchase Order, 1963, this was submitted to the Minister in September, 1963, the official inquiry was held in January, 1964, and at the time of writing this report in late July, 1964, confirmation is still awaited.. It would be of undoubted benefit to the slum clearance drive, if this time lag could be cut down. Surely we all want to see sub-standard dwellings swept away and everyone decently housed with the minimum of delay.

NOISE NUISANCES

During the year an increasing number of complaints relating to noise, were received. As the Wilson Report issued in July, 1963, pointed out, there is a considerable amount of evidence that as living standards rise, people are less inclined to tolerate noise. The Report goes on to say that "in dealing systematically with noise problems, sound measuring instruments are essential". These instruments are of great value in deciding to what extent remedial measures, taken by industrialists, have reduced noise emissions. I am indebted to the Rowley Regis Authority for loaning to me, on a number of occasions, their Sound Level Meter.

THE MEAT INSPECTION REGULATIONS, 1963

These regulations, which came into force on the 1st October, 1963, were the subject of a special report which I circulated to the Health Committee in September, 1963. Although in Smethwick we have for many years operated a 100% meat inspection service, the effect of the new regulations was to give statutory force to the method of meat inspection which is detailed in the regulations. Not only must meat be inspected but if passed as fit for human consumption, it must be marked with a stamp identifying the inspector making the inspection. In particular, Regulation 9 stipulates that as far as is practicable, every inspection shall be made while the carcass is being dressed. I wonder how many people, when they sit down to the Sunday joint, give a thought as to whether the meat is in fact fit for human consumption. It is perhaps an unconscious tribute to the public health inspector that most of us take it for granted that it will be so.

Yet a perusal of Table V in the body of the report, giving details of the conditions of diseases found during meat inspection, shows what an essential service this is.

HEALTH EDUCATION

Every public health inspector in the normal course of his duties is carrying out a form of health education. He is not a policeman. His function is preventive rather than punitive. At the same time formal lectures, with supporting films and exhibits, are also necessary. Dur-

ing the year the public health inspectors gave lectures to various organizations on such matters as Food Hygiene, Environmental Hygiene and Atmospheric Pollution. The Chance Technical College ran a course in Domestic Science and at their request, Messrs. Ball and Puffitt gave lectures on Meat Inspection and General Sanitation.

LAND CHARGES ACT

During the year, 1,321 Searches under the above Act were made, an increase of 303 over the preceding year. This reflects the increasing trend towards home ownership.

ADVISORY SERVICE

I am pleased to record that an increasing number of firms are seeking our advice at the design stage and prior to the installation of new plant. This consultation is not only one of the most effective methods of ensuring compliance with current legislation, but often results in considerable financial saving to the firm concerned. It also makes for very good public relations and I hope that the present trend will continue.

SUBMISSION OF PLANS

The close liaison which has been maintained for many years now with the Borough Engineer's Department ensures that the Public Works Committee have relevant comments on environmental health matters when plans for new developments are being considered.

HAIL AND FAREWELL

During the year we lost two inspectors, Mr. D. G. Hobday, who had started his public health career as a pupil public health inspector here at Smethwick and Mr. A. A. Johnson, who came to us from Birmingham in October, 1961. We wish them well in their new spheres of activity.

In their place we welcomed Mr. R. G. Puffitt from Coventry and Messrs. B. D. Wildman and B. J. Pritchard from Birmingham. These staff changes, with the inevitable time lapse between one inspector leaving and the arrival of his replacement, caused considerable dislocation. Unhappily we have since lost a further three inspectors which we have been unable to replace and at the time of writing this report are four inspectors below establishment.

Having regard to increased duties, notably the implementation of the Meat Inspection Regulations, 1963, which came into operation on the 1st October, 1963, and the Offices, Shops and Railway Premises Act, 1963, which comes into force on the 1st August, 1964, to say nothing of the need to give adequate attention to such vital public health matters as Slum Clearance, Houses in Multi-Occupation, Food Protection and Air Pollution (both Industrial and Domestic), this is a matter of the gravest concern.

CONCLUSION:

Environmental hygiene has made a major contribution to the improvement in public health. Such improvement, however, has not been easily attained. Constant vigilance is essential and this can only be maintained if an authority has an adequate, well-trained and experienced staff.

Once again I have pleasure in acknowledging the support which I have received from the Chairman and Members of the Health Committee.

SUMMARY OF DEFECTS

TABLE II

| | Found | Remedied |
|---|-------|----------|
| Accumulation of Refuse | 10 | 11 |
| Blocked Drains | 419 | 409 |
| Cleansing | 23 | 25 |
| Dampness | 20 | 11 |
| Dangerous Buildings | 28 | 31 |
| Defective Ashbins | 1,631 | 1,812 |
| Defective External Brickwork and Chimneys | 126 | 108 |
| Defective or Insufficient Drainage | 44 | 38 |
| Defective Floors | 56 | 45 |
| Defective Firegrates | 12 | 13 |
| Defective Paving | 15 | 12 |
| Defective Plaster of Walls and Ceilings ... | 157 | 165 |
| Defective Rainwater Cisterns | 1 | — |
| Defective Roofs, Spouting, etc. | 398 | 366 |
| Defective Sinks and Wastepipes | 47 | 39 |
| Defective Stairs and Handrails | 8 | 4 |
| Defective Washboilers | 1 | 1 |
| Defective Water Fittings | 83 | 72 |
| Defective W.C.'s | 299 | 304 |
| Defective Woodwork of Doors, Windows, etc. | 83 | 86 |
| Inadequate Food Storage Accommodation ... | 7 | 4 |
| Inadequate Heating | 3 | 2 |
| Insufficient Lighting and Ventilation ... | 90 | 90 |
| Insufficient W.C. Accommodation | 3 | — |
| Insufficient Water Supply | 15 | 8 |
| Lack of Sinks and Washbasins | 2 | — |
| Overcrowding | 3 | 6 |
| Miscellaneous | 41 | 26 |
| | 3,625 | 3,688 |

During the year, 1,930 complaints were received and investigated by the Department. As a result of these investigations, the following action was taken:—

PUBLIC HEALTH ACT, 1936

| | |
|--|-----|
| No of preliminary notices served | 639 |
| No. of abatement notices served | 65 |
| Proceedings instituted for non-compliance with abatement notices | 2 |

PUBLIC HEALTH ACT, 1936—SECTION 24 AND SMETHWICK CORPORATION ACT, 1929—SECTION 49

| | |
|------------------------------|-----|
| No. of notices served | 556 |
|------------------------------|-----|

SMETHWICK CORPORATION ACT, 1948—SECTION 49

| | |
|-----------------------------|-----|
| No of notices served | 221 |
|-----------------------------|-----|

Arising out of the notices served under the above Local Acts, work was carried out in default of the owner involving 629 houses at a cost of £1,383. The recovery of this sum involved the preparation of 526 accounts.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

(a) PREMISES:

| | | | | |
|------------------------------|-----|-----|-----|-----|
| No. of premises investigated | ... | ... | ... | 534 |
| No of premises treated | ... | ... | ... | 372 |
| No. of bodies found | ... | ... | ... | 171 |

(b) SEWER TREATMENT:

| | | | | |
|---|-----|-----|-----|-----|
| No. of manholes baited | ... | ... | ... | 276 |
| No. of manholes showing prebait take | ... | ... | ... | 146 |
| No. of manholes showing complete prebait take | ... | ... | ... | 78 |

INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY:

The number of samples submitted for bacteriological examination was 109. The results of the examinations are summarised as follows:—

TABLE III

| Type of Milk | No. of Samples | Tests Applied | Satisfactory | Unsatisfactory |
|-----------------------|----------------|--------------------|--------------|----------------|
| Tuberculin Tested ... | 45 | Phosphatase ... | 45 | — |
| (Pasteurised) | | Methylene Blue ... | 45 | — |
| Pasteurised ... | 37 | Phosphatase ... | 37 | — |
| | | Methylene Blue ... | 37 | — |
| Sterilised ... | 27 | Turbidity ... | 27 | — |

MEAT INSPECTION:

TABLE IV

Carcases and Offal Inspected and Condemned in whole or in part:

| | Cattle exc. Cows | Cows | Calves | Sheep and Lambs | Pigs |
|--|------------------|-------|--------|-----------------|-------|
| Number Killed | 945 | 34 | 186 | 7,614 | 3,894 |
| Number Inspected | 945 | 34 | 186 | 7,614 | 3,894 |
| ALL DISEASES EXCEPT TUBERCULOSIS: | | | | | |
| Whole carcases condemned | — | — | 3 | 2 | — |
| Carcases of which some part or organ was condemned | 127 | 10 | 2 | 226 | 544 |
| Percentage of number inspected affected with disease other than tuberculosis | 13.43 | 29.41 | 2.68 | 3.99 | 13.97 |
| TUBERCULOSIS ONLY: | | | | | |
| Whole carcases condemned | — | — | — | — | — |
| Carcases of which some part or organ was condemned | — | — | — | — | 68 |
| Percentage of number inspected affected with tuberculosis | — | — | — | — | 1.74 |
| CYSTICERCOSIS: | | | | | |
| Carcases of which some part or organ was condemned | 2 | — | — | — | — |
| Carcases submitted to treatment by refrigeration | 2 | — | — | — | — |
| Generalised and totally condemned | — | — | — | — | — |

Conditions and diseases found during Meat Inspection and amounts condemned:

TABLE V

| | | | | | lbs. |
|-------------------------------------|-----|-----|-----|-----|-------|
| Abscesses | ... | ... | ... | ... | 398 |
| Actinobacillosis | ... | ... | ... | ... | 58 |
| Arthritis | ... | ... | ... | ... | 19 |
| Ascarides | ... | ... | ... | ... | 501 |
| Bruising | ... | ... | ... | ... | 60 |
| Cirrhosis | ... | ... | ... | ... | 505 |
| Congestion | ... | ... | ... | ... | 20 |
| Cysticercus Bovis | ... | ... | ... | ... | 26 |
| Cysts | ... | ... | ... | ... | 9 |
| Echinococcus Veterinorum | ... | ... | ... | ... | 272 |
| Fascioliasis | ... | ... | ... | ... | 530 |
| Immaturity | ... | ... | ... | ... | 25 |
| Moribund | ... | ... | ... | ... | 38 |
| Necrosis | ... | ... | ... | ... | 10 |
| Oedema and Emaciation | ... | ... | ... | ... | 113 |
| Parasitic | ... | ... | ... | ... | 587 |
| Pentastomum | ... | ... | ... | ... | 2 |
| Peritonitis, Pleurisy, Pericarditis | ... | ... | ... | ... | 424 |
| Pneumonia | ... | ... | ... | ... | 175 |
| Telangiectasis | ... | ... | ... | ... | 6 |
| Tenuicollis Cysts | ... | ... | ... | ... | 7 |
| Tuberculosis | ... | ... | ... | ... | 775 |
| | | | | | <hr/> |
| | | | | | 4,560 |
| | | | | | <hr/> |

**UN SOUND FOOD SURRENDERED AND DESTROYED
(NOT INCLUDING ABOVE)**

| | | | Tons | Cwts. | Qrs. | Lbs. | Ozs. |
|------------------------|-----|-----|-------|-------|-------|-------|-------|
| Cheese | ... | ... | — | 4 | 2 | 4 | 8 |
| Christmas Pudding | ... | ... | — | 3 | 2 | 6 | — |
| Fish (Tinned) | ... | ... | — | — | 5 | 27 | 7 |
| Fruit (Tinned) | ... | ... | 1 | 17 | — | 18 | 14 |
| Meat (Fresh) | ... | ... | — | 28 | — | 8 | 8 |
| Meat (Tinned) | ... | ... | — | 14 | — | 18 | 9 |
| Milk (Tinned) | ... | ... | — | 6 | — | 18 | — |
| Milk (Dried) | ... | ... | — | 6 | — | — | — |
| Rice (Tinned) | ... | ... | — | — | 6 | 17 | 13 |
| Soup (Tinned) | ... | ... | — | — | 2 | 25 | 11 |
| Vegetables (Tinned) | ... | ... | — | 6 | 3 | 7 | 8 |
| Yams | ... | ... | — | 11 | — | 8 | — |
| Miscellaneous | ... | ... | — | 12 | — | 22 | 8 |
| Miscellaneous (Tinned) | ... | ... | — | 5 | 3 | 8 | 8 |
| | | | <hr/> | <hr/> | <hr/> | <hr/> | <hr/> |
| | | | 6 | 19 | 1 | 23 | 14 |
| | | | <hr/> | <hr/> | <hr/> | <hr/> | <hr/> |

TABLE VII
FOOD AND DRUGS ACT, 1955

| Contravention | Action Taken |
|---|-------------------------------|
| | Legal Proceedings Instituted: |
| Pork Pie affected by Mould ... | £15 fine £3 5s. 0d. costs. |
| Foreign Body in Biscuit ... | £5 fine £4 costs. |
| Apple Tart affected by Mould ... | £10 fine £3 5s. 0d. costs. |
| Ground Almonds infested with Larder Beetle ... | £10 fine. |
| Unfit Food exposed for Sale ... | £80 fine £5 5s. 0d. costs. |
| Pork Pie affected by Mould ... | £5 fine £3 5s. 0d. costs. |
| Chocolate affected by Cocoa Bean Moth ... | £5 fine £3 5s. 0d. costs. |
| Foreign Body in Bread ... | £10 fine £3 5s. 0d. costs. |
| Cake affected by Mould ... | £10 fine £3 5s. 0d. costs. |
| Foreign Body in Corned Beef ... | £5 fine £3 5s. 0d. costs. |
| Food infested by Beetle ... | £10 fine. |

FOOD HYGIENE (GENERAL) REGULATIONS, 1960

| Contravention: | Action Taken |
|---|---|
| | Legal Proceedings Instituted: |
| Contravention of Reg. 30 ... | £5 fine £5 5s. 0d. costs. |
| Contravention of Reg. 9 (e) ... | £5 fine £3 3s. 0d. costs. |
| Contravention (Four) of Reg. 23(1) ... | £10 fine in respect of each Con- travention—total £80. |
| Contravention of Reg. 23(2) ... | |
| Contravention of Reg. 24... .. | |
| Contravention of Reg. 6... .. | |
| Contravention of Reg. 14... .. | |
| Contravention (Two) of Reg. 23(1) ... | £2 fine in each case—total £4. |

TABLE VIII
SUMMARY OF ARTICLES OF FOOD AND DRUGS
SUBMITTED TO THE PUBLIC ANALYST AND THE
RESULTS OF THE ANALYSES

| Articles Analysed | Total Samples | Genuine | Not Genuine |
|----------------------|------------------|---------|----------------|
| Hot Mango Pickle ... | 1 | — | 1 |
| Curry and Beans ... | 2 | 2 | — |
| Cooking Oil ... | 1 | 1 | — |
| Yoghourt ... | 1 | 1 | — |
| Orange Drink ... | 7 | 7 | — |
| Jersey T.T. Milk ... | 1 | 1 | — |

| Articles Analysed | Total Samples | Genuine | Not Genuine |
|-------------------------------|------------------|---------|----------------|
| Evaporated Milk | 5 | 4 | 1 |
| Cream | 3 | 3 | — |
| Chicken | 1 | 1 | — |
| Malt Vinegar | 3 | 3 | — |
| Non-Brewed Condiment ... | 1 | 1 | — |
| Flavoured Milk Drink ... | 1 | 1 | — |
| Lemonade Drink | 1 | 1 | — |
| Grapefruit Drink | 1 | 1 | — |
| Stewed Steak | 2 | 1 | 1 |
| Butter | 2 | 2 | — |
| Indian Brandee | 1 | 1 | — |
| Pork Sausage | 3 | 3 | — |
| Toffee Apple Mixture ... | 1 | 1 | — |
| Pork Pie | 2 | — | 2 |
| Cake Mix | 1 | 1 | — |
| Bone and Vegetable Broth ... | 1 | 1 | — |
| Hamburgers with Gravy... | 2 | 2 | — |
| Jam | 5 | 5 | — |
| Crispbread | 1 | 1 | — |
| Apple Tart | 1 | 1 | — |
| Instant Coffee | 2 | 2 | — |
| Creamed Mushrooms | 1 | 1 | — |
| Hot Dog Relish | 1 | 1 | — |
| Ice Cream | 6 | 6 | — |
| Pasteurised Milk | 2 | 2 | — |
| Cough Elixir | 2 | 2 | — |
| Gargle | 2 | 2 | — |
| Calamine Lotion | 1 | 1 | — |
| Rum and Butter Toffee ... | 1 | 1 | — |
| Cream Sponge | 1 | 1 | — |
| Home Bread Mix | 1 | 1 | — |
| Creamed Rice Pudding ... | 3 | 2 | 1 |
| Baby Rice | 1 | 1 | — |
| Steak and Kidney Pudding ... | 2 | 2 | — |
| Jiffi-Jelli | 1 | 1 | — |
| Walnut Whip | 1 | — | 1 |
| Runner Beans | 1 | 1 | — |
| Fruit Salad | 1 | 1 | — |
| Beef Steak and Vegetables ... | 1 | 1 | — |
| Pork Savoury Crisps | 1 | — | 1 |
| Tinned Butter | 1 | — | 1 |
| Bread | 3 | — | 3 |
| Minced Beef Loaf | 2 | 2 | — |
| Angel Cake | 2 | — | 2 |
| Onion Sauce | 1 | 1 | — |
| Corned Beef | 2 | — | 2 |
| Lozenges | 1 | 1 | — |
| Strength Tablets | 1 | 1 | — |
| Beer | 5 | 5 | — |
| Orange Tablets | 1 | 1 | — |

| Articles Analysed | Total Samples | Genuine | Not Genuine |
|---------------------------------|------------------|----------|----------------|
| Fish Paste | 1 | 1 | — |
| Cocktail Sausages | 1 | 1 | — |
| Lamb and Liver Baby Food | 1 | 1 | — |
| Rhubarb | 1 | 1 | — |
| Margarine | 1 | 1 | — |
| Ham | 1 | 1 | — |
| Chocolate Whisky | 1 | 1 | — |
| Crab Paste | 1 | 1 | — |
| Mussels | 1 | 1 | — |
| Beefburgers | 1 | 1 | — |
| Chicken Broth | 1 | 1 | — |
| Irish Stew | 1 | 1 | — |
| Boneless Chicken | 1 | 1 | — |
| | <hr/> 115 | <hr/> 99 | <hr/> 16 |

The articles reported as being not genuine, were dealt with either by the institution of legal proceedings, or the issuing of warning letters.

TABLE IX

RENT ACT, 1957:

RENT RESTRICTION REGULATIONS, 1957:

- (1) No. of applications received for certificate of disrepair 13
- (2) No. of Form J's served (Notice by local authority to landlord of proposal to issue a certificate of disrepair) 8
- (3) No. of Form K's received (Undertaking by landlord to remedy defects proposed to be included in certificate of disrepair) 5
- (4) No. of Form L's issued (Certificates of Disrepair) 4
- (5) No. of Form L's cancelled 3
- (6) No. of Form P's issued (Certificates as to remedying of defects):
 - (a) To Landlord —
 - (b) To tenant 1

WATER SUPPLY:

The Town's water is supplied by the South Staffordshire Waterworks Company and has been satisfactorily maintained both in quality

and quantity. I give below the result of an analysis of a representative sample of the water taken during the year:—

Water taken from kitchen tap at 155, Windmill Lane, Smethwick.

| | |
|--|------------------------------|
| Appearance | Bright, few small particles. |
| Ammoniacal Nitrogen | 0 |
| Albuminoid Nitrogen | 0 |
| Chlorine in Chlorides | 41.5 |
| Nitrate Nitrogen | 5.6 |
| Oxygen absorbed from) permanganate at 27°C. in 4 hours) | 0.5 |
| Total Solids dried at 100°C. ... | 295 |
| Nitrite Nitrogen | 0 |
| pH | 6.95 |
| Free Chlorine | 0 |
| Radioactivity | — |
| Electrical Conductivity @ 20°C ... | 386 micrombos |

The above results show that this water is of good quality and, subject to a satisfactory bacteriological analysis, suitable for use for drinking purposes.

Signed Bostock Hill & Rigby, Public Analysts.

| Senders Ref. No. | Lab. Ref. No. | Source | Probable number per 100 ml. | | Total Count per ml. at 37°C. |
|---------------------|------------------|---|--------------------------------|------------------------|---------------------------------------|
| | | | Coliform bacilli | Bact. coli (type 1) | |
| 25/63 | G.9119 | Kitchen tap @ 155, Windmill Lane, Smethwick | Nil | Nil | 0 |

In addition the Company regularly make bacteriological and chemical analyses of the water both prior to treatment and going into supply.

All houses in the Borough, i.e., an estimated total of 22,193 with an estimated population of 68,372 are supplied with water from public water mains.

SEWERAGE:

The whole of the Borough is sewered, with the more modern areas served by the separate system and the older parts of the town on the combined system. The Council is undertaking extensive re-development in the older areas and during such redevelopment the opportunity is being taken of converting the combined system to separate systems. In addition, the Council is undertaking extensive works in the centre of the town to obviate flooding during times of storm.

COMMON LODGING HOUSES:

There are no registered common lodging houses in the town.

CLEAN AIR ACT, 1956—SECTION 3—SUB-SECTION 3:

Twelve notifications of intention to install new furnaces were dealt with during the year. All proposals were carefully checked to ensure that the furnaces should be, as far as practicable, smokeless.

TABLE X

HOUSES IN MULTIPLE OCCUPATION:

| | | | | | |
|--|-----|-----|-----|-----|-------|
| Number of visits during the year | ... | ... | ... | ... | 1,647 |
| Number of Notices served: | | | | | |
| Section 90, Housing Act, 1957 | ... | ... | ... | ... | 75 |
| Section 12, Housing Act, 1961 (Notice of Intention to make a Management Order) | ... | ... | ... | ... | 16 |
| Management Orders | ... | ... | ... | ... | 7 |
| Section 14, Housing Act, 1961 (Notices requiring works to make good neglect of proper standards of Management) | ... | ... | ... | ... | 5 |
| Section 15, Housing Act, 1961 | ... | ... | ... | ... | 64 |
| Section 16, Housing Act, 1961 | ... | ... | ... | ... | 78 |
| Section 19, Housing Act, 1961 (Notice of Intention to make Directions) | ... | ... | ... | ... | 83 |
| Directions given | ... | ... | ... | ... | 86 |
| Cases of Overcrowding abated after service of Notices: | ... | ... | ... | ... | 72 |
| Cases of Overcrowding abated after Court Action: | ... | ... | ... | ... | 14 |

LEGAL PROCEEDINGS:

During the year, proceedings were instituted in respect of 14 cases of contravention of Section 90 of the Housing Act, 1957. Convictions were recorded in all cases and fines and costs totalling £100 were imposed.

FACTORIES ACTS, 1961 — PART 1.

1. INSPECTIONS OF FACTORIES INCLUDING INSPECTIONS MADE BY PUBLIC HEALTH INSPECTORS.

| PREMISES | Number on Register | Number of | | |
|---|--------------------------|-------------|--------------------|-------------------------|
| | | Inspections | Written Notices | Occupiers Prosecuted |
| (i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities | 9 | — | — | — |
| (ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority | 264 | 8 | — | — |
| (iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ... | — | — | — | — |
| TOTAL | 273 | 8 | — | — |

2. CASES IN WHICH DEFECTS WERE FOUND

| PARTICULARS | Number of cases in which defects were found | | | | Number of cases in which prosecutions were instituted |
|--|---|----------|-------------------|-------------------|---|
| | Found | Remedied | To H.M. Inspector | By H.M. Inspector | |
| Want of Cleanliness (S.1) | — | — | — | — | — |
| Overcrowding (S.2) | — | — | — | — | — |
| Unreasonable Temperature (S.3) | — | — | — | — | — |
| Inadequate ventilation (S.4) | — | — | — | — | — |
| Ineffective drainage of floors (S.6) | — | — | — | — | — |
| Sanitary conveniences (S.7): | | | | | |
| (a) insufficient | — | — | — | 1 | — |
| (b) unsuitable or defective | 4 | 2 | — | 1 | — |
| (c) not separate for sexes | — | — | — | — | — |
| Other offences against the Act (not including offences relating to outwork) | — | — | — | — | — |
| TOTAL | 4 | 2 | — | 2 | — |

FACTORIES ACTS, 1961 — PART VIII.

OUTWORK

Sections 133 and 134

| NATURE OF WORK | SECTION 133 | | | SECTION 134 | | |
|--|---|---|---|--|----------------|--------------|
| | No. of out-workers in August list required by Section 110 (1) (c) | No. of cases of default in sending lists to the Council | No. of prosecutions for failure to supply lists | No. of instances of work in unwholesome premises | Notices Served | Prosecutions |
| WEARING APPAREL: | | | | | | |
| Making, etc., Cleaning and Washing | 7 | — | — | — | — | — |
| The making of boxes or other receptacles or parts thereof made wholly or partially of paper | 2 | — | — | — | — | — |
| Carding, etc., of buttons, etc. | 188 | — | — | — | — | — |
| TOTAL | 197 | — | — | — | — | — |

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