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**Contributors**

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BOROUGH



SWINDON

of

# **Annual Report**

of the

## **Medical Officer of Health**

**FOR THE YEAR 1952**

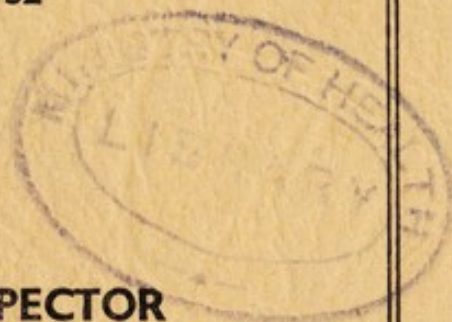
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Report of the  
**CHIEF SANITARY INSPECTOR**  
**FOR THE YEAR 1952**


Report of the  
**SCHOOL MEDICAL OFFICER**  
**FOR THE YEAR 1952**

Report on the  
**SCHOOL DENTAL SERVICES**  
**FOR THE YEAR 1952**

Copy of Report of the  
**AREA MEDICAL OFFICER**  
**FOR THE YEAR 1952**







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**BOROUGH OF SWINDON**  
**COMPOSITION OF COMMITTEE AND STAFF**  
**as at 31st December, 1952.**

**HEALTH AND WELFARE COMMITTEE**

HIS WORSHIP THE MAYOR (Alderman ALBERT EDWARD LONG)

**Chairman:** Alderman N. V. TOZE

**Vice-Chairman:** Councillor W. J. DAVIS.

**MEMBERS:**

Alderman	Miss E. C. MILLIN	Councillor	Mrs. L. A. GRIFFIN
"	M. WEBB	"	R. S. J. HONEY
Councillor	R. S. C. ALEXANDER	"	R. A. JONES
"	A. T. E. BECK	"	Mrs. L. R. LOCK
"	W. T. G. BENNELL	"	L. C. MOBEY
"	A. M. BENNETT	"	L. J. NEWMAN
"	F. E. BISHOP	"	Mrs. E. M. SIMPKINS
"	J. GRETTY	"	R. E. WHITE

**TOWN CLERK**

D. MURRAY JOHN, Esq., O.B.E., B.A.

**PUBLIC HEALTH STAFF**

**31st December, 1952**

Medical Officer of Health	-	JAMES URQUHART, M.B., Ch.B., D.P.H.
Deputy Medical Officer of Health	-	W. B. A. SMYTH, M.B., Ch.B., D.P.H.
Assistant Medical Officer of Health	-	S. B. S. SMITH, L.M.S.S.A., D.T.M. & H.
Senior Sanitary Inspector	-	H. A. BANWELL, C.R.S.I., M.S.I.A., C.M. & F.I.
Senior Additional Sanitary Inspector	-	R. A. LAW, C.R.S.I.
Additional Sanitary Inspectors	-	P. M. DALE, C.R.S.I. J. M. A. FABEL, C.R.S.I. E. W. KNOWLES, C.R.S.I. A. E. WARMINGER, C.R.S.I.
Dental Surgeon	-	Mrs. J. M. BENSON
Senior Health Visitor and School Nurse	-	Miss W. R. BURROWS



Health Visitors and School  
Nurses - - -

Mrs. B. E. BELL  
Mrs. E. A. BUTT  
Miss A. H. HAWKINS  
Miss W. PARKINS  
Miss C. J. THORN  
Mrs. J. D. WALL

Domiciliary Midwives -

Mrs. V. K. D. ARNOLD  
Mrs. M. E. CURTIS  
Mrs. M. DUTTON  
Miss M. McHUGH  
Mrs. H. M. MORTIMORE  
Miss N. NEAL

Matron, Day Nurseries -

Mrs. A. DAVIES, S. R.N.

Administrative Assistant -

J. W. DAY

Senior Clerks - -

J. R. PELL  
Miss L. M. RAWLINGS

Assistant Clerks -

A. H. BUTLER  
P. A. HOLMES  
F. C. MOSS  
W. H. PAUL  
T. C. POPE (H.M. Forces)  
Mrs. E. E. C. FURLEY  
Miss J. H. HARWOOD  
Miss A. LAWRENCE  
Miss P. A. MOLDEN  
Mrs. J. PEYTON  
Mrs. E. M. ROBINSON  
Mrs. V. M. VOCKINGS

Dental Attendant - -

Miss J. M. MITCHELL

Disinfector - -

A. C. MOLE

Rodent Operators - -

H. SNELL  
K. J. PEARCE



**ANNUAL REPORT**  
**of the**  
**MEDICAL OFFICER OF HEALTH (1952).**

**To the Mayor, Aldermen and Councillors of the  
Borough of Swindon.**

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the work of the Health Department for the year 1952.

The report has been prepared on the lines suggested by the Ministry of Health circular 170/47.

Dr. A. H. Griffith, Deputy Medical Officer of Health, left on 3rd January, 1952, to take up his new appointment as Medical Officer of Health to the Wantage and Wallingford District Councils. His place was taken by Dr. W. B. A. Smyth, who took up duty on 1st April, 1952.

As in previous years, I am indebted to Dr. J. Burman Lowe, County Medical Officer, Wiltshire County Council, for his permission to append the Area report for your information. By incorporating the Area report and the report on the work of the School Health Service in one volume with the report on the function of the Department as a Local Sanitary Authority, you will, I trust, get a more integrated picture of the health of the Borough.

Proposals for the expansion of the Borough are going ahead, and the new housing development at Penhill is proceeding apace. Such expansion necessitates the reorganisation of many of the services provided by the department, but so far, the present staff has been able to cope with these changes. It is inevitable, however, that if expansion does continue, additional staff will have to be recruited.

The new Government slaughterhouse in Ladder Lane was completed towards the end of the year, but did not start functioning. From viewing the workings of somewhat similar establishments, it is anticipated that many points of criticism will arise when slaughtering does start here. It is obvious, too, that as the scale of slaughtering will be greatly increased to supply the needs of Swindon and the surrounding district (a population of some 120,000), additional meat inspection staff will be necessary. Negotiations on this point are already in hand.

It will be seen from the various statistical tables and graphs in this report that Swindon can, with justification, claim to be a healthy town. When one looks at the well laid out housing schemes at Moredon and Penhill, one sees that people there are living in an environment which is conducive to good health. On the other hand, there are a great number of sub-standard dwellings in the town which



are deteriorating and are prejudicial to the good health of the inhabitants. If, therefore, the town is to retain its health reputation, a progressive policy for the elimination of sub-standard houses will have to be vigorously pursued.

I would like to express my thanks to the staff of the Health Department for their loyalty and co-operation throughout the year, and to my colleagues in other departments who have always given so freely of their services.

I am,

Your obedient servant,

JAMES URQUHART,

Medical Officer of Health.

CIVIC OFFICES,  
SWINDON.

## WATER SUPPLIES.

The Borough water supplies continue to be satisfactory in quality and quantity.

Twenty-nine bacteriological and five chemical analyses from various dwelling houses proved to be entirely satisfactory.

One bacteriological and one chemical sample were not entirely satisfactory, but after flushing of the mains, follow-up samples were found to be entirely satisfactory.

Two bacteriological samples taken from private wells were unsatisfactory. The wells were closed and the houses connected to the public supply.

Some 20,538 houses with a population of 68,800 have water laid on from the public mains.

Twenty-seven dwellings, housing eighty-one people, are supplied from stand-pipes, and a further fourteen dwellings, housing forty-nine people, are not connected to the public supply.



**EXTRACTS FROM VITAL STATISTICS—1952.**

Area of the Borough (acres)	-	-	-	6,361
Estimated total population mid-year 1952	-	-	-	68,850
Live Births—Legitimate	-	-	-	987
Illegitimate	-	-	-	62
				<hr/>
Total	-	-	-	1,049
				<hr/>
Live birth rate per 1,000 population	-	-	-	15.2
Still birth rate per 1,000 population	-	-	-	0.33
Stillbirths	-	-	-	23
Stillbirths rate per 1,000 total births	-	-	-	21.45
Deaths at all ages—Males	-	-	-	415
Females	-	-	-	340
				<hr/>
Total	-	-	-	755
				<hr/>
Death rate per 1,000 population	-	-	-	10.96
Deaths from Cancer	-	-	-	131
Deaths from Respiratory Diseases	-	-	-	75
Deaths from Pulmonary Tuberculosis	-	-	-	13
Deaths from Influenza	-	-	-	2
Deaths from vascular and heart diseases	-	-	-	245
Deaths from infective and parasitic diseases	-	-	-	3
Deaths from all other causes	-	-	-	286
Deaths of infants under the age of 1 year	-	-	-	17

**GENERAL STATISTICS AND SOCIAL CONDITIONS**

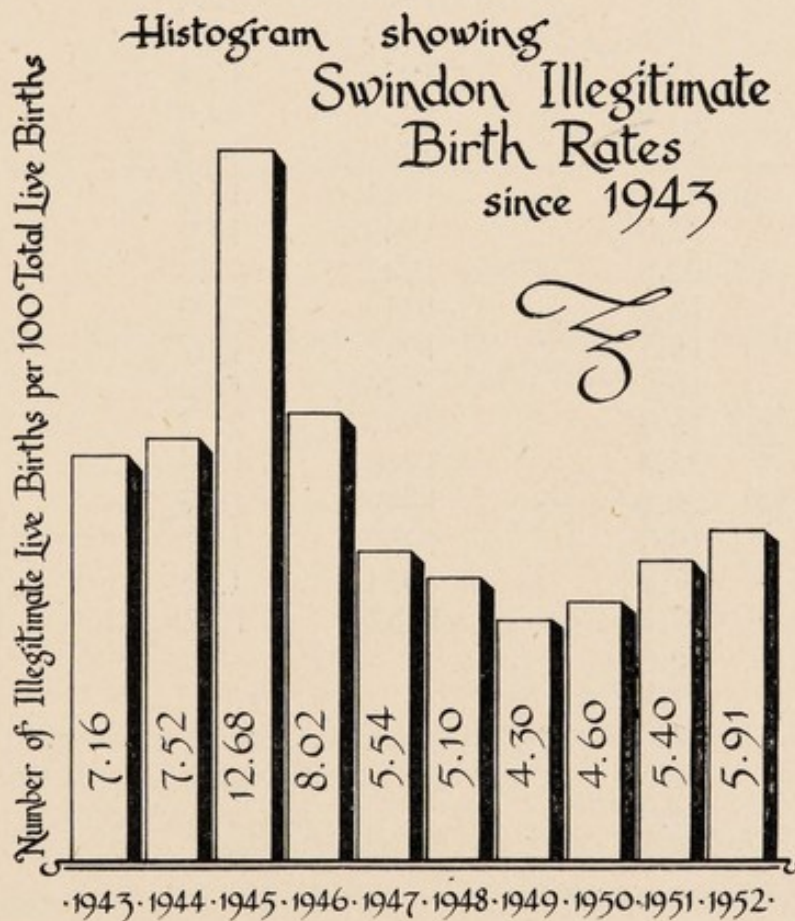
The population of the Borough of Swindon in 1901 was 50,771. At the 1931 census it was 62,407. The 1952 mid-year estimated population of Swindon was 68,850, but the actual population at the 1951 census was 68,932.

## BIRTHS AND BIRTH RATES

The following table gives the number of legitimate and illegitimate live births in Swindon during 1951 and 1952.

	1951			1952		
	MALES	FEMALES	TOTAL	MALES	FEMALES	TOTAL
Legitimate -	523	494	1,017	501	486	987
Illegitimate -	33	21	54	28	34	62
TOTALS -	556	515	1,071	529	520	1,049

The illegitimate births formed 5.9% of the total live births in Swindon during 1952 and 5.4% during 1951.



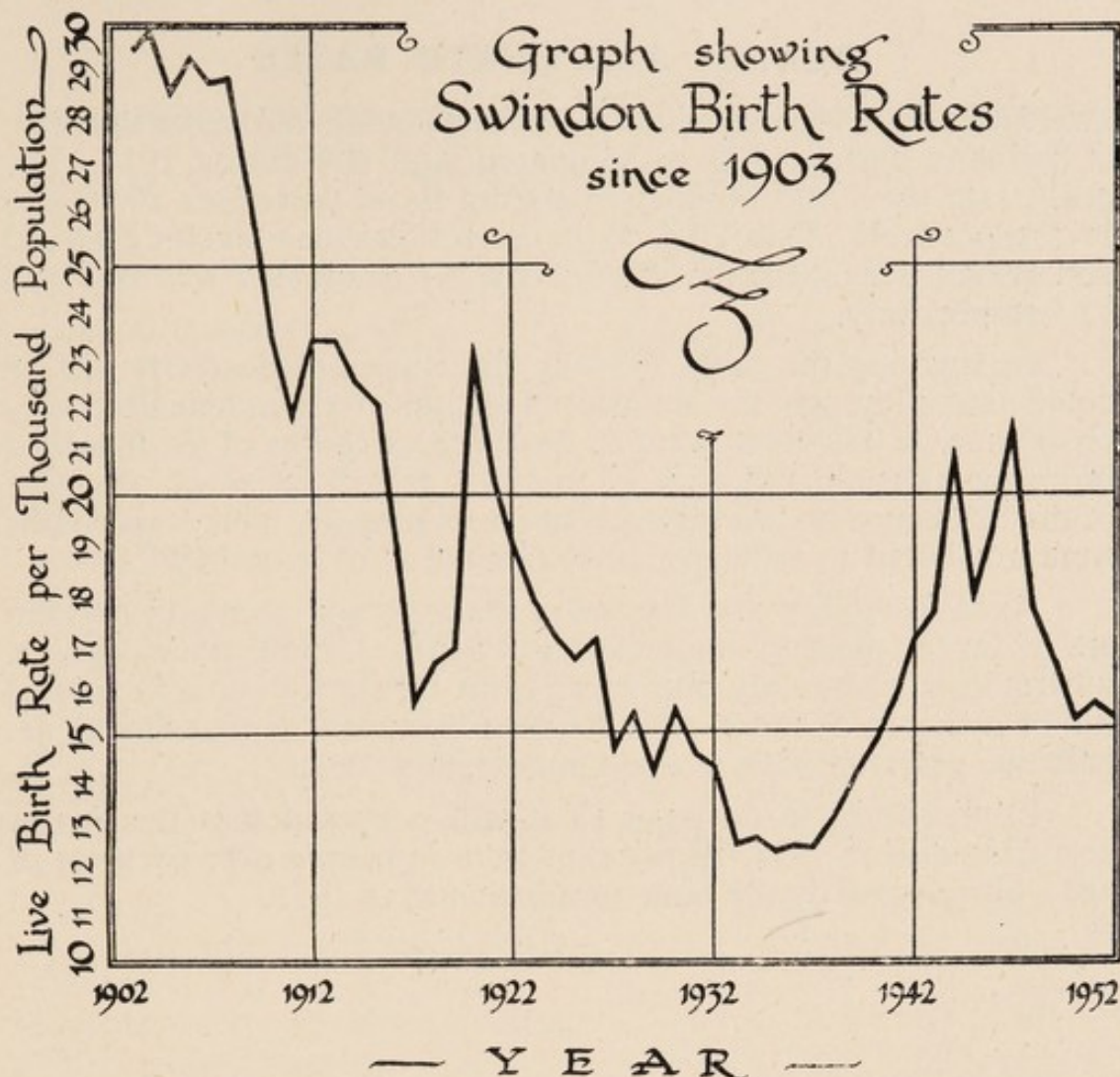


The Swindon live birth rate per 1,000 population was 15.2 during 1952 as compared with 15.6 during 1951.

The trend in birth rates in Swindon since 1903 is illustrated by the following table and graph:—

**TABLE SHOWING SWINDON LIVE BIRTH RATES FROM 1903 to 1952, with COMPARATIVE LIVE BIRTH RATES FOR ENGLAND AND WALES SINCE 1931:—**

Year	Swindon Birth Rate	Year	Swindon Birth Rate	England & Wales Birth Rate
1903	29.5	1931	14.5	15.8
1904	30.0	1932	14.3	15.3
1905	28.4	1933	12.5	14.4
1906	29.4	1934	12.7	14.8
1907	28.8	1935	12.3	14.7
1908	28.9	1936	12.4	14.8
1909	26.5	1937	12.4	14.9
1910	23.4	1938	13.1	15.1
1911	21.6	1939	14.0	15.0
1912	23.4	1940	14.8	14.6
1913	23.4	1941	15.8	13.9
1914	22.5	1942	17.0	15.6
1915	22.0	1943	17.6	16.2
1916	18.9	1944	21.0	17.7
1917	15.5	1945	17.7	15.9
1918	16.5	1946	19.2	19.2
1919	16.9	1947	21.7	20.5
1920	23.3	1948	17.6	17.9
1921	20.3	1949	16.3	16.7
1922	19.0	1950	15.1	15.8
1923	17.8	1951	15.6	15.5
1924	17.1	1952	15.2	15.3
1925	16.6			
1926	17.1			
1927	14.5			
1928	15.6			
1929	14.0			
1930	15.7			



Stillbirths numbered 23 in Swindon during 1952 compared with 21 during 1951. They were made up as follows:—

	1952			1951		
	MALES	FEMALES	TOTAL	MALES	FEMALES	TOTAL
Legitimate -	7	14	21	9	11	20
Illegitimate -	1	1	2	1	—	1
TOTALS -	8	15	23	10	11	21

The stillbirth rates per 1,000 population for the last five years in Swindon and England and Wales are:—

YEAR	STILLBIRTH RATE PER 1000 POPULATION	
	Swindon	England & Wales
1948	0.34	0.42
1949	0.17	0.39
1950	0.45	0.37
1951	0.30	0.36
1952	0.33	0.35



## DEATHS AND DEATH RATES

There were 755 deaths from all causes attributed to the Borough of Swindon during 1952, as compared with 909 during 1951. The death rate per 1,000 population during those years was 10.96 and 13.2 respectively. This fall in death rate follows the trend for England and Wales, where, for the same years, the death rate was 11.3 and 12.5 respectively.

In studying the table showing the causes of death, it will be noted that although the number of deaths from practically every other cause is less, there were 27 deaths from cancer of the lung and bronchus as compared with 17 in 1951. It will be noted, too, that of the 27 deaths, no less than 23 occurred in males. Only two deaths were attributed to influenza as compared with 21 in 1951.

As in previous years, diseases of the heart and circulatory system are by far the most common causes of death. Of infectious diseases, tuberculosis is the only one which with regularity takes its annual toll of lives. In Swindon we have been fortunate in that during the past two years we have escaped poliomyelitis deaths.

From the table on page 13 it will be noted that the deaths occurring during 1952, 72 per cent were in people over 65 years of age—almost exactly the same proportion as in 1951.

**AN ANALYSIS OF THE CAUSE OF DEATH IN SWINDON  
during 1952 and 1951.**

Cause of Death				1952		1951	
				Males	Females	Total	Total
Tuberculosis respiratory	-	-	-	10	3	13	18
Tuberculosis other	-	-	-	1	1	2	2
Syphilitic disease	-	-	-	—	—	—	3
Diphtheria	-	-	-	—	—	—	—
Whooping Cough	-	-	-	—	—	—	1
Meningococcal infections	-	-	-	—	—	—	—
Acute Poliomyelitis	-	-	-	—	—	—	—
Measles	-	-	-	—	—	—	1
Other infective and parasitic diseases	-	-	-	1	2	3	2
Malignant Neoplasm, Stomach	-	-	-	8	7	15	19
Malignant Neoplasm, Lung, Bronchus	-	-	-	23	4	27	17
Malignant Neoplasm, Breast	-	-	-	—	11	11	14
Malignant Neoplasm, Uterus	-	-	-	—	9	9	3
Other malignant and lymphatic neoplasms	-	-	-	40	29	69	68
Leukaemia, aleukaemia	-	-	-	3	2	5	2
Diabetes	-	-	-	1	3	4	5
Vascular lesions of nervous system	-	-	-	42	51	93	114
Coronary disease, Angina	-	-	-	51	29	80	70
Hypertension with Heart disease	-	-	-	8	9	17	39
Other Heart diseases	-	-	-	81	67	148	174
Other Circulatory diseases	-	-	-	17	12	29	32
Influenza	-	-	-	2	—	2	21
Bronchitis	-	-	-	14	14	28	54
Pneumonia	-	-	-	19	19	38	44
Other diseases of Respiratory system	-	-	-	6	3	9	14
Ulcer of Stomach and Duodenum	-	-	-	7	—	7	15
Gastritis, Enteritis and Diarrhoea	-	-	-	2	1	3	3
Nephritis and Nephrosis	-	-	-	7	9	16	9
Hyperplasia of Prostate	-	-	-	11	—	11	9
Pregnancy, Childbirth, Abortion	-	-	-	—	2	2	2
Congenital malformations	-	-	-	5	3	8	4
Other defined and ill-defined diseases	-	-	-	42	46	88	120
Motor vehicle accidents	-	-	-	6	—	6	11
Other accidents	-	-	-	6	2	8	11
Suicide	-	-	-	2	2	4	8
Homicide and Operations of war	-	-	-	—	—	—	—
<b>TOTALS</b>				<b>415</b>	<b>340</b>	<b>755</b>	<b>909</b>



The following tables give the death rates per thousand population from various causes, in Swindon and England and Wales during 1952:—

CAUSE OF DEATH	DEATH RATE PER 1000 POPULATION	
	Swindon	England & Wales
All Causes - -	10.96	11.30
Tuberculosis - -	0.22	0.24
Influenza - -	0.03	0.04
Acute Poliomyelitis - -	0.00	0.01
Pneumonia - -	0.55	0.47

Deaths from Cancer and Malignant Neoplasms numbered 131 during 1952. During 1951 they numbered 121.

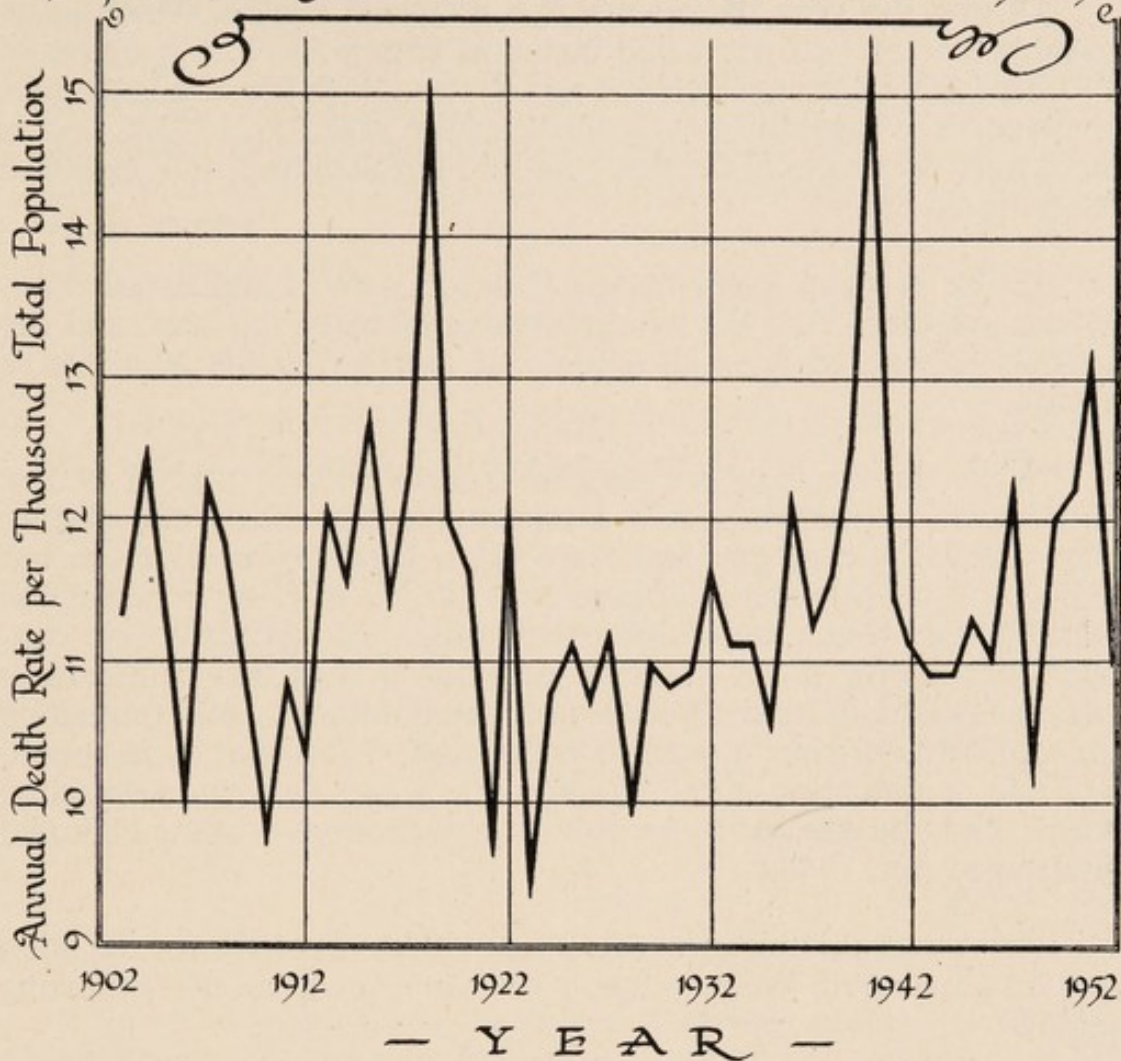
There were 367 deaths from circulatory, vascular and heart conditions usually associated with old age. 429 deaths occurred from this group of conditions during 1951.

**TABLE SHOWING SWINDON DEATH RATES FROM 1903 to 1952 with COMPARATIVE DEATH RATES OF ENGLAND AND WALES SINCE 1941**

Year	Death Rate Swindon	Year	Death Rate Swindon	Death Rate England & Wales
1903	11.3	1928	9.9	
1904	12.5	1929	11.0	
1905	11.2	1930	10.8	
1906	9.9	1931	10.9	
1907	12.3	1932	11.7	
1908	11.8	1933	11.1	
1909	10.8	1934	11.1	
1910	9.7	1935	10.5	
1911	10.9	1936	12.2	
1912	10.3	1937	11.2	
1913	12.1	1938	11.6	
1914	11.5	1939	12.5	
1915	12.8	1940	15.4	
1916	11.3	1941	11.4	13.5
1917	12.3	1942	11.1	12.3
1918	15.1	1943	10.9	13.0
1919	12.0	1944	10.9	12.7
1920	11.6	1945	11.3	12.6
1921	9.6	1946	11.0	12.0
1922	12.2	1947	12.3	12.0
1923	9.3	1948	10.1	10.8
1924	10.8	1949	12.0	11.7
1925	11.1	1950	12.2	11.6
1926	10.7	1951	13.2	12.5
1927	11.2	1952	10.96	11.3



Graph showing Swindon Death Rates since 1903



The number of deaths and the death rate per 1,000 population from the main causes of death are given in the following table:—

Year	Circulatory and Heart diseases		Respiratory diseases		Tuberculosis		Cancer	
	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000
1948	320	4.73	57	0.84	36	0.53	111	1.64
1949	387	5.66	97	1.42	29	0.42	132	1.91
1950	437	6.35	74	1.07	32	0.47	135	1.96
1951	429	6.25	112	1.63	20	0.29	121	1.76
1952	367	5.33	75	1.09	15	0.22	131	1.90

The ages at death of Swindon people are given in the following table:—

Year	0—1	1—5	5—15	15—45	45—65	Over 65	Total
1951	28	4	3	43	172	659	909
1952	17	3	4	38	159	534	755



## MATERNAL MORTALITY

During the year there were two maternal deaths, which gives a death rate of 1.87 per 1,000 births as compared with a figure of 0.72 per 1,000 births for England and Wales. With the small numbers involved, it is misleading to compare these rates, as, in fact, unless there were no maternal deaths, we could not achieve a rate less than the national one.

In the event of every maternal death, careful and detailed enquiries are made into the whole circumstances of the case, and the findings forwarded through a regional assessor to the Ministry of Health.

While the whole of the medical services do their utmost to care for women in childbirth, it is a regrettable fact that if the mother does not wish to co-operate, there is no legal power to force her to do so. For instance, if an expectant mother is living in bad home surroundings which we consider will prejudice against a safe confinement, or even if her physical condition is such that confinement at home will be dangerous, there is no legal authority for compelling the admission of such a woman to hospital. I feel that there should be some modification of the legislation to cover such an eventuality, which might be effected by an extension of Section 47 of the National Assistance Act, 1948.

The maternal mortality rates per 1,000 total births for Swindon and England and Wales since 1948 are shown in the following table:—

YEAR	MATERNAL DEATHS IN SWINDON	RATE PER 1000 TOTAL BIRTHS SWINDON	RATE PER 1000 TOTAL BIRTHS ENGLAND & WALES
1948	2	1.64	1.02
1949	2	1.77	0.98
1950	0	0	0.86
1951	2	1.83	0.79
1952	2	1.87	0.72

## INFANT MORTALITY.

17 infants under the age of one year died in Swindon during 1952, giving an Infant Mortality Rate of 16.2 per 1,000 live births. The corresponding number and rate for Swindon during 1951 were 28 and 26.14.



The causes of deaths in infants under one year of age during 1952 and 1951 were:—

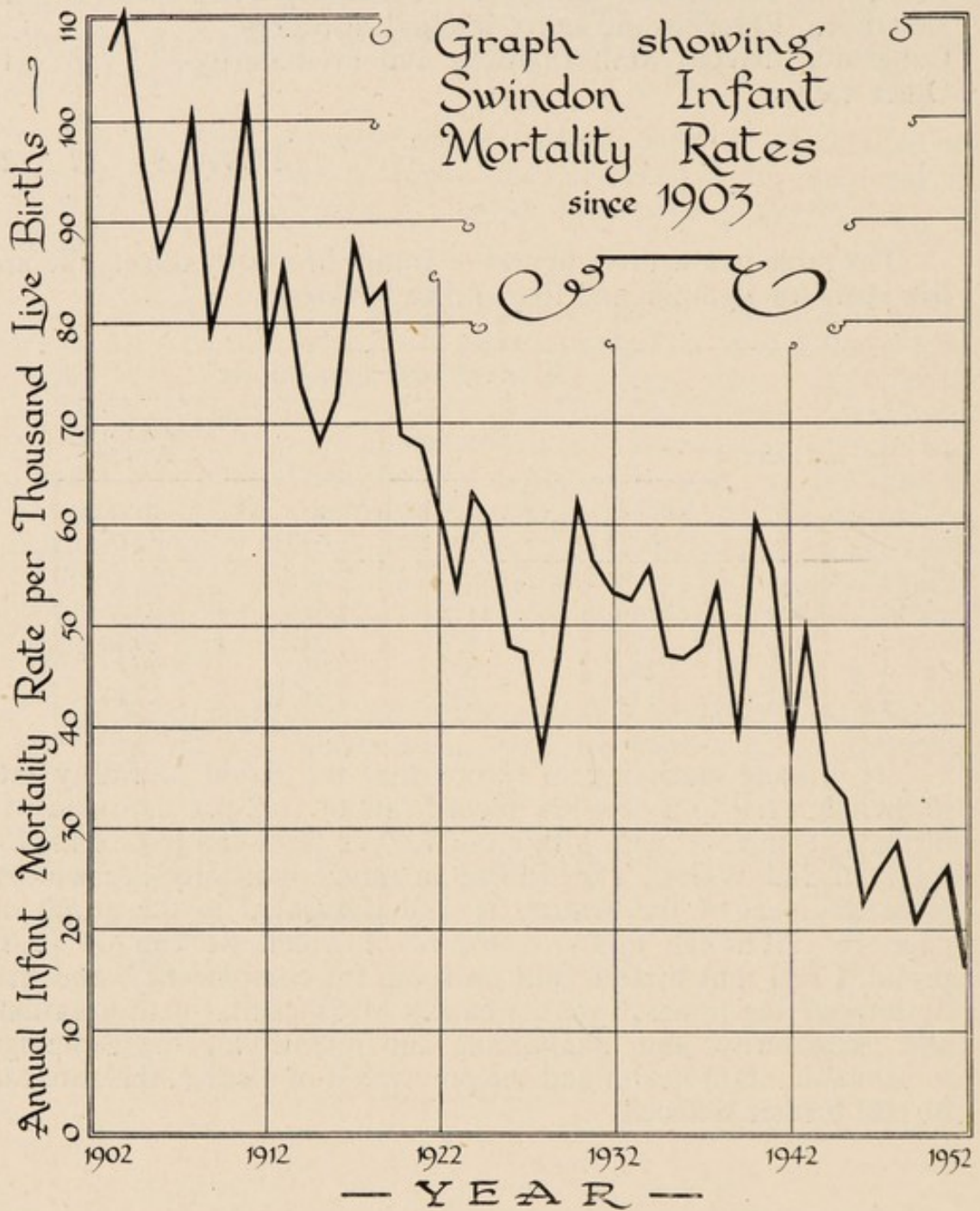
	1952	1951
Bronchitis, Pneumonia and other respiratory diseases	3	11
Diarrhoea, Enteritis and other internal disorders	-	1
Congenital defects, Malformations and Prematurity	8	11
Other causes	6	5
	—	—
TOTALS	17	28
	—	—

The table below gives figures of Infant Mortality during the last five years for Swindon and England and Wales.

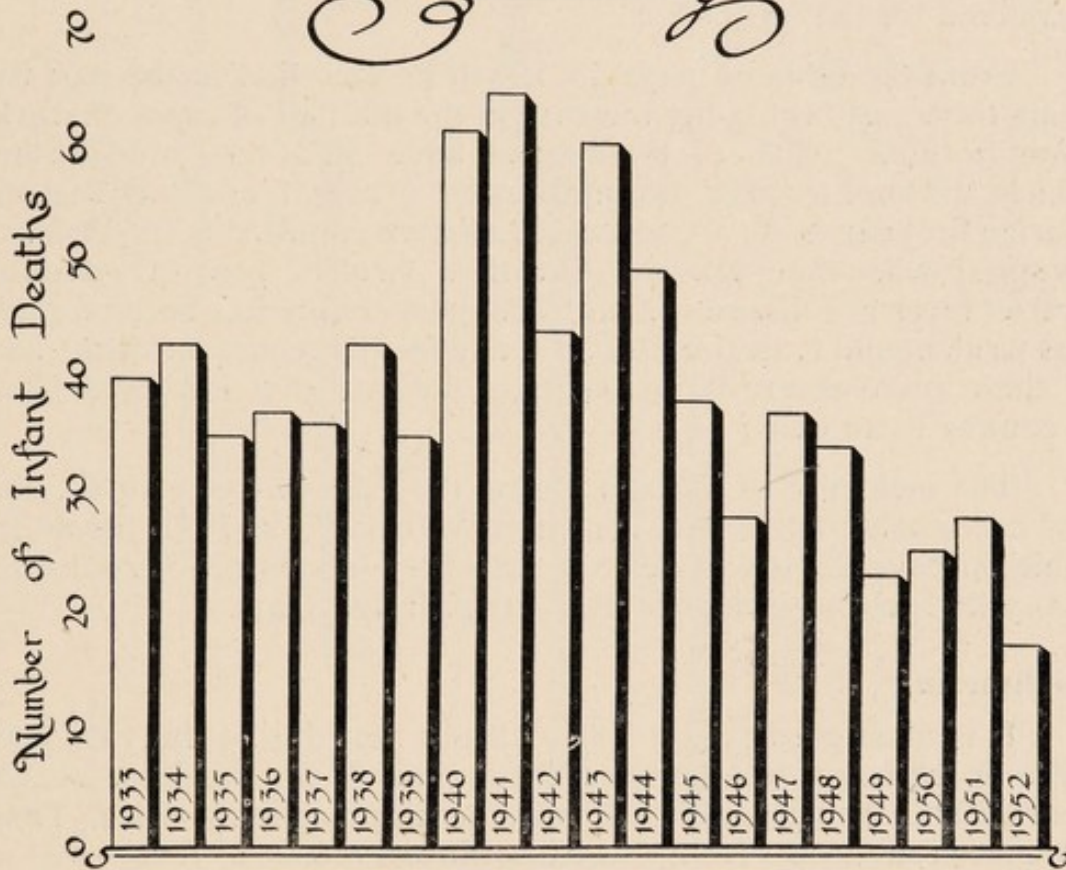
YEAR	RATE PER 1000 LIVE BIRTHS			
	Swindon			ENGLAND & WALES
	NEONATAL RATE	RATE-AGE 4 wks.-1 yr.	MORTALITY RATE	MORTALITY RATE
1948	14.2	14.2	28.4	34.0
1949	8.9	11.7	20.6	32.0
1950	17.3	6.7	24.0	29.8
1951	20.5	5.6	26.1	29.6
1952	11.4	4.8	16.2	27.6

It is most gratifying to record that the infant mortality rate in Swindon fell to a new low record rate of 16.2 per thousand live births as compared with a rate of 27.6 per thousand live births for England and Wales. The decline in infant mortality in Swindon since the start of the century is well illustrated in the graph on page 16. Although this is a record of which we can be justly proud, I feel that there is still no room for complacency, and that by intensifying research on the causes of congenital malformations and prematurity, and maintaining and intensifying the campaign to promote infant health and the prevention of disease, this rate can be still further reduced.





Histogram showing the Number of  
 Infant Deaths Annually  
 in Swindon since 1933





## INCIDENCE OF INFECTIOUS DISEASES

During the year there were no major epidemics, although in December the incidence of a mild form of influenza was assuming epidemic proportions. The weather during the last half of the year was cold and there was fog on many days. When such conditions prevail, colds and bronchitis are to be expected, and during such times I am convinced that many persons diagnosed as "influenza" are, in fact, suffering from the common cold. In conjunction with several of the general practitioners of the town, plans were made to have material from persons diagnosed as suffering from influenza examined for the virus.

From the table on page 23, it will be seen that in the past two years there has been a big increase in the number of cases of scarlet fever notified. Most of these cases were of a very mild nature, which did not require hospitalisation except for social reasons. During the year, however, several cases were admitted to the Isolation Hospital who were gravely ill with a virulent type of infection. Scarlet fever is a disease which in the past decade has become much less virulent and toxic, but its increasing incidence and the occurrence of these more severe infections may indicate that this mild phase is coming to an end.

The incidence of measles during the year was very small, only 242 cases being notified as compared with 1,173 in 1951. From the table on page 22, it will be seen that there has been a very definite two year cycle of incidence over the past five years.

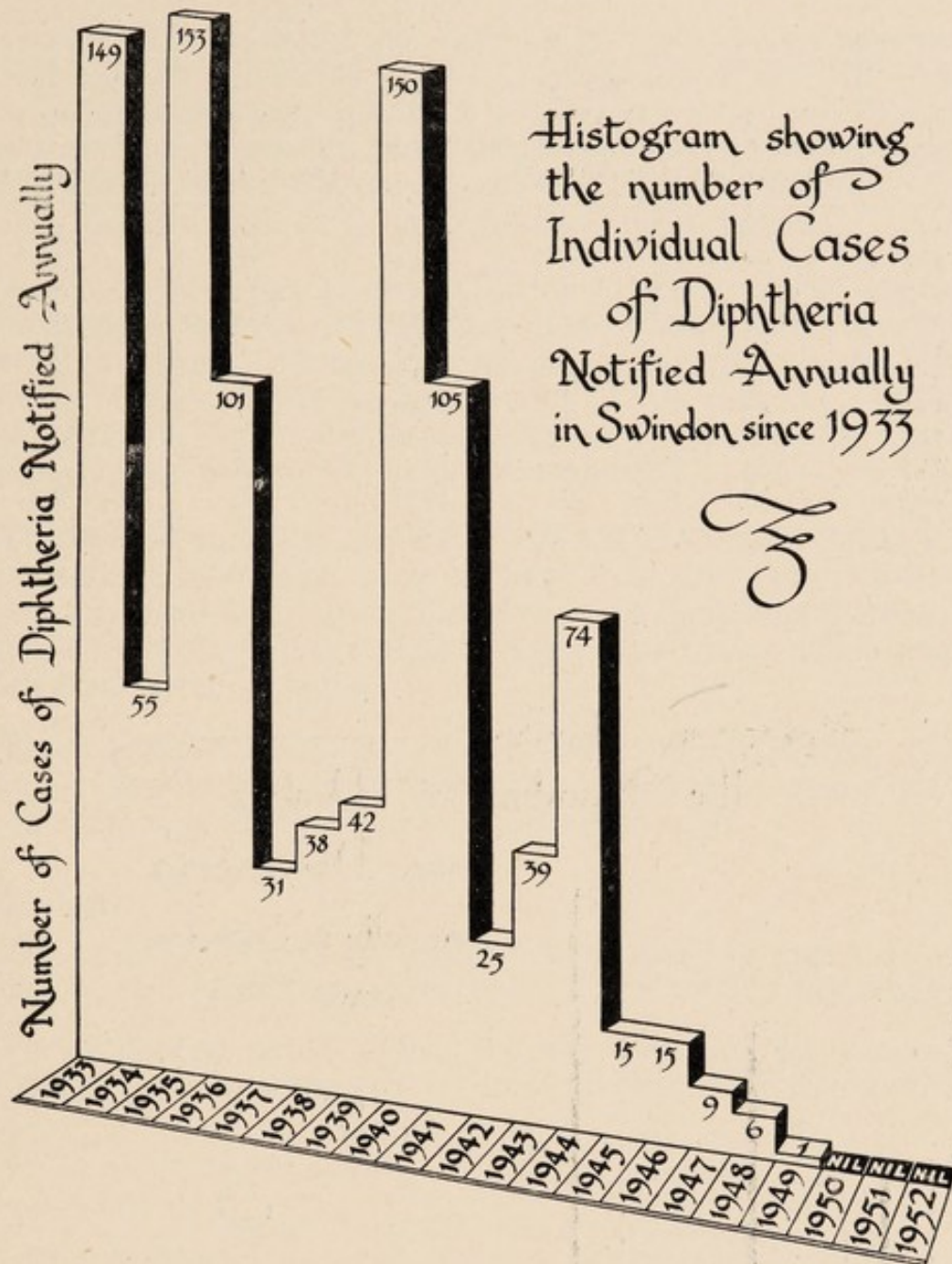
### **Diphtheria.**

It is most gratifying to report again that during the year there were no cases of diphtheria notified. This is the third consecutive year without a single case of diphtheria occurring in the town. There have been no deaths from this cause since 1944.

This most satisfactory position is one which can only be maintained by constantly impressing on the public that if the rate of immunisation falls, diphtheria can again become a menace to life, and, as these figures prove, an unnecessary one.

The following histogram and tables illustrate the incidence of diphtheria in Swindon during the past 20 years.

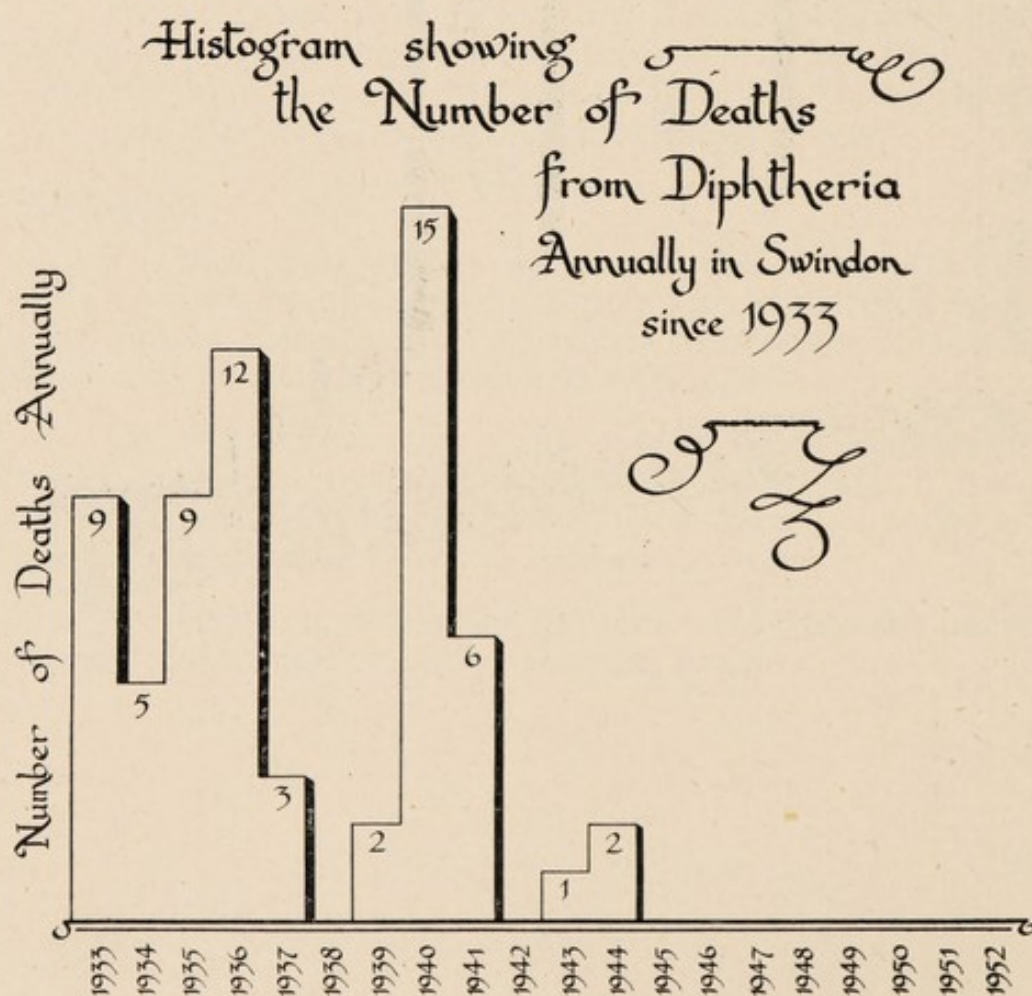






**TABLE GIVING THE INCIDENCE OF DIPHTHERIA IN SWINDON AND THE NUMBER OF DEATHS DURING THE LAST TWENTY YEARS.**

YEAR	NO. OF CASES OF DIPHTHERIA	NO. OF DEATHS FROM DIPHTHERIA	YEAR	NO. OF CASES OF DIPHTHERIA	NO. OF DEATHS FROM DIPHTHERIA
1933	149	9	1943	39	1
1934	55	5	1944	74	2
1935	153	9	1945	15	0
1936	101	12	1946	15	0
1937	31	3	1947	9	0
1938	38	0	1948	6	0
1939	42	2	1949	1	0
1940	150	15	1950	0	0
1941	105	6	1951	0	0
1942	25	0	1952	0	0





### Food Poisoning and Dysentery.

Only two individual cases of food poisoning were notified during the year.

One of the cases was a member of a party of 58 men who went on a day's coach trip to the seaside. 31 men out of the party complained of abdominal symptoms of a mild nature, but only one was notified as food poisoning. The suspected cause of the outbreak was fish served at tea. No food poisoning organism was recovered from the notified case or from the thirty others affected.

A report from the Medical Officer of Health of the town in question stated that an investigation there proved that there were no reported cases of illness in spite of the fact that many other customers of the cafe ate the same batch of fish that day. In fact, he suggested that the symptoms might have been due to other causes, as the party were reported to be in "high spirits."

The second case was that of a lady who had had a meal with some friends at their home some distance from Swindon. All those who ate this meal were affected, and the organism responsible was recovered from all of them. The article of food responsible was a meat dish prepared at home.

Three isolated cases of dysentery were notified during 1952. Thorough investigations were made in each of these cases, but in none of them was the infecting organism recovered.

### Tuberculosis.

During 1952, 49 primary cases of pulmonary tuberculosis and 13 cases of non-pulmonary tuberculosis were notified in Swindon.

The following table shows the age and sex incidence of pulmonary and non-pulmonary tuberculosis notified during 1952:—

AGE PERIOD	PULMONARY		NON-PULMONARY		TOTAL
	MALE	FEMALE	MALE	FEMALE	
Under 5	—	—	2	1	3
5—10	—	2	1	1	4
10—15	—	1	1	2	4
15—20	3	2	—	1	6
20—25	1	3	—	1	5
25—30	3	4	—	1	8
30—40	5	1	—	—	6
40—50	5	—	1	—	6
50—60	13	2	1	—	16
Over 60	2	2	—	—	4
TOTALS	32	17	6	7	62



Apart from the above notifications, 19 cases of tuberculosis in Swindon became known to the Health Department through death returns, posthumous notifications, transfers from other areas, etc. Of the deaths which occurred during 1952, 26.6% occurred in non-notified cases.

The comparative figures of the incidence and death rates from tuberculosis since 1948 are given below:—

YEAR	PULMONARY TUBERCULOSIS				ALL FORMS OF TUBERCULOSIS			
	Primary cases notified	Case rate per 1000 popn.	Deaths	Death rate per 1000 popn.	Cases notified	Case rate per 1000 popn.	Deaths	Death rate per 1000 popn.
1948	78	1.15	30	.44	113	1.67	36	.53
1949	101	1.47	27	.39	120	1.75	29	.42
1950	84	1.22	31	.45	106	1.54	32	.46
1951	64	0.93	18	.26	86	1.25	20	.29
1952	49	0.71	13	.19	62	.90	15	.22

### Whooping Cough and Measles.

There has been little variation in the incidence of whooping cough over the past number of years. During 1952, although the incidence was less than in 1951—244 as compared with 287 cases, there was a greater number requiring hospitalisation. Apart from one or two cases admitted to hospital on social grounds, those admitted were usually gravely ill with associated broncho-pneumonia. Once this disease is fully established, modern drugs, although they do help in dealing with complications, seem to have little or no effect on the distressing cough spasms. In very young children this is a most exhausting and dangerous disease. It is hoped, therefore, that in the very near future, the Ministry of Health will, as the result of their investigations, formulate a scheme for extension of immunisation against this disease.

The following table gives the incidence of whooping cough and measles during the past five years.

YEAR	MEASLES		WHOOPING COUGH	
	Number notified	Number of deaths	Number notified	Number of deaths
1948	573	—	295	1
1949	964	—	191	3
1950	353	—	233	—
1951	1173	1	287	1
1952	242	—	244	—



**Scarlet Fever.**

The following table shows the incidence of scarlet fever over the past five years.

Year	No. of Cases notified	No. of Deaths
1948	81	—
1949	40	—
1950	32	—
1951	146	—
1952	169	—

**INFECTIOUS DISEASES**

The incidence of notified infectious diseases in Swindon during recent years is given in the following table:—

DISEASES	1948	1949	1950	1951	1952
Acute Pneumonia -	41	39	32	38	26
Acute Poliomyelitis -	5	5	13	5	2
Acute Polioencephalitis	1	—	—	—	—
Cerebrospinal Fever -	—	—	—	1	1
Diphtheria - -	6	1	—	—	—
Erysipelas - -	5	5	3	1	3
Dysentery, Food Poisoning - -	—	1	7	67	5
Measles - -	573	964	353	1,173	242
Ophthalmia Neonatorum	3	—	—	2	2
Typhoid and Paratyphoid Fevers	—	—	1	—	—
Puerperal Pyrexia -	12	24	11	37	51
Scarlet Fever - -	81	40	32	146	169
Smallpox - -	—	—	—	—	—
Tuberculosis—pulmonary	78	101	84	64	49
Tuberculosis—non-pulmonary -	35	19	22	22	13
Whooping Cough -	295	191	233	287	244



### Acute Poliomyelitis and Polio Encephalitis.

During 1952, four cases of poliomyelitis were notified in Swindon. Two of these cases were not confirmed, but the remaining two cases were suffering from paralytic poliomyelitis. One of those cases, a boy of eleven years, made a good recovery and was discharged home from the Isolation Hospital. The other case, in a man of 40 years of age, had some residual paralysis, and was transferred from the Isolation Hospital to St. Margaret's Hospital for further treatment. In neither of these cases could any contact with another case be discovered, and there was no history of recent inoculation or tonsillectomy.

A comparative table showing the incidence of this disease since 1943 is set out below.

YEAR	NUMBER OF CASES NOTIFIED	NUMBER OF DEATHS
1943	2	0
1944	0	0
1945	2	1
1946	1	0
1947	8	1
1948	5	1
1949	5	0
1950	13	2
1951	5	0
1952	2	0

### Medical Examination of Corporation Staff.

During the year the Medical Officers of this Department carried out the following examinations of Corporation staff:—

Candidates for entry into the Superannuation Scheme and transfer to the established list of employees	- - - - -	110
Candidates for Public Service Vehicle licences	-	62
Others — Entrants to Training Colleges, new appointments, Juniors, etc.	- - -	44
		<hr/>
	TOTAL	216
		<hr/>



## REPORT OF THE SENIOR SANITARY INSPECTOR FOR 1952

### To the Chairman and Members of the Public Health Committee

Ladies and Gentlemen,

I have the honour of submitting the Annual Report of work carried out under the supervision of the Senior Sanitary Inspector during the year 1952.

#### STAFF

Mr. J. Fabel was appointed to fill the vacant post of Additional Sanitary Inspector and commenced his duties on the 10th March.

#### FOOD AND DRUGS ACT 1938

One-hundred-and-three samples of milk and one-hundred-and-eleven samples of other foodstuffs were submitted to the Public Analyst for examination. Particulars of these samples will be found on page 37 of this report.

One-hundred-and-sixty-nine samples of milk were submitted to the Pathological Laboratory for bacteriological examination, and particulars of these samples will be found on page 36.

Seventy-seven samples of milk were also submitted to the Pathological Laboratory for biological examination and one sample was found to contain tubercle bacilli. The Ministry of Agriculture and Fisheries Veterinary Surgeon was immediately informed, the farm was visited and the animal suspected of producing the infected milk was slaughtered; it was found, on slaughter, to be infected with generalised tuberculosis including tuberculosis of the udder.

One local tradesman was prosecuted for selling pigs' chitterlings in an unwholesome condition, and was fined £20 and £1-11-0 costs. Another firm was fined £5 plus £3-3-0 Advocate's Fee for selling a marzipan layer cake containing mouse droppings. Six samples of sausages were submitted to the Public Analyst and four were found not to comply with the requirements of the Meat Products and Canned Meat (Amendment) Order 1950. Proceedings were taken in one case by the Ministry of Food, which is responsible for the administration of this Order, and the defendants were fined £75 with £5-5-0 costs.

#### ICE CREAM

Twenty-one samples of ice cream submitted to the Public Analyst were found to comply with the Food Standards (Ice Cream) Order 1951. Two samples were slightly below the requirements of the Order but not sufficient to justify proceedings, in the opinion of the Analyst. Follow-up samples taken from these retailers were satisfactory. The Food Standards (Ice Cream) (Amendment) Order



1952, which came into operation on the 7th July 1952, prescribed that ice cream should contain not less than 4% fat, 10% sugar and 5% milk solids other than fat.

Twenty-three samples of ice cream were submitted for bacteriological examination and were graded as follows:—twenty in Grade 1 and three in Grade 2. These examinations show that there has been a continual improvement in the bacteriological quality of ice cream sold within the Borough.

### MERCHANDISE MARKS ACT 1926

The Swindon Corporation, as the Food and Drugs Authority, is responsible for the enforcement of Orders made under the Merchandise Marks Act 1926 as far as they relate to certain imported foods. The Orders require the country of origin or the words "Empire" or "Foreign" to be conspicuously displayed by means of a show ticket on imported fresh apples, dried fruits, eggs, oat products, raw tomatoes, bacon and ham, meat, margarine, malt products, frozen or chilled salmon and honey. Proceedings were taken against eight shopkeepers for failing to carry out the provisions of these Orders.

### FOOD AND DRUGS ACT INSPECTIONS

A high standard of cleanliness is demanded from all persons engaged in the handling of food, and proper washing facilities with hot and cold water laid on are provided in practically all food shops within the Borough.

Talks were given to the employees of various firms and to certain women's organisations on the importance of personal cleanliness when engaged in food handling and how food poisoning can occur if the elementary principles of personal hygiene are not carried out.

### MEAT INSPECTION

Centralised slaughtering for the Borough of Swindon and the surrounding Rural Districts was still being carried out at the Ministry of Food Slaughterhouse in Shrivenham Road at the end of the year, but the modern abattoir in course of erection by the Ministry at the site in Marlborough Lane was nearly completed.

13,866 animals were slaughtered and inspected at the Slaughterhouse, and some fifty-two tons of meat were found, on inspection, to be unfit for human consumption. The graph on page 40 shows that since 1944 there has been a gradual reduction in the number of animals found on inspection to be affected with Tuberculosis.

### DRAINAGE WORK

The drains of 214 premises were relaid or overhauled during the year, under the supervision of Sanitary Inspectors.



## HOUSING REPAIRS

Housing repairs were carried out at 494 houses during the year as a result of informal action. Statutory Notices were served in respect of nine dwelling-houses, and the work required to comply with the notices was eventually completed by the owners in eight cases.

## OVERCROWDING

The records of the department show that at the beginning of the year there were 20 instances of overcrowding outstanding from 1951; these affected  $167\frac{1}{2}$  persons. 5 new cases affecting  $36\frac{1}{2}$  persons were recorded and 4 cases affecting  $42\frac{1}{2}$  persons were abated, during the year. This left 21 instances affecting  $161\frac{1}{2}$  persons, at the end of 1952. The overcrowding standard of the Housing Act is very low. For example,  $7\frac{1}{2}$  persons are permitted to occupy a four-roomed house which contains only 2 bedrooms, without it being overcrowded. Any children under 10 years of age count as half-units.

## NATIONAL ASSISTANCE ACT 1948

Under this Act it is the responsibility of the Local Authority to carry out the burial or cremation of any person who has died in their area, where no suitable arrangement has been made for the disposal of the body. During the year under review arrangements were made for the burial of two persons.

## PREVENTION OF DAMAGE BY PESTS ACT 1949

Systematic baiting of the sewer manholes was carried out twice during the year. Investigation showed that there was evidence of rat infestation in 50 per cent of the manholes in the older parts of the Borough, but practically no evidence in the sewers of the more recently constructed areas.

In order to comply with the requirements of the Ministry of Agriculture and Fisheries, disinfestation of business premises is now charged for. Disinfestation was carried out at ninety-six business premises during the year, and £132-10-0 was recovered from the occupiers. The occupiers of business premises are not obliged to accept the Corporation service. They can, of course, carry out the necessary measures themselves for the destruction of these pests, or they can employ one of the several servicing companies which specialise in rats and mice destruction.

## RAG FLOCK AND OTHER FILLING MATERIALS ACT 1951

This Act requires the registration of premises where upholstery, including the stuffing or lining of bedding, toys etc., is being done, and requires that any rag flock or other filling material used on such premises shall comply with the standard of cleanliness prescribed in the Rag Flock and Other Filling Materials Regulations 1951.



The Act does not apply to premises where only the remaking or reconditioning of articles is carried on, and the fitting out of railway carriages is also exempt from the provisions of the Act.

At the end of the year four premises were registered, and four licences for the storage of rag flock were in force.

Six samples of rag flock and other materials were sent to the Prescribed Analyst.

In concluding my Report, I wish to thank all the Officers of the Corporation for their assistance and ready co-operation throughout the year.

H. A. BANWELL,

Senior Sanitary Inspector.

## INSPECTIONS AND REVISITS — 1952

Premises	Primary Inspections	Revisits
<b>PUBLIC HEALTH ACT 1936</b>		
Dwelling-houses on complaint - - -	490	289
Dwelling-houses on complaint no nuisances found	132	6
Other premises - - - -	166	49
Caravans - - - -	23	3
Smoke observations - - - -	11	—
Stables and piggeries - - - -	21	8
Theatres, Cinemas etc. - - - -	19	1
Public Sanitary Conveniences - - - -	5	1
Common Lodging Houses - - - -	6	4
Verminous premises - - - -	49	18
Drainage work under supervision - - -	1022	47
Infectious Disease inquiries - - -	207	3
<b>HOUSING ACT 1936</b>		
Dwelling-houses on complaint - - -	282	823
Dwelling-houses on complaint no defects found	164	11
Houses inspected and recorded - - -	1	—
Overcrowding - - - -	35	5
<b>FOOD AND DRUGS ACT 1938</b>		
Bakehouses - - - -	23	27
Dairies - - - -	60	41
Milk samples—bacteriological - - -	169	—
Milk samples—chemical - - -	103	—
Milk samples—biological - - -	77	—
Ice-cream samples—bacteriological - -	23	—
Ice-cream samples—chemical - - -	23	—
Food and Drugs samples - - -	88	—
Water samples—bacteriological - - -	37	—
Water samples—chemical - - -	12	—
Water samples—sewage effluent - - -	12	—
Ice-cream premises - - - -	43	14
Restaurants, cafes etc. - - -	43	43
Fish shops and fish friers - - -	48	23
Markets and food stalls - - -	201	46
Food preparation and storage premises -	104	6
Butchers' shops - - - -	179	22
Slaughterhouses - - - -	643	—
Food shops - - - -	595	66
Licensed premises - - - -	80	—
<b>FACTORIES ACT 1937</b>		
Factories—mechanical - - -	98	46
Factories—non-mechanical - - -	26	8
Outworkers - - - -	95	5



SHOPS ACT 1950, section 38	-	-	3	1
RAG FLOCK AND OTHER FILLING				
MATERIALS ACT, 1951	-	-	6	—
NATIONAL ASSISTANCE ACT 1948	-	-	70	—
PREVENTION OF DAMAGE BY PESTS				
ACT, 1949	-	-	1047	437
MERCHANDISE MARKS ACT 1926	-	-	101	6
SWINDON CORPORATION ACT				
Hairdressers and Barbers	-	-	90	3
MISCELLANEOUS	-	-	1990	397
			<hr/>	<hr/>
TOTALS			8722	2459
			<hr/>	<hr/>

## PUBLIC HEALTH ACT 1936 &amp; HOUSING ACT 1936



### NUISANCES ABATED AND HOUSING DEFECTS REMEDIED

Defective ceilings	-	-	-	-	147
„ walls	-	-	-	-	544
Damp walls	-	-	-	-	182
Dirty or verminous rooms	-	-	-	-	246
Defective floors	-	-	-	-	130
„ firegrates	-	-	-	-	37
„ windows	-	-	-	-	128
„ doors	-	-	-	-	65
„ stairs	-	-	-	-	8
„ coppers	-	-	-	-	3
„ sinks	-	-	-	-	7
New sinks provided	-	-	-	-	30
Water services provided or repaired	-	-	-	-	18
Defective chimneys	-	-	-	-	25
„ roofs	-	-	-	-	175
„ eavesgutters and/or rainwater-pipes	-	-	-	-	108
„ yard paving	-	-	-	-	9
„ forecourt paving	-	-	-	-	2
„ water-closets repaired	-	-	-	-	20
New pedestal pans fixed	-	-	-	-	97
Defective flushing-cisterns repaired	-	-	-	-	26
New flushing-cisterns fixed	-	-	-	-	13
Additional water-closets provided	-	-	-	-	59
Choked drains	-	-	-	-	90
Defective drains	-	-	-	-	214
„ traps	-	-	-	-	2
Drains tested	-	-	-	-	255
New baths fixed	-	-	-	-	36
Offensive accumulations removed	-	-	-	-	23
„ animals	-	-	-	-	3
Overcrowding abated	-	-	-	-	4
Dust-bins provided	-	-	-	-	6
Food stores provided or ventilated	-	-	-	-	1
Rent Books made to comply with the Housing Act 1936	-	-	-	-	10
Miscellaneous	-	-	-	-	485
TOTAL					3208



**Matters requiring attention and remedied  
following inspection, in 1952**

Shops Act 1950	-	-	-	-	2
Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950	-	-	-	-	9
Food and Drugs Act, 1938	-	-	-	-	74

**HOUSING STATISTICS**

☆

**PUBLIC HEALTH ACT 1936 and HOUSING ACT 1936**

☆

Houses inspected	-	-	-	-	1068
„ found to be defective	-	-	-	-	600
„ rendered fit by informal action	-	-	-	-	494
„ „ „ „ formal „	-	-	-	-	8
Informal notices served	-	-	-	-	255
„ „ complied with	-	-	-	-	210
Statutory Notices, Public Health Act:—					
Served	-	-	-	-	7
Complied with by owners	-	-	-	-	5
„ „ „ Corporation in default of owners	-	-	-	-	1
Statutory Notices, Housing Act:—					
Served	-	-	-	-	2
Complied with by owners	-	-	-	-	2
„ „ „ Corporation in default of owners	-	-	-	-	—

**HOUSING ACT 1936, section 58**

☆

**Overcrowding**

☆

Houses overcrowded at end of 1951	-	-	-	20
Number of persons affected	-	-	-	167½
New cases of overcrowding found in 1952	-	-	-	5
Number of persons affected	-	-	-	36½
Cases of overcrowding abated during 1952	-	-	-	4
Number of persons affected	-	-	-	42½
Cases of overcrowding not abated at end of 1952	-	-	-	21
Number of persons affected	-	-	-	161½

## DISINFESTATION OF VERMINOUS PROPERTY

Type of Property					No. of Rooms disinfested
Council owned	-	-	-	-	134
Other property	-	-	-	-	154
Lots of bedding disinfested	-	-	-	-	2
Lots of bedding destroyed	-	-	-	-	1

After disinfestation has been carried out, periodical visits are made until complete disinfestation of the premises has been effected.

## DISINFECTION AFTER INFECTIOUS DISEASE

Work carried out					Number disinfected
Rooms disinfected	-	-	-	-	249
Articles disinfected	-	-	-	-	7395
Library books disinfected	-	-	-	-	296
Bedding disinfected from hospitals	-	-	-	-	73
Bedding disinfected from private premises	-	-	-	-	20
Bedding destroyed	-	-	-	-	16

## FREE DISINFECTANTS ISSUED

Fluid — 170 pints

## REGISTERED COMMON LODGING HOUSE

Number of Common Lodging Houses	-	1
Number of persons for whom accommodation is provided:—		
Adults	-	87
Children	-	4

## RAG FLOCK AND OTHER FILLING MATERIALS ACT 1951

Premises licensed to store Rag Flock	-	4
Premises registered	-	4

## SWINDON CORPORATION ACTS 1947 and 1951

Premises registered as accommodation for food intended for sale from vehicles	-	12
Hawkers registered for the sale of food from vehicles	-	31
Hairdressers and Barbers	-	90



## FACTORIES ACT 1937

1. The following table gives details of the inspections carried out during the year.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which sections 1, 2, 3 and 6 are to be enforced by Local Authorities. -	118	34	14	—
(ii) Factories not included in (i) to which section 7 applies (a) subject to the Local Authorities (Transfer of Enforcement) Order 1938 - -	184	144	13	—
(b) Others - -	—	—	—	—
(iii) Other premises under the Act, (excluding outworkers premises) - -	—	—	—	—
<b>TOTAL - -</b>	<b>302</b>	<b>178</b>	<b>27</b>	<b>—</b>

## OUTWORK (sections 110 and 111)

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Number of Outworkers at August 1952:—

Making, Cleaning etc., of Wearing Apparel -	33
Making of Receptacles of Paper, Cardboard, etc.-	7

# **FACTORIES ACT 1937—continued**

## 2. Cases in which defects were found.

Particulars	No. of cases in which defects were				No. of cases in which prosecutions were instituted
	Found.	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (s.1) - -	3	3	—	—	—
Overcrowding (s.2) -	—	—	—	—	—
Unreasonable temperature (s.3) -	—	—	—	—	—
Inadequate ventilation (s.4) - -	—	—	—	—	—
Ineffective drainage of floors (s.5) -	—	—	—	—	—
Sanitary Conveniences (s.7) - -					
(a) insufficient -	1	—	—	—	—
(b) unsuitable or defective -	25	27	—	5	—
(c) not separate for sexes - -	—	—	—	—	—
Other offences (not including offences relating to Homework) -	11	11	—	—	—
TOTALS - -	40	41	—	5	—



## MILK AND DAIRIES REGULATIONS 1949

On the Registers of the department are:—

Dairies	-	-	-	-	22
Distributors of Milk	-	-	-	-	24

## MILK (SPECIAL DESIGNATION) (RAW MILK) AND (PASTEURISED AND STERILISED MILK) REGULATIONS 1949

Licences in force within the Borough, issued by the Town Council of Swindon:—

Dealers' licences authorising the use of the special designation "Tuberculin Tested"	-	-	14
Supplementary licences authorising the use of the special designation "Tuberculin Tested"	-	-	3
Dealers' licences authorising the use of the special designation "Pasteurised"	-	-	8
Dealers' (Pasteurisers') licences authorising the use of the special designation "Pasteurised"	-	-	4
Supplementary licences authorising the use of the special designation "Pasteurised"	-	-	2

Samples of Milk submitted for Bacteriological examination to the Public Analyst or to the Pathological Laboratory, Gorse Hill.

Designation	No. of Samples taken	No. Satisfactory	No. Unsatisfactory
Tuberculin Tested -	35	29	6
Tuberculin Tested (Pasteurised) - -	67	67	—
Pasteurised -	61	60	1
Non-designated -	6	6	—
TOTALS - -	169	162	7

## FOOD AND DRUGS ACT 1938

Premises registered for the Preparation or Manufacture of Sausages, or Potted, Pressed, Pickled or Preserved Food	-	-	61
Premises registered for the Manufacture, Sale or Storage of Ice-cream	-	-	204
Butchers' shops	-	-	67
Wholesale meat stores	-	-	2
Fish shops and fish friers	-	-	57
Bakehouses	-	-	22
Other Food Shops	-	-	521

## Samples submitted to the Public Analyst for Chemical Examination.

Samples taken	Formal	Informal	Genuine	Not genuine
Milk - -	94	9	97	6
Ice-cream - -	10	13	21	2
Vanilla flavouring -	—	1	1	—
Beef sausages -	1	1	2	—
Pork sausages -	4	—	1	3
Pork sausage meat -	2	—	1	1
Butter -	—	1	1	—
Grapefruit (tinned) -	—	1	1	—
Grapefruit squash -	3	—	3	—
Orange squash -	5	—	5	—
Lemon squash -	1	—	1	—
Lemon barley squash	1	—	1	—
Tomato ketchup -	—	3	3	—
Tomato sauce -	—	1	1	—
Fish paste - -	—	5	5	—
Meat paste - -	—	2	2	—
Shrimp paste -	—	1	1	—
Sardine paste -	—	1	1	—
Chicken soup with chicken meat -	1	—	1	—
Cream of chicken soup	1	—	1	—
Cream of tomato soup	1	—	1	—
Meat soup - -	1	—	1	—
Processed peas -	1	—	1	—
Whisky - -	10	—	10	—
Gin - -	5	—	5	—
Rum - -	2	—	2	—
Beer - -	12	—	12	—
Mincemeat -	4	—	4	—
Strawberry jam -	2	—	2	—
Lemon curd -	1	—	1	—
Lemon cheese -	1	—	1	—
Glauber salts -	—	4	4	—
Epsom salts -	—	4	4	—
Saccharin Tablets -	—	4	4	—
TOTALS - -	163	51	202	12



# **ICE-CREAM (HEAT TREATMENT ETC.) REGULATIONS 1947**



## **Samples of Ice-cream submitted for bacteriological examination**

Samples taken	Number in Grade 1	Number in Grade 2	Number in Grade 3	Number in Grade 4
23	20	3	—	—

Standards: Grade 1—Methylene Blue reduced in  $4\frac{1}{2}$  hours or more.

Grade 2—     "         "         "         "      $2\frac{1}{2}$  to 4 hours.

Grade 3—     "         "         "         "      $\frac{1}{2}$  to 2 hours.

Grade 4—     "         "         "         "     0 hours\*

(\* i.e., reduction at the end of the pre-incubation period)

As there is no statutory test for the bacteriological examination of ice-cream, the above samples are graded in accordance with the Advisory Bulletin of the Ministry of Health and the Public Health Laboratory Service, 1947.

# **PUBLIC HEALTH (MEAT) REGULATIONS, 1924**

**The following table shows the number of carcasses inspected during 1952**

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	Cattle		Calves	Pigs	Sheep and Lambs
	Cows	Others			
<b>TOTALS</b> - -	1307	2749	511	336	8963
<b>Disease other than Tuberculosis</b> Whole carcasses condemned -	49	13	9	36	65
Carcasses of which some part or organ was condemned -	313	465	2	79	403
Approximate percentage of number inspected affected with disease other than Tuberculosis -	27	17.3	2.15	34	5.2
<b>Tuberculosis only</b> Whole carcasses condemned - -	22	12	—	2	—
Carcasses of which some part or organ was condemned -	142	154	—	8	1
Approximate percentage of number inspected affected with Tuberculosis -	12.5	6	—	3	.011

## **Unsound Food condemned by Sanitary Inspectors during 1952**

☆

		Tons	cwts.	qrs.	lbs.
Unsound Meat and Offal	-	52	0	3	20
Other Unsound Food	-	3	14	1	27
		<hr/>	<hr/>	<hr/>	<hr/>
	TOTAL	55	15	1	19

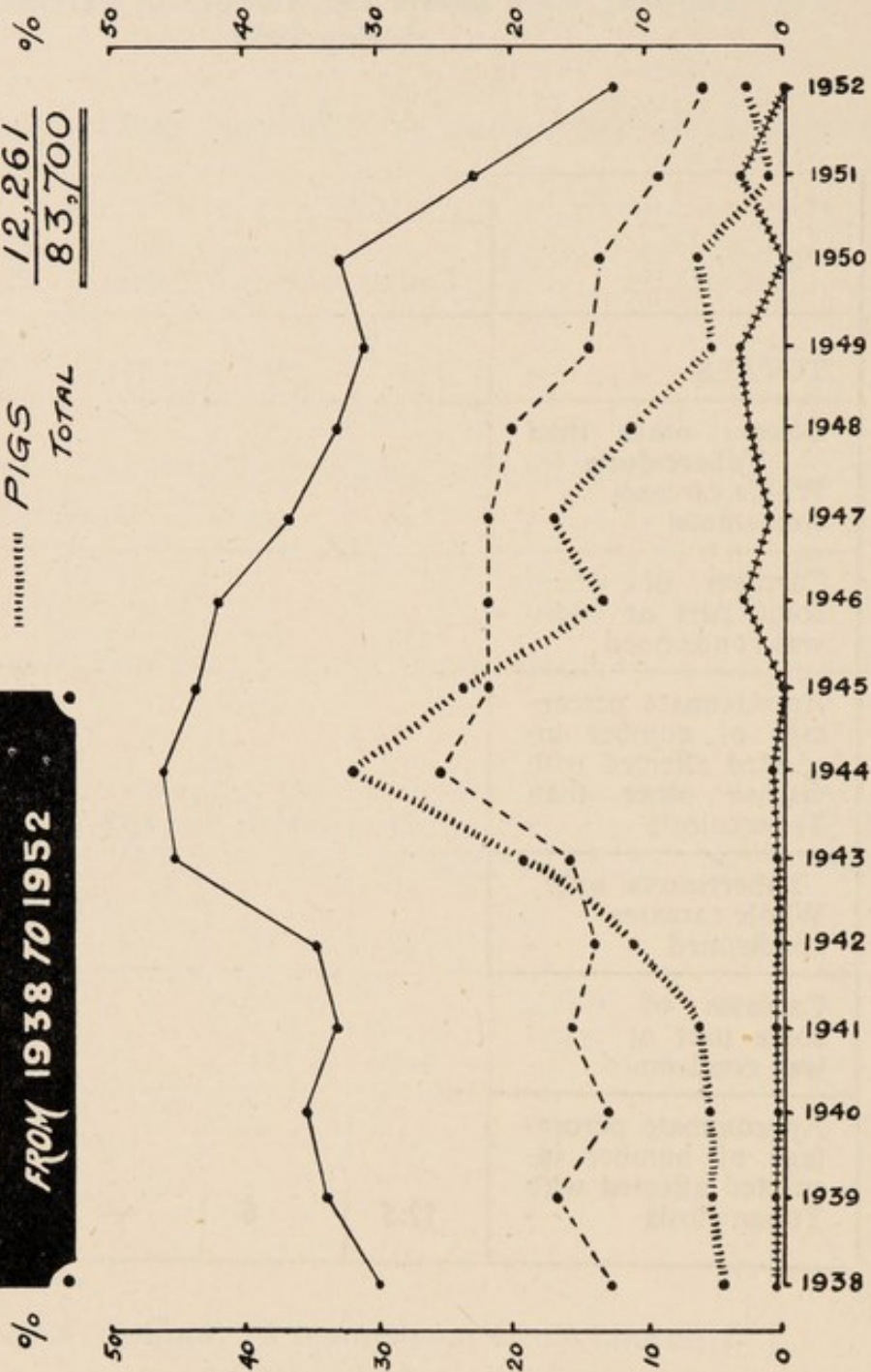


# GRAPH KEY

INSPECTED  
1938-1952

—	COWS	32,104
- - -	OTHER CATTLE	26,858
++++	CALVES	12,477
	PIGS	12,261
	<u>TOTAL</u>	<u>83,700</u>

## PERCENTAGE of CATTLE & PIG CARCASSES FOUND TO BE INFECTED WITH TUBERCULOSIS FROM 1938 TO 1952



**PREVENTION OF DAMAGE BY PESTS ACT 1949****Premises baited in 1952**

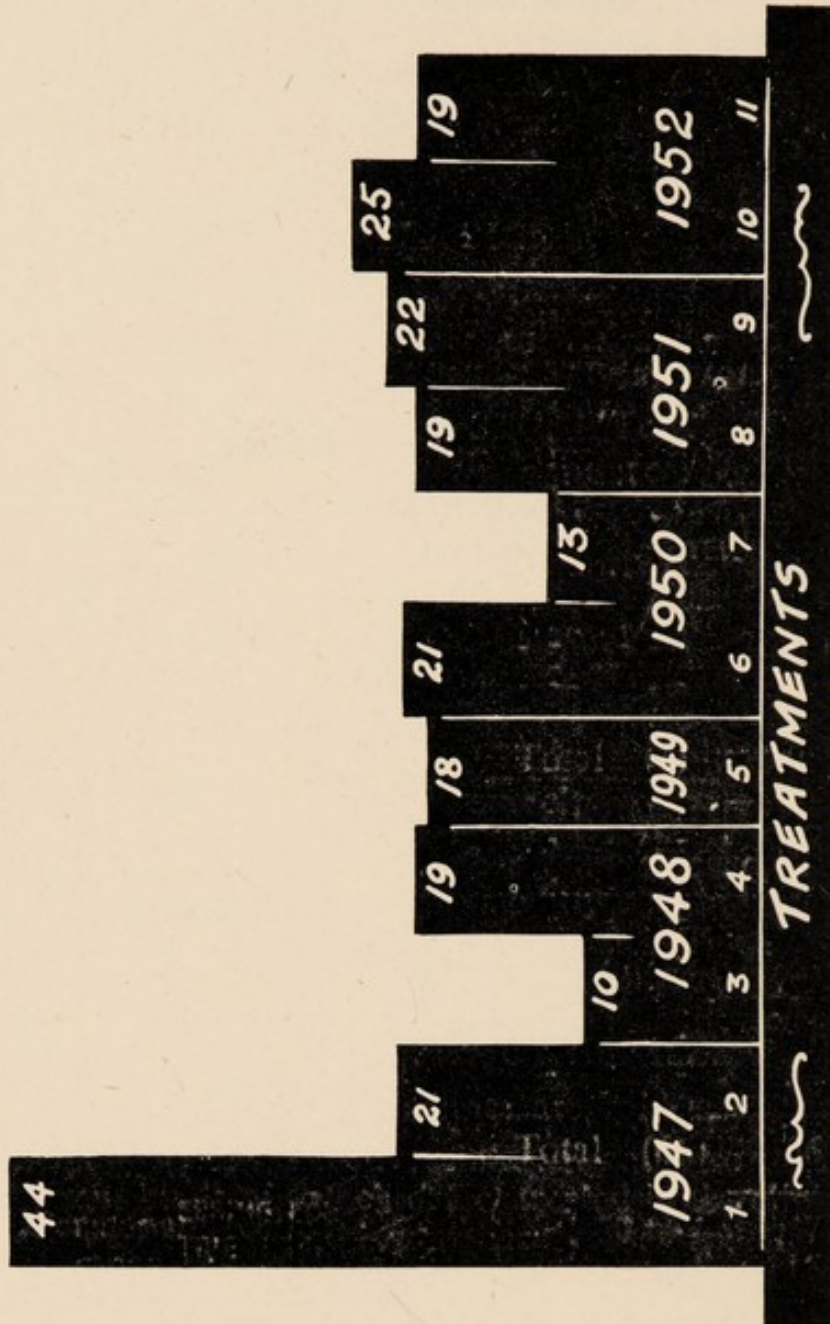
<b>Type of Premises</b>					<b>Number baited</b>
Local Authority	-	-	-	-	43
Business	-	-	-	-	96
Dwelling-house	-	-	-	-	417
Agricultural	-	-	-	-	—
Sewer Manholes	-	-	-	-	2120

**Baiting**

Non-poisonous baits laid	-	-	-	5510
Poisonous baits laid	-	-	-	12624
„ „ taken	-	-	-	9351



# **RAT INFESTATION of SEWERS** *Percentage of Sewer Manholes showing evidence of RAT INFESTATION*



## BOROUGH OF SWINDON



## EDUCATION COMMITTEE

as at 31st December, 1952

HIS WORSHIP THE MAYOR (Alderman ALBERT EDWARD LONG)

**Chairman:** Alderman R. G. CRIPPS**Vice-Chairman:** Councillor L. J. Newman.**MEMBERS**

Alderman	H. DIMENT	Councillor	B. H. CARTER
"	H. W. GARDNER	"	W. J. DAVIS
"	H. THORPE	"	A. W. J. DYMOND
"	A. LEONARD	"	J. G. GAY
Councillor	A. M. BENNETT	"	H. G. LEWIS
"	J. BOND	"	C. S. MacPHERSON
"	A. J. BOWN	Mr.	C. L. BAILEY
"	H. BOND	Mr.	F. W. HAWKSWORTH
"	G. BOND	Mr.	F. SMITH (N.U.T.)
		Miss	F. H. SHALLCROFT

W.C.C.

Mrs. F. A. TONGE

Mrs. ORMOND

Dr. O. D. GILMORE

Mr. F. M. TAYLOR

**BOROUGH EDUCATION OFFICER**

Mr. G. JELICOE, M.A. (Oxon)



**To the Chairman and Members of the Education Committee  
of the Borough of Swindon.**

Ladies and Gentlemen,

I have much pleasure in submitting the Annual Report for 1952 on the work of the School Health Service in Swindon.

School medical work is essentially preventive in character, so it is extremely difficult to present factual proof of its results. The usefulness of the service can, however, be judged by study of the tables of statistics which show the number of defects found in school children which have been referred for treatment. Many of these defects are minor in character when discovered, and if left untreated, they might well lead to disability and ill health later in life.

It is a matter of conjecture as to how many of these defects would have been referred for treatment by the parents if there was no School Health Service. I think it is safe to say that the majority of parents would not seek medical advice until such time as the defect progressed to the point of causing ill health.

In this respect, it is a matter of great regret that the School Dental Service in the town has been understaffed and unable to maintain a reasonable standard of dental care of the school children. During 1952, we have been fortunate in that the services of two dental officers have been available for part of the year. However, the previous lack of dental officers left vast arrears of dental inspection and treatment, so that teeth which could have been saved by early treatment have now been lost.

I would draw your attention to the section of this report dealing with the Spastic Unit. Although the unit must for some time continue to be regarded as experimental, I am convinced that with the active help and co-operation of all concerned with it, it will prove to be a success. As the unit is quite novel in its conception, there will of necessity be many matters relating to it which do not conform to present regulations, but it is hoped that the Ministry of Education will recognise and support this effort to provide both physical and educational training for these handicapped children.

I am,

Your obedient servant,

**JAMES URQUHART,**

Borough School Medical Officer.

**CIVIC OFFICES,  
SWINDON.**



## SCHOOL MEDICAL SERVICE

### SUMMARY OF STATISTICS.

A summary of the principal statistics for the year 1952, with comparable figures for 1951, is given below:—

	1952	1951
Number of primary and secondary school children on register (at 16th January, 1953) -	10,882	10,380
Number of children examined at routine medical inspection - - - -	2,526	3,291
Number found to require treatment for diseases and defects - - - -	507	746
Number of dental inspections - - - -	1,959	Nil
Number referred for dental treatment - - - -	1,472	Nil
Number of children examined for part-time employment - - - -	142	173

### SCHOOL POPULATION.

The estimated population of the Borough of Swindon at mid-year 1952 was 68,850. There were at the end of 1952 a total of 10,882 children on the registers of the primary and secondary schools of Swindon (including the Central Primary School). It will be noted that this is an increase of 502 over the school population at the end of 1951.

### STAFF

#### 1. Medical.

Dr. A. H. Griffith, Deputy Medical Officer of Health, left on 2nd February, 1952. Dr. W. B. A. Smyth, Deputy Medical Officer of Health, commenced duties on 1st April, 1952.

#### 2. Dental.

Mr. A. E. Webber commenced duties on 24th March, 1952, ceased on 23rd December, 1952. Mrs. Benson commenced duties on 1st September, 1952.

#### 3. Dental Attendants.

Mrs. Young ceased duties on 20th December, 1952. Miss Mitchell commenced duties on 16th November, 1952.

#### 4. School Nurses.

Miss Whiteway ceased duties on 18th April, 1952. Mrs. Day retired on 24th September, 1952. Miss Burrows commenced duties on 28th June, 1952.



### MEDICAL EXAMINATIONS.

During the year, periodic medical examinations were carried out in accordance with the Handicapped Pupils and School Health Service Regulations, 1945. In addition to these periodic examinations, the practice of examining pupils on admission to the secondary grammar schools was continued. (It might be mentioned here that the school medical staff carry out routine inspections at the Occupation Centre on behalf of the Mental Health Services of the Wilts County Council).

The findings at medical inspection are given in the table on page 55.

The following gives the number of primary and secondary school children examined and the periodic age groups and the number found to be suffering from diseases and defects (excluding dental caries and uncleanness) which required some form of treatment.

	1952	1951	1950	1949	1948
Number of children examined	2,526	3,291	2,319	2,897	3,271
Number of children found to have defects - -	507	746	585	602	707
Percentage of children examined in need of treatment - -	20.0	22.6	25.3	20.7	21.6

Of the 2,526 children examined at routine medical inspections, there were 259 (or 10.2%) defects of vision and 293 (or 11.6%) defects of ear, nose and throat.

### NUTRITIONAL STATE.

The Ministry now recognises three categories relating to the general condition of a child, viz:—

- A — Good
- B — Fair
- C — Poor

A table, showing the number and percentage of children placed in each of these three categories for each age group examined during 1952 and 1951 is given below:—



Age Group		No. of children Inspected	Category A		Category B		Category C	
			No.	%	No.	%	No.	%
Entrants	1952	888	418	47.1	463	52.1	7	.8
	1951	1276	743	58.2	515	40.4	18	1.4
Second Age Group	1952	829	461	55.6	368	44.4	—	—
	1951	733	441	60.2	264	36.0	28	3.8
Third Age Group	1952	642	448	69.8	191	29.74	3	.46
	1951	952	603	63.3	323	33.9	26	2.8
Other Periodic Inspections	1952	167	73	43.7	94	56.3	—	—
	1951	330	278	84.2	48	14.6	4	1.2
TOTAL	1952	2526	1400	55.4	1116	44.2	10	.4
	1951	3291	2065	66.5	1150	31.2	76	2.3

### Comments:—

It is highly satisfactory that the percentage of children placed in Category C (poor general condition) continues to decline. The variations in the percentages classified as A and B are probably of little significance.

### CLEANLINESS.

During 1952, the School Nurses carried out a total of 23,223 inspections for uncleanliness, and a total of 151 individual children were reported as infested. These included 35 boys and 116 girls, or 0.32% of the male and 1.07% of the female school population.

### MINOR AILMENT CLINICS.

Minor Ailment clinics are held at the following places and times:—

#### Eastcott Hill.

#### Time.

#### Dr. in attendance.

Monday to Saturday inclusive

9 a.m. to 12-30 p.m.

Monday, Friday and Saturday.

#### Pinehurst.

Monday to Friday inclusive

9 a.m. to 12-30 p.m.

Tuesday.

In all, some 8,977 attendances were made at these clinics during the year. There were 1,983 consultations with doctor.



### OBSERVATION CLINICS.

The practice of holding special observation clinics was continued. Children who are found at a periodic or special medical examination to have any defect which, while not severe enough for reference to a specialist, requires special observation, are seen at these clinics and reviewed.

During 1952, a total of 474 consultations were held at observation clinics.

### OTHER MEDICAL INSPECTIONS.

Special medical inspections and re-inspections were carried out on 1,655 primary and secondary school children. The figures for 1951 and 1952 are as follows:—

		1952	1951
Number of inspections	- -	1,655	1,554
Number of re-inspections	- -	1,440	2,065

An analysis of the 1952 and 1951 figures is given below:—

		1952	1951
Number seen for skin conditions	-	900	775
„ „ „ eye „	-	288	286
„ „ „ school accidents	-	45	71
„ „ „ ear defects	- -	63	58
„ „ „ throat or nose defects		101	80
„ „ „ juvenile employment	-	142	173
Others	- - - -	116	111
TOTAL		1,655	1,554

### CONSULTANT CLINICS.

The Consultant clinics in Swindon have been the responsibility of the Oxford Regional Hospital Board since July, 1948. Any child found on examination by a school medical officer to need hospital treatment or a consultant's opinion is referred to the appropriate clinic. In every case, the family doctor is notified of the intention to refer children to these clinics, and is given the opportunity to deal with the case himself if he so desires.

The only Consultant clinic now held on Local Authority premises is the Ophthalmic Clinic at the School Clinic, Eastcott Hill.



**Ophthalmic Clinic.** Consultant clinics continue to be held at the school clinic, Eastcott Hill, with clerical and nursing staff provided by the Health Department.

Number of clinics held	-	-	74	75
Number of children attending	-	-	556	665
Number of attendances	-	-	1,095	1,270

Unfortunately, there is a long waiting list for this clinic. Representations have been made to the Hospital Management Committee, and it is hoped that the position will improve when an ophthalmic optician is appointed to assist at the clinic.

**Orthopaedic Clinic.** Since May, 1950, the Orthopaedic Clinic has been run by the Regional Hospital Board at St. Margaret's Hospital. 149 cases were referred during 1952 to the clinic by the School Medical Services as compared with 213 in 1951. As this department no longer arranges the appointments at this clinic, we have no actual knowledge of the total number of Swindon school children referred there from all sources.

**Ear, Nose and Throat Clinic.** 111 children were referred to this clinic by School Medical Officers in 1952. The waiting list for consultation and operation continued to be very long.

Any child considered by the School Medical Officer to require urgent treatment was given special consideration for priority by the hospital authorities.

**Paediatric Clinic.** 41 children were referred to this clinic by School Medical Officers during 1952. In all cases, the children were seen in consultation with little delay, and full reports were sent by the consultant to the School Medical Officer. The Consultant also sends us a report on any school child referred to him for consultation from other sources.

### SPECIAL CLINICS.

**Remedial Exercises.** It was found in July, 1952, that there was a list of 160 children recommended for remedial exercises, mainly owing to poor posture and flat feet. A priority list of 40 children was submitted to the Consultant in Physical Medicine who saw them and placed them under treatment with the exception of four who failed to attend.

It was not found possible to provide treatment for the milder cases, but approval has been sought for the appointment of a whole time remedial gymnast for Swindon.



**Child Guidance Clinic.** The Child Guidance Clinic set up by the Wiltshire County Council continued to hold regular sessions at 81, Bath Road, Swindon.

A report on the Child Guidance Service by Mr. H. R. Melrose, Educational Psychologist, is appended to this report.

**Speech Therapy.** Miss Jansson retired on 9th September, 1952, and by arrangement with the Wilts County Council, Miss Ansell commenced duty on 22nd September.

The County Education Committee made available the services of Miss Ansell for two days of each week in Swindon, one session being held at the newly opened unit for cerebral palsied children.

Number of children treated—Boys	44		
Girls	23	Total—	67
Number of sessions	-	-	81
Number of attendances	-	-	409
Number discharged	-	-	14

**Complaints:**

Stammer	-	-	-	-	28
Cleft Palate	-	-	-	-	3
Defective Articulation due to psychological or organic causes	-	-	-	-	35
Neurological Lesion causing defective speech	-	-	-	-	1

The handing over of clinics in September was achieved very smoothly, largely thanks to Miss Jansson's thoughtfulness in having urgent cases listed, and the efficiency of the clerical staff. The attendance of both children and parents was good, and although fewer new cases were invited to the clinic towards the end of the year a good many were seen at their schools.

School visits are of great value both in advice to teachers on the best methods of helping speech defective children, and also to let them know the different kinds of speech defect treated in the clinic. It is not always realised that a child who hardly uses speech at all is in greater need of treatment than one with prolonged baby speech.

One session a week was spent at the Spastic Unit. The teacher and parents attended, and continued with exercises during the week. Individual and group treatment was given sometimes in conjunction with physiotherapy.

Many speech therapy cases have been referred to and by the Child Guidance Clinic, and the two services have worked closely together. The school doctors, dentists and E.N.T. surgeons have also helped with diagnosis and advice on treatment.



## HANDICAPPED PUPILS.

**1. Blind Pupils** (Pupils who have no sight, or whose sight is, or is likely to become so defective that they require education by methods not involving the use of sight). One Swindon blind girl has been in a Special School for the blind at the Royal School of Industry for the Blind, Westbury-on-Trym, since 19-5-45. No new pupils were assessed during 1952, and there are none awaiting admission to a special School for the blind.

**2. Partially Sighted Pupils.** (Pupils who, by reason of defective vision, cannot follow the ordinary curriculum without detriment to their sight or to their educational development, but can be educated by special methods involving the use of sight). Two Swindon school children were admitted to the West of England School for Partially Sighted Pupils during 1952. Two children are still on the waiting list for admission to a special school.

**3. Deaf Pupils** (Pupils who have no hearing or whose hearing is so defective that they require education by methods used for deaf pupils without naturally acquired speech or language). Four Swindon children deaf from birth are attending special schools as follows:—

1 boy at Donnington Lodge Nursery School since January, 1950.

1 girl at Royal Institute for Deaf, Derby, since September, 1950.

2 girls at Royal Institute for Deaf since 1947.

Three new pupils were assessed during 1952, and are awaiting admission to a special school.

**4. Partially Deaf Pupils** (Pupils whose hearing is so defective that they require for their education special arrangements or facilities but not all the educational methods used for deaf pupils). No child was ascertained partially deaf during 1952.

**5. Delicate Pupils** (Pupils who by reason of impaired physical condition cannot without risk to their health be educated under the normal regime of the ordinary school). Two pupils were ascertained as delicate during 1952.

**6. Diabetic Pupils** (Pupils suffering from Diabetes who cannot obtain the treatment they need while living at home and require residential care). One girl classified under this category has been a pupil at the Hutton Residential School since January, 1949.



7. **Educationally Subnormal Pupils.** During 1952, 46 pupils were examined and were grouped as follows:—

20 were recommended special educational treatment in an ordinary school

16 were recommended education in a Special Day School for educationally subnormal children

10 were reported to the Local Health Authority as ineducable.

Children already assessed as educationally subnormal were receiving special educational treatment at the end of 1952 at the following centres:—

Special Day School	-	-	-	52
Special Residential Schools	-	-	-	3
Waiting for a vacancy at a Special Day School	-			—
Waiting for a vacancy at a Special Residential School				—

The number of children who were examined in 1952 and notified under Section 57 (5) of the Education Act 1944 was 6.

8. **Epileptic Pupils** (Pupils who by reason of epilepsy, cannot be educated in an ordinary school without detriment to the interests of themselves or other pupils).

At the end of 1952, there were no Swindon children in any special school for epileptics and none awaiting admission. No children were ascertained as epileptic during the year.

22 children have been diagnosed as epileptic. All these children are under regular medical supervision and treatment, and are attending ordinary schools without detriment to themselves or others.

9. **Maladjusted Pupils** (Pupils who show evidence of emotional instability or psychological disturbance and require special educational treatment in order to effect their personal, social or educational re-adjustment). Five pupils were ascertained as requiring education at special schools or Boarding in Homes.

One boy aged 12 was admitted to Southfields Hostel in May, 1952.

One boy aged 10 has been at Sutcliffe School since September, 1951.

One boy aged 11 has been at Sutcliffe School since May, 1951.

One boy aged 12 has been at Rowdeford House since October, 1951.

Three boys and one girl are still awaiting vacancies at a school or hostel for maladjusted pupils.



**10. Physically Handicapped Pupils** (Pupils not being pupils suffering solely from a defect of sight or hearing who, by reason of disease or crippling defect, cannot be satisfactorily educated in an ordinary school, or cannot be educated in such a school without detriment to their health or educational development).

One boy aged 8 was recommended school for physically handicapped pupils and is awaiting a vacancy.

One girl aged 12 has been at Dame Hannah Rogers School for Physically Handicapped since 1950.

Five children are awaiting admission to a special school, three of whom are receiving home tuition.

**11. Spastic Paralysis.** In my last annual report I referred to negotiations that were proceeding with regard to the establishment of a Spastic Unit in Swindon.

It is most gratifying to report that the unit, after being officially opened by Lord Horder on October, 1952, started to function in December.

The unit is housed in the Regional Hospital Board's premises at the Physiotherapy Department, Community House, Faringdon Road, and at present the room available can accommodate not more than ten pupils.

At present there are eight pupils on the roll, whose ages range from five to fourteen years. Four of these children belong to Swindon and four come from the County areas around. At present these children are attending the unit on three half days per week, transport being arranged through the Ambulance Service. As the children become accustomed to the routine of the unit, the number of attendances and the times during which they attend will be increased until they attend for the whole day, five days per week.

The Education Committee provide the teacher, and the teaching facilities and equipment, and the Regional Hospital Board provide the premises and the services of their Physiotherapy Department. The services of the speech therapist, Miss Ansell, are made available to the unit for one session per week.

The special chairs and desks, made to the requirements of the pupils, were designed by the Consultant in Physical Medicine, Dr. J. B. Stewart, and made on the premises by the carpenter attached to the occupational therapy staff. In conjunction with the carpenter, the teacher, Miss Barham, has made many most ingenious aids to the teaching of the children.

The parents of the pupils have been most encouraged by the thought of the boon the unit should bring to them, and have willingly volunteered to attend on a rota system to help in the general physical management of the children.



As the time of attendance of the children is increased to the full day, arrangements will have to be made for the provision of meals. It is hoped that the Ministry of Education will approve of the unit as a special class for handicapped pupils, so that the meals may be provided through the School Meals Service. Such approval too is desired so that other administrative matters concerning the unit will be regularised.

It will be most interesting to watch the progress of the children at the unit, both as regards physical and educational progress, and the success or otherwise of the unit should be judged on this alone.

Before admission to the unit, the mental and physical attainments of the pupils were assessed, and periodic examinations will be carried out by the School Medical Officers.

### PHYSICAL WELFARE OF CHILDREN

#### Milk in Schools Scheme.

The results of a survey taken on one day in October, 1952, are as follows (figures in brackets represent a similar survey taken on one day in October, 1951).

#### Survey taken on one day in October, 1952.

Total number primary children taking milk 5,917, representing 85.27% of children attending school at the time. (5,415, representing 83.93%).

Total number secondary children taking milk 2,167, representing 66.55% of children attending school at the time. (2,239 representing 66.92%).

Total number Central Primary children taking milk 36, representing 83.72% of children attending school at the time. (44, representing 93.33%).

All milk is pasteurised and is supplied in  $\frac{1}{2}$  pint bottles.

Number of school departments supplied is 36.

All milk supplied to schools is sampled at regular intervals, and any complaints regarding it are reported to the office for action.

#### Meals in Schools.

I am indebted to the Education Officer for the following details of the numbers of school children having school meals.

		Oct. 1952	Oct. 1951
Number of School canteens	-	37	27
Number of children taking meals	-	2,275	2,121
Number of children taking free meals	-	405	541



**A RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED  
31st DECEMBER, 1952, WITH COMPARATIVE FIGURES FOR 1951.**

Defect or Disease	Periodic Inspections No. of defects			Special Inspections No. of defects		
	Requiring treatment		Requiring to be kept under observation but not requiring treatment	Requiring treatment		Requiring to be kept under observation but not requiring treatment
	1952	1951		1952	1951	
Skin	36	34		909	781	1
Eyes:—			55			1
a. Vision	233	317	32	139	60	1
b. Squint	52	45	6	4	5	1
c. Other	13	8	11	297	323	13
Ears:—						
a. Hearing	6	9	7	14	17	—
b. Otitis Media	15	8	8	2	2	1
c. Other	7	12	4	209	152	—
Nose or Throat	95	159	151	304	236	3
Speech	9	16	15	4	8	2
Cervical Glands	4	6	60	49	39	—
Heart & Circulation	7	7	69	10	4	1
Lungs	29	30	45	31	19	6
Developmental:—						
a. Hernia	—	5	4	3	2	—
b. Other	2	2	40	6	13	6
Orthopaedic:—						
a. Posture	24	107	16	2	3	—
b. Flat foot	32	60	42	3	3	—
c. Other	39	28	58	8	17	1
Nervous system:—						
a. Epilepsy	6	4	4	3	5	1
b. Other	6	5	17	11	17	3
Psychological:—						
a. Development	9	4	7	12	7	1
b. Stability	6	19	2	12	24	5
Other	14	60	53	1638	2387	49



### CHILD GUIDANCE SERVICE, 1952.

The Child Guidance Service, which was first established in the Borough of Swindon in April, 1951, has been further consolidated in its first full working year. It has continued to function at 81, Bath Road, Swindon, on Thursday of each week during the school term times. The members of the Child Guidance Team have continued to be:—

Dr. K. C. P. Smith—Consultant Psychiatrist

Mr. H. R. Melrose—Educational Psychologist

Miss N. P. Comber—Social Worker

Miss H. R. Copping—Clerical Assistant

The fact that the members of the Team are the same certainly makes for greater efficiency in dealing with the many emotional problems which are referred to such a service. In addition, cases have continued to be referred from those County children living in the Highworth, Malmesbury, Wootton Bassett, Marlborough and Stratton St. Margaret areas.

#### Case Load.

In the course of 1952, 47 new cases were referred, of whom 37 were seen by Dr. Smith and Mr. Melrose, and whose homes were visited by Miss Comber. The other ten children were seen by Mr. Melrose only, as they were primarily of an educational and psychological nature, and the homes were also visited by the Social Worker. Of these 47 children, 29 were carried forward to 1953 and the remaining 18 were either seen as consultation only or discharged as improved at the end of 1952. As compared with 1951, when five children of low intelligence were referred for consultation only, there were three in 1952 who were considered not likely to profit from Child Guidance treatment. Again, as in 1951, those three children were recommended for attendance at the Central Primary School for educationally sub-normal pupils or for attendance at the Swindon Occupation Centre. Of the 18 children who were carried forward from 1951 to 1952 for further treatment, 16 of these were discharged in the course of the year and two have been carried forward to 1953. Thus, in all, 31 children from 1951 to 1952 will be seen again in the course of 1953. During 1952, Dr. Smith carried out 206 therapeutic interviews and Mr. Melrose 67 interviews for the assessment of intelligence and subsequent remedial interviews, also 16 children were invited for 116 sessions of play therapy under the Social Worker's supervision. The majority of the children referred were of the primary school age, which is in accordance with the figures published by most Child Guidance Centres throughout the country.



### Referrals.

As in 1951, the majority of the 47 children referred came through the Borough Medical Officer which provides an effective filter service, as the relevant documents and histories of the children are so readily available in his Department.

### Children's Problems.

The problems for which the 47 children were referred are summarised under the following headings:—

		1952	1951
1.	Nervous Disorders - - -	6	2
2.	Habit Disorders and Physical Symptoms	17	9
3.	Behaviour Disorders - - -	14	19
4.	Educational and Vocational Difficulties	10	5

It will be noted, as compared with 1951, that there has been an increase in the number of children referred for habit disorder and physical symptoms, and this is accounted for by the fact that more children suffering from speech difficulties and enuresis have been referred by the School Medical Officers.

The distribution of ages of children referred is as below:—

Ages	2 yrs. & under	3	4	5	6	7	8	9	10	11	12	13	14	15	16 & over	Total
YEAR 1951																
Children	1	2	2	1	3	0	1	4	3	7	2	4	3	2	0	35
YEAR 1952																
Children	1	1	0	3	2	3	8	6	9	4	2	3	3	2	0	47

The distribution of Intelligence of the children referred is as below:—

I.Q.	Below Average 54 & below 55-70 71-85			Average 86-100 101-115		Above Average 116-130 131-145 145 & over			Total	Year
Children	1	4	8	9	8	5	0	0	35	1951
"	1	2	10	9	17	7	1	0	47	1952
Percentage	3%	11%	23%	26%	23%	14%	0%	0%	100	1951
"	2%	4%	21%	20%	36%	15%	2%	0%	100	1952

There has been a welcome tendency in 1952 to refer more children of higher intelligence with problems of varying degrees of maladjustment rather than those of below average intelligence with educational problems, and who require special educational treatment either in a special school or in an ordinary school.



The members of the Child Guidance Team would particularly like to thank Dr. James Urquhart, Medical Officer of Health, and his staff for their unfailing assistance and co-operation in the administration of the Centre. Mr. Melrose would very much like to thank the Head Teachers, all of whom he has now had the opportunity of meeting, for their full reports and co-operation in dealing with the children referred to the Centre. Dr. Smith and Mr. Melrose are also glad to have had the opportunity of attending one of the Head Teachers' Association meetings in Swindon.

### SCHOOL DENTAL SERVICES.

We were fortunate to have the services of two Dental Officers during the year, which made it possible to resume periodic inspections.

#### DENTAL INSPECTION AND TREATMENT CARRIED OUT DURING THE YEAR 1952.

(1) Number of children inspected by the Authority's Dental Officers:—			
(a) Periodic age groups	-	-	1,223
(b) Specials	-	-	736
Total (1)			1,959
(2) Number found to require treatment	-	-	1,472
(3) Number referred for treatment	-	-	1,472
(4) Number actually treated	-	-	1,917
(5) Attendances made by pupils for treatment	-	-	5,725
<hr/>			
(6) Half-days devoted to: inspection	-	-	15
treatment	-	-	549
Total (6)			564
<hr/>			
(7) Fillings: Permanent teeth	-	-	1,472
Temporary teeth	-	-	154
Total (7)			1,626
<hr/>			
(8) Number of teeth filled: Permanent teeth	-	-	1,419
Temporary teeth	-	-	154
Total (8)			1,573
<hr/>			
(9) Extractions: Permanent teeth	-	-	527
Temporary teeth	-	-	1,468
Total (9)			1,995



(10)	Administration of general anaesthetics for extraction	-	-	-	-	734
(11)	Other operations: Permanent teeth	-	-	-	-	643
	Temporary teeth	-	-	-	-	864
Total (11)						1,507

### **PROTECTION OF SCHOOL CHILDREN AGAINST TUBERCULOSIS.**

There was no visit of the Mass Radiography Unit to Swindon in 1952.

### **MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHING AND TO THE TEACHING PROFESSION.**

In accordance with Ministry of Education Circular 249, candidates applying for admission to training colleges are examined by the School Medical Officers of the areas where they live. This procedure was adopted as from 1st April, 1952.

During 1952, 21 examinations of such candidates were carried out by the School Medical Officers in Swindon.

### **THE CHILDREN ACT, 1948.**

Boarded-out children attending school in the Borough are examined bi-annually by the School Medical Officers as required by the Act.

During 1952, 41 such examinations were made.

### **SCHOOL PREMISES.**

School premises are inspected by the Medical Officers at the conclusion of routine medical inspections. Any defects noted are reported to the Education Committee.



## REPORT OF THE AREA MEDICAL OFFICER FOR THE YEAR ENDED 1952.

I have pleasure in submitting the report of the Area Medical Officer of Swindon for the year 1952.

As previously, the report deals exclusively with the services provided under Part III of the National Health Service Act 1946 which have been delegated to the Area Sub-Committee, i.e., excluding the Ambulance Service and the Mental Health Service.

Circular 29/52 of the Ministry of Health, dated 19th August, 1952, requested Medical Officers of Health of Local Health Authorities to provide a special survey of local Health Services provided under the National Health Service Acts. At the request of the County Medical Officer of Health, a report on the working of these services as far as they concerned the Swindon Area was submitted, and as this report gives a precise review of the position here, I am quoting it in full.

Where I have thought it advisable to enlarge on any sections of the above survey, I have done so in conjunction with the various statistical tables.

### Medical Staff.

Medical Officer of Health—JAMES URQUHART,  
M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health—W. B. A. SMYTH,  
M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health—S. B. S. SMITH,  
L.M.S.S.A., D.T.M. & H.

## SURVEY OF LOCAL HEALTH SERVICES SWINDON AREA.

### General.

#### 1. Administration.

Comments under this heading will be given in the County Medical Officer's report.

#### 2. Co-ordination and co-operation with other parts of the National Health Service.

In Swindon the Medical Officer of Health is a member of the Hospital Management Committee and through the various sub-committees he is able to achieve a measure of contact and liaison with the Hospital Services and Specialist Services.

The only method of liaison with general practitioners is by personal contract.



It is suggested that closer liaison between the Local Authority Services and the practitioners could be achieved through the Executive Council and the Medical Practices Committee.

Health Visitors are in direct liaison with the Hospital Almoner and indirectly with general practitioners through the Area Medical Officer. While it is thought that closer co-operation between hospitals, general practitioners and health visitors could be achieved, the shortage of health visiting staff makes any new call on their services impracticable at the present time.

District Nurses are in direct contact with general practitioners and hospitals, and this arrangement works satisfactorily. It is felt, however, that some practitioners and the hospitals do put an undue burden of work on the nurses which is, strictly speaking, outside their province. Circular letters on such matters are from time to time sent to all general practitioners in the town.

### 3. **Joint use of Staff.**

On two sessions each week Ante-natal Clinics are held at which general practitioners attend.

The only specialist hospital clinics now held in Swindon for the Local Health Authority are the Specialist Eye Clinics, one for premature infants and one for children up to school leaving age.

### 4. **Voluntary Organisations.**

In Swindon the Old People's Welfare Committee is now functioning and the Health Department is now calling for their services in certain cases.

Similarly with other voluntary organisations calls for their help are not infrequently made in special circumstances.

## **PARTICULAR SERVICES.**

### 5. **Care of Expectant and Nursing Mothers and Children under school age.**

**Expectant and nursing mothers.** In Swindon, ante-natal and post-natal clinics are conducted in conjunction with the local hospital maternity organisation. Premises owned by the Local Health Authority have been fully equipped and are staffed by medical officers on the staff of the Maternity Hospital and each district midwife renders general assistance. The clinical arrangements are under the guidance of the Consultant Obstetrician and Gynaecologist. The Consultant holds one session weekly for obstetrical purposes. In addition, on two sessions each week ante-natal clinics are held at which a general practitioner is in attendance.

I have no knowledge of any special clinics existing in general practitioners' own premises.

At each of the clinics held, full facilities exist for blood testing, and in this matter the local Pathological Laboratory is also involved.

The procedure regarding unmarried mothers can be said to be in line with that existing in the rest of the County.



Maternity outfits are stocked at the central office and no difficulties have been experienced in the issue of these, and, from the statistics available, it is clear that most mothers take advantage of this facility.

### **Child Welfare.**

Child welfare clinics, staffed by a doctor, are held on four sessions per week in three premises in the town.

Until recent years a Paediatric Consultant Clinic was held at the Central Clinic, and this proved to be very valuable to us. Unfortunately all such clinics have been withdrawn to hospital premises in the town, and as a result the information passing between Hospital Authority and Local Health Authority is not as adequate as it might be, and, by virtue of the correspondence involved, somewhat laborious.

From time to time a medical officer holding an appointment at the hospital "sits in" at Infant Welfare sessions.

Attendances at the Infant Welfare clinics in the town continue to be high, and recently have shown a tendency to increase.

As far as is known, no special clinics for child welfare are held by practitioners on their own premises.

### **Care of Premature Infants.**

Generally, it can be said a premature infant born at home is transferred to the local Maternity Hospital which possesses a premature infant unit. Any liaison with the hospital for this purpose, and also for the purpose of ascertaining adequacy and suitability of the home when the time for discharge arises, is completely satisfactory.

### **Supply of Dried Milks, etc.**

A representative of the local office of the Ministry of Food attends at all Infant Welfare clinics for the purpose of distributing welfare foods, and I understand that there is no diminution in the demand for these products. Similarly, the sale of the Local Health Authority's dried milks and nutrients is carried out at each of these clinics, and no difficulties have been experienced in this connection.

### **Dental Care.**

When the dental staff is complete, the arrangements made for the dental care of expectant and nursing mothers and young children are comparatively simple, as it has always been the practice in Swindon for the staff at ante-natal clinics to refer cases directly to the dental surgeons. The same can be said in the case of young children, and the fact that the dental clinics are established in the same premises as those used for Infant Welfare clinics is an added advantage. The difficulty in obtaining dental officers to work in the Local Authority Service makes it impossible to maintain an adequate dental service.



## 6. **Domiciliary Midwifery.**

The arrangements which have been worked out for this area concerning the supervision of the domiciliary midwives continue to be very satisfactory. The non-medical supervision is carried out by the staff of the County Medical Officer, and this interest also extends to midwives not employed by the Local Health Authority. Each of the six domiciliary midwives is trained in analgesics, and all midwives are in possession of gas and air outfits.

The domiciliary midwives hold booking clinics in two centres in the town and carry out ante-natal supervision at these clinics in addition to domiciliary visiting. Each midwife is well-versed in the arrangements laid down for assistance in the case of emergencies; in particular, requests for the "Flying Squad" maintained by the Maternity Hospital continue to result in complete co-operation. No major difficulties occur in the association between the Authority's midwives and the general practitioners, although minor difficulties are experienced from time to time.

Generally speaking, the most frequent difficulty that arises is where a general practitioner books a case for a home confinement in home circumstances which the Local Health Authority officers do not consider adequate. If the practitioner refuses to yield to persuasion in such a case, it is considered that the midwife and the Local Health Authority should have the right to appeal to a referee whose decision is binding on the practitioner and the Local Health Authority.

In Swindon, all cases making application for admission to the Maternity Hospital for whom there are no medical indications, are visited by the health visitors, who report to me upon the home and general conditions. After consideration of these reports, recommendations are made to the Consultant Obstetrician, and, generally speaking, this system is working very satisfactorily.

Of the six domiciliary midwives, five are approved Midwifery teachers, and as the local Maternity Hospital is a Part II Training School, it is customary for these midwives to take under their care pupils for domiciliary training. In addition, an arrangement has been in force whereby pupils from another hospital in the County are similarly accommodated. These arrangements have been worked out in a very satisfactory manner, and owing to the number of midwifery cases in the area, no difficulties are experienced in obtaining sufficient cases for the pupils.

## 7. **Health Visiting.**

Until the past year, the establishment of health visitors in Swindon has been maintained. Since the advent of the National Health Service Act, the health visitors' duties have been extended to all classes in the community. Great use is made of the service in the care of chronic sick and aged, and much of the health visitors' time is taken up in investigating cases brought to our notice.



The health visitors attend all Infant Welfare clinics, and in two instances conduct Baby Clinics at which no doctor is present.

The local general practitioners are acquainted with the service which can be provided by health visitors, and on many occasions take advantage of this, particularly regarding the care of infants and young children.

Facilities are provided for the attendance of health visitors at refresher courses under the policy laid down by the County Council and this generally extends to one health visitor in each year.

#### 8. **Home Nursing.**

The complement of home nurses in Swindon is, at the present time five, but this number will be increased to seven during the next two months, the County Council having given approval for the additional appointments during the next financial year. The home nurses are controlled directly by the Area Medical Officer and adequate arrangements exist for the transmission of calls from hospitals and general practitioners for the services of nurses. Each general practitioner in the town is in possession of a street list giving the name of the home nurse concerned, and no difficulties are experienced in this connection.

During time of sickness, particularly the winter months, considerable difficulty has been experienced in maintaining these services with the low number of staff available. In view of the expansion already mentioned, some relief is anticipated.

The main types of cases attended by home nurses are:—

1. General nursing of chronic invalids.
2. Injections—penicillin, etc.
3. Preparation of cases for X-ray examinations (high colonic washouts, etc.)

Whilst there are no arrangements made for a night service, all district nurses are on call at any time of the day and, in fact, calls during the late evening and night are fairly frequent.

Up to the present time, no district nurses have been sent on refresher courses and no training facilities exist in Swindon.

#### 9. **Vaccination and Immunisation.**

Immunisation and vaccination clinics are held in Swindon as follows:—

Immunisation—weekly.

Vaccination—fortnightly.

In regard to whooping cough, no organised immunisation clinics are held, but on the request of parents any child attending an Infant Welfare clinic is immunised. The immunisation is normally carried out at the time of the request—preferably before the age of 6 months but frequently after diphtheria immunisation at 8 months.



When a child is aged 3 months the parents are sent a letter advising vaccination if this has not already been carried out. If there is no response, this is followed up at 3 monthly intervals with further reminders, and a list of those who do not respond is passed to the health visitors for home visiting.

Posters and propaganda materials are available at all clinics, and the health visitors are continually urging parents to consent to these procedures. Public notices and posters are also used in this campaign.

A similar scheme is in force with regard to diphtheria immunisation, but the first letter is sent out just before the child is aged 8 months. Another communication regarding booster injection is given to each child on starting school.

#### 11. **Prevention, Care and After Care.**

This service in Swindon follows the County Council Scheme.

#### 12. **Domestic Help.**

The staff at present employed in Swindon is as follows:—

Whole time Domestic Helps	-	-	17
Part-time Domestic Helps	-	-	6

The demands for this service are continually greater than we are able to supply. During epidemic times this establishment of domestic helps is quite inadequate to give even minimum help to all who call for it.

There are no facilities in Swindon for training domestic helps.

#### 13. **Health Education.**

The Borough Council pays annual subscriptions to British Council for Health Education, the Accident Prevention Council, and the M.O.H. and Chairman of the Health Committee are members of the Council of the National Baby Welfare Society. Literature and health education pamphlets and posters are obtained from these bodies and distributed for exhibition in the clinics and on notice boards.

The health visitors give talks on health education to the mothers attending Child Welfare clinics, and regular cinema shows were held in the larger clinics.

Health talks are willingly given to various groups of people such as Townswomen's Guild, Business and Professional Women's Association, etc.

Clean food campaigns have been held, and talks on this subject have been given by the M.O.H. and his staff to various groups of food handlers in the town.

It is hoped that a booklet on this subject (with a foreword by the M.O.H.) will shortly be available for distribution throughout the town.



Cinemas in the town have shown films on health subjects and have co-operated in propaganda generally.

The subject of accidents in the home is at present under discussion, and with the co-operation of the Accident Surgeon, it is hoped to produce a report on such accidents and their prevention.

Recently, as a result of representations made to the Borough Architect, it has been agreed to equip all Council houses with fire guard fixtures. Plans for new houses, and especially old people's bungalows, are discussed between the officers concerned with a view to eliminating structural accident hazards and incorporating devices which will make the houses as far as possible accident-proof.

### HEALTH CENTRE.

#### Dental Department.

Dental Surgeons	-	2	Dental Attendants	-	2
Dental Technicians		4	Dental Receptionist	-	1

During the year there were 10,218 attendances for treatment, and the following work was carried out:—

Scalings	FILLINGS		Extractions	X-rays	DENTURES		Treatments
	Amalgams	Synthetic			Repairs	Manufactured	
382	1832	293	2330	428	577	746	4778

#### Pharmacy.

The Pharmacy dealt with 125,490 prescriptions during the year.

### ANTE-NATAL AND POST-NATAL CLINICS.

Clinics at which a doctor is in attendance are held weekly as follows:—

37, Milton Road (until 31st March)	Tuesdays Thursdays	{	1-30 to 4 p.m.
Beech Avenue	Mondays Fridays	{	1-30 to 4 p.m.
Bath Road (until 25th April)	Wednesdays Fridays	{	10-30 a.m. to 12-30 p.m.
Bath Road (from 28th April)	Mondays		1-30 to 4 p.m.

	1952	1951	1950
Number of women who attend these clinics during the period	-	-	-
Number of attendances made during the period	731	794	924
	3,078	3,786	4,199



Two general practitioners are employed on a sessional basis at Pinehurst clinic.

From these figures, it will be seen that the number of women attending these general practitioners' clinics has continued to fall. The majority of patients now book a doctor as well as a midwife. The practitioner booked is paid his fee on condition that he carries out ante-natal care and a post-natal examination. One assumes then that all the ante-natal care necessary is being carried out by the doctor in question, so that there is no need for his patients to attend at a clinic run by another doctor. These clinics then serve a much smaller clientele, namely those mothers booked for a midwife only and some hospital patients who find it more convenient to attend our clinics rather than those run by the Hospital Services. On the other hand, a practitioner might find it useful to send his patients to the clinic for such procedures as venepuncture and urine testing while he undertakes the purely physical examination of his patients. From both the patients' and the doctors' point of view, this might be a more efficient method of procedure, but one must consider whether the expenditure of public money to maintain clinics for this purpose is justifiable. In Swindon a patient can, with little inconvenience, attend at the pathological laboratory at Gorse Hill to have her blood samples taken or any other laboratory tests performed.

I feel, therefore, that the present attendances at our clinics will have to be carefully watched, and if they continue to fall, the number of clinics held will have to be reduced.

In addition to the above clinics, the arrangements whereby the Regional Hospital Board Obstetrical and Gynaecological clinics are held on County Council premises continues.

On 25th April, the clinics at Milton Road were transferred to the new clinic at 81, Bath Road. Until Dr. Griffith left on 31st January, he conducted one of the ante-natal clinics at Bath Road. Since then, this clinic has been staffed by the Resident Medical Officer of the Maternity Hospital.

The Local Authority clinics are staffed by the district midwives on a rota system.

### INFANT WELFARE CLINICS

Centre	Day and Time 2 — 4 p.m.	Number of consulta- tions with doctor	Number of attend- ances
61 Eastcott Hill	... Wednesday & Friday	1695	4434
Beech Avenue, Pinehurst	Tuesday & Wednesday	788	3590
Gorse Hill	... Wednesday*	11	515
Rodbourne	... Thursday†	51	224
Moredon	... Monday	45	1565
Bath Road	... Friday	597	1552

\* Discontinued 26th March, 1952—Recommenced 3rd December, 1952

† Discontinued 27th March, 1952.



### CARE OF PREMATURE INFANTS.

Number of premature babies born:—

(i)	At Home	-	-	-	-	26
(ii)	In Hospital or Nursing Home	-	-	-	-	8

Number who died during the first 24 hours:—

(i)	Born at Home	-	-	-	-	—
(ii)	Born in Hospital or Nursing Home	-	-	-	-	—

Number who survived at end of one month:—

(i)	Born at Home	-	-	-	-	26
(ii)	Born in Hospital or Nursing Home	-	-	-	-	7

### DENTAL CARE

CLASS	Numbers provided with Dental care			Forms of Dental Treatment provided								
	Examined	Needing Treatment	Treated	Extractions	Anaes- thetics		Fillings	Scalings or Scaling & gum treatment	Silver Nitrate Treatment	Dressings	Den- tures	
					Local	General					Partial	Complete
Expectant & Nursing Mothers	28	28	28	76	26	11	6	10	—	20	6	4
Children under five	154	123	115	142	3	73	15	7	29	178	—	—
TOTALS	182	151	143	218	29	84	21	17	29	198	6	4

Patients for X-rays are referred to the Victoria Hospital.

Dentures are sent to an outside mechanic.

### SUPPLY OF WELFARE FOODS.

During the year 3,588 packets of infant foods were sold for which £477-3-4 was received. This shows a marked increase from the amount sold last year, when 2,872 packets were sold and £354-3-4 received.

### PROVISION OF MATERNITY OUTFITS.

During the year 526 maternity outfits were supplied from this office as compared with 567 during 1951.



**DAY NURSERIES.**

	Number of Nurseries	Number of Approved Places		No. of children on the Register at the end of the year		Average daily attendance	
		0-2	2-5	0-2	2-5	0-2	2-5
Nurseries maintained by the Council ...	2	20	45	6	32	3	28

The two Day Nurseries in Swindon provided for 65 children and at the beginning of the year the average number of daily attendances was 45.

**FAMILY PLANNING ASSOCIATION.**

The Family Planning Association continues to hold clinics at Eastcott Hill clinic weekly.

**TREATMENT OF INFANTS FOR ORTHOPAEDIC AND OPHTHALMIC DEFECTS.**

46 children were referred to the Orthopaedic Clinic at St. Margaret's Hospital.

40 cases attended the Surgeons' Sessions and made 112 attendances.

16 cases attended the Sisters' Sessions and made 76 attendances.

52 children were seen by the Ophthalmologist, making 118 attendances.

20 cases attended the Premature Baby Eye Clinic and made 67 attendances.



**MIDWIFERY SERVICE.**

The following is an analysis of the midwifery carried out in the area during the year:—

Category	Domiciliary Cases		Cases in Institutions		Total	
	As Midwives	As Maternity Nurses	As Midwives	As Maternity Nurses	As Midwives	As Maternity Nurses
(1) Midwives employed by the Authority	437	49	—	—	437	49
(2) Midwives employed by Hospital Managemt. Committee	—	—	610	119	610	119
(3) Midwives in Private Practice	1	1	—	168	1	169
Totals:	438	50	610	287	1048	337

**ADMINISTRATION OF GAS AND AIR ANALGESIA.**

All six of the midwives are qualified to administer gas and air analgesia.

Analgesia was administered in 407 cases where the midwife acted as such and in 41 cases where the midwife acted as maternity nurse, making a total of 448 administrations in 486 cases.

**MIDWIVES ACT, 1951.**

Medical Aid was summoned in 36 domiciliary cases during the year.

**HEALTH VISITING.**

Number of visits paid by Health Visitors (figures for 1951 in brackets):—

Expectant Mothers		Children under 1 year of age		Children between the ages of 1 & 5	Other Classes
First visits	Total visits	First visits	Total visits	Total visits	Total visits
46 (77)	63 (89)	1038 (1021)	4314 (4568)	5067 (5384)	1927 (2821)



Number of live births notified during the year 1,376 (1,427)

Number of stillbirths during the year - 33 (35)

Included in "Other Classes" in this Table are 290 (1,306) visits to cases of infectious diseases and 509 (669) visits to cases of tuberculosis.

### HOME NURSING.

#### DETAILS OF WORK CARRIED OUT BY HOME NURSES

	No. of cases
Respiratory diseases (excluding tuberculosis)	162
Digestive diseases	43
Heart and Arteries	110
Veins and other circulatory diseases	85
Genito-urinary	53
Skin	181
Ear, Eye and other sense organs	116
Cancer (and other neoplasms)	64
Cerebral lesions of vascular origin	21
Infectious and (parasitic) diseases	74
Diabetes	20
Injuries	35
Tuberculosis	18
Bones and organs of movement (mainly rheumatism)	30
Pregnancy	19
Mental and other nervous diseases	14
Other diseases or ill defined	161
Preparation for X-ray examinations	29
Total number of cases	1,235

### VACCINATION AND IMMUNISATIONS.

During the year 205 vaccinations were carried out at the clinics and the total vaccinations performed by clinics and private doctors is summarised on the following table.

	Under 1 year	1 to 4 years	5 to 14 years	15 years and over	Total
Primary Vaccination	235	30	14	36	296
Re-Vaccination	—	6	3	58	86
TOTALS	235	36	17	94	382



**Immunisation.**

			1952	1951
Number of clinics held	-	-	76	92
Number of Attendances	-	-	1,210	1,419
Number of children who have completed course	-	-	587	620
Number of children immunised by general practitioners	-	-	140	175
Total number immunised	-	-	727	795
Re-inforcing injections, including general practitioners	-	-	121	118

**PROVISION OF NURSING EQUIPMENT AND APPARATUS**

Appliance				On Payment	On Free Loan
Invalid chairs	-	-	-	67	1
Air Rings	-	-	-	153	—
Waterproof Sheets	-	-	-	127	3
Bed Pans	-	-	-	158	1
Bed Rests	-	-	-	110	1
Bed Slippers	-	-	-	50	—
Crutches	-	-	-	10	—
Urinals	-	-	-	52	1
Air Beds	-	-	-	5	1
Bed Cradles	-	-	-	9	—
Bed Tables	-	-	-	—	—
Mattresses	-	-	-	3	—
Inhalers	-	-	-	—	—
Walking Sticks	-	-	-	1	—
Feeding Cups	-	-	-	19	—
Diabetic Spring Balances	-	-	-	—	—



**DOMESTIC HELP.**

Number of full-time domestic helps on books at the end of the year	-	-	-	17
Number of part-time domestic helps on books at the end of the year	-	-	-	6
Number of householders helped during the year:—				
(a) Maternity cases	-	-	-	84
(b) Other cases	-	-	-	155
			Total	239
Number of hours of assistance provided during the year:—				
(a) Maternity cases	-	-	-	6,723
(b) Other cases	-	-	-	28,557
			Total	35,280
Number of domestic help hours available	-			37,352
Number of cases in which full fee was not charged				218

**JAMES URQUHART,**

**Area Medical Officer.**



