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THE HEALTH OF  
THE CITY OF YORK  
1968



**S. R. W. MOORE, M.D., D.P.H.**

*Medical Officer of Health and Principal School Medical Officer.*



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## COMMITTEES AND STAFF

### **HEALTH COMMITTEE, 1968-69**

The Rt. Hon. The Lord Mayor  
(Councillor Mrs. M. M. Armitage, J.P.)

Councillor G. W. Banwell, *Chairman*

Councillor J. M. Wood, *Vice-Chairman*

Alderman E. L. Keld	Councillor R. H. Glew
Alderman A. Kirk	Councillor T. Hibbert
Alderman (Mrs.) I. G. Wightman	Councillor C. W. Oliver
Councillor (Mrs.) F. M. Beck	Councillor S. Palphramand
Councillor G. Blades	Councillor L. Spofforth
Councillor H. V. Boulton	Councillor S. Stewart
Councillor (Mrs.) M. S. Bwyne	Councillor C. Thorpe

#### **Co-opted Members :—**

Miss F. M. Dodd	R. Park, Esq., L.D.S.
Miss F. E. R. Jewitt	Dr. T. H. Park
Dr. A. I. MacLeod	

### **ENVIRONMENTAL HEALTH SUB-COMMITTEE**

Councillor J. M. Wood, *Chairman*

Alderman A. Kirk	Councillor T. Hibbert
Councillor G. W. Banwell	Councillor C. W. Oliver
Councillor (Mrs.) F. M. Beck	Councillor S. Palphramand
Councillor G. Blades	Councillor C. Thorpe
Councillor R. H. Glew	

### **MATERNITY AND GENERAL WELFARE SUB-COMMITTEE**

Councillor G. W. Banwell, *Chairman*

Alderman E. L. Keld	Councillor S. Stewart
Councillor (Mrs.) F. M. Beck	Councillor J. M. Wood
Councillor H. V. Boulton	Miss F. M. Dodd
Councillor (Mrs.) M. S. Bwyne	Miss F. E. R. Jewitt
Councillor R. H. Glew	Dr. A. I. MacLeod
Councillor C. W. Oliver	

### **MENTAL HEALTH SUB-COMMITTEE**

Councillor (Mrs.) M. S. Bwye, *Chairman*

Alderman A. Kirk	Councillor S. Palphramand
Alderman (Mrs.) I. G. Wightman	Councillor S. Stewart
Councillor G. W. Banwell	Councillor C. Thorpe
Councillor (Mrs.) F. M. Beck	Miss F. E. R. Jewitt
Councillor G. Blades	Dr. T. H. Park
Councillor H. V. Boulton	

### **"HOWE HILL" HOUSE SUB-COMMITTEE**

Alderman (Mrs.) I. G. Wightman	Councillor (Mrs.) M. S. Bwye
Councillor G. W. Banwell	Councillor S. Palphramand
Councillor H. V. Boulton	

### **AMBULANCE SERVICE SUB-COMMITTEE**

Councillor C. W. Oliver, *Chairman*

Alderman A. Kirk	Councillor C. Thorpe
Councillor G. W. Banwell	Councillor J. M. Wood
Councillor H. V. Boulton	Dr. T. H. Park
Councillor S. Stewart	

### **UNIFORMS SUB-COMMITTEE**

Councillor L. Spofforth, *Chairman*

Alderman A. Kirk	Councillor (Mrs.) M. S. Bwye
Councillor (Mrs.) F. M. Beck	Miss F. M. Dodd

### **APPOINTMENTS SUB-COMMITTEES**

Appointments (A)—Councillors G. W. Banwell, R. H. Glew, J. M. Wood.  
Appointments (B)—Councillors G. W. Banwell, H. V. Boulton, (Mrs.) M. S. Bwye.  
Appointments (C)—Alderman A. Kirk, Councillors C. W. Oliver, J. M. Wood.  
Appointments (D)—Councillors C. W. Oliver, S. Palphramand, J. M. Wood.  
Appointments (E)—Councillors G. W. Banwell, H. V. Boulton, (Mrs.) M. S. Bwye.



### **JOINT SUB-COMMITTEE WITH EDUCATION COMMITTEE**

(Appointment of Deputy Medical Officer of Health)

Alderman E. L. Keld

Councillor R. H. Glew

Alderman (Mrs.) I. G. Wightman

Councillor J. M. Wood

Councillor G. W. Banwell

Dr. A. I. MacLeod

### **JOINT PLANNING AND HEALTH SUB-COMMITTEE re ENVIRONMENTAL HEALTH**

Councillor G. W. Banwell

Councillor L. Spofforth

Councillor H. V. Boulton

Councillor J. M. Wood

Councillor R. H. Glew

### **JOINT SUB-COMMITTEE WITH HOSPITAL MANAGEMENT COMMITTEE re COMPREHENSIVE MENTAL HEALTH SERVICE**

Councillor G. W. Banwell, *Chairman*

Alderman A. Kirk

Councillor (Mrs.) M. S. Bwyne

Councillor S. Palphramand

### **JOINT SUB-COMMITTEE re HOMELESS FAMILIES**

Councillor G. W. Banwell

Councillor R. H. Glew

Councillor H. V. Boulton

Councillor J. M. Wood

### **JOINT ADVISORY SUB-COMMITTEE WITH YORK EXECUTIVE COUNCIL AND YORK 'A' HOSPITAL MANAGEMENT COMMITTEE**

Councillor G. W. Banwell

Councillor J. M. Wood

Councillor R. H. Glew

## STAFF OF THE HEALTH DEPARTMENT

### Medical Officer of Health and Principal School Medical Officer

Catherine B. Crane, M.B., B.S., D.P.H. (London) (to 10.6.68)

Samuel R. W. Moore, M.D., D.P.H. (from 1.7.68)

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

Dora Hamshaw, B.Sc., M.R.C.S., L.R.C.P., D.C.H. (from 24.10.68)

### Senior Medical Officers

*Maternity and Child Health:* Emily L. Simon, M.D., B.S., D.C.H., D.P.H.

*School Health Service:* F. B. Shevlin, M.B., Ch.B. (to 30.6.68)

Margaret C. Barnet, M.B., Ch.B. (from 1.7.68)

*Mental Health Service:* Margaret W. Galley, M.B., B.S., D.P.M.

(Joint appointment with Regional Hospital Board)

### Departmental Medical Officers

Margaret C. Barnet, M.B., Ch.B. (to 30.6.68)

Dora Hamshaw, B.Sc., M.R.C.S., L.R.C.P., D.C.H. (to 23.10.68)

I. M. Sutcliffe, M.B., Ch.B., D.P.H.

### Principal School Dental Officer

Graham Turner, L.D.S.

### Chief Public Health Inspector

Norman Hancock, F.R.S.H. (a) (b) (c) (d)

### Public Health Inspectors

**Senior:** L. C. Bryan (a) (b) (c) (d)

**Special:** *Housing:* H. Hall (a) (b)

*Food Hygiene:* W. H. Woodhead (a) (b)

*Meat:* W. Walls (a) (b)

**General:** A. M. Allan (a) (b)

P. D. Beadle (a) (b)

J. Martin (a) (b)

A. G. Shankster (a) (b) (c)



### **Veterinary Surgeon**

G. M. Sutherland, M.R.C.V.S. (part-time)

### **Public Analyst**

Hugh Childs, B.Sc., F.I.C. (Sheffield) (part-time)

### **Superintendent Nursing Officer and Supervisor of Midwives**

Miss A. W. Mather (e) (f) (g) (h)

### **Health Visitor/School Nurses**

#### **Senior Health Visitor**

Miss J. F. Gretton (e) (f) (g) (h)

Mrs. E. Williamson (e) (f) (g)	Mrs. F. M. Platts (e) (f) (g)
Miss M. E. Horn (e) (f) (g) (j)	Mrs. S. Grinstead (e) (f) (g)
Miss L. F. Mousley (e) (f) (g)	Mrs. A. Cruickshank (f) (g)
Mrs. I. C. Mansfield (e) (f) (g) (h)	Miss J. C. M. Baker (e) (f) (g) (h)
Miss L. Jackson (e) (f) (g)	Mrs. P. A. Foster (f) (g)
Miss M. Chilton (e) (f) (g) (h)	(to 15.11.68)
Miss I. M. Enna (e) (f) (g) (h)	Miss M. S. C. Boyle (e) (f) (g) (j)
Miss J. M. Dovaston (e) (f) (g)	Miss J. C. Freeman (e) (f) (g)
Mrs. K. M. Hutchinson (f) (g)	(to 22.7.68)
(from 3.10.68)	*Mrs. H. Shann (e) (f) (g)
*Mrs. L. G. S. Bastow (f) (g)	*Miss A. Bennett (e) (f) (g)
(from 1.2.68)	(from 1.7.68)
Mrs. D. W. Marchant-Smith (e) (f) (g) (from 1.2.68)	

### **Tuberculosis Health Visitor**

Mrs. D. S. Cole (f) (g)

### **Clinic and School Nurses**

Mrs. H. M. Saunders (e) (f)	Mrs. A. T. Nottingham (f)
*Mrs. L. Firn (f)	Mrs. L. Reynolds (f)

### **Special Visitor (Gastro-Enterology)**

\*Mrs. C. M. Dent

\*Part-time Officers.

## **Municipal Midwives**

### **Senior Midwife**

Miss A. Hodgson (e) (f) (h)

Mrs. B. A. Drinkel (e)	Mrs. M. C. Skelton (e) (f)
Mrs. M. W. Gledhill (e) (f)	Mrs. H. E. Whitehouse (e)
Miss J. Marshall (e) (f)	(to 8.10.68)
Miss M. Wilson (e) (f)	Miss A. Goodwin (e) (f)
Miss S. Holdsworth (e) (f) (h)	Miss M. Hughes (e) (f) (g) (h)
(from 2.12.68)	Mrs. G. E. Durham (e) (f)
	(dec. 26.8.68)

## **District Nurses**

### **Senior District Nurse**

Miss J. Douglas (f) (h)

Mrs. A. Doran (f) (h)	L. W. Carolan (f) (h)
Mrs. N. Turnbull (f) (h)	A. E. Heskett (f) (h)
Miss E. M. Metcalfe (f) (h)	Miss V. M. Harrison (e) (f) (h)
Miss C. A. Fox (e) (f) (h)	Miss M. A. Granby (e) (f)
Mrs. D. M. Newton (f) (h)	(from 16.9.68)
Miss M. Clare (f) (j)	Miss N. R. Buckton (e) (f) (h)
Miss J. Cocks (f) (h)	Mrs. A. R. Fewson (f)
Mrs. B. Horsman (f) (h)	Mrs. S. L. Crooks (f) (h)
Miss S. Holdsworth (e) (f) (h)	Miss A. I. Jackson (f) (h)
(to 2.12.68)	(to 10.7.68)
Miss W. S. Davison (f) (h)	Mrs. I. M. Pysanczyn (f)
Mrs. C. Y. Hartas (i)	(from 2.12.68)
Mrs. D. L. Tiller (i)	Mrs. N. Mannion (i)
	Mrs. F. M. Yarrow (i)
	(from 10.6.68)

## **Mental Health**

**Senior Mental Welfare Officer:** G. A. Bradley

**Mental Welfare Officers:**

G. R. Dearlove (f) (j)
W. J. Patton (f) (j)
J. Tiplady (f) (j)
N. Blythe (f) (j) (from 29.4.68)



**Head Social Worker:** Vacant

**Social Worker** T. M. Freeman (to 16.8.68)  
Mrs. P. A. Bridge, B.A. Soc.  
Admin. (from 30.9.68)

**Chief Supervisor, Adult**

**Training Centre:** J. A. Gorman

**Supervisor, Junior Training Centre:** Mrs. R. H. Glew (I)

#### **Day Nurseries**

**Matron, Heworth Day Nursery:** Miss E. C. Otter (k)

**Matron, Acomb Day Nursery:** Mrs. E. M. Adams (e) (f)

#### **Ambulance Officer**

R. H. Hunt,  
and staff of 40

#### **Home Help Organiser**

Miss M. W. Simpson

#### **Health Welfare Officer**

Mrs. M. E. Johnson

#### **Chiropodist**

Mrs. M. C. Cousins

#### **Clerical Staff**

**Chief Clerk:** E. T. Goodrick

**Senior Clerk:** L. W. Richman (to 21.7.68)  
M. R. Foottit (from 29.7.68)

**Section Heads;**

<i>Environmental Health:</i>	W. V. Hadley
<i>Maternity and Child Health:</i>	Miss W. Prest
<i>Mental Health:</i>	Mrs. G. Smith
<i>Ambulance Service:</i>	R. Kilcran

<b>Clerks:</b>	(full-time)	20
	(part-time)	3

- (a)—Statutory Qualification as Public Health Inspector.
- (b)—Qualification in Meat and Food Inspection.
- (c)—Qualification in Smoke Inspection.
- (d)—Qualification in Sanitary Science.
- (e)—State Certified Midwife.
- (f)—State Registered Nurse.
- (g)—H.V. Certificate.
- (h)—Queen's Nurse.
- (i)—State Enrolled Nurse.
- (j)—Registered Mental Nurse.
- (k)—Nursery Nurse.
- (l)—Diploma for Teachers of the Mentally Handicapped.



## INTRODUCTION



August, 1969

My Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my first Annual Report for the City for the year ending 31st December, 1968.

The form of the Report has been revised and is presented in sections on Vital Statistics, Infectious Disease, Environmental Health and the Personal Health Services, with other additional information, and includes the report on the School Health Service for the year.

### **Administration**

In June, Dr. Catherine Crane your Medical Officer of Health and Principal School Medical Officer for twenty-four years retired after thirty-two years of dedicated service to the City. As the only lady Medical Officer of Health of a County Borough, she was a well known national figure, and was recognised by her colleagues as a Medical Officer of Health of distinction. During her period of office she was actively involved in the implementation of the National Health Service and the development of a Comprehensive Mental Health Service in the City. Permanent signs of her work in the form of new buildings are a Health Centre, four purpose-built Health Services Centres, two Training Centres and the Ambulance Station. Recognition of her valued services was made when it was announced in the New Year's Honours List that Her Majesty the Queen had awarded her the Order of the British Empire.

In the latter half of the year the first steps to bring about central administration within the department were taken. The appointment of Dr. Dora Hamshaw as the first Deputy Medical Officer of Health and Deputy Principal School Medical Officer for the City in October assisted in bringing this about, and in the integration of the work of the School Health Service with that of the Health Department as a whole. The Departmental Medical Officers are now jointly appointed to the Local Health and Local Education Authorities and may work in either field; the Senior Medical Officer for Schools has duties in the Health Department and the Senior Medical Officer for Maternity and Child Health in the School Health Service. Health Visitor/School Nurses are already joint appointments. Mr. Threlfall, Chief Education Officer, has been most helpful in bringing about these changes, which ensure continuity of care for the pre-school and school child.

Dr. Shevlin, Senior Assistant School Medical Officer, retired during the year and his sterling work is acknowledged in the introductory letter to the Annual Report on the School Health Service.

During the year the Green Paper on the National Health Service — 'The Administrative Structure of the Medical and Related Services in England



and Wales', and the Seebohm Report — 'Report of the Committee on Local Authority and Allied Personal Social Services' were published. The Green Paper proposed the integration of the Health Services at present divided between the Hospital, General Practitioner and the Local Authority Services and suggested ways of bringing this about. It was a document for discussion and comment and certainly promoted both. There has been general agreement as to the necessity for the unification of the Health Services. Disagreement has been voiced as to the form of administration and the constitution of Area Health Boards, the administering authority, and the size of the area. A new role proposed for the Medical Officer of Health is that of Community Physician, a specialist in community medicine, which holds promise of an extension of his duties particularly in the field of epidemiology and the development of preventive aspects of medical care. We now await a new Green Paper which will present revised proposals for unification in the light of the productive discussion up and down the country.

The Seebohm Report proposes the formation of a new Social Service department to include the present services provided by the Children and Welfare Departments, and certain social services of other departments. Again there is general acceptance of the concept of a Social Service department. There are differences of opinion as to which services should be removed from, for example, the Health Department to form this new department. Unfortunately it has been expressed that an incompatibility between social workers and their medical colleagues exists, but the writer has not experienced this. The two professions, the older medical and younger social, should go forward together, complementing each other in their work. Each has much to contribute to the particular discipline of the other. It is of interest that the disciplines are brought together in York in the person of the recently appointed Deputy Medical Officer of Health. Before taking up her studies in medicine, Dr. Hamshaw was a qualified social worker.

### **Vital Statistics**

The new City boundary changes became effective in April adding to the area approximately 290 acres with a rateable value of approximately £114,300. The population increased as a result by 4,500.

The Infant Mortality Rate for the City (17.0 per 1,000) is continuing the downward trend shown in previous years after the rise last year to 21.2 per 1,000. This compares favourably with the rate for England and Wales of 18.0 per 1,000. The mortality is largely due to congenital abnormalities and prematurity of the infant.

There were no maternal deaths during the year. The total number of deaths increased giving a mortality rate of 12.4 per 1,000, compared with a rate of 11.9 per 1,000 for England and Wales. Sixty four people died of cancer



of the lung, thirteen more than last year, 56 of whom were men and more than half (33) were aged between 45 and 64. Ischaemic heart disease, which includes coronary disease and angina, caused the death of 352 York residents, one fifth (20.7%) of whom were under 64 years of age. The smoking of cigarettes, a known cause of lung cancer, also causes an increased incidence of coronary heart disease and the figures confirm that people in the younger age groups are affected, with dire consequences to the family when a parent is lost at a time when children are to be supported. The need to emphasise the danger of cigarette smoking and the consequences of this habit are again high-lighted.

### **Infectious Disease**

The year saw a change in the regulations with regard to the notification of infectious disease. Some diseases are no longer notifiable and others became notifiable for the first time and are mentioned in the section on Infectious Disease.

Within the department the regime for the investigation of infectious disease has been revised and an infectious disease control section has been set up. A health visitor specialises in the investigation and follow-up of home contacts and there is clerical assistance. Where food premises or hotels are involved the specialist inspector in food hygiene undertakes the investigation. Daily contact is maintained with the Yearsley Bridge Infectious Diseases Hospital, and close contact with the Bacteriological Laboratory of the County Hospital. In this way the incidence of infectious disease in the City can be monitored. Not all notifiable infectious disease is notified, however. General practitioners make increasing use of the assistance of the Health Department investigating service, and few general practitioners fail to notify infectious disease. However, difficulty is experienced where the infection occurs in hospital and repeated reminders are required before notifications of disease, discovered by other means, are received. It is disturbing to note that infectious diseases are treated in hospitals in York, other than at Yearsley Bridge. York has been fortunate in that there have been no hospital outbreaks as in some other areas, but this trend may not be continued if infectious patients are not transferred to Yearsley Bridge as soon as possible. It is also disturbing to note that the Yearsley Bridge Hospital has been allowed to run down to its present limited accommodation. Should the incidence of infectious disease increase, or an outbreak occur, York residents may have to be transferred to Leeds.

### **Environmental Health**

I would refer readers to the Chief Public Health Inspector's introductory remarks to the section on Environmental Health.

A major step forward has been the introduction during the year of Smoke Control in York, when the City of York (No. 1) Smoke Control Order was



made. Most of the air pollution in our cities is now due to smoke from domestic fires. Since the introduction of the Clean Air Act, 1956, pollution from industrial smoke has been abated and industrial firms have co-operated in almost eliminating this source. House-holders must now follow their example to reduce pollution from this remaining source and bring about the beneficial effects of clean air to the health of the citizens of York. The environmental effects of air pollution are illustrated in the two photographs included in this report.

The work on improvement areas has continued, and a third area was begun during the year. The improvement of our older homes is of particular importance in York now that the larger part of the slum clearance programme has been completed, and large areas of houses best treated by slum clearance procedure are not to be found, as in other towns. The Housing Act, 1964 has been criticised because of the cumbersome procedure required in dealing with improvement areas and this has resulted in some authorities not proceeding with this aspect of housing improvement. In York, however, the Public Health staff are to be congratulated on making the Act work, and the proportion of houses improved in the City is well above that in other areas.

During the year a new water treatment plant came into operation at the York Waterworks Company and 33 miles of new mains were laid. Periodical tests have shown that the natural content of fluoride in the York water supply has averaged 0.2. parts per million, *i.e.*, it was just one-fifth the amount which would result in a reduction in the amount of dental decay in the teeth of York children. The beneficial effects on teeth and dental health of fluoride in the water supply has been known for some thirty years. Many criticisms as to its possible ill-effects have been made, and these have been examined and investigated in detail and the criticisms rejected. For example, the Report of the Royal Commission into the Fluoridation of Public Water Supplies in Tasmania (*Medical Journal of Australia*, 1968, 11, 285) categorically stated that 'fluoridation at one part per million is not known to aggravate, dispose to, or be a cause of (a) diabetes, (b) kidney disease, (c) cancer, (d) goitre, (e) diseases of the cardiovascular system, (f) periodontal disease, (g) enzymatic malfunction, (h) teratogenism and disorders of pregnancy or childbirth, (i) mongolism, (j) ectopic calcification within the human body'. No preventive measure has been under such scrutiny for such a long period. 'No valid evidence has been forthcoming of any ill-effects on human health' (from a draft resolution of the World Health Organisation, 21st July, 1969) and the safety of fluoridation of the water supplies is firmly established.

Eighty million people in North America and Europe now drink fluoridated water, two million of whom live in the United Kingdom. The York City Council in July again debated a resolution from the Health Committee of the Council that the York water supply be brought up to the required level of fluoride.



Unfortunately the Council did not agree with the Health Committee's recommendation and it was turned down. However, it was pleasing to note that a greater number of members voted in favour of fluoridation of the water supplies than when the proposal was last before the Council. It is hoped that this trend will continue and that it will not be too long before the fluoride content of our water supplies is adjusted to the required amount and this valuable preventive measure is brought into use with undoubted benefit to our citizens, especially our children.

### **Personal Health Services**

In August the Health Services Centre operating from Duncombe Place was transferred to new premises at Monkgate.

It was hoped that the Duncombe Place premises could be retained for use by the Health Department, *e.g.*, for clinics for the elderly, because of its long history with medical care in York. In 1788 the York Dispensary was established to provide treatment for the sick poor of York both at the Dispensary and in their homes and included a midwifery service. The Dispensary moved from New Street to Duncombe Place in 1890, where its activity and influence were greatly expanded. Staff included a dispenser and a resident medical officer. The work continued until, with the introduction of the National Health Service in 1946, it was no longer necessary and the premises became available to the City Health Department. Dispensary funds, allocated by the York Dispensary Committee, are still used to help persons in need and to give convalescent holidays to the handicapped, and ill and aged persons.

The new premises at Monkgate adjoin the School Clinic, forming a centre for the integrated Child Health and School Health Service. Accommodation is provided for cytology, immunisation clinics and others run by the Family Planning Association. It is the administrative centre for the Health Visiting, Domiciliary Midwifery, Home Nursing, Home Help and Health Welfare Services and the distribution and storage centre for the Welfare Foods and Home Nursing Loan Services. This is the first Health Centre built in the City of York under Section 21 of the National Health Service Act, 1946 and received the approval of the Minister of Health on the 17th June, 1968. Health centres are built by local authorities and provide accommodation for general practitioners who, assisted by local authority staff such as health visitors, midwives and home nurses, form an integrated team to provide preventive and curative medical services for the community served by the centre. At the Monkgate Health Centre there are two general practitioner suites, consisting of reception and waiting rooms, two consulting rooms and a treatment room and these are incorporated in a single storey wing adjacent to the general clinic. Three general practitioners work from the health centre, one of whom has a health visitor attached to his practice.



During 1968 a further health visitor attachment was arranged bringing the total in the City up to ten. Three midwives are attached to general practitioners, one of whom took up her duties in 1968. Continued co-operation with general hospitals is illustrated by the increase during the year in the number of early discharges to district nurses, a scheme which began in 1966. In November, 1968 two domiciliary midwives commenced deliveries in the General Practitioner Unit of the Fulford Maternity Hospital. This pilot scheme has worked very satisfactorily and is appreciated by both the mother and midwife in that there is continuity of care, the midwives being in attendance during the full cycle of pregnancy, in hospital at delivery and at home before and after confinement.

A new hostel for mentally subnormal men at Crombie Avenue had its official opening in November when Dr. Crane performed the opening ceremony. The hostel can accommodate eight men, who go out to work daily. It is staffed by a resident warden and part-time deputy warden. The building is unique in that it has been adapted from two adjoining Council houses and, therefore, has the advantage of being no different from the homes of others living in the Avenue.

In December the writer gave oral evidence before the Committee of Inquiry into Trawler Safety under the Chairmanship of Admiral Sir Deric Holland-Martin. The invitation came as a result of research into the Health of Deep Sea Fishermen which received the award of the Madison Prize of the Society of Medical Officers of Health, and which has been published recently (*British Journal of Industrial Medicine*, 1969 ; 26, 1—46).

In conclusion may I acknowledge the help of those who have assisted in compiling this report. The dedication of all who, working in the Health Department, help to promote and maintain the health of the citizens of York is greatly appreciated.

I am, my Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

S. R. W. MOORE

Medical Officer of Health and Principal School Medical Officer.



## VITAL STATISTICS



## VITAL STATISTICS

### Statistics and Social Conditions of the Area

Area in acres: 7,007 (7,295 as from 1st April, 1968).  
 Population (Census, 1961) 104,392.  
 Total population, mid 1968 (Registrar General's Estimate) 107,290.  
 Number of hereditaments (at 31st March, 1968) according to the rate-books, 43,414 (including retail shops occupied as dwellings).  
 Average number of persons per hereditament, 2.5.  
 Rateable value (April, 1968) £3,986,514.  
 Estimated net produce of a penny rate, £15,900.  
 Marriages, 1,035. Rate per 1,000 population:—19.2.

### VITAL STATISTICS, 1968

(Registrar General's Figures)

	York	England and Wales <i>Provisional</i>
Live Births:		
Number .. .. .	1,668	822,000
Rate per 1,000 population—Crude 15.5; corrected .. .. .	15.8	16.9
Illegitimate Live Births per cent of total Live Births	11.0	
Stillbirths:		
Number .. .. .	28	12,000
Rate per 1,000 total Live and Stillbirths ..	16.5	14.0
Total Live and Stillbirths .. .. .	1,696	834,000
Infant Deaths (deaths under 1 year) .. ..	28	15,000
Infant Mortality Rates:		
Total Infant deaths per 1,000 total Live Births	16.8	18.0
Legitimate Infant deaths per 1,000 legitimate Live Births .. .. .	16.2	
Illegitimate Infant deaths per 1,000 illegitimate Live Births .. .. .	21.7	
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total Live Births) .. .. .	10.2	12.3
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total Live Births) .. .. .	7.8	10.5
Perinatal Mortality Rate (Stillbirths and deaths under 1 week combined per 1,000 total Live and Stillbirths) .. .. .	24.2	25.0
Maternal Mortality (including abortion):		
Number of deaths .. .. .	—	
Rate per 1,000 total Live and Stillbirths ..	—	0.2

Live Births	Leg.	Total 1,484	M. 770	F. 714	Birth-rate: Crude 15.5 per 1,000 Corrected 15.8 per 1,000
	Illeg.	184	82	102	
Stillbirths	Leg.	24	9	15	Rate per 1,000 total births 17.0
	Illeg.	4	1	3	
Deaths .. .. .		1,342	682	660	Death-rate: Crude 12.5 per 1,000 Corrected 12.4 per 1,000

#### BIRTHS AND DEATHS (5 Years Review)

Year	Estimated Population	Total (Net) BIRTHS	Birth-rate	Total (Net) DEATHS	Death-rate	Excess of Births over Deaths
1964	105,230	1,825	17.6	1,245	11.9	580
1965	105,910	1,729	16.6	1,326	11.7	403
1966	106,010	1,625	15.6	1,322	11.9	303
1967	105,550	1,695	16.3	1,219	10.8	476
1968	107,290	1,668	15.8	1,342	12.4	326
AVERAGE ..		1,708	16.4	1,291	11.7	418

#### MATERNAL AND INFANT MORTALITY, 1964-1968

	1964	1965	1966	1967	1968
(a) MATERNAL MORTALITY:					
No. of deaths (YORK) .. ..	—	—	—	1	—
Rate per 1,000 births:—					
York .. .. .	—	—	—	0.6	—
England and Wales .. ..	0.5	0.3	0.3	0.2	0.2
(b) INFANT MORTALITY:					
Deaths under 1 year (YORK)	48	32	30	36	28
Rate per 1,000 live births:					
York .. .. .	26.3	18.5	18.4	21.2	17.0
England and Wales .. ..	20.0	19.0	19.0	18.3	18.0
(c) PERINATAL MORTALITY:					
York .. .. .	34.9	24.4	26.5	29.0	24.0
England and Wales .. ..	28.2	26.9	26.3	25.4	25.0



**CAUSES OF DEATH — 1968**  
Deaths in Age Groups of 'Residents' whether occurring within or outside the District

CAUSE OF DEATH	Under 1 year	1 to 4	5 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75 years and over	All Ages		
									Male	Female	Total
Enteritis and other Diarrhoeal Diseases	1	—	—	—	—	—	—	—	1	—	1
Tuberculosis of Respiratory System	—	—	—	—	1	—	3	—	4	—	4
Other Tuberculosis, incl. late effects	—	—	—	—	—	—	—	1	1	—	2
Other Infective and Parasitic Diseases	2	—	—	—	—	—	—	—	2	—	2
Malignant Neoplasm — Stomach	—	—	—	—	—	7	16	9	20	12	32
Malignant Neoplasm — Lung, Bronchus	—	—	—	1	1	33	22	7	56	8	64
Malignant Neoplasm — Breast	—	—	—	—	1	13	8	3	—	25	25
Malignant Neoplasm — Uterus	—	—	—	—	1	5	—	1	—	7	7
Leukaemia	—	—	—	—	1	—	4	3	5	3	8
Other Malignant Neoplasms, etc.	—	—	—	3	2	44	44	36	69	60	129
Benign and Unspecified Neoplasms	1	—	—	—	—	3	—	1	1	4	5
Diabetes Mellitus	—	—	—	—	1	2	6	7	5	11	16
Other Endocrine, etc., Diseases	—	1	—	1	—	—	1	—	1	2	3
Anaemias	—	—	—	—	—	—	1	—	1	—	1
Other Diseases of Nervous System	—	—	—	—	2	6	3	1	9	5	14
Chronic Rheumatic Heart Disease	—	—	—	1	1	4	5	5	3	12	15
Hypertensive Disease	—	—	—	—	—	3	3	11	10	7	17
Ischaemic Heart Disease	—	—	—	—	4	79	121	148	190	162	352
Other Forms of Heart Disease	—	—	—	—	—	—	3	26	4	25	29
Cerebrovascular Disease	—	—	—	—	3	27	47	91	74	94	168
Other Diseases of Circulatory System	—	—	—	—	2	7	12	23	21	23	44
Influenza	—	—	—	—	—	—	2	3	2	3	5
Pneumonia	2	1	1	—	—	8	29	126	68	99	167
Bronchitis and Emphysema	—	—	—	—	—	18	26	32	63	13	76
Asthma	—	—	—	—	—	1	1	—	—	2	2
Other Diseases of Respiratory System	—	—	—	—	—	—	2	5	4	4	8
Peptic Ulcer	—	—	—	—	—	—	—	4	2	4	6
Appendicitis	—	—	—	—	—	—	—	1	1	—	1
Intestinal Obstruction and Hernia	1	—	—	—	—	—	2	4	2	5	7
Cirrhosis of Liver	—	—	—	—	1	3	1	1	3	3	6
Other Diseases of Digestive System	—	—	—	—	1	2	3	14	9	11	20
Nephritis and Nephrosis	—	1	—	1	—	4	1	1	4	4	8
Hyperplasia of Prostrate	—	—	—	—	—	—	3	—	3	—	3
Other Diseases, Genito-urinary System	—	—	—	1	1	3	2	9	5	11	16
Diseases of Musculo-skeletal System	—	—	—	—	—	2	1	1	1	4	4
Congenital Anomalies	7	—	1	—	—	—	—	—	4	4	8
Birth Injury, Difficult Labour, etc.	4	—	—	—	—	—	—	—	3	1	4
Other Causes of Perinatal Mortality	7	—	—	—	—	—	—	—	4	3	7
Symptoms and Ill-defined Conditions	—	—	—	—	—	—	—	4	2	2	4
Motor Vehicle Accidents	—	—	1	3	2	2	2	1	6	5	11
All Other Accidents	1	—	1	1	1	3	4	15	9	17	26
Suicide and Self-inflicted Injuries	—	—	—	—	2	7	5	1	9	6	15
All Other External Causes	—	—	—	—	—	1	—	—	1	—	1
Total	28	3	4	12	28	287	385	595	682	660	1342

Figures supplied by Registrar General. Only those cause headings with deaths allocated to them are supplied: headings with no deaths allocated are omitted.





## INFECTIOUS DISEASE

On the 1st October the Public Health (Infectious Diseases) Regulations, 1968 came into force. The regulations were made under sections 47 — 49 of the Health Services and Public Health Act, 1968, which revised the law relating to the notification of infectious disease. As a result, acute influenzal pneumonia, acute primary pneumonia, erysipelas, membranous croup and puerperal pyrexia are no longer notifiable. Infective jaundice, tetanus, leptospirosis and yellow fever became notifiable for the first time. The fee for notification was raised for the first time this century and five shillings is now payable whether the case occurs at home or in a hospital or other residential institution.

### CONFIRMED CASES NOTIFIED

	1964	1965	1966	1967	1968
Acute influenzal pneumonia	—	—	12	1	—
Acute primary pneumonia	10	7	10	6	5
Acute encephalitis	—	1	—	—	—
Acute meningitis	2	1	1	2	1
Dysentery (amoebic or bacillary)	34	13	441	84	9
Erysipelas	7	2	5	2	4
Food poisoning	29	18	11	17	—
Infective jaundice	—	—	—	—	96
Measles	1,275	957	973	1,238	732
Ophthalmia neonatorum	1	—	—	—	—
Scarlet fever	62	160	76	63	143
Scabies	18	19	43	91	75
Tuberculosis	20	20	21	17	15
Whooping cough	103	3	17	149	27

### **Poliomyelitis**

There have been no cases notified over the last five years.

### **Dysentery**

Nine cases of Sonnei dysentery were notified during the year of which two were confirmed by bacteriological examination, compared with eighty four and eighty two respectively in 1967. Of the nine cases, two were school children, six were adults and one was a pre-school child.

### **Diphtheria**

There have been no cases of diphtheria in the City since 1949.

### Whooping Cough

Twenty seven cases were notified during the year compared with one hundred and forty nine in 1967. There were no deaths.

### Smallpox

No cases of this disease were reported during the year.

### Scarlet Fever

One hundred and forty three cases were notified during the year, one hundred and four of which were school children. Seven cases were removed to hospital.

### Influenza and Pneumonia

Cases notified	1964	1965	1966	1967	1968
Acute Primary Pneumonia ..	10	7	10	6	5
Acute Influenzal Pneumonia ..	—	—	12	1	—
Deaths from Influenza (notified cases) .. .. .	—	—	8	1	5
Deaths from Pneumonia (Registrar-General's figures) ..	159	142	153	149	167

### Measles

There were 732 cases of measles notified, compared with 1,238 in 1967.

### Mumps, Chickenpox, German Measles

Four cases of mumps, eighty seven cases of chickenpox and two hundred and forty nine cases of German measles were reported to the school clinic.

### Scabies

Seventy five cases of scabies were treated at the cleansing centre during the year. Thirty two were adults, twenty seven were children attending school, and sixteen were pre-school children. All were cleared.

### Tuberculosis

#### NEW CASES OF TUBERCULOSIS NOTIFIED

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
Pulmonary Tuberculosis	19	26	23	33	28	19	19	20	14	14
Non-Pulmonary Tuberculosis	3	4	1	1	7	1	1	1	3	1
Total	22	30	24	34	35	20	20	21	17	15

There were 212 male and 147 female cases of pulmonary tuberculosis, and 6 male and 6 female cases of non-pulmonary tuberculosis on the register at 31st December, 1968.



# TUBERCULOSIS MORTALITY, 1967-1968

(Registrar-General's Figures)

Year	Pulmonary		Non-Pulmonary		Total	
	Deaths	Death-rate	Deaths	Death-rate	Deaths	Death-rate
1967	1	0.01	2	0.02	3	0.03
1968	4	0.04	1	0.01	5	0.05
Average for 5 years	3	0.03	1	0.01	4	0.04

## Venereal Diseases

The following table summarises the work carried out in the Special Treatment Centre at the County Hospital during 1968:—

	Syphilis		Gonorrhoea		Other Venereal Conditions		Total
New Patients ..	4		101		217		322
Total attendance at clinics ..	Male	Female	Male	Female	Male	Female	
	53	154	560	254	876	456	

## Food Poisoning

Six cases of suspected food poisoning were notified during 1968, but none were confirmed.

## ENVIRONMENTAL HEALTH

## ENVIRONMENTAL HEALTH

### GENERAL

#### Water Supply

Mr. C. G. Read, Engineer of the York Waterworks Company, has kindly supplied the following information:—

The Company's statutory area of supply covers some one hundred and thirty one square miles and includes York County Borough, together with thirty eight parishes in rural districts.

The estimated population supplied by the Company was 160,000 and the average daily consumption was 9,468,934 gallons. The maximum daily demand of 11,740,000 gallons was reached on Monday, 17th June.

All water supplied by the Company is derived from intakes on the River Ouse at the Acomb Landing Works above the City. During the year river levels fluctuated from two inches below normal Summer level to a maximum of sixteen feet, six inches above Summer level, with corresponding variations in the quality of the raw water. This variation in raw water quality demands considerable flexibility in the control of the purification process, which includes chemical pre-treatment with Sulphate of Alumina, Activated Carbon, Lime and Chlorine, followed by sedimentation, rapid gravity filtration and slow sand filtration. (Two stage filtration.) Final treatment arrangements include pH adjustment, and, following contact period, final chlorination, or de-chlorination by Sulphur Dioxide, via automatic residual controllers.

Commissioning of the new No. 4 Treatment Plant continued, and during March the first treated water from the Plant was passed into supply.

Regular chemical and bacteriological examinations of the water during treatment and of the final water are carried out by the Company's Chemist and Bacteriologist, and also by the Company's Consultant Analysts. The stringent standard of quality was maintained throughout the year by the regular examination of water passing into the distribution system, and from a variety of premises within the City and surrounding area.

The usual periodical tests were carried out to determine the natural content of Fluorine, the results of six tests indicated an average of 0.20 p.p.m., a maximum of 0.23 and minimum of 0.14 p.p.m.

The question of adding Fluoride to the public water supply continues to be controversial, yet water undertakings are dependent on complete agreement between Health Authorities before arrangements for the addition of Fluoride can be considered.



A further series of samples were submitted for total Radioactivity tests in order to record local conditions, and results continue to be satisfactory.

In addition samples taken at frequent intervals from various stages of treatment were submitted for bacteriological examination to check the efficiency of plant operation and ensure satisfactory control.

In addition to the necessary maintenance of the distribution system, three and three-quarter miles of new mains were laid for new housing developments and to reinforce the system.

Mr. R. S. Bellhouse, the City Engineer, has kindly supplied the following information:—

### **Sewerage and Sewage Disposal**

At present sewage disposal facilities are adequate for the requirements of the City and for those specific areas covered by agreement in the adjoining rural districts. The revision of the City boundary in April has not adversely affected the adequacy of the sewage disposal facilities because the new areas encompassed were generally those previously covered by agreement.

With regard to sewerage it is known that certain sewers are damaged, and surcharging is liable to occur under certain conditions in some localities, but action will be taken with regard to these matters on a priority basis within the sums allocated in the Capital Works Programme of the Council.

### **Closet Accommodation**

At the end of the year there were two pail closets in use in the City, both of these being situated at the School Playing Fields at Fenby Field, Fulford, York. There were 39,012 water closets in the City.

### **Public Cleansing (Dry House Refuse)**

The refuse which arises at each household is placed in ash-bins by the householders, and all such refuse is collected by Corporation vehicles. The vehicles which are used are fitted with dust covers to prevent the escape of dust and other objectionable matter; the policy is now to replace the side loading vehicles with rear loading ones as expedient — this is in line with the Ministry's preference. Refuse from the various premises in the City centre is collected once per week, unless a request is made for a more frequent collection. A service for the collection of Trade Refuse is available in those cases where an excessive amount of refuse is produced. No salvage is collected as such — all materials put out for removal are treated as refuse. Under the Civic Amenities Act, bulky items of household refuse are collected free of charge,



and a dump has been set up at Foss Islands Depot to receive refuse which is brought in by residents using their own transport.

### **Cesspools**

At present there are six cesspools in and near the City. These are cleansed by the Corporation periodically by means of Cesspool/Gully Emptier machines. The vehicles remove the contents of the cesspools and discharge them into the main sewers using convenient manholes, which are thoroughly flushed after use.

## **ENVIRONMENTAL HEALTH SERVICES**

The Chief Public Health Inspector writes as follows:—

The change in the name of the sub-committee dealing with the work of the public health inspector, from Sanitary Services and Unhealthy Areas Sub-Committee to Environmental Health Sub-Committee is of some significance. It expresses the emphasis which is now placed upon the control of the environment and its influence upon health is an extension of the 'sanitary idea' first expressed by Chadwick, a pioneer sanitarian of the nineteenth century. The delegation of the Council's powers to this sub-committee in relation to much of the work undertaken administratively by the department will doubtless prove advantageous.

It was also during this year that the Council took its first step towards a smoke-free York. After some initial difficulties, the City of York (No. 1) Smoke Control Order was formally made. The confirmation of the Order by the Ministry of Housing and Local Government was received shortly after the end of the year. The area concerned is contained within the City and Abbey Walls on the East side of the River Ouse and extends over about one-half of the walled city. It is confidently anticipated that this will be followed next year by the other half of the walled city to the west side of the river, and that smoke control areas will subsequently be made which will spread outwards from these central areas. Smoke control is an aspect of conservation which has an equally important part to play as any other activity aimed at the protection of our heritage of ancient buildings and historic monuments; at the same time the pursuit of clean air is one of the great social improvements of our times from which the benefits to be derived in terms of both health and economics are inestimable.



Progress in housing work was continued during the year and the removal of further unfit houses was secured side by side with further work in connection with improvement areas. The improvement area provisions of the Housing Act, 1964 have been criticised because of the cumbersome and complicated procedure by which their purposes are secured, but the success which we have achieved with the three areas undertaken in York had given confidence to continue operations on a large scale. The announcement that the improvement area provisions of the Housing Act, 1964 were to be repealed and replaced by a new Housing Act came, therefore, with some disappointment and it is hoped that the new powers will enable this work to be resumed with the same success as that already achieved.

The River Ouse rose to flood level again and many houses were inundated by the flood waters. The fortitude and patience of the householders on these occasions is most praise-worthy, and the department along with all other agencies of the corporation seek to minimise the inconvenience and distress as much as is possible under all the circumstances. When the flood waters have receded and the clearing up can begin, the department's vehicles and manual staff are stationed in the areas to supply disinfectant, cleaning equipment, and even physical help, to assist householders in clearing the silt and debris left by the waters. This year, for the first time, we were able to secure on hire a number of mobile hot air machines which were operated by R.A.F. personnel. These enabled the drying-out processes to be accelerated, and this service was very much appreciated by residents in the affected areas. The area worst affected, namely the Marygate Area, was declared a Clearance Area under Part III of the Housing Act, 1957, at the end of the year, and it is hoped that another year may well see these houses removed.

It was again necessary to institute court proceedings in respect of offences in relation to the quality and condition of food, and this demonstrates to some extent the care which is needed in one aspect of modern sales methods. With the increase in the extent of packaging, when products both old and new look exactly the same from the outside wrapper, the question of stock rotation has become of paramount importance, and this is not always practised as well as it should be. One of the paradoxes of modern legislation is that whereas a licence must first be obtained before selling budgerigars from a pet shop, anyone can open a food shop without special notification to the authorities. Local powers to rectify this matter were sought in the York Corporation Bill together with powers for the registration of outdoor food vendors and along with other powers to assist the department in their dealings with empty houses and with caravans.



## HOUSING

### Inspection of Dwelling-houses during the Year

Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	1,550
Number of inspections made for the purpose .. .. .	1,550
Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	14
Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reason- ably fit for human habitation .. .. .	115

### Remedy of Defects during the Year without Service of Formal Notices

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ..	115
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### Action under Statutory Powers during the Year

#### *Proceedings under Public Health Acts:—*

Number of dwelling-houses in which defects were remedied after  
service of formal notices:—

By owners .. .. .	50
By Local Authority .. .. .	—

#### *Proceedings under Sections 16 and 17 of the Housing Act, 1957:—*

Number of dwelling-houses in respect of which Closing Orders were made .. .. .	13
Number of dwelling-houses in respect of which Demolition Orders were made .. .. .	1

### Housing Act, 1936. Part IV—Overcrowding

There are, at present, no accurate figures indicating the extent of over-  
crowding. A new survey is urgently needed if exact information of  
overcrowding is required.

### Housing Act, 1964

Improvement Areas.

The City Council declared Improvement Area No. 3 on the 1st July, 1968.  
The Area comprised 250 houses of which 92 houses were tenanted, and  
150 houses were owner occupied. The appropriate administrative action  
in relation to the Farrar Street and Improvement Areas Nos. 2 and 3 was  
carried out during the year.

## Sufficiency of Supply of Houses

In December, 1968, the number of applicants for Corporation Houses was 971.

## Conversion of Waste-water Closets

A total of 1,978 waste-water closets have been converted by the Grants Scheme which has been operating since 1938. The amount payable at present is a maximum of £50 for each conversion, and during the year the Corporation paid out £1,642 4s. 6d. under this voluntary scheme. Thirty-three water-closets have been provided in lieu of waste-water closets during 1968.

## CLEARANCE AREAS

No.	Clearance and Compulsory Purchase Orders	Area in Acres	Houses in Area	Persons Displaced	Confirmed by Minister of Housing and Local Government
1	The Groves (Backhouse St.), etc.	.618	34	94	19th Feb., 1955
2	The Groves (Jackson St.) .. ..	.922	54	160	19th Feb., 1955
3	Walmgate .. .. .	1.6	73	220	20th Mar., 1956
4	John Street .. .. .	.160	11	25	20th June, 1957
5	Newbiggin St. and Groves Lane ..	.728	50	147	20th June, 1957
6	Cecilia Place .. .. .	.246	15	34	20th June, 1957
7	The Groves (No. 3) .. .. .	3.93	188	495	4th Dec., 1957
8	The Groves (No. 4) .. .. .	3.77	156	382	15th April, 1959
9	Downhill Street .. .. .	.361	20	60	18th Feb., 1960
10	Walmgate (No. 2) .. .. .	.157	4	8	23rd Feb., 1960
11	Tanner Row .. .. .	.028	2	3	24th Feb., 1960
12	Rougier Street .. .. .	.129	14	36	24th Feb., 1960
13	George Street .. .. .	1.13	41	150	22nd Mar., 1960
14	Whitby Terrace and St. Anne Street	1.54	74	206	29th Mar., 1960
15	Percy Street .. .. .	.12	5	12	29th Mar., 1960
16	Bishophill Junior .. .. .	1.22	48	103	29th Mar., 1960
17	Trinity Lane .. .. .	.41	13	37	11th May, 1960
18	Layorthorpe (No. 1) .. .. .	2.74	142	366	9th Sept., 1960
19	Layorthorpe (No. 2) .. .. .	2.77	88	244	15th Dec., 1960
20	Cross Street, Acomb .. .. .	.031	3	1	14th Mar., 1961
21	Cambridge Street .. .. .	3.46	159	395	25th May, 1961
22	The Groves (No. 5) .. .. .	2.71	110	273	24th Aug., 1961
23	Orchard Street .. .. .	1.52	70	162	5th Oct., 1961
24	Newbiggin Street .. .. .	1.19	79	203	4th Dec., 1961
25	Lowther Street .. .. .	.026	2	8	16th Mar., 1962
26	Nunnery Lane .. .. .	9.26	378	789	14th April, 1964
27	Price Street .. .. .	.025	2	7	14th April, 1964
28	De Grey Street .. .. .	2.75	76	196	3rd Sept., 1965
29	Elmwood Street .. .. .	4.36	148	343	16th Mar., 1966
30	Lead Mill Lane .. .. .	1.15	53	120	25th Oct., 1966
31	Clark's Terrace (Walmgate) ..	.32	13	25	12th Jan., 1967

In addition, the Public Inquiry was held on the 1st October, 1968, relating to the Union Terrace Compulsory Purchase Order 1967, comprising 103 houses, and the Union Terrace Clearance Order 1967, comprising 5 houses.



## ATMOSPHERIC POLLUTION

During the year two standard deposit gauges and three volumetric smoke and sulphur dioxide instruments have been maintained in the City. The contents of the deposit gauges are examined at monthly intervals by the City Analyst, and the following table shows the results which were obtained:

Month	Foss Bank		Queen Anne School	
	<i>Rainfall</i> (In inches)	<i>*Total Solids</i> Deposited	<i>Rainfall</i> (In inches)	<i>*Total Solids</i> Deposited
January .. ..	1.50	26.38	1.38	7.84
February .. ..	1.18	21.05	1.14	8.42
March .. ..	1.58	17.20	1.18	10.57
April .. ..	1.58	13.03	1.34	9.07
May .. ..	2.40	14.75	2.64	8.83
June .. ..	1.93	14.10	2.13	10.54
July .. ..	2.64	10.39	2.64	7.70
August .. ..	2.01	9.32	1.93	6.71
September ..	4.37	16.89	—	—
October .. ..	2.25	13.72	2.05	7.39
November .. ..	2.64	22.90	2.64	9.34
December ..	1.18	18.26	1.18	9.10
Monthly Average	2.11	16.50	1.84	8.68

\*Tons per square mile.

The volumetric smoke and sulphur dioxide instruments are examined daily and the following tables show the monthly averages of the results obtained; expressed in microgrammes per cubic metre.

Month	St. Saviourgate		Cornlands Road		St. Mary's Hospital	
	Smoke	So <sub>2</sub>	Smoke	So <sub>2</sub>	Smoke	So <sub>2</sub>
January .. ..	155	111	126	127	215	200
February .. ..	193	122	175	153	197	204
March .. ..	84	101	78	94	128	131
April .. ..	63	97	62	95	90	118
May .. ..	48	93	55	67	57	73
June .. ..	27	68	31	54	32	57
July .. ..	22	63	27	43	24	44
August .. ..	29	51	28	35	33	39
September ..	34	58	44	51	49	61
October .. ..	88	88	106	119	105	153
November ..	92	109	102	124	106	139
December ..	137	115	143	152	156	200
Monthly Average	81	90	81	93	99	118



These records are produced from soot and smoke which is left on filter papers after measured quantities of air are continuously drawn through them; the higher the figures the dirtier the atmosphere. It is significant to note that many results secured in York compare unfavourably with similar results taken under similar circumstances in other towns.

In the case of the St. Saviourgate site, York was 40th in a list of similar locations in 57 towns; in the case of the Cornlands Road site, York was 52nd in a list of similar locations in 64 towns; in the case of the St. Mary's Hospital site, York was 40th in a list of similar locations in 48 towns.

### FACTORIES ACT, 1961 PART 1 OF THE ACT

#### 1.—INSPECTIONS for purposes of provisions as to health.

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	47	22	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. .. .	331	35	1	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) .. .. .	2	6	—	—
Total ..	380	63	2	—

2.—Cases in which DEFECTS were found.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	1	1	—	1	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	1	—	—	—	—
(b) Unsuitable or defective	3	—	—	—	—
(c) Not separate for sexes	1	—	—	—	—
Other offences against the Act (not including offences relating to Out-work)	—	—	—	—	—
Total	6	1	—	1	—

Part VIII of the Act—Outwork—(Sections 133 and 134) : There were 3 out-workers in August, 1968, making wearing apparel and 14 carding buttons. There were no defaulters or cases needing prosecution.

During the year 378 factories were on the register, including :—

Bakehouses .. .. .	38	Dental Mechanics .. .. .	12
Restaurants and Cafes .. .. .	26	Glass Manufacturers .. .. .	1
Chocolate and Sweet Manufacturing .. .. .	4	Cabinet Makers and Upholsterers .. .. .	7
Brewers, Mineral Water Manufacturing and Bottlers .. .. .	3	French Polishers, Painters and Decorators .. .. .	8
Manufacturing Chemists .. .. .	4	Carpet Makers .. .. .	3
Boot and Shoe Repairers .. .. .	16	Watch Repairers and Jewellers .. .. .	3
Dressmakers .. .. .	13	Scientific Instrument Makers and Opticians .. .. .	2
Milliners .. .. .	2	General Engineers .. .. .	16
Tailors .. .. .	6	Electrical Engineers .. .. .	15
Button Manufacturers .. .. .	2	Motor Engineers .. .. .	65
Laundries, Dry Cleaners .. .. .	13	Cycle Repairers .. .. .	3
Sugar Mfg. and Refiners .. .. .	1	Printers .. .. .	11
Builders, Joiners, Carpenters .. .. .	39	Photography .. .. .	5
Plumbers and Glaziers .. .. .	8	Warehouses .. .. .	12
Tinsmiths and Sheet Metal Workers .. .. .	2	Slaughterhouses .. .. .	4
Blacksmiths .. .. .	2	Miscellaneous Small Factories and Workplaces .. .. .	32



## INSPECTION AND SUPERVISION OF FOOD

### Food Premises

A total of 4,796 re-inspections were made to food premises during the year, in addition to many inspections of stalls in the open Market and other places where food was sold in the open air, including the York Racecourse.

The total number of food premises is 1,135 as set out in the following table according to their principal business:—

Bakers .. .. .	37	Provision Merchants .. .. .	273
Butchers .. .. .	92	Public Houses .. .. .	129
Cafes .. .. .	51	Sweet Shops .. .. .	92
Cinema Kiosks .. .. .	2	Sweet and Chocolate	
Confectioners .. .. .	65	Manufacturers .. .. .	5
Dairies .. .. .	5	Wet Fish Shops .. .. .	17
Food Depots .. .. .	34	Miscellaneous .. .. .	37
Fired Fish Shops .. .. .	52	Accommodation .. .. .	45
Greengrocers .. .. .	49	Clubs and Halls .. .. .	53
Hotels .. .. .	56	Canteens .. .. .	34
Ice Cream Manufacturers .. .. .	3	Slaughterhouses .. .. .	4
Total ..		1,135	

### Total Weight of Unsound Meat Destroyed

Year	Stones
1968 .. .. .	4,676
1967 .. .. .	5,191
1966 .. .. .	4,843
1965 .. .. .	4,959
1964 .. .. .	5,081

### Carcases Inspected and Condemned

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed .. .. .	8288	65	80	31120	17033
Number inspected .. .. .	8288	65	80	31120	17033
<b>All Diseases except Tuberculosis—</b>					
Whole carcases condemned .. .. .	1	1	1	4	23
Carcases of which some part or organ was condemned .. .. .	2807	6	2	1515	2721
Percentage of the number inspected affected with disease other than Tuberculosis ..	33.88	10.76	3.75	4.88	16.10
<b>Tuberculosis only—</b>					
Whole carcases condemned .. .. .	—	—	—	—	1
Carcases of which some part or organ was condemned .. .. .	—	—	—	—	109
Percentage of the number inspected affected with Tuberculosis .. .. .	—	—	—	—	0.64
<b>Cysticercosis—</b>					
Carcases of which some part or organ was con- demned .. .. .	16	—	—	—	—
Carcases submitted to treatment by refrigera- tion .. .. .	15	—	—	—	—
Generalised and totally condemned .. .. .	—	—	—	—	—



## Other Foods Inspected, Condemned and Removed for Destruction

A large quantity of tinned meat, glass and packet goods, fish, fruit, vegetables, eggs, sweets, cakes and biscuits, etc., were inspected, and a total weight of 950 stones were found to be in an unsound condition. The food-stuffs were removed to the Destructor, Foss Islands and destroyed.

## Bacteriological Examinations of Milk Supplies

### Methylene Blue Test

Type of Milk	No. of samples	Complied with prescribed conditions	Did not comply with prescribed conditions	Declared void
Pasteurised .. .. .	235	219	16	—
Untreated .. .. .	75	59	16	—

### Phosphatase Test

Type of Milk	Number	Positive	Negative
Pasteurised .. .. .	235	—	235

### Turbidity Test

Type of Milk	Number	Satisfactory	Unsatisfactory
Sterilised .. .. .	50	50	—

### Sterility Test

Type of Milk	Number	Satisfactory	Unsatisfactory
Ultra High Temperature, Pasteurised .. .. .	4	4	—

### Milk Supplies—Brucella Abortus

- (i) Number of samples of raw milk examined .. .. . —
- (ii) Number of positive samples found .. .. . —

### The Liquid Egg (Pasteurisation) Regulations, 1963

- (i) Number of egg pasteurisation plants in the district .. Nil
- (ii) Number of samples of liquid egg submitted to the Alpha-Amylase test and their results .. .. . Nil
- (iii) Comments on the administration of these Regulations .. Nil

### Ice Cream

The Methylene Blue Test was applied to the 25 Ice Cream samples. The following are the results of this test:—

23, group 1 ; 2, group 2 ; 0, group 3 ; and 0, group 4.

Where an adverse report is received from the Bacteriologist, the attention of the vendor is called and an inspection of his premises, as well as a check of his ingredients and methods, is made. Further samples are taken until a satisfactory report is obtained.

### Manufacturers and Sellers of Ice Cream

Number of Manufacturers .. ..	3
Number of premises registered for storage and sale .. ..	424
Number of premises on register .. ..	424

The premises are registered in accordance with the provisions of Section 16 of the Food and Drugs Act, 1955, and 93 inspections were made.

### Food and Drugs Act, 1955

The number of samples of food and drugs submitted to the Public Analyst under the above Act during 1968 was 318 (311 informal and 7 formal). This number represents 2.87 samples for each 1,000 of the population of the City (107,290). The proportion suggested by the Ministry of Health is three per 1,000.

The following table shows the percentage of samples which were not genuine compared with other years:—

Year	Total Samples			Milk Samples only		
	Number examined	Number not genuine	Percentage not genuine	Number examined	Number not genuine	Percentage not genuine
1961	390	52	13.33	300	48	16.00
1962	396	32	8.08	275	28	10.18
1963	391	25	6.39	260	23	8.85
1964	394	18	4.57	251	16	6.37
1965	393	26	6.61	249	14	5.62
1966	313	6	1.91	185	6	3.24
1967	376	18	4.78	146	7	4.79
1968	318	21	6.60	127	6	4.75

The following is a summary of the samples which were reported upon as not genuine:—

Four samples of Milk were deficient in milk-fat and two contained small amounts of added water. One sample of Chopped Turkey, and one of Yorkshire Pudding and Pancake mix had labelling irregularities. A sample of Cream was slightly deficient in milk-fat. One sample of Shandy contained an excess of



proof spirit and a further sample had a deficiency of proof spirit. A sample of Tizer contained cresols, arising from the improper use of the bottle. Two samples of Meat Pies and one of Steakburger had deficiencies in meat content, and two samples of Salmon Spread were deficient in fish content. A sample of Evaproated Milk contained a loose fragment of lead-tin solder arising from the method of sealing the can. Of four samples of Cheese, two had labelling irregularities, one had a slight excess of water content, and one was slightly deficient in fat.

#### **Fertilisers and Feeding Stuffs Act, 1926**

During the year, fifteen samples of fertilisers were examined under the above Act. All conformed to their respective statutory statements.

#### **Poultry Inspection**

There are no poultry processing premises within the district.

#### **Prevention of Damage by Pests Act, 1949**

During the year 567 rat infestations and 554 mouse infestations were dealt with by the Rodent Operatives. In all cases the treatments carried out were successful.

### **ANALYSIS OF INSPECTIONS**

#### **Dwellings**

Houses unfit and capable of repair (H.A.), 5 ; Unfit and incapable of repair (H.A.), 198 ; Underground dwellings and parts of buildings (H.A.), 245 ; Houses in multiple occupation (H.A.), 61 ; Separate dwellings within houses in multiple occupation (H.A.), 34 ; Houses for complaints and defects (P.H.A.), 1,007 ; Houses for filthy and verminous conditions, 208 ; Re-inspections under the Housing Act, 4 ; Houses for improvement, 543 ; Sites of tents, vans and sheds, etc., 209 ; Tents, vans or sheds, 272 ; Waste water closet conversions, 271 ; Drainage, 264 ; Visits for purposes of Rent Acts, 15 ; Visits for enquiry, 1,015 ; Standard or Improvement Grants, 274 ; Improvement Areas, 250 ; Other visits not included above, 473.

#### **Food and Drugs Premises**

Dairies, 146 ; Milk and Dairies Regulations, 147 ; Visits for sampling, 331 ; Ice Cream premises, 93 ; Fish and chip premises, 59 ; Sausages and pork products, 9 ; Bakehouses, 90 ; Butchers' shops, 94 ; Wet fish shops, 18 ; Grocers and Provision Merchants, 199 ; Confectioners' shops, 36 ; Green-grocers, 33 ; Sweet shops, 49 ; Restaurants, cafes, kitchens, 147 ; Market



inspections, 15 ; Public houses and hotels, 71 ; Mobile Foodshops, 24 ; Other food premises, 66 ; Drainage, 66 ; Visits for meat inspection, 2,213 ; Visits for food inspection, 93 ; Inspections for Food Hygiene Regulations, 441 ; Slaughterhouses, 82 ; Visits for enquiry, 254 ; Other visits not included above, 20.

### **Trades and Businesses**

Factories with mechanical power, 62 ; Factories without mechanical power, 10 ; Other premises, construction work, etc. (Factory Act), 2 ; Outworkers, 7 ; Offices, 133 ; Shops (Retail), 332 ; Offensive trades, 21 ; Drainage, 4 ; Visits for enquiry, 45 ; Wholesale shops, Warehouses, 28 ; Catering establishments, canteens, 27.

### **Smoke Abatement**

Smoke observations, 27 ; Atmospheric pollution instruments, 807 ; Industrial furnaces, 5 ; Boiler plants, 12 ; Smoke control surveys, 5 ; Houses in smoke control areas, 1,451 ; Visits for enquiry, 471 ; Other visits not included above, 274.

### **General**

Infectious diseases visits, 4 ; Rodent infestations, 97 ; Other infestations, 162 ; Keeping of animals, 47 ; Pet animal stores, 8 ; Water supply, 69 ; Infirm or verminous persons, 1 ; Watercourses, ditches, culverts, 30 ; Waste ground, accumulations of refuse, 147 ; Other nuisances, 54 ; Inspection for matters affecting other Departments, 40 ; Barbers' and Hairdressers' premises, 52 ; Visits for enquiry, 47 ; No access visits, 896 ; Noise nuisances, 26 ; Other visits not included above, 28.

### **Notices**

Verbal notices given, 224 ; Verbal notices complied with, 123 ; Verbal notices in progress or ordered, 37 ; Preliminary notices served, 157 ; Preliminary notices complied with, 128 ; Preliminary notices in progress or ordered, 6 ; Statutory notices served, 22 ; Statutory notices complied with, 24 ; No. of defective houses rendered fit in consequence of informal action, 115 ; No. of houses in respect of which P.H.A. notices were served requiring repairs, 36 ; No. of houses in respect of which P.H.A. notices were served and defects remedied by owners, 50.

### **Repairs and Improvements**

Roofs, valley gutters, flashings, etc., 41 ; Chimney stacks, flues, pots, etc., 11 ; Rainwater gutters, 53 ; Fallpipes, 32 ; Walls, brickwork, pointing, 51 ;

General: 1. The first part of the report is devoted to a general description of the project and its objectives. 2. The second part is devoted to a description of the methodology used in the study. 3. The third part is devoted to a description of the results of the study. 4. The fourth part is devoted to a discussion of the results and their implications. 5. The fifth part is devoted to a conclusion and recommendations for future research.

Methodology: 1. The methodology used in this study was a combination of qualitative and quantitative methods. 2. The qualitative methods included interviews, focus groups, and content analysis. 3. The quantitative methods included surveys and statistical analysis. 4. The data were collected from a sample of 100 participants. 5. The data were analyzed using a combination of statistical and content analysis techniques.

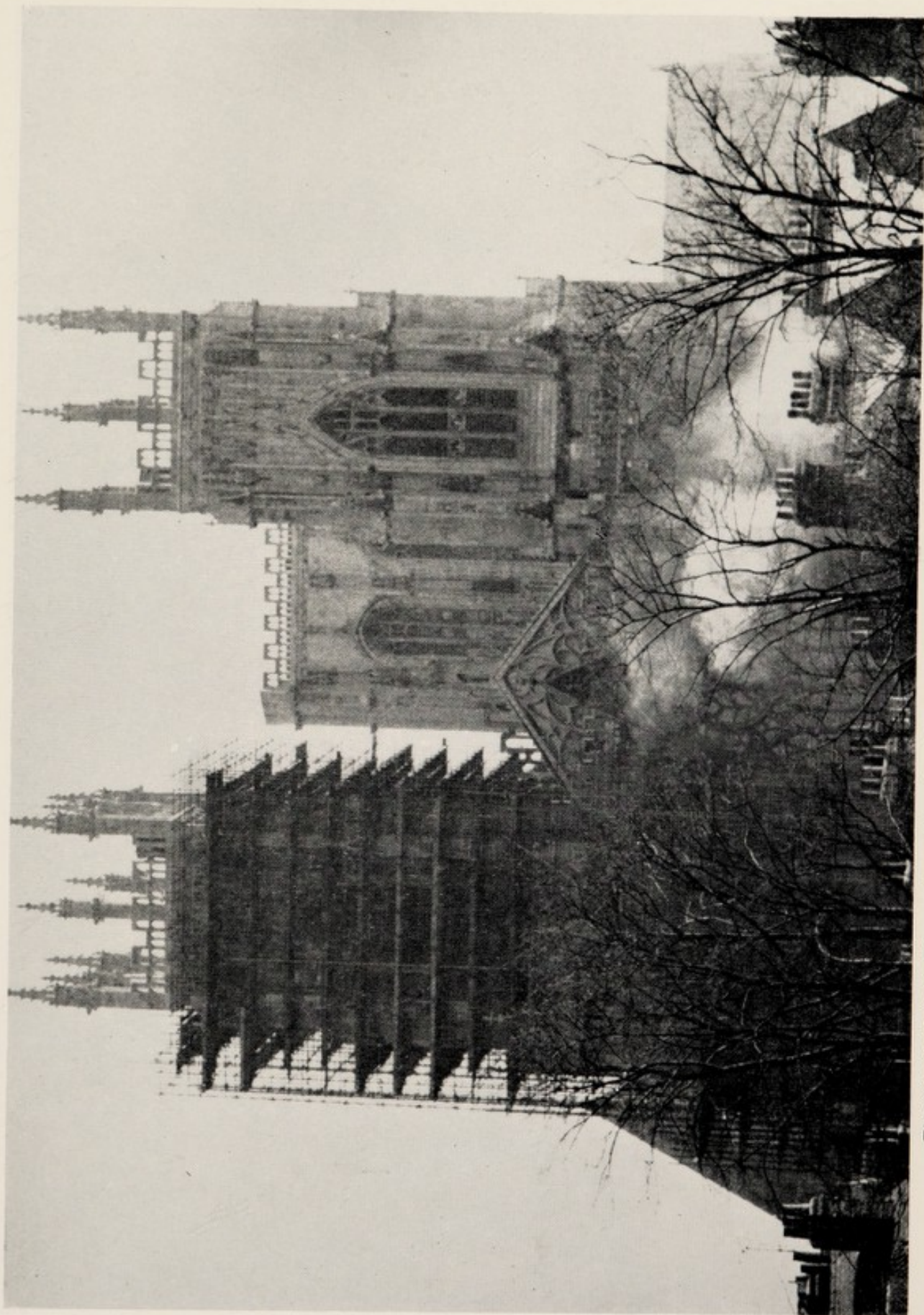
Results: 1. The results of the study show that there is a significant relationship between the variables studied. 2. The results also show that the relationship is positive. 3. The results are consistent with previous research in the field. 4. The results have important implications for practice and policy. 5. The results suggest that further research is needed in this area.

Discussion: 1. The discussion of the results shows that the findings are consistent with previous research. 2. The discussion also shows that the findings have important implications for practice and policy. 3. The discussion suggests that further research is needed in this area. 4. The discussion also suggests that the findings may be applicable to other contexts. 5. The discussion concludes with a summary of the main findings and recommendations for future research.

Conclusion: 1. The conclusion of the study is that there is a significant positive relationship between the variables studied. 2. The conclusion also suggests that the findings have important implications for practice and policy. 3. The conclusion suggests that further research is needed in this area. 4. The conclusion also suggests that the findings may be applicable to other contexts. 5. The conclusion concludes with a summary of the main findings and recommendations for future research.

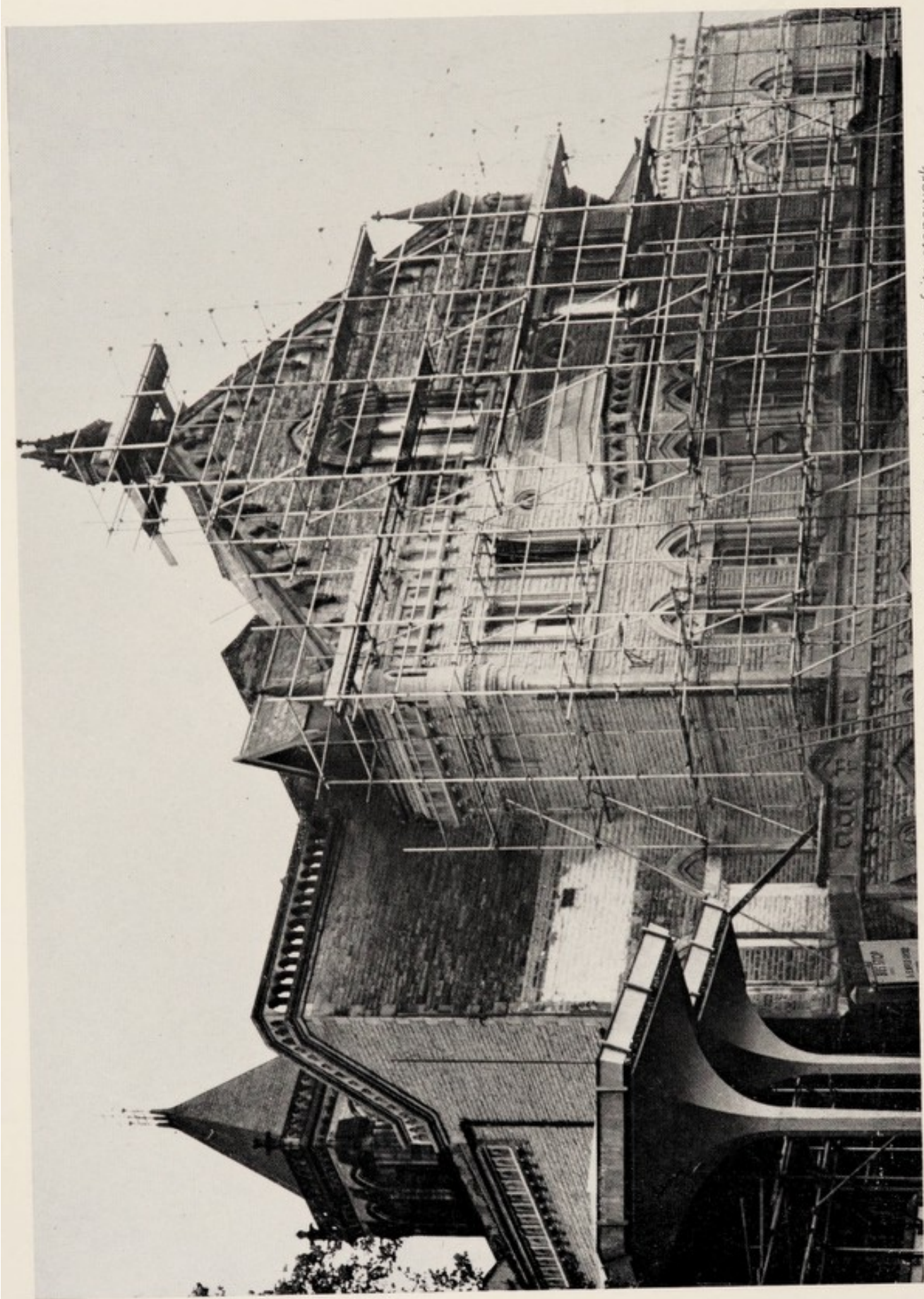
References: 1. Smith, J. (2010). The relationship between variables X and Y. *Journal of Research*, 15(2), 123-135. 2. Jones, A. (2011). The impact of variable Z on the relationship between X and Y. *Journal of Research*, 16(1), 45-55. 3. Brown, C. (2012). The role of variable W in the relationship between X and Y. *Journal of Research*, 17(3), 210-220.





*The cloud of domestic smoke against the Minster front is unlikely to be seen again as a result of the council's smoke control programme now commenced*





*Expensive cleaning operations at the Theatre Royal not only restores the original beauty of its stonework but also demonstrates the ugly and wasteful results of air pollution.*



## PERSONAL HEALTH SERVICES

## PERSONAL HEALTH SERVICES

(National Health Service Act, 1946)

### CARE OF MOTHERS AND YOUNG CHILDREN

(Section 22)

#### Child Health Clinics

Sessions were held at the following clinics at the times mentioned.

Health Services Centre, Duncombe Place.	Mondays	2 p.m. to 4 p.m.
Health Services Centre, Monkgate.	Mondays	2 p.m. to 4 p.m.
Health Services Centre, Cornlands Road.	Mondays	10 a.m. to 12 noon
	Tuesdays	2 p.m. to 4 p.m.
	Fridays	2 p.m. to 4 p.m.
Health Services Centre, Clifton.	Wednesdays	2 p.m. to 4 p.m.
Health Services Centre, Fifth Avenue.	Mondays	2 p.m. to 4 p.m.
	Wednesdays	2 p.m. to 4 p.m.
	Thursdays	10 a.m. to 12 noon
Health Services Centre, Lidgett Grove.	Thursdays	2 p.m. to 4 p.m.
Dringhouses Child Health Clinic, Dringhouses Church Hall.	Tuesdays	2 p.m. to 4 p.m.
Melbourne Street Child Health Clinic, Melbourne Street Chapel.	Tuesdays	2 p.m. to 4 p.m.
St. Clement's Child Health Clinic, St. Clement's Church Hall.	Fridays	2 p.m. to 4 p.m.

The Health Services Centre, Monkgate came into use on August 5th and the premises in Duncombe Place were closed.

- |     |   |       |
|-----|---|-------|
| (a) | Number of Clinics provided and maintained by the Council  | 8     |
| (b) | Total number of children who first attended at the Centres during the year and who, on the date of the first attendance were—under 1 year of age .. .. .    | 1,281 |
| (c) | Total number of children under five years of age who attended at the Centres during the year and who, at the end of the year were—under 1 year of age .. .. | 1,243 |
|     | —over 1 year of age .. ..   | 2,072 |



### Ante-natal and Post-natal Clinics.

All ante-natal work for domiciliary cases is now undertaken by general practitioners and midwives. Clinics are run by the Hospital Management Committee for maternity hospital patients and for consultations.

(i) Number of ante-natal sessions held by Council Midwives	39
(ii) Number of attendances .. .. .	193

### Family Planning Clinics.

The Local Authority delegates the provision of a family planning service to the Family Planning Association.

Local Authority premises are provided, free of charge, and clinics are held, as follows:—

#### *Monkgate*

Wednesdays: 10 a.m. to 11.30 a.m. 2 p.m. to 4 p.m.

#### *Cornlands Road*

Tuesdays: 6.30 p.m. to 8 p.m.

#### *Clifton*

Second and third Monday in each month: 2 p.m. to 3 p.m.

Clinics are also held at the County Hospital, Out-patients' Department 'B':—

Monday to Thursday: 6-30 p.m. to 7-30 p.m.

### Infant Mortality

There were 28 infant deaths reported during 1968 (16 male and 12 female) giving an Infant Mortality Rate of 16.8. Of the seventeen neonatal deaths, thirteen babies died during their first week and four died between one and four weeks' old. Eleven babies were over one month of age at death.

The causes of death were as follows:—

	<i>Neonatal</i>	<i>Post-Neonatal</i>	<i>Total</i>
Respiratory distress syndrome	3	1	4
Prematurity	5	—	5
Haemolytic disease	1	—	1
Congenital abnormalities	4	2	6
Pulmonary atelectasis	1	—	1
Respiratory infection	2	2	4
Virus infection	—	2	2
Gastro-enteritis	—	2	2
Post-operative haemorrhage	1	—	1

### Coroner's cases

Cot death (epidural haemorrhage)	1	1
Accident (strangulation)	1	1
	17	11
	28	

Four of the six babies who died of congenital abnormalities had heart defects and the fifth had a haemolymphangioma. The sixth had multiple abnormalities as did a three-week old baby who died of pneumonia. The infant who died of post-operative haemorrhage had a congenital diaphragmatic hernia.

**Perinatal Mortality** (Stillbirths and deaths under one week of age).

There were 41 perinatal deaths in 1968, 28 stillbirths and 13 first week deaths giving a perinatal mortality rate of 24.2. Four babies were born to unmarried mothers.

The causes of death were classified as follows:—

	<i>Primary</i>		<i>Contributory</i>	
	Stillbirths	First week	Total	
Congenital abnormalities	6	3	9	1
Prematurity	1	5	6	6
Ante-partum haemorrhage	4	—	4	
Pre-eclamptic toxæmia	5	—	5	
Rhesus incompatibility	2	1	3	
Cord, prolapsed or strangled by	5	—	5	
Birth Injury (intracranial haemorrhage)	—	—	—	1
Intra-uterine pneumonia	1			
Intra-uterine death (unknown cause)	3	5	5	
Placental insufficiency	1			
Post maturity	—	—	—	2
Respiratory distress syndrome	—	3	3	
Post-operative haemorrhage	—	1	1	
Total	28	13	41	10

The congenital abnormalities included six stillborn anencephalic infants, one of whom had exomphalus. The three first week deaths in this category were due to multiple abnormalities, congenital heart lesion, and haemolymphangioma respectively. The child who died of post-operative haemorrhage was suffering from a congenital diaphragmatic hernia.

The intra-uterine deaths included one with haemorrhagic pneumonic consolidation of lungs and one classified as placental insufficiency.

Prematurity, no doubt, was a contributory cause of death in six of the stillborn babies, and post-maturity may also have contributed to the deaths of two stillbirths due to prolapsed cord.

Traumatic intracranial haemorrhage was probably contributory to the death of one of the babies who died in the first week with multiple congenital abnormalities.



# **Congenital Malformation.**

The notification of congenital malformations discovered at birth continued to work satisfactorily, and during the year a total of twenty-four cases was notified. These twenty-four cases accounted for thirty-nine congenital malformations.

								<i>No. Notified</i>
0	Central Nervous System							
	.1 Anencephalus	..	..	..	..	..	..	6
	.4 Hydrocephalus	..	..	..	..	..	..	1
	.8 Spina bifida	..	..	..	..	..	..	3
2	Alimentary System							
	.1 Cleft lip	..	..	..	..	..	..	1
	.2 Cleft palate	..	..	..	..	..	..	2
	.7 Rectal and anal atresia	..	..	..	..	..	..	1
3	Heart and Great Vessels							
	.0 Congenital heart disease NOS	..	..	..	..	..	..	1
4	Respiratory System							
	.1 Defects of nose (arhinia, choanal atresia or stenosis)						..	1
5	Uro-genital System							
	.6 Hypospadias, epispadias	..	..	..	..	..	..	2
	.7 Other defects of male genitalia	..	..	..	..	..	..	2
	.9 Indeterminate sex (includes true hermaphroditism)	..	..	..	..	..	..	1
	.0 Defects of uro-genital system NOS	..	..	..	..	..	..	1
6	Limbs							
	.2 Reduction deformities (amelia, hemimelia, phocomelia, etc.)							2
	.3 Polydactyly	..	..	..	..	..	..	2
	.4 Syndactyly	..	..	..	..	..	..	1
	.6 Talipes	..	..	..	..	..	..	6
7	Other Skeletal							
	.2 Spinal curvature, scoliosis, lordosis	..	..	..	..	..	..	1
8	Other Systems							
	.4 Other defects of skin (including ichthyosis congenita)						..	1
	.9 Exomphalos, omphalocele	..	..	..	..	..	..	2
9	Other Malformations							
	.8 Other specific syndromes	..	..	..	..	..	..	1
	.0 Congenital malformation NOS	..	..	..	..	..	..	1
							Total	39

### **Observation (At Risk) Register.**

The total number of cases added to the register in 1968 was 126. The reasons for inclusion were as follows:—

Pre-eclamptic toxæmia ..	11	Threatened abortion ..	1
Forceps delivery .. ..	34	Ante partum hæmorrhage	3
Prematurity .. ..	29	Maternal epilepsy ..	1
Breech delivery .. ..	4	Asphyxia .. ..	1
Rhesus incompatibility ..	1	Post maturity .. ..	1
Caesarian Section .. ..	14	Miscellaneous .. ..	8
Multiple pregnancy .. ..	12		
Neonatal jaundice .. ..	3		
Family deafness .. ..	3		
Total .. ..	126		

Five children have been transferred to the Handicapped Children's Register, two with heart defects, one with cerebral palsy and squint, one with epilepsy and one who is partially deaf.

### **Handicapped Children's Register.**

During the year there were 132 children under 5 years of age on the Handicapped Children's Register, twenty-one of whom had defects in two categories, five in three categories and one in four categories.

Fifty-one names have been removed from the register, seven of whom had defects in two categories and two in three categories. Two children died, five left York, three now attend Lidgett Grove Junior Training Centre and one name was removed because there were now no symptoms.

Forty-seven names were added during the year, two of whom had defects in two categories and one in three categories.

The defects were as follows:—

Asthma 1, Blind and partially blind 5, Deaf and partially deaf 6, Eczema 7, Epilepsy 8, Hare lip and cleft palate 7, C.N.S. and spastic 17, Diabetic 1, Heart defects 16, Mentally defective 18, Mongols 12, Orthopaedics 13, Strabismus 30, Miscellaneous 25.

Although the above appears a dry numerical index the register is a very live record and the children are kept under continual supervision.

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

In 1968, 137 babies were cared for by the premature baby nurse, 79 of these were premature, and 58 were babies over 5½ lbs. at birth, but having difficulties with feeding or weight gain.



One hundred were referred from the Fulford Maternity Hospital, twenty-two by district midwives, fourteen by a health visitor, and one by the Health Welfare Officer.

Of the babies with feeding difficulties, thirty were referred from the Fulford Maternity Hospital, fourteen by midwives, thirteen by health visitors and one by the Health Welfare Officer.

The total number of premature births notified in the City was 139 (including 20 stillbirths).

Total number of Premature Live-births who were born :—

(i) at home or in a nursing home	..	..	..	..	18
(ii) in hospital	..	..	..	..	101

The number of those born at home or in a nursing home :—

(i) who were nursed entirely at home or in a nursing home	18
(ii) who died during the first 24 hours	2
(iii) who survived at the end of 28 days	16

Born in hospital :—

(i) who died during the first 24 hours	7
(ii) who survived at the end of 28 days	92

The following is an analysis of the weights of premature babies born at home :—

2 lbs. 3 ozs. or less	2
Over 2 lbs. 3 ozs. up to and including 3 lbs. 4 ozs.	1
Over 3 lbs. 4 ozs. up to and including 4 lbs. 6 ozs.	2
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs.	1
Over 4 lbs. 15 ozs. up to and including 5 lbs. 8 ozs.	12

### Day Nurseries.

Throughout the year the number of children on the registers has fluctuated, between 43-51 at the Acomb Day Nursery and 44-56 at the Heworth Day Nursery. In August and November, at Acomb, the number on register fell below capacity to 43 and 44 respectively, and in July the number at Heworth dropped to 44. These falls may be partly due to the slowness in taking up places made vacant by older children leaving for school.

Apart from working mothers priority was given, on socio-medical grounds. At Acomb there were six children with delayed speech development, of whom, three had some mental retardation, two were epileptics and two had deaf mothers. A further twenty-two were admitted on the recommendations of general practitioners because of the mothers' inability to cope with their children's various behaviour problems. One child at Heworth had cerebral

palsy, two had delayed speech development and three had behaviour problems. Thirteen children were admitted because of their mothers' inability to cope.

On the whole, the health of the children has been satisfactory. Ten cases of rubella and eleven cases of measles occurred at Heworth, and thirteen cases of rubella and one case of measles occurred at Acomb. All children without a history of measles were offered measles vaccination. The majority of other infections were upper respiratory and diarrhoea, and there were two cases of hepatitis at Acomb. Two children at Heworth suffered from glandular fever, three had chicken pox and there was one case of whooping cough.

Family grouping was adopted at Acomb Nursery with very favourable results and it is hoped to start a similar scheme at Heworth.

Six out of the seven candidates for the examination of the Nursery Nurses Examination Board were successful. Both nurseries were visited by students from both home and abroad, by nurses in training, and by girls from secondary schools.

Attendance	No. of places		No. on Register at 31st December		Average daily attendances	
	0—2	2—5	0—2	2—5	0—2	2—5
Cornlands Road	15	30	7	38	7	31
Heworth	15	30	18	32	13	26

#### **Nurseries and Child-Minders Regulation Act, 1948.**

At the beginning of the year two premises were registered to take a total of 28 children, and eleven persons were registered to take a total of 118 children.

During the year five child-minders ceased to operate and one new person was added to the register. Eight new playgroups were investigated and registered.

The amendment to the Regulations made by Section 60 of the Health Services and Public Health Act, 1968, came into force on 1st November, and the publicity given to the change gave rise to a flood of enquiries, many of which were subsequently investigated, but no new registrations have been made by the year end because of these Regulations.



On the 31st December, seven persons, permitted to take a total of 73 children, and ten playgroups, to take 187 children, were on the register.

The need for careful investigation and supervision of both persons and premises to maintain a high standard of care is required and this has meant a heavy increase in the work of the staff concerned. More playgroups and persons will be registered during the early part of the coming year.

### **Co-ordinating Committee for the Care of Children.**

Meetings of the Committee were held monthly at the School Clinic, the Medical Officer of Health being Chairman, and representatives attended from statutory and voluntary services concerned with the care of children living in York.

During 1968, thirty-six families were discussed, twenty-one of which were new cases.

Of these, twenty-eight cases continued under the supervision of the officer concerned, but were to be referred to the Committee again if necessary, and fifteen were still being discussed at the end of the year.

Eight families were given the tenancy of a Council house in the course of the year, and eight families were evicted for non-payment of rent, but two were allocated Council houses shortly afterwards.

Three mothers and their children were admitted to the Elizabeth Fry Home during the year. One, however, failed to settle and stayed for a few days only.

The Women's Royal Voluntary Service arranged hospitality holidays for fifty-nine children between the age of five and twelve years, and twenty-two children attended the Thursday Club Camp.

The Thursday Club, run by voluntary effort, continues to hold weekly meetings which are well attended by children from these families.

### **Distribution of Welfare Foods.**

During 1968 the sale of Welfare Foods decreased considerably at the main centre, especially after the transfer to new premises in Monkgate. Sales of orange juice and vitamin tablets continue to increase at the ante-natal clinic at the York County Hospital.

#### **Welfare Foods—York sales.**

Year				National Dried Milk Tins	Cod Liver Oil Bottles	Orange Juice Bottles	Vitamin Tablets Packets
1964	..	..	..	32,225	2,142	28,650	4,337
1965	..	..	..	28,601	2,198	28,639	3,846
1966	..	..	..	26,370	2,075	33,148	3,884
1967	..	..	..	26,228	1,990	33,837	3,791
1968	..	..	..	23,707	1,663	31,657	4,036



## Dental Treatment for Expectant and Nursing Mothers and Children under 5 Years.

The Principal School Dental Officer reports that the dental service progressed satisfactorily during the year and showed a satisfactory increase in the volume of work as compared with the previous two years. Two hundred and eighty one children were inspected during the year as compared with 152 in the previous year. Of these children 168 needed treatment. This means that 60 per cent of the pre-school children examined had mouths affected to a greater or lesser extent by dental decay. This indicates that children are eating far too many biscuits, sweets, ice lollies and syrupy drinks between meals. Much of this decay would be avoided if parents ensured that the children only ate fruit or nuts between meals. Most of this decay would not, of course, occur if our water were fluoridated. One hundred and ninety four children were treated and 680 fillings were inserted. This is  $3\frac{1}{2}$  fillings per child which is not a very satisfactory state of affairs when one considers that these were all pre-school children under the age of five years.

Two thousand one hundred and eighty two expectant mothers were inspected during the year and 996 of these patients were found to need treatment. Many of these women attend their own dentists but 107 patients were treated during the year. A satisfactory trend in the treatment of expectant and nursing mothers is that more fillings were inserted during the year and less teeth were extracted. The Maternal and Child Health Dental Service is serving a two-fold purpose, first it is treating approximately 10 per cent of the mothers who need treatment and also is encouraging other mothers to consult their own dentist.

### *Attendances and Treatment*

Number of Visits for Treatment during Year:	Children 0-4 (incl.)	Expectant and Nursing Mothers
First Visit .. .. .	194	107
Subsequent Visits .. .. .	367	225
Total Visits .. .. .	561	332
Number of Additional Courses of Treatment other than the First Course commenced during year..	35	2
Treatment provided during the year:—		
Number of Fillings .. .. .	680	303
Teeth Filled .. .. .	586	295
Teeth Extracted .. .. .	72	92
General Anaesthetics given .. .. .	45	19
Emergency visits by Patients .. .. .	16	1



Treatment provided during the year ( <i>cont.</i> ) :—	Children 0-4 (incl.)	Expectant and Nursing Mothers
Patients X-Rayed .. .. .	3	6
Patients treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis) .. .. .	81	68
Teeth otherwise conserved .. .. .	3	—
Teeth Root Filled .. .. .	—	1
Inlays .. .. .	—	—
Crowns .. .. .	—	—
Number of Courses of Treatment completed during the Year .. .. .	166	68

### Prosthetics

Patients supplied with F.U. or F.L. (first time) .. .. .	4
Patients supplied with Other Dentures .. .. .	6
Number of Dentures Supplied .. .. .	12

### Anaesthetics

General Anaesthetics Administered by Dental Officers .. .. .	32
---	----

### Inspections

Number of Patients given First Inspections during Year .. .. .	281	2,181
Number of Patients who required treatment .. .. .	168	996
Number of Patients who were offered treatment.. .. .	164	509

### Sessions

Number of Dental Officer Sessions (i.e., equivalent complete half-days) devoted to Maternity and Child Welfare Patients:

For Treatment .. .. .	201,63
For Health Education .. .. .	—

### Provision for Mothers or Children in Residential Homes.

This includes homes administered by the Local Authority Children Committee, and voluntary homes. Premises administered by the Local Authority Children's Committee include The Glen Nursery for seventeen children; St. Hilda's Garth, a reception centre for twenty-five children; a boys' home at Ashford Place to accommodate twelve, and three family group homes. These homes are situated in Danebury Drive, which has

accommodation for twelve children, and in Nursery Drive and Kingsway North, which have places for nine. The medical supervision of these homes is undertaken by the Senior Medical Officer for Maternity and Child Health.

(a) *York Diocesan Mother and Baby Home, Heworth Moor House, York.*

Mrs. Haworth, Matron of the home has kindly supplied information for the following report:—

Accommodation at present: 15 beds, 10 cots.

On 1st January, 1968, 14 girls and 9 babies were resident.

During the year, 47 unmarried girls were admitted.

Of the babies born, twenty-three were known to have been adopted, sixteen went home with their mothers, four were admitted to foster homes or Children's Homes and four have not yet been discharged.

The ages of the mothers ranged from 14 years to 29 years.

During the year the Mothers' bedroom on the middle floor has been completely modernised and redecorated, and the Girls' lounge has been decorated.

Relaxation classes continue to be held on Mondays and sewing classes on Friday afternoons. A 'Living by Beauty' class is held on alternate Thursday evenings and has proved a great help to the girls.

Ante-natal and post-natal care is still given to the girls by Dr. J. C. M. Yuill, and the home remains in the happy position of being fully staffed.

(b) *West Garth Church of England Children's Society Nursery.*

This Nursery has accommodation for 23 children under the age of five and is recognised as a training centre for the Certificate of the National Nursery Examination Board Diploma.

It is run on the 'family' plan, the children being kept in small groups with their own nursery nurse to look after them.

(c) *St. Stephen's Home, The Mount.*

This Home accommodates 23 girls from two to 15 years. Good liaison is maintained with the Local Health Authority, a Health Visitor visiting at regular intervals, and reporting as necessary to the Authority. St. Stephen's aims to bring up the children in an atmosphere as much like a real home as possible, with a Christian background; and helps them to train for a career when they leave.



### **Care of the Unmarried Mother.**

The number of mothers giving birth to illegitimate children in 1968 was 184 (compared with 179 in 1967), 11 per cent of the total live births in York, four being in temporary residence in the City.

Of these cases, five were young girls who had conceived under the age of 16 and forty-seven were married women having illegitimate children.

Of the babies born in 1968, 125 remained with their mothers and 58 were placed for adoption, 55 by arrangement with the York Adoption Society and 3 through the Catholic Adoption Society.

Sixty mothers were helped with the provision of accommodation, furniture, bedding, etc., and 64 had grants from voluntary societies, including monthly grants from the Buttle Trust and Dr. Barnados Home.

### **Maternal Mortality**

There were no maternal deaths during the year.

## **MIDWIFERY SERVICE**

(Section 23)

The authority employs nine domiciliary midwives including one specially trained for work with the premature baby. All are recognised for the training of pupil midwives for Part II of the Certificate of the Central Midwives Board.

There were eleven midwives in practice at the end of the year, nine of whom were employed by the Council, one in private practice, and one in a Nursing Home.

Two hundred and forty-five cases were attended by the Authority's Domiciliary Midwives, and none by midwives in private practice.

The proportion of domiciliary, compared with institutional confinements, was 14.4 per cent to 85.6 per cent. Seventy-one per cent of patients confined at home received pethidine and eighty-seven per cent trilene analgesia.

The number of cases in which medical aid was summoned during the year by a midwife for domiciliary cases was one.

### **Maternity Liaison Committee.**

This is a committee of professional representatives of hospital, domiciliary midwifery and general practitioner services. It met once during the year, with the Medical Officer of Health as chairman, and the Secretary of the Hospital Management Committee as secretary.

### **Pupil Midwives.**

York is recognised as a training centre for Part II of the Certificate of the Central Midwives' Board. Pupils spend three months in hospital and three months on district with the Authority's midwives.

No. 50 Bootham is leased by the Local Authority to the Hospital Management Committee as a central hostel for pupil midwives doing district work. There is accommodation for ten pupils and two resident staff. Seventy-five pupils were trained during the year compared with seventy the previous year.

### **Early discharge from Hospital.**

There were 582 patients discharged early from the maternity hospital compared with 434 the previous year. Of these, 283 were on or before the 5th day, compared with 162 in 1967 and 220 within 48 hours, compared with 118 in 1967.

### **Ante-natal Relaxation and Mothercraft Classes**

A total of 389 expectant mothers made 1,960 attendances at these classes during the year. These classes are run jointly by the Local Authority and Hospital Management Committee.

### **York Maternity Hospital**

Number of beds, viz. :—

Lying-in-Beds	..	..	..	66	}	112
Ante-natal Treatment Beds	..	..	..	20		
Premature Infant Cots	..	..	..	14		
General Practitioner Unit	..	..	..	12		

Number of Admissions :—

(a) York	..	..	..	1,701	}	3,429
(b) Other Areas	..	..	..	1,728		

Number of women admitted for ante-natal treatment 656

Average duration of stay in days .. .. . 15.14

Number of cases delivered by :—

(a) G.P. Unit—	(i) York Cases	178	}	355
	(ii) Other Areas	177		
(b) Midwives—	(i) York Cases	1,028	}	2,040
	(ii) Other Areas	1,012		
(c) Doctors—	(i) York Cases	216	}	470
	(ii) Other Areas	254		



(d) Number of cases admitted after delivery :—					
Mother and Babies	..	..	31	}	39
Babies only	..	..	8		
Number of Live Births	..	..	..	..	2,459
Plus G.P. Unit	..	..	..	..	354
Number of Still-births	..	..	..	..	49
Plus G.P. Unit	..	..	..	..	1
Number of cases notified as Puerperal Pyrexia	..	..	..	..	Nil
Number of Infants wholly breast fed on discharge	..	..	..	..	872
Number of Maternal Deaths :—					
(i) York Area	..	..	..	..	Nil
(ii) Other Areas	..	..	..	..	Nil
Number of Infant Deaths within 28 days of birth	..	..	..	..	21
			<i>Part One</i>	<i>Part Two</i>	
Number of Pupils in Training					
during 1967	..	..	47	28	(York 18)
Number entered for Examination					
of Central Midwives Board			38	31	
Number successful	..	..	30	27	

## HEALTH VISITING

(Section 24)

The total Health Visiting and School Nursing establishment is 24. The work of nurses undertaking combined duties (including the Senior Health Visitor) being allocated as 2/3rds Health Committee, 1/3rd Education.

At the end of the year there were 19 qualified health visitors in post, and there were 5 state registered nurses employed as school or clinic nurses.

The number of visits paid during the year were as follows :—

To expectant mothers, first visits 550, total visits 1,006 ; to children under one year of age, first visits 4,043, total visits 11,694 ; to children between the ages of one and five years, 15,735 ; tuberculous patients, 378 ; infectious cases, 248 ; aged persons, 2,120 ; convalescent cases, 3 ; homes for the aged 43 ; nurseries 73 ; adoptions 22 ; visits following discharge from isolation hospital, 35 ; hospital follow-ups, 330 ; gastric follow-up, 458 ; diabetic cases, 940 ; hospital special visits, 20 ; asthmatics (allergy), 10 ; visits re peptic research, 383.

Arrangements for training health visitors, clinics and parents clubs run by general practitioners, gastric, diabetic, cardiac and tuberculosis work, remain as described previously.

## **HOME NURSING SERVICE**

(Section 25)

The Home Nursing Establishment at the end of the year was 22 (including 4 State Enrolled Nurses). There were 22 nurses in post at the end of the year, of whom 14 were District trained.

At the commencement of the year there were 482 cases on record. There were 1,650 new cases, a decrease of 92 on last year, and 58,409 visits, an increase of 1,507, were paid during the year.

An analysis of cases shows that 1,184 were referred by general practitioners, 415 from hospitals, 35 applied directly and 16 cases came from other agencies.

Of visits 44,234 were medical, 12,996 surgical, 1,104 tuberculosis, 49 maternal complications, and 26 other visits.

Of the 1,650 new cases attended 36 were children under 15 years of age. Of this total 16 were children under 5 years.

Of the 36 children attended 22 were for the administration of injections, 12 of the under fives were follow-up visits after circumcision.

This service, and the associated equipment loan service has continued to operate without major changes during the year.

York is approved and registered by the Minister of Health as a training centre for the practical district training of State Registered Nurses. It is also approved by the Queen's Institute of District Nursing for the practical training of State Enrolled Nurses. One State Enrolled Nurse and one State Registered Nurse undertook the appropriate course of instruction.

## **IMMUNISATION AND VACCINATION**

(Section 26)

### **Immunisation against Diphtheria, Whooping Cough and Tetanus**

A total of 3,242 children were immunised of whom, 419 received diphtheria and tetanus vaccine and 1,777 received triple vaccine against whooping cough, diphtheria and tetanus.



Total immunised against Diphtheria .. .. .	1968		1967	
Born 1964-68 .. .. .	853		1437	
Born 1968 .. .. .	817		1400	
	161		614	
	In Local Authority Clinics	By General Practi- tioners	In Local Authority Clinics	By General Practi- tioners
Children receiving combined Diphtheria and Whooping Cough vaccine .. .. .	—	—	5	4
Children receiving combined Diphtheria, Whooping Cough and Tetanus vaccine ..	516	1261	652	1393
Children receiving injections against Diphtheria only ..	17	—	34	2
Combined Diphtheria and Tetanus .. .. .	111	203	53	95
Tetanus only .. .. .	27	197	64	180
Totals.. .. .	671	1661	808	1674

Number of children at 31st December, 1968, who had completed a course of Diphtheria Immunisation during the year:—

(A) Number of children who completed a full course of Primary Immunisation in the Authority's area (including temporary re- sidents) during the twelve months ended 31st Dec- ember, 1968.	Children Born in Years				Total
	Born 1968	Born 1964-67	Born 1959-63	Born 1954-58	
	161	656	32	4	853
(B) Number of children who received a secondary (re- inforcing) injection (i.e. subsequent to primary immunisation at an earlier age) during the twelve months ended 31st Dec- ember, 1968.	—	649	685	26	1,360

**Vaccination against Smallpox.**

Of the 1,503 Smallpox vaccinations during the year, 1,161 were notified by general practitioners and 342 by the Authority clinics.

**Vaccination against Poliomyelitis.**

A course of vaccine was given to 1,217 children of all ages, and a reinforcing fourth dose was given to 1,221 children between five and eleven years of age.

**Immunisation against Measles.**

Eight hundred and five children were immunised against measles.

**Yellow Fever Immunisation.**

Immunisation is by appointment at the Health Services Centre, Monkgate, formerly at Duncombe Place, and there is a charge of £1 0s. 0d. per patient. During the year 418 persons have been immunised, of whom 151 were service personnel.

**AMBULANCE SERVICE**

(Section 27)

The mileage travelled in 1968, 196,649, is the highest recorded and shows an increase of 7,572 over last year. Twice daily journeys to Specialist hospitals in the West Riding, an increase in transport to the Occupation Centres and patients to and from Naburn Hospital Day Care account for most of this increase.

The number of patients carried, 77,887, was 95 less than in the preceeding year although 756 were from the areas absorbed into the City in April.

The greatest problem in patient carrying is that of the peak periods of 08.00 to 10.30 and 15.30 to 17.30 hours, when the greatest demands are made upon the Service. The peak loading times coinciding with peak traffic times causes difficulty in maintaining the prompt attendance of Out-patients at hospitals and adequate emergency cover for the City and District. Time is saved by drivers taking devious routes to avoid traffic congestion.

The average miles per patient was 2.53 as against 2.42 the previous year.

Work of an emergency nature rose by seventy nine in the year, and although Road, Industrial, and Other Accidents fell, this was offset in the rise of sixty five in Home Accidents and ninety two in Acute Illness calls.



The number of trainees transported to Occupation Centres rose by 2,511 to 33,880. The three personnel carriers are operating to capacity and it is anticipated that a sitting case ambulance will have to be allocated early in 1969 to accommodate a further increase in the number of trainees.

Maintenance of the Ambulance fleet continued at the Streets and Buildings Repair Depot in Moss Street and was not entirely satisfactory. A scheme of preventative maintenance at the Ambulance Station where more hygienic facilities are available at less cost would be more satisfactory than the present arrangements, but an application for a mechanic at the Ambulance Depot was not successful. It is a constant worry to the Operational Staff having to select rather than allocate an ambulance for a long distance journey. Minor faults, which develop into major ones, are frustrating and time wasting, and emergency vehicles should be in top condition at all times.

Visits to the Ambulance Station were arranged for Pre-student nurses (two half days), and pupils from Burnholme Secondary Modern School (three half days). Two voluntary organizations paid evening visits.

A summary of the number and types of patients conveyed and the mileage travelled is given in the following tables:—

#### **PATIENTS AND OTHER PERSONS CONVEYED, WITH MILES TRAVELLED.**

Year	Persons	Miles
1964	67,091	174,170
1965	70,909	181,217
1966	72,236	185,438
1967	77,982	189,077
1968	77,887	196,649

<b>Analysis of Work and Mileage</b>	Persons Carried	Miles Travelled
Patients under Section 27	43,763	158,858
Work for Hospital Management Committee		
(a) Analgesia Equipment etc.	—	158
(b) Personal Transfers	107	267
Midwives	117	624
Pupils to and from Occupational Centres	33,880	31,040
Conveyance of Children for Education Committee	13	1,726
Welfare Department	6	88
Abortive and Service journeys	—	3,764
Patients under National Health Service (Amendment) Act 1957	1	124

### Classification of Patients Carried

Accident or Other Emergency	1968	1967
Road Accident .. .. .	698	716
Home Accident .. .. .	211	146
Industrial Accident .. .. .	129	133
Other Accident .. .. .	609	660
Acute Illness .. .. .	833	741
Emergency Maternity .. .. .	7	12
	<hr/> 2,487 <hr/>	<hr/> 2,408 <hr/>
 Others	 1968	 1967
General Illness .. .. .	3,377	3,168
Maternity .. .. .	684	614
Tuberculosis .. .. .	2	5
Other Infectious Diseases .. .. .	35	51
Mental .. .. .	160	93
Inter-hospital transfer .. .. .	3,353	3,248
Hospital discharge .. .. .	1,799	1,592
Out-patient attendance .. .. .	31,866	33,551
	<hr/> 41,276 <hr/>	<hr/> 42,322 <hr/>

Financial responsibility for mileage under Section 27 was allocated as follows:—

York County Borough Council	153,171
Other Ambulance Services	5,687

### Journeys of 100 miles and over

- (a) By Road:— Ashington, Cambridge, London, Malmesbury, Preston, Wellingborough (4).
- (b) By Rail:— Cheltenham, London (4), Maidstone.

### Emergency (999) Telephone Calls

1,723 compared with 1,484 in 1967.



## **Fleet**

As at 31st December — 18 Vehicles.

28 h.p. 2 stretcher, 1964.	1
15 h.p. 2 stretcher, 1962, 1964 (2), 1966, 1967 (2), 1968.	7
15 h.p. Dual purpose, 1961, 1963 (2), 1964, 1968.	5
28 h.p. Personnel Carriers, 1965, 1967, 1968.	3
15 h.p. Estate Car Ambulance, 1965.	1
22 h.p. Mobile control vehicle.	1

## **Staff**

Sickness of the Operational Staff involved the loss of one hundred and thirty nine working days as against one hundred and fifty four in the previous year; leave taking amounted to six hundred and sixty one working days as against six hundred and eighty nine; overtime worked totalled 1,267 $\frac{3}{4}$  hours as against 1,371 $\frac{3}{4}$  hours in 1967.

## **Training**

Two Driver/Attendants attended a six week Ambulance Aid Course at the West Riding County Training School, Birkenshaw, and both men obtained a good assessment in their examinations.

Our nominee for Ministry of Health Ambulance Instructor's Course held at Easingwold in November, was successful in obtaining satisfactory marks.

## **PREVENTION OF ILLNESS, CARE AND AFTER-CARE**

(Section 28)

### **TUBERCULOSIS**

#### **Clinics**

Clinics are held at the Chest Clinic, 11 Castlegate, and at the City Hospital.

The number of visits paid by Tuberculosis Visitors during the year was three hundred and sixty eight.

Nine hundred and ninety seven attendances were made at the Chest Clinic, one hundred and twenty four new cases, exclusive of contacts, were examined, eleven of whom were found to be suffering from tuberculosis. Six of the five hundred and five contacts examined were found to be suffering from tuberculosis.

#### **New Cases and Mortality**

There were two new cases between 0 and 15 years of age, seven between 15 and 45, three between 45 and 65 and five over this age. There were five deaths from tuberculosis (four respiratory and one from other forms).

Fifteen York cases were admitted to Fairfield Hospital during the year.

### Open Cases in the Community

Figures are supplied quarterly of cases at home known to have positive sputum. There was only one such case at the end of the year.

The after-care work, apart from the routine work of the tuberculosis health visitor, is delegated to the York Chest and Heart Association which helped seven families during the year. Two persons were suffering from tuberculosis and five from chronic bronchitis.

### B.C.G. Vaccination against Tuberculosis

There were one hundred and sixty four children vaccinated under the Contact Scheme, and 1,313 under the School Children Scheme.

### School Children Scheme

The scheme for B.C.G. vaccination of school-leavers, started in 1955, was continued in both maintained and independent schools.

Detailed statistics are as follows:—

Number of parents or guardians of 13-year old school children circularised.. .. .	1,887
Number of parental consents received .. .. .	1,705
Consent rate .. .. .	90%
Number of children Heaf tested .. .. .	1,535
Number of children not Heaf tested:—	
Reasons being (1) Absent from school .. .. .	150
(2) Left the District .. .. .	12
(3) Other reasons .. .. .	8
	— 170
Number of children who gave a positive reaction to Heaf test .. .. .	216
Percentage.. .. .	14%
Number of children who gave a negative reaction to Heaf test .. .. .	1,315
Percentage.. .. .	86%
Number of children (negative reactors) who were vaccinated	1,313
Number of children vaccinated who showed satisfactory reaction on the arm eight weeks later .. .. .	1,134
Number absent for readings .. .. .	179

Of the 216 children who were Mantoux positive, 33 subsequently attended for examination at the City Hospital and one attended a mass X-ray session. None showed any evidence of active tuberculosis infection. The remaining children were to attend a specially organised mass X-ray session in February, 1969.



## CANCER RELIEF

Mrs. F. N. Farrow, York representative of the National Society for Cancer Relief has kindly supplied information for the following report:—

Most of the help given was by continuous weekly grants for extra nourishment for patients in their own homes, but grants for the cost of bus or train fares were paid to those in hospital so that their relatives could visit them. All patients at home also had a Christmas gift of £3.

Some patients (with their wives or husbands) have had grants towards the cost of holidays and several have had their weekly television rental paid.

Once it is established that a cancer patient is in need of financial help, no reasonable request is ever refused. During the year £1,223 7s. 6d. was given by way of grants to patients living in York.

## CERVICAL CYTOLOGY

Cervical cytology clinics were made open clinics in 1966. There was a high initial demand, but this fell towards the end of the year. The major part of the work of taking smears is undertaken at gynaecological, post-natal and Family Planning Association clinics.

In Local Authority clinics, three hundred and fifty three patients were examined in 1968.

Since the establishment of the cervical clinics in July, 1965, 2,239 patients have been seen, of whom two hundred and eighteen were referred to their general practitioners for treatment of clinical conditions other than abnormal cervical smears.

## HEALTH EDUCATION

Regular classes in mothercraft have been given by Health Visitors in ante-natal clinics, and Health Visitors have also been increasingly asked to give classes in Secondary Modern Schools on various subjects ranging from hygiene to child care. First Aid and Home Nursing classes are regular commitments for St. John and Red Cross, Home Office Houseparent's course, Guides and Scouts, etc. There has been a steady flow of nursing and of social science students through the Department during the year, and no opportunity for Health Education of such potential health educators has been neglected. The usual displays of posters and leaflets in clinics has been maintained.

While no special exhibition or project has been mounted during 1968, the year has been one of steady progress. Greater acceptance of the help of Health Visitors in schools represents a big step forward in the field of contact



with older teenagers and with teachers themselves. The better facilities of Monkgate Clinic and Clifton Clinic, and the encouragement of mothers to linger in all clinics to chat over a cup of tea has also increased the opportunities for the person to person type of teaching which is all important amongst this section of the community.

### CHIROPODY

Prior to 1959, the Health Department operated a Chiropody Service for the elderly which was financed by money from the Purey Cust Fund. It had been gradually developed from one session per week until by 1959 a session was held every afternoon. When the Corporation assumed financial responsibility the same two part-time Chiropodists continued to be employed, and with increasing demand, additional sessions were added. By the middle of 1964 the service was heavily overburdened and it became clear that a full-time Chiropodist was urgently required. It proved very difficult to fill this appointment and it was not until April, 1967 that the first full-time Chiropodist was appointed. There were at this time 488 patients receiving attention, and in addition, the Chiropodist assumed responsibility for the Chiropody in the Old People's Homes and did her own clerical and administrative work. All patients were seen at one or other of the two central clinics, and the numbers of patients requiring ambulance transport was found to be rising steadily.

After the first quarter's work the review of circumstances revealed three main problems. There was a very rapid increase in the numbers of new patients; a very large number of infirm patients required ambulance to get them to the clinics; many patients had to be up and dressed very early to be picked up by the ambulance, were subjected to long periods of travelling round and waiting, and in consequence a number were in very poor condition on arrival at the clinic.

The remedies suggested to deal with these problems have now been adopted. Two clinics on the outskirts of the City have been equipped to save patients travelling into town. Some patients who required an ambulance are able to manage the shorter journey without one. In addition, a domiciliary service has now been in operation for a year and has been very successful and popular. It has been found that with careful planning, the chiropodist can attend as many patients as in a clinic session. All the patients previously requiring an ambulance have been absorbed into the domiciliary service, saving both the Chiropodist's time and that of the Ambulance Service to say nothing of the increased convenience and comfort to the patients for whom the service was planned.



An additional benefit of the domiciliary service has been that out 'in the field', the Chiropodist has been enabled to investigate the whereabouts of non-attenders at clinics and has discovered that 134 of those on the books in 1967 had either died or left the district. This has resulted in fewer wasted appointments at clinics.

During the first year's working with full-time Chiropodist the number of patients increased at the rate of 30 a month and is now more than double that of two years ago. Provision has been made on the establishment for a second full-time Chiropodist but it has not yet been possible to fill this post. A part-time Chiropodist working up to four sessions a week helps to stem the flood, but the service is strained to its limits and many patients should be receiving more frequent treatments than is at present possible.

If we are going to be able to keep the old people of the future mobile and independent for longer periods, energetic measures for increasing available Chiropody will be necessary.

	1967	1968
Total patients on Register .. .. .	845	1,234
Number of clinic sessions .. .. .	345	530
Number of treatments in clinics .. .. .	2,726	3,793
Number of Patients conveyed by ambulance .. .. .	183	—
Number of domiciliary Patients .. .. .	56	392

Weekly sessions were held as follows:—

- 5 sessions at the School Clinic, Monkgate.
- 1 session at the Health Services Centre, Clifton
- 1 session at the Health Services Centre, Lidgett Grove.
- 1 session at Welfare Homes.
- 5 domiciliary sessions.

## DOMESTIC HELP

(Section 29)

The Home Help Organiser visited 789 householders during the year, 42 of these being evening and week-end visits. Sixty eight households were visited by one clerk, forty were initial visits. Thirty eight were visited by the second clerk.

The weekly case load varied from 623 to 718, and the number of weekly visits paid by Home Helps over the last two months of the year varied between 1,092 and 1,308.

Fifty households are now served by the Laundry Service each week, making a total of one hundred households who have a fortnightly laundry service.

Twelve Home Helps attended a week's refresher course, organised by the Education Department through the Marygate Centre of Further Education, and this was found most valuable by all who attended, and greatly appreciated.

At 31st December, 1968, the following Home Helps were employed:—

Part-time Home Helps	.. ..	117	
Temporary Home Helps (Full-time)		15	
		<hr/>	
Total		132	Equivalent to 74 full-time Home Helps.
		<hr/>	

When required, two Sitters-up and one Sitter-in are available for duty.

During the year the following cases were attended:—

Maternity cases	.. ..	32
General cases (including care of the aged)	.. ..	943
Tuberculosis	.. ..	5
Others	.. ..	79
		<hr/>
Total		1,059
		<hr/>

Of these, 304 were new cases compared with 311 in 1967.

Cases given daily help for fires	117
Cases given full morning daily help for fire making, dressing and preparation of meals	12
Cases given help at midday to fit in with meals on wheels service	15
Cases given daily help at midday to prepare a meal	70
Cases given help more than once a week	141
Cases helped by the sitting-up service	5
Cases helped daily by the sitting-in service	4
Cases helped for social reasons	18
Families given daily full-time help during period of mother's illness	4
Families given daily help during period of mother's illness	9
Families given domestic help during period of mother's illness	9
Families given full-time daily help during mother's absence from home	2



## CONVALESCENT HOLIDAYS

Number of applications received from General Practitioners during 1968	265
--	-----

Periods of Convalescence approved :—

Section 28 National Health Service Act, Younger and more active patients.	114
--	-----

Dispensary Funds. Handicapped, incurably ill and aged patients.	54
--	----

Purey Cust Funds. Handicapped, incurably ill and aged patients.	41
--	----

Of the 265 recommendations, 59 were men, 148 were women and 58 were children.

The majority of the convalescent holidays were arranged at three small private Homes in Bridlington where patients of all ages are made welcome. Four of the more active patients stayed at a convalescent home in Scarborough, one stayed at a Methodist Home in Llandudno, and one went to a Catholic Convalescent Home in Grange-over-Sands. Two mothers and their seven children enjoyed a period of convalescence at an endowed Guest House near Morecambe. Seven children, all in poor health due to home circumstances, benefited from a period of convalescence arranged at the White Heather Children's Home, Colwyn Bay.

The approximate cost for patients sent through Section 28 of the National Health Service Act was £8 per week.

Holidays were arranged for the physically handicapped patients at the British Red Cross Holiday Home, Bridlington, and for the more severely handicapped, at the Cheshire Home at Alne. These holidays are particularly appreciated by the patients themselves and their relatives who have a break from caring for them. These were paid for by the Dispensary or Purey Cust Funds.

Assistance with clothing was given when necessary from grants from voluntary funds, the Department of Health & Social Security, or through the Women's Royal Voluntary Service.

Arrangements were made for the care of children and animals during the patient's absence on holiday, and grants from Voluntary Societies were obtained to help with minor financial difficulties so that the patients could go away as free as possible from financial stress.

### **Holidays provided by Voluntary Societies**

The Women's Royal Voluntary Service Hospitality Holiday Scheme again arranged holidays for fifty nine children from poor homes who were recommended by Social Workers.

Twenty six grants were given to enable families in poor circumstances to have a holiday in a caravan, bungalow or flat, or for rail fares to enable them to have a holiday with relatives.

## **MENTAL HEALTH SERVICES**

(Section 51)

Since 1953 the Mental Health Service in York has been an integrated one run jointly by the local health authority and the hospital management committee.

It operates from the Mental Health Section at 24 St. Saviourgate which is favourably situated relative to the centres for the treatment of patients in the area.

The Assistant Psychiatrist, who co-ordinates this service, is employed jointly by the Regional Hospital Board and the Local Authority, being responsible to the Medical Officer of Health for the local authority's services and Dr. W. A. L. Bowen, the Physician Superintendent of Naburn and Bootham Park Hospitals, for the hospital services.

The mental welfare officers and social workers on the staff are also joint appointments, and all necessary social work is undertaken both in the patient's home and in hospital to maintain continuity of care.

### **Case Conferences**

Weekly case conferences of Doctors, Social Workers and Nursing Staff have been held at Bootham Park and Naburn Hospitals alternately.

### **Mental Subnormality**

Thirty six cases were ascertained subject to be dealt with under the Mental Health Act, 1959. Of these ten were notified by Local Education Authorities, one by the Police Court, and fifteen from other sources. A further ten were the result of the boundary extension.

Four cases were awaiting admission to hospital at the end of the year.

Certificates of Exception from payment of National Insurance were obtained in all appropriate cases.



## Training

**JUNIOR TRAINING CENTRE** — The number of pupils on the register at the end of December, 1968, was fifty three, including eight North Riding, two East Riding and two West Riding cases.

The special Care Unit has twelve children on the register, including one from the North Riding and one from the East Riding.

**ADULT TRAINING CENTRE** — There were thirty three girls attending, including two from the North Riding and two from the West Riding. Thirty two boys attended, including three from the West Riding and one from the North Riding.

There were six girls working in the Laundry.

Two cases were admitted to hospital during the year; one girl to Rawcliffe Hall and one girl to Claypenny Hospital. Two boys were added to the hospital list when files were forwarded from another area.

## Admissions of York Cases to Psychiatric Hospitals

Hospital	Informal Admissions		Compulsory Admissions (Mental Health Act 1959)			
			Short Orders Sec. 25/29		Section 26	
	1967	1968	1967	1968	1967	1968
Naburn and Bootham Park Hospital	509	511	82	93	—	2
The Retreat	—	—	3	8	1	—
Clifton	9	16	7	4	—	—
No. admitted by Mental Welfare Officers	211	237	92	105	1	2

## Subnormals on the Register at 31st December, 1968

In Hospitals	..	..	..	154
In the Community	..	..	..	262
				<hr/> 416 <hr/>

### In the Community

	Under 16		16—21		22—40		Over 40		Totals	
	M	F	M	F	M	F	M	F	M	F
Self Supporting .. ..	—	—	38	15	19	8	5	—	62	23
Partially Self Supporting ..	—	—	—	1	2	—	—	—	2	1
Employable—Out of Work ..	—	—	6	4	1	2	1	1	8	7
Useful at Home .. ..	—	—	2	2	2	9	7	6	11	17
At Home—Too Low Grade for Employment.. ..	1	—	2	1	1	7	1	1	5	9
Attending Occupation Centre	34	18	20	14	11	18	—	2	65	52
<i>Totals</i> .. .. .	35	18	68	37	36	44	14	10	153	109

#### **'Howe Hill' Rehabilitation Centre for Patients discharged from Psychiatric Hospitals**

At the end of December, 1968, there were 12 residents at Howe Hill, 8 women and 4 men. During the year 8 women and 6 men were admitted, 5 women and 4 men were discharged.

Of the discharged, 5 returned to Hospital, 2 returned home and 2 went into lodgings.

#### **Crombie Avenue Hostel**

This hostel, formerly a wartime Day Nursery for children adapted from two adjoining Council Houses in Crombie Avenue, was converted at a cost of £3,000 to accommodate eight male sub-normal persons. It was officially opened on November 7th by Dr. Catherine Crane, formerly Medical Officer of Health for the City.

The Hostel is staffed by a resident Warden and a part-time Deputy.

At the end of the year six male sub-normal persons were in residence.

#### **Social Clubs**

Two social clubs for the mentally ill are held at 24 St. Saviourgate and meet on Tuesday afternoons and Thursday evenings. The Gateway Club, a club for trainees of the Adult Training Centre, meets each Thursday at Hebden Rise where, each month, a social for sub-normal persons is also held.



## ADDITIONAL INFORMATION

## ADDITIONAL INFORMATION

### MEDICAL EXAMINATIONS

Routine Staff Examinations before appointments were made as follows :—

Health Department 40, Welfare 9, Treasury 17, City Architect's 3, Education 3, Children 22, Public Library 7, Housing 6, Police 8, City Engineer's 7, Town Clerks 2, Yorkshire Museum 3, Art Gallery 3, Fire Services 1, Other Authorities 22. Total 153.

### APPLICATIONS FOR RE-HOUSING ON MEDICAL GROUNDS

Applications for re-housing on medical grounds are investigated by a medical officer from the Health Department. One hundred and ninety eight such applications have been received during the year. Many of these requests concern the wish of patients to transfer from one type of council property to another, or one district to another, others are made on behalf of patients in private accommodation requiring a council house or flat. In all cases the task facing the doctor is the assessment of medical need only after visiting the patient in his home.

For the second half of the year, the method of assessment was revised and the Medical Officer of Health put his proposals before the Housing Committee in July. Applications for re-housing are now only acceptable from the family doctor who applies directly to the Medical Officer of Health. The assessment is made knowing the overall needs of the community and the availability of the different types of accommodation, *e.g.*, houses and flats. Where there is a priority on medical grounds for re-housing, the Estates Surveyor and Housing Manager is informed who reports to his Committee. If there is no medical priority the family doctor and his patient are informed.

Each case is very carefully assessed. Confidence in the method of assessment is reflected in that where a recommendation is made, the Housing Committee approves early re-housing. When a recommendation cannot be made the family doctor has accepted the decision, knowing that re-housing is available for the more deserving patient. The new arrangement has resulted in a reduction in the number of recommendations to the Housing Committee, but in the re-housing of most of those recommended.

	First 6 months	Second 6 months
Total applications received and investigated	89	103
Action taken — Recommended to Housing Committee for transfer	52	19
— Recommended to Housing Committee for re-housing	10	11
— Not recommended	24 (27%)	64 (62%)
— Patient made own arrangements	3	5

The remaining patients died or were admitted to hospital.



## REGISTRATION OF NURSING HOMES

Total Nursing Homes in the City	..	..	..	..	..	..	5
						<i>No. of Beds</i>	
Purey Cust Nursing Home	..	..	..	..	..	21	
Oakdene Nursing Home	..	..	..	..	..	15	
†Heworth Moor House	..	..	..	..	..	15	
Knavesmire Nursing Home	..	..	..	..	..	17	
The Mount Nursing Home	..	..	..	..	..	7	

†Diocesan Home for Mothers and Babies before and after confinement.

## NURSING AGENCY

The British Nursing Association (North Eastern District) was re-registered in respect of a nursing agency operated under the Nurses Act, 1943, for a period expiring on 31st December, 1969.

## NATIONAL HEALTH SERVICE EXECUTIVE COUNCIL

The Clerk of the York Executive Council has kindly provided the following information.

At the end of the year the Council's List contained the names of 70 Doctors, 1 Assistant Practitioner, 34 Dentists, 4 Ophthalmic Medical Practitioners, 21 Ophthalmic Opticians, 1 Dispensing Optician, 33 Chemists and 4 Surgical Appliance Suppliers.

The number of prescriptions dispensed during the period 1st January to 31st December, 1968, was 657,202 (754,176 previous year).

76,264 courses of dental treatment were provided under the National Health Service during the period 1st January to 31st December, 1968, and 21,664 sight tests were given during the same period.

Complete maternity services were given by York general practitioners to 604 women, and 906 women were given ante-natal or post-natal care.

## EPILEPTICS AND SPASTICS

Miss D. Beverley, the Chief Welfare Officer, has kindly supplied the following information:—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
<b>Epileptics</b>			
Number in Colonies or Homes outside York..	3	6	9
Number in Mental Hospitals .. .. .	12	15	27
Number in Part III (National Assistance Act, 1948) Accommodation (The Grange and Woolnough House) .. .. .	1	2	3
	<hr/> 16	<hr/> 23	<hr/> 39

**Epileptics—cont.**

<i>Male</i>	<i>Female</i>	<i>Total</i>
16	23	39

## Number at Home

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Known to Ministry of Labour	11	1	12
Working at Remploy	1	2	3
Other employment	8	3	11
Attending Welfare Department:—			
Handicrafts and Social Centre	1	1	2
Others	10	10	20
	31	17	48

31	17	48
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Total	47	40	87
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**Spastics**

Adults working (5 males and 1 female)	6
Adults Resident in Woolnough House (1 female)	1
Adults Resident in Alne Hall (1 Male)	1
Adults Resident at home (4 males and 4 females)	8

## Resident in Special Homes:—

Hinwick Hall, Wellingborough	}	3
Burton Hall School, Malmesbury, Wilts.		
Scotton Banks Hospital		

## Adult in School for Educationally Sub-normal:—

Brandsburton Hall, Nr. Beverley	1
Adult attending Spastic Occupation Centre	1
	21

### FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Senile Macular degeneration due to arterio-sclerosis	Other
(i) Number of cases registered during the year in respect of which Section F.1 of Forms B.D.8 recommends:					
(a) No treatment	5	1	—	4	8
(b) Treatment (medical, surgical or optical)	6	1	—	—	5
(c) Other treatment	6	5	1	3	10
(ii) Number of cases at (i), (b) and (c) above which on follow-up action have received treatment	6	5	1	3	11



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SCHOOL HEALTH SERVICE

ANNUAL REPORT

OF THE  
PRINCIPAL  
SCHOOL MEDICAL OFFICER

For the Year Ending 31st December, 1966

SCHOOL HEALTH SERVICE





**City of York Education Committee**

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# **ANNUAL REPORT**

OF THE

**PRINCIPAL**

**SCHOOL MEDICAL OFFICER**

**For the Year Ended 31st December, 1968**



City of New York Education Committee

# ANNUAL REPORT

OF THE

PRINCIPAL

SCHOOL MEDICAL OFFICER

For the Year Ended 31st December 1905



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### **Medical Officer of Health and Principal School Medical Officer**

Catherine B. Crane, M.B., B.S., D.P.H. (London) (to 10.6.68)

Samuel R. W. Moore, M.D., D.P.H. (from 1.7.68)

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

Dora Hamshaw, B.Sc., M.R.C.S., L.R.C.P., D.C.H. (from 24.10.68)

### **Senior Assistant School Medical Officer**

Francis B. Shevlin, M.B., Ch.B. (to 30.6.68)

### **Senior Medical Officer for Schools**

Margaret C. Barnet, M.B., Ch.B. (from 1.7.68)

### **School Medical Officers**

Margaret C. Barnet, M.B., Ch.B. (to 30.6.68)

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### **Principal School Dental Officer**

Graham Turner, L.D.S.

### **School Dental Officers**

Sheila M. Creedon, B.Ch.D., L.D.S.

Netta A. Train, L.D.S.

### **Dental Auxiliaries**

Mrs. D. Hancox

Miss S. V. Rhodes (to 18.9.68)

### **Dental Surgery Assistants**

Miss R. E. Glew (f)

Miss J. M. Lawson

Mrs. A. Taylor

Miss E. Hazell

### **Anaesthetist to School Dental Officers**

Judith Yuill, M.D. (London), M.R.C.P. (Eng.) (Part-time)

### **Superintendent Nursing Officer and Supervisor of Midwives**

Miss A. W. Mather (a) (b) (c) (d)

### **Senior Health Visitor/School Nurse**

Miss J. F. Gretton (a) (b) (c) (d)

### **Health Visitor/School Nurses**

Miss J. C. M. Baker (a) (b) (c) (d)	Mrs. S. Grinstead (a) (b) (c)
Miss M. S. C. Boyle (a) (b) (c) (e)	Miss M. E. Horn (a) (b) (c) (e)
Miss M. Chilton (a) (b) (c) (d)	Mrs. K. M. Hutchinson (a) (c)
Mrs. A. Cruickshank (a) (c)	(from 3.10.68)
(from 25.9.68)	Miss L. Jackson (a) (b) (c)
Miss J. M. Dovaston (a) (b) (c)	Mrs. I. C. Mansfield (a) (b) (c) (d)
Miss I. M. Enna (a) (b) (c) (d)	Mrs. D. W. Marchant-Smith
Mrs. P. A. Foster (a) (c)	(a) (b) (c) (from 1.2.68)
(to 15.11.68)	Miss L. F. Mousley (a) (b) (c)
Miss J. C. Freeman (a) (b) (c)	Mrs. F. M. Platts (a) (b) (c)
(to 22.7.68)	Mrs. E. Williamson (a) (b) (c)

### **Part-time Health Visitor/School Nurses**

Mrs. L. G. S. Bastow (a) (c)	Mrs. H. Shann (a) (b) (c)
Miss A. Bennett (a) (b) (c)	

### **Clinic and School Nurses**

Mrs. A. T. Nottingham (a)	Mrs. H. L. Saunders (a) (b)
Mrs. L. Reynolds (a)	

### **Speech Therapists**

Mrs. M. A. Francis L.C.S.T.	Mrs. H. P. Milner, L.C.S.T.
	(part-time)

### **Chiropodist**

Mrs. F. Frankland, S.R.N., S.C.M., M.Ch.S. (part-time)

### **Physiotherapist**

Mrs. M. A. Hayes, M.C.S.P. State Registered Physiotherapist (Part-time)

### **Chief Clerk**

Miss D. J. Blaker



**Senior Clerk**

Miss H. F. Milburn

**Clerks**

3 Full Time

2 Part-time

1 Shorthand typist

**Audiometrician**

Miss M. A. Robinson

**Vision Screener Operator**

Mrs. F. Hedinburgh

**CHILD GUIDANCE CLINIC**

**Consultant in Child Psychiatry**

C. Hugh Neville-Smith, B.M., B.Ch., D.C.H., D.P.M.

**Educational Psychologist**

Miss Edna M. Johns, M.A., Dip.Ed., A.R.C.M. (part-time)

**Psychiatric Social Worker**

Miss Margaret Monkley, M.A., Dip. Social Studies, Certificate of  
Psychiatric Social Work

- (a) — State Registered Nurse
- (b) — State Certified Midwife
- (c) — Health Visitor Certificate
- (d) — Queen's Nurse
- (e) — Registered Mental Nurse
- (f) — Dental Nurse's Certificate

August, 1969

My Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my first Annual Report on the work of the School Health Service for the year 1968.

In June, Dr. Catherine Crane your Medical Officer of Health and Principal School Medical Officer for twenty-four years retired after thirty-two years of dedicated service to the City. As the only lady Medical Officer of Health of a County Borough she was a well known national figure, and was regarded by her colleagues as a Medical Officer of Health of distinction. Recognition of her valued services was made when it was announced in the 1969 New Year's Honours List that Her Majesty the Queen had awarded her the Order of the British Empire.

Also in June Dr. Shevlin finally retired, having served an additional eighteen months beyond his retirement age. He was appointed Senior Assistant School Medical Officer in 1936, and for over thirty years was responsible for the care of the school child. His review of the School Health Service, formerly the School Medical Service, during his term of office appeared in the introductory letter of the Annual Report of the Principal School Medical Officer for the year ending 31st December, 1965. In it he gave a detailed account of the changes over the years and described the improved health of school children, the improved facilities for the operation of the School Health Service, and the gradual realization of the work of the School Health Service by the general public. During this period the School Clinic, originally accommodated in a wooden hut in Piccadilly, then in a First Aid Post in Rougier Street, was transferred to the premises of the old Grey Coat School in Monkgate. It was adapted to its present form as a permanent School Clinic in 1961. The Northfield School for Delicate and Handicapped Children, formerly a hutted building in Fulford, was also transferred to its present site in purpose-built premises in 1960. Dr. Shevlin personally contributed largely to bringing about the changes he described and he is to be congratulated on the completion of devoted service to York school children. His recognition nationally was evidenced by his election for many years on to the Council of the School Health Service Group of the Society of Medical Officers of Health. Dr. Shevlin's association with the School Health Service is not entirely severed as he continues as Ophthalmologist to school children on behalf of the Leeds Regional Hospital Board, at Ophthalmic Clinics held at the School Clinic, Monkgate.

In the latter half of the year the first steps were taken to bring about more co-ordination between the School Health Service and the other local authority health services. Dr. Dora Hamshaw was appointed as the first Deputy Medical Officer of Health and Deputy Principal School Medical Officer for the City in October. Departmental medical officers are now jointly appointed



to the Local Education and Local Health Authorities and may work in either field. The Senior Medical Officer for Schools has duties in the Health Department of the City and the Senior Medical Officer for Maternity and Child Health in the School Health Service. We are very pleased to congratulate Dr. Margaret Barnet, formerly Assistant School Medical Officer, on her recent appointment as Senior Medical Officer for Schools. Dr. Barnet has had a particular interest in the care of the handicapped school child and her new appointment will give her increasing facilities and responsibilities for this work. Health Visitor/School Nurses are already joint appointments. Mr. J. Threlfall, Chief Education Officer, has been most helpful in bringing about these changes, which ensure continuity of care for the pre-school and school child.

In York it has been the practice to hold four routine medical inspections during a child's years at school. To allow medical officers and health visitor/school nurses more time to enter schools informally to meet teachers and pupils and promote the wider aspects of the School Health Service, one of these inspections was dropped during the year. Inspections are made when the child enters school and before he leaves, and the third usually takes place in his tenth or eleventh year of age.

The medical inspections showed that the health of York school children continued at a high level. Parents showed their keen interest and it is pleasing to note that 89% attended the first medical inspection, an important event in a child's life. In the first complete year of use of the Keystone Vision Screener in primary schools, 397 children were found to have defective vision, only 81 of whom had had their vision corrected by glasses.

During the year consideration has been given to the provision of adequate facilities for the care of the handicapped child suffering from spina bifida, a developmental defect of the spinal column, so that he may benefit from education and attend school as any other child. The spina bifida child with a minor defect should be able to attend the ordinary school. With more serious defects such as paralysis of the limbs, the bowel or the bladder, additional nursing care is necessary, which can only be provided at a special school for handicapped children. The incidence of such children in York and the surrounding areas has been examined and towards the end of the year plans were being formulated for the extension of the Northfield School for Delicate and Handicapped Children to provide increased facilities particularly for the child suffering from spina bifida.

Miss M. K. Hinchcliff retired from Northfield School after 38 years, for 21 of which she was Headmistress. During these years she has seen the school change from the open air school which cared for pupils recovering from heart and chest disease and infectious disease, particularly tuberculosis, to the school which provides for the more specialized care of the handicapped child. It is our wish that Miss Hinchcliff has a long and happy retirement.

The School Dental Service has had another good year with a record of work, inspection coverage and pattern of treatment, particularly in prevention and conservation, above the national average. Mr. Graham Turner, Principal School Dental Officer, is to be congratulated on the publication of his two excellent papers 'The Sensible and Imaginative Employment of the Dental Auxiliary' : *Dental Magazine*, December, 1968, and 'Team Work in the School Dental Service' : *Royal Society of Health Journal* November/December, 1968.

In conclusion may I acknowledge the help of those who have assisted in compiling this report. The dedication of all who, working in the School Health Service, help to promote and maintain the health of York school children is greatly appreciated.

I am, my Lord Mayor, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

S. R. W. MOORE

*Principal School Medical Officer.*



## GENERAL STATISTICAL INFORMATION

Population (estimated — June, 1968)		107,290
Estimated child population (June, 1968)		
Under 1 year	1,690	
1 to 4 years inclusive	6,510	
5 to 14 years inclusive	15,000	
Total under 15 years	<u>23,200</u>	
Primary Schools:—		No. on Rolls
Number of schools	41	10,355 **
Secondary Schools:—		
Number of schools	17	7,418
"   "   "   (Modern)	13	4,770
"   "   "   (Grammar)	4	2,648
Further Education Establishments	3	731 (full time)
Special Schools		
Educationally Sub-normal	1	109
Delicate and Physically handicapped	1	90*
Special Units		
Partially sighted	1	15
Partially hearing	3	20
TOTAL number of pupils on rolls (January, 1969)		17,972

## Summary of Work of School Health Service

Medical Officers at Schools	
Periodic Inspections   ..   ..   ..   ..   ..	6,497
Special Inspections    ..   ..   ..   ..   ..	4,086
Re-inspections        ..   ..   ..   ..   ..	219

### Footnotes.

- \* includes 15 partially sighted class.
- \*\* includes 57 in Nursery classes.

#### Medical Officers at Clinics

Inspections .. .. .	2,324
Re-inspections .. .. .	2,170
Inspections under Employment of Children Bye Laws	139
Miscellaneous .. .. .	117

#### Dental Officers

Inspections at schools .. .. .	15,892
Inspections at clinics .. .. .	1,788
Re-inspection at school or clinic .. .. .	3,227
Attendances for treatment .. .. .	10,474

#### Health Visitor/School Nurses

Escorts to Residential Schools .. .. .	37
Visits to schools .. .. .	1,504
Examinations (including cleanliness inspections) in schools .. .. .	44,190
Visits to homes .. .. .	909
Treatment of minor ailments in Central Clinic.. .. .	1,897
Treatment of minor ailments in schools .. .. .	5,576

#### Speech Therapist, Chiropodist, etc.

Number of children treated by Speech Therapists ..	190
Number of children under observation by Speech Therapists .. .. .	61
Total number of attendances at Speech Therapy Clinic	2,731
Number of children treated by Chiropodist ..	343
Number of attendances made .. .. .	1,367
Lip Reading Clinic—number of children treated ..	7
Lip Reading Clinic—number of attendances .. .. .	176

#### School Clinics

Grand total of inspections and treatments as detailed above .. .. .	23,183
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Home Tuition .. .. .	3
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## INTRODUCTION

The compilation of an annual report is a salutary exercise involving the assessment of the volume and usefulness of work performed, the comparison of performance with that of previous years and the critical appraisal of what has been achieved in relation to what one had hoped. This critical appraisal should provide the basis for plans for future improvement.

After many years without a change of staff, the School Medical Service lost its Principal School Medical Officer, Dr. C. B. Crane, and its Senior Assistant School Medical Officer, Dr. F. B. Shevlin through their retirement within a fortnight of each other last June. Their many years of devoted service to the health of York children will long be remembered and appreciated. During the remaining six months of 1968 the Service passed through a period of transition. The gradual change in the structure of medical staffing was still incomplete at the end of the year; though the posts of Principal School Medical Officer and the new posts of Deputy Principal School Medical Officer and Senior Medical Officer for Schools had been filled, there remained a vacancy for an Assistant Medical Officer. Plans for increasing the scope and interest of medical officers' work by the creation of joint appointments between Health and Education Departments have accordingly been delayed.

## MEDICAL INSPECTION

Figures relating to inspection at maintained schools are to be found in Parts I and II of the Department of Education and Science Statistical Tables at the end of this report. A total of 13,496 pupils had a full medical examination and the general condition of 98.4% was satisfactory.

Statistics relating to various defects are printed in the Statistical Tables, Part I, Table A and Part II at the end of this report.

### Infestation

There were 33 fewer cases of infestation in 1968.

Acting under the provisions of Section 54 of the Education Act, 1944, health visitors/school nurses carried out inspections in schools at regular intervals.

Number of individual examinations by nurses or other authorised persons ..	42,595
Total number found to be infested ..	374
Percentage of infestation .. .. .	0.9

As in 1967 it was not found necessary to serve any parent with a cleansing notice. This is largely due to the efforts and tactful approach of the nurses when dealing with this sensitive problem.

### **Visual Defects**

This was the first complete year when children in primary schools were tested with the Keystone Vision Screener. Of the 3,258 children tested, 397 were found to have defective vision, and of these 81 already had glasses prescribed.

### **Orthopaedic Defects**

Postural defects were recorded in 96 cases and there were 255 foot defects. The majority were comparatively mild, but where necessary treatment was arranged.

### **Psychological Defects**

Under this heading 1,236 children were classified as 'unstable'. However, of these 971 were nail biters or thumb suckers.

## **CO-OPERATION WITH PARENTS**

It is satisfactory to be able to record that 89% of parents were present at the first medical inspection of their children. As so many mothers were working this co-operation was appreciated by the medical officers as a valuable opportunity for the exchange of information and advice. At subsequent medical inspections there was a not unexpected fall in the percentage of parents attending.

## **HOME VISITS**

Health Visitor/School Nurses paid 909 home visits in connection with medical inspections, follow-up of defects, cleanliness, etc. The medical officers also visited homes on a number of occasions to discuss various problems of health and education.

## **HEALTH VISITORS IN SCHOOLS**

There was progress during the year in the greater use of health visitors by the schools' teaching staff. All except three of the school nurses were also health visitors holding joint appointments. Their special skills in social relations and health education are coming to be appreciated, and in many schools the health visitor is received as a colleague of the teaching staff. It is hoped that this trend will continue, that medical and teaching staff may work together as a team for the greater benefit of the child.



## SCHOOL HEALTH CLINICS

### Location and Times

#### **School Clinic, Monkgate**

Minor Ailments	Mon. — Fri.	9 — 10 a.m.
Optthalmic Clinics	Wed. Thurs. Fri.	1.30 p.m.
	Mon. Tues.	9 a.m.
Audiometric Clinic	Mon.	9 — 10 a.m.
Speech Therapy Clinic	Mon. — Fri.	9.30 a.m. and 1.30 p.m.
Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
Lip Reading Clinic	Wed.	9.30 a.m.
Chiropody Clinic	Tues.	1.15 p.m.
Remedial Exercises Clinic	Wed. and Thurs.	9.30 a.m.
Enuresis Clinic	Mon. and Fri.	9 — 10 a.m.

#### **Health Services Centre, Cornlands Road**

Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
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#### **Health Services Centre, Fifth Avenue**

Dental Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
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#### **47 Clarence Street**

Child Guidance Clinic	Mon. — Fri.	8.45 a.m. and 1.30 p.m.
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#### **Minor Ailment Clinics**

Twice weekly sessions were held in the medical rooms by health visitor/school nurses at 21 schools. A total of 2,567 children attended 1,066 sessions. This was a slight reduction on the previous year. Average attendance at clinics held in schools varied considerably and many of the ailments were comparatively trivial. As with the changing relationship between teacher and health visitor and the latter's attendance at school being put to more constructive use, the function of minor ailment clinics is being reviewed.

#### **Ophthalmic Clinic**

Dr. F. B. Shevlin continued as ophthalmologist on behalf of the Leeds Regional Hospital Board, the clinical and nursing assistance being provided by the School Health Service.

A total of 1,518 children seen at this Clinic wore glasses. In addition other children had glasses prescribed by the Hospital Ophthalmic Department, or by opticians. This meant that approximately 1 in 8 pupils in York had glasses.

### **Audiometric Clinic**

A routine audiometric test was carried out in school on all entrants. Those who failed were re-tested after an interval at the audiometric clinic; and if they failed again they were seen by a medical officer. Where necessary children were referred to the consultant surgeon with the consent of the family doctor. Co-operation between hospital and clinic was excellent, both combining to make appropriate arrangements for treatment and education.

Number of children tested	3,349
Number of children who failed	498
Number of children referred to Ear, Nose and Throat Department	54

### **Speech Therapy Clinic**

This has been a full and productive year for the Speech Therapy department. The part-time speech therapist has been able to work for four full sessions each week in addition to the full-time speech therapist's work, but it was still not possible to see new referrals immediately and there were 78 children awaiting treatment.

Because of the improved staffing situation in the Clinic, the two therapists have been able to work together on some projects. Notable among these has been the pre-school play group which has been established for the purposes of observation and diagnosis of speech defects and of language stimulation for those younger children referred who have gross difficulties with language and articulation. This has proved a much better system than that of seeing the mother and child at 3 monthly intervals for advice. Some children improved considerably within a very short space of time. Others are known before school entry and headteachers are informed of possible difficulties before the child starts school.

Three students from the Leeds College of Speech Therapy have attended weekly sessions at the clinic, one first year student for observation. Two second year students have been able to treat children under the supervision and guidance of the qualified speech therapists. The students have been impressed by the pleasant layout of the clinic and it is hoped thus to provide a possible source of future Therapists for the clinic.

Co-operation has continued with the speech therapist in the hospital service in the City, most particularly in the treatment of a mother and child who both stammer. One dyslalic child has been interviewed at Moor House School and is to go there in 1969 for intensive speech therapy.



Further assessment material has been acquired for the clinic. This is a great aid to diagnosis. Both therapists attended a day course in Newcastle on 'Diagnosis of communication disorders'.

The present case-load is as follows:—

Children on waiting list beginning of year	70
New cases admitted during the year	61
No. of referrals in the year	74
No. of children treated	190
No. of children discharged	65
No. of cases under observation	61
No. of school visits	164
Total no. of attendances	2,731
Cases on waiting list at end of year	78

### **Lip Reading Clinic**

During the year 7 children attended this class, and all benefited from the help which they received.

### **Chiropody Clinic**

There were 1,367 attendances at this clinic during the year. Of the 343 cases treated, 303 had plantar warts.

### **Remedial Exercises Clinic**

A total of 43 children attended for foot defects, and 12 attended for correction of postural defects. To avoid loss of tuition at school, children were only referred for exceptional reasons, and were discharged as soon as possible.

### **Eneuresis Clinic**

During 1968, 42 children used the electric alarm apparatus and 25 were cured of the distressing problem of bedwetting. In 4 cases the equipment was withdrawn owing to lack of co-operation by the parents.

## **INFECTIOUS DISEASE**

The following infectious diseases amongst York school children were notified by general practitioners to the Medical Officer of Health in 1968:—

Dysentery	2
Measles	248
Scarlet Fever	102
Whooping Cough	8
Tuberculosis (Infection of Hilar Glands)	1
Scabies	31
Total	<hr/> 392 <hr/>

### B.C.G. Vaccination

The scheme for B.C.G. vaccination of school leavers, started in 1955, was continued in both maintained and independent schools.

Detailed statistics are as follows:—

Number of parents or guardians of 13 year old school children circularised .. .. .	1,887
Number of parental consents received .. .. .	1,705
Consent rate .. .. .	90%
Number of children Heaf tested .. .. .	1,535

Number of children not Heaf tested:—

Reasons being (1) Absent from school	150
(2) Left the district	12
(3) Other reasons	8
	<hr/> 170

Number of children who gave a positive reaction to Heaf test .. .. .	216
Percentage .. .. .	14%
Number of children who gave a negative reaction to Heaf test .. .. .	1,315
Percentage .. .. .	86%
Number of children (negative reactors) who were vaccinated .. .. .	1,313
Number of children vaccinated who showed satisfactory reaction on the arm eight weeks later .. .. .	1,134
Number absent for readings .. .. .	179

Of the 216 children who were Mantoux positive, 33 subsequently attended for examination at the City Hospital and one attended a mass X-ray session. None showed any evidence of active tuberculosis infection.

The remaining children were to attend a specially organised mass X-ray session in February, 1969.

### HANDICAPPED PUPILS

The Handicapped Pupils and Special School Regulations 1959, and the amending regulation in 1962 defines the various categories of children who require special educational treatment.



There were 238 pupils in York as on the 23rd January, 1969. The table below shows these in each category:—

Category of Handicap	Number at Special School or Unit	Number not at School	Total
Blind	1	2*	3
Partially-sighted	10	—	10
Deaf	6	—	6
Partially-Hearing	15	—	15
Educationally Subnormal	103	—	103
Epileptic	3	—	3
Maladjusted	15	—	15
Physically Handicapped	42	1*	43
Speech Defect	1		1
Delicate	39		39
<b>TOTAL</b>	<b>235</b>	<b>3*</b>	<b>238</b>

\*Two had home tuition and another was in hospital awaiting assessment.

### **Partially Sighted Pupils**

In addition to the ten York children, there were five from the Ridings. They attended the Unit attached to Northfield School for Delicate and Physically Handicapped Pupils. As more than half of them had additional handicaps this was a particularly suitable environment.

### **Partially Hearing Pupils**

A total of 14 York children attended the three Units. At two of them there were changes in staff but in spite of this the children made good progress during the year. In all age-groups there was an increasing amount of integration with the rest of the school who accepted them and co-operated in many ways. This continual contact with hearing children helped their lip-reading and encouraged their use of speech.

One boy attended a residential school for partially-hearing pupils.

### **Educational Subnormality**

In 1968, 59 children were examined by medical officers who recommended that 19 should be admitted to the day special school for the educationally sub-normal, one to a residential school; and 10 were recommended for admission to the Junior Training Centre. In addition, six pupils leaving the day special school were re-assessed concerning their future care.



### **Fulford Cross Day Special School for Educationally Sub-normal Children**

Unlike an ordinary school, the special school can devote more time to training pupils in preparation for living and work, as well as the development of social competence. It is very important that these young people should be able to cope with the stresses of work and life when they leave school.

### **Northfield School for Delicate and Physically Handicapped**

At the end of the year, Miss M. Hinchcliff retired after 38 years, for 21 of which she was headmistress. During her devoted and enthusiastic service to the school she helped generations of handicapped children. During the years she saw many changes, including the removal of the school in 1960 from the old wooden-huts to a well-equipped new building which offered opportunities for developing new activities and educational ideas.

There has been a change in the pattern of handicaps over the years. Now more facilities are having to be provided for the physically handicapped child who is forming an increasing proportion of the admissions. The physiotherapist has more children requiring daily treatment and the re-grouping of other children allows for continuity of care. In October it was decided to discontinue the provision of breakfasts but to supplement the midday meal with extra proteins; as there were fewer children whose main reason for admission to the school was poor physique and general debility. Dinners are prepared on the premises, and special diets are provided where necessary on the advice of the medical officer and the hospital dietician.

### **Haemophilia**

There were five York children suffering from this condition. Four were able to remain in ordinary schools and one was at a residential school.

### **CO-ORDINATION OF SERVICES FOR HANDICAPPED CHILDREN AND YOUNG PEOPLE**

The committee met quarterly and continued to serve a useful purpose in bringing closer together representatives of the various services concerned. As regards the school health service it aided the efforts made to identify handicapped, or potentially handicapped children, as early as possible, in order to make the necessary provision for their education. It also provided an opportunity for closer liaison with the Youth Employment Service when arranging vocational guidance and training for the handicapped school-leaver. Supervision continued especially for those who had particular difficulty in obtaining employment, in order that they might have all the social and welfare facilities which were available.

Some members of the Committee attended a course of lectures at the York Centre for the Education of Backward and Other Handicapped Children



at St. John's College of Education. These well-attended meetings provided rewarding opportunities for discussion of the closely linked medical and educational problems of the handicapped.

### DEATH OF SCHOOL CHILDREN

The table below shows the causes of death of seven York school children in 1968.

Cause of Death	Age 5—14 years	Age 15/16 Years and over	Total
Motor Vehicle Accident	1	—	1
Other Accidents	1	1	2
Congenital Anomalies	1	—	1
Malignant Neoplasm	—	2	2
Pneumonia	1	—	1
Total	4	3	7

### SCHOOL DENTAL SERVICES

The Principal School Dental Officer reports as follows.

The year 1968 was a satisfactory one for the dental service. A dental auxiliary left the service and her replacement will not be possible until August, 1969, when a newly qualified auxiliary will take up her appointment.

An inspection was carried out in October by a dental officer from the Department of Education and Science. The Authority was commended on an excellent service, whose output, inspection coverage and pattern of treatment were all above average.

In the Monkgate and Tang Hall areas all schools were inspected during the year, and in the Monkgate area four schools received two inspections. The Acomb area had all but two schools inspected in the year. This is part of the general pattern for Acomb where the case load is too heavy for one dental officer. Whilst schools have been detached and added to the Monkgate clinic nothing further can be done to ease the load until a second surgery is added to Acomb clinic.

There were 20,907 inspections made during the year, of which 10,474 or 50% needed treatment. Very few neglected mouths were seen, and the parents of the children involved were visited, a valuable service performed by the health visitors. A number of children were seen in infant schools whose teeth were badly eroded by undiluted vitamin syrups. These syrups should always be given diluted and only at meal times and never used on comforters.

The number of fillings inserted was 11,320 of which 8,455 were in permanent teeth. Only 449 permanent teeth were extracted; since some of these extractions were for orthodontic reasons the number of decayed permanent teeth extracted was very small. There were 2,865 fillings placed in deciduous teeth and 1,789 deciduous teeth were extracted. The number of general



anaesthetics declined and 769 were administered. In the realm of advanced conservation 39 root fillings were performed, some in deciduous teeth, 79 inlays and crowns were made and six fixed bridges fitted.

The volume of work would decline both in quantity and complexity if the City had the advantage of a flouridated water supply. The Health Committee gave approval to flouridation but unfortunately the City Council voted once more against this measure albeit with a reduced majority. This decision is not in the best interests of the children, as much suffering and ill health could be saved by the introduction of this proved and safe measure.

A twice yearly training session for dental officers from York and surrounding Authorities has been held at Monkgate Clinic for the last two years. Films and demonstrations of new techniques have been given and it is hoped to make these sessions a regular feature of the York service.

A number of children have been seen for general practitioners and in some cases work has been shared, after treatment planning. This co-operation and consultation have continued with neighbouring Authorities. The scheme whereby the West Riding County Council carried out laboratory work for York ceased during the year. We are grateful for their help during the time when the North Riding laboratory were unable to undertake the work, which is once more being carried out by the North Riding dental laboratory.

An unusual task was undertaken during the year when the police called upon the staff of the Dental Clinic to help to identify the remains of an eight year old child, whose body had been found hidden in a gulley in moorland country. The child had been a patient of the School Dental Clinic, and the Principal School Dental Officer and Dental Auxiliary were able to provide positive identification.

Two papers emanating from the York Dental Service appeared in the Professional Press. Both were by Mr. Graham Turner and were 'The Sensible and Imaginative Employment of the Dental Auxiliary' which appeared in the December, 68 issue of the *Dental Magazine*, and 'Team Work in the School Dental Service' which was published in the November/December, 68 issue of the *Royal Society of Health Journal*.

### **THE CHILD GUIDANCE CLINIC**

From July, 1967 to January, 1969 there has been no full-time Educational Psychologist. A part-time educational psychologist attended on Monday mornings to help with diagnostic sessions. Dr. Joyce Galbraith continued to attend for one session a week, in spite of ever-increasing commitments and Dr. Neville-Smith attended for three-and-a-half sessions a week. Fairfield Children's Unit has been invaluable for short-term treatment and diagnosis, and several children have been greatly helped by the time spent at Southfield Adolescent Unit.



Four students attended during 1968, one from the Leeds University Course in Psychiatric Social Work, another from the two-year Master of Philosophy Course at York University, and two during the summer holidays, one from Thailand from the United Nations Course at Swansea University and another in her final year Honours Sociology at Nottingham University.

Two students from St. John's College acted in an 'elder-brother' capacity to children this year.

The Psychiatric Social Worker gave talks to several groups of mothers who were hoping to start play-groups, and who were specially interested in the needs of very young children. Mental nurses in training, houseparents in training and other groups have observed the work of the Clinic and there has been a steady flow of students from St. John's College and other training courses, who have received assistance with individual projects. ,

### Statistics

Children seen by the Psychiatrist for Diagnostic Assessment:—

Age	Boys	Girls	Total
Under 4	1	0	1
4 — 7	11	8	19
8 — 11	30	11	41
12 — 15	23	10	33
16 & over	1	0	1
Total	66	29	95

Presenting symptoms of Children seen by the Psychiatrist for Diagnostic Assessment:—

Group	Definition	Boys	Girls	Total
I	Maladjustment in relation to society, (i.e., pilfering, truancy, lying, destructiveness, wandering) ..	19	4	23
II	Maladjustment in relation to school, (i.e., poor school work despite good intelligence, school behaviour problems) .. .. .	14	2	16
III	Maladjustment in relation to home-life, (i.e., aggressive, attention seeking, inhibited behaviour).	16	9	25
IV	Neuroses (i.e., anxiety, phobias, conversion-hysteria, compulsive rituals) .. .. .	4	8	12
V	Psychosomatic and somatic-psychic disorders, (i.e., disordered body function associated with emotional disturbance):—			
	(a) Wetting and soiling .. .. .	7	4	11
	(b) Allergies, tics, speech defects .. ..	5	1	6
	(c) Emotional disorder secondary to organic disease, (i.e., epilepsy, gross backwardness, tuberculosis) .. .. .	4	1	5
VI	Sexual difficulties .. .. .	3	2	5
	Totals .. .. .	72	31	103

**Discharges;—**

State on discharge	Number
(i) Cured, greatly improved	5
(ii) Definite improvement	30
(iii) Little or no change, worse	3
Total	38

Reason for discharge	Number
(a) Satisfactory adjustment	29
(b) Left area, or school	4
(c) Parents unco-operative	3
(d) Transferred to another agency	2
Total	38

**MISCELLANEOUS****Medical Examinations**

In addition to the work referred to elsewhere the medical officers carried out the following examinations:—

Part-time employment of children	139
Children in theatrical employment	11
Entrants to Colleges of Education	135
Appointment of Corporation Staff	156
Children going to camp or organised holidays	208
Children going to residential schools	32

**Youth Employment Medical Reports**

Reports were forwarded to the Youth Employment Officer to assist him in the placement of certain pupils who had a defect which might make them unsuitable for certain types of employment. Fifty reports (Form Y9) were issued as follows:—

Diabetes	1
Epilepsy	4
Defective Vision	6
Defective Vision (Colour)	32
Hearing	2
Orthopaedic	1
Skin condition	4
Total	50

Two reports (Form Y10) were issued in respect of one epileptic and one defective hearing case.



### **Referrals to Hospital**

Medical officers only refer a school child to a hospital consultant by prior agreement of the family doctor. Hospital appointments were arranged for 131 children. In addition, family doctors were notified of 83 children who were referred to the Eye Department of York County Hospital.

### **Hospital Reports**

Reports were received for 1,076 children during 1968. The information was helpful and was only one aspect of the co-operation which the School Health Service received from the consultant staff, as well as from the family doctors. In return the Service endeavours to maintain close links with those of other members of the National Health Service, through informal, as well as official channels.

### **Convalescent Holidays**

During the year 37 children were sent on convalescent holidays under the provisions of Section 28 of the National Health Service Act.

### **Holiday Camps**

One diabetic and two epileptic children who would not otherwise have had a holiday attended camps organised by the British Diabetic Association and the British Epileptic Association, and expenses were paid by the York Education Authority.

### **School Camps**

The York Children's Holiday Camp was held at Saltburn Youth Hostel. Grants from the Education Committee and several voluntary organisations enabled 48 children aged 10 years to have a week's holiday during the summer vacation. The headmaster and staff of Haxby Road Junior School, with the help of parents and students organised a successful two-week holiday for 36 children at Robin Hood's Bay in July.

### **Provision of Meals**

The number of meals provided in the year was 1,769,141. A census taken in September showed that 51.4% of children were having meals. Of the meals served 11.5% were supplied free of charge. Provision was made, as in former years, for children in receipt of free meals to have them during the holidays. Only 6.5% attended at Christmas, 9.9% at Easter, and 9.7% during the Summer holidays.

### **Provision of Milk**

The percentage of children in primary schools taking milk in September, 1968, was 93.1%. The supply of milk to secondary schools ceased on 1st September, 1968.

### Provision of Clothing and Footwear

A number of children were found to be in need of suitable clothing and footwear.

Number reported	..	..	..	..	Boys	490
					Girls	313
Number of families involved	..	..				406

The following items were provided:—

Boys:	Footwear	534
	Overcoats/Duffles	97
	Jackets/Jumpers	77
	Trousers	163
Girls	Footwear	313
	Overcoats/Duffles	81
	Dresses, tunics, skirts, blouses, etc.	107
		<hr/> 1,372 <hr/>

### National Society for the Prevention of Cruelty to Children

The Senior Inspector reported the following details of work done by himself and his Staff:—

Number of new cases dealt with in York in 1968:

Neglect	..	..	..	..	..	20
Ill-treatment and assault	..	..	..	..		7
Persons seeking aid and advice	..	..	..			50
Child beyond the control of parents	..	..				1
						<hr/> 78 <hr/>

In all there were 201 children involved, necessitating 590 visits in connection with their supervision and rehabilitation.

### York Schools Athletic Association

This is the fifty-fifth year during which teachers have continued their voluntary work enabling school children of York and District to take part in various games and sports, a valuable contribution to maintenance of the health of York school children.



# SCHOOL HEALTH SERVICE: STAFF AND SCHOOL CLINICS

(Return for the year ended 31st December, 1968)

## 1. STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer: S. R. W. MOORE

	Number of Officers	Number in terms of full-time officers employed	Vacancies full-time equivalent
(a) Medical Officers (including the Principal School Medical Officer) :—			
(i) whole-time School Health Service	2	2	—
(ii) whole-time School Health Service and Local Health Service	2	0.6	1
(iii) general practitioners working part-time in the School Health Service	1	0.2	—
(iv) ophthalmic Specialists	1	0.4	—
(v) other Consultants and Specialists	—	—	—
(b) (i) Senior Speech Therapists	—	—	—
(ii) Speech Therapists	2	1.4	—
(iii) Assistant Speech Therapists	—	—	—
(c) (i) Audiometricians	1	1	—
(ii) Chiropodists	1	0.1	—
(iii) Orthopaedic Nurses	—	—	—
(iv) Orthoptists	—	—	—
(v) Physiotherapists	1	0.5	—
(vi) Remedial Gymnasts	2	0.2	—
(vii) Others (Excluding Clerks) Lip Reading Tutor	1	0.1	—

	Number of Officers	No. in terms of full-time officers			Vacancies full-time equivalent
		Employed other than in Clinics	Employed in Clinics other than C. Guidance	Employed in Child Guidance Clinics	
(d) (i) Nurses	23	4.7	2.5	—	0.3
(ii) No. included at (i) who hold Health Visitors' Certificates	20				
(iii) Nursing Assistants and Trainee Nurses	—	—	—	—	—

Number of school clinics as at 31st December, 1968: 1

# TYPE OF EXAMINATION AND/OR TREATMENT PROVIDED

Examination and/or treatment	Number of School Clinics (i.e. premises) as at 31st December, 1968 where such treatment is provided:—	
	Directly by the Authority	Under arrangements made with Hospital Authorities
(a) Minor ailment and other non-specialist examination or treatment	23	—
(b) Asthma	—	—
(c) Audiology	—	—
(d) Chiropody	1	—
(e) Ear, Nose and Throat	—	—
(f) Enuretic	1	—
(g) Ophthalmic	—	1
(h) Orthopaedic	—	1
(i) Orthoptic	—	—
(k) Paediatric	—	—
(l) Physiotherapy	1	—
(m) Remedial Exercises	1	—
(n) Rheumatism and Heart	—	—
(p) Speech Therapy	1	—
(q) Sunray (U.V.L.)	—	—
(r) Vaccination and Immunisation	1	—
(s) Others (specify) Lip Reading	— 1	— —

## (a) STAFFING OF CHILD GUIDANCE CLINICS AND THE SCHOOL PSYCHOLOGICAL SERVICE as at 31st December, 1968

Staff	Number employed		Aggregate in terms of the equivalent number of whole-time officers			
	by L.E.A.	under arrangements with Hospital Authorities	employed by L.E.A.		employed under arrangements made with Hospital Authorities	
			in Child Guidance Clinics	in School Psychological Service	in Child Guidance Clinics	in School Psychological Service
(i) Psychiatrists	—	2	—	—	0.5	—
(ii) Educational Psychologists	1	—	0.1	—	—	—
(iii) Psychiatric Social Workers	1	—	1	—	—	—
(iv) Psycho-therapists	—	—	—	—	—	—
(v) Social Workers	—	—	—	—	—	—
Qualified	—	—	—	—	—	—
Unqualified	—	—	—	—	—	—
(vi) Others (excluding clerks, specify)	—	—	—	—	—	—



(b) DETAILS OF CHILD GUIDANCE CLINICS WITHIN THE  
AUTHORITY'S AREA as at 31st December, 1968

Provided by	No. of Clinics	No. of Clinics		Total No. of sessions worked in those Clinics in part-time use during 1968
		In full-time use	In part-time use	
the L.E.A.	1	1		
Other bodies	—	—	—	—

RETURN OF HANDICAPPED CHILDREN

PART I

New assessments and placements

During the calendar year ended 31st December, 1968:—		Blind	P.S.	Deaf	Pt.Hg.	P.H.	Del.	Mal.	E.S.N.	Epil.	Sp.Def.	Total
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
A	Handicapped children who were newly assessed as needing special educational treatment at special schools or in boarding homes? (See notes (a) and (b) on page 4.	boys				15	5	1	12	1	1	35
		girls				3	2		8			13
B	Number of children newly placed in special schools (other than hospital special schools) or boarding homes?	(i) of those boys included at A above				9	5	1	8			23
		girls				2	2		5			9
		(ii) of those boys assessed prior to Jan. 1968							3			3
		girls										
		(iii) Total newly placed—				9	5	1	11			26
		B (i) and (ii) girls				2	2		5			9

PART II

CHILDREN FOUND UNSUITABLE FOR EDUCATION AT SCHOOL

During the calendar year ended 31st December, 1968:—

- (i) Number of children who were the subject of new decisions recorded under Section 57 of the Education Act, 1944? ... 8
- (ii) Number of reviews were carried out under the provisions of Section 57A of the Education Act, 1944? ... —
- (iii) Number of decisions cancelled under Section 57A(2) of the Education Act, 1944? ... —

# PART III

## PUPILS AWAITING PLACES IN SPECIAL SCHOOLS OR RECEIVING EDUCATION IN SPECIAL SCHOOLS: INDEPENDENT SCHOOLS: IN SPECIAL CLASSES AND UNITS: UNDER SECTION 56 OF THE EDUCATION ACT 1944: AND BOARDED IN HOMES

As at 23rd January, 1969		Blind (1)	I.S. (2)		Deaf (3)		Pt. Hg. (4)		P.H. (5)		Del. (6)		Mal. (7)		E.S.N. (8)		Epil. (9)		Sp.Def. (10)		Total (11)	
		B. G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.	B.	G.
Children from the authority's area awaiting places in special schools other than hospital special schools?																						
(1) Under 5 years of age	(i) Waiting before 1st January, 1968 :—																					
	{ (a) day places (b) boarding places																					
	(ii) Newly assessed since 1st January, 1968 :—																					
	{ (a) day places (b) boarding places									1											1	
(2) Aged 5 years and over																						
	(i) Waiting before 1st January, 1968 :—																					
	{ (a) whose parents had refused consent to their admission to a special school (b) others																					
	(ii) Newly assessed since 1st January, 1968 :—																					
	{ (a) whose parents had refused consent to their admission to a special school (b) others																					
	(a) day places									2					4	3					6	4
	{ (a) day places (b) boarding places									2							1				3	
(3) Total number of children awaiting admission to special Schools other than hospital special schools—total of (1) and (2) above	(a) day places									2					4	3					6	4
	{ (a) day places (b) boarding places									3							1				4	



[illegible]

# PART IV

## NUMBER OF TEACHERS OF THE DEAF AND PARTIALLY HEARING EMPLOYED BY THE AUTHORITY (OTHER THAN IN SPECIAL SCHOOLS)

on 23rd January, 1969

Teachers employed	Manchester qualifica- tion		N.C.T.D. qualifica- tion		Dublin qualifica- tion		London qualifica- tion		TOTAL	
	M	F 2	M 1	F	M	F	M	F	M 1	F 2
1. in special classes/units										
2. in audiology clinics										
3. as peripatatic teachers										
4. elsewhere										
TOTALS		2	1						1	2



## SCHOOL DENTAL SERVICE

Return for the year ended 31st December, 1968

Principal School Dental Officer: Graham Turner

### 1. STAFF

Number of Officers	Total full time equivalent inclusive of extra paid sessions worked		
	Administrative duties	Clinical duties	
		School service	M. & C. W. service

#### (a) Officers Employed on a Salary basis:—

Principal School Dental Officer .. .. .	1	0.2	0.7	0.1
Dental Officers (including orthodontists) .. .. .	2	—	1.9	0.1

Total (a)

3	0.2	2.6	0.2
---	-----	-----	-----

#### (b) Officers Employed on a Sessional basis .. .. . (including orthodontists)

—	—	—	—
---	---	---	---

Totals of (a) and (b)

3	0.2	2.6	0.2
---	-----	-----	-----

#### (c) Dental Auxiliaries and Hygienists

Number	Full time equivalent		
	Dental health Education	Treatment	
		School service	M. & C. W. service
Dental Auxiliaries .. .. .	1	0.8	0.1
Dental Hygienists .. .. .	—	—	—

#### (d) Other Staff

Number	Full time equivalent
Dental Technicians .. .. .	—
Dental Surgery Assistants .. .. .	4
Clerical Assistants .. .. .	—
Dental Health Education Personnel— .. .. .	—

(e) **School Dental Clinics**

Provided directly by Authority  
Under arrangements made with Hospital Authorities

Fixed Clinics				Mobile Clinics		
No. with ONE surgery only	No. with TWO or more surgeries	Total Number of surgeries		Total number of clinics		Total number of sessions worked in 1968
		Available	In use	Available	In use	
2	1	5	5	—	—	—
—	—	—	—	—	—	—

### DENTAL HEALTH EDUCATION

The Dental Auxiliary spends one session per week educating children in oral hygiene. A leaflet is given to each child at school dental inspections. Posters are circulated to schools at regular intervals. The Principal School Dental Officer lectures to students, etc.

#### 2. ATTENDANCES AND TREATMENT

	Ages 5 to 9		Ages 10 to 14		Ages 15 and over		Total
First Visit	1	1,531	12	1,319	23	313	3,163
Subsequent Visits	2	3,494	13	3,948	24	973	8,415
Total Visits		5,025		5,267		1,286	11,578
Additional courses of treatment commenced	3	516	14	347	25	75	938
Fillings in permanent teeth	4	2,684	15	4,475	26	1,296	8,455
Fillings in deciduous teeth	5	2,723	16	142			2,865
Permanent teeth filled	6	2,092	17	3,890	27	1,183	7,165
Deciduous teeth filled	7	2,463	18	125			2,588
Permanent teeth extracted	8	51	19	312	28	86	449
Deciduous teeth extracted	9	1,391	20	438			1,829
General anaesthetics	10	547	21	200	29	27	774
Emergencies	11	125	22	81	30	9	215
Number of Pupils X-rayed						31	199
Prophylaxis						32	1,339
Teeth otherwise conserved						33	102
Number of teeth root filled						34	40
Inlays						35	12
Crowns						36	73
Courses of treatment completed						37	3,203

#### 3. ORTHODONTICS

Cases remaining from previous year		214
New cases commenced during year	38	140
Cases completed during year	39	80
Cases discontinued during year	40	16
No. of removable appliances fitted	41	210
No. of fixed appliances fitted	42	2
Pupils referred to Hospital Consultant	43	1



#### 4. PROSTHETICS

	Ages 5 to 9		Ages 10 to 14		Ages 15 and over		Total
Pupils supplied with F.U. or F.L. (first time)	44	—	47	—	50	—	—
Pupils supplied with other dentures (first time)	45	—	48	6	51	9	15
Number of dentures supplied	46	—	49	6	52	12	18

#### 5. ANAESTHETICS

General Anaesthetics administered by Dental Officers	53	207
--	----	-----

#### 6. INSPECTIONS

(a) First inspection at school. Number of pupils	A	15,892
(b) First inspection at clinic. Number of pupils	B	1,788
Number of (a) (b) found to require treatment	C	9,083
Number of (a) (b) offered treatment	D	9,075
(c) Pupils re-inspected at school or clinic	E	3,227
Number of (c) found to require treatment	F	1,391

#### 7. SESSIONS

Sessions devoted to treatment	X	1,971
Sessions devoted to inspection	Y	66
Sessions devoted to Dental Health Education	Z	62

## MEDICAL INSPECTION AND TREATMENT

Return for the Year ended 31st December, 1968

Number of pupils on register of maintained primary, secondary, special and nursery schools in January, 1969: 18012

### PART I

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

TABLE A  
PERIODIC MEDICAL INSPECTIONS

Age Groups inspected (By year of Birth)	No. of pupils who have received a full medical examination	Physical Condition of pupils Inspected		No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition recorded at Part II	Total Individual pupils
		No.	No.		(6)	(7)	(8)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1964 and later	74	74	—		4	4	7
1963	855	849	6		133	84	204
1962	566	558	8		65	60	122
1961	71	70	1		5	4	8
1960	671	664	7		53	104	150
1959	334	325	9		22	35	55
1958	427	417	10		17	48	63
1957	853	845	8		46	105	145
1956	449	444	5		26	62	85
1955	132	130	2		4	8	12
1954	263	257	6		24	28	49
1953 and earlier	1,802	1,760	42		96	188	275
Total	6,497	6,393	104		495	730	1,175

TABLE B  
OTHER INSPECTIONS

Number of Special Inspections	..	..	..	..	6,999
Number of Re-inspections	..	..	..	..	2,389
				Total	<u>8,388</u>



TABLE C  
INFESTATION WITH VERMIN

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons .. .. .	42,595
(b)	Total number of individual pupils found to be infested ..	374
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ..	—
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ..	—

PART II  
DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL  
INSPECTIONS DURING THE YEAR

Defect Code No. (1)	Defect or Disease (2)		PERIODIC INSPECTIONS				Special Inspections
			Entrants	Leavers	Others	Total	
4	Skin .. .. .	T	41	124	171	336	451
		O	84	154	236	474	179
5	Eyes — a. Vision .. .. .	T	201	75	219	495	923
		O	51	352	463	866	1,521
	b. Squint .. .. .	T	15	—	6	21	73
		O	21	10	38	69	25
	c. Other .. .. .	T	4	7	16	27	38
		O	5	1	15	21	8
6	Ears — a. Hearing .. .. .	T	53	6	48	107	75
		O	70	6	26	102	84
	b. Otitis Media .. .. .	T	9	—	8	17	28
		O	18	1	22	41	13
	c. Other .. .. .	T	5	13	38	56	54
		O	68	50	177	295	153
7	Nose and Throat .. .. .	T	10	5	14	29	22
		O	100	53	164	317	155
8	Speech .. .. .	T	9	4	13	26	19
		O	29	6	41	76	52
9	Lymphatic Glands .. .. .	T	—	—	2	2	3
		O	41	10	54	105	49
10	Heart .. .. .	T	—	—	—	—	1
		O	9	8	17	34	26
11	Lungs .. .. .	T	4	—	7	11	4
		O	14	20	43	77	53
12	Development — a. Hernia .. .. .	T	2	—	1	3	1
		O	3	—	5	8	—
	b. Other .. .. .	T	7	9	23	39	9
		O	82	104	241	427	354
13	Orthopaedic — a. Posture .. .. .	T	1	5	18	24	5
		O	2	25	45	72	13
	b. Feet .. .. .	T	1	8	23	32	46
		O	62	61	100	223	135
	c. Other .. .. .	T	—	2	17	19	30
		O	34	18	60	112	108
14	Nervous System — a. Epilepsy .. .. .	T	—	—	1	1	—
		O	5	4	8	17	19
	b. Other .. .. .	T	—	—	—	—	1
		O	3	1	13	17	4
15	Psychological — a. Development .. .. .	T	—	—	2	2	—
		O	5	13	97	115	7
	b. Stability .. .. .	T	5	2	20	27	62
		O	237	256	743	1,236	954
16	Abdomen .. .. .	T	—	—	—	—	2
		O	6	1	6	13	6
17	Other .. .. .	T	1	2	5	8	177
		O	11	22	40	73	50

(T) Requiring treatment (O) Requiring observation

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

TABLE A  
EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint .. .. .	147
Errors of refraction (including squint) .. .. .	1,958
Total .. .. .	2,105
Number of pupils for whom spectacles were pre- scribed .. .. .	1,646

TABLE B  
DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment:—	
(a) for diseases of the ear .. .. .	74
(b) for adenoids and chronic tonsilitis .. .. .	67
(c) for other nose and throat conditions .. .. .	17
Received other forms of treatment .. .. .	236
Total .. .. .	394
Total number of pupils still on the register of schools at 31st December, 1968, known to have been pro- vided with hearing aids:—	
(a) during the calendar year 1968.. .. .	—
(b) in previous years .. .. .	24

TABLE C  
ORTHOPAEDIC AND POSTURAL DEFECTS

	Number known to have been treated
(a) Pupils treated at clinics or out-patients depart- ments .. .. .	122
(b) Pupils treated at school for postural defects .. .. .	—
Total .. .. .	122



TABLE D  
DISEASES OF THE SKIN  
(Excluding uncleanness, for which see Table C of Part I)

	Number of pupils known to have been treated
Ringworm—(a) Scalp .. .. .	2
(b) Body .. .. .	2
Scabies .. .. .	7
Impetigo .. .. .	36
Other skin diseases .. .. .	1,435
Total .. .. .	1,482

TABLE E  
CHILD GUIDANCE TREATMENT

	Number known to have been treated
Pupils treated at Child Guidance clinics .. .. .	247

TABLE F  
SPEECH THERAPY

	Number known to have been treated
Pupils treated by speech therapists .. .. .	190

TABLE G  
OTHER TREATMENT GIVEN

	Number known to have been treated
(a) Pupils with minor ailments .. .. .	1,336
(b) Pupils who received convalescent treatment under School Health Service arrangements..	—
(c) Pupils who received B.C.G. vaccination ..	1,187
(d) Other than (a), (b) and (c) above	
Chiropody .. .. .	343
U.V.L. Treatment .. .. .	18
Total (a)–(d) ..	2,884

## SCREENING TESTS OF VISION AND HEARING

1. (a) Is the vision of entrants tested as a routine within their first year at school? Yes.  
(b) If not, at what age is the first routine test carried out?
2. At what age(s) is vision testing repeated during a child's school life? 7, 10, 11, 12, 13, 14, 15, 16.
3. (a) Is colour vision testing undertaken? Yes.  
(b) If so, at what age? 10.  
(c) Are both boys and girls tested? Yes.
4. (a) By whom is vision testing carried out? Clerk with vision screener in primary schools, health visitor/school nurses in secondary schools.  
(b) By whom is colour vision testing carried out? Clerk with vision screener.
5. (a) Is routine audiometric testing of entrants carried out within the first year at school? Yes.  
(b) If not, at what age is the first routine audiometric test carried out  
(c) By whom is audiometric testing carried out? Clerk.