Contributors

Winnipeg (Man.). Health Department.

Publication/Creation

[Winnipeg, [1962]

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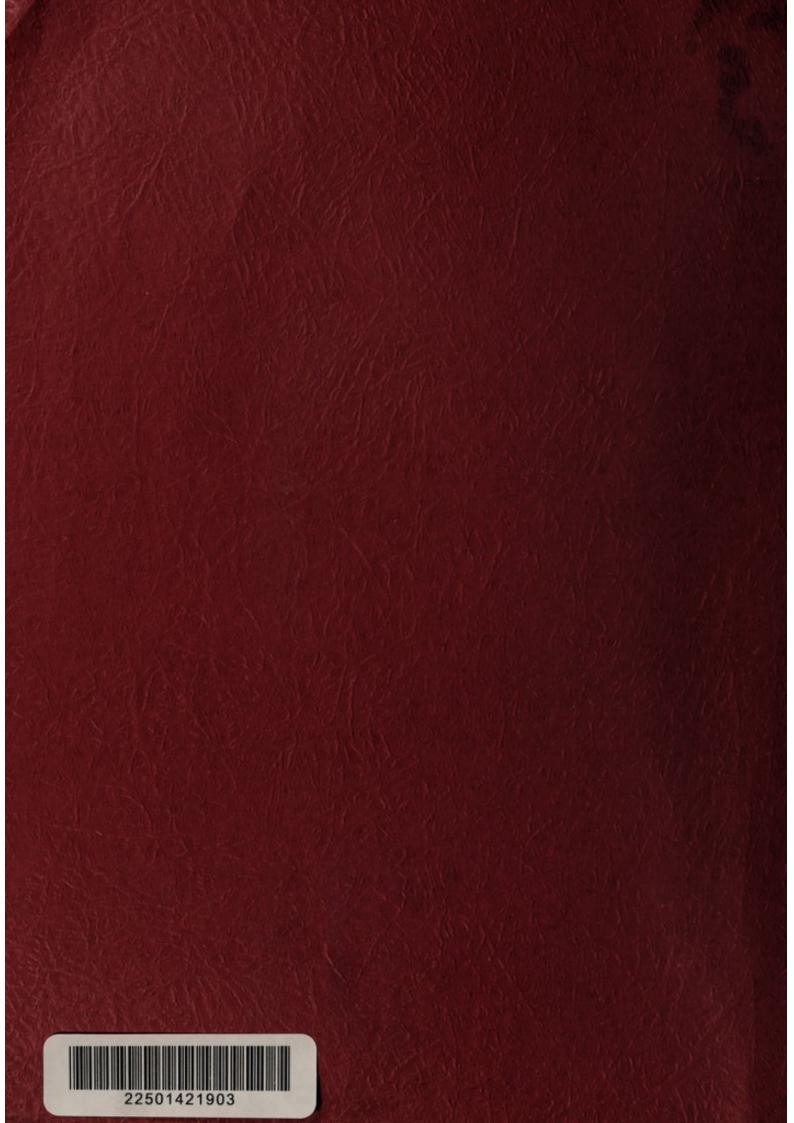


HEALTH DEPARTMENT

ANNUAL REPORT of the Medical Health Officer



R.G. Cadham, M.D., D.P.H.



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CITY HEALTH DEPARTMENT

Winnipeg, 1963.

Chairman and Members, Committee on Public Health and Welfare.

Mesdames and Gentlemen:

I have the honour to present the annual report and the financial statement of the Health Department for the year 1962.

The City Health Department experienced a very progressive year, and essentially a healthy one for the citizens, being marred only by a minor outbreak of Diphtheria and the continued toll in deaths from Lung Cancer.

Eight cases of Diphtheria were reported with two deaths occurring among this group. One of these deaths occurred in a four-year-old child who had been completely immunized; the other, a two-and-one-half-year-old child, had not received any previous immunizations. In spite of our repeated educational program in this regard as well as the provision of ten weekly immunization clinics located at strategic points throughout the City, the failure to have this child immunized occurred.

We were fortunate to experience a marked reduction in the incidence of Infectious Hepatitis with only 131 cases being reported compared to 223 cases during 1962. The policy of providing prophylactic doses of gamma globulin to household contacts of each case of Infectious Hepatitis was continued and proved to be very effective.

During the week of April 30th to May 4th, 1962, the Winnipeg Health Department carried out a mass oral poliomyelitis vaccine program. This program ran concurrently with a similar program in the suburban health units. All Winnipeg school children including private and parochial schools and day nurseries were given the opportunity to receive this vaccine in their respective schools. In addition, 21 public clinics were operated by the Winnipeg Health Department throughout the City from 2:00 to 3:00 p.m. to accommodate all age groups over 6 months of age. Business firms who employed nurses and Winnipeg Hospitals were provided with vaccine to immunize their employees. The space for 17 of the 21 public clinics was donated by the Winnipeg School Division. The Central Branch of the Y.M.C.A. and two City fire stations also provided space accommodation. In addition, the Mount Carmel Clinic assumed responsibility for the entire operation of one public clinic. Over 250 volunteers assisted the public health nurses at the various clinics.

A total of 206,877 persons were fed the oral vaccine in five days, which is 31% of our population. This is lower than our anticipated figure of 90% of the population, which is disappointing since to date oral Sabin vaccine offers the most effective and economical protection against poliomyelitis and its disastrous effects. To obtain this protection a high general level of immunization in the community is required. In order to accommodate those citizens who were unable to receive the vaccine because of illness, recent oral surgery or other reasons, the Winnipeg Health Department conducted public clinics in various centers later in the month.

CITY HEALTH DEPARTMENT

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In co-operation with the Manitoba Sanatorium Board a very active program was carried out for the detection of Tuberculosis by way of mass tuberculin testing surveys and where indicated, chest x-ray service. The tremendous progress made in the control of Tuberculosis is depicted in the lowest death rate every being reported, being 2.7 per 100,000 population.

The Health Department continued with its anti-smoking educational campaign directed at certain levels of the school population in an endeavour to eventually provide some control of the risisg incidence of Cancer of the Lung. Our survey on the smoking habits of school children will be repeated early next year to ascertain whether or not this form of education is proving effective. Cancer of the lung is now considered to be largely a preventive disease and it is unfortunate the senior levels of government do not initiate action to prohibit the encouragement of our population to smoke cigarettes which is offered through the various advertising media, in particular, television and especially that directed to the adolescent population.

The supervision of nursing homes continued to be a problem and it is apparent that the existence of proprietary nursing homes is not in the best interests of the unfortunate citizens who must be placed in such institutions. In general, care provided in proprietary nursing homes is inferior and more expensive than that provided by non-proprietary institutions caring for this type of patient.

Medical care continued to be provided in the home for those patients who are unable to attend the hospital and who are a financial responsibility of the City of Winnipeg or classed as medically indigent. During the year 2,050 house calls were made in this regard.

The Dairy Division carried out 2,794 inspections among the 829 milk producers shipping milk into Winnipeg. 41,201 various bacteriological tests were completed in the Laboratory.

8,652 inspections were made by the Housing Division. 3,531 verbal warnings to correct violations of the Public Health Act were issued and 1,303 formal notices were issued. The respect given to such notices by the individual concerned is reflected in the fact that only 17 police court summonses were required in order to effect correction of the violations which existed.

The high standard of sanitation and hygiene in all food handling establishments was maintained. A total of 12,807 inspections were made and some 15,461 pounds of food stuffs were condemned.

The Division of Sanitation and Hygiene had a very heavy year, completing over 17,000 inspections. Air pollution continues to be developing as one of the major problems for this Division.

In summary, this has been a very satisfactory year, and on the

Wa are again fortunate in experiincing a year in which no clinical casesheraryoligaryolitis experimented. +=Only and case of polybe has where substates for builders there years report on an interned be been reported in the last four years.

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following pages are recorded in detail the activities of the Health Department for the year 1962. The support of the Committee on Public Health and Welfare, as well as that of other elected representatives to the City Council has been appreciated by myself and all other members of the staff.

Respectfully submitted,

R.G. Cadham, M.D. Medical Health Officer.

RGC:1v

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Respectfully submit ted,

R.G. Cadhan, M.D. Hedical Health Officer,

RGC: Lv

COMMITTEE ON PUBLIC HEALTH AND WELFARE

Alderman E.I. Tennant, Chairman

Alderman D. Swailes, Acting Chairman, Alderman J. Gurzon Harvey, Alderman E.J. Enns, Alderman L. Hallonquist, Alderman J. Zuken, His Worship Mayor S. Juba (ex officir)

STAFF

Medical Health Officer	•	•	•	•	•	•	•	•	R.G. Cadham, M.D.,
Deputy Medical Health Officer .	•	•		•	•	•		•	J.B. Morison, M.D.,
Consultant, Child Care Services	•	•	•	•	•	•	•	•	H. Medovy, M.D., F.
Director of Dental Services		•	•	•	•	•		•	C.H. McCormick, D.D. D.D.
Director, Public Health Nursing									M.A.,
Chief Health Inspector									
Secretary									E. Singleton

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HISTORY

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From a Hudson's Bay Company trading post (Fort Garry) in 1870, with a population of 215, Winnipeg has grown to the size and finish of a first-class city of approximately 253,000 people. When the City was incorporated in 1873 there was a population of 1,869.

The present Health Department may be said to date from 1900 when the late Dr. A.J. Douglas was appointed the first full-time Health Officer.

From 1881 to 1900 Winnipeg had a series of part-time Medical Health Officers.

In 1941 amalgamation with the School Medical Services occurred and the services increased and extended to all child-caring institutions in the City without distinction. This applies to Medical, Dental and Nursing Services.

The Child Health Services Board was set up to help the Department in a consultative manner, meetings being held at the call of the Chairman. This Board was replaced in 1955 by a monthly meeting of the administrative Officers of the School Board and the Health Department.

The Department has now several Branches to carry out the provisions of the Public Health Act of Manitoba, the Health By-law of the City and a number of other City By-laws.

AREA AND POPULATION

The City covers a total area of 25 square miles - land 24.27 square miles (15,723 acres), and water .73 square miles (469 acres). The density of the population is 16.3 persons per acre of land.

For statistical purposes the population for 1961 is 256,029, a decrease of 704 from 256,733 in 1961, as determined by the Assessment Commissioner. In 1962 the natural increase (live births less deaths) was 3,374.

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VITAL STATISTICS AS REGISTERED IN WINNIPEG, 1962

(Including Non-Residents)

	1962	1961
Live Births	9,458	9,439
Deaths	3,044	2.926
Stillbirths	123	141

Summary of Vital Statistics, Residents, 1962

		1962	1961
Live Births	Male Female Total	2.995 <u>2,943</u> 5,938	3,188 2,917 6,105
Rate per 1,000 population		23.2	23.8
Deaths	Male Female Total	1,527 <u>1,037</u> 2,564	1,546 <u>1,020</u> 2,566
Rate per 1,000 population Natural Increase		10.0 3,376	10.0 3,539
Infant Deaths (-1 year)	Male Female Total	90 <u>45</u> 135	82 <u>55</u> 137
Rate per 1,000 Live Births		22.7	22.4
Stillbirths	Male Female Sex Undetermined Total	39 43 	49 40 <u>2</u> 91
Rate per 1,000 Live Births		13.8	14.9
Puerperal Deaths		2	3
Rate per 1,000 Live Births		.3	.5

(Population - December 31, 1962 - 256,029

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LIVE BIRTHS

4

In 1962 there was a total of 5,938 births occurred to Winnipeg residents, giving a rate of 23.2 per 1,000 population compared with a rate of 23.8 recorded in 1961. First children accounted for 2,080 or 35.0% (39.3%). 1961 figures are in parentheses. Second children 1,554 or 26.2% (26.5%). 5,535 or 93.3% (94.2%) included the firth child. There were 4,573 or 77% of the births occurred to mothers in the 15 year age group 20-34 years.

INFANT MORTALITY

There were 135 deaths of infants under one year of age giving a rate of 22.7 per 1,000 live births as compared with 22.4 in 1961. 97 or 71.9% occurred during the first week of life and of these 72 or 53.3% occurred on the first day.

The principal cause of infant deaths were (1961 figures are shown in parentheses) -- Immaturity 33 (32), Injury at birth 15 (15), Pneumonia, all forms 11 (15), Postnatal asphyxia and Atelectasis 16 (13), Congenital malformations 23 (21).

A detailed list of the causes of infant deaths is on pages 12 and 13 of this report.

PERINATAL MORTALITY

Perinatal deaths consist of still births plus deaths under one week and the rate is expressed as a porportion of total births (live and stillborn). In 1962 there were 32 stillbirths and 97 deaths under one week giving a total of 179 which represents a rate of 29.7 per 1,000 total births. Comparative figures for 1961 show 134 and for 1960 218 perinatal deaths which represent rates of 29.7 and 34.1 respectively per 1,000 total births.

MATERNAL MORTALITY

There were two deaths from conditions pertaining to child bearing giving a rate of 0.3 per 1,000 live births. In the last decade there have been 59,736 live births and 23 deaths of mothers giving a rate of 0.5 per 1,000 live births.

DEATHS

There were 2,564 deaths of Winnipeg residents in 1962 giving a rate of 10.0 per 1,000 population which is the same rate as that recorded in 1961.

Heart diseases were responsible for 934 or 36.4% of all deaths. Cancer for 499 or 19.5%. Accidents, Poisonings and Violent Deaths accounted for 5.6% of all deaths the same percentage as that recorded in 1961. 33.3% of all deaths occurred after 45 years of age. In the broad age group 1 - 44 years 6.5% of the deaths occurred.

* * *

Our appreciation and thanks are extended to all those who co-operated with us during the year in permitting us the use of the registration of births and deaths or copies of them and for the use of the tabulating machine.

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A detailed list of the causes of infact desire is on pages 12

PERLATAL MORTALLY

Perindtal deaths consist of still strike plus deaths under one back and the rate is depressed as a porportion of total births (live and stillssch): In 1662 there are at stillbirths and 97 deaths under one wash giving a Felsi Stire the 1301 show 134 and for 1960 216 periodel onthe shift percender finbits is 30.1 represents or 1,000 total births, forces, finstrike the 30.1 represents per 1,000 total births, forces, fin-

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YEAR	NUMBER OF BIRTHS	RATE PER 1,000 POPULATION	INFANT DEATHS	RATE P 2R 1,000 LIVE BIRTHS
1943	4,294	18.9	197	45.9
1944	4,060	17.7	144	35.5
1945	4,210	18.2	134	31 3
1946	5,223	22.6	184	35.2
1947	5,532	23.6	193	34.7
1943	4,779	20.4	153	32.0
1949	4,963	21.2	137	27.6
950	5,045	21.1	133	26.4
951	5,254	21.9	115	21.9
952	5,417	22.5	131	24.2
1953	5,586	23.0	166	29.7
1954	5,920	24.3	145	24.4
1955	6,016	24.2	147	24.4
1956	5,903	23.3	144	24.4
1957	6,067	23.3	130	29.7
1958	5,392	23.1	155	26.3
1959	6,023	23.4	154	25.6
1960	6,281	24.5	158	25.1
1961	6,105	23.3	137	22.4
1962	5,938	22.7	135	22.7

LIVE BIRTHS, RESIDENTS ONLY

		ORDER	OF B	IRTH B	Y AGE	OF MO	THER			35.0 26.2 17.1 10.1
	10-14	15-19	20-24	25-29	30-34	35-39	40 &	Age Unknown	TOTAL	
lst	2	543	1,009	337	134	36	17	2	2,030	35.0
2nd	-52	139	712	429	191	72	10	1	1,554	26.2
3rd	-34	21	312	333	221	101	24	2	1,013	17.1
4th	-11	3	103	195	167	100	31		599	10.1
5th	-17	-	34	89	74	69	22	1	289	4.9
6th & over	-10	-	13	86	135	101	43	- 12	383	6.4
Unknown	-	1	-	-				19	20	.3
TOTAL	2	707	2,133	1,469	921	479	152	25	5,933	100.0

NET ETAS		RATE FER	NUMBERS	
1;000		1;000		
LIVE BIRTHS	DEATHS	PPPUBATEON	- 347223.8	YEAR
a construction of the second of the				
45.9				1943
35-5		17.7		1944
31-3	134	19.2.	6.; 23.D	1945.
35:2	184.	2215		1994(
		23,6		19437
32.0		20,64		1943
27.5		21, 2	688;4	1943.
		21,11	51045	1950
	1150	22, 9.		1951
		22,55	3,629	1952
		23.0	5,536	
24, 44	145		5,929	1954
24.4	16.77		6,015	1955
24,4	144	23.3		
29.7		23,8		1957;
	155	23.1:	5,392	1958;
	154/	23:4:		1959
	153	24:5	6,231!	1960
22,60	132	2333 .	61205	1961;
22,77	1255	22271	5,938	19622
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			2:183	1.469		4.7.P	162	25		

			and the second	ths, Death				
-	Maternal Mo	ortality W	With Rates	For Winni	peg For	Years 191	1-1961 *	**
YEAR	BIRTHS	RATE PER 1,000 pop.	DEATHS	RATE PER 1,000 pop.	INFANT DEATHS	RATE PER 1,000 L.B.	MATERNAL MORTALITY	RATE PER 1,000 L.B.
1911-15	5,369	29	2,022	11.1	813	152	35	6.5
1916-20	5,695	30	2,177	11.5	570	104	35	6.9
1921-25	5,371	27	1,677	8.5	415	77	25	4.7
1926-30	4,527	22	1,777	8.7	277	61	26	5.7
1931-35	3,944	13	1,512	6.9	170	43	20	5.1
1936-40	3,785	17	1,697	7.7	138	36	17	4.5
1941-45	4,037	13	1,935	8.7	159	39	10	2.3
1946-50	5,200	22	2,035	3.7	164	31	4	.8
1951-55	5,639	23.2	2,220	9.2	140	24.3	4	.7
1956	5,908	23.3	2,438	9.6	144	24.4	1	.2
1957	6,067	23.8	2,551	10.0	180	29.7	2	.3
1958	5,892	23.1	2,566	10.0	155	26.3	4	.7
1959	6,023	23.4	2,738	10.6	154	25.6	2	.3
1960	6,281	24.5	2,680	10.4	158	25.1	2	.3
1961	6,105	23.8	2,566	10.0	137	22.4	3	.5
1962	5,938	23.2	2,564	10.0	135	22.7	2	.3

Table Showing Number of Deaths and Rate Per 100,000 Population From Certain Diseases for Winnipeg For The Years 1911 to 1961 * **

YEAR	T.B.	Rate per 100,000 pop.	4 Acute Comm. Diseases ≠	Rate per 100,000 pop.	Diseases of Heart	Rate per 100,000 pop.	Cancer All Forms	Rate per 100,000 pop.
1911-15	131	72	142	78	117	64	87	48
1916-20	136	72	135	72	138	73	135	72
1921-25	94	48	65	33	174	88	178	90
1926-30	86	42	37	18	233	115	209	103
1931-35	65	29	15		308	141	268	123
1936-40	52	24	11	75	450	205	283	129
1941-45	51	22	8	4	613	270	324	143
1946-50	34	14	4	4 2	676	291	333	143
1951-55	20	8	1	0.4	804	334	412	169
1956	11	5	2	0.8	867	341	464	182
1957	22	5 9	2 3	1.2	922	362	413	162
1958	17	7	-		958	375	475	186
1959	15	6	-	-	1010	392	482	187
1960	18	7	1	0.3	1005	391	494	192
1961	10	4	1	0.3	\$17	357	465	181
1962	8	3	2	0.8	934	365	499	195

* 1911-1930 include non-residents. 1931-1961 include residents only.

** 1911-1955 show average figures for the periods.

Measles, Scarlet Fever, Diphtheris, Whooping Cough.

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		29.4	1.60	10.0 10.0	2,551		6.0.67	1957
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+ Measles, Scarist Fever, Diphtheris, Whooping Cough.

LEADING CAUSES OF DEATHS, 1962, RESIDENTS ONLY

	19	6 2	1961			
CAUSE OF DEATH	Number of Deaths	% of Total Deaths	Number of Deaths	% of Total Deaths		
Heart Diseases (410-443)	934	36.4	917	35.7		
Malignant Neoplasms (140-205)	499	19.5	465	18.1		
Vascular Lesions Affecting Central Nervous System (330-334)	276	10.3	295	11.5		
Accidents, Poisonings & Violent						
Deaths (E800-E999)	144	5.6	145	5.6		
Pneumonia (490-493)	136	5.3	140	5.5		
Malformations and Diseases of Early Infancy (750-776)	122	4.7	123	4.8		
Cirrhosis of Liver (581)	25	1.0	27	1.1		
Diabetes Mellitus (260)	20	0.8	23	0.9		
Bronchitis (500-502)	26	1.0	18	0.7		
Ulcer of stomach and duodenum (540-541)	16	0.6	17	0.7		
Intestinal Obstruction and Hernia (560-561, 570)	13	0.7	13	0.5		
Nephritis and Nephrosis (590-594)	17	0.7	11	0.4		
Pulmonary Tuberculosis (002)	8	0.3	10	0.4		
Hypertension without mention of Heart (444-447)	11	0.4	10	0.4		
Acute Poliomyelitis (080)	1-	-	1 Ja	-		
All other causes	312	12.2	352	13.7		
TOTAL	2564	100.0	2,566	100.0		

Causes of Death

The following pages give particulars of the number of deaths of Winnipeg residents for the year 1962, classified according to cause, age and sex. The causes of death are coded according to the Seventh Revision of the International Lists of Diseases and Causes of Death.

LEADING CAUSES OF THE, 1952, RESIDENTS ONLY

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35.7	817	3.62	936 936	Hoart Diservas (410-443)
í:śi	465 465	8:8 <u>7</u>	čéš	Malignant Neoplasma (196-207) Malignant Reoplasma (160-205)
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70 - 79 yrs.	-	8	1	2	3		12	10	85		9
65 - 69 yrs.		62						8	17	194	-
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CAUSE	Pulmonary Tuberculosis (002)	Other T.B. of respiratory system (001,003.C03)	Syphilis and its sequelae (020-029)	Malignant neoplasms including neoplasms of lumphatic and haematopoietic tissues	C02-041)	Benign and unspecified neoplasms (210-239)	Diabetes Mellitus (260)	Anaemia (290-293)	Vascular lesions affecting central nervous system (330-334)	Nonmeningococcal Meningitis (340)	Chronic Rheumatic Heart Disease (410-416)

DEATHS TO WINNIPEG RESIDENTS BY CAUSE, AGE AND SEX - 1962

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Arteriosclerotic and degenerative Heart Diseases (420-422)	5 2	Ň	543	282								19	62	120	104	296	205	24	830
Other Diseases of Heart (430-434)			15	20								1	1	4		10	19		35
Hypertension with heart disease (410-443)	a ~~		17	21									-	7	n.	6	17	1	33
Total Heart Diseases (410-443)		<u> </u>	593	341								25	68	138	114	321	243	25	934
Hypertension without mention of Heart (444-447)	8	1	9	S						-	14	-		1	1	4	5		11
Influenza (480-483)			e	5												1	5	2	60
Pneumonia (490-493)			82	54		e	1			-	1	S	3	6	7	46	49	14	136
Bronchitis (500-502)			23	e		3	3		1					2	1	11	9		26
Ulcer of stomach and duodenum (540-541)			8	09							1		3	3	3	80			16
Appendicitis (550-553)			2	•				1			1	1							2
Intestinal Obstruction and Hernia (560,561,570)			6	6	-					-			1	e		8	4		18

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	Cause	Gastritis, Duodenitis, Enteritis - and Colitis, except diarrhoea of the newborn (543,571-572)	Cirrhosis of Liver (581)	Nephritis and Nephrosis (590-594)	Hyperplasia of prostate (610)	Complications of pregnancy, childbirth and the puerperium (640-652, 670-639)	Congenital malformations (750-759)	Birth Injuries, postnatal asphyxia and atelectasis (760-762)	Infections of the newborn (763-763)	Other diseases peculiar to early infancy and immaturity un- qualified (769-776)	Totals 750 - 776

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Code Number	Cause of Death	Total	Male	Female	12	A	W	-	W	A	W	EL.	M	4
751	Spina Bifida and Meningocele	1		1		H				4				-
754	Congenital malformations Circulatory system	5	3	3						-		_	8	H
759-759,753	All other congenital malformations	18	11	2	6	2							2	2
760-761	Birth Injuries	15	6	9	00	9					-			
762	Postnatal Asphyxia and Atelectasis	16	11	5		4							8	
763	Pneumonia of newborn	00	4	4	4	3							-	
764	Diarrhoea of newborn	1		1				-					~	
768	Other sepsis of newborn	•		'									-	
770	Haemolytic diseases of newborn (Erythroblastosis)	e	e	'	4									
769,771,772	All other defined diseases of early infancy	e	2	-	~~~~	1							-1	
773	Ill-defined diseases peculiar to early infancy	00	5	e	4	3							-	
774-776	Immaturity with subsidiary condition or unqualified	33	25	00	25	00							-	
	All other causes	24	17	7	1	2							16	5
	TOTALS	135	06	45	65	32	1	9		1	1	1	23	80
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INFANT DEATHS. WINNIPEG RESIDENTS. FOR THE YEAR 1962 - BY CAUSE. AGE AND SEX

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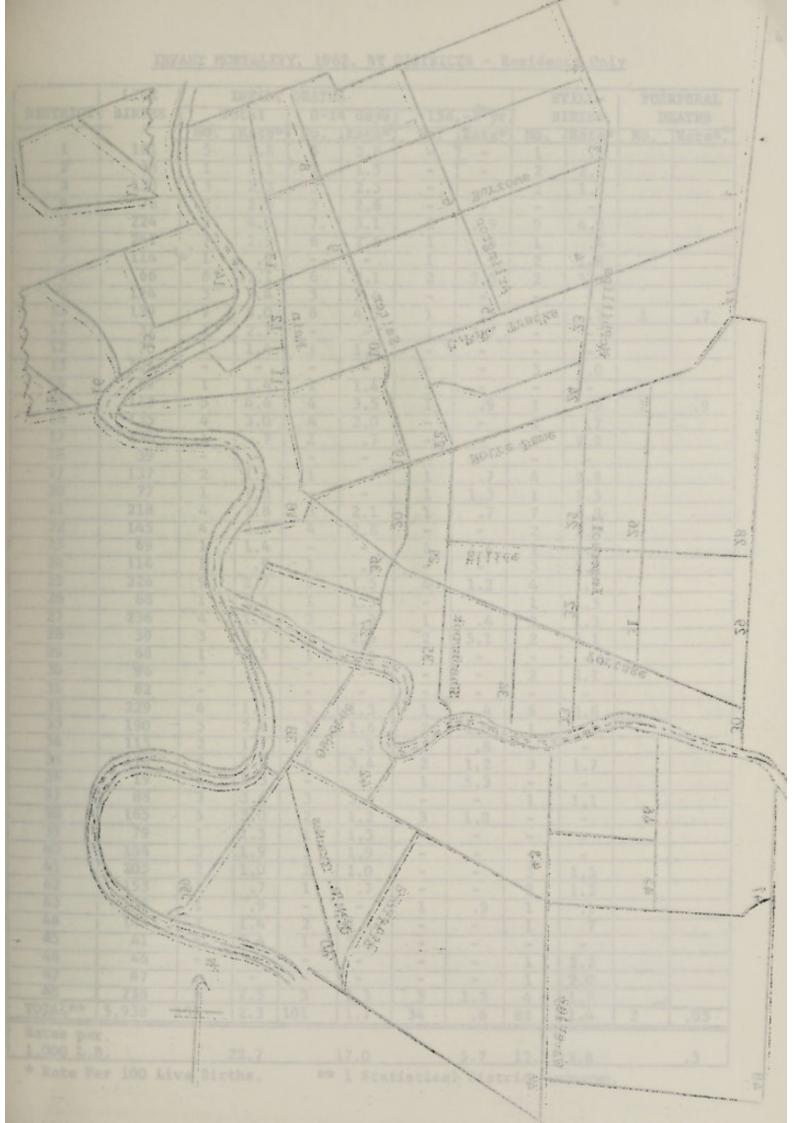
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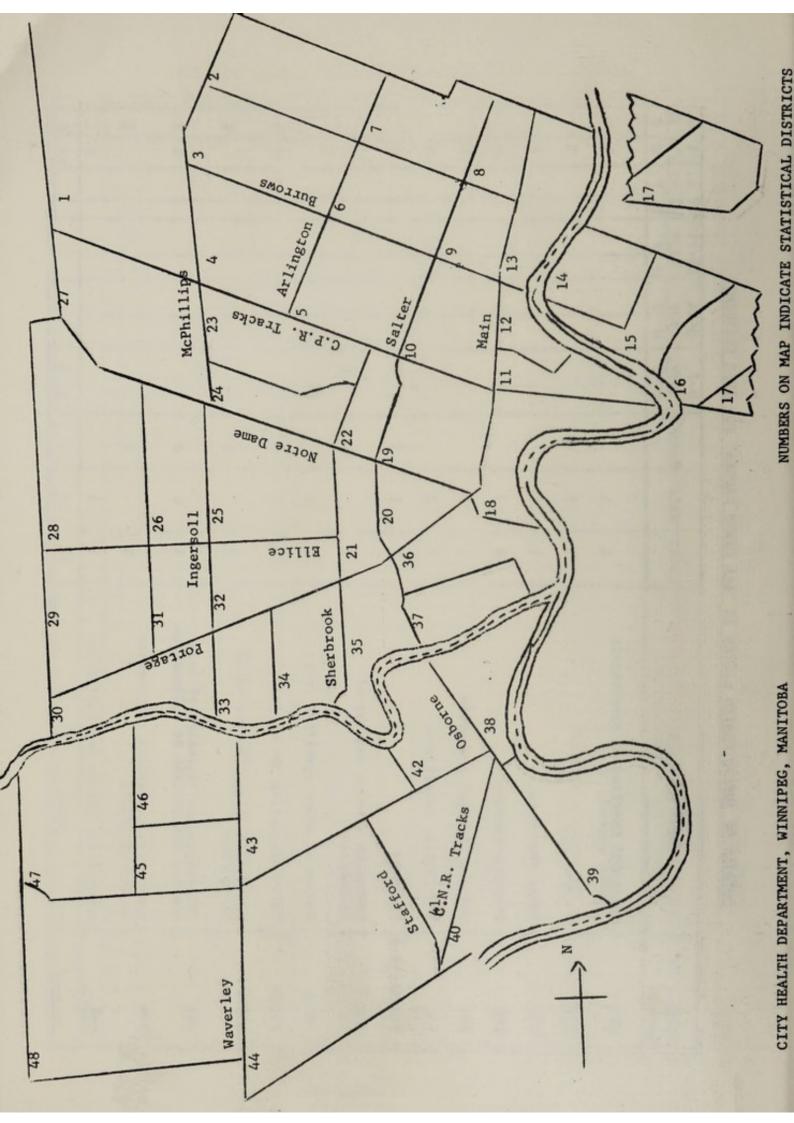
DETAILS OF INFANT DEATHS LISTED IN "ALL OTHER CAUSES" FOR 1962 RESIDENTS

Code	Cause of Death	Total	Male	Female	0-7 days	8-14 days	15-21 days	22 d	d. 1	1 mo.
Number					MF	MF	MF	M F	M	
193.4	Malignant neoplasm of sympathetic nervous system.	1	1							
282	Scurvy	1	1						-	
490	Lobar pneumonia	1	1							
165	Bronchopneumonia	1	1							
492	Primary atypical pneumonia	1	1							
501	Bronchitis, unqualified	2	2						5	
519.0-519.2	Pleurisy	2	1	1	1					
527.1	Emphysema without mention of bronchitis	1		1	1					
560.4	Hernia of other specified site	1	1		1					
571.0	Gastro-enteritis and colitis	2	1	1						-
902.0	Accidental falls from one level to another	1		1						1
921	Inhalation and ingestion of food causing obstruction or suffocation	80	9	2					9	2
924	Accidental mechanical suffocation in bed or cradle	1		1						1
981	Assault by firearm and explosive	1	1						1	
	Total	24	17	7	1 2				16	5

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INFANT MORTALITY, 1962, BY DISTRICTS - Residents Only

DISTRICT	LIVE BIRTHS		INFANT	DEATH	S 4 days	157	1" yr.		TILL- IRTHS	PUERPERAL DEATHS	
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- 3	66		12.1	6	9.1	2	3.0	2	3.0		
	124	- 3-	2.4	3	2.4		5.0		120		
10	139	17	5.0	6	4.3	1	.7	1	.7	1	.7
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-16	135	-4	3.0	- 4	3.0		.,	1	1.7		.,
17	136	+ -	1.7	1	.7	-	-	3	2.2		
18	39		+		+ - +	-	-		-		
19	137	2	1.4	1	.7	1	.7	4	2.9		
20	77	1	1.3	1		1	1.3	1	1.3		
21	218	4	12.8	3	2.1	1	.7	7	4.8		
22	145	+ 4	2.8	14	2.8		- 1	2	1.4		1
23	69	+ 1	1.4			1	1.4	1	1.4		
24	114	+1	1.9	1	.9	-	-	3	2.6		
25	326	+ 9	2.7	5	1.5	4	1.2	4	1.2		
26	68	11	1.5	1	1.5	-	-	1	1.5		
27	236	-4	1.7	3	1.3	1	.4	3	1.3		
28	39	3	17.7	1	2.6	2	5.1	2	5.1		1
29	68	1	1.5	1	1.5	-	-	-			1
30	96				-	-	-	2	2.1		
31	82	+ -	+	- 1	-	-	-		-		-
32	229	14	1.7	3	1.3	1	.4	6	2.6		a section of
33	190	5	12.6	3	1.6	2	1.0	1	.5		
34	115	+ 2	1.7	1	.9	1	.8		-		
35	174	8	4.6	6	3.4	2	1.2	3	1.7	100 0	102
36	19	+1	5.3	-	-	1	5.3	-	-		
37	88	3	3.4	3	3.4	-	-	1	1.1		
38	165	5	3.0	2	1.2	3	1.8	-	-		
39	79	1	1.3	1	1.3	-	-	-	-		-
40	154	3	1.9	3	1.9	-	-	-	-		
41	205	2	1.0	2	1.0	-	-	3	1.5		
42	153	1	1.7	1	.7	-	-	2	1.3		
43	106	1	.9	-	-	1	.9	1	.9		
44	148	2	1.4	2	1.4	-	-	1	1.7		
45	41	1	12.4	1	2.4	-	-	-	-		
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47	47	-	-	-	-	-	-	1	2.0		
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INFANT MONTALITY, 1961, BY DISTRICTS - Residents Only

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INFECTIOUS DISEASES in 1962

Health authorities are aware that infectious diseases are always incompletely reported. The situation is not as bad in diseases requiring bacteriological or serological confirmation as in these cases the condition is reported by the laboratories as well. Also, in the case of hepatitis reporting is usually more satisfactory because the Department of Health is requested to provide gamma globulin for protection of the contacts by passive immunization -- this is done free of charge. Chicken pox, erysipelas, measles, mumps and influenza are no longer reportable diseases except under unusual circumstances. Dysenteries, whooping cough, scarlet fever and food poisoning are still reportable illnesses but are poorly reported especially the mild cases that run a beningn, self-limited course. Many of these patients are not attended by a physician and when they are the diagnosis may not be clear.

For all these reasons reporting by physicians, hospitals and laboratories may not give a true picture of the prevalence of illness in a community. In an effort to complement the above methods and achieve a better index of community health state from the point of view of communicable diseases, the Health Department's school surveillance system was continued with greater zeal in 1962. Public Health nurses through daily visits to schools all over the city note illnesses amongst pupils and report them to the central office. Although this method has a drawback that only school-age children are observed and only during that part of the year during which schools operate, yet this system supplements the traditional method of reporting of infectious diseases. Results of this school survey are shown in Table I.

Comments:

1. Non Specific

These are illnesses often of obscure etiology but of common prevalence. They constitute the commonest cause of absenteeism. So called "flu" includes symptoms such as headaches, fevers, chills, sore throat, gastrointestinal disturbances, cough and various combinations thereof. The number reported in 1962 was 1350 compared with 4366 in 1961 -- a reduction of 69%. This reduction is mainly due to the fact that the decision was made to report only outbreaks where five or more children in once school exhibit a common symptomatology, because only then can one be reasonably sure that the disease was indeed a communicable one. In larger outbreaks swabs were taken for bacteriological and viral examinations.

2. Impetigo

This is the third commonest cause of absenteeism. Some cases are truly resistant to treatment and many drag on to a chronic course due to inconsistent and irregular treatment. Persistent and systematic treatment together with meticulous personal hygiene is required to cut down on impetigo and this necessitates continued effort and interest on the part of the parents. INFECTIOUS DISEASES

iai ... For all these, reasons reporting by physicials. Contrais and teboratories may not gives a true pictors of the prevalence St lineas in a summunity. In an effort togoopignent the above methods and Schiwe a batter sadex of conturnsy health shales form the point of view of the Schiwe a batter eases, that kelts becarters i a string i surveillance, signing was contified ingreater reak in 1962. Fibile Health, murges strong daity visits to Schools all over threatly note lides as a construction of the provision was contified inations this extraction and the string of the point of the string of the schools all over threatly note lides as a construction of the the schools all over threatly note lides as a construction of the point of the schools office. Although this methods the school of the point only school is a children are observed and only during the reaction of the point only school is a school was set this system supplements, she toget to the point of the point of the set the school of the school survey are shown in table 1.

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3. Infectious Hepatitis

A total of 131 cases was reported in 1962 compared with 223 in 1961 which had been the highest number reported. This was a fortunate event because hepatitis is still on the increase throughout the world. Sixty-three or 43% of the cases occurred in school-age children. It is noted that a majority of these cases occurred in an area of the city where overcrowding exists and has mainly older schools. This is in keeping with the known epidemiologic characteristics of this disease. Family contacts were given gamma globulin for passive immunization protection, administered by their own physician or the Outpatient Departments of the various hospitals. There were no deaths.

4. Ringworm

There were 62 cases of ringworm infection due to microsporon auduini. Facilities are provided for free examination of pet dogs and cats by a veterinarian as the source of the infection can often be traced to such animals. Children with ringworm are excluded from school, unfortunately for lengthy periods sometimes.

5. Whooping Cough

This disease is still notifiable. A few cases were reported and more were made known through the schools. Yet due to the fact that the symptoms may not be characteristic, especially in the immunized person (and the great majority of children are now immunized), it is impossible to assess the true prevalence of this illness, even at an approximation.

6. Pulmonary Tuberculosis

This subject is dealt with separately elsewhere in the report. Note that one case was discovered during the high school surveys made.

7. Poliomyelitis

No cases of this disease were reported in 1962 and there was only one case during the three-year period from 1959 to 1962. This happy state of affairs is undoubtedly related to the continued effort to have everyone immunized with Salk Vaccine and this year with Sabin Vaccine. The percentage of immunized persons in Winnipeg is very high.

8. Measles

This is not a reportable disease but we are aware of the occurrence of at least 332 cases, which indicates that this illness reached epidemic proportions in 1962, as this was the highest incidence in the past five years. There are hopes that the morbidity from this illness may be lessened in the future, especially in certain groups of handicapped children, through the use of a newly developed measles vaccine. This product has not been used in Canada as yet and it is still considered to be in the experimental stage.

9. Diphtheria

There were 8 cases of diphtheria during the year with, unfortunately,

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is at which had been the highest competence in 1962 compared with 222 in, secause were the highest competence in the way a fortunate report is at it is the transfer to the indicate the angle in 1962 compared with 222 in, a strike of the transfer to the indicate the second of the world barry is strike of the transfer to the indicate the second of the second the indicate transfer to the transfer to the school and the indicate of the second the second the is strike of the school is the indicate of the school of the indicate transfer to the school is the indicate of the school of the indicate to boult for paraly older schools. This is indicated by with the known warna is boult for paraly to the schools of the indicate of the school of the school of the schools of t

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No cases of this discase, were concreted in 1.2 sn. one case during the three year period from 1000 range to 1.2 sn. affairs is undoubtedly related to the continued effort to have everyone, tamunized with Salb Vaccine and this year, with Sabia Vaccina. The percentage of immunized persons in Winnipeg is very high.

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There were 8 cases of diphtheris during the year with, unfortunately,

2 deaths. Facts are summarized in Table II. Both deaths occurred in preschool children. The first fatal case, 2½ years old, had no immunizations whatsoever. The other fatality, however, occurred in a 4-year old child who was completely immunized, including a booster in 1961. The family and other contacts of this patient were all immunized as well and when swabbed were found to be negative for diphtheria. In contrast with the above, when the contacts of the first fatal case were swabbed five were found to be carriers of diphtheria organisms (3 children and 2 adults). Only two of these siblings were immunized and we do not definitely know about the adults. Of the remaining 6 cases of diphtheria 2 had no previous immunizations and 4 had been vaccinated -- two of these 4 however, have had no recent boosters.

Thirteen diphtheria carriers were also discovered, the majority of whom were amongst the contacts of the previously mentioned cases.

The rate of immunization amongst children of school age in Winnipeg is very high due to intensive programs. Free immunization clinics are available throughout the City and the public is encouraged and urged to attend in order to ensure a complete protection for everyone. So there is really no excuse for any parent to have his preschool age child left without the necessary inoculations. In some areas in spite of all efforts a 100% inoculation rate cannot be achieved unless one could have immunization teams make a house-tohouse-canvass. It is to be noted also that a few parents for various reasons refuse to have their children inoculated. These reasons, from the medical point of view usually don't stand up; it is in this respect that education of the general public may help further in the future.

Smallpox Fuberculosis, Pul Typhoid Fever Cyphoid Fever Car

Mhooping Cough

Food Poisoning

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TABLE OF REPORTABLE INFECTIOUS DISEASES

CASES AND DEATHS REPORTED	CARES	DEATHS	19 CASES	DEATHS
Diarrhoea, of the New Born			-	-
Diphtheria	8	2	11	1
Diphtheria Carriers	13	miner -	12	
Dysentery, Amoebic		-	-	-
Dysentery, Bacillary	4	.350	22	
Dysentery, Unspecified	2	648		1.R.
3. Impetigo. 681	2	503		L.R.
Encephalitis, Infectious	-	72 -		
Hepatitis, Infectious	131	-	223	1
Meningitis, (Meningococcal)	2	-	4	-
Meningitis, (Viral or Aseptic)	2	-	-	-
Paratyphoid Fever		31 -	-	· · ·
Paratyphoid Fever Carriers		62		F.B.
ro Bir Pettenlosia		212		S.R.
Poliomyelitis	-	56		47
Scarlet Fever	47	-	31	-
Smallpox	-	-	-	-
Tuberculosis, Pulmonary	61	6	43	10
Typhoid Fever	(includ	ed in 5.)	_	R.R.
Typhoid Fever Carriers			-	41
Undulant Fever	2	-	1	-
Whooping Cough	8	-	1	-
Food Poisoning	-	•	4	-
	280	8	357	12

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Table I Illnesses occurring among 50,000 Winnipeg school children during the period January to December, 1962, as reported by Public Health Nurses. (Compared with reported illnesses of entire Winnipeg population of 265,429). N.R = No report.

Illness	Number	Number	Reported 1962 (all of city)
3 2	1961		(all of city)
1. Non-Specific	4,366	1,350	N.R.
2. Chicken Pox	1,258	448	N.R.
3. Impetigo	631	503	N.R.
4. Mumps	661	72	N.R.
5. Measles	284	882	N.R.
6. Infectious Hepatitis	141	63	131
7. Conjunctivitis	116	51	N.R.
8. Ringworm	71	62	N.R.
9. Pediculosis	64	212	N.R.
10. Scarlet fever	29	56	47
11. Scabies	15	19	N.R.
12. Whooping Cough	11	13	8
13. German Measles	9	(Included in 5.)	N.R.
14. Diphtheria	4	0	3
15. Pulmonary T.B.	2	1	61

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TABLE II - DIPHTHERIA 1962

A. - Cases

	1910	Immuniza	tion Status		
Age	Complete	Partial	None	Unknown	Total
0 - 5	2	2	1	2.7	5
6 - 10	1	attentiv in additioning	1	ape end most	2
11 - 15	64	A 19		Newber of Pr	0
16 - 20	20 40 70	- 19 - 69 -	1		1
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Total	3	2	3	s better gaug	8

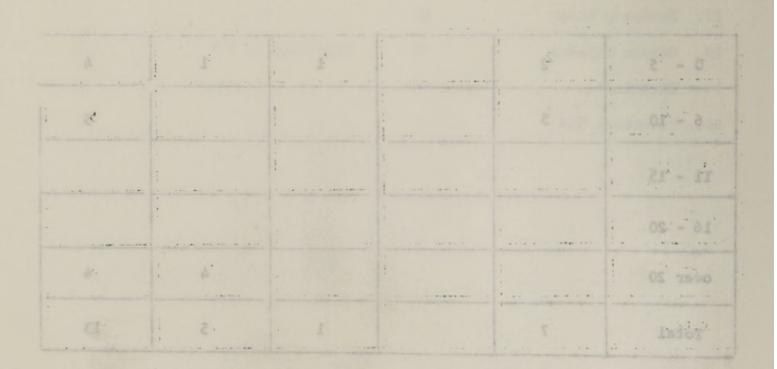
B. - Carriers

0 - 5	2	A.855 0.7 1	1	1	4
6 - 10	5	9990	er forbil in Businer	the older opt	5
11 - 15	0-	4	2		
16 - 20	225		4		
over 20	80 - 80 +	Totat		4	4
Total	7		1	5	13

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I DEATHS	st. Committe survey	re whalking only four new cores.
continues:-	The steady decre	ease in deaths from tuberculosis
<u>Year</u> -	Number	Rate per 100,000
1910	164	123.6
1940	52	23.0
1950	21	8.3
1960	16	6.3
1961	10	3.8
1962	7	2.7

Deaths were predominently in older age groups and most were accompanied by other debilitating diseases: -

Age groups	Number of Deaths
0 - 19	0
20 - 39	0
40 - 69	2
70 +	4
Total	6

II NEW ACTIVE CASES

As a measure of improvement in tuberculosis control the number of new active cases is a better gauge than the number of deaths:-

New Active Cases of Tuberculosis 1962

	New Cases	Rate per 100,000	Found on Surveys
1959	79	26.5	4
1960	45	17.4	4
1961	68	26.5	3
1962	65	25.3	4

Ages of new active cases at the time of discovery reveals an unusual number found in the older age groups.

Age Group	Number	Reactivated
0 - 4	2	
5 - 14	6	
15 - 24	9	2
25 - 39	11	4
40 - 59	17	5
60 - 79	18	7
80 +	2	
Total	65	18

TUBERCULOSIS CONTROL 1962

107470: 107470: Fire steady decrease in deaths from coherculosis

Rate per 100.000	TYDARM .	-	Yasy
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How were these new active cases of tuberculosis discovered? The most fruitful source is the general hospital with private physicians next. Community surveys yielded only four new cases and if continued should be on a more selective basis.

How New Active Cases and Reactivations of Tuberculosis are Discovered

	New	Reactivations
General Hospital - admission	ns 9	1
General Hospital - others	20	3
Private physicians	22	6
Community Surveys	4	1
Chest Clinics	2	7
Contacts	4	
Jails	2	
Vital Statistics	ī	
Total	65	18

Diagnosis of New Active and Reactivated Cases 1962

		Active	Reactivated
Pulmonary	- Primary	3	
mainly in	Minimal	19	5
	Moderately advanced	13	3
	Far advanced	8	5
	Total	43	13
	Glandular	5	2
	Pleurisy	4	2
	Renal	5	1
	Bone	too can 1 fam for	
	Meninges	in man 1 m bet	
	Miliary	11 the 1 trouble	
	Other	5	
	Total	65	18

III SURTEYS

<u>A. Tuberculin Tests</u> were carried out chiefly on college and high school students and selected industrial firms. Students revealed 10% positive and 90% negative. Employees of industrial firms showed 48% positive and 52% negative. These tests were carried out by the staff of the Sanatorium Board:

	Tests	Positive	Negative	Tests Read
Schools and Colleges	14,193	1,385	11,854 90%	13,239
Industrial	6,427	2,918	3,107	6,025
Total %	20,620	48% 4,303 22%	52% 14,961 78%	19,264

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<u>B. X-ray Surveys</u>. The positive reactors to tuberculin tests among students and industrial workers were x-rayed. One student was found with active tuberculosis and none in industry. However in 8,371 x-rays taken at the National Employment Service four new active cases were found.

X-ray Surveys in Winnipeg 1962

	Number	New Active Cases
Industrial	7,105	
Schools and Colleges	2,812	1
National Employment Service	8,371	4
Total	18,288	the active 5 totest
Admissions to Sanatoria	5:	3
Readmissions to Sanatoria	13	3
Discharges from Sanatoria	79	Chose childrations by

Average number of cases under supervision by the City Health Department - 906.

IV SUMMARY

The efforts of the City Health Department are mainly in the direction of epidemiology, the surveillance of old cases and those under home treatment. A combined operation is carried out with the major work in case-finding and treatment done by the Sanatorium Board of Manitoba. The Tuberculosis Central Registry operated by the Provincial Health Department has been found extremely useful in all aspects of this work.

This is not too much improvement from year to year. Deaths gradually decrease in numbers but new active cases do so at a lower rate. There is still the struggle with the recalcitrant and the indifferent. The majority of new cases arise from the area of low income and poor housing.

The conquest of tuberculosis is far distant but with the excellent help of the Sanatorium Board, the Provincial Department of Health and the devotion of those valuable troops, the public health nurses, steady progress continues. B. Norie Summers. We positive needstree to be to be ecouldry bester weeks. All Source and I moundation workense were merapped. On student, we found with strive dilitications and come to industry. Rowwee in 5.399. Arright teles at the Marianal Englishman Service for the Weiter concess back found.

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DIMTAL SERVICES

The program of the Dental Division is centered around four major categories of service:

Dental Health Education Studies of local Dental Health Problems Utilization of Public Health Measures Dental Treatment.

Dental Health Education

A dental health education program requires the active participation of the dental profession, the school system, the public health nurses, the parents and their children. Any attempt to motivate a group into action requires facilities to meet the demand created if any benefits are to be accomplished. The Dental Division attempts to meet some of these obligations by providing a service to the school health program by way of treatment, dental inspection, consultations, preparing, providing and demonstrating teaching aids for the school nurses and teachers.

The improvement in Dental Health in the City of Winnipeg is the result of many factors. The Dental Profession co-operates and is kept wellinformed on the activities of the Division through reports, referrals and interest of many of the dentists who have been associated with the City's program at some time.

Mass dental inspections (11,000 annually) is part of the positive education program in the schools. Notification of parents of a child's dental defects, enquiry into the arrangements the family has for providing dental service and providing alternatives for such service is in effective means of stimulating interest and action in a health program. Table I is a compilation of information collected during classroom dental inspection in the grades mentioned and is on the complete dentition for the general school population of the City. An analysis of this data indicates a trend is developing toward an improvement in the oral health of this segment of the child population.

Responsibility, co-operation, appreciation, desire, interest and action are difficult personal motives to establish in providing a free service to the public. The Division's approach to comprehensive dental treatment for a select group (Social Welfare and indigent children accepted for treatment) seem to be effective in encouraging an approach to optimal dental health. (Table II) An organized regular recall dental examination and treatment program for patient, parent education and the private practitioner's approach has resulted in an extension of the service to more needy families and at the same time has elevated and encouraged the number of Welfare recipients to seek and co-operate in providing dental treatment for their children.

Welfare Children in Active Files

1959	2 02000	345
1960		659
1961	discent.	852
1962	al ires	877

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Mare denich inspections (11,000 arms11)) is part of the positive educidities profiles in the transles, fortification of private of a cuild's itsered defects, enquiry into the arrangements the instity has for providing the deficit intrvice and providing diterantives for such service is a clineric function of stimulating interest and section in a ball program. Table 1"is's should at on of information collected outlog, clearnoon destal inspection in the grant of benitored and is on the complete destination for the grant is deviciping there of the 612y. An antipation this data indicates a trend is deviciping there is informed and is the oral health of this segues of the child form in the information of the first of the second the indicates a trend is deviciping the deviciping the oral health of this segues of the child form of the child form

Responsibility, co-concretion, appreciation, desire, interest and action are difficult personal extincts to astabilish in providing's treatment for a select group (Social Matters's express) to constrain the securic becan to be bifective in encouraging an approach to optimal dental health. (Table II) An organized regular recall fontal constraint for gran for pathent, parent education and the private practitioner's approach has resulted in an extension of the securics to approach that the securited in an extension of the securics to more needy families and at the and the resulted in an extension of the securics to more needy families and at the and co-operate is providing dental treatment for their difference to seek and co-operate is providing dental treatment for their difference to seek

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Parents are encouraged to bring pre-school children to the clinics for dental supervision. The Dental Division has established on a trial basis a Well-Baby Clinic Consultation Service to determine the value of such a service.

Staff

The Division includes one full-time director, three full-time dentists, eight part-time dentists, six dental assistants (including a registered practical nurse and three clerks. The total dentist establishment allows for the equivalent of six full-time dentists.

Clinics

2	Chairs	-	136 H	Ellen Street					
2	Chairs	-	Willi	Lam Whyte School	L				
1	Chair	-	King	Edward School					
1	Mobile	Unit	t -	serving Norqua	y, David	Livingstone	and	a	school
				for retarded cl	ildren.				

Three permanent fully-equipped dental clinics are maintained to provide treatment throughout the year. The clinic at 136 Ellen Street (Old School Board Building) provides an emergency and priority treatment service where the school nurses and Principals can refer cases for immediate action. The demands on the mobile unit at David Livingstone School would warrant the establishment of a permanent one-chair clinic in this area. In August of this year a permanent dental clinic was established at King Edward School, with accommodation available for a two-chair clinic. A request for Federal Health Grant aid in equipping the King Edward Clinic was refused.

Dental Treatment

Residence, economic status, age and grade are considered in determining eligibility for free dental treatment. Applicants must be residents of the City of Winnipeg, medically indigent or in receipt of Public Welfare from the City. Dental emergencies (relief of pain and infection) are given priority and includes all children (no economic barrier) up to and including the age of sixteen years. The present comprehensive treatment group (orthodontics excluded) includes indigent pre-school, kindergarten, and Grade I children. Dental treatment is extended to a large group of children through the periodic recall service for co-operative patients in order to utilize the benefits gained through regular maintenance care. This has resulted in increasing the number of child patients attending the clinics. The Dental program utilizes the present treatment resources to the fullest.

During the year 3,663 children were treated in the course of 10,720 patient visits to the clinics. 2,395 (65%) of these children were completed to the extent of the facilities available at the clinic. In addition 1,991 children were recalled, of whom 723 were completed on their first visit. Failed appointments are a concern of the division and precautions are taken to eliminate many of the causative factors. 177 or 4.6% of the children failed to keep their initial appointment and 63 or 3.0% of those children recalled. Indifferent attitude and reluctance of people in general to take advantage of available health facilities free or otherwise accounts for the majority of failed appointments. The advantage of having dental treatment clinics located in the schools is that a replacement can be quickly obtained from within the School to fill Farente oncontent to other pression children to the altrice for densal supervision. The binted Statement is established on a trial basis a Well-Baby Cilpin Computation Service to dependent the value of tuch a service.

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The Division (maintes one full-fine director, three full-time demplace, sight part-pine dempisite, six doubal assistance (including a registered practical nurse and three clarks. The total denviat establishment allows for the equivalent of pix [al]-fine doutists.

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2 Chairs - 136 Flien Street 2 Chairs - Williem Wayte School 1 Chair - Ring Koward School 1 Schire - serving Korquay, David Livingstone and a school for retarded chiloren.

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the allotted time reducing lost time to a minimum.

Handicapped Children

The study began in 1960 of a group of mentally retarded children attending a special school in the City was continued in 1962. Semi mobile and portable dental equipment was moved into the nurses room during the brief stay. Forty-three children received dental treatment, an increase of eight over the past year when the clinic visited the school.

Comments of the staff dentists attending the school were similar to earlier observation.

"It was found that the temperament and degree of retardation of each child dictated whether to give the child more affection and attention, whether to be firm, or whether to sedate the child; the majority of the children were manageable by maintaining a firm and friendly command.

With the more placid child, simple Class I restorations were easily accomplished without the use of any anaesthetic. Retarded children cannot be classified into a single group. Each one must be approached separately and treated as a single entity -- as an average normal child.

The rubber dam was used routinely to maintain a dry and accessible field throughout each operative procedure, the children did not mind having the dam applied. It should be used whenever possible as it allows the operator to procede at a much smoother and faster rate, with the resulting decrease of tension in the operation.

The degree of co-operation of all children was good. This can be attributed in part to the fact that the operatory was in familiar surroundings and was visible to the children whenever they passed by; they took an interest in what was happening inside and most of them wanted to know when it was going to be their turn. When a child was brought to the operatory he received more affection and attention than he normally did that day, a good feeling for the child as most retarded children crave attention and affection, the reward was a more co-operative child.

Ninety-five (95) per cent of the children had a very poor oral hygiene. The regular mid-morning and mid-afternoon snacks of milk and biscuits, in addition to poor oral hygiene habits enhanced the condition. The children cannot be blamed, the fault lies directly with the home and the school. The sweet snack should be cut out directly, and oral hygiene training campaign started with both the home and school co-operating."

The provision for dental treatment for mentally and physically handicapped children in the City (and Province) is most unsatisfactory. Neglect, misunderstanding, lack of facilities and trained dental personnel, finances, results in these children remaining as silent sufferers. the allotted time: reduters (last : 1 lancedes that is

andicepood Children

Theready obgan in 1950 fills goup of sentally considered and idea attending a spettal echoel (anther Cicyman continued in 1962. 'Said wolde and persable detril quippant van swadt inco the moreas rook driven the brief atoy. Torrythinger children rechted fental transmit, an increase of sight over the past year when the direct vide stated theoreboot.

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"It was found that been temperament and degree of ratardation of said shild distated theaher to give blassild more affection and attention, whether to be firm, or thether to sedate the child; and on jority of the children were anagoable by minestalogic firm and friendly command.

The rubber dam wesused rottinely to seterate a dyprominecessible field throughout each operative procedure, the culter of not mind boving the damappiled. The should be used shnever possible as it hidrer the operator to procede at a min-seocher and faster rate, within the resulting decrease of teactentianishield operation:

The degree of co-peratiion of all children.was godd. Whisten be attributed in particle the fact that who operatorywasiin familiar surroundbase and sen visible to the abliftenveloesweer they passed by: they took an interact in what was approxing facide and most of that wasted to interact in what was approxing their torn. When a bill was brought to the persecretieshirt torn. When a bill was brought to the persecretiethey, a good faciling for the child as not retarded attrict dey, a good faciling for the child as not retarded attricted the child. A sector of the the share as a sector of the there attention and iffettion, the retarded at the sector of the sector of the sector of the sector of the sector of the sector of the sector of the sector of the sector.

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Adult Dental Services

Dentistry for indigent adults is on a very limited and costly scale. Provision is made to cover the cost of repairs and making of dentures for the medically indigent in the City. This group includes Public Welfare, Nursing Home, some old age pensioners as well as the low income group. No preventive, interceptive or restorative dentistry is available. The outpatient departments of the major hospitals provide an emergency treatment coverage which is confined mostly to oral surgery.

Summary

The Dental Division plays an active part in the School Health Services by contributing toward the dental health of each school child in the Winnipeg School System.

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the Uentel Division plays an Betive Part in the School Health bileices up SCHEFTBURING countd the descal master of SSCH school on Health the UPRASSes School System. TABLE I

Classroom dental inspection information compiled by the City of Winnipeg Health Department on the general child population attending Kindergarten, Grade I and Grade II in Winnipeg Permanent, and Deciduous Dentition. School Division No. 1.

					-	IIania	TO ARET	LEICEILAKE OF CITTULEI				
School	Total Exam.	Car Imm.	Caries m. Free	Dentist compltd. C	aries	Ext.	Filled	Attend	Applied Dentistry	Request Assist.	Approved Interest	Nil Interest
Z 1959-60	3322	14	23		11	15	27		37		10	12
19-0961	3026	18	34	16	99	13	23	47	36	12	11	11
1961-62	2816	26	39	13	19	10	28	45	34	14	12	12
1959-60	4381	9	16	10	84	28	40	62	57	25	21	8
1960-61	4686	6	25	16	75	27	40	64	55	21	20	8
स्तु 1961-62	4601	12	31	19	69	23	43	64	52	23	20	6
H 1959-60	4054	3	12	6 .	33	43	49		70			
19-0961	3916	9	25	19	75	39	53		70	7		
1961-62	3819	1	28	21	72	37	55		72			

Definition of Terms - Caries immune (natural or acquired) - no visible evidence of caries - permanent or

deciduous teeth - x-rays not used

- Caries free includes caries immune plus children whose dentistry has been completed by a dentist.
- Dentist completed children who attended a dentist and were in optimum dental health at time of school inspection
- Caries, Premature extraction, filled percentage of children with these conditions
- some who may have regular dental examinations. Grade 2 questionnaire not used. parent on questionnaire regardless of evidence. Does not include caries immuned - Attend Dentist - as indicated by presence of extraction, or fillings or reported by
 - Applied Dentistry as indicated by the presence of a filling or premature extraction or both.
- Request Assistance written request for financial support for dental treatment
 - Approved Screened by School Nurse for eligibility
- Nil interest Questionnaires not returned by parent.

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TABLE II

Summary of Dental Treatment Groups (Number of children) 1962

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r	-	~	-	

					AGE				
Amodontia - Decidence Te	Pre- School	5	6	7	8	9	10	01der	Total
A. Patients notified of Appointments	295	417	683	580	495	325	279	741	3345
B. Failed Initial Appointments	20	23	50	20	23	7	8	26	177
C. Patients Completed	215	258	439	515	415	250	191	382	2715
D. Patients recalled 6-8 months	115	136	326	411	351	232	177	306	2054
E. Completed 1st Visit	38	38	103	151	138	88	57	105	723
F. Failed Appt.	4	6	10	9	14	8	3	9	63

Table II - Definition of Terms

- A. Patients notified of appointments the number of patients applying and accepted for dental treatment.
- B. Failed initial appointment patients assigned to dental clinics for treatment following school inspections and approved by the school nurse.
- C. Patients completed children from Section A receiving comprehensive dental treatment as provided by the clinics. Also a proportion of Section E.
- D. Patients recalled (6-8 months) following last appointment when completed (1961-62)
- E. Recalls completed on first appointment includes children whose maintenance care is attended to during the recall examination appointment.
- F. Patients failed recall appointment patients from D, who were contacted and failed to appear for scheduled appointment.

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Stadary of Dentel Trestment Groups (Number af children) 1963

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Table - Nefinition of Torms

- Patients notified of appointeents the number of patients applying, and Secepted For dental creatment.
- Failed initial appointment rations assigned to dental ellate for treatment following school inspections and approved by the school nurse.
- Patients comfleted children from Seltion A rectiving comprehensive dental treatheat as provided by the Siteics. Also, aproportion of Section 8.
 - D. Patience recalled'(6*3 month) -- following last appointment when completed (1961-62)
- . Récalla completéd'on first appointment Saciudos childrenwences affitibles care is attended to durgag the recall exactestion appointpent.
 - 7. Patients falled recall appoint out patients from 0, who were contacted and failed to appear for acheduled appointment.

TABLE III

Analysis of Dental Clinic Services provided by City of Winnipeg Health Department to School Division No. 1, 1962.

X-rays (single films)	÷
Exodontia - Deciduous Teeth	2
- Permanent Teeth	5
Anaesthetic (local)	5
Restorations - Amalgam - single surface	7
- multi surface	3
- Plastic or synthetic porcelain	+
- Cement linings	3
- Treatment fillings)
Crowns celluloid)
stainless steel	2
Space Maintainers	2
Prosthetic Applicances	5
Endodontics - teeth completed	+
Prophylaxis	5
Topical Fluoride - Complete	3
Other treatments	3
Refused (non co-operative) 42	2
Cancelled Appointments	,
*Failed Appointments	3
Referred to Private Dentists	,
Recalls (6-8 months)	+
School Inspection Clinics	
	5
* Includes 177 failures of new patients to attend the clinics for	
dental examination & diagnosis.	

TABLE III

Analysis of Dental Glinic Services provided by City of Winnipeg Health Department to School Division No. 1, 1952.

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dental examination & diagnosis.

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TABLE IV

City of Winnipeg Health Department

Dental Services for children attending a Winnipeg Retarded Children's School. 1962

School Dental Inspec	tions - Day Centre Boys - Girls-	31	43
Day Centre Children	under Dental Super-	vision	25
Clinical Services			
1	1960 patients 24 1961 patients 43 1962 patients 44		
No. of children with	dental caries		29
No. of children with	restorations prio	r to 1962 clinic	34
Extractions - decide - perman	oous teeth hent teeth		11 00
Amalgam fillings - s - r	single surface multiple surface		53 9
Silicates			6
Cavity linings			63
Prophylaxis			27
Total patients treat	ted (one emergency)		45
Total patients sitt	ings '		89
Total patients compl with facilities av		st appointment	40
Total number of sess	sions (3 hour)		16

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City of Winnipeg Health Department

Dental Services for children attending a Winnipeg Retarded Children's School. 1962

> Sobool Dental Inspections - Day Centre (Adult) Boys - 31 Girls- 12

Day Congre Children under Dentel Supervision

Nacional Secondes

Examinanticos 1960 parionta 26 1961 parienta 40 1962 partenta 44

No. of children with dental caries

No. of children with restorations prior to 1942 clinic

Extractions - deciduous testh

Amalgam-filikaga - single surface

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Total patients treated (one energency)

Total patients situines

Total patients completed to date of last appointment with facilities availably

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PUBLIC HEALTH NURSING

PERSONNEL

In 1962 the staff of the Nursing Division was strengthened by one additional nurse bringing the total authorized establishment to 58 nurses. Of these 58 nurses, 48 are field staff serving a population of 256,029 people and giving a ratio of one field nurse to approximately 5,334 people.

There were 10 resignations of nursing staff in 1962. Marriage and home duties were responsible for most of the resignations. Six nurses were granted leave of absence to complete University courses in public health nursing.

During the year 10 new appointments were made to the nursing staff and six nurses were reinstated after a year's leave of absence.

In March 1962 the Central Office of the Nursing Division was transferred to temporary quarters at 136 Ellen Street until the completion of the new City Hall. The North Winnipeg Nursing Office was transferred in July from Strathcona School to bright spacious renovated quarters in King Edward School, Selkirk and Arlington Street.

EDUCATIONAL PROGRAM FOR STAFF

A nursing supervisor attended a three-weeks course in Epidemiology of Communicable Diseases at the Communicable Disease Centre in Atlanta, Georgia.

In February 1962 the nursing staff shared a two-day institute with members of the medical and teaching professions when "Problems of Early Childhood" were discussed. The guest speakers were Dr. Lytt Gardner of Syracuse, New York; Dr. Reynold Jensen of Minneapolis, and Dr. M.F. Grapko of Toronto.

Forty-three members of the Nursing Division spent one week at the new Manitoba Rehabilitation Hospital where they were oriented to the policies and services of this new community health facility.

The orientation program for new nursing staff followed the same general plan carried out in past years. In 1962 a member of the medical staff and the Director of Dental Services assisted in this program by explaining the roles of the school medical and dental services.

STUDENT PROGRAM

Educational programs for nursing students in the University of Manitoba, and hospital schools of nursing, and fourth year medical students were provided as usual. In addition, 46 staff members of the St. Boniface Hospital spent two days in 1962 observing the activities of our public health nurses.

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PERSONNEL

In:1982 the Starf Street of Comparing Division was attengtheners by one additional neuroputinging the Street Start Street and the second street of Start Street Str

There were 10 tearf Midfitted of purchas staff in 1962. "Marriage and home duties were meanwhilted for Wie for the resignations. Sig aurage wave granted have of atteance to coldifiete University courses in public health nursing.

Suring the year 10 and 30001mements were made to the pursing staff and six murses veve teinst346d after a year's leave of absence.

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The orientstion program for new muising staff followed the same general plan carried out to past years. In 1952 a member of the medical staff and the Director of Dental Services assisted in this program by explaining the roles of the school wedical and dental services.

STUDENT PROGRAM

Requational prograds for nursing stodents in the University of Manitoba, and hospital schools of nursing, and fourth year addical students ware provided as usual. In addition, 45 staff members of the St. Bosiface i Repital spent two deys in 1962 observing the activities of our public health nurses.

SERVICES

Since its inception twenty-one years ago, the Nursing Division has offered a family centered program to the Winnipeg consumers. The comprehensive services provided include pre-natal and post-natal health, infant and pre-school health, immunizations, communicable disease control, and adult health. In carrying out these services, the nurses are keenly aware that good health involves not only the absence of disease and infirmities but also physical, mental and social well-being. Because of the large number of activities involved in each service, only a few highlights will be mentioned in this report.

MATERNAL HYGIENE SERVICE

There was an attendance of 3,301 expectant mothers at the nine weekly pre-natal classes in 1962. Each mother attended on the average 8.5 sessions. In addition, public health nurses made 5,600 post-natal visits.

In 1962 the Winnipeg School Board's Evening Institute Administrator was approached regarding the possibility of arranging expectant parents' classes at the Evening Institute. This request met with a favourable response and it is expected these classes will be offered under the joint auspices of the School Board and the Health Department in 1963.

INFANT AND PRE-SCHOOL SERVICES

Public Health Nurses made 28,212 home visits to infants and pre-school children in 1962. In addition there were 16,040 visits of infants and pre-school children to the nine weekly Child Health Centres.

The decision to revert to a former organizational pattern of conducting immunizations and consultations on the same day in Child Health Centres has resulted not only in an increased attendance but has proved more acceptable to parents and staff.

In October 1962 arrangements were made to have a City Dentist spend one afternoon a month in four Child Health Centres to advise mothers on dental care. It is hoped that this additional service will be an incentive to mothers to bring pre-school children regularly to the Child Health Centres. A further effort to increase attendance at Child Health Centres was carried out in October 1962, when the nurses made 1132 home visits to 807 public recipient families with pre-school children to determine whether they were receiving regular well child supervision and immunization. One hundred and eighty-two of these families could not be located after two visits. Of the 625 families located, there were 1177 pre-school children. Eight hundred and forty of these children were not receiving regular well child supervision, and 295 had received no immunizations although the records indicated that public health nurses had made frequent visits to these families for this purpose. The details of this report will be discussed with the Public Welfare Department in the New Year in the hope that this situation might be alleviated.

SERVICES

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SCHOOL HEALTH SERVICES

Approximately 54,000 Winnipeg children in elementary and secondary grades in public and parochial schools are served by 43 field nurses. This gives an average caseload of 1,125 school children per nurse. School health services continue to absorb over fifty percent of the nursing time. In 1962 approximately 30,000 pupils were treated and counselled by public health nurses. Nurses screened more than 10,000 pupils for medical examinations. There were 14,391 home visits made to school children by nurses and over 2000 parents interviewed at school.

COMMUNICABLE DISEASE CONTROL

In order to maintain a high level of immunity amongst school children, an annual check is made on the immunization status of new registrants in Winnipeg schools. In 1962 approximately two percent of the children entering Winnipeg schools had no primary innoculations. Arrangements were made by the nurses to have these children inoculated either privately or by the Health Department. In addition, reinforcing doses of triad vaccine (diphtheria, tetanus and poliomyelitis) was offered to children in Grade 1, Grade IV and Grade VIII, and a smallpox revaccination was offered to Grade I and Grade VIII pupils. In spite of the high level of immunity amongst Winnipeg school children, diphtheria is still present. In 1962 eight cases were reported in Winnipeg, of which two cases were school children.

Winnipeg citizens have been well protected against poliomyelitis. In addition to the Salk inoculation programs offered to children and young adults, 206,377 Winnipeg citizens representing <u>81%</u> of the population received Sabin oral poliomyelitis vaccine during the week of April 29, 1962. Public Health Nurses assisted in the planning and operation of this mass inoculation program, which was carried out in all Winnipeg Schools, 23 public clinics, 15 hospitals or medical institutions, 18 business establishments who employed nurses, and 9 Child Health Centres.

NURSING AND BOARDING CARE HOMES

Acting on instructions from the Minister of Health, no new applications to operate Nursing or Boarding Care Homes were accepted by the City of Winnipeg in 1962.

During the year 651 people were referred for placement in Nursing and Boarding Care Homes. After a thorough assessment by the Winnipeg Health Department medical staff, 339 of the 651 people referred were placed in Nursing and Boarding Care Homes as public recipient patients. Of the 312 people who were not placed, 43 made private arrangements for care, 34 were referred to St. Boniface Sanatorium or Municipal Hospitals for the Aged or chronically ill, 33 were sent to hospitals for acutely ill, or died before placement, 32 were referred for alternate care and 161 refused placement or failed to return the medical application.

The recreation program organized in 1961 for physically and mentally able patients in 8 Nursing Homes was discontinued in 1962, when the Provincial Government withdrew financial assistance.

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NURSING AND BOARDING CARE HOPES

Acting on instructions from the Minister of Health, no new applications to operate Nursing or Boarding Care Homes vere accepted by the City of Winnipeg in 1952.

During the year 531 people were referred for placement in Hursing and Boording Care Homes. After a thorough assessment by the Winnipeg Health Department medical staff, 339 of the 531 people referred were placed in Surging and Boarding Care Homes as public recipient partents. Of the 312 people who were not placed, 43 made private arrangements for care, 34 were referred to St. Boniface Sanatorium or Municipal Hospitals for the Aged or chronically 111, 33 were sent to hospitals for acutely 111, or died bafore placement, 32 were referred for alternate care and 161 refused placement or failed to return the medical application.

The recreation program organized in 1961 for physically and mentally able patients in 8 Nursing Homes was discontinued in 1962, when the Provincial Government withdrew financial assistance. In August 1962 the Health Department received official notification from the Provincial Government that in January 1963 Nursing and Boarding Care Homes program would be transferred to the Provincial Health and Welfare Department, and become part of a newly organized Care Service Branch.

DAY NURSERIES AND NURSERY SCHOOLS

In 1962 five day nurseries and seventeen nursery schools with an enrollment of 476 children were licensed by the City of Winnipeg.

The Health Department efforts to establish a training program for nursery school teachers as a means of improving standards materialized in 1962. A four-day institute was organized by the Department of University Extension and Adult Education with the financial support of the Winnipeg Section of the National Council of Jewish Women of Canada. The guest speaker at this Institute was Dr. Karl Bernhardt, Director of the Institute of Child Study of the University of Toronto. Two well-known paediatricians and three qualified nursery school educators assisted with the program.

In November 1962 the University Extension and Adult Education Department arranged a series of sixteen weekly lectures given by Professor Dorothy Keith of the University of Manitoba to teachers actively engaged in pre-school education under the authority of the Welfare Institutions By-law of the City of Winnipeg Health Department. On the completion of this pilot course, further discussion will take place with the University in regard to the setting up of a credit course in pre-school education.

ACKNOWLEDGEMENT

The enthusiasm and cooperation of all members of the Nursing Division and their willingness to participate in programs and committees outside their working day, in the interest of better community health, is acknowledged and appreciated by the Director of the Nursing Division.

I. Grade VII and Grade X Medical Questionnaires - have emplied the School bedical Service to conseperate on these school children who are having problems, and these have been seen and interviewed by the school physicien. In ore than half the cases now one parent has been present at the interview, and this improves the value of these interviews tremendously.

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SCHOOL MEDICAL SERVICES

The trend to reduce routine medical examinations in the school to an absolute minimum has continued during the year. Only those children entering school who have not been examined by their family physicians in the preceding year are now examined by school physicians. The advantage of such an arrangement has been reviewed in previous reports. Regular screening procedures have served to make possible early detection of a variety of handicapping conditions, some of which are correctable once they are diagnosed, and all of which require continuing medical care, if the child is to achieve a successful school life.

The following screening procedures are carried out regularly:

1. <u>Hearing Defects</u> - More than 1500 children have had audiometry testing at the kindergarten level. It is hoped in the near future that all children, before entering public school, will have had audiometry performed so that any defects may be picked up early, and corrective measures taken if they are indicated. All children in Grade IV have hearing tests performed. Children who are referred by the school principal or teacher to the public health nurse at any period in their school life, also have audiometry done if requested. Many of the hearing defects found are transitory in nature, and do not interfere with the child's schooling at all. Others are more serious and require continuing medical supervision, and the School Medical Service along with the public health nurse makes sure that this supervision is available to every school child with a hearing defect. The Child Guidance Clinic is informed of any organic hearing defect so that they can make any necessary recommendations in regard to special seating, or special classes for children in this category. Co-operation with the private physician has been excellent.

2. <u>Vision</u> - Annual vision testing, using the Snellen Chart is carried out, and this has resulted in very satisfactory detection of visual defects with referral to their private physician, or to the School Vision Clinic, at the Children's Hospital. It is interesting to note that by Grade X 1 in 3 children in the Winnipeg school system wears glasses. Most of the vision defects are picked up for the first time by this annual screening method.

3. <u>Grade VII and Grade X Medical Questionnaires</u> - have enabled the School Medical Service to concentrate on those school children who are having problems, and these have been seen and interviewed by the school physician. In more than half the cases now one parent has been present at the interview, and this improves the value of these interviews tremendously.

4. <u>The School Physician</u> - sees any child, referred by the school principal or teacher to the public health nurse, because of absenteeism or suspicion of ill health.

The Handicap Registry is maintained at the City Health Department with the co-operation of a secretary furnished by a National-Provincial Health Grant. This enables us to keep a close check on more than 600 children in the Public School System, who have a variety of handicaps including epilepsy, diabetes, heart disease, hearing and vision defects, and musculo-skeletal defects. It is emphasized again that many of these children, perhaps most, suffer no interference with their education because of these handicaps, but the

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A regular review of all children who are on restricted ectivity in the schools is made. As a result of close liaison with the family physician many of these children are restored to full physical activity, as soon as their physical condition permits. Increasing emphasis on physical fitness programs has led to closer co-operation with Mr. K. Vidruk, Director of Physical Education, and his staff, and the report of this aspect of school health will be forthcoming next year.

The Consultant in Child Care Services is working on a plan for a comprehensive pre-school examination form, which when completed by the family physician, will serve as an excellent review of a child's health status before entering school, and would ensure that immunization programs are up to date. Provision by medical insuring agencies to include an annual health examination in their coverage have already increased the number of children who are examined by their own physician prior to school, and it is hoped that the further development of a special Pre-School examination to include all the various areas that are important in successful school attendance will improve matters still further.

Four regular meetings were held with school physicians, and various problems were discussed that arise from time to time in the carrying out of this part of the program. We are fortunate in having a group of school physicians who are dedicated to their work, and have now been with the Department for several years. This increasing experience and positive motivation has led to an increased interest in the health of the school child, and to a much more satisfactory School Medical Service. The co-operation of the public health nurses and members of the school system has been excellent.

A conference was arranged with representatives of Child Guidance Clinic and Department of Special Education of the Winnipeg School District, to review several children who were under consideration for placement in special classes for the visually handicapped. Their own physicians were also invited and were present.

For three years a program of health education in regard to cigarette smoking among children from Grade V and upwards, has continued with the assistance of Doctor J.B. Morison, now of the Provincial Department of Health. A re-survey is to be conducted in May, 1963, and the results will be made available as soon as they are known. We are convinced that this is an important area of health education.

The continued incidence of hepatitis has led to an effort to improve health education in regard to diseases which are spread as a result of unsatisfactory hygiene. Visits were made to the schools where the incidence was particularly of concern, to ensure that the school children were carrying out instructions about hand washing. In addition, a Bulletin was released to all schools on the measures to be taken to reduce the spread of hepatitis. 一方 44 410 中市管理等者認此實施得到 一方面自身感到感情

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CHILD HEALTH CENTRES

Child Health Centres		10
Child Health Centre	sessions held	463
	Infants 1,059 Pre-school 505	1,564
	ns	17,040
	ns and examinations	2,359
Home visits re child	hygiene (birth registrations, etc.)	28,212
Immunizations by doc	tors at Child Health Centres	13,125

IMPAUNIZATION ATTENDANCE AT CHILD HEALTH CENTRES

	Number	No. of Sessions
St. Lukes	1,314	31
St. Matthews	1,621	12
St. Judes	1,122	12
Sparling	719	25
St. Andrews	1,430	12
Holy Trinity	796	13
Chalmers	328	25
Mount Carmel	829	12
Robertson House	1,628	12
McGregor	1,058	24
	11,345	173

CHILD REALTH CENTRES

	Child Health Cantres
463	Child Health Cantre sessions hald
1,564	New babies admitted l.059 lefants 1.059 Pre-school 505
17,040	Artendance at sessions 8,040 Infants 6,258 Pre-school 5,258 School children and sdulta 2,742
2,359	Noctors' consultations and examinations 1,670 Infants 2,670 Pre-school 239
25,212	itoma visita re child hygiene (birth registrations, etc.)
13,125	Immestations by doctors at Child Health Centres

ATTENDANCE AT CHILD MALTH CENTRES

	2admn4	
		St. Lukes
1.2	1,621	St. Matthews
		St. Judes
		Sparling
		St. Andrews
	796	Boly Tristey
		Chalwers
12	329	Mount Carsel
		Robertson House
24		
	11, 345	

ACCIDENTS IN SCHOOLS REVIEWED

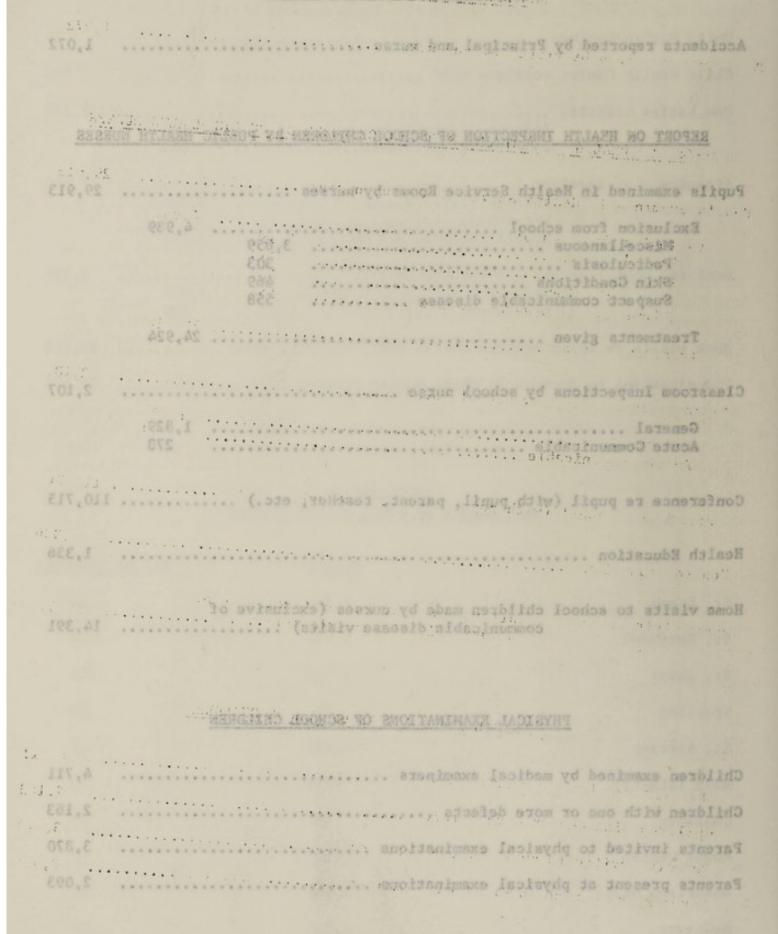
REPORT ON HEALTH INSPECTION OF SCHOOL CHILDREN BY PUBLIC HEALTH NURSES

Pupils examined in Health Service Rooms by nurses	29,913
Exclusion from school 4,939	
Miscellaneous	
Pediculosis	
Suspect communicable disease 558	
Treatments given 24,924	
Classroom Inspections by school nurse	2,107
General 1,829	
Acute Communicable 278	
Conference re pupil (with pupil, parent, teacher, etc.)	110,715
Health Education	1,336
Home visits to school children made by nurses (exclusive of	

PHYSICAL EXAMINATIONS OF SCHOOL CHILDREN

Children examined by medical examiners	4,711
Children with one or more defects	2,163
Parents invited to physical examinations	3,370
Parents present at physical examinations	2,093

ACCIDENTS IN SCHOOLS LIVING



and an and a second sec	ERSONAL SERVICES TO PATIENTS BY PUBLIC HEAD		0551
(including i	home visits and instruction by telephone fr	<u>1961</u>	<u>1962</u>
Health:	Newborn	5,832	5,798
	Under 1 year	7,613	7,032
	Pre-school children	15,242	15,332
	School Children	12,260	14,391
	Adults	14,915	15,179
Prenatal		1,135	1,226
Postnatal		5,490	5,600
Prenatal Class	ses: New Admissions -(1961 - 430) (1962 - 384	4)	
	Total Attendance	3,218	3,301
Morbidity:	Tuberculosis	1,431	1,912
	Acute Communicable	321	423
Unclassified:	Not found	5,504	6,047
	Not taken under care	116	108
	Special activity	1,505	1,301
Visits made f	or poison control prevention	404	430
		74,936	78,630

	CHILDRE	N EXAMINED	FOR FRESH AIR CAMPS	
	~			<u>1961</u> <u>1962</u>
Camp Morton				214 108
Y.W.C.A				283 225
Salvation Army				306 324
C.G.I.T				98 171
Y.M.C.A				138 149
Logan Neighborhood				104 18
United Church				331 479
Lakeside Camp				48 205
Camp Playmore				110 82
Camp Funland				- 304
Camp Tikvah				- 120
Norquay Neighborhoo				- 4
Logan Day Camp				- 21

fet orrige) tett	(factuding home visite and instruction by telephone from Distri- feet
5,798	Health: Newborn 5, 932
5:032	Under 1 year 7.613
15, 332	Prè-school children :
	School Children
	Ådatés iden iden iden i id
1,226	Frankeit
5,800	Postnatal
	Prenatal Classon - (1961 - 430) (1962 - 384)
3,301	Total Actendince
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423	Acuté Comunicable 321
	Unoffassifiedi Not found 5,504
105	Not taken under care
	Special activity 1,503
430	Visita made for poison control provention
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103 235 324 324 171 409 408 408 304 120 304 120	Câmp Marton Seit-C.A. Balvation Atm? C.G.J.T. Y.B.C.B. V.B.C.B. Lateston Atm? Lateston Atm? United Camp Disted Church Camp Riving Camp Riving Camp Riving Comp Rister Comp Sister Sorquey, Set phornood House

CHILDREN'S HOSPITAL - EYE CLINIC REPORT

Clinics held	193
Children examined: New	
Re-examined	
	1,265
Prenatal	
Refractions completed:	
Not needing glasses 190	
Glasses prescribed 566	
No change in prescription 285	
Glasses discontinued 13	
	1,054
Refractions not completed	-
Refractions not needed	30
Returned for observation	154
Children found with 1/3 or less of normal vision with glasses	2
Out-patient consultations (Winnipeg residents)	322
Referred to Orthoptic Clinic	25

AUDIOMETRY REPORT

Children	tested	
	First tests	27
Defects		274
Teachers	and others tested	118

CHIEDREN'S HOSPITAL - EVE CLINIC REPORT

Clinics held	193
Children examined: New	1,265
Refractions completed: Not needing glasses	1,054
Refractions not completed	**
Refractions not needed	30
Returned for observation	254
Children found with 1/3 or less of normal vision with glasses	2
Out-patient comsultations (Winnipeg residents)	322
Referred to Orthoptic Clinic	25

AUDIGHETRY REPORT

9,023	Children tested
	First tests 7,727 Re-tests 1,301
275	Defects
118	Teachers and others tested

VICTORIAN ORDER OF NURSES SERVICES SUMMARY FOR THE YEAR 1962

Total number of new cases 2,142

Nursing Care Visits:

Prenatal	7	
Postnatal	39	
Newborn	381	
Infant	196	
Pre-school	242	
School	274	
Adult	48,335	
Total Nursing Care Visits		49,47

Health Instruction Visits:

Prenatal	64	
Postnatal	375	
Newborn	489	
Infant	860	
Pre-school	212	
School	113	
Adult	101	
Total Health Instruction Visit		2,219

Not Seen	511
On Behalf of patient	28

VICTORIAN ONDER OF MURSES SERVICES SUDDARY FOR THE YEAR 1962

Total number of new cases 2,142

Nursing Caro Visite:

7	Prenatel
	Postatal
	stoken
196	
242	Fre-school
276	\$chool
49,333	Adult
	Total Mursing Care Visits

Health Instruction Visita:

64	Prematel Istanation
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489	Newborn
860	Infant
	Pre-school
118	School
101	Adult
	Total Health Instruction Visit

- 511	 	•••••	 	Not Seen
2.5	 		 of patient	On Behal

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INSPECTIONS BRANCH

Dairy	Principal Inspector	R. Bentham	Cert. R. San. I.
Food	Principal Inspector	R.C. Morrow	D.V.M., C.S.I.(C).
Housing	Principal Inspector	G.W. Kelly	Cert.R.San.,C.S.I.(C).
Sanitation & Hygiene	Principal Inspector	A. Cross	M.R.S.H.,C.S.I.(C).
Laboratory	Technician	N. Dubick	C.S.I.(C).
Chief Health Inspecto	r	E.J. Rigby	D.V.M., B.S.A.,C.S.I.(C).

In March 1962 the Health Department moved into the building formerly occupied by the School Board at 136 Ellen Street. The Inspections Branch and the laboratory occupy the third floor of the building. These temporary offices have proven satisfactory though it was necessary to curtail activities in the laboratory. Arrangements were made to have bacteriological tests of milk and water conducted in a branch of the Provincial Laboratory in the Norquay Building. Resazurin tests on raw milk, some bacteriological tests on water and some diagnostic tests were carried out in the temporary laboratory established at 136 Ellen Street.

Mr. H. Robinson, senior technician in the laboratory retired during the year after more than forty years of service.

Although the incidence of rabies in animals in Manitoba increased during the year, no positive cases were reported in Winnipeg. The By-law requiring the impounding of dogs for a period of fourteen days of dogs that had bitten people was strictly enforced, and arrangements were made to keep biting cats under observation for a two week period in a veterinary hospital. Close attention was given to any cats suspected of transmitting ringworm to children. Such suspected cats were examined by a veterinarian and if found infected with ringworm were either destroyed or isolated while being treated.

DAIRY DIVISION:

During the past few years revolutionary changes have occurred in the production handling, transportation and processing of milk in the Winnipeg milk shed. The number of producers has decreased from a high of over 1,300 to less than 700. At the same time the volume of milk produced has increased to a total of 134 million pounds per year. Transportation of milk has changed from the 8 gallon milk can hauled on trucks to bulk tanks. More than 500 producers had installed bulk tanks by the end of 1962 and the remainder will have converted to bulk tank storage of milk before the middle of 1963.

The quality of raw milk, as determined by the resazurin test, continues to show improvement. Samples of each producers milk are tested twice monthly. 96.9% of these samples graded "good" in the resozurin test and qualified for the bonus paid for good grade milk. Part of the improvement is undoubtedly due to the efficient cooling afforded by bulk tanks. In order to determine whether or not the standard resazurin test is the most suitable test

RESPECTIONS BRANCH

Dairy	Principal Inspe	1 7	R. Sentham	Cert. R. San. I.
Food	Principal Insp	1 7	R.C. Morrow	. (D).I.S.DM.V.@
Housing	Principal Inspi	, ,	G.W. Kelly	Cerc.8.San., C.S.I. (C).
Sanitation & Hygiene	Principal Inspo	. 3	A. Cross	. (0).I.0.0,.E.8.8.H
Laboratory	Technician	6	M. Dubick	0.5.1.(C).
Chief Health Taspecto	з	1	E.J. Rigby	W.V.M., B.S.A., G.S.I.(C).

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All milk and cream sold in Winnipeg is pasteurized and the safety and quality is good. Routine bacteriological and other tests are conducted to ensure that milk and its products meet recognized standards. No reports of illness due to the consumption of milk or milk products were received in 1962. Frequent inspections are made and close supervision exercised over pasteurization plants distributing milk in the City. These plants have installed modern equipment and are using approved methods in the processing and handling of milk and its products.

FOOD DIVISION:

Health By-law No. 4274 was amended in July to require that all meat sold in the City be from animals slaughtered in establishments registered under the Meat Inspection Act (Canada). This amendment made a legal requirement of an already existing condition, as practically all meat sold in the City was from packing plants under Federal supervision. However in view of the reports of the sale of unfit meat in Eastern Canada it was felt desirable to enact the mentioned amendment. The amendment also prohibited the door to door sale of poultry.

The program of reviewing and approving plans for construction or alterations of food premises was continued. During the year 191 plans were reviewed, 81 of which were approved. Plans for the construction of 15 restaurants and major renovations in 73 existing establishments are included in the number approved.

A report of an outbreak of food poisoning involving 150 people was investigated. The food alleged to be responsible for the illness was prepared and served by a caterer located outside the City. All the victims of the outbreak recovered within a day or two and none were seriously ill.

Inspectors attended 40 fires in food premises during the year: 33 of these calls were outside regular working hours. Attending these calls is of value in preventing food damaged by fire, water or chemicals, being sold and also in giving advice to operators as to what steps may be taken to prevent damage to foodstuffs due to lack of refrigeration, exposure to heat, cold or weather conditions.

Cordial relations with operators of food establishments, other government agencies and the public were maintained.

HOUSING:

This division dealt promptly with some 1,400 complaints during the year. About one-third of these complaints had to do with lack of heat during the period from September 1st to May 31st. Although most operators comply with the lack of heat by-law after its provisions have been drawn to their attention, it was necessary to prosecute in five instances. The lack of heat by-law has been of great benefit to many tenants in ensuring that they are supplied with sufficient heat in cold weather. to use in the grading of raw milk, experiments are being conducted in cooperation with the Dairy Husbandry of the University of Magitoba. Sufficient data had not been accumulated at the end of the year to warrant reaching definite cosejusions.

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Overcrowding was remedied for 52 families. Unfortunately suitable alternative accommodation is not readily available for large families and there are many families still living in overcrowded premises. Strict enforcement of regulations respecting overcrowding will not be possible until such time as the necessary alternative low cost accommodation is provided. It is anticipated that Urban Renewal and the providion of subsidized housing will help to alleviate this condition. 31 houses were placarded "Unsanitary". This action was taken only after the owners had failed to comply with notices requiring the premises to be brought up to reasonable standards. Here again the lack of alternative accommodation for large families tend to impede speedy action being taken respecting the placarding of some houses.

During the year we made a request (not yet complied with) that a by-law be enacted that would require improvements or repairs to the exterior of dwellings. Frequently ordered repairs or improvements will be made to the interior of dwellings but no effort made to repair broken verandas, fences, dilapidated sheds or other exterior conditions which adversely affect the appearance of the premises. Dilapidated premises tend to depress the value of neighbouring property and discourage the owners of such property from keeping it in a presentable condition.

We would also like to have a by-law requiring that there be at least one electrical wall plug in every habitable room in existing dwellings. This would tend to improve living conditions and alleviate the hazard of electrical cords strung indiscriminately in living quarters.

House-to-house inspection, particularly in areas where multiple family occupancy is permitted, with strict and diplomatic enforcement of pertinent by-laws and regulations is now recognized to be a necessary adjunct to urban renewal in alleviating the spread of slum conditions. It is an essential part of conservation of satisfactory dwellings and the rehabilitation of those requiring repairs, alterations or additional plumbing. The Health Department, being particularly interested in living conditions is and will continue to play an important role in preventing and alleviating the "blight" of slums.

SANITATION & HYGIENE DIVISION:

This Division of the Inspections Branch is responsible for the routine inspection of factories, workshops, offices and office buildings; swimming pools; wading pools; schools; comfort stations; hairdressing establighments; and premises that require an annual permit from the Medical Health Officer. In addition the Division reports on surface closets for workmen; on noises; on smoke, dust and fumes; on offensive odours; on infestation of insects and rodents; and on the keeping of pigeons and poultry. An Inspector In addition to attending to complaints and routine inspections, the program of house-to-house inspections in areas of the city with many rooming houses was continued. In the house-to-house survey 1.503 houses were inspected, 031 of which eart found for contain one or more violations of the c health by-laws or regulations. 457 of the latter were made to comply with the regulations, 15 were demolished and the remainder had not been re-inspected at the out of the year. Referrals were made to building, electrical and other inspectors where violations of the pertinent by-laws were observed. The tabglated regort of the division lists these referrals in more been re-inspected.

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from this Division collects samples for bacteriological analysis of the water in swimming pools and wading pools; of the treated water in the reservoirs and aqueduct.

Work on air pollution continues. Most of the complaints concerning smoke and fly ash come from premises that have flue fed incinerators. These incinerators were installed years ago previous to the passing of the incinerator by-law that came into effect on January 1st, 1960.

During the latter part of June, instruction was given to the personnel responsible for the proper operation of wading pools. In July and August an inspector assisted in the supervision of the thirty-five wading pools and, during the supervision the inspector ensured that at least once every four days he obtained from each wading pool a sample of the pool water for bacteriological analysis. In all 247 samples were obtained. The results were carefully tabulated and, since the wading pools were modernized in 1960, have been most gratifying. In 1959, before modernization (circulation, filtration and chlorination) the most probably number of coliform organisms was from 460 to 1500 - but now the MPN rarely exceeds 100 with the majority of samples ranging between zero and 50.

In all 5811 inspections and re-inspections were made in factories, workshops and offices. As stated in last year's report the number of complaints regarding unsatisfactory conditions in factories and workshops is dropping. This is the benefit of routine inspections.

Hairdressing establishments, of which there are 406, receive annual inspection plus re-inspections where necessary. The premises must be approved before the annual permit of the Medical Health Officer is issued.

The Division continues its effort in the control of pigeons. During the year 2,947 pigeons were shot. In addition advice was given to home owners and others regarding the prevention of pigeon habitation by the judicious use of screens. In some cases pigeon trap plans were issued with some owners of property having a measure of success with this type of control.

Last March the Inspectors of this Division attended the Twelfth Annual Institute for Sanitary Inspectors. This institute is sponsored by the Department of University Extension and Adult Education, University of Manitoba, in co-operation with the Manitoba Department of Health and the Department of Health and the Department of National Health & Welfare.

The staff of the division includes a principal inspector, one grade III inspector, and seven grade II inspectors. Since September one grade II inspector has been on leave of absence attending the University of Manitoba. During the year the staff made 17,413 inspections and re-inspections and collected 2,796 water samples. The inspectors dealt with 5,604 defects requiring 5,172 notices.

The tabulated reports of the various divisions follow.

E.J. Rigby, D.V.M., Chief Health Inspector. ityoa.bits Diwister cdbleass samples for backevidbyginth analysis of the witer the swimping mode and waiteg opatie; of the tratted water in the reservoirs and aquadors.

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E.J. Rigby, D.V.M., Chief Scalth Inspector.

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HOUSING DIVISION

Primary inspections of dwellings Primary inspections of rooming houses and lodging houses	742 345
Primary inspections of apartment blocks, duplexes, dwellings connected to commercial premises,	
hotels, nursing homes, welfare institutions	292
	7,273
	8,652

Violations of the Health Act Regulations remedied during the year under orders from the Housing Division:

Overcrowding remedied	52	families
Damp or dark cellars vacated	25	cellars
Dark, low-ceilinged attics vacated	3	attics
Additional windows constructed in previously dark attics	35	attics
Bed bugs exterminated	124	buildings
Cockroaches exterminated	33	buildings
Silverfish, lice, clover mites exterminated	21	buildings
Rats exterminated	51	properties
Mice exterminated	68	buildings
Defective cellars repaired	42	buildings
Leaky roofs repaired	53	buildings
Walls, ceilings, floors repaired	251	buildings
Defective eavestroughing repaired or renewed		buildings
Defective heating equipment repaired or renewed		buildings
Fly screens and/or storm sashes provided		buildings
Defective plumbing repaired		buildings
Additional plumbing installed to comply with regulations		buildings
Hot water facilities provided or improved		buildings
Additional heat provided		buildings
Redecorated		buildings
Garbage nuisances corrected		properties
Gas stoves removed from bedroom		buildings
Floor coverings renewed		buildings
Additional electric light provided		buildings
Blinds provided for windows	18	buildings
Filthy or torn mattresses or bedding cleanced, repaired		
or renewed	43	buildings
Filthy or dilapidated furniture cleaned, repaired, or	-	
renewed		buildings
Floors, walls washed		buildings
Miscellaneous defects remedied	150	buildings

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HOUSING DIVISION cont'd.

Notices Issued:	Verbal Warnings						
Complaints attended to:							
	Lack of heat						
Houses placarded	"Unsanitary"						
17 Police Court Summonses issued (9 convictions, 8 withdrawals)							
	Convictions:						
Insufficient heat (5)							
	Total fines (including costs of court)						

Violations of other by-laws discovered by our inspectors and referred in writing to the proper departments for their action:

Electrical inspectors	- hazardous wiring	230 buildings
Fire inspectors	- fire hazards	32 buildings
Building inspectors	- other safety hazards	228 buildings
Zoning inspectors	- zoning violations	7 buildings
Plumbing inspectors	- illegally installed plumbing	12 buildings
Weed inspector		4 properties
Children's Aid Society		1 family
Public Welfare Department	-	11 families
Gas Company	- leaks	2 buildings
NOLLOGI - FEIDIL		21.7

Total referrals in writing

527

The above listed referrals have been given attention by the various civic and metropolitan departments and agencies, and hundreds of hazards to safety have been remedied.

ROUSTRG DIVISION cost'd.

3,581 1,663	Varaiogs	Notices Issued: Verbal Coreal
		Complaints attended for
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16	· · · · · · · · · · · · · · · · · · ·	Houses placarded "Usscali

17 Police Court Summonses issued (9 convictions, 8 withdravela)

Convictitons

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Violettons of other by-lass discovered by out interactors and fafering

but till nue	230	galily cubbissed		Blectrical inspectors
building.		fire bargtds	-10	Fire inspectors
buildings	228	other safety basards		Building inspectors
		zoning vicinitons	35	Zoning inspectors
bulldings.		filesally installed plumbing	-	Plumbing inspactors
preparates			**	Weed inspector
Famil by	I		-	Children's Ald Society
ABAL LOUNE	33		-	Public Welfare Department
buildings	S	leska	*	GAS Company

Total referrals is writing

\$222.

The above listed referrels have been given attention by the various civic and matropolitan departments and spencies, and hundreds of heatrds to safely have been remained.

FOOD DIVISION

	Inspections	Contacts
Abattaina	0	10
Abattoirs	0	12
Bakeries	418	167
Banquet Halls	135	57
Beer Parlors	212	110
Breweries and Bottling Plants	16	30
Candy Manufacturers	42	28
Canteens and Hotel Kitchens	269	113
Caterers	248	82
Cereal Mills	8	19
Cocktail Lounges	298	186
Dance Halls	153	25
Egg and Poultry Wholesale	11	6
Fish-filleting, cold storage, etc	49	47
Frozen Food Locker Plants	19	3
	7	2
Ice Houses and Depots	15	7
Pickle and Vinegar factories		
Poultry Slaughterhouses	48	50
Private Clubs	43	47
Producer's Markets, Vegetable stalls	245	133
Restaurants	4,865	1,250
Retail Food Stores, Grocers, Butchers, etc	3,970	1,133
Sausage Manufacturers	127	115
Wholesale - Groceries & Vegetables	114	23
Fires in Food Premises	34	73
Vehicles	89	11
Vending Machines	403	23
Special Calls	969	368
opecial valle		
Total	12,807	4,125
Complaints 278		
Notices: Verbal 5,558 Samples: Food		. 1,421
Plans Examined 191 Plans Approved		. 81
The branched fitters the subscreek fit		
Condemptions (Destrand in City Insinguator);		
Condemnations (Destroyed in City Incinerator):		
Meat		255 1be
Vegetables		440 lbs.
		20 1bs.
		31 lbs.
Candy		
Cereal		162 lbs.
Baked Goods 344 lbs. Frozen Foods		160 lbs.
Dairy Products1,858 lbs. Sugar		200 lbs.
Canned Goods		30 lbs.

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		Abattoirs
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-57	135	Ranquet Helle
		Peer. Parlors
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	269	Cantoens and HoreisKitchens
182	268	
19	8	Cereal Mills
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		For Rouses and Deport in an anti-
		Rickle and Simoper Feeteries
		Poultry Slaughterbouses
		Frivate Clubs
		Producer's Markata, Vegetable stalls
		Pestaurants
1,133	3.970	Retail. Road Stores, Grocers, Butchers, etc.
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115	. 127	
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		Verifing Machines.
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	Baked Goods
Sugar	Dairy Products
Spices	Cagned Goods Store 135 1bs

DAIRY DIVISION

	INSPECTIONS	CONTACTS
COUNTRY:		
Milk Producers	2,794	542
Prospective Producers	31	8
Bulk Milk Tanks	1,338	
CITY:		
Pasteurization Plants	191	1,964
Ice Cream Manufacturers	321	
Counter Freezers	619	
Butter Plants	176	
Cheese Plants	129	
Milk Trucks inspected	364	
Tanker Trucks inspected	375	
Vehicles - Delivery	76	
SAMPLES:		
Milk Shippers 37,3	350	
Milk Retail 1,5	580	
min opeciat interester	211	
	570	
Ice Cream	758	
Bottles for Sterility	62	
Water	67	
GENERAL:		
	327	
Complaints	13	
	710	
	460	
Permits Issued	20	
Tormites ouncertes interintentienterinterinterinterinterint	108	
	909	
Cans Inspected 2,	267	
Cans Rejected	25	
Tests of Equipment	94	
Swabs of Equipment	10	

BACTERIOLOGICAL LABORATORY

WATER ANALYSIS	Standard Plate Count	303
Carbon manual tree	Presumptive Test	303
	Confirmed Test	94
MILK & CREAM	Standard Plate Count	236
	Babcock Test	202
	Coliform Test	259
	Phosphatase Test	215
	Resazurin Test	39,306
ICE CREAM	Standard Plate Count	29
	Coliform Test	37
MILK BOTTLES	Bacterial Test	5
	Urinalysis	211
	Diphtheria Swabs	1

41,201

			DAIRY DIVISION
CONTROLS	SROLTORASNI		
			COUNTRY:
542	2,79%		Milk Producers sresuborg Alim
8	31		Prospective Producers
	1,338		Bulk Milk Tanks
			CITY:
1.966	101		Pasteurization Plants
	321		tee Gream Manufacturers
	619		Counter Freezeys
	176		Butter Flasts
	129		Cheese Fleats
	354		Milk Trucks inspected
	375		Tanker Trucks inspected
	26		Vehicles - Delivery
			SAMPLES:
		37.350	Milk Shippers
		1,330	Ilistan MIM
		235	
		570	Milk Special
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		62	Ice Orean
		67	Bottles for Starfilty
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		780 J	CROCERAL:
		1,327	Special Calls
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		20	Parmites Issued
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		2,909	Tasparaturas Taken
		2,267	Cans Inspected
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	Standard Flate Count	VATER AMALYCES
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	Standard Flate Coupt	
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39,306	Rescurin Test	
	Stundard Place Count	MAIDE CRAIM
	Collform Test	PARTON NILL
	Urinalysis	
	Diphtheria Swabs	

DIVISION OF SANITATION AND HYGIENE

DIVISION OF SANITATION AND RIGH	Section 1	spections	
Officer Workshops and Easterios		5,811	
Offices, Workshops and Factories Barbershops & Beauty Parlors		675	
barbershops & beauty rariors		075	
LICENSED PREMISES:			
Billiard Parlors	120		
Bowling Alleys	26		
Dog Kennels	1		
Hatcheries and Pet Shops	47		
Junk Yards	123		
Laundries	94		
Massage Parlors	97		
Poultry Keepers	3		
Second-hand Stores	136		
Skating Rinks	2		
Soap Manufacturing	1		
Tanneries and Hide Curing	4		
Undertaking Parlors	19		
	2		
Total Licensed Premises		725	
Plumping: Sector Street Content of Content o			
OTHER INSPECTIONS:			
Air Pollution	108		
Comfort Stations	88		
Garbage and Refuse	2,580		
Lanes, Streets and Lots	4,068		
Outbuildings	55		
Schools	16		
Swimming Pools	538		
Wading Pools	375		
Wells	4		
Workmen's Closets	1,676		
Miscellaneous	597		
Playgrounds	47	10 000	
Total Other Inspections		10,202	
TOTAL NUMBER OF INSPECTIONS			17,413
INTERVIEWS			2,237
ESTIMATED VALUE OF REPAIRS		\$1	1,663.50
WATER SAMPLES		48	2,796
DELIVERIES			1,560
COMPLAINTS			1,100
PROSECUTIONS			6
FINES			\$58.20
NOTICES:		22	
Verbal		4,513	
Letter		214	
Informal		349	
Specification		21	
Mandatory		75	5 170
Total Notices			5,172

DIVISI I OF SANITATION AND RECENT

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5,272			total Noricia

DIVISION OF SANITATION & HYGIENE cont'd.

DEFECTS DISCOVERED AND DEALT WITH:

Cleanliness, Lack of
Covered Waste Receptacles 66 Dampness 5 Drinking Facilities (Water) 6 Garbage and Refuse 1,449 Gas Installations 0 Heating: Lack of 43 Furnaces & Equipment 0 Chimneys, Ducts and Piping 2 Lanes, Streets and Lots 1,704 Lighting: Natural or Artificial 29 Noises 17 Overcrowding 0 Plumbing: Lack of 7 Defective 79 Dirty Fixtures 213 Legible Signs, Lack of 42 No Water Supply 8 No Hot Water 3 Privacy, Lack of 1 Pigeons and Poultry, Illegal 45 Rest Rooms: Lack of 1 Dirty 3 Furnishings 0 Matron, Lack of 0 Rodents: Rats 34 Mice, other 34 Mice, other 34 Mice, other 36 Stapand Towels, Lack of 36 Stap
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Structural Defects: Roofs & Ceilings
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Eavestroughing & R.W.L
Cellars, floors and walls
Screen doors and windows 0
Storm doors and windows 1
Swimming Pools, Wading Pools 23
Ventilation
Vermin
Workmen's Closets
Miscellaneous

Total Defects and Irregularities .

5,604

DIVISION OF SAMITATION & RYGIENE TO BOIRING

DEFECTS DISCOVERED AND DEALE MITHE

1	Bedding and uphoistery
662	Cleaniiness, Laok of
200	Comaon Drinking Gups
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68	Coverad Wasta Receptecles
3	Dampness
5	Drinking Facilities (Water)
1.449	Garbaga and Rafusa
	Gas Installations
	Heating: Lack of
	Puthaces & Equipment
	Chimneys, Ducts and Piping
1:206	Lanes, Strasts and Lots
198	Lighting: Hatural or Artificial
0.1	Notaes
0	Overcrowding
88 11 0	

62	Defective
61	Illegally Installed
19	
213	Birty Fixtures
62	Logible Signs, Lock of
212 42 42 44 45 45	No Mater Supply
2	No Hot Water
af	Frivacy, Lack of
23	Figeons and Foultry, Illegal
1	Reat Rooms: Lack of 10
	Dirty
	Farmightings
	Matton, Back of Boundary
	Rodenta: Rate
11	Wice, other
365	Sanks, Dust, Funes, Odors
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	Tofew innerses
	Structural Defacto: Roofs & Collings
	Eavestroughten & Bawking a Billing .
	Cellars, floors and wells
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28	Swimming Fools, Wading Fools
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28 16 48 48 2 32 28 28 28 28 28 29 3	Versieren er and and a second and a second and a second and a second a seco
343	Workman's Closett
253	Rdscellaneous

Total Defects and Itregularias .

5,60%

CITY HEALTH DEPARTMENT

Summary of Expenditures, 1962 (to nearest dollar)

(a)	Personal Services	•	 •		•	•		\$ 511,490.00
(b)	Outside Services			•		•		79,788.00
(c)	Materials, Supplies and Repairs		 •		•	•		39,103.00
(d)	Equipment, Additions and Replacements					•		3,659.00
(e)	Fuel, Water, Light and Power				•	•		11.00
(f)	Other Expenses			•			•	1,156.00
(g)	Automobile Expenses							15,817.00
	Total							\$ 701,024.00

Expenditures by Branches 1962 (To nearest dollar)

		Total	Personal	Other
C1-1	Administration and Statistics	\$ 33,946.00	\$ 30,908.00	\$ 3,033.00
C1-2	Communicable & Other Diseases	126,192.00	29,430.00	96,712.00
C1-3	Inspection Services & Laboratory	132,226.00	119,074.00	13,152.00
C1-4	Child Medical Services	32,030.00	4,551.00	27,479.00
C1-5	Child Dental Services	83,441.00	52.697.00	35,744.00
C1-6	Public Health Nursing	259,694.00	247,558.00	12,136.00
C1-7	National Health Grants (City's Share)	28,495.00	27,222.00	1,273.00
		\$701,024.00	\$511,490.00	\$189,534.00

Cost Per Capita \$ 2.74

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City of Utaning	Recoverable Under National Health Grants	Assistance to Health Services - Nursing Total	Assistance to Health Services - Inspections	Registry of Handicapped Children	Service		Personal Services Outside Services Materials, Supplies and Repairs Equipment Additions & Replacements Automobile Expense Total	Pro
	Grants	22,002.00 \$100,277.00	74,360.00	^{id} \$ 3,915.00	Total	Expenditures by Projects, (to nearest dollar)	ements	<u>CITY HEALTH DEPARTMEN</u> <u>jects Under National Hea</u> <u>Summary of Expenditures</u> (to nearest dollar)
	\$71,782.00	<u>15,368.00</u> \$66,233.00	47,131.00	\$ 3,734.00	Recoverable National Ha	ditures by Projects, 1962 (to nearest dollar)	\$ 93,455.00 1,072.00 1,324.00 33.00 4,333.00 \$100,277.00	119
	32.00	445.00 \$ 5,549.00	\$ 5,104.00	•	Recoverable Under National Health Grants Personal Other	52		1 Grants 62 Total
\$ 28		5,759.00 \$27,222.00	\$21,463.00		Cost to City of Winnipeg Personal Oth		\$ 66,233.00 995.00 166.00 - 4,333.00 \$ 71,782.00	Receivable Under N.H.G.
\$78.495.00		430.00 \$ 1,273.00	662.00	\$ 131.00	peg Other		\$27,222.00 77.00 1,158.00 33.00 - \$28,495.00	City's Share

Cost to City of Winnipeg

\$28,495.00

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