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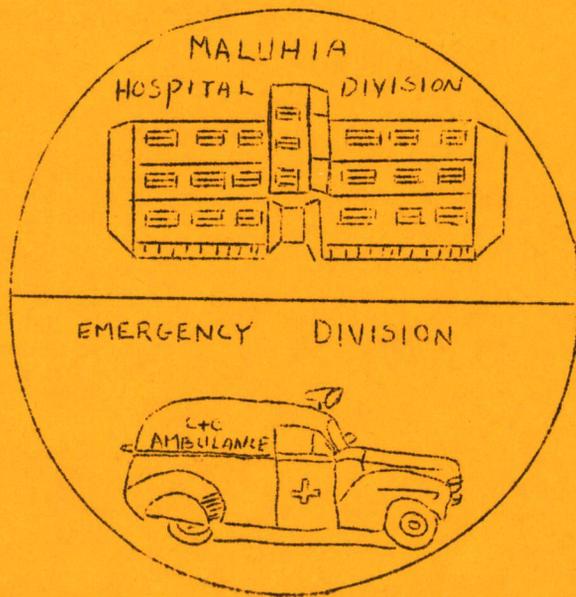
Semi-Annual Report
1961

January 1, 1961 - June 30, 1961

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CITY AND COUNTY OF HONOLULU
DEPARTMENT OF HEALTH
1027 Hala Drive
Honolulu 17, Hawaii
August 23, 1961

Honorable Neal S. Blaisdell
Mayor, City and County of Honolulu
Honolulu, Hawaii

Dear Sir:

Pursuant to the provisions of the Charter of the City and County of Honolulu, I respectfully submit herewith the Semi-annual report of the Department of Health, City and County of Honolulu, covering activities and progress for the period beginning January 1, 1961 and ending June 30, 1961.

There has been much activity during this period under review as much of it was devoted to planning and transferring our Emergency Division to its new quarters at the Pawa Annex of City Hall, yet at the same time every effort was made to continue serving the community faithfully and well.

The department has done much to make the lives of elderly men and women longer, happier, healthier and more satisfying. In this report, I hope to give you a glimpse into the life and spirit of the employees who serve this department and of the contributions they have made for the welfare of those placed in our care as well as our responsibilities to you, the City and County of Honolulu, and its people.

During the period under review, we have enjoyed the cooperation of all branches of government and we are most grateful. We have gained the confidence of the public which means so much towards building and keeping at a high level our morale. Last but not least, we are grateful for your confidence and support throughout the years. I ask for your continued support as we set our sights to greater future accomplishments in the care of the sick and the injured.

Sincerely yours,


DAVID I. KATSUKI, M. D.
City and County Physician

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THE CITY AND COUNTY DEPARTMENT OF HEALTH

The Department of Health, City and County of Honolulu, has a long and noteworthy history. It was originated in 1909 when the Board of Supervisors of the City and County of Honolulu established through Ordinance No. 9 the Office of the City and County Physician. It must be remembered that this occurred only nine years after the Kingdom of Hawaii became a territory. Thereafter, the chronological order of major events affecting the Department seemed to come with anticipated regularity.

The first City and County Physician was Dr. Homer Hayes and some of the responsibilities of his office still being carried out today are the following: (1) to provide medical care to the indigent sick at the expense of the City and County of Honolulu; (2) to provide medical care to any sick or injured prisoner in the Honolulu Jail or in any police station; and (3) to examine all applicants for employment in the Police and Fire Departments and all police officers and firemen who may apply for sick leave.

On April 18, 1911, the position of Police Surgeon was created through Ordinance No. 101. Following the creation of this position, Dr. Emerson was appointed as the first Police Surgeon whose responsibilities included providing medical assistance to the police by conducting medical examinations of persons involved in sex crimes, assault and battery, and to conduct sobriety tests for those few motorists involved in drunk driving. The Police Surgeon was also required to perform many other duties in line with police functions.

On May 2, 1916, the Board of Supervisors found it necessary to abolish the position of Police Surgeon and established the first Emergency Hospital. This was followed by the creation of the position of Emergency Hospital Physician, to which was assigned

the duties and responsibilities formerly performed by the Police Surgeon. It is interesting to note that the Emergency Hospital was placed under the jurisdiction and control of the Sheriff's Office and was responsible for the treatment of persons injured by accidents, violence or stricken by sudden illness. The Emergency Hospital Physician was also responsible for the conveyance of patients in the only ambulance owned by the City and County of Honolulu.

On February 4, 1919, through the passage of Ordinance No. 148, the Emergency Hospital and the Emergency Hospital Physician were placed under the City and County Physician, who was to "superintend the use of the City ambulance giving precedence to emergency and public cases". It was not until 1931 that the Emergency Ambulance and First Aid Services was firmly established in the City and County of Honolulu. Since then, this service has grown in size and stature so that today it has gained not only the recognition but also the respect of the general public as being the first place to call whenever emergency first aid and/or emergency ambulance services are needed. The department also assumed the additional responsibility of providing medical care to all industrially injured employees of the City and County government.

Also in 1931, the Board of Supervisors established a Home for Indigent Invalids, located on Young Street. A few years later, this home was moved to the present site at lower Alewa. In 1939, the name of the Indigent Home was changed to the Maluhia Convalescent Home through Resolution No. 241.

Available records also indicate that mental commitments were processed through the City and County Emergency Unit since the early 1930's and are still being carried on as part of the department's functions. At the same time, the department had been providing indigent burial services for an even longer period.

On December 12, 1946, Committee Report No. 2626 was adopted by the Board of Supervisors and which called for an annual physical examination of all operators of City and County motor vehicles. Two weeks later, Committee Report No. 2754, providing for the compulsory annual physical examination of all firemen was adopted. It is to be noted that the compulsory annual physical examinations for police officers had been in effect since 1932. Then in 1950 the Territorial Legislature passed a law allowing free choice of physician and in the case of the employees of the city government, the City and County Department of Health provided initial and/or complete medical care to those who preferred such treatment.

In 1949, a new three story hospital building was erected on the grounds of the Maluhia Convalescent Home resulting in an increase in bed capacity from 165 to 265.

In 1950, Act 129 was passed in the Territorial Legislature which delegated the responsibility of administering the Medical Care Program for the indigents as well as medical indigents to the counties, whereas the counties, heretofore, were responsible for only the medical indigents.

In 1955, Dr. David I. Katsuki was appointed City and County Physician by Mayor Blaisdell succeeding Dr. T. M. Mossman. Under his administration, the Out-patient Clinical Services were expanded at the Central Emergency Unit located at Miller and Punchbowl Streets and the Maluhia Hospital was utilized as a convalescent and post-operative care unit to reduce the cost of medical care.

In 1956, after a careful survey of the standards of services and facilities of Maluhia Hospital was made by the Territorial Division of Hospitals and Medical Care, it was officially recognized as a Chronic Disease Hospital, not only by the Territorial Board of Health, but also by the United States Surgeon General.

On May 1, 1958, the Central Emergency Unit, which for many

years was located at one corner of the Queen's Hospital grounds, was moved to the Maluhia Hospital. This marked the first time in the history of the department that all divisions operated under one roof. This experience proved to be extremely valuable in that the employees of the two divisions were drawn closer together, thus developing a unity of purpose and better understanding of the functions of each organizational unit and the role that each played in relation to the department as a whole.

With the rapid growth of the City and County of Honolulu, throughout and since World War II, greater demands for services to the public were made upon the City and County Department of Health. It has found it necessary to expand its first aid and ambulance services so that today it operates six first aid and ambulance service units and subsidizes three other units from hospitals serving the rural areas as follows:

1. Central Unit - Honolulu
2. Maluhia Unit - Honolulu
3. Wailupe Unit - Honolulu
4. Kaneohe Unit
5. Kailua Unit
6. Waianae Unit
7. Kahuku Hospital
8. Leeward Oahu Hospital
9. Wahiawa Hospital

As of August 1, 1961 another Emergency Unit located in Waimanalo, Oahu will be in full operation.

In January of 1961, the Department of Health acquired the services of Mr. William G. Among, who for twenty years had been the administrator of the State's Division of Training Schools. As the new Executive Officer of the Department of Health and Business Administrator of the Maluhia Hospital, one of his first duties was to set up an organizational chart that is not only functional but practical as well. This has been completed. Mr. Among will also be responsible for composing a Manual of Procedures for all sections of the Department of Health. The target date for the completion of this manual is January 1, 1962.

On February 18, 1961, upon completion of the Pawaa Annex, City Hall, the Emergency Division was moved to its new quarters located at 1455 South Beretania Street so that by February 20, 1961, it was in full operation. The offices of Dr. David I. Katsuki, City and County Physician, and Dr. Raymond Hiroshige, Assistant City and County Physician, were also moved to the new quarters.

The transfer of the headquarters resulted in several changes, particularly in the Emergency Division. The Waikiki Unit, which had been serving the Waikiki, Diamond Head and Kapahulu areas, was moved to the Maluhia Hospital to serve the area north of the Nuuanu Avenue, including Palama, Kalihi, Moanalua, Alewa and Nuuanu. The Pawaa Annex with its complement of two ambulances, services the downtown, Ala Moana, Manoa, Makiki, Moiliili, Diamond Head, Waikiki, Kahala, Kapahulu and Kaimuki areas.

Through passage of Act 128, by the State Legislature of 1961, the Medical Care Program which had been administered by the City and County Department of Health was transferred to the State Department of Social Services. This transfer will be effected on July 1, 1961; however, its impact on the City and County Department of Health was immediately felt. The responsibility of providing medical care to the needy which it had assumed since 1909 will be relinquished with the exception of the Maluhia Hospital and providing medical care to others not affected by the transfer of this program. Obviously, much adjustment and implementation will have to be made as a result of this change.

In addition to the transfer of the program to the State Department of Social Services, six employees in our Medical Social Service Section will also be transferred. The Out-patient Clinic which has functioned for many years in our Emergency Division will be closed effective July 1, 1961. Act 128 will bring to a close a chapter in the history of the Department of Health.

In April, 1961, instructions relating to plans for centralization of fiscal and personnel functions in the City and County government were received. Six employees were affected and as a result one of them has already been transferred to the Department of Civil Service, with the remaining five to be transferred to the Department of Finance as soon as office space is made available.

With the loss of the Medical Care Program to the State Department of Social Services and the transfer of a number of our employees within the department, it became necessary for the administration to take a hard and long look at our two major divisions of the department. Although there were some misgivings about giving up the spacious new quarters at the Pawa Annex, City Hall, it was decided after a careful study and evaluation of our departmental aims and functions, to unite once more under one roof the Emergency and Maluhia Divisions; the key organizational units of the City and County Department of Health. All employees will thus work in unity and under centralized operations. We feel that we have now reached a common road leading to a single destination -- service to the people of the City and County of Honolulu.

MALUHIA HOSPITAL DIVISION

The Maluhia Hospital for the chronically-ill is located in the Kapalama District on approximately four acres of land. It is the only hospital in the City and County of Honolulu especially planned for the care and treatment of the aged persons afflicted with long term chronic illnesses and of those requiring post-operative and sub-acute medical convalescence.

Maluhia Hospital for many years has been the "catch-all" for patients afflicted with every conceivable disease associated with the aged. Records show that many of these were long term bed-care patients whose condition changed either through advanced years, normal wear and tear or through the effects of disease. Some of these have not been able to function as individuals. Still others were not able to meet the essential emotional and physical demands required of them in order that they may participate in social, vocational and other normal activities.

Throughout the years, the chief interest of the hospital has been to keep the aged healthy by prolonging life through added years. Recently, rehabilitation has been the keynote of all its programs.

As early as 1958, the first positive step towards setting up a true rehabilitative program for the aged at the Maluhia Hospital was taken. Through Mr. Eric Crabbe, physio-therapist, a real program of assisting patients to help themselves was started. Recently, through the guidance and assistance of Dr. R. F. Shepard, Director of the Rehabilitation Center of Hawaii, the tempo of this program was accelerated and several lecture-demonstration sessions were held. The Rehabilitation Team from the Center also assisted the Maluhia Hospital staff in this important program. As of this writing, the Maluhia Hospital team is undergoing intensive training instituted under the "Rehabilitation of the Chronically-Ill in General

Hospitals-Nursing Homes" program of the Division of Vocational Rehabilitation (Rehabilitation Center of Hawaii).

One of the main objectives of the Rehabilitation program is to assist the chronically ill and severely disabled adults over the age of twenty-one to develop and improve to the maximum potential, their abilities so that they can become self-sufficient in their daily living. The patient is first referred for this program by the hospital staff. They are evaluated by the Rehabilitation Team composed of the project coordinator, psychiatrist, vocational rehabilitation counselor, consultants in nursing, physical and occupational therapists and others. When found rehabilitable, the patient is accepted and scheduled for intensive care at the Rehabilitation Center of Hawaii at no cost to the individual. Some of our patients at Maluhia Hospital have already been evaluated and treated by this Rehabilitation Team at the Rehabilitation Center of Hawaii.

The other objective of this program is to extend rehabilitation techniques into hospitals and/or institutions caring for the chronically-ill with aim of developing hospital care programs based on the rehabilitation team approach. This is done by teaching the hospital staff details of rehabilitation techniques. Under this plan, the patient is evaluated and if found to be suitable for certain rehabilitation techniques that could be applied within the hospital, is treated by the hospital's own rehabilitation team but under the guidance of the staff of the Rehabilitation Center of Hawaii. This is where Maluhia Hospital will fit into the present rehabilitation program. However, it is our desire to continue to pursue and utilize these techniques and skills within the hospital to the end that rehabilitation will become an integral part of our entire treatment program for the chronically ill.

Maluhia is probably the first hospital to complete this training course for its employees and we are proud of this accomplishment.

This "first team" will form the nucleus to train other employees and eventually to form other "teams" within our own hospital.

The key to the success of this new program is teamwork--from the lowest hospital orderly to the top medical officer. There must also be the closest coordination and integration of all organizational units of the hospital so that there is no working at cross purposes and all of our energies must be mobilized to work for the rehabilitation of the PATIENT. Our organization must function as does an amphibious operation in which, physicians, physical therapists, occupational therapists, nurses, social workers and all others must work together as a team in order to successfully accomplish its mission.

The program also calls for the personal attention that must be given patients by the hospital staff, particularly nursing, which means returning to nursing in its finest meaning. It must be remembered that rehabilitation does not mean pushing the chronically-ill or disabled into industry. It merely means helping patients to make maximum use of their physical and mental capacities in order to help them re-learn to feed themselves, to dress themselves, to get out of bed, to move from bed to wheel chair, to walk if possible and to gain a desire to return to independent living.

Since 1950, the number of aged persons in Hawaii has increased 42.8 percent. The advance tables from the United States Bureau of Census indicated that in 1960 there were slightly over 29,000 persons who were over 65 years of age or older, in Hawaii; the greater portion residing on the island of Oahu. This means that there will be more and more older persons for whom institutional facilities and care will be required. Under this program, Maluhia Hospital has its job cut out for itself and since greater emphasis is being placed on government participation in the care of the aged and chronically-ill, both on a national and local level, the future for our "senior citizens" looks extremely bright.

As a chronic disease or geriatrics hospital, Maluhia will continue to fill a most important need over and above that provided by nursing homes. It is also in a most advantageous position to make a major contribution towards the care and treatment of the aged, disabled and chronically ill. This lies in its staff which not only is competent but also dedicated to its patients and to the community which it serves loyally and faithfully.

During the six months under review, the general environment which the Maluhia Hospital has operated has been materially altered due to the several factors beyond its control. These included the following:

1. Early in January, 1961 plans for the transfer of patients from Maluhia Hospital to the Leahi Hospital were consummated and by March 16, 1961, a total of 86 patients had been transferred without incident. As a result of this transfer, two old, dilapidated wooden structures on the Maluhia Hospital grounds were razed and surplus personnel utilized in other areas of the hospital. The patient census has remained at a low of 135 to a high of 164 instead of over 235 as in the past.
2. Also in February, a survey team from the Management Director's office conducted a manpower survey of the Department of Health and upon completion recommended several changes, some of which have already been carried out.
3. In April 1961, plans for centralization of fiscal and personnel functions were made known to all departments by the Managing Director's office. As a result of these plans, at least six positions from the Department of Health will be affected and will be transferred.
4. During the legislative session of 1961, Act 128 calling for the transfer of the Medical Care Program from the counties,

including the City and County of Honolulu, to the State Department of Social Services became a reality on July 1, 1961. Through this Act, the department lost the services via transfer, of at least six (6) employees. This Act has also affected the Maluhia Hospital Division in that the in-flow of patients has been at a virtual standstill.

The activities of Maluhia Hospital are provided in the following statistics:

Maluhia Hospital provided medical and hospital care for 645 persons during the six months period for a total of 28,993 patient days with an admission of 469; discharges of 428; expirations of 94. Occupancy rate was 92% for this six month period. Our physical therapist provided 3,908 treatments to 296 persons. 3,010 occupational therapy treatments were given to 245 patients. Meals served numbered 97,589 at an average raw food cost of \$.2453 per meal and an average total cost of \$.7011 per meal. The laboratory performed 6,106 laboratory procedures and took 857 x-rays and electrocardiograms. The laundry processed 223,432 lbs. of materials. The sewing room mended 13,093 pieces of clothing and fabricated 1,907 pieces.

Maluhia Hospital is as fine an institution for the care of our aged and infirm senior citizens as will be found anywhere. Admission to it has been on the basis of need without regard to personal or political considerations and it operates with a staff of approximately 160 employees, all of whom are dedicated to their work and interested not only in prolonging life through added years but also in perpetuating lives with alert senses and in bodies as free as possible from disease, disability and pain.

In this era of new developments in medical techniques and social philosophies, and rapid changes in concept of care for the aged and chronically ill and of patient service, the role, purposes and functions of hospitals like Maluhia must necessarily change. For only by recognizing, accepting and planning for these changes can we ever hope to effect any degree of success in the treatment of the aged and chronically ill. If we want to meet the need of our community in this area, then Maluhia must keep pace with the times.

EMERGENCY SERVICES DIVISION

As pointed out in this report, there are two major divisions in the Department of Health of the City and County of Honolulu. The first, of course, is the Maluhia Hospital Division, which we have already covered. The second and equally important, is the Emergency Services Division with its extremely diversified activities and functions.

It is responsible for the following functions:

1. Provides emergency first aid treatment to persons involved and injured in accidents, affrays, suicide attempts, insect bites and many others; and to those who become suddenly ill
2. Provides emergency ambulance service to the general public free of charge
3. Evaluates and provides proper emergency care and referral, or to provide treatment and cure, if desired, to industrially injured City employees
4. Examines and presents findings in sex violation cases
5. Conducts sobriety tests and presents findings of the condition of vehicular operators suspected of driving under the influence of liquor, particularly of those involved in traffic accidents
6. Commits persons who are mentally ill
7. Evaluates and/or commits drug addicts and alcoholics, in cooperation with other governmental departments and community agencies
8. Provides medical examinations of persons placed in the Police Cellblock as well as the periodic examinations of inmates of the City and County Jail
9. It is responsible for the annual physical examination of

all City and County motor vehicle operators, police and firemen

10. Performs pre-employment physical examinations for all Civil Service applicants
11. Operates an Out-patient Clinic to provide medical care for those eligible under the Medical Care Program and government pensioners
12. Performs other related functions

In our Emergency Services Division, there are six distinct sections, namely: Medical Services, Emergency Ambulance and First Aid Services, Nursing Services, Laboratory and X-ray Services, Social Services and one staff unit, the Business Office.

Since May, 1958, the Emergency Services Division headquarters was located at the Maluhia Hospital until construction was completed at the former Sears Building of its new quarters.

The Emergency Division Staff welcomed 1961 with anticipation of a bright future in new quarters at the Pawaa Annex of City Hall. There was a feeling of urgency throughout January as the staff prepared for the move to its new home. Employees and supervisors enthusiastically volunteered their services to help with the usual cleaning, packing, loading and unloading work connected with moving. New furniture and equipment were selected after much discussion and "shopping" around. The staff voluntarily reported for duty on Saturday, February 18, 1961 and completed the move to its new quarters at the Pawaa Annex and by February 20, 1961 it was in full operation and maintaining services as usual.

At the same time, the Waikiki Unit, which was stationed at the Waikiki Fire Station, was moved to the Maluhia Hospital site to serve the area north of Nuuanu Avenue including Palama, Kalihi, Moanalua, and Alewa. The Pawaa Annex Unit with its complement of

two ambulances now services the downtown, Ala Moana, Manoa, Makiki, Moiliili, Diamond Head, Waikiki, Kapahulu, Kaimuki and Kahala areas.

At the close of the 1961 Legislative Session, it was evident that the administration of the Medical Care Program was to be transferred to the State Department of Social Services with the passage of SB 141 (Act 128). The transfer will be effective July 1, 1961.

With the transfer of the program, it will be unnecessary for the City to maintain an Out-patient Clinic at the Emergency Division, and consequently the Out-patient Clinic will be closed effective July 1, 1961 after providing medical care to the needy for approximately 30 years. Between June 16, 1961 and June 30, 1961, all outpatients and affected agencies were notified of this change.

With the passage of Act 128, three Medical Social Workers, including the Social Service Division Administrator, and three clerks will be transferred to the State Department of Social Services, effective July 1, 1961. The question of possible transfer of the dental staff is still pending.

The following statistics of the various sections of the Emergency Division cover the period under study:

5,228 ambulance trips

7,554 emergency first aid treatments

811 civil service physical examinations

1,109 annual physical examinations

4,973 out-patient treatments

176 City and County sick leave examinations

910 industrial treatments

3,866 treatments to prisoners in Cell Block at the

City and County Jail, Police Cell Block and at

the Emergency Unit

332 assault and battery cases

120 sex cases

110 drunk driving examinations

6,597 laboratory procedures

1,748 x-rays

19 pronouncement of death calls

Of the 253 industrially injured City and County employees, 26 required hospitalization for a total cost of \$25,541.00. Medical specialist services amounted to \$19,349.00.

Eleven part-time and temporary rural medical officer positions were abolished on January 31, 1961, since it was found that both the City and County medical officers and State Government physicians were performing the same duties. The function of pronouncement of death was put on a per call basis of \$15.00 for day calls and \$25.00 night calls, effective February 1, 1961. There were 19 such calls during February 1, 1961 to June 30, 1961.

Our Social Service Section processed 217 requests for psychiatric and alcoholic assistance, and 110 applications for burial assistance. We paid for 95 burial and 16 cremation services.

Reorganization of the entire City and County Department of Health became inevitable as a result of Act 128 and by the impending transfer of an additional six employees to other City and County Departments under a plan calling for centralization of certain functions within the City and County government.

It was strongly felt that the interest and energies that were formerly put into the Out-patient Clinic by the Physicians and Nurses in the Emergency Division can now be utilized at Maluhia Hospital where in recent months greater emphasis has been placed on a strong rehabilitation program requiring closer medical supervision of patients. It was therefore decided to move the Physicians and Nurses as well as other ancillary services back to the Maluhia Hospital to function under one roof, effective

July 1, 1961. This will enable the City and County Department of Health to perform the necessary services such as pre-employment and annual physicals, examination of mental patients, provide medical services for police cases, industrial injury cases, etc. and at the same time provide 24-hour medical coverage to the in-patients of Maluhia Hospital. Plans are now being made to coordinate the services of the Physicians and Nurses of the Emergency Division with those of Maluhia Hospital and to orient them with its rehabilitation program and other problems so that there will be maximum utilization of available personnel with optimum medical coverage of the in-patients. The department strongly feels that through this change, it can more effectively fulfill the dual purpose of this department to the highest degree.

Plans are also being made to relocate the Maluhia Hospital Emergency Unit at Pawa Annex, City Hall to provide coverage for that area with the Central Emergency Unit at the Maluhia Hospital.

With these changes in mind, the Department looks forward to the coming year with optimism and confidence that its Emergency Division can continue to provide not only better service but economically as well.

MEDICAL CARE PROGRAM

Under the Medical Care Program, the following data are submitted:

Total hospitalization costs for 2,172 persons receiving full assistance amounted to \$540,448.17 for a total of 21,856 patient days at the various general hospitals and at Leahi Hospital. A supplementary appropriation of \$128,000.00 was made to cover the additional cost of 86 patients transferred to Leahi. Of those receiving partial assistance, 45 persons spent a total of 2,639 patient days at a cost of \$23,495.70. Hospital outpatient and other medical services provided 18,117 patients amounted to \$108,819.34. Dental salaries and supplies amounted to \$13,377.05. Total cost of the program amounted to \$686,140.26.

Our two dentists provided 3,001 persons a total of 7,875 dental treatments. The Financial Investigation Division processed 6,937 applications for medical assistance.

On July 1, 1961, Act 128 will go into effect which transfers the entire administration of the Medical Care Program to the State Department of Social Services. Six of our employees in the Financial Investigation Division will be transferred to the State Department of Social Services along with this program. The remaining staff will be absorbed into a single Social Service Section and assigned to the Maluhia Hospital.

Thus, a chapter in the long history of the City and County Department of Health comes to a close on June 30, 1961.

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Annual report.

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1964/65 (3c.), 1965/66 (2c.).