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County of Anglesey



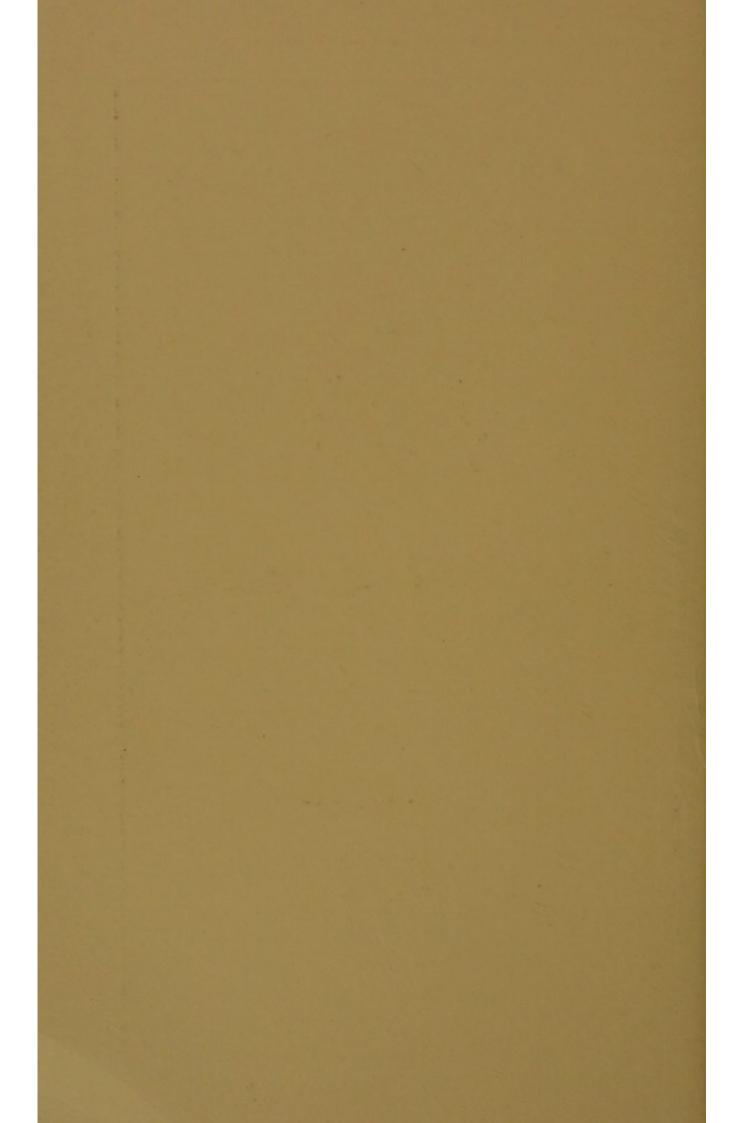
Annual Report

of the

Medical Officer of Health

Principal School Medical Officer

1971



County of Anglesey



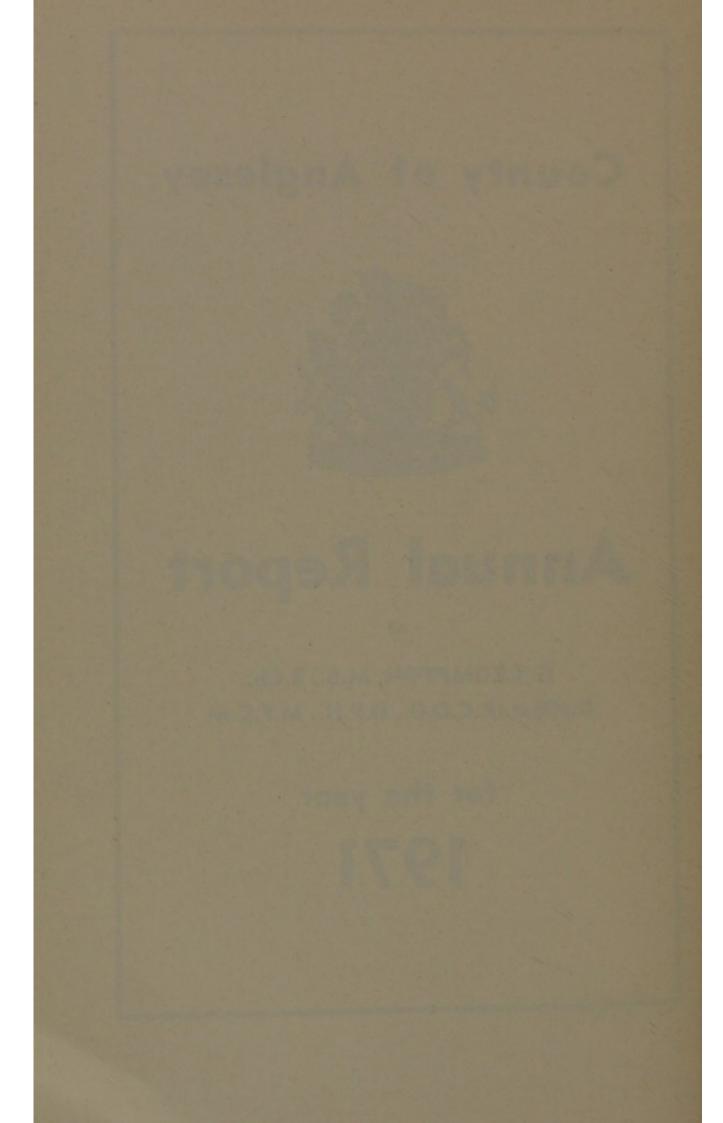
Annual Report

of

G. CROMPTON, M.B., B.Ch., D.(Obst.) R.C.O.G., D.P.H., M.F.C.M.

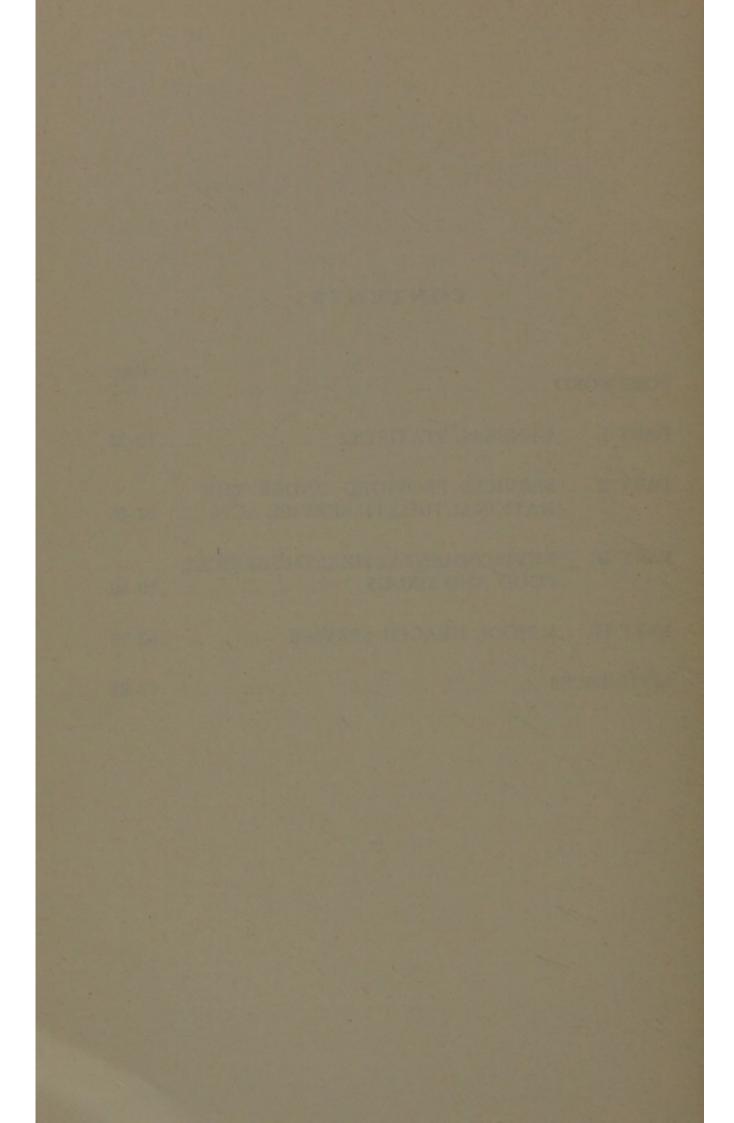
for the year

1971



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To the Members of the Anglesey County Council

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the County Medical Officer and Principal School Medical Officer for the year 1971.

The population of the County continues on its steady upward trend, the mid-June estimate being 60,170 compared with 60,000 in 1970. There were 1,084 live births registered, five more than in the previous year, giving a birth rate of 18·0 per 1,000 population. The birth rate for England and Wales was 16·0 per 1,000 population. Anglesey's mortality rate after standardisation for age and sex was 10·7 per 1,000 population compared with 11·6 for England and Wales.

In retrospect, 1971 proved to be one of the most eventful of recent years. There was a successful disengagement of Welfare Services and of certain other Health Department functions from the previously combined Health and Welfare Department, where the administration had been extremely closely knitted together over the years, to join with the Children's Department to form a new Social Services Department.

I am pleased to record that relationships between our departments have been most excellent at all levels. We in the Health Department, for example, make available through our Ambulance Section, the transport requirements of the Social Services Department and we also provide Chiropody Services within the residential homes for the elderly.

This reorientation of Health and Social Services enabled us to review in depth the health services provided by the Council and during 1971 new policy decisions for improvements in these services were taken by the Council, some of which were implemented during the year but most of which only became fully effective in 1972. The details are recorded in the body of the Report and include, expansion of the nursing establishment with improved management arrangements, total attachment to General Practitioner Group Practices and the employment for the first time of a corps of Nursing Auxiliaries working under the direct supervision of the District Nursing Sisters. School Nursing became a separate speciality.

Appeals to expectant mothers made in previous annual reports and elsewhere for an improved attendance on their medical practitioners or at our clinics for ante-natal care, may be at last showing some effect. Our clinics certainly have lately been extremely busy, so much so, that an additional consulting room has had to be provided by internal rearrangement at the Isgraig Clinic, Llangefni. Even so, the perinatal mortality rate for 1971, I regret to record, is higher than expected, being 30 per 1,000 total births compared with 22 for England and Wales. Also we experienced our first maternal death in seven years.

Members might be interested to note the trend, as shown below, in the use of the Gors Maternity Hospital at Holyhead:—

Year	Total Births
1965	309
1966	285
1967	257
1968	252
1969	191
1970	164
1971	114

During this time the total number of babies delivered in hospitals in the area has risen and in 1971 was as high as 95.3%, there being only 50 domiciliary confinements.

Arrangements were made for the delivery early in 1972 of a Mobile Medical Unit for the provision in rural areas of health services such as, immunisation of infants, health education to nursing mothers, developmental assessments of infants and young children as well as cervical cytology and family planning for adults.

New clinics were started for developmental assessments at Llangefni and Holyhead and a Parents Guidance Clinic at Llangefni where the Consultant Child Psychiatrist advises the parents of handicapped children on management.

Additional members of staff included the appointment of a fourth Dental Officer and a Health Education Officer, both of these officers commencing their duties early in 1972.

By reason of the Government's Infrastructure Building Programme we were able to undertake the building, late in the year, of extensions urgently required at the Dental Clinic at Amlwch, the Health Centre, Beaumaris, and at the Llangefni Ambulance Station.

The Council abolished the charges for chiropody for the elderly and young chronic sick and for the loan of items of sick room equipment. A scheme for a Laundry Service was devised and money voted for a start to be made on 1st April, 1972.

It was in 1971 that Sister Daisy Williams, Miss E. C. Pritchard, Health Visitor, and Ambulanceman R. Owen retired, each having given very long, conscientious and faithful service to the people of Anglesey. I wish them a long and happy retirement.

We were all deeply shocked by the sudden death of Mrs. P. Tetlow, our Health Visitor in the Amlwch area. Her passing is deeply mourned by all who knew her.

I am extremely grateful for the help received from the Anglesey Society for the Welfare of Handicapped Persons, the Anglesey Society for Mentally Handicapped Children, the Marie Curie Memorial Foundation and the National Society for the Prevention of Cruelty to Children during the year.

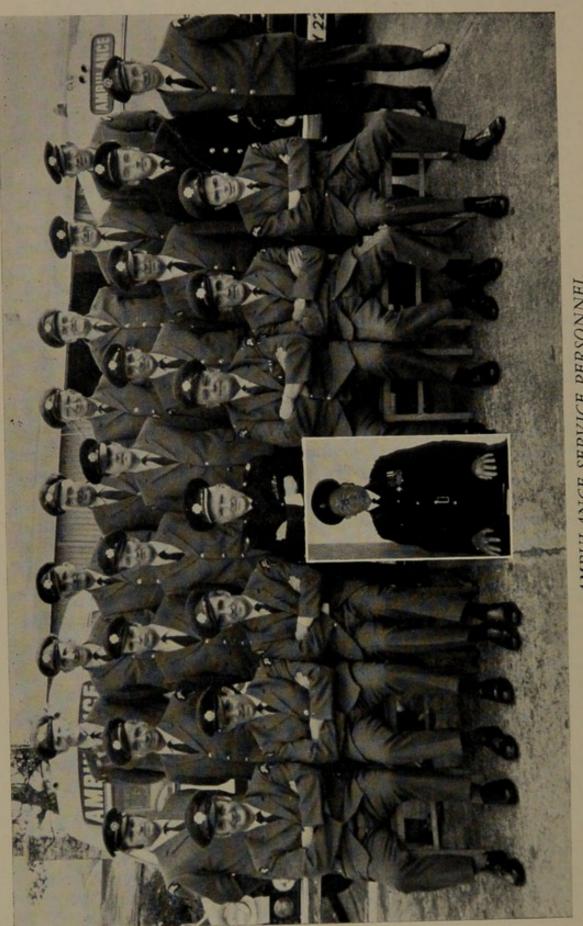
I wish also to acknowledge the kindness and co-operation shown by the other officers of the Council. I am particularly indebted to Mr. Idris Davies, Clerk of the Council, and his department for assistance and advice frequently sought and readily given. The County Water Engineer and Manager (Mr. A. B. Groves) and the Chief Inspector of Consumer Protection (Mr. H. A. Thomas) kindly provided information relating to their departments for inclusion in this Report. I am indebted to the District Medical Officers of Health, the Assistant School Medical Officers, the field and clerical staff for their loyal co-operation, and Mr. B. G. Rhodes, my chief administrative assistant, and Miss E. M. Jones for their help in the compiling of this Report.

I would also like to take this opportunity to thank you, Sir, the Members of the Anglesey County Council and, in particular, the Members of the Health Committee and Education Welfare Committee for the interest and support you have shown at all times in the work of the Department and for your advice and guidance given me.

I am,

Your obedient Servant,
G. CROMPTON,
County Medical Officer,
Principal School Medical Officer.

1st October, 1972.



AMBULANCE SERVICE PERSONNEL

Part I GENERAL STATISTICS

SUMMARY OF VITAL STATISTICS

SUMMARI OF VII.	AL SI	A 1 13 1	103		
Live Births:					
Number					1,084
Rate per 1,000 population					18.0
Illegitimate Live Births					84
Per cent. of total live births					7-7
Stillbirths:					
Number					15
Rate per 1,000 total live and st	illbirths				13.6
Total Live and Still Births					1,099
Infant Deaths (deaths under one year)					23
Infant Mortality Rates:					
Total Infant deaths per 1,000 t	otal live	births			21.2
Legitimate Infant deaths per 1,00	00 legiti	mate liv	e birth	S	22.0
Illegitimate Infant deaths per 1,0	000 illeş	gitimate	live bii	rths	11.9
Neo-natal Mortality Rate (deaths un	der fou	r weeks	per 1.0	000	
total live births)					18.5
Early Neo-natal Mortality Rate (de	aths un	der one	week	per	
1,000 total live births)					16.6
Perinatal Mortality Rate (stillbirths a	nd deat	hs unde	r one w	reek	
combined per 1,000 total live a	and still	births)			30.0
Maternal Mortality:					
Number of deaths					1
Rate per 1,000 total live and st	ill birth	s			0.91
	iii Diittii				
Total deaths:					736
Number 1 000 po					12-2
Crude death rate per 1,000 po	a 1				
POPULATION AND		BLE VA	LUE		
POPULATION AND	CILILIII.		The state of the s		

District	Area in Acres	Population Mid-year Estimate	Rateable Value (1.4.71) £,
Beaumaris Borough Amlwch Urban Holyhead Urban Llangefni Urban Menai Bridge Urban Total Urban Districts Aethwy Rural Twrcelyn Rural Valley Rural Total Rural Districts Total Administrative County	3,135	2,080	76,066
	4,494	3,660	144,116
	730	10,860	273,730
	2,510	3,930	131,033
	824	2,570	91,626
	11,693	23,100	716,571
	52,352	12,080	247,762
	53,865	9,600	227,992
	58,784	15,390	381,492
	165,001	37,070	857,246
	176,694	60,170	1,573,817

Estimated Product of New Penny Rate for County 1971/72 £16,454

METEOROLOGY

Monthly climatological data relating to R.A.F. Establishment, Valley, and supplied by courtesy of the Director General of the Meteorological Office.

Table 2

YEAR 1971	RAINFALL		Sunsh	INE	TEMPERA	Fog	
Month	Mean dly. rainfall mms.	No. of Wet Days	Mean dly. brs. of sunshine	Sunny days	Mean Max. day Tem.	Mean Min. Night Tem.	No, of days fog record- ed
January	2.0	14	1.4	3	47	40	1
February	1.7	9	2.3	6	47	40	2
March	3.0	13	2.9	6	47	38	1
April	1.4	4	5.4	8	54	42	2
May	0.9	8	8.3	16	59	46	5
June	2.3	10	5.1	7	60	50	1
July	1.4	6	8.7	15	67	54	2
August	1.9	11	4.8	8	65	55	
September	1.2	8	6.1	13	66	53	4 5
October	1.6	7	3.5	8	59	51	1
November	3.4	15	1.7	5	51	44	0
December	0.8	6	1.0	1	50	45	2

There were 41 less rainy and 26 more sunny days than in the previous year, but temperatures on the average were the same. There were 2 less foggy days this year, with only one month completely free of fog.

VITAL STATISTICS

Where possible the comparable rates for England and Wales are shown. For the current year these are provisional figures issued by the Registrar General.

The following table shows the statistics for the individual county districts:—

Table 3. AREA, POPULATION, BIRTHS, DEATHS FOR 1971

THE RESERVE AND	4		Population			
District	Area in Acres	Census 1951	Census 1961	Mid-year 1971	Live Births	Deaths
Amlwch	4,494 3,135	2,700 2,128	2,910 1,960	3,660 2,080	54 43	52 25
Holyhead Llangefni	730 2,510	10,569 2,225	10,408 3,209	10,860 3,930	233 84	160 44
Menai Bridge Urban	11,693	1,855	2,337	2,570	451	304
Aethwy	52,352	10,434	10,214	12,080	192	128
Twrcelyn Valley	53,865 58,784	8,569 12,157	7,992 12,670	9,600 15,390	144 297	136 168
Rural	165,001	31,160	30,876	37,070	633	432
Anglesey	176,694	50,637	51,700	60,170	1,084	736

Births

There were 1,084 live births registered during the year, corresponding to a birth rate of 18·0 per 1,000 population.

The trend of the birth rate over the past 10 years can be seen from Table 4, which gives the England and Wales data for comparison.

Table 4. BIRTH RATE PER 1,000 POPULATION

		Anglesey	England and Wales
1962	-	18.3	18.0
1963		18.2	18.2
1964		19.2	18.5
1965		19.3	18.1
1966		19.5	17.7
1967		17.9	17.2
1968		18.7	16.9
1969		18.9	16.3
		18.0	16.0
1970 1971		18.0	16.0

Illegitimate live births accounted for 84 out of the total of 1,084 live births. Expressed as a percentage this is 7.7 per cent. of the total and as a rate is 1.4 per 1,000 population.

The following table shows the trend of the illegitimate birth rate for Anglesey and for England and Wales for the last 10 years.

 ${\it Table~5} \\ {\it ILLEGITIMATE~BIRTH~RATE~PER~1,000~POPULATION}$

	Anglesey	England and Wales
1962	0.7	1.2
1963	0.9	1.2
1964	0.7	1.1
1965	1.1	1.4
1966	1.2	1.4
1967	1.1	1.4
1968	1.2	1.4
1969	1.4	1.4
1970	1.1	1.3
1971	1.4	1.4

Stillbirths

Stillbirths during the year numbered 15 compared with 16 in 1970, which gives a stillbirth rate of 0.25 per thousand population. The corresponding rate for England and Wales was 0.20. To express stillbirths as a rate per 1,000 population is liable to mislead, because if the population is ageing, that fact alone would cause a decline in the rate computed in this way. It is of more interest to know what proportion of developing pregnancies (i.e., pregnancies which advance to the 28th week) have live issue.

Table 6 shows the stillbirth rate per 1,000 (live and still) births for the past 10 years, with the England and Wales figures for comparison.

Table 6
STILLBIRTH RATE PER 1,000 BIRTHS (LIVE AND STILL)

	Anglesey	England and Wales
1962	17	18
1963	 24	17
1964	 17	16
1965	 24	16
1966	 14	15
1967	 13	15
1968	 14	14
1969 .	 11	13
1970	 15	13
1971 .	 14	12

Rate is given to nearest whole number

After six successive years in which the stillbirth rate has been equal to or lower than the national rate, apart from 1970, it is unfortunate that the rate for 1971 at 13.6 is again higher than the national rate.

Infant Mortality

There were 23 deaths of infants under 1 year of age during the year, as compared with 9 in the previous year. This gives an infant mortality rate of 21·2 per 1,000 live births as compared with 8·3 in 1970. The corresponding rate for England and Wales was 17·5 per 1,000 live births. There was 1 death of an illegitimate infant. The infant mortality rate per 1,000 corresponding live births was therefore:

Legitimate: 22-0 Illegitimate: 11-9

The causes of infant deaths are shown in the following table:

Table 7
CAUSES OF INFANT DEATHS 1971

		Total				
Cause	Under 1 day	1–7 days	1-4 weeks	1-3 mths.	3–12 mths.	10,44
Congenital Anomalies	2	2	1	-	-	5
Birth Injury, Difficult Labour, etc.	2	6	-	-	-	8
Other Causes of Perinatal Mortality	2	2	1	-	-	5
Enteritis and Other Diarrhoeal Diseases	_	_	-	-	1	1
Other Endocrine, etc., Diseases	-	-	_	_	1	1
Cerebrovascular Disease	_	-	-	1	-	1
Pneumonia	_	2	-	-	-	2
Totals	6	12	2	1	2	23

Of the 23 infant deaths, 18 occurred within a week of birth. This gives an early neo-natal mortality rate of 16.6 per 1,000 live births. This figure, especially if combined with incidence of stillbirth to give a perinatal mortality rate, gives an index of the hazards of pregnancy and parturition. The perinatal mortality rate for 1971 was 30.0 per 1,000 total live and still births.

The trend of the infant, neo-natal and perinatal mortality rates over the past 10 years can be seen by reference to Table 8.

Table 8 INFANT MORTALITY RATES

	Infant Mortality Rate		Neonatal Mortality Rate*		Perinatal Mortalit Rate	
	Anglesey	Eng. and Wales	Anglesey	Eng. and Wales	Anglesey	Eng. and Wales
1962	23	22	11	15	28	31
1963	16	21	11	14	27	29
1964	24	20	19	14	33	28
1965	25	19	23	13	44	27
1966	18	19	15	13	28	26
1967	20	18	15	13	24	25
1968	16	18	13	12	25	25
1969	20	18	15	12	24	23
1970	8	18	7	12	21	23
1971	21	18	18	12	30	22

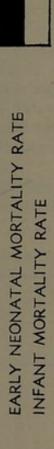
^{*} Deaths under 4 weeks per 1,000 live births Rate is given to nearest whole number

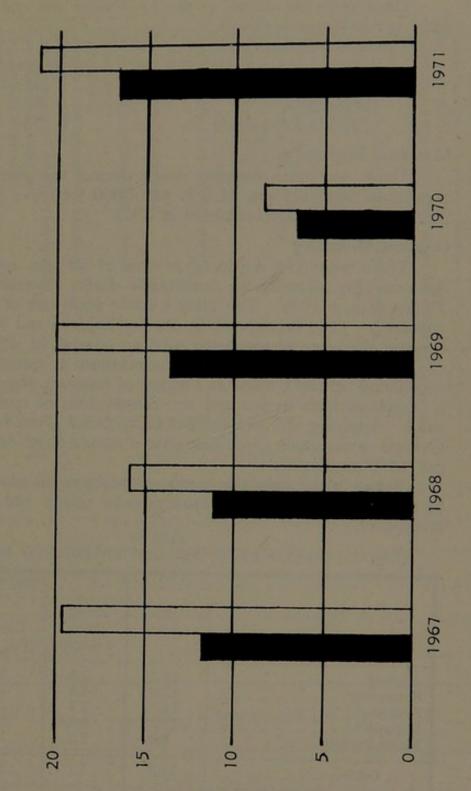
As will be observed from Table 8 the infant mortality, neo-natal mortality, and perinatal mortality rates fluctuate somewhat, the result of dealing statistically with small numbers.

Detailed analysis of Stillbirths and Neo-natal Deaths occurring in 1971

Detail	Still Births	Neo- natal Deaths	Detail	Still Births	Neo- natal Deaths
Totals Males Females Age of Mother: Under 20	15 5 10	20 11 9	Ante-natal complications: Hypertension Oedema Albuminuria A.P.H Rh. Neg. with antibodies	3 3 - 2	3 1 -5
20–24 25–29 30–34 35–39 40+	7 1 1 1 1 1	11 2 3 1	Toxaemia X-ray Multiple Pregnancy	2	$\frac{1}{1}$
III	9 4 2	4 4 9 - 2 1 - 2 6 12 -	Malformations: Anencephaly Hydrocephaly	5 6 2 -	3 3 4 10 —
Domiciliary Not booked Not known Ante-natal Care: G.P. only G.P. and A.N.C. G.P. and Midwife A.N. Clinic only	14 1 1 14	18 2 - - 1 18 - 1	Associated and listed Causes of Death: Resp. Syndrome Cong. abnormalities Birth injury Multiple Pregnancy Gross Prematurity Placenta insufficiency Asphyxia	2 6 1 4 5 9	8 1 1 1 3 2 1

FIVE-YEAR HISTOGRAM SHOWING :-





RATE PER 1,000 LIVE BIRTHS

Child Mortality

There were five deaths in the 1—4 years and one in the 5—14 years age groups respectively.

The causes of death were:

	1—4 years	5—14 years
Pneumonia	1 (M)	_
Leukaemia		1 (M)
All other Accidents	3 (F)	_

Maternal Mortality

There was one maternal death during the year, which gives a maternal mortality rate of 0.91 per 1,000 total live and still births. The last maternal death occurred in 1964.

General Mortality

There were 736 deaths of persons of all ages registered during the year after allowing for transferable deaths (inward and outward), 23 less than in 1970. This gives a crude death rate of 12·2 per 1,000 population. The corresponding rate for England and Wales was 11·6. Because the rates as computed take no account of differences in the age and sex composition of the population in question (hence the appellation "crude"), where as a matter of common experience mortality is correlated both to age and sex, comparisons of crude rates are invalid. Applying the area comparability factor given by the Registrar General to the crude death rate gives a standardized death rate of 10·7 per 1,000 population.

Tables 10-12 show the deaths according to the cause and classified by age at death and certain death rates by county and county districts respectively.

ANNUAL DEATH RATE PER 1,000 ESTIMATED POPULATION

		1	Death rate fo	r
District	All Causes	Respir- atory Diseases	Cancer	Heart Disease
Amlwch Beaumaris Holyhead Llangefni Menai Bridge	14.2 12.0 14.7 11.2 8.9	2.5 1.4 2.1 0.3 1.2	2.5 1.4 2.5 2.5 1.6	5.7 6.3 4.7 3.1 3.1
Urban	13.2	1.7	2.3	4.5
Aethwy	10.6 14.2 10.9	1.1 1.7 1.0	1.7 2.4 2.1	4.2 4.5 3.6
Rural	11.7	1.2	2.0	4.0
Anglesey	12.2	1.4	2.1	4.2

Table 11—CAUSES OF DEATH, 1971

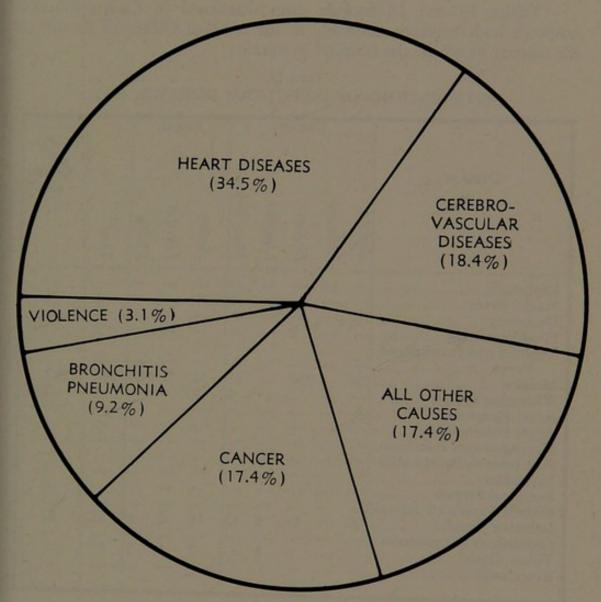
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Expension of the content of the co	0.0.4	Cholera	1	1	1	1	1			1	1	1	1	1	1				1	
The control of the	. 4	Typhoid fever Racillary descritery & amorbiasis	11	11	1	1	1	1	1	1	1	1	1	11				11	11	11
The color of region of the color of the co		Enteritis and other diarrhocal		1	1	1					1	1	1	1	1	1	1	1	1	1
Other cubercooks Other cuber		diseases	-	1	1	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1
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Supplication for the contact and complete		Whooning Cough		1	11			1		1	1	1	1	1	1	1	1	1	1	1
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Waterline Annial Book and Control of State S		scarlet fever	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Number of the second content of the second	2	Acute Poliomorlinie	1	1	1	1	1	1	1.	1	1	1	1	1	1	1	1	1	1	1
Wheteles and other ricketinoses Whiteles	13	Smallpox	1	1	1						11	11	11	11		1	1	1	1-	1
Without and other references Without and other representations Without and without	+	11.	1	1	1	1	1	1	1	1	1	1	1	1		1		1	11	11
Militarian recopium, wender, weaker and paratite feet services and the feet services and feet service	0.4	other	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Adjugnate receptant, baccal car- Adjugnate receptant	10	Surhilis and its securelae	1	1	1	1	1	1	1	1	1	1	1	1	1	1	I	1	1	1
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Malignani recoplani, begins to the fine state of the fine state	9(5)	Malignant neoplasm, larynx	1	1	11			-	0	4	4	11	11	11	11	1 1	11	-	2	3
Miligrant neoplasm, betters Miligrant neoplasm, protester Miligr	9(6)	Malignant neoplasm, lung, bron- chus	1	1	-				-	0	4							1		
Midigrant neoplasm, prostate	(7)6	gnant n	11	11	11	1 1		7 1	-	1	0	11	11	11	-	-	14	-	20	0
Otherwise disease of receival system of the protection of the pr	(8)(8)	Malignant neoplasm, uterus	1	1	1		1	1	1	1	11	1	1	1	11		20	10	7	7
Other malignant scoplasm Other decision of the control of t	(6)	ant	1	1	1.	1	1	1	. 5	3	3	1	1	1	1,	1	1	1	1	1
Parign and unspecified nooperate Parign and plants and majoritied nooperate Parign and majoritied nooperate Parign and majoritied nooperate Parign and majoritied nooperate Parign and Par	9(11)	Other malignant neoplasms	11	11	- 1	1-	1		100	1"	(1	-	1	1	1	-		2	-
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Other diseases of incoming operations of programs of		-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11	4	1.60
Other diseases of blood and Anamus	7	Avitaminoses and other nutri-																	-	,
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Table 12-DEATHS AND STILLBIRTHS CLASSIFIED BY COUNTY DISTRICTS, 19

			B.45 B.45 BE.47 BE.48 BE.49 BE.50	3.46(10) 3.46(11) 3.42	8.41	B.46(9)	B.38	B.37	B.35	B.34	B.33(2)	B.33(1)	B.31	B.46(6)	B.30	B.28	B.27	B 26	B.46(5)	B.46(3)	D ACCO	B.46(2)	B.23	B.22	B.21	B.19(11)	B.19(10)	B 19/9)	B.19(7)	B.19(6)	B.19(4)	B.19(3)	B.19(2)	B 19/1)	B.17	B.16	B 15	B.13	B.12	B.11	B.10	8.00	B.7	B.6(2)	5.4	B.3	B.2		Code
Stillbirths	Infant deaths	Total	and and cle : sell	Diseases of the skin and subcutaneous rissue Diseases of the musculoskeletal system Congenital anomalies Birth injury, difficult labour ere	Other complications of pregnancy, etc.	Other diseases, genito-urinary system	Nephritis and nephrosis	-	Appendicitis	Other diseases of respiratory system	Asthma	Bronchitis and emphysema	Influenza system	Other diseases of circulatory system	Other forms of heart disease	Ischaemic heart disease	Hypertensive disease	Active rheumatic fever	Other diseases of nervous system	orders	organs	Other diseases of blood and blood-forming	Other endocrine, etc., diseases	San	Diabetes mellinis	Other malignant neoplasms	Leukaemia prostate	Malignant neoplasm, uterus	Malignant neoplasm, breast	Malignant neoplasm, larynx	Malignant neoplasm, intestine	Malignant neoplasm, stomach	Malignant neoplasm, buccal cavity, etc.	All other infective and parasitic diseases	Syphilis and its sequelae	Malaria	Measles	Smallpox	Acute Poliomyelitis	Meningococcal infection	Strentococi Cough	Diphtheria		Other tuberculosis	Enteritis and other diarrhocal disc	Bacillary dysentery and amoebiasis	Typhoid fever		Cause
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The main causes of death

A summary of the deaths showing the principal causes is given diagrammatically below.



The Registrar General's codes used for compiling the above diagram were as follows:

Disease	Registrar General's Code
Cancer Heart Diseases	B19(1) to B19(11) B25 to B29
Cerebro-vascular Diseases Bronchitis and Pneumonia Violence	B30 B32. B33(1)
All Other Diseases	BE47 to BE50 B1 to 18, B20 to 24, B31, B33(2), B34 to 45, B46(1-11).

EPIDEMIOLOGY

The notifications of infectious diseases during the year are set out below.

Tables 13 and 14 include cases diagnosed in Caernaryonshire hospitals and therefore notifiable to the Medical Officer of Health of the district in which the hospital is situate.

Table 13 NOTIFICATIONS OF INFECTIOUS DISEASES, 1971

		U	IRBAN	1		Ru	IRAL			No. of children of
DISEASE	Amlwcb	Beaumaris	Holybead	Llangefni	Menai Bridge	Aethny	Turcelyn	Valley	Total	School age
Diphtheria Scarlet Fever Dysentery Food Poisoning Typhoid and Paratyphoid		1111		1111	<u>-</u>	- -	1111	1111		<u>1</u>
Measles		III	230 2 —	11111	27 1		77	162	547 4 —	271 2 —
Meningococcal Infections Post Infec'us Encephalitis Erysipelas Puerperal Pyrexia Malaria (cont'cted abroad) Infective Jaundice					13	_ _ _ _ 11			_ _ _ 52	
Ophthalmia Neonatorum Tuberculosis Brucellosis			5	1 -	111	7	1 -	3	17	=

In Table 14 will be found the trend of notifications over the last

10 years.

With the exception of Measles and Infective Jaundice, the incidence of infectious diseases during the year continued at the low level generally experienced in this County. Cases of Measles were notified throughout the County, except in Beaumaris and Llangefni, the total being 547 and the highest incidence since 1967 when 816 cases were notified. The 52 cases of Infective Jaundice occurred throughout the Island with the exception of Beaumaris.

There were no cases of Poliomyelitis or Diphtheria. This is the 22nd consecutive year in which no confirmed case of Diphtheria has been notified, and the 25th consecutive year in which no death has

occurred from this disease.

DISEASE	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Diphtheria	_	_	-	_	_	_	_			1000
Scarlet Fever	19	24	30	32	12	5	14	40	6	2
Dysentery	10	38	3	16	25		68	25		_
Food Poisoning	1	_	3	19	5	4	11	2	51	2
Typhoid and Para-							-	-		-
typhoid	1	_	-	2	_	1	-	-	-	1
Measles		376	1221	164	762	816	255	141	403	547
Whooping Cough	-	_	54	5	2		12	6	6	4
Pneumonia	2	3	4	1	7	1	1	_	1	_
Ac. Poliomyelitis		_	_	-	_		_		_	
Meningococcal In-										
fections			-	1	-	-	_	_	_	400
Encephalitis	-	_	1	_	_	1	_	_	_	-
Erysipelas		1 3	_	_	_	_	1	_	1	
Puerperal Pyrexia	5	3	4	-	2	4	ī		_	
Malaria*	-	1	-	1	1	1	1			
Tuberculosis		26	36	33	26	10	19	21	23	17
Infective Jaundice	200	-	_	_	_	-	1	6	63	52
Ophthalmia									00	32
Neonatorum	-	-	-	_	-	-	200	1	-	-
Brucellosis	-	-	-	_	_	_	_	1000	1	24

^{*} Contracted abroad

Mortality from infectious diseases during the year is shown in Table 15, together with the trend of mortality over the past 10 years.

Table 15
MORTALITY FROM INFECTIOUS DISEASES, 1962-71 (including certain diseases which are not notifiable)

DISEASE	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Diphtheria	-	_	_	_	_		100			
Scarlet Fever	-	_	-	_	_	_	_			
Typhoid and Para-										
typhoid	-	_	-	-	-	-	-	_	-	
Meningococcal In- fections										
Ac. Enceph.		-	-	-	-	-	-	1	-	-
Ac. Poliomyelitis &		-	-	-	-	-	-	-	-	_
Polioenceph.	1	_		12 100						
Encephalitis	-	-		_				-	-	-
Measles	-	-	1	_	1	_				
Whooping Cough	-	_	_	_	_	_	_	-	100	
Influenza	1	-	1	1	13	4	_	8	12	1
years	2	0								
Puerperal Sepsis	4	2		-	-	-	1	-	_	1
Infective Hepatitis	1		1	1	-	-	-	-	-	-
Dysentery	_	_	_	1		1	-	-	-	-
Tuberculosis	4	5	5	3	3	4	3	3	2	2

Venereal Diseases

Three new cases of syphilis, 22 of gonorrhoea and 81 of other venereal conditions were seen at the Caernarvon and Anglesey Clinic or at St. David's Hospital during the year.

The reported incidence of both gonorrhoea since 1954 and syphilis since 1958 in England and Wales as a whole has been most disturbing. This national trend of an increasing incidence in venereal diseases is now becoming apparent in Anglesey as Table 16 shows.

Table 16

NEW CASES—ANGLESEY

Year	Syphilis	Gonorrhoea	Other Venereal Conditions
1962	8	11	21
1963	9	7	38
1964	8	8	47
1965	4	15	48
	4	17	38
1966	3	13	44
1967	2	10	43
1968	4	8	48
1969	1	13	63
1970	1		81
1971	3	22	01

It is important to note that whereas the education of the public relating to the venereal diseases has tended to stress the excellent results obtained by treatment, there are still existing deficiencies and dangers, particularly from failure of early diagnosis, and the fact that a disease of unknown cause (so-called non-gonococcal or "non-specific" genital infection) is now the commonest of this group of infections and remains highly resistant to treatment. The resistance to treatment of the latter is not generally known by the public at large.

Part II SERVICES PROVIDED UNDER THE NATIONAL HEALTH SERVICE ACTS

HEALTH CENTRES

At the end of the year there still remained only one Health Centre in the County, namely Beaumaris, which was opened in January, 1969. Three years have now elapsed since this Health Centre became operational and it is most gratifying to report that the adaptation of the previous clinic premises has proved to be a most successful and worthwhile venture.

As reported previously, negotiations relating to the provision of a Health Centre in Holyhead re-opened early in 1971, the general measure of agreement being such as to warrant the project proceeding further. Unfortunately, due to the detailed nature of the project it was not possible to obtain the necessary formal approval of the scheme before the end of the year.

I am, however, pleased to report that one week before the final draft of this Report was prepared the County Council reached an agreement on the terms of the tenancy with the Anglesey Executive Council (National Health Service) which also incorporated an agreement with the three group practices of General Medical Practitioners who will be practising from this centre. We hope to be able to receive tenders in the first few weeks of 1973.

VACCINATION AND IMMUNISATION

At the beginning of the year, the Council's proposals under this heading provided for vaccination and immunisation against the following diseases to be made available to the public:—

Whooping Cough, Diphtheria, Tetanus, Poliomyelitis, Measles, Smallpox and Rubella.

B.C.G. vaccination is referred to in the section of this Report dealing with Tuberculosis.

Towards the end of July, however, the Joint Committee on Vaccination and Immunisation advised that vaccination against Small-pox need no longer be recommended as a routine procedure in early childhood. As a result, the recommended protective measures, devised to afford the fullest protection of children was, as from 1st August, 1971, as follows:—

At age 4 months ... 1st Whooping Cough/Diphtheria/Tetanus 1st Oral Poliomyelitis

" 6 months ... 2nd Whooping Cough/Diphtheria/Tetanus 2nd Oral Poliomyelitis

, 10 months ... 3rd Whooping Cough/Diphtheria/Tetanus 3rd Oral Poliomyelitis

12 months ... Measles

At age 5 years or School Entry Oral Poliomyelitis Booster Oral Poliomyelitis Booster Rubella (German Measles)

3 years ... B.C.G.

4 15/16 years or Oral Poliomyelitis Booster Oral Pol

The expectant mother ... A course of Poliomyelitis vaccine

A personal record card, printed bilingually (Welsh and English) setting out this programme, is available for issue to all mothers.

Full details of the number of children immunised during the year

are given in Table 17.

Diphtheria, Whooping Cough and Tetanus Immunisation

Triple antigen (diphtheria/whooping cough/tetanus) continues to be the most popular form of protection against these diseases, and 871 children were immunised with this combined vaccine during the year, compared with 838 in 1970.

In addition, a few other children who did not receive triple antigen were given primary immunisation against these diseases individually, i.e., 53 against tetanus.

"Booster" doses of vaccine were also given to children during the year as follows:

Against Diphtheria, 1,147, and Tetanus, 1,207. Single or combined vaccines were used according to the need.

Poliomyelitis Vaccination

Only Sabin oral vaccine was used during 1971. 1,076 children completed a primary course of vaccination during the year, and 1,162 received a reinforcing dose compared with 920 and 956 respectively in 1970.

Measles Immunisation

During the year 549 children were immunised against measles compared with 624 in 1970. Apart from a reduction in the number of children immunised compared with the previous year, the statistics show that only one third of those children eligible in the one year old age group are being protected against this disease. This disheartening response to measles immunisation in respect of children in the younger age groups is sadly reflected in the 950 cases of measles notified during the years 1970 and 1971.

In order that this distressing disease may be eliminated from the community as was diphtheria, parents are earnestly requested to ensure that their children are protected against measles at the age of twelve months immediately following the completion of the protective measures against diphtheria, whooping cough, tetanus and poliomyelitis.

Rubella Immunisation

As indicated in my previous Report, Rubella (German Measles) Immunisation commenced early in 1971 and although this particular protective measure is primarily available to girls aged 11 years it was recommended in the first instant that immunisation be offered to girls aged 11 to 13 years inclusive. During the year the total number of girls immunised in these age groups was 891, of whom 873 were immunised at school and 18 by General Medical Practitioners. Of those children immunised at school 295 were aged 13 years, 306 aged 12 years, and 272 aged 11 years, thus representing approximately 60% of those eligible.

NUMBER OF CHILDREN PROTECTED (PRIMARY COURSES OF VACCINE) AGAINST THE FOLLOWING DISEASES DURING THE YEAR 1971

Year of Birth	Diph- theria	Whoop- ing Cough	Tetanus	Polio- myelitis	Measles	Rubella
1971	61	61	62	62	8	_
1970	646	646	646	681	321	-
1969	99	99	101	124	128	-
1968	17	17	18	24	31	-
1964-67	36	36	41	129	57	-
1955-63	12	12	56	56	4	891
TOTAL	871	871	924	1,076	549	891
No. of Booster doses given	1,147	_	1,207	1,162	-	-

Based on records actually received by the end of the year, at least 64.4% of children born in 1970 were immunised against Diphtheria and Whooping Cough and 69.0% against Poliomyelitis.

The following table shows the percentages of Anglesey children born in 1969 and immunised by the end of 1971, compared with those of Wales and of England and Wales:—

Table 18

Vaccine	Anglesey	Wales	England and Wales
Whooping Cough	80	77 78 77	78 80 78

Smallpox Vaccination

As indicated previously smallpox vaccination, as a routine procedure in early childhood, was withdrawn from the Immunisation Programme as from 1st August, 1971.

During the year, vaccination records received indicated that 368 children were given primary vaccinations and a further 70 children were re-vaccinated, compared with 493 and 22 respectively in 1970. In addition 42 persons over the age of 15 years were given primary vaccination and 112 were re-vaccinated, compared with 58 and 235 respectively in 1970.

TUBERCULOSIS

17 new notifications of tuberculosis (including two children) were received during the year (15 respiratory and 2 non-respiratory) and 2 deaths were registered. In addition 2 patients suffering from respiratory tuberculosis came to Anglesey from other local authority areas. Hospital admissions in 1971 totalled 14.

During the past few years intensive disease detection drives have continued, leading to a decrease in the pool of undetected cases acting as foci of infection. As a result six less cases of tuberculosis were notified during the year than in 1970 and in general the downward trend over the past few years was continued in 1971.

Pending the appointment of a new Consultant Physician, Dr. J. Glyn Jones continued to undertake the duties of Consultant Chest Physician during the year on a part-time basis.

Care and After Care

Following the reorganisation of the Management Structure of the Nursing Services it is now the routine practice for the Nursing Officer (Health Visiting) to undertake the initial visit to a newly notified case of tuberculosis in order to obtain the environmental history and to arrange for the follow-up examination of contacts. During the year 294 such visits were carried out by Nursing Officers. In addition 629 visits were carried out by Health Visitors to patients suffering from tuberculosis.

At the end of the year there was a total of 174 patients on the Tuberculosis Register and Table 19 gives the distribution of such patients throughout the County:

Table 19

District	No. of Patients on Register at 31.12.71
Amlwch	9
Beaumaris	9
Holyhead	50
Llangefni	14
Menai Bridge	10
Aethwy	30
Twrcelyn	19
Valley	33
Total	174

It is the practice to urge the immediate household and family contacts of a new case to submit to examination by the chest physician. During the year 208 contacts of 19 new cases (including the 2 "inward transfers") were examined in this way.

The number of new cases (whether by notification or otherwise) and the number of contacts examined at the chest clinic were as follows:

	1970	1971
New and transferred cases of tuberculosis:	24	19
Contacts examined:		
Children	81	78
Adults	128	130

Under the Council's scheme for the provision of extra nourishment supplies of milk were given free of charge to 13 patients during the year.

B.C.G. Vaccination of Contacts

In Table 20 is set out the work done during the year in the routine testing and vaccination of young contacts of notified cases of tuberculosis. Since vaccinations commenced in 1949 a total of 3,025 contacts have been vaccinated with B.C.G.

Age Groups	Total Tested	Mui Pund	tiple cture	Vaccinated	Refusal of Test and or vaccination
		+ ve	— ve		vaccination
Newborn Others under 5	1			38	_
years	38	2	36	35	1
5–9 years	15	3	12	12	_
10 years and over	25	9	16	16	-
Totals	78	14	64	101	1

B.C.G. Vaccination of Schoolchildren

As a preliminary to B.C.G. vaccination children aged 13 years are given a multiple puncture tuberculin test. Those who react to this test may do so because they are at the time suffering from the disease or alternatively the positive reaction may be nothing more than the last remaining evidence of an infection with the germ of tuberculosis acquired at some time in the past and long since overcome. A chest X-ray will detect current disease so that it can be treated.

In 1971 B.C.G. vaccination was offered to children attending County Secondary Schools who were eligible in accordance with Welsh

Board of Health Circular 19/64.

Details of the work undertaken during 1971 are as follows:

	1	RES	ULTS		No.	RES	ULTS	
School	No. Skin Tested	Posi- tive	Nega- tive	No. given BCG Vac- cination	re-skin tested (prev- iously given	No. con- verted to posi- tive	No. not con- verted (nega- tive)	No. given Fur- ther BCG Vacc.
Sir Thomas Jones School, Amlwch	141	10	131	131	128	126	2	1
David Hughes Secondary School, Menai Bridge	133	20	113	113	97	95	2	2
Holyhead County Secondary School	214	35	179	179	156	156	_	_
Llangefni County Secondary School	125	11	114	114	152	148	4	2
Ysgol Cefni	1	-	1	1	-	-	_	_
Totals	614	76	538	538	533	525	8	5

It was considered necessary to refer three children with positive skin tests results to the Chest Clinic for further investigation. All three chest X-ray results were satisfactory.

Tuberculin Testing of School Entrants

Since 1957 annual routine testing of primary school children has been carried out. The test used is the Multiple Puncture Test which is applied by the nursing staff. This procedure serves several purposes:

- (a) It facilitates the detection of those children who are likely to be suffering from tuberculosis;
- (b) it assists in assessing the level of infection in the community;
- (c) when repeated annually it indicates when a child "converts" from being tuberculin negative to tuberculin positive and so selects those children needing surveillance;
- (d) the finding of a positive reaction in a young child invariably assists in tracing undiscovered sources of infection in the community.

During the year 5,863 children were given routine M.P. tests in primary schools. Of the 988 children who had never been M.P. tested previously or given B.C.G. vaccination as contacts 2.8% were found to be positive reactors compared with 5.4% of those previously M.P. tested and 13.3% of those given B.C.G. at birth or as contacts before admission to school.

Details of the work undertaken in 1971 are set out in Table 22.

				No. Skin	Res	Results	No.		Results	
Primary School	lood-			Tested (Entrants)	Positive	Negative	Tested	Positive	Positive (BCG prev.)	Negative
Aberffraw CP			***	4	-	4	50	1	1	77
Amlwch CP		****		21	1	20	215	24	23	14/
Beaumaris CP				29	1	29	192	5	22	165
Benliech CP		::	:	17	1	17	92	3	8	65
Bodedern CP			***	20	2	18	115	5	8	102
Boditordd CF				3	1	3	44	1	8	36
Bodorgan CP		::		9	1	9	49	-	12	36
Bryngwran CP			:	9	1	9	57	2	20	23
Brynsiencyn CP			:	18	1	18	129	1 65	101	107
Caergeiliog CP	***	:		70	6	61	139	15	11	113
Carreglefn CP	***	***		2	1	2	20	-	4	15
Cemaes CP			:	6	1	6	99		, ,	2 2
Dwyran CP			::	10	1	10	39	1	,-	37
Gaerwen CP	:		::	13	1	13	82	2	14	99
			:	30	1	30	140	000	18	114
Kingsland CP	* ***		***	19	-	19	84	9	6	69
Llaingoch CP	:			13	1	13	110	3		100
	:			13	-	13	130	9	24	100
		:	:	4	-	4	37		00	29
Llanddeusant CP	:		::	1	1	1	31	2	9	23
Lianddona CF				9	1	9	40	2	4	34
Llandegtan CP			***	21	1	20	87	7	4	76
		****	***	3	1	3	31	- 1		280
Llanedwen VP		:	****	14	2	12	32	-	2	25
Llanerchymedd CP	:	::		9	1	9	74		9	35
Llanfachraeth CP		:	****	8	1	8	46	"	12	3.5
Llanfaethlu CP				4	1	4	17		7	16

Table 22

Table 22-continued

				_							_				=	_												
	Negative	182	31	22	204	31	82	41	75	180	60	195	/6	10	210	9/	*	14	07	103	47	233	202	10	20	1	3.967	
Results	Positive (BCG prev.)	40	CC 4	0.00	27	2	6	15	9	39	22	30	14	00	6	6	18	0	7.	18	7.5	38	0	18	4	3	647	-
	Positive	17	10	+-	9	1	2	1	1	24	12	12	5	7	5	1	8	F	2	6	4	16	1	4	2	-	2004	107
No.	Tested Tested	239	316	280	237	33	87	56	58	249	66	237	92	99	45	87	06	19	32	136	30	309	29	100	42	3		4,875
dts	Negative	47	62	ıc, u	2,5	20	14	7	7	61	14	43	22	6	2	17	35	1	1	25	4	51	4	27	50	18		096
Results	Positive	1	5	1	1	1				0	1-	-	1			1 1	-	. 1	1				.			. 1		28
No.	Skin Tested (Entrants)	47	67	2	w.'	9 %	27	+1	-1	17	45	CI	1 2	30	, ,	17	36	200	1	1 20	67	22	25	+ 10	17	18	10	886
-					:	:	:	:	:	:	:	:	:	:	:	:	:	***	:	:	:		:	:			:	
				: :		:	:		:	-	:	::		:	1			::		:				:				
	chool			: :																						Tywyn		LS
	Primary School	. C	Llantairpwii Cr	Clanfechell CP	Llangaffo VP		400	CP	olus (Menai Bridge CP	Newborough CP	Park CP	Pencarnisiog CP	Pentraeth CP	Penysarn CP	Rhoscolyn CP	Rhosneigr CP	Rhosybol CP	St. Gwenfaen	St. Mary's RC	Talwrn CP	Thomas Ellis VP	Ty Mawr CP	Valley CP	Ysgol Babanod, Y	Ysgol Cefni	TOTALS
1			100	100	-	-		1	9000	600			1															

It was considered necessary to refer only one child with a positive skin test result to the Chest Clinic for further investigation and I am pleased to report that the chest X-ray result was satisfactory.

NURSING SERVICES

In accordance with the Council's resolution in the latter part of 1970 to reorganise the whole of its nursing services during 1971 appropriate action was taken and as from 1st April, 1971, all the nursing staff were attached to General Practitioner Group Practices with the exception of three School Health Visitors and a School Nurse, each of whom were based on a secondary comprehensive school and its catchment of primary schools. In addition eleven Nursing Auxiliaries were appointed to work under the direct supervision of the District Nursing staff, one Part-time Clinical Assistant was appointed and allocated to the School Nursing Staff and the appointment of a Nursing Officer (Home Nursing and Midwifery) in the Autumn completed the establishment of senior nursing staff.

The implementation of the policy to attach nursing staff to Group Practices has really proved worthwhile, especially in the care of elderly patients. The success so far achieved by these new arrangements is entirely due to the mutual co-operation of all concerned and will eventually, I feel sure, benefit all and result in much improved patient care.

HEALTH VISITING

Early in the year the Health Visiting staff was unfortunately depleted due to the sad death of Mrs. P. Tetlow and the prolonged illness of Miss E. C. Pritchard and her subsequent retirement.

The Department was, however, fortunate in recruiting one full-time and one part-time Health Visitor and at the end of the year, there was one Nursing Officer (Health Visiting), eight full-time and one part-time Health Visitors on the staff.

A brief outline of some of the duties undertaken by Health Visitors is given hereunder:

Every infant is tested for Phenylketonuria on the eleventh day and also checked for Congenital Dislocation of the hip. At six months the hearing is tested and during the first five years "milestones" are checked and deviations from normality are referred for appropriate investigation.

Since September, 1971, "Assessment" clinics have been established at Llangefni and Holyhead, to which appropriate children are referred for physical and mental evaluation by specialists in the field of child health following initial screening by the Health Visitor and the approval of the child's General Medical Practitioner.

Health Visitors also attend, as required, sessions at the "Parent Guidance" clinic which was established in the Autumn and where parents of children with emotional or physical problems receive expert counselling.

During the year, following consultations with the Consultant Paediatrician, arrangements were made for Health Visitors to visit Anglesey children in hospital, thus enabling them in general to obtain up-to-date information on modern methods of treatment and in particular those cases with whom they are concerned as the "link" between the hospital and the home so as to ensure the "continuity" of care.

Details relating to the work undertaken by Health Visitors during the year are given in Table 23.

Table 23

Type of Case	Cases Visited	Total Visits
Children born in 1971	1,032 1,057 1,763	4,938 3,430 4,548
Total Children	3,852	12,916
Persons aged 65 or over	334 10	1,571 45
hospitals)	41 553	58 952
Total	4,790	15,542
Households—Tuberculosis Households—Other Infectious Diseases	121 187	629 201
Total	308	830

Type of Session	Sessions Attended
Infant Welfare	639 160 66 93
School Medical Inspection, etc. (prior to 1st April)	149
Total	1,107

At the end of the year each Health Visitor had an approximate case load of 5,400 persons, excluding school children, as a result of which selective visiting became a necessity and which was primarily confined to the young to the possible detriment of the elderly, as will be seen in the statistics relating to the number of persons aged 65 or over visited in 1971.

I am, therefore, pleased to report that the Council has authorised the appointment of a further three Health Visitors in 1972, and it is, therefore, envisaged that with the attachment of the Health Visitors to Group Practices more effective visits to the elderly will be carried out with a view to detecting at the earliest possible opportunity any deterioration in the medical condition of such persons.

Visits to the elderly are invariably time consuming and provoke the discussion of a wide range of topics, the bulk of which may be of a non-medical nature. Nevertheless, if such visits provide an opportunity for the Health Visitor to give advice on maintaining a healthy active way of life or even to break the monotony of loneliness, which contributes to despair in the aged, the time spent will have been worthwhile.

HOME NURSING

At the end of the year the domiciliary nursing staff consisted of one Nursing Officer (Home Nursing and Midwifery), seventeen Nurses, whose qualifications are given hereunder, sixteen of whom combine home nursing with midwifery, and eleven Nursing Auxiliaries who were recruited throughout the latter part of the year:

S.R.N.,	S.C.M.,	Q.N	3
S.R.N.,	S.C.M.		8
S.E.N.,	S.C.M.		5
S.R.N.			1

Table 24 shows the amount of work undertaken by the domiciliary nursing staff during the year:

Table 24

Persons Nursed	Cases	Visits
Persons aged 65 or over at first visit Persons aged 5 to 64 at first visit Persons aged under 5 at first visit	1,103 892 91	24,694 15,405 1,237
Total	2,086	41,336
Medical Cases	1,408 678	29,308 12,028
Total	2,086	41,336

The Nursing Auxiliary works under the direct supervision of the District Nursing Sister, who is responsible to the General Medical Practitioner for all the nursing attention given to patients. Although the recruitment of Nursing Auxiliaries spanned the latter half of the year, by the end of the year they had undertaken 4900 visits (including 155 social visits) and had attended 64 sessions at Medical Practitioners' surgeries or Local Health Authority clinics.

In 1971 the number of patients visited increased by 448, and the number of visits increased by 7,624 as compared with the previous year.

There were 1,103 patients who at the time of the first visit during the year were aged 65 years or over, and 24,694 visits (i.e., 59.7% of the total) were paid to these cases. Patients receiving more than 24 visits during the year numbered 415 (i.e., 19.9% of the total cases), and they received 19,828 visits.

No special provision is made for the home nursing of sick children, but 1,237 visits were paid to 91 children under the age of 5 at the time of the first visit.

No night nursing service was provided during the year.

The scheme for supplying disposable sheets to incontinent patients was continued, and is greatly appreciated by the patients themselves, the nurses and the General Practitioners. This service is particularly beneficial in a rural county such as Anglesey, where it would be very expensive and extremely difficult to organise any form of laundry service. During the year 24,514 disposable sheets were issued to 219 patients, and 81 inco-garments to 10 patients.

Loan of Sick Room Equipment

Each District Nurse holds items of sick room equipment such as air rings, bed pans, urinals, bed rests, hot water bottles, and rubber sheeting which she may issue on loan to patients as and when required. Further stocks of these items are also held at the Department's premises in Amlwch, Beaumaris, Holyhead and Llangefni, to supplement the requirements of the nurses.

More expensive items such as hoists, commodes, rubber mattresses, etc., are stored centrally and are issued as and when the need arises.

Following a decision to discontinue charges to patients for certain items as from 1st April, 1971, all sick room equipment is now issued on loan free of charge.

During the year a further 317 items of medical equipment were issued on loan.

MIDWIFERY AND MATERNITY SERVICES

Births

The number of births *notified* by doctors and midwives during the year, classified by place of occurrence, was as follows:

Table 25

	Live Births	Stillbirths
At Home	50	1
St. David's Hospital		13
Gors Maternity Hospital	——————————————————————————————————————	_
Totals	1,074	15

In 1971 95.3% of all births took place in institutions.

The Council's midwives attended 50 confinements during the year. Nine were midwives' booked cases and 41 were doctors' booked cases, the doctor being present at the time of delivery in 12 of these confinements.

Analgesia in Domiciliary Midwifery

The number of domiciliary cases who received trilene analgesia during the year was 14. In addition pethidine was administered in 12 instances.

Medical Aid

No midwife called in medical aid for any domiciliary case during the year.

Midwifery Packs

About one gross of midwifery packs are used annually for domiciliary confinements and "early discharge" cases from hospitals.

Domiciliary Care by Midwives

As soon as the expectant mother "books" for her confinement, the midwife undertakes ante-natal supervision and, unless the mother is reluctant to attend, all midwives in the county service are instructed to arrange for their cases to be seen periodically at the county ante-natal clinics. The midwives attend with their cases. In addition, they undertake regular ante-natal supervision of all persons booked, in the

patients' homes. Midwives are also instructed, subject to the patients' agreement, to inform the family doctor of the pregnancy.

During the year domiciliary midwives undertook 2,215 ante- and post-natal visits in addition to 5,326 visits to patients delivered in hospitals but discharged before the tenth day after confinement.

Ante-Natal Clinics

Ante-Natal clinics were held at three centres in the County as follows:

Holyhead	 Weekly
Amlwch	 Fortnightly
Llangefni	 Fortnightly

Details of attendances at these clinics are shown in Table 26.

By arrangement with the Caernarvonshire and Anglesey Hospital Management Committee, the Council's ante-natal clinics are staffed by Consultants and Doctors from the local maternity hospital and by the Council's Midwives and Health Visitors. 100 sessions were held during the year.

Table 26

	N			
	Ante- natal	Post- natal	Gynaeco- logical	Attend- ances
Amlwch	158	41		479
Holyhead Llangefni	625 220	61 56	1	1,942 657
Totals	1,003	158	1	3,078

Mothercraft and Relaxation Classes

The part-time physiotherapist appointed towards the end of 1970 continued to hold Relaxation Classes at the Amlwch Clinic on a Wednesday afternoon in addition to undertaking physiotherapy sessions at Ysgol Cefni, Llangefni.

During the year 52 sessions were held and there was a total of 146 attendances in respect of 27 expectant mothers.

Every endeavour will be made in the New Year to establish Mothercraft and Relaxation Classes in Holyhead and Llangefni for the benefit of expectant mothers.

CARE OF MOTHERS AND YOUNG CHILDREN

Infant Welfare Centres

No clinics were closed during the year and no new clinics were opened. Progress was made, however, in 1971 with regard to the Holyhead Health Centre project which has been referred to previously in this Report.

The medical officers held 232 clinic sessions and health visitors another 126 sessions during the year.

There were 1,497 children on the registers during 1971 and the total attendances numbered 5,441, a decrease of 218 compared with 1970.

Relevant details are shown below:

(1)	No. of centres provided at the	e end	of the ye	ear		13
(2)	No. of children who attended	centr	es durin	g the		
	year who were born in 1971				598	
	1970				569	
	1966-	-69			330	
						1,497
(3)	No. of children who first at during the year who, at the	ir firs	t attend	ance.		
	were under 1 year of age					655
(4)	Total number of attendances included in (2) during the year	made ear :	by chi	ldren		
	Under 1 year				4,224	
	1 year but under 2 years				828	
	2 years but under 5 years				389	
					-	5,441

Details relating to Clinics held in the County are given in Appendix "C."

In addition to the Council's clinics, one voluntary clinic held at the R.A.F. Station, Valley, was supported during 1971 in that the local health visitors assisted free of charge at these sessions. At this clinic 178 children were seen during the year, the number of attendances being:

			Tota	al	 344
Over 2 years			 •••		 5
1 to 2 years Over 2 years	***	***	 		 29
Under 1 year			 		 310

The Care of Premature Infants

Details of cases notified in 1971 were as follows:

- (a) Number of premature babies who were born:
 - (i) At home 4
 (ii) In private nursing homes 50
- (b) (i) Number born at home who survived 28 days ... 1
 - (ii) Number born in hospitals who survived 28 days ... 39

Dental Care of Mothers and Young Children

Details of the dental services provided to these priority classes are set out in Table 27 below.

Table 27

	Children under 5 years	Expectant and Nursing Mothers
Number inspected	84	47
Number treated	70	31
Number rendered dentally fit	70	16
Forms of treatment: Number of teeth extracted	71	20
Number of teeth filled	34	22
Number of scaling and gum treatments		24
Number of radiographs	_	2
Dentures supplied	_	3
General Anaesthetics	41	7

Mr. O. C. Jenkins, the Principal Dental Officer, comments on the Dental Health of pre-school children and nursing mothers as follows:—

"As in the case of the schoolchildren, this year I would like to emphasise to young mothers who attend the M. and C.W. Clinics, of the need to take better home care of their own and their toddlers' mouths. If mothers supplement their children's diet with Vitamin C rich syrups they should only be used in a diluted form, and the teeth thoroughly cleaned afterwards. It is never too early to clean a child's mouth; give the child a soft bristle junior brush—there is no need for paste. Alternatively, clean the child's teeth with a small piece of wet cloth. Avoid the sweetened dummy or sugar comforter; a small child can be trained to prefer savoury to sweet foods.

"Rules for better dental health:

- 1. Choose a balanced diet. Limit sugary foods and 'pop' to meal times only.
- 2. Children's teeth should be cleaned immediately after eating.
- 3. Visit the dentist regularly. Three year olds should be taken for a check-up."

Distribution of Welfare Foods

In 1971 the following quantities of National Welfare Foods were distributed in the County:

National Dried Milk (Full cream)	6,087	cartons
National Dried Milk (Half cream)	3	cartons
Cod Liver Oil		bottles
A. and D. Tablets		packets
Orange Juice		
Vitamin A., D. and C. Drops	623	bottles

During the year, Vitamin A., D. and C. Drops for young children were introduced to replace Cod Liver Oil and Orange Juice which ceased to be Welfare Foods after 30th April and 31st December, 1971, respectively. It is interesting to note that there has been a progressive reduction in the issues of National Dried Milk over the past few years illustrated by the issue of 6,090 cartons in 1971, compared with 15,316 tins in 1968. The situation, however, is reversed in the case of Orange Juice, 15,049 bottles having been issued in 1971, compared with 10,923 in 1968.

In addition, 10,275 packets of proprietary dried milk, 505 packets of other baby foods and 1,818 bottles of vitamin supplements were sold. It was, however, decided to discontinue the sale of proprietary welfare foods towards the end of the year but it is not anticipated that existing stocks will be exhausted until early in the New Year.

Deafness in Young Children

The importance of the early recognition and treatment of deafness cannot be exaggerated. By this means alone can the resulting disability be minimized. Through the courtesy of the County Medical Officer of Health of Caernarvonshire we are able to refer cases to a clinic at Bangor held by Professor Sir Alexander Ewing, and one new case attended during 1971.

Children at Risk

Children on the "At Risk Register" are kept under strict supervision and development assessments are carried out at about the age of one year. A number of children are removed from the register following this assessment, but those remaining become subject to further assessments in subsequent years or as often as appears desirable. At the end of the year there were 97 children on the register.

Congenital Malformations

Babies born with congenital malformations come to our notice through the medical staffs of the local maternity hospitals and through our own midwives and health visitors. This system works satisfactorily and 20 babies were registered during 1971, details of which are shown in Table 28.

Table 28
CONGENITAL MALFORMATIONS

	Number of Cases					
Site of Defect	Male	Female	Total			
Central Nervous System	2	1	3			
Eye and Ear	_	2†	2			
Alimentary System	2* 3		2			
Heart and Circulatory System	3	-	3			
Respiratory System	-	-	-			
Urino-genital System	5	-	5			
Limbs	1	2	3			
Other Skeletal System	-	1	1			
Other Systems	-	_	_			
Other Malformations	1	-	1			
Totals	14	6	20			

⁺ Includes one child with multiple defects.

Phenylketonuria

This rare inherited disorder, which, untreated, gives rise to severe mental subnormality, can usually be detected at an early age by a simple "nappy" test. In 1968, however, two false negatives were obtained and this disorder of metabolism was only detected some months later when the two children concerned were not showing the progress that was expected of them at their ages.

On 1st October, 1969, therefore, arrangements were made in conjunction with the Pathologist at the Caernarvon and Anglesey General Hospital to introduce the Guthrie test which was more reliable. However, due to subsequent developments in this field, arrangements were made during 1970 with Professor Mahler, of the Medical Unit at the Welsh National School of Medicine, to subject specimens of urine-soaked filter papers from each newborn baby to the "Woolf Test." This supersedes the Guthrie test and enables the detection of up to 20 or more disorders of metabolism at a very early age, when treatment could

^{*} Both children have multiple defects.

be expected to be more successful. The results will enable the scientists at the School of Medicine to determine the true incidence of many metabolic diseases in the Principality and the prevalence of certain abnormal genes in the population.

Of the 1,012 Woolf tests carried out further tests were necessary with regard to 58 babies.

Details are shown in the following table:

Table 29 WOOLF TESTS

Test	Negative	Positive	Total
First (soaked filter paper)	954	58	1,012
Second (liquid specimen)	49	9	58

Of the nine babies positive to both tests

4 had cystinuria

4 had proteinuria

1 had tyrosinuria.

Developmental Assessment Clinics

In September, 1971, a Developmental Assessment Clinic commenced at the Isgraig Clinic, Llangefni. Forty-three children of approximately two years of age were invited to attend the eight sessions held. Thirty-two children attended and in the case of fourteen their development was considered to be normal in every respect. Of the other eighteen children five were found to have a squint which required their referral to the Consultant Ophthalmologist and one of these children was also referred for consultation with Professor Sir Alexander Ewing, Consultant Audiologist. One child was referred to the Consultant Child Psychiatrist. No further action was considered necessary in respect of the other twelve children, whose development may possibly be delayed. Arrangements will be made for all these children to be re-examined between the age of two and a half to three years.

Also in September, 1971, Dr. Gwyn Griffith, Consultant Paediatrician, commenced a Developmental Assessment Clinic at St. David's Priory, Holyhead. Four sessions were held and twenty-five infants seen, whose parents were not entirely happy about their child's progress or management.

In the case of twenty of these children, the doctor was able to re-assure the mother that the child's development was normal. It was, however, considered desirable for the other five children to be kept under observation for minor matters and arrangements were made for them to attend for re-examination at a later date.

Parents Guidance Clinic

Dr. G. M. Nicholl, Consultant Child Psychiatrist, has been holding monthly sessions at the Isgraig Clinic, Llangefni, as from September, 1971, where the parents of handicapped children can be given expert advice on their management. The parents of five children were seen at the Parents Guidance Clinic by the end of the year.

Cytology Service

The cytology clinics which were established in May, 1967, continued to be held in Amlwch, Holyhead and Llangefni. Even though the existence of this service has been well advertised through the local women's organisations, attendances during the year have once again been most disappointing.

258 smears were taken during the year, nine of which were dubious. None was positive.

The Medical Officers attending the Family Planning clinics also continued to take cervical smears as in the past.

Family Planning Service

This service is organised through the agency of the North Wales Branch of the Family Planning Association. Clinics are now held at Amlwch (twice monthly), Holyhead (weekly), and Llangefni (weekly). I would like to express my appreciation of the valuable work being carried out by the Medical and Nursing Staff and the band of voluntary workers. Advice and supplies were given to married women, unmarried mothers, single women just before marriage and other single women who were 21 years of age or over.

The Council's scheme provides for free advice and supplies for those considered to be in need on medical or social grounds.

I give hereunder, in Table 30, statistics for 1971 provided by the North Wales Branch of the Family Planning Association:

				Free Advice ana Treatment		Total
Clinic	No. of Sessions	Total Cases	New Cases	Medical Criteria	Social Criteria	Attend- ances
Amlwch	23	64	35	-	-	156
Llangefni	48	249	100	-	2	571
Holyhead	28	177	103	1	1	346
Total	99	490	238	1	3	1,073

In addition, I am informed by the North Wales Branch of the Family Planning Association that during the year 248 Anglesey persons attended the Bangor clinic. No statistics are available, however, with regard to the number of attendances by such persons.

CHIROPODY

The Council's chiropody scheme continued to function satisfactorily, with all recipients being adequately catered for throughout the county. Patients are able to obtain treatment from a chiropodist of their choice selected from a small number of qualified chiropodists who have agreed to serve on a panel for the purpose.

A total of 3,473 treatments were given to 973 patients, 1,359 of which were given in the patients' own homes, and 2,114 in the surgeries of the chiropodists. In addition 783 treatments were given to 139 of the residents in the Council's Homes for the Aged.

Although the scheme provides for chiropody treatment for expectant mothers, handicapped persons and the aged, in practice the demand has been confined almost entirely to the last group.

The demand in 1971 showed an increase of 4.5% compared with 15.2% in 1970, and relates to increases in surgery and domiciliary treatments.

AMBULANCE SERVICE

The ambulance service in the County is provided from four ambulance stations, one of which is also the ambulance control.

The stations at Llangefni (two ambulances), Holyhead (Control and three ambulances) and Amlwch (one ambulance) are manned throughout the 24 hours, whilst the station at Llangoed (one ambulance) is manned from 8.00 a.m. to 8.00 p.m. daily.

The operational staff consists of a foreman ambulance driver/control room attendant and 24 driver/attendants. Ambulances operate with a two-man crew except during holidays or sick leave, when some ambulances have to be despatched with a driver only.

During the year 16,304 patients consisting of 14,070 general cases, 1,382 emergency admissions, 598 maternity, 250 road traffic accidents, and 4 with infectious diseases were conveyed by ambulance and sitting case car as compared with 15,305 in 1970. Thus during 1971 in each period of 24 hours, the average number of patients carried was 44 and the average number of accident and emergency cases was 6.

The mileage covered was 402,161 as compared with 362,076 in the previous year. The average mileage per journey and per case carried in ambulances showed an increase, whilst those for sitting case cars decreased.

Table 31 provides information on the work undertaken by the County Ambulance Service in 1971:

Table 31

	Ambulances			SITTING CARS		
	Cases	Journeys	Mileage	Cases	Journeys	Mileage
First Quarter	2,211	1,019	40,541	1,725	1,003	55,455
Second Quarter	2,365	995	38,665	1,586	929	56,020
Third Quarter	2,523	1,156	45,355	1,766	1,063	62,689
Fourth Quarter	2,262	1,033	41,841	1,866	1,002	61,595
Totals	9,361	4,203	166,402	6,943	3,997	235,759
A		AT NO.	An	BULANCE		NG CARS
Average mileage per jo Average mileage per pa		rried		39.59 17.78		33.96
Average inheage per pa	tient ca	HICG		17.70	E GOVE	33.90

Comparable statistics relating to the work undertaken by the ambulance service in the years 1951, 1961 and 1971, are given hereunder:

Table 32

	Ambulances			Sm	SITTING CARS			
Years	Cases	Journeys	Mileage	Cases	Journeys	Mileage		
1951	6,543	3,641	110,684	2,810	2,536	97,015		
1961	6,092	3,174	115,811	5,041	2,871	121,061		
1971	9,361	4,203	166,402	6,943	3,997	235,759		
Average Mileage per 1951	Journey	:		Ambulanci 30.40 39.59		ng Cars 38.26 58.98		
Average Mileage per 1951	Patient (Carried:		Ambulanci 16.92 17.78		ng Cars 34.52 33.96		

OTHER MISCELLANEOUS SERVICES

Nursing Homes

The County Council are the responsible authority for the registration and supervision of Nursing Homes under the Public Health Act, 1936, as amended by the Nursing Homes Act, 1963.

The only Nursing Home in the county was registered during the year. 16 beds (non-maternity) are provided and the premises were regularly inspected by the Director of Nursing Services.

Ascertainment of Blindness

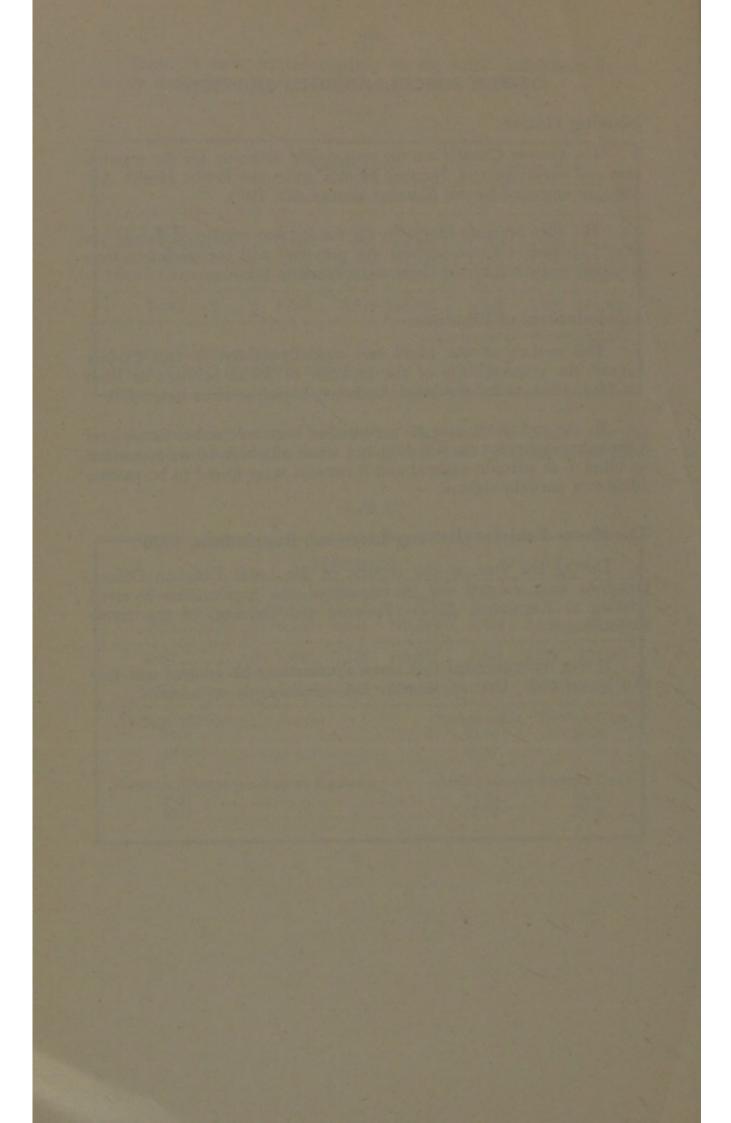
The welfare of the blind and partially-sighted in this County became the responsibility of the Director of Social Services as from 1st May, 1971, under the Local Authority Social Services Act, 1970.

By the end of the year 30 persons had been referred to Consultant Ophthalmologists for examination as a result of which 16 were certified as blind, 6 as partially-sighted and 8 persons were found to be neither blind nor partially-sighted.

The Motor Vehicles (Driving Licences) Regulations, 1970

During the year, at the request of the Local Taxation Officer, enquiries were carried out in respect of ten applications received relating to Regulation 22(2) (Epilepsy and Driving) of the above Regulations.

It was recommended that seven applications be granted and that two be refused. One application was subsequently withdrawn.



Part III ENVIRONMENTAL HEALTH SERVICES FOOD AND DRUGS

MILK AND DAIRIES REGULATIONS

The County Council, as Food and Drugs authority, is responsible for the licensing of all dealers (including processors) in Untreated, Pasteurised and Sterilised Milk, and for the enforcement of the Regulations applicable thereto. These duties are performed by officers of the Consumer Protection Department on behalf of the County Medical Officer, who is the responsible officer.

At 31st December, 1971, 183 persons held dealers' licences issued by the County Council authorising the use of the special designation "Pasteurised" in relation to Milk sold by them. All Pasteurised Milk sold in the County is heat treated and bottled at a Creamery in Mochdre. 72 persons were registered by the Ministry of Agriculture, Fisheries and Food as producer-retailers.

151 samples of Pasteurised Milk were submitted for examination, all of which were reported as being adequately heat-treated. There were, however, two unsatisfactory reports concerning the keeping quality of the milk. The licensing and supervision of the pasteurising plant is the responsibility of the Denbighshire County Council, the licensing authority.

295 samples of Untreated Milk from retail supplies were examined, 70 of which failed the prescribed tests. As the Ministry is responsible for the conditions under which Untreated Milk is produced, the details of the failures were referred to them for appropriate follow-up action. As a matter of routine, samples of milk from producer-retailers are tested for the presence of antibiotics; no unsatisfactory results were received during the year.

Concern is still being felt regarding the number of milk bottles which have been used in "dirty" condition. Unless it can be proved that the "dirt" has contaminated the milk, the responsible authority is that which controls and issues the Licence. When the milk is contaminated the County Council is the enforcing authority. There was one prosecution for the sale of contaminated milk, which resulted in a fine of £50 being imposed.

218 samples were examined for chemical quality (butter-fat and solids-not-fat). It is pleasing to report that there were no cases which fell below the minimum statutory standards.

SCHOOL MILK

During the year 47 samples of school milk as compared with 55 in 1970 were examined for both keeping quality and heat treatment, and I am pleased to report that all were satisfactory. The chemical quality of some of the samples tested was also found to be good and in no case did a sample fall below the statutory minimum standards. There were no consumer complaints of school milk and as all the milk was satisfactorily pasteurised it was not necessary for any examination for Brucellosis to be carried out.

EXAMINATION OF MILK FOR TUBERCULOSIS AND BRUCELLA ABORTUS

323 samples of milk were submitted for examination for Tuber-culosis and Brucella Abortus; 3 samples received reports indicating Brucella infection. Arising from these results, notices were served on three milk producers restricting the sale of milk to manufacturing and heat treatment purposes only. Practically all the above samples were taken from retail supplies. During the year it has not been possible for the routine samples to be taken by the Department at the Creamery. There is systematic sampling undertaken, but the results are not available to the County Council. It is true that all this milk is used for manufacturing purposes, but, from the public health viewpoint, the information would be useful so that steps could be taken to acquaint the producer of the dangers inherent in the consumption of Brucella infected milk. At 31st December, 1971, there were 43 restriction notices in force.

It is pleasing to report that there is a much greater participation by the milk producers in the Brucellosis (Accredited Herds) Scheme. The maintenance of this interest is essential if we are to keep our record of having the lowest degree of infection in any county in the United Kingdom.

THE CONTROL OF FOOD AND DRUGS

Report of Mr. H. A. Thomas, M.I.W.M.A., Chief Inspector of the Department of Consumer Protection upon the administration of the Food and Drugs Act and other allied duties.

Labelling of Food Regulations, 1970

These Regulations which become fully operative on 1st January, 1973, should strengthen those Sections of the Food and Drugs Act, 1955, which deal with false descriptions of foodstuffs.

Many manufacturers are already labelling their food, so as to comply in advance with these new Regulations. The Regulations deal specifically with claims relating to vitamin and calorie content.

FOOD AND DRUGS ACT, 1955 Compositional Quality of Food

Food	Number Submitted	Number 'Not Genuine'
Alcohol Dispersant	1	_
Medicines	3	The same of the sa
Baby Food	2	
Beverages—Alcoholic	16	2
—Non-Alcoholic	6	- Was
Blackcurrant in Syrup	1	
Bread, Bread and Butter, etc	11	4
Butter	1	
Coffee/Coffee and Chicory Es-		A STREET
sence, Ovaltine	6	_
Confectionery	8	1
Potato Products	4	4
Curry (Beef)	1	-
Dessert/Dessert Mix	2	-
Gravy Browning	1	-
Ice Cream, Ice Cream Powder	9	-
Meat Products	16	-
Milk and Milk Products	21	3
Sauce Mix (Onion)	1	-
Stuffing (Sultana and Herb)	1	-
Vinegar	3	-

A summary of the unsatisfactory samples and of the action taken is as follows:

SPIRITS

Reported to contain approximately 5% of water. Proceedings instituted. Found guilty but given conditional discharge on payment of costs of £11.00.

POTATO PRODUCTS

A number of packets of pre-packed potato products were found to be incorrectly described. Situation was met by a reprint of the respective labels.

BREAD

Three samples of bread were found to contain foreign matter, i.e., dextrinised dough, charred dough and a cigarette end. Proceedings were instituted with regard to the cigarette end and the defendant fined £10 with £10.65 costs. A sample of "bread and butter" was found to be spread with margarine. This resulted in proceedings and a fine of £5 with £11.65 costs.

CAN OF BEER

A can of beer was found to contain a large steel nut. There was no evidence that the beer had been contaminated, and it was impossible to remove the nut from the can through the normal opening. It was found to be a part of the canning machinery. The canners advised on need for more continuous plant inspection.

MILK AND MILK PRODUCTS

One sample of skimmed milk was found to contain excess moisture. Packers "cautioned." A bottle of milk was found to contain a partly decomposed slug. Chemical tests indicated that the slug had gone through the cleansing machinery at the bottling plant. Bottlers fined £50 and costs. One sample of pre-packed cheese was found to be heavily contaminated with mould to an extent in which proceedings would normally have been instituted. There were indications, however, in this instance that if proceedings had been taken the ultimate punishment could have far exceeded the seriousness of the alleged offence, and administrative action only taken.

TIN OF BISCUITS

A Christmas pack of biscuits was found to be in "unsatisfactory condition." The retailer was "Cautioned" regarding the need for rotation of stock, particularly with regard to seasonal packs.

ICE CREAM

188 samples of ice cream were submitted for examination, with the result that 134 were classified as Grade I, 46 as Grade II, 6 as Grade III, and 2 as Grade IV.

PHARMACY AND POISONS ACT, 1933

Shopkeepers who are not qualified Pharmaceutical Chemists are required to be registered with the County Council to sell certain substances listed as Poisons; these include agricultural sprays, etc. 62 persons are so registered with the Council. Inspections of premises have been combined with other administrative visits.

SANITARY CIRCUMSTANCES

Housing

Table 33 (which is adapted from the "Local Housing Statistics" of the Department of the Environment) gives details of the housing progress up to 31st December, 1971, in the various county districts since the end of the war.

Table 33

	No. of dwellings built or under construction		Increas 31st De	Total No. of dwellings built or under	
District	by council	by** private builders	council	** private	construc'n per 1,000 population
Beaumaris Borough Amlwch Urban Holyhead Urban Llangefni Urban Menai Bridge Urban	329 505 1,782 934 229	101 274 351 329 516	19 149 20	4 29 64 48 18	206 212 196 321 289
Aethwy Rural Twrcelyn Rural Valley Rural	767 535 1,017	1,597 1,471 1,978	41 46 83	242 182 199	195 208 194
Totals	6,098	6,617	358	786	211

Excludes temporary dwellings completed.

**Includes dwellings built by other public sectors.

Table 34

DWELLINGS (BUILT OR UNDER CONSTRUCTION) PER 1,000 POPULATION

At 31st December each year

District	1965	1966	1967	1968	1969	1970	1971
Beaumaris Amlwch Holyhead Llangefni Menai Bridge	136	151	143	154	187	205	206
	114	133	144	153	172	187	212
	103	112	120	134	151	171	196
	205	233	252	279	308	312	321
	183	214	229	252	274	296	289
Aethwy	77	100	125	148	163	182	195
Twrcelyn	103	119	134	148	164	178	208
Valley	99	121	136	152	168	180	194

Water Supplies

Under the Anglesey County Council (Water, etc.) Act, 1944, the functions of the Public Health Act, 1936, for the supply of piped water, were delegated by the eight district councils in the area to the County Council. The piped water supply throughout the county was satisfactory in quantity and in bacteriological quality throughout the year.

There are, however, a number of private wells still in use, and some are polluted, the users of which have been warned to boil the water before drinking.

Sampling of the raw water before entry into the treatment plant is carried out by the Water Engineer. Of the 50 samples of raw water taken from the Cefni reservoir, 49 were contaminated and 47 of the 50 samples of treated water from the plant proved satisfactory. All 47 samples of treated water from the Llyn Alaw plant were satisfactory.

The following information has been supplied by the County Water Engineer and Manager: —

Direct labour mainlaying work covered a distance of 17.50 miles during the year and included some 3.75 miles of trunk mains. Several areas in the parishes of Bodwrog, Llanrhuddlad, Llangadwaladr, Llaneilian, Llanallgo, Llanfihangel-Tre'r-Beirdd, Trewalchmai, Pentraeth, Llangoed, Llanfairynghornwy, Llanfihangelesceifiog, Trefdraeth, Llanddeusant, and part of Amlwch U.D. were provided with supplies for the first time (11.25 miles).

New housing estates in various districts involved 2.50 miles of new main.

(a) Lengths of water main laid in 1971: 30,747 yards.

CONTRACTOR OF THE PARTY OF THE	
Valley R.D	
	Total

Fluoridation

Fluoridation of the Cefni and Llyn Alaw water supplies was maintained at a satisfactory level without difficulty, and the whole county is supplied with fluoridated mains water. From time to time, however, local supplies still have to be brought into use which dilute the fluoride level in the water in those localities.

Sampling

Water sampling is carried out twice weekly and all the county is covered at two to three-weekly intervals with the exception of Holyhead, where the supply is sampled weekly. Sampling points are varied from time to time and if unsatisfactory samples are obtained, concentrated sampling is carried out in the particular area concerned.

The sampling is carried out in pairs from premises in close proximity to each other so as to eradicate as far as possible misleading results due to technical or other faults. Where one of the pair shows a result below Class I the higher classification is the one taken as correct for the purposes of Table 35.

The County Water Engineer receives a weekly summary of the results. He is also informed immediately an unsatisfactory result is received and close co-operation exists in trying to ascertain the cause and effect a remedy.

Table 35

BACTERIOLOGICAL RESULTS OF WATER SAMPLES— PIPED WATER SUPPLIES

	Classification					
Supply	I	II	III	IV	Total	
County Mains Supplies	811	5	3	-	819	

During the year 4 samples of venous blood were taken from employees of the Water Department and submitted to the Widal test. All the results were satisfactory.

The following table gives the results of water samples taken for the determination of lead content. In each case the sample was from an old property suspected of having lead plumbing.

Table 36

MAINS WATER SUPPLIES—
ANALYSIS FOR LEAD CONTENT

No. of Properties	No. of samples taken	Under 0.02 p.p.m.		Over 0.05 p.p.m.
7	9	. 3	6	-

Sewage Disposal

This is a function of the Municipal Borough of Beaumaris and of the Urban and Rural District Councils. My colleagues, the two District Medical Officers of Health, have very kindly submitted the following commentaries on the position in their areas at the end of 1971 which I am pleased to include in this Report:—

Dr. G. H. Browse Roberts, Medical Officer of Health for the Northern Sanitary Districts, states:—

"TWRCELYN RURAL DISTRICT COUNCIL:

"Penysarn.—As reported twelve months earlier, after the continuing persistence of the Council towards seweraging this area the Ministry, at long last, sanctioned this scheme, but in a diminished form, and even that modified public service was estimated to cost considerably more than had the original full scale scheme been approved at the time of its design by the Council's Consulting Engineers.

"By the end of the current year the constructional work was in an advanced state, and in fact, the main A-line sewer was completed down to the sea outfall and the macerator had been completed and was awaiting electricity supply and machinery installation. The branch sewer to Pengorphwysfa, Llaneilian, Nebo and Croesau Gwynion were very nearly completed.

"Llanfairynghornwy.—A scheme was envisaged by the Authority for this scattered area.

"Llanfechell.—Although this scheme had been constructionally completed, some difficulty was being experienced with the automatic desludging equipment which is now under causal investigation.

"Red Wharf Bay—Llanbedrgoch.—Particular circumstances were dictating that the constructional details were having to be reconsidered by the Council's Engineers.

"Tregele.—The Council's Engineer were in the process of designing this scheme.

"Talwrn.—This scheme has been submitted to the Ministry for approval and a discussion at Engineering level is awaited.

"Rhosybol.—The Consulting Engineers reported that it was anticipated that early in the new year tenders may be sought.

"Carreglefn, Brynteg and Marianglas.—The Engineers were commencing investigations relative to these three areas at the end of the year.

"Benllech.—As reported last year the originally designed sea outfall length had to be extended by 360 feet (at Board of Trade instigation) to 2,000 feet. Defects were later discovered involving a sagging rather than an actual fracture. This has necessarily been followed by a certain amount of cross-correspondence. The actual remedial work having been already completed.

"VALLEY RURAL DISTRICT COUNCIL:

"Bodffordd.—The pre-existing scheme having been in operation for 14 years was due for modifications dictated by changed circumstances in the locality. In 1969 the Engineers had been instructed to prepare an improvement scheme but at the time it was axed for economic reasons. The samplings of the effluent were not satisfactory. In mid-year of 1970 the Engineering Inspector of the Welsh Office made an inspection and agreed that the filter distributor would have to be replaced before the projected works improvement scheme.

"At the year's end the Consulting Engineers had made a comprehensive report relative to the area in general and recommended that the works be carried out as soon as possible on account of pre-existing deterioration elements.

"Bryngwran.—This operating scheme has for some time been subject to blatant, deliberate vandalism, particularly in relation to the distributor mechanism. It is difficult to assess the mentality of a population that goes out of its way to destroy such an essential public service designed for the benefit and welfare of that same population.

"Bryndu.—Difficulty was being experienced over the fracture of pipe line joints, as revealed by ten foot deep excavations.

"Bodedern.—Gwynedd River Authority effluent reports on this scheme have proved satisfactory.

"Caergeiliog.—Considerable difficulty has been experienced due to blockages. Excavations have revealed stones, plastic materials and jay cloths. Remedial action is continuing.

"Gwalchmai.—This scheme was subjected to vandalism on repeated occasions, and the Council was experiencing difficulty in obtaining spare parts to replace those deliberately smashed. Additionally, sewer blockages were found to be due to the public's insertion of plastic bags, dish cloths, jay cloths, etc., etc., into the sewers.

"Rhosneigr.—In recent times the sea outfall has been extended by 900 feet, as dictated by extensive floatation tests, the reports on which having been submitted to the Ministry for inspection and approval before the work was allowed to proceed.

"Gorad Area.—The Consulting Engineers did not consider that there was any immediate necessity to rearrange the sewerage of this area, but a further consideration is being made.

"Holyhead Rural Area (Porthdafarch, Kingsland and Plas Roads).

—A joint meeting between Valley R.D.C. and Holyhead U.D.C. to consider this matter had already been dated for the early New Year.

"Llynfaes.—Scheme under construction.

"Penrhos Beach Area Scheme.—Under consideration by the Council.

"Rhydwyn and Llanrhyddlad.—The standard of effluent laid down on this scheme by the Gwynedd River Authority is very much higher than the normal Royal Commission Standard, consequently the works need attention on at least six times a week. Suitable labour availability will, therefore, be a very real factor in the future.

"Trearddur Bay—Stage 2.—A separation drainage arrangement was completed in December 1970, preparatory to the construction of Stage 2 planned for and which was about to go out for tender."

Dr. Arthur Jones, Medical Officer of Health for the Southern Sanitary Districts states:—

"BEAUMARIS BOROUGH COUNCIL:—The Town's sewage pumping stations operated satisfactorily during the year.

"The sewage disposal plant in Llanfaes to serve the new housing estate was completed early in the year and a satisfactory standard of effluent was maintained.

"A decision to provide a sewer from Rhos Cottage to serve the lower houses in the area was made and planning permission for siting the pumping station was approved."

"LLANGEFNI URBAN DISTRICT COUNCIL:

"Sample reports during the first half of the year were consistently satisfactory. Some problems were encountered in the last three months due to the disturbance caused by the extensions, and the position was unresolved at the end of the year."

"MENAI BRIDGE URBAN DISTRICT COUNCIL:

"The sewage from 30 houses is dealt with by septic tank treatment, the remainder of the Town being drained by gravity to the Council's sewerage system which discharges crude sewage to the Straits via four outfall pipes.

"The Council's Consulting Engineers are at present finalising a scheme for the treatment of a considerable portion of the Town's sewage by an activated sludge process and after considerable consultation with the various bodies concerned all objections have been satisfied and the scheme has been resubmitted to the Welsh Office.

"AETHWY RURAL DISTRICT COUNCIL:

"Llanddaniel/Gaerwen.—This scheme which provides for an entirely new sewerage system for the village of Llanddaniel in conjunction with extensive additions to the joint treatment works at Gaerwen was completed in November, 1971. The Welsh Office also sanctioned a further extension to serve the area which lies between Llanddaniel and Llanedwen. The provision of this additional sewage treatment capacity at the Gaerwen Works will now enable further contemplated building development to take place.

"Llanfairpwll.—The construction of a new treatment works, together with certain lengths of relief sewers, commenced in the Spring of 1971. This work is well advanced and when completed will replace the direct outfall into the Menai Straits. The Gwynedd River Authority have been pressing for the treatment works and it will be gratifying to report its completion in 1972.

"Llangoed, Llanddona, Penmon.—All preparatory works by the Consulting Engineers was completed and approval of the Welsh Office obtained. Tenders are expected to be submitted during February, 1972, and the scheme should commence shortly afterwards. This is the last of the Council's major schemes.

"GENERAL OBSERVATIONS:

"The Council will no doubt keep under review its general sewage disposal facilities and, where necessary, consideration will be given to extensions or improvements, particularly in those parts of the district where building development is likely to take place."

Part IV SCHOOL HEALTH SERVICE

SCHOOL HEALTH SERVICE

Medical Inspection

The school population on the 20th January, 197 Primary Schools Secondary Schools Special Schools	6,837
	11,215

The statistics reflect a satisfactory state of health among the school population and the work relating to medical inspection is set out in the tables on pages 72-74.

As will be seen from Part II, Tables A and B on pages 73 and 74 the commonest defects discovered at routine medical inspection are defects of vision including squint, and defects of the nose and throat.

Minor orthopaedic departures from the normal foot and postural defects are frequently noted, but the severe crippling defect is happily not often seen. Of the infectious skin diseases, there were 6 cases of scabies, 2 cases of ringworm (body) and 1 case of impetigo.

General Condition and Nutrition

The general condition and nutrition of all children, except 11, examined at routine medical examinations was satisfactory.

97 per cent. of the children eligible in primary and special schools take milk and the average number of meals served to children by the School Meals Service each school day was 7,743, which represents 76 per cent. of the school population as compared with 81 per cent. in 1970.

As from 1st September, 1971, the Local Education Authority was allowed to provide free school milk for the following classes of pupils only:

- (a) Pupils in special schools.
- (b) Pupils in other maintained schools up to the end of the summer term next after they attain the age of seven.
- (c) Other pupils in primary schools and junior pupils in all-age middle schools where a school medical officer certifies that the pupil's health requires that he should be provided with milk at school.

During 1971, eighteen children aged 7 to 11 years were considered in need of school milk on health grounds.

School Milk

During the year 47 samples of school milk as compared with 55 in 1970 were examined for both keeping quality and heat treatment, and I am pleased to report that all were satisfactory. The chemical quality of some of the samples tested was also found to be good and in no case did a sample fall below the statutory minimum standards. There were no consumer complaints of school milk and as all the milk was satisfactorily pasteurised, it was not necessary for any examination for Brucellosis to be carried out.

Paint on School Railings

Table 37
ANALYSIS FOR LEAD CONTENT

No. of Samples	Under	Over
Taken	3%	3%
16	8	8

With regard to the 8 schools where the lead content of the paint on the railings was in excess of 3%, it was recommended to the Director of Education that arrangements be made for the paintwork to be stripped and the railings repainted with lead-free paint.

Health Education

As reported previously, Health Education in Anglesey is largely confined to the efforts made by the school nurses and dental officers in the normal performance of their duties. As this field of activity urgently calls for expansion, authority was given in 1968 to the appointment of a Health Education Officer.

Unfortunately due to various reasons it was not possible to make an appointment until late in the year, when arrangements were made for the Health Education Officer to commence duty as from the beginning of the new year.

The work of the School Nurse

The work done by school nurses in the prevention of infestation with vermin deserves high praise. The nurses made 34,040 inspections, which is equivalent to every child being examined on the average every four months during the year. The number found to be verminous was 103 or 0'9 per cent. of the school population. The figures for the past few years are as follows: 77 in 1967, 57 in 1968, 73 in 1969 and 140 in 1970.

It is hoped that the dip in the statistics will become a steady downward trend until such infestation is eliminated in Anglesey schoolchildren.

In September, 1970, it was decided to include, as a routine procedure for the detection of albumin and sugar, the urine testing of each new entrant to Primary Schools and thus provide a more comprehensive medical examination.

Of the 1,350 children examined during the year 1,329 submitted urine specimens and in all cases, as far as clinistix tests were concerned, the results were satisfactory, but 16 specimens revealed evidence of albumin. A further specimen was obtained from 15 children in the latter group one month later (the other child was already receiving hospital treatment) and apart from three cases which were subsequently referred to the General Medical Practitioner, the urine tests were satisfactory.

Orthopaedic Care and After-Care

The following tables set out the work done by the physiotherapist:

Table 38

Centre	No. of Clinics held	No. of Patients	No. of Attend- ances
Holyhead	73	60	348
Llangefni	40	44	297
Amlwch	42	42	289
Menai Bridge	42	42	223
Totals	197	188	1,157

Table 39

	Orthopaedic and other
Total number of patients on clinic registers 1.1.71	209
Number of new patients 1971	53
Total number discharged 1971	38
Total number of patients on clinic registers 31.12.71	224

Breathing exercises, etc., have also been given to 13 cases referred by hospitals.

During the year 169 attendances were made by 134 individual children at the 11 Orthopaedic Clinic sessions held at Holyhead and Llangefni, an average attendance of 15.4 per session.

Defective Eyesight and Squint

The Ophthalmic service for school children is provided through the Hospital Service. The number of refraction sessions held during the year was 64 as compared with 88 in 1970. The number of school children seen was 696 (917 in 1970). In addition, a further 83 preschool age children were examined compared with 85 the previous year.

The number of school children operated upon—at the Caernarvon Eye and Cottage Hospital—was 21 (12 in 1970).

Prescriptions for spectacles were issued at the clinics to 259 children.

The school nurses test the eyesight of 7 and 10 year old children and refer doubtful cases for the opinion of the school doctor. During the year 879 children aged 7 years and 818 aged 10 years were tested by the nurses and 108 (94 and 14 respectively) referred for further examination. In addition the school nurses test the corrected vision of children wearing spectacles and if in doubt about their suitability refer the child for further examination. During 1971 they examined 341 such children and referred 19 to the school medical officer.

Orthoptic Treatment

Orthoptic clinics continued to be held at Bangor and during the year there were 382 attendances of Anglesey children. The number of children seen was 94 including 55 new cases.

In addition Orthoptic sessions were held at St. David's Priory, Holyhead. By the end of the year 50 sessions had been held, 69 children were seen, including 35 new cases and the total attendance at these clinics was 284.

Diseases of the Ear, Nose and Throat

All consultations and operations for conditions of the ear, nose and throat are held at the Caernarvon and Anglesey General Hospital, Bangor.

These are among the commonest causes of ill-health among children and during the year 40 cases were referred for further investigation. In 1971, according to information received, 24 children received operative treatment, 9 for the removal of tonsils and/or adenoids, 13 for diseases of the ear and 2 for other nose and throat conditions. 26 children received other forms of treatment.

Handicapped Pupils

The Education (Handicapped Children) Act, 1970, came into operation on 1st April, 1971. Consequently the powers conferred under Section 57 of the Education Act, 1944, ceased and the provisions under Section 34 of this Act now apply to children previously recorded as unsuitable for education at school.

Details relating to the formal ascertainment of handicapped pupils during 1971 are given in Table 40 and at the end of the year the number of such pupils on the register was 266.

 ${\it Table~40}$ CLASSIFICATION OF HANDICAPPED PUPILS

Category	No. formally ascertained during 1971	No. on the register of H.Ps at 31/12/71
Blind	_	6
Partially Sighted	2	6
Deaf	1	3
Partially Hearing	4	24
Delicate	-	5
Educationally Sub-normal	17	176
Epileptic	_	4
Maladjusted	2	4
Physically Handicapped	1	24
Speech	2	14
Totals	29	266

During 1967, a register was started of pre-school aged children who, early in their school life, might need to be ascertained as Handicapped Pupils. At the end of the year 1 Blind, 6 Partially Sighted, 2 Partially Hearing and 30 Physically Handicapped children were on this "Potentially Handicapped" register. In addition, 24 Delicate, 16 Epileptic, 1 Potentially Maladjusted, together with 1 child with Severe Communication Difficulties were under surveillance. There were also 34 children who are Potentially Educationally Sub-normal or Mentally Sub-normal.

The following table shows the number of ascertained handicapped pupils admitted to special schools during the year and the number in attendance at such schools on the 31st December. The table does not include E.S.N. pupils who were admitted informally.

Table 41
ASCERTAINED HANDICAPPED PUPILS IN SPECIAL SCHOOLS

Category	No. admitted during 1971	No. in att'ce. at 31/12/71	No. waiting adm. on 31/12/71
Blind	1	6	Total Control of the
Partially Sighted	_	3	1
Deaf	-	2	1
Partially Hearing	-	4	1
Delicate	1	3	45
Educationally sub-normal	5	90	15
Epileptic	_	3	
Maladjusted	2	16	
Physically Handicapped		16	
Speech		10	

Educationally Sub-normal Pupils

A considerable proportion of the time of the medical staff is devoted to the individual assessment of children because of suspected backwardness. During the year 45 such reports (on Form 3H.P.) were received as a result of which 43 children were referred for further examination. It was considered that the remaining two children should be kept under observation. The number examined during the year was 20, of whom 17 were recommended for some form of special educational treatment.

Children ascertained as educationally sub-normal pupils who are recommended for educational treatment at a day special school are normally admitted to St. Gwenfaen School, Rhoscolyn. Although the number of children on the school roll at 31st December, 1971, increased to 47, as compared to 43 in 1970, it has not been possible to admit a number of children due to the school's isolated position and the resultant transport difficulties.

The majority of children in need of educational treatment at a residential special school are placed at Treborth Hall, Bangor, and at the end of the year 19 Anglesey children were attending this school. As from September, 1968, pupils have also been admitted on a day basis and 10 places are allocated to Anglesey children. By the end of the year 10 children were attending as day pupils. Thus the day placement facilities at Treborth Hall assist towards alleviating the needs of those children who for geographical reasons are unable to attend St. Gwenfaen.

At the end of the year 28 children were on the register at Ysgol Cefni (previously known as the Junior Training Centre), Llangefni, following the transfer of the premises from the Local Health Authority to the Local Education Authority as from 1st April, 1971, in accordance with the Education (Handicapped Children) Act, 1970.

Defective Hearing.

There were 3 deaf pupils on the register at the end of the year and 24 partially hearing. Six school children were examined by Professor Sir Alexander Ewing at Bangor during the year.

According to the records there are now 13 pupils in Anglesey schools known to have been provided with hearing aids.

Speech Therapy.

The Speech Therapist held 118 sessions during the year and gave 593 appointments. 28 new cases were seen and a total of 75 children received treatment during the year. 20 were discharged. A number of other cases were interviewed but did not require treatment.

Dyslexia and Related Disabilities.

Facilities are now available at the Department of Psychology, University College of North Wales, Bangor to help children suffering from dyslexia, diagnosis and treatment being carried out under the supervision of Professor T. R. Miles.

Spina Bifida Survey.

An initial survey carried out in 1967 to ascertain the number of spina bifida cases amongst Anglesey children born during the period 1st January, 1960, to 31st December, 1967, revealed a known total of 19 cases; 2 further cases were discovered at a later date. 6 new cases came to our notice during 1968, 4 in 1969, 6 in 1970 and a further 2 in 1971, making a total of 39 known cases over the period. The 2 new cases in 1971 died shortly after birth.

Of the overall total, 16 have died, 10 were stillborn and 3 have left the County. Of the 10 remaining Anglesey children, 3 are attending ordinary schools, 2 are attending a residential school for physically handicapped pupils and the remaining 5 are being kept under close surveillance.

Child Guidance.

Children showing evidence of being emotionally disturbed are referred to the Child Guidance Clinics which are held in Bangor and Holyhead under the direction of the Consultant Child Psychiatrist.

Details of work done at the Child Guidance Clinics for the year 1971 are given in Tables 42-44.

Table 42
Anglesey Children seen during 1971

1. At Clinics-Number of attendances:

	No. of					Atte	endano	es			
	indi- vidual	-	Psych	iatrist		1	Psycho	logist		P	S.W.
Clinic	Child- ren seen	Fin	st P	Fur		Fin	rst P	Furi	ther P	First P	Further P
Bangor Holyhead Children	19 32	6 14	10 23	68 121	55 85	6 10	=	6		11 18	72 109
seen at schools	38	-	-	-	-	38	-	-	_	_	-
Totals	89	20	33	189	140	54	-	6	-	29	181

"C"-Child

"P"-Parents or Guardians

Table 43

2. Elsewhere-Number of Visits:

Psychiatric Social Workers	Psychologists
Home Visits and Visits to Other Agencies	School and Other Visits
49	54

Table 44

3. Number of referrals to Psychiatrists during 1971:

Name of Referring Agency	No. of Referrals
School Medical Officer General Practitioners Consultant Paediatricians Other Medical Specialists Courts and Probation Officers Social Services Department Parents Schools and Education Officers Educational Psychologist Others	2
Waiting list at 31/12/71	34 1

Miscellaneous Medical Examinations

The School Medical Officers carried out 60 medical examinations of candidates for admission to courses of training for teaching and a small number of other miscellaneous examinations.

DENTAL SERVICE

Mr. O. C. Jenkins, Principal School Dental Officer, reports as follows:—

"The dental statistics set out in Table 45 reveal that during the year 67.9 per cent. of the total school population were dentally inspected compared with 66.4 per cent. in 1970. The number of pupils treated and the 'courses of treatment completed' during the year, compared with the previous year, decreased by 3.4 and 2.4 per cent. respectively.

It will be noted that whereas during the year there was a slight increase in the number of children dentally inspected there was a corresponding decrease in the number of pupils treated. This would appear to confirm the previous opinion expressed that the caseload of the existing dental staff had reached "saturation point" and thus support the decision to increase the dental establishment and provide an additional mobile dental unit in order to achieve 100% in the dental inspection rate and accomplish the dental treatment of all those children who require such treatment during the year.

I am, therefore, pleased to report the delivery of the aforementioned mobile dental unit towards the end of October and pending the appointment of a permanent Area Dental Officer, who was in fact appointed early in the New Year, two temporary part-time dental officers were employed on a sessional basis.

I would like to mention that always interesting subject of diet. It is regrettable that we have failed to educate our children of the dangers of between-meals snacks. They have substituted for wholesome meals provided by their parents and the Schools Meals Service, a diet of sweets, chocolates and pop, in fact a most unsuitable form of diet. Their relative health must depend on the proportion of the good and poor foods they eat. Poor diet is reflected early in life in the poor condition of teeth and gums. Very often these children are overweight for their age. They too, are the ones who are too tired, night and morning to brush their teeth and have the resultant dirty and disgusting mouths. A poor prospect for good health in later life.

I would like to thank all nursing, office and teaching staffs for their many kindnesses during the last year."

Table 45

Dental Inspection and Treatment

1.	No of pupils inspecte	d by the	Authority's Dental Officers:	
	(a) Periodic age grou	ps		7,028
				593
	(c) Total (periodic ar	d special	ls)	7,621
2.	Number found to rec	uire trea	tment	6,018
3.	Number offered treats	nent		5,344
4.	Number actually treat	ed		5,550
5.	Attendances made by	pupils fo	or treatment	8,028
6.	Half-days devoted to	(a) Ins	pection	112
			eatment	1,126
			tal	1,238
7.	Fillings:		manent Teeth	5,283
			nporary Teeth	2,457 7,740
0	No of total filled.			4,207
0.	No. of teeth filled:	200	manent Teeth	2,171
		100	ral	6,378
9.	Extractions:	(a) Per	manent Teeth	698
		(b) Ter	nporary Teeth	1,585
		(c) Tot	al	2,283
10.	Administration of ger	eral anac	esthetics for extraction	1,098
11.	Emergencies			23
12.	Other Treatments			2,397
13.	Courses of treatment	complete	d	5,260
14.	Orthodontics:			
			m previous year	41
	(c) Cases completed	during th	he yeare year	12
	(d) Cases discontinue	d during	the year	13
	(e) Removable applia	nces fitte	d	13
	(f) Fixed appliances f	itted		-
			Consultant	43
15.	Number of pupils sup	plied wit	th dentures	11

MEDICAL INSPECTION AND TREATMENT RETURNS

Year ended 31st December, 1971

PART I.

Medical Inspection of pupils attending Maintained Primary and Secondary Schools (including Special Schools).

Table A-Periodic Medical Inspection and Pupils found to require Treatment

A 00 C	No of	Medical Inspecti	idual pupils found a ion to require treat diseases and infesta vermin):	ment (ex-
Age Groups Inspected (by year of birth)	No. of pupils inspected	For defective vision (ex- cluding squint) (3)	For any of the other conditions recorded in Part II (4)	Total individual pupils (5)
1967 and later	386	22	30	44
1966	629	16	45	55
1965	221	2	14	16
1964	56	4	2	6
1963	33	1	4	5
1962	37	-	3	3
1961	29	3	3	6
1960	26	4	5	9
1959	25	3	4	6
1958	24	1	1	2
1957	758	89	37	107
1956 and earlier	341	48	18	64
Totals	2,565	193	166	323
		e B-Other Inspe	ections.	1,1
lumber of Special lumber of Re-insp	Inspections .			,2
	Total .			1,0
	Table (Infestation wi	th Vermin	
i. Total number other authorise ii. Total number of	of examina	ations in the scho	ools by school nurs	

Return of Defects found by Medical Inspections. Table A—Periodic Inspections.

The second second	PERIODIC INSPECTIONS							
Defect Code Defect or No. Disease	Ent	rants	Lea	vers	Otl	hers	T	otal
	T	0	T	0	T	0	T	0
(1) (2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4 Skin 5 Eyes:	2	18	10	16	6	5	18	39
a. Vision	40	13	137	6	16	20	193	39
b. Squint	30	14	10	4	1	-	41	18
c. Other 6 Ears:	1	4	-	1	-	1	1	6
a. Hearing	6	13	6	3	2	11-	14	16
b. Otitis Media	1	11	2	2	-	1	3	14
c. Other	-	6	-	1	_	1	-	8
7 Nose & Throat	21	60	4	22	2	15	27	97
8 Speech 9 Lymph. Glands	3	17 18	1	7 5	1000	5	4	24 28
10 Heart	-	17	1	11	1	6	4	34
11 Lungs	2 5	22	2	5	1	3	7	30
12 Developmental:			-	3		3		
a. Hernia	1	3	-		-	-	1	3
b. Other 13 Orthopaedic:	6	49	3	32		23	9	104
a. Posture	-	6	1	5	1	2 5 2	2	13
b. Feet	25	26	11	12	6	5	42	43
c. Other 14 Nervous System:	2	8	3	9	1	2	6	19
a. Epilepsy	2	9	5	1		1	7	11
b. Other	_	3	3	1		1	7	11 4
15 Psychological:		-			1			-
a. Developm't	1	9	3	10	1	1	5	20
b. Stability	-	10	-	3	-	-	-	13
16 Abdomen	1	16	4	3	1	4	6	23
17 Other	1	1	-	-	1	2	2	3

T.—Number requiring treatment.

O.—Number to be kept under observation.

PART II. (Continued)

Table B.—Special Inspections

	Special Ir	nspections
Defect Defect or Disease	Requiring	Requiring
Code	Treatment	Observation
No. (2)	(3)	(4)
(1) (2)	(3)	(')
4 Skin	4	2
5 Eyes: a. Vision	65	24
b. Squint	6	2
c. Other	1	_
6 Ears: a. Hearing	,	40
b. Otitis Media		1
c. Other		-
7 Nose and Throat	25	18
8 Speech		11
9 Lymphatic Glands	22	1
10 Heart	2	18
11 Lungs	4	6
12 Dayslanmental:	100000000000000000000000000000000000000	
12 Developmental:	1 .	1
b. Other		16
	The state of	
13 Orthopaedic: a. Posture	2	2
b. Feet	100	14
c. Other	0.0	1 1 1 2 2
14 Nervous System:	2	-
a. Epilepsy	2 2	1 -
b. Other		- 3-3-3-3-3
15 Psychological:	22	3
a. Development		1
b. Stability	3	2
16 Abdomen	1 4	2
17 Other		

PART III

TREATMENT TABLES	No of cases known to have been dealt wit
Table A.—Eye Diseases, Defective Vision and Squint: External and other, excluding errors of refraction and squint Errors of refraction (including squint)	26 670
Total	696
No of pupils for whom spectacles were prescribed	259
Table B.—Diseases and Defects of Ear, Nose and Throat: Received operative treatment: (a) for diseases of the ear (b) for adenoids and chronic tonsilitis (c) for other nose and throat conditions Received other forms of treatment.	13 9 2 26
Total	50
Total number of pupils in schools known to have been provided with hearing aids: (a) 1971	1 12 298
Total	298
Table D.—Diseases of the Skin (excluding Uncleanliness, see Part I Table C): Ringworm—Scalp Ringworm—Body	
Scabies Impetigo Other Skin Diseases	6 1 13
Total	
(a) Under Child Guidance Treatment and Speech Therapy (b) Under Speech Therapy arrangements	. 67
Total	. 142
Table G.—Other Treatment given: (a) Miscellaneous Minor Ailments (b) Pupils who received convalescent treatment under School Health Service arrangements	i –
(c) Pupils who received B C G vaccination	. 642
(i) Pupils given Breathing Exercises (ii) Treated at Hospitals (iii) Enuresis Alarms (iv) Ultra Violet Light	. 531
Total	. 1,212

SCHOOL CLINICS

The present arrangements regarding school clinics are as follows

A Local Education Authority Clinics:

Type Location Sessions (a) St. David's Priory, Holyhead Dental (b) Clinic, Isgraig, Llangefni (c) County Sec. School, Menai Daily when A.D.O. is Bridge operating in the area (d) New Clinic, Madyn Road, Amlwch (e) Four Mobile Clinics Clinics conducted by the Local Education Authority on behalf of or by the Welsh Hospital Board on Local Authority Premises: Ophthalmic (a) County Secondary School 1. Amlwch An average of 1 clinic per week is held in (b) County Secondary School, the County alternating Menai Bridge between the various centres according to (c) St. David's Priory, Holyhead the numbers awaiting treatment in the four (d) Clinic, Isgraig, Llangefni catchment areas 2. (a) C. & A. General Hospital, Orthoptic Weekly (b) St. David's Priory, Holyhead 1st, 3rd and 5th Tuesdays monthly (a) St. David's Priory, Holyhead \ Once monthly alter-Orthopaedic 3. (b) Clinic, Isgraig, Llangefni f nately. (a) St. David's Priory, Holyhead Monday and Wednes-Physiotherapy 4. day (mornings). (b) Clinic, Isgraig, Llangefni ... Thursday (morning). (c) County Secondary School Menai Bridge Friday (morning). (d) County Sec. School, Amlwch Tuesday (morning). Alternate Thursdays. St. David's Priory, Holyhead Child Guidance 5. (a) Clinic, Isgraig, Llangefni Speech Therapy (b) County Sec. School, Menai > Monday (morning). Monday (afternoon), (c) St. David's Priory, Holyhead and Tuesday (all day).

APPENDIX "A"

CONSTITUTION OF HEALTH COMMITTEE 1971/72

Chairman: Mr. Llewelyn Lewis

Vice-Chairman: Mrs. E. G. Williams, J.P.

*Mr. Frank Bell

Mr. N. Ceen

Mrs. M. A. Edwards

*Major C. Fanning Evans, J.P.

*Mr. D. A. Godfrey

Mr. O. T. L. Huws

Mrs. A. Arthur Jones

Mr. A. Ifan Jones, M.B.E.

Mrs. A. Lloyd-Jones

+Mr. H. Jones, M.B.E., J.P.

Dr. Leslie W. Jones, O.B.E.

Mr. Llewelyn W. Jones

Mr. Thomas Jones

+Mr. William Jones

*Dr. W. Parry-Jones

Mr. J. E. O'Toole

Mr. Albert Owen

Mr. Leslie G. Owen

Mr. D. Thomas

Mr. G. I. Thomas

*Co-opted Members +Ex-officio

MEMBERS OF ANGLESEY EDUCATION WELFARE COMMITTEE 1971/72

Chairman: Mrs. E. G. Williams, J.P.

Vice-Chairman: Dr. Leslie W. Jones, O.B.E.

Mrs. M. A. Edwards

Mr. R. Edwards

Mr. D. Evans

Mr. J. W. Gruffydd

Rev. D. R. Hughes

Mr. O. E. Hughes

Mr. R. O. Hughes

Mrs. A. Lloyd Jones

Mr. Hefin W. Jones

Mr. J. Gwynedd Jones

Mr. J. H. Jones

Mr. Llewelyn W. Jones

Mr. O. R. E. Jones

Mr. Thomas Jones

Mr. T. H. Jones

Mr. D. R. Lewis

Mr. Llewelyn Lewis

Mr. T. Lovett, O.B.E.

Mr. J. E. O'Toole

Mr. Leslie G. Owen

Mr. R. H. Owen

Mr. W. Charles Owen

Mr. Robert Pritchard

Mr. G. I. Thomas

Mr. O. J. Thomas

Rev. R. M. Thomas

Rev. D. J. M. Williams, J.P.

Mr. D. Manley Williams

Mr. G. Alun Williams

Mr. S. T. Williams

APPENDIX "B"

SENIOR STAFF OF THE COUNTY HEALTH DEPARTMENT, 1971

County Medical Officer of Health, & Principal School Medical Officer Medical Officers in Department and School Medical Officers Principal Dental Officer

Consultant Obstetricians

Consultant Paediatrician

Chest Physician

Consultant Ophthalmologists

Consultant Orthopaedic Surgeon

Consultant Venerealogist Consultant E.N.T. Surgeon Consultant Anaesthetists

Consultant Child Psychiatrist

Speech Therapist Orthoptist Physiotherapists G. Crompton, M.B., B.Ch., D. (Obst.) R.C.O.G., D.P.H., M.F.C.M.

†G. H. Browse Roberts, M.A., M.B., B.Ch., B.A.O., D.P.H., L.M. †W. Arthur Jones, L.M.S.S.A., M.F.C.M., D.P.H.

O. C. Jenkins, L.D.S., R.C.S.Eng., D.D.S. (Toronto).

H. W. Evans, B.D.S. J. Barcroft, L.D.S.

O. Vaughan Jones, M.D., F.R.C.S., F.R.C.O.G.

*W. Macfarlane, M.B., Ch.B., F.R.C.O.G,

*Gwyn R. Griffith, M.D., F.R.C.P., D.P.H.. D.C.H.

*J. Glyn Jones, M.A., M.D., B.Chir., M.R.C.S., L.R.C.P.

*G. L. Harper, M.R.C.S., L.R.C.P., D.O. *H. K. Mehta, M.B., B.S. (Bombay), F.R.C.S., D.O.

*G. I. Roberts, M.B., Ch.B., M.Ch. (Orth.) F.R.C.S.

*H. Vernon Williams, M.R.C.S., L.R.C.P.

*Eiron Jones, F.R.C.S.

*T. R. Hardy, M.B., Ch.B., M.R.C.S., L.R.C.P., F.F.A., R.C.S., D.A.

*D. E. Rowlands, M.R.C.S., L.R.C.P., F.F.A., R.C.S., D.A.

*A. C. Peterson, M.B., Ch.B., F.F.A., R.C.S., D.A.

*E. Simmons, M.D., L.R.C.P., L.R.C.S. (Edin.), L.R.F.P.S. (Glasgow).
*G. M. Nicholl, M.A., M.R.C.G.P., D.P.M.

Miss S. M. Robinson (left 31.10.71).

††Miss H. M. Edwards. ††Mrs. H. Lloyd Williams. Mrs. M. J. Horton-Evans.

† Also part-time District Medical Officers of Health.

* Under contract with Welsh Hospital Board.

†† Employed by the Caernarvon and Anglesey Hospital Management Committee.

80 Chief Administrative Assistant B. G. Rhodes, L.M.R.S.H. Admin, Assistant School Health Ser-Miss E. Jones, D.M.A. vice. Miss J. E. Jones, S.R.N., S.C.M., Q.N., Director of Nursing Services H.V. Cert. Nursing Officer (Health Visiting) Miss M. E. Clarke, S.R.N., S.C.M., H.V. Cert., Q.N., R.N. Cert. (Ontario). Mrs. E. C. Parry, S.R.N., S.C.M. Nursing Officer (Home Nursing) Non-Medical Supervisor of Mid-Mrs. M. Murphy, S.C.M., S.E.N. wives 9 Health Visitors. Nursing Staff 3 School Health Visitors. 1 School Nurse. 1 Clinical Assistant (part-time). 16 District Nurses/Midwives. District Nurse. 11 Nursing Auxiliaries. Deputy Ambulance Officer Lefi Williams. R. J. Jones, C.S.W. †Senior Welfare Officer 4 Mental Welfare Officers. †Welfare Officers 2 Social Welfare Officers. 1 Social Welfare Officer for the Blind. 2 Occupational Therapists. Mrs. G. Griffith. †Home Help Organiser Mrs. Mabel Wilson, J.P. *Supervisor of Junior Training Centre H. O. Williams. †Supervisor of Adult Training Centre †Matrons/Superintendent-Homes for the Aged: Miss B. Lloyd Jones, S.R.N., R.M.N. Llys-y-Gwynt Mrs. M. Chamberlain, S.R.N. Park Mount

Park Mount Garreglwyd Brwynog Haulfre

H. Pierce

Miss E. O. Roberts. Miss M. E. Owen.

† Transferred to Social Services Department on 1.5.71 * Transferred to Education Department on 1.4.71

ASSOCIATED OFFICERS OF THE COUNTY COUNCIL

Clerk of the County Council
County Treasurer
County Architect
Director of Education
County Water Engineer and Manager
Idris Davies, O.B.E., LL.B.
I. L. Pugh, F.I.M.T.A.
N. Sq. Johnson, A.R.I.B.A., A.M.T.P.I.
D. G. Hopkin, B.A., LL.B.
A. B. Groves, B.Sc. (Hons.), A.M.I.C.E.,

M.I.W.E.
D. A. Parry, B.A., D.A.S.S.
H. A. Thomas, M.I.W.M.A.

Director of Social Services Chief Inspector, Consumer Protection Public Analyst

R. Sinar, B.Pharm., B.Sc., M.Ph.A., M.Chem.A., F.P.S., F.R.I.C., A.Inst. W.P.C.

APPENDIX "C" ANTE-NATAL CLINICS

Name	Address	Sessions held on	Time
Amlwch	Madyn Road	2nd and 4th Thursday	2 p.m.
	St. David's Priory	Every Wednesday	2 p.m.
	Isgraig Clinic	1st and 3rd Thursday	2 p.m.

INFANT WELFARE CLINICS

Name	Address	Sessions held on	Time
Amlwch	Madyn Road	1st and 3rd Thursday	2 p.m.
Aberffraw	Village Hall	1st and 3rd Tuesday	2 p.m.
Beaumaris	New Street	Every Thursday	2 p.m.
Benllech	Memorial Hall	1st and 3rd Monday	2 p.m.
Bryngwran	Youth Club	3rd Thursday	2 p.m.
Cemaes Bay	Village Hall	2nd and 4th Wednesday	2 p.m.
Holyhead	St. David's Priory	Every Thursday	2 p.m.
Llangefni	Isgraig Clinic	2nd and 4th Thursday	2 p.m.
Llanfairpwll	Presbyterian Ch'ch	2nd and 4th Friday	2 p.m.
Menai Bridge	Presbyterian Ch'ch	1st and 3rd Wednesday	2 p.m.
Newborough	Memorial Hall	1st and 3rd Wednesday	2 p.m.
Valley	Court Room	2nd and 4th Monday	2 p.m.

CYTOLOGY CLINICS

Name	Address	Sessions held on	Time
Amlwch	Isgraig Clinic	1st Tuesday 1st Tuesday 1st and 3rd Monday	2 p.m. 2 p.m. 2 p.m.

FAMILY PLANNING CLINICS

Name	Address	Sessions held on	Time
Amlwch	Madyn Road	1st and 3rd Thursday	10 a.m.
	Isgraig Clinic	Every Thursday (even.)	5 p.m.
	St. David's Priory	Every Friday	1,30 p.m.

MOTHERCRAFT AND RELAXATION CLINICS

Name	Address	Sessions held on	Time
Amlwch	New Clinic, Madyn Road	2nd and 4th Tuesday	2 p.m.
Holyhead	St. David's Priory Isgraig Clinic	Every Tuesday 1st, 3rd and 5th Tues.	10 a.m. 2 p.m.

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OTHER CLINICS

Name	Address	Sessions held on	Time
Parents Guidance Clinic	Llangefni — Isgraig Clinic	1st Monday	By appoint.
	Llangefni — Isgraig Clinic	1st and 2nd Monday	By appoint.
Developmental Assessment Clinics	Holyhead — St. David's Priory	1st and 3rd Thursday	By appoint
Immunisation Clinic	Llangefni — Isgraig Clinic	2nd and 4th Wednes- day	2 p.m.

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