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Flintshire County Council.



INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

REPORT

BY THE

MEDICAL OFFICER

ON THE

HEALTH

OF

FLINTSHIRE

DURING THE YEAR

1948.

Photostat Copy

REPORT

RESEARCH

ANALYSIS

CONCLUSIONS

RECOMMENDATIONS

FLINTSHIRE COUNTY COUNCIL.

County Health Offices,
MOLD.

To the Chairman and Members
of the Flintshire County Council.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting to you my Report on the Health of the County of Flint during the year 1948—a year during which important and far reaching legislation became operative on the “appointed day” (July 5th).

The National Health Service Act, 1946, transferred some of the former functions of the County Council to other administrative bodies, extended other functions of the Council and imposed new duties.

The National Assistance Act, 1948, transferred some powers of the Council to the Assistance Board, and the much maligned Poor Law became defunct. The County Council, however, remained responsible for the provision of residential accommodation for certain classes of persons, and for welfare services for the blind, the deaf, the dumb, and for persons substantially and permanently handicapped by illness, injury or congenital deformity.

The Children's Act, 1948, transferred to the Children's Committee functions formerly administered by the Health Committee, the Education Committee and the Public Assistance Committee.

As a result, there was a considerable administrative upheaval, and Members will appreciate that it has been no simple matter to report upon a year during which the work of the Health Department has changed very considerably and to which further reference will be made in the body of the Report.

I wish to acknowledge most gratefully the assistance which I have received from you as a Council, from your Administrative Officers, from the County District Councils and their officers, and last but not least from my very loyal Departmental Staff.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

A. E. ROBERTS,

County Medical Officer.

ADMINISTRATION.

A.—DEPARTMENTAL STAFF.

County Medical Officer of Health : Aneurin Evan Roberts, M.B., B.S. (Lond.), D.P.H. (Liverp.).

Deputy County Medical Officer : (Mrs.) A. E. Gwladys Rowlands, M.B., B.S., D.P.H. (Lond.), M.R.C.S., L.R.C.P.

Assistant Medical Officers : T. Wynne Brindle, M.B., Ch.B. (Manch.), D.P.H. (Liverp.). (Mrs.) Betty J. McConnell, B.Sc., M.B., B.Ch. (Wales). Left 30/9/48. (Mrs.) Edna Pearse, M.B., Ch.B., C.P.H. (Liverp.).

During the year, in view of vacancies on the medical staff, and of experience of the working of the National Health Service Act, it was decided to re-organise the health services. Further, the time was considered opportune to implement and amend the Council's scheme for the employment by groups of district councils of medical officers of health who would also act as assistant county medical officers, and who would be debarred from private practice as medical practitioners. On the resignation of Dr. McConnell, an attempt was made, after consultation with the Regional Hospital Board and the Hospital Management Committee, to appoint a female medical officer who would hold the joint appointment of assistant county medical officer and medical officer in charge of the Catherine Gladstone Maternity Home, but no applications for the post were received. Early in 1949, the reorganisation was completed, and two well qualified female assistant medical officers were appointed to fill vacancies on the whole-time staff. In addition, three male medical officers were appointed to act jointly as assistant county medical officers and medical officers of health for the grouped county district councils.

Dental Surgeons : Peter Lunt, L.D.S., R.C.S. (Eng.); W. B. Glynn Jones, L.D.S.; Leslie E. Hanson, L.D.S.; Betty E. Williams, B.Ch.D., L.D.S. (Left 14/11/48). One Dental Attendant assists each Dental Surgeon.

County Sanitary Inspector : Elwyn Lewis, M.R.S.I., M.S.I.A. (Since 1/7/48).

Supervisor of Nurses : Mrs. Frances M. Williams, S.R.N., S.C.M., H.V.Cert., R.San.Inst.Cert.

District Health Visitors : (Acting jointly as Health Visitors and School Nurses. All State Registered Nurses and State Certified Midwives and with Health Visitors' Certificate or other qualification except as otherwise shown): Miss M. Ayrton, Miss F. S. Evans, Miss L. M. Eyes, Mrs. J. M. Hampson (deceased), Mrs. M. E. Hawkins*, Miss Elizabeth Jones, Miss Ellen Jones, Miss A. Molloy, Mrs. M. M. Nield, Mrs. M. E. Pearse, Miss M. Prince, Miss M. E. Roberts, Mrs. J. Thomas, Mrs. M. P. Thomas, Mrs. D. Thompson, Miss A. M. Whitaker (Left 31/8/48).

* Replaced Nurse Whitaker.

Infant Life Protection Visitors : The above-named Health Visitors and School Nurses, and the Supervisor of Nurses.

County Tuberculosis Visitors : Miss D. V. Gray, S.R.N., S.C.M., H.V.Cert., M.S.R., and Miss Gwenneth Jones, S.R.N., S.C.M., H.V.Cert.

County Domiciliary Midwives : (Queensferry) Mrs. E. Barker ; (Flint) Mrs. D. E. Williams ; (Buckley) Mrs. A. M. Saunders ; (Connah's Quay) Mrs. J. E. Bennett ; (Saltney) Mrs. M. E. Gibson ; (Flint) Miss Ivy Leece ; (Shotton) Mrs. A. M. Jenkins.

In addition to the above, the County utilised, through the County Nursing Association, the midwifery services of 28 district nurse midwives and village nurse midwives whose duties included both midwifery and general nursing. The services of all these Nurses except two were transferred to the County Council on the appointed day. The two nurses who terminated their services were replaced.

Domiciliary General Nurses.

On July 5th, the services of 6 nurses previously employed by the County Nursing Association as whole-time domiciliary nurses were transferred to the County Council.

Chief Clerk : William Davies, A.R.I.P.H.H. (Also Chief Clerk School Health Department).

Senior Clerks : William Ithel Roberts (County Health) ; Arthur Whitley (School Health).

B.—HEADQUARTERS.

County Health Offices, Mold.

Telephone : 106 Mold.

C.—ASSOCIATED OFFICERS.

Clerk to the County Council : Mr. W. Hugh Jones, County Offices, Mold.

County Surveyor : Mr. P. J. Maddicks, B.Sc., A.M.I.C.E., County Buildings, Mold.

Deputy County Architect : Mr. W. Griffiths, L.R.I.B.A.

Food and Drugs Chief Inspector : Mr. J. Fenlli Roberts, M.B.E. (Chief Constable), Police Headquarters, Mold, to 30/6/48.

County Treasurer : Mr. R. J. Jones, County Offices, Mold.

Public Assistance Officer : Mr. Isaac Hughes (National Assistance Administrative Officer since 5/7/48), Holywell.

Welfare Officers : From 5/7/48—Messrs. T. Wesley Hughes, W. H. Iball, Walter Davies and Ernest Williams.

These officers are also "duly authorised officers" for the purposes of the Lunacy and Mental Treatment Act.

Mr. Wesley Hughes is also duly authorised officer for the purposes of the Mental Deficiency Acts.

D.—PART-TIME OFFICERS.

Obstetric Consultant (Honorary) to the Catherine Gladstone Maternity Home :
Mr. J. Gardiner Wigley.

Puerperal Fever and Obstetric, &c., Specialist (Fee-paid) : Mr. J. Gardiner Wigley.

Ophthalmic Consultants (Fee-paid) : Mr. E. F. Wilson, Chester, and Mr. Shuttleworth, Colwyn Bay.

Public Assistance (Institutional) Medical Officers (Salaried) To 4/7/48 :
(Holywell) Dr. A. O. Jones ; (St. Asaph) Dr. A. H. Holmes.

Public Vaccinators (Fee-paid), also Public Assistance Medical Officers. To 4/7/48 : Drs. Herford, Buckley ; Wm. A. Hennessey, Marford ; J. G. Ll. Jones, Hawarden ; R. R. Dalling, Caergwrle ; I. P. Nelis, Mold ; L. M. E. Milne, Flint ; Jones and Morris, Holywell ; E. O. N. Armstrong, Prestatyn ; H. S. Bell, Prestatyn ; E. O. Lakey, Rhyl ; A. H. Holmes, St. Asaph ; W. M. Casper, Overton ; R. B. McColl, Hanmer.

Health Officers for the various Sanitary Districts.

District.	Medical Officer.*	Senior Sanitary Inspector. †
Buckley Urban	Dr. D. Fraser, Post Office House, Brunswick Road, Buckley	Mr. A. G. Watkin, Council Chambers, Buckley.
Connah's Quay Urban	Dr. M. J. Gavin, White Lodge, Wepre Drive, Connah's Quay	Mr. W. A. Barker, Council Offices, Connah's Quay.
Flint Municipal Borough	Dr. W. A. F. Twemlow, Ivy Bank, Flint	Mr. W. J. Avery, Council Offices, Flint.
Holywell Urban	Dr. C. E. Morris, Bodowen, Holywell	Mr. J. Topham, U. D. C. Offices, Holywell
Mold Urban	Dr. I. Philippine Nelis, The Manse, Mold	Mr. George Horn, U. D. C. Offices, Mold.
Prestatyn Urban	Dr. J. Tudor Griffiths, Leaton, Prestatyn	Mr. I. W. Jones, Council Offices, Prestatyn.
Rhyl Urban	Dr. E. Hughes Jones, Council Offices, Rhyl	Mr. E. L. Ll. Jones, Council Offices, Rhyl.
Hawarden Rural	Dr. J. Llewellyn-Jones, Hafod, Station Road, Hawarden	Mr. M. Emllyn Thomas, Council Offices, Hawarden (No. 1 District);
		Mr. Watkin Williams, Hawarden Road, Abermorddu (No. 2 District).
Holywell Rural	Dr. I. P. Nelis, The Manse, Mold	Mr. D. O. M. Jones, R. D. C. Offices, Holywell.
Overton Rural	Dr. W. M. Casper, Overton Hall, Ellesmere	Mr. R. L. Higgins, Willow Street, Overton.
St. Asaph Rural	Dr. A. H. Holmes, Angorfa, St. Asaph	Mr. R. P. Barlow, Council Offices, St. Asaph.

† Full-time.

* Part-time.

Section A.

STATISTICS AND SOCIAL CONDITIONS OF THE COUNTY.

1. AREA.

The area of the County is 255.7 square miles, or 163,707 statutory acres, that of its separate geographical divisions being respectively: Main Division, 133,308 acres; the Maelor Hundred, 29,749 acres; the Civil Parish of Marford and Hoseley, 650 acres.

2. POPULATION.

The population of the County, estimated as at mid-year, 1948, was 138,300, which is an increase of 3,820 on the previous year's figures.

3. FINANCIAL.

The product of a penny rate, computed for the County in respect of the year 1949-50 was £3,065.

4. SOCIAL CONDITIONS.

Considerable social changes may be said to have occurred in consequence of the provisions of the National Health Service Act of 1946 and the National Insurance Act of the same year. These, however, are discussed elsewhere in this Report.

5. BIRTHS.

During the year under review, 2,720 births were registered as pertaining to the County, that total being made up as follows:—

Description.	Live.	Still.	Total.
Legitimate	2499	76	2575
Illegitimate	139	6	145
Totals	2638	82	2720

The number of live births gives a live-birth rate per 1000 population of 19.1, which betters the rate for England and Wales as a whole, namely 17.9.

The number of still-births gives a still-birth rate per 1000 population of 0.59, which is worse than the rate for England and Wales as a whole, namely 0.42.

The proportion of illegitimate births, which had risen very considerably during the War-years, has since declined. In 1947 it was 69.3 per 1000 total births, and in 1948 it has fallen to 53.3.

6. DEATHS.

During the year under review, a total of 1516 were ascribed to the County, representing a death rate of 10.96 per 1000 population, which is slightly higher than the rate for England and Wales, namely 10.8.

Table 2 sets out the various causes of death.

It will be observed that, as in previous years, Heart Disease is responsible for the largest number of deaths—413 or 27.2 per cent. of the total deaths.

Next follow in order of incidence Cancer with 258 deaths or 17.0 per cent. of the total, Intracranial Vascular Lesions with 176 deaths or 11.6 per cent. of the total, while Tuberculosis (all forms) was responsible for 84 deaths, or 5.5 per cent. of the total. The following table shows the ages at which death occurred :—

Cause.	No. of Deaths.	Ages.				
		Under 15.	15-45.	45-65.	65+.	
Heart Disease ...	413	...	17	...	83	...
Cancer ...	258	...	18	...	99	...
Int. Vasc. Les. ...	176	...	4	...	31	...
T.B. (all forms)...	84	...	50	...	26	...

Whereas Heart Disease, Cancer and Intracranial Vascular Lesions take their highest toll of life in the 65+ age group, Tuberculosis continues to take its highest toll in the 15-45 age group. Of the total deaths (84) due to Tuberculosis, 73 were from Tuberculosis of the Respiratory Systems and 11 from other forms of Tuberculosis.

INFECTIOUS DISEASE—There were no deaths from Typhoid Fever, Cerebro-Spinal Fever, Whooping Cough, Diphtheria, Poliomyelitis or Encephalitis, and only one death occurred as the result of Scarlet Fever and one from Measles.

INFANT DEATHS—The number of infants who failed to survive the first year of life was 83, and it is pleasing to report a further decline in the Infant Mortality Rate. In 1911, the rate was 108 per 1000 live births. By 1938 it had been reduced by almost 50 % to 55.06 per 1000 live births. By 1948, it had declined still further to 31.46, which is lower than the rate for England and Wales, namely, 34.

The principal causes of infantile deaths (as shown by Registrar General) were :—

Congenital Malformations, Birth Injuries, etc.	...	29
Premature Births	...	19
Pneumonia	...	18

PREMATURE BIRTHS—The following table shows, amongst other things, the number of premature children born (all infants weighing under 5½ lbs. at birth are considered to be premature), the number who died during the first month of their lives, and the number who survived the first month :—

Table I.
CARE OF PREMATURE INFANTS.
Year 1948.

Description.	Weight at Birth.				Total.
	Under 3 lbs.	3-4 lbs.	4-5½ lbs.		
1. Number of prematurely born infants, i.e., Flintshire infants weighing 5½ lbs. or less at birth (excluding those born dead) who were born during the year :—					
(a) In the mother's own home ...	2	7	46	...	55
(b) In a National Health Service Hospital or Maternity Home ...	7	6	65	...	78
(c) In a Private Nursing Home ...	1	3	13	...	17
(d) Total ...	10	16	124	...	150
2. Of those in 1 (a) above :—					
(a) Number transferred to Hospital ...	—	1	1	...	2
(b) Number nursed entirely at home ...	2	6	45	...	53
3. Of those in 2 (b) above, number who :—					
(a) Died in first 24 hours ...	1	—	2	...	3
(b) Died between 2nd and 8th day ...	—	2	—	...	2
(c) Died between 8th and 28th day ...	1	—	—	...	1
(d) Survived 28 days ...	—	4	43	...	47
4. Of those in 1 (c) above :—					
(a) Number transferred to Hospital ...	—	—	—	...	—
(b) Number nursed entirely in Private Nursing Home ...	1	3	13	...	17
5. Of those in 4 (b) above, number who :—					
(a) Died in first 24 hours ...	1	1	—	...	2
(b) Died between 2nd and 8th day ...	—	1	1	...	2
(c) Died between 8th and 28th day ...	—	—	1	...	1
(d) Survived 28 days ...	—	1	11	...	12

NOTE : The survivance, etc., of those classified in Sections 1 (b),
2 (a) and 4 (a) is reported upon by the Hospitals concerned.

MATERNAL MORTALITY—Four deaths were ascribed to causes connected with childbirth, giving a maternal mortality rate of 1.47 per 1,000 total births (live and still). One only was ascribed to puerperal sepsis.

7. OCCUPATIONAL DISEASES.

As I have said in previous reports, many Flintshire men are engaged in occupations generally regarded as having a prejudicial effect on health. The incidence of sickness and invalidity resultant thereon, however, is very low, and there is every reason to believe that the officers of our local authorities and of our quarries and other centres of employment are very careful and conscientious in their observance of the necessary precautions.

Table 2.

AREA AND POPULATION.

District.	Area in Statute Acres (Land & Inland Water)	Population.		
		Estimated Mid-year.		
		1946	1947	1948
Urban—				
Buckley ...	2646	7348	7470	7529
Connah's Quay	4214	6811	7102	7201
Flint (M.B.) ...	6243	13160	13554	14060
Holywell ...	2532	7785	7931	7840
Mold ...	1164	6085	6202	6270
Prestatyn ...	3219	8051	8171	8760
Rhyl ...	1700	18300	18400	18680
Rural—				
Hawarden ...	31576	31050	31920	32100
Holywell ...	58515	21270	21410	21840
Overton ...	29749	4580	4857	5865
St. Asaph ...	22149	7430	4763	8155
Total Urban ...	21718	67540	68830	70340
Total Rural ...	141989	64330	65650	67960
Whole County ...	163707	131870	134480	138300

Table 3.

DEATHS—GENERAL.

Summary of Causes.

Cause of Death.	1948.		
	Males	Females	Total
Typhoid and Paratyphoid Fevers ...	—	—	—
Cerebro-Spinal Fever	—	—	—
Scarlet Fever	—	1	1
Whooping Cough	—	—	—
Diphtheria	—	—	—
Tuberculosis of respiratory system ...	45	28	73
Tuberculosis—other forms	7	4	11
Syphilitic diseases	2	1	3
Influenza	1	3	4
Measles	1	—	1
Poliomyelitis and Polio-enceph. (acute)	—	—	—
Encephalitis—acute Inf.	—	—	—
Cancer—Malignant Disease	128	130	258
Diabetes	6	10	16
Intra-cranial vascular lesions	74	102	176
Heart Disease	210	203	413
Other Diseases of the circulatory system	37	17	54
Bronchitis	43	26	69
Pneumonia	37	28	65
Other respiratory diseases	9	7	16
Ulcer of stomach or duodenum	11	2	13
Diarrhoea (under two years)	4	2	6
Appendicitis	—	2	2
Other Digestive diseases	24	27	51
Nephritis	22	20	42
Puerperal and Post-abortive sepsis ...	—	1	1
Other maternal causes	—	3	3
Premature birth	10	9	19
Cong. Malf'n, Birth Injuries, &c. ...	19	11	30
Suicide	7	—	7
Road traffic accidents	11	4	15
Other violent causes	21	13	34
All other causes	60	73	133
Totals	789	727	1516

Section B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

This Section deals chiefly with the services—some old, some new—under Part III of the National Health Service Act, 1946.

The implementation of the new legislation on the "appointed day" has effected considerable changes in the Health Services of the area, and has made the year 1948 a difficult one to report on, as, during the first half of the year, the old services were operating, and in the second half, the new services. Further, the six months during which the new services were operative did not give sufficient time in which to assess fully their impact, and the demands likely to be made upon them.

Further experience will need to be gained of the various services before any comments or criticisms can properly be made.

HOSPITALS, ETC.

On the appointed day—July 5th—all voluntary hospitals and all local authority hospitals, maternity homes and institutions for mental defectives in the area became vested in the Minister of Health, and were due to be administered by the Welsh Regional Hospital Board through its Hospital Management Committees.

The Royal Alexandra Hospital, Rhyl, the Prince Edward War Memorial Hospital, Rhyl, the Holywell Cottage Hospital, the Flint Cottage Hospital, the St. Asaph Isolation Hospital, the Hawarden Isolation Hospital, the Rhyl Isolation Hospital, the Chatsworth House Maternity Home, Prestatyn, and the Catherine Gladstone Maternity Home, Mancot, were included in the group controlled by the Clwyd and Deeside Hospital Management Committee.

The Public Assistance Institutions at Holywell and St. Asaph, being mainly used for the accommodation of the "chronic sick" on July 4th, were also vested in the Minister of Health and included in the same group.

The Mold Cottage Hospital and the Meadowslea Sanatorium were included in the group of Hospitals controlled by the Denbigh and Flint (Wrexham) Hospital Management Committee.

The Fronfraith Institution for Mental Defectives at Rhyl, and the Coed Du Institution were included in the group of Hospitals and Institutions controlled by the North Wales Mental Hospital Management Committee.

None of these Hospital Management Committees was in a position to take over the administration of the hospitals, etc., on the appointed day, and consequently the officials of the County Council continued to administer on behalf of the Management Committee the Fronfraith Institution until September 30th, and the Maternity Homes at Prestatyn and Mancot and the Institution at Holywell and St. Asaph until after December 31st, 1948.

As the Institutions at Holywell and St. Asaph—now known as Lluesty Hospital and the St. Asaph General Hospital—were accommodating “non-sick” as well as “sick” persons immediately before the appointed day, the County Council had power, under the National Assistance Act, 1948, to reserve such accommodation as it needed for carrying out its duties under Section 21 of that Act—the accommodation of aged and other persons who were in need of care and attention which was not otherwise available to them. Consequently, the following number of beds were reserved:—

Hospital.		Males.		Females.		Children.		Total.
St. Asaph	...	28	...	25	...	—	...	53
Holywell	...	22	...	22	...	7	...	51

SPECIALIST SERVICES.

The provision of Specialist Services became the responsibility of the Minister on the appointed day. Consequently, the control and the staffing of the Orthopaedic, Tuberculosis, Venereal Diseases, and other Clinics passed to the Regional Hospital Board.

LABORATORY SERVICES.

The Public Health Laboratory at Conway has continued to provide a most excellent service throughout the year to the County Council and to the County District Councils, and has expanded its service by accepting samples of milk for biological testing for tubercle.

HEALTH CENTRES.

(Section 21, National Health Service Act, 1946).

Section 21 of the National Health Service Act, 1946, imposes upon the County Council as a Local Health Authority, the duty to provide, maintain, equip and staff Health Centres, at which facilities shall be available for:—

- (a) Specialist or other out-patient services ;
- (b) General medical services ;
- (c) General dental services ;
- (d) Pharmaceutical services ;
- (e) Local Health Authority services.

For various reasons (building restrictions, lack of knowledge of type of building required, etc.), the Minister of Health decided that the submission of proposals under this Section by Local Health Authorities should be postponed until a later date. Consequently, no proposals had been formulated by the end of the year.

CARE OF MOTHERS AND YOUNG CHILDREN.

(Section 22).

ANTE-NATAL CLINICS—Eleven Clinics operated throughout the year, at Rhyl, Prestatyn, Holywell, Bagillt, Flint, Shotton, Saltney, Buckley, Mold, Caergwrle, St. Asaph. These Clinics are staffed by the assistant county medical officers and health visitors. All midwives and district nurse midwives are encouraged to attend the Clinics with their patients.

For a period following the appointed day, there was a decrease in the number of expectant mothers attending these Clinics, but before the end of the year, attendances had returned to their previous level.

The following table shows the number of patients and their attendances at the various Clinics :—

Table 4.

ANTE-NATAL ATTENDANCES OF WOMEN AT CENTRES.

Centre.			Number of Sessions.	Patients dealt with.			Aggregate Attend- ances.
				Old* Cases.	New Cases.	Total Cases.	
Bagillt	...	...	22	5	26	31	84
Buckley	...	...	21	5	25	30	65
Caergwrle	...	...	21	12	31	43	119
Flint	...	...	21	16	101	117	421
Holywell	...	...	21	13	113	126	441
Mold	...	...	21	17	104	121	437
Prestatyn	...	...	22	7	66	73	304
Rhyl	...	...	22	9	93	102	407
Saltney	...	...	22	9	52	61	243
Shotton	...	...	48	44	201	245	1053
St. Asaph	...	...	22	1	8	9	26
Totals	...	...	263	138	820	958	3600

* Patients whose names were on the books at the beginning of the year.

POST-NATAL CLINICS operated at 10 Centres in the County throughout the year, and the following statistics show that, in spite of a falling off of attendances immediately after the appointed day, the services at these centres were as fully appreciated as in previous years.

Table 5.

POST-NATAL ATTENDANCES OF WOMEN AT CENTRES.

Centre.	Patients dealt with.			Aggregate Attend- ances.
	Old* Cases.	New Cases.	Total Cases.	
Bagillt	0	1	1	1
Buckley	1	4	5	8
Caergwrle	1	2	3	4
Flint	1	7	8	17
Holywell	3	7	10	13
Mold	5	8	13	16
Prestatyn	2	3	5	8
Rhyl	2	10	12	19
Saltney	—	1	1	1
Shotton	3	10	13	22
St. Asaph	—	—	—	—
Totals	18	53	71	109

* Patients whose names were on the books at the beginning of the year.

CHILD WELFARE CENTRES were operating in 13 areas throughout the year (Rhyl, Prestatyn, Mostyn, Holywell, Bagillt, Flint, Shotton, Saltney, Broughton, Buckley, Mold and Caergwrle), and one new Clinic was opened, at Leeswood, in December.

The attendances at these Clinics continued at a very satisfactory level, and statistics are given in the Table below.

One aspect of the National Health Service Act, however, causes certain difficulties, not only at these Clinics but also at the Ante-Natal Clinics and the School Clinics. Assistant County Medical Officers are not recognised by the Executive Council as medical practitioners for the purposes of Part IV of the Act. Consequently, if the Medical Officer prescribes certain medicaments for mother or child, they cannot be obtained from the chemists free of charge. The mother is therefore forced with two alternatives, (a) to pay for the medicaments, or (b) to swell the number of patients in the already overcrowded surgeries of the overburdened general practitioners.

Table 6.

INFANT WELFARE CENTRES.

Summary of Attendances, etc.

Description	Bagillt	Broughton	Buckley	Caergwrle	Flint	Holywell	Leeswood*	Mold	Mostyn	Prestatyn	Rhyl	Saltney	St. Asaph	Shotton
Number of Sessions held, i.e., number of times Centre opened during the year	46	49	48	48	48	49	2	49	23	48	49	49	49	49
Children who attended the Centre during the year for the first time and who, on the date of their first attendance, were—														
Aged under 1 year ..	73	94	200	132	106	123	26	211	41	138	242	148	66	371
Aged 1 to 5 years ..	7	60	26	26	47	28	3	21	3	4	22	61	6	20
Total	80	154	226	158	153	151	29	232	44	142	264	209	72	391
Children who attended the Centre during the year and who, at the end of the year, were—														
Aged under 1 year ..	67	38	200	97	99	110	26	151	31	130	206	83	45	200
Aged 1 to 5 years ..	50	116	31	175	146	179	3	263	56	131	284	126	52	191
Total	117	154	231	272	245	289	29	414	87	261	490	209	97	391
Attendances made at the Centre during the year by children—														
Aged under 1 year ..	252	1005	857	1408	673	1753	39	3289	178	2271	3942	1681	634	4058
Aged 1 to 5 years ..	430	728	92	462	636	141	4	508	194	707	451	381	813	333
Total	682	1733	949	1870	1309	1874	43	3797	372	2978	4393	2062	1447	4391

* Opened on 6/12/48.

DENTAL.

Section 22 of the National Health Service Act imposes upon the local health authority the duty to make arrangements for the care, **including in particular dental care**, of expectant and nursing mothers and of children who have not attained the age of five years and who are not attending primary Schools maintained by a local education authority.

The dental staff, consisting of one senior and three assistant dental officers, was fully occupied in the inspection and treatment of children of school age, and in order to implement the above Section of the Act, provision was made for the employment of two additional dental surgeons. Repeated advertisements, however, failed to elicit any response, for the simple reason that the salaries offered have no relation to the income which could be earned by dentists practising as general dental practitioners under Part IV of the Act.

Further, one of the dental officers terminated her appointment in November and the dental staff was consequently reduced to three.

In order to implement this Section of the Act, it is essential that the treatment, especially of expectant and nursing mothers, should be carried out in properly equipped "ad-hoc" clinics. The provision of such clinics, as already approved by the County Council, has unfortunately been held up by the War, and the subsequent shortage of materials.

In view of the above, it must be admitted with great regret that it has not been possible for the Local Health Authority to carry out its duty with regard to dental care, other than by referring to general dental practitioners expectant and nursing mothers and young children considered to be in need of dental treatment, with a request that they be given priority of treatment.

THE UNMARRIED MOTHER AND HER CHILD.

The six North Wales Authorities agreed upon the joint establishment of a home for the accommodation of certain of these cases for a period both before and after confinement, and negotiations are proceeding for the acquisition of premises which are considered to be suitable for this purpose.

In the meantime, these cases have to be accommodated in homes in England, and I wish to place on record my appreciation of the very great assistance that I have received from the officers of the St. Asaph Diocesan Moral Welfare Association in this respect.

NOTIFICATION OF BIRTHS.

Under the provisions of the Notification of Births Act, 2,706 births were notified to the Authority during the year, the figure being made up as follows :—

Table 7.

BIRTH NOTIFICATION.

Births notified during the year.

Description.	Number.
Live	2626
Still	80
Total	2706

CHILD LIFE PROTECTION.

Although by the Children's Act, 1948, the duties of the County Council with regard to child life protection were transferred from the Health Committee to the Children's Committee and its Children's Officer, the supervision of foster children and of children pending adoption continued to be carried out by the Health Department through its medical officers and health visitors. 467 supervisory visits were paid during the year under review.

MIDWIFERY.

Section 23, National Health Service Act, 1946.

(a) DUTY AS LOCAL SUPERVISING AUTHORITY (SUB-SECTION 1)—Statistics as to the number of midwives practising in the area of the Authority, and the number of supervisory visits paid to those midwives during the year are given in the Tables below.

638 notifications of various kinds were received from Midwives during the year, of which 460 were in respect of calling in "medical aid."

Midwives were temporarily suspended from practice (to prevent spread of infection) on 2 occasions.

TABLE 9.

MIDWIVES IN PRACTICE.

At the end of the year.

Employment.	S.R.N.* and S.C.M.†	S.C.M.† only.	Uncertifi- cated.	Total.
At Royal Alexandra Hospital	3	—	—	3
At St. Asaph General Hospital	6	2	2	10
At Holywell (Lluesty) Hospital	1	—	—	1
At Mancot (C.G.) Maternity Home	4	1	4	9
At Prestatyn Maternity Home	5	—	1	6
In Private Nursing Homes	4	3	—	7
As County Domiciliary Midwives	10	22	—	32
As Private Domiciliary Midwives	5	9	—	14
Total	38	37	7	82

* State Registered Nurses.

† State Certified Midwives.

Table 10.

SUPERVISION OF MIDWIVES.

Employment.	Number of Inspections.		
	Routine.	Special.	Total.
At Royal Alexandra Hospital	3
At St. Asaph General Hospital	1
At Holywell (Lluesty) Hospital	2
At Mancot (C.G.) Maternity Home	11
At Prestatyn Maternity Home	3
In Private Nursing Homes	97
As County Domiciliary Midwives	465
As Private Domiciliary Midwives	125
Total	707*

* The Midwife was inspected while actually at work in 291 of these.

The special visits mentioned in the foregoing Table were paid mainly for the following reasons:—Maternal Death investigation, 5; Puerperal Pyrexia supervision, 31; Ophthalmia Neonatorum supervision, 10; Other emergencies, 149; Non-emergency visits, 164.

(b) ADEQUACY OF NUMBER OF MIDWIVES TO MEET THE NEEDS OF THE AREA—At the end of the year under review the total number of midwives in the area available for attendance on women, **in their homes**, as midwives or as maternity nurses during childbirth, was 46. Of these, 32 were employed by the Local Health Authority either as whole-time domiciliary midwives or as district nurse midwives or village nurse midwives. The remaining 14 were independent midwives.

The following table shows the number of cases attended during the year by these midwives in their capacity as (a) midwife, (b) maternity nurse:—

Table 8.

	(a) As Midwife.		(b) As	
	Cases.	A.N. Visits.	Maternity Nurse.	Cases A.N. Visits.
Local Health Authority Midwives	786	4872	...	361 1499
Independent Midwives	...	138	339	...

As under the provisions of the National Health Service Act, accommodation in maternity homes and the domiciliary services of medical practitioners, were available free of charge Midwives throughout the County were soon complaining that their "bookings" as midwives were decreasing, while their bookings as maternity nurses were increasing, but that the increase on the one hand was not commensurate with the decrease on the other. They naturally resented this restriction of their field of activities, a field which they regarded as peculiarly their own, and one for which they had been specially trained. The following figures show that there was some ground for complaint.

Table 11.

NUMBER OF CASES ATTENDED BY LOCAL AUTHORITY
DOMICILIARY MIDWIVES.

Description.	Period		Period.		Total
	1/1/48—4/7/48.	5/7/48—31/12/48.	1948.		
As Midwives	... 487	... 299	...		786
As Maternity Nurses	... 139	... 222	...		361

Special reference to this matter was made in the Report of the Working Party on Midwives and the whole question was investigated by the Minister of Health. The issue of certain circulars and memoranda by the Ministry has done much to allay the fears of midwives that they were gradually being superseded.

GAS AND AIR ANALGESIA—By the end of the year under review, only 9 of the domiciliary midwives employed by the Local Health Authority were qualified to administer gas and air analgesia and supplied with the necessary apparatus. Much difficulty was being experienced in obtaining vacancies for training, but the situation has since been eased considerably, and vacancies have become more easily obtainable. It is anticipated that by December, 1949, nearly all the Authority's domiciliary midwives will be qualified.

HEALTH VISITING.

Section 24.

14 fully qualified Health Visitors are employed who hold the joint appointment of Health Visitor and School Nurse. Their duties, which included attendance at Clinics at School Routine Medical Inspection, following up and advising expectant and nursing mothers, mothers of children of

pre-school age, child life protection, supervision of out-boarded children, etc., etc., have been further increased by the National Health Service Act. They now have the added duties of giving advice as to the care of all persons suffering from illness, and as to measures necessary to prevent the spread of infection.

The following table indicates the extent of the work done in connection with the visitation of young children, etc.

In addition, 467 visits were paid to foster-children in the Health Visitors' capacity as Child Life Protection Visitor.

Table 12.

THE WORK OF THE COUNTY HEALTH VISITORS.

NOTE—(1) Except in relation to adult persons, the words "First Visits" throughout this Table mean first visits literally, the infants referred to never having been visited in this County at any time before. (2) The work of the County Supervisor of Midwives is excluded herefrom.

GENERAL VISITS AND RE-VISITS TO INFANTS.

				A.	B.	C.
Aged under 1 mth.—First Visits (A); Re-vis. (B); Total (C)				2417	771	3188
Aged 1 to 12 months	do.	do.	do.	574	9846	10420
Aged 1 to 5 years	do.	do.	do.	889	12809	13698
Total aged under 5	do.	do.	do.	3880	23426	27306

CONDITIONS FOUND ON FIRST VISITS.

Feeding—Breast only (A); Breast and other (B);						
Other foods only (C)	...	...	...	1666	385	722

INFECTIOUS DISEASES—CASES VISITED, ETC.

(Note—This Section relates to infants aged under 5 only).

Epid. Diarrhoea—First Visit (A); Re-vis. (B); Total (C)				1	—	1
Pemphigus Neo.	do.	do.	do.	—	—	—
Other Infec. Diseases	do.	do.	do.	452	79	531
Expectant Mothers—First Visits (A); Re-vis. (B); Total (C)				792	432	1224
Deaths (Under 1 mth.)	do.	do.	do.	30	1	31
do. (Aged 1—12 mths.)	do.	do.	do.	16	1	17
do. (Aged 1—5 years)	do.	do.	do.	4	1	5

Table 12 (continued).

	A.	B.	C.
SPECIAL ENQUIRIES, INVESTIGATIONS, ETC.			
Doctors' Fees—First Visits (A) ; Re-vis. (B) ; Total (C) ...	189	90	279
Maternity Home Cases do. do. do. ...	5	—	5
Mental Health Cases do. do. do. ...	11	4	15
Orthopaedic Cases do. do. do. ...	8	1	9
Infant Life Protection do. do. do. ...	294	173	467
Convalescence do. do. do. ...	3	1	4
Other Enquiries, etc. do. do. do. ...	2	2	4

WELFARE CENTRES.

Ante-Natal—Attendances by Nurse ...	—	—	276
Infant Welfare do. ...	—	—	737
Orthopaedic do. ...	—	—	51

In addition to the above, two whole-time Tuberculosis Visitors are employed whose duties are entirely concerned with attendance at the Chest Clinics and the following-up of cases of Tuberculosis in their homes.

The assistance, advice and guidance which they have so ably given has been greatly appreciated by patients and by the Chest Physician.

The following table indicates, statistically, the extent of their work during the year :—

Table 13.
TUBERCULOSIS VISITING.

Description.	Routine Visits.		Special Visits.	
	First Visits.	Total Visits.	First Visits.	Total Visits.
Patients under 16 years of age ...	51	619	8	31
Patients over 16 years of age ...	148	2839	4	118
Total ...	199	3458	12	149

HOME NURSING.

Section 25.

On the 5th July, 1948, it became the duty of the local health authority to "make provision for securing the attendance of nurses on persons who require nursing in their own homes." Previously, the County Council had no power to provide such general nursing services, and the work had been undertaken by voluntary organisations—the District Nursing Associations,

The District Nursing Associations employed 7 Nurses who were engaged whole-time on general sick nursing, and 27 district nurse midwives or village nurse midwives who undertook general sick nursing in addition to midwifery. The services of all these nurses were transferred to the Local Health Authority on the appointed day.

During the period July 5th to December 31st, 1948 :—

The number of cases nursed	...	...	1554
The number of visits paid	...	...	31.370

These figures, covering a period of slightly less than six months, give some indication of the great debt which is owed by the community to the Nursing Associations for having provided these services on a voluntary basis over so many years. The only means of transport for many of the nurses was a "bicycle," and the urgent need for providing all nurses, whether working in an urban or rural district, with a motor car must be strongly stressed. In view of the increasing difficulty in obtaining hospital beds, especially for the "chronic" sick, the demands made upon the home nursing service are tending to increase very considerably.

VACCINATION AND IMMUNISATION.

Section 26.

It is the duty of the local health authority to make arrangements for the vaccination of persons in its area against Smallpox and for their immunisation against Diphtheria.

The authority can perform this duty through its own officers, but also must give all general medical practitioners in the area an opportunity of providing such service. General medical practitioners would not be paid a fee for providing the service, but would receive a fee for completing the prescribed record card and forwarding it to the County Medical Officer. The fee was to be fixed by the Minister of Health in consultation with the British Medical Association. Up to the present the amount of the fee has not been decided.

(a) VACCINATION—As from the appointed day, the Vaccination Acts 1867 to 1907 ceased to have effect, and **vaccination was no longer compulsory**. Although vaccination had been compulsory, exemption had been far too easily obtainable with the result that in the County of Flint, from 1935 to 1939, the number of primary vaccinations represented as a percentage of the live births varied between 25 % and 31 %. During the war years this percentage gradually rose to 53 % in 1944, but by 1947 had fallen to 24 %. It was hoped that by abolishing compulsory vaccination, the results would be achieved similar to those of voluntary immunisation. This response had not been obtained by the end of the year under review, as the following figures show :—

Primary vaccinations 6 months ending 30th June, 1948	...	595
Primary vaccinations 6 months ending 31st December, 1948		213

In spite of the fall in the number of vaccinations in the second half of the year the number of primary vaccinations for the whole year represented 30.6 % of the total live births during the year, an improvement on the figure for the previous twelve months. The number of primary vaccinations in the second half of the year, however, represented only 14.8 per cent. of the number of live births in the first half.

It will thus be seen that a very considerable percentage of the population is not protected, and that in the event of an outbreak of Smallpox in the County, there would probably be a tremendous "rush" for vaccination. Should the position not improve, serious consideration will need to be given to establishing "vaccination" sessions at Clinics similar to those for "immunisation" against diphtheria.

(b) IMMUNISATION AGAINST DIPHTHERIA—In addition to the facilities provided through general medical practitioners, regular immunisation sessions are held at various centres in the County where children are immunised by the Authority's medical officers.

The position as regards immunisation can be regarded as satisfactory, and during the year 1,556 received primary immunisation, and 1,351 children received re-inforcing doses, at the age of 5 years or 10 years.

Many mothers are asking that their children should receive the combined immunisation against diphtheria and whooping cough. There is, however, considerable controversy as regards the value of whooping cough immunisation, and the Minister of Health has not up to the present considered it advisable to supply whooping-cough serum free of charge in the same way that lymph for vaccination and anti-diphtheric sera are supplied.

The excellent results of the immunisation campaign are shown in the fact that during the year only 5 cases of diphtheria were notified in the County and that not a single death was reported.

AMBULANCE SERVICES.

(Section 27).

"It shall be the duty of every local health authority to make provision for securing that ambulances and other means of transport are available, where necessary, for the conveyance of persons suffering from illness or mental defectiveness, or expectant or nursing mothers, from places in their area to places in or outside their area."

To perform this duty, arrangements were made for a total of 8 ambulances to be available at various points in the County (Rhyl, Prestatyn, Holywell, Flint, Queensferry, Mold), and in addition the ambulances owned by the City of Chester were to be available for the Saltney area, and the ambulance services of the Denbighshire and Shropshire County Council were to be available for the Hundred of Maelor.

Arrangements were also made with private owners and with private hire car proprietors for "sitting-case cars" to be available as required.

These services being entirely new services, it was impossible to estimate the demand that would be made on them, but the following tables show that during the first six months of the service, while the calls for "ambulances" remained fairly constant month by month, the calls upon the "sitting-case car" service increased tremendously. The cost of the sitting-case car service is considerable, and it must be admitted that it is a service which is open to abuse. The Authority can be assured, however, that no effort is spared to keep the expenditure on this service as low as possible.

Table 15.
AMBULANCE AND SITTING-CASE CAR SERVICE.

AMBULANCES.

(a) IN COUNTY.

	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Totals.
Patients carried ...	135	184	145	128	121	137	850
Mileage ...	5400	7285	4432	4004	4130	3814	29065

(b) OUT COUNTY.

Patients carried	...	...	...	175
Mileage	...	...	...	1798

GRAND TOTAL:—

Patients carried	...	...	1025
Mileage	...	...	30863

SITTING-CASE CARS.

	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Totals.
Patients carried ...	153	320	422	465	613	734	2707
Mileage ...	4350	9784	13534	14018	16772	20727	79185

PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

(Section 28).

This Section of the National Health Service Act gave the Authority permissive powers, with the approval of the Minister, to make arrangements for the purpose of the prevention of illness, the care of persons suffering from illness or mental defectiveness, or the after-care of such persons. No payment of money, however, could be paid to such persons, except as remuneration for suitable work.

The Minister reserved the right to direct that these permissive powers should become statutory duties, and did so direct with regard to the care and after-care of persons suffering from tuberculosis.

Prior to the "appointed day," the Authority had under its own Tuberculosis "Care and After-Care" Scheme, and later under the Government Scheme, paid maintenance allowances to persons suffering from tuberculosis. As from July 5th, the responsibility for paying these allowances was transferred to the Assistance Board.

The Authority could, however, continue, as formerly, to supplement these allowances by "grants in kind," and could also supply various articles such as beds, bedding, blankets, etc., but had the power to recover charges for these articles, according to the means of the person supplied.

The Authority also had the power to provide special workshops, settlements, hostels, and night sanatoria for tuberculous persons who needed sheltered employment. The finding of sheltered employment for the type of T.B. case discharged from sanatorium as "fit for light work" had always proved a most difficult problem, and the only solution would appear to be the establishment of a "village settlement" on the lines of the Papworth Settlement or the British Legion Village at Preston Hall, near Maidstone.

It would not be possible for a County of the size of Flintshire to establish such a settlement, otherwise than in conjunction with other North Wales Counties, or perhaps in conjunction with all the Local Health Authorities in Wales.

The scope of the Section of the Act is wide, as the Care and After-Care services can cover all types of illness, both physical and mental. Equipment such as water-beds, bed rests, bed pans, etc., etc., can be loaned to persons requiring them for the nursing of cases of illness in their own homes. Most of the Domiciliary Nurses employed by the District Nursing Associations had "loan cupboards" from which certain articles were supplied, and this equipment was transferred to the Authority, together with the Nurses. In addition, arrangements were made for such equipment to be provided from the "loan depot," which had been established by the St. John Ambulance Brigade and the British Red Cross Society. Charges are made for the loan of these articles according to the means of the patient.

The responsibilities of the Authority under this Section are discharged through three Area Care and After-Care Sub-Committees of the Health Committee—those responsibilities being not only with regard to Tuberculosis, but all other forms of illness, physical and mental, including mental deficiency. In addition, these three Care and After-Care Committees are responsible for discharging the welfare duties of the County Council under Section 29 of the National Assistance Act (for the blind, the deaf, etc.), as the powers of the Council under this Act were delegated, with the approval of the Minister, to the Health Committee.

During the year under review, 219 applicants suffering from Tuberculosis received assistance in cash and/or in kind.

Six garden shelters were provided for the use of patients living under overcrowded conditions, and many letters were written to the County District Councils supporting applications for better housing accommodation for tuberculous persons living under unsatisfactory conditions. It is a great pleasure to report that the response of the County District Councils has been most satisfactory.

DOMESTIC HELP.

(Section 29).

This Section of the Act gave the Authority permissive powers for providing domestic help for households where such help was required owing to the presence of any person who was ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age.

Power was also given for the recovery of charges for such service.

This service was found to be most difficult to establish and by the end of the year under review only one such domestic help was employed. There were signs, however, that the position would be considerably improved during the following year, especially with the appointment of a "Domestic Help Organiser."

DUTIES UNDER LUNACY AND MENTAL TREATMENT ACTS AND MENTAL DEFICIENCY ACTS.

(Section 51).

The duties of the Local Health Authority under the above Acts are discharged through the three Area Sub-Committees of the Health Committee. Each Area Sub-Committee consists of 12 Members of the Health Committee, with one representative of each District Council in the Area, and a number of co-opted members who are specially interested in social welfare.

The County Medical Officer is responsible to the Health Committee for the administration of the Mental Health Services, and is assisted by:—

- (a) For the purposes of the Mental Deficiency Acts, the Deputy Medical Officer of Health (female), and one Assistant Medical Officer (male), and by one Welfare Officer (also a duly authorised officer for the purposes of the Lunacy and Mental Treatment Acts).
- (b) A Chief Administrative Officer and four duly authorised officers for the purposes of the Lunacy and Mental Treatment Acts.

The work is closely co-ordinated with that of the Regional Hospital Board in that the services of the psychiatrists and psychiatric social workers from the North Wales Hospital for Mental and Nervous Disorders are always available. A team consisting of psychiatrist, psychologist and psychiatric social workers conduct a Child Guidance Clinic at Rhyl on behalf of the Authority.

The supervision of patients on licence from mental hospitals is undertaken by the staff of the hospital, while the supervision of mental defectives on licence is undertaken by the medical and the health visiting staff and the welfare officers of the County Council.

The following statistics show the number of persons dealt with under the above Acts during 1948 :—

Table 16.

LUNACY AND MENTAL TREATMENT ACTS.

Certified Patients—62.

Temporary Patients—1.

In addition, 116 persons were admitted to the Mental Hospital as "Voluntary Patients."

MENTAL DEFICIENCY ACTS.

A. Ascertainment.

			Males.		Females.		Total.
(1) Reported by Local Education Authority :—							
(a) Under Section 57 (3)	...	...	3	...	2	...	5
(b) Under Section 57 (5)	...	...	2	...	1	...	3
(2) Other cases	...	...	12	...	4	...	16
			17		7		24

B. Action taken.

Admitted to Institutions

(under order) ... 2 ... 2 ... 4

Placed under Guardianship

(under order) ... 5 ... 1 ... 6

Taken to place of safety ... 1 ... — ... 1

Placed under statutory supervision 9 ... 4 ... 13

17 7 24

C. As on 31st December, 1948 :—

The number of defectives under guardianship ... 15

The number of defectives under statutory supervision ... 122

Of the 122 defectives under statutory supervision, 12 were awaiting admission to an institution for mental defectives at the end of the year.

The duties of supervising mental defectives in the community are discharged by the medical, health visiting and welfare staff, and members of the Area Committees also visit.

There are no occupation centres in the County, but the question of their establishment needs consideration. At the present time, the "man-power" situation is such that it is by no means difficult for the higher-grade defectives to obtain suitable remunerative employment.

Section C.

INFECTIOUS AND OTHER DISEASE.

INFECTIOUS DISEASE—Prior to the "appointed day" the control of the spread of infectious disease was chiefly a duty of the County District Councils, whose Medical Officers of Health forwarded weekly to the County Medical Officer a numerical report of the cases notified in their areas.

Under Section 28 of the National Service Act, the County Council as a "local health authority" was also given powers in this respect, and it became the duty of a Medical Officer of Health of a County District Council to forward to the County Medical Officer, within 12 hours, a copy of each notification of notifiable disease received by him. If a fee for the notification was paid by the County District Council, such fee was to be repaid to the District Council by the County Council.

The intention of this change was to secure greater co-ordination of the preventive work of the two authorities and to give greater scope for the study of the epidemiology of diseases.

There was no large-scale outbreak of infectious disease in the County, and the number of notifications received from Medical Officers of Health of County District Councils during the year were as follows:—

Table 17.

Cerebro-Spinal Fever	...	...	...	7
Diphtheria	...	...	...	5
Enteric Fever (Typhoid)	...	...	...	2
Erysipelas	...	...	...	33
Measles	...	...	...	1366
Ophthalmia Neonatorum	...	...	...	2
Paratyphoid	...	...	...	1
Poliomyelitis	...	...	...	7
Pneumonia	...	...	...	110
Puerperal Pyrexia	...	...	...	5
Scarlet Fever	...	...	...	160
Whooping Cough	...	...	...	345
				<hr/>
				2,043
				<hr/>

It will be noted that notifications of Measles form practically 67 %, and the group Measles, Whooping Cough, Scarlet Fever and Pneumonia 97 % of the total notifications.

CEREBRO-SPINAL FEVER—7 cases of this disease among civilians were notified during the year. No death occurred.

It is interesting to note that in 1940 and 1941 the notified cases numbered 111 and 85 respectively.

DIPHTHERIA—Only 5 cases of Diphtheria were notified in the County during the year, and no death occurred.

The following table shows the great reduction which has occurred in the number of notifications received since immunisation has been widely practised.

Table 18.
DIPHTHERIA—FLINTSHIRE.
1938 to 1948.

Year.	Cases notified.			Deaths.						Total.
				0—	1—	5—	15—	45—	65—	
1938	...	268	...	2	3	10	1	—	—	16
1939	...	200	...	1	—	3	6	1	1	12
1940	...	202	...	—	1	3	2	—	—	6
1941	...	342	...	2	6	5	1	1	—	15
1942	...	255	...	1	3	1	—	—	—	5
1943	...	208	...	—	4	2	2	—	—	8
1944	...	316	...	—	3	6	—	—	1	10
1945	...	108	...	1	—	3	—	1	—	5
1946	...	34	...	—	1	—	—	—	—	1
1947	...	15	...	—	—	—	—	1	—	1
1948	...	5	...	—	—	—	—	—	—	—

VENEREAL DISEASES—The number of Flintshire persons newly dealt with at the Treatment Centre at the Royal Infirmary, Chester, during 1948, and excluding those treated at other centres, is shown in the following Table :—

Table 19.

Condition.	1st Qtr.		2nd Qtr.		3rd Qtr.		4th Qtr.		Total.						
	M.*	F.†	M.*	F.†	M*	F.†	M*	F.†	M.*	F.†					
Syphilis	...	5	4	...	4	5	...	12	8	...	7	3	...	28	20
Gonorrhoea	...	18	2	...	17	6	...	19	5	...	12	—	...	66	13
Other than V.D.	—	1	...	—	1	...	—	—	...	—	—	...	—	—	2
Not suffering from V.D.	...	6	1	...	6	2	...	3	3	...	6	1	...	21	7
		29	8		27	14		34	16		25	4		115	42

* Males.

† Females.

The total number of attendances of Flintshire persons at the Treatment Centre was 1897.

In addition to the above, 7 cases were treated at Liverpool, 10 at Wrexham and 1 at Shrewsbury.

As from July 5th, the County Council was relieved of any financial responsibility for the treatment of venereal disease, as the work was of "specialist" nature and therefore under the control of the Regional Hospital Board.

TUBERCULOSIS—Numerical particulars of the deaths registered during the year as due to this disease are given in various Tables of this Report.

The number of formal primary notifications received under the Public Health (Tuberculosis) Regulations, 1930, was 188, made up as follows:—Respiratory 146 (Males 79, Females 67); Non-respiratory 42 (Males 21, Females 21).

Otherwise than by formal notification, 25 cases came to the Authority's notice during the year, the number being made up as follows:—Respiratory 18 (Males 12, Females 6); Non-respiratory 7 (Males 3, Females 4).

No special action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 62 of the Public Health Act, 1925.

The beneficent work of the King Edward VII Welsh National Memorial Association was continued up to July 4th, when it was absorbed by the Welsh Regional Hospital Board.

Table 20.
DEATHS FROM TUBERCULOSIS.
Flintshire—1948.

Description.	Males.	Females.	Persons.
Respiratory	45	28	73
Non-respiratory	7	4	11
All Forms	52	32	84

Table 21.
ANALYSIS OF DEATHS FROM TUBERCULOSIS.

Age Group.	Respiratory.		Non-respiratory		All Forms.		Grand Total.
	M.*	F.†	M.*	F.†	M.*	F.†	
0—	1	—	—	—	1	—	1
1—	—	—	—	—	—	—	—
5—	—	—	—	2	—	2	2
15—	23	20	6	1	29	21	50
45—	17	7	1	1	18	8	26
65—	4	1	—	—	4	1	5
Totals	45	28	7	4	52	32	84

* Males.

† Females.

POLIOMYELITIS—7 cases came to the Authority's notice during the year under review, as compared with 30 during the preceding year.

Section D.

WELFARE OF THE BLIND.

The National Assistance Act, 1948, brought about the repeal of the Blind Persons Act, 1920, but the welfare of blind persons remained a duty of the County Council. The Council, however, are no longer responsible for paying allowances to unemployable blind persons, this responsibility passing to the Assistance Board, but the Council was still responsible for the augmentation of earnings of employable blind persons.

For many years, the Chester and District Blind Welfare Society, and the North Wales Society for the Blind had carried out welfare work, including home teaching, among the blind persons in the County of Flint as agents of the County Council. It was decided that these two voluntary organisations should continue to provide the welfare services as agents of the County Council for a fixed period, the matter to be then subject to review.

The number of blind persons supervised by these organisations at 31st December, 1948, was :—

Table 22.

North Wales Society for the Blind	...	...	75
Chester and District Blind Welfare Society	...	...	168
			—
	Total	...	243
			—

The Chester and District Blind Welfare Society have workshops at Chester in which a number of Flintshire blind persons are employed.

The North Wales Society have no workshops at which Flintshire persons are employed.

Section E.

INSPECTION AND SUPERVISION OF FOOD, ETC.

The statutory duties of the County Council under the Food and Drugs Act, 1938, and other legislation, had in the past been discharged by members of the County Constabulary, but early in 1948 it was decided that this responsibility should be transferred to the Health Department and that a fully qualified sanitary inspector should be appointed.

This transfer was effected on July 1st, when Mr. Elwyn Lewis, M.R.S.I., took up his duties within the Department.

The main objects of the Food and Drugs Act, 1938, are :—

- (a) the safeguarding of the public health ;
- (b) the protection of the public against fraud.

The need for constant vigilance in safeguarding the public food supplies has resulted in a tremendous increase in food legislation since the Food and Drugs Act, 1938, came into force. The following list of Acts and Regulations, which are in addition to the many Food Orders, will give an idea of the thoroughness of the steps taken to ensure that the public receives wholesome food and is also protected against the use of misleading labels and advertisements in relation to the food.

The Food and Drugs Act, 1938.

The Pharmacy and Poisons Act, 1933.

The Pharmacy and Medicines Act, 1941.

The Food and Drugs (Milk and Dairies) Act, 1944.

The Sale of Milk Regulations, 1939.

The Public Analysts Regulations, 1939.

The Public Health (Condensed Milk) Regulations, 1923-1943.

The Public Health (Dried Milk) Regulations, 1923-1943.

The Public Health (Preservatives in Food) Regulations, 1925-1940.

The Heat Tested Milk (Prescribed Tests) Order, 1944.

The Ice Cream (Heat Treatment) Regulations, 1946.

Ministry of Food Regulations.

The Food Substitutes (Control) Order, 1941.

The Defence (Sale of Food) Regulations, 1943.

The Food Standards (General Provisions) Order, 1944.

The Meat Products, Canned Soup and Canned Meat (Control and Maximum Prices) Order.

The Labelling of Food Order, 1946.

The Flour, Confectionery (Control and Maximum Prices) Order.

Numerous Orders relating to individual foods.

During the year ending December 31st, 1948, 483 samples of foods and drugs were submitted to the Public Analyst for chemical analysis.

Table 23.

Article.	Number Taken.		Genuine.		Adulterated or below Standard.	
Milk	...	347	...	278	...	69
Ice Cream	...	5	...	5	...	—
Pork Sausages	...	1	...	1	...	—
Beef Sausages	...	23	...	20	...	3
Minced Meat	...	2	...	2	...	—
Cambridge Sausages	...	1	...	1	...	—

Article.			Number Taken.		Genuine.		Adulterated or below Standard.
Polony	...	...	1	...	1	...	—
Sausage Meat	...	...	7	...	7	...	—
Cooking Fat	...	...	11	...	11	...	—
Marmalade	...	...	1	...	1	...	—
Jam	...	...	3	...	3	...	—
Sugar	...	...	1	...	1	...	—
Butter	...	...	3	...	3	...	—
Margarine	...	...	1	...	1	...	—
Tea	...	...	1	...	1	...	—
Jam Tarts	...	...	1	...	1	...	—
Spaghetti	...	...	1	...	1	...	—
Sago	...	...	1	...	—	...	1
Semolina	...	...	1	...	1	...	—
Self Raising Flour	...	...	3	...	3	...	—
Bun and Cake Flour	...	...	1	...	1	...	—
Vermicelli	...	...	1	...	1	...	—
Macaroni	...	...	2	...	2	...	—
Custard Powder	...	...	1	...	1	...	—
Blanc Mange Powder	...	...	1	...	1	...	—
Flour	...	...	1	...	1	...	—
Pudding Mixture	...	...	3	...	3	...	—
Scone Mixture	...	...	1	...	1	...	—
Barley Flour	...	...	2	...	2	...	—
Pearl Barley	...	...	3	...	3	...	—
Sweets	...	...	1	...	1	...	—
Sweetening Tablets	...	...	1	...	1	...	—
Glen Getti Pearls	...	...	2	...	2	...	—
Barley Flakes	...	...	1	...	1	...	—
Pepper	...	...	1	...	1	...	—
Vinegar	...	...	10	...	10	...	—
Salt	...	...	1	...	1	...	—
Sage	...	...	1	...	1	...	—
Gelatine	...	...	2	...	2	...	—
Fish Dressing	...	...	1	...	1	...	—
Pickles	...	...	3	...	3	...	—
Fish Paste	...	...	1	...	1	...	—
Tinned Meat Soup	...	...	3	...	3	...	—
Potato Powder	...	...	1	...	1	...	—
Tinned Rhubarb	...	...	1	...	1	...	—
Rum	...	...	1	...	1	...	—
Whiskey	...	...	3	...	3	...	—
Olive Oil	...	...	1	...	1	...	—
Boracic Powder	...	...	1	...	1	...	—

Article.	Number Taken.		Genuine.		Adulterated or below Standard.	
Glauber Salts	...	1	...	—	...	1
Camphorated Oil	...	1	...	1	...	—
Bicarb of Soda	...	1	...	1	...	—
Castor Oil	...	1	...	1	...	—
Liquid Paraffin	...	1	...	1	...	—
Balsam of Aniseed	...	1	...	1	...	—
Gregory Powders	...	1	...	1	...	—
Aspirins	...	1	...	1	...	—
Magnesia	...	1	...	1	...	—
Cream of Tartar	...	1	...	1	...	—
Zinc Ointment	...	1	...	1	...	—
Seidlitz Powders	...	1	...	1	...	—
Sal Volatile	...	1	...	1	...	—
Tincture of Iodine	...	1	...	1	...	—
Boracic Ointment	...	2	...	2	...	—

In the table below the total number of foods and drugs analysed is compared with the numbers taken during the past three years.

Table 24.
ALL FOODS.

Year.	No. Taken.		Adulterated or below Standard.		Percentage.
1945	...	379	...	65	17.1
1946	...	391	...	53	13.5
1947	...	392	...	68	17.3
1948	...	483	...	74	15.3

It will be seen that this year's percentage shows a decrease in the number of samples found adulterated or below standard.

MILK—The total number of samples submitted to the Public Analyst was 347, and of these 69 were adulterated or below standard. This is a slight improvement on last year's figures. In the table below this figure is compared with the figures for the past three years.

Table 25.

Year.	No. Taken.	The numbers and nature or irregularity.								
		Adulterated or below Standard.			Percentage of Adultera- tion.		Low in Fat Content.		Low in S.N.F.	Added Water.	Dirt.
1945	... 280	...	54	...	19.2	...	26	25	1	1
1946	... 285	...	46	...	16.1	...	19	19	8	—
1947	... 296	...	64	...	21.6	...	27	27	10	—
1948	... 347	...	69	...	19.8	...	33	26	10	—

The number of samples containing added water remains the same as in 1947, and legal proceedings were taken in respect of 9 cases. The tenth sample contained 0.6 % of added water and in this case a warning letter was sent. Samples of milk and foodstuffs were taken from schools and school canteens and generally the standards were high. Two samples were returned as not being genuine :—

- (1) a sample of milk taken from a school canteen was low in solids not fat content ;
- (2) on receipt of a complaint from one of the school canteens a sample of sago was taken. It was stated that the sago gave a bitter taste when cooked. On analysis it was found that the sago had developed an oily flavour due to having been packed in unsuitable wooden containers in the warehouse prior to being sold to the canteen.

Routine sampling of Tuberculin Tested Milk and Accredited Milk supplies was carried out by the County Council's Dairy Advisory Officer and her staff. Each sample is submitted to the Methylene Blue Test and is also examined for B. Coli.

Numbers and results of samples taken during 1948 :—

Table 26.

	Number Taken.	Number failed		Number with B.Coli present.
		Methylene Blue Test.		
Tuberculin Tested	... 351	... 22	...	25
Accredited	... 2697	... 180	...	195

The following information has been given by the Divisional Inspector for the Ministry of Agriculture and Fisheries.

The number of Tuberculin Tested Herds, etc., for the year ending 1948 ;

Table 27.

	Attested.		Not Attested.		Total.	
T.T. or Certified Herds	...	67	...	40	...	107
Accredited Herds	...	2	...	633	...	635
Not designated Herds	...	13	...	935	...	945
Total	...	82	...	1608	...	1690

T.T. Herds not Attested :—

Number of Cattle	...	...	...	1429
Number of Herd Tests	...	...	...	51
Number of Cattle Tested	...	...	...	2535
Number of Reactors	...	...	...	20

Total cattle population for the County 60,297. Total number of cows 22,933.

Number of cows dealt with by the Tuberculosis Order, 1938—141.

OTHER FOODS—Three samples of beef sausages were found deficient in meat, and legal action was taken with success.

The sample of Glauber Salts, which was adulterated, was an informal one and no legal action could be taken. It was not possible to take an official sample as there were no further supplies available.

ICE CREAM—The District Councils are responsible for the control of the manufacture of ice cream and for its hygienic quality. There are no chemical standards, and in the five samples taken for chemical analysis, no deleterious ingredients were found and they were reported as genuine.

The table below shows the percentages of the fats and solids content of the samples taken :—

Table 28.

Fat content	...	2.65	...	8.0	...	2.2	...	2.3	...	0.15
Solids	...	22.60	...	32.62	...	24.6	...	17.0	...	25.60

Table 29.

SUMMARY OF LEGAL PROCEEDINGS.

Article.	Adulteration or Deficiency.	Result.	Fines.			Costs.			Total.		
			£	s.	d.	£	s.	d.	£	s.	d.
Milk	12 % added water	Convicted	15	0	0	5	4	3	20	4	3
Milk	7 % added water	do.	5	0	0	5	5	6	10	5	6
Milk	8 % added water	do.	2	10	0	—	—	—	2	10	0
Milk	8 % added water	do.	2	10	0	5	9	8	7	19	8
Milk	13 % added water	do.	2	10	0	8	18	6	11	8	6
Milk	12 % added water	do.	10	0	0	—	—	—	10	0	0
Milk	12 % added water	do.	10	0	0	5	0	0	15	0	0
Milk	6 % added water	do.	5	0	0	4	4	0	9	4	0
Milk	6 % added water	do.	1	0	0	5	5	0	6	5	0
Beef	20 % deficient in	do.	5	0	0	4	4	0	9	4	0
Sausages	meat										
Beef	18 % deficient in	do.	5	0	0	3	3	0	8	3	0
Sausages	meat										
Beef	29 % deficient in	do.	5	0	0	3	3	0	8	3	0
Sausages	meat										
12			£68	10	0	49	16	11	118	6	11

FERTILISERS AND FEEDING STUFFS ACT, 1926.

7 samples were taken during the year, and 5 samples were found unsatisfactory. The offences were not serious and it was possible to deal with all the infringements by way of caution.

PHARMACY AND POISONS ACT, 1933,

and

PHARMACY AND MEDICINES ACT, 1941.

The duties devolving upon the County Council under the 1933 Act are :
The names of all shopkeepers, other than registered pharmacists, who sell Part II Poisons are to be entered on the Council's list.

To see that any deputy appointed under Rule 14 is a responsible person, and that the substances which contain Part II Poisons, and appear in the First Schedule to the Poisons Rules, are being sold by the listed seller himself or by a responsible deputy.

That a poisons book is kept in the prescribed form and manner and that all entries therein are in order.

That the storage arrangements for certain poisons are adequate, and that the requirements as to labelling and type of containers are complied with.

There are 343 listed sellers of Poisons in the County and these are subject to periodic inspection.

Section F.

SANITARY CIRCUMSTANCES.

The supervision of closet accommodation, provision for refuse collection and disposal, cesspool cleaning, the sanitary inspection of their respective areas, the inspection and supervision of shops, offices and camping sites, the abatement of nuisances, including any arising from smoke, the supervision of swimming baths and pools, disinfection and disinfestation—all these are included in the duties which devolve primarily upon Local Sanitary Authorities and upon which the respective District Medical Officers of Health are required to report annually and, when necessary, specifically.

Samples of water are forwarded for bacteriological analysis to the Public Health Laboratory at Conway by all the county district councils at frequent intervals. Generally speaking, the samples from piped supplies have been satisfactory, although the many samples of water from wells in the County have much to be desired.

There is nothing of special interest to report with regard to river pollution.

All Schools in the County are inspected for sanitary defects at each routine medical inspection, and all defects found are reported to the Local Education Authority.

Section G.

HOUSING.

All the County District Councils have made such progress with their housing schemes as has been possible, having regard to the shortages of materials, man-power, etc. All have given special consideration to the re-housing of families which have, for various reasons, been reported to them by the County Health Department as being in need of re-housing, and more particularly to those families in which there are persons suffering from Tuberculosis.