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Flintshire County Council



REPORT

BY THE

MEDICAL OFFICER

ON THE

HEALTH

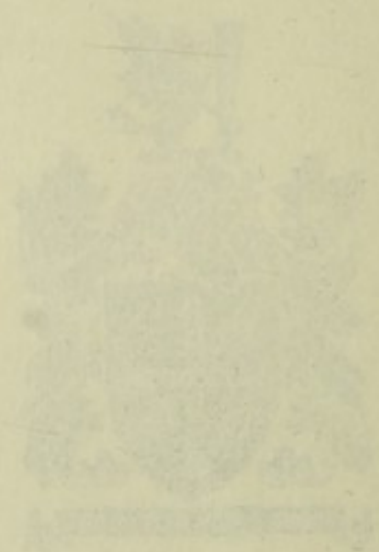
OF

FLINTSHIRE

DURING THE YEAR

1957

Flintshire County Council



REPORT

MEDICAL OFFICER

HEALTH

FLINTSHIRE

1957

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FLINTSHIRE COUNTY COUNCIL.

COUNTY HEALTH OFFICES,
LLWYNEGRIN,
MOLD.

To the Chairman and Members
of the Flintshire County Council.

Mr. Chairman, Ladies and Gentlemen,

The two most important developments during the year were (1) improvement in facilities for mothers and children at clinics, and (2) establishment of closer liaison with hospital staffs on medical and nursing matters affecting the hospitals and the Local Health Authority.

Not only were clinic premises improved but also the range of services available. An example of this was the establishment of Consultative Infant Welfare Clinics attended by Dr. M. M. McLean, the Consultant Paediatrician to the Clwyd and Deeside Hospital Management Committee. Consultative Infant Welfare Clinics were opened during the year at four centres—Rhyl, Mold, Holywell and Shotton.

Dealing with closer liaison with hospital staff—several meetings were arranged during the year with Consultants to discuss informally matters relating to the nursing and after-care of patients. Such meetings with Chest Physicians and Consultant Physicians proved particularly valuable and led directly to improved domiciliary facilities being made available to patients.

Full details relating to work done during the year will be found in the Report. I refer below to certain items of special interest.

Mental Health.

The County Occupation Centre was opened at Fronfraith, Boughton Avenue, Russell Road, Rhyl, for the training of mental defectives in February. This centre serves the Western half of the County and at the end of the year 19 defectives were attending daily. 16 defectives from the Eastern half of the County continued to attend at the Chester Occupation Centre.

* During the year the Report of the Royal Commission on the Law relating to Mental Illness and Mental Deficiency was issued. This Report contained many important recommendations which can be summarised as (1) Persons suffering from mental illness should be treated like persons suffering from any other form of illness without compulsory hospital admission and the least possible legal formality, (2) the classification of mental illness and mental deficiency should be simplified, and (3) Local Health Authorities should increase the community services available to the mentally ill.

At present, patients discharged from the North Wales Hospital for Nervous and Mental Disorders, Denbigh, who require after-care are visited by the Psychiatric Social Workers of that hospital. These workers give an excellent service and in an attempt to help them a meeting was arranged during the year between the Psychiatric Social Workers, the Duly Authorised Officers and the Health Visitors. The result has been that Duly Authorised Officers and Health Visitors are now able to share more effectively with Psychiatric Social Workers the after-care work of patients discharged from the hospital.

Tuberculosis.

During the year the Semi Static Mass X-Ray Unit commenced to operate in the County. This Unit visits four centres in the County at intervals of three weeks and has proved of value to General Practitioners who can refer cases without appointment, to the public, and in connection with the B.C.G. Scheme for school children.

Thanks to the willing co-operation of the Chest Physicians separate "contact clinics" have now been established at all the Chest Clinics—Rhyl, Holywell, Queensferry. During the year 339 contacts were examined out of a possible total of 406—83.5 %. This is the highest contact examination figure ever achieved in the County.

Poliomyelitis Vaccination.

The Poliomyelitis vaccination work started in 1956 increased considerably in 1957. Many special clinic sessions for this work were arranged at our main clinics during the year. At the end of 1957, 3,767 children had been vaccinated against Poliomyelitis and 3,908 were on the waiting list for vaccination.

During the year 25 cases of Acute Poliomyelitis were notified and 21 of these had paralysis. There were no deaths due to Acute Poliomyelitis in 1957.

Asian Influenza.

The epidemic of Asian type influenza was first reported in the Rhyl area in August and spread rapidly through the County reaching its peak towards the end of September. The epidemic had cleared before the end of November.

It is impossible to state the total number of persons affected, but the majority of cases were children and the epidemic was mild and recovery was quick, and there proved to be few complications. In September, a vaccine against Asian influenza was made available by the Ministry of Health and was given to key personnel such as doctors, nurses, midwives and ambulance staff and home helps.

Care of the Aged.

In 1957 the Ministry of Health issued the Survey of Services Available to the Chronic Sick and Elderly (Boucher Report). The main recommendations of this report were discussed at a joint meeting with Consultant Physicians, the County Welfare Officer and myself. Some of the recommendations were already in operation in the County. Others were implemented as far as possible. As a result of this meeting more effective use was made of home nurses, health visitors and home helps, and also a completely new service was introduced—Boarding Out Scheme for the Elderly.

Staff.

Medical—Dr. G. F. Devey completed the course which he commenced on 4th October, 1956, and was successful in obtaining the D.P.H.

Dental—Mr. A. G. Addinsell was employed as a Dental Officer on a part-time sessional basis from 6th June, 1957, to 26th July, 1957.

Miss N. Roberts, Dental Attendant, resigned her appointment on 31st August, 1957.

Miss K. McGhee and Miss S. H. Corlett were appointed as Dental Attendants and commenced duty on the 21st January, 1957, and 1st April, 1957, respectively.

Health Visitors—Miss P. M. Matthews, Health Visitor (Buckley District) and Part-time Health Education Officer was granted leave of absence for one year from 31st July, 1957, on obtaining a scholarship of the Joint Committee of the Order of St. John and the British Red Cross Society to take a course arranged by the Royal College of Nursing to enable her to qualify as a Public Health Nursing Administrator.

Miss J. S. Rogers commenced duty on 13th June, 1957, as Health Visitor in Buckley District and as Part-time Health Education Officer.

Miss A. Capper, Health Visitor, Flint District, resigned her appointment on 1st August, 1957.

Miss M. Lees, formerly District Nurse/Midwife in Rhyl, completed the Health Visitor's training course on the 8th June, 1957, and took up her appointment as Health Visitor/School Nurse in the Flint District on 24th June, 1957.

Mrs. M. C. Townley commenced duty as temporary Health Visitor/School Nurse in the Queensferry District on 18th November, 1957.

Mrs. E. Cull was engaged as part-time clinic nurse from 2nd December, 1957.

Mrs. A. D. Thomas was employed as part-time Health Visitor/School Nurse from 25th March, 1957, to 28th June, 1957, during absence (owing to illness) of Miss G. Jenkins.

Miss M. E. Owen, Tuberculosis Visitor, resigned on 12th October, 1957, and Mrs. I. M. Beedles was appointed to succeed her and she commenced duty on 30th September, 1957.

Nurses and Midwives—Miss R. Owen, S.R.N., S.C.M., was appointed full-time relief Nurse/Midwife for the Western area of the County and commenced duty on 3rd June, 1957.

Miss L. E. H. Twist, S.R.N., S.C.M. (Queen's Nurse) was appointed full-time relief Nurse/Midwife for the Eastern area of the County and commenced duty on the 4th November, 1957.

Miss A. M. Stewart, S.R.N., S.C.M. (Queen's Nurse) formerly District Nurse/Midwife for Broughton District, commenced the Health Visitor's training course at the University of Leeds on 1st October, 1957.

Nurse D. G. Asquith was appointed Senior Nurse at Rhyl in May, 1957.

Nurse D. Willatt commenced Queen's District Nursing Training in September, 1957.

Mental Health—Miss M. W. Evans, Supervisor of the Occupation Centre for Mental Defectives at Fronfraith, Rhyl, resigned her appointment on 31st December, 1957.

I would once again like to thank the Chairman and members of the Health Committee for their support and interest in the work of the department. My sincere thanks also go to the Chairman and members of the three Area Care and Nursing Sub-Committees and the Ambulance Sub-Committee.

I would like to record the excellent work done by all members of the staff during the year—medical, nursing and clerical staff.

A great deal of the work in preparing this Annual Report has been very ably done by Mr. W. I. Roberts, my Chief Clerk, and I would once again like to thank him for his excellent services.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

G. W. ROBERTS,

County Medical Officer of Health.

Section 1.

ADMINISTRATION.

A.—DEPARTMENTAL OFFICERS.

County Medical Officer :

Griffith Wyn Roberts, M.B., B.Ch., B.A.O., D.P.H.

Deputy County Medical Officer :

Ernest Henry Annels, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Senior Medical Officer (in charge School Health Services) :

Edna Pearse, M.B., Ch.B., C.P.H. (Liverp.).

Assistant Medical Officers (full-time) :

George Frederick Devey, M.B., Ch.B., D.P.H.

William Manwell, M.B., B.Ch., B.A.O., T.D.M., C. & M.

Assistant Medical Officers (part-time sessional) :

Dr. E. M. Harding.

Dr. Y. B. Gibson.

Assistant Medical Officers (part-time) who are also Medical Officers of Health for Grouped County Districts :

A. Cathcart, M.B., Ch.B., D.P.H., D.T.M. & H.

R. Rhydwen, M.B., B.S., D.P.H.

D. J. Fraser, M.B., Ch.B., D.P.H.

Chest Physicians (part-time) :

E. Clifford-Jones, M.B., B.S., M.R.C.S. (Eng.), L.R.C.P. (London).

J. B. Morrison, M.D., Ch.B.

Child Guidance Consultant (Regional Hospital Board Staff) :

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

Ear, Nose and Throat and Audiology Consultant (Regional Hospital Board Staff) :

Catrin M. Williams, F.R.C.S.

Ophthalmic Consultants (Regional Hospital Board Staff) :

E. F. Wilson, B.A., M.B., B.Ch., B.A.O.

A. C. Shuttleworth, M.B., Ch.B., D.O.M.S.

E. Lyons, M.B., Ch.B., D.O.M.S.

Orthopaedic Consultant (Staff of Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry) :

T. McSweeney, F.R.C.S.

Consultant Paediatrician (Regional Hospital Board Staff) :

M. M. McLean, M.D., M.R.C.P.E., D.C.H.

Consultant Obstetrician and Gynaecologist (Regional Hospital Board Staff) :

Mr. E. Parry-Jones, M.R.C.O.G.

Speech Therapist (part-time) :

Mrs. R. E. Ward, L.C.S.T.

Principal School Dental Officer (full-time) :

A. Fielding, L.D.S., R.C.S.

Dental Officers (full-time) :

Leslie Hanson, L.D.S.

Frederick Seymour Dodd, L.D.S.

Dental Officers, Temporary, Part-time (Sessional) :

John Stuart Selwyn, L.D.S.

A. G. Addinsell, L.D.S. (from 6/6/57 to 26/7/57).

Consultant Orthodontist (Part-time sessional) :

B. T. Broadbent.

Dental Anaesthetists (Part-time sessional) :

Dr. Prudence K. Owen.

Dr. J. Griffiths.

Dr. J. G. Macqueen.

County Public Health Inspector (also Food and Drugs Inspector) :

Elwyn Lewis, M.R.S.H., F.A.P.H.I.

Superintendent Nursing Officer and Supervisor of Midwives :

Mrs. Frances M. Williams, S.R.N., S.C.M., Q.N., H.V.Cert., R.San.Inst. Cert.

Superintendent Health Visitor/School Nurse (also Domestic Help Organiser) :

Miss D. V. Gray, S.R.N., S.C.M., H.V.Cert.

Health Visitors (acting jointly as Health Visitors and School Nurses) : All State Registered Nurses and State Certified Midwives, and with Health Visitor's Certificate (with one exception*) or other qualification :—

Miss O. M. Pierce (Senior Health Visitor/School Nurse), Miss P. M. Matthews (also Part-time Health Education Officer) (Miss P. M.

Matthews was given leave of absence without pay for one year from 31/7/57 on obtaining a scholarship for training as a Public Health Nursing Administrator), Miss A. Capper (resigned 1/8/57), Mrs. M. E. Hawkins, Miss M. J. Hughes, Miss G. Jenkins, Miss J. M. Jewell, Miss Ellen Jones, Miss G. Jones, Miss L. Oliver, Mrs. M. E. Pearse, Mrs. E. G. E. Rees, Mrs. J. Thomas, Mrs. D. Thompson, *Mrs. A. E. Williams, S.R.N., S.R.F.N., Miss M. W. Wright, Miss E. M. Ll. Morgan, Mrs. D. M. Lewis (part-time), Miss J. S. Rogers (since 13/6/57), Miss M. Lees (since 24/6/57), Mrs. M. C. Townley (temporary (since 18/11/57).

Clinic Nurses :

Nurse D. Owen, S.R.N. (part-time sessional), Mrs. E. Cull (part-time).

Tuberculosis Visitors :

Miss M. E. Owen, S.R.N. (resigned 12/10/57).

Miss M. M. D. Evans, S.R.N., S.C.M., T.A.Cert.

Mrs. I. M. M. Beedles, S.R.N., B.T.A. (since 30/9/57).

Ambulance Officer :

David John Jones.

Supervisor of Occupation Centre for Mental Defectives :

Miss M. W. Evans (resigned 31/12/57).

Chief Clerk :

William Ithel Roberts.

Departmental Senior Clerk :

Arthur Whitley.

Domiciliary Midwives and Domiciliary General Nurses :

At the end of the year under report, the following Midwives and Nurses were employed full-time by the County Council :—

District Midwives	...	...	...	...	6
District Nurse/Midwives	...	...	...	...	33
District Nurses	...	...	...	...	8
Total				...	47

Domestic Helpers (employed at the end of the year) :

Whole-time	...	...	...	...	2
Part-time	...	...	...	...	100
Total				...	102

Welfare Officers (also "duly authorised officers" for purposes of the Lunacy and Mental Treatment Acts):

For the purpose of:—

- (1) The Lunacy Act, 1890 (certification of mental patients).
- (2) The Mental Treatment Act, 1930 (admission of temporary patients).
- (3) The Mental Deficiency Acts, 1913-1938 (welfare of mental defectives).
- (4) The National Assistance Act, 1948 (welfare of handicapped persons).

the County is divided into three parts—(a) East, (b) Central, (c) West.

(a) The Eastern portion of the County comprises:—

Hawarden Rural District.

Maelor Rural District.

Connah's Quay Urban District.

Buckley Urban District.

Mold Urban District.

Eastern part of the Holywell Rural District (Parishes of Nercwys, Mold Rural, Cilcain and Northop).

Duly Authorised Officer—Mr. E. W. Arrowsmith.

Office—40, High Street, Mold.

Telephone No.—Mold 111 (Day and Night).

(b) The Central portion of the County comprises:—

Flint Municipal Borough.

Holywell Urban District.

Central part of Holywell Rural District (Parishes of Halkyn, Ysceifiog, Brynford).

Duly Authorised Officer—Mr. Elwyn Blackwell.

Office—County Welfare Offices, Holywell.

Telephone No.—Holywell 3012 and 3065 (Day).

Holywell 3023 (Night).

(c) The Western portion of the County comprises:—

Rhyl Urban District.

St. Asaph Rural District.

Western part of Holywell Rural District (Parishes of Gwaenysgor, Trelawnyd, Llanasa, Whitford, Caerwys, Nannerch).

Duly Authorised Officer—Mr. Ernest Williams.

Office—Old Emmanuel School, Vale Road, Rhyl.

Telephone No.—Rhyl 2329 (Day).

Rhyl 1333 (Night).

Ambulance Calls. (This includes calls for Stretcher and Sitting Cases).

8-30 a.m.—7 p.m. weekdays; 8-30 a.m.—12 noon Saturdays—Ambulance Control Centre, Holywell. Telephone Holywell 3373 (3 lines).

Night Calls (7 p.m.—8-30 a.m.), and

Week end Calls for the whole County.

Emergency Calls day or night for the whole County.

Telephone Rhyl 1848.

B.—ASSOCIATED OFFICERS.

Clerk of the County Council :

W. Hugh Jones.

Secretary of the Education Committee :

B. Haydn Williams, B.Sc., Ph.D.

County Surveyor :

P. J. Maddicks, B.Sc., A.M.I.C.E.

County Architect :

W. Griffiths, L.R.I.B.A.

County Treasurer :

R. J. Jones.

County Welfare Officer :

T. Wesley Hughes.

Children's Officer :

Mrs. L. Davies, B.A.

Health Officers of the Several Sanitary Districts
(As on 31st December, 1957).

District.	Medical Officer.	Public Health Inspector.
Buckley Urban	Dr. Allan Cathcart	Mr. A. G. Watkin, U.D.C. Offices, Buckley.
Connah's Quay Urban	Dr. Allan Cathcart	Mr. C. Stoddart, U.D.C. Offices, Connah's Quay.
Flint Municipal Borough	Dr. D. J. Fraser	Mr. D. I. Kennedy, Town Hall, Flint.
Holywell Urban	Dr. D. J. Fraser	Mr. A. Wynne, U.D.C. Offices, Holywell.
Mold Urban	Dr. D. J. Fraser	Mr. C. R. Cresswell, U.D.C. Offices, Mold.
Prestatyn Urban	Dr. Ranyl Rhydwen	Mr. J. M. Edwards, U.D.C. Offices, Prestatyn.
Rhyl Urban	Dr. Ranyl Rhydwen	Mr. E. L. Ll. Jones, U.D.C. Offices, Rhyl.
Hawarden Rural (Dist. No. 1)	Dr. Allan Cathcart	Mr. M. Emlyn Thomas, R.D.C. Offices, Hawarden.
Hawarden Rural (Dist. No. 2)	Dr. Allan Cathcart	Mr. Watkin Williams, R.D.C. Offices, Hawarden.
Holywell Rural	Dr. D. J. Fraser	Mr. D. O. Meredith Jones, R.D.C. Offices, Holywell.
Maelor Rural	Dr. Allan Cathcart	Mr. R. L. Higgins, Willow Street, Overton.
St. Asaph Rural	Dr. Ranyl Rhydwen	Mr. R. P. Barlow, R.D.C. Offices, St. Asaph.

Section A.

STATISTICS AND SOCIAL CONDITIONS OF
THE COUNTY.

Flintshire is a small County in size—163,707 acres including the detached Civil Parish of Marford and Hoseley and the Hundred of Maelor. It is one of the most densely populated Counties in Wales with a population of 147,200—this gives a density of 0.90 persons per acre.

In 1900 the population of the County was 81,490, and it has steadily increased since that date with the steady growth of industry in the North Easterly half of the County.

During 1957, as in previous years, there was full employment and this has an important bearing on the health and welfare of the community. A regular and adequate pay packet contributes more to the well being of a family than adequate social services and irregular pay packet.

The Services provided by the County Health Department such as Home Nursing, Home Help, and Health Visiting, etc., are available in all parts of the County. These services may not be as readily available to those residing in the rural areas but plans have been approved to try and meet some of the difficulties of the rural inhabitants. One scheme to help them is the provision of a Mobile Child Welfare Clinic that will visit the smaller villages.

Good Welfare Services have been provided in the County, and with the health services available many of the social needs have been met. The most urgent problems now are those relating to the needs of the aged and the handicapped.

It is pleasing to record the great improvement noted in recent years in the health of children, both under and over five years of age. This is due to a combination of factors, such as better education, better economic conditions, improved housing, improved diet, and full use of social and medical services. It is a pity that such poor use is made of leisure, by the community as a whole—indeed it has been recently stated that instruction in the correct use of leisure is an urgent necessity.

Table 1 (a).
AREA, POPULATION, ETC.

District.	Area in Statutory Acres.		Population (By Census).			
			1901	1911	1921	1931
Urban						
Buckley	...	2034	5780	6333	6726	6899
Connah's Quay	...	4214	3396	4596	5060	5980
Flint (Mun. Boro.)	...	3435	4625	5472	6298	7655
Holywell	...	917	2652	2549	3073	3424
Mold	...	854	4263	4873	4659	5137
Prestatyn	...	1640	1261	2036	4415	4512
Rhyl	...	1700	8473	9005	13968	13485
Rural—						
Hawarden	...	31588	15821	20571	24036	26575
Holywell	...	64519	23999	25328	25933	26709
Maelor	...	29749	5057	5176	5102	4761
St. Asaph	...	23057	6158	6766	7347	7752
Total Urban	...	14794	30450	34864	44199	47092
Total Rural	...	148913	51035	57841	62418	65797
Whole County	...	163707	81485	92705	106617	112889

Table 1 (b).

District.	Area in	Population (estimated mid-year).							Cens
	Statutory Acres.	1939	1944	1949	1954	1955	1956	1957	195
Urban—									
Buckley ...	2646	7345	6895	7622	7670	7700	7680	7710	7
Con. Quay ...	4214	6505	6420	7455	7350	7380	7460	7670	7
Flint M.B. ...	6243	13020	11750	14160	14220	14210	14210	14230	14
Holywell ...	2532	6918	7286	7870	8210	8200	8190	8230	8
Mold ...	1164	5880	5700	6354	6600	6590	6570	6550	6
Prestatyn ...	3219	7422	8098	8659	8910	9050	9210	9380	8
Rhyl ...	1700	16510	18370	18710	19200	19300	19510	19590	18
Rural—									
Hawarden ...	31576	28750	29760	32450	34980	34940	34990	35890	34
Holywell ...	58515	20730	20920	21920	22290	22280	22190	22130	22
Maelor ...	29749	4356	4599	6720	5850	5350	4940	4800	6
St. Asaph ...	22149	7494	7471	8380	10520	11100	11050	11020	9
Total Urban ...	21718	63600	64510	70830	72160	72430	72830	73360	71
Total Rural ...	141989	61330	62750	69470	73640	73670	73170	73840	73
Total County ...	163707	124930	127260	140300	145800	146100	146000	147200	145

3. FINANCIAL.

The product of a penny rate, computed for the County in respect of the year 1957-58, was £7,170.

4. SOCIAL CONDITIONS.

These are discussed elsewhere in the Report.

5. BIRTHS.

During the year under review, 2,340 births were registered as pertaining to the County, that total being made up as follows:—

		Live Births.		Still Births.		Total.
Legitimate	...	2220	...	45	...	2265
Illegitimate	...	74	...	1	...	75
Total	...	2294		46		2340

Compared with the previous year, 1956, these figures show a decrease of 16 live births, and a decrease of 4 still births, the total births thus showing a decrease of 20.

Of the 2,294 live births, 1,190 were males and 1,104 females.

Of the 46 still births, 21 were males and 25 females.

Further reference will be made to these figures when considering the Neo-natal and Infant Death Rates.

The **live birth rate** per 1,000 population in 1957 was 15.58, which is lower than the rate for England and Wales, namely, 16.1, it is also lower than the County rate for 1956 which was 15.82.

The **still birth rate** per 1,000 total (live and still) births was 19.66, as compared with the corresponding rate for England and Wales which was 22.4.

Illegitimate Births—The proportion of illegitimate births, which had risen very considerably during the war years, has since decreased, but fluctuates from year to year. In 1947, the proportion per 1,000 total births was 69.3, in 1948 it had fallen to 53.3, in 1949 it had again risen slightly to 57.3, but in 1950 it had again fallen to 43.87, and in 1951 to 39.36. It rose again in 1952 to 51.52, in 1953 to 52.85, in 1954 it was 52.07, in 1955 it was 40.00, in 1956 it rose to 43.64, and in 1957 it fell to 32.05.

Births in the various County Districts—Table 2 (a) shows the births Live and Still, Legitimate and Illegitimate; whilst Table 2 (b) shows the birth rates in the County Districts.

Premature Births—All babies weighing $5\frac{1}{2}$ lbs. or less at birth are classified as "premature" irrespective of the period of gestation. Out of

a total of 178 premature births in 1957 158 were born in hospitals or Maternity Homes within the National Health Service. Statistics as to the survival of these infants are forwarded to the Ministry of Health by the hospital or home at which the birth occurs. Of the remainder, 16 live births and 4 still births occurred at home.

The following table shows that of the 16 live births at home, 1 died at home within 24 hours of birth, 2 were transferred to hospital, 15 survived 28 days.

PREMATURITY.

All items in Table 3 refer to notified births after correction for transfers, so it is unnecessary for me to comment on the premature births as the information is fairly presented in the Table.

Table 2 (a).

BIRTHS, 1957.

District.	LIVE.			STILL.			TOTAL.		
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.
Urban—									
Buckley	114	2	116	2	—	2	116	2	118
Connah's Quay	105	8	113	4	—	4	109	8	117
Flint (M.B.)	237	4	241	6	—	6	243	4	247
Holywell	135	4	139	3	1	4	138	5	143
Mold	93	3	96	3	—	3	96	3	99
Prestatyn	121	3	124	3	—	3	124	3	127
Rhyl	279	11	290	3	—	3	282	11	293
Rural—									
Hawarden	577	22	599	12	—	12	589	22	611
Holywell	336	11	347	6	—	6	342	11	353
Maelor	76	1	77	3	—	3	79	1	80
St. Asaph	147	5	152	—	—	—	147	5	152
TOTAL URBAN	1084	35	1119	24	1	25	1108	36	1144
TOTAL RURAL	1136	39	1175	21	—	21	1157	39	1196
WHOLE COUNTY	2220	74	2294	45	1	46	2265	75	2340

Table 2 (b).
BIRTHS AND BIRTH RATES, 1957.
(LIVE BIRTHS, STILL BIRTHS AND TOTAL BIRTHS).

District.	Number of Births.			Crude rate per 1,000 Population.			* Adjusted rate per 1,000 Population.			Stillbirth rate per 1,000 total births.
	Live.	Still.	Total.	Live.	Still.	Total.	Live.	Still.	Total.	
Urban—										
Buckley	116	2	118	15.04	.26	15.30	15.64	.27	15.91	16.94
Connah's Quay	113	4	117	14.73	.52	15.25	13.99	.49	14.48	34.19
Flint (M.B.)	241	6	247	16.94	.42	17.36	16.60	.41	17.01	24.29
Holywell	139	4	143	16.89	.48	17.37	17.06	.48	17.54	27.97
Mold	96	3	99	14.65	.46	15.11	14.80	.46	15.26	30.30
Prestatyn	124	3	127	13.22	.32	13.54	16.26	.39	16.65	23.62
Rhyl	290	3	293	14.80	.15	14.95	15.98	.16	16.14	10.24
Rural—										
Hawarden	599	12	611	16.69	.33	17.02	17.02	.34	17.36	19.64
Holywell	347	6	353	15.68	.27	15.95	17.40	.30	17.70	17.00
Maelor	77	3	80	16.04	.62	16.66	16.04	.62	16.66	37.50
St. Asaph	152	—	152	13.79	—	13.79	16.96	—	16.96	—
Total Urban	1119	25	1144	15.25	.34	15.59	15.86	.35	16.21	21.85
Total Rural	1175	21	1196	15.91	.28	16.19	17.18	.30	17.48	17.56
Whole County	2294	46	2340	15.58	.31	15.89	16.51	.33	16.84	19.66

* Adjusted by the comparability factor for comparison with other areas.

Table 3 (continued).

PREMATURE BIRTHS (i.e., live births and still births of 5½ lbs or less at birth).

1. Number of premature live births notified (as adjusted by transferred notifications) :—

(a) In hospital	...	...	...	...	133
(b) At home	...	...	...	...	16
(c) In private nursing home (see note (1))	...	...	...	...	—
Total	...	...	...	...	149

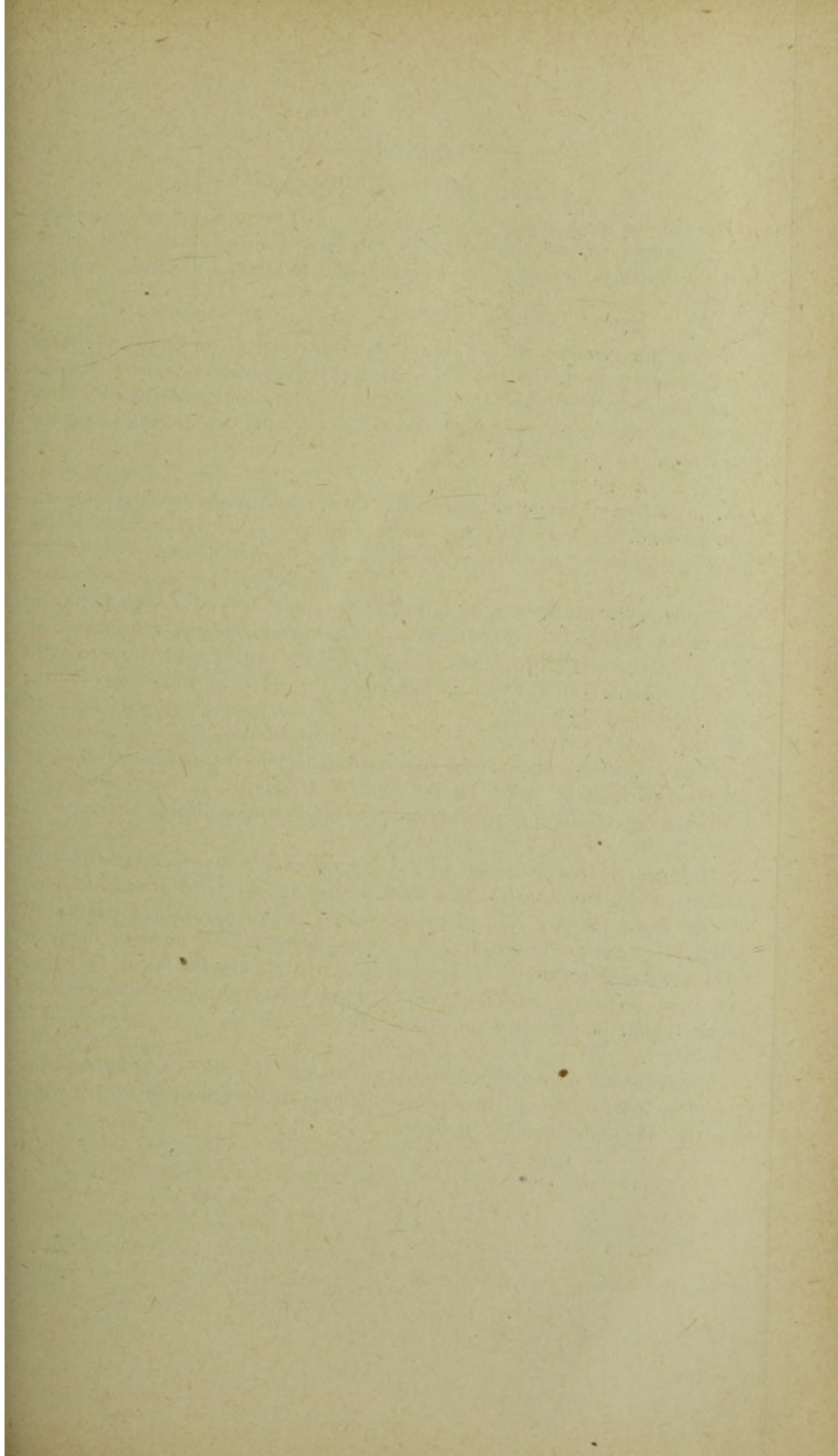
2. Number of premature still births notified (as adjusted by transferred notifications) :—

(a) In hospital	...	...	...	...	25
(b) At home	...	...	...	...	4
(c) In private nursing home (see note (1))	...	...	...	...	—
Total	...	...	...	...	29

Weight at birth.	PREMATURE LIVE BIRTHS															PREMATURE STILLBIRTHS		
	Born in Hospital (see Note 2)			Born at home and nursed entirely at home			Born at home and trans- ferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home & transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within 24 hours of birth	Survived 28 days			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
3 lb. 4 oz. or less (1,500 gms. or less)	13	8	3	..	..	..	1	..	1	..	..	..	..	..	..	14	1	..
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	28	3	24	1	..	1	..	..	..	..	..	..	..	..	..	4	..	..
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	28	2	26	7	1	6	1	..	1	..	..	..	..	..	..	3	2	..
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	64	2	57	6	..	6	..	..	..	..	..	..	..	..	..	4	1	..
TOTAL	133	15	110	14	1	13	2	..	2	..	..	..	..	..	..	25	4	..

NOTES :

- (1) "Private nursing home" includes nursing homes and maternity hospitals and homes not in the National Health Service and Mother and Baby Homes where women are confined in the Home.
- (2) The group under this heading includes cases which may be born in one hospital and transferred to another hospital.
- (3) Births in an ambulance or in the street are listed under the place to which the case is immediately transferred.



DEATHS.

During the year under review a total of 1,694 deaths were ascribed to the County, representing a death rate per 1000 population of 11.51, which is equal to the rate for England and Wales as a whole, namely, 11.5.

It will be observed from Table 4 that the three main causes of death are Diseases of the Heart and Circulation (851), Cancer (333), and Diseases of the Respiratory System (169) excluding respiratory tuberculosis which was 23. In the main these are illnesses of the more aged sections of the community.

The pattern of mortality due to the three main causes referred to above has remained very constant for years, and this pattern is noted in the figures for England and Wales as well as the County figures.

During 1957 deaths due to cancer of the lung showed a slight decrease from 59 in 1956 to 52. Total deaths due to cancer showed an increase in 1957 of 20 compared with 1956 (333—313). The increase in cancer deaths in 1957 is due to an increase in cancer of the stomach and cancer of the breast.

Deaths due to tuberculosis continued to remain at a low level—25—compared with 23 in 1956. Of the total of 25 deaths, 23 were due to respiratory tuberculosis and two to non-respiratory tuberculosis.

Last year I drew attention to the wastage of life due to fatal accidents, particularly road accidents. The total deaths due to accidents in 1957 was 64. Of these 15 were due to motor vehicle accidents. These deaths are regrettable for two reasons—(a) they are “preventable,” and (b) many of those killed are children. Every possible step should be taken to reduce fatal road accidents, and the County Road Safety Organiser deserves the support of all in this very important work.

A great deal is done in industry to reduce the risk of accidents—but it will be noted that 49 fatal accidents occurred during the year, either at places of employment or at home.

Table 4.

DEATHS (GENERAL) 1957.

SUMMARY OF CAUSES.

Cause of Death.	Males.	Females.	Total.	Percentage of Total Deaths.
1. Tuberculosis—respiratory ...	15	8	23	1.36
2. Tuberculosis—other ...	—	2	2	.12
3. Syphilitic disease ...	1	—	1	.06
4. Diphtheria ...	—	—	—	—
5. Whooping Cough ...	—	—	—	—
6. Meningococcal infections ...	—	1	1	.06
7. Acute Poliomyelitis ...	—	—	—	—
8. Measles ...	—	—	—	—
9. Other infective and parasitic diseases ...	1	—	1	.06
10. Malignant Neoplasm—stomach ...	41	28	69	4.07
11. Malignant Neoplasm—lung, bronchus ...	50	2	52	3.07
12. Malignant Neoplasm—breast ...	—	34	34	2.01
13. Malignant Neoplasm—uterus ...	—	15	15	.88
14. Other malignant and lymphatic neoplasms ...	86	68	154	9.09
15. Leukaemia, aleukaemia ...	6	3	9	.53
16. Diabetes ...	6	2	8	.47
17. Vascular lesions of the nervous system ...	109	172	281	16.59
18. Coronary disease, angina ...	172	87	259	15.29
19. Hypertension with heart disease ...	22	23	45	2.66
20. Other heart disease ...	109	93	202	11.92
21. Other circulatory diseases ...	31	33	64	3.78
22. Influenza ...	8	7	15	.88
23. Pneumonia ...	28	29	57	3.36
24. Bronchitis ...	66	14	80	4.72
25. Other diseases of respiratory system ...	11	6	17	1.00
26. Ulcer of stomach and duodenum ...	14	4	18	1.06
27. Gastritis, enteritis and diarrhoea ...	3	5	8	.47
28. Nephritis and Nephrosis ...	9	10	19	1.12
29. Hyperplasia of prostate ...	18	—	18	1.06
30. Pregnancy, childbirth, abortion ...	—	—	—	—
31. Congenital malformations ...	4	8	12	.71
32. Other defined and ill-defined diseases ...	82	76	158	9.33

Table 4—continued.

Cause of Death.	Males.	Females.	Total.	Percentage of Total Deaths.
33. Motor vehicle accidents ...	9	6	15	.88
34. All other accidents ...	23	26	49	2.89
35. Suicide ...	4	4	8	.47
36. Homicide and operations of war	—	—	—	—
All causes ...	928	766	1694	

DEATHS FROM RESPIRATORY TUBERCULOSIS—Table 4 (a) shows the deaths from Respiratory Tuberculosis in the various County Districts.

Table 4 (a).

DEATHS FROM RESPIRATORY TUBERCULOSIS.

County District.	Males.	Females.	Total.
Urban—			
Buckley ...	—	—	—
Connah's Quay ...	—	—	—
Flint (M.B.) ...	1	—	1
Holywell ...	1	1	2
Mold ...	—	—	—
Prestatyn ...	—	2	2
Rhyl ...	—	2	2
Rural—			
Hawarden ...	3	2	5
Holywell ...	3	1	4
Maelor ...	7	—	7
St. Asaph ...	—	—	—
TOTAL URBAN ...	2	5	7
TOTAL RURAL ...	13	3	16
WHOLE COUNTY ...	15	8	23

DEATHS FROM MALIGNANT DISEASE.

Table 5 (a) shows the deaths due to malignant disease (cancer) in each of the County Districts and the rate per 1,000 of the population for each district.

The death rate per 1,000 of the population shows considerable variation from district to district, but annual figures of cancer deaths for districts cannot be used to measure trends in the incidence of cancer as the populations involved are too small. Taking the cancer death rate for the County as a whole 2.26—this shows a small increase in 1956 when the rate was 2.14.

The death rate due to malignant disease in 1957 in the urban areas 2.60 shows a marked increase over the rural areas 1.92. This cannot be taken as a trend as the figures show considerable annual fluctuation. As previously mentioned the total deaths due to cancer of the lung fell in 1957 but cancer of the stomach and breast showed a considerable increase.

Another trend in cancer deaths is the increase in deaths in persons between 45 and 65 years of age. (125 deaths out of a total of 333 deaths). It will be noted from Table 5 (b) that more deaths occur in this period 45-65 years than in any other period of 20 years.

Dr. Percy Stocks, C.M.G., M.D., F.R.C.P., Director of Research, British Empire Cancer Campaign, has, for the past few years, been carrying out detailed analysis of cancer deaths in the North Wales, Cheshire and Lancashire areas. Some of this work has been published by the Cheshire and North Wales Branch of the British Empire Cancer Campaign, but his analysis will continue for some time to come. His findings may be of considerable importance and interest. Some of the findings may indicate certain applications in the field of preventing certain forms of cancer.

Table 5 (a).

DEATHS FROM MALIGNANT DISEASES IN THE VARIOUS
COUNTY DISTRICTS.

District and Population.	Sex.	Stomach.	Lung, Bronchus.	Breast.	Uterus.	Other.	Leukaemia.	Total.	Rate per 1,000 Population.
Buckley U.D. 7710	M	1	3	—	—	1	—	11	1.43
	F	1	—	2	1	2	—		
Con. Quay U.D. 7670	M	2	1	—	—	6	1	14	1.82
	F	2	—	1	—	1	—		
Flint M.B. 14230	M	6	6	—	—	9	1	39	2.74
	F	4	—	2	2	9	—		
Holywell U.D. 8230	M	2	5	—	—	3	—	18	2.19
	F	1	—	2	—	5	—		
Mold U.D. 6550	M	3	2	—	—	2	—	13	1.98
	F	2	—	1	1	2	—		
Prestatyn U.D. 9380	M	3	9	—	—	9	—	39	4.16
	F	3	—	6	2	7	—		
Rhyl U.D. 19590	M	7	6	—	—	13	1	57	2.91
	F	6	—	8	2	13	1		
Hawarden R.D. 35890	M	5	10	—	—	17	—	60	1.67
	F	7	2	5	1	12	1		
Holywell R.D. 22130	M	8	4	—	—	17	—	50	2.26
	F	1	—	5	4	8	1		
Maelor R.D. 4800	M	2	—	—	—	2	—	8	1.67
	F	—	—	1	—	3	—		
St. Asaph R.D. 11020	M	2	4	—	—	7	1	24	2.18
	F	1	—	1	2	6	—		
Total Urban 73360	M	24	32	—	—	43	3	191	2.60
	F	19	—	22	8	39	1		
Total Rural 73840	M	17	18	—	—	43	3	142	1.92
	F	9	2	12	7	29	2		
Whole County 147200	M	41	50	—	—	86	6	333	2.26
	F	28	2	34	15	68	3		

Table 5 (b).

AGES OF DEATHS

FROM TUBERCULOSIS, MALIGNANT DISEASE AND HEART AND CIRCULATORY DISEASES.

Disease.	Sex.	AGE GROUPS.									Total.
		0—	1—	5—	15—	25—	45—	65—	75—		
Tuberculosis :—											
Respiratory	M	...	—	—	—	4	9	—	2	...	15
„	F	...	—	—	—	1	2	2	3	...	8
Other	M	...	—	—	—	—	—	—	—	...	—
„	F	...	—	1	—	—	—	1	—	...	2
Total			—	1	—	5	11	3	5		25
Malignant Diseases :—											
Stomach	M	...	—	—	—	2	17	10	12	...	41
„	F	...	—	—	—	1	7	10	10	...	28
Lung, Bronchus	M	...	—	—	—	1	26	16	7	...	50
„	F	...	—	—	—	1	1	—	—	...	2
Breast	M	...	—	—	—	—	—	—	—	...	—
„	F	...	—	—	—	1	17	9	7	...	34
Uterus	F	...	—	—	—	1	8	3	3	...	15
Other	M	...	—	—	1	1	3	21	30	...	86
„	F	...	—	—	1	—	5	24	14	...	68
Leukaemia	M	...	—	—	—	1	3	1	1	...	6
„	F	...	—	1	1	—	1	—	—	...	3
Total			—	1	3	1	16	125	93	94	333
Heart and Circulation :—											
Vascular lesions	} M	...	—	—	—	2	25	31	51	...	109
of nervous		...	—	—	—	1	26	50	95	...	172
system	} F	...	—	—	—	—	—	—	—	...	—
Coronary disease,		...	—	—	—	4	73	50	45	...	172
angina	} F	...	—	—	—	—	19	35	33	...	87
Hypertension		...	—	—	—	—	5	6	11	...	22
with heart	} F	...	—	—	—	—	1	7	15	...	23
disease		...	—	—	—	—	—	—	—	...	—
Other heart	M	...	—	—	—	2	12	31	64	...	109
„	F	...	—	—	1	2	9	15	66	...	93
Other circulatory	M	...	—	—	—	2	7	9	13	...	31
„	F	...	—	—	—	1	5	7	20	...	33
Total			—	—	1	14	182	241	413		851

DEATHS ATTRIBUTABLE TO INFECTIOUS DISEASE.

During the year 1957, deaths attributable to Infectious Disease were as follows :—

Diphtheria	...	...	...	...	—
Whooping Cough	...	...	...	...	—
Meningococcal Infections	...	...	...	...	1
Acute Poliomyelitis	...	...	...	...	—
Measles	...	...	...	...	—
Other Infective and Parasitic Diseases	...	...	...	...	1
Influenza	...	...	...	...	15
Pneumonia	...	...	...	...	57
Bronchitis	...	...	...	...	80
Gastritis, Enteritis and Diarrhoea	...	...	...	...	8

During the year there were no deaths due to Diphtheria, Whooping Cough, Acute Poliomyelitis or Measles. There is no question of the effectiveness of the immunisation work done against Diphtheria, Whooping Cough and Poliomyelitis. It is too soon yet to say that immunisation against Poliomyelitis is going to eliminate paralytic forms of this illness, but we must bear in mind that twenty years ago before immunisation against Diphtheria started Diphtheria killed more children annually than does Poliomyelitis at present.

During 1957 there was a sharp rise in deaths due to Influenza (5-15). This was due to the epidemic of Asian Influenza which was at its height in the County during September and October. Most of these deaths occurred in the elderly, many of whom were already suffering with chest troubles such as Bronchitis.

DEATHS OF INFANTS AGED UNDER TWELVE MONTHS—During the year 57 infants died before attaining the age of twelve months, and of these 30 were males and 27 females, while 54 were legitimate and 3 were illegitimate.

The Infant Mortality Rate (deaths per 1,000 live births) is therefore 24.85, which is higher than the rate for England and Wales, namely 23.00.

The causes of death of the 57 infants are given in Table 6 (a). In the present state of our knowledge little can be done to reduce the number of deaths due to Congenital Malformations.

It will be noted that the greatest number of deaths are due to ill-defined causes and to certain defined illness, but more can still be done to reduce the number of deaths.

Deaths due to chest conditions, diarrhoea and accidents are all preventable and can be eliminated with a high standard of child care. A great deal has been done to raise the standards of child care in the past

years and the medical and nursing staff of the department give every possible help to parents. It is only fair to state that some parents do not avail themselves of the facilities provided for them and others are unco-operative and do not put into practice the advice given to them.

If parents availed themselves of the medical and nursing services relating to child welfare the loss of infant life in the County could be materially reduced.

Infant deaths in the various County Districts are shown in Table 6 (a), and the Infant Mortality Rates for each district in Table 6 (b).

Included in the above total of 57 are 42 deaths of infants who failed to survive the first four weeks of life, and the figures for the various County Districts are shown in Table 6 (c).

Table 6 (a).

INFANTILE DEATHS, 1957.

(Under 1 year of age).

District.	MALES.			FEMALES.			Infants.	
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit. and	Illegit.
Urban—								
Buckley	2	—	2	2	—	2	...	4
Connah's Quay	1	—	1	1	—	1	...	2
Flint (M.B.)	5	—	5	2	—	2	...	7
Holywell	4	—	4	—	—	—	...	4
Mold	1	—	1	2	—	2	...	3
Prestatyn	1	—	1	1	—	1	...	2
Rhyl	4	—	4	3	—	3	...	7
Rural—								
Hawarden	5	—	5	5	1	6	...	11
Holywell	4	—	4	6	1	7	...	11
Maelor	—	—	—	—	—	—	...	—
St. Asaph	3	—	3	2	1	3	...	6
Total Urban	18	—	18	11	—	11	...	29
Total Rural	12	—	12	13	3	16	...	28
Whole County	30	—	30	24	3	27	...	57

The causes of death were :—

Bronchitis	...	...	...	...	1
Pneumonia	...	...	...	...	11
Congenital Malformations	...	...	...	...	10
Other defined and ill-defined diseases	...	...	...	...	31
Gastritis, Enteritis, Diarrhoea	...	...	...	...	2
Accidents (other than road accidents)	...	...	...	...	2

Rate per 1,000 Total Live Births.

District.	MALES.			FEMALES.			Infants.	
	Legit.	Illeg.	Total.	Legit.	Illeg.	Total.	Legit. and Illeg.	
Urban—								
Buckley	17.24	—	17.24	17.24	—	17.24	34.48	
Connah's Quay	8.85	—	8.85	8.85	—	8.85	17.71	
Flint (M.B.)	20.75	—	20.75	8.30	—	8.30	29.05	
Holywell	28.78	—	28.78	—	—	—	28.78	
Mold	10.42	—	10.42	20.83	—	20.83	31.25	
Prestatyn	8.06	—	8.06	8.06	—	8.06	16.12	
Rhyl	13.79	—	13.79	10.34	—	10.34	24.13	
Rural—								
Hawarden	8.35	—	8.35	8.35	1.67	10.02	18.36	
Holywell	11.53	—	11.53	17.29	2.88	20.17	31.70	
Maelor	—	—	—	—	—	—	—	
St. Asaph	19.73	—	19.73	13.16	6.58	19.74	39.47	
Total Urban	16.08	—	16.08	9.83	—	9.83	25.91	
Total Rural	10.21	—	10.21	11.06	2.55	13.62	23.83	
Whole County	13.08	—	13.08	10.46	1.31	11.77	24.85	

Table 6 (c).

NEO-NATAL DEATHS, 1957.

(Under 4 weeks of age).

District.	MALES.			FEMALES.			Infants.	
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit. and	Illegit.
Urban—								
Buckley	2	—	2	1	—	1	...	3
Connah's Quay	1	—	1	—	—	—	...	1
Flint (M.B.)	4	—	4	1	—	1	...	5
Holywell	3	—	3	—	—	—	...	3
Mold	—	—	—	2	—	2	...	2
Prestatyn	1	—	1	1	—	1	...	2
Rhyl	3	—	3	3	—	3	...	6
Rural—								
Hawarden	3	—	3	5	1	6	...	9
Holywell	3	—	3	4	1	5	...	8
Maelor	—	—	—	—	—	—	...	—
St. Asaph	1	—	1	1	1	2	...	3
Total Urban	14	—	14	8	—	8	...	22
Total Rural	7	—	7	10	3	13	...	20
Whole County	21	—	21	18	3	21	...	42

MATERNAL MORTALITY—There was no death attributed to pregnancy, childbirth or abortion. Whenever a maternal death occurs, the Medical Officer of Health has to obtain a confidential report from the Midwife, General Medical Practitioner, Hospital, and Consultant Obstetrician giving complete details as to ante-natal care, treatment during confinement, and post-natal care. This information is then forwarded to a Regional Assessor (Professor Jeffcoate of Liverpool), who may ask for further information, or, if satisfied with that already provided, forward the report to the Ministry of Health.

The whole object of this work is to try and improve the Midwifery Service provided in the County both in hospital and at the patient's home. Careful inquiries into the cause of maternal deaths give valuable information and enable steps to be taken to improve still further a service which has a very high standard.

There has been a steady fall over the years in maternal deaths in the County and the fact that no death occurred from this cause in 1957 indicates a very satisfactory standard of hospital and domiciliary midwifery.

DEATHS IN THE VARIOUS COUNTY DISTRICTS—Table 7 shows the total number of deaths of males and females in the County Districts, and the crude and adjusted Mortality Rates for those Districts.

Table 7.
DEATHS IN THE SEVERAL DISTRICTS.
(All ages—all causes).

District.	Males.	Females.	Total.	Crude Rate per 1000 Population.	* Rate Adjusted per 1000 Population.
Urban—					
Buckley	53	41	94	12.19	13.65
Connah's Quay	47	22	69	9.00	12.42
Flint M.B.	86	63	149	10.47	14.03
Holywell	45	49	94	11.42	13.25
Mold	35	32	67	10.23	11.87
Prestatyn	78	77	155	16.52	11.23
Rhyl	151	154	305	15.57	13.07
Rural—					
Hawarden	186	126	312	8.69	10.95
Holywell	142	134	276	12.47	11.85
Maelor	44	20	64	13.33	11.20
St. Asaph	61	48	109	9.89	9.79
Total Urban	495	438	933	12.72	12.97
Total Rural	433	328	761	10.31	11.24
Whole County	928	766	1694	11.51	12.09

* For purposes of comparison with other areas.

The following information is extracted from the statistics supplied by the Registrar General:—

Urban Districts.

	Males.	Females.	Total.
Deaths in age group 45-64	148	70	218
Deaths in age group 65 and over	308	326	634
	456	396	852

Rural Districts.

	Males.	Females.	Total.
Deaths in age group 45-64 ...	118	73	191
Deaths in age group 65 and over ...	268	224	492
	386	297	683

Section B.

HEALTH SERVICES PROVIDED IN THE COUNTY.

ADMINISTRATION.

The County Medical Officer is responsible to the Health Committee for the control, supervision and co-ordination of all services provided under the National Health Service Acts, and is assisted by four full-time medical officers, and by three medical officers who are medical officers of health for grouped County Districts in addition to being Assistant County Medical Officers.

All matters relating to health are reported to the Health Committee which has a total of 63 members, 42 of these members are members of the County Council, the remainder are appointed by District Councils, the British Medical Association, Royal College of Midwives, Clwyd and Deeside Hospital Management Committee, Executive Council, and Voluntary Organisations.

In addition to the Health Committee there are three area Care and Nursing Sub-Committees—Western, Central and Eastern. These area committees deal with the day to day problems relating to:—

- Home Nursing ;
- Health Visiting ;
- Domiciliary Midwifery ;
- Prevention of Illness (Care and After-Care) ;
- Home Help Service ;
- Mental Health ;
- also Welfare of the Blind ;
- Deaf and Dumb ;
- Handicapped Persons.

The Area Care and Nursing Sub-Committees meet each quarter at certain centres in the area concerned, and each Sub-Committee has a majority of County Council members, representatives from each district council concerned, and co-opted members.

All matters relating to the Ambulance Service are considered in the first place by the Ambulance Sub-Committee. This Sub-Committee has 19

members, 13 County Council members, 3 members representing district councils, and 3 members representing voluntary organisations.

There are two other main departments (apart from Education) where the Medical Officer and his staff attend their committees, namely, Welfare and Children's Committees. Health matters concerning persons needing care and children taken into care are dealt with by the Health Department and for this reason the Committees are attended.

In addition to the medical examination of all staff, the County Medical Officer of Health is also Police Surgeon and examines all recruits to the Police Force and deals with any medical problems relating to members of the force referred to him by the Chief Constable.

VOLUNTARY ORGANISATIONS.

I would like to thank, once again, the members of the various Welfare Centre Voluntary Committees. As in past years they have given excellent service, and indeed the County Health Committee and the mothers and children that they so willingly serve owe them a great debt of gratitude. These voluntary workers attended at Child Welfare Clinics throughout the year, and without their valuable help the work done at clinics throughout the County would have suffered.

Valuable help was also obtained during the year from members of the W.V.S. They operate a variety of services most efficiently and I would like to pay tribute to the valuable work done by the help received from Mrs. Eleanor Evans, the County Organiser for the W.V.S.

The British Red Cross Society and St. John's Ambulance Brigade rendered valuable assistance during the year in running Medical Loan Depots and providing voluntary attendants for the Ambulance Service.

My sincere thanks are also due to the workers of the St. Asaph Diocesan Moral Welfare Association for the willing way they handle many difficult human problems.

Once again I would like to thank members of the public for their help with individual problems during the year. The great traditions of voluntary effort both from organised bodies and individuals is very alive in this County, and makes the work of members of the County Health Department much easier.

CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE.

Expectant and Nursing Mothers—Ante-Natal and Post-Natal facilities are available at nine centres in the County—Bagillt, Buckley, Caergwrle, Holywell, Mold, Prestatyn, Rhyl, Shotton and Saltney. Every endeavour is made to provide a full service at each centre, but owing to inadequate premises at Bagillt, Buckley and Caergwrle, it is difficult to provide a satisfactory service to mothers.

At the other centres there are good clinic premises and it is much easier to carry out satisfactory ante-natal work. I reported last year that the policy of the Health Committee was to combine the ante-natal services of the County and the Hospital Services wherever possible. The first combined clinic was opened at Prestatyn on 1st January, 1956, and the second at the new clinic at Holywell on 12th September, 1956. The ante-natal sessions at these two centres are done at County premises by Hospital Medical Staff and attended by the County Midwives.

The Health Committee has now agreed that "combined" Ante-Natal Clinics be established at five centres in the County—namely, Rhyl, Prestatyn, Holywell, Shotton and Mold. These combined clinics operate already at Holywell and Prestatyn and have proved very successful. The next centre will be Rhyl, but it was not possible to establish a combined clinic there during 1957—it is hoped to establish a combined clinic at Rhyl during 1958 when staff and facilities are available. The other clinics at Shotton and Mold will also be established.

The future of the Ante-Natal Clinics staffed by the medical staff of the Health Department is not yet settled. We will be in a better position to give a decision when the report of the Cranbrook Committee on Maternity Services has been published.

For the time being Ante-Natal Clinics at the seven other centres are attended by Medical Staff of the Health Department, and midwives.

	Year :	1947	1949	1950	1951	1952	1953	1954	1955	1956	1957
Expectant Mothers	...	999	797	641	473	325	369	292	305	1045	1,100
Attendances	...	3743	2567	1822	1208	939	1193	696	705	1271	2,000

The immediate result of providing joint ante-natal clinics has been a marked increase in mothers attending as the figures above indicate.

It is gratifying to note that not only did the numbers increase at joint clinics but also at existing clinics.

Joint clinics have brought about closer co-operation between the maternity Hospital Staff and the staff of the Health Department, and this in turn has improved the service available to the expectant mother. Already a new development has resulted at Holywell, namely, a Parentcraft Class, and further classes at other centres are planned.

I would like to thank Mr. Parry-Jones, the Consultant Obstetrician to the Clwyd and Deeside Hospital Management Committee and his staff for their co-operation and assistance in this work during the year.

Maternity outfits are provided on request to all expectant mothers having a domiciliary confinement. Stocks are held at all clinics, and on the premises occupied by the district midwives. The number of such outfits provided in 1957 was 457.

A—Ante-Natal Cases.

1. Number of Sessions held (i.e., number of times Clinic opened during the year) when :—
 - (a) A Medical Officer was in attendance
 - (b) A Medical Officer was NOT in attendance
2. Number of women who attended the Clinic during the year
3. Number of NEW cases included in (2) above (i.e., women who had NOT previously attended any clinic of the Local Health Authority during the current pregnancy)
4. Total number of attendances made by women, included in (2) above, during the year

B—Post-Natal Cases.

5. Number of Post-Natal cases who attended the Clinic during the year
6. Number of new cases, included in (5) above (i.e., women who had not previously attended any Post-Natal Clinic of the Local Health Authority after last confinement)
7. Total number of attendances, made by women in Section 5 above, during the year

	Bagillt	Buckley	Gaerfwrle	Holywell†	Mold	Prestatyn†	Rhyl	Saltney	Shotton	TOTALS
(a) A Medical Officer was in attendance	10	23	5	46	21	23	15	20	21	184
(b) A Medical Officer was NOT in attendance	..	..	..	..	..	..	..	..	..	..
Number of women who attended the Clinic during the year	12	187	3	868	173	129	32	74	31	1504
Number of NEW cases included in (2) above (i.e., women who had NOT previously attended any clinic of the Local Health Authority during the current pregnancy)	6	34	3	412	74	37	12	20	25	623
Total number of attendances made by women, included in (2) above, during the year	47	216	3	1344	206	142	42	74	39	2113
Number of Post-Natal cases who attended the Clinic during the year	..	..	..	222	1	42	3	1	..	269
Number of new cases, included in (5) above (i.e., women who had not previously attended any Post-Natal Clinic of the Local Health Authority after last confinement)	..	..	..	222	1	25	2	1	..	251
Total number of attendances, made by women in Section 5 above, during the year	..	..	..	222	1	47	3	1	..	274

† Prestatyn and Holywell Clinics are combined with Hospital Consultants' Clinic.

Table 9.

MOTHER AND BABY HOMES (i.e., Homes or hostels for unmarried mothers and their babies).

Name and Address of Home or Hostel	Number of Beds			Number of admissions (ignoring re-admissions after confinement) during the year	Number of admissions in Col. (6) for which the authority was responsible.	Average length of stay	
	Total beds (excl. mat. and lab. and cots)	Mat. (excl. lab. and isolation)	Labour beds	Cots		Ante-natal	†Post-natal
(1)	(2)	(3)	(4)	(5)	(6)	(8)	(9)
(a) Provided by the Authority :— Bersham Hall—owned jointly by the North Wales Counties of Anglesey, Caernarvon, Denbigh, Flint, Merioneth and Montgomery, and administered on their behalf by the C.M.O., Denbighshire.	18	..	1	12	54 (i.e., Total admissions from all Constituent Authorities)	37 days	26 days
(b) Provided or used by Voluntary Organisations with which the Authority make arrangements under Sec. 22 (1) or to which the Authority make payment under Sec. 22 (5).	..	..	..	..	..	These figures relate to Flintshire cases only	

(c) Number of cases sent by the Authority during the year to homes other than those mentioned in (a) and (b) above, payment being made on an "ad hoc" basis :—

(1) Expectant Mothers	...	...	...	1
(2) Post-Natal Cases	...	...	...	—

† Exclusive of the lying-in period.

Child Welfare—Last year I prepared a special report for the Health Committee on Clinic premises and this report was reproduced in full in my Annual Report for 1956. This report was prepared because we were finding it difficult to give a satisfactory service in some of the rented premises which lacked adequate facilities for clinic purposes.

The Health Committee accepted my recommendations that permanent clinics be erected at the following centres:—

Pentre and Mancot,
Buckley,
St. Asaph,
Connah's Quay,
Caergwrle.

There will be a need later for further permanent clinics in the County, when these have been erected, due to the increase in population in certain districts.

During the year new clinic premises were made available at Rhyl in September and at Penley in November. The new clinic at Penley is of a completely new design and built to meet the special needs of the area.

The Health Committee also agreed to purchase a Mobile Clinic to serve the smaller centres of population in the rural areas and new centres of population such as housing estates. Advice on suitable mobile clinics was obtained from Authorities using these clinics and an order for a suitable mobile clinic was placed at the end of the year with the Coventry Steel Caravans, Ltd., Buckinghamshire. It is hoped that the Mobile Clinic will be in operation about the middle of 1958.

Child Welfare Centres continued to serve a very useful purpose and their value has not diminished with the development of the National Health Service.

These centres continue to advise mothers on problems relating to the care and management of healthy children, and to detect early deviation from normal in developing children. The fact that attendances continue at such a high level indicates that they are meeting a real need.

The Centres are staffed weekly by the Authority's Health Visitors, and are attended at fortnightly intervals by the Authority's Medical Officers.

During the year Consultative Infant Welfare Clinics were established at Rhyl, Holywell, Shotton and Mold. These Clinics are attended by Dr. M. M. McLean, the Paediatrician to the Clwyd and Deeside Hospital Management Committee. Dr. McLean also acts as County Paediatrician and in this capacity gives the Authority expert advice on the many intricate problems relating to child care and management.

I would like to thank Dr. McLean for her valuable help and advice. She has met the Medical and Health Visiting Staff and kindly agreed to give a lecture on problems of child care to the Health Visitors during the year.

Each Centre has its own Voluntary Committee, and as I have already mentioned, members of the Committee attend at each Clinic opening and give valuable assistance to the Medical and Nursing Staff.

The Health Visitors give individual instruction both at the Centres and in the home, and several are now giving group talks to mothers.

During the year films and film strips were shown at Clinics on problems relating to Child Care.

Table 10 (b) gives details as to the number of children attending the various Centres.

Care of Premature Infants—During the year under review, the number of domiciliary premature live births was 16, and the number of premature live births in private nursing homes was nil, a total of 16.

Of the 16 births at home, 14 were nursed entirely at home, and 2 were transferred to hospital. Of the 14 nursed at home, 13 survived 28 days and one died within 24 hours of birth. Of the 2 who were born at home and were transferred to hospital, both survived 28 days. There is no special domiciliary provisions for premature live births, but liaison with the City Hospital, Chester, and St. Asaph General Hospital has always been good, and admission of cases readily obtained.

Supply of Dried Milk, etc.—At each Centre members of the Voluntary Committee arrange for the purchase and sale of certain proprietary dried milk and other foods.

Table 10 (a).

Year :	1947	1951	1952	1953	1954	1955	1956	1957
Number of Registered Live Births ...	3483	2381	2303	2289	2215	2154	2310	2154
Children who attended during the year and who, at the end of the year, were :—								
(a) Under 1 year of age ...	1912	1481	1378	1411	1434	1813	1522	1411
(b) Between 1-5 years ...	1788	2143	2262	2269	2318	2313	2275	2154
Total attendances ...	26828	28491	28846	29941	29181	29166	32505	33165

Table 10 (b).
CHILD WELFARE CENTRES—SUMMARY OF ATTENDANCES, 1957.

Description.	Bagillt	Bodelwyddan	Broughton	Buckley	Gaerwre	Gaerwys	Counab's Quay	Flint	Greenfield	Holywell	Leeswood	Mancof & Pentre	Mold	Mostyn	Penley	Prestatyn	Rhyl	Rhuddlan	Saltney	Shotton	St. Asaph	TOTALS
1. Number of Sessions	50	24	49	50	51	51	48	50	51	51	48	50	50	22	24	50	51	24	51	51	48	917
2. Number of children who first attended during the year and who at their first attendance were under 1 year of age	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3. Number of children who attended during the year and were born in:—	45	47	58	122	60	34	156	216	51	133	41	156	198	23	78	141	303	49	68	254	55	2298
1957	40	45	53	95	52	31	135	115	47	98	38	142	138	20	40	85	184	31	57	172	43	1661
1956	48	25	9	51	49	33	52	112	44	186	29	45	135	15	42	74	126	33	44	94	28	1244
1955-52	41	32	10	29	49	23	59	105	43	96	28	87	109	17	50	64	103	1	13	138	18	1115
4. Total number of children who attended during the year	129	102	72	175	150	87	246	332	134	380	95	274	382	52	132	223	413	65	84	404	89	4020
5. Number of attendances during the year made by children who at date of attendance were:—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(a) Under 1 year	910	465	1079	1545	1005	127	1777	1970	1057	1073	647	1473	1813	224	304	388	2411	365	1038	1950	452	23073
(b) 1 year but under 2 years	183	123	360	258	191	68	362	362	95	413	175	345	579	50	231	386	262	93	309	318	108	5271
(c) 2 years but under 5 years	123	110	388	176	112	46	343	263	93	201	80	383	481	47	256	486	230	13	396	515	93	4835
6. Total attendances during the year	1216	698	1827	1979	1308	241	2432	2595	1245	1687	902	2201	2873	321	791	2260	2903	471	1743	2783	653	33179

The distribution of Welfare Foods (N.D.M., C.L.O., A. & D. Tablets, and O.J.) has again been carried out successfully during the year with the continued co-operation from the W.V.S., W.I., Welfare Centre Voluntary Committees, and Village Shopkeepers.

During the course of the year, two centres were closed. These were under the charge of Mrs. Evans, The Parsonage, Tallarn Green, and Mrs. Lloyd Jones, The Stores, Flint Mountain; both giving up owing to the pressure of other duties.

Two new centres were one at Gwaenysgor under the charge of Mrs. Myers, "Eversleigh," Gwaenysgor, a member of the W.V.S., and the other at Rhosesmor in the shop of Mrs. E. H. Jones, Wern Stores. At Mostyn the centre at the Post Office Stores, Rhewl, was closed, but Mrs. Evans, Fron House, Rhewl, kindly undertook the distribution of foods at her house.

DISTRIBUTION CENTRES.

The total number of distribution centres in the County remained at 53, and can be classified as follows:—

Clinics	...	...	...	20
W.V.S.	...	...	...	7
Shops	...	...	...	22
Private Households	...	...	...	3
Hospitals	...	...	...	1
Total				53

STORAGE DEPOTS.

These are located at Fronfraith, Russell Road, Rhyl, and 40, High Street, Mold. The administrative office being also at the latter address.

SUPPLIES.

Supplies of Welfare Foods are ordered from Messrs. S.P.D. Ltd., Liverpool, and Messrs. Aber Carriers Ltd., Welshpool, acting as agents for the Ministry of Agriculture, Fisheries and Food, and direct deliveries are made as follows:—

	S.P.D. Ltd., Liverpool.	Aber Carriers, Welshpool.
Rhyl Depot	—	1
Mold Depot	1	—
Clinics	1	1
W.V.S.	1	—
Shops	5	15
Private Households	—	2
Hospitals	—	1
	8	20

The remaining centres are supplied from the Authority's Storage Depots, as follows :—

		Rhyl Depot.	Mold Depot.
Clinics		7	9
Shops		—	3
W.V.S.		2	4
Private Households		—	2
		9	18

TRANSPORT.

Deliveries are made from the Authority's Storage Depots by means of hired transport, whilst the Welfare Foods Clerk delivers any emergency requirements with his private car.

FOODS DISTRIBUTED.

Issues to beneficiaries, and losses through breakages, etc., during the year ended 31st December, 1957, were as follows :—

	National Dried Milk.	Cod Liver Oil.	Vitamin Tablets.	Orange Juice.
Issued against coupons	... 46698 ...	... 10286 ...	... 5159 ...	... 79371
Issued to Hospitals	... 357 ...	... 12 ...	... — ...	... 36
Issued to Day Nurseries	... — ...	... 6 ...	... — ...	... 144
Issued at 4/- per tin	... 334 ...	... — ...	... — ...	... —
	47389	10304	5159	79551
Out of date, damaged, etc., and returned to M.A.F.F.	... 16 ...	... — ...	... — ...	... —
Sent for Analysis	... — ...	... — ...	... 3 ...	... 1
Losses through breakages, etc.	... — ...	... 36 ...	... 54 ...	... 584
Total	... 47405	10340	5216	80136

SUMMARY OF COUPONS AND STAMPS.

	Issues.	Charge.	Amount Due.	Amount Received.
		s. d.	£ s. d.	£ s. d.
N.D.M.				
(a) By stamps	... 15429 ...	10½	675 0 4½	675 0 4½
(b) By stamps	... 30308 ...	2 4	3535 18 8	3535 18 8
(c) Free	... 961 ...	free	— — —	— — —
Total coupons	... 46698			
Issues at 4/-	... 337 ...	4 0	67 8 0	67 8 0

		Issues.		Charge.		Amount Due.			Amount Received.			
				s. d.		£ s. d.			£ s. d.			
C.L.O.	...	10286	...	free	...	—	—	—	...	—	—	—
A. & D. Tablets	...	5159	...	free	...	—	—	—	...	—	—	—
O.J.												
(a) By stamps	...	78783	...	5	...	1641	6	3	...	1641	6	3
(b) Free	...	588	...	free	...	—	—	—	...	—	—	—
		79371				£5919 13 3½			£5959 12 5½			

Dental Care—The County Council has a duty to provide dental treatment for expectant mothers and children under 5 years of age—as these two groups are “priority groups.”

At the end of the year one Principal Dental Officer, two full-time Dental Officers and one part-time Dental Officer were employed.

Although the Dental Staff is still very much below establishment, treatment was given to a limited number of persons in the priority groups—particularly so to children under 5 years of age.

The following table gives information as to the dental care and treatment given to children under 5 years and to expectant mothers during the year.

DENTAL CARE AND TREATMENT OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE YEARS OF AGE.

A. NUMBERS PROVIDED WITH DENTAL CARE :

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ..	8	8	8	6
Children under Five ..	205	191	164	120

B. FORMS OF DENTAL TREATMENT PROVIDED :

	Scalings and Gum Treat- ment	Fillings	Silver Nitrate Treat- ment	Crowns or Inlays	Extrac- tions	General Anaes- thetics	DENTURES PROVIDED		Radio- graphs
							Full Upper or Lower	Partial Upper or Lower	
Expect- ant and Nursing Mothers	..	5	..	..	21	7	..	1	1
Children under Five	..	11	64	..	271	167	..	..	..

Total number of sessions (i.e., equivalent complete half days devoted to maternity and children welfare patients during the year ... 26

DOMICILIARY MIDWIFERY.

At the end of the year, the Authority employed six (6) District Midwives and thirty-three (33) District Nurse/Midwives. Five (5) Midwives are engaged in private practice, and twenty-nine (29) are employed by Hospital Management Committees in the area. All Midwives are supervised by the County Supervisor of Midwives (acting as Non-Medical Supervisor) who, during the year, paid six hundred and seventy-nine (679) visits, of which twenty-six (26) were to hospitals and maternity homes under the control of the Hospital Management Committee, fifty-eight (58) to independent Midwives, and five hundred and ninety-five (595) to Midwives employed by the Authority. At one hundred and fifty-three (153) of these visits the Midwife was seen actually at work.

Although there has been a decrease in the number of domiciliary confinements since 1948, there is still a considerable amount of work done by the Midwives employed by this Authority as the following table shows. The "lying-in" period during which a mother is visited by a Midwife is 14 days. It will be noted that 1,196 mothers confined in hospital were discharged before the 14th day and had to be visited during the remainder of the lying-in period by Midwives employed by this Authority.

I have always advocated reducing the number of mothers admitted to hospital for their confinement and retaining those admitted for a longer period. Out of 1,678 mothers confined in hospitals as noted, 1,196 were discharged before the fourteenth day, which entails a duplication in the nursing care of the mother during the lying-in period.

Thirty-nine (39) of the Authority's midwives are qualified to administer gas and air analgesia and are equipped with the necessary apparatus. Twenty-seven midwives employed in Homes and Hospitals in the National Health Service were qualified to administer gas and air analgesia.

The first Trilene Analgesia apparatus was acquired in 1955 and given an extensive trial, and proved very satisfactory. At present five Trilene Analgesia apparatus are in use, and during the year one hundred and thirty-one mothers had Trilene Analgesia during their confinement.

Due to the stringent rules of the Central Midwives Board concerning the servicing of the apparatus which entails sending the whole equipment to Cyprane Ltd., Keighley, Yorkshire, every six months, it is not as convenient to use this equipment as the Gas-Air Analgesia apparatus.

During the year seven midwives attended refresher courses organised by the Royal College of Midwives. The County branch of the Royal College of Midwives again met regularly during the year and had a very excellent programme of lectures, etc.

Regular quarterly meetings are held of all midwives and nurses employed by the Authority and these are attended by the County Nursing Officer and the County Medical Officer. New developments and matters of general interest are discussed and staff can bring forward any matter relating to their work. These meetings have proved of great value both to the staff and the department.

In September, 1957, St. Asaph Hospital was approved as a Part II Midwifery Training School and five domiciliary midwives were approved as District Training Midwives. This new Training Centre will prove of great value both to the hospital and to the domiciliary midwives, and it will foster still further the close liaison that exists between St. Asaph Hospital Staff and the Staff of the County Health Department.

Duty as Local Supervising Authority—It is the duty of the Local Health Authority to supervise the work of all midwives who have notified their intention to practise in the area, irrespective of whether they are employed as domiciliary midwives by the Authority or by Hospital Management Committees, or are engaged in private practice.

Table 13 shows the number of midwives who were in practice in the area on 31st December, 1957, while Table 14 shows the number of supervisory visits paid to those midwives during the year by the County Nursing Officer, who also acts as Non-medical Supervisor of Midwives.

DELIVERIES ATTENDED BY MIDWIVES.

Number of Deliveries attended by Midwives in the Area during the year 1957.

Domiciliary Cases.

	Doctor not booked.			Doctor booked		Totals	Cases in Institutions
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	(3)	Doctor present at time of delivery of child (either the booked Doctor or another)	Doctor not present at time of delivery of child		
(2)				(4)	(5)	(6)	(7)
12		22		187	291	512	..
..				..	..	..	..
..				..	..	..	..
..				..	..	..	1678
..				..	..	..	..
12		22		187	291	512	1678
Totals							

(e) Number of cases delivered in institutions but attended by domiciliary midwives on discharge from institutions and before the fourteenth day ... 1196

(f) Breast Feeding—Number of domiciliary cases in which the infant was wholly breast fed at the fourteenth day ... 346

TABLE 12.
ADMINISTRATION OF INHALATIONAL ANALGESICS
(Domiciliary Midwives).

(1)	No. of domiciliary midwives practising in the area at end of year who were qualified to administer inhalational analgesics in accordance with the requirements of the Central Midwives Board (2)	No. of sets of apparatus for the administration of inhalational analgesics in use at end of year		No. of cases in which inhalational analgesics were admin. by midwives in domiciliary practice during the year :				No. of cases in which pethidine was administered by midwives in domiciliary practice during the year :	
		Gas & Air (3)	Tri-lene (4)	When doctor was present at time of delivery of child		When doctor was not present at time of delivery of child		When doctor was present at time of delivery of child (9)	When doctor was not present at time of delivery of child (10)
				Gas & Air (5)	Tri-lene (6)	Gas & Air (7)	Tri-lene (8)		
(a) Domiciliary Midwives employed directly by Local Health Authority ...	39	33	5	110	24	159	107	107	228
(b) Domiciliary Midwives employed under Sec. 23 by voluntary organisations as agents of Local Health Authority	—	—	—	—	—	—	—	—	—
(c) Domiciliary Midwives employed under Sec. 23 by hospital authorities as agents of Local Health Authority ...	—	—	—	—	—	—	—	—	—
(d) Domiciliary Midwives in private practice or employed by organisations not acting as agents of Local Health Authority ...	—	—	—	—	—	—	—	—	—
	90	93	5	110	24	159	107	107	228

Table 13.

MIDWIVES IN PRACTICE ON 31st DECEMBER, 1957.

			Domiciliary Midwives.	Midwives in Institutions.	Total.			
(a)	Midwives employed by the Authority	39	...	—	...	39		
(b)	Midwives employed by Voluntary Organisations :—							
(i)	Under arrangements with the Local Health Authority in pur- suance of Section 23 of the National Health Service Act, 1946	...	...	—	...	—		
(ii)	Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	...	...	—	...	—		
(c)	Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act :—							
(i)	Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	...	...	—	...	—		
(ii)	Otherwise	...	...	—	29	...	29	
(d)	Midwives in Private Practice (including Midwives employed in Nursing Homes)	...	...	5	...	—	...	5
	Total	...	44	29	73			

Table 14.

SUPERVISION OF MIDWIVES.

	Number of Inspections.			
	Routine.	Special.	Other.	Total.
National Health Service Hospitals and Maternity Homes	... 10	... 11	... 5	... 26
County Domiciliary Midwives	... *142	... *164	... 289	... 595
Independent Domiciliary Midwives (as Relief Midwives)	... 4	... 3	... 51	... 58
Total	... 156	... 178	... 345	... 679

* The Midwife was inspected while actually at work in 132 cases of routine inspections and in 21 special inspections.

Among the reasons for Special Inspections were :—

Ante-Natal (at home or clinic) 72, Stillbirth investigations 6,
Puerperal Pyrexia 28, Discharging Eyes 24, Prematurity 4,
Supervision of Disinfection 44.

Owing to shortage of staff many visits were paid for arrangements of relief duties. Other visits were made in connection with interviews regarding duty, equipment, uniform, sickness, etc.

In addition visits were paid to Training Midwives (5), and Pupil Midwives (2), taking their Part 2 Midwifery Training.

235 notifications of various kinds were received from midwives of which 1 was in respect of calling in medical aid.

As a consequence of having been in contact with infection, it was found necessary to suspend 4 midwives from practice in four cases.

During the year 11 relief Nurse/Midwives were employed for emergency duty including sickness, holidays, etc. Such Midwives were employed for 84 weeks on midwifery and general nursing duties.

During the year the County Nursing Officer had great difficulty in providing a full midwifery service throughout the County owing to shortage of staff. This matter is closely linked with the Home Nursing Service as the majority of nurses undertake midwifery and home nursing duties and is dealt with in this Report under the section Home Nursing.

St. Asaph Hospital—Part 2 Midwifery Training School commenced September, 1957. 5 Domiciliary Midwives were appointed as District Training Midwives and 2 pupils took their Domiciliary Training from September-December, 1957.

We are indebted to the Medical and Nursing Staff of the St. Asaph Maternity Department for their excellent co-operation in this work, also for the arrangement of a Study Day for Midwives in November, 1957.

It is gratifying to know that both Midwifery Pupils were subsequently successful in gaining their Midwifery Certificates.

NOTIFICATION OF BIRTHS.

The actual number of births notified in the County during the year under Section 203 of the Public Health Act, 1936, and the number as adjusted by transferred notifications, were as follows:—

Table 15.

	Live Births.		Stillbirths.		Totals.	
	Actual.	Adjusted.	Actual.	Adjusted.	Actual.	Adjusted.
Domiciliary	508	504	8	8	516	512
Institutional	1628	1735	30	36	1658	1771
Totals	2136	2239	38	44	2174	2283

It will be noted by reference to page 17 that the adjusted figures show that this is 55 live births and 2 stillbirths less than the totals of live and stillbirths received in the returns from the Registrar-General.

NURSING HOMES.

All Nursing Homes in the County have to be registered by the Council. This entails inspection and a detailed report before registration is granted. Once registered all Nursing Homes (which term includes Maternity Homes) are inspected several times annually by the County Nursing Superintendent and, when necessary, by one of the Medical Staff of the Department.

The purpose of registration and inspection is to ensure that the public who enter Nursing Homes for treatment are assured of reasonable standards of comfort and care. The standard of the Nursing Homes in the County is high, and recommendations made during inspections have been implemented at all the Homes.

The position concerning Nursing Homes in the County is given below :—
**Return of work done by the Authority under Registration of Nursing
Homes (Sections 187 to 194 of the Public Health Act, 1936).**

	Number of Homes.	Number of beds provided for :			Totals.
		Maternity.	Others.		
Homes first registered					
during year	1	—	10	...	10
Homes whose registrations					
were withdrawn during					
the year	—	—	—	...	—
Homes on the register at					
end of year	6	—	51	...	51

HEALTH VISITING.

At the end of the year eighteen Health Visitors were employed on combined Health Visiting and School Nursing duties. Two Tuberculosis Visitors are also employed, and two clinic nurses who are fully mobile, and one Health Visitor on sessional duties. The Superintendent Health Visitor is also Domestic Help Organiser, and much of the routine visiting in connection with the Domestic Help service is done by Health Visitors under the general supervision of the superintendent.

As the social services provided by the Local Health Authority develop, so does the work of the Health Visitor increase. All are aware of the great expansion in social services since 1948 and much of the work is done by the County Health Department and the Health Visitor is the "General Purpose" Social Worker of the Department.

Prior to 1948 Health Visitors were mainly concerned with the health of mothers and children under five years of age, and school children. When the National Health Service Act came into operation the Health Visitor's duties were extended to cover health matters affecting all members of the family. This extension of duties has added new interest to her work, but it must be remembered that the volume of work has also increased.

Duties as School Nurses bring Health Visitors into contact with pupils of all ages, and with the School Staff, it is pleasing to record that the Health Visitor is welcomed at all schools and plays an important part in the improvement noted in the health of school children in the County.

During the year the following Health Visitors attended refresher courses :

Miss O. M. Pierce.
Mrs. M. E. Pearse.
Mrs. D. Thompson.
Miss M. Hughes.
Miss L. Oliver.

Course on Mental Health :

Miss G. Jones.
Miss P. M. Matthews.

Course on Tuberculosis :

Miss D. V. Gray.
Miss M. E. Owen.
Miss M. M. Evans.

Course on Health Education :

Miss D. V. Gray.
Miss J. S. Rogers.

As will be noted one additional Health Visitor was appointed during the year and commenced work on Deeside where the case load of existing Health Visitors has been very heavy. The Council has approved an establishment of twenty Health Visitors.

It has been agreed that the vacancies will be filled gradually at the rate of one new Health Visitor each year up to the total of twenty.

Details relating to Staff changes are given in the report of the Superintendent Health Visitor which appears below.

The total number of visits paid in 1957 by Health Visitors to expectant mothers was 1,006, to children under one year of age 16,298, to children aged one and under two years 10,218, to children aged 2 and under 5 years 13,606. Other visits 7,984. To these figures has to be added 58,380 children seen at school and 2,188 home visits in connection with the school health service.

SUPERINTENDENT HEALTH VISITOR'S REPORT FOR 1957.

Number of visits to Infant Welfare Centres	...	...	...	72
Number of visits to School Clinics	...	...	...	9
Number of visits to Health Visitors to see their records				
	and discuss work generally	...		69
Number of Film Talks to groups of mothers at Centres	...			8

Mrs. Ailsa Doreen Thomas was appointed as a temporary part-time Health Visitor on a sessional basis for Connah's Quay area. The reason for this arrangement was due to the prolonged absence, through sickness, of Miss G. Jenkins. Mrs. Thomas commenced duties on 25th March, 1957, and resigned on 28th June.

Miss Joan Stone Rogers, formerly employed as a Health Visitor under the Surrey County Council, was appointed Health Visitor and part-time Health Education Officer for the Buckley area and commenced duties on 13th June. This vacancy arose as a result of Miss P. M. Matthews winning a Red Cross Scholarship which entitled her to take one year's administrative Course in Public Health at the Royal College of Nursing in London.

Miss M. Lees, a former District Nurse in the Rhyl area, was successful in obtaining the Health Visitors Certificate under the Queen's Training Centre at Bolton. She is the first District Nurse to qualify as a Health Visitor under the County Scheme. Miss Lees commenced temporary duties in the Connah's Quay area on 24th June.

Miss A. Capper resigned from the Flint area in August and was succeeded by Miss M. Lees, who covers the whole of the Flint Borough with the exception of Bagillt.

Mrs. M. C. Townley was appointed to the newly former Queensferry and Garden City area and commenced duties on 18th November. This has relieved the heavy case load of the Hawarden Health Visitor.

Miss M. E. Owen resigned from the post of Tuberculosis Health Visitor in the Eastern part of the County in October.

Mrs. I. M. Beedles was appointed to succeed Miss M. E. Owen and commenced duties on the 30th September.

Mrs. M. D. Lewis continues as a part-time Clinic Nurse and Health Visitor in the Western area.

Miss Doreen Owen continues to act as a clinic nurse in the County.

Mrs. Irene Cull started as a Clinic Nurse in the County on a sessional basis on 2nd December.

Number of full-time Health Visitors/School Nurses—	
31st December, 1957 ...	17
Number of Senior full-time Health Visitor/School Nurse—	
31st December, 1957 ...	1
Number of part-time Health Visitor/School Nurses—	
31st December, 1957 ...	1
Number of Clinic Nurses—31st December, 1957 ...	2

The Tuberculosis Visitors employed by the Authority attend the Chest Clinics, visit all cases of tuberculosis as soon as notified, and report on home conditions. The Chest Physicians and their Assistants have greatly appreciated the assistance and the valuable information given to them by these Tuberculosis Visitors, and their reports to the Health Department on housing conditions have been transmitted to the County District Councils. It is a great pleasure to report that as a result many tuberculous families have been re-housed and overcrowding, insanitary conditions, etc., have been ameliorated. What is of even greater importance is that their visits are fully appreciated by the patients themselves, as it is to these Tuberculosis Visitors that they turn for advice upon their many problems. During the year, in addition to attendance at the Chest Clinics, they paid 2,863 visits to patients in their homes, and of these 143 were first visits to newly notified cases.

Table 16.

HEALTH VISITING AND TUBERCULOSIS VISITING.

A. Visiting :

55

HEALTH VISITORS												TUBER- CULOSIS VISITORS	
	Number of Children under 5 years of age visited dur- ing year	Expectant Mothers		Children under 1 year of age		Children age 1 and under 2 years		Children age 2 but under 5 years		Tuber- culous house- holds	Other cases	Total No. of families or households visited by Health Visitors	Total visits paid to tuberculous households
		First visits	Total visits	First visits	Total visits	Total visits	Total visits	Total visits	Total visits	Total visits	Total visits		
												(3)	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)		
(a) L. H. A.	4609	423	1006	2391	16298	10218	13606	143	7984	7473	2996		
(b) Vol. Org.	..	..	..	..	..	..	..	..	..	..	..	..	

B. Clinics :

- (a) Total number of attendances made by health visitors at local health authority clinic sessions during the year ... 1410
- (b) Total number of attendances by whole-time tuberculosis visitors at chest clinic sessions during the year ... 280

(N.B.—In addition, the Health Visitors paid 2,366 "No access" visits).

HOME NURSING.

The Authority employs eight whole-time District Nurses and thirty-three District Nurse/Midwives who are under the supervision of the County Nursing Officer.

During the year eleven relief Nurses were employed, three of these were Nurse/Midwives who devoted 22 weeks to Nursing and Midwifery and the remaining eight Nurses devoted 62 weeks to general nursing only.

The agreed policy of the Authority is to employ Nursing Staff who are qualified to undertake Home Nursing and Midwifery duties. This is more economical of Nursing Staff and provides a better service to the public. Full-time Midwives will have to be employed in a few urban areas when the number of home confinements is high.

The number of cases attended to by Home Nurses, and their visits, have increased annually since 1948 and approximately 39.3 % of their visits are to patients over 65 years of age.

The development of the hospital service in recent years has increased the demand for home nursing as both services are complementary. In many instances the home nurse attends patients awaiting a hospital bed and also completes the nursing care of patients discharged from hospitals. Her greatest service is to the General Practitioner when treating his patients at home.

Miss D. Willatt, of Queensferry District, was released from her district work to undergo district training at Liverpool Queen Victoria District Nursing Association during the year.

Miss D. G. Asquith, Senior Nurse/Midwife for Rhyl District, attended the Conference of the Royal College of Nursing at Ripon from 11th to 13th October, 1957.

Miss A. M. Stewart, formerly District Nurse/Midwife for Broughton District, commenced the Health Visitor's Training Course at the University of Leeds on 1st October, 1957.

REPORT ON WORK OF COUNTY NURSING OFFICER.

Visits paid to Home Nurses.

	Permanent Staff.		Relief Staff.		Total.
Routine Visits	...	198	...	29	227
Other Visits	...	481	...	148	629
		—		—	—
		679		177	856
		—		—	—

Routine Visits (inspection of records and equipment) during which the number of patients visited with nurses were—568 Medical, 292 Surgical, 860 Total.

Other Visits were paid for relief arrangements, equipment maintenance, sickness, etc. Also 21 visits for medical loans, 8 visits to aged folk's homes, 71 interviews with staff, applicants and special patients.

Nursing Homes—Number in County 6, Number of visits paid to homes for inspection 19, Other reasons 5, Total 24.

I am very pleased to state that Nurses have given every co-operation on their districts and are always willing to help in all emergencies. Most of our Nurses have given long years of service and are most dependable in their care for patients and the management of difficult occasions.

I am very grateful to the Nurses who have very willingly carried out relief duties, often at very short notice. They have given very good service.

NURSING STAFF EMPLOYED AT THE END OF THE YEAR BY THE
AUTHORITY AND BY VOLUNTARY ORGANISATIONS AND
HOSPITALS UNDER ARRANGEMENTS WITH THE AUTHORITY
FOR SERVICES UNDER PART III OF THE N.H.S. ACT.

NOTES—Where a nurse is engaged in more than one service (e.g., a superintendent nursing officer or a home nurse/midwife) she is shown in the following tables as part-time in **each** of the services in which she is engaged, and is given the whole-time equipment of her work in **each** of these services in the columns provided.

A health visitor (or home nurse or midwife) who also does school nursing duties is shown in the following tables as part-time, together with the whole-time equivalent of her work after deduction of time spent in school nursing duties. Nurses employed solely as whole-time school nurses, whether or not holding the health visitor's certificate, are not included in these tables.

TABLE 18.

1. HEALTH VISITING, TUBERCULOSIS VISITING, CLINIC DUTIES, CARE AND AFTER-CARE.

	Administrative and Supervisory Nursing Staff (excluding Health Visitor Tutors)			Health Visitors except those in Cols. (8)-(10)			Tuberculosis Visitors†			Other Nurses		
	Whole-time (2)	Part-time (3)	Equiv. Whole-time of (3) (4)	Whole-time* (5)	Part-time* (6)	Equiv. Whole-time of (6) (7)	Whole-time* (8)	Part-time* (9)	Equiv. Whole-time of (9) (10)	Whole-time (11)	Part-time (12)	Equiv. Whole-time of (12) (13)
(1)												
(a) Local Health Authority ...	—	‡1	.33	—	18 (1)	9	2 (—)	— (—)	—	—	3	1.5
(b) Voluntary Organisation ...	—	—	—	—	—	—	—	—	—	—	—	—

* Health Visitors and Tuberculosis Visitors acting as such by virtue of a dispensation given under Regulation 5 of the National Health Service (Qualification of Health Visitors and Tuberculosis Visitors) Regulations, 1948, are included and also shown separately in the brackets.

† This relates to health visitors and tuberculosis visitors employed solely on tuberculosis work.

‡ Superintendent Health Visitor is also Superintendent School Nurse and Domestic Help Organiser.

Table 18—continued.

2. DOMICILIARY MIDWIFERY.

(1)	Administrative and Supervisory Nursing Staff			Domiciliary Midwives		
	Whole-time*	Part-time*	Equiv. Whole-time of (3)	Whole-time†	Part-time†	Equiv. Whole-time of (6)
(2)	(3)	(4)	(5)	(6)	(7)	
(a) Local Health Authority ...	— (—)	1 (1)	.5	6 (5)	33 (—)	16
(b) Voluntary Organisations ..	—	—	—	—	—	—
(c) H.M.C. or B.G. ...	*—	—	—	—	—	—

* Non-Medical Supervisors of Midwives are included and also shown separately in the brackets.

† Midwives approved as teachers are included and also shown separately in the brackets.

PUPIL MIDWIVES.

Number of pupils who have completed their district training in the area during the year as part of a Part II Midwifery Course taken :—

(i) Wholly on the district	...	...	...	NIL
(ii) Partly on the district	...	...	...	NIL

Table 18—continued.

3. HOME NURSING.

(1)	Administrative and Supervisory Nursing Staff			State Registered Nurses (S.R.N., R.S.C.N., and R.F.N.)			Enrolled Assistant Nurses			Student Home Nurses		
	Whole-time (2)	Part-time (3)	Equiv. Whole-time of (3) (4)	Whole-time (5)	Part-time (6)	Equiv. Whole-time of (6) (7)	Whole-time (8)	Part-time (9)	Equiv. Whole-time of (9) (10)	Whole-time (11)	Part-time (12)	Equiv. Whole-time of (12) (13)
(a) L.H.A. ...	—	1	.5	8	16	8	—	17	8.5	—	—	—
(b) Voluntary Organisations ...	—	—	—	—	—	—	—	—	—	—	—	—

There are no Male Nurses.

Table 18—continued.

4. NURSES ENGAGED ON COMBINED DUTIES.

- (a) Number of nurses engaged in health visiting and school nursing—18 (excluding Superintendent Health Visitor/School Nurse, who is also Domestic Help Organiser).
- (b) Number of nurses engaged in home nursing and midwifery—33 (excluding Superintendent Nursing Officer/Supervisor of Midwives).
- (c) Number of nurses engaged in health visiting, home nursing and midwifery—NIL.
- (d) Others—1 part-time M. & C.W., 2 Clinic Nurses on Polio. vaccination, M. & C.W. and School Nursing.

5. ADMINISTRATIVE NURSING STAFF (EXCLUDING HEALTH VISITOR TUTORS).

Actual number of nurses who are occupied in administrative or supervisory duties in the services in 1, 2 and 3 :—

(a) Whole-time	...	...	...	1
(b) Part-time	...	...	...	1

6. TOTAL STAFF.

Actual number of nursing staff represented in the tables under 1, 2 and 3 above, including administrative nursing staff but excluding students and pupils, who are employed :—

(a) Whole-time	...	...	...	50
(b) Part-time	...	...	...	22

7. NURSERY STAFF: DAY NURSERIES.

There are no day nurseries in the County.

8. VACANCIES.

Number of vacancies for nursing staff at the end of the year (i.e., additional staff which the Authority would employ immediately if available) expressed in terms of the equivalent of whole-time staff under each heading :—

(a) Health Visitors	...	...	...	1 (full-time)
(b) Tuberculosis Visitors	...	...	...	—
(c) Domiciliary Midwives	...	...	...	.5
(d) Home Nurses	...	...	...	.5
(e) Day Nursery Staff (specify grades)	...	...	...	—

VACCINATION AND IMMUNISATION.

Vaccination—During recent years every opportunity has been taken to stress on mothers the importance of vaccination against smallpox, and

particularly the advantages of doing this during infancy, preferably before the first birthday.

When vaccination ceased to be compulsory in 1948 the number of children under one year receiving primary vaccinations fell and in 1952 this number had dropped to 350. (In 1947 the number was 841). Partly due to increased propaganda on the importance of primary vaccination and partly due to the provision of extra facilities for vaccination, the number has now increased and in 1957 824 infants were vaccinated.

The following table shows the number of vaccinations and re-vaccinations carried out during the year 1957 :—

Table 19 (a).

VACCINATION.

NUMBER OF PERSONS VACCINATED (OR RE-VACCINATED)
DURING THE YEAR 1957.

		Age at date of Vaccination.											
		Under 1.		1.	2 to 4.		5 to 14.		15 or over.	Total.			
Number	Vaccinated	...	824	...	97	...	58	...	71	...	120	...	1170
Number	Re-vaccinated	...	—	...	—	...	14	...	39	...	318	...	371

More use has been made of the facilities available for vaccination at County clinics, and in 1957 352 children were vaccinated in our own clinics which is nearly twice the number for 1956 (199).

These figures are shown in the following table.

Table 19 (b).

NUMBER OF CHILDREN VACCINATED BY HEALTH DEPARTMENT
STAFF DURING THE YEAR 1957.

Age at date of Vaccination.										
Under 1.	1.	2 to 4.	5 to 14.	15 or over.	Total.					
272	...	5	...	9	...	3	...	63	...	352

(Above figures are included in Table 19 (a)).

Immunisation against Diphtheria—Monthly immunisation sessions are held at all the Authority's Clinics and Centres, and immunisation is also performed by general practitioners in their own surgeries.

Of the value of immunisation against diphtheria there can be not the slightest doubt. In the first ten years of this century, the number of cases notified and the death rate were high. In 1911, there were 282 cases with 17 deaths. During the first World War the number of cases and deaths rose alarmingly, but later declined, and in the interval between the first and second World Wars the number of cases fluctuated between approximately 200 to 250. In 1941, however, there was a further sharp rise in the number of cases, and it was about this time that the campaign for immunisation gained impetus. A glance at table 21 indicates the success of that campaign, and the extent to which children have been protected against this dread disease :—

Table 20.

DIPHTHERIA IMMUNISATION, 1957.

	AGE			
	at date of final injection (as regards A), or of reinforcing injection (as regards B).			
	Under 1.	1 to 4.	5 to 14.	Total.
A. Number of children who completed a full course of Primary Immunisation in the Authority's Area (including temporary residents) during 1957	... 903	... 468	... 131	... 1502
B. Number of children who received a Secondary (Reinforcing) Injection (i.e., subsequently to primary immunisation at an earlier age) during 1957	... —	... 121	... 1046	... 1167

"Boosting" injections are given in Clinics and also in schools.

Table 21.

DIPHTHERIA IMMUNISATION IN RELATION TO CHILD POPULATION.

Number of children at 31st December, 1957, who had completed a course of Immunisation at any time before that date (i.e., at any time since 1st January, 1943).

Age at 31/12/57 i.e., Born in Year	Under 1 1957	1-4 1953-1956	5-9 1948-1952	10-14 1943-1947	Under 15 Total
Last complete course of injections (whether primary or booster) :					
A. 1953-1957	... 242	... 4816	... 5342	... 2003	... 1240
B. 1952 or earlier	... —	... —	... 4771	... 11345	... 1611
C. Estimated mid-year child population	... 2250	... 8650	...	23300	... 3420
Immunity Index 100A/C	... 10.75 %	... 55.67 %	...	31.52 %	... 36.26

Year.	Diphtheria Notification.		Deaths.
1936	...	208	11
1937	...	221	13
1938	...	268	16
1939	...	200	12
1940	...	202	6
1941	...	342	15
1942	...	255	5
1943	...	208	8
1944	...	316	10
1945	...	108	5
1946	...	33	1
1947	...	15	1
1948	...	5	—
1949	...	8	1
1950	...	3	—
1951	...	1	—
1952	...	2	—
1953	...	3	—
1954	...	3	—
1955	...	—	—
1956	...	—	—
1957	...	—	—

Immunisation against Whooping Cough—Combined Diphtheria/Whooping Cough Immunisation has been introduced into all the Council Clinics.

The response of parents has been very satisfactory and it is hoped in this way to improve the Immunity Index against Diphtheria and at the same time offer protection against Whooping Cough which is a distressing and at times fatal condition of young children. The combined Diphtheria/Whooping Cough vaccine is given as a course of three injections at monthly intervals commencing preferably at the age of five months.

Table 22.

CHILDREN WHO RECEIVED COMBINED DIPHThERIA/WHOOPING COUGH IMMUNISATION, 1957.

DISTRICT.	PRIMARY IMMUNISATIONS.				RE-INFORCING INJECTIONS.			
	Under 1.	1-4.	5-14.	Total.	Under 1.	1-4.	5-14.	Total.
Urban :								
Buckley	32	19	2	53	—	—	—	—
Connah's Quay	55	9	—	64	—	—	—	—
Flint (Mun. Boro)	75	42	3	120	—	—	1	1
Holywell	71	16	3	90	—	1	3	4
Mold	36	19	—	55	—	—	—	—
Prestatyn	56	27	4	87	—	3	25	28
Rhyl	81	52	5	138	—	2	27	29
Rural :								
Hawarden	182	103	12	297	—	3	16	19
Holywell	128	47	7	182	—	1	21	22
Maelor	31	16	2	49	—	1	4	5
St. Asaph	36	17	—	53	—	3	10	13
Total Urban	406	184	17	607	—	6	56	62
Total Rural	377	183	21	581	—	8	51	59
Whole County	783	367	38	1188	—	14	107	121

B.C.G. Vaccination against Tuberculosis—During the year the arrangements for giving B.C.G. Vaccination to “contacts” of known cases of tuberculosis and other selected groups such as students, nurses in Sanatoria, etc., continued. New-born babies of tuberculous parents are also vaccinated with B.C.G. if the parents consent and the babies are segregated for six weeks after vaccination at the nursery of St. Asaph Maternity Hospital. This work is carried out by the Chest Physicians who obtain the help of the Tuberculosis Visitors in arranging the attendance and follow-up of contacts.

During 1957 the B.C.G. vaccination of Secondary School children in the County between 13 and 14 years of age continued. For the first time it was possible to offer B.C.G. vaccine to all children in the age group found suitable to receive the vaccine. This administration of the B.C.G. vaccination scheme was very ably handled by Dr. E. Pearse, the Senior Medical Officer.

During 1957, 1,311 school children between 13-14 years of age were skin tested at schools, and of these 907 had “negative” findings indicating that they were suitable for B.C.G. vaccination. Of these 907, 871 were vaccinated. Only children whose parents consent to vaccination are tested and given B.C.G.

Table 23.

B.C.G. VACCINATION AGAINST TUBERCULOSIS DURING 1957.

Number of persons vaccinated through the Authority's approved arrangements under Section 28 of the National Health Service Act.

A. Contact Scheme.

(Circular 72/49 (Wales)).

(i) Number skin tested	...	...	...	577
(ii) Number found negative	...	...	...	202
(iii) Number vaccinated	...	...	...	217

B. School Children Scheme.

(Circular 22/53 (Wales)).

1.

(i) Number skin tested	...	...	...	1311
(ii) Number found negative	...	...	...	907
(iii) Number vaccinated	...	...	...	871

2. If re-exams. are made at end of year :—

(i) Number skin tested	...	...	...	—
(ii) Number found negative	...	...	...	—
(iii) Number re-vaccinated	...	...	...	—

Poliomyelitis Vaccination—The Ministry of Health announced in 1956 that an effective vaccine against Poliomyelitis was being produced in this country. This vaccine was in short supply and only a small number of

Flintshire children were vaccinated against Poliomyelitis in 1956. (Total 306 children vaccinated against Poliomyelitis). Many parents registered their children for vaccination and at the end of 1956, 3,128 consent forms for Poliomyelitis vaccine were held by the Health Department.

The Ministry of Health stated that increased supplies of Poliomyelitis vaccine would be available in 1957 again for children born between 1947 and 1954. It was also stated that parents could have the choice of having the vaccine given by their own General Practitioner or at a County Clinic. General Practitioners were kept fully informed of the arrangements, but the majority of Practitioners did not elect to give the vaccine to their own patients due to the special conditions associated with the storage and handling of the vaccine. Poliomyelitis vaccine has to be kept in a refrigerator right up to the time it is used and once a vial containing vaccine is opened it has to be used in a matter of hours.

Parents were also kept fully informed of all the arrangements for registration and vaccination by notices in all the newspapers circulating in the County.

The first batch of Poliomyelitis vaccine in 1957 was received on 15th March and the first Poliomyelitis vaccination clinic was held on 2nd April. Supplies of vaccine were received right up to the end of the year and vaccination continued through the summer months right up to December. The amount of vaccine received during the year was not sufficient to vaccinate the children on the waiting list and at the end of 1957, 3,767 children (two injections) had been vaccinated out of a total of 7,675 registered for vaccination. (Full details relating to children vaccinated and those on the waiting list are shown in the table on page 71).

In November, 1957, Circular 16/57 (Wales) was issued by the Welsh Board of Health stating that in future, Poliomyelitis vaccine was to be offered to children over six months and up to fifteen years of age. Also to expectant mothers, ambulance staff and their families, General Practitioners and their families and certain hospital staff and their families.

AMBULANCE SERVICE.

The ambulances carried 3,937 more patients in 1957 than in 1956; 10,356 more than in 1955; and 27,783 more than in 1954.

The hired Sitting Case Cars carried only 4,544 patients in 1957, compared with 4,708 in 1956, 14,507 in 1955, and 36,801 in 1954.

Analysis—Analysis of cases conveyed by ambulances, sitting case cars, and patients who travelled by rail for the year under review, with comparative figures for the year 1956 :—

	1957	1956
Road accidents	351	259
Miscellaneous accidents	150	275
Maternity cases	728	769
Emergency cases	2485	2024
Infectious cases	198	114
General removal and clinic cases ...	35977	32675
Patients by rail	19	29
Total ...	39908	36145

An average of more than ten emergency calls are dealt with daily. Most of these cases are at the peak periods when the demand for the conveyance of general removals and clinic cases is heavy. Careful mobilising is necessary at the Control to provide sufficient cover to meet these demands with the least possible delay.

Ambulances—The average number of patients carried by each of the twelve ambulances in the service during the year was 2,947. The average miles per patient for the twelve ambulances is 10.4, compared with 11.3 in 1956 and 15.02 in 1954. The average number of patients per journey in 1957 is 4.01. In 1956 it was 3.4, and in 1954 1.3.

It is interesting to note that the number of patients now conveyed by our ambulances is nearly five times the number carried in 1954, i.e., before the new service came into operation.

The annual average mileage per vehicle 1954-1957, based on vehicles in service at the end of each year, in relation to the total mileage for the year is shown below :—

1954	...	14,304
1955	...	24,159
1956	...	29,335
1957	...	30,629

Hired Sitting Case Cars—The figures reveal that the cost, and use, of hired sitting case cars has been reduced every year since the new service started in April, 1955. The cost has been reduced from £18,410/10/0 in 1954 to £1,691/13/7 in 1957, a reduction of £16,718/16/5. This has been achieved by careful mobilising at our Central Control.

Although the use of hired cars has been reduced I am glad to report that we are getting very good service from the cars which are still being used.

The following figures relate to calls dealt with by the Fire Service Control, Rhyl:

January	...	...	...	160
February	...	...	...	159
March	...	...	...	167
April	...	...	...	224
May	...	...	...	184
June	...	...	...	296
July	...	...	...	245
August	...	...	...	291
September	...	...	...	202
October	...	...	...	197
November	...	...	...	187
December	...	...	...	240

Analysis of all calls during 1957.

County Ambulance Control, Holywell	...	...	37,356
Fire Service Headquarters, Rhyl	...	...	2,552

On the 4th October, 1957, the following new conditions were offered to fifty-six car proprietors in the County:

1. Sitting Case Car proprietors will not accept calls for sitting case cars from any source other than the County Ambulance Control. If any request is made to the driver, the person making the request should be referred to the Control Centre (Holywell 3373). This instruction applies in case of removals and clinic cases and must not be construed to prevent the driver using his own initiative in the event of an accident or a very urgent removal, where use of the standard procedure would entail a delay in attendance to a case. If such a case arises, it is important that the Ambulance Control be informed as soon as possible, either from the hospital the patient is taken to or from the driver's address immediately he returns. Unless this is carried out the County Council will not hold themselves responsible for payment for any work that is not authorised by the Control.
2. Payment will only be made in respect of vehicles which have been approved by the County Council.

3. The driver of the car shall exercise all necessary care when conveying patients. Drivers are also expected to assist patients to and from the cars. The cars provided shall at all times be maintained in a comfortable and safe condition, with suitable rugs or blankets for the use of patients.

Out of fifty-six proprietors on our list, fifty-four accepted the new conditions. The number of cars now registered in the service is eighty-four.

Other Authorities—Flintshire in the past years has been depending on neighbouring authorities to cover parts of the County for accidents and emergency calls. Since the new service came into operation in 1955 we have been able to reduce this expenditure every year, as shown in the tables following this report.

This has been done by providing cover from our own service, and by arranging with Liverpool that all Flintshire patients discharged from Liverpool Hospitals are conveyed home by our own ambulances.

The Maelor area, formerly covered by arrangement with Denbighshire and Shropshire Authorities is now provided for by our own ambulance stationed at Bangor-on-Dee. Mutual agreement between us and the two authorities mentioned still stands in order that when our ambulance is not available they will provide an ambulance to cover any emergency.

The Marford area of Flintshire is covered for all emergency purposes by the Denbighshire Ambulance Service.

Table 25 shows the work undertaken on behalf of the Authority by neighbouring Authorities.

Co-ordination of Transport to Liverpool—Considerable progress has been made in the last twelve months in the co-ordination of transport between North Wales and Liverpool.

The Medical Officer of Health for Liverpool has been very helpful regarding the return of patients from Liverpool hospitals to the North Wales Counties.

The North Wales Authorities have met on a number of occasions to discuss the matter of the conveyance of patients to and from Liverpool hospitals.

It has now been agreed that all discharged from Liverpool hospitals are passed from the Liverpool Ambulance Control to the authority for the area to which the patient is returning, to give the responsible authority the opportunity of collecting the patients themselves.

As the figures show, Flintshire has saved over £200 on this system in the last twelve months.

In this connection, I report that Flintshire Ambulance Service conveyed 1,644 patients to Liverpool and 1,669 patients from Liverpool during the year.

The total of £421/9/5 has been saved during the year by the above-mentioned system. Negotiations with the Medical Officer of Health, Chester City, whereby Chester City Ambulance Service covers Saltney area for all ambulance calls has been successful. It has been agreed now that the Chester Ambulance Control will pass over calls other than those of extreme emergency to our Control at Holywell; by this system we should be able to reduce the amount paid yearly to Chester City for this cover in the Saltney area.

Radio Telephone—On the 1st April, 1957, the year covered by this report, twelve of the ambulances in the service and the Ambulance Officer's car, were equipped with radio, with the Base Control at the Ambulance Control Centre, Holywell. The scheme operating in the County is a Double Frequency Scheme with the main station at the Catch, Halkyn, the main control at the Constabulary Headquarters, Mold, and a sub-control operated at the County Fire Service Headquarters, Rhyl, and the County Ambulance Control, Holywell. There is a Fixed Station at each Police and Fire Divisional Headquarters, and at the Police Section Station, Overton.

Each vehicle equipped with radio is known as a "Mobile Station." The mobile stations, the Fire Service Sub-Control and the Ambulance Control, Holywell, are equipped with receiving and transmitting apparatus, but the fixed stations have receiving apparatus only.

Since the installation of radio, the efficiency of the service has improved. The large number of road accidents and other emergency calls were dealt with without delay, and such prompt and speedy service could not have been provided without the use of radio.

It will be noted from the figures given that the number of patients carried by our twelve ambulances during 1957 was increased by 3,937. This is equivalent to the work of two ambulances. The use of radio has made it possible. We also show a reduction in mileage per patient.

New Ambulance—In July, 1957, the Authority purchased a Morris L.D.I. Diesel Engine, fitted with a Lomas Ambulance body and built to our own specification to carry ten sitting cases or two stretcher cases. The stretcher fittings on this vehicle were designed to take any type of stretcher, should the vehicle ever be used for a major accident.

This is the second Diesel Ambulance purchased by the County Council, the first was purchased in June, 1956, and has completed, to date, sixty thousand miles, at an average of twenty-nine miles per gallon. The second ambulance is also showing economical fuel consumption. This type of Diesel vehicle is proving both efficient and economical. They are com-

fortable to ride in and no smell enters the interior of the ambulance. I strongly recommend the County Council to purchase Diesel type vehicles when replacing the old ambulances.

Maintenance—The following five light ambulances, purchased in 1955 (LDM 718, LDM 719, LDM 720, LDM 721, and LDM 662) were fitted with reconditioned engines during the year after completing over seventy thousand miles on the original engines. The maintenance of all our vehicles is carried out by private garages and with a few exceptions this has worked very satisfactorily, although I would suggest that by having a small repair depot in the ambulance service the maintenance could be carried out under better supervision, and vehicles would receive a more thorough service.

Fifty-two new tyres were purchased during the year at the cost of £551/17/3. The County Council receive 7½ discount on all tyres.

16,667 gallons of petrol were consumed, this was mostly purchased from the County Surveyor's Department, Mold, the County Fire Brigade Headquarters, Rhyl, Holywell Urban District Council, Flint Borough Council and Private Garages, through the Agency System. The total cost of petrol was £3,699/12/9.

1,602 gallons of Derv was purchased direct to our own storage tank at Holywell at the cost of £345/16/2. Direct purchase effects a saving of 3½d. per gallon.

Accommodation—No new ambulance stations were built during the year.

The garaging of ambulances at Holywell is very unsatisfactory. Both ambulances are garaged in very unsuitable premises, with no facilities for washing or heating. I would again suggest that the County Council should give serious consideration to having an Ambulance Station built at Holywell.

The Ambulance Control—Work was carried out to provide an extra room and conveniences at the Ambulance Control at Holywell. This room is used as a mess-room for the Control and Operational Staff.

Accidents to Ambulances—During the year 1957, five claims were made in respect of repairs to ambulances as a result of accidents, none of which was serious.

Royal Society for the Prevention of Accidents—Twelve of the whole-time drivers were entered in this competition and eleven qualified for awards. A certificate of exemption was presented to Driver A. L. Cope who did not qualify due to sickness.

First Aid Certificates—Fourteen of the operational staff were successful in passing the St. John and British Red Cross examinations in first aid to the injured during the year.

Efficiency Competition—On 18th August, 1957, a competition was held at the Old Fire Station, Water Street, Rhyl, on the efficiency of the ambulance teams (Drivers and Attendants). This competition covers the widest aspects of ambulance work.

Four teams from the County Ambulance Service entered for the competition—two teams from Rhyl, one team from Holywell and one team from Mold.

The Mold team won the County Shield, which was presented to the County Ambulance Service by Messrs. Herbert Lomas Ltd., Ambulance Specialists, Handforth, Wilmslow, Cheshire.

The winning team qualified to compete in the Welsh Regional Competition at Shrewsbury on 1st September, 1957, where five teams took part, viz, Cardiff, Carmarthenshire, Caernarvonshire, Flintshire and Merionethshire. The successful team was Cardiff, who qualified to compete in the National Competition for the whole of England and Wales.

This competition will be held annually in the County and the winning team will enter for the Regional Competition. The tests are proving to be of great benefit in the training of Ambulance Personnel, under modern ambulance service conditions.

National Association of Ambulance Officers—The Ambulance Officer attended two Regional meetings at Shrewsbury for the Welsh Region, of which he was Chairman for 1957, and has again been elected Chairman for 1958. He also attended the Ninth Annual Conference in London on 26th-27th September, 1957. These Conferences are attended by Senior Officers from the Ministry of Health and the Welsh Board of Health.

Matters of great importance to the efficiency of the Ambulance Service were discussed. Records of the proceedings of the conference are sent to each Local Authority.

Establishment of the County Ambulance Service—The establishment of the Ambulance Service on 31st December, 1957, was as follows:—

Head of Service—County Medical Officer of Health.				
Ambulance Officer	...	...	...	1
Control Room Attendants	...	...	...	4
Senior Ambulance Drivers	...	...	...	2
Drivers	...	...	...	12
Ambulance Attendants	...	...	...	6
Part-time Driver (Maelor Area)	...	...	...	1

Resignations :

Control Room Attendants	...	...	...	2
(Mr. N. G. Garston and Mr. C. L. Jones).				

Enrolments :

Control Room Attendants	...	...	...	2
Relief Ambulance Drivers	...	...	...	2
Ambulance Attendant	...	...	...	1

Promotion—Ambulance Drivers T. E. Bellis, Mold, and C. Grace, Rhyl, were promoted to Senior Drivers.

Sickness—Ambulance Driver A. L. Cope, Rhyl, was unable to follow his employment as from 14th May owing to illness.

Progress of Service—Quite a lot has been achieved during the year in improving the Ambulance Service and in maintaining a high standard of efficiency and preparedness.

The Service has now implemented all the recommendations of the Ministry, including Radio Control.

Conclusion—My thanks are due to the Chairman and Members of the Ambulance Sub-Committee, the Chairman and Members of the Health Committee, Staff of the Health Department, the Chief Fire Officer for taking over the Control at nights and weekends, and, finally, to the Personnel of the Ambulance Service for their loyalty and devotion to duty during the year.

Table 25.

WORK UNDERTAKEN ON BEHALF OF THE AUTHORITY BY
NEIGHBOURING AUTHORITIES.

1957.

Authority.	Patients.		Journeys.		Mileage.		Costs.		
							£	s.	d.
Denbighshire	...	38	...	37	...	557	...	62	2 3
Shropshire	...	22	...	21	...	461	...	47	17 3
Liverpool	...	13	...	12	...	647	...	31	17 8
Chester City	...	180	...	186	...	1625	...	270	16 8
Smethwick	...	1	...	1	...	143	...	19	13 3
		—		—		—		—	—
Total	...	254		257		3433		£432	7 1
		—		—		—		—	—

THE FOLLOWING TABLE SHOWS HOW THE 39,908 PATIENTS WERE DEALT WITH BY THE SERVICE.

Table 27.
AMBULANCES.

Station	1957					1956					1954				
	Stretcher Cases	Sitting Cases	Journeys	Mileage		Stretcher Cases	Sitting Cases	Journeys	Mileage		Stretcher Cases	Sitting Cases	Journeys	Mileage	
Mold	1,319	6,785	2,147	85,497		1,333	6,395	2,279	87,461		1,767	1,362	1,955	44,627	
Queensferry	841	4,461	1,246	55,745		988	4,346	1,443	62,057						
Holywell	1,149	5,916	1,649	82,074		1,006	4,949	1,513	79,151		1,211	1,047	964	33,901	
Flint	644	3,271	750	36,706		587	2,423	826	35,064						
Rhyl	2,232	7,472	2,650	91,109		2,131	7,014	2,609	91,350		1,933	242	1,909	35,904	
Maclor	64	1191	367	16,415		12	224	99	3,942						
TOTAL	6,249	29,096	8,809	367,546		6,057	25,351	8,769	352,025		4,911	2,651	4,828	114,432	

HIRED SITTING CASE CARS.

Area	1957				1956				1954			
	Patients	Journeys	Mileage	Cost	Patients	Journeys	Mileage	Cost	Patients	Journeys	Mileage	Cost
Whole County	4,544	2,055	31,848½	£ s. d. 1,691 13 7	4,708	1,943	41,891	£ s. d. 1,901 19 5	36,801	14,238	343,300½	£ s. d. 18,410 10 0

Table 25—continued.

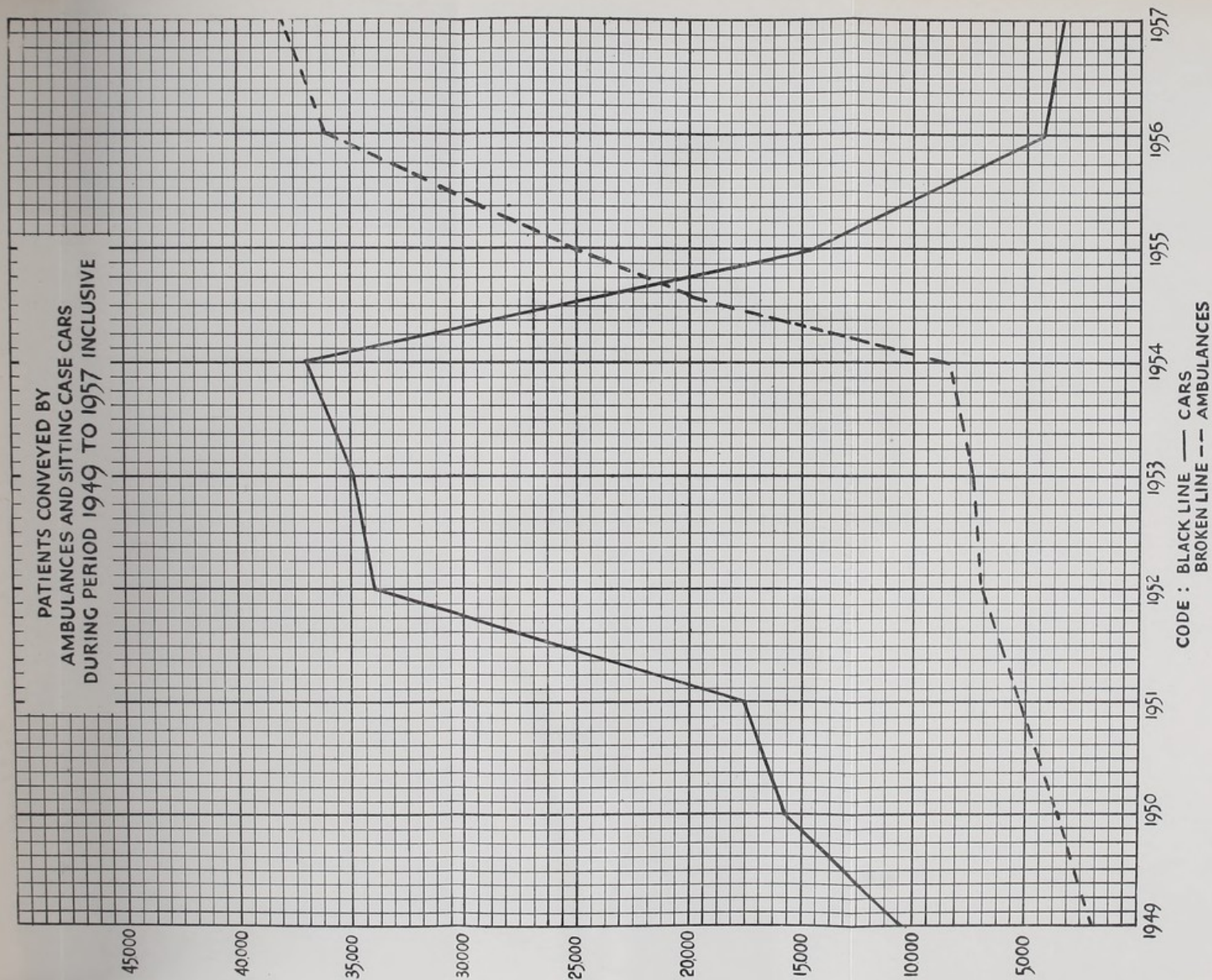
1956.

Authority.	Patients.		Journeys.		Milage.		Costs.	
Denbighshire	...	98	...	94	...	2142	...	£ 171 6 0
Shropshire	...	36	...	37	...	1156	...	£ 115 12 0
Liverpool	...	107	...	96	...	4849	...	£ 269 8 10
Chester City	...	201	...	201	...	1842	...	£ 297 9 8
Total	...	442	...	428	...	9989	...	£ 853 16 6

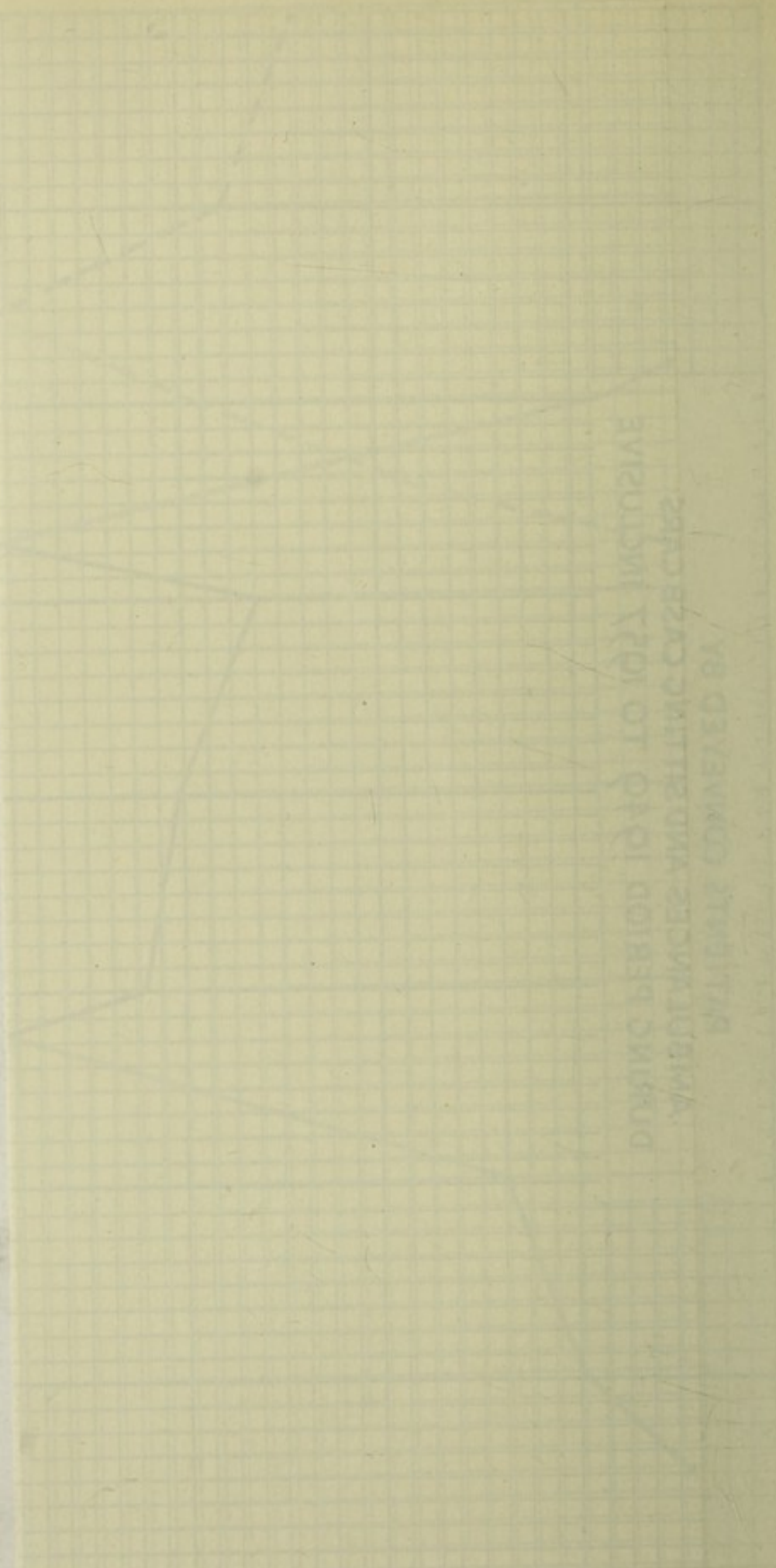
Table 26.

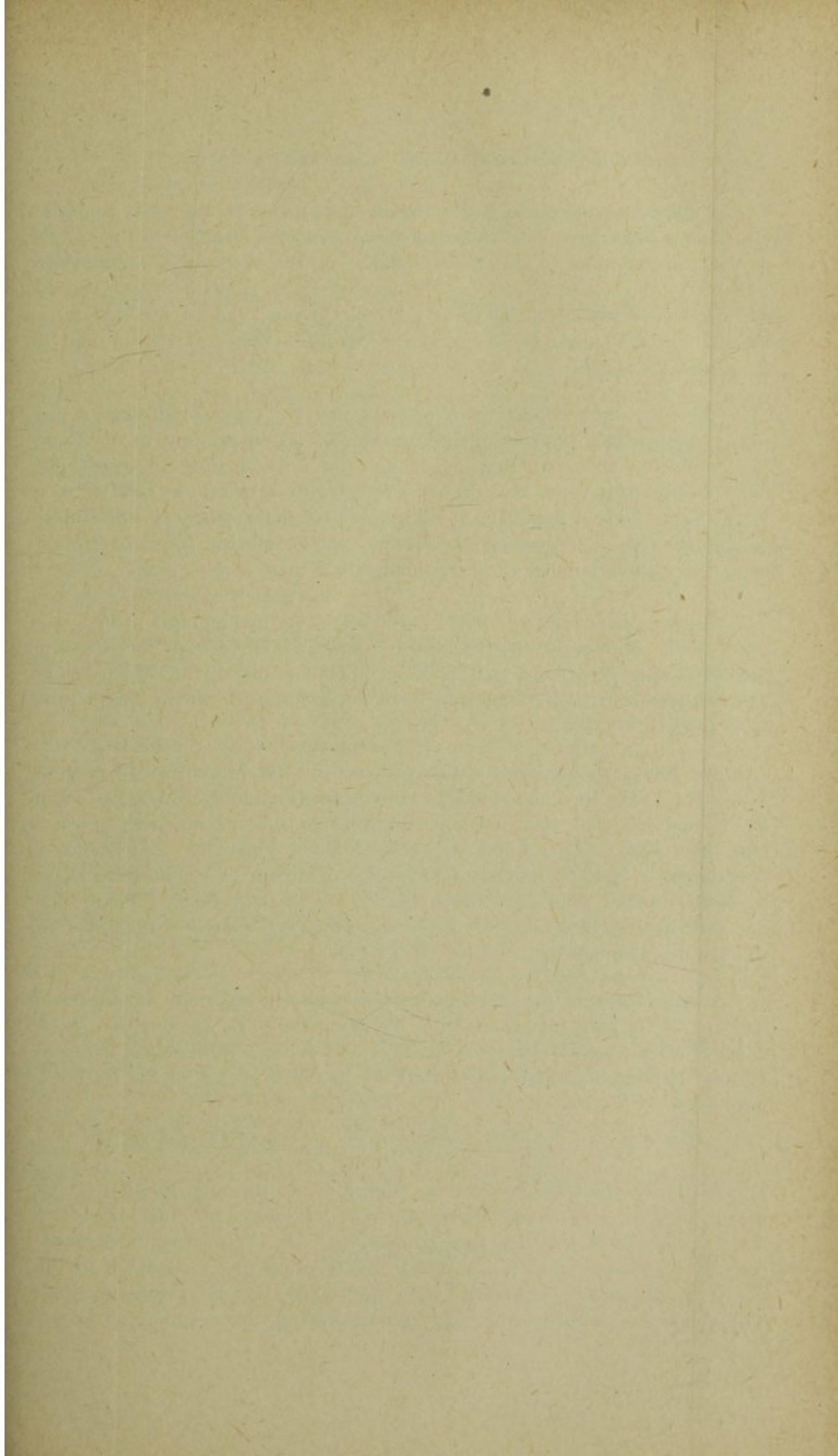
The following table shows the number of patients conveyed by the County Ambulances, hired Sitting Case Cars and by rail during the year covered by this report, with comparative figures for 1956, 1955 and 1954.

	1957.	1956.	1955.	1954.
Total number of patients	...	39,908	36,145	39,496
Total number of journeys to convey the above patients	...	10,864	10,712	14,615
Total milage involved	...	399,394½	393,916	423,397½
				457,733



RESEARCH REPORT NO. 100
ON THE EFFECTS OF
TEMPERATURE ON
THE GROWTH OF
CEREBELLAR GRANULE CELLS





PREVENTION, CARE AND AFTER-CARE.

(a) **Tuberculosis**—Reference has already been made to the close co-operation that exists between the Chest Physicians and their staff, and the officers of the Local Authority, to the attendance of the Authority's Tuberculosis Visitors at the Chest Clinics, to the arrangements made by them for the examination of contacts and for B.C.G. vaccination, and to the reports on home conditions made by them to the Medical Officer of Health and to the Chest Physicians.

When the Tuberculosis Visitors report that the home conditions of persons suffering from Tuberculosis are unsuitable, letters are sent to the Housing Authority recommending re-housing, and it is pleasing to report that the Housing Authorities have shown a very ready response, in spite of their long waiting lists of applicants. When cases of non-respiratory tuberculosis among children are reported, the County Public Health Inspector investigates the milk supply of the household.

The Area Care and After-Care Sub-Committees make grants of milk and other foods to cases of tuberculosis in need, and in between meetings the Medical Officer of Health has power to make grants in all urgent cases. The number of patients suffering from tuberculosis to whom such grants were made in 1957 was 225.

The total expenditure for the year ended 31st March, 1958, on milk and other foods for tuberculous persons amounted to £2,595/2/10. I am of the opinion that this assistance in kind to tuberculous cases meets a real need and is very much appreciated by the patients. Assistance is conditional in that the patient who refuses treatment or examination ceases to receive help. The Area Office of the National Assistance Board does not vary its scale for tuberculous patients receiving assistance in kind from the County Council.

Another factor in the prevention of Tuberculosis, especially among school children, is the medical examination including the x-ray examination of the chest of all the newly appointed teachers and of workers in school canteens. During the year the numbers examined by the medical staff of the Authority were :—

Teachers, 74. Canteen Workers, 30. School Caretakers, 11.

As the deaths from tuberculosis diminish and the total number of new cases found is also slowly decreasing, greater efforts are now needed to trace the source of infection for each notified case. The Ministry of Health recently emphasised that it was not a case of using new methods of finding new cases as much as making better and fuller use of existing methods. The great need is to develop fully contact tracing and examination.

During the year separate clinics for contacts were established at Holywell and Rhyl. Queensferry Chest Clinic already had a separate contact clinic, so there are contact clinics at the three Chest Clinic Centres in the County. The Contact Clinics are used both for diagnostic work and B.C.G. vaccination.

During the year 577 contacts were examined at Chest Clinics, and of these 217 received B.C.G. vaccination.

As mentioned earlier in the report, B.C.G. vaccination was given to school leavers during the year and 1,311 children between 13-14 years were skin tested and of these 871 received B.C.G. vaccine. This work will be continued in 1958 when it is hoped more school leavers will be vaccinated with B.C.G.

(b) **Illness generally**—Grants of milk, etc., similar to those for tuberculosis are also made by the Area Sub-Committees to persons suffering from other forms of illness, and to mental defectives living in their own homes. Fourteen such persons were assisted in 1957.

During the year the British Red Cross Society and the St. John's Ambulance Brigade continued to operate Medical Loan Depots at 23 centres in the County. All these depots have nursing equipment such as back rests, bed pans, urinals, rubber sheeting, etc., which is available on loan to persons ill at home. Both organisations rendered invaluable service during the year in this field, and the new depots recently opened at the request of the Health Committee operated very efficiently.

There is a great need for a co-ordinated service in the County for the handicapped (other than blind and deaf). Many of these handicapped persons, particularly those who cannot be trained for some form of employment, receive no visits from trained social workers and no occupational or diversional therapy. This is a field where voluntary effort could do a great deal of help, but the needs of the handicapped can only be met fully by a service such as that now provided for the blind and deaf and dumb.

Financial responsibility for periods of convalescence in Convalescent Homes has also been accepted by the Authority, the Medical Officer having the power to arrange such convalescence at his discretion. The Authority accepted financial responsibility for twenty-two such patients in 1957. Recommendations for convalescence are received from the hospitals, General Practitioners and public, and charges are recovered according to the financial circumstances of the patient.

DOMESTIC HELP.

The demands on this very valuable Service have increased steadily since 1948, and the number of cases helped in 1957 (514) is the highest recorded.

This Service calls for a great deal of detailed administration which has been most efficiently carried out by Miss Gray, the Domestic Help Organiser. Not only is the Service providing much needed help at home for medical, surgical, maternity and tuberculous cases, but also help is provided for the elderly who would otherwise require hospital care in many instances.

It will be noted that 62.45 % of all cases helped were chronic aged sick.

By providing a Domestic Help many acute illnesses are nursed at home, and the saving of hospital beds for the more seriously ill thus effected.

One other important contribution of the Service is the keeping together of a family when the mother is ill. By providing a help the children can remain at home, which is greatly to the benefit of the family and to the advantage of the Authority who would otherwise be obliged to admit the children to a home.

The Service is greatly appreciated by the public and the standard of the helpers is high. Regular meetings of Domestic Helps are held in various parts of the County when matters concerning their work are discussed and films and other instructional material shown.

Persons availing themselves of the Domestic Help Service are assessed to pay towards the cost on a scale approved by the County Council.

Details of cases helped and hours worked are shown in Table 28.

Table 28.

DOMESTIC HELP SCHEME.

1. Number of cases where Domestic Help was provided during the year :—

Maternity (including expectant mothers)	38
Tuberculosis	8
Chronic Sick (including aged and infirm)	321
Medical	122
Surgical	17
Special	8
	514
Number of first visits to Patients	250
Number of re-visits to Patients	471
	721
Number of prospective applicants interviewed at office ...	8

2. Number of Domestic Helps employed at 31st December, 1957 :—

(a) Full-time	2
(b) Part-time	100
	102
Number of prospective Helpers interviewed	52
Number of Domestic Help Organisers employed	1*
Number of Meetings arranged for Home Helps	5
Number of Talks given to Home Helpers	6
Number of first visits to Helpers	53
Number of re-visits to Helpers	665

* Part-time.

3. Number of hours worked in each area for the year :—

Eastern 26,158 ; Central 23,269 ; Western 45,248 ;

Total 94,675.

HEALTH EDUCATION.

As in previous years a great deal of Health Education was done during the year. It should be emphasised that the Medical, Health Visiting, and Nursing Staff of the department do a great deal of health education during their daily contacts with families at home and in clinics.

During the year Mr. Lewis, the County Public Health Inspector, gave talks to various organisations on health matters and he also arranged displays in the window at 40, High Street, Mold. Some of these displays were used at other centres in the County.

The Superintendent Health Visitor gave talks to groups of mothers in clinics and to outside organisations using the visual aids available in the department. The Superintendent Nursing Officer also did valuable Health Education work in connection with parentcraft and first aid training.

Miss P. M. Matthews, the first part-time Health Education Officer to be appointed in the County in 1956, left on 31st July, 1957, after doing some excellent work in Health Education in clinics, schools and meetings of the general public. She was replaced by Miss Rogers who was also designated part-time Health Education Officer in addition to her Health Visiting duties.

During the year also publicity material was prepared in the health department and obtained from outside services and displayed or made available to parents.

MENTAL HEALTH.

Administration—All matters relating to mental health are reported, in the first instance, to the appropriate Area Care and Nursing Committee. Any action necessary concerning mental defectives is deferred until the Health Committee has confirmed the Minutes of the Area Committee—but in urgent cases action is taken immediately after the meeting of the Area Committee.

The Medical Officer of Health, his Deputy, and six Assistant Medical Officers are approved by the Local Health Authority for signing certificates under the Mental Deficiency Acts. The Medical Officer of Health and his Deputy and six Assistant Medical Officers are approved by the Minister of Education for the ascertainment of educationally sub-normal children.

No Psychiatric Social Workers are directly employed by the Authority.

The Authority's Health Visitors supervise mental defectives on licence from Institutions and adult female mental defectives and mentally defective children under 16 years of age living in the community. Three duly authorised officers deal with cases under the Lunacy and Mental Treatment Acts, and supervise male adult mental defectives living in the community or on licence from Institutions.

Psychiatric Social Workers employed by the North Wales Mental Hospital Management Committee undertake the supervision of patients on trial from Mental Hospitals, and also the supervision of patients discharged from hospital, and there is an apportionment of the cost between the Hospital Management Committee and the Local Health Authority.

Reference has already been made to the work done by Health Visitors and Duly Authorised Officers with regard to Care and After-care, and whose reports are submitted to the Area Care and Nursing Committees. Adults who are mentally distressed are referred to the Adult Psychiatric Clinics at Rhyl and Wrexham, conducted by the Consultant Psychiatrist attached to the North Wales Hospital for Mental and Nervous Disorders, while children are referred to the Child Psychiatrist who also conducts Child Guidance Clinics at Rhyl and at Wrexham.

During the year the Duly Authorised Officers dealt with 29 patients who were certified under Section 16 of the Lunacy Act and admitted to hospital, and with 102 patients who were admitted under urgency orders (Section 20 of the Lunacy Act), while 271 patients were admitted to mental hospitals as voluntary patients. One patient was admitted as a temporary patient.

Reference has already been made to the supervision of mental defectives in the community. Persons suspected of being mentally deficient are referred to the Authority by Welfare Officers, Health Visitors, School Teachers, Police, etc. They are then visited and reported upon by the Authority's Medical Officers.

During the year ten males under 16 years of age, three females under 16 years of age, and seven females over 16 years of age were so reported. The ten male cases and nine of the female cases were placed under statutory supervision, and one female patient was admitted to hospital under Order.

In addition, one female patient aged under 16 years and two male and two female patients over 16 years of age were reported but although found to be mentally defective were not "subject to be dealt with" and were placed under voluntary supervision.

The number of mental defectives on the Authority's registers at 1st January, 1958, considered to be in urgent need of institutional care were one male and six females aged under 16 years and three males and three females over 16 years of age.

There were also two males, aged over 16 years, who were on the "non-urgent" waiting list for institutional care.

The difficulties with regard to obtaining vacancies for mental defectives in institutions are too well-known to need further comment.

There are two defectives under guardianship, both males aged over 16 years.

Four males and two females aged under 16 years and three males over the age of 16 years were admitted to National Health Service hospitals for

"short-term" care. Also one male and one female aged under 16 years (included in above) and one other female were admitted to Homes outside the National Health Service.

The statistics given above are shown in tabular form in Table 29.

The Occupation Centre at Fronfraith, Boughton Avenue, Russell Road, Rhyl, was opened by the Chairman of the County Council on Monday, 22nd July, 1957. The premises are ideally suited for this purpose as the Occupation Centre can be accommodated on the ground floor and there is adequate space in the grounds for outdoor activities. At the end of the year there were 19 defectives attending daily with a staff of three. Children and young persons from the Western half of the County are brought to the Centre each day in special transport with an escort. This Occupation Centre will meet a long felt need both by the parents of defective children and by the staff of the Health Department who visit these children at their homes.

Children from Eastern Flintshire continue to attend each day at the Chester City Occupation Centre and at the end of the year 16 children were attending. The Chester Occupation Centre has been established for some time and is doing excellent work.

During the year there has been a reduction in the number of patients admitted to the Mental Hospital, there is a marked decrease in the number of certified cases and a slight increase in the urgency cases, most of these cases have their stay extended by 14 days under Section 21 (a) of the Lunacy Act, 1890, to a maximum period of 17 days, some are then well enough to return home, others elect to remain on a voluntary basis.

Medical Practitioners are using this method extensively nowadays and certification is now the exception rather than the rule and this practice is in keeping with the recommendations of the Royal Commission on the Law relating to Mental Illness.

Close liaison still exists between the D.A.O. for the Eastern Area and the Deva Hospital whereby he is able to admit certain cases from Deeside to that hospital.

Similar liaison is maintained between Duly Authorised Officers and Psychiatric Social Workers and several persons found suitable for discharge but without homes to return to have been dealt with by the County Welfare Department.

Table 29.

A.—LUNACY AND MENTAL TREATMENT ACTS.

Certified Patients	...	...	...	...	29
Urgency Cases	...	...	...	...	102
Temporary Patients	...	...	...	...	1
Voluntary Patients	...	...	...	...	271

Table 29—continued.

B.—MENTAL DEFICIENCY ACTS, 1913-1938.

LOCAL HEALTH SERVICES.

					Under age 16.		Aged 16 and over.	
					M.	F.	M.	F.
Particulars of cases reported during 1957 :								
(a) Cases ascertained to be defectives "subject to be dealt with" :—								
Number in which action taken on reports by :—								
(1) Local Education Authorities on children :								
(i) While at school or liable to attend school	...	...	...	...	9	3	—	—
(ii) On leaving special schools	...	...	...	...	—	—	—	—
(iii) On leaving ordinary schools	...	...	...	...	1	—	—	2
(2) Police or by Courts	...	...	...	...	—	—	—	—
(3) Other sources	...	...	...	...	—	—	—	5
TOTAL of 1 (a)					10	3	—	7
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground								
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)	...	...	...	...	—	1	2	2
(d) Cases reported in which action was incomplete at 31st December, 1957, and are thus excluded from (a) or (b)	...	...	...	...	—	—	—	—
TOTAL of 1 (a)-(d) inc.					10	4	2	9
Disposal of cases reported during 1957 :								
The total of 2 (a), (b) and (c) must agree with that of 1 (a) and (b) above).								
a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e., at 1 (a)), number :								
(i) Placed under Statutory Supervision	...	...	...	...	10	3	—	6
(ii) Placed under Guardianship	...	...	...	...	—	—	—	—
(iii) Taken to "Places of Safety"	...	...	...	...	—	—	—	—
(iv) Admitted to Hospitals	...	...	...	...	—	—	—	1
TOTAL of 2 (a)					10	3	—	7

Table 29—continued.

				Under age 16.		Aged 16 and over	
				M.	F.	M.	F.
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e., at 1 (b)), number :							
(i) Placed under Voluntary Supervision	...	...	...	—	1	2	2
(ii) Action unnecessary	...	...	...	—	—	—	—
TOTAL of 2 (b)				—	1	2	2
(c) Cases reported at 1 (a) or (b) above who removed from the area or died before disposal was arranged							
TOTAL of 2 (a)-(c) inc.				10	4	2	9
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1957 and admitted to							
(a) National Health Service hospitals	...	...	...	‡4	2	3	—
(b) Elsewhere	...	...	...	‡1	*1	—	—
TOTAL				5	3	3	1
* Includes a case shown also in (a).							
‡ Includes a case shown also in (b).							
4. Total cases on Authority's Registers at 31/12/57 :							
(i) Under Statutory Supervision	...	...	...	23	18	44	50
(ii) Under Guardianship	...	...	...	—	—	2	—
(iii) In "Places of Safety"	...	...	...	—	—	—	—
(iv) In Hospitals	...	...	...	14	6	54	62
TOTAL of 4 (i)-(iv) inc.				37	24	100	112
(v) Under Voluntary Supervision	...	...	...	—	1	15	1
TOTAL of 4 (i)-(v) inc.				37	25	115	123
5. Number of defectives under Guardianship on 31st December, 1957, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Included in 4 (ii))							
				—	—	—	—

Table 29—continued.

					Under age 16.		Aged 16 and over.	
					M.	F.	M.	F.
Classification of defectives in the Community on 31/12/57								
(according to need at that date) :								
(a) Cases included in 4 (i)-(iii) in need of hospital care								
and reported accordingly to the hospital authority :—								
(1) In urgent need of hospital care :—								
(i) “cot and chair” cases	...	...	...	...	1	2	1	—
(ii) ambulant low grade cases	...	...	...	...	—	4	—	2
(iii) medium grade cases	...	...	...	...	—	—	2	1
(iv) high grade cases	...	...	...	...	—	—	—	—
TOTAL urgent cases					1	6	3	3
(2) Not in urgent need of hospital care :—								
(i) “cot and chair” cases	...	...	...	...	—	—	—	—
(ii) ambulant low grade cases	...	...	...	...	—	—	2	—
(iii) medium grade cases	...	...	...	...	—	—	—	—
(iv) high grade cases	...	...	...	...	—	—	—	—
TOTAL non-urgent cases					—	—	2	—
TOTAL OF URGENT AND NON-URGENT CASES					1	6	5	3
(b) Of the cases included in items 4 (i), (ii) and (v), number								
considered suitable for :—								
(i) occupation centre	...	...	...	...	20	16	18	21
(ii) industrial centre	...	...	...	...	—	—	7	5
(iii) home training	...	...	...	...	1	—	3	2
TOTAL of 6 (b)					21	16	28	28
(c) Of the cases included in 6 (b), number receiving								
training on 31/12/57 :—								
(i) In occupation centre (including voluntary centres)	...	...	...	...	12	9	2	6
(ii) In industrial centre	...	...	...	...	—	—	—	—
(iii) From a home teacher in groups	...	...	...	...	—	—	—	—
(iv) From a home teacher at home (not in groups)	...	...	...	...	1	—	—	—
TOTAL of 6 (c)					13	9	2	6

Section C.

INFECTIOUS AND OTHER COMMUNICABLE DISEASES.

Reports on cases of notifiable diseases are sent to the Medical Officer of Local Authorities who send copies to the County Medical Officer. Weekly and quarterly returns on notifiable diseases are sent from the County Health Department to the Welsh Board of Health. There is close co-operation between the County Health Department and District Councils in the control of infectious diseases, the nursing and health visiting staff of the County Council being made available to the District Medical Officers when required to deal with an outbreak of infectious illness.

Fees for notifying infectious cases are paid to doctors by District Councils who can recover their full amount from the County if copies of the notification have been sent to the County Health Department.

The number of notifications received from District Medical Officers during the year was as follows:—

Smallpox	...	...	...	...	—
Cerebro-Spinal Fever	...	...	...	...	—
Diphtheria	...	...	...	...	—
Dysentery	...	...	...	...	9
Enteric Fever (Typhoid)	...	...	...	...	1
Erysipelas	...	...	...	...	9
Food Poisoning	...	...	...	...	7
Measles	...	...	...	...	1006
Meningococcal Infections	...	...	...	...	6
Ophthalmia Neonatorum	...	...	...	...	4
Paratyphoid	...	...	...	...	—
Acute-encephalitis—Infective	...	...	...	...	—
Post-infective	...	...	...	...	—
Acute Poliomyelitis—Paralytic	...	...	...	...	21
Non-paralytic	...	...	...	...	4
Pneumonia	...	...	...	...	103
Puerperal Pyrexia	...	...	...	...	7
Scarlet Fever	...	...	...	...	62
Whooping Cough	...	...	...	...	128
Malaria	...	...	...	...	—
Total					1367

During the year the epidemic of Asian type influenza affected Flintshire some weeks after the first case had been notified in England. The first cases occurred at a large military establishment in the Rhyl area on 26th August. Within a few weeks the influenza spread rapidly throughout the County, in the middle of September between 30 and 40 % of the school population

of the County were absent due to influenza. The epidemic cleared at the end of September and by the end of October only 10 % of the school population were absent.

The epidemic mainly affected children, and the condition was mild with little after effects. A total of 15 deaths due to influenza occurred compared with 5 deaths in 1956. Most of the deaths were in elderly persons who contracted influenza or in persons already suffering from some chest complaints such as chronic bronchitis. In October a vaccine against Asian type influenza was supplied by the Ministry of Health and given to key personnel such as doctors, nurses, midwives and ambulance staff.

The group of illnesses comprising measles, whooping cough, scarlet fever and pneumonia account for 95.02 % of all notifications received during the year. The highest notifications were still measles, in a mild form.

During the year the number of cases of whooping cough fell from 257 to 128. This again emphasises that this illness is still prevalent and can assume minor epidemic proportions. It has been mentioned earlier that immunisation against whooping cough is now offered to infants under one year of age both at County Council clinics and by General Practitioners.

There were no cases of diphtheria notified during the year. The number of cases of diphtheria notified fell rapidly after the introduction of Diphtheria Vaccine in 1941 and there have been no deaths due to diphtheria in Flintshire since 1950.

The total cases of scarlet fever remained low in 1957 and there were no deaths due to this illness. With the introduction of new drugs the treatment of scarlet fever is much more effective and very few cases are now admitted to Isolation Hospitals.

The notified cases of dysentery and food poisoning are low—less than half the 1956 figures. I am not satisfied that all cases of dysentery or food poisoning are notified and I am quite convinced that the notified cases are only a fraction of the total cases occurring each year.

			1955.		1956.		1957.
Dysentery	...	...	19	...	33	...	9
Food Poisoning	...	...	31	...	64	...	7

The total number of cases of these conditions notified vary from year to year, and it only needs a minor outbreak to swell the figures in a particular year. Both these conditions are preventable, and attention to hygiene in catering establishments particularly is the key to an improvement in the position. The most effective way of improving hygiene in catering establishments and shops is by education of the staff in health matters. Legislations and inspections play their part, but are not as important as importing information of good "techniques" to food handlers.

Tuberculosis—The statistics showing the number of notifications are as follows :—

Table 30.

TUBERCULOSIS—NOTIFICATION.

FORMAL NOTIFICATIONS.														Total (all ages)
Number of Primary Notifications of New Cases of Tuberculosis.														
AGE PERIODS:	0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	
Respiratory, Males	1	..	2	1	..	3	2	5	9	11	9	6	2	54
Respiratory, Females	..	..	3	1	2	8	6	9	8	2	4	..	1	44
Non-Respiratory, Males	..	..	..	2	4	..	1	1	..	4	..	..	..	12
Non-Respiratory, Females	..	1	2	2	3	3	2	2	5	1	1	..	..	22

N.B.—In addition, 1 new case came to the knowledge of the Authority otherwise than by formal notification, viz,
1 respiratory male case from Death Returns from Local Registrars.

The following table shows the total deaths from Tuberculosis, distinguishing between males and females, and respiratory and non-respiratory Tuberculosis :—

Table 31.

DEATHS FROM TUBERCULOSIS, 1957.

		Males.	Females.	Total.
Respiratory Tuberculosis	...	15	8	23
Non-Respiratory Tuberculosis	...	—	2	2
		—	—	—
All forms	...	15	10	25
		—	—	—

The crude mortality rate from Tuberculosis (all forms) in the County of Flint declined very considerably from the beginning of the present century up to 1946, followed by an upward trend in the years 1947, 1948, and 1949, and this is shown in the following table. In 1950, however, there was a very considerable fall in the mortality rate to 0.40 per 1000 population, the rate for 1951 was 0.45 per 1000 population, the rate for 1952 was 0.35, the rate for 1953 was 0.23. The rate for 1954 was 0.21, for 1955 was 0.23, for 1956 was 0.16, and for 1957 0.17.

Table 32.

Year.	Population.	Mortality Rate per 1000 Population.
Census Years :—		
1911	92705	1.45
1921	106617	0.97
1931	112889	0.84
5 Year Period :—		
1935	116000	0.68
1936	117770	0.55
1937	119540	0.58
1938	121020	0.65
1939	121900	0.46
5 Year Period :—		
1945	125670	0.56
1946	131870	0.45
1947	134480	0.62
1948	138308	0.61
1949	140300	0.73

Table 32—continued.

5 Year Period :—					
1950	...	...	145080	...	0.40
1951	...	...	145700	...	0.45
1952	...	...	145700	...	0.35
1953	...	...	145100	...	0.23
1954	...	...	145800	...	0.21
1955	...	...	146100	...	0.23
1956	...	...	146000	...	0.16
1957	...	...	147200	...	0.17

The figures for the 5 year period 1940-1944 are not included as they are not considered comparable in view of the large influx of evacuees into the County during that period.

There is only a very small difference between the number of notifications received (expressed as rates per 1000 population) in the pre-war years 1935-1939, and the post-war years 1945-1956.

Table 33.

Pre-War Years.			Post-War Years.		
1935	...	1.03	1945	...	1.38
1936	...	1.13	1946	...	1.57
1937	...	1.40	1947	...	1.21
1938	...	1.15	1948	...	1.36
1939	...	1.28	1949	...	1.13
			1950	...	1.14
			1951	...	.93
			1952	...	1.04
			1953	...	1.29
			1954	...	1.08
			1955	...	1.03
			1956	...	.98
			1957	...	.89

Although there has been a small fall in the notification rate of tuberculosis during the past ten years—the fall has not been as sharp as that in the death rate. These findings are common to England and Wales as a whole as the following tables show :—

CASES NOTIFIED.

	1930	1940	1950	1954	1955	1956
Table 1 (Flintshire) :						
Respiratory T.B.	...	90	135	132	125	120
Non-Respiratory T.B.	...	21	44	29	25	23

	1930	1940	1950	1954	1955	1956	1957
Table 2 (Flintshire) :							
Notification per 1000							
population—Flintshire ...	1.03	1.28	1.14	1.08	1.03	.98	.89

Table 2 (England and Wales) :							
Notification per 1000							
population—England						(not	(not
and Wales ...	1.68	1.16	1.18	0.95	0.89	avail-able)	avail-able)

Table 3 (Flintshire) :							
Death rate per 1000 of the							
population, Respiratory							
and Non-Respiratory—							
Flintshire ...	0.84	0.46	0.40	0.21	0.23	0.16	0.17

Table 3 (England and Wales) :							
Death rate per 1000 of the							
population, Respiratory						(not	(not
and Non-Respiratory—						avail-able)	avail-able)
England and Wales ...	1.18	0.99	0.59	0.28	0.15		

During the year every possible step was taken to try and get all "contacts" of notified cases of Tuberculosis examined. The two Tuberculosis Health Visitors did excellent work in this connection and 339 out of 406 (83.5 %) contacts were examined, which is a higher rate of examination than ever previously achieved.

During the year the close co-operation existing in the past with the National Assistance Board and the Group Disablement Officer of the Ministry of Labour has been maintained.

I would also like to thank Dr. E. Clifford Jones and Dr. J. B. Morrison, the two Consultant Chest Physicians who serve Flintshire, for their ready co-operation and valuable assistance in the work of prevention and after-care of tuberculosis.

Tuberculosis : Mass X-Ray Survey—The Mass X-Ray Unit of the Welsh Regional Hospital Board visited the County during 1957.

The arrangements for the examination of the public, school children and factories were discussed with the Medical Director of the Unit and the Chest Physician. In this way, the best possible use was made of the Unit in the County.

Tables 35 and 36 give the results of the findings for the whole County.

Table 34.

TUBERCULOSIS—CARE AND AFTER-CARE.

During 1957.									
	Males			Females			Total		
	Under 16	Over 16	Total	Under 16	Over 16	Total	Under 16	Over 16	Total
(1) Number of cases notified to Tuberculosis Visitors :—									
Respiratory	4	60	64	8	48	56	12	108	120
Non-Respiratory	7	6	13	8	15	23	15	21	36
Total	11	66	77	16	63	79	27	129	156
(2) Number of persons in contact (at home) with above cases :—									
Respiratory	61	82	143	54	109	163	115	191	306
Non-Respiratory	10	42	52	14	34	48	24	76	100
Total	71	124	195	68	143	211	139	267	406
(3) Of the "contacts" shown in (2) above : number known to have been examined by Tuberculosis Physician :—									
Respiratory	59	58	117	54	93	147	113	151	264
Non-Respiratory	10	23	33	14	28	42	24	51	75
Total	69	81	150	68	121	189	137	202	339

Table 35.

SURVEY OF GENERAL POPULATION AND SCHOOL CHILDREN BY MASS RADIOGRAPHY UNIT DURING 1957.

AREA.	Number of Persons Examined.	Numbers Found Abnormal.								
		Definite Pulmonary Tuberculosis.			Needing further observations for Pulmonary Tuberculosis.			Other Abnormalities.		
		M.	F.	T.	M.	F.	T.	M.	F.	T.
BAGILLT	...	31	60	91	1	1	2	—	5	5
BUCKLEY	...	289	324	613	2	5	7	18	8	26
FLINT	...	245	364	609	5	12	17	10	5	15
MOSTYN	...	47	42	89	3	—	3	7	3	10
PENYFFORDD	...	47	59	106	—	—	—	3	2	5
PRESTATYN	...	318	493	811	13	13	26	16	16	32
ST. ASAPH	...	217	179	396	1	—	1	6	4	10
TOTAL	...	1194	1521	2715	25	31	56	60	43	103
								85	74	159

Table 36.

SURVEY OF FACTORIES, WORKS AND INSTITUTIONS VISITED BY MASS RADIOGRAPHY UNIT DURING 1957.

Factory, Works, or Institution.	Numbers Found Abnormal.														
	Number of Persons Examined.			Definite Pulmonary Tuberculosis.			Needing further observations for Pulmonary Tuberculosis.			Other Abnormalities.			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
														100	
De Havilland Aircraft Company, Ltd., Broughton ...	2234	593	2827	—	—	—	34	5	39	93	21	114	127	26	153
Holywell Textile Mills ...	17	45	62	—	—	—	2	1	3	4	1	5	6	2	8
Tunnel Portland Cement Company, Ltd., Padeswood ...	191	34	225	—	—	—	1	1	2	8	—	8	9	1	10
Darwin and Mostyn Iron Company, Ltd., Mostyn ...	169	17	186	—	—	—	4	—	4	10	—	10	14	—	14
TOTAL ...	2611	689	3300	—	—	—	41	7	48	115	22	137	156	29	185

Venereal Disease—The number of cases treated for the first time at the Centres at Chester, St. Asaph and Wrexham during the year was:—

Syphilis	...	...	...	15
Gonorrhoea	...	...	...	19
Other conditions	...	...	...	92
	Total	...	...	126

Section D.

NATIONAL ASSISTANCE ACT, 1948.

The Welfare Committee now administers the services provided by the Authority under Sections 21-28 of the National Assistance Act. The Health Department continues to administer Sections 29 and 30 of the Act.

There is close liaison between the Welfare Department and the Health Department and all medical matters affecting the Welfare Department are referred by the County Welfare Office to the Health Department.

I am grateful to the County Welfare Officer for the following report on the work of his department during the year.

REPORT BY THE COUNTY WELFARE OFFICER.

Section 21 of the Act imposes upon the County Council the statutory duty to provide residential accommodation for persons who, by reason of age, infirmity or any other circumstances are in need of care and attention which is not otherwise available to them.

Administration—All matters relating to Homes for the Aged are reported to the Welfare Sub-Committee responsible for the respective Homes. These are in turn confirmed by the Welfare Services Committee which is responsible for Welfare matters generally and in particular the Council's functions under the National Assistance Act, 1948, except the functions prescribed in Sections 29 and 30 of that Act which are delegated to the Health Committee.

In pursuance of this duty, the Authority retained beds at the former Poor Law Institutions at St. Asaph and Holywell, and has provided additional accommodation at Park House, Prestatyn, The Lawn, Russell Road, Rhyl, Carr Holm, Prestatyn, and Hafan Glyd, Shotton.

Coleg Clwyd was acquired in 1954 and first opened as an extension to The Lawn on the 27th April, 1957. The temporary accommodation at

Pen-y-Coed was released on that date and the numbers were built up to 56 by transfers from St. Asaph and Holywell in easy stages.

The Mat Room at St. Asaph was relinquished on the 24th July and the remaining 13 beds were temporarily released on the 25th August.

The total accommodation provided for part of the year was as follows :—

Joint User Arrangements :

Holywell	...	36 (M. 18, F. 18).
Park House	...	20 (F.).
Carr Holm	...	24 (F.).
The Lawn	...	56 (M.).
Hafan Glyd	...	37 (M. and F., plus 2 additional beds used).
St. Asaph	...	26 (NOTE—(M. 27, F. 26) up to 24th July, 1957. (M. 13, F. 26) up to 30th August, 1957. (F. 26) female accommodation only, the remainder of the accommodation was vacated for alterations).

Owing to pressure of accommodation, an additional 2 persons are accommodated temporarily at Hafan Glyd.

In addition the County Council have formulated arrangements under Section 26 of the National Assistance Act whereby a number of aged women are accommodated at Plas Coed, Dyserth Road, Rhyl. This is a voluntary Home administered by the Plas Coed Management Committee and at present the Council has 20 persons chargeable.

The number of persons chargeable in Homes outside the County on the 31st December, 1957, were as follows :—

				Male.		Female.
Other Authorities' Homes	...	...	...	6	...	4
Homes for Handicapped Persons	...	...	...	6	...	3
Blind Homes	...	...	...	4	...	2

Although the available accommodation was less during the latter part of the year demands have been met by the Boarding Out Scheme but the waiting list has grown larger as it is not always possible to accommodate certain types of persons in the accommodation at our disposal owing to certain physical infirmities.

Section 21 (b) of the Act imposes a duty on local authorities to provide temporary accommodation for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been fore-

seen or in such other circumstances as the authority may in any particular case determine.

A total of 104 cases falling within this category were dealt with during the year, of this number 26 were admitted to temporary accommodation, 2 were admitted to hospitals, and the remainder, which consisted of a number of eviction cases, were assisted to find alternative accommodation which included 3 cases rehoused by District Councils.

It was not necessary to put the temporary accommodation scheme into operation during the year although a number of families were rendered homeless in Hendre due to flooding, all these were rehoused temporarily by friends and relatives and a supply of clothing was obtained from the W.V.S. for distribution.

A Disaster Fund was opened by the Chairman of the Holywell R.D.C., and another by the Cilcain Parish Council, and the proceeds distributed amongst the victims.

Section 24 (1). The local authority, liable under this part of the Act to provide residential accommodation for any person, shall, subject to the following provisions of this part of the Act be the authority in whose area the person is ordinarily resident.

In this respect it was necessary to refer one case to the Minister of Health for his decision and after consultation with his legal advisers he determined in accordance with Section 32 (3) that the ordinary residence of this person lay within the area of another authority who assumed financial responsibility for the cost of her maintenance.

Section 31 of the National Assistance Act states that a local authority may make contributions to the funds of any voluntary organisation whose activities consist in or include the provision of recreation or meals for old people. The following schemes have operated during 1957, viz, Mold, Shotton, Dyserth, Rhuddlan, St. Asaph and Flint. Hot meals are also provided by the W.V.S. on one day a week at Rhyl and Prestatyn. The total number of meals distributed during the year amounts to 5,129 to 87 old people plus a total of 2,380 meals to 50 persons in Rhyl and Prestatyn. The Mold Committee has also undertaken a Chiropody Scheme, and 74 persons received 422 treatments during the year. The Committee also sponsors a Wireless for the Bedridden Scheme and three persons have been provided with a wireless.

Under the Domiciliary Welfare Scheme approved in 1956 the department has continued to pursue a vigorous policy in this respect which aims primarily to enable old people to live independent lives as long as possible, this scheme is based on the provisions of circular 11/50 issued by the Ministry of Health in 1950 and in addition to the establishment of voluntary old people's Welfare Committees for carrying out services of the more personal kind such as home visiting, hot meals, etc., the department is now

arranging to board out suitable old people in approved premises, and during 1957 six premises were inspected and included in the scheme and 19 aged persons were successfully placed as follows: 11 men and 8 women; of this number 10 paid the charges by private arrangement and 9 were assisted to pay the charges by the National Assistance Board. A total of 19 persons were boarded out on 31/12/57. All these cases are regularly visited and in the event of transfer to hospital or to other accommodation immediate action has been taken.

Section 37—Registration of Homes for disabled persons and the aged. During the year 3 premises were registered as Homes for old persons, viz, Woodmoor, Sandy Lane, Prestatyn, Proprietor, Mrs. M. M. Holmshaw (accommodation for four persons); Prengwyn Villa, High Street, Dyserth, Proprietor, Mrs. Marian L. Jones (accommodation for four persons; Elwy Villa, High Street, Dyserth, Proprietor, Miss Ffoulkes (accommodation for five persons).

Section 39—Inspection of Disabled Persons and Old Persons Homes. A total of five premises in the County are registered under Section 37 of the Act and regular visits have been paid during the year.

Section 47—Removal to suitable premises of persons in need of care and attention. Four cases falling under this heading were referred to District Councils during the year and action was taken in every case.

Section 48—Duty of Councils to provide temporary protection for property of persons admitted to hospitals, etc. During the year 9 cases were dealt with by the department of which permanent care is being taken in one case by the appointment of the County Welfare Officer as Receiver.

T. WESLEY HUGHES, County Welfare Officer.

Sections 29 and 30 of the National Assistance Act, 1948, are administered by the Health Committee. Section 29 deals with the welfare of blind, deaf, and those substantially handicapped by illness, injury or congenital deformity or such other disabilities as may be prescribed by the Minister.

The County Council has approved schemes for the welfare of the blind and deaf and dumb, but up to the present no approved scheme for other forms of handicap.

Welfare of the Blind is undertaken on behalf of the Authority by the Chester and District Blind Welfare Society. The total number of blind persons on the register on 31st December, 1957, was:—

Blind 306. Partially sighted 80.

5 children were in Residential Schools for the Blind.

8 blind persons from Flintshire were employed in the Society's Workshops at Chester, and 4 were employed as Home Workers.

8 blind persons are employed in open industry.

7 are self-employed.

1 blind person is in training.

A. FOLLOW-UP OF REGISTERED BLIND AND
PARTIALLY-SIGHTED PERSONS.

		Cause of Disability.			
		Cataract.	Glaucoma.	Retroental Fibroplasia.	Others.
(i) Number of cases registered during the year in respect of which Section F of Forms B.D.8 (Revised) recommends :—					
(a) No treatment :					
Blind	...	5	...	—	7
Partially Sighted	...	1	...	—	5
(b) Treatment (medical, surgical or optical) :					
Blind	...	11	...	6	8
Partially Sighted	...	5	...	2	3
Total Blind and Partially Sighted	22	8	—	23	
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment :					
Blind	...	7	...	6	6
Partially Sighted	...	3	...	2	4
Total Blind and Partially Sighted	10	8	—	10	

B. OPTHALMIA NEONATORUM.

- (i) Total number of cases notified during the year ... NIL
- (ii) Number of cases in which :—
- (a) Vision lost ... NIL
- (b) Vision impaired ... NIL
- (c) Treatment continuing at end of year ... NIL

Welfare of the Deaf and Dumb is undertaken on behalf of the Authority by the Chester and North Wales Deaf and Dumb Society, and the following is a Report which I have received from the Secretary.

Total number of Deaf ... 79.

Aged :—		Males.	Females.	Total.
5 to 16	...	7	3	10
16 to 21	...	2	5	7
21 to 50	...	9	17	26
50 to 65	...	10	9	19
Others	...	8	9	17
Totals	...	36	43	79

An increase of 1 during the year.

A glance at the figures given above will give some idea of the work done in the Flintshire area by our Welfare Officers.

There is a case paper for each person and these are carefully filed so that information in respect to any one of them can be given when required.

They are divided into four sections :—

(a) The younger children who are in residential schools ; these have the undivided interest of the Society who insist that they be visited in their schools, when they are at home during the summer holidays, and that special attention be given at Christmas, when they are entertained.

(b) It will be obvious to all who read this report that with the children we give the aged deaf greater consideration. In our visitation it becomes more and more obvious that there is a definite need for an Eventide Home where the aged deaf and dumb can be domiciled and be able to converse with the others in the Home in their own language. There are something like fourteen Homes for the deaf in England but not one in Wales. The Secretary of the Society is fighting hard to get a home for Wales and a special meeting is to be held in the near future to deal with this question.

(c) The adolescents are often a problem to the Society, their education does not appear to bring them to the point of decision as to what occupation they would like to follow, and indeed many of the parents are equally as undecided and not always co-operative, and it is with difficulty we persuade the parents and their child of the need for training.

(d) To find employment for men and women who are deaf is no easy task although employers are helpful and fulfil their obligation to engage a percentage of handicapped persons, it is not always possible to fit in the deaf man or woman as often there is intricate machinery to deal with. Our greatest difficulty is to keep the deaf in their employment, to visit the place where they work, unravel the many difficulties they encounter, watch that they are not exploited in any shape or form, and arrange to meet the management when trouble arises, often caused by misunderstanding.

It should be mentioned that visits are paid to Mental Hospitals, and to Old People's Homes, and Part III Accommodation where we find a deaf person has been placed because there is no particular home for them.

The following salient cases picked out from reports sent each quarter to the Clerk of the Council may help to increase the interest of all concerned.

(1) S.B.—A young child of eight years, a victim to almost every form of sickness. She attends the Manchester School for the Deaf, but has a special place with our Welfare Officers who give her every attention for which her parents are exceedingly grateful.

(2) R.D.—A very nice boy aged thirteen, with a good home and every opportunity in life. His health is not too good and he has lost some time at school. His home being in a district adjacent to many of the Cheshire cases he probably gets more attention than many of the others. His parents are helpful and bring him to Chester whenever possible so that he is in close contact with the Society.

(3) F.P.—A wonderful old man aged 79 years, lives with his daughter and her husband and is exceptionally well looked after, but he loves to be out in the open, to attend the football match or to see his favourite cricket team. He visits other deaf people in the vicinity and loves to be visited by the Welfare Officer to hear all the news of the deaf world.

(4) M.E.—This old lady aged 87 years, living in one of the Homes provided by the Council, enjoys a visit by the Welfare Officer, she speaks very fluently on her fingers and is interested in all that is going on in the country. She is very proud of the Home and speaks well of all that is done for her. A case the Council can very well be proud of, for she never ceases to talk of treatment she receives at their hands.

(5) From the adolescents there are a number of cases that can be quoted :

(a) A.R. and J.H., one aged 16 years and the other 17 years, were difficult to deal with after leaving school and it required a lot of persuasion to get them back to the school at Old Trafford for training as bakers ; but now they are quite happy and doing well. J.H. has obtained a Diploma for baking a Hovis Loaf. Each of these lads were rigged out with clothes of every description at a cost of twenty-five pounds each. Their parents, neither of them too well off, were very grateful.

(b) P.W., trained as a dressmaker, was found employment in a first class shop when she left the school at the age of nineteen. Unfortunately her inattention to her work and her carelessness in finishing what was given to her, she became redundant and another place had to be found where frequent visits had to be paid to her place of business, and to her home, so as to get her not only to stick at her work but to earn her livelihood.

(c) R.R., a very amiable young woman 24 years old, similarly trained as the above case (b) in dressmaking. She now holds an important position in a first class business in Chester. Speaking to the Manager about her he said, "She is an employee of whom we are justly proud; she can be entrusted to any particular work that comes in to us." This young woman never misses visiting the Club at Chester every Saturday. I venture to say the amount of money expended on her training has been worth while.

(d) A.J.—Here is a home where marital relationships had seemingly perished, husband and wife had separated on several occasions and it had come to the point where a divorce was sought after. Proceedings were well advanced when one of our Welfare Officers stepped in, a reconciliation was brought about and a home re-established.

(e) E.C.—A deaf woman aged 45 years, unselfishly devoted to her parents both of whom are over 80 years old. It was found she was in need of clothing and that the parents were also bereft of the necessary covering for their bodies. Their case was presented to the National Assistance Board who very kindly gave an "Exceptional Needs Grant" to meet their needs. Beautiful letters of appreciation were received from them.

(f) H.S.—This young man aged 45 years, living with his widowed mother, was on holiday when he had a severe heart attack and for many weeks was in a critical condition. He was visited regularly; extras were taken along for his use, magazines to take up his attention and everything possible done to relieve the situation. He has so far recovered but will never be able to work; but his mother has been assured that the Society will not forsake him whatever happens.

Religious Services are held regularly for the deaf, and parties for the children in the summer, with the usual Christmas festivities for all the deaf.

I hope these few notes will be of service to you.

Yours sincerely,

D. RUSSELL MACFARLANE, A.Inst.S.W.,

Superintendent and Secretary.

Section E.

FOOD AND DRUGS ACT, 1955.

REPORT OF THE COUNTY PUBLIC HEALTH INSPECTOR.

862 samples of food were taken during the year ended 31st December, 1957. 602 of these were submitted to the Public Analyst for chemical analysis; 152 were sent to the Public Health Laboratory for bacteriological examination, and the remaining 108 were samples of school milk which were tested in the office for milk fat and solids contents.

The following table is a brief summary of the samples submitted to the Public Analyst :—

Article.	Number taken.		Genuine.	Not genuine or below standard.	
Milk	...	313	239	...	74
Dairy Products	...	14	14	...	—
Sausages	...	63	60	...	3
Ice Cream and Lollies	...	19	19	...	—
Miscellaneous Groceries	...	136	133	...	3
Alcoholic Drinks	...	9	9	...	—
Fish and Meat Products	...	34	31	...	3
Patent Medicines	...	14	8	...	6
		602	513		89

Milk—313 samples were submitted to the Public Analyst for chemical analysis. The samples were taken from roundsmen, dairies, farms, schools and restaurants, and were tested for colouring matter, added water, fat deficiency, solids not fat, blood, dirt and preservatives. An analysis of the 74 samples reported as not being genuine showed that nine contained added water, 22 had fat deficiencies, and 45 were low in milk solids.

Successful legal proceedings were instituted in respect of 7 milk samples containing added water.

The legal standard for the fat content of Guernsey milk is 4 %. Three samples were found to be deficient in fat. “The “appeal to cow” samples showed that the herd was giving milk with a fat content below the legal standard.

In all cases of poor quality milk the producers were advised to contact the Advisory Services of the Agricultural Committee.

Pasteurised Milk—There are three pasteurising plants in the county. These are inspected weekly, attention being paid to the structural conditions of the buildings, efficiency of the pasteurising operations and to the cleanliness of the operators. Weekly samples of pasteurised milk are taken and submitted to the Public Health Laboratory for bacteriological examination. Rinses from the washed churns and washed bottles from the bottle washers are also bacteriologically examined. Three samples of pasteurised milk taken from a small pasteurising plant failed the “keeping quality” tests. It was found that the plant became contaminated during the re-assembling after its dismantling for cleaning and sterilisation. The dairyman was advised.

School Milk—All milk supplied under the children's School milk scheme is pasteurised. Samples are taken each week for bacteriological and chemical examination. Arrangements were made during the year for the older children of six schools to visit the pasteurising plants. One firm provided free transport and light refreshments for the children visiting its dairy.

Biological Milk Sampling—64 samples of milk were taken from retailers and tested for the presence of Bovine Tuberculosis and *Brucella Abortus*. One sample was found to be unsatisfactory.

Flintshire is a specified area and only Pasteurised Milk or Tuberculin Tested milk is to be sold in it. However, there are two isolated hamlets where it is impossible to obtain either pasteurised or T.T. milk and here the Ministry has allowed two producers to retail raw undesignated milk. These milk samples are biologically tested at frequent intervals and have been found free of T.B. bacilli.

A notification of a young child with T.B. glands in the neck was received from that part of the County where only pasteurised milk is sold. It was stated that the child drank pasteurised milk only, but on investigation, it was found that he played on a farm where undesignated milk was produced. A sample of this milk proved to be tuberculous and the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food was notified who inspected the herd. Subsequently one cow was removed and slaughtered under the Tuberculosis Order.

Other Foods, etc.—289 samples of foodstuffs were submitted to the Public Analyst and 15 were found to be below standard or did not comply with the labelling regulations. Successful legal proceedings were instituted in one case and warning letters were sent to the others.

Two samples of **Glauber Salts** were found to have misleading labels and a warning letter was sent to the manufacturers who immediately withdrew the stocks.

A sample of **processed wheat germ** food had a misleading label. A subsequent sample showed that the labelling of the new stocks complied with the regulations.

The quality of the **Pork and Beef Sausages** sold in the County is still maintained at a satisfactory standard. 63 samples were taken, of these three were found to be below standard. A warning letter was sent to the three manufacturers concerned.

Fish Cakes—A sample of fish cakes was found to contain a mouse hair. The matter was referred to the Health Department of the district where the fish cakes were manufactured for examination of the premises. The fish cakes were also bacteriologically examined and no undesirable bacteria were found in them. A warning letter was sent to the manufacturer.

Slimvin—Successful legal proceedings were instituted against a firm for selling a tonic which was advertised as having both slimming and tonic properties. On analysis the liquid was found to be a cider vinegar and did not have the properties claimed for it on the label.

Cooking Fat—A sample of cooking fat taken from a fish frying range was found to be slightly rancid. The fish frier was advised.

Steak and Kidney Pie—A meat pie was brought to the office with a complaint that it had a bitter taste. On analysis it was found to contain an excessive amount of tin. The meat had absorbed the tin lining of the metal container. The matter was reported to the Health Authority of the district in which the pie was purchased for examination of the remaining stocks.

The deficiencies reported in the other foodstuffs were of a minor character and were infringements under the labelling orders. Formal samples of these foodstuffs are to be taken again.

SUMMARY OF LEGAL PROCEEDINGS.

Article.	Deficiency or Adulteration.	Result.	Total Fines and Costs.
			£ s. d.
Slimvin	... Misleading label	... Convicted	48 9 0
Milk	... 8 % added water	... "	20 4 0
"	... 12 % "	... "	7 15 0
"	... 7 % "	... "	7 15 0
"	... 9 % "	... "	7 15 0
"	... 9 % "	... "	7 15 0
"	... 2 % "	... "	7 15 0
"	... 5 % "	... "	11 3 0
			£118 11 0

58 samples of doubtful foodstuffs found on food manufacturing premises were sent to the Public Health Laboratory for bacteriological examination. These foodstuffs included cream cakes, meat pies, minced meat, sausages, sausage meat, fish cakes, gravy custards and confectionery. No undesirable bacteria were found in them.

A mother complained that the dried milk purchased from one of the Welfare Clinics made her baby ill. A sample of the dried milk was found to be chemically and bacteriologically clean, but a sample feed prepared by the mother was found to contain undesirable bacteria which had obviously been introduced by the mother in the course of the preparation of the feed.

Public Health Propaganda—Lectures and films were given to such organisations as Young Farmers' Clubs, Women's Institutes, Civil Defence, Church Guilds and Youth Organisations. The subjects discussed included Home Safety, Clean Food, Housing, Environmental Hygiene, and the Health Services.

Other Duties—The inspection of school premises and hospital kitchens, investigations of complaints, atmospheric pollution, river pollution and water supplies, caravan sites, refuse disposal.

Shops Act—The provisions dealing with the health and comfort of shop workers are found in the Shops Act, 1950. They include heating, ventilation, sanitation, lighting, washing facilities, facilities for taking meals and seating accommodation.

The District Council Health Departments are responsible for the supervision of the heating facilities, efficiency of the ventilation and sanitary accommodation. The County Health Department is responsible for lighting, washing facilities, facilities for taking meals and seating accommodation for female workers.

The Rhyl Urban District Council Health Department is responsible for the administration of all the provisions of the Act dealing with the health and comfort of the shop workers in its area.

All premises inspected during the year complied with the Act.

Fertiliser and Feeding Stuffs Act—Twenty-five samples were taken during the year and submitted to the Public Analyst. Twenty-four samples of fertiliser were also taken from a firm of fertiliser manufacturers. These were taken in conjunction with a scheme sponsored by the Ministry of Agriculture, Fisheries and Food, and the Fertilisers Manufacturers Association.

Pharmacy and Poisons Act—The duties devolving upon the County Council under the Act are :—

- (a) The names of all shopkeepers, other than registered pharmacists, who sell Part II poisons are to be entered on the Council's lists.
- (b) To see that any deputy appointed under Rule 14 is a responsible person.
- (c) To see that the substances which contain Part II poison which appear in the first schedule of the Poisons Rule are being sold by the listed seller or by a responsible deputy.
- (d) That a Poisons Book is kept in the prescribed form and manner and that all entries therein are in order.

- (e) That the storage arrangements for certain poisons are adequate.
- (f) That the requirements as to labels and type of containers are complied with.

There are 210 listed sellers in the County and these are subject to periodic inspection.

E. LEWIS,

County Public Health Inspector.

Section F.

Tuberculosis in Cattle—Vigorous measures have been taken by the Ministry of Agriculture, Fisheries and Food to eradicate tuberculosis in cattle. This work has been done in stages by declaring certain Counties first as "Free Testing Areas" and later as Eradication Areas.

Flintshire was designated a Free Testing Area on 1st March, 1957. This means that for two years farmers can apply to the local Ministry of Agriculture Veterinary Officer for the free testing of their herds. On 1st March, 1959, the County becomes an Eradication Area and then testing of cattle will be compulsory and reactors will be slaughtered.

The Ministry of Agriculture, Fisheries and Food hopes that the whole of Great Britain will be an Attested Area by 1961.

Attested Cattle (position at 31st December, 1957).

	Flintshire.	Wales.
Number of Attested Herds	1,344 ...	36,451
Percentage Attested Cattle	74 % ...	93 %

(It should be pointed out that the greater part of Wales has been an Attested Area for some time).

In addition to this, Flintshire is also a "Specified Area" since 1955 where undesignated raw milk cannot be sold. All milk sold in the County has to be Tuberculin Tested Milk, Pasteurised Milk or Sterilised Milk.

These two important measures will in time lead to marked reduction and eventually eradication of milk borne tuberculosis—bovine tuberculosis. For this reason, these measures, primarily matters of animal husbandry, have an important public health aspect.

Some indication of the prevalence of tuberculosis of bovine origin can be obtained by the amount of non-respiratory tuberculosis notified. Figures for non-respiratory tuberculosis notified in Flintshire are given below.

Notifications, Non-Respiratory Tuberculosis—Flintshire.

1930	1940	1950	1955	1956	1957
21	44	30	25	23	34

It is not possible to say that all cases of non-respiratory Tuberculosis are of bovine origin but it is known that by far the greater majority are of bovine origin.

Most cases of non-respiratory tuberculosis occur in the rural areas and instances have occurred where small amounts of undesignated raw milk have been made available by farmers direct to local residents. This practice defeats the purpose of designating the County as a "Specified Area," and is one of the main causes of the high incidence of non-respiratory infection in the rural areas.

The whole position will be improved when the County becomes an "Eradication Area" in 1959—then cattle infected with Tuberculosis will be detected and slaughtered. When this stage has been reached another important step in the fight against tuberculosis will have been taken.