

[Report 1958] / Medical Officer of Health, Flintshire County Council.

Contributors

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Flintshire County Council



REPORT

BY THE

MEDICAL OFFICER

ON THE

HEALTH

OF

FLINTSHIRE

DURING THE YEAR

1958

Flintshire County Council



REPORT

BY THE

MEDICAL OFFICER

ON THE

HEALTH

OF

FLINTSHIRE

During the year

1958

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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,

During the year there were important developments in the health services, particularly in the fields of mental health, poliomyelitis vaccination, health aspects of nuclear and allied radiation, care of the aged, and care and after-care of the handicapped.

In mental health the welfare of mental defectives was the subject of a Ministry of Health Circular. The Ministry recommended that defectives in institutions should be reviewed and discharged from Order whenever possible. This meant that fewer defectives were detained compulsorily and more were in institutions as "informal" patients, and able to leave when they wished. The element of compulsory detention is also disappearing gradually in the case of mental illness, and more patients are seeking treatment voluntarily. Gradually the treatment of mental illness is changing and becoming more in line with the treatment of illness generally.

During the year there was marked progress in the campaign to vaccinate children against poliomyelitis. Vaccine became more plentiful and the County clinics and General Practitioners worked together to vaccinate as many children as possible. By the end of the year 52 % of children under 15 years of age had been vaccinated. In July the Minister of Health extended the age from 15 to 25 years, and also recommended a third injection. It has to date proved difficult to interest the teenagers and young adults in polio vaccination. In spite of all our efforts only 12 % of those between 15 and 25 years of age had been vaccinated at the end of 1958.

A great deal of interest was shown during the year in the public health aspects of ionizing radiation. Radioactive substances are now being used in weapons, power stations, research and industry, and it is becoming more important to monitor the radiation arising from these sources and assess the hazards to health.

Important developments occurred in the care of the aged, and in the care of the handicapped during the year. Concerning the aged, closer co-operation between the various services resulted in better facilities being made available. This was particularly so due to the close liaison between the hospital service, welfare department, and the health department. The

Health Committee during the year agreed in principle to a scheme being prepared for the welfare of the handicapped—other than blind, deaf and dumb.

The state of health of the public has improved greatly during the past few years. As the change is gradual it is difficult to appreciate this unless one looks back a few years. Below is a comparison of the main indices in Flintshire in 1938 and 1958. The year 1938 was chosen as the last year of peace, and therefore a fair "base line" of public health prior to the National Health Service Act of 1946.

Certain Flintshire statistics for 1938 and 1958.

		1938.		1958.
Total births	... ..	1998	...	2449
Live birth rate	... ..	16.51	...	16.29
Infant deaths	... ..	110	...	60
Infant mortality rate	... ..	55.06	...	25.11
Deaths associated with				
childbirth	... ..	6	...	1
Death rate (all causes)	... ..	12.23	...	12.48
Cancer deaths	... ..	215	...	331
		(14.5 % of		(18.09 % of
		all deaths)		all deaths)
Diphtheria	... ..	268 cases	...	No cases
Typhoid	... ..	3	...	No cases
Paratyphoid	... ..	2	...	—
Puerperal Fever	... ..	20	...	1
Syphilis	... ..	29	...	5
Gonorrhoea	... ..	71	...	25
Tuberculosis :				
New cases	... ..	266	...	122
Deaths	... ..	79	...	12
Contacts examined	... ..	20	...	342
Infant Clinics	... ..	10	...	27
Total attendances at Infant				
Clinics	... ..	25314	...	33909

The vital statistics indicate the great improvement in health that has taken place with one notable exception, namely, cancer cases and cancer deaths, which have increased over 50 % in twenty years. Infant deaths have been reduced by over a half in the two decades since 1938. Diphtheria has ceased to be a public health problem and all the infectious diseases show a marked decline. In 1938 there were three isolation hospitals in the County and a smallpox hospital. Today all these have ceased to function as isolation hospitals,

In 1938, 37 cases of rickets were discovered and treated, no case of rickets was found in 1958—in fact, no case of true rickets has been reported in the County for some years.

Tuberculosis—the great scourge in the past—was discovered in 266 persons in 1938 and caused 79 deaths. The cases had been reduced by over half to 122 in 1958 and the deaths in 1958 were only one-sixth of those in 1938.

These statistics are not meant to give the complete story but they do show the trends, which show a remarkable improvement in the state of the health of the public as a whole.

Staff.

Medical—Dr. G. W. Roberts, County Medical Officer of Health, together with the County Public Health Inspector, attended a symposium on the subject “Nuclear Radiation Hazards: Training of Local Authority and Hospital Personnel.” The symposium was arranged by the Royal Society of Health and was held in London on the 10th March, 1958. The County Medical Officer also attended a course on “Radiation Hazards,” arranged by the Society of Medical Officers of Health, from the 10th to 12th April, 1958. He also attended the Royal Society of Health Congress (with the Chairman of the Health Committee and the County Public Health Inspector) at Eastbourne from the 28th April to the 2nd May, 1958.

Dr. E. H. Annels, Deputy County Medical Officer, attended the Conference of the National Association for Maternity and Child Welfare held in Glasgow on the 25th and 26th June, 1958.

Dr. E. Pearse attended the National Association for Mental Health Conference held in London on the 21st and 22nd March, 1958. She also attended the eighth Congress of the Medical Women's International Association in London from 15th to 21st July, 1958.

Dr. W. Manwell commenced full-time attendance at Liverpool University on the 7th October, 1958, to take a Course for the Diploma in Public Health. He also attended a Seminar for School Medical Officers in London from 25th to 28th February, 1958.

Dr. Marie Beddow commenced duty on a part-time sessional basis on the 3rd March, 1958. Since the 25th July, 1958, however, she has been engaged mainly with the Mobile Clinic. She is also engaged on Poliomyelitis Vaccination.

Dental—Mr. A. Fielding, Principal Dental Officer, attended the Annual Conference of the Dental Association in Dundee from the 7th to the 11th July, 1958.

The following Dental Officers were employed in a part-time capacity on a sessional basis during the year :—Mr. J. F. Wilson, L.D.S., from 13th

January, 1958, to 1st July, 1958; Mr. A. O. Hewitt, L.D.S., from 31st January, 1958; and Miss M. Malcolm, L.D.S., from 12th September, 1958.

Dr. J. G. Macqueen, Rhyl, who had been engaged as a part-time Dental Anaesthetist, terminated his service on the 1st July, 1958, and Dr. David Brash, Rhyl, commenced duty (in place of Dr. Macqueen) on the 1st July, 1958.

Miss S. H. Corlett, Dental Attendant, resigned her appointment on the 30th November, 1958, and Mrs. M. D. Lloyd-Jones commenced duty as a Dental Attendant on 24th November, 1958. Mrs. B. M. Welch, Dental Attendant, commenced duty on a part-time sessional basis on the 24th April, 1958.

Mr. E. Lewis, the County Public Health Inspector, attended the Royal Society of Health Conference in London on the 10th March, 1958; the Royal Society of Health Congress at Eastbourne from 28th April to 2nd May, 1958, and the Summer School in Health Education at Chichester from 19th to 29th August, 1958.

Health Visitor/School Nurses—Miss O. M. Pierce, Senior Health Visitor/School Nurse, died on the 13th March, 1958, and Miss E. Weston, who was appointed to succeed the late Miss O. M. Pierce, commenced duty in the Rhyl area on the 1st July, 1958.

Mrs. M. C. Townley resigned her appointment on 23rd March, 1958, and Mrs. M. E. Hawkins retired from service on the 31st December, 1958.

Miss A. M. Stewart, who was formerly District Nurse/Midwife in Broughton District, successfully completed the Health Visitors' Training Course on the 14th July, 1958, and commenced duty as Health Visitor/School Nurse in Queensferry District on the 14th July, 1958.

Mrs. D. M. Lewis, formerly employed as Health Visitor/School Nurse on a part-time sessional basis, was appointed to the full-time post as Health Visitor/School Nurse in St. Asaph District and commenced duty on the 29th December, 1958.

The under-mentioned have been engaged as part-time temporary Clinic Nurses:—

Mrs. A. R. Iball—commenced duty 24th February, 1958.

Mrs. E. Cull—resigned 8th May, 1958.

Mrs. E. Boswell—commenced duty 19th May, 1958.

Mrs. M. Pritchard—commenced duty 2nd June, 1958.

Courses (Health Visitors)—Miss D. V. Gray attended the Royal College of Nursing Study Course at Southport on the 9th and 10th May, 1958. Miss E. M. Ll. Morgan attended the Women's Public Health Officers Summer School at Oxford from 28th June to 12th July, 1958. Miss M. W. Wright

and Mrs. A. E. Williams attended the Women's Public Health Officers Autumn School at Nottingham from 30th August to 13th September, 1958. Miss E. Weston attended the Summer School in Health Education at Chichester from 19th to 29th August, 1958, and Miss J. M. Jewell attended the Women's Public Health Officers Thirty-second Winter School held in London during Christmas Vacation, 1958/59. Mrs. M. M. Roberts, Tuberculosis Health Visitor, attended a special course held in Birmingham from 8th to 13th September, 1958, on "Diseases of the Chest."

District Nurses and Midwives.

Mrs. F. M. Williams, County Nursing Officer, retired on 31st December, 1958.

Miss D. Norman, S.R.N., S.C.M., Q.N., H.V., who was appointed Deputy Superintendent Nursing Officer, commenced duty on the 1st September, 1958.

The under-mentioned Nurses left the service on the dates mentioned :—

Name.	District.	Date.
Nurse J. W. Jones, S.C.M., S.E.A.N.	Prestatyn.	12th May, 1958.
Nurse A. M. Saunders, S.C.M.	Buckley.	2nd June, 1958.
Nurse C. Davies, S.R.N., S.C.M.	Llanasa.	31st July, 1958.
*Nurse G. M. Jones, S.R.N., S.C.M., Q.N.	Holywell.	September, 1958.
Nurse S. Williams.	Rhuddlan.	3rd October, 1958.
Nurse M. S. Burgess.	Maelor.	27th December, 1958.
Nurse E. M. Owen, S.C.M., S.E.A.N.	St. Asaph.	11th December, 1958.

(* To take up training for Health Visitor's Certificate).

The following newly appointed Nurses and Midwives commenced duty on the dates shown :—

Name.	District.	Date.
Nurse E. Roberts.	Prestatyn.	12th May, 1958.
Nurse Lloyd Roberts.	Holywell.	17th November, 1958.
Nurse M. Hinchin.	Hawarden.	24th November, 1958.
Nurse N. A. Furneaux.	Rhuddlan.	1st December, 1958.
Nurse S. C. Edwards.	Buckley.	29th November, 1958.
Nurse I. Shepherd.	Relief Nurse/Midwife.	11th July, 1958.
Nurse E. J. Lloyd, S.R.N., S.C.M.	Llanasa.	1st August, 1958.

Miss D. Willatt qualified as Queen's Nurse in January, 1958.

Mrs. E. J. Lloyd commenced Queen's Training in September, 1958.

Nurses and Midwives : Courses.

Nurse L. V. Williams, Nurse A. C. Harrison and Nurse E. Jones attended Midwives Refresher Course at Oxford from 6th to 12th July, 1958.

Nurse M. Jones and Nurse M. Pritchard attended the Midwives Refresher Course at Leeds from 20th to 26th July, 1958.

Nurse A. Ellwood and Nurse M. A. Bennett attended Midwives Refresher Course at Oxford from 21st to 27th September, 1958.

Long Service Badges were presented to fifteen nurses and midwives on 20th May, 1958, in recognition of over twenty years service.

Mental Health.

Mr. E. Blackwell, Welfare Officer and Duly Authorised Officer, Central Area, resigned on 31st July, 1958, to take up a new appointment.

Mr. R. H. Griffiths was appointed to succeed Mr. Blackwell as Welfare Officer and Duly Authorised Officer, Central Area, and commenced duty on 1st August, 1958.

Mr. Ernest Williams, Welfare Officer and Duly Authorised Officer, Western Area, retired on the 30th September, 1958.

Mr. J. E. Hawkins was appointed to succeed Mr. E. Williams as Welfare Officer and Duly Authorised Officer, Western Area, and commenced duty on 1st October, 1958.

Miss D. E. Powell, appointed to succeed Miss M. W. Evans as Supervisor of the Occupation Centre for Mental Defectives at Fronfraith, Rhyl, commenced duty on the 6th January, 1958.

Miss Mair E. Hughes, Trainee Assistant at the Occupation Centre, commenced a full-time Diploma Course for Teachers of the Mentally Handicapped at Manchester on 10th September, 1958.

Mrs. Iona Banks, commenced duty as Temporary Assistant to the Supervisor on the 17th September, 1958, during the absence of Miss Mair E. Hughes.

Courses, etc.

Miss D. E. Powell attended the Annual Conference of Mental Health Workers in London from the 11th to 14th April, 1958.

Mr. R. H. Griffiths, Duly Authorised Officer, Central Area, attended a Course for Mental Health Workers in London from the 14th to the 19th July, 1958.

My sincere thanks are due to the Chairman and Members of the Health Committee for their valuable support and encouragement during the year. An appreciation of the work done by the department has been voiced by the Chairman and several Members of the Committee and is much appreciated by all members of the department staff.

Mr. W. I. Roberts, the Chief Clerk, has again done excellent work in preparing the material for this Annual Report and I would like to thank him for his excellent services.

The staff of the department have worked hard during the year and given loyal service. I would like to record my tribute to all members of the staff and to say how much their willing services are appreciated.

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.

Official Address : County Health Offices, Mold. Tel. Mold 106 (7 lines).

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 of School Health Services) :

Edna Pearce, 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., D.T.M., C. & M.

Assistant Medical Officers (part-time sessional) :

Dr. E. M. Harding.

Dr. Y. B. Gibson.

Dr. Marie Beddow.

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.

J. F. Wilson, L.D.S. (from 13/1/58 to 1/7/58).

A. O. Hewitt, L.D.S.

Miss M. Malcolm, L.D.S.

Consultant Orthodontist (Part-time sessional) :

B. T. Broadbent.

Dental Anaesthetists (Part-time sessional) :

Dr. Prudence K. Owen.

Dr. J. Griffiths.

Dr. J. G. Macqueen (resigned 1/7/58).

Dr. D. Brash.

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. (retired 31/12/58).

Deputy Superintendent Nursing Officer and Deputy Supervisor of Midwives :

Miss Daisy Norman, S.R.N., S.C.M., Q.N., H.V.Cert (since 1/9/58).

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 (died 13/3/58).

Miss E. Weston, Senior Health Visitor/School Nurse (since 1/7/58).

Mrs. M. E. Hawkins (resigned 31/12/58).

Miss M. J. Hughes.

Miss J. M. Jewell.

Miss Ellen Jones.

Miss G. Jones.

Miss G. Jenkins.

Miss J. S. Rogers.

Miss M. Lees.

Miss A. M. Stewart (since 14/7/58).

*Mrs. A. E. Williams, S.R.N.,
S.R.F.N.

Miss L. Oliver.

Mrs. M. E. Pearse.

Mrs. E. G. E. Rees.

Mrs. J. Thomas.

Mrs. D. Thompson.

Miss M. W. Wright.

Miss E. M. L. Morgan.

Mrs. M. C. Townley (resigned 23/3/58).

Mrs. D. M. Lewis (since 29/12/58).

Clinic Nurses :

Nurse D. Owens (Part-time sessional).

Mrs. A. R. Iball (Part-time sessional).

Mrs. E. Boswell (Part-time sessional).

Mrs. M. Pritchard (Part-time sessional).

Tuberculosis Visitors :

Mrs. M. M. D. Roberts, S.R.N., S.C.M., T.B. Cert.

Mrs. I. M. M. Beedles, S.R.N., B.T.A.

Ambulance Officer :

David John Jones.

Supervisor of Occupation Centre for Mental Defectives :

Miss D. E. Powell, Dip. N.A.M.H. (since 6/1/58).

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	...	...	...	...	32
District Nurses	...	...	...	...	9

Total ... 47

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

Whole-time	...	...	...	...	2
Part-time	...	...	...	...	103

Total ... 105

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 Area comprises:—

Officer—Mr. E. W. Arrowsmith, 40, High Street, Mold.

Telephone Number—Mold 111.

District—Buckley U.D., Connah's Quay U.D., Mold U.D., Maelor R.D., Hawarden R.D., Eastern part of Holywell R.D. comprising Parishes of Nannerch, Cilcain, Mold Rural, Nercwys and Northop.

(b) The Central Area comprises:—

Officer—Mr. R. H. Griffiths (since 1/8/58, succeeded Mr. E. Blackwell who retired 31/7/58), County Welfare Offices, Holywell.

Telephone Number—9 a.m. to 5 p.m. Mondays to Fridays, and 9 a.m. to 12 noon on Saturdays—Holywell 3012.

5 p.m. to 9 a.m. (and on Sundays)—Holywell 2171 (Police Station).

District—Flint M.B., Holywell U.D., Central part of Holywell R.D. comprising Parishes of Halkyn, Brynford, Ysceifiog and Caerwys.

(c) The Western Area comprises:—

Officer—Mr. J. H. E. Hawkins (since 1/10/58) (succeeded Mr. E. Williams who retired 30/9/58), Welfare Office, Old Emmanuel School, Vale Road, Rhyl.

Telephone Number—From 9 a.m. to 5 p.m. Mondays to Fridays and 9 a.m. to 12 noon on Saturdays—Rhyl 2329.

From 5 p.m. to 9 a.m. (and on Sundays)—St. Asaph 3100.

District—Rhyl U.D., Prestatyn U.D., St. Asaph R.D., Western part of Holywell R.D. comprising the Parishes of Gwaenysgor, Tre-lawnyd, Llanasa and Whitford.

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.

Telephone Rhyl 1848.

Emergency Calls day or night for the whole County.

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 (retired 30/6/58).

Sidney Elmitt, A.I.M.T.A. (since 1/7/58).

County Welfare Officer :

T. Wesley Hughes, F. Inst. W.

Children's Officer :

Mrs. L. Davies, B.A.

Health Officers of the Several Sanitary Districts (As on 31st December, 1958).

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. Left 12/7/58.
		Mr. L. Graham, Town Hall, Flint. Commenced 14/7/58.
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.
		Mr. A. Hughes, 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 (Chief P.H.I.).
		Mr. E. G. Black, U.D.C. Offices, Rhyl (Deputy P.H.I.).
		Mr. D. Kaye, U.D.C. Offices, Rhyl (Additional P.H.I.).
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.
		Mr. O. C. R. Roberts, R.D.C. Offices, Holywell.
		Mr. G. T. Tinneswood, R.D.C. Offices, Holywell.
Maelor Rural	Dr. Allan Cathcart	Mr. R. L. Higgins, Willow Street, Overton. Left 30/5/58.
		Mr. R. J. More, Willow Street, Overton. Commenced 1/6/58.
		Left 31/12/58.
St. Asaph Rural	Dr. Ranyl Rhydwen	Mr. R. P. Barlow, R.D.C. Offices, St. Asaph.
		Mr. R. W. Easton, R.D.C. Offices, St. Asaph.

Section A.

STATISTICS AND SOCIAL CONDITIONS OF
THE COUNTY.

Flintshire is a small county geographically—163,707 acres, which includes the Hundred of Maelor and the Civil Parish of Marford and Hoseley. With a population of 146,600 it is densely populated and this gives a density of 0.89 persons per acre.

The population in 1900 was 81,490, mainly engaged in agriculture, with some industry on Deeside. The rapid increase in population during the past 58 years from 81,490 to 146,600 has been mainly due to the marked increase in industrialisation on the Deeside.

Today over two-thirds of the population is employed in industry and less than a third in agriculture and allied work. The farming community although small is active and virile and makes an important contribution in the production of food and in maintaining a traditional way of life.

The Health Committee have endeavoured to provide complete and adequate services such as Home Nursing, Ambulance, Health Visiting, Home Helps, etc., in all parts of the County. Up to this year it has not been easy to provide adequate clinic facilities in the rural areas. On 25th July, 1958, a mobile clinic started to operate in the rural areas and this has met for the first time a very real need.

Good Welfare Services have been provided in the County under the National Assistance Act and these meet the social needs of the aged, blind, deaf and in part the handicapped. A start was made during the year to prepare a full scheme for the care of handicapped persons other than blind and deaf and dumb. It is hoped when the Health Committee has considered and approved this scheme that more can be done to help these very deserving cases.

During the year the level of unemployment in the County was low, and this fact has contributed much to the high standards of health of the population as a whole and children under five years of age in particular.

Table 1 (a).

AREA, POPULATION, ETC.

District.	Area in		Population (By Census).			
	Statutory	Acres.	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 Statutory Acres.	Population (estimated mid-year).							Census 1951
		1939	1944	1949	1954	1955	1957	1958	
Urban—									
Buckley ...	2646	7345	6895	7622	7670	7700	7710	7690	7699
Con. Quay ...	4214	6505	6420	7455	7350	7380	7670	7850	7365
Flint M.B. ...	6243	13020	11750	14160	14220	14210	14230	14270	14257
Holywell ...	2532	6918	7286	7870	8210	8200	8230	8250	8196
Mold ...	1164	5880	5700	6354	6600	6590	6550	6600	6436
Prestatyn ...	3219	7422	8098	8659	8910	9050	9380	9550	8809
Rhyl ...	1700	16510	18370	18710	19200	19300	19590	19710	18745
Rural—									
Hawarden ...	31576	28750	29760	32450	34980	34940	35890	35360	34659
Holywell ...	58515	20730	20920	21920	22290	22280	22130	22110	22324
Maelor ...	29749	4356	4599	6720	5850	5350	4800	4530	6760
St. Asaph ...	22149	7494	7471	8380	10520	11100	11020	10680	9858
Total Urban ...	21718	63600	64510	70830	72160	72430	73360	73920	71507
Total Rural ...	141989	61330	62750	69470	73640	73670	73840	72680	73601
Total County ...	163707	124930	127260	140300	145800	146100	147200	146600	145108

FLINTSHIRE, 1958.

Live births	...	...	...	...	...	...	2,389
Live birth rate per 1,000 population	...	...	...	...	...	...	16.29
Stillbirths	...	...	...	...	...	...	60
Stillbirth rate per 1,000 live and stillbirths	...	...	...	...	...	...	24.50
Total live and stillbirths	...	...	...	...	...	...	2,449
Infant deaths	...	...	...	...	...	...	60
Infant mortality rate per 1,000 live births—total	...	...	...	...	...	...	25.11
Infant mortality rate per 1,000 live births—legitimate	...	...	...	...	...	...	24.44
Infant mortality rate per 1,000 live births—illegitimate	...	...	...	...	...	...	40.82
Neo-natal mortality rate per 1,000 live births (first four weeks)	...	...	...	...	...	...	19.67
Illegitimate live births per cent. of total live births	...	...	...	...	...	...	4.10 %
Maternal deaths (including abortion)	...	...	...	...	...	...	1
Maternal mortality rate per 1,000 live and stillbirths	...	...	...	...	...	...	.41

3. FINANCIAL.

The product of a penny rate, computed for the County in respect of the year 1958-59, was £7,160.

4. SOCIAL CONDITIONS.

These are discussed elsewhere in the Report.

5. BIRTHS.

During the year under review, 2,449 births were registered as pertaining to the County, that total being made up as follows:—

		Live Births.		Still Births.		Total.
Legitimate	...	2291	...	59	...	2350
Illegitimate	...	98	...	1	...	99
		—		—		—
Total	...	2389		60		2449
		—		—		—

Compared with the previous year, 1957, these figures show an increase of 95 live births, and an increase of 14 still births, the total births thus showing an increase of 109.

Of the 2,389 live births, 1,217 were males and 1,172 females.

Of the 60 still births, 28 were males and 32 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 1958 was 16.29, which is lower than the rate for England and Wales, namely, 16.4, but it is higher than the County rate for 1957 which was 15.58.

The **still birth rate** per 1,000 total (live and still) births was 24.50, as compared with the corresponding rate for England and Wales which was 21.6.

Illegitimate Births—The number of illegitimate births fluctuated from year to year. The number rose during the war years to a peak of 69.3 per 1,000 total births in 1947. By 1950 the figure had been reduced to the pre-war level of 43.87 per 1,000 total births. The figures for subsequent years are given below :—

1951	...	39.36	per 1,000 total births.
1952	...	51.52	do.
1953	...	52.85	do.
1954	...	52.07	do.
1955	...	40.00	do.
1956	...	43.64	do.
1957	...	32.05	do.
1958	...	40.42	do.

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 189 premature births in 1958, 149 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, 37 live births and 3 still births occurred at home.

The following table shows that of the 37 live births at home, 1 died at home within 24 hours of birth, 5 were transferred to hospital, 30 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, 1958.

District.	LIVE.			STILL.			TOTAL.		
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.
Urban—									
Buckley	111	3	114	3	—	3	114	3	117
Connah's Quay	155	4	159	4	—	4	159	4	163
Flint (M.B.)	260	14	274	6	—	6	266	14	280
Holywell	160	11	171	2	—	2	162	11	173
Mold	121	11	132	5	—	5	126	11	137
Prestatyn	135	8	143	3	—	3	138	8	146
Rhyl	285	15	300	5	—	5	290	15	305
Rural—									
Hawarden	533	13	546	19	—	19	552	13	565
Holywell	328	11	339	8	1	9	336	12	348
Maelor	75	1	76	2	—	2	77	1	78
St. Asaph	128	7	135	2	—	2	130	7	137
TOTAL URBAN	1227	66	1293	28	—	28	1255	66	1321
TOTAL RURAL	1064	32	1096	31	1	32	1095	33	1128
WHOLE COUNTY	2291	98	2389	59	1	60	2350	99	2449

Table 2 (b).
BIRTHS AND BIRTH RATES, 1958.
(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.	Live.	Still.	Live.	Still.	
Urban—							
Buckley	114	3	14.82	.39	15.41	.41	25.64
Connah's Quay	159	4	20.25	.51	19.24	.48	24.54
Flint (M.B.)	274	6	19.20	.42	18.82	.41	21.43
Holywell	171	2	20.73	.24	20.94	.24	11.56
Mold	132	5	20.00	.76	20.20	.77	36.49
Prestatyn	143	3	14.97	.31	18.41	.38	20.55
Rhyl	300	5	15.22	.25	16.44	.27	16.39
Rural—							
Hawarden	546	19	15.44	.54	15.75	.55	33.63
Holywell	339	9	15.33	.41	17.02	.45	25.86
Maelor	76	2	16.78	.44	17.11	.45	25.64
St. Asaph	135	2	12.64	.19	15.55	.23	14.60
Total Urban	1293	28	17.49	.38	18.19	.39	21.19
Total Rural	1096	32	15.08	.44	16.29	.47	28.37
Whole County	2389	60	16.29	.41	17.27	.43	24.50

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

Table 3.

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	...	...	...	...	127
(b) At home	...	...	...	...	37
(c) In private nursing home (see note (1) )	...	...	...	...	—
Total	...	...	...	...	164

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

(a) In hospital	...	...	...	...	22
(b) At home	...	...	...	...	3
(c) In private nursing home (see note (1) )	...	...	...	...	—
Total	...	...	...	...	25

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)	12	8	3	3	1	2	1	..	..	..	..	..	..	..	..	..	12	..	..
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	31	3	25	4	..	4	1	..	..	..	..	..	..	..	..	..	7	2	..
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	27	1	25	2	..	2	..	..	..	..	..	..	..	..	..	..	2	1	..
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	57	..	57	23	..	22	3	..	2	..	..	..	..	..	..	..	1	..	..
TOTAL	127	12	110	32	1	30	5	..	2	..	..	..	..	..	..	..	22	3	..

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 1,830 deaths were ascribed to the County, representing a death rate per 1,000 population of 12.48, which is higher than the rate for England and Wales as a whole, namely 11.7.

It will be observed from Table 4 that the three main causes of death are Diseases of the Heart and Circulation (981), Cancer (331), and Diseases of the Respiratory System (156), excluding respiratory tuberculosis which was 11. 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 1958 deaths due to cancer of the lung showed a slight increase from 52 in 1957 to 57. Total deaths due to cancer showed a decrease in 1958 of 2 compared with 1957 (from 333 to 331).

Deaths due to tuberculosis continued at a low level—12—compared with 25 in 1957. Of the total of 12 deaths, 11 were due to respiratory tuberculosis and one 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 1958 was 73. Of these 29 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.

A great deal is done in industry to reduce the risk of accidents—but it will be noted that 44 fatal accidents occurred during the year, either at places of employment or at home.

Table 4.

DEATHS (GENERAL) 1958.

SUMMARY OF CAUSES.

Cause of Death.	Males.	Females.	Total.	Percentage of Total Deaths.
1. Tuberculosis—respiratory	9	2	11	.60
2. Tuberculosis—other	—	1	1	.05
3. Syphilitic disease	—	—	—	—
4. Diphtheria	—	—	—	—
5. Whooping Cough	—	—	—	—
6. Meningococcal Infections	1	1	2	.11
7. Acute Poliomyelitis	—	—	—	—
8. Measles	—	—	—	—
9. Other infective and parasitic diseases	4	2	6	.33
10. Malignant Neoplasm—stomach	28	27	55	3.01
11. Malignant Neoplasm—lung, bronchus	51	6	57	3.11
12. Malignant Neoplasm—breast	1	37	38	2.08
13. Malignant Neoplasm—uterus	—	18	18	.98
14. Other malignant and lymphatic neoplasms	78	74	152	8.31
15. Leukaemia, aleukaemia	5	6	11	.60
16. Diabetes	4	5	9	.49
17. Vascular lesions of the nervous system	139	158	297	16.23
18. Coronary disease, angina	210	108	318	17.38
19. Hypertension with heart disease	20	35	55	3.00
20. Other heart disease	102	120	222	12.13
21. Other circulatory diseases	49	40	89	4.86
22. Influenza	1	3	4	.22
23. Pneumonia	28	28	56	3.06
24. Bronchitis	61	20	81	4.43
25. Other diseases of respiratory system	8	7	15	.82
26. Ulcer of stomach and duodenum	12	3	15	.82
27. Gastritis, enteritis and diarrhoea	—	3	3	.16
28. Nephritis and Nephrosis	10	12	22	1.20
29. Hyperplasia of prostate	17	—	17	.93
30. Pregnancy, childbirth, abortion	—	1	1	.05
31. Congenital malformations	8	10	18	.98
32. Other defined and ill-defined diseases	81	93	174	9.51

Table 4—continued.

Cause of Death.	Males.	Females.	Total.	Percentage of Total Deaths.
33. Motor vehicle accidents ...	25	4	29	1.58
34. All other accidents ...	26	18	44	2.40
35. Suicide ...	6	2	8	.44
36. Homicide and operations of war	1	1	2	.11
	985	845	1830	

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 ...	1	—	1
Prestatyn ...	—	—	—
Rhyl ...	—	—	—
Rural—			
Hawarden ...	1	1	2
Holywell ...	2	—	2
Maelor ...	3	—	3
St. Asaph ...	—	—	—
TOTAL URBAN ...	3	1	4
TOTAL RURAL ...	6	1	7
WHOLE COUNTY ...	9	2	11

DEATHS FROM MALIGNANT DISEASES.

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.

It will be noted that the rates vary considerably from district to district, but the rate is higher for the urban areas (2.49) than the rural areas (2.02). As would be expected the highest rates are in the urban centres with a preponderance of aged in the population (Prestatyn and Rhyl) and the lowest rates in centres with a preponderance of young workers (Connah's Quay, Hawarden Rural District, Flint M.B.).

The total death rate from cancer in 1958 remained at 2.26 per 1,000 of the population, the same rate as in 1957.

As will be seen from Table 5 (b) deaths from cancer show a higher incidence between 45-65 years of age than in any other age group, and this is different from deaths due to other main causes where total deaths tend to increase with advancing age.

In previous years deaths due to cancer of the stomach exceeded the deaths due to other groups of defined cancer deaths. In 1958, for the first time deaths due to cancer of the lung have exceeded all other groups—lung 57, stomach 55. As far as can be predicted this trend will continue in years to come until lung cancer will become the major cause of cancer deaths in all age groups.

Table 3 (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. (7,690)	M	1	2	1	—	5	1	} 22	2.86
	F	2	1	3	—	6	—		
Con. Quay U.D. (7,850)	M	2	2	—	—	4	—	} 13	1.66
	F	—	—	3	—	2	—		
Flint M.B. (14,270)	M	2	5	—	—	11	—	} 29	2.03
	F	2	—	3	—	6	—		
Holywell U.D. (8,250)	M	—	7	—	—	3	—	} 18	2.18
	F	—	1	2	—	5	—		
Mold U.D. (6,600)	M	3	5	—	—	4	—	} 18	2.73
	F	2	—	—	2	2	—		
Prestatyn U.D. (9,550)	M	3	6	—	—	3	—	} 30	3.14
	F	—	—	2	2	12	2		
Rhyl U.D. (19,710)	M	5	7	—	—	9	—	} 54	2.74
	F	5	3	6	5	13	1		
Hawarden R.D. (35,360)	M	5	7	—	—	13	3	} 61	1.72
	F	7	—	5	4	16	1		
Holywell R.D. (22,110)	M	1	5	—	—	16	1	} 52	2.35
	F	7	—	9	4	8	1		
Maelor R.D. (4,530)	M	3	3	—	—	6	—	} 16	3.53
	F	1	—	1	1	1	—		
St. Asaph R.D. (10,680)	M	3	2	—	—	4	—	} 18	1.68
	F	1	1	3	—	3	1		
Total Urban (73,920)	M	16	34	1	—	39	1	} 184	2.49
	F	11	5	19	9	46	3		
Total Rural (72,680)	M	12	17	—	—	39	4	} 147	2.02
	F	16	1	18	9	28	3		
Whole County (146,600)	M	28	51	1	—	78	5	} 331	2.26
	F	27	6	37	18	74	6		

Table 5 (b).

AGES OF DEATHS
FROM TUBERCULOSIS, MALIGNANT DISEASES AND HEART AND
CIRCULATORY DISEASES.

Disease.	Sex.	AGE GROUPS.									Total.	
		0—	1—	5—	15—	25—	45—	65—	75—			
Tuberculosis :—												
Respiratory	M	...	—	—	—	—	3	1	4	1	...	9
"	F	...	—	—	—	—	1	1	—	—	...	2
Other	M	...	—	—	—	—	—	—	—	—	...	—
"	F	...	—	1	—	—	—	—	—	—	...	1
Total			—	1	—	—	4	2	4	1		12
Malignant Diseases :—												
Stomach	M	...	—	—	—	—	1	9	11	7	...	28
"	F	...	—	—	—	—	—	5	11	11	...	27
Lung, Bronchus	M	...	—	—	—	—	—	33	9	9	...	51
"	F	...	—	—	—	—	—	3	1	2	...	6
Breast	M	...	—	—	—	—	—	—	1	—	...	1
"	F	...	—	—	—	—	2	21	9	5	...	37
Uterus	F	...	—	—	—	—	2	9	4	3	...	18
Other	M	...	—	—	—	—	1	26	25	26	...	78
"	F	...	—	—	—	—	5	22	21	26	...	74
Leukaemia	M	...	1	—	—	—	1	1	1	1	...	5
"	F	...	—	—	—	—	1	3	1	1	...	6
Total			1	—	—	—	13	132	94	91		331
Heart and Circulation :—												
Vascular lesions of nervous system	M	...	—	—	—	1	2	29	36	71	...	139
	F	...	—	—	—	—	4	22	33	99	...	158
Coronary disease, angina	M	...	—	—	—	—	2	84	61	63	...	210
	F	...	—	—	—	—	—	26	41	41	...	108
Hypertension with heart disease	M	...	—	—	—	—	—	4	4	12	...	20
	F	...	—	—	—	—	—	6	8	21	...	35
Other heart	M	...	—	—	—	—	1	9	20	72	...	102
"	F	...	—	—	—	—	4	8	23	85	...	120
Other circulatory	M	...	—	—	—	—	1	8	13	27	...	49
"	F	...	—	—	—	—	—	3	11	26	...	40
Total			—	—	—	1	14	199	250	517		981

DEATHS ATTRIBUTABLE TO INFECTIOUS DISEASE.

During the year 1958, deaths attributable to Infectious Disease were as follows :—

Diphtheria	...	...	...	...	—
Whooping Cough	...	...	...	...	—
Meningococcal Infections	...	...	...	...	2
Acute Poliomyelitis	...	...	...	...	—
Measles	...	...	...	...	—
Other Infective and Parasitic Diseases	...	...	...	...	6
Influenza	...	...	...	...	4
Pneumonia	...	...	...	...	56
Bronchitis	...	...	...	...	81
Gastritis, Enteritis and Diarrhoea	...	...	...	...	3

During the year there were no deaths due to the more severe infectious conditions such as Polio, Whooping Cough or Diphtheria. Immunisation against these conditions continued as in previous years, and vaccination against smallpox was also offered to each baby in the County.

During 1958 the only Isolation Hospital remaining in the County at Dobb's Hill ceased to function as an Isolation Hospital, due to lack of demand, and became a hospital for the aged sick.

Although many children contract infectious illnesses, deaths due to these illnesses are now very few, thanks to immunisation and the availability of new drugs for treatment.

DEATHS OF INFANTS AGED UNDER TWELVE MONTHS—During the year 60 infants died before attaining the age of twelve months, and of these 35 were males and 25 females, while 56 were legitimate and 4 were illegitimate.

The Infant Mortality Rate (deaths per 1,000 live births) is therefore 25.11, which is higher than the rate for England and Wales, namely 22.50.

The causes of death of the 60 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 60 are 47 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, 1958.

(Under 1 year of age).

District.	MALES.			FEMALES.			Infants. Legit. and Illegit.	
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit.	Illegit.
Urban—								
Buckley	3	1	4	1	—	1	5	
Connah's Quay	3	—	3	—	—	—	3	
Flint (M.B.)	2	—	2	2	1	3	5	
Holywell	2	1	3	3	1	4	7	
Mold	1	—	1	1	—	1	2	
Prestatyn	—	—	—	1	—	1	1	
Rhyl	3	—	3	6	—	6	9	
Rural—								
Hawarden	9	—	9	5	—	5	14	
Holywell	8	—	8	2	—	2	10	
Maelor	2	—	2	—	—	—	2	
St. Asaph	—	—	—	2	—	2	2	
Total Urban	14	2	16	14	2	16	32	
Total Rural	19	—	19	9	—	9	28	
Whole County	33	2	35	23	2	25	60	

The causes of death were:—

Bronchitis	1
Pneumonia	6
Congenital Malformations	13
Other defined and ill-defined diseases	37
Leukaemia and Aleukaemia	1
Accidents (other than motor vehicle accidents)	1
Meningococcal infections	1

Table 6 (b).

INFANT MORTALITY, 1958.

(Children aged under 12 months).

Rate per 1,000 TOTAL Live Births.

District.	MALES.			FEMALES.			Infants.	
	Legit.	Illeg.	Total.	Legit.	Illeg.	Total.	Legit. and Illeg.	
Urban—								
Buckley	26.31	8.77	35.08	8.77	—	8.77	43.86	
Connah's Quay	18.87	—	18.87	—	—	—	18.87	
Flint (M.B.)	7.30	—	7.30	7.30	3.65	10.95	18.25	
Holywell	11.69	5.85	17.54	17.54	5.85	23.39	40.93	
Mold	7.57	—	7.57	7.57	—	7.57	15.15	
Prestatyn	—	—	—	6.99	—	6.99	6.99	
Rhyl	10.00	—	10.00	20.00	—	20.00	30.00	
Rural—								
Hawarden	16.48	—	16.48	9.16	—	9.16	25.64	
Holywell	23.59	—	23.59	5.90	—	5.90	29.50	
Maelor	26.31	—	26.31	—	—	—	26.31	
St. Asaph	—	—	—	14.81	—	14.81	14.81	
Total Urban	10.83	1.55	12.37	10.83	1.55	12.37	24.75	
Total Rural	17.33	—	17.33	8.21	—	8.21	25.55	
Whole County	13.81	.84	14.65	9.63	.84	10.46	25.11	

Table 6 (c).

NEO-NATAL DEATHS, 1958.

(Under 4 weeks of age).

District.	MALES.			FEMALES.			Infants.	
	Legit.	Illegit.	Total.	Legit.	Illegit.	Total.	Legit. and	Illegit.
Urban—								
Buckley	1	1	2	1	—	1	...	3
Connah's Quay	3	—	3	—	—	—	...	3
Flint (M.B.)	1	—	1	1	1	2	...	3
Holywell	1	1	2	3	1	4	...	6
Mold	1	—	1	1	—	1	...	2
Prestatyn	—	—	—	1	—	1	...	1
Rhyl	3	—	3	5	—	5	...	8
Rural—								
Hawarden	6	—	6	4	—	4	...	10
Holywell	6	—	6	2	—	2	...	8
Maelor	1	—	1	—	—	—	...	1
St. Asaph	—	—	—	2	—	2	...	2
Total Urban	10	2	12	12	2	14	...	26
Total Rural	13	—	13	8	—	8	...	21
Whole County	23	2	25	20	2	22	...	47

MATERNAL MORTALITY—There was one death attributable 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 only one death occurred from this cause in 1958

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	60	30	90	11.70	13.16
Connah's Quay	40	31	71	9.04	12.47
Flint M.B.	88	70	158	11.07	14.83
Holywell	53	41	94	11.39	13.44
Mold	54	35	89	13.48	15.64
Prestatyn	72	95	167	17.49	11.96
Rhyl	158	159	317	16.08	13.51
Rural—					
Hawarden	197	160	357	10.10	12.72
Holywell	152	136	288	13.02	13.37
Maelor	47	29	76	16.78	14.09
St. Asaph	64	59	123	11.52	10.94
Total Urban	525	461	986	13.34	13.47
Total Rural	460	384	844	11.61	12.42
Whole County	985	845	1830	12.48	12.98

* 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	143	78	221
Deaths in age group 65 and over	335	347	682
	478	425	903

Rural Districts.

	Males.	Females.	Total.
Deaths in age group 45-64 ...	130	79	209
Deaths in age group 65 and over ...	288	273	561
	<hr/> 418	<hr/> 352	<hr/> 770

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 parts of the Public Health Acts and National Assistance Act. The Medical Staff employed by the County Council comprise the Deputy County Medical Officer, Senior Medical Officer, two full-time Medical Officers and three medical officers who are in addition Medical Officers of Health of grouped County Districts.

The Authority has one Principal Dental Officer, two full-time Dental Officers and three part-time Dental Officers and the services of a Consultant Orthodontist.

The County Health Department has a staff of eighteen Health Visitors and two Tuberculosis Visitors, forty-seven District Nurses and Midwives and 105 Home Helps.

Other staff are engaged on the ambulance service, on training mental defectives, sampling food and drugs and on health education.

The Health Department is administered centrally from Mold.

All services provided under the National Health Service Act are provided directly by the County Council, there being no divisional administration. A County Health Committee deals with all policy matters and meets quarterly. This Committee mainly consists of members of the County Council but has members appointed by other bodies, such as the Clwyd and Deeside Hospital Management Committee, Royal College of Midwives and Voluntary Organisations.

In addition to the Health Committee there are three Area Care and Nursing Sub-Committees—Western, Central and Eastern. These commit-

tees deal with the day to day running of the following services :—

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.

Area Care and Nursing Sub-Committees also meet once a quarter at centres in the area concerned. In addition to County Council members, each Area Committee has members representing district councils and voluntary organisations.

All matters relating to the Ambulance Service are considered in the first place by the Ambulance Sub-Committee. This Sub-Committee is mainly composed of County Council members, with representatives of district councils and voluntary organisations.

The County Medical Officer advises the Children's Department and the Welfare Department on all medical matters affecting their work. He is also Police Surgeon.

Voluntary Organisations—Flintshire is fortunate in having several active voluntary organisations which render valuable service to the public and help the Health Department in carrying out its duties.

I would like once again to thank the Child Welfare Voluntary Committees. A Committee is associated with each Clinic Centre and the members give loyal and valuable service. During the year the various Committees donated £200 to the Health Department to purchase a sound film projector for health education work in clinics and schools.

These Committees also help individual mothers in need, and make available at reduced cost suitable fireguards for use in homes with small children.

I would like again to pay tribute to the members of the W.V.S., the British Red Cross Society, St. John's Ambulance Brigade and the St. Asaph Diocesan Moral Welfare Association, and to the many individuals who have given ready help to the department during the year.

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

Expectant and Nursing Mothers—In 1956 the Health Committee agreed that "combined" ante-natal clinics should be established throughout the County as staff and facilities become available. At "combined" clinics

the medical staff are provided by the St. Asaph Maternity Hospital and the nurses by the Health Department, and clinics are held in County Council premises.

In establishing these clinics, I would like to thank Mr. Parry Jones, the Consultant Obstetrician and Gynaecologist to the Clwyd and Deeside Hospital Management Committee, and his staff for their ready and valuable help. The first combined clinic was opened in Prestatyn in 1956.

Combined clinics are now held at Prestatyn, Rhyl and Holywell. It is hoped, eventually, to have two additional clinics of this type at Mold and on Deeside at Flint or Shotton. Five ante-natal clinics of this type would provide adequate cover for the County and would meet the need of mothers, General Practitioners, and midwives.

The ante-natal clinics referred to above are well attended and provide a very excellent service, and are much appreciated by mothers.

In addition to the combined ante-natal clinics, ante-natal clinics are also held at St. Asaph Hospital and the Catherine Gladstone Maternity Home. These are staffed by the St. Asaph Hospital Medical Staff and midwives from the Hospital and the Maternity Home.

In addition to the above, ante-natal clinics staffed by the Health Department are held at Bagillt, Buckley, Caergwrle, Mold, Shotton and Saltney, and a midwives clinic is held at Flint.

These clinics will continue to operate until the five "combined" clinics have been opened. When the full complement of combined ante-natal clinics has been reached, midwives clinics will be established where necessary to provide mothercraft training, relaxation, and to give advice and help to the expectant mother.

I should point out that Parentcraft Classes are already being held at Rhyl, Buckley, Holywell and Flint. These classes are well attended, are appreciated by the mothers, and in most centres are conducted by the midwives and health visitors working together.

Attendances at ante-natal clinics for the past ten years are given below :—

	Year :	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
Expectant Mothers	...	797	641	473	325	369	292	305	1045	1504	2019
Attendances	...	2567	1822	1208	939	1193	696	705	1271	2113	3062

It will be noted that attendances have gone up steadily since combined clinics were established in 1956.

In July, 1958, a Family Planning Clinic was opened at the County Council Clinic at Flint by the Family Planning Association. This clinic is held once a fortnight and is staffed by a doctor and nurse engaged by the Family Planning Association. The clinic is run by a Voluntary Committee and is open to women from any part of the County. This is the only Family Planning Clinic in the County, but family planning advice is given by the Consultant Obstetrician and his staff at their hospital and ante-natal clinics where medical reasons indicate this to be desirable or when the patient seeks such advice.

Maternity outfits are provided on request to all expectant mothers having a domiciliary confinement. Stocks are held at the Health Department, clinics and the homes of midwives. During 1958, 543 outfits were issued compared with 457 in 1957.

Table 8.

ANTE-NATAL CLINICS, 1958.

	Bagillt	Buckley	Caerwreth	Holywell	Mold	Prestatyn	Rhyl	Saltney	Shotton	TOTALS
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	...	...	...	...	...	...	...	...	...	...
	6	23	4	52	24	26	45	22	24	226

	8	181	2	970	160	138	454	70	36	2019
	7	46	2	401	84	49	173	21	27	810
	29	196	2	1671	244	166	625	72	57	3062
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	...	...	...	...	...	...	...	...	...	...
	..	..	..	206	2	64	30	..	..	302
	..	..	..	206	1	21	30	..	..	258
	..	..	..	206	2	64	30	..	..	302

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	67 (i.e., Total admissions from all Constituent Authorities)	26	35 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).	..	..	..	..	..	..	..
(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	..	..	2
				(2) Post-Natal Cases	..	..	—

These figures relate to Flintshire cases only

+ Exclusive of the lying-in period.

Child Welfare—The Health Committee agreed in 1957 to purchase a Mobile Clinic to meet the needs of the rural areas and new centres of population such as housing estates.

The mobile clinic was first used in July, 1958, and after a full survey of the County, visited the following centres once every two weeks:—

Dyserth,
Rhuddlan,
Penyffordd and Penymynydd,
Llanfynydd,
Halkyn,
St. Asaph,
Ewloe,
Garden City (Sealand).

At each centre a suitable parking place was found, and also a room where the mothers could wait and purchase welfare foods, both proprietary brands and National Dried Milk and Orange Juice. Before the end of the year voluntary committees had been established at several of the Centres visited by the Mobile Clinic and their members have given valuable help in running the clinic service.

Requests have been received for the mobile clinic to visit several other centres in the County. These requests will be considered and arrangements made for the mobile clinic to visit if the number of infants in the area concerned justify this.

At two of the centres visited arrangements have been made for the clinic towing vehicle to collect mothers and children from outlying villages and hamlets. This facility will be extended when necessary at other centres.

A Doctor and Health Visitor are in attendance at each session and the clinic provides a "general purpose" session at each visit. This means that babies and toddlers are seen in the main, but expectant mothers, school children, medical examination of staff, and immunisation and vaccination are also done at each session. During the latter part of the year Polio-myelitis vaccine was carried in the clinic in a special thermos flask and in this way was available to all children and young persons and expectant mothers without them having to travel to one of the more distant fixed clinics for polio vaccination.

This is the first General Purpose Mobile Clinic operating in Wales. It has aroused a great deal of interest and has been inspected by members of other Welsh Authorities. I now understand that other authorities propose to purchase mobile clinics for use in the rural areas. In September, 1958, the B.B.C. made a short film of the clinic whilst in use at Halkyn, and this was later shown on the B.B.C. television programme.

In addition to the work of the mobile clinic, clinics were held at nineteen other centres in the County and as will be seen the attendances (which include those at Mobile Clinic Centres) again increased in 1958 to a total of 33.909 (see Tables 10 (b) and 10 (c)).

These centres are open weekly and a doctor attends every two weeks and the Health Visitor weekly. Child Welfare Centres continue to play an important part in improving the health of babies and toddlers. Although each family now has a general practitioner, he often has not got the time to undertake regular medical supervision which each child needs, and the regular teaching in child care required by many mothers. The Child Welfare Centre offers opportunities for (1) education in child care, and (2) regular supervision of the health and development of the individual child.

Health Visitors continue to do valuable health education work at clinics, and they were helped in that work during the year by Miss Gray, Superintendent Health Visitor, Mr. Lewis, County Public Health Inspector, and Miss Rogers, Part-time Health Education Officer.

Each centre has its own voluntary committee and as I have already mentioned members of these committees attend at each opening, and give valuable help in the running of the clinic.

In 1957 Dr. M. M. McLean, the Consultant Paediatrician to the Clwyd and Deeside Hospital Management Committee agreed to hold Consultative Infant Welfare Clinics at our premises at Mold, Holywell, Rhyl and Shotton. These clinics have served a very useful purpose and have been of value to mothers, our staff and Dr. McLean. It was found towards the end of 1958 that the clinics at Rhyl and Mold were duplicating similar clinics held at the local hospitals and these were discontinued. Consultative Clinics continue to be held at Holywell and Shotton, these continue to serve a useful purpose and are particularly useful for Dr. McLean to follow up her own cases who have been treated at hospital or as out-patients.

Tables 10 (b) and 10 (c) give details of the number of children attending the various Child Welfare Centres.

Care of Premature Infants—During the year under review, the number of domiciliary premature live births was 37, and the number of premature live births in private nursing homes was nil, a total of 37.

Of the 37 births at home, 32 were nursed entirely at home, and 5 were transferred to hospital. Of the 32 nursed at home, 30 survived 28 days and one died within 24 hours of birth. Of the 5 who were born at home and were transferred to hospital, two survived 28 days. There is no special domiciliary provision 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 :	1951	1952	1953	1954	1955	1956	1957	1958
Number of Registered Live Births ...		2381	2303	2289	2215	2154	2310	2294	2389
Children who attended during the year and who, at the end of the year, were :—									
(a) Under 1 year of age ...		1481	1378	1411	1434	1813	1522	1661	1623
(b) Between 1-5 years ...		2143	2262	2269	2318	2313	2275	2359	2517
Total attendances ...		28491	28846	29941	29181	29166	32505	33179	33240

Table 10 (b).
CHILD WELFARE CENTRES—SUMMARY OF ATTENDANCES, 1958.
(Excluding Mobile Clinic—see Table 10 (c)).

Description.	Bagillt	Bodelwyddan	Broughton	Buckley	Gaerwyle	Gaerwys	Connah'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	52	50	52	24	51	49	50	50	49	50	52	23	24	50	52	23	52	51	40	918
2. Number of children who first attended during the year and who at their first attendance were under 1 year of age ...	54	42	62	122	64	30	166	209	60	139	37	158	191	27	67	149	298	53	70	259	68	2325
3. Number of children who attended during the year and were born in :—																						
1958 ...	50	34	50	106	56	27	129	109	52	101	31	133	146	25	42	79	154	33	58	163	45	1623
1957 ...	31	30	8	95	54	25	76	130	54	179	37	79	126	12	49	75	140	34	12	101	25	1372
1956-53 ...	56	37	13	20	42	26	42	84	42	104	31	88	112	17	64	97	94	3	19	134	20	1145
4. Total number of children who attended during the year	137	101	71	221	152	78	247	323	148	384	99	300	384	54	155	251	388	70	89	398	90	4140
5. Number of attendances during the year made by children who at date of attendance were :—																						
(a) Under 1 year ...	960	430	1051	1693	1093	131	1760	1867	1097	1184	612	1468	1877	239	449	1395	2218	390	1086	1897	430	23327
(b) 1 year but under 2 years	183	133	308	291	197	57	403	390	112	429	142	423	472	37	179	394	356	99	280	332	96	5313
(c) 2 years but under 5 years	119	112	406	126	100	49	293	115	101	217	93	233	498	35	272	496	238	27	414	557	99	4600
6. Total attendances during the year	1262	675	1765	2110	1390	237	2456	2372	1310	1830	847	2124	2847	311	900	2285	2812	516	1780	2786	625	33240

N.B.—Statistics relating to the Mobile Clinic appear in Table 10 (c).

Table 10 (c).

MOBILE (CHILD WELFARE) CLINICS, 1958.

Description.	Dyserth.	Ewloe.	Halkyn.	Llanfynydd.	Penyffordd.	Sealand.	TOTALS.
Number of Sessions	9	10	10	8	9	7	53
Number of children who first attended during the year and who at their first attendance were under 1 year of age	16	17	33	3	21	24	114
Number of children who attended during the year and were born in :—							
1958	15	14	30	3	17	23	102
1957	10	9	18	3	14	4	58
1956-53	6	9	38	1	9	4	67
Total number of children who attended during the year	31	32	86	7	40	31	227
Number of attendances during the year by children who at date of attendance were :—							
(a) Under 1 year	85	81	90	9	77	52	394
(b) 1 year but under 2 years	13	22	38	10	24	13	120
(c) 2 years but under 5 years	14	29	82	1	20	9	155
Total attendances during the year	112	132	210	20	121	74	669

Statistics relating to the fixed Child Welfare Clinics are given in Table 10 (b).

NOTE—St. Asaph and Rhuddlan Clinics were transferred to the Mobile Clinic later owing to unsatisfactory premises. Statistics in respect of these two Clinics, however, appear in Table 10 (b).

WELFARE FOOD SERVICE.

The distribution of Welfare Foods (National Dried Milk, Cod Liver Oil, A. and D. Vitamin Tablets, and Orange Juice) has again been carried out successfully during the year with the continued co-operation of the W.V.S., W.I., Welfare Centre Voluntary Committees and Village Shopkeepers.

DISTRIBUTION CENTRES.

During the course of the year four centres were closed. These were at Mynydd Isa, Caerwys, Pentre Halkyn, Cilfan (Flint). The Cilfan Centre was amalgamated with the centre at the Borough Grove Clinic; whilst at Caerwys Welfare Foods continue to be distributed at the Clinic. Mr. Morris Jones of the Post Office, Caerwys, and Mr. Roberts of the Post Office Stores, Pentre Halkyn, were both forced to give up their valuable work because of pressure of other duties. The Mobile Clinic, however, visits Halkyn and mothers from the Pentre Halkyn area are picked up by the ambulance. A centre is also situated at the Old Post Office, Halkyn.

A new centre was opened at Gronant where Mrs. Bancroft has kindly taken over the distribution of foods at the Sunny Sands Store, Shore Road, Gronant. Distribution also commenced at five new clinics, four of which are visited by the Mobile Clinic, namely, Penyffordd, Ewloe, Dyserth, and Halkyn. The other clinic is at Mostyn.

The total number of centres is thus 54, and these can be classified as follows :—

Clinics	...	...	...	25
W.V.S.	...	...	...	4
Shops	...	...	...	18
Private Households	...	...	...	6
Hospitals	...	...	...	1
Total				54

STORAGE DEPOTS.

These are located at Fronfraith, Russell Road, Rhyl, and at 40, High Street, Mold. The Administrative Office is also at the latter address.

SUPPLIES.

Supplies are still ordered from Messrs. S.P.D. Ltd., Liverpool, and Messrs. Aber Carriers Ltd., Welshpool, both 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	...	1
Shops	...	...	...	3	...	10
Private Households	...	...	...	—	...	2
Hospitals	...	...	...	—	...	1
				6		16

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

			Rhyl Depot.		Mold Depot.
Clinics	...	...	6	...	17
Shops	...	...	1	...	4
W.V.S.	...	...	1	...	2
Private Households	...	...	—	...	3
			8		26

TRANSPORT.

During the first six months of the year deliveries were made from the Authority's Storage Depots by means of hired transport, but after the purchase of the Mobile Clinic deliveries are made at fortnightly intervals by the towing vehicle. Any emergency requirements are delivered by the Welfare Foods Clerk with his private car.

FOODS DISTRIBUTED.

Issues to beneficiaries, and losses through breakages, etc., during the year were as follows :—

		National Dried Milk.		Cod Liver Oil.		Vitamin Tablets.		Orange Juice.
Issued against coupons	...	40136	...	7902	...	5140	...	50696
Issued to Hospitals	...	590	...	—	...	—	...	24
Issued to Day Nurseries	...	—	...	6	...	—	...	72
Issued at 4/- per tin	...	520	...	—	...	—	...	—
		41246		7908		5140		50792
Out of date, damaged, etc., and returned to M.A.F.F.	...	85	...	—	...	—	...	—
Sent for analysis	...	3	...	—	...	—	...	—
Losses through breakages, etc.	...	—	...	3	...	2	...	257
Total	...	41334		7911		5142		51049

SUMMARY OF COUPONS AND STAMPS.

	Issues.	Charge.	Amount Due.			Amount Received.				
			s.	d.	£	s.	d.	£	s.	d.
N.D.M.										
(a) By stamps	... 39245	... 2 4	...	...	4578 11 8	...	...	4578 11 8	...	...
(b) Free	... 891	... —	...	...	— — —	...	...	— — —	...	...
(c) Issues at 4/-	... 520	... 4 0	...	...	104 0 0	...	...	104 0 0	...	...
C.L.O.										
Free	... 7902	... —	...	...	— — —	...	...	— — —	...	...
A. & D.										
Free	... 5140	... —	...	...	— — —	...	...	— — —	...	...
O.J.										
(a) By stamps	... 50474	... 5	...	...	1051 10 10	...	...	1051 10 10	...	...
(b) Free	... 222	... —	...	...	— — —	...	...	— — —	...	...
	<u>104394</u>				<u>£5734 2 6</u>			<u>£5734 2 6</u>		

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 three part-time Dental Officers 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 ..	54	54	54	54
Children under Five ..	198	195	195	151

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	17	72	..	..	80	16	2	4	..
Children under Five	..	10	34	..	325	184	..	..	..

Total number of sessions (i.e., equivalent complete half days devoted to maternity and child welfare patients during the year) ... 30

DOMICILIARY MIDWIFERY.

At the end of the year, the Authority employed six (6) District Midwives and thirty-two (32) District Nurse Midwives. Six (6) Midwives are engaged in private practice, and thirty-two (32) are employed by Hospital Management Committees in the area. All Midwives are supervised by the County Supervisor of Midwives and her Deputy (acting as Non-Medical Supervisors) who, during the year, paid seven hundred and fourteen (714) visits, of which fifty-eight (58) were to hospitals and maternity homes under the control of the Hospital Management Committee, forty-six (46) to pupil Midwives, and five hundred and fifty (550) to Midwives employed by the Authority. At 143 of these visits the Midwife was actually seen 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 1,419 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.

Thirty-eight (38) of the Authority's midwives are qualified to administer gas and air analgesia and are equipped with the necessary apparatus. Thirty-one midwives employed in Homes and Hospitals in the National Health Service were qualified to administer gas and air analgesia.

All the domiciliary midwives are now qualified to give Trilene Analgesia and at present five Trilene Analgesia apparatus are in use. The use of Tri-

lene is slowly increasing each year and midwives find it easy to administer and very effective. Up to this year, the Trilene equipment had to be returned to the makers every six months for servicing—this period has now been extended to twelve months. During 1958 141 mothers had Trilene Analgesia during their confinement.

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.

The Part II Midwifery Training School at St. Asaph Hospital accepted fourteen pupil midwives during the year and nine pupils received district training with the County District Training Midwives.

During the year midwifery equipment used by domiciliary midwives and nurse/midwives was brought up to date and the few remaining leather bags were replaced with modern aluminium bags, with sterilising top and detachable linings. Equipment in bags was also brought up to date and every midwife and nurse/midwife now has adequate up to date equipment. It has been decided to limit the range of drugs used by midwives as it is felt that it is better for midwives to use a small range of essential drugs—rather than a wide range of drugs, with some of doubtful value.

I would like to thank the staff of the Maternity Hospitals at St. Asaph, Wrexham and Chester for the help they give so readily to domiciliary midwives and in particular for the Obstetric Flying Squad Services they operate and which Midwives can call out direct.

Sincere thanks are also due to the General Practitioners in the County for their co-operation, particularly in operating the "Medical Aid" Service.

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, 1958, 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 1958.

	Domiciliary Cases.					Cases in Institutions
	Doctor not booked.		Doctor booked		Totals	
	Doctor present at time of delivery of child (2)	Doctor not present at time of delivery of child (3)	Doctor present at time of delivery of child (either the booked Doctor or another) (4)	Doctor not present at time of delivery of child (5)		
(a) Midwives employed by the Authority	5	24	185	317	(6) 531	(7) ..
(b) Midwives employed by Voluntary Organisations :— (i) Under arrangements with the Local Health Authority in pursuance of Sec. 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	..	..	..	..	..	..
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	..	..	..	..	..	1801
Totals	5	24	185	317	531	1801
(e) Number of cases delivered in institutions						

(c) Number of cases delivered in institutions but attended by domiciliary midwives on discharge from institutions and before the fourteenth day ... 1419

(f) Breast Feeding—Number of domiciliary cases in which the infant was wholly breast fed at the fourteenth day ... 301

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

(1) Domiciliary Midwives employed directly by Local Health Authority ...	(2) 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	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 administered 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	Gas & Air (5)	Tri-lene (6)	Gas & Air (7)	When doctor was not present at time of delivery of child	When doctor was not present at time of delivery of child (10)
(a) Domiciliary Midwives employed directly by Local Health Authority ...	38	33	5	77	10	167	131	67	247
(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 ...	—	—	—	—	—	—	—	—	—
Total	38	33	5	77	10	167	131	67	247

Table 13.

MIDWIVES IN PRACTICE ON 31st DECEMBER, 1958.

			Domiciliary Midwives.	Midwives in Institutions.	Total.
(a)	Midwives employed by the Authority	38	...	—	38
(b)	Midwives employed by Voluntary Organisations :—				
	(i) Under arrangement 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	...	—	32	32
(d)	Midwives in Private Practice (including Midwives employed in Nursing Homes)	...	6	—	6
	Total	...	44	32	76

Table 14.

SUPERVISION OF MIDWIVES.

	Number of Inspections.			
	Routine.	Special.	Other.	Total.
National Health Service Hospitals and Maternity Homes	... 11 ...	10 ...	37 ...	58
County Domiciliary Midwives	... *190 ...	168 ...	189 ...	487
Independent Domiciliary Midwives (as Relief Midwives)	... 13 ...	11 ...	39 ...	63
Pupil Midwives	... 28 ...	6 ...	12 ...	46
Total	... 242	195	277	714

* The Midwife was inspected while actually at work in 143 cases of routine inspections.

Among the reasons for Special Inspections were:—

Ante-Natal (at home or clinic) 19, Stillbirth investigations 8, Puerperal Pyrexia 18, Discharging Eyes 1, Infant Deaths 8, Supervision of Disinfection 21, Other Infections 6, Hospital Discharges 39, Peri-natal Survey 14, Clinics 58, Investigation of Practice 3.

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	... 535	530 ...	13	13 ...	548	543
Institutional	... 1804	1837 ...	41	48 ...	1845	1885
Totals	... 2339	2367	54	61	2393	2428

It will be noted by reference to page 20 that the adjusted figures show that this is 22 live births less, and one stillbirth more, than the total 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 : Maternity.	Others.	Totals.
Homes first registered during year	...	...	—	...	—	...	—
Homes whose registrations were withdrawn during the year	...	...	1	...	—	6	6
Homes on the register at end of year	...	...	5	...	—	53	53

HEALTH VISITING.

At the end of the year 18 Health Visitors were employed on combined Health Visiting and School Nursing duties. Two Tuberculosis Visitors are also employed and four Clinic Nurses on sessional duties. The Superintendent Health Visitor is also Domestic Help Organiser and about half her time is given to her Domestic Help duties. The County have designated one Health Visitor as a Senior Health Visitor and she is based at Rhyl and works in close co-operation with the Superintendent Health Visitor who is based at Mold.

Since 1948 the statutory services provided by the County Council as Local Health Authority under the National Health Service Acts have developed and in the majority of these services the Health Visitor takes a leading part. An example being the Home Help Service which started in

a small way and is now a major service with over 100 Home Helps providing a service for nearly 600 persons a year. All the home visiting of applicants for Home Helps is done by the Health Visitor in her area and so is subsequent contact and follow-up. With changes in the problems presented the work of the Health Visitor has also gradually changed—she is now less of a ‘Health Nurse’ and more of a Family Visitor or General Purpose Social Worker.

In 1956 the Report on Health Visiting was published, and this valuable report gave useful advice on the changing pattern of work and how the Health Visitor should meet the new demands made on her. Emphasis was laid on co-operation with General Practitioners, hospitals, prevention of break-down of families, prevention of mental illness, after care of patients and generally work as a general purpose family visitor.

Health Visitors also act as School Nurses and this work takes up a considerable amount of their time—but school work is valuable and here again the sphere of work of the School Nurse has changed in the last ten years.

This does not mean that all infant visiting should cease or that the Health Visitor should hand over all her clinic duties to another person. But it does mean that the Health Visitor is now concerned with all the family and not infants alone and that the emphasis has moved from child care to family care and family welfare.

The change in the Health Visitors role has been gradual and will continue for some years to come as the needs of the community change. In bringing about this change of role the Authority and the Health Visitor herself have an equally important contribution—the authority in giving “direction” to the new demands and the Health Visitor in adapting herself to meet the changing situation.

The total number of visits paid in 1958 by Health Visitors to expectant mothers was 1,103, to children under one year of age 16,739, to children aged one and under two years 10,772, to children aged two and under five years 13,807. Other visits 8,478. To these figures has to be added 58,124 children seen at school and 2,237 home visits in connection with the school health service.

SUPERINTENDENT HEALTH VISITOR'S REPORT FOR 1958.

Number of visits to Infant Welfare Centres	...	...	...	75
Number of visits to School Clinics	...	...	...	13
Number of visits to Health Visitors to see their records and discuss work generally	...	...	...	134
Number of interviews with Health Visitors and Clinic Nurses at the Office	...	...	...	75
Number of film talks to groups of mothers	...	...	...	6

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 2,585 visits to patients in their homes, and of these 133 were first visits to newly notified cases.

Table 16.

HEALTH VISITING AND TUBERCULOSIS VISITING.

A. Visiting :

HEALTH VISITORS											TUBER- CULOSIS VISITORS
(1)	Number of Children under 5 years of age visited dur- ing year (2)	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 (3)	Total visits (4)	First visits (5)	Total visits (6)	Total visits (7)	Total visits (8)	Total visits (9)	Total visits (10)	Total visits (11)	
(a) L. H. A.	4824	514	1103	2517	16739	10772	13807	95	8473	7517	2585
			56*		836*	541*	691*	6*	425*		399*
(b) Vol. Org.	..	..	..	..	..	..	..	..	..	..	..
			..*		..*	..*	..*	..*	..*		..*

B. Clinics :

- (a) Total number of attendances made by health visitors at local health authority clinic sessions during the year ... 1436
- (b) Total number of attendances by whole-time tuberculosis visitors at chest clinic sessions during the year ... 300

(N.B.—In addition, the Health Visitors and Tuberculosis Visitors paid 2,954 "No access" visits as shown by * above).

HOME NURSING.

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

During the year twelve relief Nurses were employed, five of these were Nurse/Midwives who devoted 32 weeks to Nursing and Midwifery and the remaining seven Nurses devoted 72 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 where 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 39.56 % 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.

REPORT ON WORK OF COUNTY NURSING OFFICER.

Visits paid to Home Nurses.

	Permanent Staff.		Relief Staff.		Total.
Routine Visits	...	176	...	13	189
Special Visits	...	283	...	26	309
Other Visits	...	159	...	16	175
		<hr/>		<hr/>	<hr/>
		618		55	673
		<hr/>		<hr/>	<hr/>

Routine Visits (inspection of records and equipment) during which the number of patients visited with nurses were—951 Medical, 372 Surgical, 1,323 Total.

Other Visits were paid for relief arrangements, equipment maintenance, sickness, etc.

Fourteen lectures were given to pre-nursing students and nursing staff. Also there were 123 interviews with staff, applicants, and special visits to patients.

Nursing Homes—Number in County 5, Number of visits paid to homes for inspection 18, Other reasons 8, Total 26.

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 circumstances.

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 equivalent 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 (—)	— (—)	—	—	4	2
(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) (4)	Whole-time†	Part-time†	Equiv. Whole-time of (6) (7)
(a) Local Health Authority ...	— (—)	2 (2)	1	6 (4)	32 (1)	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	...	...	...	9

Table 18—continued.

3. HOME NURSING.

	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)
(1)												
(a) L.H.A. ...	—	2	1	9	18	9	—	14	7	—	—	—
(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—32 (excluding Superintendent Nursing Officer and Deputy Superintendent Nursing Officer who are also Supervisor and Deputy Supervisor of Midwives, respectively).
- (c) Number of nurses engaged in health visiting, home nursing and midwifery—NIL.
- (d) Others—1 Part-time M. & C.W., 2 Part-time M. & C.W. and Polio Vaccination, and 1 Part-time on Polio Vaccination.

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	...	...	...	2
(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	...	...	...	51
(b) Part-time	...	...	...	23

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	...	...	...	2
(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 of infants vaccinated increased in 1957 to 824 and in 1958 to 1068.

The following table shows the number of vaccinations and re-vaccinations carried out during the year 1958 :—

Table 19 (a).

VACCINATION.

NUMBER OF PERSONS VACCINATED (OR RE-VACCINATED)
DURING THE YEAR 1958.

		Age at date of Vaccination.										
		Under 1.		1.		2 to 4.		5 to 14.		15 or over.		Total.
Number Vaccinated	...	1068	...	73	...	65	...	84	...	107	...	1397
Number Re-vaccinated	...	—	...	—	...	8	...	42	...	294	...	344

More use has been made of the facilities available for vaccination at County clinics, and in 1958 446 children were vaccinated in our own clinics, which is considerably higher than the number in 1957 (352).

These figures are shown in the following table.

Table 19 (b).

NUMBER OF CHILDREN VACCINATED BY HEALTH DEPARTMENT
STAFF DURING THE YEAR 1958.

Age at date of Vaccination.										
Under 1.		1.	2 to 4.		5 to 14.		15 or over.		Total.	
374	...	22	...	23	...	11	...	16	...	446

(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 approxi-

mately 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, 1958.

	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 1958	... 986	... 401	... 102	... 1489
B. Number of children who received a Secondary (Reinforcing) Injection (i.e., subsequently to primary immunisation at an earlier age) during 1958	... —	... 142	... 1068	... 1210

"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, 1958, who had completed a course of Immunisation **at any time before that date** (i.e., at any time since 1st January, 1944).

Age at 31/12/58 i.e., Born in Year	Under 1 1958	1-4 1954-1957	5-9 1949-1953	10-14 1944-1948	Under 15 Total
st complete course of njections (whether primary or booster) :					
1954-1958	... 365	... 4889	... 5265	... 1956	... 12475
1952 or earlier	... —	... —	... 4371	... 11556	... 15933
Estimated mid-year child population	... 2300	... 8800	... 23300	... 34400	
munity Index 100A/C	... 15.86 %	... 55.55 %	... 30.99 %	... 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	...	—	...	—
1958	...	—	...	—

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, 1958.

DISTRICT.	PRIMARY IMMUNISATIONS.				RE-INFORCING INJECTIONS.			
	Under 1.	1-4.	5-14.	Total.	Under 1.	1-4.	5-14.	Total.
Urban :								
Buckley	43	14	3	60	—	—	—	—
Connah's Quay	33	7	—	40	—	—	—	—
Flint (Mun. Boro)	76	31	1	108	—	—	—	—
Holywell	87	29	1	117	—	2	2	4
Mold	35	25	4	64	—	—	4	4
Prestatyn	64	19	1	84	—	7	9	16
Rhyl	119	58	10	187	—	6	37	43
Rural :								
Hawarden	215	85	9	309	—	1	17	18
Holywell	121	60	13	194	—	9	9	18
Maelor	51	9	2	62	—	—	1	1
St. Asaph	79	23	3	105	—	6	10	16
TOTAL URBAN	457	183	20	660	—	15	52	67
TOTAL RURAL	466	177	27	670	—	16	37	53
WHOLE COUNTY	923	360	47	1330	—	31	89	120

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 1958 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 1958 1,189 school children between 13-14 years of age were skin tested at schools, and of these 825 had “negative” findings indicating that they were suitable for B.C.G. vaccination. Of these 825, 763 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 1958.

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	...	...	...	620
(ii) Number found negative	...	...	...	241
(iii) Number vaccinated	...	...	...	283

B. School Children Scheme.

(Circular 22/53 (Wales)).

1.

(i) Number skin tested	...	...	...	1189
(ii) Number found negative	...	...	...	825
(iii) Number vaccinated	...	...	...	763

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

(i) Number skin tested	...	...	...	12
(ii) Number found negative	...	...	...	—
(iii) Number re-vaccinated	...	...	...	—

Poliomyelitis Vaccination—Poliomyelitis Vaccination was continued throughout 1958 and the response of parents of children under 15 years of age was very good. At times vaccine was in short supply but during 1958 12,457 children received two doses of Poliomyelitis vaccine and the number awaiting vaccination at the end of the year was 3,000. Taking the children vaccinated during 1956 and 1957 into account, a total of 16,224 had been vaccinated at the end of 1958—with 1,328 children having had one injection only.

Although some of these children were vaccinated by General Practitioners, by far the greater number were vaccinated at County Clinics and schools. The work entailed a considerable number of extra sessions at clinics and a great deal of additional administrative work at the Health Department.

To augment supplies of British vaccine, American salk vaccine was introduced in 1958 and this increased our administrative difficulties as parents were given the choice of British or American vaccine.

A great deal of publicity was given by the Authority to the value of the Polio vaccine in the Press, by leaflet and by talks, yet only 50 % of those eligible for Polio vaccine (children under 15 years) were registered at the end of August, 1958. The figure for England and Wales being 56 %. The position was slightly better at the end of the year but not markedly better.

In July, 1958, the Ministry of Health announced (Circular 20/58) that the upper age limit would be extended to 25 years of age, that certain priority groups of any age would qualify for vaccination, and that a third injection would be offered to those who had already received two injections.

This meant that the teenage and young adult could register and it also presented difficulties in vaccination as many of these young persons would be in employment and therefore could not attend our morning and afternoon clinics. To meet this difficulty depots of vaccine were established at Rhyl, Holywell, Flint, Mancot and Mold where Polio vaccine was kept in a refrigerator and from which General Practitioners could collect vaccine to vaccinate their own patients at their surgeries. This step was taken after consultation with the General Practitioners and they were kept fully informed of all the steps that were taken to help them in this work.

In addition, all industrial concerns in Flintshire were circularised and an offer made to vaccinate staff under 25 years of age at their place of employment if so desired. Several industrial concerns availed themselves of the offer to vaccinate their staff and the mobile clinic proved very useful for this purpose.

Up to the end of the year the response from those between 15 and 25 years of age has been poor as will be seen from Table 24.

There is now considerable evidence of the efficiency of Polio vaccine, but it is yet too soon to say that we have eliminated the possibility of an epidemic in this country. If a high percentage of those under 25 years of age were vaccinated—over 70 %—then the possibility of an epidemic would be greatly reduced. In this County we are trying to reach this goal—it should not prove too difficult with those under 15 years of age, because they can be vaccinated in schools—it does appear that it is going to be very difficult to reach this percentage of those between 15-25 years of age.

AMBULANCE SERVICE.

The ambulances carried 506 more patients in 1958 than in 1957 ; 4,443 more than in 1956 ; 10,862 more than in 1955 ; and 28,289 more than in 1954.

Hired sitting case cars carried 4,917 patients in 1958—373 more than in 1957 ; 209 more than in 1956 ; but 9,590 fewer than in 1955 ; and 31,884 fewer than in 1954.

Analysis—An analysis of cases conveyed by ambulance, sitting case cars, and patients who travelled by rail, for the year under review, is shown below with comparative figures for the years 1956 and 1957 :—

	1958.	1957.	1956.
Road Accidents	414	351	259
Miscellaneous Accidents	208	150	275
Maternity Cases	829	728	769
Infectious Cases	67	198	114
Emergency Cases	2092	2485	2024
General removals and Clinic cases	37158	35977	32675
Patients removed by rail	30	19	29
Totals	40798	39908	36145

The 40,798 patients referred to for 1958 in the foregoing table were dealt with by the respective Ambulance Control Centres as follows :—

By Fire Service Headquarters, Rhyl (Tel. Rhyl 1848) ... 2,535 calls
By Central Ambulance Control, Holywell (Tel. Holywell 3373) 38,263 calls

Origin of Calls.

Doctors	13,962
Hospitals	25,738
Police	248
Nurses	58
Others	792
Total	40,798

An average of 11.3 emergency calls are dealt with daily.

Ambulances—There were 14 ambulances in service on the 31st December, 1958.

The light ambulance which was purchased in 1956 and was stationed at Bangor-on-Dee was transferred to Hanmer in October, 1958. This vehicle is able to meet all demands in the Maelor area and it has effected a reduction in the cost of the service in that area.

The arrangements with Chester City Ambulance Service to provide an emergency cover for the Saltney area continued, but efforts were made to keep demands on Chester vehicles to a minimum.

Three new vehicles were purchased during the year—two of these with L.D.I. Chassis (Diesel Engine) fitted with "J" type bodies made to our specification. (These replaced two Bedford Ambulances which had been in service since 1949). One of these is stationed at Queensferry and the other at Rhyl.

The third new vehicle was a 25 cwt. Bedford with specially designed body, built by Lomas Limited, for general purposes. This vehicle is used to tow the Mobile Clinic and to carry Welfare Foods to various Centres. When not in use for these purposes it is available for ambulance duty.

The Austin Sheerline Ambulance (the oldest in the service) was re-conditioned in 1958 and is expected to give three to four years further service.

Four diesel-powered vehicles were in service at the end of the year. They are, as was expected, proving to be more economical to operate than the petrol-driven vehicles. It is proposed eventually to standardise vehicles on the Morris L.D.I. Chassis—50 % diesel and 50 % petrol driven.

Tables appear later in this Report showing the work undertaken by the ambulances during 1958 and also comparative figures for 1954-1957.

All the ambulances are fitted with the apparatus necessary to deal with emergencies such as drowning (asphyxia), maternity cases, etc. Also special equipment has been installed at each ambulance station for carrying patients downstairs, where stretchers cannot be used.

Since its installation on 1st April, 1957, radio telephonic communication has continued to enhance the efficiency of the service. Its real value is appreciated when dealing with emergency calls—an average of 11.3 such calls area dealt with daily.

Accommodation—The garage accommodation for the two ambulances stationed at Holywell is still unsatisfactory and I again stress the urgent need for the provision of a new ambulance station in this locality.

Accommodation and facilities for staff at Rhyl, Mold and Flint stations is unsatisfactory and it is difficult to ensure the proper care and maintenance of vehicles and equipment under these conditions.

Fuel—During the year 14,393 gallons of petrol was consumed, the mileage being 267,971, and the average number of miles per gallon was 18.6. In addition, 3,401 gallons of Derv fuel was consumed involving 92,000 miles. Average number of miles per gallon was therefore 27.1.

Most of the petrol is purchased from the County Surveyor's Department and the County Fire Service.

Derv is purchased directly and is stored in specially provided tanks at the respective ambulance stations. We receive full discount under this bulk-buying arrangement.

Tyres—32 new tyres were purchased for the ambulances during the year at a cost of £337/2/3, and 31 re-moulded tyres were obtained at a cost of £164/16/10. Some saving is effected by returning to the manufacturers worn tyres which are found suitable for remoulds.

Mobile Clinic—The Mobile Clinic was delivered in June, 1958, and was put into use in July of that year. As previously mentioned in this Report, the Mobile Clinic is towed from place to place by a specially fitted ambulance.

The clinic held 90 sessions up to 31st December, 1958, and covered 2,504 miles in this connection. In addition, the towing vehicle travelled 1,375 miles for the purpose of delivering welfare foods. This total mileage of 3,879 is additional to that covered by the vehicle in conveying patients.

Personnel—Ambulance service personnel are trained in first aid and are required to attend a refresher course every two years.

The operational staff as at 31st December, 1958, consisted of 15 drivers and 6 attendants—a total of 21.

Drivers and attendants were supplied with uniform which is renewed every 18 months.

Royal Society for the Prevention of Accidents—Ten out of fourteen drivers who entered for the competition arranged by this Society, qualified for Diploma Awards.

The eleven drivers who were successful in the 1957 competition were presented with certificates issued by the Society and the formal presentation was made on the 14th March, 1958, by Alderman J. R. Gilbert, Chairman of the Health (Ambulance) Sub-Committee.

County Efficiency Competition—The Annual Competition was held in Mold on the 18th May, 1958. Five teams competed, namely, from Flint, Holywell, Mold, Queensferry and Rhyl Ambulance Stations.

The Mold team were winners of the County Shield for the second time and qualified to represent the County in the Welsh Regional Competition at Shrewsbury on 29th June, 1958. The County Shield was formally presented to the Mold team—Senior Driver T. E. Bellis and Attendant G. George—by Alderman J. R. Gilbert.

The Regional competition was held at Shrewsbury on the 29th June, 1958. Teams took part from Cardiff, Carmarthenshire, Caernarvonshire, Monmouthshire, Merionethshire and Flintshire. Flintshire team was placed fourth.

National Association of Ambulance Officers—The County Ambulance Officer (who is Chairman) attended two Welsh Regional Meetings of the Association held at Shrewsbury. He was re-elected to the chair for the year 1959—his third term of office.

Alderman J. R. Gilbert, together with the County Ambulance Officer, attended the Conference of the Association held at the County Hall, Westminster, on the 2nd and 3rd October, 1958.

Matters of interest and importance concerning the Ambulance Service were discussed and the meetings were addressed by leading Surgeons and by Officials of the Ministry of Health.

Course—The County Ambulance Officer attended a specialist course on the Diesel Engine at B.M.C. Works, Birmingham, from 8th to 12th September, 1958. He was successful in obtaining a full certificate for the course.

Establishment of the County Ambulance Service—As at 31st December, 1958 :—

Head of the Service—The County Medical Officer of Health.

Ambulance Officer	...	...	...	1
Control Room Attendants (Male)	...	...	...	3
Control Room Attendant (Female)	...	...	...	1
Senior Ambulance Drivers	...	...	...	2
Ambulance Drivers	...	...	...	14
Ambulance (and Mobile Clinic) Drivers	...	...	...	1
Ambulance Attendants	...	...	...	6
Ambulance Driver (part-time), Maelor	...	...	...	1

Enrolments :

Control Room Attendant	...	...	...	1
Relief Ambulance Driver	...	...	...	1
Full-time Ambulance Attendant	...	...	...	1
Relief Ambulance Attendant	...	...	...	1

Resignations :

Control Room Attendant	...	...	...	1
Relief Ambulance Driver	...	...	...	1
Relief Ambulance Attendant	...	...	...	1

Transfers—Ambulance Driver J. F. Johnson was transferred from Queensferry Ambulance Station to Mold Station in July, 1958, to drive the towing vehicle with the Mobile Clinic.

Table 25.

THE FOLLOWING TABLE SHOWS HOW THE 40,822 PATIENTS WERE DEALT WITH BY THE SERVICE, WITH COMPARATIVE FIGURES FOR 1957, 1956 AND 1954.
AMBULANCES.

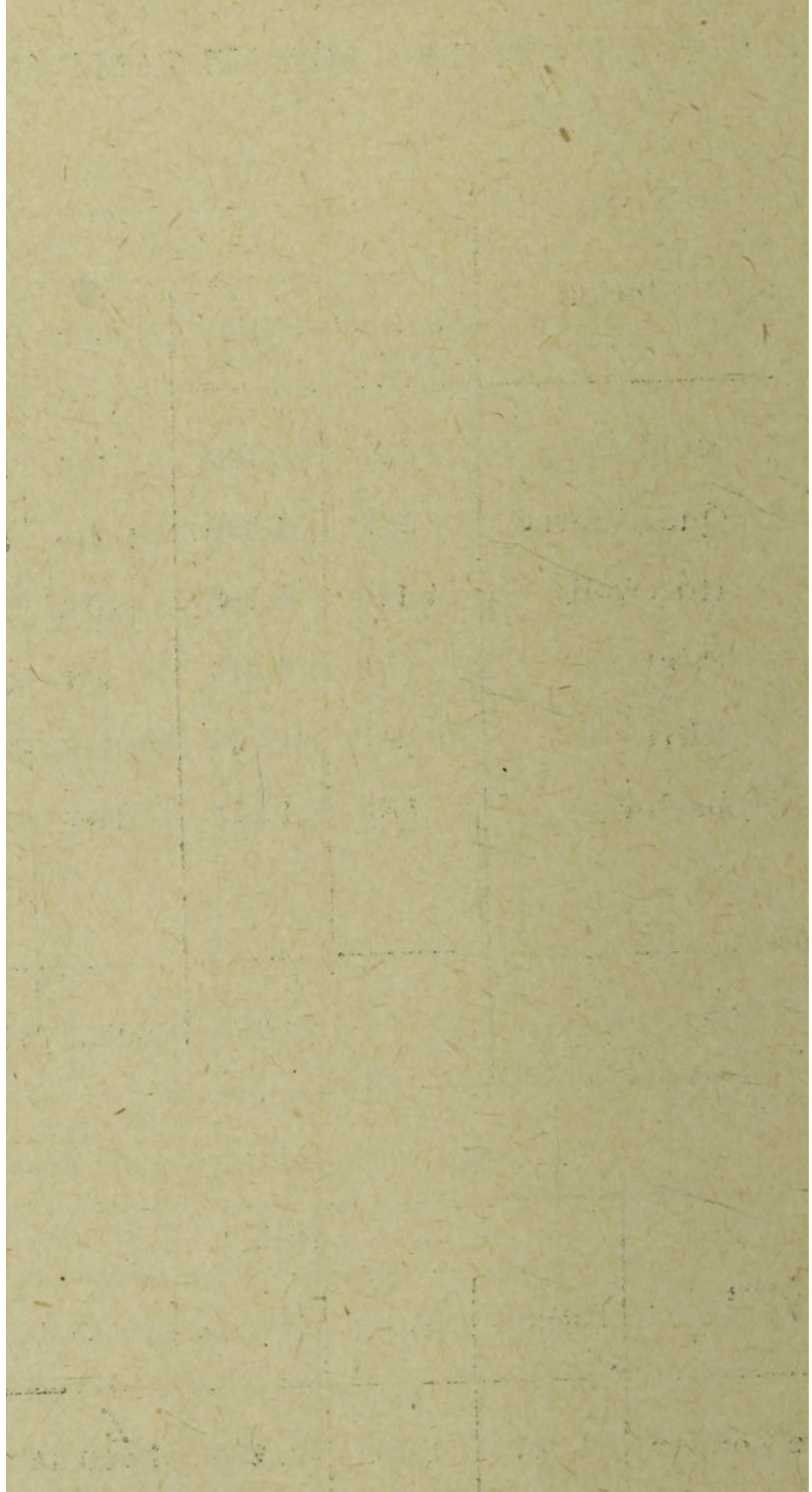
Station	1958				1957				1956				1954			
	Stretcher Cases	Sitting Cases	Journey	Mileage	Stretcher Cases	Sitting Cases	Journeys	Mileage	Stretcher Cases	Sitting Cases	Journeys	Mileage	Stretcher Cases	Sitting Cases	Journeys	Mileage
Mold	1,425	7,160	2,116	86,909	1,319	6,785	2,147	85,497	1,333	6,395	2,279	87,461	4,911	2,651	4,828	114,432
Queensferry	857	4,530	1,240	55,026	841	4,461	1,246	55,745	988	4,346	1,443	62,057				
Holywell	1,142	5,198	1,586	76,598	1,119	5,916	1,649	82,074	1,006	4,949	1,513	72,151				
Flint	473	3,014	696	30,103	644	3,271	750	36,706	587	2,423	826	35,064				
Rhyl	2,741	7,958	2,648	89,539	2,232	7,472	2,650	91,109	2,131	7,014	2,609	91,350				
Maelor	129	1,224	396	17,922	64	1,191	367	16,415	12	224	99	3,942				
TOTAL	6,767	29,084	8,682	356,097	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	1958				1957				1956				1954			
	Patients	Journey	Mileage	Cost	Patients	Journeys	Mileage	Cost	Patients	Journeys	Mileage	Cost	Patients	Journeys	Mileage	Cost
Whole County	4,917	1,881	32,329	£ s. d. 1,650 15 10	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	343,306½	£ s. d. 18,410 10 0

PATIENTS CONVEYED BY RAIL.

1958 ... 30 Patients. 1957 ... 19 Patients. 1956 ... 29 Patients.



The total number of patients conveyed, the number of journeys and mileage covered by County Ambulances, hired sitting case cars and by rail during the year, with comparative figures for the years 1956 and 1957, are shown below :—

Table 26.

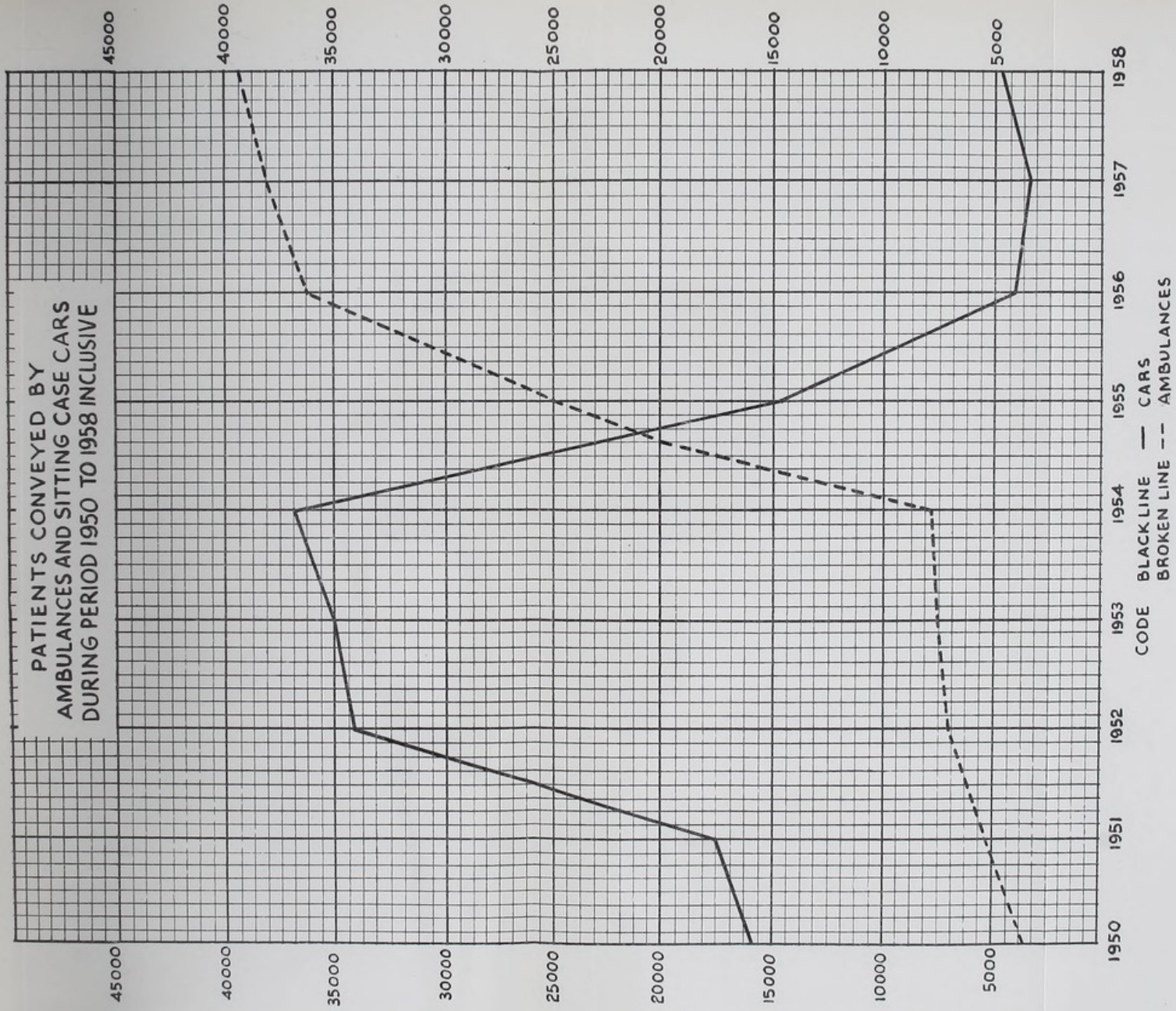
	1958.	1957.	1956.
Total patients	40,798	39,908	36,145
Total number of journeys ...	10,563	10,864	10,712
Total number of miles involved ...	388,426	399,394	393,916
	1958.	1957.	1956.
Average miles per patient	9.7	10.01	10.8
Average patients per journey ...	3.9	3.6	3.3
Average miles per journey ...	36.8	35.7	36.7

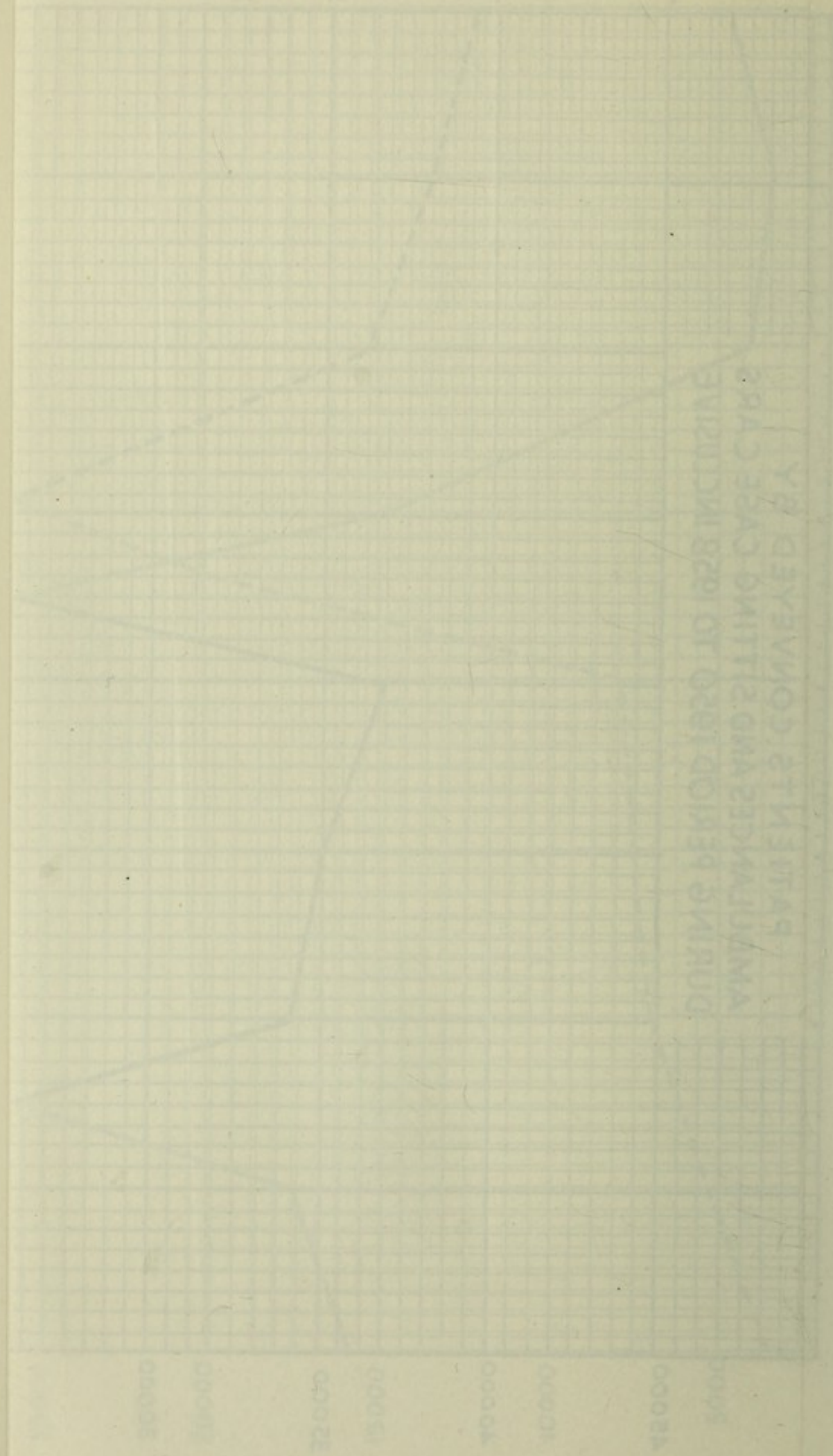
Table 27.

FLINTSHIRE PATIENTS REMOVED BY OTHER AUTHORITIES, 1958.

	Patients.	Miles.	Cost.
Denbighshire	14	246	26 3 0
Shropshire	15	214	20 17 0
Liverpool	1	46	3 1 8
Chester City	120	831	200 0 0
Caernarvonshire	6	145	15 5 9
Total	156	1482	£265 7 5

The total number of Flintshire patients conveyed by these Authorities in 1957 was 254, mileage 3,433, cost £432. In 1956 the corresponding figures were 442 patients, 9,989 miles, cost £854.





During period 1920 to 1928 inclusive
the number of patients completed by
the hospital was 10000

PREVENTION, CARE AND AFTER-CARE.

(b) **Tuberculosis**—The full scope of the services for the tubercular were described in detail in the 1957 Report. These services were continued during 1958.

All Tuberculosis cases on the register were visited regularly by the Tuberculosis Visitors, who gave advice and help on all matters affecting the welfare of patients.

Contacts of new cases were seen and advised to attend a chest clinic for examination and B.C.G. vaccination if thirteen years of age. During the year 122 new cases of Tuberculosis were notified and 626 contacts examined, 283 of these received B.C.G. vaccine. Thanks to the co-operation of the Chest Physician, special "contact clinics" have now been established at Rhyl, Holywell and Shotton.

Grants of milk and other foods were made during the year by the Area Care and Nursing Sub-Committees to 192 cases of tuberculosis at a total cost of £2,952. These grants of milk and other foods continue to meet a real need, particularly in cases of prolonged illness, and they are in addition to any special grants of the National Assistance Board. Grants are only made by the authority if all contacts have been examined and the patient is accepting the treatment recommended by the Chest Physician.

As a step to prevent Tuberculosis, all staff employed by the Authority have a chest x-ray on engagement, this applies to all grades of staff, and during 1958 a total of 147 newly appointed staff had a chest x-ray.

Fresh notification of tuberculosis mainly come from those under 25 years of age and those over 60 years of age. To try and combat the illness in those under 25 years a vigorous B.C.G. campaign of school children is in operation. All school children between 13 and 14 years of age are offered B.C.G. at school, and during 1958 1,189 children were skin tested and 763 were found suitable for, and given, B.C.G. vaccine.

During the year the Semi Static Mass X-Ray Unit visited four centres in the County at intervals of three weeks—Rhyl, Holywell, Shotton and Mold. Good attendances were recorded and General Practitioners made very good use of the Unit by referring cases with chest symptoms.

I would like to record my thanks to the two Tuberculosis Visitors who continued to do excellent work during the year, both in Chest Clinics and on their districts. My sincere thanks are also due to the two Chest Physicians and their staff for their valuable and ever ready help.

(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. Eighteen such persons were assisted in 1958.

During the year the British Red Cross Society and the St. John's Ambulance Brigade continued to operate Medical Loan Depots at eighteen 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 new depots recently opened at the request of the Health Committee operated very efficiently.

LIST OF RED CROSS MEDICAL LOAN DEPOTS.

St. Asaph :

Miss E. A. Davies, Awel-y-Mynydd, Upper Denbigh Road, St. Asaph.

Rhyl :

Miss T. Batten-Jones, 13, King's Avenue, Rhyl. (Tel. Rhyl 1357). OR
Harewood House, Russell Road, Rhyl. (Tel. Rhyl 741).

Prestatyn :

Mrs. Harley, B.R.C.S. Headquarters, Victoria Avenue, Prestatyn.
(Tel. Prestatyn 235).

Mostyn :

Miss Gallagher, Glan-y-Don House, Mostyn.

Holywell :

Mrs. Roberts, Cartrefle, Saithaelwyd Park, Holywell.
(Tel. Holywell 3278).

Flint :

Mrs. Watkin Williams, 3, Chester Street, Flint. (Tel. Flint 3233).

Hawarden :

Mrs. Bonnewell, Wold House, Hawarden. (Tel. Hawarden 2145).

Connah's Quay :

Mrs. L. Jones, B.R.C.S. Headquarters, 55, High Street, Connah's Quay.
(Tel. Flint 3388).

Buckley :

Miss K. Davies, Bryn Hyfryd, Pren Hill, Buckley.

Penyffordd :

Mrs. Hawley, Fir Close, Penymynydd. (Tel. Buckley 274).

Whitford :

Mrs. Pugh, The Vicarage, Whitford. (Tel. Whitford 266).

Nannerch :

Mrs. Jones, Police House, Nannerch. (Tel. Hendre 333).

Tremeirchion :

Mrs. Edwin Evans, Bryn Awelon, Tremeirchion.

Rhuddlan :

Mrs. Roberts, Trem-y-Foel, Princes Park, Rhuddlan.
(Tel. Rhuddlan 375).

Greenfield :

Mrs. Englands, The Old Liberal Club Room, Greenfield.
(Tel. Holywell 2296).

Dyserth :

Mrs. Drummond, Trawscoed, High Street, Dyserth. (Tel. Dyserth 380).

Cwm :

Miss Betts, Craig Las, Cwm, Dyserth.

Mold :

Mrs. Davies-Cooke. (Tel. Mold 34).

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 give 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.

During the year a scheme for providing a Welfare Service for the handicapped was prepared at the request of the Health Committee. This scheme, though comprehensive, was devised to start in a modest way and develop as the needs became apparent. The scheme had not been submitted to the Welsh Board of Health at the time of writing this Report.

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 such patients in 1958. 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 1958 (547) 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 69.65 % 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 receiving the services of a Home Help contribute towards the cost of the service on a scale approved by the County Council. During 1958 this scale of recovery of charges was brought up to date and simplified. This was necessary for two reasons, (a) to bring the scale into line with that used by the National Assistance Board, and (b) to reduce office work as the majority of applicants are elderly and, therefore, receiving help free or at a nominal charge.

The scale is related to net income and an outline of the new scale is given below :—

* Amount of Net Assessable Income.				Rate per hour.
Up to and including 10/-	...	...	...	3d.
Up to and including £1/0/0	...	...	...	6d.
Up to and including £1/10/0	...	...	...	9d.

Progressing to :

Up to and including £7/10/0	...	...	...	3/9d.
				(i.e., full charge)

(* The net income is the balance after deducting from gross income various approved allowances in accordance with the scale, e.g., rates, rent, allowances for dependant children, etc., etc.).

During 1958 a scheme of providing evening help was successfully introduced and night help was also provided in a few cases where relatives or friends were unable to meet the needs.

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)	43
Tuberculosis	5
Chronic Sick (including aged and infirm)	381
Medical	90
Surgical	19
Special	9
	<hr/>
	547
	<hr/>
Number of first visits to Patients	235
Number of re-visits to Patients	523
	<hr/>
	758
	<hr/>
Number of prospective applicants interviewed at office ...	19
Number of prospective applicants interviewed at home ...	39

2. Number of Domestic Helps employed at 31st December, 1958:—

(a) Full-time	2
(b) Part-time	103
	<hr/>
	105
	<hr/>
Number of prospective Helpers interviewed	58
Number of Domestic Help Organisers employed	1*
Number of Meetings arranged for Home Helps	7
Number of talks given to Home Helpers	5
Number of first visits to Helpers	44
Number of re-visits to Helpers	637

* Part-time.

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

Eastern 26,907.	Central 21,871.	Western 53,328.
Total 102,106.		

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.

Valuable health education work, particularly in schools, was also done by the two part-time Health Education Officers—Miss E. Weston, the Senior Health Visitor, and Miss J. S. Rogers.

During the year the department obtained a sound film projector due to the generosity of the Clinic Voluntary Committees, and this was used extensively for health education work as well as the film strip and slide projector already in use.

The Rhyl Branch of the "Inner Wheel" also, in January, 1958, generously presented to the Clinic a film strip and slide projector.

During November, 1958, a campaign against home accidents was held and wide publicity given to methods to reduce these accidents particularly burns and scalds. This campaign was very excellently organised by Dr. E. H. Annels, the Deputy County Medical Officer, and culminated in a lecture to over 400 persons representing all bodies interested in this work at the Kelsterton Technical College and given by Mr. M. Tempest, F.R.C.S., a Plastic Surgeon at St. Lawrence Hospital, Chepstow.

The Chief Fire Officer, Mr. J. W. H. Strange, arranged a very excellent demonstration of common causes of fire and accidents in the home, shop and factory at Kelsterton on the evening of the lecture by Mr. Tempest, and this was a source of great interest to those present.

During the year a great deal of publicity material was prepared in the department and purchased from outside sources. All this material was displayed at clinics and made available to parents on their visits to the clinics.

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.

During the year close liaison was maintained between the Psychiatric Social Worker of the North Wales Mental Hospital and the Health Visitors and Duly Authorised Officers. Patients willing to receive after-care on discharge from hospital are seen by a Psychiatric Social Worker and followed up until the patient can manage without the skilled help of a Psychiatric Social Worker. At this stage the patient will continue under the supervision of the Health Visitor or Duly Authorised Officer if supervision is still necessary. Any deterioration in the patient's condition being reported to the Psychiatric Social Workers concerned. This arrangement has worked very well and is of advantage to the Psychiatric Social Worker and the Health Visitor and Duly Authorised Officer. I would like to thank Dr. J. H. O. Roberts and Mrs. Iolo Jones, the Senior Psychiatric Social Worker of the North Wales Hospital for Nervous and Mental Disorders for their willing co-operation in this scheme and in all matters relating to the community care of the mentally ill.

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 54 patients who were certified under Section 16 of the Lunacy Act and admitted to hospital, and with 114 patients who were admitted under urgency orders (Section 20 of the Lunacy Act), while 311 patients were admitted to mental hospitals as voluntary patients.

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 seven males under 16 years of age, eight females under 16 years of age, and four males over 16 years of age and nine females over 16 years of age were so reported. Seven males and eight females were placed under statutory supervision, and one male and five females were admitted to hospitals.

In addition, three males and four females 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 register at 1st January, 1959, considered to be in urgent need of institutional care were six females aged under 16 years and two males and one female 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 four defectives under guardianship—two males and two females aged over 16 years.

Four males and two females under 16 years of age and three males and one female over sixteen years of age were admitted to National Health Service Hospitals for "short-term" care. Also one male and one female aged under 16 years 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, continued to do excellent work during the year. A great deal of work was done by Dr. E. H. Annels and Miss D. E. Powell, the Centre

Supervisor, in developing the centre and in selecting suitable cases. In January, 1958, the centre had nineteen persons attending daily, this number had increased by December to twenty-seven (three of whom were Denbighshire patients).

Miss Powell is assisted by two other staff and the caretaker also helps with milk, meals and with the reception and departure of those attending.

Miss M. E. Hughes, a member of the staff, was granted leave on full pay in September to attend the National Association for Mental Health Course for teachers of the mentally handicapped.

Improvements were carried out to the grounds and premises at Fronfraith during the year but due to the extra numbers in attendance serious consideration will soon have to be given to providing an assembly hall and additional classrooms.

The centre has an active branch of the Association of Parents of the Mentally Handicapped and Miss Powell has done good work in the establishment of this association and in fostering the welfare of the mentally defective child in general.

Children from Eastern Flintshire continue as in the past to attend each day at the Chester City Occupation Centre, and at the end of the year twenty-one children were attending.

In January, 1958, Circular 2/58 was received from the Minister of Health dealing with the welfare of mental defectives and making recommendations concerning hospital care and community care. The Ministry recommended that when possible defectives should be admitted to Mental Deficiency Hospitals without certification—"Informal" procedure. Also that all defectives in hospitals under order should be reviewed to ascertain if the order could be discharged and the defective allowed to remain in hospital on an informal basis or allowed to return home or to suitable accommodation outside hospital. Following the receipt of this Circular (2/58) a meeting was arranged with Medical Officers of the two Mental Deficiency Hospitals in the County and future policy relating to admissions and discharges agreed upon.

During the year a great deal of interest was aroused by pilot schemes for treating cases of mental illness outside mental hospitals. These schemes were carried out at York and Worthing and reported on fully in the Medical Press. The basis of the scheme is that patients are seen at a Mental Health Centre, treated as out patients if possible and given adequate after care. These schemes shift the emphasis from hospital care to community care and bring the treatment of mental illness in line with the treatment of other illnesses, where out-patient facilities play a prominent part.

For some years now there has been a gradual change in our attitude to mental illness and mental deficiency. This culminated in the establishment of a Royal Commission which reported in 1957. The Government has in principal adopted the report of the Royal Commission and we can expect in the near future a change in the law relating to mental illness and mental deficiency and what is more important a change in attitude towards the treatment of mental illness and the care and after care of patients.

Table 29.

A.—LUNACY AND MENTAL TREATMENT ACTS.

Certified Patients	...	...	...	...	54
Urgency Cases	...	...	...	...	114
Temporary Patients	...	...	...	...	—
Voluntary Patients	...	...	...	...	311

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 1958 :							
(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	...	...	...	5	7	—	—
(ii) On leaving special schools	...	...	...	—	1	—	—
(iii) On leaving ordinary schools	...	...	...	2	—	—	—
(2) Police or by Courts	...	...	...	—	—	—	—
(3) Other sources	...	...	...	—	—	1	5
TOTAL of 1 (a)				7	8	1	5
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground							
				—	—	3	4
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)							
				—	—	—	—

Table 29—continued.

	Under age 16.		Aged 16 and over.	
	M.	F.	M.	F.
(d) Cases reported in which action was incomplete at 31st December, 1958, and are thus excluded from (a) or (b)	—	—	—	—
TOTAL of 1 (a)-(d) inc. ...	7	8	4	9

Disposal of cases reported during 1958 :

(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	7	7	—	1
(ii) Placed under Guardianship	—	—	—	—
(iii) Taken to "Places of Safety"	—	—	—	—
(iv) Admitted to Hospitals	—	1	1	4
TOTAL of 2 (a) ...	7	8	1	5
(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	—	—	3	4
(ii) Action unnecessary	—	—	—	—
TOTAL of 2 (b) ...	—	—	3	4
(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. ...	7	8	4	9

**Number of mental defectives for whom care was arranged
by the local health authority under Circular 5/52 during
1958 and admitted to**

a) National Health Service hospitals	4	2	3	1
b) Elsewhere	—	1	—	1
TOTAL ...	4	3	3	2

Table 29—continued.

					Under age 16.		Aged 16 and over	
					M.	F.	M.	F.
4. Total cases on Authority's Registers at 31/12/58 :								
(i) Under Statutory Supervision	...	...	...	...	23	22	49	50
(ii) Under Guardianship (including patients on licence)	...	...	...	...	—	—	2	2
(iii) In "Places of Safety"	...	...	...	...	—	—	—	—
(iv) In Hospitals (including patients on licence)	...	...	...	...	13	4	58	67
TOTAL of 4 (i)-(iv) inc.					36	26	109	119
(v) Under Voluntary Supervision	...	...	...	...	—	—	14	15
TOTAL of 4 (i)-(v) inc.					36	26	123	134
5. Number of defectives under Guardianship on 31st December, 1958, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Included in 4 (ii))								
					—	—	—	—
6. Classification of defectives in the Community on 31/12/58 (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	...	...	...	...	—	3	—	—
(ii) ambulant low grade cases	...	...	...	...	—	3	—	—
(iii) medium grade cases	...	...	...	...	—	—	1	—
(iv) high grade cases	...	...	...	...	—	—	1	—
TOTAL urgent cases					—	6	2	—
(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					—	6	4	—

Table 29—continued.

						Under age 16.		Aged 16 and over.	
						M.	F.	M.	F.
(b) Of the cases included in items 4 (i), (ii) and (v), number considered suitable for :—									
(i) occupation centre	...	...	...	...	...	21	18	18	24
(ii) industrial centre	...	...	...	...	...	—	—	12	10
(iii) home training	...	...	...	...	...	1	—	3	3
TOTAL of 6 (b)						22	18	33	37
(c) Of the cases included in 6 (b), number receiving training on 31/12/58 :—									
(i) In occupation centre (including voluntary centres)	...	...	...	...	...	17	9	8	9
(ii) In industrial centre	...	...	...	...	...	—	—	—	—
(iii) From a home teacher in groups	...	...	...	...	...	—	—	—	—
(iv) From a home teacher at home (not in groups)	...	...	...	...	...	—	—	—	—
TOTAL of 6 (c)						17	9	8	9

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 of 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	...	...	...	...	42
Enteric Fever (Typhoid)	...	...	...	...	—
Erysipelas	...	...	...	...	8
Food Poisoning	...	...	...	...	5
Measles	...	...	...	...	530
Meningococcal Infections	...	...	...	...	6
Ophthalmia Neonatorum	...	...	...	...	1
Paratyphoid	...	...	...	...	—
Acute-encephalitis—Infective	...	...	...	...	1
Post-infective	...	...	...	...	—
Acute Poliomyelitis—Paralytic	...	...	...	...	3
Non-paralytic	...	...	...	...	2
Pneumonia	...	...	...	...	59
Puerperal Pyrexia	...	...	...	...	1
Scarlet Fever	...	...	...	...	101
Whooping Cough	...	...	...	...	116
Malaria (contracted abroad)	...	...	...	...	2
					—
				Total	877
					—

During the year very few cases of the more serious infectious illnesses were notified. It will be noted that only five cases of Poliomyelitis were notified and the incidence of Poliomyelitis in England and Wales remained low in 1958.

There were no cases of Typhoid or Diphtheria notified.

Cases of Measles remained high, though lower than in 1957. Most of the cases were mild and there were no deaths or serious complications.

Cases of Scarlet Fever and Whooping Cough were also high during 1958—but again there were no deaths.

Notified cases of Dysentery and Food Poisoning for the past four years are given below. It is very difficult to assess the number of cases of Dysentery and Food Poisoning as I am quite certain that all cases are not notified.

	1955.	1956.	1957.	1958.
Dysentery	19	33	9	42
Food Poisoning	31	64	7	5

The law relating to the notification of Infectious Diseases in my opinion needs amendment as many doctors are not notifying infectious illness now. Many cases are mild, receive treatment at home, and present no public health problem. In many cases concurrent and terminal disinfection is not carried out or performed by the householder. This position presents no problem with minor conditions such as measles, mumps, chickenpox, etc., but may well have serious consequences with the major illnesses such as food poisoning or poliomyelitis.

The law should be changed and doctors requested to notify the major infections as they occur and send in a weekly list of all other infections or simply notify initial cases in their practice.

I have for some years now selected four group practices in the County to act as "spotters" and these doctors report to me all outbreaks of infections in their area. In this way I am able to ascertain what infectious illnesses are prevalent in the County at any given time.

During the year the one remaining infectious diseases hospital in the County ceased to exist as a Fever Hospital and became a hospital for the aged. Infectious cases requiring hospital treatment are now admitted to an Infectious Diseases Hospital at Colwyn Bay, Wrexham or Clatterbridge.

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	1	..	3	7	7	8	12	11	8	3	61	
Respiratory, Females	2	..	4	8	7	4	8	2	3	..	38	
Non-Respiratory, Males	2	..	1	2	1	3	..	..	..	9	
Non-Respiratory, Females	1	1	4	1	1	2	3	1	..	..	..	14	

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, 1958.

		Males.	Females.	Total.
Respiratory Tuberculosis	... ..	9	2	11
Non-Respiratory Tuberculosis	... ..	—	1	1
		—	—	—
All forms	... ..	9	3	12
		—	—	—

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, for 1957 0.17, and for 1958 it was 0.08.

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.

Year.			Population.	Mortality Rate per 1000 Population.	
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
1958	...	...	146600	...	0.08

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
			1958	...	.83

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 :—

Table 34.

CASES NOTIFIED.

	1940	1950	1954	1955	1956	1957	1958
Table 1 (Flintshire) :							
Respiratory T.B. ...	135	132	128	125	120	98	99
Non-Respiratory T.B. ...	44	34	29	25	23	34	23
Table 2 (Flintshire) :							
Notification per 1000							
population ...	1.28	1.14	1.08	1.03	.98	.89	.83
Table 2 (England and Wales) :							
Notification per 1000							(not available)
population ...	1.16	1.18	0.95	0.89	0.79	0.72	able)
Table 3 (Flintshire) :							
Death rate per 1000 of the							
population, Respiratory							
and Non-Respiratory ...	0.46	0.40	0.21	0.23	0.16	0.17	0.08
Table 3 (England and Wales) :							
Death rate per 1000 of the							(not available)
population, Respiratory							
and Non-Respiratory ...	0.99	0.59	0.28	0.15	0.12	0.11	able)

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 342 out of 411 (83.4 %) contacts were examined, which is a higher rate of examination than ever previously achieved. (See Table 35).

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 1958.

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 36 to 39 give the results of the findings for the whole County.

Table 36.

SURVEY OF GENERAL POPULATION AND SCHOOL CHILDREN BY MASS RADIOGRAPHY UNIT "B" DURING 1958.

AREA.	Number of Persons Examined.			Numbers Found Abnormal.									Total.		
				Definite Pulmonary Tuberculosis.			Needing further observations for Pulmonary Tuberculosis.			Other Abnormalities.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
CONNAH'S QUAY ...	94	158	252	—	—	—	1	—	1	6	7	13	7	7	14
TECHNICAL COLLEGE, CONNAH'S QUAY ...	522	127	649	—	—	—	2	—	2	14	4	18	16	4	20
HAWARDEN ...	220	209	429	—	—	—	1	2	3	1	—	1	2	2	4
MAELOR ...	302	309	611	—	—	—	2	2	4	10	10	20	12	12	24
SALTNEY ...	44	74	118	—	—	—	—	—	—	1	—	1	1	—	1
TOTAL ...	1182	877	2059	—	—	—	6	4	10	32	21	53	38	25	63

Table 37.

SURVEY OF FACTORIES, WORKS AND INSTITUTIONS

VISITED BY MASS RADIOGRAPHY UNIT "B" DURING 1958.

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.			
Chance Pilkington Optical Works, St. Asaph ... North Wales Paper Company, Oakenholt ... Power Station, Connah's Quay ... Maintenance Unit, R.A.F., Hawarden ...	82	43	125	—	—	—	1	—	1	1	—	1	2	—	2
	53	34	87	—	—	—	1	—	1	—	—	—	1	—	1
	149	8	157	—	—	—	1	—	1	4	—	4	5	—	5
	228	16	244	—	—	—	2	—	2	1	—	1	3	—	3
TOTAL	512	101	613	—	—	—	5	—	5	6	—	6	11	—	11

Table 38.

SURVEY OF GENERAL POPULATION VISITED BY MASS
RADIOGRAPHY UNIT "G" DURING 1958.

Fixed Location.	Total No. Examined.	No. of new cases of P.T. discovered.	Rate per 1000.
Holywell	396	1	2.53
Mold	908	2	2.20
Rhyl	1095	1	.91
Shotton	532	1	1.88

Table 39.

SURVEY OF FACTORIES VISITED BY MASS RADIOGRAPHY
UNIT DURING 1958.

	Total No. Examined.	No. of new cases of P.T. discovered.	Rate per 1000.
Abbey Paper Mills, Holywell	134	—	—
Castle Fire Brick Co., Mold	179	1	5.59

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

Syphilis	...	...	...	5
Gonorrhoea	...	...	...	25
Other conditions	...	...	...	78
				<hr/>
		Total	...	108
				<hr/>

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.

The William and John Jones Home, now known as Y Gorlan, was acquired in October, 1958, and surplus furniture and gardening machinery were purchased for £700. The accommodation will eventually be adapted to take 92 residents comprising 36 males and 56 females, included in this figure will be a sick bay to accommodate 8 males and 10 females, also temporary accommodation to take one or two homeless families. It is expected that this Home will be ready in the Autumn of 1959.

By arrangement with the Clwyd and Deeside Hospital Management Committee, four temporary female beds were allocated at Part III Accommodation, St. Asaph.

The total accommodation provided during the year was as follows:—

Homes for the Aged :

Park House	...	20 Female.	
Carr Holm	...	24 Female.	
The Lawn	...	56 Male	
Hafan Glyd	...	40 Male & Female	(NOTE—Due to re-arrangement with resident staff the accommodation at this Home has now been fixed at 40).

Joint User Arrangements :

Holywell	...	36 (Males 18, Females 18).	
St. Asaph	...	30 Females.	(An additional four beds were allocated in June, 1958).
TOTAL	...	206	

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 18 persons chargeable (31st December, 1958).

The number of persons chargeable in Homes outside the County on 31st December, 1958, were as follows:—

			M.	F.
Other Authorities Homes	...	...	5	3
Homes for Handicapped Persons	...	...	5	3
Blind Homes	...	...	3	3
Voluntary Homes	...	...	2	1
Total	...		25	

Although the available accommodation is slightly more this year than during the previous year there has been an acute shortage of male accommodation during the year and urgent admissions were only dealt with by vigilance and the boarding out of selected cases from Part III Accommodation, Holywell. By the end of the year the waiting list had been reduced to 5 males and 6 females, this is due to the amount of supervision afforded to elderly persons in the community and to the boarding out of suitable persons from time to time. The number of persons boarded out during the year were 8 males and 12 females, of which 2 males and 8 females paid by private means and 6 males and 4 females were assisted by the National Assistance Board. This is a total of 20 persons boarded out during the year, and allowing for deaths, transfer to hospital and persons leaving the scheme a total of 22 persons were accommodated under the boarding out arrangement at the end of 1958. The scheme has attracted the attention of other Welfare Authorities in different parts of the country and no less than eight Authorities have sent for details of the arrangements.

In accordance with the terms of Ministry of Health Circular 14/57 issued in October, 1957, consideration was given to the care of the more infirm type of case which is now being admitted and cases requiring short-term nursing care whose illness is not of long duration and would not, therefore, necessitate their admission to hospital. Two hospital type beds and bedside lockers have therefore been installed in Park House and consideration has been given also to converting part of Hafan Glyd into a small sick bay to meet the heavy incidence of infirmity that now takes place in our homes.

A sick bay to accommodate four persons was installed at The Lawn when those premises were enlarged. These arrangements will enable the matrons to cope more expeditiously with cases of temporary sickness and infirmity.

The standard charge at Homes for the Aged have now been unified to a charge of £5/2/1 per week. A comparison with other authorities indicates that our charges are somewhat lower for this type of accommodation.

The department is extremely grateful and very appreciative of two magnificent gifts of television sets that were received during the year, viz, the Holywell and Flint Rotary Club and the Central Typing Pool of Messrs. John Summers and Sons Ltd., who were responsible for the gift of two 17 inch television sets to the old people in Part III Accommodation, Holywell. The spirit of good-will shown to elderly people manifests itself in many ways and several voluntary organisations invite the residents of our Homes and other establishments to parties and outings from time to time and this is a great feature in the lives of the old people.

I would like to emphasise that in spite of a reduced waiting list and an even bigger margin of accommodation available in 1959-1960 there is

no likelihood of the Council having empty beds in the Homes for the Aged. Circulars to be issued in connection with the Mental Health Bill will require Local Health Authorities to provide Hostel Accommodation for elderly patients who might be discharged from detention orders.

Section 21 (b) of the National Assistance Act imposes a duty on Welfare Authorities to provide temporary accommodation for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen or in such other circumstances as the authority may in any particular case determine. A total of 130 cases falling within this category were dealt with during the year, of this number 20 were admitted to temporary accommodation, 6 were admitted to hospital, and the remainder were assisted to find alternative accommodation which included 5 cases rehoused by District Councils.

It was necessary to put the temporary accommodation scheme into operation in March, 1958, when a family were rendered homeless on Talacre Warren due to a sudden outbreak of fire. Bedding and crockery were lent and the W.V.S. provided an immediate refit of clothing. The department were able to rehouse the family in another empty bungalow the same night.

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.

A decision was given by the Minister of Health after consulting his legal advisors and a determination in accordance with Section 32 (3) that the ordinary residence of a person admitted to a Home in Glamorganshire was found to be in Flintshire and the Council accordingly assumed financial responsibility. Three cases were referred to other local authorities for acceptance of financial responsibility and this was accepted.

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 distribution of hot meals continues to expand as new schemes commence and the following schemes have operated during 1958 viz :—

Mold, Sychtyn, Shotton, Flint, Holywell, Dyserth, Rhuddlan and St. Asaph. The total number of meals distributed during the year in these areas are 5141 to 91 elderly and infirm persons plus a total of 2,542 meals distributed by the W.V.S. to 45 elderly and infirm persons in Prestatyn and Rhyl. The Mold Voluntary Old People's Welfare Committee also administer a chiropody scheme and 460 treatments were given to 85 old persons

during the year. This Committee also sponsor a Wireless for the Bed-ridden Scheme and five persons were assisted during the year.

Close liaison has been maintained with the National Assistance Board during the year and all cases referred by the Board to the department have been dealt with. I am grateful to the officers of the Board for their co-operation and courtesy whenever it has been necessary to consult them.

The department continues to pursue a vigorous policy of domiciliary welfare under the scheme approved in 1956, and the fruits of these efforts are reflected in the reduced waiting list. It may be of interest to know that there are in the County 16 Old Age Pensioners Associations, 5 Voluntary Old People's Welfare Committees, and 15 Darby and Joan Clubs, all of which provide recreational facilities for old people, eleven of these organisations distribute hot meals, and new schemes of this kind are still being introduced. Voluntary Welfare Committees are undertaking the visiting of elderly people whenever possible and close contact is maintained with these Committees by the fact that the County Welfare Officer is a member ex-officio of every Committee. Boarding out continues to meet an important need so far as community care of elderly persons is concerned and the scheme has many possibilities not the least being that of boarding out certain selected cases from Homes for the Aged, after a period of care and rehabilitation. The successful placement of elderly persons requires a lot of case work as matching backgrounds and personalities is a skilled job requiring time and patience and with the demands of a larger number of elderly persons who may require residential accommodation in the future, this may be one of the ways by which the blocking of beds can be avoided. I am particularly indebted to the W.V.S. for the amount of clothing and other forms of assistance given from time to time. The department has been able to meet the needs of many deserving cases with their help.

Section 37 : Registration of Disabled Persons or Old Persons Homes—
No new premises were registered during the year but one Home cancelled the registration owing to the illness of the proprietor, viz, Elwy Villas, High Street, Dyserth, Proprietor—Miss Foulkes.

Section 39 : Inspection of Disabled Persons and Old Persons Homes—
Regular visits have been paid during the year and satisfactory reports submitted in each case.

Particulars of the Homes inspected are as follows :—

Plas Coed, Dyserth Road, Rhyl, accommodation for 24 aged females. A voluntary old persons Home.

Woodsmoor, Sandy Lane, Prestatyn, a private old persons Home with accommodation for 6 elderly persons of both sexes.

Prengwyn Villas, High Street, Dyserth, a private old persons Home with accommodation for 4 elderly persons of both sexes.

Henshaws Institute for the Blind, Russell Road, Rhyl, a Home with accommodation for 24 blind persons (male only).

Section 47 : Removal to suitable premises of persons in need of care and attention—Six cases falling under this heading were referred to District Councils and action taken in four cases.

Section 48 : Duty of Council to afford temporary protection for property of persons admitted to hospital, etc.—During the year nineteen cases were dealt with, two of which were referred to the Court of Protection for the appointment of Receiver.

Section 50 : Burials or Cremations—During the year it was necessary to make funeral arrangements for persons dying in Homes and chargeable to the Council. Expenditure in this respect amounted to £40/5/0, and the sum of £25/16/10 was recovered from the estate of the deceased persons.

During the year two resignations took place in the department—that of Mr. Ernest Williams, Area Welfare Officer and Duly Authorised Officer, Western Area, who retired after 28 years service with the Council; and Mr. Elwyn Blackwell, Area Welfare Officer and Duly Authorised Officer, Central Area, who joined the London County Council after 4½ years service.

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, 1958, was :—

Blind 295. Partially sighted 99.

3 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.

9 blind persons are employed in open industry.

7 are self-employed.

1 blind person is in training.

Table 40.

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

		Cause of Disability.							
		Cataract.		Glaucoma.		Retrolental 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	...	2	...	1	...	—	...	3	
Partially Sighted	...	3	...	1	...	1	...	4	
(b) Treatment (medical, surgical or optical) :									
Blind	...	7	...	4	...	—	...	4	
Partially Sighted	...	11	...	2	...	—	...	6	
Total Blind and Partially Sighted		23		8		1		17	
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment :									
Blind	...	3	...	4	...	—	...	4	
Partially Sighted	...	6	...	2	...	—	...	4	
Total Blind and Partially Sighted		9		6		—		8	

B. OPHTHALMIA 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 ... 75.

Aged :—		Males.	Females.	Total.
5 to 16 years	... ..	5	2	7
16 to 21 years	... ..	3	3	6
21 to 50 years	... ..	12	14	26
50 to 65 years	... ..	8	12	20
Over 65 years	... ..	6	10	16
		<hr/>	<hr/>	<hr/>
Totals	... ..	34	41	75
		<hr/>	<hr/>	<hr/>
Number on Register 1958	... ..	...	...	79
New Cases	... ..	...	...	5
				<hr/>
				84
Number of persons left the district	... ..	...	...	6
				<hr/>
				78
Number of persons died, 1958-59	... ..	...	...	3
				<hr/>
		Total	...	75
				<hr/>

I have pleasure in providing the following information with regard to the number of deaf in the Flintshire area visited by the Welfare Officers of the Chester and North Wales Deaf and Dumb Society.

It will be observed that there is a decrease of four in the total figures given for the previous year, consequent on the death of three elderly people and the removal from the district of six others.

(a) Visits have been paid to the Residential Schools where the children are domiciled, but this year the Society has concentrated more on the homes of the children, particularly at holiday periods and at half terms, and it has been a pleasure to make their holidays as interesting as possible. Entertainment of some kind was provided in the winter days, and outings in the summer time; these were appreciated by the children and parents alike.

(b) Some of those in the second category (16 to 21) we find difficult. Being away from home for some years, and having lived in a community where all are deaf, they find the new life for a time irksome, and the Welfare Officer often meets with difficulty in placing them in employment, not only so, but of keeping them in employment after they are placed.

(c) The work of the Society deals more with the aged deaf and those who by advancing years are losing their hearing. There are some very interesting cases among them, and one learns a great deal in the contact

that is made in regular visitation. It is true that at first they are reticent but when their confidence has been gained it is an education to go into their homes and listen to the story of their lives, and that of their forefathers.

(d) It would be wrong to say that employers are unwilling to employ our deaf friends, but automation has made it much more difficult to place them in employment. While most of them can do their work equally as well as a hearing person, if not better than many, as their concentration is great, but in working with machinery even with all the safeguards that are provided one would hesitate to ask employers to engage our deaf friends on certain kinds of work.

(e) The Welfare Officer has a varied experience in his visitation of the homes, he has to be careful not to miss one and visit the other, as the deaf, even more so than the hearing, are very jealous of each other and while there may be those who require special attention care must be taken not to cause offence in by-passing the other.

The aged has a special place in the mind of the Society, while those in hospitals, homes and mental institutions are not in any way overlooked.

A few cases culled from the monthly reports will undoubtedly be sufficient to provide some little idea of the work done by the Society.

(1) L.L.—A very nice woman of sixty-six who had cared for another old woman for something like thirty-seven years until at the age of ninety-two she died. It was found that she required hospitality after the death of her friend. Application was made to the Council and with the help of the Medical Officer of Health she now enjoys the comfort and care required in one of the Council's Homes for the Aged. Needless to say she appreciates what has been done for her.

(2) F.C.—A man who for many years had worked as an employee of the Hawarden Council lost the use of his legs. The case was very pathetic as his deafness was already a severe handicap, but by the intervention of the Society and the kindness of Dr. Roberts a wheel chair was provided for him. He was visited regularly, but it became obvious his condition was deteriorating and finally he was moved to Llesty Hospital where he is quite comfortable. He enjoys the visits of the Welfare Officer who takes him a small gift occasionally.

(3) H.V.—There passed to rest in March of this year one of the eldest of our friends at the age of seventy-nine—deaf dumb and blind. His wife—deaf and dumb and crippled with arthritis—also seventy-nine. Sickness overtook her and she was removed to the City Hospital, and it was necessary to remove her husband to Llesty for care and attention. This turned out to be a blessing in disguise, for it will be obvious to all his affliction was

very severe and only the Welfare Officer could get him to understand. No one seemed to want him, but he was well looked after in the hospital and when Case No. 2 was admitted they were very happy together. The Society were interested and regular visits were paid and little tit-bits given to him. He lived to a great age.

(4) D.M.—A nice young fellow in his twenty-fourth year, everything possible had been done for him, he was sent to a special school and the Medical Officer of Health had given every care and attention to him. Unfortunately nothing further could be done for him, and it was to our regret that we found him in a hospital unable to converse with us, even in the deaf language.

(5) G.D.—A congenital deaf girl of twenty-one years, who refused to accept training during the period of adolescence. She works as a machinist in a clothing factory, finds her friends among hearing people, but is most grateful for the attention and help of the Welfare Officer. She was present at the Christmas Party and enjoyed herself very much.

(6) B.E.—A young married woman of thirty-three who has had a lot of attention by the Welfare Officer of the Society. For some time there was trouble at home, the place seemed neglected and it was evident she had lost heart. Regular visits were made, the Welfare Officer helped and advised her and now there is a complete change. Harmony prevails, the home clean and tidy and the children are well fed and clothed.

(7) N.C.—This woman, aged fifty-five years, is deaf, dumb and partially blind. It was thought when her mother died she would have to be moved, but with the help of friends and the oversight of her neighbours she remains at home and her house is spotless. The Welfare Officer visits regularly to find out if she requires help in any way.

(8) At Christmas time all the children from this area were entertained on 30th December, 1958. In the morning they had a visit to the local cinema to see the film by Norman Wisdom. Lunch was provided in a Cafe at 12 noon when the Mayoress presented gifts from the Society to each of the children present. They were then taken by bus to the Royalty Theatre to see the Pantomime "Cinderella," where they were privileged to be photographed with the Principals at the back of the stage. In the Theatre they were served with ice cream, lollies, sweets and oranges, and at the end of the performance they were taken by bus to the cafe where they enjoyed a delightful meal, and were welcomed by The Right Worshipful The Mayor of Chester, Alderman The Rev. Eric J. Lawson, M.A., Chairman of the Society, and other ladies and gentlemen. Many of the parents joined the children at their party, which was a great success.

Religious Services, Summer Outings and other festivities are provided during the year.

I trust what I have said will be of interest to all who read your valuable report.

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.

843 samples of food were taken during the year ended 31st December, 1958. 589 of these were submitted to the Public Analyst for chemical analysis, 147 were sent to the Public Health Laboratory for bacteriological examination, and the remaining 107 were samples of school milk which were tested in the office for fat and solids content.

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	306	245	61
Dairy Products	28	28	—
Sausages	50	48	2
Ice Cream and Lollies	18	18	—
Miscellaneous Groceries	103	98	5
Alcoholic Drinks	10	10	—
Fish and Meat Products	34	31	3
Patent Medicines	13	12	1
Vegetables and Fruit	27	26	1
	589	516	73

Milk—306 samples were submitted to the Public Analyst for chemical analysis. The samples were taken from roundsmen, dairies, farms, schools, hospitals and restaurants, and were examined for colouring matter, added water, fat deficiency, solids not fat, blood, dirt and preservatives. An analysis of the 61 samples reported as not being genuine showed that 6 contained added water, 13 had fat deficiencies, and 42 were low in milk solids.

Successful legal proceedings were instituted in respect of five samples of milk which contained added water or had fat deficiencies.

The legal standard for the fat content of Channel Island Milk is 4 %. Two samples were found to have a slight fat deficiency and the "appeal" 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 staff. 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.

Difficulty was experienced in maintaining a reasonable standard of cleanliness in one small plant due to congestion. It was a small plant with a rapidly expanding trade. Discussions with the owners resulted in new premises being acquired and a new dairy being built.

School Milk—Milk supplied to the schools and school kitchens was examined periodically and all samples were found to be genuine.

Biological Milk Sampling—117 samples of raw milk were taken from retailers and tested for the presence of Bovine Tuberculosis and *Brucella Abortus*. All samples were found to be satisfactory. Flintshire is a specified area and only pasteurised milk or T.T. 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 supplies are biologically tested at regular intervals and have been found free of T.B. bacilli. A producer retailer was notified as suffering from active tuberculosis of the lungs and was removed to hospital. Biological samples of milk were taken from his herd and these were found to be satisfactory.

Other Foods—283 samples of foodstuffs were submitted to the Public Analyst and 12 were found to be either below standard or did not comply with the regulations. The offences were of a minor character and it was not necessary to institute proceedings in any of these cases.

The addition of chemical preservatives to foodstuffs is limited, but the possibility of accidental contamination due to the increasing use of fungicides and insecticides to growing crops is always present. The list of these chemicals is a formidable one and great care has to be exercised in their use. 27 samples of vegetables and fruit were submitted for chemical analysis. Slight traces of Arsenic were found on some potatoes and fruit but the amounts were well below the permissible maximum.

Alkali Arsenites are used in the potato growing industry as a haulm killer. This facilitates the lifting of the potatoes by mechanical means.

The attention of the Ministry was also drawn to the widespread use in the County of hormone implants—Stilbestrol and Heroestral—in poultry. These are used for the rapid fattening of livestock by chemical caponisation.

Complaints were received at a meeting of farmers that **imported butter** was dirty and below standard. 5 samples were submitted to the Public Analyst and 5 to the Bacteriologist. All samples were reported as being satisfactory.

An adverse report was received on a sample of **home-made jam** sold in a shop. The quality and quantity of the fruit used was excellent, but it was slightly deficient in sugar.

The Public Analyst took exception to the claims made on the label of a packet of **diabetic chocolate**. The attention of the manufacturers, who were a reputable firm, was drawn to the matter.

A sample of **milk flavouring** did not comply with the labelling regulations. A warning letter was sent to the manufacturers who immediately withdrew the stocks.

A complaint was received that the consumption of a **soft drink** was causing a mild form of intoxication to a group of youths who frequented a certain cafe. A sample of the drink submitted to the Public Analyst proved to be quite harmless. Further investigation showed that the drink was being fortified with wine by a member of the group.

A **packet of peanuts** containing a tooth was brought to the office. A child had bought the peanuts from a green grocer, and the tooth was discovered in it by the mother when she opened the packet. The tooth was sent away to be identified and it was reported back to us that it was an adult tooth. The nuts came from West Africa and were fumigated at Liverpool Docks, sent to the Midlands for packaging, and were then sent back to the Liverpool Market. Here they were collected by the wholesaler, distributed to the retailer and then to the customer. There was no positive proof that the packet was intact when the mother received it, and having regard to the number of people who had handled the nuts it was decided not to take legal action. An inspection was made of the premises where the packing machine was situated. The lighting system was not satisfactory and a warning letter was sent to the packers.

Samples of Herring in Tomato were found to be unsound due to long storage. The matter was referred to the Health Department of the District concerned for disposal of the stocks.

Samples of Eye Lotion were also reported as being unfit for use due to long storage. The matter was referred to the Health Department of the District concerned for disposal of stocks.

The quality of the Pork and Beef Sausages sold in the County is still maintained at a satisfactory standard. 50 samples were taken and 2 were reported as being below standard. A warning letter was sent to the manufacturers concerned.

SUMMARY OF LEGAL PROCEEDINGS.

Article.	Deficiency or Adulteration.	Result.	Total Fines, etc. £ s. d.
Bread and Butter ...	Contained Nail ...	Convicted ...	8 3 0
Milk ...	23 % fat deficiency ...	" ...	5 8 0
" ...	16 % fat deficiency } ...	" ...	5 8 0
" ...	4 % added water } ...	" ...	5 8 0
" ...	8 % added water ...	" ...	5 8 0
" ...	4 % added water } ...	" ...	9 7 0
" ...	5 % fat deficiency } ...	" ...	9 7 0
" ...	2 % added water } ...	" ...	9 7 0
" ...	5 % fat deficiency } ...	" ...	9 7 0
			<hr/> £43 1 0 <hr/>

42 samples of doubtful foodstuffs found on food manufacturing premises were sent to be bacteriologically examined. These foodstuffs included egg albumin, cream cakes, meat pies, gravies, custards, cream, etc. Three samples were found to contain undesirable bacteria. These facts were reported to the Health Department of the district concerned for action.

The value of that simple rule of washing the hands after using the W.C. was brought home very forcible when Sonne Dysentery broke out in three schools. As Dysentery is faecal borne and is very infectious, bacteriological swabs were taken from these schools and sent for examination.

In one school where the standard of supervision did not appear to be very good, infective bacteria were recovered from finger marks on desks, door knobs, w.c. seats, towels and floors, and the outbreak was prolonged. In the other schools where the supervision was good the outbreak was of a very short duration.

Public Health Propaganda—Lectures and films were given to such organisations as the Boy Scouts, Young Farmers' Clubs, Canteen Staffs, Women's Institutes, Rotary and Youth Organisations.

The subjects discussed included the Health Services, Atmospheric Pollution, Housing, Home Safety, Clean Food and Environmental Health.

In response to the Ministry's appeal for publicity to the problem of burns and scalds in home accidents, a successful lecture demonstration was held at Kelsterton College. The speaker was Mr. Michael Temple, F.R.C.S., Plastic Surgeon, St. Laurence Hospital, Chepstow. The meeting was attended by representatives from every known junior and adult organisation in the County.

Displays dealing with Home Safety, Mass X-Ray, Clean Food, Dental Care, Poliomyelitis, Tuberculosis and Diphtheria were arranged in main shopping centres and libraries.

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

Shop Act—The provisions dealing with the health and comfort of shop workers are found in the Shop 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 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—23 samples were taken during the year and submitted to the Public Analyst. Two complaints were received and here the feeding stuffs were also examined for poisonous ingredients.

A farmer stated that he lost two calves as the result of using a certain feeding stuff. Samples of the feeding stuff were sent for bacteriological and chemical analysis. No evidence of undesirable matter was found in either.

A complaint was also received that following the consumption of a certain feeding stuff, some cows were taken seriously ill and that the herd's milk yield dropped by half. Eventually one cow died. A portion of the dead animal's stomach showed signs of irritation but there was no evidence

to indicate the cause of death. Two samples of the feeding stuff were chemically examined and traces of castor shell were found in one. The castor oil plant is poisonous and grows as a weed in tropical areas where certain forms of animal foodstuffs are cultivated.

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 216 listed sellers of poisons in the County and these are subject to a periodic inspection.

E. LEWIS,

County Public Health Inspector.

Section F.

Tuberculosis in Cattle—The following information was supplied by Mr. J. C. Baird, Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food :—

Attested Cattle (position at 31st December, 1958).

		Flintshire.		Wales.
Number of Attested Herds	... ..	1,803	...	38,093
Percentage Attested Cattle	... ..	82 %	...	95 %

In addition to the above, 132 herds were in the process of becoming Attested at the end of the year.

The considerable increase in the number of Attested herds during 1958 can be attributed to the free testing facilities offered by the Ministry and to the announcement that the eradication of tuberculosis in the County would commence on 1st March, 1959.

No animals were slaughtered under the Tuberculosis Order of 1938. This Order provides for the removal of animals showing clinical signs of

Tuberculosis. It is perhaps worth recording that 1958 is the first year in which no cattle were slaughtered under the provisions of the Order.

J. C. BAIRD,

Divisional Veterinary Officer.

Section G.

HOUSING.

The provision of suitable houses has an important beneficial effect on the health and welfare of the community. Local Authorities, who are the housing authorities, are fully aware of this and have made great strides in meeting the housing needs of their areas.

It is sometimes forgotten that up to the time of the First World War houses were mainly built by private builders, but with rising costs and shortage of material after the war local authorities became more and more responsible for the provision of houses for the "working classes," receiving Government subsidies for this purpose.

Between the wars large slum clearance projects were also undertaken by Local Authorities who received special subsidies for this purpose.

At the end of the Second World War the housing shortage was again acute due to the stopping of building during the war years. Local authorities were encouraged to build houses for all classes and the 1949 Housing Act did not contain any reference to housing of the "working classes" but encouraged housing to meet the general need of all classes. From 1946 to 1956, Local authorities received a subsidy of £22 per house. This ceased in 1956 and only subsidies for slum clearance are now paid.

Since the Second World War emphasis has been placed on the housing needs of the aged—the need for small dwellings with one bedroom, and Local Authorities have met this need in a variety of ways, small bungalows, single flats and blocks of flats. This provision has (a) met the needs of the aged, and (b) released larger houses for families with children.

The number of one bedroom accommodation provided in Flintshire since 1946 is shown below. (Although the vast majority of single bedroom accommodation is occupied by the aged some is let to other persons).

Table 41.

COMPLETIONS OF ONE-BEDROOM TYPE ACCOMMODATION.

Local Authority	1946 to	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	Total
Urban Districts :												
Cheshire	...	—	—	—	—	—	—	—	—	—	—	—
Manchester's Quay	...	—	—	—	2	2	—	—	—	20	—	24
North M.B.	...	—	14	—	—	—	—	—	—	4	—	18
Wolverhampton	...	—	—	—	—	—	—	—	—	—	—	—
Walsley	...	—	—	—	—	—	—	—	—	—	20	20
Walsley	...	—	—	—	—	—	—	—	—	—	—	—
Walsley	...	—	—	—	—	—	—	—	—	4	8	12
Rural Districts :												
Walsley	...	—	—	2	—	6	10	8	—	—	—	26
Walsley	...	—	—	—	—	—	—	—	—	—	—	—
Walsley	...	—	—	—	—	—	—	—	—	—	—	—
Walsley	...	—	—	—	—	—	—	—	—	—	—	—
TOTALS	...	—	14	2	2	8	10	8	—	28	28	100

Local Authorities still have two big problems—(a) providing an adequate number of dwellings for those in need of them, and (b) selecting tenants for new dwellings. It is true that the acute shortage of housing has been met—but some Local Authorities still have many persons on their housing lists. However, in 1951 only 1.18 % of dwellings in England and Wales were overcrowded compared with 3.88 % in 1931 and 5.69 % in 1921. This marked reduction in overcrowding undoubtedly prompted the Housing Subsidies Act which abolished subsidies on new houses and encouraged Local Authorities to concentrate on slum clearance.

On the question of selection of tenants this is a matter that varies with each Local Authority. Most Local Authorities have a "points scheme" but variations in the basic scheme are common practice and depend on many local factors.

The position of housing and slum clearance in Flintshire both during 1958 and since 1945 is given below. (Figures taken from the Housing Return of the Ministry of Housing and Local Government, 1958).

Table 42.

CONSTRUCTION OF NEW HOUSES UP TO 31st DECEMBER, 1958.

Local Authority.	Local Authorities.		Local Authorities and Housing Associations.		Private Builders.	
	In tenders approved but not started. (1)	Under construction. (2)	Completed since 1/4/45. (3)	Under construction. (4)	Completed since 1/4/45. (5)	
Urban Districts :						
Buckley	—	—	223	17	122	
Connah's Quay	—	22	339	41	297	
Flint M.B.	24	36	495	9	117	
Holywell	—	—	405	7	97	
Mold	20	—	336	17	99	
Prestatyn	—	—	324	45	555	
Rhyl	6	14	937	73	868	
Rural Districts :						
Hawarden	4	53	1609	100	833	
Holywell	86	10	532	34	188	
Maelor	—	—	112	4	25	
St. Asaph	—	18	416	16	187	
TOTALS	140	153	5728	363	3388	

Table 43.

HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE.

Local Authority.	Estimated population mid-1957 (000's).	Included in Orders con- firmed 1/1/55 to 31/12/58.	Demolished or closed 1/1/55 to 30/9/58.	
			In Clearance Areas.	Elsewhere.
	(1)	(2)	(3)	(4)
Urban Districts :				
Buckley	7.7	—	—	18
Connah's Quay	7.7	25	—	39
Flint M.B.	14.2	37	—	40
Holywell	8.2	19	—	14
Mold	6.6	—	—	17
Prestatyn	9.4	—	—	13
Rhyl	19.6	58	17	36
Rural Districts :				
Hawarden	35.9	114	—	53
Holywell	22.1	142	—	29
Maelor	4.8	—	—	20
St. Asaph	11.0	13	16	47
TOTALS	147.2	408	33	326

