

[Report 1968] / Medical Officer of Health, Flintshire County Council.

Contributors

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Page 110 - 4 mass
in milk
abortion in
herds.

FLINTSHIRE
COUNTY
COUNCIL

ON LOAN

HEALTH
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The . . . Health of Flintshire

The Report
of the
Medical Officer
for the year
1968



Flintshire County Council

THE HEALTH OF
FLINTSHIRE

The Report

OF THE

Medical Officer

FOR THE YEAR

1968

Flintshire County Council

THE HEALTH OF
FLINTSHIRE

The Report

Medical Officer

1968

1968

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COUNTY HEALTH OFFICES,
SHIRE HALL,
M O L D.

To the Chairman and Members of
the Flintshire County Council.

Mr. Chairman, Ladies and Gentlemen,

In 1968, again the population of the county showed a substantial increase of 3,050 to a total of 166,160 and these factors alone presents difficulties in maintaining the county health services at their existing level, bearing in mind the difficulty in recruiting trained staff. It must also be remembered that the public, quite rightly, demand higher standards of service each year, so intensive in-service training of existing staff in all departments has become essential and has to be taken into consideration in our annual planning and budgeting.

Work is proceeding on the re-organisation of local government in Wales, but no changes were introduced during 1968 or legislation submitted to Parliament to bring about the recommended changes. The Seebohm Report on the future pattern of social services in local authorities was published during the year and the report recommended the establishment of a Social Work Department to administer the work of welfare departments, children's committees, and all the social work of health departments. During the year also the Green Paper on the re-organisation of the Health Service was published by the Minister of Health. The main recommendation of the Green Paper was the setting up of Area Boards to administer the three branches of the health service. The reaction to this proposal was not well received by any of the three branches of the service, and no final decision was received on the report by the time this report was written. If there is to be re-organisation I would strongly advocate two branches of the health service, a hospital service and a community health service, embracing the general practitioner and the Local Health Authority Services.

A start has already been made in the county to establish a Community Health Service by the attachment of midwives and nurses to general practitioners. By the end of the year all nurse/midwives in the Western half of the county were working in attachment to general practitioners and it is proposed to extend this to cover the whole county in 1969. During the year, there was a marked increase in cases discharged from hospital early and cared for at home by district nurses. This was particularly marked in the case of surgical cases, an increase from 850 cases in 1967 to 1,118 in 1968. This trend is partly due to our developing attachment schemes and is associated

with closer working between general practitioners and district nurses.

A start has also been made on the attachment of other staff to doctors, health visitors, mental welfare officers and other social workers. In the case of mental welfare officers and other social workers attachment will mean one worker covering a given area and working with a group of doctors and having regular contact with them. In time this joint approach to medical care will, I am sure, be the accepted practice working from purpose built premises or health centres.

Our Community Services for the Mentally Disordered (M.D.) showed steady development during the year. Our two training centres were working to capacity and adults on the waiting list were accommodated at the extensions built at the Adult Centre at Greenfield. We were able to provide extra places at the hostel in Rhyl by providing new accommodation for staff. At the end of the year we had eight mental welfare officers and a trainee and a substantial increase in visiting, and after-care was achieved during the year. One feature of the after-care work was the increase in patients who were found boarding house accommodation during the year, thus relieving pressure on hospital beds needed for acute cases.

During the year, the Family Planning Service was expanded to meet increasing demands by the opening of an extra clinic at Prestatyn to make four clinics in all. We are still getting requests from other areas for Family Planning Clinics, but financial limitations preclude the opening of extra clinics to meet these requests at the present time. It will be noted that the number of patients who attended Family Planning clinics in 1968 - 1211 - was nearly four times the total in 1967. I would like to pay tribute to the excellent way that the Family Planning Association carry out their duties in the county and the high standards of work maintained by their staff, doctors, nurses and lay workers.

I have been concerned in the last few years at the steadily rising number of illegitimate births, a total of 213 in 1968 - 7.10% of all births. This is a disturbing national trend and it will be noted that the post war rate was 40 illegitimate births per 1000 births. The figure has risen steadily in the past 10 years from 41.92 to 70 illegitimate births per 1000 births in 1968. This is a problem that is difficult to resolve and indeed difficult to even comment on in a constructive way. Early maturity, greater freedom of the young and higher earning power all contribute to greater opportunities for the sexes to meet without any adult "supervision". This freedom without responsibility may well be the reason for the higher illegitimate birth rate and also equally seriously for the rising incidence of venereal disease.

During the year, steps were taken to handle all our records

relating to immunisation and vaccination by computer. This would include all new cases, printing out of appointments, and follow-up and rendering of accounts of payments due to general practitioners. All the preliminary work was completed by the end of the year and the scheme covering local health and general practitioner records comes into operation on 1st January, 1969.

The work of the Ambulance Service increased during the year and 61,577 patients were conveyed during the year, an increase of 4,000 on 1967. The service conveyed an average 132 patients every 24 hours, an average 22 emergency calls were dealt with every 24 hours and average miles per patient was 8. A considerable amount of new and up to date equipment was purchased, of particular importance being new resuscitation equipment which is now standard on all vehicles. During the year also 7 more staff completed the Ministry of Health approved 6 weeks training course for ambulance personnel.

A considerable amount of time was spent during the year in improving our service for the generally handicapped. Mrs. B. Wareham, who successfully completed her two year course in social work returned during the year and was designated Senior Social Worker for the handicapped and she spent some time in re-organising the service and in making better use of the staff and facilities available. A great deal of work was done in providing special aids for the handicapped persons and in the adaptation of houses occupied by handicapped persons. In the work of adaptation Mr. E. Lewis, the County Public Health Officer, gave valuable help and his knowledge of building construction was very valuable. At the end of the year there were 331 handicapped persons on the register and 3,769 visits were made by the social workers during 1968.

During February 1968, the health department moved into the Shire Hall from Llwynegrin Hall. For the first time all departments of the County Council were in the same building. Having all departments under one roof has many advantages not least being easier communication and consultation. Considerable economies have also resulted in pooling of certain common services such as typing, printing and purchasing. The very excellent facilities at the Shire Hall are very much appreciated by all the staff and full use is being made of the amenities provided.

I would like again to thank all the members of the staff of the health department for their services during 1968 - what was achieved was the result of their combined efforts - and this was very considerable. I would like, in particular, to thank Mr. A. Whitley, Chief Clerk, for collating all the information for this report and undertaking the preliminary preparation of tables and other statistical information.

I would like to thank the Chairman and members of the Health Committee for their support during the year, the Clerk of the County Council and his staff and the County Treasurer and his staff. It is a pleasure to record the good relations between all departments of the Council and to thank those who have co-operated with the department in 1968.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

G.W. ROBERTS,

County Medical Officer of Health.

STAFF CHANGES

Medical:

The following changes occurred in the part-time Assistant Medical Officers staff:-

Dr. E.M. Harding resigned on the 1st September, Dr. A. Lloyd Jones resigned on the 31st October, Dr. F.J. Murray commenced duty on the 12th September and resigned on the 6th December. Dr. R.D. Williams and Dr. B.N. Jenson commenced duty on the 7th October and 4th December respectively.

Dental:

Miss I.M.S. Davies commenced duty as full-time Dental Officer on the 8th January and resigned on the 31st August.

Dr. Gwyneth P. Roberts commenced duty as part-time Dental Anaesthetist on the 6th February.

Mrs. S.F. Moran and Mrs. M. Morton, part-time Dental Officers, resigned on the 19th January and 26th April respectively.

Mr. B.T. Broadbent, part-time Consultant Orthodontist, resigned on the 31st July, Mr. J. Hopper commenced duty as part-time Consultant Orthodontist on the 6th August.

The following changes occurred in the part-time Dental Surgery Assistants staff:-

Mrs. E. Lloyd commenced duty on the 11th January and resigned on the 26th July. Mrs. C.M. Coxon commenced duty on the 11th January. Mrs. A.B. Ratcliffe commenced duty on the 15th January. Mrs. J.G. Shaw resigned on the 12th January.

Health Visiting:

Mrs. D.M. Lewis, Health Visitor/School Nurse for the St. Asaph Area, was designated Senior Health Visitor for the Western Area on the 1st January.

The following commenced duty on the dates shown:-

| | | | |
|----------------|-------------------|-------------------|----------------|
| Mrs. E. Bellis | 29th July, 1968 | Miss A.M.C. Smith | 1st Sept. 1968 |
| Mrs. G. Jones | 7th October, 1968 | Mrs. B.J. Forster | 18th Nov. 1968 |

The following resigned during the year:-

Mrs. R. Jones 29th February, 1968 Mrs. D. Jeronimidis 31st Aug., 1968
Mrs. E. Bellis 29th November, 1968

Mrs. A.R. Iball, Visitor for Chest Diseases, resigned on the 31st August. Mrs. I.M.M. Beedles commenced duty as Visitor for Chest Diseases on the 16th September.

Mrs. A. Clark and Miss E. Simmons commenced attendance at the full-time Health Visitors Training Course on the 16th September.

Clinic Nurses:

The following commenced duty as part-time Clinic Nurses on the dates shown:-

Mrs. S.M. Hayward 20th May, 1968 Mrs. J. Nicholls 11th Nov., 1968
Mrs. R.A. Jones 5th Nov., 1968 Mrs. D. Williams 18th Nov., 1968
Mrs. G. Devlin 8th Dec., 1968

The following resigned during the year:-

Mrs. S.E. Thomas 29th April, 1968 Mrs. R. Williams 8th Nov., 1968
Mrs. A. Cotgreave 13th December, 1968

Nurses and Midwives:

The undermentioned Nurses resigned during the year:-

| | | |
|-----------------------|--------------|------------|
| Miss B. Davies | Western Area | 4: 1: 68 |
| Miss H.E.J. Gillespie | Central Area | 29: 2: 68 |
| Mrs. E. Robinson | Western Area | 31: 3: 68 |
| Mrs. M. Williams | Central Area | 30: 9: 68 |
| Mrs. R.A. Roberts | Western Area | 30: 11: 68 |
| Miss I. Leece | Eastern Area | 30: 11: 68 |
| Mrs. W.A. Butler | Eastern Area | 30: 11: 68 |
| Mrs. J. Nicholls | Central Area | 30: 11: 68 |
| Mrs. M. Jones | Central Area | 31: 12: 68 |
| Mrs. M.E. Hughes | Eastern Area | 31: 12: 68 |
| Mrs. S.E. Kingston | Western Area | 31: 12: 68 |
| Mrs. A.E. Pierce | Eastern Area | 31: 12: 68 |

The undermentioned Nurses were appointed during the year:-

| | | |
|-------------------|--------------|-----------|
| Miss A.B. Elder | Western Area | 1: 1: 68 |
| Mrs. S.I. Roberts | Western Area | 22: 1: 68 |
| Mrs. M.L. Roberts | Central Area | 8: 4: 68 |

The undermentioned Nurses were appointed during the year:-
(cont'd)

| | | |
|----------------------|--------------|------------|
| Mrs. B.M. Nethercott | Western Area | 1: 5: 68 |
| Mrs. B. Williams | Western Area | 1: 5: 68 |
| Mrs. E.A. Patterson | Eastern Area | 1: 9: 68 |
| Mrs. M.E. Parsons | Central Area | 16: 9: 68 |
| Mrs. M. Hobbs | Eastern Area | 1: 10: 68 |
| Miss A.M. Ross | Eastern Area | 2: 12: 68 |
| Mrs. H.M. Marks | Central Area | 6: 12: 68 |
| Miss D.K. Adamson | Central Area | 19: 12: 68 |
| Mrs. J.M. German | Western Area | 23: 12: 68 |

Mrs. I. Shepherd, District Nurse/Midwife, in the Western Area was appointed Deputy Superintendent Nursing Officer and Deputy Supervisor of Midwives on the 1st May, 1968.

Mental Health Staff:

Miss I.M. Jones commenced duty as a Trainee Mental Welfare Officer on the 4th June, 1968.

Fronfraith Hostel:

Mrs. M.E. Jenkins and Mr. J. Jenkins resigned on the 3rd July and 8th November, respectively.

Mr. H. Madew commenced duty as Warden on the 1st December. Mrs. G. Maddocks and Mr. R.A.A. Davies commenced duty as Assistant Wardens on the 20th June and the 1st August respectively.

Greenfield Adult Training Centre:•

Mrs. V. Salisbury commenced duty as Assistant Supervisor on the 19th February, 1968.

Tirionfa Junior Training Centre:

Miss H. Powell commenced duty as Trainee Assistant Supervisor on the 4th September, 1968.

Speech Therapist:

Miss G. Roberts resigned her appointment as full-time Speech Therapist on the 31st May, 1968.

Home Help:

Miss C.O. Simpson commenced duty as Assistant Home Help Organiser on the 1st June, 1968.

Other Staff:

Mrs. M. Nicklin commenced duty as part-time Handicraft Instructor on the 1st May, 1968.

Mr. H.G. Jones commenced duty as part-time Chiropodist on the 2nd July, 1968.

ATTENDANCES AT COURSES AND CONFERENCES

Medical Officers:

Dr. G.W. Roberts Royal Society of Health Congress, Eastbourne
24th April, 1968 to 3rd May, 1968.
National Association for Mental Health Annual
Conference, London 23rd February, 1968.
Day Conference on Williams Report, Liverpool
31st January, 1968.
Conference on Family Planning for Britain,
London, 5th April, 1968.

Dr. E.V. Woodcock Postgraduate Course in Medicine, Cardiff,
8th July, 1968 to 12th July, 1968.
Course on Education of the Deaf, Sheffield,
11th and 12th October, 1968.

Dr. L. Munro Postgraduate Course in Medicine, Cardiff,
8th to 12th July, 1968.

Dr. W. Manwell Postgraduate Course in Medicine, Cardiff,
8th to 12th July, 1968.

Dental Officers:

Mr. A. Fielding British Dental Association Annual Conference,
Brighton 17th to 21st June, 1968.

Mr. L. Harries Course on General Anaesthesia, London,
25th May, 1968.

Public Health Inspector:

Mr. E. Lewis Royal Society of Health Congress, Eastbourne
29th April, 1968 to 3rd May, 1968.
Week-end School for Public Health Inspectors,
Bangor 29th to 31st March, 1968.
Summer School in Health Education, Bangor,
13th to 23rd August, 1968.

Health Visitors:

Miss P. M. Matthews Institute of Home Help Organisers' Week-end
School, London, 12th to 14th September, 1968.

Miss A.M. Stewart General Refresher Course, Rhyl, 22nd to 26th
April, 1968.

Mrs. M.D. Lewis)
Miss M.Y. Secker) Course on the Care of the Elderly, Rhyl, 29th
Miss M. Lees) April, 1968 to 3rd May, 1968.
Mrs. P. Coupe)

Miss D.E. Booth Course of Current Geriatric Problems,
Liverpool, 17th January, 1968 to 3rd May, 1968.

Miss D. Phillips Joint Conference - English and Scottish Health
Visitors' Association 12th to 16th August, 1968.

Nurses and Midwives:

Miss L. Mann Conference on District Nurse Training, Cardiff,
10th July, 1968.
Study Day for District Nursing Administrators,
London, 4th May, 1968.

Mrs. I. Leece
Miss S.C. Edwards Refresher Course for Midwives, Hull, 1st to
6th April, 1968.

Mrs. M.E. Pritchard Refresher Course for Midwives, Keele, 31st
March, 1968 to 5th April, 1968.

Mrs. J.E. Rainbow
Mrs. C.M. Griffiths Practical Work Instructors' Course, London,
4th to 8th March, 1968.

Mrs. I. Shepherd Study Day - Queens Institute of District Nursing,
London, 1st November, 1968.
Conference on District Nurse Training, Cardiff
10th July, 1968.

- Mrs. I. Shepherd
(cont'd) Practical Work Instructors' Course, London,
4th to 8th March, 1968.
- Mrs. W. Jones General Refresher Course, Bangor, 14th to
20th July, 1968.
- Miss R. Owen General Refresher Course, Sheffield, 8th to
14th September, 1968.
- Miss I. Jones General Refresher Course, Liverpool, 8th to
Mrs. M. Williams 13th September, 1968.
- Mrs. M. Black) Preparation for Parenthood Course, Preston,
Mrs. F.J. Cowx) 6th to 10th May, 1968.
- Miss E.E. Jones) Preparation for Parenthood Course, Preston,
Miss H. Werner) 7th to 11th October, 1968.
- Miss E.A. Parry Postgraduate Course for Midwives, Bradford,
8th to 13th September, 1968.
- Mrs. C.R. Williams Midwives Refresher Course, Wrexham, 19th
April, 1968 to 5th July, 1968.
- Ambulance Staff:**
- Mr. D.J. Jones Annual Conference - National Association of
Ambulance Officers - Blackpool 24th to 26th
September, 1968.
- Mr. P.J. Stanley County Ambulance Training Course, Nantwich
15th January, 1968 to 24th February, 1968.
- Mr. D.J. Coulton County Ambulance Training Course, Nantwich
16th April, 1968 to 24th May, 1968.
- Mr. G.E. Hughes County Ambulance Training Course, Nantwich
3rd June, 1968 to 13th July, 1968.
- Mr. J. Ball) County Ambulance Training Course, Nantwich
Mr. G. Bellis) 30th September, 1968 to 8th November, 1968.
- Mr. K. Jackson) County Ambulance Training Course, Nantwich
Mr. J. Lancelott) 11th November, 1968 to 20th December, 1968.
- Mental Health Staff:**
- Miss L. Davies Course on Handicapped Children, Bangor, 9th
to 13th September, 1968.

Mrs. D. Goodwin Course on Mentally Handicapped Children,
Mrs. L. Jones Manchester 13th to 17th May, 1968.

Home Help Staff:

Miss C. Simpson Institute of Home Help Organisers' Week-end
School, London 12th to 14th September, 1968.

Office Staff:

Mr. E. Roberts Summer School in Public Health Administration,
Oxford, 11th to 14th September, 1968.

Other Staff:

Mrs. L. Colledge Course on Education of Deaf Children,
Sheffield 11th to 12th October, 1968.

Section 1

ADMINISTRATION

A - DEPARTMENTAL OFFICERS

County Medical Officer:

Griffith Wyn Roberts, MB BCh BAO DPH,
Official Address: County Health Offices, Shire Hall, Mold
Tel: Mold 2121

Deputy County Medical Officer:

Kenneth Steven Deas, MB ChB DPH

Senior Assistant Medical Officer:

Lillie Lund Munro, MB ChB DPH

Assistant Medical Officers (full-time):

William Manwell, MB BCh BAO DTM DPH CM
Edith V. Woodcock, MB ChB DPH

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

D.J. Fraser, MB ChB DPH
D.P.W. Roberts, MB ChB DObst RCOG DPH

Assistant Medical Officers (part-time sessional):

Dr. E.M. Harding, MB ChB DPH (Resigned 1:9:68)
Dr. J.D. McCarter, MB BCh BAO
Dr. Ann Lloyd Jones, MB BS MRCS LRCP (Resigned 31:10:68)
Dr. Y.B. Gibson, MB BCh
Dr. R.D. Williams, MRCS LRCP
Dr. B.M. Jensen, MRCS LRCP

Chest Physicians (part-time)

E. Clifford-Jones, MB BS MRCS (Eng) LRCP (London)
J.B. Morrison, MD ChB
R.W. Biagi, MBE MB ChB MRCPE

Child Guidance Consultant (Welsh Hospital Board Staff):

E. Simmons, MD LRCP LRCS (Edin) LRFPS (Glasgow)

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

Catrin M. Williams, FRCS

Ophthalmic Consultants (Welsh Hospital Board Staff):

E. Lyons, MB ChB DOMS
J. Nath, MB BS (Resigned 11:10:68)

Ophthalmic Optician (part-time sessional):

A.S.M. Saum, FBOA (Hons)

Orthopaedic Consultant (Clwyd and Deeside Hospital Management Committee, Prince Edward War Memorial Hospital, Rhyl):

R. Owen, MCh (Orth.) FRCS

Consultant Paediatrician (Regional Hospital Board Staff):

M.M. McLean, MB MRCPE DCH

Consultant Obstetricians and Gynaecologists:

Mr. E. Parry-Jones, MD MS FRCOG (Clwyd and Deeside Hospital Management Committee)

(Mr. D.B. Whitehouse, MD FRCS MRCOG)

(Mr. G.A. Humphreys, MRCS LRCP FRCOG (Wrexham, Powys and Mawddach Hospital Management Committee))

Consultant Geriatricians:

Dr. June P. Arnold, MD MRCP (Clwyd and Deeside Hospital Management Committee)

Dr. Evan Griffiths, MB BS (Lond) LRCP MRCS FRCS (Edin.)
FRCS (Eng.) (Wrexham Powys and Mawddach Hospital Management Committee)

Speech Therapists:

Mrs. R.E. Ward, LCST

Miss G. Roberts, LCST (Full-time) Resigned 31:5:68)

Principal School Dental Officer (full-time):

A. Fielding, LDS RCS

Dental Officers (full-time):

Frederick Seymour Dodd, LDS

Leon Harris, BDS

Arthur Oliver Hewitt, LDS

Dental Officers (part-time):

Mr. C. Hubbard, LDS

Mr. H.E. Edwards, LDS

Mrs. S.F. Moran, LDS (Resigned 19: 1: 68)

Mrs. M. Morton, BDS (Resigned 26:4: 68)

Consultant Orthodontist (part-time sessional):

B.T. Broadbent, FDS RCS (Resigned 1: 7: 68)

J. Hopper, LDS (Orth)

Dental Anaesthetists (part-time sessional):

Dr. G.E.S. Robinson
Dr. M.E. Lloyd
Dr. H. Evans
Dr. G.P. Roberts (since 6: 2: 68)
Mr. T. Roberts, LDS

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

Elwyn Lewis, MRSH FAPHI

Superintendent Nursing Officer and Supervisor of Midwives:

Miss L. Mann SRN SCM QN HVCert

Deputy Superintendent Nursing Officer and Supervisor of Midwives:

Mrs. I. Shepherd, SRN SCM QN

**Superintendent Health Visitor/School Nurse, also Domestic Help
Organiser:**

Miss P.M. Matthews SRN SCM HVCert NAPHCert.

Health Visitors (Acting Jointly as Health Visitors and School Nurses):

All State Registered Nurses and State Certified Midwives, and
with Health Visitor's Certificate or other qualifications:-

Miss M. Williams, Senior Health Visitor/School Nurse, Eastern
Area.

Mrs. D.M. Lewis, Senior Health Visitor/School Nurse, Western
Area.

Mrs. P.B.M. Coupe

Mrs. S. Lewis (part-time)

Miss M.J. Hughes

Miss G.M. Jones

Miss G. Jones (part-time)

Miss M.Y. Secker

Miss M. Lees

Miss I.M. Swinscoe

Miss A.M. Stewart

Miss D. Phillips

Mrs. L. Pritchard

Miss M. Hinchin

Mrs. M.E. Pearse

Miss F.M. Higginson

Miss M.W. Wright

Mrs. D. Jeronimidis

Mrs. M. Moffat

(Resigned 31:8:68)

Miss D.E. Booth

Mrs. R. Jones (Resigned

Miss D.J. Levens

29:2:68)

Miss A.M.C. Smith (Since 1: 9: 68)

Miss P.M. Haworth

Mrs. B.J. Forster (Since 18:11: 68)

Mrs. G. Jones (Since 7:10:68)

Visitors for Chest Diseases:

Mrs. M.M. Roberts, SRN SCM TBCert (Part-time)

Mrs. I.M.M. Beedles, SRN BTA

Clinic Nurses:

| | |
|-------------------|---------------------------------------|
| Full-Time:- | Mrs. S.A. Latham |
| Part-Time:- | Mrs. R. Cunnah |
| Mrs. R.W. Jones | Mrs. M.M. Digweed |
| Mrs. J. Nicholls | Mrs. R. Williams (Resigned 8:11:68) |
| Mrs. D. Williams | Mrs. A. Roberts |
| Mrs. G. Devlin | Mrs. A. Cotgreave (Resigned 13:12:68) |
| Mrs. S.M. Hayward | Miss S.E. Thomas (Resigned 29: 4: 68) |
| | Mrs. M. Swinnerton |

Dental Surgery Assistants:

| | |
|---------------------------------|------------------------------|
| Mrs. L.M. Martin | Miss M.E. Roberts |
| Mrs. B.M. Roberts | Mrs. E.I. Roberts |
| Mrs. D. Young (Part-time) | Mrs. C.M. Coxon (Part-time) |
| Mrs. M. Miles (Part-time) | Mrs. J. Williams (Part-time) |
| Mrs. A.B. Ratcliffe (Part-time) | |

Assistant Domestic Help Organisers:

Mrs. S.M. Stuart-Morgan
Miss C.O. Simpson

Ambulance Officer:

David John Jones, FIAO FICAP

Chief Mental Welfare Officer

R. Powell, CSW

Senior Mental Welfare Officer

I. Thomas, CSW

Supervisor, Junior Training Centre:

Mrs. D.E. Goodwin, Dip NAMH

Warden, Fronfraith Hostel:

H. Madew

Home Visitors for Handicapped Persons (General Classes):

Mrs. B. Wareham, CSW - Senior Social Worker

Mrs. G.E.G. Kelsey

Mr. A.E. Airey

Mrs. E. Williams) Part-time Handicraft

Mrs. M. Nicklin) Instructors

Chief Clerk:

Arthur Whitley

Departmental Senior Clerk:

Edward F. Jones

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 Nurse/Midwives | 38 |
| District Nurses | 14 |
| State Enrolled Nurses (Assisting on districts) | 6 |
| Total | <u>58</u> |

Domestic Helpers (Employed at the end of the Year):

| | |
|------------|------------|
| Whole-time | 3 |
| Part-time | 151 |
| | <u>154</u> |

Mental Welfare Officers:

At the end of the year, the Authority employed, in addition to the Chief Mental Welfare Officer, one Senior Mental Welfare Officer, four full-time Mental Welfare Officers, two Assistant Mental Welfare Officers and one Trainee Mental Welfare Officer.

The areas served by the Mental Welfare Officers are as follows:-

Mental Welfare Officer

District or Parish

Mr. R. Powell,
Tel: Night and Weekend
Mold 3277

Mrs. Z. Hughes,
Tel: Night and Weekend
Caerwys 413

Working from Shire Hall,
Tel: Mold 2121

| | |
|--------------|--------------|
| Buckley U.D. | Llong |
| Mold U.D. | Marford |
| Maelor R.D. | Mynydd Isa |
| Abermorddu | Nannerch |
| Alltami | Nercwys |
| Bryn-y-Baal | New Brighton |
| Caergwrle | Northop |
| Cefn-y-Bedd | Northop Hall |
| Cilcain | Padeswood |
| Coed Talon | Pentrobin |
| Cymau | Pantymwyn |
| Ffrith | Penyffordd |
| Gwernaffield | Penymynydd |
| Gwernymynydd | Pontblyddyn |
| Halkyn | Pontybodkin |
| Hendre | Rhesycae |
| Hope | Rhosesmor |
| Hoseley | Rhydymwyn |
| Leeswood | Rhydtalog |
| Lixwm | Soughton |
| Llanfynydd | Treuddyn |

Mental Welfare Officer

District or Parish

Mr. I. Thomas,
Tel: Night and Weekend
Mold 2734

Connah's Quay
U.D.

Hawarden
Higher

Flint M.B.
Holywell U.D.

Kinnerton

Miss I.M. Jones
Tel: Night and Weekend
Buckley 3495

Broughton
Ewloe
Garden City

Mancot
East Saltney
West Saltney
Sealand

Working from,

The Clinic, Civic Centre,
Connah's Quay.
Tel: Connah's Quay 3486.

Mrs. R. Roberts,
Tel: Night and Weekend

Prestatyn U.D.
Rhyl U.D.

Holway
Llanasa

Mr. R.C. Jones,
Tel: Night and Weekend
Rhuddlan 455

Afonwen
Babell

Llanerchymor
Lloc

Working from:

Craigmor, Russell Road,
Rhyl.
Tel: Rhyl 4521

Berthengam
Bodelwyddan

Mostyn
Pantasaph

Bodfari
Brynford

Picton
Rhewl

Caerwys
Calcoed

Rhuallt
Rhuddlan

Carmel
Cwm

St. Asaph
Talacre

Dyserth
Ffynnongroew

Trelawnyd
Trelogan

Gorsedd
Gronant

Tremeirchion
Waen

Gwaenysgor
Gwespyr

Whitford
Ysceifiog

CLERK OF THE COUNTY COUNCIL
T.M. Haydn Rees, DL, Solicitor

B - ASSOCIATED OFFICERS

Director of Education:
M.J. Jones, MA

County Surveyor:
E.W.W. Richards, MICE, MStructE, MIHE

B - ASSOCIATED OFFICERS (cont'd)

County Architect:

R.W. Harvey, ARIBA

County Treasurer:

Sidney Elmitt, FIMTA, FRVA

County Welfare Officer:

T. Wesley Hughes, FInstW

Children's Officer:

Mrs. L.Davies, BA

Public Analyst (Fee-paid):

J.G. Sharratt, BSc FRIC

Deputy Public Analyst (Fee-paid):

R. Sinar, BPharm BSc FPS FRIC

Health Officers of the Several Sanitary Districts (as on 31st December, 1968)

| District | Medical Officer | Chief Public Health Inspector |
|-------------------------|--------------------|---|
| Buckley Urban | Dr. D.J. Fraser | Mr. A.G. Watkin, U.D.C. Offices, Buckley |
| Connah's Quay Urban | Dr. D.J. Fraser | Mr. C. Stoddart, U.D.C. Offices, Connah's Quay |
| Flint Municipal Borough | Dr. D.J. Fraser | Mr. L. Graham, Town Hall, Flint |
| Holywell Urban | Dr. D.P.W. Roberts | Mr. H.L. Fields, U.D.C. Offices, Holywell |
| Mold Urban | Dr. D.J. Fraser | Mr. R. Goucher, U.D.C. Offices, Mold |
| Prestatyn Urban | Dr. D.P.W. Roberts | Mr. J.M. Edwards, U.D.C. Offices, Prestatyn |
| Rhyl Urban | Dr. D.P.W. Roberts | Mr. E.L.L. Jones, Russell House, Rhyl |
| Hawarden Rural | Dr. D.J. Fraser | Mr. D.R. George, R.D.C. Offices, Hawarden |
| Holywell Rural | Dr. D.P.W. Roberts | Mr. D.O. Meredith Jones, R.D.C. Offices, Holywell |
| Maelor Rural | Dr. D.J. Fraser | Mr. S.J.V. James, R.D.C. Offices, Overton |
| St. Asaph Rural | Dr. D.P.W. Roberts | Mr. R.P. Barlow, R.D.C. Offices, St. Asaph |

STATISTICS AND SOCIAL CONDITIONS

The increase in the county population recorded in recent years continued during 1968, and at the end of 1968, the population was 166,160 compared with 163,110 at the end of 1967 - an increase of 3,050. As in previous years this was due to (a) influx of persons coming into the Prestatyn and Rhyl areas to retire, (b) new working population coming into Deeside, and housing estates in the Eastern half of the county, and (c) an increase of births over deaths in the county as a whole.

The county has three fairly well defined areas which differ markedly from each other. The Western top of the county is a popular holiday area with a large number of caravans, camping sites and boarding houses and hotels. This area has some light industry and efforts are continuing to attract additional suitable industries into the area in order to balance the position of full employment in summer and high unemployment in winter. The Eastern half of the county and the Deeside area is mainly industrial and this area continues to attract some new industries and is well placed for this purpose because of its proximity to good port and rail facilities. The development and expansion of Mostyn Docks is a welcome step in the further development of this industrial area. The remainder of the county is predominantly rural and has a thriving agricultural community. It is of interest to note that improvements in methods of farming due to the introduction of scientific methods has improved the prospects of the farming community in the county and other parts of Wales.

The areas showing the greatest increase in population were Hawarden R.D. (1050), Connah's Quay U.D. (540), Buckley U.D. (480) these three areas accounted for an increase in population of 2,070 out of a total increase of 3,050. These three areas naturally had a large increase in new housing and showed a total of 994 new houses out of a total of 2,001 for the whole county. In all parts of the county private housing exceeds local authority housing, a total of 1481 private dwellings compared with 520 local authority dwellings. Many of the local authority houses are to replace unfit houses and to provide special single bedroomed accommodation for the elderly.

During the year, the death rate for the county showed a slight increase from 11.9 to 12.7 and is slightly higher than the national average due to the high proportion of retired aged persons in the Western half of the county. It is worth recording that the percentage over 65 years of age in Prestatyn and Rhyl is 21% and 20.5% respectively compared with 13.1% for the county as a whole.

The birth rate for 1968 was 18.0 compared with 17.4 in 1967. This rate is considerably higher than the rate for England and Wales which was 16.9. Again this emphasises the high rate of young married persons in the "new" population which comes into the Eastern half of the county.

Although 1968 was a difficult year economically the level of employment in the county remained high. During 1968, the average unemployment figures for the county were 3% compared with a figure of 4% for Wales as a whole and 2.4% for Great Britain. As mentioned in previous reports full employment has a tremendous effect in maintaining the well being of the community, both physically and mentally. Full employment also makes it much easier to plan and develop future health and community services in general.

The county has good main services in all except small rural communities and most of these now have electricity and piped water. Water carriage sanitation is being rapidly provided even for these areas and many villages have been sewered in recent years. All urban areas have mains gas and natural gas was introduced in some areas on Deeside in 1968.

It is hoped to start on the new District General Hospital at Bodelwyd@an in 1970 and this hospital will serve the greater part of the County and will provide modern hospital facilities in one unit and improve medical facilities for the population. The county is well provided with general practitioners (98). There is, however, an acute shortage of dentists in the county and the position is aggravated by the increase in population in areas already inadequately served. The County Health Department provides a comprehensive range of services, but due to a national shortage of trained staff in certain fields we are unable to provide as comprehensive a service as we would like in these particular spheres.

Table 1 (a)

AREA, POPULATION, ETC.

| District | Area in | Population (By Census). | | | | | |
|---------------------|----------------------------------|-------------------------|--------------|---------------|---------------|---------------|---------------|
| | Statutory Acres (pre-1934) | 1901 | 1911 | 1921 | 1931 | 1951 | 1961 |
| Urban - | | | | | | | |
| Buckley | 2034 | 5780 | 6333 | 6726 | 6899 | 7699 | 7659 |
| Connah's Quay | 4214 | 3396 | 4596 | 5060 | 5980 | 7365 | 8375 |
| Flint (Mun. Boro). | 3435 | 4625 | 5472 | 6298 | 7655 | 14257 | 13707 |
| Holywell | 917 | 2652 | 2549 | 3073 | 3424 | 8196 | 8477 |
| Mold | 854 | 4263 | 4873 | 4659 | 5137 | 6436 | 6894 |
| Prestatyn | 1640 | 1261 | 2036 | 4415 | 4512 | 8809 | 10786 |
| Rhyl | 1700 | 8473 | 9005 | 13968 | 13485 | 18745 | 21737 |
| Rural | | | | | | | |
| Hawarden | 31588 | 15821 | 20571 | 24036 | 26575 | 34659 | 36443 |
| Holywell | 64519 | 23999 | 25328 | 25933 | 26709 | 22324 | 21636 |
| Maelor | 29749 | 5057 | 5176 | 5102 | 4761 | 6760 | 4889 |
| St. Asaph | 23057 | 6158 | 6766 | 7347 | 7752 | 9858 | 9479 |
| Total Urban | 14794 | 30450 | 34864 | 44199 | 47092 | 71507 | 77635 |
| Total Rural | 148913 | 51035 | 57841 | 62418 | 65797 | 73601 | 72447 |
| Whole County | 163707 | 81485 | 92705 | 106617 | 112889 | 145108 | 150082 |

Table 1 (b)

| District | Area in Statutory Acres at 1/4/34 | Area in Statutory Acres as per 1961 Census 1939 | Population (estimated mid-year) | | | | | | |
|---------------------|--|---|---------------------------------|---------------|---------------|---------------|---------------|---------------|---------------|
| | | | 1949 | 1959 | 1965 | 1966 | 1967 | 1968 | |
| Urban | | | | | | | | | |
| Buckley | 2646 | 2638 | 7345 | 7622 | 7690 | 8320 | 8530 | 8880 | 9360 |
| Connah's Quay | 4214 | 4214 | 6505 | 7455 | 8030 | 9390 | 9910 | 10400 | 10940 |
| Flint M.B | 6243 | 6802 | 13020 | 14160 | 14300 | 14070 | 14150 | 14290 | 14460 |
| Holywell | 2532 | 2428 | 6918 | 7870 | 8320 | 8580 | 8640 | 8610 | 8680 |
| Mold | 1164 | 1175 | 5880 | 6354 | 6680 | 7490 | 7590 | 7730 | 7900 |
| Prestatyn | 3219 | 2796 | 7422 | 8659 | 9720 | 12450 | 12850 | 13200 | 13430 |
| Rhyl | 1700 | 1700 | 16510 | 18710 | 19810 | 21710 | 21500 | 21370 | 21660 |
| Rural | | | | | | | | | |
| Hawarden | 31576 | 31576 | 28750 | 32450 | 35520 | 38620 | 39440 | 40230 | 41280 |
| Holywell | 58515 | 58329 | 20730 | 21920 | 22090 | 22280 | 22380 | 22640 | 22840 |
| Maelor | 29740 | 29749 | 4356 | 6720 | 4520 | 4860 | 4860 | 4860 | 4880 |
| St. Asaph | 22149 | 22300 | 7494 | 8380 | 10320 | 10470 | 10710 | 10900 | 10730 |
| Total Urban | 21718 | 21753 | 63600 | 70830 | 74550 | 82010 | 83170 | 84480 | 86430 |
| Total Rural | 141989 | 141954 | 61330 | 69470 | 72450 | 76230 | 77390 | 78630 | 79730 |
| Total County | 163707 | 163707 | 124930 | 140300 | 147000 | 158240 | 160560 | 163110 | 166160 |

VITAL STATISTICS - FLINTSHIRE, 1968

| | |
|--|-------|
| Live Births | 2,985 |
| Live birth rate per 1,000 population | 18.0 |
| Illegitimate births | 213 |
| Illegitimate live births per cent of total live births | 7.10 |
| Stillbirths | 40 |
| Stillbirth rate per 1,000 live and stillbirths | 13.0 |
| Total live and stillbirths | 3,025 |
| Infant deaths (under 1 year) | 51 |
| Infant mortality rate per 1,000 live births - total | 17.0 |
| Legitimate infant deaths per 1,000 legitimate live births | 16.94 |
| Illegitimate infant deaths per 1,000 illegitimate live births | 18.86 |
| Neo-natal mortality rate per 1,000 live births (first four weeks) | 12.39 |
| Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births) | 10.72 |
| Perinatal mortality rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths) | 24.0 |
| Total Deaths | 2,107 |
| Death rate per 1,000 population | 12.7 |
| Maternal deaths (including abortion) | - |
| Maternal mortality rate per 1,000 live and still births | - |

FINANCIAL

The product of a penny rate, computed for the County in respect of the year 1968/69 was £30,285.

SOCIAL CONDITIONS

These are discussed elsewhere in the Report.

BIRTHS

During the year under review, 3,025 births were registered as pertaining to the County, that total being made up as follows:-

| | Live Births | Still Births | Total |
|--------------|--------------|--------------|--------------|
| Legitimate | 2,773 | 39 | 2,812 |
| Illegitimate | 212 | 1 | 213 |
| | <u>2,985</u> | <u>40</u> | <u>3,025</u> |

Compared with 1967, these figures show an increase of 154 live births and a decrease of 3 still births, the total births thus showing an increase of 151.

Of the 2,985 live births, 1,517 were males and 1,468 females.

Of the 40 still births, 20 were males and 20 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 1968 was 18.0 which is slightly higher than the rate for England and Wales, namely, 16.9 and higher than the County rate for 1967 which was 17.4.

The still birth rate per 1,000 total (live and still) births was 13.0 as compared with the corresponding rate for England and Wales, which was 14.0.

Illegitimate Births: The number of illegitimate births fluctuate 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 | " |
| 1953 | 52.85 | " |
| 1954 | 52.07 | " |
| 1955 | 40.00 | " |
| 1956 | 43.64 | " |
| 1957 | 32.05 | " |
| 1958 | 40.42 | " |
| 1959 | 41.98 | " |
| 1960 | 41.92 | " |
| 1961 | 42.96 | " |
| 1962 | 48.09 | " |
| 1963 | 44.14 | " |
| 1964 | 56.95 | " |
| 1965 | 60.74 | " |
| 1966 | 60.48 | " |
| 1967 | 68.19 | " |
| 1968 | 70.41 | " |

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 period of gestation. Out of a total of 152 premature births in 1968, 132 were born in hospitals or maternity homes within the National Health Service. 8 of these were still births. 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. The remaining 20 births occurred at home.

Table 3 shows that of the 20 births at home, 3 were transferred to hospital.

Table 2 (a)
BIRTHS - 1968

| DISTRICT | LIVE | | STILL | | TOTAL | |
|---------------------|--------------|------------|--------------|--------------|------------|--------------|
| | Legit | Illegit | Total | Legit | Illegit | Total |
| Urban - | | | | | | |
| Buckley | 215 | 9 | 224 | 4 | 1 | 5 |
| Connah's Quay | 236 | 12 | 248 | 1 | - | 1 |
| Flint M.B. | 261 | 12 | 273 | 7 | - | 7 |
| Holywell | 135 | 10 | 145 | 3 | - | 3 |
| Mold | 125 | 11 | 136 | 2 | - | 2 |
| Prestatyn | 168 | 15 | 178 | 3 | - | 3 |
| Rhyl | 265 | 44 | 309 | 4 | - | 4 |
| Rural - | | | | | | |
| Hawarden | 738 | 57 | 795 | 9 | - | 9 |
| Holywell | 380 | 18 | 398 | 3 | - | 3 |
| Maelor | 59 | 5 | 64 | - | - | - |
| St. Asaph | 196 | 19 | 215 | 3 | - | 3 |
| Total Urban | 1,400 | 113 | 1,513 | 24 | 1 | 25 |
| Total Rural | 1,373 | 99 | 1,472 | 15 | - | 15 |
| Whole County | 2,773 | 212 | 2,985 | 39 | 1 | 40 |
| | 219 | 10 | 229 | 219 | 10 | 229 |
| | 237 | 12 | 249 | 237 | 12 | 249 |
| | 268 | 12 | 280 | 268 | 12 | 280 |
| | 138 | 10 | 148 | 138 | 10 | 148 |
| | 127 | 11 | 138 | 127 | 11 | 138 |
| | 166 | 15 | 181 | 166 | 15 | 181 |
| | 269 | 44 | 313 | 269 | 44 | 313 |
| | 747 | 57 | 804 | 747 | 57 | 804 |
| | 383 | 18 | 401 | 383 | 18 | 401 |
| | 59 | 5 | 64 | 59 | 5 | 64 |
| | 199 | 19 | 218 | 199 | 19 | 218 |
| | 1,424 | 114 | 1,538 | 1,424 | 114 | 1,538 |
| | 1,388 | 99 | 1,487 | 1,388 | 99 | 1,487 |
| | 2,812 | 213 | 3,025 | 2,812 | 213 | 3,025 |

Table 2 (b)
BIRTHS AND BIRTH RATES - 1968
 (Live Births, Stillbirths and Total Births)

| DISTRICT | Number of Births | | Crude rate per 1000 population. | | * Adjusted rate per 1000 population | | Still-births Rate per 1,000 total births |
|---------------------|------------------|-----------|---------------------------------|------------|-------------------------------------|------------|--|
| | Live | Still | Live | Still | Live | Still | |
| Urban - | | | | | | | |
| Buckley | 224 | 5 | 23.9 | .53 | 27.24 | .60 | 21.83 |
| Connah's Quay | 248 | 1 | 22.7 | .09 | 23.38 | .09 | 4.01 |
| Flint M.B. | 273 | 7 | 18.9 | .48 | 19.47 | .49 | 25.00 |
| Holywell | 145 | 3 | 16.7 | .34 | 16.20 | .33 | 20.27 |
| Mold | 136 | 2 | 17.2 | .25 | 17.20 | .25 | 14.49 |
| Prestatyn | 178 | 3 | 13.3 | .22 | 19.68 | .33 | 16.57 |
| Rhyl | 309 | 4 | 14.3 | .18 | 15.87 | .19 | 12.77 |
| Rural - | | | | | | | |
| Hawarden | 795 | 9 | 19.3 | .21 | 19.68 | .21 | 11.19 |
| Holywell | 398 | 3 | 17.4 | .13 | 19.14 | .14 | 7.48 |
| Maelor | 64 | - | 13.1 | - | 14.54 | - | - |
| St. Asaph | 215 | 3 | 20.0 | .27 | 23.00 | .31 | 13.76 |
| Total Urban | 1,513 | 25 | 17.5 | .28 | 19.42 | .31 | 16.25 |
| Total Rural | 1,472 | 15 | 18.5 | .18 | 19.79 | .19 | 10.05 |
| Whole County | 2,985 | 40 | 18.0 | .24 | 19.62 | .26 | 13.22 |

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

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 3
PREMATURE BIRTHS

Number of premature births, i. e., live and still births of 5½ lbs. or less at birth (as adjusted by any notifications transferred in or out of the area).

| Weight at Birth | Premature live births | | | | | | | | | | | | Premature stillbirths | | | |
|--|-----------------------|-----|-----|-----|-----|-----|-----------------------------------|-----|-----|------|------|------|-----------------------|------|------------------------------|--|
| | Born in Hospital | | | | | | Born at home or in a nursing home | | | | | | Born | | | |
| | Died | | | | | | Died | | | | | | In Hospital | | At home or in a nursing home | |
| | (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) | (13) | (14) | | |
| 1) 2 lb 3 oz or less | 3 | 2 | - | - | - | - | - | - | - | - | - | 1 | - | - | | |
| 2) Over 2 lb 3 oz up to and including 3 lb 4 oz | 10 | 4 | - | - | - | - | - | - | - | - | - | 1 | - | | | |
| 3) Over 3 lb 4 oz up to and including 4 lb 6 oz | 31 | 2 | 1 | - | 1 | - | - | 1 | - | - | - | 4 | - | | | |
| 4) Over 4 lb 6 oz up to and including 4 lb 15 oz | 19 | 1 | - | - | 2 | - | - | 2 | - | - | - | 1 | 1 | | | |
| 5) Over 4 lb 15 oz up to and including 5 lb 8 oz | 61 | - | - | - | 13 | - | 1 | - | - | - | - | 1 | - | | | |
| 6) TOTAL | 124 | 9 | 1 | - | 16 | - | - | 3 | - | - | - | 8 | 1 | | | |

1=1,000g. or less; 2=1,001 - 1,500g; 3=1,501 - 2,000g; 4=2,001 - 2,250g; 5=2,251 - 2,500g

Table 4
DEATHS (GENERAL) 1968

Summary of Causes

| Cause of Death | Males | Females | Total | Percentage of Total Deaths |
|---|-------------|-------------|-------------|----------------------------|
| Enteritis and Other Diarrhoeal Diseases | - | 1 | 1 | .05 |
| Tuberculosis - respiratory | 3 | - | 3 | .14 |
| - other | 5 | 3 | 8 | .38 |
| Other Infective and Parasitic Diseases | 2 | 1 | 3 | .14 |
| Malignant Neoplasm - Stomach | 27 | 19 | 46 | 2.18 |
| - Lung, Bronchus | 68 | 17 | 85 | 4.03 |
| - Breast | 1 | 30 | 31 | 1.47 |
| - Uterus | - | 12 | 12 | .57 |
| Leukaemia | 6 | 5 | 11 | .52 |
| Other Malignant Neoplasms | 91 | 98 | 189 | 8.97 |
| Benign and Unspecified Neoplasms | 6 | 4 | 10 | .47 |
| Diabetes Mellitus | 5 | 5 | 10 | .47 |
| Other Endocrine etc. Diseases | 5 | 6 | 11 | .52 |
| Anaemias | 3 | 3 | 6 | .28 |
| Other Diseases of Blood etc. | - | 1 | 1 | .05 |
| Other Diseases of Nervous System etc. | 18 | 9 | 27 | 1.28 |
| Active Rheumatic Fever | 1 | - | 1 | .05 |
| Chronic Rheumatic Heart Disease | 8 | 22 | 30 | 1.42 |
| Hypertensive Disease | 24 | 33 | 57 | 2.70 |
| Ischaemic Heart Disease | 293 | 209 | 502 | 23.82 |
| Other Forms of Heart Disease | 51 | 78 | 129 | 6.12 |
| Cerebrovascular Disease | 132 | 238 | 370 | 17.56 |
| Other Diseases of Circulatory System | 20 | 38 | 58 | 2.75 |
| Influenza | 10 | 10 | 20 | .95 |
| Pneumonia | 58 | 64 | 122 | 5.79 |
| Bronchitis and Emphysema | 71 | 19 | 90 | 4.27 |
| Asthma | 1 | 1 | 2 | .09 |
| Other Diseases of Respiratory System | 13 | 12 | 25 | 1.19 |
| Peptic Ulcer | 16 | 5 | 21 | .99 |
| Appendicitis | 1 | - | 1 | .05 |
| Intestinal Obstruction and Hernia | 7 | 4 | 11 | .52 |
| Cirrhosis of Liver | 7 | - | 7 | .33 |
| Other Diseases of Digestive System | 3 | 14 | 17 | .81 |
| Nephritis and Nephrosis | 4 | 8 | 12 | .57 |
| Hyperplasia of Prostate | 9 | - | 9 | .43 |
| Other Diseases, Genito-Urinary System | 3 | 10 | 13 | .62 |
| Diseases of Musculo-Skeletal System | 5 | 5 | 10 | .47 |
| Congenital Anomalies | 11 | 14 | 25 | 1.19 |
| Birth Injury, Difficult Labour, etc. | 5 | 4 | 9 | .43 |
| Other Causes of Perinatal Mortality | 9 | 7 | 16 | .76 |
| Symptoms and Ill-Defined Conditions | 10 | 8 | 18 | .85 |
| Motor Vehicle Accidents | 24 | 4 | 28 | 1.33 |
| All Other Accidents | 18 | 21 | 39 | 1.85 |
| Suicide and Self-Inflicted Injuries | 3 | 5 | 8 | .38 |
| All Other External Causes | 1 | 2 | 3 | .14 |
| TOTALS | 1058 | 1049 | 2107 | - |

DEATHS FROM MALIGNANT DISEASES

Table 5 shows the deaths due to malignant diseases (cancer) and the rate per 1,000 of the population for each district.

The total deaths from cancer in 1968 fell to 374 from 376 in 1967. Many of these deaths are conditions of the aged, but the disturbing fact still remains that much could be done to prevent some of these deaths particularly deaths due to cancer of the lung, breast, uterus, and to a lesser extent the stomach. We know that cancer of the lung can be prevented by cutting out cigarette smoking and the other cancers referred to can be detected early and as such treated with very good results.

There was a slight decrease during the year in deaths due to cancer of the stomach, the total being 46, compared with 52 in 1967. Deaths due to cancer of the stomach are still higher in Wales and the differential has been maintained in the total figure for 1968.

Deaths due to cancer of the lung and bronchus showed a slight fall in 1968 - 85 compared with 98 in 1967. It is disturbing to see the rapid increase in deaths due to lung cancer in women in recent years and this increase occurred again in 1968. There was a small drop in deaths from cancer of the breast and uterus - 43 in 1968, compared with 45 in 1967. The high rate of deaths due to cancer of the breast is a sad commentary on our preventive services, particularly as this can be detected in the early stages by the patient and recovery after treatment in the early stages is so good. In a recent survey in the U.S.A. over 96% of patients with early breast cancer who had undergone operative treatment were alive and well five years later.

Deaths due to other forms of cancer as a group increased by 19 to a total of 189. This large group includes cancer of nearly every part of the body and the big total reminds us of the fact that cancer can attack virtually any part of the body and cause a large number of deaths each year.

From Table 5(a) it will be seen that of a total of 374 deaths due to cancer in 1968, 113 occurred between the ages of 65 and 75. However, 133 occurred under the age of 65 and many of these were due to conditions which could have been prevented (lung cancer) or detected in their early states (uterus and breast).

Much has been achieved in recent years in the early detection of various forms of cancer, when treatment is often effective and death can be prevented or delayed for many years. More screening techniques for early detection are being gradually introduced but the public must also co-operate in seeking medical advice when early symptoms or signs appear. Every woman knows, or should know, that it is essential to seek advice if she develops a lump in the breast or has irregular bleeding particularly at the end of the childbearing period. In the same way, every adult in this country has heard of the connection between heavy cigarette smoking and lung cancer.

Table 5
DEATHS FROM MALIGNANT DISEASES IN
THE VARIOUS COUNTY DISTRICTS

| District and Population | Sex | Stomach | Lung, Bronchus | Breast | Uterus | Other | Leukaemia | Total | Rate per 1000 Population |
|--------------------------------|-----|---------|-------------------|--------|--------|-------|-----------|-------|--------------------------------|
| Buckley U.D(9,360) | M | - | 5 | - | - | 4 | - | 9) | 2.13 |
| | F | 1 | 2 | 2 | - | 6 | - | 11) | |
| Connah's Quay U.D. (10,940) | M | 2 | 3 | - | - | 7 | - | 12) | 1.82 |
| | F | 1 | - | 1 | 2 | 3 | 1 | 8) | |
| Flint M.B (14,460) | M | 4 | 5 | - | - | 9 | - | 18) | 2.14 |
| | F | 2 | 1 | 5 | - | 5 | - | 13) | |
| Holywell U.D (8,680) | M | 1 | 4 | - | - | 1 | - | 6) | 1.49 |
| | F | - | 1 | 2 | 1 | 3 | - | 7) | |
| Mold U.D.(7,900) | M | 2 | 2 | - | - | 3 | - | 7) | 1.89 |
| | F | - | - | 1 | 1 | 6 | - | 8) | |
| Prestatyn U.D (13,430) | M | 4 | 7 | - | - | 3 | 1 | 15) | 2.15 |
| | F | 2 | 4 | 2 | 1 | 13 | 2 | 24) | |
| Rhyl U.D (21,660) | M | 3 | 9 | - | - | 16 | 1 | 29) | 2.86 |
| | F | 4 | 3 | 6 | - | 20 | - | 33) | |
| Hawarden R.D (41,280) | M | 7 | 15 | - | - | 27 | 2 | 51) | 2.03 |
| | F | 4 | 3 | 5 | 3 | 17 | 1 | 33) | |
| Holywell R.D(22,840) | M | 2 | 13 | 1 | - | 10 | 1 | 27) | 2.32 |
| | F | 4 | 1 | 3 | 2 | 15 | 1 | 26) | |
| Maellor R.D (4,880) | M | 1 | 3 | - | - | 2 | - | 6) | 1.63 |
| | F | - | - | 1 | - | 1 | - | 2) | |
| St. Asaph R.D(10,730) | M | 1 | 2 | - | - | 9 | 1 | 13) | 2.70 |
| | F | 1 | 2 | 2 | 2 | 9 | - | 16) | |
| Total Urban(86,430) | M | 16 | 35 | - | - | 43 | 2 | 96) | 2.31 |
| | F | 10 | 11 | 19 | 5 | 56 | 3 | 104) | |
| Total Rural (79,730) | M | 11 | 33 | 1 | - | 48 | 4 | 97) | 2.18 |
| | F | 9 | 6 | 11 | 7 | 42 | 2 | 77) | |
| Whole County (166,160) | M | 27 | 68 | 1 | - | 91 | 6 | 193) | 2.25 |
| | F | 19 | 17 | 30 | 12 | 98 | 5 | 181) | |
| Total (M and F) | | 46 | 85 | 31 | 12 | 189 | 11 | 374 | - |

Table 5 (a)

**AGES OF DEATHS FROM MALIGNANT DISEASES AND HEART
AND CIRCULATORY DISEASES**

| Disease | Sex | AGE GROUPS | | | | | | | | | | Total |
|---|-----|------------|-----|-----|------|------|------|------|------|------|-----|-------|
| | | 0 - | 1 - | 5 - | 15 - | 25 - | 35 - | 45 - | 55 - | 65 - | 75 | |
| Tuberculosis: | | | | | | | | | | | | |
| Respiratory | M | - | - | - | - | - | - | - | 1 | 1 | 1 | 3 |
| " | F | - | - | - | - | - | - | - | - | - | - | - |
| Other | M | - | - | - | 1 | - | - | - | 2 | - | 2 | 5 |
| " | F | - | - | - | - | - | - | - | - | 1 | 2 | 3 |
| Totals | | - | - | - | 1 | - | - | - | 3 | 2 | 5 | 11 |
| Malignant Diseases: | | | | | | | | | | | | |
| Stomach | M | - | - | - | - | - | - | 2 | 5 | 10 | 10 | 27 |
| " | F | - | - | - | - | - | - | 1 | 4 | 3 | 11 | 19 |
| Lung Bronchus | M | - | - | - | - | - | 3 | 6 | 21 | 24 | 14 | 68 |
| " | F | - | - | - | - | - | 1 | 1 | 7 | 5 | 3 | 17 |
| Breast | M | - | - | - | - | - | - | - | - | 1 | - | 1 |
| " | F | - | - | - | - | - | 3 | 8 | 4 | 10 | 5 | 30 |
| Uterus | F | - | - | - | - | 2 | - | 3 | 1 | 6 | 12 | 12 |
| Other | M | - | - | - | - | 1 | 10 | 18 | 30 | 32 | 91 | 91 |
| " | F | - | - | - | 1 | - | 5 | 2 | 19 | 27 | 44 | 98 |
| Leukaemia | M | - | - | 1 | - | - | - | 1 | 2 | 1 | 1 | 6 |
| " | F | - | 1 | - | - | - | - | - | 1 | 1 | 2 | 5 |
| Totals | | - | 1 | 1 | 1 | - | 15 | 31 | 84 | 113 | 128 | 374 |
| Heart and Circulation: | | | | | | | | | | | | |
| Cerebrovascular Dis | M | - | - | - | - | - | 2 | 4 | 19 | 43 | 64 | 132 |
| " | F | - | - | - | 1 | - | 2 | 9 | 16 | 58 | 152 | 238 |
| Ischaemic Heart Dis | M | - | - | - | - | - | 6 | 20 | 76 | 108 | 83 | 293 |
| " | F | - | - | - | - | - | 2 | 4 | 18 | 55 | 130 | 209 |
| Hypertensive Disease | M | - | - | - | - | 1 | - | - | 9 | 5 | 9 | 24 |
| " | F | - | - | - | - | - | 1 | 3 | 5 | 9 | 15 | 33 |
| Chronic Rheumatic Heart Disease | M | - | - | - | - | - | - | 1 | 2 | 2 | 3 | 8 |
| " | F | - | - | - | - | - | - | 1 | 5 | 7 | 9 | 22 |
| Other Forms of Heart Disease | M | - | - | - | - | 1 | - | 1 | 7 | 8 | 34 | 51 |
| " | F | - | - | - | - | - | - | - | 2 | 15 | 61 | 78 |
| Other Diseases of Circulatory System | M | - | - | - | - | - | - | - | 3 | 7 | 10 | 20 |
| " | F | - | - | - | - | - | - | - | 4 | 5 | 29 | 38 |
| TOTALS | | - | - | - | 1 | 2 | 13 | 43 | 166 | 322 | 599 | 1146 |

DEATHS ATTRIBUTABLE TO INFECTIOUS DISEASE

During the year 1968 deaths attributable to infectious disease were as follows:-

| | |
|--|-----|
| Diphtheria | - |
| Whooping Cough | - |
| Meningococcal Infections | - |
| Acute Poliomyelitis | - |
| Measles | - |
| Other infective and Parasitic Diseases | 3 |
| Influenza | 20 |
| Pneumonia | 122 |
| Bronchitis | 90 |
| Gastritis, Enteritis and Diarrhoea | 1 |

It will be noted that there were no deaths during 1968 from the major infectious conditions - which is a remarkable testimony if such were needed to the effectiveness of our vaccination and immunisation campaigns.

Infectious diseases have ceased to be major killing diseases of infants and young persons and this position can be maintained if the public will make full use of the protective vaccines now available to prevent them. Influenza, pneumonia and bronchitis deaths are mainly terminal conditions in the elderly and not true "primary" infectious diseases like polio or meningitis.

Facilities for the treatment of infectious illness in hospital are still available at Isolation Hospitals at Colwyn Bay, Clatterbridge and Wrexham. Beds for suspected smallpox cases are available in the Liverpool area and these serve the whole of North Wales and Merseyside.

DEATHS OF INFANTS AGED UNDER TWELVE MONTHS - During the year 51 infants died before attaining the age of twelve months, and of these 28 were males and 23 females, whilst 47 were legitimate and 4 were illegitimate.

The infant mortality rate (deaths per 1,000 live births) is therefore 17.0, which is lower than the rate for England and Wales, namely, 18.0.

The causes of death of the 51 infants are given in Table 6. In the present state of our knowledge little can be done to reduce the number of deaths due to congenital malformations,

It should be noted that of the 51 deaths in the first year of life, 32 had died in the first week of life (early neo-natal deaths) and at the end of four weeks after birth the total deaths was 37 (neo-natal deaths). It will be noted that the majority of deaths occur in the first week of life and, indeed, in the first 48 hours of life. This position is explained by the developments in ante-natal care and paediatrics, which results in fewer miscarriages and still births, and means that more premature and other "weakly" babies are born alive - but fail to survive more than a few hours or days.

The present position will continue until more is known about the causes of prematurity and congenital deformity.

The prospects for the full-term healthy baby are better than ever - only 14 babies died in the last 11 months of their first year.

During the year we continued to notify all infants born with any form of congenital deformity to the Ministry of Health on special forms supplied. The purpose of this scheme is to enable the Ministry of Health to get accurate information about the nature and number of deformities occurring. Should there be any significant change in the number of any particular deformity immediate action can be taken to investigate this.

Table 6

INFANTILE DEATHS, 1968

(Under one year of age)

| District | Males | | | Females | | | Infants Legit and Illegit |
|---------------------|-----------|----------|-----------|-----------|----------|-----------|------------------------------|
| | Legit | Illegit | Total | Legit | Illegit | Total | |
| Urban: | | | | | | | |
| Buckley | 3 | - | 3 | 1 | - | 1 | 4 |
| Connah's Quay | 1 | 1 | 2 | 3 | - | 3 | 5 |
| Flint M.B. | 4 | - | 4 | 2 | - | 2 | 6 |
| Holywell | 1 | - | 1 | - | - | - | 1 |
| Mold | 1 | - | 1 | - | - | - | 1 |
| Prestatyn | - | - | - | 1 | - | 1 | 1 |
| Rhyl | - | - | - | 2 | - | 2 | 2 |
| Rural: | | | | | | | |
| Hawarden | 8 | - | 8 | 7 | - | 7 | 15 |
| Holywell | 6 | - | 6 | 3 | 1 | 4 | 10 |
| Maelor | 2 | 1 | 3 | - | - | - | 3 |
| St. Asaph | - | - | - | 2 | 1 | 3 | 3 |
| Total Urban | 10 | 1 | 11 | 9 | - | 9 | 20 |
| Total Rural | 16 | 1 | 17 | 12 | 2 | 14 | 31 |
| Whole County | 26 | 2 | 28 | 21 | 2 | 23 | 51 |

The causes of death were:

| | <u>Males</u> | <u>Females</u> | <u>Total</u> |
|---|--------------|----------------|--------------|
| Accidents | 1 | 2 | 3 |
| Birth Injury, Difficult Labour etc. | 5 | 4 | 9 |
| Congenital Abnormalities | 7 | 7 | 14 |
| Enteritis and Other Diarrhoeal Diseases | - | 1 | 1 |
| Intestinal Obstruction and Hernia | 2 | - | 2 |
| Other Endocrine etc. Diseases | 1 | 1 | 2 |
| Other Causes of Perinatal Mortality | 9 | 7 | 16 |
| Pneumonia | 2 | 1 | 3 |
| Other Diseases of Respiratory System | 1 | - | 1 |
| | <u>28</u> | <u>23</u> | <u>51</u> |

TABLE 6 (a)

NEO-NATAL DEATHS 1968

(Under 4 weeks of age)

| District | Males | | | Females | | | Infants Legit and Illegit |
|---------------------|-----------|----------|-----------|-----------|----------|-----------|------------------------------|
| | Legit | Illegit | Total | Legit | Illegit | Total | |
| Urban: | | | | | | | |
| Buckley | 2 | - | 2 | 1 | - | 1 | 3 |
| Connah's Quay | 1 | 1 | 2 | 2 | - | 2 | 4 |
| Flint M.B. | 3 | - | 3 | 2 | - | 2 | 5 |
| Holywell | - | - | - | - | - | - | - |
| Mold | 1 | - | 1 | - | - | - | 1 |
| Prestatyn | - | - | - | 1 | - | 1 | 1 |
| Rhyl | - | - | - | 1 | - | 1 | 1 |
| Rural: | | | | | | | |
| Hawarden | 7 | - | 7 | 4 | - | 4 | 11 |
| Holywell | 5 | - | 5 | 1 | - | 1 | 6 |
| Maelor | 2 | - | 2 | - | - | - | 2 |
| St. Asaph | - | - | - | 2 | 1 | 3 | 3 |
| Total Urban | 7 | 1 | 8 | 7 | - | 7 | 15 |
| Total Rural | 14 | - | 14 | 7 | 1 | 8 | 22 |
| Whole County | 21 | 1 | 22 | 14 | 1 | 15 | 37 |

Table 6 (b)

INFANT DEATHS, 1968

(Infants under one week of age)

| District | Males | | | Females | | | Infants |
|---------------|-------|---------|-------|---------|---------|-------|-------------------|
| | Legit | Illegit | Total | Legit | illegit | Total | Legit and Illegit |
| Urban:- | | | | | | | |
| Buckley | 1 | - | 1 | 1 | - | 1 | 2 |
| Connah's Quay | 1 | 1 | 2 | 2 | - | 2 | 4 |
| Flint M.B. | 3 | - | 3 | 2 | - | 2 | 5 |
| Holywell | - | - | - | - | - | - | - |
| Mold | 1 | - | 1 | - | - | - | 1 |
| Prestatyn | - | - | - | 1 | - | 1 | 1 |
| Rhyl | - | - | - | 1 | - | 1 | 1 |
| Rural:- | | | | | | | |
| Hawarden | 3 | - | 3 | 4 | - | 4 | 7 |
| Holywell | 5 | - | 5 | 1 | - | 1 | 6 |
| Maelor | 2 | - | 2 | - | - | - | 2 |
| St. Asaph | - | - | - | 2 | 1 | 3 | 3 |
| Total Urban | 6 | 1 | 7 | 7 | - | 7 | 14 |
| Total Rural | 10 | - | 10 | 7 | 1 | 8 | 18 |
| Whole County | 16 | 1 | 17 | 14 | 1 | 15 | 32 |

MATERNAL MORTALITY - There were no deaths 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 causes 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 indicating 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 1,000 population | *Rate adjusted per 1,000 population |
|----------------|-------|---------|-------|---------------------------------|-------------------------------------|
| Urban - | | | | | |
| Buckley | 51 | 49 | 100 | 10.7 | 13.05 |
| Connah's Quay | 46 | 42 | 88 | 8.0 | 13.52 |
| Flint (M.B.) | 79 | 73 | 152 | 10.5 | 13.02 |
| Holywell | 56 | 53 | 109 | 12.6 | 8.19 |
| Mold | 61 | 46 | 107 | 13.5 | 16.33 |
| Prestatyn | 121 | 144 | 265 | 19.7 | 10.44 |
| Rhyl | 177 | 177 | 354 | 16.3 | 12.38 |
| Rural - | | | | | |
| Hawarden | 228 | 215 | 443 | 10.7 | 11.98 |
| Holywell | 153 | 137 | 290 | 12.7 | 11.93 |
| Maelor | 31 | 25 | 56 | 11.5 | 11.50 |
| St. Asaph | 55 | 88 | 143 | 13.3 | 11.70 |
| Total Urban | 591 | 584 | 1175 | 13.6 | 11.69 |
| Total Rural | 467 | 465 | 932 | 11.7 | 11.81 |
| Whole County | 1058 | 1049 | 2107 | 12.7 | 11.81 |

* Adjusted by comparability factor for purpose 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 groups 45-64 | 138 | 83 | 221 |
| Deaths in age groups 65 and over | 409 | 469 | 878 |
| TOTALS | 547 | 552 | 1099 |

Rural Districts

| | Males | Females | Total |
|----------------------------------|------------|------------|------------|
| Deaths in age groups 45-64 | 135 | 70 | 205 |
| Deaths in age groups 65 and over | 295 | 361 | 656 |
| TOTALS | 430 | 431 | 861 |

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 Nation Health Service Acts, and parts of the National Assistance Act and Public Health Act.

The Health Department is administered centrally from Mold there being no divisional administration. Day to day administration of certain services however is carried out from three sub-centres based at Rhyl, Connah's Quay and Mold. At these centres a person is on duty all day who will deal with requests by callers and on the phone and either arrange to provide a service or pass the request to the person responsible for this service, e.g. the senior nurse for the area or county nursing officer. Hospitals, doctors and other workers also use these centres and they have proved valuable to all concerned and are much appreciated by the public in the areas served. The Rhyl Sub-Centre has an Assistant Home Help Organiser based there and day to day administration of the Home Helps in the Western area is carried out from Rhyl.

We continued during the year to make use of the County Ambulance Headquarters for handling all calls for health department services outside office hours, nursing, home help, mental welfare officers, medical problems etc. A rota of staff on duty being made available to

the Ambulance Headquarters weekly. As the Ambulance Headquarters is open every day and all night, one call will ensure that the person needed is contacted and can then deal with the problem or contact the caller if necessary. This service has proved so effective in providing one telephone number for all calls outside office hours that the facility has been made available to the Children's Department and the Welfare Department.

In addition to the Health Committee which meets quarterly, there are three Area Health Sub-Committees. On all these Committees, in addition to County Council members, there are representatives of District Councils, statutory bodies and voluntary organisations. There is also a Health (General Purposes) Sub-Committee (which now incorporates the Ambulance Service) and urgent matters requiring attention between meetings of the Health Committee are referred to this Sub-Committee.

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

The Health Department also carries out medical examination of all employees on initial employment and subsequently after illness of over four weeks in certain cases where the medical evidence for continued absence is inadequate or the employee has had frequent absences in the past.

The practice of examining employees off work for long periods is operated as a modified form of an Industrial Health Service and in this way we work closely with General Practitioners and Hospital Staff. Very often we are able to help employees to obtain health services as well as checking their continued absences from work.

With the withdrawal of the semi-static mass x-ray service it became more difficult to arrange a chest x-ray examination of all new employees, which had been our policy for years. We made arrangements for chest x-ray examinations with the consultant radiologists at Rhyl and Wrexham but only insisted on routine examinations of staff coming into close and regular contact with children, e.g. teachers, nurses, social workers, etc. In other cases, e.g. manual workers, clerical staff, technical staff, etc., we arrange a chest x-ray only if the applicants give a history of chest illness. The new arrangements have worked very well during the year and will be continued in the future.

With the establishment of the Gwynedd Police Force the Flintshire Police Force ceased to exist as a separate entity. All medical work for the Gwynedd Force is carried out by a Police Surgeon based at

Caernarvon. A certain amount of medical work for the increasing number of civilian staff in the police force is undertaken by the County Health Department.

Medical examinations and other medical work for the Fire Service continue to be carried out by the department's medical staff. The County Medical Officer and his staff also carry out work for the Road Fund Licensing Committee. The work entails the medical examination of persons who apply for Driving Licences where there is some doubt as to their fitness to hold full licences. Often, in addition to medical examinations, this work entails the obtaining of reports from Consultants and from Hospitals. Each case referred to the Department entails a considerable amount of work, as most of the applicants have a right to appeal against decisions and therefore it is necessary for all investigations which may be desirable in coming to a decision as to fitness to drive, to be carried out before a final recommendation is made to the Road Fund Committee.

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 again like to thank the Child Welfare Voluntary Committees for their valuable and loyal service during the year. Many of the Committees have given items to the Clinics which they are concerned with, or money to purchase various additional items of equipment for the Clinics. The Committees also help individual mothers in need and made available at reduced cost fireguards for use in homes with small children.

During the year the Flintshire Branch of the National Society for Mentally Handicapped Children continued to give valuable service for those attending the Junior Training Centre at Tirionfa, those attending the Adult Training Centre at Greenfield and parents of mentally handicapped children at home.

The County Medical Officer administers two funds to which money is contributed by individuals and various Voluntary Organisations, one fund is to help the physically handicapped and the other to help mentally disordered - both subnormal and the mentally ill.

During the year Mr. Guy was appointed as Liaison Officer to help make better and fuller use of voluntary effort in the county, both by organisations and individuals. Meetings of all voluntary organisations were held in early 1968, and officers concerned with social services attended with Mr. Guy and outlined the kind of help voluntary organisations could give, and the ways the county departments could help the voluntary bodies with training and support when additional skilled help was necessary. Working together both the statutory bodies and the

voluntary organisations can give a much better service to the community than working separately with only occasional contact over some specific issue.

I would like, in particular, to pay tribute to the work done by the Marriage Guidance Council during 1968, the Women's Voluntary Service, the British Red Cross Society, St. John's Ambulance Brigade and the St. Asaph Diocesan Moral Welfare Association.

CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE

Expectant and Nursing Mothers - During the year, the "combined" Ante-Natal Clinics, established at Connah's Quay, Holywell, Mold, and Rhyl, continued to function.

It is pleasing to record that attendance at these ante-natal clinics has shown a marked increase in the past few years and that the clinics are used by general practitioners for screening mothers for selection of hospital cases and for consultation when any abnormalities occur.

Attendances at Ante-Natal Clinics continued at a very high level in 1968 and a total of 1700 new mothers were seen who made 6668 attendances and this excluded 195 post-natal attendances. For the convenience of mothers an appointment system is now in use at all clinics. The basis of this is that new cases attend at the commencement of the session mainly by appointment (some come without appointment being referred by their general practitioner at short notice because of suspected obstetric abnormality). Mothers attending as subsequent cases come later in the session, all by appointment arranged at the prior clinic.

Facilities are available at these combined clinics for full ante-natal examination and all usual investigations are carried out. There are adequate facilities for the mothers to be interviewed privately, to undress and for waiting prior to seeing the doctor. Blood samples are taken from each mother for Rh. factor, grouping and haemoglobin. At each visit to the clinic urine is tested, blood pressure taken and the patient weighed. Further investigations such as chest x-ray, etc., are arranged if found necessary at routine ante-natal examination.

Post-natal examinations are also carried out at ante-natal clinics and it will be seen that 181 mothers attended for post-natal examinations during the year. This is not the total who had post-natal examinations carried out as many were done by General Practitioners as part of their obstetric care of their patients and these figures are not included in the above total.

Mothercraft clinics continued to be held at various centres in the county during the year. These clinics are educational clinics for mothers and are attended by midwives and health visitors. The clinics are particularly helpful to women expecting their first baby and are open to mothers having home or hospital confinement.

I would like to thank Mr. Parry-Jones, Mr. Whitehouse and Mr. Humphreys, the Consultant Obstetricians and Gynaecologists for the Clwyd and Deeside Hospital Management Committee and Wrexham, Powys and Mawddach Hospital Management Committee areas, for their help and co-operation during the year in providing very excellent consultant ante-natal cover for the whole County.

Attendances at ante-natal clinics have been well maintained during the year, and Table 8 gives the figures for 1968 in this respect.

The Family Planning Clinics at Flint, Mold, Prestatyn and Rhyl operated by The Family Planning Association continued to function during the year. The Clinics are held weekly, numbers of new patients and attendances are given below: -

| <u>Clinic</u> | <u>No. of Sessions held</u> | <u>No. of patients</u> |
|---------------|-----------------------------|------------------------|
| Flint | 51 | 346 |
| Mold | 42 | 309 |
| Prestatyn | 50 | 205 |
| Rhyl | 50 | 351 |

Very hard working bodies of voluntary helpers run the above clinics and they are also attended by a doctor and nurse, both trained by the Family Planning Association. Valuable help and advice is given at the clinics also to women with problems of sub-fertility or marital difficulties and advice is given also to young persons before marriage.

Cervical Cytology:

Cervical smears are now examined at the Pathology Laboratories at Rhyl, Chester and Wrexham, where specially trained staff examine the smears. Women 35 years of age and over can have cervical smears taken at Health Department Clinics held in the evening at Rhyl and Connah's Quay, or by their own General Practitioners. Cervical smears are also taken on request at Family Planning Clinics.

Smears taken during 1968:-

| <u>Local Health Authority</u> | <u>General Practitioner</u> | <u>Family Planning Association</u> | <u>Total</u> |
|-------------------------------|-----------------------------|------------------------------------|--------------|
| 583 | 595 | 677 | 1855 |

Of these 9 were positive and were referred to a Consultant Obstetrician for further investigation and treatment. All cases referred for further investigation did, in fact, attend and accepted the treatment recommended. A certain number of smears are reported as doubtful or suspicious and these patients attend for a further smear a month or two later.

A great deal more smears could be examined at the Laboratories but we find it still difficult to persuade women to come forward for the examination although considerable publicity has been given to this new service.

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 1968, 202 outfits were issued compared with 212 in 1967.

Table 8

ANTE-NATAL CLINICS, 1968

| | Holywell | Connah's Quay | Mold | Rhyl | Totals |
|--|----------|---------------|------|------|--------|
| A - ANTE-NATAL CASES | | | | | |
| 1. Number of sessions (i.e., number of times Clinic opened during the year) when:- | | | | | |
| (a) A Medical Officer was in attendance | - | - | - | - | - |
| (b) A midwife was in attendance | - | - | 10 | - | 10 |
| (c) A General Practitioner employed by Local Health Authority on a sessional basis was in attendance | - | - | - | - | - |
| (d) Hospital Medical Staff in attendance | 51 | 48 | 40 | 49 | 188 |
| (e) Total sessions | 51 | 48 | 50 | 49 | 198 |
| 2. Number of patients attending for the first time this year. | 418 | 388 | 214 | 680 | 1700 |
| 3. Total attendances | 1902 | 1583 | 1269 | 1914 | 6668 |
| B - POST-NATAL CASES | | | | | |
| 1. Number of sessions (i.e., number of times Clinic opened during the year) when:- | | | | | |
| (a) A Medical Officer was in attendance | - | - | - | - | - |
| (b) A Midwife was in attendance | - | - | - | - | - |
| (c) A General Practitioner employed by Local Health Authority on a sessional basis was in attendance | - | - | - | - | - |
| (d) Hospital Medical Staff in attendance | 27 | 7 | 40 | 18 | 92 |
| (e) Total sessions | 27 | 7 | 40 | 18 | 92 |
| 2. Number of patients attending for the first time this year | 31 | 7 | 117 | 26 | 181 |
| 3. Total attendances | 32 | 8 | 129 | 26 | 195 |

NOTE:- Clinics are combined with the Hospital Consultant Clinics.

Table 9

MOTHER AND BABY HOMES (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 (6) | Number of admissions in Col.(6) for which the authority was responsible. (7) | 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) | (7) | (8) | (9) |
| (a) Provided by the Authority:- Bersham Hall - used jointly by the North Wales Counties of Anglesey, Caernarvon, Denbigh, Flint, Merioneth and Montgomery, and administered by the C.M.O., Denbighshire. | 18 | - | - | 12 | 56 (i.e. Total admissions from all Authorities) | 25 (Flintshire Cases) | 34 days | 22 days |
| (b) Provided or used by Voluntary Organisations with which the Authority make arrangements under Sec.22(1) or to which the Authority make payment under Sec.22(5) | - | - | - | - | - | - | - | These figures relate to Flintshire cases only |
| (c) Number of cases sent by the Authority during the year to homes other than those mentioned in (a) and (b) above, payment being made on an "ad hoc" basis:- | | | | | | | | |
| (1) Expectant Mothers 2 | | | | | | | | |
| (2) Post-Natal Cases - | | | | | | | | |

* Exclusive of the lying-in period.

Child Welfare: With the reduction in infant deaths and the improvement in child management by the majority of parents, the pattern of the child welfare service provided by the department has gradually changed in the last few years. The aim now is to provide more intensive help to a smaller number of families where there are children with physical, mental or emotional problems. This does not mean that help is not available to the mother with a healthy child who wants advice or support - these mothers are told where a health visitor can be contacted in their area at any time.

All babies are visited in the first week or two after birth by a health visitor and an outline of the services available given to the mother. The mother is advised to bring the baby to the clinic for a full examination before reaching 12 weeks of age and if no abnormality is found there is no need to attend again until the baby is six months old unless the mother wants advice. Routine examinations are subsequently carried out on each birthday until the child is five years of age and enters school.

During the examinations certain developmental tests are carried out and recorded at each visit. Children found to have any abnormality are assessed in consultation with the general practitioner by a paediatrician and followed up at regular intervals. An important aspect of this work is giving support and advice to the parents on the management and care of the child.

As mentioned in previous reports some General Practitioners conduct their own infant welfare clinics for their own patients and we have General Practitioners also conducting clinics for this authority on a sessional basis. It is our policy to offer every help to the General Practitioners who do their own infant clinics by allowing health visitors and nurses to attend and assist in this work. This practise by General Practitioners is encouraged and will probably increase in the coming years with greater integration of community health services. We help in this work also by arranging for detailed assessment and follow up of children referred to us by the General Practitioners who require detailed investigation, a procedure which is often time-consuming and spread over a period of time and may involve several hospital and other investigations.

As in previous years, a considerable proportion of the immunisation and vaccination of infants in the County is carried out at Child Welfare Clinics. It is estimated that a little over 50% of all immunisation and vaccination done in the County is carried out at Clinics, the remainder being carried out by General Practitioners in their own surgeries.

With the employment of more Clinic Nurses at Child Welfare Clinics throughout the County, Health Visitors have more time to carry out valuable health education work at Clinics. The extra time available to Health Visitors for this work is very much appreciated and serves a very useful purpose at all the main Centres.

At two Centres in the County a Consultant Paediatrician attends to deal with babies referred to her by General Practitioners or Clinic Doctors, whose advice and help is required which may not necessitate special investigation or hospital admission.

In addition to static Clinics, the Authority also operates a Mobile Clinic at seven Centres in the rural parts of the County. The Mobile Clinic attends each location every two weeks, and a Doctor and Health Visitor attend each time. The Mobile Clinic is an all-purpose Clinic, and undertakes all forms of work at each visit. Infant work, school-children, immunisation, ante-natal examinations and medical examinations of employees.

Before erecting any new clinic in the county all general practitioners in the area are approached to ascertain if they are interested in practice premises in the area - so that a Health centre could be erected. During the year all doctors in St. Asaph were interested in joint use of premises with the health department and it is planned to build on to the present building and convert it into a health centre early in 1969. This will be the first health centre in the county and it is hoped to gain valuable experience from this project for other health centres which may be requested later in other parts of the county. It is felt that rapidly developing areas of the county without clinic facilities or general practitioners' surgeries should be considered first as possible areas for the establishment of health centres and general practitioners in these areas are being approached to ascertain their views.

At the end of the year the number of Mothers' Clubs established had increased to seventeen. Clinic premises were made available to mothers to meet once a week and to bring with them their toddlers.

A recent innovation which may well have a beneficial effect on child development and improve the level of child care in general has been the introduction of Pre-School Play Groups in various parts of the county and the health department has helped in every way to foster them and in some places they meet in the County clinics.

Pre-School Play Groups cater specially for children between three to five years of age and are designed to enable children to take part in constructive play and to encourage them to mix and participate in activities with other children. These groups are run by the mothers and, in the absence of nursery schools, play an important part in fostering

the healthy development of young children. At the end of the year 24 Pre-School Play Groups had been established.

The Child Welfare Services continue to form an integral part of the National Health Service, meeting a need in providing help and advice to mothers on the care and management of babies and toddlers, and working closely with General Practitioners and Hospital Staff.

Care of Premature Infants: During the year under review the number of premature live births which occurred at home or in a nursing home was 19.

Of the 20 births at home and in nursing homes 17 were nursed entirely at home and 3 were transferred to hospital. Seven of those who were born at home and who were transferred to hospital survived 28 days. There is no special domiciliary provision for premature live births, but liaison with the City Hospital, Chester, H.M. Stanley Hospital, St. Asaph, and the Maelor General Hospital, Wrexham, has always been good, and admission of cases readily obtained.

The Maternity Departments at the above three Hospitals have premature baby nurseries with specially trained staff. Premature babies born on the district are transferred into these Units in special incubators which are picked up at the Hospitals and conveyed in the County ambulances to the Home, and then the baby is transferred to the Unit accompanied by a nurse from the premature baby nursery.

Premature babies born in Hospital or on a district and later transferred to Hospital are not discharged home until a report on the home conditions has been sent to the Hospital by the Health Visitor for the area concerned. This report on the home conditions serves two purposes:-

1. To make sure that the home is suitable for the discharge of the baby; and
2. To inform the Health Visitor when the baby is being discharged so that adequate follow-up and advice can be given during the crucial first days or weeks that a premature baby is being cared for at home, and this is particularly important during the colder months of the year.

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.

A meeting is held each year with representatives of all the voluntary workers from the various Clinics to discuss with them the range of foods to be kept at Centres and to be made available for infants and expectant mothers. The range of foods kept at Welfare Centres have been extended to include special foods for the aged, particularly foods that will help maintain health where diet is inadequate. All foods sold at Welfare Centres are sold at special Welfare Centre rates and many of them are packed in special Welfare containers. A request is also made to voluntary workers at Centres not to keep a bigger range of products than is asked for by mothers of infants, expectant mothers or likely to be requested by old people. In this way competition with chemists and other stores is avoided.

DAILY MINDERS AND REGISTERED NURSERIES 1968

| | Nurseries and Child Minders Regulation Act, 1948 | | Daily Minders Registered at end of year. | National Health Service Act, 1946, Section 22 |
|--|--|------------------------|--|--|
| | Premises Registered at end of year | | | |
| | Factory (1) | Other Nurseries (2) | | |
| Number | - | 2 | 3 | - |
| Number of Places-(Cols. (1) and (2)) and number of children minded at end of year (Col. (4)) | - | 55 | 10 | - |
| | | | | Daily Minders receiving fees from the Authority at end of year. (4) |

Table 10 (a)

CHILD WELFARE CLINICS

| Year: | 1961 | 1962 | 1963 | 1964 | 1965 | 1966 | 1967 | 1968 |
|---|-------|-------|-------|-------|-------|-------|-------|-------|
| Number of Registered Live Births | 2715 | 2653 | 2781 | 3007 | 2929 | 2767 | 2831 | 2985 |
| Children who attended during the year and who, at the end of the year, were:- | | | | | | | | |
| (a) Under 1 year of age | 1864 | 1844 | 1871 | 2045 | 2199 | 1983 | 2100 | 2331 |
| (b) Between 1 - 5 years | 2527 | 3165 | 2894 | 3080 | 2950 | 3521 | 3357 | 2994 |
| Total Attendances | 34056 | 33623 | 32556 | 38947 | 42378 | 41875 | 42752 | 43846 |

Table 10 (b)

CHILD WELFARE CENTRES 1968

(see also Table 10 (c) for Centres held in Mobile Clinic)

| | Baglill | Bodelwyddan | Broughton | Buckley | Caerwrtle | Caerwys | Conah's Quay | Flint | Greenfield | Holywell | Leeswood | Mancof | Mold | Maeston | Nwydd Isaf | Penley | Frestayn | Rhyl (Fordlas) | Rhyl (Metcler House) | Salney | Sealand | Shotton | St. Asaph | Tala |
|--|---------|-------------|-----------|---------|-----------|---------|--------------|-------|------------|----------|----------|--------|------|---------|------------|--------|----------|----------------|----------------------|--------|---------|---------|-----------|-------|
| 1. Number of Sessions held by:- | | | | | | | | | | | | | | | | | | | | | | | | |
| (a) Medical Officers | 24 | 24 | 22 | 23 | 23 | 23 | 23 | 25 | 23 | 23 | 12 | 23 | 24 | 23 | 11 | - | 23 | 24 | 22 | 24 | 24 | 24 | 24 | 406 |
| (b) Health Visitors (without Doctor) | 26 | - | 28 | 27 | 28 | 23 | 26 | 24 | 28 | 28 | 10 | 28 | 26 | - | 12 | - | 28 | 27 | 28 | 26 | 26 | 27 | 474 | |
| (c) General Practitioners employed by Local Health Authority on seasonal basis | | | | | | | | | | | | | | | | 22 | | | | | | | | 22 |
| (d) Hospital Medical Staff | 50 | 24 | 50 | 50 | 51 | 23 | 49 | 49 | 51 | 51 | 22 | 51 | 50 | 23 | 23 | 22 | 51 | 48 | 50 | 50 | 50 | 51 | 24 | 964 |
| (e) Total Sessions | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Number of infants who attended and who were born:- | | | | | | | | | | | | | | | | | | | | | | | | |
| (a) 1968 | 58 | 28 | 95 | 202 | 72 | 9 | 268 | 172 | 68 | 89 | 47 | 107 | 172 | 33 | 30 | 27 | 112 | 105 | 91 | 86 | 156 | 62 | 62 | 2144 |
| (b) 1967 | 55 | 64 | 40 | 58 | 12 | 16 | 140 | 119 | 41 | 39 | 39 | 64 | 140 | 13 | 59 | 29 | 72 | 64 | 71 | 54 | 152 | 119 | 62 | 1522 |
| (c) 1963-66 | 45 | 36 | 8 | 34 | 8 | 3 | 209 | 108 | 28 | 27 | 25 | 20 | 119 | 13 | 34 | 51 | 51 | 13 | 22 | 90 | 92 | 98 | 67 | 1181 |
| 3. Total attendances by all children under 5 years of age | 1333 | 655 | 1925 | 3316 | 2561 | 130 | 4621 | 2833 | 1322 | 1216 | 735 | 2761 | 2612 | 393 | 679 | 622 | 1194 | 1741 | 1493 | 1539 | 1752 | 3748 | 1047 | 40228 |
| 4. Number of children seen by a Doctor at the Centre:- | | | | | | | | | | | | | | | | | | | | | | | | |
| (a) For the first time since birth | 43 | 43 | 55 | 165 | 38 | - | 219 | 138 | 37 | 65 | 25 | 82 | 86 | 25 | 17 | 35 | 86 | 88 | 73 | 68 | 96 | 111 | 72 | 1667 |
| (b) Subsequent interviews | 163 | 167 | 325 | 378 | 256 | - | 857 | 188 | 109 | 158 | 115 | 550 | 562 | 125 | 107 | 233 | 89 | 197 | 268 | 265 | 307 | 405 | 213 | 6037 |
| 5. Number of children under 5 years of age referred to general medical practitioners or specialist for special treatment or advice after medical examination | 5 | 11 | - | 1 | - | - | 10 | 18 | 3 | 10 | 2 | 1 | 3 | - | 3 | - | 2 | 4 | 2 | - | 1 | 5 | 8 | 89 |
| 6. Number of children "AT RISK" at the END OF THE YEAR - (See definition of "At Risk" in note * below) | 44 | 19 | 9 | 57 | 32 | - | 67 | 36 | - | 30 | 24 | 64 | 50 | - | 35 | 14 | 82 | 91 | 9 | 10 | 54 | 15 | 21 | 793 |

* "AT RISK" cases include such groups as premature infants, haemolytic disease of the newborn, congenital abnormalities difficult births, history of virus infection in mother, etc.

Table 10 (c)
MOBILE (CHILD WELFARE) CLINICS 1968

| DESCRIPTION | DYSERTH | EWLOE | FYNNON-GROEW | GWERNNA-FIELD | HALKYN | PENY-FFORDD | RHUDDLAN | TOTALS |
|---|-------------------------|-------------------------|-------------------------|--------------------------|-------------------------|-------------------------|-------------------------|----------------------------|
| 1. Number of sessions held by:- (a) Medical Officers (b) Health Visitors (without Doctor). (c) General Practitioners employed by Local Health Authority on sessional basis. (d) Hospital Medical Staff. (e) Total Sessions | 21 - - - 21 | 24 - - - 24 | 23 - - - 23 | 10 13 - - 23 | 22 - - - 22 | 23 - - - 23 | 24 - - - 24 | 147 13 - - 160 |
| 2. Number of infants who attended and who were born:- (a) 1968 (b) 1967 (c) 1963-1966 | 22 22 20 | 32 40 30 | 16 3 5 | 19 16 6 | 26 32 31 | 37 13 4 | 35 45 24 | 187 171 120 |
| 3. Total attendances by all children under 5 years of age. | 327 | 767 | 253 | 279 | 426 | 673 | 893 | 3618 |
| 4. Number of children seen by a Doctor at the Centre:- (a) For the first time since birth (b) Subsequent interviews. | 26 181 | 37 313 | 16 109 | 14 67 | 33 112 | 49 244 | 49 337 | 224 1363 |
| 5. Number of children under 5 years of age referred to general Medical Practitioner or specialist for special treatment or advice after medical examination. | 1 | - | 1 | - | 1 | 13 | 3 | 19 |
| 6. Number of children "AT RISK" at the END OF THE YEAR (see definition of "At Risk" in note below). | - | - | - | - | 14 | 22 | - | 36 |

"AT RISK" cases include such groups as premature infants, haemolytic disease of the newborn, congenital abnormalities, difficult births, history of virus infection in mother, etc.

Table 10 (d)

CHILD WELFARE CENTRES

SUMMARY OF TABLES 10 (b) and 10 (c)

| DESCRIPTION | Total Fixed Clinics | Total Mobile Clinics | Grand Total |
|--|------------------------|-------------------------|-------------|
| 1. Number of Sessions held by:- | | | |
| (a) Medical Officers | 468 | 147 | 615 |
| (b) Health Visitors (without Doctor) | 474 | 13 | 487 |
| (c) General Practitioners employed by Local Health Authority on sessional basis | 22 | - | 22 |
| (d) Hospital Medical Staff | - | - | - |
| (e) Total sessions | 964 | 160 | 1124 |
| 2. Number of infants who attended and who were born:- | | | |
| (a) 1968 | 2144 | 187 | 2331 |
| (b) 1967 | 1522 | 171 | 1693 |
| (c) 1963-1966 | 1181 | 120 | 1301 |
| 3. Total attendances by all children under 5 years of age | | | |
| | 40228 | 3618 | 43846 |
| 4. Number of children seen by a Doctor at the Centre:- | | | |
| (a) For the first time since birth | 1667 | 224 | 1891 |
| (b) Subsequent interviews | 6037 | 1363 | 7079 |
| 5. Number of children under 5 years of age referred to Genral Medical Practitioners or Specialist for special treatment or advice after medical examination | | | |
| | 89 | 19 | 108 |
| 6. Number of children "at risk" at the end of the year | | | |
| | 793 | 36 | 829 |

* "AT RISK" cases include such groups as premature infants, haemolytic disease of the new born, congenital abnormalities, difficult births, history of virus infection in mother, etc.

WELFARE FOODS SERVICE - The distribution of Welfare Foods (National Dried Milk, Cod Liver Oil, Vitamin tablets and Orange Juice), has again been carried out successfully during the year with the continued co-operation of the Women's Voluntary Service, Women's Institutes, Welfare Centre Voluntary Committees and Village Shopkeepers.

The amounts of welfare foods distributed during the year remained at the same level as in 1967, the only decrease being in the sale of National Dried Milk. The acceptance rate of all welfare foods still remains low and is only about 15% of the total sales of dried milk and vitamin preparations sold for babies and mothers in the county. It still remains doubtful if it is necessary or economical to handle National Welfare Foods and proprietary brands at clinic premises now that proprietary brands are more acceptable to mothers, which are readily available and cost no more than the National Welfare Foods.

Storage Depot: An emergency supply is kept at the Ambulance Station, Rhyl, but the main depot is at the Ambulance Headquarters, Mold.

Supplies: Supplies of Welfare Foods were ordered from Messrs. S.P.D. Ltd. of Liverpool and direct deliveries were made to two Clinics, one shop and to the Mold Depot.

The remaining centres are supplied from the Authority's Storage Depot at Mold.

Clinics - 26

Shops - 2

Food Distributed: Issued to beneficiaries and losses through breakages etc., during the year were as follows:-

| | <u>National Dried Milk</u> | <u>Cod Liver Oil</u> | <u>Vitamin tabs</u> | <u>Orange Juice</u> |
|-------------------------|----------------------------|----------------------|---------------------|---------------------|
| Issued against coupons | 4975 | 2031 | 1608 | 28678 |
| Issued to Hospitals | 53 | - | - | 148 |
| Issued at 4/-d. | 1809 | - | - | - |
| Issued to Day Nurseries | - | - | - | - |
| | 6837 | 2031 | 1608 | 28826 |

National Dried Milk Cod Liver Oil Vitamin tabs Orange Juice

| | | | | |
|-------------------------------|------|------|------|--------|
| B/fwd | 6837 | 2031 | 1608 | 28,826 |
| Out of date, damaged etc., | 250 | - | - | - |
| Sent for Analysis | - | - | - | - |
| Losses through breakages | - | 14 | 32 | 177 |
| | 7087 | 2045 | 1640 | 29,003 |

Summary of Cash and Coupons:

| | Issued | Charge | | Amount Due | | | Amount Received | | |
|--------------------|--------|--------|---|--------------|------------|----------|-----------------|------------|----------|
| | | s | d | £ | s | d | £ | s | d |
| N.D.M. | | | | | | | | | |
| (a) By cash | 3750 | 2. | 4 | 437 | 9. | 8 | 437 | 9. | 8 |
| (b) Free | 325 | | | | | | | | |
| (c) By cash | 1809 | 4. | 0 | 361 | 16. | 0 | 361 | 16. | 0 |
| C.L.O. | | | | | | | | | |
| (a) Free | 212 | | | | | | | | |
| (b) By cash | 1819 | 1. | 0 | 90 | 19. | 0 | 90 | 19. | 0 |
| A. & D. | | | | | | | | | |
| (a) Free | 7 | | | | | | | | |
| (b) By cash | 1600 | | 6 | 40 | 0. | 0 | 40 | 0. | 0 |
| O.J. | | | | | | | | | |
| (a) Free | 754 | | | | | | | | |
| (b) By cash | 27924 | 1. | 6 | 2094 | 6. | 0 | 2094 | 6. | 0 |
| | | | | | | | | | |
| TOTAL CASH | | | | £3024 | 10. | 8 | £3024 | 10. | 8 |

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, three full-time Dental Officers and three part-time (sessional) Dental Officers were employed.

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

PART A - ATTENDANCES AND TREATMENT

Number of Visits for Treatment During Year:

| | Children 0-4 (incl) | Expectant and Nursing Mothers |
|---|------------------------|----------------------------------|
| First Visit | 393 | 109 |
| Subsequent Visits | 231 | 242 |
| Total Visits | 624 | 351 |
| Number of additional courses of treatment other than the first course commenced during the year | 32 | 4 |
| Treatment provided during the year - | | |
| Number of Fillings | 523 | 166 |
| Teeth Filled | 457 | 154 |
| Teeth Extracted | 348 | 196 |
| General Anaesthetics given | 164 | 37 |
| Emergency Visits by Patients | 28 | 9 |
| Patients x-rayed | - | 18 |
| Patients treated by scaling and/or removal of stains from the teeth (Phrophylaxis) | 17 | 19 |
| Teeth Otherwise Conserved | 42 | - |
| Teeth Root Filled | - | 2 |
| Number of courses of treatment completed during the year | 239 | 91 |

PART B - PROSTHETICS

| | | |
|--|---|----|
| Patients Supplied with F. U. or F. L. (first time) | - | 9 |
| Patients supplied with other dentures | - | 22 |
| Number of dentures supplied | - | 36 |

PART C - ANAESTHETICS

| | | |
|---|---|----|
| General Anaesthetics Administered by Dental Officers | - | 15 |
|---|---|----|

PART D - INSPECTIONS

| | | |
|--|-----|-----|
| Number of patients given first inspections during the year | 381 | 103 |
| Number of patients in A and D above who required treatment | 350 | 98 |
| Number of Patients in B and E who were offered treatment | 350 | 98 |

PART E - SESSIONS

Number of Dental Officer Sessions (i. e. equivalent complete half days) devoted to Maternity and Child Welfare Patients:

| | | |
|----------------------|---|-----|
| For treatment | - | 148 |
| For Health Education | - | 12 |

DOMICILIARY MIDWIFERY

At the end of the year 38 domiciliary midwives were employed, all of whom also carried out general nursing duties as our policy of employing district nurse/midwives for combined duties still functions and we feel that this, on the whole, is the best way of dealing with the position of midwifery and general nursing care in the county.

During 1968, there were 2660 births in hospital and maternity homes and 202 in mothers own home. Of the 2660 institutional births 550 were discharged within 48 hours of delivery or approximately 20% of all institutional births. All those mothers discharged from hospital early are visited by the midwives and nursed at home for a further 7 to 10 days. In addition to this work the domiciliary midwives also attend Ante-Natal Clinics held in local authority premises and in General Practitioners surgeries.

The attachment of nurse/midwives to general practitioners has in some ways altered again the pattern of midwifery care. More general practitioners are now doing their own ante-natal care of mothers on their list and midwives attend and help with the general practitioner clinics. Attachment of midwives has undoubtedly improved the level of ante-natal care in the county and ensures follow-up of any mothers who do not attend regularly for ante-natal care.

The pattern of hospital and institutional deliveries still continues and appears a permanent feature of present day and future obstetric care. This being so all we can do in the domiciliary field is to intergrate our service, as closely as we can with the maternity hospital service. This we are doing with "joint" ante-natal clinics held in county premises, staffed by the hospital consultant staff. We are also still trying to provide facilities for domiciliary midwives to deliver mothers in the maternity hospitals. We have succeeded in doing this in the general practitioner maternity units and as the practice becomes more established we will have a more firm foundation to introduce the scheme in the maternity hospitals.

Details of work during the year including training of staff and changes in the services are given in the report of the County Supervisor of Midwives which is given below:-

MIDWIFERY SERVICE

At the end of the year 38 domiciliary midwives were employed by the Authority and have practiced midwifery during the year. Two part-time midwives attend ante-natal clinics and one part-time nurse gives occasional help in the Eastern Area.

Six pupil midwives have completed their Part Two district training by arrangement with the H.M. Stanley Hospital and one by arrangement with the Maelor Maternity Hospital. Four lectures were given to pupil midwives in H.M. Stanley Hospital and each pupil was visited when records and practical work was seen. In September, the Central Midwives Board agreed to a change in the pattern of training for the district part of the Part Two training. This requires each pupil midwife to have only 6 deliveries in the patient's own home instead of 10, and to spend time in visits and tutorials concerned with the Public Health Services available in this County.

7% of all confinements in Flintshire were attended by domiciliary midwives either in the mother's own home or in the G.P. Unit. Ninety-three per cent of all mothers confined in hospital and who live in Flintshire were discharged to their own homes before the 10th day. These mothers were attended by the district nurse/midwife in their own homes. Also, every mother who has booked to have her baby in hospital (excluding General Practitioners Units) is seen by the district nurse/midwife during her pregnancy at home. 550 mothers were discharged before the third day. During 1968, as compared with 1967, there has been an increase of mothers discharged before the third day, a .6% increase of all mothers discharged before the tenth day and a decrease of .6% of domiciliary confinements.

Each district nurse/midwife has been visited during the year for the purpose of seeing practical work and examination of records. In all 160 visits were made for this purpose which includes extra visits for other reasons.

In accordance with the rules of the Central Midwives Board, 7 visits were made to the maternity hospitals. 44 midwives working in hospital notified their intention to practice during 1968.

The ante-natal clinics and mothercraft classes were visited regularly by the senior nurses. Eight mothercraft classes are held in different parts of the County. 351 mothers attended these classes, making an attendance of 1,184. Any mother can attend, whether she is having her baby at home or in hospital. They are given instructions, but clinical examination of the mother is not carried out. The maintenance of these classes has been due to the interest and work and the co-operation of the midwives and health visitors concerned. The attendances at the mothercraft classes are as follows:-

| <u>Clinic</u> | <u>Sessions</u> | <u>New Cases</u> | <u>Attendances</u> |
|---------------|-----------------|------------------|--------------------|
| Buckley | 24 | 62 | 84 |
| Caergwrle | 17 | 20 | 81 |
| Connah's Quay | 33 | 37 | 184 |
| Flint | 44 | 22 | 103 |
| Holywell | 9 | 9 | 32 |
| Mancot | 33 | 44 | 159 |
| Mold | 19 | 37 | 113 |
| Rhyl | 50 | 90 | 428 |

The Senior Nurses are responsible for the running of four combined hospital and domiciliary ante-natal clinics. Three are attended by Consultant Obstetricians from H.M. Stanley Hospital and one from Maelor Maternity Hospital. Several midwives also attend ante-natal clinics arranged by general practitioners in their own Surgeries.

The following Central Midwives Board notifications have been received: -

A. From domiciliary midwives:

| | |
|------------------------------------|-----|
| Medical Aids | - 2 |
| Liable to be a source of infection | - 1 |
| Still Births | - 2 |

B. From the Maternity Homes:

| | |
|--------------|-----|
| Medical Aids | - 2 |
| Still Births | - 3 |

In the district nursing report an account of the general practitioner's attachment of nurses is given. District nurse/midwives cover the midwifery of these practices.

The establishment of group practices has changed the arrangement of relief duties. In the Western and Central areas some nurses outside the general practitioner attachments cover the nursing and midwifery required of the doctors without nurses and midwives attached and some relieve the nurses of the group attachments when necessary.

The arrangements for days off duty remain the same, which allows two days for each week. In the Eastern area where there are no attachments of nursing and midwifery staff to general practitioners, relief is covered by area relief nurses as before.

Arrangements are being made for a part-time nurse to be employed to relieve the two district nurse/midwives who commenced in the Maelor area in September.

L. MANN

County Nursing Officer.

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 12 shows the number of midwives who were in domiciliary practice in the area on 31st December, 1968.

Table 11

DELIVERIES ATTENDED BY DOMICILIARY MIDWIVES
DURING 1968

Number of domiciliary confinements attended by midwives under N.H.S. arrangements.

| <u>Doctor not booked</u> | | <u>Doctor booked</u> | | Total | Number of cases delivered in hospital and other institutions but discharged and attended by domiciliary midwives before 10th day. |
|----------------------------|--------------------------------|----------------------------|--------------------------------|-------|---|
| Doctor present at delivery | Doctor not present at delivery | Doctor present at delivery | Doctor not present at delivery | | |
| 2 | 5 | 54 | 140 | 201 | 2391 |

Table 12

DOMICILIARY MIDWIVES IN PRACTICE ON 31st DECEMBER, 1968

| | Domiciliary Midwives | Total |
|--|-------------------------|-------|
| (a) Midwives employed by the Authority | 38 | 38 |
| (b) Midwives employed by Voluntary Organisations:- | | |
| (i) Under arrangement with the Local Health Authority in pursuance 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 in Private Practice (including Midwives employed in Nursing Homes) | - | - |
| TOTAL | 38 | 38 |

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:-

It will be noted by reference to page 30 that the adjusted figures show that this is 166 live births less and 3 stillbirths more than the total of live and stillbirths received in the returns from the Registrar-General.

NURSING HOMES

Two homes registered and one registration withdrawn during the year, the number of nursing homes registered with the Authority under the Public Health Act of 1936. All nursing homes were regularly visited by the County Nursing Officer during the year and minor defects and improvements were dealt with promptly by all persons in charge. We had no occasion to exercise our powers under the Nursing Homes Act, 1963, to compel owners to execute works within a specified period.

As mentioned in previous reports more and more of the patients admitted to nursing homes now are aged persons mobile enough to care for themselves and needing varying degrees of nursing care. In recent years some persons seeking registration have been advised to seek registration under Section 37 of the National Assistance Act for the care of the aged as the need for this type of case far exceeds the care for full nursing home accommodation.

At the end of 1968, eight persons were registered under Section 37 of the National Assistance Act accommodating in all 113 persons and visited and supervised by the County Welfare Officer.

In addition there are two homes provided by the National Association for Mental Health and National Society for Mentally Handicapped Children which are registered under Section 37 of the National Assistance Act and provides accommodation for ninety mentally subnormal patients for one week at a time. Such patients are usually admitted from hospitals or training centres.

Table 13

| | Live Births Adjusted | Stillbirths Adjusted | Total Births Adjusted |
|---------------|-------------------------|-------------------------|--------------------------|
| Domiciliary | 201 | 1 | 202 |
| Institutional | 2618 | 42 | 2660 |
| TOTAL | 2819 | 43 | 2862 |

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,
as amended by the Nursing Homes Act, 1963)**

| | Number of Homes | Number of beds provided for: | | |
|--|-----------------------|------------------------------|-------|--------|
| | | Maternity | Other | Totals |
| Homes registered during the year | 2 | - | 21 | 21 |
| Homes whose registrations were withdrawn during the year | 1 | - | 20 | 20 |
| Homes on the register at the end of the year | 6 | - | 67 | 67 |

Table 14

HEALTH VISITING

| Cases visited by Health Visitors | No. of cases |
|--|--------------|
| 1. Children born in 1968 | 3157 |
| 2. Children born in 1967 | 2797 |
| 3. Children born in 1963-1966 | 6336 |
| 4. Total number of children in lines 1 - 3 | 12290 |
| 5. Persons aged 65 or over | 2043 |
| 6. Number included in line 5 who were visited at the special request of a G.P. or hospital | 461 |
| 7. Mentally disordered persons | 109 |
| 8. Number included in line 7 who were visited at the special request of a G.P. or hospital | 14 |
| 9. Persons, excluding maternity cases, discharged from hospital (other than mental hospitals) | 209 |
| 10. Number included in line 9 who were visited at the special request of a G.P. or hospital | 150 |
| 11. Number of tuberculous households visited | 26 |
| 12. Number of households visited on account of other infectious diseases | 121 |
| 13. Number of tuberculous households visited by Visitors for Chest Diseases | 414 |

In addition, the work of the Health Visitors for the year under report included:-

| | | | | | | | | | |
|---------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| Number of expectant mothers visited | ... | ... | ... | ... | ... | ... | ... | ... | 593 |
| Number of handicapped persons visited | ... | ... | ... | ... | ... | ... | ... | ... | 326 |
| Clinics, excluding School Clinics: | | | | | | | | | |
| Half-days | ... | ... | ... | ... | ... | ... | ... | ... | 1,796 |
| Evening sessions | ... | ... | ... | ... | ... | ... | ... | ... | 41 |
| Mothercraft Classes attended | ... | ... | ... | ... | ... | ... | ... | ... | 71 |
| Talks to groups:- | | | | | | | | | |
| In Clinics | ... | ... | ... | ... | ... | ... | ... | ... | 333 |
| Elsewhere | ... | ... | ... | ... | ... | ... | ... | ... | 140 |
| Interviews with:- | | | | | | | | | |
| General Medical Practitioners | ... | ... | ... | ... | ... | ... | ... | ... | 1,473 |
| Social Workers | ... | ... | ... | ... | ... | ... | ... | ... | 1,755 |
| Others, parents, etc. | ... | ... | ... | ... | ... | ... | ... | ... | 2,648 |

REPORT OF SUPERINTENDENT HEALTH VISITOR

During 1968 Health Visitors have continued to carry out combined duties as Health Visitors and School Nurses assisted by Clinic Nurses. In their work of prevention of mental, physical and emotional ill health they have visited more homes than in any previous year and have expanded the early detection facilities especially for tests of hearing loss and a careful watch has been kept upon the high risk groups.

Their work is made more effective by the happy working relationship with colleagues and other workers, and working in pairs or groups has proved valuable. The collaboration with General Practitioners has shown a favourable improvement with more requests for visits to patients and particularly when the person is elderly, the required services can be mobilised and early discharge from hospital facilitated.

Health teaching has continued in the homes, clinics and schools and the number of talks given to groups of people on health subjects has shown an increase to 473. A campaign to draw attention to the dangers of accidental poisoning of small children as a result of a three fold increase of hospital admissions has drawn requests from most of the Clubs for young mothers. Series of lectures have also been given to some of the Voluntary Organisations.

Two Health Visitors are designated Senior Health Visitors and it is hoped to appoint a third so that work in Three Area Groups with teams of Health Visitors and Clinic Nurses will be encouraged. It is also hoped to base each Health Visitor's case load upon the children under 5 years old of several General Practitioners, so that each Doctor may be able to contact one Health Visitor instead of several. The demands made upon Health Visitors instead of several. The demands made upon Health Visitors and Clinic Nurses are increasing rapidly as more housing estates are built and more people come to reside in Flintshire, often without the support of their immediate family to help in times of stress. The patient work of home visiting in giving support and guidance to young families, the aged and the handicapped continues. Visits to children under the age of 5 years show an increase from 11551 in 1967 to 20809 in 1968. This is a mark of the valuable contribution to the health and wellbeing of the Community and the early detection of abnormalities may save costly care at a later date. The number of interviews with General Practitioners shows an increase from 1134 to 1473. It is hoped to increase the number of liaison and attachment scheme. Where Health Visitors are attached the resulting partnership is greatly appreciated by the patients.

The Visitors for Chest Diseases have attended the Chest Clinics in their areas and are responsible for the after care and contact tracing of all patients with chest illnesses including bronchitis and bronchiectasis. Hospital liaison schemes have continued with visits by Health Visitors to the Wrexham, Rhyl and Holywell Hospitals. This contact enables better preparation to be made before discharge of an elderly patient and in the case of a child, discussion with the Ward Sister is most helpful as the Health Visitor can continue the advice given and watch the progress with greater enlightenment.

An in service Training Course held at the Post Graduate Medical Centre in Rhyl in May, organised by the Royal College of Nursing and attended by 7 Health Visitors. This was on the Care of the Aged and participants included nurse from both Hospital and Local Health Authority. In December members of the Health Department and the Department of Management Studies at the College of Further Education, Kelsterton, with the help of some eminent speakers held a Course on Management for all Health Visitors. This has brought far reaching results and has kindled enthusiasm and produced greater insight into the Health Visiting services.

The Central Council for Health Education helped with a day course on the Art of Communication in Health Education and Miss Hamer, Senior Social Worker in the Child Guidance Service gave two most instructive courses on Emotional Development in young children and the discussions were most fruitful in producing greater insight and understanding. A lecture on Foot Care and Shoes was given by Mrs. College.

The provision of care for a very large number of families with support during period of difficulty forms a large part of the Health Visitors work. The notification of children with Handicaps has received greater attention as the Health Visitor has a great opportunity of recognising at an early date those who will need special provision in the future.

Mothers Clubs:- These groups of young wives have continued to meet in our clinics and a few in halls and in a private home in one club. These meetings have been of great value in promoting a far greater knowledge of child care and of many other subjects of interest to mothers. Several of the clubs have given voluntary service and donations of money to help special causes. Three clubs arranged to entertain the residents in homes for the aged.

Pre-school Play Groups: This movement started in 1966 and the number has steadily increased. This provision for children to play together has proved most rewarding. The groups are now gradually appointing supervisors who have had some training or experience with children.

Miss G. Edwards, Infants School Organiser, arranged two courses for Play Group Helpers in Rhyl and Hawarden.

The Flintshire Association of Pre-School Play Groups has continued to strengthen established groups and to help new ones. Over 500 children are now on the register of playgroups and they are enjoying the provisions.

I have made 84 visits in connection with this work and the two visitors for chest diseases have given much help in supervising and visiting the Play Groups.

Some of the work undertaken by me is given below:-

| | |
|---|-----|
| Visits to Child Welfare Centres | 26 |
| Visits to School Clinics | 2 |
| Visits to Hospitals and Homes for the Aged | 14 |
| Number of Interview with Health Visitors | |
| Visitors for Chest Diseases, Clinic Nurses and Home Visitors for the Handicapped | 822 |
| Other interviews | 284 |
| Health Education: | |
| Talks to Voluntary Groups | 37 |
| Films and talks for school children | 2 |
| Lecture to Students | 7 |
| Visits to Young Mothers' Clubs, Pre- School Play Groups and Daily Minders | 84 |
| Handicapped Persons: | |
| Visits to Social Centres | 5 |
| Staff Meetings | 18 |

P.M. MATTHEWS,
Superintendent Health Visitor

HOME NURSING

The year was notable for the progress made in the attachment of district nurse/midwives to general practitioners in the county. A start on this work was made in 1967 but considerable progress was achieved in 1968 and by the end of the year all the nursing staff in the Western half of the county were attached. Full-time relief nurses continued to be employed in the area to provide adequate cover during holidays and sickness of attached staff. A considerable amount of time was given to this work and all general practitioners met either singly or in groups. It is a pleasure to record that general practitioners welcomed the scheme and co-operated in every way and the nursing staff have welcomed the new method of working as it brings them into closer contact with general practitioners and increases the variety of tasks they can undertake and adds considerably to the interest of their work.

The senior nurse/midwives concerned were able to play a vital role in the working of the attachment scheme and their knowledge and accessibility help to get the scheme working smoothly in the early days. They also were able to relieve strain in the new scheme by making full use of relief nurses. The experience gained in the Western half of the county will be of great help to all, including the senior nurses when we extend the attachment scheme to the Eastern half of the county in 1969.

The four senior nurse/midwives continued to deal with day-to-day nursing matters in their area and to supervise the work of the state enrolled nurses, to deal with the issue and follow-up of loan equipment and to issue nursing equipment to the staff from the two stores at Mold and St. Asaph.

During the year every opportunity was taken to provide inservice training for staff and this is fully reported in the subsequent report of the County Nursing Officer. The County Nursing Officer continued to do excellent work at the County Training Centre at Buckley where, in addition to routine inservice training, five nurses were successfully trained during the year for the National District Nursing Certificate and also placed on the roll of The Queen's Institute of District Nursing. The full responsibility of arranging all training falls on the County Nursing Officer who obtains valuable help from many other members of the staff and great credit is due to Miss L. Mann, for the excellent work done in this very important field of staff training.

Every year we find that it is essential to keep up to date with new equipment and new nursing techniques. New equipment is introduced continually and we give such equipment an extensive trial before bringing it into general use. Nearly all the equipment now used is pre-packed and sterilised, such as syringes, catheters, dressings, masks, etc. With the co-operation of general practitioners we also give extensive trials to new treatments, which are carried out by nurses, such as treatment for indolent ulcers, bed sores, certain skin conditions and infected wounds. In addition to this introduction of new equipment it is equally important that all staff are kept up to date in nursing techniques and for this purpose arrangements are made for nurses to attend recognised refresher courses regularly.

We continued to make good use of money provided by the Marie Curie Memorial Fund for helping cancer patients nursed at home, both by providing extra material comforts and by providing additional staff to help care for ill patients at home, particularly during the night.

Home nursing is a service widely used by the public and very much appreciated. Although demands have increased yearly it is gratifying to report that we have been able to meet all the calls made upon the service and the district nurses deserve the thanks of the authority for their excellent services during another busy year.

REPORT BY THE COUNTY NURSING OFFICER OF THE DISTRICT NURSING SERVICE

At the end of 1968, there were 52 nurses carrying out general nursing duties. 38 of these were also practicing midwifery. There are also six state enrolled nurses employed full-time in the Western and Central areas to assist the district nurses. There were no vacancies on December 31st.

By the 31st December, including two general practitioner attachments of district nurses and midwives, 8 others had been commenced. There are 16 staff attached to the general practitioner practices with relief arrangements made by the senior nurse, except in Prestatyn where one Queen's nurse and an S.E.N., Q.I.D.N. Cert. relieve. The 16 nurses include 5 Queen's nurse/midwives, 3 S.R.N. Midwives, 4 Queen's nurses, 2 S.E.N. Midwives, Q.I.D.N. Cert. and 2 S.E.N., Q.I.D.N. Cert. In most of the practices, the nurses visit the surgery at a given time to carry out treatments, such as dressings and injections, for patients. In all 4,817 treatments have been carried out.

The nurses throughout the County have made a total of 111,443 visits in the patient's own homes.

The nurse have continued to give assistance to patients in addition to the comprehensive nursing care by obtaining appropriate aids, such as walking aids, bath aids, wheelchairs and hoists from this Authority or The Red Cross Society.

Since the County was approved as a Queen's District Training Authority, 35 district nurses have been successful in passing the examination and have been placed on the roll of the Queen's Institute of District Nursing and also received a National Nursing Certificate issued by the Ministry of Health. Three of our own staff have been successful and one sponsored by Merionethshire has been successful. The future District Training Course will not include the Queen's Institute of District Nursing Certificate. The roll of Queen's Nurses has been closed.

The Queen's Institute of District Nursing are continuing with the Course of Instruction in district nursing for state enrolled nurses and five of the staff have been successful and have been awarded the Queen's Institute of District Nursing Certificate. The total number of state enrolled nurses who have gained this Certificate by doing the training in this County is 13.

During the year, 8 student district nurses from Liverpool spent three days in this County gaining rural experience as part of their Queen's District Training.

Lectures in Social Aspects of Disease have been given to student nurses in the Royal Alexandra Hospital, Rhyl.

In addition to the three monthly meetings of all staff arranged by the County Medical Officer of Health, 23 groups of nurses have met in different parts of the County. These have included discussions with the training midwives and district training nurses.

186 visits have been made to district nurses for the purpose of examining records and observing practical work in the patient's own home or interviewed for some special reason.

Under the Registration of Nursing Homes, Section 187-194 of the Public Health Act 1936, 12 visits have been paid to 7 Nursing Homes. One of these has closed and one commenced later in the year. One extra visit was paid to advise about the starting of a Nursing Home.

During the year, arrangements continued for the nursing staff of Lluesty Hospital to spend one day on the district. In all, 54 have seen how the patients are nursed in their own homes.

A meeting of a cross section of district nursing staff and hospital staff was held and it showed how much value this arrangement had been. It has created a better liaison between the hospital and Local Authority staff and will also benefit the patients.

The arrangements for relief duties is given in the report on the Midwifery Nursing Service.

L. MANN

County Nursing Officer

Table 15
HOME NURSING

| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) |
|---|---------|----------|-----------------------------|-------------------|--------------------------------|--------|--------|---|---|-----------------|
| No. of cases attended by Home Nurses during the year: - | Medical | Surgical | Infec- tious Diseases | Tuber- culosis | Maternal Compli- cations | Others | Totals | Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year | Children included in (2)-(7) who were under 5 at the time of the first visit during the year | Total visits |
| | 3630 | 1118 | 3 | 5 | 61 | - | 4817 | 2692 | 163 | 119,443 |

VACCINATION AND IMMUNISATION

In recent years, more and more illnesses have been controlled by vaccination and immunisation and the most recent illness to be added to the list is measles. As the number of illnesses controlled increases it has become necessary to try and agree on a schedule to be followed for timing the various protective measures to ensure the greater benefit to the individual.

A suggested schedule was recently issued by the Ministry of Health which is as follows:-

| | |
|--------------------------------|--|
| 4 Months of age | Triple Vaccine (Diphtheria, Tetanus and Whooping Cough). plus oral Polio vaccine. |
| 6 Months of age | Triple + Polio |
| 10 Months of age | Triple + Polio |
| 12 Months of age | Measles vaccine. |
| 15 Months of age | Smallpox vaccination. |
| School entry (5 years of age). | Diphtheria/Tetanus vaccine + polio. |
| 13 Years of age. | B.C.G. Vaccine (against tuberculosis). |

This schedule was submitted to the Local Medical Committee for discussion and agreed to by the general practitioners. It was made clear to general practitioners that the actual timing was in all cases subject to their clinical judgement and they were free to alter the suggested schedule when they considered this desirable.

In an endeavour to improve the level of vaccination and immunisation it was also agreed with general practitioners that this service could usefully be dealt with by computer application and steps were taken towards this objective during the year. Computer application will also reduce both the clerical work of general practitioners and the Executive Council and it is hoped to put the whole scheme into operation on 1st January, 1969.

For obvious reasons, it is desirable - indeed essential - to get as many infants and others protected against disease when suitable vaccines are available. For some years the protection rate in general has been far too low and it is hoped that with better appointments and follow-up arising out of mechanical handling of records and appointments that there will be a marked rise in the number of individual vaccination and immunisation in the county.

In attempt to achieve this objective we carried out intensive publicity work on the value of vaccination and immunisation during the year and this will be continued during the first half of 1969.

The tables in the following pages give the figures of vaccination and immunisation carried out in 1968 and for certain conditions in preceding years.

| Year | 1968 | 1967 | 1966 | 1965 | 1964 | 1963 | 1962 | 1961 | 1960 |
|--------------|------|------|------|------|------|------|------|------|------|
| 1-12 months | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 1-2 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 2-3 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 3-4 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 4-5 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 5-6 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 6-7 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 7-8 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 8-9 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 9-10 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 10-11 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 11-12 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 12-13 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 13-14 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 14-15 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 15-16 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 16-17 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 17-18 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 18-19 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 19-20 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 20-21 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 21-22 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 22-23 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 23-24 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 24-25 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 25-26 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 26-27 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 27-28 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 28-29 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 29-30 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 30-31 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 31-32 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 32-33 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 33-34 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 34-35 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 35-36 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 36-37 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 37-38 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 38-39 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 39-40 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 40-41 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 41-42 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 42-43 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 43-44 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 44-45 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 45-46 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 46-47 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 47-48 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 48-49 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 49-50 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 50-51 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 51-52 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 52-53 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 53-54 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 54-55 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 55-56 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 56-57 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 57-58 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 58-59 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 59-60 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 60-61 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 61-62 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 62-63 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 63-64 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 64-65 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 65-66 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 66-67 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 67-68 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 68-69 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 69-70 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 70-71 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 71-72 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 72-73 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 73-74 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 74-75 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 75-76 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 76-77 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 77-78 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 78-79 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 79-80 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 80-81 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 81-82 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 82-83 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 83-84 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 84-85 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 85-86 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 86-87 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 87-88 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 88-89 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 89-90 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 90-91 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 91-92 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 92-93 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 93-94 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 94-95 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 95-96 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 96-97 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 97-98 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 98-99 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| 99-100 years | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |

Table 16(a)

SMALLPOX VACCINATION

| Age at date of vaccination | I. Number of Persons vaccinated (or revaccinated during period). | | II. Number of cases specially reported during period | | | |
|----------------------------|--|---------------------|--|-------------------------------------|--|--|
| | Number vaccinated | Number revaccinated | (a) Generalised vaccinia | (b) Post-Vaccinal Encephalomyelitis | (c) Death from complications of vaccination other than (a) and (b) | |
| 0-3 months | 5 | - | - | - | - | |
| 3-6 months | 10 | - | - | - | - | |
| 6-9 months | 6 | - | - | - | - | |
| 9-12 months | 12 | - | - | - | - | |
| 1 | 754 | - | - | - | - | |
| 2-4 | 505 | 18 | - | - | - | |
| 5-15 | 247 | 230 | - | - | - | |
| TOTAL | 1539 | 248 | - | - | - | |

Table 16 (b)

NUMBER OF CHILDREN (included in Table 16 (a)) WHO WERE
VACCINATED BY HEALTH DEPARTMENT STAFF DURING 1967

| Age at date of vaccination | | Number vaccinated |
|-------------------------------|-------|----------------------|
| 0-3 months | . . . | 1 |
| 3-6 months | . . . | 4 |
| 6-9 months | . . . | 1 |
| 9-12 months | . . . | - |
| 1-2 years | . . . | 469 |
| 2-4 years | . . . | 260 |
| 5-15 years | . . . | 168 |
| TOTAL | . . . | <u>903</u> |

Table 17

VACCINATION OF PERSONS UNDER 16 COMPLETED DURING 1968

Part 1 - Completed Primary Courses - Number of persons under age 16

| Type of Vaccine or Dose | YEAR OF BIRTH | | | | | Others under age 16 | TOTAL |
|------------------------------------|---------------|------|------|------|---------|---------------------|-------|
| | 1968 | 1967 | 1966 | 1965 | 1961-64 | | |
| 1. Quadruple D. T. P. P. | - | - | - | - | - | - | - |
| 2. Triple D. T. P. | 333 | 1163 | 172 | 41 | 34 | 3 | 1746 |
| 3. Diphtheria/Pertussis | - | - | - | - | 8 | 1 | 9 |
| 4. Diphtheria/Tetanus | - | 13 | 5 | 5 | 151 | 30 | 204 |
| 5. Diphtheria | - | - | - | - | 2 | 2 | 4 |
| 6. Pertussis | - | - | - | - | - | - | - |
| 7. Tetanus | - | 1 | - | 1 | 7 | 60 | 69 |
| 8. Salk | - | - | - | - | - | - | - |
| 9. Sabin | 324 | 1154 | 208 | 79 | 260 | 49 | 2074 |
| 10. Measles | 16 | 181 | 166 | 132 | 226 | 15 | 736 |
| 11. Lines 1+2+3+4+5 (Diphtheria) | 333 | 1176 | 177 | 46 | 195 | 36 | 1963 |
| 12. Lines 1+2+3+6 (Whooping cough) | 333 | 1163 | 172 | 41 | 42 | 4 | 1755 |
| 13. Lines 1+2+4+7 (Tetanus) | 333 | 1177 | 177 | 47 | 192 | 93 | 2019 |
| 14. Lines 1+8+9 (Polio) | 324 | 1154 | 208 | 79 | 260 | 49 | 2074 |

Table 17

Part 2 - REINFORCING DOSES - Number of persons under age 16

| Type of vaccine or dose | YEAR OF BIRTH | | | | | | Others under age 16 | TOTAL |
|------------------------------------|---------------|------|------|------|---------|-----|---------------------|-------|
| | 1968 | | | | | | | |
| | 1968 | 1967 | 1966 | 1965 | 1961-64 | | | |
| 1. Quadruple D. T. P. P. | - | - | - | - | - | - | - | - |
| 2. Triple D. T. P. | - | - | - | 44 | 88 | 3 | 135 | |
| 3. Diphtheria/Pertussis | - | - | - | - | - | - | - | - |
| 4. Diphtheria/Tetanus | - | - | - | 35 | 2063 | 346 | 2444 | |
| 5. Diphtheria | - | - | - | 1 | 19 | 20 | 40 | |
| 6. Pertussis | - | - | - | - | - | - | - | - |
| 7. Tetanus | - | - | - | 2 | 30 | 91 | 123 | |
| 8. Salk | - | - | - | - | - | - | - | - |
| 9. Sabin | - | - | - | 72 | 2581 | 510 | 3163 | |
| 10. Measles | - | - | - | 24 | 16 | - | 40 | |
| 11. Lines 1+2+3+4+5 (Diphtheria) | - | - | - | 80 | 2170 | 369 | 2619 | |
| 12. Lines 1+2+3+6 (Whooping cough) | - | - | - | 44 | 88 | 3 | 135 | |
| 13. Lines 1+2+4+7 (Tetanus) | - | - | - | 81 | 2181 | 440 | 2702 | |
| 14. Lines 1+8+9 (Polio) | - | - | - | 72 | 2581 | 510 | 3163 | |

Details of the B.C.G. Vaccination work done for contacts, children and young persons are given in Table 18.

Table 18

B.C.G. VACCINATION AGAINST TUBERCULOSIS - YEAR 1968

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

A. Contact Scheme

(Circular 19/64 (Wales))

| | | | | | | |
|-------|-----------------------|-----|-----|-----|-----|-----|
| (i) | Number skin tested | ... | ... | ... | ... | 387 |
| (ii) | Number found positive | ... | ... | ... | ... | 186 |
| (iii) | Number found negative | ... | ... | ... | ... | 91 |
| (iv) | Number vaccinated | ... | ... | ... | ... | 95 |

B. School Children and Students Scheme

(Circulars 19/64 (Wales))

| | | | | | | |
|-------|-----------------------|-----|-----|-----|-----|-------|
| (i) | Number skin tested | ... | ... | ... | ... | 1,905 |
| (ii) | Number found positive | ... | ... | ... | ... | 209 |
| (iii) | Number found negative | ... | ... | ... | ... | 1,629 |
| (iv) | Number vaccinated | ... | ... | ... | ... | 1,532 |

AMBULANCE SERVICE

The following tables show the number of cases conveyed by ambulances and hired sitting case cars during the year. It also gives, for the purpose of comparison, the figures for 1967 and 1955, together with the number of journeys and mileage involved.

AMBULANCES

| <u>Year</u> | <u>Stretcher & Chair Cases</u> | <u>Sitting Cases</u> | <u>Journeys</u> | <u>Mileage</u> |
|-------------|--|--------------------------|-----------------|----------------|
| 1968 | 12768 | 46021 | 12706 | 482416 |
| 1967 | 12326 | 42737 | 11998 | 450325 |
| 1955 | 5544 | 19745 | 8201 | 269353 |

HIRED SITTING CASE CARS

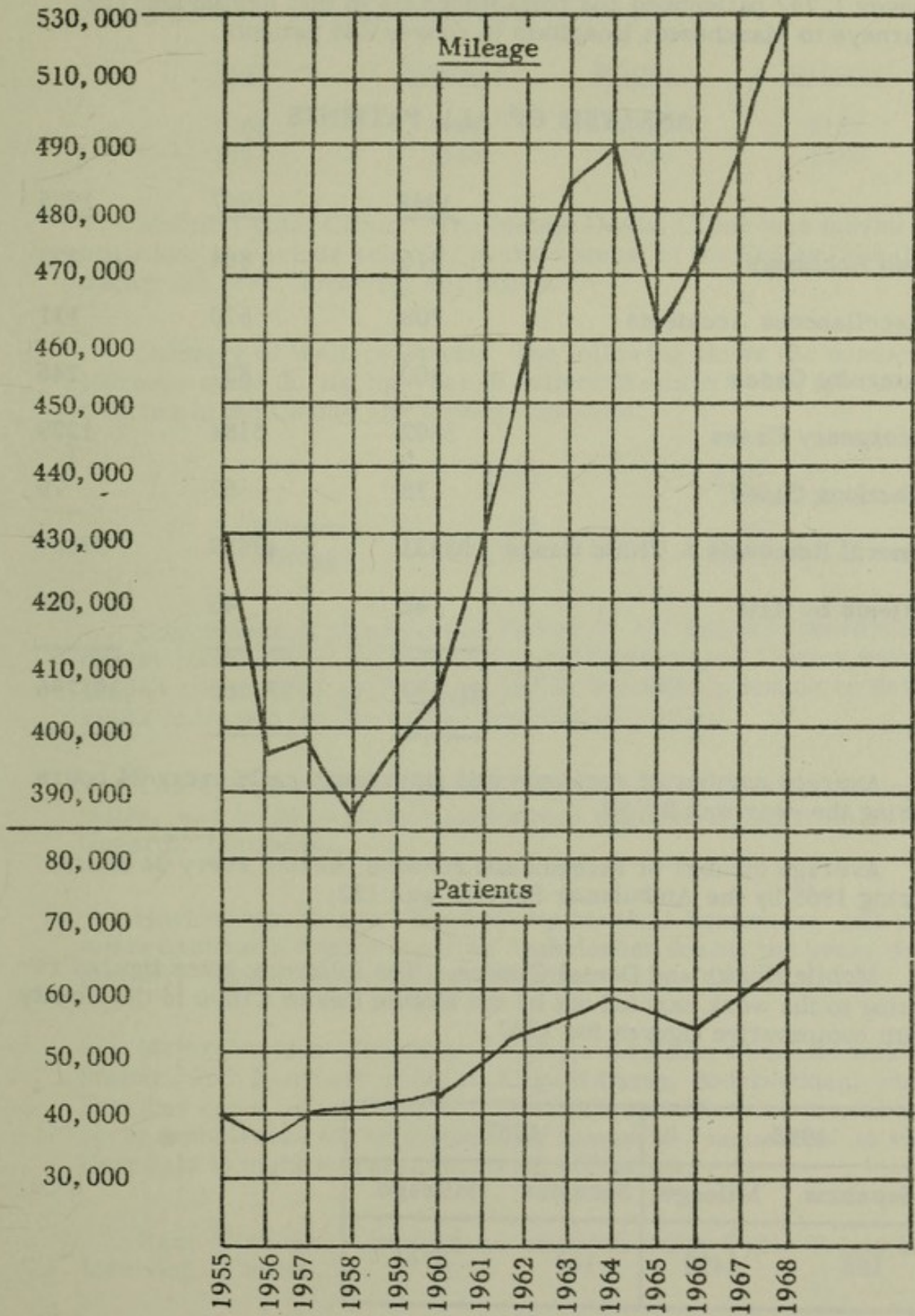
| <u>Year</u> | <u>Patients</u> | <u>Journeys</u> | <u>Mileage</u> | <u>Cost</u> | | |
|-------------|-----------------|-----------------|----------------|-------------|-----|-----|
| | | | | £. | s. | d. |
| 1968 | 2746 | 1420 | 35252 | 1924 | 7. | 0. |
| 1967 | 2397 | 1292 | 30491 | 1591 | 3. | 10. |
| 1955 | 14507 | 6130 | 157643 | 8137- | 19. | 1. |

Patients transported by Rail: Forty-two patients were conveyed by Rail during the year, involving 5,719 miles. In 1967 Forty-five patients were conveyed, involving 5,485 miles.

AMBULANCES

| Stations | 1968 | | | | | | 1967 | | | | | | 1955 | | | | | | |
|----------------|-----------|-----------|-------------------------|---------------|--------------|---------------|-----------|-----------|-------------------------|---------------|--------------|---------------|-----------|-----------|-------------------------|---------------|-------------|---------------|--|
| | Personnel | Vehicles | Stretcher & Chair Cases | Sitting Cases | Journeys | Mileage | Personnel | Vehicles | Stretcher & Chair Cases | Sitting Cases | Journeys | Mileage | Personnel | Vehicles | Stretcher & Chair Cases | Sitting Cases | Journeys | Mileage | |
| Mold | 10 | 9 | 3097 | 10653 | 2999 | 115688 | 10 | 8 | 3091 | 10139 | 2849 | 107382 | 4 | 3 | | | | | |
| Rhyl | 10 | 5 | 4269 | 11607 | 3127 | 97000 | 10 | 5 | 4770 | 11294 | 3101 | 98415 | 4 | 3 | | | | | |
| Queensferry | 9 | 4 | 2071 | 7825 | 2521 | 90281 | 8 | 4 | 1742 | 7211 | 2257 | 84594 | 3 | 2 | 5544 | 19745 | 8201 | 269353 | |
| Holywell | 10 | 6 | 2531 | 8139 | 2532 | 106793 | 9 | 6 | 1994 | 7092 | 2403 | 99499 | 3 | 2 | | | | | |
| Flint | 3 | 2 | 686 | 6049 | 1236 | 49701 | 3 | 2 | 660 | 5663 | 1096 | 42170 | 2 | 1 | | | | | |
| Hammer | 1 | 1 | 114 | 1748 | 291 | 22953 | 1 | 1 | 69 | 1338 | 292 | 18265 | - | - | | | | | |
| Totals: | 43 | 27 | 12768 | 46021 | 12706 | 482416 | 41 | 26 | 12326 | 42737 | 11998 | 450325 | 16 | 11 | 5544 | 19745 | 8201 | 269353 | |

The following shows mileage and patients conveyed by Ambulances and Hired Sitting Case Cars. Mileage for other work, Mobile Clinic etc. not included.



Conveyance of patients to and from Hospitals in Liverpool and Manchester: During the year 656 journeys were made to Liverpool to convey 1,747 patients to and from Hospitals in that Region and 129 journeys to Manchester Hospitals to convey 306 patients.

ANALYSIS OF ALL PATIENTS

| | <u>1968</u> | <u>1967</u> | <u>1955</u> |
|---------------------------------|-------------|-------------|-------------|
| Road Accidents | 916 | 864 | 223 |
| Miscellaneous Accidents | 708 | 670 | 111 |
| Maternity Cases | 900 | 837 | 246 |
| Emergency Cases | 5502 | 5184 | 1279 |
| Infectious Cases | 78 | 67 | 79 |
| General Removals & Clinic Cases | 53431 | 49839 | 37839 |
| Patients by Rail | 42 | 45 | 19 |
| | <hr/> | <hr/> | <hr/> |
| | 61,577 | 57,506 | 39,796 |
| | <hr/> | <hr/> | <hr/> |

Average number of accidents and emergency calls every 24 hours during the year was 22.50.

Average number of Patients and Persons carried every 24 hours during 1968 by the Ambulance Service was 132.

Mobile Health and Dental Clinics: The following gives figures relating to the work carried out by the Mobile Health Clinic in the County with comparative figures for 1967.

| 1968 | | 1967 | |
|----------|---------|----------|---------|
| Sessions | Mileage | Sessions | Mileage |
| 188 | 4490 | 164 | 3761 |

Conveyance of Mothers and Babies to and from the Mobile Clinic: The following shows the number of mothers and infants conveyed from the surrounding districts by the towing vehicle to the Mobile Clinic during 1968 and corresponding figures for 1967.

| <u>Year</u> | <u>Mothers</u> | <u>Infants</u> | <u>Mileage</u> |
|-------------|----------------|----------------|----------------|
| 1968 | 1166 | 1650 | 2182 |
| 1967 | 1448 | 1934 | 2380 |

Mobile Dental Clinic: The Mobile Dental Clinic was moved on 12 occasions to various schools, at the request of the Senior Dental Officer, during the year, involving 461 miles.

Delivery of Welfare Foods: The following shows the number of journeys made during the year to deliver Welfare Foods to various Centres in the County and mileage involved.

| | <u>1968</u> | <u>1967</u> |
|----------|-------------|-------------|
| Journeys | 57 | 67 |
| Mileage | 3187 | 3045 |

Conveyance of Handicapped Persons: 261 journeys were made to convey Handicapped Persons to Special Handicapped Clinics involving 14,883 miles. 581 journeys to convey 272 elderly people on daily visits to Homes for the Aged, involving 528 miles.

Conveyance of Handicapped Children: One journey involving 74 miles, was made to carry Handicapped children to and from Ysgol Gogarth, Llandudno.

Health Department: In removing Medical Equipment, and other miscellaneous journeys made by Ambulances during the year, 44 journeys were made involving 744 miles.

Major Accident Exercise: A Major Accident Exercise was held on Sunday, 25th February 1968, at Kinmel Camp, Bodelwyddan, when all Services came into operation. The Ambulance Service turned out seven ambulances to the scene, they moved 29 "casualties" to various Hospitals in eight journeys involving 407 miles.

Race Meetings: Ambulances attended Motor Cycle Trials at Gronant involving 16 miles.

AMBULANCE AND SITTING CASE CARS STATISTICS

| | <u>1968</u> | <u>1967</u> | <u>1955</u> |
|-------------------------------------|--------------|--------------|--------------|
| Patients by Ambulances | 58789 | 55063 | 25289 |
| Others by Ambulances | 10959 | 9841 | - |
| Patients by Hired Sitting Case Cars | 2746 | 2397 | 14507 |
| Patients by Rail | 42 | 45 | 19 |
| Totals: | <u>72536</u> | <u>67346</u> | <u>39815</u> |

Journeys

| | | | |
|-------------------------|--------------|--------------|--------------|
| Ambulances | 13542 | 13048 | 8201 |
| Hired Sitting Case Cars | 1420 | 1292 | 6130 |
| Totals: | <u>14962</u> | <u>14340</u> | <u>14331</u> |

Mileage

| | | | |
|-------------------------|---------------|---------------|---------------|
| Ambulances | 509388 | 473669 | 269353 |
| Hired Sitting Case Cars | 35252 | 30491 | 157643 |
| Rail Mileage | 5719 | 5485 | - |
| | <u>550359</u> | <u>509645</u> | <u>426996</u> |

Fuel: 19,568 gallons of Petrol were consumed by 20 Petrol vehicles in the Service to cover 333,135 miles, average m.p.g. 17.0 6,647 gallons of Diesel were consumed by the 7 Diessel vehicles to cover 176,253 miles, average m.p.g. 26.35.

WORK CARRIED OUT BY FLINTSHIRE ON BEHALF OF OTHER AUTHORITIES

| | <u>1968</u> | | <u>1967</u> |
|--------------|---------------|--|--------------|
| Patients | 247 | | 318 |
| Journeys | 178 | | 133 |
| Mileage | 3868 | | 2347 |
| Cost-Claimed | £483. 15. 2d. | | £317. 0. 2d. |

WORK CARRIED OUT BY OTHER AUTHORITIES ON BEHALF OF FLINTSHIRE

| | <u>1968</u> | | <u>1967</u> |
|-------------|-------------|--|---------------|
| Patients | 407 | | 340 |
| Journeys | 345 | | 233 |
| Mileage | 3674 | | 2220 |
| Cost - Paid | £590. 8. 8. | | £581. 5. 11d. |

New Ambulances: Two new Ambulances were purchased in 1968, Standard Type Ambulances replacing 51 ADM and 52 ADM after 7 years, and had covered over 200,000 miles each.

One 24-cwt Commer Equipment Vehicle, Reg. No. EDM 870C, was purchased in July 1968 from Civil Defence. This vehicle is stationed at Headquarters and is used as equipment vehicle for Major Accidents, also to remove medical equipment and Welfare Foods etc.

Vehicles: Total Vehicles in the Service as on 31st December 1968:

| <u>Type</u> | <u>Diesel</u> | <u>Petrol</u> | <u>Total</u> |
|----------------------------------|---------------|---------------|--------------|
| Standard Ambulances | 7 | 9 | 16 |
| Dual Purpose Ambulances | | 9 | 9 |
| Handicapped Persons Ambulances | | 1 | 1 |
| Emergency Equipment Vehicle | | 1 | 1 |
| Health and Dental Mobile Clinics | | | 2 |
| | <u>7</u> | <u>20</u> | <u>29</u> |

Accident Claims: 14 Accident Claims were made on the Insurance Company during the year. Nine of the accidents were caused by other drivers and five caused by our own drivers. None were serious and nobody suffered any injury.

Safe Driving Awards: Out of 37 Driver/Attendants entered for the National Society for the Prevention of Accidents for 1968, 32 qualified for Awards.

Training Local Training in advanced First Aid arranged in the evenings by the County Ambulance Officer at Mold, Rhyl and Holywell. Lectures were given by Surgeons and Doctors. Twenty-four of the Ambulance Personnel gained Advanced First Aid Certificates three Personnel gained Higher First Aid Certificates.

Annual Ambulance Competitions: The 12th Annual County Ambulance Competition was held at Mold on May 11th, 1968. Five teams competed and the Flint team was successful. Competition was, as usual, keen and there was only a small margin between the winning team and the other competitors.

The Chairman's Cup for the best kept station went to Queensferry and the D.J. Jones Trophy for the best driver was won by Driver P.J. Stanley.

The winning county team competed in the Welsh Regional Competition at Newtown in July and was again successful in gaining the highest marks and awarded the Britton trophy.

This team then went to the National Ambulance Competition representing Wales at Rover Works, Solihull, in August, and came second to Hampshire and gained the Middlesex Shield.

Sickness: 1, 548 man hours were lost by Operational staff owing to sickness and injury and 36 working days by Headquarters Staff.

Establishment: The establishment of the Service as on 31st December 1968, was as follows:-

| | County Medical Officer of Health |
|--|----------------------------------|
| | County Ambulance Officer |
| Head of Department | |
| Officer-in-Charge | |
| Records Clerk | 1 |
| Senior Ambulance Controller | 1 |
| Ambulance Controllers (2 females and 3 males) | 5 |
| Telephonist | 1 |
| Clerk/Shorthand Typist | 1 |
| Senior Drivers | 4 |
| Shift Leaders | 4 |
| Ambulance Drivers | 18 |
| Ambulance Attendants | 13 |
| Ambulance Driver (Part-time) | 1 |
| Mobile Clinic Driver | 1 |
| Handicapped Persons' Vehicle Driver | 1 |
| Motor Mechanic | 1 |
| Motor Mechanic (Assistant) | 1 |
| Part-time Cleaner (Ambulance Headquarters) | 1 |

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

(a) **Tuberculosis:** All tuberculosis cases on the register including newly notified cases were visited during the year by the two Visitors for Chest Diseases. Repeat visits were paid to cases where necessary, particularly so to cases where social, financial or other factors made this desirable.

It should be made clear that home visiting of the tuberculous has a two-fold purpose - to help the patient and his or her family as regards the illness, and to give every assistance with the social and economic factors arising as a result of the illness.

As in previous years all contacts of newly diagnosed cases are visited and advised to attend a Chest Clinic for examination and B.C.G. vaccine if found suitable and under 21 years of age.

Grants of milk and other foods were made during the year by the Area Health Sub-Committee to 112 cases suffering from Chest diseases. 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 Ministry of Social Security. 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.

B.C.G. vaccination of school children and young persons attending colleges and universities continued during the year. B.C.G. vaccine was offered to those over thirteen years of age receiving full-time or part-time education. At the end of the year 1532 young persons had received B.C.G. vaccine under this scheme, which is administered directly by the Health Department. These persons are in addition to those receiving B.C.G. vaccine from the Chest Physicians.

During 1968, the visits of the Semi Static Mass X-Ray Unit which regularly visited four centres in the county were discontinued after nine years of operation. This step was taken as the number of persons attending the centres had diminished in recent years and recently general practitioners had been able to refer patients direct to radiologists for chest and other x-ray examinations.

With the discontinuance of the Semi Static Unit we decided to look again at our policy of insisting on a chest x-ray for all newly engaged staff as part of their medical examination. It was finally agreed to continue to insist on a chest x-ray examination of all staff who would come into close contact with children, e.g. teachers, nurses, child care staff, school meals staff, etc. In the case of other staff, chest x-ray examination was only requested when the history or clinical findings

made this desirable. All chest x-rays are now carried out by arrangements with Consultant Radiologists and a payment is made for each person referred. If any abnormality is found a copy of the report is sent to the patient's own doctor.

(b) Illness Generally: Grants of milk, etc., similar to those for tuberculosis are also made by the Area Sub-Committee to persons suffering from other forms of illness, and to mentally subnormal patients living in their own homes. Thirty-one such persons were assisted in 1968. The cost of this was £260.

The cost of the grants of milk and other forms of nourishment made to chest cases and to persons suffering from other illnesses was £3,200.

(c) Medical Loan Scheme: Members of the Health Committee recently expressed a desire to have some information about the type of equipment that was provided on loan by the Health Department to patients nursed at home. Over the past ten years, the department has gradually built up a supply of over 1000 items of equipment. This scheme is administered under Section 28 of the National Health Service Act and extra items are purchased annually and added to our stock to meet increasing demands and to replace equipment that becomes unserviceable with constant use. Loans are kept at the Health Department in Mold and individual nurses keep a small supply of items in daily use which they issue direct to patients. With the more bulky items these are taken to patients on request from the patient, the General Practitioner, or the hospital by the district nurse or by the Ambulance Service. Loans are free to patients who can retain them as long as required. Periodic visits to the homes are made by the senior nurses to ensure that equipment is still in use and serviceable. The equipment that is no longer needed by the patient is returned to the depot at Mold and serviced before re-issue. A card index scheme is maintained in the Health Department showing the total equipment available and the names and addresses of patients using the equipment at a given time.

In addition to the County Loan Scheme, the British Red Cross Society and the St. John's Brigade also have equipment which they loan to individuals on request, making a small loan charge in most cases. The existence of the loan depots belonging to the voluntary organisations is known to all the Health Department Staff and these depots are used to supplement the County Loan Scheme, and to assist the voluntary organisations with their training and home visiting.

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 49 such persons in 1968.

Recommendations for the convalescence are received from the hospital, general practitioners and public and charges are recovered according to the financial circumstances of the patient.

In recent years we have developed a close working arrangement with hospital staff to improve still further the after-care of patients discharged from hospital and requiring further treatment and care at home.

This work is done with the active support and co-operation of all General Practitioners in the County. This applies to patients from nearly all hospital departments but particularly patients from surgical, medical, geriatric, psychiatric and paediatric departments. Close working co-operation between the Health Department and Hospitals works both ways in providing better care for the patient at home after a stay in hospital and also in keeping domiciliary workers in touch with new nursing techniques and modern therapy.

HOME HELP SERVICE

The Home Help Service continued to make a most valuable contribution to community care. The total number of householders where the services of a Home Help was arranged was 1,106. Over 76 were enabled to make private arrangements from the register of private helpers. The householder pays the person concerned for her services and this saves some of the costs of administration. The Officers of the Ministry of Social Security have also been most helpful in arranging for payment of a domestic help allowance to a few elderly people.

This is an expensive service to run and every effort is made to ensure that the help is only given when the need is evident and a visit is made by one of our Area Assistant Organisers when a request is made by a G.P. or hospital. The expected duration of help is noted on each application form, but as the vast majority of householders are aged, many of them require help for an indefinite period. Health visitors now follow up after the initial visit by the Assistant Organiser.

During the year Home Helps continued, when requested, to assist the District Nurses who were visiting cases receiving help. This is particularly valuable in helping with lifting heavy and helpless patients cared for at home. The first Home Help was given time each week to assist the District Nurse with the bathing of patients. This scheme was started in Rhyl in December and it is hoped to release more Home Helps for this work.

The interest in the elderly by neighbours and friends has been encouraged and sometimes help has been given to tired relatives who

may be feeling the strain. A number of problem families have responded well to the patient collaboration of an experienced Home Help. This is work that calls for a lot of supportive help. 16 families where there was a working member benefited and in some cases this enabled them to continue in employment.

The erection of so many purpose built houses, bungalows and flats for the elderly has been a great boon for the 1,000 (approx) now accommodated. 15% of those in special type housing receive the service of a Home Help and this means that some of the tenants enjoy central heating and convenience of movement. The Wardens who are looking after some of the dwellings are doing a magnificent job in maintaining contact and developing the social life and there have been many instances of happy co-operation with Home Helps.

The appointment of a second Assistant Home Help Organiser has helped to develop the service and has provided an improved personal service of support and supervision of Home Helps and their work.

In the six months, July to January, 1968, the two organisers made the following visits:-

396 to Home Helps
749 to Householders

The Health Visitors have played a most valuable part in the care of the elderly and closer working relationships with general practitioners and hospital staff have given a better and more immediate service to those in need.

The Home Help Service is an integral part of the County Health Service, providing a personal service to persons in their own homes. The Service is much appreciated by all concerned - doctors, hospital staff, social workers and above all, by those who are cared for by the Home Helps in their own home.

Details of cases helped and hours worked are shown in table 19.

Table 19

HOME HELP TO HOUSEHOLDERS FOR PERSONS:

| <u>Aged 65 or Over</u> | <u>Aged Under 65</u> | | | | <u>Total</u> |
|----------------------------|---|--------------------------------|------------------|---------------|--------------|
| | <u>Chronic Sick and Tuberculous</u> | <u>Mentally Disordered</u> | <u>Maternity</u> | <u>Others</u> | |
| No. of Cases 964 | 44 | 8 | 13 | 77 | 1106 |

Of the above, 10 persons received evening help and 26 received help on Sundays.

Hours Worked:

| | |
|----------------------|----------------|
| Eastern Area | 41,479 |
| Central Area | 29,439 |
| Western Area | 73,227 |
| | <u>144,146</u> |

NEW CASES HELPED IN 1968

Aged 65 or over
on first Visit
in 1968

Aged under 65 on first Visit
in 1968

| | <u>Chronic sick and Tuberculous</u> | <u>Mentally Disordered</u> | <u>Maternity</u> | <u>Others</u> | <u>Total</u> |
|------------------|---|--------------------------------|------------------|---------------|--------------|
| No. of Cases 349 | 9 | 2 | 7 | 43 | 410 |

Number of helpers employed at 31st December, 1968:

| | |
|-------------------|------------|
| Full-Time | 3 |
| Part-Time | <u>151</u> |
| | <u>154</u> |

| | |
|--|----|
| Number of Meetings of Home Helps | 6 |
| Number of Training Courses held | 2 |
| Number of Training Certificates Awarded | 33 |
| Number of Long Service Awards - 10 years | 4 |
| Number of Long Service Awards - 15 years | 7 |

P.M. MATTHEWS
Home Help Organiser

MENTAL HEALTH

Services for the mentally disordered provided by the authority continued at a satisfactory level during 1968, bearing in mind the limitation of trained staff and premises. Once again, our biggest problem has been the shortage of trained workers in all fields - Mental Welfare Officers - Adult Training Centres, Junior Training Centres, and the hostel. The Authority continued during the year with its policy of allowing staff to go on appropriate training courses and during the year one Assistant Mental Welfare Officer commenced attendance at the University Liverpool, on a twelve months course for the Diploma in Applied Social Studies (Psychiatric Social Work). One Mental Welfare Officer and one Assistant Mental Welfare Officer were attempting a two year course in social work at the Liverpool College of Commerce.

We have continued our policy of recruiting trainees in all branches of our Mental Health activities and during the year one Trainee Assistant from the Junior Training Centre commenced attendance at a two year Diploma Course for Teachers of Mentally Handicapped Children at the College of Commerce, Cardiff.

At the end of 1968, we had one Chief Mental Welfare Officer, one Senior Mental Welfare Officer, four Mental Welfare Officers, two Assistant Mental Welfare Officers and one trainee M.W.O. We were only able to meet the day-to-day needs of the mentally ill, the number of staff did not permit the type of care or after-care that we hope to provide when we eventually have a full establishment of trained staff. In addition, the Mental Health Services are constantly developing and patients are looking more and more to the staff for help on discharge from hospital. We were able to meet the demands made upon us thanks largely to the hard work and initiative of Mental Welfare Officers, the ready help of the Consultants and other staff at the Denbigh and Deva Hospitals and the co-operation of General Practitioners.

Services for the subnormal continued on a satisfactory level during 1968. The Junior Training Centre at Tirionfa, Rhuddlan, continued to function very satisfactorily, particularly now as we have adequate space and an increased complement of trained staff. There is accommodation at Tirionfa for sixty subnormal children - boys and girls - with adequate space for indoor and outdoor activities. During 1968, children from East Flintshire continued to attend the Training Centre at Chester. At the end of 1968, forty-one children from Flintshire were attending the Chester centre, and eight attended Denbighshire Centres, being conveyed by special transport provided each day.

The Authority has now agreed to the erection of a new Training Centre at Queensferry for Juniors and Adults and it is hoped that work on the centre will commence about mid 1969. The new centre will accommodate 30 juniors and 60 adults and when completed will take the trainees who now go to the centre at Chester.

During the year, the social clubs for the mentally disordered already established continued to function and indeed developed and enlarged those activities and attracted more persons who need this kind of help and support. Members of the staff run these clubs and they are assisted by some of the club members who are encouraged to take an active part in the club's activities as this is a vital factor in achieving their ultimate recovery.

The work at Fronfraith Hostel, Rhyl, continued successfully in 1968. This hostel is for mentally disordered people, usually from hospital, who require a period in a sheltered atmosphere before being discharged completely to the community, and their employability is a major factor in their selection. Many have been in hospital for a number of years and either had no homes to go to or no homes willing to have them. During the year a total of 45 people were admitted, male and female, four were returned successfully to their homes, thirteen to lodgings, one was admitted to a Special Unit. Out-county cases continued to be admitted.

During the year we continued with our policy of finding lodgings for mentally disordered patients who were fit to discharge from hospital and at the end of 1968 110 persons were in boarding house accommodation in the county in Rhyl and Prestatyn. This has entailed a great deal of work for the mental welfare officers, who not only have to find suitable lodgings, but who have to supervise and help the ex-patients when they come out of hospital and this supervision will continue indefinitely in the majority of cases.

Because of the success of our "boarding house" scheme we have decided for the time being to defer the erection of a second hostel in the Eastern end of the county. It may well be that adequate community care for ex-patients can be found in suitable supervised lodgings or by erecting or acquiring housing accommodation, and allowing patients to move in and manage their affairs with some help from the Authority's staff.

I would like to thank again the medical superintendents of the North Wales Hospital, Denbigh, and the Deva Hospital, Chester, for their help and co-operation during the year. I would also like to thank Dr. M.J. Craft, the Consultant in Subnormality, for his continued help in dealing with the many complex problems presented by sub-normal patients and in particular in holding out-patient clinics for the

subnormal in the county and providing hospital beds for short-term care. I would also like to thank, in particular, all general practitioners in the county for their ready help to the staff of the mental health section in the day to day administration of the Mental Health Act. As we get more trained mental welfare officers into the service we will be able to improve the level of community care and I know that this will be appreciated by patients and also by all the general practitioners.

Mental Health Act, 1959: There has been a gradual annual increase in the number of patients admitted informally since the introduction of the new Act. It is estimated that the figure of 75 in the table is about a $\frac{1}{4}$ of the total that did, in fact, obtain hospital admission as informal patients.

Table 20

MENTALLY-ILL PATIENTS DEALT WITH BY
MENTAL WELFARE OFFICERS, 1968

| | Males | Females | Total |
|---|-----------|-----------|-----------|
| Admitted to Hospital for observation: | | | |
| Under Section 25 | 12 | 15 | 27 |
| Under Section 29 | 27 | 29 | 56 |
| | <u>39</u> | <u>44</u> | <u>83</u> |
| | | | |
| | Males | Females | Total |
| Admitted to Hospital for treatment | - | - | - |
| Under Section 26 | | | |
| Admitted to Hospital informally: | | | |
| Under Section 5 | 31 | 44 | 75 |
| Psychopathic Patients (admitted to Hospital) | - | - | - |

Details of the work done in the community for the mentally subnormal are given in Tables 21 and 22.

Home visiting of subnormal patients is carried out by Health Visitors and Mental Welfare Officers. The Health Visitors visit all patients under 16 years of age and Mental Welfare Officers visit all patients over that age and any cases with special problems. Reports on home visits are submitted by the staff to each Area Health Subcommittee.

Table 21

**MENTAL SUBNORMALITY
CASES ON LIST FOR VISITING IN THE COMMUNITY**

| | Age under 16 | | | Age 16 and over | | | Total |
|-------------|--------------|----|----|-----------------|-----|-----|-------|
| | M | F | T | M | F | T | |
| 1967 | 57 | 24 | 81 | 101 | 106 | 207 | 288 |
| 1968 | 70 | 29 | 99 | 107 | 114 | 221 | 320 |

In 22 details are given of visits paid by Mental Welfare Officers since the new Act came into force. It will be noted that 1768 after-care visits were paid and 666 visits other than after-care, where advice and help was sought, and in many instances for mentally ill patients who did not receive hospital treatment. In addition the Mental Welfare Officers paid 818 visits to mentally subnormal patients.

Table 22

VISITS PAID BY MENTAL WELFARE OFFICERS

| Years: | 1960 | 1966 | 1967 | 1968 |
|------------------------------------|------|------|------|------|
| To Mentally Ill Patients:- | | | | |
| (a) After-care visits | 512 | 2178 | 2892 | 1768 |
| (b) Visits (other than After-care) | 589 | 602 | 756 | 666 |
| To Mentally Subnormal Patients | 385 | 991 | 1383 | 818 |

In addition, during 1968 Health Visitors paid 502 visits to mentally subnormal patients and 493 to patients who were mentally ill.

TABLE 23

NUMBER OF PERSON UNDER LOCAL HEALTH AUTHORITY CARE AT 31ST DECEMBER 1968

| | Mentally III | | | | Elderly mentally infirm* | | Psychopathic | | | | Subnormal | | | | Severely subnormal | | | | Total |
|---|--------------|-------|-------------|-------|--------------------------|-------|--------------|-------|-------------|--------|--------------|--------|-------------|--------|--------------------|--------|-------------|--------|-------|
| | Under age 16 | | 16 and over | | M | F | Under age 16 | | 16 and over | | Under age 16 | | 16 and over | | Under age 16 | | 16 and over | | |
| | M (1) | F (2) | M (3) | F (4) | M (5) | F (6) | M (7) | F (8) | M (9) | F (10) | M (11) | F (12) | M (13) | F (14) | M (15) | F (16) | M (17) | F (18) | |
| 1 Total number | | | 248 | 345 | | | | | 1 | | 21 | 5 | 53 | 54 | 49 | 24 | 54 | 60 | 914 |
| 2 Attending workshops, day centres, or training centres (including special units) * | | | 2 | | | | | | | | 19 | 1 | 19 | 25 | 25 | 16 | 26 | 22 | 155 |
| 3 Awaiting entry to workshops, day centres, or training centres (including special units) | | | | | | | | | | | | | | | | | | | |
| 4 Receiving home training | | | | | | | | | | | | | | | | | | | |
| 5 Awaiting home training | | | | | | | | | | | | | | | | | | | |
| 6 Resident in L. A. home/hostel ** | | | 6 | | | | | | | | 1 | | 8 | 6 | | | 1 | | 23 |
| 7 Awaiting resident in L. A. home/hostel | | | | | | | | | | | | | | | | | | | |
| 8 Resident in other home/hostel | | | | | | | | | | | | | | | | | | | |
| 9 Boarded out in private household | | | | | | | | | | | | | | | | | | | |
| 10 Attending day hospital | | | | | | | | | | | | | | | | | | | |
| 11 Receiving home (a) suitable to attend a training centre lines 2-10 (b) Others | | | 240 | 345 | | | | | | | 1 | 4 | 26 | 23 | 24 | 8 | 27 | 38 | 736 |

* Line 2 includes 47 Persons who attend the Chester and Denbighshire Training Centres.

** Line 6 includes 3 Persons from Other Authorities.

TABLE 24
NUMBER OF PERSONS REFERRED TO LOCAL HEALTH AUTHORITY DURING YEAR ENDED 31ST DECEMBER, 1968

| Referred by | Mentally III | | | Psychopathic | | | Subnormal | | | | Severely subnormal | | | | Total | | |
|---|--------------|-----|-------------|--------------|-----|-------------|--------------|-----|-------------|--------------|--------------------|-------------|--------------|------|-------|-------------|------|
| | Under age 16 | | 16 and over | Under age 16 | | 16 and over | Under age 16 | | 16 and over | Under age 16 | | 16 and over | Under age 16 | | | 16 and over | |
| | M | F | M | F | M | F | M | F | M | F | M | F | M | F | | | |
| | (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) | (9) | (10) | (11) | (12) | (13) | (14) | | (15) | (16) |
| (a) General practitioners | | | 52 | 56 | | | | | | | | | | | | | 108 |
| (b) Hospitals, on discharge from in-patient treatment | | | 44 | 67 | | | | | | | | | | | | | 111 |
| (c) Hospitals, after or during out-patient or day treatment | | | 34 | 46 | | | | | | | | | | | | | 80 |
| (d) Local education authorities | | | - | - | | | | | 1 | 1 | | | 8 | 4 | | | 14 |
| (e) Police and courts | | | 7 | 3 | | | | | | | | | | | | | 10 |
| (f) Other sources | | | 15 | 16 | | | | | | | | | | | | | 31 |
| (g) Total | | | 152 | 188 | | | | | 1 | 1 | | | 8 | 4 | | | 354 |

Note: Only one referral should be recorded for one patient unless the local authority ceased to provide services after one referral and before the next.

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 | 35 |
| Enteric Fever (Typhoid) | - |
| Erysipelas | 2 |
| Food Poisoning | 20 |
| Measles | 603 |
| Meningococcal Infections | - |
| Ophthalmia Neonatorum | - |
| Paratyphoid | - |
| Acute-encephalitis - Infective | - |
| - Post-infective | - |
| Acute Poliomyelitis - Paralytic | - |
| - Non-paralytic | - |
| Pneumonia | 18 |
| Puerperal Pyrexia | 5 |
| Scarlet Fever | 12 |
| Tuberculosis - Respiratory | 9 |
| - Meninges and C.N.S. | - |
| - Other | 1 |
| Whooping Cough | 6 |
| Malaria (contracted abroad) | - |
| | 711 |

The number of infectious diseases notified during the year is again small compared with previous years. If the cases of measles were removed the rest only amount to 108.

Notification is far from complete and only a fraction of notifiable cases are in fact reported on by doctors in general practice and hospital. For this reason, I continued to use four group practices in the County as "spotters" for outbreaks of infectious illnesses. Doctors in these practices notify me when cases of infectious diseases show a sharp rise in their area. By regular contact with them it is then possible to ascertain if cases are on the increase or not and also when an outbreak is declining or has come to an end.

In this way, action can often be taken to advise schools and staff of what is happening and to take steps to prevent or limit spread of infection.

During the year, there was an increase in the cases of dysentery notified 35, and this is again possibly only a fraction of the cases which occurred in the particular locality. Food poisoning usually more serious than dysentery decreased during the year but again the total cases occurring was probably much higher than the number notified, namely, 20 cases.

The Ministry of Health have stated that they plan to look at the whole question of notifying infectious diseases with a view to obtaining a more accurate picture of the position in the county as a whole.

During the year cases of infectious illness requiring hospital treatment were admitted to accommodation at Colwyn Bay Isolation Hospital, Wrexham Isolation Unit or Clatterbridge Hospital.

Table 25 shows the deaths from Tuberculosis during 1967 showing those in males and females and due to respiratory and non-respiratory illness.

Table 25

DEATHS FROM TUBERCULOSIS, 1968

| | Males | Females | Total |
|------------------------------|---------|---------|----------|
| Respiratory Tuberculosis | 3 | - | 3 |
| Non-respiratory Tuberculosis | 5 | 3 | 8 |
| All forms | <hr/> 8 | <hr/> 3 | <hr/> 11 |

Notification of new cases of tuberculosis fluctuate slightly from year to year, but the overall trend is a gradual reduction in new cases notified, both respiratory and non-respiratory. In the same way, deaths from tuberculosis have also diminished during the last twenty years.

Tuberculosis is no longer a major public health problem and quite naturally the facilities used for tuberculosis in the past are now being used for chest diseases in general, and in line with the trend, the Tuberculosis Health Visitors are now designated Visitors for Chest Diseases, and visit all cases with chest complaints where after-care visiting would be of help to the patient.

During the year the close co-operation existing in the past with the Ministry of Social Security and the Group Resettlement Officer of the Ministry of Labour has been maintained.

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

Routine mass x-ray surveys of school children are not now carried out. Children found to be mantoux positive during the B.C.G. testing are referred to the Mass X-Ray Unit for a chest x-ray. Those found to be strongly positive - a very small number - are referred to the Chest Physician for a large plate chest x-ray and a clinical examination.

As stated elsewhere in this report the Semi Static Mass X-Ray Unit ceased to visit the county in 1968, after a period of nine years. However, the Welsh Hospital Board agreed that a Mass X-Ray Unit would be available to visit the county for two to three weeks each year to carry out surveys in various organisations, such as factories, etc. The unit will also x-ray children found to be mantoux positive during B.C.G.

Table 26
TUBERCULOSIS - CARE AND AFTER-CARE
DURING 1968

| | MALES | | | FEMALES | | | TOTAL | | |
|--|----------|---------|-------|----------|---------|-------|----------|---------|-------|
| | Under 16 | Over 16 | Total | Under 16 | Over 16 | Total | Under 16 | Over 16 | Total |
| | | | | | | | | | |
| 1. Number of cases notified to Chest Visitors: - | | | | | | | | | |
| Respiratory | - | 3 | 3 | - | 5 | 5 | - | 8 | 8 |
| Non-respiratory | - | 2 | 2 | - | - | - | - | 2 | 2 |
| Total | - | 5 | 5 | - | 5 | 5 | - | 10 | 10 |
| 2. Number of persons in contact (at home) with above cases: - | | | | | | | | | |
| Respiratory | 3 | 18 | 21 | 2 | 12 | 14 | 5 | 30 | 35 |
| Non-respiratory | 3 | 10 | 13 | 1 | 9 | 10 | 4 | 19 | 23 |
| Total | 6 | 28 | 34 | 3 | 21 | 24 | 9 | 49 | 58 |
| 3. Of the "contacts" shown in (2) above, number known to have been examined by Chest Physician: - | | | | | | | | | |
| Respiratory | 3 | 17 | 20 | 2 | 11 | 13 | 5 | 28 | 33 |
| Non-respiratory | 3 | 9 | 12 | 1 | 8 | 9 | 4 | 17 | 21 |
| Total | 6 | 26 | 32 | 3 | 19 | 22 | 9 | 45 | 54 |

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 | 3 |
| Gonorrhoea | 44 |
| Other conditions | 157 |
| TOTAL | <u>204</u> |

Section D

FOOD AND DRUGS ACT 1956

REPORT OF THE COUNTY PUBLIC HEALTH OFFICER

Environmental Health: The following measures were amongst the new legislation introduced during the year ended December 31st, 1968:-

- Caravan Sites Act, 1968
- Clean Air Act, 1968
- Countryside Act, 1968
- Health Services and Public Health Act, 1968
- Trade Descriptions Act, 1968
- Imported Food Regulations, 1968
- Fish and Meat Spreadable Products Regulations, 1968
- Public Health Infectious Disease Regulations, 1968
- Skimmed Milk with Non-Milk Fat (Amended) Regulations, 1968
- Canned Meat (Amended) Regulations, 1968
- Sausages and other Meat Products (Amended) Regulations, 1968

Food and Drugs: 1674 Samples were taken during the year ended 31st December, 1968. 624 Samples were sent for chemical analysis and the remainder were sent to the Public Health Laboratory Service for bacteriological examination.

Herewith, is a summary of the samples submitted for chemical analysis.

| <u>Article</u> | <u>Nos taken</u> | <u>Genuine</u> | <u>Not genuine or below standard</u> |
|-------------------------|------------------|----------------|--------------------------------------|
| Milk | 321 | 287 | 34 |
| Miscellaneous Groceries | 98 | 96 | 2 |
| Alcoholic Drinks | 22 | 22 | |
| Patent Medicines | 23 | 23 | |
| Fruit and vegetables | 36 | 36 | |
| Ice Cream and Lollies | 13 | 13 | |
| Meat Products | 42 | 38 | 4 |
| Dairy Produce | 17 | 17 | |
| Food Colours | 13 | 12 | 1 |
| Confectionery | 39 | 38 | 1 |
| | <u>624</u> | <u>582</u> | <u>42</u> |

Milk: (a) Chemical Analysis: 321 Samples were sent to the Public Analyst who reported that 34 were not genuine. 3 Samples contained added water, 20 had butter fat deficiencies, 9 were low in solids not fat, and 2 contained foreign matter. Successful legal proceedings were instituted in respect of 2 samples of milk containing respectively 13% and 14% of added water.

(b) Biological Examination: No evidence of bovine tuberculosis was found in any sample, but Brucellosis was found in the milk distributed by 5 Producer/Retailers. Brucella was found in 39 samples, but this figure is inclusive of individual and group samples. Pasteurisation Orders were placed on the 5 Producer/Retailers.

When considering the hierarchy of officials who visit a farm it would appear that milk production is excessively controlled. Yet there still exists serious public health problems. The farmers veterinary advisers can treat mass abortion in a herd without having to notify the Local Authority's Health Department or the Milk Marketing Board. Consequently, there is nothing to stop the infected milk from being diverted at the Creamery to a retailer purchasing bulk raw milk for bottling on his own premises.

Reference has been made in previous reports to those problems dealing with the disposal of infected animals and of those incurred when directing known infected milk for pasteurising purposes.

(c) Pasteurising Plants: There is only one milk pasteurising plant in the county. This is inspected weekly, attention being paid to the efficiency of the pasteurising operators. All samples taken off the plant were found to be satisfactory.

(d) School Milk: All milk supplied to the schools is pasteurised. The County Council's economy cuts produced some problems in the distribution of school milk. The larger milk distributors found that it was not economical to deliver milk to some of the village schools because of the small quantities involved, therefore, they did not tender for the contract. Local retailers were asked to collect and deliver pasteurised milk. In one area, because of the scattered nature of the district, there were delays in collection and delivery with consequent complaints of poor keeping quality.

Other Foods: 303 Foodstuffs were submitted for chemical analysis and 8 were found to be adulterated or did not comply with the Labelling of Food Orders. Warning letters were sent in all cases. 15 Samples of food colouring matter were taken from various food manufacturing premises and one prohibited colour - Blue V.R.S. was found. The baker was allowed to surrender it.

24 Samples of foodstuffs were also submitted for bacteriological examination. These included meat pies, savoury ducks, prawn cock-tails, black puddings, butchers meat sold as pet food, corned beef, mussels, sausages, cream, liquid eggs, synthetic cream and meat pie fillings. No organisms of significance were isolated.

A small amount of chemicals from sprays were found on apples and pears but the amounts were well below the permitted maximum.

5 complaints were received regarding foreign matter found in foods. After a thorough investigation and having regard to all of the circumstances it was decided that no legal action could be taken. The attention of the food distributors or manufacturers was drawn to the matter in each case.

Fertiliser and Feeding Stuffs: 19 Samples of fertilisers and 13 samples of feeding stuffs were chemically examined and all were satisfactory. 11 Samples were also bacteriologically examined, and one of the group of salmonella organisms was found in a sample of bone meal.

Other Duties: The inspection of schools, school canteens and clinics, the investigation of complaints, water supply and refuse disposal. Inspection of premises under the Pharmacy and Poisons Act.

Handicapped Persons - Adaptation to Premises - 20 applications were received for assistance in the conversion of homes so that physically handicapped people could be made mobile. These alterations included the preparation and treatment of walls and ceilings, and the strengthening of floors so that kidney unit machines could be installed, the lowering of the level of kitchen sinks, widening doors, the provision of handrails, downstairs toilets, ramps, the extending and levelling of footpaths.

Health Education: Talks and film shows were given to Young Farmers Clubs, Young Wives Clubs, Church Organisations, Canteen Staffs, Nursing and Domestic Science Students. The topics included clean food, the social services, smoking and lung cancer, environmental health and housing.

A successful exhibition was also staged at the Flint and Denbigh Agricultural Show. This year's theme was on "The Use of Leisure" and was supported by a display of the work undertaken by students at the Glyndwr Evening Institute. This consisted of a practical demonstration in quilt making, basketry, weaving, needlework, flower arranging, painting and crotcheting.

The Flint Borough Council also helped with a display of large print books.

E. LEWIS.

Section E

NATIONAL ASSISTANCE ACT, 1948

The Welfare Committee administers the service 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.

National Assistance Act: Sections 29 and 30 - These important sections to the National Assistance Act are administered by the Health Committee. The County provides services for the blind and partially sighted and the deaf and dumb through agency arrangements with the Chester and District Blind Welfare Society and the Chester and North Wales Society for the Deaf respectively these two voluntary societies have given excellent service to the community for many years and continued their good work in the County during the year.

The total blind and partially sighted persons in the County are shown below. These persons were visited during the year by the Home Teachers of the Society and reported on to the appropriate Area Health Sub-Committees which are attended by a representative of the Blind Society.

A fairly recent innovation in the field of blind welfare has been the provision of Talking Book Machines. A small number of talking books have been available on loan from the Royal National Institute for the Blind for some years, but in the last few years there have been great strides in recording books on special topics and the provisions of special tape recorders operated by the blind persons to play these back. In 1966, the Health Committee agreed to pay the annual rental for the hire of the tape recorders for each blind persons provided with this equipment. By the end of 1968, 67 blind persons in the county were using Talking Book Machines and getting a regular supply of books of their choice on suitable tapes. Each newly registered blind person is now informed of this scheme and given the opportunity of hearing a recording and when possible handling the equipment himself.

Every effort is made to find suitable work for blind persons who are employable either in open industry or in sheltered workshops. In this connection the County works in collaboration with the Blind Persons Resettlement Officer of the Ministry of Labour and with the Group Disablement Resettlement Officer and the staff of the Chester Blind Society.

The majority of the blind and partially sighted persons on the register are elderly. Amongst these persons valuable social work is done by the Home Teachers by regular visiting. Regular visiting ensures that the many needs of the blind are met and met quickly, whether financial problems, domestic or purely personal and social.

From Table 30 will be seen that there are 102 deaf persons in Flintshire who are visited by the Chester and North Wales Society for the deaf and many of whom also avail themselves of the excellent club facilities provided by the society.

Reports on the work of the Welfare Officers are submitted to each Area Health Sub-Committee and the Secretary of the Society for the Deaf attends. The Health Committee has always been appreciative of the excellent work done by the Society for the deaf in the County.

The total number of Blind persons on the Register was 356. 11 of these were under 16 years of age and at school, and 71 were in the employable age group from 16-59 and 31 were in employment as follows:-

| | |
|-------------------------|----|
| Workshops for the Blind | 8 |
| Home Workers' Scheme | 3 |
| Ordinary Conditions | 20 |

There were 156 on the register of Partially/Sighted, of these 5 were employed. 9 were children attending special schools and 6 were attending local day schools.

Regular visits were made by the Home Teachers and lessons were given where required in embossed types and handcrafts. Weekly craft classes were held in Buckley and Prestatyn; also, monthly socials and a weekly dancing class in Rhyl.

Table 27

**A - FOLLOW-UP OF REGISTERED BLIND AND
PARTIALLY-SIGHTED PERSONS - 31st DECEMBER, 1968**

| | 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 | 1 | 4 | - | 18 |
| Partially-sighted | 5 | 1 | - | 13 |
| (b) Treatment (medical surgical or optical): | | | | |
| Blind | 3 | 2 | - | 4 |
| Partially-sighted | 5 | 2 | - | 1 |
| Total Blind and partially-sighted | 14 | 9 | - | 36 |
| (ii) Number of cases at (i) (b) above which on follow-up action have received treatment: | | | | |
| Blind | - | 1 | - | 2 |
| Partially-sighted | 2 | 1 | - | 1 |
| Total Blind and Partially-sighted | 2 | 2 | - | 3 |

N.B. 3 Cases died.

B - OPTHALMIA NEONATORUM

| | | |
|--|---|------|
| (i) Total number of cases notified during the year | - | NONE |
| (ii) Number of cases in which:- | | |
| (a) Vision lost | - | NONE |
| (b) Vision impaired | - | NONE |
| (c) Treatment continuing at end of year | - | NONE |

Table 28

CHESTER AND NORTH WALES SOCIETY FOR THE DEAFLIST OF PERSONS ON THE REGISTERS ON
THE NIGHT OF 31st DECEMBER, 1968

The following information is given by Mr. A. E. Middleton, Secretary - Superintendent of Chester and North Wales Society for the Deaf.

| Details | Up to 16 | 16-64 | 65 & over |
|---------------------|----------|-------|-----------|
| Deaf with Speech: - | | | |
| Males | 1 | 4 | 2 |
| Females | - | 3 | 10 |
| Deaf No speech: - | | | |
| Males | 4 | 15 | 5 |
| Females | 4 | 18 | 3 |
| Hard of Hearing: - | | | |
| Males | 3 | 8 | 5 |
| Females | 3 | 8 | 6 |
| <hr/> | | | |
| TOTALS | 15 | 56 | 31 |

Number of Males on Register at 31:12:68 = 47

Number of Females on Register at 31:12:68 = 55

TOTAL = 102

Handicapped Persons - General Classes: We continued to provide a limited service for the generally handicapped during 1968. Limited entirely due to lack of trained staff and repeated advertisements have not attracted a single trained person.

Mrs. Wareham completed her course of training as a social worker in June, 1968, gained The Certificate in Social Work of The National Council in Social Work training. She was designated Senior Social Worker for the Handicapped and based at the Shire Hall. She was made responsible for the administration of the services for the handicapped and continued to carry out case work in an area of the county, but her case load was smaller than that of the other two Home Visitors because of her supervisory duties.

With the increase in numbers of handicapped persons on the register, it is my intention to apply for an additional Home Visitor next year, bringing the total social work staff up to four. This would help both the home visiting of the handicapped and enable us to do more constructive rehabilitation work at our five social clubs.

During the year the Home Visitors worked closely with Health Visitors, the Group Disablement and Resettlement Officer of the Department of Health and Social Security. In addition they have now developed valuable contacts with several voluntary bodies and members of these voluntary organisations attend at each of the 5 Social Clubs held for the handicapped each week.

The total number of handicapped persons on our register continued to grow as the figures in Table 31 shows. However, there are many others who would benefit by registration and the help that a full service could provide, but so far we have not been able to go out and seek them due to lack of trained social workers to help in this field. I see no way out of this difficulty except to train our own staff and this is slow procedure as we can only send one person away on a two year course at a time and to train a full complement of staff for the work would take six to eight years.

A great deal of work is done each year to help the handicapped by carrying out adaptations at their homes. The nature of the adaptations vary in each case and depend on the needs of the handicapped and the type of house in which he or she resides. During 1968, 17 adaptations were carried out at a total cost of £1,609. and these varied from minor works such as fixing a handrail to a stairway to a complete adaptation of a room for the use of an artificial kidney machine, such an adaptation would cost up to £400. In this work, Mr. E. Lewis, the County Public Health Officer, has played a very valuable role in visiting and assessing the extent of the structural work required to implement the recommendations of the social worker. In the larger schemes it is necessary

for the County Architect to prepare details of the work required so that tenders can be received from suitable local builders. When the property is owned by a Local Authority they will often carry out the work for us and charge the department the cost of labour and materials.

During the year the scheme for adaptation of housing for the handicapped became more widely known and, therefore, more requests were received. All requests were inspected by Mr. Lewis, the County Public Health Officer, and a member of the Architect's staff. Work was carried out by either County Architect's staff, Local District Councils or Private Contractors. The costs varied from £5. to over £300. according to work done which was as follows:-

- Providing ramps - 5 cases
- " concrete paths - 2 cases
- " fixing toilet aids - 2 cases
- " handrails - 6 cases
- " drives and lowering kerbs for invalid cars - 3 cases
- " partition in house - 1 case
- Lowering of washbasin - 1 case
- Building of new toilet - 1 case
- Providing downstairs toilet - 5 cases
- Adaptation of downstairs room as bathroom - 3 cases

During the year, we had the use of a special ambulance to convey handicapped persons to the social classes. This ambulance is fitted with a hydraulic lift which will lift a patient in his wheelchair from ground level to inside the vehicle, and carry a total of 8 patients in wheelchairs or up to 14 sitting cases not in chairs. This vehicle has made a great difference to the attendance of the more seriously handicapped at these classes and been much appreciated by all confined to wheelchairs.

In conjunction with the Deeside Round Table, a swimming club, known as The Deeside Handicapped Persons Swimming Club was formed and handicapped persons are transported to this club on a Friday evening for one hour's swimming instruction. A number of the members were presented with medals at the end of the year.

Very successful exhibitions and sales of work done by handicapped persons were held during the year at the Denbighshire and Flintshire Agriculture Show and at the Town Hall, Chester. Christmas parties were again held at the Mold, Holywell and Rhyl High Schools. At these parties voluntary organisations helped with refreshments and the Social Service Groups from the respective schools helped with entertainments and distribution of presents.

A holiday was booked at the Derbyshire Miners' Holiday Centre,

Rhyl, for the period 2nd to 9th May. All handicapped persons were invited and a total of 129 handicapped persons and relatives took the holiday. The two visitors for the handicapped, together with two volunteers and a member of my staff, lived in at the holiday camp and were always available to give help and guidance to handicapped persons. Members of voluntary organisations in the Western area were invited to special meetings held at Rhyl and Mold, and expressed a keen desire and willingness to help either with monetary gifts or in kind. The programme for the week included coach tours each day and variety shows each evening. Everyone participating in the holiday thoroughly enjoyed themselves and many letters of appreciation were received. The whole venture was a great success and it is hoped that it will be possible to repeat it next year.

Ever since our work for the generally handicapped started, we have had excellent support and help from numerous voluntary organisations in the county and this valuable help makes it much easier to meet the many calls made on our limited staff by the growing services for this group of persons.

I would like to thank the outside bodies who helped us in our work during the year - doctors, hospital staff and the many voluntary organisations who were always willing to assist when requested.

Additional registrations were received during the year and all old and new cases on the register are visited regularly by the Health Visitors, the Home Visitors visiting in those cases where their help with training will be beneficial or was considered necessary. The Home Visitors did not visit cases in employment or who would be unable to do any hand work but these cases were visited by the Health Visitor.

At the end of 1968 the number of handicapped persons excluding blind and deaf and dumb on our registers were as follows:-

| | Aged under 16 | Aged 16 to 64 | Aged 65 and over | Total |
|---------|------------------|------------------|---------------------|------------|
| Males | 105 | 62 | 36 | 203 |
| Females | 65 | 100 | 56 | 221 |
| TOTAL | <u>170</u> | <u>162</u> | <u>92</u> | <u>424</u> |

Particulars of Visits Paid by Home Visitors During Year:

| | |
|--|-------|
| Number of first visits (i. e., to new patients who have not been visited at any time previously) | 94 |
| Re-visits | 3675 |
| | <hr/> |
| | 3769 |
| | <hr/> |

Particulars of Attendances at Handicapped Persons Classes During Year:

| | | |
|----------------------|---|-----------------|
| Bagillt Clinic | - | 776 attendances |
| Buckley Clinic | - | 768 attendances |
| Connah's Quay Clinic | - | 899 attendances |
| Prestatyn Clinic | - | 772 attendances |
| Rhyl Clinic | - | 864 attendances |

Table 29

PATIENTS ON REGISTER OF HOME VISITORS OF HANDICAPPED PERSONS
ON 31ST DECEMBER, 1968

| Major handicaps | Age Under 16 (1) | Age 16-29 (2) | Age 30-49 (3) | Age 50-64 (4) | Age 65 or over (5) | Total (6) |
|--|------------------|---------------|---------------|---------------|--------------------|-----------|
| 1. Amputation | - | 1 | 1 | 4 | 8 | 14 |
| 2. Arthritis or rheumatism | - | 1 | 5 | 26 | 31 | 63 |
| 3. Congenital malformations or deformities | - | 3 | - | - | 1 | 4 |
| 4. Diseases of the digestive and genito-urinary systems, of the heart or circulatory system, of the respiratory system (other than tuberculosis) or of the skin | - | 3 | 4 | 13 | 12 | 32 |
| 5. Injuries of the head, face, neck, thorax, abdomen pelvis, or trunk. Injuries or diseases (other than tuberculosis) of the upper and lower limbs and of the spine. | - | 2 | 3 | 3 | 1 | 9 |
| 6. Organic nervous diseases - epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc. | - | 13 | 26 | 29 | 34 | 102 |
| 7. Neuroses, psychoses, and other nervous and mental disorders not included in line 6 | - | 9 | 2 | 1 | 1 | 13 |
| 8. Tuberculosis (respiratory) | - | - | 4 | 8 | 2 | 14 |
| 9. Tuberculosis (non-respiratory) | - | - | - | - | - | - |
| 10. Diseases and injuries not specified above | - | - | - | 1 | 2 | 3 |
| 11. Total | - | 32 | 45 | 85 | 92 | 254 |



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