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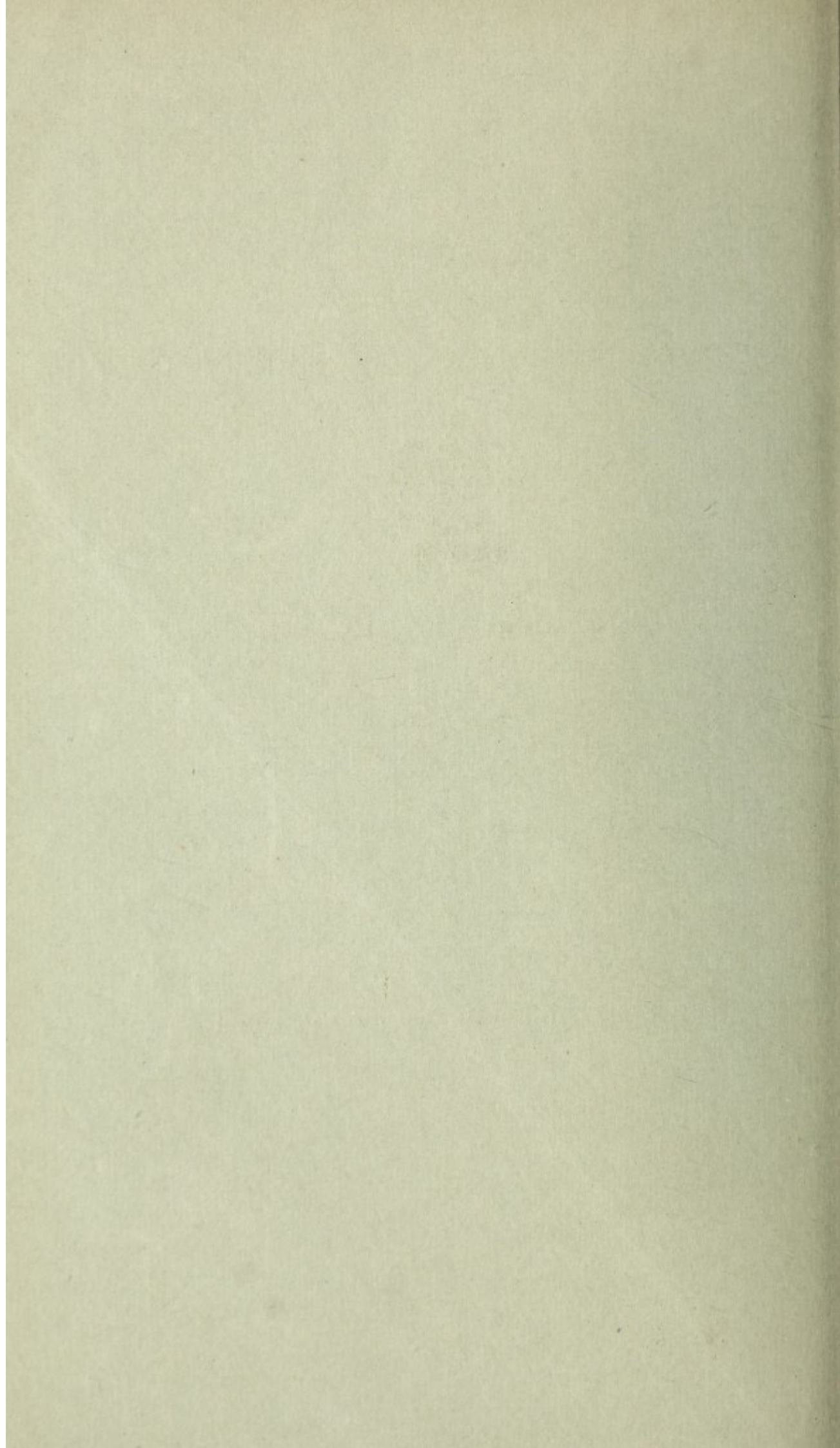
COUNTY BOROUGH OF BIRKENHEAD



ANNUAL REPORT
OF THE
MEDICAL OFFICER
FOR
1948

F. G. FOSTER, M.A., M.D.(Edin.), D.P.H.

Medical Officer of Health.



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Medical Officer of Health.

The Mayor, Aldermen and Councillors of the County Borough of Birkenhead.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit my Annual Report for the year 1948. The year has been a noteworthy one, in that it has seen the implementation of the National Health Service Act, 1946, an Act which has brought revolutionary changes to the Health Services in this country. This Act, the conception of which goes back many years, and which is of disputed parentage, came into being after a complicated and difficult gestation, on the appointed day, viz. 5th July, 1948.

As was to be expected with an enactment of such magnitude and far reaching issues, the first five months of its existence have been difficult ones, complicated by unforeseen teething troubles, and some time must elapse before its full and successful implementation can be assured.

The first six months of the year were occupied in the preparation and completion of the various "proposals," for final submission to, and approval by, the Minister of Health.

The completed schemes, as approved by the Minister, have been embodied in a Booklet, a copy of which has been sent to every member of the Council.

Briefly, the effect of the new Act, as far as my Department is concerned, is to divorce to a large extent, preventive from curative medicine. The Health Committee loses control of their Municipal Hospitals, the Tuberculosis and Venereal Diseases Services, the Municipal Laboratory and the Welfare of the Blind. The first three of these are transferred to the Regional Hospital Board; the Municipal Laboratory becomes part of the Medical Research Council; and the Welfare of the Blind passes to the Welfare Committee.

On the other hand, the responsibilities of the Health Department have been greatly extended in other directions, and several new duties have been allotted to it.

The Annual Report this year deals with the Services transferred to the Regional Hospital Board only from 1st January, to the time when the new Act became operative, viz. 5th July. The extensions of the existing services and the new duties accruing to this Department are dealt with under their appropriate sections.

In conclusion, I have to acknowledge with gratitude the help and co-operation I have received from the Chairman and members of the various Committees on which I have the honour to serve, from my colleagues in other Departments, and from the staff under my control.

Your obedient servant,

F. G. FOSTER.

Medical Officer of Health.

PREFACE

The Registrar General's estimate of the population of the Borough as at 31st December was 140,300.

The Infantile Mortality Rate was the lowest yet recorded in the Borough.

There was only one Maternal Death, that of a Birkenhead resident who died outside the Borough.

The Death Rate of 12.1 was the lowest recorded since 1938.

The notifications of Measles and Whooping Cough reached the highest peak since notification of these diseases was made compulsory in October 1939.

Under the Disabled Persons (Employment) Act 1944 the Local Authority employ a quota of disabled persons. To enable such persons to become eligible for entry into the Superannuation Scheme, three grades, from a medical standpoint, were introduced and thus many men and women were employed, who under the old Regulations of the Corporation would have been rejected as "unfit."

1,365 medical examinations and re-examinations were carried out by the staff of the Department in connection with fitness for entry into the Corporation service, etc., compared with 827 in 1947, 501 in 1946 and 232 in 1945.

743 cremations took place during the year at Landican as compared with 691 in 1947. 19.5 per cent of the total cremations were Birkenhead residents.

The transfer of the Hospitals, Tuberculosis and Venereal Diseases Clinics, Municipal Laboratory and Welfare of the Blind Department, entailed also the transfer of the Medical, Nursing, Domestic and Clerical staffs, engaged both centrally and peripherally in these services, to their respective new Authorities.

During the year Dr. D. L. Murray, Deputy Medical Officer of Health, resigned to take up an appointment with the Sheffield Regional Hospital Board, and Dr. D. F. Morgan was appointed as his successor.

Dr. W. F. Christian was also appointed as Assistant Medical Officer and Assistant School Medical Officer.

Miss L. Liggins, Matron of the Infectious Diseases Hospital, Mr. G. Wills, District Sanitary Inspector and Miss M. M. Graham, Non-Medical Inspector of Midwives, retired on attaining the age limit after 38, 36 and 32 years' service respectively with the Corporation, and I wish to acknowledge their long and faithful service to this Department.

SHORT STATISTICAL SUMMARY

Area of Borough	8,598 acres or 13.4 square miles
Estimated population (mid-year 1948)	140,300
Number of persons per acre (density of population)	16.3
Estimated number of houses in the Borough	35,376
Estimated product of penny rate	£3,820
Birkenhead general rate	16/9 in the £
Birth-rate (live) per 1,000 of the population	21.4
Death-rate per 1,000 of the population	12.1
Average death rate for the last 10 years	14.4
Infantile Mortality Rate (per 1,000 births)	53
Average number of children attending maintained schools	20,432
Number of children attending maintained schools medically inspected during the year	7,271

POPULATION, BIRTHS, AND DEATHS

POPULATION

Population.—The population of the Borough, as recorded at the time of the 1931 census was 147,803.

The Registrar-General has estimated the population of the Borough for 1948 to be 140,300.

BIRTHS

Births registered during 1948, and birth rate.—During the year 3,003 live births belonging to the Borough were *registered*.

The live birth rate for 1948 was 21.4.

Birth rate in recent years. The birth rates since 1935 are as follows:—

1935	17.0 per 1,000
1936	16.4 „
1937	16.3 „
1938	17.0 „
1939	16.8 „
1940	18.7 „
1941	18.5 „
1942	19.6 „
1943	21.9 „
1944	23.3 „
1945	21.2 „
1946	23.5 „
1947	24.8 „
1948	21.4 „

Still births.—In addition to live births, 79 still births belonging to Birkenhead were registered in accordance with Section 7 of the Births and Deaths Registration Act, 1926. This is equivalent to a still birth rate of 0.56.

Comparison of birth rate with rates for country generally:—

	Per 1,000 of Population	
	Live births	Still births
England and Wales	17.9	0.42
126 County Boroughs and Great Towns (including London) ...	20.0	0.52
148 smaller towns (estimated resident populations 15,000 to 50,000 at census, 1931).	19.2	0.43
London Administrative County	20.1	0.39
Birkenhead	21.4	0.56

Sex-distribution of births.—Of the 3,003 live births, 1,511 were males and 1,492 females; a proportion of 1,012 : 1,000.

Legitimacy.—Of the 3,003 live births registered 163 were illegitimate, a percentage of 5.08.

Registration of stillbirths.—The 79 stillbirths registered were classified as follows:—

Legitimate—Males	40
Females	34
Illegitimate—Males	3
Females	2
	<hr/>
	79
	<hr/>

The stillbirth rate was 39 per 1,000 total births.

Births notified during 1948.—During the year, 3,273 births were notified in the Borough under Section 203 of the Public Health Act, 1936. Of these 96 were stillbirths, leaving a total of 3,177 live births. This total includes births which occurred in the Birkenhead Maternity Hospital and the Birkenhead Municipal Hospital, many of which were transferable to other areas.

The following is an analysis of the above births:

Births in Public Institutions:—

Birkenhead Maternity Hospital...	694	(22 stillbirths)
Birkenhead Municipal Hospital ...	801	(36 „)
Infectious Diseases Hospital	2	(— „)
Births in Nursing Homes	325	(8 „)
St. Faith's Home	15	(1 „)

Other births:—

Notified by doctors	2	(— „)
Notified by midwives	1336	(29 „)
Notified by parents	2	(— „)

3177 (96 stillbirths)

Un-notified births.—The Registrars reported 83 cases of un-notified births; 25 by certified midwives and doctors, 6 by the Maternity Hospital staff, 1 by the Municipal Hospital staff, 49 by Annandale Nursing Home, and 2 by Claughton Maternity Nursing Home.

DEATHS

Death-rate.—1,712 deaths occurred during the year; the total figure includes 129 deaths of Birkenhead residents which occurred outside the Borough, but excludes 268 deaths of non-residents which occurred in the area. This gives a death-rate of 12.1 per 1,000.

Deaths in recent years.—The death rates since 1937 are as follows:

1937	13.0	per 1,000
1938	12.1	„
1939	12.9	„
1940	16.1	„
1941	18.9	„
1942	14.3	„
1943	14.8	„
1944	13.3	„
1945	13.7	„
1946	13.7	„
1947	14.3	„
1948	12.1	„

Sex-distribution of deaths.—Of the total deaths, 928 were males and 784 females, a proportion of 1,183 : 1,000.

Uncertified deaths.—In 1948 there was one uncertified death belonging to the area.

Coroners' inquests.—Coroners' inquests were held regarding 84 deaths—that is, in 4.9 per cent. of the total deaths during the year.

The Coroners' (Amendment) Act, 1926.—Under the provisions of this Act which came into force on 1st May, 1927, a Coroner may certify death, after a post-mortem examination has been held, **without an inquest**. During the year 74 of the registered deaths (4.3 per cent. of the total deaths) were certified in this way.

Infantile Mortality.—There were 159 deaths of infants under 1 year old. This corresponds to an infantile mortality rate of 53 per 1,000 births.

There were 12 deaths in illegitimate infants under 1 year old; giving an illegitimate mortality rate of 74 per 1,000.

The infant mortality rates for each year since 1937 are given below:

1937	77
1938	75
1939	58
1940	80
1941	102
1942	68
1943	74
1944	59
1945	78
1946	67
1947	72
1948	53

The main causes of infant deaths during the past two years are shown below:—

	No. in 1947	No. in 1948
(a) Pneumonia (all forms)	40	32
Bronchitis	1	1
Whooping Cough	2	3
Measles	—	—
Diarrhoea and enteritis	79	32
(b) Premature birth	53	32
(c) All other causes	67	59
	—	—
	242	159
	—	—

Deaths from Tuberculosis.—Tuberculosis was responsible for 8.3 per cent. of all deaths recorded in the Borough in 1948. The deaths from the disease were as follows:—

Deaths from tuberculosis of the lungs	123
Deaths from other forms of tuberculosis	20
	—
	143
	—

This gives a tuberculosis death-rate of 1.02 per 1,000 of the population.

Of the 123 deaths from respiratory tuberculosis during 1948, 109 occurred in persons between 15 and 65 years old—that is, of a wage-earning age.

Deaths from certain epidemic diseases.—The seven “ principal epidemic diseases ” caused 40 deaths, as follows:—

Diarrhoea and enteritis (under 2 years)	33
Whooping Cough	3
Measles	—
Scarlet Fever	—
Diphtheria (including membranous croup).....	4
Fever (enteric, typhus, and simple continued)...	—
Smallpox	—

This corresponds to a death-rate from all these diseases of 0.28 per 1,000 of the population.

Deaths from other notifiable infectious diseases. — Pneumonia caused, in its various forms, 72 deaths; encephalitis—; poliomyelitis—and cerebrospinal fever 1.

WATER SUPPLY, FOOD AND DRUGS, AND DISEASES OF ANIMALS

WATER SUPPLY

The water supply, as in previous years, is of a very good standard of purity and is ample in supply.

Bacteriological examinations are made at frequent intervals both at the source and in the town.

Chemical analyses are also made quarterly and the reports show a high degree of purity.

MILK SAMPLING.

148 samples of milk were submitted for bacteriological examination during the year. 91 of these gave satisfactory results and 57 were unsatisfactory. Unsatisfactory results were followed up and improvement effected.

11 samples of milk were examined for the presence of *B. tuberculosis*. All gave negative results.

ICE CREAM

At the end of the year 49 premises were registered for the manufacture and sale of ice cream and 129 were registered for the sale only of ice cream. This branch of the work has become more and more important in recent years and it is impossible to make as many visits to registered premises or to take as many samples from all sources as one would wish. The premises of wholesale manufacturers are visited frequently and many samples of their productions are taken.

There is no simple bacteriological test which can be made as a routine on all samples of ice cream to detect the presence of harmful bacteria. Reliance has, therefore, to be placed on a test known as the methylene blue test which is stated to indicate the total bacterial activity in the sample. The results are shown as one of four grades. Many samples should be obtained at fairly frequent intervals to ensure that any manufacturer's product maintains a high degree of bacterial purity. No great concern should be felt if an occasional sample falls to Grades 3 or 4 but it is expected that most samples (say 80 per cent.) from a particular manufacturer should be placed in Grades 1 or 2.

176 samples were submitted for examination. Of these 28 were samples of ingredients or lolly ices, which cannot be graded. The remainder gave results as follows:—

60 samples were placed in Grade 1.

34 samples were placed in Grade 2.

21 samples were placed in Grade 3.

33 samples were placed in Grade 4.

It must be pointed out that after a report which is regarded as unsatisfactory is received, a whole series of samples, taken at all stages of manufacture, may be obtained from the same producer in order to

find out at what stage contamination is taking place. This has the effect of increasing the numbers of samples placed in Grades 3 and 4.

The quality of ice cream sold in the Borough is therefore, better than the above table would appear to indicate.

OTHER SAMPLING.

320 samples of food taken under the Food and Drugs Act, 1938, were submitted for analysis by the Public Analyst. Of these, 226 were formal samples and 94 were informal. 192 were samples of milk.

26 formal and 8 informal samples were reported to be adulterated and legal proceedings were instituted in respect of 5 cases.

Meat Inspection.—During the year 115,321 animals were slaughtered in the area, an increase of 9,200 over the preceding year. All animals slaughtered were subjected to ante- and post-mortem examinations. The following table shows the details of the animals slaughtered, together with the condemnations:—

	Cattle	Calves	Sheep	Goats	Pigs
Number killed	81,884	6,223	24,790	2,321	103
Number inspected... ..	81,884	6,223	24,790	2,321	103
<i>All diseases except Tuberculosis</i>					
Whole carcasses condemned	142	88	41	47	—
Carcases of which some part or organ was condemned	32,400	22	1,976	320	15
Percentage of the number inspected affected with disease other than tuberculosis	39.6	1.7	8.0	11.4	14.5
<i>Tuberculosis only</i>					
Whole carcasses condemned	348	25	—	—	3
Carcases of which some part or organ was condemned	5,325	—	—	—	4
Percentage of the number inspected affected with tuberculosis	6.9	0.4	—	—	6.8

Note: (a) The carcasses of 48 animals which died in the lairages or in transit were also inspected.

(b) The weight of meat and offal from all sources which was condemned as unfit for human consumption totalled 577 tons 12 cwts.

Public Health (Meat) Regulations, 1924.—The slaughtering of all food animals is carried out at the Public Abattoir (Tranmere) and the Woodside Lairages; the meat is supplied not only to butchers within the Borough, but to those in certain neighbouring districts and London. All the animals are the property of the Minister of Food. They are slaughtered under the direction of a Slaughterhouse Manager at each centre, and are allocated by Area Meat Agents, the Managers and Agents being employed by the Minister of Food.

Inspection of butchers' shops and stores, vehicles used for the conveyance of meat, and railway trucks, is carried out as part of the routine work of the inspectorial staff, 1,800 such inspections being carried out during the year.

Inspection of Foodstuffs in shops, etc.—During the year 2,100 inspections were made of market stalls, stores, shops and warehouses where food is stored, prepared or exposed for sale.

Foodstuffs amounting to 8,109 tins of meat, fish, milk, etc., 25 lbs. sausages, 2,907 lbs. meat, 121 lbs. pigs feet, 20 lbs. liver, 118 lbs. rabbits, 216 lbs. bacon, 34 lbs. cheese, 1,950 lbs. apples, 1,860 lbs. oranges, 92 lbs. sweets, 55 lbs. prunes and 282 lbs tomatoes were found to be unfit for human consumption and were condemned.

Visits were paid to cafes and restaurants, the hygienic and cleanliness aspects being serious considerations. In view of the importance of endeavouring to keep bacterial food poisoning and bacillary dysentery in check it is anticipated that the inspectorial staff will be augmented during the coming year for the purpose of supervising this class of food establishment.

Slaughter of Animals Acts, 1933.—25 renewals of licences to slaughter animals were granted to butchers employed in Birkenhead. 5 licences were granted to satisfactory persons applying for the first time.

Diseases of Animals Acts.—Work under the above Acts has involved:—

(1) Under the Tuberculosis Order 1939 the removal of 5 dairy cows from herds in the Borough showing clinical signs of tuberculosis, or as the result of individual milk samples.

(2) The supervision of the disinfection of premises housing the above-mentioned tuberculous animals.

(3) The routine inspection of 22 dairy herds within the Borough.

(4) The examination of store pigs kept within the Borough, to ensure that the animals are free from Swine Fever.

(5) Importation of Dogs and Cats. Visits to ships in this area of the Port regarding landing, quarantining or destroying animals. Visits to seven ships were necessary and appropriate advice given.

(6) Visits to Taylor Street Cattle Sidings to supervise animals passing through, to see that cruelty is avoided, to prevent, if possible, sick animals from travelling further, and to take precautions against suspected Anthrax.

Food Poisoning.—It is gratifying to report that no cases of food poisoning were notified during the year under Section 17 of the Food and Drugs Act, 1938.

VENEREAL DISEASES CLINIC

Under the National Health Service Act 1946 the control of the Venereal Diseases Clinic passed from the Local Authority to the Regional Hospital Board on the 5th July, 1948.

Dr. Stanley Ball, who was Senior Assistant Medical Officer up to that date, makes the following report:—

It is already obvious from the number of cases who have attended the clinic during the months under consideration, i.e., up to and including 4th July, that the total new cases for this year will show a diminution on the 1947 figures. Whilst this in itself is a satisfactory trend, an analysis of the figures reveals that the males to females—new cases—are in the unsatisfactory ratio of something over 3 to 1.

Perusal of case records reveals the obvious fact that the majority of male cases of Venereal Disease acquire the infection after excessive indulgence in alcohol, and can rarely identify the consort. This has the unfortunate result that the reservoirs of active infection continue to flourish undetected, and infection continues to be propagated. To deal with such cases, many Treatment Centres now have the services of a Social Worker and Contact Tracer, whose duty it is to follow up the scraps of information which can be obtained from the patient in the hope of finding the consort.

Work is in progress on the conversion of an isolation block at the Infectious Diseases Hospital into an Out-patients Department for the V.D. Clinic. Great satisfaction is felt that at least there will be adequate accommodation both for carrying on the work and for each sex, but there are definite misgivings about the actual location. One has the impression that patients will feel they are automatically labelled with the public stigma of Venereal Disease if they are observed walking through the hospital gates, for most people are well aware of the fact that visitors are not allowed in an Infectious Diseases Hospital.

Details of attendances of new cases at the Clinic during the years 1940/4th July, 1948, are as follows:—

(a) Total attendances:

Year	Males	Females	Total
1940	3,688	1,745	5,433
1941	3,183	1,975	5,159
1942	4,052	3,603	7,655
1943	4,486	5,716	10,202
1944	4,161	5,045	9,206
1945	5,131	5,064	10,195
1946	8,012	7,260	15,272
1947	6,906	6,074	12,980
Up to 4/7/1948	3,489	2,345	6,834

(b) New Cases

Year	Syphilis		Soft Chancre		Gonorrhoea		Non-Venereal		Totals		Total New Cases
	Males	Fe-males	Males	Fe-males	Males	Fe-males	Males	Fe-males	Males	Fe-males	
1940	46	17	7	—	110	14	94	24	257	55	312
1941	49	23	11	—	138	13	93	25	291	61	352
1942	47	48	3	—	110	52	99	35	259	135	394
1943	59	43	3	—	120	102	214	111	396	256	652
1944	60	39	3	—	73	56	188	117	324	212	536
1945	48	31	2	1	109	94	248	107	407	233	640
1946	69	43	3	—	219	111	330	81	621	235	856
1947	43	30	—	—	156	67	302	84	501	181	682
1948	27	13	—	—	54	21	134	26	215	60	275

These figures do not include new patients seen who have been previously treated elsewhere. These figures for the period under review are:—

Males 26 Females 4 Total 30

making the total number of patients new to this clinic 305.

OTHER INFECTIOUS DISEASES

The main feature of the past year has been the increased incidence of Measles. The notifications of this disease reached the highest peak recorded in Birkenhead since notification was made compulsory in 1939, and numbered 430 in February.

Whilst the mortality from this disease is not high, the complications of Measles, especially the pulmonary ones, often lead to chronic ill-health in later life.

It is important, therefore, to "follow up" children who have had Measles associated with pneumonia or bronchitis.

Whooping Cough also reached its highest level, 914 cases being notified during the year.

Of the 214 notified cases of Diphtheria 105 only were confirmed after investigation in hospital.

11 cases of Infantile Paralysis were notified, but only 2 of these were finally confirmed.

Scarlet Fever, as has been pointed out by the Principal Medical Officer of the Ministry of Health, "is due to several types of haemolytic streptococci, some of which have the power to produce a rash in some people, but that many haemolytic streptococci have not this additional capacity, although only in this respect do they differ from the types that produce Scarlet Fever. There is, therefore, little justification for differentiating between Scarlet Fever and other kinds of haemolytic streptococcal sore throat. When possible, patients suffering from streptococcal sore throats, whether of Scarlet Fever type or not, are best nursed at home, rather than in a multiple bed ward of an isolation hospital with its multiplicity of types each capable of causing cross infection."

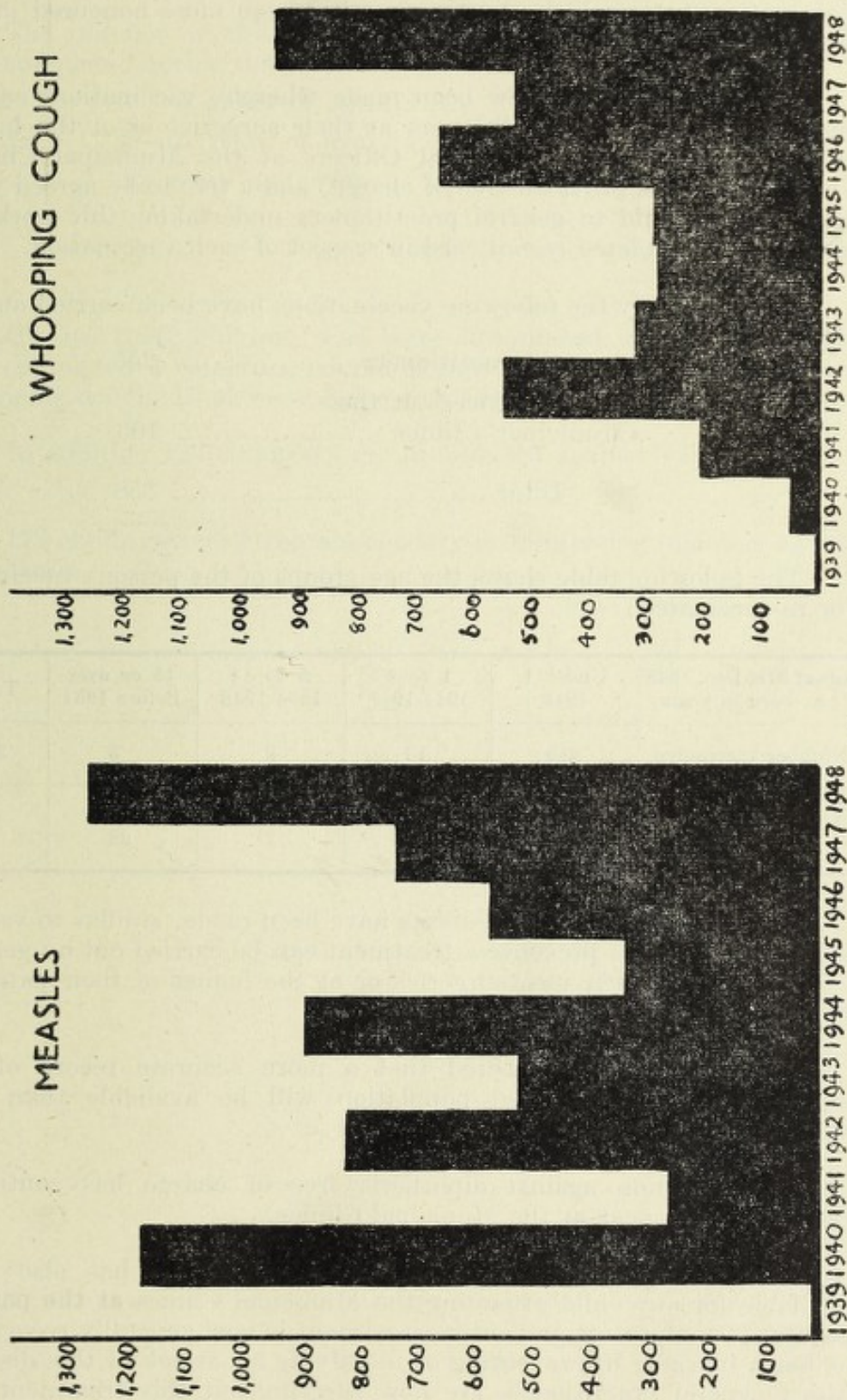
The following tables show the number of infectious diseases (other than tuberculosis) notified during 1948 and the final numbers according to Sex and Age after corrections subsequently made either by the Notifying Medical Practitioners or by the Resident Medical Officer of the Infectious Diseases Hospital.

	Scarlet Fever		Diphtheria		Acute Poliomyelitis		*Measles		*Whooping Cough	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Numbers originally notified...	112	144	108	106	8	3	664	612	463	484
Final numbers after correction										
0 —	4	2	—	—	—	—	47	49	49	77
1 —	18	11	6	4	1	—	192	166	165	158
3 —	25	31	3	6	—	—	211	183	148	145
5 —	30	49	13	19	1	—	199	198	98	94
10 —	12	21 *	12	14	—	—	9	4	—	6
15 —	8	12	1	11	—	—	2	3	1	1
25 and over	5	6	10	6	—	—	1	2	1	1
Totals	102	132	45	60	2	—	661	605	462	482

* Made notifiable under the Measles and Whooping Cough Regulations, dated 23rd October, 1939.

	Acute Pneumonia		Dysentery		Enteric or Typhoid Fever		Paratyphoid Fevers		Erysipelas		Cerebro-spinal Fever		Puerperal Pyrexia		Ophthalmia Neonatorum	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number originally notified	169	155	1	6	—	1	1	3	16	17	5	6	—	15	2	2
Final Numbers after correction	71	73	—	4	—	—	—	—	—	—	1	1	—	—	2	2
5 —	33	36	—	—	—	—	—	2	—	1	1	1	—	—	—	—
15 —	32	15	1	—	—	1	—	—	3	5	—	—	—	15	—	—
45 —	12	11	—	2	—	—	—	—	8	9	—	—	—	—	—	—
65 and over	13	5	—	—	—	—	—	—	5	2	—	—	—	—	—	—
Totals	161	140	1	6	—	1	—	2	16	17	2	2	—	15	2	2

INCIDENCE OF * MEASLES AND * WHOOPING COUGH 1939 1948



VACCINATION AND IMMUNISATION

Vaccination.—The National Health Service Act 1946 repeals the Vaccination Acts—which of late years has been more honoured in the breach than in the observance.

Arrangements have now been made whereby vaccinations can be performed by general practitioners at their surgeries or at the homes of their patients, or by Medical Officers at the Municipal Clinics. Vaccine lymph is provided free of charge, and a fee, to be agreed upon later, will be paid to general practitioners undertaking this work, on receipt of a completed record card in respect of each vaccination.

Since 5th July the following vaccinations have been carried out:—

By general practitioners	255
By Medical Officers at the Municipal Clinics	103
Total	358

The following table shows the age groups of the persons vaccinated (or re-vaccinated):—

Age at 31st Dec., 1948 <i>i.e.</i> , born in years	Under 1 1948	1 to 4 1944-1947	5 to 14 1934-1943	15 or over Before 1934	Total
Number vaccinated	310	13	2	3	328
Number re-vaccinated	—	1	1	28	30

Immunisation.—Arrangements have been made, similar to vaccination, whereby this preventive treatment can be carried out by general practitioners in their own surgeries or at the homes of their patients. Prophylactic material is provided free.

It is confidently expected that a more accurate record of the immunised and vaccinated population will be available than was obtained in the past.

Immunisation against diphtheria free of charge has continued throughout the year at the Municipal Clinics.

Preventive inoculation against whooping cough has also been available for any child attending the Municipal Clinics **at the parents request**. This form of preventive treatment is now generally recognised as being of value in preventing or modifying an attack of this disease. Many general practitioners are now carrying out this treatment and have, in some cases, been doing so for some time.

The Principal Medical Officer of the Ministry of Health in an Annual Report states " Whooping Cough is most fatal to infants under

the age of one year, and preventive measures whether by immunisation or by attempts to prevent contact with the disease, should thus be directed primarily to the pre-school child."

The number of children whose immunisation against diphtheria was completed during the year was 1,842, made up as follows:—

1— 5 years of age	1,617
5—15 years of age	211
15 years and over	14
	<hr/>
Total	1,842
	<hr/>

Of the 1,842 children who were immunised against diphtheria, 356 completed a combined course of injections against diphtheria and whooping cough, 15 of these being carried out by general practitioners.

In addition 123 children were immunised against whooping cough only.

177 children were given a secondary or reinforcing injection against diphtheria.

The following tabulated statement shows the number of children immunised each year since 1933:—

Age in years on 31st December of the corresponding year.	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	Total immunised on 31st December 1948
Under 1 year	—	—	3	1	1	13	3	3	1	—	18	9	—	5	30	71	Aged under 5 years 4,364
1 year	2	1	62	16	19	31	12	15	106	419	551	548	714	588	712	1009	
2 years	2	8	29	15	24	73	45	31	201	501	465	347	355	355	241	353	
3 years	7	7	42	12	30	78	32	25	211	414	392	65	139	125	93	113	
4 years	2	13	62	19	28	77	28	19	184	379	382	57	47	75	71	71	
5 years	4	12	201	24	43	125	43	23	244	350	246	60	37	51	55	56	
6 years	6	11	479	29	48	174	31	19	450	264	285	48	27	43	33	31	
7 years	2	9	580	18	32	190	45	27	478	219	320	43	17	26	20	28	
8 years	8	9	591	13	19	200	32	27	511	163	248	23	10	20	26	26	
9 years	1	12	668	10	23	120	23	18	511	129	286	21	12	20	17	11	
10 years	—	11	713	7	5	125	20	17	515	121	240	16	6	27	14	20	
11 years	—	1	666	7	10	96	11	10	655	112	292	16	11	17	8	13	
12 years	—	6	557	4	9	111	11	10	385	113	298	7	1	10	5	14	
13 years	—	3	532	4	6	62	9	7	336	103	198	15	1	5	7	6	
14 years	—	1	306	11	4	44	3	5	250	36	208	19	8	4	7	6	
15 years and over	9	6	90	14	9	69	25	23	132	27	33	24	22	8	15	14	
Total each year.	43	110	5581	204	310	1588	973	279	5170	8350	4462	1818	1407	1379	1354	1842	Aged 15 years and over 13,118
																	Grand Total 1933-1948 28,770

MUNICIPAL LABORATORY

This Department passed to the control of the Medical Research Council on 1st April, 1948; the source, nature and number of specimens examined up to the time of transfer, are set out below:—

Specimens from Birkenhead sources examined (up to 31st March):—

	I.D. Hospital	B'head Mun. Hospital	Other Sections of Dept	Medical Practi- tioners	Total
Swabs for Diphtheria—Pos.	78	—	24	21	123
Neg.	531	4	191	170	896
Sputum for Tubercle—Pos.	—	—	58	6	64
Neg.	4	—	129	41	174
Blood for Widal Pos.	—	—	—	—	—
Neg.	1	3	—	—	4
Blood for Wassermann	1	65	681	116	863
Smears for Gonococci	—	—	233	7	240
Other Examinations	110	70	91	241	512
	725	142	1407	602	2876

Specimens from other Authorities:—

Clatterbridge (County) General Hospital	303
Clatterbridge Isolation Hospital	244
Wallasey (Mill Lane Hospital)	143
Borough of Bebington	93
Wirral Urban District Council	49
	832
Total from all sources	3,708

AMBULANCE SERVICE

The Local Health Authority has now the duty " of making provision for ensuring that Ambulances and other means of transport are available for the conveyance of persons suffering from illness or mental deficiency or expectant or nursing mothers from places in their area to places inside or outside their area."

A suggestion from the Ministry of Health that Local Health Authorities should consider the inclusion of the Ambulance Services in the Fire Brigade was adopted in Birkenhead and this policy has proved most successful.

Whilst it was expected that there would be an increased demand for ambulance transport, the actual increase has exceeded all expectations. This increase has been universal throughout the country and in some authorities the calls have been quadrupled or even quintupled, as compared with the previous year. The total number of calls in Birkenhead during 1947 was 4,935, whereas from 5th July to 31st December, 1948, the calls totalled 7,192.

I am indebted to the Chief Fire Officer for permission to reprint the following statistics from his Annual Report which relate to the period from 5th July to 31st December, 1948:—

Type.	No. of Calls.	No. of Patients.
Emergency		
Accidents—Home	123	124
Work	307	322
Street	288	295
Removals		
Maternity	329	329
Illness	418	418
General Illness	1,891	2,107
Infectious Diseases	187	200
Out-patients	3,552	6,135
Not required.....	97	—
Total	7,192	9,930

No report on the Ambulance Services would be complete unless acknowledgment was made of the services rendered over the last six years by the members of the Volunteer Car Pool. This Pool was formed in 1942 under the auspices of the Women's Voluntary Service, and the members deserve the thanks of the community for their ever-willing and unstinted help in the transport of the sick.

Mention must also be made of the services given by members of the British Red Cross Society, who give up Sunday mornings to act as stretcher bearers in the conveyance of convalescent patients from the Municipal Hospital to Arrowe Annexe.

BIRKENHEAD MUNICIPAL (GENERAL) HOSPITAL

Birkenhead Municipal (General) Hospital.

Under the National Health Service Act, 1946, the Birkenhead Municipal (General) Hospital and the Arrowe Municipal Hospital Annexe passed from the control of the Health Committee to that of the Regional Hospital Board.

Dr. R. A. Grant, Medical Superintendent, has kindly supplied the following statistics regarding the admissions, births, discharges and deaths up to the 4th July, 1948.

	Men	Women	Children	Total
In Hospital on 31st Dec., 1947 ...	129	143	84	356

Admissions and Births

From own homes and other hospitals	612	1284	575	2471
Service cases admitted	45	4	—	49
From Birkenhead Institution	12	9	27	48
Births in Hospital	—	—	391	391
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total admissions and births	669	1297	993	2959

Discharges and Deaths

To own homes or other Hospitals	485	1200	905	2590
Service cases discharged	49	4	—	53
To Birkenhead Institution	20	18	24	62
Deaths in Hospital	137	83	61	281
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total discharges and deaths	691	1305	990	2986

Civilian cases in Hospital on 4th July, 1948	100	135	87	322
--	-----	-----	----	-----

Service cases in Hospital on 4th July, 1948	7	—	—	7
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

Total cases remaining in hospital on 4th July, 1948	107	135	87	329
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

A summary of the attendances in the Continuation Clinic and the Out-Patients Department:—

	New Cases.	Attendances.
Ear, nose and throat ...	186	365
Ophthalmic ...	112	339
Orthopædic ...	65	201
Dental ...	36	84
Diabetics ...	34	561
Physiotherapy ...	261	7141
Dressings ...	77	1048
Post-Natal ...	123	287
Gynæcological ...	84	163
Skin Clinic ...	27	134

Total attendances at Continuation

Clinic:

Medical	...	...	...	217	458
Surgical	...	...	...	55	120
				<hr/> 272	<hr/> 578

The total number of surgical operations carried out for the period 1st January to 4th July, 1948:—

Operations carried out under:

General Anæsthetics	...	...	292
Local do.	...	...	34
Spinal do.	...	...	18
Intravenous do.	...	...	358
No do.	...	...	58
			<hr/> 760

Operations for tonsils and adenoids:—

School Health Service	...	...	89
Others	...	...	1
Eye Operations	...	...	13
Nasal do.	...	...	—
Dental do.	...	...	—

Below is a summary of the Maternity cases dealt with at the Hospital during the period ended 4th July, 1948:—

Total No. of women dealt with	Married	Single	Total No. of children dealt with	Live births	Still births
450	428	22	400	393	19

X-RAY DEPARTMENT

A summary of the work carried out at the X-ray Department from 1st January to 4th July is set out below:—

In-patients	Cases	Radiographs taken
Stomach	128	823
Kidney	84	297
Gall Bladder	55	120
Chest	796	982
General	320	864
Chest T. B.	88	97

In-patients screened, 153.

Out-patients	Cases	Radiographs taken
Stomach	4	29
Kidney	—	—
Chest	126	152
General	168	440
Chest T. B.	923	1020

Out-patients screened, 582.

Total number of Radiographs taken	4824
Total number of patients screened	735
Total number of cases	2692
Electrocardiographs taken	50

ARROWE ANNEXE STATISTICS

1st January to 4th July, 1948.

	Men.	Women.	Children.	Total.
In Hospital on 31st Dec., 1947	7	8	5	20

Admissions

From Birkenhead Municipal Hospital ...	146	201	85	432
--	-----	-----	----	-----

Discharges

To own Homes	117	185	66	368
To Birkenhead Municipal Hospital ...	22	11	11	44
To I.D. Hospital	—	—	—	—
To Birkenhead Orthopædic Hospital ...	—	—	—	—
To Institution	3	1	—	4
To Manor Grange	—	—	—	—
To Leasowe	—	—	—	—
To Market Drayton	—	—	—	—
Absconded	—	—	—	—
Died in Hospital	—	—	—	—

	142	197	77	416
Total cases in Hospital on 4th July	11	12	13	36

HOUSING & ENVIRONMENTAL HYGIENE

The unsatisfactory, and in some cases, deplorable condition of the older houses in the Borough still remains the greatest problem to be dealt with. In more normal times these old worn-out houses would have been included in Clearance Areas, or dealt with by individual demolition orders under the Housing Act in which case the owner of the house may choose whether to demolish or re-condition his property. Both methods involve re-housing the inhabitants, and, as this is impracticable other less satisfactory ways have had to be found. Generally, owners are asked to carry out repairs so that the houses are kept at least in a safe and weatherproof condition. These repairs when carried out, do not in many cases give any degree of satisfaction either to the house owner or occupier and often the cost of patching roofs which are beyond repair, wall plaster which is completely perished and floors which are worn thin or broken, is out of all proportion to the value of the property.

Inspection of dwelling houses—Vacancies and changes in the staff of Sanitary Inspectors had their effect on this work. During the year two district inspectors left the service and one transferred to other duties. To fill these and existing vacancies there were five new appointments. These changes occurred in a normal staff of eight district inspectors.

3,283 complaints were made at the Chief Sanitary Inspector's office, and to this figure must be added almost as many complaints received by inspectors on their district.

The total number of inspections made for housing or other defects under the Public Health or Housing Acts was 12,700. In addition there were 33,965 re-inspections. Some 20,062 defects were remedied during the year as a result of the service of notices.

A new policy of instituting legal proceedings against owners for failing to comply with the requirements of statutory notices was started at the end of last year and continued during the present year when 87 cases were taken before the Magistrates. In many cases the necessary work was completed between the time of laying the information and the hearing of the case. The results varied considerably as follows:—

(Where work was completed before hearing of case)

In 3 cases no costs were awarded. No penalty.

In 31 cases cost of summons was awarded.

In 28 cases cost of summons plus advocates fee was awarded.

In 2 cases a fine was imposed.

(Where work had not been completed before hearing of case):

In 8 cases Nuisance Order. Court costs awarded.

In 3 cases Nuisance Order. Court costs and advocates fee awarded.

In 7 cases Nuisance Order. Fine imposed.

In 4 cases Nuisance Order. Fine imposed. Costs awarded

In 1 case Local Authority were authorised to carry out the work.

The result of more labour and building materials becoming available during the year and the fact that owners would be summoned to appear before the magistrates if notices were not complied with, was that the time elapsing between the service of a notice and the completion of the work was considerably reduced. The number of outstanding notices on December 31st, 1948 was 970, compared with 2,373 at the beginning of the year.

Housing Act, 1936.—Six houses were represented as being unfit for human habitation and not capable at a reasonable expense of being rendered so fit. In one case the owner's undertaking to close the premises as a dwelling house and convert it into a workshop was accepted. The other five cases were deferred owing to lack of alternative housing accommodation.

Extermination of Rats, Mice and other vermin.—Two treatments of the sewers in the Borough were completed during the year. Pre-bait and poison baits were laid in 8882 manholes for the purpose. The methods used were those recommended by the Ministry of Agriculture and Fisheries. 283 infestations of rats in surface premises were dealt with by the rodent operator and in addition 417 visits were made by district sanitary inspectors.

76 rooms in 29 separate premises were treated for infestation of bed bugs, cockroaches, etc. For this purpose occupiers of infested premises are required to pay for the cost of the work undertaken. In most cases the charge is very small.

FACTORIES ACT, 1937

In accordance with Section 128 of the Factories Act, 1937, I set out below a Table showing the inspections made, and the defects found, under Part I of the Act.

Under Part VIII of the Act, 4 outworkers engaged in the making of Wearing Apparel and 1 in Textile Weaving were included in the August list required by Section 110 (1) (c); there were no prosecutions under Sections 110 or 111.

PART I OF THE ACT**1.—INSPECTIONS** for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	109	51	17	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities ...	498	110	33	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority † (excluding out-workers' premises) ...	23	21	5	—
TOTAL ...	630	182	55	—

2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ...	5	6	—	1	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6)	5	2	—	—	—
Sanitary Conveniences (S.7) ...					
(a) insufficient ...	6	6	—	7	—
(b) Unsuitable or defective...	18	18	—	20	—
(c) Not separate for sexes ...	4	6	—	2	—
Other offences against the Act (not including offences relating to Outwork) ...	12	12	—	—	—
TOTAL ...	50	50	—	30	—

† i.e. Electrical Stations (Section 103 (1)), Institutions (Section 104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

MATERNITY & CHILD WELFARE

This service was further extended by the opening of a new Clinic at the Church Hall, Upton, on 5th October.

This clinic, which is held on Tuesday afternoons, obviates the necessity of Upton residents travelling to the North Health Clinic, Birkenhead, and is now being well attended by mothers in that district.

Owing to the extension at the Dental Clinic, Mount Grove, necessitated by the appointment of an additional Dental Officer, the accommodation there for a Maternity and Child Welfare Clinic became no longer available. This Clinic, which was held on Friday afternoons, was transferred to the former Skin Clinic, Balls Road, on 9th July.

Under the new Act, the Local Authority is required to provide dental treatment for Expectant and Nursing Mothers and for children under five years of age. Owing to the shortage of dentists, it was found impossible for the time being to formulate a scheme to operate within the Local Authority's jurisdiction, but interim arrangements were made, the success of which have exceeded expectations.

These arrangements were made possible only by the willing co-operation of local Dental Surgeons, and I wish to acknowledge my indebtedness to Mr. Roland Lees, Hon. Secretary, and the members of the Birkenhead Dental Committee for their ready response and help in enabling the Local Authority to comply with the requirements of the Act.

Briefly, the arrangements were that every expectant mother or nursing mother attending an ante- or post-natal clinic, was given a form by the Medical Officer to take to a dental surgeon in practice near her home. On presenting this form, the dentist in question arranged for priority treatment to be given to the patient.

There has been a good response on the part of the patients, and the Medical Officers of the Maternity and Child Welfare Clinics have reported a great improvement in the condition of the teeth and dental hygiene of the mothers. It was further noticeable during the last two months of the year that several expectant mothers had, prior to presenting themselves at the Clinics, already availed themselves of the facilities for dental treatment provided under the new Act.

It has been noticed that the majority of mothers are not breast feeding their babies, and that National Dried Milk is increasing in favour as a food, probably on account of its inexpensiveness.

The attendance of under 12 months remains satisfactory, but after this age tends to decline.

It has also been observed that the number of adopted babies attending the clinics has increased.

It is gratifying to note that mothers are now beginning to realise the importance of Immunisation against Diphtheria, and the response to the facilities offered at the clinics is good. Requests for combined diphtheria and whooping cough immunisation are increasing.

Ante-natal Clinics

The attendance at these clinics has declined during the year. This is due to two factors—one, the fall in the birthrate after the high levels of the last two years, and second, the fact that more mothers are being delivered in hospital than at home.

Ten years ago the ratio of hospital to home deliveries was 60: 40, but nowadays the exact converse obtains. It is possible that overcrowding has a great influence on the request for maternity beds.

All expectant mothers attending the clinics have blood tests taken for Rh factor and Wasserman reaction, and the hospital midwife concerned is notified of the result before the confinement takes place. Thus, if it is found necessary for a patient to have a blood transfusion the type of blood suitable for her is available without delay.

Midwifery

During the last six months of the year, i.e. subsequent to the implementation of the new Health Act, it has become noticeable that more expectant mothers are nowadays engaging doctors for their confinements.

Domestic Help Scheme

The demand for Domestic Help increased during the year to such an extent that it was necessary to increase the full-time workers from 2 to 5 and the part-time from 3 to 6. The number of households supplied with help was 158, and the number of hours worked 9,965.

These households included all types of cases—confinements, post-confinements, post operative cases, sickness and old age.

Confinement cases are booked in advance, but in sickness or emergency help is arranged as soon as possible in accordance with the availability of the workers.

The National Health Service Act, 1946, strengthened the powers already possessed by the Local Authority, and during the last six months of the year the amount of help supplied was almost double that of the first six months.

The Service, unlike most of the other National Health Services, is not free to users, but, in order to avoid undue hardship to those who cannot afford to pay full rates, the National Scale of Charges, as suggested by the Association of Municipal Corporations and approved by the Ministry of Health, has been adopted in Birkenhead.

Gas Air Analgesia

This form of analgesia has been available in Birkenhead for women in labour since 1943.

There are now four Minnitt apparatus in the Health Department. One of these is kept at the Central Fire Station, whence it can be sent by ambulance to any part of the Borough in a very short time. Eight of the Municipal and two of the Private midwives are qualified to administer this form of analgesia.

The majority of primiparae now elect to be delivered in a Hospital or Maternity Home in preference to their own homes, and as multi-

parae rarely ask for it, the demand for Gas Air analgesia is not great.

During the year analgesia was administered by midwives in domiciliary practice in 6 cases.

Day Nurseries

The three Day Nurseries have again been attended to their full capacity during the year; two of the nurseries accommodate 45 children each and the third, 38 children.

The Matrons and staff are to be commended for the high standard of health and hygiene in the nurseries, and for their promptness in dealing with any illness which arises and so preventing its spread.

The children are happy and contented and show great confidence in their nurses. They are medically examined at frequent intervals to eliminate any physical defects. Immunisation, using the combined Diphtheria and Whooping Cough prophylactic, has been performed during this year on all the children under 2 years of age.

Student Nurses continue to be trained for the National Nursery Examination Board Certificate. During 1948 the Birkenhead Education Department took over the responsibility of organising the " Vocational " and " Further Education " lectures for these students.

The following table shows the attendances made during the year at each nursery.

Name of Nursery	Capacity		No. of children on register during year		No. of attendances during year		Average attendances during year	
	0-2 Yrs.	2-5 Yrs.	0-2 Yrs.	2-5 Yrs.	0-2 Yrs.	2-5 Yrs.	0-2 Yrs.	2-5 Yrs.
Cavendish Road...	15	30	46	65	4413	8884	13	30
Old Chester Road...	15	30	64	85	3381	7926	13	29
Hollybank Road...	16	22	54	61	3629	7084	13	26

The Care of Premature Infants

Close contact has been maintained by the Health visitors on all such infants throughout the year.

The total number of premature babies notified during the year who were born:—

(a) at home	23
(b) in hospital or nursing home	66

Home Visits

In connection with the Maternity and Child Welfare Scheme, visits were paid by the Health Visitors as follows:—

To children under 1 year	8,713
To children between 1 and 5 years...	12,737
To expectant mothers	206
To mothers and children (miscellaneous matters)	5,213

Infant Welfare Clinics

At the infant welfare clinics 1,610 first visits and 17,636 revisits were made by children under 5 years of age. Of these, 1,513 (who made 6,173 revisits) were examined by an assistant medical officer.

Of the 3,273 births notified approximately 1 in 2 infants attended an infant welfare clinic.

At the toddlers' clinics 175 first visits and 2,337 revisits were made.

Antenatal Clinics

Antenatal clinic sessions were held on 156 occasions. The number of patients dealt with was 1,045, the total number of attendances being 3,880.

Ophthalmia Neonatorum

3 cases of Ophthalmia Neonatorum were notified during the year. Vision was unimpaired.

Maternal Mortality

The Registrar-General's annual statement of causes of death includes 1 death connected with pregnancy and childbirth.

This gives a maternal mortality rate of .101 per 1,000 births (living and still), as compared with a rate of 1.02 for the whole country.

The causes of the deaths were as follows:—

Puerperal sepsis	—
Other maternal causes	4

Midwives

79 midwives, including midwives in hospitals, gave notice of their intention to practice in the Borough.

Municipal Midwives

The following is a summary of the work of the 12 whole-time Municipal midwives on the staff of the department:—

Number of births	812
Number of visits to patients	17,204

Birkenhead Maternity Hospital Midwife

Under the terms of the agreement with the Birkenhead Maternity Hospital for domiciliary midwifery, the Hospital midwife carried out work as follows—

Number of births	174
Number of visits to patients	3,038

MENTAL HEALTH

Prior to the 5th July, the date the National Health Service Act, 1946, came into operation, the duties of the Local Authority under the Lunacy and Mental Treatment Acts were discharged by the Public Assistance Committee, and under the Mental Deficiency Acts by the Mental Deficiency Acts Committee of the Council.

The Local Authority decided that, as from the 5th July, their duties under the Lunacy, Mental Treatment and Mental Deficiency Acts should be under the control of the Health Committee. The Health Committee appointed a Mental Health Services Sub-Committee to deal with detailed administration of the Mental Health Services of the Council. In order to provide an efficient 24 hours per day service, three Duly Authorised Officers were appointed to my staff and commenced their duties on 5th July.

1. Lunacy and Mental Treatment.

The Local Health Authority's duties, as set out in Ministry of Health Circular 100/47, are:—

1. To take initial proceedings to provide care and treatment for persons suffering from mental illness (under Sections 14, 15, 16 and 20 of the Lunacy Act, 1890, and Sections 5 (2) and 17 of the Mental Treatment Act, 1930 as amended by the National Health Service Act 1946).
2. Ascertaining that persons in the area are mentally defective; providing suitable supervision and taking steps to place defectives in institutions or under Guardianship; to secure training and occupation for those not in institutions (Mental Deficiency Acts, 1913-1938, Section 30 (a), (b), (c.c.) and (d)).
3. The Local Health Authority has the power (and to such extent as the Minister of Health directs, the duty) to make arrangements for care and after-care of persons suffering from mental illness and defectiveness (N.H.S.A. Section 28). So far, the only compulsory duties under this section relate to Tuberculous patients.

The following is a summary of action taken under the Lunacy and Mental Treatment Acts since 5th July, 1948:—

Admissions to Hospitals under:—

		M.	F.	T.
(a) Lunacy Act, 1890				
Section 20 (3 Day Detention Orders)	.....	31	24	55
„ 21 (14 Day Magistrate's Orders)	.....	10	16	26
„ 16 (Certification for Detention in a Mental Hospital)	.....	19	44	63
„ 5 (Private Patients)	.....	—	3	3
		60	87	147
(b) Mental Treatment Act, 1930				
Section 1 (Voluntary Patients)	.....	4	5	9
„ 5 (Temporary Patients)	.....	—	1	1
		4	6	10

The Authorised Officers have authority and are available to give assistance in dealing with admission of patients to private wards of hospitals and privately run Mental Homes. Their special knowledge of the Lunacy Acts is of value in such cases (see above Section 5, Lunacy Act, 1890).

2. Mental Deficiency.

At the 31st December, 1948, there were 344 mental defectives under the care of the Mental Health Services Sub-Committee, as set out in the following table:—

In Institutions, under Judicial Orders.

	M.	F.	T.
Cranage Hall Hospital, Holmes Chapel	35	55	90
Birkenhead Institution	17	3	20
Royal Albert Hospital, Lancaster	4	—	4
Calderstones, Whalley, Nr. Blackburn	1	—	1
Brenty Colony, Bristol	1	—	1
Mary Dendy Homes, Alderley Edge	1	—	1
Ashton House, Birkenhead	—	2	2
Under Sections 8 and 15 ("Places of Safety")			
Birkenhead Institution	2	—	2
Whitecross Homes, Warrington	3	1	4
Good Shepherd Convent, Ford	—	1	1
	64	62	126

In Institutions, not under Judicial Orders.

Birkenhead Institution	5	4	9
Royal Albert Hospital, Lancaster	5	—	5
Quakers' Home, Cotebrook	—	1	1
Priory Rest Home, Wavertree	1	1	2
Nantwich Institution	—	1	1
Ian Tetley Memorial Home, Harrogate	1	—	1
Durran Hill House, Carlisle	—	1	1
In other Institutions	1	2	3
	13	10	23

In State Institutions.

Rampton	5	1	6
Moss Side	1	1	2
	6	2	8

On Licence from Institutions

8 7 15

Under Home Supervision.

Discharged from Orders (Friendly Supervision)	3	5	8
Cases which should be in Institutions	7	4	11
Other Cases	82	70	152

Under Guardianship

1 — 1

93 79 172

Totals

184 160 344

Home Supervision.

Prior to the 5th July, the supervision of defectives in their own homes was carried out by members of the Health Visitor's staff and after that date, by the Duly Authorised Officers.

During the year, 685 visits were made to cases under home supervision, 479 by Health Visitors and 206 by Duly Authorised Officers.

Of these, 56 were special visits made by the Superintendent Health Visitor and Duly Authorised Officers for the purpose of obtaining the required information connected with Progress and Periodic Reports, Leave of Absence and the preparation of Petitions.

Six patients were discharged from their Orders during 1948, and each was placed under Voluntary Home Supervision at the request of the Board of Control (see After Care).

New Cases Notified in 1948.		M.	F.	T.
Under Education Act, 1944 (Section 57 (3) )	.....	5	8	13
" " " " (Section 57 (5) )	.....	2	2	4
" Mental Deficiency Acts (Section 8)	.....	1	—	1
" " " " (Section 9)	.....	1	—	1
From other sources	.....	1	2	3
		10	12	22
Admissions to Institutions.				
As " Place of Safety "	.....	6	4	10
Under Section 9 of M.D. Acts	.....	2	—	2
By Petition	.....	—	5	5
		8	9	17

Occupation Centre.

Training for mental defectives (between the ages of 6 and 18), under Home Supervision, is provided by arrangement with the Wallasey Corporation at the Occupation Centre in Wallasey. An average of 20 Birkenhead defectives attend the Centre daily.

3. After Care.

The After Care of the mentally deficient and mentally ill in the community is a service capable of enormous expansion. The future opening of Psychiatric Out-Patient Clinics by the Regional Hospital Board will still leave a wide field for the services of Psychiatric Social Workers and Mental Health workers. Their duties would be to take steps to prevent the onset of mental illness, to offset the recurrence of breakdown in the unstable, and to alleviate much of the suffering which has hitherto been regarded as " the heartache and thousand natural ills the flesh is heir to."

Cases referred for After Care.

Under the Lunacy Acts (December only)

	M.	F.	T.
Willing to have After Care	3	2	5
Not willing	—	3	3

Under Mental Deficiency Acts.

(Patients discharged from Orders) 3 3 6

Ex-Service Personnel.

After Care of these cases was provided by the National Association for Mental Health, there being 18 such cases in Birkenhead.

4. Other Cases.

The Duly Authorised Officers investigated a number of other cases of alleged mental deficiency or illness, and dealt with them as follows:

	M.	F.	T.
(a) Referred to Psychiatrist (including Consultant Psychiatrist)	3	4	7
(b) Referred to Welfare Officer	2	2	4
(c) Referred to own doctor	1	—	1
(d) Referred to Police	—	1	1
(e) Referred to Military Authorities	1	—	1
(f) Referred to other Authorities	—	1	1
(g) No action necessary	6	6	12
	13	14	27

5. Consultant Psychiatric Services.

The services of a Consultant Psychiatrist are necessary for certain types of mental ascertainments, especially for border-line cases of mental illness. As these services are not provided by the Regional Hospital Board but are considered to be the responsibility of the Local Authority, it was necessary to engage a Consultant Psychiatrist to undertake these, and Dr. Mary C. Lydon was appointed on the 22nd October, 1948, as such, to hold a Clinic once a fortnight for this type of mental illness. The advantages of consultant service are several. First, cases are started off on the right lines of treatment immediately; second, where psychiatric treatment is necessary the preliminary investigations (an important feature) are made already available; third, in cases of border-line deficiency, the Consultant's advice is nearly always necessary; and fourth, the advice of a Consultant is of value when it is not possible to arrange periods of observation in hospital.

6. Ambulances.

A scheme has been brought into operation whereby the town's Ambulance Service provides transport for mental cases.

7. Accommodation.

Difficulty has been experienced in obtaining institutional accommodation for cases certified under the Mental Deficiency Acts, especially for those under the age of 16 years; many such cases requiring institutional treatment are at present under Home Supervision.

Likewise accommodation is lacking for old people suffering from mild Senile Dementia. These patients are not true mental cases but are suffering from degenerative changes in the brain which are part of the usual degeneration and decay found in every cell in the body in senescence. Such cases should not be accommodated in mental wards, and it is hoped that in the future special provision will be made for them in non-mental institutions.

HOME NURSING

Under the National Health Service Act it is the duty of the Local Authority to provide a Home Nursing Service.

This work was formerly performed by the Birkenhead District Nursing Society, in affiliation with the Queen's Institute of District Nursing, which has a staff of nurses specially trained for this type of nursing, and which in the past has carried out this work in a most efficient manner.

The Local Authority has entered into an agreement with this Society whereby the latter continue to perform this work, and the Corporation bear the cost of the running expenses.

The staff of nurses is shortly to be increased and it is hoped that a motor car will be obtained for the use of the nurses in the near future.

The following table shows the work which has been carried out since the 5th July:—

No. of cases being nursed at 5th July	150	
No. of new cases reported from 5th July to 31st December, 1948:—Men	149	
Women	339	
Children	63	
Total —	551	
No. of cases terminated—Convalescent	239	
Transferred to Hospitals	69	
Died	99	
Otherwise terminated ...	119	
Total	526	
No. of cases being nursed on 31st December...	175	
Classification of cases nursed and visits paid:—	Cases	Visits
1. Medical	348	12296
2. Surgical, including post-operative cases	142	3482
3. Cases of infectious nature	1	4
4. Tuberculosis	9	581
5. Maternity (Mother and Child)	1	29
6. Post-natal and Ante-natal.....	3	65
7. Senility	33	502
8. Other cases	14	121
Totals ...	551	17080

CARE AND AFTER CARE

Under Section 28 of the National Health Service Act 1946, it is now the duty of the Local Authority to provide Care and After-Care treatment, although for the time being such care is restricted to persons suffering from Tuberculosis, and to a lesser extent to those suffering from mental illness.

With regard to the former class, the functions of the Welfare Committee established in connection with the Tuberculosis scheme under Ministry of Health Memo. 266/T, have now been merged into a Care and After-Care Committee appointed by the Health Committee to carry out the duties specified in Section 28.

The financial allowances and grants are, of course, administered by the National Assistance Board.

The work of the Care and After-Care Committee, with which the Tuberculosis Officer will be directly associated, will now be greatly extended. The sessions for Occupational Therapy Classes will be increased and provision is to be made for the loan to patients of beds, blankets, medical requisites, open-air shelters, etc. and the provision of extra nourishment, dressings, etc.

With regard to persons suffering from mental illness, mentally defective children will continue to attend the Occupation Centre at Wallasey, and it is hoped that, when Mental Social Workers become available, one will be appointed to the Mental Welfare staff to deal with the older defectives.

TUBERCULOSIS

The introduction of the National Health Service Act 1946 has, since the 5th July, divided the administration of the Tuberculosis Service into three main groups:—

1. **Care and After Care** for which the Local Authority is responsible.
2. **Diagnosis, Hospital and Sanatoria accommodation** for which the Regional Hospital Board is responsible.
3. **Financial Assistance** to the tuberculous persons and their families, which is administered by the National Assistance Board.

Care and After Care

A Care and After Care Committee has been appointed by the Health Committee whose main duties will, for the time being, be confined to the tuberculous persons and their families. Reference is made to this on page 38.

New Cases

(a) **Pulmonary**—The number of notifications of the pulmonary type has shown a decrease; 216 as compared with 231 in 1947. There has been an increase in the case of female adults, 89 being notified during 1948 compared with 78 for 1947.

(b) **Non-pulmonary**—The notifications of the non-pulmonary type have risen from 44 in 1947 to 46 in 1948, 13 of which were adults compared with 11 in the previous year.

The number of cases of tuberculosis notified during the year was 262 made up as follows:—

	Males		Females		Total
	Up to 15 years of age	15 years of age and over	Up to 15 years of age	15 years of age and over	
Pulmonary	7	110	10	89	216
Other forms	24	4	9	9	46
Total.....	31	114	19	98	262

The number of cases remaining on the Notification Register at the end of the year was 1,524. Of these, 1,120 (627 males and 493 females) were suffering from respiratory tuberculosis and 404 (183 males and 221 females) were suffering from non-respiratory tuberculosis.

The number of deaths from tuberculosis during the year was: 143 made up as follows:—

Adults		Children	
Pul.	Non-Pul.	Pul.	Non-Pul.
119	8	4	12

Work carried out at the Tuberculosis Clinic.

Up to the 5th July the number of new cases seen at the Clinic was 787, 85 of whom were found to be suffering from tuberculosis. Cases already on the Clinic Register made 1,139 attendances, 745 being for re-examination and 394 being interviews regarding domestic problems and after-care.

BIRKENHEAD ORTHOPÆDIC HOSPITAL FOR CHILDREN

Patients dealt with.—At the commencement of the year there were 29 patients in the Hospital. There were 41 admissions up to the 5th July. These were classified as follows:—

Tuberculosis of bones and joints	—
„ „ abdominal glands and peritoneum	2
„ „ cervical and other glands	6
„ „ lungs	3
For observation and diagnosis	12
Non-tubercular conditions of bones and joints.....	4
Non-tubercular conditions of other organs	14

Average duration of stay.—For the patients discharged the average length of stay was 18 weeks.

Other Sanatoria.—The following table shows the admissions discharges, etc. of tuberculous patients dealt with at other sanatoria up to the 5th July.

Table Showing Admissions, Discharges, &c. of Tuberculous Patients to and from Sanatoria

TOTAL.										
	M	F	M	F	M	F	M	F	M	F
ST. CATHERINE'S HOSPITAL, BIRKENHEAD.	...	...	...	...	...	...	...	...	...	...
ANNA MARIA SANATORIUM, SWITZERLAND.	...	...	...	...	...	...	...	...	...	...
LIVERPOOL CHEST HOSPITAL, MOUNT PLEASANT.	...	...	...	...	...	...	...	...	...	...
ROYAL CHILDREN'S HOSPITAL HESWALL.	...	...	...	...	...	...	...	...	...	...
OPEN AIR HOSPITAL, LEASOWE, WIRRAL.	...	...	...	...	...	...	...	...	...	...
ORTHOPÆDIC HOSPITAL, OSWESTRY, SALOP.	...	...	...	...	...	...	...	...	...	...
BARROWMORE COLONY, NR. CHESTER.	...	...	...	...	...	...	...	...	...	...
LLANBEDR HALL SANATORIUM, RUTHIN, WALES.	...	...	...	...	...	...	...	...	...	...
PENDYFFRYN HALL SANATORIUM, PENMAENMAWR.	...	...	...	...	...	...	...	...	...	...
FAZAKERLEY SANATORIUM, LIVERPOOL.	...	...	...	...	...	...	...	...	...	...
BROADGREEN SANATORIUM, LIVERPOOL.	...	...	...	...	...	...	...	...	...	...
LIVERPOOL SANATORIUM, DELAMERE.	...	...	...	...	...	...	...	...	...	...
MEATHOP SANATORIUM, WESTMORLAND.	...	...	...	...	...	...	...	...	...	...
CHESHIRE JOINT SANATORIUM, MARKET DRAYTON.	...	...	...	...	...	...	...	...	...	...
In San: 31-12-47 ...	16	16	1	2	...	...	...	...	...	...
Admitted up to 5th July ...	12	15	2	...	...	...	...	...	...	...
Discharged up to 5th July ...	10	11	2	...	...	...	...	...	...	...
Died up to 5th July ...	...	1	...	...	...	...	...	...	...	...
In San. up to 5th July ...	18	19	1	2	...	...	...	...	...	...

Artificial pneumothorax treatment.—Up to the 5th July, 1,589 refills were given. There were 8 primary inductions and 582 X-ray screenings performed.

WELFARE OF THE BLIND

This work, which prior to the 5th July was administered by the Health Committee, has now passed to the Welfare Committee, and domiciliary allowances are made by the National Assistance Board.

SCHOOL MEDICAL OFFICER

F. G. FOSTER, M.A., M.D. (Edin.), D.P.H.

DEPUTY SCHOOL MEDICAL OFFICER

D. F. MORGAN, M.B., Ch.B., D.P.H. (Appointed June, 1948)

**ASSISTANT MEDICAL OFFICERS AND ASSISTANT
SCHOOL MEDICAL OFFICERS**

Douglas L. Murray, M.B., Ch.B., D.P.H. (Terminated appointment
March, 1948)

Anna M. Williams, M.B., Ch.B., D.P.H.

Thelma R. Gaunt, M.B., Ch.B., D.P.H.

Cecil A. McCleary, M.B., Ch.B., B.A.O., D.P.H.

William F. Christian, M.B., Ch.B., D.P.H. (Appointed May, 1948)

SENIOR SCHOOL DENTAL OFFICER

P. Wilson Smith, L.D.S., R.F.P.S. (Glas.)

ASSISTANT SCHOOL DENTAL OFFICERS

Eveline M. Warlow, D.D.S. (Resigned August, 1948)

John B. Andrew, L.D.S., B.D.S.

Myles D. Hely, L.D.S. (Appointed November, 1947)

CONSULTANT PSYCHIATRIST

Mary C. Lydon, L.R.C.P. & S.I., D.P.M. (Appointed October, 1948—
Part-time)

SPEECH THERAPIST

Mrs. Mary Peel, L.C.S.T.

SUPERINTENDENT HEALTH VISITOR

Miss E. Ramage

Department of the Medical Officer of Health,
Birkenhead.

February, 1949.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE

Ladies and Gentlemen,

I have the honour to present my Annual Report on the work of the School Health Service for 1948.

The implementation of the National Health Service Act, 1946, on the 5th July, 1948, caused changes both of a financial and structural nature in the School Health Service.

Free medical treatment, formerly given under Section 48 of the Education Act, 1944, is now given through the National Health Service, but certain obligations still fall to be provided through the agency of the Education Act.

1. School Medical Inspections, Minor Ailment Clinics and Ascertainment of Handicapped Pupils.

These services continue to be the responsibility of the Education Authority, although in respect of Minor Ailments Clinics it is envisaged that in course of time "opportunities may be found for co-operation with Health Centres and Centres for group practice forming part of the National Health Service."

This remark seems to suggest the transfer of these Clinics to the Health Centres, when these are established, and a consequent curtailment of the work of the School Medical Officers.

2. Consultative and Specialist Treatment.

All consultative and specialist work which was formerly carried out under financial arrangements at Hospitals, or at Clinics maintained by the Local Authority, is now to be done free of charge to Local Education Authorities.

Thus Consultative Services in Orthopaedics, Eyes, Ears, Nose and Throat, and Psychiatry, which were formerly a charge on the Education Authority, are now to be supplied free of charge by the Regional Hospital Board. Child Guidance remains however the responsibility of the Local Education Authority.

3. Ophthalmic Services

Ophthalmic work, including refractions, for school children is being carried out by the Supplementary Ophthalmic Services under Part VI of the National Health Service Act. Until this service is fully developed, the refractions will still be done through the School Health Service, and payment for these services will be made to the Local Authority by the Executive Council.

Provision of spectacles will be free of charge, but repairs to, and replacement of spectacles, if found to be due to carelessness, will be a charge on the Local Education Committee.

4. Artificial Limbs, Surgical Appliances and Insulin

With regard to the supply of these accessories, no charge will now fall on the Local Authority.

5. Dental Services

The School Dental Service remains unaffected and there will be no payment for orthodontic treatment at Dental Hospitals.

Local Education Authorities are now encouraged to provide dental treatment for children attending non-maintained schools, so far as it is practicable.

6. Education of Children at Hospitals

The Regional Hospital Board has no power to provide education for children who, whilst patients at a Hospital, attend a school which is part of the Hospital premises, and the cost of education falls upon the Local Education Authority.

Such schools are now to be known as "Hospital Special Schools."

This affects the Local Education Authority in respect of school children undergoing treatment at the Birkenhead Orthopaedic Hospital, Thingwall, and at the Liverpool Open-Air Hospital, Leasowe.

7. Child Guidance

Psychiatric treatment is the concern of the Regional Hospital Board, but investigations of maladjusted children and Child Guidance remains the responsibility of the Local Education Authority.

So far, no Child Guidance Clinic has been established in Birkenhead, partly because of shortage of psychiatrists and, even more so, of psychiatric social workers.

A child guidance team should consist of a psychiatrist, social worker and an Educational Psychologist—the last-named being a member of the staff of the Director of Education — and all these specialists are at present in short supply. More cases are being referred every year by Head Masters and by the Magistrates at the Juvenile Courts for psychiatric examination and investigation, and to deal with this increase, a Consultant Psychiatrist (Dr. Mary Lydon), was appointed on a part-time basis—one Clinic per fortnight. The time of this specialist is more than fully occupied with these examinations, and it is essential that provision should be made in the near future for treatment facilities.

The problem of the maladjusted child is one on which the Ministry of Education lays much import, and the cause of maladjustment is frequently to be found in the home. The value of a Child Guidance Clinic in investigating the home circumstances, advising the parents, and in directing and training the child has now been fully proven and the Local Education Authority will have to consider the establishment of a Child Guidance Clinic as soon as circumstances permit.

8. General

The new "Main Medical Record" Cards emphasise the importance of the child's social background and contain a full medical history of each child during its school life.

These cards are, on completion of the child's school career, transferred to the Executive Council, thereby ensuring continuity of treatment throughout the individual's life.

The general health of the school children was good, and, with the exception of measles, which, in February, reached the highest peak it has yet attained in the Borough since notification was made compulsory, there has been no increase in the zymotic diseases.

The acquisition of an X-ray plant at the Dental Clinic has proved invaluable in detecting minimal lesions which might otherwise have escaped observation.

During the year Dr. D. L. Murray, Senior Assistant Medical Officer, and Senior Assistant School Medical Officer, terminated his appointment to take up duty with the Sheffield Regional Hospital Board. Dr. D. F. Morgan was appointed Deputy Medical Officer of Health, and Deputy School Medical Officer: Dr. W. F. Christian was appointed Assistant Medical Officer, and Assistant School Medical Officer.

A disturbing factor has been the inability to obtain Dental Officers to fill vacancies in the School Dental Service. The causes for this shortage of applicants, which is prevalent throughout the country, are well known and do not require explanation. The School Dental Service is working at high stress and cannot be expected to maintain its programme until its full complement of Dental Officers is achieved.

It is hoped that the negotiations which are now taking place may lead to a solution of the present impasse at an early date.

Mr. G. B. Dempsey, the Director of Education, has announced his impending premature retirement on account of ill-health, and I wish to take this opportunity of acknowledging the close co-operation and liaison which has existed between our Departments in the past, and which was made possible by the courtesy and consideration he has always shown in our inter-departmental dealings.

Mr. Dempsey has been a colleague and friend with whom it has been a pleasure to work and it is with great regret that the members of the School Health Service and myself have learned of his resignation.

In conclusion, I wish to thank the Chairman and Members of the Administrative Sub-Committee for the help they have given and the interest they have shown in the maintenance and furtherance of the School Health Service.

I am, Ladies and Gentlemen,

Your obedient servant,

F. G. FOSTER,

School Medical Officer.

COUNTY BOROUGH OF BIRKENHEAD
NUMBER OF SCHOOLS AND CHILDREN

Primary Schools

County	16
Voluntary	15
Number of children on the Rolls	13,727
Average attendance	11,788

Secondary Schools (Maintained)

County	10
Voluntary	2
Number of children on the Rolls	6,705
Average attendance	5,806

Secondary Schools (Non-Maintained)

There are four direct-grant Secondary Schools in the town as follows:—

The Birkenhead School, Beresford Road.

The Birkenhead High School for Girls, Devonshire Place.

(G.P.D.S.T.).

The Convent F.C.J., Holt Hill.

St. Anselm's College, Manor Hill.

Nursery Classes

Nursery classes exist in connection with the Infants' Departments of the following schools:—

Cathcart Street Primary School.

Rock Ferry Primary School.

The Dell Primary School.

MEDICAL INSPECTION AND TREATMENT

The statistical tables required by the Ministry of Education are shown at the end of this report.

Periodic Medical Inspections were carried out in all schools of the three age groups specified in paragraph 49 (2) of the Handicapped Pupils and School Health Service Regulations, 1945, namely:—

- (a) every pupil admitted for the first time to a maintained school as soon as possible after the date of his admission.
- (b) every pupil attending a maintained Primary School during the last year of his attendance at such a school.
- (c) every pupil attending a maintained Secondary School during the last year of his attendance at such a school.

In addition, periodic Medical Inspections were carried out of a fourth age group (children who were between eight and nine years of age on the 31st March, 1948).

During the year the number of periodic Medical Inspections of pupils attending Maintained Schools totalled 7,271 (Not shown in Table I of the Ministry of Education Medical Inspection Returns illustrated at the back of this report, are 185 pupils attending a Non-Maintained School, viz., the Birkenhead School, who were inspected under the provisions of Section 78 of the Education Act, 1944).

The total of 5,741 Special Inspections carried out during 1948 by the School Health Service is made up from several sources, and include Pre-Dental Heart Inspections, examination of Juvenile Court cases under the Children and Young Persons Act, 1933, School Campers, Speech Defects, certificates of fitness to deliver newspapers etc., certificates of freedom from infection, inspections at Minor Ailments Clinics and children seen as "Specials" during the course of periodic visits to the Schools.

Re-examinations of children who as the result of a periodic or special inspection come up later on for subsequent re-inspection totalled 4708. 3673 of these were performed at the school and 1035 at the Minor Ailments Clinics.

CO-OPERATION OF PARENTS

Parents attended at the examination of 5068 (69.70%) of the 7271 children dealt with at the periodic inspections:—

Code Group	Parents Present
First Age	93.12%
Second Age	69.84%
Third Age	21.84%
Fourth Age	78.70%

NUTRITION

The Nutrition of Birkenhead School Children remains at a high level for an industrial area, and there is no real evidence of malnutrition. There is no doubt that adequate sleep is an essential factor in maintaining a high standard of good health.

Height and weight.—Below are set out the average heights and weights (measured without footwear) of children who were examined during the course of routine inspections.

Age	Height					
	Boys			Girls		
	No.	Ft.	Ins.	No.	Ft.	Ins.
3 years	16	3	4.50	17	3	3.59
4 years	339	3	6.67	320	3	5.86
5 years	612	3	8.49	638	3	8.14
6 years	122	3	10.43	124	3	9.68
7 years	29	4	1.21	18	4	0.00
8 years	718	4	3.46	608	4	3.10
9 years	150	4	4.53	176	4	4.15
10 years	489	4	7.62	376	4	7.10
11 years	561	4	8.29	465	4	8.29
12 years	38	4	11.42	4	4	8.50
13 years	49	5	1.00	5	5	0.60
14 years	213	5	3.97	343	5	3.38
15 years	401	5	5.23	288	5	4.05
16 years	116	5	8.28	52	5	5.31
17 years	33	5	10.21	22	5	6.18
18 years	6	6	0.00	11	5	5.91

Age	Weight					
	Boys			Girls		
	No.	St.	Lbs.	No.	St.	Lbs.
3 years	16	2	12.25	17	2	9.83
4 years	339	3	0.56	316	2	12.25
5 years	612	3	3.33	638	3	1.28
6 years	122	3	7.06	124	3	6.10
7 years	30	3	11.80	15	3	11.40
8 years	714	4	4.05	603	4	1.96
9 years	157	4	6.54	182	4	4.74
10 years	474	5	3.11	370	5	0.57
11 years	514	5	4.75	468	5	4.03
12 years	35	6	0.83	4	5	8.50
13 years	47	6	8.49	3	6	13.66
14 years	210	7	9.01	337	7	12.27
15 years	400	8	2.47	296	8	1.47
16 years	115	9	1.40	52	8	11.23
17 years	33	9	12.45	22	8	11.91
18 years	6	10	9.67	11	8	12.64

General Condition figures are illustrated in Table IIB of the Ministry of Education Returns shown at the back of this report.

PROVISION OF MEALS AND MILK

Several new School Kitchens were opened during the year and approximately one-third of the school population can now obtain a well cooked and palatable dinner at school.

The total number of school meals provided during the year was 1,285,738 showing an increase of 89,984 over 1947. Of this former number 1,004,648 were supplied on payment and 281,090 free.

Every child attending a Primary or Secondary Maintained School receives one-third of a pint of milk free of charge, and during the year 3,420,140 bottles of milk were provided.

CLEANLINESS AND CLOTHING

The general standard of cleanliness is satisfactory. The Health Visitors made periodic inspections during the school terms, and altogether 59,870 examinations were carried out. 1568 pupils were found to be infested with vermin. Under Section 54 of the Education Act, 1944, 8 cleansing notices and one cleansing order were issued. The figures quoted approximate to those for 1947.

The Assistant School Medical Officers report that the standard of clothing is generally good with the exception of footwear, which is inadequate and unsuitable in a number of cases.

MINOR AILMENTS CLINIC

The Minor Ailments Clinics continued to open daily for the treatment of Minor Ailments during the School Term, and as necessary during holidays. Although attendances have increased, the number of defects treated are not materially greater than in 1947. 13363 attendances were made, and 2498 defects were treated as compared with 9800 attendances and 1984 defects treated during 1947.

SCABIES CLINIC

The treatment of Scabies and Verminous Conditions remains with the Local Education Authority, 441 cases being discovered necessitating 2552 attendances. All contacts were followed up, resulting in 92 pre-school children and 96 adults also being treated.

Disease or defect.	Number of defects treated at the Municipal Skin Clinic during the year.
Scabies :	
(a) uncomplicated	55
(b) complicated	78
Scabies contacts (found to be free from scabies).....	31
Secondary dermatitis (following scabies)	—
Diseases of the scalp (due to lice and nits).....	131
Other skin diseases.....	146
Total.....	441

An average of 2 treatments only were required to effect a cure for each case of uncomplicated scabies. **Scabies Order 1941.**—This Order, made under the Defence Regulations, was repealed in July, so that action where necessary must now be taken under the Education Act, 1944.

It will be noticed that the statistical figures of skin ailments shown in Table III Group I of the Ministry of Education, Medical Inspections Returns, at the back of this report, show an increase over those for 1947. This is accountable to the fact that the number of cases seen at local hospital out-patient clinics from 1st January to 4th July, have been included in the Annual Report.

DEFECTIVE VISION

Under the National Health Service Act, 1946, the Supplementary Ophthalmic Services have taken over the Ophthalmic and refraction work of the School Health Service. As, however, the general sight-testing work of the Specialist Services will not be fully developed for some time, the Local Education Authority will, in the meantime, continue to make use of the services of Dr. A. M. Williams, who, after application, was placed on the Local Executive Council's list of Ophthalmic Medical Practitioners with effect from the 9th November, 1948. A fee of 12/6d. is paid by the Executive Council for each refraction done by Dr. Williams, and the amount due every month is paid directly to the Borough Treasurer by the Executive Council.

The supply of glasses is now undertaken by ophthalmic dispensing opticians on the Ophthalmic List, on presentation by the parent of the appropriate form. For school children, the procedure provides that no charge will be made for replacement or repair of glasses. Any charge deemed by the Ophthalmic Services Committee to be due to lack of care must be paid by the Education Authority to the Executive Council. The effect of this ruling is that there is no encouragement to the child—or obligation on the part of the parent to encourage the child—to take care that his or her glasses are not lost, damaged or destroyed, as the cost of replacements or repair will come, not out of the parent's, but out of the Education Authority's pocket, and it is conceivable that a careless or destructive child might receive several pairs of glasses a year at the Authority's expense.

Dr. Williams reports:—

"Mothers are very anxious to have the eyes of the children tested, and attend well, both for new cases, and re-examinations.

Several new cases of myopia have been revealed, but the numbers do not compare adversely with those discovered in previous years. Cases of high myopia have been very few.

It is most unfortunate that, under the Supplementary Ophthalmic Services Scheme, the myopic and other visually defective school child has to wait so long before his or her glasses are ready. It is not uncommon for the child to wait four or five months, and even longer, before its glasses are eventually ready. In many instances the glasses are no longer suitable, the child's vision having deteriorated in the interval, which necessitates stronger lenses having to be prescribed.

Complaints are being made by parents that their children find it difficult to derive any benefit from their education without suitable glasses, and in certain cases children are being kept off school because of the long delay in providing glasses.

It is to be hoped that this situation, detrimental in many ways to the school child will adjust itself in due course, but I feel most strongly that priority should be given to prescriptions made out for myopic schoolchildren, and children about to sit for important examinations."

Particulars of school children refracted at the Eye Clinic during the year are shown as follows:—

- (a) 1st January to 4th July, by the Local Education Authority under Section 48 of the Education Act, 1944.
- (b) 5th July to 31st December, for the Local Executive Council under Part VI of the National Health Service (Supplementary Ophthalmic Services) Regulations, 1948.
- (c) Particulars for the whole year combining the figures given at (a) and (b)

(a) During the period 1st January to 4th July, 334 new cases were examined. Spectacles were prescribed for 153 of these, the remainder being found to be emmetropic, or cases for whom spectacles were of no benefit. 631 children attended for re-examination, and 346 pairs of spectacles were prescribed.

The total number of spectacles obtained was 510. The fact that 18 pairs of spectacles were obtained in excess of the number supplied is due to spectacles prescribed during the latter part of 1947 not being obtained until 1948.

(b) From 5th July to 31st December, 204 new cases were examined. Spectacles were prescribed for 98 of these, the remainder being found to be emmetropic or cases for whom spectacles were of no benefit. 510 children attended for re-examination, and 193 pairs of spectacles were prescribed.

Details of glasses obtained by pupils under the Supplementary Ophthalmic Services Scheme are not available.

- (c) The combined figures for the whole year are as follows:—

Number of new cases refracted	...	...	...	...	538
Number of these for whom spectacles were prescribed	...	...	...	...	251
Number of re-examinations refracted	...	...	...	...	1141
Number of these for whom spectacles were prescribed	...	...	...	...	539
Total number of cases refracted	...	...	...	...	1779
Number of these for whom spectacles were prescribed	...	...	...	...	790
Number known to have obtained spectacles	...	...	...	...	510

In addition to the above, 44 children of pre-school age attended the Eye Clinic during 1948 for the first time, and 3 attended for re-examination.

The new cases of strabismus noted during the year were as follows:

Convergent: Right eye 32, left eye 62, alternating 5.
Divergent: Right eye 0, left eye 0, alternating 0.
Double internal 0.

92 new cases were examined and 190 re-examinations were carried out by Mr. Charters, Consultant Ophthalmic Surgeon, at the Birkenhead Municipal Hospital. Thirty operations were performed, twenty-four of which were for the correction of squint; a further fourteen cases of squint received operative treatment at local hospitals.

VACCINATION

In the Routine Inspections children were examined as to vaccination marks, and of the 7271 children examined,

2770 (38.10%)	showed no marks
4019 (55.27%)	showed one mark
419 (5.76%)	showed two marks
29 (0.40%)	showed three marks
34 (0.46%)	showed four marks

PAST INFECTIOUS DISEASES

Enquiry was made at each Routine Medical Inspection as to the infectious diseases from which the children might have suffered.

(1) Children aged 3—9

	No. of cases.	Per cent.
No Infectious Disease	220	5.53
Measles	3260	81.93
Whooping Cough	2151	54.06
Scarlet Fever	333	8.37
Diphtheria	106	2.66
Chicken Pox	1809	45.46
Mumps	953	23.95

(2) Children aged 10—16

No Infectious Disease	32	0.97
Measles	3076	93.44
Whooping Cough	1993	60.54
Scarlet Fever	512	15.55
Diphtheria	299	9.08
Chicken Pox	1960	59.54
Mumps	1384	42.04

Note.—The same child may have had more than one of these diseases.

EAR, NOSE AND THROAT

Prior to the 5th July, patients were referred by the School Health Service to the Ear, Nose and Throat Surgeon at the Municipal Hospital, and this arrangement continues to function under the National Health Service Act.

In December the Birkenhead Hospital Management Committee made available facilities for a number of patients to be seen weekly at the Birkenhead and Wirral Children's Hospital, and it is hoped that this development will lead to a reduction in the waiting period for treatment.

At the periodic examinations the number of pupils found to require treatment for Tonsils and Adenoids was 479 and the number required to be kept under observation was 373.

A total of 296 children were examined and 308 re-examinations were carried out by Mrs. Abercromby, Consultant Aurist and Laryngologist. 226 operations were performed at the Birkenhead Municipal Hospital, compared with 162 during 1947 as follows:—

Tonsils only	...	...	...	...	...	17
Adenoids only	...	...	...	...	...	70
Tonsils and Adenoids	...	...	...	...	...	128
Other defects of the Nose and Throat	...	...	...	...	...	11
						<hr/> 226 <hr/>

A further 93 cases are known to have received operative treatment at local hospitals.

ORTHOPÆDIC AND POSTURAL DEFECTS

In September, the Liverpool Regional Hospital Board assumed administrative and financial responsibility for orthopædic treatment and its adjuncts, viz., massage, physiotherapy, ultra-violet treatment, provision of splints and surgical appliances.

The arrangements which have been in operation for a number of years, whereby children coming within the scope of the School Health Service have been referred to the Birkenhead and Wirral Invalid Children's Association will be continued.

422 new cases (including 174 pre-school children) were seen as compared with 371 in the previous year.

There were 1108 re-examinations as compared with 981 for 1947. 52 Children were treated as in-patients at the Birkenhead Municipal Hospital, and a further 62 cases are known to have received in-patient treatment at local hospitals.

A grant of £10 was made to the British Council for the Welfare of Spastics, a body constituted to promote research and experiment into the problem of educating and treating children suffering from spastic paralysis.

Remedial exercises for flat feet, knock knees and postural defects, were included in the general physical training curriculum of the schools under the supervision of the physical training instructors. It is pointed out that a relatively small percentage of children suffer from defects which require remediable therapy.

An analysis of new cases and discharges from the Orthopædic Clinic, are shown in the following table.

Disease Categories	New Cases				Discharged during 1947				
	Under School Age		Of School Age		Cured	Relieved	Left district	Refused treatment	Died
	M.	F.	M.	F.					
Congenital Deformities:									
Trunk	2	2	...	3	1	1	...	...	...
Upper Limb	1	...	...	1	1	...	...	...	...
Lower Limb .....	...	3	1	2	2	1	...	...	...
Acquired Deformities:									
Flat Foot .....	...	...	...	...	74	19	3	7	...
Hallux Valgus .....	...	...	...	...	3	...	1	...	...
Postural Kyphosis & Scoliosis. ....	...	...	...	...	35	4	3	3	...
Knock Knee	79	69	116	82	4	...	2	...	...
Bow Leg .....	...	...	...	...	14	1	1	...	...
Other Conditions .....	...	...	...	...	...	...	...	...	...
Affections of Skeleton:									
Rickets .....	...	1	...	...	...	...	...	...	...
Other Conditions .....	...	...	...	...	...	...	...	...	...
Affections of Nervous System:									
Spastic Paralysis	1	1	1	1	...	1	1	...	...
Infantile " .....	...	...	1	1	3	2	1	...	...
Peripheral Nerve Lesions .....	...	1	...	...	...	...	...	...	...
Other Conditions .....	...	...	1	1	1	...	...	...	...
Affections of Bone:									
Osteomyelitis .....	...	...	...	1	...	...	...	...	...
Tuberculosis .....	...	...	1	...	...	...	...	...	...
Other Conditions .....	...	...	...	...	...	...	...	...	...
Affections of Joints:									
Tuberculous .....	...	1	...	...	1	...	...	...	...
Other Conditions .....	...	...	1	1	2	1	...	...	...
Affections of Spine:									
Tuberculous .....	...	...	...	...	...	...	...	...	...
Other Conditions .....	...	...	...	...	1	...	...	...	...
Affections of Epiphysis .....	...	...	1	...	...	...	...	...	...
Affections of Soft Tissues .....	...	...	1	...	...	...	...	...	...
Complications of Trauma	1	...	...	...	...	...	...	...	...
Transferred to Hospital .....	...	...	...	...	...	...	...	...	5
Totals.....	84	78	124	93	142	30	12	10	5

MASSAGE AND REMEDIAL EXERCISES

Massage and remedial exercises, as prescribed by the Orthopædic Surgeon, were provided through the agency of the Invalid Children's Association. (There are one full-time and two part-time physiotherapists on the Association's Staff).

The number of attendances by clinic cases were 7,074 compared with 6,384 last year.

In addition 133 attendances were made by non-clinic cases (that is to say, cases sent by orthopædic surgeons attached to local hospitals, etc.), as compared with 264 for last year.

SURGICAL APPLIANCES, SPLINTS, ETC.

The provision of special surgical appliances and apparatus, and the alterations to footwear, etc., was dealt with by the Association, under the terms of the Ministry of Education Circular 102 up to 4th July. Thereafter these services were provided under the National Health Service Act.

A total of 204 cases were dealt with during the year compared with 273 for 1947.

CONVALESCENT AND AFTER CARE TREATMENT

Under Section 28 of the National Health Service Act, 1946, it is the duty of the Local Authority to provide After-Care treatment, which in the case of school children is usually carried out at Convalescent Homes.

The question of financial responsibility for this form of treatment is a vexed one and at present under discussion, as the Regional Hospital Board confines its responsibilities to:—

- “(a) Convalescent Hospital treatment, and
- (b) Rehabilitation treatment under medical, and, if need be, nursing supervision.”

but does not hold itself liable “for the provision of recuperative holiday with change of air, food and surroundings,” which it considers is the responsibility of the Local Authority under Section 28 of the National Health Service Act, 1946.

It will be appreciated that the border-line between children needing Convalescent Hospital and Rehabilitation treatment on the one hand, and recuperative treatment on the other, is very indefinite and frequently a matter of personal opinion.

There is at present a shortage of institutions supplying the former type of treatment with a consequent demand on the local Authority for after-care treatment under the latter category.

This has led to a certain amount of controversy as to the extent of financial responsibility of the Local Education Authority under Section 48 (3) of the Education Act, 1944. At present not only children suffering from debility, anæmia and minor ailments, but also children convalescing after serious illnesses—and on some occasions post operative cases—are being referred by almoners of hospitals and private practitioners to the Local Authority for convalescent treatment. It is difficult to refuse these latter cases, which would appear to come under the category of rehabilitation, but it must be borne in mind that, if accepted, the financial outlay falls on the Local Authority.

Prior to the 5th July, 1948, all convalescent treatment was undertaken through the agency of the Invalid Children's Association, which, for many years, has had an intimate knowledge of the various Convalescent Homes and of the suitability of each for special complaints.

For the time being, the Invalid Children's Association will carry on this agency on behalf of the Local Education Authority, and will arrange for convalescent treatment for such school children as have been approved for treatment by the School Medical Officer.

A total of 124 school children spent periods of convalescence in Homes and Country Hospitals in Lancashire, Cheshire and North Wales.

ULTRA VIOLET RAY TREATMENT

At the premises of the Invalid Children's Association a total of 57 children of school age made 1,034 attendances during the year.

	Improved	Not Improved	Still under treatment at end of year
Debility	34	20	39
Tuberculosis	1	—	1
Anæmia	—	—	—
Bronchitis	—	—	—
Rickets	—	—	1
Other conditions	—	—	—
	35	20	41
	—	—	—

In addition 646 attendances were made by children under school age, and 3 attendances by one patient over school age.

Included among the 20 children classified as "not improved" under the heading Debility, are those who did not finish the course of treatment prescribed.

At the North Clinic a total of 43 children of school age made 443 attendances during the year.

	Improved.	Not Improved.	Still under treatment at end of year.
Malnutrition	—	—	—
Debility	8	2	4
Tuberculosis	—	—	—
Anæmia	1	—	—
Bronchitis	8	1	2
Rickets	1	—	—
Other conditions	12	2	2
	30	5	8
	—	—	—

In addition 232 attendances were made by children below school age.

At the South Clinic a total of 21 children of school age made 197 attendances during the year.

	Improved.	Not Improved.	Still under treatment at end of year.
Malnutrition	3	2	3
Debility	—	1	—
Tuberculosis	—	—	—
Anæmia	1	1	2
Bronchitis	1	1	2
Rickets	—	—	—
Other conditions	3	1	—
	—	—	—
	8	6	7

In addition 339 attendances were made by children below and above school age.

HANDICAPPED PUPILS

The Handicapped Pupils and School Health Services Regulations, 1945, define the several categories of pupils requiring special educational treatment for their Primary and Secondary education, and provide as to the special methods appropriate for the education of pupils of each category.

The following table shows the number of children in each category, and their disposition at the end of the year.

No child is entered under more than one heading in this table.

	In Special Schools		In Maintained Schools		In Independent Schools		Not at School		Total	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
A. Blind	2	5	1	—	—	—	—	—	3	5
B. Partially Sighted	7	7	1	1	—	—	—	—	8	8
C. Deaf.....	9	4	2	—	—	—	1	2	12	6
D. Partially Deaf.....	1	—	1	—	—	1	—	—	2	1
E. Delicate	—	—	3	3	—	—	1	—	4	3
F. Diabetic	—	—	—	—	—	—	—	—	—	—
G. Educationally Subnormal	82	33	21	7	1	5	1	1	105	46
H. Epileptic	2	4	—	—	—	—	—	—	2	4
I. Maladjusted	4	3	15	2	—	1	—	—	19	6
J. Physically Handicapped										
(a) Cripples.....	1	—	6	12	2	—	4	3	13	15
(b) Hearts	—	—	2	8	—	—	2	2	4	10
K. Speech Defects	—	—	27	21	—	—	—	—	27	21
L. Multiple Disabilities	8	4	6	3	—	—	—	2	14	9

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MULTIPLE DEFECTS**SUMMARY**

Partially Sighted and Educationally sub-normal	1
Partially sighted and Speech defect	2
Partially Deaf and Speech defect	1
Partially Deaf and Educationally sub-normal	1
Epileptic and Maladjusted	1
Maladjusted and Speech defect	1
Physically handicapped and Educationally sub-normal ...	2
Physically handicapped and Speech defect	1
Physically handicapped and Maladjusted	1
Educationally sub-normal and Speech defect	3
Educationally sub-normal and Physically handicapped ...	3
Educationally sub-normal and Delicate	3
Educationally sub-normal and Partially Deaf	1
Educationally sub-normal and Epileptic	1
Educationally sub-normal and Maladjusted	1
	—
	23
	—

A more detailed indication of accommodation provided for the following categories of handicapped pupils is illustrated below:—

Category (a)—Blind

Royal Normal College, Shrewsbury	1 pupil
Henshaw's Institute for the Blind	2 pupils
Royal Institute for the Blind, Birmingham	1 pupil
St. Vincent's R.C. School, Liverpool	2 pupils
Liverpool School for the Blind	1 pupil
Awaiting vacancy	1 pupil

Category (b)—Partially Sighted

Sight Saving Class, Hamilton Secondary School ...	17 pupils
Primary Schools	1 pupil
Secondary Schools	1 pupil

Category (c)—Deaf

Liverpool School for the Deaf	9 pupils
School for the Deaf, Leeds	2 pupils
School for the Deaf, Boston Spa	2 pupils
Awaiting accommodation	5 pupils

Category (d)—Partially Deaf

Liverpool School for the Partially Deaf, Birkdale ...	3 pupils
Independent School	1 pupil
Awaiting vacancy	1 pupil

Category (e)—Delicate

Primary Schools	3 pupils
Secondary Schools	3 pupils
Not at School	1 pupil

Category (f)—Diabetic

Nil

Category (h)—Epileptic

Maghull Homes, Liverpool	6 pupils
Secondary School	1 pupil

Category (i)—Maladjusted

St. Vincent's Approved School, Market Harborough	1 pupil
Northumberland Village Homes	1 pupil
Quinta Approved School, Weston Rhyn, Nr. Oswestry	1 pupil
Walden Heath Approved School, Harrogate	1 pupil
Bryn Estyn Approved School, Wrexham	1 pupil
Breatton Park Approved School	1 pupil
Blackbrook House School, St. Helens	1 pupil
Primary Schools	9 pupils
Secondary Schools	9 pupils
Independent School	1 pupil

Category (j)—Physically Handicapped

St. Margaret's, Croydon	1 pupil
Secondary Schools	13 pupils
Primary Schools	18 pupils
Independent Schools	2 pupils
Not at School	12 pupils

TUBERCULOUS CHILDREN

The statistics now submitted relating to school children suffering from tuberculosis are confined to the period 1st January to the 4th July, 1948, after which date the arrangements for the diagnosis and treatment of tuberculosis became the duty of the Liverpool Regional Hospital Board under the National Health Service Act, 1948.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS
(including pleura and intra-thoracic glands)

Number on register at 4th July, 1948 53

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS
(This category includes tuberculosis of all sites other than those shown in (I) above).

Number on register at 4th July, 1948 199

**HOSPITAL SPECIAL SCHOOL—BIRKENHEAD ORTHOPÆDIC
HOSPITAL (THINGWALL)**

The Orthopædic Hospital (Thingwall) was transferred to the Regional Hospital Board on the 5th July.

Whilst the Board undertakes the treatment and maintenance of all children at the Hospitals, it has no power to provide education for the children.

Section 62 of the National Health Service Act empowers the Board to arrange for the Local Education Authority to use part of the premises of the Hospital as a Special School. Under Ministry of Education Circular 179, of the 4th August, it now devolves on the Local Education Authority to undertake administration and financial responsibility for the school, whilst the Regional Hospital Board is still responsible for the maintenance and treatment of the pupil-patients. Schools of this nature are now to be known as "Hospital Special Schools."

SPEECH THERAPY

During an address to a Refresher Course for School Medical Officers, in July, Dr. E. J. Boome made the following remarks:—

" Disorders of speech have been noted by writers of all ages. Perhaps one of the first was Celsus, first century A.D., who said:—

" When the tongue is paralysed, either from a vice of the organ or as a consequence of another disease, and when the patient cannot articulate, gargles should be administered of a decoction of thyme, hyssop, pennyroyal, he should drink water, and the head, the neck, mouth, and the part below the chin be well rubbed. The tongue should be rubbed with lasserwort, and he should chew pungent substances,

such as mustard, garlic, onion, and make every effort to articulate. He must exercise himself to retain his breath, wash the head in cold water, eat horse radish, and then vomit."

During the nineteenth century French surgeons thought that stammering could be cured by cutting off portions of the tongue. This proved disastrous.

In the British Museum there are painted masks used by the "devil dancers" of Ceylon for the cure of various diseases, including stammering and deafness."

Speech Therapy has advanced considerably since those days and Mrs. Mary Peel, the Speech Therapist, reports:—

"Two weeks in July were given over to a routine investigation of children reported as having some difficulty of speech; doctor, speech therapist and parents, being present when the children were examined. This has led to a closer co-operation between the speech therapist and parents, enabling work to be carried out at home under the latter's guidance. School contact was continued by the speech therapist visiting schools during the last two weeks in each term.

Since the closing of the Well Lane Clinic in July, the following arrangements have obtained:—

Trinity Street Primary School ...	Group Classes, Stammerers, and some individual defects.
South Health Clinic	1 Session per week—Individual defects.
North Health Clinic	1 Session per week—Individual defects.
Claughton Road Special School	1 half-day session per week.

Primary and Secondary Schools visited during last two weeks of each term.

Number of cases treated during the year—160.

Stammer, 82; Speech Defects, 72; Special School Cases, 6.

Attendances:—

	Boys					Girls				
	Stammer	Dyslatic	Signatic	Retarded	Others, e.g. Cleft Palate	Stammer	Dyslatic	Signatic	Retarded	Others, e.g. Cleft Palate
Total	64	36	4	3	4	18	13	6	2	4
Attending	34	12	3	3	2	9	4	3	—	1
Discharged	25	27	1	—	2	9	9	3	2	3

There has been an increase in the number of children requiring treatment for speech defects. This may be due to one of the following two reasons:—

- (a) Increasing interest in schools and homes towards the children's speech, and growing awareness of the benefits of speech therapy;
- (b) Lack of sufficient home interest while the children are learning to talk, i.e., mothers out at work, homes overcrowded, parents uninterested in their children, over-anxious grandparents.

Despite this increase in numbers brought to the attention of the School Medical Officer, the number of speech defects known are not representative of the speech defects in the Borough. There are still schools sending in few or no returns when asked to submit names for treatment.

There is a waiting list of children requiring speech therapy, and because of this, it is only possible to give children the minimum amount of treatment required. Most children attending the Clinic should have at least six months in a group class to give them complete speech confidence, but as numbers are at present, this is impossible, and they have to rely on any speech training given in the schools. The stammerers are receiving two sessions of forty minutes each during the week, and the speech defects are being treated for one half-hour per week. It would be more desirable if this could be two sessions per week.

The treatment given has conformed with that of previous years, but has this year included more play therapy. It is based on the psychological and physiological aspect of the speech disorder or defect. The response to treatment has been in most cases successful, and both parents and children have shown more interest in the work undertaken at the Clinic."

MALADJUSTED CHILDREN

During the year 11 school children were referred for investigation by the psychiatrist.

Of this number, 6 boys and 2 girls were registered as Maladjusted Pupils, in accordance with Category (i) of the Handicapped Pupils and School Health Service Regulations, 1945. Seven of these children were recommended to receive treatment not involving Residential Care.

In addition, a fifteen year old girl was referred by the Juvenile Court for a report on her mental condition; on examination she was found to be Maladjusted and recommended to undergo a course of psychiatric treatment. On behalf of the Children's Committee a boy of sixteen was examined by the psychiatrist who found no evidence of Maladjustment in his case.

EDUCATIONALLY SUB-NORMAL CHILDREN

In Birkenhead there are no special classes for educationally sub-normal pupils in ordinary schools, and they are taught in the lower "streams."

Children with intelligence quotients ranging from 50 to 75 are normally recommended for special educational treatment at Claughton Road Day Special School; cases below 50 are usually considered to be incapable of receiving education at school and notified to the Local Health Authority as Mentally Defective. Quite often the latter action is not resorted to until the child has had a trial at the Special School.

Parents have a right of appeal to the Minister of Education against such notification, and the Education Authority may cancel a notification so made, under the Education (Miscellaneous Provisions) Act, 1948.

Examinations of children suspected to be educationally sub-normal were held at various schools and clinics during the year by the approved medical officers, and the results of these examinations are set out below:—

	Boys	Girls	Total
Total number examined	41	17	58
Number found to be educationally sub-normal and—			
Recommended to attend Special School ...	20	13	33
Recommended Special Education within the Ordinary School	14	2	16
Recommended to continue Ordinary Schools	7	2	9

During the year a number of children in attendance at Claughton Road Day Special School were examined for leave of absence and as Special School leavers, the results of these examinations are set out below:—

	Boys	Girls	Total
Total number examined	10	4	14
Recommended to be notified to the Local Health Authority under the Mental Deficiency Acts	3	2	5
Leave of Absence recommended	3	—	3
Leave of Absence not recommended	—	1	1
Examined prior to leaving school	4	1	5

MENTAL DEFICIENCY

The number of children notified by the Local Education Authority to the Local Mental Health Authority, under Section 57 of the Education Act, 1944, numbered 22.

Three boys were placed under Institutional Care, and the remaining children under Home Supervision.

TREATMENT IN HOSPITALS

Prior to the 5th July, details of all In-Patient and Out-Patient treatment, afforded to school children, were submitted by Local Hospitals with their claims under Section 48 (3) of the Education Act, 1944.

Since the coming into operation of the National Health Service Act, the Birkenhead Hospital Management Committee have continued to supply full particulars of In-Patient treatment in respect of school children, and the following is a classification of the diseases encountered during the year:—

In-Patient Treatment

Localisation of Disease.	Birkenhead Municipal	Wirral Children's	Birkenhead General	Other Hospitals	Total Cases
1. Heart & Circulatory	26	18	1	—	45
2. Nervous	6	23	4	—	33
3. Respiratory	57	40	—	3	100
4. Orthopaedic	14	15	7	3	39
5. Eye, Ear, Nose & Throat	275	80	133	1	489
6. Urinary	7	16	3	—	26
7. Surgical	75	103	28	—	206
8. General	65	100	12	—	177
9. Casualties	18	117	7	—	142
	543	512	195	7	1257
Bed-days	7421	7221	1006	149	15797

DENTAL INSPECTION AND TREATMENT

During the year 14,422 children were inspected and 9,055 were found to require treatment. The number actually treated was 6,814, details of which are shown in the tables at the end of this report.

The staff of the School Dental Clinic at the beginning of 1948, consisted of Mr. P. Wilson Smith, Senior Dental Officer, Miss E. Warlow and Mr. J. B. Andrew, Assistant Dental Officers. During January, Mr. M. D. Hely took up an appointment as Assistant Dental Officer. In August, Miss Warlow resigned because of prolonged ill health.

The Senior Dental Officer reports:—

“ The new X-Ray unit was ready for use in April, so that, for the first time it became possible to take and process Dental X-Ray films

on the premises, which has proved very satisfactory indeed and has achieved excellent results.

At the end of the year the new surgery being constructed in this clinic was completed. Thus, there are now five fully equipped surgeries.

The condition of the children's teeth remains much the same as in recent years. There is still a great deal of dental caries, and a small degree of inflammation of the gums is not uncommon. Children and parents are taking more interest in the teeth and more children are brushing their teeth regularly.

There have been many enquiries by mothers concerning irregularities in the teeth; a number of these Orthodontic cases have been treated, some by simple extractions and some by the use of appliances. In several cases X-Ray examination has revealed the presence of teeth buried in the gum as the cause of the irregularity, and these have been removed surgically under local anaesthesia.

Most of the School Dental Officers' time is spent in dealing with ravages of dental caries, either by extraction or conservative treatment. The aetiology of dental caries has yet to be fully elucidated, but there is evidence that the diet plays an important role. Reports indicate that a diet rich in fresh foods, produced from healthy soils, are very beneficial, not only for the dental health, but for health generally.

Just at a time when implementation of the 1944 Education Act and the National Health Service Act was contemplated, the transference of Dental personnel from the Schools Health Service to National Health Service is of course due to the lack of decision by the various bodies concerned on a suitable and adequate remuneration of School Dental Surgeons.

Consequently the treatment given at this clinic will inevitably have to be considerably curtailed, which will be a disappointment after so many years of efficient service."

MINISTRY OF EDUCATION
MEDICAL INSPECTION RETURNS

YEAR ENDED 31st DECEMBER, 1948

TABLE I.
MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS

A.—PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups:—

Entrants	2284
Second Age Group	1850
Third Age Group	1442
Total	5576

Number of other Periodic Inspections

1695

Grand Total

7271

B.—OTHER INSPECTIONS

Number of Special Inspections

5741

Number of Re-Inspections

4708

Total

10449

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin)

Group (1)	For defective vision (excluding squint). (2)	For any of the other conditions recorded in Table IIA. (3)	Total individual pupils (4)
Entrants	3	394	397
Second Age Group	118	175	268
Third Age Group	71	103	156
Total (prescribed groups)	192	672	821
Other Periodic Inspections	124	248	343
Grand Total	316	920	1164

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1948

Defect Code No.	Defect or Disease (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		No. of Defects		No. of defects	
		Requiring treatment (2)	Requiring to be kept under observation, but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
4	Skin	87	101	452	2
5	Eyes— <i>a.</i> Vision ..	290	185	45	—
	<i>b.</i> Squint ...	60	67	17	1
	<i>c.</i> Other ...	42	29	426	2
6	Ears— <i>a.</i> Hearing ...	13	33	31	—
	<i>b.</i> Otitis Media	12	26	18	—
	<i>c.</i> Other ...	40	34	261	1
7	Nose or Throat ...	291	510	230	—
8	Speech	21	46	120	111
9	Cervical Glands ...	7	135	52	—
10	Heart & Circulation ..	49	216	46	—
11	Lungs—T.B. & N.T.B.	30	272	225	—
12	Developmental—				
	<i>a.</i> Hernia ...	7	12	—	—
	<i>b.</i> Other	16	163	1	1
13	Orthopaedic—				
	<i>a.</i> Posture ...	9	18	1	—
	<i>b.</i> Flat Foot	140	95	11	—
	<i>c.</i> Other Non-Pul T.B.	50	122	39	—
14	Nervous system—				
	<i>a.</i> Epilepsy...	—	3	4	—
	<i>b.</i> Other	26	56	54	—
15	Psychological—				
	<i>a.</i> Development	5	11	57	8
	<i>b.</i> Stability—	1	25	21	—
16	Other	39	176	1392	—
		1235	2335	3503	126

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN THE AGE GROUPS

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	2284	354	15.50	1659	72.64	271	11.86
Second Age Group ...	1850	191	10.32	1573	85.03	86	4.65
Third Age Group ...	1442	121	8.39	1225	84.96	96	6.65
Other Periodic Inspections	1695	62	3.65	1478	87.20	155	9.15
Total	7271	728	10.02	5935	81.62	608	8.36

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