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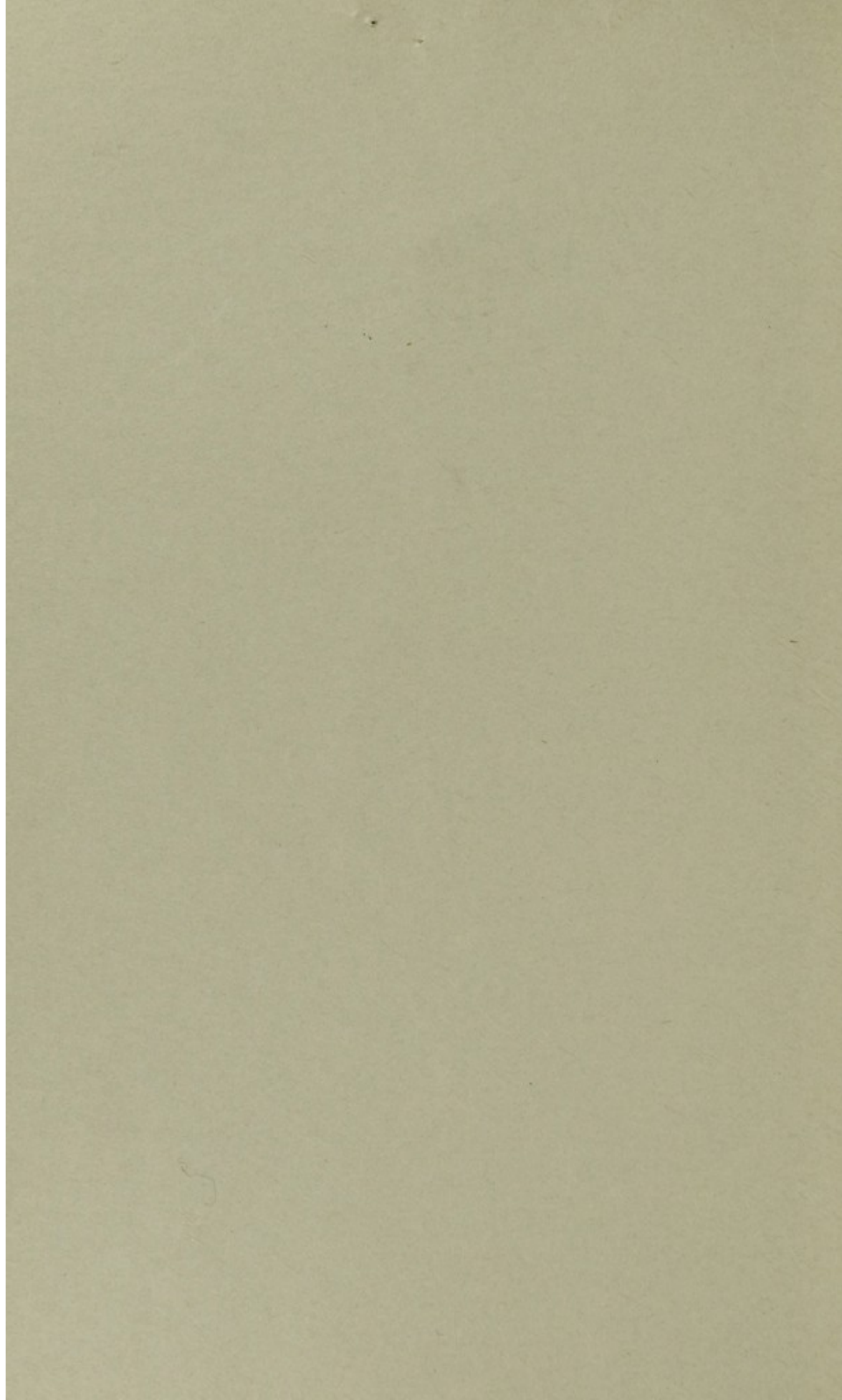
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COUNTY BOROUGH OF BLACKPOOL



Annual Report

OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR

1967

BY

David W. Wauchob

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

MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL OFFICER

COUNTY BOROUGH OF BLACKPOOL HEALTH COMMITTEE

(As constituted 31st December, 1967).

THE WORSHIPFUL THE MAYOR, ALDERMAN L. PILKINGTON, J.P.

Council Members on the nomination of the General Purposes Committee :

Chairman :

Councillor C. NUTTALL, J.P., F.C.A.

Vice-Chairman :

Councillor W. S. LAIDLAW

Councillor R. D. CLEGG

Councillor Mrs. M. HOGGARD

Councillor A. JONES

Councillor Mrs. C. M. KORRIS

Councillor C. LOWE

Alderman Mrs. J. ROBINSON, J.P.

Councillor Mrs. M. SAMUELS

2 Council Members on nomination of Education Committee :

Councillor Mrs. M. RILEY, J.P.

Alderman E. SMITH

2 Non-Corporate Members on nomination of Blackpool and Fylde Division of B.M.A. :

Dr. I. W. H. SCOTT, M.B., Ch.B.

Dr. E. ROGAN, L.R.C.P., S.I.D.P.H.

2 Non-Corporate Members on nomination of Blackpool Executive Committee :

Mr. J. HULMES

Mr. P. VARLEY, M.B.E., M.P.S.

1 Non-Corporate Member on nomination of Local Dental Committee :

Mr. C. TALBOT

2 Non-Corporate Members on nomination of Blackpool and Fylde Hospital Management Committee:

Mr. O. AITKEN

Mr. J. FORD

4 Non-Corporate Members (Women) on nomination of Corporate Members of H.C. :

Miss A. M. HAWORTH, S.R.N., R.S.C.N.

Mrs. E. REVELL

Mrs. L. PARKINSON

Vacancy

RELATED HEALTH SERVICES COMMITTEE

THE WORSHIPFUL THE MAYOR, ALDERMAN L. PILKINGTON, J.P.

Chairman :

Alderman J. WALSH

Vice-Chairman :

Councillor N. W. CROSLAND

Councillor G. E. BAGULEY

Councillor H. W. BARNES

Councillor J. R. H. BATTERSBY

Councillor H. E. COCKERILL

Councillor A. FELTON

Councillor L. GREENWOOD

Councillor Mrs. M. HOGGARD

Councillor H. LAMONT

Councillor W. J. McGINTY

Councillor J. METCALFE

Councillor Mrs. M. J. RILEY, J.P.

Councillor I. J. TAYLOR

PUBLIC HEALTH OFFICERS OF THE LOCAL HEALTH AUTHORITY

(As at 31st December, 1967).

Medical Officer of Health and Principal School Medical Officer :

DAVID W. WAUCHOB, M.B., B.Ch., B.A.O., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :

JAMES CHRISTOPHER TALBOT, M.R.C.S., L.R.C.P., D.P.H., R.C.P.S.

Assistant Deputy Medical Officer of Health :

EDWARD JOHN WALSH, M.R.C.S., L.R.C.P., D.P.H.

Assistant Medical Officers and School Medical Officers :

MARIE-JOYCE RIBCHESTER, L.R.C.P. & S. (Edinburgh), L.R.F.P. & S. (Glasgow)

PHILIP W. LANG, L.R.C.P., L.R.C.S. (Edinburgh), L.R.F.P. & S. (Glasgow), D.P.H.

ANNE E. C. JEWSBURY, M.B., Ch.B., D.R.C.O.G.

JOHN GEOFFREY LEECE, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Principal School Dental Officer :

MARSHALL SMITH, L.D.S., R.C.S. (Eng.)

Consultant Dental Surgeon (Part-time) :

H. ACKERS, M.B., F.D.S., R.C.S.E., R.F.C.S.

Dental Officers :

R. MARTYN, L.D.S. (Liverpool)

H. MARSHALL, L.D.S. (Part-time)

Mrs. J. HOPKINSON, L.D.S. (Manchester) (Part-time)

J. R. HALL, B.D.S., L.D.S. (Manchester) (Part-time)

ADMINISTRATIVE STAFF

Chief Administrative Assistant :

R. PRYAR, A.C.C.S.

Administrative Assistant :

G. H. WHITE

Section Chief Clerk (Clinics) :

H. R. DOWLING

Section Senior Clerks :

J. A. BRIERLEY

Miss M. TOPPING

F. CURWEN

Section Senior Clerk (Clinics) :

Mrs. V. NORMAN

Clerical Assistant :

Miss N. BROWN

Secretary to Medical Officer of Health :

Miss I. WILKINSON

Male Clerks :

P. G. JOHNSON

J. B. REDDINGTON

Female Clerks :

Mrs. M. BETTERIDGE

Miss C. BOARDMAN

Mrs. M. BURGESS

Miss B. M. JACKSON

Mrs. S. HALL

Miss J. SHEARD

Miss J. L. McCARTHY

Mrs. R. KING

Miss E. B. TAYLOR

Mrs. J. EDWARDS

Miss C. FARRELL

Miss S. R. SIBBLAD

Miss A. PRITCHARD

Miss C. C. DIXON

Miss A. BARR

Mrs. K. M. WEIR

Shorthand Typist :

Mrs. A. MOSS

Copy Typist :

Miss K. SPENCER

Telephonist :

Mrs. E. M. REID

HOME NURSING AND MIDWIFERY

Non-Medical Supervisor of Midwives and Superintendent of Home Nursing Services :	Miss G. IRELAND, S.R.N., S.C.M., H.V., Q.I.D.N.
Deputy Superintendent of Home Nursing Services :	Mr. J. H. RENNIE, S.R.N., Q.I.D.N.
Senior Midwife :	Miss M. V. CLEGG, S.C.M., R.S.N., Q.I.D.N.
Midwives :	Miss V. E. AINSWORTH, S.C.M., S.R.N. Miss E. BOULTON, S.C.M., S.E.A.N. Miss I. DUXBURY, S.C.M., S.R.N., Q.I.D.N. Mrs. G. E. HINDLE, S.R.N., S.C.M. Mrs. M. J. KENNEDY, S.R.N., S.C.M. Miss R. E. SCOTT, S.R.N., S.C.M., Q.I.D.N. Mrs. S. M. WRIGHT, S.C.M.
District Nurses :	Mrs. P. E. ADAMS, S.R.N. Miss C. M. ATHERTON, S.E.N. Mrs. D. BENNETT, S.R.N., Q.I.D.N. Mrs. M. E. BLACKWELL, S.R.N. Miss A. V. BRADSHAW, S.R.N. Miss S. A. CLARKSON, S.R.N., R.S.C.N. Mrs. S. E. COOPER, S.R.N., Q.I.D.N. Mrs. E. CROOK, S.R.N., Q.I.D.N. Mrs. J. DALE, S.R.N. Mrs. C. DOBSON, S.R.N., R.F.N., Q.I.D.N. Miss M. DUERDEN, S.R.N., S.C.M. Mrs. H. F. EARNSHAW, S.R.N. Mrs. D. ERRINGTON, S.R.N. Mrs. B. FENTON, S.R.N. Mrs. G. M. HALL, S.R.N., S.C.M., Q.I.D.N. Mrs. J. G. HAY, S.E.N. Miss A. HIGGINBOTTOM, S.R.N. Miss P. A. HODGES, S.R.N., Q.I.D.N. Mrs. M. JONES, S.R.N., Q.I.D.N. Mrs. C. PENSWICK, S.E.N. Mrs. I. M. RIGBY, S.R.N., Q.I.D.N. Mrs. N. ROE, S.R.N., Q.I.D.N. Mrs. L. M. ROBINSON, S.R.N., Q.I.D.N. Miss A. SCOTT, S.R.N., S.C.M., R.F.N. (Part-time) Mrs. D. SHAW, S.R.N., Q.I.D.N. Mrs. B. A. SINCLAIR, S.R.N. Mrs. J. SLACK, S.R.N. Mrs. E. M. SPINETTO, S.R.N. Mrs. J. P. TURNER, S.R.N. Mrs. M. WHITWORTH, S.R.N.
Male District Nurses :	Mr. W. GULLIFORD, S.R.N., Q.I.D.N. Mr. G. HASTY, S.E.N. Mr. G. S. ROLLINSON, S.R.N. Mr. F. WHITTLE, S.R.N.

HEALTH VISITING

Superintendent Health Visitor/School Nurse :	Position vacant
Group Advisers :	Miss A. G. M. HOLDEN, S.R.N., S.C.M., H.V. Miss M. SAUNDERS, S.R.N., S.C.M., H.V., Nursing Admin.(P.H.) Certificate
Health Visitors/School Nurses :	Mrs. A. BEVERLEY, S.R.N., S.C.M., H.V. Mrs. A. BRINING, S.R.N., S.C.M., H.V. Mrs. J. M. BROOKES, S.R.N., H.V. Mrs. D. BURROWS, S.R.N., S.C.M., H.V. Mrs. E. M. BUTLER, S.R.N., S.C.M., H.V. Mrs. DIMOND, S.R.N., S.C.M., H.V. (Part-time) Mrs. J. FITZGERALD-LEE, S.R.N., H.V. Miss C. HARDMAN, S.R.N., S.C.M., H.V. Mrs. M. HARRAP, S.R.N., H.V.

Miss A. R. HICKSON, S.R.N., S.C.M.
 Mrs. M. O. JOHNSTON, S.R.N., S.C.M., H.V.
 (Part-time)
 Mrs. B. MARSDEN, S.R.N., S.C.M., H.V., S.I.
 Miss S. MORRIS, S.R.N., S.C.M., H.V.
 Mrs. S. MIDGELEY, S.R.N., S.C.M., H.V.
 Mrs. O. NEWLOVE, S.R.N., S.C.M., H.V.
 Miss M. F. POWELL, S.R.N., S.C.M., H.V.,
 R.S.C.N.
 Mrs. H. P. PRICE, S.R.N., H.V.
 Mrs. S. ROE, S.R.N., Q.N., H.V.
 Miss M. RYDER, S.R.N., S.C.M., S.R.F.N., H.V.
 Mrs. M. THOMPSON, S.R.N., S.C.M., H.V.
 Miss M. TOOMEY, S.R.N., S.C.M., H.V.

Clinic Nurses :

Mrs. F. CLEWS, S.R.N.
 Mrs. A. DANIA, S.R.N.
 Mrs. M. DAVIES, S.R.N., S.C.M.
 Mrs. LAVELLE, S.R.N.
 Mrs. S. MCGREGOR, S.R.N. (Part-time)

Student Health Visitors :

Mrs. M. McROY, S.R.N., R.F.N., Q.I.D.N.
 Mrs. B. ROYLE, S.R.N.
 Miss K. HICKMAN, S.R.N., S.C.M.

PUBLIC HEALTH INSPECTORS

Chief Public Health Inspector : JOHN PICKARD, M.R.S.H., M.A.P.H.I., (a), (b), (c)
 Deputy Chief Public Health Inspector : A. DANIEL, M.A.P.H.I., (a), (b), (c)
 Chief Meat and Food Inspector : T. W. LOMAX, (a), (b)
 District Public Health Inspectors : F. BAILEY, (a), (b), (c)
 J. BINEHAM, (a)
 E. W. BURROWS, (a), (b)
 H. W. EVANS, (a)
 I. S. MILLER, (a), (b)
 D. W. MOISTER, (a)
 W. MOISTER, (a), (b)
 H. NUNN, (a), (b)
 L. W. ORMROD, M.R.S.H., M.A.P.H.I., (a), (b)
 J. PARKINSON, (a), (b)
 E. SMITH, (a)
 P. J. B. SPENCER, (a)
 Pupil Public Health Inspectors : J. HUNTER
 W. C. N. JELLEY
 A. WALKER
 Pestologist : B. A. BLACKWELL
 Technical Assistants : R. W. CROFT
 J. RICHARDSON
 E. ROTHWELL
 Abattoir Superintendent : W. RILEY, (a), (b)

MENTAL HEALTH SERVICE

Senior Mental Welfare Officer : H. YEOMAN
 Mental Welfare Officers : Miss A. R. ASHTON
 E. BOUND
 J. O'SULLIVAN
 H. T. SPEED
 J. S. WASHINGTON
 Temporary Mental Welfare Officer : Miss N. ROBINSON
 Trainee Mental Welfare Officer : Miss C. BARLING

Junior Training Centre Supervisor :
Assistants :

Mrs. L. C. M. A. PRYAR, Dip. N.A.M.H.
Mrs. P. THOMPSON, Dip. N.A.M.H.
Miss M. E. ASHLEY
Mrs. M. L. N. FORD
Miss C. HEATLEY
Mrs. J. HODGSON
Mrs. R. IRVINE, Dip. N.A.M.H.
Miss S. M. WILDING
J. A. UTTLEY

Handicraft Instructor :
Belmont House (Mental Health Hostel)—
Resident Warden :
Resident Manageress :
Resident Deputy Warden :
Resident Assistant Manageress :
Rydal Lodge (Psycho-Geriatric Hostel)—
Resident Manageress :
Deputy Manageress :

Mr. C. WOOLLEY
Mrs. D. WOOLLEY
Mr. K. HADFIELD
Mrs. M. CHADWICK

Mrs. M. DAVIDSON
Miss J. WHITESIDE

HOME HELP SERVICE

Supervisor :
Assistant Supervisors :

Mrs. I. PARTINGTON
Miss B. WADE
Mrs. I. LEA

LIGHT TREATMENT

Physiotherapists :

Mrs. W. SHORE, M.C.S.P. (Part-time)
Mrs. L. TAYLOR, M.C.S.P.
Mrs. M. WARD, M.C.S.P.

CHIROPODY

Chiropodists :

Mr. T. CATTON, M.Ch.S.
Mrs. S. M. HOLMES, M.F.S.Ch., A.Ch., M.E.S.Ch.
(Part-time)
Mr. R. CROOK, M.Ch.S. (Part-time)
Miss M. J. HYDE, S.R.N., S.C.M., Q.I.D.N.,
M.F.S.Ch. (Part-time)
Mr. E. THOMPSON, M.Ch.S. (Part-time)

DAY NURSERY

Matron :
Deputy Matron :
Nursery Assistants :

Mrs. N. K. OLIVER, N.N.E.B.
Mrs. A. P. NORTON, N.W.E.B.
Miss D. SCOTT
Miss M. E. FOSTER

AMBULANCE SERVICE

Ambulance Officer :

Mr. F. DIXON

DENTAL SERVICE

Dental Attendants :

Miss C. BANKS
Mrs. M. V. SNOW-MILLER
Mrs. W. WOOD
Mrs. B. JOHNSON (Part-time)

PUBLIC ANALYST

Public Analyst :
Deputy Public Analyst :

Mr. J. G. SHERRATT, B.Sc., F.R.I.C.
Mr. R. SINAR, B.Pharm., B.Sc., F.P.S., F.R.I.C.

- (a) Cert. of R.S.H. and Public Health Inspectors Education Board.
- (b) Cert. of R.S.H. for Inspection of Meat and Other Foods.
- (c) Cert. of R.S.H. for Smoke Inspection.
- (d) Cert. of Sanitary Science.

To the Chairman and Members of the Health and
Related Health Services Committees.

Ladies and Gentlemen,

This Annual Report is being written at a time when change is anticipated. Centres of towns are being re-developed, local government is being scrutinised with the object of re-planning and at central government level, a Minister has been appointed to co-ordinate the health and social security departments.

Reports have been made by the Maud and Mallaby Committees, and a Report of the Seebohm Committee has been promised. The Royal Commission on Medical Education has published its findings ; the Royal Commission on Local Government is still awaited ; the Ministry of Health is producing a "green paper" as a basis for discussion and the British Medical Association is also preparing its own plan. All this is taking place against a background of recurring economic crises.

In its first full year, the bill for the National Health Service amounted to some £470 million, some ten years later the figure was £760 million, and this year the budget amounts to £1,434 million. This alone is sufficient reason to warrant a fresh look at the entire organisation, which prompts a look at the expenditure of the Local Authority compared with other areas.

Whilst the Health Department is now having a higher expenditure than ever before, it is a fact that the gap between Blackpool and the average County Borough remains largely unaltered. Figures taken from the Institute of Municipal Treasurers Return show that the net expenditure per 1,000 population met from rates, general and deficiency grants has risen by £1,014 since 1960, whilst the average County Borough expenditure has increased by £993 in the same period.

The Rate Equivalent based on an actual 1d. rate product shows Blackpool as seventy-sixth of eighty-two county boroughs with a figure of 9.44d. compared with an average for all county boroughs of 14.01d.

In the financial year 1966/67 the expenditure on local authority health services per 1,000 of the population varied in county boroughs of England and Wales from £1,639 in Solihull, Northampton £1,737, Darlington £1,769, to £3,216 in Blackburn, £3,221 in Oldham, £3,420 in Salford and £3,457 in Newcastle-upon-Tyne.

The average expenditure for eighty-two county boroughs was £2,408 and for Blackpool was £2,058. On individual items Blackpool's expenditure was above the average on Home Nursing, Ambulances and Residential Accommodation for Adults under the Mental Health Act.

It will be seen later in this report that locally there is an infant mortality consistently above average, an illegitimacy rate well above average and increasing population with a proportion of aged (with their attendant disability and sickness) that is considerably greater than the rest of the country.

In addition, it is necessary to make provision for eight million visitors each year, many of whom bring their own problems.

When this is carried on with an establishment which seldom reaches that of the average county borough, it imposes considerable extra burdens on an existing heavy work load. The local authority health services are those on which the lives of people depend and are essential basic commodities, that cannot be regarded as luxuries or frills. They are as much a part of the National Health Service as hospitals, and one

is dependent for its success upon the success of the other. Any retrenchment affects not only the local authority services but also hobbles the hospital and general practitioner services. This raises the question as to whether the entire Health Service should not be financed by the Exchequer, especially if heavy demands for health centres are to be met in the future.

Patients and their relatives would have little regard for a family doctor who would accept with equanimity the lack of treatment locally which was generally available elsewhere. Similarly, a progressive minded council who have a special responsibility and legal obligation for sections of the community, would wish to have brought to their notice the shortcomings of some services and the complete lack of others.

It is worth recalling that the following schemes have been achieved during the past ten years :

Capital Projects :

Belmont House	...	Hostel for the Young Mentally Infirm.
Junior Training Centre and Special Care Unit	}	School for the Mentally Handicapped Child.
Rydal Lodge	... ..	Hostel for the Aged Mentally Infirm.
Abbey Road Clinic	...	Combined School and M. & C.W. Clinic.
Adult Training Centre		Training Centre for Mentally Handicapped Adults.

Services :

Chiropody Service.

Laundry Service.

However, from the Ten Year Programme which the Local Authority hoped to see achieved, there have been the following omissions and deferments :

Projects :

Replacement Hostel for Belmont House.

Day Nursery—(replacement).

Clinic—Haddle House.

Staff :

The employment of additional Health Visitors and District Nurses had been deferred.

The previous periods of economic difficulties in our history have shown that it is the handicapped who are first to suffer during periods of unemployment. It is important that at present the same category should not be the first to suffer from lack of facilities and services.

It will be clear from the amount of disability or incapacity, and the situations in which they are placed, that they are in need of care and support which increases each year. This is not something which is a matter of opinion, to be dealt with according to availability of services or convenience. Similarly, the responsibility for support in the face of established need does not disappear with arbitrary claims that "nothing can be done", especially if these services are available elsewhere.

If better management cannot be offered to those who need help, then many who cannot speak for themselves are forced to a tacit acceptance of the situation, of acquiescence in distress with all its misery. Soon there follows behind a scrambled mess on all sides of guilt, resentment, hostility and conspiracy.

It is almost impossible to establish a good relationship once rejection and breakdown have occurred ; these situations require to be handled by creating an atmosphere of support and understanding before demoralisation and lack of sense of purpose render the position almost hopeless.

The only offence these people have committed is being where they are, not wanted, and it is ourselves, who do not want them, that make them what they become—demoralised, demanding, bored and bedfast.

The custodial care of the past and quality of services, which vary with the nature of the handicap, will not solve the problems of today. What will be required is support which is minimal and compatible with the maximum degree of personal independence and fulfilment. Consequent on this it is hoped that there will be less disability, which ought to be the object we should be trying to achieve.

The issues facing us are to find practical ways of living for many people—some not very well equipped to live effective and fulfilling lives, as independently as possible. This has never had to be done before to the extent now demanded of us.

It is to be hoped that the period of indecision before action can be taken on the many reports referred to previously will not cause delay in the provision of services which are urgently required.

Vital Statistics

The Registrar General's mid-year estimate of population shows an increase of 210 over 1966, the figure now stated to be 151,510. It will be seen that again the increase in the population has been due to an inward migration which has more than compensated for the natural fall due to the number of deaths exceeding births by 668.

A total of 2,614 deaths were registered which is one less than the previous year. The causes of death remain largely similar to former years with the largest recorded cause being diseases of the heart, numbering 1,080. Death from coronary heart disease showed reductions in 1965 and 1966, but 1967 with a total of 614 deaths showed an increase of forty-four deaths over the previous year. The new break-through in heart surgery and the generous gift of a cardiac investigation unit at the Victoria Hospital in the coming year are evidence of the concern felt about these deaths, and the desire to reverse a trend of increasing numbers.

The illegitimacy rate of 13·52 shows a slight reduction on the previous year but as the figure keeps rising nationally it is unlikely that this welcome reversal of a trend of almost ten years will be maintained, especially when at least half the cases come into the area for their confinement. The efforts of a voluntary group of a church organisation to establish a home for unsupported mothers will provide a useful additional facility for this growing problem which arouses a greater share of attention each year.

Infant Mortality

The infant mortality rate of 25 per 1,000 live births is recorded as a result of an increase to forty-nine in deaths of children under one year. The rate compares very unfavourably with the national figure, 18·3. These figures require some comment and cannot be regarded with complacency. It will be appreciated that it would be unwise to draw too great a significance from the figures for one year, and it could be said that the figures for 1967 have only returned to a more normal figure for the year than the previous year's low figure. Blackpool has been consistently above the national average and this year the difference is even more marked, with no evidence that the figures are catching up with the rest of the country. Therefore there are posed a number of questions. Investigation has shown that the vast majority are sudden

deaths in which it was impossible to summon medical aid, but why these should be higher in Blackpool than the surrounding area is not clear. Slum dwellings do not present a problem and in a recent report on housing the area was shown to have a high percentage of houses with basic amenities. That there will be discrepancies can be understood but it is clear that as a whole the housing in the area is much better than areas which have a better record for infant mortality.

One factor which may be significant is that the town has a high percentage of floating population but most of these would give a local address. It seems that these mobile families may comprise a large component of the cases involved and it is proposed to carry out an investigation to determine how long they have resided here, and the area from which they came.

Stillbirths which last year had reached a record low show an increase of 20 to reach a total of 44, giving a rate of 22 per 1,000 live births as against the national figure of 14.8.

Because of this the perinatal death rate (stillbirths and those in the first week) shows a considerable increase from 25.71 in 1966 to 38.19 in 1967, the average for the country being 25.4.

Child Health Service

The old title of Child Welfare was stated by the Sheldon Committee to be inappropriate to present work of the clinics.

Some reduction in the numbers of children attending child welfare clinics was evident during the year, largely as a result of some groups of four doctors arranging their own child welfare clinics with the attachment of health visitors. The work is preventive rather than curative and the numbers still attending clinics amply justify the special session reserved for this work.

During the year preliminary work was begun in alterations to the speech therapists' rooms for use as an audiology clinic for the ascertainment of hearing defects in children who have been screened by the Health Visitors, including those referred from the "at risk" register.

This work which is carried out in the school clinic also includes those under two years and demonstrates the close association between the School Health Service and the Child Health Service, which saves administrative time and prevents duplication of services and premises.

The number of mothers discharged early from hospital has continued at a high level and has now become a recognised feature of modern midwifery, and must shortly lead to a re-organisation of the midwifery service with midwives working in the hospital as well as on the district. This would require control by one authority.

Maternal Mortality

There were no deaths from maternal complications. Only one death in the last six years indicates a high standard of care on the part of family doctors, Hospital and Domiciliary Staff.

Health Visitors

The demands from general practitioners for the attachment of health visitors continues to grow, as appreciation of their work is now more evident. Due to shortage of staff it has not been possible to develop this attachment to the extent desired by

some groups of doctors who would need more than one health visitor to cover the patients in their group.

Unless recruitment can be stimulated there will be serious shortage in the next five years. At present 10 of the staff are over 50 and two are over 60. Liaison with schools, hospitals and other social workers was maintained at a reasonable level but more time is needed to develop this work to the full benefit of the community.

Home Nursing

One obvious way to improve the cost effectiveness of the hospital service is to increase the through-put of patients. Already the Victoria Hospital has a leading position in making maximum use of available beds and this has been contributed to by close association with the domiciliary services. Many consultants now recognise the need for the social position of the family to be ascertained before admission in all cases and not just the planned early discharge case. In many instances the district nurse could assist and there is scope for experiment to see if hospital stay could not be further minimised by closer linkage with community service.

Total visits increased by 13,000 to 120,000 during the year. This has been partly due to "Day Theatre" cases from the hospital who return home for nursing after minor surgical operation.

Home Helps

The health visitor, home nurse and home help together form a thorough and specialised home care programme. Although much of the work is taken up with the care of the elderly and chronic sick the availability of a home help could make an important contribution toward earlier return home from hospital. In addition admission to hospital for the mother can be facilitated by the home help looking after the children and home until the mother returns.

Ambulance Service

An increasing variety of treatment is provided at hospital outpatients' for both major and minor ailments, in addition to increases in the elderly in the population. For these reasons it is likely that the demands on the ambulance service will continue to increase.

The provision of more appropriate vehicles for the growing proportion of outpatients will require further attention to ensure that the service adapts to the demands of changing needs and technical progress.

Pioneer work is now being done with mobile intensive care units, mainly adapted ambulances, which take specialist skill and equipment to the patient thereby saving time and ensuring that the patient is in a fit condition to be moved before transfer to hospital. Early results appear promising and this technique in addition to transplant surgery may require the provision of specially equipped and staffed ambulances for the resuscitation of patients outside hospital.

Infectious Disease

No serious diseases occurred during the year. Only 438 cases of measles were reported this year but the usual epidemic can be anticipated the following year. If a successful vaccination programme can be developed then most of the childhood illnesses of the past will have been controlled. These programmes will need to be conscientiously carried out as the postponement of these conditions until later life could have serious consequences thereby outweighing the advantages now being gained.

Vaccination and Immunisation

Immunisation using triple vaccine (against diphtheria, whooping cough and tetanus) was introduced in 1957. Most of the children now entering school have already been immunised against tetanus and consequently a reduction in the number of primary immunisations against this disease has been recorded.

The absence of serious infectious disease is reflected in the decreased number of children vaccinated against poliomyelitis. Parents must realise that this false security can only lead to a recurrence of the conditions if protection is not kept to a high level.

Day Nurseries and Play Groups

In the body of the report will be found an account of the present demands and pressure for day nursery care. This important social service cannot be adequately carried out in the existing premises and it is hoped that provision will soon be made for a new nursery.

The growing demand for this service is shown by the increase in daily child minders from 16 to 27 and one additional private day nursery was opened during the year.

Play Groups

The growth and expansion of this activity is such that all available space is being fully utilised. There can be no doubt that this movement is fulfilling an essential need. It is imperative that advice and guidance is available to ensure that suitable premises and care are provided for the children, but this should be minimal so that parents have the opportunity of making their own arrangements for what is a social activity.

Family Planning

Another rapidly growing service which is as much part of the health service as the provision of glasses or dentures. There is considerable scope for education in family planning, which should be included in the authority health education programme. At present when staff and resources are restricted it would seem wise to use the mass media of radio and television to explain this all important but little understood subject. The Local Authority are to be commended for having taken such an enlightened view of this subject and for having made available premises and funds which allows a service with a high degree of professionalism to be made available by the Family Planning Association.

Cervical Cytology

This service has continued, and although the numbers seen doubled on the previous year to 966 cases, of which eight were positive, it is still true that too few women are having cytology done. After the initial surge of requests the demand has now dropped and requires bringing to the notice of the public to maintain interest.

Mental Health

The Adult Training Centre was commenced during the year after many delays and postponements. The project promises to provide one of the best centres in the country and it is hoped that this will produce results to equal those seen after the introduction of the Junior Training Centre.

The services for the mentally subnormal are still incomplete as the only residential accommodation is that provided by Belmont House which is suitable for a limited number of patients. A family group home for those requiring a family background and flatlets for those who have become more independent are urgently required.

The problem is growing for two reasons ; because of medical advances and better social care, the subnormal now have a greater expectation of life than formerly and the duration of care has to be extended.

At the same time new housing patterns, smaller families, and greater mobility to find employment, with the resultant splitting up of families, complicates life for the subnormal and their families.

The provision of emergency admission beds for the mentally ill is now receiving attention and it is hoped that these and the staff to supervise them will soon be available.

Environmental Health

Environmental Health occupies a place that is both pivotal and complementary to all other considerations affecting health and welfare.

Clean food, clean water and clean air and a fit house to live in, these and many other aspects of the physical environment have a profound effect on our future, and still occupy a considerable amount of time of the public health inspector.

Clean water has been in plentiful supply in this area and the additional water from bore-holes now ensures a steady supply into the foreseeable future.

Clean food is essential in this resort and the building of the new abattoir which is reaching completion will provide a useful amenity for the supply of fresh home-killed meat.

Clean air has had no official action in declaring zones but an increasing number of people are now using smokeless fuels in their homes and a reduction in atmospheric pollution has been recorded at all three sites.

During the year action was taken to obtain a Clearance Order for the Larkhill area. Many of the houses in this area were approaching 100 years old and had been rapidly deteriorating. A large number of the houses in other areas are approaching the same age and urgent action will need to be taken if the lives of these properties are to be prolonged. The establishment of improvement areas could prove useful here.

Acknowledgement

I should like to express my thanks to all the members of the staff whose work has contributed to the report, and to commend them for the devotion and loyalty in an inevitably changing world. This is a record of their ability to make a progressive improvement in the quality of the services entrusted to us.

I am grateful for the support and encouragement from the Chairman and Members of the Health and Related Health Committees.

I welcome this opportunity to express my appreciation of the assistance given by the other departments of the Local Authority, the Hospitals and family doctors. Particularly I am happy to acknowledge the work done by the many voluntary organisations in the town. They are too numerous to mention individually but they all have one thing in common. Taken together, they are trying to build a better, more civilised, more humane and tolerant society.

Municipal Health Centre,
Whitegate Drive,
Blackpool.
Telephone No. Blackpool 63232.

D. W. WAUCHOB,
Medical Officer of Health.

GENERAL AND VITAL STATISTICS AND SOCIAL CONDITIONS IN THE BOROUGH

GENERAL STATISTICS

Area (exclusive of foreshore)	...	...	...	...	...	8,650 acres
Area of Foreshore and Tidal Water	...	...	...	...	...	2,076 acres
Population (Registrar General's estimate mid-year 1967)	...	...	...	...	...	151,510
Population (Census 1961)	...	...	...	...	...	153,185
Number of inhabited houses	...	...	...	...	...	54,533
Number of empty houses	...	...	...	...	...	730
Rateable Value of the Borough	...	...	...	...	...	£8,288,667
Product of a Penny Rate	...	...	...	...	...	£33,130

SOCIAL CONDITIONS IN THE BOROUGH

The Area Comparability Factors for births and deaths are 1·2 and 0·78, the same as last year, thus signifying the Borough as a retirement resort.

The figures below, kindly furnished by the Manager of the Labour Exchange, show the employment position with regard to the Borough.

	Men	Women	Boys	Girls	Total
Unemployed					
June, 1967	1,280	446	27	15	1,760
December, 1967	2,294	810	32	24	3,160
Registered Disabled					
at April, 1967	2,090	496	7	3	2,596
Unemployed Disabled					
suitable for ordinary employment,					
June, 1967	119	38	2	—	159
December, 1967	246	60	1	1	308
Unemployed					
suitable for sheltered employment,					
June, 1967	17	—	—	—	17
December, 1967	27	1	—	—	28

Trade and Industry—The employment position in the Borough has changed little during the past year, with the seasonal nature of the town being fairly reflected in the figures quoted above.

VITAL STATISTICS

						1967		
						Male	Female	Total
Live Births :	Legitimate	...	...	...	...	892	791	1,683
	Illegitimate	...	...	...	...	148	115	263
	Birth Rate (Crude) per 1,000 pop.	...				12.84		
	Birth Rate (Standardised) per 1,000 pop.	...				15.41		
Stillbirths :	Legitimate	...	...	...	...	18	20	38
	Illegitimate	...	...	...	...	4	2	6
	Rate per 1,000 births (live and still)	...				22		
	Rate per 1,000 population	...	...	...		0.28		
	Total live and still births	...	...	...		1,062	928	1,990
Infant Deaths	...	...	...	...	...	31	18	49
Infant mortality rate per 1,000 livebirths—total	...	...				25.19		
Infant mortality per 1,000 live births—legitimate	...					23.17		
Infant mortality rate per 1,000 live births—illegitimate	...					26.3		
Neo-natal mortality rate per 1,000 live births	...	...				16.44		
Early neo-natal mortality rate (deaths under one week per 1,000 total live births)	...	...	...	...	...	16.44		
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)	...					38.19		
Maternal deaths (including abortion)	...	...	...			NIL		
Maternal mortality rate per 1,000 live and still births	...					NIL		
Illegitimate live births per cent. of total live births	...					13.52		

BIRTHS

The number of live births resident in Blackpool during 1967 was 1,946—an increase of one on 1966. The crude birth rate is 12.84 per 1,000 population and the adjusted birth rate is 15.41 as compared with 12.85 and 15.42 in 1966. The rate for England and Wales with which the adjusted rate should be compared is 17.2.

Illegitimate Births. 263 such births were registered during the year, six less than in 1966, resulting in a rate of 1.7 per 1,000 population. These registrations amount to 13.52 of the total live births.

Stillbirths. 44 stillbirths were registered in 1967—20 more than in 1966—giving a rate of 22 per 1,000 total births as against 12.19 in 1966. The rate for England and Wales is 14.8.

RECENT POPULATION CHANGES IN THE BOROUGH

According to the Registrar General's estimated figure for mid-1967, an increase of 210 is recorded. Deaths again exceed births, this year by 668, migration of 878 persons into the borough thus accounting for the change.

The figures below outline the trend of population, births and deaths from the year 1956 to the present year.

Year	Midyear Population Registrar General's Estimated Figure	Population change during year	Change in Population due to births and deaths only during year	Change in Population due to migration
1956	146,500	- 700	- 687	- 13
1957	145,600	- 900	- 629	- 271
1958	144,500	-1,100	- 743	- 357
1959	143,600	- 900	- 657	- 243
1960	143,530	- 70	- 556	+ 486
1961	150,000	+6,470	- 702	+7,172*
1962	151,250	+1,250	- 671	+1,921
1963	151,000	- 250	- 498	+ 248
1964	150,030	- 970	- 552	- 418
1965	150,440	+ 410	- 631	+1,041
1966	151,300	+ 860	- 670	+1,530
1967	151,510	+ 210	- 668	+ 878

Note : The 1961 Census Figure was 153,185.

*Steep increase due to rise in the estimated population based on preliminary 1961 census figure.

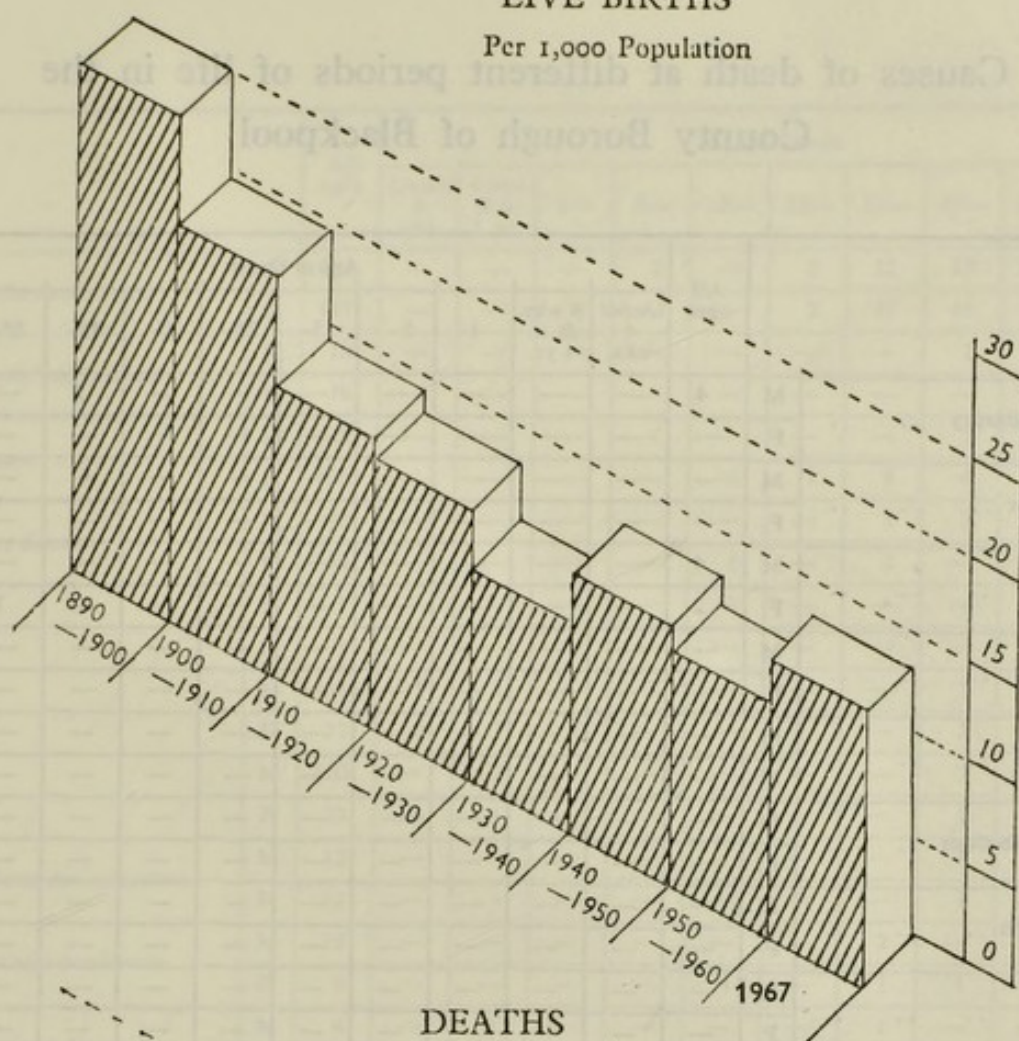
DEATHS								Male	Female	Total
Deaths	...	...	...	...	...	...	...	1,299	1,315	2,614
Death Rate (Crude) per 1,000 population	...	...	...	...	...	...	...	17.26		
Death Rate (Standardised) per 1,000 population	...	...	...	...	...	...	...	13.46		
Death Rate for England and Wales	...	...	...	...	...	...	...	11.2		

The percentages of deaths in various age groups with corresponding figures for previous years are shown below :—

AGE	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Under 12 months	2.1	2.0	2.06	1.78	1.67	2.05	1.79	2.07	1.75	1.87	2.54	1.83	1.69	1.76	1.88
1 year and under 5 years	.4	.3	.30	.34	.13	.16	.29	.21	.43	.15	.12	.38	.46	.23	.27
5 years and under 15 years	.3	.3	.05	.37	.34	.29	.17	.12	.17	.22	.27	.23	.08	.08	.23
15 yrs. and under 65 years	29.1	28.4	27.13	26.82	27.64	26.49	25.58	25.94	25.69	24.54	23.58	25.08	25.16	24.93	23.91
65 years and over										31.03	30.65	30.95	31.77	28.45	30.38
75 years and over										31.07	31.32	32.83	31.31	32.35	32.94
85 years and over										11.12	11.52	8.70	9.53	12.20	10.39

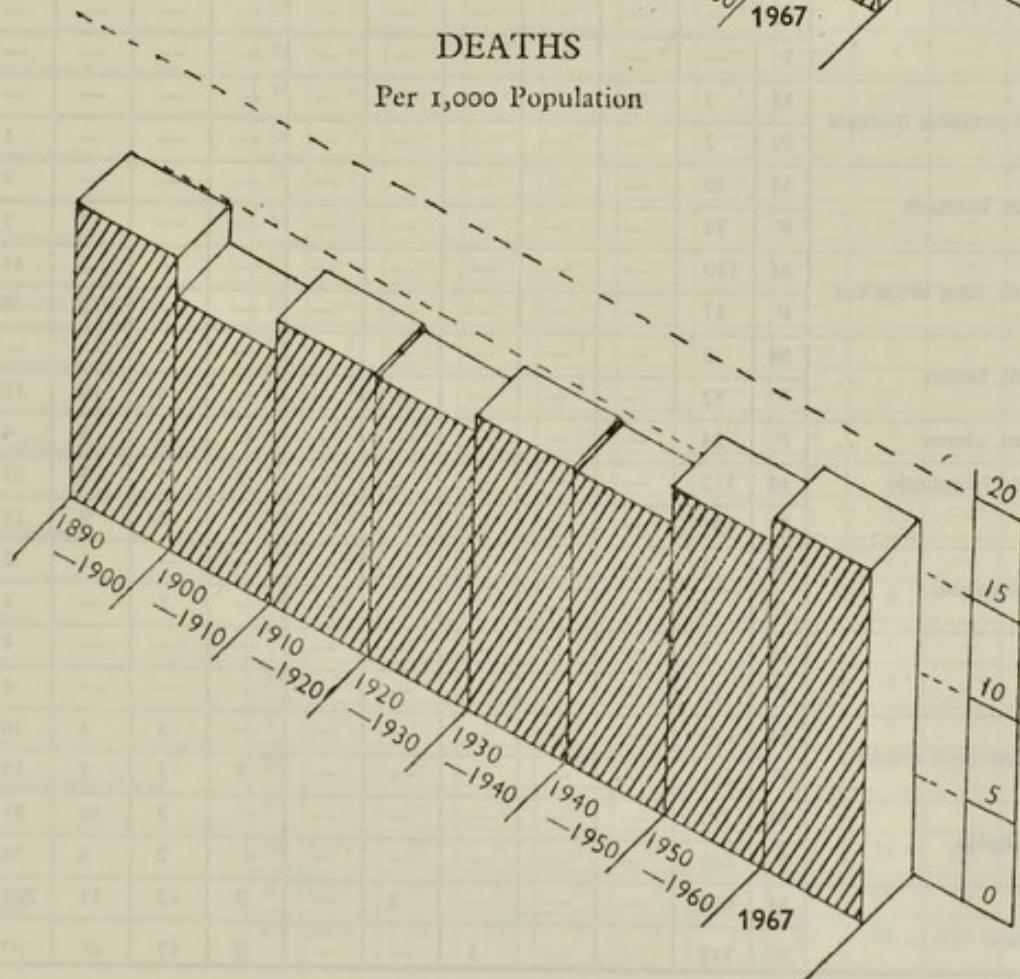
LIVE BIRTHS

Per 1,000 Population



DEATHS

Per 1,000 Population

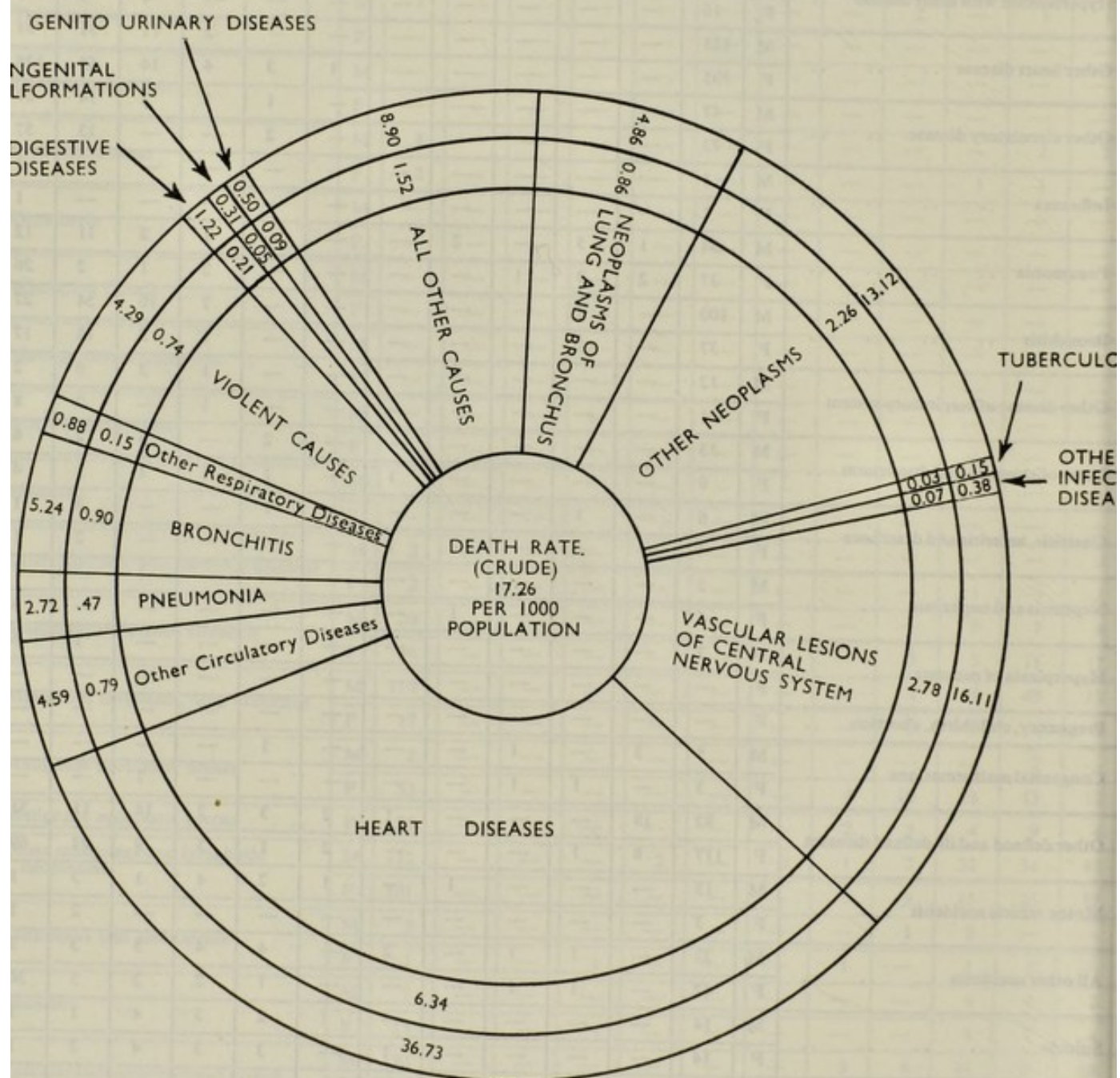


Causes of death at different periods of life in the County Borough of Blackpool

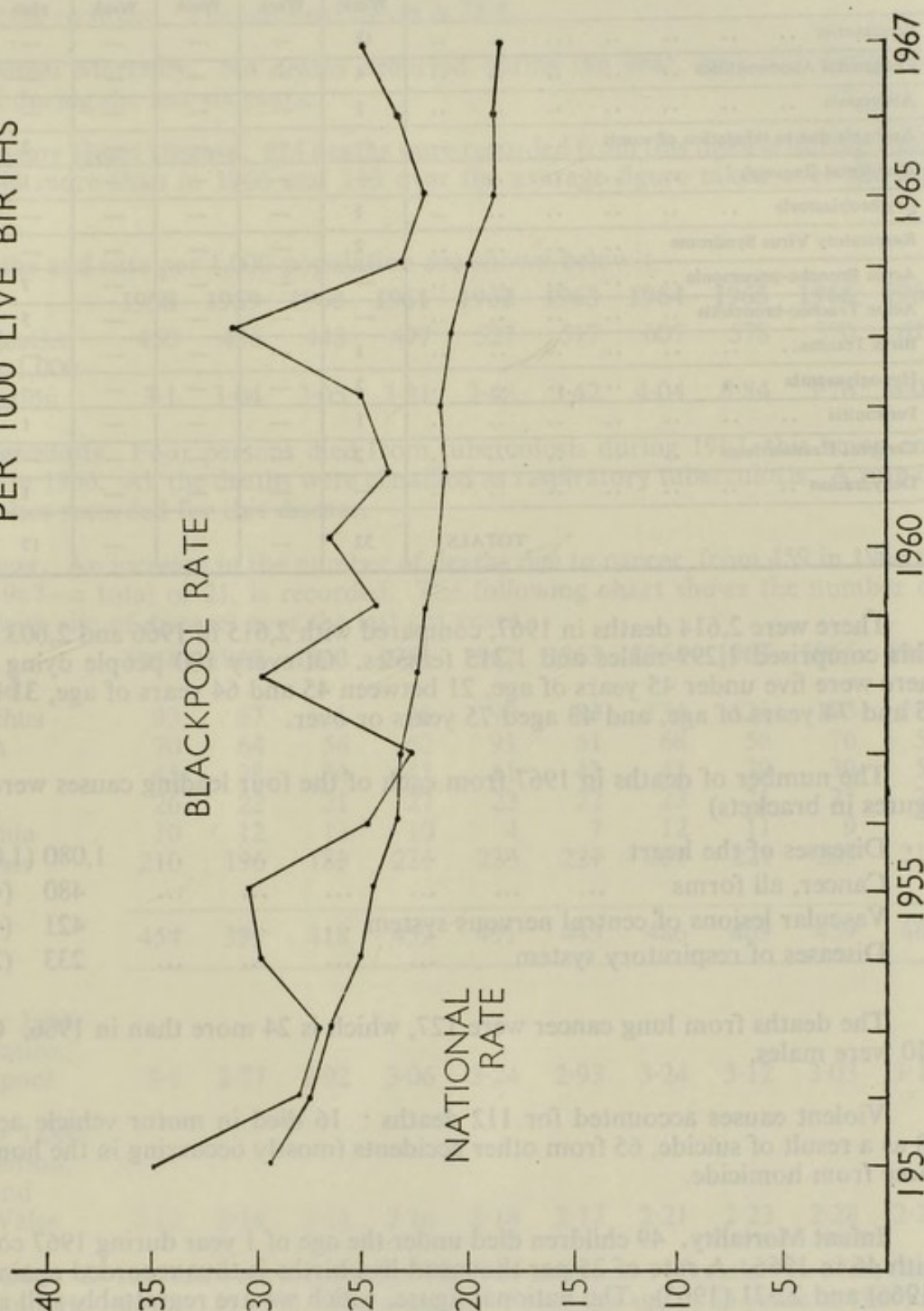
		All ages	Age at Death										
			Under 4 wks.	4 wks. & u. 1 yr.	1-	5-	15-	25-	35-	45-	55-	65-	75-
Tuberculosis, respiritory	M	4	—	—	—	—	—	—	—	2	—	1	1
	F	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis, other	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Syphilitic disease	M	4	—	—	—	—	—	—	—	—	—	2	2
	F	2	—	—	—	—	—	—	—	—	1	1	—
Diphtheria	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Measles	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Other infective and parasitic diseases	M	2	—	—	—	—	—	—	—	—	—	—	2
	F	2	—	—	—	—	—	—	—	—	1	—	1
Malignant neoplasm, stomach ..	M	20	—	—	—	—	—	—	—	—	9	7	4
	F	34	—	—	—	—	—	—	—	3	3	11	17
Malignant neoplasm, lung bronchus	M	110	—	—	—	—	—	—	—	5	44	49	12
	F	17	—	—	—	—	—	—	—	3	6	4	4
Malignant neoplasm, breast ..	M	2	—	—	—	—	—	—	—	—	—	2	—
	F	52	—	—	—	—	—	—	4	10	13	13	12
Malignant neoplasm, uterus ..	F	24	—	—	—	—	—	—	2	5	4	9	4
Other malignant and lymphatic neoplasms	M	112	—	—	—	2	—	3	1	7	23	34	42
	F	101	—	—	—	—	—	—	5	9	15	35	37
Leukaemia and aleukaemia ..	M	3	—	—	—	—	—	—	—	1	2	—	—
	F	5	—	—	1	—	—	—	1	—	1	2	—
Diabetes	M	7	—	—	—	—	—	—	—	—	4	1	2
	F	15	—	—	—	—	—	—	—	—	4	7	4
Vascular lesions of nervous system ..	M	170	—	—	—	—	—	—	3	4	36	59	68
	F	251	—	—	—	—	—	2	3	5	13	73	155
Coronary disease, angina	M	370	—	—	—	—	—	—	8	36	91	140	95
	F	244	—	—	—	—	—	—	2	6	36	85	115
<i>Carried forward</i>	M	804	—	—	—	2	—	3	12	55	209	295	228
	F	747	—	—	1	—	—	2	17	41	97	340	349

		All ages	Age at Death										
			Under 4 wks.	4 wks. & u. 1 yr.	1—	5—	15—	25—	35—	45—	55—	65—	75—
<i>Brought forward</i>	M	804	—	—	—	2	—	3	12	55	209	240	349
	F	747	—	—	1	—	—	2	17	41	97	—	—
Hypertension with heart disease ..	M	10	—	—	—	—	—	—	—	1	3	3	3
	F	16	—	—	—	—	—	—	—	—	4	5	7
Other heart disease	M	125	—	—	—	—	—	—	—	2	11	31	81
	F	195	—	—	—	—	—	1	3	4	14	45	128
Other circulatory disease	M	47	—	—	—	—	—	—	1	3	2	14	27
	F	73	—	—	—	—	1	—	2	—	—	13	57
Influenza	M	1	—	—	—	—	—	—	—	—	—	—	1
	F	1	—	—	—	—	—	—	—	—	—	—	1
Pneumonia	M	34	1	5	—	2	—	—	—	1	2	11	12
	F	37	2	3	1	—	—	—	—	2	1	2	26
Bronchitis	M	100	—	2	—	—	—	—	—	7	10	54	27
	F	37	—	1	—	—	—	—	—	1	5	13	17
Other disease of respiratory system	M	12	—	—	—	—	—	—	—	1	3	6	2
	F	11	—	—	—	—	—	—	—	1	—	2	8
Ulcer of stomach and duodenum ..	M	13	—	—	—	—	—	—	2	—	3	2	6
	F	9	—	—	—	—	1	—	1	1	1	1	4
Gastritis, enteritis and diarrhoea ..	M	6	—	1	—	—	—	—	1	—	—	3	1
	F	4	—	—	—	—	1	—	—	—	—	2	1
Nephritis and nephrosis	M	2	—	—	—	—	—	—	—	—	1	—	1
	F	4	—	—	—	1	—	—	—	—	—	—	3
Hyperplasia of prostate	M	7	—	—	—	—	—	—	—	—	—	1	6
	F	—	—	—	—	—	—	—	—	—	—	—	—
Pregnancy, childbirth, abortion ..	F	—	—	—	—	—	—	—	—	—	—	—	—
Congenital malformations	M	5	3	—	1	—	—	—	1	—	—	—	—
	F	3	—	1	1	—	—	—	—	—	1	—	—
Other defined and ill-defined diseases	M	82	18	—	—	—	1	2	3	2	14	11	31
	F	117	8	1	—	—	—	2	1	3	9	24	69
Motor vehicle accidents	M	13	—	—	—	1	—	1	2	4	1	3	1
	F	3	—	—	—	—	—	—	—	—	—	2	1
All other accidents	M	23	—	1	1	—	2	—	4	4	5	3	3
	F	42	—	1	1	—	—	—	1	2	2	5	30
Suicide	M	14	—	—	—	—	—	1	2	5	4	1	1
	F	14	—	—	—	—	1	—	3	3	4	2	1
Homicide and operations of war ..	M	1	—	—	1	—	—	—	—	—	—	—	—
	F	2	—	1	—	—	—	—	—	1	—	—	—
ALL CAUSES	M	1299	22	9	3	5	3	7	28	85	268	438	431
	F	1315	10	8	4	1	4	5	28	59	138	356	702
	All	2614	32	17	7	6	7	12	56	144	406	794	1133

Deaths from Principal Causes
Rate per 1,000 Population
and
Percentage of Total Deaths (Outer Circle)



INFANT MORTALITY RATES PER 1000 LIVE BIRTHS



INFANTILE DEATHS

Cause of Death	Died in					Total
	1st Week	2nd Week	3rd Week	4th Week	4 weeks plus	
Prematurity	18	—	—	—	—	18
Congenital Abnormalities	4	—	—	—	—	4
Atelectasis	1	—	—	—	—	1
Asphyxia due to inhalation of vomit	—	—	—	—	2	2
Accidental (Inquest)	—	—	—	—	1	1
Erythroblastosis	1	—	—	—	—	1
Respiratory Virus Syndrome	2	—	—	—	—	2
Acute Broncho-pneumonia	—	—	—	—	7	7
Acute Tracheo-bronchitis	—	—	—	—	5	5
Birth Trauma	1	—	—	—	—	1
Hypoglycaemia	2	—	—	—	—	2
Peritonitis	1	—	—	—	1	2
Cerebral Haemorrhage	2	—	—	—	—	2
Dehydration	—	—	—	—	1	1
TOTALS	32	—	—	—	17	49

There were 2,614 deaths in 1967, compared with 2,615 in 1966 and 2,603 in 1965. This comprised 1,299 males and 1,315 females. Of every 100 people dying in 1967 there were five under 45 years of age, 21 between 45 and 64 years of age, 31 between 65 and 74 years of age, and 43 aged 75 years or over.

The number of deaths in 1967 from each of the four leading causes were: (1966 figures in brackets)

Diseases of the heart	1,080 (1,052)
Cancer, all forms	480 (459)
Vascular lesions of central nervous system	421 (417)
Diseases of respiratory system	233 (247)

The deaths from lung cancer were 127, which is 24 more than in 1966. Of these 110 were males.

Violent causes accounted for 112 deaths : 16 died in motor vehicle accidents, 28 as a result of suicide, 65 from other accidents (mostly occurring in the home), and three from homicide.

Infant Mortality. 49 children died under the age of 1 year during 1967 compared with 46 in 1966. A rate of 25 per thousand live births is thus recorded against 23.65 (1966) and 22.31 (1965). The national figure, which we are regrettably still above, is now 18.3.

Neo-natal Mortality. There were 32 deaths during the first month of life, all these deaths occurring during the first week. This compares with the 1966 figures when 34 deaths occurred, 26 during the first week. The rates per thousand live births for both neo-natal and early neo-natal mortality are thus 16.44. For comparison, the

national figures are 12.5 and 10.8.

Peri-natal Mortality. The peri-natal mortality rate (stillbirths and deaths under one week combined per thousand total live and stillbirths) shows a considerable increase to 38.19 from 25.707, in 1966, this being due to an increase of 20 in the number of stillbirths recorded. The national figure is 25.4.

Maternal Mortality. No deaths occurred during the year, only one death has occurred during the last six years.

Coronary Heart Disease. 614 deaths were recorded from this disease during 1967, that is, 44 more than in 1966 and 113 over the average figure taken over the last 10 years.

Deaths and rate per 1,000 population are shown below :

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
No. of deaths	450	436	448	497	527	517	607	578	570	614
Rate per 1,000 population	3.1	3.04	3.05	3.31	3.48	3.42	4.04	3.84	3.76	4.05

Tuberculosis. Four persons died from tuberculosis during 1967, this being one less than in 1966. All the deaths were classified as respiratory tuberculosis. A rate of 0.026 is thus recorded for this disease.

Cancer. An increase in the number of deaths due to cancer, from 459 in 1966 to 480 in 1967—a total of 21, is recorded. The following chart shows the number of deaths (with site of disease) over the last ten years :

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Lung and Bronchus	93	67	111	98	99	83	134	121	103	127
Stomach	70	64	56	62	91	61	68	56	76	54
Breast	45	38	34	41	41	43	42	39	39	54
Uterus	26	22	21	27	23	22	23	21	27	24
Leukaemia	10	12	13	10	4	7	12	11	9	8
Other sites	210	196	183	221	233	227	207	221	205	213
	454	399	418	459	491	443	486	469	459	480

Rate per 1,000 population, Blackpool	3.1	2.77	2.92	3.06	3.24	2.93	3.24	3.12	3.03	3.17
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Rate per 1,000 population, England and Wales	2.12	2.14	2.15	2.16	2.18	2.17	2.21	2.23	2.28	2.28
--	------	------	------	------	------	------	------	------	------	------

Suicides. 28 suicides were recorded in 1967, 14 male and 14 female—two less than in 1966 and five less than in 1965. The occurrence over the age of 55 years in 1967, as in 1966, was approximately 40 per cent of the total—thus reversing the trend which had been apparent since 1961.

Of the 28 people who died, six females and two males were known to the Mental Health Service, four females and two males having attempted suicide on previous occasions.

Comparative Statistics

The following table affords a comparison between the statistics of previous years, so far as they are available, with those under the year of review.

PERIOD	Birth Rates (Crude)				Death Rates (Crude)							Lung Cancer
	Total Live Births	Still Births	Illegitimate Live Births		Total	Infantile	Neo-Natal	Peri-Natal	Maternal	Tuber-culosis	Cancer (All types)	
	per 1,000 population	per 1,000 total births	per 1,000 total population	per cent. of total live births	per 1,000 population	per 1,000 live births	per 1,000 live births	per 1,000 live and still births	per 1,000 total births	per 1,000 population	per 1,000 population	per 1,000 population
1886—1890	25.2	—	—	—	15.3	144.2	—	—	—	—	—	—
1891—1895	23.9	—	—	—	15.3	168.2	—	—	—	—	—	—
1896—1900	26.5	—	—	—	14.4	159.9	—	—	—	—	.67	—
1901—1905	22.3	—	1.3	—	12.9	138.4	—	—	—	—	.93	—
1906—1910	17.4	—	1.2	—	12.2	115.4	—	—	—	—	.88	—
1911—1915	15.6	—	1.3	—	14.0	115.7	—	—	—	.91	1.3	—
1916—1920	12.7	—	1.4	—	14.7	88.8	—	—	—	1.0	1.6	—
1921—1925	15.0	—	1.3	—	14.3	73.3	—	—	6.6	.88	1.7	—
1926—1930	11.8	—	.93	—	13.7	66.2	—	—	5.7	.76	1.8	—
1931—1935	10.5	53.5	.76	—	14.2	63.6	—	—	6.0	.71	2.0	—
1936 ...	10.8	55.2	.62	—	15.6	63.0	—	—	4.6	.63	2.1	—
1937 ...	10.3	66.9	.64	—	16.6	57.7	—	—	3.1	.62	2.2	—
1938 ...	10.9	42.5	.63	—	14.6	47.2	—	—	4.7	.59	2.3	—
1939 ...	10.6	39.5	.78	—	14.8	53.5	—	—	2.6	.58	2.1	—
1940 ...	9.4	40.4	.69	—	15.4	53.0	—	—	7.1	.49	1.7	—
1941 ...	11.5	36.1	.97	—	15.5	56.8	—	—	2.0	.62	2.3	—
1942 ...	12.7	36.9	1.3	—	13.8	68.4	—	—	4.8	.49	1.9	—
1943 ...	12.5	30.3	1.2	—	14.8	62.6	—	—	2.5	.55	2.2	—
1944 ...	13.8	33.7	1.4	—	14.3	41.3	—	—	3.8	.53	2.2	—
1945 ...	12.5	29.1	1.7	—	14.8	57.8	—	—	2.6	.5	2.3	—
1946 ...	13.7	28.2	1.3	—	13.8	37.8	—	—	2.8	.53	2.2	—
1947 ...	15.2	27.1	.98	—	14.6	43.4	—	—	2.1	.53	2.1	—
1948 ...	13.3	29.0	1.1	—	13.8	36.3	—	—	1.9	.47	2.2	—
194 ...	12.2	31.4	.88	—	15.1	25.8	—	—	1.1	.45	2.4	—
1950 ...	11.3	28.7	.73	—	15.7	37.8	24.8	—	1.7	.30	2.4	—
1951 ...	11.1	31.7	.86	—	18.3	35.2	24.7	—	1.2	.34	2.6	—
1952 ...	10.9	29.0	.68	—	15.4	28.0	19.3	—	.6	.30	2.6	—
1953 ...	11.0	27.6	.91	—	14.3	27.2	22.2	—	.6	.16	2.5	—
1954 ...	10.8	32.2	.84	—	16.1	30.1	23.2	—	.6	.30	2.6	—
1955 ...	10.8	26.4	.86	—	16.0	30.3	25.3	—	—	.21	2.8	0.42
1956 ...	11.7	28.8	1.02	8.7	16.4	24.9	18.0	—	.6	.21	2.7	0.55
1957 ...	11.7	26.2	.79	6.7	16.1	22.8	16.4	—	—	.16	2.8	0.57
1958 ...	11.7	27.2	.85	7.3	16.9	29.6	23.1	—	1.15	.18	3.1	0.64
1959 ...	12.1	23.0	.87	7.2	16.6	24.8	17.2	38.8	—	.11	2.7	0.46
1960 ...	12.9	15.4	1.1	8.5	16.8	26.9	20.5	32.9	—	.13	2.9	0.7
1961 ...	12.5	23.4	1.2	9.4	17.2	23.9	15.4	35.8	1.04	.19	3.1	0.65
1962 ...	13.2	24.0	1.4	10.3	17.6	25.1	18.0	38.7	—	.09	3.2	0.65
1963 ...	13.7	17.5	1.5	11.1	16.9	31.4	19.8	33.7	—	.16	2.9	0.55
1964 ...	13.8	18.5	1.6	11.6	17.5	23.2	15.8	32.3	—	.07	3.24	0.89
1965 ...	13.11	18.95	1.6	12.17	17.3	22.31	16.22	32.32	—	.07	3.12	0.80
1966 ..	12.85	12.19	1.77	13.83	17.28	23.65	17.47	25.71	0.51	.03	3.03	0.68
1967 ..	12.84	22.0	1.7	13.52	17.26	25.0	16.44	38.19	—	.03	3.17	0.84

INFECTIOUS DISEASES AND EPIDEMIOLOGY

Cases notified, admissions to hospital and age periods of cases are shown in the following tables which also show notifications year by year from 1952 for comparison purposes.

Diphtheria. The last case of diphtheria reported was in 1950.

Poliomyelitis. No cases were reported during the year, only two cases being reported in the last nine years.

Measles. This year 438 cases were reported against 1,455 for 1966.

Disease	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Scarlet Fever	265	379	152	137	159	73	126	187	163	95	36	39	72	73	66	35
Whooping Cough ..	508	430	192	93	281	76	44	92	159	22	8	36	109	17	36	69
Diphtheria ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ..	1,733	695	1,741	932	82	3,096	276	1,498	775	900	1,050	987	932	509	1,455	438
Pneumonia	35	35	21	19	27	32	22	44	19	12	8	24	10	15	23	7
Meningococcal Infections ..	5	3	—	5	8	6	4	6	4	—	4	—	1	2	2	6
Poliomyelitis	15	44	2	8	14	4	8	—	—	—	1	—	—	—	1	—
Polio-encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	—	—	—	3	1	3	1	2	1	—	4	—	1	—
Dysentery ..	425	30	87	817	206	84	50	62	79	55	159	43	7	420	10	43
Ophthalmia Neonatorum	4	23	26	17	33	30	47	37	18	16	7	18	9	1	—	—
Puerperal Pyrexia ..	53	41	41	56	93	95	82	100	48	25	24	30	25	4	6	—
Enteric Fever/Paratyphoid B Fever	1	—	1	—	—	2	3	1	—	2	—	—	4	231	—	—
Food Poisoning ..	14	194	44	29	24	92	14	101	39	13	8	31	32	22	13	31
Erysipelas ..	22	32	22	18	15	13	11	15	6	3	4	6	13	4	5	4
Pemphigus ..	1	—	7	—	2	1	—	—	—	—	—	—	—	—	—	—

Disease	Cor- rected Notifi- cations	Ad- mitted to Hospital	AGE PERIODS Corrected Notifications										
			Under 1	1 to 2	3 to 4	5 to 9	10 to 14	15 to 24	25 to 34	35 to 44	45 to 64	65 and over	
Scarlet Fever	35	—	—	—	11	17	3	4	—	—	—	—	—
Whooping Cough	69	15	14	14	13	23	2	1	1	—	1	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	438	5	21	124	154	134	2	1	1	1	—	—	—
Pneumonia	7	5	2	—	1	1	—	—	—	—	2	1	—
Meningococcal Infection	6	6	1	—	—	1	2	—	1	1	—	—	—
Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	43	5	1	3	4	17	3	3	11	—	1	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever/Para B	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	31	7	1	1	3	5	2	4	8	—	3	4	—
Erysipelas	3	—	—	—	—	—	—	—	—	2	2	—	—
Pemphigus	—	—	—	—	—	—	—	—	—	—	—	—	—

FOOD POISONING

Outbreaks. There were seven outbreaks of food poisoning reported during the year, the causative agent in four being *Salmonella typhimurium*, and in the others *Salmonella anatum*, *Salmonella reading* and *Salmonella stanley*. 24 cases were notified in connection with these outbreaks.

Sporadic Cases. There were six sporadic cases during the year, the agent in all of these being *Salmonella typhimurium*.

TUBERCULOSIS

Incidence. During the year 63 cases of tuberculosis were notified : 55 respiratory and eight non-respiratory. Of these, 40 respiratory and six non-respiratory were primary notifications. The remaining 17 supplementary notifications were made up as follows :

1—Posthumous notification.

16—Transfers from other areas.

The following table classifies the primary notifications of tuberculosis according to age groups.

Age Periods	Primary Notifications			
	Respiratory		Non-Respiratory	
	Male	Female	Male	Female
0—	—	—	—	—
1—	—	—	—	—
2—	—	1	—	—
5—	—	1	—	—
10—	2	—	—	1
20—	3	1	1	—
25—	3	3	2	—
35—	4	4	1	—
45—	6	—	—	—
55—	3	1	—	—
65—	5	2	—	—
75—	1	—	—	1
TOTALS ...	27	13	4	2

The following table which summarises the notification register shows the number of patients at the end of 1966, the fluctuation of patients during the year 1967, and the number remaining at the end.

Type and Sex of Case		Remaining on register 31.12.66	Notificat'ns (from all sources)	Died	Recovered	Transferred	Lost	Altered Diagnosis	Remaining on register
Respiratory Tuberculosis	M	411	38	27	12	10	—	—	400
	F	231	17	3	11	11	—	—	223
Non-Respiratory Tuberculosis	M	31	5	—	—	—	—	—	36
	F	38	3	—	—	1	—	—	40
TOTALS	...	711	63	30	23	22	—	—	699

Mortality. The number of deaths which were attributable to tuberculosis in 1967 was four, none of whom had previously been notified as suffering from the disease.

Chest Clinic. This Clinic, administered by the Blackpool and Fylde Hospital Management Committee, is held at the Municipal Health Centre at the following times :—

Monday	9-30 a.m.—11-30 a.m.	Review of patients.
	9-30 a.m.—11-30 a.m.	Old patients.
	2-00 p.m.— 4-30 p.m.	New and old patients.
Tuesday	9-30 a.m.—11-30 a.m.	} New and old patients.
	2-00 p.m.— 4-30 p.m.	
Wednesday	9-30 a.m.—11-30 a.m.	New and old patients.
	2-00 p.m.— 4-00 p.m.	Bronchogram Session.
Thursday	9-30 a.m.—11-30 a.m.	} New and old patients.
	2-00 p.m.— 4-30 p.m.	
Friday	9-30 a.m.—11-30 a.m.	New and old patients.
	2-00 p.m.— 4-30 p.m.	Children's Clinic (B.C.G.).

Cases referred by General Practitioners for X-ray only are seen during any of the above sessions, except on Wednesday.

Notifications of Respiratory Tuberculosis for Blackpool

Year	Notified	Transfers	Total
1956	65	14	79
1957	33	17	50
1958	34	23	57
1959	46	34	80
1960	57	12	69
1961	78	15	93
1962	60	10	70
1963	44	13	57
1964	62	11	73
1965	59	3	62
1966	60	13	73
1967	40	15	55

Notifications of Respiratory Tuberculosis by Age Groups

Age Groups	1963						1964						1965						1966						1967											
	Cases Notif'd			Trans. In.			Total			Cases Notif'd			Trans. In.			Total			Cases Notif'd			Trans. In.			Total			Cases Notif'd			Trans. In.			Total		
	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total	M	F	Total						
0-5	2	2	-	-	-	2	2	-	-	-	-	3	1	-	-	-	3	1	-	-	-	-	3	2	-	-	-	-	-	-	-	1				
6-10	1	-	-	-	-	1	-	-	-	-	-	2	-	-	-	-	2	-	-	-	-	-	1	1	-	-	-	-	-	-	-	1				
11-15	-	-	-	-	-	-	-	-	-	-	-	2	4	-	-	-	2	4	-	-	-	-	-	-	-	-	-	-	-	-	-	1				
16-20	4	1	-	-	-	4	1	-	-	-	3	2	-	-	-	-	4	3	-	-	-	-	5	2	-	-	-	-	-	-	-	2				
21-30	5	2	1	3	6	5	4	6	2	1	6	7	3	3	-	-	3	3	3	2	3	2	6	4	5	1	2	1	2	1	7	2				
31-40	4	2	1	2	5	4	4	4	-	3	4	7	3	2	-	1	3	3	2	3	2	3	-	2	3	3	4	1	-	-	4	4				
41-50	9	1	-	-	9	1	8	3	1	1	9	4	8	1	1	-	9	1	1	9	3	1	1	10	4	6	2	3	1	9	3					
50 plus	11	-	6	-	17	-	22	4	2	1	24	5	12	8	1	-	13	8	1	16	8	3	-	19	8	11	3	4	1	15	4					
Totals	36	8	8	5	44	13	42	20	5	6	47	26	37	22	2	1	39	23	2	39	21	7	3	46	24	27	13	11	4	38	17					

VENEREAL DISEASE

The Venereal Disease Clinic is located at the rear of the Municipal Health Centre. This Clinic is under the control of the Blackpool and Fylde Hospital Management Committee, who have kindly furnished the following information :—

Clinic Sessions :

Males :	Wednesday	10-00 a.m. to 12 noon
	Monday and Thursday	4-45 p.m. to 6-30 p.m.
Females :	Thursday and Friday	10-00 a.m. to 12 noon
	Tuesday	4-45 p.m. to 6-30 p.m.

The above facilities are brought to the attention of the public by means of notices fixed in toilets used by the general public.

Dr. J. F. Mackay, the Consultant Venereologist, reports that there is little comment upon this year, but has kindly supplied the following figures :—

NUMBER OF NEW CASES IN YEAR				
Local Authority Area	Syphilis	Gonorrhoea	Other Conditions	Total
Blackpool ..	10	143	481	634
Lancashire C.C.	4	52	144	200
Others	—	10	22	32
TOTAL ..	14	205	647	866

A more detailed analysis of these figures is shown in the following table :—

		NEW CASES OF INFECTION							Totals	Male	Female
1.	(i)	Syphilis :— Primary							1	1	—
	(ii)	Secondary							3	2	1
	(iii)	Latent in first year of Infection							—	—	—
	(iv)	Cardio-vascular							1	—	1
	(v)	Of the nervous system							1	—	1
	(vi)	All other late and latent stages							6	5	1
	(vii)	Congenital (under 1 year)							—	—	—
	(viii)	Congenital (over 1 year)							2	2	—
		Total of Lines included in 1							14	10	4
2.		Gonorrhoea							205	142	63
3.	(i)	Chancroid							—	—	—
	(ii)	Lymphogranuloma Venereum (Syn. Lymphogranuloma Inguinale)							—	—	—
	(iii)	Granuloma Inguinale (Syn. Granuloma Venereum)							—	—	—
	(iv)	Non-Gonococcal Urethritis							115	115	—
	(v)	Non-Gonococcal Urethritis with Arthritis							—	—	—
	(vi)	Trichomonal Infestations							53	3	50
	(vii)	Late or Latent Treponematoses presumed to be non-Syphilitic							—	—	—
	(viii)	Other conditions requiring treatment within the centre							257	110	147
	(ix)	Conditions requiring no treatment within the centre							222	157	65
	(x)	Undiagnosed Conditions							—	—	—
		Total of Lines included in 3							647	385	262
		Grand Totals (1, 2 and 3)							866	537	329

Section 22—Care of Mothers and Young Children

Six Local Authority Clinics situate in various parts of the town to serve the mother and young child.

Abbey Road Clinic (opened April, 1966)	}	Purpose Built.
Bispham Clinic		
Hawes Side Clinic		
Layton Clinic		

Health Centre Clinic—Converted Hospital ward—meets majority of requirements.

Mereside Clinic —Converted Church into combined clinic/library.
Insufficient space to be totally satisfactory.

The tables below show details of attendances at the six clinics.

	Municipal Health C.		Bispham		Hawes Side		Layton		Mereside		Abbey Rd.		Total	
Children born 1967														
First Visits	468	(382)	352	(317)	220	(239)	176	(190)	90	(96)	163	(188)	1469	(1412)
Re-Visits	2122	(2171)	2257	(2446)	2068	(2079)	1287	(1441)	735	(668)	843	(900)	9312	(9705)
Total Visits Children born														
1966	1302	(1675)	1825	(1727)	1359	(1413)	1067	(1131)	721	(537)	1009	(522)	7283	(7005)
1965/62	158	(282)	375	(530)	316	(209)	165	(224)	117	(167)	133	(145)	1264	(1557)
No. of children who attended during the year and who were born in :														
1966	225	(219)	269	(277)	149	(174)	158	(171)	85	(57)	134	(103)	1020	(1001)
1965/62	48	(116)	183	(249)	117	(119)	81	(78)	119	(71)	19	(66)	567	(699)
No. of Sessions per year	103	(98)	98	(101)	100	(100)	52	(52)	49	(48)	48	(42)	450	(441)
Average attendances per Session	39.3	(46.0)	49.1	(49.7)	39.6	(47.4)	51.8	(57.4)	33.9	(30.4)	44.8	(41.8)	42.9	(44.6)

Comparative figures for 1966 are shown in parentheses.

The total number of visits in 1967 was 19,328 compared with 19,679 in 1966, a decrease of 1.7 children per session to 42.9.

Ante-natal Clinics

There is still an increase in the number of mothers attending their own medical practitioner for ante-natal care ; with subsequent decline in the number attending clinics.

Facilities are provided for general medical practitioners to send their ante-natal patients to the routine ante-natal clinics for blood tests, and this service is frequently used.

The Glenroyd Maternity Hospital and Victoria Hospital have, as always, given co-operation in all aspects of ante-natal care, and this is greatly appreciated.

The following table shows attendances at the six clinics during the year :

ANTE-NATAL 1967

	Municipal Health Centre	Bispham	Hawes Side	Layton	Mereside	Abbey Road	Total
First Visits	220 (230)	102 (81)	71 (66)	100 (57)	23 (21)	69 (22)	585 (477)
Total Visits	1684 (2341)	686 (864)	587 (690)	388 (422)	230 (237)	445 (239)	4020 (4793)
Number of women who attended during the year	334 (367)	135 (137)	96 (123)	121 (75)	34 (44)	86 (22)	806 (768)
Number of Clinic Sessions	99 (98)	52 (54)	50 (67)	51 (57)	45 (44)	51 (28)	348 (348)
Average attendance per session	17.0 (23.9)	13.2 (16.0)	11.8 (10.3)	7.6 (7.4)	5.1 (5.4)	8.7 (8.5)	11.6 (13.7)

Comparative figures for 1966 are shown in parentheses.

Post-natal Service

The attendance figures at the post-natal clinics, with the exception of Abbey Road Clinic, show a marked reduction on the 1966 figures. This is largely due to the fact that, in order to provide a better service, the majority of clinics now hold a post-natal session following each ante-natal session. These clinics, being held weekly instead of monthly as previously, naturally show a reduction in average attendance. The reduction in attendance figures is also partly due to the fact that increasing numbers of general practitioners are giving ante-natal care, and also a subsequent post-natal examination.

POST-NATAL 1967

	Municipal Health Centre	Bispham	Hawes Side	Layton	Mereside	Abbey Road	Total
First Visit	126 (159)	66 (59)	38 (52)	34 (34)	11 (23)	46 (15)	321 (342)
Total Visits	138 (182)	81 (65)	41 (58)	37 (38)	11 (27)	49 (15)	357 (385)
Number of women who attended during year ..	135 (177)	71 (65)	40 (57)	35 (37)	11 (25)	48 (15)	357 (376)
Number of clinic sessions per year	49 (51)	52 (12)	52 (50)	41 (12)	12 (12)	50 (30)	256 (167)
Average attendance per session	2.8 (3.5)	1.6 (5.4)	0.8 (1.2)	0.9 (3.2)	0.9 (2.2)	0.9 (0.5)	1.4 (2.3)

A doctor of the Blackpool & Fylde Hospital Management Committee is in attendance at the Post-natal Clinic on Thursday p.m. at the Municipal Health Centre, a proportion of his salary being met by this Authority for these services.

Confinements in Hospital and admissions to Hospital on Social Grounds

The Council continue to loan the clinic premises at the Municipal Health Centre to the Blackpool and Fylde Hospital Management Committee, who hold, on Friday morning of each week, a special ante-natal booking clinic for those expectant mothers who wish to have their confinement in Glenroyd Maternity Hospital. This clinic is attended by the Consultant Obstetrician to the Hospital Management Committee.

Usually all first confinements are booked but other cases are assessed according to their medical and obstetrical needs. Those considered suitable for home confinement are referred to the Health Department and visited by the district midwife, who, if she feels that the home conditions are satisfactory, books the case. Should the home environment be unsuitable a report to that effect is forwarded to the Glenroyd Maternity Hospital and the patient is invariably allocated a bed in the hospital. In certain cases expectant mothers are booked for confinement in Glenroyd but for discharge home shortly after confinement to the care of the domiciliary midwife. During the year 351 cases were investigated and of this number 170 were booked for confinement in Glenroyd. Of these 57 were considered suitable for early discharge. 168 were booked as home confinements and the remaining were booked for other hospitals or made private arrangements.

CONGENITAL MALFORMATIONS

Congenital defects apparent at birth, continue to be reported by the Glenroyd Maternity Hospital, Victoria Hospital, St. Annes Hospital and the domiciliary midwives. Any malformation observable at the time of birth is notified to the Health Department on the Statutory notification of birth, and is described as accurately as is possible at the time.

In the case of stillbirths notified to the Department, information is requested from the Blackpool Victoria Hospital Pathological Department for the findings of the post mortem examination, and the Laboratory Staff are most co-operative in supplying this information.

These cases are coded according to the type of malformation, and a return, giving identity numbers (not names) is submitted each month to the Ministry of Health. On receipt of a notification of birth reporting a congenital malformation, the information is transferred to a wallet folder which is passed to the Assistant Medical Officer for the district concerned. These folders are filed separately at the area clinics to enable the Medical Officers to keep the children under surveillance.

During 1967, 27 babies were found to be suffering from congenital defects ; five of this number being stillborn.

PHYSIOTHERAPY

There has not been any appreciable change in the Physiotherapy Department this year. It is still short of its full complement of staff and has, therefore, been unable to increase the amount of work done.

The new clinic at Abbey Road has proved a popular centre for South Shore children wishing to attend sunlight and exercise classes, but unfortunately, in order to do this, we have had to cancel the morning sessions previously held at the Health Centre.

It is with some satisfaction that we continue to attend the Orthopaedic Clinic at Victoria Hospital with some of the Highfurlong school children. An increasing number of cerebral palsies are having orthopaedic operations, and this means that more time is being spent on post-operative physiotherapy at the school. This is a very interesting aspect of the work and, needless to say, very rewarding.

In spite of difficulties we have managed to transport two children from Woodlands Junior Training Centre weekly to Highfurlong for hydrotherapy. It would be desirable to extend this service, but it is impossible, owing to staff shortage.

The ante-natal department at the Health Centre is still working in conjunction with the Stork Club and the "mums-to-be" find this very helpful. Through sheer hard work, the physiotherapists dealing with these classes have managed to shorten the waiting list considerably.

The ante-natal classes held at the outlying clinics are still well attended and enjoyed considerably by the "mums".

The following table shows treatments given during the year :—

	Expectant and Nursing Mothers	Children under 5 years	School Children
Artificial Sunlight ..	64	728	3,355
Remedial exercises ..	1430	137	3,606
Radiant heat	—	—	18
Massage	—	19	—
Other treatment	44	26	610

PHENYLKETONURIA

Phenistix testing of newly born infants was undertaken and once again there were no confirmed cases.

FAMILY PLANNING CLINIC

The Medical Officer, Chairman and Honorary Secretary of the Blackpool & Fylde Family Planning Clinic have once again furnished the following abridged details of the activities of the Clinic during the year:

"It is now 15 years since we started our first Clinic, in an inconvenient Church Hall in Blackpool, and we never cease to be grateful to Dr. Wauchob and the staff for the premises we now occupy in the Municipal Health Centre and for all the help and co-operation we receive. Although our work continues to expand, the increased cost of supplies and equipment compelled us to increase our fees although we still maintain our sliding scale of fees for patients on low incomes.

4,867 visits were made to see our doctors and buy supplies.

4,600 visits were made to buy supplies only.

141 sessions were held, so that approximately 34 patients on average saw the medical staff per session, and 33 patients bought supplies per session. Our postal order service continues quite satisfactorily, with 466 transactions.

757 new patients were registered— 102 were pre-marital.

189 were sent by their G.P.

37 referred by Corporation.

2 referred by Hospital.

6 referred by Lancs County Council.

540 cervical smears were taken; three were positive. Those patients recalled for the Christie Hospital random repeat smears continue to be very co-operative. We do not operate any age limitations and find that suspicious smears and minor infections are equally found in the younger woman as in the over 35's.

156 Intra-Uterine Devices were fitted, and we are now having patients return for their second year check visits. For those whom it suits this seems to be a very effective and trouble free method of birth control.

Conventional methods still seem to be popular. Approximately for every ten patients, five will be taking the pill, three will use conventional methods and two will be fitted with the IUD.

Our largest age group is the 20-24 years. Sixty-seven patients were under 20 and 149 over 34. We continue also to give advice on marital difficulties and subfertility problems, change of life and many other worries are discussed. We have had visits from pupil midwives, and sent speakers to meetings, and co-operate closely with the Health Visitors and Midwives.

In 1968 we look forward to another busy year and with the help of our voluntary lay workers, an increase in the number of sessions held".

The National Health Service (Family Planning) Act, 1967, conferred upon Local Authorities the general power, with the approval of the Minister of Health, to make arrangements for the giving of advice on contraception, the medical examination of persons seeking such advice, and the supply (by prescription or directly) of contraceptive substances and appliances. This Act extends the existing powers of Local Health Authorities in order to enable them to provide (or arrange for other bodies to provide) advice on contraception and supplies for any persons who need them on social grounds, and not (as hitherto) only in medical cases.

It is proposed that in view of the satisfactory way in which the Family Planning Clinic has carried out this service over the past years that suitable arrangements be made for them to continue this service, in order to meet the requirements of the local health authority, who would meet the financial costs involved with both medical and socially deprived cases.

DAY NURSERY

The Day Nursery was run in very much the same routine as other years ; opening daily from 8.00 a.m. until 6.00 p.m.

Staff Changes : An increase of a Nursery Assistant—Miss Margaret Foster—was made to enable us to increase our intake of children from 22 to 29. Miss Atkinson retired as Deputy Matron after having worked in the Day Nursery since the war. We were sorry to see her go, and we have been fortunate in filling her post with Mrs Norton, N.N.E.B.

Medical Examinations : These were given each month. Small outbreaks of infectious diseases were inevitable. We had one child coming into the Nursery with a dirty head otherwise the children were brought to us clean and well-shod.

Play : Our main aim was to make this always as attractive as possible, searching always for new ideas and interests. We grew tomatoes and grass in egg-shells, and a record player with records added enormously to the entertainment.

We extend once again grateful thanks to the schoolgirls of St. Catherines and Claremont schools for continued help received.

Dr. Jewsbury has submitted the following report concerning the day nursery facilities available.

Over the past two to three years it has become increasingly evident that the facilities of the present day nursery are inadequate to meet demands, and the intake has had to be restricted to children in special categories: viz. those of unmarried mothers, divorced parents, widows, hospitalized mothers, etc.

The waiting list has increased, and at present numbers 30 children. As the average turnover is about two per month, this means in fact, a waiting list of approximately 15 to 18 months. This, from a practical stand point, is very unsatisfactory.

Mothers requiring daily minding facilities for their children have been, thus, placing them with registered child minders, relatives, friends, and in some cases, with unregistered child minders.

In recent months, there has been a considerable increase in the applications for registration as child minders, another fact proving the urgent need of such facilities on a much wider scale.

Apart from children falling into the above categories, there is an important group of children in need of nursery facilities. These are the children with some form of handicap, (viz. partial deafness, delayed speech, general backwardness, controlled epilepsy), children of inadequate parents, children in care of elderly persons, children in homes where there is extreme marital discord affecting the child, etc. These children require, and benefit considerably, from the day nursery environment, and the mixing with normal children, and it is now necessary to make provision for a **small** percentage of the places in the nursery to be reserved for this category.

At present there are eight such children on an extra waiting list, and there are many others not brought, as yet, to our attention because the Health Visitors know there is at present no chance of them being placed in the nursery.

The increase in the number of patients receiving treatment as day cases at hospitals and clinics, particularly in the psychiatric field, makes it necessary to make increasing provision for the day care of the children of such patients.

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948

Registrations under the above Act at the end of the year numbered 30—an increase of 12 in comparison to 1966. There were seven cancellations, and 19 new registrations, one of them classified as a private day nursery. The composition of the registrations and places provided was as follows :—

Private Day Nursery ...	3	...	76 children
Daily Minders... ..	27	...	173 children

Every effort is made by the Department to ensure compliance with the Act, and where unregistered minders are detected a visit is made by one of the Department's Medical Officers. The local newspapers have co-operated in refusing to insert advertisements from intended minders unless authority has first been obtained from the Council. Shop window notices, a popular method of advertisement, have led to the detection of would-be minders, and have led to the Department being able to draw their attention to the provisions of the Act. It is not considered that the unregistered minder constitutes a problem in the town, mainly due to the vigilance of the Department's visitors.

WELFARE FOODS

Tables below show sales made during the year together with comparative figures of previous years.

	National Dried Milk	Cod Liver Oil	Vitamins	Orange Juice	Proprietary Brands Welfare Foods
1967 ..	12,632	1,694	1,146	22,679	37,878
1966 ..	16,394	1,661	1,128	23,182	38,704
1965 ..	20,443	1,865	1,322	23,516	41,144
1964 ..	22,103	1,917	1,456	22,235	40,816
1963 ..	26,470	1,886	1,670	21,772	35,744
1962 ..	22,846	2,041	1,908	19,064	37,447

Proprietary Foods. The following foods are available at all Infant Welfare Clinics ; selection of the type of milk or food is normally the mother's choice, excepting where the Medical Officer in attendance at the clinic feels that the infant would benefit from a certain type of milk or food. Their direction is normally accepted by the mother who continues to feed the baby accordingly until otherwise advised.

The list shows the unit sales during the year :—

Ambrosia Tablets	...	...	...	18
Baby Books	...	...	...	1
Baby Rice	...	...	...	340
Carnation Milk	...	...	...	535
Cow and Gate F.C.	...	...	...	4,582
Cow and Gate H.C.	...	...	...	40
Eye Droppers	...	...	...	88
Farex	...	...	...	820
High Protein Cereal	...	...	...	493
Horlicks	...	...	...	460
Lactagol	...	...	...	—
Malt and Oil	...	...	...	131
Marmite	...	...	...	327
Mixed Cereal (Robrex)	...	...	...	265
Ostermilk No. 1	...	...	...	32
Ostermilk No. 2	...	...	...	8,467
Ovaltine	...	...	...	547
Ovaltine Rusks	...	...	...	325
Robsoup	...	...	...	2,670
Robsweet	...	...	...	2,194
Rose Hip Syrup	...	...	...	5,385
S.M.A.	...	...	...	2,779
Scotts Cereal	...	...	...	717
Trufood	...	...	...	928
Virol	...	...	...	255
Vit. A and D Liquid	...	...	...	5,279
Total	...	...	...	37,878

MOTHER AND BABY HOMES

During the year 11 cases have received financial help from the Department following requests made by voluntary bodies. Details of these cases are as follows :—

Homes to Which Admitted	No. of Cases	Days	
		Ante-Natal	Post-Natal
The Grange, Wilpshire, Blackburn ...	5	87	225
Girls Hostel, Lancaster	3	128	72
Parkinson House, Preston	2	77	48
St. Margarets Home, Goosnargh ...	1	57	35
	11	349	380

There was no change in the financial arrangements whereby grants are given to the Lancaster Diocesan Protection and Rescue Society and the Blackpool & Fylde Moral Welfare Committee. The Health Committee also continued to make a payment of £5 0s. 0d. per Blackpool case dealt with, these totalling 112 during the year, to the Committee.

The only Mother and Baby Home situate in the Borough is the Fylde House of Help at 141 Hornby Road, administered by the Moral Welfare Committee. The Secretary informs me that 123 cases were admitted during the year with an average duration of stay of 21 days.

ILLEGITIMATE CHILDREN

The Health Visitors, in co-operation with the Moral Welfare Worker continue to keep a vigilant eye on these children. The Children's Officer is also concerned, especially where adoption is involved.

DENTAL CARE OF EXPECTANT AND NURSING MOTHERS

The establishment of Dentists who can be called upon to carry out treatment to expectant and nursing mothers, and children under school age, is as follows :

- 1 Senior Dental Officer
- 1 Whole-time Dental Officer
- 3 Part-time Dental Officers

The Chief Dental Officer, Mr. Marshall Smith, continued to give advice on treatment and dental health to expectant mothers at the ante-natal clinic. Mr. Smith reports :

“ There is little to report on the Maternity and Child Welfare Services as there is still little demand for treatment, although a few expectant mothers were visited during the year, mostly for one or two extractions, and single fillings. There was little change in the number of pre-school children attending for treatment and this was mostly for the treatment of toothache. Very little demand was made for conservative treatment.

It was again noted at inspections by the Chief Dental Officer at the ante-natal clinic that a very high percentage were being treated regularly by private dentists with a very small percentage refusing any treatment unless they were suffering from pain ”.

Numbers Provided with Dental Care

	Number Examined	Number who required treatment	Number who commenced treatment
Expectant and Nursing Mothers	787	522	NIL
Children Under Five	22	22	22

Forms of Dental Treatment Provided

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers	2	2	—	—	2	1	—	—	—
Children Under Five	—	—	—	—	32	18	—	—	—

Number of sessions devoted to M. & C.W. patients :—

For Treatment ... 16 For Health Education 36

SECTION 23—MIDWIFERY

Domiciliary Midwifery

One midwife left the service to emigrate to South Africa. After a gap of several months a Senior Midwife was appointed thus completing the establishment of eight. This was a welcome appointment as the midwives can now refer any domestic difficulty to a colleague in the absence of the Non-medical Supervisor.

The number of births again showed a slight fall (346 against 353). This included one set of twins. The early discharged from Hospital did not show the increase as in previous years but were slightly less (525 against 535).

It is interesting to note that the number of investigations re suitability for home confinement or early discharge from Hospital rose to 530 against 347 the previous year.

The number of visits paid was 778. Much of this work—as reported last year—is time consuming and frustrating and did not increase the number of domiciliary confinements.

Many expectant mothers are living in very poor rooms or tiny flats—particularly in the Central area—and require Hospital beds. Some do take their own discharge from Hospital and are cared for by the Domiciliary Midwife in most unsuitable conditions.

The midwives are all approved District Teachers of student midwives. The training has continued with difficulty owing to the number of home confinements. The students often take cases outside their allotted area (which means more travelling) to make up their number of cases. It has now become necessary to place one student in the care of two midwives. 24 students completed training during the year, and four were with the Department at the end of the year.

Analgesia

Two more Entonox machines were purchased during the year as this will gradually replace the Minnet Gas and Air machine. The Entonox machine is difficult to transport and enquiries are being made to find a suitable type of bag to transport it.

Transport

Car owned by Midwife	...	...	...	6
Public Transport	...	...	...	2

It is an improvement to the service that for the first time the Midwife at Anchors-holme is a car driver.

Accommodation

Midwives own house	...	...	...	3
Local Authority house or maisonette	...	...	...	5

The Local Authority houses do not have attached garages. The one Midwife who was allocated a garage has now moved. The garage was some distance from the maisonette which meant heavy equipment had to be carried some distance by ramp to ground level.

The following table shows the number of confinements attended by all midwives in the borough :—

	Confinements Attended	Confinements with the use of :—			
		Pethedine	Trilene	Gas/Air Analgesia	General Anaesthetic
a) Local Health Authority Services—Municipal Midwives	348	196	124	188	—
(b) Hospital Services—In State Hospitals...	2,430	1,548	396	1,068	61
(c) Private Practice—Domiciliary, Nursing Homes, etc.	—	—	—	—	—
Total—All Services	2,778	1,744	520	1,256	61

The table below shows the trend of domiciliary and hospital confinements in the Borough from 1958 to 1967.

	1967	1966	1965	1964	1963	1962	1961	1960	1959	1958
Hospital	2,430	2,397	2,271	2,239	2,157	2,001	1,907	1,824	1,751	1,626
Domiciliary	348	353	368	389	406	434	432	410	379	388
Maternity Homes	—	—	3	141	149	104	83	55	5	—
Totals	2,778	2,750	2,642	2,769	2,712	2,539	2,422	2,289	2,135	2,014

Care of Premature Infants. The number of domiciliary premature births during 1967 was six, five over 4lbs 15ozs. and one under this weight.

Five of these infants were nursed in their homes and the other was transferred to hospital. Those infants nursed in their homes all made satisfactory progress under the care of the midwife and the medical practitioner. No special difficulties were encountered in the service.

Charted below are details of premature live and still births in the borough.

Weight at birth	Premature live births												Premature stillbirths		
	Born in hospital				Born at home or in a nursing home										
					Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day						
	Total births	Died			Total births	Died			Total births	Died				Born	
		Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days			
2 lb. 3 oz. or less ..	6	5	1	—	—	—	—	—	—	—	—	—	6	—	
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	7	4	—	—	—	—	—	—	—	—	—	—	3	—	
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	18	—	1	—	—	—	—	—	1	—	—	—	8	—	
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	28	—	1	—	—	—	—	—	—	—	—	—	8	—	
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	65	—	—	—	5	—	—	—	—	—	—	—	3	—	
Total ..	124	9	3	—	5	—	—	—	1	—	—	—	28	—	

SECTION 24—HEALTH VISITING

The year 1967 was one mainly of consolidation for the Health Visiting Section.

Miss Ryan, the Superintendent Health Visitor, retired in March, 1967, and no one replaced her in 1967. Thus the staff have been working without professional guidance, and great credit is due to the Health Visitors, who have carried on meanwhile and maintained their quality of work.

Miss Harrison, Health Visitor for the Chest Clinic, also retired in 1967 and we were fortunate in the appointment of two part-time Health Visitors for Chest Clinic duties, even though one worked in a temporary capacity only.

There were no students returning from training in 1967 and two Health Visitors went on maternity leave towards the end of the year. These two Health Visitors were attached to general practice, so that relief Health Visitors for their work had to be found from among the remaining staff.

Two Group Advisors were appointed to the newly established posts in December 1967.

We have managed to maintain our Health Education in Schools, and have undertaken a new short course to the senior girls of Tyldesley Secondary Modern School. At their request short groups of mothercraft and infant care talks were given.

Health Visitors have continued to co-operate with the Teaching Unit of Victoria Hospital for student training. The students visit the Health Department from time to time, and various Health Visitors go to the Nurse Training School to talk about their work.

The existing basic services to the community have continued. In connection with the ante-natal work it has been possible this year for two Health Visitors to develop a very successful "Stork Club" in the Health Centre. Mothers to be who attend the ante-natal clinics are invited to these classes, where they learn pre-natal health care and post-natal care of their babies and themselves. Each mother attends about 8 weeks, although the "club" meets regularly twice a week. From time to time the film "To Janet a Son" is shown. This is the story of Janet pre-natally, at delivery and after the birth of her baby. Fathers are invited to this film show and although the first time it was shown an audience of 20 were expected, about 50 arrived—half of whom were fathers to be. The need for these classes is very great and judged by attendance alone, they are much appreciated.

The screening tests of hearing of young children have continued. The stage has now been reached where Dr. Robson, Consultant Audiologist, will be holding a fortnightly clinic at the Central School Clinic in Blackpool. Those children who do not satisfactorily pass the preliminary screening test carried out by the Health Visitors will then be referred to Dr. Robson for diagnosis. The diagnosis given is that of loss of hearing and the degree is determined by Dr. Robson. After the diagnosis the child will be referred to an Ear, Nose and Throat Specialist for treatment if required. Whatever the result the child will be followed-up by a Health Visitor and observed, to determine his needs and particularly in connection with his possibilities for normal schooling. A child with a hearing loss can be greatly handicapped when entering school.

This year has shown the increased depth of work each Health Visitor has carried out for her clients, without taking into account the quantity dealt with. This increase in depth is a marked feature of the present Health Visitor's role, and it will continue. Along with the national shortage of Health Visitors—felt also by us in Blackpool—it can only point to a re-assessment of our ways of working. Traditional ideas will need to be re-examined and the Health Visitors will need to be guided to accept the inevitable changes which are to take place in the very near future. Change is never very easy to accept by any of us, but if we are to supply the needs of those for whom we care, it will be inevitable. We have great hopes for the achievement of these changes in Blackpool, when they come. A staff which has managed to work without professional leadership throughout the year is a reasonably mature staff. That the year has passed without major incidents reflects much to their credit. It also points to great possibilities for future development with professional leadership.

Liaison with general practitioners

We have attachment health visitors in two group practices. In one practice there is a room for the health visitor where she keeps her records and does the clerical work. Thus it is possible to go to the surgery in the morning see the doctors, and do the clerical work before setting out on home visits. In the other practice the health visitor keeps her records in the Health Centre, so she goes on to the surgery after attending at the Health Centre. This frequent coming and going tends to reduce available home visiting time. Premises and availability of space in a surgery for the accommodation of the health visitor are important for the workings of these schemes.

Another important factor is that of records. As the health visitor is employed by the local authority there are records which she must necessarily keep for local authority organisation. These are however not similar to those kept by the general practitioner, a practice requires another set of records. There is consequently some duplication.

The health visitors working in general practice have not so far carried out any school work. Further more the visiting of old people referred by the general practitioner has meant that the health visitors attached have an increased geriatric case load.

These attachment schemes are as yet a new concept in health visiting and we need as much information as can be obtained about the various ways they are organised. It is for this reason that we can look forward to the report to be published by the Council for the training of Health Visitors and the Edinburgh Nursing Studies Unit, on the Health Visitor in general practice.

It may help us to re-assess this work for future development.

Liaison with Hospitals

The liaison schemes with the Hospitals have continued most successfully, in particular the health visitors continue to enjoy the good relationships which this department has with Victoria Hospital.

Victoria Hospital

A health visitor attends the paediatric clinic regularly for purposes of liaison between the Paediatrician and the health visitors. This position has been established many years.

Another health visitor attends the diabetic clinic and then follows up those referred to her by the Consultant. This also works extremely well.

There is also a well established link between the Medico social workers and the health visitors. Patients discharged from the Hospital are referred by the medico social workers and followed up at home by health visitors. A fair proportion of these referrals are in the older age groups.

Devonshire Road Hospital

Devonshire Road Hospital refer patients to us by means of a written discharge note, which advises on the needs of the patient or home.

Other Hospitals

We continue to have special referrals from the Maternity Hospitals, although all patients from there are normally referred to us under the notification of births, from these hospitals.

Lastly we receive notification of discharge from Hospitals outside Blackpool, in particular of children who have been in specialised Children's Hospitals.

Statistics. Below is shown the number of cases dealt with by Health Visitors during the year and also the details of visits together with clinic sessions attendances.

Cases

Children born in 1967 (1)	Children born in 1966 (2)	Children born 1962-65 (3)	Total No. of children cols. 1-3 (4)	Persons aged 65 or over (5)	No. in col. 5 visited at request of G.P. or hosp. (6)	Mentally disordered persons (7)
2051	1333	2777	6161	831	381	15
No. in col. 7 visited at request of G.P. or hosp. (8)	Persons discharged from hospital (Other than mental hosps.) (9)	No. in col. 9 visited at request of G.P. or hosp. (10)	No. of T.B. households visited (11)	No. of households visited re other infectious diseases (12)	No. of T.B. households visited by T.B. Visitors (13)	
13	45	39	394	447	—	

Visits

	1959	1960	1961	1962	1963	1964	1965	1966	1967
(a) To expectant mothers :									
(i) First Visits	234	315	343	477	569	459	388	364	330
(ii) Total Visits	322	378	518	715	874	762	633	670	725
(b) To children under one year of age :									
(i) First Visits	1,961	1,961	1,775	1,949	2,337	2,275	2,110	1,958	2,009
(ii) Total Visits	6,475	7,561	8,495	7,977	10,402	11,928	9,539	8,817	6,440
(c) To children age 1 and under 2 years									
Total Visits	3,553	4,113	4,041	4,328	5,258	6,147	4,964	6,056	6,125
(d) To children age 2 but under 5 years:									
Total Visits	7,012	8,438	6,315	6,633	8,066	9,590	8,999	10,853	9,806
(e) To other cases (except school children)									
Total Visits	2,276	2,207	3,925	5,513	6,959	6,177	6,870	7,533	6,917
Attendance at Clinic Sessions	1,623	1,785	1,524	1,241	1,344	1,519	1,832	2,063	1,967

SECTION 25—HOME NURSING

HOME NURSING SERVICE

Once again the staffing position has been good. A further increase bringing the establishment to 35 has been maintained during the year with few changes.

At the end of the year the staff included 4 male Nurses and 4 State Enrolled Nurses.

One member of the staff resigned to start the first Private Nursing Agency in the Fylde.

Queen's District Training

During the year Mesdames Whitworth, Turner, Jones, Misses Hodges, Duerden and Mr. Whittle were successful in obtaining the certificate of the Q.I.D.N. These are the last Nurses to obtain this certificate as the Queen's Institute have discontinued training and in future the National Certificate of District Nursing will be awarded.

Student and Pupil Nurses from Victoria Hospital

Student Nurses continue to spend a morning on the district accompanying the Queen's Sister on her round.

Pupil Nurses are now spending a day on the district prior to which the Superintendent gives a talk on District Nursing and the opportunities for the Enrolled Nurse.

Laundry Service

The laundry service is still not used by many families who would benefit from it.

A problem in some homes is that there is no-one to sluice dirty sheets after use. This chore falls on the Nurse attending the patient. Incontinent pads continue to be used at the rate of 1,500 per month. This amount does not allow them to be issued to patients who are not receiving the services of the District Nurse.

Dressing bins are provided for the collection of soiled dressings. There appears to be an increase in requests for these as more homes are central heated. It is possible that bins may also have to be used for the disposal of incontinent pads.

Nursing Equipment

A second ripple mattress has been purchased for the care of very ill patients. They have helped considerably in the comfort of these patients.

Marie Curie Fund

Once again a few patients have received help in the form of extra nourishment. Requests for night Nurses or night sitters to relieve the family are difficult to meet. Our Marie Curie Nurses usually obtain other more regular employment and are then not prepared to do night work.

Transport

31 Nurses are now using their own cars and 4 are using Autocycles.

Visits

During the year the number of visits increased by 13,299 from 107,468 in 1966 to 120,767 in 1967. The increase of one in the establishment does not cover this greatly increased number of visits. This increase is partly due to more patients receiving late night injections, the earlier discharge of patients from hospital and the increasing number of patients who cannot obtain a hospital bed. These patients require two or more visits per day. The following table shows the number of patients attended and the respective number of visits made:

	Analysis of Cases				Visits to all Cases			
	Under 5	5-65	Over 65	Total	Under 5	5-65	Over 65	Total
Tuberculosis	—	33	5	38	—	2689	451	3140
Surgical	19	450	486	955	248	9380	16770	26398
Medical	16	852	2370	3238	202	22445	67867	90514
Infectious Disease ..	—	3	—	3	—	29	—	29
Maternal Complications	—	24	—	24	—	228	—	228
Others	—	48	99	147	—	87	371	458
TOTAL	35	1410	2960	4405	450	34858	85459	120767

By comparison with 1966 the above figures show increases of 355 cases and 13,299 visits.

An increase is also recorded in the number of patients requiring injections, the number of patients being 7,658, 720 more than in 1966. Injections given totalled 46,735, an increase of 1,175 over 1966.

					Patients	Injections
Anti-Biotics ... ..	...	...	...	...	311	4,573
Diabetics ... ..	...	...	...	...	539	13,506
Other ... ..	...	...	...	...	6,808	28,656
					<u>7,658</u>	<u>46,735</u>

Visitors to the town continued to seek treatment and 1,105 visits were made to patients requiring the following service:—

Surgical Dressings	...	...	...	...	30
General Nursing	...	...	...	...	17
Enemas ... ..	...	...	...	...	5
Insulin Injections	...	...	...	...	52
Other Injections	...	...	...	...	80
					<u>184</u>

CO-OPERATION WITH LOCAL HOSPITALS

MIDWIFERY

There is close contact between Glenroyd Maternity Hospital and the District Midwives. The Superintendent visits the hospital to give a talk to each set of student midwives before they commence district training. The midwives visit the hospital whenever they wish to discuss pupils' training or any of their patients.

VICTORIA HOSPITAL

Sister from Ward 9 usually phones the Superintendent if for any reason a patient is to be discharged early.

ST. ANNES HOSPITAL

Little liaison—patients discharged after one week and phoned message received. A few patients investigated and booked for early discharge.

GENERAL

Liaison mainly by telephone followed by written confirmation. A few nurses—mainly ex-Victoria Hospital staff—visit regarding their patients.

SECTION 26—IMMUNISATION AND VACCINATION

The overall figures for immunisation do not show much variation from the previous year; it is noteworthy, however, that fewer polio vaccinations of infants have been carried out this year and it may well be that the absence of any cases of poliomyelitis in the community has made the public a little complacent about the need to have their children protected.

The number of children protected against diphtheria, whooping cough and tetanus has been maintained this year, and it is gratifying to see that considerable numbers are being immunised against tetanus in particular; this being in keeping with the national policy of encouraging active immunisation against tetanus in order to avoid having to administer anti-tetanus serums to persons with wounds.

It is important that the public be kept constantly informed of the need to have children protected against the more serious infectious diseases; health visitors from the department do their best to encourage mothers to bring their children for immunisation but shortage of staff this past year has hindered the department's efforts in this direction.

Smallpox vaccination

Persons aged under 16 years

Age at date of Vaccination	Under 1	1	2 to 4	5 to 15	Total
Number vaccinated	393	353	157	191	1094
Number re-vaccinated	1	1	12	153	167

Diphtheria, Whooping Cough, Tetanus and Poliomyelitis
Vaccination of persons under 16 years completed during 1967

Table 1—Completed Primary Courses—Number of persons under age 16

Type of vaccine or dose	Year of birth					Others under age 16	Total
	1967	1966	1965	1964	1960-63		
1. Quadruple DTPP ..	—	—	—	—	—	—	—
2. Triple DTP	582	734	68	12	15	4	1415
3. Diphtheria/Pertussis ..	—	—	—	—	—	—	—
4. Diphtheria/Tetanus ..	5	19	8	19	167	105	323
5. Diphtheria	—	—	—	—	9	19	28
6. Pertussis	—	—	—	—	—	—	—
7. Tetanus	—	1	3	6	57	373	440
8. Salk	—	—	—	—	—	—	—
9. Sabin	187	952	129	52	296	137	1753
10. Lines 1+2+3+4+5 (Diphtheria)	587	753	76	31	191	128	1766
11. Lines 1+2+3+6 (whooping cough) ..	582	734	68	12	15	4	1415
12. Lines 1+2+4+7 (Tetanus)	587	754	79	37	239	482	2178
13. Lines 1+8+9 (Polio) ..	187	952	129	52	296	137	1753

Table 2—Reinforcing Doses—Number of persons under age 16.

	1967	1966	1965	1964	1960-1963	Others under age 16	Total
1. Quadruple DTPP ..	—	—	—	—	—	—	—
2. Triple DTP	3	112	238	27	68	25	473
3. Diphtheria/Pertussis ..	—	—	—	—	—	—	—
4. Diphtheria/Tetanus ..	—	2	11	8	1061	1163	2245
5. Diphtheria	—	—	—	—	5	21	26
6. Pertussis	—	—	—	—	—	—	—
7. Tetanus	—	—	—	—	2	20	22
8. Salk	—	—	—	—	—	—	—
9. Sabin	1	7	9	4	861	221	1103
10. Lines 1+2+3+4+5 (Diphtheria)	3	114	249	35	1134	1209	2744
11. Lines 1+2+3+6 (Whooping cough) ..	3	112	238	27	68	25	473
12. Lines 1+2+4+7 (Tetanus)	3	114	249	35	1131	1208	2740
13. Lines 1+8+9 (Polio) ..	1	7	9	4	861	221	1103

SECTION 27—AMBULANCE SERVICE

The position with regard to staff and vehicles at the end of the year was as follows:—

Staff. There was an increase of two Driver/Attendants on the establishment during the year, the staff employed being; Ambulance Officer, one Station Officer, four Shift Leaders and 44 Driver/Attendants.

During the year, one Driver died, two Drivers retired, and one left the service.

Heavy sickness during the year again has cost the section a nett loss of 813 working days equal to 152 working weeks

Vehicles

Ambulance:	Dennis Diesel	9
	Austin Diesel	2
Dual Purpose:	Commer Diesel	3
	B.M.C. Diesel	4
Sitting Cars	Morris Oxford Estate	2

Train Journeys. With the introduction of Diesel Walk-through carriages, which cannot accommodate stretchers, the transport of patients by rail has fallen considerably, only 13 cases being moved by rail every year. The loss of this form of transport has placed a heavier burden on the service by having to transport by road.

Oxygenaire Unit. The demand for this service remains fairly constant, thirteen demands over the past year being made for use of this equipment.

"Flying Squad". Twenty-one requests were made for this service, 14 being in the Lancashire County Area, and seven in the Borough.

Police Escort Journeys. Five journeys using police escort were made during the year; two of these being to the Burns Unit at Booth Hall Hospital, Manchester, and the remaining three to Preston Royal Infirmary with serious head injuries.

Statistics. The following charts summarise the cases moved, journeys and mileage run during 1967. Figures for 1966 are given for comparison.

	1967		1966	
	Stretcher	Sitting	Stretcher	Sitting
OUT PATIENTS "IN"	394	20650	373	20863
OUT PATIENTS "OUT"	354	20620	360	20266
HOSPITAL ADMISSIONS	2082	1561	2534	1695
HOSPITAL DISCHARGES	1053	4597	1003	4432
HOSPITAL TRANSFERS	962	708	1032	848
NURSING HOMES, CONVALESCENT HOMES ..	285	150	323	95
INFECTIOUS DISEASES	7	1226	14	1212
CHIROPODY.. .. .	—	1003	—	1149
MIDWIVES	—	172	—	26129
TRAINING CENTRES	—	21957	—	26129
SPASTIC CENTRE	—	101	—	—
EMERGENCIES	3725	1787	4072	1993
HOUSE TO HOUSE REMOVALS	83	38	97	38
ROOM TO ROOM REMOVALS	73	20	77	25
WARD TO WARD REMOVALS.. .. .	194	6	—	—
GLENROYD	—	—	269	5
TRAIN	8	46	5	54
MISCELLANEOUS	10	4826	8	2251
TOTAL PATIENTS CARRIED	9230	79367	10187	81274

	1967			1966		
	Ambulance	Dual Purpose	Cars	Ambulance	Dual Purpose	Cars
JOURNEYS INVOLVING PATIENT	19186	5613	1627	14352	5089	1433
SPECIAL JOURNEYS	191	13	17	114	6	31
WASTED JOURNEYS	244	3	6	304	2	15
MILEAGE	192470	67817	46352	185549	93029	51101

SECTION 28— PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Loan of Equipment. Stocks of equipment available for loan have remained at more or less the same level as 1966. Short term loans have continued, a large proportion being loans to visitors of invalid chairs for a week or two during the summer months.

The total number of loans, 630, shows an increase of 42 over 1966. Since 1963 the number of loans shows an increase of 48 per cent. Details of stock and loan of equipment are shown in the following table, the figures show actual loans made and do not include renewals. Enuretic machines are loaned only on the recommendations of the Medical Officers in charge of Clinics.

Loan of Equipment—1967

Article	Stock	Quarter Ending March	Quarter Ending June	Quarter Ending Sept.	Quarter Ending December	Totals
Bed Pans	48	45	27	35	35	142
Bed Rests	34	27	28	24	22	101
Air Rings	36	20	23	16	12	71
Rubber Sheets	51	12	14	15	13	54
Invalid Chairs	27	10	21	20	7	58
Male Urinals	30	10	5	10	6	31
Female Urinals	14	2	1	—	—	3
Bed Cages	9	4	3	8	8	23
Commodes	24	17	17	14	17	65
Crutches	33 prs.	2 prs.	2 prs.	—	1 pr.	5 prs.
Enuresis Alarms	18	9	7	3	21	40
Feeding Cups	8	2	—	1	—	3
Bed Boards	2	—	1	1	—	2
Overhead lifting chair, beds and mattresses (complete unit)	2	1	1	1	1	4
Pneumatic toilet seat covers	4	—	—	—	—	—
Ripple Beds	1	1	2	4	—	7
Spinal Carriage	1	—	—	—	—	—
S.U. 6 Vaculiser	1	—	—	—	—	—
Walking Cradles	3	—	1	—	—	1
Walking Aids (Pick-up)	11	4	5	1	1	11
Walking Sticks (three-legged)	12	2	1	2	4	9
Totals	—	168	159	155	148	630

Laundry Service. This service, which started in 1964, has undoubtedly fulfilled the expectations of benefit to the chronic sick who await hospitalisation and where washing and drying facilities leave much to be desired. Expressions of appreciation confirm this benefit. The sheets are delivered and collected twice weekly; the soiled sheets being taken to Devonshire Road Hospital to be laundered.

With two more cases than in 1966, the number of sheets has increased by over 900, thus indicating that some of the cases were obviously of a more severe nature.

The yearly figures are shown in the following table.

Year	No. of new cases	Cases continuing	Total cases	Sheets issued	Sheets Laundered
1964	44	—	44	4,021	3,622
1965	43	8	51	4,780	4,310
1966	40	10	50	4,301	3,751
1967	42	10	52	5,222	4,535

TUBERCULOSIS

The Department employs two part-time health visitors on work concerned with the care and after-care of tubercular patients, and close liaison with the Chest Clinic of the Blackpool and Fylde Hospital Management Committee was maintained. The health visitors act as a relief for the Clinic nurse, when possible, during holiday periods.

Summarised below are figures showing the visits made during the year in relation to Tuberculosis work:—

Home Visits

Respiratory:

First visits	...	...	...	...	...	...	...	...	...	34
Subsequent visits	...	...	...	...	...	...	...	...	...	771

Non-Respiratory:

First visits	...	...	...	...	...	...	...	...	...	8
Subsequent visits	...	...	...	...	...	...	...	...	...	58

Contacts:

First visits	...	...	...	...	...	...	...	...	...	282
Subsequent visits	...	...	...	...	...	...	...	...	...	193

Other Chest Conditions:

First visits	...	...	...	...	...	...	...	...	...	7
Subsequent visits	...	...	...	...	...	...	...	...	...	57

Undiagnosed:

First visits	...	...	...	...	...	...	...	...	...	2
Subsequent visits	...	...	...	...	...	...	...	...	...	6
Other visits	...	...	...	...	...	...	...	...	...	223

BACILLE CALMETTE GUERIN VACCINATION (B.C.G.)

Contact Scheme. The work in connection with contacts of tubercular patients is carried out by the Chest Clinic of the Blackpool & Fylde Hospital Management Committee, who have furnished the following figures:—

	Under 6 wks.	6 wks- 2 yrs.	2-4 yrs.	5-14 yrs.	15 +	Total
Skin Tested ...	—	23	21	45	41	130
Found Negative ...	1	20	18	38	16	93
Found Positive ...	—	2	2	8	25	37
Number vaccinated ...	21	20	18	37	15	111

MASS MINIATURE RADIOGRAPHY

The Radiography Unit visited the town in March, April and May of this year and details of X-rays taken are shown below:—

	Males	Females	Total
Contacts ...	25	13	38
Industry ...	3,436	1,994	5,430
General Public ...	1,564	2,670	4,234
G.P. referrals ...	6	—	6
Schoolchildren aged 15 and over ...	694	698	1,392

Of these, 45 were referred to their own doctors and 19 referred to their own doctors and for further investigation at the Chest Clinic.

More detailed information of those examined and the resultant diagnoses kindly supplied by Dr. J. I. Capper, Medical Director of the Unit, is contained in the following tables:—

Table 1—Analysis of Persons Examined

Type of Examinee	MALES										FEMALES										Grand Total
	under 14	14	15- 19	20- 24	25- 34	35- 44	45- 54	55- 59	60- 65	65 & Over	Total	15- 19	20- 24	25- 34	35- 44	45- 54	55- 59	60- 64	65 & Over	Total	
G. P. Referrals ..					2	1	1	2			6										6
School Children			694								694	698									1392
Contacts ..				2	3	7	5	3	5		25	1	3	4	2	2	1			13	38
Factories/Offices ..			220	310	600	840	810	310	290	56	3436	335	170	355	415	454	180	75	10	1994	5430
General Public Volunteers ..			75	95	220	270	220	164	180	340	1564	51	114	470	700	390	280	205	460	2670	4234
Totals ..			989	407	825	1118	1036	479	475	396	5725	1085	287	829	1117	846	461	280	470	5375	11,100

Table 2—Diagnosis

	MALES										FEMALES								Grand Total		
	15-19	20-24	25-34	35-44	45-54	55-59	60-64	65 & Over	Total	Rate per 1,000	20-24	25-34	35-44	45-54	55-59	60-64	65 & Over	Total	Rate per 1,000	Cases	Rate per 1,000
Abnormalities																					
Tuberculosis requiring close clinic supervision or treatment ...				1	1				2	0.35			1					1	0.19	3	0.27
Tuberculosis requiring only occasional outpatient supervision...				1	2				3	0.52			1	1				2	0.37	5	0.45
Malignant Neoplasms ..					2	1	3	1	7	1.22								—		7	0.63
Non-malignant Neoplasms ..															2	1		3		3	
Sarcoid (including enlarged Hilar Glands)																		—		—	
Acquired Cardiac abnormalities and abnormalities of the Vascular System ..																					
Congenital Cardiac abnormalities and abnormalities of the Vascular System ..									2					1				1		3	
Pneumoconiosis without P.M.F. ..						1			1		1							1		2	
			2	1	10	8	2	3	26					11	13	2	2	29		55	

CERVICAL CYTOLOGY

The Cytological Service for the prevention and early diagnosis of Cancer of the Cervix was begun in Blackpool in July, 1966.

Throughout 1967, the service was maintained and consolidated. Although it had been hoped to open a third clinic and carry out a publicity campaign, this was not possible owing to staff difficulties. However, the third clinic will open in January, 1968, and when full staff is available by the early summer, the publicity campaign will be initiated.

As in 1966, the service was available to all women in Blackpool irrespective of age, and many women under 30 years have availed themselves of the service.

The female staffs of a government department and a chain store were done as special projects.

Full co-operation from the Pathology Department of the Victoria Hospital has been present at all times and has done much to ensure the smooth running of the service.

The close liaison established with the Consultant Gynaecologists has ensured the quick referral of all positive smears and their rapid investigation.

Follow up of the eighth positives occurring in 1967 has shown that seven had cone biopsies in the first instance, six of which showed Carcinoma-in-Situ, the other epidermidisation only. Four patients ultimately had total hysterectomy performed, and the other two have had negative repeat smears since operation.

The eighth positive smear had biopsy of cervix and removal of polyps and no abnormal pathology was detected.

As was found in 1966, a considerable amount of other pathology was detected, some causing symptoms, some not; and those thought to require treatment were referred, either to their own general practitioners or to the Consultant Gynaecologists. A breakdown of the other pathology found is shown at the end of the statistics tables.

Statistics for 1967

Total number of smears taken	...	...	966
Number of repeat smears taken	...	...	15
Number of positive smears	...	...	8
% positive smears	...	...	0.83%
Ratio of positive smears	...	...	8.3 per thousand.

Breakdown of Positive Smears

Related to Social Classes

I	II	III	IV	V	Social Grade
—	3	5	—	—	+ ve smear

Related to Age Distribution

20-29	30-39	40-49	50-59	60-69	Decade
—	7	—	—	1	+ ve smear

Related to Parity

0	1	2	3	4	5	6+	Para.
—	2	3	—	2	—	1	+ ve smear

The other pathology detected whilst doing the smear test includes:—

- 240 Cervical Erosions
- 192 Complaining of vaginal discharges to excess
- 27 Trichomonal infections
- 7 Moniliat infections
- 28 Cervical polypi
- 5 Uterine fibroids
- 8 Prolapses
- 20 Other miscellaneous complaints

It has been noticed that the "at risk" group of women have been reluctant to come forward and it will be towards this group that the major effort will have to be directed during the coming year.

CHIROPODY SERVICE

This service is organised for persons of retirement age i.e., males 65 years, females 60 years, expectant mothers and registered disabled persons. For each attendance a charge of 2/6d. is made. Ambulance transport facilities are arranged for patients unable to use other means of transport; this facility, however, is limited to two patients per session.

An increase in the number of sessions from 905 to 987 allowed more treatment to be given. New cases in the year increased by 81 to 689, and home visits again showed the greatest increase from 1,840 to 2,325. Sessions are held at four clinics—Bispham, Layton, Hawes Side and the Municipal Health Centre. Details are as follows:—

	1967	1966	1965	1964
1st visits (all clinics)	689	608	590	592
Revisits ...	6,162	5,697	4,906	4,013
Sessions held ...	987	905	818	694
Home visits ...	2,325	1,840	1,266	791

The steady increase in the number of new applications for Chiropody Treatment is due in the main to the importance that medical practitioners and social welfare workers place on their patients having skilled attention where necessary.

Mr. Catton, one of the Chiropodists, reports on the abnormalities affecting feet in the aged.

"In old age, pathological changes occur in both function and structure due to trauma and other constitutional disturbances. The arches of the foot breakdown; toes become distorted or dorsi-flexed. The distal aspect of the toes bends downwards and the medial joints project upwards. All these factors produce what is commonly known as corns and callous formations, which are seen to a large degree in patients attending the clinics. A high percentage of patients suffer from onychophosis (thickening of nail structure) and also onychocryptosis (ingrowing toe-nails). Both these conditions call for the skill of the chiropodist, and patients are grateful for the comfort and relief obtained.

Callous on the metatarsal area of the foot with the central heloma development is quite common also. The removal of these conditions plus suitable padding makes a patient feel (as they express) like "walking on air".

Hallux-valgus, commonly called a bunion, is observed more commonly in females than in males; the reason being obvious. This is an outward deviation of the head of the first metatarsal joint, not necessarily giving rise to discomfort unless a corn (heloma) has developed at the apex of the joint. Removal of this with suitable palliative procedures brings instant relief.

These are some of the things we have to deal with, which no doubt contributes largely to the well-being and comfort of all concerned."

CONVALESCENT CARE

No cases during 1967 were recommended for convalescent care. One case which was brought to the notice of the Department was not approved.

SECTION 29—HOME HELP SERVICE

The Organiser, Mrs. I. Partington, reports on a year of expansion; expansion in a demand for the service; expansion of the labour force, and, unfortunately an expansion in the waiting list, which has become a serious feature during recent years. There is little doubt that with the increased emphasis on domiciliary services these trends are likely to continue in the foreseeable future.

During the year the weekly case-load rose from 800 households to almost 1,000; the total number of separate households serviced in the year being in the region of 1,260. It is a matter of some interest that over 700 cases received continuous help throughout the year, and of the persons helped, some 90 per cent. could be classified as aged and almost all the remainder were chronically sick.

During the year the number of home helps increased by 19 to a total of 187 but none of the new recruits were agreeable to working more than 30 hours per week. Resignations totalled 63, and this problem combined with that of staff sickness is causing much concern, but there is no doubt that pressures, both of work and of a psychological nature, are a major contributory factor. All the new recruits received

considerable guidance from the senior home helps, and although a considerable number resigned due to the onerous nature of the duties, the remainder have been valuable members of the staff.

The senior home helps continue to play a major role in the efficiency of the service. Apart from their supervisory duties they have been able to act as a valuable link between the home helps and the administration, and also keep a watchful eye on cases which cause concern at periods when the patients would not otherwise be visited. These members of my staff made over 7,000 visits during the year.

In August the administration was strengthened by the appointment of an additional assistant organiser. I am pleased to report that the Health Committee was able to appoint Mrs. Irene Lea who for a number of years has been employed as a senior home help and the resultant vacancy was again filled by an internal promotion. Both of these promotions have proved highly satisfactory and have had the effect of providing desirable incentives for other members of the staff.

Many recipients of the service and their relatives regularly express their appreciation of our efforts and fortunately complaints were not excessive. In fact, of all the problems facing the section, the difficulty of attracting and retaining suitable personnel is the greatest. The position is especially acute during the summer months when there are so many alternative forms of temporary and part-time employment available within the Borough. In fact most of the complaints received were either because there could not be a more frequent service or because of the charges involved in certain circumstances. The charges levied ranged from a full cost case of 5s. 7d. per hour down to a free service for people in receipt of a supplementary pension, now known as a social security allowance.

There was the usual day to day contact with other welfare services and regular and frequent contact with general practitioners and hospital authorities. Whilst there are restrictions on the finance available and the labour obtainable, it seems likely that we shall have to continue to "ration" the resources available and continue to spread the service usefully, if even a little thinly at times.

The table below shows the number of cases and hours involved:—

					1967	
Type of Case					Cases Attended	Hours Worked
Confinements at Home	...	...	...	...	9	131
Aged	...	...	...	...	1,139	180,568
Chronic Sick	...	...	...	...	59	8,243
Tuberculosis	...	...	...	...	4	335
Mentally Disordered	...	...	...	...	4	148
Others	...	...	...	...	55	4,469
					1,270	193,894

Cases and hours worked for previous years are as follows:—

	Cases	Hours Worked
1966	1,051	176,720
1965	997	168,724
1964	921	163,053
1963	896	152,120
1962	857	145,242
1961	860	118,140

Section 51—Mental Health

During 1967 the Mental Health Section was able to consolidate some of the services established in 1966. There is still a lot that could be done, particularly with regard to services for the mentally subnormal and a more intensive social casework service for the mentally ill, but the limited staff available makes this impracticable at present.

There are still a number of medical practitioners in the hospital service and general practice who do not seem to be aware of the changed role of the Mental Welfare Officer, which became effective when new legislation was introduced by the Mental Health Act, 1959. The Mental Welfare Officer has no legal authority to make any request for cases to be admitted to hospital. He can only assist with admission when a medical practitioner has carried out an examination and recommends that a patient needs to be treated in hospital. It is necessary to remember that mental disorder is an illness, which requires the diagnostic skills of a medical practitioner, in the same way as other illnesses.

MENTAL HEALTH SOCIAL WORK

The social casework done by the Mental Welfare Officer continues to be the most valuable sphere of activity in the Mental Welfare section. However, a large proportion of the Mental Welfare Officer's time is taken up with emergency situations. The crises which are precipitated by these emergencies create pressures which could, in fact, be reduced by closer liaison between the agencies involved.

The following figures show cases dealt with by Mental Welfare Officers during the period under review:—

New Cases Referred	...	...	...	463
Admissions to Hospital	...	...	...	442
Number of Visits	...	...	...	7,635

HOSTELS

The residential and day-care services provided by Rydal Lodge and Belmont House continue to be of immense value to the community. A total of 215 persons have had hostel services made available to them during 1967.

One of the features of the hostel service which made a valuable contribution to the rehabilitation of residents has been the occupational therapy group. This has been found especially helpful at Belmont House, where it is necessary for some of the residents to regain the habit of regularity in working to a set pattern of hours.

TRAINING

In October, 1967, Mr. J. S. Washington was seconded to Manchester University where he is taking a one year course leading to the Certificate in Psychiatric Social Work.

In September, 1967, Miss Carolyn D. Barling was seconded to the London North West Polytechnic, where she is taking a two year course leading to the Certificate in Social Work.

Woodlands School—Junior Training Centre

The school had another successful and stimulating year. An essential part of schooling is to help children to achieve social competence. The following list of some of the years activities shows the diversity of this training.

1967

- 17th and 18th January Mr. Linsie (Educational Psychologist) filmed "A day at Woodlands".
- 24th January Dedication of Girl Guides Flag and enrolment of Rangers.
- 7th June "Mental Health Week" School Open Day—Many visitors attended between 10.00 a.m. and 4.00 p.m.
- 4th July Inter-school Sports.
Eleven Schools competed. The Mayor and Mayoress, members of the Health Committee, and Dr. Talbot Deputy Medical Officer of Health of Blackpool and other officials from the Health Department joined Children and Staff.
Woodlands School pupils not competing in the sports were entertained at Civil Defence Headquarters with a Disney film and also had a wonderful time.
- 11th July Children taken to Stanley Junior School for the Mikado, presented by the pupils.
- 19th July School Sports.
Amongst visitors attending: Mr. Harmer (Chief Fire Officer) and Mrs. Harmer, Councillor Lowe and Mrs. Lowe.
- 19th Sept. Visit to the Circus.
- 14th Sept. Children taken to see Tanya the Elephant. Great time was had by all children and Staff alike.
- 28th Sept. School Trip to Trentham Gardens.
- 24th Oct. Official ceremony of handing over of Minibus to Woodlands School, performed by:
the Chairman of Civil Defence, Councillor C. Lowe,
and received by:
Chairman of Health Committee, Councillor C. Nuttall, J.P.
- 7th Nov. Presentation of Language Master Machine by Mrs. Adams, Blackpool and Fylde Association for Mental Health; Councillor C. Nuttall; Dr. D. W. Wauchob; and other members of the Health Committee and Officials of the Health Department were present.
- 16th Nov. Members of Poulton Teacher Training College Students' Union presented a gift of a cine camera and projector. This gift is very greatly appreciated, as is the Students continuous support.
- 11th Dec. Children taken to Stanley Junior School for the "Festival of Carols" presented by the pupils.
- 13th Dec. The Christmas Concert. Present Councillor Lowe and Mrs. Lowe, and over 120 parents and friends.

19th Dec. Christmas Party. Present were: The Mayor and Mayoress of Blackpool, Chairman and members of the Health Committee, Medical Officer of Health, Dr. Wauchob, and other officials of the Health Department.

Among the many Visitors to Woodlands School:—

Councillor A. Pilling, D.S.M., President of the Boy Scouts Association
Head Teacher and Deputy, Todmorden Hospital School.

Deputy Head Teacher of Thornton Cleveleys Great Arley School.

Danny Ross — he had “first game” on our Putting Green.

Tutors and Students from Harris College, Preston.

During the year seven students from the Harris College, Preston, courses for T.M.H.C. (Training Council Diploma) spent periods of practical Training at Woodlands School.

Special Care Unit

A number of physiotherapy aids have been purchased during the year, in order to assist Physiotherapists and Teachers in their programme of motor development and motor co-ordination.

These severely physically handicapped children use the walking frame, parallel bars and other equipment and enjoy the individual attention given to each one of them. They are learning to achieve movement of the limbs, and ability to formulate words, through various stimulating activities. The children also have swimming lessons.

A progressive plan of work has been accepted and the needs of every child assessed, in order to provide the best possible environment for their development.

The Special Care Unit has acquired the busy purposeful atmosphere that the Children appreciate and enjoy.

Junior Training Centre.

Social Competence Training

Woodlands has been enriched over the years by many useful additions—which have made School life more interesting and pleasant both for the Children and the Teachers.

The most appreciated item, however, must be our Minibus—displaying the School Badge at the doors—capable of carrying eight children and one adult, plus driver and co-driver.

The Minibus has opened new avenues of instruction and pleasant learning; and Social Competence Training has acquired a new dimension.

Weekly a group of children are ready for “exploring” and observing further afield that which has not been possible until now.

We are of course aware that it is essential to maintain teaching on practical grounds, so as not to waste the Children's energy and powers of concentration (no matter how limited).

Their horizon is however enlarging, awakening interest in things which were before beyond their reach.

The Children of Woodlands are now able to see and recognise, and to talk about so many more aspects of society, and gaining new experiences are making one more step forward towards their integration in community life.

Adult Training Centre.

I am pleased to report that construction of the Adult Training Centre commenced in March, and it is expected that it will be completed by April, 1968. The Centre will accommodate 90 trainees of both sexes, and will have a pre-vocational unit to accommodate 10 persons. This will bring the provision of places per 1.000 population in Blackpool to equal the national average.

PUBLIC HEALTH ACT, 1936—REGISTRATION OF NURSING HOMES

There were no additional registrations of premises as Nursing Homes within the meaning of the above Act, and the Nursing Homes Act, 1963, during 1967.

Periodic inspection of the eight Homes were carried out by Medical Officers of the Department, satisfactory reports being returned in all cases.

A list of the Nursing Homes with number of beds is shown below.

Name of Home and Address	No. of Beds	
	Maternity	Others
Ascot Nursing Home, 13 Luton Road	—	14
Convent of Our Lady of Wisdom, 575 Lytham Road	9	77
Northwood, 19 King Edward Avenue	—	13
Inglehurst, 129 Newton Drive	—	18
St. Teresa's Nursing Home, 188 Norbreck Road ...	—	12
Reads Avenue Nursing Home, 160 Reads Avenue...	—	21
Cleveland Nursing Home, 32 King George Avenue ...	—	14
New Victoria Nursing Home, 137 Hornby Road ..	—	21
TOTAL	9	190

Agencies for the Supply of Nurses. In 1967 there was one application for registration under the Nurses Agencies Act, 1957, and this application was granted. In essence, the Act provides for the supply of nurses on an agency basis for persons wishing to engage a nurse for a limited period.

MEDICAL EXAMINATIONS

1,374 medical examinations on behalf of the local authority were carried out by the department's Medical Officers, and the details of results are as follows:—

	FIT						UNFIT			Final Decision Postponed
	Unconditional	Too old for Superannuation	For Part Time only	Temporary	To Resume or continue	For Employment	Permanent Ill-health	To Resume Normal Duties		
All Departments	1151	50	2	22	69	18	35	18	9	
Airport	7	—	—	—	4	—	1	—	1	
Baths.. ..	3	—	—	1	4	1	—	—	—	
Blind Society	2	—	—	—	—	—	—	—	1	
Children's	9	—	1	—	—	—	—	—	—	
Cleansing	50	15	—	3	5	1	5	1	1	
Civil Defence	2	—	—	—	—	—	—	—	—	
Education	223	2	—	4	9	2	5	2	1	
Electrical Services ..	58	—	—	1	2	—	—	2	—	
Fire	12	—	—	—	1	—	—	—	—	
Health	115	1	—	3	4	—	1	—	1	
Highways	107	3	—	4	4	—	—	1	1	
Libraries	22	—	—	—	—	—	—	—	—	
Magistrates	1	—	—	—	—	—	—	—	—	
Parks.. ..	53	4	—	—	2	1	2	7	—	
Police	15	19	—	—	17	—	—	1	—	
Publicity	4	—	—	1	—	—	—	—	—	
Surveyors	20	—	—	—	—	—	1	—	—	
Transport	341	2	—	3	14	11	11	4	3	
Treasury	32	3	—	2	—	1	—	—	—	
Town Clerk	22	—	—	—	2	—	1	—	—	
Weights & Measures ..	4	—	—	—	1	—	—	—	—	
Welfare	49	1	1	—	—	1	—	—	—	

This chart shows the state of fitness of all people examined according to department

WELFARE SERVICES—NATIONAL ASSISTANCE ACT, 1948

Section 47

Five cases were brought to the attention of the department as requiring action under this section. Details are as follows:—

Case "A"—Mr. "A", aged 80 years, was visited by a Medical Officer at the request of his doctor who was of the opinion that Mr. "A" was unable to look after himself. The home was found to be in a dirty, smelly condition. Mr. "A" looked frail and stiff, the main features of his condition being a well marked Oedema of both legs extending up to his knees. Fluid was oozing out of his legs on to his clothes and in addition there were two large ulcers on his right leg. He stated that he slept on a chair in front of a large open electric fire, and only went upstairs to visit the toilet, and that even this he found difficult. Meals were provided by a neighbour. Mr. "A" refused the advice of the Medical Officer that he should go to hospital for treatment.

It was felt that Mr. "A" would benefit considerably from treatment in hospital and a Compulsory Order was considered necessary.

Case "B"—Mrs. "B", aged 66 years, was visited at the request of her G.P. The lady was living in one room on the top floor, this room being in a filthy, disordered condition. Scraps of stale food were on the table and on the dirty cooking stove, whilst the floor was littered with debris. Mrs. "B" was a frail elderly lady in a poor state of nutrition. Her legs were very thin and wasted, with bruising on the outside of the left leg.

The Medical Officer concerned formed the impression that she was quite unable to care for herself and unless she was moved to hospital would not survive long. All appeals to her failed and it was therefore decided that a Compulsory Order was necessary.

Case "C"—Mrs. "C" was visited by a Medical Officer at a Welfare Home as she had stated her intention to leave, despite the advice of Welfare staff. She was found to be a frail old lady of 86 years with a running gait due to Parkinson's Disease. She was rather deaf, tended to talk in whispers, and did not answer questions rationally although she knew her age, whereabouts and home address. When her home was visited it was found to be in a state of filth and chaos—it was quite obvious she could not return there. Earlier in the year she had been found collapsed in her home and spent several months in hospital. The Medical Officer did not consider her capable of looking after her own affairs and a Compulsory Order was pursued.

Case "D"—Mrs. "D" was found lying in bed, incapable of getting up or seeing to her toilet. Her clothing was badly stained with faeces, she was incontinent and did not expect to be changed for 24 hours. During a recent spell of diarrhoea she had been using a chamber pot which she kept on top of the bed for future use as she was incapable of bending over and putting it on the floor. She was very emaciated, but mentally alert and worried that if she left her flat it would be re-let in her absence. Her son was an invalid in a wheelchair; her daughter-in-law came every morning to tidy around and a neighbour supplied a cup of tea in a morning but no food.

The Medical Officer concerned considered her in need of care and attention, a Compulsory Order being necessary, for although she promised to go to hospital it was thought she might well change her mind

Case "E"—Mrs. "E", aged 88 years, was visited by a Medical Officer who found her to be in fair health for her age, looking well nourished with a good complexion. However, she was grossly irrational, did not know her age, day of the week or name of the month. She talked of going to live with her mother and sister, who had been dead for a long time. She thought she was living in Blackburn and gave nonsensical answers to questions of routine household management.

The lady had been picked up by the police on several occasions after being found wandering in the town at night, and the Medical Officer concerned considered it unsafe to leave her at home any longer in view of the serious risk of an accident resulting from her lack of comprehension. She had help from neighbours, but was alone at night, and thus it was decided to apply for an Order under Section 47.

Epileptics and Spastics

The Director of Welfare Services informs me that in accordance with the scheme for the provision of Welfare Services for Handicapped Persons made under Section 29 of the National Assistance Act, 1948, a register of such persons has been compiled and at 31st December, 1967 there were 39 Adult Epileptics and 26 Adult Spastics included in the register.

In addition to the number referred to above, on the 1st January, 1967 there were 13 Epileptics maintained in Epileptic Colonies and during the year there were no new admissions or discharges, making a total of 13 maintained at 31st December, 1967.

Registered Blind and Partially Sighted Persons

The numbers of blind and partially sighted persons on my register as at 31st December, 1967 are:—

		Male	Female	Total
Blind Persons	...	175	292	467
Partially Sighted	...	76	178	254

The number of blind and partially sighted cases receiving treatment during the year in accordance with the recommendation given under Section F of Form B.D.8, were as follows:—

Cause of Disability	No. of cases receiving treatment
Cataract ...	4
Glaucoma ...	3
Senile Macular Degeneration ...	1
Myopia ...	3
Diabetes ...	3
Trauma ...	—
Others ...	15

There were no Ophthalmic Neonatorum cases registered during the year.

CREMATIONS

The Medical Officer of Health, Deputy and one Assistant Medical Officer are authorised under the Cremation Act to issue certificates giving permission to cremate. Applications to cremate at the Blackpool Crematorium numbered 1,978; of these 1,208 were in respect of Blackpool residents.

There was an increase of 80 as compared with last year with an increase of 49 so far as Blackpool residents were concerned.

The table below shows the trend of applications for cremation over the past six years:—

	1967	1966	1965	1964	1963	1962
All applicants. . . .	1,978	1,898	1,898	1,874	2,171	2,639
Blackpool residents . .	1,208	1,159	1,179	1,194	1,183	1,260

The decrease from 1962 results from the opening of three new crematoria serving Preston, Lancaster and Barrow.

The number of burials show a decrease of 54 on 1966.

1967	...	...	...	...	Carleton	507		
					Layton	204	Total	711
	1966	...	...	...	...	765		
	1965	...	...	...	...	798		
	1964	...	...	...	...	795		
	1963	...	...	...	...	843		
	1962	...	...	...	...	856		

HEALTH EDUCATION

The Health Education carried out by the Health Visiting Section in 1967 is as follows:—

St. Catherine's Secondary Modern School for Girls had a course in Basic Child Care, using a syllabus recommended by the National Association for Maternal and Child Welfare. Two Health Visitors undertook this work, and an examination was given at the end of the course, with very good results.

St. George's Secondary Modern School had two groups of pupils taking health education. One was mainly a practical based course, and the other was at the Certificate of Secondary Education level.

Palatine Secondary Modern School continued their course on sex education.

Tyldesley Secondary Modern School had a short course on Maternal and Child Health lasting about eight weeks.

Collegiate Grammar School for Girls had an intensive course covering two weeks which was given to senior girls in July, on having a baby and infant care. About eighty girls attended this course, and found it most helpful.

Stork Club—The Stork Club at the Health Centre for ante-natal mothers continued, and the attendances were good. In connection with this the film, "To Janet a Son" was shown to mothers and fathers to be, on two occasions in the evening.

Schools continue to bring groups of girls to visit the Health Centre and the various clinics, to see and hear about the work. Health Visitors have continued to give talks to Mothers groups, Church groups, and womens organisations on a number of subjects, particularly the work of a Health Visitor and the many aspects of Child Welfare.

Health Education continues to be an increasingly important part of a Public Health Inspector's duties.

During the year many of the Public Health Inspectors staff have given lectures and talks on food hygiene, general hygiene and other environmental hygiene subjects to persons engaged in the food industry, to schoolchildren and private societies in the Town. These lectures appear to have been much appreciated and in time should lead to better health standards. Due to the ever increasing duties delegated to Public Health Inspectors the time spent on this work during normal working hours is strictly limited and the staff have willingly given of their own time to lecture to various groups during the evenings.

The Public Health Department and Technical College have co-operated, under the auspices of the Royal Society of Health and Hygiene, in running a Course of Lectures for Food Handlers, as in past years. The attendance at these lectures has been extremely good and again members of the Public Health Inspectors staff have played their part in lecturing at these courses.

STUDENT HEALTH ADVISORY SERVICE

Since January 1967 a Student Health Advisory Service has been provided at the Technical College, and an Assistant Medical Officer has attended weekly from 4.30 to 5.30 on Tuesday afternoons, the office of the Director of Liberal Studies being made available for this purpose. As the Welfare Officer is in the office next door, this has led to close liaison in dealing with cases in which both services are involved.

The demand for consultations was slow at the start and built up gradually. Unfortunately no figures are available for the year but an average attendance for a one-hour session would probably be three. The consulting hour during autumn and spring terms has been busy but the sessions in the summer term were usually quiet due to preparation for examinations.

Cases are derived from a variety of sources, and a number are those with psychological problems referred by the Welfare Officer. Potential suicides have been seen and there have been one or two court referrals.

At a meeting held on the 11th December, 1967, between the Principal, his Deputy, the Deputy Medical Officer of Health and an Assistant Medical Officer, it was decided that the service should continue and develop along its present lines.

It was hoped that in the near future the medical officer providing the consultative service would in addition give a course of lectures in the Department of Liberal Studies.

It was also decided that in the 1968-69 session two consulting hours would be provided on Tuesday and Thursday afternoons.

This service was on an experimental basis in its first year. A good deal has been learned about the problems involved in operating such a service and a workable system is emerging. The Student Health Advisory Service of the future should take its place as a useful and integral part of college life.

BLACKPOOL HOME SAFETY COMMITTEE

During 1967 the Blackpool Home Safety Committee maintained its activities in an attempt to educate the Public in "How Accidents in the House can be avoided." As in previous years, it is unfortunate that there was a limited budget which tended to retard the activities of the committee.

A home safety hand-book was published giving details of the numbers of accidents, advice on how to avoid them and information about First Aid. Our last campaign was held at Christmas and was assisted by co-operation from members of the committee and by shop-keepers. A drug collection scheme was planned in an attempt to collect old and unwanted drugs and pills which are so often kept in and homes are the cause of a considerable number of child deaths. Due to difficulties, it was not possible to carry out this campaign in 1967 and it was postponed to a later date.

FIRST-AID SERVICES

In previous years a first-aid post was provided on the promenade during the holiday season by kind permission of "Aspro", Nicholas Products Ltd. Unfortunately, this service was not available in 1967 and the Council therefore decided that first-aid facilities, of a nature that members of the public had come to expect, should be provided. A caravan was purchased and suitably adapted for use as a first-aid post. The post was open 10 hours per day, seven days per week during the holiday season. During this time 2,148 cases were treated and the breakdown is as follows:—

Cuts and grazes...	...	...	...	...	823
Bruises and sprains	...	...	...	...	316
Foreign bodies in eyes	...	...	...	...	249
Sunburn	...	...	...	...	69
Stings and Insect bites	...	...	...	...	159
Headaches	...	...	...	...	48
Other	...	...	...	...	484

PUBLIC HEALTH ACT, 1936

PUBLIC HEALTH LONDON ACT, 1936

Public Swimming Baths

The Baths Superintendent has kindly furnished the following information:—

The Open Air Bath. Built 1923, maximum length 376 ft., maximum width 172 ft.; championship area 333 ft. x 75 ft.; capacity 1,600,000 galls; spectators accommodation 5,000; source of water supply—pumped from the sea through the

900 ft. x 8 in. intake pipeline, in an effort to obtain selective water, into a 500,000 galls. settling tank. The water is allowed to settle for a pre-determined period of a minimum of 8 hours; and is treated with a regulated dosage of chlorine, it is then filtered through four gravity-fed filters at a turn-over rate of approx. eight hours.

Derby Bath. Main Pool 165 ft. x 55 ft.; capacity 485,000 galls.; spectators accommodation 2,000; learners' pool 33 ft. x 33 ft.; capacity 17,000 galls.; source of water supply—pumped from the sea into two settling tanks 120,000 galls. capacity, prior to filtration; turn-over rate—main pool approx. three hours, learners' pool approx. two hours.

REMEDIAL SECTION. The Remedial Section of the Derby Baths, work on which was suspended due to the outbreak of hostilities in 1939, now stands completed in a modified form. In the light of the changed circumstances of needs, ideas of planning, the availability of specialised equipment and improved techniques in building, considerable alterations to the original conception were made in consultation with the Baths General Manager and the Baths Committee to make this establishment unique in the range of facilities provided. There is space within the new section for future development if demand justifies.

The Ground floor comprising some 5,680 square feet of floor area provides the Warley Road Entrance with ticket office, telephones and lift and stairs up to the Gymnasium on the second floor.

DRESSING ROOM. From the Entrance the patron enters the Cooling and Dressing Room area which provides 27 cubicles with reclining couches and wardrobes, where attendants will furnish hot towels, etc., appropriate to the treatment to be undertaken. This portion also includes some lounge area, facilities for refreshments, and toilet accommodation. From here, the patron will go to the treatment desired and return for rest, cooling and refreshment.

Facilities provided and administered by competent staff includes: Two authentic timber Sauna Baths of Finnish make, each of which will accommodate six to nine persons a session.

Five marble shampoo and massage slabs with associated basins, scotch and vichy douches, provided with hot or cold, fresh or sea water. Two stainless steel Aeratone vessels, one of which is provided with hoisting and lowering gear for aiding disabled patrons. Two vapour rooms. Suite of three Turkish Rooms, each progressively warmer. Three Bathrooms for hot, fresh and sea water baths, Luma pine and hydropathic treatment.

Provision is made in the cooling area for various electrical and infra-red treatments to be undertaken. In association with the foregoing there are ancillary showers, needle sprays and a small pool for total immersion. The central core of the ground floor area is given over to staff rooms, toilets and storage.

GYMNASIUM. The Gymnasium (2,668 sq .ft.) providing facilities for approximately 32 patrons at one time, comprises a fully furnished hall 60 ft. long by 30 ft. wide, and ancillary Instructor's Room, Kit Store, Changing Accommodation, Showers and Toilets. Equipment is provided for Basket Ball, Indoor Football, Netball, Boxing and Badminton; the enthusiast will also find a Trapeze, a Trampoline, a Punch Ball, a Cycle Exerciser, a "Readson" Stimulator, and the usual facilities for vaulting, climbing, swinging and other gymnastic activities.

DECOR. The interior finishes on the ground floor include heated and illuminated ceilings, washable plastic fabric, timber or ceramic mosaics or tiles to walls, and resilient P.V.C. carpet, ceramic mosaics or tile floors. The Gymnasium and wall is tiled and the floor consists of maple strip. The exterior of the building is clad in a protected metal sheathing which replaced the original faience. The Engineering Services to serve the above installations comprise: Two boiler houses in the basement with associated calorifiers for heating circuits, for fresh and salt water lines and tanks at roof level for storage and head.

There are diving boards in the two above establishments of international standard type up to 10 metres.

Cocker Street Bath. 81 ft. x 24 ft.; capacity 60,000 galls.; source of water supply—from the Sea-Water Works, through our filtration plant; turn-over rate approx. five hours.

Lido Pool. 100 ft. x 40 ft.; capacity 135,000 galls.; source of water supply—town-main supply (fresh water); turn-over rate approx. $4\frac{1}{2}$ hours.

Before entering the filters, in all the above establishments, the water is chemically treated with alumina and soda by means of open-type coagulation plants. The chlorine gas process admits of easy and accurate adjustments to meet the varying needs of the swimming pool, and we maintain the "Free Chlorine Content" to comply with the Ministry's standards for marginal chlorination 0.2 p.p.m. to 0.5 p.p.m. to ensure accurate control.

A special feature of the swimming bath water circulation system at the Derby Bath is the multiple inlets and outlets water withdrawal and distributing arrangement, which ensures pure water over the whole area of the bath.

WATER SUPPLY

The Authority responsible for the water supply in Blackpool is the Fylde Water Board, and the Engineer of the Board has been good enough to furnish the following information:—

Water supplied to Blackpool is collected at two sources: (a) from watersheds at Barnacre, and (b) at Stocks on the River Hodder, and is satisfactory in both quantity and quality. At both these head works, upland surface water is collected and stored in reservoirs. The watershed at Barnacre is free from human habitation and at Stocks the Fylde Water Board owns the watershed and controls all operations on it.

During the summer months the water from Barnacre was augmented by water pumped from a new borehole at Garstang, and the water from Stocks augmented by borehole water from Broughton. This water is excellent in quality but is somewhat harder than the upland water and the effect of this is shown in the chemical analyses set out later in this report.

Bacteriological examinations have been made throughout the year of both the raw water and treated water, and the results are as below:—

Source of Sample	Number Examined	Ave. No. of Coliforms Organisms/ 100 mls.	Average No. of colonies growing in Yeastral Year	
			in 2 days @37°C.	in 3 days @22°C.
RAW WATER				
Hodder	24	324	27	117
Barnacre	25	83	12	43
TREATED WATER				
Hodder				
Marton, Head Office ...				
Warbreck Reservoir ...	76	—	1	7
Barnacre				
Warbreck Tower, 108 Cornwall Ave. ...	52	—	1	2

The raw waters are liable to plumbosolvency, and in consequence they are treated with lime after coagulation and pressure filtration to a pH value which gives a positive Langelier index of corrosion. No lead has been found in samples examined.

No action has been necessary throughout the year, as no contamination has been encountered.

The level of fluoride in water supplied to the town is very low, i.e. less than 0.05 p.p.m. as F, and this is well below the optimum figure for the prevention of dental caries.

Fluoridation of Water Supplies.

The present position concerning fluoridation of water supply is that the County Borough of Blackpool have intimated that they are in favour of the addition of fluorides but as this is supplied by the Fylde Water Board it is necessary for all local authorities receiving water from them to agree also. The Lancashire County Council and the Blackburn County Borough Council are still considering the matter, whilst the West Riding County Council have formally requested the addition of fluorides. Until all these local authorities agree to the fluoridation of their water supply the fluoridation of the Blackpool water supply is not yet possible.

CHEMICAL ANALYSES OF WATER FOR BLACKPOOL - 1967

Appearance	Raw Water Stocks Reservoir	Raw Water Barnacre Reservoir	Winter Supply	Summer Supply	Marton		Winter Supply	Summer Supply	Head Office		Winter Supply	Summer Supply	Warbeck Tower and Cornwall Avenue
	Yellow with a little suspended matter	Yellowy	Warbeck Reservoir		Clear and bright	Clear and bright	Clear and bright	Clear and bright	Clear and bright	Clear and bright	Clear and bright	Clear and bright	Warbeck Tower and Cornwall Avenue
			Winter Supply	Summer Supply									
Colour (Hazen p.p.m.Pt) ..	40	36	3	3	4	4	4	3	4	4	4	2	
Turbidity (p.p.m. Silica) ..	—	—	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	
Odour ..	—	—	Nil	Nil	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	
Taste ..	6.7	6.3	7.8	7.8	7.5	8.0	8.0	8.3	8.0	8.3	8.3	7.8	
Reaction pH Value ..	—	—	0.15	0.15	0.05	0.05	0.05	0.05	0.05	0.05	0.10	0.10	
Free and Saline Ammonia as N ₂ ..	0.02	0.07	0.10	0.01	0.06	Negligible	Negligible	0.02	0.02	0.01	0.06	0.01	
Albuminoid Ammonia as N ₂ ..	0.12	0.10	0.03	0.02	0.02	0.02	0.02	0.02	0.04	0.02	0.02	0.02	
Nitrous Nitrogen as N ₂ ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	
Nitric Nitrogen as N ₂ ..	0.27	0.51	0.34	0.34	0.36	0.48	0.48	0.23	0.21	0.36	0.36	0.36	
Oxygen absorbed 4 hrs. at 27°C ..	2.02	1.96	0.37	0.43	0.80	0.63	1.04	0.45	1.04	0.80	0.80	0.28	
Free Acidity as CO ₂ ..	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	Less than 5	
Carbonate Hardness as CaCO ₂ ..	20	6	20	62	12	34	34	60	24	12	12	58	
Total Hardness as CaCO ₃ ..	32	18	42	80	30	58	58	78	44	30	30	74	
Non-Carbonate Hardness as CaCO ₃ ..	12	12	22	18	18	24	24	18	20	18	18	16	
Excess Alkalinity as Na ₂ CO ₃ ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	
Calcium as CaCO ₃ ..	26	10	34	59	22	38	38	56	38	22	22	56	
Magnesium as CaCO ₃ ..	6	8	8	21	8	20	20	22	6	8	8	18	
Total Solids dried at 180°C ..	71	64	85	136	78	101	101	132	83	78	78	119	
Chloride as Cl ..	12	13	14	16	15	15	15	16	15	15	15	16	
Sulphate as SO ₄ ..	15	13	19	22	21	26	26	34	24	21	21	16	
Lead as Pb ..	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	Less than 0.05	
Manganese as Mn ..	0.03	0.02	Negligible	0.05	Nil	0.05	0.05	0.02	Negligible	0.05	0.05	0.05	
Copper as Cu ..	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Negligible	
Iron as Fe ..	0.61	0.20	0.05	Negligible	0.03	0.07	0.07	0.08	0.08	0.03	0.03	0.03	
Aluminium as Al ₂ O ₃ ..	—	—	0.11	0.08	0.09	0.08	0.08	0.15	0.15	0.09	0.09	0.03	
Fluoride as F ..	Less than 0.1	Less than 0.1	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	Less than 0.10	

SEWERAGE OF THE BOROUGH

The abolition of pail closets and cesspools has continued during the year and the Director of Public Cleansing reports that 68 pail closets and 21 cesspools (including two out of the Borough) were emptied regularly by his Department.

The Borough Surveyor has kindly given the following details on the present and future drainage work.

(a) Works of Sewerage and Sewage Disposal carried out in 1967

- (1) Continuation of the reconstruction of Manchester Square Pumping Station.
- (2) Continuation of the construction of the 8' 6" dia. stormwater out-fall at Manchester Square.
- (3) Provision of small dia. sewers in connection with housing development.
- (4) Commencement of the Central Drive Trunk Sewer scheme involving the construction of approximately $3\frac{1}{2}$ miles of 4' 6" to 8' 6" dia. sewers in tunnel.

(b) Works of Sewerage and Sewage Disposal for 1968

- (1) Completion of 1 and 2 above.
- (2) Continuation of 4 above.
- (3) Provision of small dia. sewers for housing development.

(c) Proposed Future Works

- (1) Construction of new trunk sewer in Lytham Road area.
- (2) Small flood relief schemes.
- (3) Provision of new plant for pumping and screening stations.
- (4) Provision of sewers in conjunction with housing development.

The schemes in hand and proposed will provide reasonably adequate facilities for sewerage and sewage disposal.

The Council has agreed in principle to the establishment of a sewage treatment works at a future date.

REFUSE, ETC. COLLECTION—1967

This work is carried out by the Cleansing Department of the Corporation.

I am informed by the Director of Public Cleansing that the tonnage of refuse was less than the previous year. This was no doubt due to the poor weather during the holiday season.

The second phase of a scheme at the Refuse Disposal Works to quench and remove by conveyor the clinker drawn from the furnaces was undertaken during the year and resulted in a slight reduction in the amount of refuse dealt with at the works.

The tonnage of clay, soil, rubble, etc. received at the tip was 47,855.

The amount of refuse dealt with at the Refuse Disposal Works was 17,764 tons, whilst 45,368 tons, including refuse brought by private traders, were tipped away, and about 900 tons of night soil were removed.

Approximately 40 tons of sewage was removed from sumps, etc., at the Royal Lancashire Agricultural Show.

SANITARY INSPECTION OF THE BOROUGH

This section of the Annual Report, and the following sections dealing with Housing, Rodent Control and Disinfestation, General Food Supply and Prosecutions, give details of the variety of functions undertaken by the Chief Public Health Inspector and his staff.

ENVIRONMENTAL HYGIENE—STATISTICS

Complaints received

Verbal	...	...	...	...	...	...	...	...	3,571
Written	...	...	...	...	...	...	...	...	425

Visits and Inspections during Year

Ash Receptacles:

Satisfactory	...	...	...	...	...	...	...	1,057
Unsatisfactory	...	...	...	...	...	...	...	769
Re-inspections under Notice	...	...	...	...	...	...	...	806
Number of Galvanised Bins provided as a result of notice	...	...	...	...	...	...	...	105
Number of Galvanised Bins provided by department	...	...	...	...	...	...	...	734

Food and Drugs Act:

Butchers' Shops	...	...	...	...	...	...	...	139
Cafes and Snackbars	...	...	...	...	...	...	...	516
Dairies and Milk Shops under Milk and Dairies Regulations	...	...	...	...	...	...	...	258
Fish Frying Shops	...	...	...	...	...	...	...	65
Hotels and Licensed Premises—Boarding Houses	...	...	...	...	...	...	...	2,847
Ice Cream Premises	...	...	...	...	...	...	...	69
Food Manufacturing Premises	...	...	...	...	...	...	...	37
Food Inspections and Food Shops	...	...	...	...	...	...	...	1,896

Miscellaneous:

Abattoirs	...	...	...	...	...	...	...	108
Animal Boarding Establishments	...	...	...	...	...	...	...	18
Bakehouses	...	...	...	...	...	...	...	67
Basements (full inspections)	...	...	...	...	...	...	...	1
Basements (excluding full inspections)	...	...	...	...	...	...	...	1
Cinemas, Dance Halls, Theatres, etc.	...	...	...	...	...	...	...	23
Common Lodging Houses	...	...	...	...	...	...	...	—
Drainage Schemes	...	...	...	...	...	...	...	376
Dwelling Houses (Housing Act, 1957)	...	...	...	...	...	...	...	82
Dwelling Houses (Public Health Act)	...	...	...	...	...	...	...	135
Dwelling Houses (Rent Act, 1957)	...	...	...	...	...	...	...	3
Dwelling Houses re Housing Improvement Grants	...	...	...	...	...	...	...	123
Exhumations	...	...	...	...	...	...	...	—

Factories	...	...	...	...	...	...	...	419
Farms and Smallholdings (Agricultural Act, 1956)...	...	...	...	...	...	...	...	—
Hairdressing Businesses	...	...	...	...	...	...	...	147
Houses in Multiple Occupation (Holiday)	...	...	...	...	...	...	...	33
Houses in Multiple Occupation (Residential)	...	...	...	...	...	...	...	200
Problem Families	...	...	...	...	...	...	...	91
Infectious Diseases (including Food Poisoning and Dysentery)	...	...	...	...	...	...	...	1,155
Land and Camp Sites	...	...	...	...	...	...	...	380
Municipal Tenancy Applicants	...	...	...	...	...	...	...	315
Nuisances (Noise)	...	...	...	...	...	...	...	539
Nuisances (first inspections)	...	...	...	...	...	...	...	5,031
Nuisances (re-inspections under notice)	...	...	...	...	...	...	...	6,402
Offensive Trades	...	...	...	...	...	...	...	2
Offices, Shops and Railway Premises Act	...	...	...	...	...	...	...	1737
Pet Animals Act	...	...	...	...	...	...	...	53
Piers	...	...	...	...	...	...	...	11
Piggeries	...	...	...	...	...	...	...	12
Public Conveniences	...	...	...	...	...	...	...	20
Rag Flock and Other Filling Materials Act	...	...	...	...	...	...	...	19
Refuse Tips	...	...	...	...	...	...	...	18
Roadways, Footpaths, Back Streets and Passages	...	...	...	...	...	...	...	354
Sands and Foreshore	...	...	...	...	...	...	...	—
Schools and Churches	...	...	...	...	...	...	...	9
Slum Clearance	...	...	...	...	...	...	...	371
Smoke Abatement	...	...	...	...	...	...	...	767
Smoke Observations	...	...	...	...	...	...	...	119
Stables and Manure Heaps	...	...	...	...	...	...	...	129
Swimming Baths	...	...	...	...	...	...	...	39
Temporary Structures (Full Inspections)	...	...	...	...	...	...	...	2
Temporary Structures (Excluding Full Inspections)	...	...	...	...	...	...	...	153
Town Planning and Building Bye-Laws	...	...	...	...	...	...	...	306
Watercourses and Ponds	...	...	...	...	...	...	...	294
Water Supply	...	...	...	...	...	...	...	119
Work in Progress	...	...	...	...	...	...	...	152
Unclassified	...	...	...	...	...	...	...	2,648
Diseases of Animals (Waste Foods) Order, 1957	...	...	...	...	...	...	...	69

Number of Houses where Sanitary Defects were found

Public Health Act	...	...	...	...	...	...	...	142
Housing Act	...	...	...	...	...	...	...	82

Number of Houses where Notices were Served for the Abatement of Nuisances

Verbal Notices	...	...	...	...	...	...	...	10
Preliminary Notices	...	...	...	...	...	...	...	135
Statutory Notices	...	...	...	...	...	...	...	46

Number of Houses where Sanitary Defects were Remedied by Notice

Defects remedied as per preliminary notice	...	...	...	...	63
Defects remedied as per statutory notice	...	...	...	...	32

House Drains Tested

New Houses:

Satisfactory	...	...	...	...	...	...	...	...	322
Unsatisfactory on first test	...	...	...	...	...	...	...	...	65
Rendered satisfactory after first test	...	...	...	...	...	...	...	...	24

Old Houses:

First test—satisfactory	...	...	...	...	...	...	...	...	54
First test—unsatisfactory	...	...	...	...	...	...	...	...	64
Final test—satisfactory	...	...	...	...	...	...	...	...	24
Temp. test	...	...	...	...	...	...	...	...	37

Drains

Relaid, disconnected and ventilated	...	...	...	...	...	...	...	...	17
Repaired, unblocked and cleansed	...	...	...	...	...	...	...	...	3,735
New gullies fixed	...	...	...	...	...	...	...	...	36
Soil pipes repaired or fixed	...	...	...	...	...	...	...	...	24
Cesspools abolished	...	...	...	...	...	...	...	...	12

Waterclosets

New w.c.s fixed in lieu of privies, pail closets and defective w.c.s	...	...	...	...	...	...	...	...	9
Repaired...	...	...	...	...	...	...	...	...	13
Unblocked	...	...	...	...	...	...	...	...	—
Flushing fittings repaired and water provided	...	...	...	...	...	...	...	...	5
New pails provided	...	...	...	...	...	...	...	...	—
Pail closets abolished	...	...	...	...	...	...	...	...	2

Waste Pipes

New slop waste pipes fitted	...	...	...	...	...	...	...	...	6
New rainwater downpipes fixed	...	...	...	...	...	...	...	...	4
Rainwater pipes and roof gutters repaired	...	...	...	...	...	...	...	...	26
Slop waste pipes repaired	...	...	...	...	...	...	...	...	21
Water service pipes repaired, etc.	...	...	...	...	...	...	...	...	4
Bath, Lavatory, Slop sink and rainwater pipes disconnected over gullies	...	...	...	...	...	...	...	...	—

Miscellaneous

Accumulations removed	...	...	...	...	...	...	...	...	68
Backyards cleansed	...	...	...	...	...	...	...	...	—
Backyards repaired	...	...	...	...	...	...	...	...	5
Courts or passages cleansed	...	...	...	...	...	...	...	...	3
Courts or passages reformed or repaired	...	...	...	...	...	...	...	...	3
Erections in yards reported to Borough Surveyor	...	...	...	...	...	...	...	...	2
Dampness remedied	...	...	...	...	...	...	...	...	58

Fire ranges re-set, repaired or provided	...	...	...	...	7
Food stores provided	...	...	...	...	—
Food stores ventilated	...	...	...	...	—
Manholes, gullies, back streets, etc., reported to Borough Surveyor					48
Manholes, gullies, backstreets, etc., reported to Cleansing Department	...	...	...	...	92
Manure Receptacles abolished	...	...	...	...	1
Manure Receptacles repaired	...	...	...	...	—
New damp proof course fixed	...	...	...	...	—
New floor laid or repaired	...	...	...	...	19
New slops sink fitted	...	...	...	...	2
Premises cleansed	...	...	...	...	1
Roofs repaired	...	...	...	...	29
Various Repairs	...	...	...	...	111
Watercourses cleansed	...	...	...	...	14

Food Hygiene Regulations

First Inspections	...	...	...	...	...	...	26
Re-inspections	...	...	...	...	...	...	5,151
Verbal Notices given	...	...	...	...	...	...	122
Written Notices issued	...	...	...	...	...	...	45
Made satisfactory	...	...	...	...	...	...	215
Miscellaneous Visits	...	...	...	...	...	...	—

Ashbins

As a result of a system of work study and an incentive bonus scheme being commenced in the Cleansing Department, the Director of Public Cleansing requested the Department to carry out a survey regarding insufficient and defective refuse accommodation at a large number of premises, the addresses of which were supplied by the Director.

These premises included dwelling houses, boarding houses, hotels, restaurants, cafes, snack bars and shops of all descriptions.

The survey was carried out by Technical Assistants supervised by a Public Health Inspector and involved 1,826 inspections and 806 re-inspections.

Refuse accommodation found satisfactory	...	...	1,057 premises
Refuse accommodation found unsatisfactory	...	...	769 premises

All occupiers of premises where the refuse accommodation was found to be unsatisfactory were notified and requested to provide satisfactory covered ashbins and re-inspections are now in progress to enforce the action.

COMMON LODGING HOUSES

There are now no common lodging houses within the Borough.

ATMOSPHERIC POLLUTION

The proposal for an area of 51·65 acres of land North of Whiteholme Road, Bispham, now being developed for housing, to be declared a Smoke Control Area, has still not been confirmed by the Ministry of Housing and Local Government.

As in past years volumetric atmospheric pollution machines have been recording the smoke and sulphur dioxide pollution at three sites in the Borough continuously during the year.

The records from these machines are submitted monthly to the Ministry of Science and Technology at their Stevenage laboratory for inclusion in the National Survey of Atmospheric Pollution.

It is again very encouraging to report that pollution from both smoke and sulphur dioxide is generally lower than in 1966.

A detailed report on the operation of these machines follows this report.

Again there is very little pollution of the atmosphere from industrial and commercial premises in the Borough, and as previously reported the main pollution problem is caused by smoke from domestic chimneys.

All complaints regarding smoke, fumes and grit nuisances are investigated by the Specialist Smoke Inspector and he also carries out regular observations on chimneys at industrial and commercial premises. During the year 119 observations were made on chimneys at industrial and commercial premises, and 767 visits regarding complaints, collection of smoke and sulphur dioxide samples and visits of an advisory nature. One contravention of Section 1 of the Clean Air Act, 1956 was reported to the Related Health Services Committee and as a result of informal action a new modern boiler is to be installed at the premises during 1968.

Many minor contraventions were dealt with by the Smoke Inspector and conditions improved following technical advice given by him.

During the year nine applications were received for prior approval of the installation of boilers and heating appliances under Section 3 Clean Air Act, 1956, and all nine received approval.

There continues to be excellent liaison between this Department and the Borough Surveyor's Department regarding the erection and height of new chimneys under Section 10 of the Clean Air Act, 1956. All plans concerning chimneys are submitted to the Chief Public Health Inspector for his observations on chimney height before approval is given.

The Department's Specialist Officers have again carried out a considerable amount of technical advisory work which has helped the managements of industrial and commercial premises to overcome problems relating to their boiler and processing plants.

This advisory work has resulted in some modernisation of existing plants, and the installation of modern new plants in certain cases, and this has led to a further reduction in industrial and commercial atmospheric pollution.

The Operation of the Volumetric Atmospheric Pollution Recording Machines 1st January, 1967 to 31st December, 1967

The three Volumetric Atmospheric Pollution Recording Machines have been operating continuously during the year at the same sites as in previous years.

The machines are operating 24 hours each day and record smoke pollution by passing air through a filter paper which traps the smaller smoke particles and dust on the paper, and the amount of pollution can be calculated in microgrammes per cubic metre by scanning the stain on the filter paper under a Smoke Stain Reflectometer and from the figure obtained the amount of pollution can be read from smoke tables supplied by the Warren Spring Laboratory.

The amount of sulphur dioxide in the atmosphere is recorded by bubbling air through a weak solution of hydrogen peroxide and the amount can be calculated in microgrammes per cubic metre by means of a chemical titration.

The records are forwarded each month to the Warren Spring Laboratory of the Ministry of Science and Technology, and form part of the National Survey of Atmospheric Pollution, and they in turn supply to the Department copies of the National Records of Atmospheric Pollution.

As was the case in previous years, the heaviest average smoke and sulphur dioxide pollution has been from the air sampled at the Infectious Diseases Hospital, Devonshire Road, and the lightest pollution during the summer months was from air sampled at the Hawes Side Lane Clinic. During the winter months the pollution recorded at the Municipal Health Centre is generally very similar to that recorded at the Hawes Side Lane Clinic.

It is again encouraging to report that the atmospheric pollution by smoke and sulphur dioxide is generally much lower at all the three sampling sites in the Borough than was the case in the previous year. Indeed the National Atmospheric Pollution records show that average atmospheric pollution in the Borough has gradually been lessening since 1963, and this in my opinion is due to an increasing number of people deciding to use smokeless methods of heating their homes.

However, this reduction in smoke pollution, although giving some cause for satisfaction, does not mean that Smoke Control Areas are no longer necessary, as the main source of existing pollution is still from domestic chimneys, and this would be almost entirely eliminated if the whole of the Borough were smoke controlled.

There is now very little industrial smoke pollution in the Borough apart from the few occasions when a breakdown in plant occurs.

When weather records are checked against the pollution records it is very noticeable how wind strength affects the weight of pollution—the higher the wind strength the lower the pollution. The worst pollution always occurs from November to February, especially during calm weather when there is little or no wind and mist or fog forms.

ATMOSPHERIC POLLUTION

Table of Observations from the Volumetric Atmospheric Pollution Machines.

1st January to 31st December, 1967

SMOKE AND SULPHUR DIOXIDE

Average Concentration in ug/m ³	No. 1 SITE Municipal Health Centre			No. 2 SITE Inf. Diseases Hospital			No. 3 SITE Hawes Side Clinic		
	Smoke	Sulphur Dioxide	Smoke/ SO ₂ Ratio	Smoke	Sulphur Dioxide	Smoke/ SO ₂ Ratio	Smoke	Sulphur Dioxide	Smoke/ SO ₂ Ratio
January	131	123	1.06	182	188	0.97	127	127	1.00
February	90	88	1.02	118	130	0.90	108	97	1.11
March	46	49	0.94	59	86	0.69	51	45	1.13
April	73	78	0.94	64	89	0.72	63	76	0.83
May	46	66	0.69	63	94	0.67	51	65	0.78
June	22	42	0.52	30	64	0.47	14	45	0.31
July	14	36	0.39	23	59	0.39	11	41	0.27
August	18	38	0.47	34	63	0.54	23	56	0.41
September	51	63	0.81	67	94	0.71	48	62	0.77
October	43	51	0.84	64	115	0.56	46	58	0.79
November	162	168	0.96	232	225	1.03	192	191	1.00
December	131	120	1.09	142	152	0.93	131	126	1.04
HIGHEST DAILY CONCENTRATION									
January	333	239	—	619	405	—	463	340	—
February	366	223	—	319	267	—	404	255	—
March	72	99	—	139	250	—	108	93	—
April	135	137	—	147	207	—	137	136	—
May	82	147	—	101	172	—	100	161	—
June	89	130	—	83	134	—	56	125	—
July	44	110	—	43	125	—	41	134	—
August	60	133	—	85	162	—	62	153	—
September	82	121	—	123	191	—	81	122	—
October	99	97	—	145	189	—	108	111	—
November	493	418	—	742	548	—	664	482	—
December	384	390	—	490	467	—	437	492	—
LOWEST DAILY CONCENTRATION									
January	18	36	—	38	56	—	46	39	—
February	25	39	—	15	38	—	30	33	—
March	21	27	—	24	34	—	30	20	—
April	26	29	—	15	25	—	20	27	—
May	18	35	—	29	42	—	9	31	—
June	1	17	—	11	29	—	2	25	—
July	5	13	—	11	35	—	1	13	—
August	4	13	—	13	24	—	4	21	—
September	12	26	—	23	37	—	10	20	—
October	20	24	—	16	41	—	15	33	—
November	20	39	—	31	64	—	30	40	—
December	35	36	—	23	42	—	35	33	—
<i>Yearly Average</i>	69	77	0.89	90	113	0.90	72	82	0.89

Clamp sizes : 1" : May, June, July, August, September.

2" : January, February, March, April, October, November, December.

No of days over 500 ug/m³ but less than 1,000 ug/m³ :—

	No. 1 Site		No. 2 Site		No. 3 Site	
	Smoke	SO ₂	Smoke	SO ₂	Smoke	SO ₂
January	—	—	1	—	—	—
November	—	—	2	2	1	—

Sanitary Conditions in Places of Entertainment

The places of entertainment in the Borough are classified as follows:—

Cinemas	...	...	...	...	...	...	8
Cinemas also used for Varieties during Holiday Season							2
Theatres	...	...	...	...	...	...	8
Ballrooms	...	...	...	...	...	...	5
Ice Drome	...	...	...	...	...	...	1
Bowling Alleys	...	...	...	...	...	...	2

As is usual prior to the commencement of the Holiday Season, the above places of entertainment were inspected, particular attention being paid to the dressing room and washing facilities for artistes, and also the sanitary accommodation and washing facilities for the patrons.

The inspections revealed that all the facilities provided were of a high standard and in no case was any action found to be necessary by the Department.

FACTORIES

During the year 419 inspections of factories were carried out by the District Public Health Inspectors regarding sanitary accommodation.

In the course of these inspections 26 contraventions of the Factories Act, 1961 were found which resulted in 17 verbal notices being given and four informal notices and one statutory notice being sent to the occupiers of the factories concerned. During the year 47 contraventions were remedied, some being contraventions reported in 1966.

It was not found necessary to institute legal proceedings in respect of any of the contraventions.

Notifications of Outworkers premises resulted in 23 inspections of these premises being made and all were found to be satisfactory.

During the year H.M. Inspector of Factories was notified of two new factories and that 28 factories had been discontinued.

Factories on Register (Section 8 (3)) at Year End

Trade	Mechanical Power	Non-Mechanical Power
Making or Repair of Wearing Apparel ..	60	1
Bakeries	118	—
Preparation of other Foods and Drinks ..	72	3
Building Trades	74	1
Furniture making, Furnishings ,etc. ..	30	2
Engineering and Transport	221	2
Photography, Printing and Bookbinding ..	43	3
Laundries and Dry Cleaners	20	—
Other Trades	102	9
Total ..	740	21

Factories Act 1961

Premises	Inspections	Notices		
		VN	PN	CN
Factories (Without Mechanical Power)	6	—	—	—
Factories (Mechanical Power)	409	17	4	1
Power Stations, Building Sites, Gas Undertakings, etc.	4	—	—	—
Total Visits Made ..	419	17	4	1

Defects Found and Remedied, Etc.

Particulars	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	No. of Prosecutions
Lack of Cleanliness (factory only) ..	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable Temperature	—	—	—	—	—
Inadequate Ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences :					
(a) Insufficient	1	—	—	1	—
(b) Unsuitable or defective	20	46	1	—	—
(c) Not separate for sexes	—	—	—	—	—
Other Offences	5	1	—	—	—
Total	26	47	1	1	—

HOMEWORKERS/OUTWORKERS PREMISES ... 6

Lists of Outworkers received	6
Outworkers forwarded to other Authorities	—
Inspections of Outworkers	23
Matters notified to H.M.I. of Factories:—	
Failure to affix Abstract of Factories Act	1
Other matters... ..	—
New Workshops	2
Factories and Bakeshops discontinued	28
Circulars served regarding Outworkers	—

OFFENSIVE TRADES

There are only three established offensive trades within the Borough, namely:—

Tripe Boiler	1
Gut Scraper	2

These are fortunately sited within the precincts of the Abattoir, and are kept under close supervision by the Public Health Inspectors engaged on meat inspection at the Abattoir.

CARAVAN SITES

The number of caravan sites in the Borough consisting of three or more caravans is as follows:—

Holiday Sites	...	...	...	...	...	5
Combined Holiday and Permanent Sites	...	...	...	...	...	3
Permanent Residential Sites...	...	...	...	...	...	4

All the above sites are subject to site licence conditions laid down by the Local Authority under the Caravan Sites and Control of Development Act, 1960. The site licence conditions closely adhere to the Model Standards issued by the Ministry of Housing and Local Government.

In addition to the above sites the Local Authority have granted licences in respect of 41 sites where only one or two caravans are situated. The licence conditions for these are similar to those approved for the larger sites.

The total number of caravans on the above sites is 529 of which 204 are purely residential and 325 are for holiday purposes.

During the year 380 inspections have been carried out by the District Public Health Inspectors to ensure that site licence conditions are complied with. These inspections revealed six contraventions of site licence conditions, five of which were remedied as a result of informal action, and in one case legal proceedings were instituted, a conviction obtained and a fine of £40. 0s. 0d. was imposed by the Magistrates.

The Department again received many requests from intending holiday makers who wish to find a holiday site for their caravans, and in each case a list of holiday sites is sent to each applicant, and they are advised to apply direct to the proprietors of the sites.

CLEARANCE AREAS

The position at the end of 1967 was as follows:—

Area	Date of Representation	Confirmation by Ministry	No. of dwellings removed or demolished	No. still Occupied	No. of Families
Abbey Road No. 2 ...	9.2.1958	30.6.1959	—	1	1 (2 persons)
Kay Street/Middle St.	28.2.1966		40	—	—
Larkhill Street Compulsory Purchase Order 1967 ...	4.1.1967		—	79	79

This is the second year of the Local Authority's third five year Clearance Programme. During the year 40 houses in the Middle Street/Kay Street Area owned by the Corporation and certified by the Medical Officer of Health to be unfit for human habitation were demolished, the tenants having been previously re-housed by the Corporation.

The Council on 4th January, 1967, declared the Larkhill Street/Seed Street Area to be a Clearance Area under the Housing Act, 1957 and on the 28th June, 1967 decided to make a Compulsory Purchase Order to purchase all land in the Clearance Area and certain other lands, surrounded by and outside the Clearance Area. As there were objectors to the Compulsory Purchase Order, the Ministry of Housing and Local Government held a Public Enquiry on December 5th, 1967 and on 12th February, 1968 the Compulsory Purchase Order was confirmed by the Ministry.

Seven houses were closed during the year as a result of action under Section 17(1) of the Housing Act, 1957 and eight families comprising twenty-four persons were re-housed by the Local Authority.

A. Houses Demolished. Clearance Areas, and not in Clearance Areas.

	Demolished	Displaced during year	
		Families	Persons
No. of houses demolished (unfit for human habitation in Clearance Areas) ..	—	—	—
Demolished not in Clearance Areas as a result of Formal or Informal action under Sec. 17(1) H.A. 1957	—	—	—
L.A. houses certified unfit by M.O.H.	40	4	8
	To be demolished		

B. Unfit houses Closed

	No. of Houses	Displaced during year	
		Families	Persons
Under Sec. 16(4), 17 (1) H.A. 1957	7	8	24

C. Unfit Houses made Fit and Houses in which Defects were Remedied

	By Owner	By Local Authority
After informal action by Local Authority	66	—
After formal notices under the Public Health Acts	16	—

HOUSING ACT, 1964 — IMPROVEMENT AREAS

During the year a survey of dwelling houses in the area bounded by King Street, Talbot Road, Devonshire Road and Church Street (excluding the Larkhill Street Clearance Area) was completed with a view to ascertaining whether they were suitable for inclusion in proposed Improvement Areas.

The information gained is summarised as follows:—

Total Number of Houses in the Area	1,502
Total Number of Houses with an expected life exceeding 15 years	1,472
Number of houses with all the Standard Amenities	1,009
Number of houses requiring one or more of the Standard Amenities.	463
	<hr/> 1,472 <hr/>
Number of owner-occupiers who agree to improvement	71
Number of tenants who agree to improvements	113
	<hr/> 184 <hr/>

The survey was carried out by Technical Assistants supervised by Public Health Inspectors and involved 1,706 inspections and re-inspections.

The Borough Surveyor is preparing a report in conjunction with the survey, regarding the general amenities for the area, i.e. open spaces, tree planting, etc.

A further survey is at present in progress in an area bounded by Central Drive, South side of Ashton Road, West side of Clinton Avenue and North side of Ribble Road, which contains 818 houses.

SUMMARY OF THE WHOLE IMPROVEMENT AREA

Bounded by King Street, Talbot Road, Devonshire Road, and Church Street
1,472 houses

Amenity	With	Without
Hot Water	90.1 %	9.9 %
Bath	94.0 %	6.0 %
Internal W.C.	86.7 %	13.3 %

IMPROVEMENT AREA SURVEY

No. 1 Area Bounded by Talbot Road, Devonshire Road, George Street, and Buchanan Street 505 houses.

Amenity	With	Without
Hot Water	80.8 %	19.2 %
Bath	88.0 %	12.0 %
Internal W.C.	75.7 %	24.3 %
No. W.C. 70 houses in the Marton Moss Area.		

No. 2 Area Bounded by George Street, Devonshire Road, Caunce Street and King Street 440 houses

Amenity	With	Without
Hot Water	93.7 %	6.3 %
Bath	96.8 %	3.2 %
Internal W.C.	92.0 %	8.0 %

No. 3 Area Bounded by Caunce Street, Devonshire Road, Church Street and Elizabeth Street 395 houses

Amenity	With	Without
Hot Water	97.5%	2.5%
Bath	95.4%	4.6%
Internal W.C.	99.0%	1.0%

No. 4 Area Bounded by Caunce Street, Elizabeth Street, Church Street and King Street 132 houses

Amenity	With	Without
Hot Water	91.7%	8.3%
Bath	93.2%	6.8%
Internal W.C.	87.0%	13.0%

HOUSES IN MULTIPLE OCCUPATION

Permanent Flats

The duty laid on the Local Authority to improve the living conditions of persons occupying this class of accommodation is of prime importance, but with the numbers of premises occupied in this way constantly increasing, the amount of work accomplished is obviously limited.

The Local Authority have laid down a set of standards under the Housing Act, 1961 relating to the following:—

Natural lighting and Ventilation, Artificial lighting, Water supply, Personal Washing Facilities, Drainage Sanitary Conveniences, Storage of Food, Preparation of Food, Cooking of Food, and Space Heating.

The Department's policy is in the first place, to discuss with the person having control of the premises, the matters in which the premises fall short of the standards, and they are advised as to ways and means of compliance. This method has, in most cases, been successful and the requirements of the standards have been carried out voluntarily.

During the year 200 inspections were carried out at this type of premises.

Holiday Flats

In a large holiday resort such as this, the number of holiday flats is continually increasing year by year, as more people convert their boarding houses to flats.

The Local Authority require Town Planning Consent to be obtained for these conversions and plans are required to be submitted. Before planning consent is

given the plans are submitted to the Chief Public Health Inspector for approval under the standards laid down by the Council. These standards are very similar to those for permanent flats.

In this way quite a strict means of control is established, as planning consent is not given if the plans submitted do not comply with the standards. In the small number of cases where established flats had an existing use, the Department has in most cases been able to bring the premises up to the standards required by informal action.

The Department appreciates the great help given by the Holiday Flatlets Association, as one of the conditions of membership is that there must be full compliance with the Local Authority's standards.

ALLOCATION OF MUNICIPAL TENANCIES

There has been no change in the "Points Scheme" approved by the Town Council in 1965 for the allocation of Municipal Houses.

Houses Erected

Number of municipal houses erected during 1967:—

(a) Permanent—1 bedroom	...	...	...	...	152
(b) Permanent—2 bedrooms	...	...	...	...	—
(c) Permanent—3 bedrooms	...	...	...	...	—
(d) Permanent—4 bedrooms	...	...	...	...	—
Number of families re-housed during the year	...	...	...	...	374
Number of persons on waiting list for the tenancy of municipal houses at 31st December, 1967	...	...	...	...	1,715

OFFICES, SHOPS & RAILWAY PREMISES ACT, 1963

The work of administering the above Act has continued steadily throughout the year, one Public Health Inspector being engaged for the whole of his time on these duties assisted by the Student Public Health Inspectors and the Technical Assistants.

199 premises were registered during the year comprising 56 offices, 112 retail shops, nine wholesale shops and warehouses, 21 catering establishments and canteens and one fuel storage depot.

The total number of premises to which the Act applies and which have been registered is now 2,577 employing 25,828 persons.

These premises are in the following categories:—

Offices	...	...	...	...	...	...	694
Retail shops	...	...	...	...	...	...	1,493
Wholesale shops and warehouses	...	...	...	...	...	...	126
Catering establishments—canteens	...	...	...	...	...	...	257
Fuel storage depots	...	...	...	...	...	...	7

The number of registered premises which received a general inspection during the year was 651 and the number of visits of all kinds by the staff was 1,737 which includes re-inspections and visits re registration.

Initial Inspections

Offices	...	...	...	...	...	...	122
Retail shops	...	...	...	...	...	...	458
Wholesale shops and warehouses	...	...	...	...	...	...	17
Catering establishments	...	...	...	...	...	...	54
Fuel storage depots	...	...	...	...	...	...	—
Total							651

Re-Inspections

Offices	...	...	...	...	...	...	132
Retail shops	...	...	...	...	...	...	396
Wholesale shops and warehouses	...	...	...	...	...	...	39
Catering establishments	...	...	...	...	...	...	27
Fuel storage depots	...	...	...	...	...	...	—
Total							594

Regarding Registration of Premises

Offices	...	...	...	...	...	...	19
Retail shops	...	...	...	...	...	...	369
Wholesale shops and warehouses	...	...	...	...	...	...	9
Catering establishments	...	...	...	...	...	...	7
Fuel storage depots	...	...	...	...	...	...	—
Total							404

Notification of Accidents

Offices	...	...	...	...	...	...	2
Retail shops	...	...	...	...	...	...	61
Wholesale shops and warehouses	...	...	...	...	...	...	3
Catering establishments	...	...	...	...	...	...	18
Fuel storage depots	...	...	...	...	...	...	4
Total							88
Total Number of Visits							1,737

SUMMARY OF VISITS

1. INITIAL INSPECTIONS

Offices	...	...	...	...	...	...	122
Retail shops	...	...	...	...	...	...	458
Wholesale shops and warehouses	...	...	...	...	...	...	17
Catering establishments	...	...	...	...	...	...	54
Fuel storage depots	...	...	...	...	...	...	—
Total							651

During the Initial Inspections premises found to be satisfactory

Offices	...	...	...	...	...	...	22
Retail shops	...	...	...	...	...	...	32
Wholesale shops and warehouses	...	...	...	...	...	...	—
Catering establishments	...	...	...	...	...	...	4
Fuel storage depots	...	...	...	...	...	...	—
Total							58

Premises where contraventions were found

Offices	...	...	...	...	...	...	100
Retail shops	...	...	...	...	...	...	426
Wholesale shops and warehouses	...	...	...	...	...	...	17
Catering establishments	...	...	...	...	...	...	50
Fuel storage depots	...	...	...	...	...	...	—
Total							593

651**2. Re-Inspections Regarding Compliance with the Act as per Letters sent to Employers and Owners**

Offices	...	...	...	...	...	...	132
Retail shops	...	...	...	...	...	...	396
Wholesale shops and warehouses	...	...	...	...	...	...	39
Catering establishments	...	...	...	...	...	...	27
Fuel storage depots	...	...	...	...	...	...	—
Total							594

During re-inspections the following premises were found to comply with the Act

Offices	...	...	...	...	...	...	61
Retail shops	...	...	...	...	...	...	173
Wholesale shops and warehouses	...	...	...	...	...	...	14
Catering establishments	...	...	...	...	...	...	12
Fuel storage depots	...	...	...	...	...	...	—
Total							260

Premises where partial compliance was found

Offices	...	...	...	...	...	...	53
Retail shops	...	...	...	...	...	...	178
Wholesale shops and warehouses	...	...	...	...	...	...	23
Catering establishments	...	...	...	...	...	...	13
Fuel storage depots	...	...	...	...	...	...	—
Total							267

Premises visited to advise employers and owners regarding work required to comply with the Act

Offices	...	...	...	...	...	...	2
Retail shops	...	...	...	...	...	...	18
Wholesale shops and warehouses	...	...	...	...	...	...	—
Catering establishments	...	...	...	...	...	...	—
Fuel storage depots	...	...	...	...	...	...	—
Total							20
							547

In the remaining 47 premises where no action had been taken to comply with the Act—

14 Offices, 14 Shops and 2 Wholesale Warehouses were vacated, 2 Catering Establishments were to be demolished, 2 Shops had been demolished, employers in two Offices and ten Shops had no employees and one Shop had been converted into a factory (Dry Cleaners)

Total ... 47 **594**

Dangerous Machinery not properly guarded as per L.A. Circ. 7

Gravity Feed Food Slicing Machines	...	...	...	38
Horizontal Carriage Food Slicing Machines	...	...	...	31
Power-operated Hoist	...	...	...	1
Guillotine	...	...	...	1
Total				71

Dangerous Machinery found properly guarded during re-inspections as per letters sent to employers

Gravity Feed Food Slicing Machines	...	...	...	23
Horizontal Carriage Food Slicing Machines	...	...	...	8
Total				31

Dangerous Machinery found properly guarded during Initial Inspections

Gravity Feed Food Slicing Machines	...	...	...	20
Horizontal Carriage Food Slicing Machines	...	...	...	22
Power-operated Potato Chipping Machines	...	...	...	2
Power-operated Mincing Machines	...	...	...	20
Power-operated Goods Lifts	...	...	...	4
Power-operated Conveyor Belts	...	...	...	2
Total				70

EXEMPTIONS

During the year there were four applications for certificates of exemption under Sections 9 and 10 of the Act. Three applications were granted. One application was not granted owing to plans being submitted to Town Planning Department for structural alterations including the provision of w.c. and washing facilities.

The following list shows the type and number of contraventions of the Act found on Initial Inspections.

Type	Offices	Retail Shops	Wholesale Shops and Warehouses	Catering Estab.
ABSTRACT	70	335	14	36
CLEANLINESS	8	32	—	4
OVERCROWDING	1	1	—	—
HEATING				
Insufficient	2	26	1	4
Thermometer	56	260	11	32
Fumes	—	—	—	—
VENTILATION	16	79	5	5
LIGHTING	1	5	2	1
FLOORS				
Defective	13	19	—	3
Coverings	11	83	2	7
Openings not guarded	1	14	1	1
SITTING FACILITIES	—	18	—	—
STAIRS				
Defective	2	5	1	3
Handrail	7	45	2	11
Coverings	—	10	1	3
FIRST AID	47	220	7	25
FACILITIES FOR EATING MEALS ...	—	—	—	—
DRINKING WATER	5	8	1	—
ACCOMMODATION FOR CLOTHING	3	33	2	—
WASHING FACILITIES				
Insufficient	5	16	2	2
Defective	2	10	1	—
Cleanliness	7	20	1	3
Hot Water	18	63	3	6
Soap and Towels	5	4	1	—
SANITARY ACCOMMODATION				
Insufficient	5	8	2	2
Defective	5	22	1	4
Cleanliness	4	49	1	5
Lighting	7	83	2	3
Ventilation	10	21	1	6
Vent. Intervening Space	—	6	—	4
ASSIGN AND MARK	14	34	1	10
DISPOSAL OF SANITARY DRESSINGS	3	14	—	—

REMARKS

ACCIDENTS

It will be noted in the Annual Report that the number of accidents notified in 1967 was 88 compared with 42 in 1966.

This is, no doubt, due to more managements becoming aware of their legal responsibility to notify accidents which result in the person concerned being absent from work for more than three days.

The largest number of accidents occurred in retail shops and the majority of these came under the category of "falls on the same level".

In most of the accidents notified there was no contravention of the Act and in other cases contraventions were remedied by informal action.

In only one case had legal proceedings to be instituted under Section 16 of the Act regarding an unfenced opening in the floor and a dangerous staircase in the shop, and the Local Authority obtained a conviction and a fine of £50 was imposed by the Magistrates.

The contraventions were immediately remedied by the firm concerned.

Workplace	Number Reported		Total No. investigated	Action Recommended			
	Fatal	Non-Fatal		Prosecution	Formal warning	Informal advice	No action
Offices	—	2	2	—	1	—	1
Retail Shops .. .	—	61	61	1	4	16	40
Wholesale shops, Warehouses .. .	—	3	3	—	—	—	3
Catering establishments open to public, canteens .. .	—	18	18	—	2	4	12
Fuel storage depots .. .	—	4	4	—	—	—	4
TOTALS .. .	—	88	88	1	7	20	60

Analysis of reported Accidents

	Offices	Retail Shops	Wholesale warehouses	Catering establishments open to public canteens	Fuel storage depots
Machinery .. .	—	3	—	—	—
Transport .. .	—	—	—	—	—
Falls of persons .. .	2	34	1	8	1
Stepping on or striking against object or person .. .	—	7	1	2	1
Handling Goods .. .	—	6	—	4	2
Struck by falling object .. .	—	7	1	3	—
Fires and explosions .. .	—	1	—	—	—
Electricity .. .	—	1	—	—	—
Use of hand tools .. .	—	1	—	—	—
Not otherwise specified .. .	—	1	—	1	—
TOTALS .. .	2	61	3	18	4

CONCLUSION

The Local Authority is receiving excellent co-operation from the managements of all business premises which have been inspected in carrying out the necessary works to ensure full compliance with the Act.

RENT ACT, 1957

Number of Applications received	...	...	...	1
Number of Undertakings given by Owner	...	...	...	—
Number of Certificates of Disrepair issued	...	...	...	2
(one application received in 1966)				

Two applications were received for revocation of Certificates of Disrepair, one was granted as all the repairs were completed satisfactorily, and one was refused as the repairs had not been satisfactorily completed.

NOISE ABATEMENT ACT, 1960

NOISE NUISANCE

During the past year 37 complaints of noise nuisance were received by the Department which involved the Public Health Inspectors' staff in 539 inspections and re-inspections at all hours of the day and night.

Fewer complaints of noise nuisance from Beat Groups were received this year, and this is no doubt due to the campaign carried out by the Public Health Inspectors the previous year in warning owners of premises where these Groups operate of their responsibilities under the Noise Abatement Act.

The most common sources of complaint were noise from machinery in factories, bakeries and laundrettes; noise from ventilation fans in hotel kitchens and noise caused by refrigerator compressor motors in the larger shops and other commercial premises.

Of the 37 complaints received 15 were found to be justified and of these a reduction of the noise levels was effected by informal action. In only two cases was it necessary to serve statutory notices and these resulted in action being taken to reduce the noise to an acceptable level.

It is interesting to note that one complaint was from an elderly lady who said she could not sleep because of the noise of the wind in the telephone wires on a post immediately at the rear of her house.

Two complaints were received of the noise from the "chimes" on an ice cream sales van, and these were remedied when the owners were made aware of their responsibilities under the Act.

Two of the Department's Public Health Inspectors attended special courses on Noise and its Abatement at the College of Technology, Salford and the Harris Institute, Preston, and there is no doubt that their additional knowledge of the subject has been extremely helpful in achieving good results in the reduction of noise levels.

Again I must stress that the investigations of noise nuisance complaints have caused the Public Health Inspectors to spend many hours outside their normal duties, both late at night and in the early hours of the morning on this work, and their co-operation and willingness in these cases is much appreciated.

PEST CONTROL MEASURES CARRIED OUT IN THE COUNTY BOROUGH OF BLACKPOOL FOR THE YEAR ENDED THE 31st December, 1967

RODENT CONTROL

The continuous examination of land and premises for rodent infestations during the year entailed 1,186 visits summarised as follows—Business Premises 304: Dwelling-Houses 757: Open Spaces 125.

A number of these premises were found to be infested. Orders requesting control of these infestations were duly received and the work was carried out satisfactorily.

SURFACE INFESTATIONS

The number of complaints received was 712. Of this number 74 were found to be clear after test baiting. Treatment was carried out at 276 business premises and 362 dwelling houses. The total number of surface infestation visits made during the year was 2,410.

RODENT CONTROL IN SEWERS

Two control programmes were carried out during the year for the control of rats infesting sewers. In May 385 manholes were baited with poison and in October/November 587 manholes were test baited, followed by a further 221 manholes baited with poison.

During the year 1,193 manholes were examined, baited and re-examined. Of this number 38 were proved to contain rats and these manholes were baited until no further takes were recorded.

OTHER ANIMAL INFESTATIONS

Pigeons

The department made 181 visits to premises in the Borough following complaints of pigeons causing a nuisance. This resulted in a total of 627 pigeons being destroyed.

Rabbits

63 visits were made to premises and land regarding infestations by wild rabbits and the necessary eradication steps were taken in all cases.

Moles, Voles, etc.

41 visits were made to premises and the necessary treatment was carried out satisfactorily.

INSECT INFESTATIONS

Treatment and/or advice was given following complaints received of insect infestations. The first and subsequent visits are summarised as:—

Vermin, bugs, fleas and lice	...	...	752
Cockroaches	...	...	420
Ants	...	...	94
Moths	...	...	7
Flies	...	...	45
Woodboring insects	...	...	107
Other Pests	...	...	161

In addition five males were disinfested for an infestation of body lice.

STAFF ENGAGED ON PEST CONTROL

The staff engaged on Pest Control comprised the Pestologist and three Rodent/Insect operators, up to the end of September, when one of the Rodent operators, Mr. J. Ball, was taken ill. He remained off work until the end of the year.

HAIRDRESSERS AND BARBERS ESTABLISHMENTS

Under the Blackpool Corporation Act, 1958 all persons who carry on a business as a Hairdresser or Barber are required to register themselves and their premises with the Local Authority.

The Act also gives powers to make Byelaws and these Byelaws have been made and approved by the Ministry of Housing and Local Government for the purpose of securing (1) cleanliness of registered premises, and instruments, towels, and all materials and equipment used in the premises, and (2) the cleanliness of all persons employed on the premises, in regard to personal hygiene and their clothing.

During the year there were 272 ladies and gentlemens hairdressing establishments on the Local Authority register.

Owing to pressure of other duties, it was only possible to carry out 147 inspections of these premises during the year.

In the premises inspected a good standard of cleanliness and general hygiene was maintained.

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

This Act requires the licensing of premises where certain animals are boarded or kept for a period.

Four premises within the Borough have been licensed under this Act by the Local Authority, who have also appointed two Veterinary Surgeons to report on animal health prior to licensing.

The District Public Health Inspectors carry out re-inspections from time to time to ensure that licence and sanitary conditions are complied with, and during the year 18 inspections were carried out and all premises were reported satisfactory.

PET ANIMALS ACT, 1951

Fifteen premises within the Borough are licensed by the Local Authority under this Act.

Fifty-three inspections of these premises were carried out by the District Public Health Inspectors, and all were found to comply with the licence conditions.

RIDING ESTABLISHMENTS ACT, 1963

There is now only one premises within the Borough licenced under this Act. Veterinary Officers appointed by the Local Authority inspect and submit recommendations before licences are issued each year.

During the year one riding establishment reverted to a livery stable and the ownership changed. This establishment had been the subject of complaints during the previous year, and the licence conditions had not been complied with and statutory action was taken by the Local Authority. Conditions at the stables are now much better.

Ten inspections were carried out during the year to ensure that licence conditions were complied with.

GENERAL FOOD SUPPLY

Food Hygiene (General) Regulations, 1960

In this area there are approximately 6,500 premises which come within the purview of the above Regulations, and these vary in type from large food factories, hotels, private hotels and restaurants to the smaller boarding houses, cafes, snack bars, fish and chip shops and food stalls.

Although all known food premises were inspected soon after the Regulations came into force and were required to comply with the provisions mainly as regards structure and equipment, regular subsequent visits have been made to ensure that a good standard of hygiene is maintained.

During the year under review approximately 5,177 visits were made to food premises, and reports indicated that with a few exceptions the premises were found to be satisfactory and that a good standard of cleanliness was being maintained.

As stated elsewhere in the report some seven to eight million visitors are accommodated in the town each year, and the department's policy is, so far as is possible, to ensure that only clean and wholesome food is provided for them, and this work is, in fact, No. 1 priority on our list.

Two fully qualified and specialist officers are engaged full time on this work and all the District Public Health Inspectors assist whenever time is available.

It is pleasing to note that a large number of premises, particularly shops, are being modernised and this has coincided in most cases with the installation of modern equipment and shop furnishings, all of which not only improve the appearance but also afford simpler and more efficient methods of cleaning and sterilizing and display of foods.

Meat Inspection

For many years there has only been one licensed slaughterhouse in the Borough. This is the public slaughterhouse situated at the northerly end of the town and owned and controlled by the Local Authority, and an average of approximately 100,000 animals are slaughtered and dressed each year.

The meat inspection on the premises is carried out by the Abattoir Superintendent Meat Inspector, assisted by a fully qualified Public Health Inspector with additional assistance from other Public Health Inspectors when necessary, and 100% meat inspection was achieved.

As reported in previous years, the premises are very old and do not comply with the Slaughterhouses Hygiene and Cruelty Regulations, and are not considered to be either economically or structurally suitable for converting in order to comply with the above Regulations.

After long, procrastinated negotiations a new meat company was formed from the meat trade and the present site was leased to this Company who undertook to demolish the old slaughterhouse, lairages etc., and build a new slaughterhouse to comply with the Regulations. Plans of the new abattoir were agreed with the Local Authority and the Ministry towards the end of the year, and part of the old abattoir was demolished and the new building commenced on the same site.

There was no interruption of slaughtering and dressing as this is the quieter part of the year, and it is expected that completion will be about Spring of next year.

The inspection of retail butchers' shops and wholesale premises where meat and meat products are either manufactured or sold was carried out mainly by the Chief Meat and Food Inspector and the Food Hygiene Officer, but all Public Health Inspectors again assisted in this work. The reports of the officers indicate that a good standard of hygiene is being maintained and no unsound or diseased food was found to be offered for sale at any of the premises.

The tendency to pre-pack meat products is still increasing, and this is welcomed by the department.

Stalls on Sands

During the holiday season approximately 71 stalls were sited along the length of the sands and all were required to comply with the Food Hygiene (General) Regulations, 1960, the Bye-Laws made under the Food and Drugs Acts, the Local Authority Licensing conditions and the Market Stalls and Delivery Vehicles Regulations, 1966, made under the Food Hygiene Regulations.

The stalls are used mainly for the sale of ice cream, minerals, oysters and other shell fish etc., and all stalls are inspected prior to them being opened at the commencement of the season, and periodic checks are made afterwards.

Other Stalls

During the holiday season a large number of stalls are used for the sale of a variety of food stuffs and these are sited on the forecourts of premises on the easterly side of the Promenade, the majority being on the section between the old Central Station site and the Central Pier, known as the "Golden Mile". These stalls, like those on the sands, have to comply with the same Regulations, Bye-Laws etc., and they are inspected regularly by the staff during normal working hours and also in the evenings and at week-ends.

The problem here is the employment of seasonal and temporary staff and every effort is made by the staff of this department to talk to the employees on the basic principles of personal hygiene.

Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966

These Regulations came into force on the 1st January, 1967 and during the early part of the year meetings were held between the Food Hygiene Officer and the proprietors of vehicles regarding the requirements, and to our knowledge all vehicles have now been converted in accordance with the requirements of the Regulations.

PUBLIC ABATTOIR—SLAUGHTERHOUSE ACT, 1958

As mentioned in previous Annual Reports the Ministry of Agriculture, Fisheries and Food, when accepting the Council Slaughterhouse Report, proposed to appoint the 1st January, 1964 as the day on which the Slaughterhouse Construction Regulations would be enforceable in Blackpool. Delay in preparing plans was caused by the Meat Traders disagreeing with the Local Authority's policy on the methods of construction, their main objection being in respect of the proposals to construct a single line for cattle for dressing. I am pleased to report that the Company formed by the Meat Traders Association leased the site of the abattoir and took over the responsibility in March, 1967. The old abattoir was demolished and the Company constructed, and now operate a new abattoir to comply with the new Slaughterhouse Regulations.

The number of animals killed during 1967 shows a decrease compared with the previous ten years. The low incidence of tuberculosis once again illustrates the success of the T.B. eradication scheme, for a few years ago bovine tuberculosis affected a large percentage of all cattle and pigs, whilst today the disease is seldom encountered. The poundage of meat condemned shows an increase of 850 on 1966, the largest classification being Fasciolosis—which accounted for approximately 53 % of the total.

Animals Killed

Year	Cows	Heifers	Bullocks	Bulls	Calves	Sheep	Pigs	Total
1943	2,532	2,299	3,758	183	10,444	48,843	696	68,755
1944	2,678	2,138	2,435	170	9,544	45,627	691	63,283
1945	2,837	2,686	4,462	192	10,764	40,450	1,258	62,649
1946	4,075	2,391	4,968	154	11,671	54,015	607	77,881
1947	3,224	2,273	4,093	108	7,929	24,932	290	42,849
1948	4,075	1,938	3,397	129	7,589	36,015	550	53,693
1949	4,610	2,230	2,691	204	6,202	34,276	711	50,924
1950	5,606	4,127	3,249	303	7,257	36,593	2,032	59,167
1951	5,361	5,119	3,376	294	7,408	34,885	4,248	60,661
1952	3,479	4,546	2,889	175	7,477	38,212	7,663	64,711
1953	7,719	3,205	3,164	213	5,198	46,161	7,493	71,153
1954	3,972	4,883	3,021	118	3,019	59,369	15,790	90,132
1955	2,126	4,917	4,249	39	1,358	47,851	18,087	78,627
1956	1,946	4,416	6,810	29	1,989	59,115	17,044	91,349
1957	2,239	4,209	7,213	25	1,713	64,211	18,123	97,733
1958	3,136	3,553	6,352	25	1,034	58,144	19,746	91,990
1959	2,180	2,338	7,299	21	809	80,230	19,090	111,967
1960	2,404	1,980	9,151	18	1,212	76,825	19,623	111,213
1961	2,372	2,890	10,201	31	1,850	89,129	20,084	126,512
1962	3,218	2,905	9,477	35	1,877	81,699	18,616	117,837
1963	2,825	3,285	9,790	29	1,473	71,934	17,158	106,494
1964	2,631	3,064	8,264	21	1,113	72,051	17,935	105,079
1965	1,695	2,265	7,581	17	900	66,728	17,550	96,736
1966	2,089	2,080	7,288	27	1,113	69,510	16,518	98,625
1967	1,484	1,922	7,480	25	1,002	62,496	16,216	91,450

Carcases and Offal inspected and condemned in Whole or in Part

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed and Inspected	9,427	1,484	1,002	63,172	16,364
All diseases except Tuberculosis and Cysticerci:					
Whole carcasses condemned	3	9	25	39	98
Carcasses of which some part or organ was condemned	6,385	761	7	10,451	1,046
Percentage of the number inspected affected with disease other than tuber- culosis and cysticerci	67.6%	49%	.3%	9.7%	7%
Tuberculosis only:					
Whole carcasses condemned	—	—	—	—	—
Carcasses of which some part or organ was condemned	7	—	—	—	14
Percentage of the number inspected affected with tuberculosis .. .. .	.074%	—	—	—	.086%
Cysticercosis:					
Carcasses of which some part or organ was condemned	3	—	—	—	—
Carcasses submitted to treatment by refrigeration	3	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

MEAT CONDEMNED — 1967

	Totals Lbs.		brought forward	
Abscessed	9,047	Mastitis	88,469	
Actino-bacillosis	369	Melanosis	2,791	
Actino-mycosis	91	Moribund	140	
Anaemia	448	Nephritis	671	
Arthritis	652	Not Dehaired	2	
Atrophy	134	Oedema	26	
Bone-Taint	795	Parasitic	176	
Bruised	1,180	Pericarditis	12,982	
Cadavers	550	Peritonitis	1,256	
Cirrhosis	221	Pleurisy	753	
Congested	3,472	Pneumonia	96	
Cystic	30	Poisoning	36	
Decomposed	947	Pyæmia	17	
Diamonds	10	Septic	4,735	
Dropsy	114	Skin Eruption	4,488	
Deformed	497	SournessSuppurative	14	
Emaciation	1,855	Suppurative	32	
Enteretic	129	Telangiectasis	40	
Erysipelas	1,298	Tuberculosis	57	
Fasciolasis	62,528	Tympanities	208	
Fevered	2,754	Tyrosis	45	
Fractured	173	Unsound	10	
Immature	106	Urticaria	2,890	
Jaundice	350	Zanthosis	163	
Jointill	719		75	
carried forward	88,469			
				117,660

SALE OF HORSEFLESH

There are no shops in the Borough which sell horsemeat for human consumption.

DISPOSAL OF CONDEMNED MEAT AND OTHER FOODS

Under the Meat (Staining and Sterilization) Regulations, 1960 all meat and offal which on inspection at the Abattoir has been found to be unfit for human consumption is stained with a green dye before being removed from the premises and delivered to a firm in Widnes, where it is processed and converted into fertilisers. None is sold as food for pet animals. This practice ensures that there is no leakage of condemned meat or offal through unauthorised channels whereby the health of the general public could be endangered.

All other foods which are condemned as unfit for human consumption by the Public Health Inspectors in shops, food warehouses and catering premises are collected by the Department and removed to the Refuse Disposal Works, where they are destroyed by incineration, thus again safeguarding the health of the general public.

During the year over 61 tons of meat, offal and other foods which were condemned as unfit for human consumption were satisfactorily disposed of or destroyed, and 1896 visits were made by the Public Health Inspectors for this purpose.

DISEASES OF ANIMALS (WASTE FOODS) ORDER, 1957

The number of piggeries in the Borough where waste food (swill) is used for feeding is now only 28.

The work of inspecting these premises regarding the boiling of swill and the cleanliness of vehicles on which swill is carried is done by the Chief Meat and Food Inspector and the District Public Health Inspectors.

During the year 69 inspections were carried out at these premises and all were found to comply with the order.

LIST OF FOODSTUFFS CONDEMNED DURING 1967

During the past twelve months the undermentioned foodstuffs were condemned as unfit for human consumption. This is in addition to the meat condemned at the public slaughterhouse.

Articles	Units	Pounds	Bags/Boxes	Tins/Jars
Biscuits	—	—	—	—
Meat (tinned)	—	5,783	13	987
Bacon and Ham	2	41	—	—
Fish (fresh)	4	—	—	—
Shellfish	—	150	—	5
Fruit (fresh)	325	150	7	—
Vegetables (fresh)	—	1,120	20	—
Meat (fresh)	42	1,451	—	—
Fish (tinned)	—	86	—	154
Fruit (tinned)	—	6,076	23	2,193
Vegetables (tinned)	—	1,886	10	941
Milk (tinned)	—	107	—	63
Puddings	—	19	—	11
Butter and Fats	—	28	1	—
Jams and Marmalades	4	105	—	29
Bread	—	—	—	—
Tea and Coffee	—	—	—	—
Rabbits	—	—	—	—
Poultry	—	36	7	24
Eggs	—	—	—	—
Cheese	1	46	24	—
Cereals	—	380	6	133
Sweets	—	—	—	—
Soup	—	152	—	167
Miscellaneous	1	425	2	185
Frozen food	—	—	4,208	—
Totals	379	18,041	4,321	4,892

FOREIGN MATTER IN FOOD AND OTHER UNSATISFACTORY FOODS

During the year the department received 67 complaints in respect of foreign matter in food, and other unsatisfactory foods, which is seven more than in the previous year.

Of these complaints nine were reported to the Related Health Services Committee, which resulted in warning letters being sent in each case to the firms involved.

The nine warning letters were in respect of:—

1. Dirty Milk Bottle.
2. Mould in sausage roll.
3. Slug in bottle of milk.
4. Mould in Cornish Pasty.
5. Piece of wire in Bar of Rock.
6. Piece of wire in Chorley Cake.
7. Piece of Hide in tin of Stewed Steak.
8. Piece of Glass in Mince Pie.
9. Piece of paper in packet of Potato Crisps.

It has been evident during the year that despite the most modern premises, machinery and equipment, the food manufacturer is entirely dependent upon his employees to ensure a first class product.

In most of the cases brought to the notice of the department the introduction of foreign matter into food has been due to some error or lack of care on the part of an employee. In fact, in one of the cases reported above it was proved that the foreign matter had been put into the article by certain aggrieved employees.

The increasing number of complaints received is, no doubt, due to the amount of publicity given to food hygiene and the increased public awareness regarding the quality and pureness of food.

MERCHANDISE MARKS ACT, 1926

The Chief Meat and Food Inspector carries out regular inspections of shops to ensure compliance with the Act.

As in past years a few minor contraventions were found regarding the labelling of tomatoes and apples as to their country of origin especially in the Spring, and very occasionally in butchers shops similar labelling errors were found.

Immediate representations by the Inspector to the persons in charge resulted in correction of the wrong labels.

No formal action under the Act was necessary in respect of these minor contraventions.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

Ten premises are registered under Section 2 of the Act—i.e. premises where filling materials are used. No premises are registered under Sections 6 or 7, i.e. premises where Rag Flock is manufactured or stored.

Twelve samples of Rag Flock or other filling materials were taken during the year and all were found to be genuine.

FOOD PREMISES

The following is a list of premises in the Borough where food businesses are carried out:—

Bakehouses	...	...	...	...	105
Butchers' Shops	...	...	...	...	170
Fish and Chip Shops	...	...	...	...	128
Restaurants and cafes	...	...	...	...	270
Residential Catering (hotels, boardinghouses)	...	...	...	...	3,572
Ice Cream Premises	...	...	...	...	45
Licensed premises and Clubs	...	...	...	...	224
Retail food shops	...	...	...	...	1,090
Food Factories	...	...	...	...	51
Factory, works and school canteens	...	...	...	...	63
Wholesale Caterers	...	...	...	...	11
Unlicensed clubs	...	...	...	...	5
Snack Bars	...	...	...	...	61
Stalls	...	...	...	...	92
Dairies	...	...	...	...	3

MILK SUPPLY

The following is a list of milk purveyors in the Borough:—

Milk Stores (Large Depots)	...	...	...	...	7
Dairymen's premises (not including farmers)	...	...	...	...	5
Distributors of bottled milk from retail shops	...	...	...	...	385
Street Roundsmen using registered dairies other than their own premises	...	...	...	...	8

MILK (SPECIAL DESIGNATIONS) REGULATIONS 1963

The following licences under the above Regulations were in operation at the end of the year 1967:—

Licensed Bottling Establishments

Pasteurised	...	...	...	...	1
Tuberculin Tested (Licence issued by the Ministry)	...	...	...	...	1

Dealers' Licences issued for the sale of prepacked milk

Tuberculin Tested	...	...	...	...	25
Pasteurised	...	...	...	...	346
Sterilised	...	...	...	...	293

BACTERIOLOGICAL ANALYSES OF MILK

The number of milk samples taken during the year was 363 of which 330 proved to be satisfactory.

BACTERIOLOGICAL SAMPLING RESULTS

Methylene Blue Test

Grade of Milk	Outside Borough		Inside the Borough	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Untreated	66 3 void	21	30 2 void	8
Pasteurised	86 2 void	2	23	1
Past. Homogenised ..	22			

* In one sample Penicillin or other antibiotic substance was present.

Phosphatase Test

Grade of Milk	Outside the Borough		Inside the Borough	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Pasteurised	90	—	24	—
Past. Homogenised ..	22	—	—	—

Animal Inoculation Test

Grade of Milk	Outside the Borough		Inside the Borough	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Untreated (for Tuberculosis)	40	—	10	—
Untreated (for Brucellosis) . .	36	4	10	—

Brucella Cultures Test

Grade of Milk	Outside the Borough		Inside the Borough	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Untreated	14	3	2	—

** Brucella abortus isolated.

Turbidity Test

Grade of Milk	Outside the Borough		Inside the Borough	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Sterilised	72	—	—	—

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR AND THE CHIEF MEAT AND FOOD INSPECTOR ON THE MANUFACTURE AND SALE OF ICE CREAM IN THE BOROUGH DURING 1967

1. Introduction

Ice cream has established for itself a firm place among the present day foods which play a regular and valuable part in the diet of the community. Its manufacture has grown over the years into a thriving trade with sales, once limited to the summer months, now spread over the year.

The two largest companies in the field, with more than 70 per cent. of the market, have been able to boost autumn and winter sales by mounting national campaigns through the various advertising media—obviously here lie opportunities for considerable expansion. At the same time the benefits from such sales have rebounded to the advantage of retailers stocking their products (shops are the largest retail outlet accounting for more than half of total sales) and increased demand has also helped a minority of local manufacturers who produce this delectable confection throughout the twelve months.

The majority of our Blackpool producers, however, depend for their living and prosperity on the season and if they are blessed with a multitude of visitors and a plethora of sunshine during June, July, August and September they contrive to prosper without winter trading. Too rarely do the two go together and 1967, alas, was not such a happy combination and will be remembered with little affection by our ice cream makers.

Sunshine was spasmodic, visitors were fewer, money was tight, there were competing demands for it and what with selective employment tax and the purchase "lollipop" tax, profits were hard earned.

This was well instanced in a survey "Women and the National Market—expenditure on Branded Food Products" in which it was reported, on the pattern of Ice Cream purchases, that regionally, housewives in the South West and Wales spent an average of 7d. per week, in London and the South East 6½d. per week—the comparable figure for the North West was only 2½d.

2. Registration of Manufacturers and Purveyors

Considering the keen competition amongst local and national manufacturers we were surprised to find that only one of our local producers of the traditional "hand" ice cream had opted out of the trade—remarkably, those using "soft heads" increased. Together they now total 27.

Retail selling points number over six hundred and have remained more or less static over the past twelve months.

3. Premises

The structural condition of premises used in the manufacture of ice cream was satisfactory, and accommodation in all cases was adequate. Retail selling points operated satisfactorily during the year.

4. Equipment

Every phase of manufacture, storage and sale, is carefully controlled and this has helped the Trade to emphasise to the public the fact that when buying ice cream

in this country, whether the vendor is a small local manufacturer or a large national concern, the highest standards of hygiene are observed in its preparation and its satisfactory quality is assured.

At the beginning of the year the provision of the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations 1966 were implemented. Vehicles selling ice cream for retail, not only have to provide facilities for the washing of hands, but in addition must now install facilities for the washing of equipment with an adequate supply of hot water at a suitably controlled temperature together with adequate supplies of soap or other suitable detergent and of clean cloths or other adequate and suitable cleaning and drying facilities.

In several purpose-built vehicles this proviso had been anticipated—in those lacking the facilities they were provided within a matter of days.

The outlook of our manufacturers remains progressive. New and better equipment is installed as it becomes available.

5. Sampling

For the purpose of analysis 24 samples were taken for chemical and 55 for bacteriological examination.

6. Chemical

The operative regulations remain the Food Standards (Ice Cream) Regulations 1959.

(a) The standards lay down a minimum of 5% fat and solids other than fat $7\frac{1}{2}\%$ for ordinary ice cream, whilst dairy ice cream must contain not less than 5% milk fat and $7\frac{1}{2}\%$ solids other than fat. Parev (Kosher) ice cream must contain not less than 10% fat and no milk fat or any other derivatives of milk.

(b) No ice cream of any description must contain any artificial sweetener.

An amendment in 1963 permitted the addition of sugar to the complete cold mix powder after heat treatment.

A comparative classification of the fat content in the samples for the years 1965, 1966 and 1967 is shown in the following table:—

Classification Fat Content %		1965	1966	1967
Over 5	Below 5	—	—	—
Over 6	Below 6	3	1	3
Over 7	Below 7	4	4	6
Over 8	Below 8	1	3	3
Over 9	Below 9	2	3	4
Over 10	Below 10	5	3	5
		3	8	3
		18	22	24

Samples taken on the sands gave the following fat percentages in relation to the respective manufacturers coded A to D.

Manufacturer	A	B	C	D
Per Cent. Fat...	8.75	10.4	9.1	9.8

Under paragraph 6(a) it will be noted that in relation to the fat content the legally prescribed minimum is 5%. By special condition inserted in the licences to trade on the sands, however, it is required that ice cream sold from stalls on the sands must contain not less than 8% of fat.

All samples complied with the operative Regulations.

7. Bacteriological

The following table shows the grading of 55 samples submitted for examination for the methylene blue test:—

Class of Mix.	Provisional Grade				Totals
	1	2	3	4	
Heat Treated	39	8	3	3	53
Cold Mix	1	—	1	—	2
Total	40	8	4	3	55

Grades 1 and 2

1964 80.5
1965 72.5
1966 75.6
1967 87.3

Grades 3 and 4

1964 19.5
1965 27.5
1966 24.4
1967 12.7

Summary

In May, at the opening of a refresher course held at Blackpool's College of Food Technology on "The Changing Emphasis on Food Inspection" we heard Mr. Morley Parry, O.B.E., F.R.S.H., Food Hygiene Advisory Officer to the Ministry of Health, say, inter alia, that in his opinion too many bacteriological samples of ice cream were taken for the mere sake of sampling.

In the discussion that followed we pointed out that much sampling was routine, that in Blackpool, having regard to the premises, equipment and hygiene conditions under which Ice Cream was manufactured we expected and obtained Grade 1's. Such results were communicated to the employer **and his employees** and served as a constant source of encouragement to maintain and uphold a high standard. One employer with a fleet of soft ice cream vehicles gives his driver/operator a bonus for every Grade 1 sample obtained.

Where Dr. Robertson reported Grade 3's or 4's we endeavoured, by going over the plant with the operators to pinpoint the likely source of contamination—that done we expected them to strive for higher grades. To some avail, as our results show.

These are the best figures for several years and we would pay tribute to the Trade for the willing co-operation accorded to us at all times.

We usually conclude by congratulating one of our local manufacturers on his success in National Competitions. For once his product was just out of the prize winners, but we must mention the continuing ingenuity he exercises with his creations in ice cream. His sweets have been the highlight of many functions in the Town for several years, striking in appearance it seemed a shame to cut into them . . . they tasted however, just as good as they looked.

"More than a Food—a treat".

FOOD AND DRUGS ACT, 1955

Commodity	Number of samples of each article examined			Number of samples of each article regarded as adulterated		
	Formal	Informal	Total	Formal	Informal	Total
Adrenalin Cream	—	1	1	—	—	—
Almonds (Ground)	—	1	1	—	—	—
Ammoniated Mercury Coal Tar and Salicylic Acid B.P.C.	—	1	1	—	—	—
Aneurine Compound	—	1	1	—	—	—
Angire's Emulsion	—	1	1	—	—	—
Antacid Powder	—	1	1	—	—	—
Apricots Dried	—	1	1	—	—	—
Aromatic Spirit of Ammonia	—	1	1	—	—	—
Bacon Savouree	—	1	1	—	—	—
Beans (Baked) with Hamburgers and Tomato Sauce	—	1	1	—	—	—
Beans and Beef Curry	—	1	1	—	—	—
Baking Powder	—	1	1	—	—	—
Beef (Corned)	—	2	2	—	—	—
Beef (Minced) with Onion and Gravy	—	1	1	—	—	—
Beef (Minced in gravy)	—	1	1	—	—	—
Beef (Potted)	—	1	1	—	—	—
Beef Ravioli in tomato and cheese sauce	—	1	1	—	—	—
Beef Stew and Vegetables	—	1	1	—	—	—
Beef, Vegetables and Gravy	—	1	1	—	—	—
Bigos (Pork Sausage and vegetables)	—	1	1	—	—	—
Boric Acid Ointment B.P.C.	—	1	1	—	—	—
Benzoric Acid Compound	—	1	1	—	—	—
Bread and Butter	1	—	1	1	—	1
Bread	—	1	1	—	—	—
Bread (Milk bread)	—	3	3	—	—	—
Bread (Milk)	—	6	6	—	3	3
Butter	—	2	2	—	—	—
Butter	—	2	2	—	—	—
Butter	—	3	3	—	—	—
Butter (Peanut)	—	1	1	—	—	—
Butter (Unsalted)	—	1	1	—	—	—
Cabbage	—	1	1	—	—	—
Cake Covering (Scotchoc)	—	1	1	—	—	—
Cake Mix (orange)	—	1	1	—	—	—
Calamine Ointment	—	1	1	—	—	—
Calcium Gluconate Tablets	—	1	1	—	—	—
Cauliflower	—	1	1	—	—	—
Cephus Powders	—	1	1	—	—	—
Cetrimide Solution 1%	—	1	1	—	—	—
Cheese (full fat soft)	—	1	1	—	—	—
Cheese (Mature Cheddar)	—	1	1	—	—	—
Cheese and Tomato Spread	—	1	1	—	—	—
Cheese Spread	—	1	1	—	—	—
Cheese Spread	—	1	1	—	—	—
Cheese Spread	—	1	1	—	—	—
Chicken (Boned) in Jelly	—	1	1	—	—	—
Chicken in Chicken Jelly	—	1	1	—	—	—
Chicken Chunks in Savoury Sauce	—	1	1	—	—	—
Chicken with Dumplings	—	1	1	—	—	—
Chicken and Ham with Parsley Sauce	—	1	1	—	—	—
Chicken (Chopped) in Jelly	—	1	1	—	—	—
Chicken and Mushroom Pie	—	1	1	—	—	—
Chipolatas (Pork)	—	1	1	—	—	—
Chocolate (Drinking)	—	1	1	—	—	—
Chocolate (Instant Drinking)	—	1	1	—	—	—
Coconut (desiccated)	—	1	1	—	—	—
Codeine Co. Tablets	—	1	1	—	—	—
Coffee (Instant)	—	2	2	—	—	—
Coffee (Instant)	—	1	1	—	—	—
Coffee (Instant)	—	2	2	—	—	—
Coffee (Instant)	—	2	2	—	—	—
Coffee (Roasted Pure)	—	1	1	—	—	—
Confectionery (Cake)	—	1	1	—	—	—
Confectionery (Cakes and Biscuits)	—	1	1	—	—	—
Cooking Fat	—	1	1	—	—	—
Cooking Fat	—	1	1	—	—	—
Corned Beef	—	1	1	—	—	—
Corned Beef Loaf	—	1	1	—	—	—
Cranberry Sauce	—	1	1	—	—	—
Cream	—	3	3	—	—	—
Cream	—	1	1	—	—	—
Cream	—	1	1	—	—	—
Curry and Mushrooms with Chicken	—	1	1	—	—	—
Curry (Chicken) with Raisins	—	1	1	—	—	—
Curry (Beef and Vegetable)	—	1	1	—	—	—
Curry Sauce Mixture	—	1	1	—	—	—
Custard Powder	—	1	1	—	—	—
Carried Forward	1	93	94	1	4	5

Commodity	Number of samples of each article examined			Number of samples of each article regarded as adulterated		
	Formal	Informal	Total	Formal	Informal	Total
Brought forward	1	93	94	1	4	5
Daisy Tablets	—	1	1	—	—	—
Dessert (Sweet Tops)	—	1	1	—	—	—
Dessert (Instant)	—	1	1	—	—	—
Dessert (Chiffon)	—	1	1	—	—	—
Diphenhydramine Capsules	—	1	1	—	—	—
Dripping	—	1	1	—	—	—
Ephedrine Tablets	—	1	1	—	—	—
Ephedrine Elixir B.P.C.	—	1	1	—	—	—
Eye Drops	—	1	1	—	—	—
Extract of Malt (Butterscotch flavour) with cod liver oil	—	1	1	—	—	—
Fever Mixture	—	1	1	—	—	—
Filling (Black Cherry)	—	1	1	—	—	—
Fish Paste	—	1	1	—	—	—
Flour, Plain	—	1	1	—	—	—
Flour, S.R.	—	1	1	—	—	—
Flour, Plain	—	1	1	—	—	—
Foot Balm	—	1	1	—	—	—
Formaldehyde Lozenges	—	1	1	—	—	—
Frankfurters	—	1	1	—	—	—
Freezone Corn Remover	—	1	1	—	—	—
Fruit Filling (Apricot)	—	1	1	—	—	—
Fynnon Salt	—	1	1	—	—	—
Faffelbiter in Wine Sauce	—	1	1	—	—	—
Grill (Mixed) with gravy and mushrooms	—	1	1	—	—	—
Gripe Water	—	1	1	—	—	—
Ham and Pork (Chopped)	—	1	1	—	—	—
Ham and Beef Roll	—	1	1	—	—	—
Ham and Pork (chopped)	—	1	1	—	—	—
Ham and Chicken Roll	—	1	1	—	—	—
Ham Tivoli	—	1	1	—	—	—
Ham Supreme	—	1	1	—	—	—
Hamburgers in gravy	—	1	1	—	—	—
Health Drink	—	1	1	—	—	—
Honey (Imported)	—	1	1	—	—	—
Hot Pot (Casserole of)	—	1	1	—	—	—
Ice Cream	—	5	5	—	—	—
Ice Cream (Dairy)	—	3	3	—	—	—
Ice Cream	4	10	14	—	—	—
Ice Cream (Dairy)	—	1	1	—	—	—
Ice Cream Mix	—	1	1	—	—	—
Indigestion Tablets (Setlers)	—	1	1	—	—	—
Indigestion Powder	—	1	1	—	—	—
Indigestion Powder	—	1	1	—	—	—
Indigestion Tablets	—	1	1	—	—	—
Iodine (Non-staining) with Methyl Salicylate	—	1	1	—	—	—
Iodine Solution (weak)	—	1	1	—	1	1
Iron Jelloids (Vitaminised)	—	1	1	—	—	—
Jam	—	2	2	—	—	—
Jam	—	2	2	—	—	—
Jam	—	1	1	—	—	—
Jelly (table)	—	3	3	—	—	—
Jelly (table)	—	1	1	—	—	—
Jelly (table)	—	2	2	—	—	—
Jelly	—	3	3	—	—	—
Lard	—	1	1	—	—	—
Lard	—	1	1	—	—	—
Lard	—	2	2	—	—	—
Lemon Cheese	—	2	2	—	—	—
Lemon Curd	—	1	1	—	—	—
Lobster Spread (Dressed)	—	1	1	—	—	—
Luncheon Meat	—	1	1	—	—	—
Margarine	—	1	1	—	—	—
Margarine 10% butter	—	2	2	—	—	—
Margarine	—	3	3	—	—	—
Margarine	—	1	1	—	—	—
Margarine	—	1	1	—	—	—
Marmalade	—	1	1	—	—	—
Marzipan	—	1	1	—	—	—
Meat Paste (chicken)	—	1	1	—	—	—
Meat Paste	—	1	1	—	—	—
Meat (Pork Luncheon)	—	2	2	—	—	—
Meat Paste	—	3	3	—	—	—
Meggason Dyspepsia Tablets	—	1	1	—	—	—
Methyl Salicylate B.P.C.	—	1	1	—	—	—
Milk	—	27	27	—	—	—
Milk	—	20	20	—	1	1
Carried Forward	5	244	249	1	6	7

Commodity	Number of samples of each article examined			Number of samples of each article regarded as adulterated		
	Formal	Informal	Total	Formal	Informal	Total
Brought forward	5	244	249	1	6	7
Milk	1	29	30	1	1	2
Milk (evaporated, unsweetened)	—	1	1	—	—	—
Milk (evaporated, full cream)	—	1	1	—	—	—
Milk (evaporated)	—	2	2	—	—	—
Milk Top 18% Butterfat	—	1	1	—	—	—
Milk	—	21	21	—	—	—
Milk (Dried, Skimmed)	—	1	1	—	—	—
Mincemeat	—	1	1	—	—	—
Mincemeat	—	1	1	—	—	—
Mu-Con Tablets	—	1	1	—	—	—
Nocki in Cheese Sauce	—	1	1	—	—	—
Nocki in Tomato Sauce	—	1	1	—	—	—
Nurse Harvey's Baby Mixture	—	1	1	—	—	—
Omelette Mix (Cheese)	—	1	1	—	1	1
Opiate Linctus of Squill	—	1	1	—	—	—
Orange Juice with added sugar	—	1	1	—	—	—
Ox Tongue (sliced)	—	1	1	—	—	—
Paraffin (liquid) with Magnesium Hydroxide Emulsion	—	1	1	—	—	—
Peanut Crumble	—	1	1	—	—	—
Peas	—	1	1	—	—	—
Pepper (White)	—	1	1	—	—	—
Pholcodein Linctus Strong B.P.C.	—	1	1	—	—	—
Pie (Chicken and Mushroom)	—	1	1	—	—	—
Pie (Chocolate Meringue)	—	1	1	—	—	—
Pie Filling (Apple)	—	1	1	—	—	—
Pie Filling	—	1	1	—	—	—
Pie (English Pork)	—	1	1	—	—	—
Pork (minced)	—	1	1	—	—	—
Pork Roll (stuffed)	—	1	1	—	—	—
Pork (Pure)	—	1	1	—	—	—
Pork Luncheon Meat	—	2	2	—	—	—
Potatoes (Instant Mashed)	—	1	1	—	—	—
Potatoes	—	1	1	—	—	—
Potassium Chloride Tablets	—	1	1	—	—	—
Potassium Tablets	—	1	1	—	—	—
Prawns (peeled)	—	1	1	—	—	—
Pudding (Christmas)	—	1	1	—	—	—
Pudding (Creamed Sago)	—	1	1	—	—	—
Pudding (Creamed Tapioca)	—	1	1	—	—	—
Pudding (Sultana)	—	1	1	—	—	—
Pudding (Creamed Rice)	—	1	1	—	—	—
Pudding (Creamed Semolina)	—	1	1	—	—	—
Pudding (Syrup all-butter sponge)	—	1	1	—	—	—
Pudding (Creamed Rice)	—	1	1	—	—	—
Pudding (Creamed Sago)	—	1	1	—	—	—
Pudding (Steak and Kidney)	—	1	1	—	—	—
Pudding Mix (Sponge Chocolate)	—	1	1	—	—	—
Pudding Mixture	—	1	1	—	—	—
Radian B.	—	1	1	—	1	1
Sardines in tomato sauce	—	1	1	—	—	—
Sausage (Beef)	—	1	1	—	—	—
Sausage (Pork)	—	1	1	—	—	—
Sausage (Beef)	—	1	1	—	—	—
Sausage (Pork)	—	1	1	—	—	—
Sausage (Pork) with beans in tomato sauce	—	2	2	—	—	—
Sausage (Pork)	—	1	1	—	—	—
Shrimps	—	1	1	—	—	—
Shrimps	—	1	1	—	—	—
Sild in Vegetable Oil	—	1	1	—	—	—
Snowfire Healing Tablet	—	1	1	—	—	—
Sodium Bicarbonate Compound B.P.	—	1	1	—	—	—
Soft Drink	—	2	2	—	—	—
Soft Drink	—	1	1	—	—	—
Soft Drink	—	2	2	—	—	—
Soft Drink	—	1	1	—	—	—
Soup	—	1	1	—	—	—
Soup	—	3	3	—	—	—
Spaghetti in Tomato and Cheese Sauce	—	1	1	—	—	—
Spaghetti in Tomato and Cheese Sauce	—	1	1	—	—	—
Spaghetti Sauce	—	1	1	—	—	—
Spirit Ear Drops B.P.C.	—	1	1	—	—	—
Steak (Savoury Minced)	—	1	1	—	—	—
Steak (Stewed) in gravy	—	1	1	—	—	—
Steakburgers and Onions	—	1	1	—	—	—
Steak (Minced) with Onions and Gravy	—	1	1	—	—	—
Tea	—	1	1	—	—	—
Carried forward	6	375	381	2	9	11

Commodity	Number of samples of each article examined			Number of samples of each article regarded as adulterated		
	Formal	Informal	Total	Formal	Informal	Total
Brought forward	6	375	381	2	9	11
Terms (Energen)	—	1	1	—	—	—
Tomato Paste (concentrated)	—	1	1	—	—	—
Turkey Chasseur	—	1	1	—	—	—
Vinegar (Malt)	—	1	1	—	—	—
Vinegar (Malt)	—	2	2	—	—	—
Vinegar (Malt)	—	2	2	—	—	—
Vitamin B Tablets	—	1	1	—	—	—
Welsh Rarebit	—	1	1	—	—	—
Wholemeal Loaf	—	1	1	—	—	—
Zinc Undecenoate B.P.	—	1	1	—	—	—
Zinc Starch and Talc. Dusting Powder	—	1	1	—	—	—
TOTAL	6	388	394	2	9	11

DETAILS OF ACTION TO BE TAKEN AND RESULTS OF ANALYSIS IN RESPECT OF SAMPLES REPORTED BY THE PUBLIC ANALYST AS BEING UNSATISFACTORY

Sample No.

44 Radian B (Informal)

A sample of proprietary medicine deficient in Menthol. Reported to the Related Health Services Committee. Letter sent to the British Pharmaceutical Society.

144 Milk (Informal)

A sample of milk containing 4.7% of extraneous water. Reported to Related Health Services Committee. Formal sample taken.

151 Milk (Formal)

A sample of milk containing 5.8% of extraneous water. Reported to Related Health Services Committee. Warning letter sent to the Producer.

159 Bread and Butter (Informal)

A sample of bread spread with margarine. Reported to Related Health Services Committee. Proceedings instituted.

233 Milk Loaf Roll (Informal)

A milk loaf roll not conforming to the Bread and Flour Regulations. Deficient in whole milk solids to the extent of 50%. Reported to Related Health Services Committee. Warning letter sent to the Supplier

255 Non-Staining Iodine with Methyl Salicylate (Informal)

Non-staining Iodine with methyl salicylate not conforming to the requirements of the B.P.C. Reported to the Related Health Services Committee. Letter sent to the British Pharmaceutical Society.

280 Milk (Informal)

Milk (untreated) sub-standard but genuine, deficient in solids not fat to the extent of 5.9%. Reported to Related Health Services Committee. Warning letter sent to the Producer.

312 Milk Loaf (Informal)

Milk loaf not conforming to Regulation 15(1) of the Bread and Flour Regulations, which requires milk bread to contain not less than 6% of whole milk solids. The sample contained 4% of skimmed milk solids. Reported to the Related Health Services Committee. Warning letter sent to the Manufacturer.

313 Milk Loaf (Informal)

Milk loaf not conforming to Regulation 15(1) of the Bread and Flour Regulations. The sample contained only 1.4% of skimmed milk solids and not 6% of whole milk solids. Reported to Related Health Services Committee. Warning letter sent to the Manufacturer.

314 Milk Loaf (Informal)

Milk loaf not conforming to Regulation 15(1) of the Bread and Flour Regulations. The sample contained only 4% of skimmed milk solids and not 6% of whole milk solids. Reported to Related Health Services Committee. Warning letter sent to the Manufacturer.

360 Cheese Omelette (Informal)

A cheese omelette not conforming to the Labelling of Food Order, 1953—Article 4(1). The article contained two separate mixtures for which the ingredients were not listed on the innermost wrappers. Reported to the Related Health Services Committee. The matter was drawn to the attention of the Manufacturers.

FERTILISERS AND FEEDING STUFFS ACT, 1926

During the year 16 samples were taken and the results received from the Public Analyst are set out below:—

Nature of Sample	Informal		Formal	
	Genuine	Not Genuine	Genuine	Not Genuine
Liquid Blood Manure	1	—	—	—
Compure K. (Liquid)	1	—	—	—
Bio-Plant Foods (Liquid)	1	—	—	—
Phostrogen	1	—	—	—
Battery Mash	1	—	—	—
Chick Starter Mash	1	—	—	—
Turkey Starter Crumbs	1	—	—	—
Intensive Laying Mash	—	1	—	—
Bone Meal	1	—	—	—
Garden Compound Manure	1	—	—	—
Phostrogen	1	—	—	—
Ten Day Fertiliser	1	—	—	—
Hybrid Layers Mash	1	—	—	—
Intensive Growing Mash	1	—	—	—
Pig Fattening Meal	1	—	—	—
Battery Mash	1	—	—	—
Totals	15	1	—	—

Action taken in respect of the sample which did not comply with the requirements of the Act is detailed below:—

Sample No. 8—INTENSIVE LAYING MASH

This sample contained 2.8% more protein than the amount declared. The excess of protein, which was not to the prejudice of the purchaser, was 1.7% outside the limits of variation permitted by the Fertilisers and Feeding Stuffs Regulations, 1960. The sample was a compound feeding stuff within the meaning of the Regulations.

This matter was reported to the Related Health Services Committee. A letter was sent to the Manufacturer.

PROSECUTIONS—1967

Month	Section	Contravention
September	Offices, Shops and Railway Premises Act, 1963.	No handrail to the cellar steps. Fined £20.0.0. Defective treads to the cellar steps. Fined £10.0.0. No guard rail to the trap door. Fined £20.0.0.
September	Food and Drugs Act, 1955, Section 2.	Bread and Butter—analysed as Bread and Margarine. Fined £20.0.0.
September	Caravan Sites and Control of Development Act, 1960.	No hard standing for the caravans. Surfaced footpaths not provided from the caravans to the roadway. No fire point or water buckets provided. An adequate supply of piped water not available from a point within 60 feet of the caravan standings. A trapped gully for the drainage of waste water not provided at a water supply point. No provision made for the disposal of drainage. Refuse bins with close fitting lids not provided. Adequate provision not made for surface water drainage of the land. Fined £40.0.0.
September	Food Hygiene (General) Regulations, 1960.	No fixed wash hand basin: No hot water supply: No clothes cupboard: Sink in dirty condition: Dirty condition of walls, floors and ceiling of food preparation room: Broken glass roof of food preparation room—risk of contamination of food from birds: Meat deposited in room: Lower boarding of the wall defective risk of contamination from mice. Fined £45.0.0.



COUNTY BOROUGH OF BLACKPOOL



THE HEALTH OF THE SCHOOL CHILD

REPORT

of the

PRINCIPAL SCHOOL MEDICAL

OFFICER

FOR THE YEAR 1967

COUNTY BOROUGH OF BLACKPOOL



THE HEALTH OF THE SCHOOL CHILD

REPORT

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PRINCIPAL SCHOOL MEDICAL

OFFICER

FOR THE YEAR 1967

**To the Chairman and Members of the Education Committee of the
Corporation of Blackpool.**

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting the report of the School Health Service for the year 1967.

Despite the lower birth rate in 1967, the school population once again showed an increase, there being 688 pupils more this year in our schools than 1966; the increase appears to have been evenly spread.

The rather precarious staffing situation which existed at the end of 1966 has been partially relieved, but considerable difficulties remain. We have been very fortunate in securing the full-time services of a Psychiatric Social Worker and a Teacher of the Deaf, and the differences these appointments have made to the services concerned are most gratifying. However, at the end of 1967 the posts of Speech Therapist and Educational Psychologist remained unfilled; the part-time staff who provide services in these fields are performing an invaluable task, but nevertheless only a bare minimum of help can be given to the schools who require it. The Health Visiting service has also suffered during 1967 because of shortage of staff, especially a Superintendent Health Visitor to run the Department and co-ordinate the work being done.

I have no doubt whatever that a first class School Health Service depends primarily on the quantity and quality of its professional staff; the management of difficulties and disabilities in schoolchildren often covers a wide field of professional skills, and upon these skills depends the quality of the help and advice we give to parents and teachers. I submit that we in Blackpool must ever remain alert to the need to attract and retain good professional staff; such personnel are often in short supply, we are therefore in a competitive market and we must be prepared to offer attractive terms and conditions; I believe too that this argument applies just as much to the retention of staff we already possess.

The number of inspections carried out by school doctors in 1967 was well up to the yearly average, the vast majority of the children being in good general health physically. However, emotional problems seem to be constituting an increasing volume of our work and in consequence to be stretching the Child Guidance Services almost to the limit; one is always conscious of the need to work very closely with other local authority departments such as the Children's Department, Education, Probation and Police, if these children in difficulties are to receive the help they need. So very often one finds behind a disturbed child a whole family structure in need of skilled assistance.

Work with handicapped children always occupies a large part of the time of a School Health Service, and this year has been no exception. As mentioned in the section of the report dealing with Child Guidance, a new Day Unit for Maladjusted Children was opened early in 1967, with facilities for about a dozen male pupils; this Unit is under the supervision of the Consultant Child Psychiatrist and a link is maintained with the pupil's school, with a view to returning him there as soon as practicable.

Handicapped children from all types of school require special guidance and support at the time when they leave school to go out into the community and in response to a Circular from Central Government Departments a Case Conference has been set up during 1967 by Blackpool Local Authority; the Conference consists of representatives of School Health, Education, Welfare and Youth Employment and is designed to consider all handicapped pupils in the year in which they are to leave school; the Conference meets twice yearly and representatives of any other bodies, statutory or voluntary, who are concerned with handicapped children are invited to attend. The object is to co-ordinate all available services for the handicapped to enable them to integrate as fully as possible into the work and life of the community after leaving school.

The appointment of a full-time Teacher of the Deaf has enabled us to expand our services for children handicapped by hearing difficulties; the teacher works in close association with the Ear, Nose and Throat Consultant and the Hearing-Aid Department at the Victoria Hospital. Plans were almost complete at the end of 1967 for the opening of an Audiology Clinic to assess the hearing of children below school age, and it is expected that this service will commence early in 1968.

Once again I would like to thank the Chairman and Members of the Education Committee for their support and encouragement during the year, and in particular for their endeavours to assist us in the recruitment of much needed professional staff. I wish to thank the Medical, Health Visiting and Nursing Staff for their conscientious work throughout the year, and also to record my appreciation of the help we have received from all other departments of the Local Authority. I think the School Health Service in Blackpool maintains a high standard, and I trust we shall continue in this vein in the forthcoming year.

Municipal Health Centre,
Whitegate Drive,
Blackpool.
Tel. No. Blackpool 63232

D. W. WAUCHOB,
Medical Officer of Health

STAFF OF THE SCHOOL HEALTH SERVICE

Principal School Medical Officer:

David W. Wauchob, M.B., B.Ch., D.P.H.

Deputy Principal School Medical Officer:

J. C. Talbot, M.R.C.S., L.R.C.P., D.P.H.

Assistant Deputy Medical Officer:

E. J. Walsh, M.R.C.S., L.R.C.P., D.P.H.

School Medical Officers:

Marie J. Ribchester, L.R.C.P. & S. (Edin.), L.R.F.P. & S. (Glasgow)

Philip W. Lang, L.R.C.P. & S. (Edin.), L.R.F.P. & S. (Glasgow), D.P.H.

Ann E. C. Jewsbury, M.B., Ch.B., D.Obst., R.C.O.G.

J. Geoffrey Leece, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Consultant Ophthalmic Surgeon (Part-time):

Thomas S. Blacklidge, M.D., D.O.M.S.

Consultant Ear, Nose and Throat Surgeon (Part-time):

Ian B. Thorburn, M.B., Ch.B., F.R.F.P.S., F.R.C.S., D.L.O.

Consultant Child Psychiatrist (Part-time):

T. W. Rogers, M.B., Ch.B., D.P.M.

Senior Educational Psychologist:

Post Vacant

Educational Psychologist:

Post Vacant

Educational Psychologists (Part-time):

Mrs. D. M. Hughes, B.A.

G. Easting, B.A.

C. Nyquist, B.A.

Psychiatric Social Worker:

Mrs. M. Godsell, A.A.P.S.W., (commenced 1.2.67)

Social Worker:

Mrs. M. Aitken, S.R.N., Dec. of Rec. C.T.S.W.

Principal School Dental Officer:

Marshall Smith, L.D.S., R.C.S. (Eng.)

Consultant Dental Surgeon (Part-time):

H. Ackers, M.B., F.D.S., R.C.S.E., F.R.C.S.

Dental Officers:

R. Martyn, L.D.S.

Mrs. J. Hopkinson, L.D.S. (Part-time)

H. Marshall, L.D.S. (Part-time)

J. R. Hall, L.D.S., R.C.S. (Part-time)

Superintendent Health Visitor/School Nurse:

Post Vacant

Group Advisers (Health Visitor/School Nurses):

Miss A. G. M. Holden, S.R.N., S.C.M., H.V.

Miss M. Saunders, S.R.N., H.V., Nursing Admin, (P.H.) Cert.

Health Visitor/School Nurses:

Mrs. A. Beverley, S.R.N., S.C.M., H.V.

Mrs. A. Brining, S.R.N., S.C.M., H.V.

Mrs. J. M. Brookes, S.R.N., H.V.

Mrs. D. Burrows, S.R.N., S.C.M., H.V.

Mrs. E. M. Butler, S.R.N., S.C.M., H.V.

Mrs. C. Dimond, S.R.N., S.C.M., H.V. (Part-time)

Mrs. J. Fitzgerald-Lee, S.R.N., H.V.

Miss C. Hardman, S.R.N., S.C.M., H.V.

Mrs. M. Harrap, S.R.N., H.V.

Miss A. R. Hickson, S.R.N., S.C.M.

Mrs. M. O. Johnston, S.R.N., S.C.M., H.V. (Part-time)

Mrs. B. Marsden, S.R.N., S.C.M., H.V., S.I.

Mrs. S. Midgeley, S.R.N., S.C.M., H.V.

Miss S. Morris, S.R.N., S.C.M., H.V.

Mrs. O. Newlove, S.R.N., S.C.M., H.V.

Miss M. F. Powell, S.R.N., S.C.M., H.V.

Mrs. H. P. Price, S.R.N., H.V.

Mrs. S. Roe, S.R.N., Q.N., H.V.

Miss M. Ryder, S.R.N., S.C.M., S.R.F.N., H.V.

Mrs. M. Thompson, S.R.N., S.C.M., H.V.

Miss M. Toomey, S.R.N., S.C.M., H.V.

Student Health Visitors:

Mrs. B. Royle, S.R.N.

Miss K. Hickman, S.R.N., S.C.M.

Mrs. M. McRoy, S.R.N., R.F.N., Q.I.D.N.

Clinic Nurses:

Mrs. F. Clews, S.R.N.
Mrs. M. Dania, S.R.N.
Mrs. N. Davies, S.R.N., S.C.M.
Mrs. E. Lavelle, S.R.N.
Mrs. S. McGregor, S.R.N. (Part-time)

Speech Therpaists:

Post Vacant
Mrs. A. Blair, L.C.S.T., (Part-time)

Specialist Teacher of the Deaf:

Kenneth Newson, Univ. Cert. for Teachers of the Deaf,
Manchester University (commenced Sept. 1967)

Physiotherapists:

Mrs. W. Shore, M.C.S.P. (Part-time)
Mrs. L. Taylor, M.C.S.P.
Mrs. M. Ward, M.C.S.P.

Clerical Staff:

Mrs. B. McKenna (Section Senior Clerk)
Mrs. M. Roberts
Mrs. P. Driver
Miss K. Hodges
Mrs. M. Webb.

Dental Surgery Assistants:

Miss C. Banks
Mrs. M. V. Snow-Miller
Mrs. W. Wood
Mrs. B. Johnson (part-time)

Hygiene Assistant:

Mrs. J. Williamson

COUNTY BOROUGH OF BLACKPOOL

Area of Borough (including foreshore)—acres	...	...	...	...	10,588
Population (Registrar-General's latest official estimate)	...	...	...	...	151,510

	No. of Schools	Number of Pupils	
		1967	1966
Secondary Grammar	3	2,014	1,950
Secondary Modern	9	5,166	4,948
Primary	32	11,398	11,081
Special Day E.S.N.	1	168	162
Open Air	1	100	101
Residential School for Maladjusted	1	44	45
Direct Grant Grammar	3	1,956	1,920
Independent Grammar	1	389	376
Private and Preparatory	7	505	469
		<hr/> 21,740	<hr/> 21,052

CLINIC PREMISES

School Medical Service

CENTRAL SCHOOL CLINIC, WHITEGATE DRIVE

Open Daily, Monday to Friday	...	...	...	9.0 a.m. to 12 noon
				1.45 p.m. to 4.30 p.m.

Branch Clinics

BISPHAM SCHOOL CLINIC

Open Monday (Doctor in attendance)	...	...	9.30 a.m. to 12 noon
Thursday (Nurse in attendance)	...	...	2.0 p.m. to 4.30 p.m.

ABBAY ROAD SCHOOL CLINIC

Open Monday (Doctor in attendance)	..	..	9.30 a.m. to 12 noon
Friday (Nurse in attendance)	..	..	4.0 p.m.

The following Specialist Clinics are held at the CENTRAL SCHOOL CLINIC:—

	No. of Sessions
Child Guidance Clinic	10 per week
Speech Clinic	5 per week
Audiology and Lip Reading Clinic	10 per week
Ophthalmic Clinic	2 per week
Ear, Nose and Throat Specialist's Clinic...	1 per month

SCHOOL DENTAL CLINIC

Principal School Dental Officer—Marshall Smith, L.D.S., R.C.S. (Eng.)

Clinics:

Central Clinic:	Whitegate Drive
Branch Clinics:	Ashburton Road
	Abbey Road

Appointments:

Central Clinic	...	...	Monday to Friday, 9.0 a.m. to 12 noon. 2.0 p.m. to 4.30 p.m.
Ashburton Road	...	...	Monday to Thursday, 9.30 a.m. to 12 noon.
Abbey Road	...	...	Monday to Thursday, 9.30 a.m. to 12 noon. Friday: 9.30 a.m. to 12 noon. 2.0 p.m. to 4.30 p.m.

Casualties and emergencies can be seen as follows:—

Central Clinic	...	...	Monday, Wednesday, Friday, 9.30 a.m. to 12 noon.
Abbey Road	...	...	Wednesday, 9.0 a.m. to 12 noon.

Consultant Dental Surgeon

The Consultant Dental Surgeon holds clinics at Central Clinic on Monday and Tuesday, 2.0 p.m. to 4.30 p.m. Cases are seen by appointment only.

Children under five and Expectant Mothers

Children under five and Expectant Mothers can be seen at any of the above clinics, by appointment.

PERIODIC MEDICAL INSPECTIONS IN SCHOOLS

Year of Birth						1967	1966
1962 and 1963 (Entrants)						731	101
1961	...	...	...	...	...	633	1,096
1960	...	...	...	...	...	79	633
1959	...	...	...	...	...	35	52
1958	...	...	...	...	...	27	56
1957	...	...	...	...	...	104	31
1956	...	...	...	...	...	289	96
1955	...	...	...	...	...	154	251
1954	...	...	...	...	...	35	124
1953	...	...	...	...	...	412	7
1952 and earlier	...	...	...	...	...	1,595	1,398
						<hr/> 4,094	<hr/> 3,845

Other examinations were carried out in the Schools as follows:—

Re-examinations	...	...	...	...	...	606
Special Inspections	...	...	...	...	...	388
Nurses' 7+ Survey (Vision Tests)	...	...	...	...	...	2,279
Foot Inspections	...	...	...	...	...	2,925

Other School work:—

Audiometer Sweep Tests	...	...	...	...	1,074
Total number of children immunised against Diphtheria and Tetanus	...	...	...	...	2,564
Total number immunised against Poliomyelitis	...	...	...	...	1,515
Total number who had B.C.G. vaccinations against Tuberculosis	...	...	...	...	1,473

WORK OF THE HEALTH VISITOR/SCHOOL NURSES

The Health Visitor/School Nurses have continued their many duties in the schools, clinics and homes, with Clinic Nurses helping in the various clinics.

The total number of visits made by the Health Visitor/School Nurses during the year is as follows:—

Visits to the schools	...	...	...	...	617
Visits to the homes	...	...	...	...	737

CLEANLINESS

Total number of cleanliness inspections in school during the year	...	...	...	...	25,570
Number of individual children infested	...	...	...	...	269
Cleansing Notices issued (Sect. 54)	...	...	...	...	—

CLEANLINESS CENTRES—REPORT OF HYGIENE ASSISTANT

Heads	Number of individual children	...	...	...	167
	Total attendances	...	...	...	590
	Cleared	...	...	...	152
	Re-infested	...	...	...	10
	Cleared	...	...	...	10
Scabies	Number of individual cases	...	...	...	87
	Attendances	...	...	...	290
	Number Cleared	...	...	...	80
	Re-infested	...	...	...	12
	Cleared	...	...	...	12
Baths	Number of individual cases	...	...	...	12

MEDICAL CLINICS

The Eye Specialist's clinics continued to be held twice a week and the Ear, Nose and Throat Specialist again attended once a month, mainly for children with hearing difficulties.

The weekly Enuretic Clinic continued, and 98 individual children attended (70 boys and 28 girls). At the end of the year, three were waiting for a Bell Mattress.

During the year, 58 new cases were referred from the various Clinics to the Physiotherapy Department for Light Treatment, and other treatment as follows:—

Light treatment	...	...	...	...	49
Breathing exercises	...	...	...	...	7
Special exercises	...	...	...	...	2

Some of these cases had come from General Practitioners to the Clinic; others had been referred by the Chest Physician.

Attendances at the Medical Clinics during the year were as follows:—

		1967	1966
Attendances at Medical Clinics	...	10,037	11,446
Number of ailments treated	...	4,154	4,015

DETAILS OF CASES REQUIRING EXAMINATION, TREATMENT OR ADVICE AT THE MEDICAL CLINICS

SKIN				1967	1966
Diseases of the Skin (including Verrucas)	...	...	...	1,060	871
EYES					
Visual defects (including Squints)	...	...	...	1,053	932
External eye defects	...	...	...	56	84
Glasses for repair or replacement	...	...	...	271	266
EARS					
Deafness, earache, etc.	...	...	...	141	183
NOSE AND THROAT					
Catarrh, sore throat, tonsillitis, etc.	...	...	...	24	42
ORTHOPAEDIC					
Crippling defects, poor posture, flat feet	...	...	...	24	40
NERVOUS DISORDERS	...	...	...	1	1
DEVELOPMENT	...	...	...	4	—
PSYCHOLOGICAL CASES					
Development	...	...	...	2	32
Stability (including Enuresis)	...	...	...	131	149
MEDICAL CASES, including:—					
Speech defects, lymphatic glands, heart and circulation, chest and lung defects, and miscellaneous medical cases				68	138
SURGICAL CASES, including:—					
Injuries, sprains, wounds, burns, abscesses, etc.	...	...	...	331	381
INFECTIOUS DISEASES	...	...	...	2	—
OTHER EXAMINATIONS (see below)	...	...	...	986	1,282

SPECIAL EXAMINATIONS CARRIED OUT BY THE SCHOOL MEDICAL OFFICERS

402 children were examined to allow them to work out of school hours, mainly for delivery of newspapers.

28 children were examined to permit them to take part in public entertainments, principally for the Tower Ballet.

There were 56 periodic examinations of boarded-out children during the year, by arrangement with the Children's Officer, and boarded-out children have also been examined and treated at the Clinics for minor ailments.

117 vision tests were carried out in the Clinics (additional to those seen by the Ophthalmic Specialist).

188 examinations were carried out on children home on holiday from residential special schools, to ensure that they were free from any infection before returning to school.

Teacher Training Colleges—160 candidates were examined during the year; arrangements were made, where necessary, for chest examinations in the Chest Clinic at the Municipal Health Centre.

To assess children with suspected physical or mental handicaps, 35 examinations were carried out by the School Medical Officers under Sections 34 and 57 of the Education Act, 1944. This is done at any age after the child's second birthday to make sure that no child was missed who may have needed special education.

388 children were examined re fitness to take part in physical education, swimming, boxing, walking tours, etc.

SPECIALIST TREATMENT

The following cases were referred for specialist opinion to the Blackpool Hospital from the School Medical Clinics, during the year:—

Ear, Nose and Throat cases	...	...	...	...	...	...	13
Tonsil and adenoid operation	...	...	...	...	...	...	9
Orthoptic treatment	...	...	...	...	...	...	40
Casualties and emergencies	...	...	...	...	...	...	37
Surgical cases	...	...	...	...	...	...	9
Orthopaedic cases	...	...	...	...	...	...	11
Breathing exercises	...	...	...	...	...	...	1
Paediatrician	...	...	...	...	...	...	20
Other	...	...	...	...	...	...	2

ORTHOPAEDIC AND POSTURAL DEFECTS

Children treated as In-patients at Victoria Hospital	...	...	...	20
Children treated as Out-patients at Victoria Hospital	...	...	...	3
Orthopaedic cases seen in the School Clinics	...	...	...	24

HEART DEFECTS

There were six children found, at the routine medical inspections in schools, to require treatment for defects of heart and circulation; 43 children were put on the list for observation.

SPASTIC PARALYSIS

Number of children on roll at Highfurlong School who are									
Spastics	...	...	...	...	...	...	...	...	14
Number on Home Tuition	...	...	...	...	...	...	...	...	1

CONVALESCENT TREATMENT

During the year, eight delicate and debilitated children received treatment in Convalescent Homes, as follows:—

West Kirby Convalescent Home	7
Taxal Edge Convalescent Home, Cheshire	1

OPHTHALMIC CASES

(Seen by Eye Specialist at Central School Clinic)

	1967	1966
Number of children examined, including eight infants referred from the Infant Welfare Clinics for examination	1,053	932
Number for whom spectacles were prescribed	455	375
Number, already wearing spectacles, for whom no change of lens was prescribed	429	387
Number for whom spectacles were not advised	161	158
Number referred for Orthoptic treatment	40	57

The following is an analysis of the defects found among the children for whom spectacles were prescribed:—

Simple Hypermetropia	71
Hypermetropic Astigmatism	16
Simple Myopia	311
Myopic Astigmatism	22
Other cases	35

NOSE AND THROAT DEFECTS

At the routine medical inspections, 36 children were found to require treatment for nose and throat defects, and 196 children required observation for minor defects.

During the year, 608 children received operative treatment at the Blackpool Hospitals for tonsils and adenoids. 16 were referred from the School Health service, and the remainder direct from the private doctors. Ear operations totalled 104, and 33 were admitted for other nose and throat defects.

EAR DEFECTS

During the year, 62 children were found at routine medical inspections in schools to be suffering from defects of the ear requiring treatment, as follows:—

Defective Hearing	28
Other cases	34

The Ear, Nose and Throat Specialist from Victoria Hospital continued to visit the Clinic once a month. Details of cases seen are as follows:—

Number of Clinics	9
Number of children examined	59

Recommendations:

Referred to Victoria Hospital for Tonsil and Adenoid operation	...	1
Referred to Hospital for Tonsils and Adenoids and microscopic examination of ears	... ..	6
Referred to Hospital for other treatment	... ..	16
For recall to E.N.T. Clinic after a repeat hearing test	... ..	6
Lip Reading Lessons...	... ..	1
Hearing retests	... ..	7
Supply of hearing aid	... ..	2
Other treatment	... ..	18
No further action at present	... ..	2

Audiometer tests

Sweep tests for the 6+ groups were continued in the schools to ascertain hearing defects as early as possible. Children who show any hearing loss in the sweep tests are seen and re-tested at the Central School Clinic by the Specialist Teacher of the Deaf. They are then discussed with a School Medical Officer, and if necessary, referred to the Ear, Nose and Throat Specialist Clinic.

Number of children tested in Schools	... ..	1,675
Number tested in the Clinic	... ..	611

Details

(a) Schools:	Number of sessions	... ..	74
	Total number tested	... ..	1,675
	Number found to have a hearing loss	... ..	364
(b) Clinic:	Total number of children tested (including reviews)	... ..	611
	Number found to have defective hearing at first test, and subsequently reviewed	... ..	47

All children who show slight defective hearing but not requiring any special treatment are kept under observation in the schools, and teachers are asked to note their progress; they are also reviewed periodically at the Clinic.

Partially Hearing children receiving special tuition

The number of partially hearing children receiving lip reading or speech tuition rose by the end of the year to seventeen. In addition, six pre-school children were receiving help and their parents being given parent guidance.

Mr. Newson also conducted hearing tests and retested children who were due to have their hearing checked at regular intervals.

During 1968 the facilities for testing the hearing of children will be greatly improved. A new audiology clinic has been opened at the Central School Clinic and Dr. Jean Robson, from the Fulwood Clinic, Preston, has been appointed Medical Officer in charge. It will now be possible to make more accurate assessments of the hearing of very young children.

SPEECH CLINIC

Mrs. Blair, Speech Therapist, has submitted the following report on the Speech Clinic for 1967:—

The staff situation in the Speech Therapy department remains the same as in 1966, with a resulting curtailment in the number of speech defective children able to be treated regularly. Although the number receiving treatment appears not to have decreased greatly, a great proportion of the children are being seen only at intervals, or in groups, to cope with the problem of numbers. The waiting list is only a small indication of the number of children requiring speech therapy, as regular primary school visits have had to cease because of lack of time.

I would like to thank all departments, and especially Head Teachers, for their understanding and tolerance of the present situation, and hope that 1968 will see the department staffed with one, if not two, full-time Speech Therapists.

Total attendances at Speech Clinic during the year	...	...	...	1,123
Number of children receiving regular or periodic treatment at the end of the year	...	...	...	120

Analysis of cases receiving treatment

Predominantly Stammer	...	...	...	...	...	...	30
Predominantly Dyslalia	...	...	...	...	...	...	82
Other defects	...	...	...	...	...	...	8
Cases discharged during the year	...	...	...	...	...	...	68
Cases admitted	...	...	...	...	...	...	55
School visits	...	...	...	...	...	...	2
Cases seen in Doctor's Clinic	...	...	...	...	...	...	37
Waiting list at end of year	...	...	...	...	...	...	138
Number of visits to Park School and Highfurlong School	...	...	...	...	...	...	31

CHILD GUIDANCE CLINIC

Clinic sessions by Dr. Rogers	...	...	...	...	...	...	116
New cases seen by Dr. Rogers	...	...	...	...	...	...	70
Cases for supervision or therapy	...	...	...	...	...	...	238
Psychologist's interviews and tests in the Clinic and Schools	...	...	...	...	...	...	154
School, Clinic and Office Visits	...	...	...	...	...	...	14
Attendances for remedial and therapeutic work	...	...	...	...	...	...	116
Attendances for remedial and therapeutic groups	...	...	...	...	...	...	6
Teachers' discussion groups	...	...	...	...	...	...	1
Psychiatric Social worker and Social worker—							
Home visits (new cases)	...	...	...	...	...	...	46
Clinic interviews (new cases)	...	...	...	...	...	...	30
Home visits (old cases)	...	...	...	...	...	...	730
Clinic interviews (old cases)	...	...	...	...	...	...	267
Social histories	...	...	...	...	...	...	70

During 1967, the work of the Child Guidance Clinic has continued to increase and to diversify.

Dr. Rogers, our Medical Director, has now opened his new unit for disturbed children at the Lancaster Moor Hospital—this provides the valuable in-patient facilities for children which have been so urgently needed in this area. The work of the Unit has brought considerable benefit to those Blackpool children who have been treated as in-patients and the value of such a unit to our Child Guidance work is inestimable. There has been close liaison between the Unit and the Clinic, and our Social Workers regularly attend case conferences concerning Blackpool children.

We are fortunate too in Blackpool to have a further addition to our resources in the Clinic through the opening of the Day Unit at Blenheim Lodge—this unit opened early in 1967 with two teachers; all the children here are under the care of the Child Guidance Clinic. Dr. Rogers maintains close contact and social work facilities are provided by clinic staff.

A further increasingly important area of development is in the teaching of social work; we have assisted in the training of students from the Colleges of Technology and from the Universities. During 1968, we shall expand these activities even further and we shall provide practical social work training for Child Care Officers and for students in the final year of the Certificate in Social Work.

There have been some staff changes during the year. Mrs. Godsell, Psychiatric Social Worker, joined us as Casework Supervisor in February, 1967. Mr. Linsie, who joined the staff in 1964 as Educational Psychologist, left in February, 1967 to become a lecturer at the Lanchester College of Technology, Coventry, and it has not yet been possible to fill this post. However, we are indebted to Mrs. Hughes, our sessional Educational Psychologist, whose invaluable service allows us to continue with our essentially multi-disciplinary approach, despite staffing shortages.

In the School Psychological Service, we have now two sessional members of staff in Mr. Easting and Mr. Nyquist, Psychologists.

The referral of cases to Child Guidance continues to come from two main sources—the general practitioners and the School Medical Service, though we also receive a number of referrals from the Child Care Service and other social agencies concerned with the care of children.

We have valued the co-operation of other agencies during the year and particularly our contact with our colleagues in the Education Department.

HIGHFURLONG SCHOOL

Number on Roll at the end of the year

	Boys	Girls	Total
Delicate	2	4	6
Asthma	12	6	18
Other chest conditions	5	4	9
Cardiac	1	7	8
Spastic	7	7	14
Spina Bifida	2	6	8
Orthopaedic defects	5	10	15
Partially Sighted	3	2	5
Partially Hearing	1	—	1
Epileptic and Petit Mal	2	1	3
Other cases	5	4	9
TOTAL	45	51	96

Both Highfurlong and Park School are visited each week by the School Medical Officer administering these schools. This visit provides an opportunity for discussions between the Head Teacher and the School Medical Officer. Five or six pupils are examined each week, and in this way each child is reviewed at least once a year and any difficulty dealt with as soon as it arises.

CHEST CLINIC

Good co-operation has existed, as in previous years, between the Chest Clinic and the School Health Service.

HOME TUITION

During the year, fifteen children received home tuition, for varying periods, as follows:—

Injuries resulting from accidents	...	...	...	4
Scoliosis	...	...	...	1
Peptic Ulcer	...	...	...	1
Chest conditions	...	...	...	3
Orthopaedic cases	...	...	...	2
Spastic	...	...	...	1
Educationally subnormal and maladjusted	...	...	...	1
General Debility	...	...	...	1
Under Hospital investigation	...	...	...	1

PHYSIOTHERAPY (at the Health Centre)

Number of children referred by Chest Physician	...	...	...	5
Number of children referred by school Doctors	...	...	...	307
Number of children referred by General Practitioners	...	...	...	22
Number of children referred by Paediatrician at Victoria Hospital...	...	...	...	1

Treatments:

Ultra Violet Light	...	...	...	...	...	...	213
Foot Exercises	...	...	...	...	...	...	4
Other Exercises	...	...	...	...	...	...	22
Number of children seen by Doctor in the Physiotherapy Department							125
Total attendances throughout the year	...	...	...	...	...	...	6,412

INFECTIOUS DISEASES (SCHOOL CHILDREN)

	1967	1966	1965	1964
Scarlet Fever	25	51	54	40
Whooping Cough	33	14	8	33
Measles	172	577	243	167
Cerebro-Spinal Fever	—	—	1	—
Sonne Dysentery	21	2	119	3
Food Poisoning	6	—	2	1
Paratyphoid	—	—	22	1
Virus Pneumonia	1	5	—	—
Encephalitis	—	2	—	—
Meningococcal Infection	—	2	—	—

HANDICAPPED PUPILS

BLIND

						Boys	Girls	Total
In residential schools	—	1	1
At home (under school age)	—	1	1

PARTIALLY SIGHTED

In residential schools	...	...	...	...	...	1	—	1
Attending Highfurlong School	...	...	...	...	...	3	2	5
Attending Primary and Secondary Schools, under observation	...	...	...	...	...	2	3	5
Under school age	...	...	...	...	...	3	1	4

DEAF

In residential schools	...	...	...	...	...	2	—	2
In Nursery Dept. of residential school	...	...	...	...	...	3	2	5

PARTIALLY HEARING

In residential schools	...	...	...	...	...	3	5	8
In Highfurlong School	...	...	...	...	...	1	—	1
Attending ordinary schools, under observation (including children having lip reading tuition; also children with a hearing loss, except where very slight)	...	...	...	...	...	113	88	201
Under school age (including one on waiting list for residential school)	...	...	...	...	...	3	1	4

PHYSICALLY HANDICAPPED

In residential schools	...	...	...	...	...	2	1	3
In Highfurlong School	...	...	...	...	...	20	34	54
Having home tuition	...	...	...	...	...	5	6	11
Attending Primary and Secondary Schools, under observation	...	...	...	...	...	25	33	58
Under school age	...	...	...	...	...	8	7	15

DELICATE

In residential school	...	...	...	...	...	—	1	1
In Highfurlong School	...	...	...	...	...	19	14	33
Attending Primary and Secondary Schools, under observation	...	...	...	...	...	14	15	29
Under school age	...	...	...	...	...	2	1	3

DIABETIC

Attending Primary and Secondary Schools, under observation	...	...	...	...	...	5	2	7
Under school age	...	...	...	...	...	1	—	1

MALADJUSTED

In residential schools	...	...	...	...	...	25	7	32
On waiting list for residential school...	...	...	...	...	...	4	—	4

EDUCATIONALLY SUBNORMAL

	Boys	Girls	Total
In residential schools	3	5	8
On waiting list for residential school... ..	1	—	1
In day school for Educationally Subnormal children ...	101	62	163
Mentally retarded, under school age	2	4	6
On home tuition	1	—	1

EPILEPTIC (including Petit Mal)

In residential schools	2	—	2
Attending Highfurlong School	2	1	3
Attending Day School for E.S.N. Children	1	—	1
Attending Primary and Secondary Schools, under observation	12	10	22
Under school age	3	—	3

SPEECH

Attending Day School for Educationally Subnormal ...	22	11	33
Attending Highfurlong School	2	5	7
Attending ordinary schools and having regular treatment at Speech Clinic	25	6	31

ANNUAL REPORT OF THE CHIEF DENTAL OFFICER, 1967

During the year under review, the staff of the School Dental Service consisted of the Chief Dental Officer, one full-time Assistant Dental Officer, and three part-time Assistant Dental Officers—the equivalent of 3.3 full-time Dental Officers; and three full-time Dental Surgery Assistants and two part-time Dental Surgery Assistants.

Three Dental Clinics were in operation, with two surgeries at the Central Clinic, Whitegate Drive, two surgeries at Abbey Road Clinic, and one surgery at Ashburton Road Clinic.

At the request of some Head Teachers, certain schools which had previously been treated at the old Lytham Road Clinic were transferred to the Central Clinic, as apparently many parents had objected to the cost and distance of travelling to the new Abbey Road Clinic; while, at the present time, this arrangement would appear to be working satisfactorily there has been a slight overloading of the Central Clinic, but some redistribution of schools has eased this; but in the light of further experience some further reorganisation may become necessary, especially if new schools are opened and transferred to other areas, such as the new Palatine School.

With the retirement of Mr. H. Marshall last year as Full Time Dental Officer to Part Time Dental Officer, there has naturally been some reduction of treatment given, but the number of children inspected at routine dental inspections was approximately the same as before.

The percentage of children requiring treatment varied very little, compared to other years, and while the "acceptance of treatment" rate varies very considerably between various schools, the overall average was approximately the same. It would appear that the acceptance rate depends to some extent on the distance parents and patients have to travel to the Clinics, although it was again noticed that a good percentage of children from schools where the acceptance rate was low were being treated by private Dentists.

The present trend towards a greater proportion of permanent teeth filled to teeth extracted continues when compared to a few years ago. The greater proportion of permanent teeth extracted are mostly for orthodontic purposes.

The Orthodontic Specialist continued to treat those patients who required this specialised treatment on two sessions weekly. More removable appliances are now being used than the fixed. This results in a great saving of time in the creation of appliances.

Any children who require Oral Surgery are now treated by Mr. H. Ackers at his own surgery, with the assistance of an anaesthetist using the Intra-Venous anaesthetic.

There is little to report on the Maternity and Child Welfare services, as there is still little demand for treatment, although a few expectant mothers were treated during the year, mostly for one or two extractions and single fillings.

There was little change in the numbers of pre-school children attending for treatment, and this was mostly for the treatment of toothache. Very little demand was made for conservative treatment.

It was again noted at Inspections by the Chief Dental Officer at the Ante-Natal Clinic of expectant mothers, that a very high proportion were being treated regularly by private Dentists, with a very small percentage refusing any treatment unless they were suffering from pain.

MARSHALL SMITH,

Chief Dental Officer.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY DURING THE YEAR

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visit	(1) 2,182	(12) 2,189	(23) 301	4,672
Subsequent visits	(2) 793	(13) 1,710	(24) 254	2,757
Total visits	2,975	3,890	555	5,929
Additional courses of treatment com'ced	(3) 43	(14) 83	(25) 25	151
Fillings in permanent teeth	(4) 1,131	(15) 3,438	(26) 530	6,099
Fillings in deciduous teeth	(5) 316	(16) 2	—	318
Permanent teeth filled	(6) 914	(17) 2,988	(27) 460	4,362
Deciduous teeth filled	(7) 312	(18) 2	—	314
Permanent teeth extracted	(8) 149	(19) 877	(28) 122	1,148
Deciduous teeth extracted	(9) 2,714	(20) 1,057	—	3,771
General Anaesthetics	(10) 1,185	(21) 804	(29) 67	2,056
Emergencies	(11) 474	(22) 178	(30) 17	669

Number of Pupils X-rayed	(31) 202
Prophylaxis	(32) 298
Teeth otherwise conserved	(33) 328
Number of teeth root filled	(34) 2
Inlays	(35) —
Crowns	(36) —
Courses of treatment completed	(37) 3,642

ORTHODONTICS

Cases remaining from previous year	250
New cases commenced during year	(38) 102
Cases completed during year	(39) 108
Cases discontinued during year	(40) 8
No. of removable appliances fitted	(41) 63
No. of fixed appliances fitted	(42) 42
Pupils referred to Hospital Consultant	(43) —

PROSTNETICS

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time)	(44) —	(47) —	(50) —	—
Pupils supplied with other dentures (first time)	(45) —	(48) 14	(51) 5	19
Number of dentures supplied	(46) —	(49) 14	(52) 5	19

ANAESTHETICS (General Anaesthetics administered by Dental Officers)

(53) 2,056

INSPECTIONS

(a) First inspection at school. Number of pupils	(A) 15,406
(b) First inspection at clinic. Number of pupils	(B) 322
Number of (a) and (b) found to require treatment	(C) 10,471
Number of (a) and (b) offered treatment	(D) 4,702
(c) Pupils re-inspected at school or clinic	(E) 872
Number of (c) found to require treatment	(F) 608

SESSIONS

Sessions devoted to treatment	(X) 1,116
Sessions devoted to inspection	(Y) 95
Sessions devoted to Dental Health Education	(Z) 34

N.B.—Statistical codings in parentheses

PHYSICAL EDUCATION REPORT, 1967

The section of the Gittins report recently published, dealing with Physical Education states "A basic aim of physical education is to gratify the sheer appetite for movement, in the compensatory sense. The more restrained and sedentary learning is, the more the child needs release". The Physical Education syllabus in our schools is planned, not only to satisfy this basic need for movement, but also to ensure that it is meaningful and beneficial, both mentally and physically. The great breadth of physical activity now embraced by the subject is part of the individual development of every pupil, no matter what their physical and mental limitations are, and this broadened scope of many different types of activities and pursuits offers opportunities for all to benefit from the recreative, social and therapeutic values of the work.

Much of our physical education in school time, apart from the teaching of the major games and athletics, still takes place indoors, due mainly to our climate and the limited time available within a normal school time-table. With however, the building of sports halls, more pupils will be able to participate in a wider variety of activities in future, and ways of arranging the Physical Education time-table in order to incorporate the many activities for which specialised facilities away from the school are required, are being explored.

PRIMARY SCHOOLS

The programme of Physical Education in the Junior School has included Educational Gymnastics, Swimming, Games and Athletic practises, Educational Dance and National Dance, and in the Infant School, basic training in Movement and Games Activities has been covered.

Older boys in the Junior School have been introduced to soccer coaching, grids having been marked for the purpose on hard play areas or adjacent school playing fields and 4th year pupils have taken part in inter-school matches.

Netball was played by the older girls and inter-school matches have been developed

The greater part of the Summer Term was devoted to athletic training, culminating in the keenly contested Inter-School Sports Meeting which again produced a very good standard of performance indeed.

Many small side team games especially for the junior pupils, were also included in the Physical Education syllabus.

Swimming instruction was arranged throughout the year for as many pupils as possible with the existing facilities of the Baths Department. Next term the new Purley Learners' Pool located at Thames School, will come into use, and a start can then be made on the implementation of the Education Committee's Swimming Policy on the teaching of swimming in the Junior School, when eventually swimming instruction will commence during the Summer term of the 2nd year in the Junior School.

SECONDARY SCHOOLS (BOYS)

The major part of the syllabus has been concerned with the teaching of gymnastics, swimming, athletics, trampolining, basketball, volleyball, the major games of soccer, rugger, tennis, cricket, and hockey. Various additional activities have been included as Club activities in schools.

(a) Association Football

This is easily the most popular winter game taught in the majority of schools, and inter-school matches are regularly played throughout the winter season, leagues being arranged for four age groups.

(b) Rugby Union Football

This is the major game taught throughout one school, five representative teams being fielded throughout the season. At a few other schools the game is played in addition to soccer.

(c) Basketball

The game is now taught to boys in all our secondary schools and it continues to increase in popularity. Inter-school fixtures are played regularly.

(d) Boxing

This sport is taught in one school to quite a high standard and the school holds an excellent Annual Inter-House Tournament.

(e) Cricket

Cricket is taught at all schools, but it is not so popular with many pupils as athletics, which along with it, takes up the greater part of games periods during the Summer term. Regular inter-school fixtures are played and the Town Team, a highly competent XI had a highly successful season, being narrowly defeated by Liverpool in the semi-final of the Northern Section of the E.S.C.A. Championships.

(f) Tennis

With the provision of additional porous all weather courts, more pupils than ever before are now being coached in this game, which continues to increase in popularity.

(g) Hockey

This game provides a welcome alternative to the games of Rugger and Soccer as a major winter game in some schools and inter-school fixtures, between the schools concerned are now regularly arranged.

(h) Volleyball

Volleyball has recently been introduced in three schools, where certain pupils have already attained quite a good standard of play.

SECONDARY SCHOOLS (GIRLS)

Physical Education in the secondary schools is designed to enable the girls to develop a sense of physical well-being and to gain confidence in their own physical capabilities. At the younger end of the secondary age range the girls have a sound grounding in basic training in different aspects of the work, whilst in the upper part

of the school the girls are encouraged to develop sufficient skill in various activities to enable them when their school days are over to select and pursue with interest some forms of activity.

The main physical education subjects included in the syllabus are gymnastics, dance, netball, athletics, rounders and swimming, with hockey and tennis where, facilities permit. Opportunity for other forms of physical activities are made available in the form of school clubs.

(a) Gymnastics

The good achievements of this work have again been evident in the competitions and demonstrations held during the year. The teachers are to be congratulated in the high standard of work reached by many pupils and in the obvious development in the girls of their versatility, adaptability and inventiveness in this agility work.

(b) Dance

Dance in one form or another is a subject obviously enjoyed by the majority of girls. The various varieties taught give a wide scope in the field of expressive movement and rhythmic training. It is pleasing to see the development in some schools of ballroom dancing taught to mixed classes of girls and boys. Modern Educational Dance is still unknown to many pupils, mainly due to the lack of qualified teachers in this branch of the creative arts.

(c) Netball

Once again the Inter-School Netball League and Rallies were enthusiastically supported by all schools and a high standard of play was reached by many teams including the under 15 and over 15 town teams who both brought honour to Blackpool.

The final tournament of the Lancashire Schools Inter-Town Championship was held in Blackpool and many thanks go to the Blackpool teachers and pupils who helped to make this event both enjoyable and successful.

(d) Hockey

This game unfortunately is only enjoyed where facilities permit and the year 1967 proved to be disappointing for this major game, as the few available pitches in the Blackpool schools, owing to the wet weather, deteriorated and in some cases were completely unplayable. The enjoyment of this game for many would be greatly enhanced by the addition of an all-weather purpose playing surface.

(e) Tennis

Conditions for this game on the girls' side have remained static, with very little opportunity in most schools for the teaching and playing of tennis. Where this is possible inter-school fixtures have been a regular feature of the summer programme with a good standard of play being reached by a few.

(f) Rounders

Rounders is still a popular summer game in most secondary schools and obviously is enjoyed by pupils of all ages and of varying standards of performance.

ATHLETICS

In many schools athletics plays a major part in the summer physical education syllabus and it is good to see more pupils participating competitively in this activity as matches between two or three schools become more numerous. The general standard at individual school sports days continues to rise and the sporting attitude which prevails at these meetings is a credit to all staff concerned.

The Inter-School town sports meeting saw many records broken, which led once more to both the boys and girls town teams winning the championship shields in their respective sections in the Lancashire Schools County Championships.

Cross country running is becoming a familiar feature in many secondary schools and for boys there is now an inter-school championship event.

SWIMMING

The total attendance at all three baths was 127,963 pupils for the twelve months of 1967. This is an increase on the total attendance for 1966 of 7,362 pupils, which occurred in spite of the loss of approximately seven weeks swimming for most schools due to a "go slow" campaign at the Blackpool Corporation Transport Department. Figures show that there was an increase on the attendance at the Derby Baths of 11,159 pupils. We are most grateful to the Baths General Manager and his Department for making this increase possible, which partly occurred through the additional changing room facilities made available for the Derby Learners Pool, so that a full complement of classes per day may now be time-tabled, and partly through the increase of 188 classes held in the Derby Baths Big Pool. This once again reminds us of the ever-increasing demand from the schools for more swimming bath space to be made available for their use.

Summary of Attendances

							Classes	Pupils
Derby Baths	...	...	...	...	...	...	1,517	47,605
Cocker Street Bath	...	...	...	...	...	...	1,666	45,580
Lido Pool	...	...	...	...	...	...	1,278	34,778

Comparison of Attendances over the past five years

1963	1964	1965	1966	1967
100,588	110,918	113,605	120,601	127,963

Swimming Certificates

Swimming certificates awarded during the year amounted to 2,534. This was a slight decrease on the previous year's awards. It is, however, still pleasing to see so many pupils enjoying the all-important activity of swimming.

Certificates Issued During the Year 1967

Schools	Learners		Elementary		Intermediate		Advanced		Total		Total
	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	
Arnold Boys	—	42	—	23	—	—	—	—	—	65	65
Baines End. C.E. Prim.	29	33	6	9	—	—	—	—	35	42	77
Bispham C.E. Jnr.	11	18	16	15	—	—	—	—	27	33	60
Claremont Jnr.	39	46	25	24	—	—	—	—	64	70	134
Claremont Sec.	58	18	51	14	19	6	6	1	134	39	173
Devonshire Jnr.	25	19	14	15	—	—	—	—	39	34	73
Elmslie Girls	31	—	40	—	9	—	3	—	83	—	83
Grammar Boys	—	—	—	8	—	—	—	29	—	37	37
Grange Park Jnr.	50	35	10	8	—	—	—	—	60	43	103
Hawes Side Jnr.	33	27	16	12	—	—	—	—	49	39	88
Highfield Sec.	2	7	13	16	5	17	2	5	22	45	67
Highfurlong	1	4	2	3	—	1	—	—	3	8	11
Holy Family R.C.	28	23	14	10	—	—	—	—	42	33	75
Layton Primary	32	15	15	9	—	—	—	—	47	24	71
Moor Park Jnr.	29	29	6	13	—	—	—	—	35	42	77
Norbreck Primary	50	45	29	39	—	—	—	—	79	84	163
Our Lady R.C.	15	10	8	6	—	—	—	—	23	16	39
Palatine Sec.	—	2	—	—	10	—	—	9	10	11	21
Park	3	12	2	3	—	1	—	—	5	16	21
Revoe Jnr.	39	51	12	22	—	—	—	—	51	73	124
Roseacre Jnr.	45	58	10	33	—	—	—	—	55	91	146
Stanley Jnr.	40	21	17	13	—	—	—	—	57	34	91
St. George's	13	29	9	25	4	15	1	4	27	73	100
St. John's C.E.	12	17	4	15	—	—	—	—	16	32	48
St. John Vianney	31	55	14	13	—	—	—	—	45	68	113
St. Kentigern's Prim.	20	19	8	2	—	—	—	—	28	21	49
St. Nicholas	6	6	4	3	—	—	—	—	10	9	19
St. Wilfred's	22	17	2	8	—	—	—	—	24	25	49
Thames	48	40	17	26	—	—	—	—	65	66	131
Tyldesley	23	13	18	18	5	18	2	2	48	51	99
Waterloo	48	35	16	28	—	—	—	—	64	63	127

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Winter Gardens Shield—Girls

Winner—Elmslie Girls' Junior School Department.

Tower Shield—Boys

Winner—Layton Primary School.

The shields are awarded to junior schools with the highest percentage of fourth year girls and boys respectively, able to swim a distance of 25 yards.

Swimming Gala

These continue to be an enjoyable feature of a school year and as in previous years most secondary schools held their own or combined galas. Keen competition was again witnessed in the combined schools' gala, where a high standard of swimming was reached. Blackpool again entered teams in the Lancashire School Galas and our thanks go to those who each week give willingly of their time to train boys and girls for the Town teams.

Highfurlong Special School—Swimming

We are again most grateful to the Manager of the Norbreck Hydro for so readily granting the facilities of the swimming pool at the Hydro for the teaching of this special class of handicapped children. The class has been held once a week throughout the year.

For the first time a small swimming gala was held for those children at the Hydro, which was a most enjoyable occasion shared by many parents and friends

CLUB ACTIVITIES

(a) Badminton

This game is one of the most popular club activities, the only hindrance at present to its further development being the lack of sports halls in which 4 courts can be made available compared with 1 only in a gymnasium. There is no doubt that, as sports halls become available with future planning, rapid progress will be made in developing the standard of play and meeting the demand for participation in a game which is rapidly increasing in popularity.

(b) Camping

The L.E.A.'s tents, some 80 in number, were in great demand as usual throughout the summer, by Schools, Youth Clubs, and Scout and Guide Associations.

(c) Canoeing

The L.E.A.'s fleet of canoes has been increased to twelve (ten single-seaters and two doubles) consequent upon the gift of 6 new fibre-glass canoes to the L.E.A. by the North Western Counties' Physical Education Association.

As a result, there has been increased participation in this pursuit by five schools. Most of the canoeing, with the co-operation of the Parks Superintendent, has taken place on Stanley Park Lake, but on occasion the canoes have been transported to the Lake District for week-end activities. In addition pupils have, with the kind co-operation of the Baths General Manager, had the opportunity of practising capsizing drill and certain basic skills, at Cocker Street Bath.

(d) Dinghy Sailing

Two schools have had the use of Stanley Park Lake for this activity. The Lake with its shallow water and variable wind conditions has been found to be an ideal place for teaching beginners the rudiments of handling small sailing craft.

(e) The Duke of Edinburgh Award Scheme

Three schools prepared pupils for awards at the Bronze and Silver levels, whilst a number of boys continued to prepare themselves for awards after leaving school, either as members of Youth Clubs, Voluntary Organisations, or, in some instances, independently.

Playing Fields

All L.E.A. playing fields have been maintained by the Parks Department, whose groundsmen have once again been most helpful and co-operative.

During the winter (the rainfall figures for October for the Fylde area were 8.50 ins. compared with the monthly average of 3.23 ins.) the condition of the playing fields at Arnold Girls' School, Montgomery School and St. Catherine's R.C. School caused great concern, as these fields were virtually unplayable for a prolonged period during the winter.

Some considerable discussion with the Borough Engineer took place concerning remedial action and it is hoped that as a result, some improvement will be apparent during periods of wet weather in future.

Perhaps in constructing new playing fields in the future, additional monies may be made available for the laying of more drains in the clayey type of soil found in all but the southern part of the Borough.

One of the major problems is that our clayey soils become water-logged so quickly that it becomes impossible to get remedial machinery onto the fields and there is much to be said, therefore, for the provision in future of at least one all-weather pitch, even at the expense of forfeiting additional areas. The question of cost enters largely into future planning along these lines, as one all-weather pitch is approximately equivalent to 3 grass pitches of equal size as far as initial expense is concerned.

The policy of dual use has applied to School playing fields which were used to their maximum capacity by:—

- (a) Schools
- (b) L.E.A. Youth Clubs
- (c) Other organisations

in that priority.

During the summer vacation the playing fields belonging to Highfield School (St. Annes Road playing fields) and Arnold Girls' School were made available for light use by children of school age, daily (except Sundays) from 10.30 a.m. to 8.30 p.m. Four part-time Playing Field Supervisors were employed throughout the holiday.

During the year the school playing fields adjacent to the new Anchorsholme School and the St. Thomas of Canterbury R.C. School playing fields comprising two soccer pitches, one rugger pitch and one hockey pitch, along with ancillary athletic facilities, came into use.

Cavalcade of Sport

For the first time for many years, it was not found possible to hold the Cavalcade of Sport, as the Tower Circus, which is the only suitable venue for a presentation of this nature, was unavailable.

Negotiations have, however, been proceeding concerning the availability of the Tower Circus ring next year.

Further training of Teachers

During the year the following teacher training courses were held:—

- (a) A three-session course on the Teaching of Association Football in the Primary School.
- (b) A six-session course on the Teaching of Association Football in the Secondary School.
- (c) A two-session course for men and women secondary school teachers on Volleyball.
- (d) A three-session course for Primary school teachers on Country Dancing.
- (e) Lecture/demonstrations at Primary Schools concerning the method of presentation of Educational Gymnastics in the Junior School.
- (f) The Annual Easter School of Physical Education, a ONE-WEEK COURSE, attended by 994 teachers from all over the country, who enrolled for one of the 35 different courses concerned with specialised aspects of Physical Education.

THE BLACKPOOL SCHOOLS' SPORTS COUNCIL

The Council, to which all the constituent Sports Associations are affiliated, played an important part in all out-of-school sports activities, the usual full programme of inter-school fixtures and championships being arranged. One new Association, the Blackpool and District Schools' Amateur Boxing Association, was formed during the year, bringing the total of Constituent Associations up to eleven.

The Council's Handbook detailing all activities, officials and fixtures arranged by the Associations was produced once again and 1,800 were sold at a nominal fee of 3d. to interested pupils.

During the year the Executive Committee of the Council gave some thought to the possibility of substituting a more attractive cloth Council badge with appropriate flashes for the existing small metal brooch, and at the time of writing, sample designs are being prepared.

During the year, one of the Constituent Associations of the Council, the Swimming Association, received £95 from the Amos Crompton Bequest, and an equivalent sum should become available for this Association in subsequent years.

The Council made grants to certain Associations in order to enable these Associations to provide opportunities for pupils to compete in sporting activities at County and National levels.

Snows Height Outdoor Centre

During the early summer, the recently acquired Outdoor Centre at Colton, near Haverthwaite in the Lake District, was opened for use by schools for the first time. Prior to this work parties of senior pupils from the Grammar School and Highfield school visited the site on four occasions altogether to prepare the Centre for occupation.

The major facilities now available at the Centre are an excellent cookhouse hut, equipped with a 6-ring calor gas oven and a plentiful supply of catering utensils, two substantial sleeping huts equipped with double bunks, the larger of these huts sleeps 16 and is at present being utilised as a dining hut and classroom as well, whilst the smaller hut can sleep 12. Additionally there is a staff hut for two members of staff, and Elsan toilet and storage huts.

A great deal was accomplished by the initial working parties, who established a spring water supply near to the cookhouse, built incinerators, grease and sanitation pits, cleared paths, cuprinoled huts and weather-sealed roofs.

During the summer and autumn several school parties visited the Centre mostly for periods of three or four days or for a week, and were engaged mostly in geographical and biological field studies or in recreational pursuits such as mountaineering fishing or assault course activities, one school having developed a very interesting and quite exciting course on the site itself.

The motive lying behind the acquisition of the Centre is one of serious educational purpose, viz.

- (a) Camping and Outward Bound activities, canoeing, dinghy sailing, and activities concerned with mountainous country.
- (b) For Field Study Courses in Biology and Geography.
- (c) For the general education of our young people in the proper use of a National Park.
- (d) As a base for activities in connection with the Duke of Edinburgh Award Scheme and Orienteering.

The Centre has great potentialities in all of these spheres, being located in an interesting biological and geographical area within easy reach of the Rounsea Wood Nature Reserve, and Grizedale Forest with its Observation Tower, Nature Trail, Deer Museum, and the newly-opened Nature Reserve. The Centre is also conveniently situated for all adventure activities associated with the area. Apart from these opportunities the site itself presents a great challenge and is a miniature Nature Reserve in itself.

The Centre is registered as a Charitable Trust, and the Management Committee have many projects in mind for the further development of the Centre, the first priorities being the provision of new toilets, a substantial drying hut and the acquisition of a mini-bus for the conveyance of groups of pupils to venues for specialised activities in the vicinity. The size of the site lends itself to development in a great many ways, without in any way detracting from its present advantages.

REPORTS OF THE CONSTITUENT ASSOCIATIONS

BLACKPOOL SCHOOLS' SPORTS COUNCIL

Blackpool and District Secondary Schools' Athletic Association

(Hon. Secretary—Miss B. Wilkinson—Convent of the Holy Child Jesus)

The Association had another successful season. The first event of the Athletic season was the Annual Inter-Schools' Cross Country Championships held at Hodgson School, Poulton on 2nd February, 1967. Although this was a success from the athletic point of view, it was marred by vandalism in the changing rooms after the event.

Blackpool Teams were entered for the Lancashire Schools' Cross Country Championships held at Stoneyhurst College on 18th February, 1967. The teams met with moderate success. The Juniors were placed 13th, the Intermediates 8th and the Seniors 11th.

In Track and Field, the main event was the Inter-School Sports held at Stanley Park on 29th June, 1967. The meeting was well organised and enjoyable and the performances of the athletes was of a high standard.

Results

BOYS

Under 14	Baines Grammar School,	28 pts. Runners up, St. Joseph's	27 pts.
Under 15	St. Joseph's College,	46 pts. Runners up, Blackpool Grammar	37 pts.
Under 17	St. Joseph's College,	51½ pts. Runners up, Blackpool Grammar	32½ pts.
Under 20	St. Joseph's College,	67 pts. Runners up, Blackpool Grammar	54 pts.
GIRLS			
Under 14	Arnold	20 pts. Runners up, Montgomery	17 pts.
Under 15	Layton Convent	28 pts. Runners up, Arnold	20 pts.
Under 17	Arnold	43 pts. Runners up, Hodgson	16 pts.
Under 20	Arnold	52 pts. Runners up, Fleetwood Grammar	18½ pts.

The continued high standard of athletics in Blackpool Schools was confirmed at the Lancashire Schools Championships held at Warrington on 10th June, 1967. The girls team were champions of Section A (maximum team of 30) with 88 pts. and Barrow runners up with 49 pts. The boys team were champions of Section B (maximum team of 35) with 131 points, with runners up Oldham 61 points. This was an outstanding result as their points total was higher than that of Liverpool who won Section A (maximum team of 60 boys). Blackpool also again won the Kirkby Trophy which is awarded to the town with the highest number of points in field events—boys and girls combined.

As a result of their performances at the Lancashire Schools' Championships 3 boys and 2 girls were selected for the Lancashire Team to compete in the All England Championships at Peterborough July 7th and 8th, 1967. The competitors were:—

Heather Ismay (Arnold H.S.) Senior Girls, 100 yds.—3rd in Heat.

Janet Carlile (Layton Convent) Inter Girls, 150 yds.—4th in Semi-final.

B. Kirby (St. Joseph's College) Junior Boys 440 yds.—1st in heat with a time that would have given him a place in the final but had to withdraw due to a back injury.

S. Piceivitz (St. Joseph's College) Senior Boys Pole Vault—Placed 2nd in Final 11'6"

J. Parkes (Blackpool Grammar) Junior Boys 100 yds.—An outstanding performance, being placed 1st and equalling the record of 10.4 secs.

Lancashire won five trophies at the Championships including the Cup for the Champion County of England.

Blackpool Junlor Schools' Sports Association

(Hon. Secretary—Mr. T. S. Holden—Devonshire Junior School)

Our major event of the year is the Athletics Sports Final. This year, as usual it was held at Hawes Side Junior School and proved a great success once again. Due to unfavourable weather the Sports were postponed from Wednesday, June 28th to Friday, June 30th.

22 Junior Schools competed and the whole programme of events was completed in a most satisfactory and sporting way. Shields were won by the following schools:—

Devonshire, St. Columbas, Hawes Side, Stanley, Norbreck, Claremont, St. Joseph's and Layton.

The officials are very appreciative of the fine support they received from the Chief Education Officer, Organisers for Physical Education, Headteachers and Staffs of all Primary Schools, St. John Ambulance Brigade and the Police.

The work done in training and coaching these children for our Sports and in fostering a true sportsmanship is a credit to the teaching profession and Education Committee of Blackpool.

Blackpool and District Secondary Schools' Badminton Association

(Hon. Secretary—Mr. A. Jones—Claremont Junior School)

The 1966-67 season closed with our Annual Championships which were played last March. We had a much increased entry—153 players competing in the preliminary rounds. The finals were played at Hodgson Secondary School, Poulton-le-Fylde, revealing a much higher standard in stroke production and tactical play, particularly in the Under 16's section.

The 1967-68 season commenced with a return match against Barrow-in-Furness in which both —16 and —18 age groups played, but having lost the majority of our —18 side, the final result was disappointing, Barrow-in-Furness winning by 14 matches to 6.

Undaunted we entered a team in both the Senior and Junior Sections of the Lancashire Schools Association Cup Competition. We prepared for this by holding trials and coaching sessions at Queen Mary, Hodgson and Stanley Schools. The competition played at I. M. Marsh College, Liverpool was a great incentive to our players and after a full day's badminton using all the eight courts, we eventually finished 3rd in the Senior section, and 3rd in the Junior section out of the twelve associations which took part. This we felt was a most commendable result.

The second Champion Schools' Rally was held at Hodgson School, when 21 teams from 14 schools participated. This was a much better entry than the previous year and badminton was played from 9.30 a.m. until 5.0 p.m.

Under new regulations brought in by the Lancashire Schools' Badminton Association our 17 affiliated schools are now automatically affiliated to the County Schools' Association and several players have taken advantage of the tournaments and competitions which are offered. Hodgson School, playing for the second successive year in the Red Rose Competition, a team event open to all Schools in Lancashire, have to date reached the Quarter Final in the Boys — 16 competition. They and King Edward have undoubtedly the strongest teams in the area and Douglas Carmichael of King Edward is a member of the County squad and has played against Yorkshire and Stephen Tupman of Hodgson has attracted the attention of the selectors.

We feel that this has been a season of good progress and look forward to an increased entry in our Annual Championships to be held in March.

Blackpool and District Schools' Basketball Association

(Hon. Secretary—Mr. P. Bentley—Arnold Boys' School)

During the Spring Term the second half of the 1966-67 league programme was completed. Montgomery School and the Grammar School were undoubtedly the leading teams of the season, each suffered only one defeat, at the hands of the other.

At the Annual General Meeting of the Association held at Arnold School on Thursday, June 8th, the following officers were re-elected:—

Secretary—P. Bentley, Arnold School

Treasurer—K. Vause, Tyldesley School

It was decided that for the 1967-68 season a full programme of fixtures would be drawn up for the "Under 15" group and that at "Under 14" level the schools would be left to arrange their own fixtures.

The Association was pleased to receive and accept an application from Hodgson School, Poulton-le-Fylde, to take part in the league for the season 1967-68.

The date of the Annual Tournament was then fixed for Tuesday, September 19th and Mr. Brooks offered to arrange it at Montgomery School.

It was decided not to enter a team in the National Competition for the season "67-68" but to make an early entry for the season "68-69".

The meeting then closed.

The 1967-68 season opened with the "Under 15" Tournament on Tuesday, September 19th, at Montgomery School. Once again it was organised on a league basis within the two groups, the winners of the groups meeting in the final. To everyone's surprise Arnold School defeated Montgomery School, to win their group and went on to meet the Grammar School in the final. This was a very one-sided game and the Grammar School ran out easy winners.

The first fixtures in the league programme were played on Friday, September 29th, and from then until the present time the matches played have confirmed the result of the Tournament. The Grammar School have now the strongest side in the league and look likely to finish at the top when the programme is completed.

Finally, I would like to thank all the people who work so hard to make the Association a success.

Blackpool and District Schools Boxing Association

(Hon. Secretary—Mr. J. K. Hickey—St. Joseph's College)

Over one hundred boys representing four schools took part in the Association's activities. Inter-schools boxing took place between these schools, culminating in the Blackpool and District Schools championships. Competition was keen and the sporting atmosphere excellent.

Following the championships, six boys went on to win county titles, showing how the standard of boxing has improved. Three of these boys won Northern Schools titles and brought great credit to the town. Unfortunately all three lost at the National semi-finals and we did not have a finalist as in the previous year

The Association hopes to increase the number of competing schools this year and to develop more competition, giving boys something to train for. To this end, we ran the annual Lancashire v. Yorkshire tournament which was watched by four hundred boys from many schools. It was also gratifying to note that the three Blackpool boys all won for Lancashire.

Blackpool and District Secondary Schools' Cricket Association

(Hon. Secretary—Mr. R. C. Breeze—Highfield School)

The Under 15 League was depleted this year by the resignations of St. Joseph's College from the North Section, and St. John Vianney from the South. St. John Vianney also withdrew from Under 13 matches.

The North Section of the Under 15 League was won by Palatine, and the South Section by St. George's, for the fourth successive year. The final played at Bispham between these two schools, was won by Palatine.

The Town Team had another very successful season. The championship of the North Division was won by victories over Lancaster (H), Preston (H) and Blackburn (A). This gave us entry to the quarter-finals of the county knock-out competition, in which we defeated Prestwich (A) and reached the Lancashire semi-finals for the 7th time since 1950. As on all previous occasions, however, we lost the semi-final, this time to Liverpool (H) after a most exciting game.

S. Ballard (Blackpool Grammar School) and S. King (Bailey) both represented Lancashire.

Blackpool and District Secondary Schools' Football Association

(Hon. Secretary EXT.—Mr. A. Partington—Palatine School)

(Hon. Secretary INT.—Mr. D. O'Connor—St. Thomas of Canterbury R.C. School)

The Blackpool and District Secondary Schools F.A. now has fifteen secondary schools affiliated. A welcome addition this season is Blackpool Grammar School. Already one of their students has played representative soccer for the Town Team, for Lancashire, and has had England trials.

At local level, friendly fixtures are arranged at four age levels for the first half of the season. During the second half, Knock-out competitions are held culminating in four finals at the end of the season. To find the School to represent the Blackpool Association in The Champion School of Lancashire Competition an early season Knock-out for first elevens is held for The Swift Cup. It is pleasing to note that this year there is a new holder—Carr Hill, Kirkham.

At Town Team level, the Under 14 team, meeting Preston, lost the George Ford Cup. But thanks to some intensive coaching by the time these boys became the Under 15 side they performed very creditably in the Lancashire and English Trophy Competitions. Most of them had spent a week of their summer holidays on a week's course organised in Blackpool by Teachers of the Lancashire Schools' F.A.

A rewarding feature of the season has been the excellent sportsmanship which has been inculcated by Teachers of all schools concerned. Not for them the nonsense which seems to affect some professional football. A disconcerting side is the setting up of odd teams of boys of schoolboy age by over enthusiastic no doubt well meaning amateurs, who seem unaware that even the F.A. insists that a boy's first loyalty is to his school, and that no boy should play two games in one day. Sport at this level should be under the control of Schools organisations.

The sincere thanks of the Association must be extended to many people. The help and co-operation given to us by Blackpool Football Club is invaluable. Unlike some clubs, there are never any "strings attached". We are delighted that the Lancashire Schools F.A. have this month invited Mr. R. Seed, the chairman, to be a Vice-President of the Association because of the Club's services to Schools Football.

Our thanks too, must go to the Director of Education and his staff—physical education and school meals—for their support and backing. The Headmasters of our schools earn our gratitude for their interest and willing co-operation. The Parks Department and the Evening Gazette also give us most loyal support. It would be invidious to mention names, but this large and important organisation would fail to function without hundreds of voluntary hours put in by the Secretaries, Coach, Treasurer, Football Correspondents, Team Managers of our Association and its affiliated schools. It might be fitting to point out just why this work is done. Our rule three says "The objects of the Association shall be the mental, moral and physical development and improvement of schoolboys through the medium of Association Football".

Blackpool Primary Schools' Football Association

(Hon. Secretary—Mr. W. S. Bagshaw—Norbreck Primary School)

During the 1966-67 season, about 140 league games were played as well as the numerous friendly matches between schools. Thus, it can be seen that many children of primary age are enjoyably involved in the sport. Two leagues were in operation through the season, each consisting of nine teams. The Honours list was as follows:—

North Section	Holy Family (champions) P.16 W.12 D.2 L.2
South Section	Hawes Side (champions) P.16 W.12 D.1 L.3

The 1966-67 knock-out competition for all schools was also held, the final taking place at Hawes Side. This competition, competed for by 18 schools, creates a lot of enthusiasm and is one of the chief events of the season. At this year's final, Mr. Waiters presented the trophies and medals to the two teams after a very exciting game.

Winner: Grange Park Runners-up: Holy Family
Score: 3—2

An exhibition game was also arranged between representative teams of the North and South Leagues. The North League won a close game 1—0. After the match, Mr. F. Walsh, chairman of the Sports' Council, presented medals and trophies to the league champions.

At the end of the season, inter-town fixtures were arranged and these attracted many enthusiastic spectators. The Blackpool team won both games against Southport (at Southport 5—1; at Hawes Side 5—3). A new fixture was arranged against Macclesfield. In an enjoyable game at Norbreck, Blackpool won 8—5. At all times the team played well, especially the forwards, who played some outstanding football.

At the Annual General Meeting held in May, it was decided by majority vote to compose three leagues from the present two on an experimental basis for the season 1967-68. The basic reason for this was to try and alleviate the fixture congestion at the end of the season. The structure of the three leagues will be as follows:—

North	Norbreck, Bispham, Moor Park, Holy Family, Claremont, St. Kentigern's.
Central	Layton, Devonshire, Grange Park, Revoe, St. John Vianney, Stanley.
South	Hawes Side, St. Wilfred's, Our Lady, Waterloo, Baines, Thames Road, Roseacre.

It is with pleasure that St. Kentigern's are welcomed as members of the Association.

It is hoped that the three league system will enable schools to play more friendly games.

In conclusion, the thanks of the Association are extended to all those who have helped in its various activities during the year.

Blackpool and District Secondary Schools' Netball Association

(Hon. Secretary—Mrs. M. J. Hall—Highfield School)

The League consists of all Blackpool Secondary Schools, Hodgson and Bailey. The 1st and 2nd teams of each school playing matches with those of all the other schools.

The League winner was Montgomery—42 points, the runner-up Claremont—41 points.

The Trophy was presented by Miss B. Challoner at Hodgson School on Saturday, 11th March. She was one of the founders of the League—the Trophy was provided through her efforts.

Preceding the presentation, two tournaments were held, one for 4th years, in which all schools took part, the other for 5th years in which St George's, St. Catherine's, Hodgson, Highfield and Claremont competed.

4th Tournament	Winners	—	Montgomery
	Runners-up	—	Claremont
5th Tournament	Winners	—	St. George's
	Runners-up	—	St. Catherine's

Badges were presented to all winning teams and to those who played in the Senior and Junior Town Teams.

Netball Town Teams. The two teams had a very successful season, they won several small tournaments before Christmas and the Junior Team reached the Final in the Lancashire Town Team Knock-out competition.

The Final Day Tournament was played in Blackpool at St. George's School. Mr. R. E. Hodd, Chief Education Officer for Blackpool, attended and officiated at the opening and the presentations. The Knock-out final was played first. Blackpool Juniors played Salford in a very close game, the match ended in a draw, even after extra time it was still a draw. The Committee decided that the two teams should share the trophy, as the match had lasted 40 minutes and both teams had to take part in further matches during the day.

The Senior Team were runners-up to Liverpool in that day's matches, this meant that both teams received medals at presentation time.

With many of the players staying on at school for a fifth year, in the coming year we hope to have an excellent Senior team to compete again in this exciting Inter-town League.

Blackpool Primary Schools' Netball Association

(Hon. Secretary—Miss M. E. Whiteside—Norbreck Primary School)

At a meeting held on 16th November, 1966 the Blackpool Primary Schools' Netball Association was formed.

It was decided to play all matches on a friendly basis and to divide the season into two sections. The first from September to mid-November and the second from February to the end of March. This division of the season is because all matches are played after 4.0 p.m. and therefore the season is determined by the hours of daylight.

The following seven schools decided to join the Association:—

Grange Park	St. Kentigern's
Hawes Side	Stanley
Layton	Thames Road
Norbreck	

Each school played the other schools twice, at home and away, during the half of the season from February to April. Therefore a total of forty-two matches was played.

A rally was held at Norbreck School on Saturday October 15th (from which the formation of the Association sprang). Nine teams took part and although the weather was poor the standard of play was good and there were some exciting matches.

Another rally should have been held at Stanley School on Saturday, 11th March. This time eleven teams were to have taken part, but unfortunately very poor weather conditions caused its cancellation.

It is hoped that this year two Leagues, a North v. South could be formed; but there are still not enough schools who wish to take part in the Association. These are now nine schools participating, the previous seven plus:—

St. John's C.E.

St. Wilfred's

On Saturday, October 21st a rally was held at Stanley School. Eight teams took part and therefore each team played seven matches during the morning. 2 points were scored for a win and 1 point for a draw. After some very close and exciting games the final result was:—

Norbreck, 13 pts. Stanley and Thames Road, 11 pts.

Grange Park and Hawes Side, 7 pts. St. Wilfred's, 5 pts.

St John's, 2 pts.

During the first half-season most schools have completed their fixture lists of about eight matches each, making a total of 70 matches

In conclusion the Association's thanks are extended to all those who have helped to make our rather humble beginnings a success.

Blackpool Schools Swimming Association

(Hon. Secretary—Mr. B. Wilson—Tyldesley School)

The Sixteenth Annual Cavalcade of Sport was held in midMarch and was once again a credit to the students and pupils who took part, the teachers who trained them and Organisers of Physical Education who put the show together.

It is a pity that, at the time of writing this report, January 1968, this may have been the last Cavalcade—certainly there will not be one early in 1968 because the Circus is not available at any time before the season. Whether an after-season Cavalcade will be possible remains to be seen. We can only hope that the Tower Company will be able to accommodate us.

The Inter-Schools Gala at the end of October gave us another afternoon of exciting swimming. Once again the bath was packed to capacity with more adults than for many years showing their interest and it was unfortunate that at the last minute many of them could not be offered seats.

Hodgson School, Poulton, were welcome newcomers to the competition and St. Joseph's College made a distinguished return.

6 girls' and 6 boys' records were broken—4 individual and 2 team records each—and another was equalled.

Final results were	Girls 11-13	1st Collegiate
	13-15	1st Claremont
	Aggregate	1st Claremont 46 pts. 2nd Elmslie 39 pts.
	Boys 11-13	1st Palatine
	13-15	1st Grammar
	Aggregate	1st Grammar 69 pts. 2nd Palatine 41 pts.

Points are not awarded in the Open Competitions but it is interesting to note that the Technical College boys' team won all the Open Swimming events.

In the Lancashire Schools Championships the following results are worthy of special mention.

11-12	Girls	S. GIBB, Collegiate	1st Butterfly.
	Boys	S. CLARKE, St. Joseph's	2nd Freestyle.
12-14	Boys	Free-style team	1st
14-16	Boys	Medley team	3rd
16-19	Girls	4 3rd places and 1 4th out of 7 events.	
	Boys	Free-style team	1st

Two swimmers, Valerie Seddon (Arnold Girls) and Paul Lucas (Technical College) were selected to represent Lancashire Schools.

In the Junior Girls' Diving Events, S. Taylor (Claremont) was 1st, in the Junior Boys, C. Calverley (Hodgson) was 2nd and in the Intermediate Girls', J. Smith (Claremont) was 2nd.

Since being elected Secretary nine years ago I have had considerable help from a number of swimmers. I would like to place on record my appreciation to them and name specifically Stewart Yeagers who for the past two years has acted as Team Manager to the younger groups, helped in the Trials to select teams and given other assistance when no other has been available

CONCLUSION

In conclusion the Organisers of Physical Education wish to tender their sincere thanks and appreciation to all members of the Education Committee, the Parks Committee, the Baths Committee, the Tower and Winter Gardens Company, the Staff of the School Health Service, Her Majesty's Inspectors of Physical Education (Miss E. G. Pollard and Mr. K. R. Bull), the Directors of Blackpool Football Club, the Committee of the Fylde Rugby Union Football Club, and Parent/Teacher/Friends' Associations.

The Organisers also wish to record their appreciation of all the help given by the Chief Education Officer and his Staff, and the Head Teachers and Assistant Teachers of the Local Education Authority, without whose help and enthusiasm no lasting success could be achieved.

Miss A. H. BRANDRICK,
N. W. BROUGHTON.

and will give you a good idea of the results of the work of the Physical Education Committee. The results of the work of the Physical Education Committee are as follows:

1st Place	1st Place	1st Place	1st Place
2nd Place	2nd Place	2nd Place	2nd Place
3rd Place	3rd Place	3rd Place	3rd Place
4th Place	4th Place	4th Place	4th Place
5th Place	5th Place	5th Place	5th Place
6th Place	6th Place	6th Place	6th Place
7th Place	7th Place	7th Place	7th Place
8th Place	8th Place	8th Place	8th Place
9th Place	9th Place	9th Place	9th Place
10th Place	10th Place	10th Place	10th Place

Points are not awarded in the Open Competition but it is interesting to note that the Technical College boys' team won all the Open Swimming events. In the Lancaster Schools Championship the following results are worthy of special mention.

11-12	Girls 2 Girls College
13-14	Boys 2 Boys College
15-16	Boys 1 Boys College
17-18	Girls 1 Girls College
19-20	Boys 1 Boys College

Two swimmers, Valerie Seddon (Arnold Girls) and Paul Lister (Technical College) were selected to represent Lancaster Schools.

In the Junior Girls' Diving Event, S. Taylor (Clarnon) was 1st, in the Junior Boys' C. Calverley (Hodgson) was 2nd and in the Intermediate Girls' J. Smith (Clarnon) was 3rd.

Since being elected Secretary nine years ago I have had considerable help from a number of swimmers. I would like to place on record my appreciation to them and name especially Stewart Yeager who for the past two years has acted as Team Manager to the younger groups, helped in the trials for the team and given expert assistance when no other has been available.

CONCLUSION

It is a pleasure to see the progress of the Physical Education Committee and to see the results of their work. The Physical Education Committee has been successful in its work and has been able to provide a good standard of Physical Education for all the children of the district.

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Mrs. A. H. BRANDRICK
M. W. BRONFON

