#### [Report 1957] / Medical Officer of Health, Burnley County Borough.

#### **Contributors**

Burnley (England). County Borough Council.

#### **Publication/Creation**

1957

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### COUNTY BOROUGH OF BURNLEY



### REPORT

OF THE

### Medical Officer of Health

ON THE

Public Health and Sanitary Administration

FOR THE YEAR

1957

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

Medical Officer of Health.

Principal School Medical Officer.

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#### HEALTH COMMITTEE

#### 1957-58

THE WORSHIPFUL THE MAYOR (MRS. ALDERMAN M. A. BATTLE, J.P.)

- \* Councillor J. Cassidy (Chairman).
- \* Miss Councillor E. Utley (Vice-Chairman).

Councillor F. Bates.

Councillor A. W. Brown.

Councillor L. K. Crossley, B.E.M.

Councillor F. G. Gentle.

- \* Councillor W. Sim.
- \* Councillor J. H. Sutcliffe.
- \* Councillor J. Wilson.
- \* Members of the Standing Sub-Committee, the Mental Health Sub-Committee and Care and After-Care Sub-Committee.

Public Health Department, BURNIEY.

October, 1958.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my twenty-seventh report on the health of the Borough.

The Registrar General's estimate of the population of the Borough in 1957 was 81,760, a decrease of 590 during the previous twelve months. The population of the Borough is now reduced to less than it was during the last decade of the 19th century.

The birth rate is similar to that of the previous year, and is still lower than that of the whole country. The death rate continues to be considerably higher than that of the whole country, due to the high proportion of old people in the community. Sixty-eight per cent. of the deaths occurred in people over 65 years of age and less than eight per cent. were deaths of persons under 45 years of age. The death rate for tuberculosis was lower, but that of cancer of the lung and bronchus was higher than those of England and Wales. The death rate for coronary thrombosis was considerably higher than that of the country as a whole, and caused the deaths of many more men than women. The influenza death rate was higher as a result of the epidemic in September and October.

Although the infant mortality has shown a very marked reduction in recent years, the rate for 1957 is still higher than that of the whole country.

Attendances at infant welfare centres were satisfactory during the year, but the care of mothers and young children still suffers from a shortage of health visitors. Movement of families with young children to housing estates makes the provision of additional infant welfare clinics an urgent necessity. An additional centre was opened in the northern part of the town in October, but no centres are within easy reach of Rosehill, Hargher Clough, Stoops, Brunshaw and Turf Moor housing estates. Difficulty is being experienced in finding suitable premises for this purpose in these districts.

Modern therapeutic drugs have done much to reduce the duration of acute illnesses and consequently call on the services of the domiciliary nurses for persons suffering from acute diseases such as pneumonia is much reduced. There is, however, an ever increasing call on their services to give injections of insulin, antibiotics, etc. Elderly persons suffering from chronic ailments form the vast majority of cases attended by the home nurses, and their daily care, together with the assistance given by the Home Helps, does much to lessen the demand for beds in the wards for chronic patients in the General Hospital.

Progress with the programme of slum clearance has had to be retarded to keep in step with the provision of houses for families to be displaced. Seven comparatively small areas were represented in 1957, two public inquiries were held and one Clearance and four Compulsory Purchase Orders were confirmed by the Minister of Housing and Local Government.

Little progress has yet been made in the implementation of the Clean Air Act. A number of factories have recently undertaken improvements to their furnaces to reduce smoke emission. A scheme of Smoke Control Areas, which includes several housing estates and the central area of the Borough, was drafted to be dealt with during the next five years. It is anticipated that a commencement will be made to inspect in detail the first area early in 1959.

Elsewhere in this report details are given of the progress made in raising the standard of hygiene in food premises and catering establishments. The amount of meat and other foods found to be unfit for human consumption was approximately 18 tons less than that of the previous year.

The main activity in the field of prevention of infectious disease was the encouragement of parents to register their children for vaccination against poliomyelitis. The response was disappointing, only 20 per cent, of the eligible children having registered by the end of 1957.

The staffs of the Home Nursing, Midwifery and Health Visiting Services have worked loyally, often when shortage of personnel made their duties very arduous.

I wish to express appreciation of the support received from

the Health Committee and all members of the Health Department staff during the past year.

I am,

Ladies and Gentlemen, Your obedient Servant,

Medical Officer of Health.

sclamont.

#### STAFF AT 31st DECEMBER, 1957.

#### MEDICAL AND PROFESSIONAL STAFF

PUBLI

THE RESERVE OF THE PARTY OF THE			
Medical Officer of Health and			
Principal School Medical Officer	•••	•••	D.C.LAMONT,M.B., Ch.B., D.P.H.
Deputy Medical Officer of Health	•••		L.J.COLLINS, M.B., Ch.B., B.A.O., LaM., D.P.H.
Medical Officer, School Health Service			
and Care of Mothers and Children etc.			E.P.WHITAKER, M.B., Ch.B., M.R.C.S., L.R.C.P.
Part-time Medical Officer,			Charles of the Control of the Contro
Tuberculosis After-Care	•••	•••	G.GERMILL, M.B., Ch.B., D.P.H.
Part-time Ophthalmic Surgeons		•••	K.BROWN, M.C., M.B., Ch.B., D.O.M.S., D.O. (Oxon)
			T.E.SHANNON, M.B., D.O.M.S.
Part-time Paediatrician	•••		W.M.L.TURNER, M.D., M.R.C.P., D.C.H., D.L.O.
Part-time Medical Officer,			
Ante- Natal Clinic	•••	•••	MRS.A.REED, M.R.C.S., L.R.C.P.
Veterinary Officer and Chief			
Meat Inspector	•••	•••	J.K.SHAW, M.R.C.V.S
Principal School Dental Officer	•••	•••	J.PILLING, L.D.S.
Dental Officer	•••		K.JACKSON, L.D.S.
Part-time Dental Officer		•••	J.JACKSON, L.D.S.
Borough Analyst			H.DEDICOAT, F.R.I.C.
IC HEALTH AND MEAT INSPECTORS			
Chief Public Health Inspector and			F.SHUTTLEWORTH, Cert. R.S.H.
Inspector under Food and Drugs Act	•••		Cert. R.S.H. (Meat and Foods)
Deputy Chief Public Health Inspector	•••		M.STOTT, Cert. R.S.H.  Cert.R.S.H. (Meat and Foods)  Cert.R.S.H. (Smoke Inspectors)
Food Hygiene Inspector			H.WILSON, Cert. R.S.H.  Cert.R.S.H. (Meat and Foods)  Cert.R.S.H. (Smoke Inspectors)

District Inspectors

J.J.HOULDING, Cert.R.S.H: Cert R.S.H. Meat and Foods). N.BUCKLEY, Cert .R.S.H: Cert .R.S.H. (Meat and Foods).

F.ARCHER, Cert.R.S.H: Cert R.S.H. (Meat and Foods).

R.T.BARRON, Cert.R.S.A. (Scotland). J.SAMS, Cert. R.S.A. (Scotland). D.M.PICKLES, Cert. R.S.H.

Meat and Food Inspectors

J.PATON, Cert. Meat and Other Foods R.S.A. (Scotland). Food Hygiene Certificate R.S.H. W.CATHCART, Cert.Meat and Other Foods R.S.A. (Scotland). Food Hygiene Certificate, R.S.H.

Pupil Public Health Inspectors

B.BARNES.

One vacancy.

Disinfectors - 3; Rodent Operatives - 3.

#### HEALTH VISITING, MIDWIFERY AND NURSING STAFF

Superintendent Nursing Officer and Sumervisor of Midwives

MISS E.S.FRANKS, S.R.N., S.C.M., M.T.D., H.V. Cert.

Health Visitors and School Nurses

MISS M.O BRIEN, S.R.N., S.C.M., R.F.N., H.V.Cert.

MISS I.WILSON, S.R.N., S.C.M., H.V.Cert. MRS.M.SIMPSON,S.R.N.,S.C.M., H.V. Cert. MISS M.M.COWGILL, S.R.N., R.S.C.N., S.C.M., H.V.Cert.

MRS.M.N.DANN,S.R.N.,S.C.M.,H.V.Cert. MISS L. WHITTAKER, S.R.N., C.M.B., (Part 1) H.V. Cert.

MISS M.EDMONDSON, S.R.N., S.C.M., H.V.Cert., T.A.Cert.

MISS F.ANFORTH S.R.N., S.C.M., H.V. Cert. MRS.E.BOOTH, S.R.N., S.C.M., H.V. Cert. MRS .F .LISTER , S.R .N. MRS.D.WOODHEAD, S.R.N. MRS .N . ROPER . S .R .N .

Student Health Visitor

MISS L.G.PHILLIPS, S.R.N.,S.C.M.

Municipal Midwives ... ... MRS.A.BINKS, S.R.N., S.C.M. MISS E.LAYFIELD S.C.M. MRS .E . ANDER TON ,S .R .N . ,S .C .M . MISS N.WILLIAMS ,S.R.N. ,S.C.M. MRS.M.A.FILON.S.C.M. MISS M.SIMPSON.S.C.M. MRS .M .MOSLEY ,S .R .N . ,S .C .M . MRS.I.SMITH,S.R.N.,S.C.M. Superintendent, Home Mursing Service ... MISS M.FIRTH, S.R.N., C.M.B.Cert. (Part 1) Q.I.D.N.S., H.V.Cert. Assistant Superintendent, Home Nursing Service MISS S.DUGDALE S.R.N. S.C.M. Q.I.D.N.S. District Nurses - whole-time ... Four State Registered Nurses and Three State Enrolled Assistant Nurses (incl.one male) Five State Registered Nurses and part-time One State Enrolled Assistant Nurse. MEDICAL AUXILLIARIES Educational Psychologist MRS .M .EYS YMONT , B.A., (Hons. Hist. and Educ) ., Commonwealth Fellowship in Psychology. Psychiatric Social Worker (Part-time) MRS.K.SMITH, B.A., Senior Orthoptist MISS S.SUTCLIFFE, D.B.O. Orthoptist MISS D.M.SHAW ,D.B.O. Physiotherapist ... MISS M.E.FOTHERGILL M.C.S.P. MRS.J.KELLY, L.C.S.T. Speech Therapist ... DAY NURSERIES MRS . A . COCKCROFT , S . R . N . Bank Hall Nursery - Matron ... Nursing Staff 11 ... MRS . H . MCCUTCHEON , N.N.C. Hargher Clough Nursery - Matron ... Nursing Staff 6

#### MENTAL HEALTH STAFF

Authorised Officers ... R.FELL, B.E.M., S.R.N., R.M.N., R.M.P.A.

A.NELSON, S.R.N., R.M.N.

Female Social Worker ... MRS. A. SAGAR, R.M.N., R.M.P.A.

Supervisor - Occupation Centre ... MRS.D. MARSDEN, T.C. Teacher.

Assistant Supervisors - Occupation Centre MRS.M.ASHWORTH, R.M.P.A.

MRS.B.FOREST.
MISS B.BOLTON, Dip. N.A.M.H.

#### DOMESTIC HELP SERVICE

Organiser ... MISS E.O HORO.

Domestic Helps .... 40 whole-time; 14 part-time.

#### AMBULANCE SERVICE

Ambulance Officer ... W.MILLS.

Driver/Attendants ... 20

#### CLERICAL STAFF

Chief Clerk ... A.PILLING, A.C.C.S.

Clerks, Public Health Service ... H. SIMPSON.

W.R.HINDLE. MRS.D.E.COWELL.

J.DEWHURST.

R . HAWORT H .

D.HARGREAVES.

MISS M.PLOWRIGHT.

MRS .M .CHADBAND .

MISS A .FERGUSON.

MISS B.FEANE.

MRS .M . ROBINSON .

MRS .W .G .SIMPSON.

Clerks, School Health Service ... S.JACKSON.

MISS S.WILLS.

MISS M.MOORE.

MISS P.CATLOW.

MISS M.GASKELL.

Clerk, Dental Attendants ... MISS H.TAYLOR.

MISS D.DENT.

#### SECTION II

#### STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

#### SUMMARY OF STATISTICS.

#### 1. GENERAL STATISTICS.

Area in Statute Acres				4,695 acres	3
Area fully developed, or in cou	rse of develo	pment		3,346 acres	3
Population, Census 1951				84,950	
Registrar General's Estimate of middle of 1957	Population			81,760	
Density of Population, i.e. Num Acre built upon	ber of Perso	ons per		24.4	
Number of inhabited houses (Apr to Rate Books	il 1957) acco	ording	•••	29,490	
Number of houses in Burnley, De	cember, 1957			29,756	
Number of New Houses erected in	1957			193	
Rateable Value (April 1957)			£	798,205	
Sum represented by a Penny Rate	Paid in 1957	/1958		£3,160	

<sup>\*</sup> This figure includes houses temporarily uninhabited and houses which have been the subject of Clearance, Closing or Demolition Orders, but are not demolished.

#### 2. EXTRACTS FROM VITAL STATISTICS.

#### (Registrar General's Return)

			M.	F.	1957 Total	1956 Total
Live Births:	Legitimate Illegitimate	•••	620 33	583 28	1203 61	1173 84
			653	611	1264	1257

TOTAL TOTAL TOTAL		M.	F.	1957 Total	1956 Total
Crude Birth Rate per 1,000 of estimated resident populat:		D	• •	15.46	15.26
Adjusted for A.C.Factor (1	.04)			16.08	16.02
Stillbirths: Legitimate . Illegitimate .		20	22 2	42	26
		21	24	45	30
Rate per 1,000 total (live	and st	ill) birth	ns	42.02	23.31
Number of Deaths (Males 587,	Females	675)	***	1262	1347
Crude Death Rate per 1,000 of resident population .	estima	ted		15.44	16.36
Adjusted for A.C. Factor (	1.00)	total.		15.44	16.20
Deaths from Pregnancy, childb	irth, al	portion	···	2	007 mm
Maternal Mortality (Rate per live and still births) .	1,000 to	o tal		1.53	0.00
Number of Deaths of Infants u	nder 1	year of ag	ge	36	36
Death Rate of Infants under	l year	of age:-	raquipo		
All Infants per 1,000			is not a	28,48	28.64
Legitimate Infants per livebirths				26.60	28.13
Illegitimate Infants p Illegitimate livebir		•••		65.57	35.71
Death Rates per 1,000 populat	ion from	m: -			
Pulmonary Tuberculosis All forms of Tuberculo Respiratory diseases (	sis			0.06	0.12
Pulmonary Tuberculo				1.97	1.81
Influenza				0.27	0.08
Notifiable Infectious Tuberculosis) .	Diseases	excludi	•••	0.02	0.01

\* 3 ma

Bosse

		1957 Total	1956 Total
Death Rate from Diarrhoea and Enteritis of Children under 2 years of age, per 1,000 births	in Lugo	0.00	0.00
Deaths from Measles (all ages)	O.F) rots	FOR A.C. PAG	below!
Deaths from Acute Poliomyelitis		U- YEALLY	-
Deaths from Whooping Cough (all ages)	•••	-	-
Deaths from Meningococcal Infections		1	1
Deaths from Diarrhoea under two years of a	ge	- Table 1000	-

#### VITAL STATISTICS

#### Live Births

One thousand six hundred and forty three live births (861 males, and 782 females) were registered in Burnley during 1957. After correction for 39 inward and 418 outward transferable births, a net total of 1264 births, or an increase of 7 on the total for 1956 is obtained.

The live birth rate was 15.46 as compared with 15.26 in 1956. In order, however, to compare the local rate with the rate for England and Wales, it must be adjusted, by a comparability factor, to make an approximate allowance for the way in which the sex and age distribution of the local population differs from that of England and Wales as a whole. The adjusted birth rate of Burnley for 1957 is 16.08 and is very slightly less than the rate for England and Wales, and the 160 County Boroughs and Great Towns.

The number of illegitimate live births was 23 less than in the previous year, the percentage of illegitimate births being 4.8 as compared with 7.1 in 1956.

#### Stillbirths

During the year there were 45 stillbirths, giving a rate of 42.02 per 1,000 total (live and still) births, as compared with 23.31 in 1956.

#### Deaths

One thousand six hundred and eighty five civilian deaths were registered in Burnley during the year. Of this number 474 deaths of non-residents, chiefly occurring in Public Institutions, have been excluded, leaving 1211 deaths of residents. To this number has been added 51 deaths of Burnley people who have died in other districts.

After these corrections a net total of 1262 deaths is obtained (males 587, females 675) giving a crude death rate of 15.4 per thousand of population, as compared with 16.36 for 1956 and 15.40, the average for the previous ten years. The adjusted death rate for Burnley is also 15.4, and is considerably higher than the death rate for England and Wales and that of the 160 County Boroughs and Great Towns, both of which have a rate of 11.5.

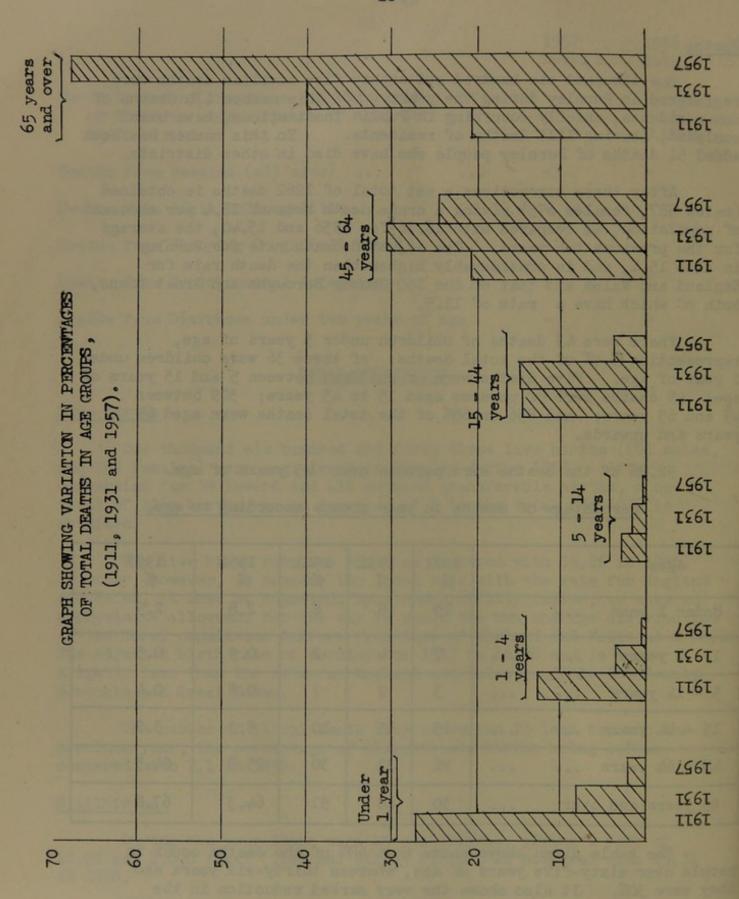
There were 43 deaths of children under 5 years of age, representing 3.4% of the total deaths; of these 36 were children under 1 year of age. Five deaths were of children between 5 and 15 years of age; 49 deaths were of persons aged 15 to 45 years; 309 between 45 and 65 years; and 856 or 68% of the total deaths were aged 65 years and upwards.

92.3% of the deaths were persons over 45 years of age.

#### Percentage of deaths in year groups according to age.

Ages	1921	1931	1941	1951 %	1957 %
Under 1 year	19	8	6	2.8	2.9
1 - 4 years	7	4	2 .	0.9	0.5
5 - 14 years	3	2	1	0.8	0.4
15 - 44 years	15	15	10	5.3	3.9
45 - 64 years	26	31	30	25.9	24.5
65 years and over	30	40	51	64.3	67.8

The table given above shows that 68% of the deaths occur in people over sixty-five years of age, whereas thirty-six years ago they were 30%. It also shows the very marked reduction in the percentage of deaths in the younger age groups compared with thirty-six years ago.



PERCENTAGES OF TOTAL DEATHS.

#### Trend of Population.

The Registrar General's Estimate of population at the middle of 1957 is 81,760; 590 less than that of 1956. The population figure at the 1951 Census was 84,950.

The decline in the population of the Borough, which has continued for over 35 years, brings the population to less than it was in the last decade of the 19th century. The highest census record of population was in 1911 when the peak figure of 106,322 was reached. The present population is only 77% of that figure. In recent years the decrease has averaged about 530 a year.

# Birth-Rates, Death-Rates, Analysis of Mortality, Maternal Death-Rates, and Case-Rates for certain Infectious Diseases in the year 1957

(Provisional figures, supplied by the Registrar-General with the exception of those relating to Burnley)

Drawer amore designation of the control of the cont	England and Wales	160 County Boroughs and Great Towns includ- ing London.	160 Smaller Towns (Residen Populat- ions 25,000 to 50,000 at 1951 Census)	trative County	Burnley								
DIDMUG		Rates per 1,000 Home Population											
BIRTHS- Live Still	16.1 0.37 22.4(a)	16.1 0.37 22.5(a)	16.0 0.38 23.2	16.2 0.33 20.0	16.08(c) 0.55 42.02(a)								
All Causes Malignant Neoplasm of ) Lungs and Bronchus ) Tuberculosis	0.43	0.50	0.40	0.61	15.44(c) 0.59								
(all forms) Whooping Cough Diphtheria	0.00	0.12 0.00 0.00	0.10 0.00 0.00	0.13 0.00 0.00	0.07 0.00 0.00								
Coronary Disease Acute Poliomyelitis (including Polioence-	1.70	0.15	0.15	0.12	0,27 2,43								
phalitis) Pneumonia	0 50	0.00	0.00	0.00	0.00								
		Ra	tes per 1	,000 Live B:	irths								
Deaths under one year of age	23.0(ъ)	23.5	23.5	21.9	28,48								

<sup>(</sup>a) Per 1,000 Total (Live and Still) Births

<sup>(</sup>b) Per 1,000 related Live Births

<sup>(</sup>c) Adjusted by Registrar-General's A.C.F. figure

## VITAL STATISTICS OF WHOLE DISTRICT DURING 1957 AND THE PREVIOUS TEN YEARS

	R.G's Population	Liv	re Birt	hs	Total Regist	Deaths ered in		ferable aths	Nett Deaths belonging to the District					
Year	to middle of each		Nett		the Di	strict.				1 Year	At Al	1 Ages		
1947 1948 1949 1950 1951 1952	year	Uncorrected Number	Number	Crude Rate	Number	Rate	Non-Residents registered in the District	Residents not registered in the District	Number	Rate per 1,000 Nett Births	Number	Crude Rate		
1947	83,650	1,831	1,831	21.89	1,588	18.98	293	63	90	49.15	1,358	16.23		
1948	84,560	1,528	1,467	17.35	1,469	17.37	327	62	73	49.76	1,204	14.24		
1949	84,590	1,488	1,384	16.36	1,616	19.10	355	52	59	42.63	1,313	15.52		
434 454 50 964	84,920	1,568	OF REAL PROPERTY.	15.86	1,690	19.90	442	62	66	49.00	1,510	15.43		
	84,280	1,510		14.88	1,813	21.51	446	83	41	32.69	1,450	17.20		
10000000	83,860	1,482		14.09	1,515	18.06	392	72	37	31.30	1,195	14.25		
1953	83,290	1,478	The second second	14.41	1,513	18.16	364	54	33	27.50	1,203	14.44		
1954	83,090	1,475		14.15	1,561	18.76	407	49	37	31.16	1,203	14.48		
1955	82,870 82,350	1,494		14.25	1,699	20.50	426 449	42 39	27 36	22.86	1,315	15.86		
Average 10	3 2 50.0	30	0 0		25.0	-05	200	Lit	15-55	1000				
years	83,746	1,543	1,328	15.85	1,622	19.37	390	58	50	36.47	1,290	15.40		
1957	81,760	1,643	1,264	15.46	1,685	20.61	474	51	36	26.48	1,262	15.44		

#### COMPARATIVE STATEMENT OR VITAL STATISTICS - YEAR 1957.

CONTRACTOR		AGINE	Infan Mortali Rate	500	AND THE PERSON NAMED IN	Rate from Tub, Di seases	(per 1,00	Mortality Ra 00 total Live cillbirths)	The state of the s											
On Land	Birth Rate	Death Rate	Year 1957	Average 5 years 1952-56	Average 5 years 1952-56 Death Rate from Phthisis		Maternal causes excluding abortion	Due to Abortion	Total Maternal Mortality											
England and Wales	16.1	11.5	23.0	25.72	0.095	0.012	0.39	0.08	0.47											
160 Great Towns	16.1	11.5	23.5	28.04	4	4	4	•	4											
Birkenhead	17.5	12.7	31.6	30.6	0.13	0.014	0.37	- 1000 A 10	0.37											
BURNLEY	16.08	15.43	28.48	28.35	0.06	0.012	1.52	0.040.08	1.52											
Bury	15.51	13.59	27.68	27.0	0.08	0.02	- COAL	20,00	-											
Halifax	15.73	15.53	18.65	27.11	0.15		0.65	1 1 2 1 1 1 1	0.65											
Liverpool	20.9	11.8	26.0	31.0	0.16	0.006	0.36	0.06	0.42											
Manchester	18.22	12.4	31.10	30.51	30.51	30.51	0.14	0.02	0.56	0.07	0.63									
Oldham	16.11	14.79	26.63	31.75	0.11	-	1. 000,5	- 77.10	-											
Preston	16.64	14.43	34.66	30.0	0.11	-	0.5	0.5	1.01											
Rochdale	15.6	14.5	34.0	29.0	-	-	-	-	-		-	-	-	-	-	-	0.05	1.46	0.73	2.19
Salford	18.31	12.97	29.1	31.2	0.19	0.012	-	-	-											
St.Helens	17.2	10.7	31.0	36.5	0.14	0.02	-	0.51	0.51											
Stockport	16.11	12.90	21.96	31.71	0.06	0.007	-	-	9-01											
Wallasey	17.88	12.49	26.10	26.51	0.11	0.009	-	0.54	0.54											
Wigan	15.32	11.53	24.8	34.9	0.16	•	-	-	-											

Showing Birth Rates, Mortality Rates from all causes, from Tuberculosis of the Lungs, Respiratory Diseases and Malignant Diseases, together with Infantile Mortality and Infantile Diarrhoea

		, n -		T																
	Infantile	per 1,000 related Live Births, England and	Wales.	11.0	115	191	157	134	116	102	89	73	29	61	55	199	33	8	3 13	
	Infantile	per 1,000 Live Births		212	217	202	225	202	178	159	127	108	91.0	72.3	71.2	53.57	144.65	28. 45	28.48	
	Infantile Diarrhoea	- Death Rate per 1,000 Live	Birt hs	3/1-9	27.9	29.9	52.8	51.2	43.2	29.9	11.7	6.1	8,1	4.5	2.51	2.8	3.87	1.01	0000	The second second
irths	000	Malignart Diseases		0.24	0.30	0.44	0.59	0.0	0.73	0.9	1,16	1.22	1.54	1,60	1,077	1,99	2.03	2.14	2.74	The state of the s
Rates per 1,000 Births	Mortality Rates per 1,000 Population from	Respiratory Diseases (excluding	Tuberculosis)	5.15	6.21	5.27	3.86	3.73	3.56	3.66	3,35	3,00	1.84	1,25	1.30	1.44	1,71	1,94	1.97	No. of Street, or other Persons
Rates p	Mortali	Pul- monary Tuber-	curosis	2,31	1,64	2,06	1,83	1.46	1,17	0.93	0.85	0.79	0.75	0,65	0.65	0.59	0700	0.16	90°0	
Death		Crude Death Rate		23.2	22.2	21.9	20.7	18.8	17.04	16.5	15.6	14.3	14.1	174.0	15.72	15.51	15.72	15.08	15.44	-
		Grude Birth Rate		38.9	35.9	35.1	30.7	27.6	26.3	21,1	18.0	16.9	11,011	11.95	12,09	16.49	17.27	14.43	15.46	
		Population		0		0	95,038	99,979	104,605	106,071	99,454	103,040	016,69	24,280	86,192	016.67	00tota	83,092	81,760	
		Year		1882-1886	1887-1891	1892-1895	1897-1901	1302-1306	190/-1911	1912-1916	1267-1921	19221926	1927-1931	107-1970	1917-191	מאנד אנגו	1200000	195-195	1957	

22 REGISTRAR GENERAL'S SHORT LIST

## CLASSIFICATION OF CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF BURNLEY DURING 1957.

Causes of Death	Sex	0-	1-	5-	15-	25-	45-	65-	75-	All Ages
1. Tuberculosis, respiratory	M F	-	-				1	3 -	-	4
2. Tuberculosis, other	M	-	-	-	-		1 -	-	-	1 -
3. Syphilitic Disease	MF	-	-	-	-	- 1	-	2	-	2 2
4. Diphtheria	M	-			-	-	-	7 -	-	100
5. Whooping Cough	MF	-	-	-		-		-		-
6. Meningococcal Infections	MF	-	-	-	-	-	-	-	1	1
7. Acute Poliomyelitis	M	-	-	-	-	-		0.1	-	4-
8. Measles	M F	-	-	-	-	1 1	-	1	-	-
9. Other infective and parasitic diseases	M F	1	-	-		-	1	1	1 -	2 4
10. Malignant neoplasm, stomach	M F		-	-	-	0	5 4	5 7	7 9	17 20
ll.Malignant neoplasm, lung, bronchus	M F	-	-		1	1 2	13 2	22	4	41 8
12. Malignant neoplasm, breast	F	-	-	-	-	-	7	6	3	16
13. Malignant neoplasm, uterus	F	-	-	-	-	3	5	2	3	13
14. Other malignant and lymphatic neoplasms	M	-	1	-		3 2	18 12	20 23	9	51 50
15. Leukaemia, aleukaemia	MF			1		-	2	1	1	4
16.Diabetes	M F	-	-		-	-	1	1	1	3
17. Vascular lesions of nervous system	M	- 1	-		-	1	19	33	35 63	87 128
18.Coronary disease, angina	M F	-	-		-	2	37 26	43	28 26	110

## CLASSIFICATION OF CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF BURNLEY DURING 1957 - continued.

Causes of Death	Sex	0-	1-	5-	15-	25-	45-	65-	75-	All Ages
19. Hypertension with heart disease	M F M	1 1 1	111	1 1 1	1111	- 4.	4 4 10	6 4 18	1 6 33	11 14 65
21.0ther circulatory disease	F M F	111	111		1 -	2 -	8 4 5	25 8 5	68 8 13	103 21 23
22.Influenza	M F M	- 4	- 1	111	1 1 1	1 1 3	4 4 3	5 5 9	1 1 8	11 11 28
23. Pneumonia	F M F	3 -		1 -	3 -	1 -	5 18 6	7 15 15	8 8 9	28 41 30
25.0ther diseases of resp- iratory system	M	1 -		-	-	1 2	4	2 -	- 1	.8
26. Ulcer of stomach and duodenum	M F			-	-	-	4 2	1 -	1	6 3
27. Gastritis, enteritis and diarrhoea	M F			4 -	-7	1 -	3	-	2	1 5 2
28. Nephritis and Nephrosis	M F	-	-	-		1	1 -	- 7	2 8	3
29. Hyperplasia of prostate 30. Pregnancy, childbirth,	M F			-	-	2	-	3 -	0 -	2
abortion, 31.Congenital malformations	M F	- 5	1 -		-	-	-	-	1	7
32.0ther defined and ill- defined diseases	M F	9	1 -	-	-	3 - 1	9 15	5 11 1	30	36 67 2
33. Motor Vehicle accidents	M F M	- 2	1	1	1 -	1-	- 5	1 2	2	2 3 12
34.All other accidents	F M F	111	1 -	1 -		1 3	4 5	7 1 4	11 3	20 9 13
36. Homicide and operations of war	M F	11		201 120	-		1 -	-		1 -
TOTAL (all causes)	M F	16 20	5 2	1 4	2 4	21 21	168 141	206 207	168 276	587 675

#### Causes of Death.

The table shown below gives the chief causes of death.

Diseases of the heart continue to be the causes of the highest number of deaths, 31.1% of the deaths being attributed to cardiac lesions. Over half of these deaths were due to coronary disease. The deaths from coronary disease, however, show a decrease of fourteen on the number for 1956, practically all such deaths being in persons over 45 years of age. Fifty five per cent. of the deaths from coronary disease occurred in men. The death rate from coronary disease in Burnley is considerably higher than that of the country as a whole.

Cancer took second place, with deaths from intra-cranial vascular lesions in third place.

The increasing incidence and deaths from cancer is to some extent related to the increasing proportion of aged persons in the Borough. All forms of cancer (including leukaemia) accounted for 113 deaths of men and 111 deaths of women. The highest number of cancer deaths occurred in the age group 65 to 74 years. Four occurred in persons under 25 years of age, one being that of a child under five years of age.

The total cancer deaths show an increase of twenty five over that of the previous years. The continuing upward trend of deaths from all forms of cancer is shown on the accompanying chart, which also shows the deaths from cancer of the respiratory system (lungs, bronchus and larynx). Fifteen more deaths from respiratory cancer occurred in 1957 than in 1956. Forty one lung cancer deaths occurred in men and eight in women. The increase of cancer in this site has been considerable during the last twelve years.

Deaths from tuberculosis show a decrease and are 0.5% of all deaths. Deaths from suicide show a considerable decrease.

	Number of Deaths.	Percentage of Total Deaths.
Heart Diseases	392	31.1
Cancer	224	17.8
Intra-Cranial Vascular Lesions (Cerebral Haemorrhage etc.)	215	17.0
Respiratory Diseases (other than Tuberculosis)	161	12.8
Other Diseases of the Circulatory System	44	3.5

	Number of Deaths.	Percentage of Total Deaths.
Accidents, Violence, etc	37	2.9
Influenza	22	1.7
Suicides	22	1.7
Ulcer of Stomach and Duodenum	9	0.7
All forms of Tuberculosis	6	0.5
Nephritis	5	0.4

#### Deaths in Institutions.

Nine hundred and fifty deaths occurred in the Burnley Hospitals during the year. Those shown in the following list as having died in the Maternity Hospital are mainly deaths of newly-born infants.

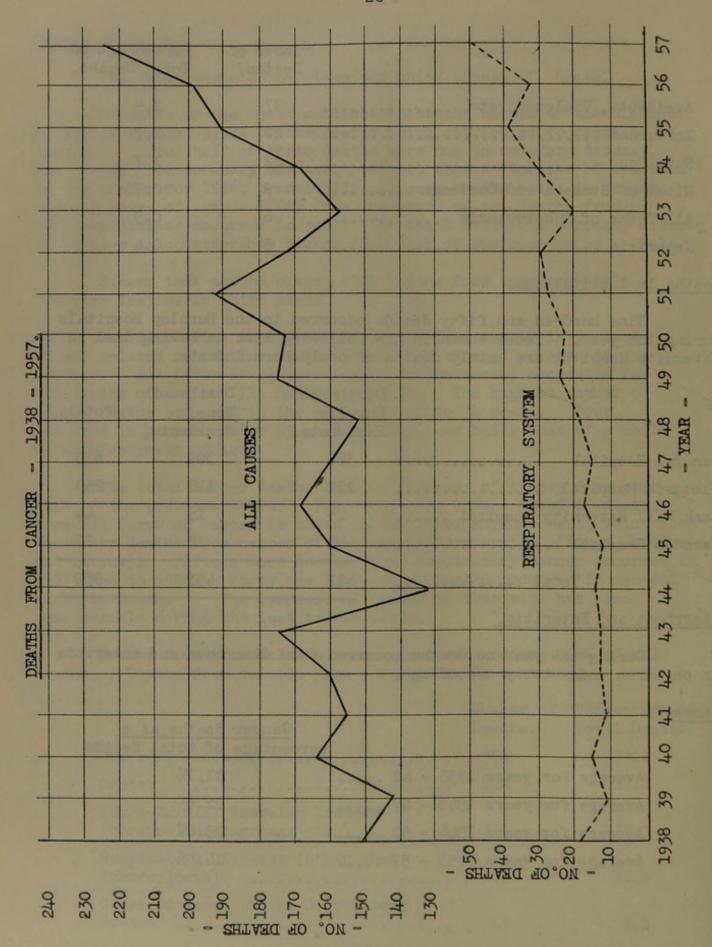
	Deaths of Burnley Residents.	Deaths of Non- Residents.	Total.
General Hospital	326	309	635
Victoria Hospital	132	118	250
Bank Hall Maternity Hospital	25	19	44
Marsden Hospital	8	13	21
Total	491	459	950

#### Diarrhoea and Enteritis.

During the year no deaths occurred from diarrhoea and enteritis in children under two years of age.

~					
θн	a	n	C	er	
_			~	-	0

					Cancer			
					percentage	of	total	deaths
Average f	or years	1938 -	42			11.	.7%	
Average f	or years	1943 -	47	00000		12.	,6%	
Average f	for years	1948 -	52			13.	,4%	
Average f	for years	1953 -	- 57			14.	.8%	



The deaths from Cancer during the last twenty years:

Year	No. of Deaths from Cancer	% of Total Deaths	Year	No. of Deaths from Cancer	% of Total Deaths
1938	151	12.1	1948	153	12.7
1939	142	10.6	1949	176	13.4
1940	164	11.4	1950	173	13.2
1941	156	11.7	1951	193	13.3
1942	160	13.0	1952	173	14.5
1943	176	13.5	1953	158	13.1
1944	132	10.9	1954	169	14.0
1945	160	12.9	1955	191	14.5
1946	169	13.9	1956	199	14.8
1947	160	11.8	1957	224	17.8

#### Infant Mortality.

Sixty one deaths of infants under one year were registered during 1957. After correction for inward and outward transferable deaths, a net total of 36 deaths is obtained, which is the same as the net infant deaths registered in 1956.

Live	Births	Infanti	le Deaths	Infant Death Rate pe 1,000 Live Births			
Males	Females	Males	Females	Males	Females	Both Sexes	
653	611	16	20	24.5	32.7	28.48	

The infant mortality rate (28.48) is higher than the rate for the whole of England and Wales, which is 23.0.

Twenty six deaths of infants occurred within four weeks of birth, giving a NEO-NATAL MORTALITY of 20.57 per 1,000 live births. This neo-natal mortality is also higher than the rate for the whole of England and Wales, which is 16.5.

NET DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR INFANT MORTALITY DURING THE YEAR 1957

-		-	-								
Jis.	z Marsden Hospit					-	100			-	1
Leal	z Bank Hall Hosp	Both Sexes	9	3	2	7	-	1	7		24
Lat	x Victoria Hospi	Both			1	•				-	1
La	R General Hospit		1		N			1		1	4
	18	Both	9	77	2	77	1	4	7	5	36
	Totals	Ce.	2	3	3	N	-	7	-	-	8
	189	E	Н	7	N	N	1		9	7	16 20
	9 5 5 5 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Cr.		1			•	-			1
	Over 6 months to 12 months	H	1	1.						,	0
	Over 1 month to 6 months	Œ.	,	•	N	•		2	1	7	2
- TON	Ove mon 6 m	n			1		-	0.0		7	4
th	1 to eks	CL.	A.			,		-			1
at Death	Over 1 week to 4 weeks	H	,	,	,	,	,				
Age	1 - 7 days	G.	,	7	1	1	907		1		4
OF	1 da	M	. 4	-	a			- 1	-	1	5
	er ay	Ct.	2	N	1	-	-				6
	Under 1 day	Σ	1	•	1	N			2	1	7
2000	Cause of Death	Oute Contract of the Contract	Intra-cranial and spinal	At electasis	Pneumonia (all forms)	Prematurity	Hydrocephalus and Spina Bifida	Other Congenital	Haemolytic disease of the newborn	All Other causes	Totals all causes

Denotes that the figures shown in these columns are also included in the age groups,

#### SECTION III

## PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The incidence and deaths from some of the notifiable diseases (apart from Tuberculosis) during 1957 are as follows:-

a prior muse , bell's	No. of Cases Notified	Case Rate per 1,000 of Population	No.cf Deaths	Mortality per 1,000 cases.
Scarlet Fever Whooping Cough Diphtheria Measles Dysentery Ophthalmia Neonatorum Puerperal Pyrexia Erysipelas Acute Poliomyelitis Food Poisoning	62 148 - 1765 23 1 16 5 1	0.76 1.81 - 21.59 0.28 0.01 0.19 0.06 0.01 0.04	111111111	11111111

Sixty two cases of SCARLET FEVER were notified, of which 14 occurred in the first three months of the year. Only 5 cases were removed to hospital.

The 148 cases of WHOOPING COUGH was somewhat less than the number which occurred in 1956, the highest incidence being in the western and central areas of the Borough. Sixty per cent. of the cases were in children under five years of age. Eighteen per cent. of the notified cases had been previously vaccinated against whooping cough, but in all these the disease was very mild.

One thousand seven hundred and sixty five cases of MEASLES were notified, fifteen hundred occurring in the second half of the year. The cases were scattered generally throughout the Borough. Seventy five per cent, of the cases were children under school age. It was not necessary to admit any cases to hospital.

GERMAN MEASLES numbered only 54 during 1957 and these occurred mainly in the second quarter of the year. Of these about one third were in the five to nine years age group.

Of the 16 cases of PUERPERAL PYREXIA, 14 were notified from Bank Hall Maternity Hospital.

DYSENTERY notifications numbered 23, of which 16 were children under fifteen years of age. One case occurred in a child attending a nursery school and 9 were children under five years of age who had not commenced to attend school.

The only case of ACUTE POLIOMYELITIS was a female adult who had the paralytic type of disease.

No case of ENTERIC FEVER was notified.

Only four cases of FOOD POISONING were notified, each being a single case, and in each the causal organism was Salmonella Typhimurium.

#### Age Grouping of Notifiable Infectious Diseases during 1957.

	Total				At	ages	- Yes	er						8
Notifiable Diseases	cases noti= fied	Under 1	1-2	2-3	3 - 4	4-5	5 - 10	10 - 15	15 - 25	25 - 35	35 = 45	15 - 65	65 and over	Total cases removed to Hospital
Scarlet Fever	62	1	3		9	7	36	5		1	000		-	5
Whooping Cough	148		1000	1000		100	1000	2757	-	-	1			2
Diphtheria & Memb.Croup	SECTION SECTION	7	20	22	16	24	57	2		100	Dist.	1		202
	1765		191	10000	300	750	573	8	3	2		1	_	2
German Measles	54	51.	8	277	307 5	352 7	19		1	-	-	-	-	-
Acute Primary Pneumonia	10000	7	3	1	2	4	1	1	-	1	3	7	6	15
Acute Influenzal	-		110		108		0		Del 1	min	Contract of	No.	100	
Pneumonia	23	-	-	-	-	-	1		1	600	1	7	13	5
Meningococcal Infection		1	-	-	1	-	-	-	-	-	-	-	-	2
Dysentery	23	1	4	3	-	2	6	-	1	1	3	1	1	1
Ophthalmia Neonatorum	1	1	-	-	12		1 2	-	-	1-	-	-	-	1
Puerperal Pyrexia	16	-	-	-	-	-	-		11	4	1	-	-	14
Smallpox	-	20-	-	-	-	-	V S	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Enteric Fever (excl.		THE PARTY	- 3			100	37				307			
Para-Typhoid)	1	-	-	-	-	-	1	-	-	-	-	-	-	1
Erysipelas	5	-	-		-	-	-	1	-	-	-	2	2	2
Tuberculosis of Lungs	62	-	-	-	-	-	2	2	16	11	9	18	4	14
Other forms of		- 8	1 8		1	1	-		1310			1	110	OF ENG
Tuberculosis	9	-	-	-	1		5		1	1	-	-	1	7
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-	10150
Acute Poliomyelitis	1	-	-	-	-	-	-	-	-	1	-	-	-	1
Acute Infectious	-	-	To be	1		1		1			San B	Town I		-
Encephalomyelitis	1	-	1	-	-	-	-	-	-	1	-	-	-	1 3
Food Poisoning	4	100	-	2	-	-	-		1		1			,
Totals	2213	74	230	314	341.	396	701	19	35	22	18	36	27	74

#### DISINFECTION

Total visits to houses in connection with infectious diseases	2972
Total number of houses disinfected	47
Total articles of bedding etc., disinfected	3696
Library books disinfected	407
Cleansing baths given to verminous persons, scables cases, etc	154

#### Vaccination against Smallpox.

In 1957, the 496 infants vaccinated were 40 per cent. of those under one year of age. This number added to older children and some adults vaccinated for the first time brought the total primary vaccinations to 665.

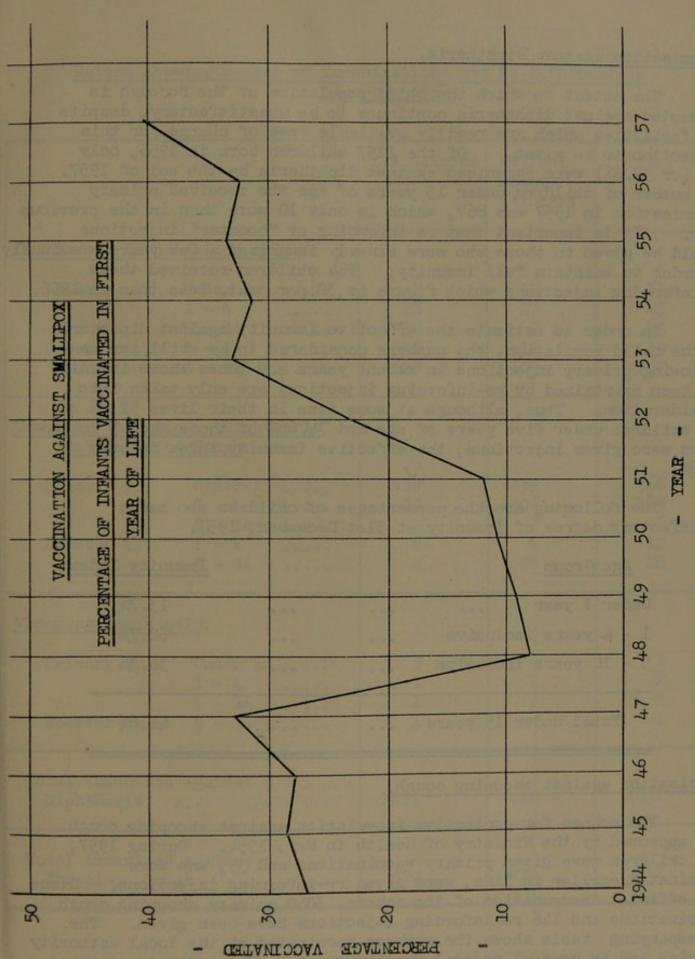
The number of infants vaccinated shows some improvement over that of previous years. To a considerable extent this is due to propaganda undertaken at the infant welfare centres, where vaccination is offered, and to the efforts of the health visitors during domiciliary visitation. For many years prior to 1948 the number of infants vaccinated did not exceed a third of the total births. When compulsory vaccination was abolished in 1948, the numbers of infant vaccinations decreased very considerably for five years, but the introduction of facilities for vaccination at infant welfare centres has resulted in more infants being vaccinated. (See Chart on Page 33).

Many of the re-vaccinations were in respect of persons going abroad.

### Return showing number of vaccinations and re-vaccinations during 1957.

	Primary Vaccinations				Re-vaccinations					
	Ages at Date of Vaccination				Ages at Date of Re-Vacon.					
	Under 1	_	5-14	15 and over	Total	Under 1		5-14	15 and over	Total
Local Health Authority Clinics	347	19	5	12	383	1,1	1	-	33	34
Medical Practition- ers	149	45	35	53	282	-	8	19	109	136
TOTALS	496	64	40	65	665	-	9	19	142	170





#### Immunisation against Diphtheria.

The extent to which the child population of the Borough is protected against diphtheria continues to be unsatisfactory, despite the facilities which are readily available free of charge for this protection to be given. Of the 1257 children born in 1956, only 724 (or 57.6%) were immunised against diphtheria by the end of 1957. The number of children under 15 years of age who received primary immunisation in 1957 was 867, which is only 10 more than in the previous year. It is important that re-inforcing or "booster" injections should be given to those who were already immunised a few years previously, in order to maintain full immunity; 784 children received these re-inforcing injections which figure is 30 per cent. less than in 1956.

In order to estimate the effective immunity against diphtheria of the child population, the numbers considered to be still immune following primary injections in recent years and those whose immunity has been maintained by re-inforcing injections are only taken into consideration. Thus, although at some time in their lives 52.3% of the children under five years of age and 74.6% of those aged 5 to 14 years were given injections, the effective immunity index is only 41.6%.

The following are the percentages of children who had a satisfactory degree of immunity at 31st December, 1957.

Age Group		Immunity Index
Under 1 year	 	13.7%
1 - 4 years inclusive	 	62.7%
5 - 14 years inclusive	 •••	36.5%
Total under 15 years	 •••	41.6%

#### Vaccination against whooping cough.

The scheme for protective inoculation against whooping cough was approved by the Ministry of Health in May, 1954. During 1957, 773 children were given primary vaccinations and 39, who were vaccinated earlier in life, were given re-inforcing injections. Since the official inauguration of the scheme, 3040 primary whooping cough vaccinations and 146 re-inforcing injections have been given. The accompanying table shows the numbers vaccinated at the local authority clinics and by general medical practitioners. The majority of these inoculations were given in combination with inoculations against diphtheria.

## Return showing number of Immunisations and Re-inforcements during 1957

	L.A.Clinics	Medical Pract- itioners	Total		
Diphtheria Immunisation only:			42979		
Primary Under 1 1 - 4 5 - 14 Booster 1 - 4 5 - 14	7 18 38 27 607	10 27 7 12 100	17 45 45 39 707		
Combined Injection - Diphtheria and Whooping Cough:	B B B B B				
Primary Under 1	429	139	568		
1 - 4 5 - 14 1 - 4 5 - 14	79 - 6 -	106 7 4 28	185 7 10 28		
Whooping Cough only:					
Primary Under 1 1 - 4 5 - 14	3 1 1	- 1 7	3 2 8		
Booster 5 - 14	1		1		
Total immunised against Diphtheria	1211	440	1651		
Total immunised against Whooping Cough	520	292	812		

DIPHTHERIA IMMUNISATION - CHIIDREN IMMUNISED

# Year of Immunisation

	Total	aged under 5 years on 31st December, 1957 = 3,032  Total immunised aged 5 - 9 years on 31st December, 1957 = 4,339				Total immunised aged 10 - 14 years on 31st December, 1957 = 4,695									
Totals	168	724	169	724	719	728	810	988	893	1022	1218	1039	738	844	856
1957	168	541	19	22	17	15	3	9	3	7	01	77	3		1
1956 1957		183	475	11	20	22	17	10	7	7	7	77.	10	7	9
1955		1. 1	155	867	69	8	15	17	8	7	9	2	77	п	3
1954				128	199	82	21	21	x	22	19	11	N	16	83
1953 1954			100		56	705	78	38	83	83	10	7	9	6	21
1952						75	618	150	62	17	59	17	2	3	2
1951			100				28	119	84	177	77	777	7	5	2
1990 1951	1							33	209	8	23	18	777	11	6
1949									29	730	155	75	23	8	п
1948										83	929	223	841	27	88
1947			-								19	199	191	147	36
1945 1946	1029											1	150	245	108
1945										-				1413	189
1912 द्वाश			100				033								1171
1943															
Year Born	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943

#### Vaccination against Poliomyelitis.

Early in 1956, proposals for the use of a vaccine against poliomyelitis as part of the National Health Service was announced. The scheme is completely voluntary and vaccination is offered without charge. In the first place the limited amounts of vaccine available were offered for the protection of children born between 1947 and 1954, and parents were informed of the arrangements made to register consents. This was done by announcements in the press, in the local authority's clinics and through medical practitioners. In the early stages of the scheme selection of children to receive vaccination from among those whose parents sought it was made according to a centrally determined plan designed to maintain an even spread throughout the eligible age groups, which was based on the month of birth.

At the outset, owing to the limited quantities of vaccine available, the vaccine was supplied for use only by the local authorities' staffs, but at a later date general medical practitioners were able to participate.

The first supplies of vaccine of British manufacture were received in May and June, 1956, but these were sufficient for only a relatively small number of the children who had been registered.

In May 1957, the groups of children to whom vaccination could be offered were extended to include children born in 1955 and 1956, and it is now offered to children between the ages of six months and 15 years, expectant mothers and other selected groups, including medical practitioners, ambulance staffs, certain nursing staffs and their families.

In January, 1958 Salk vaccine was made available to supplement the limited supplies of British vaccine. Parents are at liberty to decline an offer of vaccination with Salk vaccine and wait for British vaccine, but in fact few parents do so.

The total number of children registered by the end of 1957 (namely 3553) is only 20.5% of the total children in the Borough eligible for vaccination. This response cannot be considered as satisfactory and renewed efforts are being made to encourage more parents to register their children.

The figures of poliomyelitis vaccinations since the inception of the scheme until the 31st December, 1957 are as follows:-

1000	De Salvania and	Numbe	alillomoli al monos is	
Year	No.of children registered	In Local Authority Clinics	By general medical pract-itioners	Total
1956 )	7557	224	SELECTION OF STREET	224
1957	3553	1815	180	1995
	Fencil edit	To view the total party	Harry Land Burgary	2219 *

<sup>\*</sup> This number includes expectant mothers and other adults in selected groups.

The number of children registered but not vaccinated at the end of the year was 1137. A further 197 received a first injection only.

#### 39 SECTION IV

#### TUBERCULOSIS

The number of primary notifications during 1957 was 71. The localisation of disease, ages and sexes were:-

			New Cases													-000	
Age Period	0	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Totals	
Respir- atory	M	1	-	1	-	-	-	-	3	4	4	4	7	7	4	-	33
	F	1	-	-	-	-	2	2	4	5	7	5	2	2	-	-	29
Non-	M	-	-	-	1		1	-	1	-	-	-		-	-	-	3
Respir- atory	F	-	-	-	-	eso.	4	-	-	-	1	-	-	(343	1	-	6

In addition to the primary notifications, two cases were notified posthumously, one case was discovered after death through the local registrars' death returns and thirteen were transferred from other areas. The total new cases were, therefore, 87 of which 75 were respiratory and 12 non-respiratory. This is 15 less than the number ascertained in 1956.

Thirteen of the new respiratory cases were contacts living with other members of their families who were already suffering from tuberculosis.

The number of Burnley patients on the Notification Register at the end of 1957 were: Respiratory 523: Non-Respiratory 73 - Total 596.

The accompanying chart indicates the trend of tuberculosis during the last twenty years. Improved methods of treatment enables many more patients to be cured or have the disease arrested and to lead an active and useful life. The number of deaths from tuberculosis has decreased spectacularly. During the last ten years the deaths from the respiratory form of the disease averaged two a year for every 10,000 of the population of the Borough, whereas in the previous ten year period the average annual number of deaths was 6 per 10,000. In comparison the new cases arising have decreased only slightly. During the last ten years these averaged eight a year for every 10,000 of the population, as compared with nine a year per 10,000 in the previous ten year period.

As I have mentioned in previous reports, still more work has to be undertaken in the field of prevention of this disease. Although very few families live in overcrowded conditions, much has yet to be done to clear slum property and improve sub-standard houses, reduce atmospheric pollution and educate the community to a healthy way of life.

#### Deaths

The following table gives particulars of the site and age distribution of those who died.

				-		-		200	,	41		-	-		12		
E/1953	4	3						-		Death	199	1 1		-	112		-golf 1
Age Periods:		0-	1-	2-	3-	4-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Totals
Tubercul- osis of	M	-	-	-	-	1	-	-	-	-	-	-	1	-	3	-	4
Respiratory System	F		-		100	20	100		-		-		1	0 0 0	710	E STORY	1
Tubercul- osis of	M		-	-	-	1	-	-	-	-	-	-	-	- 5-20	-	O Torn	100 To 1
Nervous System	F	No.	- 1	1	-	-	-	-	-	-	-	-	-	-	-	-	-
osis of	M	1	1	1	1	1	-	-	-		-	-	-	1	-	TO I	1
Other Systems	F	1	1	T. I.	10	1	1	-	-	-	-	-	UR I	-10	de la	-	20 70 1
other than	M	1	-	-	10	-	-	-	-	-		1	1	1	3	1	7
Tubercul- osis	F	-10	1	-	1	1	-	-	-	-	-	-	-	-		1	1

Of the five persons who died from respiratory tuberculosis during 1957, two died within twelve months after notification, one lived for two years and two for more than three years after notification. One was notified after death.

The average age at death of persons suffering from respiratory tuberculosis was 52 years. The death rate from respiratory tuberculosis per 1,000 living was 0.06 and from non-respiratory tuberculosis 0.01.

#### After-Care and Prevention.

Visits by Health Visitors -

To homes of patients, under T To homes of patients, for Aft			73 1,797
Extra nourishment (Milk) supplie	d (pints)	 •••	22,888
Paper Handkerchiefs issued		 	19,700
Bottles of Disinfectant supplied		 000	188

#### B.C.G. Vaccination.

Vaccination against tuberculosis of school children aged thirteen years was commenced in 1954. The numbers of children tested and vaccinated each year since the inauguration of the scheme is as follows:-

	Tested	Vaccinated
1954	568	421
1955	491	391
1956	588	465
1957	707	582

Further details of these are given in my report as Principal School Medical Officer, which is bound with this report.

In addition, vaccination of infants born to tuberculous mothers, and of close contacts of tuberculous persons, which was performed by the chest physicians as part of the service for prevention of illness under Section 28 of the National Health Service Act, 1946, resulted in 63 children under 15 years of age and five persons over that age being vaccinated.

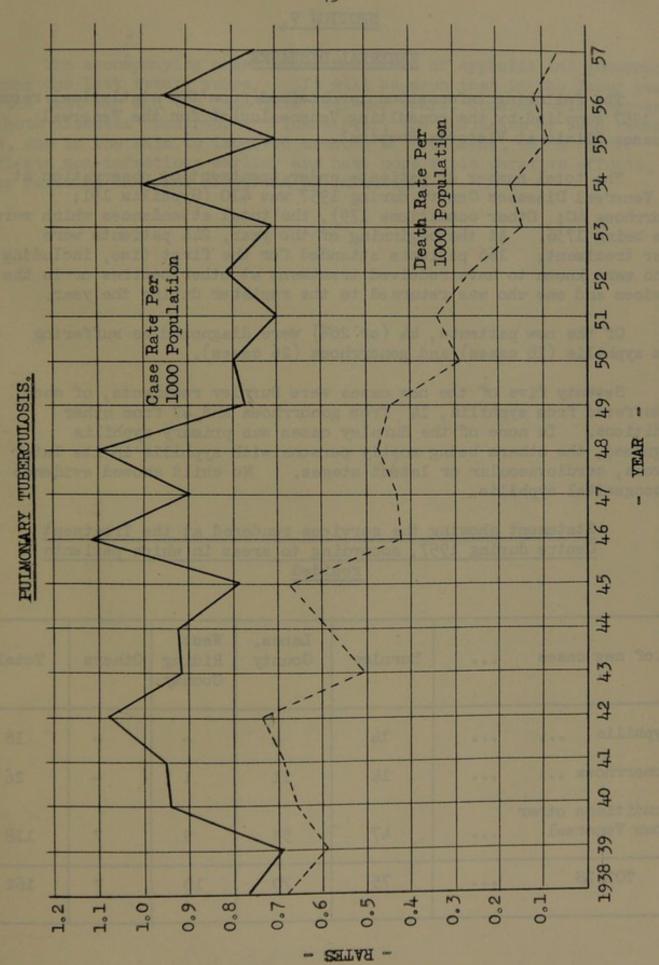
The total given B.C.G. vaccination in 1957 was 650.

Of the 68 contacts vaccinated in the year under review, 36 were children of tuberculous parents, 3 were brothers or sisters of patients, and the remainder lived in close contact with tuberculous relatives or friends.

#### RETURN FOR 1957.

								1132 1511 1511 153	13 year olā	1
Age	Under 1 year	1 2		3	4	5-9	10-14	15 and over	group of School Children	Total
No.vaccinated	27	-	1	2	3	15	15	5	582	650

Since the commencement of B.C.G. vaccination in the Borough in 1954, two thousand three hundred and fifty eight persons, apart from hospital nurses, have been vaccinated.



#### SECTION V.

#### VENEREAL DISEASES

The following information is obtained from the statistical return for 1957 supplied by the consulting Venereologist for the Venereal Diseases Clinic at Victoria Hospital.

The total number of patients under treatment or observation at the Venereal Diseases Centre during 1957 was 410 (Syphilis 191; Gonorrhoea 40; Other conditions 179), the total attendances which were made being 1736. At the beginning of the year, 244 patients were under treatment; 166 patients attended for the first time, including 3 who were known to have received treatment at other centres or in the Services and one who was returned to the register during the year.

Of the new patients, 44 (or 26%) were diagnosed as suffering from syphilis (18 cases) and gonorrhoea (26 cases).

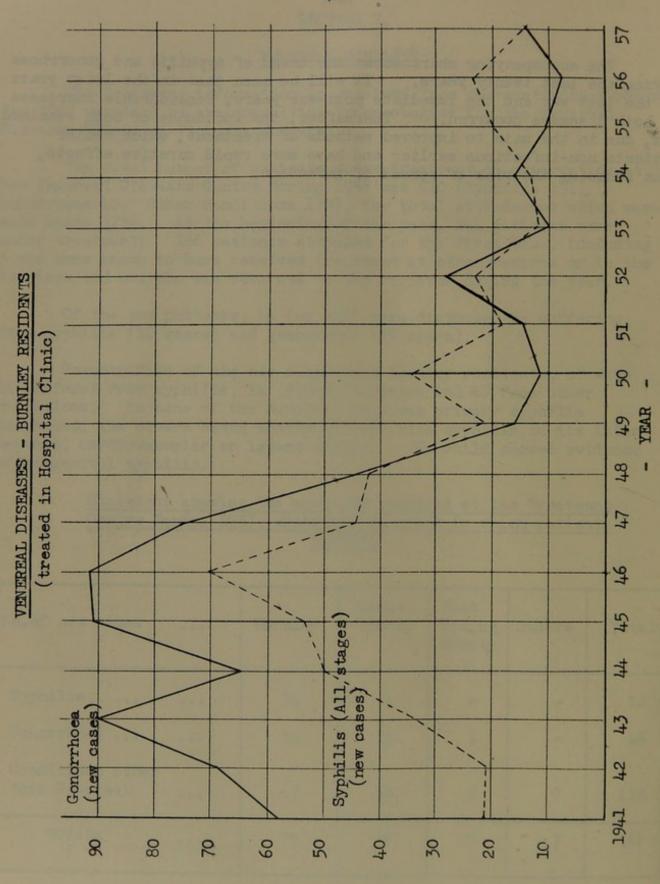
Seventy five of the new cases were Burnley residents, of whom 14 suffered from syphilis, 14 from gonorrhoea and 47 from other conditions. In none of the Burnley cases was primary syphilis diagnosed, the others being mostly persons with syphilis in its later nervous, cardiovascular or latent stages. No child showed evidence of congenital syphilis.

# Statement showing the services rendered at the Treatment Centre during 1957, according to areas in which patients resided

No. of new cases		Burnley	Lancs. County	West Riding County	Others	Total
Syphilis	• • •	14	4	-	7-	18
Gonorrhoea		14	11	1	-	26
Conditions other than Venereal	• • •	47	55	9	7	118
TOTALS		75	70	10	7	162

The accompanying chart shows the trend of syphilis and gonorrhoea during the last twenty years. It will be seen that in the later years of the last war and the immediate post-war years, considerable increases of both diseases occurred. Thereafter, the incidence of both remained low, due in the main to improved methods of treatment, which render patients non-infectious earlier and have more rapid curative effects, thus reducing the risk of spread of infection.





NAMBER OF CASES

#### CARE OF MOTHERS AND YOUNG CHILDREN

No alteration has been made in the number or siting of the Infant Welfare Centres. Two are held on Monday and Friday afternoons in an annexe of the Maternity Hospital; one on each Tuesday, Wednesday and Thursday afternoons in church halls in Colne Road, Hammerton Street, and Florence Street; two on Monday and Thursday afternoons in the Gannow Clinic premises. An additional Centre to serve the northern part of the town opened at Queensgate Methodist Church early in January, 1958 and is held on Wednesday afternoons. It is hoped to provide another Centre to serve the newer housing estates, but difficulty is being experienced in finding a suitable building to rent.

All the treatment and specialist clinics for school children, e.g. minor ailments, eye, ear, nose and throat, orthopaedic and physiotherapy and orthoptic treatment continue to be available for children referred from infant welfare centres.

Twenty children referred from the infant welfare centres made 81 attendances at the School Clinic for treatment of minor ailments. Particulars of those who attended the specialist clinics are given in my report as Principal School Medical Officer, which is printed with this report. Nineteen pre-school children, making 116 attendances, were referred from the infant welfare centres and nurseries for artificial sunlight treatment.

The infants born during 1957 who attended infant welfare centres are equivalent to 55.6% of the live births notified during the year.

72.7% of the attendances at the infant welfare clinics were made by children in the first year of life. The total attendances were 16.238 which are 491 more than in the previous year.

The health visitors made 11,237 routine infant visits, of which 4,666 were to children under one year of age and 6,571 to children between the ages of one and five years. In addition, they made 380 ante-natal visits and 884 visits to cases of infectious disease.

The shortage of health visitors experienced in previous years has continued and at no time during the year was the staff at full strength. Of the fifteen on the establishment, four are engaged on school health duties and one is wholly on tuberculosis after-care. At the end of 1957, instead of ten health visitors for duties in connection with mother and child care, infant welfare clinic duties, after-care of illness generally, and the supervision and care of the aged and infirm, only seven were on the establishment. Consequently, the staff available was only 70% of that required to give a reasonably effective service. The establishment also includes two student health visitors, but only one student was undergoing training.

I have wished for many years to combine the duties of the health visitors in order that each would undertake school health service duties, maternal and child welfare work and general care and after-care duties. This is most desirable, because it would give added interest to the staff and reduce the more arduous duties of domiciliary visitation. It would also enable each health visitor to concentrate, in her own district, on the whole family whether of pre-school, school or adult age. However, I find it as yet impossible to do this because of the shortage of staff, and because three employed on school health service duties are not qualified as health visitors and, therefore, cannot be employed on certain infant welfare work. This shortage is experienced in most industrial towns, but in the more attractive non-industrial areas full staffs are generally obtainable. I feel this shortage will continue until special bonuses are authorised for domiciliary nursing staffs employed in heavily industrialized areas.

#### Dried Milk and Vitamin Supplement for Children and Expectant Mothers.

The scheme for the sale and distribution of welfare foods continued to work smoothly and efficiently during the year. On the 6th April, 1957, the price of national dried milk increased from  $10\frac{1}{2}$ d. to 2s.4d., and since that date there has been a marked drop in sales. During the year 40,639 tins of national dried milk were sold in comparison with 52,270 during 1956. It is felt that due to this price increase, the sale of proprietory brands of dried milk may have increased.

From the 1st October, 1957, the sale of orange juice was restricted to children up to the age of 2 years. This restriction of course reduced the sales from that date. However, over the whole year there was a slight increase, 68,927 bottles being sold as against 68,342 bottles in 1956.

The issue of cod liver oil shows a decrease of 1,492 bottles over the past twelve months. Eight thousand six hundred and ninety three bottles being given in 1957 as against 10,185 in 1956.

There is also a reduction in the sales of Vitamin A and D tablets even though the number of expectant mothers over the period was similar to that of the previous year. Four thousand nine hundred and fifty seven packets being issued during the year as against 5,748 in 1956.

The amounts sold and distributed from 1st January to 31st December, 1957 were:-

Distribution Centre	National Dried Milk (Tins)	Cod Liver Oil (Bottles)	Vitamin A & D Tablets (Packets)	Orange Juice (Bottles)
18 Nicholas Street Burnley	33,793	7,037	4,112	54,288
Infant Welfare Centres	6,846	1,656	845	14,639
Combined Total Issues	40,639	8,693	4,957	68,927
Issues to: Institutions, Nursery Schools, Day Nurseries, and Classes.	24	-	Table of Park	480

In addition to the above 451 lbs. of cod liver oil and malt and iron preparations and other vitamin products were supplied by the local health authority.

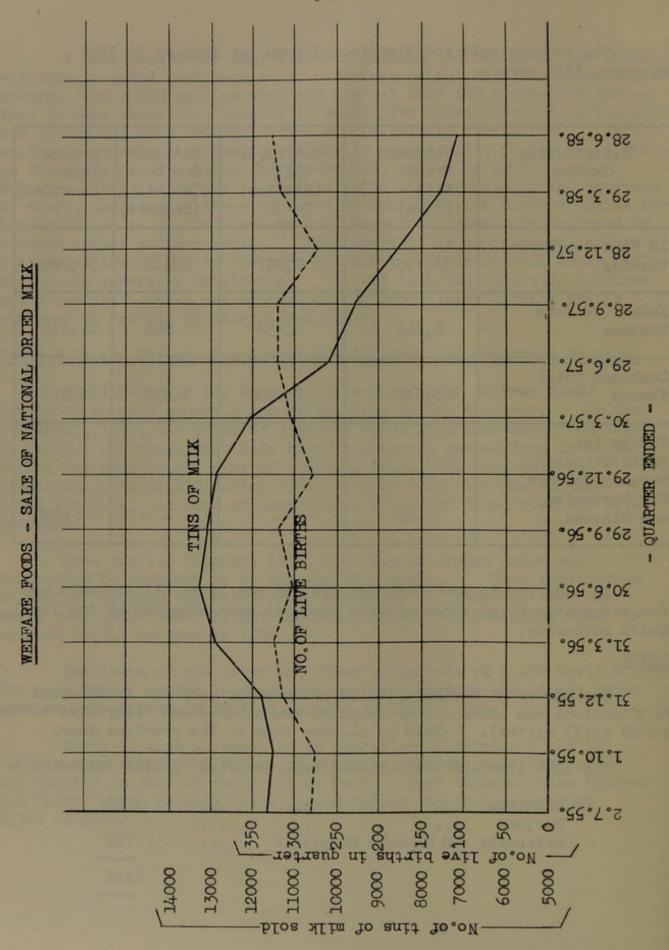
#### Births.

The number of births notified after adjustment for transferred notifications was 1296. (One thousand two hundred and fifty live births and 46 still births). This is 24 more than in the previous year.

The 1296 live and still births were notified by the following: -

Midwives			000	 507
Doctors Maternity	and Ge	neral Ho	spitals	 789
				1296





#### Attendance at Birth.

Enquiries made showed that of the 1714 confinements which occurred in the Borough -

None were attended by a doctor only.

74 were attended by both doctors and midwives.

433 were attended by midwives only.

1204 occurred in the Bank Hall Maternity Hospital.

2 occurred in the General Hospital.

1 occurred in the Victoria Hospital.

Although 433 confinements were attended by midwives only, 119 of these women had engaged medical practitioners for their confinements, but the practitioners were not present at the births.

Of the 1,207 births notified from Bank Hall Maternity Hospital and the two general hospitals, 427 were in respect of mothers who reside beyond the Borough.

#### Stillbirths.

Forty six stillbirths (after adjustment for transferred notifications) were notified in 1957 as compared with twenty-nine in 1956. Enquiries elicited that the following conditions appeared to contribute to the stillbirths.

Ante-partum haemorrhage	4
Intra-partum haemorrhage )	
during caesarian section - )	1
Asphyxia of infant )	2
Asphyxia - other causes	-
Caesarian Section for foetal )	1
distress of unknown origin )	
Intra cranial haemorrhage	1
Pressure on the cord	4
Caesarian section with anterior )	
Caesarian section with head	1
placenta and difficult head	200
extraction )	7
Pre Eclamptic toxaemia	1
Post maturity, P.O.P., Forceps	
delivery	1
Difficult breech delivery	2
	6
Anencephaly	4
Foetal malformations	1
Large baby - forceps delivery	1
a to	75
C/R'	35

В	/F	35
Delayed labour Twin delivery - macerated Unhealthy placenta Intrauterine Death - cause unknown Cause not ascertained	200	1 1 6 2
		46

#### Ophthalmia Neonatorum.

One case was notified during 1957.

#### Pemphigus Neonatorum.

No cases were notified during 1957.

#### Care of Premature Infants.

Eighty-nine Burnley babies, representing 6.9% of the total born alive during the year, weighed  $5\frac{1}{2}$  lbs. or less at birth. These were followed up by the health visitors, immediately after the midwife ceased to attend or after discharge from hospital, and thereafter at frequent intervals.

Of these 89 premature infants, 23 were born at home and 66 in hospital. The 23 infants born prematurely at home represents 4.5% of the total domiciliary confinements in the Borough, whilst 66 born in hospital are equivalent to 8.4% of the Burnley infants born in hospitals. This higher rate in hospital births is due to the fact that expectant mothers in whom difficulties or complications are present or anticipated are advised to enter hospital for their confinements. Of the 23 infants born at home, 4 were transferred to hospital for special care and all survived beyond 28 days. The 19 who were nursed at home all survived beyond 28 days. Of the 66 born in hospital, 56 survived beyond 28 days.

The equipment maintained to provide for the needs of babies born prematurely at home was loaned to households where suitable provision was not available.

Although no special unit is available at any local hospital for the reception of babies born prematurely in their own homes, no difficulty has been experienced in having infants and their mothers admitted to Bank Hall Maternity Hospital when necessary.

#### Care of Illegitimate Children.

The Committee of Management of Bankfield House of Help continues to undertake, through their social worker, after-care of unmarried mothers and illegitimate children, on behalf of the Local Authority. Sixteen new cases were investigated. In 8 instances satisfactory arrangements were made for the babies to be kept by their mothers, one child was boarded out with foster parents and 7 babies were placed for adoption. Three mothers were advised and assisted in connection with affiliation orders and one mother refused to take affiliation proceedings. In 8 instances no information re putative father was given. Two of the sixteen mothers were married women.

Nine unmarried expectant mothers were sent to moral welfare homes by the Local Authority, arrangements being made through the House of Help.

#### Maternal Mortality.

Two Burnley women died in consequence of pregnancy or childbirth during 1957.

#### Puerperal Pyrexia.

Sixteen cases of puerperal pyrexia were notified during the year. Of these, 14 were notified from Bank Hall Maternity Hospital, and 2 were domiciliary confinements.

#### Day Nurseries.

No alteration has been made in the accommodation provided in the two day nurseries administered by the Local Health Authority. The average attendances throughout the year were 36 at Bank Hall Nursery (54 places) and 20 at Hargher Clough Nursery (26 places). The average attendance is somewhat less than in 1956, due mainly to an outbreak of influenza in the autumn. In Bank Hall Nursery the majority of children were under three years of age, and in Hargher Clough Nursery under two years of age. Children between three and five years of age are accommodated in the Education Authority's ten nursery schools and six nursery classes. The total number on the rolls of these schools and classes at the end of the year was 537.

Regular medical supervision of all nursery children is undertaken.

Bank Hall Nursery, in conjunction with the Education Committee's nursery schools, continues to be a training nursery for students studying for examinations of the National Nursery Examination Board.

#### Nurseries and Child Minders Regulation Act, 1948.

In Burnley there are no privately administered nurseries or nurseries established by employers for children of their employees.

During the year three child minders were registered and 12 children were cared for.

the result describing confusions to the horsest, while of the party of the confusion of the

No.of Doctor 's Consultations years 310 11,8 108 139 159 198 Under year 774 632 602 592 897 3,497 Average Attend-Session ance 42 29 20 per 45 34 148 Attend-4,363 3,555 2,552 2,292 No.of 3,476 Total ances 2,629 16,238 2 - 5 years 1,025 573 366 273 392 of children who were No.of Attendances 632 1-2 years 442 1,933 11,810 1,799 175 250 300 under 2,706 2,540 1,769 2,011 2,784 year attend-433 371 017 301 388 Child-No.of Total ren who 8 1956 1952-55 No of Children who 142 attended born in 173 88 77. 615 88 142 140 118 126 5 623 1957 120 164 116 184 111 695 Attend-1 year Child-First ances under No.of 122 150 190 128 188 778 ren of Sess-103 361 tons 103 53 51 51 of No. MT. PLEASANT ..... BANK BALL ..... FLORENCE STREET CENTRE TOTALS GANNON

PARTICULARS OF WORK AT THE INFANT WELFARE CENTRES DURING THE YEAR ARE AS FOLLOWS: -

#### Details of Work of Health Visitors during 1957.

#### MATERNITY AND CHILD WELFARE

		The second second					
	Visits t	o newly born infants			1211		
		s 1st year			3455		
		2nd year			2090		
		3rd year			1601		
		4th year			1346		
		5th year			1534		11,237
							100000000000
	Visits i	n connection with: -					
		ious diseases .					884
		births and infant de			•••		61
							3
	After-	Care - Care of the A					398
		Other after-c			cent car	ses	42
	700 -	ies re Nursery child					220
	Midwiv	es supervision .					295
	Ante-N	atal cases (183 visi	ts re adm	ission	to Mater	rnity	7
	Но	spital)					380
	Lying-	in patients discharg	ed early	from Ma	ternity		
	Но	spital					286
	Others	(including accident	s in the	home)			332
	Ineffe	ctive visits .					1,456
	Number of	f sessions at Infant	Welfare	Centres			361
	Number o	f attendances at the	Centres	by Heal	th Visi	tors	871
	Number o	f attendances at th	e Nursery	School	s or Cla	asses	3
	b	y Health Visitors .					36
	100	f Sessions attended				-	
	(1	Day, 96; Evening 4	8)				144
	00 10				1 11 11		
	Visits t	o Tuberculosis cases	:-				
	Notifica	tions under Tubercul	osis Regu	lations	78		
		r-Care purposes			2010		
							2,088
	Patients	attendances at Ches	t Clinic				4,613
		SCHOOL MED	ICAL SERV	ICE			
Nin	mher of d	ave on which the Sah	ool Clini	a was on	nen		307
		ays on which the Sch ttendances at Clinic					26,868
					non		
		ollow-up visits paid					8,179
		urveys of Schools fo					
Ivu	moet, or b	upils examined at Cl	eanliness	Inspec	cion		45,535

#### 57 SECTION VII

#### MIDWIFERY SERVICE

#### Midwives' Act.

Thirty two midwives notified their intention to practise midwifery during 1957.

They were employed as follows: -

In the Maternity Hospital		20
As whole-time domiciliary Municipal Midwives	000	10
In private practice as Maternity Nurses		2

#### Domiciliary Midwifery.

Difficulty continued to be experienced in recruiting sufficient midwives for the domiciliary service. Although the establishment of midwives is ten, only eight were employed in the early part of the year, and for a short period, owing to a retirement, the staff was reduced to seven. During the second half of the year nine were employed, but this was achieved only by re-engaging a retired midwife on a temporary basis.

Two midwives in private practice notified their intention to practise as maternity nurses. One was actively engaged, and attended only two births in the Borough. The second did not attend any cases in the Borough during 1957.

Two hundred and ninety five visits were paid by the Supervisor to the midwives during the year. The Supervisor also interviewed midwives at the Health Office weekly. No midwife was suspended from practice.

A total of 1714 confinements occurred in the Borough, including women who came into the town from other areas for their confinements. Of these, 1207 took place in hospitals, 508 were attended by the whole-time midwives employed by the authority on domiciliary midwifery (433 as midwives and 72 as maternity nurses); 2 by doctors and maternity murses in private practice.

Of the confinements of women resident in Burnley 789 took place in hospitals and 507 at home. In 1956 domiciliary confinements were only 35% of the total. In 1957 the percentage increased to 39, there being 58 more domiciliary confinements than in the previous year. The ample provision in the Maternity Hospital and the Maternity Homes in the area of the Burnley and District Hospital Management Committee is sufficient, not only for those mothers who require to be admitted for clinical and social reasons, but also for many normal cases which could be confined satisfactorily in their own homes.

During the year, 539 maternity outfits were provided free of charge to expectant mothers who required them for their confinements in their own homes.

#### Medical Aid Summoned by Midwives.

Forty three records of sending for medical aid under Rule E.12 of the Central Midwives' Board were received from the midwives in respect of domiciliary cases. Of these 32 were on account of complications or difficult conditions of the mothers and 11 of conditions in the new born infants.

The Emergency Obstetric Unit (Flying Squad) was summoned on three occasions throughout the year to assist when complications in confinements arose. On two occasions intrapartum haemorrhage was dealt with, the patients being thereafter removed to the Maternity Hospital. The third was a case of ruptured uterus, the patient dying undelivered at home.

#### Ante-Natal and Post-Natal Care.

At present all general practitioners, with one exception, who have accepted service under Part IV of the National Health Service Act have been included in the list of general practitioner obstetricians.

Practically all Burnley expectant mothers received ante-natal supervision either through the local health authority or hospital services.

In May, 1956, the Ministry of Health issued a memorandum on ante-natal care, and a meeting was held later that year, at which representatives of the Local Health Authority, the Local Medical Committee, the Hospital Management Committee and Consultant Staff were present. This meeting was followed by arrangements for improving the ante-natal services. The local services now include, inter-alia, the following:

Interchange of ante-natal records and records of previous confinements between the local authority clinics, domiciliary midwives and hospital clinics.

Ante-natal care for domiciliary cases is carried out at the local authority clinic, and for maternity hospital booked cases at the hospital clinic. If delay should occur in deciding if a patient can be given a bed in the Maternity Hospital, ante-natal care is given in the interim at the local authority clinic, and subsequently the patient and her records are transferred to the hospital clinic.

Domiciliary midwives attend the local authority ante-natal clinic, where they give ante-natal care, in conjunction with the clinic medical officer, to their own booked cases. Patients are seen monthly until the 28th week of pregnancy, fortnightly until the 36th week, and thereafter weekly.

All expectant mothers are referred from both local authority and hospital clinics for chest x-ray examinations.

All patients have blood pressure and weight recorded and urine tested on each attendance at the clinic. Blood samples for haemoglobin estimation and Rh. factor, blood group and kahn or wassermann test are taken on first attendance and haemoglobin is again estimated if necessary after the 30th week. If the Rh.factor is negative, a test for antibodies is carried out later. If antibodies are present, the patient is immediately referred to the Maternity Hospital, through her general practitioner. Records of previous blood examinations are exchanged between the local authority clinic and domiciliary midwives and the maternity hospital clinic. Copies of reports of blood examinations are sent from the local authority clinic to the patients' own medical practitioners.

To ensure full co-operation between the local authority midwives and general practitioners, cards are sent to the practitioners on which they record if they wish to be called by the midwife at the onset of labour or only called if required by the midwife and if the patient is a suitable case to have analgesia. Medical practitioners are informed of any abnormality found on examination at the local authority clinic and the responsibility for treatment or arrangements for admission to the maternity hospital are left to them.

The emergency obstetric unit ("flying squad") is available from the maternity hospital directly on the request of the midwife in attendance on the case if the patient's medical practitioner is not immediately available.

The domiciliary midwives follow up expectant mothers who fail to keep appointments at the local authority ante-natal clinic. The maternity hospital clinic sister follows up those who fail to keep appointments at the hospital clinic, but on request from the hospital staff, health visitors assist in tracing defaulters from the hospital clinic.

The number of bookings for confinement in the maternity hospital are kept under review to ensure that some beds will always be readily available for cases with early signs of toxaemia.

The selection of expectant mothers for confinement in the maternity hospital is on the lines advised in Ministry of Health Circular "Selection of Maternity Cases for Admission to Hospital". All primipara, irrespective of age, all multipara over 40 years of age and all multipara having their fourth or more pregnancies are encouraged to book beds in the maternity hospital. Applications for admission of those not in these categories are referred to the medical officer of health, for assessment of social and other conditions.

The names of many of the expectant mothers who attend either the local authority or hospital clinics are sent to the local authority dental officers. The latter invite them by letter to attend the dental clinic for examination, and those who fail to do so are followed up by the health visitors and encouraged to see either the local authority dental officers or their own dental surgeons.

Expectant mothers attending either the local authority or hospital clinics are encouraged to undertake ante-natal relaxation exercises at sessions held by the local authority's physiotherapist. The clinic medical officer and domiciliary midwives endeavour to discuss with each expectant mother individually her personal health problems. Midwives make home visits to each expectant mother, not only to ensure that suitable preparations are made for the confinement, but to talk on hygiene, nutrition, etc. Group health education is undertaken by health visitors during the relaxation exercises sessions.

The Home Help service is also available to any mother who requires it during pregnancy or the puerperium.

#### ANTE NATAL CLINIC

No. of Sess per mor		No. of women Attendance		Total No. of Attend- ances during the year		
Medical Officer's Sessions	Sessions held by Midwives only	No. of women who attended during the year	No. of New Cases	Medical Officer's Sessions	Sessions held by Midwives only	
8	4	745	576	2562	279	

# Attendances at Clinic for investigation of Rh.factor and Wassermann reaction of the blood of expectant mothers

No.of	No. of attendances											
Sessions held per	М	others	Fathers	Babies	Total							
month	Primary	Subsequent	WEGO SCHOOL STOR	AND AND STREET								
3	431	141	54	Nil	626							

Only eight women attended the clinic specifically for a post-natal examination by the Clinic Medical Officer, but all women are visited for post-natal purposes by the midwives and practically all are given a post-natal examination by their own general practitioners.

Figures supplied by the staff of Bank Hall Maternity Hospital Clinic show that 1136 first attendances and 8746 subsequent attendances were made there by women for ante-natal examinations and 891 for post-natal examinations. These figures, however, include women from the whole of the area covered by the Burnley group of hospitals. Separate figures for Burnley residents are not available.

#### DENTAL SERVICE

#### Report of Senior Dental Officer.

Six hundred and forty eight Burnley expectant mothers were referred to the Dental Clinic from the Local Health Authority and Bank Hall Hospital Ante-Natal Clinics. This is equivalent to fifty one per cent. of the registered Burnley births in 1957. In addition thirty six nursing mothers were referred.

Of these 684 patients, only 379 attended for dental inspection. Of the 379, 100 (26%) were found to be dentally fit, and 279 (74%) were in need of treatment. These 279 were given the option of attending their private practitioner for treatment, or receiving treatment under the Authority's scheme. One hundred and seventy seven (65%) accepted treatment at the Clinic, and 102 (37%) decided to have treatment privately, or were indifferent. When notified for treatment, twenty failed to keep their appointments, thirty nine attended for part treatment and then failed to attend, and one hundred and thirty two, together with the 12 carried over from 1956, had their treatment carried out, or were awaiting an appointment at the end of the year.

Artificial dentures were provided for twenty four patients, thirty five dentures being fitted. Three dentures were repaired and there were three re-lines of dentures.

In addition to the treatment figures shown in the tables, twenty four dressings and nine local anaesthetics were given for maternity and child welfare patients.

Sixteen children referred from infant welfare clinics attended the dental clinic. Children under five who attend nursery or infant schools are inspected during routine dental inspections.

Sixty-two sessions were held during the year.

The scheme is working well, and every help and assistance is given by the Bank Hall staff, the midwives and the Health Visitors. There is little change in the number referred or treated, but the number of nursing mothers asking for treatment has doubled. Only a few cases of real neglect have been observed, and the patients have been wholly co-operative.

A pleasing feature is the fact that some mothers have asked if they can continue to be treated, even though they do not qualify under the scheme.

Every effort will be made to ensure that the scheme continues in its present quite satisfactory state.

# Numbers provided with dental treatment.

	Examined	Needing Treatment	Treated	Made dentally fit
Expectant and Nursing Mothers	379	279	171	132
Children under 5 years of age	16	13	13	13

### Forms of dental treatment provided.

blo steps offi	Gum	No.		.ys	tota bei	Lycold L ad	2007	tures vided	Mark Lyde a topo
**************************************	Scalings and G Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Full Upper or Lower	Partial Upper or Lower	Radiographs
Expectant and Nursing Mothers	132	157	Tall I	100	364	100	24	14	and a - Huloxa
Children under 5 years of age	Jenik Part	1	-	-	19	13		De John St.	o to ou

#### DOMESTIC HELP SERVICE

Six hundred and eighty four households were assisted during the year. Of the persons assisted, 91% were chronic sick, aged and infirm; 3% were persons suffering from other illnesses, 4% were maternity cases and 2% were tuberculous persons.

The number of households to which help was given is 11 more than in 1956. As in previous years it was not possible to provide adequate help to some of the households which required it. The needs of each applicant had to be carefully estimated and in the less urgent cases only the minimum of help was given. Elderly persons, who by reason of senility, infirmity or chronic ill-health were unable to care for themselves and their homes, again presented the major problem, as not only was the demand greatest from the aged people, but the help was needed for lengthy periods. A considerable number of these elderly people have no close relatives and until help was received from the service, many were wholly dependent on the good will of neighbours for their basic needs. Every endeavour is made to ensure that where possible relatives, particularly sons and daughters who live within a reasonable distance, give some assistance, but often personal domestic responsibilities, hours of work, etc., would appear to be excuses to cover a reluctance to help.

Night attendants were provided for thirteen households where old people living alone could not be left unattended pending their admission to hospital, or until more permanent arrangements could be made, or where it was necessary to give relatives an occasional rest from the strain of disturbed nights.

The Domestic Help Organiser supervises the Helps, investigates the needs and circumstances of applicants for assistance and recruits the personnel.

The total cost of the Service for the year ended 31st March, 1958, (excluding grant) was £17,275. Of this amount, £17,018 was in respect of wages of the staff. Income from charges made for the service was £1,196. The net expenditure (excluding grant) was, therefore, £16,079.

No. of Domestic Helps employed at 31st

December, 1957 ... Whole-time 40

Part-time 14

# Extent of Domestic Help given: -

Type of Case	Remain- ing 1st Jan.	New Cases		l cases ended	Cas	ses mpleted	on b	s remaining ooks at .12.57.
Consider the Constant of the C	Jan.	tipir od	No.	Percen- tage	No.	Percen- tage	No.	Percen- tage
Maternity Tuberculosis Illness of housewife	7	28 5	28 12 20	4.1 1.8 2.9	27 3	13.4 1.5	1 9 5	0.2 1.9
Chronic sick Aged & Infirm	104 349	10 44 127	148 476	21.6	30 127	14.8 62.9	118 349	24.5 72.4
I THE REAL PROPERTY.	470	214	684	100.0	202	100.0	482	100.0

## Night Attendance.

No. of part-time Attendants	 	4
Cases assisted during 1957	 	13

#### Periods for which attendance was given: -

No. of nights	1	2	3	4	11	40
No. of cases	2	3	3	3	1	1

No. of visits by the Organiser to homes of patients in connection with the Domestic Help and Night Attendance Services, etc. ... ... ... 704

#### "Meals on Wheels" Service.

The "Meals on Wheels" service is provided from the funds of the Burnley and District Sick Poor Fund and the local health authority makes a contribution towards the cost of the service.

The administration of the meals scheme is undertaken by the staff of the Public Health Department on behalf of the trustees of the Fund.

Practically all the recipients were elderly persons, who because of enfeeblement, were unable to prepare mid-day meals for themselves and had no relatives available to do so for them.

Two course mid-day meals are provided on five days each week. The recipients receive dinners on Monday, Wednesday and Friday of one week and Tuesday and Thursday of the alternate week. The meals are supplied by the Education Committee's School Meals Service. They are transported in a motor vehicle fitted with a hot oven, and each recipient's meal is delivered in an individual two-compartment container. The local W.V.S. assist in the distribution of the meals. Each meal costs at present 1/5d. and the recipients are expected to pay 9d.for it. Arrangements were made for the recipients to receive a special Christmas dinner free of charge.

During 1957 between 38 and 42 meals were supplied daily. A total of 10183 meals were provided at a cost of £724.6s.6d. The income received from the recipients was £365.14s.3d.

Donations made to the Women's Voluntary Services by the local industrial undertakings enabled a second van, for distribution of meals, to be put into service early in 1958. This has effected a reduction in the time taken to deliver meals and allows for approximately twelve more meals to be provided daily.

#### HOME NURSING SERVICE

The Home Nursing Service continues to work at peak pressure. In addition to the Superintendent and Assistant Superintendent, the establishment should be sixteen nurses, preferably Queen's Institute trained, employed whole-time. At no time since the inauguration of the National Health Service in 1948 has the establishment been at full strength, and dependence on part-time staff, many of them state-enrolled nurses and some of them married women with domestic obligations, makes administration of the service extremely difficult. Credit must be given to the Superintendent and her Assistant for maintaining the service, and coping with such a large volume of nursing care under difficult circumstances.

At the end of 1957 the staff consisted of the Superintendent, Assistant Superintendent; four whole-time and five part-time State-registered nurses; three whole-time and one part-time Enrolled Assistant Nurses. One of the Enrolled Assistant Nurses was a man who nursed male patients wherever the services of a male nurse were particularly required. The shortage throughout the year was six whole-time nurses.

In order to relieve the trained nursing staff, four bath attendants were employed to attend to patients who only required to have their beds made and be given bed baths.

Much time continues to be taken up in the administration of drugs by injection, such as insulin, penicillin and antibiotics, on the instruction of medical practitioners.

One thousand seven hundred and sixty three patients were nursed, this number being ninety four less than that of the previous year. The 50,298 nursing visits were an increase of 669 over the number in 1956. This amount of work represents an average of 4573 nursings for a whole time nurse, and although it is much too great to be borne without throwing an undue strain on the staff, it has been performed efficiently and loyally, despite the inconveniences of having to travel on foot off the main 'bus routes. When the shortage of staff or very inclement weather made it necessary, and occasionally on Sundays, taxis were provided.

The statistics which are appended show that fifty six per cent. of the patients were over 65 years of age and of these many were chronic sick cases or were suffering from incurable diseases and required nursing for lengthy periods.

The Local Health Authority is affiliated to the Queen's Institute of District Nursing.

#### SUMMARY

Number of patients remaining on the Books,	
December 31st, 1956	. 398
Number of new patients during 1957	. 1365
Total number of patients nursed	. 1763
Total number of patients discharged or died	. 1360
Number of patients remaining on the Books,	
December 31st, 1957	. 403
Number of nursing visits made during the year	. 50298
METHOD OF DISCHARGE	
Number of patients convalescent	. 756
Number of patients died	. 290
Number of patients removed to Hospital	. 247
Number of patients removed from the Books for	
other causes	. 67

TOTAL STATES	Medic al	Surgical	Infectious Diseases	Tuberculosis	Meternal Complications	Others	Totals	Patients who were over 65 years of age	Children under 5 years of age	Patients who had more than 24 vists during the year
Number of cases attended	1362	21/1	6	131	12	11	1763	986	28	509
Number of visits	35945	5434	82	8659	105	73	50298	29588	180	42305

#### The classification of the new cases includes: -

	Cases		Cases
Infective and parasitic diseases	11	Complications of pregnancy and the	
Pulmonary Tuberculosis	92	puerperium	12
Non-Pulmonary Tuberculosis	4	Diseases of the Skin and cellular tissue	42
Neoplasms	103	Diseases of the bones and joints	20
Allergic, endocrine, metab- olic & nutritional diseases	48	Diseases of early infancy	8
Diseases of the blood and blood forming organs	44	Senility and other conditions of old people	101
Diseases of Nervous System and Sense Organs	21	Accidents, poisonings and violence	20
Diseases of Circulatory System	180	Gynaecological diseases (other than Genito-Urinary)	14
Diseases of Respiratory System (other than Pneumonia and Tuberculosis)	127	Enema (prior to X-ray examinations)	119
Pneumonia	46	Enema (constipation, obstruction, etc.)	111
Diseases of Digestive System	9	Various post-operative conditions	65
Diseases of the Genito- Urinary System	12	Cerebral cases (not included above)	138
Ear, Nose and Throat Conditions	12	Infectious Diseases	6
The 1365 New Cases were refe	erred by	- The true reported mind we	
Doctors Victoria Hosp General Hospi Manchester Ro	tal		00 12 6
		0/1	

	B/F	1259
Public Health Department	 	39
Applications by relatives	 	56
Marsden Hospital	 	5
Lancashire County Council	 	1
Preston Royal Infirmary	 	1
Mental Health Section	 	1
Social Services Department	 	3
		1365

Tropalmore's to ferment

#### SECTION XI

#### PREVENTION OF ILINESS, CARE AND AFTER-CARE.

#### Care of the Aged and Sick and Infirm.

The problem of the care of elderly persons living in their own houses is a continuing one. Help from relatives is of a minor character, and this is possibly due, in some measure, to the present day lack of family integration.

Officials of the Health Department, including Health Visitors, Home Help Organiser, Mental Health Officers and District Nurses, visit, advise and help where at all possible. Services such as the Domestic Help Service, Meals-on-Wheels Service, Night Attendance Service and District Nursing Service are made available where a need is evident. Close liaison is maintained with the Geriatrician of the General Hospital and with the officers of the Social Services Department.

After-care and supervision of elderly people discharged from hospital are well maintained with the help of the hospital almoner and welfare workers.

Aged people are visited in their own homes periodically by members of a ladies committee of the Burnley Council of Social Service and by members of the Churches Visiting Scheme which came into being in May, 1955. Excellent work is being done by these two voluntary organisations in an effort to relieve loneliness and to provide interests for the old people. The Churches Visiting Scheme is administered by a committee of clergymen and church members of all denominations with the Town Clerk, the Medical Officer of Health, the Social Services Officer and the Area Officer of the National Assistance Board serving thereon in an advisory capacity. At the 31st December, 1957 there were 330 elderly people on the list to be visited by these voluntary workers.

During the early part of the year a committee of the Burnley Council of Social Service, together with the help of the local chiropodists, inaugurated a monetary aided Chiropody Service for old age pensioners. This service has proved a great success and a boon to the old people receiving this help.

The Meals on Wheels Service which is a financial aided service, providing hot meals to elderly people who are unable to cook or shop for themselves, is referred to on Page 66. This service was extended early in 1958 when the local Women's Voluntary Service provided an additional van.

### Care and After-Care of Tuberculous Persons and Contacts.

The whole-time Health Visitor undertaking routine after-care of patients discharged from hospital, attends the Chest Clinic at Marsden Hospital and accompanies the chest physicians on domiciliary visits. She is also responsible for the domiciliary supervision of patients being treated in their own homes.

Examination of contacts of patients has been facilitated by the co-operation of the contacts themselves, general practitioners, and medical officers of large industrial undertakings in the town.

Liaison between officers of the local health authority, National Assistance Board and Ministry of Labour is excellent.

The District Nursing and Domestic Help Services are available where required and the Housing Committee give special consideration to families in need of re-housing following appropriate recommendations by the Chest Physicians and the Medical Officer of Health.

The chest physicians at Marsden Hospital undertake the B.C.G. vaccination of contacts, as part of the after-care service of the local health authority. Details of this service are reported elsewhere.

The prevention of tuberculosis by B.C.G. vaccination of the thirteen-year old group of school children is dealt with in my report as Principal School Medical Officer.

Sputum bottles, paper handkerchiefs and nursing requisites are provided when necessary.

One tuberculous person undergoing industrial training, was maintained by the authority in Papworth Village Settlement until August, 1957.

In November, 1956, it was necessary to obtain an order from a court of summary jurisdiction for the removal to hospital of a female adult suffering from tuberculosis of the respiratory tract, who refused to take precautions to prevent the spread of infection and who was causing serious risk of infection to members of her family. A further Order for this patient was obtained early in 1957 enforcing her stay in hospital for an additional period of three months.

# Epilepsy.

At the end of 1957, twenty two epileptic children of school age were known to the School Health Service. Ten of these suffer from major epilepsy and twelve from minor epilepsy. Eight of the major and the twelve suffering from minor epilepsy were able to attend ordinary day schools and are kept under frequent supervision. Two were in residential special schools. Two children under five years of age are under supervision by the Child Welfare Service, both being cases of minor epilepsy.

The register of handicapped persons maintained by the Welfare Department, which is not comprehensive, contains the names of eighteen adult epileptics, of whom fifteen are in Colonies or Homes and three reside in their own homes.

It is not known how many epileptics are on the Disablement Register of the local office of the Ministry of Labour and National Service. It is understood that difficulty continues to be experienced by the Juvenile Employment Section of the local office in finding suitable employment for several adolescent epileptics. During 1957, one adolescent female epileptic was undertaking light work in a small workshop for handicapped persons, which was inaugurated by a local voluntary committee.

# Cerebral Palsy.

No reliable information is available of the number of persons in the Borough who suffer from cerebral palsy. Only two cases are on the register of the Welfare Authority, one of whom resides in an old people's hostel. Three male and one female adults are also mental defectives and under the supervision of the Mental Health Service. One of these is employed in the local Remploy factory, the others are low grade unemployable defectives. One spastic child is also mentally defective.

At the end of 1957, five spastic children of school age were able to attend ordinary or special day schools in the Borough, five were in residential special schools and one was receiving tuition at home. One was awaiting admission to a residential school. Five children under five years of age were under supervision by the Child Welfare Service.

# Speech Therapy.

During the past year the Speech Therapist has seen and treated 14 adult patients referred from the local hospitals at the authority's clinic premises. Of this number, 2 were stammerers, 3 were voice cases,

7 were aphasics resulting from cerebral lesions and 2 were laryngectomies. Of the fourteen adult cases, 6 were discharged, and 2 cases were awaiting treatment. These adults made a total of 202 attendances. Particulars of speech therapy given to children will be found in my report on the School Health Service.

#### Chronic Carriers of Infection.

A register is kept of persons known to be chronic carriers of infection. They are usually persons discharged from hospital while still excreting the infective organisms. Supervision is maintained to ensure that they do not engage in employment involving the handling of foodstuffs, and specimens of faeces for laboratory examination are obtained from them periodically. By the end of 1957 the register contained one case of Paratyphoid B and six cases of Salmonella (Typhi-murium).

#### Convalescent Treatment.

Twenty six persons received convalescent treatment during the year.

the same that the same to be a second to be a second to the same to be a second to the same to be a second to be a second to the	10000		THE STATE		-	
Name of Convalescent Home		Pa	Philipp V	Total pat-		
to Pelastical School St. 101	Ad	ults	Children		Total	ient weeks
	M	F	M	F		
Manchester and Salford District Provident & Family Welfare Society's		4 16		STATE OF THE PARTY	to Suffer	by dysorot astr
Convalescent Home, "West Hill" Southport	1	7	-	- BI	8	16
Blackburn & District Home, St.Annes-on-Sea	4	13	-	-	17	33
Accrington and District Convalescent Home, Chaigley Manor,	PARTY S	TOTAL ST	District to		A TOWN TO	
nr. Clitheroe		-	-	1	1	5
TOTAL	5	20	-	1	26	54

In addition, 121 children selected through the School Health Service received convalescence in the Thursby Convalescent Home, St. Annes-on-Sea, the length of stay being two weeks in most cases.

# Provision of Nursing Equipment.

Nursing requisites are loaned to patients being nursed at home. Equipment available includes invalid chairs, crutches, air-beds, air-rings, bed pans, mattresses, blankets, bed cradles, etc. These articles are issued from the District Nurses' Home and a charge of 3d. or 6d. per week is made according to the type of article loaned.

### NURSING REQUISITES LOANED DURING 1957

Mackintosh Sheets  Bed Pans  Air Rings  Urinals  Wheel Chairs  Back Rests  Crutches (pairs)  Walk Aid	220 110 73 38	Sandbags Air Beds Feeding Cups Beds Bed Tables Bed Cradles Commodes Mattresses	10 8 1 3 20 16
		TOTAL	797

# Health Education.

Health education was undertaken during the year by means of talks, with or without film strips, lectures to various organisations, articles in the local press, etc, particularly in regard to smoking and lung cancer.

A regular feature of the child welfare clinic sessions were talks by health visitors to groups of mothers on all aspects of child care, immunisation and vaccination, domestic hygiene, safety in the home, etc. Generally these talks were illustrated by flannelgraph or film strips. Medical Officers and senior public health inspectors gave lectures to women's organisations and guilds. Lectures on food hygiene were given to caterers taking courses at the Municipal College, and the specialist food inspector devoted much time to advising on food hygiene in food preparing and catering premises. The dental officers gave short talks to children in the schools and a visit of senior school girls was arranged to the Manchester School of Dentistry. Several talks on mental health were given by one of the mental health officers and through the medium of the North East Lancashire Association for Mental Health two public lectures were given by psychiatrists.

Articles contributed to the local press included vaccination against poliomyelitis, precautions against influenza, mental health, care of handicapped persons, atmospheric pollution, etc.

Materials provided by the Central Council for Health Education were displayed and distributed at local health authority clinics and other suitable places.

## National Assistance Act, 1948, Section 47.

It was not necessary to proceed under Section 47 of the National Assistance Act, 1948, as amended by the Act of 1951, for the compulsory removal to hospital or other place of persons suffering from chronic disease, or aged and infirm, who were not receiving proper care and attention. Several such persons were persuaded to accept suitable accommodation.

## National Assistance Act, 1948, Part III.

Welfare of the Blind, Deaf or Dumb and other Permanently
Handicapped Persons: - The Social Services Committee is responsible
for carrying out the powers and duties of the Council with respect to
residential accommodation for the aged and infirm and welfare services
for blind, deaf or dumb and other handicapped persons under Part III
and IV of the Act (except Section 41) and the Regulations made thereunder.

"Healey Grange" hostel has accommodation for thirty females. "Whiteacres", with accommodation for thirty-one men was officially opened in April, 1957 and "Gorse Hill", with accommodation for 25 men and women, was officially opened in June, 1957.

The provision of these three hostels enabled the total accommodation in "Moorfields" and the adjoining houses, which are within the curtilage of the General Hospital, to be reduced from 253 to 199. The accommodation in the houses is fully occupied and "Moorfields" cannot be entirely vacated until sufficient additional hostels are built.

### Deaf Persons.

The Social Services Committee and the North and East Lancashire Association for the Welfare of the Deaf co-operate to ensure adequate welfare arrangements for the deaf and dumb of the Borough. A Social Centre for the deaf is provided by the Association. The Authority makes a contribution to the Association, based on the number of deaf persons in the Borough.

Thirty one adult males and thirty adult females were on the register of handicapped persons maintained by the Welfare Authority. One of these was in "Moorfields".

Six deaf and four partially deaf children of school age were in residential special schools at the end of 1957.

# Blind Persons.

The Register of the Blind contains the following: -

Number on Register at 1st January, 1957 Number of new cases during 1957	:::	4	220 25
Re-certified			1
Transfer from other Authorities			2
Deaths during 1957 De-certified	•••		27
Removals from Register during 1957	:::	- 1111	6
Number on Register at 31st December, 195	7		214

The 214 persons on the Register of the Blind on 31st December, 1957 consisted of 76 men, 134 women and four children.

On the Register of Partially Sighted Persons there were 15 men, 42 women and 3 children.

The Authority's Workshop for the Blind, employs the following blind persons:-

10 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Bur	Burnley		Lancs.Cty.		
	Men	Women	Men	Women	9	
Basketry ) Workers Dept. ) Trainees	8 -	-	7 -	And I was to	15	
Knitting ) Workers Dept. ) Trainees	-	6 -	-	4 -	10 -	
TOTALS	8	6	7	4	25	

Thirty six persons were examined by the Consultant Ophthalmic Surgeon during 1957 for the first time, in order to ascertain if they were suitable for inclusion in the Register of Blind Persons. Twenty eight were certified as blind. He also re-examined a number of patients already on the register.

The ages at the time of examination and sexes of the 36 persons were:-

111111111111111111111111111111111111111	Under 40	40 <b>-</b> 44	45 <b>-</b> 49	50 <b>-</b> 54	55 <b>-</b> 59	60 <b>-</b>	65 <b>-</b>	70- 74	75 <b>-</b> 79	80 <b>-</b> 84	85 and over
Males	1	2	-	1	1	1	3	3	2	S TO S	1
Females	1	-	1	1	1	2	4	2	5	6	1

# EXAMINATIONS FOR ADMISSION TO REGISTER OF BLIND PERSONS AND TO REGISTER OF PARTIALLY SIGHTED PERSONS DURING 1957.

No.of Cases	Recommendations	Cau	Causes of Disability				
	in para. (7) of Form B.D.8.	Cataract	ct Glaucoma Fibroplasia		Other	Total Causes	
Lator	(a) No treatment	1	1	-	1	2	
2	(b) Medical treatment	-	1	-	2	3	
6	(c) Surgical treatment	4	1		1	6	
11	(d) Optical treatment	8	1		3	12	
15	(e) Supervision at Hospital O.P. Clinic	10	4	-	11	25	

All patients recommended spectacles obtained them. Those recommended medical and surgical treatment received treatment, apart from those very old persons whose general physical condition made surgical treatment undesirable. Those referred to the hospital out-patient ophthalmic clinic received treatment at the hospital.

Three blind children were in residential special schools. Another blind child was awaiting admission to a residential school, and one was receiving home tuition.

## Nursing Homes

Only one Nursing Home is registered in the Borough. This home, which was opened in 1954, has accommodation for fourteen patients in five rooms, and accepts only medical and chronic sick patients. It has no facilities for the treatment of surgical or maternity cases.

## 80 SECTION XII

#### MENTAL HEALTH SERVICE

The Mental Health Service is under the administrative control of the Medical Officer of Health, and there are three Duly Authorised Officers (two male and one female) who are also Mental Health Workers, employed for the statutory duties under the Lunacy and Mental Treatment Acts and for the care and after-care of patients suffering from mental illness. These officers have statutory duties under the Mental Deficiency Acts, and are responsible for the supervision and care of mental defectives.

#### MENTAL ILINESS.

The Burnley and District Hospitals Group augmented their psychiatric team during the year. A Consultant and two Registrars provide a 24 hour service and an excellent liaison exists with the Mental Health Officers of the local health authority.

Under the existing system it is possible to discuss each individual case with the Consultant Psychiatrist or his Registrar, and for all local patients to be dealt with primarily in the local hospital's psychiatric units. This is a great step forward especially when one considers that very few patients have to be transferred to major mental hospitals. During 1957 only eight Burnley patients were certified under Section 16 of the Lunacy Act.

Admissions both to the designated and non-designated Wards of the General Hospital have been mainly on a voluntary basis.

An evening psychiatric clinic has been set up in the Victoria Hospital to accommodate patients who are working during the day, and this has met with great success.

The officers also visit aged persons suffering from senile deterioration and dementia, and although beds in the psychiatric wards are not usually available, every help is given, using the services of the Social Services Department, and the Home Nursing, Home Help and Health Visiting Services. The Geriatrician of the local hospital group co-operates in every possible way and admits to the chronic sick wards when beds are available, those patients who require constant care and attention.

In the main, after-care visits are welcomed by the patients and a large amount of success has been achieved in this direction. The mental health officers assist patients in their rehabilitation and in their re-establishment in employment and in the community as a whole.

The following examples illustrate the work done during 1957 in after-care and rehabilitation of persons suffering from mental illness.

- Case A A youth agedseventeen years, who had repeatedly attempted to take his life by swallowing safety pins, was admitted to a mental hospital for several months. On discharge he immediately contacted the mental health officer who arranged an interview with the manager of a local laundry. He obtained employment and protective clothing for his job and has settled down excellently. His employers are very satisfied with his work and his family with his behaviour.
- Case B A young man, with marked schizoid tendencies, had spent most of the year in and out of the psychiatric observation unit. His wife, due no doubt to this man's anti-social behaviour, had incurred debts and had no coal. In the house were three young children. Immediate help from neighbours was arranged and the National Assistance Board was contacted and financial aid obtained.
- Case C An unmarried mother with a teenage son was admitted to the psychiatric unit. Because of her peculiar behaviour she had not worked for several years and was in receipt of a National Assistance grant which ceased when she was admitted to the psychiatric unit. Whilst in hospital she wished to buy her son a birthday present and the mental health officer arranged for her to have some money from a voluntary source for this purpose. When she was due for discharge from hospital, the National Assistance Board was contacted and warm clothing and bedding were provided. A period of convalescence for the patient was arranged and her landlord was persuaded to be tolerant towards her in regard to arrears of rent.
- Case D A very pleasant old lady, who was visited regularly by the Mental Health Service because of senility and forgetfulness, was about to be summoned for arrears of rates. The mental health officer immediately explained the situation to her and accompanied her to the chief rating officer where any outstanding debts were promptly paid. On visiting this woman the mental health officer found a lodger at this house who appeared to be an unwelcome guest. The lodger was asked, in the interests of the patient, to find alternative accommodation. He confessed to the mental health officer before leaving that he had stolen her rate money and the mental health officer immediately got in touch with the police. This woman has now settled down fairly well with the aid of a domestic help and the meals on wheels services.

Case E - An old lady in her mid-seventies, living alone and very deaf, was seen by the Consultant Psychiatrist, who recommended a course of treatment as a 'day' patient. The mental health officer escorted her to the hospital daily and although still a little deluded at times, she has settled down fairly well.

Case F - A rather frail apathetic type of individual, who was in business, was before the court for indecent assault on children. He had a course of psychiatric treatment, but because of the nature of his offence his business deteriorated so much that he became bankrupt. Every assistance and advice in regard to legal procedures and the winding up of his business was given to him and the mental health officers are now trying to find him work in order that he may re-establish himself in society.

#### MENTAL DEFICIENCY.

Frequent domiciliary visits are paid to the homes of the mental defectives under Statutory and Voluntary Supervision, especially where the care of imbeciles and idiots is a heavy burden on housewives and where there is difficulty in controlling the defective. These visits of the mental health officers have a steadying influence.

General supervision is maintained over defectives who are out of hospital on licence and reports on these cases are sent to the hospitals at regular intervals.

Help and advice to defectives and their relatives are given and great efforts are made to obtain employment of a suitable nature for those defectives who are able to do some work. With the understanding and assistance of employers some success has been obtained in this direction, as evidenced in the following examples:-

- Case 1 A young man, who was admitted to a mental deficiency hospital on a court order some six years ago, was allowed out on licence provided that suitable work could be obtained for him. The mental health officer found employment for him in a local engineering works. He has since justified the confidence placed in him; his employers are very satisfied and he has now received a second bonus for good work.
- Case 2 A patient admitted to a mental deficiency hospital from prison eleven years ago was considered for release on licence provided suitable work could be found for him. With difficulty the mental health officer obtained employment for him at a local colliery where he could work alongside a relative who could give him confidence. He is working well, is saving some of his earnings and the colliery officials are very satisfied with his work.

- Case 3 A very anti-social and aggressive female defective became increasingly difficult to manage by the people with whom she lived. Although previously considered to be unemployable, the mental health officer found employment for her where she undertook a simple repetitive task. This has had a steadying effect on her and she is now amenable to domestic discipline.
- Case 4 Six adolescent and adult defectives who could not retain jobs in industry were taken into sheltered employment in a workshop for handicapped persons administered by a voluntary committee.

The Workshop for Handicapped Persons is administered by a voluntary committee, on which serve the Medical Officer of Health. the Juvenile Employment Officer of the Ministry of Labour, the Manager of the local office of the National Assistance Board, the Social Services Officer, a member of the staff of the Remploy factory, a hospital almoner and others interested in the welfare of adolescents. It provides work under sheltered conditions for adolescent and young adults who are mentally handicapped and who cannot be employed in open industry. One or two adolescents have both mental and physical defects. At present from ten to twelve young females and seven youths are employed. The females undertake work for local firms, but as most of this work is seasonal, articles such as soft toys, fur mittens, etc., are made for direct sale. The youths are employed mainly on repetitive work for a local die-casting firm. Premises are provided free of charge by the local authority and a grant is received from the Health Committee, but funds are also raised by appeals to other organisations, efforts of a ladies committee, for work done for firms and from sale of articles made.

These defectives are visited frequently and encouraged while at work by the mental health officers. They behave well and show a keenness which is often lacking in this type of person.

Gannow Occupation Centre for mental defectives has accommodation for 50 persons. The majority of those in attendance are children or young persons. At the 31st December, 1957, 38 were in attendance, 16 being Burnley residents and 22 from the adjoining Lancashire County districts. The staff consists of a superintendent and three assistants.

# NATIONAL HEALTH SERVICE ACT, 1946.

# MENTAL DEFICIENCY ACTS, 1913 - 1938.

# LOCAL HEALTH SERVICES

	A STATE OF THE PARTY OF THE PAR	age	Aged and	
Dentionless of acces movement during 1057	M.	F.	M.	F.
Particulars of cases reported during 1957.		1		-
(a) Cases ascertained to be defectives "subject to be dealt with":-		E SO	TELE	joten
Number in which action taken in reports by:-	o sorti	30 10		12.30
(1) Local Education Authorities on children: (i) While at school or liable to	- May 1	Part I	A STORY	
attend school	5	3	-	-
(ii) On leaving special schools	-	d TA	-	-
(iii) On leaving ordinary schools	7-2017	- 38	075 079	240
(2) Police or by Courts	-	- 11	-	-
(3) Other sources	-	000	1	3
TOTAL of 1(a)	5	3	1	3
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground	3	5	1	-
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)		-		-
(d) Cases reported in which action was incomplete at 31st December, 1957 and are thus excluded from (a) or (b)	2000		-	-
TOTAL of 1(a) - (d) inc.	8	8	2	3

	Under	r age		1 16 over
	M.	F.	M.	F.
2. Disposal of cases reported during 1957. (The total of 2(a), (b) and (c) must agree with that of 1(a) and (b) above)	STATE OF	-100	200	IST -
<pre>(a) Of the cases ascertained to be    defectives "subject to be dealt with"    (i.e. at l(a)), number;</pre>	TO SE		15 E E	
(i) Placed under Statutory Supervision	5	3	1	2
(ii) Placed under Guardianship	-	-	-	-
(iii) Taken to "Places of Safety"		-	1 1	1
TOTAL of 2(a)	5	3	1	3
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e. at 1(b)), number:	77.20	243		
(i) Placed under Voluntary Supervision	3	5	1	
(ii) Action unnecessary	-	-	-	-
TOTAL of 2(b)	3	5	1	2
(c) Cases reported at 1(a) or (b) above who removed from the area or died before disposal was arranged	behull in- Li	onl o	97	-
TOTAL of 2(a) - (c) inc.	8	8	2	3
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1957 and admitted to	na del	10700		
(a) National Health Service Hospitals	-	1	1	-
(b) Elsewhere	-	-	-	-
TOTAL	-	1	1	-
				-

The first reported to the second seco	Unde		Aged and	
	M.	F.	M.	F.
4. Total cases on Authority's Registers at 31.12.57.	10/0	70 5		-
(i) Under Statutory Supervision	10 -	15	21	21
(iii) In "Places of Safety"	6	ī	63	54
TOTAL of 4(i)-(iv) inc.	16	16	84	75
(v) Under Voluntary Supervision	3	5	31	24
TOTAL of 4(i) - (v) inc.	19	21	115	99
<ul> <li>Number of defectives under Guardianship on 31st December, 1957, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Included in 4(ii)).</li> <li>Classification of defectives in the Community on 31.12.57. (according to need</li> </ul>	COO E	ALCON INCOME.		-
at that date)  (a) Cases included in 4(i)-(iii) in need of hospital care and reported accordingly to the hospital authority:-  (1) In urgent need of hospital	de la	one co	20 (6)	
care:-				
(i) "cot and chair" cases (ii) ambulant low grade cases (iii) medium grade cases (iv) high grade cases	*1	1	1111	2 -
TOTAL urgent cases	*1	1	15	2

<sup>\*</sup> One male child in Crow Wood Hospital,
Widnes - temporary accommodation pending admission
to a "designated hospital" under the M.D. Acts.

		r age	A'ged and	CONTRACTOR OF THE PARTY OF THE
Complete Committee Committ	M.	F.	M.	F.
(2) Not in urgent need of hospital care:-	1 41	Selv. A	-01	
(i) "cot and chair" case	111		1 -	1 -
(iv) high grade cases	-	-	-	1
TOTAL non-urgent cases	1	-	1	2
TOTAL OF URGENT AND NON-URGENT CASES	1	1	1	4
(b) Of the cases included in items 4(i), (ii) and (v), number considered suitable for:-			2023	10 40
(i) Occupation Centre	9 -	10 -	1 6 -	1 11 -
TOTAL of 6(b)	9	10	7	12
(c) Of the cases included in 6(b) number receiving training on 31.12.57:-				What y
(i) In occupation centre (including voluntary centres) (ii) In industrial centre	6	9	1	1
(administered by Voluntary Committee)	1 - 1	- Total	2 -	3 -
(iv) From a home teacher at home (not in groups)	72.00	10-11	-5	-
TOTAL of 6(c)	6	9	3	4

No. of Reports sent to Mental Defi	ciency	Donor Sin	1 100 10
Hospitals	•••••	96	
No. of visits made to patients' ho	mes etc.	987	
No. of office interviews		104	1 21 2
	Burnley Cases	County Cases	Total Cases
Occupation Centre			
No. of persons on Register, lst January, 1957	18	20	38
No. of new admissions	3	8	11
No. of discharges	5	6	11
No. remaining on Register, 31st December, 1957	16	22	38
Average monthly attendances during year: -	towo Late		
(a) Total on basis of 1 per day	219	333	552
(b) Daily average	14	20	34
Administration of Lunacy and Mental Treat	ment Acts	during the	year 1957
	Burnley	Other Authoriti	
1. No. of admissions to Mental Hospitals		(paz)	
(a) under Lunacy Act	93 130	49 110	142 240
2. No. of discharges from Mental Hospita	ls		
(a) under Lunacy Act	77 121	26 113	103 234
3. No. of patients who died	14	5	19
4. Total number of Burnley patients in 31st December, 1957	Mental Hos	pitals at	234
5. No. of reports sent to Hospitals			223
6. No. of visits made to hospitals, pat			1751
7. No. of office interviews		•••••	782

# SECTION XIII

### AMBULANCE SERVICE.

During 1957, the ambulances made 7,279 journeys, carried 21,893 patients and covered 105,540 miles.

The increases in patients carried and total mileage covered in the last eight years are shown by the following figures:-

Year	Journeys	Patients Carried	Total Mileage
1950	Not available	14,908	98,433
1951	6,447	17,112	97,845
1952	7,186	18,825	107,998
1953	7,860	20,889	111,355
1954	6,916	21,734	106,619
1955	7,067	20,368	108,380
1956	7,175	20,671	108,460
1957	7,279	21,893	105,540

The number of patients carried shows an increase of 1,222 and the journeys increased by 104, but the total mileage was 2,920 miles less than in 1956. The miles per patient carried is 4.8.

During the month of December the installation of a V.H.F. Radio telephone system was completed. It is improving the service efficiency and will reduce to some extent the average number of miles per patient carried.

The number of requests to convey patients to hospitals in the Manchester area continues to be high, but these are in the main to special departments, such as neuro-surgery and genito-urinary units.

Of the total mileage of 105,540, 33% or 35,559 miles were in respect of 531 journeys made to other towns. The average mileage per "out of town" journey being 66.96. Two-thirds of these journeys were to hospitals in the Manchester area, and next in order of frequency were journeys to Blackpool, Preston, Blackburn, Whittingham Mental Hospital and Wrightington Orthopaedic Hospital.

A satisfactory reciprocal working arrangement with the ambulance service of No. 6 Division of Lancashire County frequently avoids duplication of long distance journeys.

Co-operation with general practitioners and the local hospitals continues to be satisfactory and there is now little evidence of any abuse of the service. Notices are displayed in the out-patients departments and elsewhere in local hospitals to inform patients against the unnecessary use of ambulances and why unavoidable delay may occasionally occur in returning them to their homes. The provision of a rest room in Victoria Hospital adjoining the casualty and out-patient departments enables patients to wait in comfort after treatment until ambulances are available to take them home.

At the end of 1957, the fleet consisted of six ambulances and three smaller dual-purpose vehicles, capable of carrying eight sitting cases or four sitting cases and one stretcher case. These smaller vehicles, being more economical, are used largely for the conveyance of out-patients of hospital clinics. No new vehicles were obtained during the year.

The staff consists of one ambulance officer, four shift leaders and sixteen driver/attendants.

#### AMBULANCE STATISTICS FOR 1957.

Abortive and Service Journeys Gas and Air, Oxygen, Blood, etc.,	Air, etc.,	Accident or Emergency		Others		Totals		Mi leage		
	Journeys	Patients Carried	Journeys	Patients Carried	Journeys	Patients Carried	Amb.	Car	Total	
373	821	1374	1393	4711	20,500	7279	21893	69075	36465	105540

# 91 SECTION XIV

# SANITARY CIRCUMSTANCES OF THE AREA

## Water Supply

No changes were made during 1957 in the sources of supply, methods of treatment or distribution of water.

The consumption of water during the year was 1,450,063,484 gallons - approximately forty million gallons more than in the previous year.

The rainfall, as measured at four different points on the gathering grounds, showed an average of 50.90 inches in the year. The lowest amount measured was 48.72 inches and the highest 52.76 inches. The water supplies were ample for the requirements of the Borough at all periods of the year.

Thirty six samples of water were submitted to chemical and thirty seven to bacteriological analyses. These were mainly samples taken from house taps at different parts of the town and represented supplies from the mixed supply of Heckenhurst reservoir and the direct supplies from Cant Clough and Swinden reservoirs. Throughout the year, samples were of excellent chemical quality, and only on a very few occasions, following periods of prolonged rainfall, were bacilli coli present to a very small extent.

# Public Baths

The three public baths contain both slipper baths and swimming baths. Thirty three samples of swimming baths' water were examined bacteriologically and chemically during the year. Efficient chlorination maintained the baths water at a high standard of chemical and bacteriological purity.

# Public Cleansing.

Collection and disposal of refuse. No alterations in methods of collection and disposal were made during 1957.

# Amount of Refuse dealt with during the year ended 31st December, 1957.

					Tons
Refuse coll	ected	•			24,246
Disposal of	Refuse: -				1000
(a)	By Salvage	•••			4,719
(b)	By Combustion		•••	•••	1,721
(c)	Screened dust tipped	, clinker	r, etc.	• • •	10,090
(d)	By controlled	tipping	(Refuse)		7,716
					24,246
(e)	Clinker tippe	d resulti	ing from (	ъ)	553
Recentacles	for Defuce in	ngo dum	ng 1957		

# Receptacles for Refuse in use during 1957.

No. of Premises	No. of Dustbins
30,503	31,372

# General Sanitary Inspection.

Four thousand two hundred and two complaints were received and dealt with.

	No.
Visits to Factories with Mechanical Power	252
" " Factories without Mechanical Power	26
" " Bakeries	483
" " Chip, Fish and Tripe Shops	175
" " Milk and Grocers' Shops	646
" " Ice Cream Manufactories and Shops	100
" "Fruiterers' and Fishmongers' premises	49
" " Butchers, Blood Boilers and Food Preparers	287
" " Cafes, Canteens and Restaurants	357
" " Marine Store and Offensive Trades	14
" " Stable Manure Pits	25
" " Premises where animals are kept	17
" " Common Lodging Houses	37
" "Back-to-Back and Single Dwellings	42
" Tents, Vans etc	42
" " Houses Let in Lodgings	98
" "Other Dwellings	11,339
" " Reported Dirty Dwellings	79
" "Old Property re Alterations	187
" "Premises where Nuisances exist	8,328
" " Alleged Overcrowded Houses	13
" " Colliery Tips	379
Drains Tested	333
No. of Legal Notices Served	621
No. of Preliminary Notices sent out to abate Nuisance	1,405
No. of Verbal Notices given	997
No. of Defects reported to Borough Surveyor	65
No. of Defects Reported to Cleansing Department	399
No. of Defects Reported to Highways Department	1,312
Interviews with Owners, Agents, etc., re Property	903
Interviews with Firemen	185
Inspection re Rats and Mice Infestations	185
Visits to School Premises	46
" " Theatres and Cinemas	31
" "Public Institutions	34
" "Under Shops Act	130
Defects found and dealt with	3,473
Defects remedied during the year	3,228
	-
Defects of various kinds on the books of the Department at	1,783
the end of the year	-,100

#### Legal Notices served during the Year

## PUBLIC HEALTH ACT, 1936 -

	Section	39	-	Unsatis	factory Di	rainage			164
	Section	45	-	Closets	requiring	g repair		•••	43
	Section	75	-	Defecti	ve Dustbir	ns			97
	Section	93			Nuisance				- (0
				of	property	)		0 . 0	162
	Section	44	-	Closets	requiring	g recons	truction	• • •	1
BUI	RNLEY COL	RPOR/	ATIC	ON ACT,	1925 -				
	Section	53 -	- De	efective	Drains	300			154

#### SMOKE ABATEMENT.

During the year two hundred and thirty five observations of one half hour duration were taken of factory chimneys, and the results notified to the firms concerned.

Twenty letters were sent in accordance with the Council's resolution which is to the effect that the Town Clerk shall communicate with those firms whose chimneys emit an amount of "moderate" smoke in excess of six minutes, or "black" smoke for more than one, but less than two minutes.

#### Results of Observations.

	Black	Moderate	Light or none
Total smoke in minutes	 28	611	6411
Average smoke in minutes	 0.12	2.60	27.28

The Clean Air Act, 1956, has four main purposes:-

- (a) to prohibit the emission of dark smoke from chimneys, railway engines and vessels, subject to certain qualifications (Sections 1, 2, 19, 20);
- (b) to prohibit the installation of new industrial furnaces unless they are capable, so far as practicable, of being operated without emitting smoke (Sections 3 and 4);
- (c) to require that the emission of grit and dust from existing industrial furnaces shall be minimised, and that new industrial furnaces burning pulverised fuel or large quantities of other solid fuel, shall be fitted with gritarresting equipment (Sections 5 and 10); and
- (d) to empower local authorities by order, subject to confirmation by the Minister, to declare "Smoke Control Areas" in which the emission of smoke from chimneys will constitute an offence (Sections 11 and 15).

Provisions relating to smoke control areas, smoke from furnaces, etc., came into operation on the 31st December, 1956. The remaining provisions of the Act came into operation on the 1st June, 1958.

In October, 1956, a report was presented to the Health Committee on the procedure for declaring smoke control areas. It was also pointed out that in the Corporation estates built during recent years all the properties are already equipped with smokeless fuel grates, and that these estates could be dealt with either by making orders or under tenancy agreements which would not require the complicated procedure entailed in the making of an order. It was felt that at the present time it does not seem possible to select a central area of the town in respect of which an order could be made declaring it to be a smoke controlled area, because there are a considerable number of properties in the central area included in the Slum Clearance Programme which should first be cleared and re-development proposals implemented in order that the area could be considered for smoke control purposes.

A further report on the implementation of the Act was submitted to the Health Committee in December, 1956, and in June, 1957 the Committee recommended that a scheme for five smoke control areas should be included in the Programme of New Works and Improvement for the five year period commencing on 1st April, 1958. This scheme was not at that time included, but further consideration was given

to the proposal in June, 1958, when the General Purposes Committee approved in principle the proposals of the Health Committee to establish smoke control areas and indicated the priorities, which will enable some Corporation Housing Estates to be dealt with before a central area of the town.

In August, 1957, an advisory panel was established to facilitate the efficient implementation of Section 3 of the Act, which requires that new furnaces shall be, as far as practicable, smokeless and approved by the Local Authority. The panel consists of the Medical Officer of Health, the Borough Surveyor, the Chief Public Health Inspector, the Public Analyst, an expert in industrial fuel efficiency and a consulting engineer. As yet it has not been necessary for the panel to be convened.

In June, 1958, it was resolved that, subject to the approval of the Ministry of Housing and Local Government, a Building Byelaw under Section 24 of the Act be adopted. The adoption of this Byelaw will facilitate smoke abatement in future by providing that, with certain exemptions, any new building erected after the date of operation of such Byelaw would be provided with heating and cooking appliances of types which could be operated without smoke.

# PREMISES AND OCCUPATIONS CONTROLLED BY BYELAWS OR REGULATIONS.

# Common Lodging Houses.

At the end of the year six houses were registered, the total accommodation being two hundred and thirty two males. Thirty seven visits were made and eleven defects found.

# HousesLet in Lodgings.

Ten houses in Burnley were registered as Houses Let in Lodgings, two less than in the previous year, which are divided in separate tenements. as follows:-

Tene	ments.		Occupants.						
One-roomed			70	ADULTS - Males	76				
Two-roomed		•••	3	Females	35				
Three-roomed			13	Infants under one year	2				
Four-roomed		• • •	8	Children, aged 1 to 10 years	9				
			94		122				

Visits paid			•••	98
Defects found	39			47
Defects remedied				15
Verbal and Informal Notices		120,001		24

### Offensive Trades.

The following is a list of the Offensive Trades carried on in Burnley: -

Gut	Scr	aper	Your		•••			•••	•••	1
Mar	ine	Stor	es	• • •			•••	· · · ·		3
Fel	lmon	ger								1
Tal	low	Melt	er							1
Inspection	s	•••	14	Defects	found	•••	18	Verbal Notices	and Info	rmal 5

# Rag, Flock and Other Filling Materials Act, 1951.

This Act requires the licensing of premises where rag flock is manufactured and the registration of premises where filling materials are used in the production of upholstered articles.

There is one manufacturer of rag flock in the Borough and twelve premises where filling materials are used in the upholstery trade. These have all been licensed and registered.

# Stable Middens.

No.	of	Midden	ns		22	Insp	ections	• • • •		25
No.	of	times	manure	pits	sprayed	to	destroy	larvae	of	-
	flie									82

# General Inspection of Working Class Dwellings.

Forty two visits were paid to back-to-back and single houses, ninety eight to houses let in lodgings and eleven thousand, three hundred and thirty nine to other dwellings.

# Dirty Houses.

Forty-nine houses were suspected of being dirty, and ten were found to be so on inspection. Warnings were given on each occasion and it was not necessary to take legal action.

#### Sanitary Accommodation.

The total number and types of closets in the Borough at the end of 1957 are as follows:-

Clean Water Closets		••••	 	21,532
Waste Water Closets			 	14,965
Latrines (68) with Clos	sets		 	301
Privies			 	122

In only seven dwellinghouses (apart from farms) having clean water closets, do the closets drain to cesspools.

During the year assistance was given in connection with 89 conversions of waste-water closets.

The total number of closets not on the water-carriage system is 122 of which 116 are pails and 6 tanks. The Cleansing Department is responsible for the emptying of 90 of these.

## Shops Act, 1950 (Section 38).

No. of Combined Shops	and Dwel	linghous	es		
in the Borough	•••		•••	•••	1,451
No. of Shops only					737
Total inspections of	shops			13.00	976
Inspections specifica	ally for	purposes	of Sect	ion 38	130

# Camping Sites.

There are no seasonal camping sites within the Borough and no caravans are used as dwellings.

# Inspection of Bakeries.

During the routine inspection of premises in which food is prepared 483 visits were made to bakehouses. The standard of cleanliness of these was found to be generally satisfactory.

# DETAILS OF INSPECTION AND DEFECTS FOUND: -Number on Register 118 No. of Inspections made 483 Verbal Notices 96 Informal (written) Notices 24 Number of Defects 189 Fish and Chip Shops. No. of fish frying businesses at 31st December, 66 No. of inspections 175 Defects found 37 Verbal Notices Informal (written) Notices

# Prevention of Damage by Pests Act. 1949.

Three rodent operatives work under the supervision of the Chief Public Health Inspector, who is the official responsible for the administration of the Prevention of Damage by Pests Act, 1949.

The occupiers of premises are legally responsible for clearing their buildings of rats, but the rodent operatives carry out the treatment on request. No charge is made for private dwellings, but actual time and cost of materials are charged in the case of business premises.

Applications for assistance received Visits paid by rodent operatives to dwellinghouses	419
Visits paid by rodent operatives to business  premises Visits paid by rodent operatives to Local Authority	2,908
premises	555 185

During the year the sewers received two maintenance treatments for destruction of rats. Two thousand six hundred and ninety seven manholes were baited and of these 523 showed pre-bait takes, 373 of which were complete and 150 partial takes.

Co-operation has continued to be forthcoming from the officers of the Ministry, who have expressed their satisfaction at the manner in which the work has been carried out. The cost of the sewer treatments during the year was approximately five hundred and thirty-nine pounds, of which half is recoverable from the Ministry and half from the Sewers Department.

### Sanitary Conditions of Schools.

All the schools in the Borough are supplied with water from the town's mains.

The Public Health Inspectors made forty six visits to schools, mainly to inspect the sanitary conveniences.

The schools were closed one day earlier for the September holiday period, on account of a sudden epidemic of Virus A. influenza.

### FACTORIES ACT, 1937 and 1948.

INSPECTIONS for the purpose of provisions as to health (including inspections made by Public Health Inspectors) during 1957.

Premises	No.on Register.	The second leaves of the secon		No. of Occupiers prosecuted.
(1)	(2)	(3)	(4)	(5)
(i) Factories in which Sect- ions 1,2,3,4 and 6 are to be enforced by Local Authorities	174	509	25	their garden
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	511	252	16	solices stary stary
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	The Street	The second	Steepane	A STATE OF THE PARTY OF THE PAR
TOTAL	685	761	41	-

# 2. CASES in which DEFECTS were found.

Particulars	The State Control	Number of defect	Number of cases in		
Deline personal	Found	Remed- ied	Refer To H.M. Insp.	By H.M. Insp.	which pros- ecutions were instit- uted.
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	28	19	THE WALL	1	201
Overcrowding (S.2)	2-000	Sen # Dan	1 11 - 11	-	The state of the s
Unreasonable temperature (S.3)	07_	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	The same of the sa
Ineffective drainage of floors (S.6)	_	_	100	-	-
Sanitary Conveniences	House	under the	Belincer	seapod In	tol odf
(S.7) (a) Insufficient	2	2		3	F 1387-
(b) Unsuitable or defective	30	21	1021/12 His	16	Montan search
(c) Not separate for sexes	Srige	Te scall to	d-01_350	d to 20000	Coto2
Other offences (not incl. offences relating to					attent.
outwork)	28	24	3-03-30A	d to technic	Later
TOTAL	88	66	-	20	The state of the s

OUTWORK (Sections 110 and 111) - NIL

#### SECTION XV

#### HOUS ING

	Types of I	Dwellinghouse	in	the	Borough	at	the	end	of	1957:	-
--	------------	---------------	----	-----	---------	----	-----	-----	----	-------	---

Houses	with through ventil	ation		•••		27,708		
Combined	d houses and shops					1,451		
Houses	without through ven	tilation:	-					
(b) Sin (c) Sin	ck-to-back houses  ngle houses  ngle-roomed dwellin  llar dwellings	gs	•••		•••	503 88 5 1		
			Tot	tal	•••	29,756		
Houses Inspected and Recorded.								
	al houses recorded a dated Regulations as					15,290		
Houses without through ventilation.								
Total number of back-to-back houses, single houses, single roomed dwellings and cellar								
dwellin	ngs	•••	•••	•••		597		
	umber of back-to-ba closed or demolish		Control of the last of the las	•••	•••	22		

## Slum Clearance Programme.

Further progress was made during the year in connection with the Council's Slum Clearance Programme. Official representations were made to the Housing Committee under Sections (25) 1 of the Housing Act, 1936 and (42) 1 of the Housing Act, 1957, and the following areas were declared to be Clearance Areas:-

Gannow Walk (Nos.1 and 2), Newport Street, Greenhill Yard (Nos.1 and 2), Mount Pleasant (Nos.1 and 2), Dugdale Court, Cog Lane (No.1) and Stuttard Street.

The total number of houses included in the above areas is one hundred and fifty seven.

A Public Inquiry was held in October of 1957 in respect of Newport Street and Mitre Street Areas. As a result of the Inquiry the Compulsory Purchase Order made in respect of the Mitre Street Area was modified to exclude nine properties, of which eight were included in a Clearance Order. The Minister's confirmation of the Newport Street Area has not yet been received.

Confirmation by the Minister of Housing and Local Government was received in respect of Gannow Walk (Nos.1 and 2), Guy Court, Peace Street and Mitre Street (modified as stated above) Compulsory Purchase Orders. At the request of the Minister, a Clearance Order was substituted for the Arch Place Compulsory Purchase Order and was duly confirmed.

Individual Closing and Demolition Orders were made in respect of thirty six houses.

# INDIVIDUAL UNFIT HOUSES

(Action taken under the Public Health and Housing Acts)

1.	Inspections	
	(1) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	1264
	(2) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	241
	(3) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1023
II.	Remedy of Defects during the year without service of Formal Notices	
II.	Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers  Action under the Statutory Powers during the year:-	1106
	A. Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.  (1) Number of dwellings in respect of which notices were served requiring repairs  (2) Number of dwellinghouses which were rendered fit after service of formal notices:-	Nil
	(a) By Owners	Nil
	(b) By Local Authority in default of owners	Nil

В.	Proceedings under the Public Health Acts:	
	(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	370
	(2) Number of dwellinghouses in which defects were remedied after service of formal notices -	
	(a) By Owners	273
	(b) By Local Authority, in default of owners	67
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936, and Section 16 of the Housing Act, 1957,	
	(a) Number of dwellinghouses in respect of	
	which Demolition Orders were made	5
	(b) Number of dwellinghouses demolished in pursuance of Demolition Orders	5
	Number of persons displaced (under C(b))	16
D.	Proceedings under Section 12 of the Housing Act, 1936, and Section 18 of the Housing Act, 1957,	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders	
	were determined, the tenement or room having been rendered fit	Nil
E.	Proceedings under Section 11 of the Housing Act, 1936 as amended by Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953, and Section 17 of the Housing Act, 1957,	
	(1) Number of dwellinghouses in respect of which Closing Orders were made	21
	Number of persons displaced (under E(1))	57
	(2) Number of dwellinghouses in respect of	
	which Closing Orders were revoked and	Nil

F.	Procee	dings un	der Housin	ng Act, 1949	· Tally replace	
				under Secti	on	Nil
	Cl	osing Or	ders subst	etermined and ituted unde	r	Nil
Eradic	ation o	f Vermin	•			
hydroc	ected b	y insect	icides.	It was nec	were Council essary to dis e family pric	infest by
			HOU	SING STATIS	TICS	
			Year en	ded 31st De	cember, 1957	
Number	of hou	ses erec	ted during	the year:-		
	By Cor	poration	44		•••	182
	By pri	vate ent	erprise			11
	With S	tate ass	istance un	der the Hou	sing Acts	As - 1936,
		Tota	al number	erected	•••	193

#### SECTION XVI

## INSPECTION AND SUPERVISION OF FOOD.

## Meat Inspection.

All slaughtering of livestock for human consumption within the Borough is carried out in the Public Abattoir, there being no private slaughterhouse.

No steps have yet been taken to proceed with a scheme for a new slaughterhouse to serve East Lancashire, as envisaged in the Report of the Inter-Departmental Committee on Slaughterhouses which was published in 1955. Further consideration of this matter is left in abeyance until new legislation on the distribution of slaughterhouses is passed. In the meantime the abattoir, which is of out-of-date design, is maintained in as high a hygienic standard as possible. Improvements carried out during the past three years, together with those to be put into effect in 1958, will enable all carcases to be run into separate cooling rooms immediately after dressing.

Most meat traders in the locality now purchase dressed carcases from wholesalers who undertake the slaughtering. The booth type of slaughter rooms which exists in the abattoir, is not suitable for these conditions of trading, as it is impossible to adequately separate the slaughtering and dressing of carcases from the carcases displayed for sale. Line slaughtering not only occupies less space, but permits of meat being produced under more hygienic conditions and enables it to be more readily removed to adjoining cooling or chill rooms, where retailers can make their purchases.

During 1957, 31,630 head of livestock were slaughtered in the abattoir. This increase of 4% over the preceding year would appear to be the result of demand from the consuming public for smaller and leaner joints. This results in unfinished animals being slaughtered.

Tuberculosis was found in 42% of the cows slaughtered in the abattoir. This is a slight decrease on the figure for the previous year. This cannot be regarded as an indication of the incidence of tuberculosis in dairy herds in the surrounding locality, as on account of the campaign to eradicate the disease from dairy herds, cattle which react to the tuberculin test are sent from a wide area by Ministry of Agriculture officials into Burnley abattoir for slaughter and post mortem examination. Farmers also sent reacting cattle for slaughter to their own organisation, the Fat Stock Marketing Corporation, which are the largest slaughterers of livestock in Burnley.

For the second year in succession no congenital tuberculosis was found in calves.

The incidence of cysticercosis was twice that of the previous year, being found in 20 animals. This parasitic infection, which may occur as a tape worm, taenia saginata, in the human alimentary tract, has its cystic intermediate stage in the muscle tissue of cattle. In each case diagnosis was confirmed by microscopic examination of the cysts. Of the 20 infections, eleven were in cattle received directly from Northern Ireland, six were in cattle purchased from neighbouring fatstock markets and which may have been imported in the first instance from Ireland as "stores" and three were in cows.

Considerably fewer casualty animals are now received in the abattoir than during the years when meat was controlled. During the last two years they numbered about twelve a year, whereas the numbers during the ten years prior to de-control of meat averaged over 100 a year. There is no reason to believe that casualties among animals on farms have decreased to that extent, and as the value of livestock has increased over a period of years, it is probable that casualty beasts are sent to small private slaughterhouses in rural areas where inspection of all carcases is not carried out. It is, therefore, very desirable that stamping of all carcases by local authority meat inspectors at the time of inspection should be a statutory requirement.

Systematic anti-mortem and post-mortem examination of all livestock is carried out by the meat inspectors. Labels, in quadruplicate, each bearing a serial number, are affixed by the slaughtermen to the head, offal and carcase of each beast and pig during the dressing process. This ensures correct identification of the various parts during inspection. After inspection all carcases and edible offals passed as fit for consumption are stamped "Burnley - Home Killed".

Particulars of animals slaughtered at the Burnley Abattoir during 1957 and the incidence of diseased conditions found on post-mortem examination are shown on the following page.

		g 1, g		F-10-10-1			1000		7
		Carcases general- ised and totally con- demned		W. S.	-	-	0000 CO		
	osis	Carcases submitted to treatment by refrigeration	AL DE	71	3	The state of	13 70 0	10-11	80
	Cysticercosis	Carcases of which some part was con-		17	3		30250		8
		Total carcases infected	-	71	3	- 60	1000		83
TIONS	6 00	Percentage of animals inspected	11000	21.13	47.52	29.55	0.9I	6,30	5.28
ASED CONDIT	Diseases other than Tuberculosis	Carcases of which some part or organ was con-	1	648	157	ৱ	195	139	1641
TYPES OF DISEASED CONDITIONS	than 1	Whole carcases con-		N	18	83	8	777	4
4	12.80	Percentage of animals inspected	-	5.81	42.17			1,16	2,11
	Tuberculosis	Carcases of which some part or organ was core		228	380	-		88	634
	2	Whole carcases con-		9	†77			4	34
No.of	slaugh- tered	and examined		9201	958	132	23926	2586	31630
		and B jose S .	Horses	Cattle exclud- ing Cows	COWS	Calves	Sheep and Lambs	Pigs	TOTAL

Although the number of animals slaughtered in the Abattoir during 1957 was more than in 1956, the total amount of meat rejected as unfit for consumption decreased by about 50%. This is due to a reduction in the incidence and severity of tuberculosis and to the fact that fewer casualty animals were received.

Details of the amount rejected in 1957 are as follows: -

	Tons	Cwts.	Qrs.	Lbs.
On account of tuberculosis	10	9	2	11
On account of other conditions	6	16	1	25
TOTAL	17	6		8

All condemned meat is coloured with acid green dye before leaving the abattoir, and is collected by a reputable firm of meat and bone meal manufacturers, by whom it is sterilised.

### Food and Drugs Act, 1955 and The Food Hygiene Regulations, 1955.

During the course of visits to food premises, other than the Abattoir, the following foodstuffs were examined and found to be unfit for human consumption:

Meat, fresh	211 lbs.
Meat, frozen and imported	819 lbs.
Meat, tinned	1,337 lbs.
Fish, fresh	1,556 lbs.
Fish, tinned	80 lbs.
Vegetables, fresh	280 lbs.
Vegetables, tinned	1,271 lbs.
Soups, tinned	149 lbs.
Eggs, frozen liquid	14 lbs.
Milk, tinned	111 lbs.
Cheese	ll lbs.
Jams	59 lbs.
Sauces	23 lbs.
Bacon and Ham	685 lbs.
Fruit (tinned)	2,092 lbs.
Ice Cream	157 lbs.
Coffee, Sugar, etc.	7 lbs.
Coconut (dessicated)	50 lbs.
	27

Total weight 3 tons 19 cwts. 2 qrs. 8 lbs.

Meats are disposed of for meat and bone meal manufacture, other foods such as fish are disposed of for pig feeding, after boiling, and the remainder, such as canned foods, are destroyed in the local authority's incineration plant.

### Milk Supply.

About 9% of the milk supply of the Borough is now of designated quality. Although the incentive bonus paid by the Government to producers has stimulated the production of tuberculin tested milk, the increase in designated milks has to a large extent resulted from the demand of the consuming public who have become "clean milk" conscious.

It is to be regretted that two producer-retailers in the Borough still continue to produce and retail undesignated milk. Samples of the milk from one of these farms in the early part of 1957 were found to contain bovine tubercle bacilli, and notices requiring heat treatment of the milk were served until the infection was eliminated from the herd.

It is anticipated that the Ministry of Agriculture, Fisheries and Food will commence a survey of an area of East Lancashire adjoining and including Burnley during 1958, which will eventually lead to the area being included in an Order making it a Designated Milk Area.

Raw undesignated milk which is forwarded by producers to local pasteurisation plants is also sampled in the course of delivery. Of 67 such samples examined biologically during the year under review, two were found to contain tubercle bacilli.

Particulars of samples of milk examined biologically for tubercle bacilli are as follows: --

### (a) In the course of delivery to consumers: -

	No. examined.	No.found positive.
Undesignated Milk	5	1
Tuberculin Tested (Farm bottled)	35	Nil

(b) On delivery from farms to pasteurising	plant:-	
	No.examined.	No.found positive.
Undesignated	67	2
Tuberculin Tested	62	Nil
Examination of Milk for Cleanliness.		
All milk retailed in the Borough is dibottles. All milk supplied to children in t		
Details of samples taken in the course of dexamined for cleanliness.	delivery to cor	sumers and
	Section 1 Control of the Control of	No.found insatisfactory
Tuberculin Tested (Farm Bottled)	390	36
Tub erculin Tested (Pasteurised) Pasteurised	38 61	ī
Sterilised	25 24	11
	24	**
Milk and Dairies Regulations, 1949.		
No. of Registered Distributors of Mil shops retailing sterilised milk)		. 424
No. of premises and vehicles inspected		. 197
No. of infringements found	• • • • • • • • • • • • • • • • • • • •	. 29
Milk (Special Designations) (Raw Milk) Regula	tions, 1949.	
Dealers' and Supplementary Licences fo Tuberculin Tested Milk		. 26
Milk (Special Designations) (Pasteurised and Regulations, 1949.	Sterilised Mil	<u>k)</u>
Pasteurisers' Licences		1
Dealers' and Supplementary Licences, P	asteurised Mil	k 24

Dealers' and Supplementary Licences, Sterilised Milk

### DISEASES OF ANIMALS ACT, 1950. (Duties of Local Authority)

It was not found necessary to institute any legal proceedings for contravention of the provisions of the Act or any of the Orders made thereunder, during the year under review.

Sheep Scab Order, 1938 - No action was necessary under this Order during 1957.

Swine Fever Orders - In consequence of sporadic outbreaks of swine fever early in the year, the Ministry of Agriculture, Fisheries and Food re-introduced for a period the Infected Districts Restriction of Movement Orders of 1956 and 1958, which prohibited the sale of pigs atfatstock auctions and movement between different premises except on licence. This enables possible contact animals from an outbreak to be readily traced, isolated and examined for evidence of the disease.

One suspected outbreak was investigated by the Veterinary Officer, but not confirmed.

Foot and Mouth Disease Orders, 1938/54 - No incidence of foot and mouth disease occurred to require restriction of movement of livestock within the Borough. A number of possible contact animals were received at the abattoir but these had been slaughtered before the existence of the disease at the primary centre had been suspected. Thorough disinfection of the lairages was the only action necessary.

Anthrax Order, 1938 - No cases of anthrax occurred within the Borough. It was suspected but not confirmed in one bullock, one pig and one horse.

Fowl Pest Order, 1938 - Two suspected outbreaks of fowl pest were investigated, but were not confirmed on further investigation at the Ministry's laboratory. Visits are made from time to time by the local authority's officers to the premises of poultry dealers to ensure that crates used for the conveyance of live poultry are properly cleansed and that correct records of movement are kept in accordance with the requirements of the Regulations.

### Tuberculosis Orders, 1938/46.

The Veterinary Officer, acting for the Ministry of Agriculture, Fisheries and Food carries out diagnostic investigations at farms in the Borough and the adjoining rural area when infection is found present in samples of milk. Two such investigations were undertaken during the year and four animals were slaughtered under the provisions of the Orders.

In consequence of the increasing change over of herds to tuberculin tested, the work under these Orders diminishes year by year.

### PET ANIMALS ACT, 1951.

This Act regulates the sale of pet animals of all types and prohibits the carrying on of any such business except under licence granted by the local authority. Eleven licences were granted or renewed during the year. The holders of licences are required to maintain a high standard to ensure the welfare of the animals which pass through their hands and that no nuisance is caused to the occupiers of adjoining property. No contraventions of the conditions of the licences occurred.

### Ice Cream.

### Bacteriological Examination

Thirty samples of ice cream were submitted for bacteriological examination during the year, and the following results were returned:-

The second that the second	Met	hylene Blue	Test	Little
Grade	1	2	3	4
No. of samples in each Grade	17	10	2	1

On each occasion in which the methylene blue test showsthat a sufficiently good bacteriological standard is not being attained by firms manufacturing ice cream locally, investigation is made and advice given at the place of manufacture. Firms manufacturing outside Burnley are informed of unsatisfactory laboratory reports and notification is also sent to the local authorities in whose areas the ice cream is manufactured, so that similar investigations can be made. In all instances in which samples are reported to be of grades 3 or 4, further samples are taken, after the necessary investigations are made, to ensure that improvement in the standard has been effected.

Three local firms manufacture ice cream and all use the Hot Mix Method.

### Food Premises.

(1) The	types of Food	Premises in	n the Boro	ugh are	1-
	Bakeries	000 01		•	118
	Grocers				390
	Greengrocers	7.7.7			61
	Butchers and			BUES Y	158
	Fishmongers				29
	Cooked Meat M				46
	Fish and Chip				66
	Canteens, kit				79
	Cafes and Res				64
	Hotels, Licen				167
	Manufacturers				7
	Retailers of				00
	the three ma		AND DESCRIPTION OF THE PARTY OF		249
	one onee ma	ilui ac tui er i	3)	•	24)
(2) Nam	hen of Food Dr	amicac maci	at seed in	a one	
(2) Null	ber of Food Pr	Food and Da	mag Act	1055	
732	cluded in (1) a	horra	rugs Act,	1722	
(11)	cruded in (1) a	bove)			
	Putch one were	factorian .		-2/	
	Butchers manu		sausages a	na/or	07
	potted meat		•••	000	91
	Cooked Meat M		The second second		11
	Shopkeepers w			1	
	quantities			0.0	43
	Retailers and	Manuractur	rers of		
	ice cream		0 • 0	000	249
		the persons			
		TOTAL	0.0	000	394
					_
					070
(3) Num	ber of inspecti	ons of Food	d Premises		
1 01000	only only married	mode at a	A SA DEPARTMENT OF THE	Lange .	
	Meat and other	Cooked Fo	oods	000	250
	Ice Cream		000	• • •	100
		named to the owner, the	onen ada a	Adda a	-
		THE REAL PROPERTY.			
		TOTAL		000	350

### Food Hygiene.

The efforts which have been directed to the improvement of the standards of hygiene, the maintenance of cleanliness and where necessary the installation of additional washing equipment, have been continued during 1957.

The kitchens and toilet accommodation attached to cafes, restaurants, hotels, school canteens, hospitals, etc., have been kept under regular supervision by the public health inspector whose duties are solely in connection with food hygiene.

Frequent inspections were made of all other types of food preparing premises and in particular of shops in which open food is sold. Considerable progress has been made in the provision, where necessary, of additional wash hand basins and sinks for the cleansing of utensils. Practically all butchers' shops are now satisfactory in this respect and in the few instances in which the standards are considered not to be in conformity with the Food Hygiene Regulations, discussions with representatives of the Burnley Butchers' Association have ensured that these will be rectified in the near future.

The principal difficulty in enforcing hygienic standards is experienced in small one-roomed general merchants' shops, usually attached to cottage-type property, found in side streets. These frequently sell small quantities of open food in the form of cooked meats, and facilities for washing hands and equipment cannot readily be placed in the shop portion of the property. In some of these refrigerated storage is not provided and frequent supervision is necessary to ensure that open food is not kept in the part of the property in which housework is performed.

Special attention was directed to conditions in public houses and working men's clubs and now snacks, such as meat pies and sandwiches which are purveyed, are either individually wrapped or kept suitably covered.

The provision of an additional covered food market, with stalls, to replace the unsatisfactory stalls in the Open Market, will unfortunately not be undertaken until 1962-63. It is difficult to persuade food traders, particularly those in proximity to the Market, to conform to the Food Hygiene Regulations, when the open stalls provided by the local authority do not do so.

The proposed regulations to require hygienic conditions in slaughterhouses, when introduced, will be of considerable value in ensuring cleanliness of meat during the course of its production,

as it is at this stage that contamination frequently occurs.

The admission of cats and dogs into food premises and slaughterhouses should be made a statutory offence.

Details are given elsewhere in this report of proceedings which were instituted for non-compliance with the Food Hygiene Regulations and the Food and Drugs Acts. In one instance unsound and unopened tins of ham were stolen by an employee from the premises of a firm of bone meal manufacturers, which had received them from another town. They were offered for sale to a cafe proprietor. The latter reported the matter, which otherwise might have had serious consequences. This illustrates the need for legislation to make compulsory the colouring with "acid green" of all meat which is unfit for human consumption.

Analysis of Samples of Foodsand Drugs taken during 1957.

Nature of Sample	FORM	AL	INFO	RMAL	TO	TAL
Nature of Sample	Genuine	Adult- erated	Genuine	Adult- erated	Genuine	Adult- erated
Aspirins		1	2		2	and love
Baking Powder Beef and Kidney Pie Beef Stew Beer Biscuits Breakfast Fingers Butter Butter Cake		1	1 6 4 3 1 6 1	2	1 6 4 3 1 6 1	2
Cheese Chicken (minced) Chicken and stuffing Chocolate Christmas Pudding Cod Liver Oil Coffee		AND CONTRACTOR	2 1 2 1	1	2 1 2 1 1	1
Coffee and Chicory Cough Candy Cough Mixture Crab (tinned) Cream Cream cakes Currants Currie Powder			1 2 1 1 1	1 1	1 2 1 1 1	1 1 1
Fish Cakes Fish Paste Flour		1	2 3 1	1	2 3 1	2
Ginger Ground Almonds	Parent o	Red !	1	Cantion a	1	Translat
Honey Herbal Candy Haliborange		ma Brain	1 1 1		1 1 1	SEASON (Print
Ice Cream	ment of	1	23	6	23	7
Carried Forward	1	2	73	15	73	17

	FOR	MAL	INFO	RMAL	TOT	AL
Nature of Sample	Genuine	Adult- erated	Genuine	Adult- erated	Genuine	Adult- erated
Brought forward		2	73	15	73	17
Jam Jellies	Try and	The same	3 3		3 3	entire a
Koray Tablets			1		1	A DECEMBER
Lard	hard ye			1		1
Margarine Marmite Marz-Mix Marzipan Meat Paste Meat Pie Milk Milk (Evaporated) Milk (Dried) Milk (Sterilized) Minced Beef and Dumplings Mincemeat	98	6	2 1 1 4 1 232 2 1 1	4	2 1 1 4 1 330 2 1 1	10
Orange Juice  Pepper (White) Popcorn Potted Meat Processed Peas Pudding Mixture	. 1	HEND OF	1 1 1 1 1	1	1 1 1 1 1 1	1
Sage Sage and Onion Stuffing Salmon (Paste) Salmon (Spread) Salmon (Tinned) Sausage (Beef) Sausage (Pork) Shortcake Soup (Powder) Soup (Tinned) Steak (Tinned)	I	STATE AND STATE	1 2 1 35 5 1 4 7	2 4 3 2	1 2 1 35 5 1 4 7	2 4 3 2
Carried Forward	98	8	391	32	489	40

Nature of Sample	FORMAL		INFOR	MAL	TOTAL	
the serroll morns of	Genuine	Adult- erated	Genuine	Adult- erated	Genuine	Adult- ered
Brought forward	98	8	391	32	489	40
Suet Sugar Sweets	P TOTAL	TO STATE OF	1 1 12	1	1 1 12	1
Tonic Water	no mercer on	Mace	1		1	Chicken's
Vinegar Vegetable Concentrate	coliumo es Sob halfor	Dispersion of the Control of the Con	2	The second	2	COMEN CO
Wheat Germ Wine	o reminer	uned	3 2	The second	3 2	er sero
Yeast (Dried) Yeast Tablets	ton value	o by o by orac	1		1	e0 nase2
de la constantina della consta	98	8	416	33	514	41

### PARTICULARS OF FORMAL SAMPLES ADULTERATED OR BELOW STANDARD.

Sample	Result	Action Taken
Fish Paste (Salmon)	Deficient of salmon.	Manufacturers ceased production.
Ice Cream	Deficient of fat.	Manufacturer cautioned.
Milk	Contained added water.	Producer prosecuted.
Milk	Deficient of fat.	Producer cautioned. Further samples taken and found to be satisfactory.
Milk	Deficient of non-fatty milk solids.	Producer cautioned. Further samples taken and found to be satisfactory.
Milk	Deficient of non-fatty milk solids.	Producer cautioned. Further samples taken and found to be satisfactory.

### PARTICULARS OF INFORMAL SAMPLES ADULTERATED OR BELOW STANDARD.

Sample.	Result.	Action taken.
Beef Stew.	Contained cereal filler.	Meat paste sold in error for stew. Vendor cautioned.
Beef Stew.	Contained cereal filler.	Vendor cautioned.
Chicken (minced).	Deficient of chicken.	Manufacturer cautioned.
Chicken and stuffing.	Deficient of chicken.	Manufacturer cautioned. Description changed to sage and onion savoury.
Cough Candy.	Devoid of medicinal properties.	Vendor cautioned for using misleading description.
Crab (tinned).	Deficient of crab.	Manufacturer cautioned.
Cream Cakes.	Contained immitation cream.	Vendor cautioned. Required to display notice indicating nature of filling.
Fish Paste.	Deficient of fish.	Formal sample taken.
Flour.	Deficient of Creta Praeparata.	Manufacturer cautioned.
Ice Cream (5 samples).	Deficient of fat.	Manufacturers cautioned. Further samples taken and found to be satisfactory.
Ice Cream.	Deficient of non-fatty solids.	Manufacturer cautioned. Further sample taken and found to be satisfactory.
Lard (refined).	Contained extraneous matter.	Vendor cautioned. Sale discontinued.
Milk (2 samples).	Deficient of fat.	Producer cautioned.
Milk (2 samples).	Deficient of non-fatty milk solids.	Producer cautioned.
Potted Meat.	Contained cereal filler.	Manufacturer cautioned.

Sample.	Result.	Action taken.
Salmon Paste.	Deficient of Salmon.	Manufacturer cautioned.
Salmon Paste.	Deficient of Salmon.	Vendor cautioned. Description altered to Fish Paste (Salmon).
Sausage (Beef) (4 samples).	Deficient of meat.	Manufacturer cautioned. Further samples taken and found to be satisfactory.
Sausage (Pork) (3 samples).	Deficient of meat.	Manufacturer cautioned. Further samples taken and found to be satisfactory.
Oxtail Soup (Powder).	Deficient of meat.	Importers written to.  Matter left pending outcome of discussions between Ministry of Food and the Trade with a view to formulating a new Code of Practice.
Cream of Mushroom Soup (Powder).	Deficient of fat.	Importers written to.  Matter left pending outcome of discussions between Ministry of Food and the Trade with a view to formulating a new Code of Practice.
Sweets.	Deficient of Marzipan.	Manufacturers to discontinue sale.

### POLICE COURT PROCEEDINGS, 1957.

No. of case.	Act, Byelaw or Regulation under which proceedings were taken.	Offence.	Result.
1	Public Health Act, 1936, Section 75.	Non-compliance with statutory notice to provide a dustbin.	Fined £1 and £1.ls.Od. costs.
2	Public Health Act, 1936, Sections 39 and 290	Non-compliance with statutory notice to provide a satisfactory troughing.	Fined £3 and £1.1s.0d. costs.
3	Food and Drugs Act, 1955, Sections 2 and 113.	Selling milk containing 8.8% extraneous water.	Fined £25 and £3.3s.0d. costs.
4	Public Health Act, 1936, Sections 91 to 94.	Non-compliance with statutory notice to abate nuisance.	Work done. Case withdrawn on payment of court costs.
5	Public Health Act, 1936, Sections 91 to 94.	Non-compliance with statutory notice to abate nuisance.	Work done. Case withdrawn on payment of court costs.
6	Public Health Act, 1936, Sections 45 and 290.	Non-compliance with statutory notice to provide a satis- factory closet.	Fined £2 and £1.1s.Od. costs.
7	Public Health Act, 1936, Sections 39 and 290.	Non-compliance with statutory notice to provide a satisfact- ory troughing and rainwater pipe.	Fined £2 and £1.1s.0d. costs.

No of Case.	Act, Byelaw or Regulation under which proceedings were taken.	Offence	Result
8	Food Hygiene Regulations, 1955.	Failing to protect food from risk of contamination.	Fined £1.0s.0d.
9	Food Hygiene Regulations, 1955.	Failing to provide notice respecting hand washing.	Dismissed on payment of 4s.Od. costs.
10	Food Hygiene Regulations, 1955.	Food business carried on at insanitary premises.	Fined £5.0s.0d.
11	Food Hygiene Regulations, 1955.	Failing to keep a food room clean and in good repair.	Fined £1.0s.0d.
12	Food Hygiene Regulations, 1955.	Allowing refuse to accummulate in a food room.	Dismissed.
13	Food Hygiene Regulations, 1955.	Failing to keep clean equipment in a food room.	Fined £1.0s.0d. and £3.3s.0d. costs.
1/4	Food and Drugs Act, 1955.	Offering for sale food unfit for human consumption.	Committed to prison for one month.
15	Food and Drugs Act, 1955.	Depositing for purpose of sale food unfit for human consumption.	Committed to prison for two months.
16	Merchandise Marks Act, 1926 and Imported Food Regulations.	Failing to label imported meat.	Dismissed on payment of 4s.Od. costs.

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### MISCELLANEOUS

### Medical Examinations.

Particulars of medical examinations carried out during 1957:-

PURPOSE	No. of Examns.
Retirement of Local Authority staff Workmen's Compensation Act Fitness for employment (Superannuation) Road Traffic Act Fitness to Work School Meals Service Accidents Teachers - Admissions to Training College - Others	2 12 342 293 41 12 2 38 16
TOTAL	758

### Investigation of Atmospheric Pollution.

The following are average monthly figures of pollution of the atmosphere at three sites in the Borough.

	to charte sold	Site of Gauge	
Detail	Gannow I.W.C.	Bank Hall Hosp./ Queen's Park	Marsden Hospital
or totalment, size you and	Tons per Sq. mile	Tons per Sq. mile	Tons per Sq. mile
Total undissolved matter	11.51	11.15	5.05
Total dissolved matter	9.52	7.19	7.47
Total deposit	21.03	18.34	12.52
Sulphate as So4"	2.51	2.15	2.35
Chlorine as Cl'	2.24	1.45	1.50

Note: - No.2 Gauge transferred from Bank Hall Hospital to Queen's Park Meteorological Station on 1st August.

THE WEATHER OF 1957 COMPARED WITH 1956 HETEOROLOGICAL OBSERVATIONS AT QUEEN'S PARK

Mean Relative	Humidity	89.3%	81.9%			
No.of days	Ground	112	Q W	717		
	Mean Mean Earth Earth 1 foot 4 feet	08°87	0°847	49.20		
ures	Mean Mean Earth Earth 1 foot 4 feet	47.70	47.50 48.00	148.8°		
Temperatures	Mem	47.20 12.4° 47.7° 48.8°	46.50 12.10	1,80,40 12.60 1,80.80 1,90.20		
	Mean In Shade	47.20	16.50	o <sup>†1°8†1</sup>		
1	Highest amount in 24 Hrs.	2°420 Ins• (1)/01/6)	1.535 ins. (27th Dec.)	1.709 ins. (31st Dec.)		
Rainfall	No.of days of rain.	210	189	173		
	Total Fall in ins.	42,31	43.25	43.65		
nshine	Highest amount in 24 hrs.	15,3 hrs. on 7/6/21 and 29/6/21	12.7 hrs. (19th May)	15.1 hrs. (20th June)		
Bright Sunshine	No of days of sun.	269	থ্যন্ত	6172		
Br	Total smount in Hrs.	107401	1060,1	1122,1		
		Average 40 Years	1956	1957		

a Thermometer not in use from beginning of year until ligh April - Broken.

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### MEAN METEOROLOGICAL READINGS, RECORDED AT QUEEN'S PARK, 1957.

LAT: 55° 47° 30N LONG: 2° 14° 30N Barometer Cistern 458 feet above Mean Sea Level

					TH	ERMON	ETERS							RAINFA	LL			BRIGHT	SUNSE	HINE		D	IRECT		F WI M.T.		T 9	M.	
1957	Mean A	re		IN S	CREEN				Mean	-	GROUND	23	No.		d	t in a	No.	Total		Most day	in a		NO	. OF	DAYS	OF:			
	at Mea Sea Le		Mean Max.	Mean Min.	Mean T <sub>emp</sub>		lute E		on Gras	1 ft	Hean 4 ft	tive Humidi	of Days	fall	Amoun	Day of Month	of days of sun	amount	Daily	Am-	Day of Month	Ng	NE.	E.	SE.	s.	SW.	W. M	W. Calm
						Highest	Date	Lowest	te			Mean Relativ																	
	Mibrs	Inches												M.M.	M.M.			Hrs.	Hrs	Hrs.						1			
Jan	1019.2	30.098	46.0	35.0	40.5	55	4/1 2	26 11	/1 29.0	39.7	42.7	87.3	19	93.1	13.4	21/1	13	8.7	0.3	2.0	11/1		2	4	٠,	2	12	8 -	3
Feb	1004.9	29,676	44.5	33.8	37.1	52	4/2	20 20	/2 26.6	39.2	42.1	91.2	19	95.0	15.7	23/2	21	43.5	1.5	5.6	22/2	1	1	6	1	3	7	4 2	-
March	1010.9	29.853	52.9	41.8	47.3	70	12/3	1 25	/3 35.3	0 مبليل	43.2	84.6	15	88.7	19.1	19/3	24	68.4		6.9	12/3		1	9	4		4	8 -	1
April	1024.9	30,226	53.6	37-7	45.6	61	5/4	25 13	14 35 4	46.1	45.6	73.9	3	7.9	3.7	21/4	28	128-4		11.9	30/4	2	3	8	3	2	5	6 -	1
May	1018.1	30.066	57.7	41.14	49.5	65	31/5		/5 33.	50.5	48.3	70.7	13	38.1	8.1	17/5	31	180.8	100000	13.2	22/5	2	4	8	4		4	6 2	1
June	1019.1	30.096	67-2	46.4	56.8	83	28/6		370		525	66.5	6	52.8	16.2	8/6	30	267.2	102/00/20	15.1	20/6		2	5	3			10 4	
July	101249	29.914	65.0	53.0	59.0	77	6/7	G10 1 1000	1/6 49.0	60.4	56.6	82.8	18	125.7	23.4	19/7	25	108.4	3.5	12.3	30/7	2	3	3	2	2	3	Ц	2
August	1013.0	29.916	63.2	51.8	57.5	76	2/8	39 2	18 460	59.5	57.5	84.0	18	141.2	27.0	24/8	26	105.2	3.4	12.0	1/8		-	9	2		2	COST TOTAL	1
Sept	1013.5	29.930	57.4	47.1	52.2	63	7/9	32 3	0/9 40.	53.8	55.3	81.5	20	159.5	33.9	11/9	23	102.2	3.4	8.9	29/9	1	1	4	1	3	1	100	3
Oct	1016.6	30.023	55.6	43.7	49.6	65	8/10	32 1	/10 37.	50.7	52.7	87.7	17	133.3	24.2	29/10	19	66.3	2,1	6.6	13/10		-	1	1	-	1	100	7
Nov	1019.6	30.110	49.2	39,0	44.2	51	21/13	10000	/11 34./ /11	44.6	49.0	85.6	. 9	51.8	13.7	4/11	-	48.0≈	1.6	-	-	-	-	11	2	1		10 -	6
Dec	1013.1	29,918	43.8	34.3	39.2	54	19/12		/12 29.	4 40.3	45.2	87.5	16	121.8	43.4	31/120	-	31.08	1.0	-		-	1	4	3	•	6	13 -	4
Whole	-																					1							
Year	1015.5	29.985	54.7	42.1	48.4	83	28/6	20 20	/2 36.	2 48.8	49.2	81.9	173	1108.9	43.4	31/12	249	1122.1	3.1	15.1	20/6	8	18	72	26	13	47	29 12	33

NUMBER OF DAYS OF:

SNOW OR SLEET	SNOW LYING (as obs.hour)	HAIL	THUNDER HEARD	FOG (at obsehour)	GROUND FROST	GALE
6	14	2	2	2	112	

NOTE = Sunshine = November and December = no recordings owing to sunchine sphere being stolen.

Meteorological Office estimated amounts of sunshine for November = 48 hours; December = 31 hours.

ø Most rainfall ever recorded in December since records were kept.

### COUNTY BOROUGH OF BURNLEY



Local Education Authority

# MEDICAL OFFICER'S REPORT 1957

### COUNTY BOROUGH OF BURNLEY



Local Education Authority

# MEDICAL OFFICER'S REPORT

C LAMONT, Ms. Cos. 2555.

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### THE EDUCATION COMMITTEE

### For the Municipal Year 1957 - 58

### is constituted as follows:-

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* THE WORSHIPFUL THE MAYOR (Mrs. Alderman M.A. Battle, J.P.)
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\* Miss Alderman A. Proctor.

\* Alderman G. Hale, J.P. (Chairman).

\* T. Holgate.

\* " G. Hollinrake.

" W. Jackson,

" S. Taylor.

Miss Councillor E. Utley.

\* Councillor G. Blackston.

" F. Booth.

\* " E. Halsall, J.P.

" J. Lord.

\* J. L. Mercer.

W. Mills.

" P. Mullen.

" A. Proctor.

W. Roberts.

\* " T. Rushton.

\* " E. Sandy (Vice-Chairman).

\* " E. J. Willis.

The Rt. Rev. the Bishop Suffragan of Burnley.

\* The Rev. J. Keaton.
The Rev. L. W. Morgan, B.A.
Miss D. N. Chew, B.A., J.P.

\* Members of the Special Schools and Services Sub-Committee.

Public Health Department,
BURNLEY,

14th June, 1958.

The Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have the honour to present to you my report on the work of the School Health Service during the year 1957. This is the twenty seventh report which I have submitted to you and the fiftieth in the series.

The medical and nursing supervision of school children has followed on the same lines as in previous years. Although the practice of ensuring that each child has three periodic medical inspections during school life has continued, an attempt has been made to devote more time to individual children whose health is below par and those whom school teachers consider to require more frequent supervision. The number of these special examinations exceed the number of routine inspections of particular age groups.

The fact that defects found during routine visits to schools which required treatment are only about one-third of the number found thirty years ago indicates a considerable improvement in health and physique over that period.

The notifiable infectious diseases were not present to any extent in epidemic form and, apart from the periodic appearance of measles, were not responsible for much absence from school. However, in August an explosive outbreak of Virus A. influenza commenced in Colne schools, spread rapidly to Burnley, and by the 4th September some schools had up to 50% of the children absent and two senior schools had 60%. The schools were closed for the autumn holiday on 5th September, one day earlier than usual. Soon after reopening on 16th September the epidemic abated.

Vaccination against poliomyelitis commenced in 1956, but shortage of supplies of the vaccine made it necessary to limit vaccination to selected age groups. Consequently during 1957 only 1995 school children were vaccinated.

Prophylaxis against tuberculosis has made some progress. The response to appeals to have their children inoculated resulted in an

acceptance by 64.5% of the parents of the thirteen year old group. This response is lower than in many other areas. In view of the undoubted value of B.C.G. vaccination of adolescents as a measure for the control of tuberculosis in industrial communities, it is desirable that all school leavers should be tested and if necessary vaccinated.

The number of children effectively protected against diphtheria has changed little in recent years and only 42% have a satisfactory degree of immunity. The fact that the town has been free from diphtheria for eight years has probably engendered an apathy on the part of parents, particularly the younger ones who have not experienced the anxiety of having children dangerously ill with this disease.

I would direct your attention to the interesting report by the Senior Orthoptist on the prevention of amblyopia ex anopsia by early ascertainment to ensure early preventive measures. It is now the practice to invite parents to take their children at the age of three years to the clinic for a check-up of their eyesight.

In November the Manchester Regional Hospital Board made available the services of a Consultant Orthodontist for one session weekly. This is a welcome addition to the dental service.

Once again I wish to express my appreciation of the interest shown by the members of the Special Schools and Services Sub-Committee in the work of the School Health Service and to thank the Director of Education and the head teachers for the help which they have at all times willingly given. Drs. Collins and Whitaker, the nursing and clerical staff have given loyal service. To Mr. S. Jackson, Senior Clerk, is much credit due for the smooth administration of the service.

I have the honour to be,
Ladies and Gentlemen,
Your obedient Servant,

Principal School Medical Officer.

### GENERAL INFORMATION

### SCHOOLS

In December, 1957 the total number of pupils enrolled in the Schools was 67 less than in December, 1956.

At the end of 1957, the numbers of children on the rolls were as follows:-

Nurseries, 537; Infant's Departments, 3273; Junior Departments, 5073; Modern Secondary and Technical High Schools, 3685; Academic Secondary Schools, 1058; Special Schools, 185; Total = 13811.

The numbers in the schools are:-

	No.	on Roll	at 31st December	r, 1957.
PRIMARY SCHOOLS.	Nursery	Classes	Infants Dept.	Junior Dept.
Barden		. 10	119	258
Burnley Wood	•••	Tal.	144	200
Lionel Street		Trainion	182	497
Stoneyholme		29	188	333
Rosegrove	•••	-	164	200
Hargher Clough	•••	marginish)	104	465
Habergham		E STATE OF THE STA	103	407
Heasandford	• • •		184	437
			154	421
Coal Clough Todmorden Road	•••	25	310	517
Whittlefield	•••	32	77	21
	•••	25	142	277
Rosehill		-	66	123
Healey Wood			8800 70	337
Lowerhouse		- 1.0.	60	137
St. Peter's	•••	-		204
Holy Trinity		-	123	314
St. Stephen's		-	151	164
St. Andrew's		-	85	
Wood Top		To 690, 3.	62	85
Lane Head		-	62	97
Back Lane		-	46	93
Myrtle Bank		-	185	
The state of the s		-	316	22/ 10 1
St. Thomas's R.	0.	-	65	116
St. Mary Magdal	ene's		THE REST OF THE REST.	016
R.	J.	-	115	246
St. John's R.C		-	103	270
St. Augustine's	s R.C.	-	67	103

NURSERY SCHOOLS		No. on Roll
Accrington Road Nursery School  Habergham Nursery School  Rockwood Nursery School  Rosehill Nursery School  Myrtle Bank Nursery School  Lionel Street Nursery School  Elm Street Nursery School  Howard Street Nursery School  Rosegrove Nursery School  Barden Lane Nursery School		80 38 41 30 42 40 37 40 40 38
MODERN SECONDARY SCHOOLS		No. on Roll
Barden Boys' Modern Secondary Burnley Wood Boys' Modern Secondary Rosegrove Boys' Modern Secondary Coal Clough Girls' Modern Secondary St. Mary's R.C. Boys' Modern Secondary St. Hilda's R.C. Girls' Modern Secondary Walshaw Girls' Modern Secondary Walshaw Girls' Modern Secondary Walshaw Girls' Modern Secondary TECHNICAL HIGH SCHOOLS	•••	468 276 554 436 278 290 522 210 No. on Roll
Burnley Technical High School (Boys = 339; Girls = 312)		651
ACADEMIC HIGH SCHOOLS		No. on Roll
Grammar School for Boys High School for Girls	•••	541 517
SPECIAL SCHOOLS		No. on Roll
Coal Clough Special School for Educationa Sub-normal children Open Air School SCHOOL CLINIC	illy	77 108

All Clinics of the School Medical Service, with the exception of the centre for bathing of verminous children and those suffering from scabies are centralised in the Elizabeth Street premises.

The total number of attendances of school and pre-school children at the various clinics was 26868, a decrease of 162 on the number for the previous year.

The School Clinic was open on 307 days.

Medical inspection in schools - approximately ten sessions each week.

General ailments - daily.

Dental inspection in schools - two to three sessions each week.

Dental treatment - daily.

Minor ailment treatment - daily.

Immunisation against diphtheria and whooping cough and vaccination against smallpox - one session each week.

Orthoptic treatment - approximately eleven sessions each week. Physiotherapy, etc. - daily.

Artificial sunlight - two sessions each week.

Child Guidance - daily.

Speech therapy - daily.

B.C.G. vaccination against tuberculosis - sessions as required. Vaccination against poliomyelitis - sessions when vaccine available.

### SPECIALIST CLINICS

Ophthalmic - three sessions each week.
Orthopaedic - two sessions each month.
Paediatric - one session each month.

### STAFF OF THE SCHOOL HEALTH SERVICE.

Medical Officer of Health and Principal School Medical Officer: -

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

School Medical Officers: -

L. J. Collins, M.B., B.Ch., B.A.O., L.M., D.P.H. E. P. Whitaker, M.B., Ch.B., M.R.C.S., L.R.C.P.

Principal Dental Officer: -

J. A. Pilling, L.D.S.

Assistant Dental Officer:-

K. Jackson, L.D.S.

J. Jackson, L.D.S. (Part-time Dental Officer - two sessions weekly)

Ophthalmic Specialists (part-time):-

K. R. Brown, M.B., D.O.M.S., D.O.T. E. Shannon, M.B., D.O.M.S.

Paediatrician (part-time)

W. M. L. Turner, M.D., M.R.C.P., D.C.H., D.L.O.

Four Health Visitor—School Nurses; One Physiotherapist (part—time); One Educational Psychologist; One Psychiatric Social Worker (part—time); Two Orthoptists; One Speech Therapist; Five Clerks; Two Dental Clerk/Attendants.

### REPORT.

### OTHER STATUTORY AND VOLUNTARY BODIES.

The specialist clinics for eye and orthopaedic defects and paediatrics are held in the school clinic premises. The specialists employed by the Manchester Regional Hospital Board in the Burnley hospitals are also the officers who attend these clinics. No charge is made by the Regional Hospital Board to the Education Authority for the services of the Orthopaedic Surgeon and Ear, Nose and Throat Specialist. The Ophthalmic Surgeons and Paediatrician are paid on a sessional basis by the Authority.

To meet the convenience of the Ear, Nose and Throat Specialist, children are referred to him at the out-patient clinic in Victoria Hospital in lieu of special sessions previously held in the School Clinic premises. Ear, nose and throat and eye cases continue to be admitted to hospital without any appreciable delay.

The two orthoptists treat children in the School Clinics of Burnley and Nelson and in the Ophthalmic Department of Burnley Victoria Hospital. Early in 1958, the sessional time allocated between the clinics and the Hospital was rearranged, so that nine sessions a week are devoted to treatment in the Burnley School Clinic, seven sessions in Nelson (Lancashire County) School Clinic and four sessions in the Hospital. This ensures continuity of orthoptic treatment before admission, while in hospital and after discharge from hospital. Treatment is also given to adult patients in the Hospital. The cost of the orthoptic service is borne pro rata by the two Education Authorities and the Hospital Management Committee.

The School Health Service is closely co-ordinated with the services for the care of young children, vaccination and immunisation and prevention of illness and after-care administered in accordance with Sections 22, 26 and 28 of the National Health Service Act, 1946. The two medical officers who undertake the clinical duties in connection with medical inspection and clinic treatment of school children are also employed in the service for the care of infants and young children and conduct infant welfare, immunisation and vaccination clinics. All the clinics and forms of treatment, including specialist clinics, are equally available for children attending schools and nurseries and for children referred from infant welfare centres.

Child Guidance duties are undertaken by the whole-time Educational Psychologist, with the assistance of a part-time Psychiatric Social Worker, who is employed for an average of four sessions each week. It is still not possible to obtain the services of a child psychiatrist.

The Thursby Convalescent Home, Lytham St. Annes, which is administered by a voluntary Committee, received 121 Burnley school children for periods of two to three weeks of convalescence between April and October. The selection of children is the responsibility of the School Medical Officers.

Information regarding the suitability of school leavers for different forms of employment is passed from the School Health Department to the Juvenile Employment Bureau of the Ministry of Labour.

Co-operation with both statutory and voluntary bodies is well established and no difficulties arise. Information and advice are freely given between the general practitioner, the hospital staffs and the school medical officers. The local hospitals supply lists of children admitted and discharged. Health Visitors attend the hospital children's wards and the paediatric out-patient clinics.

I would like to express my thanks to the Almoners and Hospital Secretaries, the School Welfare Officers, the N.S.P.C.C. Inspector, the Ministry of Labour Youth Employment Officer, the Superintendent of the House of Help, the Secretary of the Council of Social Service, the Area Manager of the National Assistance Board, the W.V.S. Organiser and the Head Teachers of the Schools for their assistance in the work of the School Health Service.

I have repeatedly drawn attention to the small number of parents who are present in the schools when routine medical inspections are being undertaken. All parents are invited by letter to come, and although about two-thirds of the parents are present when the youngest group of children are being inspected, very few attend for the

second and practically none for the third routine inspections. Now that much fewer mothers are in whole-time employment, there would appear to be no valid reason why many more should not be present. The school medical officers would welcome the opportunity to discuss with mothers the physical condition of the older children before they are due to leave school. When 1068 children aged 14 years and over were inspected, of whom 116 were found with conditions which required treatment, only 14 parents were present at the time of medical examination.

The numbers of parents who were present when children were being submitted to routine inspection were:-

With the Entrants	 880 or 62.4%
With the Second Age Groups	 554 or 32.9%
With the Third Age Groups	 14 or 1.3%

### School Hygiene and Sanitary Accommodation

The conveniences of all schools in the Borough have now been modernised and are hygienically satisfactory. Frequent inspections by the public health inspectors have ensured that they are maintained in a clean condition.

### MEDICAL INSPECTION IN SCHOOLS

The total number of pupils inspected in the schools was 4636 which is 33.6% of the total on the rolls. In addition, inspections for special purposes or re-inspections of pupils suffering from defects or diseases amounted to 5305, so that altogether 9941 examinations were made.

The following table gives details of the ages of the children submitted to routine inspection:-

AGES .	ENTRANTS								SECOND AGE GROUP					THIRD AGE GROUP							Other Periodic	
	2	3	4	5	6	7	8	9	Total	10	11	12	13	Total	14	15	16	17	18	19	Total	Inspect-
BOYS	66	51	142	318	68	33	29	35	742	741	62	25	21.	849	361	46	75	6	12		500	217
GIRLS	54	52	130	274	64	22	34	39	669	699	74	40	24	837	469	30	56	3	10		568	254
TOTALS	120	103	272	592	132	55	63	74	1/41	1440	136	65	45	1686	830	76	131	9	22	-	1068	472

		Boys Girls	Total
Total Routine Inspections	•••	2308 2328	4636
Other Inspections: -			
No. of Special Inspections and Re-inspections:-	Special Inspections	Re- inspections	Total
At Schools	143 1197	3871 94	4014 1291
	1340	3965	5305

Visits of Medical Officer.

The number of visits paid to the Schools were:-

For Routine Medical Inspection: 331
For "Following-up" Defects: 2

The 471 other periodic inspections shown above are in respect of children who were first inspected as "entrants" in the nursery classes and are now between six and eight years of age. These additional inspections were made to bridge the gap of six or seven years before they are due to be inspected in the second age group when they reach the age of 10 years.

In addition to 2 special visits to schools for the following-up of defects, the Medical Officers saw, at the completion of the routine inspections in each school, children who required supervision on account of defects found at a previous inspection. Owing to time being devoted to vaccination against poliomyelitis, fewer "follow-up" visits to schools were made than in previous years.

The Nursery Schools and Nursery Classes. The ten nursery schools have 426 young children on the roll and the nursery classes in four other schools have 111 making a total of 537 children under five years of age who receive nursery care. Frequent visits for supervision of these young children were made during the year, and 386 were given a full routine medical examination.

## REVIEW OF THE FACTS DISCLOSED BY MEDICAL INSPECTION

The statistical tables will be found on Pages 49 to 58 inclusive.

The statistics of routine inspections show that of 4636 pupils inspected in the various age groups, 604 were found to require treatment, apart from dental attention. In the entrant group the percentage of children with defects requiring treatment was 12.8%, as compared with 12.3% in 1956. In the second age group, the percentage in 1957 was 14.4 as compared with 12.1 in 1956 and in the third age group the percentage with defects requiring treatment was 10.9% as compared with 5.4% in 1956. Of the total children inspected routinely, 13.0% required treatment, as compared with 10.8% in 1956 and 10.5% in 1955.

Although the percentage of children with defects requiring treatment has shown a slight increase during 1956, a steady improvement has been shown during the last thirty years:

Average percentage of children found to have defects requiring treatment.

1957	13.0
1952 - 56	11.2
1947 - 51	11.7
1942 - 46	14.6
1937 - 41	22.6
1932 - 36	28.5
1927 - 31	37.9

Of the 604 found to require treatment, 162 had vision defects, mainly errors of refraction. This is 3.% of the total inspected. In 1956, 2.4% were found to have defective vision. 250 children were examined by the eye specialist for the first time and 760 who had been under supervision in previous years were re-examined. One hundred and ninety-four children were prescribed spectacles for the first time and 509 who had previously worn spectacles and whose vision showed changes were supplied with prescriptions for new spectacles through the authority's eye clinic. In addition, 120 children were prescribed spectacles otherwise than through the School Health Service. The children in the youngest age group continue to have fewer vision defects than the older pupils. One hundred and twenty pupils were found to squint, and in 46 the divergence was considered to be sufficiently great as to necessitate reference to the specialist.

At both routine and special inspections 948 children were noted in whom nose and throat defects were present to a greater or lesser extent. The majority of these had enlarged or unhealthy conditions of tonsils and evidence of adenoids. Only 142 required to be referred to the specialist for further opinion or treatment.

Diseases of the heart and circulation showed a slightly lower incidence to that of the previous year, being present in 1.2% of those inspected, and this compares favourably with the average incidence of 1.8% during the decennium 1947 - 1956. Most of the heart conditions were functional; cases of severe organic disease following rheumatic fever or acute infections have been relatively rare for several years.

Vermin Infestation. The health visitors made 143 surveys in schools, for general cleanliness and to detect vermin infestation. Forty five thousand five hundred and thirty five inspections were made of individual pupils. One thousand and forty instances of infestation in respect of 837 pupils were found. The usual home visits were made and mothers were advised on appropriate measures to cleanse children's hair and prevent re-infestation.

This is not a serious problem in schools today, the instances of infestation being only 2.3% of the children inspected by the health visitors. Generally the infestation is limited to some nits in the hair of girls, and the presence of lice is extremely rare. Where infestation is found, it is almost invariably families who are otherwise unsatisfactory, the children being generally neglected, mothers thriftless and homes dirty.

Clothing and Footgear. Again during 1957, as in previous years, careful inspection was made by the Medical Officers of the clothing and footgear of children to see if present-day conditions were causing children to be badly or insufficiently clad. An analysis of the findings in respect of 4636 children shows that none had seriously defective clothing and only one had very defective footwear.

	Clothing. No. of children.	%	Footgear. No. of children.	%
Children classified as very good Children classified as good Children classified as defective	4448 188 -	95.9 4.1	4441 194 1	95.80 4.18 0.02

#### THE PHYSIQUE OF THE SCHOOL CHILD (as judged by weight and height)

The average heights and weights of children recorded in specific age groups show little change during the last few years, although in the youngest group of nursery children there is a tendency to increase in weight. Generally heights and weights in all age groups are now much in excess of those recorded thirty or more years ago for children who were then in the same age groups. Mothers and fathers now aged about 30 years have children in infant schools who are about two inches taller and from three to four pounds heavier than they themselves were when in infant schools.

#### AVERAGE HEIGHT AND WEIGHT OF PUPILS

						10 years		14 years
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Number inspected	51	52	318	274	741	699	361	469
Average height in inches	38.4	39.1	42.9	42.7	53.3	53.2	61.9	61.0
Average weight in pounds	34.3	35.9	42.3	41.9	71.7	71.0	102.0	104.5

Physical Condition. The physical condition of children at all ages continues to be very satisfactory, and evidence of malnutrition is now very rare. Of 4636 pupils, whose physical condition was noted, only 12 were considered to be in an unsatisfactory physical condition and eight of these were in the youngest age group. Among the group of pupils aged 14 years and over, only one was found to be in an unsatisfactory physical condition. Of all the pupils classified for this purpose 99.7% were considered to be satisfactory.

#### THE INSPECTION CLINIC

During the year 1197 children attended the Inspection Clinic the total attendances being 1291. One thousand two hundred and fifty four of the attendances were in respect of defects which did not require the exclusion of the children from Schools. Certificates of exclusion from school for varying periods were granted in respect of the remaining 37 attendances.

No cases of ringworm and only two cases of scabies required to attend the clinic, and no cases of either disease were found during the routine inspection of 4636 children in schools. Eight cases of impetigo found during routine inspections and forty-one treated at the clinic are considerably more than were discovered in the previous year.

The following is a summary of the defects found in school children attending the inspection clinic:-

		Requiring Treatment	Requiring Observation
Ringworm		-10 10 -10 1000	LESS SIGNISHES
Scabies		1	1
Impetigo		25	to university and more
Other Skin Diseases		84	2
Eye Defects		215	39
Ear Defects		48	3
Nose and Throat Defects		82	8
Speech Defects	000	14	13
Lymphatic Gland Enlargement		8	2
Heart and Circulation Defects		1	2
Lung Diseases		21	5
Development Defects	000	-	2
Orthopaedic Defects		36	8
Nervous System Defects	000	3	1
Psychological Conditions	000	15	-
Abdomen		2	2
Other Conditions	000	230	5
		_	_ 30120
Total	000	785	93

Miscellaneous Examinations. In addition to the above, the following examinations were made at the Clinic:

For freedom from infection prior to admission	
to Orthopaedic Hospitals	3
For freedom from infection prior to admission	DI NOTE OF
to Camp School	554
For suitability for Convalescent and Holiday Homes	185
Prior to admission to Residential Schools and	
Approved Schools	38
Children to be boarded out (Children's Department)	29
For fitness for employment on leaving School	35
Reports for Juvenile Court	6
For suitability for employment out of school hours	142
For fitness to take part in Juvenile Entertainment	6
Miscellaneous Inspections by nurses	344

#### FOLLOWING UP

Pupils with defects were followed up by the school health visitors to ensure that treatment was received where this was found necessary and that advice and guidance were given to parents and teachers. This involved 8,179 visits to schools and homes of parents, apart from the visits made to schools in connection with routine medical inspection.

No. of visits by the Medical		to scho	ols for	follo	w-up	
inspection of children with	defects				•••	2
Follow up visits by the Nurs	es for:-					
Defective vision .						5282
Nose and Throat Defe	ects					169
Other Defects .		•••	10.00			2728
						8179

#### INFECTIOUS DISEASE

## Review of the action taken to detect and prevent the spread of Infectious Disease

During 1957, infectious diseases, apart from measles, were not prevalent in epidemic form and few patients were admitted to hospital.

Forty-one cases of scarlet fever occurred in children of compulsory school age and these were evenly distributed throughout the year:

There were 1765 cases of measles notified during 1957, all but six being in children under 15 years of age; 1178 were under 5 years and 581 in children between 5 and 14 years of age. German measles decreased appreciably, there being only 54 cases as against 878 in 1956. Of these, 19 were in children aged 5 to 14 years and 34 in children aged under 5 years. Most of the cases of measles occurred in the last six months of the year.

Fifty-nine cases of whooping cough in children of school age were notified, as compared with 89 in children under five years of age.

Three cases of pneumonia in school children were notified.

Notifications of tuberculosis in children under fifteen years of age numbered ten. Nine of these were in the 5 to 14 years age group and one was under five years of age. Of the nine cases in the age group 5 to 14 years, four were early cases of pulmonary tuberculosis, three of whom were contacts of other members of their households. The five non-pulmonary cases were gland infections. The child under five years of age also had gland infection.

During the past eight years, apart from two doubtful cases, which were not confirmed on bacteriological investigation, diphtheria has been absent from the town. The following figures show the decrease in the number of cases (all ages) notified over the past twelve years:-

1946 - 71	1950	-	1	1954	-	Nil
1947 - 33	1951	-	Nil	1955	-	Nil
1948 - 16	1952	-	1	1956	-	Nil
1949 - 9	1953	-	Nil	1957	-	Nil

There was a marked decrease in the incidence of Sonne Dysentery during the year, 23 cases (all ages) being notified. Of these six were in children of compulsory school age and 10 in children under 5 years of age. It was mild in type and occurred principally in the first quarter of the year.

The notifiable diseases among children of compulsory school age (5 - 14 years) notified to the Medical Officer of Health were as follows:-

Disease	53	No. of notifications	Deaths
Scarlet Fever		41	_Lepibek
Whooping Cough		59	T. TO. TO. 1701
Diphtheria			
Measles and German Measles Primary and Influenzal		600	THE REAL PROPERTY.
Pneumonia	000	3	
Meningococcal Infection		- 10 TO 10 T	-
Dysentery	0.0	6	Contract Contract
Respiratory Tuberculosis	000	4	-
Non-Respiratory Tub erculosis		5	Annable Total
Acute Poliomyelitis		In the second second	distribution of the Laboratory
Food Poisoning		AND THE PARTY AND A	Of Cast No. and which

Immunisation against Diphtheria. In 1957, the number of children immunised against diphtheria under the Local Health Authority's arrangements, both in the central clinic and by general practitioners, was 867. It is estimated that at 31st December, 1957, the child population of the Borough consisted of 5,800 children under five years of age and 12,100 between five and fifteen years. Of these only 52.3% of the under fives and 74.6% of the five to fifteen years age group have been immunised against diphtheria. These percentages do not, however, show a true immunity index, because many of the children have not received "booster" injections and immunity is reduced with passage of time. The number of "booster" injections given during the year (all ages) was 784.

Age groups of children with a satisfactory degree of immunity are:-

Under 1 year	0.0	2000	13.7%
1 - 4 years, inclusive			62.7%
5 - 14 years, inclusive			36.5%
Total under 15 years			41.6%

The numbers dealt with during 1957 were: -

Immunisation completed	Pri Under 5 years		Adults	Total	No. of Re-inforcement Injections. (all ages)	Total immunised
At L.A.Clinic	533	38	roc -	571	640	1211
By Medical Practitioners	282	14	-	296	144	440
TOTAL	815	52	-	867	784	1651

#### B.C.G. Vaccination against Tuberculosis.

The Scheme for B.C.G. vaccination to protect adolescents against tuberculosis, which was inaugurated in 1954, following sanction from the Ministries of Health and Education, was continued. This scheme enables vaccination to be offered to children towards the end of the

year preceding their fourteenth birthday, and provides for those protected against tuberculosis to be followed up for at least a further year before they leave school.

In 1957, the number of parents who consented to the vaccination of their children was more than in the previous year, the acceptances being 64.5% of the children in the appropriate age group, as compared with 54.7% in 1956 and 57% in 1955.

The following statistics give details of the numbers vaccinated during 1957, and a review of those who were vaccinated in the previous year.

Vaccination was offered to 1096 pupils of whom 707 (64.5%) accepted it. Of these 582 (82.3%) were found to be suitable and were protected.

Particulars are as follows:-

No. of Pupils in 13 year age group (1957)	Boys	Girls	Total
(a) To whom B.C.G. vaccination was offered (b) No. of above (a) who accepted (c) No. of (b) who were found to be:-	558 352	538 355	1096 707
(i) Mantoux negative (ii) Mantoux positive	294 · 58	288 67	582 125
(d) No. of (c) (i) who were given B.C.G.	distribution of	oldered I	
vaccination (e) No. of (d) whose Mantoux test was	294	288	582 +
positive after B.C.G. vaccination (f) No. who required a further B.C.G.	294	286	580
vaccination as not rendered  Mantoux positive after 1st			
vaccination	Low-on I	no Trees	The Tanth

+ Includes two girls who had left town before post-vaccinal test was due.

Total attendances at B.C.G. Clinic in respect of the above cases ... 2574

Children vaccinated with B.C.G. in 1956.	Boys	Girls	Total
No. of pupils whose Mantoux test was positive after B.C.G. Vaccination during 1956	231	231	462
No. of the above pupils whose Mantoux test was still positive during 1957	223	223	446
No. of pupils whose Mantoux test was negative and required a further B.C.G. vaccination	-	No. of Lot	Sept -
No. of pupils who left town before annual test was due	8	8	16
No. of pupils whose parents withdrew consent for the annual test	1000	on the sta	pel jerop
Total attendances at B.C.G. Clinic in respect of the above cases	•••		892
Total attendances at B.C.G. Clinic in respect of all cases	š	1.50	3466
No. of 13 year old children given B.C.G. vaccination since the inauguration of the		10.0 E	to who
Scheme in 1954		d ( )	1859

#### MEDICAL TREATMENT

No alteration was made in 1957 in the arrangements for the treatment of school children. The staffing by hospital consultant staff of the ophthalmic, paediatric and orthopaedic clinics held in the Authority's premises ensures good co-operation with the local hospitals, when operative treatment is required. Co-operation with general medical practitioners continues to be satisfactory and interchange of information and clinical reports between the school medical officers and general practitioners and hospital medical staffs is well maintained.

The consultant paediatrician holds a clinic monthly in the school clinic premises for cases referred to him by the school medical officers and from the infant welfare centres. During the year, 42 school children and 8 pre-school children were examined, the attendances being 51 and 10 respectively. The interest and co-operation of the paediatrician has been valuable, both in regard to children seen by him at the school clinic and those under his care in hospital wards and out-patient clinics.

The 26,868 attendances for all purposes at the Clinic are 162 less than in 1956.

## Total Clinic Attendances (Pre-School and School Children)

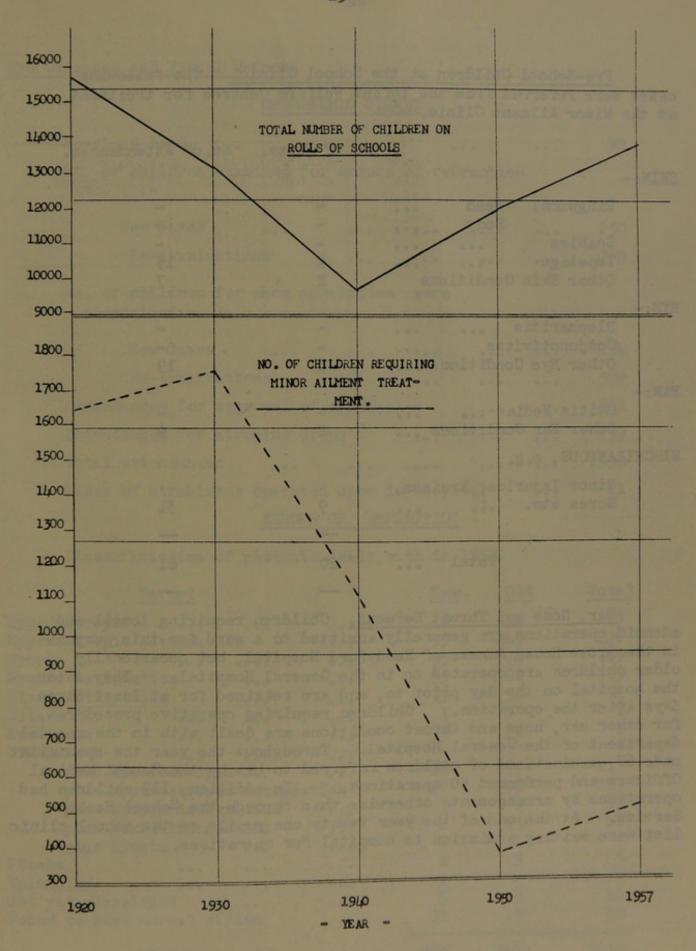
	100 mm	Dental Treatment	Minor Ailment Clinic	Medical Clinic S.M.O.	Consultant Paedia- trician's Clinic	Ophthalmic Clinic	Orthoptic T'ment	Physiotherapy and Orthopaedic T'ment	Treatment of Speech Defects	Artificial Sunlight Treatment	B.C.G. Vaccination	Child Guidance	Educational Guidance	Miscellaneous	To tal
Scho	ool ldren	5620	3986	1291	51	2930	2086	1974	2727	264	3466	83	198	1342	26018
	-school	1 16	81	71	10	159	194	188	15	116	100	100	-	200	850

Minor Ailments - Attendances for treatment.

#### School Children

Diseases	No. of Cases under treatment 1.1.57.	Number of new cases.	Total No. of cases dealt with.	Number of attendances.
SKIN:-				
Ringworm: Scalp Body Scabies Impetigo Other skin diseases	8	- - 41 61	- - 41 69	- - - 428 418
EYE:-	5 5 5	8181	000000	The base
Blepharitis Conjunctivitis Iritis Keratitis	-	1 2 -	1 2 -	4 4 -
Corneal Ulcer Other Eye Conditions  EAR:-	-	21	21	94
Otitis Media Other Ear Diseases	- 2	1 36	1 38	8 179
MISCELLANEOUS, e.g. Minor Injuries, Bruises, Sores, etc.	-	340	340	2851
	10	503	513	3986

The number of children who required to attend the clinic for minor ailment treatment was slightly lower than in the previous year and again represents only 3.7% of the total number on the Schools' Rolls, as compared with 13% in the year 1930. The accompanying chart shows the reduction in the number of children requiring treatment for minor ailments over the last twenty-seven years.



Pre-School Children at the School Clinic. The following cases were referred from the Infant Welfare Centres for treatment at the Minor Ailment Clinic.

		No. of Cases.	No. of Attendances.
SKIN:-			
	Ringworm: Head Body		-
	Scabies Impetigo Other Skin Conditions		- 15
EYE:-	Other Skin Conditions	2	
San la	Blepharitis Conjunctivitis Other Eye Conditions		- - 19
EAR:-			
	Otitis Media Other Ear Conditions	. 2	9
MISCEL	LANEOUS, e.g.		
	Minor Injuries, Bruises Sores etc		31
	Total	. 20	81
		V -	-

Ear, Nose and Throat Defects. Children requiring tonsil and adenoid operations are generally admitted to a ward for this purpose in the Grove House Annexe of Reedyford Hospital, but occasionally older children are operated on in the General Hospital. They enter the hospital on the day prior to, and are retained for at least three days after the operation. Children requiring operative procedures for other ear, nose and throat conditions are dealt with in the special department of the General Hospital. Throughout the year the specialist made 67 examinations of children referred to him by the School Medical Officers and performed 50 operations. In addition, 119 children had operations by arrangements otherwise than through the School Health Service. At the end of the year twenty one pupils on the school clinic list were waiting admission to hospital for operations.

### Eye Diseases and Visual Defects

#### OPHTHALMIC CLINIC

Sessions held		90
No. of children examined for errors of etc. :-	refraction	on
New Cases		250
Re-examinations		760
No. of children for whom spectacles we prescribed:-	vere	
New Cases		194
Re-examinations		509
Attendances for approval of spectacles		901
Attendances for atropine drops .		739
Total attendances		2930
Cases of strabismus operated upon in h	nospital	21
ERRORS OF REFRAC	TION	
Classificiation of actionts 3 - 2t with		
Classificiation of patients dealt with	in 195/	
Classificiation of patients dealt with		
Defect	New C	old Total
Defect Hypermetropia	New 9	59 75
Defect  Hypermetropia  Hypermetropic Astigmatism	New 9	59 75 +7 206
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia	New 9	59 75 +7 206
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia	New 9 16 9 35 35 33	59 75 147 206 74 109 32 115 56 71
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia  Myopic Astigmatism	New 9	59 75 47 206 74 109 32 115 56 71
Defect  Hypermetropia	New 9 12 15 15 15 15 15 15 15 15 15 15 15 15 15	59 75 147 206 74 109 32 115 56 71
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia  Myopic Astigmatism  Mixed Astigmatism  Cataract  Nystagmus  STRABISMUS	New 9 12 15 15 15 15 15 15 15 15 15 15 15 15 15	59 75 47 206 74 109 32 115 56 71 1 1
Defect  Hypermetropia Hypermetropic Astigmatism Myopia Myopic Astigmatism Mixed Astigmatism Cataract Nystagmus STRABISMUS plus Hypermetropia	New 16 59 12 55 55 55 55 1 5 5 5 5 5 5 5 5 5 5 5	59 75 47 206 74 109 32 115 56 71 1 1
Defect  Hypermetropia	New 9 16 59 17 35 33 15 15 1 1 16 27 19	59 75 47 206 74 109 32 115 56 71 1 1 1 1 - 7 113 96 223
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia  Myopic Astigmatism  Mixed Astigmatism  Cataract  Nystagmus  STRABISMUS  plus Hypermetropia  plus Hypermetropic Astigmatism  plus Myopic Astigmatism	New 9 16 59 17 35 33 15 15 1 1 16 27 19	75 77 206 74 109 32 115 66 71 1 1 1 1 1 1 1 1 2 7 113 223 7
Defect  Hypermetropia	New 16 59 17 55 55 57 57 57 57 57 57 57 57 57 57 57	59 75 47 206 74 109 32 115 56 71 1 1 1 1 27 113 96 223 7 10
Defect  Hypermetropia  Hypermetropic Astigmatism  Myopia  Myopic Astigmatism  Mixed Astigmatism  Cataract  Nystagmus  STRABISMUS  plus Hypermetropia  plus Hypermetropic Astigmatism  plus Myopic Astigmatism	New 16 59 17 35 15 1 1 16 27 19 3 2 2 2 2	59 75 47 206 74 109 32 115 56 71 1 1 1 1 27 113 96 223 7 10
Defect  Hypermetropia Hypermetropic Astigmatism Myopia Myopic Astigmatism Mixed Astigmatism Cataract Nystagmus STRABISMUS plus Hypermetropia plus Hypermetropic Astigmatism plus Myopic Astigmatism plus Myopia plus Myopia	New 16 59 17 35 15 1 1 16 27 19 3 2 2 2 2	59 75 47 206 74 109 32 115 56 71 1 1 1 1 27 113 223 7 10 15 17 1 3 3 5
Defect  Hypermetropia	New 16 59 17 35 15 1 1 16 27 19 2 2 1 5	59 75 14 206 14 109 15 71 1 1 1 1 1 1 1 1 1 7 113 223 7 10 15 17 1 3 5 10
Defect  Hypermetropia	New 16 59 17 35 15 1 1 16 27 19 2 2 1 5	59 75 47 206 74 109 32 115 56 71 1 1 1 1 27 113 223 7 10 15 17 1 3 3 5

#### ORTHOPTIC TREATMENT

The following table shows the number of children who attended for examination and treatment by the Orthoptists. All cases requiring orthoptic treatment are first examined by the Ophthalmic Surgeons.

	School Children	Pre- School Children	Total
NO. OF INDIVIDUAL CHILDREN SEEN AT THE ORTHOPTIC CLINIC	559	59	618
ATTENDANCES: -			
(a) For Orthoptic Examination (b) For Treatment (c) For Inspection and Supervision	185 619 1282	28 20 146	213 639 1428
	2086	194	2280
CHILDREN REFERRED FOR OPERATIVE TREATMENT	30	2	32
CHILDREN RECEIVED OPERATIVE TREATMENT	21	3	24
No. of Sessions devoted to treatment or supervision			423

THE SENIOR ORTHOPTIST SUBMITS THE FOLLOWING REPORT: -

Consequent upon the appointment at the beginning of the year of an assistant orthoptist, the work of the department has been brought up to date and time has been available for more detailed investigations to be carried out.

In addition, a certain amount of time has been devoted to statistical research in connection with the prevention and treatment of amblyopia ex anopsia by occlusion therapy, and a paper giving the results of this survey was read at a meeting of the Northern Branch of the British Orthoptic Society and is to be published in the British Orthoptic Journal.

There has been much discussion recently concerning the new method of treatment for amblyopia ex anopsia known as "pleoptics", which was first introduced and is being practised in Europe, and has received the attention of ophthalmologists and orthoptists in this country. It is considered that this treatment is expensive when the cost of equipment, orthoptist's time, child's time out of school and possibly the parents time away from work are considered, and it is

essentially therapeutic whereas the ideal is obviously prevention.

Amblyopia ex anopsia has been described by Gundersen (Journal of American Medical Association) as a PREVENTABLE form of blindness, and early visual determination has been advocated. It is universally accepted that early preventive measures give the patient the best chance of developing and retaining good sight in a squinting eye and, therefore, along with any new methods of treatment, must go constructive suggestions on prevention. It is considered that a School Clinic Eye Service, with the facilities of the child welfare and school health services at its disposal, can play a special role in these preventive measures, providing there is complete liaison with the staffs of the ophthalmic department of the hospital, and ideally with the same staff operating the two services.

Patients are referred for examination and treatment in the Ophthalmic Department from various sources and details are given in Table I of 730 cases who were referred between January, 1955 and September, 1957.

Reason for referral

TABLE I

		Reason 10.	releitai	
Referred from: -	Squint	Unequal Vision	All Others	TOTAL
Infant Welfare Centre	59	200-	1 }	463 (64%)
School Medical Inspection	69	114	220	40) (04%)
Inspection Clinic	67	28	126	221 (30%)
Hospital	29	-	9 }	tal aint sout
General Practitioner	7	an partor	1 }	46 (6%)
	231	142	357	730

The standards for unequal vision were taken as 6/18 or worse in one eye and 6/9 or better in the other eye, and children whose visual acuity was 6/12 or worse in each eye. Those who had symptoms such as headaches, excessive blinking, etc., are included in the third group.

Table II gives details of the ages at which the 231 children suffering from squint were referred for treatment.

TABLE II
Children referred on account of squint

	Age whe	n referre	ed for trea	tment	
Under 2 yrs.	2 - 4 yrs.	5 - 8 yrs.	9 - 12 yrs.	TOTAL	
24	35	Marin 35	14 To Text	59 }	(55%)
	19	40	10	69 )	
5	33	24	5	67 }	(2%)
2	22	3	2	29 }	(16%)
-	5	2	- 00	7 }	20,07
31 (13.4%)	114 (49.3%)	69 (29.9%)	17 (7.4%)	231	A LOOK
	2 yrs.  24  -  5  2  -  31	Under 2 - 4 2 yrs. yrs.  24 35 - 19 5 33 2 22 - 5	Under 2 - 4 5 - 8 2 yrs. 24 35 -  - 19 40  5 33 24  2 22 3  - 5 2	Under 2 - 4 5 - 8 9 - 12 2 yrs. yrs. yrs.  24 35  - 19 40 10  5 33 24 5  2 22 3 2  - 5 2 -  31 114 69 17	2 yrs. yrs. yrs. TOTAL  24 35 59 } - 19 40 10 69 }  5 33 24 5 67 } 2 22 3 2 29 } - 5 2 - 7 }  31 114 69 17 231

From this information it will be seen that: -

- (1) Over half (55%) were referred as a direct result of the activities of the staffs at the infant welfare centres and school medical inspection.
- (2) Almost one third (2%) were brought to the clinic by the parent, possibly having been prompted to do so by teachers. A few were also referred by opticians.
- (3) About one-sixth (16%) were referred by the general practitioners either directly or through the hospital service.

It will also be seen that almost 63% of the cases were referred before the age of 5 years.

Thus it is shown how important is the part played by the staffs of the child welfare and school health services in making an early diagnosis and, consequently, arrangements for adequate treatment.

#### Results of treatment.

Details have been tabulated to show the long term results of treatment by occlusion, both as a preventive and therapeutic measure.

Table III gives details of the visual acuity of children who are still on the books of the ophthalmic and orthoptic clinics and who have at some time worn some form of occlusion, and for whom it has been discontinued either (a) because normal vision has been acquired or restored or (b) where no further improvement could be obtained.

TABLE III

Final result of all children who have at some time worn some form of occlusion.

State of binocular vision

Termore of the on the second	Manifest deviation Fixation disparity	of 2.0.D. or more sphere, or 1.5 D or more cylinder.	Fully binocular Accommodative strab. Intermittent divergence.	TOTAL
Final acuity				
5/6 or better each eye	199	31	133	363
6/12 or worse each eye	11	To all and are	6	17
6/9 one eye 6/9 or better other eye	66	9	33	108
5/12 one eye 6/9 or better other eye	28	2	2	32
5/18 one eye 6/9 or better other eye	17)	atted on Pld and	20 10 12 mon	17
5/24 one eye 6/9 or better other eye	11 ) 55	inter a-parton of	916- 1 450	11
6/36 one eye 6/9 or better other eye		-	-	11
6/60 or less 6/9 or better other eye	16 )	100 00 00 00 00 00 00 00 00 00 00 00 00	DESCRIPTION OF	16
	359	1,2	174	575

From Table III it will be seen that 55 children out of a total of 575 failed to acquire at least 6/12 visual acuity in the squinting eye, and further investigation of these 55 cases showed that:-

- In 41 cases the occlusion had either not been worn properly, or had been worn for a time, and then further treatment refused. In 29 of these cases, however, there had been some improvement.
- (2) In 6 cases there was later found to be some pathological condition.
- (3) In only 8 cases was it felt that there had been no result from occlusion. In considering these cases it was revealed that the average age when occlusion was started was 5 years 8 months and that 5 cases had already developed eccentric fixation, 2 had poor fixation, and 1 had a marked degree of anisometropia.

Table IV gives details of the visual acuity of all children who had left school during 1955 and 1956, and whose acuity had been recorded at the age of fourteen years or over by the school nurses. Where there were ophthalmic records, these were also checked, so as to exclude, as far as possible, any error in recording.

#### TABLE IV

#### Visual acuity of 1497 school leavers 1955 and 1956.

6/9 or better each eye			1401	Kana ta Phia
6/12 or worse each eye	000		22	
6/12 one eye 6/9 or better	other eye		33	
6/18 one eye 6/9 or better		000	16)	
6/24 one eye 6/9 or better	other eye		7)	1.7
6/36 one eye 6/9 or better	other eye		9)	(2.7%)
6/60 or less 6/9 or better	other eye		9)	(20 170)
			1497	
			-	

0.6% had 6/60 or less visual acuity in one eye.

These statistics apply to all children in the town, regardless of where they received treatment, and whether or not they wore glasses.

It is shown that 41 cases (2.7%) had an amblyopic eye of 6/18 or less but only 9 (0.6%) had amblyopia of 6/60 or less.

The 41 cases were considered in detail, and the following facts were revealed:-

Treated privately			9	
High refractive errors		•••	4	
Artificial eye and eye injury			2	
Anisometropia - seen too late	•••		7 }	
Occlusion tried, but either started too late or not worn			}	22
properly		•••	15 )	
Treatment refused		•••	2	
Seen early - occlusion worn spasmodically			1 }	01 0
Seen early - no result from occlusion			1 }	2
			41	

From this information it would appear that a further 22 children might have left school with better sight had they been treated earlier or had there been better co-operation, and in only 2 cases was it felt that occlusion had produced no result.

#### Conclusion.

The purpose of this research was to obtain results of the work of the ophthalmic and orthoptic departments over a period of years, and also for the school population as a whole.

It is shown how valuable is the work of the child welfare and school health service in referring children early, and it is stressed again that early treatment is absolutely vital if the child population is to reach adult life with good sight in each eye.

In spite of what are considered to be good results of the work of the department there are still some parents who, for a variety of reasons, refuse treatment. Sometimes it is difficult for them to believe that the sight of a squinting eye can be lost. Often they have been told by others that the child will "grow out of" the squint,

and sometimes where treatment has been delayed and consequently the sight almost lost, they resent the handicap which the child must temporarily suffer if the "good" eye is occluded. They should consider the tragic handicap such a person would suffer if the sight of the "good" eye was seriously affected in later life through any unforeseen trauma or disease.

It is important that all people who are interested in the welfare of children should realize that treatment of a squint should be begun as a matter of urgency, no matter how young the patient may be and that any "waiting and seeing" so often advocated by many people, should be done, if at all, by the staff of an ophthalmic department, who, by their specialized knowledge and facilities, at least know what they are waiting for. To quote Sir Stewart Duke-Elder -

"No hesitation is ever felt in treating impending blindness from glaucoma as a matter of urgency, or in calling in all the forces of medicine to prevent the loss of central vision in a case of spreading choroiditis, but the blindness of amblyopia or the development of a central scotoma in a squinting child is too often dismissed with the vain hope that the patient "will grow out of it" or that the deformity (function being casually neglected) will eventually rectify itself".

#### THE PHYSIOTHERAPY CLINIC

The Assistant Orthopaedic Surgeon held 16 Consultant Clinic Sessions in the School Clinic premises. As practically all cases requiring orthopaedic treatment or hospital care are now dealt with in the Orthopaedic Clinic of Victoria Hospital, the children attending the clinic in the Elizabeth Street premises are mostly those who require physiotherapy and exercises. The types of cases dealt with are summarised below.

ton a period of yours, and a			School Children.	Pre-School Children.
New cases examined		000	39	12
Old cases examined			79	24
Attendances of old cases	0 0 0	000	147	59

CLASSIFICATION OF DEFECTS:-	School Children。	Pre-School Children.
Infantile Paralysis	9	The state of the state of
Spastic Paralysis	6	2
Deformities of feet -		
(a) talipes (b) other	8 34	1 11
Other deformities of lower limb	21	15
Spina Bifida	1	edonala-yl
Other deformities of spinal column	7	-
Torticollis	1	1
Schlatter 's disease	1	art an in-
Dislocation of hip joint	8	wenter - y be
Arthritic diseases	1	10301 -T
Tuberculous bone and joint disease	2	-
Traumatic and Postural conditions	3	1
Other conditions	16	5
	10-	In the same of
	118	36
	The state of the s	STREET, ST. STREET, ST.

Thirty two school children and 12 pre-school children were supplied with splints, plaster cases and other surgical appliances.

Two cases were receiving hospital treatment on 1st January, 1957; four were admitted to and four were discharged from hospital during the year, leaving two in hospital at the end of the year. The average duration of stay in hospital of those discharged was 249 days.

At the end of the year, 98 children remained on the register (81 school children; 17 pre-school children).

In addition to the treatment of patients on the Clinic Register, the physiotherapist gave remedial exercises, massage, breathing exercises, etc., to children with minor deformities and postural defects and post—operative tonsil and adenoid cases referred to her by the School Medical Officers.

The following children were referred by the school medical officers directly to the physiotherapist for treatment.

		School Children	Pre-School Children
No. of patie	ents	206	19
		-	
Treatments:	For remedial exercises	344	68
	For breathing exercises	1293	14
	For corrective treatment	40	11
	An are a second	_	MI Tonton
		1677	93
			100000000000000000000000000000000000000

The total attendances at the clinic were 2162

#### ARTIFICIAL SUNLIGHT -

	School Children	Pre-School Children	Total
No. of patients	. 26	19	45
No. of attendances .	. 264	116	380

## Report on the work of the School Dental Department.

#### By Mr. J. A. Pilling, L.D.S.

In the year under review, the Manchester Regional Hospital Board appointed Mr. Norman Wild as Consultant Orthodontist for the Burnley area, and made his services available to the Burnley School Dental Clinic for one session a week. This session is held jointly with the two whole-time dental officers. Mr. J. B. Jackson continues to attend for two sessions a week as dental anaesthetist, and the two full-time dental attendants complete the staff.

All the schools and nurseries have been visited, as well as the Local Health Authority's Occupation Centre at Gannow. A feature of the new schools is an inspection room, which makes for a better and more pleasant inspection. It is very difficult to carry out an inspection in a bad light, and with perhaps a practical class in progress at the same time. However, the head teachers have been most co-operative, and do their best to make things as comfortable as possible.

The general standard of dental health remains much the same and leaves room for greater improvement. Not enough attention is given to routine tooth cleaning, with the result that dental caries become rampant. It is presumed that sweets and snacks are necessary evils of modern times and better living, but surely these evils should be controlled. What encouragement can be given to a dentist when a child comes into the surgery for treatment with a block of chocolate in each hand as an inducement to accept treatment?

Only common sense, improved dietary habits and dental health education can bring about a needful change. To this end it is hoped to give in the near future, with the co-operation of the head teachers, more dental health talks in the schools, with the assistance of posters, films and film strips. The effort must be made, though the harvest may be unfruitful.

The nation has become television minded and at half-hourly intervals is regularly regaled with sights of lollipops, caramels, cakes and custards. To counteract the effect of these farinaceous foods, which encourage dental decay, are also displayed, with veiled and extravagant claims, many varieties of dentifrice. Yet recent research has established that no dentifrice contains any constituent that kills decay-forming bacteria. The only safe way to arrest decay is to remove the predisposing cause, primarily by brushing, and tooth pastes merely make tooth cleaning a more pleasant habit. Perhaps more startling and revolutionary propaganda is necessary to make the

nation aware of the poor state of its dental health. Mr. G. L. Slack, of the University of Liverpool, in a recent communication to the British Dental Journal. states -

"A close examination of the research work which has been reported does not reveal a dentifrice which will prevent dental disease .... The search for a therapeutic dentifrice should be regarded only as a temporary expedient in the prevention of dental disease .... In the meantime attention to diet, avoidance of between meal snacks, the invariable practice after eating and drinking of mouth rinsing three times with plain water, and tooth-brushing in the appropriate way using a dentrifice of personal choice afford the best-known methods of controlling the incidence of dental disease".

The time is fast approaching when something will need to be done in the matter of accommodation and equipment. A bright and shining dental waiting room can never be inviting, yet it is better than a dull one. The much used dental equipment is beginning to show signs of wear and tear and much equipment will have to be replaced in the near future.

Again there has been a big demand for casual treatment, and every effort is made to deal with it as expeditiously as possible, since relief of pain is a first consideration. Nevertheless, it could be considerably reduced if in many cases treatment was accepted when offered, instead of waiting for the onset of acute pain.

The appointment of Mr. Wild in a part-time capacity was a timely aid in the diagnosis and treatment of orthodontic cases. His eminently practical help is already showing results.

We are indebted to Mr. F. Taylor Monks, the dental consultant at Victoria Hospital, for his advice on and treatment of selected cases.

During the year a visit was arranged for a number of High School Girls to the Manchester Dental Hospital and Turner Dental School. Two talks were given on school dentistry to the Rotary Club of Nelson and the Nelson Round Table.

Many factors have contributed to the efficiency and smooth running of the service, none more so than the efforts of the loyal and capable dental attendants. The assistance given by the staff of the X-ray Department of Victoria Hospital, heads of schools and all who have contributed a share in this important work is much appreciated.

Though the work seems unrewarding at times, no pains are spared to ensure an efficient and helpful dental department.

	Number ins	-	Not Requiring Treatment				Requiring	th Defects g Treat- ent
Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
6003	5798	11801	3667	3664	7331	2336	2134	4470

Number found, at school is	nspectio	n, to	require		
Number of casual attender		 quired		•••	4470
treatment		••	•••		1537
	Т	otal	•••	•••	6007
					-
					3459 5620
Attendances by pupils for	treatme	nt	•••	•••	9020
Parents indifferent and no or treatment received prin				1	
or town					1819

Dental Treatment given: -

	Fil	lings	Extractions			Adminis- trations	Other Operations			
Temp- orary Teeth	anent	Total Fillings	orary	Perm- anent Teeth	Total Extra- ctions	of General Anaes- thetics for Ex- tract- ions.	Temp- orary Teeth	Permanent Teeth	Total other Oper- ations	
18	1160	1178	4759	1449	6208	2692	10	945	955	

No.	of	orthodontic cases under treatment on 1.1.5	7.			31
No.	of	orthodontic cases commenced during the year	r			41
No.	of	orthodontic appliances provided (49 patient	ts)			54
No.	of	repairs or alterations to appliances				5
No.	of	cases undergoing orthodontic treatment on	31.12.	57.		23
No.	of	other appliances provided - Crowns				2
		Inlay			000	-
No.	of	partial dentures provided (17 patients)				17
Repa	airs	s to partial dentures				11
No.	of	patients whose treatment was completed				
	or	discontinued	0 . 0			49

Camp School. The permanent Camp School at Hest Bank, near Morecambe, was opened on 29th March and closed on 11th October. Three hundred and fifty one boys and 189 girls were sent to camp for a fortnight each. This entailed the medical examinations of 554 children.

Convalescent Home. The Thursby Convalescent Home at Lytham-St. Annes, was open for the reception of children from 23rd April to 15th October. Fifty eight boys and 63 girls from Burnley were selected and sent to the Home for periods of two weeks.

#### PROVISION OF MEALS AND MILK.

M. Com	1000			-21	-	
Mea		d oo h	V 48 11	O II		3 600
MA COL	-		Y		Cu	

Page 15			During year ended 31,12,57.	During year ended 31.12.56.
Breakfas Dinners Teas	ts (app	orox.)	149,814 1,167,702 225,078	178,209 1,170,135 280,033
			1,542,594	1,628,377
			-	

The reduction of 85,783 meals provided as compared with that of the previous year is in the main due to fewer breakfasts and teas having been taken. This no doubt was a consequence of the recession in the cotton industry, fewer mothers having been in full-time employment.

The highest number of children receiving meals in any one week was 30,154, and the lowest 26,102, the average, excluding holidays, being 28,128.

Milk. In December, 1957, 11,100 children (7,849 Primary and Nursery, 3,103 Secondary and 148 Special), received milk. Thus about 80% of the school children were receiving milk at the end of the year.

In accordance with the recommendations of the Ministry of Education in Circular 1443, for the selection of children requiring supplementary nourishment, periodical nutrition surveys were continued.

Cod Liver Oil. One hundred and seventy five children received cod liver oil and malt preparations (total 408½ lbs.) and vitamin preparations.

School Baths. The Education Committee arrange for the attendance of classes of children at the Public Swimming Baths, usually during school hours. Seventy nine thousand eight hundred and seventy seven attendances were made at the three swimming baths, compared with 83,903 last year.

School Journeys. Bus tickets are provided by the authority to enable children to travel free on public service vehicles to and from the School Clinic, the Open Air School, the Special Day School for Educationally Subnormal Pupils and the special classes in day schools.

#### HANDICAPPED PUPILS.

The statistical table on the following pages gives numbers of handicapped children and the types of schools in which they were being educated, on 31st January, 1958.

Educationally Sub-normal and Maladjusted Pupils. On the above date, 80 educationally sub-normal pupils were receiving education in special schools, 77 being in attendance as day pupils at Coal Clough Special School, the other three being in residential special schools. Seventeen educationally sub-normal pupils who required special education were ascertained during 1957 and 23 were transferred to special schools.

Fourteen children left the Day Special School for Educationally Sub-normal Pupils during 1957. Of these, nine reached school-leaving age and commenced work. Three were reported to the Local Authority for Mental Deficiency. One pupil was transferred to an ordinary school and one to the Open Air School.

Eight children were reported to the Local Health Authority during the calendar year, under Section 57(3) of the Education Act, 1944.

On 31st December, 1957, there were 40 mentally defective children under 16 years of age as follows:-

	Boys	Girls	Total
Under Statutory Supervision Under Voluntary Supervision In Hospitals	 10 3 6	15 5 1	25 8 7
	19	21	40

Five boys and nine girls were in attendance at the Local Health Authority's Occupation Centre for ineducable defectives, at the end of 1957.

Wennington Hall Residential Special School for Boys which is controlled jointly by Blackpool, Bury, Barrow-in-Furness and Burnley Education Authorities was opened in October, 1954. Seven maladjusted boys were on the School Register on 1st January, 1957. During the year one boy was newly placed, leaving eight Burnley boys resident in the School at the end of the year. The admission of another boy was arranged for early in January, 1958.

41

## Handicapped Pupils requiring Education at Special Schools

During the Calendar Year ended 31st December, 1957 Handicapped Pupils who:-	(1) Blind (2) Partially Sighted (1) (2)		ially Deaf.		(5) Delicate (6) Physic- ally Handi- capped. (5) (6)		(7) Education- ally sub-normal (8) Mal- adjusted. (7) (8)		(9) Epi- leptic	Total
A. Were newly placed in Special Schools (other than Hospital Special Schools) or Boarding Homes	1				23		23	2	TA ME CONTROL	10
B. Were newly assessed as needing special educational treatment at Special Schools or in Boarding Homes.	1	-	-	-	23	-	17	2		49
On or about 31st January, 1958 how many handicapped pupils from the Authority's area:- C.(1) were on the registers of special schools as (a) day pupils		1	-	-	100		77		THE SPECIAL SECTION OF	177
(b) boarding pupils	3	-	6	4	-	5	3	10	2	33
(ii) were on the registers of independent schools under arrangements made by the Authority.  (iii) were boarded in Homes and not already included under (i) or (ii)					-				testown is batter test by the test of test of the test	to the later to the control of the c
TOTAL C.	3	-	6	4	100	5	80	10	2	210

During the Calendar Year ended 31st December, 1957 Handicapped Pupils who:	200	nd tially hted	1	eaf eart- ally eaf	(6) Ph al Ha	licate ysic- ly ndi- pped	not (8) Ma	nally mal	(9) Epi- leptics	Total
D. were being educated under arrangements made under Section 56 of the Education Act,	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	The same
1944 (i) in hospitals	-	-	-	-	-	4	-	-	-	4
(ii) in other groups (e.g. units for spastics, convalescent homes)		3	-	-		-	-			one and
(iii) at home	1	-	-	-	-	2	-	-	-	3
e. were requiring places in special schools - (i) total (a) day			-	-			7.	-		7
(b) boarding	1	-	-	-	-	1	1	1	-	4
pupils are included in the totals above - (11) who had not reached the age of 5:  (a) awaiting day places			-		-	-	-			TO MY
(b) awaiting boarding									and the second	R MILES
places							-			- 100 W 100
(111) who had reached the age of 5 but whose parents had refused consent to their adm mission to a special school:									registers realized street english	
(a) awaiting day places (b) awaiting boarding places	-				-	1	-		200	1

DEAF CHILDREN. In December, 1957, the number of deaf and partially deaf children being educated in residential special schools were:

	Deaf.	Partially Deaf.
Lawns House Residential School for the Deaf, Leeds	1	bra evod manha
Royal Cross School for the Deaf,	my best feet	colon may cont
Preston Thomasson Memorial School for the	1	3
Deaf, Bolton	-	1
Royal Residential School for the Deaf, Manchester	4	

During the year one partially deaf boy left the Royal Cross School for the Deaf, Preston, to work with a light engineering firm. There were no new admissions during the year.

BLIND CHILDREN. In December, 1957, the number of Blind and Partially Sighted children being educated in residential special schools were:

schools were: -	Blind.	Partially Sighted.
Henshaw's Institution for the Blind, Manchester	1	
Wavertree Residential Special School for the Blind, Liverpool	2	A

During the year one partially sighted boy left the Preston School for Partially Sighted Pupils and commenced work in a local shoe heel manufacturing firm, polishing shoe heels.

One boy was ascertained as blind and admitted to the Wavertree Residential Special School for the Blind, Liverpool. A blind girl who is also educationally sub-normal was receiving home tuition at the end of the year.

EPILEPTIC CHILDREN. In December, 1957 the number of epileptic children being educated in residential special schools were:

Soss Moss Resid	dential Spec	ial School	ol for Epilepti	les,	100
Chelford			•••		1
Sedgwick House	Residential	Special	School for		-
Epileptics,	Kendal		•••	•••	1

During the year one boy left the Residential Special School of the Maghul Homes for Epileptics, Liverpool, to take up work in the drawing office of a local light engineering firm. There were no new admissions during the year.

Fourteen boys and six girls who suffer from epilepsy were in attendance at ordinary day schools at the end of the year. Of these, eight suffer from major, and twelve from minor epilepsy. Fourteen have been under supervision for several years and six were new cases.

DIABETIC PUPILS. Only one school child is known to be suffering from diabetes, and during the year he was able to continue attendance at an ordinary day school.

#### EDUCATION IN HOSPITAL.

On the 7th October, 1957, an arrangement came into operation, by which the Local Education Authority provides education for children of school age who are undergoing treatment in the Children's Medical Ward of Burnley General Hospital.

Children are received into the hospital from Burnley County
Borough and the adjoining part of Lancashire County. A teacher and
equipment is provided by the Burnley Education Authority, and the cost
of education of children normally resident in Lancashire County is
charged by the Burnley Education Authority to the Lancashire County
Education Authority.

An average of not more than 10 or 12 children of school age are fit to receive education at any one time. Education is given for five two-hour sessions each week during school terms.

#### CHILD GUIDANCE.

The Educational Psychologist left at the end of September, 1957, to take up an appointment elsewhere, and his successor did not commence duties until 1st January, 1958.

During the first nine months of 1957 a total of 158 children made 281 visits to the Clinic. Another 49 children were tested in their schools. In addition a small number of cases were dealt with satisfactorily by visits to schools and homes without attendance at the Clinic.

The cases can be classified under the main headings: -

- 1. Habit, nervous and behaviour disorders. Twenty seven cases made a total of 83 clinic attendances. A further 11 children were seen at school and in their homes, but did not attend the Clinic.
- 2. General educational difficulties. Seventy four children made 141 visits to the Clinic, while another 15 were seen in their schools. These children were referred mainly by head teachers because of general educational backwardness. In each case the child was given a series of individual tests of ability and attainment, and on the basis of these results a recommendation was made as to the type of special educational provision most suited to his needs.

The reading centre, the special classes for backward children and the special school for educationally sub-normal children all provide special educational opportunities but at different levels.

3. Backward readers. In connection with the reading centre at Stoneyholme School 57 children were seen at the Clinic, and a further 34 were tested in their own schools.

In September, 1957, 56 children were attending the reading centre, and there was also a waiting list of approximately 50 children. It was not possible to provide for these within the existing centre, but it is hoped that next year another centre will be available.

The work of the Psychiatric Social Worker has been of great value, and she was personally concerned with about 40 of the above cases, making the first contacts by visits to the homes. She also worked on 15 cases, which are not listed above, either because it was considered that they could be best dealt with by advice given during visits to the home, or because they had just been initiated and the Educational Psychologist had not yet been involved.

In connection with the cases in (1) and (2) above, the Educational Psychologist made 76 visits to schools.

The Educational Psychologist made the following recommendations during the year in respect of children seen at the Clinic and classified under (1) and (2) above:-

To remain in present school	 	8
To remain in present school, progress to be noted	 	16
For education in day special school for E.S.N. pupils	 	13
For education in special classes for backward children	 	13

For reporting to the Local Authority as ineducable defectives .		4
For education in residential special school for maladjusted pup		1
To remain in residential special school for maladjusted pupils		1
For release from special school to ordinary school		1
For exclusion from school for 1 year		
For period in nursery class		1
For referral to the Paediatrician through the School Medical		
Officer		
For remedial teaching at the Clinic		
For observation of children and advice to parents over period		
Reports for various agencies		
Tested and head teachers advised of findings	• • •	
Advice to parents	•••	12
	-	707
	1007	101

#### TREATMENT OF SPEECH DEFECTS.

During the year the school medical officers referred 64 new cases to the speech therapist. In addition to the children already under treatment and 26 cases awaiting treatment at the end of 1956, 38 of these 64 cases were accepted for treatment, thus leaving 26 new cases on the waiting list at the end of the year.

During the twelve months under review, 209 school children were given treatment for speech defects. Of this number, 109 were dyslalics, 78 were stammerers, 14 were cases of delayed speech development, 4 had cleft palate and 4 had other voice disorders.

By the end of the year, 79 patients had been discharged from treatment, 65 as cured and 12 had left school or the Borough before the completion of treatment. Two children were discharged owing to persistent non-attendance. Eleven children were under observation only.

Of the 209 school children, 144 were boys and 65 girls - 187 were in attendance at primary and secondary schools, and 22 attended special schools. These children made a total of 2,727 attendances for speech therapy. One session was devoted to visiting schools to check on progress and confer with teachers. The therapist also interviewed and advised 84 parents with regard to their children's speech defects at the clinic.

In addition, 5 pre-school children were under treatment for speech defects, two being cases newly referred during the year.

Of the five children, 4 were referred for delayed speech development and 1 for stammering. These children have all progressed quite well, and taking their age into account have now been placed under observation. They made a total of 15 attendances. Of the five, 3 were boys and 2 were girls.

"LIGHT THERAPY". Twenty-six children were given 264 treatments at the School Clinic, and 2 children referred by the School Medical Officers were given 32 treatments at the Burnley General Hospital.

DELICATE PUPILS. Twenty-three children were ascertained for the first time during 1957, classified as "delicate" and transferred to the Day Open Air School.

THE DAY OPEN AIR SCHOOL, in which delicate children and others handicapped in various ways are educated, dealt with the following cases during 1957:-

	Boys	Girls	Total
Admitted during 1957	9	14	23
Discharged during 1957	19	11	30
Average number of children on roll			111
Average attendance throughout the year			91
Average duration of stay of those discharged	La Terrino	3 у	ears 9 months
Average gain in weight since admission of those discharged		25.0	O lbs.
Average gain in weight per child during the	year	6.	6 lbs.
Reasons for Admission:-			

Bronchiectasis				. 1
General Debility				10
Asthma			•••	2
Disease of the Hip				1
Retarded Physical 1	Develo	pment	•••	1
Asthenia				1
Perth's Disease				1
Tuberculous Glands				2
Migraine				1
Spastic				1
Nervous Debility				1
Paralysis of Lower	Limbs			
(Poliomyelitis in	Infar	ncy)	•••	1
of green waters 1715-ray				23

PHYSICALLY HANDICAPPED PUPILS. At 31st December, 1957 two physically handicapped pupils were receiving home tuition; one of these was considered to require education in a residential special school, but the parents were not prepared to give their consent. None were admitted to residential special schools during the year. Five pupils were in boarding schools at the end of the year.

In addition to these, one hundred and ten children, who were to varying extents physically handicapped, did not come within the "physically handicapped" category prescribed in The Handicapped Pupils (Certificate) Regulations, 1953, as they could be satisfactorily educated under the normal regime of ordinary schools.

TUBERCULOSIS. All cases of definite or suspected respiratory tuberculosis were referred to the chest physician, who arranged for appropriate treatment or supervision.

#### MISCELLANEOUS.

Medical inspection or treatment of pupils attending the Municipal College and School of Art as part-time students, and Evening Continuation Classes is not undertaken.

Six children were submitted to the school medical officer for medical examination regarding fitness to take part in entertainments.

The school medical officers examined 142 children under the Byelaws for regulating the Employment of Children and Street Trading.

For list of other miscellaneous examinations carried out see page 15.

I am indebted to the Director of Education for the following information: -

Employment of children out of school hours in the sale of milk and newspapers, etc.

Occupations.	Number of children employed at 31st December.
Delivery of Newspapers	224
Delivery of Milk	8
Carrying or Delivery of Food or Parcels	16
	248

Two hundred and forty-eight certificates were issued during the year and 15 had ceased. No licence was granted in respect of street training by a young person between the ages of 16 and 18 years. No licence was suspended or revoked, and one was refused.

#### MINISTRY OF EDUCATION

## MEDICAL INSPECTION RETURNS YEAR ENDED 31st DEECMBER, 1957.

#### LOCAL EDUCATION AUTHORITY, BURNLEY.

Table 1.

# Medical Inspection of Pupils attending maintained Primary and Secondary Schools (including Special Schools)

#### (A) PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and number of children examined in each.

Entrants						1411
Second Age	Group					1686
Third Age	roup	780	•••			1068
			Total			4165
Additional	Periodio	Inspec	tions			471
			Grand	Total	• • • •	4636
(B)	)	OTHER	INSPECT	rions.		
No. of Spec	cial Insp	ections				1340
No. of Re-	inspection	ons				3965
			Total		•••	5305

## (C) PUPILS FOUND TO REQUIRE TREATMENT.

Number of individual pupils found at periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (1)	For Defective Vision (excl- uding Squint)	For any of the other conditions recorded in Table III A	Total individual pupils (4)
Entrants	20	163	181
Second Age Group	80	167	242
Third Age Group	50	69	116
Total	150	399	539
Additional Periodic Inspections	12	53	65
Grand Total	162	452	604

# (D) CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE 1 A.

Age Groups Inspected	Number of Pupils	Satisfactory		Unsatisfactory		
	Inspected	No.	% of Col.(2)	No.	% of Col.(2)	
(1)	(2)	(3)	(4)	(5)	(6)	
Entrants	1411	1403	99.4%	8	0.6%	
Second Age Group	1686	1684	99.9%	2	0.1%	
Third Age Group	1068	1067	99. %	1	0.1%	
Additional Periodic Inspections	471	470	99.8%	1	0.2%	
Total	4636	4624	99.7%	12	0.3%	

## TABLE II

#### INFESTATION WITH VERMIN

(i)	Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	0 • 0	45535
(ii)	Total number of individual pupils found to be infested	000	837
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)		44
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	•••	19-

TABLE III

## RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1957.

## A. PERIODIC INSPECTIONS.

Defect	Defect or		Periodic	Inspections		TOTA			
Code No.	Di sease	Entrants			Entrants		rs	(including age groups	all other
NO.	(9) (9)	Requiring Treat- ment	Requir- ing Obser- Vation	Requiring Treat- ment	Requiring Obser- vation	Requiring Treatment	Requiring Obser- vation		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)		
4	Skin	10	97	18	40	64	248		
5	Eyes =								
	a. Vision	20	40	50	43	162	171		
	b. Squint	20	23	4	12	46	74		
	c. Other	2	8	-	5	5	27		
6	Ears =	1	1 200				A SA		
770	a. Hearing	3	17	2	7	10	43		
	b. Otitis Media	2	40	5	5	12	91		
	c. Other	9	19	4	2	29	38		
7	Nose and throat	31	423	2	38	57	792		
8	Speech	19	27		4	30	55		
9	Lymphatic glands	2	22		2	2	47		
10	Heart	4	21	1	8	7	47		
11	Lungs	15	106	8	16	40	210		
12	Developmental -	-	The state of the s	1	The same	Comment of the last			
	a. Hernia	-	12	1	-	3	23		
	b. Other	1	39	1	10	10	115		
13	Orthopaedic -	400 4750	12 4000	A COURT OF	1000000	100000000000000000000000000000000000000	1000		
	a. Posture	4	13	-	6	8	32		
	b. Feet	9	10	8	3	22	20		
	c. Other	1.7	90	15	29	71	204		
14	Nervous System -	1	1 Anna	1000 000	The same of	-			
	a. Epilepsy	2	2	100	1	5	11		
	b. Other	4	58	-	30	9	219		
15	Psychological -		The same		1	12396	110000		
	a. Development		-			3	-		
	b. Stability	2	3	-	-	3	8		
16	Abdomen		2	1	1	2	10		
17	Other	11	5	1	1	35	20		

## B. SPECIAL INSPECTIONS.

Defect	Defect or		Special Inspections			
Code No.	Disease.		Requiring Treatment.	Requiring Observation.		
(1)	(2)		(3)	(4)		
4	Skin		120	8		
5	Eyes - a. Vision b. Squint c. Other	•••	174 26 30	31 4 16		
6	Ears - a. Hearing	1	8	6		
- N 00 F	b. Otitis Med		1	1 6		
	c. Other	•••	43			
7	Nose and Throat	•••	85	14		
8	Speech		20	15		
9	Lymphatic Glands	•••	8	5		
10	Heart		1	4		
11	Lungs	•••	23	12		
12	Developmental - a. Hernia b. Other	••••	-	2		
13	Orthopaedic - a. Posture b. Feet c. Other	••••	3 11 25	2 4 11		
14	Nervous System - a. Epilepsy b. Other	••••	- 3	7		
15	Psychological - a. Developme b. Stability	200	18	2000 -200		
16	Abdomen	000	2	3		
17	Other	0 0 0	242	13		

#### TABLE IV

# TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

GROUP 1. EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with		
	By the Authority	Otherwise	
External and other, excluding errors of refraction and squint	24	9	
Errors of refraction (including squint)	1010	129	
Total	1034	138	
Number of pupils for whom spectacles were prescribed	703	120	

#### GROUP 2. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

		Number of cases known to have been treated		
		By the Authority	Otherwise	
Received operative treatment				
(a) for diseases of the ear	000		1	
(b) for adenoids and chronic tonsillitis	0 • 0	36	105	
(c) for other nose and throat conditions		14	13	
Received other forms of treatmen	it	3	24	
Total	0 • 0	53	153	
Total number of pupils in school who are known to have been provided with hearing aids	Ls			
(a) in 1956 (b) in previous years	000		5	

## GROUP 3. ORTHOPAEDIC AND POSTURAL DEFECTS.

	By the Authority	Otherwise
Number of pupils known to have been treated at clinic or out-patients departments	85	26

# GROUP 4. DISEASES OF THE SKIN (excluding uncleanliness for which see Table II).

O PAR AND ADDRESS OF	190	Number of cases treated or under treatment during the year by the Authority
Ringworm - (i) Scalp	•••	
(ii) Body Scabies	•••	
Impetigo		41
Other skin diseases		69
Total	• • •	110

## GROUP 5. CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	27
made by the Authority	-1

## GROUP 6. SPEECH THERAPY.

Number of pupils treated by Speech Therapists under arrangements made by the Authority	209

## GROUP 7. OTHER TREATMENT GIVEN

(a) Number of cases of miscellaneous minor ailments treated by the Authority	340
(b) Pupils who received convalescent treatment under School Health Service arrangements	SHOPE TO LANCE
(c) Pupils who received B.C.G.vaccination	582
(d) Other than (a) (b) and (c) above (specify)	129
1. Minor Ear Defects	39
2. Artificial Light	26
Total (a) - (d)	987

58 boys and 63 girls of school age received convalescent treatment under Section 28 of the National Health Service Act, 1946.

#### TABLE V

		TABLE V			
	DENTAL INSPECTION AND TR	EATMENT	CARRIED	OUT BY	THE AUTHORI
(1)	Number of pupils inspected by	the Auth	nority's	Dental	Officers:-
	(a) At Periodic Inspections (b) As Specials	Total	 (i)		11801 1537 13338
(2)	Number found to require treatm	nent			6007
(3)	Number offered treatment	•••			5458
(4)	Number actually treated				3459
(5)	Number of attendances made by treatment, including those recheading ll(h) below				5620
(6)	Half days devoted to: Periodi Treatme			ection	101 862 963
(7)	Fillings: Permanent Teeth Temporary Teeth	Total	··· (7)		1160 18 1178
(8)		nent Tee rary Tee Total	th		1151 17 1168
(9)	Extractions: Permanent Teeth Temporary Teeth	Total	(9)		1449 4759 6208
(10)	Administration of general anae for extraction	sthetics	•••		2692
(11)	Orthodontics:  (a) Cases commenced during to (b) Cases carried forward from (c) Cases completed during to (d) Cases discontinued during (e) Pupils treated with application (f) Removable appliances fit (g) Fixed appliances fitted (h) Total attendances	om previ the year ng the ye liances	ous year	•••	41 31 39 10 49 27 27 402

(12)	Number of pupils supplied with artificial						
	dentures						17
(13)	Other operations:						
		ent Teeth				a Spead	945
	Tempor	ary Teeth			•••	•••	10
				Tot	al (13)	- Pomor	955