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City and County of the City of Chester

## ANNUAL REPORT

TO THE

MAYOR, ALDERMEN AND COUNCILLORS OF THE CITY AND COUNTY OF THE CITY OF CHESTER

On the Health of the City

and the

Work of the Health Department in 1972

BY

D. F. MORGAN, M.B., Ch.B., D.P.H., Medical Officer of Health.

Together with the Report of the CHIEF PUBLIC HEALTH INSPECTOR G. E. JARVIS, F.A.P.H.I., F.R.S.H.





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## HEALTH COMMITTEE, 1972

## Chairman: Councillor D. A. Ll. Jones

## Deputy Chairman: Councillor E. R. Lowe

#### Members:

Alderman Leonard Edwards

Alderman F. R. Cleeves

Councillor E. Margaret Nussey

Councillor Delia Rooks

Councillor S. Pickstock

Councillor Florence M. Grogan

Councillor T. H. Tomlins

Councillor W. T. Griffiths

## Co-opted Members:

Dr. A. E. Elliott Councillor Fred Barker
Mr. J. M. Pott

## STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health	D. F. Morgan, M.B., Ch.B., D.P.H.
Deputy Medical Officer of Health	Thelma R. Asfour, M.B., Ch.B., D.P.H.
Medical Officer in Depart- ment	Aine Conway, M.B., Ch.B., D.P.H.
Chief Public Health In- spector	G. E. Jarvis, F.A.P.H.I., F.R.S.H.
Principal Nursing Officer	Miss D. E. Paddon, M.B.E., S.R.N., S.C.M., H.V., Q.N.
Chief Clerk	R. W. Hudson
Ambulance Officer	S. Chesters

Telephones: Chester 27161

25142

25167

HEALTH DEPARTMENT, ST. MARTIN'S HOUSE, CHESTER. CH1 2BA

To the Mayor, Aldermen and Members of the City Council.

Dear Mr. Mayor, Ladies and Gentlemen,

One could well imagine that the approaching re-organisation of Local Government and the National Health Service might have caused lowering of standards in the existing Health Services, but the reverse has, in effect, been the case. Following advice from the Department of Health and Social Security on the upkeep of the services and on the efficient employment of trained personnel, it became apparent that the intention was to maintain and improve the services. Better than this, however, Local Health Authorities were encouraged to proceed with Health Schemes in the knowledge that these would be taken over in 1974 without any residual financial burdens.

Thus we were able to proceed with developing new Health Centres at Lache and Boughton, to consider the provision of clinics in Handbridge, building a new Ambulance Station to replace the existing one built in 1951, and to examine accommodation needs of Doctors in City Practices.

There were improvements in Family Planning, in Health Education in schools and clinics, and in cervical cytology follow up. Immunisation against Rubella (inter alia) was continued; a campaign against V.D. was begun, and investigation into possible hazard from lead in the City was commenced.

Training of staff for the forthcoming re-organisation had to be arranged, but with all personnel fully occupied with day to day running of the existing services, none could be spared to transfer to the new Cheshire Area Health Joint Liaison Committee. This was a matter for some regret, as some Local Authorities had been able to make this provision, with obvious advantage to their staffs when the new Health Authorities appoint their officers. Financial problems even made it necessary to withdraw some staff from Training Courses they wished to attend. Nor was it possible to offer the Joint Health Liaison Committee the amount of accommodation it needed—though it must be noted that considerable accommodation for the new N.H.S. will be transferred to the Area Health Authority in 1974.

This situation should be regarded as a measure of the efficiency and economy of the single tier Government of County Boroughs which, alas, will disappear after 31st March next.

Under the new administration, the three widely differing parts of the Health Service—General Medical Practice, Hospitals and Local Authority services—will be co-ordinated at District level. It is sincerely hoped that the service to the population—which after all is the whole object of the N.H.S.—will benefit by the administrative and boundary changes proposed.

The staff has been re-assured about its tenure of office, though there are not many newcomers into the service, and it is difficult to see from where experienced administrative officers of the future will be drawn when existing personnel reach retirement.

Once again our gratitude is due to the Health Committee for a year of wise counsel and good guidance; and to the staff of the Health Department for the spirit in which it has worked. It is with pleasure, too, that I recall that during 1972, Miss Paddon, our Director of Nursing Services, was awarded the honour of M.B.E. for her services in public health.

Yours faithfully,

D. F. MORGAN,

Medical Officer of Health.

## GENERAL STATISTICS

The state of the s	O.L. ILL		.01100	
Area in Acres				4659
Population (Registrar Go	eneral's es	stimate)		62320
Number of inhabited ho	uses .			21640
Rateable Value			***	£3901566
Sum represented by 1p i	rate .			£37468
	VITAL	STATIS	TICS	
Live Births	VIIII	SIMIIS	1103	Birth Rate per 1,000
	Male	Female	Total	Population
Legitimate	460	393	853	
Illegitimate	71	67	138	
Totals	531	460	991	15.9
Illegitimate Live Births Percentage of Total L	ive Births			13-9
Still Births				Still Birth Rate per 1,000
our bittis	5	-	12	(Live and Still) Births
Live and Still Births	,	7	12	12.00
Totals	536	467	1003	
Deaths				Death Rate per 1,000
Deauis				Live Births
All Infants	14	9	23	23.00
				Death Rate per 1,000
Legitimate Infants	11	6	17	legitimate Live Births 20.00
and the second		Annaly man		Death Rate per 1,000
Surface and the surface and th		(3.51)		illegitimate Live Births
Illegitimate Infants	3	3	6	43.00
Neonatal				Death Rate per 1,000 Live Births
(first 4 weeks)	5	6	11	11.00
Early Neonatal				
(under 1 week)	5	5	10	10.00
Peri-Natal				Death Rate per 1,000
(Still Births plus I		11/2/20		Live and Still Births
	10	12	22	22.00
				Death Rate per 1,000 Total (Live and Still)
Maternal (including				Births
abortion)	_	_	-	0.00
				Death Rate per 1,000 Population
All Causes	398	339	737	11.8
				Death Rate per 1,000 Population
Respiratory Tubercule	osis —	_		0.00
respiratory rustream	00.0			Death Rate per 1,000
Other forms of				Population
Tuberculosis	-	-	-	0.00
				Death Rate per 1,000 Population
Cancer	86	62	148	2.4

## POPULATION AND VITAL STATISTICS

The decline in population from 62,700 to 62,320 will be noted but the crude Birth Rate of 15.9 is above the figure for England and Wales (14.8).

### Illegitimacy

The percentage of illegitimate births in 1972 was 13.9. This is by far the highest illegitimacy figure recorded in the City and means that approximately one out of every seven births in 1972 was illegitimate.

The following table gives the previous years:-

1960	 	 	 		5.1
1961	 	 	 		6-1
1962	 	 	 		7-3
1963	 	 	 		6.3
1964	 	 	 		8.2
1965	 	 	 		8-4
1966	 	 	 		8.8
1967	 	 	 		9.5
1968	 	 	 		10-4
1969	 	 	 		10-5
1970	 	 	 -		12.3
1971	 	 	 ***	****	10-3
1972	 	 	 		13.9

## DEATH RATE

Seven hundred and thirty-seven deaths give a crude Death Rate of 11.8 (which, when adjusted, became 12.5) and compares with 11.5 and 12.7 for last year, and 12.1 for England and Wales in 1972.

Cancer of the lung remained the same at 47 deaths (41 males and six females).

Motor vehicle accidents claimed ten victims and all other accidents seven. (Figures for 1971 were nine and three). Suicides at five compare with four last year. There were no maternal deaths.

## Deaths from Cancer of Lung and Bronchus

Year	No. of Deaths from Lung Cancer	Males	Females
			2
1960	21	19	4
1961	37	33	4
1962	35	29	6
1963	36	31	5
1964	39	37	2
1965	30	26	4
1966	43	35	8
1967	47	35	12
1968	47	39	8
1969	46	38	8
1970	56	47	9
1971	47	38	9
1972	47	41	6

igure of 138);

## Illegitimacy (page 8)

The number of illegitimate births in 1972 (138), which gave a figure of 13.9%, includes 51 births to people at St. Bridget's Mother and Baby Home, Chester, which should strictly have been transferred to their home addresses in other Health Authorities.

The number of City illegitimate births in 1972 was 87, giving an illegitimacy percentage of 9.3.

## INFANT MORTALITY

The Infant Mortality Rate of 23.00 is still much higher than the figure of 17.00 for England and Wales.

Prematurity was still the commonest cause of death.

The causes of death of these 23 infants were as follows:-

Prematurity							 6
Congenital Ano	malies	3					 8
Acute Infection: (Meningitis, I		halitis,	Bronch	 o-pneu	monia,	etc.)	 5
Gastro-enteritis							 3
Other							 1
							23

								-					1	0		_				-1	-1	-		_				_	
75 &	Over			7 7	0.4		, 1	4	m	1	1	9	2	2	-	-	1	1	1	2	2	2	41	23	2	-	_	24	4 -
68	74	1			4	-	1	1	4	1	1	4	1	1	1	1	1	-	1	1	-	2	17	8	18	7	1	9	- 1
55	4			-	-	-	1	1	2	3	1	4	1	1	1	1	1	1	1	1	2	1	00	-	11	-	1	-	- 1
1 2 4	54			11	1	1	1	-	-	1	1	4	1	1	1	1	-	1	1	1	-	1	3	-	2	1	1	2	-1
in Yes	‡			11	1	-	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11
A L E	34			11	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11
FEMA	77			11	1	1	1	1	1	1	1	L	I	1	1	1	1	1	1	-	1	1	1	-	1	F	1	1	11
1	*				1	1	1	1	1	1	-	I	1	1	1	1	1	-	-	1	1	1	1	1	-	1	1	1	11
11.					1	1	1	1	1	1	-	1	1	1	4	1	1	-	1	1	1	1	1	1	I	-	-	1	11
Under 1	year	-			-	1	,	1	1	1	1	1	1	1	1	1	1	-	1	1	1	1	1	1	1	1	1	1 -	11
THE RESIDENCE		1			-	~	-	- 5	-	-	-	- (	-	-	1	-	-	-	1	-	- 5	1	-	-	1	-	-	+	
UV	20	-		4 4			-	,	10		-	20	***	(4)						5	•	4	69	33	5.5	15		32	
75 &	Over	1				3	1	00	1	1	2	4	-	3	1	T	1	1	1	-	2	1	31	6	20	2	1	18	∞
65	.	1		1 1	3	9	-	20	1	1	-	4	1	2	1	1	1	1	1	1	1	4	39	9	13	9	1	7	13
55	1	1		10	3 1	4	1	5	1	1	-	4	1	1	1	1	1	1	-	1	1	1	24	-	00	7	1	3	21
E\$;	6	1		1	-	2	1	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	7	-	2	-	1	1	1.1
Age in Ye	:	1			1	1	1	1	1	1	1	1	1	1	1	1	1	I	1	-	1	1	4	1.	.1	1	1	1	11
L.E.	5	1			1	1	1	-	1	1	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11
M A M 15- 2	5	1		11	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	_	1	1	1	1	1	1	1	1	11
1	5	-		1 1	1	1	1	1	1	1	1	1	1	1	1	1	P	-	1	1	1	i	1	1	i	ì	i	1	11
1 1,		1			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	11
der 1	3				1	1	1	1	1	1	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1 1
All Under	3 3 3	1				-	-		1	1	1	-	-	-	1	1	1	-	-	1	-	-	1		-	-	1	0	1 1
1				,	. 00			4		1	*	1		* 1	1	1	-			7			105	17	43	14	1	30	26
CAUSE OF DEATH	Enteritis and other Diarrhoeal Diseases	Syphilis and its Sequelae	Neoplasm,	Malignant Neoplasm, Oesophagus	Stomach		Neoplasm, Larynx	Malignant Neoplasm, Lung, Bronchus	Neoplasm,	Malignant Neoplasm, Uterus	Malignant Neoplasm, Prostate	Other Malignant Neoplasms	Benign and Unspecified Neoplasms	Diabetes Mellitus	Other Endocrine etc., Diseases	Anaemias	Other Diseases of Blood, etc	Mental Disorders	Multiple Sclerosis	Other Diseases of Nervous System	Chronic Rheumatic Heart Disease	Hypertensive Disease	Ischaemic Heart Disease	Other Forms of Heart Disease	Cerebrovascular Disease	Other Diseases of Circulatory System	Influenza	Pneumonia	Bronchitis and Emphysema Asthma

VITAL STATISTICS OF DISTRICT FOR 1972 AND PREVIOUS YEARS

Year	Estimated Population	Births	Birth Rate (Not Adjusted)	Deaths	Death Rate (Not Adjusted)	Deaths under One Year	Rate per 1,000 Live Births
1956	58800	1006	17:1	702	11.9	36	35.7
1957	59100	985	16-6	979	10-5	23	23.3
1958	29300	970	16-3	647	10-9	18	18.6
1959	59700	1046	17.5	683	11.4	31	29.5
1960	06009	1076	17.9	848	10-8	31	28.8
1961	29060	1035	17.5	669	11.8	28	27-05
1962	59030	1130	19.1	710	12.02	34	30.08
1963	59370	1114	18-8	718	12:09	23	20-6
1964	29800	1160	19.4	829	11.3	37	31.9
1965	29800	1098	18-4	029	11.2	16	14.6
1966	60360	1109	18-4	683	11.3	14	12.6
1967	99609	1089	18.0	738	12.2	77	24-8
1968	60620	1075	17.7	763	12.6	15	13.9
1969	08809	1086	17.8	714	11.7	20	18.4
1970	61490	1072	17.4	780	12.7	15	14.0
1971	62700	1026	16.4	719	11.5	23	22.0
1972	62320	991	15.9	737	11.8	23	23.2

#### NOTIFIABLE INFECTIOUS DISEASES

Scarlet Fever was less prevalent—14 cases notified. There was no Whooping Cough notified but Measles rose from 41 in 1971 to 123.

Diphtheria and Poliomyelitis were absent.

Food Poisoning numbered 12 without any serious outbreak.

One case of Infective Jaundice was notified.

#### Control of Notifiable Diseases

On receipt of notification from the General Medical Practitioner, the staff of Health Visitors make immediate investigation and report to the Medical Officer of Health. Help from other sections of the Health Department may be necessary, especially in cases of Food Poisoning.

The Medical Officer of Health and Deputy have been given authority to issue notices in emergency to stop the spread of Infectious Diseases. School closure is now only very rarely considered a good step to control the spread.

#### FOOD POISONING

There are, for public health purposes, three types of poisoning:-

- (a) Poisoning by chemical agents in food, e.g. lead poisoning from beer.
- (b) Poisoning by bacterial toxins (exotoxins).
  No living organisms may be present, yet heat-stable toxins can give illness.
- (c) Poisoning by bacteria themselves (endotoxins).

  This includes the Salmonella Groups.

It will be seen then that bacteriological examination may be negative and yet the food can poison. Normally group (c) is the most common and usually caused by Salmonella organisms.

Immediate notification of Food Poisoning is of the utmost importance—preferably by telephone, so that portions of uneaten food might be obtained, and specimens from the patient examined before the organism is 'washed out' of the intestinal tract by diarrhoea.

Twelve cases were notified during the year.

Under the PUBLIC HEALTH ACT, 1961, compensation is payable by the Local Health Authority to contacts and cases of Notifiable Infectious Disease who are recommended by the Medical Officer of Health to cease their work temporarily on this account. The total amount thus paid during the financial year was £20.45.

NOTIFIABLE DISEASES DURING 1972

DISEASE	Under 1	-	2	ю.	*	Ĵ	10—1415—2	15-21	4 25	20 2	65 & over	Age un- known	Total all ages
Scarlet Fever	1	-	1	2	1	00	-	1	1	1	1	1	14
Whooping Cough	1	1	1	1	1	1	1	1	1	1	1	1	1
Measics	3	12	16	18	12	28	2	1	1	1	1	2	123
Pollomyelitis—Paralytic	1	1	1	1	1	1	1	1	1	1	1	1	1
Poliomyelitis-Non-Paralytic	-	1	1	1	1	1	1	1	1	1	1	1	1
Diphtheria	1	1	1	1	1	1	1	1	1	1	1	1	1
Smallpox	1	1	1	1	1	1	1	Ī	1	1	1	1	1
Meningococcal Infection	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute Encephalitis-Infective	1	1	1	1	1	1	1	1	1	1	1	1	1
Acute Encephalitis-Post Infectious	1	1	1	1	1	1	I	1	1	1	1	1	1
Dysentery	1	1	1	1	1	1	1	-	-	1	1	1	2
Ophthalmia Neonatorum	1	1	1	1	1	1	1	1	1	1	1	1	-
Para Typhoid	1	1	1	1	1	1	1	I	1	1	1	1	1
Typhoid	1	1	1	1	1	1	1	1	1	1	1	1	1
Food Poisoning	1	1	1	1	1	7	2	-	2	7	1	1	12
Malaria	-	1	1	1	1	1	1	1	1	-	1	1	
Infective Jaundice	1	1	1	1	1	1	1	1	1	1	1	1	1
	-								۱	۱	۱		1

## PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

The total of new cases notified was five, as detailed in the following table:—

### TUBERCULOSIS

				N	EW	CAS	ES on-		DEA		on-
AGE PI	ERIOI	os				Respi	ratory F.			Respi	iratory
0_				1	_	_	_	_	-	_	_
1-				-	-	-	-	-	-	-	-
2—				-	1000	-	-	-	-	-	-
10—				-	-	-	-	-	-	7	W
15—				1	-	-	-	-	7.00	-	-
20—				-	1	-	-	-	170	8	-
25—		***		1	Sevel 1	-	-	-	-	-	-
35—		***		1	-	-	-	-	-	-	-
45—				-	-	-	-	-	-	-	-
55—				-	-	-	-	-	-	-	-
65—				1	-	-	-	-	-	_	-
75—				-	1	-	-	-	-	-	-
Totals				4	1	-	-	-	-	-	-

An account of Preventive and After-Care work is given under Prevention of Illness, Care and After-Care, later in the report.

#### VENEREAL DISEASE

The following table gives the numbers who, resident in Chester, attended the V.D. Clinic for the first time:—

		1969	1970	1971	1972
Syphilis Gonorrhoea Other Conditions	 	 3 33 145	6 44 126	83 242	3 92 280
		181	176	329	375

The disquieting increase in venereal diseases continues to stigmatise the 'permissive' nature of our society. Prevention of V.D. obviously begins 'at home', by the example and teaching of the parents. There is no doubt in my mind that if the tragedy and misery caused by V.D. were only better known, and if we could only educate parents to teach their children that self discipline is essential now as it ever has been, then promiscuity would drop dramatically and we should be a happier and healthier nation.

The V.D. Clinics are held at Chester Royal Infirmary as follows:-

Males— Wednesdays, 5 p.m. to 7 p.m.

Saturdays, 11 a.m. to 1 p.m.

Females-

Mondays, 4-30 p.m. to 7-30 p.m.

The annual return of V.D. attendances was examined in February and it was decided to start a campaign against V.D. Prolonged effort is needed for any such campaign to be a success, and certainly the rise in V.D. cases, increased promiscuity, and the availability of contraceptives, are all factors which must be taken into consideration. Assistance was requested from the Health Education Council, and the Education Authority was asked to give more time to Health Education in the school curriculum.

# SERVICES PROVIDED UNDER NATIONAL HEALTH SERVICE ACTS

## HEALTH CENTRES (Section 21) AND CLINICS

#### Lache Health Centre

Work proceeded on building this Health/Community Centre at Lache adjacent to the schools, and at the end of 1972 it was possible for the General Medical Practitioners to open their surgeries here. The Local Authority Clinics were delayed until early 1973. As staff and equipment become available, more clinic sessions will be added.

The Child Welfare Clinic from Saltney will be held at this Lache Centre, which also provides room for school medical and hygiene inspections for Lache Schools.

This is the first purpose built centre in the City to offer accommodation for General Medical Practitioners.

## **Boughton Health Centre**

The site of this centre being fixed at the corner of Hoole Lane and Boughton, plans were drawn up and submitted for a Health Centre which would be adjacent to, but not communicating with, a Community Centre.

The officers visited the Department of Health in November to discuss the proposals. Up to four General Medical Practitioners are to be accommodated.

Some Doctors had expressed desire to have Health Centre accommodation centrally placed in the City. This will be dealt with in the 1973 report.

Blacon Clinic (the first clinic to be built by the Authority) was subjected to a great deal of vandalism and this matter was considered in conjunction with anti-vandalism plans for other corporation properties.

**Handbridge.** An appraisal of the possibility of providing Clinic or Health Centre facilities in this area was made. In view of the boundary re-organisation, the development plans for the adjacent County villages will be taken into consideration.

## CARE OF MOTHERS AND YOUNG CHILDREN (Section 27) (i) Expectant Mothers

Antenatal Clinics are now held at the Maternity Wing of West Cheshire Hospital each week day.

As these clinics developed, and as many General Medical Practitioners held antenatal sessions in their own surgeries (at which the attached Midwives attended), it was no longer necessary to keep open the Midwives' Clinics at St. Martin's House and Blacon. These sessions were, therefore, closed down in October, 1972.

### (ii) Child Health Clinics

The following Child Welfare Clinics were in operation at the end of 1972:—

### Mondays:

St. Martin's House, 2-4 p.m.

#### Tuesdays:

Saltney—St. Mark's Church Hall, 2—4 p.m. (Transferred to Lache Health Centre, 1973). Hoole—All Saints' Church Hall, 2—4 p.m.

### Wednesdays:

Blacon—The Clinic, 10 a.m.—12 noon and 2—4 p.m. (two sessions)

#### Thursday:

St. Martin's House, 2—4 p.m. Blacon—The Clinic, 2—4 p.m.

#### Fridays:

Hoole-All Saints' Church Hall, 2-4 p.m.

Arrangements were put in hand towards the end of the year for staff (Doctors and Nursing Staff) who had been trained in Developmental Paediatrics to take over the routine work of some of the Child Health Clinics. Appointments were to be given for children when they reached certain ages and records made of their progress and development.

ST. MARTIN'S HO	USE C	HILD	HEAL	TH C	ENTRE	
Attendances					1971	1972
(a) By children under one year	of age				2109	1666
(b) By children between the age	s of on	e and	five year	s	815	648
Consultation						
(a) Children under one year					712	639
(b) Children, one to five years					435	390
SALTNEY CE	HILD	HEAI	TH C	ENTRI	3	
(a) By children under one year	of age				1478	908
(b) By children between the age	s of on	e and	five year	s	348	410
Consultation	s with	Media	cal Offic	er:		
(a) Children under one year					373	345
(b) Children, one to five years			***		168	119
BLACON CH	IILD I	HEAL	TH CE	NTRE	1	
(a) By children under one year	of age				4647	3900
(b) By children between the age	s of on	e and	five year	s	2266	2047
Consultation	is with	Media	al Office	er:		
(a) Children under one year				***	1233	1071
(b) Children, one to five years					814	504

#### HOOLE CHILD HEALTH CENTRE

Assertances				1971	1972
Attendances					
(a) By children under one year of age				2131	2294
(b) By children between the ages of one	and fiv	ve year	s	569	465
Consultations with	Medica	1 Offic	er:—		
(a) Children under one year				644	538
(b) Children, one to five years	***	***		389	251
TOTAL ATT	ENDA	NCES			
(a) By children under one year old				10365	8768
(b) By children aged one to five years				3998	3570
				14363	12338
Consultations with	Medica	1 Offic	er:—		
(a) Children under one year old				2962	2593
(b) Children aged one to five years				1806	1264
				4768	3857

## (iii) Premature Infants

There is a Premature Infant Unit at the West Cheshire Hospital which caters for infants below 5½ lbs. weight, and a children's ward at the City Hospital.

The ambulances are specially wired to carry premature baby incubators which are normally kept at the West Cheshire Hospital.

By arrangement with the Consultant, one Health Visitor attends the Premature Infant Unit each week, and another goes weekly to the Children's Ward of the City Hospital.

There were adequate follow-up arrangements for home treatment after discharge from hospital; co-operation in this field has been excellent.

The number of premature births in 1972 was:-

Born in Hospital (Eight died under 28 d		 Live	Births 67	Still Births 7
Born at Home		 	1	-
Children born 'at risk':—  Born in Hospital (Malformations, 35).	 	 		298
Born at Home (Malformations, Nil).	 	 		Mar Politica

## (iv) Notification of Congenital Defects apparent at birth

During 1972, 35 cases of Congenital Abnormalities were notified, nine of whom had abnormalities of the Central Nervous System, and two others considered to be Mongoloid. (This is a marked difference from 1969 when 13 out of 31 had C.N.S. defects). A great deal of research is going on into abnormalities which are associated with genetic variation. One form of Mongolism, for example, is associated with a chromosome abnormality in the body cells. Many syndromes associated with particular types of variation are being described.

Year	1966	1967	1968	1969	1970	1971	1972
Total Births	1109	1089	1075	1086	1072	1026	991
Congenital Anomalies	15	25	15	31	39	25	35
Central Nervous System							
Abnormalities	2	7	3	13	5	8	9

### (v) Supply of Baby Foods and Nutrients

National Dried Milk, Welfare Foods and Nutrients, were available to the public at the Health Department, St. Martin's House, the hours of opening being:—

Monday to Friday: 8-30 a.m. to 5-15 p.m.

The Centre is closed on Saturdays, Sundays and Bank Holidays.

In accord with other Local Authorities, the number of brands of baby foods was cut down, as well as some nutrients, which were all available at local pharmacies.

In cases of hardship, free foods can be given where the family income is below Social Security standards and is not being supplemented. At the discretion of the clinic Medical Officer, free cereal can be given in necessitous cases.

# (vi) Dental Care Dental Services for Expectant and Nursing Mothers and Children Under 5 Years

Services for Expectant and Nursing Mothers and children under five years are provided free at the School Dental Clinic.

#### Attendances

Number of Visits for Tr	eatmen	t—		Expectant and Number
			Children	Nursing Mothers
First Visit			 129	62
Subsequent Visits			 41	86
Total			 170	148
Additional Courses o				
than First Course s			 4	1991

#### Treatment

Statistical Details are kept by the Chief Dental Officer. (P.S.D.O.).

#### Sessions

Number of Sessions for Priority Maternity and Child Welfare Cases, 88.

(No special sessions for Health Education).

### (vi) Institutional Provision for Mothers and Children

On 31st October, 1971, the City Ambulance Service transferred maternity cases from the City Hospital to the new Maternity Wing of the West Cheshire Hospital, which opened its doors on 1st November, 1971. The accommodation at this Hospital consists partly of specialist obstetrical beds for cases which are not straightforward, and partly of General Practitioner beds, where the confinement is carried out under the direction of the patients' own doctor. The City Midwives attend these confinements as if they were being dealt with in their own homes.

The eventual outcome of such an arrangement would be that, unless circumstances made it impossible (and the patient must have free choice), all confinements would take place in the Maternity Wing. The advantages to mother, child and the household are readily apparent.

## (vii) Family Planning Act, 1967

The L.H.A.'s Family Planning Clinic first opened at St. Martin's House, on 6th January, 1972. Previously, the Family Planning Association, acting as agents for the Corporation, held a clinic in Queen Street. This clinic continued by the F.P.A. for County cases, and patients who preferred this provision.

The L.A. Clinic was held weekly (Thursday mornings). New patients are seen by appointment, but an 'open clinic' arrangement is in operation for 'follow-up' cases, who are seen about once every three months.

Consultation and treatment are free; a nominal charge is made for supplies of contraceptives and appliances, except in the case of patients who, for medical and social reasons, qualify for free supplies.

## No. of new patients seen during the year:-

			Unn	narried	Married	Total
Male		 		_	_	1 1 20
Female		 		21	156	177
Total		 		21	156	177
Medical Cas	ses	 				23
Needy		 				38
Other Non-	Medical	 				116
Total		 	***			177

Total number of attendances during the year - 477.

## Training of Staff

Because of its very specialised nature, it was necessary to train the Medical Officers and Nurses in Family Planning methods. Courses arranged by Authorities in the North-West were attended by Doctors and Nurses on the staff of the Authority. These courses included a number of sessions of practical instruction—a very necessary addition since the use of the Intra-uterine Device became so widely favoured.

### Vasectomy

With the inclusion of vasectomy being permitted as part of the L.A. Family Planning Services, enquiries were made as to the possibility of these operations being carried out in the local hospitals.

#### UNMARRIED MOTHERS AND THEIR INFANTS

Accommodation in Mother and Baby Homes, and the care of unmarried mothers, was taken over by the Social Services Department in April, 1971.

## Nurses and Child Minders (Regulation) Act

The supervision of Nursery and Play Groups was transferred to the Social Services Department in April, 1971.

## MIDWIFERY (Section 23)

## The Local Health Authority Services

The staff of seven full-time and one part-time Midwives was generally sufficient and there was no shortage of Midwives in the City.

Four City Midwives are now approved by the Central Midwives Board to undertake the teaching of pupils. The City Hospital was approved for the Part II Training of pupil Midwives and arrangements were made for their District Training. Twelve pupils were trained by the Local Authority in 1972. Midwives receive Refresher Courses as required by the Central Midwives Board.

## Attachment of Midwives to General Medical Practitioners

A scheme for the attachment of the City Midwives was commenced in April 1970 and this entailed much greater mileages by the midwives, as each one had to cover the whole area of the City. Suitable arrangements were made.

## Hospital Accommodation

The new Maternity Wing of the West Cheshire Hospital opened on 1st November, 1971, and included 24 beds for General Medical Practitioners, besides the specialist Obstetricians' beds. Arrangements were made for City Midwives to attend confinements in the G.P. beds there, as well as in the homes of patients who preferred home confinement.

#### Case Load

There were 21 confinements at home, but 139 other cases were admitted to hospital for delivery in General Practitioner beds. There were also nine cases discharged from hospital within 48 hours of delivery, and 852 were discharged between the second and tenth day after confinement.

The numbers of Early Discharges were as follows:-

1964 758	1969 710
1965 693	1970 764
1966 692	1971 830
1967 663	1972 861
1968 659	

#### Home Confinement

Patients are urged to consult their own doctors early in pregnancy and then, with the pregnancy confirmed, immediately to get in touch with the Midwife or Principal Nursing Officer.

Twenty-one home confinements were attended by the Municipal Midwives, (2.1% of the total births).

# Statistics Full Statistics are kept by the Principal Nursing Officer.

				1970	1971	1972
No. of Cases attended, at	Home	and	West			
Cheshire Hospital				211	176	160
No. of antenatal visits				7197	6380	5754
No. of daily nursing visits				8234	7061	4813
No. of 'Trilene' cases				182	115	_
Gas and Air or Oxygen				_	_	-
'Pethidine'				174	143	_
General anaesthetics		***		2	_	_
Doctor called by Midwife				65	62	56
City cases delivered in hosp	ital			814	865	948

## Ophthalmia Neonatorum

One case was notified.

## **Antenatal Care**

The Midwives Clinics ended at Blacon in October, 1972, with the opening of West Cheshire Maternity Wing.

	Sessions	Attendances
Blacon Clinic	 37	32

Maternity Packs are issued to expectant mothers due to be confined at home.

## 4. HEALTH VISITING (Sec. 24)

#### Staff

The difficulties experienced in recruiting trained Health Visitors had been diminished by the employment of two Assistant Nurses since mid 1969. These Assistant Nurses carried out Clinic and School Health duties but could not, of course, replace Health Visitors.

A student Health Visitor Training Scheme was started in 1969 under which the Authority sponsored one student Health Visitor for training each year. Thus when the student qualified in July, one more Health Visitor was added to the staff.

At December, 1972, the number of Health Visitors was nine, giving a ratio of one per 7,937 population (which compares a little unfavourably with the average for 79 County Boroughs in England and Wales of 7,623).

#### Attachment Scheme

The attachment of Health Visitors to General Medical Practitioners which began in 1968 continued, and all our Health Visitors were allied to a number of practices in the City, leaving certain Clinic and School duties of be carried on by Clinic and Assistant Nurses. The table of visits which follows shows the increase in number resulting from attachment.

## **Further Training**

The Health Visitors and Nurses have had tuition in Audiology from the County Council to enable them to test young children. Routine Audiology Tests were subsequently carried out on children of nine months old, at the clinics as in 1971. Children with defects were referred to specialists.

The following visits were paid by	<b>Health</b>	Visitors	:		
	WEST TO			(1971)	1972
Primary Birth Visits				1029	899
Subsequent Visits to Infants				4325	2866
Visits to Pre-School Children				3668	2051
Visits to Expectant Mothers				259	282
Visits to over 65's				1539	1777
Other Visits				995	1700
Cases of Tuberculosis (Visits)				498	409
Audiology Screening Sessions, at	nine mo	onths		-	262
Number of Infants Tested .			***		1707

#### Guthrie Test

Every newborn child has a blood test to show whether or not a metabolic disorder (giving phenylketonuria, which can delay mental development) is present. The numbers tested in 1969 were 696, 1970—1,046 and 1971—1,026. The collection of test specimens was taken over by the City Midwives, as tests had to be carried out at the early age of six days. One case was positive: treatment was begun immediately and the patient responded well.

#### **Health Education**

This is one of the most important functions of the Health Visitors' Service. The size of the City and the number of Health Visitors on the role make it very difficult to set up a planned scheme of Health Education and it had to be left to the staff of Health Visitors and Nurses to do the best they could in clinics and on domiciliary visits. Our figures for Vaccination and Immunisation were not very good and this may have been partially due to our Health Education difficulties.

The appointment of a Deputy Principal Nursing Officer in April 1969 was very much welcomed as this officer has a duty to organise Health Education in schools and clinics. It was subsequently possible for the Deputy Principal Nursing Officer (Area Nursing Officer) to organise classes and programmes of Health Education, including Parentcraft Classes in Girls Secondary Schools. Efforts were also made to improve the acceptance rate for vaccination and immunisation. It was decided to make two 'Project Awards' to pupils showing special interest in Health Education, and the scheme was successful and well received.

## Investigation of Lead Hazard in the City

(This section is included here as the field work was done by Health Visitors).

A letter from the Department of Health (December, 1971) pointed out the possibility of lead hazard in certain conditions and the Authority was advised to investigate this possibility. Some difficulty was experienced in finding a laboratory able to examine blood specimens for lead content by the atomic absorption spectro-photometric method. The Hospital for Sick Children, Great Ormonde Street, London, undertook this work for the City. Similar investigations were being carried out in other parts of the country, especially where Leadworks were situated.

The exercise, run under guidance of the Department of Health, consisted in examining soils, dust, and vegetation, but more especially the blood of three groups of persons, viz:—

- 1. Those who lived in the vicinity of Leadworks;
- The families (especially young children) whose members worked in dusty lead processes;
- 3. A control group having neither geographical nor occupational connection with the Leadworks.

Those with high blood leads were invited to give a confirmatory test, and if still above normal were referred to Medical Specialists (with the knowledge of the General Medical Practitioners concerned) and several of these were kept under observation. In none could it be said with any certainty that there were definite signs of lead poisoning.

Response from the public was good, but out of 140 Leadworks employees, only 35 volunteered, presumably partly because they felt that local precautions were adequate.

At the time of writing, most of the testing has been done, and an analysis of the results is being awaited, as this requires specialist knowledge of the subject.

I would like to express appreciation of the co-operation given by the public who attended for testing.

## 5. HOME NURSING SERVICE (Section 25)

There was an increase in the Home Nursing staff from eight full-time and four part-time, to ten full-time and three part-time nurses.

This was necessary because of increased demand on the service and because the District Nurses were attached to General Medical Practices on 1st July, 1972. Instead of the nurses working in Districts (before attachment), they now covered the whole of the City Area in which the Doctor practised. Increased mileage (and time spent travelling) resulted, but the advantages of team work in the National Health Service soon became apparent.

All the nurses used their own cars (except one), and one Mini Van was kept in reserve.

A Night Rota is maintained for Emergency Calls. The service is free to the patient, but it is necessary for the Doctor to signify that the service is necessary in each case.

#### Marie Curie Foundation

For cases requiring lengthy periods of attention, good use was made of the nurses of the Marie Curie Foundation. This service was financed solely by the Foundation and was free of charge.

Ten cases were treated in the City during 1972.

#### Attachment Scheme

Because of the fact that all the Nurses were attached to General Medical Practitioners from 1st July, a different pattern of work arose.

The statistics for the year are, therefore, divided into two groups:-

- 1. January to June when the Nurses worked in Districts.
- 2. July to December when all Nurses covered the whole City.

### Home Dialysis Unit

It was necessary to make adaptations at one patient's home for the use of a home dialysis unit, the cost being borne by the L.H.A.

### **DISTRICT NURSING, 1972**

			January -	- June				
District				No.	of Cases	No.	of Visits	
Hoole					49	1,927		
Central			***		83	1	,990	
Garden Lane					69	1	,411	
Handbridge				1	11	2	,072	
Boughton					83	2	2,141	
Newton					93		,268	
Blacon					31		2,699	
Saltney I		***		1	.09	1,384		
Saltney II			***		32	1,113		
Total for six n	Total for six months			760		17,005		
		Ji	uly — De	cember				
Total for six m	onths			6	91	14,327		
Previous years			1968	1969	1970	1971	1972	
Total No. of cases attended Total No. of visits			1,239 35,077	1,247 36,101	1,367 40,342	1,308 33,540	1,451* 31,332	
					1972		1971	
Percentage of c	ases ov	er 65 ye	ars		60%		55%	

\*Changed system of Records on 1st July, 1972.

69%

64%

## 6. VACCINATION AND IMMUNISATION (Section 26)

The following immunisations are now available, and the Local Health Authority is the source for the distribution of vaccines to General Medical Practitioners and Hospitals in its area. The vaccines are available to Doctors. on request at the Health Department:—

(1) Vaccination against Smallpox

Percentage of visits to 'over 65's' ...

- (2) Vaccination against Poliomyelitis
- (3) Immunisation against Diphtheria
- (4) Immunisation against Whooping Cough
- (5) Immunisation against Tetanus
- (6) B.C.G. Vaccination against Tuberculosis
- (7) Vaccination against Measles.
- (8) Vaccination against Rubella (German Measles).

In an effort to improve the acceptance rate for immunisation of infants against various diseases, from the beginning of the year, the names of all newborn children were 'put on the computer' so that, at the appropriate time, reminders could be sent out to the parents urging immunisation.

## Vaccination Against Smallpox

About the beginning of the year, the Authority was advised that, because of the much diminished risk of Smallpox (which had been eliminated in so many parts of the world), and because of the danger of complications following vaccination which occasionally arose, it was no longer necessary to adopt routine vaccination in babies.

Nevertheless, where contact or danger of infection had occurred, the protection afforded by vaccination was still valuable and should be adopted to prevent spread of infection.

## (2) Immunisation against Diphtheria

Parents are given the option of having this done by their own General Medical Practitioner or of attending the Clinics. Children of pre-school age are immunised at the Infant Welfare Clinics (q.v.), and school children receive their injections and reinforcing doses at the end of the School Medical Inspections.

Records of these and other immunisations are kept in the Department and are transferred on change of address.

The table shows the number of children immunised against Diphtheria during the past 15 years.

28

## DIPHTHERIA IMMUNISATION

Age in Years 31st Dec., of the corres-	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	Total inocu- lated 1958-1972
ponding year.	157	189	241	193	146	266	219	275	646	664	365	570	693	767	716	Age under 1 year 716
1	248	406	480	461	335	409	382	428	67	57	26	59	72	71	79	3,025-07
2	70	106	104	94	64	23	57	66	21	68	13	23	12	30	30	Age 1-4 years
3	62	56	66	60	32	27	46	44	19	9	12	17	18	19	18	2009
4	58	45	40	41	35	20	19	35	21	19	23	25	17	46	24	mint (4)
5	129	109	27	85	159	76	18	49	54	29	83	42	46	85	64	TERANIA N
6	48	101	77	123	81	41	72	101	23	32	23	61	33	33	43	0,100
7	4	30	29	42	39	15	21	7	4	11	9	8	7	6	7	Age 5-9 yrs
8	6	8	7	16	7	6	3	6	3	2		3	3	1	2	3941
9	8	3	6	11	1	2	7	3	1	2	1	1	1	2	2	or or the
10	5	3	2	10	1	2		2		2		1		2	1	
11	9	21	22	23	48	44	46	15	8	5	5		1		1	
12	3	25	19	11	39	18	21	6	5	3	1	1		1		Age 10-14 yrs.
13		4	2	1	1	2	1	2			1					4238
14	1		1	2												
15 and over				2	1		1	2		1	2			1	5	Age 15 years and over 2503
Primary	808	1106	1123	1175	989	951	906	1041	871	904	563	811	903	1064	992	Total Primary 14207
Re-Inforcing	1030	1084	1111	1365	1216	1219	1108	1701	1300	1521	831	994	978	972	901	Total Re-inforcing 17331
Total each Year	1838	2190	2234	2540	2205	2170	2014	2742	2171	2425	1394	1805	1881	2036	1893	GRAND TOTAL 31538

## (3) Immunisation against Whooping Cough

This is available on request from the patient's own Doctor or at the Infant Welfare Clinics, and is usually—though not necessarily—given in conjunction with Diphtheria immunisation. Three injections are necessary.

The following table shows numbers who have completed a primary course of Whooping Cough vaccine (singly or in combination), during the year:—

#### Age at Date of Final Injection

0—4 years	Others								
	5—9 years	under 16 years	Total						
806	9	9	824						

## (4) B.C.G. Vaccination against Tuberculosis

Since 1961, B.C.G. Vaccination has been available to all pupils of 13 years and upwards, and also, where necessary, to those over ten years old.

All Mantoux Positive cases were offered follow-up facilities. By co-operation with the Chest Physicians, these cases were examined and X-Rayed at the Chest Clinic to ascertain the cause of the positive reaction. These cases were kept under observation, when necessary, at the Chest Clinic.

The use of freeze-dried vaccine made the supply of B.C.G. Vaccine much easier (as it became unnecessary to order the vaccine several weeks in advance).

No. of Children, Young Persons and Students tested		712
No. of these Mantoux Positive		95
No. of these Mantoux Negative and given B.C.G. Vaccination		609
No. absent for reading	200	8

### (5) Anti-Tetanus Immunisation

The combination of a vaccine against Diphtheria, Whooping Cough and Tetanus (lock jaw) has proved beneficial and, in spite of the relatively few cases of Tetanus the use of this 'triple Antigen' has a vogue.

Certainly in no disease more than in Tetanus is prevention better than cure—especially as the cure of established Tetanus is extremely chancy.

The Triple Antigen is available to Doctors in the City on request or may be given at the Child Care Centres. The purpose of the combination is to avoid injections over and above those already necessary for protection against Diphtheria and Whooping Cough.

Arrangements were in force with the Casualty Department of the Royal Infirmary whereby all city patients receiving Anti-Tetanic Serum were notified to the Health Department, and were told of the necessity to be immunised against Tetanus. A Clinic was started and the patients invited to attend for active Immunisation (as contrasted to the passive immunity received on the injection of A.T.S. at Hospital). The reason for this necessity is the danger of Anaphylaxis occurring on second injections

once A.T.S. has been given. By being actively immunised, the necessity for A.T.S. does not arise, and therefore there is no risk of incurring Anaphylaxis. The active immunity against Tetanus must, of course, be kept up to strength by yearly booster injections.

### (6) Poliomyelitis Vaccination

The fortunate absence of outbreaks of Poliomyelitis is reflected in the steady decline in the numbers applying for vaccination. This is still available to infants, children, expectant mothers and adults up to 40 years of age, but it is regrettable that public reaction is apparently stimulated only when cases of Poliomyelitis are reported.

In practice, the oral vaccine has virtually replaced the Salk (injected) vaccine, which is now very rarely requested.

The table shows numbers of doses administered during the year and totals:—

			TOTALS	
	1971	1972	1971	1972
Third dose	809	752	27344	28096
Second dose	930	729	14281	15010
First dose	1009	773	14792	15565
Fourth dose, Children, five to 12 years	384	264	10070	10334
Fourth dose, other	702	656	7189	7845
	3834	3174	73676	76850
	11-1-1	100000000000000000000000000000000000000	The State of the	-

The Department of Health now requires the keeping of Vaccination and Immunisation records only in respect of children under the age of 16, who have completed a Primary Course or received a Reinforcing dose of vaccine.

No cases of Poliomyelitis have occurred in the City since 1965 (one only) and no deaths since one in 1962.

## (7) Vaccination against Measles

In May 1968, Vaccination against Measles was introduced, but did not prove very popular, although it consisted of a single injection.

0-4 years	5—9 years	10-16 years	Total 1972
344	18	_	362

## (8) Vaccination against Rubella (German Measles)

Because of the very high risk of foetal abnormalities following Rubella in the mother during early pregnancy, a scheme for the immunisation of all girls aged 11 to 14 years was started, priority being given to 13 year old

girls. The scheme was implemented in the schools but all General Medical Practioners were invited to participate.

Immunisation consists of a single injection, but there are certain contraindications. For example, vaccination against Rubella must not be undertaken during pregnancy: care must be taken to ensure that the patient does not become pregnant within at least two months after immunisation-if she does, termination may seriously be considered. Routine vaccination of women of childbearing age is not recommended. A previous history of German Measles is discounted because of the difficulty of being accurate and sure of the attack.

Response was excellent, there being very few refusals, and 468 pupils received immunisation.

The authority wished to include all senior school pupils, not only those from 11 to 14 years, but were advised that, because of the danger to the developing child, it was best not to extend the scheme beyond the 14th birthday. It is a matter for shame that so many schoolchildren could become pregnant, that Rubella Immunisation should not be administered. The illegitimacy figures, 13.9% for this year, alas, bear this out and underline the demoralised situation.

#### Yellow Fever

Immunisation facilities are available in Liverpool and Manchester at the respective Health Departments.

#### Purchase of Vaccines

At present only Smallpox Vaccine, B.C.G., and Poliomyelitis Vaccine are issued free to Local Authorities. They must purchase Measles, Rubella, Diphtheria, Whooping Cough and Tetanus Vaccines.

#### Influenza Vaccination

Because of the side effects and complications following immunisation against Influenza, and because the immunity to one type of organism did not mean that there would be immunity to the other types of influenza, vaccination against influenza was not popular.

## 7. THE AMBULANCE SERVICE (Section 27)

The City Ambulance Service covers an area of four miles into Flintshire from Chester, and also, by agreement, a radius of 15 miles into Cheshire County. The County Services have been developed so that City vehicles are rarely called upon to cover the whole area specified—the majority of this work is in the vicinity of the City. Mutual aid continues at a satisfactory level.

#### New Ambulance Depot

The new Ambulance Depot was being constructed in a side street adjacent to the Fire Station (at which station repair and maintenance of the ambulance vehicles was carried out).

# Station and Authority Committee

The Joint Consultative Committee was formed of members of the Health Committee and Ambulance staff representatives. It met whenever there were items of concern, and was supplementary to the National Joint Ambulance Council whose function was to settle rates of pay and supplementary payments.

This Joint Consultative Committee during 1972 dealt with items such as:—

Pay for Senior Drivers, self financing lead in payments, and Incentive Bonus Scheme;

Radio Telephones;

Training of Staff;

Removals from Hospital at week-ends;

Uniforms and Footwear;

Access to Hospitals and Wards;

Modifications to Ambulance Vehicles.

#### Staff

At the end of the year the establishment was under review again. There were increases in establishment to reduce the number of hours of overtime which had become necessary. Now with the possibility of self-financing lead in payments, towards the Incentive Bonus Scheme, under investigation, a lull in expansion had to be observed. (A feasibility survey showed that such a scheme was possible). At the end of 1972 the staff comprised:—

Ambulance Officer, Deputy Ambulance Officer, one Telephonist, five Senior Drivers, sixteen Ambulancemen (Driver/Attendants) and two Day Drivers.

# Training

The six weeks' Entrants' Course was successfully taken by one Driver, and two were booked for early 1973.

Two had Refresher Courses (two weeks) and arrangements were made for the secondment to Hospital of all Drivers, beginning later in the year. The secondment was for one week, and was intended to give Ambulancemen a greater sense of share of responsibility.

It was the policy to promote Drivers to become fully trained Ambulancemen wherever possible.

This multiplicity of training programmes posed a strain on the remaining staff and could be expected to augment the amount of overtime necessary.

Training was provided at Wrenbury Hall; two Ambulancemen had two weeks courses, and two had to take the six weeks course.

One Driver/Attendant was sent on the Ambulance Instructors course but failed to qualify as an Instructor.

Training would be required for five men on a short (two weeks) course in 1972/3.

#### Vehicles

Arrangements were made during the year for the vehicles to be serviced, maintained and repaired at the City Fire Depot, near to the site of the future Ambulance Depot. The complement was ten vehicles at the end of the year, five being ambulances, two dual purpose, and three sitting case vehicles.

# Mileage and Patients Carried

Year	Total No. of Patients Carried	Total Mileage	Miles run for Other Ambulance Authorities
1963	25,459	105,232	4,939
1964	27,857	107,934	4,484
1965	28,194	110,452	4,501
1966	25,026	107,936	2,228
1967	24,711	108,325	5,348
1968	27,220	125,050	6,795
1969	32,100	130,602	7,700
1970	35,393	136,088	10,048
1971	37,846	132,810	11,785
1972	40,398	137,745	14,895

# **Emergency Conveyance of Patients by Air**

No cases occurred in 1972.

# Conveyance of Patients by Rail

As more railway coaches become Pullman type, there is a greater and greater difficulty in getting compartments reserved for stretcher cases and it was thought that British Rail should be pressed to provide suitable compartment coaches at strategic points in the country, otherwise only First Class Compartments were available. The Department of Health has taken this matter up with British Rail.

Eighteen patients, of whom 15 were provided with rail vouchers were conveyed a total mileage by Rail of 1,947.

#### National Ambulance Returns

The following statistics were received from the Department of Health for comparison locally:—

	England & Wales	Chester
Av. No. of miles travelled per patient carried	6.1	3.5
Av. No. of miles per vehicle run	23,041	14,757
Av. No. of patients carried per vehicle	3,762	4,205

#### Radio Telephones

The R/T equipment of the vehicles was giving some trouble, having been in service for some years. It became necessary to re-equip the station and vehicles with modern apparatus which would fit in with the recommended type, frequency and wave lengths which were being allocated to ambulance authorities.

Temporary equipment had to be installed before the permanent sets were ready.

# **Emergency Services**

As well as routine admissions, discharges and Hospital outpatients, Day-Hospital Psychiatric Cases, week-end leave and welfare classes, inter-hospital transfers, the City Ambulance Service caters for an Emergency Surgical Team, an Emergency Midwifery Team for domiciliary confinements over a large area, and, of course, accidents on the road.

Year	Total Number of Patients conveyed		conve	umber of atients yed with e Escort
1964	32			7
1965	40			11
1966	64			13
1967	105		100000	14
1968	109			23
1969	90			17
1970	74			21
1971	85			25
1972	95			30
Poisoning Cases				
		1970	1971	1972
Overdose cases dealt wi	th	118	115	140

Discussions with the Hospital Authority were held to try to minimise the routine inter-hospital transfers during the hours when the service was less fully manned. While the ideal of '24 hours notice' from the hospitals could not be maintained—the hospitals could be called upon for emergency accommodation at any time—the hospital and local authority sought to meet each other's difficulties and to give the best service possible. It is neither practicable nor economic for a local authority service to be run to cope with all scales of emergency, however great: there must be a service which, while adequate to cope with the average work, will be capable also of dealing with some degree of emergencies.

AMBULANCE SERVICE

Summary of work for year ended 31st March, 1973

	and the second	3	5			
	GE Other Total	128850	14171	869	26	137745
	Other	230	1	- 04	1	230
	MILEAGE S Oth	64950 57900 230 128850	4643	70	1	75132 62613 230 137745
	4	64950	9528	628	26	75132
	Total	36895	3404	97	2	40398
	Other	16	1	1	1	16
	EM. Total Other Total	2494	716	81	1	3292 91 40398
	ACC. & EM.	149	34		1	187
ED	* 4	2345	682	11	1	3105 187
PATTENTS CARRIED	Total	4155 11367 21375 32740 2345 149 2494 91 36895	2614 682	43	-	22930 35397
PATIEN	*SITTING	21375	1546	11	1	22930
	* 4	11367	1068	32	1	12467
	Total	4155	790	54	2	2001
	*STRETCHER	137	26	-	1	164
	*STI	4018	764	53	2	4837
	OURNEYS S Other Total	1989 11 6182	454	43	1	0899
BELL	NEYS	п	1	1	1	п
	JOURNEYS S Other	1989	7		1	2034
	*	4193	413	39	1	4646 2034 11 6680
	1	City	Cheshire	Flintshire	Others	TOTALS

A-Ambulance S-Sitting Case Note.-\*Acc. and Em. details are part of and are included in 'Stretcher and Sitting' details.

## 8. PREVENTION OF ILLNESS, CARE AND AFTER-CARE

# (Section 28)

#### (i) Tuberculosis

Close liaison between the Chest Clinic and the Health Department is maintained. One Health Visitor is appointed to attend at the Clinic and to visit tuberculosis patients in their homes.

# Contact Scheme (City residents attending Chest Clinic):

No. Skin Tested						13
No. found Positive		ä	5			_
No. found Negative		T			***	13
No. Vaccinated					9	39
No. of New Contacts examined		3			ī	30
No. of these found to have Tu	bercu	ılosis			à	_
No. of Infants Vaccinated				3	2.3	324

Free Milk. The scales of application of the Free Milk Scheme were amended to conform to National Assistance Standards. Each individual case is visited by the Tuberculosis Visitor.

In some cases the supply of free milk was augmented by the issue of free eggs.

At the end of 1971 five patients were receiving help from the Local Authority under the scheme.

# **Tuberculosis Colony**

One Tuberculosis patient is maintained at the Sherwood Village Settlement, Nottingham.

# Protection of Children against Tuberculosis

The B.C.G. Scheme for vaccination of school children and students which was started in 1955 was continued, vaccination being done in the schools during the Autumn Term (for statistics see Vaccination and Immunisation).

The contact scheme was maintained by the staff of the Chest Clinic at the City Hospital throughout the year (figures above).

The Ministry of Health Circular on this subject recommended the X-Ray every three years of all those whose work brought them into close contact with groups of children. Thus School Staff, Children's Homes, Nursery Groups, Private Schools and many other Corporation staff are affected. Use is made of the Mass Radiography Unit of the Regional Hospital Board.

The routine testing at an early age of all babies born in the City was abandoned because of the great decline in the incidence of Tuberculosis.

#### Mass X-Ray Service

The Mass Radiography Service was reduced, having fulfilled its chief objective in the early discovery of cases of Pulmonary Tuberculosis.

The reduction in services meant that Pre-employment X-Rays had to be referred to Hospital and could be charged for. Radiologists, however, would waive charges for staff of Health, Welfare, Education and Children's Departments of L.A.'s where the aim was to prevent the spread of Phthisis by people who were in close contact with groups of children.

#### (ii) Blind Persons

The Chester Blind Welfare Society give the following data:-

Numbers on Register at	end of	year:-			
THE RESIDENCE OF SHIP AND ADDRESS OF THE PARTY OF THE PAR		Section!	M.	F.	TOTAL
Blind			47	83	130
Partially Sighted			26	40	66
			73	123	196
			-		

Three Blind persons were under the age of 16, being educated in a Special School. Twenty-four were in the employable age groups 16—59, one was in the Workshops for the Blind, and one at home receiving further education; six employed under ordinary conditions, and three awaiting employment; thirteen were not available for or capable of work.

On the register of Partially Sighted, two were children: one attending a Special School, one in an Ordinary School, one was attending a Course for Piano Tuning, five were employed and four available for employment. The remainder were of Pensionable age.

# B.—Ophthalmia Neonatorum

(i) Total number of cases notified during the year (ii) Number of cases in which :—			 1
a. Vision lost			 Nil
b. Vision impaired			 Nil
c. Treatment continuing at e	end of	year	 Nil

# (iii) Epileptics and Spastics

Epileptic and Spastic children of school age are dealt with under the Education Acts.

The Social Services Committee provides for the maintenance of three adult epileptics in colonies. Twelve adult spastics are on the register, of whom ten attend the Spastics Centre at Blacon and one in a Voluntary Home.

# (iv) Illness Generally-Prevention and Care

# **Nursing Homes**

There are no Nursing Homes registered in Chester.

# Laundry Service

The provision of Incontinence Pads has now almost entirely dispensed with the necessity for the provision of the usual Laundry facilities. When necessary the pads are supplied, free of charge, to patients nursed at home.

# Chiropody Service

In Chester, two services had run side by side for some years.

For housebound patients, the Health Committee provided a service through the local Chiropodists in necessitous cases.

For retired people, a surgery service was provided by the Social Services (Welfare) Committee for necessitous cases.

Eventually it became necessary to amalgamate these two services—which necessitated some adjustment to the amounts paid by the L.A. and the patient respectively.

The Health Committee was to take over the complete chiropody service on 1st April, 1973.

			1971	1972
No. of cases treated	 	 	246	308
No. of treatments	 	 	1,191	1,463

# Nursing Equipment on Loan or Hire

Nursing equipment for the use of patients being nursed at home is available from the Local Health Authority as well as from the British Red Cross Society and (for elderly patients) from the Welfare Department.

The policy has been gradually to expand the amount of equipment available from the Health Department in accordance with the demand. Certain items, like Ripple Beds, are relatively new and liable to damage.

It was resolved to make no charge for the loan of Nursing Equipment after October 1970: items would be checked every quarter. The administrative costs of collecting small sums for the hire of minor items of equipment were thought to be greater than the amount recovered.

The number of articles on loan in 1972 was 228.

	-		0	
ו ע	er	vical	CU	tology
•	COL	Treat	~	tology

1967 1968		No. Examined 243 182 121 192	Positive  1 1	Negative 243 181 121 191
		261	1	260
	Primary	333	1	332
	Recall	154	-	154

Specimens are obtained and examined at the R.H.B. Laboratory at the Royal Infirmary. Patients and their Doctors are notified of results by this Department.

The clinic which commenced in May 1966, was held at Blacon Clinic or at St. Martin's House, when sufficient requests were received. Attendance was by appointment.

#### Convalescence

The Local Authority in certain instances provides for convalescence of persons not otherwise eligible under the National Health Act.

#### NATIONAL ASSISTANCE ACT, 1948

No cases were compulsorily removed during the year.

#### MEDICAL EXAMINATIONS

Medical Examinations for other Departments of the Corporation are made by the Assistant Medical Officers of Health, and at the time of writing, no charge is made on these Departments:—

#### (1) Residential Nurseries

The Medical Officers carried out routine examinations of the children on admission to the Children's Nurseries, on discharge and other special occasions.

#### (2) Superannuation Examinations

Staff of all Corporation Departments were examined by the Medical Officers for the purpose of determining their fitness for (a) Employment (b) Entry into the various Sickness Pay Schemes, (c) Entry into the Corporation Superannuation Scheme.

In the case of Staff associated with children, the examinations have included X-Ray of chest (usually done at the Mass Radiography Unit) and for teachers in the Education Department, full reports on Forms 4 R.T.C. and 28 R.Q. were made.

The number of examinations in the year was 174 plus 417 declarations of health and for comparison with previous years:—

**1961:** 331 **1962:** 456 **1963:** 395 **1964:** 438 **1965:** 523 **1966:** 560 **1967:** 547 **1968:** 472 plus 170 Health declarations. **1969:** 325 plus 212 Health declarations. **1970:** 290 plus 382 Health declarations. **1971:** 260 plus 323.

#### (3) Examination of Transport Staff

It was decided that medical examinations for Public Service Vehicle Licences should be carried out by the Assistant Medical Officers of Health at the same time as they do the superannuation examinations, and that they should give the medical certificate without charge to the candidate or to the Transport Department.

#### CREMATION REFEREES

On the opening of the City Crematorium at Blacon, in November, 1965, the Medical Officer of Health and Deputy undertook the duties of Cremation Referee and Deputy.

	1969	1970	1971	1972
Certificates completed	 1212	1308	1398	1415

#### WATER SUPPLY

The supply which is drawn from the River Dee, is provided by the Chester Waterworks Company, and is examined every two weeks for bacterial content, and every month chemically as shown in the table.

Bacteriological Sampling shows the usual contamination of the river, but the samples taken at the filters and in the town have always been free of significant contamination.

Plumbo solvency has remained at a low level with the pH averaging 7.0.

The number of dwelling houses and number of population supplied

rom public mains was:—	Supplied direct to Houses	By Standpipe	
Houses supplied	21,640	-	
Persons supplied	62,320	_	

#### Fluoridation

The only method of fluoridation of the public water supply approved by the Minister was under Section 28 of the National Health Service Act 1946 (Prevention of Illness, Care and After Care). Other forms of fluoridation, e.g. by tablets or milk treatment, were not so satisfactory and the cheapest and most effective method was by treating the public supply.

The Council, in September, resolved that fluoridation be approved in principal.

# **Swimming Baths**

Twenty-four samples taken from the Public Baths were found to be satisfactory.

#### REORGANISATION OF THE NATIONAL HEALTH SERVICE

We are faced with the superhuman task of reorganising both Local Government and the National Health Service together by 1st April, 1974. There is bound to be much confusion with so much change.

In the Health Service, the cleavage between administrative and clinical duties will, for a time, be accentuated, but it is hoped that career prospects in the new Service—whether clinical or administrative—will attract sufficient of the right kind of professional staff.

The Health Committee in considering the Health Services Consultative Document expressed a desire for more democratic representation.

In preparation for reorganisation, administrative Medical Officers, Nursing Staff and Senior Clerks were to attend special courses.

#### SEWERAGE AND SEWAGE DISPOSAL

The abandonment of the Bumpers Lane Sewage Works which had produced a very unsatisfactory effluent during 1971 was completed, and the flow diverted to Sealand Road Works as part of the Saltney III main drainage scheme.

The foul drainage from the village of Dodleston had also been connected to the Corporation's drainage system. During 1972 the flow from the Hawarden Rural District Council areas of East Saltney and Broughton was completed and the resultant effluent was satisfactory.

# WATER

The City water supply is drawn from the River Dee and supplied by the Chester Waterworks Company. The water is filtered and chlorinated at the Company's works at Boughton. The supply was adequate in quantity and no restrictions were imposed.

The standard of purity and adequacy of supply have been maintained during the year, the water being graded 'Class I'.

Bacteriological examinations of the water supply including water from various filter beds have been carried out twice a month. In addition, chemical analyses of water from a consumer's tap have been carried out by the Public Analyst every month, and the following table gives the result of these analyses, which are shown in parts per million of water.

# CHEMICAL EXAMINATION OF CITY WATER SUPPLY

sr-Slight Trace vsr-Very Slight Trace

# Chief Public Health Inspector's Report 1972

## STAFF

Chief Public Health Inspector
Deputy Chief Public Health Inspector
Four Senior Public Health Inspectors
Two District Public Health Inspectors
One Senior Authorised Meat Inspector
One Authorised Meat Inspector
Four Public Health Operatives
One Clerk

# INSPECTION OF AREA

#### ENVIRONMENTAL HEALTH Complaints received ... 619 Visits in respect of Complaints 1053 VISITS TO PREMISES Number of Visits 1050 Houses-under the Public Health Acts Houses in and adjoining Clearance Areas 744 Individual Unfit Houses 35 House Improvement—Qualification Certificates 83 3742 Houses suitable for Improvement 102 Houses in Multiple Occupation 49 Factories 365 Offices, Shops and Railway Premises ... 80 Clean Air 54 Noise Abatement 2 Animal Boarding Establishments 6 Pet Animal Shops 4 Brooks and Streams 121 Open Ground and Common Passages ... 25 Swimming Baths 10 385 Drainage Work-Investigation and Supervision 2231 Rodent Control ... ... 2153 Pest Control

#### FOOD HYGIENE Inspections of:— Butchers' Premises and Meat Depots ... 37 Bread and Cake Shops ... ... 29 Dairies, Milk Dealers' Premises, etc. ... 25 20 Fishmongers Fish and Chip Shops ... ... ... 22 Food Stalls and Vehicles ... ... General Provision Shops ... ... ... 185 37 Greengrocers ... ... Hotels (Catering) 24 Licensed Premises ... 332 Restaurants and Cafes ... ... ... 206 Sweets and Ice Cream Premises 22 Other Food Premises ... ... 86 Food Inspection Visits ... 141 ADMINISTRATION Number of informal notices and letters sent ... 2301 Number of Statutory Notices served ...

# HOUSING

#### Individual Unfit Dwellings

Undertakings were accepted under Section 16 Housing Act, 1957, to close two privately owned individual unfit houses.

Four dwellings which had been dealt with as individual unfit houses were vacated during the year.

#### Houses in Multiple Occupation

Ten houses in respect of which directions were in operation under Section 19 Housing Act, 1961, were inspected regularly throughout the year. The directions are made to limit the number of persons occupying these houses dependent upon the adequacy or otherwise of the facilities provided.

In one house where conditions had become unsatisfactory and facilities missing the existing direction was revoked and a new one substituted limiting the occupants to one household and the house was subsequently vacated.

In another house, due to a change in ownership and circumstances, the direction was revoked.

#### Housing Survey—Older Houses in the City

Following the findings of the detailed survey carried out in the Pilot Area in Hoole and in accordance with the requirements of Section 70, Housing Act, 1969, and particularly Circular 50/72 of the Department of the Environment, a survey was carried out during 1972 throughout the City of the houses built before 1914 and the 4.195 properties involved were classified broadly according to their condition and placed in the following categories:—

Category	No. of Houses	Condition	Proposals
A	390	Generally sound property but some with varying degrees of disrepair and some lack of facilities	Suitable for full improvement and having a life of 30 years or more after improvement. Suitable for inclusion in General Improvement Areas.
м	1945	Generally sound property but with more disrepair and some lack of facilities.	Suitable for full improvement and having a life of 30 years or more after improvement. Should be included in General Improvement Areas as soon as possible to prevent further deterioration.
O	757	Property generally with more disrepair again, some lack of facilities and/or congestion.	Likely to have at least 15 years life but unlikely to have 30 years life. Suitable individually for standard or if requested full Improvement Grants but not considered suitable generally at present for inclusion in General Improvement Areas.
Q	450	Property generally in poorer condition, many without facilities and/or congested.	Expected to have at least ten years but not more than 15 years life and would qualify for Standard Grant on application.
Ħ	339	Property generally with considerable disrepair and becoming worn-out with many houses unfit or bordering on unfitness.	Not likely to have more than ten years life and, subject to detailed inspection at the time, likely to be dealt with by clearance in five to ten years. Would not warrant either Standard or Improvement Grant.
H	314	Worn-out and generally unfit property.	Should be dealt with by clearance within the next five years. Would not warrant Standard or Improvement Grant.

A comprehensive report on the older houses in the City including proposals for General Improvement Areas and Clearance Areas based on the above findings was submitted to the Council and approved.

# CLEAN AIR

During the year, twelve notifications and applications for prior approval for the alteration or installation of furnaces under Section 3 of the Clean Air Act, 1956, were received and approved by the Council. In two of these cases the heights and positioning of the chimneys were also considered and approval of the Council was given under Section 6 of the Clean Air Act, 1968.

Two complaints of dark smoke emissions from chimneys and eleven complaints of other smoke nuisances were investigated, all of which were dealt with satisfactorily.

Five complaints of offensive smells and fumes alleged to be from the Leadworks were received and as these Works are registered under the Alkali Works Regulations Act, they were referred to H.M. Inspector of Alkali, etc., Works.

Following the initiation of investigations into Environmental Hazards from Lead by the Department of Health and Social Security, samples of dust and soil, from selected areas around the Leadworks, taken at monthly intervals from January to April, 1972, were submitted to the Department of Scientific and Industrial Research at Warren Spring Laboratories, Stevenage, as part of an overall investigation into the matter.

Following numerous complaints received over many years, mainly from residents in the Saltney, Curzon Park and Lache areas, of offensive smells emanating from the Animal By-Products Factory of Messrs. Clutton & Sons, situated just outside the City Boundary in East Saltney, the City Council resolved in March, 1972, to purchase these premises and the Factory was closed and all operations ceased on 20th April, 1972, and this long-standing nuisance was finally abated.

# FOOD HYGIENE (GENERAL) REGULATIONS, 1970

Detailed inspections of food premises continued during the year.

On initial inspection, the premises were classified following consideration of (a) suitability of premises, (b) type and condition of equipment; (c) methods employed and (d) general standards of hygiene.

The following table shows the classification of food premises at the end of 1972:—

Excell	ent	145
Good	,.,	501
Fair		150
7		_
Bad		-
	TOTAL	796

The following is a list of the food premises in the City, grouped in categories of trade carried on, showing those which comply with Regulation 18 (provision of wash-hand basins, hot and cold water, soap, nail brushes and clean towels) and Regulation 21 (provision of sinks and hot and cold water, etc.) of the Food Hygiene (General) Regulations, 1970:

	No. of Premises	No. fitted to comply with Regulation 18	No. to which Regulation 21 applies	No. fitted to comply with Regulation 21
Bakehouses	6	6	6	6
Butchers' Shops and				
Meat Depots	64	63	64	63
Cake Shops	24	24	24	24
Canteens	59	59	59	59
Fishmongers	12	12	12	12
Fried Fish Shops	20	20	20	20
General Provision Shops	132	132	132	132
Greengrocers	57	56	57	57
Hotels and Guest Houses	58	58	58	58
Licensed Premises	167	167	167	167
Restaurants, Cafes and Snack Bars	70	70	70	70
Sweets and Ice Cream Shops	82	82	81	81
Other Food Premises	45	45	45	45
	796	794	795	794

Ninety-four inspections of stalls and delivery vehicles were also made during the year under the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966, as amended.

Lectures and demonstrations have been given to staffs of food premises and various organisations on the principles of food hygiene and the potential dangers due to the neglect of personal and kitchen hygiene.

Two courses each of fourteen lectures on food hygiene were also given to food handlers by one of the Senior Public Health Inspectors at the College of Further Education. The courses were based on the syllabus of the Royal Society of Health and after both written and oral external examination at the termination of the courses, a qualifying Diploma certificate was issued by the Society to 15 successful candidates.

#### LICENSED PREMISES

Three hundred and thiry-two inspections of licensed premises were carried out.

Works of improvement and modernisation continued and eight premises have closed and two others were demolished during the year.

# FOOD AND DRUGS ACT, 1955

One hundred and seventy-two samples of foods were submitted to the Public Analyst and with the exception of eight samples, on which the appropriate action was taken, all were certified to be genuine.

One hundred and fifty-seven complaints were received during the year in connection with articles of food purchased in the City, being an increase of thirty-one over the previous year. All were investigated and resolved informally, mainly by identifying the cause of the irregularity, and ensuring that adequate precautions were taken to prevent recurrence. Warnings were issued where appropriate.

# THE MILK AND DAIRIES (GENERAL) REGULATIONS, 1959

Milk is sold from premises within the City as follows:-

Premises registered as Dairies	 	 ***	4
Distributors with premises in the City	 	 	98

# THE MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1963 AND 1965

A further seven Dealer's (Pre-Packed Milk) Licences for the sale of designated milk were issued to cover the five year period ending 31st December, 1975, following inspection of all the premises.

## Bacteriological and Biological Examinations of Milk

Thirty-five samples of the various types of milk sold in the City were submitted to the Public Health Laboratory for bacteriological examination. All passed the appropriate tests with the exception of one sample of channel islands pasteurised milk which failed the methylene blue test for cleanliness and keeping quality and in this case the producer, retailer and Local Authority concerned were notified of the result and appropriate action requested to prevent a similar recurrence.

No samples of untreated milk were submitted for biological examination because the supply of untreated milk in the City had virtually ceased.

# ICE CREAM

# **Bacteriological Samples**

Ice Cream (Heat Treatment, etc.) Regulations, 1959

During the year five samples of ice cream were bacteriologically examined at the Public Health Laboratory and all were found to be satisfactory.

# SLAUGHTER OF ANIMALS ACT, 1958

Twelve renewal licences were issued to Slaughtermen during the year to slaughter or stun animals in a slaughterhouse or knackers yard.

# MEAT AND FOOD INSPECTION

In accordance with the Meat Inspection Regulations, 1963, as amended, all animals slaughtered and meat dressed in the City are inspected by the Authorised Meat Inspectors at the Public Abattoir.

Food condemned during the year amounted to:-

Tons	Cwts.	Qrs.	Lbs.
25	7	2	12
19	4	1	2
44	11	3	14
	25 19	25 7 19 4	25 7 2 19 4 1

The following table shows the percentage of animals affected with disease:—

# CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs
Number killed and inspected	9199	630	17	29997	20241
All Diseases except Tuberculosis and Cysticercus Bovis Whole carcases condemned		_		8	39
Carcases of which some part or organ was condemned		427		3825	3920
Percentage	35.78	67.78	-	12.78	19.56
Tuberculosis only	-	17 <del>-</del>	100 <u></u>	-	1110
Cysticercosis  Carcases of which some part or organ was condemned and the remainder refrigerated	982 9	1	-	-	
Percentage	0.37	0.16	5/4 1/2	641 <u>-3</u> 5	100

This was the fifth consecutive year during which all animals passing through the abattoir were free from tuberculosis.

# **Poultry Inspection**

There are no poultry processing premises in the City.

# OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

This Act safeguards the health, safety and welfare of persons employed in these premises and in Chester, 12,539 are employed in 1,094 registered premises.

The major part of the work under the Act involved the re-inspection of registered premises where contraventions had been noted previously. Initial inspections were also made of all newly registered premises.

Twenty-four accidents were notified during the year and all were investigated. None were found to be due to omissions or negligence on the part of employers and the majority of the accidents reported were due to persons falling, in some cases there being no explicable reason for the accident.

As a result of the investigation of one particular accident, in which a young employee was trapped by the hands in a new baling machine, due to failure of a safety device, all premises in the City where this type of machine is used were visited and recommendations made for various precautions to be taken in relation to the operation, regular maintenance and safety checks on these machines.

Working conditions generally in premises covered by the Act continue to improve and it was not necessary to resort to the institution of legal proceedings during 1972.

# Registration and General Inspections

	all prints	ber of premises	premises eneral during
Class of Premises	Number of registered (	Total num registered 1 at end of 15	Number of registered receiving g inspection the year
Offices	26	385	33
Retail Shops	27	554	193
Wholesale Shops, Wharehouses	5	46	9
Catering Establishments open to the public, Canteens	3	109	31
Fuel Storage Depots		-	
TOTALS	61	1094	266

Analysis of persons employed in Registered Premises by workplace:

Class of Workplace					Per	Number of rsons Employed
Offices					 	5525
Retail Shops					 	4648
Wholesale Depart	ments,	Wareho	ouses		 	885
Catering Establish	ments	open to	the P	ublic	 	1383
Canteens					 	89
Fuel Storage Dep	ots				 	9
						12539

(5,014 Males, 7,525 Females)

#### **ACCIDENTS**

Accidents to persons employed in registered premises must be notified under the Act and the following tables show the number of accidents reported, the action taken following investigations and an analysis of the causes of the accidents:—

# Reported Accidents

					Action	Taken	
	Vorkplace		Number/Reported and Investigated	Prosecution	Formal Warning	Informal Advice	No Action
Offices			1	_		1	-
Retail Shops			14	_	- 10	14	-
Wholesale Sh	ops, Vareho	ouses	3	_	1	2	and a
Catering Esta open to the	blishm public Cant	,	6	_	-	6	north
Fuel Storage	Depot	s	-	2 -	- 31	AT COL	-
T	OTAL	S	24	Minds by	Ma lo at	23	denov

	Offices	Retail Shops	Wholesale Warehouses	Catering Establishments open to the Public, Canteens	Fuel Storage Depots
Machinery	_	_	1	1	_
Transport	_	-	_	1	_
Falls of Persons Stepping on or	1	9	1	3	-
striking against object					
or person	-	1	-	1	-
Handling Goods	_	3	1	-	_
Struck by falling object	-	_	_	_	_
Fires and explosions	-	-	-	-	-
Electricity	-	-	-	_	_
Use of hand tools	_	-	-	_	_
Not otherwise specified	100	1	13 TA	1	-

# PREVENTION OF DAMAGE BY PESTS ACT, 1949 RODENT CONTROL

#### Rats in Sewers

As rats can live and multiply rapidly in sewers and as the City sewers communicate via drains with all premises in the City, it is important to keep the sewers as clear of rats as possible in order to prevent premises being infested from this source.

Therefore the older sewers which had been infested in the past were again treated via selected manholes with fluoroacetamide poison during the Spring and Autumn of 1972.

The Autumn treatment was preceded by a test bait and particularly good coverage was given both in test baiting and in poisoning to the sewers in the Newtown, Garden Lane and the City Centre areas and each showed evidence of a little rodent activity. Also, with the exception of very minor evidence in Handbridge the remainder of the sewers were found to be clear of rats.

#### Surface Infestations

Besides treatment of the sewers; the refuse tip, sewage works, together with building and demolition sites are kept under routine observation and

treated when necessary. Regular inspections of 'black spots' (sites which have been subject to rat infestation in the past) have continued.

Number of 'black spots'	***	 		68
Number of visits to 'black spots'		 		248
Number of 'black spots' found infe	sted	 	***	5

In addition, 302 permanent baiting points were maintained throughout the City during 1972. These consist of Warfarin baits in pipes laid mostly along the banks of the river, canal and brooks and the railway ambankments, all again potential breeding sites for rats, particularly where these sites are near to houses or other premises. These points are visited at intervals and baits replenished if necessary. The object is to deal with rats coming into the area and so prevent colonies and infestations arising.

Number of permanent baiting points	 	 302
Number of visits to these points	 	 571
Number of these points found infested	 	 74

The following is the Annual Report on Rodent Control for 1972 as required by the Ministry of Agriculture, Fisheries and Food.

#### RODENT CONTROL-REPORT FOR 1972

		TYPE OF PI Non Agricultural	
	Number of Properties in District (a) Total number of properties (including nearby premises) inspected following notifica-	25932	7
	tion	482	_
	(b) Number infested by:		
	(i) Rats	87	_
	(ii) Mice	364	_
3.	(a) Total number of properties (sites) inspected for rats and/or mice for reasons other than notification (black spots and permanent baiting points for		
	rats)	370	Similar Street
	Number infested by:		
	(i) Rats	79	- 100
	(ii) Mice	Harris Cont.	-
4.	Were any sewers infested by rats	Van	
	during the year?	Yes	

The number of properties infested by rats 2(b)(i) is virtually the same as for the last two years, thus consolidating the considerable reductions achieved in previous years.

The number of properties infested by mice 2(b)(ii) is however again relatively high, due to the difficulty of controlling the warfarin resistant mice involved, without an effective alternative rodenticide.

# PET ANIMALS ACT, 1951

Five shop premises where pets are kept for sale were licensed under the Act following inspection, and all complied with the terms of the licences.

# ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

Two premises where animals are boarded under the Act were licensed following inspection.

# COMMON LODGING HOUSES

There are no registered Common Lodging Houses within the City.

# NOISE ABATEMENT ACT, 1960

Eleven complaints were received during the year of noise nuisance, ten of which were dealt with satisfactorily. In the other case some remedial measures have already been carried out but some work required is still to be attended to.

## LECTURES

During the year, lectures on various aspects of Environmental Health were given to a number of organisations, students and nurses.

# FACTORIES ACT, 1961

#### PART I

#### 1. Inspections.

200			Number o	of
Premises	Number on Register	Inspections	Notices Written	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authorities	29	1	_	_
(ii) Factories not included in (i) in which Section 7 is en- forced by the Local Authority	320	44	6	_
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out- workers' premises)	13	4	_	
TOTAL	362	49	6	

# 2. Cases in which DEFECTS were found.

	No. of	s in ecutions ted			
Particulars	Found	Reme- died	To H.M.	erred By H.M. Inspector	No. of Cas which Pros were institu
Want of cleanliness (S.1)	11/19/	1-	10144.0		1
Overcrowding (S.2)	_	-	_	_	_
Unreasonable temperature (S.3)	_	_	-	_	_
Inadequate ventilation (S.4)	_	_	-	_	_
Ineffective drainage of floors (S.6)		_	_		
Sanitary conveniences (S.7): (a) Insufficient	201	1	100	_	_
(b) Unsuitable or defective	6	6	-	-	_
(c) Not separate for sexes	_	_	-	-	-
Other offences against the Act (Not including offences re- lating to Out work)					
TOTAL	6	6	_	_	

# PART VIII

# OUTWORK (Sections 133 and 134)

No. of August 1 Sect. 133( No. of ca sending li cil No. of jailure to l'ailure to No. of in in unwho Notices s	NATURE OF WORK	outworkers in six required by SC	ses of default in Lists to the Coun-	rosecutions for guarantees	stances of work Selesome premises	TION	T 134
	(1)	No. of August 1 Sect. 133(	No. of ca sending li	No. of p	(5) No. of in in unwho	9 Notices s	3 Prosecutio



